



- 1 FY22 1H Financial Results Summary
- 2 Achieving Our Medium- to Long-Term Targets
- 3 Appendix
- 4 Company Overview

# Establishing Sustainable Mechanisms and Businesses through Which We Can Address Social Problems



## **Social Problem-Solving Business**



Under the government's policy of shortening of hospital stays and returning home, Ishinkan has been actively accepting patients who have commonly been rejected by other hospitals and facilities, including those in the terminal stages of cancer, those who need respiratory care (are on respirators, have had tracheostomies, etc.), and those with neurodegenerative diseases. Meanwhile, we have remained conscious of our role as an organization that supports the successful functioning of regional healthcare and have endeavored to fulfill this role by, in principle, ensuring that patients can continue to be seen by their existing primary physicians and care managers.

We aim to continue operating Ishinkan in an even-handed and honest manner, thereby satisfying our duty to support regional healthcare and ensuring the well-being of people who are unsure of where to go after being discharged from medical facilities.

We are confident that Ishinkan will help to solve medical problems of revitalizing regional healthcare, reducing exhaustion of medical workers during the COVID-19 pandemic, and alleviating regional disparities in healthcare.

# Highlights



1

#### **Continuing rigorous COVID-19 countermeasures**

- ✓ Provided medical and care services based on infection prevention measures (standard precautions)
- ✓ Negative impact on utilization rates due to the outbreak of Omicron variant causing a large number of infections and close-contact cases
- ✓ Addressed the situation through measures such as accepting patients at nearby facilities when stopped accepting new patients for several days at some facilities

2

#### Accelerating our formation of dominant areas centered on the Tokyo metro area

- ✓ Kept on stable operation levels through strong, long-term trust-based relationships with medical institutions and by enhancing the Ishinkan brand
- ✓ Fast start of new facilities mainly in the Tokyo metro area due to improved brand strength and the effect of forming dominant areas
- ✓ Accelerating the formation of dominant areas in Chiba and Tokyo, in addition to Saitama and Kanagawa, where we have been expanding our formation of dominant areas

5

# Strengthening operating structure (a headquarters-focused management system and close collaboration between the headquarters and each facility)

- ✓ Reinforcing the operating structure of each facility by recruiting a large number of nurses in March and April
- ✓ Promoting management efficiency by opening large facilities and through dominance formation
- ✓ Establishing a timely and appropriate recruiting system based on highly accurate forecasts of utilization rates



#### **FY22 1H Operating Performance and Full-Year Forecasts**

1H Net Sales (Actual)

**1H Operating Profit (Actual)** 

**JPY 10.3bn** 

JPY 2.8bn (Operating margin: 27.8%)

**Full-Year Net Sales (Forecast)** 

**Full-Year Operating Profit (Forecast)** 

JPY 21.6bn (Progress toward full-year forecast: 47.9%) JPY 4.9bn (Progress toward full-year forecast: 58.1%)



# 1. FY22 1H Financial Results Summary

## Financial Highlights



- The utilization rate at existing facilities was 85.1%, which is almost the same level as our target for stable operations (80–85%). The start of new facilities mainly in the Tokyo metro area was very favorable. As a result, 1H performance progressing steadily against full-year forecast.
  - ✓ Net sales: JPY 10.3bn (Progress toward full-year forecast: 47.9%)
  - ✓ Operating profit: JPY 2.8bn (Progress toward full-year forecast: 58.1%)
  - ✓ Net profit: JPY 1.9bn (Progress toward full-year forecast: 60.2%)
- In 1H, we opened 8 new facilities as planned. As a result, we had 50 facilities (2,390 beds) as of March 31, 2022.
  - ✓ FY22: We plan to open 16 new facilities more than the plan released in November 2021.
  - ✓ FY23: We have already announced plans to open 10 facilities including Ishinkan Yagoto Minamiyama, the flagship facility in the Chukyo area. We plan to steadily release further information once launch plans have been clarified, in order to go beyond the target of about 13 facilities per year set in the three-year plan.
- In December 2021, the Ministry of Health, Labour and Welfare announced a subsidy for improvement of compensation for caregivers for the period from February to September 2022. We recorded a part of the subsidy (approx. JPY 100 million in total) as non-operating income, and also recorded personnel expenses corresponding to the subsidy in the same amount.
  - ✓ FY22: The subsidy will have a negative impact of JPY 100 million on operating profit but will not have an impact on net profit.
  - ✓ FY23: From October 2022 onward, instead of a subsidy, a payment will be made as part of care
    insurance fees, so it will be recorded as net sales and personnel expenses. As a result, it will not have an
    impact on operating profit and net profit.

# Net Sales and Profit Rose Steadily as the Number of Facilities and Bed Capacity Increase



- Net sales increased significantly compared to 1H of FY21 as the number of facilities increased by 15 and the number of bed capacity increased by 50%.
- We maintained profitability by operational improvements even while increasing of personnel numbers.



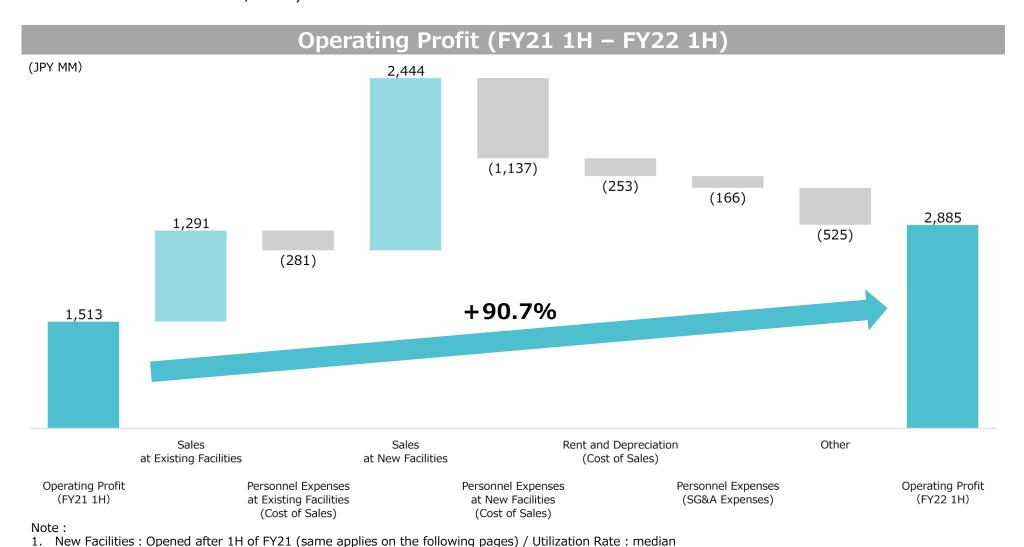


: Percentage of Net Sales

# Maintained Stable Utilization Rates at Both Existing Facilities and New Facilities



- We maintained stable utilization rates at existing facilities (85.1%) and new facilities (53.6%). (1)
- Operating profit rose as the number of facilities and bed capacity increase (35 facilities as of March 31, 2021; 50 facilities as of March 31, 2022).

