a.s.r.
de nederlandse
verzekerings
maatschappij
voor alle
verzekeringen

a.s.r. 2021-2025 Health an Safety Policy Plan March 2023

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Introduction

ASR Nederland N.V. (a.s.r.) wants every employee to be and remain healthy and vital at work. a.s.r. believes it is important to create an environment that optimally stimulates you to work on your own vitality and employability. Employees also take personal responsibility for this. We expect them to abide by the rules governing the use of our buildings and our (home) workplaces and not to endanger the safety of others. a.s.r. therefore strives to ensure optimal working conditions for all employees working with the organisation. Not only should work be done safely, but employees should also feel comfortable, enjoy their work and treat each other with respect. In doing so, the organisation strives for an open corporate climate, where employees and managers can openly discuss possible improvements in the health and safety policy that lead to an even safer and healthier working environment.

This health and safety policy is written for all employees and external hires working at a.s.r. It came about in consultation with the Works Council's Social Policy Committee.

The Health and Safety Policy Plan covers the period 2021-2025. Whenever significant changes occur that affect the health and safety policy, for example a major change in a.s.r.'s legal structure, a.s.r.'s strategy, its operations or the division of responsibilities and powers, the plan will be revised in the interim. This can be done at the initiative of a.s.r. or at the request of the Works Council.

Chapter 1 Health and Safety Organisation

Introduction

At a.s.r., the following positions/roles within the health and safety policy are relevant.

- Management (Executive Board, boards and managers)
- Employees
- Human Resources (MT HR, HR Advisors and Vitality and Absenteeism Specialists)
- Prevention Officers
- Business Support (Company Emergency Response Team Members, Safety and Security Coordinators and Space Management Coordinators)
- Employee Participation (Works Council and Social Policy Committee)
- Health and Safety Service

The tasks and responsibilities for each position/role are described below.

Management: Executive Board

- Ultimately responsible for establishing and implementing the health and safety policy.

Management: Boards

- Are responsible for the implementation and execution of the health and safety policy in their business unit.
- Appoint action holders who are responsible for the plan of action drawn up following the RI&E and the Vitality Scan (PMO).
- Actively promote the policy.

Management: Managers

- Are responsible for implementing established policies and procedures within their own department Oversee safe and healthy working practices.
- Ensure a working environment in which employees are given the responsibilities, powers and resources necessary for the proper performance of their duties in relation to safety, health and wellbeing.
- When an employee is ill, they are the case manager and carry out tasks under the Eligibility for Permanent Incapacity Benefit (Restrictions) Act ('Gatekeeper Act').
- Are assessed on their duties and responsibilities in relation to health and safety policy.

Employees

- Are partly responsible for their own working conditions.
- Monitor their own working conditions and vitality and ask for help to improve them.
- Use the information, protective equipment and tools provided or offered by the Health and Safety Service.
- Participate periodically in information sessions on working conditions and vitality.
- Are alert to their own work attitudes and signs that indicate health problems and discuss this in order to deploy the right support in time.

HR: Vitality and Absenteeism Specialists

- Prepare the RI&E.
- Prepare vitality scans (PMOs).
- Monitor the preparation and implementation of the Plan of Action following the RI&E and PMO surveys.
- Draw up the Health and Safety Annual Plan (plan of action) every year.
- Collect structural complaints relating to health and safety issues and identify trends from the (absenteeism) data.
- The Vitality and Absenteeism Specialist provides proactive advice on steps to take to prevent absenteeism and during the absenteeism process. And has an active role in supporting the manager as case manager.
- Monitor and exploit social legislation opportunities.
- Are point of contact for all third parties involved in vitality and absenteeism (including Health and Safety Service, Occupational Consultants, UWV).
- Actively inform all those involved regarding vitality and absenteeism in a broad sense.
- - Coordinate the vitality consultation of the In Motion working group.

HR: HR Advisors and Vitality and Absenteeism Specialists jointly

- Provide information on safe and healthy working.
- Circulate relevant health and safety information.
- Contribute to creating the right psychosocial conditions to work in. (e.g. culture, leadership, undesirable behaviour, job positions, work processes, etc. In the strategic annual (personnel) plans, care for psychosocial working conditions is an integral part of the company policy)

Prevention officers and Safety and Security and Spaces Coordinators jointly

- Cooperate in conducting and drafting the RI&E, each from their own expertise.
- Advise and work with the Works Council on vitality and absenteeism.
- Cooperate in the implementation of measures aimed at achieving the best possible health and safety policy.
- Provide information to employees on how to work with and maintain equipment, such as machines and BHV equipment.
- Monitor the (correct) use of the workplace and protective equipment.

¹ A more detailed description of roles and responsibilities is given in Annex I.

Services

- Has policy and executive duties in the field of security. It covers the following topics.
- Emergency response plan
- Company emergency response (BHV)
- Registration of accidents
- Workplace layout (including procurement of health and safety proof furniture)
- Environment
- Hotline for aspects concerning safety
- Building maintenance (interior and exterior)

Employee participation (Works Council/Social Policy Committee)

- Consults (in the Social Policy Committee) with management, HR and Business support on the health and safety policy in a broad sense. - Has the right of consent with regard to regulations mentioned in the law (on works councils) concerning working conditions.

Health and Safety Service

- Provides expertise such as occupational physicians, organisational experts, occupational hygienists, confidential advisors, staff welfare officers and safety experts.
- Is a proactive sparring partner who supports a.s.r. in increasing the vitality and employability of its employees.
- Has a targeted approach so that the employee is optimally supported during absenteeism and deploys innovative services for this purpose.
- Contributes to elements of the health and safety policy, including
 - Sickness absence counselling
 - Carrying out the RI&E
 - Vitality scan Preventive Medical Examination (PMO)
 - Confidential advisor for employees

Chapter 2 Health and Safety Policy

Introduction

The health and safety policy should help employees perform at their best for the customer. This means ensuring safety as much as possible, protecting health and promoting wellbeing.

At the heart of a.s.r.'s health and safety policy are prevention-oriented activities and measures. Policies have been formulated in the various sub-areas. An annual a.s.r.-wide health and safety plan is produced to highlight current issues. To promote employee vitality, the results of the vitality scan are translated into a targeted plan for the relevant business unit. This covers specific topics relevant to the target group, such as perceived work pressure, increasing energy sources and activation on sufficient exercise during the working day.

Frameworks

This health and safety policy is shaped within the following frameworks.

- a.s.r.'s mission and vision
- HR policy
- Health and Safety legislation and regulations
- Health and Safety catalogue for the insurance industry (www.gezondverbond.nl)
- Obligations arising from provisions in the a.s.r. CBA.

The health and safety policy covers the following topics.

- Policy general
- Policy on safety
- Policy on health: physical working conditions
- Policy related to health: psychosocial working conditions

These topics are detailed below.

Policy general

The general policy around health focuses on safety and preventing or reducing health risks.

The general health policy covers the following topics.

- Vitality and Sickness Absence Regulations
- Risk Inventory and Evaluation (RI&E)
- Preventive Medical Examination (PMO)
- Social Fund
- Notification of occupational diseases

These topics are detailed below.

Vitality and Sickness Absence Regulations

The Vitality and Sickness Absence Regulations apply to the whole of a.s.r. (Annex II). The regulations focus on prevention: increasing vitality and preventing absence. They also describe the procedure employees follow during illness and what steps we expect during reintegration, giving the employee guidance on who can support him.

Risk Inventory and Evaluation (RI&E)

As an employer, to ensure the safety and health of employees, it is essential to identify and address safety, physical and psychosocial working conditions risks. Therefore, an RI&E is conducted periodically (once every four years). The RI&E records the risks posed by work and whether adequate precautions have been taken to prevent damage to employees' health. The RI&E provides insight into the bottlenecks in the area of working conditions, which bottlenecks are most urgent and which measures need to be taken within which timeframe. The latter is recorded in the Plan of Action accompanying the RI&E. The implementation of the Plan of Action accompanying the RI&E is regularly evaluated and adjusted based on the evaluation.

Among others, the following topics are covered in the RI&E.

