



ASSOCIAÇÃO PAULISTA PARA O
DESENVOLVIMENTO DA MEDICINA

"Gestão em Saúde e Educação"



SUSTAINABILITY REPORT 2024



2024

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Introduction



Introduction

(GRI 2-1; 2-2; 2-3; 2-4; 2-5; 2-14; 2-17; 2-28)

The 2024 Sustainability Report of SPDM (Associação Paulista para o Desenvolvimento da Medicina) gathers information on the organization's profile, management, and financial, social, and environmental performance, highlighting the organization's values and responsibility toward sustainability. It is the fourth edition of the document, published every two years (GRI 2-1; 2-3).

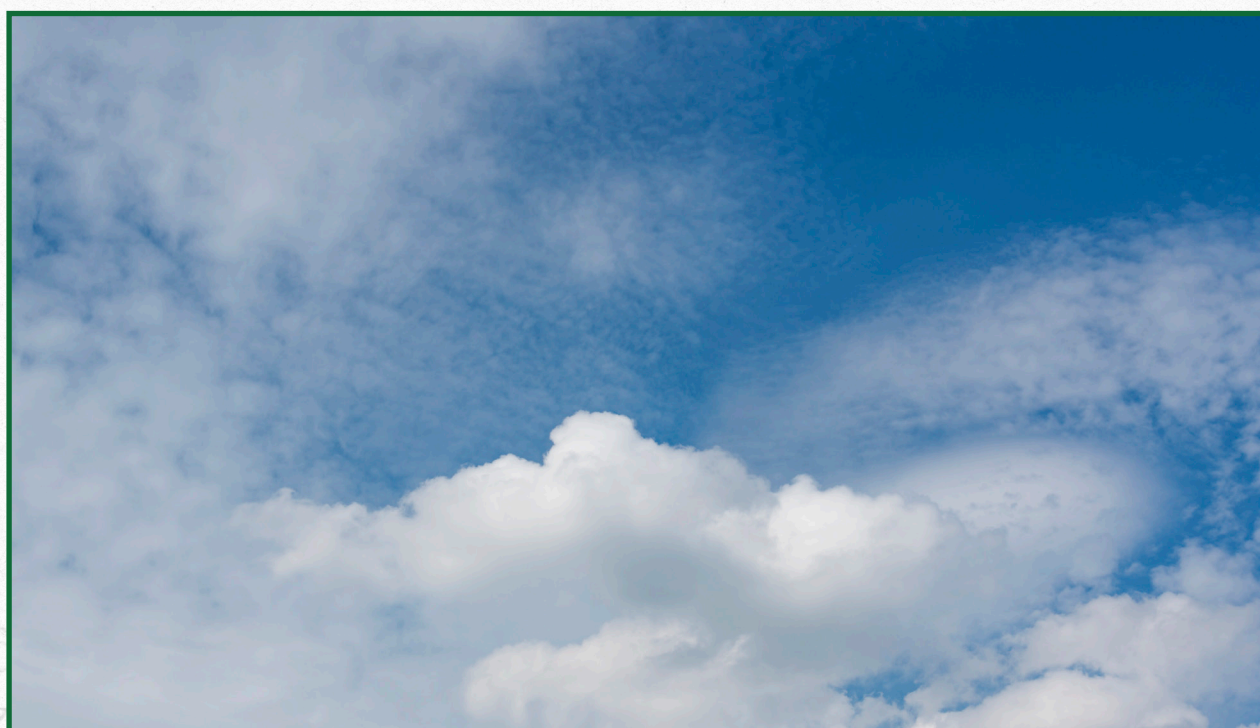
The previous report, for 2022, is available on the organization's website at: <https://spdm.org.br/wp-content/uploads/2023/10/RELATORIO-DE-SUSTENTABILIDADE-2022.pdf>. To ensure continuity of information, the current report covers data for 2023 and 2024.

The organization's financial reports are available by fiscal year on the SPDM website: <https://spdm.org.br/aceso-a-informacao/demonstracoes-de-contas-anuais/> (GRI 2-2).

Before its publication, the report underwent internal validation by the technical departments and received approval from the Board of Directors, despite not having been externally verified (GRI 2-4; 2-5; 2-14). The Board of Directors meetings address the organization's main initiatives related to sustainable development.

It is worth noting that the organization already participates in the following industry initiatives/associations: Brazilian Institute of Social Health Organizations (IBROS); Ethos Institute; Healthy Hospitals Project/Global Green and Healthy Hospitals Network; Race to Zero and the Business Pact for Integrity; World Vision NGO, LGBTI+ Business and Rights Forum; Race and Gender Equality Program (GRI 2-17; 2-28).

SPDM has reported in accordance with the GRI Standards for the period January 1, 2024, to December 31, 2024. Questions, suggestions, comments, or criticisms can be sent to sustentabilidade@spdm.org.br (GRI 2-3; 2-4).



Interview with the CEO President Director

(GRI 2-22)

“Our evolution is the sum of a path of growth and social responsibility, where each life impacted is the true meaning of our work.”



Founded in 1933, SPDM has become, over the years, one of the most respected philanthropic healthcare institutions in Brazil. With a distinguished track record in managing public healthcare facilities, education, and social assistance programs, SPDM combines innovation, transparency, and a commitment to quality in its services. Below, we speak with the institution’s CEO, who shares the organization’s most recent milestones, challenges faced, and vision for the future.

1. CEO, SPDM has had a solid trajectory since its founding in 1933. How do you see the institution’s evolution over these years?

SPDM was born from the vision of a group of physicians committed to creating a medical school in the state of São Paulo. Since then, we have embarked on a path of growth and social responsibility. Over the years, we have established ourselves as one of the largest philanthropic organizations in the country, working not only in the management of healthcare facilities but also in education and social assistance. This evolution was only possible thanks to the dedication of our professionals and the trust of our partners.

2. SPDM’s operations now extend across several regions of Brazil. What is the impact of this national presence?

We are proud to be present in several regions, serving millions of Brazilians. This reach allows us to directly contribute to the strengthening of the Unified Health System (SUS). Through partnerships with the government, we can contribute to the advancement of medicine and public health in the country.

Prof. Dr. Ronaldo Ramos Laranjeira
President Director

3. How is the Institution's Governance structured?

Ethics, transparency, and respect for standards are fundamental principles that guide our actions. All contracts signed with the government comply with current legislation, as well as national and international standards for healthcare management, education, and research. We have a Code of Conduct and Ethics that strengthens our culture of integrity.

4. In recent years, SPDM has expanded its activities in the field of education. What have been the main advances in this area?

The expansion in the educational sector reflects our commitment to training qualified professionals. Since 2018, with the founding of Faculdade Paulista para Ciências da Saúde (Paulista College of Health Sciences), we have made significant progress. We have obtained authorization for important undergraduate programs, such as Psychology, Physiotherapy, and Information Technology Management, in addition to the approval of eight Medical Residency Programs. We also created the Colégio Técnico Paulista de Ciências da Saúde (Paulista Technical College of Health Sciences), whose nursing technical program is already operational. These achievements reinforce our mission to contribute to the country's human and professional development.

5. What is SPDM's position regarding the challenges faced by the public health system?

We know that resources are limited and that the population's demands are growing. Our efforts have focused on seeking sustainable solutions, with investments in infrastructure, technology, and, above all, in the training of our professionals. We believe that service excellence is only possible with well-prepared teams and a keen eye for innovation and efficient management.

6. SPDM is recognized for its positive impact on the lives of millions of people. How do you view this social responsibility?

It's a responsibility that inspires us every day. Each service provided, each student graduated, and each life impacted represents the true meaning of our work. This mission is only possible thanks to the dedication of our employees and the trust of our partners. I sincerely thank everyone who walks with us on this journey, helping us continue promoting health, knowledge, and dignity for the population.

Materiality

Materiality

(GRI 2-29; 3-1; 3-2)

According to the GRI, material topics are those that reflect an organization’s most significant impacts on the economy, the environment, and people, including human rights. The emphasis on identifying these topics, or “materiality,” aims to make the Sustainability Report more relevant, reliable, and understandable.

Representatives from the various SPDM Superintendencies met to discuss the process of defining the material topics for the 2024 Sustainability Report. They decided to retain the topics from the previous edition, which are presented below. A review of the materiality process will be done for the next reporting cycle.

This decision is because the Materiality development process for the 2020 and 2022 Reports yielded very similar results. The latest materiality survey used 34 topics (relevant to the Healthcare Sector, based on benchmarking and GRI thematic notebooks). The topics were classified according to their relevance to different stakeholders (Senior Management; Associations/NGOs; Employees; Board of Directors/Community; Suppliers/Service Providers; Patients/Companions; Health Departments; Universities) using a Likert scale from 1 to 5, based on their level of interest, with 1 (no interest in the topic) to 5 (complete interest in the subject).

The table below presents the list of 34 topics and acronyms created, with (E) for economic, (S) for social, and (A) for environmental issues:

Code	Material Topics	Code	Material Topics
E1	Economic performance	S4	Training and education
E2	Procurement practices	S5	Diversity and equal opportunity
E3	Market presence	S6	Supplier social assessment
E4	Indirect economic impacts	S7	Complaints and grievance mechanisms
E5	Anti-corruption (Compliance)	S8	Non-discrimination
E6	Tax	S9	Freedom of association and collective bargaining
E7	Technological innovation	S10	Child labor
A1	Energy	S11	Forced or compulsory labor
A2	Water and effluents	S12	Local communities
A3	Emissions	S13	Patient health and safety
A4	Waste	S14	Patient privacy
A5	Chemical substances and toxic materials	S15	Patient experience
A6	Environmental education and awareness	S16	Disease prevention and health promotion / mental health
A7	Supplier environmental assessment	S17	Humanization
S1	Employment	S18	Quality of care
S2	Labor/Management relations	S19	COVID-19 pandemic
S3	Occupational health and safety	S20	Volunteering



The team applied the electronic survey for one month. It actively distributed it to various audiences through internal communications, emails, bulletin boards, and other channels to gather as many responses as possible. As shown in the table below, respondents submitted a total of 4,413 answers, marking a 43% increase in participation compared to the previous survey.

Stakeholder	Number of responses obtained
SPDM Board	37
Associations/NGOs	8
SPDM Employees	4152
Community	10
Suppliers	98
Patient/	46
Health Department	18
University	44
Total	4413

Based on the responses obtained in the survey, the Materiality Matrix was prepared, as follows:



The 15 material topics that generated the most significant interest from internal and external stakeholders were selected. Furthermore, the Working Group responsible for preparing the Report added a 16th topic, “(A3) - Emissions,” as a material topic, given the work already carried out at the Institution to develop a greenhouse gas (GHG) inventory and manage these emissions, which has received international recognition. Below is the list of material topics defined for this Report:

N	Code	Material topics
1	S13	Patient health and safety
2	S3	Occupational health and safety
3	S4	Training and education
4	S17	Humanization
5	S16	Disease prevention and health promotion / mental health
6	S1	Employment
7	S18	Quality of care
8	S2	Labor/Management relations
9	S14	Patient privacy
10	S8	Non-discrimination
11	S15	Patient experience
12	S5	Diversity and equal opportunity
13	A6	Environmental education and awareness
14	E5	Anti-corruption (Compliance)
15	E7	Technological innovation
16	A3	Emissions

The list of material topics, brief description of the topics, and limits to the material topics (where the impacts occur and the Institution’s involvement with the impacts) are described in the data in the table below:

#	MATERIAL TOPICS	CODE	MATERIAL TOPICS DESCRIPTION	WHERE DOES THE IMPACT OCCUR?	SPDM INVOLVEMENT
1	Patient health and safety	S13	Systemic and continuous application of policies, procedures, conduct, and resources aimed at reducing risk and improving patient care outcomes.	Patients	Impact caused by the Institution
2	Occupational health and safety	S3	Management of risks associated with the work environment, seeking to minimize work accidents and occupational diseases.	Employees	Impact caused by the Institution
3	Training and education	S4	Continuing education program for the organization's professionals.	Employees	Impact caused by the Institution
4	Humanization	S17	Institutional actions aimed at improving the quality of relationships between people in health services.	Patients	Impact caused by the Institution
5	Disease prevention and health promotion / mental health	S16	Quality of life programs and actions developed for employees and the public.	Society	Impact caused by the Institution
6	Employment	S1	Report on hiring, turnover, benefits, and information on legally required leave for the organization's employees.	Employees	Impact caused by the Institution
7	Quality of care	S18	Systematic actions necessary to ensure that the services provided meet the quality standards required for their intended purposes.	Patients	Impact caused by the Institution
8	Labor/Management relations	S2	Compliance with labor legislation, definition of responsibilities and duties, promotion of a favorable environment for the development of tasks.	Employees	Impact caused by the Institution
9	Patient privacy	S14	Includes issues such as data protection, ensuring the use of information or data is limited to its original purpose.	Patients	Impact caused by the Institution
10	Non-discrimination	S8	The act and result of treating people equally, treating each person fairly based on individual merit.	Society	Impact caused by the Institution
11	Patient experience	S15	Management of variables that affect patient perception and the satisfaction of their expectations and needs in the relationship with Health Services.	Patients	Impact caused by the Institution
12	Diversity and equal opportunity	S5	Guaranteeing equal opportunities in professional development and building an environment conducive to the inclusion of minorities, the democratization of the labor market, and the construction of a diverse company.	Society	Impact caused by the Institution
13	Environmental education and awareness	A6	Organization's actions related to raising environmental awareness among employees and the community.	Society	Impact caused by the Institution and its relations with the value chain
14	Anti-corruption (Compliance)	E5	Policies, procedures, and values adopted to prevent and combat cases of corruption, fraud, extortion, bribery, and other illegal practices, explaining the stance to be adopted by employees regarding the activities carried out.	Society	Impact caused by the Institution and its relations with the value chain
15	Technological innovation	E7	Implementation of solutions to improve the provision of healthcare services.	Society	Impact caused by the Institution
16	Emissions	A3	Management of greenhouse gas emissions.	Society	Impact caused by the Institution and its relations with the value chain



Who we are



(GRI 2-1; 2-6)

SPDM is a philanthropic, non-profit civil association that works in the areas of health and education, to contribute to the improvement of services provided to the population.

Founded in 1933 by a group of doctors to create a medical school and thus address the lack of vacancies in São Paulo, over the past 90 years, SPDM has become the most prominent social health organization in Brazil.

SPDM's commitment to the community is evident in its comprehensive range of services. In addition to the São Paulo Hospital, which was established in 1940 to provide bedside education to students of the Escola Paulista de Medicina (Paulista School of Medicine), SPDM manages an Academic-Care Network that brings together various health facilities at all levels. These facilities, from basic care to highly complex hospitals, complement each other, offering care to the population and providing training and

development opportunities for health professionals. SPDM's involvement in the Social Assistance and Education sectors has further expanded its services to support and promote the rights of people with disabilities. It also offers undergraduate programs, postgraduate MBAs (Specialization), extension courses (free courses), the São Paulo Technical College of Health Sciences, the approval of eight medical residency programs, FIES (Funds of the Future) and PROUNI (Prouni) programs, and the management of Early Childhood Education Centers.

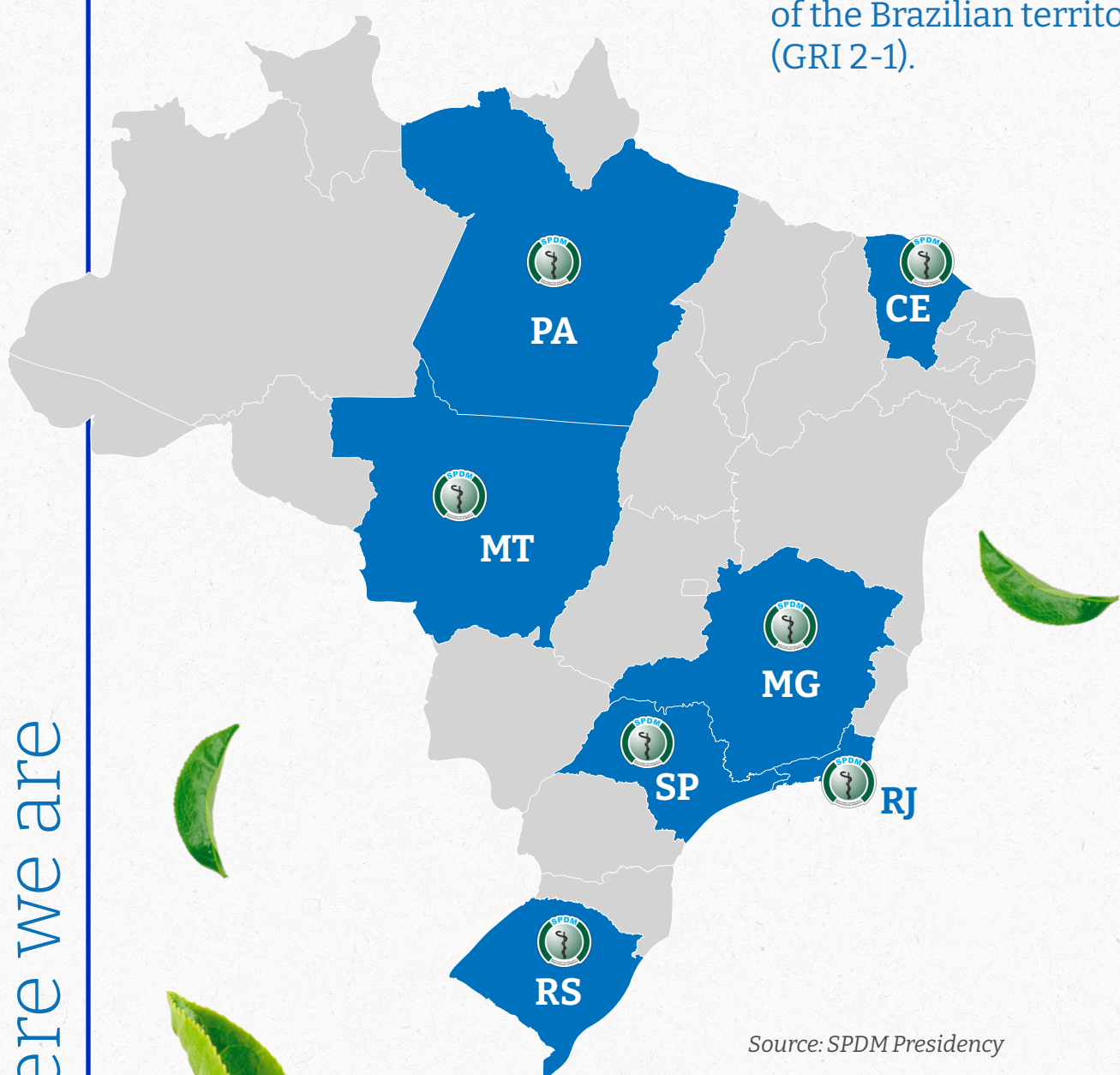
Today, SPDM operates on a national scale, spanning seven states, with 5,650 hospital beds and approximately 18 million medical appointments. It also plays a crucial role in educating approximately 50,000 students at 83 higher education institutions and 40 technical education institutions across all medical, research, and related specialties.



Where we are

SPDM IN BRAZIL

The services managed by SPDM are in 7 states of the Brazilian territory (GRI 2-1).



