

ASX RELEASE

27 September 2021

Market Announcements Office **ASX Limited Exchange Centre** 20 Bridge Street SYDNEY NSW 2000

Dear Sir/Madam

CORPORATE GOVERNANCE STATEMENT & APPENDIX 4G

Please see attached the Ramsay Health Care 2021 Corporate Governance Statement and Appendix 4G.

Yours sincerely

Henrietta Rowe

Group General Counsel & Company Secretary

The release of this announcement has been authorised by the Ramsay Health Care Board of Directors.

Corporate Governance Statement 2021

Ramsay Health Care Limited ACN 001 288 768



1. Corporate Governance

This Corporate Governance Statement describes Ramsay Health Care Limited's (**Ramsay** or the **Company**) corporate governance framework and its governance practices for the financial year ended 30 June 2021 (the **Reporting Period** or **FY21**). These arrangements are consistent with the 4th edition of the ASX Corporate Governance Council's Corporate Governance Principles and Recommendations (**Recommendations**), unless otherwise indicated below.

Further information about Ramsay's corporate governance framework and practices can be accessed on our website under the Governance, Social, Environment and Sustainability Reports tabs (https://www.ramsayhealth.com/), which include links to each of the documents referenced in this Corporate Governance Statement.

This Statement is current as at 24 August 2021 and has been approved by the Board.

We are committed to delivering high quality health care services, long-term sustainable growth and shareholder returns. The Board recognises the importance of good governance in achieving these corporate objectives, in discharging its responsibility to the Company and endeavouring to meet the expectations of all stakeholders and in executing the broader role of Ramsay as a good corporate citizen.

The Ramsay Way

People are at the heart of our success. As 'people caring for people' there are three key ways we approach our work every day.

We value strong relationships

Healthy working relationships lead to positive outcomes for all. We look out for the people we work with, and we respect and recognise them. Strong healthy relationships are the foundation of our stakeholder loyalty.

We aim to constantly improve

We do things the right way. We enjoy our work and take pride in our achievements. We are not afraid to challenge the status quo to find better ways.

We seek to grow sustainably

Maintaining sustainable levels of profitability are only part of our success. We prioritise long term success over short term financial gains. Because we care about our people, our community and our planet.

Our governance framework is designed to ensure that we are effectively managed, that statutory obligations are met and that the culture of personal and corporate integrity – the Ramsay Way – is reinforced.

The Ramsay Way Philosophy: "People Caring for People"

We remain committed to maintaining these principles across all aspects of our business, honouring the architect of *The Ramsay Way*, the late Mr Paul Ramsay AO.



Our values can be found on the Social section of our website www.ramsayhealth.com/Sustainability/Social

Ethical and responsible behaviour – aspects of the Ramsay Way

Code of Conduct

Our Code of Conduct is a statement on the shared values of our organisation and how we conduct ourselves and our business. The Code sets out our expectations of how we should behave towards everybody and everything we come in to contact with, in our capacity as a representative of Ramsay. It is the responsibility of each and every person to set the highest standards for themselves, to monitor their own behaviour, and to notify the appropriate person if the conduct of others is not aligned with the Code. The Risk Management Committee (RMC) is informed of any material breaches of the Code of Conduct.

respect for others	professionalism & diligence	health & safety
ethics and integrity	Principles of the Code	commitment to child safety
compliance with the law	sustainability, society & the environment	communication & transparency



View the Code on the Social section of our website www.ramsayhealth.com/Sustainability/Social

Global Anti-Bribery and Corruption Policy

Rejecting bribery and corrupt behaviour benefits the Ramsay business as a whole by protecting Ramsay's reputation and maintaining the confidence of people and organisations with whom it conducts business. The objective of our Global Anti-Bribery and Corruption Policy is to make available information to Ramsay employees and associates regarding our legal responsibilities and position on bribery and corruption, and to establish procedures and protocols designed to assist compliance with the Policy.

The RMC is informed of any material breaches of the Global Anti-Bribery & Corruption Policy.



View this Policy the Social section of our website www.ramsayhealth.com/Sustainability/Social

Whistleblower Policy

The Board and management encourage the reporting of any behaviour, conduct or affairs that are inconsistent with Ramsay's expected standards of conduct and behaviour. The purpose of the Whistleblower Policy is to promote a workplace environment in which everyone feels safe, supported and encouraged to report improper conduct, to explain how to make a report and to outline the protections available for those who make a report.

The RMC is informed of any material incidences reported under the Whistleblower Policy.



View this Policy on the Governance section of our website www.ramsayhealth.com/Sustainability/Governance

Securities Trading Policy

The Securities Trading Policy seeks to ensure that public confidence is maintained in the reputation of Ramsay and its related bodies corporate, our directors and employees in the trading of Ramsay securities, explains our policy and procedures for buying and selling securities and recognises that some types of dealing in securities are prohibited by law.



View this Policy on the Governance section of our website www.ramsayhealth.com/Sustainability/Governance

Human rights and modern slavery reporting

Our Human Rights & Labour Policy applies to all of Ramsay's businesses worldwide and sets out (among other things) our commitment only to engage workers who have capacity, are of legal age and have a free will and consent to work. This Global Policy was updated in FY19 and sets out the steps that must be taken by our regional businesses to uphold this commitment.

Ramsay released a modern slavery statement in FY21, which addressed both the reporting requirements under the UK *Modern Slavery Act 2015* (UK) and the Australian *Modern Slavery Act 2018* (Cth). This was the first time Ramsay was required to report under the Australian *Modern Slavery Act 2018* (Cth).

Ramsay also has in place a Code of Conduct for Agents, Manufacturers and Suppliers with whom we do business, which is being progressively implemented as a term of key supplier contracts as those contracts are entered, reviewed or renewed.



View this Policy on the Governance section of our website www.ramsayhealth.com/Sustainability/Governance

Global Sustainability Policy

As a global group, employing over 80,000 staff and caring for over eight million patients each year, we recognise our responsibility to maintain the highest standards of quality, safety and sustainability. The *Ramsay Way* philosophy: 'people caring for people' is the foundation of how we operate, and our people are central to this.

In October 2020, the Board approved the Global Sustainability Policy, which outlines our commitment to be a sustainable and responsible business. The objective of the Policy is to improve or maintain social and environmental value drivers that can impact our long-term value creation and reputation. This is articulated through our 'Ramsay Cares' Strategy which aims to deliver stronger communities, healthier people and a thriving planet across three sustainability pillars and is set out below.



Caring for our people

Ramsay Health Care recognises people are at the heart of our business from our people, our doctors and partners, our patients and the community. We are committed to ensuring the legacy of 'people caring for people' remains at the centre of everything we do. In line with The Ramsay Way, we are focused on fostering a caring and inclusive culture, a high level of engagement, and support on key areas such as high-quality patient outcomes and experience, development and training, safety, wellbeing and importantly mental health.



Caring for our planet

Ramsay Health Care recognises that conserving and protecting the environment for future generations is a critical issue. We are committed to working toward the delivery of environmentally sustainable outcomes and achieving continual improvement in performance. We are focused on the key challenges of climate change, reducing greenhouse gas emissions, reducing energy and water use, reducing resource use such as single-use plastics where it is safe to do so, increasing recycling and promoting sustainable development and procurement outcomes.



Caring for our communities

Ramsay Health Care recognises that we have an important role to play in the local communities we serve and society at large. Our focus on health care provides us the opportunity to commit significant resources to medical research, clinical teaching and training. We are focused on a global approach towards health care prevention and supporting local communities.