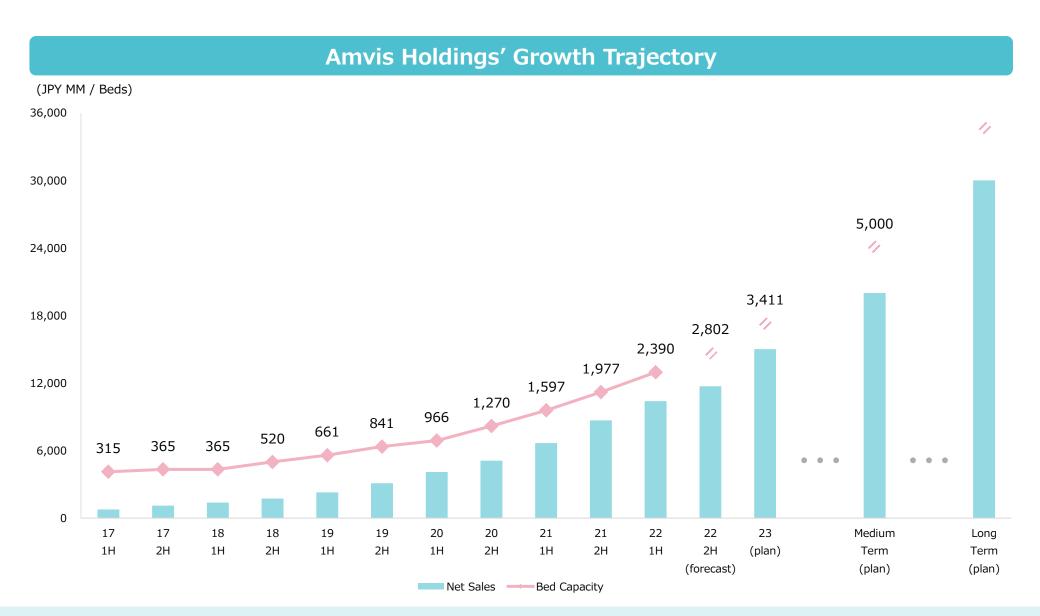




# 2. Achieving Our Medium- to Long-Term Targets

# A Steady Rise in Bed Capacity and Net Sales Since Amvis Holdings' Establishment





# Amvis 2023: Key Financial Indicators



### **Amvis 2023 Targets**

Number of facilities / Bed capacity

**Net sales** 

# 70 facilities / 3,411 beds

(Medium- to long-term target: 100 facilities / 5,000 beds)

FYE22 (forecast): 58 facilities / 2,802 beds FYE21 (actual): 42 facilities / 1,977 beds FYE20 (actual): 29 facilities / 1,270 beds

**Operating profit** 

JPY 29.2bn

(Medium- to long-term target: JPY 45.0bn)

FY22 (forecast): JPY 21.6bn FY21 (actual): JPY 15.3bn FY20 (actual): JPY 9.1bn

**Net profit (CAGR)** 

JPY 6.7bn

(Medium- to long-term target: JPY 10.0bn)

FY22 (forecast): JPY 4.9bn FY21 (actual): JPY 3.7bn FY20 (actual): JPY 1.8bn 35–39% (Medium- to long-term target: 20–29%)