Source: SPDM Presidency

The list of services managed by SPDM, by type, is presented below (GRI 2-6):

TOTAL NUMBER OF INSTITUTIONS MANAGED BY TYPE OF SERVICE	
SPECIALTY OUTPATIENT CLINICS	10
SPECIALIZED ATTENTION	32
PRIMARY HEALTH CARE	221
PSYCHOSOCIAL CARE	47
REHABILITATION CENTER	2
CHILDHOOD EDUCATION CENTERS	11
REGULATORY CENTER (CROSS)	1
FACULTY	1
HIGH COST PHARMACIES	6
HOSPITALS	23
DAY HOSPITAL / BIRTH HOUSE	6
PUBLIC-PRIVATE PARTNERSHIP HOSPITAL	1
LABORATORY	1
“REDE” PROJECT	1
TECHNICAL HEALTH SUPERVISION ASSISTANCE NETWORK (RASTS)	39
INDIGENOUS HEALTH	5
SPDM CONSULTING	1
INTEGRATED SERVICE UNITS (UBERLÂNDIA CITY)	50
MENTAL HEALTH UNITS	7
URGENCY AND EMERGENCY	32
Total	497

Source: SPDM Presidency

NOTE: The detailed list of services managed by SPDM is in Annex I of the Report.
SPDM production data:

Data	2023	2024
Consultation	16.057.655	18.295.729
Non-medical consultation	5.088.420	5.422.480
Tests	33.227.467	35.471.707
Registered families	854.965	843.821
Distributed medications	159.645.973	175.943.588
Registered users	3.236.572	3.178.465
Home visits	10.487.199	9.780.967

Source: SPDM Presidency

Number of beds:



Number of hospital beds	
2023	5.634
2024	5.650

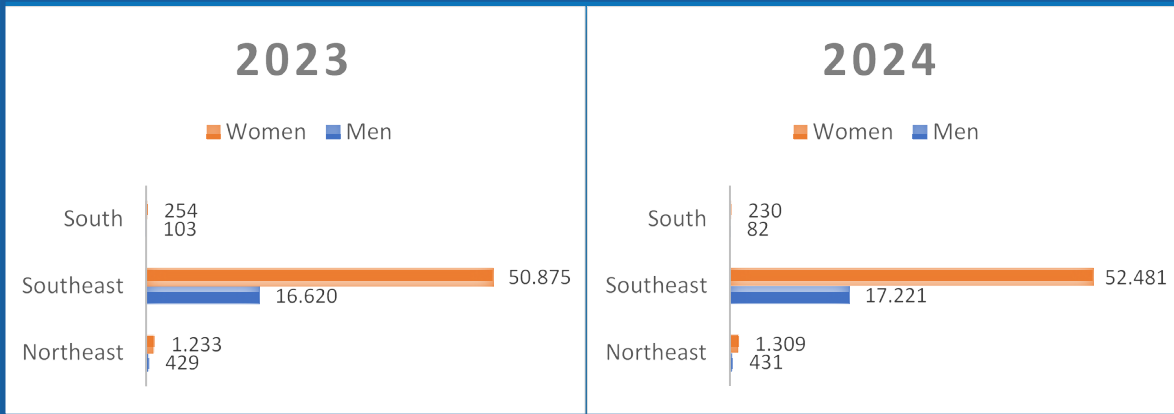
Source: SPDM Presidency



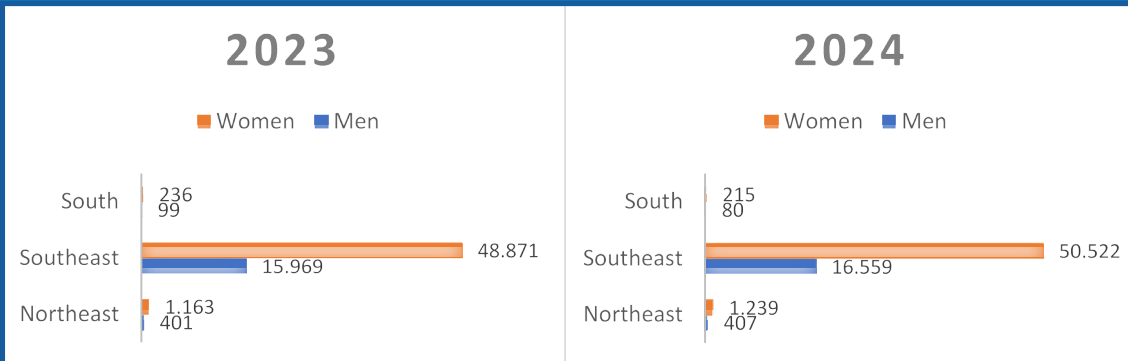
(GRI 2-7; 2-8)

SPDM presents the data below regarding its workforce. The graphs provide a view of the total number of men and women in the institution, distributed by geographic region of operation in Brazil, in the following categories:

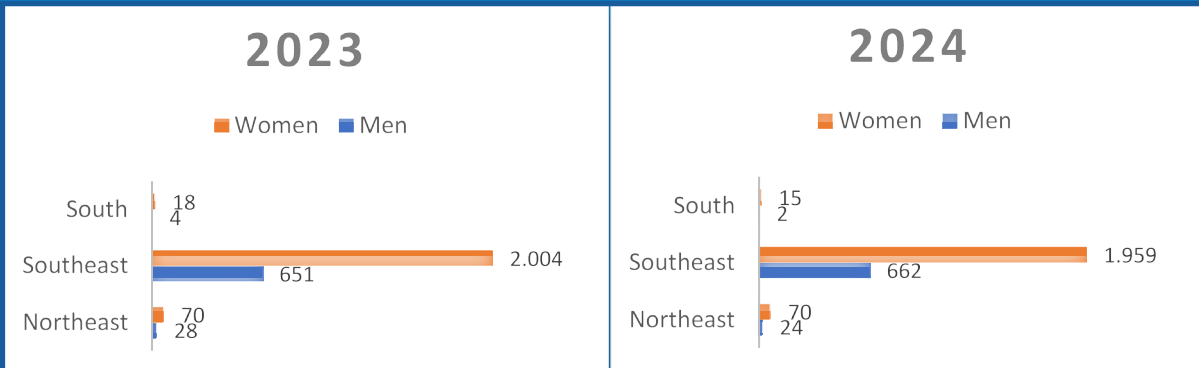
Total number of employees by gender and region



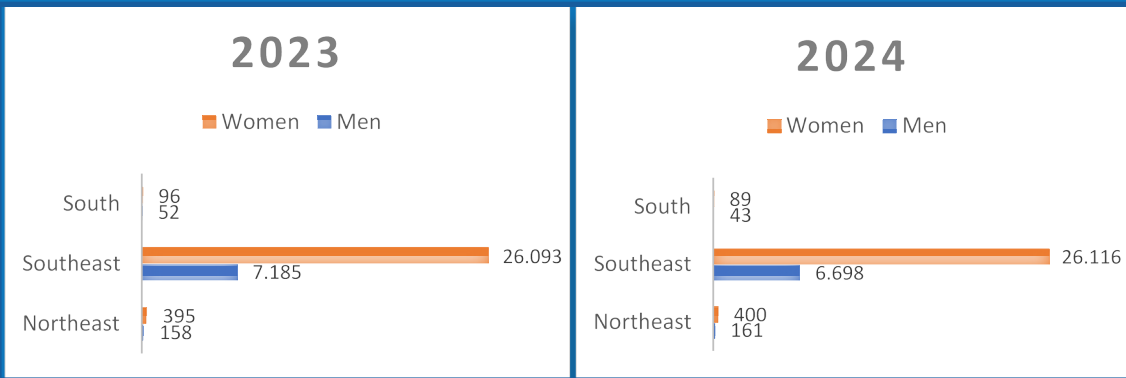
Total number of permanent employees, by gender and region:



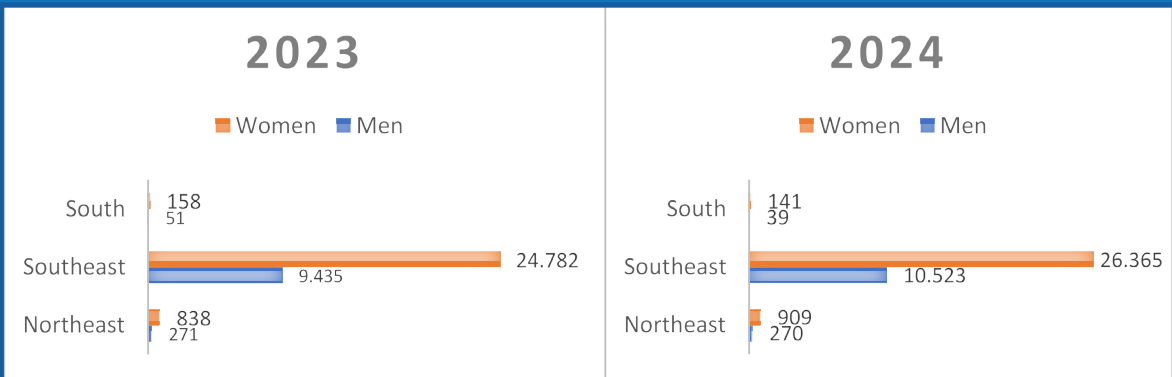
Total number of temporary employees, by gender and region:



Total number of full-time employees, by gender and region:



Total number of part-time employees, by gender and region:

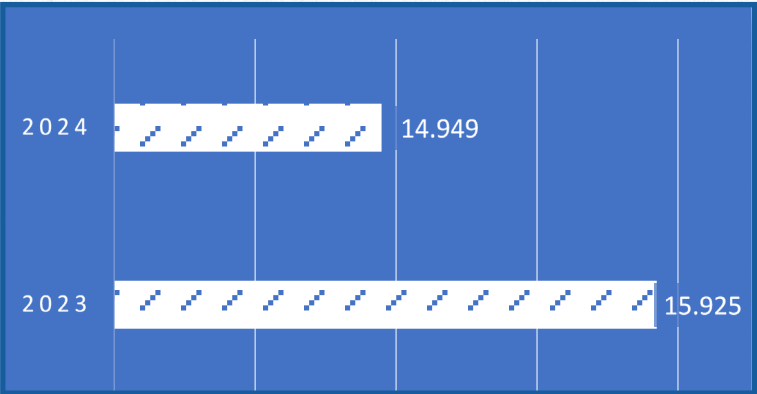


Note: SPDM does not have professionals without guaranteed working hours (2-7 b.III).



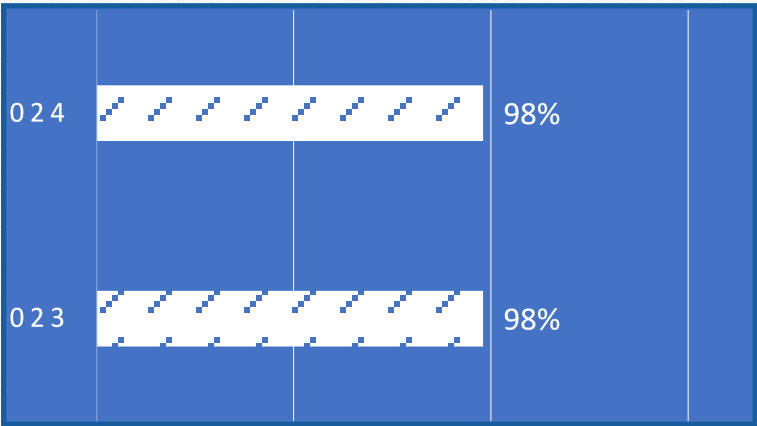
(GRI 2-8)

Note: Employees who do not have a direct employment relationship with SPDM but whose activities are controlled by the Institution may be classified into the following categories: self-employed workers, interns, professionals hired by a partner company, residents, seconded public servants, volunteers, and others. These professionals perform a variety of activities, according to the specific needs of each unit, contributing to the achievement of institutional goals and the maintenance of contracts and agreements with service providers.



Total number of non-employee employees whose work is controlled by the Institution (GRI 2-8)

Percentage of employees covered by collective bargaining agreements:



It is essential to highlight that, regardless of whether the professional is covered by collective bargaining agreements, working conditions and terms of employment strictly follow the provisions of the Consolidation of Labor Laws (CLT) and the Labor Regulatory Standards (NRs).



Mission, Vision and values

MISSION

VISION

VALUES

Mission, vision and values



Mission

Act with excellence in health care without prejudice, distinction, or classification of citizens.



Vision

Be recognized as a Brazilian Philanthropic Organization in Health with greater coverage and competence.



Valores

Training
Social commitment
Reliability
Entrepreneurship
Equity, Ethics
Humanization
Quality, ecological, economic and social sustainability
Transparency
Tradition



Corporate Governance

SPDM is a private, non-profit, philanthropic association, recognized as a public utility at the federal, state, and municipal levels, respectively, by Decrees No. 57,925 of March 4, 1966, 40,103 of May 17, 1962, and 8,911 of July 30, 1970. It is governed by its Bylaws and applicable legislation (GRI 2-1).

As a philanthropic healthcare organization, SPDM is committed to providing services to the public, regardless of ethnicity, gender, creed, or religion, and to providing services to SUS clients.

Aligned with its mission, which focuses on the public interest, SPDM generates value for society by sharing with all managed units the excellence of its healthcare services, the maturity and solidity of its governance, and its principles (GRI 2-1).

The Association's primary guideline is its integration into the healthcare system, focused on treatment and disease prevention, and the promotion of primary, secondary, and tertiary healthcare, strengthening ties with the local community and reaffirming its social commitment to serving everyone without discrimination.

With institutional growth, SPDM has been expanding its scope of operations with projects currently under development in the areas of Social Assistance and Education.

This range of activities consolidates it as a large-scale philanthropic institution that strives for economic, social, and environmental sustainability. One of the most significant challenges facing healthcare institutions is organizing their effective operations as they grow and evolve, a challenge SPDM has successfully overcome.

One of SPDM's distinguishing features is the use of a management system honed over decades. Its work is based on modern management techniques and tools, the pursuit of innovation, the appreciation of the environments in which it operates, both internally and externally, and the appreciation of the people with whom it interacts, whether its professionals, patients and their families, suppliers, contracting and regulatory agencies, among others.



SPDM's actions in contracts with public authorities are guided by strict compliance with applicable legislation and national and international standards for the operation and management of healthcare, teaching, and research facilities. The services are provided by a technical manager, a legal representative approved by the SPDM Board of Directors.

Each service is established as a Branch and has its own CNPJ (Brazilian Registry of Legal Entities), specific bank accounts, and individual financial statements, which allow for the preparation of project-based financial statements

(contracts and agreements) and the disclosure of financial statements (assets, liabilities, revenues, expenses, and costs) monitored by an independent auditor (GRI 2-18).

Each branch is responsible for publishing specific balance sheets, activity and service delivery reports, as well as production and service data (SUS and Non-SUS), in compliance with oversight and control agencies at the municipal, state, and federal levels, such as the Audit Courts, Health Departments, and the Ministry of Health (GRI 2-18).

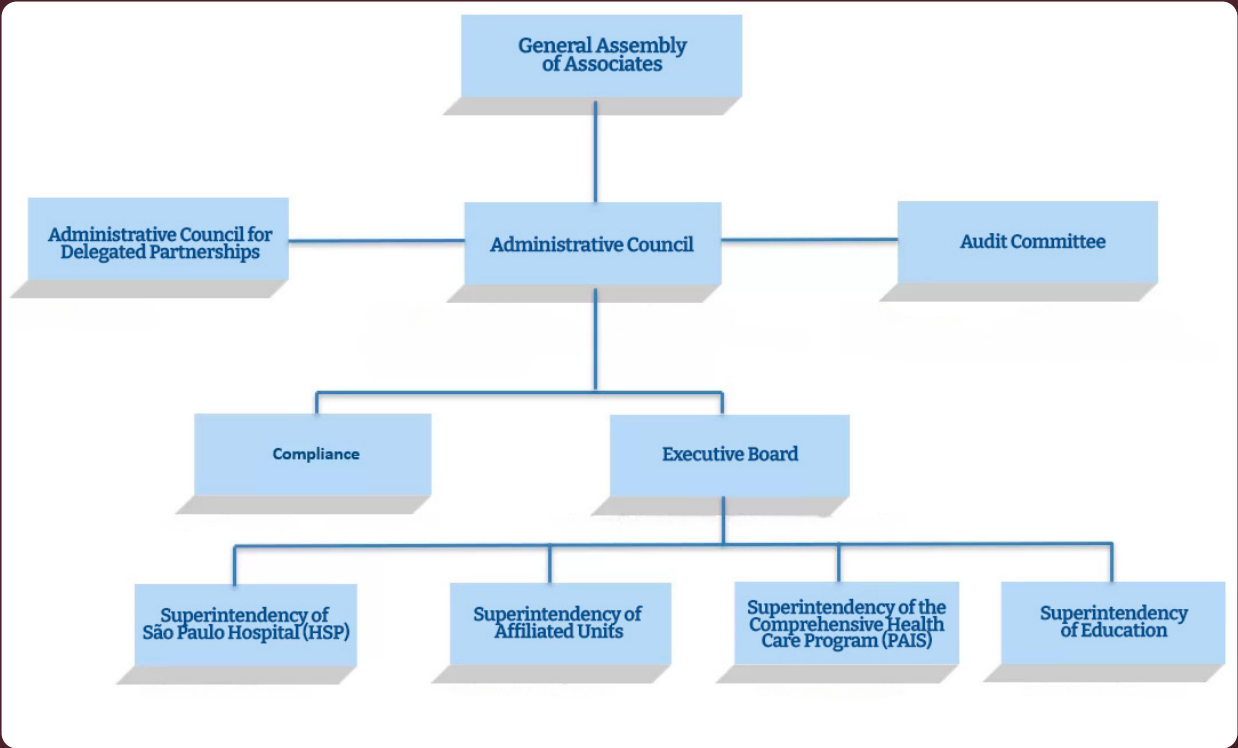
Governance Model

SPDM's corporate governance model has been consolidated and strengthened throughout its more than 90 years of existence. The institution's governance is carried out through a competent executive structure responsible for planning, organizing, directing, and controlling the set of resources that determine local activities to achieve its objectives. (GRI 2-1).



Structure

A estrutura organizacional da SPDM é composta pela Assembleia Geral de Sócios, Conselho Administrativo, Conselho Fiscal, cujos integrantes não recebem remuneração pela função, Compliance, Diretoria Executiva e Superintendências (GRI 2-9; 2-19; 2-20).



SPDM Organizational Chart (GRI 2-9)



General Assembly of **Associates**

Composed of tenured professors from UNIFESP's permanent active staff, or retired professors, assigned to its academic departments, with activities in undergraduate health programs, held at the São Paulo/Vila Clementino Campus. It is the highest deliberative body of the SPDM, responsible for electing and dismissing members of the Administrative Board (55%) and the Fiscal Council, amending the Bylaws, approving the appointment and dismissal of members of the Executive Board, approving the annual accounts submitted by the Administrative Board, approving acts resulting in the disposal of movable and immovable assets with a value above 10% of the SPDM's net worth, as well as acquisitions of assets with values above 15%, and deciding on the dissolution of the SPDM (GRI 2-10).

Administrative Council

The SPDM's highest deliberative body is composed of 9 (nine) members, 5 (five) elected from among their peers at the General Assembly, 3 (three) members of the community of renowned professional ability and recognized moral integrity, and 1 (one) member chosen from among SPDM's employees. The term of office of the members of the Board of Directors is 4 (four) years. Among the various responsibilities of this body, as outlined in the bylaws, is the responsibility for conducting the strategic, political, and executive management of SPDM, as well as establishing general guidelines for achieving the statutory objectives, monitoring compliance with the defined policies and goals, and approving: the execution of contracts and agreements in general with public institutions, their management contract proposals, budgets, investment programs, the creation and closure of branches, financial and accounting statements, as well as SPDM's annual accounts, regulations for contracting works and services, purchases and disposals, job and salary plan, etc (GRI 2-11; 2-12).

Executive Board

Composed of the Chief Executive Officer and Vice-President, appointed by the Administrative Council and approved by the General Assembly, with an indefinite term. The Chief Executive Officer is responsible, among the various duties provided for in the bylaws, for fulfilling the institutional objectives and ensuring economic and financial stability; drafting the SPDM's Internal Rules; complying with and enforcing the Bylaws, Internal Regulations, Manuals, and Codes of Ethics, in addition to the resolutions of the General Assembly and the Board of Directors; monitoring the performance of the Units operated by the SPDM; coordinating the administrative, patrimonial, and financial policies of the SPDM; preparing the SPDM's management and activity reports, the annual budget, and its respective accounting and financial statements; and submitting the annual accounts, the annual budget forecast, the Balance Sheet, and other accounting and financial statements to the Senior Councils and the General Assembly. The Vice-President Director is responsible for replacing the President Director in his absence or impediment and for exercising the powers delegated to him by the President Director (GRI 2-13; 2-14; 2-21).

Fiscal Council

Composed of 3 (three) full members and 3 (three) alternate members, whether associated or not, elected by the General Assembly, with a term of 4 (four) years, it is responsible for examining the accounts, balance sheets, accounting books and documents of the entity, issuing an opinion, including on the report and annual financial statements prepared by the Administrative Council and other duties that the law, the SPDM statute and other governing bodies entrust to it.

Integrity/Compliance Program

(GRI 3-3; 205-2;205-3)

The vision of citizenship and social responsibility, aligned with a strategy that prioritizes the training and qualification of people, excellence, and operational efficiency, with an emphasis on sustainability, transparency, and ethical conduct, is an essential foundation of governance, contributing to the Institution’s long history.

The ethics and transparency of SPDM’s actions impact not only institutional sustainability but also the intangible results of the ecosystem in which it operates. In this sense, the integrity program naturally expresses the main actions that are also integrated with social and environmental aspects, both internally and externally. We highlight:

SPDM’s voluntary commitment to the Global Green and Healthy Hospitals Agenda since 2012, an international initiative launched by the non-governmental organization Health Care Without Harm. As one of the first healthcare organizations to adhere to the agenda, SPDM received a certificate as a founding member of the Global Green and Healthy Hospital Network in Brazil.

Joining the Race to Zero campaign of the United Nations Framework Convention on Climate Change (UNFCCC), with emissions reduction targets for the 2030s and net-zero emissions by 2050.

Commitment to the Pro-Gender and Racial Equity Program – Ministry of Women of the Federal Government.

Joining the Come, You Can Project – Inclusion of migrants and refugees.

Joining the LGBTI+ Business and Rights Forum.

Partnership with the Indigenous Young Apprentice Program (PJAÍ).

Creation of an Inclusion and Diversity Committee.

Cooperation Agreement “My Inclusive Job Program”.

Data Privacy Week.

Globally, we align our strategy with the ten universal principles of the UN Universal Compact, based on human rights, labor, the environment, and anti-corruption. SPDM is committed to supporting and disseminating these principles, making efforts to communicate them to employees, partners, customers publicly, and the public. We also pledge to participate in and engage with the Global Compact through the development of strategic actions related to the Sustainable Development Goals (SDGs).

As part of its strategy for the 2019/2020 period, it established the goal of joining the Ethos Institute’s Business Pact for Integrity and Against Corruption as a catalyst for

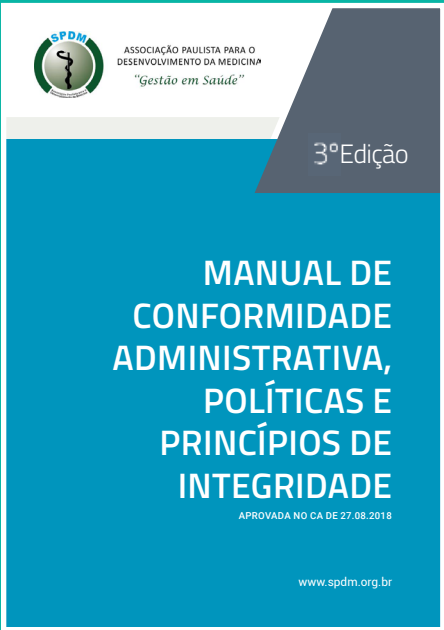
consolidating the Integrity Program. This initiative seeks to demonstrate SPDM’s commitment to implementing actions aimed at identifying and preventing risks, both within its internal processes and in its relationships with various stakeholders (GRI 2-28).

Based on experiences, overcoming crises, and learning from the past, we will pursue our vocation, focusing on present opportunities and future trends, with deep gratitude to society, partners, government, and especially our professionals for their daily ethical actions, reflected in the Institution’s culture of integrity.

(GRI 2-15; 2-16; 2-23; 205-2)

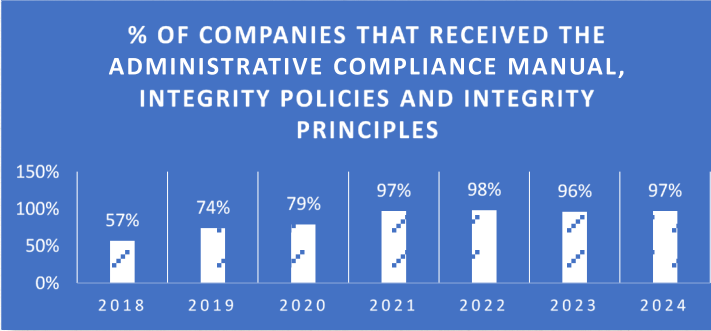
The SPDM Administrative Compliance, Policies, and Integrity Principles Manual (GRI-102-16) was developed by the organization’s values and ethical principles to foster transparency, regulate the organization’s internal and external relations, manage conflicts of interest, protect physical and intellectual assets, and consolidate good corporate governance practices in conjunction with other regulatory instruments of the institution. These ethical principles should underpin the negotiation of contracts, agreements, the bylaws, and the policies that guide the institution’s management. Its purpose is to express the commitment of the institution, its board members, directors, employees, suppliers, and stakeholders to adopting appropriate standards of conduct (GRI 205-2). To ensure awareness, all directors, board members, employees at any hierarchical level, third parties, partners,

suppliers, physicians, and other service providers are informed from the beginning of their relationship with SPDM about the culture, values, and importance of the code of conduct.



