

An illustration of a woman with long dark hair hugging a child from behind. The woman has her eyes closed and a gentle smile. The child is wearing a light blue shirt. They are surrounded by stylized blue leaves and small blue flowers. The background is a solid blue color.

COMMITTED TO HEALTH, WELL-BEING AND SAFETY

Sustainability Report 2020

Non financial Report

IVIRMA)
Global

CONTENTS)

01

ABOUT THIS
REPORT

02

ABOUT US

03

COMMITTED TO RISK
MANAGEMENT AND
SAFETY

04

ANALYSIS OF
MATERIALITY AND
INTEGRATION OF
SUSTAINABLE
DEVELOPMENT
OBJECTIVES

05

COMMITTED TO
PATIENTS

06

COMMITTED TO
PEOPLE

07

COMMITTED TO
THE PLANET

08

COMMITTED TO
HUMAN RIGHTS

09

COMMITTED
TO ETHICAL
MANAGEMENT

10

COMMITTED
TO SOCIETY

11

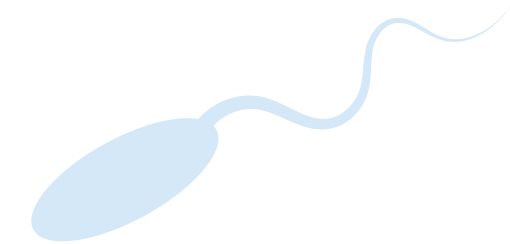
COVID-19 CONTEXT
IN IVIRMA

12

ANNEXED

13

TABLE OF
CONTENTS



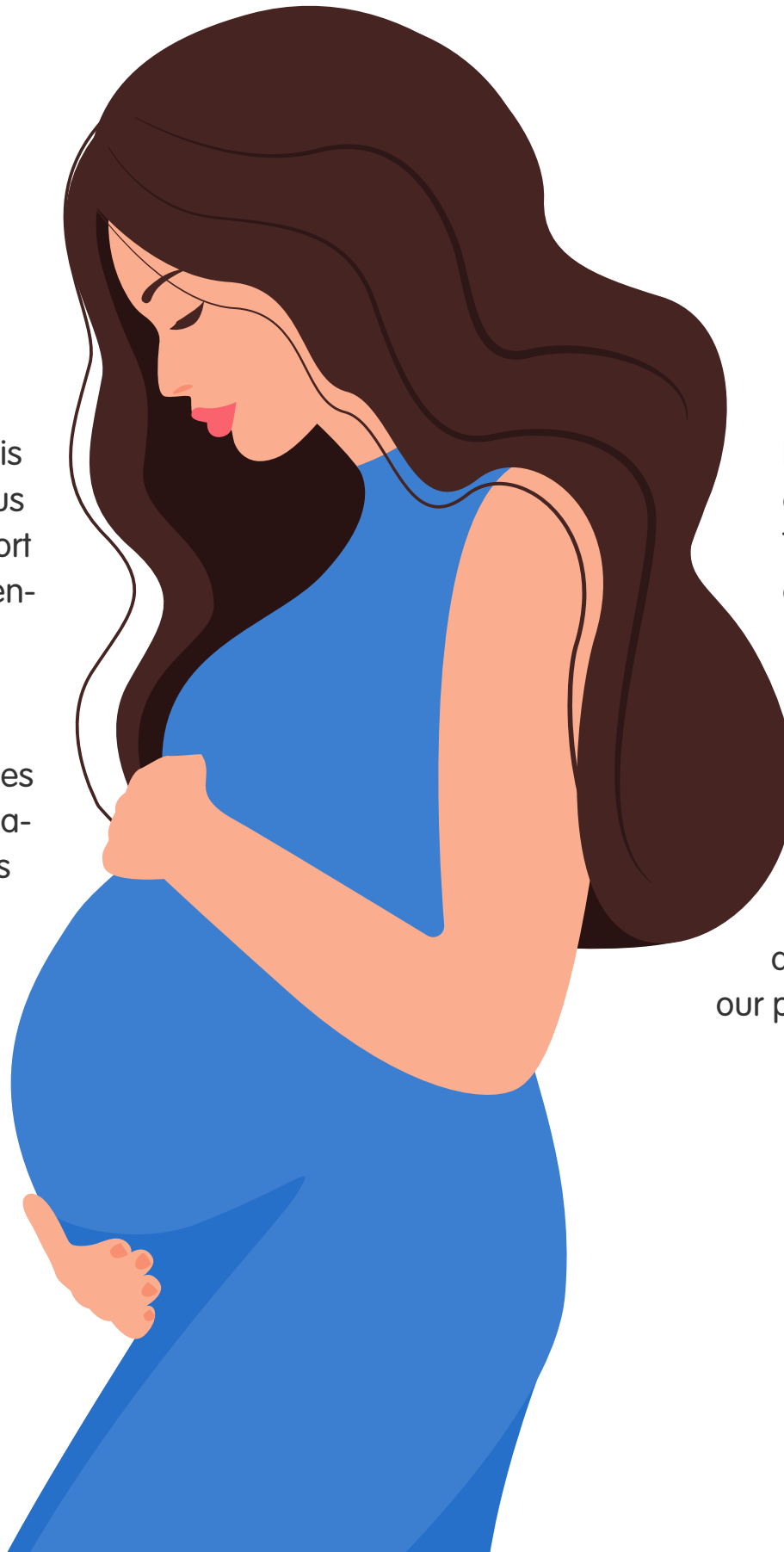
2020, A YEAR OF ONGOING COMMITMENT TO HEALTH, WELL-BEING AND SAFETY

Looking back at 2020 -with everything that the COVID-19 pandemic has changed- is both challenging and an opportunity to reinvent ourselves as a business and to focus on what's really important. For this reason, we would like to begin this Annual Report by thanking our professionals who, with their courage, commitment and tireless endeavor, have been the key to ensuring that health takes precedence.

At this time of uncertainty, addressing social, environmental, and economic challenges requires multilateral responses from all sectors. This is crystallized in the 17 Sustainable Development Goals -approved in 2015 by 193 UN member states- which address humanity's greatest challenges from a global and cross-cutting perspective. They are a mandatory guide for everyone, and we at IVIRMA do our bit too, with a special focus on achieving SDG 3, Health and Well-being. The health, well-being and safety of our stakeholders will continue to be a strategic priority, as well as the introduction of a true preventive culture based on collaboration, teamwork, strong commitment, and participation of all employees and interested parties.

In this complex setting, technology and digital innovation are essential in management of Reproductive Medicine. The path of digitalization at IVIRMA has no turning back, and in our company we face this paradigm shift with our homework done and with the conviction that digital transformation is the present and the future of our company.

One of our key commitments will continue to be Genetics, through continuous research for the birth of a healthy baby and that will allow us to continue providing clinically useful information of the highest quality for our patients.



This 2020, more than ever, to speak of IVIRMA is to mention:

We are **pioneers** in assisted reproduction, thanks to which more than 200,000 children have been born worldwide. This has been possible thanks to the dedication of our medical team that is always at the forefront of reproductive medicine.

In achieving **excellence**, we have an obligation to train future professionals, to share our knowledge and to be constantly learning and training.

Research is one of our essential pillars, with the focus firmly on perfecting our treatments and techniques to maximize the chances of success in the treatments of our patients.

Our **success rates** are audited each year by an independent third-party company and are only possible thanks to our commitment to scientific research, the quality of all our processes, the 1,900+ scientific publications dedicated to solving the infertility problems we work on and, above all, the high level of training of all our specialists. In summary, this means we can offer our patients the best results year after year.



To speak of IVIRMA is not only to talk about commitment to society, which has helped us to become world leaders in reproductive medicine, but also of a philosophy of teamwork that has led us to remain in constant growth and the search for values.

Times are hard, but if we have pursued this path for thirty years we are not about to deviate now.

Giving the best for the future of Reproductive Medicine remains and will always remain our guiding purpose.

IVIRMA Board of Directors

01 ABOUT THIS REPORT



ABOUT THIS REPORT

At IVIRMA we are committed to our stakeholders. For this reason, once again this year, we publish this report with the same reporting transparency as the previous report, published in June 2020.

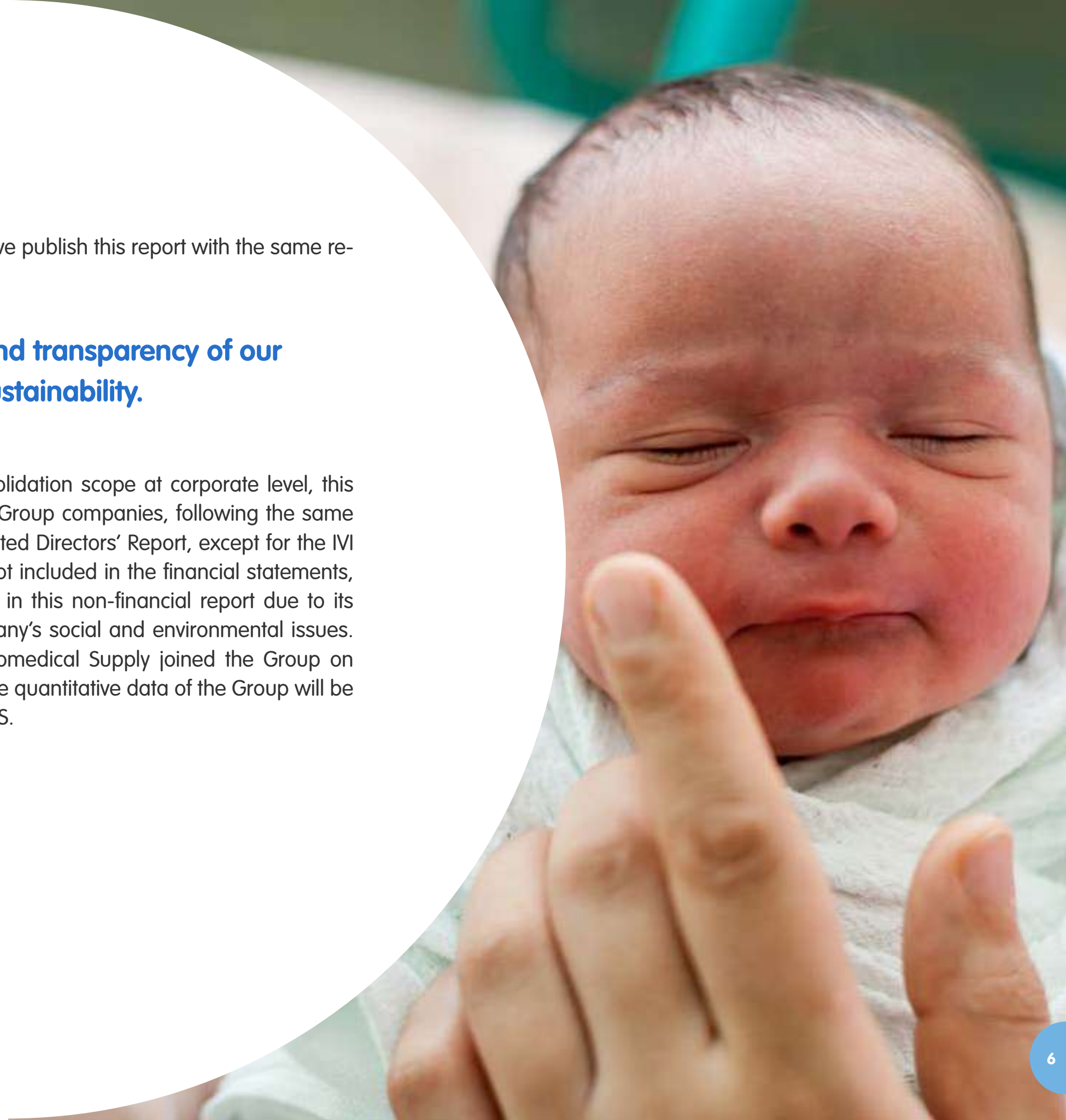
This is the third year that IVIRMA has promoted the disclosure and transparency of our work, revealing the organization's performance in the field of sustainability.

The content of this **Sustainability Report or Non-financial Information Status Report** has been drawn up in compliance and in line with the requirements set out in **Law 11/2018**, of December 28, on non-financial information and diversity.

This report, which is available on our corporate website, **accompanies the financial statements and the consolidated directors' report for 2020 and is prepared on an annual publication cycle**. In this document we provide a rigorous summary of our ethical, social, environmental, and corporate governance performance in the countries in which we operate for the period from January 1 to December 31, 2020.

The economic information in this Report corresponds to the data included in the consolidated financial statements of the IVIRMA Group.

In relation to the consolidation scope at corporate level, this document includes all Group companies, following the same scope as the consolidated Directors' Report, except for the IVI Foundation, which is not included in the financial statements, although we include it in this non-financial report due to its relevance in the company's social and environmental issues. Moreover, although Biomedical Supply joined the Group on December 28, 2020, the quantitative data of the Group will be included in the 2021 NFS.



PRINCIPLES OF CONTENT AND QUALITY OF INFORMATION

The requirements and guidelines set out in **the Global Reporting Initiative's** GRI Standards (2016 and 2018) have been taken into account in the drafting of this Report. In addition, a GRI index has been included to facilitate the location of the contents specified by these standards.

To determine the content of the information, the basic criteria established by the GRI have been taken into account:



Stakeholder engagement

The interests and expectations of stakeholders have been integrated throughout the process to respond to the needs shown by the different stakeholders with which we interact.



Sustainability context

This Report aims to reflect IVIRMA's relationship with the environment in a general context of sustainability and considering the impacts arising from the activity of our organization.



Materiality

Based on the Materiality Analysis, it was possible to determine the economic, social and environmental aspects that were material for IVIRMA. This meant the study was able to conclude that these were the topics with a greater degree of importance for the organization and its stakeholders



Completeness

The information set out in this report has been developed in a reasoned and appropriate manner, giving a response to and covering all the material topics.

In addition, the following principles have been considered to determine the quality of the information contemplated in this Sustainability Report:



Balance

This Report presents a balance between the positive and negative aspects arising from the company’s activity.



Timeliness

The information provided corresponds to 2020, in this case specifying the period covered by the Report.



Accuracy

The information presented is accurate and detailed.



Clarity

The wording of the content has been carried out in order to be properly understood.



Comparability

The information presented follows a calculation methodology and works in a standardized way to foster comparability with other organizations, as well as to be able to assess the company’s performance in forthcoming years.



Reliability

IVIRMA has different audited and certified management systems that support the transparency, accuracy and reliability of the information provided in this Report.

Furthermore, for those aspects required by law and for which the GRI standard does not consider a specific indicator, other indicators have been created that can respond to these requirements, following the GRI principles.

The breakdown with the index of contents referring to Law 11/2018 and the GRI standard can be found in the final section of this Report. For any doubts or questions regarding this report and its content, queries can be processed through: RSC@ivirma.com

02 ABOUT US



A SOLID ORGANIZATIONAL STRUCTURE

We are a network of clinics that provides a comprehensive service of reproductive medicine and whose parent company IVIRMA Global acts as a Spanish limited liability company.

We have a strong international presence, in fact, we operate in 9 countries: Spain, Portugal, Italy, UK, USA, Panama, Argentina, Brazil and Chile. In addition, we have two offices that act as headquarters: one in Valencia (Spain) and the other in Basking Ridge (New Jersey, USA).

The **Board of Directors** is the governing body of IVIRMA Global and is responsible for making strategic decisions in the organization and approves, inter alia, the company's general strategy and policies and supervises the evolution and results. This governing body comprises five directors and meets several times each year.

In the second instance, **strategic decisions** are shared with the Steering Committee, which comprises the directors of each area, the Vice CEO and the CEO. Its meetings are held on a weekly basis.

The delegation of the Board's functions to specific areas is conducted through specialized cross-cutting committees that assist in management of the Board of Directors.

IVIRMA Group Committees:

Sustainability Committee: in Spain, this is the committee that transversely manages the company's sustainability and social action.

Procurement Committee: in Spain, the body that ensures that purchases are made efficiently and responsibly. It meets weekly.

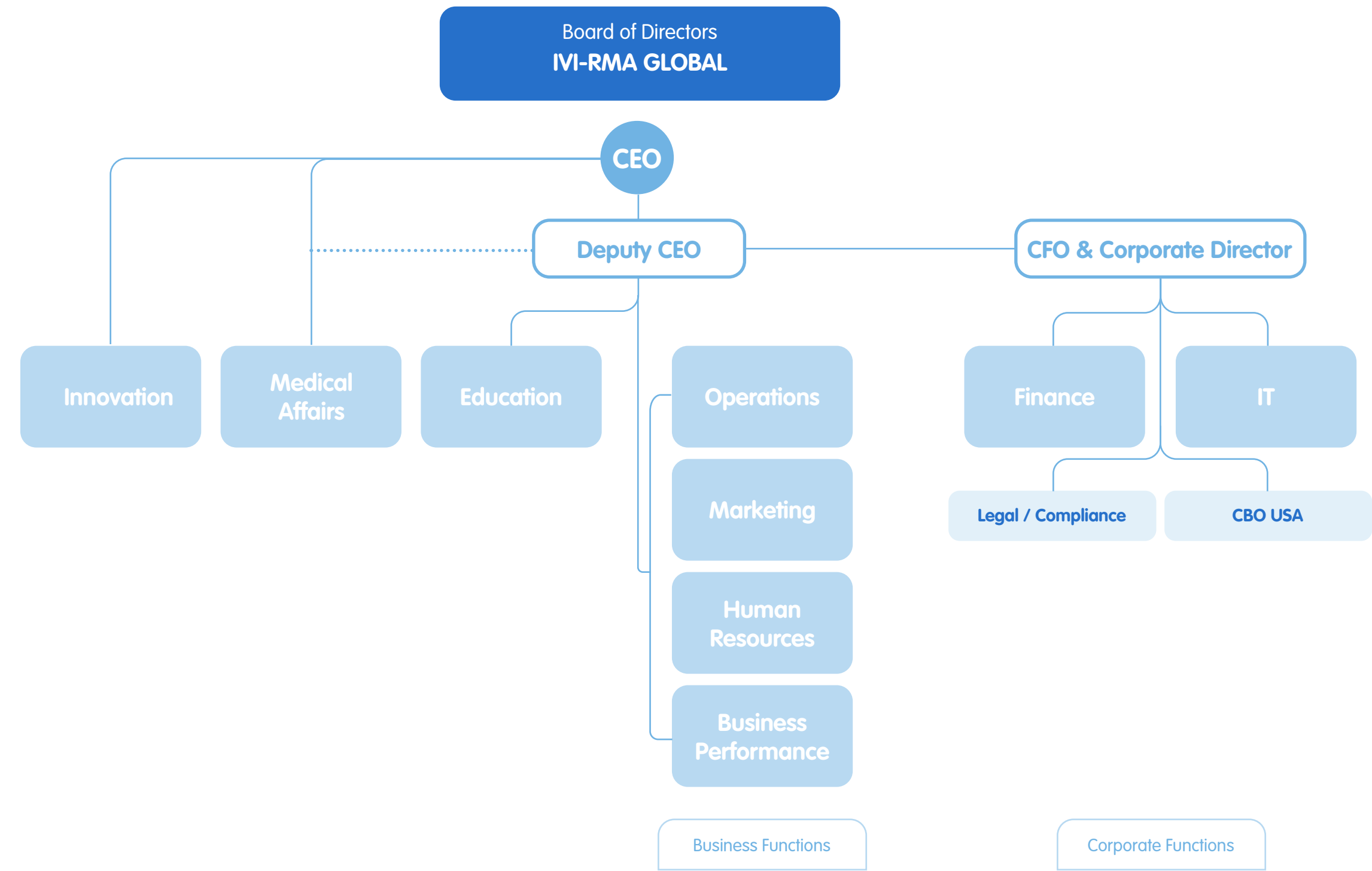
Center Management Committee (CMC): in Spain, this committee comprises the Director and Managers or Coordinators of each area of the clinic whose objective is to share and transmit relevant information at corporate and clinical level.

Research Ethics Committee (REC) IVI Valencia: in Spain, specifically in the Community of Valencia. It is a Committee expressly accredited by the Directorate General for Research, Innovation, Technology and Quality of the Regional Ministry of Universal Healthcare and Public Health. Its main aim is to assess and follow up on the Clinical Research Projects that are presented to it. Its territorial scope of action covers all IVIRMA centers in the Community of Valencia, but extends to projects that go beyond this geographical boundary, provided that an IVIRMA center located in this area is involved.

IVIRMA’s core aim is to offer the best assisted reproduction techniques to our patients, employing the most efficient management model and striving for excellence, thus ensuring that they continue to choose us every time.

Our **organization chart** is structured to be able to respond to market demands and stakeholder needs, especially our patients.

Our areas



The clinics that make up IVIRMA are the key to our project, as they enable us to offer the finest patient experience and continue to be the best place to be born.

The centers that IVIRMA has all over the world, as well as the daily work that all the professionals of this company perform in their respective clinics and work centers, make it possible for us to continue to fulfil the wishes of hundreds of women and couples who entrust us with their overwhelming desire: to become parents.

The **patient** is and will always be the focal point of our activity, so our efforts are always aimed at offering them the best care and experience on their way to parenthood.

To achieve this, **continuous improvement** is the horizon we constantly strive towards, with the constant goal of optimizing our processes and achieving the optimum results; this is all evidenced in the arrival of **over 200,000 babies that give IVIRMA meaning.**

Continuous improvement is the path we follow at IVIRMA to continue offering the best care and experience to our patients.



Significant changes in the organization

IVIRMA has appointed Antonio Pellicer, one of the founders, as the organization's new CEO. This has been the main change that has taken place during 2020 and has particularly affected IVIRMA's internal organizational structure.

In this regard, it should also be noted that Bio-medical Supply, a company specializing in the distribution of products for Assisted Reproduction, joined the Group on December 28, 2020.

In 2020, IVIRMA has continued to develop its corporate strategy following the principles of sustained and sustainable growth, based on strategic goals that allow, thanks to their progressive achievement, excellent results to be achieved. To achieve this sustainable growth of the company, it is essential to respond to the expectations of our stakeholders, as well as the continuous satisfaction of their needs.

WHERE LIFE IS BORN

In our company we have been offering the leading assisted reproduction techniques since 1990, thanks to which more than 200,000 children have been born around the world. Since the beginning of 2017, IVI has been the largest Assisted Reproduction group in the world, with 61 clinics in 9 countries, following its merger with the American RMANJ.

During all these years of IVIRMA's journey, patients have always been the driving force behind what we do.

During these three decades of activity, patients have been the driving force behind what we do. Accordingly, the personalization of all our treatments, as well as the experience of our patients, have acquired huge relevance for us, in our commitment to offer all of them the best process to achieve their goal.

In 2020, **around 45.000 people visited our centers** for an initial diagnosis. In addition, **48.000 assisted reproduction procedures were performed**, including all available techniques and treatments.

At IVIRMA we are constantly working to improve our clinical results, which are audited by the independent company SGS. The certified figures for 2019 support this:

Our success rates both with In Vitro Fertilization and Egg Donation are around 70% to 80% in a single attempt, while the cumulative rate at three attempts in both cases is very close to 100%.



With your own eggs, in one cycle, there is a 70% chance of getting pregnant (using all the embryos generated in a puncture or oocyte retrieval through one or more embryo transfers), reaching 95% after three attempts.

As regards the Egg donation treatment, in the first attempt there is an 80% chance of getting pregnant (using all the embryos obtained in that donation cycle, but in one or more transfers), reaching 99% in the third attempt.

The 2020 figures will be collected in the 2021 Report via the auditing processes themselves as these are not verified until mid-2021, ensuring the necessary time in line with the treatment and pregnancy times.

By the same token, with the aim of continuing to improve and offer the best service to our patients, we have introduced group policies that have allowed us to achieve the following **clinical improvements**:



We have increased the implantation rate by 6 percentage points in egg donation treatments and 8 percentage points in egg donation treatments over the last 5 years.



We perform elective single embryo transfer (SET) in almost 100% of the cases.

In the **network of clinics** that make up IVIRMA we carry out all the treatments and techniques available in reproductive medicine, making use of the most advanced technology and offering the most advanced tests in the reproductive sector, always in accordance with the prevailing legislation in each country.

In this regard, in accordance with the regulations of each country, we also provide **innovative solutions to the needs of our patients through**:

- Preimplantational genetic diagnosis
- Non-invasive prenatal test
- Gamete donation



We have reduced the number of multiple and twin pregnancies by 17 percentage points in the last 5 years.



100% of embryo transfers are of blastocysts.

IVIRMA has 61 clinics in 9 countries and receives patients from over 180 countries:

- **Spain:** Alicante, Almería, Barcelona, Bilbao, Burgos, Cartagena, Castellón, Gerona, Ibiza, La Coruña, Las Palmas, Lérida, Logroño, Madrid – Aravaca, Madrid-Centro, Madrid-Alcorcón, Málaga, Mallorca – Palma, Mallorca- Manacor, MiniFIV, Murcia, Pamplona, Salamanca, Santander, San Sebastián, Sevilla, Tenerife, Valencia, Valladolid, Vigo, Vitoria, Zaragoza.
- **USA.:** 6 locations and 19 clinics:
 - RMA of New Jersey: Basking Ridge (NJ), Eatontown (NJ), Englewood (NJ), Freehold (NJ), Marlton (NJ), Morristown (NJ), Princeton (NJ), Somerset (NJ), Springfield (NJ), West Orange (NJ)
 - RMA of Lehigh Valley: Allentown (PA)
 - RMA Philadelphia: King of Prussia (PA), Langhorne (PA), Philadelphia (PA), Willow Grove (PA).
 - RMA of Florida: Lake Mary (FL)
 - RMA of Southern California: Los Angeles (CA)
 - RMA of Northern California: Palo Alto (CA), San Francisco (CA)
- **Portugal:** Lisbon, Faro
- **United Kingdom:** London
- **Italy:** Rome, Milan, Bari
- **Panama:** Panama City
- **Chile:** Santiago de Chile
- **Argentina:** Buenos Aires
- **Brazil:** Salvador de Bahía

It also has two head offices in Spain and the USA (legal forms in Spain “IVI RMA GLOBAL” and “EQUIPO IVI” and in the USA “IVI AMERICA”) and a genetic diagnosis center “Juno Genetics”.

At IVIRMA we have a wide range of scientific production, which has earned us some of the most important awards in our specialty, such as those granted by the *American Society for Reproductive Medicine, the Society for Gynecological Investigation, the Fundación Salud 2000 or the Sociedad Española de Fertilidad.*

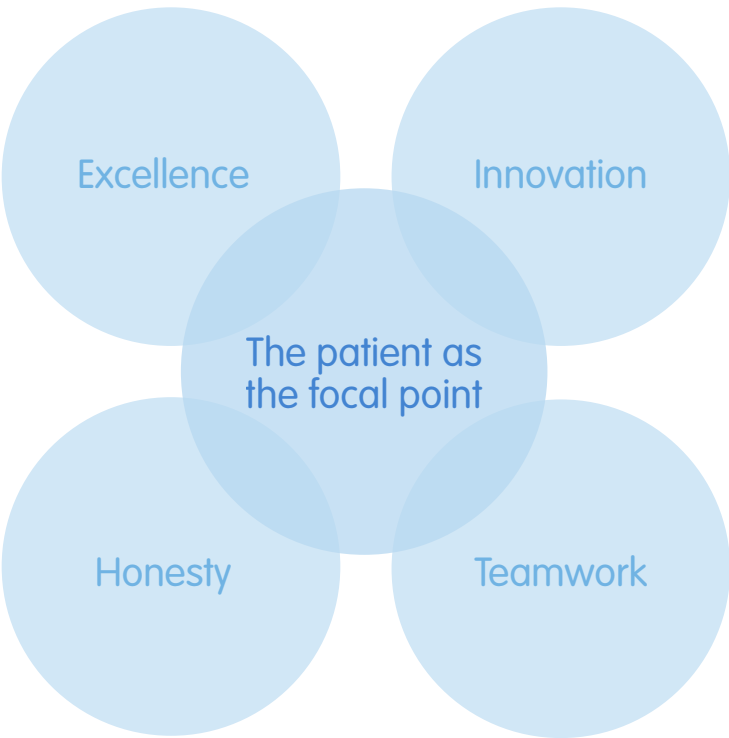
This recognition has its origin in the need to invest in Research and Development something that we have always had in mind at IVIRMA, which is why the IVI FOUNDATION was created. The research and teaching purpose of the foundation directly benefits patients, since it allows permanent training of our professionals thanks to the continuous work of study and participation in conferences and meetings around the world.

WHAT MOVES US

IVIRMA's **mission** is to develop reproductive medicine at the highest level, promoting research, teaching and dissemination of knowledge and professional excellence.

Our **vision** is to be a leading team worldwide in the field of reproductive medicine, becoming the group with the most prolific presence and with the best clinical results. We aim to be an international benchmark in quality care, research and teaching.

All this based on the development of people and team spirit as essential pillars of the project and fostering the following **values**:



The company's action principles are enshrined in **IVIRMA's Code of Conduct** with the aim of ensuring responsible behavior in accordance with our values.



STAKEHOLDERS

At IVIRMA we encourage an attitude of active listening with our stakeholders

Through the identification of our **stakeholders** and through our listening system, we are aware of the perceptions, risks and opportunities that allow us to hone our strategies to improve their satisfaction.

We carried out the initial identification of our stakeholders in 2013 and revised it in 2018 to adapt it to the company’s new reality. During 2019, it was also adapted to the Quality Management System.

At the beginning of 2021 and within the framework of this report, we carried out a materiality analysis that has allowed us to identify the relevant issues for both IVIRMA and our stakeholders. The results of this analysis can be found in *Chapter 4. Materiality analysis of this report.*

A review process is regularly carried out in coordination with the different areas involved to validate the existing communication channels with stakeholders and their possible information needs:



Patients



Employees



Corporate Governance



Medical Community



Society



Donors



Public Administration/
Regulators



Suppliers



Media

Stakeholder	Communications channe	Frequency	Interest/expectations
1. Patients	<ul style="list-style-type: none"> Website Marketing actions Newsletter Telephone Consultation Social networks APP Suggestions box Satisfaction surveys WhatsApp 	<ul style="list-style-type: none"> Always available Multiple each year Monthly Always available At least two in each treatment Always available Always available Always available in clinic Throughout the patients' process Always available 	<ol style="list-style-type: none"> Ongoing search for information to choose IVI. Search for medical and corporate type information. Sending personalized information for each family project chosen. To be listened to and taken into account in decisions to improve Fulfil their desire to be parents in the shortest time and with the best guarantees.
2. Employees	<ul style="list-style-type: none"> Internal Meetings Work climate surveys Employee portal Notifications CC (Center Committee) "We are IVIRMA" portal 	<ul style="list-style-type: none"> In the majority of Business Units, fortnightly Biennial Always available Daily / Weekly Monthly Always availabl 	<ol style="list-style-type: none"> Joint work for the success of the organization. Alignment of personal interests with corporate interests. Reliable and plentiful information.
3. Corporate governance	<ul style="list-style-type: none"> Meetings of Governance bodies Corporate Information Systems, reports 	<ul style="list-style-type: none"> Several times over the year Always available 	<ol style="list-style-type: none"> Need for information to make strategic decisions regarding the business.

Stakeholder	Communications channe	Frequency	Interest/expectations
4. Medical Community	<ul style="list-style-type: none"> • Conferences • Ongoing training through Global Education • Visits to doctors through our Field Marketing program. • Scientific collaborations. Joint development works 	<ul style="list-style-type: none"> • Depending on the Conferences • Always available • Weekly • Permanent. Depending on the scientific-type objective/goal 	<ol style="list-style-type: none"> 1. Update on IVI medical procedures necessary for praxis. 2. Quest for synergies in business and scientific production.
5. Society	<ul style="list-style-type: none"> • Communication media • Marketing actions • Networking of patients • Periodic contact with non-profit organizations with whom we collaborate • Meetings with Patient Associations 	<ul style="list-style-type: none"> • Daily • Multiple each year • Ongoing • Frequency not established • Frequency not established 	<ol style="list-style-type: none"> 1. Social content (quality of care, research, innovation, etc.) of the IVI activity, must be transmitted. 2. Interest on the part of the NGOs and associations in establishing enduring links, both in the field of social action and the defense of their associates.
6. Donors	<ul style="list-style-type: none"> • Website • Marketing actions • Medical consultation • Social networks • APP • WhatsApp 	<ul style="list-style-type: none"> • Always available • Multiple each year • At least two in each treatment • Always available • Always available • Always available 	<ol style="list-style-type: none"> 1. Medical information about the donation process. 2. Financial information on the payments by donation. 3. Non-disclosure.

Stakeholder	Communications channe	Frequency	Interest/expectations
7. Public administration	<ul style="list-style-type: none">Public control mechanismsNational Commission of Assisted Reproduction (CNRA)	<ul style="list-style-type: none">Ongoing in different areasDepending on the cases	1. Necessary supervision of medical activities, issuance of licenses and authorizations.
8. Suppliers	<ul style="list-style-type: none">Decisions of the Procurement Committee based on the evaluation of suppliers.Public corporate informationExhibitions, conferences	<ul style="list-style-type: none">Annual evaluation of the Procurement DepartmentAlways availablePeriodically	1. Search for information for performance of commercial activities
9. Mass media	<ul style="list-style-type: none">Press releasesInterviewsPress conferencesTestimonials	<ul style="list-style-type: none">Weekly	1. Assisted reproduction as a current topic. 2. Search for a permanent contact with a reputation, a benchmark in the sector.

Key stakeholder engagement

At IVIRMA we encourage **communications to create value for our stakeholders**. In this regard, during 2019 we have continued working to reach all of them through the multiple communications in our different corporate channels.

- **Patient Events**
 - Talks and events for patients: 51 (8 face-to-face and 43 online)
 - Attendees: 1,602 attendees (4,272 registrations)
- **Media:**
 - Number of press releases sent: 20 (+ translations into the relevant languages)
 - Number of Expert Statements sent to the media: 12
 - Number of impacts: 678
- **Audio-visual production: 50 videos**
- **Social Media:**
 - FB: 121.084 fans
 - Instagram: 51.990 followers
 - LinkedIn: 12.633 followers
 - Twitter: 18.910 followers



OUR EFFORT AND COMMITMENT IS REWARDED

Acknowledgment of our work

All the work of the people who are carrying out the IVIRMA project has been recognized throughout 2019 by experts in the sector in different settings, including the world's most important congresses.

These recognitions and milestones allow us to verify that we are moving in the right direction to continually offer the best reproductive medicine and experience to our patients.

