

# Sustainability

# SUSTAINABILITY REPORT

## SCOPE OF REPORTING

In order to focus our efforts and strengthen our benchmarks for economic, environmental and social sustainability, we are maintaining the scope as that of financial year 2017, i.e. our operations in

the four main home markets, which are Malaysia, Singapore, Turkey and India. However, for the 2018 report, we have chosen specific case studies to highlight our sustainability initiatives and their impact. The reporting period captured

with regard to our sustainability performance is from 1 January 2018 to 31 December 2018.

### MALAYSIA

- |                                  |                                 |                                      |
|----------------------------------|---------------------------------|--------------------------------------|
| 1. Pantai Hospital Sungai Petani | 6. Pantai Hospital Kuala Lumpur | 11. Gleneagles Kuala Lumpur          |
| 2. Pantai Hospital Penang        | 7. Pantai Hospital Cheras       | 12. Gleneagles Penang                |
| 3. Pantai Hospital Ipoh          | 8. Pantai Hospital Ampang       | 13. Gleneagles Medini                |
| 4. Pantai Hospital Manjung       | 9. Pantai Hospital Batu Pahat   | 14. Gleneagles Kota Kinabalu         |
| 5. Pantai Hospital Klang         | 10. Pantai Hospital Ayer Keroh  | 15. International Medical University |

### SINGAPORE

- |                                    |                             |
|------------------------------------|-----------------------------|
| 1. Mount Elizabeth Novena Hospital | 3. Mount Elizabeth Hospital |
| 2. Parkway East Hospital           | 4. Gleneagles Hospital      |

### TURKEY

- |                        |                            |                        |
|------------------------|----------------------------|------------------------|
| 1. Acibadem Adana      | 7. Acibadem Bursa          | 13. Acibadem Kocaeli   |
| 2. Acibadem Altunizade | 8. Acibadem Eskisehir      | 14. Acibadem Kozyatagi |
| 3. Acibadem Ankara     | 9. Acibadem Fulya          | 15. Acibadem Maslak    |
| 4. Acibadem Atakent    | 10. Acibadem International | 16. Acibadem Taksim    |
| 5. Acibadem Bakirkoy   | 11. Acibadem Kadikoy       |                        |
| 6. Acibadem Bodrum     | 12. Acibadem Kayseri       |                        |

### INDIA

- |  |   |                                      |
|--|---|--------------------------------------|
| 1. BGS Gleneagles Global Hospitals Kengeri (Bengaluru)   | 4. Gleneagles Global Hospitals Parel (Mumbai)             | 7. Continental Hospitals (Hyderabad) |
| 2. Gleneagles Global Hospital, Richmond Road (Bengaluru) | 5. Aware Gleneagles Global Hospitals LB Nagar (Hyderabad) |                                      |
| 3. Gleneagles Global Health City Perumbakkam (Chennai)   | 6. Gleneagles Global Hospitals Lakdi-Ka-Pul (Hyderabad)   |                                      |

Sustainability is becoming increasingly integral to long-term business success – on top of strong financial performance, different stakeholder groups now expect organisations to adopt responsible practices throughout the entire

business operations. In order to achieve better integration, connectivity and completeness in our reporting, we have opted to include some sustainability content in other sections besides the Sustainability Report, as part of the

principles of Integrated Reporting. The content index below serves as guide to help readers access sustainability information within this Annual Report.

CONTENTS OF THE SUSTAINABILITY STATEMENT	CAN BE FOUND IN	PAGE NUMBER
Material sustainability matters <ul style="list-style-type: none"> <li>• How they are identified</li> <li>• Why they are important to IHH</li> </ul>	Stakeholder Engagement	30
	Material Matters	34
The scope of the Sustainability Statement and basis for the scope	Sustainability Report	56
Material sustainability matters <ul style="list-style-type: none"> <li>• Policies to manage these sustainability matters</li> <li>• Measures and actions taken to deal with these sustainability matters which demonstrate how IHH has performed in managing these sustainability matters</li> </ul>	Our Patients	58
	Our People	62
	Our Organisation	67
	Our Environment	72
	Our Community	76
The governance structure in place to manage economic, environmental and social risks and opportunities	Sustainability Governance Report	134

# OUR PATIENTS



**We promote a patient-centred culture, prioritising quality of care and patient satisfaction in order to have an impact on the well-being of our patients and their families.**

## QUALITY OF CARE

Our efforts to improve the quality of care to our patients involve integrating practices that are patient-centred, including the improvement of time spent and communication with patients.

All of our hospitals strongly believe that clinical excellence and the creation of

value for our patients are best achieved through having a rigorous system of measurement, and by using this information to make continuous improvements. For instance, in 2007, the Parkway Pantai hospitals in Malaysia and Singapore embarked on the Enterprise Balanced Scorecard project. This Balanced Scorecard identifies

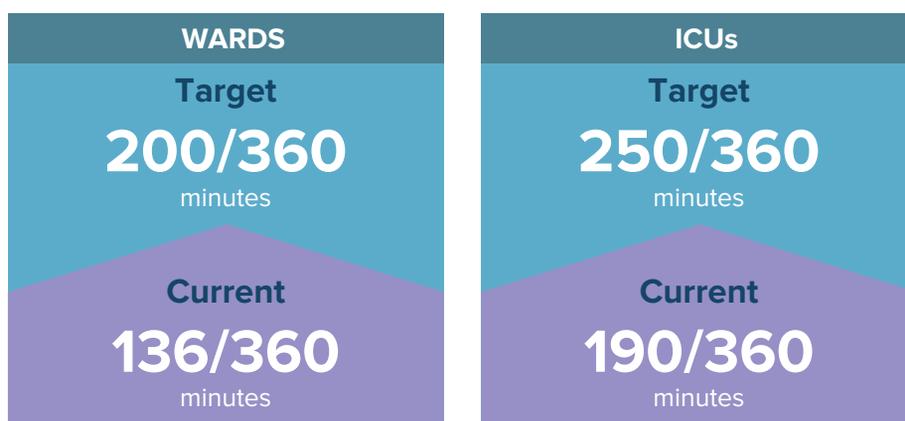
key performance indicators and measurements in five strategic initiatives: People, Quality, Service, Finance and Growth.

## INDIA: CASE STUDY

Value-added care towards improving the well-being of patients involves implementing lean management where we are constantly improving the quality of time spent in patient care. Nurse staffing ratios and patient maximums are a question of care quality, and we make sure that each patient is given enough attention by assigning a number of administrators accordingly. In determining the staffing ratio, we have also taken into consideration the fact that patient safety and care quality would be compromised if the nurses take on too many patients. The table below lists the staffing ratio per patient at the different wards and units in the hospitals in India.

STAFFING RATIOS PER PATIENT	
Specific Unit	Current Practice
General Ward	1:6
Special General Ward	1:5
Sharing Ward	1:5
Private Ward	1:4
Super Deluxe Ward	1:3
High Dependency Unit/ Step Down ICU	1:3
Post-Operative Liver, Heart & Lung in Ward	1:1
Bone Marrow Transplant Unit	1:1
Transplant ICU (Others)	1:1
Transplant ICU (Liver, Heart & Lung) — Ventilated	2:1
ICU — Non-Ventilated	1:2

The average time spent, i.e. the current time and target time, in Parkway Pantai hospitals in India for direct nursing care with patients on a six-hour shift in the wards and ICUs is as follows:



Wasted time, energy, and material are pervasive in healthcare. From a study conducted on Parkway Pantai India, it was observed that the majority of a nurse's time during a shift is spent on indirect nursing care, housekeeping activities, such as documentation and billing related activities, patient care coordination with other treating teams, and pharmacy-related activities.

