

TSM Verification Summary Report

Facility Information

Name of company	De Beers Canada Inc.
Name of facility	Gahcho Kué Mine
Address	Northwest Territories
Country of operation	Canada
Products/metals produced on site	Diamonds
Types of operations included in scope:	
Mining	
Milling	
Smelting	
Hydrometallurgical	
Refining	
Other (please explain)	
Types of infrastructure included in scope:	
Roads	
Rails	
Ports	
Other (please explain)	

Verifier and Verification Information

Verification firm	Blue Heron Environmental
Confirmation that all verifiers involved in the verification are accredited TSM verifiers	Yes
Date(s) of verification activities (dd/mm/yyyy – dd/mm/yyyy)	25/09/2023 — 26/10/2023
Verification period	Year prior to verification end date
Summary of the verification methodology	The verification was conducted in accordance with: • ISO 19011:2018 – Guidelines for Auditing Management Systems • MAC TSM Verification Guide (2021)



	MAC TSM Terms of Reference for Verifiers (2021) Verifiers had the independence to conduct sampling among a given protocol's requirements based on standard auditing practice and professional judgment. Nonstatistical sampling was used during the verification which included using auditor judgment to select a sample representative of the population.
Summary of the verification activities	A summary of the verification activities include:
	 Plan – prepare and submit the verification plan (including the interview schedule). Confirm the selection of the verification team including personnel who previously conducted a site visit.
	Conduct – conduct the opening / closing meeting. Review documents, records and associated TSM self-assessment. Conduct virtual interviews with a sample of relevant personnel / COI.
	 Report – conduct follow-up and associated reporting. Enter verified ratings into the TSM online reporting system.
Was a site visit conducted?	No. However, to facilitate the benefits of site visit activities, Blue Heron utilized personnel who conducted a site visit, over a three-day period from October 30 to November 1, 2021, at the Facility during the 2021 external audit of the Facilities' compliance to the MAC TSM protocols for Tailings Management and Water Stewardship.



Summary of Findings

	Rating	
Criterion	C, B, A, AA or AAA (unless otherwise indicated)	Examples of Evidence Consulted
Biodiversity Conserv	ation Manag	ement
1. Corporate biodiversity conservation commitment, accountability, and communications	AAA	The SHE Policy is signed by the CEO and refers to 'Protection of the Natural World'. Biodiversity is a theme under the pillar of Protecting our Natural World, a key aspect of the Building Forever Plan. Roles, responsibilities, and accountabilities are assigned and further broken down into milestones which have specific responsible people identified. Independent assurance of sustainability data, including publicly reported biodiversity information, was conducted in 2023. The Building Forever Strategy includes a goal to "halt biodiversity loss" and achieve "net positive impacts" by 2030, including a commitment to explore opportunities to partner with other organizations. Completed surveys, research programs and budget allocations also indicate commitment towards biodiversity goals. Facility meets the requirements of Level AAA.
2. Biodiversity conservation planning and implementation	AAA	The Biodiversity Management Plan (BMP) includes an overview of biodiversity baseline programs, including an overview of traditional use and traditional knowledge. Management and monitoring plans are in place including a Wildlife Management Monitoring Plan, Erosion and Sediment Monitoring Plan, and a Vegetation and Soils Monitoring Plan. Potential impacts/risks are assessed. Mitigation measures to minimize impacts to biodiversity are described in the Risk Register and the BMP. New employee or refresher training is provided for operating procedures, including field programs or tasks related to biodiversity. The Strategic Business Plan includes biodiversity related activities. The facility participates with COI and other conservation organizations. The facility has received the MAX Award for Environment, Social and Governance (Nov. 2022). They also received the 2022 MAC TSM Community Engagement Excellence award for engagement with indigenous communities focusing on monitoring and biodiversity. Facility meets the requirements of Level AAA.