IVIRMA has been recognized with three awards at the ASRM Congress

During the **76th edition of the Congress of the American Society of Reproductive Medicine (ASRM)**, **IVIRMA was recognized with three awards** that reward its constant and extensive research work. On this occasion, the Star Awards were given to three Valencian researchers for their 10-year career paths at the ASRM: Prof. Antonio Pellicer and doctors Marcos Meseguer and Nicolás Garrido.

Safer assisted reproduction

Now more than ever, safety is a fundamental pillar for IVIRMA. For this reason, the vast majority of the research we have carried out pursues advances in safety and precision, to offer the best possible guarantees to the women and couples who visit our clinics to achieve what they most desire.

In fact, one of the most important pieces of research that IVIRMA has presented at the ASRM is focused on improving the technique of oocyte vitrification: "One of our studies presented at the ASRM shows how the use of nitrogen at -210°C for the vitrification of embryos could increase the survival rate of these", explains Dr. Antonio Requena, medical director of IVIRMA.

Acknowledgement as a responsible company

Mutua Universal's Institutional Award for Occupational Risk Management

During 2020, a period in which a safe and healthy environment has been fundamental, the panel of Mutua Universal recognized IVIRMA Global for its commitment to sustainability in prevention and the creation of a safe and healthy environment for professionals.



Milestones

Artificial Intelligence in embryo selection: a reality thanks to our commitment to ongoing innovation

IVIRMA took part in the development of EmbryoScope, an incubator with time-lapse technology launched with the aim of helping in the **development of automatic embryo selection**. Based on EmbryoScope, the KIDScoreD5 was presented, newer software that allows for automatic embryo selection and classification.

Artificial Intelligence (AI) has allowed the creation of the KIDScoreD5 system, which analyzes and classifies embryos automatically, increasing the probability of gestation and pregnancy.

To achieve the development of this advanced software, IVIRMA has conducted a study over the last three years, with the largest casuistry of scientific history thus far, analyzing 20,000 embryos and 3,000 patients.

Through this study, the embryology sector has been revolutionized, permitting a universal, standardized and automatic embryo selection.

SET as a universal policy at IVIRMA

To talk about safety at IVIRMA is also to speak of **obtaining a healthy baby, and the safety of the mother in her treatment**. These two aspects are the watchwords of IVIRMA.

Reduction of 30 percentage points of multiple pregnancies in IVIRMA and commitment to single embryo transfer (SET)

In this regard, IVIRMA has reduced the rate of twin pregnancies by 30 percentage points in the last ten years, due to the risks (prematurity, low birth weight, hypertension, etc.) that such pregnancies entail. Our commitment to the safety of our patients and their babies has increased our single embryo transfer rates to 91.5% per cycle in IVF and 99% in egg donation.

Add to that the current rate of twins, which is just 4%, the same as the national rate of naturally conceived twins, which is 2.4%, according to the Centers for Disease Control and Prevention.

At IVIRMA, as well as being pioneers in auditing our data through third parties, we validate them annually through SGS, a world leader in inspection, verification, testing and certification. In Spain, this allows us to be extremely precise when comparing our data with those of the [SEF \(Spanish Fertility Society\)](#), and in this comparison we extract conclusive data such as the fact that our rate of implantation **with our own oocytes is almost twice the national average in most Autonomous Communities and the gestation rate is around 15% higher than the average**.

The results obtained at IVIRMA allow us to help our patients complete their dream of becoming mothers, irrespective of their previous treatment history, or the complexity of their case.

Time and age in assisted reproduction

Many of the advances in assisted reproduction that we have developed allow us to act positively to improve the chances of success in groups of patients with low ovarian reserve and/or advanced age.

- **Oocyte vitrification.** This allows the preservation of one's own gametes in order to decide to use them when the biological, socioeconomic and emotional clocks come together.
- **Ovarian rejuvenation studies.** The diagnosis of premature ovarian failure or premature menopause means the loss of fertility, an immediate problem for many women affected and that can also affect many others in the future. This means that the most viable option for most of these women is egg donation or, alternatively, other methods, such as adoption.

However, numerous working groups have been formed to investigate how to restore ovarian function.

- Use of mesenchymal stem cells (ASCOT), especially useful for their ability to self-renew and differentiate into specific tissues according to the surrounding environment and a specific set of signals.
- Injection of plasma enriched with growth factors (IVI OVARIAN REGENERATION), which will allow us to restore and repair the physiological processes involved in follicular recruitment and which will help to recover ovarian function.
- Ovarian fragmentation for follicular activation (OFFA), a process in which we take advantage of the presence of residual follicles in the ovary to activate and recover them, thus improving ovarian function.

Given the potential and benefits of these procedures for the patients involved, it is our commitment to implement them within our clinical activity in the framework of the Ovarian Rejuvenation Unit of Excellence



03 COMMITTED TO RISK MANAGEMENT AND SAFETY





SUSTAINABILITY GUIDES US

Sustainability forms part of all IVIRMA's initiatives and represents a fundamental pillar in our corporate strategy, which is bolstered through our **Sustainability Committee**, comprising key people from each corporate area.

In this regard, we are convinced that **sustainability must be a cross-cutting element throughout the organization** that has a positive impact on all areas and serves as an engine for long-term sustainable growth.

At IVIRMA we understand sustainability as a way of doing business with a conscience and which is the result of listening to our stakeholders.



STRATEGY AND RISK MANAGEMENT

Strategic planning

IVIRMA's strategy is articulated through strategic plans that translate into action plans in the company's different areas. The purpose of this management is to be able to respond to the company's strategic goals.

Along with the appointment of the new CEO, during 2020 at IVIRMA we have ratified the strategic goals that have been communicated to the company's different management bodies to transfer the common goal to the entire organization.

IVIRMA's strategy is dynamic and adapts to the sector's changing reality, given its context of global consolidation and the inflow of financial funds.

Based on the strategic plan, each specific area of IVIRMA implements its annual plan that includes specific management-approved goals. These annual plans include a regular tracking process to verify compliance with the goals set.

The strategic goals are as follows:

- Increase our conversion rates.
- Increase growth to take reproductive medicine anywhere.
- The clinical excellence and efficiency of our operations.
- Research, innovation and teaching as a lever for generating value.

At IVIRMA we always ensure we allocate resources to economically sustainable projects when we open a new clinic or start a new business. We do this by carrying **out a profitability, feasibility and potential risk analysis**, with a 5-year business plan. In addition, the business is monitored to identify areas for improvement and potential risks.

We **monitor all IVIRMA clinics on a monthly basis**. This analysis, which is conducted at a global level, allows us to know the evolution of the clinics and to introduce actions for improvement. In fact, during 2020 a balanced scorecard has been implemented for all IVIRMA clinics, which includes the main operational indicators. This is to continuously monitor the company's activity and facilitate decision-making at corporate level.

In addition, from our Medical Affairs Department we carry out monthly benchmarking between clinics with a detailed follow-up of procedures and results, annually updating the

objectives and group policies, guaranteeing that all our patients receive the same quality of care.

Likewise, in our strategic approach we take into account the key factors and trends that may affect the future performance of the company and the determining factors that could affect the evolution of our activity, such as legislative changes, fluctuations in the population pyramid, variations in policies that affect public health and more specifically the field of assisted reproduction, or the increase in competition in the reproductive sector.

Management system policy

In December 2020 we reviewed the **Management System Policy** to ensure that it remains in line with our mission, vision, values and strategic direction. This policy applies to all clinics in Spain, Italy, Portugal, UK and LATAM.

The policy establishes the basic lines of quality management and risk management and sustainability, which all staff know and must respect and accept, and it is still in force:



- Sustained and sustainable growth based on excellence and innovation.
- **Scientific-technical leadership:** The people who work at IVIRMA maintain a high level of training and recycling so that the scientific content of their activity is as high as possible and always appropriate to patients' needs.
- To be a **benchmark in Quality Healthcare**, focusing on the identification, analysis and elimination of any risk; for us the patient comes first. The shared medical decision, as well as the creation of a safe environment and process for the patient, implementing the necessary controls, indicators and reviews to notify, prevent and mitigate the risks identified, form part of the essence of a service of the utmost quality.
- To offer personalized and highly specialized care in order to exceed the expectations of patients and, consequently, secure their satisfaction.
- IVIRMA regularly reviews the Management System and is committed to **ongoing improvement** and the incorporation of the KAIZEN culture throughout the organization
- To improve the **skills, motivation, safety culture and satisfaction** of our professionals that, in turn, will lead to enhanced patient satisfaction.
- To actively contribute to the **protection of the environment and the prevention of pollution**, adopting all necessary measures to avoid or minimize the environmental impacts from the consumption of natural resources and the generation of waste in our activities.
- To guarantee service quality through compliance with legislation, regulations and national and international recommendations.

Quality and risk management system

Our **Quality and Risk Management System** has been developed in accordance with the requirements established in the UNE-EN-ISO 9001, UNE 179007 standards for laboratory quality management and the UNE 179003 standard for patient safety management.

The Quality and Risk Management System is reviewed and audited every year (internally and externally). The **scope** of the system includes the provision of reproductive medicine, gynecology, obstetrics and andrology services.

The IVIRMA centers that, as of December 31, 2020, are certified with the Quality Management System by an independent certification body are listed below. The standards on which these certifications are based are also specified:

- ISO 9001: Head offices and clinics in Spain*, Lisbon, Panama** and Chile.
- UNE 179007: Head offices and clinics in Spain and Lisbon*
- UNE 179003: Head offices and clinics in Spain and Lisbon*

The services provided by IVIRMA focus on offering patients a broad range of services of the highest quality and safety in the field of assisted reproduction.

Within this framework, we have developed a **strategic planning process** through which an analysis of the internal and external context is carried out and objectives and lines of improvement are established.

IVIRMA’s process map identifies 45 processes divided and classified according to their typology: strategic processes, key processes and support processes. In the review carried out in

September 2020, specific processes of the Environmental Management System deployed at IVI Mallorca were incorporated.

By the same token, there are multiple **standardized work procedures** in all areas (Laboratories, Consultation, Operating Room, Patient Care, etc.) that serve to standardize how the work is to be performed.

Access to these documents is guaranteed through our **document management system** to all personnel who require such access.

**Due to the effects of the SARS-COV2 pandemic, the move to IVI Panama’s new facilities was delayed, so in December 2020 a decision was made to request a voluntary suspension of this clinic’s certification until the move was completed.

*In 2020 the clinics IVI Lisbon, IVI Vitoria, IVI Ibiza, IVI Madrid-Center, IVI A Coruña and Minifiv, were included in the scope of the multi-site certification of the Quality Management System.

The organization also renewed the UNE 179003 certification of the centers in Spain, which IVI Lisbon joined.

IVI Chile maintained the ISO 9001 certificate for its Quality Management System.

Quality management and patient safety in our clinics are two priority lines to guarantee its success. The general medical management of IVIRMA has introduced a frame of reference to focus towards the goal of obtaining risk-free healthcare.

To ensure compliance with the requirements of the patient’s Quality Management System and to continue to guarantee this does not change when changes occur in the system itself, at IVIRMA we plan actions to address risks and opportunities.

LABORATORY SAFETY AUDITS

The Medical Affairs department carried out a comprehensive audit of all IVIRMA laboratories in the European region in which it was verified that all processes to ensure safety in the laboratories were complied with.

In the event of any non-conformity, the clinics were informed so that corrective action could be taken straight away. In this regard, the proper application of the corrective measures was confirmed.

By controlling the care processes listed below, we guarantee maintenance of the system every time changes are made:

- The availability of skilled staff.
- The availability of information, procedures and instructions.
- The use of equipment and materials.
- Availability of monitoring and measuring equipment.

Through a control procedure, the Quality and Risk Management System deals with any non-conformity or incident detected by IVIRMA staff that affects or could affect the quality of service or safety of the patient. This is recorded, establishing the appropriate treatment, and proposing and implementing corrective actions to eliminate the cause of such non-conformities. In addition, this process is subject to internal and external audits to ensure continuous improvement.

IVIRMA's Quality Management system guarantees the registration of any non-conformity or incident that could affect the service or patient safety.

Within the framework of this system, a **risk analysis** has been carried out in which those risks to which the patient may be subject have been identified and specified in a **risk map**, carried out according to FMEA methodology (Failure Mode and Effect Analysis). For each risk, the severity of the risk, the detection capability and the frequency of occurrence have been assessed to obtain a risk index that has enabled us to classify the risks detected as: acceptable, moderate, severe and extreme. The risks with the highest priority are those that can seriously affect the patient's health and safety.

Based on the classification of risks, **treatment plans** have been defined for moderate and severe risks. These plans are reviewed each year and their implementation is monitored.

RISK PREVENTION MANAGEMENT

As part of the Risk Management System and transparent risk management, we continue to encourage the introduction of non-conformities in our SIVIS, an internal patient management tool, whenever we face an adverse event or potential adverse event or when there is a deviation from the protocol with the intention of improving the system. This system is audited annually by SGS.

Acting against COVID-19

During 2020, the effectiveness of the risk management approach has been tested following declaration of the COVID-19 pandemic.

Since February 2020, the Medical Affairs area has kept the organization's professionals and patients informed about the risks posed by this virus, its progress, as well as the procedures to be implemented to minimize its effects. In addition, mandatory safety protocols have been established to ensure the safety of our treatments, both for patients and staff. These protocols have been implemented by work area, involving precise instructions for each group, with special emphasis on personal protective measures and equipment and ensuring adequate supplies during the most complicated times of the pandemic.

The creation of a multidisciplinary working group made it possible to react quickly and appropriately to the situations that arose. Some examples of the quick decisions taken were:

- **03.10.2020** Establishment of a specific Call Center to receive calls regarding COVID-19.
- **03.12.2020** Enabling the organization and the means to carry out teleworking.
- **03.13.2020** Adaptation of the Cleaning and Disinfection protocol at clinics, to minimize the risk of contagion.
- **3.18.2020** Activation of controls to monitor the effect of the pandemic on healthcare activity and on our patients.
- **03.27.2020** Donation of respirators and medical equipment from various clinics to public hospitals.



Continuing this line of commitment to health and safety, we implemented an adequate prevention and control protocol to reopen the clinics on April 26, assuring our patients and staff the lowest possible risk.

The professionals at our centers have been provided with the necessary resources to protect themselves and continue to carry out their work under the safest conditions. Our people have lived up to -and exceeded expectations- of what is expected of IVIRMA: commitment to health, to oneself and the environment, to the team and to all the people who visit our clinics.

In this regard, a series of safety measures has been established within the **protocols for patients**, such as measuring temperature at each appointment and performing a serology test at the start of treatment. In addition, for those patients who have requested it, the initial visit has been facilitated online.

Furthermore, we provide all the information necessary to be able to travel to a clinic when mobility is limited, along with information to be able to continue medical treatment safely. The information is always generated following sa-

fety protocols and best practices for patients. These best practices include the procedures and recommendations to be followed at all times due to COVID 19, the necessary information prior to arrival at the clinic and the follow-up of appointments, among others.

At IVIRMA we guarantee compliance with all safety standards for both staff and patients in accordance with the most up-to-date national and international recommendations. As a result, no Coronavirus outbreaks have taken place in our clinics.

In chapter 11. COVID-19 context in IVIRMA of this document details the safety protocols that have been implemented in our clinics to guarantee the health of patients and IVIRMA staff.

We constantly listen

For IVIRMA, the satisfaction of patients and donors is essential. For this reason, we assess the service provided through surveys, as detailed in chapter 5 of this report. These surveys are conducted both at the end of treatment and via the website by means of a brief questionnaire sent after the patient's call requesting an appointment with the Contact Center and after the first visit.

During 2020, patient and donor surveys have continued to be conducted in person at the end of treatment, but we have also been able to move forward with web-based surveys (through the Patient Portal), increasing the number of questionnaires sent to patients.

Moreover, the protocol and the results of the evaluation of patient and donor satisfaction are shared with Clinic Management and the Operations area, who are responsible for forwarding this information to the highest governing body, if deemed necessary, through the relevant meetings or existing communication processes.

A **Quality Assurance Handbook** has been prepared that IVIRMA Management places at the disposal of both workers and patients, to demonstrate the commitment that IVIRMA has to the development and implementation of the Quality Management System, as well as continuous improvement of its effectiveness.

In IVIRMA we continuously evaluate the service provided to our patients and donors, as their satisfaction is of prime importance.

Criminal risk compliance and prevention model

Following the entry into force of Organic Law 1/2015, of March 30, at IVIRMA we developed and introduced a **criminal risks compliance and prevention model**. At a board session, the supreme governing body of the company agreed the approval and implementation of this model, and the same happened for all the governing bodies of the investee companies.

IVIRMA's criminal risk prevention and compliance model has been introduced in three phases:

1. Identification of the criminal risks that may affect the group.
2. Identification of existing controls.
3. Preparation of a compliance handbook and an action plan in relation to the criminal risks and controls identified in the previous phases.

The **compliance handbook**, prepared in the third phase, establishes the model of compliance and prevention of criminal risks, and contains:

- The list of criminal impact risks affecting the group.
- The controls in place to mitigate these risks.
- The general action principles (within the framework of the action plan), to respond to them.

The company's values, as well as the behavioral guidelines to be followed by IVIRMA's professionals and employees, are set out in the Code of Ethics and Conduct. This code contains the conduct guidelines that guide, focus and govern the behavior and daily work activity of the staff. Further information about our Code of Ethics and Conduct is given in Chapter 9 of this report.

Currently, the compliance and criminal risk prevention model is applied in Spain, with a view to extending it to the other countries where the company operates.

The main objectives of this compliance and criminal risk prevention model are:

- that it be the workers themselves who are able to identify the criminal risks that could hypothetically incur as a result of their professional performance and regardless of the position or professional category that they hold.
- facilitate the guidelines on how to act and who to contact in the event of detecting signs of perpetration of a crime or violation of the general principles of conduct.

In response to these goals of the model, we have developed a compliance channel, a mechanism that allows staff, customers, suppliers and subcontractors to report irregularities that could put the company at risk. In 2021, this channel is planned to be hosted on our corporate platform so that it is available to all employees globally. In the case of suppliers and other external agents, there is a specific email to channel these types of issues.

In IVIRMA we have a **Compliance Committee**, outside the administrative body, which has been created to guarantee the independence, effectiveness and operation of the compliance and criminal risk prevention model, and which has among its functions the supervision of compliance with the Code of Ethics and Conduct.

During 2020, the Internal Audit department was merged with the Finance department. Presently, the monitoring of this area of compliance is divided between various departments such as HR, Finance and Legal. This enables a multidisciplinary and global vision to be achieved.

Identification of criminal risks

In the process of identifying criminal risks, the following risks inherent to the type of activity carried out by IVIRMA were found, which have been classified according to the area or department of the organization that may be affected:

-  Against personal and family privacy
-  Fraud
-  Fraudulent bankruptcy / Attempted
-  Against intellectual and industrial property
-  Computer attacks
-  Business secrecy
-  Misleading advertising
-  Corruption between individuals
-  Money laundering / Terrorist financing
-  Against the Public Treasury / Social Security / Subsidy Fraud / Fraud against the General Budgets of the EU.
-  Non-compliance with accounting obligations.
-  Urban planning
-  Against natural resources and the environment
-  Bribery / Influence peddling
-  Exposure to ionizing radiation
-  Against the rights of workers / Foreign citizens
-  Trafficking of organs
-  Against public health
-  Smuggling

Work is currently underway to update this list of criminal risks, as well as the Compliance Manual and the Code of Ethics.

The compliance committee has not been notified of any cases that could be considered crimes since the implementation of the compliance and criminal risk prevention model.

Identification and assessment of environmental aspects

The IVIRMA clinic in Mallorca has an **Environmental Management System** based on the ISO 14001:2015 standard. Based on the requirements of this standard, the environmental aspects that, from a life cycle perspective, could affect our surroundings and the environment have been identified and assessed.

This assessment is performed every year, taking into account resource consumption, waste generation (hazardous and non-hazardous), discharges, atmospheric emissions and noise; and assessing the degree of potential pollution, the quantity or volume, the clinic's actual capacity for action, and the grievances or complaints received.

In the **identification and assessment of environmental aspects** carried out in 2020, the following have been determined as significant environmental aspects:

- Lubricant oils
- Hazardous waste
- Gaseous emissions of the generator set
- Consumption of fossil fuels from the generator set and landscaping
- Noise
- Consumption of medical gases



Data protection

During the course of 2020, we have consolidated the figure of Data Protection Officer (DPO) at the IVIRMA Group, enabling the development of different action lines that facilitate better compliance with the General Data Protection Regulation (GDPR) of IVIRMA. These lines of action are set out below:

1. Guidelines for companies and clinics on data protection:

- Guidelines for the exercise of GDPR rights
- Guidelines to comply with the GDPR right of information
- Guidelines for the recognition of Data Processors under Art. 28 of the GDPR
- Notification of information to employees (We are Ivirma app)
- Guidelines concerning security incident or breach notification
- Guidelines for updating the Record of Processing Activities.

2. In relation to security measures:

- Analyze risks regularly.
- Hold monthly meetings with IT managers.
- Frequent checks.
- External audits.

3. Involve the DPO from the beginning when new services or products that involve privacy risks are to be developed.

4. Address stakeholder rights requests by reinforcing awareness among companies.



Risks associated with management of supplier companies

IVIRMA's suppliers are also assessed annually within the framework of the Quality Management System. This evaluation is carried out according to the type of product or service of the supplier company by IVIRMA's Purchasing Department, Medical Affairs, or the requesting area.

This assessment is carried out on the basis of the following aspects:

1. Compliance with the quality criteria of the product, service or work.
2. Compliance with the delivery terms.
3. Attitude of the supplier company.
4. Administrative management.

IVIRMA's supplier companies are classified into 6 categories, depending on the product or service they supply:

- Suppliers of medical products.
- Suppliers of services and maintenance of facilities and supply of laboratory equipment.
- Professional medical services, other outside medical services.
- Cleaning suppliers.
- ICT providers.
- Others (mail services, taxis, or any work that affects the service in any way...).



The supplier companies assessed are classified according to the risks of their products/services. Those supplier companies considered high and medium risk are re-assessed, as their actions have a direct impact on the quality of service and/or the safety of our patients. On the other hand, those supplier companies classified as low risk are not re-assessed.

Risks of supplier companies	
High risk	<ul style="list-style-type: none">• Professional medical services• Maintenance: AHR equipment and facilities• Medical devices• Laboratory analysis• Health maintenance supplies
Moderate risk	<ul style="list-style-type: none">• General maintenance supplies• Transport services• Maintenance: common equipment and facilities
Low risk	<ul style="list-style-type: none">• Marketing• Non-medical devices• Basic utilities (water, electricity, etc.)• Other professional services (legal services, consultants, etc.)• Travel, events, conferences• Other services

Assessment of economic, environmental and social issues by the supreme governing body

The **risk map and improvement actions** (risk treatment plans) are reviewed every year by management or whenever there is a significant change in the activities of the centers. In addition, Management carries out internal audits and reviews of the management system on an annual basis.

During the first three months of the year, each management department, together with the QA coordinator, carries out a system review of its clinic. This review results in the improvement of the system based on new targets, indicators and action plans that are in turn reviewed by IVIRMA management, which approves or modifies them as it sees fit.



EXTERNAL INITIATIVES AND AFFILIATION TO ASSOCIATIONS

IVIRMA is present every year at the main congresses, courses, conferences and meetings on reproductive medicine that take place all over the world. There, it shares with its professional colleagues the key **advances and findings in the reproductive sector** that help shape the future of assisted reproduction.

We share the main advances and findings in the reproductive sector to continue advancing the future of assisted reproduction.

This allows us to constantly move forward and offer the best fertility solutions to our patients. In this regard, in 2020 we have participated in the following congresses:

- European Society of Human Reproduction and Embriology (ESHRE)
- American Society for Reproductive Medicine (ASRM) Reprofacts Frankfurt

In addition, IVIRMA is affiliated to and follows the recommendations and best practices of the following entities:

Sociedad Española de Ginecología y Obstetricia (SEGO), Sociedad Española de Fertilidad (SEF), European Society of Human Reproduction and Embriology (ESHRE), American Society for Reproductive Medicine (ASRM), Society for Reproductive Investigation (SRI), Asociación para el Estudio de la Biología de la Reproduc-

ción (ASEBIR), Alpha y Asociación Española de Andrología, Medicina Sexual y Reproductiva (ASESA).

In the field of **business associations**, since 2016 we have been members of the Leading Brands Club (Club de las Primeras Marcas) a benchmark group that allows us to take part in meetings with other organizations to establish synergies and partnerships and form part of actions that generate notoriety and recognition of the organization.

Furthermore, we are part of the Spanish Association of Procurement, Contracting and Procurement Professionals (AERCE), the Valencian Business Association (AVE), the Association for the Progress of Management (APD) and the Family Business Institute.

Moreover, since 2017 we have formed part of the Responsible and Sustainable Businesses Club (CE+RS) of the Valencian Community, to promote social and business responsibility in the region.



In addition, IVIRMA in the USA is affiliated to the following programs:

- **Ovatures egg** donation program, a program that provides an opportunity for potential egg donors to help a couple build their family anonymously.
- **NexCCS**, the most advanced embryo detection platform available for In Vitro Fertilization (IVF) today.
- **Be Well**, a collaboration that allows us to offer a complete and holistic approach to health and wellness through nutritional counseling, educational classes or even therapeutic yoga classes.
- **Advanced Reproductive Care (ARC Fertility)**, a program that offers a range of affordable options to help patients maximize their chance of having a baby while minimizing their financial risk.
- **American Society for Reproductive Medicine (ASRM)**, a multidisciplinary organization dedicated to the advancement of assisted reproductive technologies, science, and the practice of reproductive medicine.
- **Society for Assisted Reproductive Technology (SART)**, a leading institution of professionals dedicated to the practice of assisted reproductive technologies.
- **Human Rights Campaign**, this is the largest civil rights organization working to achieve equality for LGBTBI Americans.
- **The Foundation for Embryonic Competence**, a non-profit organization dedicated to improving outcomes and promoting knowledge in the area of embryonic research, diagnosis and education.
- **Family Equality**, a program whose mission is to promote legal equality for LGBTBI families and for those who wish to form such families.
- **Babs Siperstein PROUD Center**, a center that offers specialized primary care services for the LGBTBI community, committed to providing a safe and supportive environment.

A close-up photograph of a newborn baby's foot, which is secured by a pink medical strap. The baby is lying in a hospital bed, and the background is softly blurred, showing parts of the bed and a blue patterned blanket. The overall tone is warm and clinical.

04 ANALYSIS OF MATERIALITY AND INTEGRATION OF SUSTAINABLE DEVELOPMENT OBJECTIVES

ANALYSIS OF MATERIALITY

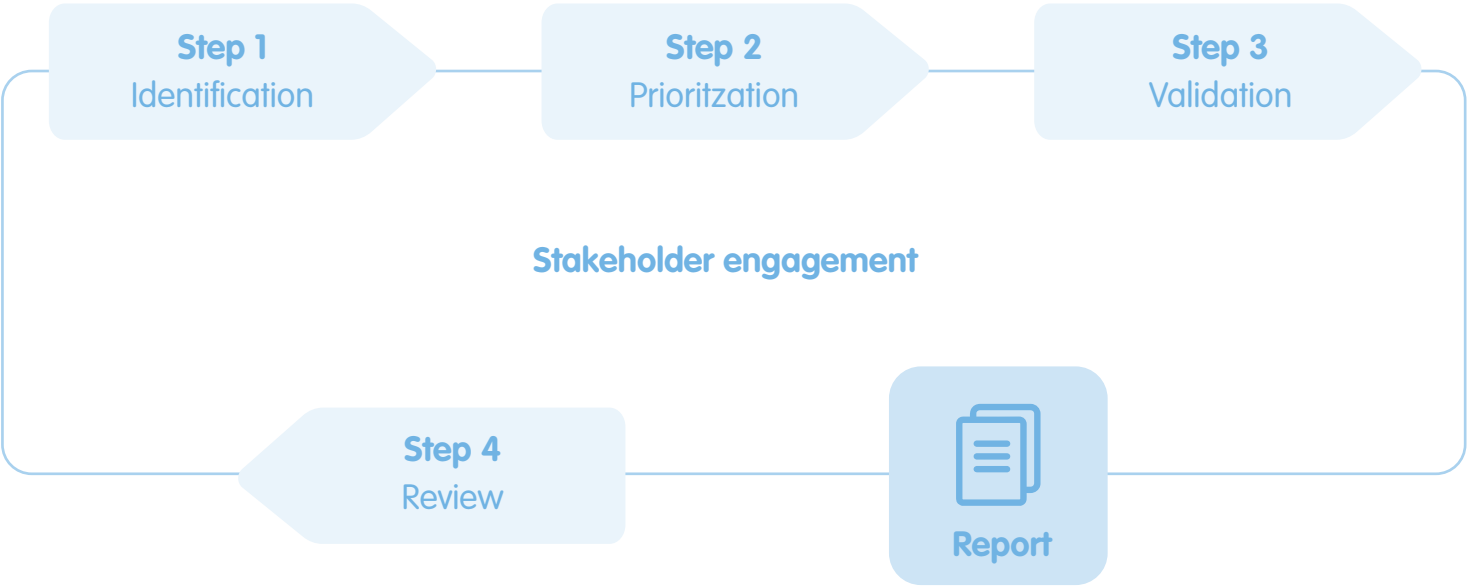
During 2021, IVIRMA carried out a materiality study in which the organization’s different stakeholders (employees, patients, suppliers, gynecologists, society and donors) have participated. This study, which was conducted with more than 200 people, has enabled us to prepare this report and determine its content as established by the Global Reporting Initiative (GRI), with the aim of ensuring that the information contained in the Sustainability Report is reliable, complete, and balanced.

In addition, this materiality analysis has allowed us to know the most significant economic, social and environmental aspects for IVIRMA and to gather the interests and expectations related to sustainability for our stakeholders.

The conclusion of the process is that, in general terms, our strategy coincides with the demand for information from our stakeholders. The satisfaction of our patients, the quality of

our services, and health and safety are the most relevant aspects that are present in our daily endeavors.

To identify these more relevant aspects or material issues, we use the following methodology:



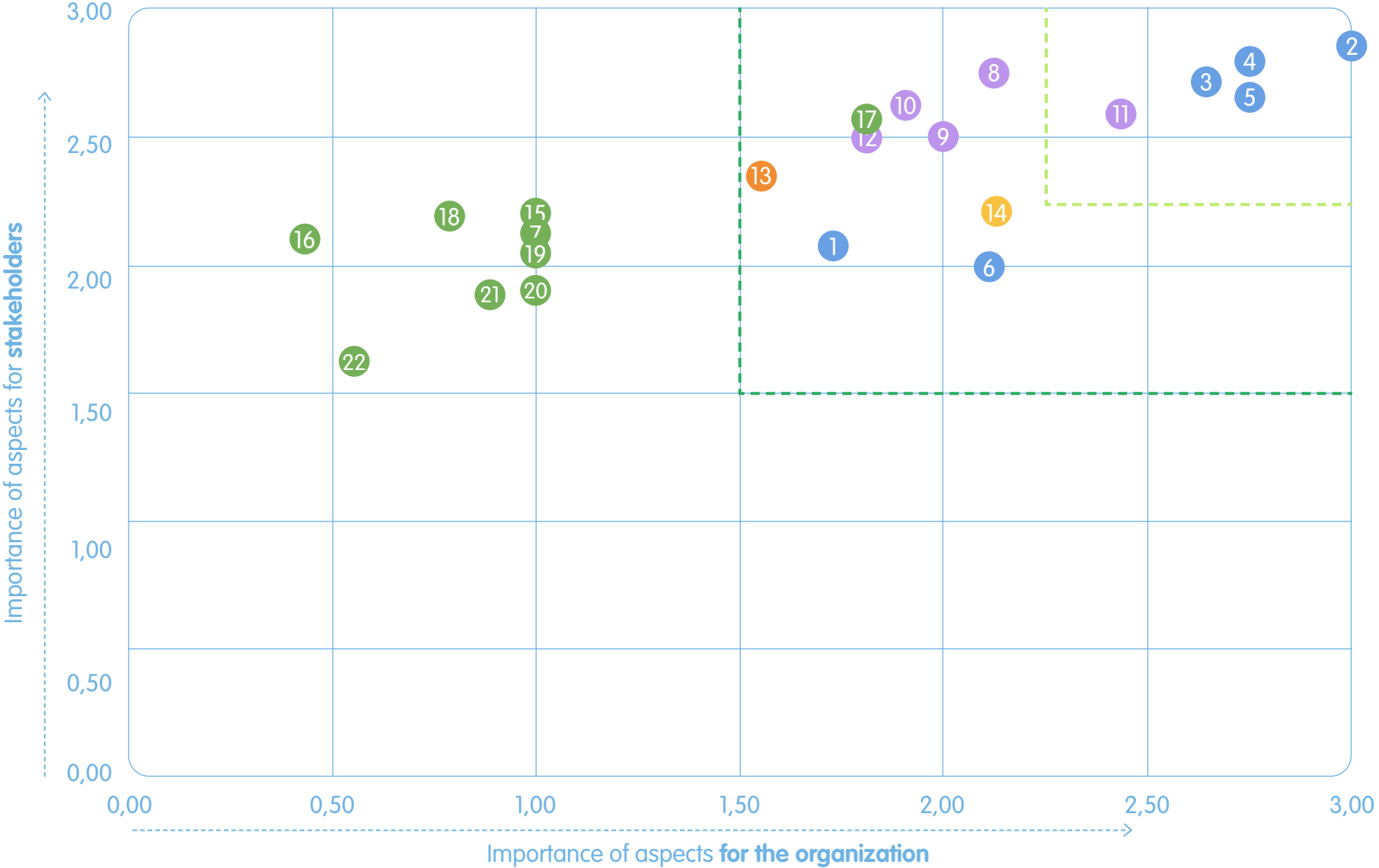
The result of this participatory process was the development of the Materiality Matrix, which reflects the degree of importance of the issues considered during the study in terms of:

- Their importance with regard to the economic, social and environmental effects for the organization.
- Their importance in the assessments and decisions of stakeholders.

- Material issues - very relevant**
- 2. Patient health and safety
 - 3. Patient satisfaction
 - 4. Quality of service
 - 5. Patient privacy and data security
 - 11. Occupational health and safety

- Material issues - relevant**
- 1. Economic performance
 - 6. Training and teaching
 - 8. Quality occupancy
 - 9. Diversity and equal opportunities
 - 10. Reconciliation measures
 - 12. Training and professional development
 - 13. Respect for human rights
 - 14. Ethical management and anti-corruption
 - 17. Sanitary waste

- Material issues - not very relevant**
- | | |
|-----------------------------------|-------------------------------|
| 7. Social evaluation of suppliers | 19. Energy |
| 15. Circular Economy | 20. Water |
| 16. Office waste | 21. Climate Change |
| 18. Materials | 22. Noise and light pollution |



The results obtained in the previous matrix have been taken into account in the preparation of this report. Within the framework of the application of Law 11/2018, IVIRMA's Sustainability Report considers other environmental and social issues, respect for human rights and the fight against corruption and bribery, as well as those relating to personnel, established in this regulation.