View this Policy on the Environment tab of our website www.ramsayhealth.com/Sustainability/Environment

Ramsay Health Care's Impact Report

Ramsay publishes an Impact Report annually, which contains information about the way we operate. This report covers our material sustainability issues that could influence the value Ramsay creates for our stakeholders over the short, medium and long-term.

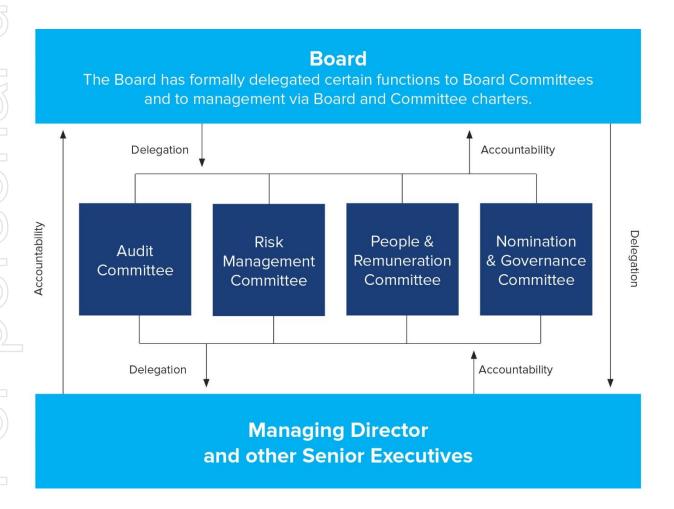
The Impact Report provides an overview of the performance of our operations in Australia, Continental Europe and the United Kingdom and our joint venture in Asia. The report is prepared in accordance with the Global Reporting Initiative (GRI) Standards: Core option and is informed by the Sustainability Accounting Standards Board (SASB) health care sector guidance.



View the Impact Report on the Sustainability section of our website www.ramsayhealth.com/Sustainability/Sustainability-Reports

Our governance framework

Ramsay and its Board of directors are committed to delivering high quality health care services, long term sustainable growth and shareholder returns. The Board recognises the importance of good governance in achieving these corporate objectives, in discharging its responsibility to the Company and endeavouring to meet the expectations of all stakeholders and in executing the broader role of the Company as a good corporate citizen. Our governance framework is set out below and is designed to promote and foster accountability, both of the Board and senior executives, to the Company and its shareholders.



2. Our Board of Directors

Ramsay's current Board of directors is set out below. Details of the background, particular qualifications, expertise are set out in the Board of directors' section on page 32 of the Annual Report.

	Name	Date of appointment	Status
3	Michael Siddle Chairman	Appointed Chairman on 27 May 2014	Non-independent
		(appointed as a director 26 May 1975)	
3	Peter Evans Deputy Chairman	Appointed Deputy Chairman on 27 May	Non-independent
		2014 (appointed as a director 29 December 1990)	
	Craig McNally	3 July 2017	Non-independent
	CEO & Managing Director		(executive)
	Alison Deans	15 November 2018	Independent
	Non-Executive director		
9	James McMurdo	10 September 2019	Independent
	Non-Executive director		
63	Karen Penrose	1 March 2020	Independent
	Non-Executive director		
	Claudia Süssmuth Dyckerhoff	30 October 2018	Independent
3	Non-Executive director		
	David Thodey AO	28 November 2017	Independent
	Non-Executive director	(appointed lead independent director 1 March 2020)	

The role of the board

The Board has adopted a Board Charter which includes an overview of Board composition and process, and the relationship and interaction between the Board, Board Committees and management.

The Board Charter and the charters adopted by the Board for its standing Committees have been prepared and adopted on the basis that strong corporate governance contributes to the performance of the Group, creates shareholder value and engenders the confidence of the investment market.

Board composition and skills matrix

The Nomination and Governance Committee is responsible for reviewing and making recommendations to the Board on its membership, including recommendations on the size and composition of the Board, review of Board succession plans and the succession of the Chairman. The Nomination and Governance Committee has regard to the Board skills matrix and the objective that the Board comprise directors with a broad range of skills, expertise and experience from a broad range of backgrounds, including gender.

Ramsay aims to maintain a Board that comprises directors who are able to understand effectively and manage the issues arising in the Company's business, review and challenge the performance of management and optimise the Company's performance. The Nomination and Governance Committee annually assesses the composition of the Board according to its Board Skills Matrix.

The following table sets out the various skills/experience that comprise our Board Skills Matrix by describing each relevant skill/experience and the number of directors that have at least a solid amount of experience in respect of that skill or experience (noting that there are eight directors in total, including the Executive director).

Skills and experience	Explanation	Nı	umber	of dire	ctors w	vith ski	ll or ex	perien	ce
Sectors/Activities									
Health Care	Competency in the health care industry and international health systems	1	2	3	4	5	6	7	8
Multinational experience	Ability to manage and oversee an organisation's business and strategic objectives from an international perspective.	1	2	3	4	5	6	7	8
Specific Skills and Exper	ience								
Strategy	Ability to identify and critically assess strategic opportunities and threats and to develop and implement successful strategies.	1	2	3	4	5	6	7	8
Public Policy and Regulatory Affairs	Ability to influence public policy development and manage the implications of public and regulatory policy.	1	2	3	4	5	6	7	8

	Skills and experience	Explanation	Number of directors with skill or experien			ice				
	Capital management and Finance	Ability to assess financial performance, analyse financial statements and implement effective internal financial and risk controls.	1	2	3	4	5	6	7	8
	Technology and disruption	Ability to leverage technological developments to support growth and drive competitive advantage, including responding to digital disruption.	1	2	3	4	5	6	7	8
	People and Culture	Ability to set & communicate corporate culture, motivate key capital talent, oversee management and evaluate the suitability of CEOs and other key executives.	1	2	3	4	5	6	7	8
	Workplace Health and Safety	Ability to oversee the proactive management of workplace health and safety practices.	1	2	3	4	5	6	7	8
	Consumer Focus	Ability to oversee a strong consumer-focused culture committed to achieving consumer outcomes.	1	2	3	4	5	6	7	8
	Operational Experience in Major Business	Ability to manage and oversee business operations and deliver sustained business success.	1	2	3	4	5	6	7	8
D	Governance, legal and regulatory	Ability to assess the effectiveness of policies and procedures, and to manage legal, compliance and reputational risks.	1	2	3	4	5	6	7	8
	Risk Management	Ability to identify and manage key risks to an organisation.	1	2	3	4	5	6	7	8
	Mergers & Acquisitions	Ability to assess strategic M&A opportunities and oversee execution/completion.	1	2	3	4	5	6	7	8

Director independence

The Board considers that it is able to exercise its judgement in an independent and unfettered manner, provide independent and effective oversight of management and is highly effective in promoting the interests of shareholders as a whole. All members of the Board, whether independent directors or not, exercise independent judgement in making decisions in the best interests of the Company. When considering matters at Board meetings, questioning and debate amongst the directors is encouraged and no individual director (or small group of directors) is permitted to dominate the Board's discussions or decision making.

The Board determines the independence status of each director on an annual basis. In doing so, the Board considers the matters described in Box 2.3 of the Recommendations. The Board only considers a Director to be independent where he or she is free of any interest, position, or relationship that might influence, or might reasonably be perceived to influence, in a material respect his or her capacity to bring independent judgment to bear on issues before the Board and to act in the best interests of the Group as a whole rather than in the interests of an individual shareholder or other party.

At the date of this Statement, Paul Ramsay Holdings Pty Limited (PRH), which is a subsidiary of Paul Ramsay Foundation Limited (PRF), is the Company's largest shareholder. Mr Siddle (Chairman) is a director of PRH, and both Mr Siddle and Mr Peter Evans (Deputy Chairman) are directors of PRF. Mr Siddle and Mr Evans are also directors of the subsidiaries and related entities of PRH.