3. Biodiversity conservation reporting	AAA	The Building Forever Dashboard reports on biodiversity conservation objectives (% completion). Routine reporting on biodiversity conservation performance includes regulatory and corporate reports as per website links below (i.e.: Annual Wildlife Report, Annual Veg/Soils Report, Annual Air Report, NHX 2022 Annual Plain Language Summaries). Facility meets the requirements of Level AAA. Include link to public disclosure or reference the form of public reporting if no web link available. https://nihadixa.ca/documents/ https://www.debeersgroup.com/~/media/Files/D/De-Beers-Group-V2/documents/sustainability-and-ethics/Progress-Report-2022.pdf https://www.debeersgroup.com/sustainability-and-ethics/building-forever-reports
Climate Change		
Corporate climate change management	AAA	Corporate climate change strategy is demonstrated via the Carbon Neutral Strategy Overview which includes commitments (i.e.: strategic thrusts) across operations. Governance of climate-related risks and opportunities are in place. Corporate commitment that is consistent with the ambition to limit global warming to well below 2°C, is evident via the 'Paris Pledge for Action' and the 'Resilience to a 1.5oC pathway'. Short-, medium- and long-term climate-related risks are assessed and managed. Resilience in climate change scenarios is assessed across financial strength and strategic robustness measures. Reference to allocating capital includes carbon pricing considerations. Corporate commitments include contribution to Scope 3 GHG emission reductions as per commitments to decarbonizing value chains. Carbon pricing is applicable to Canada. Climate change materials are publicly reported. Facility meets the requirements of Level AAA.
2. Facility climate change management	AAA	An energy and GHG emissions management system is established. Data collection and monitoring is conducted, and roles and responsibilities are defined. Fuel consumption and emissions production is considered in business planning (i.e.: plans for low carbon synthetic fuel trials). Annual management reviews are conducted as per the certified ISO 14001 requirements and integrated SHE reviews. A Climate Risk and Adaptation Assessment was conducted in 2022. The Risk Register identifies risks associated with climate change and strategic business planning incorporates adaptation measures. Relevant employees are assigned key performance indicators. COI considerations are evident when considering climate



		impact assessments and designing adaptation measures. Facility meets the requirements of Level AAA.	
3. Facility performance targets and reporting	AA	De Beers has set a corporate target to be carbon neutral across their operations by 2030. The integrated SHE Management Review (2022) also highlights emission reduction targets. Completed energy reduction projects were evident which included energy or CO2 savings validation. 'Building Forever' updates indicate positive progress towards performance targets. Independent assurance of sustainability data, including Scope 1 and 2 GHG emissions, was conducted. A Feedback Form is publicly available for the public to provide feedback. Facility meets the requirements of Level AA.	
		Include link to public disclosure or reference the form of public reporting if no web link available	
		https://www.debeersgroup.com/~/media/Files/D/De-Beers-Group- V2/documents/sustainability-and-ethics/Progress-Report-2022.pdf	
		https://www.debeersgroup.com/sustainability-and-ethics/building-forever-reports	
Crisis Management a	nd Commu	nications Planning - CORPORATE (YES or NO)	
1. Crisis Management and Communications Preparedness	Yes	Examples of evidence consulted include the Corporate Crisis Management Plan (CMP), GK Risk Register, Key Stakeholder Contact List, and the OP001 Administration of Controlled Documents. Corporate risks were determined during the development of the CMP. The Corporate CMP is controlled under the document control system. Facility meets all requirements for this indicator.	
2. Review	Yes	The CMP is reviewed and updated when there is a change of personnel associated with the CMP, when there is a change in business (i.e. new mine), and annually. Updates are captured in the Revision Control Sheet. The mechanism to notify the Crisis Management Team is tested at least twice per year. The CMP is available online to all relevant corporate employees. Facility meets all requirements for this indicator.	
3. Training	Yes	Tabletop drills are conducted annually. A mock tabletop exercise (Plane Crash) was held in August 2022. A mock scenario (Dyke Breach) was held in August 2023. A full-crisis simulation, with mutual aid involvement, (Arctic Fox) occurred Sept 2023. Facility meets all requirements for this indicator.	
Crisis Management a	Crisis Management and Communications Planning - FACILITY (YES or NO)		
Crisis Management and	Yes	Examples of evidence consulted include the Corporate Crisis Management Plan (CMP), GK Risk Register, and the Emergency Preparedness and Response Plan	