In order to achieve the aforementioned targets, Parkway Pantai India's action plan involves going lean and adopting practices that reduce wasted time spent by healthcare providers and improve the quality of time spent in patient care. Some of the key considerations that are underway or in the planning stage are listed below:

- Transforming the *Nurse Call Bell System* to a *Patient Request-Specific Call Bell System* to reduce time wasted on receiving calls for non-nursing activities
- Installing a special software application for instant complaints, and rectification of the same to reduce the number of nurse call bells – a pilot study has been implemented in Continental Hospitals
- Designating a dedicated nurse for handling billing, pharmacy and patient care coordination activities
- Reducing the number of pharmacy sub-stores managed by nurses
- Reviewing the existing system of documentation and simplifying it with less writing requirements, but in keeping with Joint Commission International (JCI) requirements.

Another measure that helps reduce wasted time in ad-hoc management, and provides a method by which healthcare providers can reliably deliver the best possible care for patients undergoing particular treatments with inherent risks, is the use of infection control bundles in ICUs. The use of bundles is a set of evidence-based practices, generally three to five, that when performed collectively and reliably, have been proven to improve patient outcomes.

Another key aspect of quality care is patient and family engagement. At Parkway Pantai India, engagement has increased through our efforts to provide patients with education or counselling on medication safety, prevention of patient falls, pain management, consents and discharge information.

## Sustainability

# OUR PATIENTS

### PATIENT AND FAMILY SAFETY

The safety of our patients and their families is of paramount importance as it has a direct impact on our business. Key aspects of patient and family safety that are also pertinent in ensuring sustainable healthcare are food quality and the rational use of medicine. Our efforts to implement checks and measures throughout our operations are elaborated in this section.

### PATIENT MENU

At IHH, we care about the quality and nutritional benefits of our food products that are served to our patients. Our approach to food quality is to provide food that is sustainable, locally-focused, clean, safe and specific to each of our patients' nutritional needs. Aside from hospital patients, the comprehensive food menu prepared by our in-house and external food and beverages team is able

to cater to the needs of our hospital staff, patients' families and other visitors.

Dietitians create food menus for patients and their companions according to the daily and weekly nutritional requirements by a value calculation of carbohydrate, protein, fat, vitamins and minerals. All products are ensured to be of the highest quality and compatible in terms of food safety and nutritional value as monitored by our nutrition and dietetics professionals.

Nutrition screening is carried out for all in-patients within 24 hours of admission, and a nutrition assessment is completed on patients who are identified to have a moderate or severe nutritional risk. A clinical dietitian initiates a calorie count where the results are documented in the progress notes as a diet prescription. The nutrition assessment and plan of care will include a chart review of laboratory

data, diagnosis, anthropometric measurements, weight history, pertinent medications, diet order, nutritional needs, appropriateness of diet order, assessment of nutritional status and recommendations/nutrition goals.

In terms of food handling, our food products are prepared in a clean kitchen where all staff working in the cooking and preparation lines are required to be equipped with appropriate personal protective equipment (PPE), such as hairnets, disposable/cloth aprons, safe closed-toe shoes, masks and gloves with no hand jewellery or watches. Food is delivered to patients in our exclusive trolleys to maintain the hot or cold temperature of the meal, and a colour-coded system is used to label the different dietary requirements of patients in order to avoid confusion.

---

## SINGAPORE: CASE STUDY

When designing menus for patients, Parkway Pantai hospitals in Singapore put the trust in our reliable dietitian guidelines for healthy product selections and chemical-free food products. We never fail to consider and prioritise our patients' health conditions and their nutritional requirements.

Our F&B management team works together with our dietitians to deliver the best meals for our patients. All of our food handling and production staff are trained in food safety and hygiene and are certified by the National Environment Agency (NEA), a local government agency. Our in-house dietitians are very experienced and are

dedicated to providing for the dietary needs of our patients. They share their knowledge and work alongside the F&B team to supply therapeutic diets<sup>1</sup>, such as texture-modified diets<sup>2</sup>, to patients with special dietary needs. Also, to ensure the patients' dietary requirements are labelled and categorised, we have in place a food labelling system.

Parkway Pantai conducts a series of prerequisites to source for the best food supplier. Firstly, we support local food suppliers that are Hazard Analysis Critical Control Points (HACCP<sup>3</sup>) or ISO certified and examine their supply chains before awarding them the contract. Secondly, as a means of quality assurance and as

a control measure, we conduct frequent visits to the vendor and prepare audits when necessary.

In our product kitchen, we conduct daily hygiene checks, audits (three times a week), monthly food product testing by a third-party lab and quarterly quality Maintenance Department audits to ensure that the food we provide to our patients are safe and of the highest quality to foster health.

1. A therapeutic diet is a meal plan that controls the intake of certain foods or nutrients. It is part of the treatment of a medical condition and is normally prescribed by a physician and planned by a dietitian. A therapeutic diet is usually a modification of a regular diet.
2. A texture-modified diet is a type of therapeutic diet designed to make chewing and swallowing safer and easier.
3. The HACCP scheme meets the requirements of the Codex Alimentarius Commission – established by the World Health Organization and the Food and Agriculture Organization of the United Nations to bring together international food standards, guidelines and codes of practice to ensure fair trade.

## RATIONAL USE OF MEDICINES

The Ministry of Health (MOH) in Malaysia published the National Survey on the Use of Medicines (NSUM) in 2016 and it stated that 60 per cent of medicines in public health facilities and 70 per cent of medicines in private facilities were prescribed and sold inappropriately in developing countries.

The inapt use of medicines results in not only reduced safety and quality of healthcare but also the increased wastage of health resources. The Group has a systematic approach to ensure the rational use of medicines, which includes proper dispensing practices, adherence to protocol for prescribing medicine and consideration for cost-effectiveness and

efficacy. The Group also regulates improper patient adherence to dosing schedules and treatment regimens and inappropriate self-medication. The checks and measures towards these practices are in place throughout our operations.

## SINGAPORE: CASE STUDY

Multidisciplinary committees have been set up to coordinate policies and monitor the use of medicines in Parkway Pantai hospitals in Singapore:

- Medical Advisory Board
- Medical Quality Assurance Committee
- Therapeutics and Infection Control Committee (TICC)
- Pharmacy and Therapeutic Committee

Our professional healthcare administrators ensure patients are protected from adverse drug events and harm from medications. One process that we have implemented is medication reconciliation. Upon admission, a pharmacist will perform medication reconciliation where prescribed medications are reconciled with the patient's own medications taken prior to admission with the purpose of looking out for duplication, omission or an unintentional change in the dosage or dosage regimen.

The backbone of Parkway Pantai's approach to ensure the rational use of medicines is the electronic order system. Computerised prescription

order entry (CPOE) reduces prescription errors at the point of care, and medications are prescribed using the hospital's electronic health records (EHR). The CPOE system uses a clinical decision support database that allows checking for any drug-drug cross allergy and drug-drug interaction(s).

A pharmacist will verify the prescribed medications for the appropriateness of the drug, dosage regimen, route of administration, drug interactions, therapeutic duplication and potential cross allergy.

For medication administration, the nurse utilises knowledge-based medication administration (KBMA) where he/she scans the patient tag and medication barcode to ensure that the right medication is given to the right patient, at the right dose, right frequency and right time. Furthermore, a pharmacist will provide counselling on the proper use of medications to the patient, including specialised medications such as anticoagulants<sup>1</sup> and medications requiring devices for delivery, such as inhalers, injections and sprays. Yet another measure to ensure proper drug usage is that our pharmacies operate 24 hours – whereby at least one

pharmacist is continuously available to provide medication information services to doctors, nurses and patients.

