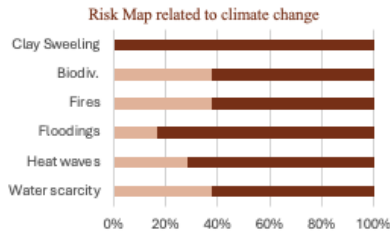




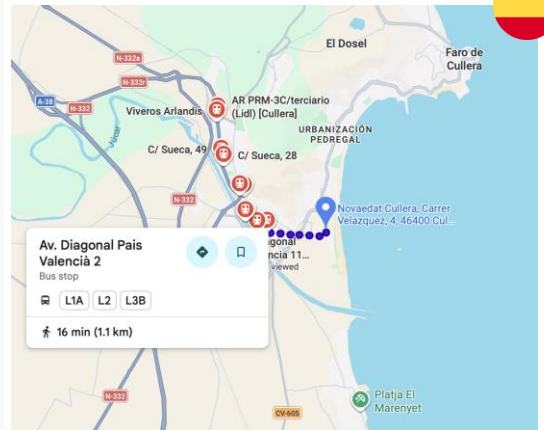
Novaedat CU



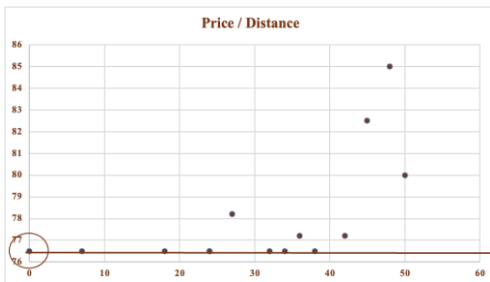
ADDRESS
Carrer Velazquez, 4, 46400
Cullera, Valencia, Spain
TYPE
Nursing home,
Triple-storey building,

TRANSPORTS
Bus à 1.1km
Train: 3,1 km
Borne E: 2
Bike storage: done

SURFACE:
120 Beds
B: 5997 sqm
G: 361,69 sqm



Affordable and Social Offers



■ Social Beds ■ Total Beds

Affordability

- Regional Average price: 78,12 euros in an area of 50 kms
- Average price of accommodation: 77 euros for 47 residents at Dec. 2025
- Tariffs / Repartition of the population regarding prices:

	Level I	Level II	Level III
Price Single Room	78,68	84,55	93,4
Price Double Room	70,68	80,55	90,41
% Population	3% 2%	5% 36%	0% 2%

Final ratio: 25%

Social

The current operator choice is a 100% private value proposition. Negotiations with the Valencia region are scheduled for the end of 2026, and the allocation could be revised. Novaedat Cullera is positioned as a mid- to high-tier facility.

Final ratio: 0%

Green Building

	Intensity	Benchk	Trend(n-1)
Energy Consumption(kWh.sqm.y)	42.5	142	--
Renewable Energie - FV (%)	16.4%	--	--
EPC	A	--	=
GHG ((kgCO ₂ eq.sqm.y)	4.4	30	--
Water Consumption (m ³ .sqm.y)	1.21	1.26	--
Wastes Management (kg.sqm.y)	26.56	--	--
Biodiversity Surface	21,2%	--	--
TNFD Achievement	1	--	--

Energy Mix



Waste MGMT: The region has achieved 60% coverage for waste sorting (cardboard, glass, plastic, etc.), and the facility has a contract in place for hazardous waste treatment.

Eco-innovatives: The asset has a 1/3 rating under the TNFD standard. The main focus is on increasing vegetation in the garden. Added, deployment of the Bikes storage and EV Charger





Community Achievements

Activities Plan

- This center follows a "living units" model, where residents are organized into groups based on similar cognitive levels, interests, and relationship styles to ensure personalized care.
- The program's primary goal is to improve the quality of life for residents by strengthening physical and cognitive abilities, preventing boredom, and encouraging social integration both within the center and the wider community
- **High Engagement:** The program achieved a 91% general participation rate and a 99.37% activity adherence rate
- **Progressive Growth:** Participation rose steadily from 56.3% in September to 92.4% in November as residents adapted to the new facility
- **Interdisciplinary Approach:** The Sociocultural Animation Technician (TASOC) collaborates closely with psychologists, physiotherapists, and occupational therapists to integrate leisure with rehabilitation.

List of activities

- **Ludotherapy:** Includes board and group games, as well as various forms of Bingo (traditional, visual, or musical) to improve memory and social skills.
- **Handicraft Workshops:** Focused on fine motor skills and creativity, often related to seasonal decorations or local festivities like *Fallas*.
- **Video-forum / Cinema:** Screenings of classic films, documentaries, or musical concerts followed by group discussion to stimulate critical thinking and memory.
- **Individualised Attention: Personalised** sessions (reading, guided conversation, sensory stimulation) for residents who may not benefit from group dynamics.
- **Extraordinary Activities & Outings:** Walking tours of the local municipality and visits to public squares to maintain community links and physical mobility
- **Rehabilitation Support:** Collaborative sessions for psychomotricity, memory workshops, and music/dance therapy with the "KARA 8T" group.
- **Family and Community Relations:** Activities using new technologies and social events to strengthen bonds with loved ones



Quality Achievement

	N	(N-1)
Quality Audit Score	100%	5
Community Spaces	18,11%	–
Ratio of Claims	0,83%	–
Ratio of Severe Advert Event	0%	–
Satisfaction Survey	–	–
Hygiene Compliance	100%	–
Organisation Compliance	100%	¹ –

During the reference visit in 2025, after a few months of operations, the teams were progressively taking ownership of the practices and equipment within the facility. With support from headquarters and the Quality Director, procedures are already being implemented. The expected standards in terms of care and resident safety are in place.

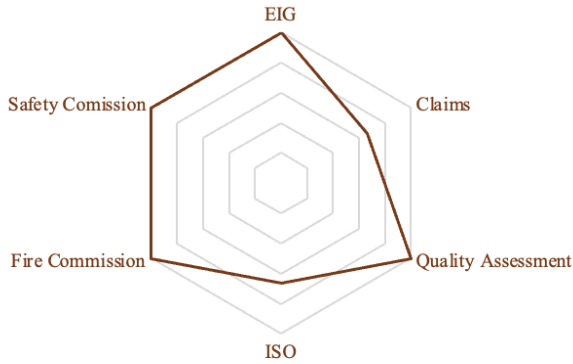
One complaint was raised regarding the portion sizes of the meals served (considered too small). The first Residents' Council meeting was held with families, and the ramp-up phase is continuing, with a temporary plateau during the winter period due to seasonal infectious outbreaks.



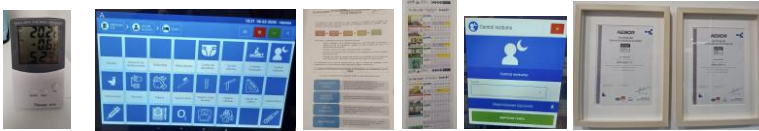
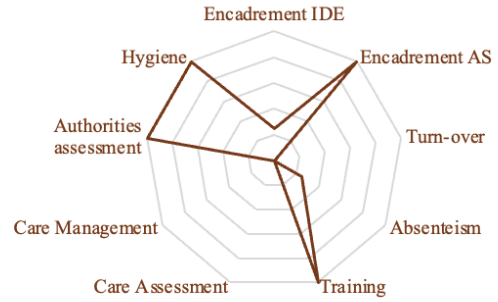


Quality And Care

Quality Assessment - 2025



Care Assessment - 2025

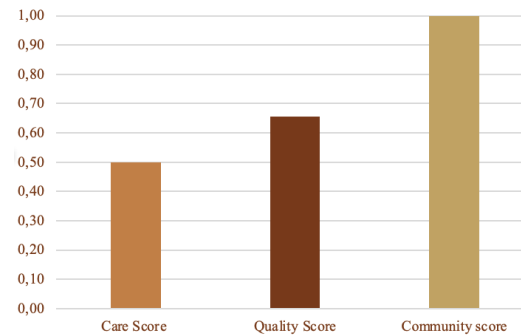


Reputational Risk

The asset is part of a group selected following an assessment against Novaedat’s Quality and Care standards. The teams have been recruited, and procedures are being implemented. The final certification of the asset is scheduled for May. Quality audits have been conducted. Staff turnover is not being monitored, and team stabilisation is underway. Next audit is scheduled in 05.2026.

Global MoZaic Quality & Care Score (QCS/100): 72

2025 Scores



Governance



The asset completed its BREEAM ES New Construction certification in May 2024, achieving three main scores: Management (90%), Energy (>70%), and Land Use & Pollution (>90%). and an overall score “Muy Bueno”.

BREEAM Score (QCS/100): 64.84%



XXX

ISR Score: --



The tenant’s Quality policy includes the certification of all its assets. Novaedat Cullera currently benefits from the Group’s certification covering the body of procedures managed by headquarters. The implementation of procedures and team training is underway. Asset-level certification is scheduled for 2026, ahead of the authorities’ audit visit (November 2026).

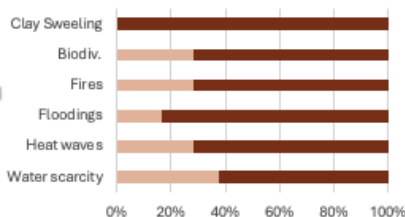
ISO Score | HAS | Regional Audit: B¹



Novaedat VU



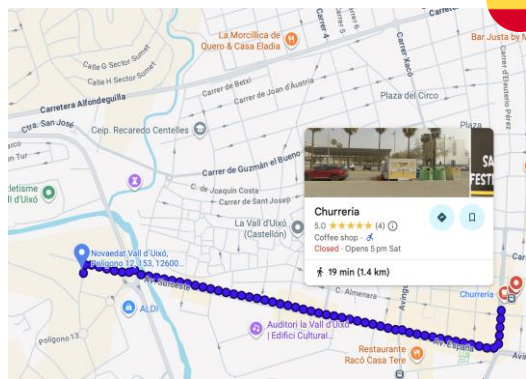
Risks Map related to Climate change



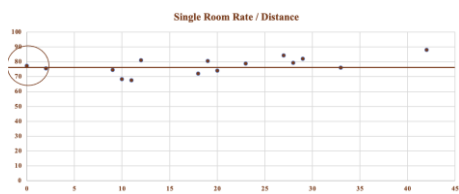
ADDRESS
Polígono 12, 153, 12600 La Vall d'Uixó, Castelló, Spain

TYPE
Nursing home,
Triple-storey building,

TRANSPORTS
Bus à 1,1km
Train : 8,2 km
Borne E: 2
SURFACE
120 Beds
B: 5711 sqm
G: 754.45 sqm



Affordable and Social Offers



■ Social Beds ■ Total Beds

Affordability

- Regional Average price: 78.1 euros in an area of 50 km
- Average price of accommodation: 73.00 euros for an occupancy rate of 77.96%
- Tariffs / Repartition of the population regarding prices:

	Single Room	Double Room
Price	78,68	70,68
Beds	30	45
Public Beds (Municipality)	25	

Final ratio: 46 %

Social

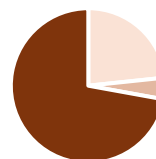
Type of subsidy: The asset includes 25 beds dedicated to local residents, funded by the city's social services. Negotiations regarding public subsidies are scheduled to begin in the fourth quarter of 2026.