During FY21, the Board undertook the annual review of each director's independence. Given Mr Siddle's and Mr Evans' respective roles as directors of PRF and PRH and given their tenure on the Board, the Board determined that Mr Siddle and Mr Evans are not considered independent directors under the Recommendations. Notwithstanding this decision, the Board considers that both Mr Siddle and Mr Evans add significant value to the Board's deliberations given their considerable industry experience and expertise, as well as the corporate knowledge they bring to Board deliberations.

In the case of Mr David Thodey AO, Dr Claudia Süssmuth Dyckerhoff, Ms Alison Deans, Mr James McMurdo and Ms Karen Penrose, the Board does not consider there to be any relationships that could materially interfere with or could reasonably be perceived to materially interfere with their ability to exercise unfettered and independent judgement in the discharge of their responsibilities and duties.

The Managing Director & CEO, Mr Craig McNally, is not considered to be an independent director as he is a current executive of the Company.

As a result of this determination, the Board has one executive director, two non-independent Non-Executive directors and five independent Non-Executive directors. Accordingly, throughout the Reporting Period, the Board comprised a majority of independent Non-Executive directors. The Board of the Company is not chaired by an independent Chairman and the RMC is not chaired by an independent director, as is recommended under the Recommendations. Nevertheless, the Board is satisfied that it is continuing to operate independently of management and will be effective in promoting the best interests of shareholders as a whole.

As part of Ramsay's ongoing succession planning, Mr Evans has flagged that he intends to retire at the end the FY21 AGM. Mr Evans has been an engaged and active Non-Executive director of Ramsay Health Care since his appointment in 1990, and prior to that as an executive since 1969. The Board considers him to be the most appropriate person to chair the RMC given his past experience in the role and more broadly given his considerable industry experience and expertise. The Board is conscious of the need to ensure that the expertise and significant collective experience of the longer standing directors of the Board is preserved, and Mr Evans has been working closely with our recently appointed directors to share his insight and knowledge. A search to identify a suitable candidate to be appointed to the Board is underway.

Chairman

Mr Siddle continues in his role as Chairman of the Board. He has considerable knowledge and experience in the management of the Company, private hospitals generally and property development. Mr Siddle was the Deputy Chairman of the Board for many years and, in order to ensure continuity and stability of this successful Board, was appointed Chairman of the Company following the passing of Mr Paul Ramsay AO in May 2014. Given this relevant and valuable experience, the Board considers that the interests of the shareholders are best met by the continued contribution of Mr Siddle as Chairman.

Lead independent director

To enhance the independent functioning of the Board, in FY20 the Board resolved to appoint Mr David Thodey AO as Lead Independent director. The key functions of the Lead Independent director are to:

- ensure that any conflicts of interest (or potential conflicts of interest) between the Company's major shareholder and the Company are identified and appropriately managed;
- promote awareness of the importance of independent judgements in the Board's decision-making;
- provide leadership to the other independent Non-Executive directors and support them in presenting diverse perspectives on issues being considered by the Board; and
- promote constructive interaction between the independent Non-Executive directors and all other directors.

Access to independent advice

Directors are entitled to seek independent professional advice at the expense of the Company as required in the furtherance of their duties and in relation to their functions (including their Board Committee functions), subject to prior consultation with, and approval of, the Chairman or Deputy Chairman. Directors have consistently indicated in their evaluations that they consider they have adequate opportunity to access such advice.

Appointment, induction and training

The Company has written agreements with each of its Non-Executive directors setting out the terms of their appointment.

The Nomination and Governance Committee ensures that appropriate background checks are carried out prior to the Board appointing a new director or putting to shareholders a candidate for election. Shareholders are provided with all material information in the Company's possession that is relevant to a decision on whether or not to elect or reelect a director, most relevantly through the Notice of Meeting and Annual Report.

The Nomination and Governance Committee is also responsible for implementing an effective induction process for new directors and reviewing its effectiveness. New directors are required to attend and complete a structured director induction program, which includes site visits to Ramsay's hospitals and meetings with key executives. In addition, directors are provided with ongoing professional development and training to enable them to develop and maintain their skills and knowledge. The Nomination and Governance Committee reviews processes that are in place to support direction induction and ongoing education.

Performance reviews and evaluation

During FY21, the Board undertook an assessment of the performance of the Board, the directors and the Board Committees with the assistance of an independent external consultant. The results of the review were discussed by the whole Board, and initiatives to improve or enhance Board performance and effectiveness were considered and recommended.

Board committees

The Board has established four committees and has delegated to each committee duties to assist the Board in exercising its responsibilities and discharging its duties. Each committee has a separate charter that sets out the roles and responsibilities of that committee, as well as the membership and any other requirements for the running of the committee. Each committee will regularly report to the Board on all matters relevant to the Committee's roles and responsibilities.



View the Charters on the Governance tab of our website www.ramsayhealth.com/Sustainability/Governance

The members of each committee are set out below.

Board Committee	Composition requirements	Membership for period 1 July 2020 – 30 June 2021
Audit Committee	Comprised of at least three members, all of whom are Non-Executive Directors and a majority of whom are independent. Chaired by an independent Non-Executive Director, who is not the chair of the Board.	Karen Penrose (Chair) Peter Evans James McMurdo
Risk Management Committee	Comprised of at least three members, a majority of whom are independent Directors.	Peter Evans (Chair) Karen Penrose Claudia Süssmuth Dyckerhoff
People and Remuneration Committee	Comprised of at least three members, a majority of whom are independent Directors. Chaired by an independent Director.	Alison Deans (Chair) Michael Siddle David Thodey AO
Nomination and Governance Committee	Comprised of at least three members, a majority of whom are independent Directors. Chaired by an independent Director.	David Thodey AO (Chair) Michael Siddle Alison Deans

The number of scheduled Board and committee meetings held during FY21 and the number of meetings attended by each of the directors in office during this period is set out in the table below.

Name	Board	Audit Committee	Risk Management Committee	People & Remuneration Committee	Nomination & Governance Committee
	Attended (Eligible to attend)	Attended (Eligible to attend)	Attended (Eligible to attend)	Attended (Eligible to attend)	Attended (Eligible to attend)
C. A. Deans	18 (19)			8 (8)	5 (5)
P. J. Evans	19 (19)	9 (9)	4 (4)		
J. McMurdo	18 (19)	8 (9)			
C. R. McNally	19 (19)				
K. L. C. Penrose	19 (19)	9 (9)	3 (4)		
M. S. Siddle	19 (19)			8 (8)	5 (5)
C. Süssmuth Dyckerhoff	18 (19)		4 (4)		
D. Thodey	19 (19)			8 (8)	5 (5)

4. Senior executives



- * The role of the Company Secretary is directly accountable to the Board, through the Chair
- ** In his role as Internal Auditor, the Group Chief Risk Officer has a direct reporting line through to the Audit Committee, through the Audit Committee Chair.
- * The positions of Group Chief Risk Officer and Group General Counsel are not members of the Global Executive.

The Board delegates the responsibility for the day-to-day management of the Company to the Managing Director, who is assisted by the senior executives who report to him.

The diagram above sets out details of the senior executives reporting directly to the Managing Director as at the date of this Corporate Governance Statement.

Appointment

Appropriate background checks are conducted before a senior executive is appointed.

The terms of employment of Mr McNally and all senior executives are formalised in a written services agreement.

