

Shalby/SE/2026-27/45

August 17, 2026

The Listing Department
National Stock Exchange of India Ltd
Mumbai 400 051.

Scrip Code : SHALBY

Through : <https://neaps.nseindia.com/NEWLISTINGCORP/>

Corporate Service Department
BSE Limited
Mumbai 400 001.

Scrip Code: 540797

Through : <http://listing.bseindia.com>

Sub.: Business Responsibility & Sustainability Report (BRSR) for FY 2025-26

Dear Sir/Madam,

Pursuant to Regulation 34(2)(f) of the SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 ("LODR Regulations"), we are submitting herewith Business Responsibility & Sustainability Report (BRSR) for Financial Year 2025-26, which is an integral part of Annual Report for FY 2025-26.

The Business Responsibility & Sustainability Report has also been uploaded on the website of the Company and the same can be accessible as per link provided below:

Link for BRSR: <https://www.shalby.org/wp-content/uploads/2026/08/BRSR-Report-2025-26.pdf>

You are requested to take the same on your record.

Thanking You,

Yours sincerely,
For **Shalby Limited**

Tushar Shah
Vice President & Company Secretary
Mem. No: F7216

Encl: as above

SHALBY LIMITED

Regd. Office: Opp. Karnavati Club, S. G. Road, Ahmedabad - 380 015, Gujarat, India.

Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org

CIN: L85110GJ2004PLC044667

BUSINESS RESPONSIBILITY AND SUSTAINABILITY REPORT

Section A: General Disclosure

Details of the listed entity

1. **Corporate Identity Number (CIN):** L85110GJ2004PLC044667
2. **Name of the Listed Entity:** Shalby Limited
3. **Year of Incorporation:** 2004
4. **Registered Office Address:** Shalby Hospitals, Opp. Karnavati Club, S. G. Road, Ahmedabad 380051, Gujarat, India
5. **Corporate Office Address:** B-301, B-302, B-310 & B-311, Mondeal Heights, Opp. Karnavati Club, SG Highway, Ahmedabad- 380015
6. **E-mail:** companysecretary@shalby.in
7. **Telephone:** (079) 40203000
8. **Website:** <https://www.shalby.org/>
9. **Financial year for which reporting is being done** April 1, 2025 to March 31, 2026
10. **Paid-up Capital:** ₹1,080,097,700
11. **Name of the Stock Exchange(s) where shares are listed:** Equity shares are listed on BSE Limited (BSE) and National Stock Exchange of India Limited (NSE)
12. **Name and contact details (telephone, email address) of the person who may be contacted in case of any queries on the BRSR report:**
 - Dr. Vikram Shah, Chairman & Managing Director (DIN: 00011653) and Dr. Nishita Shukla, Group COO
 - Contact number - +91 79402 03000
 - E-mail ID: cmd@shalby.org; drnishita.shukla@shalby.org.
13. **Reporting boundary:** Disclosures under this Report are made on a Standalone basis, covering operations of Shalby Limited.
14. **Name of Assurance Provider:** NA
15. **Type of Assurance Obtained:** NA

Products / services

16. **Details of business activities (accounting for 90% of the turnover):**

Description of main activity	Description of business activity	% of turnover
Hospital and Medical Care	Hospital Activities	100

17. Products / Services sold by the entity (accounting for 90% of the entity's turnover):

Sr.	Product / Service	NIC Code	% of total turnover contributed
1	Hospital Services	86100	100%

Operations**18. Number of locations where plants and / or operations / offices of the entity are situated:**

Locations	Number of plants	Number of offices / Units (incl. OPD centres)	Total
National	NA	75	75
International	NA	23	23

**The Company has OPD on Sudan, Addis Ababa, Rwanda, Nairobi, Dares Salaam, Dubai, Oman, Nepal, Iraq, Ethiopia, etc.

19. Markets served by the entity:**a) Number of locations:**

Locations	Number
National (no. of states)	10
International (no. of countries)	13

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

The contribution of exports as a percentage of the total turnover of the entity is 1.31%

c) A brief on types of customers:

The Company's customer base includes insured and non-insured patients across domestic and international locations, patients covered under various government sponsored schemes (CGHS/ ECHS/ other central & state govt. health schemes) for domestic geographies and patients covered under social security options, sponsored under institution/organisation cover for health coverage for international geographies. Further, our customer base also includes patients requiring specialized home-care services through our Home care division.

Employees**20. Details as at the end of financial year:****a) Employees and workers (including differently abled):**

Particulars	No.	% of total
Employees		
Permanent	2217	100.00%
Male	1231	55.53%
Female	986	44.47%
Other than Permanent	621	100.00%

Male	340	54.75%
Female	281	45.25%
Total Employees	2838	100.00%
Male	1571	55.36%
Female	1267	44.64%

WORKERS: The Company does not have any workers as defined in the BRSR Guidance Note.

- b) **Differently abled employees and workers:** During the Financial Year 2025-26, the Company did not have any differently abled employees or workers as defined in the BRSR Guidance Note. However, the Company affirms its commitment to equal employment opportunity and remains open to on-boarding differently abled individuals across appropriate roles.

21. Participation / Inclusion / Representation of women:

	No.	% of total
Board of Directors	7	100.00%
Female	1	14.29%
Key Management Personnel	3	100.00%
Female	0	0.00%

22. Turnover rate for permanent employees and workers:

	Turnover rate in FY 2025-2026	Turnover rate in FY 2024-2025	Turnover rate in FY 2023-2024
Permanent employees	35.99%	35.45%	34.90%
Male	19.12%	15.11%	17.70%
Female	16.87%	20.34%	17.20%
Permanent workers	Not applicable. The Company does not have any workers as defined in the BRSR Guidance Note		
Male			
Female			

Holding, Subsidiary and Associate Companies (including Joint Ventures)

23. Names of holding / subsidiary / associate companies / joint ventures:

	Name of the holding / subsidiary / associate companies / joint ventures (A)	Indicate whether holding / subsidiary / associate / joint venture	% of shares held by listed entity	Does the entity indicated at column A, participate in the Business Responsibility initiatives of the listed entity? (Yes/ No)
1	Shalby Medtech Limited (earlier known as Mars Medical Devices Limited)	Subsidiary	100.00%	No
2	Slaney Healthcare Private Limited	Subsidiary	100.00%	No

3	Shalby Hospitals Mumbai Private Limited	Subsidiary	100.00%	No
4	Yogeshwar Healthcare Limited	Subsidiary	94.68%	No
5	Vrundavan Shalby Hospitals Limited	Subsidiary	100.00%	No
6	Shalby International Limited	Subsidiary	100.00%	No
7	Shalby (Kenya) Limited	Subsidiary	100.00%	No
8	Griffin Mediquip LLP	Subsidiary	95.00%	No
9	PK Healthcare Private Limited	Subsidiary	91.13%	No
10	Healers Hospital Private Limited	Subsidiary	100.00%	No
11	Shalby Advanced Technologies Inc.* (SAT Inc.)	Step down Subsidiary	100.00%	No
12	Shalby Global Technologies Pte Ltd* (SGT)	Step down Subsidiary	99.33%	No
13	Shalby Advanced Technologies India Private Limited (SAT India)^	Subsidiary of Step-down Subsidiary	100.00%	No
14	Ningen Lifecare Private Limited#	Step-down subsidiary	91.13%	No

* Shalby Medtech Limited holds 100% equity shares in SAT Inc. and 99.33% equity shares in SGT.

^ Shalby Medtech Limited acquired 100% equity shares of SAT India from SAT Inc. on November 13, 2025.

PK Healthcare Pvt. Limited holds 100% equity shares in Ningen Lifecare Private Limited. Ningen Lifecare Private Limited has been struck off by the Registrar of Companies on May 12, 2026, pursuant to voluntary application for strike off being filed by the Ningen Lifecare Private Limited under Section 248(2) of the Companies Act, 2013.

CSR Details

24. CSR Activities

- I. Whether CSR is applicable as per section 135 of Companies Act, 2013: Yes
- II. Turnover (FY 2025-26): ₹ 8,985.57 million
- III. Net worth (as on March 31, 2026): ₹ 12,469.39 million
- IV. Total amount spent on CSR for FY 2025-26: ₹ 32.18 million

Transparency and Disclosures Compliances

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

Stakeholder group from whom complaint is received	Grievance redressal mechanism in place	FY 2025-26			FY 2024-25		
	If Yes, then provide web-link for grievance redress policy	Number of complaints filed	Number of complaints pending resolution at the end of the year	Remarks	Number of complaints filed	Number of complaints pending resolution at the end of the year	Remarks
Communities	Yes https://www.shalby.org/contact-us/	0	0		0	0	
Investors (other than shareholders)	Yes https://www.shalby.org/investors/	0	0	Investors can contact us via email id as mentioned on our website.	0	0	Investors can contact us via email id as mentioned on our website.
Shareholders	Yes https://www.shalby.org/investors/	0	0		2	0	All complaints as of March 31, 2026 were resolved
Employees and workers	Yes https://myshalby.peoplestrong.com/	47	01	Employees can register their complaints on internal portal, which is not available to general public.	19	0	Employees can register their complaints on internal portal, which is not available to general public.
Customers	Yes info@shalby.org	-	-	Post service feedbacks are taken from customers	-	-	Post service feedbacks are taken from customers
Value Chain Partners	NA						
Others	-	-	-	-	-	-	-

We have grievance mechanism in place for all stakeholders and all the grievances are resolved promptly by the concerned person.

