Healthway Medical

Empowering Healthier Lives

Healthway Medical Corporation Limited

(Incorporated in the Republic of Singapore)

(Company Registration Number: 200708625C)

Sustainability Report 2018

Contents

ABOUT THIS REPORT 3
BOARD STATEMENT 4
CORPORATE PROFILE 5
GROUP STRUCTURE 6
SUPPLY CHAIN MANAGEMENT 7
COMMUNITY INVOLVEMENT 7
MEMBERSHIP OF ASSOCIATIONS AND CERTIFICATES 7
GOVERNANCE STRUCTURE AND SUSTAINABILITY 8
WHISTLE-BLOWING POLICY 9
INTERESTED PERSON TRANSACTIONS 9
SUSTAINABILITY APPROACH 9
STAKEHOLDER ENGAGEMENT 10
MATERIALITY 11
ANTI-CORRUPTION 12
EFFLUENTS AND WASTE (MEDICAL WASTE) 14
TRAINING AND EDUCATION 15
DIVERSITY AND EQUAL OPPORTUNITY 16
CUSTOMER PRIVACY 18
GRI CONTENT INDEX 20

ABOUT THIS REPORT

Healthway Medical Corporation Limited ("HMC" or the "Company" and together with its subsidiaries, the "Group" or "we" or "us" or "our"), continues to commit our sustainability efforts through our second sustainability report (the "report" or "SR"), which has been prepared in compliance with Rules 711A and 711B of the Singapore Exchange Securities Trading Limited ("SGX-ST") Listing Manual Section B and in accordance with the Global Reporting Initiative ("GRI") Standards (2016) – Core Option.

This report covers data and information from 1 January 2018 to 31 December 2018 ("FY2018") across 2 divisions in Singapore, Primary Healthcare Division and Specialist Healthcare Division. In our second report, we continue to discuss and explore our Group's achievements and performance towards Environmental, Social and Governance ("ESG") issues.

We have adopted the GRI reporting framework for its robust regime and we have looked into using the principles of stakeholder inclusiveness, sustainability context, materiality and completeness to put together a comprehensive report. For its quality, we have applied the GRI principles of accuracy, balance, clarity, comparability, reliability and timeliness. Please refer to GRI Content Index, which summarises information in our report.

We have not sought external assurance for FY2018.

Report Contact and Feedback

We welcome your feedback and for any queries or suggestions in relation to this Sustainability Report, you could reach us at http://www.healthwaymedical.com/contact/.

BOARD STATEMENT

The Board of HMC is pleased to present our second sustainability report covering FY2018. In our second sustainability report, we would be detailing the challenges, material topics and material ESG factors which management has identified as being important to our stakeholders, these topics and factors were then subsequently reviewed by the Board, taking into consideration its strategy formulation process. The Board continues to maintain oversight on the management and monitoring of these factors as part of its sustainability efforts.

We would like to thank our stakeholders for their continued support and trust as we continue to progress in our sustainability journey. As we remain committed to improving the economic, social and environmental well-being of the communities we operate in, the Board and senior management would like to reiterate our dedication to the Company's efforts in building a sustainable business.