We have ensured that the treatment of these aspects and their scope covers significant economic, environmental and social impacts and that it meets the expectations of stakeholders, also responding to the requirements of Law 11/2018 on non-financial information and diversity.

Material aspects by scope



Material aspects	Internal coverage	External coverage
Company		
• Economic performance	X	
• Patient health and safety	X	X
• Patient satisfaction	X	X
• Calidad del servicio	X	X
• Patient privacy and data security	X	X
• Research, innovation and teaching	X	X
Environmental issues		
• Sanitary waste	X	X

Material aspects	Internal coverage	External coverage
Social and personnel issues		
• Quality occupancy	X	
• Diversity and equal opportunities	X	X
• Reconciliation measures	X	
• Occupational health and safety	X	
• Training and professional development	X	
Fight against corruption and bribery		
• Ethical management and anti-corruption	X	
Respect for human rights		
• Respect for human rights	X	X

INTEGRATION OF SUSTAINABLE DEVELOPMENT GOALS

The 2030 Agenda, adopted by the United Nations General Assembly in 2015, is a plan of action for people, planet and prosperity, which also intends to strengthen universal peace and access to justice by fostering partnerships.

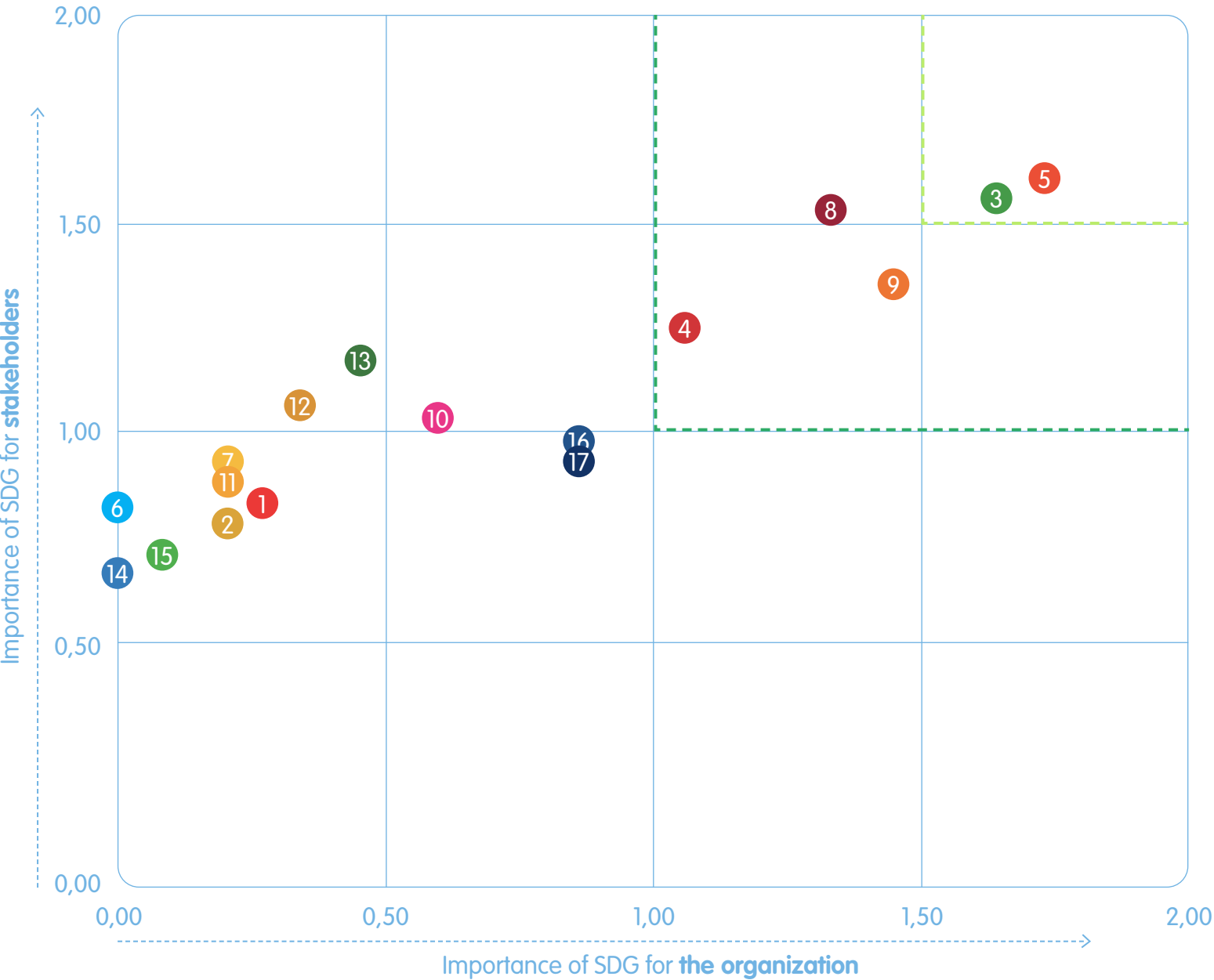
This action plan came into force in 2016 and is a call to action to nations, citizens and companies, which are considered key agents for development.

Agenda 2030 sets out **17 Sustainable Development Goals (SDGs)** covering the economic, social and environmental spheres and incorporating the global challenges we face as a society.



In order to be part of these key agents for development and align ourselves with the 2030 Agenda, we have identified the priority SDGs based on their prioritization by the organization and IVIRMA’s stakeholders. This process was carried out by means of a questionnaire, in the same materiality process, completed by more than 200 people, including stakeholders and IVIRMA key personnel.

SDG priorities for IVIRMA



- 1 No Poverty
- 2 Zero Hunger
- 3 Good Health and Well-being
- 4 Quality Education
- 5 Gender Equality
- 6 Clean Water and Sanitation
- 7 Affordable and Clean Energy
- 8 Decent Work and Economic Growth
- 9 Industry, Innovation and Infrastructure
- 10 Reducing Inequality
- 11 Sustainable Cities and Communities
- 12 Responsible Consumption and Production
- 13 Climate Action
- 14 Life Below Water
- 15 Life On Land
- 16 Peace, Justice, and Strong Institutions
- 17 Partnerships for the Goals

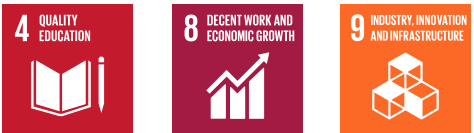
--- Relevant / highly relevant SDG limit

--- Non-relevant SDG limit

High priority



Medium priority



The material issues related to sustainability for IVIRMA, their relationship with the priority Sustainable Development Goals and how they are addressed throughout the content of this report are detailed below.

Material aspect	SDG	Report section
<ul style="list-style-type: none">• Patient health and safety• Occupational health and safety		<ul style="list-style-type: none">• Committed to our patients• Committed to people• Committed to risk management and safety
<ul style="list-style-type: none">• Diversity and equal opportunities• Reconciliation measures		<ul style="list-style-type: none">• Committed to people
<ul style="list-style-type: none">• Training and professional development		<ul style="list-style-type: none">• Committed to people• Committed to society
<ul style="list-style-type: none">• Quality occupancy• Ethical management and anti-corruption• Respect for human rights		<ul style="list-style-type: none">• Committed to human rights• Committed to people
<ul style="list-style-type: none">• Research, innovation and teaching		<ul style="list-style-type: none">• Committed to people• Committed to society



05 COMMITTED
TO PATIENTS

For us, the patient is the driving force of our activity. Everything we do at IVIRMA is focused on offering the best patient care, with the aim of building a healthier world.

THE PATIENT ALWAYS AT THE FOREFRONT

The patient is at the forefront of IVIRMA’s activity; governs the work of our professionals and our values

The patient is always at the center of our activity. This philosophy pervades each of our values and governs the daily work of all our professionals, who seek to provide patients with the utmost safety and best guarantees, leaving patients satisfied. Continuous improvement is key to our activity, more than an obligation or a necessity it is already a habit, and it allows us to continue leading the field of reproductive medicine.



WE CONTINUE TO MAKE PROGRESS IN DIGITIZATION

The digitalization we offer to our patients has allowed us to keep in touch with them during the pandemic.

2020 has been marked by the COVID-19 pandemic, the most complicated global health, economic and social challenge of our time. In this context, IVIRMA’s overarching concern has been to stay close to our patients and, thanks to tools such as the patient portal and the system of face-to-face and distance education that we have been studying, developing and improving for years, it has allowed us to improvise and to safely provide alternatives to continue giving our support at all times.

In this regard, we have been prepared to offer the best quality care and personalized support through our tools.

Patient Portal 2020

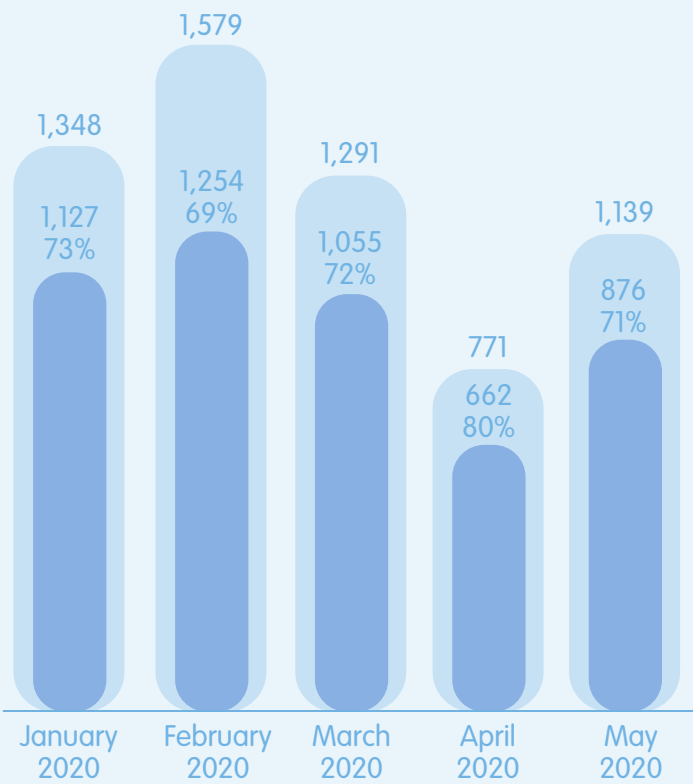
With a focus on enhancing communication with our patients, we offer them the updates of the new patient portal designed exclusively for IVIRMA and connected to our digital medical records system. In this way, the patient can have at all times (with the help of an app on the cell phone or tablet) as much information as possible about the explanation they have received, the results of their assessment, their analytical results or a simple explanation about the proposed treatments.

70% of IVIRMA patients use the patient portal during treatment

PATIENT PORTAL DOWNLOAD DATA

From the patient portal it is possible to perform actions such as view medication, share documentation, sign consent forms or make payments, among others.

The use of the patient portal continues to grow, around 70% of IVIRMA patients use it during their IVI treatment.



Thanks to its potential, this tool has allowed us to improve direct communication with the patient. In addition, the patient portal also includes the option of direct communication between patients and the clinic, so you can have a conversation, share files or simply resolve the most common doubts.

Furthermore, the tool is based on the premises of two-factor authentication (2FA) and the use of certificates, allowing patients the option of signing electronically and signing consents from home.

Digitization in everyday life

2020 has seen the digitization of the remote workplace, with a greater emphasis on security, both of the patient and information. In this regard, omnichannel capabilities have been increased -phone, apps, mail and also video-conferencing-, together with the reinforcement of training to get rid of old practices and to be able to share and reuse information, both internally and with patients.

First online visit

Among the measures proposed during the first peak of the pandemic and the absolute lock-down was implementation of the system of initial visits online.

In this way, we have continued to provide, through established telemedicine systems, close communication with patients.

From February to August, more than 3,500 first online visits were made, with both national and international patients



Content digitization

The digitization of content allows the patient to access different content at any time. These data include the contents resulting from the first visit carried out, or the description of pathologies and proposed treatment plans.

The move to data digitization allows access to different types of images such as 3D uterus, visualization of pathologies such as myomas or syndromes through mobile objects, allowing, for example, the visualization and understanding of the disease or the sharing of educational videos on the proposed treatment plans.

The aim of digitization is to improve the patient's understanding of the disease in order to achieve optimal treatment and, above all, to eliminate paper and unnecessary physical presence.

Video conferencing

At IVIRMA we use the videoconferencing system through video call or videoconferencing with easy-to-use and highly effective platforms to share images and explanations in real time as if we were in a face-to-face consultation. In addition, it allows you to share interactive 3D images, easy-to-follow statistics, explanations of fertility treatments and procedures used by the doctor in consultation.

Our communication system has led to a significant increase in the number of videoconferences. Several factors have contributed to this increase:

1. Coronavirus: during the pandemic, the only “visual” way to contact patients was through videoconferencing. Accordingly, for almost 3 months it was the only way to follow up with patients; currently, contact by videoconferencing is used if it avoids the need to travel.

2. Teleworking: with a teleworking rate of 100% for around 3 months and an average of 50% at headquarters for a further 6 months, teleworking has replaced and systematized videoconferencing meetings and has avoided employees’ commuting to work.

3. Socialization of technology: 2020 has united the need to stay at home and the need to communicate with the optimization and standardization of technology, which has been better adapted to people’s needs. This has led to greater ease of use and a predisposition to them, by saving time, travel, etc., compared to other years where the in-person meeting prevailed.

REDUCTION OF PRINTED DOCUMENTATION DUE TO DIGITIZATION

The increased use of digitized documentation has made it possible to minimize the number of printouts. During 2020, a 15% reduction in printouts has been achieved versus the previous period, where the same criteria that have favored videoconferencing (coronavirus, teleworking and socialization of technology) have reduced the need for printouts.

These facts have been mainly favored by two actions:

- 1. Electronic signature:** with around 50% electronic signatures on informed consents, the use of paper in the group’s clinics has been drastically reduced.
- 2. Digitalization of contents:** no more sharing leaflets, handbooks or guides. They are attached to the email and sent to the patient, with all the benefits that entails from all points of view

Other 2020 projects in digitization

Doctor referral portal

There has been an increase in communication between the patient and the referring doctors -those who treated the patient before she came to IVIRMA and to whom the patient will return once pregnant- and they can have all their patient's clinical records in one portal, as long as the patient gives her consent. In this way, referrers have access to first-hand information to ensure the best pregnancy monitoring.

Anonymous waiting rooms, but with presence control

There is strict compliance with anonymous calls to patients in waiting rooms, along with the guarantee of traceability required in these COVID-19 times, achieving an increase in respect and control of patients.

We implemented new tools to continue guaranteeing the safety, confidentiality and comfort of our patients

In 2021 we will continue to make progress digitization

Below are some of the projects planned at IVIRMA during 2021 to continue responding to digitization.

Electronic medical prescription. The use of electronic medical prescriptions will be encouraged, integrated with the IVIRMA patient portal and pharmacies. This will guarantee correct dispatch, as well as the security and ease of use necessary for patients. It will also favor the minimization of paper.

Safety checklist to share with patients the medical protocols, the steps required in their treatment (documentation, signing of consent forms, tests, etc.) and to obtain the results of these directly on the patient's portal. Integration through digital channels will be increased for greater patient safety and confidence.

Arrival at the clinic and non-contact registration. Arrival at the clinic and notification from an app that will record the patient's arrival and add them to the list of those in the waiting room where they remain until they are called from the consulting room to tell them where to go. This will streamline healthcare processes and help eliminate paper records or personal interactions, increasing patient safety.

OUR COMMITMENT TO PATIENTS

Reproductive processes are delicate, sensitive, emotionally tough and sometimes longer than we expect. We know that we hold in our hands probably the most important desire of the women and couples who attend our clinics: the creation of a life, the arrival of that longed-for baby.

Therefore, we offer patients a portfolio of personalized services, adapted to each case, and we always seek to give them the best guarantees and safety for their peace of mind.

IVIRMA: A pro women organization

IVIRMA was born as a pro-women company three decades ago and since then, in its commitment to its patients, women are the cornerstone.

Women are our *raison d'être* and the driving force behind our activity. And we at IVIRMA can only reciprocate by working hard to accompany them with the utmost professionalism and proximity in their journey towards motherhood. Their trust gives us the strength to improve every day.

During 2020, we have reinforced this commitment through the following milestones that demonstrate it:



- **Launching of Guides.** All the guide launches detailed below were online due to the health situation, accompanied by live social media, patient testimonials in some cases, blog content and branded content in some countries.

Endometriosis Guide. A comprehensive guide to help early diagnosis and raise awareness of a pathology with a high impact among the female population, and which can even affect their fertility.

Single Mothers Guide. To provide information to those women who are considering the possibility of becoming mothers without a partner, as well as to support those who already are.

Two Mums Guide². As a company that seeks to be inclusive and assist in all fa-

mily projects, we have launched a guide with medical and legal information for female couples.

- **Fertility Day Online.** Adapting to the new reality, we have moved the face-to-face events to digital format, to continue responding to the main concerns and needs of our patients.
- **Sending press releases to the media.** To bring assisted reproduction closer to society in general and share the latest advances in reproductive medicine.
- **Content prepared by medical professionals, published on our Social Media,** to bring the figure of this group closer to our patients and potential patients, through empathy and a human touch. In addition, we have published other content on Social

Media to maintain our presence and interaction with the public, seeking greater emotional impact.

- **Constant generation of content in support of patients (FAQs)**, where we respond to the key concerns regarding their reproductive processes.
- **Attendance at the main conferences on reproductive medicine**, to outline the future of this discipline and offer the best treatments and guarantees to our patients. In addition, we have provided real-time information to the general public, both online and offline, of the main findings and studies presented by IVIRMA in these meetings.
- **Dissemination of courses and local events**, bringing assisted reproduction closer to our patients.
- **Content generation to inform and to answer donors' questions**. We never forget that donors are an essential aspect of our activity, so we try to offer them all the information and the best treatment when they visit our clinics.

- **Update of the patients and donors website**, with contents of interest, as this is a fundamental channel of entry and resolution of doubts for these users. Given the health situation, we have constantly updated the sections related to COVID-19, becoming a source of content generation to provide information about the evolution of the pandemic, its potential effects on our field, and to reassure patients and donors alike.
- **Publication and updating of the audio-visual content of the waiting rooms of IVIRMA clinics**. Our aim is for patients in our clinic waiting rooms to have access to useful and humanistic content that responds to their interests and needs.
- **Training of best practices in Social Media for managers and spokespersons** to offer followers topics of interest, aligned with the brand and the needs of the public.
- **Patient testimonials on our different channels**, because there is nothing more helpful to other patients than someone sharing their story with them. This helps to

naturalize assisted reproduction and make it more real.

- **Daily Patient Support**. Daily online patient support program to provide emotional and psychosocial support to In Vitro Fertilization patients at the Philadelphia clinic. This pilot program is being assessed and is potentially expandable in 2021 in the USA.
- We also carried out **campaigns through testimonials to bring patients closer to reality**. In addition, webinars were held, including those aimed at the LGBTI collective, seminars on mental health support and support in times of COVID.

HEALTH AND SAFETY OF PATIENTS

Responsibility and transparency in acting quickly in the face of unfavorable situations, such as the recent pandemic, allow us to move forward with the best guarantees for patients, workers and society in general.

We will remain committed to the safety of each of our patients until they achieve their dream.

The overriding goal at IVIRMA is to ensure that each of our patients can fully trust us, at each stage of the treatment, until they achieve their dream. For this reason, we believe **that patient safety and peace of mind are fundamental** to providing quality healthcare services. And to be able to ensure they are effective and safe, they must above all be people-centered.

Our team is firmly committed to this goal and we are convinced that the effort we make every day translates into benefits for our patients. To achieve this, patient safety at IVIRMA clinics is focused on 3 pillars:

- exceptional clinical results
- professionals with unrivalled quality
- a fully satisfactory patient experience

This has been, is and will continue to be our primary goal: that each of our patients can fully trust us, at each stage of treatment.

With these fundamentals in mind, we were able to develop projects that have allowed us to be certified in **the Spanish Patient Risk Management Standard**. In these projects there are three key aspects that have allowed us to get to where we are today:

- the use of new technological tools
- the design of new processes
- the enhancement of those that already exist

When we talk about **technology**, we refer, for example, to the use of automatic traceability control systems, which allow us to verify both the identity of the patient and her gametes and embryos throughout the treatment.

In terms of **processes**, the most effective way to reduce the risk of an unwanted situation is to leave nothing to chance and to monitor every step of the way. All our treatments and techniques are protocolized, so that any of our professionals have clear and defined guidelines to act at all times.

In addition to this, we work on broader fronts, such as offering ongoing training to our professionals, which allows us to **anticipate any of the risk situations** that our patients may face.

We also, as a group, **globally develop and implement policies in our clinics that seek to protect patients**. A clear example, as already mentioned in the previous section, would be the single embryo transfer, to avoid multiple

pregnancies and thus reduce the risks to the mother or the baby. A further good example can be found in the management of our donors, to whom we carry out genetic studies of disease carriers, to avoid the possibility of transmission.

With all these actions, we aim to **avoid any type of unwanted eventuality that could have a negative repercussion**, whether physical or psychological, on patients when undergoing treatment.

Greater security and peace of mind

During 2020 we have continued to work with our **Perfect Match** service, applying it to 100% of our egg donation treatments. This system offers more security and peace of mind to our patients based on the phenotypic, genetic and biometric scan analysis of our donors.

Added to this, the **MATCHER** Traceability System establishes how to **correctly identify patients** so that identification with their reproductive samples (whether in the operating room, transfer room or andrology labs) is complete and secure.

Genetic counseling

All treatments and genetic tests that we provide at IVIRMA offer free genetic counseling that allows the patient to make an informed decision within the appropriate legal framework.

This Genetic Counseling service within the group provides **guidance and advice on genetic issues to our patients**, whether to analyze the case and consider how to approach it (tests to be conducted, relatives to be included in the study, special permits from the Ministry of Health, etc.), as well as to explain the findings obtained and the risks and implications of the decisions.

In this genetic counseling service, we have handled 2,244 interprofessional consultations, that is, consultations by company professionals, whether they are clinics, contact centers or other departments regarding patients and cases. In addition, also in 2020 we handled 457 consultations directly from patients about their case, their cycle or their results.

Emotional support unit

At IVIRMA, health is integral to everything we do. We are aware that during an assisted reproduction treatment some situations may arise that we are unused to dealing with.

For this reason, all our centers are equipped with an Emotional Support Unit, whose first consultation is included in the treatment, and where guidance is given on the best way to deal with the situation. We also provide our patients with a range of resources in the form of Online Workshops, offering a place of trust where they can express themselves and find the empathy they need to achieve emotional well-being.

Protection of personal data

At IVIRMA we process patient data with special **rigor**, complying with the European regulatory framework for data protection and the waste management framework.

To ensure data confidentiality, we use a paper shredder for the **destruction** of reports. Likewise, for other types of information, we remove the patient's identifier prior to discarding it. If the waste is disposed of in a sanitary hazardous waste container, the same external treatment that this type of waste receives already guarantees the destruction of data.

At IVIRMA we apply the Spanish Data Protection Agency's **Decalogue on how personal health data should be processed**, and we disseminate it among our professionals in order to share best practices in relation to the processing of our patients' data.

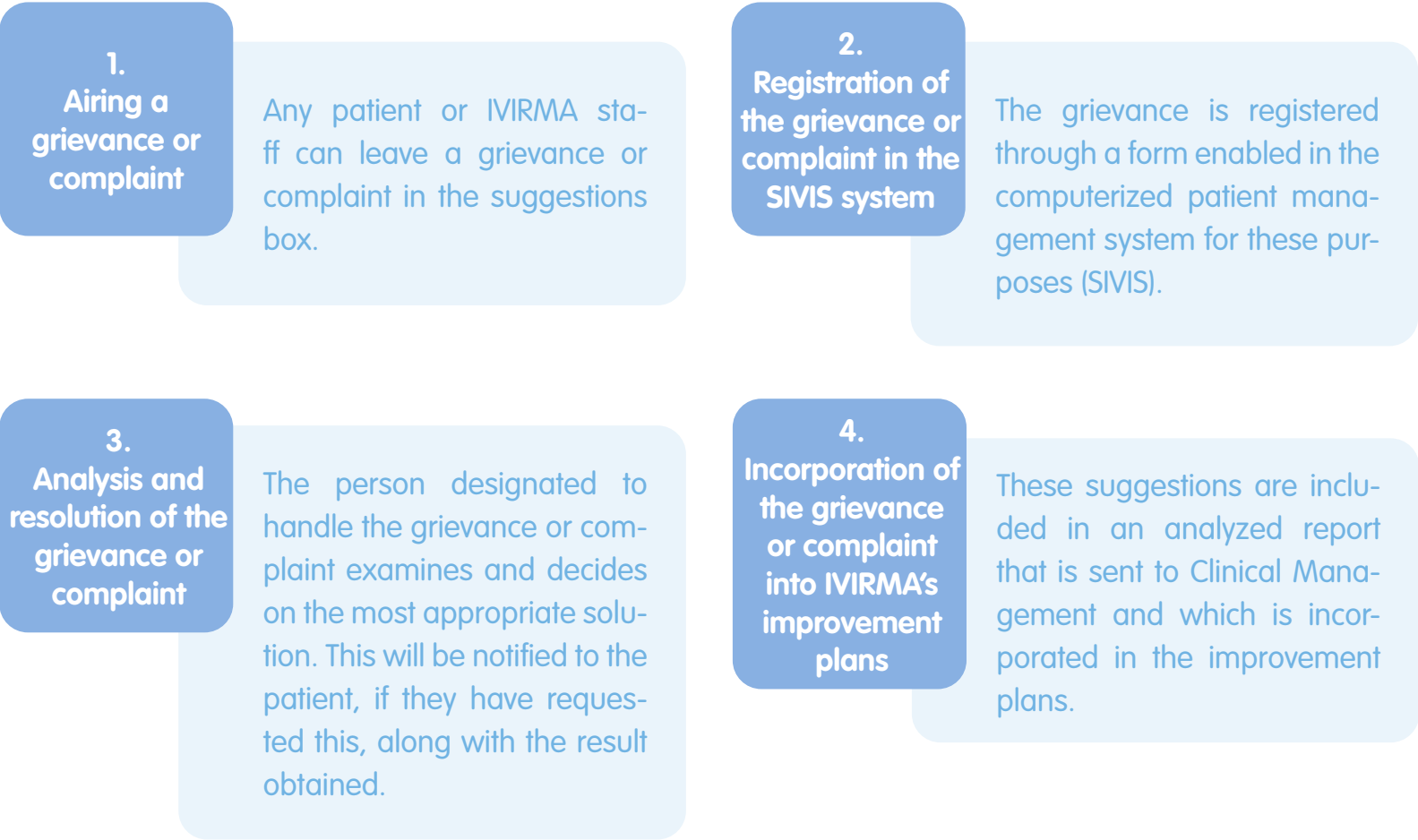
Nutritional and health services

In some of our U.S. centers we have a nutritional service, spearheaded by dieticians, to help our patients take care of their physical health through healthy eating and a balanced diet. This personalized nutrition consultancy service is carried out digitally and the medical approach is always within the scientific field, in line with our activity

Grievances and complaints system

At IVIRMA we have a range of procedures in place to listen to the opinion of our patients and, based on this, to be able to continuously improve our processes.

Within the framework of the Quality Management and Patient Safety System, in the clinics that are certified with the ISO 9001 standard we have **specific procedures to measure patient satisfaction and deal with grievances or complaints**. The grievances or complaints process for these clinics is as follows:



During 2020 a total of 512 grievances or complaints were received in Spain, 37 in Portugal, 30 in United Kingdom and 54 in LATAM (Argentina, Chile and Panama).

At the date of compiling this report, IVIRMA had resolved a total of 546 complaints or claims (448 in Spain, 33 in Portugal, 28 in the United Kingdom and 37 in LATAM).

In the case of the USA, there is no formal complaint collection system as such. Complaints are received from different sources through active listening. The Manager of the area involved is in charge of managing these complaints and scaling them up to Management, if necessary. In any case, in 2021 a Patient Care Coordinator has been included whose function is to channel this process.

At IVIRMA we continue to measure our patients' satisfaction through the **satisfaction surveys** we conduct at the end of treatment.

Both patients and donors take part in these surveys, which are carried out digitally.

In this sense, in 2020 we made progress in the **implementation of small** surveys related to specific times of the treatment, including the sending of the surveys of each treatment and the post-treatment survey, in order to glean information on patient satisfaction in each stage of the process.

During 2020, a channel was established to manage patient complaints that are currently made through social media, the Contact Center, the Cryo Management Unit or directly at Head Offices.

The results of the opinions of IVIRMA patients obtained in these surveys are compiled in a Results Report, with the desired frequency, for each of the Group's clinics. If, as a consequence of these analyses, unfavorable results or areas for improvement are observed, management identifies the reasons for these and proposes **improvement actions**.

In the USA, patient listening sessions were also held between August and December 2020 to discuss the key issues for patients. The results will be used to improve patient experience and communication with patients by 2021.

In addition, an online survey of more than 1,000 New Jersey patients was launched in 2020 to obtain feedback and improve the patient experience across our U.S. practices. The results included a very positive rating of the patient portal and communication with them, with a very positive service rating ratio. In terms of areas for improvement, they highlight the monitoring of waiting times and contact with the doctor, among others.

In addition, to help the ongoing improvement of patient satisfaction, the results are notified to the staff of each of the clinics on the aspects collected in the surveys that affect the patient.

The complaints and claims system allows us to listen to our patients and continuously improve

Another channel where we register grievances and comments from our patients is the **corporate channels**. These channels are fundamental to be able to disseminate our contents and those related to our field, as well as to manage the needs, demands and concerns of the users. It also allows us to know first-hand their perceptions of our actions and initiatives, to be able to share them and to involve them in our activity.

Social networks are a fast, effective and simple communication tool, essential to communicate with and reach our patients, with whom we try to interact as much as possible in an immediate and direct way, thus reinforcing our mutual relationship.



06 COMMITTED
TO PEOPLE

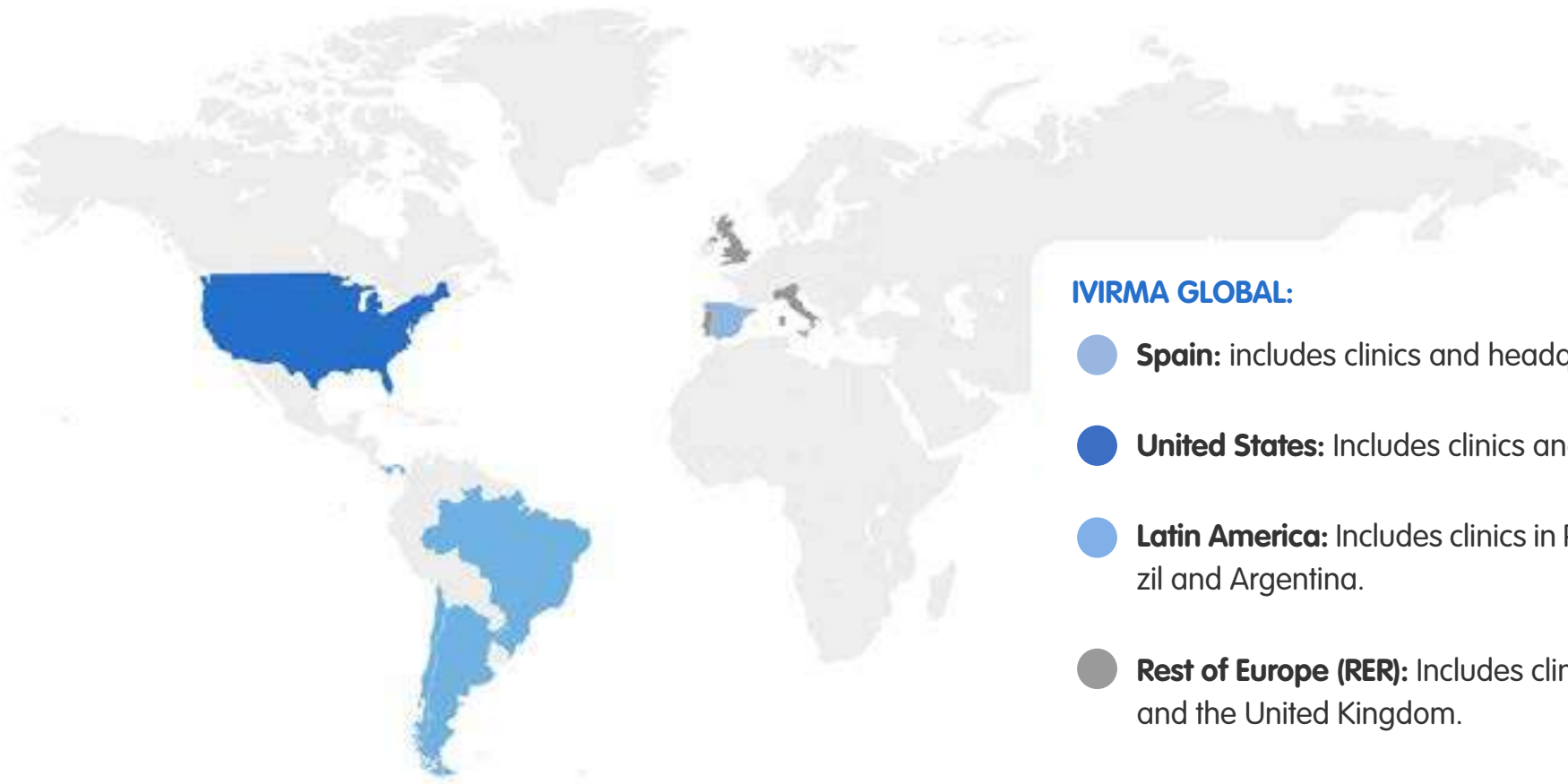




OUR TEAM IS AT THE HEART OF IVIRMA’S ACTIVITY

Without a shadow of a doubt, our human team is one of the indisputable hallmarks of IVIRMA, and its ability to promote excellence and innovation in every corner of our company has made us a leading company in the Reproductive Medicine sector. Our leadership model, culture and values place people at the heart of our activity, in an environment where the well-being and development of our team is promoted and equal opportunities are ensured.