Communications Preparedness		(EPRP). Risks have been identified in the Risk Register which also includes reference to current controls. The CMP is used at both the corporate and facility level. The CMP has been reviewed to ensure facility level criteria are incorporated. A local Emergency Management Team (EMT) has been established and is listed in the CMP. Media contacts and log sheets are available. Mutual aid agreements are in place with emergency responders. Annual mutual aid events (mock exercises) with emergency responders are conducted. Facility meets all requirements for this indicator.
2. Review	Yes	The CMP is reviewed and updated when there is a change of personnel associated with the CMP, when there is a change in business (i.e. new mine), and annually. Updates are captured in the Revision Control Sheet. The CMP is provided to new members for review during onboarding as part of training, which all emergency team members must take. As informed during interviews, employees are notified in the event of a crisis or emergency. For off-site staff, notifications are made primarily through email (example emails were provided). Facility meets all requirements for this indicator.
3. Training	Yes	Tabletop drills are conducted annually. A mock tabletop exercise (Plane Crash) was held in August 2022. A mock scenario (Dyke Breach) was held in August 2023. A full-crisis simulation, with mutual aid involvement, (Arctic Fox) occurred Sept 2023. These mock scenarios involved both corporate and facility employees as per the CMP and EPRP. Facility meets all requirements for this indicator.
Indigenous and Com	munity Rela	tionships
1. Community of Interest (COI) Identification	AAA	Communities of Interest (COI) are identified and documented using Stakeholder Analysis. A Stakeholder Engagement Plan and External Outreach Policy is in place to support COI identification, engagement, and periodic reviews for continual improvement. Facility meets the requirements of Level AAA.
2. Effective COI Engagement and Dialogue	AAA	Engagement and dialogue processes are established with input from COI as per the Stakeholder Engagement Plan. Assistance is provided to ensure COI can participate when engagements require in-person meetings, including travel compensation. Key communications are written in local languages of applicable COI. The facility is engaged in joint decision making on matters that affect the COI. Facility meets the requirements of Level AAA.



3. Effective Indigenous Engagement and Dialogue	AAA	Demonstrated senior management commitment to indigenous engagement is evident as per the Indigenous Peoples Strategy and Cultural Heritage Management Plan. Facility-wide education and awareness on Indigenous topics occurs and is updated as per the Cultural Heritage Workplan. On-site cultural activities are supported by the facility. Facility meets the requirements of Level AAA.
4. Community Impact and Benefit Management	AAA	Demonstrated senior management commitment is evident as per the Social and Human Rights Impact and Risk Analysis (SHIRA). Control measures are in place to reduce or mitigate potential adverse impacts including management plans, engagement programs, agreements, and commitments. Effectiveness of actions are reviewed in collaboration with COI as per Impact and Benefit Agreement (IBA) Committee meeting minutes and agendas. Facility meets the requirements of Level AAA.
5. COI Response Mechanism	AAA	The External Complaints and Grievances Policy indicates how COI members can voice concerns and receive feedback. A public feedback mechanism is also available on the De Beers Group website. As confirmed via COI interviews, response mechanisms are also accessible through committee meetings, email, and telephone with De Beers employees. Issues and concerns are tracked. As negotiated by COI's, dispute and escalation clauses are also integrated into IBA's. Facility meets the requirements of Level AAA.
Preventing of Child a	nd Forced L	abour (Indicate YES or NO)
1. Preventing Forced Labour	Yes	The De Beers Group Workplace Human Rights Policy states "We do not tolerate any form of modern slavery including forced or bonded labour". The Policy also includes a commitment to avoid practices that may result in forced labour. The site is not in a high-risk jurisdiction; however, there are processes in place to mitigate potential issues. The Policy applies to colleagues including external contractors, consultants, agency temps and directors. Facility meets all requirements for this indicator.
2. Preventing Child Labour	Yes	The De Beers Group Workplace Human Rights Policy states "We prohibit employing persons who are under the age of 15". The Policy also prohibits employing persons under the age of 18 from engaging in work that is or may be hazardous to their health, safety, or morals. The Policy applies to colleagues including external contractors, consultants, agency temps and directors. Facility meets all requirements for this indicator.