Final ratio: 20,8%

Green Building

	Intensity	Benchk	Trend(n-1)
Energy Consumption(kWh.sqm.y)	32.4	142	--
Renewable Energie - FV (%)	4,5	--	--
EPC	A	--	=
GHG ((kgCO ₂ eq.sqm.y)	6.4	30	--
Water Consumption (m ³ .sqm.y)	1.6	1.26	--
Wastes Management (kg.y)	--	--	--
Biodiversity Surface	20 968	--	--
TNFD Achievement	3	--	--

Energy Mix



■ Electricity ■ Renewables ■ Gas





Community Achievements

HQ Policy and organisation

Activities Plan

- Energy Efficiency: Currently finalising the implementation of the Building Management System (BMS), with tenant negotiations ongoing.
- Asset Preservation: Successfully renewed the facility's safety and security compliance certifications.
- Capacity Expansion: Increased facility capacity through the creation of a specialised 11-place unit (PASA), supported by one additional qualified full-time equivalent (FTE) staff member.
- Management performance: difficulty in stabilising the turn over and the absenteeism
- Social & community: maintain high-quality and care services with customer' satisfaction



Activity 2

- Energy Efficiency: Finalised boiler replacement works; currently finalising the signature of an Energy Performance Contract (EPC) to meet energy consumption reduction targets.
- Asset Preservation: Refurbishment plan for gutters and channels scheduled for Q1 2026. Installation of the EV Charger is complete.
- Management Performance: Successfully stabilised headcount and achieved overhead reductions through optimised HR management.
- Social & Community: The 2025 ESG compliance report indicates significant progress by the management team, reflected in a Quality & Care score, HAS (Haute Autorité de Santé) Certification in A and customer satisfaction.



Activity 3:

- Energy Efficiency: Completed the full replacement of convectors
- Asset Preservation: Refurbishment of terraces has been rescheduled to Q2 2026 due to adverse weather conditions. Secured approval and initiated preparatory works for the drainage and irrigation zone
- Occupancy & Competition: Occupancy rates are currently affected by private-sector competitors implementing aggressive price-reduction strategies (PMH).
- Management Performance: 2025 ESG compliance report highlights significant progress by the management team.



New Activity:

- Energy Efficiency: Scheduled the renovation of the hot water production, HVAC systems, and networks for 2026.
- Asset Preservation: Initiated the final phase of the facade renovation project.
- Occupancy & Competition: Maintained a stable 100% occupancy rate, supported by a unique healthcare offering at the regional level.
- Management Performance: high quality and care evaluation confirmed by a HAS certification in level A.



Quality Achievement

	N	(N-1)
Quality Audit Score	–	–
Community Spaces		–
Ratio of Claims	0	–
Ratio of Severe Advert Event	0	–
Satisfaction Survey	–	–
Hygiene Compliance	100%	–
Organisation Compliance	100%	–

The facility is currently in a ramp-up phase, with a full staff in place and the Quality & Care processes in the implementation stage. 2026 will mark the first year of internal audits, supported by headquarters and the Quality Director. The expected standards for care and resident safety are already established.

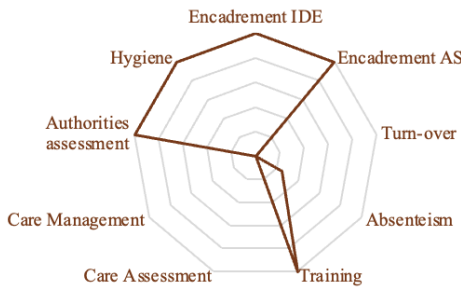
With no complaints or adverse events to date, the staff organises the facility by resident level, enabling both safety and personalised follow-up for each individual.



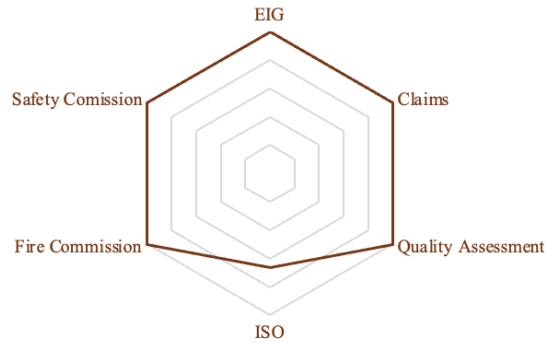


Quality And Care

Care Assessment - 2025



Quality Assessment - 2025

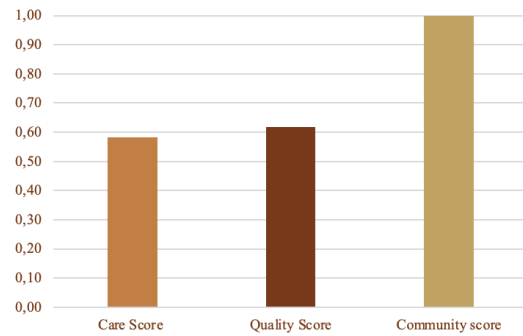


Reputational Risk

The asset has been in a ramp-up phase since May 2025 and experienced a rapid integration of residents following regional events that required temporary relocation capacity. The operator is currently implementing its processes within the teams. It should be noted that HR monitoring is not yet complete, and a care audit is scheduled for 2026. ISO certification is planned for November 2026.

Global MoZaic Quality & Care Score (QCS/100): 72

2025 Scores



Governance

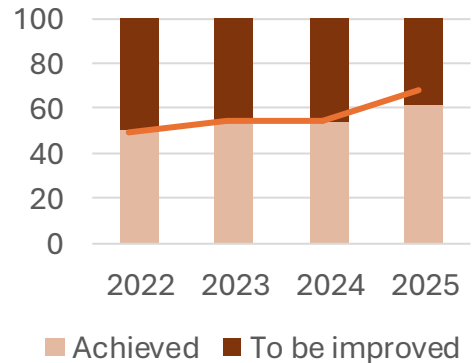


The facility was delivered in 2025, and its BREEAM certification was conducted and monitored by BRE, with strong performance in environmental stewardship, material selection, and project management, achieving scores above 70 in each category..

BREEAM Score (QCS/100): 55.01



--
ISR Score: --



The tenant's Quality policy includes the certification of all its assets. Novaedat Cullera currently benefits from the Group's certification covering the body of procedures managed by headquarters. The implementation of procedures and team training is underway. Asset-level certification is scheduled for 2026, ahead of the authorities' audit visit (November 2026).

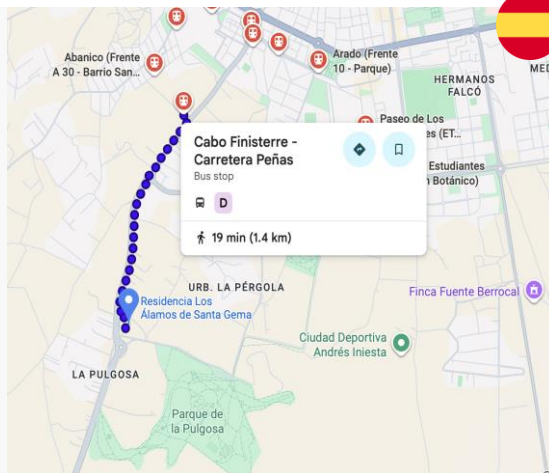
ISO Score | HAS | Regional Audit: B



Residencia AaV - Los Álamos

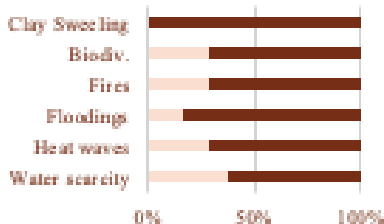


ADDRESS
 Km 2, CM-3203, 02006
 Albacete, Spain
TYPE
 Nursing home,
 Early disabled
 Two-storey building,

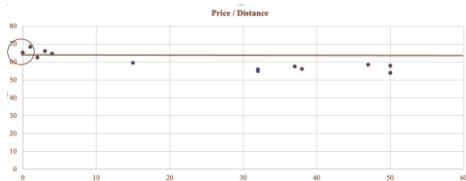


TRANSPORTS
 Bus à 1.4 km
 Train: Albacete
 Borne E: 5
SURFACE
 183 Beds
B: 8879 sqm
G: 20414 sqm

Risks related to Climate Risks



Affordable and Social Offers



- Social Beds - Total Beds

Affordability

- Regional Average price: 59,72 euros in an area of 50 kms
- Average price of accommodation: 67,69 euros
- Tariffs / Repartition of the population regarding prices:

	Pública JCCM	Privada AB	FSCLM	CADIG JCCM	CADIG Privado
Price (euros)	54,53	70,47	46	73,29	45,87
% Population	112	38	24	25	2

Final ratio: 72 %

Social

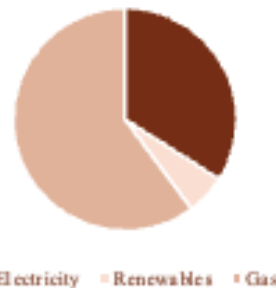
Type of subsidy: The Albacete region has historically negotiated dedicated beds at social rates, and the region has authorised an extension dedicated to the ageing disabled. All beds are free for residents.

Final ratio: 72 %

Green Building

	Intensity	Benchk	Trend(n-1)
Energy Consumption(kWh.sqm.y)	146.9	142	-
Renewable Energie – FV (kWh.sqm.y)	5.8%	-	+
EPC	C	-	=
GHG ((kgCO ₂ eq.sqm.y)	25.7	30	-
Water Consumption (m ³ .y)	1.48	1.26	=
Wastes Management (kg.sqm.y)	38.58	12.54	+
Biodiversity Surface	100%+	100%+	=
TNFD Achievement	3	-	3

Energy Mix



Waste MGMT: The asset has achieved 24.93% coverage for waste sorting (cardboard, glass, plastic, etc.), and improved its treatment to differentiate wastes. The increase is due to works

Eco-initiatives: The asset has improved the garden in line with BREEAM recommendations.