Performance reviews and evaluation

To monitor senior executive performance each executive is set an individual scorecard containing a number of financial and non-financial key performance indicators (KPIs) that are to be achieved during the year. Details of the KPIs used for Mr McNally in FY21 are set out in the FY21 Remuneration Report on page 36 of our 2021 Annual Report. The Managing Director's performance is formally assessed on an annual basis. The Managing Director's KPIs are reviewed and set annually by the Board on the basis of recommendations made by the People & Remuneration Committee at the commencement of the financial year. The People and Remuneration Committee carefully evaluates the Managing Director's performance against those KPIs and makes recommendations to the Board for final decision.

An annual assessment of the performance of all other senior executives is undertaken by the People and Remuneration Committee on the basis of recommendations by the Managing Director, who conducts performance reviews in relation to each senior executive. A performance evaluation for all senior executives, including the Managing Director, was undertaken in the Reporting Period in accordance with the process disclosed above.

Company Secretary

Ms Henrietta Rowe was the Group General Counsel and Company Secretary throughout the Reporting Period. The Company Secretary is appointed by the Board and is directly accountable to the Board, through the Chair, in relation to all matters relating to the proper functioning of the Board. All directors have direct access to the Company Secretary. The role of Company Secretary is set out in more detail in the Company's Board Charter. Details of Ms Rowe's experience and qualifications are set out in the Board of directors' section on page 34 of the Annual Report.

5. Communication

Communication with shareholders and the market

Ramsay is committed to effective communication with its customers, shareholders, market participants, employees, suppliers, financiers, creditors, other stakeholders and the wider community.

The Board has adopted a Disclosure & Communications Policy which sets out procedures designed to ensure compliance with ASX Listing Rule and Corporations Act disclosure requirements. The Policy also sets out the role of the Disclosure Committee, which is comprised of the Managing Director and CEO, the Group CFO, the Group General Counsel and Company Secretary and the Group Head of Investor Relations, and, where possible in the circumstances, the Chairman and the Chairman of the Audit Committee. The Disclosure Committee is responsible for (among other things) determining whether matters within management's authority should be disclosed publicly under the Policy and for assisting employees in understanding what information may require disclosure to the market on the basis that it is price sensitive. Certain disclosure decisions (for example, relating to matters of fundamental significance to the Company) are the responsibility of the Board. The Policy also covers the provision of information to shareholders, the media and the wider community.

The Company's investor relations programme comprises the following mechanisms, which together facilitate two-way communications with shareholders and ensure that shareholders are kept fully informed and able to participate effectively at general meetings:

- financial reports, recordings of webcasts with senior executives and ASX releases are posted on the Investor Centre on our website;
- relevant documents relating to our governance arrangements are made available in the Corporate Governance and Social sections of our website;
- the Investor Centre of our website also contains a link to our share registry, recent and historical information on dividends and a calendar of key dates for the Company's results announcements, dividend payments and Annual General Meeting (AGM);
- shareholders may make inquiries of the share registry manager by telephone or post. All security holder and investor queries must be dealt with courteously and in a timely way;
- shareholders may sign up for email alerts via the share registry manager and receive correspondence (by email or post) from the Chairman for significant events and notices of general meetings;
- participation by shareholders at the AGM is actively encouraged. For example, shareholders are encouraged to submit questions prior to the AGM, with those questions answered at the AGM. The external auditor attends the AGM and is available to answer questions from shareholders relevant to the audit. In addition, all resolutions in the Notice of Meeting are decided on a poll.

The Board receives copies of material market announcements promptly after they have been released.

If a new presentation is to be given to investors or analysts at an open briefing, a copy of the presentation materials will be released to the ASX ahead of the presentation. Access to live webcasts of management briefings are available to all shareholders and a recording of the webcast will be posted on the Investor Centre of the Company's website following the briefing.

Verification of unaudited reports

The Audit Committee assists the Board to discharge its responsibilities on matters relating to the external reporting of financial information for the Group and is responsible for reviewing Ramsay's corporate and financial reporting and disclosure processes. This includes reviewing the process to verify the integrity of any periodic corporate report that we release to the market that is not audited or reviewed by the external auditor.

For periodic corporate reports released to the market which are not required to be audited or reviewed by our external auditor, Ramsay has a process in place to ensure the report is materially accurate and balanced in order to provide investors with appropriate information to make informed investment decisions. The process for each periodic report will vary depending on the nature of the particular report, but generally involve confirmation by the individuals responsible for the information that, to the best of their knowledge and belief, the information is accurate and not

misleading; review of the report or document by the relevant internal subject matter expert(s), and in some case external advisers; and approval by the individual responsible for the corporate report and confirmation that it is appropriate for release.

6. Risk management

Risk management framework

The Board has established the RMC to assist with the oversight of financial and non-financial risks across the Company and its subsidiaries, internal controls and systems and processes for monitoring compliance with laws and regulations.

The RMC has the responsibility for reviewing the risk management framework at least annually and satisfying itself that the risk management framework continues to be sound and that the Company is operating with due regard to the risk appetite set by the Board. This review took place in FY21.

The Annual Report contains information about Ramsay's material business risks, including Ramsay's exposure to environmental or social risks - see pages 8 to 10. The Board and management understand the importance of meeting stakeholder expectations on social and environmental concerns and being resilient to be able to respond to a changing climate and transition to a low carbon economy. The Ramsay Health Care Impact Report also outlines the material sustainability issues, our management approach and performance of our operations on environmental and social areas. As part of its commitment to sustainability, Ramsay will commence aligning its reporting with the recommendations of the Task force on Climate related Financial Disclosure (TCFD) in its FY21 corporate reporting suite.

Internal audit

Group Internal Audit is the Company's 3rd line assurance function that provides the Board and senior executives with an independent and objective evaluation of the adequacy and effectiveness of the Group's governance, risk management and internal controls. The Global Chief Risk Officer is responsible for Internal Audit and has a direct reporting line through to the Audit Committee through the Audit Committee Chair.

The Audit Committee is responsible for reviewing the scope and adequacy of the Group's Internal Audit program and approves the Internal Audit plan and budget annually. The Internal Audit plan is considered over a three-year rolling period and is continually reviewed to ensure alignment with the Group's key risks and strategy.

In addition, each of the Group's regions has its own Internal Audit plan, which is presented to the respective regional board/executive committee with relevant issues reported to the Audit Committee and/or RMC as part of the Group's quarterly risk reporting.

Assurance

Prior to the Board's approval of the Company's FY21 financial statements and in accordance with s295A of the *Corporations Act 2001* (Cth) and the Recommendations, the Managing Director and the Group Chief Financial Officer provided a declaration to the Board that:

- in their opinion, the Company's financial records have been properly maintained and that the financial statements comply with the appropriate accounting standards and give a true and fair view of the financial position and performance of the Company; and
- their opinion has been formed on the basis of a sound system of risk management and internal control which is operating effectively.

A similar declaration was provided by the Managing Director and the Group Chief Financial Officer prior to the Board's approval of the Company's HY20 financial information. The Company's external auditor, Ernst & Young, will again attend the Company's 2021 AGM and be available to answer shareholder questions concerning the audit of the Company's FY21 financial statements.

7 Remuneration

The Company distinguishes the structure of Non-Executive Directors' remuneration from that of executive Directors and senior executives.

The Company's policy is to reward executives with a combination of fixed, performance-based and equity-based incentives. To drive improvements in shareholder value, a significant proportion of remuneration for the CEO and senior executives is 'at risk' based on delivery of returns to shareholders. Conversely, to preserve independence and impartiality, no element of Non-Executive Director remuneration is 'at risk' (i.e. it is not based on the performance of the Company).

