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Prepared by: - Senior Manager Legal & Compliance	Reviewed by: - Group Chief Executive Officer/Executive Committee/Audit Committee	Approved by: - Board of Directors	

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## 1. Introduction

We, The Lanka Hospitals Corporation PLC and Lanka Hospitals Diagnostics (Private) Limited (jointly referred to as “the Company”) are committed to maintaining the highest standards of integrity, transparency, and accountability in all aspects of our operations. As a healthcare institution listed on the Colombo Stock Exchange (CSE), we recognize our responsibility to uphold ethical conduct and foster an environment where employees, contractors, suppliers, and other stakeholders feel empowered to report any concerns related to illegal, unethical, inappropriate behavior, undesirable conduct, fraud, corruption, or other misconduct or wrongdoing directly or indirectly related to our operations without fear of retaliation.

This Whistleblower Policy (“Policy”) is designed to provide a clear framework for reporting such concerns and ensures that they are handled with utmost confidentiality and seriousness. The Policy aligns with both national laws and the corporate governance principles set forth by the CSE, reflecting our commitment to ethical management practices, good governance, and compliance with regulatory standards.

## 2. Objective

The objective of this Policy is to foster a culture of integrity, transparency, and accountability within the Company by providing a safe, confidential and accessible mechanism for any individual to report any illegal, unethical, or improper conduct or wrongdoing concerning the Company, its personnel or operations without fear of reprisal and to establish a clear process for the prompt and impartial investigation of reported concerns, ensuring that all issues are addressed fairly.

## 3. Scope

This Policy applies to all individuals working at all levels and grades, including directors, senior managers, officers, employees (whether permanent, probation, fixed-term, contracted under a contract for services, or temporary) of the Company, trainees, apprentices, seconded staff, volunteers, interns, or any other person working with the Company (including medical officers, consultants or visiting technicians) or ex-employees. This Policy also extends to vendors, contractors, suppliers, service providers and any other individuals or stakeholders who have a direct or indirect interest in the affairs of the Company.

This Policy covers the reporting of any suspected or actual illegal, unethical, or improper conduct, behaviour, or wrongdoing, including but not limited to fraud, bribery, corruption, financial misconduct, manipulations, misuse or mismanagement or wasteful practices concerning or related to the Company, its personnel, operations and all locations.

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**Exclusion:** This Policy does not apply to work-related grievances such as interpersonal conflicts, nepotism, or harassment, provided harassment, including sexual harassment, is linked to a demand or as a gratification for fulfilling a contractual obligation). Such matters should be addressed through the policies and procedures managed by the Human Resources Division.

Further, this Policy does not cover any concerns raised in respect of clinical matters or patient incident reporting, which is dealt with under the preview of the Quality Department and Medical Administration.

#### 4. Responsibility and Authority

The Board appointed Audit Committee through its nominated officers namely the Group Chief Executive Officer and Group Head of Internal Audit is entrusted to ensure that all concerns raised are dealt with fairly, thoroughly and in accordance with this Policy.

#### 5. Whistleblowing Process

##### 5.1 Reporting Mechanism

##### a) Internal Reporting

Any internal individual/stakeholder referred to under Section 03 above, who notices a Reportable Conduct (defined below) should report it in good faith to his/her immediate supervisor or line/cluster manager. By considering the significance or gravity, the recipient of the concern can decide to escalate it to the Group Head of Internal Audit and/or the Group Chief Executive Officer.

In the event, if the individual is uncomfortable reporting a Reportable Conduct to his/her immediate supervisor or line/cluster manager, such internal individual can directly report the said concern to the Group Head of Internal Audit and/or Group Chief Executive Officer in writing (may use the emails given under section “b” below) or verbally ensuring that sufficient details and evidence are provided to facilitate a thorough investigation and substantiate the complaint.

Exceptionally, depending on the nature and significance of the concern, such Reportable Conduct can also be reported to the Chairman of the Audit Committee.

##### b) External Reporting

Any external individual/stakeholder referred to under Section 03 above, who notices a Reportable Conduct (defined below) should report it in good faith to the Group Head of Internal Audit and/or Group Chief Executive Officer via the following email ensuring that sufficient details and evidence are provided to facilitate a thorough investigation and substantiate the complaint.

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Exceptionally, depending on the nature and significance of the concern, such Reportable Conduct can also be reported to the Chairman of the Audit Committee.