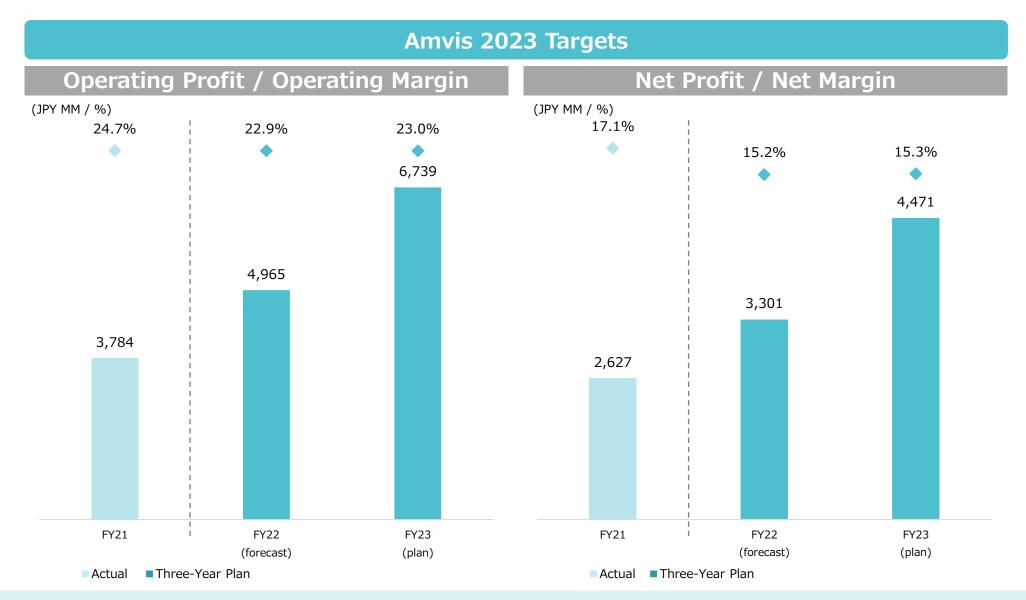
FY20-FY23 (forecast): 53%

# Amvis 2023: Number of Facilities / Bed Capacity and Net Sales





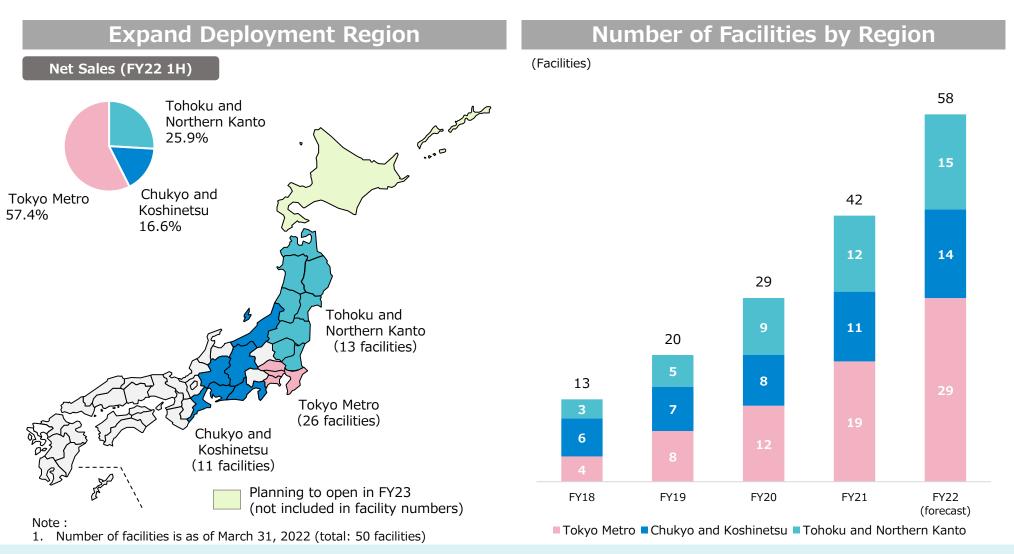




# Accelerate Our Formation of Dominant Areas in Eastern Japan, Particularly in the Tokyo Metro Area



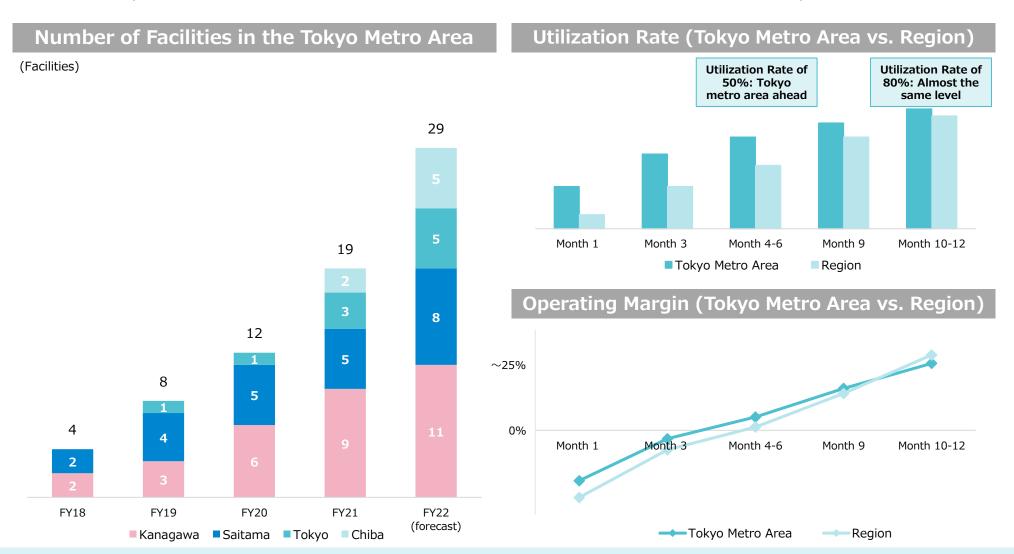
- In FY22, we have been accelerating our dominance formation in the Tokyo metro area.
- In FY23, we plan to begin operating in Hokkaido, while continuing to expand the formation of dominant areas.



## Favorable Start in the Tokyo Metro Area



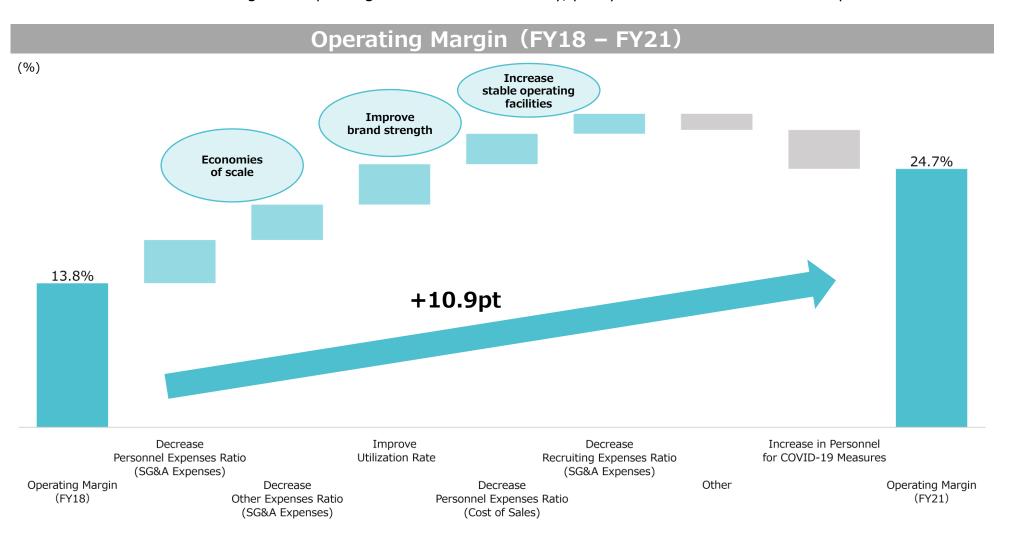
- In FY22, we plan to open 10 facilities in the Tokyo metro area, while accelerating our dominance formation in the Tokyo and Chiba prefecture.
- In the Tokyo metro area, the start of new facilities tends to be fast, due to the dominant development.



