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โรงพยาบาลราชพฤกษ์	(Department) : Governance, Leadership, Direction	
Ratchaphruek Hospital	Revision: 00	
Title: Whistle Blowing Policy	Document No. : HP – GLD - 015	
	Standard Type : GLD	
Issue Date: 07 Sebtember 2022	Page No. : 1/ 10	
Assignment and Person Responsible to Summarize Quality Po	blicies:	
All Employees and Workers at all levels in Ratchaphruek Hospital Public Company Limited.		

Provider	Reviewer	Approver
Clean .	SGAAL	D. J.
(MS.CHULARAT SIRISINGH)	(DOCTOR TEERAWAT SRINAKARIN)	\ (MR.SARAN SUPAKSARAN)
COMPANY SECRETARY	CHIEF EXECTUIVE OFFICER	CHAIRMAN OF AUDIT COMMITEE
DATE07SEPTEMBER2022.	DATE07SEPTEMBER2022	DATE07SEPTEMBER2022



# Schedule of Amendments to this Policy

Revision	Reviewed By	Effective Date	Details of Revision
00	MS.CHULARAT SIRISINGH	06 August 2022	Create a new document

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Ratchaphurek Hospital Public Company Limited "the Company" was committed to a culture of compliance that is grounded in honesty, trust, and personal accountability. The Company firmly believe that raising concerns is a positive act that can make a valuable contribution to improving our long-term success as well as enhancing the environment for employees, guests, customers, and other stakeholders.

## 1. Objective

- 1.1 provide you with an understanding of what can be reported under this Policy.
- 1.2 demonstrate the importance we place on ensuring a safe and supportive environment where any person can feel confident to report suspected misconduct;
- 1.3 create a culture that encourages everybody to speak up, where you genuinely suspect or witness, about any wrongdoing in the Company;
- 1.4 explain the processes for reporting the wrongdoing, including what happens when you make a report; and
- 1.5 outline how you will be protected if you make a report.

## 2. Scope and Applicability

Directors, Executives at all levels, staff and all employees of the Company and its subsidiary companies, whether on a permanent, fixed-term, or temporary employment basis, in every business unit and operation site.

#### 3. Definitions

Vocabulary	Means
Company	Ratchaphurek Hospital Public Company Limited
Directors	means any and all directors of the Company.
Audit Committee	means a group of independent directors who are in charge of corporate
	oversight to financial reporting and disclosure, regulatory compliance, risk
	management, and other related corporate issues.
Commander	Means all Executive level employees or employees at the department
	manager level or above that employees can trust to report complaints
	according to this policy.
Whistleblower or	means - anyone who works on the Company's behalf, including permanent or
complainant	contract employees, trainees, interns, consultants, contractors, executive
	officers and board members, current and former.

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Whistleblowing	means Whistleblowing is the process during which you are encouraged to	
3	report wrongdoing within the Company through a formal and confidential	
	channel.	
Wrongdoing can be reported	It is important that the Company outlines what behavior can be reported	
mongaoning carried reported	under this Policy. We want to hear from you if you suspect or witness any	
	wrongdoing in the following matters:	
	fraud and embezzlement;	
	·	
	bribery and corruption;	
	breach of law and regulations (national or international);	
	violation of the Company's Code of Conduct and any other policy or	
	procedure;	
	gross negligence, gross waste, or mismanagement;	
	bullying or harassment;	
	conflict of interest;	
	unauthorized use of Company's funds or resources,	
	accounting – a violation of any internal accounting controls and auditing	
	matters, including complaints regarding attempted or actual circumvention of	
	internal accounting controls or Company's accounting policies;	
	abuse of authority; and	
	retaliation against employees who make reports	
Beneficiary	means government officials or representatives, officials of private companies,	
	politicians, business partners, customers, patients, labor unions, stakeholders,	
	and any person who has a duty to direct or support supervision or causes the	
	Company to benefit, whether directly or indirectly	
Staff	anyone who works on the Company's behalf, including Doctor, contractors,	
	consultants, service providers, suppliers.	

# 4. Roles and Responsibilities:

4.1. The Board of Directors is responsible for considering and approving the policy for reporting wrongdoing and corruption. It is specified as a framework of principles and guidelines in this policy in accordance with the process for considering reporting clues or complaints as specified in the company's business ethics.

