

A decorative graphic consisting of several horizontal lines of varying lengths and colors (white, red, and blue) on the left side of the page.

# Sustainability Report

A decorative graphic consisting of several horizontal lines of varying lengths and colors (white, red, and blue) and a large, stylized, circular pattern of dots in white, red, and blue on the right side of the page.

# 2025

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We introduce Life Healthcare, outlining our purpose and portfolio and how we are *making life better* for our stakeholders. We also explain our reporting approach, highlighting what is new in this report and summarising our material matters.

We provide an overview of our FY2025 sustainability performance through key indicators and commentary from leadership. Adv Mahlape Sello, our Social, Ethics and Transformation Committee (SETCO) Chairman, discusses how the Committee oversees ESG, while Pete Wharton-Hood, our Chief Executive, reflects on the Group's progress during the year.

We present our ESG risk assessment and map the identified risks and opportunities across the Life Healthcare value chain, considering the full healthcare value chain, from raw materials to waste management, highlighting where we have different levels of control and influence.

We outline our ESG strategy framework. We explain our strategic objectives, targets for FY2025 and long-term goals for FY2030, as well as the initiatives that will enable us to achieve them. We also show how our ESG strategy framework aligns our environmental, social and governance strategic objectives with Life Healthcare's broader growth strategy.

We provide a detailed account of our FY2025 performance against each of our ESG strategic objectives. For each pillar, environmental, social and governance, we describe our approach, key initiatives and the progress made in delivering on our commitments.

We outline Life Healthcare's structured, multi-level ESG governance framework, detailing the roles, responsibilities and oversight mechanisms that ensure accountability and effective execution of our ESG strategy.

To support a concise report, we provide granular detail in the appendices related to our ESG risk register, ESG ratings, climate-related information, performance data, policies and the independent assurance practitioner's report.

### Feedback

We value your feedback on this report as we endeavour to improve our disclosures continuously. We invite you to contact the Chief Actuary and Risk Officer, Brett Mill, at [brettm@life.co.za](mailto:brettm@life.co.za) or our Head of Environmental Sustainability and ESG Reporting, Pearl Sibali, at [pearl.sibali@lifehealthcare.co.za](mailto:pearl.sibali@lifehealthcare.co.za).

# We are Life Healthcare

*We are a diversified, southern African-based healthcare provider consisting of healthcare professionals, enabling teams and technologically advanced, multi-disciplinary facilities. Our employees, healthcare professionals and other stakeholders make the business run 24 hours per day, 365 days a year, ensuring safe, efficient and well-managed environments. They make life better for all.*

Life Healthcare Group Holdings Limited (Life Healthcare or the Group or the Company) is one of the largest private healthcare providers in southern Africa, primarily serving the private medically insured market. We have more than 40 years' experience in healthcare and are recognised by South African funders as the leader in effective value-based care.

We began our journey with four hospitals in the early 1980s and expanded through acquisitions, new builds and additional lines of business. In addition, we expanded internationally through acquisitions and have now consolidated our operations to refocus on southern Africa.



# We make life better...

## for patients

We deliver quality healthcare that makes life better for patients and their families, whether through quick interventions, longer admissions or ongoing care. Our facilities and equipment are geared for quality and safety, incorporating appropriate technology to drive the best possible patient outcomes at affordable rates.

Our patients are in the care of qualified, professional and compassionate healthcare teams.

## for employees

Our employees are our greatest asset and most of them are responsible for caring for our patients. We invest in their personal well-being and development and provide nursing training through seven learning centres. We support diversity and transformation through welcoming and safe work environments, ethical leadership and efficient systems.

Remuneration is designed to reward performance, attract and retain talent. Permanent employees, excluding executive and senior management, can participate in the broad-based employee share plan that gives them co-ownership of Life Healthcare. Employees in senior management roles qualify for performance incentive plans that reward them for both short-term and long-term performance.

## for doctors

As our partners, doctors rely on us to provide them with access to high-quality healthcare facilities, appropriate medical equipment, health technology, partnerships with healthcare funders and well-trained, compassionate healthcare professionals and teams.

The majority of doctors operate as independent practitioners, who form a core element of our service offering across the continuum of care and play a key role in delivering clinical excellence. They have access to research support and participate in medical advisory and clinical governance structures to stay abreast of the most effective and efficient patient care pathways, treatments, medication and consumables.

## for healthcare funders

We have contractual relationships with healthcare funders that rely on constructive dialogue, trust and clinical excellence at an appropriate cost. We aspire to deliver on their promises to their members by ensuring appropriate treatment, quality of care and positive outcomes.

Funders have consistently recognised Life Healthcare as the most efficient hospital group in South Africa and as a preferred provider. This means we create and sustain lasting value for them and their members. Our investment in value-based care products is designed to promote a transition to value-based models that reward improved patient care, quality and clinical outcomes, while lowering overall care costs.

## for shareholders, investors and financiers

Our strategy aims to unlock value for shareholders through delivering returns in excess of our weighted average cost of capital and a sustained distribution of dividends. We ensure sustainability of the Company by maintaining a strong financial position and driving cost efficiency and better patient outcomes through environmental, social and governance (ESG) initiatives.

We communicate transparently to build trust and a solid understanding of our business dynamics. Our strategy aims to deliver increased market share, revenue and returns.

## for suppliers

We build long-term supplier relationships that rely on trust, knowledge sharing and value for money spent.

We make timely payments and communicate our expectations clearly via service level agreements to support their sustainability, reliability and compliance capacity. Our supplier criteria support broad-based black economic empowerment (B-BBEE) and the development of small, local suppliers.

## for government and industry regulatory bodies

We have a long-standing and ongoing public-private partnership with government to meet growing demand for healthcare services due to a high burden of disease and pressure on public healthcare systems. We are aligned with the objective of national health insurance (NHI) to achieve quality universal health coverage for all South Africans and have been participating and engaging in the most sustainable design for such a system.

We respect the need for extensive regulation to ensure patient safety, better health outcomes and improved utilisation.

Life Healthcare is also a large taxpayer, providing essential public revenues for government to meet economic and social objectives.

## for society

We consider stakeholder and community interests in our strategy development, risk management and trade-off decisions. Our commitment to being a good corporate citizen extends to our role as an employer, healthcare provider and neighbour. We recognise the social impact of our facilities, which often serve as beacons of hope for patients and their families.

Society can rely on us to maintain the highest standards of care, ethical behaviour and sustainable practices. We also contribute to initiatives that achieve positive educational, health and community impacts.

# We report authentically

*Life Healthcare operates and has extensive interests in private healthcare facilities and healthcare services companies in southern Africa. The Group is listed on the JSE and has a secondary listing on the A2X. Life Healthcare also has a debt listing through Life Healthcare Funding Limited, which issues senior unsecured notes under its Domestic Medium Term Note Programme.*

## Our reporting approach and scope

The Life Healthcare sustainability report covers the financial year from 1 October 2024 to 30 September 2025 (the year or FY2025).

The report provides an overview of our ESG strategy and broader sustainability performance. We include commentary on performance for the year under review, progress against FY2025 and long-term targets and detailed ESG data (see *ESG performance data tables* on page 48). While performance commentary reflects the past year, our ESG strategy narrative is forward-looking, addressing long-term risks, opportunities and potential impacts.

Our material matters guided the content of this report by testing the relevance of our ESG strategy against risks and opportunities in our value chain and operating environment, stakeholder value considerations and the resources and relationships critical to our long-term sustainability.

Attract and retain  
employees and  
specialists

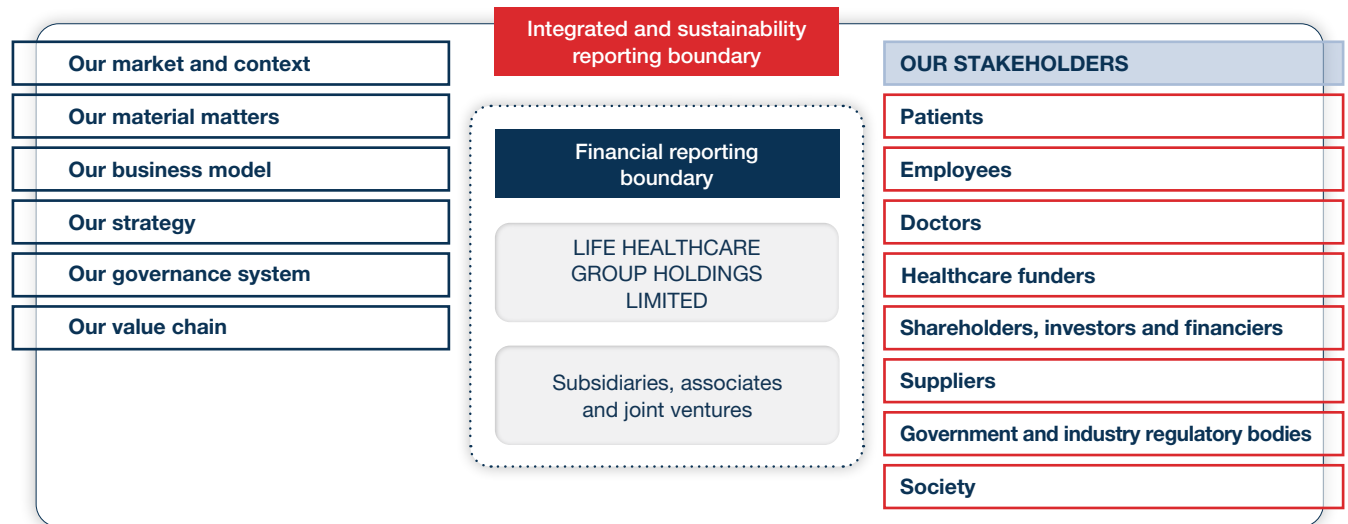
Adapt and grow our  
diversified business in a  
sustainable manner

Deliver care which  
is high-quality, cost-  
effective and people-  
centred

Be a trusted partner for  
all of our stakeholders

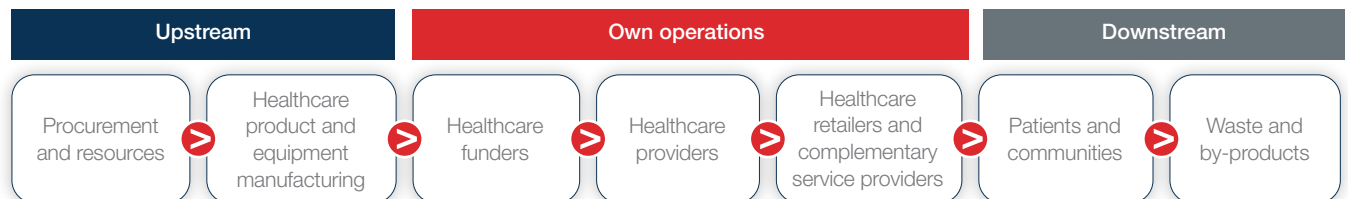
## Our reporting boundary

Life Healthcare operates via three segments in South Africa, Botswana and Namibia, consisting of hospitals, complementary services and healthcare services.



## OUR VALUE CHAIN

Our integrated and sustainability reports consider Life Healthcare's full value chain when identifying risks, opportunities and impacts. Our value chain extends from raw material to healthcare waste, with interconnected activities where we have different levels of control. We unpack these resources and relationships on page 13.



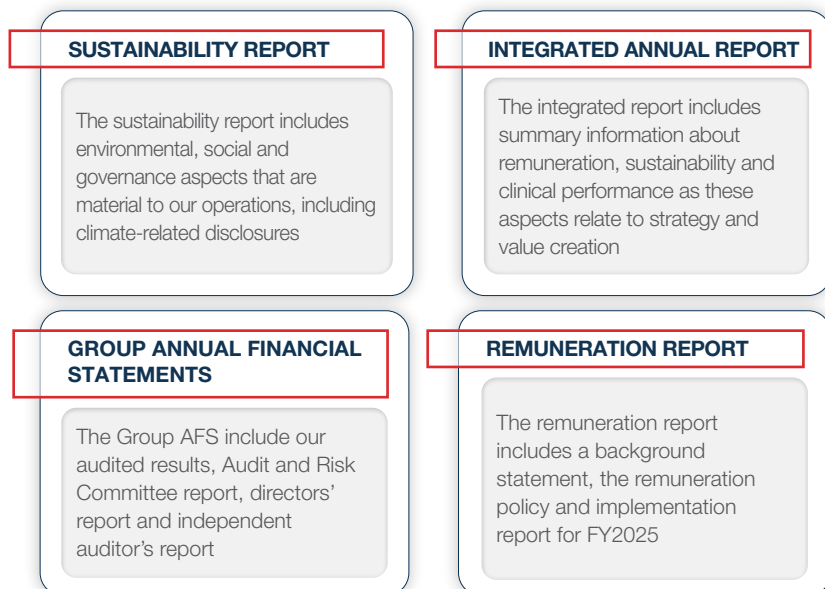
A complete list of the Group's associates and joint ventures is available in the Group annual financial statements (AFS).

## Our reporting process



## Our reporting suite

Our full reporting suite is available on our website at <https://www.lifehealthcare.co.za/investor-relations/results-and-reports/>



We report according to the requirements of:

- The Integrated Reporting Framework
- The King Report on Corporate Governance for South Africa, 2016<sup>1</sup> (King IV)<sup>TM</sup>
- The Companies Act (as amended)
- The Johannesburg Stock Exchange (JSE) Listings Requirements
- JSE Debt and Specialist Securities Listing Requirements
- International Financial Reporting Standards
- United Nations Sustainable Development Goals (SDGs)

### ADDITIONAL INFORMATION

The following information is available on our website:

- Interim and annual results presentations
- King IV<sup>TM</sup> compliance supplementary report
- Capital markets day presentation
- Our B-BBEE certificate
- Quality metrics for each Life Healthcare hospital
- Circulars and policies
- Domestic Medium Term Note Programme documents, including amended and new pricing supplements, amended and restated programme memorandum and guarantees

Upcoming information on the website:

- The Notice of our annual general meeting (AGM) and proxy voting form will be available in January 2026
- The 2025 Life Healthcare quality review will be available in March 2026

## Forward-looking statement

This report contains forward-looking statements that, unless otherwise indicated, reflect the Group's expectations as at 5 December 2025. The actual results may differ materially from our expectations if known or unknown risks or uncertainties affect the business or if estimates or assumptions prove inaccurate. The Group cannot guarantee that any forward-looking statement will materialise. Readers are cautioned not to place undue reliance on these forward-looking statements, and the Group disclaims any intention and assumes no obligation to update or revise any forward-looking statement.

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## USE OUR ICONS AS VISUAL KEYS

### GROWTH STRATEGY ICONS



Grow



Drive



Optimise

### INTERACTIVITY

This report is interactive, which means you can click on the name of the chapter in the main navigation to go to the start of the chapter. Hyperlinks to internal and external references are underlined.

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Limited assurance provided by BDO for non-financial indicator



KPI linked to remuneration

The following southern Africa key performance indicators (KPIs) were subject to limited assurance:

KPI	Unit of measurement
Healthcare risk waste generated	Kg/PPD
Patient safety adverse events	Total patient incidents/ PPD x 1 000
Paid patient days (PPD)	Number
Healthcare-associated infections (HAI)	HAI/PPD x 1 000
Scope 1 carbon emissions	tCO <sub>2</sub> e
Scope 2 carbon emissions (electricity)	tCO <sub>2</sub> e
Municipal water withdrawn	kL
General waste to landfill	Tonnes
General recycled waste	Tonnes

### MOVEMENTS IN OUR KPIs

Increase that is positive  
Increase that is negative  
Decrease that is positive  
Decrease that is negative  
Performance remained the same



# We have a diverse portfolio

*Life Healthcare is a leading diversified healthcare provider in southern Africa. We offer a comprehensive suite of acute care and complementary services, including emergency medical services, mental health, acute rehabilitation, renal dialysis, oncology, diagnostic imaging and nuclear medicine.*

## Our Group

Life Healthcare is one of the largest private healthcare providers in southern Africa. We have operations which span nine provinces in South Africa, Botswana and Namibia.

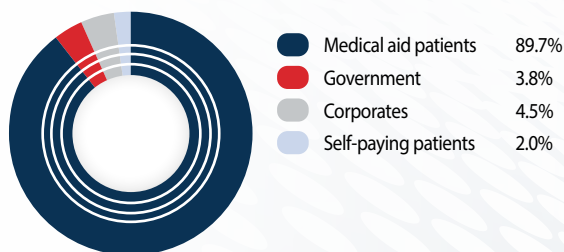
Our geographic footprint details are available in the integrated annual report.

**16 549**  
employees of whom  
**10 394**  
are nurses

**c. 3 000**  
specialists and allied healthcare professionals

**7**  
Life Healthcare learning centres

Our southern Africa customer profile according to revenue contribution



Our three biggest customers are Discovery Health Medical Scheme, Medscheme and the Government Employees Medical Scheme (GEMS). We typically contract annually with funders but also have longer-term contracts with our largest customers, who set tariff frameworks over a three- or four-year period.

Centralised Group services include business development, change management, clinical directorate, clinical product development, compliance, corporate social investment (CSI), credit management, data and analytics, finance, funder relationships, governance, health policy, human resources (HR), industrial relations, infection prevention, information security, information technology (IT), investor relations, legal, marketing and communications, nursing, patient services, pharmacy, procurement, property portfolio management, quality and risk.



### Hospitals

**84.9%** contribution to turnover

**Acute hospitals**  
**Day facilities**  
**Emergency units**

### Complementary services

**10.2%** contribution to turnover

**Life Mental Health**  
**Life Rehabilitation**  
**Life Renal Dialysis**  
**Life Oncology**  
**Life Diagnostics**

### Healthcare services

**4.9%** contribution to turnover

**Life Nkanyisa**  
**Life Health Solutions**

### Key

- Hospitals
- Life Mental Health facilities
- Life Rehabilitation units
- Life Renal Dialysis units
- Life Oncology units
- Life Diagnostics units
- Life Nkanyisa facilities
- Life Health Solutions sites
- Nursing learning centres

## Hospitals

### Acute hospitals

42

acute hospitals

278

surgical theatres

8 085

registered beds

17

cathlabs

5

vascular labs

### Day facilities

5

day hospitals

89

registered beds

15

surgical theatres

### Emergency

39

units

We mainly serve the medically insured market in South Africa, including private patients who are self-paying. The acute care hospital network comprises technologically advanced, multi-disciplinary hospitals offering specialised medical disciplines, community hospitals and day hospitals.

Our hospital network has a wide geographical spread with hospitals in seven of the nine South African provinces and Gaborone, Botswana. Hospitals differ in size and the range of facilities they offer, each adapted to offer high-quality services that meet local needs and demands.

We have a federated operating model where individual hospitals are managed by local management teams who report to regional managers across four regions: two coastal (east and west) and two inland (north and south).