To analyze the aspects and, in order to facilitate presentation of the data relating to the workforce and to establish a comparison with the previous year, we have continued with the following grouping by geographical area:



- IVIRMA GLOBAL:**
- **Spain:** includes clinics and headquarters.
 - **United States:** Includes clinics and headquarters.
 - **Latin America:** Includes clinics in Panama, Chile, Brazil and Argentina.
 - **Rest of Europe (RER):** Includes clinics in Portugal, Italy and the United Kingdom.

In order to define the professional category, the IVIRMA categories have been used, unified at a global level of the entire group, thus allowing for comparison between the data of different countries:

- **Support functions (headquarters)** includes all the functions of the headquarters and which are provided to the clinics. Marketing, HR, Finance and Operations, inter alia.
- **Clinic support:** Includes all the functions in clinics that are not included in the nursing, medical, patient care, laboratory and/or management personnel. For example: administrative staff, cleaning staff, etc.
- **Nursing:** Includes nursing staff.
- **Patient care:** Includes all the patient care, reception and switchboard assistants.
- **Doctors:** Includes medical personnel.
- **Laboratory:** Includes all laboratory personnel, IVF laboratory technicians (in vitro fertilization), andrology and general.
- **Management:** Includes managers of the clinics and managers of the Headquarters.

Our team

Workforce structure

The staff of IVIRMA totals **2,230 workers¹**, of whom 1,880 are women (84.30%) and 350 men (15.70%).

The percentage of women and men in the organization has remained fairly stable compared to figures for 2019, which amounted to 84.78% women and 15,22% men.

Women make up the majority of our staff

The distribution of these **2,230 people in the geographical areas where IVIRMA is present is as follows:**

Spain:
1,250 workers, of whom 1,035 are women (82.80%) and 215 men (17.20%).

USA.
654 workers, of whom 583 are women (89.14%) and 71 men (10.86%).

LATAM
163 workers, of whom 131 are women (80.37%) and 32 men (19.63%).

RER
163 workers, of whom 131 are women (80.37%) and 32 men (19.63%).

¹ All workers who form part of the company as of 12/31/2020 have been taken into account (workers who have left the company during the year are not taken into account).

The distribution of IVIRMA’s staff in relation to age is mainly concentrated in the 30-39 age range, representing 37% of the total, while people under 21 represent a very low percentage (0.4%).

The 40 to 49 age group represents 29% of the workforce, the 21 to 29 age group 19%, the 50 to 60 age group 12.3% and, finally, 3.3% of workers are over 60 years of age. These percentages are practically the same as in 2019.

If we analyze each geographical area, the range of 30 to 39 years old is also the one that represents the highest percentage in all countries, and the presence of the remaining ranges is similar in all cases.

Workforce by age

Age	2020 (%)	2019 (%)
Under 21 years of age	0,4%	0,2%
21-29 years of age	17,1%	18,6%
30-39 years of age	37,5%	37,7%
40-49 years of age	29,4%	28,5%
50-60 years of age	12,3%	12,1%
Over 60 years of age	3,3%	2,9%

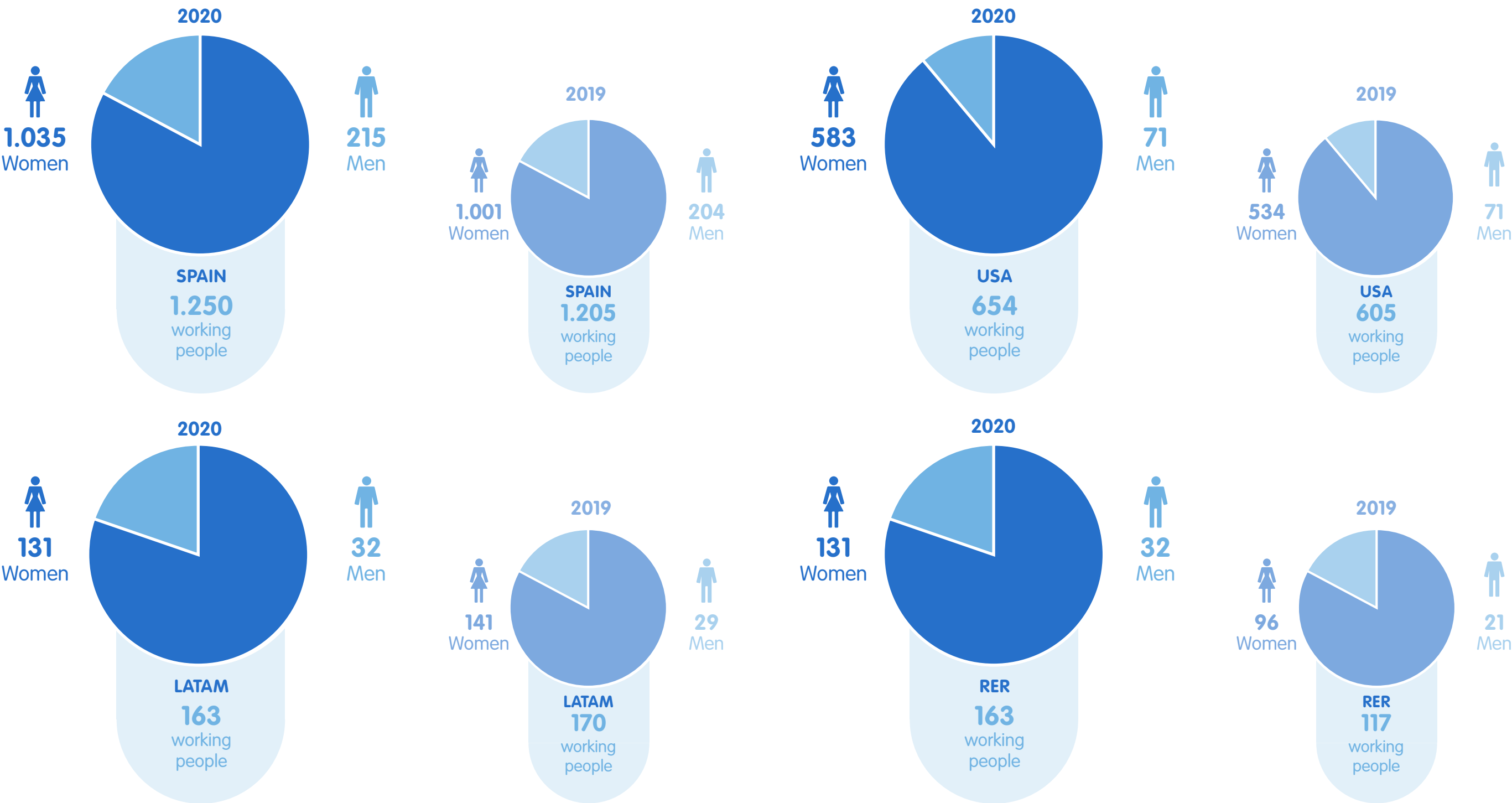
All workers who are part of the company as of 12/31/2020 have been taken into account.

In relation to the **professional categories**, the percentages are very similar to those of 2019. The majority of our workforce is in nursing (24%), laboratory (23%) and clinic support (16%). Staff with patient care functions represent 17% of IVIRMA’s total professionals, while those with support functions (headquarters) represent 10% of the staff, followed by medical staff (7%) and management staff (3%).

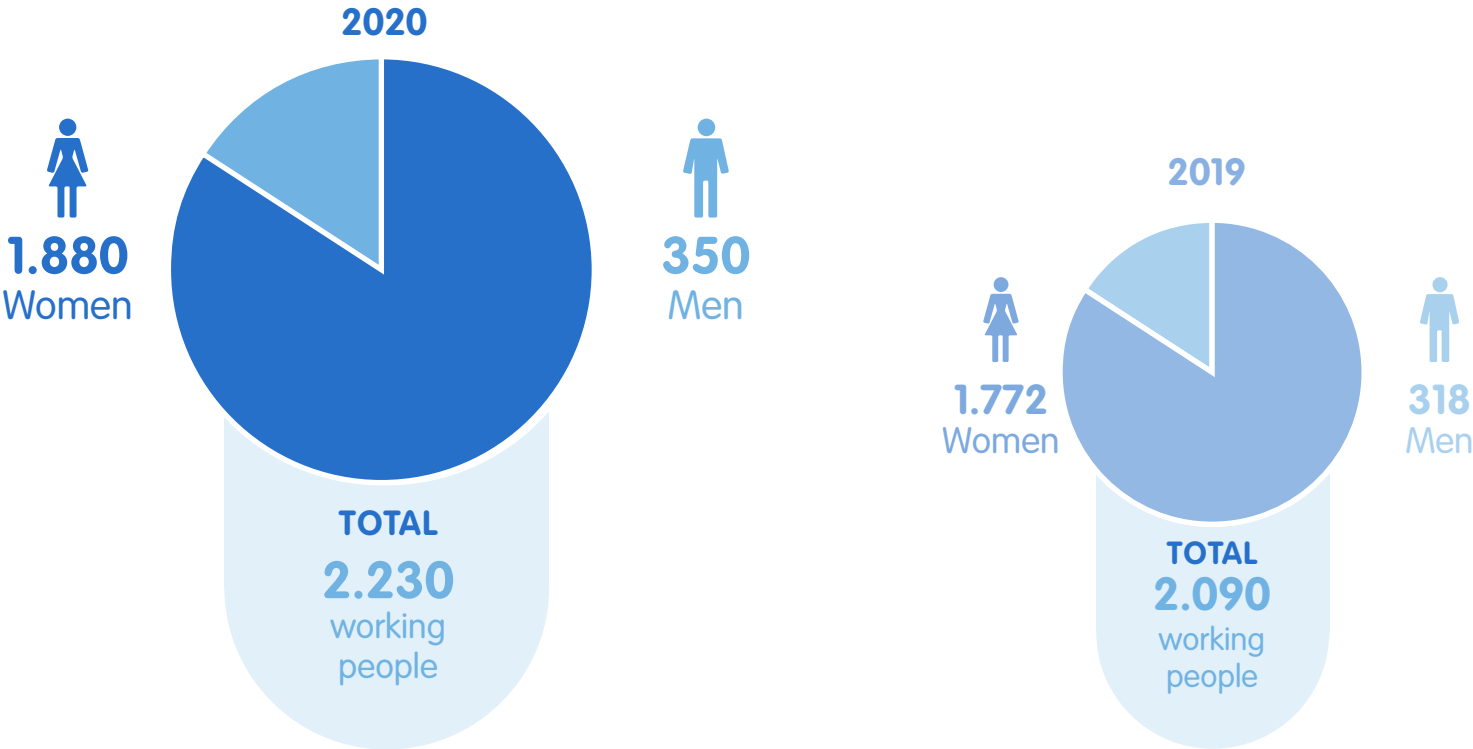
Professional category	2020 (%)	2019 (%)
Nursing	24%	24%
Laboratory	23%	23%
Clinic support	16%	17%
Patient care	17%	16%
Support functions (headquarters)	10%	9%
Medical staff	7%	8%
Executive staff	3%	3%

All workers who are part of the company as of 12/31/2020 and 12/31/2019 have been taken into account.

Workforce according to gender



All workers who are part of the company as of 12/31/2020 and 12/31/2019 have been taken into account.



The distribution of IVIRMA’s workforce by gender, age and professional category are shown below. In the annex to this document, figures for 2019 are included to facilitate comparison with 2020.



Distribution of workforce by gender, age and professional category - IVIRMA Global

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	0	2	7	27	31	67	19	43	6	24	3	3	66	166
Clinic support	1	0	10	27	26	83	23	93	10	56	5	24	75	283
Medical staff	0	0	1	1	5	35	11	56	12	17	6	1	45	110
Laboratory	1	2	21	107	30	178	26	117	4	29	0	8	82	441
Nursing	0	0	3	118	0	231	4	129	3	33	0	10	10	521
Patient care	0	2	4	56	13	120	6	109	1	53	0	5	24	345
Executive staff	0	0	0	0	6	2	13	6	23	4	6	2	48	14
Total	2	6	46	336	121	716	102	553	59	216	20	53	350	1880

All workers who are part of the company as of 31/12/2020 have been taken into account.

Distribution of workforce by gender, age and professional category - Spain

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	0	0	5	11	21	48	18	35	5	20	1	1	50	115
Clinic support	0	0	5	0	13	18	19	55	4	35	5	14	46	122
Medical staff	0	0	1	1	5	19	5	43	10	13	1	0	22	76
Laboratory	0	0	8	32	15	97	19	86	3	18	0	2	45	235
Nursing	0	0	2	48	0	115	4	84	2	11	0	1	8	259
Patient care	0	0	1	21	10	75	4	86	1	42	0	1	16	225
Executive staff	0	0	0	0	2	0	8	3	16	0	2	0	28	3
Total	0	0	22	113	66	372	77	392	41	139	9	19	215	1035

All workers who are part of the company as of 31/12/2020 have been taken into account.

Distribution of workforce by gender, age and professional category – USA

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	0	2	2	16	10	18	1	8	1	4	2	2	16	50
Clinic support	0	0	0	19	2	43	1	23	2	12	0	8	5	105
Medical staff	0	0	0	0	5	8	3	4	2	4	5	1	15	17
Laboratory	1	2	10	61	7	52	2	18	2	11	0	6	21	150
Nursing	0	0	1	44	0	75	0	34	1	22	0	9	2	184
Patient care	0	2	0	28	0	19	0	11	0	4	0	4	0	68
Executive staff	0	0	0	0	4	2	2	2	2	3	4	2	12	9
Total	1	6	3	168	28	217	9	100	9	60	11	32	71	583

All workers who are part of the company as of 31/12/2020 have been taken into account.

Distribution of workforce by gender, age and professional category – Rest of Europe

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Clinic support	0	0	2	7	3	12	2	11	1	5	0	1	8	36
Medical staff	0	0	0	0	2	4	1	4	0	0	0	0	3	8
Laboratory	0	0	3	7	5	13	4	8	0	0	0	0	12	28
Nursing	0	0	0	14	0	20	0	5	0	0	0	0	0	39
Patient care	0	0	2	5	2	7	0	3	0	4	0	0	4	19
Executive staff	0	0	0	0	0	0	2	1	3	0	0	0	5	1
Total	0	0	7	33	12	56	9	32	4	9	0	1	32	131

All workers who are part of the company as of 31/12/2020 have been taken into account.

Distribution of workforce by gender, age and professional category – LATAM

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	0	0	0	0	0	1	0	0	0	0	0	0	0	1
Clinic support	1	0	3	1	8	10	1	4	3	4	0	1	16	20
Medical staff	0	0	0	0	3	4	2	5	0	0	0	0	5	9
Laboratory	0	0	0	7	3	16	1	5	0	0	0	0	4	28
Nursing	0	0	0	12	0	21	0	6	0	0	0	0	0	39
Patient care	0	0	1	2	1	19	2	9	0	3	0	0	4	33
Executive staff	0	0	0	0	0	0	1	0	2	1	0	0	3	1
Total	1	0	4	22	15	71	7	29	5	8	0	1	32	131

All workers who are part of the company as of 31/12/2020 have been taken into account.

We are committed to a long-term relationship with our staff

At IVIRMA we maintain a long-term relationship with our team. Promoting this type of relationship benefits both the people who form part of our organization, offering them continuity and stability, and the organization, due to the high specialization of our jobs.

Our commitment to quality employment is evident in the overall rate of employees on permanent contracts, which reaches 92%. This percentage is very similar in each of the geographical areas where the company operates.

As regards termination of the employment relationship, in 2020 there have been a total of 75 persons leaving that have affected all categories. Of these, 17 have taken place in Spain, 46 in the USA, 9 in LATAM and 3 in Rest of Europe.

We create quality employment with a rate of permanent employees that reaches 92%

Total number and distribution of work contract modalities - IVIRMA Global:

	2020		2019	
	Men	Women	Men	Women
Indefinite part-time	49	634	49	564
Indefinite full-time	267	1104	248	1100
Temporary part-time	3	44	3	29
Temporary full-time	28	93	15	75
Part-time internship	0	0	0	0
Full-time internship	3	5	3	4

All workers who are part of the company as of 31/12/2020 and 31/12/2019 have been taken into account.

	2020	2019
% workers with a permanent contract*	92%	94%
% workers with a temporary contract*	8%	6%

All workers who are part of the company as of 31/12/2020 have been taken into account. These figures have been rounded up taking into account that 0.4% of IVIRMA staff are interns .

The distribution of IVIRMA’s workforce by contract, gender and professional category and by age, as well as the number of dismissals by gender, age and professional category, are shown below. In the annex to this document, figures for 2019 are included to facilitate comparison with 2020.

Breakdown of the workforce by contract type, gender, and professional category

Breakdown of the workforce by contract type, gender, and professional category – VIRMA Global

	Indefinite part-time		Indefinite full-time		Temporary part-time		Temporary full-time		Part-time internship		Full-time internship			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	3	30	61	137	1	2	12	24	0	0	0	0	77	139
Clinic support	12	85	59	227	0	3	8	6	0	0	3	0	82	321
Medical staff	3	26	44	84	0	0	1	4	0	0	0	2	48	116
Laboratory	19	163	62	314	2	11	8	16	0	0	0	0	91	504
Nursing	2	47	7	308	1	34	2	41	0	0	0	3	12	633
Patient care	9	169	9	184	2	23	5	19	0	0	1	1	26	396
Executive staff	5	5	49	10	0	0	0	0	0	0	0	0	54	15
Total	53	725	291	1264	6	73	36	110	0	0	4	6	390	2178

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and professional category – Spain

	Indefinite part-time		Indefinite full-time		Temporary part-time		Temporary full-time		Part-time internship		Full-time internship			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	1	10	41	89	1	2	12	24	0	0	0	0	55	125
Clinic support	8	39	35	80	0	3	5	3	0	0	0	0	48	125
Medical staff	0	18	24	58	0	0	1	3	0	0	0	0	25	79
Laboratory	14	93	29	130	2	11	4	13	0	0	0	0	49	247
Nursing	0	155	7	98	1	30	2	25	0	0	0	0	10	308
Patient care	7	128	5	84	2	17	4	18	0	0	0	0	18	247
Executive staff	2	0	30	3	0	0	0	0	0	0	0	0	32	3
Total	32	443	171	542	6	63	28	86	0	0	0	0	237	1134

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and professional category – USA

	Indefinite part-time		Indefinite full-time		Temporary part-time		Temporary full-time		Part-time internship		Full-time internship			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	2	20	20	47	0	0	0	0	0	0	0	0	22	67
Clinic support	4	43	3	93	0	0	0	0	0	0	0	0	7	136
Medical staff	3	7	12	13	0	0	0	0	0	0	0	0	15	20
Laboratory	5	67	20	131	0	0	0	0	0	0	0	0	25	198
Nursing	2	84	0	149	0	0	0	0	0	0	0	0	2	233
Patient care	0	32	0	56	0	0	0	0	0	0	0	0	0	88
Executive staff	3	5	11	5	0	0	0	0	0	0	0	0	14	10
Total	19	258	66	494	0	0	0	0	0	0	0	0	85	752

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and professional category – Rest of Europe

	Indefinite part-time		Indefinite full-time		Temporary part-time		Temporary full-time		Part-time internship		Full-time internship			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Clinic support	0	3	7	33	0	0	3	3	0	0	0	0	10	39
Medical staff	0	1	3	6	0	0	0	1	0	0	0	0	3	8
Laboratory	0	3	9	22	0	0	4	3	0	0	0	0	13	28
Nursing	0	7	0	18	0	4	0	12	0	0	0	0	0	41
Patient care	2	9	1	5	0	6	0	0	0	0	1	1	4	21
Executive staff	0	0	5	1	0	0	0	0	0	0	0	0	5	1
Total	2	23	25	85	0	10	7	19	0	0	1	1	35	138

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and professional category – LATAM

	Indefinite part-time		Indefinite full-time		Temporary part-time		Temporary full-time		Part-time internship		Full-time internship			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Clinic support	0	0	14	21	0	0	0	0	0	0	3	0	17	21
Medical staff	0	0	5	7	0	0	0	0	0	0	0	2	5	9
Laboratory	0	0	4	31	0	0	0	0	0	0	0	0	4	31
Nursing	0	1	0	43	0	0	0	4	0	0	0	3	0	51
Patient care	0	0	3	39	0	0	1	1	0	0	0	0	4	40
Executive staff	0	0	3	1	0	0	0	0	0	0	0	0	3	1
Total	0	1	29	143	0	0	1	5	0	0	3	5	33	154

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and age

Breakdown of the workforce by contract type, gender, and age – IVIRMA Global

	<div>Under 21</div> <div>From 21 to 29</div> <div>From 30 to 39</div> <div>From 40 to 49</div> <div>From 50 to 60</div> <div>Over 60</div>													
Type of contract	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Indefinite part-time	0	6	9	109	18	263	12	219	8	101	6	27	53	725
Indefinite full-time	1	1	28	250	99	497	91	358	55	130	17	28	291	1264
Temporary part-time	0	0	3	34	2	31	1	6	0	2	0	0	6	73
Temporary full-time	0	0	16	38	16	44	4	23	0	5	0	0	36	110
Part-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Full-time internship	1	0	2	4	0	2	0	0	1	0	0	0	4	6
Total	2	7	58	435	135	837	108	606	64	238	23	55	390	2178

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and age – Spain

	<div>Under 21</div> <div>From 21 to 29</div> <div>From 30 to 39</div> <div>From 40 to 49</div> <div>From 50 to 60</div> <div>Over 60</div>													
Type of contract	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Indefinite part-time	0	0	4	30	14	170	8	171	3	63	3	9	32	443
Indefinite full-time	0	0	9	48	47	196	68	217	39	71	8	10	171	542
Temporary part-time	0	0	3	29	2	27	1	5	0	2	0	0	6	63
Temporary full-time	0	0	12	29	12	33	4	19	0	5	0	0	28	86
Part-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Full-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	0	0	28	136	75	426	81	412	42	141	11	19	237	1134

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and age – USA

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Type of contract	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Indefinite part-time	0	6	4	75	3	82	4	42	5	35	3	18	19	258
Indefinite full-time	1	1	12	154	30	193	7	87	7	43	9	16	66	494
Temporary part-time	0	0	0	0	0	0	0	0	0	2	0	0	0	0
Temporary full-time	0	0	0	0	0	0	0	0	0	5	0	0	0	0
Part-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Full-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	1	7	16	229	33	275	11	129	12	78	12	34	85	752

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and age– Rest of Europe

	<div>Under 21</div> <div>From 21 to 29</div> <div>From 30 to 39</div> <div>From 40 to 49</div> <div>From 50 to 60</div> <div>Over 60</div>													
Type of contract	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Indefinite part-time	0	0	1	4	1	10	0	6	0	3	0	0	2	23
Indefinite full-time	0	0	4	18	7	36	9	23	5	7	0	1	25	85
Temporary part-time	0	0	0	5	0	4	0	1	0	0	0	0	0	10
Temporary full-time	0	0	3	8	4	8	0	3	0	0	0	0	7	19
Part-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Full-time internship	0	0	1	1	0	0	0	0	0	0	0	0	1	1
Total	0	0	9	36	12	58	9	33	5	10	0	1	35	138

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and age – LATAM

	<div>Under 21</div> <div>From 21 to 29</div> <div>From 30 to 39</div> <div>From 40 to 49</div> <div>From 50 to 60</div> <div>Over 60</div>													
Type of contract	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Indefinite part-time	0	0	0	0	0	1	0	0	0	0	0	0	0	1
Indefinite full-time	0	0	3	30	15	72	7	31	4	9	0	1	29	143
Temporary part-time	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Temporary full-time	0	0	1	1	0	3	0	1	0	0	0	0	1	5
Part-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Full-time internship	1	0	1	3	0	2	0	0	1	0	0	0	3	5
Total	1	0	5	34	15	78	7	31	5	9	0	1	33	154

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Number of persons leaving by gender, age and professional category – IVIRMA Global

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Support functions (headquarters)	0	0	0	2	1	3	0	1	0	1	1	0	2	7
Clinic support	0	0	1	6	3	2	0	2	0	4	0	0	4	14
Medical staff	0	0	0	0	1	1	0	0	0	0	1	0	2	1
Laboratory	0	0	1	4	1	5	0	0	0	0	0	0	2	9
Nursing	0	0	0	9	0	6	0	6	0	0	0	0	0	21
Patient care	0	0	0	3	1	3	0	1	0	1	0	0	1	8
Executive staff	0	0	0	0	0	0	2	0	2	0	0	0	4	0
Total	0	0	2	24	7	20	2	10	2	6	2	0	15	60

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020

We retain and attract the best talent

We seek and retain those professionals who, in addition to having the finest technical skills, identify with our values and corporate culture, thus working to incorporate the best professionals for the organization.

In 2020 a total of 469 people have been hired. Of these hires, close to 63% have been indefinite (indefinite part-time and full-time contracts).

	2020	2019
Total hiring	469	497
Indefinite hiring	63%	69%

The recruitment and selection process at IVIR-MA begins by identifying the needs of each of our departments. Subsequently, the stages of designing the professioniogram for the position to be filled, publishing the vacancies, screening candidates and holding interviews, which allow the competent person to be selected for the position.

These offers are published on our corporate website, social networks and specialized employment portals. Convinced that our growth is closely linked to that of our people, we encourage internal promotion through the dissemination of vacancies on internal communication platforms such as the corporate intranet and the Center Committee (CC). The CC is a document that is used in Spain and includes all relevant information that professionals should know at corporate level.

In the USA, there is also a specific section on the corporate website with job vacancies and professionals are encouraged to apply for these offers if they satisfy the necessary requirements for the position.

One of the main resources we rely on to grow our internal talent are training programs. In this regard, for the groups of embryologists and gynecological professionals we have a program for the incorporation of specific talent through the Master’s Degree in Assisted Human Reproduction that we promote.

Number of new hires by contract type, gender, and age – IVIRMA Global

	<div>Under 21</div> <div>From 21 to 29</div> <div>From 30 to 39</div> <div>From 40 to 49</div> <div>From 50 to 60</div> <div>Over 60</div>													
Type of contract	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Indefinite part-time	0	4	1	36	1	31	0	13	1	7	0	0	3	91
Indefinite full-time	0	1	7	79	11	59	0	27	7	10	1	0	26	176
Temporary part-time	0	0	2	27	2	27	1	4	0	1	0	0	5	59
Temporary full-time	0	0	12	25	11	35	4	15	0	4	0	0	27	79
Part-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Full-time internship	1	0	0	2	0	0	0	0	0	0	0	0	1	2
Total	1	5	22	169	25	152	5	59	8	22	1	0	62	407

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Being the best place to work is a daily priority for IVIRMA, because we work for and with people



Our purpose is to offer an environment of wellbeing to our human team

One of the lines of action we follow to manage the talent of our people is to promote initiatives that generate a motivating environment.

For this reason, we put all our effort into making people feel integrated, valued and important. Accordingly, one of the fundamental points is communication: listening and transmitting. In this sense, every day we add and strengthen our initiatives focused on this area. We develop processes, tools and internal communication channels aimed at ensuring that our human team knows and inwardly digests the values and culture, the strategic goals of the company and the actions that are being developed to achieve them.

We are IVIRMA

We are IVIRMA is our main internal communication tool that is designed as an authentic corporate social network where interaction is facilitated and horizontal dialogue is generated to provide our professionals with space. In addition, this portal allows our professionals to gain access to personal and private documents, such as payroll or certificates. Our team can also request vacations and manage their time, learn about company protocols and standards, and access internal and external company social benefits and the performance evaluation system. In 2020 the USA adopted this tool, which now offers a global scope.

This tool has been especially important during COVID-19, as it has become a space for partnering, listening and support between centers and individuals. In this sense, we clapped along with the balconies with our applause in the form of likes and comments through the following corporate message: *"A few minutes ago all the balconies were ringing with applause for the health workers. It was incredible, exciting. In these difficult times, we can only be proud of all of you"*.

This corporate publication had a very positive impact and served as a trigger for each professional to make their own publications with messages, photos and songs of encouragement, among others. Due to the success of this action, a specific group called "COVID19" was created and has become the major source of internal communication related to the pandemic.

At IVIRMA we accompany, listen and support our team, especially in the difficult times that have occurred during the pandemic.

Sending periodic newsletters

One essential means of communication at a global level is the sending of periodic newsletters to the different areas of the company and clinics with relevant content on services, processes and corporate information.

During 2020, 463 communiqués were sent out, a ratio that had its greatest impact in March, April and May, where there was an extra effort to keep the staff updated with the latest information on the pandemic during the layoff (ERTE) situation and to offer this space for emotional support between colleagues and centers.

Year of nursing

2020 was the International Year of the Nurse and the Midwife, so at IVIRMA we wanted to carry out employer branding actions to showcase this group, including, in addition, auxiliary staff. We also conducted a salary study in this area, to improve the conditions of the collective.

Patient first

In 2020, a strategic project started, which will be launched in 2021, with the aim of strengthening our "Patient First" value. To this end, we have internally declared 2021 as the year of Patient Care to recognize this group of people who are essential to the experience of anyone who comes to our clinics.

IVI Advantages

We offer our professionals all the comforts and advantages that are within our reach. Through the IVI Advantages program our staff can access social benefits: from internal organization discounts to favorable conditions with other companies through being IVIRMA employees.

In 2020 we continue to strengthen the IVI Benefits tool thanks to its incorporation into the corporate portal We are IVIRMA, so that employees have easier access to the advantages we offer. During 2020, a total of 409 professionals have benefited from this platform, making 4,812 purchases and generating a total average saving of 7,106 euros.

Recognition plan

We value the effort and dedication of all our staff.

In 2020 we re-launched the Recognition Plan to continue to value the effort and dedication of our staff at IVIRMA centers. This plan has been launched in Spain, Portugal, Italy and the UK and will be progressively introduced in LATAM and the USA. Following the usual mechanics, each employee nominated two colleagues, highlighting their conduct and skills associated with our corporate values.

Given the context of COVID-19, in 2020 it has not been possible to hold the Christmas event where the results of the Recognition Plan were unveiled. For this reason, the digital platform was used so that each center director could leave a message in text, video or photo format revealing who had won and sending a general message of support. This served to enhance the team feeling and to value each person in the organization by increasing their motivation. The winners of the recognition scheme

received, as they do every year, their diploma and an additional day's vacation.

In addition, as a one-off replacement for the traditional company Christmas dinner, individual corporate gifts were sent out with the message "this year we all deserve a prize".

Performance evaluation system

Our Performance Evaluation System allows us to evaluate strengths and detect areas for improvement through dialogue between the person in charge of teams and the employee in which 4 skills are assessed (responsibility and commitment, innovation and growth, people orientation, communication and impact) with a series of items that define them and which are evaluated on a scale of four: needs improvement, meets expectations, exceeds expectations and exceptional case.

During 2020, two improvements have been included in this system, with the aim of making it more flexible, opening paths that allow the process to be horizontal with the possibility of adding comments, both by the assessor and the person evaluated.

The results of the performance assessment, together with the study of the salary bands associated with each position, result in a **matrix of annual salary increases** that are applied according to the financial result of each work center.

The results obtained thanks to this performance evaluation system allow us to design improvement plans for each professional.

Although performance assessment is a process that takes place in all centers globally, this standardized system through our We are IVIRMA platform was implemented for all centers, with the exception of the USA which, having joined the platform in 202, will be added to this corporate system in 2021. Currently, in this geographical area, the annual evaluation is carried out through the PMP (Performance Management Process), which is associated with the corresponding salary increase and internal promotions, according to performance, in line with the corporate commitment at a global level.

[We listen to you](#)

We promote the professional development and continuous improvement of our staff

Every two years, we launch the work climate evaluation process, in which our staff assess the different areas of IVIRMA through a survey platform. This process is anonymous and, besides obtaining feedback from the organization, it allows us to maintain and improve the feeling of belonging of all our workers.

The last biennial climate study was conducted in 2018 and was scheduled to be carried out once more during 2020. Due to the exceptional circumstances generated by the state of emergency, this study has been put back to 2021, the launch of which has been carried out for Spain, LATAM and RER. In the case of the USA they have their own satisfaction survey through a customized platform.

In any case, during 2020 another type of survey was launched as a form under the name **"We listen to you"** to discover how people felt in a safe, comfortable space and with open questions asking how the exceptional situation given by COVID-19 had affected them in their day-to-day life. The survey was answered with empathy and allowed us to offer support on a human level from the HR area.

Remuneration policy

IVIRMA's remuneration model is based on the results and levels of a job classification system that objectively systematizes the contribution of all employees to the company. Criteria based on objectivity and internal equity are vital to the design and implementation of the IVIRMA Remuneration Policy that affects all the group's employees.

IVIRMA's remuneration system has a structure around salary bands associated with each position, which are divided into tranches. This allows professionals to evolve at the salary level based on performance evaluation. In addition, we adapt to the characteristics of each of the working environments where we operate, always within the framework of our values and taking into account the identity of each geographical region of the Group.

Likewise, in accordance with the company's policy of equality and respect for diversity, remuneration policies and salary updating processes are based solely on merit, the level of responsibility and talent of each professional,

avoiding any discrimination based on gender, culture, religion, sexual orientation, age, etc.

Variable remuneration is one of the fundamental elements of our compensation policy and applies to employees in all areas of the Group's activity. In this regard, strategic targets are reviewed and set each year, in which the different groups of IVIRMA have a percentage of variable annual remuneration.

The **Management** Remuneration Policy is also progressive, depending on the trajectory and evolution of the clinic's activity.

The Board of Directors comprises 5 Directors, who exercise functions in the company as doctors and co-directors. The compensation established for Board members is 5,000 euros per year (gross), in addition to their corresponding salary as doctors and co-directors.

Beyond the policies, and within the framework of the labor laws of each center, we have formulas adapted to the interests of the employees.

One example of this is flexible remuneration, which covers the entire workforce in Spain and allows employees to choose products and services such as transport passes or childcare vouchers that lead to tax savings.

At the IVIRMA Global level, we have standardized categories, with the aim of grouping the company's professionals. Each IVIRMA category includes different profiles. For example: in Support functions there are middle managers, technical staff and clerical staff. These categories are specified in the following tables, which show average pay data disaggregated by gender, age and professional category.

The merit, the level of responsibility and the talent of each professional are the only criteria used for salary adjustment.



