

TOGETHER WE CARE

2021 SUSTAINABLE DEVELOPMENT REPORT



MEDICLINIC'S CORE PURPOSE IS TO ENHANCE THE QUALITY OF LIFE

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Conserve

Mediclinic takes responsibility for its operations beyond its facilities to mitigate the risks of climate change.





Connect —

The Group is dedicated to partnering with all its stakeholders and forging long-term relationships.

> Mediclinic Bloemfontein, South Africa

Comply

The Mediclinic corporate culture entrenches the values of ethical and responsible behaviour.

> Mediclinic Medforum, South Africa



ABOUT THIS REPORT

Mediclinic International plc ('**Mediclinic**' or the '**Company**') is proud to publish a Sustainable Development Report annually as part of a suite of reports in respect of both the 2020 calendar year and 2021 financial year ('**FY21**').

The reporting suite listed below is available on the Group's website.

2021 Annual Report and Financial Statements

2021 Clinical Services Report

2021 Sustainable Development Report

2021 Modern Slavery Statement

2021 Notice of Annual General Meeting

SCOPE

The goal of this report is to provide Mediclinic stakeholders with an overview of the most important sustainable development initiatives across its divisions in Switzerland, Southern Africa (South Africa and Namibia) and the United Arab Emirates (**'UAE**') (collectively, the '**Group**') for the 2020 calendar year. Information is disclosed on a calendar year basis, unless stated otherwise.

Mediclinic reports on its material issues at a Group level, but also discloses information on divisional initiatives and performance, as this is the level at which data is collected.

Although certain information is segmented per division, it should be noted that in some instances data from other South Africa-based entities, which are either wholly owned by or a subsidiary of the Company, has been included in the disclosure allocated to the Southern African region.

The report does not include information on initiatives undertaken by Spire Healthcare Group plc, a leading private healthcare group based in the United Kingdom (**'UK'**) and listed on the London Stock Exchange (**'LSE'**), in which Mediclinic holds a 29.9% interest.

ASSURANCE

During 2021, the Group's Internal Audit function verified a selection of the environmental, social and governance (**'ESG**') data reported on in this report. In this, it relied on the integrity of the information received from the divisions and recalculated and confirmed the information contained in the data sources. The following data was verified:

- carbon emissions;
- employee numbers, age, gender, training and turnover, as well as employment equity;
- corporate social investment ('CSI') expenditure; and
- number of calls made to the ethics lines.

APPROVAL

Mediclinic's Clinical Performance and Sustainability Committee approved this report on 19 May 2021.

GUIDELINES

Mediclinic reports in accordance with the core option of the Sustainability Reporting Standards developed by the Global Reporting Initiative ('**GRI Standards**'). The GRI Standards Disclosure Index, which indicates the location of the standard disclosures, is published on the Group's website.

NON-FINANCIAL INFORMATION STATEMENT

The Company's *Non-financial Information Statement* is published in the **2021 Annual Report**, in accordance with the Companies, Partnerships and Groups (Accounts and Non-financial Reporting) Regulations 2016. The regulations adopt the European Union ('**EU**') Non-financial Reporting Directive 2014/95/EU, which requires disclosure of information about policies, risks and outcomes regarding:

- environmental matters refer to Material issue 1: Minimising environmental impact on page 26;
- employee, social and human rights matters refer to Material issue 2: Building stakeholder trust on page 34; and
- anti-corruption and anti-bribery matters refer to Material issue 3: Being an ethical and responsible corporate citizen on page 63.

ESG DISCLOSURES

As a healthcare provider, Mediclinic commits to doing no harm. Yet, as with any other business, the Company's operations have ESG impacts. All these impacts have an effect on the natural and living environments, and on society at large. The Group's efforts in responsibly managing and minimising these are interwoven into the way it does business.

Global pandemics, climate change, natural resource scarcity, social inequity and the evolution of technology continue to confirm that what Mediclinic once classified as non-financial risks are emerging as material.

The Group routinely engages with ESG-rating organisations, good governance initiatives and investors to better understand their expectations and reflect their priorities in its business activities and disclosures.

Name of index, rating or principles	Company/ Organisation	Country	History of inclusion/ participation
FTSE4Good Index	FTSE Russel	UK	5 th consecutive year
ISS ESG Prime Status	ISS	Germany	1 st year
MSCI ESG AAA Rating	MSCI	United States	3 rd consecutive year
Sustainalytics	Sustainalytics (a Morningstar company)	Netherlands	9 th consecutive year
Ethical Principles in Health Care (' EPiHC ')	International Finance Corporation (a member of the World Bank Group)	United States	1 st year
CDP	CDP	UK	13 th consecutive year
Hampton Alexander	UK Government	UK	5 th consecutive year

GLOSSARY OF TERMS

Capitalised terms used in this report are defined in the Glossary of terms on page 70.

SHARE YOUR VIEW

Mediclinic welcomes the opinions of its stakeholders. Please contact Ms Marlene de Beer on email: <u>marlene.debeer@mediclinic.com</u> with queries or suggestions.



INTRODUCTION

HEALTHCARE WITH HEART

The important role of large corporates in modern society was already widely recognised before the emergence of the COVID-19 pandemic, and must be emphasised even more at this time. Each business today plays a vital role in supporting livelihoods – of its employees, the communities it serves and the national economies in which it operates.

Healthcare is unique in that, during this time, it has been the industry around which national responses have been designed. It has been, and continues to be, centre stage – what the industry does during this time will define it for decades to come.

Mediclinic's actions are guided by an unwavering motivation to prevent, treat, care and protect. In this, it dedicates resources – whether physical, social or natural – towards achieving its purpose. The Group is eschewing a culture of consumption in favour of a culture of conservation and connection. These goals transcend the natural environment to include interactions with each other, protection of human rights, and a commitment to doing the right thing, even when no one is watching.

MEDICLINIC'S SUSTAINABLE DEVELOPMENT MISSION STATEMENT

'We are committed to ensuring that every day we improve sustainability by managing our resources responsibly and efficiently to the benefit of our stakeholders and the environment.'

GROUP SUSTAINABLE DEVELOPMENT GOVERNANCE STRUCTURE

The Group Sustainable Development Strategy gets reviewed biannually by the Clinical Performance and Sustainability Committee, with a strategy feedback session once a year.

BOARD OF DIRECTORS

Number of directors with ESG knowledge and experience: 4

Responsible for ensuring:

- good corporate governance;
- strategy and long-term sustainable success;
- alignment of activities with organisational culture; and
- effective stakeholder engagement.

AUDIT AND RISK COMMITTEE

Responsible for reviewing the principal risks of the Group, including those related to material sustainability issues.

CLINICAL PERFORMANCE AND SUSTAINABILITY COMMITTEE Responsible for:

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- ensuring the Group remains a
- good and responsible corporate citizen;
- promoting a culture of excellence in patient safety, quality of care and client experience together with Mediclinic's values, ethical standards and behaviours; and
- monitoring the sustainable development performance of the Group.

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NOMINATION COMMITTEE

Responsible for reviewing the implementation of the Group Diversity and Inclusion Strategy. RESPONSIBLE FOR

GROUP CHIEF GOVERNANCE OFFICER

Responsible for coordinating sustainable development activities across the Group.

GROUP SUSTAINABLE DEVELOPMENT FORUM

Responsible for ensuring alignment and execution of the Group Sustainable Development Strategy at divisional level and the entrenchment of best practices across the Group.

DIVISIONS

Responsible for the implementation and management of divisional sustainable development activities.

For more information on the focus areas and outcomes of Board and committee activities for FY21, as well as the Board's engagement with stakeholders, please refer to the **2021 Annual Report**.

ABOUT MEDICLINIC AT A GLANCE

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By evolving across the continuum of care, offering services that care, recover, enhance and prevent, the Group is deliberately positioning itself for a sustainable future.

PURPOSE

To enhance the quality of life

VALUES

- In behaviour, Mediclinic commits to being:
- client centred
- trusting and respectful
- patient safety focused
- performance driven
- team orientated

OPERATIONS

Mediclinic is a diversified international private healthcare services group with divisions in Switzerland, Southern Africa (South Africa and Namibia) and the UAE. The Group operates more than 115 healthcare facilities across the continuum of care.

Mediclinic International plc has been listed on the JSE since 1986, the Namibian Stock Exchange since 2014, and the LSE since 2016. Refer to the 2021 Annual Report for changes in the Group's business and operating environment during FY21.

FROM ACUTE CARE TO HEALTHCARE

Established in South Africa in 1983 as a provider of acute care in hospitals, the Group has expanded and evolved significantly since inception, and currently has divisions in Switzerland, Southern Africa (South Africa and Namibia) and the UAE, through Hirslanden, Mediclinic Southern Africa and Mediclinic Middle East respectively.

Over the past few years, the healthcare industry has encountered unprecedented change due to rapid development in the global landscape, most notably driven by ageing populations, a growing burden of lifestyle diseases, advances in new medical technology, virtual care and emerging healthcare consumerism. These provide opportunities for growth.

Mediclinic is adapting to address this changing landscape in which convenient access to the most appropriate care in the most appropriate setting at the most appropriate cost has become critical to success. By evolving across the continuum of care, offering services that prevent, care, recover and enhance, the Group is deliberately positioning itself for a sustainable future.



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SAFEGUARDING THE FUTURE

Dr Felicity Harvey, Chair of Mediclinic's Clinical Performance and Sustainability Committee, reflects on the Group's efforts to create a better world.

What inspires you to work on sustainability?

Sustainable development is about improving our place in the world. From a public health perspective, which I have been involved in for many years, it is also about improving people's lives. Sustainable development and why I went into healthcare are so intertwined that I naturally gravitate towards it.

• What difference can a single business such as Mediclinic make?

We may think of ourselves as a single organisation, but the reality is we touch thousands of people. That is because of our stakeholders, who include not only the people we treat and who work for us, but also the companies that partner with us, the governments in whose countries we work, and the regulators with whom we work. When we are clear about why sustainability is important, it enables us to spread the message widely and to impact what our contacts do. One organisation can actually have a huge multiplier effect.

• Which of the sustainability initiatives give you the greatest pride?

What we have achieved on the environmental front is notable. Not only is the environment impacted by what we do in healthcare, but we also feel its impact ourselves. We are seeing the effects of climate change every year and in 2020 we experienced these quite dramatically. The fact that we have been able to sign up to carbon neutrality and zero waste to landfill by 2030 is incredibly important. I am proud that we have set challenging targets – and that we are determined to meet them. We will continue to develop the roadmaps that will get us there.

The pandemic has also put a spotlight on what we do to support our employees. More than at any other time in our history, we are really focused on our healthcare workers and the huge amount with which they have to cope. They are so critical to everything we do, so we have applied ourselves, more than ever, as to how we support them.

• Over the past year, Mediclinic has made minimising its environmental impact one of the Company's strategic goals. What led to this shift in emphasis?

Sustainable development has been a key aspect of what we do for many years, but in 2020 we approved our Group Sustainable Development Strategy. To achieve our challenging environmental goals, we needed to make minimising environmental impact a key aspect of our strategic goals. Bringing it to the fore in the way we have, means we are far more likely to be successful. Over the past year, there has also been growing interest in looking after the environment and that really engages all of our employees. Now we need to accelerate our efforts to turn our goals into a reality.



Dr Felicity Harvey Chair of the Clinical Performance and Sustainability Committee

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I am proud that we have set challenging targets – and that we are determined to meet them.

O you see parallels between the pandemic and climate change?

The scale of the pandemic's impact is far greater than anyone ever imagined and therefore it has focused minds across the globe on our vulnerability. Every aspect of life has been affected, which has made us realise that unless we take serious steps, our children will not be able to live the way we have. In the same way, we need to be thinking about our extremely fragile planet and what we can do to protect it.



> View a condensed video interview.

FOR PEOPLE AND PLANET

As the executive responsible for coordinating sustainable development, Group Chief Governance Officer Gert Hattingh talks business.



I have seen first-hand how climate change affects the countryside. Large parts of South Africa, especially the Karoo, are experiencing one of the worst droughts in history, which has already lasted for more than seven years. Drought does not only impact the land and farming operations but also the surrounding communities. We need to combat climate change to ensure that these drier areas of the country, and in the rest of the world, do not turn into deserts.

• Your tenure at Mediclinic spans three decades. How has the Company's approach to sustainability been refined over that period?

Mediclinic has always managed the business in a sustainable way. In 2002, Mediclinic Southern Africa was the first hospital group in Africa to implement the ISO 14001 environmental management system.



> View a condensed video interview.

As demands and needs change, we have adapted our business and implemented best practices to the benefit of people and the planet. With the Group Sustainable Development Strategy, we will ensure that this remains the case and that all aspects receive the necessary focus in a coordinated approach across the Group.

O Do you see Mediclinic's sustainability initiatives play a role in the Company's bottom line?

Definitely. The Group Sustainable Development Strategy has goals across ESG to ensure we become more efficient with our energy use, reduce waste and lower the Company's risk profile. Having access to uninterrupted electricity supply, along with saving on the cost thereof, has a direct impact on the bottom line.

• What were the main challenges you faced on the sustainability front in 2020?

The most difficult was the roll-out of the ISO 14001 management system at Hirslanden and Mediclinic Middle East. Not only had we given new priority to the Group's ESG strategy in 2020, but we also had to reallocate resources due to the COVID-19 pandemic. Added to that was the difficulty of implementing the Environmental Banc & Exchange ('EBX') data management system and obtaining data across divisions in a year with operational disruptions. The EBX data management system was developed by an American company that provides customised mitigation and



Gert Hattingh Group Chief Governance Officer

ecological offset solutions to clients with impacts to natural resources.

Having all this in place, however, empowers us to achieve more going forward.

• What are you doing to ensure that sustainability is top of mind for all employees?

This happens by way of Group and divisional communication campaigns which address the E, S and G priorities of each division, as well as those managed at a Group level. In addition, the ISO 14001 management system is a practical day-to-day tool which serves as a constant reminder of the environmental component of the strategy. But, ultimately, the organisational culture, together with leadership from the top of the organisation, ensures sustainability remains a focus for everyone.

What gives you hope for the future?

Around the world there is an awareness of sustainable development and its importance. We all have our part to play. What gives me hope is the fact that we have a dedicated workforce who respect global best practices and ensure that the Group's Sustainable Development Strategy is properly executed. They also make sure that we improve daily by considering new technologies and things we can do differently to save our planet. This speaks to our organisational culture, the way we have conducted business in the past, and how we will continue to do going forward.

HIGHLIGHTS

GROUP

Established Group Sustainable Development Forum to ensure execution of the Group Sustainable Development Strategy Amended diversity and inclusion goal for senior management to 40% female and 40% male Signed up to EPiHC Ranked as the foremost healthcare provider according to MSCI ESG rating with a top AAA score for third consecutive year Ranked 32nd globally on REFINITIV Diversity and Inclusion Index, the top ranking Healthcare Providers and Services company

HIRSLANDEN

16 out of 17 hospitals registered as CO_2 -reduced businesses by the Energy Agency of the Swiss Private Sector ('**EnAW**'), and awarded with CO_2 & kWh-reduced certificates Clinique La Colline and Clinique des Grangettes, as part of Association des Cliniques Privées de Genève, Genève-Cliniques (the Association of Private Hospitals of Geneva), together with the University Hospitals of Geneva ('**HUG**'), were awarded the Geneva Innovation Prize 2020, highlighting the remarkable collaboration of public and private hospitals during the COVID-19 pandemic Ranked fifth and sixth most attractive employer in Swiss healthcare by healthcare and medical students, and healthcare professionals respectively in an independent study by Universum Communications Ranked 22nd in its sector across Europe in the *Financial Times*' Diversity Leaders Survey and awarded the title Leader in Diversity

Mediclinic Louis Leipoldt, South Africa

MEDICLINIC SOUTHERN AFRICA

Ranked 28th of all JSE-listed companies in the Top 50 Brand South Africa rankings for 2020, making it the top South African healthcare provider for more than six years in succession Achieved Global B List status from the CDP for water conservation and climate change actions Donated personal protective equipment ('**PPE**') worth ZAR15m to provincial health departments in response to the pandemic

MEDICLINIC MIDDLE EAST



Awarded Superbrand status by the UAE Superbrands Council for 2020, the fifth time in six years

Mediclinic Zakher, the UAE Mediclinic City Hospital's Comprehensive Cancer Centre awarded the prestigious Dubai Healthcare City Authority Award in two categories: the Healthcare Innovation Award and also the Top Emirati Contributor Award for Dr Shaheenah Dawood Chief Executive Officer ('**CEO**') David Hadley awarded the titles of Healthcare Leader of the Year and Business Leader of the Year at the 2020 Gulf Business Awards





ESG IN THE GROUP'S DNA

MEDICLINIC'S RESOURCES



ENVIRONMENTAL

GOVERNANCE

MATERIAL ISSUES MATERIALITY ASSESSMENT

The Clinical Performance and Sustainability Committee annually reviews the Group's material sustainability issues. This is done to ensure that management initiatives are directed at the sustainable development matters that are most significant to the business, and which directly affect the Group's ability to create long-term value for its key stakeholders. The assessment is informed by the following considerations:

- **Relevance** whether the Group's prior year sustainability focus areas are still relevant;
- Risk Mediclinic's ESG impacts/risks, taking into account the views, concerns and legitimate expectations of stakeholders (as set out in the 'Significant stakeholders' section on pages 16–25) and those impacts which the Company can influence or control;
- **Resources** Mediclinic's dependency on the six capitals (financial, manufactured, human, intellectual, social

and relationship, and natural) as identified by the International Integrated Reporting Framework;

- **Reference** the guidance on determining materiality contained in the GRI Standards and the Sustainability Accounting Standards Board materiality map for healthcare; and
- **Requirements** regulatory requirements/developments relating to non-financial reporting, information needs of indices and sustainability assessments by investor groups, sustainability megatrends (e.g. poverty and inequality, environmental degradation and climate change, technological innovation, demography), and global initiatives such as the United Nations ('**UN**') Global Compact Principles and the 17 UN Sustainable Development Goals ('**SDGs**').
- Refer to page 10 for more information on the Group's SDG contributions.



ESG INDEX

Mediclinic's relationships with its stakeholders are key to its sustainability, informing how the Group manages strategy, performance and risk. The link between the Group's three material issues and the Mediclinic Group Strategy is detailed below.

ENVI	RONMENTAL	MATERIAL ISSUES	LINK TO GROUP STRATEGY	UN SDG ALIGNMENT	KEY STAKEHOLDER/S
ESG GOAL	To minimise the Company's environmental impact		This ESG goal was elevated to a Mediclinic Group Strategic Goal in 2020	2 1900 190022 3 1000 HELLIN AND HELLING 	Clients, communities, employees and potential applicants,
	Become carbon neutral by 2030	Carbon emissions Energy efficiency	governm gwernment gwernment gwernment gwernment and auth industry		governments and authorities, industry associations,
	Minimise the impact of climate change on the business	Climate change Biodiversity		12 REVENSE CONSUMPTION AND PRODUCTION	investors, media, medical practitioners and suppliers
SUB-GOALS	Sustainably use and reuse water resources	Water resources	-	13 CHANTE CONTRACTOR 15 UPLAND	
SUB	Have zero waste to landfill by 2030	Waste and hazardous waste management	-	• **	
	Drive environmental sustainability by way of an effective environmental management system	Biodiversity An effective environmental management system			

Mediclinic Panorama, South Africa



CHF4m, ZAR40m and AED8m budgeted for green initiatives in FY22 at Hirslanden, Mediclinic Southern Africa and Mediclinic Middle East respectively.

RISKS	RISK MITIGATION	2021 FOCUS AREAS
 Business interruptions Increased operational costs Reputational damage Impact of carbon tax and climate change legislation Fines and penalties 	 Environmental goal forms part of Mediclinic Group Strategy Risk management process and systems of internal control embedded in Group Annual review of policies: Enterprise-wide Risk Management Policy, Sustainable Development Policy, Environmental Policy, Group Waste Management Policy 	 Conclude renewable energy purchase agreements at five Mediclinic Southern Africa facilities for 8GWh/year for implementation in FY22 Photovoltaic ('PV') installations at 10 Mediclinic Southern Africa facilities, generating 4.9GWh/year CHF4m, ZAR40m and AED8m budgeted for green initiatives in FY22 at Hirslanden, Mediclinic Southern Africa and Mediclinic Middle East respectively Divisional Natural Resources Sustainability Committees to conclude targets and roadmaps for 2021, up to 2030, to (a) achieve carbon neutrality; (b) reduce electricity usage and shift to renewable energy; (c) reduce water usage and secure quality water supply; and (d) have zero waste to landfill by 2030 All divisions to participate in Environmental Sustainability Risk Assessment Conduct divisional water quality and quantity risk assessments In collaboration with the Procurement department, review top suppliers' environmental practices and discuss plans to reduce packaging waste Implement ISO 14001:2015 Environmental Management System at three Hirslanden and five Mediclinic Middle East hospitals

Klinik Im Park, Switzerland



ESG INDEX CONTINUED

SOCI	AL	MATERIAL ISSUES	LINK TO GROUP STRATEGY	UN SDG ALIGNMENT	KEY STAKEHOLDER/S
ESG GOAL	To be the partner of choice that stakeholders trust			1 ^{толит} 1 х т т т 3 соот мали 	
	Improve diversity and promote a culture of inclusion	Human rights Diversity and inclusion	Without a diverse, engaged, competent workforce that prescribes to the Group's purpose, vision and mission, and live the organisational values every day, Mediclinic will not	S CONTRACTOR	Employees and potential applicants
	Enhance employee experience to strengthen the position as employer of choice	Employee engagement Employee recruitment and retention	be able to execute any of its strategic goals	12 mondate connectors 17 mondate Sectors	
ALS	Advance employee health and safety	Employee wellness and safety			
SUB-GOALS	Optimise Group supply chain performance significantly	Supply chain management			Healthcare insurers, industry partners, investors and suppliers
	Improve the client value proposition significantly	Patient experience Healthcare infrastructure	This ESG sub-goal is also a Mediclinic Group Strategic Goal		Clients, employees and potential applicants, governments and authorities, healthcare insurers, industry partners and medical practitioners
	Contribute effectively and in an aligned manner to CSI across the Group	CSI Human rights			Clients, communities, employees and potential applicants, and governments and authorities

RISKS	RISK MITIGATION	2021 FOCUS AREAS
 Poor employee engagement and wellness Inability to recruit healthcare practitioners to meet business demand Ageing nursing workforce with decreasing entrants to profession Poor clinical outcomes and services Medical malpractice liability Reputational damage Inability to continue business due to inadequate supplies 	 Group Sustainable Development Strategy with social objectives Implementation of Mediclinic Diversity and Inclusion Strategy Effective execution of employee engagement action plans Extensive training and skills development programmes Establishment of Global Leadership Development Framework Continued implementation of a Group learning architecture to build competence aligned to Group strategy CSI initiatives monitored by senior management with feedback to Clinical Performance and Sustainability Committee Group purchasing organisation ('GPO') established to secure products at reduced prices Five-year Group procurement vision to optimise end-to-end supply chain performance 	 Strengthen Group and divisional talent pipelines towards achieving target of at least 40% female and at least 40% male representation at senior management and executive level Achieve 2% Emirati representation by the end of 2021 at Mediclinic Middle East Achieve Employment Equity targets aligned to B-BBEE targets in Southern Africa Continue implementation of divisional action plans to improve culture of inclusion in answer to employee perspectives shared in <i>Your Voice</i> employee engagement survey Conclude roll-out of Group recruitment management system at Mediclinic Southern Africa and Mediclinic Group Services Continue implementation of divisional initiatives aligned to Group policy to ensure optimal employee outcomes E-procurement pilot project at Hirslanden go-live during May 2021 Refer to the 2021 Clinical Services Report

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Strengthen Group and divisional talent pipelines towards achieving target of at least 40% female and at least 40% male representation at senior management and executive level.