26. Overview of the entity's material responsible business conduct issues: Please indicate material responsible business conduct and sustainability issues pertaining to environmental and social matters that present a risk or an opportunity to your business, rationale for identifying the same, approach to adapt or mitigate the risk along-with its financial implications:

S No.	Material Issue Identified*	Classification (R / O)	Rationale for Identifying the Risk / Opportunity*	Approach to Adapt or Mitigate / Enhance	Financial Implications (Positive / Negative)
1.	Clinical quality, patient safety and satisfaction	Opportunity	Delivering high-quality clinical care ensures that patients receive timely, effective and compassionate treatment across complex specialties such as orthopaedics, oncology, cardiac sciences, neurology, nephrology and transplants. A strong safety culture limits the likelihood of adverse events and reinforces trust in medical teams, while a consistent focus on patient experience promotes positive interactions and enduring relationships with patients and their families.	N.A.	Positive
2.	Patient data protection, DPDPA readiness and hospital IT security	Risk	Increasing reliance on electronic health records, hospital information systems and digital tools for clinical and administrative processes heightens exposure to data-protection and cyber-security risks. Sensitive personal and health information must be safeguarded in line with the Digital Personal Data Protection Act, 2023 and rules made thereunder, any gaps in controls can result in regulatory penalties, operational disruption and reputational impact.	The Company has implemented an enterprise-wide data-protection framework covering consent, privacy notices, data subject rights, access management and breach response; strengthening IT governance, identity and access controls; and conducting regular awareness sessions on responsible data handling and incident reporting.	Negative

3.	Employee recruitment, retention & development	Risk	Delivery of safe, high-quality care is heavily dependent on the availability and continuity of skilled clinicians, nurses, technicians and support staff across units. Difficulty in attracting suitable talent, limited opportunities for structured development or high turnover in key roles can lead to staffing gaps, increased reliance on temporary arrangements, pressure on existing teams and potential impact on service quality and patient experience. In competitive healthcare markets, weak recruitment and retention practices may also affect the ability to scale services and sustain centres of excellence	Strengthening recruitment processes to target appropriate skills and experience for each role; expanding induction, training and continuous learning through internal academies and structured programmes; and building clear career paths and succession plans for critical positions. Enhancing engagement, performance-management and recognition frameworks, alongside regular feedback mechanisms, helps address concerns early and supports retention of high-performing staff, reducing the operational and financial impact of attrition.	Negative
4.	Capability building, leadership development and labour-law transition	Opportunity	Complex, technology-enabled hospital operations require continuous capability building and leadership depth at clinical, operational and functional levels. Evolving labour-law and social-security requirements call for proactive updates to policies, payroll and benefits. Well-structured capability and compliance programmes can strengthen organisational resilience and attractiveness in the healthcare labour market.	N.A.	Positive
5.	Community access, affordability and inclusive healthcare	Opportunity	Multi-city healthcare presence provides an opportunity to improve access to quality healthcare for diverse communities, including low-income patients and those in under-served regions. Balancing affordability with clinical quality and financial sustainability is central to long-term relationships with patients, regulators and investors.	N.A.	Positive

6.	Biomedical and pharmaceutical waste management and environmental compliance	Risk	Hospital activities generate biomedical and pharmaceutical waste that must be segregated, stored, transported and disposed of in accordance with environmental and public-health norms. Inadequate segregation, capacity planning or documentation increases the risk of non-compliance, higher disposal costs and adverse environmental footprint, and may trigger regulatory and community scrutiny.	Ensuring appropriate licences and contracted capacities across units; improving waste segregation, storage and labelling practices; strengthening engagement with authorised collection and disposal partners; introducing digital tracking and maker-checker controls for reporting; conducting quarterly internal audits; and conducting periodic training and internal reviews focused on waste-management practices.	Negative
7.	Energy consumption & management	Risk	Hospitals are energy-intensive facilities, relying on continuous electricity and fuel supply for clinical equipment, lighting, HVAC, sterilisation and other critical services. High and inefficient energy consumption increases exposure to utility-price volatility and can drive up operating costs, particularly in periods of grid stress or tariff changes. Inadequate energy-management practices may also lead to higher greenhouse gas emissions and be viewed negatively by regulators, lenders and stakeholders who focus on environmental performance.	Monitoring of total consumption, identifying high-usage areas and rolling out energy-efficiency measures in building systems, equipment and processes. Exploring and, where feasible, adopting cleaner and more resilient energy options, strengthening maintenance of critical power infrastructure (including backup systems) and incorporating energy considerations into capex planning.	Negative

8.	Resilience to Climate Change	Risk	Ongoing changes in climate patterns, including more frequent and severe heatwaves, heavy rainfall, flooding and resource stress, can drive up operating costs, disrupt supply chains and affect reliability of key inputs such as power and water. Inadequate response to these developments may also be viewed negatively by environmentally conscious investors, lenders, regulators and communities, potentially constraining access to capital and partnerships. A structured approach to climate change is therefore essential to manage both physical and transition-related risks	Measures include progressively reducing the overall carbon footprint through energy-efficiency initiatives and responsible use of resources; evaluating cleaner and more resilient energy options; and integrating climate considerations into capex, maintenance and business-continuity planning. Environmental responsibility is promoted through awareness programmes for employees and engagement with key stakeholders. Greenhouse gas (GHG) emissions are monitored and disclosed, along with specific actions taken to lower them over time, to provide transparency and demonstrate long-term commitment to climate resilience and environmental stewardship.	Negative
9.	ESG Disclosures and Risk Management	Risk	Weak environmental, social and governance (ESG) practices can increase exposure to resource constraints, community and employee dissatisfaction, a gradual erosion of customer trust, instances of regulatory non-compliance, operational inefficiencies and adverse public perception. In a sector where expectations around sustainability and ethical conduct are rising, the absence of robust ESG risk management can have a direct bearing on long-term licence to operate and stakeholder confidence.	Adopting a proactive ESG risk-management framework helps to limit financial impacts linked to environmental incidents, social grievances and governance lapses. This includes identifying and monitoring key ESG risks, integrating them into decision-making processes, strengthening compliance and reporting mechanisms, and engaging regularly with internal and external stakeholders on sustainability priorities. Consistent progress on ESG initiatives enhances overall reputation and alignment with stakeholders who place a premium on responsible, ethical and sustainable business behaviour	Negative

* The material issues identified and the accompanying rationale have been determined with reference to the Sustainability Disclosure Topics under the SASB Standards for the health care delivery industry, and reflect both sector-relevant themes and organization-specific risks and opportunities for the financial year 2025-26.

BRSR Section B: Management and Process Disclosures

This section is aimed at helping businesses demonstrate the structures, policies and processes put in place towards adopting the NGRBC Principles and Core Elements.

Principle 1 (P1)	Businesses should conduct and govern themselves with Ethics, Transparency and Accountability.
Principle 2 (P2)	Businesses should provide goods and services that are safe and contribute to sustainability throughout their life cycle.
Principle 3 (P3)	Businesses should promote the well-being of all employees.
Principle 4 (P4)	Businesses should respect the interests of, and be responsive towards all stakeholders, especially those who are disadvantaged, vulnerable and marginalised.
Principle 5 (P5)	Businesses should respect and promote human rights.
Principle 6 (P6)	Businesses should respect, protect and make efforts to restore the environment.
Principle 7 (P7)	Businesses when engaged in influencing public and regulatory policy, should do so in a responsible manner.
Principle 8 (P8)	Businesses should support inclusive growth and equitable development.
Principle 9 (P9)	Businesses should engage with and provide value to their customers and consumers in a responsible manner.

	Disclosure questions	P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9
	Policy and management processes									
1	a. Whether your entity's policy / policies cover each principle and its core elements of the NGRBCs.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	Code of Conduct for Directors & Senior Management	✓			✓					
	Vigil Mechanism and Whistleblower Policy			✓	✓					
	Nomination & Remuneration Policy	✓		✓						
	Risk Management Policy	✓	✓							
	Policy for Preservation of Documents	✓								
	Material Subsidiary Policy	✓								
	Policy on Determining Criteria for Disclosure of Material Events	✓								
	Director Familiarisation Policy	✓								
	Corporate Social Responsibility Policy	✓			✓	✓	✓		✓	✓

Related Party Transaction Policy	✓								✓
Business Responsibility and Sustainability Policy	✓	✓	✓	✓	✓	✓	✓	✓	✓
Policy on Prevention of Insider Trading	✓			✓					
Policy on Leak of UPSI	✓								
Policy on Prevention of Sexual Harassment of Women at Workplace	✓		✓	✓					
Cyber Security and Data Privacy Framework									✓
Data Privacy and Confidentiality Policy									✓
Social Media & Digital Usage Policy									✓
Cyber Security Policy									✓
Information Security Policy									✓
Anti-Bribery Policy	✓								
Child Labour Policy				✓	✓				
Climate Change Policy						✓			
Human Rights Policy					✓				
Equal Employment Opportunity Policy			✓						
Quality Policy									✓
Environment, Health and Safety Policy						✓			
b. Has the policy been approved by the Board?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

c. Web Link of the Policies		The web-link of the policies are provided below - click to access: • Code of Conduct for Directors & Senior Management • Vigil Mechanism and Whistleblower Policy • Nomination & Remuneration Policy • Risk Management Policy • Policy for Preservation of Documents • Material Subsidiary Policy • Director Familiarisation Policy • Policy on Determining Criteria for Disclosure of Material Events • Director Familiarisation Policy • Corporate Social Responsibility Policy • Related Party Transaction Policy • Business Responsibility and Sustainability Policy • Policy on Prevention of Insider Trading • Policy on Leak of UPSI Other Policies are internal and accessible to the Employees and relevant internal stakeholders of the Company								
2	Whether the entity has translated the policy into procedures.	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
3	Do the enlisted policies extend to your value chain partners?	The Company's core policies on ethics, health & safety, and environment are applicable to its operations. While value chain partners are currently not formally required to adopt the same policies, the Company incorporates relevant compliance requirements in procurement contracts and vendor agreements.								
4	Name of the national and international codes / certifications / labels / standards adopted by your entity and mapped to each principle	NABH, NABL								

5	Specific commitments, goals and targets set by the entity with defined timelines	The Company has identified the following specific commitments under its ESG framework, covering environmental and operational sustainability across its hospital units: Energy: Reduction in electricity consumption through operational efficiency measures including energy-optimised HVAC systems, motion-sensor lighting, and monitoring of unit-level consumption. Water: Reduction in overall water consumption and Utilisation of STP-treated water for HVAC systems (up to 60%), flushing (up to 20%), and landscape irrigation (up to 20%), with the objective of achieving up to 100% reuse of treated wastewater within hospital premises. Renewable Solar power adoption across facilities through Power Purchase Agreement (PPA) or OPEX (Operational Expenditure) based models. Chemicals: Use of environment-friendly chemicals in cooling towers and sewage treatment plants, replacing conventional chemical dosing. Rainwater Harvesting: Installation of rainwater harvesting systems across facilities as part of new and ongoing infrastructure projects. Waste: Reduction in overall waste generation. Segregation and recycling of plastic and paper waste through authorised recyclers. Disposal of e-waste exclusively through authorised recyclers in compliance with applicable E-Waste Management Rules. Biogas: Establishment of biogas plants for treatment and utilisation of food waste generated at hospital premises.
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6. Performance of the entity against the specific commitments, goals, and targets along-with reasons in case the same are not met:

The Company monitors its environmental performance across key parameters on an ongoing basis. The following is a summary of performance during FY 2025-26 as against FY 2024-25:

Electricity Consumption: Total electricity consumed from non-renewable sources decreased from 71.93 TJ in FY 2024-25 to 59.88 TJ in FY 2025-26, reflecting a reduction of 12.05 TJ (16.75%). This improvement is attributable to energy optimisation initiatives implemented across hospital units during the year, including motion sensor-based lighting controls and operational monitoring of HVAC systems.