Manual of Administrative Compliance, Policies and Principles of Integrity.
<https://spdm.org.br/flip/manual-de-conformidade-administrativa-politicas-e-principios-de-integridade/>





To disseminate the Administrative Compliance Manual to internal and external audiences, SPDM utilizes various communication channels, including banners displayed inside units, institutional videos, websites, the intranet, and mobile apps. To complement and support the dissemination of the SPDM code of conduct, we create videos presenting the chapters of the Administrative Compliance Manual, Policies, and Integrity Principles. These videos are available on the SPDM website and intranet.



Screenshots of videos are available at:
<https://www.spdm.org.br/manual-de-conformidade-animacoes>

The SPDM codes, policies, and manuals aim to provide greater transparency to management and internal processes, aiming at quality, safety, transparency, and ethics in carrying out processes in the units under its management, as well as compliance with current legislation at the Federal, State, and Municipal levels (GRI 2-23; 2-24).



Risk Assessment and Internal Controls

SPDM’s actions in contracts with public authorities are guided by strict compliance with applicable legislation and national and international standards for the operation and management of healthcare, teaching, and research facilities.

From a risk management perspective, SPDM has classified its activities into two major areas, based on the complexity and magnitude of associated events.

Thus, there are two work fronts: one focusing heavily on healthcare risk management and another on implementing ad-

ministrative/financial risk management.

The administrative/financial environment concentrates many administrative operations and all financial transactions, making it one of the main objectives in mapping integrity risks. Considering that the units managed by SPDM have standardized and computerized administrative and economic processes, known as horizontal processes, the risk management implemented encompasses the entire institution (GRI 2-26).



Legal Requirements Management

To comply with current legislation and mitigate risks, SPDM establishes in its strategy the monitoring of the legal requirements applicable to each of its units (GRI 2-27).



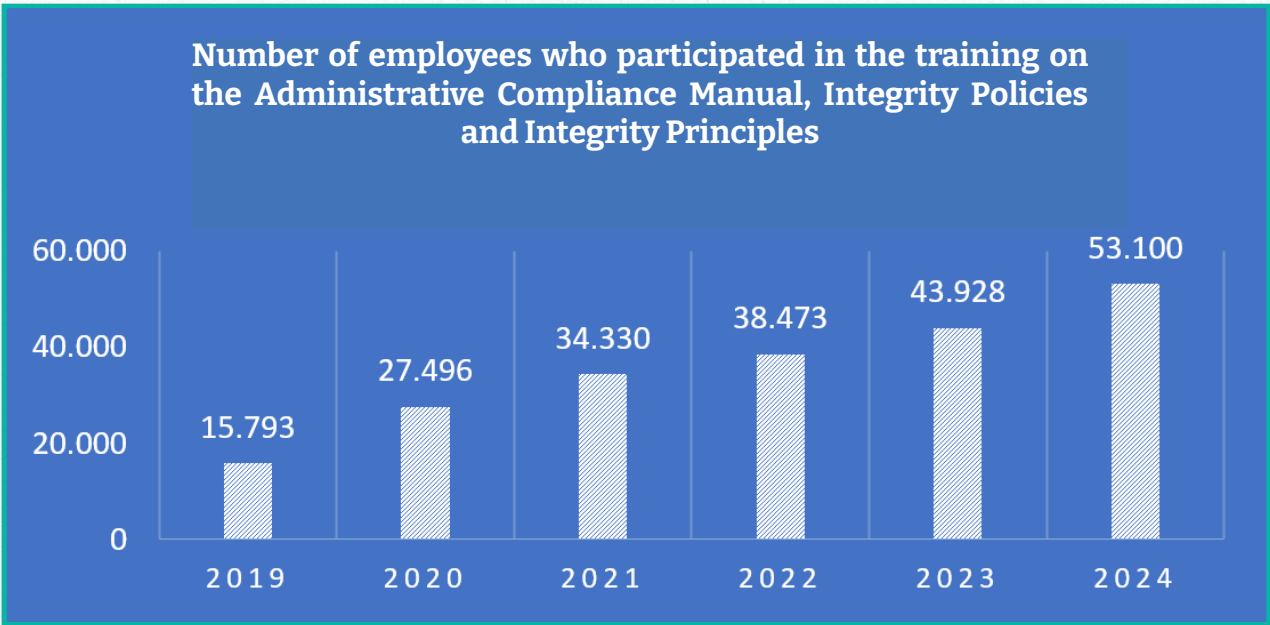
Training and Communication

SPDM's Compliance communications and training strive to be objective and practical. SPDM recognizes the need for employees and third parties to understand the Institution.

Consequently, SPDM/Compliance must identify the target audiences for training and communications and develop a communication and training plan aligned with the Compliance program, applicable to all levels of the Institution's professionals. SPDM's communication plan aims to promote a diagnosis of the Institution's image,

ensuring that all stakeholders, such as employees, suppliers, service providers, patients, and others, are involved in disseminating the communication and understand its content.

All stakeholders are included in the training on the Institution's culture, values, and conduct, with emphasis on the Administrative Compliance Manual, Policies, and Integrity Principles.



To access more information about Training and Communication activities at SPDM, access the SPDM Compliance and Integrity Report 2023/2024, through the website:

<https://spdm.org.br/wp-content/uploads/2023/04/Relatorio de Compliance e Integridade 2022.pdf>



Integrity Program Seminar

In 2024, cycles of seminars and lectures were initiated to disseminate the SPDM Integrity Program.



I Seminário do Programa de Integridade da SPDM

O programa de integridade e suas diferentes perspectivas

O I Seminário do Programa de Integridade da SPDM tem como objetivo difundir ações norteadoras que possam contribuir para o fortalecimento da cultura de integridade e transparência.

PROGRAMAÇÃO

- 14h Abertura
- 14h15 Apresentação - Área de Compliance SPDM
- 14h30 Compliance no Terceiro Setor
Dr. Anderson Vilar Ferraz
Diretor Jurídico da SPDM
- 15h15 Horizontes da Compliance no Brasil
Dr. Raphael de Matos Cardoso
Compliance Officer da MZBL Advogados
- 16h Coffee-break
- 16h15 Compliance e Integridade na Johnson & Johnson MedTech
Dr. Felipe Martins Maester
Health Care Compliance Officer da Johnson & Johnson MedTech
- 17h30 Encerramento

**DATA**
08/10/2024

**HORÁRIO**
14 horas

**EVENTO ON-LINE**
Transmissão ao vivo pelo Teams



Promoção da Integridade e combate à corrupção

Palestra com a Profa. Marcela Greggo

**DATA**
11/12/2024
Quarta-feira

**EVENTO ONLINE**
Transmissão pelo Teams

**HORÁRIO**
Das 14h às 15h30

**INSCRIÇÕES**
Clique aqui e inscreva-se

PROFA. MARCELA GREGGO
Coordenadora de projetos de Integridade, Transparência e combate à corrupção no Instituto Ethos, professora universitária, especialista em direito penal econômico (FGV/SP) e mestranda em governança global e formulação de políticas internacionais (PUC/SP)



The events were widely publicized to internal and external audiences, being held in person and online, totaling around 2,000 participants.

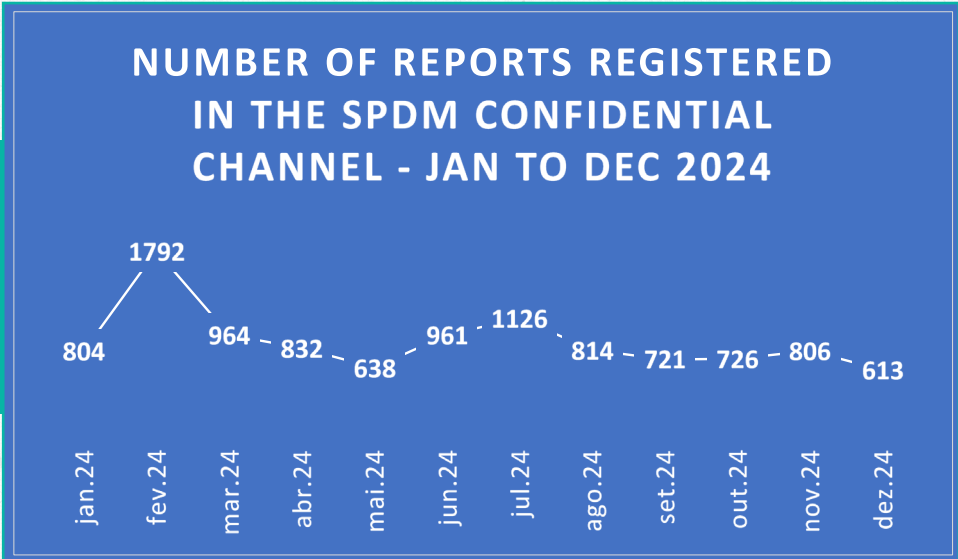
Reporting and Investigation Channels

The Reporting Channel (Confidential Channel) – available at <https://www.spdm.org.br/sistemas/canalconfidencial> - is a means provided by SPDM for receiving reports that constitute acts of an illicit nature, with a guarantee of secrecy, confidentiality, and non-retaliation of the complainant, and the investigation is carried out by an Investigation Committee with total independence and functional autonomy.

SPDM ensures good faith reporting and guarantees the confidentiality of all reports and complaints.

SPDM’s whistleblower channel is available in Portuguese and is accessible 24 hours a day, including anonymously. It allows complainants to monitor their reports and provide information, conclusions, interruptions, and compensation for damages determined by SPDM.

Number of reports received by the SPDM Confidential Channel



Corruption cases registered on the SPDM Confidential Channel are investigated by the Compliance department and investigation committees/commissions, with representation from senior management (GRI 2-16; 2-25; 2-26).

Total number and nature of confirmed incidents of corruption: none (GRI 205-3).

Relationship with Partners

When implementing the integrity program, it is essential to include perspectives on acquisitions, contracts, and relationships with suppliers.

To this end, the SPDM Supplier Manual was developed to express the organization's commitment to adopting appropriate standards of conduct in its relationships with suppliers who, in addition to technical capability, demonstrate a commitment to environmental preservation, compliance with and respect for issues related to human rights, employee health and

safety, policies and practices for promoting diversity, and acting ethically and responsibly.

The SPDM Supplier Manual also outlines the steps and criteria used in supplier selection and evaluation. Its last revision occurred in 2023, with the inclusion of aspects related to Data Privacy and Information Security, Environmental Management, and Human Rights (GRI 2-23; 2-24; 2-29).



SPDM Suppliers Manual – 3rd edition – accessed at: <https://spdm.org.br/flip/manual-de-fornecedores/>

Regardless of whether a purchase is made, every supplier registered on the portal and interested in submitting quotes to SPDM automatically receives guidance on the Administrative Compliance Manual (Code of Conduct) and the SPDM Supplier Manual for all quotes submitted via the electronic purchasing platform.

SPDM has a Supplier Qualification Technical Committee that conducts document qualification activities, conducts technical visits, monitors regulatory alerts, monitors product quality deviations, and, from a compliance perspective,

conducts due diligence to strengthen the integrity of SPDM's relationships with suppliers, partners, and service providers.

Information verification encompasses the corporate and regulatory structures of third parties, as well as unethical practices, corruption, fraud, or any other form that could expose the institution to reputational integrity risks in business. (GRI 2-27).



Monitoring **Compliance** Actions

The Compliance Program benchmarks the level of integrity, provides guidance, and supports decision-making and measures that need to be implemented to positively influence the entire SPDM in adopting ethical and compliance practices in its activities (GRI 2-25).

Among the tools used to monitor the integrity program's actions, the culture of integrity survey, conducted since 2019, stands out. Its objective is to understand employee perceptions of the work environment and ensure that SPDM's policies and standards of conduct are aligned with the institution's ethics and values, guaranteeing integrity.

Integrity Culture Survey

The last survey conducted in December 2024, presented the following results: 97% of employees received the SPDM administrative compliance manual, policies and integrity principles (code of conduct), 90% participated in the code of conduct training, 96% know the confidential channel (SPDM reporting channel), 83% feel comfortable filing a complaint and 91% understand that the board provides an ethical environment in the institution.



Relationship with Suppliers

Relationship with Suppliers

(GRI 2-6)

SPDM maintains relationships with suppliers who access the purchasing and contracting processes through electronic purchasing portals and advertising conducted via online websites.

Supplier acquisitions and contracting are aligned with institutional policies, standards, and regulations that strategically establish the reference parameters for the Institution's purchases, including criteria such as costs, compliance, quality based on the history of product/service evaluations, and sustainability.

In 2018, SPDM began mapping its supply chain to understand the risk factors associated with the different categories of product and service supply.

Its included understanding their criticality about various aspects: operational (regarding service capacity, criticality to core activities, and degree of dependence on ins-

titutions), socio-environmental (regarding the degree of severity to the environment, health, occupational safety, and human rights), and integrity (preventing potential associations that pose risks to SPDM's image, inappropriate relationships with companies banned/sanctioned by public entities, and mitigating illegal acts).

The supply chain risk matrix generated from this initiative has established specific actions for each set of suppliers, based on their risk characteristics and particular control needs.

Using this supply chain risk matrix, suppliers are evaluated to mitigate fiscal, financial, labor, socio-environmental, legal, and tax risks and ensure ethical and responsible sourcing through due diligence at product and service providers.



Since 2022, SPDM has been improving the management of documentation requirements for product and service providers through an electronic platform for their registration and approval.

The use of this automated platform for managing documentation requirements not only minimizes risks related to the failure to identify regulatory inconsistencies in these companies in a timely but also provides greater agility in verifying documents extracted from public databases, such as registration information from the Federal Revenue Service databases, licenses, certificates, and sanctions across various levels of public administration. In 2023, SPDM incorporated specific controls into its supplier registration and qualification system related to Monitoring Provider/Supplier Compliance with Law 13.709/2018 (LGPD), which assesses the company's compliance with the General Data Protection Law guidelines.

The service provision contractual drafts signed between SPDM units, and their suppliers were improved, with the refinement of clauses related to the General Data Protection Law (LGPD) and those related to labor, socio-environmental, and corruption risks.

In 2024, SPDM began monitoring an index in its supply chain specifically dedicated to ESG (Environmental, Social, and Governance) standards. The index, calculated based on scores obtained for meeting different requirements in each of these pillars, considers potential environmental, human rights, and government sanctions-related fines, violations, or lawsuits related to the companies or partners linked to these companies.

The final score, calculated using a methodology that assigns different weights based on the severity of identified irregularities, ranges from 0 to 10 points. A score between 9 and 10 is considered excellent and serves as the index for immediate supplier approval. Any scores below nine influence the supplier's decision to regularize the outstanding issues or reject them. In 2024, the ESG index of the approved supply chain at SPDM Affiliated Institutions and Hospital São Paulo was 9.84, with 9.96 in the Environmental Pillar, 9.82 in the Social Pillar, and 9.72 in the Governance Pillar.

Relationship with Suppliers

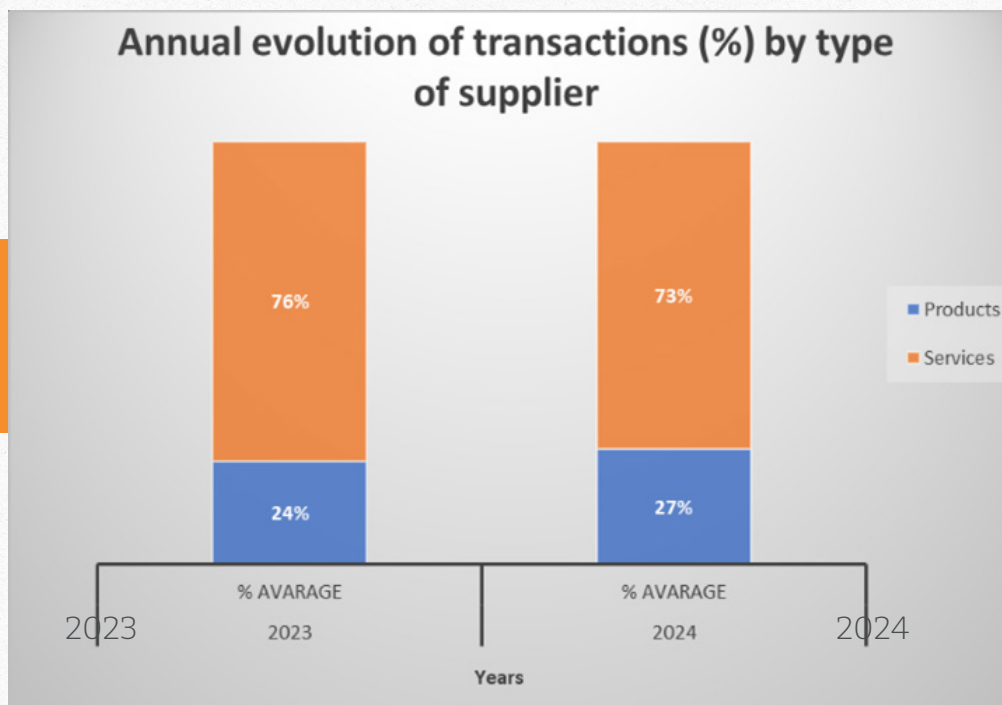
Throughout 2023 and 2024, we disseminate educational materials and manuals aimed at developing best privacy governance practices.

The Information Security Department disseminated these materials in the SPDM/PAIS virtual library and at Affiliated Institutions and Hospital São Paulo.

It was achieved through various media and training in the virtual learning environment, engaging employees in data security initiatives.

SPDM maintains relationships with its suppliers by the guidelines of its Regulation for the Purchasing and Contracting of Works and Services, duly published in the Official Gazette.

It acts vigilantly regarding the socioeconomic interests of the states and municipalities where it operates, monitoring its suppliers for periods not exceeding 12 months, thus ensuring their ongoing compliance with their tax, social security, and other applicable legislation.



Regarding its supply chain, SPDM maintains its supply lines for products and services, having transacted purchases in 2023 and 2024 with the number of suppliers represented in the image. Regarding the products purchased from SPDM, suppliers of medicines, food, medical supplies, and medical equipment are particularly important in the supply chain because they are directly related to the healthcare of patients and represent over 70% of the volume of product purchases.

A significant portion of these supplies are produced or have raw materials of foreign origin, being marketed in Brazil by regional manufacturers and distributors.

Regarding the services purchased through SPDM, services related to healthcare, information technology, cleaning, and property security accounted for the most significant volume of transactions between 2023 and 2024.

These labor-intensive categories are highlighted for monitoring from a risk management perspective, with regular monitoring of labor relations, health, and safety of service providers.

The graph shows the transactions by supplier nature in 2023 and 2024.

NOTE: Starting in 2023, with the implementation of the ERP system, data collection of invoices for services from Hospital São Paulo began.

Additionally, to demonstrate other characteristics of the SPDM supply chain, we highlight that transactions involving the acquisition of products and services essentially occur with suppliers in the southeastern region of the country (approximately 86%). However, suppliers in the other areas also conduct commercial transactions with SPDM, namely: South (7%), Midwest (2%), Northeast (4%), and North (<1%).



Certifications, Awards and Seals

SPDM aims to contribute to and continuously encourage improvements in quality, safety, and socio-environmental commitment in the provision of services. Certification is a way to validate and recognize the efforts made and, at the same time, a valuable management tool.

SPDM Affiliated Institutions



Qmentum Internacional

Canadian Accreditation Program

- Hospital Geral de Pirajussara
- Hospital Estadual de Diadema
- Hospital das Clínicas Luzia de Pinho Melo
- Ambulatório Médico de Especialidades de Mogi das Cruzes
- SAMU 192 – Regional São José dos Campos
- Ambulatório Médico de Especialidades de Mogi das Cruzes
- Ambulatório Médico de Especialidades de Dra. Jandira Masur



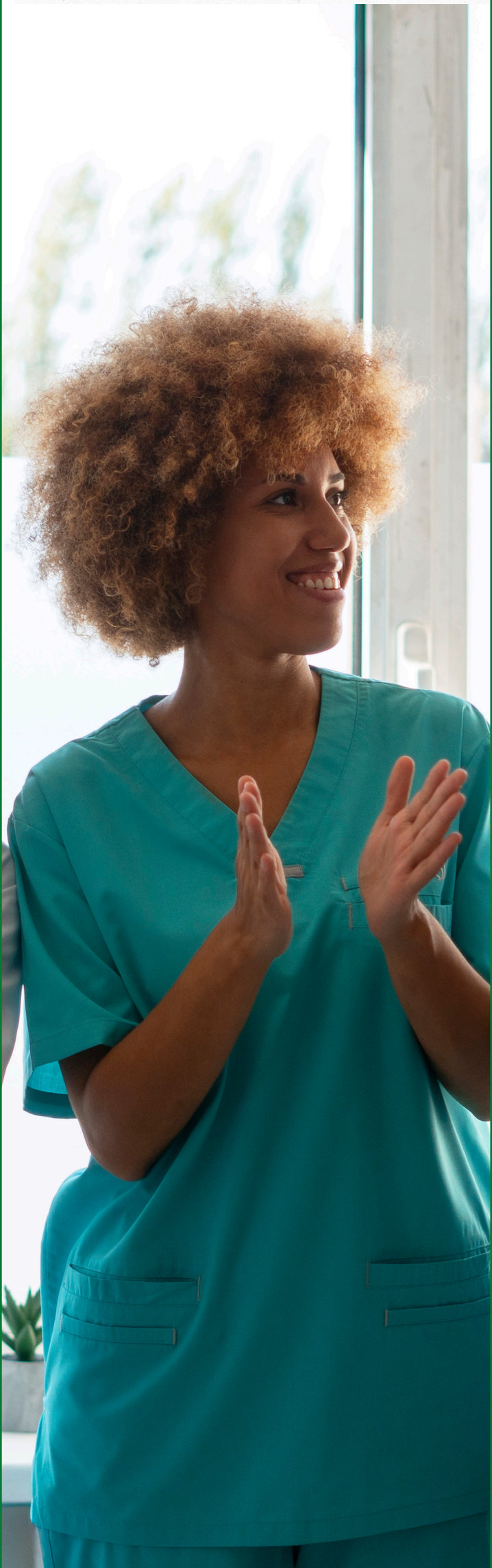
ONA LEVEL III

- Hospital Estadual de Diadema.
- Hospital das Clínicas Luzia de Pinho Melo.
- Hospital e Maternidade Municipal de Uberlândia.
- Hospital Regional de Sorocaba.
- Hospital de Transplantes Dr. Euryclides de Jesus Zerbini.
- Ambulatório Médico de Especialidades Maria Zélia.
- Ambulatório Médico de Especialidades de Mogi das Cruzes.
- Ambulatório Médico de Especialidades de Taboão da Serra.
- Ambulatório Médico de Especialidades de Psiquiatria Dra. Jandira Masur.
- Centro de Reabilitação Lucy Montoro de São José dos Campos.
- Centro de Análises Clínicas Zona Leste.