Anti-microbial resistance has been recognised as a global health threat and is now on the political agenda with organisations such as the World Health Organization (WHO), which recognises the necessity to act to preserve the potency of antimicrobial agents and invest funds to discover new ones. The Antibiotic Stewardship Programme (ASP) in our hospitals seeks to enforce judicious antimicrobial prescription to improve individual patient care and reduce microbial resistance. Treatment guidelines for antimicrobial use are developed to optimise its use and minimise any resulting side-effects. Furthermore, the Pharmacy Division tracks the usage of antibiotics, such as Carbapenems<sup>2</sup> and Vancomycin<sup>3</sup>, and reports this to the TICC.

1. Anticoagulants are medications that thin the blood.
2. Carbapenems are antibiotics used for the treatment of infections known, or suspected, to be caused by multidrug-resistant bacteria.
3. Vancomycin is an antibiotic used to treat a number of bacterial infections. The World Health Organization's List of Essential Medicines features the most effective and safe medicines needed in a health system, and Vancomycin is on the list.

# OUR PEOPLE



**To provide a safe working environment that is conducive for the personal and professional growth of our employees and corporate culture that is built on good communication practices, transparency and integrity.**

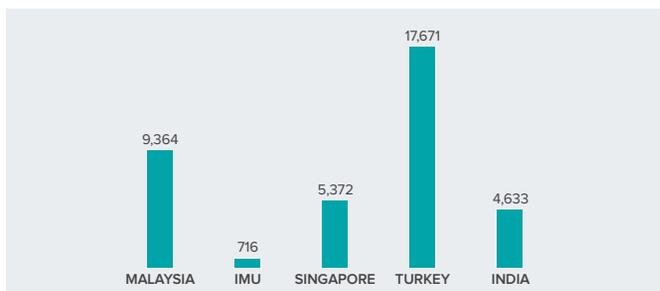
We have a diverse group of people working in IHH across the four countries. The following figures demonstrate the distribution of our employees by gender, age and employment level.

IHH's Workforce Diversity Policy, Gender Diversity Policy and Boardroom Diversity Policy allow for an open workplace that nurtures diversity and inclusiveness. We are able to create a positive and

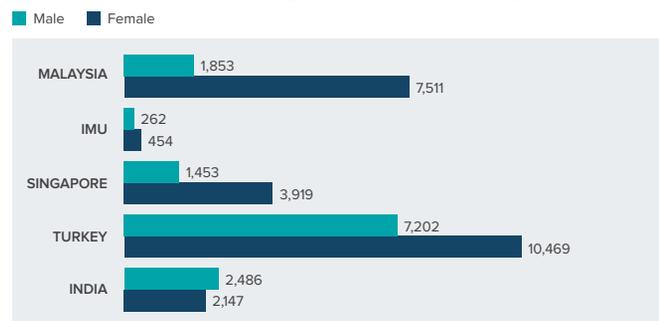
conducive workplace by facilitating effective communication and clear channels for feedback. Moreover, our employees are continuously exposed to new cultures, ideas and knowledge.

The graphs below describe the total employee strength and the distribution of full-time employees by gender across the main home markets – Malaysia, Singapore, Turkey and India.

### TOTAL EMPLOYEE STRENGTH



### TOTAL EMPLOYEE STRENGTH BY GENDER



Employee distribution from 1 January 2018 to 31 July 2018

The graphs below capture the distribution of employees by age and employment category across the four home markets from 1 January 2018 to 31 July 2018.

### MALAYSIA



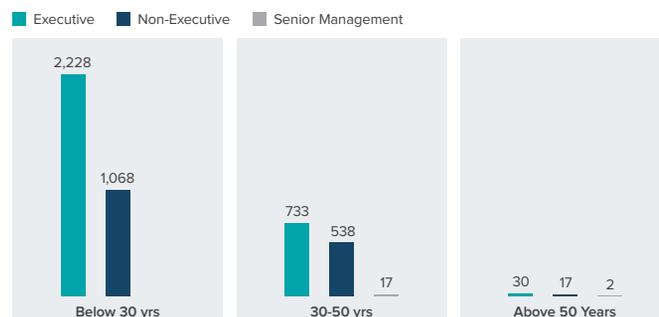
### IMU



### SINGAPORE



### INDIA



### TURKEY



**EMPLOYEE HEALTH AND SAFETY**

At IHH, we believe in creating a strong safety culture. The Group reports on employee incidents and identifies trends and key risk areas, such as employee injuries, needle-stick injuries, employee falls, employee mobility incidents,

occupational health-related incidents, infection-related incidents and exposure to bodily fluids. Our safety mechanism also entails the submission of health and safety recommendations about workplace conditions, the continual improvement of occupational health and safety standards by applying the lessons

gained through experience and ongoing instruction and advice for staff and management. Our hospitals in the different home markets appoint key personnel and committees to promote and execute workplace health and safety measures.

**TURKEY: CASE STUDY**

According to the Turkey Labour Law Act No. 6331, firms employing 50 or more workers (with job durations of more than 6 months) are obligated to establish a committee responsible for occupational health and safety activities. Acibadem Healthcare Group has appointed 298 committee members to the Occupational Health and Safety (OHS) Board to oversee the 16 hospitals.

Each OHS committee consists of the following people:

1. Employer or representative of the employer
2. Occupational Safety Specialist
3. Occupational Physician
4. Representative from Human Resources
5. Civil defense expert, if applicable
6. Foreman, workman or chief workman, if it exists
7. Worker representatives

22 per cent of the total strength of the OHS committees across all 16 hospitals consists of worker representatives. The table opposite represents the number of worker representatives and the total number of committee members for each hospital, which complies with the requirements given by the Declaration on the Qualifications, Rules and Procedures for the Designation of Worker Representatives for Occupational Health and Safety.

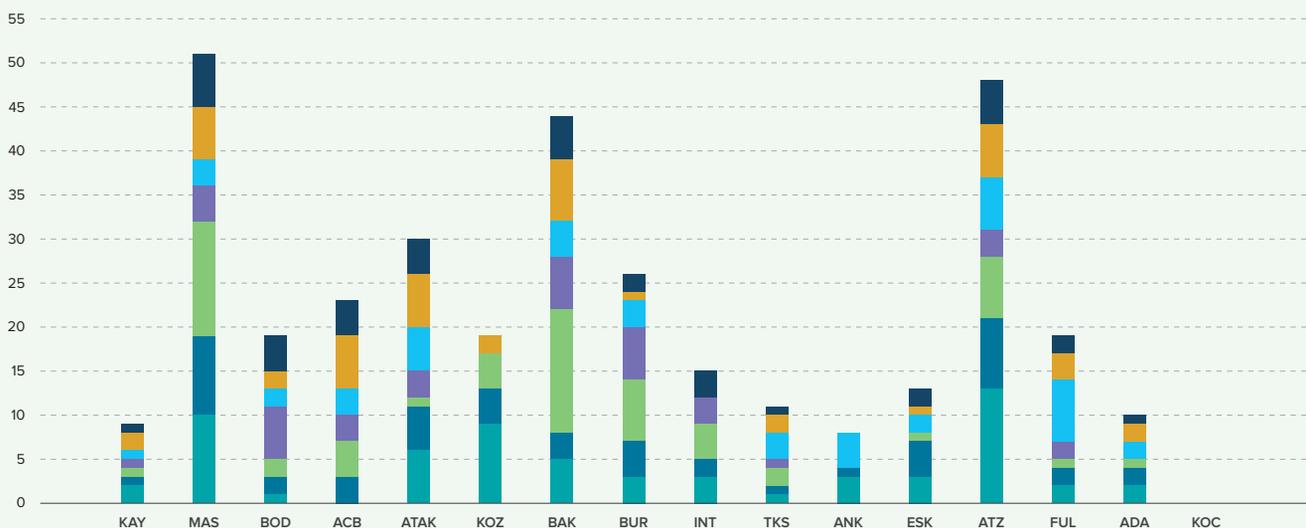
Acibadem Hospitals	Committee Members	Worker Representatives
Kadikoy (ACB)	24	4
Kozyatagi (KOZ)	16	4
Fulya (FUL)	18	4
Maslak (MAS)	17	5
Bakirkoy (BAK)	13	4
International (INT)	20	3
Taksim (TKS)	13	3
Kayseri (KAY)	18	4
Bursa (BUR)	19	5
Kocaeli (KOC)	14	3
Eskisehir (ESK)	26	3
Bodrum (BOD)	14	6
Adana (ADA)	20	3
Ankara (ANK)	16	3
Atakent (ATAK)	21	5
Altunizade (ATZ)	29	8

Acibadem has a policy on OHS to increase awareness and to ensure that the management of OHS activities is in accordance with the legal regulations, as well as national and international standards. This policy involves standard controls, higher risk environment controls, and other controls to protect workers from incidents and occupational diseases. This is in addition to job entry and periodic examinations and risk assessments. OHS Committees meet periodically depending on the risk class of the workplace. As hospitals are considered high risk, the committees meet on a monthly basis.