Fuel Consumption: Total fuel consumption increased from 1.45 TJ in FY 2024-25 to 2.08 TJ in FY 2025-26, an increase of 0.63 TJ (43.45%). The increase is attributable to higher diesel generator usage across select hospital units during the year and does not reflect a structural shift in the Company's energy mix. The Company is monitoring unit-level fuel consumption to identify reduction opportunities.

Total Energy: Total energy consumed declined from 73.38 TJ in FY 2024-25 to 61.96 TJ in FY 2025-26, a net reduction of 11.42 TJ (15.56%), driven primarily by the significant reduction in grid electricity consumption across units. Energy intensity per rupee of turnover improved from 8.45×10^9 TJ/₹ in FY 2024-25 to 6.90×10^9 TJ/₹ in FY 2025-26, reflecting an improvement of approximately 18.4% in energy efficiency relative to revenue scale.

Water Consumption: Total water withdrawal across hospital units was 3,42,267.96 KL in FY 2025-26, compared to 2,66,015 KL in FY 2024-25, an increase of 76,252.96 KL (28.67%). The increase is observed across surface water and groundwater withdrawal categories. Water intensity per rupee of turnover increased from 3.06×10^5 KL/₹ in FY 2024-25 to 3.81×10^5 KL/₹ in FY 2025-26, partly reflective of the expanded operational scale of hospital units during the year.

Biomedical Waste: Total biomedical waste generated decreased marginally from 230.09 metric tonnes in FY 2024-25 to 228.44 metric tonnes in FY 2025-26, a reduction of 1.65 metric tonnes (0.72%). All biomedical waste generated during the year was disposed of through authorised agencies in compliance with the Bio-Medical Waste Management Rules, 2016.

GHG Emissions: Total Scope 1 emissions for FY 2025-26 were 155.57 tCO₂e (arising from diesel combustion across DG sets at hospital units) and Scope 2 emissions were 11,809.99 tCO₂e (arising from purchased grid electricity), aggregating to 11,965.56 tCO₂e. Combined emission intensity per rupee of turnover stood at 1.33×10^6 tCO₂e/₹ for FY 2025-26. Comparative GHG figures for FY 2024-25 are not available as emissions were not computed for the prior year.

Overall, the Company's environmental performance in FY 2025-26 reflects measurable progress in electricity consumption and biomedical waste reduction, with total energy intensity improving by approximately 18.4% over FY 2024-25. Water consumption has increased in line with operational expansion across units. Efforts towards solar power adoption under PPA/OPEX models, 100% STP water reuse, biogas generation from food waste, and rainwater harvesting are being evaluated for implementation across facilities in subsequent years.

7. Statement by director responsible for the Business Responsibility & Sustainability Report, highlighting ESG related challenges, targets, and achievements (listed entity has flexibility regarding the placement of this disclosure).

At Shalby, we recognise that sustainable healthcare delivery requires equal commitment to environmental stewardship, social inclusion, and robust governance. During FY 2025-26, the Company continued to strengthen its ESG framework across all nine principles of the National Guidelines on Responsible Business Conduct. Key focus areas during the year included employee health and safety, biomedical waste management, and energy efficiency measures. We remain committed to enhancing transparency in our disclosures and progressively building our sustainability reporting framework in line with SEBI's BRSR requirements.

8. Details of the highest authority responsible for implementation and oversight of the business responsibility policy (ies):

- Dr. Vikram Shah, Chairman & Managing Director (DIN: 00011653) and Dr. Nishita Shukla, Group COO
- Contact number- +91 79402 03000
- E-mail ID: cmd@shalby.org, drnishita.shukla@shalby.org

9. Does the entity have a specified committee of the board / director responsible for decision making on sustainability related issues? If Yes, provide details.

Yes. The Directors and Senior Management Team monitors various aspects of Environmental, Social & Governance responsibilities of the Company on a continuous basis. The Company has formulated CSR committee for reviewing and taking decisions on CSR spending which is done in line with Sustainability. The Company's business responsibility performance is reviewed by the Board of Directors and CSR committee on an annual basis.

10	Details of Review of NGRBCs by the Company.																		
	Subject for review	Indicate whether review was undertaken by director / committee of the board / any other committee									Frequency (annually / half yearly / quarterly / any other)								
		P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9	P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9
a	Performance against above policies and follow up action	Y	Y	Y	Y	Y	Y	Y	Y	Y	We review and make revisions as and when needed in the policies to address emerging issues, regulatory changes, or enhance clarity and enforceability.								
b	Compliance with statutory requirements of relevance to the principles, and rectification of any non-compliances	Y	Y	Y	Y	Y	Y	Y	Y	Y	We track the compliance requirements of each regulatory authority and proactively ensure all compliances are met well before due date.								

		P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9
11	Has the entity carried out independent assessment/ evaluation of the working of its policies by an external agency? If yes, provide name of the agency.	No independent external assessment of the Company's BRSR policies has been undertaken for FY 2025-26. The policies are reviewed internally by the Board and Senior Management. The Company's Internal Auditors review risk factors and report to the Board.								

12	If principles not covered by a policy, provide reasons for the same.									
	Questions	P 1	P 2	P 3	P 4	P 5	P 6	P 7	P 8	P 9
a	The entity does not consider the Principles material to its business	NA	NA	NA	NA	NA	NA	NA	NA	NA
b	The entity is not at a stage where it is in a position to formulate and implement the policies on specified principles	NA	NA	NA	NA	NA	NA	NA	NA	NA
c	The entity does not have the financial or / human and technical resources available for the task	NA	NA	NA	NA	NA	NA	NA	NA	NA
d	It is planned to be done in the next financial year (Yes/No)	NA	NA	NA	NA	NA	NA	NA	NA	NA

BRSR Section C: Principle 1

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

This Principle recognizes that ethical behavior in all operations, functions and processes, is the cornerstone of businesses guiding their governance of economic, social and environmental responsibilities. The Principle emphasizes that disclosures on business decisions and actions that impact stakeholders form the fundamental basis of operationalizing responsible business conduct and should be accessible to all relevant stakeholders.

Essential Indicators

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

Segment	Total number of training and awareness programmes held	Topics / principles covered under the training and its impact	% of persons in respective category covered by the awareness programmes
Board of Directors	5	During FY 2025-26, the Board engaged in focused deliberations through Board meetings, covering a broad range of operational, clinical, and governance matters relevant to Shalby's business.	100%
Key Managerial Personnel		The board meetings covered thematic areas including growth strategy, capital expenditure, clinical excellence across Shalby's multi-unit hospital network spread over the country. From a governance and compliance standpoint, the Board received updates on regulatory requirements under the Companies Act, 2013 and SEBI Listing Obligations and Disclosure Requirements Regulations, 2015. The Board deliberated on policy frameworks and their amendments, including updates on the Digital Personal Data Protection Act, 2023, labour codes and their applicability to the Company's workforce, and developments under NFRA guidelines on auditor communication. The Board also oversaw CSR programme execution and expenditure, and engaged on matters relating to next year's CSR budget allocation. Risk Management formed part of the deliberations through meetings of the Risk Management Committee, wherein the Committee members focussed upon the new risk areas faced by the Company, impact of those risks on the business operations and the measures to mitigate those risks. The Key Managerial Personnel were a part of all these board and committee meetings.	100%

Employees other than BoD and KMPs	5	- Sessions on Clinical Topics - Sessions on Behavioural Topics - Sessions on Prevention of Sexual Harassment of Women at Workplace (POSH) - Sessions on Workplace Resilience & Wellbeing - Sessions on Adoption of Artificial Intelligence in Healthcare - Sessions on Career Development	100%
Workers	NA		

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

	NGRBC Principle	Name of the regulatory / enforcement agencies judicial institutions	Amount (In INR)	Brief of the case	Has an appeal been preferred?
Monetary	Refer to the Company's website for all disclosures made under Regulation 30 of SEBI (Listing Obligations and Disclosure Requirements) Regulations, 2015 and the Company's disclosure made in the Integrated (Governance) filing made quarterly.		NA		
Penalty / Fine					
Settlement					
Compounding fee					
Non-Monetary			NA		
Imprisonment					
Punishment					

3. Of the instances disclosed in question 2 above, details of the appeal / revision preferred in cases where monetary or non-monetary action has been appealed.

Nil.

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

Yes, the Company has zero-tolerance against bribery and corruption. The Company is maintaining the highest standards of corporate governance and ethical business conduct. Focused efforts are undertaken to ensure that all disclosure requirements are met adequately. This policy mandates that all individuals acting on behalf of the Company, including Directors, Key Managerial Personnel, Officers, Employees, and Third Parties, whether directly or indirectly must not engage in or accept any form of bribe or including any act of giving, offering, authorizing, or promising money or anything of value to any person, including government officials, to improperly influence decisions or secure undue advantages for the Company. Our Anti-Bribery Policy can be accessed internally by the employees and other stakeholders.

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

Particulars	FY 2025-26	FY 2024-25
Directors	Nil	Nil
Key Managerial Personnel (KMP)	Nil	Nil
Employees	Nil	Nil
Workers	NA	NA

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

Particulars	FY 2025-26	FY 2024-25
Directors	Nil	Nil
Key Managerial Personnel (KMP)	Nil	Nil

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

There were no instances of corruptions or conflicts of interest which required action by regulators/ law enforcement agencies/ judicial institutions.

8. Number of days of accounts payables ((Accounts payable *365) / Cost of goods/services procured) in the following format:

	FY 2025-26	FY 2024-25
Number of days of accounts payables	59.11	82.71

9. Open-ness of business

Provide details of concentration of purchases and sales with trading houses, dealers, and related parties along-with loans and advances & investments, with related parties, in the following format

Parameter	Metrics	FY 2025-26	FY 2024-25
Concentration of Purchases	a. Purchases from trading houses as % of total purchases	NIL	NIL
	b. Number of trading houses where purchases are made from	NA	NA
	c. Purchases from top 10 trading houses as % of total purchases from trading houses	NA	NA

Concentration of Sales	a. Sales to dealers/ distributors as % of total sales	NIL	NIL
	b. Sales (Sales to related parties / Total Sales)	NA	NA
	c. Sales to top 10 dealers / distributors as % of total sales to dealers / distributors	NIL	NIL
Share of RPTs in	a. Purchases (Purchases with related parties / Total Purchases)	31.48%	26.34%
	b. Sales (Sales to related parties / Total Sales)	0.001%	0%
	c. Loans & advances (Loans & advances given to related parties / Total loans & advances)	68.04%	55.65%
	d. Investments (Investments in related parties / Total Investments made)	90.06%	83.01%

Leadership Indicators

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

Total number of awareness programmes held	Topics / principles covered under the training	% of value chain partners covered (by value of business done with such partners) under the awareness programs
0	Disclosures on value chain partners are not applicable to the Company	NA

2. Does the entity have processes in place to avoid/ manage conflict of interests involving members of the Board? If Yes, provide details of the same.

