



# Sustainability Report 2020



ALBERT EINSTEIN  
SOCIEDADE BENEFICENTE ISRAELITA BRASILEIRA



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# EINSTEIN'S TRAJECTORY ALLOWED FOR A LEADING ROLE IN THE PANDEMIC

SIDNEY KLAJNER  
President of Sociedade Beneficente  
Israelita Brasileira Albert Einstein

## WHAT IS YOUR ASSESSMENT OF THIS VERY EMBLEMATIC AND CHALLENGING YEAR?

**Sidney Klajner:** In 2020, we carried out our mission to deliver the best in public and private healthcare to tackle the pandemic. The organization turned 65 in 2020 and I think many people still aren't familiar with what Einstein does.

This year allowed us to put our entire trajectory of innovation and disruption, our ability to transform, our experience in supporting public health management and our obsession with always doing more and better to the test.

We have one of the best ICUs in the world, a Telemedicine program that has accumulated eight

years of experience and the capacity to train staff, design and flexibilize infrastructures and segregate and define flows for specific needs — all a result of being an organization that focuses on quality and safety. In 1999, more than 20 years ago, Einstein was the first hospital outside the United States to receive accreditation from the Joint Commission, for example. And in an emblematic moment such as the beginning of the pandemic, we were recognized as one of the 50 best healthcare institutions in the world by *Newsweek* magazine. For the first time a hospital in Latin America appeared on this list.

This trajectory allowed Einstein to play a leading role in the fight the pandemic, both in private and public healthcare realms. As an example, we led research

projects that helped to answer questions about Covid-19 treatments and we made telemedicine widely available, including its use as a platform for the Sistema Único de Saúde, better known by the acronym SUS (Brazil's Unified Health System). Our Education Area transferred all of its face-to-face environments to virtual platforms — including the Nursing and Medicine courses — while maintaining internships. We also started to support a greater number of health professionals through virtual education, attracted by Einstein's quality content, which became much more accessible in this environment.

## EINSTEIN HAD THE OPPORTUNITY TO BUILD PARTNERSHIPS WITH ORGANIZATIONS FROM DIFFERENT SECTORS. WHAT WOULD YOU HIGHLIGHT FROM THIS COLLABORATION?

**SK:** One aspect was solidarity, as we are all in the same boat. The cooperation of various sectors of the economy took place, not only in financial and material donations, but also in human resources and other forms of participation in projects. A great example was the support of *Ambev*, *Gerdau* and *Brasil ao Cubo* for the construction of the annex with 100 beds at *Hospital Municipal M'Boi Mirim – Dr. Moysés Deutsch*.

Furthermore, because of Einstein's reputation and experience in public health, many felt comfortable having Einstein as the executor of the initiatives for which donations were being made. Many donated with the condition that this aid be used for public healthcare initiatives.

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WHAT ARE THE FINANCIAL CONSEQUENCES OF THE PANDEMIC ON EINSTEIN?

**SK:** In the beginning, we suffered a sharp drop in revenue. More than the costs of fighting the pandemic, partly supported by donations, our own resources or partnerships with the Municipal Health Department of São Paulo, the main impact was the reduction in revenue generation for a few months. We are a high complexity hospital, with high fixed costs and, at times, we only reached 50% occupancy.

We were probably one of the institutions most impacted by the restriction of elective procedures, due to patient's fears of Covid-19, but we were also the fastest to resume activities, demonstrating to the general population and patients the existence of a safe environment. We included testing for all patients before any procedure; we segregated the flows, so the professionals who take care of Covid and non-Covid patients do not mix and there were separate entries in the Emergency Room. The proof of this security allowed for a very quick return to activities.

WERE OTHER TREATMENTS AFFECTED, SUCH AS PATIENTS WITH CHRONIC OR ONCOLOGICAL DISEASES? HOW DID EINSTEIN ACT TO ENSURE SAFETY AND CONVINCE PATIENTS TO RESUME THEIR HEALTHCARE ACTIVITIES?

**SK:** It was a real challenge. There was an impact both on acute illness and on emergency care, as well as the lack of control of chronic diseases. In New York, for example, people died of a heart attack

at home, because they didn't want to go to the hospital, and here it was no different. Emergencies due to the lack of control of diseases like cancer, hypertension and diabetes increased. I can also talk about my experience as a surgeon, as I operated on two cases of acute perforated appendicitis, after seven days of abdominal pain at home.

We constantly seek to communicate to the population about safety in our units, with Covid and non-Covid flows, service protocols and the commitment of our assistance teams, all to demonstrate our concern and care. That's why we were successful in resuming our activities.

EINSTEIN ALSO INTENSIFIED CARE OF PROFESSIONALS IN THE PANDEMIC SCENARIO. WHAT ARE THE MAIN HIGHLIGHTS OF THE SUPPORT PROVIDED TO EMPLOYEES?

**SK:** We try to match the dedication of our employees in everyway we could so that they could play their role with minimal impact. We hired rooms in a hotel near the hospital for those who lived far away or feared the risk of passing Covid to their families. This initiative played an important role especially in the beginning, when It was known very little about the disease and what was the most effective protection available.

An important partnership was with *Colégio Miguel de Cervantes*, the only school open during the most intense period of contagion in 2020 in São Paulo, which took in children aged from 4 to 14 years old while their father or mother worked at the hospital.

“THE PANDEMIC REINFORCED THE ROLE OF SCIENCE AS THE ORGANIZATION’S MAIN GUIDE, SO THAT TREATMENT IS NEVER LACKING NOR FUTILE. WE CARRY OUT IMPORTANT SCIENTIFIC STUDIES AND DEVELOP PREVENTION AND TREATMENT PROTOCOLS.

We were able to provide care and playful activities for the children, with protocols and safety rules to prevent contamination. There were about 300 in 2020, and in 2021 we reached 160. We tested 150 children and employees, confirming that there was no relevant contagion. It also gave us the knowledge we needed to do consulting for schools, including those of the São Paulo State Government.

Focusing on the mental and emotional health of employees and reducing the suffering caused by the pandemic, we reinforced our psychological support strategies with prevention and care actions and created a specific program – OUVID – to welcome professionals who needed support.

In addition, all employees who needed high complexity care were brought to the Morumbi hospital unit and treated in our ICU.

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**DISCUSSIONS RELATED TO SCIENCE WERE A FREQUENT AND RECURRING TOPIC IN BRAZIL. WHAT HAS BEEN EINSTEIN'S MAIN CONTRIBUTION TO THIS DEBATE?**

**SK:** We are guided by scientific evidence in our protocols, this is how Einstein carries out its mission, and the pandemic reinforced the role of science as our major guide, so that there is no lack of treatment or any futile treatment. We carry out important scientific studies about possible treatments and build prevention protocols for different environments, such as factories and schools. Sometimes these studies corroborate what has already been done abroad, sometimes they are pioneer studies, such as the rapid genetic test to detect Covid.

**WHAT LESSONS WILL REMAIN FROM 2020 AND BECOME A LEGACY FOR THE NEXT DECADE?**

**SK:** This momentous and unprecedented event reaffirmed our belief in the work we've chosen. The support of data and real facts for decision-making has led our big data sector, for example, to have a key role in projecting investments and anticipating behavior.

There was also a very strong emotional bond that came about. This situation has contributed to a more humane relationship between healthcare professionals and patients. Humanized care has always been part of our programs and I hear from many patients about the affection they feel from this care.

And the role of a multidisciplinary team has never been better demonstrated than during this period, especially in the care of the most severely ill patients. Many of the deaths in New York, for example, were from a lack of dialysis, not of a respirator. Here, 40% of critically ill Covid patients required dialysis, which reinforces the importance of the multidisciplinary approach of a highly competent team that works in a cohesive and coordinated manner.

**WHAT OTHER LEARNINGS HAS THE YEAR BROUGHT TO EINSTEIN'S MANAGEMENT?**

**SK:** We have never operated in such different regions. With telemedicine, for example, we reached the Alto Rio Negro region, in the district of lauretê, an indigenous reserve, and we supported the public healthcare system in Paraupabas, state of Pará. The service provided by our professionals avoided the need of transporting patients to Manaus (capital of the Brazilian state of Amazonas) which is about a thousand kilometers away. We started managing the Hospital Órion in 2019, in Goiânia (state of Goiás), which became the region's top hospital for the treatment of Covid in 2020.

All of this demonstrates our management capacity and how it can be taken to other places. It is clear that we can take Einstein to other locations, make new types of partnerships and expand our contribution to qualifying healthcare in the country.

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I WANT TO THANK OUR PROFESSIONALS, WHO WERE AWAY FROM THEIR FAMILIES AND THEIR PERSONAL LIVES TO BE ABLE TO DEDICATE THEMSELVES TO FIGHTING THE PANDEMIC AND MADE THE PASSION TO SERVE, THE COMMITMENT TO SAFETY AND THE ATTENTION TO DETAIL PULSE EVEN STRONGER.

THE PANDEMIC IS NOT OVER. WHAT CAN WE SAY ABOUT WHAT'S COMING AHEAD?

**SK:** Information must be increasingly prioritized to convey the importance of vaccines and influence our leaders so that they are obtained in the shortest time possible.

We have the ability to contribute to the National Immunization Program. It's not about selling vaccines but helping the SUS to vaccinate more people. This concern is also reflected in clinical research. In early 2021, we partnered with the Indian pharmaceutical company Bharat Biotech to conduct phase 3 clinical trials of the Covaxin vaccine in Brazil. The immunizing agent is already used in India and we are going to assess its effectiveness and safety in a study with Brazilian volunteers.



ICU at Hospital Municipal M'Boi Mirim – Dr. Moysés Deutsch

WHAT MESSAGE WOULD YOU LIKE TO PASS ON TO THE HEALTHCARE TEAMS?

**SK:** I would like to thank our professionals for having done so much in a manner that is completely in line with the values held by Einstein. They moved away from their families and their personal lives to devote themselves to fighting the pandemic, making their passion for serving, their commitment to safety and attention to detail even stronger.

The clinical staff embraced our decisions, even when we had to interrupt service in our offices and when we offered our services in other units or telemedicine

as a service platform, so that their patients do not leave their patients unattended. And at the time of resuming our face-to-face services, each member of our clinical staff and our employees played the important role of disseminating information and correcting distortions.

And I'm not only talking about the leadership and the clinical staff, but physical therapists, nutritionists, our administrative team and employees as a whole. Anyone who does not assist the patient directly is taking care of the caregivers. All were examples of dedication.

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ASSISTANCE

	UNITS	HOSPITAL RELEASES <sup>1</sup>	SURGERIES <sup>2</sup>	DELIVERIES
Private Healthcare System	13	45,191	26,794	3,548
SUS (Unified Health System)	27	28,496	9,090	7,826
	(26 IN SÃO PAULO AND 1 IN MOGI DAS CRUZES)			

<sup>1</sup>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.  
<sup>2</sup>Surgical patients.



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Private  
Healthcare  
System

184,960

URGENT CARE  
VISITS

277,339

APPOINTMENTS

212,537

TELEMEDICINE  
CALLS

78.0%

OCCUPANCY RATE<sup>3</sup>

SUS  
(Unified Health  
System)

535,388

644,515

41,326

74.2%



HOSPITAL MUNICIPAL VILA  
SANTA CATARINA

72.3%

HOSPITAL MUNICIPAL DR.  
MOYSÉS DEUTSCH

76.1%



<sup>3</sup> Ratio of sum of patients admitted at the end of each day and total beds per day.

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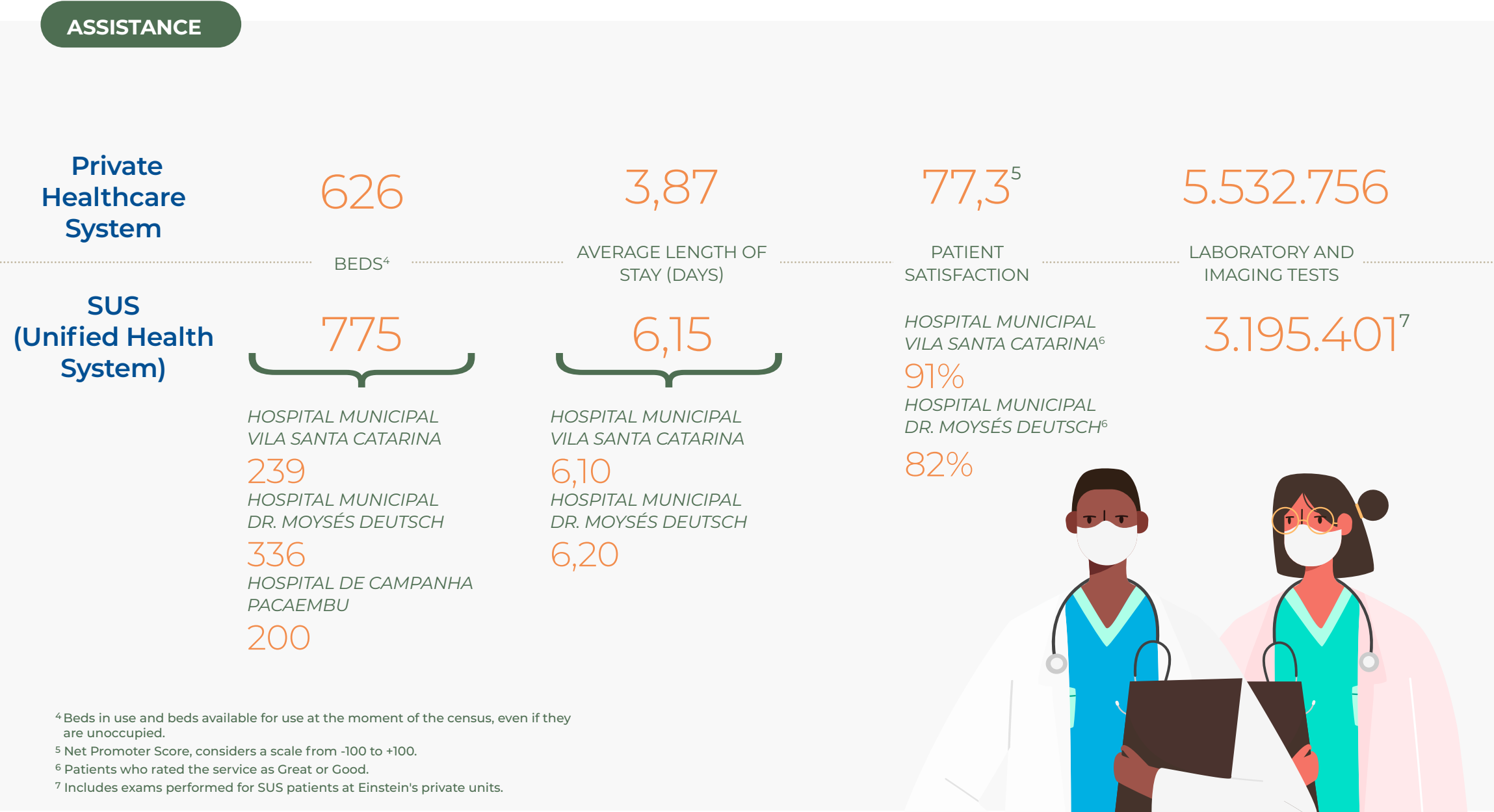
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TEACHING AND EDUCATION

Healthcare training

8 TEACHING  
UNITS

46,082  
PARTICIPANTS  
in scientific events

36,497  
STUDENTS

STUDENT  
SATISFACTION<sup>5</sup> 80



RESEARCH AND INNOVATION

622 PUBLICATIONS in  
journals with an impact  
factor above 1<sup>8</sup>

883 PUBLICATIONS in  
indexed journals

3,569 MENTIONS of scientific  
articles by Einstein  
researchers

BRL 51.1 million  
IN EXPENSES AND INVESTMENTS<sup>9</sup>

1,028 PROJECTS:  
• 403 projects initiated  
• 407 ongoing projects (started in previous  
years and still under development)  
• 218 completed projects

BRL 79.1 million  
IN PROADI-SUS PROJECTS  
(Institutional Development Support  
Program of SUS)

- BRL 65.5 million  
IN RESEARCH AND
- BRL 13.6 milhões  
IN PROJECTS to incorporate  
new technologies



<sup>8</sup> 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.  
<sup>9</sup> Includes own resources (CAPEX and OPEX) and external investment (research grants/external funding).

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SOCIAL RESPONSABILITY

Investments in the Community<sup>10</sup>

BRL 216.0 million  
IN PUBLIC RESOURCES APPLIED<sup>11</sup>  
under the PROADI-SUS Program

BRL 540.3 million  
IN PUBLIC RESOURCES applied  
through public partnerships<sup>12</sup>

BRL 43.6 million  
IN OWN RESOURCES applied  
to the community<sup>13</sup>

BRL 48.5 million  
FROM DONATIONS raised for SUS<sup>14</sup>

BRL 940 thousand  
TO SUPPORT PROJECTS TO  
COMBAT CANCER<sup>15</sup>



BRL 1.9 million  
IN FINANCIAL RESOURCES AND

BRL 1.3 million  
IN HYGIENE AND SANITIZATION  
PRODUCTS collected and transferred  
to public healthcare facilities and  
communities served by the Einstein<sup>16</sup>

BRL 36.1 million  
IN EQUIPMENT AND INPUTS DONATED  
to philanthropic hospitals and indigenous  
communities to combat Covid-19

<sup>10</sup> Does not consider the management contract of *Hospital Municipal Dr. Moysés Deutsch*, in which Einstein acts as an intervener, with any financial transactions going through its accounts.  
<sup>11</sup> Counterparts.  
<sup>12</sup> Accountability to the city governments of São Paulo and Mogi das Cruzes (SP).  
<sup>13</sup> Expenditures with *Programa Einstein na Comunidade Judaica* (Einstein in the Jewish Community Program), *Residencial Albert Einstein* (Albert Einstein Residence) and donations to welfare institutions.  
<sup>14</sup> Fundraising via the Portal de Doações: *Fundo Einstein na Luta Contra a Covid* (Donation Portal: Einstein Fund for the Fight Against Covid)  
<sup>15</sup> Donations raised by *AMIGO - Amigos da Oncologia e Hematologia* (Friends of Oncology and Hematology group).  
<sup>16</sup> Fundraising campaigns by Einstein Volunteers.

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# ABOUT US

FOUR PILLARS GUIDE OUR WORK:  
HEALTHCARE, TEACHING & EDUCATION,  
RESEARCH & INNOVATION AND SOCIAL  
RESPONSIBILITY.

**T**he *Sociedade Beneficente Israelita Brasileira Albert Einstein* works in both private and public healthcare in all stages of assistance, teaching and education, consulting, research and innovation and social responsibility. It is headquartered in São Paulo (SP) and carries out activities in the city of São Paulo, in the interior of São Paulo, in the states of Rio de Janeiro, Goiás, Minas Gerais, Espírito Santo, Pará and Pernambuco, and in the Federal District.

The service provision structure is formed by 12 private health units in São Paulo and 1 in Sorocaba (state of SP), 27 SUS units, operated through a management contract and agreements with the city governments of Mogi das Cruzes and São Paulo, 6 teaching units in São Paulo, 1 in Rio de Janeiro (state of RJ) and 1 in Belo Horizonte (state of MG).



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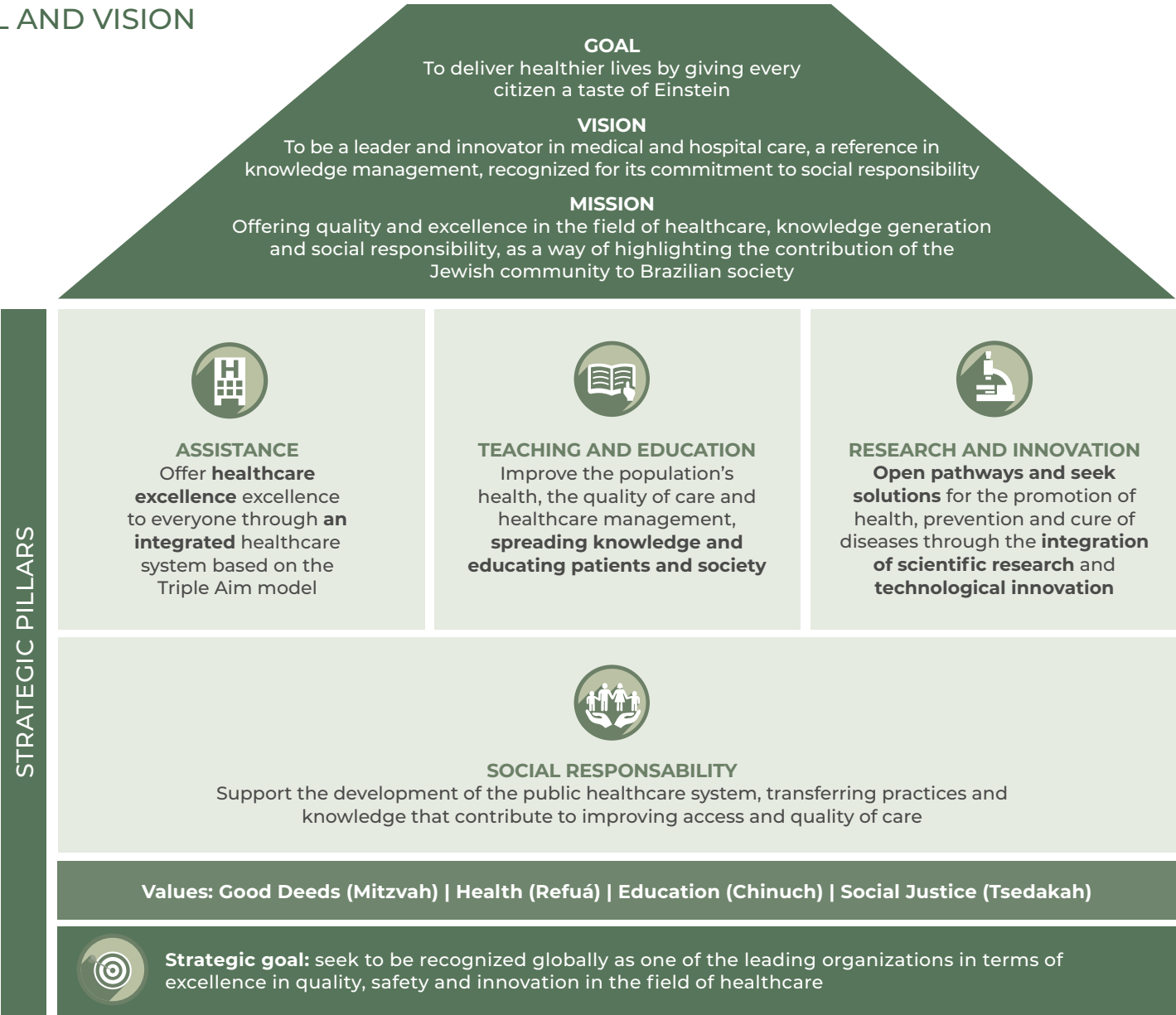
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Einstein has Public Utility titles at the municipal, state and federal levels and a CEBAS certificate (Social Assistance Charity Entity) granted by the Ministry of Health. The Ministry evaluates counterparts of hospitals that have CEBAS for SUS every three years. In the case of Hospitals of Excellence, such as Einstein, the counterpart is the execution of projects under the PROADI-SUS program, with the objective of supporting the public system (see page 48). Hospitals enjoy tax immunity, provided for in the Federal Constitution, and must apply the equivalent amount of the social contributions that would be due in SUS development projects and, consequently, to improve the health conditions of the Brazilian population.

The Hospital also maintains a Social Health Organization.

GOAL AND VISION



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DIALOGUE AND JOINT DEVELOPMENT

Aiming to contribute to the systemic improvement of the health sector, Einstein participates in national and international forums for discussion and development of initiatives with the government, regulatory bodies, universities, public and private hospitals, health operators and sector entities.

Among them, the following stand out: Brazilian Ministry of Health, *Comissão Nacional de Ética em Pesquisa* (Conep), São Paulo State Health Secretariat, São Paulo City Health Secretariat, *Conselho Nacional de Secretários de Saúde* (CONASS), *Conselho Nacional de Secretarias Municipais de Saúde* (CONASEMS), *Agência Nacional de Saúde Suplementar* (ANS), a *Agência*

*Nacional de Vigilância Sanitária* (Anvisa), *Universidade de São Paulo* (USP), *Universidade Federal de São Paulo* (Unifesp), *Universidade Estadual de Campinas* (Unicamp), *Associação Brasileira de Medicina Diagnóstica* (ABRAMED), *Associação Nacional de Hospitais Privados* (Anahp), *Saúde Digital Brasil*, *Instituto Coalizão Saúde* (ICOS) and Vision Zero Initiative, from the International Social Security Association (ISSA), and *Projeto Hospitais Saudáveis*, from the Healthcare Without Harm (an American organization).

Einstein maintains a strategic partnership with the *Institute for Healthcare Improvement* (IHI) - a world reference in quality and safety in the healthcare area - and is a partner and representative of Planetree in Brazil, an international reference in person-centered care in healthcare.

In 2020, the organization joined the Board of Directors of *Instituto Ética Saúde* and the new integrity committee of IBROSS - *Instituto Brasileiro de Organizações Sociais* (Brazilian Institute of Social Organization), in which it contributed to the definition of guidelines and good compliance practices for hundreds of associates.



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# GOVERNANCE STRUCTURE

Einstein’s highest decision-making body is the General Assembly of Members, composed of around 500 members, which elects the Board of Directors with 180 members. It makes up the strategic and governance management scope, electing the Board of Directors and the Elected Board, which together play a role similar to a board of directors, each with 9 members, being led by the President and 8 Vice-presidents..

The structure also has a Fiscal Council, composed of five sitting members, elected by the General Assembly for six year terms. The Board is responsible for overseeing the actions of the managing bodies, issuing opinions on the financial statements and the management report, and monitoring the financial performance report.

All participants of these bodies are members, including doctors with intense activity at Einstein, renowned professionals from various sectors of the country’s economy and leaders of the Jewish community, who serve six-year terms, with the possibility of renewal. Its attributions are performed on a voluntary and unpaid basis.



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The relationships between the governance bodies are established by the Bylaws, prepared and approved in accordance with the legislation in force. The Board of Directors is responsible for approving the general guidelines of Einstein’s activities and strategy, supervising and overseeing the activities of the Elected Board. The Elected Board proposes, participates in the preparation and controls the execution of the approved strategy and directs the management and implementation of the guidelines.

A series of committees support decision-making on specific topics: People, Finance, Education and Training, Digital Transformation, Social Responsibility and Sustainability, Quality, Assistance and IT, Research and Innovation, Strategy, Entrepreneurship and Innovation, Governance Audit, Conflicts of Interest in Corporate Governance and Compensation.

At the executive level, the General Board reports to the President of the elected board and leads 15 boards, that are occupied by paid professionals, who contribute to the day-to-day management of Einstein.



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

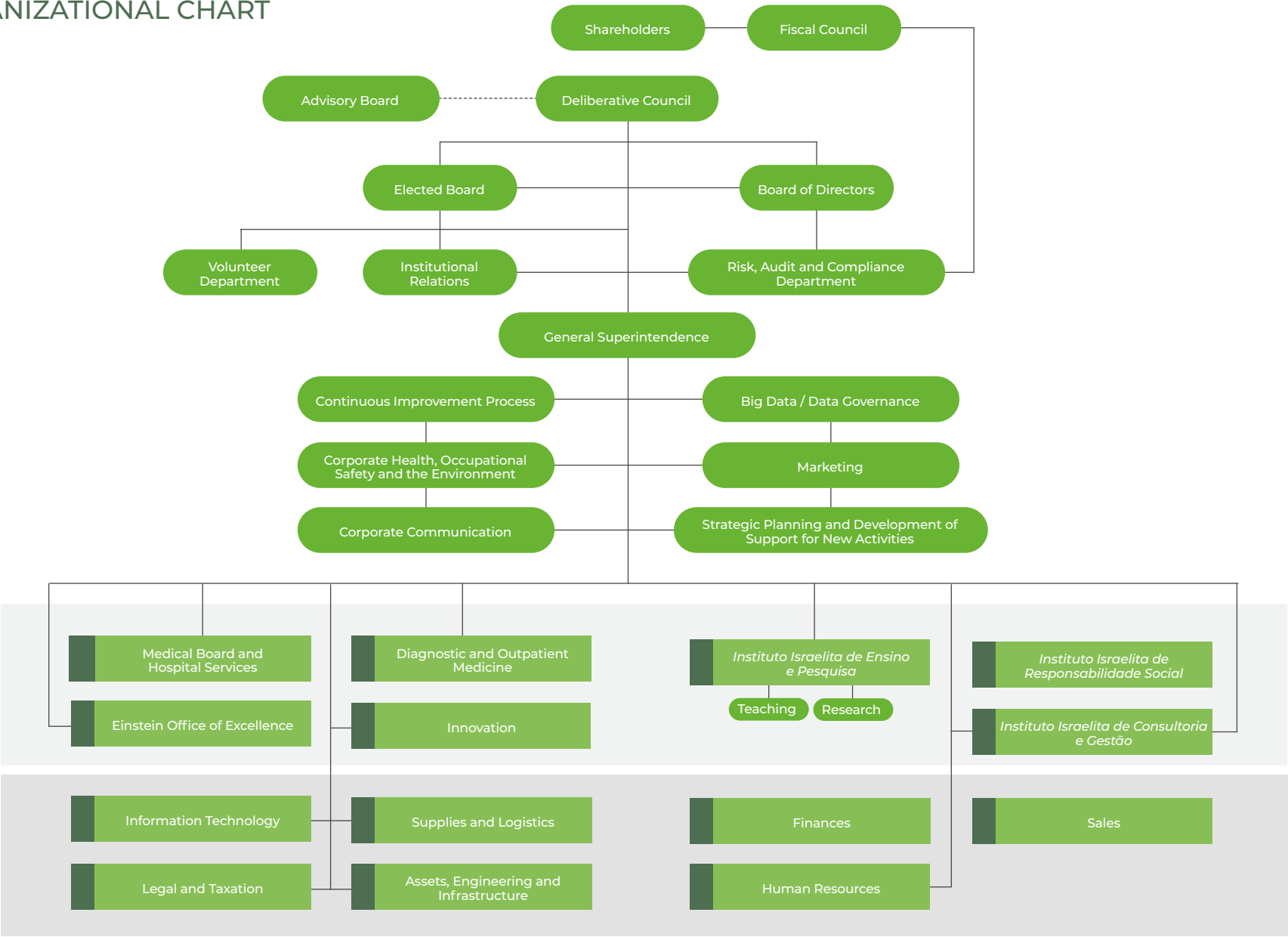


**Board of Directors**  
From left to right: Claudio Schvartsman, Oscar Fernando Pavão dos Santos, Mario Fleck, Claudio Luiz Lottenberg, Claudia Politanski, Bernardo Parnes, Moises Cohen, Israel Vainboim, Dominique José Einhorn, Luis Fernando Aranha Camargo e Mauro Roberto Terepins.