CORPORATE PROFILE

Our Vision

A Healthier Asia

Our Mission

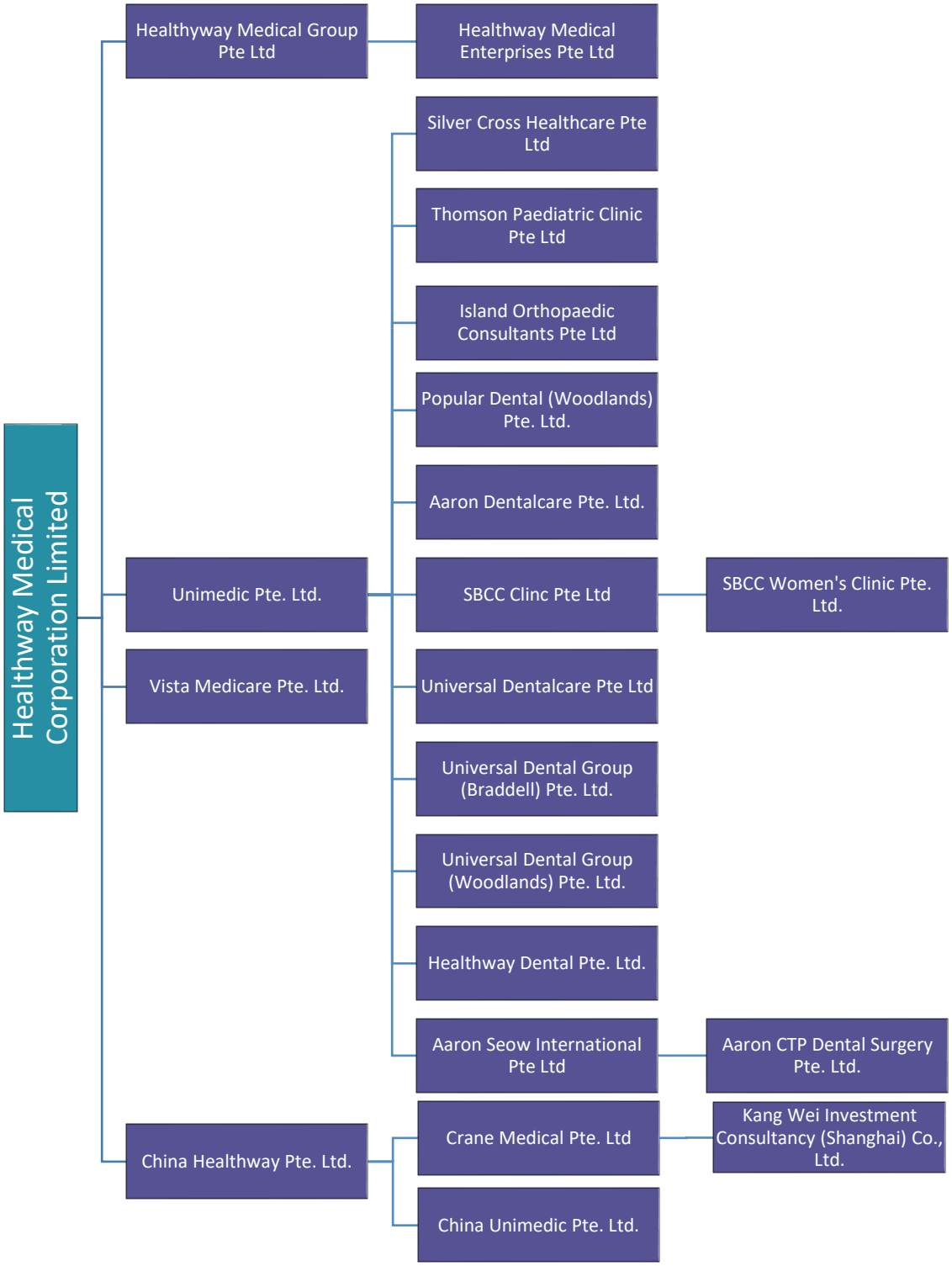
To be Asia's leading healthcare provider that is trusted, service-oriented and technology empowered

Company Profile

The Group started in 1990 and have maintained our commitment to our mission till this day. The Group currently own, operate and manage ninety-seven (97) clinics and medical centres. These facilities are located in most parts of Singapore, including many major private hospitals. The types of services we provide are indicated in the table below.

Primary Healthcare Division: Sixty-nine (69) General Practitioner (GP) and Dental Clinics across the island to provide medical and dental services below to corporate clientele and private patients.
Family Medicine
Health Screening
Dental
Japanese Medical and Dental Centre
Specialists Division: Thirty (30) specialists in nine (9) disciplines to provide a range of comprehensive specialists disciplines with specific expertise to attend to our patients with their best interests in mind.
Baby and Child
Child Development
Women's Health
Orthopaedics
Heart (Cardiology)
Ear, Nose & Throat (Otorhinolaryngology)
Eye and Vision (Ophthalmology)
Colorectal and General Surgery
Digestive Health (Gastroenterology and Hepatology)
Psychiatry
Allied Healthcare: Our allied healthcare providers offers assessments and therapeutic intervention through psychology and physiotherapy services for adults and children to complement our specialists.
Psychology
Physiotherapy
Corporate Healthcare Management: Our specialised team provides efficient assistance in aiding corporate clients to manage healthcare benefits and provide customised wellness services according to their needs and requirements.