- Health and safety policy and the policy to increase vitality and employability
- Workplace and the working environment (such as climate and noise)
- Psychosocial workload
- Physical workload
- Monitor work
- Safety and hazardous substances
- Company emergency response, including workplace accidents inventory

The RI&E also includes a recommendation for the periodic performance of a Preventive Medical Examination (PMO) for employees. Conducting and preparing the RI&E is done with the cooperation of (certified) experts. The RI&E is reviewed by a certified expert (at a.s.r. this is the Health and Safety Service) in accordance with the Working Conditions Act.

Preventive Medical Examination (PMO)

The employer periodically gives employees the opportunity to undergo a PMO. At a.s.r., this is in the form of a vitality scan. The aim of this examination is to detect health risks related to work early and discover how employees' health and vitality can be positively influenced. This is done by measuring stressors, energy sources and personality traits. This serves to analyse how these factors influence the risk of burnout, engagement and work ability. The outcome of this examination is a report with recommendations at organisational/departmental level for the management and an individual report for the employee. If warranted by the individual report, the employee can schedule an appointment for a consultation with the occupational physician, the Health and Safety Nurse or the Vitality and Absenteeism Specialist. A PMO is conducted under the responsibility of the Health and Safety Service. Within a.s.r., it has been determined in consultation with the Works Council that a full vitality scan will be carried out once every three years. In addition, a brief effectiveness measurement takes place in the interim.

Social Fund

Employees who, through no fault of their own, find themselves in financial distress and are no longer able to find a solution on their own, can appeal to a.s.r.'s Social Fund. More information is available on the intranet.

Notification of occupational diseases

A disease or disorder resulting from strain that occurred predominantly in connection with work or working conditions, is reported anonymously by the occupational physician to the Netherlands Centre for Occupational Diseases. In this way, nationwide insight is gained into the development of occupational diseases. Annually, a.s.r. receives feedback on the number of reported occupational diseases.

Working independently of time and location.

At a.s.r., we give you a great deal of freedom to determine your own working hours and to choose your own working place. Employees of a.s.r. work independently of time and location. 'Working independently of time' means that you determine your own working hours within the frameworks set. 'Working independently of location' means that you are not restricted to the office when carrying out your work. Even after the COVID pandemic, we expect to work from home more than before. But you can also work from another location, for example at a customer's office, en route, or at another external workplace, if the situation so allows. This allows us to serve our customers optimally, do our work efficiently and create a proper work-life balance.

The principles of working independently of time and location are described in The Other CBA.

Policy on safety

Safety policy, both at personal and organisational level, focuses on prevention. It covers all resources deployed and activities carried out to ensure physical safety at the premises where the work is carried out. This includes the equipment and maintenance in and on the buildings, workplace equipment and all facilities made available in the building. The Safety and Security Coordinators exercise a positive influence in the field of integral security, seeking to achieve alignment and the right balance (synergy) between all aspects of safety and security.

The policy on safety covers the following topics.

- Emergency response plan
- Company Emergency Response
- Workplace accidents

These topics are detailed below.

Emergency response plan

The a.s.r. locations have a contingency plan that sets out how to act in the event of an emergency, so that damage to persons and property is limited and business activities can be continued as much as possible. More information on emergency response plans can be found on the intranet.

Company Emergency Response (BHV)

The purpose of company emergency response is to mitigate the immediate adverse effects of accidents, fires and other events as much as possible for employees and all other persons present in the office.

The locations of a.s.r. all have a BHV team. The BHV officers have received BHV training and have access to the proper equipment; their number and organisation ensures that they can properly perform the following tasks.

- Providing first aid at accidents
- Restricting and fighting fire and limiting the consequences of accidents
- Alerting and evacuating all employees and other persons in the company in emergency situations
- Calling in professional external assistance organisations immediately if necessary

The performance of company emergency response is reviewed at least once a year. More information is available in the ASR Nederland Company Emergency Response Policy Memorandum.

Workplace accidents

A workplace accident is an accident that occurs during or as a result of work performed for a.s.r., in which an employee is injured. This injury leads to sickness absence, permanent disability or death. The Workplace Accidents Guideline (Annex VI) describes the procedure, tasks and responsibilities applicable in the event of a workplace accident.

Policy on health: physical working conditions

The policy on physical working conditions is primarily aimed at preventing or reducing health risks. In doing so, a.s.r. as an employer is asked to take the personal traits of its employees into account as much as possible.

The policy on physical working conditions covers the following topics.

- Workstation equipment, both in the office and at home
- CANS
- Heavy physical work and protective equipment
- Smoking policy
- Alcohol, drugs and medication policy
- Company fitness training

These are detailed below.

Workplace equipment

a.s.r. provides good workplaces equipped in accordance with health and safety regulations. This means attention to physical working conditions and office design, with further rules on the design of monitor workstations.

Physical working conditions	Office design
 indoor climate ventilation daylight/artificial light irritating noise setup monitors setup printers/faxes setup copier 	 furniture office layout areas of offices facilities (washrooms, break room, etc) - equipment and furniture (monitor, keyboard, desk, chair)

Employees are increasingly working from home. It is therefore important that employees have a healthy and safe working environment adapted to personal traits at home too (Vitally Fitted Home). Employees are therefore required to take a home workplace check and attend periodic information sessions on healthy home working and setting up one's own workplace.

If the workplace check shows that you need tools for a safe and healthy workplace that complies with health and safety regulations, a.s.r. will make these available on loan at your request. You can request the following aids (limitative): office chair, (sit-stand) desk, monitor, keyboard, mouse and laptop stand.

In case of physical complaints or doubts, the manager or employee can request an individual workplace inspection for both the workplace in the office and the workplace at home. An external ergonomist will conduct the inspection and advise whether and, if so, what additional aids are needed to work symptom-free.

If the advice shows that additional ergonomic adjustments are needed, or there is a medical indication from the occupational physician, the budget manager can request these aids via the ASR HR Vitality Desk, hr.vitaliteit@asr.nl. For employees to whom a lease car is made available, a special car seat can be purchased on medical grounds.

Computer screen glasses

Employees may be eligible for reimbursement of the purchase costs of computer screen glasses. Any costs associated with an eye examination and eye measurement will also be borne by a.s.r. Computer screen glasses are glasses that are adjusted in terms of strength to work with a monitor.

An employee aged 40 or over is eligible for computer screen glasses without medical indication from the occupational physician. If an employee is under 40 years of age, an indication is needed from the occupational physician. The occupational physician determines whether there is a direct relationship between the eye complaints and the screen work. a.s.r. has made arrangements with provider Intersafe for reimbursement of computer screen glasses. Through Intersafe, an employee is eligible for a pair of frames from Pearle's and Eyewish's discount collection of frames. This can only be deviated from in special cases.

CANS

Complaints of Arms, Neck and/or Shoulders, also known as CANS, occur when performing repetitive movements (such as certain forms of screen work). These symptoms are considered an overuse syndrome, where the severity of the symptoms - such as pain, tingling, stiffness or other signs of irritation in the neck, shoulder, arm, wrist or hand - can vary. CANS does not occur overnight and overcoming these symptoms can be a difficult and lengthy process. a.s.r.'s policy regarding CANS therefore focuses on prevention, on avoiding (disabling) neck, shoulder and/or arm complaints.

The policy includes the following elements.

- Educating employees about a healthy workplace and how to prevent CANS.
- Possibility of a workplace inspection by an ergonomist.
- Installation and use of Vitality software. A tool that monitors the limits of screen work. The basis of such a tool is measuring keyboard and mouse actions. Based on these data, the programme indicates when it is best to take a break.

The tool takes into account interruptions that have already taken place (e.g. an employee makes a phone call, looks something up or fetches coffee). The software helps to sufficiently alternate concentrated screen work with mental and physical exercise, so that employees have an optimal and healthy work-movement rhythm during the working day.

Heavy physical work and protective equipment

A limited number of positions at a.s.r. involve relatively heavy physical work (warehouse, post room and technical department). Extra attention is paid to the health of these employees in the form of extra information, instruction and aids (e.g. for lifting). a.s.r. also ensures the availability of working protective equipment approved by the Health and Safety Service (e.g. shoes, protective glasses, gloves, etc.).

Smoking policy

In accordance with the Tobacco Act, a.s.r. ensures the following.

- Every employee can do their job in a smoke-free environment
- No employee or visitor is exposed to tobacco smoke;
- Vulnerable groups of employees (such as COPD patients, pregnant women, people with cardiovascular complaints) are protected.
- Periodical education on the subject and support for employees who want to quit smoking.