With regard to workplace incidents, there were no occupational fatalities at Acibadem in financial year 2018. Four out of the 16 hospitals recorded less than 10 incidents in the first half of 2018 with Acibadem Kocaeli having zero incidents. The following graph represents the number of workplace incidents/injuries that occurred on a monthly basis across the 16 hospitals.

## WORKPLACE INCIDENTS AT ACIBADEM HOSPITALS (JAN–JUL 2018)

■ January ■ February ■ March ■ April ■ May ■ June ■ July



### TRAINING AND DEVELOPMENT

IHH's development and reputation in the healthcare industry wholly rely on the dedication, skills and knowledge of our workforce. Various training and development programmes are offered to our employees at every employment level. We frequently assess high-

performing individuals and empower them through leadership programmes that will help bring their career forward.

There are ongoing training programmes across IHH's home markets that cater to the different skill requirements and training needs of our staff. These

programmes ensure that all our healthcare professionals are regularly updated, trained and developed in order for them to achieve their personal and professional goals, and so that they can deliver the best quality care.

## SINGAPORE: CASE STUDY

In Singapore, the learning and development approach for employees focuses on three areas.



Training is given both in-house and through third-party coaching for clinical staff (physicians and nurses) and non-clinical staff (pharmaceutical representatives, biomedical technicians and HR).

## Sustainability

# OUR PEOPLE

The table below illustrates the total amount of training hours and placements undertaken for the clinical and non-clinical hospital staff from January to June 2018.

Training Programmes	Training Placements			Training Hours		
	Total Training Placements Attended	Clinical Staff	Non-Clinical Staff	Total Staff Training Hours	Clinical Staff	Non-Clinical Staff
Management and Supervisory Skills, Productivity and Quality-Related Skills, IT Systems	2,627	1,833	794	30,568	20,130	10,438
Academic Qualification and Sponsorship	14,328	14,328	–	18	18	–
Professional Certification (e.g. AED <sup>1</sup> , BCLS <sup>2</sup> )	678	668	10	4,850	4,806	44
Workshops, Overseas Seminars and Conferences	2,215	1,482	733	24,592	15,142	9,450

1. Automated External Defibrillator, a device used to resuscitate patients after CPR has proved ineffective.
2. Basic Cardiac Life Support.

Performance appraisal is an important step in the career development of our employees. It is also very beneficial for both employees and management to understand the individual's current performance level, challenges, training needs and areas for improvement. In Singapore, the annual Performance

Management cycle is held formally to review the employee's performance and contribution for the year. It is a conversation to understand the employer-employee expectation, the employees' aspirations and how the business can support employees in their work and career growth opportunities.

In addition to the formal reviews, informal check-ins take place frequently throughout the year to discuss and manage performance progress and expectations.

# OUR ORGANISATION



**To strengthen our international market presence without compromising aspects of quality and sustainability, and to be responsive to the challenges and changing expectations of stakeholders within the healthcare industry.**

## **INTERNATIONAL HEALTHCARE SERVICES**

IHH's international healthcare services play an increasingly important role in building market presence in the home markets of Malaysia, Singapore, Turkey and India. Our efforts in catering to international patients include building infrastructure, medical expertise, ancillary services and collaborations with travel

agencies. We continuously aspire to create an inclusive, comfortable and pleasant environment for our patients where their needs are always conveyed and received accurately.

The economic and social impact of building our international healthcare services include ensuring long-term economic opportunities in which socio-economic benefits are equally

distributed among all stakeholders, generating stable employment opportunities and maintaining the socio-cultural authenticity of host communities. Moreover, by serving the higher demands and diverse needs of international patients, we are able to continuously improve healthcare quality and expertise.

## MALAYSIA: CASE STUDY

In Malaysia, the international healthcare services mainly attract patients from Indonesia, Singapore, the Middle East, Bangladesh and Indo-China. To facilitate communication between staff and international patients, we have multilingual employees who are fluent in Bahasa Indonesia, Japanese, Korean and Mandarin.

In 2017, we experienced a 13 per cent increase in the number of international patients from 2016, amounting to 67,689 patients. Consequently, the total revenue contribution from international healthcare services in 2017 was RM 77.4 million, which was a four per cent increase from that of 2016. We have seen a year-on-year increase in the number of

international patients and revenue generated. The increase in the first half of 2018 is illustrated below:



The pull factors for international patients to choose Parkway Pantai hospitals in Malaysia are:



The different organisational bodies Parkway Pantai has partnered with to foster international healthcare services include independent agents, foreign doctors, banks, associations, community clubs, travel agents, insurance and third-party administrators (TPA). Our international health services help generate income and employment opportunities within sectors, such as travel and tourism, transportation and medical tourism related departments such as Malaysia Healthcare Travel Council (MHTC) within MOH.

In 2018, our efforts to expand the scope of international healthcare services included collaborating with international insurance and TPAs for the purpose of providing cashless services, which make it easier for international patients. We have also begun to collaborate with local banks for the purpose of providing additional services and privileges to attract each bank's customers. We also organise joint events with insurance agencies to create better awareness amongst policy holders, and are growing our efforts in digital marketing as well as on social media platforms like Facebook.

Our outstanding international healthcare services achieved recognition from the International Medical Travel Journal at the 2018 Medical Travel Awards. At these Awards, Gleneagles Kuala Lumpur was awarded the "International Hospital of the Year", "Best Marketing Initiative" and Highly Commended in the 'Excellence in Customer Service' category.

## COST-EFFECTIVENESS

Cost-effectiveness is an increasingly important consideration in the healthcare industry. It defines the extent to which healthcare operations have achieved, or are expected to achieve, at a lower cost

compared to alternatives. At IHH, we recognise the benefits of cost-effectiveness in minimising administration and improving quality, accountability and accessibility to healthcare and its relevance in the context of sustainability. However,

we take every precaution in assessing the risks involved before considering cost-effective alternatives. Ultimately, we are accountable to our patients, and we prioritise the maintenance of high standard of patient health and safety.

## INDIA: CASE STUDY

In each of the home markets, there are ongoing as well as prospective plans for cost-effectiveness. The table below captures the initiatives undertaken by Parkway Pantai hospitals in India. Initiating cost-effectiveness in areas such as procurement, pharmaceutical processes and hospital operation structures involves standardisation and consolidation, and implementing a lean

methodology to improve clear communication and coordination within the process or system.

As we explore ways of getting better value in healthcare, the trend is to shift care from the most expensive inpatient settings to providing care in ways that reduce spending while improving outcomes. Technology is a key

consideration in this aspect to optimise internal support services and processes by using predictive and responsive platforms that are efficient, automated and move in real time. Parkway Pantai is looking into technological intervention to achieve cost-effectiveness in manpower.

