

HEALTH, WELLBEING AND OCCUPATIONAL HYGIENE

WHAT WE DID IN 2023

SUCCESSES

- Since 2023, a group-wide wellbeing assessment in place
- Awarded the Exemplar award, from the Ending Workplace TB organisation, for outstanding workplace TB programme
- SA gold recognised by the Southern African Institute of Mining and Metallurgy for its occupational medicine approach
- US operations had a reduction in diesel particulate matter through improved ventilation engineering

CHALLENGES

- Wellbeing initiatives depend on voluntary participation, potentially leaving some individuals unengaged for various reasons. Confidentiality is emphasised in the utilisation of employee health and wellbeing support programmes
- In certain regions, strict regulations limit cross-border health data sharing. Our local teams navigate these constraints effectively



TARGETS AND KEY OBJECTIVES

• Development of mental health resilience	In progress	Page 139
• Universal health coverage across the business	In progress	Page 138
• Roll out of custom-made hearing protection for identified groups in the SA region	Completed	Page 146

Status	See
In progress	Page 139
In progress	Page 138
Completed	Page 146

ALIGNMENT WITH SDGs

MATERIAL MATTERS
M2 Safety and Health
M3 Licence to operate



APPROACH

Our iCARES values guide our approach to health and wellbeing. Safety and health is one of the top material issues for the business. We encourage worker participation and consultation through health and safety committees for shafts and operations (e.g., Driefontein). During the year, we invested R111 million in primary healthcare, R77 million in occupational healthcare and R6.7 million in employee wellbeing at our South African operations. Additionally, our Australian region saw an investment of A\$581,827.24 during the same period. Our healthcare to employees includes:

- Occupational health resources that assess risks, determine fitness to work, and manage disease and rehabilitation
- Primary healthcare centres with doctors and nurses managing cases 24/7
- Employee assistance programme (EAP) that includes counselling for employees and immediate family, provided by ICAS via 24/7 multilingual toll-free call centre and on-site social workers

- Emergency medical services equipped with paramedics and 24/7 rescue capability
- Hospital network with specialised care for trauma and for occupational injuries and diseases
- Employees and contractors who are engaged in risk-prone occupations are required to participate in an annual medical examination with non-risk workers also needing to undergo medical surveillance at least every second year

ACCOUNTABILITY, GOVERNANCE AND ASSURANCE

GOVERNANCE

ACCOUNTABILITY

Board

- Social, Ethics and Sustainability Committee
- Audit Committee

C-suite

- The ESG Committee
- Chief Regional Officers

Operational

- The Group Champion Health and Safety oversees health and wellbeing programmes at Sibanye-Stillwater
- The Senior Safety Manager oversees employee health and wellbeing at the US operations; site safety managers provide support to the Senior Safety Manager
- Dedicated health and safety officers see to it that our health and safety programmes are effectively implemented

RELEVANT LEGISLATION AND REGULATIONS

(list not exhaustive, only key regulations listed)

South Africa

- Mine Health and Safety Act of 1996
- Occupational Diseases in Mines and Works Act of 78 of 1973
- Compensation for Occupational Injuries and Diseases Act 130 of 1993
- National Nuclear Regulator Act 1999, Act 47 of 1999, and Regulations
- Mine Health and Safety Council milestones

United States

- Federal Mine Safety and Health Act of 1977
- Occupational Safety and Health Act of 1970

Europe

Finland

- Occupational Safety Act (738/2002)
- Occupational Health Care Act (1383/2002)
- Workers' Compensation Act (459/2015)

France

- REACH Regulation (1272/2008 EC)
- CLP Regulation (1272/2008)
- Occupational risk assessment document (DUERP) is compulsory

Australia

- Work Health and Safety Act 2012 (Tas)
- Mines Work Health and Safety Regulations 2022 (Tas)
- Mines Work Health and Safety (Supplementary Requirements) Act 2012 (Tas)
- Mines Work Health and Safety (Supplementary Requirements) Regulations 2022 (Tas)
- Mining and Quarrying Safety and Health Act 1999 (Qld)
- Mining and Quarrying Safety and Health Regulation 2017 (Qld)
- Resources Safety and Health Queensland Act 2020 (Qld)

ASSURANCE AND REVIEWS

- Sibanye-Stillwater's health performance is monitored and verified by several external agencies such as Registrar for Medical Schemes, the Mine Safety and Health Council, Montana Department of Labor and Industry, Department of Health and the Department of Mineral Resources and Energy (DMRE)
- Audits relating to the Compensation for Occupational Injuries and Diseases Act (COIDA), in terms of compensation for occupational injuries and diseases; external limited assurance on selected key sustainability performance indicators by KPMG (page 285); Occupational Diseases in Mines and Works Act audits for TB and silicosis cases
- At the US PGM operations the Blue Cross and Blue Shield of Montana and the brokers and actuaries for Hub International insurance review our performance
- In France, compliance with occupational health laws is enforced by the labour inspectorate
- In Finland compliance with occupational safety and health laws are enforced by regional state administrative agencies
- Queensland, Australia, is overseen by Resources Safety and Health Queensland (RSHQ); compliance audits are submitted to RSHQ, with any exceedances investigated and findings shared with the department

