

## PHARMANIAGA BERHAD

Name of Policy	Whistleblowing Policy	
Companies	Pharmaniaga Berhad & Subsidiary Companies	
Scope	All employees, directors and board members, and to workers such as agency staff, casual staff or contractors who are not engaged on contract but are undertaking work on behalf of Company, inside and outside of working hours.	
Version	1.0	Effective Date: 19 November 2018

### 1.0 POLICY STATEMENT

- 1.1 Pharmaniaga Berhad (*hereafter referred to as the Company*) and its subsidiary companies (*hereafter referred to collectively as the Group*) are committed towards ensuring the highest standards of integrity, accountability and professionalism in the conduct of its businesses. This is consistent with the Company's core values of **RESPECT, INTEGRITY, TEAMWORK** and **EXCELLENCE**.
- 1.2 This Whistleblowing Policy (*hereafter referred to as the Policy*) is established to facilitate the disclosure of improper conduct occurring within the Company (*hereafter referred to as Improper Conduct and further elaborated as per Item 3.0 of this Policy*).
- 1.3 This Policy is not intended as an alternative for any other grievances or complaints procedures e.g. employment related grievances concerning terms of employment, performance assessments or other aspects of the working relationship. If the matter is a human resource issue, it shall be referred to the Group Human Capital Management Department, the relevant Human Capital Management Department or other designated parties, for the appropriate action.

### 2.0 OBJECTIVE OF THE POLICY

- 2.1 This Policy sets out the framework for the disclosure of any Improper Conduct and the protection of the party making the disclosure (*hereafter referred to as the Whistleblower*).
- 2.2 The Policy aims to: -
- Promote standards of good corporate practices.
  - Provide a safe and confidential avenue for employees of the Company (*hereafter referred to as the Employee*) and members of the public to disclose any Improper Conduct.
  - Reassure the Whistleblowers that they will be protected from reprisals for the disclosure of any Improper Conduct made in GOOD FAITH and with SOUND JUDGEMENT to avoid baseless allegations.

### 3.0 IMPROPER CONDUCT

- 3.1 **Definition**  
Improper Conduct is defined as conduct or actions which are unlawful and/or in breach of the Company's Code of Conduct and Ethics, rules, regulations, guidelines, policies and procedures, both written and implied.
- 3.2 **Examples of Improper Conduct**
- Malpractice, impropriety, corruption, fraud and theft.
  - Misuse or abuse of Company properties or resources.
  - Abuse of power or authority.
  - Conflict of interest.
  - Failure to comply with legal or regulatory obligations.
  - Failure to comply with health, safety and environment regulations.
  - Criminal activities.
  - Miscarriage of justice.
  - Showing undue favor.
  - Attempts to suppress or conceal any of the above.

These examples are not exhaustive and any matter raised under this Policy will be reviewed and considered appropriately.

## 4.0 CONFIDENTIALITY OF AND PROTECTION TO THE WHISTLEBLOWER

### 4.1 Confidentiality

The Whistleblower's identity shall be kept confidential to the extent reasonably practicable, unless otherwise required by law or to facilitate investigations and/or other relevant processes.

### 4.2 Protection from Reprisals

The Whistleblower will be protected from any reprisals as a direct consequence of the disclosure, e.g. victimization, disciplinary measures, termination of employment etc. provided that the Whistleblower satisfies all the following conditions: -

- a) The disclosure is made in GOOD FAITH and with SOUND JUDGEMENT.
- b) The disclosure is not malicious, frivolous or vexatious.
- c) The disclosure is not for personal gain or interest.
- d) The disclosure is not made with the motive of avoiding disciplinary action.
- e) The Whistleblower, to the best of his knowledge, is aware and believes that the information and allegations disclosed are true.

### 4.3 Disciplinary Action against the Whistleblower

Any false, malicious or defamatory allegations are viewed very seriously and the appropriate disciplinary action may be taken against the Whistleblower, including dismissal.

### 4.4 Immunity from Protection

The protection given to a Whistleblower however does not include immunity from any investigations, disciplinary or other actions arising from any personal wrongdoings, acts of misconduct or nonperformance on his part.