ONA LEVEL II

- Hospital Municipal Dr. José de Carvalho Florence.
- Unidade Recomeço Helvétia
- SIM Jacareí



- Hospital Geral de Guarulhos
- UBS Parque Novo Mundo I (RASTS VM/VG)
- UBS Parque Novo Mundo II (RASTS VM/VG)
- UBS Jardim Japão (RASTS VM/VG)
- UBS Paulo Gnecco (RASTS VM/VG)
- UBS Vila Sabrina (RASTS VM/VG)
- UBS Vila Izolina Mazzei (RASTS VM/VG)
- UBS Carandiru (RASTS VM/VG)
- UBS Vila Guilherme (RASTS VM/VG)
- UBS Vila Ede (RASTS VM/VG)
- UBS Vila Leonor (RASTS VM/VG)
- UBS Julieta (RASTS VM/VG)
- UBS Jd Brasil (RASTS VM/VG)
- UBS Vila Medeiros (RASTS VM/VG)
- UBS Vila Borges (RASTS BTT)
- UBS Real Parque (RASTS BTT)
- UBS Jardim D'Abril (RASTS BTT)
- UBS Caxingu (RASTS BTT)
- UBS São Remo (RASTS BTT)
- UBS Jardim Boa Vista (RASTS BTT)
- UBS Vila Dalva (RASTS BTT)
- UBS Malta Cardoso (RASTS BTT)
- UBS Jardim São Jorge (RASTS BTT)
- UBS Vila Sonia (RASTS BTT)
- UBS Jardim Colombo (RASTS BTT)



Polytrauma patient care service

- ✓ Hospital Municipal Dr. Jose de Carvalho Florence



Electrical installation certification based on ABNT NBR 5410:2004 standard

- ✓ Ambulatório Médico de Especialidades de Taboão da Serra
- ✓ AME Idoso Oeste



GREEN KITCHEN

food service establishments that adopt sustainable practices

13 hospitais



Health care climate champion Energy Efficiency - Silver International award

- ✓ Hospital de Transplantes Dr. Euryclides de Jesus Zerbini

Green Pin A

Amigos, aliados apoiadores. Em reconhecimento.



5 hospitais



- ✓ Hospital de Transplantes Dr. Euryclides de Jesus Zerbini - 2nd place



- ✓ Hospital de Transplantes Dr. Euryclides de Jesus Zerbini VI Brazil ESG Compliance Award 2021



- ✓ Hospital Geral de Pirajussara – 3º lugar VII Brazil ESG Compliance Award 2022



Certification of Distinction in Early Identification and Treatment of Sepsis ILAS/IQG

- Hospital de Transplantes Dr. Euryclides de Jesus Zerbini



Certificação da CARF (Commission on Accreditation of Rehabilitation Facilities)

- Centro de Reabilitação Lucy Montoro de São José dos Campos



Certificates of Proficiency in the Quality Control Incentive Program

- Centro de Análises Clínicas Zona Leste.



Certificate of proficiency in laboratory testing

- ✓ Centro de Análises Clínicas Zona Leste Janeiro/2025





ISO Certifications



- Hospital Estadual de Diadema
- Hospital Geral de Pirajussara
- Hospital de Transplantes Dr. Euryclides de Jesus Zerbini
- Hospital e Maternidade de Uberlândia
- Centro de Reabilitação de São José dos Campos



- Hospital Geral de Pirajussara
- Hospital Estadual de Diadema
- Hospital de Transplantes Dr. Euryclides de Jesus Zerbini
- Hospital e Maternidade de Uberlândia
- Centro de Reabilitação de São José dos Campos
- Serviço de Reabilitação Lucy Montoro Humaitá
- Centro de Tecnologia e Inovação – Parque Fontes do Ipiranga



- Hospital Geral de Pirajussara
- Hospital Estadual de Diadema
- Hospital de Transplantes Dr. Euryclides de Jesus Zerbini
- Centro de Reabilitação de São José dos Campos

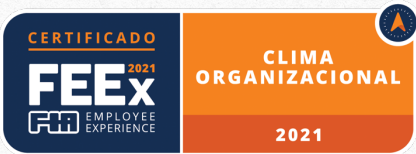


- Hospital Geral de Pirajussara
- Hospital Estadual de Diadema
- Hospital de Transplantes Dr. Euryclides de Jesus Zerbini
- Hospital e Maternidade de Uberlândia
- Centro de Reabilitação de São José dos Campos

Environmental quality certification at work



27 Certified Affiliate Units
October 2020



30 Certified Affiliate Units
July 2021



51 Certified Affiliate Units
July 2022



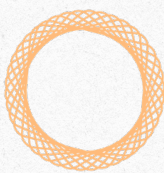
48 Certified Affiliate Units
July 2023



Municipal seal of human rights and diversity

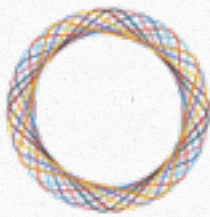


July 2021



SELO MUNICIPAL DE
Direitos Humanos
e Diversidade
5ª Edição

December 2022



SELO DE
Direitos Humanos
e Diversidade
6ª Edição



SPDM, through its Inclusion and Diversity Committee, submitted its “Affirmative Actions in Support of Human Rights and Diversity” and was recognized in the “Transversalities” category, demonstrating its work on various issues related to inclusion and diversity. The Seal recognizes the institution’s efforts to defend Human Rights and Diversity, focusing on making the workplace increasingly welcoming and inclusive.

Health Care Climate Champions Award 2024



An initiative of the international organization Healthcare Without Harm, recognizing sustainable practices and climate management in the healthcare sector. The category called Health Care Climate Champions Awards, or “Climate Champion,” was created in 2023 to recognize institutions from different regions of the world that have distinguished themselves through their ambitious, comprehensive, and consistent work in climate action throughout the year. The list of the 7 award-winning organizations worldwide for 2024 is available on the website <https://greenhospitals.org/climate-champions-2024>



- ✓ SP Plus Hospital Dia Centro Diagnóstico
- ✓ UBS Integrada Cupecê – Dr. Waldomiro Pregnolato
- ✓ UBS Integrada São Vicente de Paula
- ✓ UBS Alpes do Jaraguá
- ✓ UBS Integrada Pari
- ✓ UBS Comendador José Gonzalez
- ✓ UBS Integrada Vila Clara
- ✓ UBS Dr. Joaquim Rossini/Vila Carioca Dr. Moacir
- ✓ UBS Guarani Vargas
- ✓ UBS Heliópolis
- ✓ UBS Iaçapé – Jardim Planalto
- ✓ UBS Integrada Jardim Elba – Humberto Gastão Bodra
- ✓ UBS Integrada Vila Carrão – Dr. Adhemar Monteiro Pacheco
- ✓ UBS Interativa
- ✓ UBS Jardim Iva
- ✓ UBS Integrada Vila Oratório – Tito Pedro Mascelani
- ✓ UBS Jardim Panamericano
- ✓ UBS Moinho Velho
- ✓ UBS Mooca I
- ✓ UBS Morada do Sol
- ✓ UBS Morro Doce
- ✓ UBS Parque Imperial – Professor Manoel Antonio da Silva Saragoca
- ✓ UBS Parque Maria Domitila
- ✓ UBS Parque São Lucas
- ✓ UBS Pro Morar
- ✓ UBS Sem Terra
- ✓ UBS Sigmund Freud – Indianópolis
- ✓ UBS Vila das Mercês
- ✓ UBS Vila Ema
- ✓ UBS Vila Formosa II
- ✓ UBS Vila Guarani
- ✓ UBS Vila Maggi
- ✓ UBS Vila Nova Manchester
- ✓ UBS Vila Formosa II
- ✓ UBS Vila Guarani
- ✓ UBS Vila Maggi
- ✓ UBS Vila Nova Manchester
- ✓ UBS Vila Nova York
- ✓ UBS Vila Pirituba
- ✓ UBS Vila Santo Estevão – Woody Jorge Kalil
- ✓ UBS Neusa Rosália Morales
- ✓ UBS City Jaraguá
- ✓ UBS Vila Bertioga
- ✓ UBS Vila Alpina
- ✓ UBS Jardim Rincão
- ✓ UBS Vila Caiúba
- ✓ UBS Jardim Cidade Pirituba
- ✓ UBS Vila Santa Catarina
- ✓ UBS Jardim Lourdes
- ✓ UBS Vila Prudente
- ✓ UBS Santo Elias
- ✓ UBS Vila Arapuá
- ✓ UBS Aurélio Mellone
- ✓ UBS Domingos Mantelli
- ✓ UBS Vila Mariana
- ✓ UBS Água Funda
- ✓ UBS Vila Antonieta
- ✓ UBS Jardim Seckler
- ✓ UBS Brás
- ✓ UBS Elísio Teixeira Leite
- ✓ UBS Sacomã
- ✓ UBS Anhanuera I
- ✓ UBS Belenzinho
- ✓ UBS Jardim Sapopemba
- ✓ UBS Parque Bristol
- ✓ UBS Vila Canaã
- ✓ UBS Recanto dos Humildes
- ✓ UBS Vila Formosa I



Award - Seal of good practices in combating congenital syphilis

- ✓ UBS City Jaraguá
- ✓ UBS Eduardo Romano Reschilian
- ✓ UBS Elísio Teixeira Leite
- ✓ UBS Jardim Grimaldi
- ✓ UBS Recanto dos Humildes
- ✓ UBS Vila Campestre



SINASC Seal - Gold Seal

- ✓ Casa do Parto de Sapopemba
- ✓ Hospital e Maternidade Amparo Maternal



Hospital Amigo da Criança - Seal

- ✓ Hospital Distrital Nossa Senhora da Conceição (Fortaleza)
- ✓ Hospital Maternidade Maria Amélia Buarque de Holanda
- ✓ Hospital Municipal Pedro II(Rio de Janeiro)



Gente Que Faz o SUS - Seal

- ✓ Hospital e Maternidade Amparo Maternal –Equipe de Enfermagem
- ✓ Hospital e Maternidade Amparo Maternal – Equipe de Saúde



Anna Nery Award

- ✓ Hospital Maternidade Maria Amélia Buarque de Hollanda



SUS de Ouro - Seal

- ✓ Complexo Hospitalar Irmã Dulce





Award Early Childhood Friendly Unit

- ✓ CF MO Maurício Silva
- ✓ CF Mo Ricardo Lucarrelli
- ✓ CF Estácio de Sá
- ✓ CF Sérgio Vieira de Melo
- ✓ CF São Sebastião
- ✓ CF Nélcio de Oliveira
- ✓ CF Estivadores
- ✓ CF Fernando Antônio Braga Lopes
- ✓ CMS Oswaldo Cruz
- ✓ CMS Ernani Agrícola
- ✓ CMS Manoel Artur Vilaboim
- ✓ CMS José Messias do Carmo
- ✓ CMS Ernesto Zeferino Timbau Jr.
- ✓ CSE São Francisco de Assis
- ✓ Clínica da Família Maurício Silva



EMS Angels Awards Q3 – Gold Status

- ✓ SAMU Santo André

Recognition for work in supporting
vulnerable families - Dara Institute

- ✓ Hospital Maternidade Maria Amélia Buarque de Hollanda

Excellence in Management Program -
Rio de Janeiro State Health Department

- ✓ Hospital Maternidade Maria Amélia Buarque de Hollanda



Medal - Friend of Early Childhood

- ✓ Hospital e Maternidade Maria Amélia Buarque de Hollanda

Certifica Vacina



Vaccine Certificate – Rio

- ✓ CF Estácio de Sá
- ✓ CF Estivadores
- ✓ CF Fernando A. Braga Lopes
- ✓ CMS Salles Netto
- ✓ CMS Jose Messias do Carmo
- ✓ CMS Manoel Arthur Villaboim
- ✓ CSE São Francisco de Assis



Friend of Transplants Award

- ✓ Complexo Hospitalar Irmã Dulce



Seal: Working woman who breastfeeds

- ✓ Hospital Maternidade Maria Amélia Buarque de Hollanda



Certificate of Honorable Mention - Friend of the Environment Award

- ✓ Centro Carioca do Olho



2024 Award - Dr. Pinotti - Women's Friendly Hospital

- ✓ Hospital e Maternidade Maria Amélia Buarque de Hollanda



International Laboratory
Certification - PALC standards

Certification of the Institution's Adherence to Evidence-Based Clinical Practices, Areas: Acute Coronary Syndrome, Heart Failure and Atrial Fibrillation, with two Gold Awards.

Newsweek	
Fortis Hiranandani Hospital	Interventional cardiology
Tel-Aviv Sourasky Medical Center	Division of Cardiology
Beaumont Hospital Troy	Cardiology
Korea University Hospital	Department of Cardiology
Hospital de Ensino da UNIFESP	Cardiologia
McGill University Health Centre	Department of Cardiology
Ramathibodi Hospital	Heart, vascular and metabolic center
Hartford Hospital	Heart and Vascular Institute
Hirslanden Klinik Beau-Site	HerzZentrum Bern
Fortis Escorts Hospital	Fortis Escorts Heart Institute
Kameda Medical Center	Department of Cardiology
Hospital Universitario Virgen Macarena	Cardiología y Cirugía Cardiovascular
Royal Brisbane & Women's Hospital	Cardiology
Oklahoma Heart Hospital	Cardiology

Newsweek		
Rank	Hospital	Department
93	Cleveland Clinic	Cleveland Clinic Children's
94	Ewha Womans University Medical Center	Pediatrics
95	Nemours Children's Hospital	Nemours Children's Hospital, Florida
96	Children's Hospital of Wisconsin	Children's Wisconsin
97	St. Louis Children's Hospital	St. Louis Children's Hospital
98	Universitätsklinikum Düsseldorf	Klinik für Allgemeine Pädiatrie, Neonatologie und Kinderkardiologie
99	The Catholic University Of Korea - Seoul St. Mary's Hospital	Pediatrics
100	Mayo Clinic - Jacksonville	Children's Center
101	Korea University - Anam Hospital	Pediatrics
102	Shriners Hospital For Children	Shriners Hospital Children
103	Hospital de Ensino da UNIFESP	Pediatría
104	Sana Kliniken Leipziger Land GmbH - Klinikum Borne	Kinder- und Jugendmedizin
105	Mount Sinai Hospital	Neonatal Intensive Care Unit (NICU)
106	Stavanger Universitetssjukehus	Barne- og ungdomsklinikken
Khon Teck Puat - National University Children's		

World's Best Specialized Hospitals – 2023 – revista Newsweek.

Technological Innovation



(GRI 3-3)

São Paulo Hospital



Technology and sustainability walking together

Between 2023 and 2024, Hospital São Paulo underwent a true digital transformation, providing more efficient, humane, and sustainable care. The IT sector was renamed to Information and Communication Technology (ICT), an acronym in Portuguese, reflecting a new way of thinking and integrating innovative solutions into the hospital's daily operations.

This new approach strengthens the hospital's role as a benchmark in public health, education, and research, now with even greater environmental, social, and technological responsibility.



Connectivity at the Service of Care

One of the major highlights of this period was the expansion of the free Wi-Fi network, now available in all areas of the hospital, such as reception areas, wards, waiting rooms, and administrative areas.

More than just a digital benefit, this connectivity promotes the well-being of patients and their companions, who can communicate with family members, access content, and alleviate anxiety during their hospital stay. A simple touch, but one that makes all the difference in the welcoming experience that Hospital São Paulo strives to provide.



Modern Equipment, Intelligent Use of Resources

With the installation of a new data center and the complete upgrade of its technology park with modern equipment and cutting-edge operating systems, the hospital took a significant step toward efficiency.

These improvements ensure greater performance, data security, and energy savings, in addition to facilitating the daily lives of healthcare professionals and administrators. This technology directly contributes to sustainability, reducing errors, optimizing time, and improving the quality of service provided.



Digitalization that transforms care and protects the environment

Over the past two years, Hospital São Paulo has made significant progress in the digitalization of its processes, promoting greater agility, convenience, and resource savings.

One of the milestones of this advancement was the implementation of self-service kiosks and digital patient call panels, which have made the flow of patients into services more organized, faster, and more intuitive.

With these tools, wait times are managed, and patients gain greater autonomy from the moment they arrive at the hospital.

Furthermore, electronic medical records were implemented in most outpatient clinics, replacing physical medical records, resulting in reduced paper consumption, greater security in the management of clinical information, and faster service delivery.

The implementation of the workflow platform for managing administrative processes also represented a significant advancement.

The platform digitized many internal workflows, significantly reducing paper use and accelerating steps such as approvals and referrals. This resulted not only in increased efficiency but also in significant environmental benefits, reinforcing the hospital's commitment to sustainability.

The acquisition of new, updated equipment compatible with the latest information security and technological innovation standards accompanied this transformation process. Thus, the hospital ensures that its digital solutions are always prepared to keep pace with industry developments, maintaining a sustainable, secure environment focused on the needs of patients and professionals.



Solutions that ensure continuity of care

Even in critical situations, such as power outages or system failures, care at the hospital continues. This is thanks to the creation of the “Contingency Machine” — a robust system that automatically backs up essential data and keeps the hospital operating safely in any scenario.

Furthermore, improvements to queuing systems and internal data migration help organize care and avoid delays, increasing trust and fluidity in the services provided to the population.

Modern and Sustainable Communication

The replacement of 700 old telephones with a VOIP system made internal communication more efficient, cost-effective, and reliable combining this with the expansion of the Wi-Fi network and integration with hospital systems, these changes ensured greater agility in the exchange of information between teams, optimizing time and processes reducing operational costs and the consumption of obsolete equipment, directly contributes to the pillars of innovation and sustainability.



Affiliated Institutions

SPDM has continuously invested in technological innovations to promote more efficient, safe, and sustainable management of healthcare services. Between 2022 and 2024, several initiatives were implemented focused on reducing environmental impact, improving hospital management, and optimizing processes. Below, we highlight the main initiatives and their effects on the organization's sustainability.

Digitalization and Sustainability: The Evolution of Processes at SPDM

SPDM has been promoting a significant digital transformation, replacing manual processes with technological solutions that increase operational efficiency and reduce environmental impacts.

The implementation of digital certification enabled the electronic signature of prescriptions and healthcare records, eliminating the need for printing and reducing the consumption of paper and supplies. Similarly, the adoption of tablets for digital patient signatures optimized care, eliminating the need for physical forms and reducing operational costs. The digitization of documents has also brought advances in medical record management, eliminating physical filing and ensuring greater security and traceability of information.

At the same time, the implementation of electronic prescriptions has revolutionized the delivery of medical drugs, allowing patients to receive their prescriptions via SMS, eliminating the use of paper and reducing the risk of document loss. Furthermore, the computerization of administrative and healthcare processes has eliminated manual forms, making internal routines more agile, sustainable, and efficient. These initiatives not only reinforce SPDM's commitment to information security but also directly contribute to reducing its environmental footprint.



Telemedicine: Sustainable Innovation in Healthcare

SPDM has driven the expansion and integration of telemedicine, promoting a more accessible, efficient, and sustainable care model. The expansion of teleconsultations, telemonitoring of chronic patients, tediagnosis, and teleconsultation among healthcare professionals has significantly reduced the need for travel, benefiting both patients and medical teams.

These initiatives have reduced fuel consumption and CO₂ emissions, optimized hospital infrastructure with more efficient cloud solutions, and minimized the disposal of medical supplies, as remote monitoring enables early detection of problems, avoiding invasive procedures.

Economic sustainability has also been strengthened by streamlining healthcare professionals' schedules, reducing operational costs, and increasing service capacity. For patients, the elimination of transportation and food expenses, combined with the flexibility of remote care, has brought financial and logistical benefits.

Furthermore, the possibility of remote work has increased the attraction and retention of professionals, especially in hard-to-reach regions.



In this context, the significant volume of consultations provided stands out. In 2023, the teleconsultation service recorded more than 10,000 consultations, with peaks in March (1,092) and May (1,015). In 2024, the numbers remained high, exceeding 9,700 consultations throughout the year.

This service, enabled by the Hospital Management System and Electronic Patient Record, integrates features such as video calls and file exchange between professionals and patients, ensuring agility and safety in care.

In addition, SPDM expanded the offer of specialized teleconsultations between professionals, strengthening shared and qualified care. Among the most in-demand specialties are Dermatology, with 1,540 consultations in 2023, and Cardiology, with 639 consultations.

Teleconsultation was essential to ensure more assertive clinical decisions, based on real-time experience sharing, especially in hard-to-reach areas. In the field of mental health, SPDM also consolidated the TeleApoio Program, a free and confidential psychological and psychiatric support service for employees. In 2023, 1,503 screenings and consultations were carried out, with the highest volume in May (185) and September (189). In 2024, the numbers show consistent service continuity, with more than 1,570 consultations provided by December.

The program includes psychological screening, psychotherapy sessions lasting up to 12 weeks, psychiatric care, and referrals when necessary, reaffirming the institution's commitment to the well-being of its professionals.

In the context of social sustainability, telemedicine has overcome geographic and socioeconomic barriers, bringing medical care to vulnerable populations. Continuous telemonitoring has improved the management of chronic diseases and contributed to the prevention of complications. Collaboration between professionals, enabled by teleconsultation, has strengthened the healthcare network, ensuring more integrated and efficient care.

Finally, SPDM invested in digital health education and training, training professionals and patients in the use of telemedicine tools. This technological advancement not only improved the quality of care but also promoted digital inclusion and equal access to healthcare. Thus, SPDM reaffirms its commitment to innovation, sustainability, and excellence in healthcare.



Advances in Infrastructure and PACS: Technology at the Service of Efficiency and Connectivity

SPDM has made significant progress in modernizing its ICT infrastructure, ensuring greater connectivity, security, and operational efficiency at its facilities.

Communication was improved with the implementation of WhatsApp via the Call Center and Active IVR in Hospitals, Outpatient Clinics, and High-Cost Pharmacies, facilitating patient care and interaction. The expansion of the structured network and Wi-Fi allowed greater accessibility for patients and staff, enabling the use of new technological tools.