Safety and Health		
Commitments and Accountability	AAA	The Safety and Health Management System is certified to the ISO 45001:2018 Standard (Occupational health and safety management systems – Requirements with guidance for use). Commitments are consistent with the intent of the MAC Safety and Health Framework. Facility meets the requirements of Level AAA.
2. Planning and Implementation	AAA	The Safety and Health Management System is documented and implemented in accordance with the ISO 45001:2018 Standard (Occupational health and safety management systems – Requirements with guidance for use). A risk register is utilized to identify especially hazardous tasks. Associated critical controls are identified with reference to bowtie analysis. Facility meets the requirements of Level AAA.
3. Training, Behaviour and Culture	AAA	Training, behaviour and culture requirements are in alignment with the ISO 45001:2018 Standard (Occupational health and safety management systems – Requirements with guidance for use). Management visibly demonstrates commitments with one-on-one interactions via the Visible Felt Leadership Program. Trainer effectiveness assessments are completed. Facility meets the requirements of Level AAA.
4. Monitoring and Reporting	AAA	Monitoring and reporting requirements are in alignment with the ISO 45001:2018 Standard (Occupational health and safety management systems – Requirements with guidance for use). An internal Safety, Health and Environmental (SHE) Management System Audit was conducted in 2023. Performance is communicated to the public as per the link below. Facility meets the requirements of Level AAA.
		Include link to public disclosure or reference the form of public reporting if no web link available
		https://canada.debeersgroup.com/~/media/Files/D/De-Beers- Canada/documents/2022%20SEA-SAR%20Report%20SM.pdf
5. Performance	AA	Performance requirements are in alignment with the ISO 45001:2018 Standard (Occupational health and safety management systems – Requirements with guidance for use) as per the BSI ISO 45001 certificate of registration OHS 709349. Safety and health performance is benchmarked against peers. One fatality, which occurred during September 2022, was reported during the 2022 TSM self-assessment reporting year. Facility meets the requirements of Level AA.



Tailings Management		
1. Tailings management policy and commitment	AAA	The Anglo American (AA) "Group Processed Mineral Residue Facilities (MRF) and Water Management Policy" applies to the facility. The Operation, Maintenance and Surveillance (OMS) Manual for Tailings was prepared in accordance with the Mining Association of Canada (MAC) guidelines. Using the Table of Conformance (2019 & 2022), an internal audit was conducted during 2023 and found that Level A requirements for this indicator were met. An external audit was conducted during 2021 with the audit report issued during the beginning of 2022. The external audit determined that Level A requirements for this indicator were met. The external audit included an evaluation of the effectiveness of the policy and commitments. With the completion of internal and external audits, concluding that Level A requirements are met and effective, it has been determined that the Facility meets the requirements of Level AAA for this indicator.
2. Assigned accountability and responsibility for tailings management	AAA	Accountability and responsibility for tailings management are defined and documented in the OMS Manual. The AA MRF Policy also defines management and business unit roles. Using the Table of Conformance (2019 & 2022), an internal audit was conducted during 2023 and found that Level A requirements for this indicator were met. An external audit was conducted during 2021 with the audit report issued during the beginning of 2022. The external audit determined that Level A requirements for this indicator were met. The external audit included an evaluation of Level AAA requirements for this indicator. With the completion of internal and external audits, concluding that Level A requirements are met and effective, it has been determined that the Facility meets the requirements of Level AAA for this indicator.
3. Tailings management system and emergency preparedness	AAA	The tailings management system, emergency response plans (ERPs) and emergency preparedness plans (EPPs) were developed in conformance with Version 3.2 of the Tailings Guide. Using the Table of Conformance (2019 & 2022), an internal audit was conducted during 2023 and found that Level A requirements for this indicator were met. An external audit was conducted during 2021 with the audit report issued during the beginning of 2022. The external audit determined that Level A requirements for this indicator were met. The external audit included an evaluation of Level AAA requirements for this indicator. With the completion of internal and external audits, concluding that Level A requirements are met and effective, it has been