ESG INDEX CONTINUED

GOVE	RNANCE	MATERIAL ISSUES	LINK TO GROUP STRATEGY	UN SDG ALIGNMENT	KEY STAKEHOLDER/S
ESG GOAL	To strengthen the corporate culture to remain an ethical and responsible corporate citizen			16 Konner	Clients, employees and potential applicants, governments and authorities, healthcare insurers, industry partners and medical practitioners
	Prevent bribery and corruption	Ethics, anti-bribery and anti-corruption			
	Sustain effective and transparent governance				
SUB-GOALS	Establish effective measures, practices and controls to protect the Group's information assets	Information assets	Links to Mediclinic Group Strategic Goals 'to transform our services and client engagement through innovation and digitalisation' and 'to evolve as a data-driven organisation'		
	Allocate appropriate resources for the maintenance of high-quality healthcare infrastructure	Healthcare infrastructure	Links to Mediclinic Group Strategic Goal 'to improve our value proposition significantly'	9 Machine Meenika Activities Constant Activities Constant Activiti	



RISKS	RISK MITIGATION	2021 FOCUS AREAS
 Fines and possible prosecution Reputational damage Inability to continue business due to legal and regulatory non-compliance or changes in regulatory environment Financial damage caused by poor governance, unethical practices and inadequate risk management Cyber incidents Data privacy breaches Poor facility conditions 	 Group Sustainable Development Strategy with governance objectives Visible ethical leadership Regular fraud and ethics feedback to management, Board and relevant Board committees Independent ethics lines available to all employees and external parties Established Group Risk Management and Compliance and Internal Audit functions Compliance risks assessed as part of risk management process Annual review of policies: Code of Ethics, Anti-bribery Policy and Guidelines, Guidelines on Competition Law Compliance, Enterprise-wide Risk Management Policy, Fraud Risk Management Policy, Regulatory Compliance Policy, Investor Relations Policy, Group Privacy and Data Protection Policy, Group Information Security Management Policy, Data Retention and Disposal Policy and Procedures, and Code of Practice in Dealing in Mediclinic Securities Information security controls Data privacy awareness campaigns and structured e-learning Implementation of key financial controls Planned facility maintenance and upgrades Facility audits 	Conclude roll-out of Group ethics line awareness campaign Continue roll-out of Group information security and data privacy awareness campaign Improve maturity of the information security management system Mature compliance with framework of the EU's General Data Protection Regulation ('GDPR')

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Continue roll-out of Group information security and data privacy awareness campaign.

SIGNIFICANT STAKEHOLDERS

Mediclinic's key stakeholders are those groups who have a material impact on, or are materially impacted by, Mediclinic and its operations.



CLIENTS

The wellbeing of clients and building long-term relationships with them form the cornerstone of the business and the Group's ability to pursue its purpose.

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I carefully considered the nature of the relationship between Mediclinic and those who make use of our services within an evolving healthcare landscape. A patient is a person receiving medical care; a client is a person who receives advice. The latter implies a level of trust and a long-term relationship that extends beyond mere treatment. We want our patients to interact with Mediclinic beyond the conventional treatment process, rather as a client who turns to us to enhance their quality of life.

WHAT MATTERS TO THEM

- Easy access to safe, quality and cost-effective healthcare by means of world-class facilities and technology
- Appropriate care settings
- Treatment information
- The right to make decisions on their care
- Client experience
- Personal data and patient rights

HOW MEDICLINIC ENGAGES

- Systematic patient rounds during hospital stay
- Dedicated employees attend to guest relations at Hirslanden facilities
- Patient experience managers at Mediclinic Southern Africa facilities
- Dedicated employees attend to client complaints at Mediclinic Middle East
- 24-hour helplines
- Press Ganey[®] patient experience index surveys
- Health awareness days
- Brochures and magazines
- Websites and blogs offering health-related information
- Social media
- Client-centred product and programme development
- Corporate events

MEDICLINIC'S RESPONSE

The client is entrenched in three of Mediclinic's organisational values: being client centred, trusting and respectful, and patient safety focused.

Putting *Patients First* remains a strategic focal point for the Group. Mediclinic continues to invest in its people, clinical facilities and technology.

Patient experience programmes

focus on improved caregiver empathy and communication, service recovery, intentional rounding, food service processes that enhance patient experience and safety, and effective management of complaints.

The Group reports on the **clinical performance and patient experience results** of all three divisions in the annual Clinical Services Report.

Hirslanden Privé and Hirslanden

Préférence programmes offer premium patient experience offerings to privately insured and semi-privately insured clients. Private patient fixed fees is one of the alternative reimbursement models established by Mediclinic Southern Africa to offer uninsured patients greater choice and access to its facilities and services.

To continually improve access and affordability, Mediclinic conducts tariff negotiations with insurers in

Dr Ronnie van der Merwe, Group CEO "

Putting *Patients First* remains a strategic focal point for the Group.





a fair and transparent manner; expands facilities based on need; pursues joint initiatives with government; seeks partnerships with healthcare providers that complement its services; and actively participates in healthcare reform.

The Group Data Privacy project

continuously improves privacy and data protection measures and ensures compliance with applicable data privacy legislation.

At Mediclinic Middle East, the Mediclinic Baby programme is

designed to offer standardised services. Benefits include antenatal care packages, free antenatal classes, maternity tours, email and telephone helplines, breastfeeding advice from qualified lactation consultants, a free Mediclinic baby bag filled with essential supplies for newborns and mothers, and access to free baby massage classes after the birth.

© COVIDEVELOPMENT

At Mediclinic Southern Africa, affiliated doctors are provided with a **telehealth solution**, enabling virtual consultations with patients.

Mediclinic Middle East's newly launched mobile application, MyMediclinic 24x7, allows clients to book and manage all in-person and teleconsultation appointments, and speak to their doctor on a video call.

COMMUNITIES

Strong relationships, based on mutual understanding, build trust in the Group's ability to offer high-quality healthcare services, and support both its referral network and the economic development of the communities surrounding its operations.

WHAT MATTERS TO THEM

- Development of communities within the Group's ambit
- Improved health outcomes through greater awareness, better public healthcare training and *pro bono* procedures

HOW MEDICLINIC ENGAGES

- Corporate social responsibility ('CSR') initiatives
- Support for employee volunteer initiatives
- Public-private partnerships ('PPP') and joint ventures at Hirslanden, Mediclinic Southern Africa and Mediclinic Middle East

MEDICLINIC'S RESPONSE

Healthcare awareness campaigns run throughout the year.

COVIDEVELOPMENT

Hirslanden served as medical partner for the national OneMillionRun which aimed to 'run out of lockdown, together' – Hirslanden participants accounted for 2 261km of the total 1 124 737km run in 48 hours. It also supported the I care for you Foundation and its fundraising campaign, #zämefüralli (#togetherforall), for people in Switzerland affected by COVID-19. In support of South Africa's establishment of a Solidarity Fund aimed at assisting the most vulnerable citizens to deal with the impact of COVID-19, the Group CEO and Group Chief Financial Officer ('**CFO**') voluntarily donated 30% of their salaries for three months to this essential national initiative. Similarly, the divisional CEOs and all non-executive directors of the Board voluntarily donated 30% of their salaries or fees for three months to benefit charities with similar aims in the countries in which Mediclinic has a presence. In addition, all other Group and divisional executive committee members made similar donations to related charities in their respective countries.

Employees at Mediclinic Middle East were encouraged to make a donation to the Social Solidarity Fund Against COVID-19, a charitable organisation established by the Islamic Affairs and Charitable Activities Department in Dubai, to support the fight against COVID-19 in collaboration with government entities, charity associations and members of society. Employees' donations through the division's payroll totalled AED285 170; a number of employees also made private donations.



EMPLOYEES AND POTENTIAL APPLICANTS

The exceptional talent and dedication of employees, whose behaviour is guided by the organisational values, enable sustained success. They are the key to consolidating Mediclinic's reputation of 'expertise you can trust', maintaining high standards of care, and achieving the Group's strategic and ESG goals.

WHAT MATTERS TO THEM

- Recognition
- Flexible work arrangements
- Competitive remuneration
- An ethical, safe, fair and healthy working environment
- Access to training and development opportunities

"

Specific care and wellness campaigns were launched in each division to educate employees on the physical and emotional support offered by occupational health clinics and employee wellness programmes.

HOW MEDICLINIC ENGAGES

- Annual Gallup® employee engagement surveys
- Pulse surveys on relevant topics (such as COVID-19)
- Employee interest group discussions or focus groups
- Internal communication campaigns on key topics, i.e. diversity and inclusion, ESG, employee engagement, ethics, data privacy, wellbeing
- Newsflashes and regular electronic updates
- Performance reviews and formal recognition
- Leadership video conferences
 and roadshows
- Continuous leadership communication
- Employee wellness programmes
- Magazines and newsletters
- Work-from-home support

MEDICLINIC'S RESPONSE

Market-related salaries and benefits are offered based on the principles of internal equity, external equity and affordability.

Through its geographic footprint, the Group **offers international career opportunities** and the possibility of cross-division appointments.

Your Voice employee engagement

surveys are conducted annually across all divisions through Gallup®, an internationally recognised service provider. Through the surveys the Group measures levels of engagement, identifies gaps at a departmental level, and supports line managers in implementing action plans to address concerns.

Through training and development

opportunities Mediclinic enhances the skill-set of its employees, thereby empowering the entire organisation and unlocking individual potential. A non-executive director is designated as responsible for reviewing, assessing and reporting on workforce engagement to the Board and investors.

OVIDEVELOPMENT

In addition to the annual Your Voice employee engagement survey, a COVID-19 employee survey was administered in Southern Africa and the UAE at the peak of the pandemic to gain insight into employee needs.

Hirslanden launched an employee app, Beekeeper, during the first wave of COVID-19 in April 2020 to address the need for fast, proactive and widespread communication. At present, Hirslanden reaches around 40% of all employees via the app, with variance in adoption rates at facility level.

Specific care and wellness campaigns were launched in each division to educate employees on the physical and emotional support offered by occupational health clinics and employee wellness programmes.

> View page 55 for more information.





GOVERNMENTS AND AUTHORITIES

Having a business model founded on compliance with applicable legislation and regulations within Mediclinic's geographies safeguards the Company's ability to offer services and operate facilities.

WHAT MATTERS TO THEM

- Healthcare legislation and regulation compliance
- Initiatives and collaboration on issues such as skills shortages and the cost of private healthcare
- Universal access to affordable, quality healthcare

HOW MEDICLINIC ENGAGES

- Regular meetings
- Participation in conferences and seminars
- Representation on industry
 bodies and government boards
- Participation in national health training and education
- Participation in PPPs to enable healthcare, training and research
- Engagement with senior country leaders

MEDICLINIC'S RESPONSE

New PPP with Spitäler Schaffhausen to create the Centre for Urology Zurich at Klinik Hirslanden, bringing the total number of PPPs to six.

Engagement with Swiss

government through Hirslanden's Head of Health Affairs, who holds a seat in the cantonal parliament of Zurich, and the divisional CEO, who is a member of the Economic Advisory Board of the National Government (Economiesuisse).

Mediclinic Southern Africa forms part of the Business Unity South Africa ('**BUSA**') collaboration with government's National Health Insurance ('**NHI**') Bill negotiations.



Participation in the Public Health Enhancement Fund ('PHEF') in

South Africa in support of the training of medical doctors, as well as masters and PhD students in the field of healthcare, the Presidential Health Summit, Public-Private Growth Initiative, CSR commitments, working groups on health technology regulations and drafting of the revised 2030 Human Resources for Health Strategy.

Mediclinic Middle East is represented on the Department of Health in Abu Dhabi's strategic advisory board; the electronic health record ('**EHR**') roll-out committee in Abu Dhabi; and **strategic, clinical quality and price regulation committees**. The divisional CEO has been appointed to the new Economic Public and Private Collaborative Group in Abu Dhabi, and the divisional Chief Information Officer has a seat on the engagement boards of Nabidh and Malaffi health information exchanges.

Long-standing partnerships with academic institutions support the development and training of medical students.

© COVIDEVELOPMENT

Hirslanden plays an active role in the fight against COVID-19 throughout Switzerland by operating COVID-19 test centres at more than 10 locations. Furthermore, Hirslanden is involved in the Swiss government's vaccination strategy. It has been commissioned to operate vaccination centres in the cantons of Geneva, Thurgau, Zug (in collaboration with the Cantonal Hospital of Zug) and Zurich.

Mediclinic Southern Africa donated PPE worth ZAR15m to provincial health departments in response to the pandemic.

Mediclinic Middle East collaborated closely with the Dubai Health Authority and the Department of Health in Abu Dhabi, with the division's CEO and Chief Operating Officer forming part of the respective COVID-19 command centre teams. During the first wave of the COVID-19 pandemic, management agreements were concluded with the UAE Government to manage several guarantine and isolation facilities. A partnership was formed with the Department of Health in Abu Dhabi to deliver remote care to an initial cohort of 1 000 patients with chronic diseases, with a view to expand the service.



HEALTHCARE INSURERS

All role players in healthcare funding, such as the medical insurance companies and schemes, administrators and managed care companies, play a key role in Mediclinic's business, with privately insured patients remaining the Group's largest client base.

Healthcare provider prices are regulated in Switzerland and the UAE, and pay-for-quality initiatives are planned for Dubai and Abu Dhabi.

WHAT MATTERS TO THEM

- Quality of care
- Affordability of care
- Integrated clinical services
- Hospital network arrangements

HOW MEDICLINIC ENGAGES

- Regular discussions on alternative reimbursement models
- Annual tariff negotiations in a fair and transparent manner

MEDICLINIC'S RESPONSE

The Group reports on the **clinical performance and patient experience results** of all three divisions in the annual Clinical Services Report. Mediclinic shares information with insurers to address any concerns.

Transforming from an infrastructure provider to an integrated healthcare provider is a key strategic goal for the Group.

View the *Strategy overview* in the **2021 Annual Report** for more information.



At Hirslanden, a chapter of the **operations committee** meets every second week to ensure compliance with standardisation in hospitals. Due to potential cost savings, specialist groups in cardiology and orthopaedics meet twice annually to review standardisation of specific implants.

At Mediclinic Southern Africa, cost efficiency is proactively measured by **benchmarking doctors' use of hospital resources** against peers for similar procedures and diagnoses.

The Clinical Utilisation Committee of Mediclinic Middle East monitors utilisation trends by medical practitioners against peer benchmarks, both proactively and in response to queries by insurers.

Engagement with key stakeholders via an industry body could in certain instances be more effective than individual representation. Mediclinic leverages these associations to ensure its active participation in national conversations.

WHAT MATTERS TO THEM

- Legislation and regulations that affect the healthcare industry
- Informing the public about challenges facing private healthcare

HOW MEDICLINIC ENGAGES

INDUSTRY ASSOCIATIONS

- Membership of industry associations and representation on governing bodies
- Participation in research commissioned by associations
- Participation in conferences

MEDICLINIC'S RESPONSE

Hirslanden is represented on the Sciana Health Leaders Network in Europe, Privatkliniken Schweiz (association of Swiss private hospitals) and H+ Die Spitäler der Schweiz (hospital association for public and private hospitals in Switzerland). The divisional CEO has a seat on the executive board of Herzchirurgie Hirslanden Bern AG and the Swiss Ostheopathy Science Foundation. The divisional Chief Clinical Officer serves on the quality committee for Acute Medicine of the Swiss National Association for Quality Development.

Mediclinic Southern Africa is a member of the Hospital Association of South Africa ('**HASA**') and has two representatives on its Board.

Mediclinic Middle East is an active and founding member of the Dubai Hospitals Business Group (similar to HASA in South Africa).

OVIDEVELOPMENT

Mediclinic Southern Africa forms part of the Business 4 South Africa ('**B4SA**') collaboration and participates within their various health work streams.



Mediclinic has a philosophy of taking long-term growth decisions that support its core business and future positioning.

INDUSTRY PARTNERS

Partnerships, joint ventures and cooperations with other leading healthcare providers that complement Mediclinic's services will ensure it expands across the continuum of care in line with the Group Strategy.

WHAT MATTERS TO THEM

- Cultural alignment
- An understanding of respective strengths and weaknesses
- A comprehensive and objective understanding of operations
- Well-defined and mutually beneficial operational and financial frameworks
- Collaboration

HOW MEDICLINIC ENGAGES

- Direct engagement based on industry knowledge and market reputations
- Cooperation and PPPs
- Introductions through advisors
- Industry conferences and events

MEDICLINIC'S RESPONSE

Mediclinic has a philosophy of taking **long-term growth decisions** that support its core business and future positioning.

Building innovative care delivery

models is an active focus for the Group to ensure that appropriate and affordable care settings are developed in line with industry trends and regulatory requirements.

While **property ownership** drives operational and financial benefits and is relevant for most of the Group's acute care hospitals, the approach to this remains flexible as Mediclinic looks at expanding across the continuum of care.



Clinique des Grangettes, Switzerland

"

PARTNERSHIPS IN PRACTICE HIRSLANDEN

- Cooperation between Hirslanden Klinik Aarau and Klinik Barmelweid in the western part of Aargau in the area of accompanying psychosomatic treatments, pneumological services and rehabilitation
- Oncology collaboration 'ambulante onkologische Rehabilitation Aargau' between Hirslanden Klinik Aarau and and the Krebsliga Aargau (Cancer League Aargau)
- Radiotherapy cooperation between Klinik Hirslanden and Spital Männedorf (Radiotherapie Hirslanden Männedorf)
- Collaboration between AndreasKlinik Cham Zug and RehaClinic Gruppe for outpatient care and inpatient physiotherapy at AndreasKlinik Cham Zug
- AndreasKlinik Cham Zug operates the Pflegezentrum Ennetsee on a management contract
- · Cooperation with Medbase in outpatient and inpatient care
- Cooperation between See-Spital Foundation and Klinik Im Park to expand on existing medical care offerings

MEDICLINIC SOUTHERN AFRICA

- Partnership with the Institute of Orthopaedics and Rheumatology at Mediclinic Winelands Orthopaedic Hospital
- Participation in CareConnect health information exchange
- Investment in Intercare Group's day case clinics, subacute facilities and specialist hospitals

MEDICLINIC MIDDLE EAST

- Investment in fertility specialists Bourn Hall International MENA Ltd
- Management contract with Al Murjan Group for the establishment of an internationally accredited 200-bed hospital in the Kingdom of Saudi Arabia by mid-2022



INVESTORS

As the owners and providers of equity capital to the Group, investors can rightly expect that their needs be understood and addressed.

WHAT MATTERS TO THEM

- Profitable growth
- Financial sustainability and performance
- Diverse opportunities for long-term value creation
- The Group's strategic and ESG goals
- Regulatory environment
- Operational drivers of each division

HOW MEDICLINIC ENGAGES

- Investor Relations department
 Shareholder annual general meetings
- Financial results reporting and presentations
- presentationsInvestor meetings, roadshows
- and conferences
- Operational site visits
- Stock exchange announcements
- Sell-side analyst and salesforce meetings
- Corporate website

MEDICLINIC'S RESPONSE

The established investor relations programme involves regular and transparent communication while ensuring the Board understands investors' views on all relevant matters.

The Group's **2021 Annual Report** provides more information on the Company's **purpose, vision, values and strategy; financial performance** (Group Chief Financial Officer's Report); long-term value creation (Investment case); shareholder engagement strategy (Corporate Governance Statement); and directors' remuneration and alignment of incentives with shareholder experience and longterm value creation (Remuneration Committee Report).

The Group's **ESG strategy** is discussed in detail in this report and summarised in the *Sustainable development overview* included in the **2021 Annual Report**.

Remgro Ltd, as a principal shareholder, is represented on the **Company's Board of Directors** in line with an established relationship agreement.

Refer to the Corporate Governance Statement included in the 2021 Annual Report.

The media acts as an intermediary between Mediclinic and its stakeholders on Company and industry developments, and assists in building and sustaining a professional reputation.

MEDIA

WHAT MATTERS TO THEM

- Company contribution to local and national economy
- Ethical business practices
- Advances in clinical care
- Timeous engagement
- Transparency
- Accurate information
- Two-way dialogue

HOW MEDICLINIC ENGAGES

- Media releases
- Press conferences
- Financial results reporting and presentations
- Paid advertisements
- Social media

MEDICLINIC'S RESPONSE

Mediclinic monitors industry-related news and **responds proactively.** It also arranges interviews, when appropriate, and responds to media enquiries.

Dedicated communication

strategies deal with major industry affairs issues and media response to quality of care follows an established process.





MEDICAL PRACTITIONERS

For the success of the business, it is vital Mediclinic attracts and retains medical practitioners since affiliated doctors refer their patients to or treat their patients in the Group's facilities. Quality of care improvements require the support and engagement of the treating and referring physicians.

WHAT MATTERS TO THEM

- Facilities and equipment
- Nursing care
- Patient safety
- Client experience
- Involvement in strategic clinical issues
- Implementation of EHRs
- Opportunities for continued professional development
- Adaptability in the face of an evolving healthcare industry

HOW MEDICLINIC ENGAGES

- Regular meetings
- Participation in hospital clinical committees
- Medical practitioner participation in hospital boards
- Continuous professional education
- eventsElectronic newsletters
- Networking and know-how exchange events at Hirslanden
- Annual Doctors' Summit at Hirslanden
- Dedicated medical practitioner portals at Hirslanden and Mediclinic Southern Africa
- Sharing of doctor-related patient experience feedback at Mediclinic Southern Africa
- Biannual engagement events at Mediclinic Middle East
- Annual Research Day at Mediclinic Middle East

MEDICLINIC'S RESPONSE

The Group's **international expertise and knowledge** enable it to effectively manage large, multidisciplinary facilities and Centres of Excellence.

The referral network enables Group representatives to regularly meet with medical practitioners and Mediclinic employees to discuss their needs and strengthen the relationship between the hospital and its supporting specialists.

Clinical outcomes and patient safety

form key components of the Group strategic goal of improving the client value proposition significantly.

COVIDEVELOPMENT

The annual Hirslanden Doctors' Summit underwent a radical transformation from a pure town hall event to an innovative online forum. Together with its digital partner agency, Hirslanden created a virtual live broadcast experience, which included virtual breakout and networking sessions, with more than 200 doctors participating.