GROUP STRUCTURE*



*Group Structure as at 31 December 2018

SUPPLY CHAIN MANAGEMENT

Integrating a sustainable supply chain into our operations involves engaging responsible partners and this continues to be one of our targeted area of improvement. Through streamlining and improving our supply chain, we reduced our suppliers from 170 to an estimated 130 core suppliers from the previous year to provide us with key clinical materials such as medical supplies, medical equipment such as medical blood pressure monitor machine and consumables such as medical gloves, etc.

We periodically evaluate our suppliers to ensure that their performance align with internal criteria established. Evaluation criteria include service excellence, consistency and timeliness of delivery. While we continue to ensure that all suppliers and vendors are registered with relevant local regulatory body for the sales of health products, we are also pleased to share that some of our suppliers are recognised with certifications and accreditation such as Good Distribution Practices Certifications issued by the Health Sciences Authority as well as College of American Pathologists (CAP) accreditation obtained by one of our supplier providing laboratory services.

COMMUNITY INVOLVEMENT

During the FY 2018, there were no community involvement initiatives conducted by the Group. Nevertheless, plans for community involvement in 2019 have already begun, health talks to grassroots and visits to hospital to offer free health screening services are some of the initiatives where the planning processes are underway.

MEMBERSHIP OF ASSOCIATIONS AND CERTIFICATES

48 Clinics with both Medisave and CHAS accreditations and 1 Clinic with Medisave Accreditation

Apart from our clinics being CHAS and Medisave accredited, to provide for more extensive services and greater convenience to our patients, we consistently strive to obtain more accreditations that are beneficial. Some of our clinics has Yellow Fever Vaccination accreditation which allows our patients to be able to access compulsory vaccinations should they decide to travel to countries which require yellow fever vaccination. Additionally, we have also obtained MBS@GOV accreditation to utilise the billing system to submit the medical bills of civil servants, pensioners and their dependants to the government for our patients to enjoy the convenience of not having to submit claims manually. Lastly, some of our clinics also obtained Public Health Preparedness Clinic (PHPC), an accreditation which proves our ability to serve the primary healthcare of Singaporeans in times of national need and displaying the ability to provide response to public health emergencies.

GOVERNANCE STRUCTURE AND SUSTAINABILITY

We maintain committed to good corporate governance and have ensured that policies and procedures are in place to safeguard against fraud and protect the interests of our stakeholders.

As the Board Composition remains unchanged as at 31 December 2018, the Board continues to maintain an effective role in setting goals, reviewing and advising on overall strategies and directions. The board continues to oversee the effectiveness of the management and assumes responsibilities for overall corporate governance of our Group to ensure our Group's strategies are in the best interests of the Company and its stakeholders. Details of our Board members and respective committees during FY2018 are as follows:

Board of Directors	
Lee Luen-Wai, John	Non-Independent Non-Executive Chairman (Chairman of the Board until 26 April 2019)
Dr Stephen Riady	Non-Executive Non-Independent Director
Anand Kumar	Non-Executive Non-Independent Director
Chen Yeow Sin	Lead Independent Director
Sonny Yuen Chee Choong	Independent Non-Executive Director (Director of the Company until 26 April 2019)
Lin Weiwen, Moses	Independent Non-Executive Director
Audit and Risk Committee	
Chen Yeow Sin (Chairman)	
Sonny Yuen Chee Choong (Member until 26 April 2019)	
Lin Weiwen, Moses	
Nominating Committee	
Chen Yeow Sin (Chairman)	
Sonny Yuen Chee Choong (Member until 26 April 2019)	
Lin Weiwen, Moses	
Remuneration Committee	
Lin Weiwen, Moses (Chairman)	
Chen Yeow Sin	
Sonny Yuen Chee Choong (Member until 26 April 2019)	

GOVERNANCE STRUCTURE AND SUSTAINABILITY (CONT'D)

Our Group has continued to fine tune our policies and practices to safeguard the interests of our stakeholders and some of these policies are discussed in detail below.

