Sustainability Report 2019

ALBERT EINSTEIN
SOCIEDADE BENEFICENTE ISRAELITA BRASILEIRA

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SUMMARY

SIDNEY KLAJNER
President of *Sociedade Beneficente Israelita Brasileira Albert Einstein*

WE ARE COMMITTED TO THE HEALTH OF OUR SOCIETY

WHAT IS SUSTAINABILITY MANAGEMENT LIKE AT EINSTEIN AND WHAT ARE ITS FOCUSES?

Sidney Klajner: Since its foundation, Einstein has had a commitment to the health of Brazilian society and seeks to generate value for the various groups it has a relationship with. We are attentive to its needs and to our purpose of minimizing the impact of operations and extend its beneficial effects. Several of these actions are addressed in this report, but I would like to highlight some aspects related to the context where we are active.

When talking about sustainability in the field of health, it is important to consider the challenges of this sector in Brazil and in the world. One aspect is a growing population, another is its aging. Today, the elderly account for 15% of the world's population, and they are estimated to become 30% by 2030.

It is necessary to associate quality of life with these longevity gains. We know that 85% of the elderly in the world have at least one chronic disease. In the general population, it is estimated that 40 million people die annually from these types of diseases. All this increases the demand for services. There is also the issue of waste: unnecessary procedures, overlapping efforts, lack of coordination in care, failures in prevention, and other examples that result in spending, which could, and should, be avoided so that the system can meet the real needs of the population.

These challenges must be taken into account to build solutions that expand access, improve treatments and diagnostics, and make use of the most efficient resources, and thus strengthen the healthcare system.

HOW IS THIS THEME DEALT WITH AT EINSTEIN?

SK: This is a constant effort and is connected to our purpose of making every citizen's life healthier through our initiatives, whether in the area of assistance, teaching, research, in the search for innovation or in social responsibility projects.

IT IS NOT ENOUGH TO USE A NEW TOOL, DATABASE OR MEANS OF COMMUNICATION; IT IS NECESSARY TO THINK ABOUT HEALTH CARE BASED ON THIS NEW REALITY. THE POSSIBILITIES ARE HUGE, AND WE SEE THIS AT EINSTEIN WITH THE ADVANCES OF A DIGITAL CULTURE IN ALL ACTIVITIES.

Since 2013, Einstein has adopted the *Triple Aim* model, proposed by the Institute for Healthcare Improvement (IHI). The idea of the Triple Aim model helped systematize efforts in the search for solutions with three elements in mind. The first is population health management, which focuses on promoting the health of a given population, defined not by geographical aspects, but by its characteristics. An example could be the population of diabetics. The second is the quality and safety of the service provided, considering in a global way the care experience from the patient's point of view. Finally, there is the cost *per capita*: the less waste there is, the more people can be cared for with more quality.

It is worth noting that an important part of Einstein's care is performed in the Unified Public Healthcare System (SUS), which also benefits from this approach.

HOW DOES EINSTEIN PERFORM IN THE SUS SYSTEM?

SK: Through partnerships and a management contract with the city of São Paulo, Einstein manages and operates 26 units made up of hospitals, outpatient medical assistance units (AMA), basic health units (UBS), urgent care units (UPA) and other public healthcare facilities. In several indicators, such as consultations, emergency care and deliveries, the volume of implementation in the public system exceeds that of the supplementary system.

Einstein also participates in PROADI-SUS, a program that supports the institutional development of the unified public healthcare system. In 2019, there were 38 projects in progress, aligned with the National Healthcare Plan goals, in the areas of evaluation and incorporation of technology, training of human resources, public interest research, management support, provision of services and healthcare assistance.

CAN YOU CITE EXAMPLES OF ACTIONS OR PROJECTS THAT ARE GUIDED BY THE TRIPLE AIM?

SK: Yes, there are several initiatives, some of which are well-established and with significant results. This is the case of the *Parto Adequado* (Suitable Birth) project, which has so far avoided more than 20,000 unnecessary cesarean sections in public and private hospitals, as well as the *Saúde em Nossas Mãos* project – improving patient safety on a large scale in Brazil, which is reducing the rate of hospital infection in ICUs of 116 public hospitals. Both programs are led by Einstein and carried out collaboratively with other health organizations.

Another equally important example, but one that is perhaps less visible to outsiders, is the work in the area of healthcare economics, which analyzes topics such as efficiency, effectiveness and relevance of care to ensure that procedures deliver value – understood as quality of life and health gains – to patients. This area also supports experiences with different compensation models based on the concept of value-based health.

With regard to the coordination of care, an important advance is the Einstein Clinics, which focus on primary care. We finished the year with five units operating, and the sixth will open its doors in the first months of 2020.

HOW DO EINSTEIN CLINICS CONTRIBUTE TO CARE COORDINATION?

SK: Together with secondary and tertiary care structures, they help to prioritize healthcare without overlap or waste.

In addition to meeting the spontaneous demand of patients, these units enable Population Health Management. Based on information about the profile and health needs of each person, care plans can be defined, with health prevention and promotion actions integrated with secondary and tertiary care. This expanded vision offers greater quality, safety and efficiency, which is reflected in the reduction of costs.

EVERYDAY LIFE IS BECOMING INCREASINGLY DIGITAL. WHAT OPPORTUNITIES DOES THIS TYPE OF TECHNOLOGY REPRESENT FOR EINSTEIN AND ITS PATIENTS?

SK: Digital transformation is a reality at Einstein. One example is telemedicine, widely used in many countries, including Europe and the United States, and pioneered in Brazil by Einstein. Einstein Telemedicine was fundamental, for example, in an initiative developed with the city of São Paulo to offer care to 70 thousand people waiting to have skin lesions evaluated in the SUS system.

Digitalization is the basis of several initiatives to support decision-making, which use *Big Data* and *machine learning* techniques to transform the huge volume of data available to us into information. An important part of the data – the electronic patient record — is stored and is part of the **Cerner Millennium** platform also used by Einstein in one of the public hospitals that it runs.

Since 2018, the CMOA (Assistance Monitoring Center) has been monitoring the data and parameters of the hospitalized patients 24 hours a day. This means simultaneously observing around 600 beds to ensure the quality of care and strengthen the prevention of adverse events.

Predictive analysis systems anticipate demands and make the management of beds in the operating rooms more efficient.

Technology is also present in new forms of communication with patients, such as the *Meu Einstein* app, which allows patients to check test results, schedule appointments and *check-in* and supports self-care, with guidelines and reminders for each patient.

These are just a few examples of how healthcare can benefit from digital transformation. The potential for the future is much greater.

AND WHAT ARE THE ASSOCIATED CHALLENGES?

SK: In the technical field, a basic precaution is the privacy and security of patient information, which is a goal we are constantly seeking to improve. In 2019, Einstein participated and promoted discussions on the topic, which gained relevance with the new Brazilian General Data Protection Law (LGPD).

But the main challenge is cultural and refers to strengthening the skills and knowledge of the team to further benefit quality and safety. It is not enough simply to use a new tool, database or means of communication; it is necessary to think about healthcare based on this new reality. The possibilities are immense, and we see this in Einstein with the advances of a digital culture in all activities.

WHAT IS THE ROLE OF THE CLINICAL STAFF AND THE MULTIDISCIPLINARY TEAM IN THIS TRANSFORMATION SCENARIO?

SK: There is no quality care without humanization, proximity or relationship. Therefore, the commitment of the teams to the patient experience is always a great differential.

I'm used to saying that digital transformation is an ally and doesn't replace professionals, but those not using such resources will eventually be surpassed by those applying the technology in favor of their practice. This applies to all teams, especially to doctors. Einstein is happy to rely on a preeminent, highly engaged clinical staff which takes part in improvement efforts. We work actively to strengthen the relationship with this audience through initiatives of dialogue and actions of appreciation and recognition.

IN 2018, YOU MENTIONED THAT EINSTEIN WAS MOVING TOWARDS BECOMING A HIGH RELIABILITY ORGANIZATION. CAN YOU EXPLAIN HOW IT WORKS AND IN WHAT PART OF THE PATH EINSTEIN IS NOW?

SK: This is a concept developed by organizations operating in complex environments, such as oil or aviation, in which a failure can bring highly severe consequences; therefore, the goal is to pursue zero damage. It is important to point out that this is a continuous path, not a seal or a title. Once the zero damage level is reached, efforts must be kept up to sustain it.

Safety has always been a priority and Einstein never fails to pursue improvements, and this keeps bearing fruit. The performance of patient's health and safety is aligned with or superior to national and international benchmarks. This is possible only through serious, constant, consistent work directly involving leaders and teams. By the end of 2020, the goal is to have zero catastrophic adverse events, as well as to reduce the severe ones by half.

WHAT OTHER ASPECTS WOULD YOU ADD TO A QUICK REVIEW OF THE YEAR IN THE INSTITUTION?

SK: In addition to the gains in efficiency, quality and safety already mentioned, this was also a year of expansion in several aspects. In the assistance area, the highlights are the new units in São Paulo, the operation of labs in the inland of the state and in other regions of the country to serve local operations, the management of the Hospital Órion in the state of Goiânia, and the contract to take over another UPA in the public sector.

The portfolio of courses in the teaching area and the total number of students served were also expanded, and Einstein Operational Excellence Academy courses have reached Colombia, Paraguay and Chile. The consulting area is carrying out several projects for healthcare organizations in Bolivia and Paraguay.

This search for moving beyond its own walls is also perceived in the impacts of scientific production and in the innovation initiatives and partnerships with startups and pharmaceutical industries.

In the pillar of Social Responsibility, I highlight the Department of volunteers which, year after year, mobilizes the efforts of hundreds of selfless people in an organized and competent way to actualize Einstein's commitment to society and others.

Einstein increasingly expands its networks as well as its potential to bring more health to more citizens.

PERFORMANCE BEFORE COVID-19

WHAT HAS CHANGED AT EINSTEIN WITH THE NEW CORONA VIRUS PANDEMIC?

SK: In December, anticipating the risk of the pandemic reaching the country, a committee was formed with infectologists and leaders from all areas. Some measures were immediately implemented such as the training of teams and the change in operational routines in order to quickly identify and refer patients with respiratory symptoms to isolation areas, with personal protection equipment and all the necessary care. We also outlined plans to respond to increased demand.

WHAT ARE THE HIGHEST-IMPACT ACTIONS IN THIS AREA?

SK: We have increased our number of ventilators and, with equipment that generates negative air pressure, we can turn apartments into isolation units. We have also identified opportunities that will allow us to create 100 new operational beds by redirecting the use of some areas in the Morumbi unit and in the advanced units in São Paulo. A field hospital has also been assembled in the lot located opposite to the Morumbi unit. In the public sector, 394 beds will be added to the capacity of the *Hospital Municipal Dr. Moysés Deutsch - M'Boi Mirim*, so that a total of 514 beds (234 ICU and 280 Ward) will be dedicated to the treatment of Covid-19 patients. We will also run the *Hospital Municipal de Campanha do Pacaembu* (Pacaembu Municipal Field Hospital), containing 200 beds. At the same time, we have hired more professionals to strengthen the service and replace the teams that might need to move away.

This is all done with great responsibility in the management of diagnostic and care resources, such as exams and hospitalizations, aiming to ensure the services to those who need it most.

AND WHAT HAS BEEN DONE IN TERMS OF ORIENTATION FOR THE POPULATION?

SK: This is another important area we have focused on. The website https://vidasaudavel.einstein.br/coronavirus provides up-to-date and reliable information so that people can protect themselves individually and collaborate to reduce the contagion. Scientific information is our great ally.

WHAT ADVICE WOULD YOU GIVE TO PEOPLE AT THIS MOMENT?

SK: The point is to face the situation with the seriousness it requires and follow the guidelines from healthcare organizations. These are difficult times, but I am confident that through coordinated actions it will be possible to reduce the impacts of the disease while developing therapeutic pathways or a vaccine.

HIGHLIGHTS OF THE YEAR

SAÚDE SUPLEMENTAR

12
UNITS

56,962
HOSPITAL DISCHARGES[1]

34,273
SURGERIES[2]

3,948
DELIVERIES

355,161
consultations
IN EMERGENCY SERVICES

360,404
CONSULTATIONS

85.9%
OCCUPANCY RATE[3]

592
BEDS[4]

3.33 days
AVERAGE STAY

6,785,438
LAB AND IMAGE TESTS

UNIFIED PUBLIC HEALTH SYSTEM (SUS)

26
UNITS

30,661
HOSPITAL DISCHARGES[1]

12,403
SURGERIES[2]

8,285
DELIVERIES

706,810
consultations
IN EMERGENCY SERVICES

720,146
CONSULTATIONS

86.4%
OCCUPANCY RATE[3]

HOSPITAL MUNICIPAL VILA SANTA CATARINA
78.9%
HOSPITAL MUNICIPAL M'BOI MIRIM
93.9%

418
BEDS[4]

HOSPITAL MUNICIPAL VILA SANTA CATARINA
178
(74 reversible observation beds)
HOSPITAL MUNICIPAL M'BOI MIRIM
240
(85 reversible observation beds)

5.43 days
AVERAGE STAY

HOSPITAL MUNICIPAL VILA SANTA CATARINA
5.45 days
HOSPITAL MUNICIPAL M'BOI MIRIM
5.40 days

3,091,341
LAB AND IMAGE TESTS

EDUCATION AND TRAINING

HEALTH CARE EDUCATION

37,671
students

10,996
participants
IN SCIENTIFIC EVENTS

8 TEACHING UNITS

Student satisfaction[5]: 72

RESEARCH AND INNOVATION

RESEARCH

535 articles
PUBLISHED IN JOURNALS
with an impact above 1[6]

EXPENDITURES AND INVESTMENTS[7]
R$ 32.2
million

795
articles
PUBLISHED IN INDEXED JOURNALS

654
projects[8]

INNOVATION

40
startups
INCUBATED

Eretz.bio
PARTNERSHIP PLUG AND PLAY CLEVELAND INNOVATION PLATFORM

SOCIAL RESPONSIBILITY

VOLUNTEER DEPARTMENT

610
VOLUNTEERS

PHILANTHROPY

8
organizations
BENEFITTED

R$ 47.5 MILLION
IN INVESTMENTS IN THE COMMUNITY[9]

[1] It is the patient's release from the hospitalization unit by discharge (cured, improved or unaltered), evasion, and withdrawal from treatment, internal transfer, external transfer or death.

[2] Surgery patients.

[3] Ratio of sum of patients admitted at the end of each day and total beds per day.

[4] Beds in use and beds available for use at the moment of the census, even if they are unoccupied.

[5] Net Promoter Score, considers a scale from -100 to +100.

[6] The impact factor represents the average citations, in papers or scientific articles, of content published in a journal. The figure is calculated yearly, based on publications from the previous two years, using this formula: total of citations obtained during the year divided by the total number of articles published by the journal in the previous two years.

[7] Includes resources from the institution itself (CAPEX and OPEX) and external investment (research grants/external fund-raising).

[8] Sum of projects started in previous years, which are under development, and started and completed in 2019.

[9] Expenditures with the Einstein in the Jewish Community Program, *Residencial Albert Einstein* and donations to welfare institutions.

EINSTEIN

DRIVEN TO THE PURPOSE OF DELIVERING HEALTHIER LIVES BY GIVING EVERY CITIZEN A TASTE OF EINSTEIN, THE ORGANIZATION OPERATES IN THE PRIVATE AND PUBLIC HEALTH SECTORS.

MUCH MORE THAN A HOSPITAL

The *Sociedade Beneficente Israelita Brasileira Albert Einstein* (SBIBAE), founded in 1955, operates in all stages of health care in the supplementary and public sectors, as well as in training and education, consulting, dissemination of knowledge, research, innovation and social responsibility. It is headquartered in the city of São Paulo, where it concentrates most of its activities, but is also present in the inland of the state as well as in Rio de Janeiro, Goiás, Minas Gerais, Espírito Santo, Pará, Pernambuco and the Federal District.

The structure of services rendered is formed by:

- 12 supplementary health units, 11 of which are in Greater São Paulo (1 hospital, 4 Einstein clinics, focusing on primary care and 6 advanced units, offering emergency services, exams and consultations) and 1 Einstein Clinic in Sorocaba;
- 26 units of the Brazilian Unified Health System (SUS) in São Paulo formed by 2 hospitals, 13 Basic Health Units (UBS), 3 Outpatient Health Care Centers (AMA), 1 Specialty Outpatient Healthcare Center (AMA-E), 2 Emergency Care Units (UPA), 3 Psychosocial Care Centers (CAPS) and 2 Therapeutic Residence Services (SRT). SUS activities are the object of management contracts and partnerships with the city hall; and
- 8 teaching units, 5 of them located in São Paulo and the others in Curitiba (PR), Rio de Janeiro (RJ) and Belo Horizonte (MG).

Einstein is also responsible for the management of Hospital Órion, located in Goiás (GO) and operates clinical analysis and imaging exam laboratories that serve the SUS and the supplementary health in Rio de Janeiro (RJ) and in the São Paulo municipalities of Campinas, Mogi das Cruzes and Sorocaba, in addition to maintaining care units inside companies.

Einstein holds public utility titles in the municipal, state and federal realms, in addition to the certificate from CEBAS (Beneficent Society for Social Assistance), granted by the Ministry of Health to private non-profit entities recognized for providing services in the health area. The hospitals holding CEBAS certificates are evaluated every three years according to criteria established by the Ministry of Health and, when recognized as centers of excellence, are empowered to submit projects to the SUS Institutional Development Support Program (PROADI-SUS), an initiative to leverage impact actions in the public system in areas such as education, research, evaluation of technologies, management and specialized assistance. The Hospital maintains a Social Health Organization.

Since they are philanthropic, PROADI-SUS hospitals are exempt from the taxation required for in the Federal Constitution, but in return, they must apply resources in projects aiming for the development of the SUS. Therefore promoting improved health conditions for the Brazilian population.

DEVELOP THE HEALTH SECTOR

In order to respond to the challenges of the health system, Einstein tries to contribute to its improvement as well as to the development of new work models. It does that by participating in national and international discussion forums and joint initiatives with public authorities, regulatory agencies, hospitals, health insurance carriers and industry entities. Some examples are:

- Its presence in the Brazilian Association of Diagnostic Medicine (ABRAMED), the National Association of Private Hospitals (Anahp) and the Health Institute Coalition (ICOS);
- Its strategic partnership with the Institute for Healthcare Improvement (IHI), a non-profit organization that is a global benchmark in safety and quality (*see pages 18 and 40*);
- The strategic partnership and representation of the Planetree in Brazil, an international benchmark in health care through a person-centered care approach;
- Coordinating of collaborative projects to improve the safety and quality of hospitals in the public health care network (*see pages 41 to 43*);
- Participating in the Vision Zero initiative of the International Social Security Association (ISSA), which aims to improve the health, safety and well-being of employees of companies in various parts of the world; and
- Participating in the Healthy Hospitals Project from the American Healthcare Without Harm (HCWH) organization.

ACTION MODEL

PURPOSE
To deliver healthier lives by giving every citizen a taste of Einstein

VISION
To be a leader and innovator in medical and hospital care, a reference in knowledge management, recognized for its commitment to social responsibility

STRATEGIC PILLARS

ASSISTANCE

To offer **excellent assistance** to all through an **integrated healthcare system** based on the **Triple Aim** model

EDUCATION AND TRAINING

Blaze trails and seek solutions for the promotion of health, prevention and cure of diseases through the **integration between scientific research** and technological innovation

RESEARCH AND INNOVATION

Blaze trails and seek solutions for the promotion of health, prevention and cure of diseases through the **integration between scientific research** and **technological innovation**

SOCIAL RESPONSIBILITY

Support the development of the public healthcare system, transferring practices and knowledge that contribute to social justice

Good deeds | Health | Education | Social justice

MISSION

To offer quality excellence in the field of health, knowledge generation and social responsibility as a way of highlighting the Jewish community's contribution to Brazilian society.

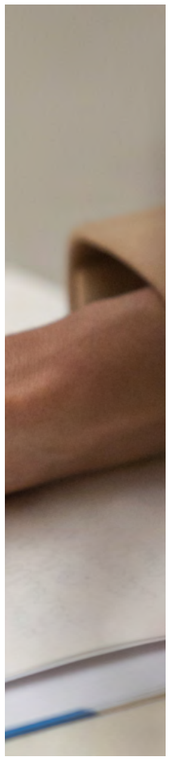
PRECEPTS

- *Mitzvá* (Good deeds)
- *Refuá* (Health)
- *Chinuch* (Education)
- *Tsedaká* (Social justice)

ORGANIZATIONAL VALUES

- Diligence
- Honesty
- Professionalism
- Integrity
- Truthfulness
- * Teamwork
- Autonomy
- Justice
- Altruism

THE BREAKDOWN OF THE PLANNING INTO GOALS AND INDICATORS IS ACCOMPANIED BY BALANCED SCORECARDS, PRESENTED MONTHLY AT THE MEETINGS OF THE VARIOUS UNITS.



STRATEGIC PLANNING

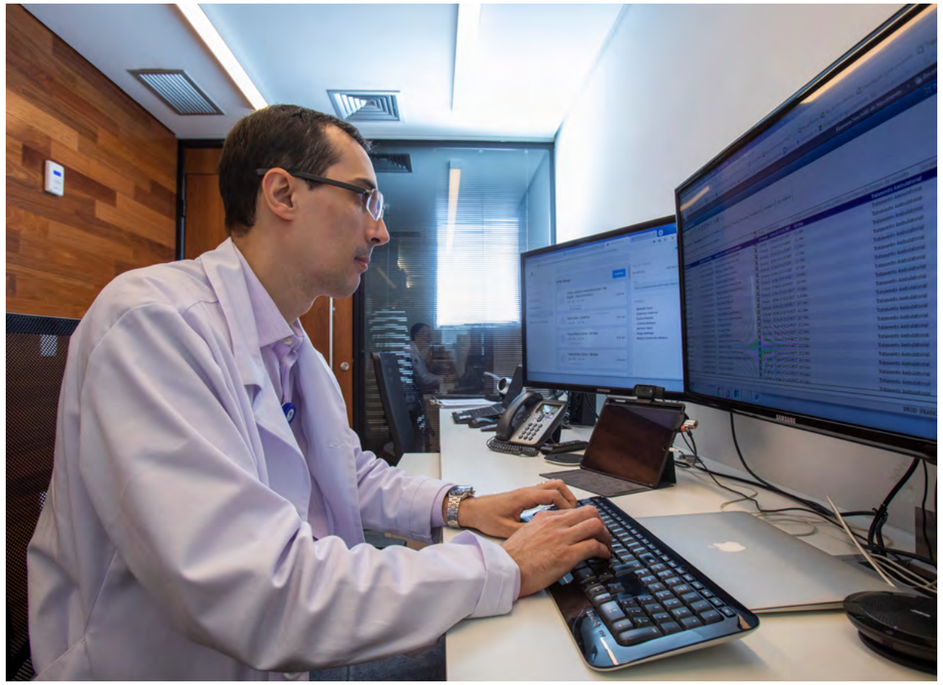
In its trajectory, Einstein is driven by a five-year strategic plan, revised annually on the basis of the identification of trends, threats and opportunities. In 2019, the process encompassed 21 multidisciplinary meetings involving professionals from various areas of Einstein, who discussed topics such as clinical staff engagement, precision medicine, primary care, social responsibility, innovation and brand positioning. This transversal approach enriches the decision-making process and favors its connection with the day to day. In addition, it increases the engagement of professionals with the joint construction of the goals and actions of the Society.

The breakdown of strategic planning into goals and performance indicators for all levels of leadership is a critical and meticulous process.

Einstein uses the *Balanced Scorecard* (BSC) as a management tool to document and monitor the performance of goals stemming from the strategic planning. BSC indicators are presented on a regular basis at meetings of the Executive Board (Comex), which brings together directors, and also at meetings with the leadership.

Einstein's BSC is composed of six dimensions – social responsibility, patients and physicians, internal processes, knowledge and organizational growth, finances and strategic projects –and the recognition program is linked to its results.

Among the strategic priorities for the coming years are topics such as *Big Data Analytics*, cell therapy, genomics, telemedicine, sustainable access to services, waste reduction, dissemination of knowledge through teaching and consulting, corporate health, and high complexity services.



GOVERNANCE STRUCTURE

The highest decision-making body at Einstein is the Shareholder's Meeting, made up of around 500 members. Three other forums are part of the **strategic scope** of governance: the Deliberative Council with 180 members, the Board of Directors — similar to any Board of Directors — and the Elected Board, each with nine members.

All members of these bodies are associates, among these, physicians with active participation at Einstein, intellectuals and professionals from various economic sectors in the country. They serve during six-year elective terms, which can then be renewed. Their duties are carried out on a voluntary and unpaid basis.

The relationship among the management bodies are established in the bylaws, drafted and approved according to current legislation requirements.