## Complementary services

### Mental health

**9**  
facilities

**607**  
registered beds

### Acute rehabilitation

**7**  
units

**287**  
registered beds

### Renal dialysis

**74**  
units

**1 089**  
stations

### Oncology

**5**  
facilities

**32**  
chemotherapy units

**6**  
radiotherapy capability

### Diagnostics

**8**  
inpatient imaging  
facilities

**3**  
outpatient imaging  
facilities

**3**  
nuclear medicine facilities

**3**  
PET-CT scanners

Our complementary services are offered via specialised facilities that provide either outpatient or inpatient services. These provide care to patients dealing with specific conditions.

### Life Mental Health

We offer multi-disciplinary mental healthcare services, including psychiatry, treatment for dual diagnoses involving substance dependence and mental wellness support to help individuals manage issues that may affect their mental health.

### Life Rehabilitation

We are the country's leading provider of private acute rehabilitation services, delivering care for disabling and traumatic brain injuries.

### Life Renal Dialysis

We provide chronic and acute renal dialysis, including home-based peritoneal dialysis, supported by care co-ordinators for clinical and emotional guidance.

### Life Oncology

We offer technologically advanced diagnostic and interventional treatments in oncology. Our holistic model delivers advanced diagnostics, chemotherapy, radiotherapy and surgery, co-ordinating multiple specialists and treatment modalities.

### Life Diagnostics

Our nuclear medicine and diagnostic imaging services support diagnosis, treatment and disease management using basic and advanced imaging (X-ray, ultrasound, CT, MRI, mammograms) and nuclear medicine (PET-CT and SPECT-CT).

## Healthcare services

### Life Nkanyisa

**7**  
facilities

**4**  
provinces

**2 531**  
beds

We partner with provincial governments in South Africa to provide professional, quality and cost-effective healthcare services to some of the most vulnerable segments of the population. We deliver these services to provincial Departments of Health and Department of Social Development under contracts, which include frail care and long-term mental health services, focusing on long-term rehabilitation and community reintegration.

### Life Health Solutions

**198**  
offsite clinics

**12**  
offsite clinics

**14**  
mobile units

**8**  
emergency medical  
services sites

We offer integrated health solutions to companies of all sizes and have a fee-for-service model to service smaller businesses covering:

- Health and well-being services (employee wellness)
- Nurse-led primary healthcare services
- Occupational health
- Emergency medical services
- Complementary and advisory services

# WE REFLECT ON FY2025

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# Our performance in brief

We ensure that our performance drives outcomes aligned to our business strategy and ESG targets. The REM icon  indicates where measures are linked to our incentive plans.

## Solar roll out



Procurement process for a **9.3 MWp** installation has been completed

We continue to expand renewable energy capacity through our solar roll-out programme, which reduces reliance on the national grid and lowers emissions.

**Our target is to install 9 MWp in FY2025. We aim to reduce our carbon emissions to net zero by 2050 and reduce carbon emissions by 20% by 2030 based on the 2023 assured baseline data.**

## Care bundle compliance



**97.1%**

(2024: 97.3%)

We measure four key clinical indicators as a collection of evidence-based interventions that ensure clinical excellence in our facilities:

- Ventilator-associated pneumonia (VAP)
- Catheter-associated urinary tract infection (CAUTI)
- Central line-associated bloodstream infection (CLABSI)
- Surgical site infection (SSI)

**Our care bundle compliance target is 95%.**

## Patient experience



**8.59**

(2024: 8.54)

We want patients to receive a positive and compassionate experience through their care journey with Life Healthcare. We measure this through patient satisfaction surveys.

**Our patient experience target is 8.4.**

## B-BBEE empowered procurement spend



**102.4%** of total measurable procurement spend on B-BBEE enterprises

(2024: 102.9%)

Our commitment to economic empowerment is measured through our spend with empowered enterprises, with the emphasis on procurement spend with black and black woman owned enterprises.

**Our target is to achieve an 80% share of total measurable procurement spend on B-BBEE enterprises.**

## Investment in nurse training and development



**R76.8 million**

We invest in training and development to ensure a sustainable pipeline of skilled nurses and to strengthen the quality of care across our hospitals.

**Our targeted spend is R65 million on nursing training and development.**

## Senior management African, Coloured and Indian (ACI) representation



**44.1%**

(2024: 47.5%)

We focus on the diversity of the employees that we recruit and on the doctors we attract.

**Our targets are 3% improvement in senior management ACI representation and 70% ACI specialists recruited.**

## ACI specialists recruited (net)



**78%**

## Corporate social investment (CSI) spend on healthcare and communities



**R130.0 million**

(2024: R117.1 million)

Our community investment is focused on improving access to healthcare, supporting education and uplifting vulnerable communities.

**Our target is R115 million spend on health and community improvements.**

# A word with Adv Mahlape Sello, our SETCO Chairman

*At Life Healthcare, good corporate citizenship goes beyond compliance. It is about embedding our purpose of making life better into every decision we take.*

While ESG and sustainability are closely related, they are not identical. ESG refers to the specific environmental, social and governance criteria that investors use to evaluate how organisations manage risks and opportunities. Sustainability takes a broader perspective, focusing on how present needs can be met without compromising the long-term health of the environment and society. In this sustainability report, Life Healthcare sets out both our ESG strategy and our broader sustainability performance to provide a complete picture of the scope and intent of our work.

In FY2025, we monitored progress on initiatives linked to the ESG targets approved by the Board in November 2024 (see page 18). These targets were set based on trends observed in 2022, 2023 and 2024. We tracked performance against them throughout the year.

We also reviewed the further development of the ESG strategy submitted by the Executive Management Committee (ExCo), considering developments in global frameworks and standards, competitor performance and alignment with Life Healthcare's new growth strategy (see page 19).

The Committee undertook several deep-dive assessments:

**We do business ethically:** We reviewed how the Group upholds ethical standards, focusing on reports and complaints submitted via the tip-off line. While no unusual activity was identified, we examined how reports were categorised and investigated, ensuring outcomes were tracked to closure and that matters involving any employee or contracted professional were addressed in line with Group policies.

**We protect data:** We assessed measures to safeguard data and strengthen cyber-security, with an emphasis on protecting patient and employee information. We are confident that the controls in place are as robust and as effective as possible.

**We develop nurses, pharmacists and specialists and enhance transformation:** We oversaw training and recruitment initiatives to support our people, which advanced transformation, inclusivity and diversity. These efforts have contributed to the professional growth of our employees and specialists and strengthened representation across our workforce and supplier base.

**We manage emissions, energy, water use and waste:** We evaluated the management of environmental impacts. Our overall healthcare waste generation has decreased by 2.9%. Our total waste recycled has increased as a result of the national roll-out of our waste

recycling project and the Daniels smart sharp bins initiatives. We have recycled 23.1% of the total waste generated compared to 17.1% of the total waste generated in 2024.

Our Scope 1 and 3 emissions have decreased by 37.4% and 75.8%, respectively, as a result of reduced diesel usage and general waste sent to landfill.

**We serve communities:** We noted the Group's CSI initiatives which include cataract surgeries, partnerships with PinkDrive to promote breast cancer awareness and education programmes that encourage maths and science learning for schoolchildren.

Through our partnership with Soul Food, we help combat child malnutrition by providing affordable, nutrient-rich meals to crèches and schools in low-income areas.

Life Healthcare's long-running anti-GBV campaign, conducted annually during the 16 Days of Activism, has evolved into a mature, two-pronged initiative supporting both employees and communities. Safe spaces have been created for employees to share experiences and engage in open dialogue, while outreach programmes extend care to vulnerable patients.

**We manage our reputation and brand:** We oversaw the Group's approach to safeguarding its reputation and strengthening its brand through strategic public relations and thought leadership initiatives. We monitored how management engages with stakeholders, ensuring transparent communication of our values and the prompt resolution of issues to build trust and credibility in the market. We also reviewed the Group's PR and marketing efforts to ensure that brand integrity is upheld and reputational risks are effectively mitigated.

We have observed the tangible impact of Life Healthcare's sustainability activities across the Group and within our communities. SETCO has also carefully reviewed this report to ensure it communicates these achievements clearly to stakeholders.

We are confident that the plans in place will build on the progress achieved. As a committee, we will continue to ensure that Life Healthcare operates to the highest standards – ethically, responsibly and with a lasting positive impact on patients, employees and communities.

*SETCO, as a statutory committee under King IV™, oversees ethical conduct, sustainable development, stakeholder inclusivity and social and economic transformation. We also guide the Board on ESG matters, providing a framework for responsible business conduct.*



Adv Mahlape Sello

# Unpacking progress with Pete Wharton-Hood, our Chief Executive

*The past year marked both solid performance and significant strategic change for Life Healthcare.*

Following the sale of Life Molecular Imaging (LMI), we are now fully focused on our southern African business. This sharper focus allowed us to refine our business strategy, built on the pillars of grow, drive and optimise, and supported by key strategic capabilities closely aligned to our ESG priorities.

Concomitantly, we advanced our sustainability agenda by bringing long-standing initiatives into a coherent ESG strategy with clear, realistic and measurable targets. We have longer-term goals as outlined in the ESG strategy, but for FY2025 we had the following clear targets:

## Renewable energy roll-out

We aimed to expand renewable energy across our facilities, supporting environmental sustainability and operational efficiency.

South Africa's solar landscape is shifting rapidly. In response, we revisited our solar strategy by positioning energy as a strategic asset to improve sustainability, reduce operating costs and safeguard clinical operations against grid instability.

The procurement process for the next phase of our solar roll-out has been completed with installation to commence in FY2026.

## Investment in nurse training and development

We invested in building a sustainable pipeline of qualified nurses by funding the seven Life Healthcare learning centres, and by covering tuition fees in certain cases and providing external student stipends.

We have spent R76.8 million on nurse training compared to a target of R65 million.

## Diversity in senior management employees (ACI)

While we are behind our employment equity targets at top and senior management levels, we are performing well at middle and junior management levels.

Our ACI representation at senior management level has declined by 3.5%, falling short of our targeted increase of 3%. This shift is largely attributed to recent changes in our senior leadership team. This has inadvertently impacted our progress toward achieving our ACI representation goals.

## Diversity in specialist recruitment (ACI)

We have continuously recruited ACI specialists at an average rate of approximately 70%, accounting for both total gains and net gains.

In FY2025, we achieved 78% of ACI specialists recruited against a target of 70%.

## CSI spend

Our CSI initiatives continue to address community and health challenges. We invested R130.0 million in community and health initiatives, achieving our target of R115 million.

The funds disbursed supported high-impact initiatives in health and enterprise development, which are aligned with our strategic focus areas and national development priorities.

In addition to direct CSI disbursements, we made substantial contributions through support to indigent and uninsured patients who were treated in our facilities but were unable to afford private healthcare fees. This support is deliberate and a values-driven extension of our CSI commitment, which ensures vulnerable individuals receive critical medical care regardless of their financial circumstances. This initiative alleviates the burden on public health systems and affirms our role as a responsible corporate citizen in advancing equitable access to healthcare.

## B-BBEE spend

Our B-BBEE targets cover all group procurement, ensuring that our spend supports transformation and empowerment across our suppliers.

We have achieved 102.4% of measurable procurement spend on B-BBEE enterprises compared to a target of 80%.

Life Healthcare is committed to *making life better* for all South Africans, and our sharpened focus gives us a stronger foundation to deliver on that promise.

*As one of South Africa's largest healthcare providers and employers, we carry responsibility for the well-being of millions of patients. Our priority is to sustain a quality healthcare ecosystem that meets the needs of patients and their families, while growing the Group.*



Pete Wharton-Hood

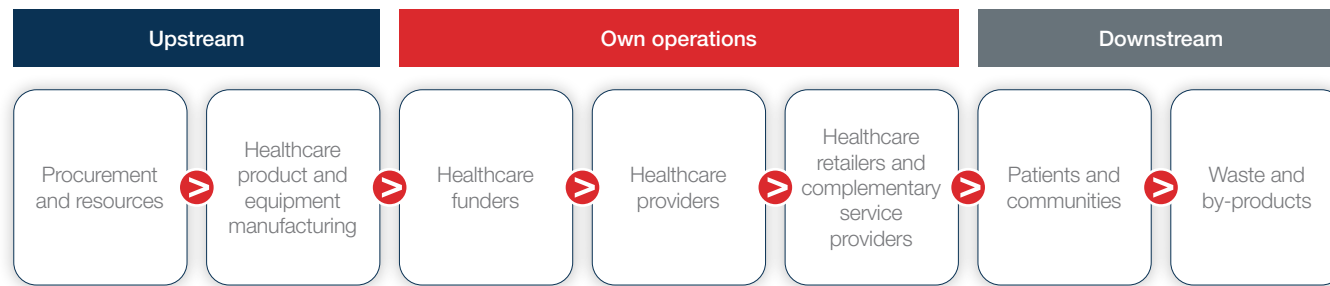
# WE UNDERSTAND OUR ESG RISKS AND OPPORTUNITIES



*Our ESG strategy is guided by data-driven insights on long-term trends that shape risks and opportunities, enabling proactive action.*

In FY2025, we conducted an ESG risk assessment guided by the principles of our enterprise risk management policy and framework, as detailed in the integrated annual report. The assessment applied the same disciplined methodology of risk identification, evaluation and prioritisation. It drew on insights from operational management, oversight functions and relevant stakeholders.

The assessment highlighted key risks, the actions taken to mitigate them and related opportunities. These help us make sure ESG risk is managed throughout the value chain and growth remains sustainable while meeting stakeholder expectations. We consider Life Healthcare's full value chain from raw material to healthcare waste, with interconnected activities where we have different levels of control.



## Procurement, resources and healthcare product manufacturing

Life Healthcare's value creation begins with securing the essential resources needed to deliver high-quality care. This includes medicines, equipment, consumables, critical utilities such as electricity and water and skilled employees. Ensuring these resources are available and reliable is essential, but it also exposes the Group to ESG risks.

We manage utility availability risks – particularly electricity and water, which are essential for our operations – to ensure continuity of operations and uninterrupted patient care.

Our value chain extends upstream to include the manufacturing and sourcing of healthcare products and equipment. We rely on ethical and compliant suppliers and manufacturers to ensure product quality and safety. We assess supplier practices against regulatory and environmental standards and favour those who demonstrate responsible production processes, fair labour practices and innovation in design.

Addressing skills shortages is a priority. We invest heavily in workforce development, training nurses through our Life Healthcare learning centres. We also support continuous learning through bursaries, partnerships with tertiary institutions and tailored in-house training programmes that address critical gaps not met by the broader labour market.

Employment equity is another focus area:

- At junior and middle management levels, demographic imbalances, particularly the predominance of female nurses, can make it challenging to meet sector targets. We respond by revising recruitment and talent policies, providing targeted development and embedding equity objectives into management performance plans.
- At senior and top management levels, the limited pool of female healthcare leaders presents similar challenges. Mitigations include strengthened succession planning, leadership development and incorporating equity targets into executive performance management.

## Healthcare funders

Risks from healthcare funders arise from factors such as stagnant membership, shifts to lower-tariff network plans, increasing concentration among large administrators, pressure on tariff revenue and the growing use of managed care and alternative reimbursement models that transfer risk to Life Healthcare.

These dynamics, combined with economic pressures and an ageing population, indirectly affect strategic investment decisions and create both challenges and opportunities. They allow us to expand services while promoting affordable access to healthcare, clinical excellence and innovation in products and services.

Regulatory uncertainty, particularly around the NHI and medical scheme reforms, further influences these decisions. We manage the associated high cost of compliance with legislation through updated compliance plans, budget approvals and strong governance oversight, as detailed in the integrated annual report.

At the same time, economic pressures and an ageing population are driving increased demand for acute and complementary services. This presents both an opportunity and a responsibility, allowing us to expand services while promoting affordable access to healthcare, clinical excellence and product development and innovation.

## Healthcare providers

Healthcare providers, including clinicians, deliver care to our patients.

In some regions, the shortage of skilled specialists poses a key risk to service delivery, which we address through targeted investments in specialist training and development.

Environmental incidents, such as workplace accidents, can disrupt services and endanger patients and employees. We manage these risks through clear reporting procedures, disaster management drills, regular employee training and effective reporting protocols.

Data privacy and cyber-security are critical risks, as breaches could expose sensitive personal information. These risks are managed through a dedicated Privacy Office and Information Security team, advanced security tools, employee training, threat monitoring and IT infrastructure improvements.

Operational disruptions, such as municipal infrastructure failures or extreme weather, are addressed by geographically diversifying facilities, maintaining insurance coverage and integrating climate risk management into operational planning. All facilities maintain emergency response plans which ensure business continuity.

Vendor non-conformance is managed through service level agreements, compliance audits and contingency plans to ensure uninterrupted care delivery.

## Complementary service providers

Services offered by our rehabilitation, mental health and oncology facilities, renal dialysis units and imaging centres form a critical part of the continuum of care. These providers extend treatment beyond the acute setting and ensure patients receive comprehensive, ongoing support, including detailed diagnosis, pre-treatment preparation and post-treatment follow-up.

The growing shift toward value-based and integrated care products presents significant opportunities. We can improve patient outcomes by better co-ordinating services across the care continuum.

## Patients and communities

Through our value chain, patients and communities benefit from access to affordable, high-quality care that improves health outcomes. At the same time, our operations create employment opportunities and support livelihoods.

## Waste and by-products

The final stage of our value chain is the responsible management of energy, water, waste and emissions.

Greenhouse gas emissions could create carbon tax liabilities and broader climate impacts. We mitigate these risks through targeted reduction strategies with clear targets. To avoid financial or reputational loss from inaccurate reporting, we are automating data collection processes, for example, by installing smart meters to measure electricity and water consumption.

When expanding facilities or considering greenfield developments, biodiversity and development risks are addressed upfront through environmental impact assessments and specialist recommendations.

For a list of the ESG risks and our existing controls and mitigating actions, refer to the *ESG risk register* on page 44.



# WE DRIVE SUSTAINABLE VALUE THROUGH OUR ESG STRATEGY



Life Healthcare's **vision** is to be the preferred healthcare provider and the best place to work.

Supporting this vision is our **ESG aspiration**: to make life better for our patients, employees and communities by embedding sustainability into our strategy and operations.

We believe sustainability makes life better in two important ways:

- From a financial perspective, it gives our shareholders confidence that their investment is delivering stronger outcomes and strengthening our ability to reinvest in and improve healthcare services
- From an impact perspective, it allows us to contribute directly to ESG outcomes that enhance the health and well-being of the communities where we operate

We know this requires a practical approach. That is why we are embedding sustainability into the way we run our business by setting measurable targets to reduce our environmental footprint, support our people and communities and expand access to quality healthcare.

To guide our efforts, we have established overarching long-term Group goals, 2030 targets across all three dimensions, environment, social and governance, and annual targets to ensure measurable progress.

Our targets for FY2025, which include environmental and social measures, are based on performance trends from 2022, 2023 and 2024 and were approved by the Board in November 2024.

Achieving these targets and our longer-term goals requires collaboration beyond our own operations. By partnering with organisations that share our values and taking a leadership role in the healthcare sector, we can extend the impact of our initiatives and influence positive change across the industry.