# 4.2. Executive / Commander

executives and staff shall exercise caution and comply with the Code of Conduct and guidelines as follows:

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- 4.2.1. Behave as a good example. As well as supervise and encourage subordinates to strictly comply with the business ethics, rules, regulations, and various policies of the company.
- 4.2.2. Promote and provide an adequate and effective risk management and internal control system to prevent wrongdoing and corruption in the work for which they are responsible.
- 4.2.3. Make sure that all employees in the agency are aware of this policy.
- 4.2.4. Create an appropriate environment to build confidence for complainants in reporting matters Complaints and clues about wrongdoing and corruption.
- 4.2.5. When wrongdoing or corruption is discovered. Notify the internal audit department and/or legal personnel through the channels specified in this policy. and/or regulations Related rules.

#### 4.3. Staff

- 4.3.1. Acknowledge and strictly follow this policy.
- 4.3.2. Notify supervisors in the work area. or according to the channels specified in this policy immediately If you see or have reason to believe that wrongdoing or corruption has occurred.
- 4.3.3. Cooperate and assist with the relevant departments of the company. that is responsible for investigating complaints and leads on wrongdoing and corruption

#### 4.4. Internal Audit

4.4.1. Prepare a report summarizing complaints and leads on wrongdoing and corruption and submit it to the Audit Committee on a quarterly basis.

## 5. The Whistleblowing Process

If you would like to make a report, we have established several different channels through which you can raise your concern:

5.1. Channels for reporting Whistleblowing

If you would like to make a report, we have established several different channels through which you can raise your concern:

1) Email : Internal Audit julalak.b@rph.co.th หรือ
Audit Committee auditcom@rph.co.th

2) Website: www.rph.co.th/whistleblowing

3) Post mail : - Internal Audit or Chairman of the Audit Committee or Board of Director as follow:

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Ratchaphruek Hospital Public Company Limited 456 Mitraparb R.d, Nai mueang, Mueang Khon Kaen, Khon Kaen Province, Post 40000

The Company will ensure that all reports are confidential. It means that any information that could potentially identify you will be held in the strictest confidence.

#### 5.2. Accept an anonymous report

The Company also accept anonymous reports and will respect and protects your identity if you choose to make an anonymous report. You can choose to remain anonymous while making a report, interacting with the report recipient during an investigation process, as well as after the case is closed. At any given time, you can identify yourself. If you decide to disclose your identity, we will work to protect your identity and take all steps necessary to ensure you do not suffer any retaliation. In some cases, anonymous reports are much less credible and more difficult to investigate fully, but we will take all the steps to investigate all reports, including anonymous reports.

#### 5.3. What if the report is not true

Sharing a good-faith concern about the Code honestly, even if it turns out to be unfounded – is never an excuse for any retaliation. If a whistleblowing report was made in good faith, but the wrongdoing was not confirmed by the investigation, no action will be taken against the whistleblower.

As much as we encourage honest reporting, we do not tolerate false reports. If a report was made with malicious intent or for personal gain, the Company reserves the right to take action against that particular individual.

# 6. The Process when receiving complaints and clues about wrongdoing and corruption.

The Company We want to be transparent and outline the investigation process of a report submitted through our whistleblowing channels. Below, we have provided the different steps the Company will go through once a report is received until the case is closed.

## 6.1. Receipt of the Report.

When a report (anonymous or otherwise) is received, it will be forwarded to the Whistleblower Committee.

#### 6.2. Evaluation

If the report has enough information, the Whistleblower Committee will perform an initial assessment to confirm that the report is a valid report, evaluate the case and adopt an

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investigation plan. For a report to be fully investigated, it must contain sufficient information to form a reasonable basis for investigation. A whistleblower reporting anonymously should provide as much information as possible not to compromise the ability to investigate the report fully. At this stage, the Whistleblower Committee may reach out to you for additional information through available channels.

#### 6.3. Action

The Whistleblower Committee will determine appropriate actions against the wrongdoer(s) and send the update to you. You will be informed of the outcome of the investigation, subject to data privacy and confidentiality obligations.

## 6.4. Investigation

The Whistleblower Committee will assign the investigation to the internal or external party, depending on the risk, urgency, and case complexity. Once the investigation is concluded, a report outlining the findings and recommendations will be adopted by Whistleblower Committee. The Whistleblower Committee may also bring such a complaint to the attention of Executive Management, or hire outside advisors such as lawyers, accountants, and auditors to conduct the investigation.

- 6.4.1. The Audit Committee can assign investigations to internal or external persons, depending on the risk. The urgency and complexity of the matter When the investigation has been concluded, a report summarizing the results and recommendations will be submitted to the Audit Committee.
- 6.4.2. The Audit Committee may report such complaints to senior management for information or hire outside consultants such as lawyers, accountants and auditors to conduct an investigation.
- 6.4.3. The working group has the right to appoint and can request advice from the legal department and/or internal audit department and/or other departments that is considered appropriate Become an investigator in that case as you deem appropriate.
- 6.4.4. Audit Committee or the working group to investigate the facts Data must be processed and filtered. To consider appropriate steps and methods to decide on complaints within 30 days after receiving notification of the incident or complaint.