Community Achievements

Activities Plan

The 2025 Activity Annex for the Los Álamos de Santa Gema residence provides a detailed schedule and evidence of the Occupational Therapy Service's annual programming. The document catalogs a structured routine of cognitive and functional stimulation, ranging from memory and language workshops to fine motor skill exercises. Additionally, it documents various social and cultural events, such as movie forums and board game sessions, designed to reinforce residents' emotional well-being and community integration.

Occupational Therapy Service

The Occupational Therapy Service's 2025 activity report for the Los Álamos de Santa Gema residence outlines a comprehensive, person-centred intervention strategy focused on maintaining resident autonomy and quality of life. While the program successfully engaged 60-70 residents in diverse cognitive, functional, and social activities, it faced significant operational challenges due to limited physical space and large rooms for group or family events. Despite these constraints, the service achieved high resident satisfaction, particularly through social and leisure-based workshops, and plans to further individualise treatments and expand community-based activities in the coming year.

Social and Leisure-Based Dynamics

Activities involve socialization, such as board games (Bingo, Parcheesi, cards) and group dynamics, are among the most highly valued by residents

Cultural and Audiovisual Workshops

The "Cineforum" (movie forum) and other group cultural workshops have been identified as particularly motivating and significant for the participants.

Outdoor and Community Activities

Therapeutic walks and outdoor excursions are noted for providing a positive impact on the residents' emotional state and sense of belonging

Festive and Extraordinary Events

Major celebrations such as "Día de los Reyes Magos" (Three Kings Day), "San Valentín" (Valentine's Day), and the "Feria de Albacete" show high levels of engagement and preparation.

Creative and Seasonal Crafts

The creation of seasonal decorations (Summer material, Spring decorations, Christmas material) is a core part of the successful occupational workshops, fostering a sense of purpose and holiday spirit.

PROGRAMACIÓN ANUAL DE
ACTIVIDADES
TERAPIA OCUPACIONAL
RESIDENCIA LOS ÁLAMOS DE SANTA
GEMMA
AÑO 2025



aprende
a vivir

MEMORIA DE
ACTIVIDADES

AÑO 2025

SERVICIO DE TERAPIA
OCUPACIONAL

Residencia de Personas Mayores Aprende a Vivir - Los Álamos de Santa Gema



Quality Achievement

	N	N-1
Quality Audit Score	100%	100%
ISO Certification	A	A
Ratio of Claims	14 772	NA
Ratio of Severe Advert Event	0.00%	0.00%
Satisfaction Survey	66	60
Hygiene Compliance	100%	100%
Organisation Compliance	100%	¹ 100%

The **Residencia Los Álamos de Santa Gemma** has officially achieved double quality certification under the international **ISO 9001:2015** standard and the Spanish sectoral **UNE 158101:2015** standard. These certifications guarantee that the facility adheres to rigorous protocols for residential management, including specialized medical, psychological, and social care for both dependent and non-dependent individuals.

Valid until **August 31, 2028**, the certificates demonstrate a long-term commitment to operational excellence, resident safety, and continuous service improvement. Ultimately, this means the center is independently recognized for maintaining high professional standards across all its health and hospitality services.

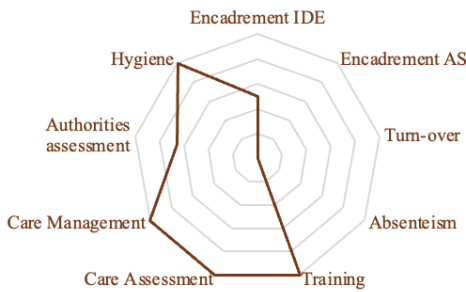
Overall satisfaction remains high, particularly regarding cleanliness and general facilities, which consistently received scores above 4 out of 5 across the centers. However, the data highlights a need for improvement in the variety and quality of food at the Los Álamos and CADIG sites.



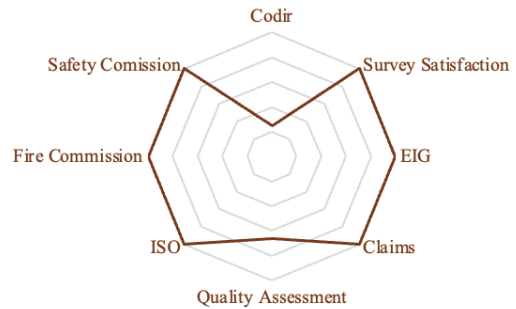


Quality And Care

Care Assessment - 2025



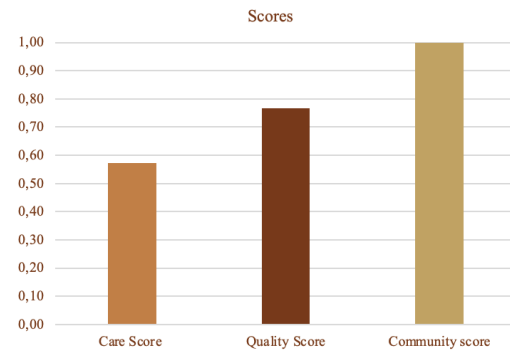
Quality Assessment - 2025



Reputational Risk

The inspection of the Los Alamos Santa Gemma residence in Albacete confirmed that, while the facility generally maintains appropriate services, such as proper catering and social activities, several operational deficiencies were identified in documentation and clinical protocols. Key issues included an unsigned medical prescription for a resident's restraint, a discrepancy in a resident's postural change records, and a conflict between the residency contract and internal regulations regarding the cost of basic services. Difficulties in stabilising both staff and management, combined with a low staffing ratio, added to the challenge.

Global MoZaic Quality & Care Score (QCS/100): 73



Governance



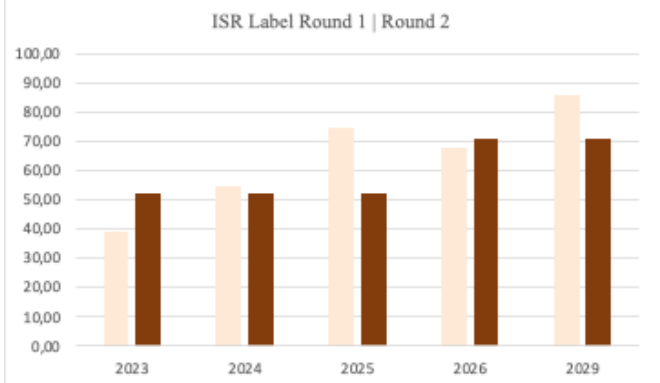
Based on the progress of the measures already implemented, the documentation reviewed, and the documentation still pending receipt, an adjustment to the strategy has been made, taking into account the building's current status. Compared with the measures updated in the 4th revision, the score has increased by 3.55%, reflecting the measures implemented and the documentation reviewed or pending review. The updated strategy reaches, the "Very Good" rating (55%).

BREEAM Score (QCS/100): 61.01%



"The facility and its new operator have made significant integration efforts, as highlighted by both ISO audits and audits conducted by local and regional authorities. The Social (S) pillar meets all expectations and has enabled the facility to achieve a 'Best in Class' score. Under the new assessment framework, the fund's management will place greater emphasis on performance across the label's key priority areas, namely energy efficiency and carbon impact.

ISR Score: C1 | 74.8 – C2 | 68.00



The facility renewed its ISO certification for 2025 without any particular observations, and its processes as well as its Quality audits are being progressively implemented.

ISO Score | HAS | Regional Audit: A



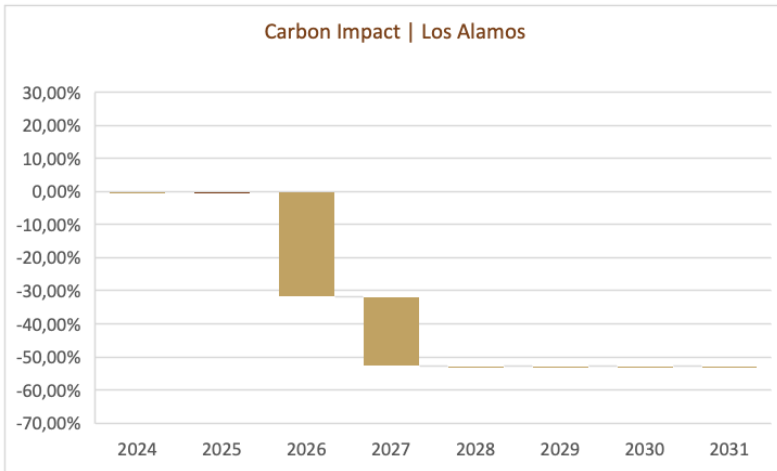


Transition Plan

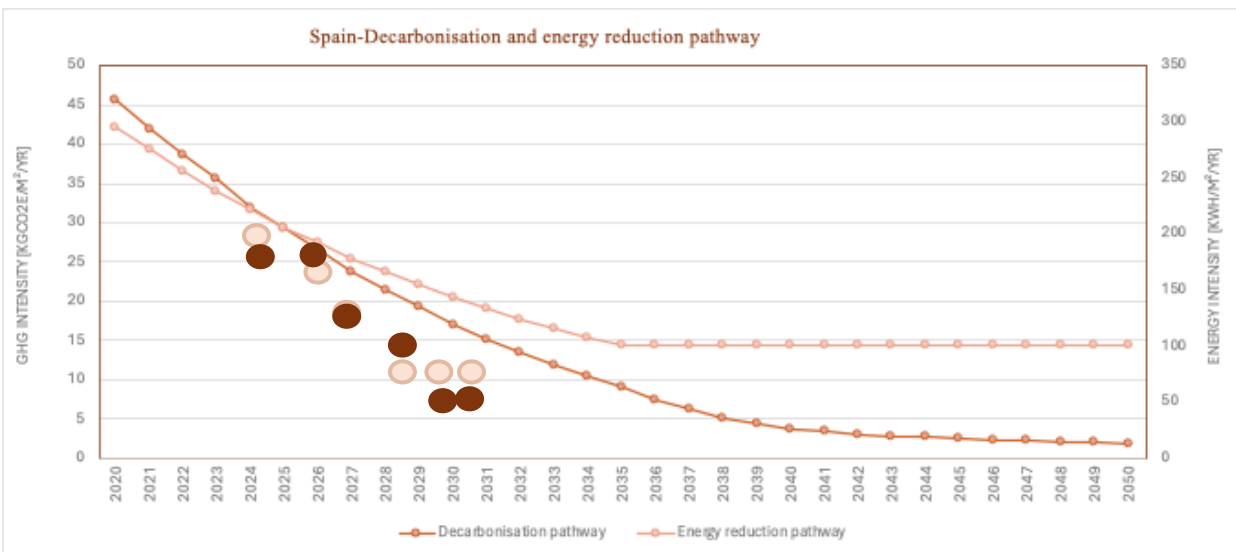
- ✓ Refurbishment
- ✓ Solar Panel X2 Surface
- ✓ BMS (Building Management System) upgrade
- ✓ Industrial refrigeration units – Kitchen
- ✓ New Splits Air Conditioning
- ✓ Air conditioning system
- ✓ Indoor Air Quality Monitoring and Management