Key supporting policies and policy statements:

Health and safety policy statement

Mandatory code of practices and standards in place for e.g. COVID-19, emergency preparedness, thermal stress, noise, and the like

All operations (excluding AUS region and Keliber lithium project) are ISO 45001 certified

HEALTH, WELLBEING AND OCCUPATIONAL HYGIENE continued

SDG 3 UNDERPIN SA REGION'S HEALTH STRATEGY

2020-2022	2023-2025	2026-2030
<ul style="list-style-type: none"> Sibanye-Stillwater restricted and or aligned medical schemes Medical Schemes Amendment Bill (Act) 	<ul style="list-style-type: none"> National Health Insurance policy (NHI) Health financing (pooling) Primary healthcare access; occupational health services and wellbeing 	<ul style="list-style-type: none"> Primary healthcare and secondary healthcare access Occupational health clinics network Enhanced data driven occupational health services and wellness efficiency

¹ Timelines could potentially be impacted due to government rollout regressions**Occupational health fatalities worse than mine accidents**

There are far more deaths caused by occupational respiratory disease than by mine accidents; the ratio estimated at around 5:1. The MHSC (Mine Health and Safety Council), among others, has called on the industry to take a more holistic approach to the issue of employee wellbeing by focusing more on occupational health and on general wellness in the workplace, including mental health.

HEALTHCARE PROVISION**Medical schemes**

Universal Healthcare coverage is one of the United Nations Sustainable Development Goals 2015-2030 (UN SDG 3.8) to which Sibanye-Stillwater subscribes. In 2013, only 8% of our employees had a medical scheme membership; in 2023, 95% of our employees in South Africa are on medical schemes.

3.8

**SA region**

Access to care: Sibanye-Stillwater ensures that all employees are members of a registered medical scheme, whether it is in the capacity of a principle member of a dependant on a spouse's medical scheme. Access to care will be improved by use of digital technologies which will connect employees with registered preferred providers by telemedicine.

Quality care: Sibanye-Stillwater is responsible for the selection of trauma facilities for injury-on-duty victims and trauma-related incidents. Our employees are carefully triaged on scene and directed to the appropriate definitive care facility, with severe trauma being managed in level one trauma Facilities. Our Occupational health services and Primary healthcare services are subjected to both external and Internal health audits.

Effective healthcare: Through our Occupational health services and partnerships with medical schemes, we drive value-based healthcare by monitoring provider performance against objective health targets. Both non-communicable diseases such as diabetes and hypertension as well as communicable disease outcomes are monitored by our team.

Financial risk protection: The performance of medical schemes is monitored annually to determine the split between healthcare and non-healthcare expenditure. Of specific importance is the Out of pocket expenses incurred by our employees and the team continues to work with stakeholders to reduce this burden, which in 2022 amounted to over R140 million. The SA region is still on track to establish a multi-commodity in-house restrictive medical scheme which will provide cost-effective care to employees and reduce out of pocket health expenditure. See *Care for iMali: Taking care of personal finance fact sheet*, www.sibanyestillwater.com/news-investors/reports/annual/

**Sources of healthcare funding (R million)**

	2023						2022					2021			
	Total	US PGM	EU	AUS	PGMs	Gold	Total	US PGM	EU	PGMs	Gold	Total	US PGM	PGMs	Gold
Medical schemes	2,626	733	0	0	1,142	751	2,266	539	—	1,008	719	1,629	—	952	677
Company-funded ²	849	629	1	0	115	105	719	444	—	131	145	762	423	130	210
Compensation for occupational injuries and diseases ¹	379	NA	1	NA	197	182	289	NA	NA	144	145	291	NA	125	166
Occupational diseases in Mines and Works Act dust levies ¹	37	NA	NA	NA	6	31	31	NA	NA	4.00	27.00	40	NA	6	34
Total²	3,891	1,362	0	0	1,460	1,069	3,306	984	—	1,287	1,036	—	—	—	—

¹ The SA region's cost is inclusive of the Rand Mutual insurance. The EU region reflects the occupational health-related costs² For EU region inclusive of the expenses related to the health survey and is EURO 40981.02 for 2023

HEALTH, WELLBEING AND OCCUPATIONAL HYGIENE continued

Funding employee healthcare (number of employees)

	2023						2022					2021			
	Total	US region	EU region ¹	AUS region	SA region		Total	US PGM	EU region ¹	PGMs	Gold	Total	US PGM	PGMs	Gold
					PGMs	Gold									
Principal medical scheme members	62,944	1,775	269	0	36,656	24,244	63,656	1,774	230	35,170	26,482	66,544	1,867	35,849	28,828
Employees on medical schemes – Principal members (%)	98	95	94	—	98	97	99	97	100	98	100	98	95	99	97

¹ For Sandouville refinery and Keliber lithium project

3.8

US region

The US government does not provide universal health cover. Health and welfare benefits are provided through a contracted national partner providing access to primary care and speciality care for employees and families. We have partnered with a local hospital in Montana to assist employees with infertility treatment, family planning, and artificial insemination. This gives credence to our commitment to UN SDG 3.7, which supports universal access to sexual and reproductive health.