Yes, the Company has established a robust framework to manage conflict of interest of the Board of Directors with the implementation of Disclosure of Interest in other companies, bodies corporate and other entities under Section 184 of the Companies Act, 2013.

The said disclosures are received from the Directors at the first board meeting in which they participate, at the first board meeting of every financial year and whenever there is a change in the disclosures already made.

The transactions entered into with the companies, bodies corporate or entities in which any of the Director has any interest, financial or otherwise, are periodically updated in the Register of Contracts and Arrangements with Related Parties and in which Directors are interested, as prescribed under the Companies Act, 2013.

Further, the Company has also implemented the Code of Conduct for Directors and Senior Management Personnel wherein, the Company receives a declaration, at the beginning of the financial year, from every Director and Senior Management Personnel affirming compliance with the Code.

BRSR Section C: Principle 2

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

This Principle recognizes the proposition of SDG 12, that sustainable production and consumption are interrelated, contribute to enhancing the quality of life and towards protecting and preserving earth's natural resources. The Principle further emphasizes that businesses should focus on safety and resource-efficiency in the design and manufacture of their products, and use their products in a manner that creates value while minimizing and mitigating its adverse impacts on the environment and society through all stages of its life cycle, from design to final disposal.

Essential Indicators

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

Capital expenditure investments during the year were primarily directed towards medical equipment, infrastructure and technology upgrades. Specific R&D or capex investments made with the primary objective of improving environmental or social impacts of services during the reporting period include:

- LED lights
- Occupancy sensors installation in toilets to avoid permanent illumination and save electrical consumption
- Proper thermal insulation to increase efficiency of HVAC system and thereby reducing energy consumption
- Infrared controllers in water taps as they provide water only when required otherwise they switch off automatically and can save between 5% and 15% of water per tap per year
- VFD installation for AHU motor in a phased manner
- Double glazed glass of low emissivity type
- Rain water harvesting system

- 2. Does the entity have procedures in place for sustainable sourcing? If Yes, what percentage of inputs were sourced sustainably?**

The Company ensures sustainable procurement by sourcing pharmaceutical supplies, medical consumables, and equipment from approved vendors who comply with applicable regulatory standards and quality requirements. Preference is accorded to vendors with valid certifications and established quality management systems.

- 3. Describe the processes in place to safely reclaim your products for reusing, recycling, and disposing at the end of life, for (a) Plastics (including packaging) (b) E-waste (c) Hazardous waste and (d) Other waste.**

The Company thrives to maintain quality standards, reduce waste generation, and segregate recyclable waste at hospitals. The Company ensures that all its procedures are in keeping with applicable rules and safety regulation. It also strictly adheres to legal and safety requirements. The Company ensures to dispose of bio-medical and other waste in accordance with the government guidelines. Recyclable wastes were collected and disposed of through authorized recycler. E-waste generated at the facility were disposed of through authorized agent. We have policy in place to dispose of bio medical waste in accordance with the guideline of the government and to ensure minimum generation of radiation in and around the hospital. Given the nature of our operations, recycling activities are not conducted on site. However, all waste is responsibly managed and disposed of exclusively through authorized channels.

4. Whether Extended Producer Responsibility (EPR) is applicable to the entity's activities. If Yes, whether the waste collection plan is in line with the Extended Producer Responsibility (EPR) plan submitted to Pollution Control Boards? If not, provide steps taken to address the same.

Extended Producer Responsibility does not apply to our company as we are engaged in providing healthcare services and do not fall under the category of "Producer" according to the Plastic Waste Management Rules, 2016 (as amended by the Plastic Waste Management Rules, 2022).

Leadership Indicators

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

NIC Code	Name of product / service	% of total turnover contributed	Boundary for which the Life Cycle Perspective/ Assessment was conducted	Whether conducted by Independent External Agency (Yes/No)	Results communicate in public domain (Yes/ No) if yes, provide the web-link
No Life Cycle Perspective / Assessment study has been conducted during the current reporting period					

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

	Name of product / service	Description of the risk / concern	Action taken
Not applicable as no Life Cycle Perspective / Assessment study has been conducted during the current reporting period			

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

Indicate input material	Recycled or Re-used input material to total material	
	FY 2025-26	FY 2024-25
Not applicable		

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

	FY 2025-26			FY 2024-25		
	Re-used	Recycled	Safely disposed	Re-used	Recycled	Safely disposed
Plastics (including packaging)	Not Applicable			Not Applicable		
E waste						
Hazardous waste						
Other waste						

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

Indicate product category	Reclaimed products and their packaging materials as a % of total products sold in respective categories
Not applicable	

BRSR Section C: Principle 3

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

This Principle encompasses all policies and practices relating to the equity, dignity and well-being, and provision of decent work of all employees engaged within a business or in its value chain, without any discrimination and in a way that promotes diversity. The principle recognizes that the well-being of an employee also includes the wellbeing of her/his family.

Essential Indicators

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

Category	% of employees covered by										
	Total (A)	Health insurance		Accident insurance		Maternity benefits		Paternity benefits		Day care facilities	
		No. (B)	% (B / A)	No. (C)	% (C / A)	No. (D)	% (D / A)	No. (E)	% (E / A)	No. (F)	% (F / A)
Permanent employees											
Male	1231	0	0	1199	97%	0	0	0	0	0	0
Female	986	0	0	939	95%	56	6%	0	0	0	0
Total	2217	0	0	2138	96%	0	0	0	0	0	0
Other than Permanent employees											

Male	340	0	0	338	99%	0	0	0	0	0	0
Female	281	0	0	278	99%	1	0%	0	0	0	0
Total	621	0	0	616	99%	0	0	0	0	0	0

1b. Details of measures for the well-being of workers:

The company is not into the manufacturing business hence does not employ any workers.

2. Details of retirement benefits, for current financial year and previous financial year:

Benefits	FY 2025-26			FY 2024-25		
	No. of employees covered as a % of total employees	No. of workers covered as a % of total workers	Deducted and deposited with the authority (Yes/No)	No. of employees covered as a % of total employees	No. of workers covered as a % of total workers	Deducted and deposited with the authority (Yes/No)
PF	85.87%	NA	Yes	86.62%	NA	Yes
Gratuity	95.60%	NA	Yes	95.00%	NA	Yes
Employee State Insurance (ESI)	18.78%	NA	Yes	22.20%	NA	Yes
Others	-	-	-	-	-	-

3. Accessibility of workplaces: Are the premises / offices of the entity accessible to differently abled employees and workers, as per the requirements of the Rights of Persons with Disabilities Act, 2016? If not, whether any steps are being taken by the entity in this regard.

The Company's hospital facilities and offices are designed to provide accessibility to differently abled individuals. Ramps, lifts, and accessible restrooms are available across major hospital units. The Company endeavours to comply with the requirements of the Rights of Persons with Disabilities Act, 2016 across its operational premises.

4. Does the entity have an equal opportunity policy as per the Rights of Persons with Disabilities Act, 2016? If so, provide a web-link to the policy.

We recognize the importance of maintaining a diverse work environment through the creation of a strong and healthy work environment that fosters innovation and shared learning experiences. Our anti-discrimination policy educates employees on discrimination and harassment topics, as well as how to address them and report them when they occur. Diversity metrics are monitored on an ongoing basis, and appropriate measures are in place. We provide equal employment opportunities that allow all individuals to maximize their capabilities and thereby enrich our work environment.

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

Gender	Return to work rate	Retention rate
Permanent employees		
Male	Paternity leave not applicable	Paternity leave not applicable
Female	85.96%	56.14%
Total	85.96%	56.14%

Male	Not Applicable, as the Company does not have any workers as defined in the BRSR Guidance Note.
Female	
Total	

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

	If Yes, then give details of the mechanism in brief
Permanent Workers	Not Applicable, as the Company does not have any workers as defined in the BRSR Guidance Note.
Other than Permanent Workers	
Permanent Employees	Yes, we have a robust grievance redressal mechanism to ensure that employees and workers have clear, accessible, and efficient channels to raise their concerns and complaints. Multiple platforms are available for submitting grievances, ensuring confidentiality and prompt resolution: Employee Grievance Redressal: The company has implemented an online system of Employee Grievance Redressal (E Care) that is integrated with its HRMS. This mechanism enables all employees to raise their grievances through the online portal, which is accessible 24/7. The portal is designed to ensure that all employee grievances are addressed promptly and efficiently. Whistle-Blower Policy (Vigil Mechanism): Enables reporting of fraud, corruption, unethical conduct, or code violations confidentially and without fear of retaliation by all employees. Prevention of Sexual Harassment of Women at Workplace: Enables safe work environment for all women employees including reporting mechanism.
Other than Permanent Employees	NA

7. Membership of employees and worker in association(s) or unions recognized by the listed entity:

The Company does not have any employee associations. The Company, however, recognizes the right to freedom of association.

8. Details of training given to employees and workers:

	FY 2025-26					FY 2024-25				
	Total (A)	Health and safety measures		Skill upgradation		Total (A)	Health and safety measures		Skill upgradation	
		No. (B)	% (B / A)	No. (C)	% (C / A)		No. (B)	% (B / A)	No. (C)	% (C / A)
Employees										
Male	1571	1421	90%	1452	92%	1560	1326	85%	1435	92%
Female	1267	1131	89%	1155	91%	1242	1081	87%	1131	91%
Total	2838	2552	89.92%	2607	92%	2802	2407	86%	2566	92%

Workers	Not Applicable, as the Company does not have any workers as defined in the BRSR Guidance Note.	Not Applicable, as the Company does not have any workers as defined in the BRSR Guidance Note.
Male		
Female		
Total		

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

	FY 2025-26			FY 2024-25		
	Total (A) (total employees)	No. (B) (total participated)	% (B / A)	Total (C)	No. (D)	% (D / C)
Employees						
Male	1571	1101	70.08%	1560	1155	52.26%
Female	1267	816	64.40%	1242	1647	58.78%
Total	2838	1917	67.55%	2802	1943	54.98%
Workers	The company is not into manufacturing business and hence not required to employ any workers.					
Male						
Female						
Total						

10. Health and safety management system:

a) Whether an occupational health and safety management system has been implemented by the entity? If Yes, the coverage such system?