# Profitability Improvement through High Operating Capacity and Accelerated Business Expansion



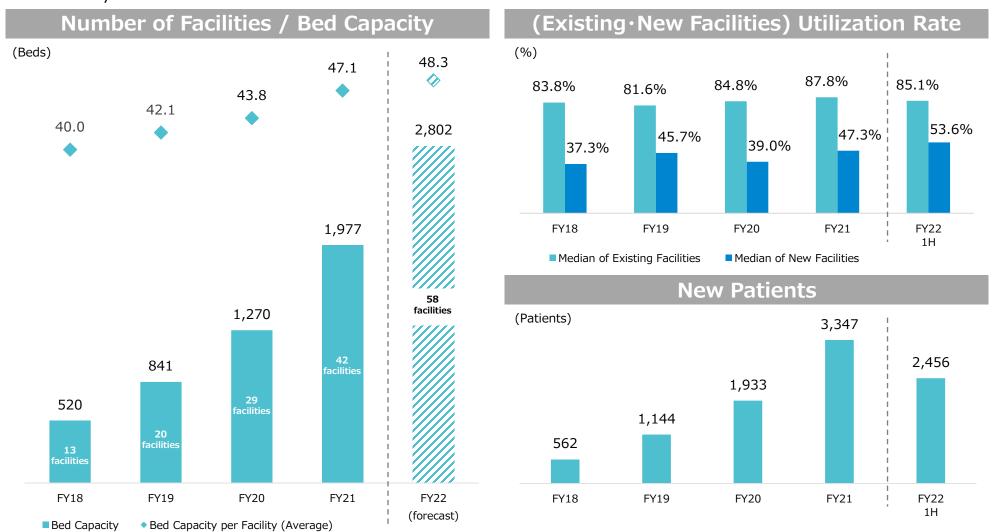
- We have succeeded in improving operating margin by taking advantage of economies of scale through business expansion under a headquarters-focused management system.
- We have been maintaining and improving utilization rates steadily, partly due to the dominant development.



# Increasing the Number of Patients by Opening Larger Facilities and Raising Utilization Rates at Existing Facilities



- By augmenting marketing and operational capabilities, we have increased bed capacity per facility. Going forward, we
  plan to open facilities with about 50 beds.
- The utilization rates at new facilities improved, given the increase in openings and the favorable start of new facilities in the Tokyo metro area.



# Facility Opening and Operating Strategy: The Process from Project Cultivation to Stable Operation



- We begin conducting market and other surveys around two years prior to opening a new facility, making the decision to open after carefully reviewing the survey results.
- After opening, we manage personnel numbers based on utilization rates to achieve profitability on a monthly basis in 4–6 months and become profitable on a cumulative basis after 10–12 months.

#### From Project Cultivation to Opening

# Up to 2 years before: Commence market survey in candidate regions

- Conduct surveys of hospice demand, taking medical areas, demographics, and medical resources into account.
- Build trust with hospitals and physicians around facilities.

# From 2 years to 1 year before: Conduct land and building surveys

- Make an overall decision on the project, taking into account such factors as location, site area, flow line, opening method, and investment amount.
- Decide opening location, considering occupancy and recruiting.

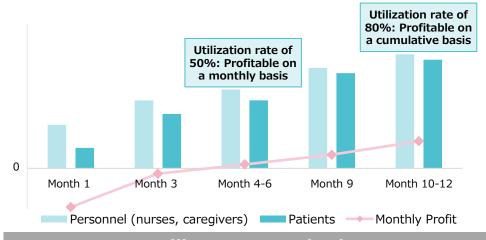
# From 1 year to 6 months before: Announce opening and begin construction

- Once decision to open is relatively certain, make announcement.
- Following the announcement, begin recruiting with an eye toward opening.

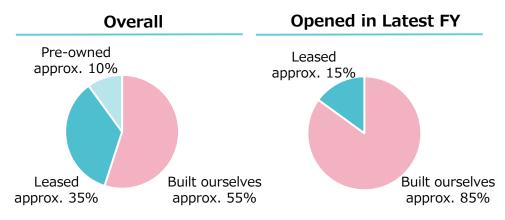
#### 3 months before: Commence pre-launch sales activities

- Step up full-fledged marketing to hospitals, begin promoting occupancy.
- Prepare for opening, with collaboration from supporting staff from headquarters and other facilities.

### From Opening Stable Operation (Base Case)



## Facility Open Methods

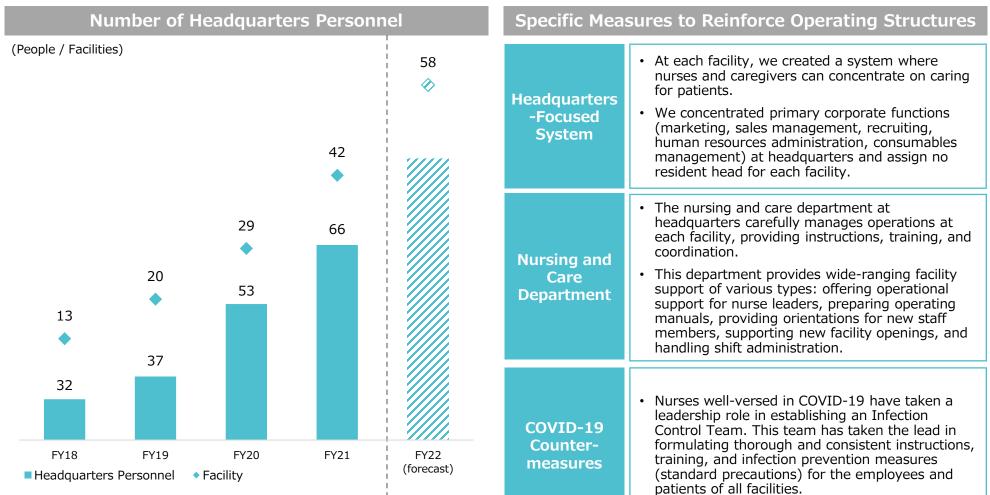


**Opening** 

# Facility Operating Strategy: Create and Promote a Headquarters-Focused Management System



- We have maintained robust operating structures by increasing the number of headquarters personnel as the number of facilities increases.
- Rather than assigning a head of each facility, we have established a nursing and care department at headquarters. By creating a headquarters-focused management system, we aim to maintain or improve the quality of care at facilities.