Average remuneration broken down by gender, age and professional category

Average remuneration broken down by gender, age and professional category – Spain

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60	
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women
Support functions (headquarters)	0,00 €	0,00 €	31.000,05 €	27.974,14 €	36.093,42 €	33.023,32 €	40.978,23 €	34.952,90 €	40.312,47 €	32.936,15 €	32.303,15 €	64.999,98 €
Clinic support	0,00 €	0,00 €	25.121,78 €	0,00 €	23.759,22 €	21.445,74 €	27.787,36 €	33.538,51 €	24.098,36 €	34.196,78 €	24.377,80 €	31.471,72 €
Medical staff	0,00 €	0,00 €	60.000,00 €	0,00 €	60.902,86 €	60.594,38 €	66.303,31 €	68.904,75 €	77.866,04 €	77.377,94 €	78.403,10 €	0,00 €
Laboratory	0,00 €	0,00 €	21.363,83 €	24.588,50 €	30.228,96 €	30.654,27 €	44.937,22 €	39.116,41 €	51.063,77 €	57.955,96 €	0,00 €	49.044,84 €
Nursing	0,00 €	0,00 €	17.993,00 €	21.391,76 €	0,00 €	24.384,66 €	26.650,50 €	27.938,71 €	26.818,26 €	28.370,83 €	0,00 €	0,00 €
Patient care	0,00 €	0,00 €	0,00 €	20.439,91 €	16.924,03 €	19.332,96 €	23.128,47 €	21.745,54 €	0,00 €	25.110,49 €	0,00 €	0,00 €
Executive staff*	0,00 €	0,00 €	0,00 €	0,00 €	138.356,48 €	0,00 €	188.803,98 €	156.966,67 €	210.378,42 €	0,00 €	223.471,00 €	0,00 €

The own categories used at IVIRMA simultaneously make reference to the type of job.

We have taken into consideration staff members with an indefinite full-time contract who have been at the company at any time, even if they did not form part of the workforce at 12/31/2019,

* The remuneration of Executives includes the fixed and variable remuneration.

Average remuneration broken down by gender, age and professional category – USA.

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60	
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women
Support functions (headquarters)	0,00€	0,00€	47.897,07 €	40.676,30 €	81.081,13 €	50.650,37 €	176.369,98 €	62.896,27 €	77.418,30 €	72.450,59 €	77.418,30 €	51.084,07 €
Clinic support	0,00€	0,00€	0,00€	32.715,65 €	48.118,33 €	40.455,47 €	0,00 €	38.793,55 €	0,00 €	40.817,19 €	0,00 €	40.817,19 €
Medical staff	0,00€	0,00€	0,00 €	0,00 €	160.321,90 €	211.372,35 €	203.732,38 €	224.105,61 €	203.732,38 €	203.732,38 €	245.432,23 €	0,00 €
Laboratory	0,00€	36.549,59 €	36.876,86 €	35.657,18 €	63.354,96 €	50.824,08 €	33.673,29 €	53.062,30 €	99.747,37 €	95.479,65 €	0,00 €	40.204,55 €
Nursing	0,00€	0,00€	0,00€	49.622,44 €	0,00 €	64.687,56 €	0,00 €	65.937,57 €	0,00 €	68.645,06 €	0,00 €	82.928,85 €
Patient care	0,00€	0,00€	0,00 €	33.616,45 €	0,00 €	33.470,63 €	0,00 €	36.031,41 €	0,00 €	37.474,33 €	0,00 €	29.684,62 €
Executive staff*	0,00€	0,00€	0,00 €	0,00 €	148.045,53 €	122.239,43 €	130.388,72 €	210.740,77 €	209.211,94	142.612,66 €	193.994,58 €	148.805,95€

The own categories used at IVIRMA simultaneously make reference to the type of job.

We have taken into consideration staff members with an indefinite full-time contract who have been at the company at any time, even if they did not form part of the workforce at 12/31/2019, and considering the annual average gross salary to observe the evolution throughout the year and to facilitate comparability.

* The remuneration of Executives includes the fixed and variable remuneration.

Average remuneration broken down by gender, age and professional category – Rest of Europe

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60	
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women
Support functions (headquarters)	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €
Clinic support	0,00 €	0,00 €	31.144,68 €	31.792,45 €	21.744,64 €	50.035,64 €	48.554,47 €	34.867,38 €	36.775,75 €	28.545,13 €	0,00 €	0,00 €
Medical staff	0,00€	0,00€	0,00 €	0,00 €	62.013,89 €	85.000,02 €	84.999,98 €	74.564,88 €	0,00 €	0,00 €	0,00 €	0,00 €
Laboratory	0,00€	0,00 €	26.192,26 €	28.415,68	48.400,20 €	40.432,25 €	44.226,85 €	52.846,47 €	0,00 €	0,00 €	0,00 €	0,00 €
Nursing	0,00€	0,00€	0,00€	30.641,50 €	0,00 €	35.347,50 €	0,00 €	25.221,71 €	0,00 €	77.528,00 €	0,00 €	0,00 €
Patient care	0,00€	0,00€	0,00 €	21.119,02 €	21.119,02 €	24.463,38 €	0,00 €	25.715,04 €	0,00 €	21.119,02 €	0,00 €	0,00 €
Executive staff *	0,00€	0,00€	0,00 €	0,00 €	0,00 €	0,00 €	339.366,60 €	**	225.008,59 €	0,00 €	0,00 €	0,00 €

The own categories used at IVIRMA simultaneously make reference to the type of job.

We have taken into consideration staff members with an indefinite full-time contract who have been at the company at any time, even if they did not form part of the workforce at 12/31/2019, and considering the annual average gross salary to observe the evolution throughout the year and to facilitate comparability.

* The remuneration of Executives includes the fixed and variable remuneration. ** Salary is not included for privacy reasons as there is only one person in that category.

Average remuneration broken down by gender, age and professional category – LATAM

	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60	
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women
Support functions (headquarters)	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €	27.160,82 €	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €	0,00 €
Clinic support	0,00 €	0,00 €	11.473,19 €	9.451,21 €	16.415,47 €	14.858,60 €	32.890,80 €	46.887,49 €	26.018,38 €	10.919,57 €	0,00 €	0,00 €
Medical staff	0,00€	0,00€	0,00 €	0,00 €	45.265,40 €	38.337,10 €	50.574,81 €	35.113,81 €	0,00 €	0,00 €	0,00 €	0,00 €
Laboratory	0,00€	0,00 €	0,00 €	14.169,50 €	26.119,48 €	20.868,56 €	43.841,66 €	24.364,85 €	0,00 €	0,00 €	0,00 €	0,00 €
Nursing	0,00€	0,00€	0,00€	10.352,65 €	0,00 €	10.721,57 €	0,00 €	12.911,27 €	0,00 €	0,00 €	0,00 €	0,00 €
Patient care	0,00€	0,00€	0,00 €	8.361,20 €	11.647,80 €	9.507,40 €	12.455,89 €	11.715,20 €	0,00 €	10.526,92 €	0,00 €	0,00 €
Executive staff *	0,00€	0,00€	0,00 €	0,00 €	0,00 €	0,00 €	177.645,67 €	0,00 €	275.016,75 €	**	0,00 €	0,00 €

The own categories used at IVIRMA simultaneously make reference to the type of job.

We have taken into consideration staff members with an indefinite full-time contract who have been at the company at any time, even if they did not form part of the workforce at 12/31/2019, and considering the annual average gross salary to observe the evolution throughout the year and to facilitate comparability.

* The remuneration of Executives includes the fixed and variable remuneration. ** Salary is not included for privacy reasons as there is only one person in that category.

The following table shows calculation of the pay gap considering the average annual gross salary of the Group’s workers, for each category.

As stated above, at IVIRMA we promote salary equity by establishing a salary band system, without making any distinction from a gender perspective. In this regard, the differences shown in the pay gap may be due to the following reasons:

- Existence of different professional profiles within the same category.
- Parental leave.
- Situations of TIW (Temporary inability to work)

It should be borne in mind that, in order to standardize the categories globally, each category includes very diverse profiles with different responsibilities and, in addition, there are very different ranges of seniority.

In fact, one aspect to take into account when making the calculation by professional category and analyzing it is that there is a different and irregular distribution of men and women in the different categories due to the structure of the organization itself, which has a direct impact on the results.

In addition, to provide information by geographical area in line with the content of this section, both LATAM and RER include data from countries with widely varying socioeconomic levels, so the average is affected by this variability. For example, in the case of LATAM, information from Brazil, Argentina, Portugal and Panama is integrated, and both Argentina and Brazil have had a significant devaluation of their respective currencies due to both COVID-19 and the economic situation of both countries.

Pay gap by professional category:

Spain

Category	Male average	Female average	Pay gap (%)
Support functions (headquarters)	38.297,53 €	33.790,43 €	11,77%
Clinic support	25.846,45 €	31.690,71 €	-22,61%
Medical staff	70.516,68 €	67.207,82 €	4,69%
Laboratory	37.543,60 €	35.725,75 €	4,84%
Nursing	24.224,86 €	25.088,25 €	-3,56%
Patient care	20.646,69 €	21.207,34 €	-2,72%
Executive staff *	199.258,31 €	156.966,67 €	21,22%

* The remuneration of executives includes the fixed and variable remuneration

USA

Category	Male average	Female average	Pay gap (%)
Support functions (headquarters)	78.531,87 €	52.622,51 €	32,99%
Clinic support	48.118,33 €	38.919,43 €	19,12%
Medical staff	196.212,19 €	214.702,59 €	-9,42%
Laboratory	50.997,29 €	45.461,87 €	10,85%
Nursing	0,00 €	62.366,25 €	N/A
Patient care	0,00 €	34.141,77 €	N/A
Executive staff *	178.414,49 €	167.027,92 €	6,38%

* The remuneration of executives includes the fixed and variable remuneration

RER

Category	Male average	Female average	Pay gap (%)
Support functions (headquarters)	0,00 €	0,00 €	N/A
Clinic support	35.042,06 €	38.919,43 €	-10,87%
Medical staff	69.675,92 €	79.782,45 €	-14,51%
Laboratory	39.142,73 €	40.540,70 €	-3,57%
Nursing	0,00 €	34.093,81 €	N/A
Patient care	21.119,02 €	23.375,97 €	-10,69%
Executive staff *	270.751,79 €	**	-9,71%

** Salary is not included for privacy reasons as there is only one person in that category.

LATAM***

Category	Male average	Female average	Pay gap (%)
Support functions (headquarters)	0,00 €	27.160,82 €	N/A
Clinic support	17.905,07 €	19.177,54 €	-7,11%
Medical staff	47.389,17 €	36.034,75 €	23,96%
Laboratory	30.550,03 €	19.487,59 €	36,21%
Nursing	0,00 €	10.940,76 €	N/A
Patient care	12.186,53 €	10.089,90 €	17,20%
Executive staff *	242.559,72 €	* * * *	42,13%

* The remuneration of executives includes the fixed and variable remuneration

*** To be taken into account: LATAM includes information from a range of countries with very different socio-economic levels, meaning the averages and the gap are affected by distribution of the workforce and their different salaries by country. This justifies the 42% gap, since at the managerial level there is only one woman in this geographical area, her country being Brazil.

**** Salary is not included for privacy reasons as there is only one person in that category.

In calculating the gap, we have taken into consideration staff members with an indefinite full-time contract who have been at the company at any time in 2020, and considering the annual average gross salary to observe the evolution throughout the year and to facilitate comparability.

The calculation formula is: (average gross salary men-average gross salary women) / (average gross salary men)



LIFE AND WORK BALANCE AND ORGANIZATION OF WORK

We are a family-friendly company, we promote the reconciliation of personal and professional life to all IVIRMA employees.

The promotion of **shared responsibility, equal opportunities and diversity** in IVIRMA can be seen in our daily work. In this regard, we believe that the professional and personal spheres must be balanced in order to guarantee optimum performance and the fulfilment of our people.

At IVIRMA we grant all **paid leaves of absence** that prevailing legislation of each country and the applicable collective agreement establishes, related to marriage, birth of a child, death or illness of relatives up to the second degree of kinship, moving home, inexcusable duty, preparation for childbirth, medical consultations and personal matters, among others.

A clear example of the granting of paid leave by IVIRMA has taken place at the Valencia clinic, where a document has been negotiated with the Works Council which includes the paid leave established by agreement, with a detailed explanation, as well as an improvement with respect to the minimums established in the legal precept.

Flexible working hours are available at IVIRMA, as a reflection of the promotion of shared responsibility, equal opportunities and diversity and to ensure our staff can adapt their professional life with their family needs both in the offices and in the clinics of the organization.

In our **offices** we have flexible start and finish times, the possibility of flexible timetables, reduced working hours on Fridays, adaptability of shifts and generation of additional days off in lieu for weekend days worked, among others. In addition, a **teleworking policy** has been introduced in 2020, driven by the COVID context, which will continue to be implemented after this period.

In the case of **clinics**, work is performed in shifts, but in certain areas and with the aim of reducing the capacity of the centers, shifts are taken between non-health personnel in order to work from home. In addition, to foster the conciliation in non-school periods and continue giving the best care to our patients, during the Easter, August and Christmas periods, we work in a single morning shift with longer hours to provide service to patients and promote the enjoyment of time off.

It should also be noted that our employees have a system of social benefits that include discounted treatments, meal vouchers, transport ticket, and childcare vouchers.

Globally, 246 work-life balance measures were taken in 2020 (12.84% more than in 2019).

We promote work-life balance and provide facilities to all those people who need to attend to their personal and family needs.

Reconciliation measures

	2020		2019*	
	Women	Men	Women	Men
Maternity	115	N/A	100	N/A
Paternity	N/A	15	N/A	13
Nursing leave	4	0	6	-
Risk during pregnancy	7	0	3	-
Reduced workday for child care	0	0	0	0
Reduced workday for family reasons	2	0	0	0
Reduction for being a legal guardian	62	20	82	0
Reduced workday for less severe illness	2	0	2	0
Other	18	1	10	2
Total	210	36	203	15

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020 and 12/31/2019, and for all kinds of contracts.

* UK figures consider maternity and paternity data.

In relation to digital disconnection, we are working on a project that allows us to attend to international patients by creating a Call Center that means we can eliminate the on-call telephone at weekends and holidays, thus facilitating disconnection and quality patient care.

Parental leave

Parental leave, rate of return and staying with the company, broken down by gender.

	2020	
	Women	Men
Total number of employees with the right to parental leave	2124	382
Employees that took parental leave	112	15
Employees that returned to work after parental leave	101	14
Retention rate	90%	93%

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020, and for all kinds of contracts.

*All employees are entitled to paternal/maternal leave with the exception of Chile, where maternal leave is only allowed in case of illness of the child up to the age of 2.

Absenteeism

At IVIRMA we are concerned about the organization’s absenteeism rates, which is why we implement processes to reduce them.

During 2019, in Barcelona, it was agreed with the Works Council to carry out a Substantial Modification of the Working Conditions that allowed us, as a company, to stop applying the gross supplement for common illness. In 2020, due to the pandemic, we decided to discontinue it in order not to penalize periods of absence caused by COVID-19. The plan to carry out the same process in all centers has also been postponed.

Absenteeism data for IVIRMA is displayed in the following graphs. Women have the highest percentage of absenteeism in the organization (95% of absenteeism), but they also represent a higher percentage of staff (84% of the total).

IVIRMA Global

	Women	Men	Total
Hours of absenteeism	329.725,49	18.574,60	348.300,09
% absenteeism	95%	5%	100%
Workforce by gender %	84%	16%	100%

Spain

	Women	Men	Total
Hours of absenteeism	208.922,00	14.563,49	223.485,49
% absenteeism	93%	7%	100%
Workforce by gender %	83%	17%	100%

EE.UU.

	Women	Men	Total
Hours of absenteeism	92.072	80	92.152,00
% absenteeism	99,9%	0,1%	100%
Workforce by gender %	89%	11%	100%

RER

	Women	Men	Total
Hours of absenteeism	11.888,49	2.451,11	14.340,60
% absenteeism	83%	17%	100%
Workforce by gender %	80%	20%	100%

LATAM

	Women	Men	Total
Hours of absenteeism	16.843,00	1.480,00	18.323,00
% absenteeism	92%	8%	100%
Workforce by gender %	80%	20%	100%

The number of hours not worked due to common illness as well as due to work-related accidents and non-work-related accidents have been taken into account.



OCCUPATIONAL HEALTH AND SAFETY

At IVIRMA we are always working to provide a respectful and healthy working climate at all levels of the company

In 2020, within the framework of COVID-19, all the adaptations that we have developed in our facilities to ensure safe work have been of particular importance. For instance, we have created a series of **action protocols and best practices** to adapt to this new situation, taking as a guide the guidelines provided by the Ministry of Health, as well as the External Prevention Service (Quirón prevención) and Mutua Universal.

The protocols developed by IVIRMA are aimed at patients and IVIRMA's internal and external healthcare staff and indicate the safety measures for the development of daily activities in our clinics and offices. We have also introduced a **procedure to control the spread of COVID-19** in the event that any of our employees have symptoms or are diagnosed.

Training has also played an important role in this context of adaptation. During 2020, different training and information courses on COVID-19 have been carried out; one example is the "Performance of prevention services against SARS-CoV-2" course, which was held in Spain, Portugal and LATAM.

The context of COVID-19 has implied an adaptation and a specific control of safety at work, but health has always been a priority issue for us, so we always work to provide a respectful and healthy work environment at all levels of the company, integrating safety as a basic goal of our Occupational Risk Prevention Management System and carrying out customized prevention programs for each of our clinics.

We have an external prevention service, with which we carry out personalized prevention programs at each work center, and we have a person responsible for risk prevention in the clinic, who is in charge of managing the workplace-related risks and developing local-level prevention policies, in coordination with the Human Resources area of central services.

Information on prevention is one of the first aspects provided to people who join IVIRMA's staff. In fact, all the documentation corresponding to the prevention of occupational risks, as well as specific information related to their new job, is available on the **Welcome Portal** and included in the **Digital Welcome Plan**. Moreover, in the case of the USA, it is available in the Employee Handbook as one of the fundamental aspects at the people level.

Once these workers have joined the company and have received initial information and training on the job-related risks, they can then, if necessary, undergo training in first aid, cardiopulmonary resuscitation, blood extraction

training, fire drills, informative talks on PPE (personal protective equipment), etc. In this sense, the prevention service organizes **specialized training**, as well as ergonomic studies of specific areas in which workers carry out repetitive movements. In the USA there is a specific employee Health and Safety training called OSHA Safety.

At IVIRMA we go beyond the risk prevention policies specified by law, applying processes and actions such as the prevention bonus, which we opt for thanks to our best practices, the aforementioned training courses and ergonomic reports. We also perform psychosocial studies when we believe there may be a conflict in a department and we want to know the reason or origin in order to solve it.

The health and safety of our providers and patients is also a concern of IVIRMA. In the chapter of this report "Committed to our patients", the system implemented at IVIRMA to guarantee the health and safety of our patients is specified.

In Spain, management of workplace accidents and work-related ill health is carried out jointly by Human Resources with the collaboration of the mutual accident insurance company. In addition, we have a Health and Safety Committee in all the centers where we have a Works Committee. In this regard, employees are involved in the Health and Safety System since they are considered as potential witnesses to work accidents, even though a third party not linked to the company may also be. The management of safety, health and occupational risk prevention in other countries where IVIRMA is present is carried out by a prevention services company that guarantees its management and offers a very similar service to the one we provide in Spain.

In the USA, there is also a very strong corporate commitment to respect the health and privacy of professionals, in accordance with HIPAA (Health Insurance Portability and Accountability Act).

As an organization we go beyond the aspects of health and safety at work, promoting the health of our staff. One example of this is the promotion of healthy habits, such as the weekly distribution of fruit at our head offices. In relation to this aspect, a series of projects such as the Luxembourg Declaration, healthy habits and benefits for IVIRMA employees were planned for 2020. These projects have been put on hold to respond to the context produced by COVID-19.



Work-related accidents and work-related ill health

Ensuring the safety of our staff is fundamental to our organization. For this reason, and with the aim of reviewing the evolution of accident indicators, analyzing their causes and being able to apply preventive policies to reduce IVIRMA's accident rate, in Spain we produce annual reports on work-related accidents and work-related ill health that have occurred in the company.

The outsourced prevention service, in its visit to the clinics, assesses and determines the risks. The evaluation allows us to assess and estimate the size of those risks that exist at the company for the health and safety of workers and, subsequently, to propose the necessary control measures to eliminate or reduce them.

To minimize risks in IVIRMA we use the following resources:

- The provision of information to and training of workers.
- Accident investigation.
- Regular checks.
- Control and use of PPE (Personal Protection Equipment).
- Action measures in emergencies.
- Coordination of business activities.

This process enables us to prevent or reduce potential incidents of health and safety and work-related injuries or ill health. Through this prevention we reinforce a fundamental aspect for the company: to minimize, to the extent possible, the causes of all the hazards in the workplaces.

During 2020, there were no serious accidents at any of IVIRMA's work centers worldwide.

Spain

	2020	
	Men	Women
Fatalities due to work-related injuries	0	0
Rate of fatalities due to work-related injuries	0	0
Victims of serious work-related injuries	0	0
Rate of serious work-related injuries	0	0
No. of registered work-related injuries	1	21
Rate of registered work-related injuries	561,80	565,32
Main types of work-related injuries	Dislocations, sprains and strains Wounds and superficial injuries	

RER*	2020	
	Men	Women
Fatalities due to work-related injuries	0	0
Rate of fatalities due to work-related injuries	0	0
Victims of serious work-related injuries	0	0
Rate of serious work-related injuries	0	0
No. of registered work-related injuries	0	6
Rate of registered work-related injuries	0	684,30
Main types of work-related injuries	Superficial wounds and injuries	

USA	2020	
	Men	Women
Fatalities due to work-related injuries	0	0
Rate of fatalities due to work-related injuries	0	0
Victims of serious work-related injuries	0	0
Rate of serious work-related injuries	0	0
No. of registered work-related injuries	1	2
Rate of registered work-related injuries	694,44	961,54
Main types of work-related injuries	Superficial wounds and injuries	

*Accident data from Italy and Portugal. No accidents occurred in the UK.

LATAM

	2020	
	Men	Women
Fatalities due to work-related injuries	0	0
Rate of fatalities due to work-related injuries	0	0
Victims of serious work-related injuries	0	0
Rate of serious work-related injuries	0	0
No. of registered work-related injuries	1	2
Rate of registered work-related injuries	635,32	509,16
Main types of work-related injuries	Superficial wounds and injuries	

The following formula has been used to calculate the rate of recorded work-related injuries: (number of accidents) / (number of hours worked) x 1,000,000

In addition, as already mentioned, we have different resources to minimize and/or eliminate other occupational risks, such as information and training of workers, accident investigation, regular checks, control and use of PPE (Personal Protection Equipment), among others.

Occupational accidents by gender

	2020	
	Men	Women
SPAIN	561,80	565,32
RER	0	684,30
USA	694,44	961,54
LATAM	635,32	509,16

The following formula has been used to calculate the rate of recorded work-related injuries: (number of accidents) / (number of hours worked) x 1,000,000

Severity rate

	2020	
	Men	Women
Total	58,38	5,28

To calculate the rate of accident frequency, the following formula has been followed: (no. of working days lost *1000)/ total no. of hours worked)

OCCUPATIONAL HEALTH AND SAFETY MANAGEMENT SYSTEM

The workers are covered for any illness or work contingency by the entity collaborating with the social security department and the mutual insurance company. At the same time, all clinics have at their disposal the **outsourced prevention service** that is in charge of taking all necessary measures to minimize the risks of the clinic and those attached to the job.

The **Prevention Plan** for all IVIRMA centers includes:

- **Risk assessment**
- **Emergency plan and corrective measures.**
- **Investigation into accidents, if there are any.**

The documentation and possible incidents relating to the prevention of occupational risks are managed at each IVIRMA center by a person in charge who channels all actions in this area and serves as a point of contact with the workers.

The support of Management is fundamental in promoting the management and ongoing improvement of the Prevention of Occupational Risks and Health and Safety conditions in the workplace. In addition, IVIRMA's Management is committed to providing the necessary resources for the implementation of such a prevention plan, to disseminate it to all personnel and to promote compliance.

Furthermore, it shows a concern to avoid not only workplace accidents, but also those that occur during journeys to and from the workplace ("in itinere").

In this sense, it is important to explain that, in the case of Argentina, we have a medical emergency service for any inconvenience caused within the clinic and, in addition, we have a service of doctors at home for those employees who are absent for that reason.

The Health and Safety Management System at IVIRMA is always established in response to the regulatory framework applicable in the different territories where our clinics and offices are located. 100% of the people employed are covered by IVIRMA's own Health and Safety Management System at a global level. Likewise, there is no single legislation and each country is governed by its own particular laws.



Social relations

We are firmly committed to respecting the labor rights of our employees around the world, and in particular their right to participate, as an essential element in the sustainable development of the business model.

The group is committed to facilitating the **right of association** by providing common spaces for convening any meetings deemed necessary, and making available the means that allow them to reach the greatest possible number of workers, ensuring the success of the call to meeting and thus promoting social dialog and respect for the right of staff on the promotion of union elections in the centers.

In this regard, no operation or suppliers with which the company cooperates have been identified where the rights of workers to exercise freedom of association and collective bargaining have been or are suspected of being infringed.

At IVIRMA we guarantee and facilitate the right of association

There is legal representation of the workers at 6 of our centers: IVI Valencia, IVI Barcelona, IVI Bilbao, IVI Madrid, IVI Seville, IVI Malaga. During 2020, three new Works Councils were set up in Madrid (9 members), Seville (5 members) and Malaga (1 member). The unions that have supported the candidacies and have obtained representatives in all the centers are UGT (General Workers' Union) and CCOO (Workers' Commissions). These latest electoral processes were undertaken with total normality, without incidents in the electoral process or in the constitution of the councils.

In those centers where there is no union representation, IVIRMA promotes social dialogue through direct agreements with the groups involved, extending the agreements reached with the works councils to standardize corporate policies, provided that the casuistry of the

center allows it. Our main commitment and responsibility is to guarantee adequate information in a timely manner on the implementation of new policies at the organization.

The minimum communication deadlines are included in the corporate policies; however, within the framework of collective bargaining, the Group prioritizes the deadlines agreed with the workers' representatives, always respecting the legally established minimums. In addition, the minimum notice period granted to professionals is managed according to the measures to be adopted and the scope these. In any case, and given the geographical breakdown of IVIRMA's work centers, the minimum period is usually between 3 and 4 weeks, to ensure optimum communication and implementation of the measures to be adopted.

All IVIRMA professionals are covered by the legislative framework in terms of labor rights. In Spain, employees are covered by the private healthcare agreement applicable to each province, thus guaranteeing compliance with cu-

rent legislation on economic matters, recruitment, professional classification and working hours. This case study involves the application of 22 different agreements, and monitoring the validity of all of them with the aim of keeping the content and salary tables up to date. In addition, during 2020 the salary tables of collective bargaining agreements were updated, such as those of Seville, Madrid, Barcelona, Malaga, Zaragoza, A Coruña, Alicante, Ibiza, Mallorca, Las Palmas, Valladolid and Burgos, carrying out the corresponding regularization of the established salary concepts in order to comply with prevailing regulations.

At a global level, all group professionals are covered by the legal figures belonging to each country, such as the Labor Code of Panama, Labor Act of the United Kingdom, among others.

In occupational health & safety, most agreements do not have any additional regulation in this regard.

TRAINING AND PROFESSIONAL DEVELOPMENT

We have a training policy designed to attract, retain and, above all, develop top talent

At IVIRMA, training is a hugely important pillar, both for the organization in the sense on ongoing improvement, as well as for the personal and professional satisfaction of our employees. IVIRMA has a **training policy to attract, retain and, above all, develop the best talent**. IVIRMA has a training policy to attract, retain and, above all, develop the best talent.

Based on the strategic plan and the aspects detected by the people in charge of our groups, we carry out and adapt training to meet these needs. The training courses that we carry out at IVIRMA are innovative, based on training itineraries and tailor-made development plans.

The **Training Plan** is part of the Human Resources Policy, and applies to Europe and LATAM (Panama, Chile, Argentina and Brazil). In the case of the USA, a specific training plan is available with courses adapted to local needs.

At IVIRMA we have two different training plans:

- The first is targeted at the **IVIRMA Team** (at headquarters) **and the IVI Foundation** and is framed, respectively, within 7 and 2 development areas: Compliance & Legal, Operations, Finance, Human Resources, Marketing, IT and Medical Affairs for the IVIRMA Team and Innovation and Education for the IVI Foundation. This training plan distinguishes four thematic areas: skills, languages, computer science and other courses (which includes training actions aimed at acquiring knowledge and improving and developing technical skills).
- And a second, targeted at the **clinics** and the different profiles that are there. In this plan, the training actions are included in seven areas: skills, medicine and reproduction, laboratory, languages, computer science, RSMU (Research Support and Management Unit) and other courses.

Through our IVIRMA Campus platform, we offer training to all employees worldwide, given that it can be accessed from any mobile device. This platform allows us to offer training to all countries where we are present and to reach all centers globally. In addition, the USA has its own "Medsafe" training platform, which includes a series of mandatory training courses for the entire workforce on essential aspects for the company, including patient privacy, diversity and Health and Safety.

The following highlights some of the trainings conducted during 2020:

Learning for Excellence

Learning for Excellence is a points system to recognize the excellence of those professionals who achieve the targets set by the organization. This project was launched in 2018 with the aim of achieving, through continuous training, the level of clinical excellence required within the organization, both externally and internally.

Due to the pandemic, the layoff plans (ERTEs) and the different scenarios of difficulty in the rest of the world's clinics, during 2020 we suspended this program, resuming in autumn the Monthly Seminars exclusively, periodic seminars focused on discoveries in the scientific field by IVIRMA professionals worldwide, and some specific protocols.

We plan to resume these programs 100% during 2021 and to launch them, in addition, to the Nursing and Psychology groups.

Covid training

During 2020 we have made a significant effort to provide training on COVID-19 to all staff in Spain and Portugal through our Prevention Services. Medical Affairs has prepared a specific course for LATAM staff. In addition, a Community has been created at IVIRMA Campus to share all the new knowledge generated about COVID-19 throughout the year. In the USA, an online course on health and safety for most of the staff (OSHA Safety) has been carried out.

Training in Assisted Reproduction for non-healthcare workers

This online course, aimed at non-health staff, was launched in autumn 2020 as a pilot project for Head Offices. In 2021, depending on the results obtained, this training will be extended to the rest of the staff of the clinics who do not belong to the healthcare groups and to those employees who meet these characteristics.

Virtual Classroom Training

During 2020, due to the restrictive measures imposed by COVID-19, we have transformed some training courses that were previously held in person to streaming format. This change of format has allowed us to continue giving courses and, in addition, has encouraged us to increase the number of participants, since in the classroom format we had very limited spaces on the specific courses. The following training courses have been given in this way:

- The Clinical Research Process and its Application at IVIRMA
- Basic Statistics for Assisted Reproduction Professionals
- Embryoscope: Improving Embryo Selection through Time-lapse Systems
- Metrology applied to Assisted Reproduction Laboratories

In addition, during 2020 we have also used this modality for other training, such as language classes or courses to improve communication skills.

During 2021, we expect these training courses will continue to be given in this way.

Fertility and Assisted Reproduction Telemedicine Excellence Program

The team of gynecologists has participated in conferences aimed at improving the capacity of patient care through online consultation and awareness of other aspects related to this new way of being in contact with the patient.

Talk on Cybersecurity

The Head Office team received a talk from an expert with the aim of raising awareness among professionals about the risks that exist on the Internet, how to detect possible computer fraud and how to protect your own personal data on the Internet. In the USA, there is also a specific course on Data Protection aimed at safeguarding patient privacy.

Diversity and Sexual Harassment Courses

In the USA they have two specific courses on Equality issues, one focused on Diversity in all its forms and the other on Sexual Harassment awareness for the staff. Both training courses

are compulsory for IVIRMA professionals. Another transgender training course is scheduled to take place in 2021.

In-house coaches are key to transmitting knowledge

In addition, IVIRMA’s policy in this area is clearly committed to an in-house training model, to which end it identifies and maintains a network of in-house coaches, who pass on their knowledge to the rest of the company. These coaches, of whom there were a total of 20 in 2020, are paid for the hours of training they provide.

During 2020, a total of **17,743 hours of training** were provided **to the workforce**. The decrease in training hours during 2020 compared to the previous year is related to the COVID-19 situation.

Total training hours for staff

	Total Hours			
	2019*		2020**	
	Men	Women	Men	Women
Total	8.349,5	29.941,5	3.856	13.887,5

*US training data were not available in 2019.
** In 2020 training data is available for all countries (including USA).

Spain

	Total number of hours 2020	
	Men	Women
Support functions (headquarters)	564	1.331
Clinic support	624,5	765,5
Medical staff	758,5	1.308
Laboratory	1.057,5	3.772,5
Nursing	63	2701
Patient care	12	479,5
Total	3.079,5	10.357,5

LATAM

	Total number of hours 2020	
	Men	Women
Support functions (headquarters)	-	2
Clinic support	-	-
Medical staff	1,5	66
Laboratory	70,5	127
Nursing	2	135
Patient care	-	8
Total	74	338

RER

	Total number of hours 2020	
	Men	Women
Support functions (headquarters)	-	4
Clinic support	4	28
Medical staff	29	88,5
Laboratory	85,5	260,5
Nursing	-	489
Patient care	4	22
Total	122,5	892

USA

	Total number of hours 2020	
	Men	Women
Support functions (headquarters)	72	188
Clinic support	16	392
Medical staff	72	64
Laboratory	84	508
Nursing	8	648
Patient care	0	248
Total	252	2.048

UNIVERSAL ACCESSIBILITY FOR PEOPLE WITH DISABILITIES

At IVIRMA we work to make our centers accessible and promote the autonomy of persons with disabilities

Faced with the impossibility of finding qualified profiles that would allow us to cover 2% of the workforce with disabled personnel, during 2020 the Exceptionality Certificate was administered in Barcelona and Valencia, which was validated in both cases by the Labor Authority. This is materialized in the collaboration agreement with the Adecco Foundation, through which we provide personalized and comprehensive support to the disabled family members of the organization’s employees, promoting their social and work integration.

As of December 2020, we have a total of 22 disabled workers on staff, 20 of whom work in Spain and the rest in RER (Rest of Europe). These 22 persons with a disability represent 1. % of the total staff.

Workforce persons with disabilities

	2020			2019		
	Men	Women	Total	Men	Women	Total
Staff with disabilities	18	4	22	18	5	23

The number of workers with disabilities who remained working at the company as at 12/31/2020 has been taken into account, without considering employees who have left during 2020.

Faced with the impossibility of finding qualified profiles that would allow us to cover 2% of the workforce with disabled personnel, during 2020 the Exceptionality Certificate was administered in Barcelona and Valencia, which was validated in both cases by the Labor Authority. This is materialized in the collaboration agreement with the Adecco Foundation, through which we provide personalized and comprehensive support to the disabled family members of the organization’s employees, promoting their social and work integration.