3.7

EU region

All of our Keliber employees are covered by occupational healthcare at no cost to the employee. This covers a wide range of treatments. In addition, all Finnish citizens are covered by the public healthcare system. In France, employees are covered by health insurance, which is compulsory. This health insurance is contracted by the employer, who passes it on to all these employees in return for a participation fee. In addition, all French people are also covered by a public health system.

AUS region

Australia has a universal healthcare system called Medicare, which provides access to a wide range of health services at little to no cost for Australian citizens and permanent residents. Overall, Australia's healthcare system is known for its high-quality care, accessibility, and focus on preventive health measures.

Mental health services

Sibanye-Stillwater's MyWellness app provides support for the physical wellbeing of employees. It includes a platform to encourage healthy living, as well as to facilitate rehabilitation and the return to work following illness or injury. Moreover, in 2023, two additional apps, namely the ICAS HUB and LiveWell apps, were introduced to the workforce with the aim of fostering an interactive and personalised wellbeing service.

The psychological wellbeing of employees in the US and SA regions, as well as Sandouville, is assessed annually through a concise self-reporting instrument known as the WHO-5 (World Health Organization-5) Well-Being Index. In the SA region, positive psychological wellbeing improved from 70.2% (2,040 out of 2,908 participants) in 2022 to 73.3% (838 out of 1,143 participants) in 2023, reflecting a 4.42% improvement. Conversely, negative psychological wellbeing decreased from 29.8% (868 out of 2,908 participants) in 2022 to 26.7% (305 out of 1,143 participants) in 2023, indicating a 10.4% reduction.

In 2023, the US region saw a deterioration in psychological wellbeing scores, with positive self-reported scores declining from 63.8% (893 out of 1,399 participants) in 2022, to 61.3% (92 out of 150 participants) in 2023. It is worth noting that these observations occurred post-restructuring, which may have influenced the results. For Sandouville operations in 2023, there was also deterioration in wellbeing scores, with those on the positive scale of wellbeing declining from 77.9% (116 out of 149 participants) in 2022 to 72.2% (13 out of 18 participants) in 2023. (Note: the wellbeing findings for 2023 for the US PGM and Sandouville operations may not be broadly applicable to the entire working population, due to the small sample size.)

Recognising the importance of a comprehensive evaluation, our mental health resilience assessment in 2023 included a specific focus on gauging the risk of burnout among our workforce in the SA and US regions. The assessment did not cover Sandouville due to privacy regulations.

For 2023, the off-site employee assistance programme (EAP) engagement rate (using the ICAS wellness check) at our SA operations was 2.1%. High-risk cases for 2023 constituted 3.0% of the total engagement rate (including employee dependents). This compares to the high-risk rate of 2022 which was at 3.7%. The primary areas of concern in 2023 were mental health, relationship issues, financial planning and payment issues, and personal development. To address these issues, our EAP offers support (e.g., counselling) to employees and their immediate dependents. Our SA operations invested R6.7 million in our Employee wellbeing programme. Our operations in Europe, United States, and Australia also have access to EAP services.

Furthermore, victims of gender based violence (GBV) have access to free and confidential psychosocial support at our SA PGM and SA gold operations through GBV reporting and referral centres.

HEALTH, WELLBEING AND OCCUPATIONAL HYGIENE continued

PERFORMANCE

SA region

SA region: Chronic disease risk classification¹

	2023						2022					2021						
	1 Criteria group	2 Criteria groups	3 Criteria groups	More than 3 criteria groups	Total	%	1 Criteria group	2 Criteria groups	3 Criteria groups	More than 3 crite ria groups	Total	%	1 Criteria Group	2 Criteria Groups	3 Criteria Groups	More than 3 Groups	Grand Total	%
SA gold	4,072	2,694	1,644	421	8,831	23	4,387	3,171	1,955	500	10,013	27	4,708	3,857	2,268	640	11,473	30
SA PGM	7,659	5,944	3,437	1,245	18,285	37	7,219	6,020	3,384	1,188	17,811	36	7,233	6,681	3,622	1,237	18,773	38
Total	11,731	8,638	5,081	1,666	27,116	31	11,606	9,191	5,339	1,688	27,824	32	11,941	10,538	5,890	1,877	30,246	35

¹ Chronic disease risk criteria categories include, amongst others, diabetes, hypertension, TB, occupational lung diseases, HIV, heart diseases, being overweight, age, kidney failure and carcinomas

Tuberculosis

As South Africa is one of the highest-burdened tuberculosis (TB) countries worldwide, it is a key focus for our SA operation. Since embarking on our objective to eradicate TB at our SA operations, we reduced active TB cases from 832 in 2014 to 190 in 2023 (2022: 201). At our SA PGM operations, year-on-year active cases decreased from 203 to 149. This equates to a TB rate of 5.80 per 1,000 employees at the SA gold operations and 3.14 per 1,000 employees at the SA PGM operations.