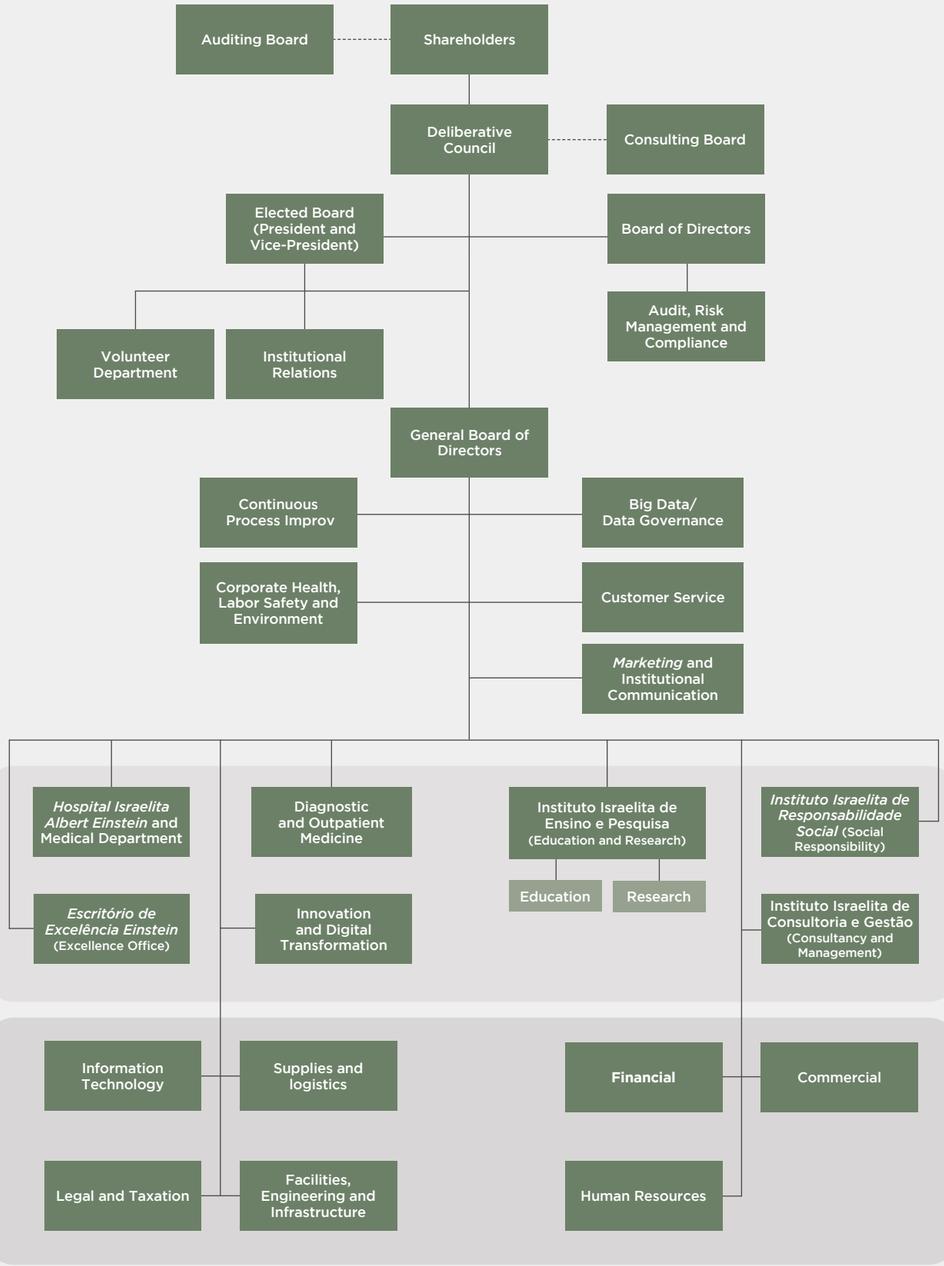
The Board of Directors is responsible for approving Einstein's general guidelines of activities and strategy, overseeing and monitoring the Board's activities; the Elected Board proposes, helps develop and controls the execution of the approved strategy and also guides the management and implementation of the guidelines. The following committees support decision making on specific topics such as Personnel; Finances; Education and Training; Digital; Social Responsibility and Sustainability; Quality, Care and IT; Research and Innovation; Infrastructure; Auditing and Governance; Conflicts of Interest and Compensation.

The General Board of Directors plays in the executive realm and reports to the president of the Elected Board who leads 15 department directors, positions held by paid professionals who contribute to Einstein's daily management.

Elected Board
Left to right: Claudia Sender Ramirez, Claudio Mifano, Nelson Wolosker, Sergio Podgaec, Eduardo Zlotnik, Sidney Klajner, Marcos Knobel, Victor Nudelman, Gilberto Maktas Meiches and Marcelo Giovanni Perlman.

Board of Directors
Left to right: Claudio Schvartsman, Nelson Hamerschlak, Oscar Fernando Pavão dos Santos, Mario Fleck, Claudio Luiz Lottenberg, Claudia Politanski, Bernardo Parnes, Moises Cohen, Israel Vainboim, Dominique José Einhorn, Luis Fernando Aranha Camargo and Mauro Roberto Terepins.

ORGANIZATIONAL FLOWCHART



EXPANDED IMPACT ON HEALTHCARE

The medicine practiced at Einstein is based on scientific evidence, provides care in the public and supplementary health care sector, and carries out structured initiatives of knowledge transfer in order to strengthen and allow more efficiency, assertiveness and access to the health system. (*See the summary table of services in the SUS and supplementary health on page 8.*)

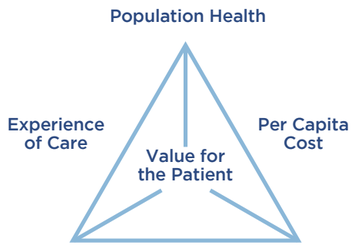
All work done here is oriented by the *Triple Aim* governance model, created by the Institute for Healthcare Improvement (IHI), a non-profit organization, a global benchmark in safety and quality. As a strategic partner of IHI in Latin America, Einstein works diligently on the dissemination of the concepts developed by the organization (*see Page 40*). Internally, the model has been applied systematically in decision-making since 2014, and is one of Einstein's tools to handle the challenges of the health sector.

Triple Aim encompasses three interrelated dimensions, which have specific goals:

- **Care experience:** improve the patient experience by providing safe, effective and reliable care at every opportunity;
- **Waste reduction:** continuous improvement and application of scientific knowledge to apply resources on a more efficient and effective basis; and
- **Population approach:** to categorize learning and results for larger portions of the population, adjusting the care to the specificities of the various groups.

THE *TRIPLE AIM* GOVERNANCE MODEL HAS BEEN APPLIED SYSTEMATICALLY IN DECISION-MAKING SINCE 2014, AND IS ONE OF THE TOOLS TO HANDLE THE CHALLENGES OF THE HEALTH SECTOR.

TRIPLE AIM MODEL



INTEGRATED APPROACH

Different structures welcome the population on the fronts of health care – promotion, prevention, diagnosis, treatment and rehabilitation. The proposal is to direct the care by using units adjusted to different needs, thus avoiding overlaps, waste or limitations of the hospital-centered care model.

As an integrated health care system, Einstein plays on the four levels of health care:

- **Primary:** promotion, prevention and immunization programs, physicians' offices and outpatient clinics;
- **Secondary:** low and medium complexity hospital services, urgent and emergency care services and diagnostic medicine;
- **Tertiary:** hospital services; and
- **Quaternary:** services such as tissue and organ transplants, performed in a hospital setting.

MODERN STRUCTURE

A plan for the modernization, reorganization and expansion of Morumbi complex spaces aims to increase the capacity of care, reorganize activities and provide more comfort to patients and employees. The high complexity care areas will be expanded and the low complexity areas will be relocated to the surrounding area. The work, carried out in steps, has already enabled the retrofitting of the facades of Blocks A and B/C; the next step is the retrofitting of all beds in the Hospital.

HOSPITAL ISRAELITA ALBERT EINSTEIN

	2016	2017	2018	2019	Δ 2019/2018
Employees	7,058	7,174	6,810	7,134	4.7%
Operational beds[1]	646	627	579	592	2.2%
Operating rooms[2]	39	40	40	40	0.0%
Discharges[3]	54,747	55,491	55,880	56,962	1.9%
Morumbi with Day Clinic	52,929	53,500	53,619	54,647	1.9%
Perdizes - Day Clinic	1,818	1,991	2,261	2.315	2.4%
Average stay (days)	3.51	3.40	3.29	3.33	1.2%
Occupancy rate (%)[4]	82.6	81.4	81.5	85.9	4,4 p.p.
Surgical patients (except c-sections)[2 5]	32,613	32,433	32,937	34,273	4.1%
Number of deliveries	4,294	4,501	4,237	3,948	-6.8%
Consultations in Emergency Services	335,104	339,839	340,558	355,161	4.3%
Consultations	379,098	339,681	339,275	360,404	6.2%

[1] Beds in use and the beds that can be used at the time of the census, even if they are unoccupied.
[2] It includes Morumbi and Perdizes units.
[3] When the patient leaves the hospitalization unit by discharge (cured, improved or unaltered), evasion, withdrawal of treatment, internal transfer, external transfer or death.
[4] Ratio of sum of patients admitted at the end of each day and total beds per day.
[5] Were updated compared to those published in the Sustainability Report 2018 (32,884).
Pp : percentage point.

CAPILLARITY

In six advanced units in the city of São Paulo – *Alphaville, Ibirapuera, Jardins, Perdizes, Cidade Jardim e Chácara Klabin* — Einstein receives outpatients, including urgent and emergency cases, and provides immunization and diagnostic medicine services.

EINSTEIN CLINICS

In 2019, Einstein's outpatient clinics network had already one unit in operation in Sorocaba and four in São Paulo city (*Alto de Pinheiros, Parque da Cidade, Parque Ibirapuera* and *Anália Franco*). In the capital of São Paulo, the Santana unit is under construction and starts operating in 2020.

The network provides primary health care services and consultations are done with or without prior scheduling. The patient relies on a team made up of family doctors, nurses, physical educators, nutritionists and psychologists. The clinics offer guidelines, strategies for health promotion and prevention, chronic diseases control and low-complexity emergency care. This latter is starting to be made available both to the overall population and to beneficiaries of specific health plans (*see page 34*).

The units also serve as a reference for the care of Einstein's employees and their dependants, who rely on a dedicated unit, *Giovanni Gronchi*.

ROBOTIC SURGERY

At the end of 2019, Einstein inaugurated the first Robotic Surgery Training Center in Brazil. The structure is accredited as an official training center by the Da Vinci Intuitive, the only certifier of the use of SI platform made by Da Vinci Surgical Systems manufacturer. The inauguration stresses Einstein's trailblazing in this field, being the only Hospital in Latin America to have four Da Vinci robotic systems installed one of them dedicated solely to teaching and research, and five virtual reality simulators.

The organization is also the first with a Latin American Academic program of Robotic Surgery recommended by Intuitive. The training for the use of technology encompasses Einstein's medical residency and graduate programs. Since 2019, it has also been subject of the training of nurses, with the inauguration of the Nursing postgraduate course in Robotic Surgery.

The Da Vinci Surgical System combines high-resolution 3D images and surgeon-controlled movements. The technology used by Einstein since 2008 as a minimally invasive surgical modality incorporates a robotic surgery program that includes monitoring the training and qualifications of surgeons and clinical outcomes of patients. In 11 years of work, more than 10 thousand procedures were carried out in different specialties, such as Urology, Gastro surgery, Gynecology, Head and Neck Surgery, Cardiac Surgery and Thoracic Surgery. The total number of patients cared for in the period reaches 6 thousand.

AMONG THE BEST IN LATIN AMERICA

For the 11th consecutive time, the Hospital Israelita Albert Einstein was elected the best Hospital in Latin America by the America Economia Intelligence. The *Hospital Municipal M'Boi Mirim – Dr. Moysés Deutsch* ranked first among Brazilian public hospitals evaluated, and ranks 27th in the overall ranking (public and private hospitals) in Latin America.

Among the indicators analyzed by the magazine are patient safety and dignity, which involves processes and outcomes that minimize hospital risks; human capital, focused on the clinical staff, nursing professionals and hospital governance; capacity, which involves indicators of beds, specialties, exams and surgeries; knowledge management; efficiency; prestige and dignity; and patient experience.

THE STRENGTH OF NURSING

In 2019, Einstein was one of the first health organizations in the world to join The Nightingale Challenge, a challenge proposed by the Burdett Trust for Nursing with the World Health Organization (WHO) and the International Council of Nurses (ICN). The goal is to engage a thousand organizations around the world in a broad project to empower young nursing professionals in leadership and management skills. Each organization must train 20 professionals to play as leaders in health innovation and quality processes.

At Einstein, 61 people were selected to participate in trainings focused on systemic reasoning, personal and interpersonal effectiveness and care practices. The trainings consist of 160 hours of activities to be held in 2020.

Tha Nightingale Challenge is part of the Nursing Now campaign. The objective of this three year campaign is to showcase the benefits of quality nursing beyond population health, such as gender equality and a strengthened national economy[1].

[1] *All-Party Parliamentary Group on Global Health: Triple Impact – How developing nursing will improve health, promote gender equality and support economic growth;* London, 2016. Available at: http://www.appg.globalhealth.org.uk/.

PRIMARY CARE IN SUS

The performance within the SUS (Public Healthcare System), carried out through a management contract and in agreement with the city of São Paulo government, reflects one of Einstein's ways to generate value for society, through concrete outcomes for the health of the local population. More than 2.1 thousand employees worked in the units Einstein has an agreement with, and 4.4 million consultations were carried out in 2019 (*see table*).

In the districts of Campo Limpo and Vila Andrade, where more than 340 thousand people live, Einstein operates virtually the entire public primary care network, being responsible for 13 Basic Health Units (UBS), 284.3 thousand people registered. Three out of four residences in the region are covered by the work of family health teams, which bring to families initiatives of health promotion, prevention, treatment and rehabilitation.

Also, Einstein operates three Outpatient Healthcare Centers (AMA) and a Pediatric AMA, whose operation is integrated with the UBS network. The former cares for the spontaneous demand of minor diseases, considered to be of low and medium complexity, and the Pediatric AMA offers consultations and examinations to patients referred by the municipal regulatory complex.

EMERGENCY CARE UNIT (UPA)

In the hierarchical structure of the SUS (Public Healthcare System), the UPAs (Emergency Care Units) are intended for urgency and emergency of medium complexity. Einstein operates two units of this kind: the 24-hour UPA in the Campo Limpo district, where more than 1.1 million consultations were performed this year, and the UPA in Vila Santa Catarina neighborhood, attached to *Hospital Municipal Vila Santa Catarina – Dr. Gilson de Cassia Marques de Carvalho*, which was incorporated into the Einstein network in December 2019.

MENTAL HEALTH

The *Centros de Atenção Psicossocial* (Psychosocial Care Centers / CAPS) are the gateway to care for the mental health needs in the city. They integrate the actions of harm reduction and integral Care in an alternative model of psychiatric hospitals. A number of 48.1 thousand consultations were carried out in 2019 in the three CAPS operated by Einstein.

Through another tool oriented to the care of patients with mental health disorders, the Serviço de *Residência Terapêutica* (Therapeutic Residence Service / SRT), from Einstein offers housing to those discharged from long-term psychiatric hospitalization who do not have family ties, and supports their rehabilitation and progressive social reintegration. The institution is responsible for two SRTs in the Campo Limpo district.

AGREEMENTS WITH THE CITY OF SÃO PAULO GOVERNMENT — PRIMARY AND SECONDARY CARE

	2016	2017	2018	2019	Δ 2019/2018
Family Health Strategy					
Basic Health Units (UBS)	13	13	13	13	0.0%
Family Health Teams	82	84	87	87	0.0%
Employees	1,036	1,085	1,128	1,150	2.0%
Families registered	84,184	86,961	88,846	89,498[1]	0.7%
People registered	279,851	286,129	288,332	284,323[1]	-1.4%
Consultations	2,224,298	2,434,954	2,412,132	2,349,646	-2,6%
Outpatient Healthcare Center (AMA)					
Units	3	3	3	3	0.0%
Employees	223	242	234	303	29.5%
Consultations	759,157	632,036[2]	669,628	855,046	27.7%
Emergency Care Unit (UPA)					
Units	1	1	1	1[3]	0.0%
Employees	430	434	419	530	26.5%
Consultations	923,553	995,154	1,077,322[4]	1,100,662	2.2%
Psychosocial Care Center (CAPS)					
Units	3	3	3	3	0.0%
Employees	113	140	115	126	9.6%
Consultations	23,342	30,665	47,520	48,157	1.3%
Therapeutic Residence Service (SRT)					
Units	–	1	2	2	0.0%
Employees	–	8	17	22	29.4%
Residents	–	8	20	20	0.0%
Pediatric Specialties Outpatient Center (Pediatric AMA)[5]					
Units	–	–	1	1	0.0%
Employees	–	–	35	54	54,3%
Consultations	–	–	47,631	53,919	13.2%
Total					
Units	**20**	**21**	**23**	**23**	**0.0%**
Employees	**1,802**	**1,909**	**1,948**	**2,185**	**12.2%**
Consultations	**3,930,350**	**4,092,809**	**4,254,233**	**4,407,430**	**3.6%**

[1] Undergoing the process of registering the population in the new system.
[2] The drop in the total number of patients served from 2017 on, is due to a reduction in the number of physicians employed by the Municipal Health Department - SMS/São Paulo city government.
[3] In December 2019, Einstein started operating a second UPA, in the Vila Santa Catarina neighborhood, but information on employees and services had not been arranged until the closing of this Sustainability Report.
[4] The increase in the number of patients served in 2018 is due to a readjustment of the codes contained in the Outpatient Production Bulletin, published by the Municipal Health Department - SMS/São Paulo city government.
[5] The unit is part of a partnership with the São Paulo city government (PROADI-SUS) since August 2018 and took on the services that had previously been conducted by Einstein in the Pediatric Specialties Outpatient Center, included in the Einstein program at Paraisópolis community (PECP).

HOSPITAL CARE IN THE SUS

The *Hospital Municipal M'Boi Mirim – Dr. Moysés Deutsch* is managed by Einstein in association with the *Centro de Estudos e Pesquisas Dr. João Amorim* (CEJAM). Located in *Jardim Ângela*, in the South Region of São Paulo, it provides urgent and emergency care, elective and urgent surgeries, and assistance to deliveries. It also operates with specialties such as Medical Clinic, General Surgery, Pediatrics, Orthopedics, Gynecology, Obstetrics and Psychiatry.

The Emergency Care area of the hospital went through renovation and expansion in 2019 in order to ensure more comfort, quality and safety to users and employees. The total number of beds in the emergency room increased from 9 to 22.

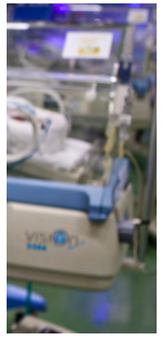
The expansion was funded by parliamentary amendment resources, and happened alongside other local infrastructure improvement initiatives promoted by the Einstein Volunteer Department. With investments of R$ 1.4 million, the Department has enabled, for example, the reform of the maternity and the toilets used by patients in the sector, improvements in the pediatrics sector and the acquisition of new equipment.

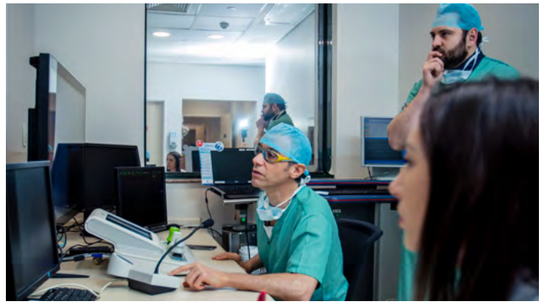
The hospital holds the accreditation of Excellence (level 3) from ONA (*Organização Nacional de Acreditação*), a Brazilian model that certifies the quality of hospitals and healthcare services. The Level 3 certification attests to the high degree of institutional maturity and the culture of continuous management improvement.

MANAGEMENT CONTRACT WITH THE CITY OF SÃO PAULO GOVERNMENT – HOSPITAL MUNICIPAL M'BOI MIRIM – DR. MOYSÉS DEUTSCH

	2016	2017	2018	2019	Δ 2019/2018
Employees[1]	1,586	1,628	1,668	1,762	5.6%
Operational beds[2]	240	240	240	240	0.0%
Rooms for surgery	10	10	10	10	0.0%
Discharges[3]	18,706	18,893	19,949	21,208	6.3%
Average stay (days)	5.49	5.56	5.51	5.40	-2.0%
Occupancy rate[4] (%)	89.1	89.8	92.7	93.9	1.3%
Surgical patients (without c-sections)	7,362	7,323	8,254	8.345	1.1%
Number of deliveries	4,753	5,272	5,072	4,941	-2,6%
Consultations in Emergency Services	199,326	219,078	209,267	188,307	-10,0%
Outpatient appointments	33,284	32,270	31,705	34,334	8.3%

[1] Considers the entire team, not only the Einstein employees working in the unit.
[2] Beds in use and beds available for use at the moment of the census, even if they are unoccupied.
[3] It is the patient's release from the hospitalization unit by discharge (cured, improved or unaltered), evasion, withdrawal from treatment, internal transfer, external transfer or death.
[4] Ratio of sum of patients admitted at the end of each day and total beds per day.





HIGH COMPLEXITY IN SUS

The *Hospital Municipal Vila Santa Catarina – Dr. Gilson De Cássia Marques de Carvalho*, located in the South Region of São Paulo, has been operated by Einstein since 2015. It renders clinical laboratory and imaging services (endoscopy, ultrasound, echocardiography, computed tomography and magnetic resonance imaging), outpatient specialty clinics, oncology and surgery and hospitalization for pediatric and adult patients. In 2019, more than 4 thousand surgical patients (not including c-sections) were treated, an increase of nearly 40% compared to the previous year.

In 2019, an agreement with the city of São Paulo government strengthened the hospital's vocation for high-complexity care, expanding the services to oncology - with about 200 new patients each month — and maternal-infant care for high-risk patients and surgeries. The new guidance is reflected in the growth of the total number of surgical patients treated in the unit (*see table*), and makes it strategic to meet the demand of cancer patients in the public network of the city.

The hospital holds the full ONA accreditation (level 2).

IMPLEMENTATION OF *CERNER MILLENNIUM*

In 2019, the *Hospital Municipal Vila Santa Catarina* was integrated into the *Cerner Millennium* platform, which is used in several Einstein units (*see page 35*).

The platform gathers a large database and provides more quality and safety to the hospital assistance and management decisions.

AGREEMENTS WITH THE MINISTRY OF HEALTH AND THE CITY OF SÃO PAULO GOVERNMENT – HOSPITAL MUNICIPAL VILA SANTA CATARINA – DR. GILSON DE CÁSSIA MARQUES DE CARVALHO

	2016	2017	2018	2019	Δ 2019/2018
Employees	1,012	1,002	945	1,197	26.7%
Operational beds[1]	168	176	174	178	2.3%
Rooms for surgery	5	5	5	6	20.0%
Discharges[2]	6,817	6,810	8,283	9,453	14.1%
Average stay (days)	6.74	7.43	5.68	5.45	-4.0%
Occupancy Rate[3] (%)	78.0	79.0	77.0	78.9	2.5%
Surgical patients (without c-sections)	1,384	1,900	2,920	4,058	39.0%
Number of deliveries	3,107	3,408	3,426	3,344	-2.4%
Obstetric Emergency Care Appointments	14,944	17,941	16,773	16,933	1.0%
Outpatient appointments	39,786	43,881	50,966	70,319	38.0%

[1] Beds in use and the beds that can be used at the time of the census, even if they are unoccupied.
[2] When the patient leaves the hospitalization unit by discharge (cured, improved or unaltered), evasion, withdrawal of treatment, internal transfer, external transfer or death.
[3] Ratio of sum of patients admitted at the end of each day and total beds per day.

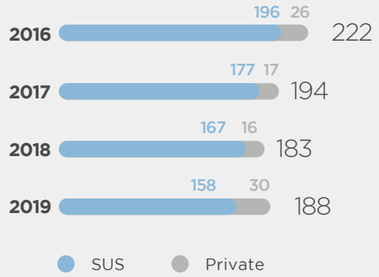
ORGAN TRANSPLANTATION

The Einstein Transplant Program, created in 2002, is a project that is part of the PROADI-SUS and performs liver, kidney, heart, lung, heart-lung, bowel and multivisceral transplants. In addition to meeting demands for specialized assistance to patients, from the initial evaluation to the postoperative period, Einstein developed several initiatives aiming to support the *Sistema National de Transplantes* (SNT - National Transplant System), especially in cases of higher complexity and management issues. Production volume, technical capacity and team experience, improvement of care protocols based on scientific evidence and investment in new technologies are some of Einstein's differentiators in this activity.

Einstein works as the reference center of the Ministry of Health for transplantation in patients with severe acute liver failure, a condition that has a high risk of mortality and requires the rapid response of healthcare teams. Einstein trains ICU professionals throughout Brazil to quickly identify the problem and analyze the cases through a 24h/7 information center, which receives information from the Ministry of Health. The work also involves discussion with the local teams responsible for the patient, and guidance on how to proceed with the case, which can be monitoring the patient's condition as well as supportting activities for recovering the organ or transfering to transplant centers, including Einstein's.

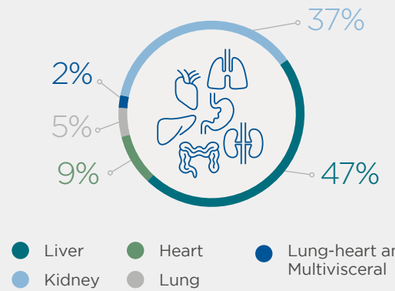
In addition to being equipped to perform transplantation in patients under complex conditions, Einstein is the only center in the country using the *Molecular Adsorbent Recirculating System* (MARS) therapy of liver dialysis. The technique eliminates toxins that cause necrosis in the liver, which can either eliminate the need for transplantation in cases not related to chronic liver diseases or stabilize patients to carry out the transplantation.

ORGAN TRANSPLANTS



ORGAN TRANSPLANTS (2019)

Total: 188 transplants



TRANSPLANT PROGRAM

	2016	2017	2018	2019	Δ 2019/2018
Patients being followed (on 31 December)	3,913	4,125	3,585	3,020	-10.1%
Outpatient appointments	27,733	25,257	20,630	26,206	22.9%
Hospital stays	1,466	1,114	863	1,053	8.1%

In another project carried out within the framework of PROADI-SUS (Support Program for the Institutional Development of the Public Healthcare System), Einstein trains professionals from public hospitals selected by the Ministry with the aim of structuring or strengthening six transplant centers by the end of 2021.

In the cities of Belém, Natal and Teresina, the focus is liver transplants; in Campo Grande and Sergipe, kidney transplants; and in Rio de Janeiro, lung transplants. All the teams needed for the service — surgeons, anesthesiologists, radiologists and hepatologists, among other specialties — receive theoretical and practical training at Einstein for up to one year, according to the professional's area and experience, and then return to their own organization in order to structure the transplant centers.

In the tutoring stage, Einstein oversees the first transplants performed by the trained team. Einstein is also responsible for a project to support the management and development of organ and tissue donation, procurement and transplantation in Brazil. The work involves training 3.4 thousand doctors in the country in the brain death confirmation protocol and a cost-outcome study that will support the elaboration of nationwide action plans.

89.5% OF TRANSPLANTS

PERFORMED by Einstein in the last five years took place via SUS (Public Healthcare System).

DEVELOPING SUS (PUBLIC HEALTHCARE SYSTEM)

Einstein is a healthcare entity with recognized excellence, certified by the Ministry of Health to carry out projects for PROADI-SUS (Support Program for the Institutional Development of the Public Healthcare System) in return for the tax exemption. PROADI-SUS was created by Law number 12.101/2009, which provides for initiatives in five areas: studies for evaluation and incorporation of technology; human resource training; research of public interest in health; development of techniques and operation in healthcare services management and assistance activities.

The estimated counterpart for the 2018-2020 triennium is R$ 649.5 million, which will be spent on about 50 projects. Throughout this report, the following projects are presented in more detail:

- Use of advanced data analysis techniques and innovation to support health policies planning and development (*Page 38*);
- Management Consulting in Brazilian philanthropic hospitals (*page 66*);
- Liver transplantation in patients with fulminant hepatitis (*page 28*); and
- Management and development of the donation, harvesting and transplantation of organs and tissues in Brazil (*page 28*).

See other developing initiatives below. The complete list is available at: https://hospitais.proadi-sus.org.br/projetos.