PROFESSIONAL SOCIETIES

WHAT MATTERS TO THEM

- Recognition and acknowledgement
- Value-based care
- Consultation on clinical quality and treatment modalities
- Guidance, leadership and influence for their members

HOW MEDICLINIC ENGAGES

- Regular engagements
- Ad hoc meetings with selected societies on value-based care interventions
- Affiliated specialists serve on the executive committees of professional societies

MEDICLINIC'S RESPONSE

Close collaboration to agree on standards of care and the implementation thereof.

COVIDEVELOPMENT

During the pandemic, the Group proactively consulted with more than 60 professional societies and epidemiology experts to address COVID-19-specific issues collaboratively. Their feedback was considered and implemented to ensure practical, society-supported treatment and vaccination strategies.

Engagement with professional societies is key to ensuring continuous improvement of valuebased healthcare.



SUPPLIERS WHAT MATTERS TO THEM

- Fair and transparent negotiations
- Timeous payment

HOW MEDICLINIC ENGAGES

- Regular meetings and business reviews
- Active engagement around data privacy and data protection
- Requests for proposals and quotations
- Contract negotiations and management post-signature
- Product demonstrations and evaluations
- Training on product specifications
- Attendance at trade fairs
- Factory visits

MEDICLINIC'S RESPONSE

The Group completes supplier **risk** analyses and a review of business **continuity** and disaster management for major suppliers annually.

Supply chain risk management is informed by suppliers' completion of the Group's annual modern slavery questionnaires. Key manufacturing facilities are visited regularly to verify compliance with the Company's Modern Slavery and Human Trafficking Statement, which is available on the Group's website.

Effective procurement involves centralising to improve efficiency

and cost-effectiveness, while formalising processes for tenders. contracting and preferred supplier agreements.

The GPO supports **global sourcing** and creation of more cost-effective **supply chains** through direct imports of selected surgical and consumable products, and conducts a selection of site visits to audit suppliers' compliance with Mediclinic's Code of Business Conduct and Ethics ('Ethics Code') and business practices.

Products are approved electronically, and the Group is implementing incrementally an e-procurement **solution** to leverage benefits offered by digitalisation and automation. It will include vendor onboarding to streamline and automate the procureto-pay process.

The number of suppliers is examined to enable growth with selected key partners and thereby strengthen negotiations.

Health technology assessments are required for high-value investments or for implementation of new technologies.

> Refer to the 2021 Clinical Services Report.



chain and ethically sourced products.

Mediclinic believes in

relationships of mutual

ensure a sustainable and

trust and respect with

suitable suppliers to

uninterrupted supply

building long-term



Effective procurement involves centralising to improve efficiency and cost-effectiveness, while formalising processes for tenders, contracting and preferred supplier agreements.

SUSTAINABLE DEVELOPMENT SNAPSHOT



THE DAISY AWARD

For Mediclinic's nurses, a job well done is reward in itself, but that does not mean acknowledgement is not important. In 2020, several hospitals at Mediclinic Middle East partnered with The DAISY Award, a global recognition programme, to honour its nurses. Research has shown that the impact of this programme is profound, affecting job satisfaction, retention, teamwork and more.

ELECTRIC CARS

Employees of Clinique Bois-Cerf and Clinique Cecil in Lausanne extend their care to the environment whenever they travel locally for business. The hospitals each acquired a compact two-seater Smart electric car that touches the Earth lightly. With zero emissions per kilometre, it combats air pollution and thanks to its electric charge, it runs silently so the birds don't have to compete to let their song be heard. Clinique Cecil, Switzerland





LES MIELS DE STÉPHANIE

Entirely natural and sourced locally, a jar of honey by les miels de Stéphanie is a thoughtful get-well gift for supplementary insured patients of Clinique La Colline. But it is also more than that. It is a sign of the hospital's commitment to biodiversity. Through the annual sponsorship of a beehive in Geneva, Clinique La Colline supports some 40 000 bees – and the ecosystems that rely on them.

COTTON PURSES

This cotton purse is a pretty way for a breast cancer patient to safely and discreetly carry her drain bag after surgery. It is the handiwork of employees at Dubai's Mediclinic City Hospital, where nurses, doctors, midwives and admin personnel gather to produce them in their free time. Elsbeth Bentley, Dr Annett Al Hamadi and Dr Rabbia Khan drive the initiative while the hospital covers the cost of the fabric.





COVID-19 TREE

At Mediclinic Potchefstroom in South Africa, this COVID-19 tree symbolises the commitment of personnel. Every leaf represents an employee or contractor who tested positive but recovered sufficiently to return to work. Water droplets are colleagues who supported them; flowers signify volunteers. Similar trees celebrate COVID-19 recoveries in other Mediclinic Southern Africa facilities.

LITTER CLEANUP

Thanks to its location on the uMsunduzi River, South Africa's Mediclinic Pietermaritzburg offers scenic views from most of its wards. While the hospital maintains the riverbank close to the facility, employees also lend a hand. In support of Mandela Day, the UN initiative to spend 67 minutes making an impact in the community, employees used their time to clean up litter along the river in 2020.



CONSERVE MATERIAL ISSUE 1: MINIMISING ENVIRONMENTAL IMPACT

The Group's main environmental impacts are the consumption of resources (water and energy) and the disposal of healthcare risk waste and healthcare general waste.

During the reporting period, there were no incidents of material non-compliance with any environmental legislation, regulations, accepted standards or codes applicable to the Group, with no significant fines imposed.

PROGRESS IN 2020

An EBX Data Management System was developed to capture the Group's environmental data. This marks the first year in which units of measures and carbon emission activities were aligned and recorded across all three divisions.

2020 IN NUMBERS¹

Total Scope 1 & 2 CO₂ emissions in tonnes (t)



Total water usage in megalitres (ML)



Notes

Data reported in line with the 2021 CDP Report and succeeds the data provided in the 2020 Sustainable Development Report. Mediclinic has no operations in the UK and reports on the data of its divisions. Data fo Medical Innovations and Group Services, which are situated in Southern Africa, is included in Group totals and excluded from Mediclinic Southern Africa data. ² Total energy consumption includes that of Mediclinic Group Services and Medical Innovations, but these entities have been removed from the Mediclinic Southern Africa boundary from the 2021 CDP Report and will be reported under Mediclinic International going forward. No comparative data available. ⁵ Recycling decreased overall as a result of the COVID-19 pandemic; recycling initiatives in certain areas were paused by the service providers. Waste recycled excludes organic waste recovered.

Total energy consumption in gigajoule (GJ)



Waste recycled in tonnes (t)³



BECOMING CARBON NEUTRAL BY 2030

CARBON EMISSIONS

Mediclinic's commitment to carbon-neutral status is supported by a sound strategy. Emission-reduction activities yield benefits such as cost savings, secured energy supply and a healthy planet for future generations. Rising electricity costs are an incentive to reduce consumption by investing in energy-efficient equipment and renewable energy sources.

With the assistance of external consultants, the divisions measure their carbon footprint using the Greenhouse Gas Protocol. These measures include, in varying degrees:

- Direct emissions (Scope 1 emissions) from Mediclinic-owned or -controlled equipment (stationary fuels); air-conditioning and refrigeration gas refills; anaesthetic and other gas consumption; emergency response vehicles; and fleet and pool vehicles (mobile fuels).
- Indirect emissions from the consumption of purchased electricity (Scope 2 emissions).
- Indirect emissions in the supply chain (Scope 3 emissions), and from Mediclinic's business travel activities; employee commuting; upstream and downstream third-party distribution; the consumption of office paper; electricity transmission; and distribution losses and waste.
- Non-Kyoto Protocol greenhouse gas emissions such as from Freon, which is used in air-conditioning and refrigerant equipment. Data of these emissions was converted into a carbon dioxide equivalent ('CO2e') using recognised calculation methods, emission factors and stating assumptions made, where relevant.

The Company's CDP Climate Change Report contains more information on climate change risks and opportunities, boundaries, targets, strategy and financial impacts, and is updated on the Group's website annually on 1 September.

TCFD STATEMENT OF INTENT

The Financial Conduct Authority's Listing Rules ('**the Listing Rules**') require premium-listed commercial companies to disclose in their annual report whether they have reported on how climate change affects their business in a manner consistent with the recommendations of the Task Force on Climate-related Financial Disclosures ('**TCFD**'), and to provide an explanation and other information if they are unable to do so. In addition, the UK Government intends to introduce mandatory climate-related disclosures to supplement the requirements under the Listing Rules.

Mediclinic supports this approach, yet these requirements only become applicable to the Company in the 2022 and 2023 financial years respectively.

There is strong correlation between the TCFD and the CDP, with Mediclinic having reported according to the latter's requirements since 2008. Subsequently, the CDP has prepared a paper, mapping the CDP questions against the TCFD requirements, which will be assessed to establish a TCFD-based reporting approach. For the next reporting period, Mediclinic will report in accordance with the Listing Rules requirements. Further information on the Group's climate change approach is reported in its Climate Change Disclosure project, available on the company website at www.mediclinic.com.

	Hirslanden	Mediclinic Southern Africa	Mediclinic Middle East
Scope 1 (tonnes)	4 780 (2019: 5 232)	22 083 ¹ (2019: 21 047)	3 869 (2019: 2 959)
Scope 2 (tonnes)	595² (2019: 562)	151 053³ (2019: 157 370)	43 379 (2019: 52 789)
Scope 3 (tonnes)	143 (2019: 219)	39 576 (2019: 44 589)	14 559⁴ (2019: 14 170)
Non-Kyoto Protocol emissions (tonnes)	n/a	3 180 ⁵ (2019: 1 233)	2 635 (2019: 2 056)
Total Scope 1 & 2 CO ₂ e (tonnes)	5 374 (2019: 5 795)	173 136 (2019: 178 417)	47 248 (2019: 55 748)
Total Scope 1 & 2 CO ₂ e/bed day (kg)	10.00 (2019: 10.00)	101.00 (2019: 89.00)	255.37 (2019: 327.62)
Total Scope 1 & 2 CO ₂ e/ full-time employee	0.72 (2019: 0.78)	10.96 (2019: 11.25)	6.97 (2019: 9.76)
Total Scope 1 & 2 CO ₂ e/m ²	0.02 (2019: 0.02)	0.19 (2019: 0.21)	0.18 (2019: 0.21)

TABLE 1: TOTAL CARBON EMISSIONS

Notes

Increase in Scope 1 emissions mainly due to increased diesel consumption as a result of load shedding, as well as the impact of updated emission factors on the emissions from anaesthetic gases.

² Emissions from purchased electricity in Switzerland increased mainly as a result of Salem-Spital switching from natural gas to district heating.

³ Renewable energy generated onsite has been reclassified to Scope 2 purchased renewable electricity for nine of Mediclinic's 12 facilities where PV systems are installed. The PV systems installed at these facilities are owned by Kigeni, which sells the electricity to Mediclinic, thus even though it is generated onsite it should be categorised as purchased renewable electricity.

⁴ Increase in Scope 3 emissions mainly due to the increase of the Defra emission factor, more than three-fold, for commercial and industrial waste. Third-party emissions from waste collections increased almost 10-fold in 2020, likely due in part to increased waste disposal and more frequent collections during the pandemic. An additional service provider was also reported for the first time in 2020.

⁵ Emissions increased primarily due to a large quantity of R22 purchased for future use.

ENERGY USAGE

Electricity is the main contributor to the Group's carbon footprint. Healthcare facilities require significant energy as medical equipment and air filtration and conditioning units at many hospitals run on a 24/7 basis. All divisions are taking steps to reduce their electricity consumption intensity through the adoption of the ISO 14001:2015 environmental management system. This will lead to improved operational efficiency of technical installations; the introduction of various new energy-efficient and renewable technologies; and changes in employee behaviour regarding energy use.

The main sources of direct energy consumption are gas and diesel oil, motor gasoline, liquefied petroleum gas and natural gas. Indirect energy sources refer to electricity consumption.

TABLE 2: DIRECT AND INDIRECT ENERGY CONSUMPTION (GJ)

		Hirslanden	Mediclinic Southern Africa	Mediclinic Middle East ¹
Direct energy purch	nased	86 932 (2019: 105 670)	103 132 (2019: 125 684)	34 398 (2019: 17 679)
Direct energy produ	uced	1 584 (2019: n/a)	1 437² (2019: 11 240)	n/a
Indirect energy con	sumed	172 290 (2019: 163 650)	548 249 (2019: 544 742)	237 258 (2019: 249 310)
Energy	Total	260 807 (2019: 269 320)	652 818 (2019: 681 667)	271 656 (2019: 266 989)
consumption ²	Per bed day	0.46 (2019: 0.46)	0.38 (2019: 0.34)	1.59 (2019: 1.75)

Notes

¹ The intensity measures of energy consumption per bed day of Mediclinic Middle East are not comparable with Hirslanden and Mediclinic Southern Africa as this division has more outpatient clinics (i.e. no beds) than hospitals and the extreme weather conditions in the UAE negatively impact energy and water consumption.

² Renewable energy generated onsite has been reclassified to Scope 2 purchased renewable electricity for nine of Mediclinic's 12 facilities where PV systems are installed – this was reported under renewable energy produced in the previous year. The PV systems installed at these facilities are owned by Kigeni, which sells the electricity to Mediclinic, thus even though it is generated onsite it should be categorised as purchased renewable electricity (indirect energy consumed).

DIVISIONAL INFORMATION

HIRSLANDEN

- Electricity purchased mainly from European hydroelectricity¹ for all but one hospital, as well as the Corporate Office
- 16 of 17 hospitals registered as CO₂-reduced businesses and monitored annually by EnAW
- Replacement of ventilation, heating and cooling systems with energy-efficient ones and adjustment of operating times
- LED light fittings
- Renewal of information and communications technology ('ICT') infrastructure
- Use of energy-efficient systems and equipment in all departments

MEDICLINIC SOUTHERN AFRICA

- Renewable energy through PV systems
- Solar panels for water heating
- Supervisory control and data acquisition systems to monitor electricity consumption
- Energy-efficient practices

MEDICLINIC MIDDLE EAST

- LED light fittings and movement sensors
- Regular servicing of air conditioners
- Solar panels for new buildings
- Shading devices to minimise direct heating
- Sustainable materials used wherever possible

Note

¹ Hirslanden's market-based hydroelectricity emissions are assumed to be zero, with a Certificate of Origin to support such assumption.

MINIMISING THE IMPACT OF CLIMATE CHANGE ON THE BUSINESS

Mitigating health risks related to climate change links strongly with the Company's purpose. Yet its operations directly and indirectly contribute to climate change through the release of greenhouse gases during the delivery of care and procurement of products essential to its service.

Healthcare, as a major economic, political and moral force in almost every society, holds the potential to play a leadership role in addressing climate change. Transitioning to a low-carbon economy can prevent the worst impacts of climate change while simultaneously improving health outcomes and health equity.

Mediclinic acknowledges that climate change poses a material risk to its operations, the environment and society, and that appropriate action is required to reduce its impact. In addition, responsible use of resources can be a source of strategic advantage for the Group, allowing it to manage and contain its operating costs and ensure ongoing access to water and energy supplies.

PROTECTING BIODIVERSITY

Mediclinic's philosophy has always been to minimise its impact on the natural environment. The Group Sustainable Development Strategy has a sub-goal of driving environmental sustainability by way of an effective environmental management system. Since this system provides a clear understanding of how activities impact biodiversity, it is envisioned that all the divisions will soon be able to address their impact on biodiversity and ecosystems.

An environmental impact assessment is performed for each new building project, the outcome of which determines whether a more comprehensive assessment is required legally. This comprehensive and continuous process enables the Group to manage its biodiversity impact accurately. No new building projects in the financial year required an environmental impact assessment. None of the divisions' owned, leased and managed facilities are in, or adjacent to, protected areas or areas of high biodiversity value outside of protected areas.



Healthcare, as a major economic, political and moral force in almost every society, holds the potential to play a leadership role in addressing climate change.

CONSERVE CONTINUED



The district where the hospital is located is home to neighbourhood association EnVie Montchoisi, which promotes the use of public space to help people reconnect with nature. When the association approached then Facility Manager Philipp Dürr in 2019 with the proposal to establish a biodiversity garden within the hospital's park, the idea immediately captivated him.

'There is not much green space in the city whereas Clinique Bois-Cerf has ample grounds,' he says. Turning over a section of it to EnVie Montchoisi would enable the association to establish a garden rich in nature. With Dr Danielle Mersch, biologist at the University of Lausanne, serving on the association's committee, there was the reassurance that the garden design would be considered from an ecological perspective.

'For our employees and patients, being able to spend time in nature helps to replenish their energy. We are an orthopaedic hospital, so when a patient can go for a stroll in the garden after a knee operation, it is like giving them back a bit of their life,' says Dürr.

For our employees and patients, being able to spend time in nature helps to replenish their energy.



FEATURE

NURTURING NATURE

ENVIRONMENTAL ACTION IS BEARING FRUIT IN THE SHAPE OF A BIODIVERSITY GARDEN.

Spring in Lausanne, Switzerland, is a particularly beautiful time of year. After the long grey months of winter, vibrant yellow crocuses herald the return of the sun while blue hyacinth flowers attract bumblebees and butterflies. It is a vision cherished by the project leaders of a new biodiversity garden established on Clinique Bois-Cerf's grounds. What used to be a plain expanse of lawn is being transformed into a welcoming home for pollinators with a wide variety of flowering plants, herbs and vegetables. It is the result of an initiative that brought together the hospital and the community in the interests of the environment. The goal with the revitalised garden is to support nature with an environment that supplies food and shelter to small critters. 'By providing a variety of indigenous plants, we should see pollinators and other little creatures arriving quickly. We expect that in summer 2021 we will have a variety of insects, which in turn will attract birds and lizards,' explains Dr Mersch.

When she started her biodiversity drive two years ago, all she had was the germ of an idea. 'There was neither garden, nor money, nor a clear plan,' she recalls. Since then, Clinique Bois-Cerf has come on board, the association has garnered public funding and local inhabitants have rolled up their sleeves. In February and March 2020, the garden layout was plotted on site and, following delays due to the pandemic, construction began in September 2020. It was an opportunity for residents from the neighbourhood to have closer contact with this Hirslanden hospital. 'We value our good relationship with our neighbours and see this initiative as a way to build closer ties,' says Dürr.

'We wish the garden to be a collective project,' says Dr Mersch. 'We hope that visitors stop and take their time, possibly find some joy in the beauty and diversity of plants. We think of it as a place to take a break and disconnect from the hassle, problems and stress of everyday life.'

HAVING ZERO WASTE TO LANDFILL BY 2030

A Group Waste Management Policy was developed for roll-out during 2021, which encapsulates the objective to:

- **Refuse** avoiding generating waste at the source, including at supplier level
- **Reuse** repurposing waste materials for own or third-party use
- **Reduce/recycle** managing the plastic waste management cycle
- Recover recovering energy from waste materials

Stringent protocols are followed to ensure that waste management within the Group complies with all legislation, regulations and municipal bylaws. The Group regards the handling of waste in an environmentally sound, legal and safe manner as its ethical, moral and professional duty. During the reporting period, there were no incidents at the Group's facilities or offices leading to significant spills.

REGIONAL INFORMATION

SWITZERLAND

- Healthcare risk waste transported by licensed companies and incinerated at waste stations
- Recycling of paper, cardboard, glass, PET bottles
- Weight and waste type monitored and archived by hospital, transport provider and incinerator
- Food waste processed in biogas facility

- SOUTHERN AFRICA
- Waste management tenders to assist in achieving 'zero waste to landfill' by incorporating waste management requirements into the waste management processes in development
- Corporate Office discontinued purchases of plastic water bottles, plastic straws and polystyrene food containers
- 19 hospitals discontinued the use of plastic straws
- Eight hospitals discontinued the use of polystyrene packaging in their kitchens and coffee shops
- Healthcare risk waste transported and treated by licensed service providers by means of autoclave or electro-thermal deactivation technology
- Anatomical waste treated by incineration
- Recycling of paper, plastic, cardboard, glass, metal, Tetrapak, fluorescent lights, food waste, e-waste, printer cartridges and batteries
- Suppliers encouraged to reuse packaging and transporting containers
- Redundant furniture and information technology equipment donated
- Cooking oil recovered for biodiesel

THE UAE

- Healthcare risk waste handled by professional providers
- Contracts for collection of recyclables such as paper, cardboard, plastics and cans
- Waste recycling initiatives in Abu Dhabi and Dubai hospitals

TABLE 3: WASTE MANAGEMENT

	Switzerland	Southern Africa	The UAE ¹
Total waste (tonnes) ²	1 371	7 892	5 006
Organic waste processed/ reutilised (tonnes)	424 (2019: 430)	290 (2019: 162)	n/a
Recycled waste (tonnes) ³	595 (2019: 417)	1070 (2019: 1 224)	249 (2019: 251)
Total waste diverted from landfill (tonnes)	1 019 (2019: 847)	1 360 (2019: 1 386)	249 (2019: 251)
Waste recycled as a percentage of total waste	43.4%	13.6%	5.0%

Notes

¹ Food waste is not processed or reused. Healthcare risk waste is disposed of after treatment and hazardous chemical waste is shipped to Germany for incineration.

² No comparative data available.

¹ Recycled waste in Southern Africa decreased due to recycling activities being paused by waste management companies as a result of COVID-19.

CONSERVE CONTINUED

DRIVING ENVIRONMENTAL SUSTAINABILITY BY WAY OF AN EFFECTIVE ENVIRONMENTAL MANAGEMENT SYSTEM

Mediclinic is committed to ensuring that its environmental management systems and practices are aligned with international best practices and national legislation to safeguard its reputation and provide assurance regarding the environmental quality, safety and reliability of its processes and services.

REGIONAL INFORMATION

SWITZERLAND

- Food and beverage contracts concluded are all with ISO 14001-certified companies since 2019
- Energy check-up and EnAW label 'CO₂ & kWh-reduced'
- Part of H+ programme for Occupational Health and Safety

SOUTHERN AFRICA

- 44 of 50 hospitals are ISO 14001-certified by British Standards Institute
- ISO 14001 gap audits conducted at 43 facilities, with average score of 79.1%

THE UAE

- Key performance indicators for environmental sustainability
- Annual environmental, health and safety ('EHS') audits at all facilities
- Initiatives to increase employee awareness

USING AND REUSING WATER RESOURCES SUSTAINABLY

For healthcare facilities, good quality fresh water is essential for maintaining hygiene, quality patient care and infection prevention and control ('**IPC**'). Initiatives across the Group support sustainable water usage. The Group benefits from the expertise gained across its divisions as they address water-use challenges unique to each geography.