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# AS A HEALTHCARE BENCHMARK

IN THE PRIVATE AND PUBLIC HEALTH SECTORS, EINSTEIN PUTS INTO PRACTICE ITS COMMITMENT TO BEING A QUALITY BENCHMARK IN BRAZIL.

Einstein is an integrated healthcare system, in which different elements come together to provide excellent services and practice medicine based on scientific evidence. The services cover all fronts of the healthcare cycle – promotion, prevention, diagnosis, treatment and rehabilitation – and are aimed at the following levels of care:

- **Primary:** promotion, prevention and immunization programs, offices and outpatient clinics;
- **Secondary:** outpatient and hospital services of low and medium complexity, which include urgent and emergency services and diagnostic medicine;
- **Tertiary:** high complexity hospital services; and
- **Quaternary:** services such as tissue and organ transplants, performed in a hospital environment.



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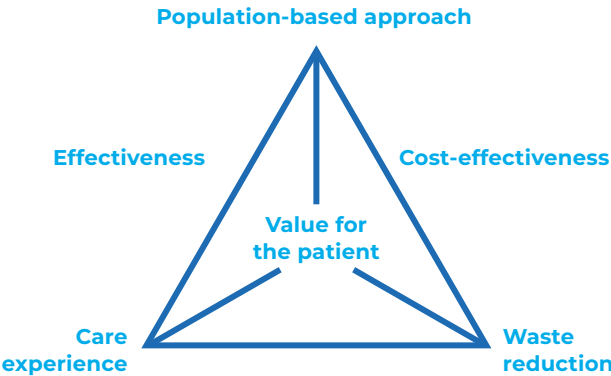
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In the private health segment, the service structure comprises 13 units. In São Paulo, there is 1 hospital, 5 Einstein Clinics focused on primary care and 5 Advanced Units, which offer emergency care, exams and consultations. In the interior of the state, there is 1 Advanced Unit in the city of Sorocaba and another in Alphaville.

In the public segment, there are 27 units. In the city of São Paulo there are: 2 hospitals, 13 UBS (Basic Healthcare Units), 3 AMA (Outpatient Healthcare Centers), 1 AMA-E (Outpatient Healthcare Center - Pediatric Specialities), 2 UPA (Emergency Care Units), 3 CAPS (Psychosocial Care Centers) and 2 SRT (Therapeutic Residence Services). In Mogi das Cruzes (state of SP), there is a diagnostic medicine unit. The work in the SUS is the result of a management contracts and agreements with the city government in both cities.

The presence in different segments and stages of care gives Einstein a unique position to develop actions that impact the health of the entire population. The fight against the Covid-19 pandemic, detailed starting on [page 23](#), is an example of this.

TRIPLE AIM GOVERNANCE MODEL



TRIPLE AIM

Einstein’s work has been based on the Triple Aim governance model, from the Institute for Healthcare Improvement (IHI) since 2014. The model guides the planning, decision-making and execution of actions at Einstein and considers three interrelated dimensions:

- **Care experience:** seek to improve the patient experience through safe, effective and reliable care at every opportunity;
- **Waste reduction:** continuously improving and applying scientific knowledge to use resources more efficiently and effectively; and
- **Population-based approach:** scaling learning and results for larger portions of the population, adjusting service to the specificities of different groups.

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AMONG THE BEST

*Hospital Israelita Albert Einstein* was evaluated in 2020 as the 38th best hospital in the world and the first in Latin America in the Newsweek magazine ranking. The selection involved health organizations from 21 countries and was based on information from industry experts (around 70,000 physicians, managers and health professionals), clinical performance and patient experience indicators available in public databases, such as Brazil's ANS – *Agência Nacional de Saúde Suplementar* (National Supplementary Health Agency).

Einstein also stood out in Newsweek's ranking of the best in the world by specialty: 12th best in the world in Gastroenterology, 21st in Orthopedics, 28th in Oncology and 34th in Cardiology.

In another important recognition, the hospital was voted, for the 12th consecutive year, the best hospital in Latin America according to the América Economía Intelligence ranking. The *Hospital Municipal M'Boi Mirim – Dr. Moysés Deutsch*, the only Brazilian public hospital on the list, was ranked 29th among all hospitals evaluated in the region. The classification considers patient safety and dignity criteria, human capital, capacity, efficiency, prestige and patient experience.



EINSTEIN CLINICS

In 2020, the network of Einstein outpatient clinics added another unit in Santana, a district in the North side of São Paulo city. In total, there are five clinics in São Paulo and one in the city of Sorocaba, which provide health promotion and prevention services, chronic disease control and low-complexity urgent care. The team consists of family doctors, nurses, physical educators, nutritionists and psychologists.

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ONCOLOGY

The integrated model of care in Oncology includes clinical, pediatric, geriatric, interventional, surgical, dental, radiotherapy, nutrition, rehabilitation, physiotherapy, psychology, psychiatry, integrative medicine and palliative care areas. The Oncology and Hematology Center at Einstein also runs the Hematology and Bone Marrow Transplant Program (BMT).

In 2020, several services registered a drop in attendance, a reflection of the pandemic scenario, with the postponement of non-urgent elective surgeries and, in some cases, the delay of patients in seeking medical attention. Treatments were also adjusted to reduce the need for movement, with the adoption of hypofractionated radiotherapy, for example, and home care.

ONCOLOGY AND HEMATOLOGY

	2017	2018	2019	2020	Δ 2020/2019
Office visits	16,158	18,717	21,534	20,046	-6.9%
Oncology Emergency Care	974	991	1,236	812	-34.3%
Surgical cancer procedures	4,977	4,747	4,634	4,051	-12.6%
Bone marrow transplants	70	50	97	49	-49.5%
Patients treated at the outpatient chemotherapy clinic (Morumbi and Perdizes)	9,096	9,527	9,954	8,117	-18.5%
Outpatient chemotherapy	23,294	23,765	24,933	19,993	-19.8%
Outpatient radiotherapy <sup>1</sup>	14,269	15,284	19,889	21,575	8.5%

<sup>1</sup> The increase in volume was driven by public healthcare. From 2019 to 2020, the total number of outpatient radiotherapy performed on patients at the *Hospital Municipal Vila Santa Catarina - Dr. Gilson de Cássia Marques de Carvalho* jumped from 7,448 to 12,366 and represented 57% of the total number of procedures performed.

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## EXPANSION OF THE EINSTEIN SYSTEM

In the first quarter of 2021, Einstein began the process of incorporating the assets and employees of *Hospital Órion*, in Goiânia (GO), marking the expansion of hospital care in its own unit outside São Paulo. This hospital is located in a mixed-use complex that includes a hotel, a convention center, towers with more than 300 medical offices and a shopping mall.

The *Hospital Órion* has 110 beds, 65 of which are currently active. By the end of 2021, there will be 110 active operational beds and, in 2023, 220 beds. It is equipped to perform bone marrow transplants and has nine intelligent operating rooms, two hemodynamic rooms, a laboratory with the capacity to process 150 thousand exams per month and a diagnostic center, connected to the Morumbi unit.

Since its inception, the hospital has been linked to Einstein. It was based on consulting and management services carried out by professionals from Einstein, guided by the principles and values of quality, operational efficiency and patient safety.

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# COVID ACTIONS

The first case of Covid-19 in Brazil was diagnosed at Einstein, in a patient from Italy, and notified to the Ministry of Health on February 25th, but the preparation to deal with the disease began in December 2019, as soon as the new coronavirus was identified. Several actions were taken to ensure the capacity to provide care in all its aspects – beds, professionals, scientific knowledge, equipment and supplies – and the safety of patients, caregivers and professionals. The work involved the creation of a strategic vision of the combat plan and a crisis committee made up of leaders from different areas.

Between March 2020 and January 2021, 13,590 patients with Covid were treated at Einstein’s units as inpatients or at Day Clinics. Of these, 74%, or 10,027 were hospitalized in public healthcare units: 6,330 patients in public hospitals managed by Einstein (*Hospital Municipal M’Boi Mirim – Dr. Moysés Deutsch, Hospital Municipal Vila Santa Catarina – Dr. Gilson de Cássia Marques de Carvalho and Hospital de Campanha do Pacaembu*) and 3,697 in UPA (Emergency Care Units) units with inpatient capacity, with some requiring mechanical ventilation while waiting for permanent beds. This volume represented 18% of all admissions of patients with Covid in the city of São Paulo in this period – the percentage considers data from the Municipal Health Department, which recorded 34,962 discharges of patients with Covid in the public hospital network.

In the cities of São Paulo and Goiânia), 3,563 patients were admitted in private hospitals with the infection. To meet this demand in the private and public sectors, Einstein increased its number of mechanical ventilators, hired and reallocated professionals and identified opportunities to optimize available resources with the creation of new beds. These initiatives adopted in the private and public healthcare system units were made possible by an integrated approach at the primary, secondary and tertiary levels of health care (see [page 18](#)).



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HIGHLIGHTS - COVID ACTION

EMPLOYEES

6,000 EMPLOYEES TRAINED in caring for patients with the disease

694 EMPLOYEES RELOCATED to the two public hospitals operated by Einstein and to the *Hospital de Campanha* (Field Hospital)



PATIENTS



13,600 HOSPITALIZED PATIENTS (inpatients or Day Clinic) from March 2020 to January 2021

3,600 IN THE PRIVATE HEALTHCARE SYSTEM  
10,000 IN SUS, WHICH REPRESENTS 18% OF ALL HOSPITALIZED PATIENTS throughout the entire public system in São Paulo

INVESTMENTS

DONATION OF BRL 36.1 million IN PERSONAL PROTECTIVE EQUIPMENT AND SANITIZING GEL to five DSEI - Distritos Sanitários Especiais Indígenas (Special Indigenous Health Districts), with approximately 600 villages, and more than 130 public and philanthropic hospitals in several states, financed with their own resources and non-financial donations received

EINSTEIN FUND IN THE FIGHT AGAINST COVID: BRL 48,5 million RAISED AND INVESTED FULLY IN SUS for the expansion and improvement of public units, donation of hygiene kits and food baskets to vulnerable communities and donation of personal protective equipment and sanitizing gel to health institutions in several states



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HIGHLIGHTS - COVID ACTION

VOLUNTEER DEPARTMENT FUNDRAISING CAMPAIGNS



2.5 thousand  
PEOPLE and  
34 DONOR  
COMPANIES

BRL 1.9 million  
IN FINANCIAL RESOURCES  
and the equivalent of BRL 1.3 million in  
products, such as masks, sanitizing gel,  
soap and clothing

**BENEFICIARIES:**  
Public health units and their patients,  
people served by the PECP - *Programa  
Einstein na Comunidade de Paraisópolis*  
(Paraisópolis Community Program) and  
RIAE - *Residencial Israelita Albert Einstein*  
(Albert Einstein Israeli Home) assistance  
programs, among others

CONSULTANCY

80 consulting projects  
ON RISK MANAGEMENT AND DISEASE  
CONTAGION REDUCTION FOR COMPANIES  
AND SCHOOLS

145 SCHOOLS { OVER  
150,000  
PEOPLE IMPACTED IN THE  
SCHOOL COMMUNITY



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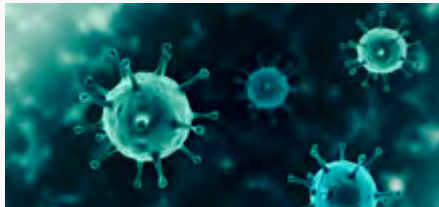
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TIMELINE - COVID ACTION



DECEMBER/2019

First case of new coronavirus in Wuhan, China

- Formation of a committee with infectious disease specialists and leaders from all areas to monitor the issue

FEBRUARY

Confirmation of the first case in Brazil, at Einstein

- Acquisition of new respirators and negative pressure equipment
- Development and validation of the first RT-PCR test to identify SARS-CoV-2 in Brazil
- Formation of the planning squad, from 17 areas, focused on reviewing and optimizing processes in a broad manner
- Separation of Covid and non-Covid patient flows
- Start of the production of informative content about the disease in language that was accessible to the general population on the Vida Saudável blog
- Genetic sequencing of the virus identified in the first patient in the country

APRIL

- Start of the Hospital de Campanha do Pacaembu operations, with 200 beds (see [page 31](#))
- Start of operations of the new wing at the Hospital Municipal M'Boi Mirim (see [page 32](#))
- Expansion of laboratory testing capacity to around 3,000 RT-PCR's per day
- Fundraising campaigns via the Donation Portal (see [page 72](#))

JANUARY/2020

Disease outbreaks are reported in Japan and Southeast Asian countries

- Training of teams for diagnosis, treatment and prevention of contamination
- New routines for welcoming and referring patients with respiratory symptoms to specific wards
- Preparation of plans to expand operational beds (public and private health)



MARCH

The disease reaches five continents and the WHO declares a pandemic

- Construction of a new wing at Hospital Municipal M'Boi Mirim, funded by Ambev, Gerdau, Brasil ao Cubo and Einstein (see [page 32](#))
- Suspension of elective surgeries and relocation of employees to respond to the pandemic; wards and beds dedicated to the disease
- Hiring of new professionals
- Consulting for companies: elaboration of customized protocols for containment and prevention of contagion in essential sectors
- Start of volunteer fundraising campaigns to assist vulnerable populations (see [page 70](#))

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TIMELINE - COVID ACTION

JUNE

- Return of elective surgeries at Einstein
- Termination (06/30) of the *Hospital de Campanha do Pacaembu*



AUGUST

- Review of flows based on the safe indicator dashboard for the safe return of patients, employees and clinical staff



DECEMBER

- Einstein launches a new serological test that detects the presence of neutralizing antibodies to the new coronavirus (see [page 51](#))

MAY

- Einstein develops first genetic test to detect Covid-19 on a large scale, with cutting-edge technology (see [page 51](#))
- Start of operation of the tent for patient care in the Morumbi unit parking lot

JULY

- Validation of separate flows for confirmed Covid-19 patients, at risk and without disease
- Preparation of the indicator panel to monitor the resumption of activities and preparation of related internal and external communication plans



SEPTEMBER

- Progression of attendance in the number of elective surgeries, reaching 85% of the activity in 2019



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NEW TECHNOLOGIES

To plan and make decisions, the support of tools such as Big Data Analytics and Artificial Intelligence was essential. The structure considered different technology applications to ensure more efficiency and effectiveness of actions, from care scenarios, such as the creation of patient risk scores to improve decisions about medical care, to short-term planning, focused on the allocation of teams and resources, to public policy assessments and longer-term macro-regional actions.

Cross-functional teams of data scientists, mathematicians, physicians and epidemiologists were formed to develop predictive models and simulations. A repository of information from different sources was also created regarding behavior (questionnaires applied to the Brazilian population to understand crowding and exposure to contamination), displacement and mobility (via mobile phone), climate (weather stations and air pollution indexes), demographic composition and information from other countries.

The work helped to support the purchase of hospital supplies, pulmonary ventilators, personal protective equipment (PPE) and allocation of beds and human resources for better assistance. The volume of equipment purchased was even greater than what was needed, and this difference was allocated to public health units, given the supply difficulties they faced.

Einstein innovated with the use of ultraviolet radiation for the decontamination of beds and developed technologies with partners, such as the portable negative pressure equipment, a technology that filters the air in closed spaces and prevents its escape to other environments. With the new equipment, the number of rooms with negative pressure increased from 11 to 150 at the Morumbi unit, from 6 to 33 at the *Hospital Municipal Vila Santa Catarina* – Dr. Gilson de Cássia Marques de Carvalho and from 4 to 23 at *Hospital Municipal M'Boi Mirim* – Dr. Moysés Deutsch, where it was also used to equip 5 operating rooms.



DIMENSION	INITIATIVE
Safe flow	Separation of flows of patients with Covid and without Covid in Emergency Care Units (UPA) and hospitals
Surgical patients	Testing of elective surgical patients 48 hours before surgery
Oncology surgical procedures	Specific operating rooms for patients with Covid
	Expansion of the use of outpatient flow for surgical patients discharged on the same day
	Assessment of potentially postponable surgeries and the general demand for beds
Optimization of use of beds	Review of the length of stay of surgical and clinical patients

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MORUMBI UNIT

The CMOA (acronym in Portuguese for ‘Monitoring and Assistance Center’) was used to monitor critically ill patients in the ICUs with the support of video cameras and sensors installed in the rooms, reducing the circulation of healthcare teams and offering more security to everyone involved.

This care with the safety and humane treatment allows, in some cases, for companions to stay with the patients. When this was not possible, the teams used tablets and smartphones to keep contact between the patients and their families.

The intelligence already developed in recent years in the management of patient flow contributed to the rapid design of Covid and

non-Covid care services and provided security for the rapid return of doctors and patients for consultations and other procedures. Elective surgeries were suspended between March and April when they began to be gradually resumed. The oncology outpatient clinic, for example, was intended to reinforce general care and the care for cancer patients was relocated to other locations. The Perdizes unit was adapted to receive low-complexity outpatient surgeries. By December, the average volume of procedures at Einstein had returned to pre-pandemic levels.

HOSPITAL ISRAELITA ALBERT EINSTEIN

	2017	2018	2019	2020	Δ 2020/2019
Employees	7,174	6,810	7,134	7,626	6.9%
Operational beds <sup>1</sup>	627	579	592	626	5.7%
Operating rooms <sup>2</sup>	40	40	40	40	0.0%
Releases <sup>3</sup>	55,491	55,880	56,962	45,191	-20.7%
Patients/day <sup>4</sup>	181,653	175,972	182,158	166,919	8.4%
Morumbi Unit with Day Clinic	53,500	53,619	54,647	43,076	-21.2%
Perdizes Unit with Day Clinic	1,991	2,261	2,315	2,115	-8.6%
Average length of stay (in days)	3.40	3.29	3.33	3.87	16.2%
Occupancy rate (%) <sup>5</sup>	81.4	81.5	85.9	78.0	-7.9 pp
Surgical patients (except cesarean sections) <sup>2</sup>	32,433	32,937	34,273	26,794	-21.8%
Number of deliveries	4,501	4,237	3,948	3,548	-10.1%
Emergency Services	339,839	340,558	355,161	184,960	-47.9%
Consultations	339,681	339,275	360,404	277,339	-23.0%

<sup>1</sup> Beds in use and beds available for use at the moment of the census, even if they are unoccupied.  
<sup>2</sup> Includes Morumbi and Perdizes units.  
<sup>3</sup> 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.  
<sup>4</sup> Measurement that represents the care provided to an inpatient during a hospital day.  
<sup>5</sup> Relationship between the sums of hospitalized patients at the end of each day and the total number of beds/day.  
Pp: percentage points.



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SCIENTIFIC KNOWLEDGE

In the face of the pandemic, the search for solutions based on the best scientific evidence resulted in relevant cooperative work, such as the COVID Coalition, an alliance for conducting research, which brought together Einstein, HCor, *Hospital Sírio-Libanês*, *Hospital Moinhos de Vento*, *Hospital Alemão Oswaldo Cruz*, *Beneficência Portuguesa de São Paulo*, the BCRI (Brazilian Clinical Research Institute) and the BRICNet (acronym in Portuguese for Brazilian Network for Research in Intensive Care). Einstein’s Academic Reserch Organization (ARO) coordinates studies involving around 100 hospitals and excellence centers (see [page 67](#)).

ARO has also been involved in pandemic-related studies with international organizations to assess the effectiveness of some drugs in reducing the harm caused in the most severe form of the infection. One of them is the partnership with Saint Luke’s Hospital (USA) and the George Clinical research center (Australia) with the support of Astrazeneca pharmaceutical company, which evaluates therapy for patients in risk groups, such as heart disease and diabetes, which develop severe cases of the infection. Another initiative, supported by Pfizer pharmaceutical company, focuses on analyzing the effectiveness of a drug to prevent the clinical deterioration of patients, avoiding the cytokine storm, an immune reaction that causes damage in different organs. Both studies are multicenter, with randomized clinical trials, and are in the final stages of evaluation.



CARE AND PREPARATION

Preparing for critical events is a regular activity at Einstein, through training and simulation of extreme events, such as fires, plane accidents or attacks on subway stations, football stadiums and others in places with a high concentration of people.

V International Disaster Response Management Symposium

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HOSPITAL DE CAMPANHA DO PACAEMBU

At the request of the São Paulo city government, Einstein took over the operation of the *Hospital de Campanha do Pacaembu*, set up on an emergency basis to alleviate the demand for hospital beds in the city's public system. During its three months of operation, in the most critical period of the pandemic, the hospital provided 200 low and medium complexity beds and treated 1,515 patients transferred from other public health units, in order to free up these structures for more serious cases.

The hospital occupied an area of 6,300 square meters on the stadium's field and was partially equipped by Einstein with resources relocated from other units

or acquired with funds from donations. After the closing of the field hospital, Einstein donated all the equipment used at the site to the city government, with an estimated value of BRL 7 million.

The unit had all the resources of a complete hospital. Electronic patient records, diagnostic imaging equipment (radiography, ultrasound, tomography), pharmacy area and cafeteria for professionals are some examples, in addition to the Telemedicina Einstein structure, which connected the local team with the Morumbi unit for a second opinion.

As visits were not allowed, contact between family members and patients were done via WhatsApp on mobile phones and tablets. The daily medical report was also transmitted to families via the app.



All the work was focused on the safety, quality and humanization of patient care and on the safety of the 520 professionals who took turns in three shifts at the site. The teams were made up of professionals who were already working at Einstein and others hired specifically to respond to the pandemic.

As the first field hospital in the country in the fight against Covid, there was no standard to follow, and Einstein had to establish an operating model. This task fell to a multidisciplinary team, made up of professionals from the medical care, logistics, supplies and pharmacy areas. Subsequently, the definitions for the physical structure, operating model, circulation flow, care and protection protocols for health professionals and humanized care for patients and families used could be applied to other similar structures created in emergency situations in other regions of the country.

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HOSPITAL MUNICIPAL M’BOI MIRIM

The *Hospital Municipal M’Boi Mirim – Dr. Moysés Deutsch*, operated by Einstein, was one of the main SUS units in São Paulo assigned to deal with the pandemic, with 514 beds (220 in the ICU and 294 in the ward) dedicated to Covid-19 patients. More than 4,000 patients were treated at the unit throughout the year, an important contribution to preventing the collapse of the city’s health system. The unit is managed by Einstein in association with the CEJAM (*Centro de Estudos e Pesquisas Dr. João Amorim*) research center.

The management team’s speed and sense of urgency were essential for reaching the desired results. Also in March, the hospital was the first in the public network to carry out adaptations to meet the health emergency that was predicted, with the increase of operational beds, the conversion of infirmary beds into ICU beds and the enhancement of respiratory support equipment. In April, the unit was expanded, financed by the private sector and built in record time (see *table*).

A LEGACY FOR THE CITY

It took 33 days from the start of construction to the delivery of the expansion for Hospital Municipal M’Boi Mirim. The annex has a total area of 1.4 thousand square meters, distributed over two floors that are connected to the hospital, with an operational capacity of 100 beds.

The work involved an investment of BRL 13.5 million by Ambev, Gerdau, Brasil ao Cubo and Einstein, and is now a permanent part of the hospital’s structure.



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The hospital was also an example of best human care practices and created innovative ways to minimize the anguish and loneliness of patients and families. Televisions were made available in the ICU and, in the most serious cases, face-to-face visits. Equipped with safety suits, the closest family members not belonging to risk groups could say goodbye to their loved ones. A multidisciplinary team was deployed to support patients and families.

With the same agility with which it prepared to respond to the pandemic, when the number of cases decreased, the hospital turned to another urgent need: to reduce the waiting list for elective surgeries, which had been temporarily suspended. From August to December, the monthly average of elective procedures performed at the hospital increased 21.7% compared to 2019. In November, there were 909 surgical patients, the highest monthly number since 2008, when Einstein began the operation.

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

	2017	2018	2019	2020	Δ 2020/2019
Employees	1,628	1,668	1,762	2,172	23.3%
Operational beds <sup>1</sup>	240	240	240	336	40.0%
Operating rooms	10	10	10	10	0.0%
Releases <sup>2</sup>	18,893	19,949	21,208	16,803	-20.8%
Patients/day <sup>3</sup>	104,961	109,894	115,281	103,565	-10.2%
Average length of stay (in days)	5.56	5.51	5.40	6.20	14.8%
Occupancy rate (%) <sup>4</sup>	89.8	92.7	93.9	76.1	-18.9%
Surgical patients (except cesarean sections)	7,323	8,254	8,345	5,455	-34.6%
Number of deliveries	5,272	5,072	4,941	4,242	-14.1%
Emergency Services	219,078	209,267	188,307	88,767	-52.9%
Outpatient consultations	32,270	31,705	34,334	17,823	-48.1%

<sup>1</sup> Beds in use and beds available for use at the moment of the census, even if they are unoccupied.  
<sup>2</sup> It is the patient's departure from the hospitalization unit due to discharge (cured, improved or unchanged), evasion, treatment withdrawal, internal transfer, external transfer or death.  
<sup>3</sup> Measurement that represents the care provided to an inpatient during a hospital day.  
<sup>4</sup> Ratio of the sum of hospitalized patients at the end of each day and the total number of beds-day.



CERTIFICATION

The two public hospitals operated by Einstein – *Hospital Municipal M'Boi Mirim* and *Hospital Municipal Vila Santa Catarina* – have a Level 3 Excellence accreditation from ONA (*Organização Nacional de Acreditação*), a Brazilian model that certifies the quality of hospitals and healthcare services. A Level 3 certification attests to the high degree of institutional maturity and the culture of continuous management improvement.

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ASSISTANCE

PRIMARY AND SECONDARY CARE

To respond to the pandemic and continue caring for chronic patients, reducing the risk of escalation of cases, Einstein changed the way the teams work in the SUS units it operates and used telemedicine platforms. The pandemic accelerated the digital transformation underway at the units; in a process that incorporated lessons learned from models that had already been pilot-tested since the previous year.

From March to December, there were almost 138,000 telemedicine calls at UBS (Basic Healthcare Units), at the AMA-E (Outpatient Healthcare Center - Pediatric Specialties) and at the CAPS (Psychosocial Care Centers) for different specialties. Through a link, patients accessed the telemedicine assistance platform for diagnosis, prescription of medication and, when necessary, referrals for consultations or hospital care.

The pandemic also changed the routine of the ESF (acronym in Portuguese for Family Health Strategy) teams. A WhatsApp channel was created to deal with the demands of registered patients. The professional in charge contacted the patient by phone or WhatsApp to carry out the service and provide the necessary referrals. The main conditions evaluated were respiratory symptoms, high blood pressure, diabetes and issues related to mental health.

The telemedicine service also streamlined the orientation and referral of patients by the oral healthcare team. There were more than 52 thousand

patients assisted from March to December. In the UPAs, technology was used to make video calls possible for hospitalized patients, in order to reduce the anguish and loneliness of patients and families and, in the most serious cases, enable a dignified farewell.

HOSPITAL STRUCTURE SUPPORT

From March to July, the CAPS, which in normal situations provide outpatient care, served as inpatient units for patients with mental illness, helping to free up hospital beds for the care of Covid-19 patients.



The UBS (acronym in Portuguese for Basic Healthcare Units) and Family Health Strategy teams operated by Einstein serve a registered population of

280,000 people.



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ASSISTANCE

PUBLIC PARTNERSHIP WITH THE SÃO PAULO CITY GOVERNMENT

	2017	2018	2019	2020	Δ 2020/2019
<b>Family Health Strategy<sup>1</sup></b>					
UBS (Basic Healthcare Units)	13	13	13	13	0.0%
ESF (Family Health Teams)	84	87	87	87	0.0%
Employees	1,085	1,128	1,150	1,174	2.1%
Registered Families	86,961	88,846	89,498	94,537	5.6%
Registered individuals	286,129	288,332	284,323	281,088	-1.1%
Consultations	2,434,954	2,412,132	2,349,646	1,964,432	-16.4% <sup>2</sup>
<b>AMA (Outpatient Healthcare Centers)</b>					
Units	3	3	3	3	0.0%
Employees	242	234	303	339	11.9%
Consultations	632,036	669,628	855,046	650,946	-23.9%
<b>UPA (Emergency Care Unit)</b>					
Units <sup>3</sup>	1	1	1	1	0.0%
Employees	434	419	530	544	2.6%
Consultations	995,154	1,077,322	1,100,662	828,308	-24.7% <sup>2</sup>
<b>CAPS (Psychosocial Care Centers)</b>					
Units	3	3	3	3	-33.3%
Employees	140	115	126	136	7.9%
Consultations	30,665	47,520	48,157	13,521	-71.9% <sup>2</sup>
<b>SRT (Therapeutic Residence Service)</b>					
Units	1	2	2	2	0.0%
Employees	8	17	22	22	0.0%
Residents	8	20	20	20	0.0%
<b>AMA-E (Outpatient Healthcare Center - Pediatric Specialty)<sup>4</sup></b>					
Unidades	NA	1	1	1	0.0%
Colaboradores	NA	35	54	51	-5.6%
Atendimentos	NA	47,631	53,919	41,086	-23.8% <sup>2</sup>
TOTAL	2017	2018	2019	2020	Δ 2020/2019
Units	21	23	23	23	0.0%
Employees	1,909	1,948	2,185	2,266	3.7%
Consultations	4,092,809	4,254,233	4,407,430	3,498,293	-20.6%

NA: not applicable.

<sup>1</sup> From 2019 to 2020, the average number of individuals per family decreased from 3.2 to 3.0, a reflection of the natural population movement process in the territory. As a result, the total number of individuals fell, despite the increase in the number of families.

<sup>2</sup> The reduction in care is related to Decree 154, dated March 20, 2020, which partially and temporarily suspended routine consultations, exams, procedures and surgeries, as of March 23, 2020, in hospital clinics and in the Basic Care Network. Services were gradually resumed starting in June of that same year.

<sup>3</sup> Urgent Care Unit (UPA) Campo Limpo.