Sickle-cell anemia
The initiative aims to develop a new treatment for the cure of sickle-cell anemia, a common and neglected genetic disease in Brazil. Those affected by the disease have abnormally shaped hemoglobins and red blood cells, causing anemia and obstruction in the blood vessels. It can lead to serious complications, such as bone pain, infections and stroke. Einstein's proposal is to edit the patient's own bone marrow stem cells to correct the genetic mutation and then re-infuse them, normalizing the blood production.
https://hospitais.proadi-sus.org.br/projetos/17/anemia-falciforme

PlanificaSUS
The work consists of training workshops and tutorial workshops for more than 65 thousand professionals with care or management functions in SUS. The aim is to strengthen the skills necessary for the proper planning and make the RAS healthcare networks operational. The initiative follows the Chronic Diseases Care model and has the potential to benefit more than 450 thousand people.
https://hospitais.proadi-sus.org.br/projetos/25/planificasus

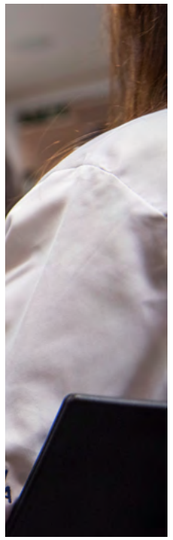
Transsexuality
The project aims to establish a national protocol of care in the SUS for patients in a transsexualization process, considering the entire line of care at the outpatient, surgical and hospital levels. In addition to structuring care and scientific research on priority aspects of care, the initiative also provides for the creation of a specialized outpatient clinic, in the Hospital Municipal Vila Santa Catarina, in order to conduct hormone therapy for patients in the preoperative stage.
https://hospitais.proadi-sus.org.br/projetos/133/transexualidade

Image bank
Through this action, Einstein provides the SUS with a national base of medical images, with a first step towards the diagnostic automation, via machine learning, for a number of diseases, in addition to high quality information for the development of research. Zika, skin cancer and tuberculosis were the three diseases defined as being of high impact and relevance to the SUS, and their automation model is already being tested.
https://hospitais.proadi-sus.org.br/projetos/145/banco-de-imagens

Lawsuits Qualification
Einstein provides technical notes on medical topics related to the individual lawsuits of SUS (Public Healthcare System) users requesting urgency for starting the treatment, supply of medication or material, or even performance of specific procedures. The initiative aims to support judges in decision-making in new or pending legal cases. The initiative was enabled through a technical cooperation agreement between the National Council of Justice (CNJ) and the Ministry of Health.
https://hospitais.proadi-sus.org.br/projetos/146/cnj

10 YEARS IN PROADI-SUS

With PROADI-SUS, participating hospitals apply their expertise and the work of scientists, educators, managers and health professionals to meet the needs of the SUS. Between 2009 and 2019, Einstein was responsible for carrying out 148 PROADI-SUS projects, which mobilized investments of R$ 2.2 billion.



VALUE-BASED MEDICINE

Providing assistance with a focus on care, quality and patient safety, as well as ensuring efficiency and proper use of resources is a challenge for the entire health system. Connected to its purpose of promoting healthier lives and to the Triple Aim governance model (*see Page 18*), Einstein believes that there is a need to take a wider look at care by taking into account the relevance of the procedures adopted, the patient's experience, and the benefits guaranteed to their health.

These themes are the focus of Einstein's coordinated efforts, which relies on information systems and processes to continuously evaluate what is being delivered to the patient to guide the development of new products, based on value-based medicine. The structure was improved in 2019 with the creation of the Superintendence of Health Economics, which gathers and expands the initiatives and structures related to the theme.

One of these is the Outcomes structure, which gathers information about the conditions of patients after the procedures. A follow-up is conducted on 20 clinical conditions, such as infection, stroke, different types of cancer and transplants. For this, about 900 contacts with patients are made every month to evaluate the effects of the procedures on their life quality, functionality, and complications. The follow-up can be from 30 days up to five years, depending on the clinical condition.

Since 2017, the collection of outcome data has been systematized according to the methodology proposed by the *International Consortium for Health Outcomes Measurement* (ICHOM). The data provided by the standardized collection allows a comparison of the quality of the results achieved by the various providers. More than 3.5 thousand patients have already been evaluated in nine different clinical conditions: low back pain, coronary artery disease, heart failure, prostate cancer, stroke, breast cancer, hip arthrosis, knee arthrosis and diabetes.

The Office of Value-Based Management, formalized as an internal structure in 2017, leads the application of *Value-Based Health Care* (VBHC), which Einstein adopted as a strategic action in 2006. The Office is focused on the development of new value-based products, including the discussion of new compensation models and the impacts of clinical practice variability.

Among the solutions already tested by Einstein are the bundles which are the package of services needed to treat a given clinical condition throughout the entire care cycle. In the bundle related to back problems, which also functions as a second opinion program for one of the main health insurance operators in the country, the analysis showed that, in 70% of cases, the surgical intervention was a poor recommendation.

The expansion of the population health strategy and the investment in primary care contribute to a holistic view of the patient, with incentives for prevention and, consequently, a higher quality of life and reduced risk of more complex interventions (*see pages 21 and 34*).

The unit also includes the areas of Coding, which ensures the quality of information on diagnoses and procedures; Epidemiology, which is responsible for generating the hospital's operational indicators; and Health Technology Evaluation, newly created to assess the clinical and economic impact of these new instruments.

MORE CONSCIOUS CHOICES

Einstein's emergency care applies the recommendations made by *Choosing Wisely*, created by the *American Board of Internal Medicine Foundation* (ABIM *Foundation*), to guide decisions based on the best available scientific evidence for the proper use of exams and the reduction of unnecessary interventions presenting unfavorable risk-benefit.

The initiative also encourages dialogue between doctors, patients and family members so that by being better informed they can make the best decisions about care. Einstein was the first hospital in Latin America to join this initiative.

CORPORATE HEALTH

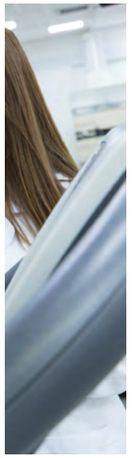
The Einstein clinics (*see page 21*) play a key role in the provision of primary health care services. In addition to being "the gateway" to the integrated healthcare management system offered by Einstein, they are an important link for Population Health Management, in line with the *Triple Aim* governance model. It is through them that Einstein anchors a new line of services provided to companies and health insurance operators to manage specific portfolios based on patient indicators and focused on care coordination. At the end of 2019, the service was already provided to five companies, managing more than 42 thousand individuals. Of this total, 16.2 thousand were already linked to a healthcare team and had already gone through at least one consultation with the professionals. The total number of visits throughout the year including walk-in visits and scheduled appointments, was 52.3 thousand.

The patient care strategy is developed based on the collection of behavioral information, (tobacco and alcohol use, sedentary lifestyle, diet, etc.) and the presence of chronic diseases, (diabetes and hypertension). The systematization of the data allows Einstein to know the general health status of a group of individuals and define specific plans that involve health promotion, nutrition, stimulation of physical activity and behavioral changes. All through monitoring chronic diseases and individual consultations, to managing specialty outpatient clinics and hospital admissions, as needed.

A broad view of patients' needs and integrated actions of health care levels makes care more effective and eliminates resource waste.

For the operators, this modality may include new compensation models, such as packages according to the number of people covered. To account for these activities, outpatient activities were restructured with a more strategic front, which includes the Population Health Management Center, aimed at creating policies, developing practices and supporting operational management. Among the focus of the actions are the analysis of databases and the use of artificial intelligence to monitor population, identification of needs for improvement and opportunities to increase patient engagement, prevention in healthcare and opportunities for early interventions.

The Einstein clinic network has six units: one in Sorocaba, four in operation in the city of São Paulo, and one that started operating in 2020.



DIGITAL TECHNOLOGY AT THE SERVICE OF QUALITY AND SAFETY

Technology broadens the boundaries of healthcare performance by supporting professionals with processing large volumes of data, automatizating the process and providing accurate and quality information to support decision-making. With systematic investments in *Big Data* (*see definition on Page 38*), artificial intelligence, governance and data security, and the dissemination of this knowledge, Einstein advances in its digital transformation to offer ever-increasing quality, safety and efficiency to patients.

This maturity in the use of technology is reflected in projects based on artificial intelligence and machine learning to process information and, for example, issue early warnings about the clinical condition of patients, anticipate the demand for hospitalization or program the surgery schedule. These are actions that have become routine in private and public assets under their management, with benefits for the allocation of beds and the expansion of access and care with lower investments in physical structure.

An example is the CMOA healthcare monitoring center, connected to the Cerner Millennium platform (*see chart*). The center went into operation in 2018 and monitors more than 90 indicators in real time, 24 hours a day. The platform automatically sends alerts in case of risks or deviations in pain levels, delay in administering medications, allergies and blood glucose levels, preventing complications even in surgical procedures.

Among the results already perceived is the early intervention of the rapid response teams, which reduced by 9% the transfers to the severe patient units. This is because the monitoring of vital signs helps to identify cases of clinical deterioration with a high degree of assertiveness and in a more agile manner, according to the Early Warning Score (MEWS scale). Research[1] has shown that access to structured data increases the early detection of deterioration cases of a patient's condition by up to ten times, reflecting positively on the treatment outcome.

Automated processing and alerts to the Center also contributed to reducing adverse events in obstetric patients in half and eliminating severe or catastrophic events related to the administration of anesthesia during surgeries.

[1] The information contains, for example, two articles published in 2018 by David C. Classen and contributors in the Health Affairs journal: "Global trigger tool shows that adverse events in hospitals may be ten times greater than previously measured" and "An electronic health record-based real-time analytics program for patient safety surveillance and improvement".

CERNER MILLENNIUM

The platform gathers key information about patients, such as medical and examination history, prescribed medications and diagnoses. Bringing together different care processes in the same base provides agility in the exchange of Information, process automation and a reduction of error risk. As new cases are incorporated, the system identifies risk conditions and proposes preventive or corrective actions. Among the resources are alerts about risk factors, contraindications and recommendations. In 2019, two new protocols were incorporated into Cerner: pulmonary thromboembolism and sepsis.

The Cerner started being used at Einstein in 2017, after three years of development. In 2019, its use was expanded to *Hospital Municipal Vila Santa Catarina* and began to also process the data of laboratories that Einstein operates in hospitals or corporate outpatient clinics.

ADVANCES IN EFFICIENCY

Artificial intelligence has been used since 2019 to optimize the operating room schedules at the Morumbi Unit. The system schedules the surgeries based on information such as type of procedure, average time of intervention, equipment, instruments, and necessary materials, optimizing the schedule of about 3 thousand monthly surgery. In case of delays or complications, the system automatically reschedules the surgeries. This operation increased the precision of the time estimate for each intervention and reduced delays in starting surgeries.

The expectation is that this system will produce gains similar to those ones obtained with the predictive hospitalization system, adopted in the Urgent Care service in 2017, which identifies up to six hours in advance if a patient will need a bed. New features such as biometric signatures and adjustments in Urgent Care reduced the hospitalization process by four minutes; dropout fell 13%.

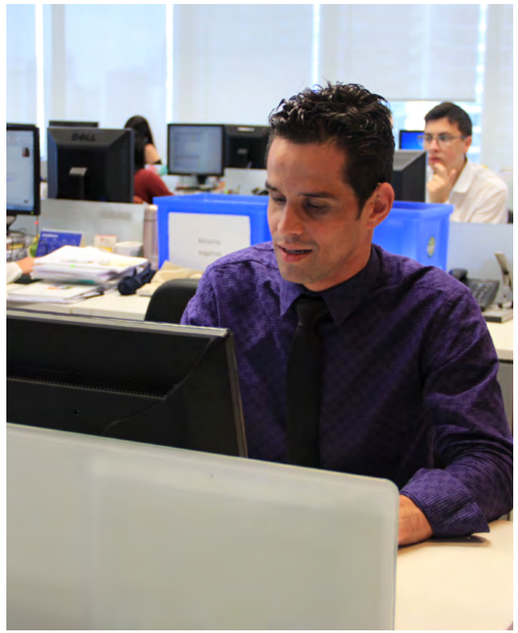
This evolution has also reached the public system units managed by Einstein. *Hospital Municipal Vila Santa Catarina* and *Hospital Municipal M'Boi Mirim* implemented the Patient Flow program with significant results. In *Hospital Municipal Vila Santa Catarina*, the average length of stay fell 4.1% from 2018 to 2019, and the bed turnover increased 7.5%, resulting in an increase of 14.1% of the total number of hospital discharges. In *Hospital Municipal M'Boi Mirim*, during the same period, there was a reduction of 0.9% in the length of stay and an increase of 2.7% in the turn of beds, resulting in 6.2% more hospital exits.

At *Hospital Israelita Albert Einstein*, the consistent application of the program has ensured, in recent years, a reduction of 19% in the length of stay and an increase of 58.8% in bed turnover, resulting in an increase of 147 virtual beds, as expressed in the expansion of capacity of care that does not depend on an increase in the physical structure of beds.

DIGITAL CULTURE

The maturing of digital transformation is also the result of an investment in structure, development of new skills, processes and governance. In 2019, Einstein developed a specific program for attracting, developing and retaining data science experts, which involves more horizontal careers (with fewer levels and positions) and valuation process according to deliveries and professional maturity. Learning paths were defined for both specialists and professionals, mapped out in terms of improvement in key areas and for the leadership of the Institution.

Advancing the use of artificial intelligence with more assertiveness involves data governance. Several actions were carried out to address this challenge, such as the identification of areas and people who have mastery of each relevant data set and the development of data catalogs and a glossary. These initiatives aim to align concepts, increase data quality, simplify processes and make information more accessible.



PRIVACY AND DATA SECURITY

With the advance in healthcare information and communication technology resources, data protection challenges have also grown. As a result, the entire digital transformation process is accompanied by initiatives that strengthen the privacy and security of information.

The General Data Protection Act (LGPD), which was scheduled to go into effect in August 2020, required reviewing processes and mapping opportunities to improve privacy and data security across all Einstein environments. The current data processing flows used in the institution were mapped out through more than 100 interviews with employees and trials conducted in the main areas of patient and student relationships. This project, conducted in partnership with KPMG Consulting, allowed the action plan for adapting to the requirements of the new law to be refined and expanded. Training for leadership and teams was reinforced, bringing greater knowledge of the law and privacy care. The Cerner Millennium platform is an ally in this journey, centralizing information and ensuring traceability of patient data and effectiveness in monitoring access.

Guided by transparency, the term of consent for the use of patient information was revised to become clearer and easier to understand. The privacy policy has also been updated.

To discuss the implementation of the LGPD and its broader impact on activities, Einstein actively participates in technical groups in Anahp (National Association of Private Hospitals) and ABRAMED (Brazilian Association of Diagnostic Medicine).

INTERNAL RULES

In 2019, as one of the preparatory actions for the implementation of the LGPD, Einstein perfected the internal normative framework that deals with the issues related to the new law. The Data Privacy Policy has been revised and disciplinary measures have been launched to address the consequences of non-compliance.

PEOPLE TRAINED IN INFORMATION SECURITY (2019)

	Employees	Third parties	Total
Periodic training	13,347	-	13,347
Integration of new employees and third parties	3,320	431	3,761
E-learning	-	829	829
Total	**16,667**	**1,260**	**17,937**

BIG DATA AND INNOVATION FOR SUS

Offering SUS (Public Healthcare System) the benefits of Big Data and innovation to improve healthcare and policies is the goal of a project carried out by Einstein in PROADI-SUS ((Support Program for the Institutional Development of the Public Healthcare System). The work will allow the government to receive and process information at high speed and generate predictive models, contributing to a management culture based on data, information integration and artificial intelligence in the planning of healthcare actions.

BIG DATA

The term refers to the ability to quickly process large digital databases in different formats, structured or not, public or from the organization itself and turn them into useful and applicable information.

Two pilot actions are already being tested to create predictive models based on information from different sources, such as the SUS-DATASUS department of computer science, the census and georeferencing databases. The themes were chosen based on diseases that are considered critical.

One of the pilot projects evaluates the likelihood of complications of hypertensive and diabetic patients in 11 municipalities in the Mucuri Valley, in Minas Gerais, and in southern Bahia. Health workers receive information about the likelihood of heart attacks or stroke, based on the data of each individual, managed via tablets.

The other predictive model being tested calculates the risk of maternal-infant mortality by crossing various sources of information, including a message exchange application for pregnant women. The use of the app, combined with data from traditional sources, is evaluated by the system and estimates risks such as premature birth. This assessment of social media is innovative and seeks to understand whether these environments can help guide primary health care and care policies.

All information – collection mechanisms, validation processes, classification and use for decision-making — will be delivered to public managers. The expected results are: the improvement of decision-making and investment planning in the SUS system; the integration of data from various sources; the generation of knowledge, tools and solutions in key areas aligned with the National Health and Strategy and Healthcare Plan; and the expansion of data extraction and analysis capacity.

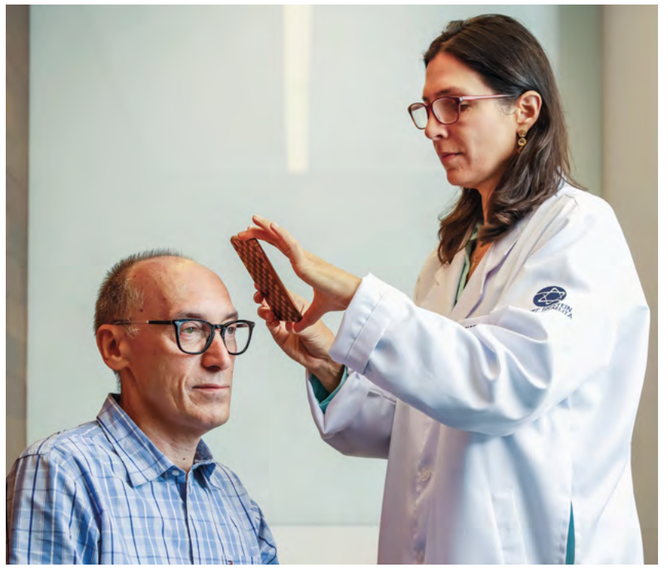
The project will be completed in 2020 and also includes actions for the use, innovation and dissemination of all the knowledge generated.

For more information, visit: https://hospitais.proadi-sus.org.br/projetos/24/big-data.

DISSEMINATION

To promote the culture of data analysis in the public system, the II International Symposium and Datathon: Artificial Intelligence in healthcare, in partnership with the Massachusetts Institute of Technology (MIT) and the Brazilian Ministry of Health, held a marathon of challenges related to population health, with 120 participants.

TELEMEDICINE



Tele Dermatology Care

HIGHLIGHTS

From 2012 to 2019, Einstein Telemedicine performed **178.2 thousand examinations**. Most, around 141 thousand were in the consulting category, such as the services of Tele ICU, Tele Clinical and Neurological Urgent Care, Telenutrology, Tele Dermatology and Tele Obstetrics, among others.

A pioneer in the use of the resource, Einstein uses telemedicine to improve the health system in different specialties. By means of Teletriage and Telediagnostics, for example, low complexity cases are treated quickly and safely, without patients having to wait in lines for urgent care. For health organizations or regions with a limited supply of specialists, distance care is essential for the correct referral of patients.

The Digital Urgent Care service (AP) provides 24-hour support to patients, hospitals, clinics and schools in situations classified as low complexity.

In services provided to companies, Einstein Telemedicine expands access to healthcare to employees located in small cities, such as Parauapebas (PA), more than 700 km from the capital Belém. At the staff outpatient clinic in the region, Einstein offers consultations to specialists at a distance, with a local professional acting as a facilitator.

Telemedicine also contributes to expanding access to Einstein and has started being offered by some healthcare providers as a complementary resource, at a fixed monthly rate, even in health insurance plans that do not include Einstein care. In one year, the number of users registered in the service grew tenfold, serving 330 thousand individuals – half of them without access to Einstein care through conventional health insurance plans. Patients traveling to the United States can also use the Digital Urgent Care (PA) service, which has a drug prescription support service in the country.

SUS ICUS

Einstein uses telemedicine in ICUs (Intensive Care Units) to improve the results of treatment of severe patients. With the participation of 30 public or philanthropic hospitals across the country, it provides remote access to medical specialists in the treatment of critical patients, not available in many of these institutions. This professional assists in decision-making and treatment support.

This PROADI-SUS (Support Program for the Institutional Development of the Public Healthcare System) project aims to reduce patient mortality and improve bed turnover in these ICUs, increasing the availability and effectiveness of the equipment for the population. Research on this activity, which has already served more than 4 thousand patients, will be completed in 2020.

SHARED EXCELLENCE

Einstein's knowledge of quality and safety processes, its strategic partnership with IHI and its experience in conducting collaborative projects with public and private institutions, gave rise, in 2019, to Einstein's Office of Excellence. The new structure brings together a group of experts dedicated to sharing good practices with other healthcare institutions and ensuring a safe environment for all.

The Office assists organizations to improve healthcare quality and safety; achieve sustainable results; seek partnerships to support public and private initiatives; generate and share knowledge; and develop skills on a large scale.

The projects are designed in partnership with the hospitals and the adoption of the improvements is made simultaneously to the training of internal teams. The aim is to build capacity, train specialists, and promote a sustainable model of organizational transformation through continuous improvement processes.

One of the activities carried out is the support of certification and accreditation processes using the collaborative method, in which groups of hospitals work together to accelerate the implementation of improvements.

The Office of Excellence coordinates public and private collaborative initiatives, described from the next page.

INTERNATIONAL EVENT

Einstein organized the fifth edition of the Latin American Forum on Quality and Safety in Healthcare, held in São Paulo, with the central theme of digital transformation. Held in partnership with IHI, the meeting brings together leaders and health professionals to discuss key issues for the development of a sustainable system.

On this occasion, the 1st International Symposium on Value-Based Health was also held. More than 2 thousand people from 15 countries participated in the event. Lectures and courses were held during the days of the forum, including artificial intelligence, Big Data and digital health.

HEALTH IN OUR HANDS

It is estimated that, since 2017, the promotion of good practices among health professionals and patients collaborated to prevent about 4 thousand cases of hospital infections in Intensive Care Units (ICU) of public hospitals and saved 1.4 thousand lives. The iniciative integrates the Health in Our Hands project — Improving Patient Safety on a large scale in Brazil, which involves ICUs (Intensive Care Unit) in 116 SUS hospitals.

The initiative is carried out as a partnership between 5 PROADI-SUS hospitals and aims to cut in half the Health Care Associated Infections (HCAIs). It has made advancements in the three types of infection it has monitored: in 2.5 years, it reduced urinary tract infections associated with the use of the bladder catheter by 62%; pneumonia associated with mechanical ventilation by 51% and infections in the bloodstream associated with central venous catheter by 46%.

The project is in 24 states and in the Federal District and its current cycle will be completed in 2020 — new hospitals will be selected in 2021. In addition to coordinating the project at the national level, Einstein directly offers guidance to 24 hospitals in implementing of measures to reduce infections through learning and coaching sessions in Improvement Science, known as the combination of system theories, variation, specific knowledge and psychology to drive significant changes.

HEALTH IN OUR HANDS PROJECT

116 PUBLIC HOSPITALS

24 STATES + FEDERAL DISTRICT

INFECTION DENSITY REDUCTION:

46% LESS BLOODSTREAM INFECTIONS

62% LESS URINARY TRACT INFECTIONS associated with bladder catheters

3,892 TRAINED PROFESSIONALS

51% REDUCTION IN CASES OF PNEUMONIA associated with mechanical ventilation

488.5 HOURS OF TRAINING

REDUCTION OF MATERNAL MORTALITY

After halving the maternal mortality rate at *Hospital Agamenon Magalhães* (HAM), the project was integrated with Parto Adequado program (*see more on the next page*) with the aim of associating care of pregnant women with vaginal delivery. The initiative will be extended to 25 public maternity hospitals in nine Brazilian states, which annually perform about 90 thousand births and care for more than 19 thousand women in urgent care units.

In 2019, Einstein trained about 200 professionals, including doctors, nurses and technical coordinators responsible for primary care in Pernambuco. The Training Workshop on Pre-natal Care, called "I recognize warning signs in pre-natal and puerperium care", took place in October, in the cities of Ouricuri and Serra Talhada, in the interior of Pernambuco, cities which are headquarters of healthcare regions IX and XI, compromising 22 municipalities and 190 Family Health Teams. By May 2020, another 70 professionals will be trained to do multiplication for the other healthcare regions of Pernambuco.

REDUCTION OF MATERNAL MORTALITY

25
PUBLIC MATERNITY UNITS
from 9 Brazilian states (SP, RJ, ES, MG, go, PE, CE, PA, RO) e AND UNITS FROM THE PRIMARY CARE NETWORK from 22 municipalities of the state of Pernambuco will participate in the project from 2020.

At *Hospital Agamenon* (PE), the maternal mortality rate fell
54.2%,
and the INTERVAL WITHOUT DEATHS, which was 18 days in the hospital before the project, ROSE TO 284 DAYS.

PARTO ADEQUADO (SUITABLE BIRTH) PROJECT

Starting in 2020, the *Parto Adequado* project will enter a new phase, called "intensive cycle". Sixty public and private hospitals, selected from the group of 135 organizations participating in the initiative, will assist in the review of the package of safe practices and measures for reducing cesarean sections without medical indication. The evaluation will guide the national expansion of the project. A communication campaign is being broadcast throughout Brazil, emphasizing the importance of correct care for pregnant women and valuing natural childbirth.

During the first two phases of *Parto Adequado*, from February 2015 to July 2019, 20.6 thousand unnecessary cesarean sections were avoided, representing savings of R$ 45 million to the healthcare system. The lower number of surgical births also has a positive effect in reducing the length of hospitalization of mothers and babies, improving bed turnover.

When there is no medical indication, a cesarean section generates unnecessary risks for the mother and baby, increasing by 120 times the likelihood of respiratory problems in the baby and tripling the risk of death of the mother. Brazil is the country with the most caesarean sections in the world, making up 55% of births. The rate recommended by the World Health Organization (WHO) is 10% to 15% of all births.

From the positive results achieved, the two public hospitals operated by Einstein (*Hospital Municipal Vila Santa Catarina* and *Hospital Municipal M'Boi Mirim*) will assume, starting in 2020, the role of becoming *Parto Adequado* hubs. In addition to continuing with the internal efforts related to the project, each hospital will be responsible for guiding the adoption of good practices in 5 public hospitals each, through mentoring initiatives and follow-up on the implementation of action plans.