## ESG strategy framework

	CONTEXT	STRATEGIC OBJECTIVES	GROUP INITIATIVES	TARGETS FY2025*	TARGETS 2030
Environmental	Climate change is a major contributor to global environmental crises, which, unless addressed, will directly impact the health and well-being of millions of people	<ul style="list-style-type: none"> <li>We measure, monitor and manage energy, water and waste</li> <li>We monitor Scope 1, 2 and 3 carbon emissions</li> </ul>	<ul style="list-style-type: none"> <li>Install solar PV systems</li> <li>Drive water security</li> <li>Implement waste management strategy</li> <li>Reduce general waste to landfill</li> <li>Dispose of medical waste responsibly</li> <li>Implement offset projects</li> </ul>	<ul style="list-style-type: none"> <li>Roll out 9 MWp of solar capacity across our facilities (50% weighting)</li> </ul>	<ul style="list-style-type: none"> <li>Reduce carbon emissions by 20%</li> <li>Increase water security, renewable energy use and recycled general waste</li> <li>Achieve net zero general waste to landfill</li> <li>Make progress towards achieving net zero emissions by 2050</li> </ul>
Social	Social factors such as education, income, equality and access to healthcare are key determinants of health and well-being for communities and individuals worldwide	<ul style="list-style-type: none"> <li>We contribute to affordable access to healthcare for all</li> <li>We focus on clinical excellence</li> <li>We drive diversity and inclusion</li> <li>We invest in training and skills development</li> <li>We invest in clinical research and development</li> <li>We serve communities</li> </ul>	<ul style="list-style-type: none"> <li>Promote gender empowerment</li> <li>Invest in product innovation</li> <li>Drive employee value proposition (EVP) measures</li> <li>Develop training and skills development programmes</li> </ul>	<p><b>People</b></p> <ul style="list-style-type: none"> <li>Invest R65 million in nurse training and development (10% weighting)</li> <li>Increase ACI representation in senior management by 3% (10% weighting)</li> </ul> <p><b>Specialists</b></p> <ul style="list-style-type: none"> <li>70% ACI specialists recruited (10% weighting)</li> </ul> <p><b>Community</b></p> <ul style="list-style-type: none"> <li>Direct 80% of measurable procurement spend to empowered enterprises (10% weighting)</li> <li>Allocate R115 million to CSI health and community improvement projects (10% weighting)</li> </ul>	<ul style="list-style-type: none"> <li>Achieve B-BBEE targets</li> <li>Meet diversity and inclusion targets</li> <li>Reduce employee turnover</li> <li>Achieve training KPIs</li> <li>Deliver CSI commitments</li> <li>Be recognised as an employer of choice</li> </ul>
Governance	Strong governance principles provide assurance to our investors and enable high-quality, safe healthcare services that improve outcomes for communities	<ul style="list-style-type: none"> <li>We do business ethically</li> <li>We maintain sound governance</li> <li>We implement fair remuneration practices</li> <li>We ensure the protection of patient and employee data</li> </ul>	<ul style="list-style-type: none"> <li>Maintain Board independence</li> <li>Enhance Board diversity and expertise</li> <li>Ensure fair remuneration practices</li> <li>Enforce Code of Conduct</li> <li>Protect data and ensure cyber-security</li> </ul>	None	<ul style="list-style-type: none"> <li>Improve Board diversity, tenure and skills</li> <li>Enhancing the ESG scorecard for leadership through continued improvement</li> </ul>

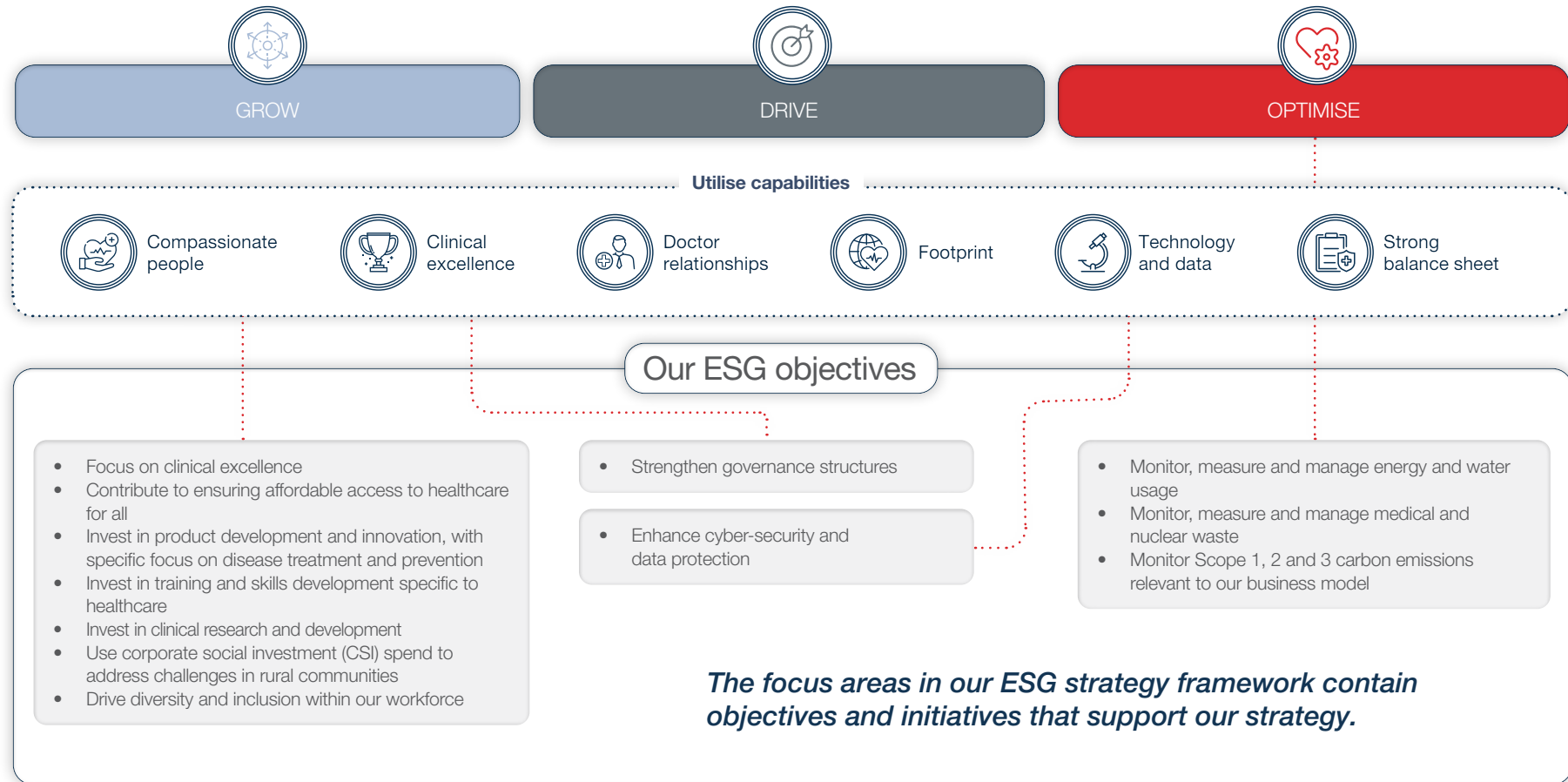
\* These targets account for 5% of the total reward under the single incentive plan, with the weighting of each target shown here.

## Business strategy integration

Over the past two years, Life Healthcare made strategic decisions that refocused the Group on southern Africa, reshaping our market opportunity and requiring a strategic reset in FY2025. Key strategy reviews and approvals took place through executive and Board sessions, with the updated strategy was shared at our February 2025 capital markets day.

Our ESG strategy supports our business strategy to deliver on our purpose.

## Our growth strategy and ESG strategy framework



## ESG strategy roadmap

### 2022

We developed our 2030 ESG strategy.

### 2023

We agreed on long-term leadership KPIs.

### 2024

We cascaded the 2026 zero general waste to landfill strategy to operations. We achieved a 4.5% reduction in carbon emissions vs 2023 contributing towards our long-term strategy.

### 2025

We implemented a comprehensive ESG performance scorecard for senior leadership. We rolled out a national general waste recycling project.

### 2026–2029

We will review our 2023 non-financial baseline key performance measures, assess our material matters and refine our ESG strategy. We will monitor delivery against the 2030 strategy, track progress and embed initiatives across operations.

### 2030

We aim to achieve our Group targets.

## SUSTAINABLE DEVELOPMENT GOALS

We recognise the importance of the SDGs as a global framework for addressing critical ESG challenges.

While we have not embedded the SDGs directly into our strategy, our initiatives in areas such as healthcare access, education, gender equality, decent work and clean energy contribute towards progress on several of these goals.

We will continue to consider the SDGs as we refine our sustainability approach and identify where we can make the most meaningful contribution.



# WE OPERATE RESPONSIBLY

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# Our environmental strategic objectives

We measure, monitor and manage energy, water and waste

## WE MANAGE ENERGY

Phase 1 solar PV roll-out completed with  
**5.67 MWp** peak installed<sup>1</sup>

Total diesel consumption decreased by **62%**

*Energy is essential for uninterrupted hospital operations and patient safety. Our approach to energy management balances optimising the energy mix, improving efficiency and ensuring reliable backup supply to reduce fossil fuel reliance while maintaining energy security.*

Healthcare facilities rely on electricity to power medical equipment and life-support systems, where interruptions or inadequate supply can negatively affect patient outcomes. In South Africa, rising electricity costs, ageing infrastructure and supply risks add pressure to energy management.

At the same time, the imperative to reduce carbon emissions makes efficient, reliable energy use a priority.

## STRATEGIC APPROACH, INITIATIVES AND PROGRESS

### Diversifying our energy portfolio through renewable integration

Expanding and supplementing our grid supply with renewable energy sources across facilities

### Optimising energy performance

Implement measures and solutions to reduce energy consumption

### Diversifying our energy portfolio through renewable integration

We are strategically transitioning our energy mix by progressively incorporating renewable sources through a phased implementation framework. Our approach prioritises on-site renewable installations at critical operational facilities to enhance energy resilience and establish long-term cost predictability.

Our renewable energy strategy encompasses three complementary pathways:

- On-site generation (phase 1): initial deployment focused on proving technical and financial viability through pilot installations, followed by systematic roll-out across priority facilities
- Scaled deployment (phase 2): expansion of on-site installations to additional locations based on technical feasibility and strategic value
- Offsite procurement (phase 3): exploration of wheeling arrangements and virtual power purchase agreements to access larger-scale renewable projects and optimise our energy sourcing beyond physical site constraints

<sup>1</sup> Phase 2 roll-out plan and procurement process completed with installation to commence in FY2026.

Solar energy is our primary renewable focus. We maintain flexibility across multiple acquisition and financing structures, including direct ownership, power purchase agreements and potential hybrid financing models in the future, selecting the optimal approach based on facility-specific requirements and the overall portfolio strategy.

Investment decisions are informed by comprehensive financial modelling that evaluates total lifecycle implications across a multi-decade horizon to support alignment with both operational efficiency objectives and broader ESG commitments. Our approach integrates tax optimisation strategies to maximise investment returns while advancing sustainability goals.

Beyond generation capacity, our energy roadmap also incorporates resilience planning, distributed energy resources and portfolio-level optimisation to ensure operational continuity and strategic energy independence across our facility network.

## METRICS AND TARGETS

### FY2025 target

Roll out 9 MWp of solar capacity across our facilities

### What we have achieved

**6.7 GWh** of renewable energy contributing 3.9% of energy consumption

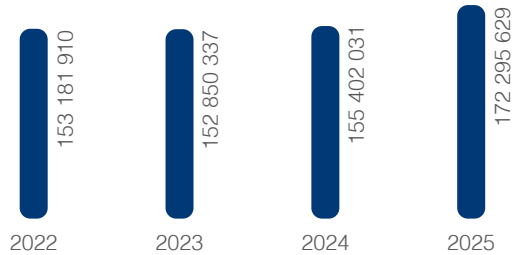
**9.3 MWp** peak planned capacity planned for phase 2 roll-out

Procurement process completed with installation to commence in FY2026

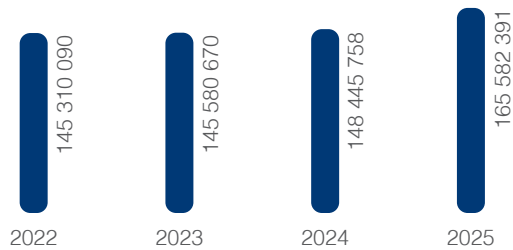
Strategic targets:

- Increase renewable energy use

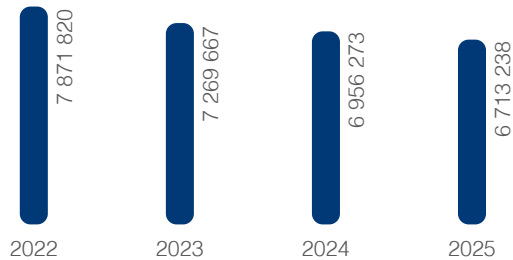
### Total electricity consumption (kWh)



### Purchased electricity consumption (kWh)



### Renewable energy consumption (kWh)



See the KPI data tables on page 48 for a further breakdown of energy consumption.

### Optimising energy performance

Our energy strategy balances supply diversification with demand-side efficiency, recognising that consumption reduction delivers immediate environmental and financial benefits. We deploy intelligent monitoring infrastructure across our facilities to enable data-driven decision-making and targeted performance improvements.

Our efficiency initiatives include equipment lifecycle management, which prioritises high-efficiency replacements that deliver measurable consumption reduction. All capital projects incorporate energy-efficient design principles from inception, embedding sustainability into our operational infrastructure while securing long-term economic advantages.

Our multi-year energy transformation follows a deliberate progression:

- Foundation phase: strategic planning, financial modelling (ROI), technical feasibility assessment and pilot validation
- Deployment phase: systematic roll-out of proven solutions across priority facilities
- Optimisation phase: portfolio-level integration, advanced technology assessment (including energy storage) and continuous performance enhancement
- Maturity phase: achievement of renewable energy and efficiency targets through sustained execution



## WE MANAGE WATER USE

**We reduced total municipal water withdrawn by 7.4%**

**We have developed a water security plan**

**We added 3 new and re-established 6 boreholes**

**14.9% Total borehole contribution (2024: 4.3%)**

**5 additional borehole projects will be added in FY26**

***Managing water responsibly is vital in healthcare. Uninterrupted access to clean water is critical for patient safety, infection control and smooth hospital operations. Our approach combines water efficiency and securing supply to reduce consumption and safeguard continuity.***

Healthcare facilities are highly water-intensive and Life Healthcare relies heavily on water for patient care, including sterilisation, cleaning, laundry, food preparation, sustenance and sanitation. The Occupational Health and Safety Act (1993) require facilities to maintain safe and hygienic working environments, supported by reliable water access. Interruptions or poor-quality supply can compromise hygiene standards, increase infection risks, disrupt essential medical services and impact patient experience.

In South Africa, growing water scarcity, ageing municipal infrastructure and supply disruptions heighten the urgency of responsible water management.

## STRATEGIC APPROACH, INITIATIVES AND PROGRESS

### Advance water stewardship and operational efficiency

Use efficiency measures and innovative solutions to minimise water consumption at facilities

### Ensure supply resilience and operational continuity

Secure reliable water sources and infrastructure to safeguard operations against supply disruptions

## Advancing water stewardship and operational efficiency

We recognise water management as both an environmental imperative and a critical operational priority. Our approach balances consumption optimisation with supply security and addresses resource scarcity, cost management and regulatory expectations through integrated planning and systematic execution.

Group-wide monitoring infrastructure provides real-time visibility into consumption patterns, enabling data-driven prioritisation, intervention design and performance tracking. This analytical foundation supports improvement methodologies and informed resource allocation across our facility portfolio.

Our water efficiency strategy includes multiple intervention pathways:

- Infrastructure optimisation: systematic upgrade of water delivery systems and fixtures to high-efficiency specifications.
- Technology deployment: implementation of leak detection capabilities and automated monitoring solutions to minimise losses and enable rapid response.
- Alternative sourcing: strategic development of storage systems to reduce dependence on primary supply sources.

- Behavioural integration: embedding water consciousness into operational practices and facility management protocols.
- Each facility operates within a tailored efficiency framework that reflects site-specific conditions, consumption profiles and improvement potential. Progress is measured against baseline performance metrics, with achievements validated through continuous monitoring and reporting.
- Strategic commitment: achieve meaningful reduction in total water consumption and optimise utilisation of alternative water sources within the current planning horizon, balancing operational requirements with long-term sustainability objectives.

## Ensuring supply resilience and operational continuity

Uninterrupted water access is fundamental to delivering safe, high-quality patient care and maintaining operational standards. Our water security strategy addresses supply vulnerability, quality assurance and regulatory compliance through comprehensive resilience planning.

We have established standards for water backup capacity designed to ensure operational independence during external supply disruptions while meeting critical safety requirements. Our resilience framework prioritises infrastructure investments that deliver both operational continuity and strategic flexibility.

Our multi-layered security approach incorporates:

- On-site storage capacity: strategic installation and expansion of water holding infrastructure to provide operational buffers
- Alternative source development: deployment of groundwater access points where hydrogeological conditions and regulatory frameworks permit
- Quality management: maintenance of water standards that meet health, safety and regulatory specifications across all supply sources

Our water management transformation follows a structured progression:

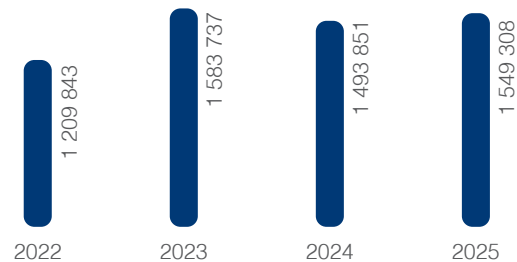
- Assessment and foundation: establishing baseline understanding through comprehensive audits, deploying monitoring infrastructure and defining compliance parameters
- Strategic planning: scoping security and efficiency initiatives, prioritising interventions based on risk and opportunity profiles
- Implementation phase: executing compliance projects, advancing security infrastructure and deploying efficiency solutions across the portfolio
- Continuous optimisation: sustaining improvement programmes, refining performance and adapting strategies to evolving conditions and priorities

This phased methodology ensures systematic risk mitigation, optimal capital deployment and sustained progress toward our water management objectives while maintaining operational excellence and regulatory compliance.

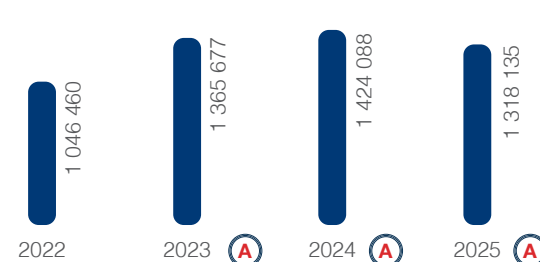
## METRICS AND TARGETS

No FY2025 targets were set for these metrics. We measure water withdrawn sourced from municipal and boreholes, these measures contribute to the 2030 target of increasing water security. We aim to implement water usage improvement initiatives at 100% of viable facilities.