To eliminate TB at our operations we have compulsory annual TB screening and case management. We have a post-employment TB programme in partnership with TEBA that manages patients on exiting the mine, ensuring laboratory follow up and dispensing of medication.

Exemplar Award for Sibanye-Stillwater from Ending Workplace TB

The Ending Workplace TB (EWTB) campaign was initiated by the World Economic Forum's Centre for Health and Healthcare, in partnership with private and public organisations. The campaign encourages companies to implement workplace TB programming, and champions existing examples of excellence by way of the Exemplar Award. Companies are asked to reference their support of EWTB in their ESG reporting, demonstrating that their actions on TB align with ESG reporting requirements.

In 2023, Sibanye-Stillwater met the criteria to receive EWTB's Exemplar Award. As per the award citation, the Group showed "outstanding performance in the delivery of workplace TB programs, helping to keep workers, their families, and communities safe from the threat of TB. This award recognises the outstanding work conducted by medical teams in Sibanye-Stillwater's operations, particularly those in South Africa."

SA region: TB rates per 1,000 employees (new and retreatment cases)

	2023			2022			2021		
	Total	PGMs	Gold	Total	PGMs	Gold	Total	PGMs	Gold
Total TB	3.78	3.14	5.80	4.95	4.37	5.72	5.12	3.99	6.61
Pulmonary TB	2.99	2.68	4.58	4.19	3.94	4.53	3.97	3.46	5.17
Extra pulmonary TB	0.79	0.49	1.22	0.76	0.43	1.20	0.86	0.53	1.43
Cardiorespiratory TB	3.68	2.85	5.01	4.61	4.16	5.21	4.66	3.70	5.92
Multidrug-resistant TB	0.05	0.06	0.03	0.07	0.06	0.09	0.08	0.04	0.13

SA region: Number of new and retreatment cases of TB

	2023			2022			2021		
	Total	PGMs	Gold	Total	PGMs	Gold	Total	PGMs	Gold
TB	339	149	190	404	203	201	446	197	249
Cardiorespiratory TB	299	135	164	376	193	183	406	183	223
New cases of drug resistant TB	10	3	7	11	4	7	11	2	9
New cases of multidrug-resistant TB	4	3	1	6	3	3	7	2	5

3.3, 3.4



HEALTH, WELLBEING AND OCCUPATIONAL HYGIENE continued

HIV/Aids

In keeping with the 2025 UNAIDS HIV targets (which aligns with our commitment to meeting the UN SDG goals related to AIDS, specifically SDG 3: ending Aids by 2030), our targets for HIV/AIDS are as follows:

- 95% of people living with HIV (PLHIV) using combination prevention
- 95% of PLHIV knowing their status
- 95% of people who know their status initiating treatment
- 95% on treatment being virally suppressed
- 95% coverage of services
- 95% of women having access to HIV and reproductive health services

We have various initiatives to achieve these targets:

- Compulsory HIV counselling and screening offered annually at all occupational health centres for all employees
- Medical schemes reporting on linkages to treatment and status of viral suppression
- Monitoring disease management programmes run by medical schemes, relating to highly-active antiretroviral therapy (HAART)
- On average, 84% of HIV positive employees receive first line antiretroviral treatment
- For those employees that exit the organisation – our HIV/HAART patients are transferred to the state programme or they remain on the medical schemes disease management programme on leaving the organisation

SA region: HIV, VCT¹ and HAART (highly-active antiretroviral therapy)

	2023			2022			2021		
	Total	PGMs	Gold	Total	PGMs	Gold	Total	PGMs	Gold
VCT offered	91,326	56,397	34,929	92,127	50,577	41,550	88,187	44,511	43,676
VCT conducted	25,352	20,180	5,172	28,675	23,335	5,340	29,041	23,036	6,005
VCT test-positive	429	260	169	660	393	267	803	449	354
Proportion of workforce tested ²	32	41	16	0	0	0	0	0	0
New recipients of HAART ³	1,693	871	822	3,844	1,712	2,132	1,845	959	886
HAART patients alive and on treatment, total employees including category 4-9 employees ⁴	13,948	8,933	5,015	14,620	8,796	5,824	15,160	8,326	6,834
Employees who have left HAART programme ⁵	1,485	823	662	817	577	240	142	92	50

Note: Sibanye-Stillwater recognises the right of employees not to disclose their HIV status.

¹ Voluntary counselling and testing

² VCT conducted as a percentage of total workforce (employees and contractors)

³ HAART statistics only include employees on medical aid

⁴ Entry-level mining employees (Category 4-9) of the SA gold operations

⁵ Employees who left HAART programme within 12 months of starting antiretroviral therapy (including retrenched employees with ill health and any other labour-related terminations)