Target Areas	Current Status	Reduction Target	Initiatives towards Cost-Effectiveness
Material Cost	Current Material cost at 20.8%	19%	<ul style="list-style-type: none"> <li>Central procurement</li> <li>Formulary implementation and efficient usage</li> <li>Price negotiation</li> <li>Brand substitution</li> <li>Vendor consolidation</li> </ul>

**Sustainability**  
**OUR ORGANISATION**

Target Areas	Current Status	Reduction Target	Initiatives towards Cost-Effectiveness
Doctor Cost	Current Doctor cost at 25.7%	24%	<ul style="list-style-type: none"> <li>• Initiating innovative engagement models</li> </ul>
Manpower Cost	Current Manpower cost at 20.4%	19%	<ul style="list-style-type: none"> <li>• Rationalising manpower cost in each hospital</li> <li>• Standardising hospital operations structures</li> <li>• Technology implementation</li> </ul>

**EMERGENCY PREPAREDNESS**

Emergency preparedness in a healthcare facility requires extensive planning, documentation and communication. An effective response from all hospital employees is required during an emergency, and towards this, we have in place the necessary emergency plans and procedures. An Emergency Response Team (ERT) or Disaster

Management Committee, a Disaster Management Plan and drills/exercises/training are made available at all IHH hospitals to improve the unit’s readiness and to ensure the safety of staff, patients and visitors while managing an emergency situation.

In Malaysia, Singapore, Turkey and India, the requirements for effective response to contain any outbreaks of emerging

and dangerous pathogens are detailed in the laboratory associated infections and biosafety guidelines. Safety training is an essential part of preparing laboratory and other staff for managing such outbreaks, and these training sessions are conducted on a regular basis.

**MALAYSIA: CASE STUDY**

As part of a Laboratory Readiness and Response Plan for the rapid detection and containment of outbreaks of emerging and dangerous pathogens, Parkway Pantai hospitals in Malaysia ensure manpower is well trained and up to date with emergency procedures. The necessary equipment and reagent supply are identified and prepared. Communication and engagement with relevant authorities, such as the Institute for Medical Research (IMR), Center for Disease Control and Prevention (CDC) and the Ministry of Health (MOH), are established to come up with a flow and plan for the

containment of outbreaks. The outcome from the meeting is updated to all relevant personnel in Parkway Pantai.

In the event of a suspected outbreak or incident, the Manager or Person-in-Charge of the laboratory is required to contact the Infection Prevention and Control Nurse of his or her hospital, even if the situation is unclear. The Infection Prevention and Control Nurse will assess the situation and will inform the Hospital Management and Head of Infection Prevention and Control and update them on the developments that occur throughout. If necessary, the Head of

Infection Prevention and Control Nurse or any person authorised by the hospital will subsequently inform the Occupational Health Unit of the MOH.

Should an outbreak be confined to an individual site, the Hospital Infection Prevention and Control Nurse will manage the outbreak by liaising with the appropriate clinicians. Depending on the situation, the Hospital Infection Prevention and Control Nurse Team will initiate appropriate infection control procedures.

INFECTION CONTROL PROCEDURES		
Isolation	Case Finding	Data Collection
Diagnostic And Screening Microbiological Tests		

Where possible, specimens should be collected immediately and sent for diagnostic and microbiological screening tests before control measures are introduced. If the disease is notifiable by law, the medical staff responsible for the patient and the Safety and Health Officer must notify the MOH and Department of Occupational Safety and Health Malaysia (DOSH).

If the outbreak is not limited to an individual site, the infection control procedures undertaken by the Manager/Person-in-Charge are as follows:

1. Control measures:
  - (a) Antibody Therapy/prophylaxis
  - (b) Immunisation
  - (c) Staff Screening
  - (d) Decontamination of Laboratory or equipment
  - (e) Personal Protective Equipment (PPE)
2. Assessing the outbreak at regular intervals
3. Liaising with Hospital Support Services
4. Giving infection control advice to staff to limit a potential spread
5. Increasing staff awareness of the organism involved, mode of transmission and rationale for control measures being taken
6. Involving a DOSH Certified Occupational Health Doctor (OHD) for reassurance and support
7. Preparing reports to disseminate information and findings

### International Medical University (IMU)

The IMU Research Lab Disaster Management Plan (DMP) was established to outline the policies and procedures of any large-scale emergency or disaster. This plan will be implemented to ensure the maximum and efficient utilisation of resources during an emergency event/disaster.

The IMU Research Laboratory (IMU-RL) strives to provide a safe environment to facilitate and support research activities. The DMP will use IMU-RL and outside resources to:

1. Protect the safety and life of IMU-RL students, faculty, staff and visitors;
2. Protect and stabilise research, teaching and learning activities;
3. Minimise damage and the cost to facilities and material resources on IMU Bukit Jalil campus;
4. Provide for the continuity of facility management, damage assessment and re-establish IMU-RL's normal operations.

The DMP provides guidelines, procedures and information necessary to recover from an emergency event or a disaster. This is used for planning and executing through a priority list for damage control and prevention. The top priorities are human life and health and safety, followed by hazardous materials and chemical containment, experimental animals, infrastructure and resources, as well as document preservation. The DMP also outlines a disaster responsibility chain, a list of emergency supplies and

materials, emergency response and contacts to facilitate coordination.

The chemical spill procedure outlines the general requirements for the management of chemical spills on the IMU-RL to minimise effects to the health and safety of individuals from exposure to chemical spills and to reduce the impact on the environment. In the event of a chemical spill, the individual who causes the spill is responsible for prompt and proper clean up. Related authorities, such as the IMU-RL office (and/or IMU Safety and Health Organisation and medical assistance), should be informed immediately.



**To strengthen our commitment to manage our impact on the environment by prioritising strict adherence to environmental regulations governing waste and by improving our energy performance.**

## WASTE MANAGEMENT

According to the World Health Organization, about 85 per cent of the total amount of waste generated by healthcare activities is general, non-hazardous waste, comparable to domestic waste. The remaining 15 per cent is considered hazardous material that may be infectious, chemical or radioactive. The treatment and disposal of healthcare waste may pose health risks indirectly through the release of pathogens and toxic pollutants into the environment.

IHH prioritises the management of healthcare waste, and the hospitals have developed strategies and systems along with strong oversight and regulation to incrementally improve waste segregation, destruction and disposal practices. This is done with the ultimate aim of meeting national and international standards.

Much of the concern around environmental compliance in healthcare, which has been reiterated by the Basel Convention<sup>1</sup>, is regarding the impact of hazardous or scheduled waste generated

by the hospitals in the surrounding environment. In Malaysia, Singapore, Turkey and India, hospitals are expected to follow environmental regulations as enacted by national or regional law. This compliance is also important to maintain accreditations, such as Joint Commission International accreditation.

1. The Basel Convention on the Control of Transboundary Movements of Hazardous Wastes and Their Disposal is an international treaty aiming to protect human health and the environment against the adverse effects of hazardous wastes.

## TURKEY: CASE STUDY

In Turkey, hospitals are required to comply with the following environmental regulations:

- Environmental Permits and Licenses Regulation
- Environmental Impact Assessment Regulation
- Waste Management Regulation
- Medical Wastes Control Regulation
- Vegetable Oil Wastes Control Regulation
- Packaging Wastes Control Regulation
- Oil Wastes Control Regulation
- Regulation on Highway Transportation of Hazardous Substances
- Waste Batteries and Accumulators Control Regulation
- Environmental Noise Assessment and Management Regulation
- Water Pollution Control Regulation
- Regulation on Control of Air Pollution Caused by Heat
- Regulation on Control of Air Pollution Caused by Industry

The audits conducted by the official authorities listed below on Acibadem hospitals in 2018 showed that there was no case of non-compliance regarding waste management or other environmental permits and, as a result, no penalties were imposed.