All a.s.r. premises are therefore smoke-free and there are no internal smoking areas. As far as possible, facilities are provided around the premises so that employees who smoke can do so somewhat protected from wind and rain.

Alcohol, drugs and medication policy

It is not permitted at a.s.r. to be under the influence of alcohol or drugs while at work or to consume alcohol or drugs. If medication use may affect work, the employee discusses this with the occupational physician.

It is important that signs of excessive use of alcohol, drugs and/or medication use are recognised as early as possible including in the workplace, and that, if necessary, an employee is referred to adequate assistance as soon as possible.

For that reason, guidelines on alcohol, medication and drug (AMD) use in relation to work have been established with regard to the following topics (Annex III):

- Education on AMD use
- Rules on AMD use within a.s.r.
- Counselling and assistance in case of excessive AMD use
- Sanctions and measures in case of excessive AMD use

Company fitness training

Facilitating company fitness training is prompted by a vision of promoting health, being an attractive employer and creating a bond with the organisation. Employees at the Utrecht location can do in-company fitness training. Out-company arrangements have been made for Enschede and Heerlen. To facilitate in-company and out-company company fitness training, a.s.r. uses an intermediary/specialist who, among other things, guarantees professional guidance and quality of the fitness training (locations).

Policy related to health: psychosocial working conditions

The preventive policy on psychosocial workload is an integral part of a.s.r.'s regular company and personnel policy. Various regulations and HR instruments pay attention, directly or indirectly, to, on the one hand, an optimal balance between the strain and work capacity of employees and, on the other hand, the creation of a working environment where employees call each other to account for behaviour and where, regardless of hierarchical line or power, everyone can set his own limits.

The policy on psychosocial working conditions covers the following topics.

- Work pressure
- Design of jobs
- Undesirable behaviour

These are detailed below.

Work pressure

The perceived work pressure is one of the main factors of the psychosocial workload and plays a major role in absenteeism. At a.s.r., the largest cause of absenteeism is psychological. Work pressure occurs when the demands of the tasks are not balanced with the capabilities (in terms of energy) the employee has to perform these tasks.

A survey into and actions aimed at preventing work pressure are part of the vitality scan and the annual planning of the In Motion working group.

Design of jobs

Jobs at a.s.r. are designed to meet the following.

- The various tasks of the job are of an approximately equal level...
- The job includes plenty of varied work...
- Tasks and responsibilities/competences are aligned.
- The job allows the employee to exert a certain measure of influence on his own tasks...
- Unvarying, repetitive work over a short period of time is avoided as much as possible.
- The job requirements (training and competence requirements) are aligned with the job content.

Undesirable behaviour

Undesirable behaviour consists of direct or indirect behaviour or actions by colleagues or customers that are stressful because they threaten or damage the employee's physical or mental integrity. Undesirable behaviour is involved as soon as one of the persons involved experiences it as such. Undesirable behaviour consists of the following forms.

- Sexual harassment
- Bullying/mobbing
- Aggression and violence
- Discrimination

At a.s.r., an Undesirable Behaviour Code of Conduct applies (Annex V).

2021-2025 Spearheads

In addition to the long-term health and safety policy described above, a.s.r. has the following spearheads for the period up to and including 2025

- Participation employees with a labour market disadvantage
- Psychosocial workload and hybrid working
- Sitting behaviour
- Increasing employee self-direction

These topics are detailed below.

Participation of employees with a labour market disadvantage

The Participation Act was introduced on 1 January 2015. a.s.r. wants to make optimal use of the diversity of talents in the labour market, giving everyone the opportunity to contribute to the company's results. The Executive Board of a.s.r. has set a target for the next four years for each business unit to attract employees with a disadvantage on the labour market. A Participation Desk has been set up within the HR Total Workforce Management department. This is an internal employment agency for extraordinary new talents (people falling under the Sheltered Employment Act and people receiving benefits under the Disablement Assistance

Act for Handicapped Young Persons (Wajong)). At 'working at' it is explicitly stated that work-disabled people are welcome at a.s.r., so that they are invited to apply.

Psychosocial workload and hybrid working

Hybrid working is set to stay. The 2021 RI&E included extensive research into the psychosocial workload of a.s.r. employees. This research reveals that employees experience a higher mental workload due to the home working situation as a result of COVID-19. The line between work and home is blurred, with employees struggling to maintain a proper balance due to their sense of responsibility and inability to switch off from work properly.

a.s.r. will periodically highlight themes in the annual planning to inform and train employees to deal with stress in a smarter way.

Sitting behaviour

Work within a.s.r. consists of 80-85% screen work, in other words sedentary work. The results of the vitality scan show that there is improvement potential in terms of employees' work and exercise rhythm during the working day. Employees do not move around enough between (screen) work and therefore stay seated for too long at a time.

a.s.r. has several facilities to encourage movement during the working day, such as a.s.r. Vitality, the vitality software, education on healthy working and various workshops. a.s.r. will link all the facilities offered and periodically promote the importance of exercise to raise awareness and bring about a change in behaviour.

Increasing employee self-management

The vitality scan and findings of our occupational physicians reveal that the majority of a.s.r. employees are introverted with an avoidant coping style. They find it difficult to discuss problems and to actively seek a solution themselves. a.s.r., in cooperation with the Health and Safety Service, will investigate ways in which to enhance employees' self-management (in terms of vitality).

Providing information

a.s.r. considers it important that managers, employees and external parties working for a.s.r. are aware of the risks associated with their work. It is important that everyone knows what measures have been taken to reduce risks and in what ways you yourself can contribute to reducing them.

Information is structured as follows.

- a.s.r. employees
- Receive information upon commencement of their employment and during induction day.
- Get information via the intranet (the Health and Safety Policy Plan and all procedures can be found on the intranet).
- Whenever there are new or amended policies or implementing provisions, employees are informed about them.
- Managers and employees discuss (wishes regarding) working conditions.
- a.s.r. offers workshops that contribute to good working conditions and increasing vitality.
- External staff/flex workers
- Receive information on the a.s.r. health and safety policy when they start.
- Are informed of the potential risks to their health posed by the work they will perform. (The temporary employment and secondment agencies with which a.s.r. does business receive an extract of the RI&E.)
- Can attend information sessions or workshops and can make use of certain schemes that promote vitality, such as the workplace check.
- Works Council and Business Unit Committees
- The Works Council has an average of five consultation meetings a year with the Executive Board. In the consultation meetings between the Business Unit Committees and local boards working conditions also feature on the agenda.
- The Social Policy Committee of the Works Council periodically consults with the HR director on health and safety matters.
- Visitors
- Visitors are informed on entry about the security procedures relevant to them.

Chapter 3 Health and Safety Cycle

Introduction

The health and safety cycle describes the following fixed health and safety activities that follow each other cyclically at a.s.r. over a four-year period.

- The Health and Safety Policy Plan: once every four years
- The Health and Safety Annual Plan: annually
- The RI&E: once every four years
- A Preventive Medical Examination (PMO): a comprehensive examination once every three years and an effectiveness measurement in the interim period.

The planning

The next implementation of the RI&E will take place in 2025. In the following situations, a new RI&E is done sooner than in 4 years.

- This is based on past experience.
- Working methods or working conditions change.
- Significant changes occur in the state of knowledge or in the area of professional service provision.

Schematic overview of planning

2021	2022	2023	2024	2025
- Health and Safety	- Annual plan	- Annual plan	- Annual plan	- Health and Safety
Policy Plan	- Plan of Action RI&E	- Plan of Action RI&E	- Plan of Action RI&E	Policy Plan
- Annual plan	- Finalisation PMO	- Interim PMO		- Annual plan
- RI&E				- RI&E
- PMO				- PMO
Revising the health and safety policy				

Annex I Responsibilities Prevention Officer

a.s.r. has several prevention officers, in the roles of Safety and Security Coordinators and Space Management Coordinators (Business Support) and Vitality and Absenteeism Specialists (HR). The prevention officer's legal duties are executive and policy-related. The three statutory duties of a prevention officer are as follows.

- (Co-)drafting and implementing risk inventory and evaluation (RI&E).
- Advising and working closely with the Works Council/staff representation on the measures to be taken for a proper working conditions policy.
- (Co-)implementing these measures.
- Final responsibility for these tasks lies with the Executive Board. The Executive Board delegates this responsibility as listed in the table below.