Yes, the Company is committed to upholding the highest standards of Occupational Health and Safety (OHS) through a comprehensive management system. All our hospital facilities adhere to globally recognized medical protocols and hold accreditations from the National Accreditation Board for Hospitals (NABH). Additionally, all our employees are covered under our Occupational Health and Safety Management System, ensuring a safe and healthy work environment

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

We prioritize proactive risk assessments to protect the health, safety, and well-being of everyone in the workplace. Our approach follows the three-step Hazard Identification and Risk Assessment (HIRA) methodology:

Identify potential sources of Hazard – Identify potential sources of harm (Hazard Identification).

Assess the Risk – Evaluate the likelihood and severity of each hazard (Risk Assessment).

Make the Changes – Implement measures to eliminate or control the identified risks (Risk Control).

Using the HIRA framework, we systematically pinpoint hazards, assess their risks, and apply controls to mitigate them. This is reinforced through periodic internal audits and continuous monitoring to ensure compliance with legal and safety standards, which uncover unsafe behaviours and conditions, driving continual improvement and optimizing risk levels.

c) Whether you have processes for workers to report the work related hazards and to remove themselves from such risks.

Employees are trained to report unsafe conditions to their reporting managers.

d) Do the employees / worker of the entity have access to non-occupational medical and healthcare services?

(Yes/ No)

Yes.

11. Details of safety related incidents:

Safety Incident / Number	Category	FY 2025-26	FY 2024-25
Lost Time Injury Frequency Rate (LTIFR) (per one million-person hours worked)	Employees	0	0
	Workers	NA	NA
Total recordable work-related injuries	Employees	0	0
	Workers	NA	NA
No. of fatalities	Employees	0	0
	Workers	NA	NA
High consequence work-related injury or ill-health (excluding fatalities)	Employees	0	0
	Workers	NA	NA

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

We have implemented a comprehensive set of measures across our facilities to ensure a safe, healthy, and supportive workplace for all employees and workers. These initiatives are designed to proactively manage occupational health and safety risks while promoting overall wellbeing

Key measures taken includes –

- Education on Health and Safety at workplace
- Training on Disaster Management measures such as Fire Mock Drill etc.
- Periodic sessions on Prevention of Sexual Harassment of Women at Workplace under the Sexual Harassment of Women at Workplace (Prevention, Prohibition & Redressal) Act, 2015
- Organisation of Stress Management Programmes that promote both physical and mental health, supporting holistic employee wellbeing.
- Organisation of Awareness Programme by Expert Doctors on topics such as Sedantry Life Style, Diabetes, Cardiovascular health.
- Structured work schedules with scheduled breaks to prevent fatigue and maintain high levels of productivity and alertness.

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

	FY 2025-26			FY 2024-25		
	Filed during the year	Pending resolution at the end of year	Remarks	Filed during the year	Pending resolution at the end of year	Remarks
Working Conditions	22	0		10	2	2 pending complaints were disposed off after the closure of financial year
Health and Safety	0	0		0	0	-

14. Assessments for the year:

	% of your plants and offices that were assessed (by entity or statutory authorities or third parties)	
	FY 2025-26	FY 2024-25
Health and safety practices	100% NABH, PCB	100% NABH, PCB
Working Conditions	100% NABH, PCB	100% NABH, PCB

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

The Company conducts periodic HIRA (Hazard Identification and Risk Assessment) exercises across its hospital units. Any deficiencies identified are addressed through corrective action plans assigned to unit-level safety officers. NABH accreditation requirements mandate ongoing compliance with patient and employee safety protocols, and non-conformities identified during internal or external audits are tracked to closure. POSH awareness sessions and training programmes are conducted periodically to ensure a safe workplace for all employees, particularly women.

Leadership Indicators

1. Does the entity extend any life insurance or any compensatory package in the event of death of (A) Employees (B) Workers?

Yes, the Company provides accidental death benefit covering all employees through insurance policy.

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

As part of the contractual arrangements entered into with value chain partners and suppliers, the Company has incorporated specific clauses requiring adherence including deduction and timely deposit of statutory dues (such as PF, ESI etc).

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

	Total number of affected employees/workers		No. of employees/workers that are rehabilitated and placed in suitable employment or whose family members have been placed in suitable employment	
	FY 2025-26	FY 2024-25	FY 2025-26	FY 2024-25
Employees	Nil	Nil	Nil	Nil
Workers	NA	NA	NA	NA

4. Does the entity provide transition assistance programs to facilitate continued employability and the management of career endings resulting from retirement or termination of employment?

No

5. Details on assessment of value chain partners:

Not applicable.

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

Not applicable.

BRSR Section C: Principle 4

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

This Principle recognizes that businesses operate in an eco-system comprising a number of stakeholders, beyond shareholders and investors, and that their activities impact natural resources, habitats, communities and the environment. The Principle acknowledges that it is the responsibility of businesses to ensure that the interests of all stakeholders, especially those who may be vulnerable and marginalized, are protected.

Essential Indicators

1. Describe the processes for identifying key stakeholder groups of the entity

The Company identifies its key stakeholder groups based on the nature and degree of their relationship with its operations, encompassing those who influence the Company's decisions, are impacted by its activities, or contribute to its value chain. Given the healthcare context, this includes patients and their families, employees and healthcare professionals, investors and lenders, regulators, suppliers and service providers, local communities, and industry associations.

Stakeholder identification is carried out by evaluating each unit's level of interest in the Company's operations, the extent to which they are affected by or can affect business outcomes, and their relevance to the Company's environmental, social, and governance priorities. Both internal and external stakeholders, with direct or indirect influence on hospital operations, are considered within this framework.

Once identified, engagement with each stakeholder group is structured around defined communication channels and frequencies appropriate to the nature of the relationship, ranging from continuous engagement with patients and employees by seeking feedback to periodic engagement with regulators and investors through quarterly investor presentations.

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

	Stakeholder Group	Whether identified as vulnerable and marginalized group	Channels of communication	Frequency of engagement (annually / half yearly / quarterly / others)	Purpose and scope of engagement including key topics and concerns raised during such engagement
1	Employees	No	- Periodic training sessions - Periodic POSH sessions - One-to-One interactions - Employee experience surveys - Employee satisfaction surveys - Corporate events	Ongoing	- Creating a safe working environment for all employees - Implementing various initiatives, including compensation benchmarking and performance feedback mechanisms - Creating a positive working environment and empowerment of all employees
2	Vendors	No	E-mail, Digital meetings, In person meetings	As and when required	- Executing routine procurement, including order placement, supply chain planning, inventory management and addressing queries or escalations - Ensuring quality assurance within the local procurement segment of the supply chain
3	Patients/ Customers	No	Patient communication by Hospital: Email, meetings/ Telephonic/ verbal	Ongoing	- Scope: All units of Shalby - To improve the delivery of quality healthcare services and protect patient health and safety by ensuring complaint is reviewed/ investigated, tracked and trended - To provide a real time response to complaints and grievances of patient and attendants
4	Regulators	No	- Stock exchange filings - Newspaper publication - E-form filing with the Ministry of Corporate Affairs and other regulatory authorities	Ongoing	- To maintain transparency and clarity in statutory and regulatory compliances and records - To ensure compliance with all applicable laws and regulations - To adhere to legal requirements for regular filings and submissions

5	Shareholders & Investors	No	- Email, Newspaper, Website, - Investor and Analyst Meetings / Conferences - One to one Meetings (Physical and Virtual), - Earnings Call with Analysts and Investors - Annual General Meeting - Press Releases - Stock Exchange Filings - Annual Report	Annually / Half-Yearly / Quarterly / Ongoing	- To provide timely, adequate and accurate information on the Company's financial and operational performance - To ensure transparent and effective communication - To provide timely updates on governance practices, material developments and strategic direction in order to enable informed investment decision-making and maintaining investor confidence - To solve investor queries and investor grievances - Key topics and concerns raised during engagements: - Financial performance, revenue growth, and profitability across hospital units - Capacity expansion plans - International operations and global OPD network development - Debt profile, capital allocation, and return on invested capital - Clinical quality indicators, NABH accreditation status, and patient outcomes - Corporate governance practices, Board composition, and related party transactions - Dividend policy and capital return framework - ESG performance and sustainability initiatives - Regulatory developments affecting the healthcare sector
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Leadership Indicators

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

The Company engages with its stakeholders through established channels appropriate to each group. Patient feedback is collected through structured feedback mechanisms at the hospital level, investor engagement is conducted through quarterly investor presentations, disclosure of ESG ratings and BRSR

report submitted to the stock exchanges. Inputs received through these channels are reviewed by the Management and material matters are reported to the Board periodically for deliberation and guidance.

2. Whether stakeholder consultation is used to support the identification and management of environmental, and social topics. If so, provide details of instances as to how the inputs received from stakeholders on these topics were incorporated into policies and activities of the entity.

Yes. Stakeholder inputs are used to identify and manage environmental and social topics at Shalby Limited. Feedback received through existing engagement channels is reviewed by the Management and translated into operational improvements and policy refinements. Key instances are outlined below:

Patient Feedback: Patient inputs on hygiene, cleanliness, and infection control practices have been used to strengthen housekeeping protocols and biomedical waste segregation procedures across all units.

Employee Inputs: Feedback from clinical and para-clinical staff on workplace safety and occupational health risks has contributed to periodic reviews of safety training programmes across all units.

Investor and Analyst Engagement: Inputs received during quarterly investor interactions on ESG performance and governance practices have reinforced the Company's focus on sustainability disclosures and transparency in regulatory reporting.

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

Shalby Limited recognises its responsibility towards vulnerable and marginalised communities and has undertaken targeted engagement and support initiatives through our CSR Programme for such groups during FY 2025-26. Key instances are outlined below:

Food Distribution to Underprivileged Families: Through its CSR initiatives, the Company supported the distribution of food items and grains to poor and needy families across rural areas, without distinction of caste or creed. This initiative addressed immediate nutritional needs of economically marginalised households.

Women Empowerment: The Company's CSR contribution facilitated women empowerment programmes aimed at improving the social and economic standing of women from underserved communities.