Non-Executive Directors receive Board and Committee fees that are set having regard to the responsibilities and risks of the role and market competitiveness. To create alignment between the interests of Non-Executive Directors and shareholders, Non-Executive Directors are encouraged to hold shares in the Company. Many of the Non-Executive Directors have acquired shares in the Company and hold them in their own right.

The Board implemented a Minimum Shareholding Policy that took effect on 1 July 2019. This Policy supports alignment with the Company's shareholders and requires the members of the Global Executive and Non-Executive Directors to obtain and hold Ramsay Health Care shares in line with the detail below.

Position	Further detail	Timeframe to Acquire
MD & CEO	• 200% of FAR	
Global Executive	• 100% of FAR	 5 years from time of appointment (or implementation of policy for individuals
Non-Executive Directors	 100% of base annual fees 	in role at 1 July 2019)

The Company provides Non-Executive Directors the opportunity to salary sacrifice a portion of their annual remuneration to be granted as share rights if they choose to do so. Structuring Non-Executive Director remuneration in this way has supported Non-Executive Directors in building their shareholdings in the Company and continues to enhance the alignment of interests between Non-Executive Directors and shareholders generally.

Further details about our remuneration practices and policies are set out in the FY21 Remuneration Report.

The Securities Trading Policy prohibits hedging arrangements, dealing in derivatives or any other arrangements that vary the economic risk related to the Company's securities. This includes hedging or arrangements that have the effect of limiting the economic risk in connection with unvested securities issued under an employee or director option or share plan.

8 Diversity and inclusion

Diversity and Inclusion Policy

We are proud of the considerable diversity that exists throughout the organisation's workforce. We strive to create a culture that embraces the differences of ideas, perspectives and experiences that diversity brings in recognition of the positive impact a diverse workforce has on Ramsay's overall performance.

"The Ramsay Way" culture recognises that people – staff and doctors – are Ramsay Health Care's most important asset and this has been key to our ongoing success. As part of that, diversity and inclusion is a business imperative that assists to drive business results, enhance Ramsay's reputation and, attract, recruit, engage and retain a diverse group of talented people.

The Board has adopted a Diversity and Inclusion Policy which sets out Ramsay's expectations in relation to diversity and inclusion and applies to all Ramsay personnel globally. The Policy provides that diversity and inclusion is a business imperative that assists to drive business results, enhance Ramsay's reputation and attract, recruit, engage and retain a diverse group of talented people. The Policy requires meaningful measurable objectives to be set annually for achieving gender diversity in the composition of the Board, senior executives and workforce generally, as required under the Recommendations. Reporting on the progress against the measurable objectives to the People & Remuneration Committee and Nomination & Governance Committee occurs at least annually. Our measurable objectives for FY21 are set out below.



View this Policy on the Social tab of our website www.ramsayhealth.com/Sustainability/Social

We also have in place comprehensive and well-developed Workplace Diversity Guidelines for employees, including diversity criteria in recruitment and selection guidelines.

In each of our geographical business units, we have in place a Flexible Work Practices Policy to promote balance of work and life responsibilities and interests, such as family and carer, study, community and cultural needs, with the aim of accommodating employees' needs for flexibility subject to meeting the operational needs of the business. This is exemplified by the fact that a significant number of our employees are part time with child and/or elderly care and other responsibilities and desire to obtain effective work life balance in order to maintain and progress their careers.

Female representation at Ramsay

We are proud of the strong representation of women throughout the organisation. In FY21 women comprised over 80% of employees in each of the Company's operations in Australia, Europe, the United Kingdom and Asia. As at 30 June 2021, women occupied 33% of senior executive¹ positions and approximately 45% of the Group's senior management² positions.

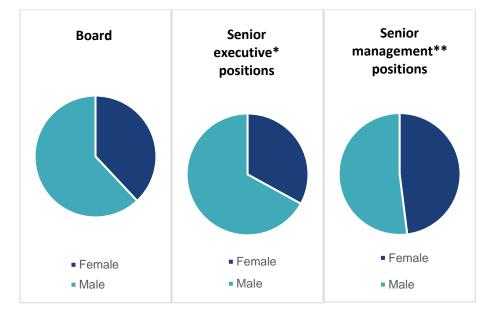
These figures do not reflect the level of female management representation in our hospital facilities, which is generally high. For example, women represent 51% of hospital and facility CEOs and 70% of hospital and facility managers.

Leadership programs are designed to support and prepare employees for their first move into supervisory roles through their progression to senior management and executive positions. The diversity profile of applicants and successful candidates is assessed to ensure that such leadership programs are broadly reflective of our workforce.

Since Ms Penrose's appointment in March 2020, the Company has three female Board members, which accounts for 38% of Board members (43% of Non-Executive directors). The Board is conscious of the importance of female representation on the Board, particularly in light of the fact that women represent a substantial proportion of the Group's overall workforce, clinicians and patients.

^{1 &#}x27;senior executive' positions are those reporting directly to Craig McNally, Managing Director and CEO.

^{&#}x27;senior management' positions are those positions reporting to (and including) Craig McNally, Managing Director and CEO, and each of their direct reports.



- * 'senior executive' positions are those reporting directly to Craig McNally, Managing Director and CEO.
- ** 'senior management' positions are those positions reporting to (and including) Craig McNally, Managing Director and CEO, and each of their direct reports.

Measurable objectives

The Diversity and Inclusion Policy requires meaningful measurable objectives for achieving gender diversity to be set annually in the composition of the Board, senior executives and workforce generally.

The People and Remuneration Committee is responsible for approving these measurable objectives and assessing our progress in achieving those objectives.

Updates on the Company's progress against its objectives during FY21 and the measurable objectives set for FY22 are set out in the table below.

Measurable objective set in FY20	Timeframe	Progress in FY21	Measurable objective for FY22
Expand our talent identification, Leadership Development and succession planning processes to ensure high potential females are encouraged to consider leadership and management roles and to prepare them to take on executive management roles.	Ongoing	49 executive leaders participated in the Executive Leadership programme during FY2021 with 41% being female. Following our annual talent and succession planning session, an audit is completed to consider the diversity within our succession pools.	The Executive Leadership Programme and succession process will assist us to increase gender diversity at the most senior levels.
Align the internal mentoring programme (which aims to increase opportunities for female employees in management or professional positions to have access to senior managers as mentors) with identified forecasted shortages in key management positions.	Ongoing	The Company continued to offer tailored professional development opportunities to senior management including access to mentoring and executive coaching.	The mentoring programme will continue in FY2022 with a focus on identifying mentees in areas of forecasted shortages in key management positions.
Aim to increase the percentage of women in executive and senior	Ongoing	48% of the Group's senior management positions, are currently held by women.	For FY2022, the objective is to achieve gender balance at the executive and senior management level and through the organisation's workforce.

Measurable objective set in FY20	Timeframe	Progress in FY21	Measurable objective for FY22
management ³ positions subject to the identification of candidates with appropriate skills.			In FY2022 and beyond, the Company will continue to build on its work seeking out opportunities for high calibre female leaders in senior management positions.
Ensure online Discrimination, Bullying and Harassment training modules are completed by all senior managers	Ongoing	New employees must complete the online Discrimination, Bullying and Harassment module as part of their induction programme. Further, the module is scheduled for completion by all managers bi- annually.	Compliance will again be monitored in FY2021 with a target of 100% compliance.
Review of flexible and part-time work arrangements to endeavour to ensure that roles are appropriate to maintain career development.	Ongoing	Senior managers continue to support and encourage managers to consider requests for flexibility from employees wherever practicably possible. The number of flexible working arrangements continues to increase each year. Flexible working options are supported by the national Flexible Work Practices policies in all our markets.	Flexible work arrangements will continue to be supported and encouraged throughout FY2022.
Achieve a gender balance at the Board level so that the Board is comprised of 40 per cent female, 40 percent male and 20 percent of either gender.	FY2025	As at the end of FY2021 the Company's female Board members account for 38% of all Board members.	For FY2022 and beyond, the Company will continue to target a 40:40:20 Board composition balance.