Waterfall Chart GHG Impact



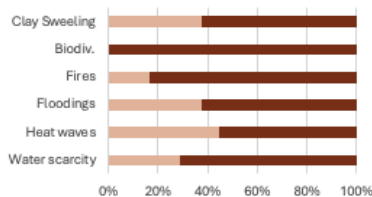
CREEM Trajectory



Inicea Les Alcides



Risk Map related to climate change



ADDRESS

quartier veiranne, 812 Chem. du Polygone, 13250 Saint-Chamas, France

TYPE

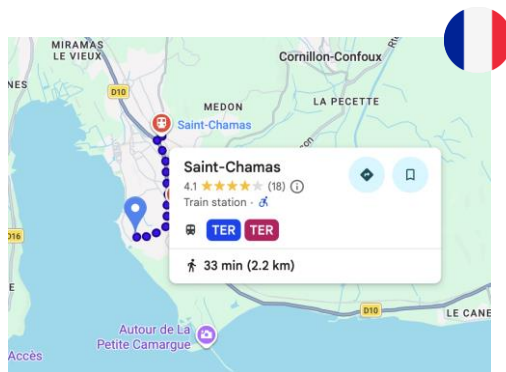
Nursing home, MAS
Double-storey building,

TRANSPORTS

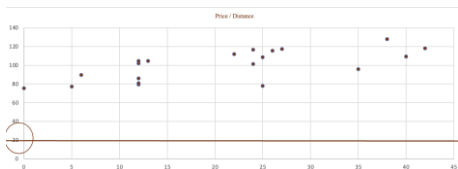
Bus à 1,2 km
Train: 2,2 km
Borne E: 4

SURFACE

104 Beds
B: 5070 sqm
G: 19n292 sqm



Affordable and Social Offers



■ Social Beds ■ Total Beds

Affordability

- Regional Average price: 99,9 euros in an area of 42 km
- Average price of accommodation: 20 euros (amount payable by the individual (after reimbursement/coverage)
- Tariffs / Repartition of the population regarding prices:

	MAS	Public Foyer de vie	Private FDV
Price (euros)	243.72	189.0	152.33
% Population	22%	38%	40%

Final ratio: 100%

Social

Type of subsidy: Assistance and insurance schemes for individuals with acquired brain injuries (ABI) and Conseil General subsidies for people in the Foyer de Vie
Final ratio: 38 %

Green Building

	Intensity	Benchk	Trend(n-1)
Energy Consumption(kWh.sqm.y)	135.2	235	-
Renewable Energie (kWh.sqm.y)	0.0	-	--
EPC	C	-	=
GHG ((kgCO ₂ eq.sqm.y)	22.2	30.6	-
Water Consumption (m ³ .sqm.y)	2.56	1.78	=
Wastes Management (kg.sqm.y)	7.64	-	-
Biodiversity Surface	89.16%	-	=
TNFD Achievement	2	-	--

Energy Mix



• Electricity • Gas • Fuel





Community Achievements

Based on the last report there is a **strong commitment to resident well-being and social inclusion**, balanced by a structured, professional approach to quality management. The team expresses a clear desire to "open up to the outside world" and successfully maintains high participation through diverse, personalized programming.

Daily Life Activities (AVQ)

Educational Grooming: Tailored to autonomy levels; used as a time for listening and expression.

Domestic Tasks: Residents are encouraged to tidy their rooms, manage laundry, fold napkins, and set tables.

Culinary Workshops: Preparation of "homemade" snacks shared in the common lounge.

Creative Arts: Includes painting, drawing, and manual creations.

Music and Dance: Activities like hip-hop and choir.

Sport and Well-being

Physical Activities: Adapted Physical Activity (APA), swimming, cycling, walking, and muscle awakening.

Relaxation: Snoezelen (multisensory environment), "musicare," massage, and "well-being" baths.

Aesthetics: Beauty treatments and intervention by a professional hairdresser once a month

Culture, Media, and Outings

Media: Engagement with radio, TV, cinema, the press, and multimedia.

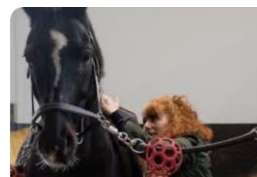
Outings: External trips, including concerts and summer festivals, often supported by staff outside of regular hours

Social and Cognitive Activities

Interactions: Board games, card games, and celebrating birthdays.

Cerebral Activities: Reading the newspaper and theater.

Affective Life: New partnerships with external midwives (Handigynéco) to provide gynecological follow-ups and sessions on romantic relationships and consent



Quality Achievement

	N	N-1
Quality Audit Score	95%	97.7%
Community Spaces	18.43%	=
Ratio of Claims	0.0	1.92
Ratio of Severe Advert Event	3.92	0.0
Satisfaction Survey	40	40
Hygiene Compliance	100%	100%
Organisation Compliance	100%	100%

The auto-evaluation and external audit scores (on a scale of 4) for key domains include:

•**Rights and Freedom:** The facility achieved a perfect score of 4/4 for the rights, expression, and participation of the persons accompanied.

•**Care and Health:** The "Accompagnement à la santé" (Health Support) received a maximum score of 4/4.

•**Individualized Support:** Both the co-construction/personalization of projects and support for autonomy were rated at 4/4.

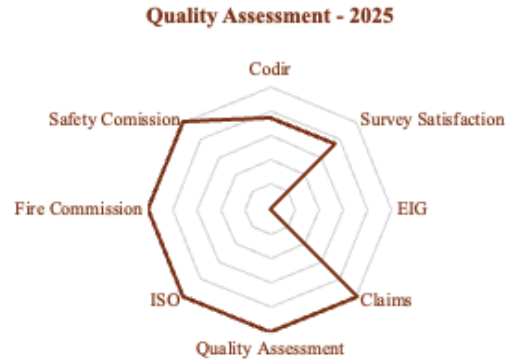
•**Ethics and Benevolence:** This area remains very strong but shows a slight margin for discussion with scores ranging from 3.75/4 to 3.92/4 across different sub-criteria.

•**Management and HR:** The facility maintains a 4/4 for its Human Resources policy and quality/risk management strategy.





Quality And Care



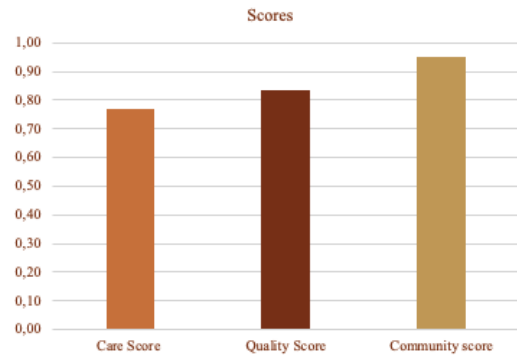
Reputational Risk

The management board (CODIR) has appointed a new Executive Director to lead the facility's strategic transition. Turnover remains low and stable compared with previous years, and absenteeism is limited.

A rigorous monitoring system is in place. In 2025, four incidents were recorded and managed (drug dealing by a resident, alcohol consumption by a resident, one suicide attempt involving the resident, and a violent patient without prior clinical briefing).

The facility's staffing levels comply with internal benchmarks, national regulatory requirements, and the standards of MoZaiC Asset Management.

Global MoZaic Quality & Care Score (QCS/100): 87



Governance



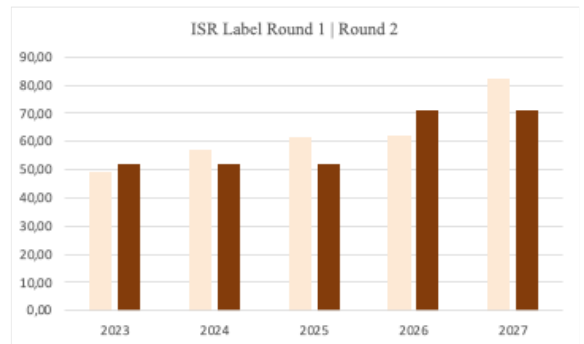
The certification of the structure under the **BREEAM** standard has been postponed to 2027 due to a substantial refurbishment plan covering both exterior and interior works, including a complete replacement of the facility's equipment. This renovation is expected to improve the building's rating and residents' quality of life. It has already been well-received and appreciated by both staff and patients. The CO₂ and CO sensors have been delivered and installed, the bicycle shelter can be dispatched and the EV stations have been received.

BREEAM Score (QCS/100): --



The asset achieved 'Best in Class' status during the first certification cycle, driven by strong performance on the Social (S) pillar. In 2026, changes to the assessment framework—aimed at promoting strategies focused on energy performance and carbon impact in line with the label's priority objectives—resulted in the asset receiving a score of 62.00. A significant CAPEX transition plan for 2026–2027 is expected to increase this score beyond 70–80 points.

ISR Score: C1 | 61.6 – C2 | 62.00



The asset and its teams fully meet 100% of the requirements set by the authorities and by **Haute Autorité de Santé**. No areas for improvement have been identified.