## 6.5. Judgments result

In the case where the complaint It has been examined and diagnosed. The complaints were baseless. Or is it not true? or accused with intent to bully The litigant or the accused has the right to choose to have the decision disclosed. If the complaint has been examined and determined that the complaint is true. Audit Committee or the working group can impose punishments as

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they deem appropriate and appropriate to the discipline. and penalties of the company as well as legal matters (if any)

## 6.6. The reporting

In the case where the Audit Committee has assigned a working group to be responsible for investigating false facts/complaints. That working group must collect complaints. Including complaints that are currently being investigated. Number of complaints Type of complaint Fact checking results Punishment or decision Summary report to the Risk Management Committee every quarter. If it is an important complaint or has important characteristics that have high value affecting financial reports or are related to the company's senior executives. Those complaints must Report to the meeting of the Audit Committee and the Board of Directors.

## 7. Information disclosure and reporting

- 7.1. The company discloses its policy for reporting wrongdoing and corruption, complaints, and results of operations occurring in that year in the annual report (One-Report Form 56-1) on governance. good business and disclosed on the company's website as well.
- 7.2. The company must report the results of the consideration and punishment to the Audit Committee and the Board of Directors respectively.

# 8. Measures to protect whistleblowers or the complainant and confidentiality

The Company takes full responsibility for the protection of the whistleblowers and should take all reasonable to protect the identity of whistleblower, which will be known only to the Whistleblower Committee, unless the issue requires investigation by law enforcement or a consent provided by the whistleblower. The Whistleblower Committee is also responsible for approving measure to protect a whistleblower from retaliation and has the authority to:

- 1) Offer you leave of absence while a matter is investigated;
- 2) Relocate you to a different department, business unit, or location; and
- 3) Monitor that whistleblowers are not penalized through their tenure with the Company. We forbid to penalize any person who in good faith reports an instance or allegation of wrongdoing in accordance with this Policy. This includes any reprimand, reprisal, change in work duties, change in employment amenities, change in reporting requirements, damage to career prospects or reputation, threats to do any of these, or deliberate omissions that damage the person.
- 4) Whistleblower, complainant, or related person If you see that you may be in trouble or damaged. You can request that the company establish protection measures.

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#### 9. Enforcement and Penalty

Wrongdoing and corruption in the organization It is a violation of the company's ethics and regulations. Which must be considered for disciplinary punishment according to the regulations set by the company.

However, the company has a policy not to reduce positions. Punish or give negative consequences to employees who deny committing wrongdoing, or fraud and corruption Even though that action will cause the company Lost business opportunity in addition, there may be legal penalties if the action is illegal as follows:

## 1) Disciplinary

the Company shall impose the disciplinary penalty according to the Company's regulation.

- Verbal Warning
- Written Warning
- Be suspended from job
- Dismiss

## 2) Legal punishment

Civil and commercial laws/ Criminal laws.

#### 10. Flow Chart / Work process

- None

## 11. Cautions / Suggestions / Additional comments

- None

# 12. Monitoring and Measuring Process

The board, executives and employees all have a duty to read. understand and comply with this policy by avoiding any actions that may lead to violations of this policy, it is the duty of the board of directors, executives, and all employees to prevent and investigate Monitor and report any actions that violate the rules, regulations, and company regulations. or corruption.

Complaints regarding corporate governance good corporate governance or management of the company's affairs Both those reported through the complaint channel and those that have passed through the organization's corruption management process will be compiled and presented to the Board of Directors on a quarterly basis. In addition, the Audit Committee will follow up on issues investigated by the Internal Audit Department on a quarterly basis. every 3 months and present the report to the Board of Directors every 3 months or according to the meeting.

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In the case where there were no reports of wrongdoing or corruption occurring at all in that year, the Audit Committee to meet once a year or may consider holding more than one meeting per year as necessary and reasonable.

# 13. Review implementation process

The company will consider reviewing the policy for reporting clues. Always commit corruption. Taking into account changes that are significant to the organization.

## 14. Reference

- 14.1. Code of Ethics and Business Conduct of Ratchaphruek Hospital Public Company Limited
- 14.2. Table of Authority: TOA of Ratchaphruek Hospital Public Company Limited

# 15. Policies Related Documents

15.1. Corporate Governance Structure policy	(HP-GLD-001)
15.2. PDPA policy	(HP-GLD-010)
15.3. Anti-Corruption and bribery policy	(HP-GLD-014)
15.4. Form for reporting complaints/clues of wrongdoing and corruption	(FM-GLD-001)