In relation to the Australian business, each year the Company reports gender equality indicators in accordance with the Workplace Gender Equality Act 2012 and these reports can be found in the Workforce section of the Ramsay Australia website at www.ramsayhealth.com.au/Sustainability/Workforce. Ramsay UK also publishes an annual Gender Pay Report in accordance with UK legislative requirements. The latest Report is available at www.ramsayhealth.co.uk/legal-and-regulatory

^{3 &#}x27;senior management' positions are those positions reporting to (and including) Craig McNally, Managing Director and CEO, and each of their direct reports

or personal use only

ramsayhealth.com



Appendix 4G

Key to Disclosures Corporate Governance Council Principles and Recommendations

Name of entity:	
Ramsay Health Care Limited	
ABN / ARBN:	Financial year ended:
57 001 288 768	30 June 2021
Our corporate governance statement ² for the a	above period above can be found at:3
	http://www.ramsayhealth.com/sustainability/governance/corporategoverancestatement2021
The Corporate Governance Statement is accuboard.	rrate and up to date as at 30 June 2021 and has been approved by the
The annexure includes a key to where our cor	porate governance disclosures can be located.
Date:	27 September 2021
Name of Director or Secretary authorising lodgement:	Henrietta Rowe, Group General Counsel & Company Secretary

Under Listing Rule 4.7.4, if an entity chooses to include its corporate governance statement on its website rather than in its annual report, it must lodge a copy of the corporate governance statement with ASX at the same time as it lodges its annual report with ASX. The corporate governance statement must be current as at the effective date specified in that statement for the purposes of rule 4.10.3.

Throughout this form, where you are given two or more options to select, you can, if you wish, delete any option which is not applicable and just retain the option that is applicable. If you select an option that includes "OR" at the end of the selection and you delete the other options, you can also, if you wish, delete the "OR" at the end of the selection.

¹ Under Listing Rule 4.7.3, an entity must lodge with ASX a completed Appendix 4G at the same time as it lodges its annual report with ASX. Listing Rule 4.10.3 requires an entity that is included in the official list as an ASX Listing to include in its annual report either a corporate governance statement that meets the requirements of that rule or the URL of the page on its website where such a statement is located. The corporate governance statement must disclose the extent to which the entity has followed the recommendations set by the ASX Corporate Governance Council during the reporting period. If the entity has not followed a recommendation for any part of the reporting period, its corporate governance statement must separately identify that recommendation and the period during which it was not followed and state its reasons for not following the recommendation and what (if any) alternative governance practices it adopted in lieu of the recommendation during that period.

² "Corporate governance statement" is defined in Listing Rule 19.12 to mean the statement referred to in Listing Rule 4.10.3 which discloses the extent to which an entity has followed the recommendations set by the ASX Corporate Governance Council during a particular reporting period.

³ Mark whichever option is correct and then complete the page number(s) of the annual report, or the URL of the web page, where the entity's corporate governance statement can be found. You can, if you wish, delete the option which is not applicable.

ANNEXURE - KEY TO CORPORATE GOVERNANCE DISCLOSURES

Corpo	rate Governance Council recommendation	We have followed the recommendation in full for the whole of the period above. We have disclosed	
PRINC	IPLE 1 – LAY SOLID FOUNDATIONS FOR MANAGEMENT AND OVE	ERSIGHT	
1.1	A listed entity should disclose: (a) the respective roles and responsibilities of its board and management; and (b) those matters expressly reserved to the board and those delegated to management.	the fact that we follow this recommendation: in our Corporate Governance Statement OR at [insert location] and information about the respective roles and responsibilities of our board and management (including those matters expressly reserved to the board and those delegated to management): at http://www.ramsayhealth.com/Sustainability/Governance	 □ an explanation why that is so in our Corporate Governance Statement <u>OR</u> □ we are an externally managed entity and this recommendation is therefore not applicable
1.2	A listed entity should: (a) undertake appropriate checks before appointing a person, or putting forward to security holders a candidate for election, as a director; and (b) provide security holders with all material information in its possession relevant to a decision on whether or not to elect or re-elect a director.	the fact that we follow this recommendation: □ in our Corporate Governance Statement OR □ at [insert location]	 □ an explanation why that is so in our Corporate Governance Statement <u>OR</u> □ we are an externally managed entity and this recommendation is therefore not applicable
1.3	A listed entity should have a written agreement with each director and senior executive setting out the terms of their appointment.	the fact that we follow this recommendation: ☑ in our Corporate Governance Statement OR ☐ at [insert location]	 □ an explanation why that is so in our Corporate Governance Statement ○R □ we are an externally managed entity and this recommendation is therefore not applicable
1.4	The company secretary of a listed entity should be accountable directly to the board, through the chair, on all matters to do with the proper functioning of the board.	the fact that we follow this recommendation: in our Corporate Governance Statement OR at [insert location]	□ an explanation why that is so in our Corporate Governance Statement OR □ we are an externally managed entity and this recommendation is therefore not applicable

⁴ If you have followed all of the Council's recommendations in full for the whole of the period above, you can, if you wish, delete this column from the form and re-format it.

Corporat	e Governance Council recommendation	We have followed the recommendation in full for the whole of the period above. We have disclosed	We have NOT followed the recommendation in full for the whole of the period above. We have disclosed \dots^4
	A listed entity should: a) have a diversity policy which includes requirements for the board or a relevant committee of the board to set measurable objectives for achieving gender diversity and to assess annually both the objectives and the entity's progress in achieving them; b) disclose that policy or a summary of it; and c) disclose as at the end of each reporting period the measurable objectives for achieving gender diversity set by the board or a relevant committee of the board in accordance with the entity's diversity policy and its progress towards achieving them and either: (1) the respective proportions of men and women on the board, in senior executive positions and across the whole organisation (including how the entity has defined "senior executive" for these purposes); or (2) if the entity is a "relevant employer" under the Workplace Gender Equality Act, the entity's most recent "Gender Equality Indicators", as defined in and published under that Act.	the fact that we have a diversity policy that complies with paragraph (a): in our Corporate Governance Statement OR at [insert location] at at https://www.ramsayhealth.com/Sustainability/Social and the measurable objectives for achieving gender diversity set by the board or a relevant committee of the board in accordance with our diversity policy and our progress towards achieving them: in our Corporate Governance Statement OR at [insert location] and the information referred to in paragraphs (c)(1) or (2): in our Corporate Governance Statement OR at [insert location] at [insert location]	□ an explanation why that is so in our Corporate Governance Statement OR □ we are an externally managed entity and this recommendate is therefore not applicable
(1	A listed entity should: a) have and disclose a process for periodically evaluating the performance of the board, its committees and individual directors; and b) disclose, in relation to each reporting period, whether a performance evaluation was undertaken in the reporting period in accordance with that process.	the evaluation process referred to in paragraph (a): ☑ in our Corporate Governance Statement OR ☐ at [insert location] and the information referred to in paragraph (b): ☑ in our Corporate Governance Statement OR ☐ at [insert location]	 □ an explanation why that is so in our Corporate Governance Statement <u>OR</u> □ we are an externally managed entity and this recommendation is therefore not applicable
(:	A listed entity should: a) have and disclose a process for periodically evaluating the performance of its senior executives; and b) disclose, in relation to each reporting period, whether a performance evaluation was undertaken in the reporting period in accordance with that process.	the evaluation process referred to in paragraph (a): □ in our Corporate Governance Statement OR □ at [insert location] and the information referred to in paragraph (b): □ in our Corporate Governance Statement OR □ at [insert location]	 □ an explanation why that is so in our Corporate Governance Statement <u>OR</u> □ we are an externally managed entity and this recommendatio is therefore not applicable