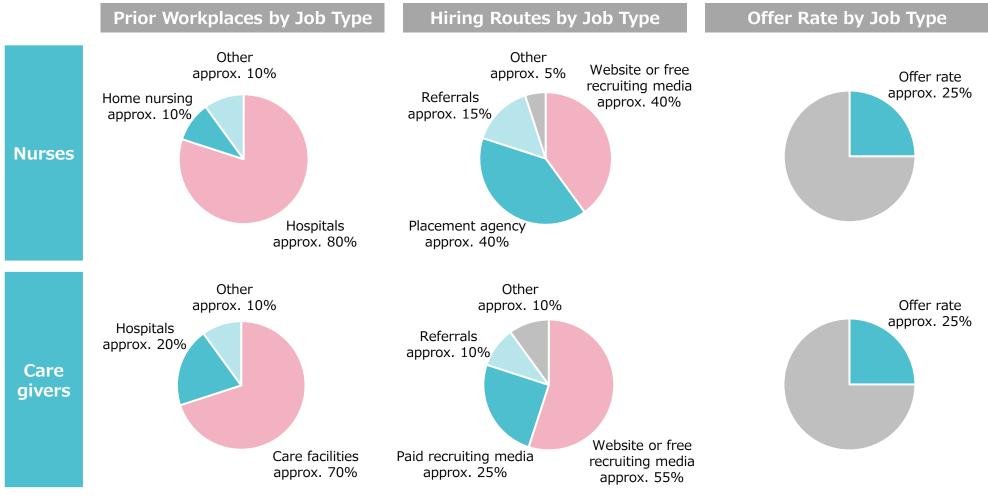
#### Note:

1. The number of headquarters personnel excludes the number of nurses

# Recruiting Strategy: Screen Nurses and Caregivers Rigorously



- We do not hire temporary nurses and caregivers. For nurses, we tend to use placement agencies, particularly in regional cities. However, for caregivers we have created a recruiting system that does not use them.
- For nurses, we concentrate on hiring people who have experience working at base hospitals and can be effective immediately. We screen rigorously, making offers to approximately 25%.



Note:

1. As of the latest date

## For the Foreseeable Future, Prioritize Development of the Ishinkan Business



- First Plan: As a pioneer in the hospice business, accelerate the development of the Ishinkan business. Leverage our first-mover advantage to establish a base of stable, long-term earnings.
- Second Plan: Establish businesses that have synergies with the Ishinkan Business. However, due to the impact of COVID-19, progress in the business has been delayed and the timing of monetization will be 2026 or later.

## **Medium- to Long-Term Vision**

- 1 Establish the hospice business (Ishinkan business) as a base of stable, long-term earnings.
- 2 Become a leading company in the home medical and nursing care domain and create new trends in the medical and welfare fields.
- Become the most exciting in the world and 100-year-prospering medical and healthcare company and make people happy.

# Action Plan 2014 2019 2026~ 2030 Ishinkan Business Development of the Business Expansion to 100 Ishinkan Facilities Growth

Regional
Healthcare
Revitalization
Business
(Ashitano Iryo)

Development of the Regional Healthcare Revitalization Business and Businesses that have synergies with the Ishinkan Business

Acceleration of Business Expansion



# 3. Appendix

# A High-Growth, High-Profit Business Model in the Hospice Business, Where Barriers to Entry Are High



### The Market Has Been Growing Supported by Social Issues

- ✓ A chronic- and terminal-stage medical infrastructure originated from the private sector in an era of changes of medical care from hospital-based to community-based.
- ✓ A social problem-solving business that benefits all three parties of patients, local communities, and hospitals/clinics.

#### High Barriers to Entry and Accumulated Operational Know-how

2

- ✓ With a novel paradigm of opening hospitals from which a physician's function is outsourced, we have established a management system of health care facilities that function as in-home hospital beds, mainly operated by nurses.
- ✓ In addition to the Tokyo metro area, where demand is high, we have successfully expanded regional cities, which have high barriers to entry.

#### High-Growth, High-Profit Business Model Backed by Strong Cash Generation

- ✓ Carefully-selected opening plans and high sales force enables early utilization rate increase and early realization of profit in the newly-opened facilities.
- ✓ Maintaining high utilization rates at existing facilities based on high hiring ability and operational ability and an appropriate personnel structure based on utilization rates.

# Improving Operational Profitability



## Thorough Efforts to Strengthen and Enhance the Operating Structure

- Establishment of a headquartersfocused management system without area managers and head of facility
- Concentration of primary corporate functions at headquarters (marketing, sales management, recruiting, human resources administration, consumables management)

Headquarters-Focused Management System

Hiring Capabilities

- Not hiring temporary nurses and caregivers
- Caregivers hired directly, rather than through placement agencies

- Careful site selection two years prior to opening based on market survey and other factors
- Conduct surveys of demand, local hospitals, physicians and difficulties in recruiting

**Opening Capabilities** 

Marketing Capabilities

- Most patients referred by medical professionals, with only a few through referral agencies
- Despite COVID-19, maintained and improved high utilization rates

## Ishinkan Opening Plan



- We plan to open 16 facilities (825 beds) in FY22, more than initially planned.
- Going forward, we will accelerate the formation of dominant areas in regions where we already have a presence mainly in the Tokyo metro area.

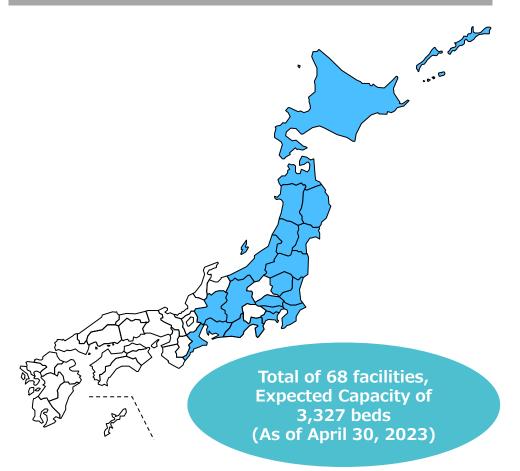
## **Recent Topics**

Sizuoka, and others	Accelerate expansion in Shizuoka (4 facilities)
Yagoto Minamiyama	Flagship facility in the Chukyo area

### **Opening Plans from January 2022**

Opening Date	Location	Total Beds <sup>(1)</sup>	
Feb. 2022	Yamato, Heiwadai	101	
Apr. 2022	Tsukuba, Joetsu, Minami Nagareyama	157	
June 2022	Shizuoka, Kikuna, Niigata III	153	
Aug. 2022	Inage	50	
Sep. 2022	Hirosaki	52	
Oct. 2022	Higashi Sapporo, Yokohama Nakayama, Chiba ekimae	171	
Nov. 2022	Sengawa, Fuji	99	
Dec. 2022	Numazu, Kasukabe	104	
Feb. 2023	Tsurugashima, Sakura	97	
Apr. 2023	Yagoto Minamiyama	54	