Topic	Safety and Security Coordi- nators and Space Management Coordinators	Vitality and Absenteeism Specialist	Health and Safety Service	Employees
SAFETY			А	
Safety calamities	1.07			
Company Emergency Response Team Members, training	UV		A + evaluation	
Emergency Response Plan	UV		А	
Evacuation drills	UV		А	
Fire detection, Fire extinguishers	UV		А	
Escape routes, emergency exits	UV		А	
Emergency lighting	UV		А	
Site security	UV		Α	
Risk management	Chair Business Continuity Team		Α	
Office security				S
Safety stairs, lifts, landings, etc.	UV		А	
Water systems (legionella)	UV		A	
Electrical safety				
Electrical installation	UV		А	
Office equipment	UV (+ ICT)		Α	
HEALTH: PHYSICAL WORKING CONDITIONS				S
Sanitary facilities	UV			
Office cleaning	UV			
Climate control (temp, vent)	UV	Α	А	
Indoor air quality: maintenance of air ducts, filters, etc;				
hazardous subst. office equipment.				
Ergon. layout of workplaces	UV	СО	А	
Noise (acoustics)	UV	А	А	
Lighting (and blinds)	UV	A	А	

Topic	Safety and Security Coordi- nators and Space Management Coordinators	Vitality and Absenteeism Specialist	Health and Safety Service	Employees
HEALTH: PSYCHOSOCIAL WORKING CONDITIONS		СО		S
Absenteeism: reporting and registration		UV	А	
Absenteeism: counselling and reintegration		А	А	
Absenteeism: analysis		UV/A	UV/A	
Policy on preventing (sexual) harassment, bullying, aggression, violence and discrimination		UV/A	UV/A	
Stress prevention management		A/CO	Α	
Prevention activities		A/CO	Α	
Work and rest times		A/CO		
ORGANISATION AND COORDINATION		CO		
Workplace accident reporting	UV			UV
Reporting dangerous situations	UV	Α	Α	S
Accident register	UV	Α		

Explanatory table:

UV = Responsible for implementation; A = Advisory; Co = Coordinating; S = Signalling

Annex II Vitality and Sickness Absence Regulations

Vitality and Sickness Absence Regulations

Basic principles

a.s.r. wants every employee to be and remain healthy and vital at work. We feel responsible for you, so even when you are (temporary) less employable. We offer you support for this in various ways.

Of course, you are also responsible for your own health and vitality. These Vitality and Sickness Absence Regulations include what you can do to prevent absenteeism and what we expect from you prior to and during a period of incapacity for work.

Preventing absence

What you can do to avoid being absent due to illness

Ask yourself the following questions

- How is my health?
- Am I experiencing problems at work (such as too high a workload, not enough challenge or difficulty with customer contacts)?
- How is the relationship with my manager and my colleagues?
- What can I do myself to stay employable?
- Am I experiencing problems in my private situation?

Discuss your employability regularly with your manager so that you can take timely action when necessary. Who can help you with that?

Your manager is your first point of contact to discuss impending absence. Of course, you can always contact the following people and bodies for support.

Manager	Your first point of contact to discuss your employability and impending absence.
HR Advisor <u>hr@asr.nl</u>	Jouw HR adviseur kan je helpen als je er met jouw leidinggevende niet uitkomt en kan je verder adviseren over de mogelijkheden van ondersteuning.
Vitality and Absenteeism Specialist hr.vitaliteit@asr.nl	The Vitality and Absenteeism Specialist can offer you support on staying healthy at work. This could include a workplace inspection, ergonomic aids such as computer screen glasses, adapted mouse and/or an intervention such as company social work, psychological support, etc.
Health and Safety Service (Human Capital Care) 030-7539335 033-4792222	Occupational physician You can engage the Health and Safety Service to visit the occupational physician's open consultation hour where you can discuss your working conditions and health.
	Confidential advisor You can approach the confidential advisor if you are dealing with undesirable behaviour and are unable to discuss this with your manager.
Talent Consultant ontwikkeling@asr.nl	If you have specific questions regarding your career or personal development and need support, please contact one of HR's Talent Consultants.

Staying vital through support from a.s.r.

At a.s.r., we make every effort to keep our employees healthy at work.

- Risk Inventory and Evaluation (RI&E) and Periodic Medical Examination (PMO)
 We periodically identify health and safety risks through a Risk Inventory and Evaluation (RI&E) within our organisation.
 With the plan of action from the RI&E, we can take the right steps at the right time to reduce, and as far as possible, prevent these risks. We also subject all employees to a Periodic Medical Examination (PMO) once every three years. At a.s.r., we call this the VitalityScan. Following the VitalityScan, you will receive individual advice on your health situation, insight into your energy sources and stressors at work and personal traits, so that you can take action, if necessary. For example, scheduling a consultation with the occupational physician or attending a workshop. More information on the RI&E and PMO can be found in the 2021-2025 Health and Safety Policy Plan.
- Vital at Home (VIT)
 We think it is important that you are and stay vital when doing your job, also at home. We call this Vital at Home (VIT) and facilitate a VIT passport. The starting point is that every employee can take control of and actually manage their own vitality and employability. Your manager has a stimulating and supportive role in this.
- You can use the VIT passport to turn the results of the vitality scan into a number of action points you want to work on. It is a low-threshold means of discussing your vitality, employability and personal development with your manager or colleague and to see what options a.s.r. has to offer to help you achieve your goals.
- In Motion From the In Motion platform, we inspire, motivate and mobilise you to get moving and get the best out of yourself. We do this through a varied range within the pillars: My personal development, My work-life balance, My health and My social commitment. On the intranet, we provide information on the different pillars and what you can do yourself. We also adapt the range to current themes such as work stress week or the results of the weekly eMood. a.s.r. does even more to promote employee health and vitality. Sometimes you notice this as an employee and sometimes you don't. For example, we do the following.
- We hold structural consultations between the Executive Board, (team) management, the occupational physician, the HR Advisor and the Vitality and Absenteeism Specialist. During these consultations, the absenteeism process and services provided by the Health and Safety Service are evaluated, trends in absenteeism are discussed and organisational developments within the business unit are discussed. The aim of these consultations is to make absenteeism counselling as effective as possible.
- We encourage a flexible working environment by allowing employees to work independently of time and location, creating an outdoor environment that invites exercise and varied workplaces. For your home workplace, we offer you a workplace check and ask you to attend the information session on healthy working.

If you become ill

If you have mild symptoms

If you have mild symptoms (such as a (nose) cold, cough, sore throat, tightness of the chest and/or fever) and can still work, do so from home. You keep working from home until you are symptom-free. In this way, we prevent the spread of mild infections among colleagues.

If your symptoms worsen and you are no longer able to do your job, call in sick to your manager.

If you are unable to work

If you are unable to work, before your working day starts, call in sick to your manager or his deputy. Being ill does not always have to mean that you are unable to work. If you think you can still do (part of) your work, possibly adjusted, discuss this with your manager. It is also important when you call in sick that you indicate

- Whether you have activities and appointments that need to be transferred and, if so, to whom
- How long you expect to be absent
- How we can reach you (at home) by phone and email
- Whether you have another residential address and, if so, how we can reach you
- Whether an accident was involved involving a potentially liable third party (possibility of recourse)
- Whether you fall under one of the safety net provisions (ill due to pregnancy/birth, organ donation) of the Sickness Benefits Act (but not which safety net provision covers this)

It is important to agree with your manager about your next opportunity for contact.

If you have a disagreement with your manager, you can contact your HR Advisor. This is not a reason to call in sick. Together with the HR Advisor and your manager, you will discuss how to resolve the conflict, possibly with the help of an independent party such as the confidential advisor.

Naturally, we treat the personal information you provide to us confidentially and abide by privacy legislation. Moreover, medical data can only be accessed by the occupational physician. You can read more about privacy in the Handling Personal Data and Personnel Tracking Systems Scheme.

Contactability and contact

During your absence, you must ensure that you can be reached by your manager and the Health and Safety Service. Therefore, it is important that you share with your manager how we can reach you. If we cannot reach you, you lose your right to salary. You will receive written notification of this from us. If you are still unreachable after that, we will stop your salary payment until you contact us as yet.