At IVRMA we also work to ensure that all our clinics respect universal accessibility standards, adapting to the regulations of the community or country where the clinic is located. The aim is to be able to guarantee the greatest autonomy for any IVIRMA patient and we do this by eliminating physical barriers. This translates into the following practices: adapted access and washrooms, signage, furniture, ramps, access platforms or elevators so that all the elements can be understandable and usable by all our patients.



EQUALITY AND DIVERSITY

We respect and promote different sensibilities as a unique value for the exchange of ideas and progress of IVIRMA

IVIRMA's work philosophy and corporate values require a diverse and cooperative work environment, in which each professional can develop their work in an unencumbered and creative way. Respect for different sensitivities -whether based on nationality, age or gender- is a unique value that facilitates the exchange of ideas and the progress of the company.

In all of IVIRMA's business areas, the workforce mainly comprises women, who represent almost 85% of the total. Accordingly, at IVIRMA we are working to implement policies that guarantee equal **opportunities** in all areas of the organization.

The **Code of Ethics and Conduct** establishes different undertakings in relation to equal

opportunities, such as the commitment related to the promotion of professional and personal development of all workers, ensuring equal opportunities through action policies and the undertaking to provide equal opportunities in access to work and professional promotion, rejecting any type of discrimination on the basis of race, nationality, social origin, gender or others.

In addition, in the USA, a section on our commitment to equality is included in the Employee Handbook, with special emphasis on banning any type of sexual harassment.

To ensure continuous improvement in managing equal opportunities between women and men in the organization, IVIRMA considers the preparation and implementation of an equality plan as the objective.

Over the last year, in application of Royal Decree 6/2019, the Equality Plans of the IVI Valencia, IVI Madrid and IVI Barcelona centers were

negotiated and registered. In addition, during 2020 work was carried out on the Equality Policy which was launched in 2021 to coincide with Women's Day.

The main goal for 2021 in the area of diversity and equality is to carry out negotiation of the Equality Plan at group level. This will allow us to carry out a diagnosis by work center, but to have corporate policies in this area, enabling us to advance in the company's objective of unifying criteria, as well as to go beyond the requirements established by Royal Decree 901/2020.

By introducing this, we aim to achieve several specific goals, such as continuing to work on integration of the gender perspective in the organization, promoting a balanced participation of women and men in the company and the corresponding decision-making, and introducing measures to eradicate gender violence and sexual harassment on the basis of sex, gender or sexual identity.

Diversity in the workforce

	Under 30		From 30 to 50		Over 50		Disabled People	
	Men	Women	Men	Women	Men	Women	Men	Women
Support functions (headquarters)	7	29	50	110	9	27	1	2
Clinic support	11	27	49	176	15	80	2	1
Medical staff	1	1	26	91	18	18	0	0
Laboratory	22	109	56	295	4	37	0	6
Nursing	3	118	4	360	3	43	0	2
Patient care	4	58	19	229	1	58	0	7
Executive staff	0	0	18	8	29	6	1	0

Data from IVIRMA Global. Workers with all types of contracts as of 12/31/2019 have been taken into account.

In the annex to this document, figures for 2019 are included to facilitate comparison with 2020.

Diversity on the governing body*

	Under 30		From 30 to 50		Over 50		Disabled People	
	Men	Women	Men	Women	Men	Women	Men	Women
	0	0	0	0	5	0	0	0

*The Board of Directors is understood as the governing body.

Protocols against sexual or gender-based harassment

At IVIRMA we have a procedure for managing sexual and gender-based harassment in the workplace (or other situations that involve an attack on the dignity or privacy of workers), which establishes the protocol to be followed in the event that one or more of the aforementioned harassment situations occurs. This protocol is available to the entire staff through the employee portal.

As part of the process of drawing up the Equality Policy and Plans, this procedure will be updated and improved during 2021. This work places special emphasis on the following me-

asures: the introduction of clearer penalties, the inclusion of the definition of harassment on the grounds of sexual identity or gender expression, or the implementation of training actions in relation to the procedures for dealing with possible cases of harassment.

This protocol applies to IVIRMA centers in Spain, Portugal, LATAM and Italy. In the case of the USA, as mentioned above, the employee handbook includes a specific section with a specific policy on measures to prevent harassment and manage possible cases. In addition, the Code of Ethics, which has a global scope,

includes an article on our commitment to the fight against sexual harassment

Furthermore, in the Human Resources department we also have the Employee Relations & Compliance figure, which is the person responsible for managing the aspects related to equality and diversity. This person works directly to ensure that no discrimination of any kind occurs due to gender or any factor of diversity and, failing that, to give answers and manage it.

During 2020, in one of IVIRMA’s centers, a complaint was made by two workers. To guarantee the right to work in a safe environment, the Harassment Protocol was activated and the necessary measures have been adopted to avoid the repetition of such conduct.

07 COMMITTED TO THE PLANET





We are moving forward to continuously reduce IVIRMA's impact on our environment.

ENVIRONMENTAL MANAGEMENT

At IVIRMA we are committed to integrating environmental sustainability into our activities.

One clear example is the incorporation of aspects of environmental sustainability in the Quality Management System Policy and the work carried out for the preparation of the company's Environmental Policy, which we will continue to implement during 2021.

The Environmental Policy responds to the four priority thematic axes linked to different Sustainable Development Goals (SDGs) on which Agenda 2030 is based:

- **Circular Economy**, which addresses the circularity of our processes and our ability to reduce the waste generated.
- **Climate Change**, focusing on energy consumption and fuel use, taking into account both efficiency and origin.

- **Resource Consumption**, which deals with the level of consumption of the most important resources by the company and where work is carried out to align the production and supply chain with the company's sustainability targets.

- **People**, which incorporates a focus on social issues, mainly community relations, good neighborliness and participation.

These four axes are relevant within the topics related to sustainability in IVIRMA's activity. Likewise, we also consider the environmental aspects that are a priority for our stakeholders and the company itself, included in the Materiality Analysis that we have conducted in the framework of preparing this Report.

It should be noted that at IVIRMA we began our commitment to environmental sustainability before publication of the Environmental Policy. Prior to 2019, some of our clinics already had management models for the main environmental aspects, an example of this being the clinics in Madrid and Mallorca.

The Madrid clinic has been awarded the Madrid Excelente Certification, which substantiates compliance with certain social and environmental criteria. Moreover, since 2012, the Mallorca clinic has integrated an environmental management system certified according to ISO 14001 into all its activities.

During 2020, the integration of environmental sustainability aspects within the quality system continued to increase, helping to provide more information on the company's performance in this area.

In this regard, this year we have continued endeavors to include new information in the reporting of the company's environmental data, which, taking the Materiality Analysis and the most relevant issues as a reference framework, aims to share this information with our stakeholders, in the context of the preparation of our Sustainability Report, in response to Law 11/2018 on non-financial information.

In the field of environmental management, within the framework of the Materiality Analysis,

IVIRMA's stakeholders and the organization itself assessed the following topics: circular economy, office waste, sanitary waste, materials, energy, water, climate change and GHG emissions and noise and light pollution, of which only the sanitary waste aspect was classified as material. Given its importance to our stakeholders, we have a special interest in communicating and reporting information on this topic.

At IVIRMA we are committed to transparency. For this reason, we also publish information on the above-mentioned non-material topics within the scope of environmental sustainability.

POLLUTION

Of all the activity and processes that we carry out at IVIRMA, there are three very specific points where **pollutant** emissions can be produced: in the power generators (generator sets), in the cooling systems and in our small fleet of vehicles used for activities carried out in the field of Relationship Marketing.

In relation to the **power generators**, their use is sporadic, as we only resort to them if there is a power failure, and this happens increasingly less often; however, they are kept for safety reasons. Likewise, in the case of the **cooling systems**, it is planned that by 2021 the existing gas chillers at the Valencia facilities will be replaced by electric chillers that are more energy efficient.

To control the emissions produced by the electricity generator and the cooling system, the Maintenance Department carries out internal and external checks, and we also control the emissions of our vehicle fleet through frequent reviews.

On the other hand, and with regard to **noise pollution**, the effects of IVIRMA's activity in this area are not very significant.

In this aspect, we respect the mandatory limitations established through bylaws and we carry out the necessary corrective measures so that the sources of noise, which are mainly the air conditioning equipment in the clinics, comply with all the requirements and mitigate possible disturbances to nearby residential areas. Likewise, in the installation and operation phases of the air conditioning equipment in IVIRMA's clinics, we take into account the necessary preventive measures in relation to **noise pollution**.

Finally, it should be noted that the environmental diagnosis carried out in 2019 did not identify any of the organization's activities that could generate **light pollution**.



PREVENTION AND MANAGEMENT OF WASTE AND THE CIRCULAR ECONOMY

In the area of waste management, we have a procedure that applies to Spain and Portugal, and which in 2021 will be extended to the centers in Italy, the United Kingdom and LATAM.

The aim of this procedure is to protect the health of patients, workers and waste handlers and to minimize the risks of spreading infectious diseases or chemical contamination of the environment due to health care waste. In addition, this procedure specifies those wastes that, due to their greater potential hazard, must be treated by an authorized waste manager and must therefore be disposed of in the containers provided for this purpose.

In the case of most countries, including the U.S., this is a major challenge. In the USA and UK, we work directly with Stericycle, leaders in waste services, who treat waste in accordance with environmentally sustainable criteria and respecting current legislation with the utmost rigor.

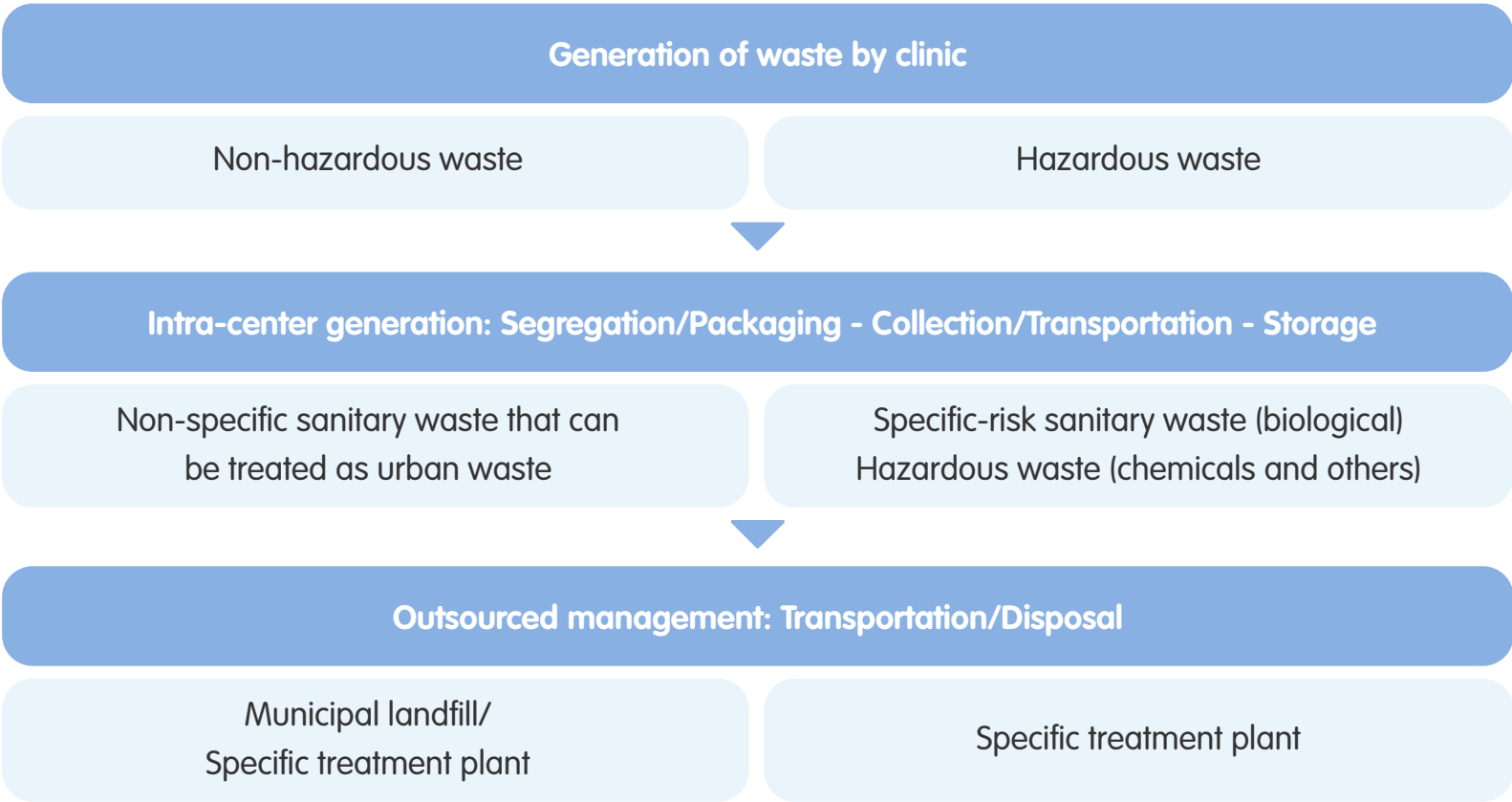
According to the **Materiality Analysis**, management of bio-sanitary waste generated by

IVIRMA’s activity is the most outstanding aspect of environmental sustainability and practically the only one considered relevant in this area by the stakeholders and by the organization itself. In this regard, within the different environmental management measures that have already been carried out, the most important actions are related to this aspect.

According to the type of waste generated in the clinics, as a result of the activity carried out there, can classify them into:

- General or solid urban waste: this is managed using the municipal containers and with the recommendation to carry out a previous separation of the same according to whether it is paper, plastics and/or general waste.
- Bio-sanitary waste akin to urban waste: a differentiated intra-center management is carried out, and it is disposed of in the general municipal container or are removed by an authorized operator depending on the regulations in force in each case.

- Specific bio-sanitary products and special waste: these have a special treatment that is managed by an authorized operator that destroys this waste in a controlled way. As mentioned above, these are the most relevant wastes generated by the company, hence the consideration given to them in the framework of the preparation of this Report.



The management of sanitary waste is fundamental for IVIRMA, as this represents the main waste products of our activity and it is a material issue for our stakeholders.

IVIRMA mainly generates hazardous waste. Specifically, the three categories of hazardous waste listed below represent 90% of the total waste accounted for by the organization. In addition, as specified above, healthcare waste management is also a material issue for our stakeholders and for the organization itself.

- **Biohazardous health care waste:** infectious waste, human anatomical waste, body fluids, blood and blood products in liquid form and in quantities greater than 100ml are some of the examples in this category.
- **Sharp and cutting waste:** such as needles, pipettes and other glassware.
- **Chemical waste:** this category includes, among others, lab-generated waste.

This waste comes from the Group's own healthcare or research activities carried out in its clinics. In this sense, the potential impacts derived from the foregoing waste include the risk of infection of people and animals and the contamination of water and/or soil.

Given the importance of healthcare waste management and considering the limitations and risks inherent to healthcare activities, at IVIRMA we take measures to prevent the generation of hazardous waste from the organization's activities (our own and those of others in the value chain), as well as to manage the significant impact of the waste generated.

These measures are:

- Formalization of contracts with authorized organizations for the management of hazardous waste.
- Search for viable management alternatives to minimize environmental impacts, such as, for example, the introduction of reusable containers.
- Ensure the correct segregation of waste at the points of generation.
- Promote people's awareness.

The management of waste generated by the activities is carried out by authorized waste managers, in accordance with the contractual or legislative obligations in each country. Likewise, at IVIRMA we have designated people in charge in the centers and in the central services, to collect and control the data on waste generated.

Waste by type of disposal method

Chemical and biosanitary waste			
Hazardous waste	Treatment	Gross weight (Tn) 2020*	Gross weight (Tn) 2019**
Lab equipment cleaning waste	Regeneration and recycling	2,39	2,65
Other chemical products	Regeneration/ Incineration	3,69	2,65
Biosanitary Type III	Steam sterilization	68,83	55,04
Others	Regeneration retrieval, recycling, landfill, incineration	5,20	2,01
Total weight of hazardous waste		80,12	75,05
Non-hazardous Biosanitary	Recycling/landfill	0,76	0,54
Total weight of biosanitary and chemical waste		80,80***	64,05

2020 includes data from all countries where IVIRMA operates.

*Data for 2019 included only for clinics in Spain and Panama.

*** The calculation of total hazardous waste reported in 2020 includes the estimate in units of mass, based on data reported in units of volume by some U.S. facilities. To do so, the calculation of the density of the bio-sanitary waste has been carried out, taking into account the data from the European clinics in 2020. As a result of this, the medium density is 150 Kg/m3.

Office waste (WSU)*			
Non-hazardous waste	Treatment	Weight (Tn) 2020	Weight (Tn) 2019
Paper	Recycling	0,52	0,20
Plastic	Recycling	0,29	0,23
Organic	Landfill	0,41	0,90
Peso total		1,22	0,90

Data from the IVI Mallorca clinic.

*Waste akin to solid urban waste

Given IVIRMA's activity, the most relevant waste is hazardous bio-sanitary waste. During 2020, the amount of bio-sanitary and chemical waste generated has increased to 81.85 tonnes. This increase is due to extending the data perimeter to all clinics in the organization. Clinics in Spain account for the largest percentage of the amount of hazardous waste generated, with 58%. This is followed by the United States, with 23% and Portugal, with 12% of the total weight of hazardous waste generated.

In any case, comparing the waste data for those clinics (Spain and Panama) for which information is available for both 2019 and 2020, a **24% reduction in waste generation** is observed (64.05 in 2019 compared to 48.88 in 2020).

With respect to solid urban waste, its classification in the IVIRMA clinics is total, thus facilitating the recycling of such waste. In the clinics in Spain this aspect has been verified through internal reviews.

In the case of hazardous waste, the fact that

it is mainly biohazardous waste makes its recycling very complicated, given that for safety reasons it must often be sterilized and/or incinerated. With regard to non-hazardous bio-sanitary waste, recycling is encouraged, although this represents a minimal percentage of the total amount generated at IVIRMA's clinics. In addition, in 2020, given the context of COVID-19, the safety protocols have been more demanding, influencing the search for alternatives in waste treatment.



Prevention, recycling and reuse measures

In IVIRMA we have introduced different best practices in our clinics to reduce paper consumption, including the patient portal and the biometric signature, which cut down on the printing of documents. Previously, physical documentation was given to patients for them to sign, so the implementation of these two actions has made it possible to reduce printing and paper consumption.

During 2020 a very important boost was given to digitalization through telemedicine, which has not only made it easier to maintain doctor-patient contact, but has also increased safety, generating, in addition, an impact on the prevention of material consumption. This reduction in consumption is due to the reduction of face-to-face visits and the promotion of the digitalization of medical records, thus avoiding the printing of documents.

The launch of the "Caps for a new life" project of the SEUR Foundation has also taken place during this year 2020. This project consists of

delivering plastic caps to a recycling plant to help children with serious health problems. From the outset, thanks to the work of the SEUR Foundation and companies such as IVIRMA, more than 130 children have had access to medical and orthopedic treatments not covered by the public health system, as a result of recycling 4,000 tonnes of caps, and avoiding the emission of 6,000 tonnes of CO₂.

Due to the organization's activity, the impact associated with food waste is not relevant.

SUSTAINABLE USE OF RESOURCES

At IVIRMA we strive to make progress in the efficient use of the materials, water and energy we use in our daily activities. We are aware that the **sustainable use of resources** has an impact on both the company and our environment, and we work every day to continue improving in this area.



Energy consumption

A reducing in energy consumption and better energy efficiency are our priorities in the energy field.

In the field of energy efficiency in IVIRMA's buildings, two projects in the Seville and Barcelona clinics are worth mentioning. In 2020, work was carried out on the new clinic in Seville, where energy efficiency elements have been incorporated, such as the inclusion of a ventilated façade, painting the roof white to prevent the absorption of radiation and the installation of solar panels to produce domestic hot water. Enthalpic (heat) recuperators have also been installed to take advantage of the energy of the air already conditioned and presence sensors to switch on the lights in some areas of the clinic. Likewise, in the case of the new clinic in Barcelona, during 2020 the building has been designed to include sustainability criteria, such as, for example, the reuse of the water that condenses in the air conditioning equipment for use in the toilet cisterns..

Fuel consumption

As regards the consumption of **non-renewable fuels** at IVIRMA throughout 2020, we have focused on the consumption of natural gas and diesel in some of our facilities, as well as the fuels of the fleet of vehicles used by the Relationship Marketing department.

As for the **diesel** consumption data at IVIRMA, this is related to the operation of the generators for the generation of electricity in case of emergency. In fact, it is not actual consumption as such, because it is often stored in the tank for months. This means that the consumption from the monthly tests is minimal.

In reference to **fuel consumption in vehicles**, during 2020 the fleet has grown to 25 vehicles, compared to 17 in 2019, as vehicles from the United Kingdom and the United States have been incorporated. These 25 vehicles correspond to the fleet of IVIRMA's Relationship Marketing department. With the extension of this range, the total kilometres driven, and with

them the energy consumption, has increased from 456,866km to 520,292km, even though the average mileage of each vehicle has decreased. An important aspect to highlight is that the entire European fleet has been converted to hybrid vehicles for the sake of environmental sustainability.

In this sense, 23,224 liters of diesel and 13,272 liters of gasoline were consumed. The latter is the one that is growing significantly because it is the fuel used in U.S. vehicles.

	Consumption of non-renewable fuels in MJ	
	2020	2019
Diesel*	359.861	342.927
Natural gas**	3.716.781	3.594.669
Vehicle gasoline***	441.006	70.308
Vehicle diesel****	857.789	1.029.436

* Fuel consumption has been obtained through invoices. For the conversion of liters of diesel to MJ, we have used the calculator of the Urban Ecology Agency of Barcelona.

** Natural gas consumption only affects the Valencia clinic, which has natural gas-powered chillers. For natural gas, 11.7 kWh/m³ has been considered following the conversion factors of the Ministry of Industry.

*** The calculation was based on the number of kilometers driven in IVIRMA vehicles by the Relationship Marketing technicians. Fuel consumption has been estimated at 7 liters of fuel per 100 km driven for diesel vehicles, 8 liters per 100 km driven for petrol vehicles and 4 liters of fuel per 100 km driven for hybrid vehicles.

For the conversion of liters of gasoline to MJ, we have used the calculator of the Urban Ecology Agency of Barcelona. No fuel from renewable sources is consumed.

Electricity consumption

In terms of **electricity consumption**, during 2020 progress was made in the collection of electricity consumption figures from IVIRMA clinics, incorporating data from clinics in all countries, as part of the company’s commitment to continue making progress in the dissemination and transparency of information.

For this reason, electricity consumption has increased compared to 2019 significantly to 46,455,462 (MJ), versus 27,461,303 (MJ) in 2019. All this despite the fact that the clinics suffered a halt in their activity and, with it, reduced their consumption. Comparing the consumption data for those clinics for which both 2019 and 2020 are available, an average decrease in consumption of 8% is observed.

	Consumption of non-renewable fuels in MJ***	
	2020*	2019**
Electricity consumption	46.455.462***	27.461.303

** Electricity consumption has been obtained through invoices. It includes all centers in Spain (except Ibiza and the IVI Foundation), Italy, Salvador de Bahía, Buenos Aires, and Santiago de Chile.

*2020 includes data from all countries where IVIRMA operates

Overall, energy consumption at IVIRMA during 2020 reached 51,830,900 MJ, a figure that has grown considerably compared to previous years, mainly due to the increasingly complete inventory of facilities and activities where energy is consumed. In particular, this increase is mainly due to the addition of data from the US clinics.

For this reason, the decrease in energy consumption that has occurred in general is not appreciable. On the other hand, if we compare only the centers for which energy consumption data are available for 2019 and 2020, we observe a decrease, both in electricity consumption, by 8%, and in fuel consumption, by around 20%, although part of the decrease is the result of the stoppage of activity due to the COVID-19 pandemic.

Total energy consumption (MJ)		
	2020	2019
Total energy consumption	51.830.900	32.498.644



Water consumption

Water inspections are regularly carried out in our clinics by the corresponding entity. In addition, we manage and control **water consumption** in all the Group’s clinics on a monthly basis, in order to detect possible deviations.

For the IVIRMA group as a whole, total water consumption in 2020 was 25,573 m3, with an increase in consumption compared to the figures for 2019 due to the inclusion of data from the United States. In fact, if we make a comparison of the data for those clinics whose consumption is known for both 2019 and 2020, the balance is positive, with a decrease of 2,355 m3 in overall consumption.

Also, if we look at the data from the individual clinics, some of them have achieved a significant decrease in their consumption. Some examples are: Almería, with a 68% reduction in water consumption, saving 572 m3; Barcelona, with a 25% reduction, saving 537 m3, and Bilbao, which has reduced water consumption by 35%, saving 494 m3. On the other hand, there were no notable increases in consumption.

Water consumption in m³		
	2020	2019
Water consumption	25.573	21.654

Water consumption data have been reported for all the countries, specifically, for clinics that have the information because they have their own contract or have a separate contract from other facilities, the invoices for which they report the information and the meters work correctly.

Materials used

As mentioned at the beginning of the chapter, as a result of the Materiality Analysis, our stakeholders and the organization itself did not prioritize the aspect of materials used as a material issue.

Likewise, given IVIRMA's commitment to transparency, it should be noted that the material we use in the organization is mainly medical and health-related, as the use of paper has been gradually eliminated through all the digitalization actions in the company. This digitalization includes all marketing actions (elimination of brochures and corporate material at physical level) and the promotion of telemedicine in the relationship with patients. The actions carried out that have led to a reduction in paper consumption can be consulted in greater detail in the section "We continue to make progress in digitization" in the chapter "Committed to patients".

Currently, there are no environmental regulations that can be applied to the materials consumed. In addition to the stationery consumables, these are mainly sanitary materials, which are subject to safety regulations and it is not easy to adopt preventive measures to reduce their consumption.



CLIMATE CHANGE

Direct (scope 1) GHG emissions

The **direct emissions of scope 1** associated with IVIRMA’s activity are related to the consumption of natural gas and diesel at some of our facilities, the use of fuel for Relationship Marketing vehicles and the refills of fluorinated gases.

As already mentioned in the section on energy consumption, new clinical data was incorporated in 2020 in line with the company’s undertaking to continue making progress in this area. For this reason, Scope 1 emissions related to natural gas and diesel from vehicles have increased. In this sense, there have been slight increases in the consumption of natural gas and diesel in clinics, and fleet data from the United States have been incorporated, which has led to an increase in the total value of kilometers traveled.

The total CO₂eq emissions in Scope 1 derived from fuel consumption in IVIRMA facilities and equipment is 379.25 Tn CO₂eq in 2020. This amount is divided into:

- Emissions associated with the consumption of natural gas: 260.17 Tn CO₂eq (202.74 Tn CO₂eq. in 2019).
- Consumption of diesel for electricity generation facilities in clinics: 26.07 TN CO₂eq (25.41 Tn CO₂eq. in 2019).
- Use of motor vehicles, mainly for commercial activity adds up to 93 Tn CO₂eq (52.81 Tn CO₂eq in 2019).

During 2020, refrigerant gas recharges have been carried out, both in clinics in Spain and in Salvador de Bahía. Overall, 51.5 kg of refrigerant gases have been recharged, the CO₂eq equivalence of which is 105.54 tonnes.

Direct (scope 1) GHG emissions		
	2020*	2019**
Natural gas and diesel fuel vehicles*	379,25	280,96 CO ₂ eq
**Fluorinated gas refills	105,54	No data

The scope of the data is the same as the data reported in the fuel consumption section.

*The Ministry for Ecological Transition’s calculation tool has been used to calculate natural gas, diesel for Relationship Marketing vehicles and fluorinated gas refueling.

The diesel consumption associated with the checks on the generators is not considered, as it is very insignificant.

In the case of fuel for Relationship Marketing vehicles, the calculation was made based on consumption in liters of fuel, applying the emission factor of 2.65 kg CO₂ eq per liter of diesel and 2.37 kg CO₂ eq per liter of gasoline.

As regards refrigerant gases, in the clinics in Spain R410-A gas is used, while in Salvador de Bahía R407-C is used and the equivalences of gas calculated according to its GWP 100 years, according to the data in Appendix I, are ARG4, of the 4th IPCC report.

*For the calculation of natural gas, diesel for Relationship Marketing vehicles and fluorinated gas refueling, the calculation tool of the Ministry for Ecological Transition has been considered. The diesel consumption associated with the checks on the generators is not considered, as it is very insignificant.

For the calculation of emissions from fuel consumption in vehicles, an emission factor of 120 g/km traveled in diesel vehicles and 90 g/km traveled in hybrid vehicles has been established. The IDAE’s vehicle database has been used as a reference. Based on the annual km travelled by each vehicle, the emissions from this activity have been calculated.

The recharge of fluorinated gases is a consumption that depends on the recharge due to maintenance or breakdown. No recharges of these gases were made during 2019. The consolidation approach for emissions is operational.

Indirect (scope 2) GHG emissions

The **indirect (scope 2) GHG emissions** are related to the clinics’ electricity consumption.

Previously, in the section on energy consumption, it was pointed out that electricity consumption has grown significantly due to the incorporation of data from new clinics, which also implies an increase in Tn CO₂eq emissions in this scope.

The calculation of emissions in Scope 2 amounts to 4,000.33 tonnes of CO₂eq, compared to 2,364.7 tonnes of CO₂eq emitted in 2019.

Direct (scope 2) GHG emissions		
	2020	2019
Indirect GHG emissions	4.000,33 ton CO ₂ eq	2.364,7t ton CO ₂ eq

The figure offered by the CNMC of “310 g CO₂ eq/kWh” has been taken as the general emission factor for the electricity generation system in Spain during 2019 (last value verified by the CNMC at the date of drafting this report). This factor has also been applied to the 2019 consumption data to facilitate comparison with the 2020 electricity consumption data.

With this data, the kWh to MJ conversion factor has been applied, which is 3.6, resulting in 86.11 g CO₂ eq/MJ, which has been used as the emission factor for electricity consumption.

Source: CNMC Electricity Guarantees and Labelling Reports. https://gdo.cnmc.es/CNE/resumenGdo.do?informe=-garantias_etiquetado_electricidad

Other indirect (scope 3) GHG emissions

In relation to Scope 3, we consider the emissions derived from rail and air transport that we carry out for work purposes at IVIRMA. In addition, emissions from accommodation and the use of rental vehicles associated with business travel are included.

One element to highlight is that the travel agency with which IVIRMA manages the trips, has a project to offset greenhouse gas emissions with CO₂revolution. Within this project we compensate the emissions generated by our travel and accommodation.

The pandemic context has significantly reduced the number of trips, resulting in a significant reduction in greenhouse gas emissions in this Scope 3.

During 2020 we made 2,056 journeys by train and/or plane, just 30% of the nearly 6,400 journeys made during 2019. Of these, 46% of journeys were by train, with the aim of reducing our CO₂emissions, a similar percentage to 2019. These train journeys account for 45% of the total number of journeys made and 12.7% of the kilometers traveled, but only 1.9% of the greenhouse gas emissions emitted on these journeys.



	Other indirect (scope 3) GHG emissions	
	2020	2019
Air Transport*	290,25 Tn CO ₂ eq	572,91 Tn CO ₂ eq
Rail Transport**	5,64 Tn CO ₂ eq	19,3 Tn CO ₂ eq
Use of rental car ***	1,86 Tn CO ₂ eq	S/D
Accommodation ****	14,17 Tn CO ₂ eq	S/D
Total	311,92 ton CO ₂ eq	592,21 Tn CO ₂ eq

These data have been provided by the travel agency with which IVIRMA collaborates.

*The calculation standards come from the Practical Guide for the calculation of greenhouse gas (GHG) emissions published by the Ministry of Environment and Natural Resources and the World Resources Institute. It is also based on the calculation methodology of ICAO - International Civil Aviation Organization.

The calculation of CO₂ in flights is calculated based on the number of flight miles.

The formula used was: = SI (C2 < 1865;C2 * 1.609344 * 0.15;C2 * 1.609344 * 0.11) where C2 is the distance in miles of the segment 1.609344 the Kg of CO₂ per mile and 0.15 or 0.11 is the adjustment factor.

*The Greenhouse Gas Protocol has been used. Corporate Accounting and Reporting Standard developed by three associations: World Business Council for Sustainable Report, World Resources Institute and the Ministry of Environment and Natural Resources (SEMARNAT).

*The main Spanish Rent a Car companies have been asked for their data on kilometers traveled and CO₂ emissions for each vehicle class (ACRIS Code).

*The category and geographical location of the hotel and the length of the stay have been taken into account. Source: Hotel Food Print.

BIODIVERSITY PROTECTION

There is no significant impact on biodiversity, as our clinics are located in urban settings.





08 COMMITTED TO
HUMAN RIGHTS



Our commitment to human rights focuses on respect for **freedom of association and collective bargaining**, the **rights of minorities** (ethnic, religious, linguistic, gender and sexual, among others), as well as the rejection of **child labor** and forced or compulsory labor.

Furthermore, at IVIRMA we respect the **right of the human being** who is the subject of research, and his or her personal interest must prevail over the interests of science, society and the company.

During 2020, no operations or suppliers have been identified with significant risk of cases of forced, compulsory or child labor, and no cases of discrimination have been detected, nor have any complaints been received regarding human rights violations. In this regard, we continue to manage internally the aspects related to human rights so that they are always present in the organization, strengthening the

communication of these and identifying the risks in this area.

In order to transmit this commitment to human rights to the IVIRMA staff, we have a **Code of Ethics and Conduct**, which specifies publicly that all IVIRMA professionals must respect the human rights and public freedoms recognized in the Universal Declaration of Human Rights, thus transferring our commitment to the entire company.

We have also identified risks in order to respond to this commitment at the operational level. Identification is carried out within the framework of the Compliance System and we have a Compliance Committee as a supervisory and control body which, in the event that any situation of non-compliance with human rights is identified, may take the necessary corrective actions.

In IVIRMA we continue to manage the human rights aspects of our work so that they are ever present in our activity.



Procedure for handling workplace, sexual or gender-based harassment

Resolving and correcting any possible situation or attitude that disturbs the comfort and well-being of IVIRMA's professionals is one of the organization's concerns and commitments.