ISO Score | HAS | Regional Audit: A



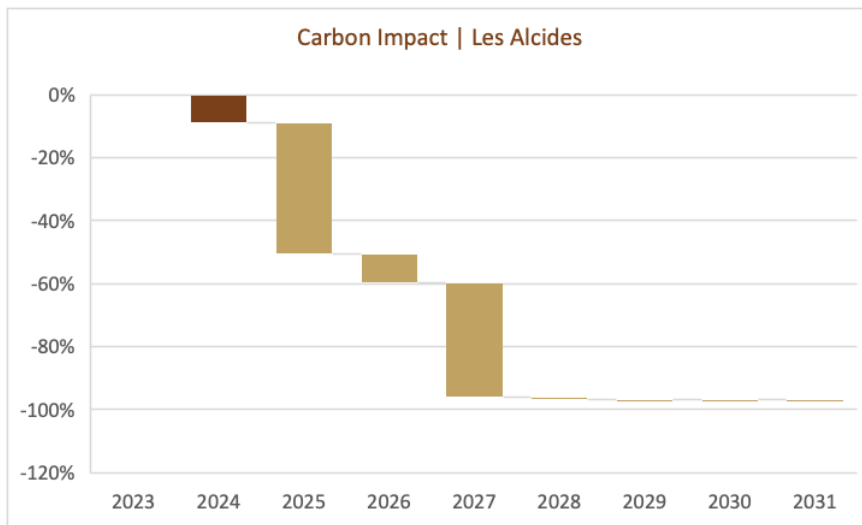


Transition Plan

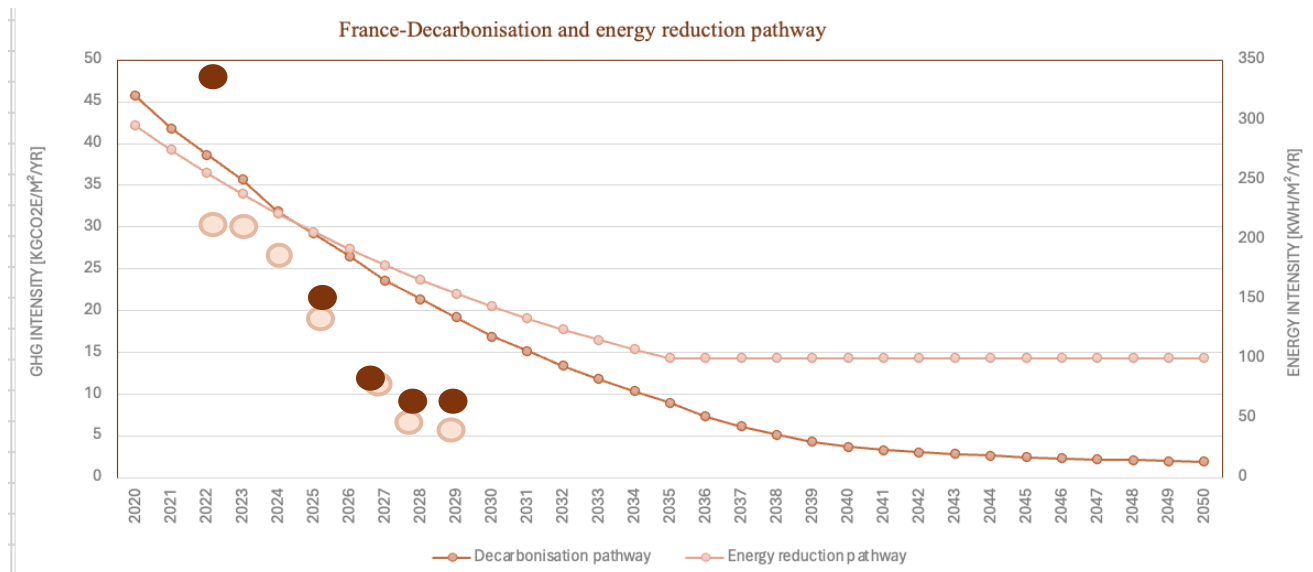
- ✓ Rebrushment of the façade
- ✓ Installation of CO₂ sensors
- ✓ Implementation of monitoring / regular control system
- ✓ DHW network recovery
- ✓ Electric vehicle charging stations
- ✓ Ballast installation – flicker reduction
- ✓ Replacement of boiler 1
- ✓ Replacement of boiler 2 (fuel)
- ✓ Air conditioning installation
- ✓ Installation of BMS (Building Management System)



Waterfall Chart GHG Impact



CREEM Trajectory



Korian Le Chalet

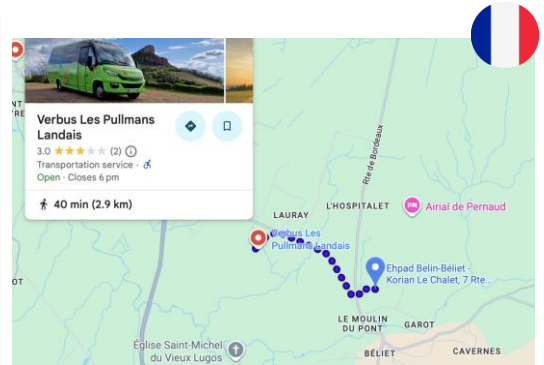


ADDRESS
7 route de l'Aurignolle,
33830 Belin-Bélieu (Gironde,
France)

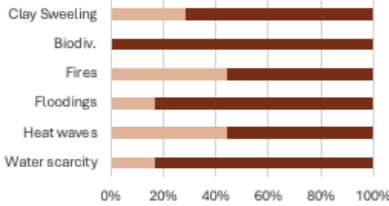
TYPE
Nursing home,
Single-storey building,

TRANSPORTS
Bus à 2,9 km
Train: 20,6 km
Borne E: 2

SURFACE
71 Beds
B: 2847 sqm
G: 11029 sqm



Risk Map related to climate change



Affordable and Social Offers

Affordability

- Regional Average price: 96.3 euros
- Average price of accommodation: 92,93 euros
- Tariffs / Repartition of the population regarding prices:

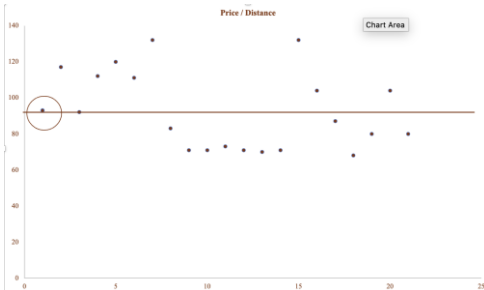
	“Confort”	“Grand confort”	“Duo”
Price (euros)	110,5	124	87
% Population	58	1	12

Final ratio: 82%

Social

Type of subsidy: ASH (Aide Sociale à l’Hébergement): Social assistance for accommodation costs

Final ratio: 2,8%

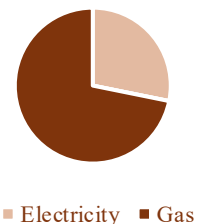


· Social Beds · Total Beds

Green Building

	Intensity	Benchk	Trend(n-1)
Energy Consumption(kWh.sqm.y)	287	142	+
Renewable Energie (kWh.sqm.y)	0	-	=
EPC	C	-	=
GHG ((kgCO ₂ eq.sqm.y)	50.3	18.9	+
Water Consumption (m ³ .y)	2.15	1.26	+
Wastes Management (kg.y)	23,46	-	-
Biodiversity Surface	76.36%	-	=
TNFD Achievement	3	-	-

Energy Mix



As of the last quarter of 2025, the asset has benefited from a complete overhaul of its production equipment. Although the energy source remains gas, the expected performance improvements to the structure should enable a significant reduction in its carbon impact and energy consumption.

At the same time, the water consumption monitoring systems have been stabilised and now allow for reliable tracking.





Community Achievements

Activities Plan

The structure did not present a new activity report. However, the interview with the activities coordinator suggests continuity of the activities and partnerships established the previous year. In addition, the posted schedule demonstrates a genuine commitment to offering diverse activities for residents.

Overall, Le Chalet continues its animation and service initiatives in line with expectations, despite the absence of an updated report. The available information indicates ongoing continuity of actions and sustained attention to residents' quality of life

Physical and Therapeutic Activities

These include weekly "**gentle gym**" sessions led by the SIEL BLEU association every Wednesday afternoon. Additionally, **Adapted Physical Activity (APA)** sessions take place every Thursday morning, and the facility's occupational therapist conducts **motor skills courses** every Monday.

Social and Leisure Activities

Residents participate in daily **board games** every morning. Other recurring events include **lotto** (bingo) sessions and **memory workshops** held twice a month, as well as monthly **music shows**, **dance classes**, and **travel storytelling** workshops.

Intergenerational and Educational Projects

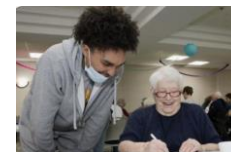
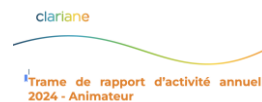
The animator has established a pedagogical project with the **Montessori school of Salles** focused on reading, where children and residents study a common book and debate it once a month.

There are also **nature workshops** conducted with a local nature guide from Belin Beliet.

Outings and Cultural Trips

Weekly outing is organized every Friday afternoon, varying between visits to the region, museums, restaurants, or the equestrian center. On the last Friday of every month, residents attend a private screening at the **Salles cinema**.

Additionally, **mini-trips** (such as to Lourdes or the Basque Country) are organized twice a year.



Quality Achievement

	N	N-1
Quality Audit Score	86%	86%
ISO Certification	A	A
Ratio of Claims	0.00%	1.41%
Ratio of Severe Advert Event	5.63%	2.82%
Satisfaction Survey	66	29
Hygiene Compliance	91.67%	95%
Organisation Compliance	93.2%	85.6%

The asset benefits from the support functions of Clariane, the tenant operating group. During the 2025 certification process with Haute Autorité de Santé, documentation and procedures were reviewed and operational organizations prepared. However, a temporary decline in hygiene and quality standards was observed in the kitchen during the manager's leave, an issue that has since been corrected. A remaining malfunction concerning a water point is still being addressed.

The structure continues to enjoy strong local reputation and attractiveness, with positive relationships that are further strengthening with families. Internal quality audits are planned to resume in 2026-2027 in the context of restructuring at the group's headquarters.

Overall, the establishment – Le Chalet – maintains a high level of service and performance consistent with its standards in 2024, while ongoing improvements and organizational adjustments aim to further enhance quality and operational robustness.





Quality And Care



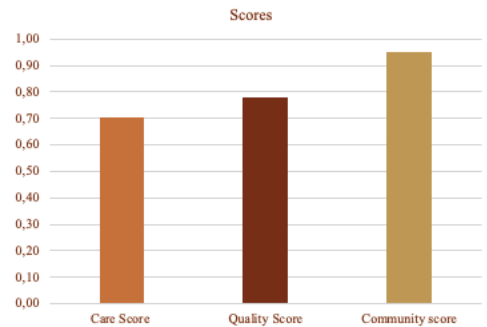
Reputational Risk

The organization has undertaken efforts to stabilize its workforce, particularly by addressing the proportion of employees on fixed-term contracts in order to significantly reduce turnover and strengthen staff-resident relationships. This issue is known to the relevant authorities.

Additionally, this year certain incidents involving employee behavior led to serious adverse events (EIGs), which have since been addressed.

The structure continues to maintain a very high level of service delivery, consistent with the standards observed in 2024.

Global MoZaic Quality & Care Score (QCS/100): 81



Governance



Thanks to all these initiatives — including improvements in residents' quality of life and enhanced access to green mobility — we were able to move from a **PASS level (39.47%)** to a **GOOD level (47.80%)**.

In particular, the Transport, Water, Energy, and Health & Well-being categories achieved higher scores.