**OCCUPATIONAL HYGIENE AND MEDICINE****Heat-related illness**

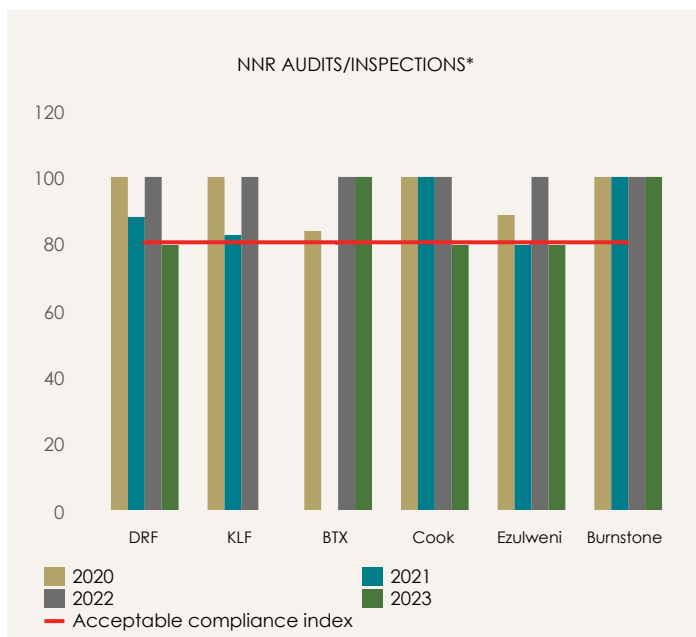
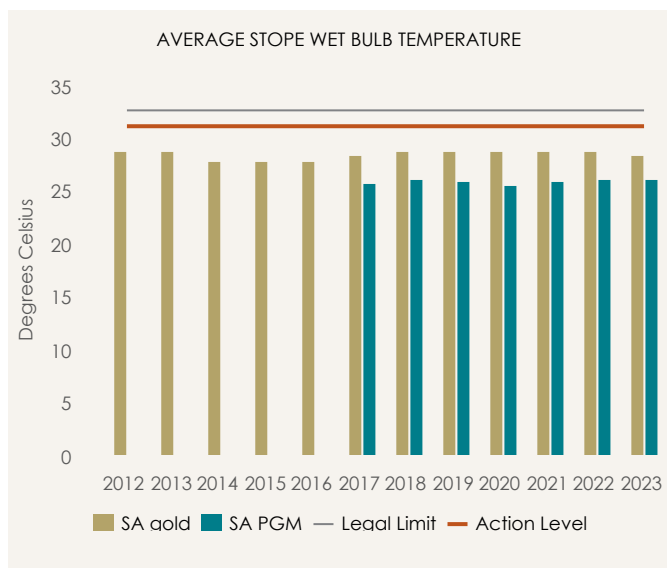
Given the depth of some of our mines, thermal stress and heat-related illness are serious risks for the SA region. Our policy focuses on minimising exposure to temperatures above 31°C (wet bulb), which is 1.5°C below the legally allowed exposure of 32.5°C (wet bulb). To do so, we use underground ventilation and refrigeration systems, which are reviewed annually against planned production targets.

As part of their annual refresher training, all underground employees are trained on standards and procedures regarding thermal stress, including safe declaration, withdrawal temperature limits, and stopping work without hesitation when temperatures exceed the limit.

Temperature is included in the life-saving behaviours (our non-negotiable rules that address risk areas), which instruct employees to withdraw if the temperature reaches 32.5°C. We measure heat exceedances across two criteria: average stope temperatures and number of stope panels above 31°C. At both the SA gold and SA PGM operations we have achieved a significant reduction in the number of stope panels that exceed the limit.

HEALTH, WELLBEING AND OCCUPATIONAL HYGIENE continued

Our US PGM operations do not generally experience heat-related issues.



* Kloof was not audited in 2023 and Beatrix was not audited in 2021

Radiation exposure

Radiation hazards in our mines are from naturally occurring radioactive uranium in the gold bearing reef. Our SA gold operations are regulated by the National Nuclear Regulator (NNR) which conducts audits as stipulated by the NNR Act 47 of 1999, which mandates us to have a nuclear certificate of registration (COR).

All the SA operations comply with COR conditions. The graph below shows our levels of compliance as per the NNR inspection audits conducted in 2020, 2021, 2022 and 2023. All mines achieved the 80% acceptable compliance index in 2023.

Our SA gold operations have a Radiation protection quality management policy. This demonstrates a commitment to integrate the management of radiological exposure into our business philosophy, ensuring adequate resources for compliance to local and international requirements), and to communicate all relevant matters regarding radiation to the relevant parties.

The NNR national dose register steering committee oversees the recording system of radiation exposure doses nationwide. Our SA gold operations upload their quarterly radiation exposure on to the national dose register. Our accumulated 2023 radiation exposure doses are well below the dose limit as set by regulation (R388 of April 2006, 20mSv/a for workers).

In terms of radioactive contamination of waste, this is negligible at our operations. However, all hazardous waste is disposed of responsibly. In 2023, 3,909 tonnes of contaminated scrap metal were released to NNR authorised scrap dealers (2022: 4,752 tonnes). (See *Minimising our environmental impact*, page 206).