TABLE 4: WATER USAGE FROM WATER UTILITIES (KL)

	Hirslanden	Mediclinic Southern Africa	Mediclinic Middle East
kL	366 648 (2019: 367 898)	1 029 058 (2019: 1 093 002)	252 042 (2019: 244 185)
kL/bed day	0.65 (2019: 0.63)	0.60 (2019: 0.55)	1.35' (2019: 1.52)

Note

Bed days for Mediclinic Middle East include only hospitals and two day clinics (Deira and Dubai Mall) and thus the kL/bed day sold has been calculated by subtracting 8% of total kL (contribution of clinics without bed days).

DIVISIONAL INFORMATION

HIRSLANDEN

- Operational water quantity and quality risk assessments in progress
- Waste water treated directly by local municipalities and monitored locally by hospitals
- Water-flow limiters on taps, water-saving valves in toilets and replacement of kitchen dishwashers

MEDICLINIC SOUTHERN AFRICA

- Operational water quantity and quality risk assessments completed
- Continuous monitoring of water consumption through water meters
- Installation of bulk water storage facilities
- Boreholes sunk
- Water-saving instrument washers, washing machines and autoclaves
- Recycling of autoclave water at certain facilities
- Priority focus on detecting and fixing leaks

MEDICLINIC MIDDLE EAST

- Operational water quantity and quality risk assessments in progress
- Water consumption monitored and water pressure reduced
- Reduction in cistern water and automatic flushing
- Condensation water from CSSD autoclaves used for irrigation
- Control sensors on taps in wards



CONNECT MATERIAL ISSUE 2: BUILDING STAKEHOLDER TRUST

Mediclinic employees, affiliated doctors, suppliers and industry partners form the foundation from which the Group is able to offer its services to clients and communities. In this, the Group is dedicated to partnering with all its stakeholders. As the partner, the Group is positioned to have long-term relationships that extend beyond isolated interactions and trusted to deliver measurable, quality outcomes and transparent reporting.

2020 IN NUMBERS

Female representation in senior and middle management roles

Group	35.6% 2019:
Hirslanden	20,6% 2019: •
Mediclinic Southern Africa	38.2% 2019: ♥
Mediclinic Middle East	37.4% ^{2019:} •
Mediclinic Group Services	24.3% 2019:

Total absenteeism rate¹

Group ³	3.9%		
Switzerland	5.3%	2019: 4.4%	^
Southern Africa	4.7%	2019: 2.5%	^
The UAE	1.2%	2019: 0.8%	

Gallup[®] employee engagement grand mean score (out of five)

Group	3.98 ^{2019:}
Hirslanden	3.99 ^{2019:} ♥
Mediclinic Southern Africa	3,93 ^{2019:}
Mediclinic Middle East	4,09 2019:
Mediclinic Group Services	4.20 ^{2019:} •

Press Ganey[®] inpatient experience index grand mean score (out of 100)

Group	84.4	2019: 83.9	<u>^</u>
Hirslanden	88.4	2019: 88.3	<u> </u>
Mediclinic Southern Africa	.82.7	2019: 82.7	>
Mediclinic Middle East	84.9	2019: 86.0	~

New suppliers²

Group	3 2 3 0
Hirslanden	1600
Mediclinic Southern Africa	1300
Mediclinic Middle East	330

Contribution to CSI³



ZAR29.8m < 2019: ZAR26.7m



Notes

- Actual days lost expressed as a percentage of total days scheduled to be worked by the workforce during the reporting period.
- ² New data point with no prior yea comparative data.
- * Excludes contributions made by Mediclinic Group Services.
CLIENT VALUE PROPOSITION

Three critical areas define the value equation in healthcare – clinical outcomes, client experience and cost per event.

At the heart of Mediclinic lies its *Patients First* philosophy, supported by the organisational values of being client centred; trusting and respectful; and patient safety focused.

Mediclinic's value proposition is a key factor in pursuit of its purpose and realisation of its vision. It directly addresses a key industry challenge: the affordability of healthcare. In this regard Mediclinic sees itself very much as part of the solution.

The Group's unique approach to the value equation is reported on in the **2021 Clinical Services Report**.



COST

Various Group initiatives focus on managing the affordability of healthcare, including fair and transparent tariff negotiations, need-based expansion, healthcare reform, and efficient and cost-effective operations. The latter is achieved through streamlining and centralising its procurement processes.

View page 57 for more information.

DIVISIONAL INFORMATION

HIRSLANDEN

- Product standardisation and specialist buyers to reduce cost
- Partnership with German Sana Hospital buying group
- Automated storage system to reduce warehouse footprint
- Logistics guidelines for improved performance
- Outsourcing of maintenance and service for medical equipment

MEDICLINIC SOUTHERN AFRICA

- Dashboards to track utilisation trends and prevent over-servicing
- Improved data analytics for targeted cost reduction
- Engagement with Council of Medical Schemes on Prescribed Minimum Benefits
- Monitoring and engagement of Health Market Inquiry recommendations

MEDICLINIC MIDDLE EAST

- Dashboards to track utilisation trends and prevent over-servicing
- Outpatient average claim targets
- Diagnostic-related grouping reimbursement in both Abu Dhabi and Dubai

Value is only possible if all three aspects of the equation are driven and supported by Mediclinic employees.



EMPLOYER OF CHOICE



FEATURE

YEAR OF THE NURSE

AT HIRSLANDEN, THE CELEBRATION DID NOT ONLY PAY TRIBUTE TO NURSES - IT WAS USED TO ADVANCE THE PROFESSION.

Caring, compassionate and committed – the traits that made Florence Nightingale a nursing icon are still synonymous with the profession two centuries later. In commemoration of the 200th anniversary of Nightingale's birth, the WHO declared 2020 the International Year of the Nurse and the Midwife. Hirslanden used the opportunity to put a spotlight on the calling, promote dialogue between management and nurses, and acknowledge these carers' invaluable contribution through a range of initiatives. In April 2020, as the pandemic raged in Switzerland, the division actively participated in the nationwide applause campaign directed at these frontline workers. The executive committee shared their sincere gratitude in a video and several social media posts recognised the dedication of medical personnel. To mark the International Day of the Midwife (5 May) and International Day of the Nurse (12 May), management sent nurses and midwives a personal letter to their home thanking them for their dedication.

Hirslanden also found a novel way to create a deeper appreciation of nurses' day-to-day tasks and trials. With the Changing Sides in Nursing project, members of the Hirslanden executive committee swapped office time for hospital life. In September 2020, Chief Human Resources Officer Markus Bechtiger reported for duty at Klinik St. Anna in Lucerne, Switzerland, wearing spotless nursing whites. From visiting the dispensary to shadowing ward rounds, it was a chance to step into nurses' shoes. Due to the COVID-19 pandemic, some visits had to be postponed to the first half of 2021, with Transformation Officer Ralph Panoff visiting Klinik Beau-Site, Klinik Permanence and Salem-Spital in Berne in January 2021.

To stimulate further conversation, a series of virtual question and answer sessions was scheduled for early 2021. These online sessions will enable nurses to pose their burning questions to nurse managers, hospital directors and executive management.

Mediclinic Group CEO Dr Ronnie van der Merwe put it memorably in a message to employees on the occasion of the International Day of the Nurse: 'Our nurses are more than just caregivers. Every day, you motivate, innovate and lead. You have the ability to mend the body, heal the heart and calm the mind. You give of yourself to care and to comfort. For your unwavering daily commitment to venture forth and help the vulnerable, we salute and thank you.'

"

Our nurses are more than just caregivers. Every day, you motivate, innovate and lead. You have the ability to mend the body, heal the heart and calm the mind. **Dr Ronnie van der Merwe** Group CEO



EMPLOYEE OVERVIEW

TOTAL WORKFORCE¹ PER GEOGRAPHY



Notes

- Total workforce refers to permanent and fixed-term employees at 31 December 2020.
- ² Pre-2020 totals for Mediclinic Southern Africa include Mediclinic Group Services. Increase in Mediclinic Southern Africa workforce from 2018 to 2019 largely attributable to the opening of new day case clinics. Decline in Mediclinic Southern Africa workforce from 2019 to 2020 largely attributable to right-sizing initiatives which were achieved through natural attrition and voluntary separation packages, and the exclusion of Mediclinic Group Services from the data pool.
- ³ Increase in Mediclinic Middle East workforce from 2018 to 2020 largely attributable to overall business growth.
- ⁴ New data point with no prior year comparative data. Mediclinic International plc's one employee based in the UK included in 2020 data, pre-2020 reported only under Group total.
- $^{\scriptscriptstyle 5}$ Excludes Mediclinic Group Services as the shared services division does not have employees based at the operations.

30 470 FULL-TIME EMPLOYEES

671 EMPORARY **EMPLOYEES**

	10
\mathcal{P}_{0}	
D o	nation
)	nation

14m



- Switzerland: 31%
- South Africa & Namibia: 48%
- The UAE: 21%

Employees involved in client care (as a % of full-time employees)

Switzerland		
	60%	
South Africa and Namibia⁵		
	61%	
The UAE		
	60%	

Employees in managerial roles (as a % of full-time employees)

Hirslanden Mediclinic Southern Africa Mediclinic Middle East Mediclinic Group Services

Average tenure across the Group < 5 years: 45%</p> • 5-14 years: 42% > 15 years: 13%

EMPLOYEE JOURNEY

ATTRACT 👂

Proactive recruitment programme focuses on creating awareness and interest, addresses medium-term skills gaps

SELECT

Competency-based selection with skills assessments, employment reference and credential checks

orientat

To enhance

the quality of life

Performance

driven

ONBOARDING

"

The Group is committed to providing employment and development opportunities to citizens in each of the countries in which it operates. Attractive benefits and fair remuneration practices

Client centred

Trusting and

respec

22

Patient safety

focused

RETAIN >

Tailored retention strategies and talent management

DEVELOP

- Extensive training and skills development programmes
- Targeted internships, on-the-job training, student placements
- Succession planning and/or career management for scarce skills
- Proactive development of high-performing employees with leadership potential
- Standardised employee engagement monitoring and structured action planning

ENGAGE

OFFBOARDING

AVERAGE GROUP TENURE: SEVEN YEARS 3 723 TERMINATIONS IN 2020

TRANSITION

MORE THAN **3 326 APPOINTMENTS** DURING 2020 IN MORE THAN **415 DIFFERENT ROLES** MORE THAN **42 DEPARTMENTS** AND **254 BUSINESS UNITS** ACROSS THE GROUP Mediclinic proactively monitors global and regional industry and recruitment trends.



RECRUITMENT

"

GLOBAL SHORTAGE

Unwavering demand for healthcare services creates a severe shortage of skilled industry professionals.

GLOBAL HEALTHCARE WORKFORCE¹

The WHO has projected that global demand for healthcare workers will reach

80 million in 2030,

but that supply will not be nearly sufficient.

Nine million additional nurses and midwives will be needed by 2030 to reach the UN SDG 3 on health.

Nurses comprise half the global healthcare workforce.

70% of the nurse and social workforce around the world are women.

Practising nurses and midwifery personnel² per 1 000 population in 2017 or nearest year:

Switzerland³ 17.0:1 000 South Africa⁴

The UAE⁵ - 5.5:1000

Notes

- ¹ '2019 update, Global Health Workforce Statistics', WHO.
- ² For Switzerland and South Africa, ratio provided pertains to total nursing resources per 1 000 population.
- ³ Eidgenössisches Departement des Innern, Bundesamt für Statistik, September 2019.
- ⁴ 'Geographical Distribution of Nursing Manpower vs the Population of South Africa 2020', South African Nursing Council.
- ⁵ 2017 Statistics, Federal Statistics and Competitive Authority of the UAE.

As an international healthcare services provider, Mediclinic competes for talent in a very competitive employer market. Its recruitment approach is reviewed regularly to ensure it anticipates the industry challenges and changes, as well as mitigates the global shortage of healthcare professionals, specifically specialist nurses and clinicians. In support thereof, Mediclinic proactively monitors global and regional industry and recruitment trends.

During 2020, the Group's recruitment management system was successfully implemented at Hirslanden and partially at Mediclinic Southern Africa.

© COVIDEVELOPMENT

The COVID-19 pandemic's significant impact on established talent practices necessitated a prompt response. The Human Resources teams deftly established virtual recruitment and selection practices, and, in some cases, virtual interviews and onboarding. Some divisions experienced sourcing challenges insofar as the legislative environment and immigration rules were subject to frequent and sudden change. In these instances, the divisions focused on candidates in proactive talent pools and those already based within the division.

"

It is a matter of minutes to create a candidate profile and individuals can readily search for jobs or set alerts for the future.

FEATURE

AMPLIFYING TALENT FOR TOMORROW

A NEW WEBSITE AND SAP SUCCESSFACTORS MODULE HAVE TRANSFORMED THE RECRUITMENT AND SELECTION PROCESS.

While the world is likely to remember 2020 as a year of challenges, for the talent managers at Mediclinic Middle East it will go down as one of resounding success. That is because in 2020 they achieved dramatic improvement in their main performance indicator: the time to fill a position (one of the key metrics for measuring the recruitment process). This improvement is due to the new enhanced recruitment tools provided by the implementation of the SAP Connect Recruitment Module.

At Mediclinic Middle East around 80% of doctors are employed directly, making successful recruitment a key component of the division's performance. Since the implementation of the new system, there has been a significant, positive impact on the key recruitment metrics. 'Because we directly employ many revenue-generating physicians, there is a clear return on investment since we can now onboard much more quickly. It has been fantastic,' says Andrew Gray, Recruitment Manager for Mediclinic Middle East.

The new website and SAP Connect Recruitment Module have significantly improved the interaction with candidates. Attractive, easy to use and reflective of the corporate identity, the website befits Mediclinic's standing as a leading international healthcare provider. 'The key benefit for me has been the ability to bring our opportunities to market in a much more contemporary way that meets the expectations of candidates,' says Gray. 'A lot of what we do in recruitment is essentially marketing – the recruitment team is often the first and last point of contact that candidates have with an organisation. So if you get the communication wrong, it can have a pretty serious effect on your brand as employer.' The previous careers website was a workaday experience that took time to navigate and the application process burdened candidates. There was a feeling that the Company was losing out on talent because it was all too cumbersome. Now the website presentation is appealing and the entire process has been streamlined. It is a matter of minutes to create a candidate profile and individuals can readily search for jobs or set alerts for the future.

Candidates have noticed. 'Very nice career site', 'Easy navigation' and 'Excellent job portals and clear information' were among the responses to an anonymous survey conducted with candidates, both successful and those not appointed, in December 2020.

Another major change is that candidates can search for jobs across all divisions. 'We are making it more evident that we are an international company,' says Therese Wilken, Manager: Attraction and Retention for the Group.

The Group careers website works hand in glove with the recruitment module, enabling more efficient management of the entire process. Internal stakeholders have better oversight because all the data can be found in one place: advertising periods, number of applications, shortlisted candidates and individual profiles. 'Now, if you are a line manager, you can look at your dashboard and see what stage everything is at. It has given a lot more transparency to stakeholders, which has increased the recruitment team's accountability,' says Gray. 'At the same time, it has freed up our team to engage more with stakeholders and build better relationships with candidates.'



EMPLOYEE VALUE PROPOSITION AND RECRUITMENT MARKETING

The annual *Your Voice* employee engagement survey is administered in partnership with the global analytics and advisory leader, Gallup[®]. Every year the results are scrutinised for universal themes that affect employee engagement and retention.

REGIONAL INFORMATION

SWITZERLAND

- Focuses mainly on Germany, Austria and Switzerland, as well as the Netherlands, Spain and France (especially for Lausanne and Geneva facilities)
- Swiss government restricts international recruitment and employment for candidates outside of the EU
- Focused active sourcing strategy to reach and employ key talent
- Social recruiting focus in 2020
- Implemented storytelling strategy where employees talk about their work, benefits and job life in videos
- Implemented SAP Connect Recruitment Module for all opportunities in the Swiss German part of Switzerland

SOUTHERN AFRICA

- Provides local nurse training, leading to employment on qualification
- Employment Equity (Affirmative Action) Plan submitted to the Department of Labour annually
- Strategy for targeted methods of attracting and engaging scarce skills
- Employment of non-South African permanent residents only considered if critical skills candidate cannot be sourced locally following external advertising
- Implementation of SAP Connect Recruitment Module for doctor opportunities at Mediclinic Southern Africa resulted in significant streamlining of processes across localities, a stronger focus on the longer-term view and increased reporting ability
- Implementation of SAP Connect Recruitment Module for learning opportunities at Mediclinic Southern Africa and the advertisement of five training courses on nursing and emergency medicine

THE UAE

The Group is committed to providing employment and

development opportunities to citizens in each of the

countries in which it operates. Employment of foreign

can be found. International sourcing becomes a viable

option only once all alternatives have been exhausted.

nationals is considered where no suitable local candidates

LOCAL HIRING AND GLOBAL SOURCING

- Majority of employees are expatriates, representing 93 nationalities
- Steady progress towards achieving Emiratisation targets across the division, underpinned by a revamped Emiratisation policy which identifies specific roles for UAE nationals and drives accountability across Mediclinic Middle East



Appointments vs terminations based

RETENTION

Retention strategies are aimed at understanding patterns that exceed healthy turnover benchmarks. An important tool for insight is conducting exit interviews in a safe, non-threatening manner.

The Group harnesses two of the most impactful ways to optimise retention: providing opportunities for a diverse workforce to thrive and creating an inclusive environment. Every year, employees are invited to share their perception of the workplace through the *Your Voice* survey (refer to page 45), which provides the opportunity to proactively assess employees' sense of belonging, whether they feel valued and whether they feel empowered to do their best every day. These results are analysed and trends are explored through focus groups to understand perceptions and ultimately optimise engagement and retention.

on permanent employee tu	APPOINTMENTS	IENTS TERMINATIONS		
Group	3 326 2019: ♥	3 723 ^{2019:} ♥		
Switzerland	1 511 ^{2019:} ♥	1354 ^{2019:} ♥		
Southern Africa	834 ^{2019:} •	1694 ^{2019:} ♥		
The UAE	817 ^{2019:} •	579 ^{2019:} •		

Note

¹ The COVID-19 pandemic had a significant impact on employee retention. Employees worldwide were hesitant to change employment due to fewer opportunities, economic uncertainty and widespread retrenchments and salary reductions.

TABLE 5: CONTROLLABLE EMPLOYEE TURNOVER RATE BY GEOGRAPHY, GENDER AND AGE

	Geography	Ger	ıder	Age				
		Male	Female	< 30 years	30-50 years	> 50 years		
Group	5.9% (2019: 8.1%)	7.2%	5.5%	9.2%	5.8%	3.6%		
Switzerland	7.8% (2019: 10.0%)	8.1% (2019: 10.2%) ♥	7.7% (2019: 10.0%) ♥	12.1% (2019: 15.6%) ♥	7.3% (2019: 9.0%)	5.7% (2019: 8.3%)		
Southern Africa	5.6% (2019: 7.6%)	8.4% (2019: 10.6%)	4.9% (2019: 6.9%) ♥	8.1% (2019: 9.2%) ♥	6.0% (2019: 8.0%) ♥	1.9% (2019: 5.1%)		
The UAE	4.3% (2019: 7.2%) ♥	5.3% (2019: 6.5%)	3.7% (2019: 7.8%) ❤	3.7% (2019: 11.1%)	4.5% (2019: 7.1%)	3.5% (2019: 4.6%) ♥		

MATERNITY AND PATERNITY LEAVE

New parents are supported in the workplace through various means. Proactive consultations prepare them for the financial implication of their absence, and continuous engagement during their leave is encouraged to optimise post-leave retention. Benefits are tailored according to local best practice and labour legislation.

REGIONAL INFORMATION

SWITZERLAND

- Four months' maternity leave, two weeks more than legally required, commencing at date of birth or earliest two weeks before date of birth
- Maternity leave paid at 80% of monthly salary for those with service of less than 12 months and paid in full for those with service of 12 months or more
- Paternity leave of 10 days, paid in full
- Childcare facilities run by the division at Klinik Hirslanden in Zurich and close to the Salem-Spital in Bern
- Partnerships with private childcare services at other facilities with cost subsidised by the division

SOUTHERN AFRICA

- Four months' maternity leave, paid at 33% of monthly salary for those with service of 12 months or more, commencing two weeks before date of birth with no impact on annual bonus (legally only unpaid maternity leave is required)
- 10 days' paternity leave of which five days paid in full (legally only unpaid paternity leave is required)
- 10 weeks' parental leave for employees having a baby through surrogacy or adoption (paid at 33% of monthly salary)
- Childcare facilities run by the division at Mediclinic Panorama and Mediclinic Bloemfontein

THE UAE

- Three months' maternity leave, of which 33 working days are fully paid for employees with one year or more service and 50% payment for those with less than a year's service
- Female employees with less than 12 months' service qualify for three months' unpaid leave
- Paternity leave of one week implemented according to UAE labour legislation

Return rate after matern	EMPLOYEES ON MATERNITY LEAVE	EMPLOYEES RETURNED TO WORK	RETENTION RATE
Group	1 327 ^{2019:} ●		
Switzerland ²	<u>349</u> ^{2019:} ○	318	91.1%
Southern Africa	744 ^{2019:} •	744 ^{2019:} •	100% ^{2019:} •
The UAE	234 ^{2019:}	233 ^{2019:} ♥	99.6% ^{2019:} •

Notes

¹ Data supplied for permanent employees.

² Pre-2021, approximately 34% of Hirslanden employees were not captured on the central human resources system; as such, some data is not available or non-comparable with prior periods.

REMUNERATION, BENEFITS AND REWARDS

The Group remunerates employees in a manner that supports its purpose, vision, culture and strategic goals, while attracting, retaining and motivating scarce skills. In this, fair, reasonable and market-related remuneration practices are maintained.

In line with the organisational value of high-performance behaviour, employees are rewarded for achieving strategic objectives which comprise financial and operational objectives, including measures of clinical performance. Eligible employees receive short-term incentives and senior management receive a combination of short- and long-term incentives.

Various additional benefits are offered to employees throughout the Group with regional differences due to local market practices and regulatory compliance. Employees are kept informed on benefit matters on a continuous basis via various interactive media platforms.

TABLE 6: BENEFITS OFFERED TO PERMANENT EMPLOYEES

	Switzerland	Southern Africa	The UAE
Retirement fund ¹	•	•	n/a²
Medical scheme, insurance	•	•	•
Performance-related incentives and bonuses	•	•	•
Nursing bonus for nursing staff and retention bonus for pharmacists ³	n/a	•	n/a
Indemnity cover/liability insurance for nursing/medical employees ⁴	•	•	•
Flexi-time for qualifying employees	•	•	•

Notes

¹ Retirement fund includes life and disability insurance, funeral cover and pension-backed mortgage loans.

 $^{\scriptscriptstyle 2}\,$ Benefits governed by legislation; death and disability cover offered.

³ Benefit only applicable in Southern Africa due to local skills shortage.

⁴ And other employees where required.