The NOC (Network Operation Center) service was expanded, providing proactive and preventative monitoring of the infrastructure, ensuring system stability. The PACS portal was expanded to include facilities managed by SPDM Affiliated Institutions, resulting in more than 1,700,000 tests performed in 2023/2024.

Furthermore, processing capacity was optimized with the expansion of servers and systems in the Data Center.

To strengthen communications, link redundancies with different carriers were implemented, ensuring greater network availability and performance. The adoption of

VoIP telephony and firewalls across all affiliates reinforced the security, control, and integrity of communications.

Other improvements include the replacement of 80 physical servers, the installation of 150 Wi-Fi antennas, the replacement of 700 telephone devices, and the segmentation of 850 networks for greater organization and control of technological environments.

Monitoring of the affiliates' 160 communication links, operational environments, and servers strengthened the security and resilience of services, ensuring that SPDM's technological infrastructure continues to drive innovation and the sustainability of operations.



Technological Modernization: Boosting SPDM

The technology park upgrade brought significant advances, reinforcing the importance of a modern infrastructure for delivering excellent services. In 2024, the technology park migration was completed, with the implementation of new technologies that optimize operational processes.

Replacing equipment with more modern models and improved configurations reduced wait times and provided greater efficiency in the execution of activities. Furthermore, the new devices support the constant updates of the software used by SPDM, ensuring greater stability and performance.



Other innovations that improve operations include:

Real-Time Information: Digital displays provide instant updates on wait times and services, ensuring greater transparency and reducing patient anxiety.

Patient Education: Educational content displayed in waiting areas promotes preventative health and increased patient engagement.

Accurate Tracking: Barcode scanners ensure correct identification of medications and patients, reducing medical errors and increasing safety.

Operational Efficiency: Specialized printers streamline inventory and medication administration processes, allowing the time saved to be redirected to patient care.

The modernization of ICT operations reinforces SPDM's commitment to innovation, efficiency, and safety in the delivery of healthcare services.

SPDM / PAIS

SPDM/PAIS continues to invest consistently in technological innovations to improve the security, efficiency, agility, and quality of institutional processes. These improvements ensure greater reliability in the services offered and a more robust and integrated technological environment.

Notable innovations include:

- **Implementation of electronic medical records:** SPDM/PAIS implemented electronic medical records in healthcare facilities in the city of São Paulo, reaching 100% of Primary Health Care Units (101 UBS/ESF) and 100% of Emergency Care Units (8 UPAs). In the city of Diadema, electronic medical records are used in 100% of Primary Health Care Units. Notably, electronic medical records are utilized in all services managed by SPDM/PAIS across the cities of Santo André, Praia Grande, Porto Alegre, Fortaleza, and Rio de Janeiro.
- **Development and implementation of an electronic medical record system in the UPAs of Santo André and Diadema,** utilizing integrations with CADSUS, a password panel, and a digital certificate for signing requests and medical records. This system aims to automate the management of patient queues and medical records, which were previously done manually by physicians and other unit staff. This provides greater agility, information reliability, control, and cost savings for the units.
- **Digital Certificate for Access to the Electronic Medical Record System:** Implementation of a digital certificate to ensure authenticity, integrity, and security when accessing electronic medical records, reinforcing the protection of sensitive data. The digital certificate also contributes to environmental preservation by reducing paper use, printing, and physical storage



- **Telehealth Implementation:** Telehealth practices such as teleconsultations, telemonitoring, and teleconsultations, among other modalities, were implemented in units managed by SPDM/PAIS in several municipalities.

• **Telemedicine Cart Solution:** Integrated solution consisting of a computer, high-resolution monitor, webcam, microphone, and data link for implementing telemedicine in healthcare facilities, providing higher-quality medical teleconsultations.



• **First 3D Surgery in a Public Facility in the State of Rio de Janeiro – Vitrectomy:** The Centro Carioca do Olho unit in the municipality of Rio de Janeiro, managed by SPDM/PAIS, performed the state's first 3D retinal surgery in a public healthcare facility. The procedure is recommended for treating retinal and vitreous (the substance between the retina and the lens) problems. Vitrectomy with a 3D device is quick and painless and can even be used to operate on patients with diabetes and retinal detachment.



SP Plus Participates in International Gene Therapy Study

SP Plus is the referral hospital for an international study focused on patients with Transthyretin Amyloidosis, caused by the accumulation of the TTR protein.

Gene therapy modifies DNA in the liver to stop its production, preventing disease progression. Patients, often elderly with heart problems, see the treatment as a unique opportunity for improvement.

The study is led by a group of researchers and major pharmaceutical companies.

SP Plus provides patient care, as well as comprehensive support for clinical analysis and diagnostic imaging. The complexity of this patient profile and their need for personalized care made SP Plus the primary choice for the study.

SP Plus is a leading provider of interventional psychiatry treatment.

SP Plus Day Hospital Diagnostic Center offers interventional psychiatry services through Electroconvulsive Therapy (ECT) and Transcranial Magnetic Stimulation.

Interventional treatment is indicated when standard medication therapy is ineffective in cases of depression, bipolar disorder, schizophrenia, and others. The techniques are managed using specific technology, and there are only two devices in Brazil, one of which is at SP Plus.



UPAS - Emergency Care Units of the Municipality of São Paulo

The Minilab is an innovative solution within the healthcare unit, providing fast and efficient laboratory tests to aid in immediate diagnosis and expedite medical care.

Housed in a container attached to the Emergency Care Unit, the Minilab, which operates 24 hours a day, has a technical area staffed by biomedical professionals, enabling the medical team to provide the necessary referrals to patients, whether for discharge, medication, hospitalization, or other treatment options.

Main Features:

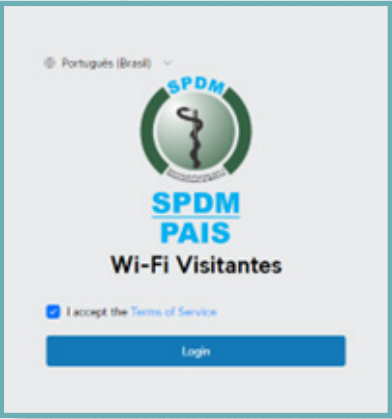
- Results in up to 1 hour;
- Essential tests for clinical decision-making;
- Faster and more efficient treatment.

With this technology, healthcare professionals can make more assertive decisions, reducing wait times and improving the quality of care.



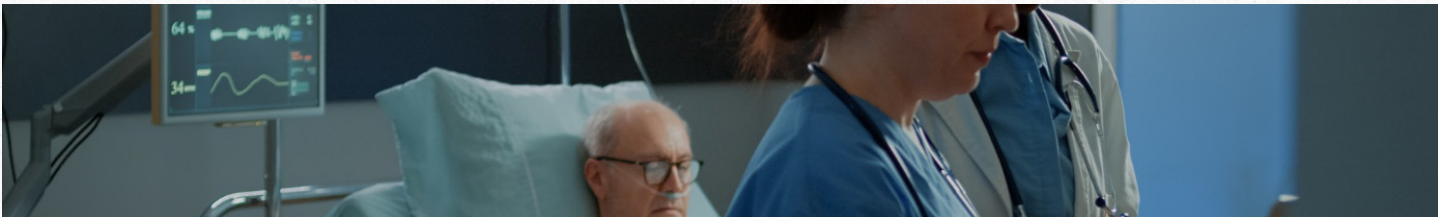
Software Investment

- **Application Virtualization (GoGlobal):** Secure and efficient remote access allows teams to work from anywhere, guaranteed by advanced encryption. This has resulted in greater work flexibility, increased productivity, and reduced security risks.
- **Business Intelligence (BI) for Service Departments:** The development of interactive dashboards and strategic analyses provided the team with real-time information for faster, more accurate decisions. This generated agility in decision-making processes, improved operational efficiency, and greater assertiveness in the actions of each department.
- **Secure Integration with Cloud Services:** The adoption of fast and secure connections between internal systems and cloud services has expanded interoperability and improved operational performance. This integration has enabled faster data exchange, reduced operational failures, and continuous and secure access to information, contributing to the efficiency of workflows and the reliability of institutional processes.



• **Free Wi-Fi Implementation in Units:** The provision of free Wi-Fi brought greater convenience to patients and companions, allowing secure internet access during their stay at the institution. This initiative contributed to improving the user experience, promoting digital inclusion, and expanding access to information. Furthermore, intelligent management of network traffic and access ensured the efficient and secure use of technological resources.

• **PIN-Based Printing Control System:** The implementation of PIN-based printing control reduced waste, increased traceability, and provided complete control over printing, resulting in significant resource savings and better management of printing costs, in addition to contributing to sustainability.



Real-Time Monitoring:

The use of an open-source platform for active monitoring and real-time visualization of systems allowed for the rapid identification and correction of problems, reducing downtime and increasing infrastructure availability. Real-time visibility provided faster incident responses and improved security.



Automated Alerting:

Implementation of automated alerts via messaging apps, ensuring instant notifications of critical events and enabling an immediate and effective incident response. This has resulted in:

- **Significantly reduced incident response time, minimizing operational impacts.**
- **Increased agility in crisis management, with real-time notifications, ensuring teams can act quickly.**
- **Greater control and continuous monitoring, enabling proactive management of information security and infrastructure.**

This solution has strengthened our ability to maintain operational security and agility in responding to problems, enabling more efficient risk management.



Secure Cloud Storage and Sharing: Adoption of a cloud environment to ensure accessibility, security, and efficient collaboration between teams, promoting concrete benefits such as:

- Easy and secure remote access to documents and information, allowing teams to work remotely without compromising security.
- Greater agility in sharing files and information, facilitating collaboration between departments, and reducing reliance on manual or physical processes.
- Enhanced security, with cutting-edge encryption and permission control, ensuring that sensitive data is accessed only by authorized personnel, minimizing the risk of data leaks or loss.

- Ease of document version management, enabling more fluid and error-free collaboration, with a complete history and easy traceability.

- Reduced operational costs by eliminating the need for on-premises storage infrastructure, while maintaining a high-performance and scalable platform.

Cloud integration has transformed the way teams collaborate, providing efficiency, security, and mobility without compromising data integrity. This solution also ensures better time and resource management, maximizing productivity and organizational effectiveness.



Digitalization of the Transportation Voucher Request Process:

Transportation voucher requests, eliminating paper forms and making the process more streamlined and accessible. Requests are now digitally signed, ensuring security and authenticity. This innovation has brought the following benefits:

- Significant reduction in bureaucracy, streamlining the request process, and eliminating common errors in manual processes.
- Greater transparency and control over requests, with real-time tracking, facilitating management, and ensuring compliance with internal policies.
- Improved security, with digital signatures, ensuring the authenticity of requests and preventing fraud or data manipulation.

- Ease of access and processing of requests from anywhere, allowing employees to submit their requests simply and quickly, without relying on physical procedures.

- Optimized internal management, with digitized data that can be easily consulted, organized, and analyzed, promoting administrative efficiency and reducing operational costs.

These technological initiatives have brought significant advances to SPDM/PAIS, promoting resource savings, greater operational safety, process efficiency, and improved service quality.

The commitment to innovation remains a strategic pillar for the institution's growth and improvement.



AFFILIATED INSTITUTIONS

• Actions for the conscious use of equipment with significant energy consumption

The Euricydes de Jesus Zerbini Transplant Hospital conducted a study based on the requirements of the ISO 50001 standard, identifying opportunities for improving energy efficiency. During this process, a detailed survey of the equipment that consumes the most energy (USE – Significant Energy Use) was conducted, enabling strategic planning to optimize consumption.

Based on the data collected, it was determined that the autoclave was the largest energy consumer. Therefore, training was developed with two main approaches:

Technical Training: aimed at maintenance staff, focusing on best practices for equipment conservation and energy efficiency.

Operational Training: aimed at professionals who handle the equipment daily, emphasizing the conscious and strategic use of energy to reduce waste.

Continuing these actions and achieving ISO 50001 certification will enable significant progress in reducing environmental impact and improving resource management.

• Replacing Liquid Sodium Bicarbonate with Powder in Hemodialysis Machines

To optimize the use of consumables in the hemodialysis process and reduce environmental impacts, the Barueri Municipal Hospital conducted an internal study led by a multidisciplinary team to replace liquid sodium bicarbonate with powdered sodium bicarbonate.

The liquid version of sodium bicarbonate requires greater storage volume and logistical care, generates considerable waste, and we can't reuse packaging, requiring proper disposal. Powdered sodium bicarbonate, on the other hand, has a smaller volume, facilitates transportation and storage, and poses less operational risk for warehouse and nursing teams, especially during handling and filling the machines.

Main benefits identified:

- Logistical and economic efficiency: reduced transportation and storage costs due to its smaller volume and weight.
- Reduction of biological risks: The powdered form reduces the possibility of contamination, as liquid bicarbonate is more susceptible to bacterial growth
- Reduced waste generation: The use of powder allows for greater product utilization and reduces packaging waste. This initiative reinforces the institution's commitment to sustainability, promoting safer, more economical, and environmentally responsible practices in the hospital environment.

Capillaries, also known as dialyzers, are essential components in the hemodialysis process. They act as artificial filters, responsible for removing toxins, metabolic waste, and excess fluid from the blood of patients with kidney failure. To combine healthcare safety with environmental responsibility, the Barueri Municipal Hospital implemented capillary reprocessing machines, equipment designed to clean, disinfect, and test dialyzers after use, allowing their safe reuse in subsequent sessions.

This practice follows strict quality control and biosafety protocols, ensuring reprocessing effectiveness and patient safety.



Main benefits identified:

- Reduced operating costs: Reusing capillaries generates significant savings in the acquisition of new supplies.
- Positive environmental impact: Reducing dialyzer disposal directly contributes to reducing hospital waste, promoting more sustainable material management.

The adoption of capillary reprocessing systems reflects the institution's commitment to sustainability and resource efficiency, without compromising the quality of care.



• Replacing Halogen Lamps with LED Lamps in Surgical Lights

As part of initiatives focused on sustainability and energy efficiency, we replace surgical lights with halogen lamps for LED models at: Guarulhos General Hospital, São Paulo Hospital, Ve-reador José Storopolli Municipal Hospital, and AME Maria Zélia.

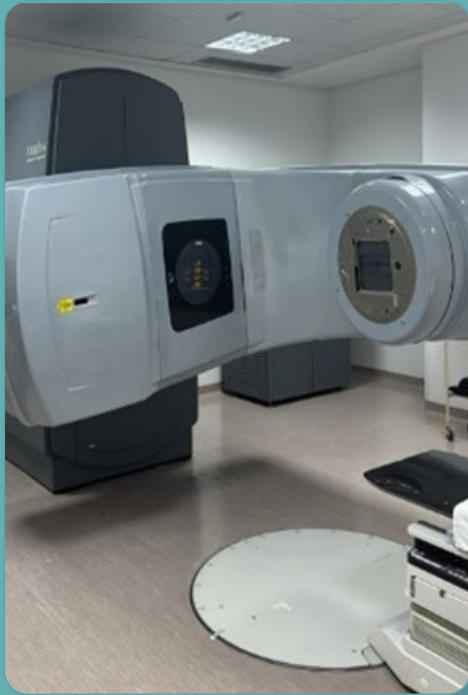
- Main benefits of the replacement: energy efficiency, greater durability, reduced heat generation, better lighting quality, and reduced environmental impact.

• Acquisition of Argon Scalpels

Argon scalpels were purchased at São Paulo Hospital, Dr. Odelmo Leão Carneiro Municipal Hospital, and Maternity Hospital. This technology offers several benefits, being a safe and effective technique for coagulation without direct contact with the tissue, which reduces the risk of perforation and trauma. It allows precise control of coagulation depth, ideal for superficial lesions, in addition to being highly effective in hemostasis. Because it uses argon gas, it has a lower risk of explosion and is safe even for colon procedures.

The argon scalpel allows for more effective coagulation, reducing the need for frequent changes of dressings and other materials used to contain bleeding. This process reduces material waste and the volume of contaminated waste (such as surgical drapes and disposables). This scalpel provides greater precision and agility in procedures, reducing surgical time and, consequently, the consumption of electricity and supplies in the operating room.





• Acquisition of Linear Accelerator

A linear accelerator was added to São Paulo Hospital, representing a significant advance in the modernization of oncology care, with positive impacts on the environmental, social, and governance pillars. From an ecological perspective, the equipment replaces technologies based on permanent radioactive materials, such as cobalt-60, reducing contamination risks and simplifying waste disposal.

From a social perspective, the linear accelerator provides more precise and safer treatments, with less impact on healthy tissue, improving patients' quality of life and expanding access to advanced therapies, enabling a broader range of treatment options.

• Acquisition of an Obese Surgical Table

Pirajussara General Hospital acquired a 400 kg surgical table. This investment promotes inclusion and equitable access to quality surgical care, safely serving a growing portion of the obese population, which historically faces structural barriers in the healthcare system.

In addition to providing better working conditions for surgical teams by offering stability, ergonomics, and adapting to patient weight, the table reduces the risk of operational incidents, contributing to the safety of both patients and healthcare professionals. This innovation translates into a lower rate of complications, readmissions, and overuse of hospital resources, aligning with a more efficient and responsible use of resources.

- **Acquisition of 60 kg Steam Dryers**

The 60 kg steam dryers in the laundry room at Hospital São Paulo were replaced. The replacement of the machines provided a safer and more comfortable work environment, with less exposure of employees to excessive heat and humidity, in addition to reducing the occurrence of operational failures and technical downtime, resulting in better occupational health and well-being for the teams.

The investment in more efficient equipment reinforces the institution's commitment to innovation, process quality, and responsible resource allocation. Improved operational performance also contributes to cost reductions in the medium and long term, increasing the financial sustainability of the operation.

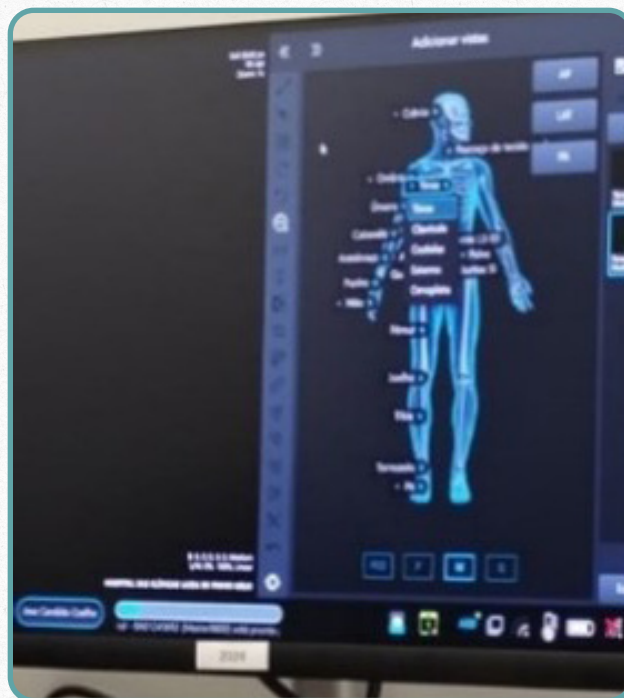
- **Replacing Conventional Radiological Image Processing (film) and Computed Radiography with DR**

The Direct Digital Radiography (DR) system is a medical imaging technology that captures radiographic images directly in digital format, without the need for film. The technological modernization of radiological imaging systems in public hospitals is a strategic measure that provides significant gains in efficiency, safety, quality of care, and, especially, environmental sustainability.

Thus, SPDM replaced conventional film X-ray and Computed Radiography (CR) systems with Direct Digital Radiography (DR) systems, representing a significant advancement.

Digital radiography (DR) enables the production of high-resolution images with lower radiation emissions, providing more accurate and safer diagnoses for patients and healthcare professionals. This feature reduces the need for repeat exams, contributing to a reduction in exposure to ionizing radiation and resource consumption, such as electricity used in the process. Operationally, DR systems also offer greater efficiency: reducing exam processing time, allowing for an increase of up to 30% in daily service capacity. This results in shorter patient wait times and faster hospital care flow.

One of the main benefits of this replacement is related to the elimination of chemical waste. Conventional systems use films and chemical solutions (developers and fixers) that generate toxic waste with a high environmental impact. It is also worth noting that employees are less exposed to risks, as the DR operation does not require the use of PPE. Furthermore, they need continuous water and electricity consumption for image processing. With the adoption of DR technology, this scenario changes: there is no use of chemical inputs or disposal of hazardous waste, promoting a cleaner, more sustainable, and environmentally compliant hospital environment.



It is worth noting that conventional processors and CRs take up more space than DR plates and require more resources to operate. With the digitization and automatic backup of exams in PACS/RIS systems, there is a significant reduction in the use of paper, envelopes, and dedicated physical space, as well as a reduction in disposable media such as CDs and DVDs, due to the possibility of secure electronic sharing via digital platforms. Furthermore, remote access to digital images facilitates the development of telemedicine and integration with other professionals, promoting more collaborative, sustainable, and patient-centered medicine.

AFFILIATED INSTITUTIONS

The SPDM Affiliated Institutions and Hospital São Paulo have continuously invested in modernizing their hospital infrastructure and healthcare units through technological innovation.

This commitment aims not only to improve operational efficiency but also to ensure sustainability and safety for patients, employees, and visitors. The implementation of new technologies has allowed for the optimization of spaces, enhanced resource management, and the adoption of solutions that ensure greater reliability in the hospital's critical operations.

The initiatives developed range from the reorganization of areas to improve staff allocation to the modernization of air conditioning and energy systems, by current technical standards.

Automatic Refueling of Engine Generator Sets (GMG) - Emergencies:

To ensure the reliability of the power supply in emergencies, Hospital São Paulo implemented an automatic refueling system for engine generator sets. In addition to providing the continuity of hospital services, this system also increased occupational safety by reducing the need for manual interventions in the fueling process, minimizing the risk of employee exposure to flammable materials.

The system also features a diesel recirculation and filtration mechanism, ensuring greater fuel purity and reducing the buildup of impurities in the engines. This results in less need for corrective maintenance, extending the lifespan of equipment, and ensuring that generators operate at maximum efficiency whenever activated. Thus, this innovation not only strengthens the hospital's energy security but also improves operational sustainability by reducing waste and maintenance costs.



Increasing the Efficiency of the Air Conditioning System at the São Paulo Hospital Surgical Center

Proper air conditioning in the surgical center is essential to ensure the safety of medical procedures and the well-being of patients. The 2021 update to NBR 7256 brought significant changes to the guidelines for air treatment in healthcare facilities. One of the changes was the permission for partial use of return air in air conditioning systems, a practice previously prohibited in the 1983 version.