## **Ishinkan Nationwide**



#### Note:

1. Total beds is the sum of the capacities of multiple facilities

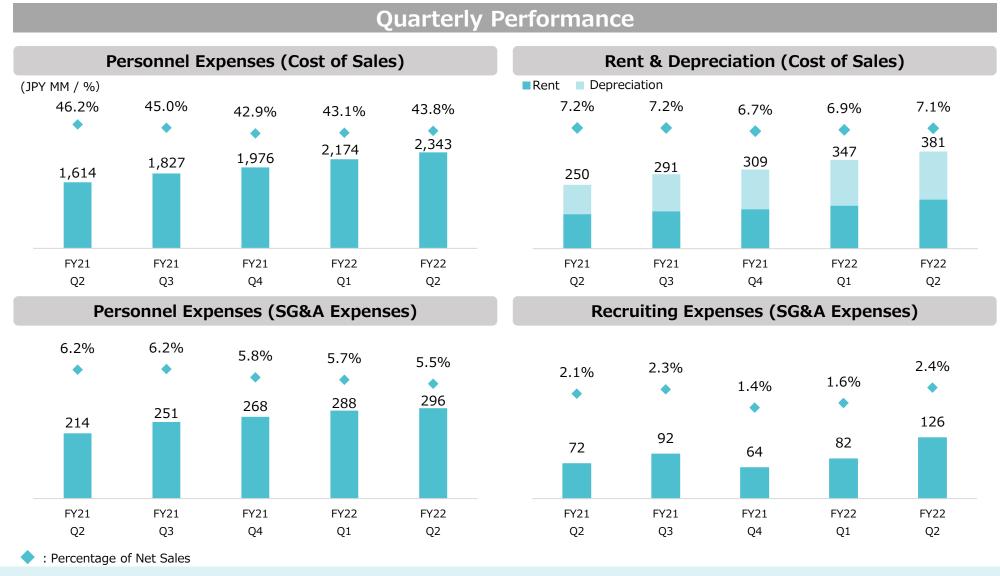
# Quarterly Performance: Key Financial Indicators





# Quarterly Performance: Major Costs of Sales, SG&A Expenses





# Summary of Balance Sheet / Cash Flow



## **Summary of Balance Sheet / Cash Flow**

(JPY MM / %)	FY20	FY21	FY22 1H	vs. FY21	(JPY MM)	FY20	FY21	FY22 1H
Assets	16,519	31,922	36,842	+15.4%	Cash flows from operating activities	1,165	2,584	1,857
Cash and Deposits	3,335	11,192	10,784	(3.6%)	Cash flows from investing activities	(5,304)	(5,780)	(4,021)
Buildings and Structures, Net	3,548	8,963	11,105	+23.9%	Purchse of Property, Plant and Equipment	(4,947)	(5,362)	(3,645)
Liabilities	11,264	15,580	18,732	+20.2%	Cash flows from financing activities	7,021	11,052	1,755
Borrowings	6,250	8,967	10,986	+22.5%	Net increase (decrease) in Borrowings	4,169	2,717	2,019
Net Assets	5,255	16,341	18,109	+10.8%	Net increase (decrease) in Cash and Cash Equivalents	2,882	7,856	(407)
Equity Ratio	31.8%	51.2%	49.2%	(2.0pt)	Cash and Cash Equivalents at the end of period	3,335	11,192	10,784

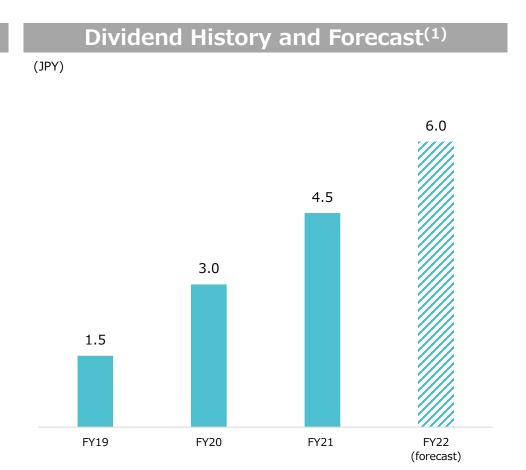
## Shareholder Return Policy



- In FY22, we plan to raise the dividend per share by JPY 1.5 compared with FY21.
- We will continue to enhance corporate value by considering the balance between the acceleration of growth and shareholder returns.

#### **Basic Policy on Shareholder Return**

- We consider the distribution of profits to shareholders to be a priority management issue. We aim to enhance our corporate value by returning profits to shareholders while securing internal reserves to expand the Ishinkan business as well as related businesses and to strengthen our management base.
  - Our basic policy is to distribute profits to shareholders through the stable payment of dividends paid once a year, by taking into account factors including the market environment, regulatory changes, and financial soundness.



#### Note:

<sup>1.</sup> The Company has implemented a 2-for-1 stock split on April 1, 2020 and a 2-for-1 stock split on January 1, 2022. Therefore, the dividend per share are calculated on the assumption that the stock splits had taken place at the beginning of FY2019.



# 4. Company Overview

# History



September 2013	Amvis, Inc. established in the city of Kuwana, Mie Prefecture to engage in home nursing care, home care, and ancillary businesses
May 2014	Relocated beds from a former hospital to a nursing home as Ishinkan Nabari in the city of Nabari, Mie Prefecture, commencing business under the Ishinkan model as a trial
August 2014	Opened Ishinkan Ama in the city of Ama, Aichi Prefecture.  Leased a newly established nursing home, the first facility to open under the Ishinkan model  Steady operating of Ishinkan facilities, centered on the Tokai region  2 facilities 42 beds
October 2016	Amvis Holdings, Inc. established in Yaesu, Chuo-ku, Tokyo through a stock transfer. Transitioned to a holding company structure, with Amvis, Inc. as a wholly owned subsidiary  Steady opening of Ishinkan facilities, centered on the Tokyo metropolitan area and Eastern Japan
October 2019	Amvis Holdings, Inc. listed on the JASDAQ (Standard) market of the  Tokyo Stock Exchange  Growing into a leading company in home medical and nursing care  20 facilities 841 beds
March 2020	Ashitano Iryo, Inc., whose name means "future medicine", established as a consolidated subsidiary to offer consulting on the management of medical institutions and care facilities  68 facilities 3,327 beds  April 2023 forecast