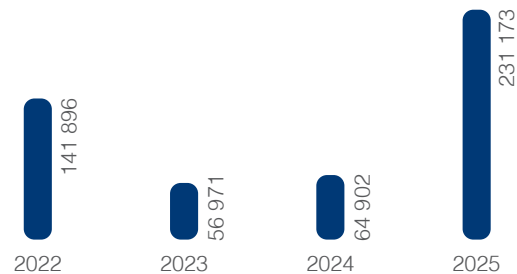
Total water withdrawn (Kℓ)



Total municipal water withdrawn (Kℓ)



Total water withdrawn – boreholes (Kℓ)



See the KPI data tables on page 48 for a detailed breakdown of water withdrawal by source.



## WE MANAGE WASTE

**100% of healthcare risk waste (HCRW) was disposed of responsibly**

**We reduced general waste to landfill by 19.8%**

**Our improved waste recycling initiative has been rolled out at 39 facilities**

***Managing waste responsibly is essential in a healthcare environment where the health and safety of patients, employees and communities must be protected. Our approach is guided by international best practice and local regulatory standards, with the dual aim of minimising environmental impact and safeguarding human well-being.***

Healthcare activities save lives, but they also generate large volumes of waste. Most of this is general, non-hazardous waste and the remainder is HCRW, which is hazardous and carries risks of infection, toxicity or radiation exposure. HCRW includes sharps such as needles and syringes, pathological and infectious materials, expired pharmaceuticals, chemical residues and radioactive by-products. If not properly handled and treated, such waste can spread HIV and hepatitis through unsafe injections, release toxic pollutants through poor incineration and contaminate soil and water through untreated disposal<sup>1</sup>.

In South Africa, healthcare waste management is regulated under several laws and standards:

- The National Environmental Management: Waste Act (2008) and Waste Classification and Management Regulations (2013, amended 2024) define HCRW and assign responsibilities to generators, transporters and treatment facilities
- The National Health Act regulations (2014) require healthcare establishments to prepare Health Care Waste Management Plans and implement safe procedures for segregation, storage, handling and disposal
- South African National Standards (SANS), including SANS 10248 (handling and packaging of HCRW) and SANS 10229-1 (transport of dangerous goods)
- The Occupational Health and Safety Act (1993), requires healthcare facilities to protect employees through safe handling of hazardous substances

## STRATEGIC APPROACH, INITIATIVES AND PROGRESS

### Ensure 100% responsible treatment, incineration and disposal of HCRW

Safeguard human health and the environment by always disposing of HCRW in full compliance with regulations

### Eliminate general waste to landfill by 2030

Drive innovation and efficiency to achieve zero general waste to landfill across all operations

## Responsibly dispose of HCRW

HCRW includes anatomical, infectious, pharmaceutical and radioactive waste generated from diagnostic and therapeutic nuclear medicine practices, which use radiopharmaceuticals.

HCRW is an unavoidable by-product of hospital operations. Improper handling or disposal poses operational, legal and reputational risks. Given the potential risks, management of HCRW is subject to stringent regulation and we ensure its disposal meets all compliance and safety standards. It is non-negotiable that our facilities dispose of 100% of HCRW responsibly.

<sup>1</sup> <https://www.who.int/news-room/fact-sheets/detail/health-care-waste>

Life Healthcare has formal HCRW procedures in place. Waste is separated at source to prevent cross-contamination with general waste, correctly stored, labelled and recorded. The two legally approved treatment processes are used, namely incineration and autoclaving. The treated waste is transported by our registered HCRW service providers and disposed of at an authorised landfill site. Compliance is monitored through internal and external audits, with certificates of destruction obtained from service providers. Safety, health and environment regional managers oversee training workshops and ongoing compliance across our facilities.

Operational and reputational risks can arise if service providers fail to collect waste on time. These risks are mitigated through contingency clauses in vendor service level agreements, agreed collection schedules and emergency storage arrangements within hospitals to accommodate unforeseen disruptions.

## Reduce general waste to landfill

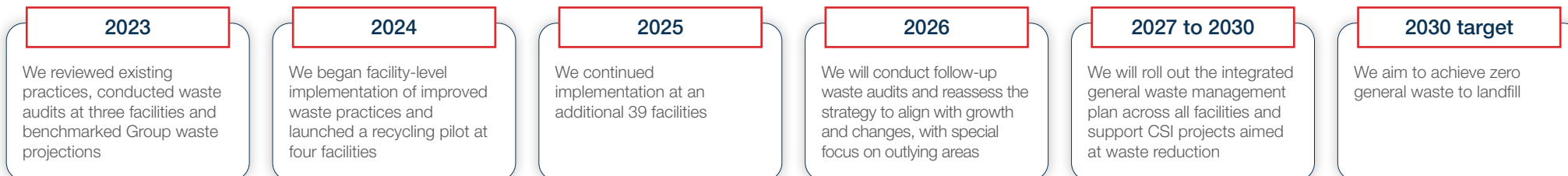
General waste, including non-clinical waste such as food, packaging and paper, is generated through our daily operations. Our approach is to reduce the proportion sent to landfill through an integrated, facility-level waste management and recycling initiative.

Through this initiative, we have introduced general waste sorting and recycling at 38 facilities, separating streams as close to the source as possible to improve the quality of recyclables. Partnering with an integrated waste management service provider has allowed us to classify and manage waste according to best environmental practices, including separation at source for five recyclable grades, e-waste management and organic waste initiatives.

In FY2025, we launched a project at facilities in Gauteng and KwaZulu-Natal to recycle and reuse sharps containers. Instead of being discarded after a single use, containers are collected, sanitised and reused. Given the volume of sharps generated across our facilities, this initiative significantly reduces waste and environmental impact, while maintaining strict safety and compliance standards. See page 27.

Progress on general waste disposal is tracked and reported, with our registered waste service provider subject to annual compliance audits under a group-wide service level agreement. Green procurement is advanced through sustainability questionnaires in tender processes and ongoing engagement with suppliers on sustainable product alternatives.

Our long-term target is to achieve zero general waste to landfill by 2030. We plan to reach this by progressively reducing the volume of waste we generate, increasing recycling and diversion so that, by 2030, 90% of general waste is diverted from landfill and the 10% remaining balance is offset through accredited carbon credit programmes.



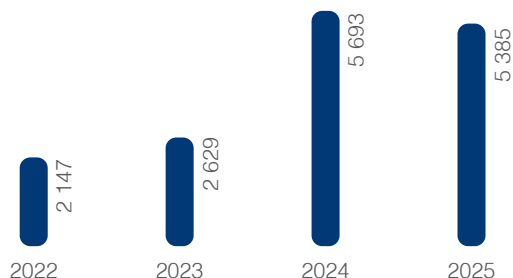
## METRICS AND TARGETS

Different patient profiles will generate different levels of waste and our case mix can affect our waste totals year-on-year. There are no FY2025 targets for these metrics, as the target for HCRW is always 100%.

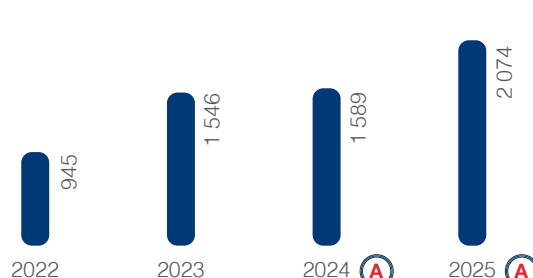
Strategic targets:

- 20% reduction in carbon emissions in 2030
- Increase recycled general waste
- Achieve net zero general waste to landfill
- Make progress towards achieving net zero emissions by 2050

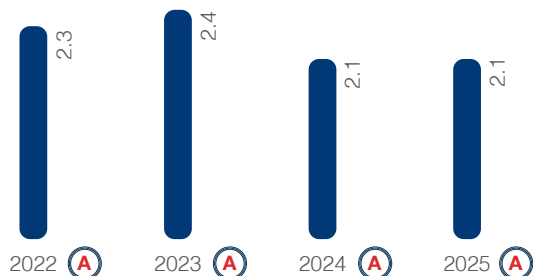
Total general waste generated (tonnes)



Total general waste recycled (tonnes)



Total HCRW generated/PPD (kg/PPD)



See the KPI data tables on page 48 for a detailed breakdown of HCRW and general waste streams.



## Under the microscope

### SAFER AND MORE SUSTAINABLE SHARPS MANAGEMENT AT LIFE HEALTHCARE

#### Why was this a challenge Life Healthcare wanted to tackle?

Managing sharps waste – used needles and other sharp medical instruments – has long been a challenge for hospitals. Traditional disposable sharps containers expose healthcare workers to potential needlestick injuries during handling and disposal. They also generate large amounts of single-use plastic and the frequent replacement of containers consumes considerable time and resources.

#### What did we do?

In August 2023, we introduced the Daniels Sharpsmart reusable sharps container system, which has now been rolled out at facilities in KwaZulu-Natal, Bloemfontein and Klerksdorp. The system replaces disposable containers with engineered reusable containers designed to reduce the risk of needlestick injuries and reduces the generation of plastic waste in our HCRW stream. Our teams received comprehensive training to ensure safe and correct use, and we integrated the system into our existing waste management processes. The Sharpsmart containers feature multiple safety measures, including overfill protection, gravity-balanced trays and needle-impenetrable materials.

#### What is the impact?

Since the roll-out, we have recycled 3 986 smart sharp containers and diverted 2.6 tonnes of plastic from landfill.

The reusable containers have significantly reduced plastic waste, improved worker safety and streamlined our waste management processes.

## We monitor Scope 1, 2 and 3 carbon emissions

**We reduced Scope 1 carbon emissions by 37%**

*Climate change drives environmental crises that impact business continuity and threaten the health and well-being of millions worldwide. Life Healthcare has set ambitious goals to reduce emissions, aiming for net zero by 2050. In May 2023, the Board approved a medium-term target of a 20% reduction by 2030 off the 2023 baseline.*

To help reach this, we have developed systems to measure and monitor Scope 1, 2 and 3 emissions:

- Scope 1 (direct emissions): emissions from sources we own or control, such as diesel used in generators and petrol use in company vehicles, heavy fuel oil (HFO) used at our laundry and liquified petroleum gas (LPG) used in our kitchens
- Scope 2 (indirect emissions from energy): emissions from the purchased electricity
- Scope 3 (other indirect emissions): all other emissions that occur in our value chain, including those from suppliers, waste, water and coal

These measurements gave us a clear view of our carbon footprint, helped us establish a 2023 baseline and guided the setting of meaningful reduction targets.

Our primary focus is energy, the largest source of emissions. Adopting renewable energy and improving efficiency that delivers the greatest impact.

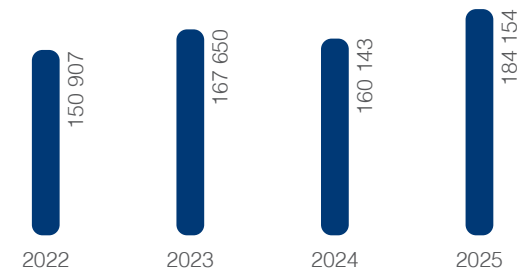
We also manage other resources to support emissions reduction. Water and waste contribute indirectly to carbon emissions through the energy required for treatment, pumping and disposal, while diverting waste from landfill reduces methane emissions. Fuel use contributes less significantly to our overall emissions. Diesel consumption in generators is expected to remain stable through 2030.

Beyond reducing emissions at source, we are exploring sustainable carbon offset initiatives to balance unavoidable emissions, particularly Scope 3 and those arising from growth projects.

This summary outlines our initiatives and progress toward the 2030 target of reducing emissions by 20% from baseline levels. Because each initiative is measured differently, we standardise the data by converting all metrics to a per paid patient day measure. This allows us to track performance collectively and monitor progress consistently across the Group.

Our overall carbon emissions increased by 15% as a result of the updated Eskom emission factor of 1.0 tonne per MWh to 1.08 tonnes per MWh, as well as the UK government factors for GHG emissions. Furthermore, the reduction in loadshedding increasing electricity consumption while decreasing diesel consumption.

Total carbon emissions (tCO<sub>2</sub>e)



See the KPI data table on page 48 for a breakdown of emissions by scope.

***“Climate change is already reshaping health outcomes, particularly in vulnerable communities across South Africa. While the public sector and charitable organisations play a central role, it is essential that healthcare groups such as Life Healthcare contribute innovative solutions to help address these national challenges.”***  
– Dr Victor Litlhakanyane, Life Healthcare Chairman



# Our social strategic objectives

We contribute to affordable access to healthcare for all

Life Paarl Valley Hospital  
will be the sole **cardiac**  
**facility** within  
a 40km radius

**74** renal dialysis units  
now serve seven South  
African provinces and  
Namibia

Complementary  
services revenue  
**doubled** in  
five years

*Access to healthcare services is a fundamental human right protected by the South African Constitution. Section 27 guarantees that everyone has the right to healthcare and prohibits refusal of emergency medical treatment. One of Life Healthcare's new strategic pillars is to grow our footprint in key locations, which improves access to quality care.*

This is particularly important in South Africa's challenging private healthcare market, where growth opportunities are limited. In addition, medical aid members face shrinking benefits as funders manage rising costs driven by an increasing burden of disease and clinical resource shortages.

## STRATEGIC APPROACH, INITIATIVES AND PROGRESS

Through the strategic expansion of our facilities and services, we enable patients to access safe, technologically advanced care and achieve optimal outcomes at an affordable cost.

Market realities, economic conditions, disease trends and the aim of building a sustainable, profitable business guide our growth strategy. We evaluate investments and divestments by considering financial and social factors, guided by the principle that healthcare is a basic human right. For example, a rural hospital may deliver lower financial returns but provide essential healthcare access and employment. In such cases, our decisions balance social impact with shareholder returns.

Our growth strategy includes:

- Expanding through greenfield projects by targeting new builds in growth geographies, such as the 140-bed Life Paarl Valley Hospital, scheduled to open by the end of 2027
- Growing through brownfield expansions that increase capacity at existing facilities in high-demand areas
- Strengthening our network and footprint by acquiring new facilities
- Diversifying revenue and improving access by further expanding complementary lines of business





## METRICS AND TARGETS

We track the impact of our initiatives using project-specific performance indicators, including social and financial measures. This ensures our growth advances both healthcare accessibility and sustainable business performance.

Strategic targets:

- Promote gender empowerment
- Invest in product innovation
- Drive employee value proposition (EVP) measures
- Develop training and skills development programmes

Read more about our growth strategy and our progress in FY2025 in the integrated annual report.

### Under the microscope

#### TACKLING CHILD MALNUTRITION THROUGH THE SOUL FOOD INITIATIVE

##### Why was this a challenge Life Healthcare wanted to tackle?

South Africa continues to face high levels of unemployment and poverty, leaving many families unable to provide adequate nutrition for their children. This has led to alarming rates of child malnutrition and stunting, particularly in children under the age of five, where the window for healthy physical and cognitive development is limited. Without proper nutrition during these formative years, the opportunity for full physical and cognitive development is lost forever. The long-term consequences are profound, both for individuals and for society.

##### What did we do?

In 2022, Life Healthcare partnered with Soul Food, a non-profit organisation focused on combatting child malnutrition through affordable, scientifically formulated meals. The Soul Food range includes a fortified porridge for children aged one to seven, along with nutrient rich casseroles to ensure dietary variety and prevent food fatigue. Developed in partnership with academics and nutrition experts, each meal contains the essential vitamins and minerals needed for healthy growth at a cost as low as R2.10 per portion. Life Healthcare's financial support enables the distribution of these meals to crèches and schools in low-income communities across Soweto, Ekurhuleni, the Vaal and Kuruman.

##### What is the impact?

In FY2025 alone, over 700 000 meals were provided, helping vulnerable children access the nutrition they need for healthy growth. Since the start of our partnership, Soul Food has expanded its footprint and gained recognition from provincial government stakeholders for its critical role in improving child health outcomes. This initiative aligns with Life Healthcare's commitment to promoting health, education and community well-being by giving children the best possible start in life.

## We focus on clinical excellence

Our patient experience survey  
response rate of **27.91%**  
exceeded the industry norm

Adverse event rate  
**3.10** per 1 000 paid  
patient days

Care bundle  
compliance was  
**97.1%**

*High-quality care improves our patients' health outcomes, reduces medical errors and enhances overall patient satisfaction. Excellence relies on clear standards and measurements and learning from patient feedback and adverse clinical events. Our approach to clinical excellence means delivering safe, effective and patient-centred care, guided by our clinical governance framework.*

For more detail on our clinical excellence approach and outcomes, refer to our integrated annual report.

### STRATEGIC APPROACH, INITIATIVES AND PROGRESS

Life Healthcare's clinical governance framework follows the seven pillars recommended by the World Health Organization:



This year, we enhanced patient experience by introducing patient navigators in emergency units. They communicate delays and explain processes, which contributed to improved patient experience scores.

We also strengthened our quality management system to improve adverse event reporting.

We worked with doctors, pharmacists, nurses and specialist teams to expand collaboration and learning across facilities. Participation also increased in multi-disciplinary meetings, mortality and morbidity reviews and antimicrobial stewardship initiatives, which ensure appropriate antibiotic use and prevent resistance. These actions facilitated quality research activity and supported targeted improvement plans.

### METRICS AND TARGETS

We use a quality scorecard to track clinical outcomes across all facilities, including renal and acute rehabilitation units. Measures are selected by our clinical leadership teams from internationally recognised standards.

#### Patient experience

We survey patients using the US Hospital Consumer Assessment of Healthcare Providers and Systems to assess communication, responsiveness, cleanliness and care.

#### Patient safety

We track outcomes for adverse events and healthcare-associated infections (HAIs) according to the Centre for Disease Control and Prevention standards. Never-events, which are serious incidents that should not occur, are thoroughly investigated and corrective measures applied.

#### Clinical processes and outcomes

We monitor adverse events, including heart attacks, maternal mortality and adherence to antimicrobial stewardship principles.

#### Care bundle compliance

Our care bundle consists of evidence-based interventions across ventilator-associated pneumonia (VAP), surgical site infections (SSI), catheter-associated urinary tract infections (CAUTI) and central line-associated bloodstream infections (CLABSI). Our target is 95% compliance and low infection rates.

See the integrated annual report and quality review for detailed performance and initiatives and a breakdown of care bundle compliance by the clinical indicators.

*"Clinical governance puts patients at the centre and ensures care that extends beyond the hospital. We are expanding outcome measurement to include long-term follow-up and continuity of care to support people's health and well-being."*

**– Dr Karisha Quarrie, Chief Medical Officer**

## We drive diversity and inclusion

We have **44.1%** ACI representation at senior management level

**78%** of our newly recruited specialists are ACI

We maintained our **B-BBEE level 3**

*In South Africa's healthcare sector, we prioritise representation to deliver equitable, high-quality care to our diverse patient population. We comply with national transformation imperatives, employment equity legislation and procurement standards and we build a workforce that reflects the communities we serve.*

### STRATEGIC APPROACH, INITIATIVES AND PROGRESS

#### Workforce diversity and inclusion

Develop leaders and promote equitable representation across all management levels

#### Specialist diversity and inclusion

Recruit and retain ACI specialists in line with patient demand and specialist supply

#### Procurement and supplier transformation

Source quality, cost-effective products while promoting social and economic transformation

#### Women in Life programme

Support and empower female leaders through mentorship and guidance

### Workforce diversity and inclusion

Our ESG strategy ensures a diverse and inclusive workforce by developing leaders, promoting equal representation and enabling participation in decision-making. We support this through training programmes, enforce zero-tolerance policies for harassment and use data to guide fair and consistent decisions.