The adoption of this practice at São Paulo Hospital resulted in significant energy savings (estimated at 30% compared to the previous air conditioning consumption). By reusing part of the properly treated and filtered return air, the air conditioning system requires less energy to cool the outside air, which generally requires more cooling effort. This strategy reduces the heat load on the air conditioning system, promoting energy efficiency and aligning with sustainable practices.

Smart Surveillance Camera Installation

To increase the safety of patients, staff, and visitors, Hospital São Paulo has installed 36 smart cameras on main streets where people circulate. These cameras are equipped with license plate recognition and facial recognition technology, enabling the identification of individuals and helping to prevent security incidents.

In addition to continuous monitoring, the cameras are integrated with a control center that can communicate directly with law enforcement if necessary. This innovation strengthens security around the hospital, enabling rapid responses to suspicious events and promoting a safer environment for everyone.





Renovation of the Adult and Pediatric Emergency Unit

The renovation of Hospital São Paulo's Adult and Pediatric Emergency Unit was planned based on principles of sustainability and operational efficiency, ensuring a safe and comfortable environment for patients, staff, and companions. To minimize environmental impact, sustainable materials were used, such as water-based paints, which reduce the emission of volatile organic compounds (VOCs) and improve indoor air quality.

Energy efficiency was one of the pillars of the unit's modernization, with the replacement of conventional lighting with LED technology, significantly reducing energy consumption. The air conditioning system also underwent improvements, aligning with ABNT NBR 7256:2021 guidelines for air quality in healthcare settings.

Additionally, the installation of sunshades on the exterior facades helped reduce direct sunlight, reducing the thermal load on the air conditioning system and providing greater thermal comfort for users.

Another essential aspect of the renovation was accessibility, ensuring that all adaptations and flow corrections (separation of adults and children), construction of a stair tower, modernization, and installation of new elevators comply with NBR 9050 and all other current standards, making the environment inclusive and more humane for all audiences. The modernization also incorporated information technology solutions, including telemedicine systems, which optimized space management and reduced the need for unnecessary travel.

All renovations followed the relevant technical standards, such as NBR 5410 for safe and efficient electrical installations and NBR 5419 for lightning protection, ensuring the safety and sustainability of the renovated unit.

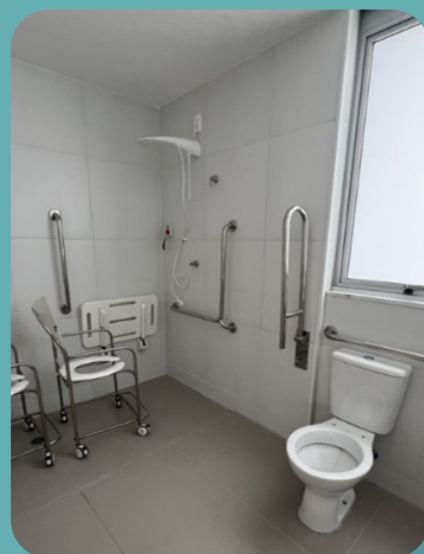
The recent renovation brought significant advances in infrastructure, accessibility, and humanized care, ensuring a safer, more modern, and welcoming environment for patients, caregivers, and healthcare professionals. Here are the main highlights:

- **Guaranteed structural safety:** The structure underwent a rigorous technical evaluation and was entirely restored by specialized professionals. This step was essential to ensure the integrity and durability of the facilities.

- **Modern and accessible restrooms:** The restrooms were completely remodeled and are now larger, with adequate ventilation and lighting, in addition to fully meeting accessibility standards.

- **Quality air conditioning:** The installation of a ducted air conditioning system, by current standards, provides greater thermal comfort in all areas of the emergency room.

- **Optimized reception and waiting areas:** The spaces were reorganized to ensure adequate distancing between patients, avoiding crossing traffic and promoting a safer and more functional environment.



- **Natural lighting and privacy:** The new, large windows allow for greater natural light, while frosted glass ensures patient privacy.

- **Safe and accessible stairs:** The stairs were renovated with adequate clearance for escape routes, handrails at two heights, level floors, and the inclusion of intermediate landings, ensuring accessibility and safety.

- **New high-capacity elevator:** A modern elevator was installed, with capacity for up to 24 passengers or one stretcher, facilitating the transport of patients quickly and comfortably.



- **Continuous and safe floors:** All floors were leveled and restored, eliminating unevenness and damage, facilitating cleaning and reducing the risk of contamination and accidents.

- **More humane and protected environment:** The walls received impact protection plates, stretcher bars, and handrails, in addition to wallpaper coverings that contribute to a more welcoming and humanized environment.

- **Accessible and functional doors:** The new doors have clearances suitable for accessibility, with modern locks and viewing windows that ensure safety and practicality.



Installation of Sunshades in the Adult and Pediatric Emergency Room Building

To improve energy efficiency and thermal comfort, Hospital São Paulo installed sunshades on the windows of the Jairo Ramos Building, which houses the Referral Emergency Unit. These external shading devices reduce direct solar radiation on facades, reducing heat gain in indoor environments and, consequently, the demand for air conditioning systems.

Recent studies corroborate the benefits of sunshades for energy efficiency. For example, a study published in the journal “Green Cities” demonstrated that the use of sunshades and curtains can reduce electricity consumption by up to 4.64% compared to buildings without these devices. The use of sunshades in the Jairo Ramos Building aims not only to save energy but also to promote a more comfortable environment for patients and healthcare professionals, aligning with sustainable practices.

Switching from Liquefied Petroleum Gas (LPG) to Natural Gas (NG)

In 2024, Pirajussara General Hospital replaced its Liquefied Petroleum Gas (LPG) system with Natural Gas (NG), offering advantages such as being more economical, safe, and sustainable.

Air Conditioning – Energy Efficiency

Between 2023 and 2024, Prof. Dr. Waldemar de Carvalho Pinto Filho General Hospital in Guarulhos (HGG) participated in an energy efficiency project with the energy utility EDP Bandeirantes and was awarded a liquid cooling unit (chiller) upgrade from a 160-ton capacity to a 200-ton capacity, at no cost to the hospital. The installed equipment is more efficient, resulting in significant financial savings, as the existing equipment was already over 20 years old (obsolete), was out of service, and the hospital was paying to lease equipment.



Photovoltaic Plant Expansion - Energy Efficiency - SVF

The Prof. Dr. Waldemar de Carvalho Pinto Filho General Hospital of Guarulhos (HGG) expanded its Distributed Microgeneration System (MGD) installation, utilizing solar photovoltaic technology to generate electricity, reducing the power demand for contracted energy (kW) from the distributor. With the expansion, the SFV implemented at HGG has a generation capacity that was previously 25.6 kWh to 58.0 kWh.



Team Training - ISO 50001 Energy Efficiency

Implementing an Energy Management System based on the ISO 50001 standard contributes to reducing energy consumption in units (buildings) by organizing energy efficiency initiatives, prescribing the use of more efficient equipment, promoting best operating and usage practices, and adopting the best technologies.

This results in resource savings and cost reductions, contributing to the conservation of natural resources and the reduction of pollutant and GHG emissions. Euclides de Jesus Zerbini Hospital (HTEJZ), Diadema State Hospital (HED), and Pirajussara General Hospital (HGP) maintained their ISO 50001 certification for the 7th consecutive year.

This was possible thanks to the training and commitment of all hospital leaders and teams, including medical, nursing, technical support, and administrative staff. The goal of the hospitals' certification was to promote improved energy performance through the implementation of innovative practices and sustainable projects, in addition to supporting the acquisition of products and services that maximize energy efficiency.

This includes conducting energy diagnostics, adopting more efficient technologies, and raising awareness, aiming not only to reduce energy consumption but also to promote environmental sustainability and resource conservation, contributing to a more sustainable and responsible future.

The hospitals underwent the process of adapting to ISO 50001 (Energy Management)

recertification, focusing on reducing energy consumption and environmental impacts. Senior management formalized the creation of the "Energy Management Team," composed of strategic members.

This multidisciplinary team was responsible for planning, implementing, and monitoring energy efficiency initiatives.

Awareness training was conducted with all hospital employees, addressing practices to reduce energy consumption in various areas. These initiatives included:

- Encouraging the turning off of lights when leaving rooms.
- Guidance on the efficient use of air conditioning (temperature between 23 and 24°C).
- Recommendation to turn off computers and printers after work hours.
- Raising patient awareness about rational energy use during showers, focusing on reducing the time and temperature of electric showers.
- Constant monitoring of energy use in all areas of the hospital.
- The pursuit of new technologies that help reduce energy consumption.

The certification strengthens the institution's image, attracts investment, and promotes sustainability.

Increasing the Replacement of Fluorescent Lamps with LED Bulbs

SPDM Affiliated Institutions: In 2023 and 2024, 22,567 fluorescent lamps were replaced with LED bulbs. This effort has been ongoing since 2018, with the goal of replacing 100% of the bulbs in all units. We have already replaced 96,237 bulbs, achieving a 95.5% replacement rate. This effort is being carried out gradually, based on the need for replacement and inventory assessment (financial sustainability), and is ongoing. This progress reduces energy consumption and improves comfort, as LED bulbs offer several benefits such as durability, energy savings, low heat emission, low-voltage operation, and lighting quality. The goal is to replace 100% of the bulbs in all Affiliated Units by 2026.

Using Reclaimed Water to Wash Waste Shelters, Collection Carts, and Mats

The rational use of water is becoming a growing necessity, especially in high-consumption establishments, including hospitals. This requires the implementation of policies that encourage the combination of new technologies and behavioral changes to combat water waste.



To help reduce the use of potable water for washing waste shelters, collection carts, and mats at the Barueri Municipal Hospital, three rainwater collection tanks were purchased and installed around the outdoor area near the waste shelters. Each tank has a capacity of 1,050 liters of water, totaling 3,150 liters. After buying the tanks and aiming to optimize water consumption efficiency, the water collected in the tanks was combined with the operation of a high-pressure washer, which requires a smaller volume of water to perform its function. As long as reclaimed water is available in the cisterns, responsible employees are instructed to wash all waste shelters, collection vehicles, and mats with this water, always avoiding the use of potable water. The process began with employee orientation, followed by monitoring to address any questions and adapting the use of the high-pressure washer.

Quality Assistance

(GRI 3-3)

With a history spanning over 90 years, SPDM has built robust and well-structured clinical governance, supporting the broad diversity of its healthcare services. This strategic framework strengthens the standardized management of operations, always aligned with best healthcare management practices and focused on care excellence.

Faced with contemporary challenges, the healthcare system faces a scenario of increasing fragmentation and complexity, driven by technological advancements, the emergence of new epidemics, an aging population, and the significant increase in chronic diseases. These challenges intensify the need for increased production with rational use of resources, requiring more to be done with less, without losing sight of the quality-of-service delivery. To respond to this context,

SPDM is grounded in a model supported by a clear quality and safety strategy, with best practice indicators, standardized monitoring of clinical protocols, and multidisciplinary teamwork. Strengthening collaborative work, combined with adaptability and continuous learning, is essential to promoting safer, more effective, and person-centered care.

In this scenario, a social value-based care model refers to delivering care that genuinely matters to people, going beyond traditional clinical outcomes. It's about offering a service that positively impacts patients' quality of life, well-being, and autonomy, considering their needs, preferences, and social context.



5 Goals to improve care!

The pillars of quality at SPDM Affiliated Institutions are based on five goals. The balance between these goals seeks to optimize the performance of healthcare systems:

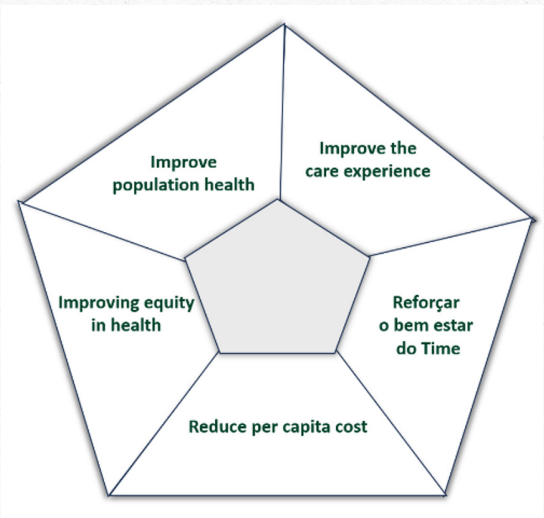
Patient experience: ensuring quality, safe care that promotes patient satisfaction.

Population health: improving health indicators at the collective level, considering the social determinants of health.

Per capita cost reduction: promoting efficient use of resources, avoiding waste, and reducing care costs.

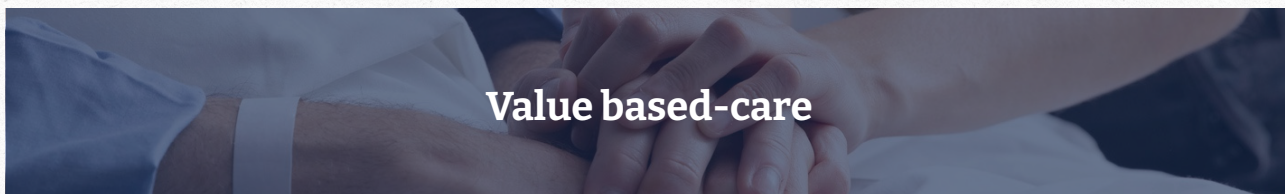
Healthcare worker well-being: caring for the physical and mental health of healthcare workers, reducing burnout, and promoting healthy environments.

Health equity: ensuring that all people have fair and equal access to healthcare services, combating social and structural inequalities.



Adapted model of Nundy S, Cooper LA, Mate KS. The Quintuple Aim for Health Care Improvement: A New Imperative to Advance Health Equity. JAMA. 2022;327(6):521–522. doi:10.1001/jama.2021.25181.





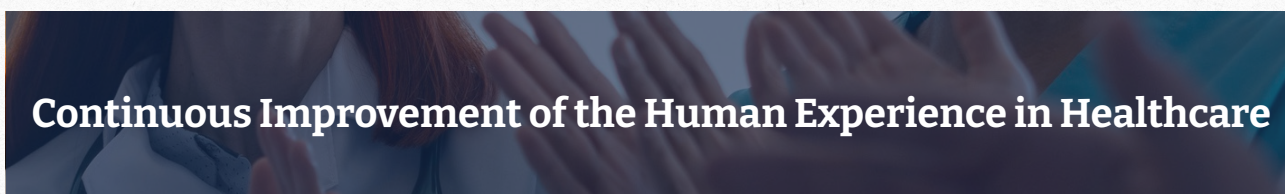
Value based-care

This refers to the quality of care provided, ensuring that patients receive the most appropriate treatment at the right time, based on the most up-to-date scientific evidence. This is guaranteed through well-defined clinical protocols that guide care procedures. In this pillar, we monitor indicators related to institutional strategic protocols, and each unit also follows specific protocols aligned with its epidemiological profile.



Reliability and Resilience

During a hospital stay, there is a risk of complications that can prolong the patient's hospital stay and negatively impact the patient's health. Many of these events are preventable by adopting good care practices. This pillar focuses on building a reliable and resilient system capable of continuously improving safety practices, strengthening the safety culture, and responding quickly and effectively to adverse or unexpected situations that are typical of healthcare in the contemporary world.

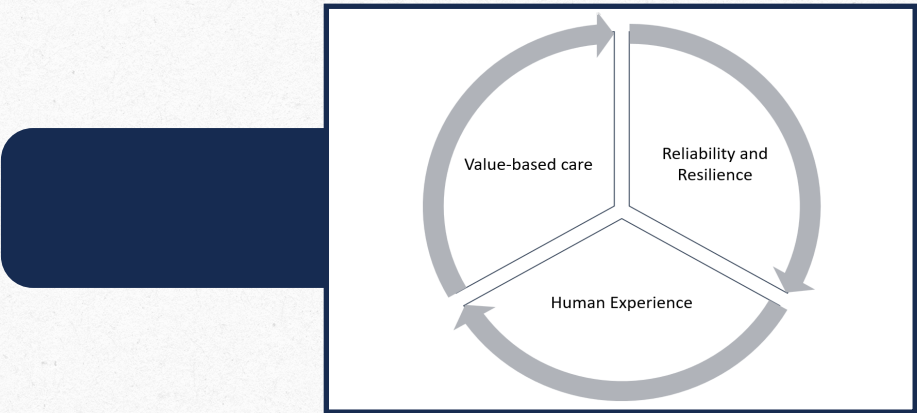


Continuous Improvement of the Human Experience in Healthcare

The healthcare experience is born from the genuine connection between professionals and patients, based on empathy, respect, and active listening. SPDM is committed to building a welcoming environment where each person is treated with dignity, considered in their entirety, and involved in decisions about their care. The quality of the human relationship between caregiver and recipient is an essential component of recovery and well-being. By continuously improving our processes and strengthening our culture of person-centered care, we transform the patient experience into a fundamental pillar of healing, creating a more responsive, efficient, and humane healthcare system.

Clinical Governance Model

Clinical governance is a management model that organizes and monitors the quality of healthcare, promoting all dimensions of excellent care: safe, efficient, socially responsible, and centered on empathetic and respectful human connections. This model is based on continuous cycles of improvement, with systematic audits based on best practice standards and scientific evidence, which support decision-making at all levels. Values such as transparency and collaboration are essential pillars to ensure continuous improvement and the sustainability of care. At SPDM Affiliated Institutions, we structure all dimensions of quality into three major interdependent blocks, which complement and reinforce each other.



Three dimensions that underpin the Pillars of Quality Management and Patient Safety in Clinical Governance.

Learning Teams

We implemented the Clinical Governance Model through Learning Times organized by epidemiological profile. Service delivery management is guided by multidisciplinary teams at regular meetings. These teams discuss and monitor indicators, promote safety practices, analyze incidents with a focus on learning, ensure adherence to clinical protocols, develop continuous improvement projects, and strengthen the safety culture. Simultaneously, we promote intelligent resource management, prioritizing the efficiency and relevance of care, avoiding waste and unnecessary procedures that increase costs without adding real value. In this way, these teams have decisively advanced value-based medicine, promoting results that truly matter for patients' health and quality of life, and benefiting the entire healthcare system.



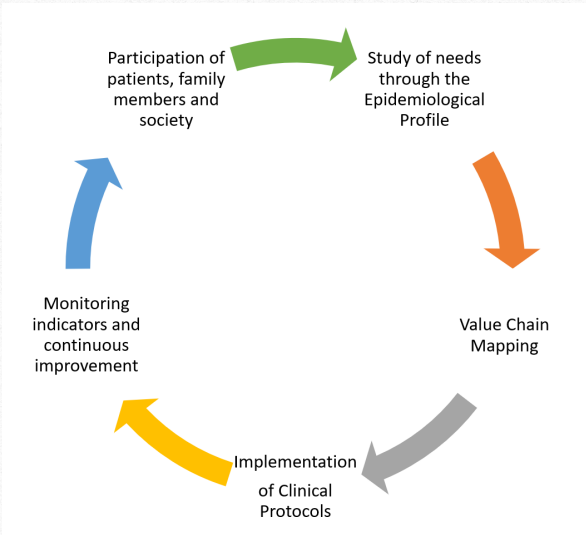
Learning Team Results 2023 - 2024

- Improved communication between departments;
- Improved employee engagement;
- Improved conflict resolution;
- Improved participatory management;
- Improved adaptive leadership;

Monitoring Strategic Protocols

Protocol management by line of care is a central component in organizing the healthcare network, ensuring comprehensive, continuous, and high-quality care. It involves defining well-structured, evidence-based care flows aligned with the population’s epidemiological profile. To this end, clinical protocols and therapeutic guidelines are implemented, guiding teams on the most effective approaches at each point in the network. The effectiveness of this process depends on continuous monitoring of quality and performance indicators, supported by management and audit tools. This model ensures that the care provided is aligned with user needs and service capacity, promoting more coordinated and effective care.

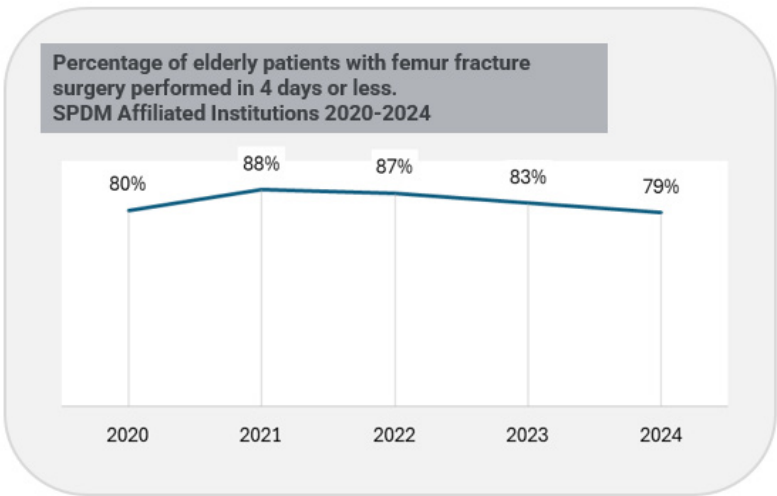
Learning Teams manage protocols according to the epidemiological profile and institutional context.



HOSPITALS	Surgical Patient Team	Safe Surgery Protocol
		Trauma Protocol
		Proximal Femur Fracture Protocol in the Elderly
	Critical Patient Team	Stroke Thrombolysis Protocol
		Chest Pain Protocol
		Sepsis Protocol
		Code Blue and Code Yellow
	Maternal and Child Team	Neuro Protection Protocol
		Postpartum Hemorrhage Protocol
		Sepsis Protocol
	High Complexity Team	Breastfeeding
		Care Protocol for Highly Complex Patients and Palliative Care
AMBULATÓRIOS	Outpatient Team	Oncology Patient Protocol
SAÚDE MENTAL	Mental Health Team	Safe Surgery Protocol
		Suicide Risk Protocol
		Mental Health Crisis Management Protocol
ATENÇÃO PRIMÁRIA	Primary Care Teams	Detoxification Protocol
		Maternal and child care
		Heart Failure Protocol
		Vaccination Coverage Surveillance
		Telemedicine Protocol

Care protocols are selected based on their clinical impact and social relevance. For example, we highlight the monitoring of compliance with the **Proximal Femur Fracture Management protocol in the Elderly**, monitored by eight hospitals offering orthopedic services. This protocol is crucial because it is related to critical outcomes, such as mortality risk, functional loss, and prolonged hospital stay, especially in a vulnerable and growing population such as the elderly.