PARTO ADEQUADO (SUITABLE BIRTH) PROJECT

In 2.5 years,
20.6 THOUSAND
unnecessary cesarean sections WERE AVOIDED

SAVINGS of
R$ 45 MILLION

NEXT STEP: immersive cycle, with
60 PARTICIPATING HOSPITALS
AND THE NATIONAL *PARTO ADEQUADO* CAMPAIGN, officially launched at the 5th Latin American Forum on Quality and Safety in Healthcare

EINSTEIN QUALITY IN THE MIDWEST REGION

The Einstein hospital management model, based on quality, operational efficiency and patient safety, arrived in the Midwest with the inauguration, in December 2019, of *Hospital Órion*, in Goiânia (GO). This hospital unit is the first to count on Einstein's management outside the city of São Paulo and, since its conception, was structured with the support of Einstein's consulting services.

Hospital Órion is part of a multi-purpose complex in the capital of Goiânia, which includes a hotel, Convention Center, towers with more than 300 clinics, and a shopping mall. Out of a total of 200 beds planned to be in use by the end of 2021, 50 are already in operation, 10 of which are intensive care beds. The apartments are individual and humanized, and have technological features that facilitate the routine of the patient, such as phone and video calls with the nursing station and hospitality services via tablet.

Bone marrow transplant patient facilities have a triple barrier, including an antechamber for physical control, minimizing the risk of infections. There are 9 smart operating rooms, 2 hemodynamics rooms, a laboratory with a processing capacity of 150 thousand examinations per month and a Diagnostic Center completing the structure. The portfolio of services includes clinical, genetic and imaging analysis, connected to the structure of *Hospital Israelita Albert Einstein*, in São Paulo.

In line with what Einstein already puts into practice in the operation of public units (*see Page 24*), this contract provides for the continuous transfer of knowledge and commitment to excellence.

Einstein coordinated the entire process of selecting new employees. There were more than 9 thousand applicants for a total of 350 vacancies. Those hired received a 15-day immersive training with Einstein professionals on structure, operating procedures, culture and values. The impact of the training of these professionals goes beyond Hospital Órion since part of the team works in other health institutions and will certainly share what they learn with others.

EDUCATION AND KNOWLEDGE

Driven by the management work of the new hospital, Einstein will extend some of the teaching activities to Goiânia offering the Operational Excellence in Healthcare course in 2020. In addition to the technical aspects, the education project focuses on humanized care, which is able to respond to the future demands of the health market. Goiânia will be the fourth capital outside São Paulo with Einstein's in-person post-graduate course, along with Belo Horizonte, Curitiba and Rio de Janeiro. To learn more about Einstein's teaching programs, see page 58.

RELIABILITY AND SAFETY

The safety management in offering Healthcare Services at Einstein take into consideration the care environment, the employee and the patient for the proactive surveillance of risks, the monitoring of performance against goals and the strong engagement of all professionals. Within the framework of leadership, the theme is the object of permanent emphasis and the improvement goals are periodically reviewed, followed by indicator dashboards.

The Safety Huddle, in which more urgent aspects of safety management are discussed, is a daily practice of the main leaders of the Medical, Administrative and Supply areas, along with Nursing, Nutrition, Physical Therapy, Pharmacy, Property Security and Information Technology, and often has the participation of the Einstein president. In addition to encouraging the exchange of information on risks and adverse events with rapid responses, the meetings reinforce the safety culture and situational awareness.

In the care areas, doctors, nurses and physical therapists trained at Einstein in patient safety concepts and practices meet in triads. These are structures responsible for leading in various areas the identification of risks, opportunities for improvement and action plans.

This ongoing effort translates into concrete results and continuous improvement of indicators. Einstein's performance is even better, in fact, than those of the main national and international benchmarks in the different aspects monitored (*see table*).

PATIENT SAFETY

MORUMBI UNIT AND DIAGNOSTIC MEDICINE AREA

	2016	2017	2018	2019	Δ 2019/2018
Parto Adequado - vaginal delivery rate - pregnant Robson I to IV[1]	42.9%	41.9%	44.4%	49.0%	4.6 p.p.
Rate of blood stream infection associated with central venous catheter[2]	0.49	0.44	0.47	0.24	-48,9%
Rate of pneumonia associated with mechanical ventilation[3]	0.67	2.00	0.44	0.50	13.6%
Rate of urinary tract infection associated with bladder catheter[4]	1.00	0.22	0.37	0.30	-18.9%
Rate of surgical site infection in clean surgery[5]	0.21%	0.14%	0.13%	0.14%	0.01 p.p.
Pressure injury rate - stage III and IV[6]	3	2	8	3	-62.5%
Fall rate with severe damage[7]	10	6	6	8	33.3%
Catastrophic events rate[8]	21	8	3	4	33.3%
Bronchoaspiration rate with severe damage[9]	7	1	0	3	-
Readmission rate within 30 days[10]	.6.1%	.6.1%	6.4%	6.8%	0.4 p.p.
Diagnostic error rate of sepsis and septic shock Urgent Care Units (UPA)[11]	6.0%	5.0%	6.0%	4.8%	-1.2 p.p.

[1] Number of vaginal deliveries in Robson pregnancies 1 to 4/total number of Robson pregnancies 1 to 4 *100.
[2] Total number of infections/total number of catheter passages *1,000.
[3] Total number of pneumonias/total number of patients on ventilation *1,000.
[4] Total number of infections/total number of catheter passages * 1,000.
[5] Total number of infections / total number of clean surgeries * 100.
[6] Total number of pressure injuries — stage III or IV.
[7] Total number of falls with serious internal/external damage.
[8] Total number of catastrophic adverse events.
[9] Total number bronchoaspiration events with severe damage of inpatients and outpatients.
[10] Number of patients re-admitted in 30 days (excluding Oncology and Hematology) / total number of discharges (excluding Oncology and Hematology) *100. Discharge: indicates the patient's exit from the inpatient unit due to release (cured, improved or unchanged), evasion, withdrawal from treatment, internal transfer, external transfer or death.
[11] Number of delays/error in the diagnosis of sepsis and septic shock in UPA patients / total number of patients discharged who organic dysfunction began in UPAs *100. Discharge is the exit of the patient from the inpatient unit due to discharge (cured, improved or unchanged), evasion, withdrawal from treatment, internal transfer, external transfer or death.
Pp : percentage point.

HIGH RELIABILITY ORGANIZATION

Since 2018, Einstein has pursued the goal of becoming a High Reliability Organization (HRO). The term arose in the 1980s to designate ideal risk management models in sectors such as nuclear power generation, aviation and the oil industry, in which an error can have catastrophic consequences. More recently, it also began to be used by healthcare organizations. In the Agency's definition for Healthcare Research and Quality (AHRQ), HROs are organizations that operate in complex, high-risk fields for long periods without major accidents or catastrophic failures.

The goal of Einstein is to improve the action plans and identification of potential damages based on five elements that make up the HRO concept:

1. Intolerance to failures: actively think about what can go wrong and be alert to signs of potential problems;

2. Reluctance to simplify: seeking deeper explanations for process failures;

3. Situational awareness: understanding the context of the organization's activities that may reinforce or threaten security;

4. Appreciation and recognition of the knowledge of the professionals in the operation: listening to those who perform and know the activities in detail; and

5. Commitment to resilience: assume that systems are unreliable and quickly identify threats before they cause damage.

THE BEST REFERENCES

To mark its own performance and guide the improvement of care quality, Einstein participates in international reference records in several specialty areas. Among them, the Action and CathPCI records (from the American College of Cardiology) and STS (from the Society of Thoracic Surgeons) in the area of Cardiology and participation in the area of neonatology in the Vermont Oxford Network stand out.

UNIFIED VISION

The standards, objectives and quality and safety controls practiced by the organization are applied in the three hospitals it manages, regardless of the nature of the care — whether public or private —, and each follows specific action plans and improvement measures. The monitoring of actions and results is carried out by committees organized by aspect or area, such as the Intensive Care Unit, Urgent Care, Hospital Infection and Quality.

PATIENT SAFETY

HOSPITAL MUNICIPAL M'BOI MIRIM

	2016	2017	2018	2019	Δ 2019/2018
Parto Adequado - Vaginal delivery rate - Robson pregnancies I to IV[1]	ND	ND	82.7%	87.2%	4.5 p.p.
Rate of blood stream infection associated with central venous catheter[2]	1.94	2.22	2.75	3,95	43.6%
Rate of pneumonia associated with mechanical ventilation[3]	0.17	0.67	1.86	1.51	-18.8%
Rate of urinary tract infection associated with bladder catheter[4]	1.66	1.73	1.14	1.00	-12.3%
Rate of surgical site infection in clean surgery[5]	ND	0.69%	0.74%	0.55%	-0.19 p.p.
Pressure injury rate - stage III and IV[6]	ND	ND	ND	16	-
Fall rate with severe damage[7]	0	2	0	0	-
Catastrophic events rate[8]	12	9	14	2	-85.71%
Bronchoaspiration rate with severe damage [9]	0	0	1	0	-100.00%
Readmission rate within 30 days[10]	8.2%	10.3%	6.4%	7.4%	1 p.p.

PATIENT SAFETY

HOSPITAL MUNICIPAL VILA SANTA CATARINA

	2016	2017	2018	2019	Δ 2019/2018
Parto Adequado - Vaginal delivery rate - Robson pregnancies I to IV[1]	ND	82.0%	83.0%	81.8%	-1.15 p.p.
Rate of blood stream infection associated with central venous catheter[2]	n/a	2.55	1.85	1.40	-24.3%
Rate of pneumonia associated with mechanical ventilation[3]	n/a	0.00	0.00	0.00	-
Rate of urinary tract infection associated with bladder catheter[4]	2.72	1.02	0.51	0.27	-47.1%
Rate of surgical site infection in clean surgery[5]	ND	0.92%	0.72%	0.70%	-0.02 p.p.
Pressure injury rate - stage III and IV[6]	ND	0	0	1	-
Fall rate with severe damage[7]	ND	1	2	1	-50.0%
Catastrophic events rate[8]	ND	6	7	7	0.00%
Bronchoaspiration rate with severe damage [9]	ND	0	1	2	100.00%

[1] Number of vaginal deliveries in Robson pregnancies 1 to 4/total number of Robson pregnancies 1 to 4 *100.
[2] Total number of infections/total number of catheter passages *1.000.
[3] Total number of pneumonia/total number of patients on ventilation *1.000.
[4] Total number of infections/total number of bladder catheter passages * 1.000.
[5] Total number of infections/total number of clean surgeries *100.
[6] Total number of pressure injuries —stage III or IV.
[7] Total number of falls with serious internal/external damage.
[8] Total number of catastrophic adverse events.
[9] Total number of bronchoaspiration events with severe damage of inpatients and outpatients.
[10] Number of patients re-admitted in 30 days (excluding Oncology and Hematology)/total number of discharges (excluding Oncology and Hematology) *100. Discharge: indicates the patient's exit from the inpatient unit due to release (cured, improved or unchanged), evasion, withdrawal from treatment, internal transfer, external transfer or death.
NA: data not available.
P. P.: percentage points.

CLINICAL STAFF APPRECIATION

With a strategic role in the pursuit of excellence and patient-centered action, Einstein's clinical staff is made up of nearly 10,000 doctors, who are its key partners. These professionals have experienced profound transformations in the healthcare area, with the adoption of new technologies, discussion of compensation models and changes in the profile of patients, who are now more informed and engaged in clinical decisions. To support them in the face of these new challenges and strengthen the relationship, Einstein has designed a new project in partnership with IHI.

Focused on building a common purpose the initiative promoted the first meetings in 2019, adopting the focus group methodology to listen to the needs of physicians, multidisciplinary care professionals and patients. In addition to broadening listening channels, meetings promote knowledge and generate awareness for change. The intention is to jointly define the best practices for strengthening safety, patient care and respect for their preferences while adding efforts to reduce inequities and promote the sustainability of the system.

The strategy also seeks to maintain the attraction of the best health care professionals and loyalty in the relationship.

The Grupos Médicos Assistenciais (Medical Assistance Groups /GMAs), created in 2013, are also dialogue channels that strengthen the link between the organization and the clinical staff by discussing developments in healthcare. These forums will also serve as inputs to the new relationship program. There are 27 GMAs organized based on specific diseases or conditions, therapies and technologies, which promote discussions and the joint construction of knowledge. In addition to doctors, they include representatives from the multidisciplinary team, thus offering a complete overview of healthcare assistance.

RELATIONSHIP TOOLS:

- ***Einstein Médicos*:** app integrated to the Cerner Millennium platform, offering information to patients and safety alerts, among other functions;

- **GMA Medical Assistance Groups:** forums for exchanging ideas on diseases, specific conditions or therapies and technologies; and

- **Segmentation and Feedback Program:** based on meritocracy, it evaluates performance, including social responsibility, teaching and research and analysis in relation to peers in the same specialty. It is performed by doctors and nurses linked to medical practice to ensure specialized knowledge.

PATIENT EXPERIENCE

Safety of Patient, **P**assion in Serving and **A**ttention to detail (**SPA**): these are the pillars of managing the patient experience at Einstein, which characterize its care model, expressed in the acronym SPA.

To achieve the main SPA objectives, the Einstein Patient Experience Accelerator Program organizes actions on several fronts, with the participation of employees from all levels and departments. The pillars of the program are:

- Employee and physician engagement, especially with a focus on Person-Centered Care;
- Training and capacity building of employees regarding the SPA principles;
- Patient engagement in healthcare and education;
- Patient safety and transparency in care;
- Monitoring of outcomes that matter to the patient and the Institution;
- Improvements in patient flow, ensuring a more fluid and efficient journey;
- Ensuring a healing environment; and
- Definition of indicators and targets to measure patient experience.

Among the actions carried out in 2019, we can highlight employee engagement in the various aspects that affect the patient's experience and the review of training focused on the theme, with the use of new learning methodologies, and the emphasis on socio-emotional skills relevant to the practical application of SPA aspects at work. The process of drafting the training track involved leaders, employees and patients and was supported by design thinking tools and focus groups.

The onboarding process of newly hired employees started to include a day devoted to both face-to-face and digital training, in experiential scenarios related to customer service, quality in the provision of services and conflict management. The contents were also adapted to the specificities of the different teams that relate to clients, such as assistance area, reception, waiters, and servers, among others. The organization's commitment to the theme was also the target of several internal campaigns.

ENGAGEMENT AND PARTICIPATION

In five advisory councils — Oncology, Inpatients and Outpatients, Elderly patients, Pediatrics and Patient Safety — about 60 Einstein patients and professionals maintain a bimonthly agenda of meetings to define points of awareness, paths and solutions for improving processes. These discussion spaces privilege the patient's point of view, being essential for the learning process of the entire organization about their expectations and priorities.

Since 2019, in addition to the Advisory Councils, patients have also joined two strategic institutional forums, the *Comitê de Qualidade e Assistência* (Care Quality Committee / CQA) and the Patient Experience Implementing Committee.

PERSON-CENTERED CARE APPROACH

Einstein was the first Brazilian health care organization to receive the Planetree Person-Centered Care, Gold Version 2 Certification, which formally recognizes institutions that practice a humanized approach to care, based on standards and evidence.

This certification was developed by Planetree International, an organization that is a benchmark for person-centered care practices. Planetree is active in 23 countries and has over 700 partner organizations around the world.

Einstein had already held recognition from Planetree since 2011 and in 2012 began hosting the Planetree Brazil office, which seeks to disseminate good practices upheld by the organization.

MONITOR THE PERCEPTION

Einstein actively monitors patient perception regarding the care they received based on yearly satisfaction surveys and through a questionnaire using the Net Promoter Score methodology, which mesuresloyalty or level of recommendation, after patients have received care.

The patients and those accompanying them express their opinions personally and virtually and their responses are monitored by the Patient Experience Office.

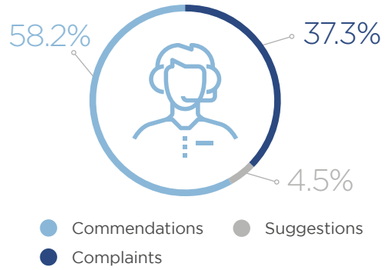
The information gathered is used to guide improvement actions.

PATIENT SATISFACTION

	2016	2017	2018	2019[3]	Δ 2019/2018
Emergency/Urgent Care					
Satisfaction[1]	85.0%	86.9%	84.3%	85.6%	1.3 p.p.
NPS[2]	52.1	62.4	71.0	66.0	-7.0%
Hospital admission					
Satisfaction[1]	94.0%	90.7%	91.0%	92.4%	1.4 p.p.
NPS[2]	74.8	74.4	77.9	82.0	5.0%
Diagnostic medicine					
Satisfaction[1]	95.0%	94.0%	94.0%	91.6%	-2.4 p.p.
NPS[2]	80.7	81.5	80.0	83.8	4.5%
Doctors' Offices					
Satisfaction[1]	93.0%	92.9%	93.2%	94.3%	1.1 p.p.
NPS[2]	70.8	74.3	80.8	81.4	0.7%
Check-up					
Satisfaction[1]	93.0%	91.2%	95.2%	93.5%	-1.7 p.p.
NPS[2]	71.2	66.1	78.6	77.9	-0.9%

[1] Patients are very satisfied or satisfied with Einstein's services.
[2] Net Promoter Score: considers a scake of -100 to +100.
[3] Until 2018, the patient survey was conducted yearly. In 2019, the survey was included in the post-service procedures and the volume of responses increased to 40 thousand, nearly ten times greater than it had been in 2018.
P.p.: percentage points.

CUSTOMER SERVICE (SAC) CONTACTS (2019)



CONTACTS RECEIVED THROUGH CUSTOMER SERVICE (SAC)

Type of Contact (absolute numbers)	2017	2018	2019	Δ 2019/2018
Commendations	13,679	12,548	9,071	-27.7%
Complaints	5,167	5,496	5,814	5.8%
Suggestions	887	887	702	-20.9%
Total	19,733	18,931	15,587	-17.7%
Stays[1]	1,030,769	1,054,695	1,161,273	10.1%

1 Number of patients registered at all Einstein units.

DIAGNOSTIC MEDICINE

Einstein is an important player in the diagnostic medicine segment in terms of quality, volume of care and portfolio of services. It serves patients and healthcare organizations in the supplementary and public health sectors with laboratory and imaging tests.

In the area of clinical analysis, the Núcleo Técnico Operacional (Operational Technical Center / NTO) concentrates most of the examinations from Einstein's own network and other healthcare organizations. As part of Einstein's Clinical Laboratory, the new space was opened in early 2019 and allowed expansion of the services offered and the speed of analysis.

With the capacity to perform 2 million exams per month and an expandable structure, which can be easily adapted to increased demand, NTO has state-of-the-art technology and an unprecedented level of automation in Latin America. The laboratory offers agility, operational efficiency and, above all, precision and safety in diagnosis, contributing to decide on the most appropriate treatment. The automation mat, a structure that is unique in the world, integrates the laboratories of biochemistry, immunology, hematology, coagulation and molecular biology.

In 2019, laboratories from four hospitals in Rio de Janeiro (RJ), one in Campinas (SP), one in Sorocaba (SP) and one in Goiânia (GO) were added to the NTO. In the area of pathological anatomy, a fundamental service for oncological diagnosis, Einstein partnered to process the exams from four hospitals in Rio de Janeiro and two in São Paulo (SP).

GENOMICS

With a wide portfolio and more than 400 genetic examinations, the Genomics Laboratory has state-of-the-art equipment and techniques. Associated with a counseling center and several clinical specialties, the laboratory is part of the Center for Personalized Medicine and seeks to individualize the diagnosis, treatment and prevention of diseases, thus ensuring the best care for patients.

NEW TECHNOLOGIES

Einstein constantly invests in new technologies to improve the services offered. In 2019, a new sequencer increased the processing capacity of exams by five times with 32 thousand different genetic tests were performed. Einstein uses this technology, for example, in PGT-A genetic screening, which evaluates the viability of embryos in in vitro fertilization treatments, and in the sequencing of the complete exome, which does genetic mapping and investigation of rare diseases.

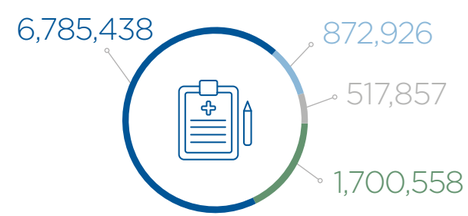
Within the scope of Clinical Research, Einstein began to perform, in partnership with the Ministry of Health, the sequencing of the entire genome, an even broader procedure, evaluating all human genes.

In a pioneering way, the Viroma/ Metagenoma test is being implemented, which improves the diagnosis of clinical conditions of undetermined origin, especially new epidemics from unknown viruses. The test investigates all microorganisms (bacteria and viruses) present in the collected material, allowing for more accurate diagnostics.

In partnership with the Government of Pernambuco, and from its facilities in Recife, Einstein began to perform, in September, Histocompatibility Tests (HLA, from Human Leukocyte Antigens in portuguese) for the solid organ and bone marrow transplant program. In 2020, the partnership should make it possible to perform 10,000 exams, benefiting patients waiting in line for a transplant.

PROCESSED EXAMS (2019)

TOTAL: 9,876,779



ONCOLOGY

The Einstein Oncology and Hematology Center brings together all stages of healthcare, from diagnosis to post-treatment.

In the area of Oncology, the integrated care model includes oncological — urological, gynecological, digestive and chest surgery — clinical, pediatric, geriatric, interventional (guided biopsy) and dental Oncology, Radiotherapy, Nutrology, Nutrition, Rehabilitation, Physical Therapy, Psychology, Psychiatry, Integrative Medicine And Palliative Care.

The Center also houses the Einstein Hematology and Bone Marrow Transplantation (BMT) program, which has a team that plans and performs procedures allied to a complete laboratory infrastructure, mainly in the areas of pathological anatomy, hematology, HLA and microbiology. Einstein is able to provide all transfusion care, collection, separation and freezing of hematopoietic stem cells. It also has an umbilical cord bank, contributing to the execution of non-related transplants.

ONCOLOGY AND HEMATOLOGY

	2016	2017	2018	2019	Δ 2019/2018
Office consultations	14,852	16,158	18,717	21,534	15.0%
Appointments in the Oncological Urgent Care department	703	974	991	1,236	24.7%
Surgical oncological procedures	3,248	4,977	4,747	4,634	-2.4%
Bone marrow transplants performed	61	70	50	97	94.0%
Patients treated at the chemotherapy outpatient clinic (Morumbi and Perdizes Units)	6,515	9,096	9,527	9,954	4.5%
Outpatient chemotherapy	20,193	23,294	23,765	24,933	4.9%
Outpatient radiotherapy	13,080	14,269	15,284	19,889	30.1%

In a specific structure of Oncological emergency care, Einstein ensures the rapid assessment and referral of urgent and emergency cases, whether by adverse effect of the treatment, disease evolution or other unrelated health conditions.

Within the framework of PROADI-SUS (Support Program for the Institutional Development of the Public Healthcare System), Einstein is coordinating a study on a new technique of rectal cancer treatment that, combined with standard treatment, can reduce the need for surgery and improve the living conditions of post-treatment patients.

For more information, visit: https://hospitais.proadi-sus.org.br/projetos/148/tnt.

EXPAND IMPACT

The Einstein Oncology and Hematology Network supports reference clinics, disseminates knowledge and collaborates for the quality of the fight against cancer in different regions of the country.

The initiative emerged in 2016 and currently includes five units, located in Brasilia (DF), Salvador (BA), Curitiba (PR), Manaus (AM) and Aracaju (SE). To the professionals of these clinics, Einstein offers access to training events and customized training programs, sharing of operational, therapeutic and organizational protocols, the possibility of scientific initiatives and joint clinical studies and consulting actions in quality control.

SURVIVORSHIP PROGRAM

This is a pioneering initiative in Latin America and supports patients in the process of resuming life routines after the end of treatment through an individual care plan, which considers aspects such as diseases resulting from the use of chemotherapy, weight change and self-esteem. The actions are conducted by professionals in the areas of body therapy, health coaching, integrative medicine, nutrition and psychology and a nurse responsible for guiding the “navigation” through the various stages of care.

EDUCATION AND TRAINING

EINSTEIN PREPARES PROFESSIONALS TO WORK IN THE AREAS OF HEALTHCARE AND MANAGEMENT IN ORDER TO COLLABORATE TOWARDS MEETING THE CHALLENGES OF THE SECTOR.

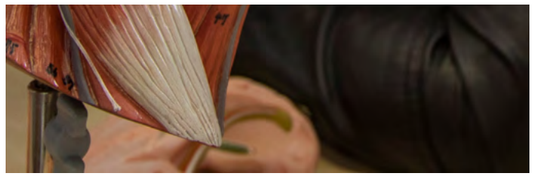
QUALIFYING THE HEALTH CARE SECTOR

Through different teaching modalities, Einstein prepares professionals to work in the areas of healthcare management and assistance, therefore helping them to face the challenges of the sector. The portfolio includes technical courses, technicians involved in High Schools with a focus on healthcare, Undergraduate Degrees in Nursing and Medicine, Medical And Multiprofessional Residency, Specialization (Lato Sensu Degree), MBA (Master in Business Administration), Master's Degree, Stricto Sensu Degree, Training and In Company Programs.

In Undergraduate Courses, Einstein adopts an innovative teaching method, which involves practical and group activities as well as experiences and simulation of real cases in order to promote — starting in the first year — a more intense interaction between students and patient care.

The curriculum is taught using the most modern teaching and training techniques, such as the Center for Realistic Simulation, the Center for Experimentation and Training in Surgery, as well as virtual libraries.

The medical course completed its fourth year in operation in 2019, at which time the students began their internship that, at Einstein, has a longer duration of 2.5 years. This is the moment when students intensify contact with care practices, including the follow-up of medical procedures. Students are divided into groups to go through all the units operated by Einstein, starting with the *Hospitais Municipais M'boi Mirim - Dr. Moysés Deutsch* and *Vila Santa Catarina - Dr. Gilson de Cassia Marques de Carvalho* and the UBSs (Basic Health Units) in the first half of 2020. The medical curriculum is aligned with the Triple Aim governance model and brings together technical and management knowledge aimed at equipping medical leaders. In 2019, the number of vacancies in the course increased from 100 to 120.



EDUCATION AND TRAINING

Having completed 30 years in 2019, the Nursing Course has been recognized for its excellence and has improved progressively. In addition to a five star rating in *Guia do Estudante* (Student Guide), the course was the only one from a private university to receive maximum score in the ranking of The Jornal Estado de São Paulo newspaper and achieved the maximum score (5) in the last ENADE - *Exame Nacional de Desempenho dos Estudantes* (Brazilian National Exam on Students' Performance), conducted by the Ministry of Education & Cultures (MEC) in 2018. The course focuses on practical action, including 1,200 internship hours, one third more than the amount established by MEC, in addition to monitoring practices and scientific initiation.