- Provincial Directorate of Environment connected to the Ministry of Environment
- Provincial Directorate of Health connected to the Ministry of Health
- Ministry of Transportation Regional Directorates

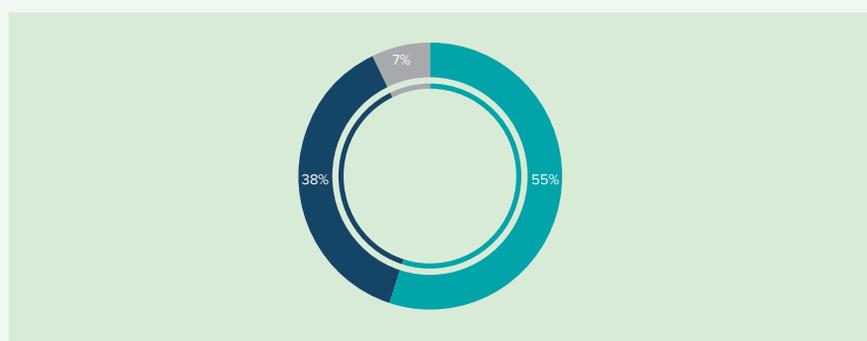
Waste generated from the various operations of Acibadem hospitals are classified under three main types – hazardous, infectious and non-hazardous waste. Based on the total waste that was generated by Acibadem hospitals from January to July 2018, the figure below represents the percentage breakdown of the three categories of waste.

In Acibadem's waste management policy, reducing waste is a priority. As part of the medical waste reduction

project, which started at the end of May, the types of wastes produced in the hospitals and their appropriate separation were studied. Medical wastes were labelled with the name of the units they were produced in and were investigated separately. Periodic site audits were performed to avoid disposing non-infectious waste into medical waste containers. The amount of medical waste was controlled at all times but, when a sudden increase occurred, we investigated the cause and immediately implemented mitigation measures. As a result of these efforts, we saw a 20 per cent reduction in medical waste in June 2018, compared to that of May. The medical waste generated by the hospitals reduced from 217.6 tonnes in May to 174.7 tonnes in June.

### TYPE OF WASTE GENERATED (JAN–JUL 2018)

■ Non-Hazardous Waste ■ Infectious Waste ■ Hazardous Waste



The table below describes the different disposal methods and the amount of waste generated by Acibadem hospitals, medical centres and other facilities from January to July 2018.

Type of Waste	Amount of Waste (Tonnes)	Description	Disposal Method
Non-hazardous Waste	2,203.0	Domestic Waste	Domestic waste is collected by the municipality to be taken to domestic waste collection centres.
		Packaging Waste	Paper, cardboard, plastic, glass and metal packaging wastes are collected by licensed recycling companies which are contracted by the municipality to be processed for recycling.

## Sustainability

# OUR ENVIRONMENT

Type of Waste	Amount of Waste (Tonnes)	Description	Disposal Method		
Hazardous Waste	282.6	Battery Waste	Delivered to the Portable Battery Producers and Exporters Association.		
		Accumulator Waste	Delivered to related licensed companies regarding their contents.		
		Electronic Waste	Delivered to licensed companies that separate the recyclable parts and apply necessary processes for recycling.		
		Cytotoxic Waste Pharmaceutical Waste Laboratory Liquid Waste Contaminated Packaging Waste Autoclave Waste Fluorescent Lamp Waste Absorbent materials contaminated with hazardous substances Paint Waste Anti-freeze Waste Grease Filters Waste	Delivered to licensed companies for disposal by incineration.		
		Mineral Oil Waste Vegetable Oil Waste	Delivered to licensed companies for recycling.		
		Infectious Waste	1,546.7	Medical Waste	Delivered to the city's licensed company to be sent to sterilisation or incineration facilities.

### ENERGY EFFICIENCY

IHH hospitals are increasingly becoming a global destination for medical and patient care, and there is a corresponding growth of infrastructure to support the industry, which inevitably results in an increase in energy consumption. The scope of introducing energy efficiency in a hospital involves creating a robust energy-saving programme that factors in,

among others, the capacity of the building, the need for them to function 24 hours a day throughout the year and the careful control of the internal climate. In practice, energy efficiency is salient to our efforts to strengthen the performance of our hospitals in the context of environmental sustainability. However, medical considerations remain the top priority.

Across the different home markets, we have taken active measures to improve the energy efficiency of our hospitals and buildings, including but not limited to using state-of-the-art technology, switching to LED lighting, upgrading heating, ventilation and air-conditioning (HVAC) systems, renewing high energy consuming equipment and optimising operational system controls.

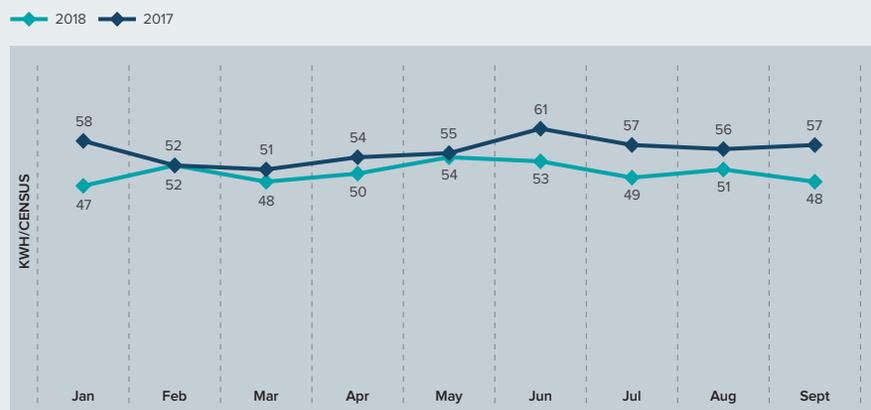
## MALAYSIA: CASE STUDY

In Malaysia, all 14 hospitals have been practising a range of energy saving practices in areas including the front office, management office, IT office, facility room, housekeeping station, ward, nursery, accident and emergency department (A&E), operating theatre, intensive care unit (ICU) and the central sterile services department (CSSD), as well as using modality equipment for imaging and health screening. Without compromising the safety and security of our patients and staff, we have been successfully practising the following:

- Switching off televisions, computers and room lights when not in use.
- Turning off air-conditioning in empty patient rooms and, where possible, after office hours.
- Switching off modality machines, except the General X-Ray machine, when not in use.
- Creating awareness amongst staff on Energy Saving Management.

Our initiatives include upgrading or replacing HVAC and chillers. In 2018, the existing HVAC of Pantai Hospital Penang and Pantai Hospital Ampang was upgraded and fine-tuned for considerable energy and CO<sub>2</sub> savings, reduced costs and improvements to the working environment. Also, within the reporting period, two chillers in Gleneagles Kuala Lumpur (Block A) and three in Gleneagles Penang (Block B) were replaced with newer, efficient chillers. The prospective savings in electricity

### ENERGY INTENSITY 2017 VS 2018



consumption and cost per year when comparing the chiller efficiency (kW/RT<sup>1</sup>) of one new chiller unit to an old chiller unit are 193,093.7 kWh and RM 55,944.65 respectively.

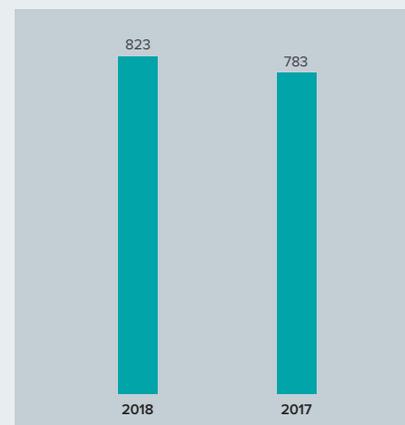
Monitoring and tracking energy consumption is the first step in controlling and conserving energy in the hospital buildings. Recording the data on a monthly basis has helped to identify energy saving opportunities and has provided an estimate on how much energy each opportunity can save.