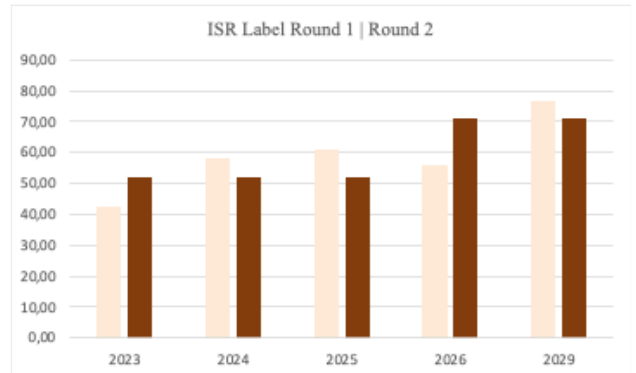
As some actions could not be fully completed in 2025, they have been scheduled for 2026 in order to reach the **VERY GOOD** level.

BREEAM Score (QCS/100): 47.80%



The asset completed Round 1 of the ISR certification with a 'Best in Class' rating. However, its transition plan is still ongoing, and the equipment upgrades were completed in 2026, with expected impacts materializing in 2027. The transformation plan must include the implementation of a Building Management System (BMS) to enable the asset to fully meet the fund's commitments.

ISR Score: C1| 60,8 – C2| 56,00



Among the unmet mandatory criteria, it was identified that professionals do not adequately respect the service user's right to image. shortcomings were noted regarding the implementation of business continuity plans and their regular updating. The structure was asked to provide supporting documentation as evidence; however, this request was declined. One area for improvement has been identified: the co-construction and personalisation of the individual care and support plan. Nevertheless, Le Chalet received a very positive overall assessment and largely meets the other expected criteria. As for the ISO certification, it is due to expire in 2026.

ISO Score | HAS | Regional Audit: B



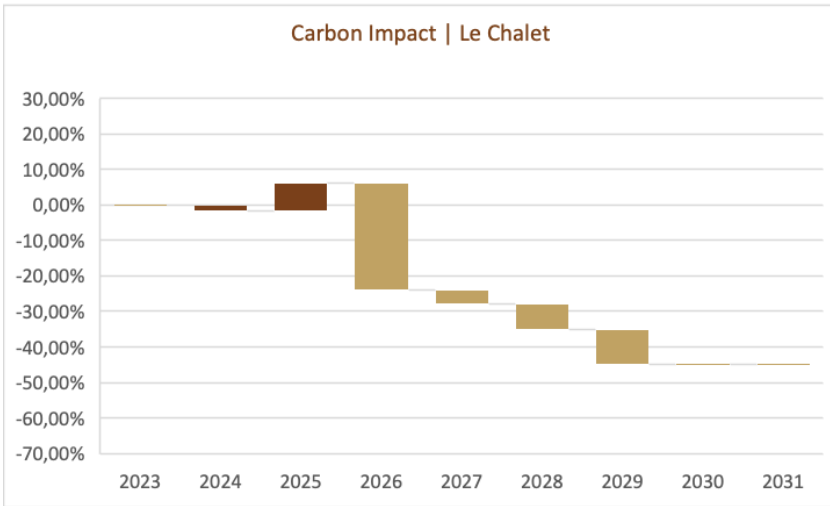


Transition Plan

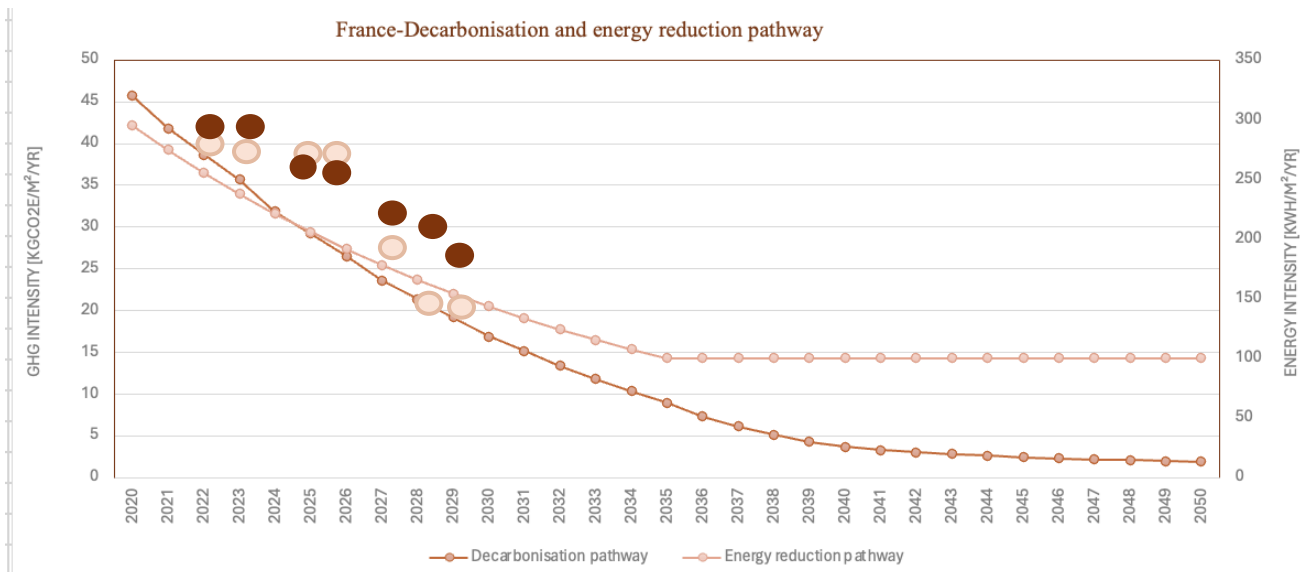
- ✓ Electric vehicle charging stations
- ✓ Replacement of boiler with two boilers (constraint: plant room too small)
- ✓ Replacement of seized valves
- ✓ Replacement of oven
- ✓ Motor replacement
- ✓ Refurbishment of the nursing home (EHPAD)
- ✓ BMS (Building Management System) upgrade
- ✓ Installation of crawl space ventilation and pumping system
- ✓ Façade renovation
- ✓ Integrate renewable autoconsumption(geothermie)



Waterfall Chart GHG Impact



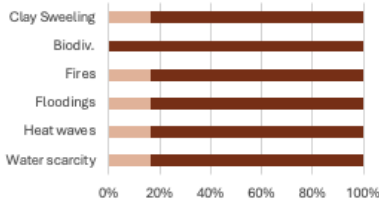
CREEM Trajectory



Korian Les Alysses



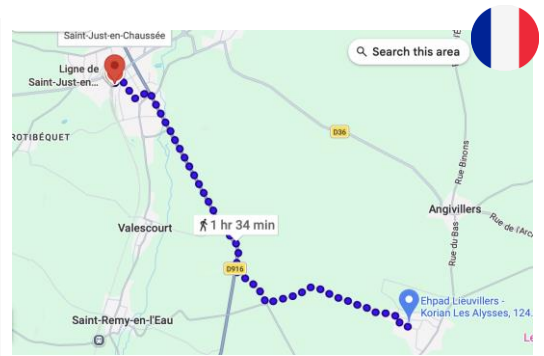
Risk Map related to climate change



ADDRESS
124 Rue de la 4E Division
d'Infanterie Coloniale, 60130
Lieuville, France

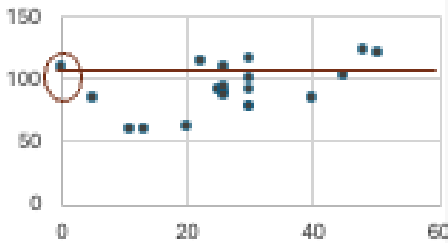
TYPE
Nursing home,
Single-storey building,

TRANSPORTS
Bus à 7,0 km
Train: 7,0 km
Borne E: 2
SURFACE
66 Beds
B: 3236 sqm
G: 5035 sqm



Affordable and Social Offers

Price / Distance



■ Social Beds ■ Total Beds

Affordability

- Regional Average price: 92,45 euros in an area of 50 kms
- Average accommodation price: 109 euros. Korian Les Alysses (€109/day) is positioned in the high-end segment of the Oise market, comparable to high-competition zones like Compiègne or Beauvais where private rates frequently exceed €100/day. The competitors, such as Emeis, offer a price minus 20 euros.
- Tariffs / Repartition of the population regarding prices:

	“Confort”	“Grand confort”
Price (euros)	109	119
% Population	15	85

Final ratio: 0%

Social

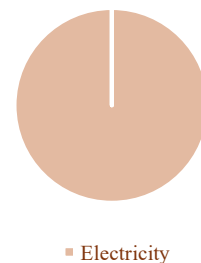
Type of subsidy: ASH (Aide Sociale à l’Hébergement): Social assistance for accommodation costs

Final ratio: 3.5%

Green Building

	Intensity	Benchk	Trend(n-1)
Energy Consumption(kWh.sqm.y)	181.2	142	=
Renewable Energie (kWh.sqm.y)	0	-	=
EPC	C	-	=
GHG ((kgCO ₂ eq.sqm.y)	7.8	18.9	=
Water Consumption (m ³ .y)	1.34	1.26	-
Wastes Management (kg.y)	17.19	-	-
Biodiversity Surface(%)	77.16	-	=
TNFD Achievement	1	-	-

Energy Mix



The asset benefits from 100% electric clean energy. As part of its transition plan, the replacement of all convectors with low-consumption units has been completed, and the effects are expected to be visible by the end of 2026.

The facility has also finalized the integration of automatic water consumption monitoring systems, enabling improved leak detection and tracking.





Community Achievements

Activities Plan

The asset offers daily activities through a program that is renewed weekly. These activities are specifically designed to support elderly residents in a nursing home setting:

Word games and memory workshops

Cognitive stimulation sessions, including word puzzles, vocabulary games, reminiscence exercises, and structured memory activities, are designed to maintain mental agility, encourage social interaction, and help slow cognitive decline.

In-room massages and wellbeing sessions

Gentle therapeutic massages and relaxation sessions are provided in residents' rooms to promote comfort, reduce anxiety, improve circulation, and enhance overall well-being, particularly for residents with limited mobility.

Gentle gymnastics and adapted physical workshops

Low-impact exercise sessions tailored to residents' physical abilities, focusing on mobility, balance, coordination, and fall prevention. Activities are supervised and adapted to ensure safety and inclusivity.

Music listening sessions

Guided music appreciation and reminiscence sessions using familiar songs to stimulate memory, encourage emotional expression, reduce stress, and foster social connection among residents.

Outdoor outings and community engagement

Supervised excursions outside the facility, such as walks in nearby parks, visits to local shops, cultural events, and public activities. These initiatives are supported by local partnerships and contracts with community associations, thereby strengthening intergenerational links and social inclusion. This approach maintains residents' connection with the local community while promoting stimulation, autonomy, and overall well-being.