Einstein launched its first MBA course in 2019: Executive MBA in Healthcare Management. Good healthcare management reduces inefficiency and improves the quality and safety of services as this expertise has been developed at Einstein, it now shares this knowledge and helps train professionals to work in this area, in both the public and private sectors. The program was redesigned and demand for it became five times greater in 2019 compared to 2018.

The establishment of a center to manage the MBA also opened up space for offering short-term courses in other healthcare areas in topics related to management, such as Laws, Compliance and Data Protection.

MODALITY

	2016	2017	2018	2019	Δ 2019/2018
Technical courses	688	713	786	667	-15.1%
Technical High School[1]	ND	ND	ND	106	NA
Undergraduate Nursing	195	246	282	302	7.1%
Medical degree	100	197	297	418	40.7%
Refresher courses	2,979	1,924	2,607	3,437	31.8%
Distance learning courses[2]	3,524	5,710	6,119	12,908	110.9%
Training in the Realistic Simulation Center	10,351	11,636	12,881	14,721	14.3%
Postgraduate Courses Lato Sensu	3,667	4,002	4,458	5,058	13.5%
Professional master's degree in Nursing	38	33	40	54	35.0%
Total students	**21,542**	**24,461**	**27,470**	**37,671**	**37.1%**
Scientific events	12,555	14,532	10,979	10,996	0.2%
Total students and participants in scientific events	**34,097**	**38,993**	**38,449**	**48,667**	**26.6%**

[1] Started in 2019.
[2] The total number of DL (distance learning) students includes post-DL, retail DL, in company DL and students involved in activities from the PROADI-SUS program. It does not consider students in in-person courses that used the DL structure.
ND: not disclosed. NA: does not apply.

TECHNICAL EDUCATION INTEGRATED INTO HIGH SCHOOLS

In 2019, Einstein's ETEC (High School Vocational Training) classes began. There are two courses: Healthcare Administration and Nursing. In line with current demands, the pedagogical project includes practices such as empathy, ethics, leadership, trust, creativity, responsibility and autonomy.

The internships, starting in the second year of the course, take place at *Hospital Israelita Albert Einstein* and the *Hospital Municipal Vila Santa Catarina*, giving students the opportunity to act in public and private settings. The first year class had 106 students. About 40% have scholarships of up to 70% of the monthly amount, selected by socioeconomic criteria.

CONSTRUCTION PROGRESS

The *Faculdade Israelita de Ciências da Saúde Albert Einstein* will have a new and modern teaching space at the end of 2021. Construction is under way in an area that includes land donated by the Szajman family — next to the Morumbi Unit. The space will house the *Centro de Ensino e Pesquisa Albert Einstein — Campus Cecília e Abram Szajman* (Abram Szajman Health Education Center (CESAS), which will strengthen the training of health professionals and leaders. The space will welcome undergraduate students and Einstein researchers in welcoming environments within an area of more than 44 thousand square meters.

CONTINUOUS TRAINING

Offering complementary content for the training of healthcare professionals or medical updating is the goal of a new service created by Einstein. The proposal seeks to expand the possibilities of personalized learning and keep professionals updated on the main medical and technological advances.

Divided by medical specialties, the material was structured based on learning tracks, in which the user advances progressively and evaluates their performance in tests before and after gaining access to each step. The information menu considers the 176 most prevalent pathologies, and amounts to more than a thousand hours of training. The material is made available through an app and was prepared by 90 physicians from Einstein's clinical staff. Access to the service is gained through a subscription.

The content was gradually made available in 2019 and 153 thousand downloads of the application were registered.

SCHOLARSHIPS

The Einstein scholarship program counts on the important contribution of benefactors who make donations to allow low-income students to have access to quality medical education. The initiative is an essential contribution not only to these students and their families, but to society as a whole, which can in turn be served by better trained professionals.

In the Medicine Degree, 118 students receive some kind of financial support, including 88 fellows (33 with full scholarship, 43 with the benefit of 75%, in addition to those receiving 50% and 25% discounts) and 30 students who have access to student financing. The criteria for granting benefits are the socioeconomic condition of the student and his/her academic performance.

In return, fellows perform tasks in different areas at Einstein, being integrated into all environments. Some of the activities where the fellows offer assistance are support to postgraduate courses, *Centro de Treinamento em Cirurgia* (Center for Experimentation and Training in Surgery - CETEC), the Office of Excellence, the Library, the Young Editor Program and Monitoring for High School Students participating in the Healthcare Technician course.

POSTGRADUATE COURSES

The in-person postgraduate courses, which were already offered regularly in São Paulo (SP), Rio de Janeiro (RJ), Belo Horizonte (MG) and Curitiba (PR) — the latter in partnership with *Universidade Positivo* — will also be extended to Goiânia (GO) starting in 2020 (*see Page 44*).

EDUCATION FOR HEALTH

Starting as a pilot program in 2019, the program offers health education for children aged 6 to 11 (Elementary School) and has accumulated relevant results, such as a 20% increase in hand washing before lunch and after toilet use and more than 40% increase in tooth brushing three times a day.

The improvement was identified based on a comparison of the results of the PeNSE - *Pesquisa Nacional de Saúde do Escolar* (National Survey of School Health) survey conducted by *Instituto Brasileiro de Geografia e Estatística* (Brazilian Institute Of Geography And Statistics – IBGE), before and after the implementation of the program. About 670 children answered each survey.

With playful content associated with formal disciplines, the program prepares teachers to bring to the classroom topics such as Hygiene, Nutrition, Physical Activity, Environment and Mental Health. The program was applied in schools in Itapevi and Ribeirão Preto and in the Gaia+Lab project in Piracicaba, which offers after-school activities. A total of nearly 1000 students participated.

EDUCATION AND TRAINING

EFFECTIVENESS

In consultations with alumni, Einstein monitors the impacts of the training offered and its contribution to their career development. In 2019, a survey of 384 nursing graduates indicated that 76% were working in the area, 42% in general care roles and 23% in leadership positions. Seven out of every ten graduates of the course have an income of between R$ 3,500 and R$ 9,000, 45% were hired during the course and 91% found employment up to a year after graduation. A total of 98% consider the contribution of the course to their professional training excellent or good and 93% would go back to studying at Einstein.

STUDENTS SATISFACTION[1]

	2016[3]	2017	2018	2019
Net Promoter Score (NPS)[2]	77	79	82	72

[1] General Data from Education areas.
[2] The Net Promoter Score methodology measures the degree of recommendation on a scale of -100 to +100 positive.
[3] 2016 data does not include undergraduate Medical students.

ACTIVITY IN THE AMAZON

The first Einstein post-graduate class in Quality Healthcare Management in the northern region of the country was held in Manaus (AM), as a result of a donation made by the Minev family. The objective of the course, which was offered free of charge, was to generate knowledge and social transformation by offering the professionals working in public healthcare in the region an opportunity to receive specialized training. More than a thousand people applied and 39 were selected for training in areas such as Biomedicine, Nursing, Medicine, Physical Therapy and Nutrition.

With a duration of 12 months, the curriculum involved classes with Einstein's clinical staff professionals and a 360-hour class load. The participants also spent three days at *Hospital Israelita Albert Einstein in São Paulo* (SP). For the final thesis, quality improvement projects applied to the local health system were carried out, such as projects for dealing with measles in Manaus, new drug management practices, formation of patient safety center and adoption of electronic medical records, among others. The success of the initiative has already opened the opportunity for a new class, scheduled for 2020.

OPERATIONAL EXCELLENCE

The *Academia Einstein de Excelência Operacional* (Einstein Academy of Operational Excellence) aims to disseminate the culture of continuous improvement and process management in the healthcare area, through teaching and consulting activities, taking as reference the experience gained through the *Programa Einstein de Excelência Operacional* (Einstein Operational Excellence Program).

The main topics covered are:

- Strategy: strategic planning and management by guidelines, matrix management of expenses;
- Leadership: leadership models, change management and negotiation;
- Project management: operational efficiency (Lean Six Sigma), investment and innovation;
- Value flows: patient flow, supply chain and cost and revenue cycle; and
- Routine management: quality, safety and environment and management of healthcare risks and physical structures.

From 2016 to 2019, 17 classes were completed with the participation of more than 600 students, which ensured the execution of more than 200 operational improvement projects in healthcare organizations from different regions around the country.

CONSULTING AND MANAGEMENT

The complexity of operations in the healthcare sector and the gaps in efficiency demand a professional approach to support management. Through the provision of consulting services, Einstein puts its knowledge and experience at the disposal of public and private healthcare organizations committed to the pursuit of excellence in care, which includes quality, safety, patient-centered action and efficiency in the use of resources.

The initiatives serve organizations in Brazil and abroad and aim to integrate the best care practices, increase results, productivity and efficiency and offer the best solutions for the challenges faced by organizations, to contribute to high, sustainable, and long-term performance.

The projects developed include the complete design of healthcare operations and support in their implementation, guiding organizations to achieve their full potential within their areas of activity, in line with the approach adopted internally by Einstein.

The consulting work also identifies opportunities for applying technologies to improve processes and develop new solutions. The initiatives aim to strengthen the skills necessary to sustain the health sector in a scenario of major challenges, such as changes in age and epidemiological profiles of the population and the imbalance between demand and supply of services.

OPERATIONAL EFFICIENTY FOR SUS

A total of 200 philanthropic hospitals from different regions in the country selected by the Ministry of Health count on the training and support of Einstein to improve the efficiency of their operations. The project began in 2018 and is part of Einstein's actions in PROADI-SUS (Support Program for the Institutional Development of the Public Healthcare System). It involves three steps, which aim to transfer knowledge to the local management in a sustainable and replicable improvement process.

The activities begin with the diagnosis of the main efficiency bottlenecks in each hospital and the training of its teams in the Result Improvement Method.

In the next stage, Einstein's experts and each team at the institutions work together to understand the causes of the problems identified to define and prioritize initiatives to combat them. The result is an action plan with defined goals and targets, and a series of indicators for monitoring progress.

Einstein supports the implementation of the plan and, over a period of about 6 months, monitors the results achieved and supports local teams in the necessary adjustments.

At the end of 2019, 120 participating hospitals were in the implementation and monitoring phase of the execution of the defined action plans. The other 80 were moving forward in the planning phase, with plans expected to start deploying by April 2020.

RESULTS 2019

REDUCTION OF **19.9%** IN THE MEAN TIME[1] of patient stays, considering a sample of 19 hospitals in which this theme was studied

INCREASE OF **5.8%** IN ROOM TURNOVER[2] of surgical centers, considering a sample of 36 hospitals in which this theme was developed

1,136 EMPLOYEES ENROLLED IN THE DL RESULT IMPROVEMENT METHOD COURSE (duration: 30 hours; up to ten employees per hospital)

PRIORITIZATION OF **2,760** ACTIONS in 120 INSTITUTIONS

[1] Relationship between the sum of patient-days and the total number of exits. Hospital exits correspond to the discharge of patients from the inpatient unit due to discharge, evasion, withdrawal from treatment, internal transfer, external transfer or death.
[2] Relationship between the sum of the number of surgeries in hospitals and the total number of rooms per day..
For further information, acess: https://hospitais.proadi-sus.org.br/projetos/23/consultoria-em-gestao.

RESEARCH AND INNOVATION

KNOWLEDGE BASED ON SCIENTIFIC EVIDENCE

The generation of scientific knowledge at Einstein broadens treatment limits and positively impacts healthcare and the quality of life of the population. Advances combine teaching initiatives, experimental research, clinical research, service delivery and interface with innovation projects inside and outside Einstein.

The work carried out contributes, for example, to improving care protocols, with broad potential for impact in decision-making regarding treatments. This is the case of the international research conducted at Einstein and 32 other research centers in a total of 8 countries, which pointed to a higher survival rate of patients with cervical cancer who underwent open surgery in relation to laparoscopy. The results, considered surprising by the scientific community, were published in the prestigious *The New England Journal of Medicine* (NEJM) scientific journal, and will help doctors define the best therapy for patients.

Another inovative study aimed to gain knowledge from the experience of pain by looking at its treatment in indigenous populations of the Amazon. Funded by FAPESP - *Fundação de Amparo à Pesquisa do Estado de São Paulo* (São Paulo State Research Foundation), the research generated recommendations on pain management, including practices from conventional medicine and Indigenous traditions, to facilitate dialogue between health professionals and Indigenous people from Amazon regions and was presented at conferences in Brazil, the United States and Spain. The results contribute to the reflection of health professionals on how to put into practice care that considers the cultural aspects of how patients experience pain and the traditional medicine they use to alleviate it.

ADVANCES COMBINE TEACHING INITIATIVES, EXPERIMENTAL RESEARCH, CLINICAL RESEARCH, SERVICE DELIVERY AND INTERFACE WITH INNOVATION PROJECTS INSIDE AND OUTSIDE EINSTEIN.

Telemedicine has motivated a series of research projects that seek to provide a scientific basis for the adoption of the resource, ensuring its best use and the quality and safety of the patient. One of them evaluated the Teledermatology project, and concluded that 62% of the patients (from a group of 6.8 thousand individuals aged 0 to 19 years) could have their entire diagnosis and treatment carried out remotely. Teledermatology is one of Einstein's Telemedicine applications, used in this case to expand the access of SUS patients to consultations with dermatologists. It was developed in partnership with the city of São Paulo within the PROADI-SUS framework and helped to reduce wait time for care and diagnosis, as well as optimizing care for more complex or surgical cases. The information was published in the *PLOS One* magazine.

Partnerships with national and international organizations reinforce the research. Improving the quality of life and cognition of people with Down syndrome is the focus of two initiatives. One of them analyzes new therapeutic possibilities from the use of induced pluripotent stem cells generated from urine cells of patients with the syndrome, which received investment from FAPESP and Apae-SP - *Associação de Pais e Amigos dos Excepcionais* (Association of Parents and Friends of Disabled People). Another study, which investigates the effects of memantine hydrochloride in improving cognitive abilities of patients with Down syndrome, is conducted in partnership with Case Western Reserve University in Cleveland (USA).

PROADI-SUS (SUPPORT PROGRAM FOR THE INSTITUTIONAL DEVELOPMENT OF THE PUBLIC HEALTHCARE SYSTEM)

Einstein develops studies to allow the incorporation of new technologies to SUS (Public Healthcare System) and public interest research in health. The total contribution planned by Einstein for research projects developed in conjunction with the *Secretaria de Ciência, Tecnologia e Insumos Estratégicos do Ministério da Saúde* (Secretariat of Science, Technology and Strategic Inputs - SCTIE) of the Ministry of Health in the 2018-2020 period is R$ 86.2 million in 11 projects, out of a total of R$ 649.5 million that Einstein plans to invest in the different areas of PROADI-SUS. The expenditure in 2019 was R$ 26.8 million. Among the initiatives, the highlights were research on sickle cell anemia (*more information on Page 30*) and large-scale studies on diabetes, stroke and innovative therapeutic actions in the care of patients with myocardial infarction (*see Page 71*), among others.

SCIENTIFIC INTEGRITY

To support this structure, the Office of Scientific Integrity has gained two new members, and now has six participants. In 2019, the number of audits carried out increased to 60, double what it had been the previous year, following the goal of reinforcing guidance for researchers on best practices. No serious deviations were identified by the audits. It is also part of the office's tasks to verify cases coming from the Complaints Channel.

Research on the experience of pain and its treatment in indigenous populations.

INTEGRATION WITH EDUCATION

In addition to being careful to maintain an ethical environment, Einstein understands the mechanisms for promoting integrity as an important educational tool to ensure the quality of scientific production and, to this end, has become close to researchers since the beginning of their training. Starting in 2020, graduate students will undergo production checks in three phases throughout the course: research qualification, defense and publication.

Einstein offers scientific initiation, master's, doctoral and post-doctoral programs with a broad research portfolio. In 2019, a special scientific initiation program was implemented for students of the newly created Einstein Technical Education program integrated into High Schools. Two students were selected for a kind of immersion in research routines, including participation in scientific meetings and project defense. The number of participants will be increased in 2020 with the aim of inspiring in young people an interest in research careers.

The amount spent with investments and expenditures related to research totaled R$ 32.2 million in 2019 — of which R$ 29.5 million went towards research and innovation with the organization's own funds, while R$ 2.7 million were raised externally, coming from donations and grants.

REFERENCE CENTER FOR CLINICAL RESEARCH

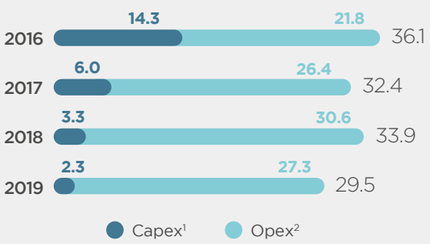
Einstein's *Academic Research Organization* (ARO), in operation since 2018, stands out for its unique structure, focused on the various stages of large clinical studies. This includes academic leadership of the project, ethical and regulatory approvals, selection, training and monitoring of participating centers, data management, statistical analysis and high impact publications.

ARO conducts research initiative studies with national and international pharmaceutical companies, provides services to these companies, and develops public interest projects in healthcare for SUS. PROADI-SUS projects involve more than 90 health centers. One project focuses on hypertension, another on diabetes (OPTIMALDIABETES), with 9 thousand patients, and another patients with a history of stroke (OPTIMAL_STROKE), with 7 thousand patients. An innovative study (VIP_ACS study), with 9 thousand patients, is also underway to evaluate the effectiveness of the application of the influenza vaccine to reduce mortality in patients with myocardial infarction.

The creation of new research models, using Big Data and artificial intelligence, is also part of the work done by ARO. An example is the partnership with ePHealth, a startup that has developed and

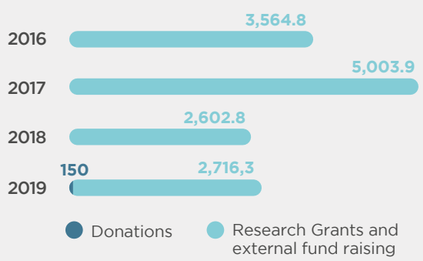
equipped 29,000 health agents in 3,300 municipalities to monitor the health of 2 million people through technological applications. ARO collaborates to identify opportunities for large-scale studies from this platform — the first of which deals with heart failure, developed with the support of Novartis and Eretz.bio.

RESEARCH — EINSTEIN OPERATING AND CAPITAL EXPENSES (R$ MILLION)



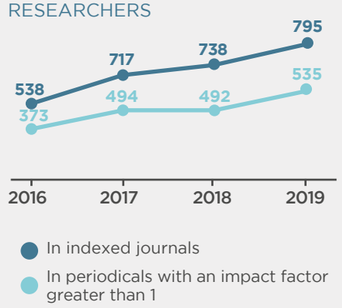
¹ **Capex:** investment in capital goods includes acquisition of specific equipment for scientific research activity, as well as facility improvements and adaptation.
² **Opex:** refers to the cost associated with equipment maintenance and expenses with consumable products, as well as skilled labor and other operational expenses necessary for scientific research activity.

RESEARCH — EXTERNAL INVESTMENTS (R$ THOUSAND)[1]



[1] Amounts refer exclusively to research projects financed by development agencies and/or companies, through bidding processes or after being submitted to scrutiny by peers. It does not include clinical trials sponsored by the pharmaceutical industry.

PUBLICATIONS BY EINSTEIN RESEARCHERS



Note: the impact factor represents the average number of citations, in scientific papers or articles, of contents published by a journal. The calculation is made annually based on the publications of the previous two years, following the formula: total citations obtained in the year divided by the total of articles published by the journal in previous two years.

RESEARCH AND INNOVATION

Research projects	2016	2017	2018	2019	Δ 2019/2018
Projects initiated	230	262	243	243	0%
Ongoing projects[1]	279	322	328	217	-34%
Completed projects	159	162	215	194	-10%
Total	**668**	**746**	**786**	**654**	**-17%**

[1] Projects started in previous years and still under development in the year in question.

INNOVATION

In 2019, Einstein held 85 events at the Eretz.bio incubator related to innovation and entrepreneurship, such as workshops, lectures and investor meetings, which brought together more than 1,800 participants, including international guests. In addition to the numbers, it is through collaborative work and in the actions of people and processes development, both internally and externally, that this theme has matured at Einstein and given strength to the ecosystem of innovation in healthcare that it drives.

The first center of innovation and entrepreneurship within a healthcare organization in Brazil, Eretz.bio ended the year with 40 startups incubated face-to-face or virtually. Support formats may include funding for those that demonstrate greater synergistic potential within Einstein areas, business partnerships, pilot projects, scientific validation or co-development of solutions.

The partnerships enabled the completion of 20 projects throughout the year, including the publication of scientific articles and initiatives with a focus on assistance or operations. An example of a completed project is the use of a virtual reality tool developed by MedRoom in the medical degree course at Einstein. Immersive technology enhances the study of anatomy. In another action, the clinical area of the Hospital incorporated the portable retinography, which identifies changes in the retina and was developed by Phelcom, into its equipment portfolio. Another 30 projects started during the year are still under development, and should be completed in the coming months.

Throughout the year, support was consolidated to raise non-refundable funds, with emphasis on the PIPE program (Innovative Research in Small Business) from FAPESP, which supports scientific and/or technological research in micro, small and medium-sized businesses in the state. Einstein supported the submission of 16 projects, with support actions in the design, validation and development stages of the product and submission of proposals.

In a training initiative, more than 1.4 thousand employees underwent training, in which they reflected on challenges faced by Einstein and the healthcare market in general and developed ideas for the creation of new products and services. This is the case of Fisio Link, a marketplace model for connecting physical therapists and clients, as well as the Laços app, which monitors the side effects of drugs used in cancer treatment, which has already been licensed for use by a startup.

The courses are based on the Design Thinking and Biodesign Methodology and allow participants to become immersed in the problems that need to be solved. One of the meetings, lasting eight hours, had the Patient's Journey as a challenge, and the criteria used by the patient to choose Einstein as a care provider.

EVENTS

Eretz.bio held four special events promoting entrepreneurship and developing solutions in the healthcare area in Israel, Canada, the Netherlands and Singapore. The interest of foreigners was also perceived during the III International Meeting of Entrepreneurship and Innovation in Health, with participation from 13 countries. The Forum promoted by Einstein, and recognized as one of the best in the country, brought together more than 200 startups and 700 people among, leaders from the healthcare and technology sectors, recognized healthcare organizations and public authorities.

In order to stimulate the generation of knowledge on critical topics, specific events were held to discuss issues such as diabetes, rehabilitation, biotechnology, mental health, genetics, the impact of IoT on the ecosystem of healthcare innovation, among others.

PROJECTS

Einstein is accredited by CATI - *Comitê da Área de Tecnologia da Informação* (Information Technology Area Committee) from the Ministry of Science and Technology to execute research projects with resources granted by the Technology Law (Law nº 8.248/1991 and Decree nº 5.906/2006).

The projects have a differentiated ecosystem for creation, management and development. Engineers, software developers, computer scientists, designers and doctors, among other professionals, participate in the development of solutions, involving technologies such as mobile, IoT (internet of things), user experience (UX), machine learning, cloud solutions and natural language processing.

CENTER FOR TECHNOLOGICAL INNOVATION

The Center for Technological Innovation makes up the innovation structures at Einstein and develops the intellectual property of innovative solutions generated at SBIBAE - *Sociedade Beneficente Israelita Brasileira Albert Einstein* has partnerships with companies and universities, conducts prototyping and validation tests, searches for external sources of promotion, and performs financial management of innovation processes. There were seven new patents filed in the year. Of these, three were conducted in the United States, and one generated the creation of a new startup (rad2) in the area of diagnostic imaging.

SOCIAL RESPONSIBILITY

EINSTEIN VOLUNTEERS COVER DIFFERENT AREAS AND SERVICE SECTORS TO PROVIDE HUMANITARIAN SUPPORT, ENTERTAINMENT AND SOCIALIZATION TO PEOPLE SERVED.

VOLUNTEER WORK

The history of volunteering at Einstein began with the founding of the Society in 1955. The work of the volunteers was fundamental for the success of fund-raising events for the project and for the creation of the Pediatric Care service, which served children from low-income communities in neighborhoods near the Hospital.

Currently, the “pink army”, as it became known because of the color of the apron worn, travels daily through the different areas of service and sectors at Einstein. Their aim is to offer humanitarian support and entertainment, perform recreational activities and promote the socialization of the people served. In addition to acting directly in the units, volunteers organize events, bazaars and other fundraising activities that help fund initiatives for the benefit of the community.

In 2019, 610 volunteers participated in actions at Morumbi, Perdizes and Alphaville Units, in the Einstein Program in the Paraisópolis Community, at *Residencial Israelita Albert Einstein* (RIAE / Albert Einstein Israeli Home), and at *Hospitais Municipais Dr. Moysés Deutsch – M'Boi Mirim* and *Dr. Gilson de Cassia Marques de Carvalho – Vila Santa Catarina*.

The activities are organized in 68 sectors and carried out in three areas:

- Humanization (patient and companion support);

* Knowledge generation (internally, with the aim of ensuring the excellence of volunteer work, and externally, in the empowerment of the community, focusing on its strengthening and autonomy); and

* Social transformation (awareness that becomes real, on the one hand, in the effort and participation of volunteers and donors and, on the other, in the development of communities within Einstein's sphere of influence).

Volunteer work follows the same rigor and commitment to quality that characterizes Einstein. Since 2002, the volunteer quality management system has been certified by ISO 9001. A continuous process of improvement, supported by external and internal audits, area meetings and critical analysis of performance against goals, guides the improvement of the department's management.

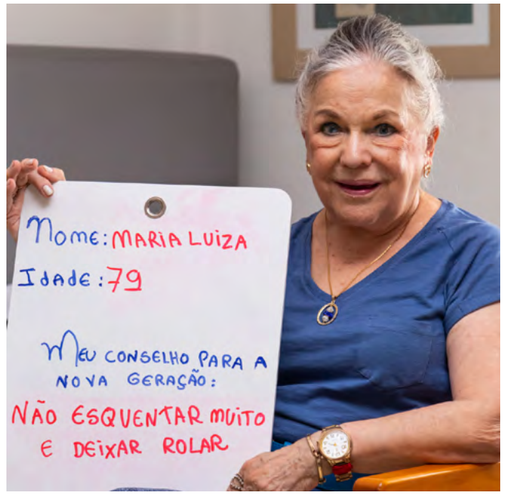
The involvement of volunteers is reflected in the high attendance rates, of 93.5%, and coverage in the sectors, of 93%.

INVESTMENT IN SOCIAL WORK

The resources raised by Einstein volunteers have enabled infrastructure improvements, purchase of equipment and materials, donation of hygiene kits for patients, toys and gifts for hospitalized children, among other items. More than R$ 3 million were invested throughout the year.