WHISTLE-BLOWING POLICY

Our Group continues to adhere to the policies and procedures established on whistle-blowing. Through the Annual Report, we continue to provide information about our whistle-blowing channel. To allow an independent investigation and appropriate follow-up on any concerns or possible improper financial reporting raised, the reporting channel is directly addressed to the Mr Chen Yeow Sin, the Audit and Risk Committee ("ARC") Chairman. As such, reports of suspected fraud, corruption, dishonest practices or other similar matters can be lodged via email to Mr Chen Yeow Sin, the ARC Chairman at whistleblow@healthwaymedical.com.

INTERESTED PERSON TRANSACTIONS

We continue to utilise the Interested Person Policy, which governs the procedures for identification, review and approval of transactions with interested persons. All Interested Person Transactions ("IPT") are reviewed periodically to ensure the transactions are carried out on an arm's length basis and on normal commercial terms and all reportable transactions are announced on SGX website and through the annual report accordingly.

SUSTAINABILITY APPROACH

Our Group entered the next phase of transformation and announced our new Company's vision and tagline of "Empowering Healthier Lives", placing our patients at the core of all we do. We also assimilated sustainability practices to reduce our carbon footprints in the midst of the transformation while we aim to supply better quality of healthcare and accessibility to our patients with improvements to operation efficacy and refurbishment to our clinics. One of the initiative is to utilise air-conditioners which are classified as five ticks under the Mandatory Energy Labelling Scheme (MELS), representing the most energy efficient band of air-conditioners.

Complementing the utilisation of energy efficient air-conditioner, we are also using LED light bulbs which are more energy efficient than traditional lightings. These measures would allow us to enjoy costs savings due to reduced electricity costs as well as become a more environmentally friendly organisation.

STAKEHOLDER ENGAGEMENT

We have continued to identify our key stakeholders and aligned our expectations and goals to our sustainability approach as below.

Stakeholder Engagements

Patients	Suppliers	Employees
• **Methods of Engagement:** Direct feedback during consultations; Public Forums; Website feedback form • **Stakeholder Expectations and goal alignment:** We would continue to put our emphasis on our patients, we aim to ensure that they are able to obtain better healthcare services with greater ease.	• **Methods of Engagement:** Periodic supplier assessments; Feedback through meetings, emails and phone calls • **Stakeholder Expectations and goal alignment:** To maintain service excellence and transfer value from our suppliers to our patients, we would constantly communicate with our suppliers to ensure quality and efficiency.	• **Methods of Engagement:** Induction and orientation programmes; Training; Internal memos and emails • **Stakeholder Expectations and goal alignment:** To maintain a safe, fair and equal working environment while promoting personal development.

Investors	Government and Regulators
• **Methods of Engagement:** Strategic meetings to discuss on long term growth and innovation strategy; Annual general meetings; Extraordinary general meetings • **Stakeholder Expectations and goal alignment:** To continue to obtain efficiency thus creating long term value and provide a blueprint of sustainable profit growth while maintaining our balanced capital allocation.	• **Methods of Engagement:** Discussions with government agencies and departments • **Stakeholder Expectations and goal alignment:** To continue to engage governments and policy makers through our public policy teams, at agency and legislative levels to allow a better understanding of government initiatives and plans and achieve national health objectives.

MATERIALITY

In our second SR, we will explore the progress and goals set in the first SR based on the factors identified previously after engaging with our stakeholders.