Quality Achievement

	N	N-1
Quality Audit Score	97%	71%
Community Space	23.64%	=
Ratio of Claims	1.52	7.04
Ratio of Severe Advert Event	3.03	1.52
Satisfaction Survey	(45)	ND
Hygiene Compliance	99.2	89.38
Organisation Compliance	66.9	86.83

The asset underwent a reorganization in 2025, including a change in its Executive Committee (CODIR). In parallel, within a competitive environment, the teams have managed to improve their performance in terms of quality and care.

However, some gaps were identified in the kitchen areas, leading to the implementation of an improvement action plan, particularly addressing leaking taps. An incident of misconduct was reported (a staff member showing aggression toward a resident). The employee concerned was dismissed.

A review of the medication management circuit is scheduled for 2026.

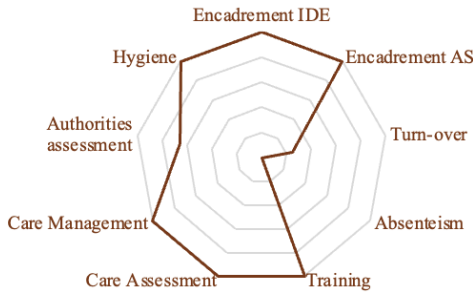
Care performance indicators are strong, with results above 95.6%. Ongoing training programs are supporting efforts to further qualify staff, in a context of staff turnover close to 25% and a significant increase in absenteeism (due to illness and medical unfitness).



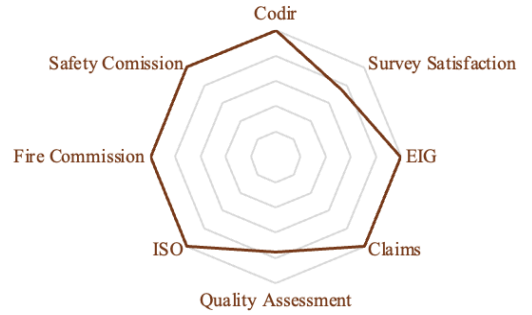


Quality And Care

Care Assessment - 2025



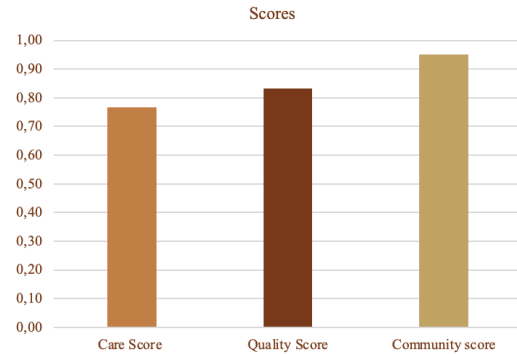
Quality Assessment - 2025



Reputational Risk

The management of the service and operational steering remains fragile, though improvements have been noted. In the evaluation of **EHPAD Korian Lieuvillers**, the deployment of group procedures and best practices has produced positive results recognised by the HAS. However, shortcomings persist in resident participation, with insufficient feedback on requests and limited involvement in the co-construction of care plans. Training gaps remain in ethics, maltreatment prevention, and risk management, while operational issues such as equipment failures and unclear emergency systems have been identified. Finally, no formal Quality of Working Life policy or structured psychosocial risk program is in place, highlighting areas requiring further improvement.

Global MoZaic Quality & Care Score (QCS/100): 64



Governance



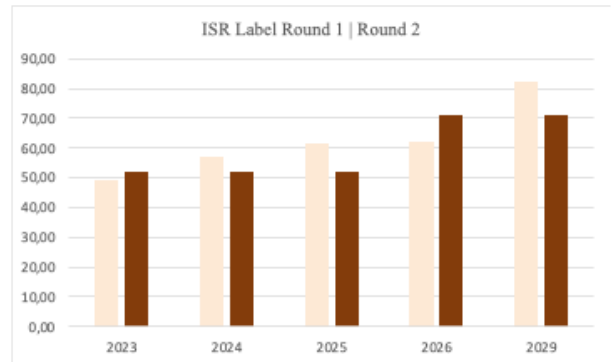
The asset was certified **BREEAM "Very Good"** at the end of 2025, with the certificate valid for the next three years. Efforts were focused on improving quality of life for both residents and staff, including upgrades to the water distribution systems, particularly in common areas and changing rooms. Green mobility has also been promoted through the installation of electric vehicle charging stations and secure bicycle racks.

BREEAM Score (QCS/100): 62.5



The renovation of the equipment has begun at the facility, with no visible impact expected before the 2027 reporting period. The facility has already benefited, under Criterion 1 (C1), from improved organization and more stable management. Further improvements, supported by the CAPEX plan, should enable the facility to meet the OPERAT target requirements and the fund's commitments.

ISR Score: C1| 61.6 – C2| 62.00



The asset accommodates an elderly population with significant care needs: GMP 746 and PMP 196 (which must be reassessed). It received HAS certification in 2025 (Q3) with a score of 3.5 and no major observations but identification of a serie of gaps with the required standard.

The asset is ISO 9001:2015 certified until 2024. Waiting for the new certificate.

ISO Score | HAS | Regional Audit: B



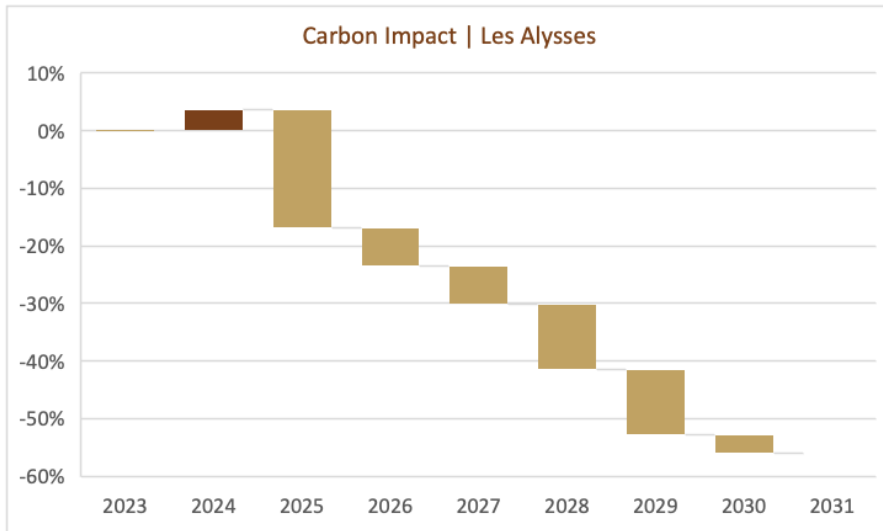


Transition Plan

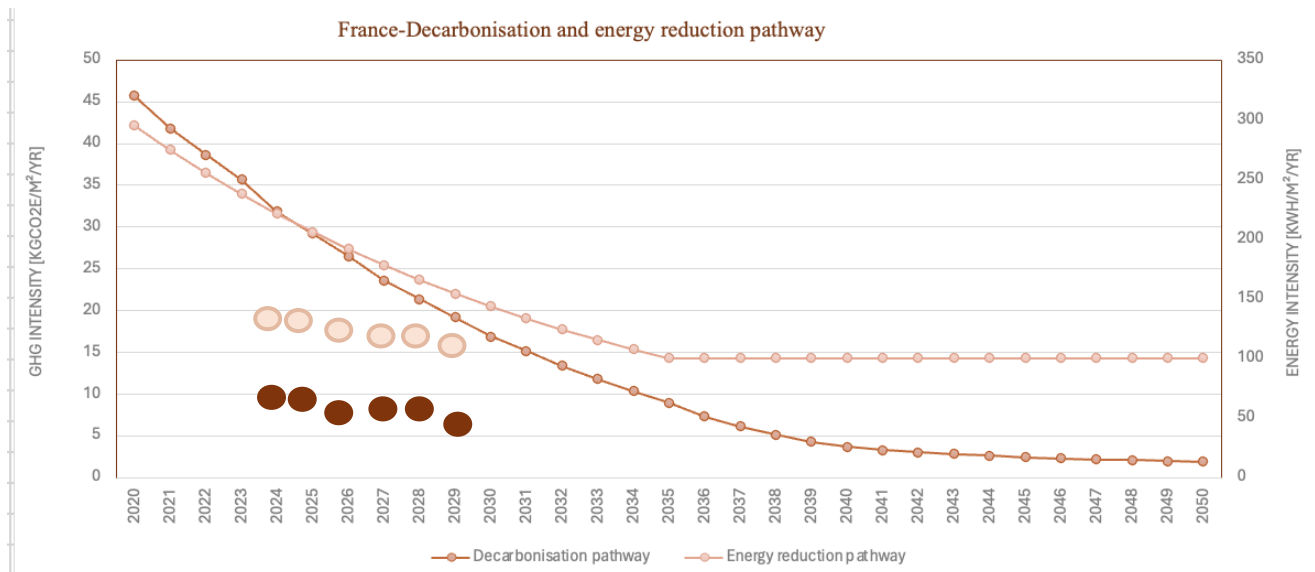
- ✓ Replacement of electric convectors (x80)
- ✓ Air-condition the circulation of the ground floor
- ✓ Replace the DHW tanks
- ✓ Installation of CO₂ sensors
- ✓ BMS (Building Management System) upgrade to Class B
- ✓ Retrofit of refrigeration equipment
- ✓ Electric vehicle charging stations
- ✓ Refrigerant leak detection



Waterfall Chart GHG Impact



CREEM Trajectory



Korian Les Trois Chemins



ADDRESS

2 Rue de la Gruche, 86120 Les Trois-Moutiers, France

TYPE

Nursing home, Triple-storey building.