The units and main initiatives that received funding were:

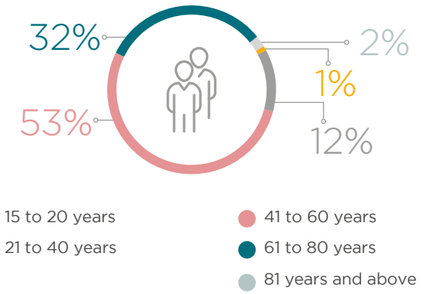
- *Hospital Municipal M'boi Mirim*: R$ 1,500 thousand in infrastructure reforms, purchase of medical equipment, painting of the Pediatric and Maternity wards, sponsorship of entertainment activities, donations of clothes and hygiene kits;
- *Hospital Municipal Vila Santa Catarina*: R$ 41,300 thousand in hygiene kits, storytelling and gifts on festive dates;
- Einstein in the *Programa Einstein na Comunidade de Paraisópolis* (PECP - Paraisópolis Community Program): R$ 1,200 thousand for room sponsorship and professional training courses, sports, orthoses and prostheses, infrastructure remodeling, material for the art and education center;
- CAPS - *Centros de Atenção Psicossocial* (Center for Adult Psychosocial Support, Alcohol and Drugs and Children): R$ 49,500 thousand in medical appliances and equipment, furniture, games, toys and children's accessories;
- *Residencial Israelita Albert Einstein* (RIAE): R$ 213,7 thousand in sponsorship of dinners on festive dates, tours, music therapy, material, transfer chairs for the elderly;
- UBS (Basic Health Units) operated by Einstein: R$ 26,800 thousand in children's changing tables; and
- Therapeutic Residential Services operated by Einstein: R$ 25,4 thousand in household appliances, furniture and food.



VOLUNTEER PROFILE

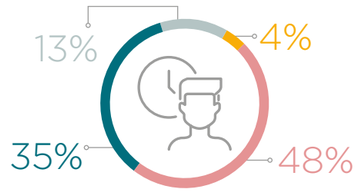
GENDER

AGE GROUP



LEVEL OF EDUCATION

TIME IN SERVICE



PROGRAMA EINSTEIN NA COMUNIDADE DE PARAISÓPOLIS (PECP - PARAISÓPOLIS COMMUNITY PROGRAM):

In operation since 1998, the PECP provides care in the areas of Health, Social Work, Education, Art and Communication, and Sports. About 80 thousand people live in the neighborhood, which is characterized by vulnerable areas in terms of housing and infrastructure.

PECP – CENTER FOR HEALTH CARE PROMOTION AND ATTENTION

	2016	2017	2018	2019	Δ 2019/2018
Healthcare area[1]	45,901	38,386	7,358	10,967	49.0%
Social area	17,669	18,733	20,038	21,238	6.0%
Education area	41,946	38,687	41,859	46,667	11.5%
Art and Communication area[2]	37,564	41,166	39,470	37,034	-6.2%
Sports area[3]	56,662	55,817	42,200	40,922	-3.0%
Total	**199,742**	**192,789**	**150,925**	**156,828**	**3.9%**

[1] Between August and December 2018 only the *Programa Materno Infantil* (Maternal and Child Program) was considered, and the other services provided were counted within the partnership with the city of São Paulo (*see page 25*). Starting in 2019, Speech Therapy, Psychology, Psycho-pedagogy and Nutrition were added.
[2] Reflects the reduction in field work and presentations held in 2019.
[3] Since the last quarter of 2018, the handball, capoeira, rugby and taekwondo activities have no longer been counted under the sports area and became a part of the Mapfre Einstein in the Community Project.

MAPFRE-EINSTEIN

The MAPFRE-Einstein in the Community Project is a partnership between Einstein and the MAPFRE Foundation and made 16.7 thousand consultations in 2019, in educational activities, workshops and training.

HOME FOR THE ELDERLY

The *Residencial Israelita Albert Einstein* (RIAE) offers housing to dependent, independent and semi-dependent elderly residents. Currently, 121 elderly people live in the home; 100 of them receive subsidies or gratuities in residence, healthcare, materials and medication.

ACCESS TO HEALTH

In order to assist those elderly people who do not have access to health insurance, Einstein works in partnership with *União Brasileira Israelita de Bem-Estar Social* (Unibes - Brazilian Israeli Social Welfare Union) and maintains the *Programa Einstein In the Comunidade Judaica* (PECJ - Einstein Program in the Jewish Community), which benefits 962 people in need.

DONATIONS TO CHARITIES

Einstein supports non-profit entities by donating financial resources, materials and equipment. In 2019, eight organizations received R$ 3.38 million.

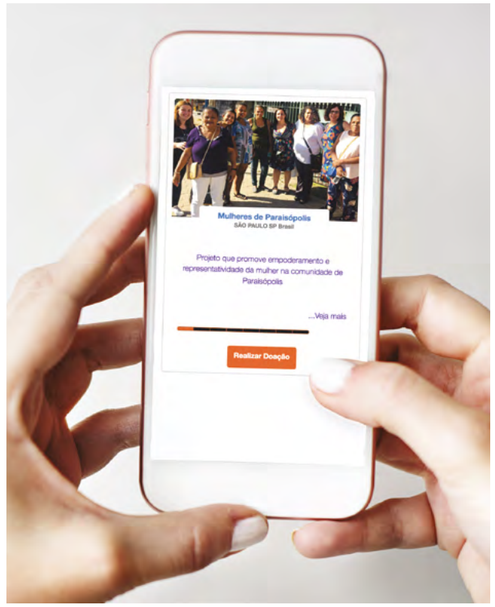
DONATION PORTAL

By computer or smartphone, you are just a few clicks away from finding out more about the social projects carried out by Einstein and donate the amount you can to the project you want to support. This is the goal of the Donation Portal (doacao.einstein.br), released in October 2019. Through the portal, more people have the chance to collaborate, increasing the impact of the projects included there. Currently, seven projects are active in the portal.

When selecting a project, you can be sure that the contribution will go to that initiative. Donations range from R$ 50 to R$ 50,000 and can be made by individuals and legal entities.

One of the projects is *Mulheres de Paraisópolis* (Women In Paraisópolis Community), it is part of the PECP Program and stimulates the empowerment of women in the community and seeks to reduce situations of vulnerability and violence. *Educação Cidadã* (Citizen Education) is another project that is part of the PECP and is available on the portal. It benefits 150 children and young people from Paraisópolis by promoting educational, cultural and awareness building activities. Also on the portal is the research that investigates the effectiveness of haploidentical marrow transplantation, performed among partially compatible people, benefiting patients with leukemia and lymphoma.

The site received 10 thousand hits in the first month it was in operation.



AMIGOH

Actions to prevent and detect cancer cases early on and support of scientific research are the two areas covered by the *AMIGOH - Programa Amigos da Oncologia e Hematologia* (Friends of Oncology and Hematology Program). A scientific committee is responsible for the approval of the projects, funded from fundraising with the organization through events and campaigns. The investment in 2019 was R$ 1 million and, since 2012, when *AMIGOH* was created, the total amounted to more than R$ 4.3 million.

One of the 2019 projects led, through itinerant offices, gynecological and oncodermatological care to seven cities in the states of Mato Grosso, Mato Grosso do Sul, Goiás and Ceará. The action made it possible to meet 2.5 thousand people and identify 65 cases of cancer at an early stage, significantly increasing the chances of a cure for the patients and reducing long-term costs for the public health system. The initiative employed telemedicine, with a specialized *Hospital Israelita Albert Einstein* professional remotely evaluating colposcopy exams.

The year also marked the publication of seven studies supported by AMIGOH in international scientific journals and the conclusion of the Postgraduate Course in Oncology by SUS professionals, with scholarships granted by *AMIGOH*.

By 2020, the organization intends to consolidate partnerships with major oncological institutions and the Ministry of Health as well as to improve project impacts monitoring.

EXCELLENCE IN MANAGEMENT

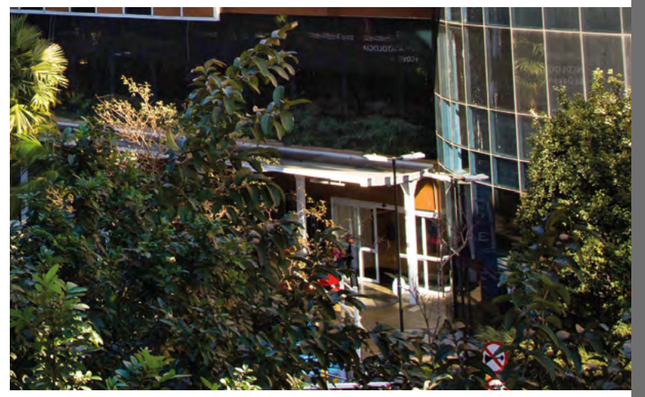
SUSTAINABILITY

Sustainability is part of Einstein's strategy. Decision-making considers the context of activity in the social, environmental and economic dimensions, trends and challenges, real and potential impacts of the organization itself and perceptions and expectations of interested audiences and establishes the priority focus of action, represented by material themes. The process is reviewed periodically to ensure the incorporation of possible changes in the scenario and alignment with the future vision..

This report reflects the materiality process conducted from December 2019 to January 2020, detailed on page 110. In total, 15 themes were defined as priorities for management and communication. They are:

- **Economic performance:** economic balance and competitive and market management practices aimed at business continuity and success over time;
- **Fight against corruption:** ethical conduct and adoption of policies and initiatives to prevent and combat corruption, fraud, extortion, bribery or other illegal operating practices;
- **Waste generation and disposal:** proper management of solid waste from generation to final disposal;
- **Environmental compliance:** compliance with environmental laws and regulations;
- **Occupational health and safety:** appropriate management of risks associated with the work environment and the performance of tasks;
- **Training and education:** programs and initiatives aimed at the development of technical and professional skills, including training focused on training professionals for the company and the market in general;

MATERIALITY PROCESS CARRIED OUT FROM DECEMBER 2019 TO JANUARY 2020 DEFINED 15 THEMES AS PRIORITIES FOR MANAGEMENT AND COMMUNICATION.



- **Diversity and equity:** ensuring equal opportunities for professional development and building an environment conducive to the inclusion of minorities, democratization of the labor market and building of a diverse enterprise;
- **Effectiveness of health services:** management and continuous improvement to ensure the proper application of the necessary resources, focusing on the quality of care and obtaining the best clinical outcomes;
- **Patient experience:** integrated management of the variables that affect the patient's perception and the satisfaction of their expectations and needs in the relationship with Einstein;
- **Disease prevention and health promotion:** programs and initiatives aimed at the quality of life and the well-being of the population;
- **Patient health and safety:** adoption of standards, policies, processes and procedures to ensure patient health and safety and ensure care with the lowest risk and best outcome;
- **Access to health:** contributions to strengthen and democratize health care with a focus on facing current and future challenges;

- **Knowledge generation and dissemination:** research and development activities, innovation, teaching, training and professional updating, exchange of information and awareness of patients with a focus on improving healthcare at Einstein itself and in the sector in general;

- **Healthcare services compensation model:** contributions (information, references, studies and clear positioning) to the debate on existing models to promote the evolution and sustainability of the healthcare system; and

- **Socioeconomic compliance:** compliance with social and economic laws and regulations.

COMMITMENT TO THE SDGS

Einstein's Master Plan for Sustainability was revised in 2019 with the aim of making its contribution to the Sustainable Development Goals (SDGs), a global development agenda defined by the United Nations (UN), even more effective. The SDGs establish 17 goals — health, education, gender equality, food security, reduction of inequalities, energy, climate change, sustainable cities and inclusive economic growth, among other themes — that unfold into 169 targets to be achieved by 2030 through the joint effort of governments, businesses and society.

Since the launch of the SDGs in 2015, Einstein has been working towards achieving these goals. The inclusion of the theme in the Sustainability Master Plan illustrates the efforts dedicated to the SDGs and enables the monitoring of results.

Of the 17 SDGs defined by the UN, Einstein selected 11 to focus on primarily (see table on the left), considering the topics most related to its operation. For each selected SDGs, programs and projects with potential to contribute to the planned advances were mapped out and a maturity diagnosis for each goal is being completed. Five degrees of maturity were defined. The next step will be to prioritize activities to ensure advances in the maturity rule and compliance with the goals established for 2020.

ETHICAL PERFORMANCE

Several processes guide the internal conduct and improvement of the control dynamics at Einstein, focusing on compliance, risk management and audit, and monitoring.

ETHICS AND COMPLIANCE PROGRAM

Einstein was a pioneer in the healthcare sector by instituting, in 2015, the Ethics and Compliance Program, which systematized and gave impetus to various initiatives related to these issues. The program is constantly evolving and is guided by three objectives:

- Be diligent and vigilant in complying with the law, organizational values and the highest ethical standards;

- Ensure a good environment of internal controls and adequate risk management; and

- Strengthen the organization's commitment to social responsibility and sustainable development.

Among the actions of the program in 2019, we highlight the advances in the identification and management of conflicts of interest and in the control of associated and related parties.

Einstein has a policy and processes for identifying, assessing and addressing potential conflicts of interest, which also includes related parties, advisors who participate in its governance and those who have any participation in or control companies that conduct transactions with Einstein.

In 2019, a platform was launched that defines the concept of conflict of interest and the importance of identifying the cases in which it can occur. The platform also collects statements of any links to external organizations that Einstein interacts with and the support received from that type of organization. Periodically, all coordinating and senior employees, physicians in the open clinical staff, and members involved in governance (board members, elected board members and committees that support decision-making) are invited to make a statement, and that survey guides management initiatives. In 2019, 96% of all eligible employees made the declaration and among doctors, who

were considered a priority, the adherence was 51%.

With a specific focus on controlling associated and related parties, Einstein also puts in place preventive controls and monitors transactions. Relevant contracts must be approved in advance by the Related Parties Committee, which verifies the alignment of transactions with Einstein's interests and the adoption of regular market conditions. Transaction values are monitored quarterly and disclosed transparently in the organization's Financial Statements.

ANTI-CORRUPTION ACTIONS

The theme of combating corruption has been the subject of campaigns and periodic training for the different areas of the institution. In 2019, 100% of the governance members, employees and partners received communications on the subject, and 92% of the employees were trained on it.

As happens annually, in 2019, all units of the organization underwent risk assessment, including related to corruption.

INSTITUTIONAL DOCUMENTATION

From 2020 on, Einstein's procedures, standards and policies will become available on a new platform, organized according to a process perspective.

The initiative is the result of extensive work that was done to map out the processes that integrate the value chain at Einstein, which has been carried out since 2017.

In 2019, about 130 people were trained to act as process managers with the responsibility of ensuring the implementation of internal guidelines and identifying the possible need to revise or supplement the documentation.

In addition to simplifying and organizing the internal normative framework, viewing it by process has the potential to drive a major cultural change in management and how the guidelines are applied.

CONTINUITY OF CARE

In order to manage risks with the potential to affect Einstein's ability to provide patient care, in 2019 Einstein initiated the Business Continuity Management Project, which considers aspects related to physical facilities, operational teams, Information Technology and supply chain.

The objectives are to ensure contingency plans related to the identified high impact risks and to empower leaders and teams to put them into practice.

In 2019 the work focused on the Clinical Laboratory, Operational Technical Center and Oncology areas, in addition to the support areas related to these services. The scope will be extended to other areas beginning in 2020.

AUDIT

In 2019, audits were carried out in institutional processes such as financial, inventory management and control of medications controlled at Einstein's own units. Action and monitoring plans based on the audits were also carried out.

DUE DILLIGENCE

With the use of an automated tool, Einstein subjected all its suppliers to a risk assessment focusing on registration data status, negative quotes in the media and involvement in complaints or proven cases of corruption. The analysis allowed the companies to be classified in six different degrees of criticality. The first evaluation process was completed in 2019, in 2020 the case-by-case evaluation and action plans for suppliers classified in the three most critical ranges will begin.

RISK MAP

The update of the Corporate Risk Map, carried out in 2019, involved 20 areas and boards of the organization, as well as the adoption of indicators to monitor key controls and exposure to strategic, financial, operational and compliance risks.

In addition, the pre-operational risk map was prepared (*see Page 44*) for Hospital Órion, which Einstein manages and operates in Goiânia.

EINSTEIN OPERATIONAL EXCELLENCE PROGRAM

To strengthen the culture of continuous improvement and process management, Einstein performs systematic work based on the Lean Six Sigma methodology to increase the quality and safety of services provided and reduce waste and operational failures. The projects mobilize professionals from all areas of the organization, such as Doctors, Nurses, Biomedical Professionals, Physical Therapists, Pharmacists, Engineers, Administrators and Hospitality Workers, among others.

Since its conception, from 2008 to 2019, 705 project leaders have been trained. The training includes theory, participation in activities supervised by coaches and, especially, the practical application of learning in projects that provide results for the organization. A total of more than a thousand projects have already been deployed, most of them (52%) focusing on the Triple Aim model.

EINSTEIN OPERATIONAL EXCELLENCE PROGRAM

TOTAL: 1,007 PROJECTS

- Triple Aim
- Increased productivity
- Reduction of administrative costs and expenses

TOTAL 520 PROJECTS

- Population health
- Lowest cost *per capita*
- Better care

INVENTORY MANAGEMENT

At Hospital Municipal M'boi Mirim-Dr. Moysés Deutsch, a project to optimize the inventory of materials, medicines, and other inputs made more efficient the management of these resources, with a positive impact on the public service provided in the unit.

From the definition of minimum and maximum parameters of the inventoried items, adoption of the rotating inventory routine, optimization of low-turnover items and simplification of the item base from the analysis of the cost-benefit ratio of similar items, it was possible to reduce the hospital stock by 33%, despite the 8% increase in demand. The annual cost of consumption of materials and medicines fell by 5%, and the accuracy of the inventory rose from 89% to 97%.

SUPPLIER MANAGEMENT

Ensuring quality, safety and regularity in the services, materials, equipment and inputs required for Einstein's operation is a complex task: the supplier base brings together about 4.6 thousand active companies (*see chart*), and the total Stock Keeping Units (SKUs) acquired by the institution exceed 58 thousand units. Inventory management is the goal of a continuous improvement process.

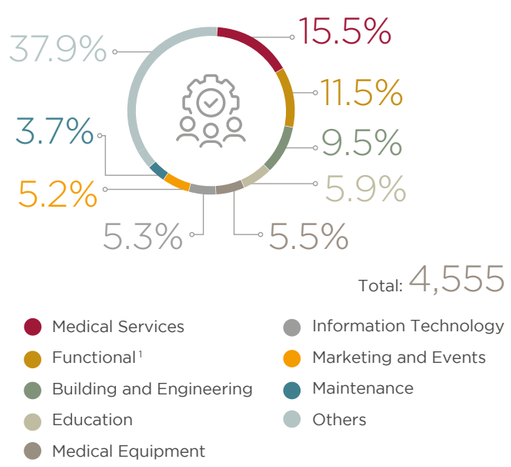
One of the outstanding actions put in place in 2019 was a new material planning system, which aims to optimize inventory, increase the level of service and reduce the risk of delay or shortage, with positive impacts on the quality and safety of health care. The project is based on elements common to other Einstein initiatives, such as information technology, internal knowledge systems and decision-making support for the acting manager.

A digital platform gathers information on the history and consumption forecast of each type of material in the different areas of the operation and, based on probability models customized from technical information and the demand from Einstein teams, provides guidance on the management of inventory such as medication, medical, engineering and maintenance materials, food and other inputs. Replacement orders are made on the same platform, in an agile and fast manner.

Other innovations were the automation of the ordering process in 7 of the 25 material warehouses and the creation of the External Units Supplies Committee, which identifies needs and opportunities for improvement in the care of outpatient units, primary care units and SUS hospitals, among others.

Combined with improvements in internal processes, these actions contributed towards achieving the goal of raising service levels, from a historical average of around 92% to 95%. The indicator considers aspects related to the fulfillment of the ideal deadlines for meeting the demands, established internally according to the type and urgency.

ACTIVE SUPPLIERS (2019) BY CATEGORY



[1] Brings together suppliers of materials not directly linked to patient care, such as personal protective equipment, office and information technology supplies, furniture and food service utensils, among others..

EINSTEIN SUSTAINABILITY STANDARD

Aiming to boost suppliers' good social and environmental practices, Einstein annually promotes the self-assessment of strategic suppliers on labor, social, environmental and legal issues.

Participation is voluntary and provides information on quality for risk management and the definition of improvement plans.

In 2019, 300 suppliers participated in the survey. Of these, 42.4% were classified as highly adherent to the practices expected by Einstein, 35.3% as moderately adherent, and 22.3% received the classification of low adherence and will participate in improvement processes in 2020.

The self-assessment process, carried out since 2014, will be reviewed in 2020. The questionnaire will be aligned with the Ethos Indicators for Sustainable and Responsible Businesses, and the information will become mandatory for the entire supplier base, still in the registration phase.

ENVIRONMENTAL IMPACTS

The management of sustainability risks in the supply chain was improved in 2019, with the identification of critical categories based on potential environmental risks and the execution of a specific audit plan. The action involves all providers of waste collection, transportation and final destination services, passengers, cargo, biological and chartered carriers, textile products, laundry services, pest control and water, waste and effluent analysis laboratories.

Based on a detailed checklist, the Einstein team checks the supplier's processes and practices, and classifies them into three levels: Qualified, Requires improvement, or Unqualified. Suppliers considered unqualified are blocked from the base and replaced; eight were blocked in 2019.

In addition to being applied to active suppliers, the audits became a part of the final approval stage for the selected suppliers, even before hiring.

For the others, the identified non-conformities are the target of action plans, whose compliance is monitored by Einstein.

Of the total suppliers identified as critical, 25 went through audits in 2019 and the other 35 will be audited in 2020. Of the audits carried out, 16 generated action and improvement plans, 10 of which have already been completed in 2019; the rest are in progress.

GREEN PROCUREMENT

Einstein is a member of the Green Procurement Committee, which is part of the PHS (Healthy Hospitals Project), a non-profit association that brings together healthcare professionals, hospitals and other providers. The objective is to establish improvement steps and tools for monitoring progress, based on a diagnosis of the sustainability challenges in the supply chains of the healthcare sector. This initiative is aligned with the UN SDGs (Sustainable Development Goals). In 2019, four meetings were held to exchange information and best practices.

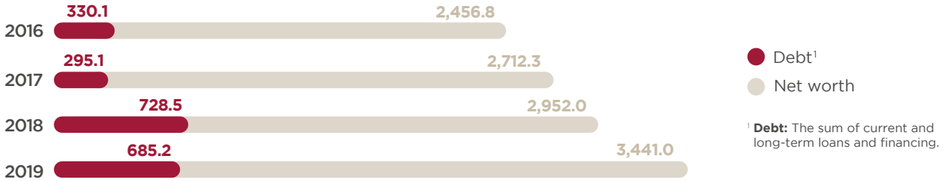
FINANCIAL RESULTS

Net revenue reached R$ 3,164,6 million, an increase of 12.0% over the previous year. Operating costs and expenses were R$ 2,699,3 million, an increase of 2.6% compared to the previous year, a result of several cost reduction programs, increased productivity and improved operational efficiency, started in 2018, and the effect of the revision of the calculation base of PROADI-SUS, which resulted in a reversal of provisions of R$ 82.9 million.

The Surplus Before Interest, Taxes, Depreciation and Amortization (Sbitda) reached R$ 697.1 million, an increase of 90% over the previous year, driven by the factors mentioned above and the adoption of IFRS (International Financial Reporting Standard) 16/CPC 06, which had a positive impact of R$ 31.9 million.

The net operating surplus was R$ 465.3 million, 137.9% higher than what was recorded in 2018, and the net surplus was R$ 488.8 million, an increase of 103.5% over the previous year. Both were partially impacted by the non-recurring items already mentioned.

TOTAL FUNDING (R$ MILLION)



[1] **Debt:** The sum of current and long-term loans and financing.

FINANCIAL COMMITMENTS[1]

ASPECT	RESTRICTION	CALCULATION	LIMIT	2016	2017	2018	2019
Cash and financial investments	Minimum availability should be 15% of annual revenue	Cash and applications / net revenue	≥ 15%	26.8%	28.1%	44.6%	45.8%
Indebtedness	Net debt may not exceed 2.0 times the amount of profit before interest, depreciation and amortization	Net debt/ Ebitda	≤ 2.0	-1.0	-1.3	-1.4	-0.9
Leverage	The maximum share of third-party resources is limited to 30% of the total asset	Indebtedness /Total assets	≤ 30%	10.1%	8.3%	16.8%	16.4%

[1] In 2017 the financial commitments were revised.

VALUE ADDED STATEMENTS (R$ THOUSAND)

ASPECT	2016	2017	2018	2019	Δ 2019/2018
Direct economic value generated	**2,585,465**	**2,779,217**	**2,882,047**	**3,212,571**	**11.5%**
Revenue[1]	2,585,465	2,779,217	2,882,047	3,212,571	11.5%
Distributed economic value	**2,326,673**	**2,523,725**	**2,652,501**	**2,723,769**	**2.7%**
Operational costs[2]	773,569	916,067	1,011,265	1,049,445	3.8%
Wages and employee benefits[2]	1,164,366	1,265,243	1,324,170	1,364,572	3.1%
(Support Program for the Institutional Development of the Public Healthcare System - PROADI-SUS)	273,964	243,122	233,577	215,346	-7.8%
Investments in the community[3]	57,290	54,014	48,923	47,482	-2.9%
Financial expenditure	57,483	45,279	34.567	46,925	35.8%
Cumulative economic value	**258,792**	**255,492**	**229,546**	**488,801**	**112.9%**

[1] Sum of net income and financial income, minus the deduction of the allowance for doubtful accounts.
[2] The costs of primary care services provided by Einstein and reimbursed by the city of São Paulo are divided into operating costs and salaries and employee benefits.
[3] These investments refer to expenditures on the Einstein Program in the Jewish Community (PECJ), the Einstein Program in the Jewish Community (RIAE) and donations to welfare institutions. The financial philanthropy criteria were revised in 2018.