The new EE regulations came into effect on 15 April 2025. Sectoral targets have been set for designated groups which include ACI female and male, white female and people with disabilities.

Life Healthcare's EE plan has been formulated in readiness for this new law, effective 1 September 2025. This plan will ensure compliance with sectoral targets and position us for transformation-driven growth.

Talent management, succession planning and career development programmes, in collaboration with institutions such as the Gordon Institute of Business Science (GIBS) and Henley Business School, continue to strengthen our leadership pipeline.

### Specialist diversity and inclusion

Specialist recruitment and specialisation are largely influenced by patient demand and the output of South African medical schools. Transformation in terms of race and gender within our hospitals is dependent on the limited supply of specialists from medical schools.

Despite these constraints, we have consistently maintained a strong commitment to diversity, with 78% of our total and net specialist recruitments, factoring in retirements, being ACI.

### Procurement and supplier transformation

Our procurement strategy supports Life Healthcare's mission to deliver high-quality, cost-effective care while driving social and economic transformation. We ensure legal compliance, quality accreditation and sustainability in all sourcing activities. Environmental compliance audits were conducted at one HCRW disposal site in FY2025, with no critical legal non-compliance recorded.

We actively promote supplier transformation through our source-to-contract processes and engagement with multi-national suppliers to increase investment in vendors with strong B-BBEE ratings. Vendors are assessed through sustainability and risk questionnaires covering labour and human rights, environmental management, occupational health and safety and governance.

In FY2025, procurement introduced a B-BBEE metric to assess our top 100 vendors by spend. Vendors were evaluated based on their B-BBEE level, percentage black ownership and percentage black women ownership. 71% of these vendors received a grading between A+ and B. The annual vendor regrading exercise has been scheduled for October 2025.

Additionally, 102.4% of the Group's measured procurement spend in FY2025 was with empowered vendors, significantly exceeding the target of 80%.

### Women in Life programme

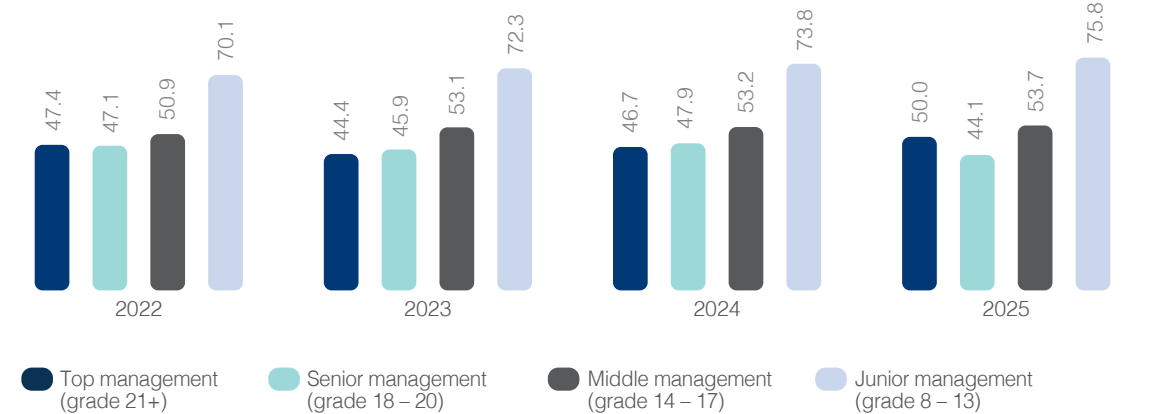
Now in its sixth year, the Women in Life initiative supports the development and empowerment of female leaders, offering mentorship and guidance to emerging and established leaders.

## METRICS AND TARGETS

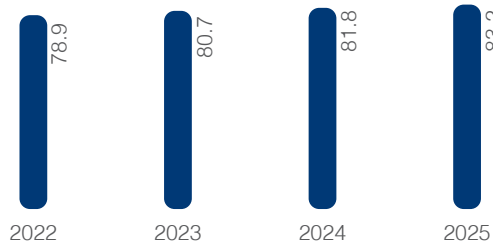
FY2025 target	What we have achieved
<b>3% improvement in senior management ACI representation</b>	<b>3.5% decline in senior management ACI representation</b>
<b>70% ACI specialist recruited</b>	<b>78% ACI specialist recruited</b>

Senior management ACI representation fell by 3.5% against a planned increase of 3%. This decline is primarily due to recent changes within the senior leadership team, which have temporarily disrupted momentum toward our diversity goal. We continue to focus on diversity as a primary focus area during recruitment and succession planning.

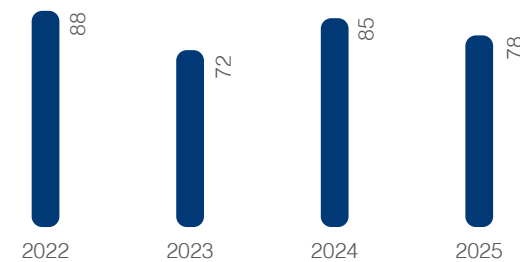
### Diversity and equal opportunity (ACI) (%)



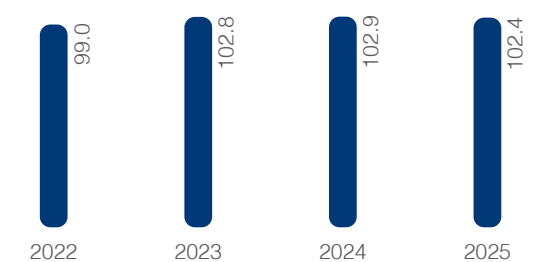
### Employment equity (ACI representation) (%)



### ACI net specialist recruitment (%)



### Empowered vendor spend as % of measured spend\*



\* Represents empowered vendor spend where each rand of spend on vendors at B-BBEE rating levels 1 – 3 is recognised at greater than a 100%, while each rand of spend on vendors at B-BBEE rating levels 5 – 8 is recognised at less than a 100%.

**"Transformation is not just a target on paper, it is reflected in who we hire, how we develop leaders, and the opportunities we create for employees from all backgrounds to shape the future of healthcare."**

**– Avanthi Parboosing, Chief People Officer**

**43.0%**  
spend with suppliers with ≥51% black ownership

**30.9%**  
spend with suppliers with ≥30% black ownership

## We invest in training and skills development

**R193 million**  
spent on training and  
development

**R76.8 million**  
spent on nurse training  
and development

*Skilled clinical professionals are essential to delivering safe, high-quality healthcare. Nurses and pharmacists are at the frontline of patient care, directly influencing clinical outcomes, patient safety and compliance with professional standards.*

South Africa faces critical shortages of healthcare professionals, and ensuring a steady pipeline of well-trained nurses and pharmacists is vital to maintaining our high standards of quality.

### STRATEGIC APPROACH, INITIATIVES AND PROGRESS

#### Nursing development

Retain and upskill nurses to improve value-based care and patient safety

#### Pharmacy development

Develop pharmacists and assistants to strengthen succession

#### Specialist training

Fund specialist training to create a specialist pipeline

### Nursing development

Life Healthcare's nurses lead patient care, quality improvement and clinical governance initiatives. They advocate for patients, collaborate with multi-disciplinary teams and support evidence-based practices.

The Chief Nurse Officer reports directly to the Chief Executive, strengthening nursing representation in executive decision-making and ensuring that nursing perspectives influence strategy, resource allocation and clinical standards. National teams translate strategy into hospital-level practices through guidelines, audits and data-driven performance management. Nurses are trained to speak up, advocate for patients and maintain accountability for clinical outcomes.

To retain specialised nursing skills, we have extended the retirement age for experienced nurses and provided career growth opportunities through bursaries, postgraduate training and structured graduate programmes. Engagement initiatives include recognition events, International Nurses Day celebrations, career workshops and ongoing professional development.

Life Healthcare's learning centres have trained nurses for over 25 years, contributing to a sustainable pipeline of skilled professionals for the Group and the industry.

Recent curricular developments align with the South African Nursing Council (SANC) Higher Education Qualifications Sub-Framework and the National Qualifications Framework, which have standardised nursing education to meet international benchmarks.

The seven Life Healthcare learning centres train undergraduate nurses, with postgraduate diploma accreditation for perioperative, critical care, emergency nursing and health services management underway. In addition, technology-enabled learning supports inclusive, flexible and lifelong development.

### Pharmacy development

Pharmacists play an important role in ensuring clinical quality and efficiency at Life Healthcare. They ensure patients can access quality, cost-effective medication for their health needs. This includes maintaining efficient procurement and supply processes in the distribution of medication and managing inventory.

Many pharmacists are dispensary-based and spend considerable time on administrative tasks, such as stock procurement and inventory management. This reduces the time available for clinical pharmacy and antimicrobial stewardship. Developing pharmacist assistants to provide pharmacy administrative support, as well as nurturing young pharmacists with strong skills, is therefore essential to maintaining high-quality patient care and strengthening internal succession pipelines.

Our training strategy focuses on building a robust internal talent pipeline while increasing industry presence. Programmes include online continuing professional education modules and workplace-based training.

In addition, Life Healthcare runs a structured 12-month internship programme for pharmacy graduates, providing practical experience at hospital level with continuous support from the pharmacy practice department at head office for both pharmacist interns and tutors. The internship programme ensures that pharmacist interns transition effectively from graduates into professional roles and prepares them for future leadership positions within Life Healthcare.

Through a partnership with the Health and Welfare Sector Education and Training Authority (HWSETA), we have also trained and developed pharmacist assistants, prioritising ACI candidates. The programme provides career paths for junior employees and previously disadvantaged candidates. Funding from HWSETA has been maximised, and learner progress is monitored to align with South African Pharmacy Council teach-out deadlines.

The move from NQF levels three and four to the higher NQF levels four and five came into effect in July 2024. Going forward, all new Pharmacist Assistant learners will need to enrol for the new occupational certificate courses pending passing an External Integrative Summative Assessment. This new structured way of training will allow for Life Healthcare to partner with accredited service providers to offer work-based learning for learners on the new occupational certificate pharmacist assistant basic and post basic courses, pending finalisation of a learner/student placement contract.

There was no intake in 2025, due to the higher costs of the new occupational certificate courses, and the courses costing more than HWSETA funding.

### Specialist training

Specialist training in South Africa is underfunded, creating a risk of skills gaps and an inability to provide services where needed. University medical schools often have posts available for specialist training but cannot afford to pay specialists' salaries during the training period. We have an opportunity to fund these doctors during their training to create a specialist pipeline for Life Healthcare.

Focusing on specialists and sub-specialists, we plan to train 35 medical specialists, 40 surgical specialists and 40 sub-specialists over the next nine years.

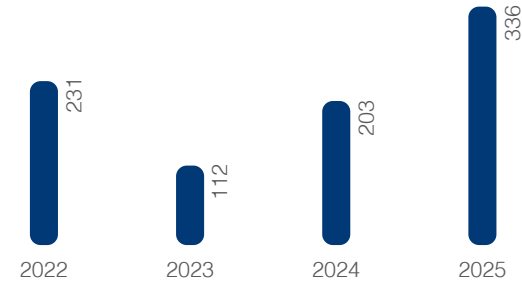
This will ensure that we can meet the ongoing need for doctors practicing at Life Healthcare facilities. It also assists with the development of a steady supply of medical specialists in South Africa.

*The strategy is to train nurses for a sustainable pipeline of qualified nurses that meets Life Healthcare's resourcing needs. In addition, to support clinical competency, short learning programmes and continuing professional development modules are provided to qualified nurses.*

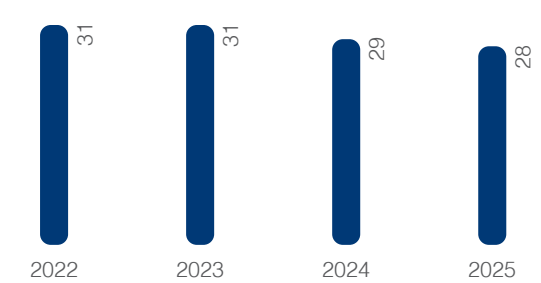
## METRICS AND TARGETS

FY2025 target	What we have achieved
<b>R65 million</b> investment in nurse training and development	<b>R76.8 million</b> invested in nurse training and development

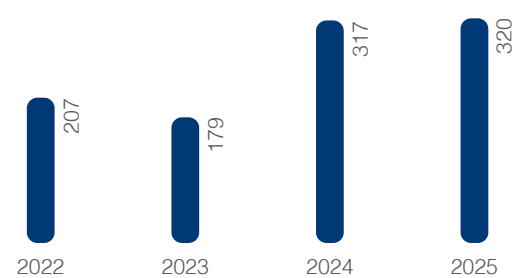
### Number of nurse undergraduate graduates ▲



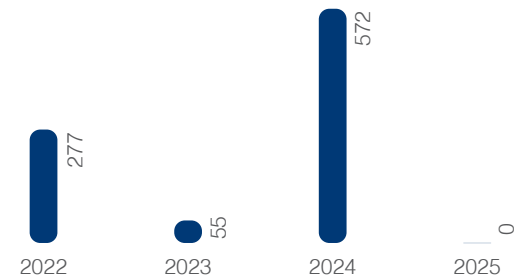
### Number of pharmacist interns trained ▼



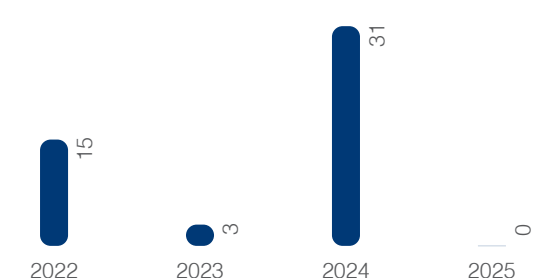
### Number of nursing short learning programme students ▲



### Total amount spent on pharmacy training and development (R'000) ▲



### Number of pharmacist assistants trained ▼



*“Having the right nurse with the right skills at the patient bedside is key to safe, effective care. By recognising achievements and supporting continuous learning, we retain talent and motivate nurses to deliver the highest-quality care.”*

– Merle Victor, Chief Nurse Officer

## We invest in clinical research and development

Life Healthcare's research office has continued to support a culture of research across the Group.

The Health Research Ethics Committee ensures compliance with the 2024 National Department of Health guideline, *South African Ethics in Health Research: Principles, Processes and Structures*. This committee received full re-accreditation in 2024, valid through 2027.

During the year, research applications were reviewed and research webinars were held on topics including:

- Retrospective and prospective studies
- The research process
- Quality improvement methodologies
- The ethical use of artificial intelligence (AI) in health research

The 9th volume of the *Journal of Health Sciences* was published under the theme *Advancing healthcare through research practice*, sharing quality improvement initiatives across Life Healthcare.

Refer to our integrated annual report for more detail.

## We serve communities

**R147 million** spent on CSI initiatives

*As a leading healthcare provider in southern Africa, Life Healthcare has a unique opportunity to improve health outcomes, empower communities and contribute to social upliftment. Through targeted initiatives, CSI forms a core part of our purpose of making life better.*

### STRATEGIC INITIATIVES AND PROGRESS

#### Healthcare access

Provide medical services and screenings to underserved patients

#### Education and training

Support vocational training, bursaries and specialist development

#### Community upliftment

Deliver clean water, nutrition and recreational initiatives

#### Healthcare access

- **Care for indigent and uninsured patients:** we support specialists and allied healthcare workers in providing pro bono surgical services, including cataract surgery, joint replacements and cleft lip and palate repairs, prioritising patients from state hospitals. Since 2006, our collaboration with the South African National Council for the Blind (SANCb) has provided four mobile eye care clinics, facilitating eye screenings and 24 000 cataract surgeries.
- **Cleft lip and palate surgery:** we supported Operation Smile for the first time in 2025, supporting life-changing cleft lip and palate surgeries for 37 children at Nelson Mandela Children's Hospital. These conditions affect not only physical function but also a child's confidence and dignity, and can lead to long-term challenges such as feeding difficulties, speech impediments, dental problems and mental health issues.

Our dedicated volunteers, which included nurses and doctors from our own facilities are united by the belief that every child born with a cleft deserves access to safe, effective and timely surgery and care. We spent R1.2 million in support to ensure that this promise rings true.

- **Cancer screening and testing:** through Pink Drive, we conducted 760 mammograms, 323 cervical pap smears and 285 prostate-specific antigen (PSA) screenings at state clinics and hospitals in FY2025. Our support contributes meaningfully towards detection of breast, cervical, prostate and testicular cancer. This partnership reaffirms our commitment to improving cancer outcomes in South Africa by expanding access to early detection – particularly for patients in the public healthcare system.
- **SA Poison Hotline:** in 2025, Life Healthcare proudly partnered with the National Poisons Information Helpline (PIH) to support its critical after-hours service. The PIH provides expert medical advice to healthcare professionals and the public in cases of poisoning – handling over 13 000 consultations annually across all nine provinces. With 70% of calls coming from doctors treating acute poisoning cases – many involving young children – this service plays a vital role in saving lives. Our sponsorship enables the PIH to extend its reach beyond working hours, ensuring timely, specialist support when it's needed most.
- **Brenthurst Breast Care Centre:** established in collaboration with Professor Carol-Ann Benn, an internationally recognised oncology expert with a special interest in breast disease. Since September 2024, 536 patients, including 169 indigent and uninsured patients have been treated at the centre.

#### Education and training

- **Training for visually impaired individuals:** since 2018, Life Healthcare has sponsored the South African Council for the Blind's Optima College, which annually offers 250 to 350 short courses for newly visually impaired individuals. In FY2025 we sponsored 120 visually impaired students in one-year SETA-accredited vocational programmes, supported by computer labs equipped with adaptive software. In total, we have helped support 882 students to complete vocational programmes and short courses, empowering them with skills for independence and employment.
- **High school tuition:** we co-sponsor the Somerset College Saturday School, supporting 188 grade 11–12 learners in Maths, Science and English.

#### Community upliftment

- **Food relief:** we have partnered with the Soul Food Provider Trust since 2022. Together, we provide over 700 000 nutritious meals annually to early childhood development centres excluded from the national school nutrition programme, preventing stunting and supporting child health. Since we started this initiative, over 3 million meals have been distributed. See page 30 for more details on our impact with this project.
- **Gender-based violence (GBV):** we support government's annual 16 Days of Activism for No Violence Against Women and Children Campaign through a group-wide initiative focused on raising awareness of GBV. This programme has evolved into a two-pronged initiative, creating safe spaces for employees to share their experiences and foster open dialogue, while also extending support to vulnerable patients and communities through targeted outreach and education.