<sup>4</sup> Partnership started in 2018.

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ASSISTANCE

HIGH COMPLEXITY

At the *Hospital Municipal Vila Santa Catarina – Dr. Gilson de Cássia Marques de Carvalho*, Einstein performs transplants and care for cancer patients and high-risk pregnant women, among other high complexity and urgent procedures. All these services were maintained, without interruption, and the total number of consultations even increased compared to 2019. Much of the growth is due to an agreement with the City of São Paulo for oncology services. With an average of 300 new cases per month, the hospital already represents one of the largest care services for cancer patients in the municipal network in São Paulo.



In 2020, the hospital distinguished itself for its pioneering spirit. Thanks to the synergy of the Oncology and Transplant teams, it carried out the first lung autotransplant in the country to treat a patient with lung cancer. The technique, used in specific cases, consists of removing the affected lung, extracting the tumor and reimplanting the organ in the patient.

In October, the unit incorporated a new line of care, with bariatric surgeries. A dedicated multidisciplinary team handles an average of 30 new cases per month.

Focusing on the pandemic, the hospital provided 56 adult ICU beds and 83 in the general ward and became the main unit for referring cancer patients with Covid-19 in the municipal public network.

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

	2017	2018	2019	2020	Δ 2020/2019
Employees	1,002	945	1,197	1,606	34.2%
Operational beds <sup>1</sup>	176	174	178	239	34.3%
Operating rooms	5	5	6	6	0.0%
Releases <sup>2</sup>	6,810	8,283	9,453	10,290	8.9%
Patients/day <sup>3</sup>	50,596	47,079	51,547	62,318	20.9%
Average length of stay (in days)	7.4	5.6	5.5	6.1	11.9%
Occupancy rate <sup>4</sup> (%)	79.0	77.0	78.9	72.3	-8.4%
Surgical patients (except cesarean sections)	1,900	2,920	4,058	3,568	-12.1%
Number of deliveries	3,408	3,426	3,344	3,584	7.2%
Emergency Care Obstetrics Consultations	17,941	16,773	16,933	14,027	-17.2%
Outpatient consultations	43,881	50,966	70,319	85,649	21.8%

<sup>1</sup> Beds in use and beds available for use at the moment of the census, even if they are unoccupied.  
<sup>2</sup> It is the patient's departure from the hospitalization unit due to discharge (cured, improved or unchanged), evasion, treatment withdrawal, internal transfer, external transfer or death.  
<sup>3</sup> Unit of measurement that represents the care provided to an inpatient during a hospital day.  
<sup>4</sup> Relationship between the sums of hospitalized patients at the end of each day and the total number of beds-day.

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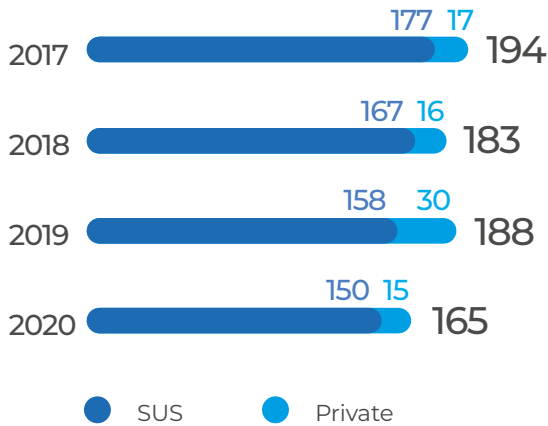
TRANSPLANT PROGRAM

Started in 2002, the Transplant Program performs liver, kidney, heart, lung, heart-lung, intestine and multivisceral transplants. The project is part of PROADI-SUS (acronym in Portuguese for Institutional Development Support Program of SUS) and supports the SNT (acronym in Portuguese for National Transplant System) with specialized assistance to patients from initial assessment, through transplantation to post-transplant follow-up, in addition to including management development initiatives for other public transplant centers, with support in the same stages.

Einstein acts as the Ministry of Health reference center for transplantation in patients with severe acute liver failure. In addition to training ICU professionals throughout Brazil to quickly identify the problem, it supports decision-making from teams across the country through a 24x7 center.

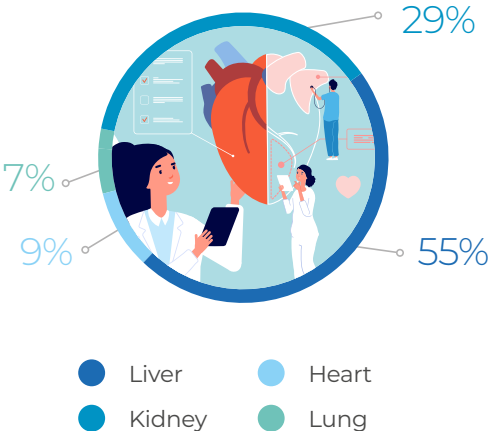


ORGAN TRANSPLANTS



TORGAN TRANSPLANTS (2020)

TOTAL: 165 TRANSPLANTS



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# DIGITAL TRANSFORMATION APPLIED TO HEALTH

Investments in Big Data Analytics, Artificial Intelligence and other advanced technologies carried out in recent years, have generated positive impacts on the quality and safety of patient care and makes the use of healthcare resources more effective. About 70 dedicated specialists and another 100 professionals trained to work in data analysis in key areas — such as healthcare economics, population health, occupational safety and financial management — provide critical analysis and speed in the processing of information to support decision-making.

Among the new solutions, there are prediction systems that help to set up the team of specialists in the Emergency Room 40 days in advance and the use of artificial intelligence to codify diagnoses and improve quality management processes of medical practice in oncology.

This knowledge is also offered in the form of consultancy, as has been carried out in a project with the São Paulo State Department of Health to improve data analysis in five strategic areas: epidemiological management and management of critical resources, both related to Covid-19; support for the optimization of pharmaceutical logistics; evaluation of input consumption efficiency; and optimization of vacancy offerings. The work involved two enabling fronts, data architecture and platform, and Big Data Analytics training for leaders and their teams.



## MONITORING

Einstein uses the Cerner Millennium platform, a health information management system that integrates data from diagnostic tests, conducts and prescribed medications, providing real-time exchange of information, automation of processes and reduction of the risk of errors. The CMOA (Monitoring and Assistance Center) uses the platform to extract and monitor a series of indicators in real time and generate alerts in case of risks or deviations in pain levels, medication delays, allergies and blood glucose levels, for example. In 2020, Cerner and CMOA were used in the management of Covid beds at the Hospital Israelita Albert Einstein, at the Hospital de Campanha do Pacaembu and in the screening tents managed by Einstein.

Rapid admission flows on admission, exams and home collection, efficient scheduling of surgeries and a new integrated system for handling and dispensing drugs from the pharmacy were developed with the help of technology and help to make better use of resources and reduce patient wait time. With a 45% increase in calls to the call center in 2020, new channels were also adopted for processes with high recurrence, such as scheduling exams and consultations and information about Covid-19 tests – all via WhatsApp.

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DATA SECURITY

Data privacy and security are part of the digital transformation process and have been enhanced with the review of processes, employee training and new tools. According to provisions in the General Data Protection Law (LGPD in Portuguese), new models of consent for the use of data were adopted in environments for interacting with patients. The privacy policies and the use of cookies, disciplinary measures and employment and third party contracts were also revised, and training tracks were created for areas such as laboratories and population health. All access to patients’ medical records began to be monitored.

In November 2020, Einstein received the news that access information to certain Ministry of Health systems was filed without adequate protection on a public platform by a professional hired by Einstein to provide services at the Ministry’s facilities under an agreement on data prediction systems. The information that would give access to data from Covid-19 exams for up to 16 million people was immediately removed and the fact prompted an investigation by the organization’s Data Privacy, Legal and Compliance areas.

Einstein immediately reported the incident to the Ministry of Health, requested that the passwords be changed and hired web monitoring services. In addition to other actions, technical work carried out by a team specialized in security incidents concluded that there was no massive leak of the data contained therein.

With the support of experts, new cybersecurity measures were evaluated, especially those involving external projects. Conducts, processes and content related to participation in projects with partners and access in external environments were reinforced with training.



CULTURE

Qualification tracks for all employees and training aimed at leadership strengthen the Organization's data culture.

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BIG DATA ANALYTICS IN SUS

The place of residence can influence the individual’s health more than the genetic code itself. This is one of the bases for the development of the GeoSES (acronym in Portuguese for Socio-Economic Index of the Geographical Context for Health Studies), a geo-referenced index that calculates the influence of variables such as education, income and mobility in different regions, which can be used to assist in planning for public policies.

GeoSES was one of the SUS deliverables, carried out within the PROADI-SUS scope in the 2018-2020 cycle. The indicator was developed in a partnership between data scientists from Einstein and researchers from the USP (*Universidade de São Paulo*) and helped to assess, for example, factors that influence the risk of death due to Covid-19 in vulnerable populations.

BIG DATA

The term designates the ability to process different formats of large digital databases to transform them into applicable information.

In addition to GeoSES, the project involved other initiatives to apply new technologies. One example was the construction of a conceptual database model to integrate different government data platforms. An algorithm for risk classification for unfavorable pregnancy outcomes based on posts made by 100,000 pregnant women on a social support network was also developed. At this stage, it was possible to estimate the chances of babies being born with low birth weight or premature babies with a performance similar to that achieved by specialized nursing teams. Information like this can guide managers on the best allocation of resources, such as the need for children’s ICUs.

As a response to the pandemic, the available research structure with individuals with chronic diseases in Vitória da Conquista (state of BA) and Teófilo Otoni (state of MG) was used to monitor people in this population with a confirmed diagnosis of Covid-19. They were accompanied by telephone, which helped to direct them to early medical care when necessary, in addition to avoiding unnecessary visits to healthcare facilities.

Information based on georeferencing and socioeconomic and health conditions also helped to establish a criticality index. Added to information about the contagion curve, the indicator was applied by companies to help direct donations to regions that most needed resources.

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

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# SAFETY AND QUALITY

PATIENT SAFETY IS A PRIORITY AT EINSTEIN AND THE OBJECT OF CONSTANT AND CONSISTENT WORK BY LEADERS AND TEAMS.



The Patient Safety System includes proactive risk management, monitoring and analysis of performance indicators and the application of corrective and continuous improvement actions. The standards, objectives and quality and safety controls are applied in the four hospitals that Einstein operates in private and public healthcare sectors, with specific action plans for each one.

Quality and safety indicators were impacted by the Covid-19 pandemic, with increased patient complexity and exposure to new healthcare risks. The impact was reflected in outcomes in healthcare-related infections, pressure injuries, and catastrophic events.

In line with the high reliability goals, there was a 60% reduction in adverse events with serious damage, and the objective is to eliminate the catastrophic events through the continuous improvement of care processes.

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PATIENT SAFETY

	2017	2018	2019	2020	Δ 2020/2019
Parto Adequado Project (vaginal delivery rate in pregnant women Robson I to IV) <sup>1</sup>	60.6%	65.0%	67.2%	65.0%	-2.2 pp
Incidence rate of blood stream infection associated with central venous catheter <sup>2</sup>	0.99	1.19	0.97	1.72	77.2% <sup>11</sup>
Incidence rate of pneumonia associated with mechanical ventilation <sup>3</sup>	1.01	1.27	1.09	1.99	82.3% <sup>12</sup>
Incidence rate of urinary tract infection associated with bladder catheter <sup>4</sup>	0.06%	0.06%	0.05%	0.08%	57.0% <sup>13</sup>
Surgical site infection rate in clean surgery <sup>5</sup>	0.18%	0.16%	0.16%	0.15%	-0.0 pp
Pressure Injury III and IV <sup>6</sup>	2	8	20	28	40.0%
Fall rate with severe damage <sup>7</sup>	3	4	5	2	-60.0%
Catastrophic Events <sup>8</sup>	29	27	11	11	0.0%
Bronchoaspiration with severe damage <sup>9</sup>	1	2	5	1	-80.0%
Readmission rate within 30 days <sup>10</sup>	7.43%	6.43%	7.10%	6.06%	-1.1 pp

Note: indicator consolidates information from the Morumbi unit, from the Diagnostic Medicine services, from the Hospital Municipal M'Boi Mirim – Dr. Moysés Deutsch and Hospital Municipal Vila Santa Catarina – Dr. Gilson de Cássia Marques de Carvalho.

<sup>1</sup> Number of vaginal births in Robson pregnancies 1 to 4/total number of Robson pregnancies 1 to IV 4 X 100.

<sup>2</sup> Total number of infections/total number of catheter passages X 1,000.

<sup>3</sup> Total number of pneumonia cases/total number of patients on ventilation X 1,000.

<sup>4</sup> Total number of infections/total number of catheter passages X 1,000.

<sup>5</sup> Total number of infections/total number of clean surgeries X 100.

<sup>6</sup> Total number of pressure injuries III or IV. Note: data from Hospital Municipal M' Boi Mirim in 2017 and 2018 are not available and, therefore, were not included in the calculation of the indicator in those years.

<sup>7</sup> Number of falls with serious damage (inpatients and outpatients).

<sup>8</sup> Number of catastrophic adverse events.

<sup>9</sup> Total number of severe bronchoaspiration events with severe damage (inpatients and outpatients).

<sup>10</sup> Number of patients readmitted within 30 days (excluding Oncology and Hematology)/total number of discharges (excluding Oncology and Hematology) X 100.  
Note: discharge means the patient leaves the hospitalization unit due to discharge (cured, improved or unchanged), evasion, treatment withdrawal, internal transfer, external transfer or death. This indicator considers the information from the Morumbi unit and Hospital Municipal M'Boi Mirim since their monitoring is still under development at Hospital Municipal Vila Santa Catarina.

<sup>11</sup> The variation reflects the severity of the cases treated, which required specific therapeutic resources and were characterized by longer hospital stays and increased frequency and time of central venous catheter use.

<sup>12</sup> The increase was driven by the profile of patients with Covid-19, at higher risk of VAP, and other associated factors, such as the difficulty in applying the prevention package in the prone (face down) position, and the prolonged use of sedation and neuromuscular blockers.

<sup>13</sup> The increase is associated with the profile of patients with Covid-19, with greater use of urinary bladder catheters and longer hospital stays.

### EXTERNAL REFERENCES

Einstein participates in international reference registries in several specialties, such as Action and CathPCI (from the American College of Cardiology) and STS (from the Society of Thoracic Surgeons ) in the area of cardiology and the Vermont Oxford Network, in the area of neonatology. The objective is to guide its own performance and guide the improvement of care quality.

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ASSISTANCE

MATERNITY IN THE PANDEMIC

Committed to reducing unnecessary cesarean sections, Einstein defined new assistance flows to offer greater safety to the pregnant woman, her companion and staff. The process begins with the collection of RT-PCR exams two or three days before the expected delivery date, and the release of the results within 24 hours. In situations where delivery was delayed, the tests were repeated at no cost to the pregnant woman.

To provide the opportunity for vaginal delivery even in confirmed cases of the disease, operating rooms equipped with negative pressure technology, forced circulation and air filtration were used, reducing the risk of contamination. Thus, it was possible to maintain the general vaginal birth rate at the Morumbi unit at 34%, similar to the previous year - outside the pandemic situation.

Postpartum care was also adopted for patients with Covid to protect the bond between mother and child from the very beginning. In most cases, they were able to stay in the same room, equipped with the same air filtration technology and negative pressure. With safety routines, constant hand hygiene with gel sanitizer and use of a mask, breastfeeding was encouraged and could be started normally.



HIGH RELIABILITY

Einstein works to achieve and maintain zero harm and be a High Reliability Organization (HRO). In the Agency's definition for Healthcare Research and Quality (AHRQ), these are organizations that operate in complex, high-risk fields for long periods without major accidents or catastrophic failures. This objective reflects Einstein's commitment to the safety of patients and employees and guides improvement processes.

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# PATIENT EXPERIENCE

Einstein performs the integrated management of the different factors that affect the relationship with patients, their perception and the satisfaction of their expectations and needs. These are the pillars used to manage the patient experience at Einstein, as expressed in the acronym SPA, which combines the concepts of patient safety, passion for service and attention to detail. Understanding the customer’s point of view and what they value is an essential part of this job and requires constant attention.

In 2020, given the changes resulting from the pandemic, Einstein sought to incorporate new procedures, guided by the expectations of the public served. One example was contact with family members. As the presence of companions had to be restricted to exceptional cases, the assistance teams mobilized to guarantee alternative means of contact between patients and families through cell phones and tablets.

Another initiative sought to work on the safety attribute, which is crucial to the patient’s experience. In addition to seeking the best care, Einstein tried to shore up the communication of new protocols for fighting against the new coronavirus. Also in February, it pioneered in adopting completely separate flows for the movement of people suspected of or undergoing treatment for Covid-19 and people seeking care for other reasons. Entry and exit points, screening spaces, waiting rooms and even specific elevators were defined for the two groups. The measures were already part of the routine, but there was a need to increase their visibility to strengthen the sense of security of those who circulated in the units.

## DIALOGUE AND PARTICIPATION

Patients have a voice in five advisory boards – Oncology, Inpatients and Outpatients, Elderly, Pediatrics and Patient Safety – and two strategic institutional forums at Einstein, the Comitê de Qualidade e Assistência - CQA (Care Quality Committee) and the Comitê Implementador da Experiência do Paciente (Patient Experience Implementing Committee). Together with professionals from Einstein, they define ways to improve processes and collaborate for constant evolution.

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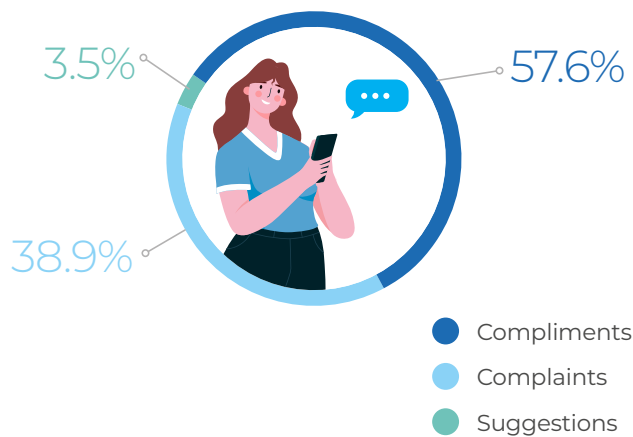
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PATIENT PERCEPTION

To monitor patient satisfaction with the services provided and guide improvements, Einstein conducts annual satisfaction surveys and measures their degree of recommendation through a post-service survey, which uses, among others, the Net Promoter Score (NPS) methodology. In addition, the Patient Experience Office analyzes the manifestations of patients and caregivers, received in person and online.

In 2020, the quality of Einstein’s service was recognized externally by the Reclame Aqui award defined by popular vote. The organization was ranked 1st in the Health–Hospitals category.

MANIFESTATIONS RECEIVED (2020)



PATIENT SATISFACTION<sup>1</sup>

	2017	2018	2019	2020	Δ 2020/2019	Impact Factors <sup>2</sup>
Emergency Service	62.4	71.0	66.0	66.3	0.5%	Service and courtesy
Hospitalization	74.4	77.9	82.0	85.3	4.0%	Service and courtesy, Infrastructure and Technical procedure
Diagnostic medicine	81.5	80.0	83.8	79.1	-5.6%	Access to results (Covid), Waiting time, Preparation guidelines and Initial assistance
Doctors' offices	74.3	80.8	81.4	83.9	3.1%	Service and courtesy, Infrastructure and Technical procedure
Check-up	66.1	78.6	77.9	77.2	-0.9%	Technical procedure
Total Einstein	73.2	77.3	77.8	77.3	-0.6%	Waiting Time and Guidance

<sup>1</sup> Performed by service area. It uses the Net Promoter Score (NPS) methodology, which considers a scale from -100 to +100.  
<sup>2</sup> List of the main aspects analyzed that motivated the differences in the comparison between 2020 and 2019.

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ASSISTANCE

DIGITAL JOURNEY

Digital transformation is one of Einstein’s strategic guidelines and drives several initiatives, such as Telemedicine (see [page 49](#)), predictive analysis systems, patient monitoring and safety, decision support (see [page 38](#)) and tools for communication and relationship. The use of technology is not an end in itself, as it is centered on the patient and at the service of their care.

With the Einstein Experience program, Einstein ensures a multidisciplinary view of this experience. In a matrix form, the initiative encompasses different areas – Hospital, Diagnostic Medicine, Innovation, Information Technology and Sales, among others – with the objective of identifying opportunities to improve this experience and clinical management through digital solutions.

In 2020, the patient journey in diagnostic medicine was mapped out, considering all interfaces with Einstein. Based on the diagnosis, specific work groups were created and action plans were defined and will be carried out from 2021 onwards. Some improvements were also adopted in 2020, such as self-scheduling via totem or smartphone, reducing time in the reception area, and the choice of a new, more robust CRM platform to help in data management and improve procedures. The tool is already compliant with the General Data Protection Law (LGPD in Portuguese). The program will be expanded in 2021 to the hospital patient’s journey.

CONTACTS RECEIVED FROM PATIENT AND FAMILY EXPERIENCE  
- SAC (CUSTOMER SERVICE CHANNEL)

TYPE OF CONTACT	2017	2018	2019	2020	Δ 2020/2019
Absolute number					
Commendations	13,679	12,548	9,071	8,721	-3.9%
Complaints	5,167	5,496	5,814	5,896	1.4%
Suggestions	887	887	702	531	-24.4%
Total (weighted)	19,733	18,931	15,587	15,148	-2.8%
Stays <sup>1</sup>	1,030,769	1,054,695	1,161,273	1,478,180	27.3%
Weighted number <sup>2</sup>					
Commendations	13.3	11.9	7.8	5.9	-24%
Complaints	5.0	5.2	5.0	4.0	-20%
Suggestions	0.9	0.8	0.6	0.4	-41%
Total (weighted)	19.1	17.9	13.4	10.2	-23.7%

<sup>1</sup> Number of patient records at all Einstein addresses.  
The increase in the number of visits in 2020 was driven by the 135% growth in the demand for home collection by the Einstein Até Você service and 51% of the demand for RT-PCR exams for Covid-19, carried out in the diagnostic medicine laboratory at the Morumbi unit.  
<sup>2</sup> Considers the number of contacts for every 1,000 patient visits.

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# CLINICAL STAFF ENGAGEMENT

The clinical staff, which was made up of 9,572 professionals as of December 31, 2020, plays a fundamental role in Einstein's excellent performance, and the relationship with between staff and institution is constantly evolving. In 2020, Einstein launched the Physician Compact initiative, which establishes a pact between physicians and Einstein with the aim of adjusting this relationship, taking into account the changes that take place in the healthcare sector.

The pact was established throughout the year in several workshops, with the participation of around one thousand doctors and was released during the celebration of Physician's Day, on October 18th. During the event, 933 physicians accepted the terms and signed it online. After the launch, more than 5,000 doctors accessed the document and were able to give their opinion and suggest changes.

The Physician Compact outlines the commitment of both Einstein and its professionals regarding aspects of physician and patient experience, leadership, safety, quality, sustainability and innovation. Among the themes valued by Einstein are the commitment of physicians to individualized care, medicine aligned with best practices and

the contribution to the training of students and healthcare professionals. Physicians showed their interest in continuous dialogue channels, professional growth, involvement in strategic decisions, support in risk management cases and promotion of the necessary structure for digital transformation, among others.

The agreement and the intended evolutions will be implemented starting in 2021, through a series of programs, projects and activities.

## STRATEGIC DIALOGUE

Since 2013, the Grupos Médicos Assistenciais-GMA (Medical Assistance Groups) have brought together physicians and professionals from the multidisciplinary team in a joint effort to build knowledge and best health practices. There are currently 34 active GMAs, organized based on specific diseases, health conditions and areas of interest.



In 2020, the meetings migrated to the online format, with 248 meetings held and 81 initiatives carried out. One of the highlights of the year was the active participation of the clinical staff in the development and validation of care pathways, aimed at proper practice. The GMAs also produced educational content and held live meetings open to the lay public, to inform people about diseases during the pandemic.

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PANDEMIC PARTNERSHIP

In order to support the open clinical staff and minimize the economic impacts generated by the pandemic, Einstein made the leasing of offices more flexible with the temporary suspension of charges and the reduction of amounts. Units outside the hospital environment were also made available for clinical activity and telemedicine resources were extended to the entire clinical staff.



RESEARCH WITH THE CLINICAL BODY

	2019	2020	Δ 2020/2019
Degree of identification with Einstein <sup>1</sup>	89,5	93,4	4,4%
Net Promoter Score (NPS) of physicians by area			
Hospitalization	79,6	86,0	8,0%
Diagnostic medicine	72,5	77,0	6,2%
Doctor's offices <sup>2</sup>	NA	60,0	NA

Note: both the NPS and the research on the degree of identification with Einstein use a scale from -100 to +100.  
<sup>1</sup> When the clinical staff identifies with Einstein, on a scale of -100 (totally does not identify) to 100 (completely identifies).  
<sup>2</sup> The survey of physicians who have offices at Einstein began in 2020.

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# TELEMEDICINE

The Telemedicine program at Einstein gained prominence in 2020, given the health emergency caused by the pandemic and distancing measures. The consistent investment since 2012 and the consolidated services platform made it possible to rapidly expand the offer and coverage of services, taking Einstein excellence to companies, insurance operators and healthcare organizations.

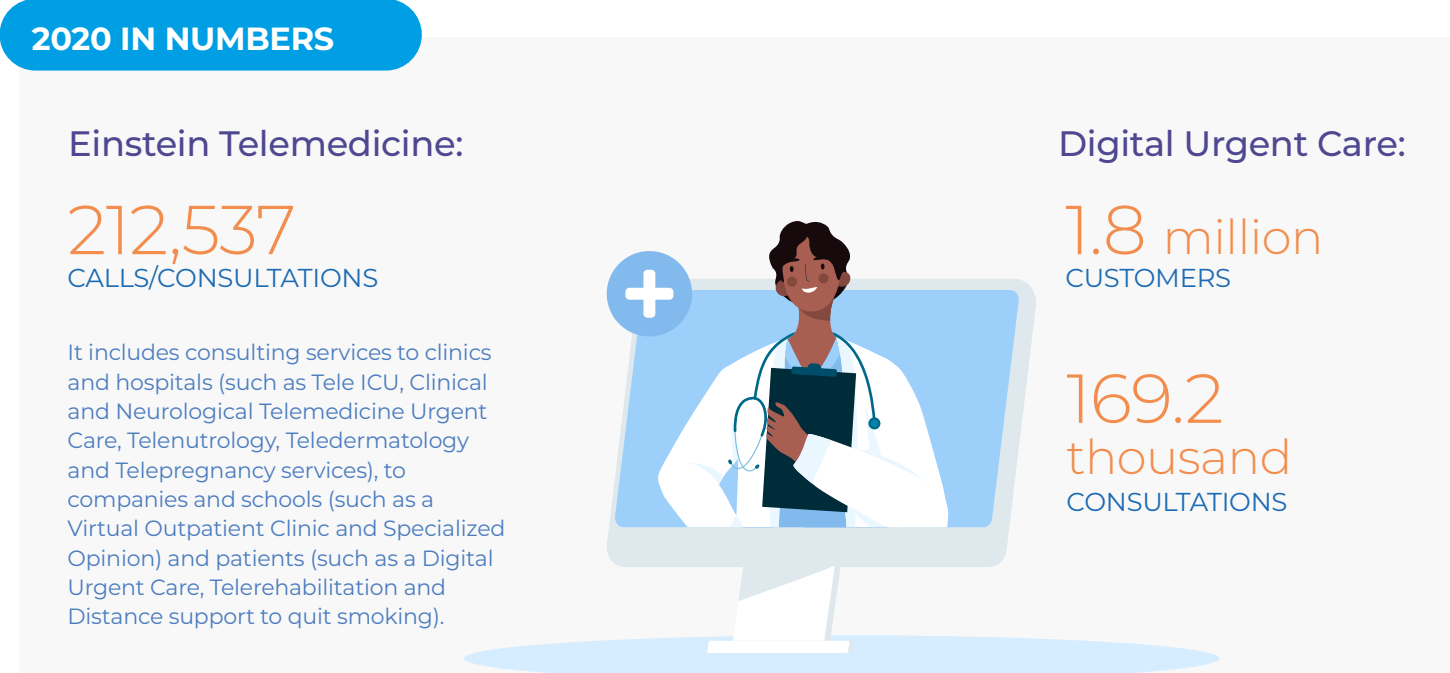
The Digital Urgent Care Service carried out 169,200 consultations during the year, a volume 22 times greater than the registered in 2019. During the same period, the database of individuals with access to the service went from 478,000 to 1.8 million and the number of companies that hired the service rose from 18 to 85. To meet the increased demand, the team was expanded from 24 to 180 doctors, in addition to nurses, engineers and information technology specialists, available 24 hours a day. In the total for the year, Einstein Telemedicine carried out 212.5 thousand consultations, and the accumulated amount since 2012 was 425.6 thousand.

In addition to reducing the movement of people and possible crowding, the offer of distance care also avoided the aggravation of health problems, by providing care and guidance to patients who would not seek face-to-face services for fear of contracting Covid-19. The Digital Urgent Care service is offered

to healthcare operators, companies and individuals, including customers of the Einstein Conecta platform, open to health insurance operators that do not include Einstein's services.

The remote modality was also used by Einstein's clinical staff, avoiding the interruption of specialized care. In a service provided to hospitals in different regions of the country, Einstein's Telemedicine ICU

supports local teams and carries out daily visits to critical patients. The service covered nearly 400 beds, including 30 dedicated exclusively to Covid-19 patients. During the year, 37 thousand visits were made, more than three times the number registered in 2019. The service also benefits 85 public and philanthropic hospitals in a collaborative project within the PROADI-SUS program (see [page 53](#)).