INCOME STATEMENTS (IN R$ THOUSAND)

ASPECT	2016	2017	2018	2019	Δ 2019/2018
1. Net operating income	2,519,953	2,726,593	2,825,735	3,164,615	12.0%
2. Operational costs and expenses	2,299,781	2,498,434	2,630,110	2,699,288	2.6%
3. Operating result (1-2)	220,172	228,159	195,625	465,327	137.9%
4. Total financial result	38,620	27,333	44,529	23,474	-47.3%
5. Yearly Profit (3+4)	258,792	255,492	240,154	488,801	103.5%
6. Profit before interest, taxes, depreciation and amortization (Pbitda)	341,103	376,115	366,809	697,063	90.0%

BALANCE SHEET (R$ THOUSAND)

ASPECT	2016	2017	2018	2019	Δ 2019/2018
Total current assets	1,330,474	1,245,135	1,240,016	1,584,097	27.7%
Fixed assets	1,615,207	1,802,892	2,051,652	2,330,271	13.6%
Intangible	205,455	233,510	256,788	220,864	-14.0%
Other non-current assets	111,114	268,852	784,208	924,616	17.9%
Total non-current assets	1,931,776	2,305,254	3,092,648	3,475,751	12.4%
Total assets	**3,262,250**	**3,550,389**	**4,332,664**	**5,059,848**	**16.8%**
Current liabilities	466,973	526,740	550,032	721,095	31.1%
Non-current liabilities	338,453	311,333	830,162	897,483	8.1%
Social assets	2,456,824	2,712,316	2,952,470	3,441,270	16.6%
Total liabilities and social assets	**3,262,250**	**3,550,389**	**4,332,664**	**5,059,847**	**16.8%**

FINANCIAL INDICATORS (R$ THOUSAND)

	2016	2017	2018	2019	Δ 2019/2018
Surplus before interest, taxes, depreciation and amortization (Sbitda)	341,103	376,115	366,809	697,063	90.0%
Capital expenditure	307,578	363,694	444,436	453,098	1.9%
Cash and financial investments	675,338	766,602	1,259,040	1,450,464	15.2%
Working Capital	239,184	159,776	123,390	102,569	-16.9%
Total operational capital employed	2,059,846	2,196,178	2,431,830	2,653,704	9.1%

CAPITAL EXPENDITURES (R$ THOUSANDS)

	2016	2017	2018	2019	Δ 2019/2018
Land and building	82,043	126,079	213,608	275,104	29%
Construction/Buildings	67,100	107,092	205,430	230,399	12%
Remodeling	114	-	-	-	0%
Properties	14,829	18,987	8,178	44,705	447%
Technology and automation	110,582	109,980	136,943	84,952	-38%
Systems and applications	70,611	54,396	74,268	49,412	-33%
Facilities and telephony	28,848	30,111	22,340	17,374	-22%
Computer equipment	11,123	25,474	40,336	18,166	-55%
Medical equipment	88,694	82,379	54,731	68,471	25%
Machines and equipment	14,804	36,929	27,268	14,088	-48%
Furniture and utensils	11,454	8,157	11,926	4,977	-58%
Others	0	170	0	5,487	NA
Total	**307,578**	**363,694**	**444,477**	**453,079**	**2%**

NA: does not apply.

CERTIFICATIONS AND ACCREDITATIONS

Einstein's services and control processes are aligned to external standards of reference. The main ones are highlighted below.

Association for the Accreditation of Human Research Protection Program Inc (AAHRPP): attests that research is conducted with best practices for research in humans.

American Association of Blood Banks (AABB): attests to the quality and safety of activities in the hemotherapy sector.

American College of Radiology (ACR): accredits the imaging service of diagnostic medicine focusing on equipment, professionals, treatment plans and registry (medical records) and quality control. Einstein is the only health organization in Brazil with accreditation in all diagnostic modalities.

The American Society for Histocompatibility and Immunogenetics (ASHI): certifies the histocompatibility and immunogenetic process of the Clinical Pathology Laboratory.

Association for Assessment and Accreditation of Laboratory Animal Care International (Aaalac): attests good practices in the treatment and responsible use of animals in laboratory tests of the Center for Experimentation and Training in Surgery.

College of American Pathologists (CAP): accredits patient safety actions and quality requirements of the diagnostic medicine laboratory and hemotherapy sector.

Foundation for the Accreditation of Cellular Therapy (FACT): attests to good practices in hemotherapy and bone marrow transplantation services.

***Hospital Amigo do Idoso* (Elderly Friendly Hospital):** recognition granted by the São Paulo State Health Department to the Morumbi Unit, "Full" category, due to the initiatives to adapt the infrastructure, training of professionals and families, community engagement and encouragement of health prevention. The *Hospital Municipal Vila Santa Catarina - Dr. Gilson de Cassia Marques de Carvalho* has the "Junior" category seal, which represents the first stage of recognition.

ISO 9001: certifies the quality and safety standards of the Volunteer Department.

ISO 14001: certifies adherence to environmental management standards of all units of the institution.

ISO 50001: certifies that the energy management system of the Morumbi Unit is adequate according to the established standards.

Joint Commission International (JCI): attests that the quality and safety processes are continually improving healthcare, encouraging safe and effective measures of the highest quality.

ONA Level 2: granted by the National Accreditation Organization (ONA) to the *Hospital Municipal Vila Santa Catarina* for meeting safety criteria, integrated management, with fluid processes, proving full communication between activities.

ONA Level 3: awarded by the National Accreditation Organization (ONA) to the *Hospital Municipal M'boi Mirim — Dr. Moysés Deutsch* as recognition of excellence in management and meeting the criteria of safety, quality and credibility of the healthcare services provided.

Planetree: certifies the support for the carrying out of patient and family engagement concepts with 'practices, methods and approaches' that make up the patient-centered culture of care. The Morumbi Unit is a Gold certified site (*see page 51*).

Society for Simulation in Healthcare (SSH): attests to the best practices carried out in the Realistic Simulation Center in training and qualification of teams.

Surgical review Corporation (SRC) Accreditation Program: specific accreditation granted to the center for Excellence in Robotic Surgery, attests the safety, quality and credibility of the service and of physicians-surgeons who operate in robotic surgery.

PEOPLE

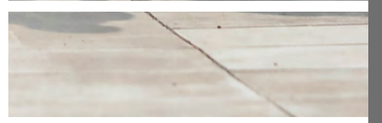
WHO MAKES EINSTEIN WORK

At the end of 2019, Einstein had 14.4 thousand employees. Most of them carry out their activities in the city of São Paulo, but, in line with the purpose of bringing “a drop of Einstein to every citizen”, they have been expanding their reach, with activities in the interior of São Paulo, six other states, and Federal District. The people management area coordinates different strategies to ensure the alignment of these professionals to the mission, values and strategic vision of the institution, promotes a diverse and inclusive environment and stimulates development with a focus on excellence.

The exchange of information is constant, driven by structured actions that aim to strengthen the culture of transparency and dialogue between different hierarchical levels, teams, and areas of action. In 2019, an evolved management model of the organizational climate and engagement saw the expansion of periodic meetings of the senior leadership with the teams, including between employees and the General Board of Directors. In various areas, the leaders coordinated workshops with the teams in order to follow up on actions taken within the strategic plan, strengthen integration and communication, and monitor the environment and organizational climate.

Different committees encourage joint construction and participation in prioritizing actions related to six themes: employee experience and journey, compensation and benefits, employee health, clarity and direction and climate management by the boards. A result of this participatory model included, for example, the remodeling of a rest area for employees in the Morumbi Unit, a product exhibition schedule and the installation of gender neutral restrooms.

WITH A BOOST FROM THE LEADERSHIP AND THE ACTIVE PARTICIPATION OF THE TEAMS, EINSTEIN HAS ADVANCED IN STRATEGIC ALIGNMENT ACTIONS, DEVELOPMENT, INCLUSION AND ORGANIZATIONAL CLIMATE MANAGEMENT.



OPPORTUNITIES

In 2019, internal recruitment was responsible for filling 83% of open leadership positions in care areas and 38% in other areas. Of the total number of new vacancies opened during the year at Einstein, 41% were occupied by professionals from within the organization itself. In the nursing and care sectors, internal hires totaled 45%.

Employees are also at the center of the Einstein Repórter, an internal newsletter in video format, which presents news and organization highlights from the staff’s point of view. In 20 editions broadcast during the year, employees from various areas had the opportunity to share with the rest of the organization information about their work routines and the relationship with the users of the services, inauguration of new service units, share knowledge, among other topics.

EVALUATION

More than 90% of employees underwent performance evaluations for the year. In management and medical management positions, coverage was 100%, and among management in general, 98%.

EINSTEIN IS COMPRISED OF

Employees	2017	2018	2019		
			Total	Men	Women
By job/level					
Director	17	19	17	8	9
Manager	79	95	99	40	59
Medical Manager	29	28	30	23	7
Coordinator / Specialists	383	409	510	178	332
Medical Coordinator	114	105	116	85	31
Physicians (I, II, III)	1,297	1,247	1,301	614	687
Professional	5,941	5,748	6,263	1,647	4,616
Technician	3,358	3,289	3,752	1,248	2,504
Assistant	2,000	1,970	2,099	474	1,625
By employment contract type					
Determined time	16	21	75	21	54
Undetermined time	13,202	12,889	14,112	4,296	9,816
By type of employment					
Full time	11,146	10,965	12,001	3,479	8,522
Part-time	2,072	1,945	2,186	838	1,348
By state					
Federal District	0	1	1	0	1
Espírito Santo	0	0	5	4	1
Goiás	0	0	17	5	12
Minas Gerais	3	7	10	8	2
Pará	0	0	4	2	2
Pernambuco	0	0	0	0	0
Rio de Janeiro	4	4	188	38	150
São Paulo	13,211	12,898	13,962	4,260	9,702
Board	**180**	**180**	**180**	**160**	**20**
Trainees	**183**	**201**	**120**	**44**	**76**
Subtotal internal team	**13,581**	**13,291**	**14,487**	**4,521**	**9,966**
Third parties	**3,039**	**2,144**	**2,500**	**1,819**	**681**
TOTAL WORK FORCE	**16,620**	**15,435**	**16,987**	**6,340**	**10,647**

TURNOVER (2019)

Employees	Hired	Fired	Turnover rate
By gender	**3,487**	**2,199**	
Men	1,062	692	16.0%
Women	2.425	1,507	15.3%
By activity	**3,487**	**2,199**	
Physicians	345	278	19.2%
Health care (non-physicians)	2,070	1,212	13.6%
Other activities	1,072	709	18.7%
By age group	**3,487**	**2,199**	
Less than 30	1,902	814	20.6%
Between 30 and 50	1,517	1,246	13.4%
Over 50	68	139	14.3%
TOTAL	**3,487**	**2,199**	**15.5%**

QUEM INDICA, AMIGO É! (FRIEND REFERAL PROGRAM)

Through this program, Einstein employees recommend other professionals for hiring opportunities at the organization. Of the 12.5 thousand people recommended in 2019, almost 6.5 thousand participated in the selection process and 388 were hired.

JOINT HISTORY

The Programa Reconhecimento por Tempo de Casa (Time of Service Recognition Program) honored 586 employees for their time serving in the organization. Within this group, 15 completed 30 years in the organization in 2018, 40 completed 20 years, and 531 completed 10 years.

EXTERNAL RECOGNITION

For the tenth consecutive year, Einstein has been a part of the 150 Best Companies to Work ranking from the *Você S/A* magazine, published by *Editora Abril* publishing house. In the Great Place to Work (GPTW) ranking prepared in partnership with *Época magazine*, from *Editora Globo* publishing house, Einstein was among those selected in the healthcare segment, integrated for the first time in the Women's and Career Beginnings categories, as well as in the newly launched Person with Disabilities category. Einstein's practices were also recognized by the Weps Award, (Women's Empowerment Program) — a UN Women and Global Pact Iniciative -, and received the WOB (Woman on Board) award, which is certified by UN Women and values the presence of women in the highest governance levels of the organization.

ORGANIZATIONAL CLIMATE

In 2019, the Climate Survey showed a favorability index of 81% — a significant improvement from 77% in 2018. The survey has been conducted annually since 2004 and was answered by 75% of all employees.

TRAINING

The training activities are organized into development tracks, which cover the desired technical and behavioral skills in four dimensions. There is the institutional dimension, the professional dimension, customized for different positions and roles, the segment dimension, based on the area of activity and the individual dimension, focused on specific complementary skills.

In the continuous improvement of this process, the following actions were highlighted:

- Creation of a specific track for the Big Data area (*see page 36*), with strategies of attraction, compensation and career management that are more aligned with the profile of these professionals. The action served as a pilot for the creation of other tracks that aim to maintain Einstein's attractiveness within a scenario of changes, in both the profile and expectations of young professionals, by engaging an identification of values and purposes;
- Restructuring of the care track, which prepares all professionals who interact with patients and clients to put into practice the organization's commitment with the patient experience (*see page 50*);
- Track definition for corporate support areas such as Finance, Human Resources and Information Technology;
- Incorporation of augmented reality resources in urgent and emergency care training; and
- Engagement and reinforcement in fire brigade training.

CAPACITY BUILDING (H)

	2016	2017	2018	2019	Δ 2019/2018
Internal training	681,245	557,193	524,023	797,639	52.2%
External training	53,240	33,855	32,219	35,531	10.3%
Total	**734,485**	**591,048**	**556,242**	**833,170**	**49.8%**
Average per employee	**51.5**	**44.6**	**40.87**	**59.60**	**45.8%**

DEVELOPMENT STIMULATION

Einstein offers financial assistance for employees to participate in their teaching activities, such as Technical, Undergraduate and Specialization, MBA, Master, Phd And Postdoctoral Courses, Leadership Development Programs, Refresher Courses and Events. In 2019, about 1.5 thousand scholarships were awarded, which cover from 50% to 100% of the course expenses.

In addition to internal programs, training courses are offered for residents of Einstein-assisted regions and for children of employees. All participants are eligible to be hired for vacancies at Einstein.

DIGITAL TRANSFORMATION

Digital Culture has become even more present for employees, in line with the digital transformation of the entire organization. Human Resources teams use the Agile methodology of project development, a consolidated approach in technology, but still a novelty in human resources.

With the digital HR platform, employees have access to various internal communication network features and, in some areas, timecard control is already done by smartphone.

Workplace, a social network for work environments adopted by Einstein in 2018, has consolidated itself as an internal communication tool and platform for sharing information and content of interest for professional performance. The tool, which is accessible via smartphone, has the support of 80% of employees.

EFFICIENCY

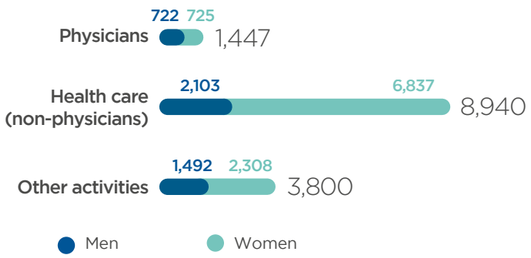
A special care strategy that has been promoting good practices and improving the patient experience at Einstein is the multiprofessional team of hospitalists. Trained to work in several areas and units according to demand, these professionals provide support to the care and assistance practices, and stimulate the renewal of knowledge, without the need to expand fixed teams.

DIVERSITY

At the end of 2019, Einstein launched the Diversity and Inclusion Program, which consolidated initiatives on the topic in five areas: Identity, Gender, Age, Ethnicity and Sexual Orientation.

The launch was marked by the dissemination of a video-manifesto, shared on the organization's various social networks. Beginning in 2020, employees will be called upon to participate in the discussions and joint construction of diversity in the organization.

DISTRIBUTION BY GENDER, BY ACTIVITY (2019)



OTHER DIVERSITY INDICATORS (2019)

Job category	Blacks		Disabled		Less than 30		Between 30 and 50		Over 50	
	Men	Women	Men	Women	Men	Women	Men	Women	Men	Women
By job/level	**383**	**786**	**134**	**210**	**1,255**	**2,692**	**2,746**	**6,524**	**316**	**654**
Director	0	0	0	0	0	0	2	4	6	5
Manager	2	0	0	0	1	0	31	52	8	7
Medical Manager	0	0	0	0	0	0	13	6	10	1
Coordinator / Specialists	3	2	1	0	20	7	144	274	14	51
Medical Coordinator	0	1	0	0	0	0	56	18	29	13
Physicians (I, II, III)	6	7	1	0	71	77	473	548	70	62
Professional	140	245	11	29	345	1,097	1,221	3,304	81	215
Technician	140	276	66	87	543	976	636	1,401	69	127
Assistant	92	255	55	94	275	535	170	917	29	173

PAY EQUITY[1]

Equity	Proportion				Δ 2019/2018[2]
	2016	2017	2018	2019	
Director	90.0%	75.9%	79.5%	77.3%	-2.2 p.p.
Manager	91.0%	86.5%	82.4%	82.0%	-0.4 p.p.
Medical Manager	88.0%	80.6%	83.0%	82.0%	-1.0 p.p.
Coordinator / Specialists	102.0%	99.5%	100.8%	97.9%	-2.9 p.p.
Medical Coordinator	79.0%	86.0%	83.2%	85.3%	2.1 p.p.
Physicians (I, II, III)	90.0%	91.7%	90.7%	91.7%	1.1 p.p.
Professional	106.0%	106.5%	105.5%	103.6%	-1.9 p.p.
Technician	98.0%	98.0%	98.8%	98.9%	0.1 p.p.
Assistant	106.0%	107.0%	106.7%	107.2%	0.5 p.p.

[1] Average wage for women/average wage for men in each job category..
[2] P.p.: percentage points.

VACCINATION

The employees vaccination coverage in 2019 was the largest in the history of the organization, thanks to actions such as moving up the campaign, on-site vaccination and itinerant vaccination. Coverage for the triple viral vaccine, for example, reached 98%.

EMPLOYEE HEALTH AND SAFETY

Einstein continuously invests in team awareness and engagement to make safety and health in the workplace a commitment for all. In 2019, the observation and behavioral approach tool, which had already been used by leadership and other strategic groups since 2016, began to include the leadership goals, with monthly monitoring of the execution rate (use of the tool).

More than 700 team leaders and members of CIPA - *Comissão Interna de Prevenção de Acidentes* (Internal Commission for Accident Prevention) have been trained to act as observers. The observations are recorded on a platform and used to objectively guide the dissemination of information about risks in daily activities and how to mitigate them. Throughout the year, more than 5 thousand behavioral observations were recorded.

EMPLOYEE HEALTH AND SAFETY INDEX[1]

	2016	2017	2018	2019	Δ 2019/2018
Frequency rate of typical accidents with loss of time[2]	3.46	1.61	1.98	1.47	-26%
Rate of biohazard accidents without loss of time[2]	3.81	2.07	1.67	2.69	61%
Severity index[3]	59.12	33.84	16.24	17.51	8%
Frequency rate of commuting accidents with time away[4]	NA	NA	3.48	3.20	-8%
Rate of employees on leave[5]	1.75%	1.56%	1.52%	1.44%	-5%

[1] The data as of 2018 considers all employees, including those who work in the two public hospitals operated by Einstein in São Paulo.
[2] Accidents/man-hours worked with exposure to risk.
[3] Days missed/man-hours worked with risk exposure.
[4] Entered the index in 2019.
[5] Based on the monthly average.
NA: data not available.

The occupational safety and health index recorded a positive evolution with regard to the rate of typical accidents with loss of time, which fell 26% compared to 2018.

Performance related to accidents with biological risk worsened. Einstein is reinforcing preventive actions, such as specific admission training, behavioral observations focused on biological risks, internal communication, interaction with clinical staff and students, innovation in interventions, and videos with testimonials, among others.

Safe mobility was the target of several awareness-raising initiatives, such as videos, a booklet and an internal signage campaign with tips on how to move safely around the city. The training of motorcycle employees, which lasted 12 hours, was extended to physicians on the clinical staff starting in 2019. Since the beginning of the training sessions in 2017, 402 people have been trained.

HEALTH, QUALITY OF LIFE AND WELL-BEING INITIATIVES

- One in three employees joined gympass, which gives access to a number of gyms in São Paulo and is offered to encourage physical activity.
- The employee training schedule was adjusted to follow the shifts and work schedule of the teams. In the assistance area, for example, training classes were created at night and in early morning hours, during the employees' normal working hours.

ERGONOMICS

In order to reduce the risks of DORT - *Distúrbios Osteomusculares Relacionados ao Trabalho* (Work-Related Musculoskeletal Disorders) in the movement and transfer of bed-ridden patients, Einstein structured a program with nursing assistants dedicated to working in intensive and semi-intensive care units.

The professionals received training from a physical educator and an ergonomics specialist on the procedures and care to be adopted.

The project started on time in 2018 and was expanded in 2019 — with positive results. There were no cases of musculoskeletal disorders in the team dedicated to the activities and the units supported by the pairs recorded a decrease in indicators related to such disorders. Considering the average of occurrences in 2016 and 2017, before the project, and the average in 2018-2019, the total of professionals who requested a leave related to the disorder fell 41.5% and the total of days missed fell 71.6%.

ENVIRONMENT

ENVIRONMENTAL QUALITY

Compliance with laws and regulations, the consumption of natural resources and aspects related to waste, effluents and emissions are a priority at Einstein. Management is focused on reducing impacts and ensuring environmental protection.

Since 2018, the SGI - *Sistema de Gestão Integrada* (Integrated Management System) — which consolidates the management of the various environmental and energy aspects of the organization — standardized procedures, policies and actions, as well as provided leadership with a more strategic vision for monitoring challenges and advances.

With the aim of improving the management of environmental risks, Einstein carried out a comprehensive diagnosis of the operation in 2019. All the properties (rented and owned) that hosted Einstein's activities, regardless of the nature or area of the activity, underwent a soil or groundwater contamination risk assessment, when applicable, considering not only Einstein's activities, but also the land use history. In three properties classified as having potential risk, more in-depth assessments were carried out, and in two of them any contamination has already been ruled out.

In all the properties owned by the organization, the effluent management and control plans were reviewed. The data on the quality of waste disposal was consolidated in a panel and monitored periodically.

In addition, throughout the year, reports on environmental noise generation, usually caused by the activation of emergency generators, were reviewed.

Einstein annually establishes an environmental performance package with monitoring indicators of priority issues, as well as objectives and targets to be achieved, which include aspects of continuous follow-up and short-term actions, providing management with a clear and objective view of the pace of implementation of the strategy.

THE INTEGRATED MANAGEMENT SYSTEM STANDARDIZED PROCEDURE, POLICIES AND ACTIONS, AND MONITORS CHALLENGES AND ADVANCES IN ENVIRONMENTAL AND ENERGY PERFORMANCE.

ENERGY

Einstein permanently seeks to improve the energy efficiency of the operation in order to minimize the impacts of increasing consumption resulting from its growth and the acquisition of new pieces of equipment. Since 2013, all electrical energy purchases have been made on the free market and focuses entirely on renewable sources, with less environmental impact.

Throughout the year, Einstein has moved forward on important initiatives, which will provide more efficiency beginning in 2020. The new Air Conditioning Plant automation system was implemented, which aims to reduce the electrical energy consumption of the equipment by as much as 10%, through the use of electronic actuators, artificial intelligence algorithms, and interventions by the technical team.

Another relevant action was the drafting of the Thermal Systems Master Plan, which defined the technological solution and the renewal strategy for the conditioning, heating and water pumping equipment plant. The project will mobilize nearly R$ 18 million in investments and can increase by 10% the average efficiency of the plant, reduce the use of water by 20%, and avoid 25% of the consumption of natural gas in the unit. The project considers changes in the energy matrix at Einstein, which can reduce the emission of greenhouse gases.

POWER CONSUMPTION (GJ)

	2016	2017	2018	2019	Δ 2019/2018
Renewable sources					
Ethanol	1	0	0.002	0.781	38533.3%
Electricity	183,740	184,530	197,053	204,699	3.9%
Non-renewable sources					
Natural gas	42,656	40,304	47,392	52,689	11.2%
Gasoline	101	272	488	268	-45.2%
Diesel oil	8,092	13,036	9,797	8,007	-18.3%
Total	**234,598**	**238,142**	**254,730**	**265,663**	**4.3%**

GJ: gigajoule.

WATER

Even with the growth of the organization and the opening of new operational units, water consumption remained in line with that of the previous year. Among the measures that contributed to this performance, are awareness initiatives and investment in equipment that favors rational use. Throughout the year, 200 toilets were replaced with new equipment, with double-activated flushing systems. The process of standardization also improved the flow of showers and faucets with the use of aerators and pressure and flow reducers. In total, there are already 38 thousand water consumption points that use these resources, and all new units operate in line with Einstein's efficiency standards.

WATER CONSUMPTION (M^3)

	2016	2017	2018	2019	Δ 2019/2018
Utility provider	278,750	288,286	239,268	242,533	1.4%
Artesian well (own)	34,520	12,244	33,662	33,880	0.6%
Total	**313,270**	**300,530**	**272,930**	**276,413**	**1.3%**

RECOGNITION

In order to encourage and recognize the good environmental practices put into practice by employees, Einstein awarded three initiatives during the SIPATMA - *Semana Interna de Prevenção de Acidentes no Trabalho e Meio Ambiente* (Work Accident Prevention and the Environment Week) in its 2nd edition, when an award was granted for good environmental practices:

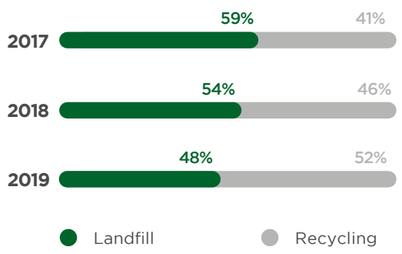
- **Child Environmental Agents:** environmental awareness of elementary school students from schools in the UBS (Basic Healthcare Unit) Parque Regina - São Paulo south region;
- **Meat free Monday:** review of the menu at *Hospital Municipal Vila Santa Catarina - Dr. Gilson de Cássia Marques de Carvalho* to encourage the consumption of alternatives to red meat with less environmental impact: and
- **Sustainable Logistics:** initiative that prioritizes the use of bicycles and vehicles powered by ethanol for the delivery of reports and exams from the Morumbi Unit.

WASTE

One of the highlights of the year was the quality gain in waste screening, with the hiring of a new supplier. The use of automated mats with sensors allows for a better and more precise identification and separation of the different subtypes of recyclable materials, to ensure their effective recycling. The work takes place after the collection stage. The action increased the total non-hazardous waste sent for recycling from 46% to 52%.

The composting of organic waste from food preparation, which was already being done at the Morumbi Unit, was also adopted at the Vila Mariana Unit, where 51.8 tons of waste was processed. A total of more than 480 tons of organic waste was composted at Einstein.

DISPOSAL OF NON-HAZARDOUS WASTE (T)



NEW AUTOCLAVE

All critical infectious residue from the Morumbi Unit undergoes decontamination in an autoclave sterilizer installed on site, and is then crushed.

The process eliminates the risk of biological contamination and allows materials to be safely disposed of as common waste. The new equipment, the first of its kind in the country, occupies an area of 300 square meters. It went into operation in the first half of 2019, after going through all the required stages of environmental licensing.

Critical waste accounts for 23% of the total infectious waste in the unit, which receives specialized decontamination treatment and disposal, in line with legal standards.