As a result of our energy saving initiatives, we saw a 10 per cent reduction in energy intensity from January to September 2018, when compared to 2017. The energy intensity of our operations is a better representation of the energy consumed as it is relative to the patient census.

The total electricity consumption from January to September 2018 was five per cent higher compared to that of 2017. The increase was attributed to the opening of Gleneagles Kuala Lumpur (Block B) in 2018, which accounted for four per cent of the 2018 consumption and the 17 per cent increase in the 2018 patient census.

### TOTAL CONSUMPTION JAN–SEPT 2018

(kwh x 100,000)



1. Chiller Efficiency = Chiller compressor power consumption (kW)/Refrigeration tonnage (RT)



## To provide resources and skills to improve the health and well-being of vulnerable sections of the community.

We are aware of our corporate social responsibility to the larger community and the vulnerable sections of society. However, we believe that corporate social responsibility begins at home, and that is the IHH community.

Good hospital governance and protecting the interests and rights of our doctors, nurses and employees is our absolute priority. IHH's code of ethics and conduct, fair grievance procedures and transparency in communicating the processes and rationale adopted by management and internal controls reflect our commitment to fairness, integrity and

transparency to the IHH community. Setting a strong culture for social responsibility within IHH sets the tone for our CSR efforts to the wider community of people in the countries we operate in.

### COMMUNITY DEVELOPMENT

Focusing on community engagement has become important for global public health as countries face complex health challenges that stretch and test the capacity and resilience of health systems and the populations they serve.

Our community engagement and outreach programmes in Malaysia,

Singapore, Turkey and India are carried out with the aim of improving access to healthcare facilities, increasing public healthcare awareness, nurturing the next generation of healthcare professionals, funding community projects and providing disaster relief. We target the vulnerable sections of society in order to build their resilience and improve health awareness. We recognise that people are at the centre of any effort to create better health and that resilient people are the foundation of resilient health systems and communities.

## IMU: CASE STUDY

IMU's ongoing community service programme, IMU Cares, which is undertaken by its staff and students, serves the community by delivering healthcare services. These include promoting health and wellness, providing holistic care, including

medication counselling and nutritional assessment to prevent diseases, and educating and training caregivers. The IMU Cares office has a system in place for project leaders to identify and research the needs of the underprivileged community, focusing

on four key areas, namely healthcare, education, the environment and humanitarian aid. In 2018, IMU spent a total of RM 31,077 for the activities and programmes that were carried out under the IMU Cares Project.

Project Name	Beneficiary	Activity
Health Screening for the physically challenged and those in need of support	Beautiful Gate Foundation for the Disabled	Blood glucose and blood pressure monitoring, dental check-up and over-the-counter medication education.
Jewellery Making Workshop	Caring and Community Centre – underprivileged urban families in Kapar, Klang	Taught adolescent girls living and social skills, in particular, jewellery making.
Recycling of Hotel Toiletries		Recycling.
Discover the Joy of Learning 3.0	Residents of Rumah Charis (Home for the Children)	Basic English skills for the children.
Diabetes and Health Education for Elderly Residents	Residents of Rumah Charis (Home for the Aged)	Diabetes and medication education.
Health Talks		Health talks on the importance and advantages of exercise.
Health Education and Screening	Residents of Kampung Tekir	Personal hygiene education, medical screening, dental screening, home visits, follow-up consultations and treatment.
	Residents of Kampung Sebir	Health talks on family planning, air pollution, respiratory health, personal hygiene, skin care, health screening follow-up and home visits.
Kampung Sebir Education Project	Students of Kampung Sebir	Taught students English and Mathematics according to their level of proficiency. Younger children were taught the alphabet, encouraged to draw and colour, and engaged in one-to-one reading exercises.
Health, Safety and English Workshops	ROH Community School Seremban	Taught students English conversational skills, fire safety training, and conducted medical screening.
Chemistry and Biology Practical Sessions	Dignity for Children Foundation	Gave students hands-on experience in biology, with the observation of animal and plant cells, DNA and digestion, and chemical practical sessions.
Chinese Medicine Service for the Community	Balai Masyarakat Seri Kembangan (general public)	Chinese medicine health screening and treatment.

## IMU: CASE STUDY

Project Name	Beneficiary	Activity
Diabetes Education and Personal Hygiene for Elderly Residents	Residents of Rumah Victory Elderly Home	Healthcare education on diabetes and personal hygiene.
Train the Trainers Caring for the Elderly		Conducted Activities of Daily Living (ADL) lessons for caregivers, focusing on wound dressing, hand washing and spirometer handling.
Dengue Prevention – Gotong Royong	IMU	Anti-littering campaign where staff and students cleaned up areas surrounding Bukit Komanwel, IMU, Vista Komanwel A, B, C, Covillea and Savannah.
Dental Health	Pangsapuri Balakong Jaya	Dental screening and oral health education.
Health Education for Elderly Residents	Ti-Ratana Welfare Society	Diabetes education, medical screening of heart and lungs and blood pressure screening.
Health Screening for the Elderly	Rumah Orang Tua Kampung Baru Sikamat Rumah Sejahtera Jimah Lukut	Health screening conducted by the students under the supervision of faculty members.
Diabetes Education for Elderly Residents	Rumah Sejahtera Seri Setia	Diabetes education and the monitoring of elderly residents with diabetes.
Eat Well, Live Well with Umami		Medical and nutritional screening and counselling.
Train the Trainers Caring for the Elderly	Residents of Tong Sim Senior Citizen Care Centre	Skills evaluation of caregiver for hand washing and female perineal care, new teaching sessions on male perineal care, and wound dressing.
Health Education and Gardening Workshops		Mental health education, and gardening with the elderly.
Health Education	Pusat Penjagaan Kanak-Kanak Cacat Taman Megah	Personal hygiene education.
Immunisation for Refugee Children	ACR Learning Centre	Hepatitis B and Pentavalent vaccines administration.
	Lautu Education Centre	
	ROH Community School Seremban	
	United Learning Centre	
	Dignity for Children Foundation	
	Little Flower Learning Centre	
Promoting Adolescent Health	SMK Dato' Abdul Samad	Health education on reproductive health, mental health, anti-smoking and substance abuse.

## IMU: CASE STUDY

In IMU, the Mata Pelajaran Umum (MPU) is a pre-university qualification for private universities in Malaysia. It focuses on developing practical community-minded skills. MPU4

encourages all IMU students to undertake projects that are socially responsible and to engage with the surrounding communities of whom they will serve as future health professionals. The table

below describes the activities and the beneficiaries of the different MPU4 projects in 2018. A total of RM 3,158 was spent.

Project Name	Beneficiary	Objective
Art for Refuge	The National Autism Society of Malaysia	<ol style="list-style-type: none"> <li>To engage the autistic children through social interaction.</li> <li>To expose them to activities that could aid their learning process.</li> <li>To stimulate their motor and sensory skills.</li> </ol>
	Bloomers Training House Bhd	<ol style="list-style-type: none"> <li>To show the young adults, caretakers and family members how art can have a positive effect on life.</li> <li>To brush up the young adults' psychomotor skills, such as hand-eye coordination, through specially designed handicrafts.</li> <li>To compile a manual for making specially-designed crafts.</li> <li>To sell products and donate the profits to the foundation.</li> </ol>
	Alliance of Chin Refugees	<ol style="list-style-type: none"> <li>To teach artistic techniques to the children in order for them to create a craft through their imagination.</li> <li>To help the children develop spatial skills along with the form of art that is taught to them.</li> <li>To develop teaching skills among IMU students.</li> </ol>
Chemistry Day at Rumah Charis	Rumah Charis — Home for Children	<ol style="list-style-type: none"> <li>To create awareness about their ingredients in commercial products and its sugar content.</li> <li>To create an awareness about the value of money in the children.</li> <li>To ignite interest in the children towards chemistry.</li> </ol>
Nutrition Education for Children		<ol style="list-style-type: none"> <li>To develop creativity amongst the children.</li> <li>To encourage nutritional awareness.</li> <li>To nurture teamwork through games and activities.</li> </ol>