### METRICS AND TARGETS

#### FY2025 target

**R115 million** CSI spend on healthcare and communities

#### What we have achieved

**R130.0 million** CSI spend on healthcare and communities

# Our governance strategic objectives

## We do business ethically

*At Life Healthcare, ethical conduct underpins all decisions and operations. In the healthcare sector, where patient trust, employee integrity and regulatory compliance are critical, misconduct and unethical conduct can have a negative financial and reputational impact on the Group.*

### ETHICS MANAGEMENT

<b>Code of Conduct</b>	All employees, directors, contractors and suppliers must follow the Code of Conduct. It sets clear expectations for honesty, fairness and respect, with zero tolerance for fraud, corruption or unethical behaviour.
<b>Governance and oversight</b>	SETCO provides primary oversight, supported by the Board and other governance structures, to ensure consistent application of the Code of Conduct and ethical behaviour across the Group.
<b>Ethics Review Committee</b>	<p>A sub-committee of SETCO, comprising the chief executive, the chief audit executive and the company secretary. The Committee:</p> <ul style="list-style-type: none"> <li>Reviews matters reported via the tip-off line or ethics office</li> <li>Ensures investigations are conducted appropriately, engaging third-party investigators where needed</li> <li>Provides feedback to whistle blowers or via the tip-off line where possible</li> <li>Protects whistle blowers acting in good faith and managing cases not reported in good faith per policy</li> <li>Reports quarterly to SETCO on all reported matters</li> </ul>
<b>Ethics officer</b>	The company secretary serves as the ethics officer for Life Healthcare.

### LEADERSHIP AND CULTURE

Leaders are expected to demonstrate ethical behaviour in all decisions, setting the standard for the Group. Regular training and communication campaigns strengthen understanding and application of the Code of Conduct. To evidence their commitment to upholding ethical principles, the Board of Directors have signed a statement which can be found on our website at <https://www.lifehealthcare.co.za>.

### CONFLICTS OF INTEREST

Directors declare conflicts of interest annually, update declarations as required and review them before each Board meeting, and notify the company secretary of any conflicts that may arise between meetings.

### INSIDER TRADING

Executives may not trade shares while in possession of price-sensitive information and must obtain prior permission from the chief executive and company secretary. Employees follow a “two over one” principle, seeking manager approval before trading. The chief executive and non-executive directors require the Chairman’s approval. The Company has a Price Sensitive and Insider Trading policy which guides employees and directors on the rules around engagement and conduct when in possession of price-sensitive information.

### HUMAN RIGHTS

We integrate human rights into all operations to protect employees, patients and communities. Our policy upholds non-discrimination, freedom of association, labour rights and safe working conditions. More particularly, a rigorous onboarding process in relation to procurement also ensures that the necessary enquiries are made in relation to human rights practices of the Company’s suppliers.

### RADIATION SAFETY

Given this is a growth area for us, we apply strict radiation safety procedures to protect patients, employees and the environment. We monitor compliance with national regulations and international best practice through audits and incident reporting, embed safety through training, ensure employees maintain certification and subject equipment to regular checks to minimise exposure.

### SPEAK-UP CULTURE

Life Healthcare operates a 24/7 confidential and independent whistle blowing hotline, accessible via phone, SMS or email. The service provides a safe space for employees and other stakeholders to report wrongdoing, unethical behaviour or policy violations. Concerns can also be raised through other confidential channels such as the Ethics Office. All reports are investigated promptly, with corrective actions implemented where necessary.

**Total number of whistle blowing reports**  
**69**  
(2024: 72)

**Total number of allegations received via whistle blowing reports**  
**78**  
(2024: 76)

**Investigation into allegations closed**  
**64.9% of 69 reports**  
(2024: 100% of 72 reports)

**Medical-related reports**  
**2**  
(2024: 4)

## We maintain sound governance

The Board executes its duties according to the Board Charter, which is reviewed annually. The Board sets the Group's overall strategic direction, determines investment policy and performance criteria and delegates the detailed planning and policy implementation to management within the appropriate risk parameters and controls. The Board monitors compliance and performance through quarterly reporting and management updates.

Board independence is reviewed annually by the Nominations and Governance Committee.

The Chairman of the Board holds an interest in the Group, and on assessment, the Chairman's holdings were found not to be material to him personally. All non-executive members were assessed by the Nominations and Governance Committee and found to be independent.

The Board convenes quarterly or more if required. Board members are encouraged to debate and challenge matters in an atmosphere of mutual respect and co-operation.

### A DIVERSE AND EXPERIENCED BOARD

The Board has 12 members and reflects meaningful transformation, with the majority being ACI. We are proud of the fact that women chair the Investment, Human Resources and Remuneration Committee (RemCo), Social, Ethics and Transformation Committee (SETCO) and Clinical Committees. Our lead independent director is also female. This demonstrates our commitment to Board diversity and empowerment.

#### Gender



#### Race



#### Age



#### Tenure



#### Non-executive classification



## Under the microscope

### SEAMLESS BOARD SUCCESSION

#### Why was this an important focus for Life Healthcare?

Effective Board succession and continuity of leadership are important for strong governance and the confidence of stakeholders. For Life Healthcare, this means ensuring that transitions between directors are planned well in advance and managed with care. With a Board that oversees both complex clinical operations and strategic growth, continuity of oversight and institutional knowledge is essential to sustain our long-term performance and reputation.

#### What did we do?

We formalised succession planning as an ongoing governance focus. The Nominations and Governance Committee maintains a clear succession framework and keeps aware of a pipeline of potential candidates to support planned transitions. Structured induction

and handover processes ensure that incoming directors quickly become effective contributors. These processes have supported a smooth transition in Board leadership and the orderly rotation of non-executive directors, ensuring stability and diversity of skills across committees.

We ensured leadership continuity at committee level by identifying new chairs ahead of the planned retirements of longer-serving Board members.

#### What is the impact?

Through proactive succession planning, the Board has maintained continuity and at the same time strengthened its collective expertise. Transitions have preserved momentum in strategic and clinical oversight while refreshing the Board's perspective with new experience and insight.

## We implement fair remuneration practices

Our remuneration philosophy is designed to reward performance, attract and retain talent and align the interests of employees with those of patients and other stakeholders. The Human Resources and Remuneration Committee oversees fair remuneration and responsible employment practices to support effective strategy implementation.

Our remuneration practices are underpinned by the principles of:

- Motivating superior performance
- Supporting organisational and individual development
- Building competencies for future needs
- Recognising and sharing successes
- Balancing the remuneration mix to achieve strategic objectives
- Ensuring fairness and non-discrimination

Compensation is linked to individual and organisational performance and aligned with our strategic pillars and capabilities. In this way, our policies provide fair, sustainable rewards that enhance employees' lives while supporting the Group's growth into new markets and business areas.

ESG performance, measured against our FY2025 ESG targets, carries a 5% weighting in the single incentive plan.

At the 20th AGM on 20 February 2025, all resolutions were approved with shareholder support ranging from 98.51% to 100%, except for the non-binding advisory vote on the remuneration policy (78.48%) and the remuneration implementation report (78.50%).

Shareholders' feedback on these matters is reflected in the FY2025 remuneration report, which provides further detail on our approach, policy and implementation.

## We ensure the protection of patient and employee data

We are proactively detecting potential **digital threats** and attempted compromises

We are cultivating an employee culture that **protects personal information** and practices security awareness and understanding

We are **providing guidance, control, advice and oversight** to increase information security defences within Life Healthcare

*Technology and data are essential to enhance patient care, improve operational efficiency and reduce medical errors. Given the sensitive nature of healthcare data and the potential consequences of breaches, protecting patient and employee information is a critical priority. Our approach combines robust systems, rigorous training and proactive safeguards to ensure that information is secure.*

### STRATEGIC APPROACH, INITIATIVES AND PROGRESS

#### Strengthen IT governance

Enhance oversight, controls and compliance across all IT systems and processes

#### Enhance cyber-security and resilience

Implement proactive security measures, monitoring and disaster recovery to protect data and ensure uninterrupted operations

#### Training and awareness

Build understanding of data privacy and cyber-security through ongoing employee training, awareness campaigns and compliance monitoring

## IT governance

Our IT governance structure is well-embedded:

### The Audit and Risk Committee

provides oversight of IT governance, the IT strategy and related risk management at Life Healthcare.



### ExCo

is responsible for the implementation of the IT strategy and risk mitigation.



### The IT Steering Committee

includes business stakeholders and representatives from project steering committees and is responsible for the co-ordination of IT activities. This includes reviewing and tracking the implementation of our IT strategy and ongoing monitoring of all IT projects, risks, operational updates, financial targets and new vendors.



### The IT Management Committee

oversees the day-to-day management of IT operations, project delivery and risk mitigation on an ongoing basis.



### Strategic executive sponsors

sponsor the successful delivery of strategic goals according to project plans.



### Functional areas

contribute to the strategic goals and have their own business goals and projects.

We have implemented COBIT 5 and are preparing to adopt the COBIT 2019 framework to govern enterprise information and technology. From an information security perspective, we maintain ISO 27001 certification to safeguard employee and patient data and align with best practice governance frameworks, including King IV.

We are also formalising a new AI Governance Committee and have approved a group-wide AI use policy to ensure responsible AI deployment.

## Cyber-security and resilience

On average, we detect and block over 700 000 attempted monthly attacks on the Group, ranging from phishing and malware to social engineering tactics such as sending impersonation emails, fake WhatsApp messages, malware attachments, fake job profiles, etc. Our cyber-security model applies layers of defence to detect and block any attacks.

Our 24/7 Security Operations Monitoring Centre uses AI to monitor information security threats across our network and hospitals. We have a formalised incident response framework aligned with the Protection of Personal Information Act (POPIA) and General Data Protection Regulation (GDPR) requirements.

Cyber-security resilience is further strengthened through regular simulated hacking exercises and penetration tests, security assessments, audits, disaster recovery and business continuity testing. We also prioritise information security awareness training for all employees and medical teams, focusing on password security, data privacy, social engineering and online scams.

For more information on our IT strategy and how we are using data and technology to improve our services and operations, see the integrated annual report.

## METRICS AND TARGETS

In the healthcare industry, the risk of a privacy breach exists due to the volume and complexity of handling patient information. While any breach is undesirable, the majority relate to misdirected or missing files and are addressed through enhanced cyber-security measures, process improvements and training. Strong corrective measures are in place to prevent recurrence. There are no specific targets for FY2025, as our goal is always to prevent any incidents.

## Number and categories of incidents

Category of incident	Description	FY2025	FY2024
Personal information misdirected	Patient data taken by or given to the incorrect recipient	5	12
Missing or lost files	Files or documents missing from patient records, misplaced, destroyed or lost	17	13
Alleged social media breaches	Breaches of confidentiality via social media platforms	5	2
Crime-related breaches	Patient files stolen during mugging or other criminal incidents	3	1
Privacy incidents	Relationship or guarantor information not updated, resulting in privacy incidents	1	1
<b>Total incidents</b>		<b>31</b>	<b>29</b>

All incidents are investigated and assessed to determine the root cause. Where required, the data subject and Information Regulator are notified. Corrective action and training are implemented where necessary.

***“We take a proactive approach to cyber-security, combining technological safeguards, training and stringent governance so that data privacy is not just compliance, it is a promise to our patients.”***

***– Venisha Nayagar, Group Chief Information Security Officer***



# WE APPLY STRONG OVERSIGHT

WE RESPONSIBLY GOVERN AND MANAGE ESG

42



# We responsibly govern and manage ESG

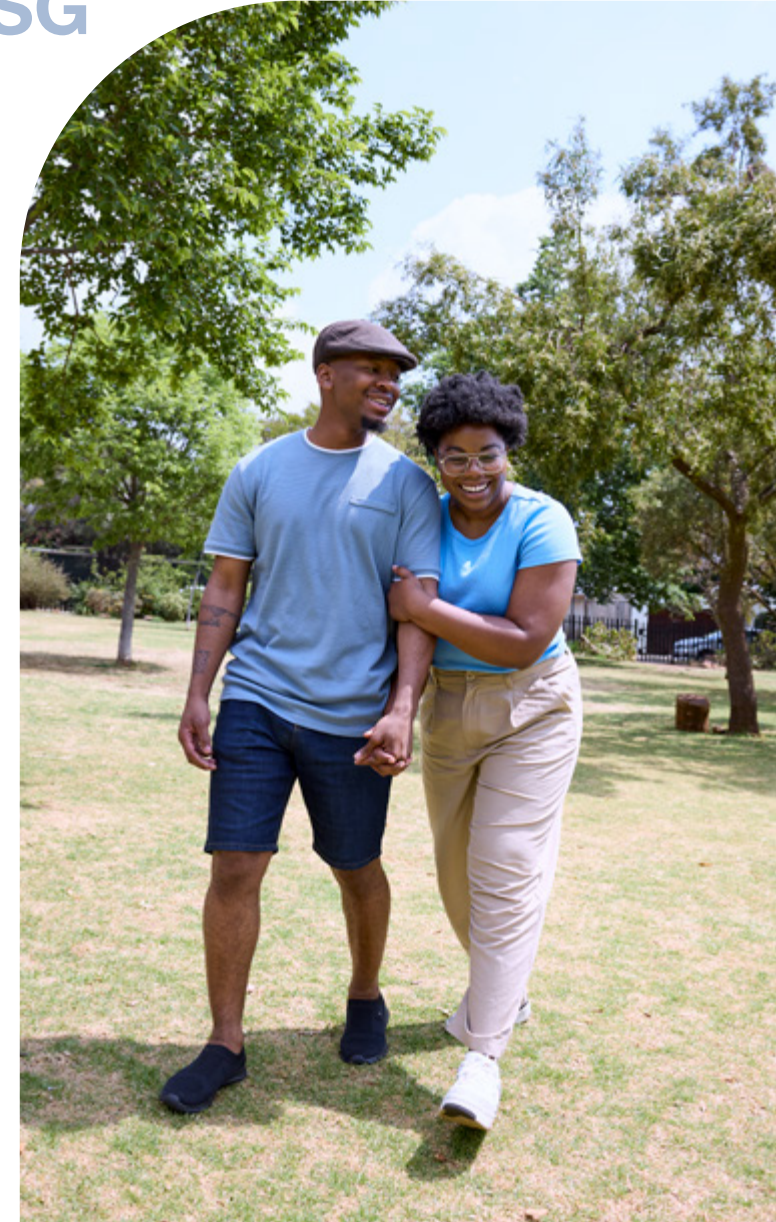
*The governance and management of ESG follows a structured, multi-level approach that assigns clear responsibilities for oversight and implementation.*

ESG is integrated into the Group's strategy, including measurable KPI's in the single incentive plan, where executives' remuneration is linked to performance against ESG targets. These include carbon emissions reduction, nurse training and development, diversity in employment and doctor recruitment, B-BBEE and CSI investments.

Detailed information on governance and remuneration alignment is provided in the integrated annual report.

## Our ESG governance structure

<b>Board</b>	<ul style="list-style-type: none"> <li>Commits to ESG and takes ultimate responsibility for its governance</li> <li>Provides overall oversight of ESG matters and approves the ESG strategy</li> <li>Monitors implementation and performance against ESG objectives</li> <li>Ensures compliance with regulatory and other ESG requirements</li> <li>Delegates oversight of ESG to the SETCO and implementation to the ExCo</li> </ul>
<b>SETCO</b>	<ul style="list-style-type: none"> <li>Provides focused oversight of ESG</li> <li>Reviews the ESG strategy and related developments and monitors progress against ESG metrics and objectives</li> <li>Reports ESG performance and risks to the Board</li> </ul>
<b>ExCo</b>	<ul style="list-style-type: none"> <li>Provides overall responsibility for implementing the ESG strategy</li> <li>Integrates ESG into daily business operations and decision-making and allocates adequate resources to support ESG initiatives</li> <li>Monitors performance and evaluates progress against ESG objectives and reports implementation outcomes to the SETCO and Board</li> <li>Implements corrective and improvement measures where required</li> <li>The executive responsible for ESG is the Chief Actuary and Risk Officer</li> </ul>
<b>Data, Compliance, Risk and ESG Steering Committee</b>	<ul style="list-style-type: none"> <li>Provides strategic oversight of ESG implementation</li> <li>Monitors performance of ESG initiatives at a detailed level</li> <li>Reports progress and risks to the ExCo and SETCO</li> <li>Provides guidance and support to operating businesses to meet long-term sustainability goals</li> <li>Identifies opportunities for improvement and recommends initiatives for implementation</li> </ul>
<b>Compliance department</b>	<ul style="list-style-type: none"> <li>Oversees controls related to significant regulatory requirements, including ESG-related regulations</li> <li>Maintains a regulatory universe to identify applicable legislation and evaluates each for impact and likelihood</li> <li>Provides quarterly reports on compliance matters to the Audit and Risk Committee and presents significant regulatory concerns to the Board</li> </ul>
<b>Facility level management</b>	<ul style="list-style-type: none"> <li>Implements ESG practices in daily operations and allocates resources to maintain ESG standards, including waste management, energy efficiency and water use</li> <li>Ensures compliance with Safety Health and Environment (SHE) governance requirements</li> <li>Monitors key ESG metrics locally and reports to ExCo and the Data, Compliance, Risk and ESG Steering Committee</li> <li>Provides training and awareness on ESG responsibilities</li> <li>Responds to incidents and implements corrective measures</li> </ul>



# GRANULAR INFORMATION

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# ESG risk register

We followed a structured process to identify and assess sustainability risks and opportunities (SROs), guided by our ERM policy and framework with oversight by the SETCO and SRO owners to ensure clear governance.

We initiated the process by identifying SROs using both a top-down and bottom-up approach. Each SRO was then evaluated to assess the risk root causes, their likelihood and potential impact and to understand their mitigating controls and their effectiveness.

Based on the assessment, the SROs were evaluated to determine how sustainability issues could affect future financial performance, both positively and negatively, ensuring that risks are mitigated and opportunities that could enhance long-term value are identified.

The risk of increased greenhouse gas (GHG) emissions due to increased consumption of gases, fuel, water, electricity, material procured as well as waste generated (Scope 1, Scope 2 and Scope 3) could result in carbon tax (once promulgated) and climate change impact, requiring the organisation to invest in increasing operational efficiencies and reducing emissions to minimise impacts on operating costs

- Established strategy and plan for GHG reduction
- Established carbon emission reduction target
- Systems and tools to measure carbon emissions (water, electricity, waste, etc.)
- Reporting and monitoring carbon emissions
- Ongoing initiatives to reduce carbon emissions (waste reduction and recycling, energy and water efficiencies by the business, etc.)