		We have followed the recommendation in full for the whole of the period above. We have disclosed	We have NOT followed the recommendation in full for the whole of the period above. We have disclosed ⁴
2.1	E 2 - STRUCTURE THE BOARD TO ADD VALUE		
	The board of a listed entity should: (a) have a nomination committee which: (1) has at least three members, a majority of whom are independent directors; and (2) is chaired by an independent director, and disclose: (3) the charter of the committee; (4) the members of the committee; and (5) as at the end of each reporting period, the number of times the committee met throughout the period and the individual attendances of the members at those meetings; or (b) if it does not have a nomination committee, disclose that fact and the processes it employs to address board succession issues and to ensure that the board has the appropriate balance of skills, knowledge, experience, independence and diversity to enable it to discharge its duties and responsibilities effectively.	[If the entity complies with paragraph (a):] the fact that we have a nomination committee that complies with paragraphs (1) and (2): ☑ in our Corporate Governance Statement OR ☐ at [insert location] and a copy of the charter of the committee: ☑ at http://www.ramsayhealth.com/Sustainability/Governance and the information referred to in paragraphs (4) and (5): ☑ in our Corporate Governance Statement OR ☐ at [insert location] [If the entity complies with paragraph (b):] the fact that we do not have a nomination committee and the processes we employ to address board succession issues and to ensure that the board has the appropriate balance of skills, knowledge, experience, independence and diversity to enable it to discharge its duties and responsibilities effectively:	□ an explanation why that is so in our Corporate Governance Statement OR □ we are an externally managed entity and this recommendation is therefore not applicable
77	A listed entity should have and disclose a board skills matrix setting out the mix of skills and diversity that the board currently has or is looking to achieve in its membership.	□ in our Corporate Governance Statement <u>OR</u> □ at [insert location] our board skills matrix: □ in our Corporate Governance Statement <u>OR</u> □ at [insert location]	□ an explanation why that is so in our Corporate Governance Statement <u>OR</u> □ we are an externally managed entity and this recommendation

•		We have followed the recommendation in full for the whole of the period above. We have disclosed		We have NOT followed the recommendation in full for the whof the period above. We have disclosed \dots^4	
2.3	A listed entity should disclose: (a) the names of the directors considered by the board to be independent directors; (b) if a director has an interest, position, association or relationship of the type described in Box 2.3 but the board is of the opinion that it does not compromise the independence of the director, the nature of the interest, position, association or relationship in question and an explanation of why the board is of that opinion; and (c) the length of service of each director.	the names of the directors considered by the board to be independent directors: in our Corporate Governance Statement OR at [insert location] and, where applicable, the information referred to in paragraph (b): in our Corporate Governance Statement OR at [insert location] and the length of service of each director: in our Corporate Governance Statement OR in our Corporate Governance Statement OR		an explanation why that is so in our Corporate Governance Statement	
2.4	A majority of the board of a listed entity should be independent directors.	 the fact that we follow this recommendation: ☑ in our Corporate Governance Statement OR ☐ at [insert location] 		an explanation why that is so in our Corporate Governance Statement <u>OR</u> we are an externally managed entity and this recommend is therefore not applicable	
2.5	The chair of the board of a listed entity should be an independent director and, in particular, should not be the same person as the CEO of the entity.	the fact that we follow this recommendation: in our Corporate Governance Statement OR at [insert location]		an explanation why that is so in our Corporate Governance Statement <u>OR</u> we are an externally managed entity and this recommendation is therefore not applicable	
2.6	A listed entity should have a program for inducting new directors and provide appropriate professional development opportunities for directors to develop and maintain the skills and knowledge needed to perform their role as directors effectively.	 the fact that we follow this recommendation: ☑ in our Corporate Governance Statement OR ☐ at [insert location] 		an explanation why that is so in our Corporate Governance Statement <u>OR</u> we are an externally managed entity and this recommendation is therefore not applicable	
PRINCIP	LE 3 – ACT ETHICALLY AND RESPONSIBLY				
3.1	A listed entity should: (a) have a code of conduct for its directors, senior executives and employees; and (b) disclose that code or a summary of it.	our code of conduct or a summary of it: in our Corporate Governance Statement AND at https://www.ramsayhealth.com/Sustainability/Social		an explanation why that is so in our Corporate Governance Statement	

Corpor	ate Governance Council recommendation	We have followed the recommendation in full for the whole of the period above. We have disclosed	We have NOT followed the recommendation in full for the whole of the period above. We have disclosed \ldots^4				
PRINCI	PRINCIPLE 4 – SAFEGUARD INTEGRITY IN CORPORATE REPORTING						
4.1	The board of a listed entity should: (a) have an audit committee which: (1) has at least three members, all of whom are non-executive directors and a majority of whom are independent directors; and (2) is chaired by an independent director, who is not the chair of the board, and disclose: (3) the charter of the committee; (4) the relevant qualifications and experience of the members of the committee; and (5) in relation to each reporting period, the number of times the committee met throughout the period and the individual attendances of the members at those meetings; or (b) if it does not have an audit committee, disclose that fact and the processes it employs that independently verify and safeguard the integrity of its corporate reporting, including the processes for the appointment and removal of the external auditor and the rotation of the audit engagement partner.	[If the entity complies with paragraph (a):] the fact that we have an audit committee that complies with paragraphs (1) and (2): in our Corporate Governance Statement OR at [insert location] and a copy of the charter of the committee: at http://www.ramsayhealth.com/Sustainability/Governance and the information referred to in paragraphs (4) and (5): in our Corporate Governance Statement AND in the Board of Directors' section of the 2021 Annual Report [If the entity complies with paragraph (b):] the fact that we do not have an audit committee and the processes we employ that independently verify and safeguard the integrity of our corporate reporting, including the processes for the appointment and removal of the external auditor and the rotation of the audit engagement partner: in our Corporate Governance Statement OR at [insert location]	an explanation why that is so in our Corporate Governance Statement				
4.2	The board of a listed entity should, before it approves the entity's financial statements for a financial period, receive from its CEO and CFO a declaration that, in their opinion, the financial records of the entity have been properly maintained and that the financial statements comply with the appropriate accounting standards and give a true and fair view of the financial position and performance of the entity and that the opinion has been formed on the basis of a sound system of risk management and internal control which is operating effectively.	the fact that we follow this recommendation: in our Corporate Governance Statement OR at [insert location]	an explanation why that is so in our Corporate Governance Statement				

