Chair & CEO Remarks

Annual General Meeting of Oneview Healthcare Plc

25 November 2026

Chair's Remarks

Good morning ladies and gentlemen. My name is Barbara Nelson and I am very happy to welcome you as Chair to the 2026 Annual General Meeting of Oneview Healthcare plc.

In accordance with the Company's constitution, I have been appointed by the directors to act as Chair in respect of this AGM.

Let me begin by introducing my fellow Board members.

In Oneview's Dublin boardroom are:

- Joe Rooney, Non Executive Director;
- Darragh Lyons, Chief Financial Officer and Executive Director;

As well as

- Toni Pettit, Company Secretary;
- Charles Carroll and Dillon Harris from A&L Goodbody;
- Adam Perth and Eamon Dillon from KPMG

We are joined on the line by James Fitter, Chief Executive Officer and Executive Director.

As laid out in the Notice of the Meeting, we have asked people not in a position to attend the physical AGM to instead avail themselves of the established proxy voting services in order for your vote to count, and to take the opportunity to submit in advance any questions you would like addressed at this AGM, and to use the teleconferencing facility to listen to the business of the meeting.

The time is now just after 9.00 a.m. in Dublin. Under Article 54 of the Company's constitution, the quorum for this meeting is 1 member. As the Chair has been appointed proxy of CHESS Depositary Nominees Proprietary Limited, the Company's sole registered shareholder, I can confirm that the quorum has been validly constituted, that the notice of meeting has been provided for the requisite period and that the meeting may proceed to business.

Voting will then take place by our statutory shareholder, through me as Chair of this meeting, in accordance with the wishes of our CUFS holders as set out in duly completed, returned and verified Voting Instruction Forms received by the Company in the manner outlined in the Notice of Meeting.

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The purpose of today's meeting is to consider the resolutions set out in the Notice of AGM sent to shareholders on 30 October 2026, but first I hand you over to James Fitter who would like to spend a few minutes reviewing the progress made since the last AGM and give a business update.

Following that update, I will move to shareholder questions and the formal business of the meeting.

[See CEO Remarks below]

Thank you, James.

QUESTIONS

Shareholders were invited to submit questions prior to the commencement of this meeting by email to the Company Secretary, together with evidence of their shareholding. As of 9.00 am Dublin Time on 23 November 2026, the final date for receipt of questions, no questions have been received.

I would remind all shareholders present that the purpose of today's meeting is specifically to consider the business of the resolutions contained in the notice and therefore questions are limited to these matters.

I will now pause to take any questions from shareholders present with us today on the resolutions before the meeting.

Please address your question to me and if I cannot answer it, I will direct it as appropriate to one of my colleagues.

If there are any detailed supplementary questions, please direct them in writing to the Company Secretary at the Company's registered office as per the investor relations section of the Company's website or by email to cosec@oneviewhealthcare.com.

Are there any questions from shareholders on the resolutions before the meeting today at this time?

[Moderator to put forward any questions coming through on the call]

If there are no questions, I will now move to the formal business of the meeting.

I will take the Notice of Meeting issued to members on 30 October 2026, including the details of each of the resolutions, as read.

VOTING PROCEDURES

There are 22 resolutions to be considered at this AGM, full details of which are set out in the Notice of the Meeting. These resolutions shall be voted upon by those shareholders present today in person or by proxy, subject to applicable voting exclusions as set out in the Notice of Meeting.

In accordance with Article 61 of the Company's constitution, as Chair of this meeting I hereby demand voting on the resolutions by poll.

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Of the 22 resolutions being voted upon today, 18 are ordinary resolutions which, in order to be passed, must be approved by a majority of 50% (plus one vote) of those voting. These ordinary resolutions are identified in the Notice of Meeting.

Resolutions 19, 20, 21 and 22 are special resolutions which, in order to be passed, must be approved by a majority of not less than 75% of those voting. The special resolutions are identified in the Notice of Meeting.

Every ordinary shareholder (or CUFS holder present as a Nominated Proxy of CDN) shall have one vote for every ordinary share (or CUFS) of which he or she is the holder.

RESOLUTIONS

As Chair of the meeting, I have been appointed as proxy in respect of 486,812,316 shares representing approximately 57.99% of the issued share capital. No other proxies have been appointed and there are no other shareholders entitled to vote.

The proxy vote instructions delivered have been verified by the registrars, Computershare (who have also had regard to applicable voting exclusions where relevant), by reference to the register of members, the CUFS register and a list of authenticated Voting Instruction Forms received by the Company.