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### **c) Reportable Conduct**

A Reportable Conduct is anything actual or that has reasonable grounds to suspect, including but not limited to the following

- i. A criminal offence (subject to the exclusions stated above)
- ii. The breach of contractual/legal obligation or regulatory requirement
- iii. A miscarriage of justice
- iv. Bribery, fraud or financial mismanagement or irregularities including fraudulent statements: financial reporting, employment credentials, and external reporting
- v. Corruption or misuse of company assets/ position
- vi. Conflicts of interest
- vii. Conduct involving substantial risk to the company or public health, safety and substantial risk to the environment

It applies to unlawful, improper, dishonest or unethical behavior of any kind. It includes, but is not limited to, any behavior that undermines, or may undermine, the Company's policies, procedures, practices or any other expected, or otherwise established, standard of conduct and deliberate attempts to conceal any one or more of the above

## **5.2 Investigation Process**

After considering the following factors, it will be decided whether to proceed with an investigation or not

- i. The seriousness of the issue
- ii. The credibility of the concern
- iii. The likelihood of confirming the allegation

The investigations will be conducted by the Internal Audit Department (if necessary with the involvement of a nominated internal/external officer). The investigation may be totally outsourced

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to an external party depending on the concern reported. The outcome of the investigation may include;

- i. No further action
- ii. Disciplinary/Corrective action
- iii. Further investigation by an external authority

In cases relating to suspected criminal activity, including but not limited to fraud, would be reviewed by the Group Chief Executive Officer and the Group Head of Internal Audit with the assistance of the Heads of the Human Resource and Legal Divisions in order to refer such culprits to the police or relevant authorities.

### **5.3 Documentation**

A register should be maintained at the offices of the Group Chief Executive Officer and the Group Head of Internal Audit, indicating the details of all whistleblower complaints received (including verbal and anonymous) and their outcome.

### **5.4 Reporting**

The Audit Committee should be provided with a quarterly report on complaints received and status/outcome.

## **6. Confidentiality and Anonymous Complaints**

All whistleblower complaints received will be dealt with utmost confidentiality under this Policy. The Company will protect the identity of the whistleblower to the fullest extent possible, consistent with conducting a thorough investigation (unless required by law and so long as it does not hinder the investigation process).

Anonymous complaints are discouraged and it is encouraged individuals to make complaints openly and with transparency, wherever possible, while disclosing their identity. While the Company is committed to protecting the confidentiality of whistleblowers, we believe that disclosed complaints, where the identity of the whistleblower is known, can enhance the effectiveness and efficiency of the investigation process. Disclosed complaints allow for clearer communication, a better understanding of the issues, and more direct resolution.

Nonetheless, anonymous complaints will also be accepted and investigated after reviewing the significance and ensuring that sufficient details and evidence are provided to facilitate a thorough investigation and substantiate the complaint, with the same commitment to confidentiality.

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## **7. Protection Against Retaliation**

The Company prohibits retaliation against whistleblowers who report concerns in good faith. Retaliation includes but is not limited to dismissal, demotion, harassment, discrimination, or any detrimental conduct. Whistleblowers who believe they have suffered retaliation as a result of their report should immediately inform the Human Resource Division (copying to the Group Chief Executive Officer and/or Group Head of Internal Audit) and it would be dealt with seriously.

The right of a whistleblower for protection against retaliation does not include immunity for any personal wrongdoing that is alleged and investigated.

For the purposes herein, Good faith is evident when the complaint is made without malice or consideration of personal benefit and the whistleblower has a reasonable basis to believe that the complaint is true. A whistleblower who knowingly or recklessly makes statements or disclosures that are not in good faith may be subject to disciplinary action.

## **8. False Reports**

Deliberately making false allegations or reports maliciously is a violation of this Policy and may result in disciplinary action, up to and including termination of employment or contract.

## **9. Policy Review**

This Policy will be reviewed annually to ensure its effectiveness and compliance with relevant laws and regulations and amended as necessary with the approval of the Audit Committee.

## **10. Communication and Training**

The Company will communicate this Policy to all employees, contractors, and relevant stakeholders, and provide training on its provisions and procedures when and where necessary.

## **11. Compliance**

All employees, contractors, and stakeholders are expected to comply with this Policy and cooperate fully with investigations.

## **12. Related Policies and Procedures**

This Policy should be read in conjunction with the other policies, standard operating procedures and guidelines of the Company, namely the code of business conduct and ethics, anti-corruption and

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## LH/POLICY/LEGAL/11 POLICY ON WHISTLEBLOWING

anti-bribery policy, use of company assets, risk management and internal control, information security and the MOFA, employment handbook, procurement manual and IT security management guidelines.

This Policy is a statement of fundamentals to the Company's principles and standards. It does not create any rights for any third party, such as customers, suppliers, competitors, shareholders, stakeholders, regulatory authorities or any other person or entity.

*This policy was reviewed and recommended by the Audit Committee on 10<sup>th</sup> September 2024 and approved by the Board of Directors on 19<sup>th</sup> September 2024.*

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