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SUPPORT TO SUS

Einstein’s expertise in telemedicine is applied to serve the public healthcare system in several PROADI-SUS projects. Here are some of the examples:

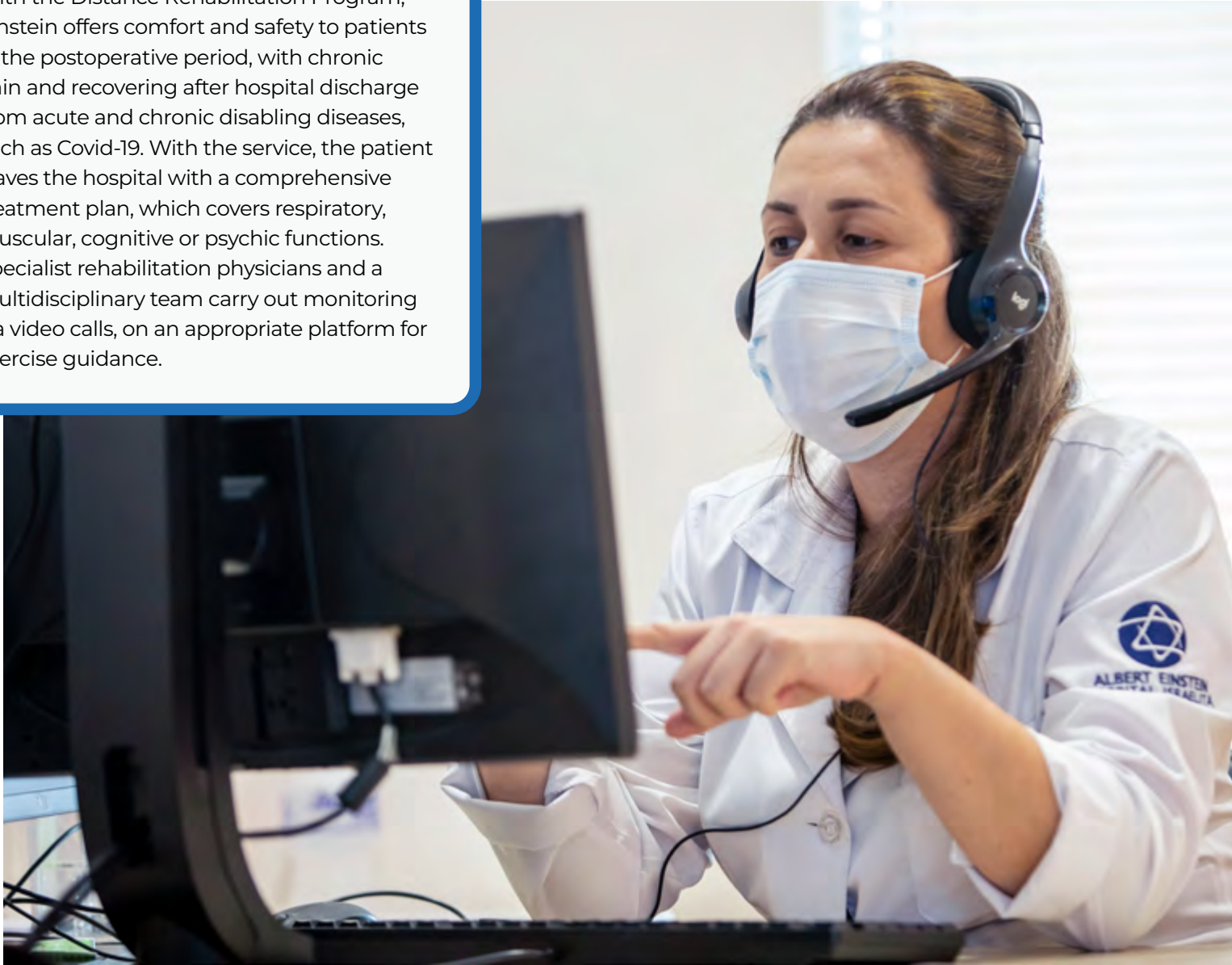
**Regula Mais Brasil:** through teleconsultations or telephone assistance, Einstein treats Orthopedic patients in Recife (state of PE) and, when necessary, refers the patient for consultations or in-person exams. The initiative helps to reduce the waiting list for specialists and supports the SUS regulation system.

**Tele AMEs:** aims to implement 120 medical specialty outpatient clinics through telemedicine in municipalities in the northern region of Brazil. Professionals in the areas of endocrinology, neurology, pediatric neurology, pulmonology, cardiology, psychiatry and rheumatology will provide diagnostic and therapeutic support to the UBS (Basic Healthcare Units) teams located in regions with a lack of specialized medical services.

To learn more about PROADI-SUS, see [page 53](#).

TELEREHABILITATION

With the Distance Rehabilitation Program, Einstein offers comfort and safety to patients in the postoperative period, with chronic pain and recovering after hospital discharge from acute and chronic disabling diseases, such as Covid-19. With the service, the patient leaves the hospital with a comprehensive treatment plan, which covers respiratory, muscular, cognitive or psychic functions. Specialist rehabilitation physicians and a multidisciplinary team carry out monitoring via video calls, on an appropriate platform for exercise guidance.



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# DIAGNOSTIC MEDICINE

Einstein serves patients, healthcare organizations and companies with a broad portfolio of laboratory and imaging tests that stand out for the quality of services, production capacity in performing complex procedures - such as the tracking of genetic abnormalities in the fetus and compatibility tests for the performance of transplants – and for the commitment to permanent evolution.

In 2020, these distinguishing elements strengthened Einstein's role in confronting Covid-19. With investments in people and equipment and the review of workflows, it quickly responded to the increase in demand, and from February to December it carried out 603,947 tests for the disease. Considering the entire exam portfolio, in the most critical months of the pandemic, 1.1 million exams were performed per month, an increase of 34% compared to the monthly average of 2019.

In addition to the volume and speed of testing, Einstein generated knowledge to aid in combatting the new coronavirus. It was one of the first organizations to perform virus sequencing in February; in May, it developed the first genetic test for Covid-19, with 16 times the test processing volume and the same effectiveness as RT-PCR. The method adopted next-generation sequencing (NGS) that reads small fragments of DNA to detect diseases or mutations, a technique already used for diagnosing hereditary and oncological diseases.

At the end of the year, Einstein was a pioneer in Brazil by launching a new serological test on the market capable of detecting the neutralizing antibody. The serology tests until then only showed if the patient had already had contact with the virus, without giving any information about their immunity level.

Using artificial intelligence, a system was developed that makes the analysis of chest X-rays faster to identify lung lesions associated with the disease. It also made its teleradiology service available to public hospitals, to support tomography analysis. The test supports decision-making about the initial treatment and patient isolation and was especially relevant in the early phase of the pandemic when there was difficulty in accessing RT-PCR tests and the need for more knowledge about the virus.

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EXAMS PROCESSED (2020)

TOTAL: 8,600,157



- Private health
- Hospital Municipal Vila Santa Catarina
- Hospital Municipal M'Boi Mirim
- Mogi das Cruzes City Government

GENOMIKA

Einstein's Personalized Medicine Center offers individualized diagnosis, treatment and prevention of diseases, based on each person's genetic background. Personalized medicine services were expanded in 2020, and the more than 400 genetic tests performed by Einstein are now available in Porto Alegre (state of RS), Goiânia (state of GO), Recife (state of PE) and Brasília (Federal District) through the proprietary structures.

Einstein also strengthened its performance in the area with the acquisition of the Genomika Laboratory, one of the national leaders in the execution of genetic sequencing tests, with which it had a partnership since 2016.

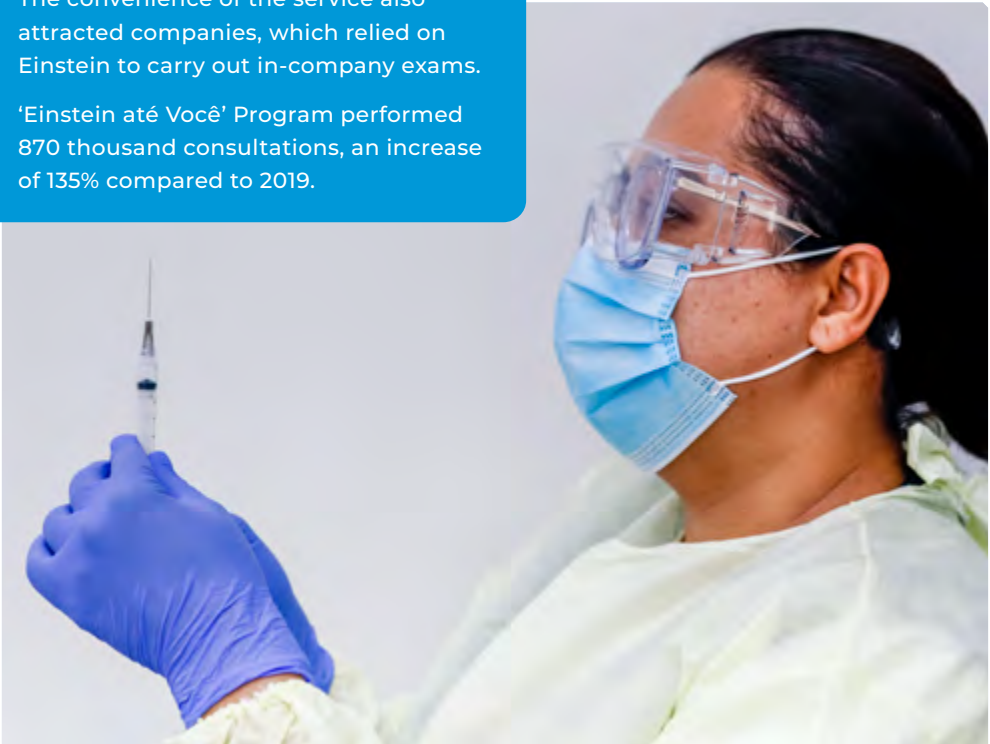
Precision medicine is the focus of a strategic effort by Einstein, which involves different healthcare areas and bets on the potential of genetic information to revolutionize healthcare with the prediction of disease risk, preventive actions and target treatment.

'EINSTEIN ATÉ VOCÊ' PROGRAM

The home care service was expanded in 2020. In addition to the collection of laboratory tests and vaccinations, it now includes electrocardiograms, ultrasonography and polysomnography, avoiding travel, especially for the elderly, patients with chronic diseases and pregnant women.

The convenience of the service also attracted companies, which relied on Einstein to carry out in-company exams.

'Einstein até Você' Program performed 870 thousand consultations, an increase of 135% compared to 2019.



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# PROADI-SUS

Einstein is a Healthcare Entity of Recognized Excellence, authorized by the Ministry of Health to carry out projects for PROADI-SUS, as compensation for the immunity from social contributions. PROADI-SUS was created by Law # 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 high complexity care activities.

In the 2018-2020 triennium, Einstein executed 47 projects within the scope of PROADI-SUS, with expenditure of its own resources totaling BRL 665.7 million.

The complete list of projects and results achieved can be consulted here: <https://hospitais.proadi-sus.org.br/projetos>. Here is a summary of some of the initiatives.

**Tele UTI Covid:** Einstein led the initiative, carried out collaboratively by five PROADI-SUS hospitals, which consisted of daily medical teleconsultations conducted by an intensive care specialist for patients hospitalized in the ICUs, with emphasis on severe acute respiratory failure and suspected infection by Covid-19 cases. The project involved 85 ICUs and cared for 1,500 patients. <https://hospitais.proadi-sus.org.br/covid19>

**Sickle cell anemia:** use of gene therapy to treat the disease. The technique under development is to edit stem cells from the patient's bone marrow and re-infuse them to produce normal hemoglobin. In the first stage, the project reached the desired levels of gene editing and functional validations were carried out successfully. In the next step, the protocol will be applied on a large scale in preparation for its use in clinical trials. <https://hospitais.proadi-sus.org.br/projetos/17/anemia-falciforme>

**Transplants:** training of more than 1,500 professionals from public hospitals in diagnosing brain death and providing tutorials to structure or strengthen six transplant centers in Belém (state of PA), Campo Grande (state of MS), Natal (state of RN), Rio de Janeiro (state of RJ), Aracaju (state of SE) and Teresina (state of PI). <https://hospitais.proadi-sus.org.br/projetos/19/transplante>

**PlanificaSUS:** courses and tutorial workshops on the planning and operation of Redes de Atenção à Saúde-RAS (Health Care Networks) for more than 65 thousand care and management professionals. The initiative follows the Chronic Diseases Care Model and has the potential to benefit more than 450 thousand SUS users. <https://hospitais.proadi-sus.org.br/projetos/25/planificasus>



## NATIONWIDE REACH

All Brazilian states received at least one direct Einstein initiative through PROADI-SUS.

**Rare genomes:** provides for the genetic sequencing of 6,735 patients with rare diseases suspected of being genetically defined. In addition to the practical implications for diagnosis and treatment, the initiative will provide an extensive database on the genetics of the Brazilian population to be used in research and in the development of precision medicine in the SUS. The project was integrated into the Genomas Brasil platform, a federal government initiative that intends to sequence the genome of 100,000 people in the country. The execution schedule was revised due to the pandemic, and the work will continue in 2021. <https://hospitais.proadi-sus.org.br/projetos/156/genomas-raros>

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# THE EXCELLENCE OFFICE

The Excellence Office is a unit specialized in the development of collaborative projects with public and private institutions that, through partnerships, disseminate good quality and safety practices in healthcare. The aim is to create a learning and knowledge sharing community with different organizations and cultures around the world.

Among these partners is Planetree, a global benchmark in person-centered care. The Office supports the adoption of Planetree standards and principles and, in 2020, signed 11 new contracts with this focus - an 84% increase compared to 2019. A successful example was the work developed in the Einstein Oncology

Network with the enhancement of the culture that puts patients, their families and employees first. The network is made up of clinics located in the states of Amazonas, Bahia and Paraná and in the Federal District.

Throughout the year, the Office unveiled the Fellow in Person-Centered Care (FPCC) program. Of the five Brazilian professionals approved to act as multipliers, three are from Einstein. There are currently 54 Planetree multipliers around the world.

In Brazil, the Office also coordinates initiatives of the Institute for Healthcare Improvement (IHI) - an organization present in five continents, which uses the science of improvement to advance and sustain better results. The work brings together public and private organizations in a collective effort to improve processes and adopt new practices on critical issues. These are moments the sharing of experiences and a search for simple, innovative and low-cost solutions to face common challenges. The idea is to save lives and reduce avoidable complications and waste in healthcare.

New projects under PROADI-SUS and financed by international grants are planned for 2021 in the areas of maternal mortality, dehospitalization, patient safety and adolescent health, with a focus on pregnancy and drug use.

## INTERNATIONAL QUALITY AND HEALTH FORUM

In November 2020, the Latin American Forum on Quality and Safety in Healthcare was held online and free of charge. The event, a partnership between Einstein, IHI and Clínica Anglo Americana (CAA), from Lima (Peru), discussed the impact of Covid-19 and the gains for health systems and for individuals around the world.

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The Einstein Hub exceeded the 50% reduction target, agreed upon for the 2018-2020 triennium, and managed to reduce central line-associated bloodstream infections (CLABSI) by 58%, cases of ventilator-associated pneumonia (VAP) by 63% and urinary tract infections associated with the use of bladder catheters (UTI-CA) by 74%. The accumulated result, considering all participating hospitals, was a 47% reduction in CLABSI, 51% in VAP and 68% in UTI-CA.

The project will continue in the 2021-2023 triennium in a new format (18-month cycles, 80% virtual), will

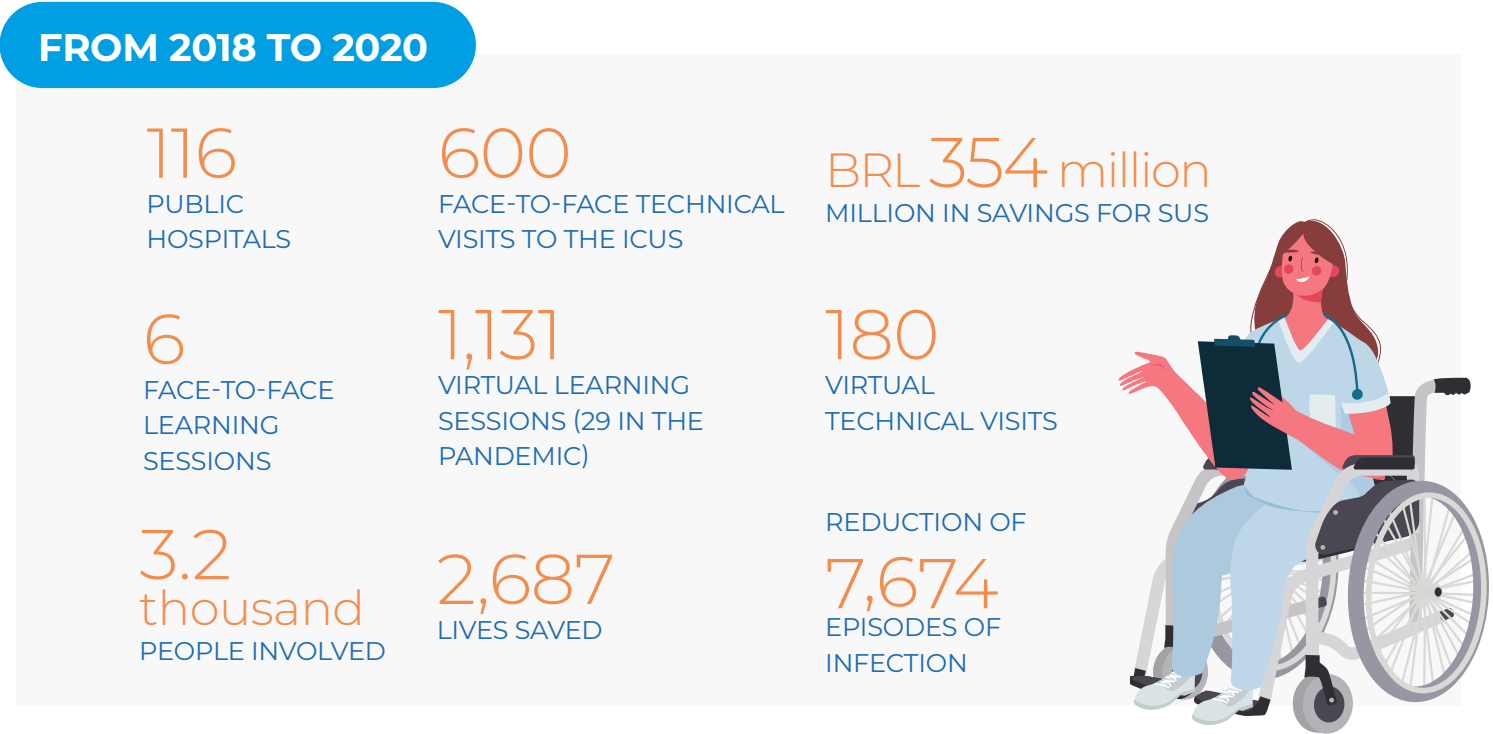
feature 204 new hospitals and, in addition to adult ICUs, will include pediatric and neonatal ICUs.

As a result of the Covid-19 pandemic, guidance on coping with the disease and reducing the risk of infection was reinforced. Intensive care protocols, virtual case assessment, safe use of protective equipment, hand hygiene and handling of invasive devices, contingency plans, crisis table and review of practices adopted in the project were resources shared with hospitals during this period.

HEALTH IN OUR HANDS

The PROADI-SUS guidance project for ICU professionals reduced the Health Care Associated Infections (HCAIS) to less than half in 116 participating public hospitals, totaling about 4,000 ICU beds in 25 states and the Federal District. From 2018 to 2020, 7,700 episodes of infection were avoided and 2,700 lives saved. Good practices not only increased patient safety, but also resulted in savings of BRL 354 million for the SUS.

In addition to coordinating the project, Einstein directly advised 26 institutions. Four other Hospitals of Excellence participated in the initiative and, like Einstein, acted as hubs in supporting ICUs across the country.



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ASSISTANCE

PARTO ADEQUADO PROJECT (ADEQUATE BIRTH)

Scheduled for 2020 and 2021, the intensive phase of the *Parto Adequado* project was impacted by the pandemic, with its adjusted schedule and new actions designed such as virtual learning sessions and guidelines for safe care for professionals, pregnant women and babies in the context of Covid-19.

Organized in pairs, 29 hospitals and 27 health care providers are working on innovative and viable strategies and measures for delivery and birth care in this stage of large-scale pre-expansion of the model, scheduled for phase 3. The initiative seeks to offer women and babies the proper care, at the right time, throughout pregnancy, throughout labor and postpartum, considering the structure and preparation of the multidisciplinary team, evidence-based medicine and sociocultural and affective conditions for the pregnant woman and her family.

In the last decade, maternal mortality has not been reduced – and the excess of cesarean sections can be one of the factors that contribute to this performance. The proportion of cesarean sections in relation to total births in private healthcare in Brazil is 55%. From 2015 to 2019, Parto Adequado project avoided 20,600 unnecessary C-sections, representing savings of BRL 45 million to the healthcare system. The lower number of surgical deliveries also has a positive impact on reducing the hospitalization time of mothers and babies, improving bed turnover.



MATERNAL MORTALITY

The collaborative project *Abraço de Mãe* (Mother’s Hug), funded by a donation from Merck Sharp & Dohme, continued in 2020 in 21 public hospitals with specific activities for the conditions that most threaten maternal life, such as sepsis and hemorrhagic and hypertensive syndromes. Until November, there was a 50% drop in the mortality rate, with a 79% reduction in deaths from sepsis and 75% from hemorrhage. The project will continue in 2021 and should be expanded in a new PROADI-SUS initiative.

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# TRAINING HEALTH PROFESSIONALS

WITH THE SUPPORT OF TECHNOLOGY, THE CENTRO DE EDUCAÇÃO EM SAÚDE ABRAM SZAJMAN (CESAS) MAINTAINED THE TRAINING SCHEDULE AND THE PRACTICAL EXPERIENCE OF STUDENTS SAFELY DURING THE PANDEMIC.

**E**instein trains professionals for healthcare and management by applying the skills and knowledge gained over its 65 years of history. With innovative methodologies, practical experiences and cutting-edge pedagogical solutions, it develops leaders who can contribute to the improvement of healthcare systems. The activities are carried out at CESAS, created in 2004 and supported mainly by the Szajman family. CESAS encompasses, encourages and welcomes all initiatives in the Education area, which include lato sensu and stricto sensu post-graduation, MBA (Master in Business Administration), master's degrees, medical and multi-professional residency, bachelor degrees in Medicine and Nursing, professional updating, personalized medical updating, technical education, technical high school, distance courses and corporate solutions.



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TEACHING AND EDUCATION

In 2020, as a result of the pandemic, the nearly 36,500 Einstein students spent most of the year in the remote learning format. The strategy was quickly adapted by a task force with initiatives that included the acquisition of equipment, production of content for better application of digital teaching methods and training of more than a thousand teachers. In ten days, the entire structure was transformed. The agility of the adaptation was joined by the dedication of teachers, leadership and students and resulted in the initiative's success.

Boarding, residents and internship students followed the activity schedule in the units operated by Einstein, with specific safety protocols and weekly analyses of the risk scenario for students. From August, Nursing and Medicine courses returned to the hybrid model, with part of the classes held in the classroom, with reduced capacity.

TECHNOLOGY AND APPROPRIATE PRACTICES

The exercises in the Realistic Simulation Center migrated to a 100% virtual environment, but the classes continued in real time to promote more targeted teaching, clarifying doubts and following the students' development. The environment uses virtual reality, robots and even professional actors to reproduce urgent and emergency situations. In addition to Einstein students, the exercises are offered to students and professionals from public hospitals through a PROADI-SUS project to contribute



to improving the quality of the training of teams working in SUS. To support the fight against Covid-19, the simulations also contemplated the care of patients suspected of or infected by the new coronavirus.

The training of professionals maintained the practical dynamics and the students' contact with the daily care provided and, with the guidance of the faculty, the students learned about coping with the pandemic.

The year 2021 will mark the graduation of Einstein's first medical course class. The course, which started in 2016, includes an internship model with a

greater workload of 2.5 years, and diversified clinical experience going through the entire healthcare system under Einstein's management.

The undergraduate Nursing course has been offered for over 30 years by Einstein and well ranked in the assessments – grade 4 in the *Exame Nacional de Desenvolvimento dos Estudantes - ENADE* (Brazilian National Exam on Students' Performance) – also has distinguished itself offering practical experience since the first year of training. It includes 1.2 thousand internship hours, one third above the minimum required by the Ministry of Education (MEC).

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TEACHING AND EDUCATION

HIGH DEMAND

The year was also intense for the Healthcare Management area at Einstein. With virtual classes, the opportunity opened up for interested parties throughout the country – and this resulted in an increase in the number of students, especially in short and mid-term courses.

The first class of the exclusive MBA in Healthcare Management graduated in December 2020, and included CEOs, directors, health secretaries, managers and other professionals from different areas of the healthcare system. The course had an international module, held in Manchester, UK, in January 2020. For 2021, the organization launched a second Executive MBA focused on Leadership and Public Management in Healthcare, which is based on Einstein’s experience of over 15 years in the management of SUS institutions.

The management area offered 18 open courses (2 MBAs, 3 postgraduate courses, 13 short and mid-term extension courses), 9 in-company courses and an international program during the year. In addition to the second MBA program, other unique courses have entered the graduate program, such as Healthcare Management and Purchasing and Supplies.

The short courses were held entirely in a live virtual format on topics such as leadership, people management and soft skills, health 4.0, management tools, management and emotional and mental health management in organizations.

Distance postgraduate courses grew 64% in 2020. Courses such as Healthcare Management and Leadership and People Management attracted students from across the country, as well as Angola, Germany and the United States.

COURSES OFFERED IN THE PANDEMIC


More than

176

THOUSAND

PROFESSIONALS

had access to free content provided by the Education area. Einstein opened access to Covid case management protocols, mechanical ventilation, clinical case live streams related to the pandemic, use of PPE, among others.



TEACHING INDICATORS	2017	2018	2019	2020	Δ 2020/2019
Technical school	713	786	667	683	2.4%
Technical High School <sup>1</sup>	NA	NA	106	228	115.1%
Degree in Nursing	246	282	302	321	6.3%
Degree in Medicine	197	297	418	461	10.3%
Refresher courses	1,924	2,607	3,437	2,355	-31.5%
Distance Learning Courses (EAD) <sup>2</sup>	5,710	6,119	12,908	9,780	-24.2%
Training at the Realistic Simulation Center	11,636	12,881	14,721	14,171	-3.7%
Postgraduate degree in healthcare lato sensu	4,002	4,458	5,058	5,478	8.3%
Management Programs <sup>3</sup>	NA	NA	81	511	530.9%
Adaptive teaching <sup>4</sup>	NA	NA	142	2,454	1,628.2%
Professional Master's Degree in Nursing	33	40	54	55	1.9%
<b>Total students</b>	<b>24,461</b>	<b>27,470</b>	<b>37,894</b>	<b>36,497</b>	<b>-3.7%</b>
Participants in scientific events <sup>5</sup>	14,532	10,979	10,996	46,082	319.1%
<b>Total number of students and participants in scientific events</b>	<b>38,993</b>	<b>38,449</b>	<b>48,890</b>	<b>82,579</b>	<b>68.9%</b>

NA: not applicable.  
<sup>1</sup> Started in 2019.  
<sup>2</sup> Information from 2019 onwards totals postgraduate students in distance learning, Retail distance learning, in-company distance learning and PROADI-SUS activities, without considering the students in on-site courses who used the distance learning structure. The reduction in the total number of students is justified by the fact that, in 2020, the PROADI-SUS courses were not taught, due to the pandemic.  
<sup>3</sup> Includes postgraduate courses, refresher courses and an MBA in Management.  
<sup>4</sup> Adaptive teaching, whose official name is "Atualização Médica Personalizada" - AMP (Personalized Medical Update), is a new, purely digital, multi-platform product that assesses the user's knowledge and thus recommends an effective study pathway.  
<sup>5</sup> Total 2020 includes participation in paid and free live streams and events.

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# TEACHING AND EDUCATION

## EFFECTIVENESS AND SATISFACTION

The general satisfaction of the Teaching area, measured by the NPS methodology, reached 80 points on a scale from -100 to +100.

Another survey, specifically with alumni from graduate courses, assessed how much education contributed to their careers: 60% of students had a change of function after starting the course; of these, 77% believe that the change was influenced by the degree received. In this segment, the satisfaction level reached 8.5 points, out of a maximum of 10, and the NPS was 49.

## STUDENT SATISFACTION <sup>1</sup>

	2017	2018	2019	2020
Net Promoter Score (NPS) <sup>2</sup>	79	82	72	80

<sup>1</sup> General results - Teaching area.

<sup>2</sup> Scale from -100 to +100.

## SCHOLARSHIPS AND OTHER BENEFITS

	Total students enrolled	Full Scholarships	Partial scholarships	Student credit	Paid monitoring	Total students benefited	Students benefited (%)
Technical High School	229	0	180	0	0	180	79%
Technical school	573	0	56	0	50	106	18%
Degree in Nursing	303	0	10	0	106	116	38%
Degree in Medicine	530	38	65	45	0	148	28%
<b>Total</b>	<b>1,635</b>	<b>38</b>	<b>311</b>	<b>45</b>	<b>156</b>	<b>550</b>	<b>34%</b>



## ACCESS AND OPPORTUNITIES

To expand training and offer opportunities for inclusion, Einstein has a full or partial scholarship program and student credits for students with financial needs. The granting of the benefit follows a careful selection process. In Medicine, 38 students received the full scholarship and 65 the partial benefit. In the Nursing course, included in the scholarship program in 2020, 10 students received the partial benefit and 100 participated in paid mentoring. In the Technical High School, 80% of the students receive a partial scholarship. In all, about a third of Einstein's students have some kind of financial incentive. Due to the pandemic, other measures were adopted, such as the renegotiation of deadlines and amounts for students and families with payment difficulties.

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TEACHING AND EDUCATION

DIVERSIFIED LEARNING MODELS

The Academia Einstein de Excelência Operacional (Einstein Academy of Operational Excellence) extended the possibility of developing the culture of continuous improvement and management experienced in the Organization to an outside audience. The activities, which have been carried out since 2016, have already trained 1,200 students in postgraduate courses, an equal number of participants in on-site refresher courses and more than 700 in distance learning courses.

In 2021, the Academy will take Einstein teaching abroad, with an in-company course on management and operational excellence in Colombia. The course lasts for one year, with live online classes, video classes with tutoring and face-to-face meetings.

The Education plans to expand the academy model in 2021. A digital platform should make the extensive collection of content produced by Einstein available, create convergence and become a new qualification option for healthcare professionals. Through a subscription, the platform will offer, in addition to traditional materials, content generated at scientific meetings, events, residency classes, live streams, and webinars, among others. The first areas to have academies will be Imaging, Vascular and Endovascular Surgery, Pediatrics and Obstetrics.