I now cast the votes in respect of those 486,812,316 shares in accordance with the proxy vote instructions (and having regard to the applicable voting exclusions).

No further votes are to be cast and I now declare the poll closed.

I confirm that all of the resolutions before the meeting have been passed by in excess of 87.98% of the votes cast.

The full result of the poll, including the total of the votes cast for and against the resolutions and the abstentions, will be published immediately through the ASX and on the Company website tomorrow.

CLOSE OF BUSINESS

That concludes the business of the meeting and I would like to thank you all for your attendance today.

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CEO's Remarks

Good morning, fellow shareholders, and thank you for joining us.

If I had to sum up 2026 in a single phrase, it would be "a tale of two halves". The first half was one of the most difficult markets I can remember for innovative bedside technology in the United States. The second half has delivered a record period of new customer adoption for Oneview. This morning I want to explain what happened, how we responded, and why I believe Oneview is now better positioned commercially than at any time in recent memory.

Two forces shaped the first half of our year. The first was the arrival of EpicTV. Epic, the record of care for more than half of all acute care hospital beds in the US, brought its own bedside television application, MyChart Bedside TV, to market. With a large share of our pipeline inside Epic-centric health systems, opportunities that had been progressing well simply stopped while those organisations evaluated the new offering. Nobody had chosen a competitor and the need had not gone away; it was a pause in procurement, not a loss of demand.

The second force was financial. At this meeting last year, I said we were closely watching changes to Medicaid funding and would be ready to adapt. In 2026, conditions changed. The One Big Beautiful Bill Act is expected to reduce federal Medicaid spending by around US$1 trillion over the next decade. Although many measures phase in over several years, hospitals moved early to protect their balance sheets. Capital committees became markedly more cautious, discretionary technology projects were deferred, and approval cycles for larger platform projects lengthened. Combined with the EpicTV pause, this contributed to lower deployment activity and hardware revenue in the first half.

Rather than fight EpicTV, we decided to embrace it. EpicTV is a software application. To run reliably in a hospital it still needs healthcare-grade hardware, device management at fleet scale, content services, installation and round-the-clock support, which is precisely what Oneview has been doing for fifteen years. So in May, following certification by Epic, we launched Bedside Hub, which hosts Epic MyChart Bedside TV on Oneview's healthcare-grade hardware with cloud-based device management. It gives Epic-centric health systems a simpler, lower-cost and faster-to-deploy entry point to Oneview, and in a cost-constrained funding environment that combination carries more weight than ever.

The market's response has exceeded our expectations:

- Within weeks of certification, nine of our sixteen active EpicTV opportunities were previously stalled deals that had become active again.
- In August, we were invited for the first time to Epic's annual User Group Meeting in Madison, Wisconsin, where we met with more than 50 hospital organisations.
- Most importantly, our sales cycle has shortened dramatically. Two of our first four Bedside Hub customers went from first contact to signed agreement in less than three months, and one of our most recent wins took less than two. For a company that has historically measured sales cycles in years, that is a profound change.

I am delighted to report that the third quarter was a record quarter for new customer adoption at Oneview, and that momentum has carried into the fourth quarter:

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- In Q3, we signed our first four Bedside Hub agreements, with Albany Med Health System in New York, Baptist Health in Kentucky and southern Indiana, Jupiter Medical Center in Florida and Shannon Health in Texas. Together these organisations represent almost 5,000 beds, and because our agreements cover initial deployments, we have a meaningful opportunity to expand over time.
- We also welcomed two new Care Experience Platform customers, Martin Luther King, Jr. Community Hospital in South Los Angeles and Northeastern Vermont Regional Hospital, showing that our full platform continues to resonate with hospitals of every size.
- In our second quarter update, we targeted three to four new Bedside Hub customers in the second half. We now have six, and eight new customer logos in total since July, within the range of eight to ten for the year that we set out in October.

Winning new customers is only the beginning. The real value in our business is created over the life of a customer relationship, and this year we renewed agreements with two of our longest-standing customers:

- UCSF Health in the United States, with a two-year renewal through October 2028.
- Bumrungrad International Hospital in Thailand, with an extension through February 2029. Bumrungrad has also selected Oneview as its preferred technology provider for its planned new Phuket facility, subject to final agreement.