#### **Management Mission**

# Create a Vibrant, Happy Society through Medical and Health Care with an Ambitious Vision

Confront Social (Medical) Issues through Structural Innovation

#### **Business Mission**

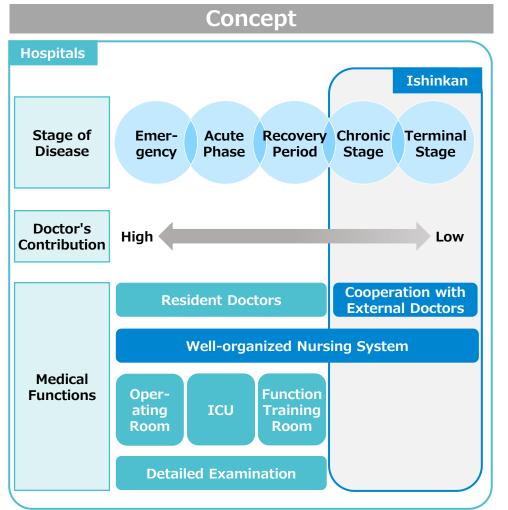
**Strengthen and Revitalize Regional Healthcare** 

Accept Patients with High Medical Dependency by Operating "Ishinkan" Hospices Specialized in Nursing and Care Services in Chronic and Terminal Stages

## Ishinkan Business Overview: Concept / Characteristics and Profit Structure



- Ishinkan is an original health care facility that functions as in-home hospital beds to focus on advanced nursing care (in corporation), with an outsourced physician's function.
- Ishinkan is a business that uniquely combines existing systems (nursing home business, home medical and nursing care business, in-home care support business).

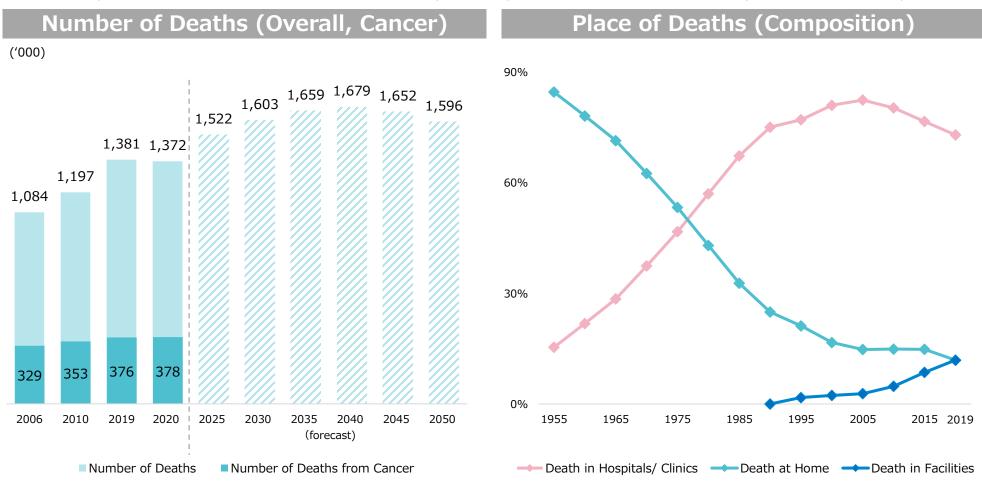


#### Characteristics Allocates nurses and caregivers commensurate Personnel with the number of patients structure Outsources services provided by doctors Patients in the chronic and terminal stages, including those who are in the terminal stage of cancer, on a respirator, have had a tracheostomy, **Target** or those with specified diseases patients Patients who are repeatedly in and out of hospital or who require end-of-life nursing and caregiving Trust-based and Earn trust from multiple medical institutions by collaborative accepting patients with high medical dependency Build cooperative relationships with physicians, relationship with without capital relationships (ensuring the medical professionals transparency of medical and nursing care) Profit Structure (Three-Tier Structure) · Home nursing care services provided by medical Sales from medical insurance Copayment rate at 10% to 30% in principle insurance Accounts for around 60% of net sales Units differentiated by degree of care required Sales from care and regional category Copayment rate at 10% to 30% in principle insurance Accounts for around 30% of net sales No lump-sum payments upon admission Sales from rent, 100% out of pocket expenses Items including food expenses and medical billed at cost consumables

# Environment Surrounding the Ishinkan Business



- Currently, 1.4 MM people pass away every year in Japan (with 400K people due to cancer) owing to the arrival of an aging and shrinking population.
- As a result of the government's policy shifts from hospital-based to community-based medical care, the number of hospital deaths peaked around 2005 and has been decreasing, with a gradual shift to deaths in nursing homes such as hospices.



Source: Vital Statistics of the Ministry of Health, Labour and Welfare and projection results based on medium-fertility/medium-mortality assumptions (including overseas nationals in Japan) of "Population Projections for Japan" by the National Institute of Population and Social Security Research

# Significance of the Ishinkan Business



• Ishinkan greatly contributes to regional medical care and local communities, because Ishinkan accepts patients with high medical dependency who have no other way to recuperate and encounters the policy of shortening of hospital stays and returning home.

### Places that Accept Patients after Discharge from Hospital



**Hospitals** 



**Patients** 

- The functionally focused policy of medical institutions tends to shorten the number of days of hospitalization.
- Hospitals want patients to move into a reliable care facility, but the number of places that accept patients with a high degree of medical dependency is highly limited.



#### **Primary Care Hospitals**

- Provide medical and nursing care services
- However, long-term hospitalization is also limited



#### **Ishinkan**

- Provide medical care, in addition to nursing and care services, in cooperation with physicians
- Reduce burden on family



#### **Patients' Homes**

- Provide home nursing and care services
- Place great physical and economic burden on the family



#### **Nursing Homes**

- · Provide care services
- In some cases, nursing systems are inadequate

# Difference in Number of Hospital Beds by Region

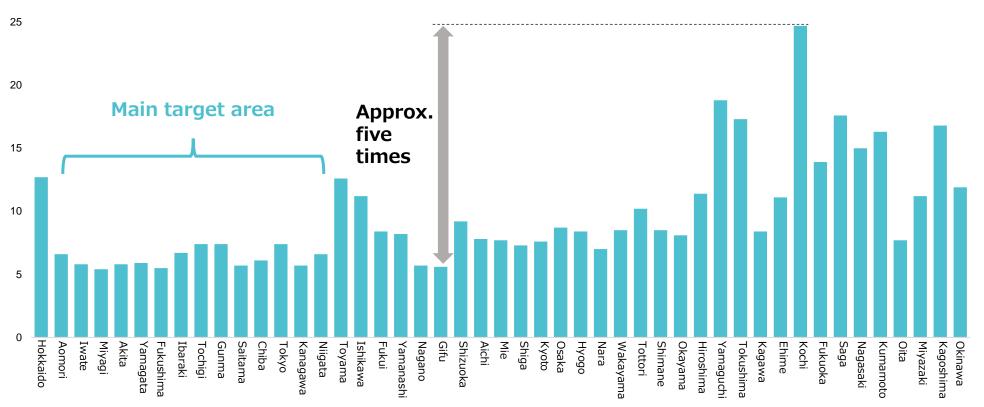
30



- As with the number of physicians and other hospital beds per population, the number of long-term care beds per elderly population tends to be low in Eastern Japan. Accordingly, we plan to open new facilities mainly in this region.
- We will conduct an intensive market survey before starting business to identify the gaps in regional health care needs. Then, we will open Ishinkan with distinct roles that match local needs.