New methods to support lifelong continuing education in healthcare are under development. In 2019, an application for additional training and professional updating was launched and continues to gain members through service subscriptions. It is a proposal for customized learning, with 176 of the most prevalent pathologies, with content prepared by the teaching staff.

POPULATION HEALTH

The initiative that helps teachers teach issues such as hygiene, food, physical activity, the environment and mental health was enhanced in 2020 to guide children and their families regarding preventive care related to Covid-19.

A partnership with the Municipal Department of Education of the city of Itapevi (state of SP), whose pilot project took place in 2019, trained 600 preschool and elementary school teachers, and educators from the *Instituto Cacao Show*, which provides after-school activities for different age groups. In partnership with Gaia+, Einstein helped create text and video content on mental health to support teachers in addressing the topic with children. On YouTube, videos with relaxation activities and other practices registered over 10,000 views in 2020.

In 2021, the program will be incorporated into the teaching material of the São Paulo state education network, through an agreement with the state government, and will reach 1.5 million students. An agreement was also signed with the city of Cotia (state of SP) to incorporate the training in its education network. The program is equivalent to more than 1,000 hours of training.



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# HEALTHCARE CONSULTANCY & MANAGEMENT

Healthcare systems and services are increasingly challenged to improve their performance in aspects such as access, effectiveness, experience and sustainability, distinguish themselves strategically and generate value for all stakeholders. To support this evolution, Einstein shares its knowledge and experience through healthcare consulting projects in the private and public spheres in Brazil and Latin America.

In 2020, consulting services crossed the borders of the healthcare system and reached different sectors of the economy, such as education, food, air transport, automotive, airport, leisure, petrochemicals, pharmaceuticals, condominiums and corporate offices, among others. With customized projects, Einstein drew up conduct protocols, trained professionals and monitored their application.

The work mobilized a team of sanitary doctors, infectious diseases and crisis specialists, nurses, pharmacists, administrators and engineers, in a coordinated effort of experiences and qualifications. The objective is to support health organizations, companies and industries in promoting health, guaranteeing the safety of people and environments and in containing the contagion by the new coronavirus, to allow the continuation or safe return to work.

At the beginning of the pandemic, which was characterized by a lot of insecurity and misinformation, this action was essential to prevent and contain outbreaks of the disease in essential sectors, which did not paralyze its operations. In an evolutionary process, companies extended the services with a focus on the safety of customers, employees and third-party workers, whether in the performance of in-person activities or in planning their resumption. The training of the organizations' healthcare teams reinforced the local care measures. Einstein continues to monitor these actions, verifying the implementation and maintenance of the protocols and analyzing the results. The plan is to continue with monitoring until the end of this health emergency.

## DIFFERENT ACTION FRONTS

The schools were the target of specific actions, with the definition of safety protocols for in-person activities and guidance activities and clarification of doubts for teachers, employees, students and their families. 145 school units were served and reached over 150 thousand people.

On another front, Einstein supported the Municipal Health Department of Parauapebas (state of Pará), in the planning and preparation of healthcare facilities to respond to care demands. The work was

### CONSULTING IN NUMBERS – 2020

**80 projects carried out**  
(76 of them in Brazil)

Main projects:

- Healthcare sector
- Healthcare providers
- State Health Departments
- Schools
- Organizations from different sectors, such as oil, mining, food, automobile, hospitality, aviation and retail

carried out in partnership with Vale S.A. and focused on ensuring the population's equitable access to services, promoting the safety of patients and professionals, and improving quality and efficiency. The region is home to around 250,000 residents.

It was also up to Einstein to define and implement care protocols and management tools for the municipal field hospital installed in Parauabepas to care for Covid-19 cases.

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OPERATIONAL EFFICIENCY FOR SUS

Einstein provided training and support to teams from 153 philanthropic hospitals, selected by the Ministry of Health in 19 Brazilian states, with a focus on increasing management efficiency. The work carried out within the scope of PROADI-SUS in the 2018-2020 triennium involved the transfer of knowledge to local administrations in a replicable process of improving care and administrative processes. The actions enabled an increase in capacity for 23 thousand surgeries and 12 thousand hospitalizations in the period. Efficiency gains in the application of resources are estimated at BRL 38.8 million.

MONITORING APP

To ensure adequate monitoring of the population by the Covid-19 projects in tune with the digitization of services, Einstein developed an application that allows configuring specific profiles and functionalities for students, teachers and employees. The functionality supports the school and its population to control protocols and flows, identify and monitor cases with symptoms of the disease or confirmed and verify the actions to maintain the structure, making monitoring and decision-making by the school and Einstein more agile and assertive.



EINSTEIN QUALITY SEAL

The seal identifies companies and schools that have protocols of conduct and monitoring carried out by Einstein.

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# SCIENTIFIC CONTRIBUTION

THE EXPERIENCE AND QUALITY OF SCIENTIFIC RESEARCH AT EINSTEIN WERE FUNDAMENTAL TOOLS FOR FIGHTING THE NEW CORONAVIRUS INSIDE AND OUTSIDE EINSTEIN.

Generating scientific knowledge through rigorous methods of quality and integrity in conducting research is a routine part of life at Einstein. Founded over two decades ago, the *Instituto Israelita de Ensino e Pesquisa - IIEP* (Education and Research program) expands the frontiers of knowledge, supports evidence-based medicine, generates innovation and drives the pursuit of excellence in healthcare. This expertise gained even more relevance in 2020, in the fight against the Covid-19 pandemic. In addition to the researchers' power of response to healthcare emergencies, Einstein's consistent history in the area gave impetus to several actions to support the fight against the disease, such as the dissemination of knowledge and intelligent management to guarantee the supply of the necessary inputs for studies.

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RESEARCH AND INNOVATION

Throughout the year, Einstein obtained approval from Conselho Nacional de Ética - CONEP (National Ethics Council) to carry out 157 research projects related to different aspects of combating the new coronavirus, such as new healthcare technologies, drug efficacy and new therapies and diagnostic methods, among others. Of these, 41 were completed in 2020 and 116 are still in progress, such as the study on the use of plasma from those convalescing from the disease for treating hospitalized patients and the collaborative actions of “Coalizão COVID Brasil” (Brazil COVID Coalition), coordinated by Einstein’s Academic Research Organization (ARO), which analyze the effectiveness of different therapies against the infection (*see page 67*).

Faced with a little-known disease, Einstein employed efforts to select and disseminate quality information to healthcare professionals and the community. About 128,000 scientific articles from 123 international platforms and other informational resources were evaluated by the Intelligence Center, a task force created to check, analyze, interpret and disseminate information.

The CovidLog platform ([covidlog.com.br](https://covidlog.com.br)) was another initiative launched by Einstein as a network for exchanging knowledge and keeping doctors and healthcare professionals updated about the disease.



SCIENTIFIC INTEGRITY

Einstein is the only organization in Latin America to have an Office of Scientific Integrity, which independently audits research projects to ensure that they are conducted in a responsible, efficient, ethical and honest manner. The structure is also responsible for verifying cases reported in the Whistleblower Channel.

In 2020, 88 audits were carried out.

Focusing on the pandemic, the Office also carried out a preliminary analysis of aspects related to ethics in 208 projects in which Einstein was involved in, acting as coordinator, participant or co-participant.

SCIENTIFIC PRODUCTION

	2017	2018	2019	2020	Δ 2020/2019
<b>Publications</b>					
In indexed journals	717	738	795	883	11%
In journals with impact factor greater than 1 <sup>1</sup>	494	492	535	622	16%
<b>Citations of scientific articles published by Einstein researchers</b>	2.606	3.008	2.326	3.569	53%
<b>Research Projects <sup>2</sup></b>					
Initiated	262	243	243	403	66%
In progress <sup>3</sup>	322	328	217	407	88%
Completed	162	215	194	218	12%
<b>Total projects</b>	<b>746</b>	<b>786</b>	<b>654</b>	<b>1.028</b>	<b>57%</b>

<sup>1</sup> The impact factor represents the average number of citations, in scientific papers or articles, of content published by a journal. The calculation is made annually based on publications from the two previous years, following the formula: total citations obtained in the year divided by the total number of articles published by the journal in the two previous years.

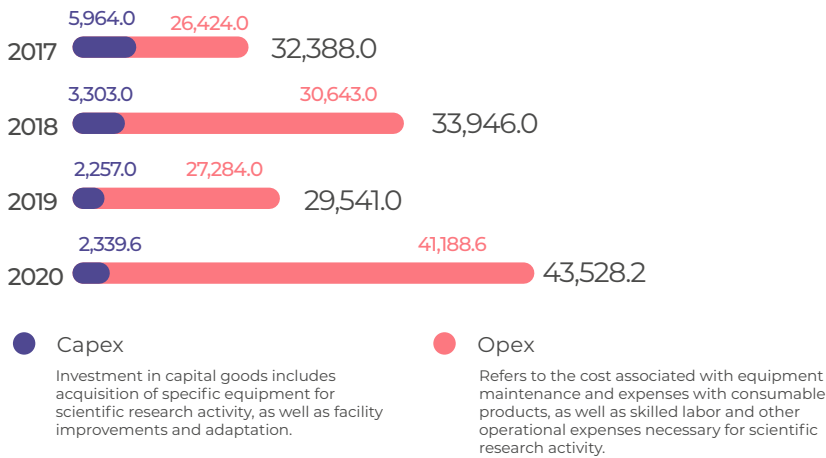
<sup>2</sup> The increase in the number of projects is mainly a reflection of Einstein researchers response to the need of generating new knowledge to face the Covid-19 pandemic.

<sup>3</sup> Started in previous years and still under development.

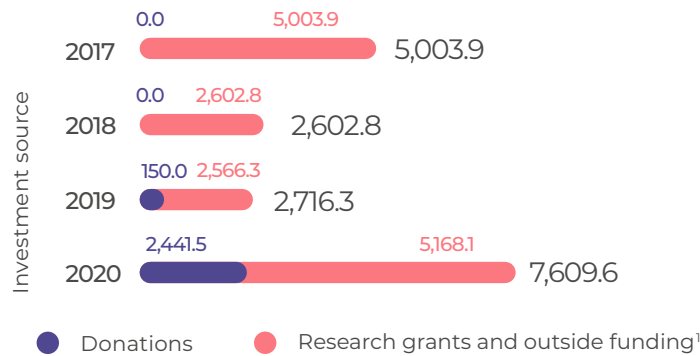
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RESEARCH AND INNOVATION

RESEARCH - EINSTEIN OPERATING AND CAPITAL EXPENSES (BRL million)



RESEARCH - FUND-RAISING of RESOURCES (BRL million)



<sup>1</sup> Refers exclusively to research projects financed by development agencies and/or companies through competitive bids or those submitted to peer review. Does not include clinical studies sponsored by the pharmaceutical industry. Of the total in 2020, 46% (about BRL 3.5 million) were grants and donations for research projects on the treatment and diagnosis of the new coronavirus.



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RESEARCH AND INNOVATION

FIGHTING COVID-19

With clinical research based on the best scientific practices, multicentric and randomized studies, involving collaboration networks and large-scale projects, the Einstein Academic Research Organization (ARO) consolidates its vocation to coordinate the various stages of large-scale studies and add intelligence and executive capacity.

At the beginning of the pandemic, in March 2020, ARO was one of the formulators of the “Coalizão Covid Brasil”, which brought together reference centers and nearly 100 Brazilian hospitals to assess the efficacy and safety of potential therapies for patients with the new coronavirus. At least 11 studies have been or are under development in this network. ARO also joined efforts with international institutions to study different therapies in the treatment of severe infection conditions. All tests are conceived, planned and designed by Einstein’s ARO, responsible for selecting and qualifying participating hospitals, tracking and monitoring data quality, analyzing results and publishing evidence. In addition to expanding scientific knowledge, these studies have direct effects on healthcare management, contributing to the better use of resources and patient safety.

Surveys being carried out by ARO were maintained in 2020, with revised operating procedures and acceleration in the use of digital tools. These are high-impact and long-term researches, which

were in the training stage at the participating centers and also recruiting patients, and these tasks were carried out with the aid of technology. These projects under PROADI-SUS involve between 7,000 and 9,000 patients and are related to hypertension and diabetes,

stroke and myocardial infarction. As a result of this work, ARO was invited to participate in a seminar held by the FDA, the USA drug regulatory agency, which discussed innovative models in clinical research, especially on how technology allows for faster, more efficient and more comprehensive studies.


### RECOGNIZED RESULTS

Three surveys by the “Coalizão COVID Brasil” on the effectiveness of medications in the treatment of hospitalized patients were published in the main scientific journals in the world. The first two studies showed that the drugs (hydroxychloroquine and azithromycin) did not result in clinical improvement. In the third study (with dexamethasone), there was a reduction in the mortality rate and in the use of mechanical ventilation.

1. Use of hydroxychloroquine in hospitalized patients with moderate infection – New England Journal of Medicine.

2. Use of Azithromycin in Critical Inpatients – The Lancet.

3. Use of dexamethasone in patients with severe pulmonary condition – Journal of the American Medical Association (JAMA).



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# INNOVATION

Einstein’s ability to mobilize collaboration in different areas of knowledge – such as biotechnology, digital health and medical devices – in an ecosystem of innovation and entrepreneurship drives the evolution of healthcare.

An example is the portable system for isolation and negative pressure, created in partnership with Enebras, which has become fundamental in the fight against the new coronavirus. The technology prevents air from escaping to other environments and promotes its filtration, reducing the risk of contagion of airborne diseases. More than 300 pieces of equipment were installed in care environments for Covid-19 cases at the Morumbi unit and in the two SUS hospitals operated by Einstein.

*Eretz.bio*, Einstein’s incubator, attracted new partnerships, including large companies such as Renner and Vale, interested in investing in solutions and actions focused on the pandemic. Contamination monitoring systems in the hospital environment, respirators, bed monitoring using artificial intelligence, non-contaminating films or hospital management applications and tools are some of the supported projects. Non-refundable funds raised by startups with support from Eretz.bio exceeded BRL 9 million, an increase of 800% compared to 2019, driven by the increase in public notices and projects to combat Covid-19. This support is especially critical for companies that are still developing and validating

their solutions. The number of incubated projects jumped from 40 to 82. Einstein’s support for startups included investment and minority investment in 23 ventures.

## KNOWLEDGE AND TRAINING

Nearly 80 events were held to generate knowledge and connections, attracting more than 10,000 participants. One of them, the IV International Entrepreneurship and Innovation in Healthcare meeting, discussed trends and innovations related to fighting Covid-19, with more than 30 national and international experts and 3,600 participants. Thematic meetings debated women’s health, pediatrics, sports medicine, hematology, gene therapy, regenerative medicine and innovations in diagnostic medicine. The event was held online and had guests from Israel, the United States and Singapore and more than 3,000 registrations.

The reinforcement of training and the encouragement of a culture of innovation in healthcare will gain more and more relevance inside and outside Einstein. One of the priorities is to ensure that knowledge and encouragement of intrapreneurship is present in the different stages of training of healthcare professionals, in actions coordinated with the Education area.

## RECOGNITION

The *Prêmio Época 360°* award, from *Época Negócios* magazine, named Einstein as the organization of the year in 2020, in addition to being the best in the healthcare area for the third time and a leader in Innovation. The award highlighted its own solutions and partnerships that reflect how the concept of innovation is applied across Einstein. Einstein was also the second most innovative company in the country and the leader in healthcare according to the *Prêmio Valor Inovação* award, from the *Valor Econômico* newspaper.

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RESEARCH AND INNOVATION

INTELLECTUAL PROPERTY

In 2020, Einstein filed two new patent applications: the first genetic test for Covid-19 (see [page 51](#)) and the portable negative pressure device.

There was also an important growth in the revenue raised through partnerships with large companies via the Information Technology Law (Law # 8.248/1991 and Decree # 5.906/2006 to encourage investment in research and development by companies that enjoy tax benefits).

The volume of resources doubled, reaching BRL 12 million with emphasis on alliances for the execution of complex software projects in the healthcare area.

Einstein developed

**64 projects**

in partnership with entrepreneurs, among which were the publication of scientific articles and initiatives with a focus on care or operational activities. Of these, 29 were completed in 2020 and resulted in 11 technological incorporations in Einstein itself. In addition to national startups, there are partnerships with others from seven countries.



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# VOLUNTEERING

VOLUNTEERING HAS REINVENTED ITS WAY OF WORKING TO CARRY ON ASSISTING VULNERABLE COMMUNITIES QUICKLY AND CREATIVELY.

The Einstein Volunteer program has more than 60 years of tradition. It was born with the institution and, year after year, it brings comfort, hope and support to patients and the community. In 2020, in view of the social distancing measures and the social emergency intensified by the pandemic, the work gained new formats, such as fundraising campaigns to meet the basic needs of communities and the use of communication technologies that support the patients served.

The first campaign ensured 50,000 hygiene kits – soap, toothbrush and toothpaste – and masks, distributed by community health agents working in the 13 UBS (Basic Healthcare Units) operated by Einstein. In the second campaign, 24.7 thousand food baskets and 50 thousand cleaning products baskets were distributed, benefiting 10.8 thousand vulnerable families identified by the UBS teams. The third focused on patients hospitalized at the Hospital de Campanha do Pacaembu to whom 1.2 thousand hygiene and clothing kits were destined. 100 kits were also delivered to homeless people in the Jabaquara region, in the Center-South are of São Paulo.



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SOCIAL RESPONSABILITY

2.5 thousand people and 34 companies contributed to the campaigns. In total, BRL 1.9 million were raised in financial resources and the equivalent of BRL 1.3 million in products donated by the companies, such as masks, sanitizing gel, soap and underwear.

The social actions benefited patients treated in public healthcare facilities and financed the improvement of the infrastructure of these units and initiatives carried out within the scope of the Programa Einstein na Comunidade de Paraisópolis (PECP) and in the Residencial Israelita Albert Einstein (RIAE), among others.

The full report of the actions is available at: [https://www.einstein.br/Documentos%20Compartilhados/Voluntariado\\_acoes\\_contra\\_covid19.pdf](https://www.einstein.br/Documentos%20Compartilhados/Voluntariado_acoes_contra_covid19.pdf)

NEW SOLUTIONS

With the support of technology, the volunteers followed up the services virtually at the various units.

In the PECP program, given the difficulty experienced by students to follow the online classes, professionals from the PECP Education Center and volunteers created the Tutoring and Support for School Activities project, an educational teleservice. The initiative ensured support to 250 students with distance and face-to-face service, carried out by appointment and following all security procedures.

At the RIAE residence, the monthly leisure and entertainment schedule was replaced by individual

alternatives. In addition to donating coloring books, magazines, crossword puzzles, painting kits and knitting and crochet threads, tablets and TV sets, the volunteers started holding conversation sessions over the phone. These actions eased the feeling of isolation of the elderly and strengthened the bonds with the volunteers.

An important innovation was *TV Conviver*, an internal channel created by the RIAE team with the support of volunteers, who produced videos to entertain residents and ease the emotional strain caused by the pandemic.

At the Morumbi unit, phone calls and virtual chats with patients from the Rehabilitation, Geriatrics and Oncology Center also came into play. And the entertainment content generated by the teams was broadcast on the internal channel (*TV Einstein*).



In total, the 598 volunteers conducted 78,100 visits throughout the year, including face-to-face and distance activities.

CARING FOR THE TEAM

To minimize the pandemic anguish and the void caused by the suspension of regular activities among volunteers, the members of the team itself organized online chats or dedicated their professional experience to offering structured support and self-awareness sessions. Contacts were made in a virtual environment in individual and group formats.

Alignment and planning meetings and team engagement and training activities also migrated to a digital format.

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# DONATIONS

With a specific campaign aimed at fighting the pandemic, carried out from March to December, Einstein received financial donations from 448 individuals and companies. The Einstein Fund against Covid raised BRL 48.5 million, which were fully allocated to support SUS.

There were three action paths followed:

- Purchase of fans, parametric monitors, beds, stretchers, ultrasound equipment, X-rays, sanitizing gel, gloves, masks and generators, among other equipment and medical supplies to public units in São Paulo, Amazonas, Ceará and Pará;
- Purchase of hospital equipment and furniture to expand the availability of ward and ICU beds in the city of São Paulo; and
- Financing of clinical studies and research on disease treatments.

In addition to mediating the collection and managing the application of these resources, Einstein also allocated its own resources to strengthen the fight against the pandemic. BRL 36.1 million were donated in personal protective equipment and other supplies to health professionals in 130 public and philanthropic hospitals in different regions of the country and to five Special Indigenous Sanitary Districts in the state of Mato Grosso.

## DONATIONS PORTAL

In 2020, the Einstein Donations Portal received BRL 25.5 million in donations from individuals and companies to finance social projects carried out by Einstein. Created in 2019, the portal aims to mobilize society around initiatives that benefit the Brazilian population. The process is simple: just access the website (doacao.einstein.br), choose the project you want to support, and make a donation, which can range from BRL 50 to BRL 50,000.

Among the projects supported in 2020 are those developed by the Department of Volunteers and AMIGO, and the financing of scholarships for Medical undergraduate students at Einstein.

### SHARED KNOWLEDGE

Through the “Iniciativa Banco Itaú Todos pela Saúde” initiative, which has the support of Einstein, the protocols adopted by the RIAE served as a reference for more than 600 institutions in the country. In addition to sharing the protocols, the Einstein team also visited four institutions and made specific recommendations for different profiles of elderly housing units.

# PHILANTHROPY

## RESIDENCIAL ISRAELITA ALBERT EINSTEIN - RIAE (ALBERT EINSTEIN ISRAELI RESIDENCE)

Since 2003, the RIAE has provided care centered on the elderly in assisted living and with the support of a specialized multidisciplinary team. In 2020, there were 115 residents. After social screening, 93 received a subsidy or free residence, healthcare and materials and medicines.

The residents are part of a group that is extremely vulnerable to Covid-19. With the pandemic, mortality in long-term care facilities for the elderly was 30%, reaching 44% in the United States. At the RIAE, with preventive actions systematized starting in March, the early identification of cases and isolation measures, it was possible to reduce the impacts, and the rate was 3.3%.

The results made it possible to resume family visits in July, three months before the rest of the city, alleviating the suffering of residents and families. With the actions, residents’ satisfaction increased from 82.5% in 2019 to 84.5% in 2020.

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PROGRAMA EINSTEIN NA COMUNIDADE DE PARAISÓPOLIS (EINSTEIN PROGRAM IN THE PARAISÓPOLIS COMMUNITY)

The São Paulo district of Paraisópolis, characterized by infrastructure and housing vulnerabilities, hosts one of the most important actions of Einstein's social commitment, the o Programa Einstein na Comunidade de Paraisópolis (PECP). The work of care and development of the local community is carried out by the Einstein's multidisciplinary team and by the Einstein Volunteer program, which directs professional training activities, arts and communication workshops, sports and infrastructure improvements.

In 2020, the PECP's operating strategy underwent adjustments with the aim of supporting the community in fighting the pandemic. Four action fronts were defined:

- **Confronting vulnerabilities:** distribution of donations collected by the Volunteer Service, a service channel for cases of domestic violence;
- **Support for education:** support for students in online and face -to- face formats (see [page 71](#));
- **Emotional health:** psychological telecare, live streams and guidance content conducted by the multidisciplinary team and PECP volunteers; and

- **Income generation:** distance learning courses (EAD in Portuguese) and, as of October, on-site courses in the areas of beauty, nutrition, sewing, elderly caregivers, IT, among others.

PROGRAMA EINSTEIN NA COMUNIDADE JUDAICA - PECJ) (EINSTEIN PROGRAM IN THE JEWISH COMMUNITY)

With the PECJ, carried out in partnership with *União Brasileira Israelita de Bem-Estar Social* - UNIBES (Brazilian Israeli Social Welfare Union), Einstein offers hospital medical care to elderly people in vulnerable conditions. In 2020, 890 beneficiaries were assisted and the program incorporated specific actions aimed at the pandemic, such as guidance notices and the offer of telemedicine services.

DONATIONS

To support the work of non-profit entities, Einstein donates financial resources, materials and equipment. In 2020, donations totaled BRL 2.8 million and benefited five organizations: *Hospital das Clínicas da Faculdade de Medicina da Universidade de São Paulo* (HCFMUSP), *Hospital Municipal M'Boi Mirim/Centro de Estudos e Pesquisas Dr. João Amorim* (CEJAM), *Hospital de Transplantes do Estado de São Paulo Euryclides de Jesus Zerbini/Associação Paulista para o Desenvolvimento da Medicina* (SPDM), *Instituto de Ciências Biomédicas da USP* (ICB-USP) and *UNIBES*.

PECP – CENTER FOR HEALTH PROMOTION AND CARE

	2017	2018	2019	2020	Δ 2020/2019
Healthcare area	38,386	7,358	10,967	6,084	-44.5%
Social area	18,733	20,038	21,238	2,981	-86.0%
Education area	38,687	41,859	46,667	8,966	-80.8%
Art and Communication area	41,166	39,470	37,034	15,633	-57.8%
Sports area	55,817	42,200	40,922	12,169	-70.3%
Training area <sup>1</sup>	NA	NA	NA	6,797	NA
Community coordination <sup>2</sup>	NA	NA	NA	27,405	NA
<b>Total</b>	<b>192,789</b>	<b>150,925</b>	<b>156,828</b>	<b>80,035</b>	<b>-49.0%</b>

NA: not applicable.  
<sup>1</sup> Consolidates professional training and income generation services, which until 2019 were reported within the social core.  
<sup>2</sup> In 2020, community actions will be reported on a consolidated basis, regardless of the nucleus to which they refer.

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INVESTMENTS AND PARTNERSHIPS DRIVE KNOWLEDGE PRODUCTION AND EARLY CANCER DETECTION INITIATIVES.

# AMIGO

With resources from donations, Amigos da Oncologia e da Hematologia - AMIGO (Friends of Oncology and Hematology) supported 21 projects in 2020, with BRL 940,000. The accumulated amount, since 2012, when AMIGO was created, is BRL 5.2 million.

AMIGO and the NGO named Saúde e Alegria no Sertões (SAS) will provide gynecological and oncodermatological care in itinerant offices and teleservice booths along the Sertões Route (formerly Rally dos Sertões). The action aims to detect early cases of cervical cancer and skin cancer. The expedition began in 2020 and will be completed in 2021 and should serve 2,500 people. This is

the third time that AMIGO has supported the expedition. In the 2019 edition, 65 cases of early-stage cancer were detected, increasing the chances of a cure.

At the end of the year, a partnership was signed with the International Agency for Research on Cancer (IARC), from the World Health Organization (WHO), with the objective of creating the Latin American Cancer Prevention Code in 2023. The document will bring together guidelines adjusted to the Latin American reality, which may guide public health policies. The project has the participation of the *Instituto Nacional do Câncer - INCA* (National Cancer Institute), an auxiliary agency of the Ministry of Health.

## KNOWLEDGE PRODUCTION – 2020

19  
RESEARCH PROJECTS  
in progress

6  
ARTICLES  
published in  
scientific journals  
with an impact  
factor greater  
than 1



COVID-19 CAMPAIGN  
2,000 liters  
of sanitizing gel and more than  
2,000 pieces of clothing collected  
and transferred to the Hospital  
Municipal Vila Santa Catarina  
– Dr. Gilson de Cássia Marques  
de Carvalho, which provides  
oncology care to SUS patients

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# FINANCIAL PERFORMANCE

MANAGEMENT AND PLANNING MEASURES SEEK TO MINIMIZE THE NEGATIVE EFFECTS OF THE PANDEMIC AND PREPARE FOR THE RESUMPTION OF ACTIVITIES.

The new coronavirus pandemic affected Einstein's revenues, with the reduction of patients and the suspension of elective procedures, and increased costs, reflecting the new demands. During the period of falling revenue, the salaries of leadership and professionals who were not part of the assistance fronts were reduced, and the terms and conditions were renegotiated with practically all suppliers.

To preserve cash flow, Einstein obtained long-term financing in the amount of BRL 200 million from the Inter-American Development Bank (IDB). This was the first IDB loan to a private hospital in Brazil.



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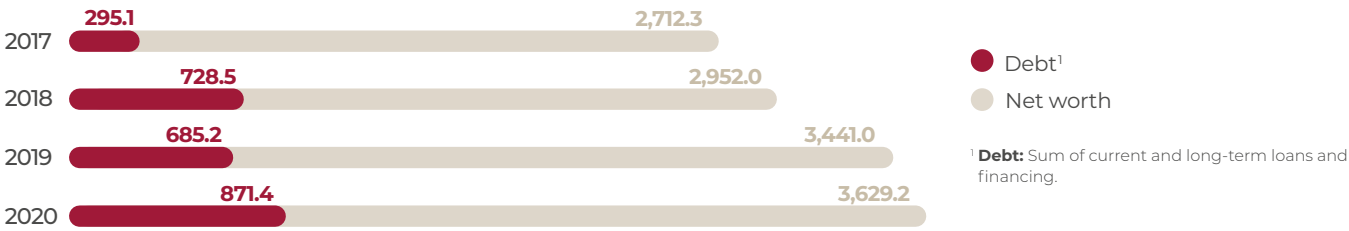
EXCELLENCE IN MANAGEMENT

To mitigate the impacts of the pandemic, a plan to resume activities and a major effort to reduce costs and expenses were employed. The annual net revenue increased by 2.8% compared to 2019 and reached BRL 3,253.1 million. Operating costs and expenses totaled BRL 3,073.2 million, an increase of 13.8% compared to 2019, mainly impacted by the fight against the pandemic – BRL 113.1 million referring to the increase in the consumption of non-refundable materials and BRL 36.1 million input donations to philanthropic hospitals and the SUS.

The net operating result was BRL 179.9 million and the surplus for the year was BRL 182.4 million, a reduction of 61.3% and 62.7%, respectively, in relation to the previous year. The surplus before interest, taxes, depreciation and amortization (SBITDA) was BRL 447.0 million, 35.9% below the recorded amount in 2019.

Faced with the adverse scenario, Einstein rescheduled around 20% of the planned capital expenditures for the year. BRL 519.5 million were invested in the expansion and updating of assets, highlighting the new *Centro de Ensino e Pesquisa Albert Einstein – Campus Cecília e Abram Szajman* (Albert Einstein Teaching and Research Center), which represented almost 47% of the total. Investments in information technology and automation represented around 20% of the total.