For this reason, we have a **Procedure for handling situations of harassment at work, sexual and gender-based harassment and any other situations that involve an attack on the dignity or privacy of workers.**

This protocol includes different aspects:

- It sets out the criteria for action and the principles on which the procedure to be followed in the event of a complaint of harassment must be acted upon and made public.
- It sets out the definitions of harassment, sexual harassment and gender-based harassment based on the existing legislative framework.
- The procedure includes those situations of discrimination due to pregnancy, maternity or paternity.

- It specifies the scope in which situations should occur in order to be protected by the procedure, stating that they must occur among company personnel and including those persons who habitually perform professional services for IVIRMA.
- A three-stage **procedure** is established: initiation, investigation and resolution.

We want to involve the entire company in the commitment to equality. For this reason, we will work on an equality plan for the entire IVIRMA group.

During 2020, in IVIRMA we have continued to make progress in the development of different Equality Plans for our clinics, within the framework of which the revision and updating of this Protocol will be carried out. In this regard, progress has been made on different aspects, such as, for example, placing special focus on measures to promote equal treatment and opportunities between men and women, negotiating equality plans with 3 centers and creating the group's Equality Policy. In the USA, we have also performed specific training on sexual harassment which is compulsory for all our professionals and which will be extended to the other centers as the actions of the equality plans are implemented.

In addition, we have renewed our commitment to equality and during 2021 we will work on an equality plan for the entire group so that the measures implemented, including this protocol, will apply to the entire company.



A pregnant woman is sitting on a wooden bench, holding two ultrasound images. A tabby cat is lying on the floor next to her. The scene is set in a bright, modern interior with large windows in the background.

09 COMMITTED TO ETHICAL MANAGEMENT



The ethical behavior of IVIRMA’s employees, suppliers and subcontractors is fundamental to maintaining our reputation.

The behavior of employees, suppliers and subcontractors is of great importance for the good reputation of the organization and at IVIRMA we are aware of this. For this reason, we strive to ensure that all such individuals conduct their activities in accordance with the organization’s policies as set out in applicable laws and regulations, codes of conduct and internal policies.

It is also very important for us that all these personnel help to detect those irregular and unlawful conduct that could put the group at risk in order to avoid losing our current leadership situation, which we have obtained through years of hard work.

To strengthen IVIRMA’s ethical values, during 2021 we will work on the development of a Code of Ethics applicable to the entire organization.

The Group’s commitment to ethics and compliance with the law is a fundamental part of our culture. Observance of the law and compliance with our **Code of Ethics and Conduct**, as well as our management of situations that

could compromise our values, are part of our commitment to integrity and professional excellence.



TRANSPARENCY AND GOOD GOVERNANCE

Criminal Risk Compliance and Prevention Model

The Board of IVIRMA approved the **Compliance and Criminal Risk Prevention Plan**, which is in addition to the General Policies that combat corruption, bribery and money laundering, inter alia. In addition, we have a Whistle-blower Channel through which any infringement of the General Policies and other internal rules can be brought to the attention of the Ethics Committee.

Within this framework, the organization has introduced a series of general and specific preventive controls with the aim of preventing **criminal risks** relating to these and other aspects. Likewise, we have also established some **general principles of action** to be followed by all the staff of the group.

Moreover, in Spain, Law 10/2010, of 28 April, on the prevention of money laundering and terrorist financing, introduces mandatory measures for all companies, and IVIRMA complies with all of these. During the period covered by this report, there has been no breach or identification of any case of corruption.

Code of Ethics and Conduct

IVIRMA's **Code of Ethics and Conduct** is conceived as a set of rules that define the corporate culture, values and principles of the group. These reinforce the company's conduct guidelines, in which it is necessary to enable a set of rules and principles governing the **professional conduct of those who form part of IVIRMA**.

We take as a starting point the Mission, Vision, Principles, Values and Corporate Policies, for the formulation of the ethical postulates that should guide the behavior of the people belonging to the company.

When designing the essential aspects on which the Group's compliance culture is based, we have taken into account our history, the people whose commitment and efforts have brought us this far, which is based on essential aspects that we have come to call pillars. These pillars are as follows:

1. **Patient satisfaction.** At IVIRMA the most important element is the degree of satisfaction of our patients. The continuous work of our scientists and the incorporation of the latest techniques allow us to improve gestation rates every year.
2. **Social responsibility.** We make decisions in accordance with the ethical principles that govern respect for the human being, the environment and medical science.
3. **Corporate ethics.** Based on corporate governance in which ethical and transparent management is carried out.
4. **Commitment to science.** At IVIRMA we ensure the suitability of the practices and procedures used in the development of scientific activity in the field of Assisted Reproduction Techniques, checking the adequacy of the methods used. We take into account the importance of an ethical framework in the use of gametes and embryos in clinical practice, training and research.
5. **Teamwork and professional development.** Through our team we are committed to a continuous process of improvement of quality standards in the provision of health services.
6. **Capital.** Somos un instrumento al servicio de la creación de riqueza, compatibilizando este fin con un desarrollo social sostenible y respetuoso con el medio ambiente, la sociedad, y procurando que toda nuestra actividad se desarrolle de manera ética y responsable. Por ello, nuestro equipo humano debe hacer un uso responsable de los recursos de IVI, velar por la integridad de marca y cuidar y proteger las instalaciones.

In Spain, LATAM and RER, in order to make the Code of Ethics and Conduct available to all professionals, this document is accessible on the new employee platform **We are IVIRMA**. In addition, we are working on updating the Code of Ethics at a global level, in line with our commitments and our undertaking to continuous improvement.

Conflict of Interest Management Policy

The Conflict of Interest Management Policy was implemented and consolidated during 2019. During 2020, any new employee joining the staff has signed the corresponding document, by means of which they informed the organization of any possible conflict of interest they may have with respect to the group's activity.

This document is also available to any employee in the event that the circumstances surrounding them change and they need to disclose any new potential conflict of interest.

The Compliance Channel

At IVIRMA we have a **compliance** channel so that all the group's employees, patients, suppliers and subcontractors have a confidential mechanism to detect any irregularity or unlawful behavior that could jeopardize our organization. This efficient channel operates within national territory and applies to the Spanish companies that form the group.

We have an effective compliance channel that allows us to detect any irregularity or unlawful behavior in the organization on a confidential basis

In this context, we have a Compliance Committee, comprising global Directors from different areas of IVIRMA Global (HR, IT, Finance, Legal and Medical Affairs), as a supervisory body responsible for controlling and overseeing the operation, effectiveness and compliance with the company's Criminal Risk Prevention Model.

The **Compliance Committee** also has the following duties in relation to the Code of Ethics and Conduct:

- To promote a culture based on the responsible behavior of all IVIRMA Global professionals.
- To promote the principle of absolute rejection of the perpetration of illegal acts or situations contrary to the principles of ethics.
- To ensure that the system of values adopted in the Group's internal regulations is kept up to date, proposing any updates that may be necessary.
- To promote the preparation and implementation of appropriate training and awareness programs of a business-ethical nature.
- To supervise the functioning of the communication channels.
- To guarantee the fundamental principles of confidentiality and non-retaliation that govern IVIRMA Global's whistleblowing channels.
- To advise on the resolution of doubts arising in the application of the Code.
- To analyze and intervene in cases of complaints received through the channels established for this purpose.
- To verify application of the disciplinary procedure in the event of breaches of the principles and commitments set out in the Code.
- All other functions resulting from regulatory compliance.

Through the procedure established in the IVIRMA Global Compliance Channel Regulations, any person must report and denounce possible risks or breaches of the Code of Ethics and Conduct and any other IVIRMA internal regulations or protocol. In this regard, any known or suspected actions that may be considered unlawful or criminal must also be disclosed.

A form is available on the WE ARE IVIRMA platform through which you can make a complaint. The **Compliance Channel Use Policy** is also available on the same platform. At IVIRMA we also provide an e-mail address for employees who have queries about the code of ethics and

also for customers, suppliers, subcontractors or employees who do not have access to the form to formalize their complaints.

The **confidentiality of the complainant** is guaranteed by IVIRMA. In addition, all persons who have knowledge of the complaints made through the grievance channel are required to maintain professional secrecy about the complainant's identity.

Once the complaint has been made, the **Compliance Committee** carries out the appropriate investigations to verify the veracity and reality of the facts reported and to define the proposal for penalties if necessary.

Disclosure of anti-corruption policies and procedures

In relation to anti-corruption training, the members of the governing body (Board of Directors) undertook such training during 2018. Likewise, they were also made aware of the **anti-corruption policies and procedures** established by IVIRMA. In this regard, during 2018 the clinics were also made aware of these policies and procedures. During 2020, no communication has been made in this regard at the internal communication level.

In this regard, the Code of Ethics and Conduct, available to employees on the new corporate platform, proactively communicates this commitment in the section on *Corruption and Bribery*.

CONTRIBUTIONS TO FOUNDATIONS AND NON-PROFIT-MAKING ENTERPRISES

During 2020, IVIRMA has collaborated with different types of **social projects** (health, childhood and diversity) to which a total of 53,466 euros has been donated.

The following table displays the contributions broken down by initiative or project:

	Contributions		Contributions
Plan Familia	24.776,74 €	Bicos de papel	1.000,00 €
AVAPACE	1.000,00 €	Yo soy tú	1.000,00 €
Fundación Ochotumbao	1.000,00 €	Cáritas Sevilla	1.000,00 €
AEFAT	1.000,00 €	Huerfanato de Teresa Calcuta	1.000,00 €
Banco de alimentos	1.000,00 €	Sácale la Lengua a la Ela	1.000,00 €
Fundación gooles	1.000,00 €	Hospital Sant Joan de Dèu	1.000,00 €
Perritos del Higuerón	1.000,00 €	Educo	2.000,00 €
Asociación Animalista Lluc Major	1.000,00 €	Hogares Compartidos	1.000,00 €
Aspanion	1.000,00 €	Make a Wish	4.690,00 €
Muévete por los que no pueden	1.000,00 €	Médicos sin Fronteras	1.000,00 €
Asociación Española contra el Cáncer (AECC)	1.000,00 €	Hispalibros	1.000,00 €
Payasos del Hospital	1.000,00 €	Asociación Quattro Zampe del Quore	1.000,00 €
Asociación María Salus Inforum	1.000,00 €	Total	53.466,74 €

10 COMMITTED
TO SOCIETY





SOCIAL CONTRIBUTION

IVIRMA's clinics are located all over the world. This allows us to be within reach of anyone and to be able to contribute our knowledge and experience in helping them to fulfil their dream of having a child.

We adapt to the characteristics and needs of the places where we operate, to help reduce inequalities.

We are therefore sensitive to the characteristics and social needs of those places where we operate, respecting the local communities with the aim of helping to create a fairer and more equal society in terms of rights and opportunities.

The impact on the socio-economic level of the implementation of an IVIRMA center can be seen in its contribution to increasing the birth rate in the area. Moreover, no operations with negative impacts have been detected in the local communities in which IVIRMA is present.

The IVI Foundation

With more than 20 years having passed since its creation, **IVI Foundation** is designed as a **research center in Reproductive Medicine** to find the therapeutic and/or diagnostic techniques for the benefit of our patients, generating a global awareness within society that helps to make information available to everyone.

The three pillars of the Foundation are:

- **Research** (Innovation area)
- **Knowledge** (Global Education area)
- **Social Action** (Sustainability area)



Research, one of the pillars of IVIRMA

In 2020, for the fourth year in a row, scientific production has once again beaten the historical record of the previous year.

- We have published **204 scientific articles** in prestigious peer-reviewed journals.
- **We sent 159 communications** to the most relevant conferences in our specialty (ESHRE, ASRM and SRI), of which **133 were accepted**.
- **41 talks and 92 poster communications have been presented**.
- The value of external grants obtained by our researchers for projects is once again almost **3 million euros**.
- **106 new projects have been started** in the different areas that affect assisted human reproduction, making a total of 376 active projects developed simultaneously during 2020 throughout the company.
- Several of our researchers and projects have been awarded **mentions and awards** for our scientific activity.
- The usage records of our **Innovation website** have beaten all previous records, and is one of the most consulted in the area, due to the interest of its content.

IVI Innovation is the union of the most pioneering trends of Europe and the USA, to gather and encourage the most experienced and talented researchers, share knowledge, improve techniques, mark the present and shape the future of one of the most cutting-edge fields of medicine: assisted reproduction. In fact, we are the most published private group in the world and we have many of the most prestigious researchers in the world.

The result of this scientific innovation, technological development, research and experience allows us to generate the knowledge to **contribute to the advancement** and continuous improvement of the treatments we offer and, as a result, provide **excellence in the care of our patients**.

The research we conduct at IVIRMA allows us to contribute to the advancement of assisted reproduction and to offer excellence in the care of our patients.

In this regard, Basking Ridge, Madrid and Valencia are the designated centers for clinical research. Similarly, Basking Ridge, Madrid, Oxford and the IVI Foundation are responsible for basic research and, finally, there is a support unit for research management (UAGI).

Education at IVIRMA

IVI Global Education is the educational institution of IVIRMA Global, which has a wide range of master's degrees and specialized courses, with the aim of training and updating all professionals interested in the world of assisted reproduction and reproductive medicine.

Our educational system is characterized by the **excellence of the training programs** on offer, constantly updated and based on cutting-edge technology. We want to continue offering classroom training and enhance our **online and on-demand training** offerings. Our purpose is to give a holistic view of reproduction, offering training that helps all persons involved in the sector to improve their knowledge and skills.

Our goal is to be leaders in the field of Human Reproduction Education, achieving excellence in offering educational programs in collaboration with our professionals. This is achieved by constantly improving the quality of practice and boosting global educational activity in reproductive medicine.

In addition to online training, we also have **training programs in partnership with prestigious universities**, such as the University of Valencia, the European University of Madrid, or the King Juan Carlos University and we offer **ad hoc training** according to the specific needs of each of our patients. At IVI Global Education we also coordinate the rotation of specialists in gynecology and obstetrics in our clinics, the organization of professional internships for students on our master's degrees and, in addition, each year we train a fellow in the sub-specialty of reproductive medicine.

IVI Global Education's goal is to continue to grow and become an international benchmark as an **educational institution** specializing in the field of Assisted Reproduction, through our innovative, research and teaching spirit.

The excellence of our training programmes enables professionals to improve their knowledge and skills



Online courses
60+ offered during 2020
700+ students

Masters' Degrees

- Official Master's Degree in Biotechnology
- Two online masters' degrees in Spanish and English
- 129 students in total

More than 70 nationalities in our training programs
50+ teachers: IVIRMA specialists

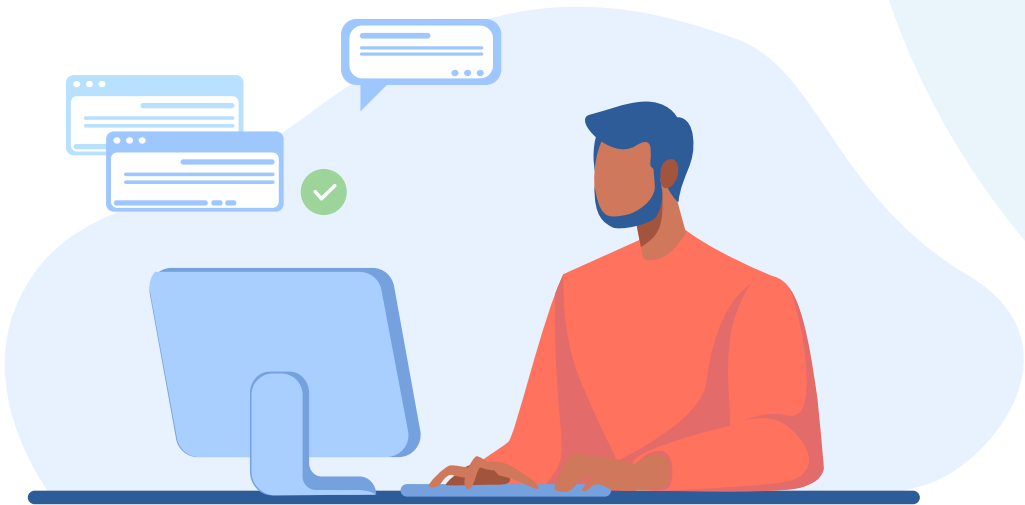
Commitment to digitization

The demand for digital learning has increased due to the impact of COVID-19, radically changing the trends of education systems around the world to adapt to this digital format.

The speed at which schools, universities and training centers have been closing and the rapid move to distance learning has created an ideal context for transformational opportunities in online education through training platforms, management software, connectivity and the creation of digital course portfolios to succeed in the new reality.

In this regard, at IVI Global Education we have a solid technical infrastructure with a department dedicated to academic innovation and the promotion of its digital strategy, offering, together with traditional training, a **solid educational ecosystem**.

At IVI Global Education we offer an extensive catalog of digital content and a faculty of teachers and authors with proven and lengthy experience in distance learning. We also maintain a strong educational tradition and are already recognized in the industry. Our graduates are our best asset, as most of them work in relevant positions in the sector.



#EnCasaConIVI (#AtHomeWithIVI)

Due to COVID-19 and the need to stay at home, we at Global Education wanted to do our bit so that this time of lockdown could be used to continue learning and updating ourselves in Reproductive Medicine, so we created **#EnCasaConIVI**, a program of webinars on the latest topics in this field presented by our specialists.

From this initiative emerged **Web Webinars**, a website where we uploaded all the talks that took place during this time to give access to the content that was offered, and that could be viewed again in several languages: Spanish, English, French and Italian.

To date, more than 3,500 users have accessed the site.

The figures with which we close this series of webinars are as follows:

34 webinars	3 languages (Spanish, English and French)	3.861 attendees <ul style="list-style-type: none">• 2.250 national• 1.550 international
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Streaming training

Due to the health crisis, the company's recommendation was to postpone the planned face-to-face training in the clinics. At IVI Global Education, where we have been working for years on technology for education in Reproductive Medicine, we wanted to show our commitment and collaboration to help all teaching coordinators to transform face-to-face courses into new formats such as online courses, webinars or streaming courses.

Several clinics such as IVI Vigo, IVI Pamplona, IVI Valencia, IVI Bilbao, IVI Alicante and IVI Malaga have already adapted some of their courses to these new remote formats and they have been a success in terms of participation.

Free fertility preservation program for cancer patients

IVIRMA's fertility preservation program has enabled 42 babies to be born since it was launched and there are 9 pregnancies in progress.

The most common techniques used in these cases are detailed below:

- On the one hand, the **vitrification of oocytes** consists of the cryopreservation of mature oocytes obtained following ovarian stimulation, in order to use them once the disease has been overcome with the same quality with which they were saved.
- On the other hand, we **freeze the ovarian cortex** so it can be transplanted following cancer, which would even allow spontaneous pregnancies to be achieved when the patient recovers her ovarian function.

IVIRMA offers **cancer patients the possibility of vitrifying**, free of charge, ovarian cortex or sperm so that, once their disease has been overcome, they can become parents if they so wish.

As a socially responsible company, free access to fertility preservation for cancer patients is a priority for IVIRMA, applying efficient medical protocols based on speed of action so as not to delay the medical treatment of their disease, in constant coordination with the oncology team.

Free access to fertility preservation for cancer patients is a priority for IVIRMA

About **1,400 women have preserved their fertility** before undergoing their chemo or radiotherapy treatment, most of them diagnosed with breast cancer, the most common tumor among the female population that enquires about vitrification of their oocytes.

During 2020, **102 women diagnosed with cancer have vitrified their eggs**.

IVIRMA's social action in 2020

At IVIRMA we have approached the social reality that COVID-19 has brought us, by actively listening to our stakeholders.

In 2020, our Social Action has been marked by active listening to our stakeholders. Social needs have become more acute and we wanted to get closer to the social realities of our professionals and to support local projects.

Provision of respirators and protective equipment

From the different IVIRMA clinics we wanted to do our bit in the fight against COVID-19 by providing respirators and protective equipment.

Among the hospitals that have benefited from our equipment are: Viamed Montecanal Hospital in Zaragoza, Germans Trias y Pujol Hospital in Barcelona, General University Hospital in Alicante, Peset Hospital in Valencia, Canary Health Service, Miramar Polyclinic in Mallorca, Virgen Macarena Hospital in Seville, Galician Health Service (Pontevedra), Reina Sofia Hos-

pital in Murcia, Virgen del Mar Hospital and Infanta Elena University Hospital in Madrid, Móstoles Hospital, Antequera Hospital and Costa del Sol Hospital in Marbella.

Collaboration with Médecins du Monde

Health is our priority, so this year we have joined in the fight against COVID-19 through the social projects of Médecins du Monde around the world.

With this collaboration we have helped to send personal protective equipment, support the organization of COVID-19 treatment centers and the establishment of infection control and prevention protocols in Médecins Sans Frontières projects around the world.

Family plan (Plan Familia) of the Adecco Foundation

Family Plan is a program that has been going for **17 years**, exclusive to the Adecco Foundation. Its main objective is to achieve maximum autonomy and social and occupational inclusion of people with disabilities. IVIRMA has been working with the Adecco Foundation for

more than 5 years, designing personalized intervention plans to meet the needs of family members of employees with some kind of disability.

In 2020, 10 beneficiaries were supported, working on their autonomy, training and employability to promote their integration into the labor market and society.

In addition, the beneficiaries participate in the "Family Plan School", where workshops are offered to encourage dialogue and learning and where parents, siblings, grandparents and the beneficiary take part. The plan addresses the various concerns, shortcomings, therapies and providing tools and mechanisms to each family member so that the intervention plan -including employment guidance- with the beneficiary is more effective.

We listen to you

Every year we launch Teaming, which deducts one euro from each employee's monthly salary (an amount that is doubled by the IVI Foundation), for social projects chosen by the

professionals and giving you, a call for social aid for NGOs.

On this occasion, we have worked together with the HR department and we have merged both initiatives, creating "We listen to you", an online survey addressed to our professionals with 4 questions. Two of these questions have focused on the personal and professional level on how they have experienced the pandemic and if there has been any specific aspect where we could help them. The other two questions were related to social aspects: employees were asked to specify the social issue that most concerned them and they were invited to present a social project to be supported by the IVI Foundation.

Among all the responses, 20 colleagues have sent proposals for social projects that mean a lot to them and that they would like us to support. We have decided to support them all without exception.

The 20 associations are:

- Aspace (Assisting those with Cerebral Palsy throughout Spain).
- Ochotumbao Foundation (Support for a 4-year-old girl with a genetic disease).
- AEFAT (Association of relatives and people related to patients with ataxia telangiectasia).
- Gooles Foundation (Organization for girls and women in a situation of social vulnerability).
- Perritos del Higuerón (Shelter for abandoned animals in Benalmádena).
- Asociación Animalista Lluc Major (Shelter for abandoned animals in Mallorca).
- Aspanion (Association of cancer-affected children of the Valencian Community).
- Muévete por los que no pueden (Dissemination and awareness of rare diseases).
- AECC (Spanish Association Against Cancer).
- Maria Salus Infirmorum Association (Development Cooperation - education, health - in Africa).
- Bicos de Papel (Association to help cancer-affected children in Vigo).
- Yo soy tú (Soup kitchen in Malaga).
- Cáritas Sevilla (Support for homeless people).
- Teresa of Calcutta Orphanage (Cooperation project in Ethiopia).
- Stick Out Your Tongue for ALS (ALS Visibility and Sport).
- Hospital Sant Joan de Déu (Support for COVID research).
- Hogares compartidos (Association that helps elderly people with limited resources).
- QUATTRO ZAMPE Nel cuore Association (Animal protection in Italy).
- Payasos del Hospital (clowns that visit hospitalized children).

Additionally, 55% of our employees mentioned child poverty as the social issue that most concerns them. For this reason, we collaborate with the NGO Educo, providing lunches for the second and third trimester of the school year to 7 children at risk of poverty and social exclusion. This aid represents a total of 667 meals spread over January to June 2021.

Make a Wish

As every year at Christmas time, we have collaborated with the NGO Make a Wish to help fulfill the dream of a girl with a serious illness through the digital platform “Universe of stars”, where employees leave a message in the cloud for the beneficiary and for each message IVIRMA donates €1.3 to help her with her treatment and her hopes.

On this occasion, we have launched the universe of stars of Nadia, a brave 14-year-old oncology patient, whose treatment we help support. In addition, we will help her through our sponsorship to fulfill her dream of immersing herself in Asian culture, which she is so passionate about.

In the US, local CSR actions during 2020 have been:

Campaign with the “Human Rights Foundation”

Movement fighting for the rights of the LGTBIQ+ community, which defends the equality and diversity of this group in the USA and all over the world.

Bonei Olam

A \$10,000 grant has been given to Bonei Olam, an organization that provides financial assistance to couples in the Orthodox Jewish community who wish to undergo Assisted Reproductive Technologies.

Building Families Feeding Families (NJ)

Employees at our U.S. clinics have donated more than 200 bags of non-perishable food items for low-income families.

SUBCONTRACTING AND SUPPLIERS

The criteria of **quality of service**, compliance with **delivery conditions**, **ethical attitude** of the supplier and **administrative management** form the crux of the decision process when choosing a supplier. Accordingly, we focus all our efforts on looking for the most suitable suppliers, always from a standpoint of transparency and mutual respect.

Our goal is always the same, to continue offering the best techniques and treatments to our patients. In this sense, we work with suppliers that meet the **highest standards of service quality**, as quality is a fundamental element at IVIRMA. We also analyze the potential impact of the product or service on the **safety of our patients**, to avoid any possible risk in this area.

Most of our suppliers belong to the healthcare and cryobiology sector, but we also have service providers for the different functions of the company (Marketing, Finance, Legal, IT and CSR suppliers).

We are committed to local suppliers, practically 98% of contracted companies have a trade name in the country of origin

In addition to assessing the attitude of the supplier company, at IVIRMA **we give priority to local procurement**. The contracting of the supplier company is based on the availability of materials. For this reason, we do not have a local procurement policy, but whenever possible local suppliers are contracted.

98% of the supplier companies with which IVIRMA works are local to all the clinics (understanding “local” as the companies with a trade name in the country of origin of the clinics).

	N° of suppliers
	2020
Spain	1.763
USA	865
Rest of Europe	757
LATAM	640
Total	4.025

The supply companies allow us to offer the best techniques and treatments to our patients, for this reason, it is essential to select the correct ones.

During 2020 we have activated the **Purchasing Committee** in our Head Offices and Clinics. In this regard, the **Purchasing Policy** has been updated. This policy defines the standards and rules related to purchasing management, to optimize the purchase of products and services in its three areas of price, quality and service, guaranteeing adequate coordination between the departments involved in the processes.

	Supplier invoicing	
	2020	2019
Spain	54.316.709,66 €	63.609.522,77 €
USA	29.073.456,76 €	39.871.580,09 €
Rest of Europe	9.130.780,51 €	13.958.491,11 €
LATAM	5.482.409,60 €	11.402.488,18 €
Total	98.003.356,53 €	103.472.165,87 €

Although there is currently no social impact policy with supplier companies, there is fluidity with them through the Purchasing Department and no supplier has been detected with a significant negative social impact. Nor have any incidents been recorded through the appropriate channels that have led to the cancellation of orders or contracts with suppliers of the group due to negative social impacts.

Supplier assessment

Based on the implemented Quality System, we have a specific supplier evaluation procedure, to which those suppliers who provide us with products or services that affect the quality of our services are subject to.

The initial assessment is carried out according to the type of product or service, based on the results and criteria defined in the product/service risk assessment table which includes 14 different types of suppliers. The Procurement Department (or Procurement Manager of the clinic), General Medical Management, or the competent personnel of the center requesting supplier registration perform this initial assessment. The product/service risk assessment table includes 14 types of different suppliers and can be found in *chapter 3. Committed to risk management and safety of this report*.

Those suppliers classified as high or moderate risk should be evaluated in depth, as their performance directly affects the quality of service and patient safety. Those suppliers that are finally accepted become part of the IVIRMA suppliers system.

The Purchasing Policy was approved by the CEO of the company and communicated to all IVIRMA professionals. In addition, it specifies that all services must comply with prevailing regulations regarding certifications and must be aligned with the Conflict of Interest Policy, in order to avoid any illicit behavior in this regard.

At IVIRMA we have several tools to monitor the proper behavior of our suppliers. These include **quality policies** and the **monitoring of suppliers** with their relevant assessment. In fact, their risks are managed through the quality processes implemented and the regular audits conducted.



This assessment is carried out annually in certified clinics, assessing those suppliers with whom we have worked in the last year.

Within this supplier assessment procedure, the impact of the supplier company on compliance with labor relations is taken into account, although social, environmental and gender equality criteria are not generally included in purchasing decisions and supplier selection.

At IVIRMA we also have a Purchasing Committee that allows us to study the offers presented by suppliers so that the purchasing procedure is as fair as possible and gives all companies the opportunity to form part of IVIRMA. This table is made up of the management of the financial, corporate and purchasing areas.

In addition, the purchasing policy also states that any supplier, whose products or services affect the quality of the service, must be subject to an initial assessment. In addition, the Mallorca clinic follows the guidelines of the Environmental Management System ISO 14001, managing suppliers according to environmental criteria. With the aim of committing to adopt best practices and actions that are environmentally

friendly and respect the environmental policy, all suppliers of the Mallorca clinic have to act in accordance with the following criteria:

At IVIRMA we have a supplier assessment procedure that enables us to guarantee the quality of service and patient safety.

- **Be in possession of the authorization or administrative approval applicable to the activity carried out and in accordance with the regulatory provisions.**
- **Have qualified personnel to carry out the required tasks and which, if applicable, are established under the mandatory legal provisions.**
- **In accordance with established legislation, take charge of and appropriately manage all the environmental aspects they generate during the performance of their activities, as well as the associated impacts, furnishing the corresponding supporting documentation.**
- **The necessary preventive measures must be taken to reduce environmental risks. Any environmental incident or accident that occurs at the facilities must be reported to IVIRMA.**
- **Provide copies of any certificates and/or official approvals in environmental and quality matters.**
- **If their activity generates hazardous substances, provide the corresponding safety sheets.**

The clinic may also conduct audits and/or inspections of suppliers to verify compliance with these agreements.

TAX INFORMATION

In the area of taxation, **Corporate Tax and VAT** are the two taxes that have the greatest impact on the organization. At IVIRMA we are structured with Companies in the different cities where we provide services. In this regard, we pay the corresponding taxes in each jurisdiction.

We prioritize tax consolidation, whenever possible, of the existing companies in each country. Corporate Income Tax is under a consolidation umbrella in which it is the Holding Company that finally presents consolidated trading figures to the Spanish Tax Authorities (AEAT) and, therefore, has the balance with the Tax Authorities, both when it is a creditor and a debtor.

On the other hand, the companies of the group to which the general rules of the AEAT are applicable (i.e. which are not subject to a specific regional -foral- regime) can voluntarily join the Aggregate VAT Law group to which the IVIRMA group belongs, thus benefiting from

specific specifications based on the group reconciliation of the monthly results by calculating a single amount presented by the Holding company.

In relation to the VAT of the clinics, as they carry out a healthcare activity that is VAT EXEMPT, they have non-deductible input VAT, which means a higher expense for the company. The VAT pro-rata law is applicable, which allows a percentage of the input tax to be deducted, determined according to the use of the goods and services acquired and to the extent that they are used in the performance of activities that entitle the taxpayer to deduct them.

This takes the form of a pro-rata percentage that the clinic will be able to deduct from the total non-deductible VAT for that year. This percentage is recalculated annually based on the volume of these specific operations.

IVIRMA's staff includes a high number of researchers due to the R&D trend in our sector

and to ensure we remain at the forefront of treatments. In this way, in Spain the group benefits from certain TA (tax allowances) in the field of R&D.

The part where the greatest profit is obtained is thanks to the TA for R&D and IT in Spain and the United States, given that even if they exist in some other country, they either do not apply to the organization or are immaterial.

In terms of measurement, we use benchmarking among all our companies and the results obtained in previous years. From the Research Support Unit, we manage and bring together all the group's projects, whether or not they involve tax allowances or grants. The aim of this management is to standardize or at least regulate research within the group so that we all meet the same requirements.

The company does not take risks with the tax allowances and obtains reports issued by the Ministry of Economy and Competitiveness and

which are binding for the Spanish Treasury. This is the reason why the deductions are estimated and deferred for one year, so in 2020 we take the tax allowances generated in 2019.

The following tables show the profits obtained country by country and the taxes on the profits paid country by country.

	Profits obtained country by country (€)			Corporation tax paid country by country (€)	
	2020	2019		2020	2019
Spain	55.031.633	25.629.028	Spain	2.748.425	4.932.770
USA	-642.089	-10.204.865	USA	-1.810.993	2.785.436
LATAM			LATAM		
Argentina	-61.641	268.004	Argentina	120.492	41.887
Panamá	-1,129.374	-577.888	Panamá	-516	239.365
Brasil	-38.832	389.923	Brasil	-130.479	775
Chile	1.065.671	1.163.405	Chile	-390.283	229.807
Rest of Europe			Rest of Europe		
Italia	-4.261.536	-1.954.819	Italia	-472.709	-465.788
Portugal	1.575.040	1.503.597	Portugal	-27	104
UK	-2.949.439	-9.690.968	UK	5.377,91	0

In addition, the grants received in IVIRMA are mostly for R&D projects carried out at the clinics.

	Financial aid received from the government	
	2020	2019
Tax deductions and tax credits	3.803.763€	1.985.225€
Grants for Investors, grants for R&D and other types of relevant grants	537.214€	669.562€

11 COVID-19 CONTEXT IN IVIRMA



In view of the impact of the health crisis resulting from the pandemic on IVIRMA’s activity, we were forced to reduce such activities and, consequently, to present to the labor authorities, as of April 1, Temporary Layoff Plans (ERTE) due to Force Majeure in the different companies, leaving a team of minimum services to guarantee the start-up of the activity when it could be reactivated.

As soon as we were able to continue with our activity, we monitored the volume of staff on a weekly basis, with the aim of recovering our laid off professionals so that they could return to their previous contractual situation as expeditiously as possible. All the Temporary Layoff Plans (ERTE), approved by the labor authority were due to Force Majeure as a result of the pandemic caused by the Sars-Covid-19 virus, and, in general terms, lasted 3 months, with almost the entire workforce recovering at the end of June 2020.

COVID-19 by country

The different IVIRMA centers were affected more directly or indirectly by COVID-19. A total of 1,286 IVIRMA employees were affected by temporary layoff plans; these workers represent 57.67% of the workforce.

The situation caused by COVID-19 affected Spain more directly, where a total of 17 layoff plans were presented for each of the companies, including the IVI Foundation.

The pandemic also affected the USA, and the company also suffered from the pandemic, but in this case a very low percentage of the workforce was affected, located in Philadelphia, New Jersey and Southern California. In the case of LATAM, Argentina, Panama and Chile were affected. Finally, in the case of the rest of Europe it affected only the United Kingdom, also in a very low percentage.