Audit results of 6,910 medical records.



Singular Therapeutic Plan

The Singular Therapeutic Plan is a fundamental tool for organizing personalized care, involving the patient and the multidisciplinary team in planning and decision-making regarding their health. It values listening, shared responsibility, and encourages patient empowerment, especially in Primary Care, where care continues beyond the healthcare facility.



In 2024, a project implemented in 24 primary care services in the Vila Maria and Vila Guilherme region improved PTS monitoring and yielded impressive results: adherence increased from 25% to 80%. This improvement reinforces the importance of Singular Therapeutic Plan as a central strategy for adequate care and for building a more humane, responsive, and person-centered system.

SPDM/PAIS clinical governance is a structured system of quality management and continuous improvement in healthcare services, aimed at ensuring the provision of high-quality care to patients. This concept involves the application of principles and practices that promote safety, effectiveness, efficiency, and equity in healthcare.

Our clinical governance works to achieve a high-performance culture, directing its efforts toward the pillars of Patient Experience, Clinical Effectiveness and Efficiency, Clinical Audit, Risk Management, Education, and Training. Clinical governance guidelines were established to ensure SPDM/PAIS's commitment to fulfilling its mission: "To promote health actions inte-

grated with public management, benefiting the population, ethically and humanely, with technical quality and social and environmental commitment."

SPDM/PAIS manages 101 primary care units (UBS) in the city of São Paulo, integrated into the Accreditation Project promoted by the Municipal Health Department. Between 2023 and 2024, 215 external audits were conducted by ONA-accredited accreditation institutions, including diagnostics, accreditation, and follow-up visits. This work resulted in 67 units being recommended for ONA certification, demonstrating the evolution of the Quality Management System and the consolidation of SPDM/PAIS as a benchmark in health management.

SP Plus stands out for its continuous pursuit of excellence through this recognition of its Accredited status and, with investments in system modernization, professional training, and protocol optimization, aiming for safety, sustainability, and customer satisfaction. It maintains its commitment to continuous improvement and the goal of achieving the Excellence Level of ONA Accreditation.



SPDM Ombudsman

The ombudsman’s office plays a strategic role within SPDM, serving as an institutional communication channel between users (patients, caregivers, and family members). Its primary function is to ensure qualified listening and a humane approach, promoting effective mediation of needs and contributing to the continuous improvement of care and administrative processes. Surveys are conducted through interviews or spontaneously, using a previously defined instrument applied to each type of service. The data below presents the annual average user satisfaction percentage, by type of service, in 2023 and 2024.

Table: Average percentage of user satisfaction, per year at Hospital São Paulo (HSP)

Type of service	2023	2024
Hospital (Inpatient)	92%	91%
Emergency Room	87%	84%
Outpatient Clinic	90%	85%
Source: Satisfaction Survey - SPDM/HSP Ombudsman		

Table: Average percentage of user satisfaction, per year, in SPDM Affiliated Institutions

Type of service	2023	2024
Hospital	94,3%	94,2%
Outpatient Clinic	96,3%	95,6%
Pharmacies	87,3%	86,7%
Source: Satisfaction Survey – Ombudsman of SPDM Affiliated Institutions		

Table: Average percentage of user satisfaction, by year SPDM / PAIS

Type of service	2023	2024
Primary Care	95%	90%
Specialized Care	-	93%
Hospital Care	-	80%
Rehabilitation	95%	97%
Oral Health	-	98%
Mental Health	89%	85%
Emergency Care	96%	89%
Source: SPDM/PAIS Satisfaction Survey		

NPS Assessment – NET PROMOTER SCORE

Along with assessing the acceptability of services offered, SPDM performs the NPS (Net Promoter Score), a widely used methodology to measure customer or user satisfaction and loyalty with products, services, or organizations. In the healthcare context, the NPS assesses the patient experience, and the perceived quality of services provided. It is obtained by answering the following question: “On a scale of 0 to 10, how likely are you to recommend Unit X to a friend or colleague?”

Based on their response, customers are classified into three groups: promoters (score 9 or 10), neutral (score 7 or 8), and detractors (score 0 to 6). After calculating the NPS, the results are categorized into four main zones:

NPS between 75 and 100 – Excellence: challenging to achieve, reaching this level makes companies a benchmark in their markets. Besides being a low-performing product, maintaining it is a significant challenge.
NPS between 50 and 74 – Quality: uncompromising to achieve, reaching this level makes companies a benchmark in their markets. Besides being a high-performing product, maintaining it is a significant challenge.
NPS between 0 and 49 – Improvement: A reasonable level requires great care from the company. Here, image development should be a priority, as the chances of changing the NPS are greater.
NPS between -100 and -1 – Critical: An NPS score between -1 and -100 indicates a significant problem for the company, as customer dissatisfaction spreads to friends and family. Taking emergency action is crucial to reversing this situation.

The results achieved in 2023 and 2024 present the following values:

Table: São Paulo Hospital

NPS	2023	classification	2024	classification
Hospital (Inpatient)	91%	Excellence	89%	Excellence
Hospitals with Emergency Room	84%	Excellence	80%	Excellence
Outpatient clinic	89%	Excellence	82%	Excellence

Source: Satisfaction Survey - SPDM/HSP Ombudsman

Table: SPDM Affiliated Institutions

NPS	2023	classification	2024	classification
Referenced Hospitals	84%	Excellence	85%	Excellence
Hospitals with Emergency Room	68%	Quality	73%	Quality
Outpatient clinic	83%	Excellence	80%	Excellence
Pharmacies	57%	Quality	51%	Quality

Source: Satisfaction Survey - Ombudsman of SPDM Affiliated Institutions

In October 2024, SPDM/PAIS introduced NPS into service satisfaction surveys for contracts in the State of São Paulo.

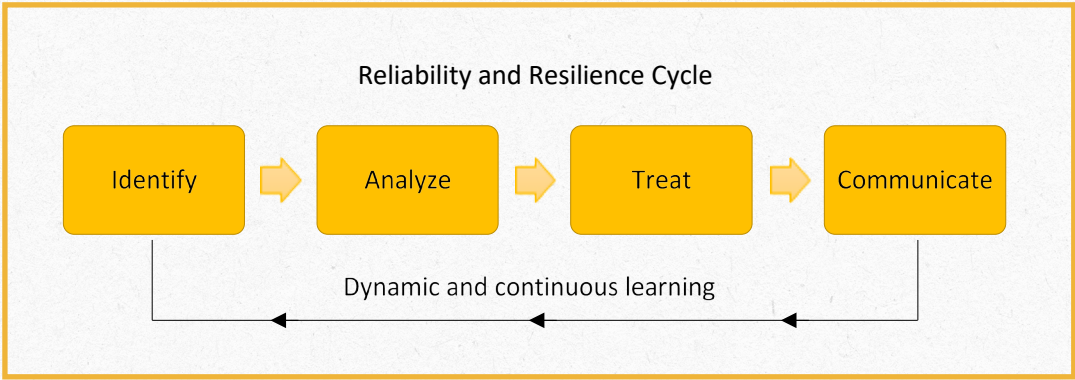
Patient Health and Safety



(GRI 3-3; 416-1;416-2)

In an increasingly dynamic healthcare landscape, ensuring reliable care is essential. Patients and professionals need to rely on safe and effective services, even in the face of unexpected situations. Being prepared for changes in the epidemiological profile and the occurrence of new epidemics has become a constant requirement.

Today, safety goes beyond reliability; reality challenges us to build resilient systems capable of successfully adapting to variable, adverse, or uncertain conditions, ensuring the continuity of essential functions. Resilience represents the ability to anticipate risks, maintain operations, and transform challenges into opportunities for continuous improvement.



1

How to Identify Risks

Being proficient at identifying risks is an effective way to increase safety and prepare healthcare services for adverse situations. In practice, this is achieved through a patient safety incident reporting channel and active surveillance, which uses different types of audits to detect flaws, anticipate problems, and guide improvements in care processes.



Audit Type	Summary
Predictive	Based on risk perception and trends; involves direct observation of daily work.
Preventive	Evaluates safety practices; stands out for in-person observation of procedures.
Reactive	Performed after adverse events or non-compliances; may follow the London Protocol.
Inspections	These are not formal audits; they are carried out by the team or supervisors themselves, with planning.

The assessment of healthcare risks is based on the combination of the severity of potential outcomes and the probability of occurrence, by international guidelines applied to complex systems.

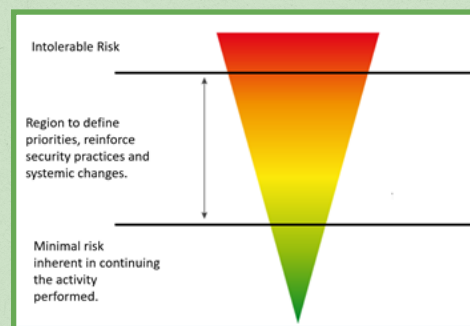
The ALARP (As Low As Reasonably Practicable) principle, which guides risk reduction to the lowest possible level, provides that it is technically, economically, and operationally feasible.

The risk mapping model is structured by care pathways and developed collaboratively, with representatives from each phase.

Tools such as What If (or SWIFT), aligned with the NBR IEC 31010:2021 standard, are used to develop the Healthcare Risk Management Map for each sector. This approach, strengthened by training and virtual meetings, facilitates professional engagement and adapts the ALARP concept to the realities of healthcare services, defining limits and priorities for healthcare risk management.

The Teams assess risks based on the epidemiological profile. This way, priority issues receive attention more quickly, reducing the chance of unwanted outcomes.

ALARP MATRIX RISK INDEX Gravity vs. Probability			GRAVITY				
			Catastrophic	Critical	Significant	Small	Insignificant
			A	B	C	D	E
PROBABILITY	Frequent	5	5A	5B	5C	5D	5E
	Occasional	4	4A	4B	4C	4D	4E
	Remote	3	3A	3B	3C	3D	3E
	Unlikely	2	2A	2B	2C	2D	2E
	Very Unlikely	1	1A	1B	1C	1D	1E

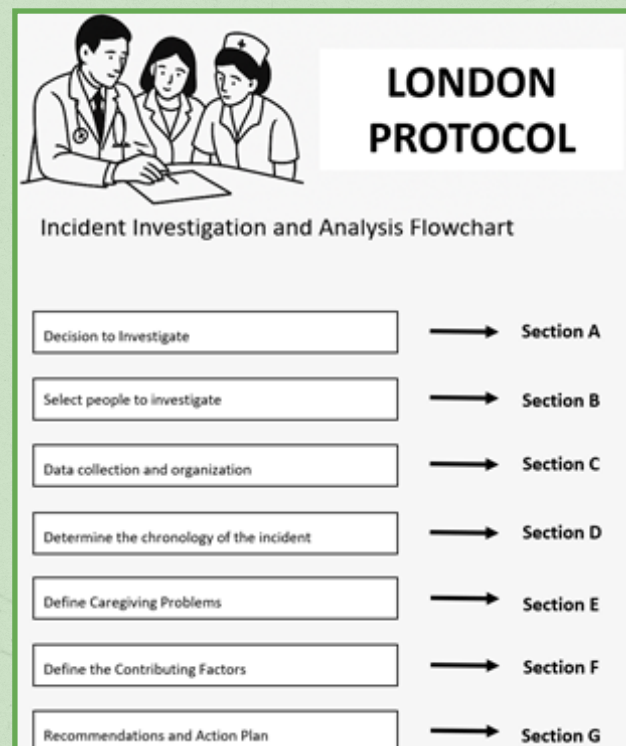


ALARP Matrix (As Low As Reasonably Practicable)

Unacceptable Risk Management – Sentinel Incidents

Risks deemed unacceptable are classified as Sentinel Incidents and receive priority investigation and resolution. In these cases, we follow the guidelines of ANVISA (National Health Surveillance Agency).

The recommended approach follows the London Protocol, which organizes the investigative process into clear steps: systematic information gathering, formation of an Investigation Team, and analysis of contributing factors based on Human Factors principles. This framework allows for a deeper understanding of the causes of events, promoting practical corrective actions. Source: Notebook 7 – ANVISA (www.gov.br)



Operational Safety Practices (PSO)

Operational Safety Practices (PSO), acronym in Portuguese, also called ROPs (Required Organizational Practices) by Canadian certification, consist of structured actions aimed at increasing safety in high-risk procedures, promoting reliability in healthcare processes.

Examples of OSPs include the implementation of checklists, double-checking at critical stages, and other measures that reduce the likelihood of error. Currently, Affiliates monitor 17 OSPs, whose implementation is gradual, respecting the different stages of maturity of the institutions. These practices may be mandatory or recommended, depending on the epidemiological profile and the healthcare risks identified in each context. After implementation, OSPs are subject to continuous auditing, review, and improvement processes. These practices are monitored by dedicated teams, who promote training and systematic discussions to ensure continuous improvement in compliance and healthcare safety.

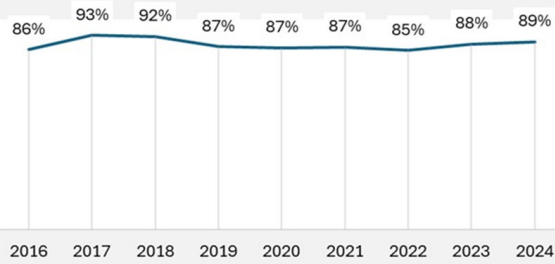
DIMENSIONS	OPERATIONAL SAFETY PRACTICES 2020	HOSPITAL	OUTPATIENT CLINIC	RASTS (HEALTH NETWORK)	MENTAL HEALTH	PHARMACIES	(LABORATORY) CEAC
Safety Culture	PSO.1. Notification and Learning System	O	O	0	O	O	O
	PSO.2. Sentinel Incident Systemic Analysis	O	O	0	O	O	O
	PSO.3. Safety Culture Survey	O	O	0	O	O	O
	PSO.4. Patient Safety Plan (RDC.36)	O	O	0	O	O	O
Communication	PSO.5. Patient Identification	O	O	0	O	O	O
	PSO.6. Information on Transfer of Care	R	R	0	R	NA	NA
	PSO.7. Surgical Checklist	O	O*1	0	NA	NA	NA
	PSO.8. Safety Huddles	O	NA	0	NA	NA	NA
Infection Control	PSO.9. Hand Hygiene	O	O	0	O	O	O
	PSO.10. Timely use of prophylactic antibiotics	O	R	0	NA	NA	NA
	PSO.11. Bundles	O	NA	0	NA	NA	NA
Medicines	PSO.12. Medication Reconciliation	O	O	0	O	NA	NA
	PSO.13. Safety in the use of High-Alert Medications	O	O	0	O	NA	NA
General Care	PSO.11. Fall Prevention	O	O	0	NA	NA	NA
	PSO.12. Pressure Injury Prevention	O	NA	NA	NA	NA	NA
Mental Health	PSO.13. Suicide Prevention	O*2	R	0	O	NA	NA
	PSO.14. Violence Prevention	O*2	R	0	O	NA	NA
Equipment	PSO.15. Safety in using an Infusion Pump	O	NA	0	NA	NA	NA
Blood components	PSO.16. Safety in the administration of blood components	O	NA	0	NA	NA	NA
Laboratory Tests	PSO.17. Security in the delivery of critical exam reports	O	O	0	NA	NA	O
O=Mandatory; R=Recommended; NA=Not applicable; *1 Units with Outpatient Surgery *2 Mental Health Units							

Monitoring of Operational Safety Practices (PSO) audits

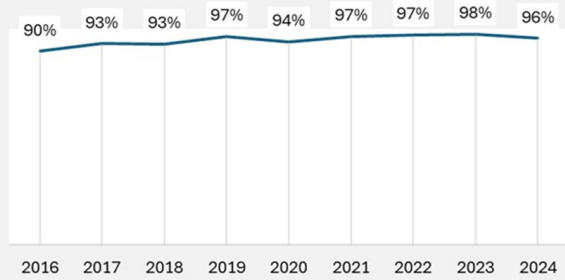
Security practices are monitored monthly through compliance audits and are monitored by Learning Teams.



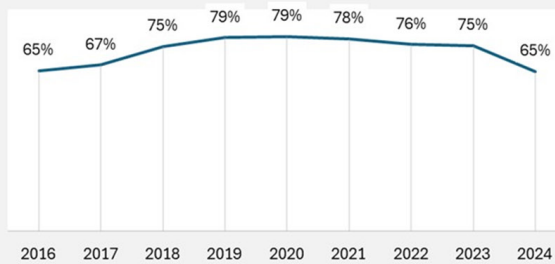
**PSO.5. Proportion of patients with standardized wristbands
SPDM Affiliated Institution 2016-2024**



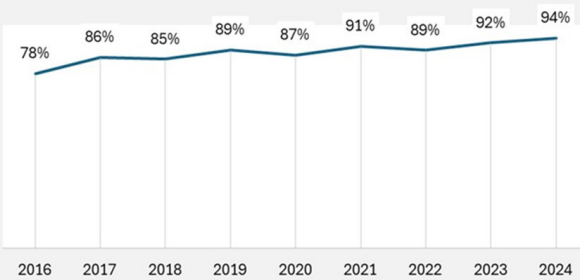
PSO 7. Percentage of Compliance with Surgical Checklist.



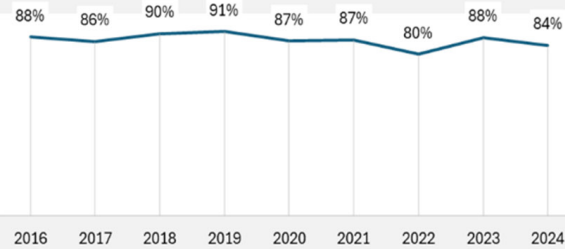
PSO 9. Hand hygiene compliance rate. SPDM Affiliated



PSO 10. Percentage of compliance with prophylactic antibiotic



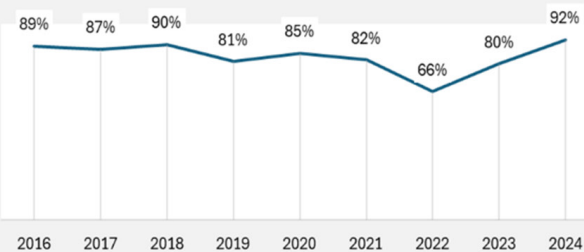
PSO 11. Proportion of patients with fall risk assessment. SPDM



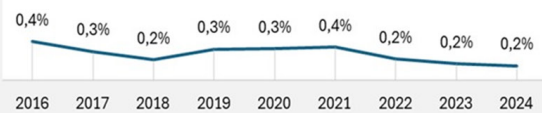
PSO 11. Fall Index. SPDM Affiliated Institutions. 2016-2024



PSO 12. Percentage of patients undergoing daily pressure injury



PSO 12. Pressure Injury Index. SPDM Affiliated Institutes.



Safety culture is the set of values, attitudes, behaviors and practices that demonstrate how much an organization prioritizes safety in all its activities.



Importance of Safety Culture – Summary

- Prevents errors and accidents
- Protects lives
- Builds trust
- Stimulates continuous improvement
- Reduces failure costs

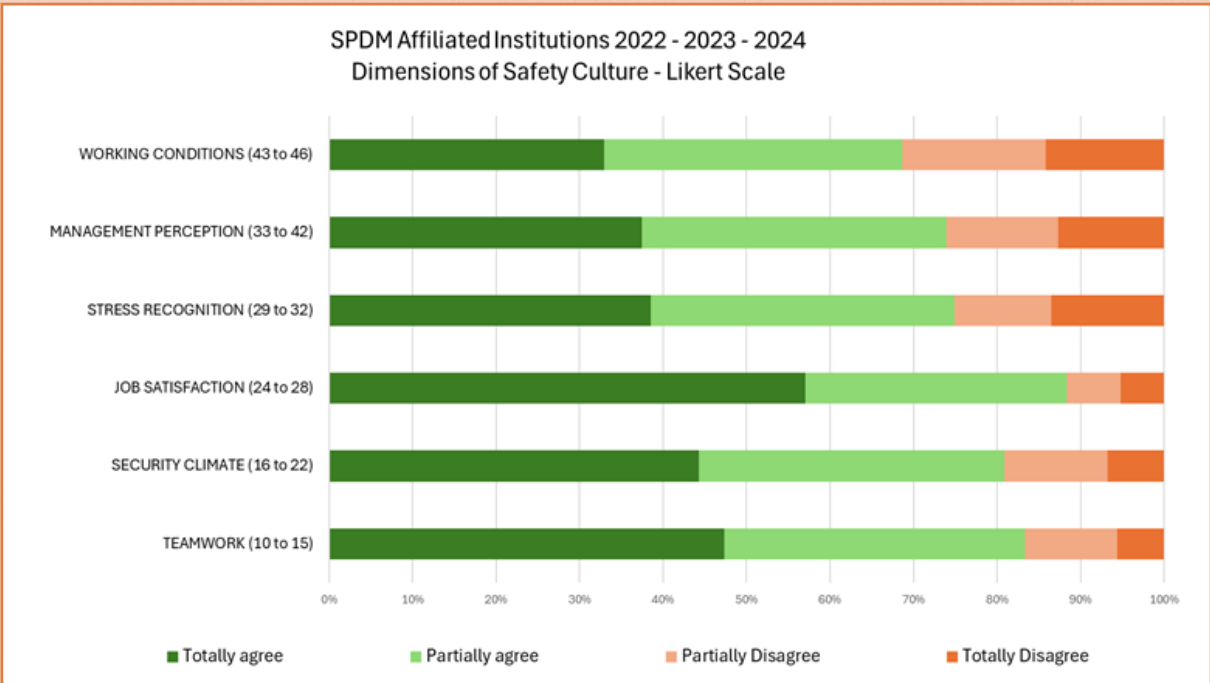
Safety Culture Survey

Safety culture surveys are essential tools for understanding team perceptions, attitudes, and behaviors regarding patient safety. Their importance has been widely recognized by regulatory agencies and quality programs, such as ANVISA's National Patient Safety Program (PNSP), which recommends the use of validated instruments to assess culture in healthcare institutions.

Since 2008, SPDM has implemented safety culture surveys in its units, understanding that organizational culture is a collective and social behavior that requires time—approximately three years—to consolidate significant changes. Therefore, a strategy of recurring survey applications was adopted, in two- to three-year cycles, allowing for continuous monitoring and targeting of improvement actions.

In 2022, the institution began using a new assessment tool: the Safety Attitudes Questionnaire (SAQ). This internationally validated instrument includes dimensions related to human factors and psychological safety in the workplace. This change aimed to deepen the analysis of organizational safety culture, aligning with international best practices.