## 5.0 PROCEDURES FOR MAKING A DISCLOSURE OF IMPROPER CONDUCT

### 5.1 Channels for Making a Disclosure at the Company

- a) E-mail: [alert@pharmaniaga.com](mailto:alert@pharmaniaga.com)
- b) Whistleblowing Hotline: 1- 800 – 182 - 082
- c) In writing or through the completion of the prescribed Complaint Form (*as per Appendix "A "*), submitted through either of the following parties: -
  - i. Chief Operating Officer,
  - ii. Head of Division, Corporate Services,
  - iii. Head of Division, Corporate Governance,
- d) In the event that the disclosure relates to any of the parties as per Item c) above, the Group's Divisional Directors or Board of Directors, the disclosure may be made directly to the Employee & Industrial Relations Department ("EIR") at [eir@pharmaniaga.com](mailto:eir@pharmaniaga.com).

### 5.2 Details of Improper Conduct and Supporting Evidence

Disclosures of Improper Conduct must be with sufficient details and supported with documentary evidences and/or information of parties who are able to confirm or support the disclosures, wherever practicable.

### 5.3 Anonymous Disclosures

Anonymous disclosures will not be entertained as they may hinder investigation and the Company's ability to ensure that the disclosure is genuine. Anonymity will also prevent the Whistleblower from being accorded the necessary protection. Notwithstanding, the Company reserves its right to investigate an anonymous disclosure.

**5.4 Action and Outcome**

The Whistleblowing Committee will review each disclosure received and will deliberate and decide on the next course of action which may include: -

- a. To proceed with the investigations into the matter.
- b. To proceed with the appropriate disciplinary action.
- c. To close the case.
- d. To refer the matter to the relevant parties e.g. in the cases where the disclosure is not considered as a whistleblowing matter.

**5.5 Notification to the Whistleblower**

Upon the completion of the whistleblowing process and other related processes and procedures, the Whistleblower will be notified of the outcome. Such notification however may be limited to the status and/or selected information only and may exclude specific details due to confidentiality.

**6.0 RELATED POLICIES, PROCEDURES AND GUIDELINES**

Reference is made to the following: -

- Code of Conduct and Ethics Handbook
- Disciplinary Procedures
- Other relevant rules, regulations, memos and circulars issues by the Company from time to time.
- Whistleblower Protection Act 2010

**Appendix A**

**PHARMANIAGA**  
COMPLAINT FORM / *BORANG ADUAN*

**A. DETAILS OF INDIVIDUAL LODGING THE COMPLAINT / MAKLUMAT INDIVIDU YANG MEMBUAT ADUAN**

**Name / Nama**

**Designation / Jawatan**

**Company / Syarikat**

**Location / Lokasi**

**Telephone Number /  
Nombor telefon**

**E-mail address /  
Alamat e-mel**

**B. COMPLAINTS / ADUAN**

- i. Please describe the nature of your complaint. Include the details of the party or parties involved, date(s), time(s), location(s) etc. and any other relevant details. Please use additional papers, if necessary / *Sila huraikan aduan anda. Sertakan maklumat mengenai pihak atau pihak-pihak yang terlibat, tarikh, masa kejadian, tempat kejadian dsb. serta maklumat-maklumat lain yang berkenaan. Sila gunakan kertas tambahan sekiranya perlu*

2. Please provide details of witness(es) or individual(s) who can support your complaint e.g. name, position, company etc. / *Sila kemukakan maklumat mengenai saksi atau individu yang boleh menyokong aduan anda contohnya nama, jawatan, syarikat dsb.*

3. Please state and attach documents and other evidences to support your complaint, if any. / *Sila nyatakan dan kempilkan dokumen dan bukti-bukti lain bagi menyokong aduan anda, sekiranya ada.*

C. DECLARATION / PENGESAHAN

I hereby declare that this complaint is made voluntarily and that to the best of my knowledge, the details and information provided are true. / *Saya mengesahkan bahawa aduan ini dibuat dengan secara sukarela dan disepanjang pengetahuan saya, maklumat yang diberi adalah benar.*

Signature / *Tandatangan*

Date / *Tarikh*

Name / *Nama*

IC No. / *No. KP:*

Witness to this declaration (if any) / *Saksi kepada pengesahan ini (sekiranya ada)*

Signature / *Tandatangan*

Date / *Tarikh*

Name / *Nama*

IC No. / *No. KP:*

D. FOR OFFICIAL USE BY THE COMPANY

Date received

Nature of complaint (please ✓)

Whistleblowing complaint

HCM related complaint

Others;.....

Remarks :.....

Signature: .....

Date: .....

Name: .....

Designation: .....