RETIREMENT FUND BENEFITS

REGIONAL INFORMATION

SWITZERLAND

- Membership to contribution fund with defined benefits at pension
- Variable employee contribution with a choice between two plans: 8.5–13.75% or 10–16.25%
- Corresponding variable Company contribution: 10–16.25%

SOUTHERN AFRICA

- Membership to defined contribution fund
- Variable employee contribution: 5–7.5%
- Corresponding variable Company contribution: 6–9%

THE UAE

- Benefits regulated and limited by federal legislation to the provision of severance pay calculated according to specified formula
- UAE and Gulf Cooperation Council ('**GCC**') nationals required to enrol in the national and GCC country pension scheme respectively
- Total contribution of up to 20% of the pensionable salary is required for every Emirati and GCC national

The assets of these funds are held in separate trusteeadministered funds in terms whereof the Group pays fixed contributions into a separate entity. The Group has no legal or constructive obligations to pay further contributions if the fund does not hold sufficient assets to pay all employees the benefits relating to employee service in the current and prior periods. If the assets of the pension funds of Hirslanden are below 100% of what is needed to cover all obligations, mitigating actions are taken. The measures are borne by the employees who belong to the plan and the employer. The actions are defined by the severity of under-coverage. The Group's contribution to these plans is charged to the income statement in the year to which they relate. improved clinical outcomes and increased patient safety. Creating a consistently positive employee experience is also key to Mediclinic's aim of becoming an employer of choice and requires continuous engagement across the Group.

Mediclinic encourages and enables engagement across employee levels and divisions via various methods, including:

- the annual *Your Voice* employee engagement survey and resultant action plans;
- training and performance management;
- access to various supporting resources such as interactive call centres;
- occupational health clinics and programmes; and
- ethics lines.

For more information on how the Board engages with the workforce, refer to the Corporate Governance Statement in the 2021 Annual Report.

Research by Gallup® has shown that highly engaged employees contribute to better financial results,

Each division established new internal engagement channels and forums during the year to ensure employees received regular clear, concise and consistent information during a very uncertain time.

	CHANNEL	FREQUENCY	AUDIENCE		
	Campaign email ¹	Weekly during campaigns	All employees		
dn	Message from the Group CEO email	At least once monthly	All employees		
Group	Leaders' View ² virtual meeting	After each Group Executive Committee meeting	Executive and senior management (< 60 Group employees)		
	Leadership Exchange webinar	Three times annually	Executive and senior management (> 200 Group employees)		
	Beekeeper employee app	As needed	Customised groupings: all employees/all employed and affiliated doctors/facility- level employed and affiliated doctors		
and	CEO Doctors' Update	As needed	Employed and affiliated doctors		
Switzerland	CEO videos	As needed	All employees		
Swit	Executive Committee updates	As needed	All employees		
	Management Dialogue	Monthly	Management (senior, middle, junior) and specialists		
	Virtual break with the CEO	Monthly	No more than 10 employees per session		
a n	CEO blog	Ad hoc	All employees		
Southern Africa	Live COVID-19 broadcasts	Every second week	All employees/management		
So	WhatsApp	As needed	All employees		
e UAE	Video messages	Every 3-4 weeks at the height of pandemic	All employees/management		
The	Virtual doctor meetings	Every six months	All doctors		

Notes

¹ Campaign emails are one component of Group omnichannel campaigns; these campaigns leverage the existing communication channels of the divisions to engage employees on topics of strategic and operational importance.

² After every Group Executive Committee meeting, the divisional Executive Committees and Group Services senior management gather to discuss decisions made and topics of importance, and are given the opportunity to comment and/or ask questions.

LEADERSHIP EXCHANGE

The Leadership Exchange webinar is a new 90-minute leadership event that gives more than 200 leaders across the Group the opportunity to ask a predetermined panel candid questions via the online polling tool Sli.do. Each webinar is themed and during the first event in November 2020, the discussion focused on the Mediclinic Group Strategy and the 2021 half-year financial results. The panel consisted of the Group and divisional CEOs and the Group CFO.

YOUR VOICE

Since 2015, Mediclinic, in partnership with Gallup®, has annually administered the *Your Voice* employee engagement survey across all divisions to measure the levels of employee engagement; identify gaps at a departmental level; and support line managers in developing action plans to address engagement concerns.

The Your Voice employee engagement survey gauges workforce perceptions on the basic needs of employees; the level of management support; teamwork; opportunities for growth; and diversity and inclusion. The survey consists of no more than 30 questions that test:

• the standard Q¹² Gallup® dimensions;

- the accountability of line managers to provide feedback around engagement items;
- the understanding of the patient experience; and
- the perception of workplace culture, including diversity and inclusion.

With more than 77% of employees completing the survey, Mediclinic's participation rate is in line with the Gallup® healthcare industry benchmark of 77%. In 2020, most surveys were completed via email or the Gallup® survey website. Electronic surveying allows for survey data to be available much quicker, enabling rapid responses to issues identified.

CONNECT CONTINUED

COVIDEVELOPMENT

The pandemic's impact on employee engagement and the employee experience should not be underestimated. Employees had to adapt rapidly to business disruptions, new agile ways of working and engaging, and the general uncertainty accompanying the healthcare emergency. The *Your Voice* employee engagement survey priorities and action planning processes within each division were adapted accordingly. Due to operational pressures and time constraints, Mediclinic encouraged line managers to focus on the wellbeing of their teams, being lenient with action planning. These challenges also impacted the overall participation rate compared with prior year periods and contributed to the slight decline in the number of engaged employees. However, the Group used the opportunity to gain greater insight into employee needs and ways to support their resilience and wellbeing.

In order to drive employee engagement towards enhancing the quality of life, a Group Centre of Expertise provides guidance, with consistent messages around the Group's purpose, vision, values and strategic goals. As such, all the divisions have the same focus areas:

- ensuring effective Your Voice action planning;utilising the existing performance management
- process and other workforce engagement mechanisms to optimise levers for change;



Notes

¹ Engaged employees are loyal and psychologically committed to the organisation. Compared with other employees, they are more productive and more likely to stay with the organisation, and they consistently have their performance-related workplace needs met.
² Not engaged employees may be productive, but they are not psychologically committed. They have some of their performance-related

workplace needs met, but many remain unmet.

³ Actively disengaged employees are physically present, but psychologically absent. They are unhappy with their work situation, and most of their performance-related needs are not met.

HIGHEST SCORING THEMES IN 2020

HIRSLANDEN	MEDICLINIC	MEDICLINIC	MEDICLINIC GROUP
	SOUTHERN AFRICA	MIDDLE EAST	SERVICES
'I know what is expected of me at work'	'I know what is expected of me at work'	'I know what is expected of me at work'	'I have a best friend at work'
'My manager, or someone	'I have the materials and	'I have the materials and	'My co-workers are
at work, seems to care	equipment I need to do	equipment I need to do my	committed to doing
about me as a person'	my work right'	work right'	quality work'
'My co-workers are	'At work, I have the	The mission or purpose of	'The mission or purpose of
committed to doing	opportunity to do what	my company makes me feel	my company makes me feel
quality work'	I do best every day'	my job is important'	my job is important'

Given the current pandemic context, Mediclinic will continue to refocus on integrating employee engagement principles into the day-to-day operations of the Group. Encouraging engagement among all employees remains a priority, alongside promoting line manager accountability to ensure employee engagement is actively managed within their teams.



FEATURE

UNITED THEY DANCE

DESPITE THE TURBULENCE OF THE TIMES. EMPLOYEES FOUND A NOVEL WAY TO SHOW THAT THEY ARE IN HARMONY WITH ONE ANOTHER.

Masked and in scrubs, the healthcare workers line up. The doctor catches a nurse's eye and nods - everyone is ready. With carefully calibrated movements and precise timing, they start. Working in unison is the hallmark of a well-trained medical unit and it is clear the Mediclinic Potchefstroom team is ready for the task at hand: the Jerusalema Challenge, a choreographed dance performed to a moving spiritual song. A way to signal their solidarity with the other Mediclinic employees dealing with the challenges of COVID-19.

Released in November 2019, 'Jerusalema' was a local hit for South Africans Master KG, the musician behind the irresistible beat, and Nomcebo Zikode, the gospel singer who imbues the song with so much emotion.

be a chance to lift spirits. On 13 August 2020, more than 60 employees - from all departments, including contractors and allied healthcare providers - lined up in front of the hospital's main entrance and danced their hearts out. From there the Jerusalema Challenge spread to Mediclinic hospitals across South Africa.

RENEWING TEAM SPIRIT

One of the most impressive performances was by Mediclinic Bloemfontein, where close on 160 employees gathered on 13 September to do the dance. Like at Mediclinic Potchefstroom, there was a strong drive to include employees from all spheres of the hospital: nurses to cleaners, admin personnel to paramedics. They are all part of the team that works to achieve the best outcome for patients - the dance was to reflect that.

In the weeks prior, paediatrician Dr Poly Orji and Dr Ilse Fourie of the Emergency Centre had teamed up with hospital management and department heads to share instructional videos. 'Employees were practising in their lunch hour and after hours to get the steps right. On the day itself, the atmosphere was electric. The fact that the doctors and specialists with whom they work every day were also there to participate, was very well received,' says the hospital's Barbara Steenkamp, Patient Experience Manager.

In Switzerland the maternity ward of Klinik Hirslanden did the Jerusalema Challenge, dancing together - and against the crisis. 'Along with colleagues around the world we want to demonstrate joie de vivre and solidarity,' they wrote about the video.

But it was when an Angolan dance troupe, Fenómenos do Semba, created a video of their moves in February 2020 that the song - and the dance challenge - went viral. The COVID-19 pandemic was sweeping the world and the Jerusalema Challenge offered the chance to connect as lockdowns forced people apart.

A MESSAGE OF HOPE

It was the desire to hearten patients and colleagues alike that drew Valencia Campbell, a professional nurse at Mediclinic Potchefstroom, to the song. 'The first time I heard it, I cried. It is one of those songs that immediately grips your heart. It felt as though it was written for all affected by the pandemic.'

At the time Mediclinic Potchefstroom was dealing with a surge in COVID-19 cases and employee morale was suffering, recalls Patient Experience Manager Diana King. Doing the Jerusalema Challenge would



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TRAINING AND DEVELOPMENT

The capability of Mediclinic is highly dependent on the skill-set of the sum total of its employees. Each team member's growth is valued and the Group is dedicated to providing accessible learning opportunities that can optimally enable employee performance and support career growth.

TRAINING

DIVISIONAL INFORMATION							
Investment ¹	HIRSLANDEN • 5.2% of payroll (2019: 5.5%)	 MEDICLINIC SOUTHERN AFRICA 2.7% of payroll (2019: 3.4%) 185 285 hours², equating to 12.2 hours/employee 	 MEDICLINIC MIDDLE EAST 0.72% of payroll (2019: 0.8%) 14 407 hours², equating to 11 hours/employee 				
Leadership training	 17 leadership training interventions hosted (2019: 23) Completed by 284 management employees (2019: 235) 	 All leadership training interventions were stopped during 2020 due to COVID-19 Leaders were equipped with tools to provide psychological support and care to their team members during the pandemic 15 students were registered on the Advanced Diploma in Health Services Management and Leadership 	The division sponsored the enrollment of 67 leaders in nursing in the American Association of Critical Care Nurses' self-directed e-learning programme, Fundamental Skills for Nurse Managers				

Notes

¹ Variation in percentage spend per division due to difference in training cost in each geography. At Mediclinic Southern Africa, training spend includes all costs related to the six registered nursing and paramedic learning centres.

² Reflects Company time spent on employee development training, including knowledge, behaviour and skills.

"

During 2020, good strides were made in adopting a Group learning management system.

Leaders are empowered through a variety of academic interventions, exposure to divisional and Group projects, stretch assignments, inclusion in leadership dialogues about important organisational and industry matters, mentoring and coaching, online learning resources, etc.

In 2021, the Group will focus on management development to ensure line managers are equipped with the necessary skills to be inclusive leaders who create an environment where employees can thrive and do their best every day.

During 2020, good strides were made in adopting a Group learning management system that will ultimately be the single point of reference for all learners. The transfer of interventions from legacy systems will continue in the coming year with a blended learning approach utilised to ensure relevance to the business priorities and successful learning outcomes.

PERFORMANCE MANAGEMENT

Performance management is a critical talent process where line managers and employees align expectations and goals to ensure the focused and deliberate contribution of each employee to the team, and ultimately, the divisional and Group goals.

During the past 12 months, the annual strategic planning cycle has been refined. This enables an earlier start to the process and therefore provides more room for the cascading of goals to each and every business unit and ultimately each employee.

Continuous performance conversations are encouraged across the Group, with formal annual/six-monthly performance tracking conversations between managers and employees. Managers are held accountable for *Your Voice* employee engagement action planning. The most recent *Your Voice* results validated this approach by reporting an increase in employee perception that their achievements are recognised through the process of continuous conversation. Management empowerment will remain a focus area for 2021 to optimise their ability to utilise these conversations for identifying training needs and facilitating effective career development discussions.

SUCCESSION PLANNING

The annual talent review process for key divisional and Group roles encompasses talent across the organisation and is standardised across Mediclinic with definitions and supporting tools consistently applied. This supports progress monitoring of bench strength, as well as risk monitoring to timeously identify insufficient pipelines for priority roles.

Active Group and divisional collaboration ensures alignment and direct insight into divisional development opportunities that can support the growth of successors. Even though the 2020 focus areas to enhance all core pipelines carry over to 2021, special emphasis will be placed on the Clinical, ICT and Human Resources pipelines, taking account of the Group's focus on diversity and inclusion.

The Group's enterprise succession management system enables all role players to monitor, influence and report on progress through accurate and integrated records of all succession and development-related actions. It is a dynamic tool that, despite the large number of employees reviewed and supported, offers flexible views on talent pools and the readiness of successors for key roles.

LABOUR RELATIONS

All policies and procedures are in accordance with applicable local labour legislation and are evaluated regularly to ensure they remain as such. Policies which deal with employee matters (i.e. misconduct, incapacity, and disciplinary and grievance procedures) are shared during onboarding of new employees and are made available to all employees via internal channels.

The minimum notice period for significant operational changes, as provided for in the employment contract, is:

- Switzerland: three months;
- Southern Africa: one month; and
- the UAE: two months for administrative employees and three months for medical practitioners, nurses and other clinical employees and managers.

Policy and guidelines govern action during workplace disruption (i.e. industrial action) to minimise the impact on healthcare services. Union representation is rare and in most cases an elected workplace forum regularly meets with facility management to ensure sound labour relations.

"

Even though the 2020 focus areas to enhance all core pipelines carry over to 2021, special emphasis will be placed on the Clinical, ICT and Human Resources pipelines.



TRADE UNIONS

DIVISIONAL INFORMATION

HIRSLANDEN

Switzerland is not strongly unionised, except in Geneva where employees at two hospitals – Clinique La Colline and Clinique des Grangettes – form part of a collective bargaining agreement.

MEDICLINIC SOUTHERN AFRICA

- Fluctuating trade union membership in South Africa at 12.57% of permanent employees (2019: 8.7%)
- Namibia at 14.84% of employees (2019: 16.6%)

MEDICLINIC MIDDLE EAST Not applicable in the UAE

DIVERSITY AND INCLUSION

Among the benefits of establishing a diverse workforce and a culture of inclusion are the following:

- A better employee experience results in higher employee engagement, which has a direct impact on productivity and goal achievement.
- Problem-solving and innovation capabilities are unlocked through the wide array of perspectives and experiences available in the organisation.
- Engaged employees are the best attractors of talent, convincing their peers in the market that Mediclinic is an employer of choice.

Mediclinic strives to be truly diverse across all levels of the organisation. Strong endorsement by the Board and executive management, and the allocation of financial resources support the effective implementation of the long-term Diversity and Inclusion Strategy, which will deliver key organisational benefits. The transformation journey is further bolstered by the Group Talent Centre of Expertise, which manages diversity and inclusion initiatives across the entire organisation.

AT BOARD AND EXECUTIVE LEVEL

- 1. The Board will not impose diversity quotas, although it will pursue diversity in the composition of the Board and executive management.
- 2. The Nomination Committee will consider and make annual recommendations, if applicable, regarding diversity objectives.
- 3. In reviewing the composition of the Board and executive management, the Nomination Committee will consider diversity in addition to the balance of skills, experience, independence and knowledge.
- 4. In identifying suitable Board candidates, the Nomination Committee will assess these on merit against objective criteria and with due regard to the benefits of diversity.

The Board aligns and complies with the Hampton-Alexander benchmark of at least 33.3% female representation. It also complies with the Parker Review recommendations in terms of ethnicity representation. Board composition is continuously reviewed to ensure diversity from various perspectives as mentioned above.

Refer to the Nomination Committee Report and to the Corporate Governance Statement included in the 2021 Annual Report for more detail and information on representation at Board and executive level.

"

Mediclinic strives to be truly diverse across all levels of the organisation.

AT ORGANISATIONAL LEVEL

Over the past year, the Board and Group Executive Committee actively monitored progress on gender diversity at senior management level across the Group. They subsequently refined the corresponding diversity target to achieve at least 40% female and at least 40% male representation at senior management and executive level throughout the organisation. While the Group has uniform gender and generational focus areas across all geographies, they are supplemented by division-specific diversity priorities. Specific targets include:

- racial representation targets that are aligned with broad-based black economic empowerment ('B-BBEE') Employment Equity targets per occupational level at Mediclinic Southern Africa and Mediclinic Group Services; and
- an Emiratisation target of 3% Emirati representation by March 2022 and 8% by 2025 at Mediclinic Middle East.

Various initiatives across all talent practices have been identified to support the achievement of these targets.

FIGURE 3: DIVISIONAL DIVERSITY FOCUS AREAS



In 2019, the *Your Voice* employee engagement survey was enhanced with four additional questions to determine the perception of diversity and inclusion in the workplace, specifically pertaining to the key themes of 'I belong', 'I am valued' and 'I am empowered'. Encouragingly, the second survey revealed an overall increase in these scores across the Group. The results are currently being communicated across the Group and themes that require further exploration pursued through a variety of initiatives.

GREAT LEADERSHIP CONVERSATION SERIES

'I was privileged to participate in the organisation's 2020/2021 Great Leadership Conversation Series, and I am heartened to see the way we are welcoming diverse perspectives. The ever-increasing rate of change in business requires agility and adaptability, and these skills are, in my experience, more inherent to diverse teams that produce an array of unique perspectives and solutions.'

Dame Inga Beale, Non-executive Chair of Mediclinic International plc

During 2020, the Group invited female leaders across the organisation to participate in an online conversation series which considered the female perspective on specific work-related themes. Postconversation surveys identified priority areas and informed regular reports to the Group Executive Committee. Each participant was encouraged to extend the conversation to their informal network to ultimately reach more than 200 female leaders across the Group. In future, conversations with various employee resource groups across Mediclinic will encourage and promote an understanding of diverse contributions and perspectives, and assist in implementing the measures needed to entrench a truly inclusive culture.



The 2020 diversity and inclusion communication campaign was delivered with great success across the organisation. As a Group campaign, it leveraged universal content and design, but was customised according to geographic preferences for imagery, distribution channels and language. In the year ahead, the organisation will continue to encourage all leaders to complete diversity and inclusion-related training interventions, and will support these with practical measures to instil accountability for the achievement of specific targets or outcomes.

GENDER PAY GAP

To understand the state of gender pay equity within the organisation and to support the Group's Diversity and Inclusion Strategy, an in-depth gender pay gap analysis was conducted in November 2020. Average hourly salaries at each level were reviewed by gender across each division.

The analysis revealed that the gender pay gap as experienced at 1 November 2020 is a result of fewer

women holding senior positions within the Company when compared with men. At the time of the analysis, 75% of Mediclinic permanent employees were women, of which only 16% held senior management roles.

Traditionally, nursing is a profession comprised of mostly females. At Mediclinic, female nursing employees account for just more than 40% of the workforce.

PERMANENT EMPLOYEE COMPOSITION BY AGE, GENERATION AND GENDER (AT 31 DECEMBER 2020)



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TRANSFORMATION (SOUTH AFRICA)

Mediclinic Southern Africa has assigned priority resources and time to implement a transformation strategy that encompasses diversity and inclusion and is dedicated to delivering transformative benefits to the organisation beyond compliance requirements. It has therefore aligned its efforts to the Group values and to the national priority for transformation in a transparent and deliberate manner. Practical contributions are led by the divisional executive committee, with transformation champions across the business.

PERCENTAGE BLACK EMPLOYEES



Percentage black employees (2019: 70%)

71%

Percentage black management employees (2019: 55%)

Diversity and inclusion fuel the division's performance in other areas of B-BBEE, such as ownership and CSI. This focus also drives its approach to enhance access to quality healthcare and to collaborate with other stakeholders to achieve this goal.

The division is dedicated to improving its Level 4 B-BBEE compliance. In the past year, it has seen improvements across the elements, most notably in management control, preferential procurement, and enterprise and supplier development.

Mediclinic Southern Africa's five-year (2018–2022) Employment Equity Plan was approved by the Department of Employment and Labour in November 2018.

TABLE 8: SUMMARISED EMPLOYMENT EQUITY REPORT TOTALS¹

		Ma	ale			Fen	nale			reign ionals	
Occupational level	A ²	C ²	²	W ²	A ²	C ²	²	W ²	Male	Female	Total
Top management	0	1	1	10	1	0	0	2	1	0	16
Senior management	0	3	2	36	0	0	0	10	0	0	51
Professionally qualified and experienced specialists and mid-management	24	48	10	166	39	60	26	279	4	2	658
Skilled technical and academically qualified workers, junior management, supervisors, foremen and superintendents	377	158	51	286	1 974	929	225	2224	182	212	6 618
Semi-skilled and discretionary decision-making	944	389	59	244	3 898	1 393	159	870	6	18	7 980
Unskilled and defined decision-making	105	84	5	15	72	63	11	4	1	0	360
Total permanent employees	1 4 5 0	683	128	757	5 984	2 445	421	3 389	194	232	15 683

Notes

¹ In respect of all Southern Africa employees, which includes Mediclinic Group Services, Medical Innovations and Mediclinic Southern Africa (incl. the wholly owned subsidiary ER24 and Welkom Medical Centre).

² A = African, C = Coloured, I = Indian, W = White.

EMIRATISATION (THE UAE)

Mediclinic Middle East's Emiratisation campaign, defining the hiring and development of Emirati citizens, commenced in 2007, but meeting salary expectations, especially in administrative positions, remains challenging. The division therefore focuses on training and education through its participation in various career events arranged by the UAE Ministry of Human Resources and Emiratisation and aimed at assisting Emiratis to find suitable employment in the private sector.

Mediclinic Middle East demonstrates its commitment to developing Emirati talent by collaborating with Emirati universities and by sponsoring Emirati students who study life sciences and business-focused disciplines, after which Mediclinic Middle East guarantees their employment.

At the end of 2020, Emirati employees (including affiliated doctors, temporary employees and locums) represented 1.56% of the workforce against a target for the year of 1.5%. The goal is to reach a representation of Emirati employees of 3% of the total workforce by March 2022. As part of their team of 10, the Mediclinic Middle East executive committee has one Emirati who guides and leads the division in their goals in this regard.