People by professional category and country affected by layoff plans at IVIRMA during 2020

IVIRMA Global	Men	Women	Total
Support Functions (head offices)	43	93	136
Clinical support	44	121	165
Medical staff	26	82	108
Laboratory	48	259	307
Nursing	7	273	280
Patient care	14	236	250
Executive staff	37	3	40

Spain	Men	Women	Total
Support Functions (head offices)	43	90	133
Clinical support	39	107	146
Medical staff	26	77	103
Laboratory	46	236	282
Nursing	7	253	260
Patient care	12	219	231
Executive staff	35	3	38

USA	Men	Women	Total
Support Functions (head offices)	0	2	2
Clinical support	0	3	3
Medical staff	0	0	0
Laboratory	0	14	14
Nursing	0	4	4
Patient care	0	6	6
Executive staff	0	0	0

LATAM	Men	Women	Total
Support Functions (head offices)	0	1	1
Clinical support	5	9	14
Medical staff	0	5	5
Laboratory	2	8	10
Nursing	0	16	16
Patient care	2	11	13
Executive staff	1	0	1

UK	Men	Women	Total
Support Functions (head offices)	0	0	0
Clinical support	0	2	2
Medical staff	0	0	0
Laboratory	0	1	1
Nursing	0	0	0
Patient care	0	0	0
Executive staff	1	0	1

Committed to our professionals above all else

IVIRMA's commitment to our staff has been more present than ever during the layoff plans, seeking to minimize the adverse effects and trying to affect as few workers as possible.

During this period, IVIRMA supplemented the unemployment benefit to all clinic staff from April 1, 2020, with 15% of the maximum reference base for unemployment purposes, increasing according to the number of children of the workers, with the exception of Equipo IVI staff who did not receive a financial supplement. Likewise, the extra payments were paid in full to all staff, regardless of their layoff plan percentages or contract suspensions. All staff who were on suspension were also granted full leave without this being subject to pro-rata of their periods of active service.

In those exceptional cases in which payment by the Social Security was long overdue, IVIRMA advanced the corresponding amount. This has been the case for a couple of specific exceptions.

Finally, we should like to point out that IVIRMA agreed to the exemption of social security contributions at all the companies except Equipo IVI, assuming the commitment to maintain the workforce for the following six months, which has been scrupulously fulfilled at all centers.

IVI Gratuity

IVIRMA, as part of our solid commitment to our staff members, has made an effort to compensate all the people who were subject to the layoffs.

In this regard, all those who lost one month's salary or more received an additional monthly payment in the December payroll and those with a loss of less than one month received an amount proportional to their percentage of loss.

Health and Safety at IVIRMA in the COVID-19 context

Health and Safety are two aspects that we at IVIRMA always keep very much in mind and especially in 2020 in which, given the health situation, we have applied safety measures and protocols to adapt our centers to this new context.

The following are the safety protocols developed in the clinics, as well as the most important adaptations applied by country.

Safety protocols in clinics

IVIRMA's clinics comply thoroughly with all the **cleaning and disinfection measures** of the facilities, especially reinforcing all the circulation circuits of patients to **guarantee safety** during their stay in our centers.

In line with this commitment, all employees have been tested for the Coronavirus using antibody tests.

By the same token, to introduce a reference framework for COVID-19, a cross-cutting application document has been drawn up that in-



cludes a series of general guidelines with recommendations and a methodology for action on which to base them. To supplement this document, different best practice guides were drawn up for different profiles, in which the actions to be followed are set out, taking into account their areas of work or associated environments.

In addition to the foregoing, a series of safety measures have been **introduced to ensure the health of workers and patients** in the current situation:

- Postpone treatment of patients with symptoms associated with COVID-19 in the 14 days prior to visiting the clinic or who have been in contact with a person diagnosed with or suspected of having COVID-19 in the same time period.
- During the stay in the clinic, both patients and workers are obliged to follow all the necessary measures of prevention, social distancing, personal protection and hygiene to avoid contagion.
- Both in-vitro fertilization laboratories and adjoining rooms (operating rooms, sterilization rooms and laboratories) adopt and maximize the existing protocols to the specific characteristics of the new infectious agent with regard to any patient or sample to be treated and considered as potentially infectious.
- The following measures have been taken to reduce the likelihood of infecting patients or samples:
 - Extend the time dedicated to each procedure carried out in the operating room to favor the distance between patients and adapt them to the new protocols for cleaning and changes in staff attire.
 - Limit the number of operating room and laboratory staff to the procedures being performed at any given time, thus avoiding overcrowding.

- Extreme measures of personal protection, hygiene and asepsis, both for patients accessing the surgical area and for the staff working there.
- Immediately dispose of consumables in contact with biological material.
- Dispose of sharp objects in special containers.
- Disinfect the workplace immediately after use with suitable disinfectants.
- Although tissue samples from infected patients, IVF lab staff have implemented identification, incubation or there is no scientific evidence for the presence of SARS-CoV-2 virus in ejaculate or ovarian 143 storage protocols designed to prevent possible cross-contamination between samples from different patients.

Adaptations to COVID-19 by country

In *chapter 6. Committed to people*, special attention is paid to the adaptations that we have carried out during 2020 to respond to the context of COVID-19, to guarantee a safe environment in IVIRMA's clinics and facilities for all our stakeholders, especially staff and patients. In this regard, different actions have been performed, not only in the field of **health and safety**, but also in the **organization of work**.

Generally speaking, it has adapted to teleworking on a rotational basis. In addition, internal contingency plans have been created with a COVID Committee formed by management and adapted to each country. This Committee has been responsible for analyzing the situation and adapting to its evolution in order to put health first. In this regard, the centers have been refurbished with acrylic screens and the volume of patients and employees has been adapted to avoid any risk. In addition, protective material has been provided to employees, such as hydroalcoholic gel or masks.

Below are some examples of these actions by country:

Spain

- Creation of a series of protocols for action and best practices, based on the guidelines provided by the Ministry of Health, as well as the External Prevention Service (Quirón prevención) and Mutua Universal.
- Creation of a procedure to control the spread of COVID-19 in the event that any of the employees have symptoms or are diagnosed.
- Creation of the teleworking policy.
- Carrying out different training and information courses on COVID-19 at a national level, one example of which is the “Action if a worker suspected of being infected by the new SARS-CoV-2 coronavirus” course.
- Promotion of the We are IVIRMA tool to turn it into a space for accompaniment, listening and support between centers and people.

Italy

- Adaptation to teleworking through rotating shifts.
- Provision of protective equipment for employees.

Portugal

- In-house training on COVID-19.
- Adaptation of meal times to avoid overcrowding.
- Creation of an internal contingency plan containing all prevention measures, including a COVID Committee.

Argentina and Chile

- Provision of protective equipment for employees.
- Refurbishment of the clinic, starting with the adaptation of the volume of patients and employees in the areas.

Panama

- Provision of protective equipment for employees.
- Refurbishment of the center with acrylic partitions and promotion of cleanliness in the centers.
- Adaptation to teleworking through rotating shifts and the creation of groups by department, so that workers can attend in an interspersed manner.
- Modification of the working day during May, June and July, reducing the time worked.



A woman with blonde hair is lying on her back on a bed with white linens, holding a young girl with red hair upside down by her arms. The girl is wearing a pink tank top and white socks, and her legs are raised in the air. The scene is set in a bright room with large windows in the background. A semi-transparent circular graphic is overlaid on the left side of the image.

12 ANNEXED

Distribution of workforce by gender, age and professional category - IVIRMA Global

2020	<div>Under 21</div> <div>From 21 to 29</div> <div>From 30 to 39</div> <div>From 40 to 49</div> <div>From 50 to 60</div> <div>Over 60</div>												Total Men	Total Women
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women		
Support functions (headquarters)	0	2	7	27	31	67	19	43	6	24	3	3	66	166
Clinic support	1	0	10	27	26	83	23	93	10	56	5	24	75	183
Medical staff	0	0	1	1	15	35	11	56	12	17	6	1	45	110
Laboratory	19	1	2	21	107	30	178	26	117	4	29	0	82	441
Nursing	0	0	3	118	0	231	4	129	3	33	0	10	10	521
Patient care	9	2	4	56	13	120	5	109	1	53	0	5	25	345
Executive staff	0	0	0	0	6	2	13	6	23	4	6	2	48	14
Total	2	6	46	336	121	716	102	553	59	216	20	53	350	1880

All workers who are part of the company as of 31/12/2020 have been taken into account.

Distribution of workforce by gender, age and professional category - IVIRMA Global

2019	<div>Under 21</div> <div>From 21 to 29</div> <div>From 30 to 39</div> <div>From 40 to 49</div> <div>From 50 to 60</div> <div>Over 60</div>												Total Men	Total Women
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women		
Support functions (headquarters)	1	0	6	18	31	65	14	36	4	20	2	2	58	141
Clinic support	0	2	8	49	23	68	20	95	11	63	5	18	67	295
Medical staff	0	0	2	2	17	48	10	48	9	14	6	1	44	113
Laboratory	0	1	21	96	27	172	22	97	5	26	0	4	75	396
Nursing	0	0	2	130	2	206	2	117	2	29	0	12	8	494
Patient care	0	0	3	52	11	111	3	111	1	42	0	6	18	322
Executive staff	0	0	0	0	6	1	16	5	21	5	5	0	48	11
Total	1	3	42	347	117	671	87	509	53	199	18	43	318	1772

All workers who form part of the company as of 12/31/2019 have been taken into account.

Breakdown of the workforce by contract type, gender, and professional category – VIRMA Global

2020	Indefinite part-time		Indefinite full-time		Temporary part-time		Temporary full-time		Part-time internship		Full-time internship		Total Men	Total Women
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women		
Support functions (headquarters)	3	30	61	137	1	2	12	24	0	0	0	0	77	193
Clinic support	12	85	59	227	0	3	8	6	0	0	3	0	82	321
Medical staff	3	26	44	84	0	0	1	4	0	0	0	2	48	116
Laboratory	19	163	62	314	2	11	8	16	0	0	0	0	91	504
Nursing	2	247	7	308	1	34	2	41	0	0	0	3	12	633
Patient care	9	169	9	184	2	23	5	19	0	0	1	1	26	296
Executive staff	5	5	49	10	0	0	2	0	0	0	0	0	54	15
Total	53	725	291	1264	6	73	36	110	0	0	4	6	390	2178

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and professional category - IVIRMA Global

2019	Indefinite part-time		Indefinite full-time		Temporary part-time		Temporary full-time		Part-time internship		Full-time internship		Total Men	Total Women
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women		
Support functions (headquarters)	4	18	63	136	1	1	3	20	0	0	6	9	77	184
Clinic support	12	81	57	281	4	7	5	6	0	0	2	0	80	375
Medical staff	8	30	41	93	0	1	1	3	0	0	0	0	50	127
Laboratory	22	139	58	318	0	8	5	21	0	0	0	0	85	486
Nursing	2	243	4	281	2	24	4	42	0	0	0	3	12	593
Patient care	7	147	11	213	1	21	0	34	0	0	0	0	19	415
Executive staff	4	1	46	13	0	0	0	0	0	0	0	0	50	14
Total	59	659	280	1335	8	62	18	126	0	0	8	12	372	2194

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2019.

Breakdown of the workforce by contract type, gender, and age - IVIRMA Global

2020														
	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Type of contract	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Indefinite part-time	0	6	9	109	18	263	12	219	8	101	6	27	53	725
Indefinite full-time	1	1	28	250	99	497	91	358	55	130	17	28	291	1264
Temporary part-time	0	0	3	34	2	31	1	6	0	2	0	0	6	73
Temporary full-time	0	0	16	38	16	44	4	23	0	5	0	0	36	110
Part-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Full-time internship	1	0	2	4	0	2	0	0	1	0	0	0	4	6
Total	2	7	58	453	135	837	108	606	64	238	23	55	390	2178

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Breakdown of the workforce by contract type, gender, and age - IVIRMA Global

2019														
	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Type of contract	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Indefinite part-time	0	3	6	72	17	257	19	224	13	84	4	19	59	659
Indefinite full-time	0	4	27	298	117	501	77	346	43	149	16	37	280	1335
Temporary part-time	1	1	5	29	1	18	0	10	0	4	1	0	8	62
Temporary full-time	0	1	8	49	7	47	2	21	1	8	0	0	18	126
Part-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Full-time internship	1	0	6	12	1	0	0	0	0	0	0	0	8	12
Total	2	9	52	460	143	823	98	601	57	245	21	56	373	2194

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2019.

Number of persons leaving by gender, age and professional category – IVIRMA Global

2020	Indefinite part-time		Indefinite full-time		Temporary part-time		Temporary full-time		Part-time internship		Full-time internship		Total Men	Total Women
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women		
Support functions (headquarters)	0	0	0	2	1	3	0	1	0	1	1	0	2	7
Clinic support	0	0	1	6	3	2	0	2	0	4	0	0	4	15
Medical staff	0	0	0	0	1	1	0	0	0	0	1	0	2	1
Laboratory	0	0	1	4	1	5	0	0	0	0	0	0	2	9
Nursing	0	0	0	9	0	6	0	6	0	0	0	0	0	21
Patient care	0	0	0	3	1	3	0	1	0	1	0	0	1	8
Executive staff	0	0	0	0	0	0	2	0	2	0	0	0	4	0
Total	0	0	2	24	7	20	2	10	2	6	2	0	15	60

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020

Number of persons leaving by gender, age and professional category – IVIRMA Global

2019	Indefinite part-time		Indefinite full-time		Temporary part-time		Temporary full-time		Part-time internship		Full-time internship		Total Men	Total Women
Categories	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women		
Support functions (headquarters)	0	0	0	0	6	7	1	6	0	2	1	2	8	16
Clinic support	0	0	0	5	2	7	1	4	1	8	0	2	4	26
Medical staff	0	0	0	0	1	3	1	2	1	1	0	0	3	6
Laboratory	0	1	0	4	2	9	1	6	0	2	0	0	3	22
Nursing	0	0	0	6	0	7	0	15	0	3	0	1	0	32
Patient care	0	0	0	3	0	16	0	4	0	5	0	1	0	29
Executive staff	0	0	0	0	0	1	0	0	1	2	0	0	1	3
Total	0	1	0	18	11	50	4	37	3	23	1	5	19	134

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2019.

Number of new hires by contract type, gender, and age – IVIRMA Global

2020														
	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Type of contract	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Indefinite part-time	0	4	1	36	1	31	0	13	1	7	0	0	3	91
Indefinite full-time	0	1	7	79	11	59	0	27	7	10	1	0	26	176
Temporary part-time	0	0	2	27	2	27	1	4	0	1	0	0	5	59
Temporary full-time	0	0	12	25	11	35	4	15	0	4	0	0	27	79
Part-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Full-time internship	1	0	0	2	0	0	0	0	0	0	0	0	1	2
Total	1	5	22	169	25	152	5	59	8	22	1	0	62	407

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2020.

Number of new hires by contract type, gender, and age – IVIRMA Global

2019														
	Under 21		From 21 to 29		From 30 to 39		From 40 to 49		From 50 to 60		Over 60			
Type of contract	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women	Total Men	Total Women
Indefinite part-time	0	3	0	14	2	18	1	8	1	5	0	3	4	51
Indefinite full-time	0	1	11	113	14	92	5	30	1	15	1	3	32	254
Temporary part-time	0	0	4	17	1	10	0	6	0	4	0	0	5	37
Temporary full-time	0	1	7	34	3	31	0	13	1	7	0	0	11	86
Part-time internship	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Full-time internship	0	0	5	11	1	0	0	0	0	0	0	0	6	11
Total	0	5	27	189	21	151	6	57	3	31	1	6	58	439

All workers who have at some time worked at the company have been taken into consideration, even if they do not form part of the workforce as of 12/31/2019.

Pay gap by professional category - 2019

Spain

Category	Male average	Female average	Pay gap (%)
Support functions (headquarters)	35.723€	32.149€	10,01%
Clinic support	25.279€	30.323€	-19,95%
Medical staff	65.437€	64.802€	0,97%
Laboratory	34.636€	34.176€	1,33%
Nursing	24.488€	22.927€	6,38%
Patient care	19.158€	20.536€	-7,19%
Executive staff	196.771€	150.191€	23,67%

USA

Category	Male average	Female average	Pay gap (%)
Support functions (headquarters)	88.109€	54.788€	37,82%
Clinic support	42.513€	35.641€	16,17%
Medical staff	170.094€	157.608€	7,34%
Laboratory	47.640€	43.044€	9,65%
Nursing	-	64.106€	-
Patient care	-	30.250€	-
Executive staff	169.353€	130.101€	23,18%

Pay gap by professional category - 2019

Rest of Europe

Category	Male average	Female average	Pay gap (%)
Support functions (headquarters)	-	-	-
Clinic support	48.088€	33.722€	29,87%
Medical staff	65.608€	71.379€	-8,80%
Laboratory	38.516€	39.055€	-1,40%
Nursing	-	29.663€	-
Patient care	16.288€	20.654€	-26,81%
Executive staff	287.577€	*	1,33%

*Salary is not included for privacy reasons as there is only one person in that category.

LATAM

Category	Male average	Female average	Pay gap (%)
Support functions (headquarters)	-	15.050€	-
Clinic support	15.655€	17.099€	-9,23%
Medical staff	48.971€	32.332€	33,98%
Laboratory	25.677€	16.995€	33,81%
Nursing	-	9.764€	-
Patient care	9.550€	8.614€	9,80%
Executive staff	227.365€	138.283€	39,18%

In calculating the gap, we have taken into consideration staff members with an indefinite full-time contract who have been at the company at any time in 2019, and considering the annual average gross salary to observe the evolution throughout the year and to facilitate comparability.

The calculation formula is: (average gross salary men-average gross salary women) / (average gross salary men)

* The remuneration of executives includes the fixed and variable remuneration.

Diversity in the workforce

2020	Under 30		From 30 to 50		Over 50		Disabled people	
Categories	Men	Women	Men	Women	Men	Women	Men	Women
Support functions (headquarters)	7	29	50	110	9	27	1	2
Clinic support	11	27	49	176	15	80	2	1
Medical staff	1	1	26	91	18	18	0	0
Laboratory	22	109	56	295	4	37	0	2
Nursing	3	118	4	250	3	43	0	2
Patient care	4	58	19	229	1	58	0	7
Executive staff	0	0	19	8	29	6	1	0

Data from IVIRMA Global. Workers with all types of contracts as of 12/31/2020 have been taken into account.

Diversity in the workforce

2019	Under 30		From 30 to 50		Over 50		Disabled people	
Categories	Men	Women	Men	Women	Men	Women	Men	Women
Support functions (headquarters)	7	18	45	101	6	22	1	2
Clinic support	8	51	43	163	16	81	2	3
Medical staff	2	2	27	96	15	15	0	0
Laboratory	21	97	49	269	5	30	0	4
Nursing	2	130	4	323	2	41	0	3
Patient care	3	52	14	222	1	48	1	6
Executive staff	0	0	22	6	26	5	1	0

Data from IVIRMA Global. Workers with all types of contracts as of 12/31/2019 have been taken into account.

13 TABLE OF CONTENTS



The following table of contents is required under Law 11/2018 of December 28, on non-financial reporting and diversity, pursuant to the GRI Standard. The indicators or aspects that the GRI does not include to respond to the Law have also been incorporated.

LAW 11/2018	Reporting criteria	Section
General aspects		
a) A brief description of the group’s business model , which will include its business environment, its organization and structure, the markets in which it operates, its objectives and strategies, and the main factors and trends that may affect its future evolution.	GRI 102-1 Name of the organization (2016)	03. About us
	GRI 102-2 Activities, brands, products and services (2016)	03. About us
	GRI 102-3 Location of headquarters (2016)	03. About us
	GRI 102-4 Location of operations (2016)	03. About us
	GRI 102-5 Ownership and legal form (2016)	03. About us
	GRI 102-6 Markets served (2016)	03. About us
	GRI 102-10 Significant changes to the organization and its supply chain (2016)	03. About us
	GRI 102-12 External initiatives (2016)	04. Committed to risk management and safety
	GRI 102-13 Membership of associations (2016)	04. Committed to risk management and safety
	GRI 102-14 Statement from senior decision-maker (2016)	01.Committed
	GRI 102-16 Values, principles, standards and norms of behavior (2016)	03. About us

LAW 11/2018	Reporting criteria	Section
General aspects		
a) A brief description of the group’s business model , which will include its business environment, its organization and structure, the markets in which it operates, its objectives and strategies, and the main factors and trends that may affect its future evolution.	GRI 102-18 Governance structure (2016)	03. About us
	Objectives and strategies of the organization	04. Committed to risk management and safety
	GRI 102-45 Entities included in the consolidated financial statements (2016)	02. About this report
	GRI 102-50 Reporting period (2016)	02. About this report
	GRI 102-51 Date of the last report (2016)	02. About this report
	GRI 102-52 Reporting Cycle (2016)	02. About this report
	GRI 102-53 Contact point for questions regarding the report (2016)	02. About this report
b) A description of the policies applied by the group with respect to these topics, which will include due diligence procedures applied to the identification, review, prevention and mitigation of significant risks and impacts, and of verification and control, including which measures have been adopted.	GRI 102-11 Precautionary principle or approach (2016)	04. Committed to risk management and safety
	GRI 102-29 identifying and managing economic, environmental and social impacts (2016) GRI 102-30 Effectiveness of risk management processes (2016) GRI 102-31 Review of economic, environmental and social topics (2016) GRI 102-33 Communicating critical concerns (2016)	04. Committed to risk management and safety
c) The results of these policies, including key indicators of relevant non-financial results that allow the monitoring and review of progress and that favor comparability between companies and sectors, in accordance with the national, European or international benchmark frameworks used for each topic.	Indicators included in the Corporate Responsibility Report in the economic, social and environmental fields	Throughout the entire Report.

LAW 11/2018	Reporting criteria	Section
General aspects		
d) The main risks concerning those issues related to the group’s activities, including, when relevant and proportionate, its commercial relationships, products or services that may have negative effects in those areas, and how the group manages these risks, explaining the procedures used to detect and review them in accordance with national, European or international benchmark frameworks for each topic. Information on the impacts detected must be included, offering a breakdown of these, in particular on the main short-, medium- and long-term risks.	GRI 102-11 Precautionary principle or approach (2016)	04. Committed to risk management and safety
	GRI 102-15 Key impacts, risks and opportunities (2016)	04. Committed to risk management and safety
	GRI 102-34 Nature and total number of critical concerns (2016)	04. Committed to risk management and safety
	GRI 102-40 List of stakeholder groups (2016)	03. About us
	GRI 102-42 Identifying and selecting stakeholders (2016)	03. About us
	GRI 102-43 Approach to stakeholder engagement (2016)	03. About us
	GRI 102-47 List of material topics (2016)	05. Analysis of materiality and integration of Sustainable Development Goals
	GRI 103-1 Explanation of the material topic and its Boundary (2016)	04. Committed to risk management and safety
	Main factors and trends that can affect future evolution of the company	04. Committed to risk management and safety

LAW 11/2018	Reporting criteria	Section
General aspects		
e) Key indicators of non-financial results that are relevant to the specific business activity, and that meet the criteria of comparability, materiality, relevance and reliability. Standards that can be generally applied and that comply with the EC guidelines in this matter and GRI standards will be used, and the national, European or international framework used for each subject should be mentioned in the report. The key indicators of non-financial results should be applied to each section of the non-financial information statement. These indicators should be useful, taking into account the specific circumstances and be consistent with the parameters used in their internal risk assessment and management procedures . In any case, the information presented must be accurate, comparable and verifiable.	GRI 102-46 Defining report content and topic Boundaries (2016)	05. Analysis of materiality and integration of Sustainable Development Goals
	GRI 102-47 List of material topics (2016)	05. Analysis of materiality and integration of Sustainable Development Goals
	Indicators included in the Corporate Responsibility Report in the economic, social and environmental fields	Throughout the entire Report.
Information on environmental issues		
Detailed information about the current and foreseeable effects of the company's activities on the environment and, where applicable, health and safety, environmental assessment or certification procedures; the resources dedicated to the prevention of environmental risks; the application of the precautionary principle, the amount of provisions and guarantees for environmental risks.	GRI 103-2 The management approach and its components (2016) GRI 103-3 Evaluation of the management approach (2016)	08. Committed to the Planet
Pollution: measures to prevent, reduce or repair carbon emissions that seriously affect the environment; taking into account any form of air pollution specific to an activity, including noise and light pollution.	GRI 305 Emissions (2016) L00 Noise and light pollution	08. Committed to the Planet

LAW 11/2018	Reporting criteria	Section
Information on environmental issues		
Circular economy and prevention and management of waste: prevention, recycling, reuse, other forms of recovery and waste disposal; actions to combat food wastage.	GRI 103-2 The management approach and its components (2016)	08. Committed to the Planet
	Evaluation of the management approach (2016)	08. Committed to the Planet
	GRI 306-2 Waste by type and disposal method (2016)	08. Committed to the Planet
	L01 Circular Economy	08. Committed to the Planet
	L02 Food wastage	08. Committed to the Planet
Sustainable use of resources: water consumption and water supply according to local constraints; consumption of raw materials and the measures adopted to improve the efficiency of their use; consumption, direct and indirect, of energy, measures taken to improve energy efficiency and the use of renewable energy.	GRI 301-1 Waste by weight and volume	08. Committed to the Planet
	GRI 301-2 Recycled input supplies used (2016)	08. Committed to the Planet
	GRI 302-1 Energy consumption within the organization (2016)	08. Committed to the Planet
	GRI 302-2 Energy consumption outside of the organization (2016)	08. Committed to the Planet
	GRI 303-5 Water consumption (2018)	08. Committed to the Planet
Climate change: the important elements of greenhouse gas emissions generated as a result of the company's activities, including the use of the goods and services it produces; the measures adopted to adapt to the consequences of climate change; the reduction goals established voluntarily in the medium and long term to reduce greenhouse gas emissions and the means implemented for that purpose.	GRI 305-1 Direct GHG emissions (Scope 1) (2016)	08. Committed to the Planet
	GRI 305-2 Indirect GHG emissions from power generation (Scope 2) (2016)	08. Committed to the Planet
	GRI 305-3 Other indirect GHG emissions (scope 3) (2016)	08. Committed to the Planet
	GRI 305-5 Reduction of GHG emissions (2016)	08. Committed to the Planet
	Measures adopted for adaptation to the consequences of climate change.	08. Committed to the Planet

LAW 11/2018	Reporting criteria	Section
Information on environmental issues		
Protection of biodiversity: measures taken to preserve or restore biodiversity; impacts caused by activities or operations in protected areas.	GRI 304-2 Significant impacts of activities, products and services on biodiversity (2016) GRI 304-3 Habitats protected or restored (2016)	08. Committed to the Planet
Information on social and personnel issues		
Employment: total number and distribution of employees by gender, age, country and professional classification; total number and distribution of work contract modalities, annual average of permanent contracts, temporary contracts and part-time contracts by gender, age and professional classification, number of persons leaving by gender, age and professional classification; the average remunerations and their evolution broken down by gender, age and professional classification or equal value; pay gap, the remuneration of equal or average positions in the company, the average remuneration of directors and executives, including variable remuneration, allowances, indemnities, payment to long-term savings systems and any other amount payable broken down by gender, implementation of employment disconnection policies, employees with disabilities.	GRI 102-7 Scale of the organization (2016)	07. Committed to People
	GRI 102-8 Information on employees and other workers (2016)	07. Committed to People
	Breakdown of the workforce by gender, age and professional category	07. Committed to People
	Total number and distribution of work contract modalities	07. Committed to People
	Breakdown of the workforce by contract type, gender, and professional category	07. Committed to People
	Breakdown of the workforce by contract type, gender, and age	07. Committed to People
	Number of new hires by contract type, gender, and age	07. Committed to People
	Number of persons leaving by gender, age and professional category	07. Committed to People
	GRI 102-35 Remuneration policies (2016)	07. Committed to People
	L03 Pay gap and average remunerations	07. Committed to People

LAW 11/2018	Reporting criteria	Section
Information on social and personnel issues		
Organization of work: organization of working time; number of hours of absenteeism; measures aimed at facilitating the enjoyment of work/life balance and encouraging the co-responsible exercise of these by both parents.	GRI 401-3 Parental leave (2016)	07. Committed to People
	L04 Labor disconnection policies	07. Committed to People
	L05 Work/life balance measures	07. Committed to People
	L06 Hours of absenteeism	07. Committed to People
Health and safety: occupational health and safety conditions; work-related injuries, in particular their frequency and seriousness, as well as work-related ill-health; broken down by gender.	GRI 403-1 Representation of workers in formal worker-company health and safety committees (2018)	07. Committed to People
	GRI 403-4 Participation, consultation and communication on occupational health and safety of workers (2018)	07. Committed to People
	GRI 403-5 Training of workers in occupational health and safety (2018)	07. Committed to People
	GRI 403-6 Promotion of worker health (2018)	07. Committed to People
	GRI 403-7 Prevention and mitigation of occupational health and safety impacts directly linked by business relationships (2018)	07. Committed to People
	GRI 403-8 Workers covered by an occupational health and safety management system (2018)	07. Committed to People
	GRI 403-9 Work-related injuries (2018)	07. Committed to People
	GRI 403-10 Work-related ill-health (2018)	07. Committed to People

LAW 11/2018	Reporting criteria	Section
Information on social and personnel issues		
Social relations: organization of social dialogue, including procedures to inform and consult staff and negotiate with them; percentage of employees covered by collective agreement by country; the balance of collective agreements, particularly in the field of occupational health and safety.	GRI 102-41 Collective bargaining agreements (2016)	07. Committed to People
	GRI 402-1 Minimum notice periods regarding operational changes (2016)	07. Committed to People
	GRI 407-1 Operations and suppliers in which the right to freedom of association and collective bargaining may be at risk (2016)	07. Committed to People
	Balance of the collective bargaining agreements, in particular in the field of occupational health and safety	07. Committed to People
Training: the policies implemented in the field of training; the total amount of training hours by professional categories.	GRI 404 Training and education (2016)	07. Committed to People
	GRI 404-1 Average hours of training per year per employee (2016)	07. Committed to People
Universal accessibility for people with disabilities	L07 Universal accessibility	07. Committed to People
Equality: measures taken to promote equal treatment and opportunities between women and men; equality plans (Chapter III of Organic Law 3/2007, of March 22, for the effective equality of women and men), measures adopted to promote employment, protocols against sexual and gender-based harassment, integration and the universal accessibility of people with disabilities; the policy against all types of discrimination and, where appropriate, management of diversity	GRI 405-1 Diversity of governance bodies and employees (2016)	07. Committed to People
	GRI 406-1 Incidents of discrimination and corrective actions taken (2016)	07. Committed to People
	L08 Protocols against sexual or gender-based harassment	07. Committed to People
	Measures taken to promote equal treatment and opportunities between women and men Measures taken to promote employment and occupation	07. Committed to People

LAW 11/2018	Reporting criteria	Section
Information on respect for human rights		
Application of due diligence procedures in the field of human rights; prevention of the risks of violation of human rights and, where appropriate, measures to mitigate, manage and repair possible abuses; complaints about cases of violation of human rights; promotion and compliance with the provisions of the fundamental conventions of the International Labor Organization related to respect for freedom of association and the right to collective bargaining; the elimination of discrimination in employment and occupation; the elimination of forced or compulsory labor; the effective abolition of child labor.	<p>GRI 406-1 Incidents of discrimination and corrective actions taken (2016)</p> <p>GRI 408-1 Operations and suppliers at significant risk for incidents of child labor (2016)</p> <p>GRI 409-1 Operations and suppliers at significant risk for incidents of forced or compulsory labor (2016)</p> <p>GRI 410-1 Security personnel trained in human rights policies and procedures (2016)</p> <p>GRI 412-1 Operations that have been subject to human rights reviews or impact assessments (2016)</p> <p>GRI 412-2 Employee training on human rights policies or procedures (2016)</p> <p>GRI 412-3 Significant investment agreements and contracts that include human rights clauses or that underwent human rights screening (2016)</p>	09. Committed to Human Rights
Information on the fight against corruption and bribery		
Measures taken to prevent corruption and bribery; measures to combat money laundering, contributions to foundations and non-profit enterprises.	GRI 205-1 Operations assessed for risks related to corruption (2016)	10. Committed to Ethical Management
	GRI 205-2 Communication and training about anti-corruption policies and procedures (2016)	10. Committed to Ethical Management
	GRI 205-3 Confirmed incidents of corruption and actions taken (2016)	10. Committed to Ethical Management
	Contributions to foundations and non-profit enterprises	10. Committed to Ethical Management
Information about the company		
The company's commitments to sustainable development: the impact of the company's activity on local employment and development; the impact of the company's activity on local populations and territory; the relationships maintained with local community players and the types of dialogue with them; the association or sponsorship actions.	GRI 103-2 The management approach and its components (2016)	11. Committed to Society
	GRI 413-1 Operations with local community engagement, impact assessments and development programs (2016)	11. Committed to Society
	GRI 413-2 Operations with significant actual and potential negative impacts on local communities (2016)	11. Committed to Society

LAW 11/2018	Reporting criteria	Section
Information about the company		
Subcontracting and suppliers: the inclusion in the procurement policy of social, gender equality and environmental issues; consideration in relations with suppliers and subcontractors of their social and environmental responsibility; supervisory systems and audits and their results.	GRI 102-9 Supply Chain (2016)	11. Committed to Society
	GRI 204-1 Proportion of spending on local suppliers (2016)	11. Committed to Society
	GRI 308-1 New suppliers that were screened using environmental criteria (2016)	11. Committed to Society
	GRI 308-2 Negative environmental impacts in the supply chain and actions taken (2016)	11. Committed to Society
	GRI 414-1 New suppliers that were screened using social criteria (2016)	11. Committed to Society
	GRI 414-2 Negative social impacts in the supply chain and actions taken (2016)	11. Committed to Society
Consumers: measures for the health and safety of consumers; complaint systems, complaints received and the resolution of these.	GRI 103-2 The management approach and its components (2016)	06. Committed to Patients
	GRI 416-1 Assessment of the health and safety impacts of product and service (2016)categories	06. Committed to Patients
	L09 Claims systems, complaints received and resolving these	06. Committed to Patients
Tax information: the profits obtained country by country; corporation tax paid and the public grants received.	GRI 103-2 The management approach and its components (2016)	11. Committed to Society
	GRI 201-4 Financial assistance received from government (2016)	11. Committed to Society
	Profits obtained country by country and corporation tax paid country by country	11. Committed to Society