1. Anti- Corruption



2. Medical Waste and Effluents



3. Training and Education



4. Diversity and equal opportunity



5. Customer Privacy

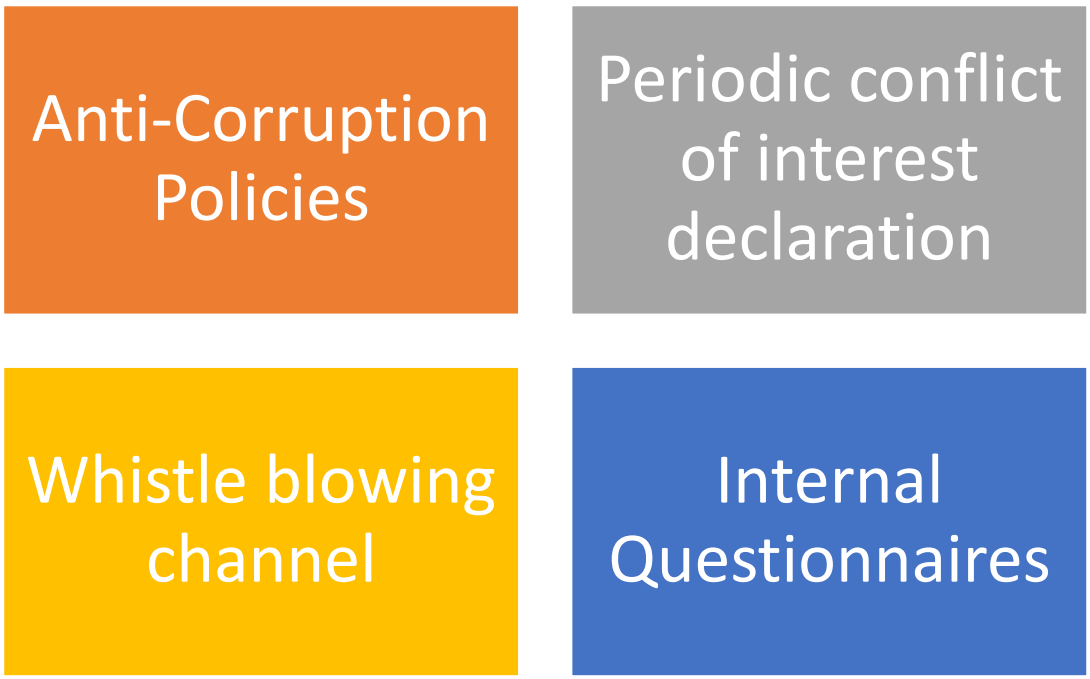


ANTI-CORRUPTION

Anti-corruption remains a key component of our Group and we continue to maintain a culture of keeping out corruption and dishonest behaviour. To assist in creating an anti-corruption culture, anti-corruption policies such as our conflict of interest declaration policy and corporate gifts policy are made accessible and communicated to all our staff to educate and inform our staff on the importance and necessity of declaration of interests as well as the dos and don'ts on corporate gifts. The summary of accessibility of the policies are indicated as below.

Year	2017		2018	
Number and Percentage	Number	Percentage	Number	Percentage
Employees which anti-corruption policies and procedures have been made available to	532	100%	550	100%
Board and Management which anti-corruption policies and procedures have been made available to	10	100%	10	100%

The core of our anti-corruption culture could be summarised as a four segmented categories. Of the four segmented categories, we have established anti-corruption policies, periodic conflict of interest declaration and whistle blowing channel. For internal questionnaires, it would be a set of questionnaire about anti-corruption established and communicated to our staff to provide training and ensure understanding about anti-corruption. We are still working towards the goals of implementing the internal questionnaires.



For the year, we have continued to carry on our practices for whistle blowing channel, periodic conflict of interest declaration and the communication of anti-corruption policies. For internal questionnaires, we are still in progress to implement our internal questionnaires throughout our group and we will be looking forward to implementing internal questionnaires to complement current anti-corruption practices in place. With the anti-corruption practices and culture established by our Group, we are pleased to note that we did not have any incident of corruption that was found to be substantiated for FY 2018.

Progress update and goals for subsequent reporting:

We will continue to cultivate a culture which forbids corruption and work towards ensuring zero confirmed incidents of corruption for the upcoming year.

MEDICAL WASTE AND EFFLUENTS

The different types of medical waste handled by the Group remains largely unchanged and details of the handling methods can be observed in our first sustainability report, a summary of the types of medical waste handled by the Group can be seen as below.

Type of pharmaceutical waste	
General Pharmaceutical Waste	**Special Pharmaceutical Waste**
- Pharmaceutical products such as vitamins, over the counter medications, and most prescription-only medications such as anti-hypertensive, anti-diabetics etc.	- Anti-infective, vaccines and other immunological products
	- Antineoplastic drugs
	- Controlled drugs
	- Pharmaceutical products and medical devices containing heavy metals

As we continue to commit our efforts in ensuring that we handle the medical waste in a safe and sustainable manner, we continuously assess our vendors for external medical waste handling services on an ad-hoc basis to ensure that the service provided are in line with our expectations. For our internal practices, we ensure that our staff are trained and are qualified to identify the different types of pharmaceutical waste to facilitate the appropriate disposal to be in compliance with the relevant medical regulations.