Across our broader renewal programme, we secured price increases of 3% to 18% while maintaining high customer retention. The UCSF and Bumrungrad relationships began in 2014 and 2016, respectively, and the fact that these organisations continue to choose Oneview a decade or more later says a great deal about the enduring nature of these partnerships and the value we have created together.

For me, this is the core of the Oneview investment thesis. We win a customer, we deliver value, and we expand our footprint and our pricing over time. Every new logo is a platform for expansion and every renewal on improved terms strengthens the quality and visibility of our recurring revenue. It is the same playbook we intend to run with each of our new Bedside Hub customers.

Turning to our financial performance, our first half results showed real progress in the quality of our revenue and in our cost discipline, despite the market headwinds:

- Recurring revenue grew 13% to €4.3 million, the largest increase we have delivered, and represented 78% of total revenue, up from 60% a year earlier. Total revenue of €5.5 million was 14% lower, reflecting one-off hardware sales in the prior period and lower deployment activity.
- Gross margin increased nine points to 70%, holding gross profit flat on lower revenue.
- Cash operating expenses fell 6% to €7.8 million, and our operating EBITDA loss improved by 11%.
- Net cash used in operating activities fell 15% to €4.1 million.

In March, we completed a two-tranche institutional placement raising A$19 million (approximately €11.4 million). Tranche 1 of A$12 million settled in March, and Tranche 2 of A$7 million is before you today for approval. I want to thank all of the investors who supported the placement.

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Underpinning our commercial progress is our continued commitment to innovation. In 2026, several of our most important product initiatives moved from development into deployment:

- Our redesigned patient user interface, the largest experience transformation in our company's history, reached its first customer deployment last week with very positive feedback. A second deployment with a major US customer is underway, with a phased migration of existing customers planned during 2027.
- Ovie, our AI-powered care assistant, has evolved into an agentic AI platform capable of taking action on behalf of patients and staff. Our pilot with a major US health system formally commenced this month, and we are treating it as a commercial evidence programme, measuring resolved requests, escalation quality and staff time saved. In healthcare, trust in AI will be earned with evidence.
- We have also embraced AI in how we build our own products. Approximately 85% of our code is now written by AI agents, with a human reviewing every change, and we are delivering features 1.7 times faster, all within our ISO 42001-certified AI management system.

Outside the US, the pressure we experienced in the Australian private hospital sector last year has largely abated. Our ANZ pipeline has grown from three active bids in January to eight at the half year, and NSW Health's adoption of Epic may create fresh demand for Bedside Hub in Australia in 2027. In Asia, the Bumrungrad renewal underlines the strength of that relationship, and we continue to pursue opportunities in the Middle East.

I am confident about Oneview's strategic direction and our outlook for 2027. Our priorities are clear:

- Converting contracts into live beds. Our number one operational priority is to deploy our new Bedside Hub customers quickly and cleanly, deliver the Inova expansion, and convert our contracted pipeline into live, revenue-generating endpoints.
- Growing recurring revenue on better terms, through appropriate pricing and long-duration contracts.
- Evidence-led innovation, completing the Ovie pilot and migrating our customers to the new patient experience.
- Financial discipline, managing our cost base carefully and making further progress on our path to cash-flow breakeven.

We are under no illusions that US hospital finances will remain under pressure as the Medicaid changes take full effect. But we have built a model designed to win in exactly that environment: a lower-cost entry point that leverages a health system's existing investment in Epic, a proven full platform for those who want to go further, and the operational capability to support both at scale.

In conclusion, Oneview enters 2027 with confidence and optimism. Confident, because we met the most challenging market conditions in recent memory with a clear strategic response that is already delivering record customer adoption. Optimistic, because the trends towards digital engagement, virtual care, AI and patient-centred care play to Oneview's strengths, and because Epic's arrival at the bedside has expanded, rather than diminished, the opportunity in front of us.

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To our shareholders, thank you sincerely for your continued support in a year that has not been easy for smaller technology companies. Thank you also to our Board for their guidance and counsel, including Michael Dowling, who has brought invaluable health system perspective in his first year with us, and to our partners, particularly Baxter and Epic, and our customers for their collaboration and trust.

Most importantly, thank you to the entire Oneview team. In a year that tested our resilience, you responded with energy, creativity and commitment. Delivering six new logos and two major contract renewals this autumn was an outstanding achievement. Together, we are delivering technology that truly makes a difference in people's lives at their most vulnerable moments, and that mission will continue to drive our success for many years to come.

Thank you.

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