WELLNESS AND SAFETY

To build a culture of wellness, Mediclinic takes a holistic approach which includes physical, social, emotional, occupational, environmental and financial support, by offering a variety of onsite and offsite services and activities across the Group. Health and safety policies and procedures govern the health, safety and cleanliness of all Mediclinic facilities. Services, activities and policies are managed at a divisional level and tailored to local considerations. Working hours are determined by operational requirements per division and per facility. Overtime is managed collaboratively by the Human Resources function, line managers and employees in order to actively reduce excessive working hours, especially for nursing and clinical personnel.

REGIONAL INFORMATION

WELLNESS

SWITZERLAND

- Part-time work offered
- Work-from-home offered to permitted positions
- Sick leave monitoring to identify if additional support is needed
- Free fitness facilities at some locations
- Affordable and healthy onsite catering
- Purchase of additional leave possible
- Subsidised childcare at several facilities
- Attractive employee benefits offered through partnerships

SOUTHERN AFRICA

- Work-from-home offered to permitted positions
- Corporate Wellness Committee
- Employee Assistance Programme with free helpline and confidential counselling
- Occupational health clinic at Corporate Office and all large facilities
- Weekly offering of occupational health services, primary care and family planning at smaller facilities
- Corporate dashboard for overview of occupational injuries and disease, fitness-to-work certification and disability management
- Introduction of occupational health audits
- Wellness drives (events, campaigns, surveys)
- 12-week wellness programmes
- Executive Health Resilience Care Programme focused on health risk stratification and health enhancement
- Affordable onsite catering
- Purchase of additional leave possible

SAFETY¹

SWITZERLAND

- Managed at facility and Corporate Office level
- Compliance with EKAS, the Swiss coordination agency for workplace safety
- Hepatitis B vaccinations
- Compliance with Swiss Labour Law standards for air composition, temperature and humidity at the workplace
- Annual flu vaccination
 at no cost

SOUTHERN AFRICA

- Facility-level Health and Safety Committees with management-worker representation
- Annual flu vaccination at no cost
- Occupational health clinic services include occupational and primary health to employees, as well as HIV/Aids counselling

THE UAE

- All hospitals and clinics accredited by Joint Commission International ('**JC**I')
- Accreditation for clinical programmes and centres of excellence at Mediclinic Welcare Hospital, Mediclinic Parkview Hospital and Mediclinic Airport Road Hospital
- Annual licensing by authorities subject to inspection with safety aspect
- Corporate EHS function manages implementation of occupational safety and health management systems ('OSHMS') standards, and ensures compliance with local legislation
- EHS information mandatory consideration for contractor and vendor selection and evaluation

Note

¹ COVID-19 testing is conducted in accordance with local regulations and best practice. Whether the cost is covered by the employee, division, health insurance or government depends on the individual circumstances and geography.

THE UAE

- Employee Wellness Committee
- Wellness drives (events, campaigns)
- Mental health ongoing focus
- Affordable onsite catering
- Purchase of additional leave possible
- Free transport and accommodation for frontline workers during COVID-19 pandemic, if required

FEATURE

CARING FOR THE CARERS

WHILE PHYSICAL PROTECTION AGAINST THE VIRUS IS IMPERATIVE, EMPLOYEES ALSO NEED EMOTIONAL AND PSYCHOLOGICAL FORTIFICATION.

Although COVID-19 pervaded every aspect of life in 2020, the healthcare industry shouldered a particularly onerous burden. 'During a pandemic, employees often work extensive hours in the interest of patient safety and put themselves at risk of burnout. If not properly supported, healthcare workers can become psychologically traumatised,' says Karin Walters, Group General Manager: Talent Management.

To build and protect the psychological resilience of employees, each of the divisions implemented emotional support initiatives. Starting in March 2020, Hirslanden supplied all clinical employees with a Corona Care Kit. As lockdowns dragged on and those away from the frontline faced their own challenges, the resources were extended to other employees in May 2020.

Hosted on the division's intranet and promoted regularly in communications, the Hirslanden Corona Care Kit offered assistance in the form of an independent 24-hour support line, offers for personal coaching, and access to care services offered by the Corporate Office. Thanks to cooperation with the Klinik Sonnenhalde, a specialist psychiatric facility, employees had online access to 10 proven self-help modules at no cost. Furthermore, employees could use a mindfulness application.

MULTIFACETED SUPPORT

With the pandemic having a profound effect on Southern Africa, Mediclinic Southern Africa launched the Care. Courage. Compassion. initiative, a multipronged approach to support employees.

An employee web portal was created to provide advice and practical tools for managing all aspects of wellness, from psychological to financial. Compiling this required an inter-departmental effort from marketing, internal communication and human resources, demonstrating that the best way to care is together. By May 2020, the division had created a mobile app so employees could make use of the resources anytime, anywhere.

Mediclinic Southern Africa empowered leaders to support their teams through weekly audiocasts and emails that focused on leading through a crisis, as well as a wellbeing guide and leader toolkit. Employees needing more support could, and still can, get telephone counselling or join support sessions, both virtually and in person. Leadership encouraged employees to attend sessions and arranged facilities and schedules to accommodate them.

The division was assisted by several volunteer organisations: religious entities arranged prayer walks and pastoral visits, external mental health professionals volunteered their support and the employee assistance partner, Incon Health, leveraged its programme.

MAINTAINING CONNECTIONS

At Mediclinic Middle East, a series of seven videos entitled *Quarantine Unseen* was created to share uplifting content and highlight employee efforts during the pandemic.

The videos covered a range of aspects, from the launch of telemedicine to practical advice for supporting body and mind. In less than seven minutes, the messages reconnected employees who found themselves separated by lockdown restrictions. *Quarantine Unseen*'s quirky approach was a reminder to find a ray of sunshine among the pandemic's gloom. As Dr Samara Khatib, consultant of internal medicine at Mediclinic Parkview Hospital, put it in one of the videos: 'Please remember to stay positive and take good care of yourself.'

Mediclinic Middle East supported employees through access to onsite mental health professionals and regular mindfulness sessions offered via Zoom and YouTube.

'We are mindful of the extraordinary stress this pandemic placed on frontline employees. We therefore went out of our way to support them,' said Johan Malan, Chief Human Resources Officer: Mediclinic Middle East. 'In addition to an employee assistance programme, access to mental health support and continuous communication on the pandemic and its impact, senior management visited the facilities on a regular basis and the company paid for accommodation when employees needed to isolate from friends and family.'

LEARNING FOR THE FUTURE

To understand the impact of the pandemic on employees, the Group ran a COVID-19 Pulse Survey in June 2020 with more than 10 000 participating employees across Mediclinic Southern Africa, Mediclinic Middle East and Mediclinic Group Services. As the pandemic surge had eased in Switzerland by that stage, the survey wasn't conducted at Hirslanden.

The survey revealed that employees felt positive about COVID-19-related plans, policies and safety protocols. Stress management at work and overall personal wellbeing were top of mind, which confirmed that support initiatives were aligned with employee needs. The results indicated where additional support was desired and enabled leaders to provide swift assistance where most needed.

TUBERCULOSIS AND HIV/AIDS

Proper management of sharps injuries and safety procedures are applied at all three divisions. HIV/Aids diagnosis and support are offered to affected employees in accordance with local regulations.

Mediclinic's recruitment policies conform to the local legislation of its divisions. At Hirslanden and Mediclinic Southern Africa, the HIV/Aids status of new recruits is not considered during appointment, whereas in Mediclinic Middle East, foreigners planning to work in the UAE must be tested for HIV upon arrival (and thereafter every two years).

Mediclinic Southern Africa has high prevalence and

risk relating to tuberculosis and HIV/Aids, which warrants additional initiatives. Workplace policies cover aspects ranging from IPC measures to diagnosis and support. The division's HIV/Aids programme consists of: • education and awareness campaigns;

- voluntary counselling and testing;
- early intervention for reported exposure;
- treatment and monitoring; and
- continuous support.

Access to antiretroviral drugs is managed as a PPP with the Department of Health and certain medical insurance companies and schemes.

INJURIES AND ABSENTEEISM

The Group has not reported any work-related fatalities¹ for three consecutive years.

Total work-related injuries

Group	5 752 ^{2019:} •
Switzerland	914 ^{2019:} •
Southern Africa	4 293 ^{2019:} •
The UAE	545 ^{2019:} •

Absenteeism due to injuries in business days (including the day of the injury)²

Group	54 536 ^{2019:} •
Switzerland	13 385 ^{2019:} •
Southern Africa	35 947 ^{2019:} •
The UAE	5 204 ^{2019:} •

Occupational diseases

Group	18 ^{2019:}
Switzerland	0 2019: >
Southern Africa	18 ^{2019:} 24
The UAE	O 2019: ► O

Total absenteeism due to injuries and sickness in hours³



Absenteeism rate⁵

Group	3.9%	Switzerland 5.3% 🔗	Southern Africa	4.7% 🔗	The UAE 1.2% •
		2019: 4.4%		2019: 2.5%	2019: 0.8%

Notes

¹ Excludes COVID-19-related fatalities.

² Data includes injury-on-duty and COVID-19-related infection while on duty.

³ Data includes injury-on-duty, COVID-19-related leave and sick leave.

⁴ Pre-2020, absenteeism due to injuries and sickness at Mediclinic Middle East was measured and reported on in days.

⁵ Actual days lost expressed as a percentage of total days scheduled to be worked by the workforce during the reporting period.

COVIDEVELOPMENT

The pandemic had a profound effect on reported absenteeism due to COVID-19-related quarantine periods (which varied in length per geography and stage of the pandemic), infection-related sick leave and employee exhaustion, with each division adopting leave practices in line with local legislation and regulations.

REGIONAL INFORMATION

SWITZERLAND

- Existing sick leave policy applies
- Quarantine period allocated against illness and qualifies as paid leave, unless necessitated by employee travelling to high-risk country (unpaid leave)
- COVID-19 work-related quarantine and infections allocated against injury on duty

SOUTHERN AFRICA

- Existing sick leave policy applies
- Leave related to work injuries and COVID-19 attracts statutory leave in line with the Compensation for Occupational Injuries and Diseases Act, No. 130 of 1993

THE UAE

- Existing sick leave policy applies for non-hospital-acquired COVID-19 infections
- Leave due to hospital-acquired COVID-19 categorised as injury on duty
- Quarantine as a result of contact with a person outside of work allocated against normal leave

OPTIMISED SUPPLY CHAIN

GROUP PROCUREMENT FUTURE STATEMENT

Governance, safety and control over all procurement in the Group through standardised procedures and information management, and a simplified human interface to drive adoption across all business units and realise effective savings and cost avoidance of 12.5%.

The Group procurement five-year vision, approved in 2019, is built on four pillars, with good progress made during 2020.

PILLAR	PROGRESS
Standardised procurement processes and master data management through the establishment of Group Procurement Support Services	Global blueprint for developing standardised procedures for all indirect procurement completed
	Commenced project to consolidate all procurement master data resources into a shared support service to standardise processes and operating systems support
E-procurement solution to cover all spend across the Group	Commenced pilot project for e-procurement across all indirect procurement at Hirslanden
Management and analytics for all spend in the Group	First phase of Group spend management project completed to: (a) provide a consolidated view of all spend across the Group; and (b) measure key procurement metrics
An organisational structure to support the ongoing functioning of Group Procurement	

Mediclinic's Supply Chain Risk Management Policy and the Ethics Code provide a framework wherein supplier selection is, *inter alia*, based on alignment with the Group's purpose and culture, as well as delivering products and services of the highest quality.

Mediclinic refrains from doing business with third parties who do not conduct their business in an environmentally responsible manner and influences its suppliers and service providers to limit their overall impact on the environment.

Suppliers are reviewed during onboarding and regularly thereafter to ensure they comply with the ISO 9000 and/or ISO 13485 quality management certification, relevant ISO certification of the products utilised, CE¹ certification and/or certification by the Food and Drug Administration of the United States of America.

Note

CE marking = a certification mark that indicates conformity with health, safety and environmental protection standards for products sold within the European Economic Area ('**EEA**'); also found on products sold outside the EEA that are manufactured in, or designed to be sold in, the EEA.

The following international procurement initiatives unlock synergies and implement standardisation to the benefit of the Group:

- pooling capital equipment purchases across the three divisions for better prices;
- global contracts with key suppliers of surgical products and implants;
- price comparisons to ensure similar value is achieved by all divisions;
- direct importing of a select range of capital equipment; and
- direct importing and distribution of more cost-effective surgical and consumable products.

The GPO delivers products at reduced prices through:

- dedicated resources which source new products and uncover cost-reduction opportunities;
- the arm's length principle where the divisions procure from the GPO only when it offers better value than their existing supply chains;
- improved governance to ensure cost-reduction strategies do not create risks to the business or patients;

- due diligence investigations of manufacturers to ensure product quality and safety; and
- positive response to competition by suppliers ensuring they deliver best value to maintain their business with the Group.

The Group is making good progress with its strategy to rationalise the number of suppliers to enable growth with selected key partners, thereby strengthening negotiations.

Any form of incentive is prohibited and the Group's ethics lines are available to suppliers to report any such conduct within the Group. Centralised procurement decisions prevent employees and medical practitioners at hospital level from influencing procurement choices. Employees involved in purchasing are bound to strict ethical principles and corporate policies on gifts and invitations to ensure an impeccable standard of integrity is maintained.

During the year additional measures were put in place to monitor supplier conduct.

Refer to the Mediclinic Modern Slavery and Human Trafficking Statement on the Group's website for more information.

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The Group is making good progress with its strategy to rationalise the number of suppliers to enable growth with selected key partners, thereby strengthening negotiations.

REGIONAL INFORMATION

SWITZERLAND

- Central logistics platform for daily distribution
- Active product portfolio management to improve product standardisation and support contract negotiations
- Cooperation with German Sana Hospital buying group to strengthen negotiations
- Utilisation of hystrix digital marketplace to achieve savings
- Outsourcing of maintenance and service of medical devices
- Improved data quality of maintenance system

SOUTHERN AFRICA

- Centralised procurement
 department
- Preferential procurement strategy for supplier B-BBEE status
- Successfully implemented change to operating structure for capital procurement, allowing for category specialisation and individual focus on project procurement
- Spend management dashboard and supporting detail reports completed

THE UAE

- Central logistics platform for daily distribution
- Improved inventory management and controls
- Strengthened procurement governance and controls
- Improved spend visibility and analytics
- Opportunity for suppliers to co-host continuous medical education events
- Development of retail pharmacy structure
- Allocation of Supplier of the Year award

PROCURING PPE IN A PANDEMIC

TO PROTECT EMPLOYEES AND CLIENTS, THE GROUP'S PROCUREMENT TEAMS STRATEGICALLY SOURCED ESSENTIAL SUPPLIES AND PREVENTED CRITICAL SHORTAGES OF PPE.

🛕 PPE USE AND COSTS SHOT UP

IN-DEMAND PRODUCTS:

- EXAMINATION GLOVES
- 3-PLY MASKS
- KN95 RESPIRATORS
- ISOLATION GOWNS



INCREASE IN REQUIREMENTS WORLDWIDE CAUSED PRICES TO SKYROCKET



70 million examination gloves

sourced in average year

105 million examination gloves sourced in 2020

2 900% increase in use of isolation gowns during pandemic's peak **1.3 million** masks/month used during COVID-19

"

Based on the global demand and volume shortages, procurement had to extend beyond normal sourcing channels. Joint purchasing enabled a rapid response to sourcing, while the global Group volumes provided additional leverage to secure stock.



FUTURE WORKFORCE

In light of the continued global shortage of healthcare employees and to secure the future of healthcare, Mediclinic actively invests in the workforce of tomorrow. Across the divisions there are training opportunities for healthcare students and support of applicable studies.

REGIONAL INFORMATION

SWITZERLAND

- Trained 1 624 students (2019: 1 594) (federal certificate, higher college, college or graduate) across 36 job functions (2019: 28), predominantly as junior medical practitioners and in healthcare professions
- Provision of nursing training positions
- Lectures at external academic institutions
- Collaborations with universities for medical student training

SOUTHERN AFRICA

- Bursaries for nursing, pharmacist and paramedic students with employment offered upon completion
- Bursaries for medical practitioners doing specialist studies and placement opportunities for undergraduate medical students
- Funding in the form of bursaries and payment of courses to the value of ZAR8.5m (2019: ZAR10.0m)
- Training and development function registered as a Private Higher Education Institution
- 73 students (2019: 206) completed the undergraduate programme, Diploma in General Nursing Science, and 10 students completed post-graduate nursing programmes
- No students (2019: 3) completed the Advanced Diploma in Health Services Management and Leadership as the programme was extended due to the pandemic

THE UAE

- Trained a total of 79 fourthand fifth-year students as part of affiliation agreement with Mohammed Bin Rashid University ('MBRU')
- Student partnership with the Higher Colleges of Technology ('HCT') as part of Emiratisation campaign – four-week on-the-job exposure
- 110 student placements in Abu Dhabi facilities for Allied Health undergraduates from HCT, Al Ain University and Fatima College of Health Sciences programmes in 2020
- Paediatric residency with Al Jalila Children's Hospital
- On advisory boards: MBRU College of Nursing and Midwifery, Khalifa University of Medicine and Health Sciences, Health Sciences programmes for HCT, Health Sciences programmes for Fatima College of Health Sciences
- On the Abu Dhabi Department of Health National Taskforce for medical education, including school-level awareness, undergraduate training, returnto-practice and -internship programmes, continuing professional development for healthcare providers, postgraduate training, and support of Emirati physician career progression planning

FEATURE

TRAINING NURSES FOR TOMORROW

THANKS TO CLOSE PROFESSIONAL RELATIONSHIPS, ONE HOSPITAL IS SERVING ITS COMMUNITY – NOT JUST IN THE PRESENT, BUT WITH AN EYE TO THE FUTURE.

Encompassing 50 beds and 70 employees, Mediclinic Klein Karoo is a close-knit community in itself, but it also has cherished ties with the town of Oudtshoorn, South Africa, where it is situated. It is the kind of place where community members will arrive out of the blue with treats to thank employees for their commitment during the COVID-19 pandemic.

Being so deeply embedded in the fabric of Oudtshoorn life, it was a natural fit for Mediclinic Klein Karoo to provide training opportunities for students at nearby Emmanuel Nursing School. This is one of the few nursing colleges in the countryside where young people can equip themselves with this sought-after skill.

Since 2012, Emmanuel students have joined the hospital to complete their practical training. In 2020, 18 students of the higher certificate in auxiliary nursing did so. 'Under supervision of their own clinical facilitator, the students shadow our professional nurses, enrolled nurses and auxiliary nurses,' explains Hannes Stegmann, Hospital General Manager.

The hospital is a good training ground for aspirant nurses because they can gain experience in various areas, from general wards to the operating theatre and even critical care. 'Nursing is equal parts theory and practical,' says Dr Michelle van Bommel, principal of Emmanuel Nursing School. 'The training opportunities are vital for the students' professional development.'

While doing their practical at Mediclinic Klein Karoo, the student nurses are effectively part of the team. 'I make it clear to them that we expect the same high standards that Mediclinic is known for,' says Sr Andrie Wiese, Nursing Manager. The students work alongside experienced nurses and are included in all aspects of hospital life. Their mentors provide feedback throughout the training period so that the students can continuously improve.

But the benefits flow both ways. 'These training opportunities reiterate correct nursing practices and help

"

We see this as part of our CSR, a service that we provide to the local community and an investment in the future of healthcare.

Hannes Stegmann Mediclinic Klein Karoo Hospital General Manager

maintain high standards in our own hospital. Our nurses have to demonstrate precision in every procedure so that the students acquire the appropriate skills,' says Sr Wiese. At the same time the hospital expands the support system for patient care without increasing costs to clients. 'To my mind there are only advantages,' she says.

As the only private hospital in the region providing these training opportunities, Mediclinic Klein Karoo unlocks the potential of young people who have a lot to give. 'We see this as part of our CSR, a service that we provide to the local community and an investment in the future of healthcare,' says Stegmann.

Developing the nurses of tomorrow is a subject that lies Sr Wiese close to the heart. 'If we do not train students now, we will not have enough nurses in 10 years' time.'



WHAT DO THE STUDENTS SAY?

'The first day was overwhelming. But as I worked alongside nursing employees, I gained a little confidence every day. The theatre nurses motivated me to keep working hard towards my goal of becoming a professional nurse.' – Deidré Bakers, learner auxiliary nurse

'The nursing employees were very helpful because they knew we were there to learn and do our best for patients. I feel like my work in theatre improved in particular. During procedures the doctors would explain to us what they were doing and why.' – Cindylee Adonis, learner auxiliary nurse

CORPORATE SOCIAL INVESTMENT

The Group contributes to the wellbeing of the communities within which it operates by investing in continuing initiatives that address socio-economic problems or risks. CSI activities are structured around the improvement of healthcare through training and education, sponsorships, donations, employee volunteerism, PPP and joint ventures. Given the diverse landscapes (both physical and regulatory) in which the Group operates, CSI focus areas are

determined by each division to adequately address the needs of their specific geographies.

REGIONAL INFORMATION

SWITZERLAND

- Spent CHF1.8m (2019: CHF2.1m)
- Support of *Checkup*, weekly healthcare TV programme
- Educational campaigns on skin and breast cancer, gastrointestinal health, pain therapy, winter sport emergencies and resilience
- Support of Mercy Ships through financial aid and medical expertise
- Medical partner in sporting events

OVIDEVELOPMENT

Support of the foundation I care for you and their fundraising campaign for COVID-19-affected people in Switzerland, #zämefüralli (together for all)

COVIDEVELOPMENT

Medical partnership of the OneMillionRun, a Swiss-wide sports event, as well as financial aid

• Access to medical healthline granted to public at no charge during pandemic

Notes

¹ Excludes contributions made by Mediclinic Group Services

² PHEF support reported per financial year.

HUMAN RIGHTS

The Group is committed to conducting its business in a manner that respects and promotes the human rights and dignity of people. This commitment is entrenched in the Group's Ethics Code, which is further supported by the Group's commitment to:

- avoiding and not contributing to any indirect adverse human rights impacts linked to the Group's operations or services by its suppliers or other business relations;
- respecting patients' rights, including but not limited to privacy, confidentiality, dignity, no discrimination, full information on health status and treatment, a second opinion, access to medical records, self-determination and participation, refusal of treatment and the right to complain;
- valuing diversity and equal opportunities for all in the workplace; and
- not tolerating any form of unfair discrimination, such as

SOUTHERN AFRICA¹

- Spent ZAR29.8m (2019: ZAR26.7m)
- Donations made by Group Services ZAR375 000 (2019: ZAR733 333)
- Donated PPE across the country
- ZAR11.7m in emergency medical services and transport for indigent patients by subsidiary ER24
- PHEF support of ZAR5m²
- COVIDEVELOPMENT
- Pro bono surgeries to reduce surgical backlogs in state facilities delayed due to pandemic
- Learner trauma counselling by ER24

THE UAE

- Spent AED1.91m (2019: AED2.3m)
- Sponsored donor nephrectomy for renal transplant and living renal donor transplant (donor and recipient) as part of Mediclinic City Hospital's transplant programme
- Medical services for underprivileged children as part of Mediclinic's support for the Al Jalila Foundation
- Sponsorship of Red Crescent's Ramadan campaign
- Donation of office space within two hospitals in Abu Dhabi and Al Ain to the Emirates Cancer Society

relating to access to employment, career development, training or working conditions based on gender, age, religion, nationality, race/ethnic origin, language, HIV/Aids status, family status, disability, etc.