Rural Development and Community Mobilisation: Funds were channelled towards rural development activities and community mobilisation initiatives, targeting populations in geographically underserved areas with limited access to civic and social infrastructure.

BRSR Section C: Principle 5

Businesses should respect and promote human rights

This Principle recognizes that human rights are rights inherent to all human beings, and that everyone, individually or collectively, is entitled to these rights, without discrimination. It further recognizes that human rights are inherent, inalienable, interrelated, interdependent and indivisible.

Essential Indicators

1. Employees and workers who have been provided training on human rights issues and policy(ies) of the entity:

	FY 2025-26			FY 2024-25		
	Total (A)	No. of employees / workers covered (B)	% (B / A)	Total (C)	No. of employees / workers covered (D)	% (D / C)
Employees						
Permanent	2217	2552	90%	2592	2387	92%
Other than permanent	621			210	187	89%
Total Employees	2838	2552	90%	2802	2574	92%
Workers						
Permanent	Not applicable, as company is not into manufacturing business, it does not employ any workers					
Other than permanent						
Total Workers						

2. Details of minimum wages paid to employees and workers:

	FY 2025-26					FY 2024-25				
	Total (A)	Equal to Minimum Wage (B)	% (B / A)	More than Minimum Wage (C)	% (C / A)	Total (A)	Equal to Minimum Wage (B)	% (B / A)	More than Minimum Wage (C)	% (C / A)
Employees										
Permanent	2217	1154	52%	1063	48%	2592	-	-	2592	100%
Male	1231	514	42%	717	58%	1444	-	-	1444	100%
Female	986	640	65%	346	35%	1148	-	-	1148	100%
Other than Permanent	621	301	48%	320	52%	210	-	-	210	100%
Male	340	129	38%	211	62%	116	-	-	116	100%
Female	281	172	61%	109	39%	94	-	-	94	100%
Workers										
Permanent	Not applicable, as company is not into manufacturing business, it does not employ any workers									
Male										
Female										
Other than Permanent										
Male										
Female										

3. Details of remuneration / salary / wages:

a. Median remuneration/wages:

	FY 2025-26		FY 2024-25	
	Number	Median remuneration*/ salary/ wages of respective category	Number	Median remuneration* / salary / wages of respective category
Board of Directors (BoD)*	7	₹ 2,85,000	7	₹ 2,55,000
Male	6	₹ 1,25,000	6	₹ 1,20,000
Female	1	₹ 1,60,000	1	₹ 1,35,000
Key Managerial Personnel	3	₹ 36,14,470	2	₹ 54,80,865
Male	3	₹ 36,14,470	2	₹ 54,80,865
Female	0	NA	0	0
Employees other than BoD and KMP	4871	₹ 4,42,482	4009	₹ 4,05,292
Male	2788	₹ 2,47,260	2120	₹ 2,23,561
Female	2083	₹ 1,95,222	1889	₹1,81,731
Workers	NA	NA	NA	NA

* None of the Board members have received remuneration, except sitting fees as disclosed in Corporate Governance Report.

b. Gross wages paid to females as % of total wages paid

	FY 2025-26	FY 2024-25
Gross wages paid to females as % of total wages.	33.74%	36.47%

4. Do you have a focal point (Individual / Committee) responsible for addressing human rights impacts or issues caused or contributed to by the business?

Yes, the Company's Chief Human Resources Officer serves as a designated focal point and senior accountable authority for overseeing human rights impacts or issues caused or contributed to by the business.

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

The Company has established a robust policy framework to address human rights concerns including but not limited to discrimination, harassment, forced labour, and workplace dignity concerns, across its operations which includes:

- Human Rights Policy (Aligned with United Nations Guiding Principles on Business and Human Rights)
- Child Labour Policy
- Environmental, Health and Safety Policy
- Prevention of Sexual Harassment of Women at Workplace Policy (Aligned with POSH Act, 2013)
- Vigil Mechanism and Whistleblower Policy

These policy instruments collectively govern the prevention, reporting, and redressal of human rights violations in the workplace. Written complaints received from aggrieved individuals are processed and remediated in accordance with the prescribed procedures and timelines stipulated under these policies, with action instituted as per the recommendations of the relevant Internal Committees.

Moreover, the company operates an internal portal dedicated to addressing human rights issues and concerns, accessible via <https://myshalby.peoplestrong.com/>

Oversight of this portal falls under the purview of the Chief Human Resources Officer as part of the vigil mechanism and whistleblower policy. Employees and stakeholders are encouraged to use this platform to raise any concerns or issues they may have. Regular reviews of submissions are conducted by the Audit Committee to ensure effective oversight and resolution.

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

	FY 2025-26			FY 2024-25		
	Filed during the year	Pending resolution at the end of year	Remarks	Filed during the year	Pending resolution at the end of year	Remarks
Sexual Harassment	0	0		1	0	-
Discrimination at workplace	2	0		5	1	Resolved after completion of financial year
Child Labour	0	0		0	0	-
Forced Labour / Involuntary Labour	0	0		0	0	-
Wages	0	0		3	0	-
Other human rights related issues	0	0		0	0	-

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

	FY 2025-26	FY 2024-25
Total Complaints reported under Sexual Harassment on the Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (POSH)	0	1
Complaints on POSH as a % of female employees/workers	0.00%	0.06780%
Complaints on POSH upheld	0	0

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

The Company has adopted a Policy on Prevention, Prohibition and Redressal of Sexual Harassment at the Workplace in accordance with the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 and the rules framed thereunder. An Internal Committee has been

duly constituted to receive, investigate, and redress complaints relating to sexual harassment across the Company's locations. Periodic awareness sessions and POSH training programmes are conducted for all employees to foster a safe, respectful, and inclusive work environment.

9. Do human rights requirements form part of your business agreements and contracts?

The Company endeavours to cover the human rights requirements in its business agreements and contracts.

10. Assessments for the year:

	% of plants and offices that were assessed (by the entity or statutory authorities or third parties)
Child labour	100%
Forced / involuntary labour	100%
Sexual harassment	100%
Discrimination at workplace	100%
Wages	100%
Others – please specify	NA

NA: Not Applicable

11. Provide details of any corrective actions taken or underway to address significant risks / concerns arising from the assessments at Question 10 above.

Nil. There were no significant risks / concerns arising from the assessments.

Leadership Indicators

1. Details of a business process being modified / introduced as a result of addressing human rights grievances / complaints.

The Company has not received any grievances or complaints related to human rights. However, the Company remains dedicated to adjusting and adopting its business processes to address any issues that may arise.

2. Details of the scope and coverage of any Human rights due diligence conducted.

No human rights due diligence was conducted during the year.

3. Is the premise / office of the entity accessible to differently abled visitors, as per the requirements of the Rights of Persons with Disabilities Act, 2016?

Yes. All hospital units and corporate offices of the Company are equipped with facilities to ensure accessibility for differently-abled visitors, in accordance with the requirements of the Rights of Persons with Disabilities Act, 2016, including but not limited to wheelchairs ramp, wheelchairs with dedicated nurses/attendants, wheelchair friendly elevators, lift with braille panels and others to ensure ease of access.

4. Details on assessment of value chain partners:

	% of value chain partners (by value of business done with such partners) that were assessed
Sexual Harassment	No assessment was carried for value chain partners
Discrimination at workplace	
Child Labour	
Forced Labour / Involuntary Labour	
Wages	
Others – please specify	

5. Provide details of any corrective actions taken or underway to address significant risks / concerns arising from the assessments at question 4 above.

No such assessments have been done hence this question is not applicable.

BRSR Section C: Principle 6**Businesses should respect and make efforts to protect and restore the environment**

This Principle recognizes that environmental responsibility is a prerequisite for sustainable economic growth and for the well-being of society. The Principle emphasizes that environmental issues are interconnected at the local, regional and global levels, which makes it imperative for businesses to address issues like pollution, biodiversity conservation, sustainable use of natural resources and climate change (mitigation, adaptation and resilience) in a just, comprehensive and systematic manner.

Essential Indicators**1. Details of total energy consumption (in Joules or multiples) and energy intensity:**

Parameter	FY – 2025-26	FY – 2024-25
From renewable sources		
Total electricity consumption (A)	-	-
Total fuel consumption (B)	-	-
Energy consumption through other sources (C)	-	-
Total energy consumed from renewable sources (A+B+C)	-	-
From non-renewable sources		
Total electricity consumption (D)	59.88 TJ	71.93 TJ
Total fuel consumption (E)	2.08 TJ	1.45 TJ
Energy consumption through other sources (F)	-	-
Total energy consumed from nonrenewable sources (D+E+F)	61.96 TJ	73.38 TJ
Total energy consumed (A+B+C+D+E+F)	61.96 TJ	73.38 TJ
Energy intensity per rupee of turnover (Total energy consumed / Revenue from operations)	0.0000000069	0.0000000084
Energy intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP)* (Total energy consumed / Revenue from operations adjusted for PPP)	0.0000001403	0.0000001745
Energy intensity in terms of physical output	Not applicable	Not applicable

TJ = Tera Joules, J= Joules

* The revenue from operations has been adjusted to Purchasing Power Parity (PPP) using the International Monetary Fund (IMF) Purchasing Power Parity conversion factor of 20.34 for India for FY 2025-26 and 20.66 for FY 2024-25.

Note: Indicate if any independent assessment/ evaluation/ assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

No independent assessment/ evaluation/ assurance has been carried out by an external agency in FY 2025-26.

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

Not applicable.

3. Provide details of the following disclosures related to water:

Parameter	FY 2025-26	FY 2024-25
Water withdrawal by source (in kilolitres)		
(i) Surface water	76993.06	12317.00
(ii) Groundwater	218340.90	149298.00
(iii) Third party water	46934.00	104400.00
(iv) Seawater / desalinated water	Nil	Nil
(v) Others	Nil	Nil
Total volume of water withdrawal (in kilolitres) (i + ii + iii + iv + v)	342267.96	266015.00
Total volume of water consumption (in kilolitres)	342267.96	266015.00
Water intensity per rupee of turnover (Water consumed / turnover)	0.0000380908	0.0000306165
Water intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total water consumption / Revenue adjusted for PPP)*	0.000774767	0.0006325379
Water intensity in terms of physical output	Not applicable	Not applicable

* The revenue from operations has been adjusted to Purchasing Power Parity (PPP) using the International Monetary Fund (IMF) Purchasing Power Parity conversion factor of 20.34 for India for FY 2025-26 and 20.66 for FY 2024-25.