TOTAL FINANCING (BRL MILLION)



FINANCIAL COMMITMENTS ADOPTED

ASPECT	RESTRICTION	CALCULATION	LIMIT	2017	2018	2019	2020
Cash and financial investments	Minimum availability must be 15% of annual revenue	Cash and investments/ net revenue	≥ 15%	28.1%	44.6%	45.8%	41.1%
Indebtedness	Net debt cannot exceed 2.0 times the value of earnings before interest, depreciation and amortization	Net debt/SBITDA	≤ 2.0	-1.3	-1.4	-0.9	-1.0
Leverage	The maximum share of third-party resources is limited to 30% of total assets	Onerous indebtedness/ Total assets	≤ 30%	8.3%	16.8%	16.4%	16.1%

VALUE ADDED STATEMENTS (BRL MILLION)

ASPECT	2017	2018	2019	2020	Δ 2020/2019
<b>Direct economic value generated</b>	<b>2,779,217</b>	<b>2,882,047</b>	<b>3,212,571</b>	<b>3,277,972</b>	<b>2.0%</b>
Revenue <sup>1</sup>	2,779,217	2,882,047	3,212,571	3,277,972	13.7%
<b>Economic value distributed</b>	<b>2,523,725</b>	<b>2,652,501</b>	<b>2,723,769</b>	<b>3,095,515</b>	<b>16.7%</b>
Operating costs <sup>2</sup>	916,067	1,011,265	1,049,445	1,381,743	36.6%
Employee salaries and benefits <sup>2</sup>	1,265,243	1,324,170	1,364,572	1,409,974	6.5%
Support Program for the Institutional Development of the Public Healthcare System - (PROADI-SUS)	243,122	233,577	215,346	216,248	-7.4%
Community investments <sup>3</sup>	54,014	48,923	47,482	43,618	-10.8%
Financial commitments	45,279	34,567	46,925	43,932	27.1%
<b>Accumulated economic value</b>	<b>255,492</b>	<b>229,546</b>	<b>488,801</b>	<b>182,457</b>	<b>-20.5%</b>

<sup>1</sup> Sum of net income and financial income, minus the provision for doubtful accounts.  
<sup>2</sup> The costs of primary care services provided by Einstein and reimbursed by the City of São Paulo government are distributed among operating costs and employee salaries and benefits.  
<sup>3</sup> Spending on Programa Einstein na Comunidade Judaica, Residencial Israelita Albert Einstein and donations to social assistance institutions.

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INCOME STATEMENTS (BRL MILLION)

ASPECT	2017	2018	2019	2020	Δ 2020/2019
1. Net operating revenue	2,726,593	2,825,735	3,164,615	3,253,143	2.8%
2. Operating costs and expenses	2,498,434	2,630,110	2,699,288	3,073,221	13.9%
3. Operating result (1-2)	228,159	195,625	465,327	179,923	-61.3%
4. Total financial result	27,333	44,529	23,474	2,534	-89.2%
5. Yearly profit (3+4)	255,492	240,154	488,801	182,457	-62.7%
6. Earnings before interest, taxes, depreciation and amortization (EBITDA)	376,115	366,809	697,063	447,035	-35.9%

BALANCE SHEET (BRL MILLION)

ASPECT	2017	2018	2019	2020	Δ 2020/2019
Total current assets	1,245,135	1,240,016	1,584,097	1,586,730	0.2%
Fixed assets	1,802,892	2,051,652	2,330,271	2,558,643	9.8%
Intangible	233,510	256,788	220,864	299,444	35.6%
Other non-current assets	268.852	784,208	924,616	1,121,159	21.3%
Total non-current assets	2,305,254	3,092,648	3,475,751	3,979,247	14.5%
<b>Total assets</b>	<b>3,550,389</b>	<b>4,332,664</b>	<b>5,059,848</b>	<b>5,565,977</b>	<b>10.0%</b>
Current liabilities	526,740	550,032	721,095	822,363	14.0%
Non-current liabilities	311,333	830,162	897,483	1,114,445	24.2%
Social assets	2,712,316	2,952,470	3,441,271	3,629,169	5.5%
<b>Total liabilities and social assets</b>	<b>3,550,389</b>	<b>4,332,664</b>	<b>5,059,848</b>	<b>5,565,977</b>	<b>10.0%</b>

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FINANCIAL INDICATORS (BRL MILLION)

	2017	2018	2019	2020	Δ 2020/2019
Surplus before interest, taxes, depreciation and amortization (SBITDA)	376,115	366,809	697,063	447,035	-35.9%
Capital expenditure	363,694	444,436	453,098	519,532	14.7%
Cash and financial investments	766,602	1,259,040	1,450,464	1,317,488	-9.2%
Working capital	159,776	123,390	102,569	346,058	237.4%
Total operational capital employed	2,196,178	2,431,830	2,653,704	3,204,145	20.7%

CAPITAL EXPENDITURES (BRL MILLION)

	2017	2018	2019	2020	Δ 2020/2019
Land and Buildings	126,079	213,608	275,104	243,358	-12%
Construction/Improvements/Renovations	107,092	205,430	230,399	227,858	-1%
Land	18,987	8,178	44,705	15,500	-65%
Technology and Automation	109,980	136,943	84,952	177,123	108%
Systems and Applications	54,396	74,268	49,412	77,360	57%
Facilities and Telephony	30,111	22,340	17,374	73,109	321%
Computer equipment	25,474	40,336	18,166	26,655	47%
Medical equipment, instruments and devices	82,379	54,731	68,471	60,087	-12%
Machines and Equipment	36,929	27,268	14,088	13,086	-7%
Furniture and Utensils	8,157	11,926	4,977	18,686	275%
Others	170	0	5,487	7,192 <sup>1</sup>	31%
<b>Total</b>	<b>363,694</b>	<b>444,477</b>	<b>453,079</b>	<b>519,532</b>	<b>15%</b>

<sup>1</sup> Corresponds to the portion of interest from Certificados de Recebíveis Imobiliários - CRIs (Real Estate Receivables Certificate) from the Teaching and Research Center.

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# ETHICAL PERFORMANCE

THE IMPROVEMENT OF CONTROLS IS SUPPORTED BY COMPLIANCE ACTIONS, RISK MANAGEMENT, AUDITING AND MONITORING.

Ethics and Compliance Program aims to ensure that Einstein is diligent and vigilant in complying with the law, organizational values and the highest ethical standards in order to ensure a good environment of internal controls and adequate risk management. The program also reinforces the organization’s commitment to social responsibility and sustainable development. (More details on the website: <https://www.einstein.br/sobre-einstein/programa-compliance>).

The program is constantly evolving. In 2020, one of the focuses was employee training.

The institutional training track was reinforced with content on corruption, conflicts of interest, donations and sponsorships, and a new course was created, in an innovative format. Through an interactive video class, employees are invited to make decisions in different situations and learn, in practice, how to position themselves in the face of ethical dilemmas.

During the year, 91% of employees participated in training, and communications on the subject reached 72% of suppliers. All Einstein units underwent corruption risk assessment. No cases of corruption were registered.

A short distance learning course was developed aimed at the outside public, with the training of 129 people, and the postgraduate course in ethics and compliance was continued, with the graduation of 19 students. In 2021, the course will also be held in Belo Horizonte (state of MG).

## RISK MAP

In view of the pandemic, the update of the risk map established 30 priority categories; the new scenario directly impacted 21 of them. The total of risks considered high increased by 33% compared to 2019. The assessment considered the real and potential impacts of the health emergency on processes and activities, such as the purchase of materials, medicine and equipment, patient safety, employee health and the financial context. All prioritized risks have a mitigation plan.

### TRANSPARENCY AND INTEGRITY

To support the fight against the Covid-19 pandemic, Einstein donated medical equipment and materials to healthcare institutions and communities.

Using its own resources and non-financial donations received, it supported more than 130 public and philanthropic hospitals in several states and five *Distritos Sanitários Especiais Indígenas* - DSEI (Special Indigenous Health Districts) with personal protective equipment and sanitizing gel, totaling BRL 36.1 million. Another BRL 48.5 million raised via the Einstein Fund against Covid, were fully allocated to support the SUS system.

In line with Einstein’s Institutional Donation Policy, the entire process of receiving and disbursement of the donations was subject to specific controls and was audited by an independent company. All 218 benefited entities underwent reputational due diligence. The same process was applied to 210 potential donors. Individuals went through the evaluation to donate over BRL 5,000.00 and companies, from BRL 10,000.00 on. All receipts and transfers were registered and donors received a detailed rendering of accounts on the application of resources.

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COMPLAINTS CHANNEL

In 2020, the Complaints Channel supported the identification and treatment of suspected irregularities and fraud in activities related to the pandemic, in addition to continuing to receive other types of complaints. Therefore, the volume of calls increased 47% compared to 2019, and totaled 261 reports received. Of this total, 27 (10.5%) were related to the pandemic, such as fake news about treatments offered and the level of occupation of beds in the hospital, attempts by third parties to request household collections, falsification of medical orders for RT-PCR exams for detection of the disease, among others.

AUDIT

As part of the ongoing audit and monitoring process, 12 internal audits were carried out, 11 audit indicators were monitored and there were 4 follow-up rounds to validate the action plans arising from the audits. Among the audits carried out, those related to purchases of supplies and equipment to meet health emergencies, construction and engineering management, accounts receivable and provision for doubtful accounts in the education area, among others, stand out.

SUSTAINABILITY

DECISION-MAKING AT EINSTEIN CONSIDERS, IN AN INTEGRATED MANNER, THE ENVIRONMENTAL, SOCIAL AND GOVERNANCE DIMENSIONS OF THE OPERATION.

Einstein’s Sustainability Master Plan brings together the guidelines for generating shared value with the different stakeholders and serves as the basis for projects and initiatives put into practice on a daily basis. The work is based on an ESG (acronym for Environmental, Social and Governance) approach and is based on the Sustainable Development Goals (SDGs), a global development agenda defined by the United Nations (UN), with concrete goals to be achieved by 2030 based on the commitment and work of governments, institutions, companies and society.

Of the 17 SDGs on the agenda, Einstein selected 11 for priority action and seeks to direct its efforts to achieve the related goals. Each prioritized SDG has an established sponsor, projects and advancement

initiatives. In 2020, an external audit was carried out to assess the maturity level of each prioritized SDG. The actions carried out focusing on SDGs 4 (Quality education) and 6 (Clean water and Sanitation) were classified as stage 4 on a maturity scale ranging from 1 to 5. In SDG 7 (Affordable and Clean Energy), the level was 3, and in SDG 8 (Decent work and Economic growth) the assessment indicated a maturity level of 2. The other prioritized SDGs are in stage 1.

The diagnosis will drive action plans starting in 2021. For each plan, a top leadership sponsor was designated, who will be responsible for coordinating actions so that the organization can reach maturity level 5 in managing all prioritized SDGs by 2025.

For progress monitoring, Einstein uses a set of sustainability indicators, which includes social and environmental aspects.

SDG’S PRIORITIZED BY EINSTEIN



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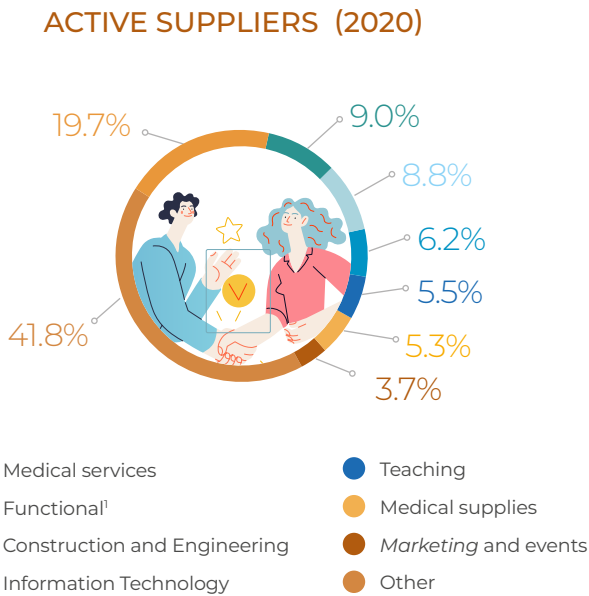


# SUPPLIERS

THE SUPPLY CHAIN IS EINSTEIN’S ALLY  
IN ITS COMMITMENT TO QUALITY, SAFETY  
AND GENERATION OF SHARED VALUE.

In its relationship with suppliers, Einstein promotes good social and environmental practices and seeks to identify opportunities for sustainability initiative partnerships. In 2020, this effort resulted in a partnership with Janssen, the pharmaceutical arm of Johnson & Johnson, to eliminate the disposal of medicine packages, reducing the consumption of paper, plastic and styrofoam. Encouraged by Einstein, the pharmaceutical company developed a returnable packaging prototype that meets all safety requirements.

The reverse logistics system was tested over five months on specific drug lines, with good performance even on drugs sensitive to temperature variations. As of 2021, the system will become the standard in the pharmaceutical supply to Einstein, avoiding the annual emission of approximately 650 kg of CO2 from waste disposal and should be expanded to other healthcare organizations.



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EXCELLENCE IN MANAGEMENT

RISK ASSESSMENT

Einstein uses an automated tool to assess the risks of its suppliers. In 2020, two pilot projects were carried out using different indicators to analyze and improve the classification parameters in six degrees of criticality. Of the 5,800 suppliers evaluated, 245 were classified as minimal risk, 45.2% low, and 6.1% medium, totaling 75.8%. The remaining almost 25% were classified in the three highest levels: 19.9% high, 2.6% critical and 1.7% extreme and will be the target of specific actions and improvement plans from 2021, under penalty of having the sale of products and services to Einstein reduced. The classification continues to be improved.

Audits carried out in purchasing processes during the pandemic provided feedback into the due diligence process, allowing for the inclusion of financial criteria, in addition to reputational criteria, which were already considered in the registration of new suppliers.

Focused on the identification and mitigation of environmental impacts in the chain, Einstein carries out risk assessment in all service providers for the collection, transport and final destination of waste, passenger transport, cargo, biological and chartered products, textile products, laundries, pest control and water, waste and effluent analysis laboratories. The annual audit plan covered eight companies, with seven action and improvement plans being carried out.

Among strategic suppliers, Einstein promotes self-assessment on labor, social, environmental and legal issues. The process has taken place since 2014 and is voluntary. In 2020, 315 companies participated. Of this total, 48% were classified as highly compliant to the practices expected by Einstein, 33% as moderately compliant, and 19% received the classification of low compliance and will participate in improvement processes in 2021.



HEALTH EMERGENCY

The responsibility for managing stocks, anticipating demands and the partnership relationship with suppliers were essential to keep Einstein stocked with supplies and equipment to meet the Covid-19 pandemic.

In negotiation with partners, it was possible to secure the necessary purchases and previously identify situations in which the usual suppliers would not be sufficient to meet the demand.

Internally, the technology supported the supply activities with a planning system for materials, which runs on a digital platform and automated order processing.

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# CONTINUOUS IMPROVEMENT PROCESS

THE OPERATIONAL EXCELLENCE PROGRAM STRENGTHENS THE CULTURE OF CONTINUOUS IMPROVEMENT AND PROCESS MANAGEMENT.

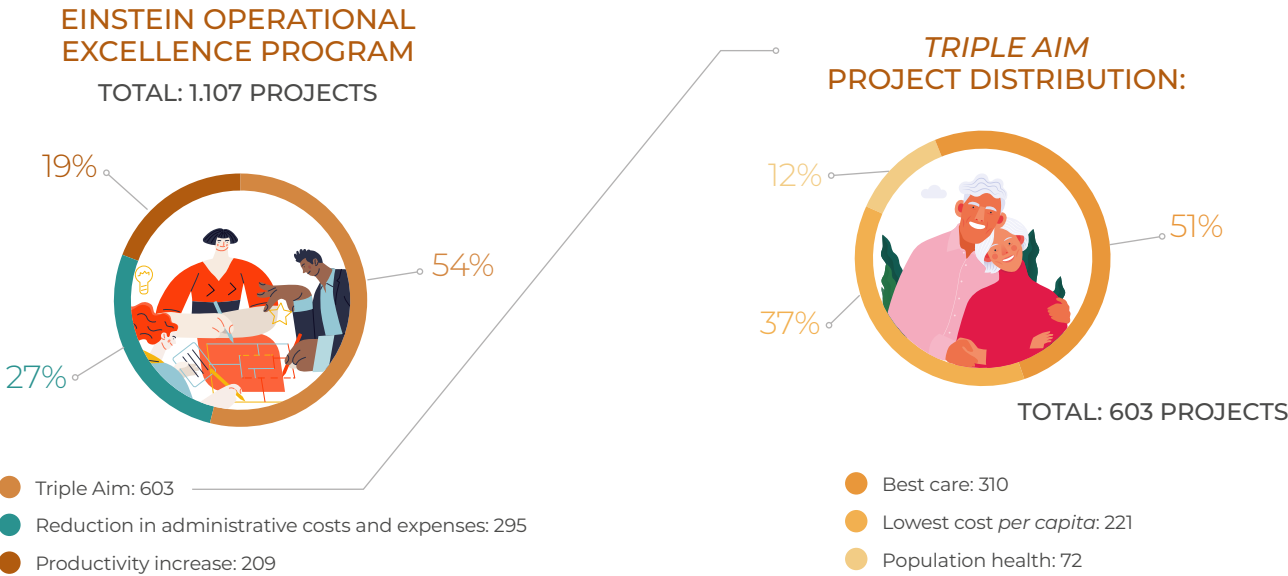
In a systematic and coordinated process, the different areas of Einstein carry out the continuous improvement of processes with a focus on excellence in patient care and increasing operational efficiency. This uses the Lean Six Sigma methodology to reduce waste and process variability. The projects carried

out involve doctors, nurses, physical therapists, pharmacists, engineers, administrators and hoteliers, among other professionals. Since its creation in 2008, the Program has trained 780 project leaders and carried out 1,107 projects. More than half are directly aligned with the Triple Aim.

Continuous process improvement initiatives translate into increased quality and safety and reduced waste. In 2020, for example, the review of the process for requesting, delivering and using orthotics, prostheses and special materials (OPME, acronym in Portuguese) eliminated adverse events and raised the level of service to 98%. Another project involved the modeling and optimization of processes and resources for performing RT-PCR exams and home services from “Einstein até Você”.

The area also led strategic transversal projects such as the “Gestão de Continuidade das Atividades” (Business Continuity Management) and also the “Gestão de Eficiência Operacional de Pessoas e Equipamentos” (Operational Efficiency Management of People and Equipment).

In the two public hospitals operated by Einstein, Hospital Municipal M’Boi Mirim – Dr. Moysés Deutsch and Hospital Municipal Vila Santa Catarina – Dr. Gilson de Cássia Marques de Carvalho, a project to standardize materials and medicine identified opportunities to reduce costs and improve the negotiation process with suppliers.



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# CERTIFICATIONS AND ACCREDITATIONS

EINSTEIN'S SERVICES AND CONTROL PROCESSES ARE ALIGNED WITH EXTERNAL REFERENCE STANDARDS AND NORMS. THE MAIN ONES ARE HIGHLIGHTED BELOW.



**Association for the Accreditation of Human Research Protection Program Inc (AAHRPP):** attests to the application of best practices in human research.

**American Association of Blood Banks (AABB):** attests to the quality and safety of transfusion and cell therapy activities in the Department of Hemotherapy and Cell Therapy.

**American College of Radiology (ACR):** Accredits the imaging service of diagnostic medicine with a focus on equipment, professionals, treatment plans, registration 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 Clinical Pathology Laboratory's histocompatibility and immunogenetics process.

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

**College of American Pathologists (CAP):** Accredits patient safety actions and laboratory quality requirements.

**Foundation for the Accreditation of Cellular Therapy (FACT) TMO and Cord:** attests to good practices in hemotherapy and bone marrow transplant services and in the collection, processing and storage activities of umbilical cord blood units for transplantation.

**Hospital Amigo do Idoso (Elderly Friendly Hospital):** recognition granted by the São Paulo State Department of Health to the Morumbi unit in the Full category due to initiatives to adapt the infrastructure, train professionals and families, community engagement and encourage prevention in the health of the elderly. *Hospital Municipal Vila Santa Catarina – Dr. Gilson de Cássia Marques de Carvalho* has the “Beginner” seal, which represents the first stage of recognition.

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EXCELLENCE IN MANAGEMENT

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

**ISO 14001/2015:** certifies adherence to the organization’s environmental management standards. The Morumbi, Jardins, Ibirapuera, Chácara Klabin and Alphaville units, Parque da Cidade Einstein, Alto de Pinheiros, Anália Franco and Parque Ibirapuera clinics, Residencial Israelita Albert Einstein (RIAE) and the Núcleo Técnico Operacional (NTO) are currently certified.

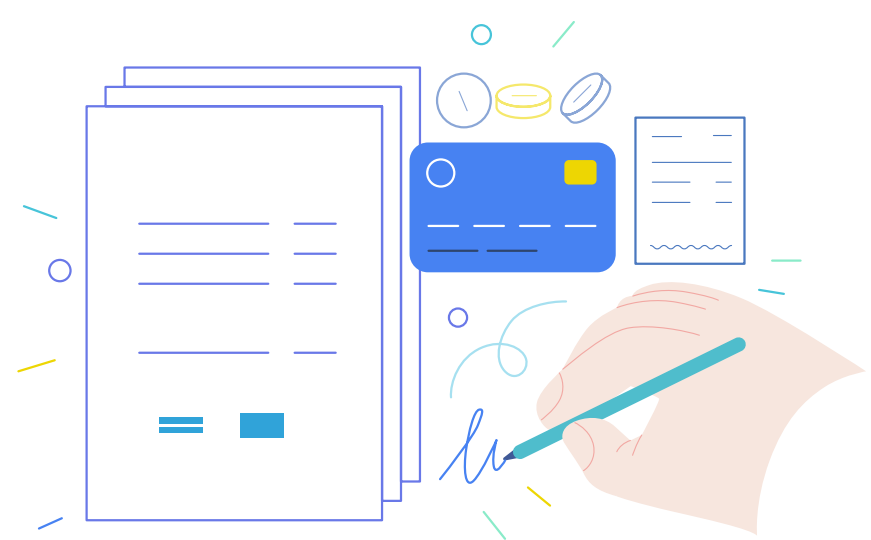
**ISO 50001/2018:** certifies that the energy management systems of the Morumbi, Jardins, Perdizes and Ibirapuera units are in keeping with the standards defined by the norm.

**Joint Commission International (JCI):** believes that quality and safety processes continually improve healthcare, encouraging safe and effective care of the highest quality.

**ONA Level 3:** granted by the Organização Nacional de Acreditação (ONA) ao *Hospital Municipal M’Boi Mirim*, *Hospital Municipal Hospital – Dr. Moysés Deutsch* and the *Hospital Municipal Vila Santa Catarina – Dr. Gilson de Cássia Marques de Carvalho* in recognition of excellence in management and meeting the criteria of safety, quality and credibility of the healthcare services provided.

**Planetree:** attests to the support for the operationalization of the concepts of patient and family engagement, with practices, methods and approaches that make up the culture of person-centered care. The Morumbi unit is certified with the Gold Credential.

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



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# CARING FOR THE CAREGIVER

MEETING THE POPULATION'S HEALTH NEEDS AND EMPLOYEE SAFETY WERE AT THE CORE OF PEOPLE MANAGEMENT.

The Covid-19 pandemic represented an extra challenge for people management at Einstein, with the need to increase and relocate internal staff, changes in work routines, training and engagement, health and safety care and actions directly linked to the disease, such as the management of transmission risks, care for those affected and the uncertainties experienced by people facing a disease that was little known. It took agility and focus to react to new demands and, at the same time, keep advancing in strategic actions.

To cope with the increased demand for care and the new responsibilities assumed, such as the management and operation of the Hospital Municipal de Campanha do Pacaembu (Field Hospital) (see page 27 ), in March, Einstein selected and hired new professionals. In a completely online process carried out over a period of 14 days, it was possible to reinforce the staff with 1,137 professionals, between fixed and undefined period contracts. Another 1,081 employees were relocated internally.



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New training was developed as a result of the pandemic, bringing together practical and theoretical approaches based on Einstein's continuous training platforms. In March and April, more than 5,400 professionals underwent training at practical stations, which simulate real service situations, and the online training content was received more than 116,700 visits.

In line with the provisional measures issued by the government during the pandemic, reductions in working hours, changes in working hours and suspension of contracts were adopted, in order to adapt staff to the new context.

INNOVATION AND TECHNOLOGY

New tools, which had already been tested by Einstein, gained relevance during the year and supported people management processes. To streamline the process of attracting and selecting talent during the pandemic, the test phase was automated, which made it possible to evaluate nearly 12 thousand candidates in less than 14 days. Monitoring the candidate's behavior during the test provided relevant information for the comparison process using Artificial Intelligence.

The evaluations were essential to create a mathematical model for ranking professionals according to the degree of compliance to Einstein's profile and culture. After analyzing the more than 22,200 resumé's screened for positions in the fight against Covid-19, the algorithm demonstrated a 76.2% assertiveness rate for the nursing career. This means that the automated

compliance analysis was correct for 762 resumé's out of every 1,000 analyzed.

New technologies have also made it possible to expand the professionals' access to training and learning content via digital platforms. There were 101 webinars and live streams held, which had 22,100 participations – six times more than in 2019. The internal social network (Workplace) registered more than 250 publications. Online learning strategies reached 92% of employees, considering the average headcount in the year.

The interaction and communication dynamics were adapted for telework, adopted in the administrative areas.

The dialogues between the team and leaders became even more frequent during the year, with the organization of live streams at the institutional level, with direct leadership and by area as well. The meetings with the President and the General Board, held periodically, also migrated to the virtual environment.

SUPPORT TO EMPLOYEES

DONATIONS OF  
**29,100** BASKETS  
with refrigerated products;  
1,400 hygiene kits and 16,100  
Easter eggs

ANTICIPATION OF  
BENEFITS

TRANSFER OF BALANCE  
FROM VOUCHERS FOR  
RESTAURANTS TO VOUCHERS  
FOR SUPERMARKETS

SUPPLEMENTARY  
VOUCHERS FOR  
SALARIES UP TO  
**BRL 3,135**

**62 employees**  
HOSTED IN HOTELS  
(benefit for those who lived far away or  
feared contaminating the family)

PLAYFUL AND EDUCATIONAL  
ACTIVITIES FOR ALMOST  
**500 children**  
OF EMPLOYEES at the  
*Escola Miguel de Cervantes*

GYM PASS ON-LINE. WITH  
**400 subscriptions**  
  
**42** WELCOME AND INTERACTION  
*live streams*

TRANSPORTATION BETWEEN THE  
MORUMBI UNIT AND THE *HOSPITAL  
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PARTNERSHIP WITH  
CARREFOUR EXPRESS to create  
a 24-hour mini-market within the  
Morumbi unit



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ORGANIZATIONAL CLIMATE

The attributes and the way to measure the perception of the internal public were adjusted to the changes in the scenario due to the pandemic. The annual climate survey now includes remote work and e-NPS ( Employee Net Promoter Score ) topics. About 73% of employees voluntarily participated in the survey. The favorability index remained the same as that registered in 2019, 81%, despite the challenging scenario.

The organizational climate also started to be measured in short cycles throughout the year, in the various interaction opportunities, such as internal live streams and service through the OUVID program, for prevention and support in cases of psycho-emotional suffering related to the pandemic (see [page 91](#)). The information helped to identify and guide priority themes for the team.



SOLIDARITY

About 5,000 health professionals volunteered for social and SUS support activities coordinated by Einstein. Just over half (53%) of the volunteers were hired.



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EMPLOYEE HEALTH AND SAFETY

The employee health and safety index showed a relevant improvement compared to 2019, the result of a continuous effort to strengthen safe attitudes and the search for zero harm, which are part of the Sistema Einstein de Segurança e Saúde do Colaborador - SESSCo (Einstein Employee Health and Safety System). The frequency rate of typical accidents with leave time dropped 22%, impacted, among other factors, by a 40% decrease in the leave time due to falls. The rate of accidents with biological risk decreased by 60% compared to 2019.

The commuting accident frequency rate also dropped, positively impacted by the reduction in face-to-face work and, therefore, in commuting.

EMPLOYEE HEALTH AND SAFETY INDEX<sup>1</sup>

	2017	2018	2019	2020	Δ 2020/2019
Frequency rate of accidents with loss of time <sup>2</sup>	1.61	1.98	1.47	1.14	-22%
Rate of biohazards without loss of time <sup>2</sup>	2.07	1.67	2.69	1.07	-60%
Severity Index <sup>3</sup>	33.84	16.24	17.51	36.00	106%
Frequency rate of commuting accidents with time away	4.51	3.48	3.20	1.84	-43%
Rate of employees on leave <sup>4</sup>	1.56%	1.52%	1.44%	1.51%	0.07 pp

<sup>1</sup> Considers all Einstein collaborators, but the 2017 data did not include the professionals who work at the Hospital Municipal Vila Santa Catarina – Dr. Gilson de Cássia Marques de Carvalho.

<sup>2</sup> Accidents/man-hours worked with exposure to risk for every 1,000,000 hours worked.

<sup>3</sup> Days missed/man-hours worked with risk exposure for every 1,000,000 hours worked.

<sup>4</sup> Until 2019, the sick leave rate was calculated based on the monthly average; 2020 data refers to the rate in December, including those on leave from Covid-19.

However, the severity index increased 106%, driven by a serious accident with longer time off. Einstein reinforced internal communication and training and plans to expand interventions in 2021.

PLAYFUL LEARNING: SSMA MISSION

More than 5,500 employees participated in the *Saúde, Segurança e Meio Ambiente* - SSMA (Health, Safety and Environment) training in an ‘escape game’ format, held in February. In an immersive and fictional setting, participants put these guidelines into practice to tackle puzzles and mental challenges. Due to the pandemic, no other editions were held during the year.

PROTOCOLO FOCO

Ilunched in 2020, the “*Protocolo FoCo*” (Focus on Conscience) project strengthens the safety culture through three drivers:

- **Awareness:** breathing and concentration exercises to increase awareness and situational awareness;
- **License to care:** encouragement for self-care by professionals so that they act as agents of safe behavior with their colleagues; and
- **Observation and Behavioral Approach:** a tool adopted by Einstein in 2016 that provides for the training of team leaders, members of *Comissão Interna de Prevenção de Acidentes* - CIPA (Internal Accident Prevention Commission) and other professionals to act as observers in the organization’s daily activities in order to contribute to the awareness and risk reduction. In 2020, more than 7,500 observations were recorded.