During the year, no material incidents of discrimination, violations involving rights of indigenous peoples and/or human rights reviews or impact assessments were observed or reported throughout the Group.

MODERN SLAVERY AND HUMAN TRAFFICKING

The **Mediclinic Modern Slavery and Human Trafficking Statement**, which is available on the Group's website, sets out the steps Mediclinic has taken to prevent any form of these abuses, including any direct form of forced labour or child labour in its business, or indirectly through its supply chain.



COMPLY MATERIAL ISSUE 3: BEING AN ETHICAL AND RESPONSIBLE CORPORATE CITIZEN

Mediclinic is committed to conducting business with transparency, honesty and integrity, and applying sound governance and compliance principles across the Group. An array of policies, processes and standards supports the Group's compliance programmes and provides a framework for business conduct and ethics. This supports an environment in which the organisational values of the Group are embraced and lived daily, encouraging a culture of transparency and ethics. It is respectively shared and adopted by all relevant employees and, where necessary, training is provided.

2020 IN NUMBERS

Calls to ethics lines¹

Group	148 ^{2019:} •
Switzerland	16 ^{2019:}
Southern Africa	115 ^{2019:} •
The UAE	17 ^{2019:} •

Investment in capital projects and new equipment²

Group	£72m	2020: 🗸 £108m
Hirslanden	CHF43m	2020: 🗸
Mediclinic Southern Africa	ZAR400m	2020: 🗸 ZAR582m
Mediclinic Middle East	AED88m	2020: 🗸

Investment in equipment replacement and property upgrades²

Group	£54m	2020: 🗸
Hirslanden	CHF38m	2020: 👽 CHF43m
Mediclinic Southern Africa	ZAR302m	2020: 🗸
Mediclinic Middle East	AED36m	2020: 🗸





Notes

¹ Six high-priority cases were reported to the Group's ethics lines during the year, investigated and closed.

As capital expenditure is audited annually by the external auditor PricewaterhouseCoopers as part of the Annual Report, the amounts disclosed are on a financial year basis.

³ The FY20 expenditure on repair and maintenance has been re-presented to be consistent with the expense-by-nature income statemen presentation

PREVENTING BRIBERY AND CORRUPTION

Mediclinic's position as a trusted diversified healthcare services provider is underpinned by its commitment to ethical standards. The Group's Ethics Code, which is available on the Company website, guides honourable business conduct. A Group-wide compliance monitoring programme exists to reinforce the Group's commitment to regulatory compliance and to monitor the level of compliance across all jurisdictions.

Independent ethics lines exist to enable whistleblowers to report concerns in a confidential or anonymous manner. Over the years, the majority of calls have been of a grievance nature. Only in exceptional cases has information led to the discovery of unethical, corrupt or fraudulent behaviour.

As part of the Group Sustainable Development Strategy, a targeted drive to raise awareness of antibribery, corruption and ethical behaviour was developed during 2020, with roll-out in 2021. Content was customised in English, French, German and Arabic, according to the language preferences of the operating geography. The Group's ethics line efficiencies were also reviewed by considering their visibility; awareness of availability, confidentiality and whistleblower protection; and response at hospitals and corporate offices. These campaigns will continue to be implemented on an annual basis and include onboarding materials to all new recruits and suppliers.



Quarterly reports to Audit and Risk Committee Regular feedback to Clinical Performance and Sustainability Committee

Independently

operated

Numbers

published

widelv

Anonymous,

confidential

reporting

Reports

No discrimination

or retaliation for

whistleblowing

referred for

investigation

Risk services

investigation

and actions

monitor

ethics lines

The Group's Anti-bribery Policy and Guidelines govern the offering of gifts, hospitality and entertainment, which will only be approved if it is acceptable business practice, there is a proper business case and it does not have the potential to adversely affect Mediclinic's reputation. This policy prohibits the direct sponsorship of supplier and/or third-party events, ensuring that all such sponsorships are administered and overseen by the relevant division within the Group.

Further details regarding the Group's management of these matters are included in the *Audit and Risk Committee Report* included in the **2021 Annual Report**.

A summary of the Group's approach to clinical ethical issues is set out in the **2021 Clinical Services Report**.

During the period under review, there were no incidents of material non-compliance with the Ethics Code, Anti-bribery Policy or any legislation, regulations, accepted standards or codes applicable to the Group concerning antitrust matters or matters relating to corruption and bribery, with no significant fines being paid in this regard.

64 MEDICLINIC INTERNATIONAL PLC 2021 SUSTAINABLE DEVELOPMENT REPORT

SUSTAINING EFFECTIVE AND TRANSPARENT GOVERNANCE

GROUP TAX STRATEGY

Mediclinic's Tax Strategy sets out the Group's commitment, in the jurisdictions within which it operates, to conducting its tax affairs in compliance with all relevant legislation, rules, regulations, and reporting and disclosure requirements; and to maintaining mutual trust and respect in dealings.

> The strategy is published in the 'Risk management' section of the Company's website at www.mediclinic.com.

COMPLIANCE WITH CONSUMER PROTECTION LAWS

The Group complies with all applicable consumer protection legislation within the geographic region in which it operates. No material complaints or breaches were reported during the reporting period.

In terms of the Namibian Competition Act, No. 2 of 2003, Mediclinic Southern Africa's pharmacies in Namibia are part of an investigation into the determination of pharmacy prices at all retail pharmacies in the country. The division received comprehensive legal advice from competition experts.

GOVERNANCE OF ADVERTISING

REGIONAL INFORMATION

SWITZERLAND

- Adherence to applicable legislation and guidelines
- Comprehensive corporate marketing and communication governance process that complies with the international management standard ISO 9001/2015 (audited annually)
- Takes responsibility for compliance of all advertising material produced

SOUTHERN AFRICA

- Comprehensive corporate marketing and communication governance process
- Social media policies guide response to negative incidents, and manage and protect the business reputation

THE UAE

- Healthcare advertising regulated by the UAE Ministry of Health in Dubai and the Department of Health in Abu Dhabi
- All visual, audio, electronic, promotional and print media advertisements require prior approval through submissions to the Ministry of Health and Department of Health, which include supporting documents such as doctors' licences, editorial references, clinic/hospital trade licence, etc.
- Communication policy ensures communication to community is accurate and consistent
- The Corporate Social Media Policy governs how employees and contracted employees may discuss the division on digital media and social networking sites

MAINTAINING HIGH-QUALITY HEALTHCARE INFRASTRUCTURE

To ensure a safe and user-friendly environment for both patients and employees, the Group continuously invests in capital projects, innovation and digital transformation, new equipment to expand and refurbish its facilities, replacement of existing equipment, and the repair and maintenance of existing property and equipment.

The Group uses a balanced capital allocation decision-making process which supports the Group's leading market positions and results in enhanced patient experience through the quality of facilities and services offered.

Hospitals can be high-risk environments in which complex treatment processes are executed using sophisticated equipment and techniques. The process of external accreditation ensures that international standards are adhered to in all aspects of hospital operations therefore reducing the risk of injury or harm.

Refer to page 68 for more on accreditations.

COMPLY CONTINUED

PROTECTING INFORMATION ASSETS

The Group's technology and information assets as well as the users thereof are protected by an effective information- and cybersecurity ('**InfoSec**') programme. With operations spanning multiple geographical areas, it requires an international data network and Group approach to manage threats.

The Group InfoSec Committee, which consists of dedicated divisional Information Security Officers, governs InfoSec across the divisions according to information security best practices, sourced from several internationally acclaimed InfoSec institutions. It is tasked with:

- protecting technology and information assets and their users, as defined in the Group Information Security Policy;
- detecting and responding to cyber threats to the corporate network, systems and data;
- minimising the impact of cyber incidents should they materialise, as defined in the Group Cyber Incident Response Plan;
- minimising the loss of Company confidential information, such as patient data, across all physical and virtual data sources;
- optimally managing access to data through the implementation of an identity, access and rights management solution; and
- increasing users' understanding and awareness of how to protect Mediclinic's technology and information assets.

Key interventions include comprehensive policies and procedures, including a Group ICT Secure Configuration Standard, Group Cyber Incident Response Plan, annual cyber penetration tests, cyber risk audits, and effective and comprehensive awareness campaigns across the Group to educate users on topics such as mobile device security and email phishing. Although the Group was not a victim of a cyberattack during 2020, there was a security incident in Hirslanden that affected administrative data in its non-patient IT network. This was rapidly resolved, with no impact to patient safety or clinical services and only very minor disruption to a limited number of administrative functions. Based on investigations, there is no evidence that any data, including patient data, was accessed and all files impacted by the incident were fully restored.

'Information systems security and cyberattacks' and 'Disruptive innovation and digitalisation' are identified as principal risks in the Company's risk register.

Refer to the *Risk management report* in the 2021 Annual Report.

DATA PRIVACY

The Group fulfils its commitment to protecting the personal data of its stakeholders through an extensive Group-wide data privacy project. The project aligns and ensures compliance with all relevant data protection legislation, as applicable in the various countries of operation, including GDPR, widely regarded as the gold standard for data protection. The Group Privacy and Data Protection Policy ensures alignment to the GDPR. During the year, the Group:

- progressed with identifying personal datasets, data flows and related risk assessments;
- concluded extensive reviews of contracts in which personal information is shared with third-party processors to ensure data privacy and information security concerns are addressed appropriately; and
- focused on developing training material for all stakeholders.

REGIONAL INFORMATION

SWITZERLAND

- GDPR framework compliant
- Compliant with current Swiss data protection laws, including cantonal legislation
- Refined data breach incident management process
- Successfully passed canton of Aargau data protection sensitisation review

SOUTHERN AFRICA

- GDPR framework compliant
- Compliant with Protection of Personal Information Act, No. 4 of 2013, which becomes fully effective
 1 July 2021; the Promotion of Access to Information Act, No. 2 of 2000; and the Electronic Communications and Transactions Act, No. 25 of 2002, in South Africa
- Developed and implemented data breach incident management process

THE UAE

- GDPR framework compliant
- Compliant with UAE Federal Law, No. 2 of 2019, concerning the use of ICT in the areas of health; Abu Dhabi Healthcare Information and Cyber Security Standard; and Dubai Healthcare City Authority's Health Data Protection Regulation
- Developed and implemented data breach incident management process

SOVIDEVELOPMENT

During the year, data protection impact assessments were completed on new projects across the Group, especially those initiated due to the COVID-19 pandemic, implementing corrective actions where necessary.

OTHER JURISDICTIONS

The Group has reviewed all other jurisdictions where there are registered entities to ensure those entities comply with relevant data privacy legislation, as well as the principles of GDPR.

FEATURE

CORPORATE CULTURE MADE REAL

IN SHOWING CONCERN FOR DATA PRIVACY AND MAINTAINING THE HIGHEST ETHICAL STANDARDS, EMPLOYEES LIVE THE COMPANY'S PURPOSE OF ENHANCING THE QUALITY OF LIFE.

The thoughtful care Mediclinic provides to clients in its facilities is something that extends into other spheres too. To ensure the commitments encoded in the Group's policies remain top of mind, Mediclinic ran dedicated campaigns to focus on ethics and data matters in 2020.

Through emailers, banners, intranet pages, screensavers and interactive publications, the Group-wide campaigns empowered employees with tools and practical advice. Storytelling made potentially abstract ideas come alive while eye-catching visuals helped the communication stand out. For better engagement, the content was customised according to geographic preferences for imagery and language.

The eight-week ethics campaign concentrated on promoting the ethics lines which enable around-theclock anonymous disclosure. The information security campaign is ongoing and highlights a different aspect every month, ranging from safe internet use to data storage.





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To ensure the commitments encoded in the Group's policies remain top of mind, Mediclinic ran dedicated campaigns to focus on ethics and data matters in 2020.

INDEPENDENT ASSURANCE

Mediclinic is accountable to its stakeholders to responsibly present information that is relevant, clear, consistent and accurate. To provide the necessary independent assurance over the quality and reliability of the information presented and that of its healthcare services, processes and facilities, the Group follows a combined assurance model with assurance between management, internal audit and external accreditation and certification.

INDEPENDENT ASSURANCE			
Assurance output		Processes assured	Provider/Standard
External calculation of carbon footprint based on carbon emissions data of all three divisions	+	Carbon footprint calculation in accordance with the Greenhouse Gas Protocol ('GHG Protocol ')	Carbon Calculated GHG Protocol
External assurance of carbon emissions of all three divisions	+	Carbon emissions data and calculations	External Energy and Water Consultancy ISO 14064-3
ISO 14001:2015 external certification of 44 of Mediclinic Southern Africa's 50 hospitals		Environmental management system	British Standards Institute, accredited by United Kingdom Accreditation Service (UKAS)
Council for Health Service Accreditation of Southern Africa (' COHSASA ') accreditation ¹ for all of Mediclinic Southern Africa's participating hospitals ² Accreditation assessments are based on detailed hospital standards and are validated by the International Society for Quality Assurance in Healthcare (' ISQua ')		Healthcare facility quality	COHSASA ISQua
B-BBEE verification		Broad-based black economic empowerment	Empowerlogic, accredited by South African National Accreditation System (SANAS)
All three divisions annually measure employee engagement via internationally recognised service provider		Employee engagement	Gallup®
All three divisions use the Press Ganey® platform to continuously measure and report on patient experience	+	Patient experience	Press Ganey®
ISO 9001:2015 certification of all Hirslanden hospitals and Hirslanden Corporate Office	+	Process and quality management	Swiss Association for Quality and Management Systems (SQS)

🚹 = Hirslanden 🛛 🚬 💋 = Mediclinic Southern Africa 📘 = Mediclinic Middle East

INDEPENDENT ASSURANCE		
Assurance output	Processes assured	Provider/Standard
CAP reaccreditation of the laboratory of Mediclinic City Hospital completed in 2019	Pathology laboratory of Mediclinic City Hospital	College of American Pathologists (' CAP ')
Klink Hirslanden accredited since 2017	Haematopoietic stem cell transplantation	Joint Accreditation Committee ISCT-EBMT (JACIE)
JCI accreditation or reaccreditation of all Mediclinic Middle East facilities (hospitals and clinics) completed in 2019	Quality and safety of patient care	JCI
All Mediclinic Middle East laboratories operating within Mediclinic hospital and clinic facilities are ISO 15189:2012 accredited, except the laboratory at Mediclinic Parkview Hospital, which will seek accreditation in May 2021	Pathology laboratories of Mediclinic Middle East hospitals and clinics in Dubai, Abu Dhabi, Al Ain and Western Region	International Organisation for Standardisation (' ISO ')
Diabetes clinical programme at Mediclinic Welcare Hospital JCI accredited in 2020	Diabetes clinical programme at Mediclinic Welcare Hospital	JCI
Accreditation of specialist unit for obesity management at Mediclinic Parkview Hospital in 2020	Obesity management at Mediclinic Parkview Hospital	European Association for the Study of Obesity (EASO), Collaborating Centres for Obesity Management (COMs)
Accreditation of specialist bariatric unit at Mediclinic Airport Road Hospital in 2020	Bariatric unit at Mediclinic Airport Road Hospital	Surgical Review Committee (SRC) Centre of Excellence in Metabolic and Bariatric Surgery (COEMBS)
Quality measurement and improvement on the basis of routine data, public reporting and peer review. Hirslanden has been applying the quality management criteria of the Initiative on Quality Medicine since 2012	Further improvements in medicine through innovative and efficient procedures	Initiative Qualitätsmedizin
Breast cancer centres at five Hirslanden hospitals are certified	Quality and safety of cancer treatment	Swiss Cancer League
Breast Cancer Centre Bern Biel certified in 2020	Quality and safety of cancer treatment	Swiss Cancer League and Society for Senology
Tumour Centre Hirslanden Zurich certified as European Cancer Centre in 2018	Quality and safety of cancer treatment	German Cancer Society
Klinik Hirslanden Stroke Centre	Quality and safety of stroke treatment	Swiss Federation of Clinical Neuro-Societies (SFCNS)
Southern Africa facilities and six	Quality and safety of neonatal care	Vermont Oxford Network

Notes

¹ The accreditation programme was paused during COVID-19 with COHSASA granting an extended grace period for reaccreditation. Reaccreditation has now restarted.

² COHSASA accreditation is limited to the largest hospitals caring for the more complex cases. These hospitals undergo regular reaccreditation surveys on a rotational basis, the findings of which are shared with the hospitals and with the Mediclinic Southern Africa Corporate Office. Learning points emerging from findings are used to inform focus areas for improvement initiatives which also benefit smaller non-participating hospitals. In addition, the smaller facilities adhere to all the required regulatory requirements and industry standards.

GLOSSARY OF TERMS

TERM	MEANING		
B4SA	Business 4 South Africa		
B-BBEE	Broad-based Black Economic Empowerment		
Board or Board of Directors	the board of directors of Mediclinic International plc		
BUSA	Business Unity South Africa		
САР	College of American Pathologists		
CDP	Organisation originally known as Carbon Disclosure Project		
CEO	Chief Executive Officer		
CFO	Chief Financial Officer		
CO ₂ e	carbon dioxide equivalent		
Controllable Employee Turnover	controllable employment terminations for all permanent employees are determined by a subset of 26 criteria, but specially excludes a subset of 20 criteria such as death, disability, dismissal due to operational requirements, family responsibility, poor health and retirement		
Company	Mediclinic International plc		
CSI	corporate social investment		
CSR	corporate social responsibility		
EBX	Environmental Banc & Exchange		
EEA	European Economic Area		
EHR	electronic health record		
EHS	environmental, health and safety		
EnAW	Energy Agency of the Swiss Private Sector		
EPiHC	Ethical Principles in Health Care		
ESG	environmental, social and governance		
Ethics Code	Company's Code of Business Conduct and Ethics		
EU	European Union		
FY21	the 2021 financial year		
GCC	Gulf Cooperation Council		
GDPR	General Data Protection Regulation		
GHG Protocol	Greenhouse Gas Protocol		
GPO	Group purchasing organisation		
GRI Standards	the Global Reporting Initiative Sustainability Reporting Standards issued in 2016 by the Global Sustainability Standards Board, which standards represent global best practice for reporting publicly on a range of economic, environmental and social impacts		
Group	Mediclinic International plc and its subsidiaries, including its divisions in Switzerland Southern Africa and the United Arab Emirates		
Group Executive Committee	the executive committee of Mediclinic International plc		
HASA	Hospital Association of South Africa		
НСТ	Higher Colleges of Technology		
Hirslanden	the Group's operations in Switzerland, trading under the Hirslanden brand, with Hirslanden AG as the intermediary holding company of the Group's operations in Switzerland		
HUG	University Hospitals of Geneva		
ICT	information and communications technology		
TERM	MEANING		
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InfoSec	information- and cybersecurity		
IPC	infection prevention and control		
ISO	International Organisation for Standardisation		
ISQua	International Society for Quality Assurance in Healthcare		
JCI	Joint Commission International, an international quality measurement accreditation organisation, aimed at improving quality of care		
JSE	the stock exchange of South Africa based in Johannesburg		
LSE	London Stock Exchange		
Mediclinic	Mediclinic International plc		
Mediclinic Middle East	the Group's operations in the UAE, trading under the Mediclinic brand, with Mediclinic Middle East Holdings (registered in Jersey) as the intermediate holding company of the Group's operations in Dubai and Abu Dhabi		
Mediclinic Southern Africa	the Group's operations in South Africa and Namibia, trading under the Mediclinic brand, with Mediclinic Southern Africa (Pty) Ltd as the intermediary holding company of the Group's operations in South Africa and Namibia		
MBRU	Mohammed Bin Rashid University of Medicine and Health Sciences in Dubai		
NHI	National Health Insurance		
NSX	the Namibian Stock Exchange based in Windhoek, Namibia		
OSHMS	occupational safety and health management systems		
Period under review/ Reporting period	1 January 2020-31 December 2020		
PHEF	Public Health Enhancement Fund		
PPE	personal protective equipment		
PPP	public-private partnerships		
PV	photovoltaic		
SCADA	supervisory control and data acquisition		
SDGs	the UN Sustainable Development Goals		
TCFD	Task Force on Climate-related Financial Disclosures		
UAE	the United Arab Emirates		
UK	the United Kingdom		
UN	the United Nations		
WHO	World Health Organization		

DATA RESTATEMENT NOTICE

During 2020, the Group centralised the compilation and reporting of its environmental data. The data reported on in this report has been aligned with the respective carbon footprint reports of each division to ensure uniform methodologies and calculations are used for the reporting on key performance indicators. In order to align to the GHG Protocol standard practice, 'total emissions' has been replaced with 'total Scope 1 & 2 emissions'. The GHG Protocol encourages reporting Scope 3 emissions separately due to the significant variance between organisations in respect of operational boundary and the number of categories optionally reported on. This means that certain environmental information previously reported will not align to the data reported here. As a result, Mediclinic encourages the user to refer to the data from this report onwards.