SA region: Occupational diseases (number of cases reported and rate per 1,000 employees)²

	2023			2022			2021		
	Total	PGMs	Gold	Total	PGMs	Gold	Total	PGMs	Gold
Silicosis ¹	111	18	93	88	29	59	93	32	61
Silicosis rate per 1,000 employees	1.38	0.38	2.84	1.09	0.62	1.90	1.16	0.67	1.88
Chronic obstructive pulmonary disease (COPD)	35	30	5	32	26	6	30	24	6
COPD rate per 1,000 employees	0.44	0.63	0.15	0.40	0.56	0.19	0.37	0.50	0.19
Noise-induced hearing loss (NIHL)	236	83	153	264	101	163	294	122	172
NIHL rate per 1,000 employees	2.94	1.75	4.67	3.28	2.18	5.26	3.66	2.54	5.31
Cardiorespiratory TB (CRTB)	299	135	164	376	193	183	406	183	223
CRTB per 1,000 employees	3.73	2.85	5.01	4.68	4.16	5.90	5.05	3.81	6.88

¹ Number of cases reported includes new and resubmission cases

² Rates calculated based on at-risk employee population

HEALTH, WELLBEING AND OCCUPATIONAL HYGIENE continued

SA region: Occupational health management

	2023			2022			2021		
	Total	PGMs	Gold	Total	PGMs	Gold	Total	PGMs	Gold
Medical surveillance and certificate of fitness examinations – total ¹	224,822	123,427	101,395	171,455	106,787	64,668	169,647	97,125	72,522
Employees	172,105	92,530	79,575	123,742	73,646	50,096	125,960	69,283	56,677
Contractors	52,717	30,897	21,820	47,713	33,141	14,572	43,687	27,842	15,845
Days lost due to health-related absenteeism	925,342	572,940	352,402	892,980	586,982	305,998	1,229,355	689,941	539,414

¹ Excludes heat tolerance screening (HTS) testing in 2021, post-COVID assessments and vulnerability assessments**SA region: New and resubmitted cases of occupational diseases**

	2023	2022	2021
Silicosis	111	88	93
Gold	93	59	61
PGM	18	29	32
Chronic obstructive pulmonary disease	35	32	30
Gold	5	6	6
PGM	30	26	24
Cardiorespiratory TB	299	376	406
Gold	164	183	223
PGM	135	193	183
Noise-induced hearing loss	236	264	294
Gold	153	163	172
PGM	83	101	122

Cases and claims: Medical Bureau for Occupational Diseases, and Compensation Commissioner for Occupational Diseases

	2023	2022	2021
Cases assessed by Medical Bureau for Occupational Diseases (certification)	12,059	8,706	5,848
Sibanye-Stillwater's claims processed by Commissioner for Occupational Diseases	962	789	1,247
Claims processed by Compensation Commissioner for Occupational Diseases	5,319	6,086	6,171
Total paid only to Sibanye-Stillwater beneficiaries (R million)	33	18	25
Total paid to industry beneficiaries including Sibanye-Stillwater beneficiaries (R million)	201	136	126

Noise-induced hearing loss (NIHL)

Our SA region follow the MHSC (Mine Health and Safety Council) milestone of all process noise (including machinery) below 107dB(A) by 2024. We are on track to achieve this milestone. Our NIHL strategy is to reduce operational noise such that with the use of hearing protection devices employees are not exposed to noise levels above 85dB(A), which is the statutory limit.

Initiatives to reduce noise at our SA region include:

1. "Buy quiet" strategy as per Minerals Council
2. Moulded hearing protection devices roll out
3. Auditing and monitoring of critical controls for noise
4. Tightened access control to areas with high noise levels
5. Monitoring hearing protection compliance in noise demarcated areas

Our hearing conservation programme is aligned with the Mandatory Code of Practice (as per the Mine Health and Safety Act) for noise and includes silencing of equipment, risk assessments, monitoring and measurement, personal protective equipment, investigation of any deterioration in hearing above 5%, and medical surveillance.

Non-compliance to noise levels is mainly a result of damaged (or absent) mufflers on mechanical equipment, e.g., rock drills. At our US operations, some equipment, such as jackleg drills, exceed 107dB(A) and a few ventilation main fans exceed 115dB(A). These areas are designated as "restricted access." In the year under review the US and the EU regions had three and zero NIHL cases, respectively.

Exposure to occupational noise and resultant NIHL remains a challenge across the SA region. While we welcome the downward trend in NIHL cases since 2019, we acknowledge the need for further reductions.

HEALTH, WELLBEING AND OCCUPATIONAL HYGIENE continued

In 2023 our SA PGM and SA gold operations recorded 83 and 153 NIHL cases, respectively. This compares to the 2022 figures of 163 NIHL cases at our SA PGM operations and 101 NIHL cases at our SA gold operations.

We completed the rollout of moulded hearing protection for high risk and qualifying employees in the SA region. We also included noise as a pass/fail criteria during rockdrill maintenance. Another focus at our SA operations has been alignment of noise signage, demarcation of all workplaces and sources and noise mapping.



Silica, dust and airborne pollutants

Dust at our SA PGM operations has very low silica content and is well controlled, presenting negligible regulatory or health risks.

Silicosis (an occupational lung disease caused by long-term inhalation of dust particles) is of concern at our SA gold operations. South Africa's deep-level gold mines, where quartz concentrations are high, present a risk for silicosis and increased susceptibility to TB.