Note: Indicate if any independent assessment/ evaluation/ assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

No independent assessment/ evaluation/ assurance has been carried out by an external agency in FY 2025-26.

4. Provide the following details related to water discharged:

Parameter	FY 2025-26 (Current Financial Year)	FY 2024-25 (Previous Financial Year)
Water discharge by destination and level of treatment (in kilolitres)		
(i) To Surface water	-	-
- No treatment	-	-
- With treatment – please specify level of treatment	-	-
(ii) To Groundwater	210252	14984
- No treatment	42050	5126
- With treatment – please specify level of treatment	168202	9858
(iii) To Seawater	-	-
- No treatment	-	-
- With treatment – please specify level of treatment	-	-
(iv) Sent to third-parties	-	-
- No treatment	-	-
- With treatment – please specify level of treatment	-	-
(v) Others	-	-
- No treatment	-	-
- With treatment – please specify level of treatment	-	-
Total water discharged (in kilolitres)	210252	14984

Note: Indicate if any independent assessment/ evaluation/ assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

No independent assessment/ evaluation/ assurance has been carried out by an external agency in FY 2025-26.

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

No, the entity has not implemented a mechanism for Zero Liquid Discharge.

6. Please provide details of air emissions (other than GHG emissions) by the entity:

Parameter	Unit	FY 2025-26	FY 2024-25
NOx	Shalby Limited is engaged in healthcare services and does not undertake any manufacturing or industrial operations. The Company operates diesel generator sets at its hospital facilities as backup power sources. Quantification of resultant air emissions (NOx, SOx, PM) is currently being established through internal data collection processes and will be disclosed in subsequent reporting periods as the emissions monitoring framework is strengthened.		
SOx			
Particulate matter (PM)			
Persistent organic pollutants (POP)			
Volatile organic compounds (VOC)			
Hazardous air pollutants (HAP)			
Others – please specify			

Note: Indicate if any independent assessment/ evaluation/ assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

No independent assessment/ evaluation/ assurance has been carried out by an external agency in FY 2025-26.

7. Provide details of greenhouse gas emissions (Scope 1 and Scope 2 emissions) and its intensity:

Parameter	Unit	FY 2025-26	FY 2024-25
Total Scope 1 emissions (Break-up of GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)	tCO ₂ e (Tonne CO ₂ equivalent)	155.57	-
Total Scope 2 emissions (Break-up of GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)	tCO ₂ e (Tonne CO ₂ equivalent)	11809.99	-
Total Scope 1 and Scope 2 emission intensity per rupee of turnover (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations)	tCO ₂ e (Tonne CO ₂ equivalent) per rupee of turnover	0.0000013497	-
Total Scope 1 and Scope 2 emission intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP) (Total Scope 1 and Scope 2 GHG emissions / Revenue from operations adjusted for PPP)	tCO ₂ e (Tonne CO ₂ equivalent) per rupee of turnover adjusted for PPP	0.0000274521	-

* The revenue from operations has been adjusted to Purchasing Power Parity (PPP) using the International Monetary Fund (IMF) Purchasing Power Parity conversion factor of 20.34 for India for FY 2025–26 and 20.66 for FY 2024-25.

Note: Indicate if any independent assessment/ evaluation/ assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

No independent assessment/ evaluation/ assurance has been carried out by an external agency in FY 2025-26.

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

No, the Company currently does not have dedicated projects specifically aimed at reducing greenhouse gas emissions. However, the Company undertakes various operational initiatives that contribute to energy efficiency and reduction of carbon footprint, including installation of energy-efficient equipment, LED lighting across hospital facilities, and optimisation of HVAC systems. The Company remains committed to strengthening its environmental performance framework in subsequent reporting periods.

9. Provide details related to waste management by the entity:

Parameter	FY – 2025-26	FY – 2024-25
Total Waste generated (in metric tonnes)		
Plastic waste (A)	-	-
E-waste (B)	-	-
Bio-medical waste (C)	228.44	230.09
Construction and demolition waste (D)		-
-		
Battery waste (E)	-	-
Radioactive waste (F)	-	-
Other Hazardous waste. Please specify, if any. (G)	-	-
Other Non-hazardous waste generated (H). Please specify, if any.	-	-
Total (A+B + C + D + E + F + G + H)	228.44	230.09
Waste intensity per rupee of Turnover (Total waste generated / Revenue from operations)	0.0000000254	0.0000000265
Waste intensity per rupee of turnover adjusted for Purchasing Power Parity (PPP)*	0.00000005171	0.00000005471
Waste intensity in terms of physical output	-	-
For each category of waste generated, total waste recovered through recycling, re-using or other recovery operations (in metric tonnes)		
Category of waste		
(i) Recycled	-	-
(ii) Re-used	-	-
(iii) Other recovery operations	-	-
Total	-	-
For each category of waste generated, total waste disposed by nature of disposal method (in metric tonnes)		
Category of waste		
(i) Incineration	-	-
(ii) Landfilling	-	-
(iii) Other disposal operations	-	-
Total	-	-

* The revenue from operations has been adjusted to Purchasing Power Parity (PPP) using the International Monetary Fund (IMF) Purchasing Power Parity conversion factor of 20.34 for India for FY 2025–26 and 20.66 for FY 2024-25.

Note: Indicate if any independent assessment/ evaluation/ assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

No independent assessment/ evaluation/ assurance has been carried out by an external agency in FY 2025-26.

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

Hospitals generate biomedical waste as a by-product of healthcare services, which can pose serious health and environmental risks if not managed appropriately. Shalby Limited has established a structured healthcare waste management system encompassing waste minimisation, segregation, and categorisation into medical, general, recyclable, and food waste streams, in compliance with the Bio-Medical Waste Management Rules, 2016.

Key practices adopted during FY 2025-26 include:

- Biomedical waste disposal through authorised Common Biomedical Waste Treatment Facilities (CBWTFs) in accordance with applicable regulatory guidelines
- Monthly monitoring of hazardous and non-hazardous waste generation across facilities
- Environment awareness programmes and training for staff on waste segregation and minimisation
- STP-treated water reuse being progressively implemented across facilities for HVAC, flushing, and landscaping applications

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

The Company has no operations/offices in/around ecologically sensitive areas. Hence, required environmental approval/ clearances are not applicable for the Company.

12. Details of environmental impact assessments of projects undertaken by the entity based on applicable laws, in the current financial year:

Environmental impact assessments of projects have not been undertaken for FY 2025-26

13. Is the entity compliant with the applicable environmental law / regulations / guidelines in India, such as the Water (Prevention and Control of Pollution) Act, Air (Prevention and Control of Pollution) Act, Environment protection act and rules thereunder. If not, provide details of all such non-compliances:

Yes. The Company is in compliance with applicable environment regulations.

Leadership Indicators

1. Water withdrawal, consumption and discharge in areas of water stress (in kilolitres). For each facility / plant located in areas of water stress, provide the following information:

For each facility / plant located in areas of water stress, provide the following information:

i. Name of the area: Not applicable

ii. Nature of operations: Not applicable

iii. Water withdrawal, consumption, and discharge in the following format: Not applicable, the entity does not have facilities/plants in areas of water stress.

2. Please provide details of total Scope 3 emissions and its intensity:

Scope 3 emissions were not measured in the current or previous financial year.

Parameter	Unit	FY 2025-26	FY 2024-25
Total Scope 3 emissions (Break-up of the GHG into CO ₂ , CH ₄ , N ₂ O, HFCs, PFCs, SF ₆ , NF ₃ , if available)	Tonne CO ₂ equivalent	-	-
Total Scope 3 emissions per rupee of turnover	Tonne CO ₂ equivalent	-	-
Total Scope 3 emission intensity per m ² floor space	Tonne CO ₂ equivalent	-	-

Note: Indicate if any independent assessment/ evaluation/assurance has been carried out by an external agency? (Y/N) If yes, name of the external agency.

No independent assessment/ evaluation/ assurance has been carried out by an external agency in FY 2025-26.

3. With respect to the ecologically sensitive areas reported at Question 10 of Essential Indicators above, provide details of significant direct and indirect impact of the entity on biodiversity in such areas along-with prevention and remediation activities.

Not applicable. The Company has no operations/offices in/around ecologically sensitive areas.

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

During FY 2025-26, the Company has undertaken the following initiatives to improve resource efficiency and reduce environmental impact:

- Progressive implementation of STP-treated water recycling for HVAC cooling, flushing, and landscaping, reducing freshwater withdrawal at hospital facilities
- Transition to LED lighting across hospital facilities, contributing to reduction in electricity consumption
- Biomedical waste routed to authorised CBWTFs, ensuring zero open disposal
- Monthly waste generation monitoring to track reduction trends across units

The Company is additionally evaluating solar power adoption through PPA/OPEX models and rainwater harvesting systems as part of its near-term sustainability roadmap. Quantified outcomes of the above initiatives are being tracked and will be disclosed in subsequent reporting periods as the monitoring framework matures.

5. Does the entity have a business continuity and disaster management plan? Give details in 100 words / web link.

Yes. As a healthcare services provider, Shalby Limited maintains robust business continuity and disaster management protocols across its hospital facilities. These include fire safety and emergency evacuation plans compliant with NBC norms, mass casualty and disaster response protocols, backup power systems (diesel generator sets) ensuring uninterrupted critical care, medical gas supply continuity measures, and IT system redundancy for patient data and clinical operations. The plans are periodically reviewed and staff are trained through mock drills. The Company's hospitals also adhere to applicable NABH standards, which incorporate patient safety and emergency preparedness requirements.

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

No such evaluation has been conducted during the reporting period.

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

No such evaluation has been conducted during the reporting period.

8. How many Green Credits have been generated or procured?

a. By the listed entity: Nil

b. By the top ten (in terms of value of purchases and sales, respectively) value chain partners : Nil

BRSR Section C: Principle 7

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

This Principle recognizes that businesses operate within specified national and international legislative and policy frameworks, which guide their growth and also provide for certain desirable restrictions and boundaries. The Principle recognizes the legitimacy of businesses to engage with governments for redressal of a grievance or for influencing public policy.

Essential Indicators

1a. Number of affiliations with trade and industry chambers / associations.

The Company had 5 affiliations for the period under review.

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

	Name of the trade and industry chambers/ associations	Reach of trade and industry chambers/ associations
1	The Associated Chambers of Commerce and Industry of India (ASSOCHAM)	National
2	Confederation of Indian Industry (CII)	National
3	Federation of Indian Chambers of Commerce and Industry (FICCI)	National
4	Gujarat Chamber of Commerce and Industry (GCCI)	State
5	Healthcare Federation of India (NatHealth)	National

2. Provide details of corrective action taken or underway on any issues related to anticompetitive conduct by the entity, based on adverse orders from regulatory authorities.