WASTE (t)

	2016	2017	2018	2019	Δ 2019/2018	Method of disposal
Hazardous waste	**1,293,3**	**1,200,4**	**1,460,0**	**1,528,7**	**4.7%**	
Infectious waste	1,207,0	1,106,4	1,324,9	1,360,0	2.7%	Autoclaving
Chemical waste	85.4	93.2	134.9	168.2	24.7%	Incineration
Radioactive disposal[1]	0.8	0.9	0.2	0.4	150.6%	Stored for decay on site (safe)
Non-hazardous waste	**2,724,8**	**2,621,8**	**2,918,3**	**2,995,0**	**2.6%**	
Non-recyclable	1,668,9	1,524,4	1,570,2	1,426,6	-9.1%	Landfill
Recyclable	1,055,9	1,097,4	1,348,1	1,568,4	16.3%	Recycling
Organic	228.6	334.5	344.0	482.7	40.3%	Composting
Total (t)	**4,018,1**	**3,822,2**	**4,378,3**	**4,523,7**	**3.3%**	
Number of equivalent passages[2]	**13,160,604,8**	**10,047,847,5**	**10,870,321,0**	**10,443,960,0**	**-3.9%**	
Intensity of waste generated (kg waste generated/total equivalent passages)	**0.305**	**0.380**	**0.403**	**0.433**	**7.5%**	

[1] Radioactive waste is kept in lead chests located inside the organization facilities for radiation decay and are monitored by specialized staff. After decay they are discarded as infectious waste and follow the same flow.

[2] The total number of equivalent passages considers all the modalities of care performed at Einstein and the average length of stay of patients in the organization's facilities: 4 hours in diagnostic medicine, 2 hours in the emergency room and in the operating room and 24 hours in hospitalizations. Until 2016, 6 hours per passage in the emergency room were considered and the calculation did not include time in the operating room.

EMISSIONS

Annually, Einstein calculates Greenhouse Gas (GHG) emissions through an inventory prepared according to the specifications of the Brazilian GHG Protocol program. The document is audited and publicly disclosed. To view the latest edition, go to https://registropublicodeemissoes.com.br/participantes/1048.

In 2019, the institution reviewed the mapping of sources of other atmospheric emissions, such as Particulate Matter (PM), resulting from the burning of fossil fuel in emergency generators, among other sources.

ABOUT THE REPORT

REPORTING PROCESS AND MATERIALITY

The main advances and challenges in managing the sustainability of SBIBAE (*Sociedade Beneficente Israelita Brasileira Albert Einstein*) are depicted in this Sustainability Report. The publication was prepared according to the GRI (Global Reporting Initiative) Standards: an essential option, covering the period from January 1st to December 31st, 2019.

The content definition considers the materiality issues, reviewed in 2019, based on the new materiality study. More than just pointing out the main issues to be depicted in the report, this process helps the organization to understand and align itself with the expectations of today's society and the future, and is an important element for management.

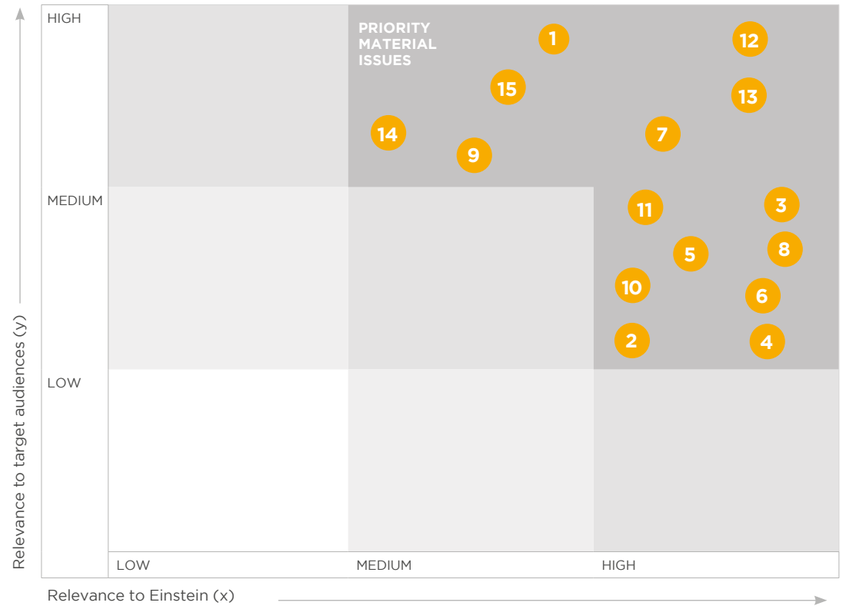
The process, which included the 15 material themes depicted in detail in this publication, involved an on-line survey of more than 1.3 thousand people from the different strategic relationship groups at Einstein. 1,296 employees, 123 physicians, 13 patients, 12 students, 7 teaching professionals, 5 researchers, 13 volunteers and 10 suppliers participated.

The analysis also considered the strategic map of the organization and a series of publications that are relevant to the healthcare sector, such as Observatório 2019 from *Associação Nacional de Hospitais Privados* (Anahp - National Association of Private Hospitals), Plano Nacional de Saúde (2016-2019/ National Health Plan), *Plano Estadual de Saúde de São Paulo* (2016-2019/ São Paulo State Health Plan) and Plano Municipal de Saúde (2018-2021/ Municipal Health Plan).

Einstein's leadership was responsible for prioritizing the themes raised in the survey with the public, considering elements such as the vision of the future, strategic planning, risks, and opportunities. 36 directors, superintendents, managers, specialists, consultants, supervisors and physicians in leadership positions participated in this stage.

The themes were distributed graphically in a matrix, and those positioned in the upper two thirds of the graph were considered as material. For each theme, the GRI guideline related aspects were defined and the corresponding indicators were selected, considering not only the GRI methodology, but also the SASB (Sustainability Accounting Standards Board) guidelines and the performance monitoring tools from Einstein.

2019



1. Access to healthcare
2. Fighting corruption
3. Environmental compliance
4. Socioeconomic compliance
5. Economic performance
6. Diversity and Equity
7. Effectiveness of Healthcare Services
8. Patient experience
9. Waste generation and disposal
10. Generation and Dissemination of knowledge
11. Compensation models for healthcare services
12. Disease prevention and healthcare promotion
13. Patient health and safety
14. Occupational health and safety
15. Training and Education

MATERIAL ISSUES AND LIMITS

Material Issue	Stakeholder vision[1]	Monitoring indicators	Where does the impact occur?	Einstein involvement
Access to healthcare	• Employees • Physicians * Teaching professionals * Sector entities * Government	• 103-01 • 103-02 • 103-03 • *Hospital Israelita Albert Einstein* • Agreements with the city of São Paulo • Management contract with the city of São Paulo • Agreements with the Ministry of Health and the city of São Paulo • Organ transplantation • Einstein in the Paraisópolis Community Program (PECP)	Society	Impact caused by the organization
Fighting corruption	• Employees * Physicians * Teaching professionals *Suppliers	• 103-01 • 103-02 • 103-03 • 205-01 • 205-02 • 205-03	Society	Impact caused by the organization and in relationships with its value chain
Environmental compliance	• Employees * Teaching professionals	• 103-01 • 103-02 • 103-03 • 307-01	Environment	Impact caused by the organization
Socio-economic compliance	• Government	• 103-01 • 103-02 • 103-03 • 419-01	Society	Impact caused by the organization
Economic performance	• Sector entities *Government	• 103-01 • 103-02 • 103-03 • 201-04 • Financial commitments adopted • Added value statements • Income statements • Balance sheet • Financial indicators • Capital expenditure	Society	Impact caused by the organization
Diversity and equity	• Employees * Teaching professionals	• 103-01 • 103-02 • 103-03 • 405-01 • 405-02	Employees	Impact caused by the organization
Effectiveness of Healthcare Services	• Employees * Physicians * Patients * Teaching professionals * Researchers * Students * Sector entities * Government	• 103-01 • 103-02 • 103-03	Patients	Impact caused by the organization
Patient experience	• Employees * Physicians * Students * Sector entities	• 103-01 • 103-02 • 103-03 • Patient satisfaction • Contact received by the Customer Service (SAC) channel	Patients	Impact caused by the organization
Waste generation and disposal	• Employees * Physicians • Patients * Teaching professionals • Researchers • Suppliers	• 103-01 • 103-02 • 103-03 • 306-02	Environment	Impact caused by the organization
Generation and dissemination of knowledge	• Physicians * Teaching professionals • Researchers	• 103-01 • 103-02 • 103-03 • Teaching and education: modality • Research — Einstein's operating and capital expenses • Research — External investments • Publication of Einstein researchers • Research and innovation	Society	Impact caused by the organization
Healthcare services compensation model	• Sector entities • Government	• 103-01 • 103-02 • 103-03	Healthcare sector	Impact caused by the organization and in relationships with its value chain
Disease prevention and healthcare promotion	• Employees • Physicians • Patients • Teaching professionals • Researchers • Students • Volunteers • Sector entities • Government	• 103-01 • 103-02 • 103-03	Society	Impact caused by the organization
Patient health and safety	• Employees • Physicians • Patients • Teaching professionals • Researchers • Students • Volunteers • Sector entities • Government	• 103-01 • 103-02 • 103-03 • 416-01 • Patient Safety Index	Patients	Impact caused by the organization
Occupational health and safety	• Employees • Physicians • Teaching professionals • Suppliers	• 103-01 • 103-02 • 103-03 • 403-02 • Employee health and safety Index	Employees	Impact caused by the organization
Training and education	• Employees • Physicians • Patients • Teaching professionals • Suppliers • Students • Volunteers	• 103-01 • 103-02 • 103-03 • 404-01	Employees	Impact caused by the organization

[1] Audiences that pointed out the topic as relevant.

MANAGEMENT/HANDLING OF MATERIAL ISSUES

Material Issue	Explanation and limits	Management style	Evaluation of management style
	Page		
Access to healthcare	82, 83, 84, 112 and 113	18	18
Fighting corruption	82, 83, 84, 112 and 113	85 and 115	85 and 115
Environmental compliance	82, 83, 84, 112 and 113	104 and 115	104 and 115
Socioeconomic compliance	82, 83, 84, 112 and 113	85 and 115	85 and 115
Economic performance	82, 83, 84, 112 and 113	90 and 115	90 and 115
Diversity and Equity	82, 83, 84, 112 and 113	100	100
Effectiveness of Healthcare Services	82, 83, 84, 112 and 113	32	32
Patient experience	82, 83, 84, 112 and 113	50	50
Waste generation and disposal	82, 83, 84, 112 and 113	108	108
Generation and Dissemination of knowledge	82, 83, 84, 112 and 113	58 and 68	58 and 68
Healthcare services compensation model	82, 83, 84, 112 and 113	32	32
Disease prevention and healthcare promotion	82, 83, 84, 112 and 113	54	54
Patient health and safety	82, 83, 84, 112 and 113	45 and 116	45 and 116
Occupational health and safety	82, 83, 84, 112 and 113	102	102
Training and Education	82, 83, 84, 112 and 113	99	99

GRI CONTENT SUMMARY

GRI STANDARD

Indicator		Page / Reply	Omissions
GRI 101: 2016 FUNDAMENTALS			
General disclosure			
GRI 102: General disclosure 2016	**102-01** Name	*Sociedade Beneficente Israelita Brasileira Albert Einstein* (SBIBAE)	–
	102-02 Activities, brands, products and services	Page 10	–
	102-03 Location of headquarters	São Paulo (SP)	–
	102-04 Location of operations	Page 10	–
	102-05 Type and legal nature of property	Page 10	–
	102-06 Markets in which it operates	Page 10	–
	102-07 Size	Pages 8 - 10	–
	102-08 Employees and other workers	Page 96	–
	102-09 Supply chain	Page 88	–
	102-10 Significant changes in the organization and its supply chain	None.	–
	102-11 Precaution principle	Strategic planning and risk management are guided by the precautionary principle, present in the provision of healthcare services, in the development of research and innovation activities, in the relationship with people and in environmental management.	–
	102-12 External initiatives	Page 12	–
	102-13 Participation in associations	Page 12	–
	102-14 Message from the president	Pages 4 and 5	–
	102-16 Values, principles, standards and rules of conduct	Page 13	–
	102-18 Governance structure	Pages 16 and 17	–
	102-40 List of stakeholders	Page 110	–
	102-41 Percentage of employees covered by collective bargaining agreements	100%	–
	102-42 Identification and selection of stakeholders	Page 110	–
	102-43 Approach to engaging stakeholders	Page 110	–
	102-44 Main themes and concerns raised	Pages 112 and 113	–
	102-45 Entities included in the consolidated financial statements	Einstein concentrates its activities in only one entity, fully covered by the financial statements and this report.	–
	102-46 Definition of content and limits	Pages 112 and 113	–
	102-47 List of material issues	Pages 82 - 84	–
	102-48 Reformulation of information	None.	–
	102-49 Changes in the drafting of the report	None.	–
	102-50 Period covered by the report	From January 1 to December 31, 2019.	–
	102-51 Date of most recent report	2018	–
	102-52 Publication cycle	Annual	–
	102-53 Contact in case of questions	*Fale Conosco* contact channel, available at: www.einstein.br.	–
	102-54 GRI standard compliance statement	This report has been prepared according to GRI Standards - an essential option.	–
	102-55 GRI content summary	Pages 114 - 116	–
	102-56 External verification	No external verification was performed.	–

GRI STANDARD

Indicator		Page / Reply	Omissions
ECONOMIC THEMED CONTENT			
Economic performance			
GRI 103: Management Approach 2016	**103-01** Explanation of the material issue and its limits	Pages 82-84 and 112-113	–
	103-02 The management style and its components	Pages 90 and 115	–
	103-03 Evolution of management style	Pages 90 and 115	–
GRI 201: Economic performance 2016	**201-04** Financial assistance received from the government	Einstein does not get subsidies or tax incentives. The transfers received from the government are limited to the reimbursement of expenses for the management of *Hospital Municipal M'Boi Mirim - Dr. Moysés Deutsch* and the implementation of the primary care program for the Municipal Health Department of São Paulo, described on pages 25, 26 and 27.	–
Fighting corruption			
GRI 103: Management Approach 2016	**103-01** Explanation of the material issue and its limits	Pages 82-84 and 112-113	–
	103-02 The management style and its components	Pages 85 and 115	–
	103-03 Evolution of management style	Pages 85 and 115	–
GRI 205: Fighting corruption 2016	**205-01** Unidades submetidas a avaliações de riscos relacionados à corrupção	Risk assessments cover 100% of operations.	–
	205-02 Comunicação e treinamentos sobre políticas e procedimentos anticorrupção	Communications reached 100% of employees and 13,010 employees were trained, which is equivalent to 92% of the total.	–
	205-03 Casos confirmados de corrupção e medidas tomadas	None.	–
Socio-economic compliance			
GRI 103: Management Approach 2016	**103-01** Explanation of the material issue and its limits	Pages 82-84 and 112-113	–
	103-02 The management style and its components	Pages 85 and 115	–
	103-03 Evolution of management style	Pages 85 and 115	–
GRI 419: 2016 Socio-economic compliance	**419-01** Socio-economic compliance	There was no case of non-compliance.	-
ENVIRONMENTAL-THEMED CONTENT			
Environmental compliance			
GRI 103: Management Approach 2016	**103-01** Explanation of the material issue and its limits	Pages 82-84 and 112-113	–
	103-02 The management style and its components	Pages 104 and 115	–
	103-03 Evolution of management style	Pages 104 and 115	–
GRI 307: Environmental compliance 2016	**307-01** Socioenvironmental compliance	There was no case of non-compliance.	–
Effluents and waste			
GRI 103: Management Approach 2016	**103-01** Explanation of the material issue and its limits	Pages 82-84 and 112-113	–
	103-02 The management style and its components	Page 108	–
	103-03 Evolution of management style	Page 108	–
GRI 306: Effluents and waste 2016	**306-02** Waste by type and disposal method	Page 109	–

GRI STANDARD

Indicator		Page / Reply	Omissions
SOCIAL-THEMED CONTENT			
Training and education			
GRI 103: Management Approach 2016	**103-01** Explanation of the material issue and its limits	Pages 82-84 and 112-113	–
	103-02 The management style and its components	Page 99	–
	103-03 Evolution of management style	Page 99	–
GRI 404: Training and Education 2016	**404-01** Average hours of training employee per year	Page 99	–
Diversity and equity			
GRI 103: Management Approach 2016	**103-01** Explanation of the material issue and its limits	Pages 82-84 and 112-113	
	103-02 The management style and its components	Page 100	
	103-03 Evolution of management style	Page 100	
GRI 405: Diversity and Equity 2016	**405-01** Diversity in governance bodies and employees	Page 101	
	405-02 Ratio of basic wage and pay between women and men	Page 101	
Occupational health and safety			
GRI 103: Management Approach 2016	**103-01** Explanation of the material issue and its limits	Pages 82-84 and 112-113	-
	103-02 The management style and its components	Page 102	-
	103-03 Evolution of management style	Page 102	-
GRI 403: Occupational Health and safety 2016	**403-02** Injuries, occupational diseases, missed days, absenteeism and work-related fatalities	Page 102	
Customer health and safety			
GRI 103: Management Approach 2016	**103-01** Explanation of the material issue and its limits	Pages 82-84 and 112-113	-
	103-02 The management style and its components	Pages 45 and 116	-
	103-03 Evolution of management style	Pages 45 and 116	-
GRI 416: Customer health and safety 2016	**416-01** Health and safety impact assessment during the life cycle of products and services	The assessment covers 100% of the services and products. For more information, see page 45.	-

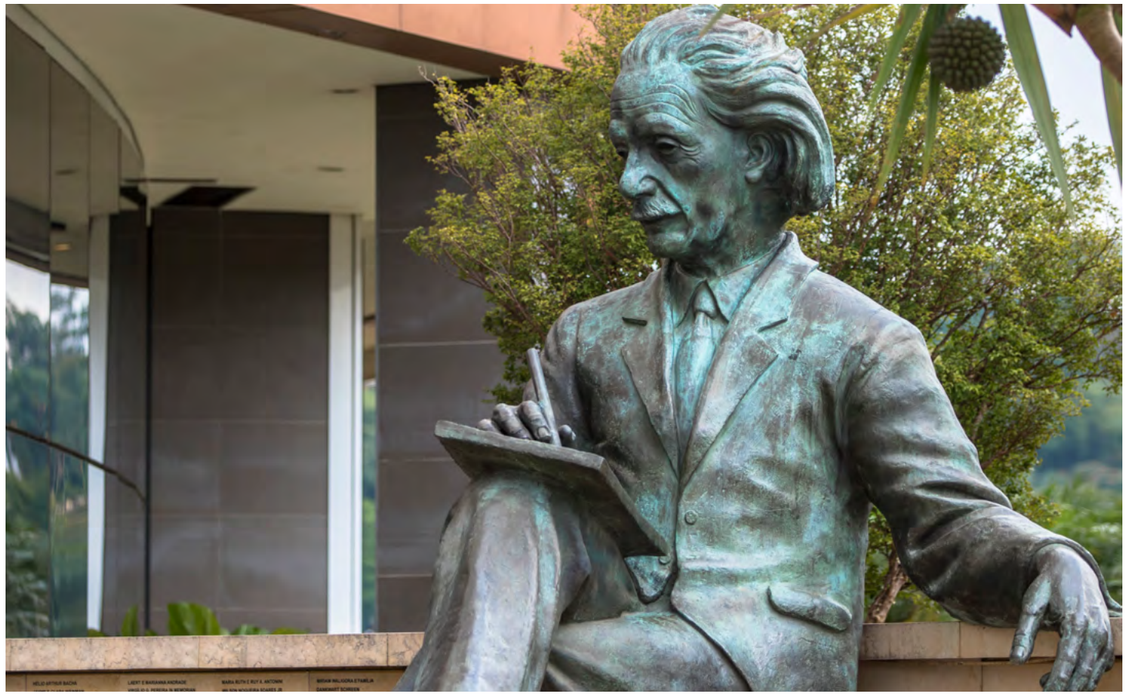
GLOBAL PACT

Einstein is a signatory to the Global Pact, a voluntary initiative of the United Nations (UN) that aims to promote good business practice in four aspects: human rights, working conditions, the environment and the fight against corruption. The institution carries out several initiatives and projects aimed at putting into practice the Ten Principles on which the Pact is based, as well as integrating the Brazilian committee and encouraging other companies to join the initiative.

The following table indicates the main actions carried out in 2019.

Principle		Page
Human Rights		
1	Support and respect the protection of internationally recognized human rights.	88
2	Guarantee non-participation in violations of these rights.	88
Work		
3	Support the freedom of association and the recognition of the right to collective bargaining.	114
4	Support the elimination of all forms of forced or compulsory labor.	88
5	Support the effective abolition of child labor.	88
6	Eliminate discrimination in employment.	100
Environment		
7	Support a preventive approach to environmental challenges.	104 - 108
8	Develop initiatives to promote greater environmental responsibility.	88 and 107
9	Encourage the development and dissemination of environmentally friendly technologies.	106 and 108
Against corruption		
10	Fight corruption in all its forms, including extortion and bribery.	85 and 88

BOARDS AND COUNCILS



HONORARY PRESIDENTS

Ema Gordon Klabin Z'L
Manoel Tabacow Hidal Z'L
Jozef Fehér Z'L
Joseph Safra

BOARD OF DIRECTORS (ELECTED)

(MANDATE: 12/05/2016 TO 12/05/2022)

Sidney Klajner
President

Claudio Mifano
Eduardo Zlotnik
Gilberto Maktas Meiches
Marcelo Giovanni Perlman
Marcos Knobel
Nelson Wolosker
Sergio Podgaec
Victor Nudelman
Vice-presidents

Claudia Sender Ramirez
Advisor to the Elected Board of Directors

BOARD OF DIRECTORS

(MANDATE: 12/05/2016 TO 12/05/2022)

Claudio Luiz Lottenberg
President

Israel Vainboim
Claudia Politanski
Claudio Schvartsman
Nelson Hamerschlak
Vice-presidents

Bernardo Parnes
Dominique José Einhorn
Mario Fleck
Oscar Fernando Pavão dos Santos
Members

Luis Fernando Aranha Camargo
Mauro Roberto Terepins
Moises Cohen
Advisors

DELIBERATIVE COUNCIL BOARD

(MANDATE: 12/05/2016 TO 12/05/2022)

Claudio Luiz Lottenberg

Israel Vainboim
Claudia Politanski
Claudio Schvartsman
Nelson Hamerschlak
Vice-presidents

FISCAL COUNCIL

(MANDATE: 12/05/2016 TO 12/05/2022)

Alexandre Roberto Ribenboim Fix
Andrea Sandro Calabi
Charles Siegmund Rothschild
Henri Philippe Reichstul
Jacob Jacques Gelman

DELIBERATIVE COUNCIL

1ST THIRD (MANDATE: 12/05/2016 TO 12/05/2022)

Abramo Douek
Alberto Bitran
Alberto Goldenberg
Antonio Luiz de Vasconcellos Macedo
Arthur Rothman
Benjamin Steinbruch
Bernardo Parnes
Claudia Politanski
Claudio Roberto Deutsch
Claudio Schvartsman
Claudio Szajman
Dan Oizerovici
David Salomão Lewi
Debora Simões Steinman
Diana Gertrudes B. Salles Vanni
Dominique José Einhorn
Dov Charles Goldenberg
Eduardo Cukierman
Eduardo Weltman
Elias Knobel
Fabiana Leschziner
Fabio Topczewski
Flavio Murachovsky
Gabriel Tabacow Hidal
Gilberto Maktas Meiches
Gilberto Szarf
Helio Korkes
Isac Neumark
Israel Vainboim
Jack Leon Terpins
Julio Serson
Laercio Alberto Rosemberg
Leivi Abuleac
Luci Black Tabacow Hidal
Luis Fernando Aranha Camargo
Meyre Mizrahi Klajner
Luiz Roberto Zitron
Marcelo Blay
Marcelo Franken
Marcelo Pires Prado
Marcelo Wajchenberg
Marcos Arbaitman
Marcos Karniol
Mario Grinblat
Mario Ruhman
Michael Edgar Perlman
Milton Glezer
Milton Steinman
Nelson Hamerschlak
Oscar Fernando Pavão dos Santos
Oskar Kaufmann
Paulo Sergio C. Galvão Filho
Pedro Custódio de Mello Borges
Ricardo Goldstein
Ricardo Kaufmann
Sergio Eduardo Alonso Araújo
Sergio Kuzniec
Sergio Podgaec
Sergio Rosenthal
Simão Augusto Lottenberg

DELIBERATIVE COUNCIL

2ND THIRD (TERM: 12/17/2018 TO 12/17/2024)

Abram Topczewski
Alberto Blay
Amit Nussbacher
Anna Maria Andrei Fischmann
Antonio Eduardo Pereira Pesaro
Ari Stiel Radu Halpern
Ariel Tabacow Hidal
Benno Ejnisman
Bento Fortunato Cardoso dos Santos
Carlos Vicente Serrano Junior
Celso Lafer
Claudio Mifano
Charles Siegmund Rothschild
Claudio Arnaldo Len
Daniel Tibor Fuchs
Eduardo de Campos Werebe
Eduardo Tabacow Hidal
Eduardo Zlotnik
Fabio Schvartsman
Fernando Bacal
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Flavio Steinwurz
Gilberto Mautner
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Guilherme Carvalhal Ribas
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Marcelo Langer Wroclawski
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Marcos Knobel
Mauricio Kurc
Mauro Roberto Terepins
Meyer Joseph Nigri
Moisés Cohen
Morris Dayan
Octávio José Aronis
Oren Smaletz
Paulo Rosenbaum
Ricardo Botticini Peres
Roberto Luiz Leme Klabin
Roberto Ruhman
Sandra Sandacz
Sidney Glina
Silvio Eduardo Bromberg
Sueli Dicker
Telma Sobolh
Victor Kupfer
Victor Nudelman

DELIBERATIVE COUNCIL

3RD THIRD (TERM: 12/15/2014 TO 12/15/2020)

Abram Abe Szajman
Alexandre Holthausen Campos
Alexandre Roberto Ribenboim Fix
Amancio Ramalho Junior
André Grunebaum
Andrea Sandro Calabi
Antonio Henrique B. Cunha Bueno
Beni Moreinas Grinblat
Beno Suchodolski
Betty Knobel
Bruno Laskowsky
Carlos Eduardo Czeresnia
Claudio Luiz da Silva Haddad
Claudio Thomaz Lobo Sonder
Daniel Feldman Pollak
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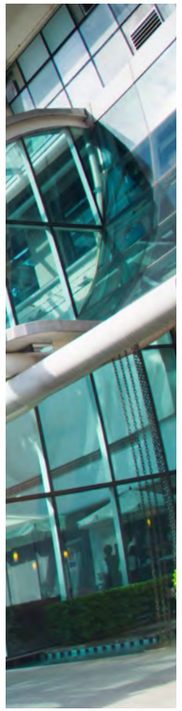

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