At our SA operations, employees' exposure to airborne pollutants is monitored in line with the relevant DMRE codes of practice. Early in 2022 we reduced our internal target for silica dust exposure to no more than 5.0% (from 5.6% in 2022) of samples to exceed $0.05\text{mg}/\text{m}^3$. South Africa's legislated occupational exposure limit is double this (i.e. $0.1\text{mg}/\text{m}^3$). Our new target aligns with our long-term strategy to meet the MHSC standard of <5% samples exceeding $0.05\text{mg}/\text{m}^3$ by 2024 at SA gold operations. In 2023, at our SA gold operations, 6.95% samples exceeded $0.05\text{mg}/\text{m}^3$.

In 2023, we recorded 93 silicosis cases at our SA gold operations (2022: 59 cases). For 2023, our silicosis rate at our SA operations was 1.38 per 1,000 employees (1.1 in 2022).

To date, 48 real-time dust monitors have been installed. The data from these dust monitors is collated automatically and reports are distributed daily through QlikView. This information is also available on our SCADA data system. We conduct investigations for each exposure that exceeds $0.05\text{mg}/\text{m}^3$.

Rates of certified silicosis cases had been steadily decreasing in recent years, only to spike in 2023. This is something of a statistical anomaly given that certified silicosis cases in a given year have little to do with silica dust levels during that year. Certification of silicosis happens sometime in the life of the employee and not always in the same year that they submitted a claim. We also saw a spike in certifications because of shaft closures in the SA region, which meant that an unusually high number of employees registered with government's Compensation Fund by which they underwent silicosis testing.

The 2023 year saw further progress towards achieving the MHSC milestone on Silica exposure of no more than 5% of samples above $0.05\text{mg}/\text{m}^3$. The levels improving from 8.35% of samples in Q2 2023 to 6.00% in Q4 2023. Based on the current trends and sustained focus at the operations, the SA gold operations should meet the MHSC Milestone target at the end of 2024.

Soluble platinum salts (chloroplatinates)

Chloroplatinate salts are potent skin and respiratory sensitizers that can result in the clinical syndrome of platinum salt sensitivity. This induces symptoms typical of a type I allergy, the most significant of which is asthma. Once sensitized, the concentration that elicits an adverse response is lower and the sensitized worker may need to be removed from an area where chloroplatinates are present.

Several initiatives have been implemented at our SA PGM precious metals refinery (PMR) to reduce exposure and to work towards achieving the voluntary guideline value of 100 nanograms/ m^3 set by the International Platinum Association (IPA). These include stringent housekeeping standards, spillage management, hand washbasins in canteens, automation of sampling equipment limiting manual handling of salts, and real-time dust and ventilation monitoring. Other interventions planned as part of a five-year plan include:

- Local extraction and dilution ventilation
- Resin technology for PGM separation
- Chemical reduction of salts
- Alternative filtration technology
- Gas and fume containment technology

Dust management at SA PGM

Dust at our SA PGM operations (e.g., blown off TSFs and from haul roads) is a nuisance and a potential health problem to employees and community members. It is made worse by the fact that our SA PGM operations are in dry parts of the country. Although there are no serious risks posed by dust (regulatory or otherwise) we have a five-year dust management plan (starting 2020) for our Rustenburg and Kroondal operations. The plan includes netting barriers on the side slopes of TSFs, and application of chemical dust suppressants on the crest areas of the Paardekraal and Kroondal TSFs. It also includes propagation of tamarisk to act as wind barriers.



For more information see *Minimising our environmental impact*, page 199.

Tshiamiso Trust

The Tshiamiso Trust was set up to carry out the terms of a December 2019 settlement between six mining companies and claimants suffering from silicosis and work-related TB. The trust, worth R5 billion, was instituted in February 2020. Claimants can make use of numerous lodgement centres across various countries, and at medical centres carrying out medical benefit examinations. As one of the six companies involved, Sibanye-Stillwater helped in setting up the operating structures and claims system. To date (February 2024) R1.4 billion has been paid out, with claimants coming forward and claims being paid regularly. The website provides real-time statistics on appointments, registrations, claims lodged and claimants paid. See www.tshiamisotrust.com



Diesel particulate matter (DPM)

The use of diesel-powered equipment in underground operations poses health risks in terms of over-exposure to DPM. South Africa currently has no legislated occupational exposure limit for DPM. Our internal DPM target is 0.16mg/m³ (measured as total carbon), which is in line with US regulatory requirements.

In 2023, we took 1,754 personal DPM exposure samples at our SA gold operations, 152 of which exceeded our target (in 2022 it was 125 out of 1,449). Of the 726 personal DPM exposure samples taken at our SA PGM operations in 2023, 308 exceeded our target (in 2022 it was 111 out of 359).

Current controls for DPM exposure include: vehicle maintenance, the use of low-sulphur diesel, occupational hygiene monitoring, personal protective equipment (including respiratory protection), and dilution ventilation.

Diesel particulate filters fitted for our SA PGM diesel fleet towards the end of 2022 were temporarily removed in 2023 following two incidents of diesel particulate filters melting due to extreme heat. Re-installation commenced in December 2023 after several controls were implemented.