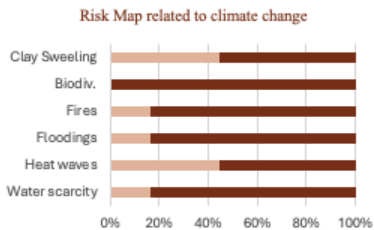
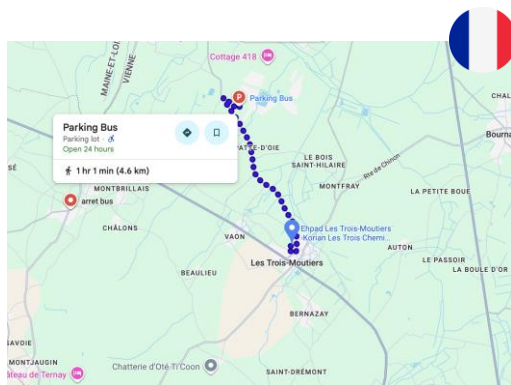
TRANSPORTS

Bus à 15,2 km
Train: 3,1 km

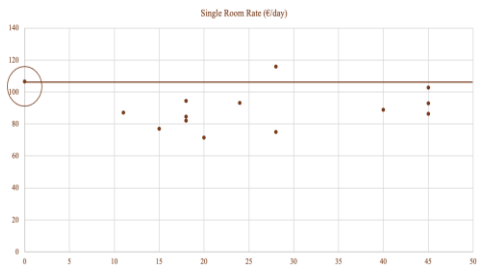
Borne E: 2

SURFACE

57 Beds
B: 2917 sqm
G: 25 043 sqm



Affordable and Social Offers



Affordability

- Regional Average price: 88,6 euros – 45 kms around
- Average price of accommodation: 92,45 euros with a decrease of the PMP. 11 places of a new PASA
- Tariffs / Repartition of the population regarding prices:

	“Confort”	“Grand confort”
Price (euros)	106.50	117.00
Beds	60	6

Final ratio: 0%



• Social Beds • Total Beds

Social

Type of subsidy: ASH (Aide Sociale à l’Hébergement): Social assistance for accommodation costs

Final ratio: 3,5%

Green Building

	Intensity	Benchk	Trend(n-1)
Energy Consumption(kWh.sqm.y)	229.4	142	++
Renewable Energie (kWh.sqm.y)	0	-	-
EPC	C	-	=
GHG ((kgCO ₂ eq.sqm.y)	37.9	18.9	++
Water Consumption (m ³ .y)	2,24	1,26	+
Wastes Management (kg.y)	10.42	-	-
Biodiversity Surface	89,29	-	=
TNFD Achievement	2	-	-

Energy Mix



■ Electricity ■ Gas

The asset reports consumption covering the entire energy mix and remains stabilized at a high level due to gas consumption. This will be a point of vigilance in the management of the asset. In parallel, efforts in waste management have enabled a significant reduction in outputs; the strategy should be redefined with the tenant to align with the fund’s trajectories.





Community Achievements

Based on the facility's establishment project for 2021-2026, the animation and social life project for **Korian Les Trois Chemins** is centered on the "**Positive Care**" approach, which focuses on preserving residents' remaining capacities and respecting their personal choices.

The project is structured around several key pillars:

- Diverse Daily Activities:** The residence offers a program of social, cultural, and leisure activities seven days a week, including themed clubs and exceptional outings.
- Non-Medicinal Therapies (TNM):** Social life is integrated with care through specialized tools like **KorianFit**(physical exercise via video games), **Siel Bleu** (adapted group physical activity), and the **Montessori approach**, which helps residents reclaim acts of daily living.
- Unit-Specific Animation:** Residents in the protected "Petite Maison" unit (dedicated to Alzheimer's or related disorders) benefit from specific activities such as gardening in their own garden, which includes a walking path and a chicken coop.
- Environmental & Social Inclusion:** A major goal for the 2021-2026 period is to further open the facility to the community by strengthening links with local associations and promoting intergenerational projects.
- Family Involvement:** The project emphasizes maintaining social bonds through dedicated family spaces, guest dining areas, and the "Korian Générations" app to keep families connected.



Activities

Intergenerational Encounters

A heartwarming start to the year bringing different generations together. These visits from local youth encourage storytelling and help residents maintain a vital connection to the community, reducing feelings of isolation.

Gardening at "La Petite Maison"

Celebrating the arrival of spring with "green therapy." Residents can enjoy the sensory benefits of soil and plants, promoting dexterity and providing a sense of accomplishment as they nurture new growth.



PASA (Pôle d'Activités et de soins adaptés)

In France, a Pôle d'Activités et de Soins Adaptés (PASA) is a specialised day centre located within a nursing home (EHPAD) designed to support residents with Alzheimer's disease or related disorders who exhibit moderate behavioural symptoms.

Trip to La Rochelle

A seaside getaway to enjoy the fresh sea air and maritime scenery. This trip offers a wonderful sensory experience and a chance for residents to reminisce about past travels while making new memories.



Quality Achievement

	N	N-1
Quality Audit Score	97%	97%
Community Spaces	18.55%	=
Ratio of Claims	0	1,75%
Ratio of Severe Advert Event	3,51%	1,75%
Satisfaction Survey	53	61
Hygiene Compliance	90.9 %	96.4 %
Organisation Compliance	98.4 %	99.1 %

The asset has developed a new service offering dedicated to residents living with Alzheimer's disease. The regional health authority (ARS) has expressed full confidence in the quality of care and operational standards of the structure and its management.

In 2026, the asset will prepare and apply for HAS certification, with the preceding period focused on formalising processes and strengthening traceability.

In 2025, two serious incidents were recorded:

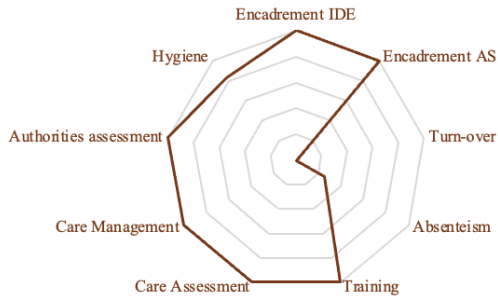
- Resident-on-staff violence: a resident assaulted an employee.
- Resident-on-resident abuse: a resident committed an act of abuse against another resident. No complaints were filed in relation to these events."



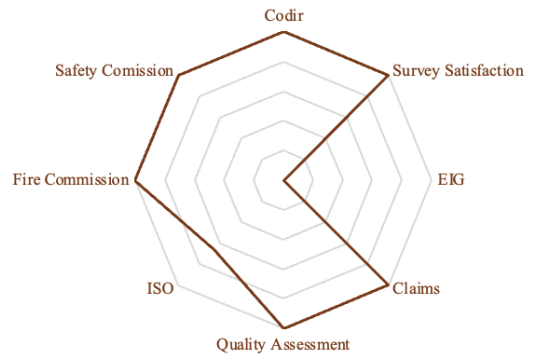


Quality And Care

Care Assessment - 2025



Quality Assessment - 2025

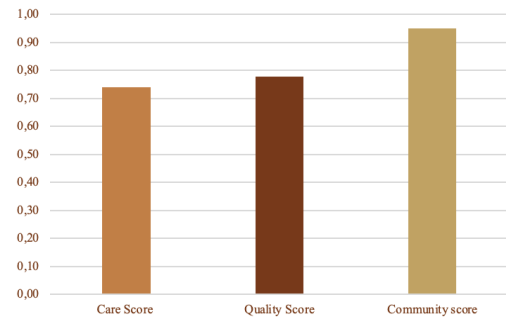


Reputational Risk

The asset is experiencing recruitment difficulties for qualified staff, with significant turnover preventing the formation of a long-term nursing team. However, the implementation of procedures and support from headquarters help prevent any reputational risk. Recognition of service quality remains consistent, and the attractiveness of the facility and family satisfaction are sustained over time.

Global MoZaic Quality & Care Score (QCS/100): 81

Scores



Governance



The asset underwent support in 2025 for its BREEAM certification process. While a 'Good' level may be achieved during audits, the owner has chosen to delay submission of the dossier to the BRE in order to secure the remaining points required for a 'Very Good' certification. Most installations have been completed: electric vehicle charging stations have been delivered and are scheduled for operational deployment in 2026. Improvements to water-efficient systems are ongoing. Green mobility is actively promoted, and the facility has transitioned to full LED lighting.

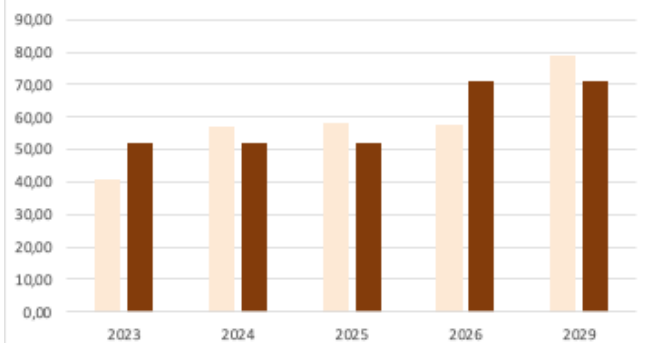
BREEAM Score (QCS/100): 51.03%



The facility benefits from the support of its group, Clariane, enabling it to achieve a high score on the Social pillar under Criterion 1 (C1) and to obtain 'Best in Class' status. With the new assessment framework, the focus has shifted toward energy efficiency and carbon impact objectives. The facility has begun implementing its Building Management System (BMS); however, the rollout has not yet been finalized due to technical issues on the tenant's side, which are currently being resolved.

ISR Score: C1| 58.4 – C2| 57.60

ISR Label Round 1 | Round 2



The asset is due for recertification this year, with the visit of HAS expert assessors scheduled accordingly. A comprehensive internal 360° quality audit was conducted, achieving a satisfactory score of 97%. In addition, the Group's central quality team oversees and supports the proper implementation of practices within the facility.

ISO Score | HAS | Regional Audit: A



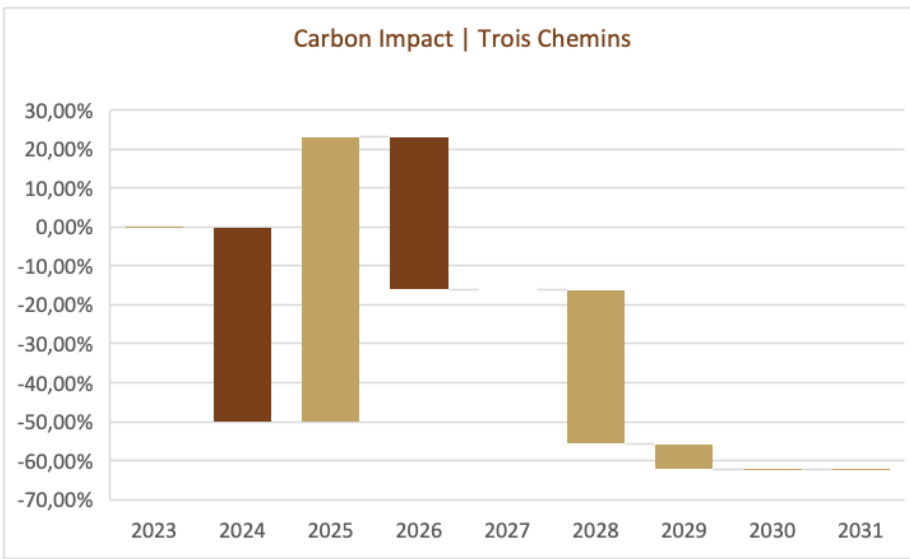


Transition Plan

- ✓ BMS (Building Management System) upgrade to Class B
- ✓ Refurbishment of residents' terraces
- ✓ Renovation of wooden cladding on façade
- ✓ Installation of CO₂ sensors
- ✓ HVAC works in circulation areas
- ✓ Roller shutters



Waterfall Chart GHG Impact



CREEM Trajectory

