

# Oneview Healthcare PLC (ASX: ONE) ABRN: 610 611 768

# WHISTLEBLOWERS POLICY 28<sup>TH</sup> February 2025

Oneview Healthcare PLC and its subsidiaries (the Company)

Oneview Healthcare PLC is an Irish company registered under the Companies Act 2014 as a public limited company (513842). It is registered under the Corporations Act 2001 (Cth), Australian Registered Body Number 610 611 768.

1

# 1. Introduction and Purpose

# 1.1 Background

The Company is committed to promoting and supporting a culture of corporate compliance and ethical behaviour. This includes conducting its business with integrity and in accordance with the Company's organisational values.

## 1.2 Purpose

The purpose of this Whistleblowers Policy ("Policy") is to:

- (a) Encourage Workers to raise any concerns of Relevant Wrongdoing which has come to their attention in a work-related context, without fear of intimidation, disadvantage or reprisal;
- (b) outline the mechanisms for the reporting and investigation of Relevant Wrongdoing;
- (c) outline the measures in place to protect workers raising genuine concerns about Relevant Wrongdoings; and
- (d) outline the additional procedures and protections that apply to whistleblowers under the Protected Disclosures Act 2014 ("the **Act**").

It is expected that Workers will report known, suspected or potential cases of Relevant Wrongdoings.

It is also expected that Workers raise genuine concerns and have a reasonable belief that a Relevant Wrongdoing has been, is being, or it likely to be committed In the unlikely event that we conclude that a Worker did not hold a reasonable belief and has knowingly made false allegations (including those made vexatiously or maliciously, in bad faith or with a view to personal gain) then that Worker may be subject to disciplinary action. For employees, this may be regarded as gross misconduct and may lead to disciplinary action up to and including dismissal, or in the case of non-employees, suspension or cessation of the relevant contract for services.

## 1.3 Definitions

Capitalised terms used in this Policy are defined in the Schedule.

# 2. Scope

This Policy applies to all Workers who wish to report Relevant Wrongdoings regarding the Company's activities.

This Policy does not deal with staff grievances which exclusively affect the worker raising the concern (such as interpersonal conflicts between you and another worker, complaints relating to your personal circumstances or the way you have been treated at work) which do not constitute Relevant Wrongdoings. Note that separate procedures exist to address such staff grievances.

# 3. Raising concerns

## 3.1 How to raise concerns

Workers can raise concerns of Relevant Wrongdoings to:

- (a) One of the C-suite Team Members; or
- (b) if the Worker feels unable to raise the Relevant Wrongdoing with a C-suite Team Member due to the subject matter of their concerns or otherwise, the Whistleblower Director identified in paragraph 3.3 of this Policy.

Once a worker raises a concern under this Policy, they will receive an acknowledgement in writing within 7 days of its receipt.

While we hope workers will feel comfortable raising their concerns via the internal channels outlined above, the Company recognises the rights of Workers to raise their concerns via external reporting channels which include certain prescribed bodies or persons (full list available here) as well as the Office of the Protected Disclosures Commissioner. Workers should however be aware that more stringent standards apply where concerns are raised with a prescribed person and/or the Commissioner, such that:

- (a) The worker must reasonably believe that the information disclosed and any allegations contained are "substantially true"; and
- (b) In the case of concerns raised with a prescribed person, the wrongdoing falls within matters in respect of which that person is prescribed.

A list of all prescribed persons can be found here. Details as to how to raise a concern with the Commissioner are available on the Commissioner's website.

## 3.2 Anonymous reports

We do not encourage anonymous reports. Proper investigation may be more difficult, or even impossible, if we cannot obtain further information from you.

#### 3.3 Whistleblower Director

The Company has nominated its initial Whistleblower Director as Mark Cullen. Mark is an independent Director of Oneview and may be contacted in confidence in the first instance by email at mcullen@oneviewhealthcare.com.

# 4. Handling of concerns

# 4.1 Timely review of concerns

Upon receipt of concerns, the Company will determine the next steps including the

appointment of an impartial person or persons who are competent to follow up on the concerns raised (a **Designated Person**).

# 4.2 Role of the Designated Person

The Designated Person is responsible for:

- (a) Maintaining communication with the worker who raised the concern(s);
- (b) Requesting further information from the worker (where necessary) and providing feedback to the worker; and
- (c) carrying out an initial assessment.

#### 4.3 Initial Assessment

The Designated Person will carry out an initial assessment as to whether there is prima facie evidence that a relevant wrongdoing may have occurred:

- If, having carried out this initial assessment, the Designated Person determines that there is no prima facie evidence that a relevant wrongdoing may have occurred, the Designated Person will notify the worker, in writing, as soon as practicable of that conclusion, the reasons for it and the fact no further steps will be taken under this Policy.
- If, having carried out this initial assessment, the Designated Person determines that there is prima facie evidence that a relevant wrongdoing may have occurred, the Designated Person will take appropriate action to address the relevant wrongdoing, having regard to the nature and seriousness of the matter concerned.

## 4.4 Investigation

If arising out of the initial assessment, a decision is made to conduct an investigation into the concerns raised, it will be conducted fairly and objectively and with due regard to the rights of the participants in the investigation. The form and scope of the investigation will depend on the subject matter of the concerns and in the course of the investigation it might be necessary for the investigator to review relevant documentation and conduct interviews with relevant parties. In certain cases, it may be considered necessary or appropriate to appoint an external investigator to conduct the investigation.

## 4.5 Rights of person who is the subject of an investigation

A person who is the subject of an investigation is entitled, subject to any requirements of applicable law including confidentiality obligations, to be:

- (a) informed as to the substance of any adverse comment that may be included in a report or other document arising out of any such investigation; and
- (b) given a reasonable opportunity to put their case to the investigator who is investigating the report.