		determined that the Facility meets the requirements of Level AAA for this indicator.
4. Operation, maintenance, and surveillance		Using the Table of Conformance (2019 & 2022), an internal audit was conducted during 2023 and determined that the OMS manual was developed and implemented for the tailings facility in conformance with Version 2.1 of the OMS Guide. An external audit was conducted during 2021 with the audit report issued during the beginning of 2022. The external audit determined that the OMS manual was developed and implemented for the tailings facility in conformance with Version 2.1 of the OMS Guide. The external audit included an evaluation of the effectiveness of the development and implementation of the OMS Manual. With the completion of internal and external audits, concluding that Level A requirements are met and effective, it has been determined that the Facility meets the requirements of Level AAA for this indicator.
5. Annual tailings management review	AAA	Annual tailings management review meetings are conducted and documented. A Department Operating Procedure (DOP) titled 'Tailings Management Annual Review' was created to facilitate reviews of tailings management in conformance with Version 3.2 of the Tailings Guide. Using the Table of Conformance (2019 & 2022), an internal audit was conducted during 2023 and determined that the facility conducts reviews of tailings management on an annual basis and in conformance with Version 3.2 of the Tailings Guide. An external audit was conducted during 2021 with the audit report issued during the beginning of 2022. The external audit determined that Level A requirements for this indicator were met apart from one non-conformance. During the verification, it was confirmed that the non-conformance was addressed. The external audit included an evaluation of the effectiveness of the annual tailings management reviews. Facility meets the requirements of Level AAA for this indicator.
Water Stewardship		
1. Water Governance	AAA	Demonstrated senior management commitments are in place as per the SHE Policy. The Operational Water Management Plan documents how non-conformances are tracked and corrected. Roles, responsibilities, and accountabilities are defined. The Risk Register includes water risks and associated opportunities that are included in the budget process. An internal audit (2023) and external audit (2021) were conducted in accordance with MAC TSM requirements required for this indicator.



2. Operational Water Management	AAA	Processes are established to monitor the facility's water performance including utilization of a Hydrology Dashboard. Updates to the water balance are conducted with the most recent recalibration conducted in 2023. The Risk Register includes water-related risks and associated controls. Water quality and quantity parameters are also driven by regulatory requirements. Control measures are monitored for effectiveness as per Water Management Committee feedback. An internal audit was conducted in (2023) and external audit (2021) were conducted in accordance with MAC TSM requirements required for this indicator.
3. Watershed-scale Planning	AAA	Responsibility for watershed-scale planning is designated in the OMS Manual. Cumulative effects associated with operational water management practices were assessed, as per the Environmental Impact Statement (EIS), and includes an ongoing cumulative impact monitoring program. As confirmed during COI interviews, the facility communicates with relevant water-related COI regarding operational water management practices and associated watershed-related risks. Watershed goals are set and tracked as per regulatory requirements and the Aquatic Effects Monitoring Program. Facility meets the requirements of Level AAA.
4. Water Reporting and Performance	AAA	Water performance objectives and targets have been established and are regularly tracked and reported to senior management. Public reporting is also conducted via corporate and regulatory requirements. Independent assurance of sustainability data, including publicly reported water information, was conducted in 2023. Facility meets the requirements of Level AAA. Include link to public disclosure or reference the form of public reporting if no web link available https://canada.debeersgroup.com/~/media/Files/D/De-Beers-Group-V2/documents/sustainability-and-ethics/2022/Building Forever Our 2022 Sustainability Report.pdf http://registry.mvlwb.ca/Documents/MV2005L2-0015/MV2021D0009%20-%20MV2005L2-0015%20-%20De%20Beers%20Gahcho%20Kue%20-%20Mar%2031_23.pdf



Statement of Verification

Statement of Verification	
The external verification was conducted in accordance with the <i>Terms of Reference</i> for <i>Verifiers</i> and, accordingly, consisted primarily of interviews, data analysis, and examination (on a sample basis) of other evidence relevant to management's assertion of conformance to the requirements of the TSM performance indicators.	☐ The external verification was conducted in accordance with the TSM Verifier Terms of Reference.
The scores indicated in this report are verified as being accurate based on the evidence reviewed during the external verification of this facility.	☐ The scores in this report are considered accurate based on this verification.
Limitations	A site visit was not conducted as part of the verification process. However, to facilitate the benefits of site visit activities, Blue Heron utilized personnel who conducted a site visit, over a three-day period from October 30 to November 1, 2021, during the 2021 external audit. TSM protocols provide an indicator of the level of implementation of practices as part of the TSM initiative. As a result, the following limitations apply:
	 Information / data was not reviewed for accuracy or conformance with other applicable requirements outside of this TSM Verification. Practices and associated management systems were not evaluated for effectiveness.
Additional comments	N/A
Has an additional assurance statement been provided by the verifier?	No
Name of lead verifier	Laura Wareham
Date of statement of verification	December 15, 2023
Signature of lead verifier	Airobadas.