US REGION

US legislation stipulates DPM must be less than 0.16mg/m³ for total carbon. To ensure compliance, each mining operation has an industrial hygienist to monitor engineering controls, administrative controls, and employee exposures. Our DPM reduction strategy has a three-pronged approach: diesel engine maintenance, provision of adequate dilution ventilation, and operational discipline such as traffic management.

Clean fuel initiatives are being implemented at both mines, including filtering closed-loop systems in storage areas. Work continues at both mines to reduce emissions on the small vehicle fleet engines, including traffic management measures. We are testing battery-electric LHDs and are investing in lower or zero emissions utility vehicles to replace legacy vehicles.

Routine sampling was conducted throughout 2023, and sample results continue to demonstrate improvement in DPM mitigation practices.

Radiation exposure

All the US operations have a radiation safety programme. A dedicated radiation safety officer monitors radiation levels by means of nuclear gauges. We comply with guidelines issued by the Nuclear Regulatory Commission.

Noise-induced hearing loss

A dedicated hearing conservation programme, which provides training on the effects of noise as well as the use of personal protective equipment. Annual hearing tests are conducted at our US sites on full-time employees who may be exposed to loud noise to ensure their hearing has not changed. Several forms of noise protective equipment are available at our US operations.

Respirable Crystalline Silica

Our US operations have very low silica dust content and is well contained, presenting negligible regulatory or health risks. Our US operations are below the new MSHA permissible exposure limit of 50mg/m³.

A compulsory medical review is required for employees at the refinery, depending on their risk exposure category, and a hearing test is part of the review.

EU REGION

Sandouville

Noise-induced hearing loss

Several choices of protective equipment are available to employees. In addition, many of our training and awareness programmes inform employees about occupationally-related risk and what rules to apply to mitigate the risk.

Dust

In 2023, a new dust measurement initiative was carried out. The aim was to identify the workstations with a high risk of dust inhalation and to define actions to reduce the dust load in the working environment. To this end, 30 mobile measurements were planned (device attached to operators) and ten fixed measurements were scheduled. In 2023, we took samples of nickel and cobalt dust that could be injurious.

Radiation

Use of radiation equipment in France requires a permit in accordance with Decree no. 2018-437 on the protection of workers against the risks arising from ionising radiation.

A radiation protection officer is trained and officially designated to manage radioactive sources and protect workers from ionising radiation.

HEALTH, WELLBEING AND OCCUPATIONAL HYGIENE continued

Keliber lithium project

With the Keliber lithium project in the implementation phase, risk assessments and workplace surveys have been done and will continue in co-operation with the occupational health service provider. The key is to consider and minimize the hazards already in the design and planning of the facilities.

Noise-induced hearing loss

We started a noise-prevention programme; those working in risk areas (e.g., construction site supervisors) are offered personal hearing protection. The planning of facilities considers noise risks.

Dust

The key risk related to both construction stage and operations is the crystalline silica dust that is classified as carcinogenic. This is considered in the process planning the first option being enclosing or otherwise containing dust-creating processes. The construction sites will have separate dust prevention programmes.

We commenced a study with the Finnish Institute of Occupational Health to analyse all process fractions and ore for harmful substances. The fractions from a concentrator pilot study were analysed for fibrous minerals and none were found. The study will continue with the external concentrates and drilling test samples. This work will provide further information for the workplace surveys in the operations; we will also get recommendations for personal protective equipment and monitoring requirements once the operations start.

Radiation

We acquired a radiation safety permit, according to Radiation Act (2859/2018), in December. We completed the Radiation safety management system and appointed a radiation safety officer and their deputy.

AUSTRALIAN REGION

Changes in blood lead levels prescribed by Resources Safety and Health Queensland (RSHQ) and Queensland Health have been included in the site health management plan. Blood lead testing frequency has been increased for all worker groups and results reported to RSHQ for any levels above 5µg/dL.

FUTURE FOCUS

AUS REGION	<ul style="list-style-type: none"> • Annual exposure monitoring covering RCS, lead and noise • Compliance to RSHQ blood lead levels and testing • Face fit testing ongoing • Mental health support available through provider
EU REGION	<p>Finland</p> <ul style="list-style-type: none"> • Monitoring program to define dust and noise exposure baseline when the operations start, updating workplace surveys when real measurement data is available <p>France</p> <ul style="list-style-type: none"> • Closing the Group minimum standard gaps regarding occupational health and hygiene • Reduce the Nickel dust exposure associated occupational health risks
SA REGION	<ul style="list-style-type: none"> • Sustained Regulatory Compliance through adoption of medical technologies, audit and total quality improvement programmes • Improved access to care through financial restructuring and pooling of medical scheme contributions, digital enabling technologies and mental health services • Improved labour availability through management of incapacity, sick leave and value based healthcare • Group minimum standards on occupational health and hygiene are planned for identification and completion in 2024
US REGION	<ul style="list-style-type: none"> • Implementation of new industrial hygiene data platform to occur in 2024. The use of the new platform will help keep our data streamlined, allowing easier review of data collection from routine health sampling