Inaccurate reporting (overstating or understating) of GHG emissions and increased carbon taxes (once implemented) due to manual processes (measuring and reporting), resulting in potential reputational impact and financial loss

- Automated water and energy reporting systems
- Monthly monitoring and reporting of sustainability data
- Data assurance by external auditors

Inability to timeously comply with existing and changing Safety, Health and Environment (SHE) legislation could result in fines, sanctions and declining investor confidence

- Compliance risk management plans for key SHE laws in place
- Management self-assessments and verification audits performed across the business
- Limited SHE compliance baseline audits conducted by an external provider
- ISO 9001 and limited 14001 certifications in the business
- Aspect and impact registers as well as health and safety risk registers maintained at facilities
- External annual compliance audits by the Office of Health Standards Compliance
- SHE policies and procedures
- SHE legal training

High cost of compliance with new or changing environmental, social and governance legislation could reduce profitability and impact sustainability

- Compliance risk management plans developed and updated for new and changing legislation
- Budget approval process in place for resource requirements
- Governance forums and structures provide oversight to meet regulatory changes
- Engagement with regulators and investors

Challenges in meeting sectoral employment equity (EE) targets at middle and junior management levels due to an overrepresentation of female nurses, which could result in regulatory fines and reputational risk

- Approved EE plan in place
- Recruitment policy aligned with EE compliance requirements in place
- Talent and succession planning
- Governance forums provide oversight and promote change management
- Engagement with regulators

Challenges in meeting sectoral EE targets at senior and top management levels due to scarcity of senior talent from designated groups, resulting in fines and reputational risk

- Approved EE plan in place
- Recruitment policy aligned with EE compliance requirements in place
- Talent and succession planning
- Governance forums provide oversight and promote change management
- Engagement with regulators and investors

Breach of personal information due to internal control failures and changing external threats could result in lawsuits, fines and reputational risk

- Privacy office established with policies and procedures to ensure adherence to POPIA
- Ongoing organisational training and awareness for privacy and cyber-security
- Dedicated information security team under CISO
- Information security management system
- Security operations monitoring centre
- Security policies and processes for regular internal and external assessments
- Tools to detect and respond to threats
- Secured cyber-liability insurance

Reputational loss from unforeseen external environmental incidents (spillages, accidents) resulting in adverse media reporting

- Procedure for escalation and reporting of external incidents
- Periodic review of disaster management and emergency plans
- Internal and external disaster management drills
- Anatomical waste register and specimen register
- Consolidation of manifests and destruction certificates
- Identification of external environmental incidents in aspect and impact register
- Training for hospital teams

Wide-scale damage to business assets or disruption from extreme weather events could result in financial loss

- Geographically dispersed properties and facilities
- Insurance cover for property damage and business interruption
- Emergency response plans in place to ensure business continuity

Difficulty in rendering patient care under drought conditions or due to the inability of municipalities to maintain an adequate water supply, impacting business sustainability

- Water security strategy in place, including backup water tanks and boreholes where required

Risk of hospital property development impacting biodiverse sensitive areas due to failure to identify sensitive areas, resulting in fines and reputational risk

- Biodiversity environmental surveys in place
- Environmental impact studies undertaken for relevant projects

# ESG ratings

Rating agency	Scoring methodology	Comments	Scoring change	2025	2024	2023	2022
<b>FTSE/JSE Responsible Investment Index Score</b>	Assesses a company's ESG performance by how effectively it manages ESG risks, with higher scores indicating stronger ESG practices.  Exposure level: <span style="color: green;">■</span> High <span style="color: orange;">■</span> Medium <span style="color: red;">■</span> Low	Scored above the industry benchmark.	⬆	<b>3.5 Medium</b>	3.4 Medium	3.2 Medium	3.2 Medium
<b>Sustainalytics</b>	Measures a company's exposure to material ESG risks and the effectiveness of its management, with lower scores indicating better ESG performance.  <div> <span>Negligible</span> <span>Low</span> <span>Medium</span> <span>High</span> <span>Severe</span> </div> <div> 0 – 10   10 – 20   20 – 30   30 – 40   40+ </div>	The change in rating methodology contributed to a decline in the score. Scored within the top 5 industry performance.	⬆	<b>29.9 Medium</b>	24.9 Medium	27.1 Medium	26 Medium
<b>MSCI</b>	Assesses a company's exposure to industry-specific ESG risks and its management of those risks, with ratings from CCC to AAA, where AAA reflects the strongest ESG performance.  <div> <span>CCC</span> <span>B</span> <span>BB</span> <span>BBB</span> <span>A</span> <span>AA</span> <span>AAA</span> </div>	Scored above the industry benchmark.	➤	<b>AA</b>	AA	AA	AAA
<b>ISS</b>	ISS rates companies from A+ to D- on the management of material ESG risks, with C (or C+ for most industries) and above designated "Prime" for meeting or exceeding sector-specific thresholds.	Rated "Prime" exceeding sector-specific threshold.	➤	<b>B-</b>	B-	B-	–
<b>CDP</b>	Assesses a company's environmental disclosure, management and performance, rating them from A (leadership) to D- (limited).  <b>Leadership (A/A-):</b> Implementing current best practices <b>Management (B/B-):</b> Taking co-ordinated action on water issues <b>Awareness (C/C-):</b> Knowledge of impacts on, and of, water issues <b>Disclosure (D/D-):</b> Transparent about water issues	Maintained the score. The implementation of improvement plans is underway.	➤	<b>D</b>	D	D	D

# Climate-related disclosures

Theme	Disclosure requirement	Reference
<b>Governance</b>	<ul style="list-style-type: none"> <li>a) Disclose the role of the Board in overseeing climate-related issues</li> <li>b) Disclose the role of management in assessing and managing climate-related issues</li> </ul>	Pages 41 – 42 and 28
<b>Strategy</b>	<ul style="list-style-type: none"> <li>a) Disclose the climate-related risks and opportunities the Group has identified over the short, medium and long term</li> <li>b) Disclose the impact of climate-related risks and opportunities on the Group's businesses and strategy planning</li> <li>c) Disclose the resilience of the Group's strategy, taking into consideration different climate change scenarios</li> </ul>	Pages 16 – 20 and 28
<b>Risk management</b>	<ul style="list-style-type: none"> <li>a) Describe the Group's processes for identifying climate-related risks</li> <li>b) Describe the Group's processes for managing climate-related risks</li> <li>c) Describe how processes for identifying, assessing and managing climate-related risks are integrated into the Group's overall risk management</li> </ul>	Pages 13 – 15 and 44 – 45
<b>Metrics and targets</b>	<ul style="list-style-type: none"> <li>a) Disclose the metrics used by the Group to assess climate-related risks and opportunities in line with its strategy and risk management process</li> <li>b) Disclose Scope 1, Scope 2 and, if appropriate, Scope 3 greenhouse gas (GHG) emissions and the related risks</li> </ul>	Pages 18 and 21 – 28



# ESG performance data tables

## Environmental pillar

### ENERGY MANAGEMENT

KPI	Description	Unit of measure	2025	2024	2023	2022
Direct renewable energy consumption	Renewable fuel	L	0	0	0	0
Total renewable energy consumption	Total	GJ	0	0	0	0
Total direct non-renewable energy consumption	HFO	L	309 822	318 963	276 203	314 685
	Petrol	L	129 103	150 367	193 047	172 491
	Diesel	L	514 683	1 375 037	3 773 420*	1 282 665
	LPG	Kg	128 753	164 376	145 610	152 925
Total electricity consumption – self-generated (renewable)	Solar PV	kWh	6 713 238	6 956 273	7 269 667	7 871 820
Total electricity consumption – purchased	Purchased	kWh	165 582 391	148 445 758	145 580 670	145 310 090
Total electricity consumption	Self-generated and purchased	kWh	172 295 629	155 402 031	152 850 337	153 181 910
Total indirect energy consumption	Total	GJ	620 264	559 447	550 261	551 455
Renewable energy consumption as % of total electricity		%	3.9%	4.5%	4.76%	5.1%

\* The increase in fuel consumption was mainly due to loadshedding, resulting in high diesel consumption.

### WATER MANAGEMENT

KPI	Unit of measure	2025	2024	2023	2022
Total water withdrawn	kL	1 549 308	1 493 851	1 583 737	1 209 843
• Municipal	kL	(A) 1 318 135	(A) 1 424 088	(A) 1 365 677	1 046 460
• Borehole	kL	231 173	64 902	56 971	141 896

Until 2022, water consumption was based on municipal billing. From 2023, municipal water withdrawn is calculated using verified data from our smart meters, supplemented by estimated municipal bills.

## WASTE MANAGEMENT

KPI	Unit of measure	Method of destruction	2025	2024	2023	2022
Total HCRW generated	Tonnes	N/A	4 649	4 646	5 391	4 193
• Total HCRW incinerated	Tonnes	Incinerated	104.3	112.7	116	135
• Total HCRW treated	Tonnes	Treated	4 545	4 532	5 275	4 058
HCRW generated by type						
• Anatomical waste	Tonnes	Incinerated	66.5	72.8	79	74
• Chemical waste (cytotoxic)	Tonnes	Incinerated	23.1	22.8	21	26
• Chemical waste (pharmaceuticals)	Tonnes	Incinerated	14	17	17	34
• Radioactive/nuclear waste	Tonnes	Incinerated	0.3	0.1	–	–
• Infectious/non-anatomical waste (non-sharp)	Tonnes	Treated	4 187	4 163	4 903	3 735
• Sharps*	Tonnes	Treated	358	369	372	323
HCRW generated per paid patient day (PPD)	Kg/PPD	N/A	2.1	2.1	2.4	2.3

\* Sharps waste comprises items that can cut or puncture, e.g. surgical blades and needles.

KPI	Unit of measure	2025	2024	2023	2022
Total healthcare general waste generated	Tonnes	5 385	5 693	2 629	2 147
Hazardous waste	E-waste	3.2	2.8	15.8	2.4
	Batteries	3.4	2.8	3.4	5.5
	Used oil	7.0	2.5	4.6	3.0
	Fluorescent tubes	1.6	1.53	0.6	2.2
	Fat (fat trap)	566.6	211.7	180.9	141.3
General waste	General waste to landfill	1 856	2 314	930.0	777.1
Non-hazardous waste	Free flex	0	0	59.2	27.7
	Plastic	225.4	834.2	92.3	112.2
	Paper	402.2	968.4	412.9	219.1
	Cardboard	663.3	709.8	565.6	460.1
	Tins	9.8	9.8	7.1	9.5
	Scrap metal	25.3	10.9	12.7	23.7
	Glass	5.3	4.9	5.6	7.1
Food waste	Food waste	1 615.9	619.4	337.9	356.4

KPI	Unit of measure	2025	2024	2023	2022
Total healthcare waste generated	Tonnes	10 034	10 338	8 019	6 848
Total general waste recycled	Tonnes	2 074	1 589	1 546	945
Total HCRW recycled	Tonnes	242.5	181.4	–	–
Total waste recycled as % of total waste generated	%	23.1%	17.1%	19.3%	13.8%

## CARBON EMISSIONS

KPI	Unit of measure	2025	2024	2023	2022
Scope 1	Tonnes CO <sub>2</sub> e	<span>A</span> 4 064	<span>A</span> 6 494	<span>A</span> 15 256	<span>A</span> 7 951
Scope 2	Tonnes CO <sub>2</sub> e	<span>A</span> 178 829	<span>A</span> 148 446	<span>A</span> 147 037	<span>A</span> 138 045
<b>Total Scope 1 and 2</b>	Tonnes CO <sub>2</sub> e	<b>182 893</b>	154 940	162 292	145 995
Scope 3	Tonnes CO <sub>2</sub> e	<b>1 261</b>	5 203	5 359	4 913
<b>Total carbon emissions</b>	Tonnes CO <sub>2</sub> e	<b>184 154</b>	160 143	167 650	150 907
Total carbon saving via group-owned projects	Tonnes CO <sub>2</sub> e	<b>0</b>	6 959	7 342	7 478
Percentage emissions reduction resulting from initiatives	%	<b>13</b>	4.3	4.3	4.9
Total carbon credits purchased	Tonnes CO <sub>2</sub> e	<b>0</b>	0	0	0

Year	Scope 1	Scope 2	Scope 3
2025	<ul style="list-style-type: none"> <li>Heavy fuel oil (HFO)</li> <li>Diesel</li> <li>Petrol</li> <li>Liquified petroleum gas (LPG)</li> <li>Refrigerant gases</li> </ul>	Purchased Electricity	<ul style="list-style-type: none"> <li>Coal from central laundry</li> <li>Waste to landfill</li> <li>Borehole water withdrawal</li> </ul>
2024	<ul style="list-style-type: none"> <li>HFO</li> <li>Diesel</li> <li>Petrol</li> <li>LPG</li> <li>Refrigerant gases</li> </ul>	Purchased electricity	<ul style="list-style-type: none"> <li>Coal from central laundry</li> <li>Waste to landfill</li> <li>Borehole water withdrawal</li> <li>Third-party water withdrawal</li> </ul>
2023	<ul style="list-style-type: none"> <li>HFO</li> <li>Diesel</li> <li>Petrol</li> <li>LPG</li> <li>Refrigerant gases</li> </ul>	Purchased electricity	<ul style="list-style-type: none"> <li>Coal from central laundry</li> <li>Waste to landfill</li> <li>Borehole water withdrawal</li> <li>Third-party water withdrawal</li> <li>Municipal water withdrawal</li> </ul>
2022	<ul style="list-style-type: none"> <li>HFO</li> <li>Diesel</li> <li>Petrol</li> <li>LPG</li> <li>Refrigerant gases</li> </ul>	Purchased electricity	<ul style="list-style-type: none"> <li>Coal from central laundry</li> <li>Waste to landfill</li> <li>Borehole water withdrawal</li> <li>Third-party water withdrawal</li> <li>Municipal water withdrawal</li> </ul>
2021	<ul style="list-style-type: none"> <li>HFO</li> <li>Diesel</li> <li>Petrol</li> <li>LPG</li> </ul>	Purchased electricity	<ul style="list-style-type: none"> <li>Coal from central laundry</li> </ul>

## OZONE DEPLETING SUBSTANCES

KPI	Unit of measure	2025	2024	2023	2022
R22	Kg	123	302	400	488
R134A	Kg	103	118	105	116
R404A	Kg	34	19	312	37
R407A	Kg	27	51	97	10
R410A	Kg	509	581	626	673
R507	Kg	6	2	1	–

## ENVIRONMENTAL INCIDENTS AND GRIEVANCES

KPI	Unit of measure	2025	2024	2023	2022
Total number of reportable environmental incidents	No.	0	0	0	0
Total number of grievances about environmental impacts filed through formal grievance mechanisms during the reporting period	No.	0	0	2	0
Of the identified grievances, how many were addressed during the reporting period	No.	0	0	2	0
Of the identified grievances, how many were resolved during the reporting period	No.	0	0	2	0
Total number of grievances about environmental impacts filed prior to the reporting period that were resolved during the reporting period	No.	0	0	2	2

## Social pillar

### EMPLOYEE TURNOVER

KPI	Unit of measure	2025	2024	2023	2022
Opening number of employees	No.	16 108	15 768	15 436	14 972
Total number of new employee hires (permanent)	No.	2 592	2 941	2 664	2 698
• females	No.	2 044	2 296	2 075	2 146
• males	No.	548	643	589	552
• under 30	No.	704	873	628	550
• 31 – 40	No.	1 104	1 171	1 282	1 184
• 41 – 50	No.	602	658	553	650
• above 50	No.	182	237	201	284
• employment resulting from acquisitions (included above)	No.	42	451	9	158
Total (as a % of employees at the start of the year)	%	16.1	18.6	17.3	18.0
Total number of employees who left	No.	2 151	2 599	2 164	2 234
• termination of employment contracts	No.	–	–	–	–
• resignations, dismissals and abscondments	No.	1 424	2 094	1 994	1 856
• termination through disposal of business	No.	399	29	–	8
• retirements	No.	239	271	235	266
• retrenchments and mutual separation	No.	50	170	63	61
• death	No.	35	34	36	31
• disability	No.	4	1	4	12
Closing number of employees	No.	16 549	16 108	15 768	15 436
Average employee turnover excluding “good leavers”	%	13.5	16.1	13.7	14.3

## DIVERSITY AND EQUAL OPPORTUNITY

KPI	Unit of measure	2025	2024	2023	2022
Percentage of employees under 30	%	16	16	16	17
Percentage of employees 31–40	%	35	36	36	36
Percentage of employees 41–50	%	28	27	27	27
Percentage of employees above 50	%	20	20	20	20
Percentage of female employees	%	81	81	81	82
Percentage of male employees	%	19	19	19	18
Percentage of employees living with disability	%	1	2	2	2
Percentage of females in senior management roles	%	45	47	46	32
Percentage of males in senior management roles	%	55	53	54	68
Racial diversity at top management level (ACI)	%	50	47	44	47
Percentage of females in top management roles	%	38	33	33	0
Percentage of black employees in top management roles	%	59	47	44	0
Female: middle management and above	%	59	58	57.5	55.9
ACI: middle management and above	%	49.8	49.4	48.1	45.9
ACI female employees as % of total South African females	%	82	81	80	76
ACI male employees as % of total South African males	%	87	87	86	82
B-BBEE accreditation (SA)	Level	3	3	3	3

## LABOUR PRACTICES

KPI	Unit of measure	2025	2024	2023	2022
Total number of grievances about labour practices filed through formal grievance mechanisms	No.	0	2	11	4
• How many were addressed	No.	0	2	10	4
• How many were resolved	No.	0	2	10	3
Total number of grievances about labour practices filed prior to the reporting period that were resolved during the reporting period	No.	0	1	1	0
Employees covered by collective bargaining agreement	%	30.4	33.9	34.3	35.7
Employees belonging to trade unions	%	16.6	19.9	22.3	23.0

## EMPLOYEE ADVERSE EVENTS – OCCUPATIONAL HEALTH AND SAFETY

KPI	Unit of measure	2025	2024	2023	2022
Total employee adverse events per 200 000 labour hours	Rate	4.05	3.89	3.60	3.38

## PATIENT SAFETY ADVERSE EVENTS

KPI	Unit of measure	2025	2024	2023	2022
PPDs	No.	2 216 051	2 241 052	2 219 436	2 027 184
Total patient safety adverse events per 1 000 PPDs	No.	3.10	3.02	2.87	2.55
Medication-related events per 1 000 PPDs	No.	1.02	1.05	0.97	0.76
Falling-related events per 1 000 PPDs	No.	0.72	0.70	0.71	0.66
Pressure ulcer rate per 1 000 PPDs	No.	0.11	0.13	0.11	0.13
Procedure-related adverse events per 1 000 PPDs	%	0.92	0.78	0.71	0.64
Healthcare-associated infections (HAIs) per 1 000 PPDs	%	0.62	0.66	0.62	0.47
Number of serious reportable events (SREs) per 1 000 PPDs as defined by the National Quality Forum (NQF)	No.	0.14	0.09	0.09	0.09
Patient experience measure (PXM)	Score	8.59	8.54	8.51	8.40

## TRAINING AND EDUCATION

KPI	Unit of measure	2025	2024	2023	2022
Average employee training hours per employee	No.	67.2	71	56	52
Senior management	%	0.2	0.4	0.2	0.2
Middle management	%	1.8	2	2	2
Junior management	%	10.3	10	10	11
Females	%	67	66	62	54
Males	%	33	34	38	46

## ECONOMIC VALUE DISTRIBUTED

KPI	Unit of measure	2025	2024	2023
Spend with empowered vendors as a % of measured spend	%	102.4	102.9	102.8
CSI spend	R'm	147.0	145.7	122.7
• Education	R'm	17.0	28.6	17.2
• Community upliftment	R'm	4.9	6.6	8.7
• Access to healthcare	R'm	125.1	110.5	96.8
CSI as a % of total assets	%	0.57	0.60	0.65
CSI as a % of revenue	%	0.59	0.62	0.56
Employee training and development spend	R'm	176.0	174.0	162.6
• Females	R'm	106.0	99.0	81.4
• Males	R'm	70.0	75.0	81.2
• Senior management	R'm	8.6	6.8	4.3
• Middle management	R'm	28.1	17.5	25.1
• Junior management	R'm	43.5	23.4	29.7
Employee wages and benefits as a % of total revenue	%	39.9	40.2	39.5
• Females	%	81.4	79.8	79.6
• Males	%	18.6	20.2	20.4
Expenditure on research and development (R&D)	R'm	0	0	6.6
R&D expenditure as a % of revenue	%	0	0	<0.1

## MARKETING

Total number of incidents of non-compliance with voluntary codes concerning marketing communications, including advertising, promotion and sponsorship.