Sustainability  
**OUR COMMUNITY**

Project Name	Beneficiary	Objective
Buddy Programme: Living your Life in Malaysia	IMU	<ol style="list-style-type: none"> <li>1. To encourage international students to converse in Malay.</li> <li>2. To allow international students to understand what is considered halal food in Malaysia and what to expect when interacting with Malaysians.</li> <li>3. To ensure that international students do not face difficulties when buying desired foods in the market, hawker stall or elsewhere and to help them integrate into local culture in Malaysia.</li> </ol>
Health and Cultural Workshops		<ol style="list-style-type: none"> <li>1. To promote a sense of respect and appreciation for cultural diversity, and acquire knowledge to function with the various cultures by being sensitive to and by being accepting of the differences.</li> <li>2. To promote the understanding of the unique local culture, language and ethnic heritage.</li> <li>3. To develop team spirit, leadership skills and communication skills among students.</li> </ol>
Microsoft Words and Microsoft Excel Basic Skills Workshop	United Learning Centre (ULC)	<ol style="list-style-type: none"> <li>1. To provide a platform for the students to learn and practice basic computer skills, in particular, Microsoft Word and Excel.</li> <li>2. To provide a platform for IMU students to interact with underprivileged children, and serve the community.</li> </ol>
Blood Donation Campaign in Asia Pacific University	Asia Pacific University	<ol style="list-style-type: none"> <li>1. To raise awareness on the importance of being kind in the world today.</li> <li>2. To raise awareness on blood related diseases and HIV.</li> <li>3. To enlighten the target crowd, with a focus on the youth, on various aspects of the society that may be stigmatised or ridiculed.</li> <li>4. To raise enough blood to supplement Hospital Tengku Ampuan Rahimah Klang (HTAR).</li> </ol>
Love and Care Tasputra (Health Promotion)	Tasputra Perkim	<ol style="list-style-type: none"> <li>1. To improve and raise awareness on the importance of health screening among the caregivers of cerebral palsy children</li> <li>2. To monitor the health status of the caregivers of cerebral palsy children as a follow-up from the previous year (e.g. blood pressure and fasting blood sugar).</li> <li>3. To provide knowledge for mental health and to deal with issues associated with stress and anxiety.</li> <li>4. To educate staff on common health problems associated with Diabetes Mellitus and its preventive measures.</li> <li>5. To discuss the importance of healthy diet, and how it affects overall well-being.</li> </ol>

Project Name	Beneficiary	Objective
Nutrition and Hygiene	Taman Megah Handicapped and Disabled Children's Home	<ol style="list-style-type: none"> <li>1. To raise awareness of proper nutrition and personal hygiene through education and interactive games.</li> <li>2. To teach the children how to prepare a nutritionally balanced meal.</li> <li>3. To provide a platform for IMU students to apply what they have learned in class by serving the children.</li> </ol>
Healthcare to IQ70+	Malaysian Association for the Welfare of Mentally Challenged Children IQ70+	<ol style="list-style-type: none"> <li>1. To provide health education to the children.</li> <li>2. To raise awareness of the importance of hand and oral hygiene, as well as a healthy lifestyle, via education and interactive games.</li> <li>3. To provide a platform for IMU students to apply what they have learned in class by serving the children.</li> </ol>
English Workshop	SK Methodist Petaling Jaya	<ol style="list-style-type: none"> <li>1. To improve speaking skills and introduce basic vocabulary and communication skills to Year 6 students who are weak in English.</li> <li>2. To encourage the students to speak English confidently among peers.</li> <li>3. To provide a platform for IMU students to serve the community.</li> </ol>
Cultivation of scientific experimental knowledge, English communication and cultural insight among children	Lautu Refugee Learning Centre	<ol style="list-style-type: none"> <li>1. To cultivate the children's interest in the field of Science by conducting scientific experiments.</li> <li>2. To enhance the children's English language communication skills through drama.</li> <li>3. To give a brief overview of the cultural aspects of Malaysia.</li> <li>4. To improve the children's soft skills, such as teamwork and co-operation, through various interactive games.</li> </ol>
Educational Activities in Lautu Education Centre		<ol style="list-style-type: none"> <li>1. To teach basic postural health.</li> <li>2. To educate and strengthen the children's basic grasp of Bahasa Malaysia.</li> </ol>
Growing Healthy Kids		<ol style="list-style-type: none"> <li>1. To ensure that the children know the meaning and benefits of a healthy lifestyle through fun and interactive activities related to proper nutrition, hand hygiene and physical exercise.</li> <li>2. To provide a platform for IMU students to apply what they have learned in class and through experiential learning by serving the children.</li> </ol>

## Sustainability

# OUR COMMUNITY

Project Name	Beneficiary	Objective
Interactive Activities for Revision of Body Systems	Rumah Victory Children and Youth Home	1. To help the children understand the structure of the human body and the importance of social interaction.
Importance of Vaccination	Alliance of Chin Refugees	1. To shed light upon the importance of vaccines, elaborating upon their protective qualities, as well as dispelling rumours regarding the false information on vaccines.
Hygiene Awareness at Alliance of Chin Refugees		<ol style="list-style-type: none"> <li>1. To raise awareness of proper food handling, communal hygiene as well as oral and hand hygiene through educational talks and interactive games.</li> <li>2. To provide IMU students an opportunity to educate the underprivileged and to give back to the community.</li> </ol>
Day Trip with the children at Ti-Ratana	Ti-Ratana Social Welfare Society	1. To explore each career and understand the roles and responsibilities expected of different occupations.
How to Maintain Proper Sitting Posture	IMU Bukit Jalil Campus	<ol style="list-style-type: none"> <li>1. To demonstrate good sitting postures and stress their importance.</li> <li>2. To demonstrate a few exercises that can help to keep the body in a good form.</li> </ol>
Ovitrap Surveillance and Dengue Awareness Survey	IMU Bukit Jalil Campus	<ol style="list-style-type: none"> <li>1. To reduce the risk of dengue in the Bukit Jalil campus.</li> <li>2. To gauge the dengue awareness among MBBS students at Bukit Jalil campus.</li> <li>3. To raise awareness of dengue prevention and control through posters and educational campaigns.</li> </ol>
"Let's Speak English!"	United Learning Centre – Kuala Lumpur	<ol style="list-style-type: none"> <li>1. To improve the standard of English among the children currently attending United Learning Centre.</li> <li>2. To serve and give back to society by teaching and instruction.</li> <li>3. To provide a platform for IMU students to apply what they have learned in class by serving the children.</li> </ol>
Health is Wealth	Rumah Victory Elderly Home	<ol style="list-style-type: none"> <li>1. To create awareness of the benefits and aspects of good health.</li> <li>2. To teach the elderly about BMI.</li> <li>3. To advise the elderly on their nutrition intake and the benefits of exercise.</li> <li>4. To engage the elderly in a simple exercise routine.</li> </ol>

Project Name	Beneficiary	Objective
Stand Straight to Feel Tall	Rumah Victory Children and Youth Home	<ol style="list-style-type: none"> <li>1. To raise awareness of the importance of maintaining a proper posture, which affects spinal health.</li> <li>2. To enhance the children's understanding of stretching exercises and warming up and cooling down before and after exercise.</li> <li>3. To provide a platform for IMU students to apply what they have learned in class by serving the children.</li> </ol>
Me and My Body: Muscular System	Rumah Victory Children and Youth Home	<ol style="list-style-type: none"> <li>1. To teach the children how the body works, specifically the musculoskeletal system.</li> <li>2. To increase the awareness of proper exercise techniques to prevent injuries.</li> </ol>