#### 4.6 Whistleblower feedback

The Designated Person will provide "feedback" to the worker who raised the concern within a reasonable period, being not more than three months from the date receipt.

"Feedback" is information on the action envisaged or taken as follow-up and the reasons for such follow-up. Any feedback that is shared is shared on a confidential basis. Feedback will not include any information that could prejudice the outcome of an investigation or any other action that might follow. Feedback will also not include any information relating to an identified or identifiable third party.

## 4.7 Confidentiality

The Company and any persons receiving reports will not disclose particulars of reported matters that would reveal the identity of the whistleblower without obtaining the whistleblower's prior consent, subject to any requirements of applicable law.

All files and records created from an investigation will be retained under strict security. The unauthorised release of information (without a whistleblower's consent or otherwise in accordance with the Act) to any person (other than the Audit & Risk Management Committee) is a breach of this Policy, subject to any requirements of applicable law.

The Audit & Risk Management Committee will receive copies of all investigation reports. Anonymity and confidentiality requirements will be observed by the Audit & Risk Management Committee. A whistleblower who is concerned about a possible reprisal if his/her identity is revealed should raise this with the HR Manager or CFO.

## 4.8 Training

The Company will provide training to any Designated Persons and other persons receiving reports in relation to the Act, this Policy and about how to respond to them, and generally to employees in relation to this Policy and their rights and obligations under it.

## 5. Protection of whistleblowers

# 5.1 General protections

Whistleblowers that report a concern under this Policy will not be subject to any penalisation or threat of penalisation by the Company for having raised the concerns in good faith. Penalisation includes but is not limited to the following:

- (a) dismissal;
- (b) demotion;
- (c) harassment;
- (d) discrimination; or
- (e) imposition of a disciplinary sanction.

#### 5.2 Protection under the Act

The Act provides additional protections in relation to the reporting of information. A disclosure of information by a person qualifies for protection under the Act if the whistleblower:

(a) is a Worker;

- (b) reasonably believes that the disclosure of information tends to show one or more Relevant Wrongdoings is occurring, has occurred or is likely to occur;
- (c) the information came to the attention of the Worker in a work -related context

Workers may also, under the Act, be entitled to legal immunity from any civil or criminal liability arising from making any disclosures.

The Company and its subsidiaries are committed to compliance with the Act.

Workers are strictly prohibited from engaging in any behaviour or act which may cause detriment to those making a disclosure. Where any employee engages in such behaviour, this may be regarded as gross misconduct and may lead to disciplinary action up to and including dismissal, or in the case of non-employees, suspension or cessation of the relevant contract for services.

#### 6. Other matters

## 6.1 Amendment of Policy

This Policy does not form part of any employee's contract of employment and may be amended at any time in line with changes in legislation and best practice.

This Policy can only be amended with the approval of the Board.

# 6.2 Adoption of Policy and Board review

This Policy was adopted by the Board on 28<sup>th</sup> February 2025 and replaces any previous policy in this regard.

The Board will review this Policy periodically. The Company Secretary will communicate any amendments to Workers as appropriate.

## **Schedule 1 Definitions**

For the purposes of this Policy:

**Worker** includes current and former permanent and fixed-term employees, directors, consultants, contractors, volunteers/interns, part-time employees, casual workers, temporary agency workers, shareholders, members of the administrative, management or supervisory body of the Company (including non-executive members), job applicants and individuals who acquire information during pre-contractual negotiations.

C-suite Team Member means a member of the Senior Management Team

**Group** means the Company and its subsidiaries.

**Relevant Wrongdoing** is defined (in accordance with the Protected Disclosures Act 2014) as one or more of the following:

- (a) That an offence has been, is being or likely to be committed;
- (b) That a person has failed, is failing or is likely to fail to comply with any legal obligation, other that one arising under the Worker's contract of employment or other contract whereby the Worker undertakes to do or perform personally any work or service:
- (c) That a miscarriage of justice has occurred, is occurring or is likely to occur;
- (d) That the health or safety of any individual has been, is being or is likely to be endangered;
- (e) That the environment has been, is being or is likely to be damaged;
- (f) That an unlawful or otherwise improper use of funds or resources of a public body, or other public money, has occurred, is occurring or is likely to occur;
- (g) That an act or omission by or on behalf of a public body is oppressive, discriminatory or grossly negligent or constitutes gross mismanagement; or
- (h)That a breach has occurred, is occurring or is likely to occur (and in this instance a breach means an act or omission) that (i) is unlawful and either falls within the scope of European Union law in areas specified in the Act as detailed below; affects the financial interests of the European Union; or relates to the internal market including breaches of Union competition and State aid rules or breaches of corporate tax rules to obtain a tax advantage; or (ii) defeats the object or purpose of the rules in the European Union acts and areas specified in the Act.

Areas specified in the Act: (i) public procurement; (ii) financial services,

products and markets, and prevention of money laundering and terrorist financing; (iii) product safety and compliance; (iv) transport safety; (v) protection of the environment; (vi) radiation protection and nuclear safety; (vii) food and feed safety and animal health and welfare; (viii) public health; (ix) consumer protection; (x) protection of privacy and personal data, and security of network and information systems;

(i) That information tending to show any matter falling within any of the preceding sub-paragraphs has been, is being or is likely to be concealed or destroyed or an attempt has been, is being or is likely to be made to conceal or destroy such information.

**Whistleblower** means a Worker who raises concerns in a manner specified in the Act and where they (a) have a reasonable belief that the information disclosed tends to show one or more Relevant Wrongdoings and (b) the information came to the worker's attention in a work-related context.