MATERIAL ISSUE 1

MATERIAE 1550		2020	2019	2018	2017
CARBON EMISSION Scope 1 & 2	IS				
Group ¹	Total Scope 1 & 2 CO ₂ e (tonnes) ²	226 048	239 960	214 537	209 525
	Scope 1 : Direct emissions (tonnes)	4 780	5 232	5 566	5 628
	Scope 2 : Indirect emissions from purchased electricity (tonnes)	595³	562	650	578
Hirslanden	Total Scope 1 & 2 CO ₂ e (tonnes)	5 374	5 795	6 216	6 206
	Total Scope 1 & 2 CO ₂ e/bed day (kg)	10.00	10.00	11.00	11.00
Hirslanden	Total Scope 1 & 2 CO ₂ e/ full-time employee	0.72	0.78	0.90	0.87
	Total Scope 1 & 2 CO ₂ e/m ²	0.02	0.02	0.02	0.02
	Scope 1 : Direct emissions (tonnes)	22 083 ⁴	21 047	22 422	24 193
	Scope 2 : Indirect emissions from purchased electricity (tonnes)	151 053⁵	157 370	143 338	149 109
	Total Scope 1 & 2 CO ₂ e (tonnes)	173 136	178 417	165 760	173 302
	Total Scope 1 & 2 CO ₂ e/bed day (kg)	101.00	89.00	83.00	87.00
Total Scope 1 & 2 (Scope 1: Direct em (tonnes) Scope 2: Indirect ef from purchased el (tonnes) Mediclinic Southern Africa Total Scope 1 & 2 (Total Scope 1 & 2 (day (kg) Total Scope 1 & 2 (full-time employee Total Scope 1 & 2 (Total Scope 1 & 2 CO ₂ e/ full-time employee	10.96	11.25	10.43	10.61
	Total Scope 1 & 2 CO ₂ e/m ²	0.19	0.21	0.20	0.21
	Scope 1 : Direct emissions (tonnes)	3 869	2 959	4 191	3 585
	Scope 2 : Indirect emissions from purchased electricity (tonnes)	43 379	52 789	38 371	26 434
Mediclinic Middle East	Total Scope 1 & 2 CO ₂ e (tonnes)	47 248	55 748	42 562	30 018
	Total Scope 1 & 2 CO ₂ e/bed day (kg)	255.37	327.62	247.07	172.47
	Total Scope 1 & 2 CO ₂ e/ full-time employee	6.97	9.76	7.56	5.76
	Total Scope 1 & 2 CO ₂ e/m ²	0.18	0.21	0.17	0.16

		2020	2019	2018	2017
CARBON EMISSION	IS CONTINUED				
Scope 3 indirect en	nissions in tonnes (from su	pply chain, business trav	vel and waste re	emoval)	
Group		54 278	58 978	51 855	52 700
Hirslanden		143	219	1 218	665
Mediclinic Southern A	Africa	39 576	44 589	42 981	47 270
Mediclinic Middle Eas	st	14 559 ⁶	14 170	7 656	4 765
Non-Kyoto protoco	l emissions in tonnes (out	of Scope emissions)			
Group		5 815	3 289	5 761	7 046
Hirslanden		n/a	n/a	n/a	n/a
Mediclinic Southern A	Africa	3 180 ⁷	1 233	2 200	2 841
Mediclinic Middle Eas	st	2 635	2 056	3 561	4 205
DIRECT AND INDIR	ECT ENERGY CONSUMPT	ION			
Energy consumption	on in gigajoule (GJ)				
Current 8	Total GJ	1 188 023	n/a	n/a	n/a
Group ⁸	GJ/bed day	0.49	n/a	n/a	n/a
	Total GJ	260 807	269 320	258 608	265 312
Hirslanden	GJ/bed day	0.46	0.46	0.45	0.46
Mediclinic	Total GJ	652 818	681 667	658 009	635 210
Southern Africa	GJ/bed day	0.38	0.34	0.33	0.32
Mediclinic	Total GJ	271 656	266 989	188 312	142 872
Middle East	GJ/bed day	1.59	1.75	1.28	1.20
Direct energy prod	uced in gigajoule				
Group		3 021	n/a	n/a	n/a
Hirslanden		1 584	n/a	n/a	98
Mediclinic Southern A	Africa	1 437 ⁹	11 240	2 862	1 576
Mediclinic Middle Eas	st	0	0	0	0

Notes

¹ Total Scope 1 & 2 emissions include those of Mediclinic Group Services and Medical Innovations, but these entities have been removed from the Mediclinic Southern Africa boundary from the 2021 CDP Report and will be reported under Mediclinic International going forward.

² Previous reports referred to 'Total emissions', which has now been updated to 'Total Scope 1 & 2 emissions' to align with GHG Protocol. Historic figures have been updated accordingly. All intensity figures are calculated in terms of total Scope 1 & 2 emissions. All historic figures have been updated to align with the respective Carbon Footprint Reports of each division to ensure standardised calculations of emissions.

³ Emissions from purchased electricity in Switzerland increased mainly as a result of Salem-Spital switching from natural gas to district heating.

⁴ Increase in Scope 1 emissions mainly due to increased diesel consumption as a result of load shedding, as well as the impact of updated emission factors on the emissions from anaesthetic gases.

⁵ Renewable energy generated onsite has been reclassified to Scope 2 purchased renewable electricity for nine of Mediclinic's 12 facilities where PV systems are installed. The PV systems installed at these facilities are owned by Kigeni, which sells the electricity to Mediclinic, thus even though it is generated onsite, it should be categorised as purchased renewable electricity.

⁶ Increase in Scope 3 emissions mainly due to the increase of the Defra emission factor, more than three-fold, for commercial and industrial waste. Third-party emissions from waste collections increased almost 10-fold in 2020, likely due in part to increased waste disposal and more frequent collections during the pandemic. An additional service provider was also reported for the first time in 2020.

⁷ Emissions increased primarily due to a large quantity of R22 purchased for future use.

⁸ Energy consumption includes Mediclinic Group Services and Medical Innovations, but these entities have been removed from the Mediclinic Southern Africa boundary from the 2021 CDP Report and will be reported under Mediclinic International going forward.

⁹ Renewable energy generated onsite has been reclassified to Scope 2 purchased renewable electricity for nine of Mediclinic's 12 facilities where PV systems are installed. This was reported under renewable energy produced in the previous year. The PV systems installed at these facilities are owned by Kigeni, which sells the electricity to Mediclinic, thus even though it is generated onsite, it is categorised as purchased renewable electricity (indirect energy consumed).

		2020	2019	2018	2017
DIRECT AND INDIR	ECT ENERGY CONSUMPTI	ON CONTINUED			
Direct energy purch	nased in gigajoule				
Group		224 524	249 033	254 428	n/a
Hirslanden		86 932	105 670	108 957	108 859
Mediclinic Southern A	Africa	103 132	125 684	111 972	98 634
Mediclinic Middle Eas	it	34 398	17 679	33 499	n/a
Indirect energy con	sumed in gigajoule	· · ·	·	· · ·	
Group		960 478	957 702	847 638	n/a
Hirslanden		172 290 ¹	163 650	149 650	156 453
Mediclinic Southern A	Africa	548 249 ²	544 742	543 175	534 999
Mediclinic Middle Eas	st	237 258	249 310	154 813	n/a
WATER USAGE					
Total water usage fi	rom utilities in kilolitres (kL	.)			
<u>_</u>	kL	1 647 749	1 705 085	1 726 734	1 768 366
Group	kL/bed day	0.67 ³	0.49	0.50	0.65
Hirslanden	kL	366 648	367 898	377 255	375 429
Hirslanden	kL/bed day	0.65	0.63	0.65	0.65
Mediclinic	kL	1 029 058	1 093 002	1 107 916	1 185 271
Southern Africa	kL/bed day	0.60	0.55	0.56	0.60
Mediclinic	kL	252 042	244 185	241 563	207 666
Middle East	kL/bed day ⁴	1.35	1.52	1.56	1.35
WASTE					
Total waste in tonne	es				
Group		14 276	n/a	n/a	n/a
Hirslanden		1 371	n/a	n/a	n/a
Mediclinic Southern A	Africa	7 892	n/a	n/a	n/a
Mediclinic Middle Eas	it ⁵	5 006	n/a	n/a	n/a
Total waste recycled	d in tonnes		I	ł	
Group		1 914 ⁶	1 892	1 707	1 996
Hirslanden		595	417	284	586
Mediclinic Southern A	Africa	1 070	1 224	1 229	1 202
Mediclinic Middle Eas	it	249	251	194	209
Total waste recycled	d (%)		ł	i	
Group		13.4%	n/a	n/a	n/a
Hirslanden		43.4%	n/a	n/a	n/a
Mediclinic Southern A	Africa	13.6%	n/a	n/a	n/a
Mediclinic Middle Eas	it	5.0%	n/a	n/a	n/a
Organic waste proc	essed/reutilised in tonnes				
Group		714	592	191	n/a
Hirslanden		424	430	119	111
Mediclinic Southern A	Africa	290	162	72	n/a
Mediclinic Middle Eas	+	n/a	n/a	n/a	n/a

	2020	2019	2018	2017		
GENERAL WASTE CONTINUED						
Total waste diverted from landfill in tonnes						
Group	2 629	2 484	1 898	2 107		
Hirslanden	1 019	847	403	697		
Mediclinic Southern Africa	1 360	1 386	1 301	1 202		
Mediclinic Middle East	249	251	194	209		
Total waste to landfill in tonnes						
Group ⁷	6 882	n/a	n/a	n/a		
Hirslanden ⁸	n/a	n/a	n/a	n/a		
Mediclinic Southern Africa	3 094	2 964	3 068	3 315		
Mediclinic Middle East	3 781	n/a	n/a	n/a		
Healthcare risk waste in tonnes						
Group	4 766	4 222	n/a	n/a		
Hirslanden	352	353	n/a	n/a		
Mediclinic Southern Africa	3 438°	3 120	3 068	3 021		
Mediclinic Middle East	976°	750	n/a	n/a		

MATERIAL ISSUE 2

		2020	2019	2018	2017
EMPLOYEE RETEN	τιον				
New appointments	vs terminations based on perman	ent employee tu	irnover		
Crown	Appointments	3 326	4 489	5 004	3 688
Group	Terminations	3 723	4 261	3 604	3 354
Cwitzerland	Appointments	1 675	1 653	1 767	1254
Switzerland	Terminations	1 450	1 733	1 670	1 479
	Appointments	834	1 971	2 073	1 909
Southern Africa	Terminations	1 694	1 736	1 143	1 278
The UAE	Appointments	817	865	1 164	525
THE UAE	Terminations	579	792	791	597
Controllable emplo	yee turnover rate by geography				
Group		5.9%	8.1%	-	-
Switzerland		7.8%	10.0%	6.9%	8.7%
Southern Africa		5.6%	7.6%	7.6%	7.7%
The UAE		4.3%	7.2%	6.7%	10.3%

Notes

¹ Salem-Spital switched from natural gas to district heating, resulting in an increase in their indirect energy consumed.

² Renewable energy generated onsite has been reclassified to Scope 2 purchased renewable electricity for nine of Mediclinic's 12 facilities where PV systems are installed. This was reported under renewable energy produced in the previous year. The PV systems installed at these facilities are owned by Kigeni, which sells the electricity to Mediclinic, thus even though it is generated onsite, it is categorised as purchased renewable electricity (indirect energy consumed).

³ Water consumption per bed day sold increased due to an overall decline in bed days sold as a result of the COVID-19 pandemic.

⁴ Bed days for Mediclinic Middle East includes only hospitals and two day clinics (Deira and Dubai Mall) and thus the kL/bed day sold has been calculated by subtracting 8% of total kL (contribution of clinics without bed days).

⁵ At Mediclinic Middle East food waste is not processed or reused, healthcare risk waste is disposed of after treatment and hazardous chemical waste is shipped to Germany for incineration.

⁶ Recycling decreased overall as a result of the COVID-19 pandemic; recycling initiatives in certain areas were paused by the service providers.

⁷ Waste to landfill includes Mediclinic Group Services and Medical Innovations.

⁸ No waste to landfill as all waste is incinerated.

⁹ Increase in healthcare risk waste due to increased waste generated during the COVID-19 pandemic as well as the disposal of PPE.

DATA CONTINUED

		2020	2019	2018	2017
EMPLOYEE RETENT					
Controllable employ	yee turnover rate by gender				
Group	Male	7.2%	-	-	-
Group	Female	5.5%	-	-	-
Switzerland	Male	8.1%	10.2%	7.4%	9.2%
Switzenand	Female	7.7%	10.0%	6.7%	8.6%
Southorn Africa	Male	8.4%	10.6%	10.3%	10.2%
Southern Africa	Female	4.9%	6.9%	7.1%	7.1%
The UAE	Male	5.3%	6.5%	7.2%	8.5%
THE UAE	Female	3.7%	7.8%	6.3%	11.7%
Controllable employ	yee turnover rate by age				
	< 30 years	9.2%	-	-	
Group	30-50 years	5.8%	-	-	
	> 50 years	3.6%	-	-	
	< 30 years	12.1%	15.6%	10.0%	12.3%
Switzerland	30-50 years	7.3%	9.0%	6.1%	8.4%
	> 50 years	5.7%	8.3%	6.5%	6.7%
	< 30 years	8.1%	9.2%	9.7%	13.2%
Southern Africa	30-50 years	6.0%	8.0%	7.9%	6.9%
	> 50 years	1.9%	5.1%	5.6%	5.9%
	< 30 years	3.7%	11.1%	7.8%	11.9%
The UAE	30-50 years	4.5%	7.1%	6.6%	10.2%
	> 50 years	3.5%	4.6%	6.6%	8.7%
Return rate after ma	aternity leave ¹				
Group	Employees on maternity leave	1 327	1 356	1 187	1 276
	Employees on maternity leave	349	343	342	372
Switzerland ²	Employees returned to work	318	n/a	n/a	n/a
	Retention rate	91.1%	n/a	n/a	n/a
	Employees on maternity leave	744	748	613	706
Southern Africa	Employees returned to work	744	719	593	67
	Retention rate	100%	96%	97%	95%
	Employees on maternity leave	234	265	232	198
The UAE	Employees returned to work	233	250	229	189
	Retention rate	99.6%	94%	99%	96%
EMPLOYEE ENGAG	EMENT		· · · · ·		
Your Voice employe	e engagement survey participation r	ate			
Group		77%	83%	82%	77%
Hirslanden		65%	71%	78%	79%
Mediclinic Southern A	Africa	78%	87%	80%	73%
Mediclinic Middle Eas		94%	94%	92%	88%
Mediclinic Group Serv		97%	94%		

		2020	2019	2018	2017
EMPLOYEE ENGAGEMENT	CONTINUED				
Your Voice employee engage	gement index				
	Engaged ⁴	45%	46%	45%	40%
Group	Not engaged⁵	45%	44%	45%	48%
	Actively disengaged ⁶	10%	10%	10%	12%
	Engaged ⁴	44%	46%	45%	40%
Hirslanden	Not engaged⁵	48%	46%	47%	51%
	Actively disengaged ⁶	8%	8%	8%	9%
	Engaged ⁴	43%	46%	44%	40%
Mediclinic Southern Africa	Not engaged⁵	45%	44%	45%	46%
	Actively disengaged ⁶	12%	10%	11%	14%
Mediclinic Middle East	Engaged ⁴	51%	45%	47%	39%
	Not engaged⁵	40%	45%	43%	48%
	Actively disengaged ⁶	9%	10%	10%	13%
	Engaged ⁴	54%	56%	-	-
Mediclinic Group Services ³	Not engaged⁵	41%	38%	-	-
	Actively disengaged ⁶	5%	6%	-	-
Your Voice employee engag	gement grand mean score	e (out of five)			
Group		3.98	3.99	3.98	3.88
Hirslanden		3.99	4.00	4.01	3.93
Mediclinic Southern Africa		3.93	3.97	3.94	3.85
Mediclinic Middle East		4.09	4.00	4.02	3.86
Mediclinic Group Services ³		4.20	4.21	-	-
DIVERSITY AND INCLUSIO	ON .		, i i i i i i i i i i i i i i i i i i i		
Permanent employees by a	ige				
	< 30 years	14.6%	16.2%	18.3%	19.3%
Group	30-50 years	65.8%	65.1%	62.7%	61.8%
	> 50 years	19.6%	18.7%	19.0%	18.9%
	< 30 years	19.7%	19.1%	26.4%	26.5%
Hirslanden	30-50 years	53.9%	55.1%	50.2%	50.2%
	> 50 years	26.4%	25.8%	23.3%	23.3%
	< 30 years	13.9%	16.6%	15.1%	16.7%
Mediclinic Southern Africa	30-50 years	67.0%	65.5%	65.9%	64.5%
	> 50 years	19.1%	17.9%	19.0%	18.7%
Mediclinic Middle East	< 30 years	9.3%	11.3%	12.9%	14.7%
	30-50 years	79.9%	78.4%	75.9%	73.6%
	> 50 years	10.8%	10.3%	11.2%	11.7%
	< 30 years	8.4%	-	-	-
Martializia Cara Carata 3		68.5%	_	_	
Mediclinic Group Services ³	30-50 years	00.370		1	

Notes

¹ Data supplied for permanent employees.

² Pre-2020, approximately 34% of Hirslanden employees were not captured on the central human resources system; as such, some data is not available or non-comparable with prior periods.

³ Some data not available as reporting on Mediclinic Group Services commenced only in 2019.

⁴ Engaged employees are loyal and psychologically committed to the organisation. Compared with other employees, they are more productive and more likely to stay with the organisation, and they consistently have their performance-related workplace needs met.

⁵ Not engaged employees may be productive, but they are not psychologically committed. They have some of their performance-related workplace needs met, but many remain unmet.

⁶ Actively disengaged employees are physically present, but psychologically absent. They are unhappy with their work situation, and most of their performance-related needs are not met.

DATA CONTINUED

		2020	2019	2018	2017
DIVERSITY AND INCLUSION	CONTINUED				
Permanent employees by ger	neration ¹				
	Traditionalists	0.01%	0.02%	-	-
	Baby Boomers	10.2%	11.2%	-	-
Group	Generation X	34.5%	34.9%	-	-
	Generation Z	2.0%	1.3%	-	-
	Millennials	53.3%	52.6%	-	-
	Traditionalists	0.02%	O.1%	-	-
	Baby Boomers	14.3%	11.2%	-	-
Hirslanden	Generation X	35.3%	34.9%	-	-
	Generation Z	5.4%	1.3%	-	-
	Millennials	45.0%	52.6%	-	-
	Traditionalists	-	-	-	-
	Baby Boomers	9.9%	10.5%	-	-
Mediclinic Southern Africa	Generation X	35.4%	35.6%	-	-
	Generation Z	0.6%	0.4%	-	-
	Millennials	54.1%	53.4%	-	-
	Traditionalists	0.02%	-	-	-
	Baby Boomers	5.2%	5.9%	-	-
Mediclinic Middle East	Generation X	30.7%	31.8%	-	-
	Generation Z	0.3%	0.3%	-	-
	Millennials	63.8%	62.0%	_	-
	Traditionalists	-	-	_	_
	Baby Boomers	8.4%	-	_	
Mediclinic Group Services	Generation X	53.8%	-		_
·	Generation Z	-	-		_
	Millennials	37.8%	-		_
Permanent employees by ger	nder				
	Male	25.5%	25.2%	25.5%	27.4%
Group	Female	74.5%	74.8%	74.5%	72.6%
	Male	23.7%	23.5%	25.5%	23.4%
Hirslanden	Female	76.3%	76.5%	76.7%	72.6%
	Male	19.2%	19.1%	20.3%	20.0%
Mediclinic Southern Africa	Female	80.8%	80.9%	79.7%	80.0%
	Male	41.7%	42.1%	42.7%	43.6%
Mediclinic Middle East	Female	58.3%	57.9%	57.3%	56.4%
	Male	40.6%			-
Mediclinic Group Services ²	Female	59.4%			

	2020	2019	2018	2017
WELLNESS AND SAFETY				
Total work-related injuries				
Group	5 752	1 482	555	1 571
Switzerland	914	564	555	634
Southern Africa	4 293	915	n/a	919
The UAE	545	3	0	18
Absenteeism due to injuries in busin	ess days (including day of injury) ³		
Group	54 536	16 180	-	-
Switzerland	13 385	10 676	n/a	n/a
Southern Africa	35 947	5 473	4 570	n/a
The UAE	5 204	31	0	14
Occupational diseases				
Group	18	24	-	-
Switzerland	0	0	0	0
Southern Africa	18	24	n/a	n/a
The UAE	0	0	0	0
Work-related fatalities ⁴				
Group	0	0	-	1
Switzerland	0	0	0	0
Southern Africa	0	0	n/a	1
The UAE	0	0	0	0
Total absenteeism due to injuries an	d sickness in hours⁵			
Group	2 423 243	775 136	908 820	750 236
Switzerland	740 482	629 236	744 374	580 175
Southern Africa	1 499 645	129 704	148 163	154 970
The UAE	183 116	16 196	16 283	15 091
Total absenteeism rate ⁶				
Group	3.9%	-	-	
Switzerland	5.3%	4.4%	4.3%	3.9%
Southern Africa	4.7%	2.5%	2.9%	2.9%
The UAE	1.2%	0.8%	0.7%	1.0%

MATERIAL ISSUE 3

	2020	2019	2018	2017
CALLS TO ETHICS LINES ⁷				
Group	148	154	131	n/a
Switzerland	16	27	28	n/a
Southern Africa	115	118	83	n/a
The UAE	17	9	20	n/a

Notes

¹ Some data not available as reporting on generation commenced only in 2019.

² Some data not available as reporting on Mediclinic Group Services commenced only in 2019.

³ Data includes injury-on-duty and COVID-19-related infection while on duty.

⁴ Excludes COVID-19-related fatalities.

⁵ Data includes injury-on-duty, COVID-19-related leave and sick leave.

⁶ Actual days lost expressed as a percentage of total days scheduled to be worked by the workforce during the reporting period.
⁷ Calls to the ethics lines for 2017 are not disclosed as the metrics used by the divisions to capture calls were not standardised.

DATA CONTINUED

	2021	2020	2019	2018
INVESTMENT IN CAPITAL PROJECTS AND NE				
Group (£'m)	72	108	148	137
Hirslanden (CHF'm)	43	51	55	47
Mediclinic Southern Africa (ZAR'm)	400	582	506	423
Mediclinic Middle East (AED'm)	88	174	376	358
INVESTMENT IN EQUIPMENT REPLACEMENT	AND PROPERY UPGR	ADES ¹		
Group (£'m)	54	84	83	108
Hirslanden (CHF'm)	38	43	40	82
Mediclinic Southern Africa (ZAR'm)	302	730	506	634
Mediclinic Middle East (AED'm)	36	46	76	31
EXPENDITURE ON REPAIR AND MAINTENAN	CE ¹			
Group (£'m)	61	68	53	52
Hirslanden (CHF'm)	50	48	41	40
Mediclinic Southern Africa (ZAR'm)	257	286	262	219
Mediclinic Middle East (AED'm)	37	35²	33	42

Notes

¹ As these figures are audited annually by the external auditor PricewaterhouseCoopers as part of the Annual Report, the amounts disclosed are

on a financial year basis. ² The FY20 expenditure on repair and maintenance has been re-presented to be consistent with the expense-by-nature income statement presentation.

COMPANY INFORMATION

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Email: mediclinic@tip-offs.com

LISTING

FTSE sector: Health Care – Health Care Providers – Health Care Facilities ISIN code: GB00B8HX8Z88 SEDOL number: B8HX8Z8 EPIC number: MDC LEI: 2138002S5BSBIZTD5I60 Primary listing: LSE (share code: MDC) Secondary listing: JSE (share code: MEI) Secondary listing: NSX (share code: MEP)

DIRECTORS

Inga Beale DBE (*ind ne*) (*Chair*) (*British*), Dr Ronnie van der Merwe (*Group Chief Executive Officer*) (*South African*), Jurgens Myburgh (*Group Chief Financial Officer*) (*South African*), Alan Grieve (*Senior Independent Director*) (*British and Swiss*), Dr Muhadditha Al Hashimi (*ind ne*) (*Emirati*), Jannie Durand (*ne*) (*South African*), Dr Felicity Harvey CBE (*ind ne*) (*British*), Danie Meintjes (*ne*) (*South African*), Dr Anja Oswald (*ind ne*) (*Swiss*), Trevor Petersen (*ind ne*) (*South African*), Tom Singer (*ind ne*) (*British*), Steve Weiner (*ind ne*) (*American*), Pieter Uys (*alternate to Jannie Durand*) (*South African*)

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