KPI	Unit of measure	2025	2024	2023	2022
Incidents of non-compliance resulting in a fine or penalty	No.	0	0	0	0
Incidents of non-compliance resulting in a warning	No.	0	0	0	0

## B-BBEE SCORECARD

KPI	Available points*	2025	2024	2023	2022
Equity ownership	25.0	21.44	20.30	22.87	22.5
Management control	19.0	10.94	10.79	9.96	9.7
Enterprise and supplier development	44.0	41.17	40.85	39.11	41.3
Skills development	25.0	15.17	14.08	14.24	13.4
Socio-economic development	5.0	1.28	5.00	5.00	5.0
Total score	118.0	90.00	91.02	91.18	91.9
B-BBEE level		3	3	3	3

\* Including bonus points.

## Governance pillar

KPI	Unit of measure	2025	2024	2023	2022
Percentage of females at Board level	%	42	42	36	36
Racial diversity at Board level	%	58	67	43	43

## PRIVACY AND ELECTRONIC HEALTH RECORDS

KPI	Unit of measure	2025	2024	2023	2022
Number of data breaches recorded	No.	30	29	25	10
Total breaches involving personally identifiable information (PII)	No.	3	28	4	10
Percentage of breaches involving only PII	%	10	3	16	30
Percentage of breaches involving protected health information (PHI)	%	90	97	84	70
Number of customers affected	No.	28	165	37	179
Number of customers affected in PII category	No.	2	2	3	10
Number of customers affected in PHI category	No.	26	163	34	169
Total amount of monetary losses as a result of legal proceedings associated with data security and privacy	Value	0	0	0	R118 664

\* 2022 and 2023 statistics include all reported incidents on our reporting systems. These include near-miss incidents or incidents that were investigated and breaches contained prior to any harm to data subjects. From 2024 the reporting includes only data leaks and breaches where there was a likelihood of harm to data subjects, these being the incidents that were notified to the regulators and data subjects as required by legislation. One of Life Healthcare's 29 privacy breaches in 2024 involved a patient erroneously being sent an email that contained information about 118 patients. This increased the number of breaches related to personal identifiable information. 2025 includes a phishing incident that was swiftly contained with no data loss, all sessions were revoked, malware removed and awareness reinforced.

# ESG policies and statements

## Code of Conduct

The Code applies to all employees, officers, directors, contractors and suppliers across every territory in which we operate and forms part of employee induction.

It commits us to act ethically, legally and transparently, with patient well-being at the centre of every decision. We enforce compliance with laws and regulations, uphold strong internal policies, ensure fair procurement and avoid conflicts of interest.

We prohibit gifts, contributions or advantages that compromise integrity and do not tolerate bribery, misuse of information, anticompetitive practices or political contributions.

## Whistle blowing policy

Employees and service providers can anonymously report concerns through our whistle blowing hotline. The Ethics Office offers an alternate reporting channel.

Patients can submit complaints via a dedicated email address, social media or directly to hospital managers. A structured escalation process ensures all complaints are effectively addressed.

## Board diversity policy

The policy sets out our commitment to building a diverse and effective Board, committees and subsidiary boards in line with JSE Listing Requirements. Diversity spans gender, race, age, religion, cultural and educational background, skills, experience and perspectives.

The Nominations and Governance Committee implements the policy, selecting candidates on merit with a focus on female representation. The Board reports annually to shareholders on how diversity is applied in nominations and appointments.

## Child labour, forced labour and human rights

Life Healthcare does not tolerate child, forced or compulsory labour. Suppliers must complete comprehensive questionnaires covering employment practices.

The Board has adopted a position statement on ethical conduct. Human rights grievances can be reported to the ethics office via a dedicated email address or to the tip-off line.

## AI use policy

We use AI lawfully and ethically, prioritising transparency, fairness and patient privacy. We safeguard the confidentiality and integrity of healthcare information, put measures in place to prevent and correct misuse and apply the highest care in healthcare applications. Only approved technologies on our internal list may be used.

## Environmental policy

We are committed to world-class healthcare that integrates sound environmental management. Through our Environment and Climate Change Forum, we set and monitor targets under ISO 14001, focusing on resource efficiency, waste reduction, emissions management and the adoption of improved technologies.

We comply with legislation, educate employees on good practices and work with stakeholders to deliver sustainable products and services.

## Health and safety policy

Life Healthcare is committed to maintaining a safe and healthy environment across all its sites for employees, patients, visitors, contractors and stakeholders. Guided by the Occupational Health and Safety Act and related legislation, the organisation proactively identifies and manages risks to prevent work-related injuries and illnesses. This commitment includes setting measurable objectives, allocating resources and continually improving safety practices to ensure compliance and foster a culture of well-being.

## Privacy policy

Life Healthcare is committed to protecting the privacy and personal information of patients, employees and stakeholders in compliance with the Protection of Personal Information Act (POPIA) and other applicable laws. The organisation collects and processes personal and health information only for legitimate purposes, ensures secure storage and handling and applies strict confidentiality measures. Privacy practices are embedded across operations through governance frameworks, audits and continuous improvement, reinforcing trust and safeguarding data throughout its lifecycle.

# Independent assurance practitioner's report

To the Directors of Life Healthcare Group Holdings Limited

## Report on selected sustainability key performance indicators

We have undertaken a limited assurance engagement on selected sustainability key performance indicators (selected sustainability KPIs), as described below and presented in the Annual Sustainability Report of Life Healthcare Group Holdings Limited (Life Healthcare) for the year ended 30 September 2025 (the Report). This engagement was conducted by a multidisciplinary team including assurance specialists with relevant experience in sustainability reporting.

## Subject matter

We have been engaged to provide a limited assurance conclusion on the selected sustainability KPIs in the table and marked with a <sup>A</sup> in the Report. The selected sustainability KPIs below have been prepared in accordance with the Life Healthcare Reporting guidelines (Reporting Criteria), which are set out on page 60 of the Life Healthcare Sustainability Report.

## Scope of limited assurance engagement

KPI	Unit of measurement	Boundary
Healthcare risk waste generated	Kg/PPD	Southern Africa
Patient safety adverse events	Total patient incidents/PPD x 1 000	Southern Africa
Paid patient days (PPD)	Number	Southern Africa
Healthcare-associated infections (HAI)	HAI/PPD x 1 000	Southern Africa
Scope 1 carbon emissions	tCO <sub>2</sub> e	Southern Africa
Scope 2 carbon emissions (electricity)	tCO <sub>2</sub> e	Southern Africa
Municipal water withdrawn	kL	Southern Africa
General waste to landfill	Tonnes	Southern Africa
General recycled general waste	Tonnes	Southern Africa

## Directors' responsibilities

The Directors are responsible for the selection, preparation, and presentation of the selected KPI's in accordance with the accompanying Life Healthcare reporting criteria. This responsibility includes the identification of stakeholder and stakeholder requirements, material issues, commitments with respect to sustainability performance and design, implementation and maintenance of internal controls relevant to the preparation of the Report that is free from material misstatement, whether due to fraud or error. The Directors are also responsible for determining the appropriateness of the measurement and reporting criteria in view of the intended users of the selected KPI's and for ensuring that those criteria are publicly available to the Report users.

## Inherent limitations

Non-financial data is subject to more inherent limitations than financial data, given both the nature and the methods used for determining, calculating, sampling, or estimating such data. Qualitative interpretations of relevance, materiality, and the accuracy of data are subject to individual assumptions and judgements. We will not conduct any work outside of the agreed scope and therefore restrict our conclusion to the assurance objectives set out herein.

## Our independence and quality management

We have complied with the independence and other ethical requirements of the Code of Professional Conduct for Registered Auditors issued by the Independent Regulatory Board for Auditors ("IRBA Code"), which is founded on fundamental principles of integrity, objectivity, professional competence and due care, confidentiality, and professional behaviour. The IRBA Code is consistent with the corresponding sections of the International Ethics Standards Board for Accountants' International Code of Ethics for Professional Accountants (including International Independence Standards).

BDO South Africa Inc. applies the International Standard on Quality Management 1: Quality Management for Firms that Perform Audits and Reviews of Financial Statements, and Other Assurance and Related Services Engagements, which requires the firm to design, implement and operate a system of quality management including policies and procedures regarding compliance with ethical requirements, professional standards and applicable legal and regulatory requirements.

## Our responsibility

Our responsibility is to express a limited assurance conclusion that the selected sustainability KPIs are prepared, in all material respects, in accordance with the Life Healthcare reporting criteria. Our engagement will be performed in accordance with ISAE 3000 (Revised) Assurance Engagements other than Audits or Reviews of Historical Financial Information, issued by the International Auditing and Assurance Standards Board. ISAE 3000 is an overarching assurance standard which addresses all assurance engagements (both reasonable and limited) other than audits or reviews of historical financial information. The ISAE 3000 Standard requires us to plan and perform our engagement to obtain limited assurance about whether the selected sustainability KPIs are free from material misstatement.

A limited assurance engagement undertaken in accordance with ISAE 3000 (Revised) involves assessing the suitability in the circumstances of Life Healthcare's use of its reporting criteria as the basis of preparation for the selected KPIs, assessing the risks of material misstatement of the selected KPIs whether due to fraud or error, responding to the assessed risks as necessary in the circumstances, and evaluating the overall presentation of the selected KPIs.

A limited assurance engagement is substantially less in scope than a reasonable assurance engagement in relation to both risk assessment procedures, including an understanding of internal control, and the procedures performed in response to the assessed risks. The procedures we performed were based on our professional judgement and included inquiries, observation of processes followed, inspection of documents, analytical procedures, evaluating the appropriateness of quantification methods and reporting policies, and agreeing or reconciling with underlying records.

Given the circumstances of the engagement, in performing the procedures listed above we:

- Made enquiries with management to obtain an understanding on how the subject matter information was prepared, the internal controls environment, and information systems relevant to the sustainability reporting process.
- Performed walkthroughs of the systems, processes, and controls to collate, aggregate, validate and reported data.
- Reviewed information provided by third parties where applicable and make additional enquiries where necessary.
- Inspected supporting documentation on a sample basis and performed procedures to verify management's reporting processes against the reporting criteria.
- Evaluated the reasonableness and appropriateness of significant estimates and judgements made by management in the preparation of the selected sustainability information.
- Evaluated whether the selected sustainability KPIs presented in the Report are consistent with our overall knowledge and experience of sustainability management and performance at Life Healthcare.

The procedures performed in a limited assurance engagement vary in nature and timing and are less in extent than for a reasonable assurance engagement. As a result, the level of assurance obtained in a limited assurance engagement is substantially lower than the assurance that would have been obtained had we performed a reasonable assurance engagement. Accordingly, we do not express any reasonable assurance opinion about whether Life Healthcare's selected sustainability KPIs have been prepared, in all material respects, in accordance with the accompanying Life Healthcare reporting criteria.

## Limited assurance conclusion

Based on the procedures we have performed and the evidence we have obtained, and subject to the inherent limitations outlined elsewhere in this report, nothing has come to our attention that causes us to believe that the selected sustainability information as set out the Subject Matter paragraph above for the year ended 30 September 2025 are not prepared, in all material respects, in accordance with the reporting criteria.

## Other matters

The maintenance and integrity of the Life Healthcare website is the responsibility of Life Healthcare management. Our engagement and procedure did not involve the consideration of these matters and, accordingly, we accept no responsibility for any changes to either the information in the Sustainability Report or our independent limited assurance report that may have occurred since the initial date of presentation on the Life Healthcare website.

## Restriction of liability

Our work has been undertaken to enable us to express a limited assurance conclusion on the selected sustainability KPIs to the Directors of Life Healthcare in accordance with the terms of our engagement and for no other purpose. We do not accept or assume liability to any party other than Life Healthcare, for our work for this report, or for the conclusion we have reached.

### BDO South Africa Incorporated

Registered Auditors

*BDO South Africa Inc.*

### S Dolamo

Director

Registered Auditor

8 December 2025

Wanderers Office Park  
52 Corlett Drive  
Illovo, 2196

# KPI definitions/criteria

KPI	Definition	KPI	Definition
<b>Healthcare risk waste generated</b>	Healthcare risk waste (HCRW) is waste with the potential to cause disease including laboratory, pathological, genotoxic, cytotoxic, infectious waste material, sharps, pharmaceutical, and waste that has potentially been contaminated with infectious materials, human and animal anatomical waste, infectious human and animal waste, sharps, chemical waste, pharmaceutical waste and radioactive waste generated by healthcare professionals, healthcare facilities and other non-healthcare professionals, e.g. tattooists and taxidermists.	<b>Healthcare-associated infections (HAI)</b>	An HAI is a localised or systemic condition resulting from an adverse reaction to the presence of an infectious agent(s) or its toxin(s) that was not incubating or present on admission to the healthcare facility. An infection is considered an HAI if all elements of the Centre for Disease Control (CDC) site-specific infection criterion were not present on admission (POA) but were all present after the third calendar day of admission to the facility. The day of admission to the facility is calendar day one.
<b>Patient safety adverse events</b>	An adverse event is an unexpected and usually unpleasant event that occurs. Adverse events may result in harm or injury to a patient. The outcome or quality of the service provided to our patients could be impacted by an adverse event. Adverse events can be classified as major or minor, and can be either non-clinical or clinical events, e.g. loss of or damages to patient property, medication errors, falls, pressure ulcers, procedure-related events etc. Patient adverse event will also include exposure to HBA, infectious diseases and HAI. Patient death due to anything other than natural causes is also seen as a patient adverse event. These are, however, SREs and do not form part of this work procedure.	<b>Scope 1 carbon emissions</b>	Carbon emissions expressed as carbon dioxide equivalent (CO <sub>2</sub> e) = Total fuel (stationary and mobile) + refrigerant gases used multiply by the relevant DEFRA/locally approved emission factors
<b>Paid patient days (PPD)</b>	A PPD refers to a unit of time during which the services of the institution or facility are used by a patient.	<b>Scope 2 carbon emissions (electricity)</b>	Carbon emissions expressed as carbon dioxide equivalent (CO <sub>2</sub> e) = total electricity consumption multiply by the Eskom approved emission factor for the reporting year.
		<b>Municipal water withdrawn</b>	Total water withdrawal refers to water withdrawn from municipality in Kl.
		<b>General waste to landfill</b>	General waste generated at Life Healthcare facilities to landfill reported in tonnes.
		<b>General recycled waste</b>	Waste recycled at Life Healthcare facilities reported in tonnes.

# Glossary and definitions

<b>ACI</b>	African, Coloured and Indian	<b>JSE</b>	Johannesburg Stock Exchange Limited
<b>B-BBEE</b>	broad-based black economic empowerment	<b>kg</b>	kilogram
<b>cathlab</b>	catheterisation laboratory (usually cardiac)	<b>King IV™</b>	King Report on Corporate Governance™ for South Africa, 2016
<b>CAUTI</b>	catheter-associated urinary tract infection	<b>kL</b>	kilolitre
<b>CC</b>	Clinical Committee	<b>KPI</b>	key performance indicator
<b>CDC</b>	Centres for Disease Control and Prevention	<b>kWh</b>	kilowatt hour
<b>CLABSI</b>	central line-associated bloodstream infection	<b>L</b>	Litre
<b>Companies Act</b>	South African Companies Act, 71 of 2008 (as amended)	<b>LMI</b>	Life Molecular Imaging
<b>CSI</b>	corporate social investment	<b>MRI</b>	magnetic resonance imaging
<b>ESG</b>	environmental, social and governance	<b>MWh</b>	megawatt hour
<b>EVP</b>	employee value proposition	<b>MWp</b>	megawatt peak
<b>ExCo</b>	Executive Management Committee	<b>NHI</b>	National health insurance
<b>GDPR</b>	General Data Protection Regulation	<b>PET-CT</b>	positron emission computed tomography
<b>GEMS</b>	Government Employees Medical Scheme	<b>POPIA</b>	Protection of Personal Information Act, 4 of 2013
<b>GIBS</b>	Gordon Institute of Business Science	<b>PPD</b>	paid patient day
<b>GJ</b>	gigajoule	<b>PV</b>	photovoltaic
<b>GWh</b>	gigawatt hour	<b>RemCo</b>	Human Resources and Remuneration Committee
<b>HAI</b>	healthcare-associated infection	<b>SDG</b>	Sustainable Development Goal
<b>HCRW</b>	healthcare risk waste	<b>SETCO</b>	Social, Ethics and Transformation Committee
<b>ICP</b>	Integrated care product	<b>SPECT</b>	single-photon emission computed tomography
<b>ISO</b>	International Organization for Standardization	<b>SSI</b>	surgical site infection
		<b>VAP</b>	ventilator-associated pneumonia

# Corporate information

## Executive Directors

PG Wharton-Hood (Chief Executive), PP van der Westhuizen (Chief Financial Officer)

## Non-Executive Directors

Dr VL Litlhakanyane (Chairman), Dr MF Abdullah, Dr JE Bolger, Dr RA Campbell, CM Henry, Prof ME Jacobs, TP Moeketsi, AM Mothupi, Adv M Sello and F Tonelli

## Company Secretary

J Ranchhod

## Registered Office

Oxford Parks, 203 Oxford Road  
(Corner Eastwood and Oxford Roads), Dunkeld, 2196

## Equity Sponsor

Rand Merchant Bank (a division of FirstRand Bank Limited)

## Debt Sponsor

Questco Corporate Advisory Proprietary Limited

## Note regarding forward-looking statements

Any forward-looking statements or projections made by the Group, including those made in this report, are subject to risk and uncertainties that may cause actual results to differ materially from those projected, are the responsibility of the directors and have not been reviewed or reported on by the Group's external auditors.

## Life Healthcare Group Holdings Limited

(Incorporated in the Republic of South Africa)  
Registration number: 2003/002733/06  
Income tax number: 9387/307/15/1  
ISIN: ZAE000145892  
JSE and A2X share code: LHC

(Life Healthcare, the Group, or the Company)

## Life Healthcare Funding Limited

(Incorporated in the Republic of South Africa with limited liability)  
Registration number 2016/273566/06  
LEI: 3789SJPQJZF8ZYXTZ394  
Bond company code: LHFI  
(Life Healthcare Funding)



**Head Office**

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