Name of authority	Brief of the case	Corrective action taken
Nil. The Company has not received any adverse order from regulatory authorities related to anti-competitive conduct in the current financial year, hence this question is not applicable.		

Leadership Indicators

1. Details of public policy positions advocated by the entity:

S. No.	Public policy advocated	Method resorted for advocacy	Whether information available in public domain (Yes/No)	Frequency of Review by Board (Annually/half yearly/quarterly/others – please specify)	Web link, if available
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We actively engage across various platforms, including industry associations and regulatory bodies, to articulate our perspective across range of public policies with specific emphasis on healthcare services, employment, new initiatives, skill development, education etc. Through these engagements, we advocate our position and seek alignment to new regulations.

BRSR Section C: Principle 8

Businesses should promote inclusive growth and equitable development

This Principle recognizes the challenges of social and economic development faced by India, and builds upon the national and local development agenda as articulated in government policies and priorities. This is particularly significant in zones affected by social disharmony and low human development. The Principle recognizes the value of the energy and enterprise of businesses and encourages them to innovate and contribute to the overall development of the country with a specific focus on disadvantaged, vulnerable and marginalized communities, as articulated in Section 135 of the Companies Act, 2013.

Essential Indicators

1. Details of Social Impact Assessments (SIA) of projects undertaken by the entity based on applicable laws, in the current financial year.

Name & brief details of project	SIA Notification No.	Date of Notification	Whether conducted by Independent External Agency (Yes/No)	Results communicated in public domain (Yes/No)	Relevant web link
Not applicable. The Company has not undertaken any Social Impact Assessments of projects for FY 2025-26					

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

S. No.	Name of Project for which R&R is ongoing	State	District	No. of Project Affected Families	% of Project Affected Families covered by R&R	Amounts paid to Project Affected Families in the FY
Not applicable						

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

The Company has established a formal policy that acknowledges its responsibility to receive, consider, and address feedback, complaints, and grievances raised by the communities with which it engages. The policy provides community members with a structured and transparent mechanism to communicate their concerns directly to the Company. It further defines procedures to ensure grievances are addressed in an equitable, timely, and responsive manner.

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

	FY 2025-26	FY 2024-25
Directly sourced from MSMEs small producers	NA	
Sourced directly from within the district and neighbouring districts		

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

Location	FY 2025-26	FY 2024-25
Rural	-	-
Semi-Urban	-	-
Urban	52%	55%
Metropolitan	48%	44%

Leadership Indicators

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

Name of Authority	Corrective Action Taken
Not applicable	

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

State	Aspirational District	Amount spent (In INR)
Not applicable, as the Company has not undertaken any CSR projects in designated aspirational districts as identified by government bodies		

3a. Do you have a preferential procurement policy where you give preference to purchase from suppliers comprising marginalized / vulnerable groups?

No, the Company does not currently have a formalised preferential procurement policy for MSME or small producers. However, the Company recognises the value of engaging with such suppliers as part of its responsible sourcing agenda and is committed to reviewing its procurement framework to incorporate MSME-preferential provisions in the subsequent reporting periods.

3b. From which marginalized / vulnerable groups do you procure?

Not Applicable

3c. What percentage of total procurement (by value) does it constitute?

Not Applicable

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

S. no.	Intellectual Property based on traditional knowledge	Owned/Acquired (yes/no)	Benefit Shared (yes/no)	Basis of calculating benefit share
Not applicable				

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

During the year there were no intellectual property related disputes.

Name of authority	Brief of the Case	Corrective action taken
-	-	-

6. Details of beneficiaries of CSR Projects:

CSR Project	No. of persons benefitted from CSR Projects	% of beneficiaries from vulnerable and marginalized groups
Providing Food items, Plantation, Medical & other social activities under Swachh Bharat Abhiyan	Unidentifiable	100%
Providing Food items, plantation medical & other social activities under Swachh Bharat Abhiyan	Unidentifiable	100%

BRSR Section C: Principle 9

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

This Principle is based on the fact that the basic aim of a business entity is to provide goods and services to its consumers that are safe to use, and in a manner that creates value for both. The Principle recognizes that consumers have the freedom of choice in the selection and usage of goods and services, and that the enterprises will strive to make available products that are safe, competitively priced, easy to use and safe to dispose of, for the benefit of their consumers.

Essential Indicators

1. Describe the mechanisms in place to receive and respond to consumer complaints and feedback.

The Company has established structured mechanisms to receive, monitor and respond to patient and customer complaints, feedback and service requests across its hospitals and operational units. The Company utilizes CRM and patient relationship management systems to facilitate communication and timely resolution of patient queries and grievances. Feedback is collected through multiple channels including patient feedback forms, helplines, emails, digital platforms, patient coordinators, floor managers and front-desk support teams.

All complaints and feedback received are recorded, monitored and reviewed by the concerned departments for appropriate corrective and preventive action. Critical issues, if any, are escalated to the relevant management teams for resolution within defined timelines.

The Company also analyses trends relating to patient experience, service quality and operational issues to improve healthcare delivery, patient satisfaction and overall service standards. Patients and attendants are informed regarding the status and resolution of their complaints wherever required.

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

	As a percentage to total turnover
Environmental and social parameters relevant to the product	-
Safe and responsible usage	-
Recycling and / or safe disposal	-

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

	FY 2025-26			FY 2024-25		
	Received during the year	Pending resolution at end of year	Remarks	Received during the year	Pending resolution at end of year	Remarks
Data privacy	Nil	Nil	NA	Nil	Nil	NA
Advertising	Nil	Nil	NA	Nil	Nil	NA
Cyber-security	Nil	Nil	NA	Nil	Nil	NA
Delivery of essential services	Nil	Nil	NA	Nil	Nil	NA
Restrictive trade practice	Nil	Nil	NA	Nil	Nil	NA
Unfair trade practices	Nil	Nil	NA	Nil	Nil	NA
Other	Nil	Nil	NA	Nil	Nil	NA

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

	Number	Reasons for recall
Voluntary recalls	Nil	NA
Forced recalls	Nil	NA

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

Yes, the Company has approved policies and frameworks relating to cyber security and data privacy, including Cyber Security Policy, Information Security Policy and Social Media Security Policy, to ensure adequate safeguards against cyber risks, unauthorized access and data leakage. The policies are periodically reviewed and updated in line with regulatory requirements and industry best practices. The policies are internal in nature and are available to relevant stakeholders within the organization.

Framework / Policy on Cyber Security and Risks Related to Data Privacy:

The Company has implemented a consent management framework on its website (www.shalby.org) in compliance with the Digital Personal Data Protection Act, 2023 (DPDP Act) and the rules framed thereunder. The framework governs the collection, processing, and storage of personal data of website visitors, patients, and other data principals interacting with the Company's digital platforms.

Consent Management Architecture

The Company's website deploys a structured cookie and data consent mechanism that categorises data processing activities into the following purpose-specific layers, each anchored to a defined legal basis under the DPDP Act:

Category	Purpose	Legal Basis (DPDP Act)	User Control
Strictly Necessary	Secure login, session management, page navigation — essential platform functions	Legitimate Use — Section 7	Always Active; cannot be disabled
Functional	Remembering user preferences (language, display settings) for personalised experience	Consent — Section 6	User-controlled (opt-in/opt-out)
Analytics & Performance	Understanding platform usage patterns to improve performance and user experience	Consent — Section 6	User-controlled (opt-in/opt-out)
Communications	Sending compliance updates, regulatory news, and product information	Consent — Section 6	User-controlled (opt-in/opt-out)

Multilingual Accessibility

In keeping with the inclusive access principles of the DPDP Act and the diverse patient base served by the Company, the consent interface is made available in 23 languages, including Hindi, Gujarati, Marathi, Bengali, Tamil, Telugu, Kannada, Malayalam, Punjabi, Odia, Assamese, Urdu, and other Scheduled languages, enabling data principals to make informed consent decisions in their preferred language.

Age Verification

In compliance with Section 9 of the DPDP Act, which prohibits the processing of personal data of children without verifiable parental consent, the consent mechanism requires users to confirm they are 18 years of age or older prior to exercising consent preferences. A dedicated pathway is provided for users who are under 18, ensuring appropriate safeguards are applied.

Data Principal Rights

The consent interface provides data principals with the ability to accept all non-essential data processing, reject all non-essential data processing, or customise their preferences by category. Data principals may withdraw or modify their consent at any time through the consent management interface. The Company's Privacy Policy, Terms & Conditions, and DPDP Act disclosure are accessible directly from the consent interface.

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

The Company has not received any material complaints or reports relating to advertising practices, cyber security incidents or customer data privacy breaches during the reporting period.

Further, there were no instances of product recalls or disruption in delivery of essential services on account of safety or quality concerns. No penalties or regulatory actions were imposed on the Company by any regulatory authority relating to the safety of products or services during the reporting period.

The Company continues to strengthen its internal processes, patient service mechanisms, information security practices and regulatory compliance framework to ensure quality healthcare delivery and protection of patient information. In compliance of the Digital Personal Data Protection Act, 2023, the Company has rolled out consent management framework in accordance with the Company's Privacy policies with options to decline all cookies, accept necessary cookies, and others

7. Provide the following information relating to data breaches:

- a. Number of instances of data breaches – Nil
- b. Percentage of data breaches involving personally identifiable information of customers - Nil
- c. Impact, if any, of the data breaches - NA

Leadership Indicators

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

www.shalby.org

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

NA

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

NA

4. Does the entity display product information on the product over and above what is mandated as per local laws? If yes, provide details in brief. Did your entity carry out any survey with regard to consumer satisfaction relating to the major products / services of the entity, significant locations of operation of the entity or the entity as a whole?

The Company provides relevant information relating to its healthcare services, treatment procedures and patient care practices through hospital counsellors, patient coordinators, brochures, digital platforms and other communication channels, wherever considered necessary, in addition to disclosures mandated under applicable laws and regulations. The Company has an established mechanism for obtaining patient feedback and monitoring patient satisfaction across its hospitals and OPDs in India and abroad. Feedback is collected from patients and attendants through patient coordinators, floor managers, feedback forms and other digital engagement channels to continuously improve systems, processes and service quality. Patient complaints and grievances are addressed on a regular basis at each unit of Shalby Limited.