If you become ill on holiday

If you become ill on holiday, call in sick to your manager as soon as possible. In doing so, it is important to indicate the holiday address where you are staying. It is also important to see a doctor there and request a medical certificate (in German, English or French and drawn up by a doctor). This certificate should show the nature and duration of the illness. Once you are back home, make sure the occupational physician receives the medical certificate. The occupational physician will advise a.s.r. whether these days should be considered days' holiday or sick days.

During your absence

During your absence, you will do everything possible to promote your recovery and resume your work. You and your manager are jointly responsible for returning to work as soon as possible in a responsible way. During the period of absence, we expect you to:

- actively work on your recovery.
- discuss with your manager how (partial) work is possible. The starting point is that you resume your own work (possibly adjusted). If this is not possible, other suitable work within the organisation will be considered.

Who can help you with that?

We do everything we can at a.s.r. to support our employees during a period of absence. Your manager is the first point of contact for this. Of course, you can always contact the following people and bodies for support.

Manager	Your first point of contact during your period of absence (your case manager).
HR Advisor hr@asr.nl	Your HR Advisor can help you if you are unable to work things out with your manager and further advise you on support options.
Vitality and Absenteeism Specialist hr.vitaliteit@asr.nl	The Vitality and Absenteeism Specialist monitors the absenteeism process and can provide support for your recovery. This may include the use of company social work, psychological support and physical counselling. He may also help you with questions on reintegration and the steps to take in case of absence.
Health and Safety Service (Human Capital Care) 030-7539335	Occupational physician/health and safety nurse The occupational physician/health and safety nurse advises on your options for performing (adapted) work, names what limitations you have and makes an estimate of the duration of absence.
a33-4792222	Confidential advisor You can approach the confidential advisor if you are dealing with undesirable behaviour and are unable to discuss this with your manager.

Digital questionnaire

Our Health and Safety Service will send you a digital questionnaire on the third day after you call in sick. You will then have access to a secure portal. Your answers give the Health and Safety Service insight into the background of your sick report and what follow-up steps are needed. This could be direct consultations with the occupational physician, but also contact with a health and safety nurse or the use of additional support.

You must complete the questionnaire in time and fully so that the Health and Safety Service can provide you with counselling quickly and properly during your illness. a.s.r. has no access to your answers or the follow-up steps.

Consultation hour Occupational Physician

You will receive an invitation to a consultation with the occupational physician if the digital questionnaire gives cause to do so, or if you are absent for four weeks and are not expected to recover quickly. The occupational physician will prepare a problem analysis and advice no later than in the sixth week. Until you have fully returned to work, you must visit the occupational physician or the occupational health and safety nurse periodically (every 4-6 weeks) during a consultation hour or have telephone contact with the occupational physician or the health and safety nurse.

Appearing at consultation hours and being available to the Health and Safety Service by phone is mandatory. If you do not attend the consultation hour and/or do not cancel within 24 hours' notice, a.s.r. will receive an invoice. We will offset the amount of this invoice against your salary.

When you are (partly) recovered again

If you can (partially) return to work, report this to your manager. Your manager will ensure that you are reported (partially) recovered.

Your reintegration

We expect you to (partially) resume your work as soon as your medical condition allows. Report this to your manager so that you can make arrangements for your return to work.

No later than eight weeks after having called in sick, you and your manager will draw up a Plan of Action. In it, you set out arrangements about your work resumption. Consider in this context the number of hours you resume work and what tasks you will then be performing. You also record how often you have contact with your manager and describe how your reintegration is progressing. If there are any changes in your medical situation, you will together discuss the impact of these on the Plan of Action and, if necessary, make new arrangements. You do not have to share any medical information with your manager in this context.

If you are still ill after a year, or earlier if necessary, together with your manager, the occupational physician and the Vitality & Absenteeism Specialist you will review whether a return to work is feasible. In most cases, the Vitality & Absenteeism Specialist will engage a specialist for this purpose, who will assess what work is suitable in view of your limitations. We call this specialist an occupational consultant. If the occupational consultant's advice shows that you cannot return to your own work, a joint search will be made for suitable work within a.s.r. (first-track reintegration) and/or with another employer (second-track reintegration). If suitable work is available for you, we expect you to accept it.

Annex 1 contains a gatekeeper calendar in which you can read about the different steps we go through during a reintegration process.

Continued payment of wages

During your period of absence, we will continue to pay your salary (partially) for the first two years of illness, as stipulated in the CBA. We pay your full salary during the first year of illness. In the second year of illness, the amount of your salary depends on how much you work.

- Not working in your second year of illness? Then we will pay you 70% of your current salary.
- Have you resumed work for less than 50% of your originally agreed working hours? Then we will pay you 85% of your salary.
- Have you resumed work for 50% or more of your originally agreed working hours? Then we will pay your full salary.

Holidays during illness

If you want to go on holiday during a period of absence, you need the consent of your manager. Your manager can ask the occupational physician to assess whether there are any medical objections to the holiday.

If there are no medical objections, then you can go on holiday. You take up days' holiday for this.

If you go on holiday in the second year of illness, you are entitled to your full salary. Even if you have not resumed work for more than 50%. To ensure that we can pay your salary in full, you must submit a salary request yourself in case of illness, via the HR Helpdesk.

Disagreements during the absenteeism process

Despite the joint efforts to reintegrate you successfully, it may happen that you do not agree with an occupational physician's advice or your manager's reintegration proposal. In that case, you can call on your HR Advisor or get a second opinion from the Health and Safety Service. You can also request a second opinion from the UWV; this is called an expert opinion.

Second opinion from the Health and Safety Service

You can request a second opinion if you disagree with or doubt the occupational physician's advice following a preventive visit or after a consultation hour during absenteeism counselling.

A second opinion is carried out by another occupational physician. The other occupational physician is from the pool of second opinion occupational physicians established by the OVAL (the branch organisation of Health and Safety Services). You can request it from the occupational physician counselling you. The costs will be borne by a.s.r. If you choose not to request the second opinion through our Health and Safety Service, the costs will be at your own expense.

Expert opinion from the UWV

You can apply for an expert opinion if

- You disagree with a.s.r. about when you will fully resume work
- You feel that the work offered by a.s.r. is not suitable
- You question whether a.s.r. is doing enough to reintegrate you

An expert opinion from the UWV is of an insurance-related nature and is not performed by an occupational physician, but by an insurance company medical advisor of the UWV. The cost of an expert examination is at your own expense unless the UWV agrees with you.

Your manager may decide to suspend your wages after applying for the expert opinion from the UWV until the UWV has issued its opinion. If the UWV agrees with you, you will get this amount back in your next salary payment. If the UWV agrees with a.s.r., it is important that you still follow the occupational physician's advice or accept your manager's reintegration proposal. If you fail to do so, a.s.r. will stop your wages until you cooperate with your reintegration.

Sanctions

These Sickness Absence Regulations tell you what we expect from you prior to and during a period of incapacity for work. It is important that you cooperate with your reintegration during the period of absence, work on your recovery and accept suitable work. This means adhering to arrangements made and the absence regulations. If you fail to do so, we have to impose a sanction. This is part of your reintegration obligations. These sanctions are set out in the Disciplinary Measures Policy and can range from a written warning to dismissal. Also, a.s.r. must impose a wage sanction if you

- do not appear at the consultation hour
- fail to cancel an appointment with the occupational physician in time
- impede your recovery
- cannot be reached
- fail to make sufficient efforts towards your reintegration
- refuse to accept suitable work

A wage sanction means we will suspend or even stop your wages. Before we impose a wage penalty, you will receive a written notice about this.

If you are still unfit for work after two years

If after two years (104 weeks) you are unable to resume your full duties, you can apply for benefits under the WIA (Work and Income (Capacity for Work) Act) with the UWV. The UWV determines whether you are eligible for disability benefits. This assessment includes whether you have actively worked on your recovery and reintegration during your period of absence. a.s.r.'s reintegration efforts are also assessed after two years. If these have been sufficient, your wage payment will stop after the two-year period.

a.s.r. has also taken out a number of disability insurance policies for you. More information on these insurance policies can be found in the Works Council Schemes.