Corporate Governance Council recommendation		We have followed the recommendation in full for the whole of the period above. We have disclosed	We have NOT followed the recommendation in full for the of the period above. We have disclosed \dots^4		
4.3	A listed entity that has an AGM should ensure that its external auditor attends its AGM and is available to answer questions from security holders relevant to the audit.	 the fact that we follow this recommendation: ☑ in our Corporate Governance Statement OR ☐ at [insert location] 		an explanation why that is so in our Corporate Governance Statement <u>OR</u> we are an externally managed entity that does not hold an annual general meeting and this recommendation is therefore not applicable	
PRINCIP	E 5 – MAKE TIMELY AND BALANCED DISCLOSURE				
5.1	A listed entity should: (a) have a written policy for complying with its continuous disclosure obligations under the Listing Rules; and (b) disclose that policy or a summary of it.	our continuous disclosure compliance policy or a summary of it: in our Corporate Governance Statement OR at [insert location]		an explanation why that is so in our Corporate Governance Statement	
PRINCIP	LE 6 – RESPECT THE RIGHTS OF SECURITY HOLDERS				
6.1	A listed entity should provide information about itself and its governance to investors via its website.	information about us and our governance on our website: at http://www.ramsayhealth.com/Sustainability/Governance		an explanation why that is so in our Corporate Governance Statement	
6.2	A listed entity should design and implement an investor relations program to facilitate effective two-way communication with investors.	the fact that we follow this recommendation: ☑ in our Corporate Governance Statement OR ☐ at [insert location]		an explanation why that is so in our Corporate Governance Statement	
6.3	A listed entity should disclose the policies and processes it has in place to facilitate and encourage participation at meetings of security holders.	our policies and processes for facilitating and encouraging participation at meetings of security holders: in our Corporate Governance Statement OR at [insert location]		an explanation why that is so in our Corporate Governance Statement <u>OR</u> we are an externally managed entity that does not hold periodic meetings of security holders and this recommendation is therefore not applicable	
6.4	A listed entity should give security holders the option to receive communications from, and send communications to, the entity and its security registry electronically.	the fact that we follow this recommendation: ☑ in our Corporate Governance Statement OR ☐ at [insert location]		an explanation why that is so in our Corporate Governance Statement	
				Page 7	

Corporat	e Governance Council recommendation	We have followed the recommendation in full for the whole of the period above. We have disclosed	We have NOT followed the recommendation in full for the w of the period above. We have disclosed \dots^4	
PRINCIPI	E 7 – RECOGNISE AND MANAGE RISK			
7.1	The board of a listed entity should:	[If the entity complies with paragraph (a):]	□ an explanation why that is so in relation to recommendat	
	(a) have a committee or committees to oversee risk, each of which:	the fact that we have a committee or committees to oversee risk that comply with paragraphs (1) and (2):	7.1(a)(2)our Corporate Governance Statement	
D	 has at least three members, a majority of whom are independent directors; and 	☐ in our Corporate Governance Statement <u>OR</u>		
	(2) is chaired by an independent director,	at [insert location]		
	and disclose:	and a copy of the charter of the committee:		
	(3) the charter of the committee;	at http://www.ramsayhealth.com/Sustainability/Governance		
	(4) the members of the committee; and	and the information referred to in paragraphs (4) and (5):		
	(5) as at the end of each reporting period, the number of times the committee met throughout the period and	in our Corporate Governance Statement <u>OR</u>		
	the individual attendances of the members at those	☐ at [insert location]		
	meetings; or	[If the entity complies with paragraph (b):]		
	(b) if it does not have a risk committee or committees that satisfy (a) above, disclose that fact and the processes it employs for overseeing the entity's risk management	the fact that we do not have a risk committee or committees that satisfy (a) and the processes we employ for overseeing our risk management framework:		
	framework.	in our Corporate Governance Statement OR		
		at [insert location]		
7.2	The board or a committee of the board should:	the fact that board or a committee of the board reviews the entity's	an explanation why that is so in our Corporate Governa	
	(a) review the entity's risk management framework at least	risk management framework at least annually to satisfy itself that it continues to be sound:	Statement	
	annually to satisfy itself that it continues to be sound; and (b) disclose, in relation to each reporting period, whether such	in our Corporate Governance Statement OR		
	a review has taken place.	<u> </u>		
		and that such a review has taken place in the reporting period covered by this Appendix 4G:		
		in our Corporate Governance Statement <u>OR</u>		
		at [insert location]		

		We have followed the recommendation in full for the whole of the period above. We have disclosed	We have NOT followed the recommendation in full for the whole of the period above. We have disclosed \dots^4
7.3	A listed entity should disclose: (a) if it has an internal audit function, how the function is structured and what role it performs; or (b) if it does not have an internal audit function, that fact and the processes it employs for evaluating and continually improving the effectiveness of its risk management and internal control processes.	[If the entity complies with paragraph (a):] how our internal audit function is structured and what role it performs: ☑ in our Corporate Governance Statement OR ☐ at [insert location] [If the entity complies with paragraph (b):] the fact that we do not have an internal audit function and the processes we employ for evaluating and continually improving the effectiveness of our risk management and internal control processes: ☐ in our Corporate Governance Statement OR ☐ at [insert location]	an explanation why that is so in our Corporate Governance Statement
7.4	A listed entity should disclose whether it has any material exposure to economic, environmental and social sustainability risks and, if it does, how it manages or intends to manage those risks.	whether we have any material exposure to economic, environmental and social sustainability risks and, if we do, how we manage or intend to manage those risks: in our Corporate Governance Statement OR at [insert location]	an explanation why that is so in our Corporate Governance Statement
			Page 9

Corpora	te Governance Council recommendation	We have followed the recommendation in full for the whole of the period above. We have disclosed	We have NOT followed the recommendation in full for the whole of the period above. We have disclosed \dots^4
PRINCIP	LE 8 – REMUNERATE FAIRLY AND RESPONSIBLY		
8.1	The board of a listed entity should: (a) have a remuneration committee which: (1) has at least three members, a majority of whom are independent directors; and (2) is chaired by an independent director, and disclose: (3) the charter of the committee; (4) the members of the committee; and (5) as at the end of each reporting period, the number of times the committee met throughout the period and the individual attendances of the members at those meetings; or (b) if it does not have a remuneration committee, disclose that fact and the processes it employs for setting the level and composition of remuneration for directors and senior executives and ensuring that such remuneration is appropriate and not excessive.	[If the entity complies with paragraph (a):] the fact that we have a remuneration committee that complies with paragraphs (1) and (2): ☑ in our Corporate Governance Statement OR ☐ at [insert location] and a copy of the charter of the committee: ☑ at http://www.ramsayhealth.com/Sustainability/Governance and the information referred to in paragraphs (4) and (5): ☑ in our Corporate Governance Statement OR ☐ at [insert location] [If the entity complies with paragraph (b):] the fact that we do not have a remuneration committee and the processes we employ for setting the level and composition of remuneration for directors and senior executives and ensuring that such remuneration is appropriate and not excessive: ☐ in our Corporate Governance Statement OR ☐ at [insert location]	 □ an explanation why that is so in our Corporate Governance Statement OR □ we are an externally managed entity and this recommendation is therefore not applicable
8.2	A listed entity should separately disclose its policies and practices regarding the remuneration of non-executive directors and the remuneration of executive directors and other senior executives.	separately our remuneration policies and practices regarding the remuneration of non-executive directors and the remuneration of executive directors and other senior executives: in our Corporate Governance Statement AND in the Remuneration Report at pages 36 to 63 of our Annual Report	 □ an explanation why that is so in our Corporate Governance Statement OR □ we are an externally managed entity and this recommendation is therefore not applicable

С	Corporate Go	vernance Council recommendation	We have followed the recommendation in full for the whole of the period above. We have disclosed	We have NOT followed the recommendation in full for the whole of the period above. We have disclosed \dots^4
		sted entity which has an equity-based remuneration scheme buld: have a policy on whether participants are permitted to enter into transactions (whether through the use of derivatives or otherwise) which limit the economic risk of participating in the scheme; and	our policy on this issue or a summary of it: in our Corporate Governance Statement AND in our Securities Trading Policy at https://www.ramsayhealth.com/Sustainability/Governance	□ an explanation why that is so in our Corporate Governance Statement OR □ we do not have an equity-based remuneration scheme and this recommendation is therefore not applicable OR □ we are an externally managed entity and this recommendation
	(b)	disclose that policy or a summary of it.		is therefore not applicable
				Page 11