In FY2018, we have managed to obtain more information with regard to the medical waste management, including quantitative costs of medical waste disposed in FY2018 being $22,505 and the amount of waste disposed being approximately 5800 litres.

Target for subsequent reporting:

Moving forward, we will continue to monitor the medical waste disposal and continue to look for opportunity to integrate more sustainable measures. We aim to achieve more efficient disposal of medical waste while ensuring that our vendors continue to perform and deliver service that is in line with our expectations and criteria.

TRAINING AND EDUCATION

As we continue to progress as an organisation, we continue to deploy our efforts in ensuring that training and education continue to play an important role. Training costs for our employees from January 2018 to December 2018 amounted to $38,342 with more than 804 hours of training recorded through the different type of courses our staff enrolled. To improve their efficiency, some of our staff took part in analytic courses in their relevant field whilst technical trainings and knowledge sharing conventions and exhibitions continue to be the bulk of the training and education of our employees.

We also began on utilising external initiatives such as skills development fund to complement our human resource policy benefits and provide addition subsidy. We consistently encourage our staff to continue to develop their technical skills and gather insights from our fellow professionals through participation in external trainings and courses. In-house trainings and on-job trainings are also a common sight due to the culture established by the Group as peers and fellow professional often share guidance and tips on their jobs with each other.

Being in line with the goals set previously, we maintained average staff training of more than 8 hours annually and continued to ensure that all of our qualified staff and employees undergo periodic performance review. For statistics on FY2017 and FY2018 staff training and education, please see the tables below.

Average staff training hours

By gender	FY2017	FY2018
	(In hours) per employee	
Male	21	9
Female	15	15
By employee category		
Management and above	4	8
Executives	19	10
General staff	8	14

Percentage of total employees receiving periodic performance review

By gender	FY2017	FY2018
	Percentage of total employees	
Male	20%	23.5%
Female	80%	76.5%
By employee category		
Management and above	1%	6%
Executives	49%	29%
General staff	50%	65%

Target for subsequent reporting:

The Group will continue to set aside resources for our staff with regard to training and development while providing support and communication and consistently conducting periodic reviews in accordance to our human resource policies in a timely manner.

DIVERSITY AND EQUAL OPPORTUNITY

As we continue to provide our employees with progression opportunities in a fair and equal manner, we continue to oversee the various roles and scopes of our staff to make necessary amendments to their job coverage according to the changes and progression of both the society and the Group.

The Tripartite Alliance for Fair & Progressive Employment Practices ("TAFEP") continue to part of our guidelines in our recruitment and selection process while the code of conduct assists to promote a culture to prevent discrimination in all areas. Efforts are continuously put in place to ensure that all employees are given a fair opportunity in their jobs and measures such as periodic review are also channels of two-way communication, taking inputs from both reviewers and reviewees, reflecting the stance that the Group holds on equal opportunity.

During FY2018, there were no incidents of discrimination reported within our Group. Statistics for FY2017 and FY2018 regarding diversity and equal opportunity are indicated below.

Proportion of salary distribution by gender

Year	FY2017		FY2018	
Gender	Male	Female	Male	Female
Management and above	100%	0%	100%	0%
Executives	66.7%	33.3%	66.7%	33.3%
General staff	16.7%	83.3%	11.1%	88.9%

Age group of employees and gender population in our Group

Year	FY2017	FY2018	FY2017	FY2018	FY2017	FY2018
Age	<30 years old		30 – 50 years old		>50 years old	
By employee category	144 people	170 people	266 people	265 people	122 people	115 people
Management and above	0.0%	0.0%	0.0%	0.5%	1%	0.2%
Executives	10%	6.5%	30%	21.6%	8%	6.2%
General staff	17%	24.5%	20%	26.0%	14%	14.5%
By gender						
Percentage of Male	3%	4.2%	13%	16.2%	4%	3.1%
Percentage of Female	24%	26.7%	37.0%	32.0%	19%	17.8%