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SAFE MOBILITY

Awareness for the prevention of commuting accidents is a constant at Einstein, which conducts periodic courses for employees, service providers and physicians from the medical staff who travel on motorcycles.

In 2020, a specific training course was held for the teams working at Hospital Órion, which Einstein manages in Goiânia (see [page 22](#)), with the participation of 22 professionals. From 2017 to 2020, the safe mobility courses trained 382 Einstein employees, 12 members of the clinical staff, 22 professionals from Hospital Órion and 14 outsourced workers, totaling 430 people.

PREVENTION

Adherence to vaccination campaigns in 2020 was the highest in the entire history of SBIBAE: 99% of employees received the flu vaccine and 97%, the triple viral vaccine.

Coverage of periodic medical examinations was also high (96%), despite the temporary suspension of services at the beginning of the pandemic. To achieve this result, Einstein intensified its examination routine in the second half of the year, extending service hours at fixed assessment points and strengthening the itinerant team.

The preventive exercise regimen was reformulated and groups with higher musculoskeletal risks were encouraged to participate.



ACTIONS TO COMBAT COVID-19

- Construction of specific service flows
- Assessment of the most vulnerable group of employees, such as the chronically ill and pregnant women
- Sample testing to identify the prevalence of the virus in the Einstein population
- Creation of the Care Coordination Center for assistance and monitoring every day of the week
- Mapping of potential virus transmission mechanisms within Einstein
- Creation of monitoring panels on the main aspects of disease management, providing a consolidated view for quick decision-making
- Assistance to 4,624 employees who contracted the disease (the assistance flow at the Einstein Clinics and at the accredited network started right after the diagnosis was confirmed, and the patient was followed until their return to work)
- All those who needed hospital care were admitted to the Morumbi unit. No deaths were registered



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MENTAL AND EMOTIONAL HEALTH

Promoting employees’ physical, mental and emotional health is part of the Política de Equilíbrio e Bem-Estar - PEqBE (Balance and Well-Being Policy) and involves specific flows and awareness, prevention and service activities. On a routine basis, Einstein performs epidemiological monitoring of risk cases associated with mental health disorders and the management of cases of acute crisis or psychological distress. The care and attention structure was improved in 2020 with actions designed to address vulnerabilities generated by the pandemic, such as social isolation, the tension experienced by Covid-19’s frontline professionals and cases of sick leave.

An example is the ‘OUVID Program’, created as an institutional response to the psycho-emotional suffering generated by the pandemic. The program is aimed at all SBIBAE professionals and their close relations and is based on care through listening and therapeutic interventions.

The name was chosen by the sound association with the word Covid and is an acronym of:

- **Ouvir com atenção (Listen carefully)**
- **Um minuto em silêncio (A moment of silence)**
- **Validar emoções (Validate emotions)**
- **Informar assertivamente (Inform assertively)**
- **Descomprimir para agir (Decompress to act)**

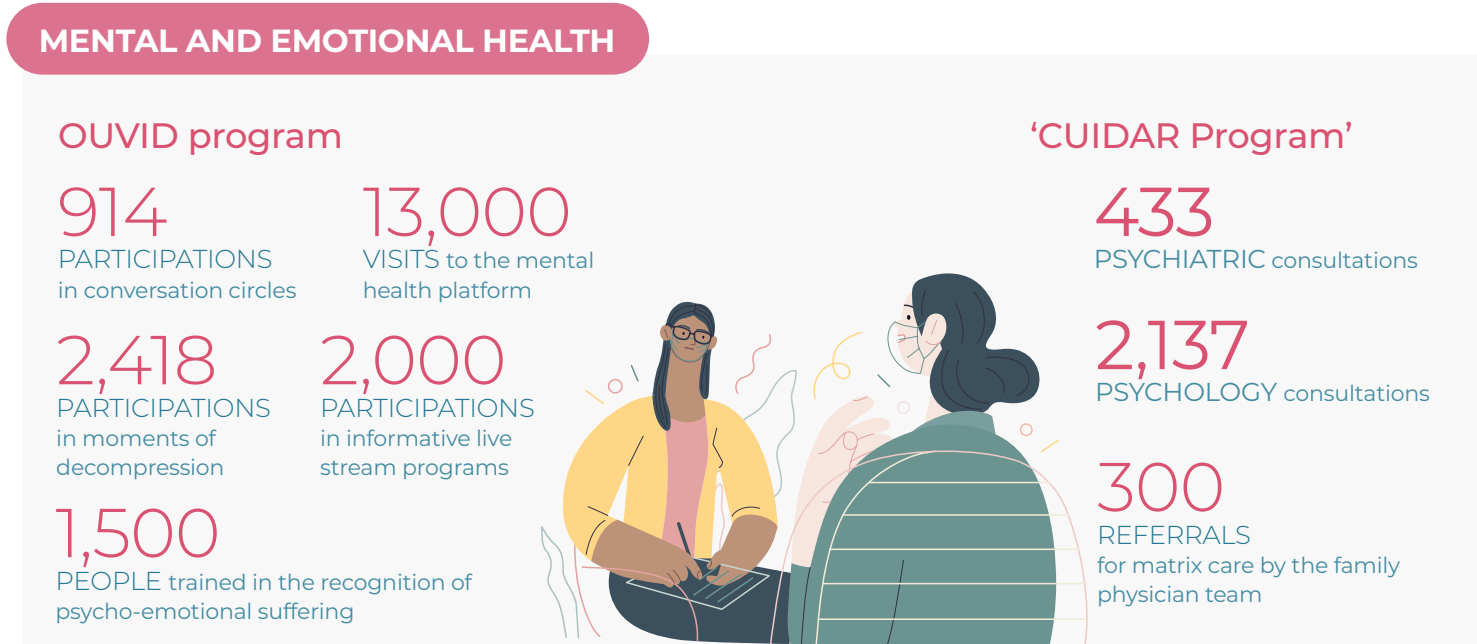
With the support of leaders, work routines in the most critical areas started to include conversation circles with psychologists and psychiatrists, relaxation activities with physical educators and psychologists, training and qualifications to support people to recognize psycho-emotional suffering.

Two launches support the program: a video platform, with management practices and emotional balance, and a direct communication channel with a psychologist. By phone and text, professionals have access to counseling and referral for psychotherapy or assistance with a family doctor or psychiatrist if necessary. Of the 394 people who sought the service, 29% had mild complaints and received guidance

on the channel itself; 47% were referred for brief psychotherapy (up to 12 appointments) and 24% for medical assistance.

During the pandemic, the demand for psychiatric care from the ‘CUIDAR Program’ also increased, aimed at providing comprehensive health care to employees. The main complaints heard were related to depression or anxiety symptoms, exhaustion and stress.

The work is performed in a matrix form. The family doctor follows up the case and discusses with the aspects of the patient’s mental health with the attending psychiatrist for joint definitions for the continuity of care. The goal is to increase the resolution of Primary Care and health care for employees.



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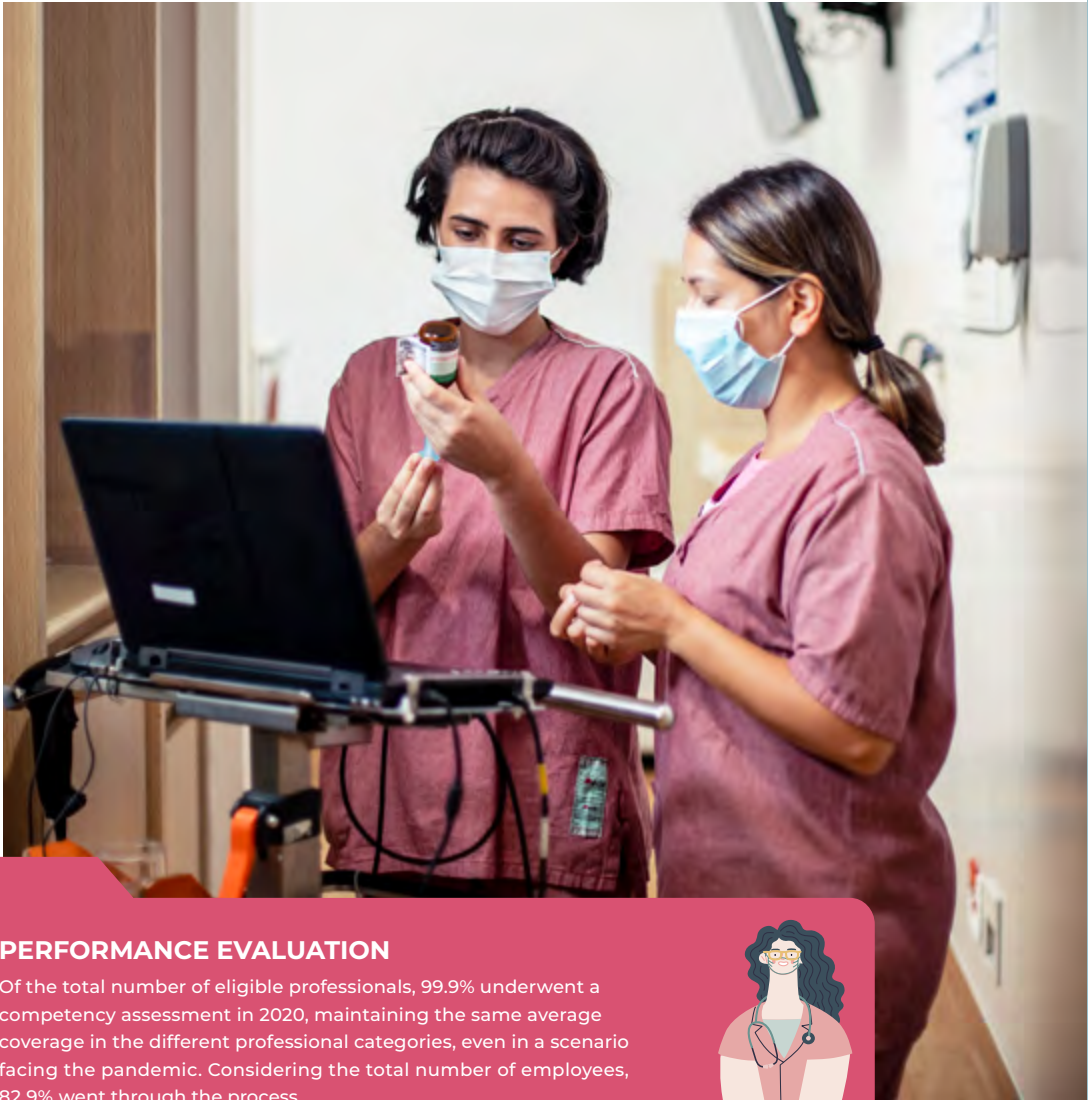
DEVELOPMENT

The professional development tracks train employees in the technical and behavioral aspects necessary for working at Einstein. In 2020, the training of frontline teams in combating the pandemic was prioritized and area training, symposia, congresses and external training initiatives were extended, with a drop in the overall average.

TRAINING (HOURS)

	2017	2018	2019	2020	Δ 2020/2019
Internal	557,193	524,023	797,639	638,536	-19.9%
External	33,855	32,219	35,531	11,319	-68.1%
<b>Total</b>	<b>591,048</b>	<b>556,242</b>	<b>833,170</b>	<b>649,855</b>	<b>-22.0%</b>
<b>Average per employee<sup>1</sup></b>	<b>44.6</b>	<b>40.9</b>	<b>59.6</b>	<b>42.1</b>	<b>-29.3%</b>

<sup>1</sup> The calculation of the average considers the average headcount for the year, obtained from the sum of the total number of employees, month by month, and dividing the value by 12.



PERFORMANCE EVALUATION

Of the total number of eligible professionals, 99.9% underwent a competency assessment in 2020, maintaining the same average coverage in the different professional categories, even in a scenario facing the pandemic. Considering the total number of employees, 82.9% went through the process.

The assessment is part of the performance management cycle, which permeates the entire relationship between leader and team member and is characterized by continuous dialogue throughout the year.



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EMPLOYEE PROFILE

Einstein ended the year with 15,503 employees, an increase of 9.3% compared to 2019. Most of them carry out their activities in the city of São Paulo, but, in line with the purpose of taking “a taste of Einstein to every human being”, they have been expanding their activities, with activities in the interior of São Paulo, in other states and in the Federal District.

WORKFORCE

	2018	2019	2020		
			Total	Men	Women
By function/level					
Director	19	17	16	7	9
Manager	95	99	111	47	64
Medical Manager	28	30	30	22	8
Coordinator/Specialists	409	510	573	207	366
Medical Manager	105	116	117	85	32
Physicians (I, II, III)	1,247	1,301	1,364	641	723
Professional	5,748	6,263	7,002	1,848	5,154
Technician	3,289	3,752	4,183	1,353	2,830
Assistant	1,970	2,099	2,107	470	1,637
By type of employment contract					
Determined time	21	75	432	134	298
Undetermined time	12,889	14,112	15,071	4,546	10,525
By type of employment					
Full time	10,965	12,001	13,188	3,797	9,391
Part time	1,945	2,186	2,315	883	1,432

WORKFORCE

	2018	2019	2020		
			Total	Men	Women
By state					
Federal District	1	1	4	3	1
Espírito Santo	0	5	6	5	1
Goiás	0	17	21	6	15
Minas Gerais	7	10	10	8	2
Pará	0	4	5	1	4
Pernambuco	0	0	35	4	31
Rio Grande do Sul	0	0	2	0	2
Rio de Janeiro	4	188	201	45	156
São Paulo	12,898	13,962	15,219	4,608	10,611
By activity					
Physicians	1,324	1,447	1,511	748	763
Health care (non-physicians)	5,139	8,940	9,843	2,282	7,561
Other activities	6,447	3,800	4,149	1,650	2,499
Total employees	12,910	14,187	15,503	4,680	10,823
Employees	12,910	14,187	15,503	4,680	10,823
Board	180	180	180	159	21
Interns	201	120	186	50	136
Internal team (employees, Board and interns)	13,291	14,487	15,869	4,889	10,980
Third parties	2,144	2,500	2,709	NA	NA
Total workforce (internal team + third parties)	15,435	16,987	18,578	NA	NA

NA: information not available.

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EMPLOYEES WORKING IN HOSPITALS

	2018	2019	2020		
			Total	Men	Women
Hospital Israelita Albert Einstein	6,810	7,134	7,626	2,500	5,126
Hospital Municipal M'Boi Mirim	1,668	1,762	2,172	586	1,586
Hospital Municipal Vila Santa Catarina	945	1,197	1,606	424	1,182
Hospital Órion	0	0	473	137	336
Total working in hospitals	9,423	10,093	11,877	3,647	8,230

TURNOVER

	Rate				Hired 2020
	2017	2018	2019	2020	
By gender					
Men	14.6%	16.1%	16.0%	13.6%	1,319
Women	14.4%	16.4%	15.3%	12.3%	3,146
By activity					
Physicians	15.0%	21.3%	19.2%	16.3%	379
Health care (non-physicians)	12.1%	14.0%	13.6%	11.1%	3,036
Other activities	19.3%	17.2%	18.7%	15,1%	1.050
By age group					
Less than 30	19.3%	4.5%	20.6%	17.8%	2,133
Between 30 and 50	12.7%	14.2%	13.4%	10.8%	2,242
Over 50	10.8%	81.8%	14.3%	9.8%	90
Total	14.4%	16.3%	15.5%	12.7%	4,465

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DIVERSITY AND INCLUSION

Einstein seeks a plural and equitable environment as a way to improve decision-making, strengthen employee engagement, participation and a sense of belonging, and promote creativity and innovation. Through the Diversity and Inclusion Program, it directs actions in five areas: gender equality, generations, ethnic groups, people with disabilities and LGBTI+.

In 2020, the appreciation of diversity became part of the institutional development path of all employees. The governance model of the Einstein Diversity and Inclusion Committee and specific actions to promote the topic and involve employees and volunteers were also defined during the year.

DIVERSITY

	By age group						Participation of people with disabilities	
	Less than 30		Between 30 and 50		Over 50			
	Men	Women	Men	Women	Men	Women	Men	Women
Director	0	0	2	3	5	6	0	0
Manager	0	0	34	56	13	8	0	0
Medical Manager	0	0	14	7	8	1	0	0
Coordinator / Specialists	15	11	173	298	19	57	3	0
Medical Manager	0	0	53	19	32	13	0	0
Physicians (I, II, III)	73	105	489	544	79	74	1	0
Professional	401	1,227	1,357	3,717	90	210	26	43
Technician	591	1,137	691	1,535	71	158	88	118
Assistant	269	522	166	927	35	188	64	101
Total	1,349	3,002	2,979	7,106	352	715	182	262

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DIVERSITY - Participation of blacks

	2017		2018		2019		2020	
	Total	%	Total	%	Total	%	Total	%
Director	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Manager	1	1.3%	1	1.1%	2	2.0%	2	1.8%
Medical Manager	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Coordinator / Specialists	5	1.3%	5	1.2%	5	1.0%	9	1.6%
Medical Manager	0	0.0%	1	1.0%	1	0.9%	1	0.9%
Physicians (I, II, III)	8	0.6%	9	0.7%	13	1.0%	15	1.1%
Professional	314	5.3%	332	5.8%	385	6.1%	430	6.1%
Technician	348	10.4%	337	10.2%	416	11.1%	493	11.8%
Assistant	292	14.6%	318	16.1%	347	16.5%	343	16.3%
Total	968	7.3%	1,003	8.2%	1,169	8.2%	1,293	8.3%

DIVERSITY - Participation of brown skinned individuals

	2017		2018		2019		2020	
	Total	%	Total	%	Total	%	Total	%
Director	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Manager	0	0.0%	4	4.2%	5	5.1%	4	3.6%
Medical Manager	0	0.0%	2	7.1%	2	6.7%	2	6.7%
Coordinator / Specialists	0	0.0%	14	3.4%	30	5.9%	46	8.0%
Medical Manager	0	0.0%	2	1.9%	4	3.4%	7	6.0%
Physicians (I, II, III)	55	4.2%	59	4.7%	87	6.7%	128	9.4%
Professional	866	14.6%	909	15.8%	1,168	18.6%	1,486	21.2%
Technician	853	25.4%	923	28.1%	1,132	30.2%	1,387	33.2%
Assistant	742	37.1%	755	38.3%	861	41.0%	897	42.6%
Total	2,516	19.0%	2,668	20.7%	3,289	23.2%	3,957	25.5%

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WAGE EQUITY <sup>1</sup> (WOMEN AND MEN) - Evolution

	2017	2018	2019	2020	Δ 2020/2019
Director	75.9%	79.5%	77.3%	77.3%	0 pp
Manager	86.5%	82.4%	82.0%	73.6%	-8.4 pp <sup>2</sup>
Medical Manager	80.6%	83.0%	82.0%	84.3%	2.2 pp
Coordinator / Specialists	99.5%	100.8%	97.9%	95.1%	-2.8 pp
Medical Manager	86.0%	83.2%	85.3%	86.0%	0.6 pp
Physicians (I, II, III)	91.7%	90.7%	91.7%	91.3%	-0.5 pp
Professional	106.5%	105.5%	103.6%	103.2%	-0.5 pp
Technician	98.0%	98.8%	98.9%	99.4%	0.5 pp
Assistant	107.0%	106.7%	107.2%	106.8%	-0.4 pp

<sup>1</sup> Shows the ratio between women's and men's salaries in each employee category, calculated based on the formula: average salary for women/average salary for men.  
<sup>2</sup> The drop reflects the hiring of men for the highest tiers of management positions in 2020.

WAGE EQUITY 2020 (WOMEN AND MEN) - Related factors

	Salary Ratio <sup>1</sup>	Time in position <sup>2</sup>
Director	77.3%	77.4%
Manager	73.6%	72.9%
Medical Manager	84.3%	147.9%
Coordinator / Specialists	95.1%	138.0%
Medical Manager	86.0%	114.5%
Physicians (I, II, III)	91.3%	93.4%
Professional	103.2%	91.1%
Technician	99.4%	84.0%
Assistant	106.8%	174.3%

<sup>1</sup> Average salary for women/average salary for men in each functional category.  
<sup>2</sup> Average length of time working at Einstein for women in the position/average time of men in the position in each job category.

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# INTEGRATED MANAGEMENT

THE ENVIRONMENTAL CARE IN EINSTEIN'S OPERATION FOCUSES ON ASPECTS OF ENERGY, WATER, WASTE, EFFLUENTS AND EMISSIONS, AMONG OTHERS.

**T**he *Sistema de Gestão Integrada* - SGI (Integrated Management System) complies with environmental and energy management policies and procedures to drive impact reduction and improve performance. A set of sustainability indicators makes it possible to monitor performance on priority topics.

One of the focuses of attention is the rational consumption of natural resources through awareness campaigns, modernization of equipment and excellence in management. The actions are in line with two Sustainable Development Goals:

- **SDG 6** Drinking water and sanitation
- **SDG 7** Affordable and clean energy

Aiming at rationalizing water consumption, Einstein uses equipment with double-action flushing, showers and faucets equipped with aerators and pressure reducers.



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In the energy area, the rationalization effort has an important ally in new technologies. In 2020, Einstein consolidated the telemetry systems that monitor energy consumption and the efficiency of the central air conditioning. Analytics tools cross this information with that collected by the meteorological station at the Morumbi unit. The results are applied to the automation of the plant, generating a 10% efficiency gain in energy use.

Despite the advances, total water and energy consumption increased in 2020, reflecting the new needs arising from the pandemic and the process of expanding activities, with the start of operations at the Santana advanced unit. Water consumption was also impacted by the growth in demand from the *Núcleo Técnico Operacional* - NTO (Operational Technical Center) and the *Hospital Municipal Vila Santa Catarina – Dr. Gilson de Cássia Marques de Carvalho*.

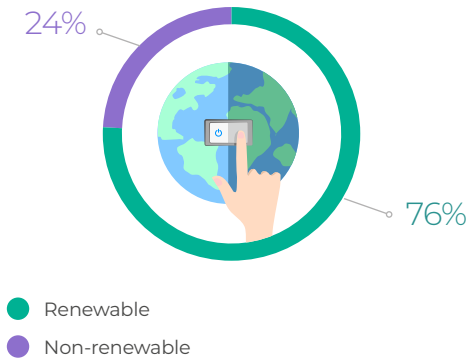


ENERGY CONSUMPTION (GIGAJOULES)

	2017	2018	2019	2020	Δ 2020/2019
Renewable sources					
Ethanol	0	0.002	0.781	0.000	-100.0%
Electricity	184,530	197,053	204,699	215,933	5.5%
Non-renewable sources					
Natural gas	40,304	47,392	52,689	56,570	7.4%
Gasoline	272	488	268	93	-65.3%
Diesel oil	13,036	9,797	8,007	11,937	49.1%
Total	238,142	254,730	265,663	284,532	7.1%

ENERGY CONSUMPTION BY SOURCE (%) – 2020

TOTAL: 284.5 GJ



CERTIFICATION

Energy management meets the requirements of the ISO 50001/2018 standard, which is applied to the *Morumbi, Perdizes, Alphaville, Ibirapuera* and *Jardins* units.

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MANAGEMENT PARAMETERS

Einstein seeks to apply, in the SUS units it operates, the same environmental management parameters it uses in its own units. To this end, in 2020 it carried out a detailed diagnosis of environmental management practices and tools in the operation of public units and has already started improvement actions.

For example, the environmental licensing status of the units was revised, with the preparation of 23 Planos de Gerenciamento de Resíduos de Serviços de Saúde - PGRSS (Health Services Waste Management Plans), the obtainment of 76 Certificates for the final disposal of waste and the obtainment of a license exemption certificate.

EMISSIONS AND EFFLUENTS

Annually, Einstein prepares and discloses its greenhouse gas (GHG) emissions inventory in the Public Emissions Registry, in line with the specifications of the Brazilian GHG Protocol Program. Another focus of attention is the liquid effluents. All units have an updated management and control plan, and the quality of disposal is monitored.

WATER CONSUMPTION ( M³)

	2017	2018	2019	2020	Δ 2020/2019
Utility company	288,286	239,268	242,533	279,783	15.4%
Own artesian well	12,244	33,662	33,880	24,550	-27.5%
<b>Total</b>	<b>300,530</b>	<b>272,930</b>	<b>276,413</b>	<b>304,333</b>	<b>10.1%</b>

LESS IMPACT, MORE COMFORT

In 2020, Einstein promoted the conversion – from gasoline to electric battery – of the two manned sweepers used to clean the garages of all blocks at the Morumbi unit. The impacts are positive for the environment and the professionals who operate the equipment. With the change, the area zeroed the emission of carbon monoxide (CO) with these equipments, noise dropped 80% and the problem of excess heat for the operator was eliminated.

Furthermore, productivity has doubled. The project was awarded during the Einstein Quality Week. .



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WASTE

The pandemic caused a change in the profile of waste generated throughout the year. Restaurants for visitors remained closed for almost two months, the circulation of professionals decreased because of remote work, and all waste generated in the care wards for patients with the disease was classified as infectious, which prevented the recycling of TNT blankets and administrative materials. The impacts are reflected in the indicators: the volume destined for composting and the share of recyclables in the total volume generated dropped.

On the other hand, Einstein improved the final destination of recyclable waste with several initiatives. The collected materials are transported to a specialized company, which carries out their segregation. At this stage, innovative equipment, unique in Latin America, identifies and corrects incorrect disposals. In addition, the range of partnerships with recyclers was expanded to include other types of materials, such as plastic gallon wraps, for example. Finally, everything that cannot be recycled is co-processed in a cement plant in the region. In addition to not taking up space in landfills, which are increasingly limited, the co-processing of the waste helps to reduce GHG emissions because the material replaces a part of the fossil fuels used in cement kilns.

WASTE (TONS)

	2017	2018	2019	2020	Δ 2020/2019	Disposal method
<b>Hazardous waste</b>	<b>1,200.4</b>	<b>1,460.0</b>	<b>1,528.7</b>	<b>1,831.7</b>	<b>19.8%</b>	
Infectious	1,106.4	1,324.9	1,360.0	1,639.4	20.5%	Autoclaving
Chemical	93.2	134.9	168.2	191.9	14.1%	Incineration
Radioactive Waste <sup>1</sup>	0.9	0.2	0.4	0.4	-10.3%	Onsite storage
<b>Non-hazardous waste</b>	<b>2,621.8</b>	<b>2,918.3</b>	<b>2,995.0</b>	<b>2,495.2</b>	<b>-16.7%</b>	
Non-recyclable	1,524.4	1,570.2	1,426.6	1,394.0	-2.3%	Landfill
Recyclable	1,097.4	1,348.1	1,568.4	1,101.2	-29.8%	Recycling
Organic	334.5	344.0	482.7	380.2	-21.2%	Composting
<b>Total waste</b>	<b>3,822.2</b>	<b>4,378.3</b>	<b>4,523.7</b>	<b>4,326.9</b>	<b>-4.3%</b>	
<b>Equivalent passages<sup>2</sup></b>	<b>10,047,847</b>	<b>10,870,321</b>	<b>10,443,960</b>	<b>9,318,169</b>	<b>-10.8%</b>	
<b>Intensity of waste generated (kg of waste/equivalent passage)</b>	<b>0.38</b>	<b>0.40</b>	<b>0.43</b>	<b>0.46</b>	<b>7.2%</b>	

<sup>1</sup> Radioactive waste is kept in lead vaults located inside Einstein and monitored by a specialized team until the radiation decays.  
<sup>2</sup> The total number of equivalent passages considers all types of care provided at the Einstein and the average length of stay of patients on the organization's premises: 4 hours in diagnostic medicine, 6.5 hours in the Emergency Room and 24 hours in hospitalizations.

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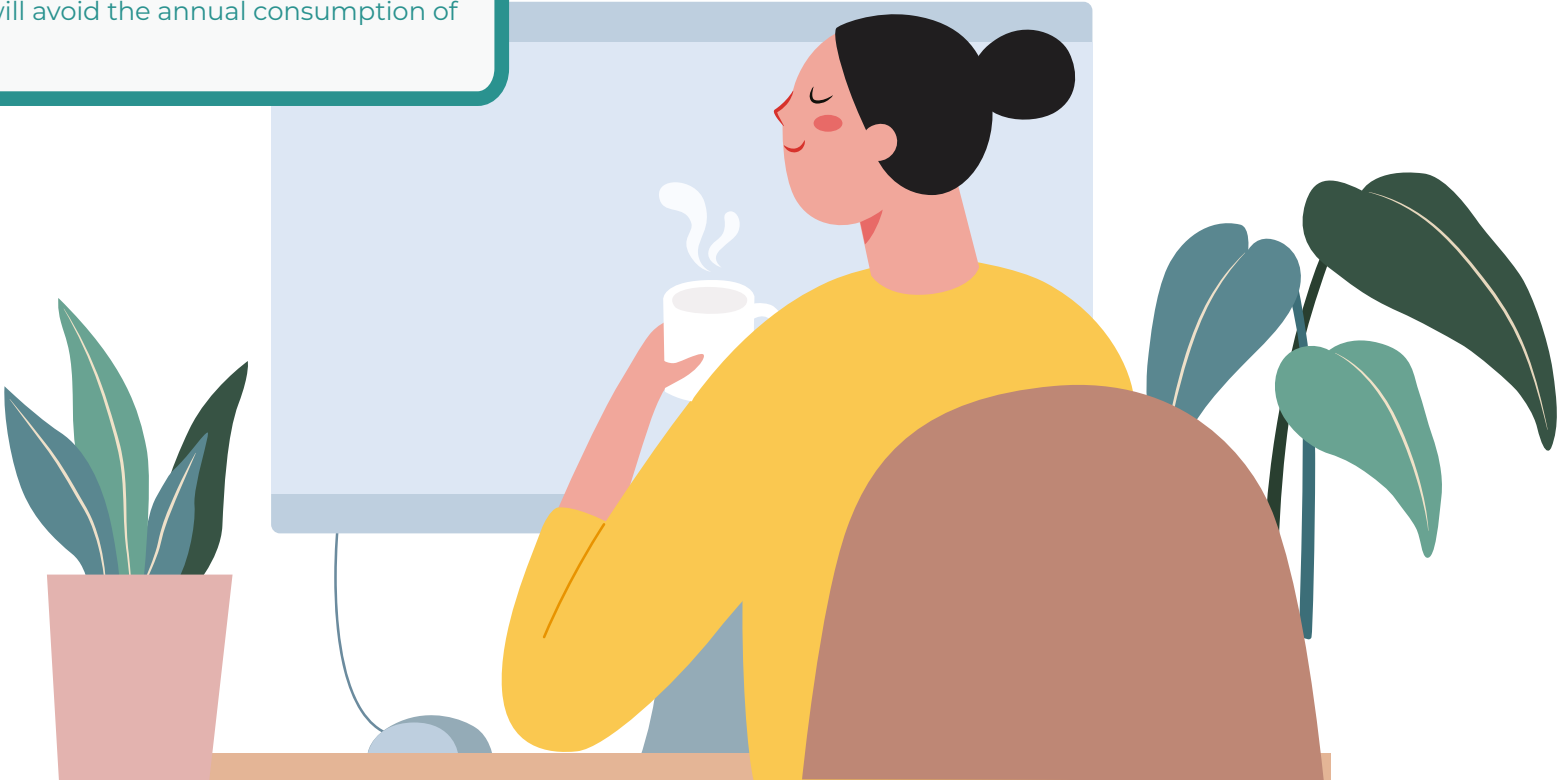
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### CONSCIOUS CONSUMPTION

In line with SDG 12 – Sustainable Consumption and Production, Einstein is reducing the use of disposable cups. In 2020, employees in the administrative areas received kits with reusable stainless steel mugs and bottles. In the first stage, 1,400 kits were distributed and the initiative will be extended to other areas in 2021. In places where it is not possible to eliminate them, they will be replaced by paper. It is estimated that, after implementation throughout the operation, the initiative will avoid the annual consumption of 3 million plastic cups.