End of the labour agreement

If you cannot fully return to your own job but are still performing work at a.s.r., we will adjust your salary based on the work you perform and the number of hours you work. If there is no structurally suitable work for you at a.s.r. or you are unable to perform work, we may terminate your labour agreement.

Own-risk bearer status

In the Netherlands, each organisation may choose to pay a premium for disability benefits to the UWV or to bear this financial burden itself (own-risk bearer status). a.s.r. has opted for own-risk bearer status. Although a.s.r. bears the financial burden itself, the UWV pays out the disability benefits to you if you are eligible for these benefits. The UWV subsequently invoices these costs to us.

In addition, a.s.r. is responsible for supervising your reintegration for a period of 10 years after 104 weeks of illness. This supervision is provided by a vitality and absenteeism specialist from HR. Even if your labour agreement has ended, we remain responsible for your reintegration as own-risk bearer.

Annex 1: Gatekeeper calendar (schematic)

Period	Action	Who is responsible?
Week 6	Problem analysis	Health and Safety Service
Week 8	Drawing up plan of action	You and your manager
Every 6 weeks	Evaluation plan of action	You and your manager
Week 42	Sending sickness report to UWV	Vitality and Absenteeism Specialist
Week 52	1st year evaluation plan of action	You and your manager
Week 88	Final evaluation of plan of action	You and your manager
Week 88	Drawing up WIA documents	Health and Safety Service and Vitality and
		Absenteeism Specialist
Week 93	Submitting WIA application	You

Annex III Alcohol, Medication and Drugs Regulations (AMD Regulations)

Introduction

a.s.r. wants every employee to be able to be and stay healthy at work, considering both safety and health important. a.s.r. therefore strives for optimal working conditions for all employees working at a.s.r. The aim of AMD regulations is to create a working environment in which employees can function properly and healthily.

Basic principles

Consuming narcotics (mainly alcohol use) is accepted in society, but the transition from normal use to excessive, or even problematic use goes unnoticed. It is important to recognise signs as early as possible, including in the workplace, and that, if necessary, you are referred to adequate assistance as soon as possible.

a.s.r. wants to contribute to a healthy and safe working environment for all its employees. For this reason, guidelines on alcohol, medication and drug use (AMD use) in relation to work are very important and form part of the a.s.r. 2021-2025 Health and Safety Policy Plan. The guidelines are contained in these AMD regulations and cover the following topics:

- Education on AMD use
- Rules on AMD use within a.s.r.
- Counselling and assistance in case of excessive AMD use
- Sanctions and measures in case of excessive AMD use

Providing information

Only 39.4% of the Dutch population meet the alcohol standard of the Health Council of the Netherlands. The alcohol standard is a maximum of one glass of alcohol per day. That means the majority of people drink more glasses per day. Depending on the industry, each company has an average of 21 per cent excessive drinkers, with men drinking at least 20 glasses of alcohol a week or six glasses during an evening in the week. For women, this number is lower, with 14 glasses a week or four during an evening.

Alcohol consumption and other substance use before and during working hours negatively affect performance at work. The breakdown of alcohol per glass is about 1.5 hours. This means that there may still be alcohol in your blood if you have drunk heavily the night before work. For other substance use, the effects are present on average 4-6 hours after intake.

The health effects of alcohol and other substance use are well known. In the short term, this is decrease in reaction time, loss of concentration, disinhibition, headache, fatigue and nausea. The longer-term effects are serious. There is a clear link between excessive substance use and liver damage, cancer, early-onset dementia and mental health problems. At a.s.r., all managers are trained to recognise signs of excessive use in time and to make the subject open to discussion in an appropriate manner. In addition, they know what procedure to follow within a.s.r. if your performance is suboptimal due to excessive use and know how to refer you to appropriate assistance.

Periodically, a.s.r. offers you the opportunity to be informed about

- the influence of alcohol, medication and drugs in the workplace (behaviour),
- ecognising signs of overuse,
- the purpose and content of the AMD regulations,
- how colleagues can best deal with (former) AMD users.

The rules

Using AMD before and during working hours

You are not allowed to consume alcohol or drugs during working hours. You are also not allowed to use alcohol or drugs in your private situation if their effects (possibly) still persist during working hours.

If you are taking medication known to affect judgement or one's ability to act, discuss this with the occupational physician. Working after using this medication is allowed if, after consultation with the occupational physician, it is apparent that the medication does not affect your work (ability). If necessary, your tasks will be adjusted.

Social AMD use

During events organised at a.s.r. premises, you may consume moderate amounts of alcohol. The responsibility for alcohol consumption lies with you. We expect you to ensure that alcohol consumption does not lead to undesirable behaviour and that your behaviour does not have a negative impact on a.s.r.'s reputation.

You are responsible for arranging suitable transport (where you do not drive a vehicle) if you consume more alcohol than the legal limit.

Counselling

As you can read in the Sickness Absence Regulations, we expect you to discuss your reduced employability with your manager in good time so that we can take timely action if necessary. Your manager can then refer you to the occupational physician. With the occupational physician you discuss the reason for the problems regarding your employability, what effect it has on your work and how a.s.r. can support you. Based on the occupational physician's advice, you and your manager draw up a plan.

Who can help you?

If you find it difficult to discuss the problem with your manager, you can contact the following people and bodies for support.

Manager	Your first point of contact to discuss your employability.
HR Advisor <u>hr@asr.nl</u>	Your HR Advisor can help you if you are unable to work things out with your manager and further advise you on support options.
Vitality and Absenteeism Specialist hr.vitaliteit@asr.nl	The Vitality and Absenteeism Specialist can provide you with guidance when looking for internal and external assistance.
Health and Safety Service (Human Capital Care) 030-2996591 033-4792222	Occupational physician You can call in the Health and Safety Service for a visit to the occupational physician's consultation hour where you can discuss the problem and any effects on your work. Together with the occupational physician, you will then arrive at a plan of action. Confidential advisor You can turn to the confidential advisor for general information to identify the issue and help think about a plan of action.
GP	You can refer to your GP for direct referral to the appropriate assistance.

Information	Alcoholics Anonymous http://www.aa-nederland.nl/
	Trimbos Institute https://www.drugsinfo.nl/publiek/nieuwe-site
	Jellinek https://www.jellinek.nl/
	Brijder https://www.brijder.nl/probleem/medicijnverslaving

Detection and procedure

If you suspect that a colleague has an AMD problem

If you suspect that a colleague cannot be optimally deployed, we expect you to discuss this with your manager or one of the persons or bodies mentioned above (see counselling and help). The purpose of this is for us to provide your colleague with adequate support as soon as possible.

Acute abuse

If your manager detects acute abuse of alcohol, medication or drugs by you, he will order you to stop your work immediately and you will be removed from the workplace. Any transport costs to ensure you get home safely will be at your expense and your absence will be deducted from your hours of leave.

You may resume your work only after you have had a talk with your manager (and the HR Advisor, if applicable). Depending on the situation, you will be given a sanction and informed of the consequences in case of repetition (see sanctions and measures). Together with your manager, you will make arrangements to prevent recurrence.

Chronic abuse

If your manager suspects that you have reduced employability at work, your manager may refer you to the occupational physician.

The occupational physician assesses to what extent excessive use of alcohol, medication or drugs systematically interferes with your performance at work and identifies these functional limitations (and possibilities). Based on this, you and your manager will draw up a plan for improvement in your performance. These arrangements will be recorded in writing and reviewed periodically.

Reintegration

If you have been unable to work (over a protracted period) due to excessive substance use or if you have been unable to work due to undergoing treatment, we will carefully supervise your return to work in consultation with the occupational physician. Retention of employment is the main focus in this context.

Your manager will discuss with you to what extent, and in what way, you will together inform your colleagues about your situation.

In each situation we will consider whether returning to your own department and position is desirable, or whether, for example for safety or prevention reasons, a suitable position elsewhere within a.s.r. or outside the organisation is chosen.

Test

The occupational physician has the option of using a test when there are strong suspicions of the effects of substance use at work. Participation in the test is voluntary. You too may request that this test be taken. a.s.r. will not process any data relating to the alcohol and drug test, including whether an alcohol and drug test has taken place.

The occupational physician will refer you to a professional organisation with expertise in this field. Suspected alcohol consumption is tested with an independent breath test. In case of substance use, a saliva test is taken. The results of this test are of course kept confidential. As an employer, we only get feedback from the occupational physician about how fit you are for perform your work.