Proportion of different races in our Group

Year	FY2017	FY2018	FY2017	FY2018	FY2017	FY2018	FY2017	FY2018
Race	Chinese		Malay		Indian		Others	
By employee category								
Management and above	0.8%	0.5%	0.0%	0.0%	0.2%	0.4%	0.2%	0.0%
Executives	38.1%	28.7%	2.4%	0.7%	2.6%	2.6%	5.1%	2.2%
General staff	29.9%	34.7%	8.5%	10.4%	3.4%	7.8%	8.8%	12.0%
By gender								
Male	16.7%	18.5%	0.2%	0.5%	1.7%	2.7%	1.5%	2.0%
Female	52.1%	45.5%	10.7%	10.5%	4.5%	8.4%	12.6%	12.2%

DIVERSITY AND EQUAL OPPORTUNITY (CONT'D)

Target for subsequent reporting:

The group will target to maintain our track record of zero incidents of reported discrimination and continue to maintain our culture of promoting diversity and equal opportunity.

CUSTOMER PRIVACY

With the advancement of technology, the information obtained and source of information continue to grow for our Group. Emphasis on maintaining our patients' and clients' privacy continue to be one of the key components of the Group. Apart from complying with Personal Data Protection Act ("PDPA") and appointment of a PDPA officer, we have also established response time frames across our Group. With a PDPA officer appointed, we would update the contact details onto our website for easy communication with the address of dpo@healthwaymedical.com.

Departments in our group have access to various documents and information, some of which contains personnel information. The table below illustrates the documents and sources of information.

Documents and/or Source of information	
Clinic management system ("CMS")	Patient refund forms
Website and web forms	Vendor & petty cash claim system
Emails and fax	Sales channels
Invoices	Medical chits

To ensure confidentiality and maintain our customer privacy, protection mechanism and security controls are established within our Group amongst our various department. Information in clinic management system are only made accessible in clinics. We also ensure that patient information is not disclosed over phone and any query of information can only be made when the patient is physically present to provide verification. Internally, our practices only allow access to patient details by relevant department and all information of our corporate clients are controlled by our sales personnel, softcopy information including data in IT systems are made accessible to the specific personnel who has a user login. Softcopy in transit is password protected and hardcopy information are filed and locked.

Apart from that, our IT department have also established controls to limit access and extraction of information governed by our software and IT system. Access controls are role-based and only granted on a need-be basis and authorised approvals are required for data extraction requests. Detailed logging mechanism in generating and exporting reports in CMS are also a feature to provide an audit trail should we require it. For hardware and in-built infrastructure, the Group also included limitations to accessing information and established safeguards with some of the details as listed below:

PC/Laptop Security
(1) No administrator access for desktop
(2) Bitlocker encryption for laptops
(3) Endpoint Security (Symantec Endpoint)
Network/Infrastructure/Servers
(1) Perimeter Firewalls (UTM) and Security Groups
(2) Web Application Firewall
(3) Geolocation blocking
(4) IP Whitelisting (CMS)
(5) VPN for external access (CMS)
(6) Intelligent Threat Detection (AWS Guard Duty)

(7) Controlled Ports/Only needed ports are open
(8) Enforced 2FA for console access
(9) No direct remote access to servers/Jump-host setup
(10) Database and other critical servers are in a Private Subnet (Not accessible via internet)
(11) Data encryption at rest and in transit including backups
(12) Servers/Database are shutdown after operating hours

There were two incidents of customer complaints relating to customer privacy matter noted by our Group during the year. One of such incidents was a customer complaint to the Personal Data Protection Commission, an external committee enforcing the PDPA. No further action was taken by the Personal Data Protection Commission. The second complaint was a complaint to Ministry of Health ("MOH"). Further investigations were conducted by MOH and there were no issues noted with our handling methods and therefore no further actions were taken as well.

Target for subsequent reporting:

Privacy of our patients and customers will continue to be a focus for our Group and we will strive towards the target of zero complaints and incidents with regard to customer privacy by strengthening our internal control efforts and consistently keeping ourselves updated with the latest regulatory changes to ensure the Group's procedures are up to date.