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# REPORTING PROCESS AND MATERIALITY

CONTENT DEFINITION IS GUIDED BY THEMES  
CHOSEN FROM PERIODIC CONSULTATION  
WITH STAKEHOLDERS AND EVALUATION OF  
EINSTEIN'S LEADERSHIP.

The 2020 Sustainability Report presents the main advances and challenges in the management of SBIBAE (*Sociedade Beneficente Israelita Brasileira Albert Einstein*). The publication, prepared in accordance with the GRI Standards - an Essential option, covers the period between January 1st and December 31st, 2020. The materiality process carried out in 2019 guided the content.

The definition of material themes took into account an online survey with more than 1,300 people representing the different stakeholders of the Society. The questionnaire was answered by 1,296 employees, 123 physicians, 13 patients, 12 students, 7 teaching professionals, 5 researchers, 13 volunteers and 10 suppliers. There was also an evaluation of Einstein's strategic map and relevant segment publications, such as Observatório 2019 from *Associação Nacional de Hospitais Privados - ANAHP* (National Association of Private Hospitals), the *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).

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The themes identified in the online survey were prioritized by the leadership (36 directors, superintendents, managers, specialists, consultants, supervisors and doctors in senior positions), who also considered the organization's vision of the future and strategic planning, in addition to a perspective of risks and opportunities.

For each material theme, the corresponding aspects of the GRI guideline and the performance indicators were defined: from the GRI, from the SASB and Einstein's proprietary methodology.

MATERIAL ISSUES

- **Economic performance:** economic balance and competitive and market management practices aimed at business continuity and success over time
- **Fighting corruption:** ethical conduct and adopting policies and initiatives to prevent and combat cases of 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:** proper management of risks associated with the work environment and the performance of duties
- **Training and education:** programs and initiatives aimed at developing technical and professional skills, including training focused on training professionals for the company and for the market in general
- **Diversity and equity:** guaranteeing equal opportunities for professional development and building a favorable environment for the inclusion of minorities, the democratization of the labor market and the construction of a diverse company
- **Effectiveness of health services:** management and continuous improvement to ensure the proper application of the necessary resources, with a focus on 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 their relationship with Einstein
- **Disease prevention and health promotion:** programs and initiatives aimed at the quality of life and well-being of the population
- **Patient health and safety:** adoption of standards, policies, processes and procedures to ensure the health and safety of patients and ensure care with the lowest risk and the best outcome
- **Access to healthcare:** contributions to strengthening and democratizing health care with a focus on facing current and future challenges










- **Generation and dissemination of knowledge:** research and development activities, innovation, teaching, training and professional updating, exchange of information and awareness of patients with a focus on improving health care at Einstein and in the sector in general
- **Compensation model for health services:** contributions (information, references, studies and clear positioning) to the debate on existing models to promote the evolution and sustainability of the health system
- **Socio-economic compliance:** compliance with social and economic laws and regulations

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MATERIAL ISSUES AND LIMITS

Material issue	Stakeholder vision <sup>1</sup>	Monitoring indicators	Where does the impact occur?	Einstein Involvement
 Access to healthcare	<ul style="list-style-type: none"><li>• Employees</li><li>• Physicians</li><li>• Teaching professionals</li><li>• Sector entities</li><li>• Government</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• Management contract with the city of São Paulo</li><li>• Public partnership with the city of São Paulo</li><li>• Agreements with the Ministry of Health and city of São Paulo</li><li>• Organ transplants</li><li>• Einstein in the Paraisópolis Community Program (PECP)</li></ul>	Society	Impact caused by the Organization
 Fight against corruption	<ul style="list-style-type: none"><li>• Employees</li><li>• Physicians</li><li>• Teaching professionals</li><li>• Suppliers</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• 205-01</li><li>• 205-02</li><li>• 205-03</li></ul>	Society	Impact caused by the Organization and its relations with its value chain
 Environmental compliance	<ul style="list-style-type: none"><li>• Employees</li><li>• Teaching professionals</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• 307-01</li></ul>	Environment	Impact caused by the Organization
 Socioeconomic compliance	<ul style="list-style-type: none"><li>• Government</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• 419-01</li></ul>	Society	Impact caused by the Organization
 Economic performance	<ul style="list-style-type: none"><li>• Sector entities</li><li>• Government</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• 201-04</li><li>• Financial commitments adopted</li><li>• Value added statements</li><li>• Income statements</li><li>• Balance sheet</li><li>• Financial indicators</li><li>• Capital expenditure</li></ul>	Society	Impact caused by the Organization
 Diversity and equity	<ul style="list-style-type: none"><li>• Employees</li><li>• Teaching professionals</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• 405-01</li><li>• 405-02</li></ul>	Employees	Impact caused by the Organization
 Effectiveness of health services	<ul style="list-style-type: none"><li>• Employees</li><li>• Physicians</li><li>• Patients</li><li>• Teaching professionals</li><li>• Researchers</li><li>• Students</li><li>• Sector entities</li><li>• Government</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li></ul>	Patients	Impact caused by the Organization

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Material issue	Stakeholder vision <sup>1</sup>	Monitoring indicators	Where does the impact occur?	Einstein Involvement
 <b>Patient experience</b>	<ul style="list-style-type: none"><li>• Employees</li><li>• Physicians</li><li>• Students</li><li>• Sector entities</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• Patient satisfaction</li><li>• Complaints received by the Patient and Family Experience - SAC (Customer Service)</li></ul>	Patients	Impact caused by the Organization
 <b>Generation and waste disposal</b>	<ul style="list-style-type: none"><li>• Employees</li><li>• Physicians</li><li>• Patients</li><li>• Teaching professionals</li><li>• Researchers</li><li>• Suppliers</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• 306-02</li></ul>	Environment	Impact caused by the Organization
 <b>Generation and dissemination of knowledge</b>	<ul style="list-style-type: none"><li>• Physicians</li><li>• Teaching professionals</li><li>• Researchers</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• Teaching and education: modality</li><li>• Research – Einstein's operating and capital expenses</li><li>• Research - Fundraising</li><li>• Scientific production</li></ul>	Society	Impact caused by the Organization
 <b>Compensation model for health services</b>	<ul style="list-style-type: none"><li>• Sector entities</li><li>• Government</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li></ul>	Healthcare sector	Impact caused by the Organization and its relations with its value chain
 <b>Disease prevention and health promotion</b>	<ul style="list-style-type: none"><li>• Employees</li><li>• Physicians</li><li>• Patients</li><li>• Teaching professionals</li><li>• Researchers</li><li>• Students</li><li>• Volunteers</li><li>• Sector entities</li><li>• Government</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li></ul>	Society	Impact caused by the Organization
 <b>Patient health and safety</b>	<ul style="list-style-type: none"><li>• Employees</li><li>• Physicians</li><li>• Patients</li><li>• Teaching professionals</li><li>• Researchers</li><li>• Students</li><li>• Volunteers</li><li>• Sector entities</li><li>• Government</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• 416-01</li><li>• Employee health and safety index</li></ul>	Patients	Impact caused by the Organization
 <b>Occupational health and safety</b>	<ul style="list-style-type: none"><li>• Employees</li><li>• Physicians</li><li>• Teaching professionals</li><li>• Suppliers</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• 403-02</li><li>• Employee health and safety index</li></ul>	Employees	Impact caused by the Organization
 <b>Training and education</b>	<ul style="list-style-type: none"><li>• Employees</li><li>• Physicians</li><li>• Patients</li><li>• Teaching professionals</li><li>• Suppliers</li><li>• Students</li><li>• Volunteers</li></ul>	<ul style="list-style-type: none"><li>• 103-01</li><li>• 103-02</li><li>• 103-03</li><li>• 404-01</li></ul>	Employees	Impact caused by the Organization

<sup>1</sup> Audiences that pointed out the topic as relevant.

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MANAGEMENT OF MATERIAL ISSUES

Material issue	Explanation and limits	Management Style	Evaluation of the management style
		Pages	
Access to healthcare	<a href="#">104 to 107</a>	<a href="#">31 to 37</a> ; and <a href="#">51 to 53</a>	<a href="#">31 to 37</a> ; and <a href="#">51 to 53</a>
Fight against corruption	<a href="#">104 to 107</a>	<a href="#">79, 80</a> and <a href="#">107</a>	<a href="#">79, 80</a> and <a href="#">107</a>
Environmental compliance	<a href="#">104 to 107</a>	<a href="#">79, 80</a> and <a href="#">107</a>	<a href="#">79, 80</a> and <a href="#">107</a>
Socioeconomic compliance	<a href="#">104 to 107</a>	<a href="#">98 to 102</a> and <a href="#">107</a>	<a href="#">98 to 102</a> and <a href="#">107</a>
Economic performance	<a href="#">104 to 107</a>	<a href="#">75</a> and <a href="#">107</a>	<a href="#">76</a> and <a href="#">107</a>
Diversity and equity	<a href="#">104 to 107</a>	<a href="#">93 to 97</a>	<a href="#">93 to 97</a>
Effectiveness of health services	<a href="#">104 to 107</a>	<a href="#">41 to 43</a>	<a href="#">41 to 43</a>
Patient experience	<a href="#">104 to 107</a>	<a href="#">44 to 46</a>	<a href="#">44 to 46</a>
Generation and waste disposal	<a href="#">104 to 107</a>	<a href="#">102</a>	<a href="#">102</a>
Generation and dissemination of knowledge	<a href="#">104 to 107</a>	<a href="#">54 to 63</a>	<a href="#">54 to 63</a>
Compensation model for health services	<a href="#">104 to 107</a>	<a href="#">41 to 43</a>	<a href="#">41 to 43</a>
Disease prevention and health promotion	<a href="#">104 to 107</a>	<a href="#">73, 89</a> to <a href="#">91</a>	<a href="#">73, 89</a> to <a href="#">91</a>
Patient health and safety	<a href="#">104 to 107</a>	<a href="#">41 to 43</a> and <a href="#">111</a>	<a href="#">41 to 43</a> and <a href="#">111</a>
Occupational health and safety	<a href="#">104 to 107</a>	<a href="#">86 to 92</a>	<a href="#">86 to 92</a>
Training and education	<a href="#">104 to 107</a>	<a href="#">86 to 92</a>	<a href="#">86 to 92</a>

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# GRI CONTENT SUMMARY

## GRI STANDARD

INDICATOR		PAGE/ANSWER	OMISSIONS	RELATED SDG
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 12	-	-
	102-03 Headquarters Location	Sao Paulo (SP)	-	-
	102-04 Location of operations	Page 12	-	-
	102-05 Type and legal nature of property	Page 12	-	-
	102-06 Markets in which it operates	Page 12	-	-
	102-07 Size	Page 12	-	-
	102-08 Employees and other workers	Page 93	-	SDG 8
	102-09 Supply Chain	Page 81	-	-
	102-10 Significant changes in the organization and in the supply chain	There were none.	-	-
	102-11 Precautionary 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 14	-	-
	102-13 Participation in associations	Page 14	-	-
	102-14 Message from the President	Pages 3 to 6	-	-
	102-16 Values, principles, standards and norms of conduct	Page 14	-	SDG 16
	102-18 Governance structure	Pages 15 to 17	-	-
	102-40 List of stakeholder groups	Page 105	-	-
	102-41 Percentage of employees covered by collective bargaining agreements	100%	-	SDG 8
	102-42 Identification and selection of stakeholders	Page 103	-	-
	102-43 Approach to stakeholder engagement	Page 103	-	-
	102-44 Main themes and concerns raised	Page 105	-	-
	102-45 Entities included in the consolidated financial statements	Einstein concentrates its activities on just one entity, fully covered by the financial statements and this report.	-	-
	102-46 Definition of content and limits	Pages 107 and 108	-	-
	102-47 List of material issues	Pages 104 to 107	-	-

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GENERAL DISCLOSURE (CONT.)					
GRI 102: Divulgação geral 2016	102-48	Reformulation of information	There were none.	–	–
	102-49	Changes in report writing	There were none.	–	–
	102-50	Period covered by the report	January 1st to December 31st, 2020.	–	–
	102-51	Date of most recent report	2019	–	–
	102-52	Publishing Cycle	Yearly	–	–
	102-53	Contact for inquiries	Fale Conosco Channel, available at: www.einstein.br.	–	–
	102-54	Declaration of compliance with the GRI standard	This report was prepared in accordance with the GRI Standards, - an essential option.	–	–
	102-55	GRI Content Summary	Pages 108 to 111	–	–
	102-56	External verification	No external verification was carried out.	–	–
ECONOMY-THEMED CONTENT					
Economic performance					
GRI 103: Management Approach 2016	103-01	Explanation of the material issue and its limits	Pages 104 to 107	–	SDG 1
	103-02	The management style and its components	Pages 75 and 107	–	SDG 1
	103-03	Evolution of the management style	Pages 75 and 107	–	SDG 1
GRI 201: Economic performance 2016	201-04	Financial assistance received from the government	Einstein does not receive subsidies or tax incentives. The transfers received from the government are limited to the reimbursement of expenses with the operation in public units, described on page 72 to page 74. In 2020, the work includes the operation of the Pacaembu Field Hospital.	–	SDG 1
Fight against corruption					
GRI 103: Management Approach 2016	103-01	Explanation of the material issue and its limits	Pages 104 to 107	–	SDG 16
	103-02	The management style and its components	Pages 79, 80 and 107	–	SDG 16
	103-03	Evolution of the management style	Pages 79, 80 and 107	–	SDG 16
GRI 205: Fight against corruption 2016	205-01	Units submitted to evaluations of risks related to corruption	Risk assessments cover 100% of operations.	–	SDG 16
	205-02	Communication and training on anti-corruption policies and procedures	There were no communications or training for senior management. Activities aimed at employees and suppliers are described on page 76.	–	SDG 16
	205-03	Confirmed cases of corruption and measures taken	There were none.	–	SDG 16
Socioeconomic Compliance					
GRI 103: Management Approach 2016	103-01	Explanation of the material issue and its limits	Pages 104 to 107	–	SDG 16
	103-02	The management style and its components	Pages 79, 80 and 107	–	SDG 16
	103-03	Evolution of the management style	Pages 79, 80 and 107	–	SDG 16
GRI 419: Socioeconomic Compliance 2016	419-01	Socioeconomic Compliance	There were no cases of non-compliance.	-	SDG 16

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ENVIRONMENTAL-THEMED CONTENT					
Environmental compliance					
GRI 103: Management Approach 2016	103-01	Explanation of the material issue and its limits	Pages <a href="#">104 to 107</a>	–	SDG 16
	103-02	The management style and its components	Pages <a href="#">98 to 102</a> and <a href="#">107</a>	–	SDG 16
	103-03	Evolution of the management style	Pages <a href="#">98 to 102</a> and <a href="#">107</a>	–	SDG 16
GRI 307: Social and Environmental Compliance 2016	307-01	Social and Environmental Compliance	There were no cases of non-compliance.	–	SDG 16
Effluents and waste					
GRI 103: Abordagem de gestão 2016	103-01	Explicação do tema material e seus limites	Pages <a href="#">104 to 107</a>	–	SDG 3, 6 e 12
	103-02	A forma de gestão e seus componentes	Page <a href="#">101</a>	–	SDG 3, 6 e 12
	103-03	Evolução da forma de gestão	Page <a href="#">101</a>	–	SDG 3, 6 e 12
GRI 306: Effluents and waste 2016	306-02	Waste by type and disposal method	Page <a href="#">101</a>	–	SDG 3, 6 e 12
SOCIAL-THEMED CONTENT					
Training and education					
GRI 103: Management Approach 2016	103-01	Explanation of the material issue and its limits	Pages <a href="#">104 to 107</a>	–	SDG 4
	103-02	The management style and its components	Pages <a href="#">86 to 92</a>	–	SDG 4
	103-03	Evolution of the management style	Pages <a href="#">86 to 92</a>	–	SDG 4
GRI 404: Training and education 2016	404-01	Average training hours per employee per year	Page <a href="#">92</a>	–	SDG 4
Diversity and equity					
GRI 103: Management Approach 2016	103-01	Explanation of the material issue and its limits	Pages <a href="#">104 to 107</a>	–	SDG 5, 8 e 10
	103-02	The management style and its components	Pages <a href="#">93 to 97</a>	–	SDG 5, 8 e 10
	103-03	Evolution of the management style	Pages <a href="#">93 to 97</a>	–	SDG 5, 8 e 10
GRI 405: Diversity and equity 2016	405-01	Diversity in governance bodies and employees	Pages <a href="#">93 to 97</a>	–	SDG 5, 8 e 10
	405-02	Ratio of basic wage and pay between women and men	Page <a href="#">110</a>	–	SDG 5, 8 e 10

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SOCIAL-THEMED CONTENT (CONT.)					
Occupational health and safety					
GRI 103: Management Approach 2016	103-01	Explanation of the material issue and its limits	Pages 104 to 107	–	SDG 3 e 8
	103-02	The management style and its components	Pages 86 to 92	–	SDG 3 e 8
	103-03	Evolution of the management style	Pages 86 to 92	–	SDG 3 e 8
GRI 403: Occupational health and safety 2018	403-9	Work accidents	Page 89	–	SDG 3 e 8
Customer health and safety					
GRI 103: Management Approach 2016	103-01	Explanation of the material issue and its limits	Pages 104 to 107	–	SDG 16
	103-02	The management style and its components	Pages 41 to 43 and 111	–	SDG 16
	103-03	Evolution of the management style	Pages 41 to 43 and 111	–	SDG 16
GRI 416: Customer health and safety 2016	416-01	Health and safety impact assessment during the life cycle of products and services	The evaluation covers 100% of services and products.	–	SDG 16
Customer Data Privacy					
GRI 103: Management Approach 2016	103-01	Explanation of the material issue and its limits	Pages 104 to 107	–	SDG 16
	103-02	The management style and its components	Pages 39 and 111	–	SDG 16
	103-03	Evolution of the management style	Pages 39 and 111	–	SDG 16
GRI 418: Customer Data Privacy	418-01	Violation of privacy and loss of customer data	Einstein received three complaints from external parties (customers, employees, etc.) about cases of leakage, invasion, theft or loss of customer data, which were confirmed by the institution. In relation to these cases, a warning was applied to an employee.	–	SDG 16

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PACTO GLOBAL

Einstein is a signatory of the Global Pact, a voluntary initiative of the United Nations (UN) which aims to promote good business practice in four aspects: human rights, working conditions, environment and the fight against corruption. It 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 table below indicates the main actions carried out in 2020.

Principle	Page
Human rights	
1 	Support and respect the protection of internationally recognized human rights. <a href="#">79, 80 and 81</a>
2 	Guarantee non-participation in violations of these rights. <a href="#">79, 80 and 81</a>
Work	
3 	Support freedom of association and effective recognition of the right to collective bargaining. <a href="#">108</a>
4 	Support the elimination of all forms of forced or compulsory labor. <a href="#">81 and 82</a>
5 	Support the effective abolition of child labor. <a href="#">81 and 82</a>
6 	Eliminate employment discrimination. <a href="#">93 to 96</a>
Environment	
7 	Support a preventive approach to environmental challenges. <a href="#">98 to 102</a>
8 	Develop initiatives to promote greater environmental responsibility. <a href="#">98 to 102</a>
9 	Encourage the development and diffusion of environmentally friendly technologies. <a href="#">101 and 102</a>
Fighting corruption	
10 	Combat corruption in all its forms, including extortion and bribery. <a href="#">79 and 80</a>

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BOARD OF DIRECTORS AND COUNCILS

HONORARY PRESIDENTS

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

ELECTED BOARD

(OFFICE TERM: 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

(OFFICE TERM: 12/05/2016 TO 12/05/2022)

Claudio Luiz Lottenberg  
**President**

Israel Vainboim  
Claudia Politanski  
Claudio Schvartsman

**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 to the Board of Directors**



DELIBERATIVE COUNCIL BOARD

(OFFICE TERM: 12/05/2016 TO 12/05/2022)

Claudio Luiz Lottenberg  
**President**

Israel Vainboim  
Claudia Politanski  
Claudio Schvartsman

**Vice-presidents**

FISCAL COUNCIL

(OFFICE TERM: 12/05/2016 TO 12/05/2022)

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

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DELIBERATIVE COUNCIL

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

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

DELIBERATIVE COUNCIL

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

Abram Topczewski	Ida Sztamfater
Alberto Blay	Jacyr Pasternak
Amit Nussbacher	Jaime Zaladek Gil
Anna Maria Andrei Fischmann	Jaques Pinus
Antonio Eduardo Pereira Pesaro	João Carlos Guedes
Ari Stiel Radu Halpern	Sampaio Góes
Ariel Tabacow Hidal	Jorge Thomaz Weil
Benno Ejnisman	José Mauro Kutner
Bento Fortunato Cardoso dos Santos	Manuel Mindlin Lafer
Carlos Vicente Serrano Junior	Marcelo Giovanni Perlman
Celso Lafer	Marcelo Katz
Claudio Mifano	Marcelo Langer Wroclawski
Charles Siegmund Rothschild	Marcio Abrahão
Claudio Arnaldo Len	Marcos Alberto Lederman
Daniel Tibor Fuchs	Marcos Knobel
Eduardo de Campos Werebe	Mauricio Kurc
Eduardo Tabacow Hidal	Mauro Roberto Terepins
Eduardo Zlotnik	Meyer Joseph Nigri
Fabio Schvartsman	Moisés Cohen
Fernando Bacal	Morris Dayan
Flavio Roberto Huck	Octávio José Aronis
Flavio Steinwurz	Oren Smaletz
Gilberto Mautner	Paulo Rosenbaum
Guilherme Ary Plonski	Ricardo Botticini Peres
Guilherme Carvalhal Ribas	Roberto Luiz Leme Klabin
Gustavo Caserta Lemos	Roberto Ruhman
Hallim Feres Junior	Sandra Sandacz
Henri Philippe Reichstul	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	Ivelisa Portella Maron
Alexandre Holthausen Campos	Jacob Jacques Gelman
Alexandre Roberto Ribenboim Fix	Jayme Brasil Garfinkel
Amancio Ramalho Junior	José Carlos Evangelista
André Grunebaum	José Ribas Milanez de Campos
Andrea Sandro Calabi	Leonardo Marcos Posternak
Antonio Henrique B. Cunha Bueno	Lygia Kauffmann Rabinovich
Beni Moreinas Grinblat	Manes Roberto Erlichman
Beno Suchodolski	Marcelo Forma
Betty Knobel	Marcelo Naigeborin
Bruno Laskowsky	Marcelo Costa Batista
Carlos Eduardo Czeresnia	Maria Elvira Ramos Suchodolski
Claudio Luiz da Silva Haddad	Mario Fleck
Claudio Thomaz Lobo Sonder	Mariza de Aizenstein
Daniel Feldman Pollak	Nelson Wolosker
David Feffer	Nydia Strachman Bacal
David Zylbersztajn	Ophir Irony
Edgar Harry Ascher	Paulo Helio Monzillo
Edílio Mattei Jr	Paulo Kovesi
Eduardo Wurtzman	Pedro Luiz Mangabeira Albernaz
Eugenio Vago	Pedro Paulo Porto Junior
Evelin Diana Goldenberg	Raul Pedro Penteado Meyer
M. M. Costa	Ricardo Berkienstszat
Fernando Kasinski	Ricardo Borges Magaldi
Lottenberg	Roberto Bielawski
Fernando Korkes	Roberto Naum Franco
Flávio Tarasoutchi	Morgulis
Gisele Brandt	Sergio Barsanti Wey
Henrique Grunspun	Sergio Kulikowsky
Hilton Waksman	Sidney Klajner
Ita Pfeferman Heilberg	Wilson Roberto Sendyk

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# BOARD OF DIRECTORS AND COUNCILS

## PERMANENT MEMBERS OF THE DELIBERATIVE COUNCIL

Ildel Aronis Z'L (Deceased 5/24/2009)  
Jacob Ures Z'L (Deceased 3/12/2008)  
Jacob Werebe Z'L (Deceased 10/31/2010)  
Gert Kaufmann Z'L (Deceased 5/5/2011)  
Moyses Cutin Z'L (Deceased 1/19/2012)  
Moises Levy Z'L (Deceased 1/17/2012)  
Elíova Zukerman Z'L (Deceased 6/3/2016)  
Milly Tepermann Z'L (Deceased 2/12/2018)  
Artur Bielawski Z'L (Deceased 8/24/2018)  
Israel Schachnik Z'L (Deceased 10/10/2019)  
Joseph Yacoub Safra Z'L (Deceased 12/10/2020)  
Victor Schubsky Z'L (Deceased 12/19/2020)

Abrão Elias Frankel  
Boris Tabacof  
Carlos Schuartz  
Claudio Luiz Lottenberg  
Jairo Tabacow Hidal  
José Goldenberg  
Mario Arthur Adler  
Reynaldo André Brandt  
Roberto Kaminitz  
Ronaldo M. Eberhardt  
Samuel Szwarc

## ADVISORY BOARD

Celso Lafer  
**President**

Mario Arthur Adler  
**Vice-president**

The president of the Deliberative Council, the president-in-office of *Federação Israelita do Estado de São Paulo* and the acting president of *Confederação Israelita do Brasil* are considered natural members.

## VOLUNTEER DEPARTMENT

Telma Sobolh  
**President**

Sueli Dicker  
Sandra Sandacz  
Ivelisa Portella Maron  
**Vice-presidents**

Gertrudes Rose Mary Levy Barmak  
Rachel Reichardt  
Tauba Gitla Abuhab  
**Treasurers**

Debora Benzaquen Gelman  
Myriam Haber  
**Secretaries**



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EXECUTIVE BOARD

- Henrique Sutton de Sousa Neves  
General Director
- Miguel Cendoroglo Neto  
Superintendent-Director of Hospital Israelita Albert Einstein
- Eliezer Silva  
Superintendent-Director of Diagnostic and Outpatient Medicine
- Alexandre Holthausen Campos  
Superintendent-Director of Education
- Luiz Vicente Rizzo  
Superintendent-Director of Research
- Guilherme de Paula Pinto Schettino  
Superintendent-Director of the Instituto Israelita de Responsabilidade Social
- Anarita Buffe  
Director of Project Development and Consulting
- Cláudia Garcia de Barros  
Executive director of the Office of Excellence
- Deise de Almeida  
Executive Sales Director
- Gustavo Guacelli Taboas  
Executive Director of Supplies and Logistics

- Rodrigo Bornhausen Demarch  
Executive Director of Innovation
- Junia Gontijo Boucinhas  
Executive Director of Properties, Engineering and Infrastructure
- Katia Gontarzik Andersen  
Executive Director of InformationTechnology
- Miriam from Carmo Branco da Cunha  
Executive Director of Human Resources
- Patricia Leisnock Santos  
Chief Financial Officer
- Rogeria Leoni Cruz  
Director of Legal Affairs
- Viviane Souza Miranda  
Director of Audit, Risk Management and Compliance
- Debora da Costa Pratali Mattos de Souza  
Corporate Communications Director

BOARD OF DIRECTORS

- Marcos Roberto Gomes de Queiroz  
Medical Director for Imaging
- Alvaro Luiz da Rocha Caetano  
Service Development Director
- Claudia Regina Laselva  
Director of the Morumbi Hospital Unit
- Cristóvão Luis Pitangueira Hose  
Medical Director of the Clinical Laboratory
- Fabiana Rolla  
Medical Director of Municipal Hospitals
- José Carlos Teixeira Junior  
Director of Hospital Órion
- Otavio Berwanger da Silva  
Academic Research Organization Director
- Sergio Eduardo Alonso Araujo  
Medical Director of Oncology
- Leonardo Jose Rolim Ferraz  
Medical director - Hospital Municipal M'boi Mirim
- Paulo Marcelo Zimmer  
Director of Outpatient Medicine
- Rodrigo Gobbo Garcia  
Medical Director - Intervention Center
- Simone Cristina Azevedo Silva  
Director of Development and Corporate Education

- Haggeas da Silveira Fernandes  
Medical Practice Director, Quality and Safety
- Andrea Thome Suman  
Strategy and Data Intelligence Superintendent
- Edson Amaro Junior  
Analytics and Data Science Superintendent
- Lilian Silvestre Luccas Crestana  
Superintendent of Acquisition and Strategic Planning
- Robert Jose Carletti  
Infrastructure Superintendent
- Vanessa Damazio Teich  
Health Economics Superintendent
- Ederson Haroldo Pereira de Almeida  
Operational Excellence and Strategic Projects Superintendent
- Luciana Moraes Borges  
Director of Primary Care and Care Network
- Olga Guilhermina Dias Farah  
Director of Higher and Technical Education

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EDITORIAL BOARD

Sidney Klajner  
**President**  
Henrique Neves  
**General Director**  
Debora Pratali  
**Corporate Communications Director**

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Caroline Cid  
Giuliana Benzi

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Revision: Juliana Muscovick

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For questions or suggestions about  
this report, send a message through  
the Fale Conosco channel on our  
website [www.einstein.br](http://www.einstein.br).



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**ALBERT EINSTEIN**  
SOCIEDADE BENEFICENTE ISRAELITA BRASILEIRA

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