If you do not agree with the outcome of the test, you can ask for a second opinion.

Sanctions and measures

a.s.r. may impose a number of sanctions and measures on you when abuse of alcohol, medication or drugs is detected and you do not comply with the arrangements made, as described in the Disciplinary Measures Policy. These measures and sanctions can range from a written warning to dismissal.

If the occupational physician assesses that your alcohol or drug use requires professional medical attention, measures will be taken as set out in the Vitality and Sickness Absence Regulations.

Annex IV Undesirable Behaviour Code of Conduct

The Undesirable Behaviour Code of Conduct is part of a.s.r.'s Health and Safety Policy as well as the a.s.r. Code of Conduct. In the Undesirable Behaviour Code of Conduct, we describe what undesirable behaviour is, what policies we have in place and what procedure we follow in case of undesirable behaviour.

The a.s.r. Code of Conduct

The a.s.r. Code of Conduct describes the attitude and behaviour we expect from each other. It provides guidance on how we treat each other, how we serve our customers and how we take responsibility for the environment in which we work and live. One of the basic principles in the a.s.r. Code of Conduct is 'We respect each other and provide a safe, inclusive and professional working environment'. This is elaborated in the a.s.r. Code of Conduct in the following way:

Working together

We work together with customers, business relations and each other on a respectful and equal basis. The joint result takes precedence over the individual's result. The way we work together within a.s.r. is in line with this. We share dilemmas that we encounter in our daily practice. In the context of diversity, equity and inclusion, mutual understanding, recognition and acknowledgement, respect and appreciation are central. In doing so, we give each other room for dialogue and reflection. We give and ask for clear frameworks from which we perform our work and we place responsibilities as low as possible in the organisation. We deliver. We are not a talking shop but we take action.

Diversity, equity and inclusion

At a.s.r., we believe that differences make us stronger and better, and we stand for equal opportunities for all. We strive for an inclusive culture, where differences are recognised, appreciated and indeed made use of. Different perspectives, backgrounds, knowledge and experiences contribute to the realisation of a.s.r.'s objectives and are positively used and deployed in innovative, sustainable solutions for our customers. At a.s.r., all employees are given the room to use their unique talents to achieve our objectives. Within our organisation everyone can be who they are, feel welcome and invited to join in and experience freedom and safety to participate.

Safe working environment

We offer employees a safe and pleasant working environment. We expect employees to contribute to a working environment free from any form of undesirable behaviour or inappropriate conduct, such as sexual harassment, aggression or violence, discrimination, stalking, bullying, abuse of power, insults and verbal defamation.

Undesirable behaviour

Undesirable behaviour consists of direct or indirect behaviour or conduct by colleagues that is disruptive because it threatens or damages physical or mental integrity. Undesirable behaviour is involved as soon as one of the parties involved experiences it as such.

Undesirable behaviour includes:

- Discrimination: making unlawful distinctions based on religion, personal beliefs, political opinion, race, gender, nationality, heterosexuality or homosexuality, civil status, disability or chronic illness, age, working hours or type of contract
- Sexual harassment: any form of undesirable sexually oriented non-verbal, verbal or physical behaviour or requests for sexual favours that has or have the purpose or effect of violating the dignity of a person, in particular when creating an intimidating, hostile, offensive, humiliating or hurtful situation.
- Bullying/mobbing: all forms of intimidating behaviour of a structural nature, by one or more employees (colleagues, managers) directed against an employee or a group of employees who is or are unable to defend him or herself or themselves against this behaviour (such as belittling and humiliating remarks, gossiping, spreading false accusations and exclusion).
- Aggression, violence and intimidation: psychologically or physically harassing, threatening or attacking others under circumstances directly related to the performance of work.

Preventive policy

A safe and pleasant working environment is essential. Preventive policy plays an important role in this context. We put in place a number of measures to prevent undesirable behaviour as much as possible. For example:

- We ask employees upon joining the company to make a commitment through the oath or solemn affirmation to the a.s.r. Code of Conduct and all underlying rules of conduct including the Undesirable Behaviour Code of Conduct and the Diversity, Equity and Inclusion Policy.
- We bring the a.s.r. Code of Conduct, the Diversity, Equity and Inclusion Policy and the Undesirable Behaviour Code of Conduct to employees' attention and we pay much attention to this through embedding these in the Leadership Education programme and promoting dialogue and awareness in the workplace.
- We identify the risks related to undesirable behaviour in the context of the risk inventory and evaluation (RI&E) and the preventive medical examination (the vitality scan).
- We develop, train and mentor employees and managers in:
 - Resilience
 - Making arrangements
 - The narrative of a.s.r. and its significance for our actions in practice
- We provide training for employees in certain jobs on how to deal with aggression and violence.
- We provide information on the policy and risks of undesirable behaviour.
- We pay attention to undesirable behaviour in connection with:
 - Building design
 - Workplace design
 - Job design
 - HR policy
 - Service provision

Procedure in case of undesirable behaviour

If you personally encounter or witness undesirable behaviour in the work situation, discuss this with your immediate manager and/or your manager's manager. If you are unwilling or unable to do so, you can talk to your HR Advisor. Your HR Advisor can further help you and provide guidance to find a solution that is suitable for you.

Confidential advisor

You can also contact an external confidential advisor. a.s.r. has two external confidential advisors, one male and one female. You can approach the confidential advisors for support and advice.

The confidential advisors work at the Health and Safety Service, are independent and bound by professional secrecy. All information you share with the confidential advisor is confidential. The confidential advisor takes action only with your consent.

The duties of the confidential advisor include:

- Providing information on undesirable behaviour
- Initial assistance
- Support and advice on possible solution trajectories
- Support and advice on making a formal complaint
- Referral to internal or external specialists (e.g. mediator, company social worker, etc.)

Complaints procedure

If contact with your manager, your manager's manager and/or the HR Advisor and/or the confidential advisor does not lead to a solution, you can submit a complaint to the Undesirable Behaviour Complaints Committee (email address desk), hereinafter 'the Committee'. The Committee consists of a lawyer from the firm Bezemer and Schubad, a representative of the Security Affairs department, a consultant from Compliance and an employee of the Employment Affairs department within Human Resources who acts as secretary of the Committee.

- You can only file a complaint with the Committee if it has not been possible to reach a solution with your (next senior) manager and/or the HR Advisor and/or the confidential advisor.
- The Committee investigates the incidents mentioned in the complaint and directly related incidents that come to light during the investigation. It is not the Committee's role to independently uncover other wrongdoing, nor to investigate whether persons other than those against whom the complaint is made are guilty of culpable conduct.
- You can be assisted during the procedure, for example by the confidential advisor. Any costs will be at your own expense.
- Filing a complaint must not have (negative) consequences for your position within a.s.r. The same goes for whoever may assist you.
- All information shared as part of the procedure is confidential. The Committee will point this out to all involved at the start of the procedure and, if necessary, during the handling of the complaint. The privacy of the persons involved is protected as much as possible.
- A complaint file will be kept for a maximum of five years after the Committee issues its advice.

The Committee informs the Works Council annually about the number of complaints handled, the nature of the complaints, the nature of the Committee's advice and the number of Committee opinions adopted by the director of the business unit where the person complained against works.

The complaints procedure consists of the following steps.

Submission of the complaint

- You submit your complaint to the Undesirable Behaviour Complaints Committee (email address desk).
- Your complaint must be sufficiently substantiated, concrete and related to your personal employment situation.

 Anonymous complaints will not be considered by the Committee.
- Your complaint states the undesirable behaviour against which the complaint is directed, where this behaviour occurred, the name of the person complained against and the moment or period during which it took place.
- Your complaint also describes the steps you have already taken and mentions whether you are being assisted and, if so, by whom. The Committee will confirm (at any rate within a week) the receipt of your complaint.

Test of admissibility

- The Committee will first test whether your complaint is admissible. The Committee may invite you for an interview in this context
- In any case, your complaint will not be declared admissible in the following situations:
- Your complaint does not concern the undesirable behaviour described in this Code of Conduct.
- The complaint is not within the competence of the Committee.
- You have not worked for a.s.r. for more than a year.
- You have previously filed a complaint about the same incident or have already started another procedure for this purpose (e.g. before the court).
- Your complaint pertains to behaviour that took place more than two years ago, unless the behaviour involves sexual harassment or the Committee sees reason to deal with the complaint anyway.
- Within 2 weeks of receiving the complaint, the Committee will notify you whether the complaint is admissible.
- If the complaint is admissible, the secretary will forward your complaint to both the director of your business unit and the director of the business unit where the person complained against works.