GRI CONTENT INDEX

GRI Standard	Disclosure	Page Reference and Reasons for Omission, if applicable
GENERAL DISCLOSURE		
GRI 102: General Disclosures 2016	**Organisational Profile**	
	102-1 Name of the organisation	Pg 1
	102-2 Activities, brands, products, and services	Pg 5-6
	102-3 Location of headquarters	Pg 5-6
	102-4 Location of operations	Pg 5-6
	102-5 Ownership and legal form	Pg 1
	102-6 Markets served	Pg 5-6
	102-7 Scale of the organisation	Pg 5-6
	102-8 Information on employees and other workers	Pg 16
	102-9 Supply chain	Pg 7
	102-10 Significant changes to the organisation and its supply chain	Pg 7
	102-11 Precautionary principle or approach	Pg 9
	102-12 External initiatives	Pg 7
	102-13 Membership of associations	Pg 7
	Strategy	
	102-14 Statement from senior decision maker	Pg 4
	Ethics and Integrity	
	102-16 Values, principles, standards, and norms of behaviour	Pg 5
	Governance	
	102-18 Governance structure	Pg 8
	Stakeholder Engagement	
	102-40 List of stakeholder groups	Pg 10
	102-41 Collective bargaining agreements	Nil
	102-42 Identifying and selecting stakeholders	Pg 10
	102-43 Approach to stakeholder engagement	Pg 10
	102-44 Key topics and concerns raised	Pg 11
	Reporting Practice	
	102-45 Entities included in the consolidated financial statements	Annual Report
	102-46 Defining report content and topic boundaries	Pg 3
	102-47 List of material topics	Pg 12
	102-48 Restatements of information	FY2017 relevant employee information included
	102-49 Changes in reporting	Nil
	102-50 Reporting period	Pg 3
	102-51 Date of most recent report	31 December 2018
	102-52 Reporting cycle	Pg 3
	102-53 Contact point for questions regarding the report	Pg 3
	102-54 Claims of reporting in accordance with the GRI Standards	Pg 3
	102-55 GRI content index	Pg 20-21
	102-56 External assurance	Pg 3

GRI Standard	Disclosure	Page Reference and Reasons for Omission, if applicable
MATERIAL TOPICS		
Anti-corruption		
GRI 103: Management Approach 2016	103-1 Explanation of the material topic and its boundaries	Pg 12-13
	103-2 The management approach and its components	Pg 12-13
	103-3 Evaluation of the management approach	Pg 12-13
GRI 205: Anti-corruption	205-1 Operations assessed for risks related to corruption	Pg 12-13
	205-2 Communication and training about anti-corruption policies and procedures	Pg 12-13
	205-3 Confirmed incidents of corruption and actions taken	Pg 12-13
Effluents and waste		
GRI 103: Management Approach 2016	103-1 Explanation of the material topic and its boundaries	Pg 14
	103-2 The management approach and its components	Pg 14
	103-3 Evaluation of the management approach	Pg 14
GRI 306: Effluents and waste	306-1 Water discharge by quality and destination	Not applicable
	306-2 Waste by type and disposal method	Pg 14
	306-3 Significant spills	Not applicable
	306-4 Transport of hazardous waste	Pg 14
	306-5 Water bodies affected by water discharges and/or runoff	Pg 14
Training and Education		
GRI 103: Management Approach 2016	103-1 Explanation of the material topic and its boundaries	Pg 15
	103-2 The management approach and its components	Pg 15
	103-3 Evaluation of the management approach	Pg 15
GRI 404: Training and Education	404-1 Average hour of training per year per employee	Pg 15
	404-2 Programs for upgrading employee skills and transition assistance programs	Pg 15
	404-3 Percentage of employees receiving regular performance and career development reviews	Pg 15
Diversity and Equal Opportunity		
GRI 103: Management Approach 2016	103-1 Explanation of the material topic and its boundaries	Pg 16-17
	103-2 The management approach and its components	Pg 16-17
	103-3 Evaluation of the management approach	Pg 16-17
GRI 405: Diversity and Equal Opportunity	405-1 Diversity of governance bodies and employees	Pg 16-17
	405-2 Ration of basic salary and remuneration of woman to man	Pg 16-17
Customer Privacy		
GRI 103: Management Approach 2016	103-1 Explanation of the material topic and its boundaries	Pg 18-19
	103-2 The management approach and its components	Pg 18-19
	103-3 Evaluation of the management approach	Pg 18-19
GRI 418: Customer Privacy	418-1 Substantiated complaints concerning breaches of customer privacy and losses of customer data	Pg 18-19