#### Distribution of Long-Term Care Beds by Region per Thousand People Aged 65 or Older





Source: "Population Estimate" by the Ministry of Internal Affairs and Communications and "Survey of Medical Institutions" by the Ministry of Health, Labour and Welfare, October 2019

#### Ishinkan as a Platform



- Ishinkan is a social problem-solving business that benefits all three parties of patients, local communities, and hospitals/clinics.
- We intend to become an indispensable platform that supports regional medical care by meeting the medical needs of each region.

## Ishinkan as a Platform Supporting Regional Medical Care



Accept patients who are highly dependent on medical care with no other way to recuperate

Adjust discharge destinations, shorten hospital stays, reduce hospital fatigue, boost profitability





**Hospitals** 

Patients and their families

Use Ishinkan

Assess Ishinkan

医・让館

Introduce patients

Provide instructions to nurses as well as patient liaisons and introductions



Curb healthcare costs and alleviate regional disparities in healthcare

Provide shared hospital beds





**Physicians** 

# Sustainability Management



1) Response to Social Issues / Environmental Preservation

Human Resources

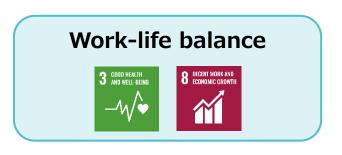
Compliance / Governance

# Contribution to society 8 DECENTIONER AND ECONOMIC GROWTH 11 SANSAINABLE CITIES AND COMMANDITES

















# Sustainability Management: Response to Social Issues / Environmental Preservation



### Category

## **Major Initiatives**

# Contribution to society

- Increase the number of new patients and expand the base of patients by promoting the Ishinkan business model.
  - ✓ Conduct individual tours of medical institutions, home care support offices, and community general support centers.
- Create regional employment by opening 10 or more new facilities each year.
  - ✓ Employees at each location are residents of that region.
  - ✓ Rather than using temporary staffing agencies, we employ nurses and caregivers as full-time or part-time employees.

# Contribution to regional healthcare

- Help shorten stays at medical institutions and reduce the burden on regional healthcare.
  - ✓ Participate in study groups on regional care councils and the regional home healthcare system to understand and help resolve problems in each region.
- Serve as a landing point for healthcare refugees.
  - ✓ By acting as a facility that provides medical care after discharge from the hospital, contribute to the realization of comprehensive community care.
  - ✓ In FY22 1H, we provided end-of-life care to 1,841 patients.

# Resource considerations

- Transition away from paper.
  - ✓ Introduce cloud-based accounting system and electronic contracts system, and promote compliance with the Law Concerning Preservation of National Tax Records in Electronic Form, which was revised in 2021.
- · Help reduce food losses.
  - ✓ Introduce a cook-chill system for meals provided at facilities.

# Sustainability Management: Human Resources



### Category

## Major Initiatives

#### **Diversity**

- We build an organizational structure where female can play an active role.
  - ✓ Percentage of female: ~85%/~80%/~40% (all employees/managers/management council)
- We aim to create an environment where nurses of all ages can work and provide a workplace to a reserve for potential nurses.
- We are promoting the employment of people with disabilities and encouraging diversity.

#### Work-life balance

- Headquarters tracks the overtime hours of all employees, including those at facilities. When
  overtime hours are high, we periodically meet with these employees and their superiors to
  discuss countermeasures.
- (Only at headquarters) We have created remote working and flextime systems to facilitate flexible working during the COVID-19 pandemic.
- We strive to provide a comfortable and rewarding workplace by conducting orientations for new hires and prior to facility openings, interviewing employees (face to face and online), and conducting post-hiring and pre-resignation surveys.

# Development of abilities

- We conduct new-employee and nursing leader training. We also subsidize tuition and exam fees to help employees acquire necessary certifications.
  - ✓ New employees: Orientation for new hires and at facility openings, on-site OJT, on-site training
  - ✓ Nursing leaders: On-site training (around one month), leader education program, multidisciplinary education and training (compliance/infection), leader meetings, telephone/web follow-up systems

# Sustainability Management: Compliance / Governance



#### Category

## **Major Initiatives**

# Compliance promotion structure

- Foster a thorough understanding of legal interpretations and insider-related content.
  - ✓ Regularly administer tests to all staff to assess their understanding of abuse and physical restraint.
  - ✓ Insider-related training is provided upon joining the company. IR section staff provide explanations directly during new facility openings.
- By outsourcing physicians, ensure transparency and fairness in the business.

#### **Hotline system**

- Establish a system that facilitates consultations both inside and outside the company.
  - ✓ Internal: An internal hotline (consultation desk) has been set up within the nursing and care department at headquarters. Depending on the situation, this desk may provide guidance to sites, contact leaders, conduct interviews, or implement improvements.
  - ✓ External: We have set up an internal reporting system that offers direct access to outside attorneys.

#### **Others**

- Establish a system for the disclosure of personal information.
- Put in place a system to prevent transactions and immediately terminate contracts with antisocial forces.
- To ensure fair transactions, require approval for any gift or entertainment, regardless of monetary amount.

### Disclaimer



This document contains forward-looking statements about Amvis Holdings, Inc. ("Amvis") such as forecasts, outlooks, targets, and plans. These statements are based on forecasts made at the time of the preparation of this document using information currently available to Amvis.

In addition, certain assumptions are used for such statements. These statements or assumptions are subjective and may prove inaccurate in the future or may not be realized. There are many uncertainties and risks that could cause such a situation to arise.

As stated above, the forward-looking information contained in this document is current as of the date of this document, and Amvis is under no obligation or policy to update such information from time to time.

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