Dealing with the complaint

- The investigation of your complaint will take place in accordance with the Controlling Unethical Behaviour Policy.
- You will have the opportunity to explain your complaint orally. You will be invited for this by the Committee. The person complained against will receive a copy of the complaint and will be invited for an initial interview. The person complained against may have himself assisted in this. Any costs will be for the account of the person complained against.
- The Committee may take cognisance of any documents relevant to the complaint and may decide to invite other persons to provide an explanation.

- The Committee may involve internal and external experts.
- The complainant, the person complained against and/or witnesses will be heard separately.
- Committee hearings are behind closed doors.
- The Committee takes notes (for the purpose of the final advice) during the explanations. No verbatim report will be made.
- The Committee may decide to record the hearings. The recordings will remain in the Committee's possession and will be destroyed after the case is closed.
- Under the secretary's supervision, the parties may inspect the file compiled by the Committee, unless, in the opinion of the Committee, weighty interests oppose this.

The Committee's advice

- Within six weeks of receiving the complaint, the Committee issues a written reasoned advice on the merits of the complaint to the director of the business unit where the person complained against is employed. The Committee can also advise on possible measures to be taken, or aftercare. If any measure is recommended, the Committee assesses it (in accordance with the sanctions policy) with HR Employment Affairs. The director receives the complete file.
- The Committee gives a non-binding advice. The advice is adopted by majority vote. You receive a copy of the advice. Other parties involved will be notified that the Committee has issued the advice.
- If the six-week deadline is not met, you will be informed of this and told how soon the advice can be finalised.

Decision

- Within two weeks of receiving the Committee's advice, the director of the business unit will take a written reasoned decision and send it to you. A copy of this will also be given to the person complained against. If it takes longer, you will be informed of this including the timeframe within which the decision will be made. - The Committee will receive a copy of the decision.

Sanction

- Undesirable behaviour may result in a disciplinary measure in accordance with the Disciplinary Measures Policy.

Annex V Workplace Accidents Guideline

Introduction

An workplace accident is an accident that occurs during or as a result of work for a.s.r., in which an employee is injured. This injury leads to sickness absence, permanent disability or death. Accidents during commuting do not fall under the term "workplace accident" unless they take place with a.s.r. vehicles. This guideline sets out the procedure, duties and responsibilities applicable in the event of a workplace accident.

Accidents

All workplace accidents must be reported by the manager to security so that they can contact the Safety and Security Coordinator (Jan Schouten, phone number (06) 5123 79 83 or, in his absence, Paul de Jong, phone number (06) 5103 95 20 or Cees Jan van Mourik, phone number (06) 5119 07 95) and the Vitality and Absenteeism Specialist (Monique Groen, phone number (06) 511 906 97 or, in her absence, Heleen van der Horst, phone number (06) 83 63 74 60. Security also records the accident in the accident register.

2. Incident reporting

The Safety and Security Coordinator keeps an incident report, recording every report where first aid is required. The circumstances under which the incident took place and its subsequent course are also noted in the incident report. This registration, together with the accident register, is an important source for the RI&E (Risk Inventory and Evaluation) and the corresponding plan of action, the Health and Safety Annual Plan and any recovery of costs from third parties.

3. Labour Inspectorate

Workplace accidents resulting in death, permanent injury or hospitalisation must be reported immediately to the Labour Inspectorate. 'Permanent injury' means, for example, amputation, blindness or chronic physical or traumatic symptoms. It therefore includes psychological injuries, such as burnout or shock damage due to insufficient aftercare after an armed robbery in the company. If the employee returns to work or home immediately after treatment then there is (usually) no serious injury and no need to report to the Labour Inspectorate - Workplace accidents that resulted in death should be reported immediately by telephone via the telephone number 0800-5151. For this purpose, the Ministry of Social Affairs and Employment (SZW) Inspectorate is available by telephone 24/7.

- Other notifiable workplace accidents should be reported directly digitally via the fully completed report form on www.inspectieszw.nl. These can also be reported by telephone at the above number.

This reporting obligation applies not only to in-house employees, but also to persons working under the authority of the employer, such as temporary or seconded workers and to self-employed workers.

If no notification was made where it should have been, a.s.r. can expect to be fined a minimum of \in 4,500 and a maximum of \in 50,000.

4. Insurance

a.s.r. has two insurance policies that may be applicable in the event of a workplace accident.

Liability insurance

Liability insurance: insures a.s.r.'s liability for personal or property damage suffered by third parties. As an employer, a.s.r. is liable for damage suffered if the accident was caused by:

- a.s.r.'s failure to take sufficient safety measures to protect its employees from danger in the workplace. Materials, tools and equipment must be properly maintained, protected and secured and a.s.r. must instruct employees on their use.
- a.s.r.'s failure to adequately ensure that the employee indeed complies with the safety rules.

a.s.r. is not liable if we can prove that sufficient care has been taken to ensure the safety of our employees. This means that a.s.r. has done everything possible to minimise risks to employees. Nor is a.s.r. liable if the safety obligations have been met but an employee has deliberately caused damage (intentional or reckless behaviour). The court will always take into account that, based on his experience, an employee must also assess any risks himself and take the necessary measures.

Group accident insurance

Group accident insurance: insures permanent disability or death due to an accident.

The insurance applies both during and outside working hours. This insurance is subject to the policy conditions agreed with the relevant insurer.

Both insurance policies are underwritten by the Reinsurance department, contact details:

Reinsurance department

Email: loket.corporate.insurance@asr.nl

Group Balance Sheet Management, Reinsurance department Marit van der Boon

Telephone: 033-4642107

Email: <u>marit.van.der.boon@asr.nl</u>

5. Duties and responsibilities in the event of a workplace accident

- Manager/other employee
- Report the accident to security or call the internal emergency number 77777
- Security guard
- Reports the accident to the Safety and Security Coordinator (also Head of BHV) Reports the accident to the Vitality and Absenteeism Specialist
- Records the accident in the accident register
- Safety and Security Coordinator (Services Department)
- Calls in other BHV officers and/or emergency services if necessary
- Coordinates further assistance
- Secures the area around the accident for possible accident investigation
- Takes necessary actions to ensure that any damage to the building or unsafe circumstances is remedied
- Immediately reports the workplace accident to the Labour Inspectorate if necessary
- Records cause, progress and outcome of accident in an incident report
- Determines with the Vitality and Absenteeism Specialist whether the use of victim assistance is necessary
- Informs MT Service about the accident
- Performs various preventive activities to prevent workplace accidents
- Responsible for ensuring safety in the working and living environment of a.s.r.
- Is Head of Company Emergency Response (BHV), responsible for the entire Company Emergency Response organisation
- Company Emergency Response team member
- Provides first aid
- Executes the emergency response plan
- Maintains contact with the Head of BHV on actions carried out
- Vitality and Absenteeism Specialist (HR department)
- Maintains contact, answers questions and supports manager and employee in filing and settling the claim under one or both policies
- Contacts Reinsurance department and handles any insurance questions
- Supervises any absenteeism that follows an accident. Engages the relevant HR Advisor for this purpose
- Together with the Safety and Security Coordinator, determines whether the use of victim assistance (emergency response services at HumanCapitalCare) is necessary. Also engages the relevant HR Advisor for this purpose
- Informs MT Services of the progress of the recovery of the employee concerned

- MT Services (within 0-60 days)
- Contacts the employee concerned, allowing them to tell their story and determine together what can be done to prevent recurrence
- If appropriate, arranges for the delivery of a personal gift (e.g. flowers, surprise basket, a card) Contacts the employee concerned during and/or after his recovery, giving him personal attention and clear after-care from the perspective of good employer practices
- If necessary, contacts the Company Emergency Response team members who performed the first aid so that they too can conclude their personal process.

This document has a Dutch and English version. In the event of a contradiction between the Dutch and English version of if there is doubt about the interpretation of the agreed arrangements in the English version, the Dutch version of the document shall prevail.