The surveys conducted in 2022, 2023, and 2024 included the participation of 4,051 employees, including healthcare and administrative professionals. The SAQ assesses six fundamental dimensions of safety culture, providing a comprehensive and strategic view of the organizational environment. The results obtained are being used as a basis for collaboratively developing action plans, strengthening team leadership, and promoting continuous improvement in patient safety.



Actions to Promote a Culture of Safety

- 1. Discussion of notifications in team meetings
Teams analyze event notifications to adjust routines and strengthen safety.
Objective: Improve the organization of activities and prevent failures.
- 2. Monitoring audits and disseminating best practices
Teams monitor the results of safety audits and share improvement actions. Objective: Promote continuous adherence to safe practices and encourage collective learning.
- 3. Conducting Safety Huddles
Departments hold huddles with the multidisciplinary team on duty, promoting open dialogue. Objective: Strengthen communication, listen to team perceptions, and reinforce the focus on safety.
- 4. Leadership training in patrols and emotional safety climate
Leaders are trained to conduct safety patrols and cultivate a welcoming environment. Objective: Encourage active listening, reduce fear of punishment, and foster a culture of learning.
- 5. Implementation of the Safety Culture Survey
Application of the survey to assess the six main dimensions of safety culture. Objective: Identify opportunities for improvement and develop actions with the teams.

Patient safety management

At SPDM/PAIS, the Institutional Patient Safety Center (NISP) assists in the creation and implementation of Patient Safety Centers (NSP) in healthcare units, understanding that the systemic and continuous application of policies, procedures, conduct, and resources in the identification, analysis, assessment, communication, and control of risks and adverse events that affect safety, human health, professional integrity, the environment, and the institutional image are fundamental actions for the dissemination of a safety culture within the institution.

In 2024, 341 NSPs were implemented in healthcare units: 186 in São Paulo, 105 in Rio de Janeiro, 31 in Diadema, 8 in Fortaleza, 8 in Santo André, 2 in Porto Alegre, and 1 in Praia Grande. This dissemination aims to promote the culture and risk management practices related to and guided by safe care, which are essential for SPDM/PAIS.

Safety Culture

SPDM/PAIS prioritizes a safety culture in which employees take responsibility for their safety, the safety of their colleagues, patients, and family members, acting with a commitment to preventing unnecessary harm that could compromise patient care and the institution’s image.

To this end, SPDM/PAIS advocates mechanisms to assess and monitor the safety culture and identify systemic issues that could result in unsafe behaviors by employees. This information can be obtained through various existing channels, such as preventive and reactive risk management, incident and near-miss reporting systems, and root cause analysis reports. Communication flows for adverse events with serious harm and preventable deaths, quality and patient safety indicators, audits, training, qualifications, technical visits, and patient safety culture perception surveys.



Pre-Reactive or Preventive Risk Management

Within the context of SPDM/PAIS, preventive risk management was developed to analyze the main risks facing healthcare units and propose preventive barriers to prevent these risks from becoming adverse events due to a lack of early intervention. To this end, work process analyses, based on risk mapping, are parameterized using the quality tools established by the institution.

This aims to strengthen the systemic and continuous application of policies, procedures, conduct, and resources aimed at reducing risk and improving patient outcomes.

In August 2023, SPDM/PAIS established the corporate Healthcare-Associated Infection Prevention and Control Service (SCIRAS) to implement strategic infection prevention actions within healthcare services. To this end, the Healthcare-Associated Infection Prevention and Control Program (PCIRAS) was developed, which aims to reduce the incidence of Healthcare-Associated Infections (HAIs) and Antimicrobial Resistance.

The program is based on the adoption of practices based on guidelines from official agencies, recommendations from specialized societies, and scientific evidence, thus ensuring the implementation of practical measures that promote patient safety.

Through Corporate SCIRAS, Local Healthcare-Associated Infection Control Committees were established to implement the processes and guidelines developed for Primary Care and Emergency units, adapting

them to the characteristics and needs of each profile, such as Basic Health Units, Emergency Care Units, Day Hospitals, Specialty Outpatient Clinics, and CAPS managed by SPDM/PAIS. In hospital units, Corporate SCIRAS provides technical support for the processes and indicators implemented by the Hospital Infection Control Service.

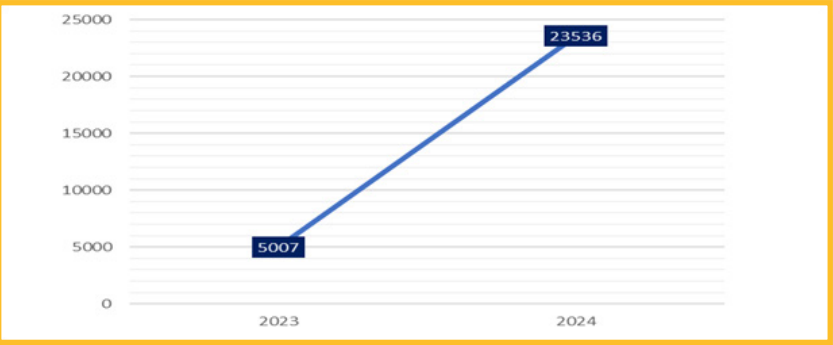
Corporate SCIRAS develops institutional manuals and protocols to standardize best practices and ensure their uniform and effective implementation across all units. Furthermore, it provides periodic training for healthcare teams tailored to the specific needs of each unit and conducts technical visits to monitor the implementation of established guidelines. Continuous monitoring of the action plans developed by the units is a priority to ensure that all prevention and control actions are carried out with maximum efficiency by current standards and recommendations.

Reactive or Corrective Risk Management

In addition to the incident and near-miss reporting system, the NISP interfaces with the Ombudsman’s Office on healthcare issues and the Death Commission to identify situations that may have impacted patient safety, and the quality of care provided.

Incident and near miss notification system

The incident and near-miss reporting system has undergone updates that have made reporting easier. In addition to the changes implemented, the external certification process in Primary Health Care (PHC) promoted by the National Accreditation Organization (ONA) has strengthened patient safety processes by engaging employees on the need for reporting and their role in patient safety protocols (Patient Safety Goals).



Annual evolution of incident and near-miss notifications
(Source: NISP – SPDM / PAIS)





Root cause analysis reports and communication flow for adverse events with serious harm and death

Understanding the importance of accurately analyzing serious adverse events and preventable fatalities to establish improvements in care processes, structures, and equipment, and given the importance of this topic in strategic planning and the ONA Accreditation movement in Primary Care, the NISP established a notification and communication flow for adverse events with fatalities to promote continuous improvement actions systematically. In this flow, analyses are conducted jointly with the Unit's NSP, managers and employees, the NISP, technical supervisors, clinical engineering staff, building engineering, and medical supervisors.

All analyses of causes, contributing factors, and improvement action planning are recorded in quality tools, root cause analysis reports, and the London Protocol, as established by SPDM/PAIS. These actions demonstrate the Institution's commitment to not assigning blame, but rather to promoting a culture of fair safety.

Patient quality and safety Indicators

In 2024, the NISP held meetings with hospital units to present the results of quality and patient safety indicators, which were extended to emergency and primary care units.

These meetings take place periodically, and the SCIRAS team participates alongside the NISP to discuss the actions taken, continuous improvement plans, and the work of local centers in health units managed by the PDM/PAIS.

These presentations of indicator results promote continuous learning within the units, disseminating ideas and models for institutional application.

Audits

Since 2023, Primary Care in the city of São Paulo has received quality and safety assessment visits and external audits from the National Accreditation Organization (ONA), which have contributed to the advancement of methodologies, implementation of protocols, and policies based on a culture of patient safety. The positive impact of achieving certification highlights the organization's maturity in pursuing increasingly safer actions for the sake of quality care and patient-family-centered care.

Of the notifications received by the NISP at SPDM/PAIS, 71% were submitted by the Basic Health Units selected for the Accreditation process, representing approximately 19,600 notifications.



Training, qualifications and technical visits

Within the context of the SPDM/PAIS (Public Health Program), and in response to the needs observed in the NISP’s work at healthcare facilities, several initiatives were implemented to strengthen the NSP’s performance and disseminate the Safety Culture advocated by the institution.

In-person and remote training sessions were held in 2023 and 2024, as well as two virtual webinars: “April for Patient Safety,” with approximately 500 participants, and “Orange September,” with 480 connections.

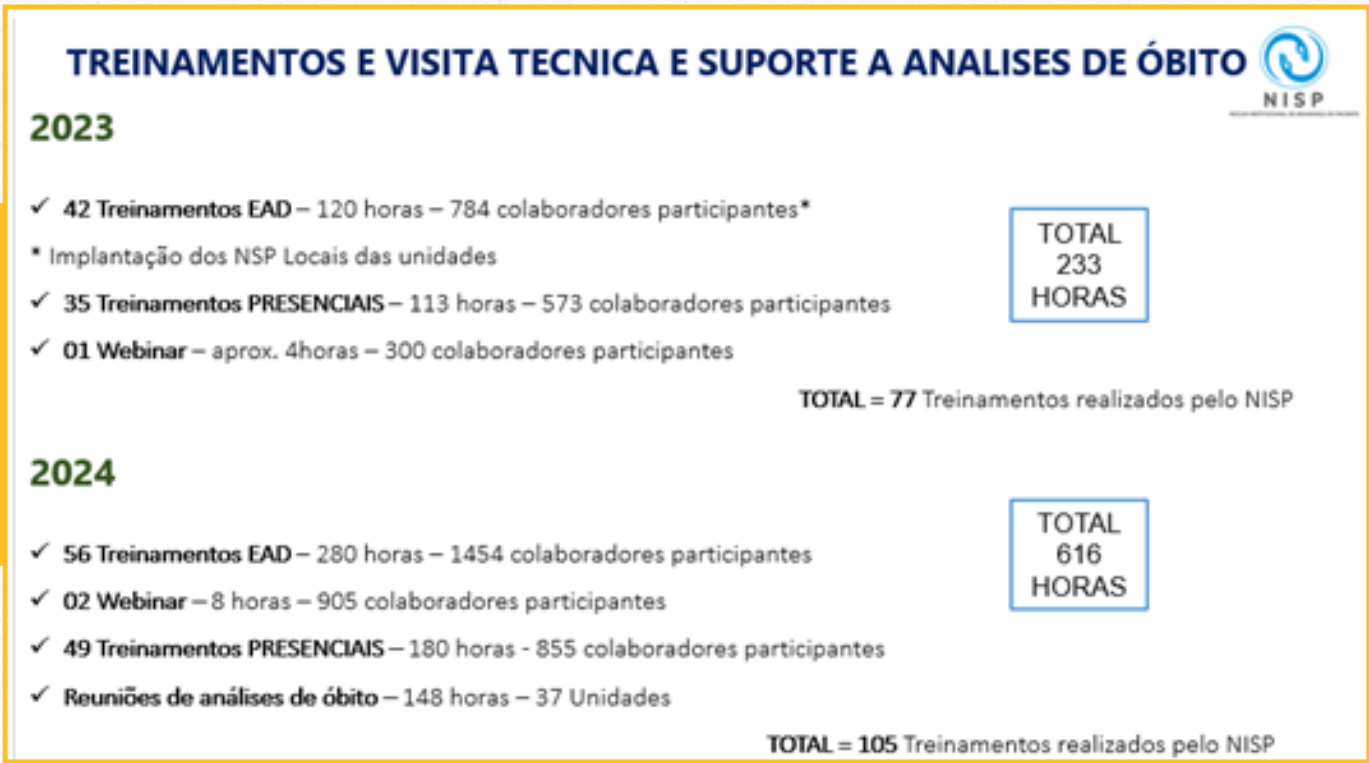
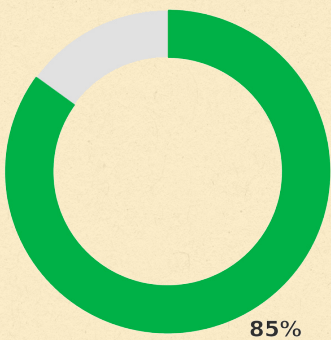
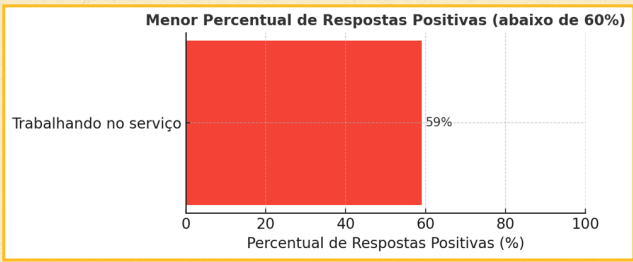
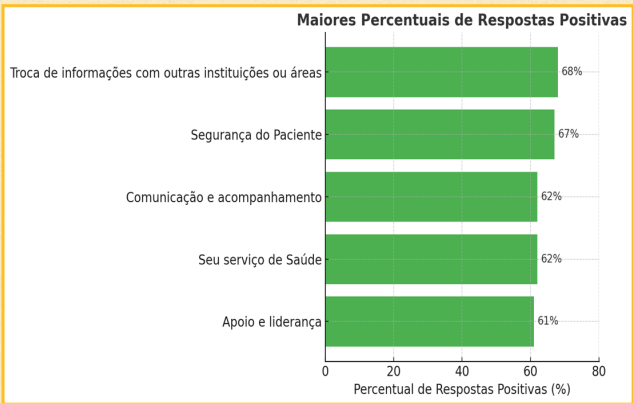
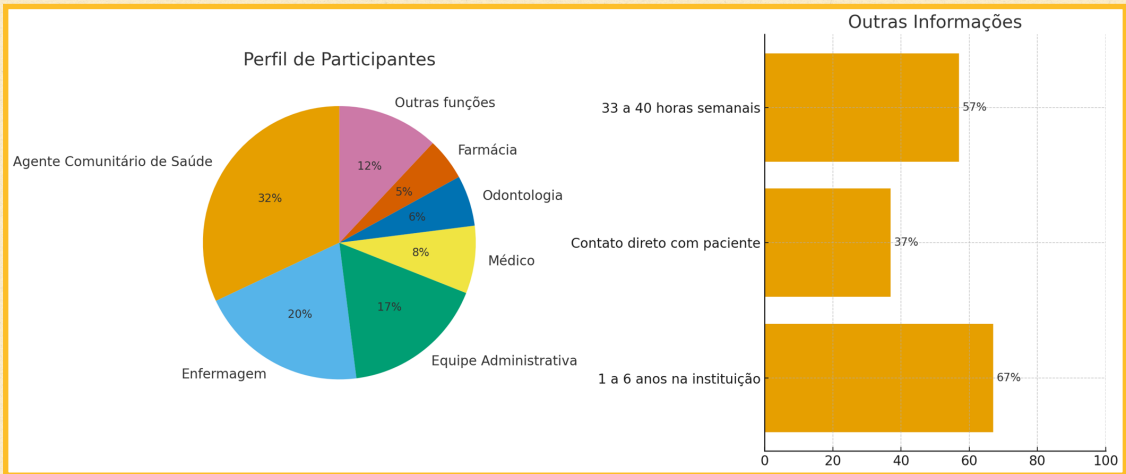


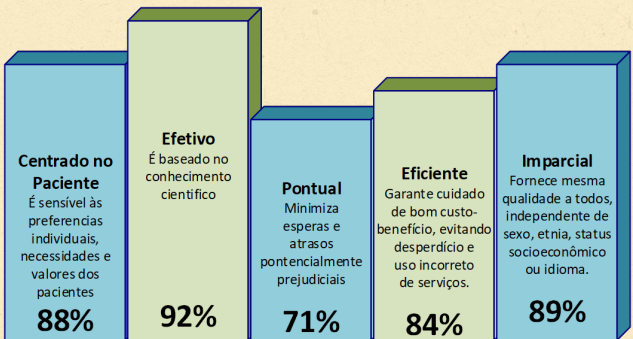
Figure: Evolutionary presentation of training, qualifications, and technical visits in 2023 and 2024
Source: NISP-SPDM / PAIS

Safety Culture Survey

In 2024, the survey had 4005 respondents, including professionals belonging to the CLT, PJ and outsourced caregiver employment regimes.



Most respondents state that the institution adopts clinical systems and processes in order to prevent, identify, and correct problems that have the potential to affect patients.



Source: NISP – SPDM / PAIS

Instrument translated, adapted and validated in Brazil: Medical Office Survey on Patient Safety Culture

In general terms, the results obtained through the application of the safety culture assessment questionnaire in the context of SPDM / PAIS demonstrate that the Institution is moving towards disseminating the safety culture among health professionals.

Humanition

(GRI 3-3)

A pioneer in the humanized care management model, SPDM has, over the years, through continuous improvement, incorporated best care practices for ethical and empathetic care that encourages individual empowerment and autonomy.

From a governance perspective, it is broadly aligned with the Ministry of Health's National Humanization Policy, as its provisions are incorporated into its strategic planning, demonstrating the institution's responsibility for consolidating the Humanization Policy.

In practical terms, humanization at SPDM encompasses welcoming patients and staff with their needs and expectations; caring for the environment; providing various spaces for discussion and imple

menting internal and network improvements; interacting and connecting with the community; and encouraging the modernization of care through the implementation of technologies and quality certifications.

All of this reflects SPDM's commitment to building healthcare practices that respect citizens' values and needs, especially in strengthening the Unified Health System. Thus, within the principle of transversality, humanization at SPDM extends to all human relationships, encompassing care management, technical, administrative, and financial management, a concept that permeates the entire institutional chain.

SPDM's Contribution to the National Humanization Policy:

- ❖ Improving the quality of care by enhancing management and processes and ensuring their ongoing maintenance through quality certifications.
- ❖ Patient engagement and protagonism in their healing process and maintaining their health.
- ❖ Coordination with the healthcare network.
- ❖ Engagement of healthcare institutions in the communities they serve.
- ❖ Commitment to actions aimed at improving employee quality of life and health.
- ❖ Pleasant social environments.
- ❖ Humanization Working Groups.

Hospital Amigo da Criança Quality Seal - IHAC

Awarded by the Ministry of Health to the Maria Amélia Maternity Hospital in Rio de Janeiro, Rio de Janeiro, and the Nossa Senhora da Conceição Hospital in Fortaleza, Ceará, the seal recognizes hospitals that comply with the 10 steps to successful breastfeeding, established by UNICEF (United Nations Children's Fund) and the WHO (World Health Organization), in addition to other criteria involving humane care for women and babies during pre-labor, delivery, and postpartum periods.





Good practices seal in the fight against syphilis

In 2024, the six UBSs (UBS City do Jaraguá, UBS Eduardo Reschilian, UBS Elísio Teixeira Leite, UBS Jardim Grimaldi, UBS Recanto dos Humildes, and UBS Vila Campestre), won the “Seal of good practices in the fight against congenital syphilis”, an award, an initiative of the Municipal Health Department (SMS) of São Paulo, which recognizes the work of prevention and treatment of vertical transmission of syphilis, carried out by multidisciplinary teams, after a rigorous evaluation of the territory and specific improvement indicators..



Improvement in Palliative Care – Euryclides de Jesus Zerbini Transplant Hospital

This project reinforces the need for patient-centered care, respecting patient autonomy, and ensuring personalized care. The creation and review of protocols ensures continuity of care, while multidisciplinary meetings promote a constant exchange of knowledge among teams. Furthermore, the dissemination of information and the holding of educational events encourage the active participation of society and professionals in building a more welcoming and humane hospital environment.

Brave Child Project - Guarulhos General Hospital

The Brave Child Project aims to reduce pediatric surgical clients’ fear of the unknown, reduce stress for both children and parents, and bring the client closer to the multidisciplinary team. This action creates a better environment and reduces anxiety using playful strategies during the perioperative period.

The waiting period for surgery and the postoperative period are spent in playful spaces, where children are immersed in play.



Triple Inclusion Method – Community Participation (Diadema State Hospital)

Diadema State Hospital is in a peripheral region with a large population. Meetings are held every six months with the community and the hospital's board of directors to assess local demands and needs, as well as the institution's acceptability.

This action encourages the inclusion of diverse stakeholders, fostering shared responsibility among users, staff, and management.



Healthcare Meetings - CEAf Network (Specialized Component of Pharmaceutical Assistance)

A space dedicated to patient guidance, raising awareness, and educating them about specific pathologies. The goal is to empower patients in their treatment decisions and promote the exchange of experiences, placing their needs at the center of our efforts.

Meetings are held at CEAf units, which serve as a supportive environment for service users. Lectures are given by external guests, specialists, or individuals with significant involvement in the chosen topic.

The topics are chosen based on questions raised by patients during in-person care, ensuring their practical relevance and the complexities of medication use and administration.

Ambience

The ambience projects of the units managed by SPDM aim to continuously improve their spaces, promoting welcoming, safe and comfortable environments for patients and employees.



Ecumenism

Ecumenism in healthcare settings promotes spiritual and religious support for patients, families, and healthcare professionals, regardless of their beliefs or religious traditions. This approach seeks to foster acceptance, comfort, and hope in times of vulnerability, respecting religious diversity and ensuring that everyone has access to the spiritual support they desire.



Evangelical Chaplaincy at São Paulo Hospital



Health Pastoral at the HSP Chapel

Volunteering

The volunteer program contributes to welcoming patients and their families, focusing on their particularities and needs, offering generosity, and valuing and respecting the individual. Volunteers contribute significantly to providing qualified listening.



HMVJS Volunteer Team



Volunteers from the Paulista Association for Cancer - HSP

Social engagement

SPDM recognizes that healthcare institutions, as community-integrated organizations, can play a significant role in enhancing the quality of life for people in their operational regions. The teams at institutions managed by SPDM carry out a variety of initiatives, which sensitively seek to collaborate in their territories with cultural, educational, social, and health initiatives.



Commemorative dates

Special events. Welcoming and affectionate between employees and patients.



Patient Privacy

(GRI 3-3, 418-1)

SPDM AFFILIATED INSTITUTIONS AND SÃO PAULO HOSPITAL

SPDM has made strategic progress in data protection and information security, with a special focus on patient privacy. Investments in modern solutions and more robust processes have enabled the institution to anticipate risks, respond quickly to incidents, and ensure greater reliability in its systems.

One of the main developments was the implementation of advanced monitoring systems, which protect devices used daily and identify threats in real time. Furthermore, it began mapping and correcting vulnerabilities before they compromised operations.

To protect sensitive information, especially that related to patient health, SPDM strengthened its access controls and implemented tools that guarantee data confidentiality.

To raise awareness, the first official information security course was created for employees, in addition to the launch of the Information Security Portal, which serves as a support and guidance channel.

SPDM also became directly involved in the selection and implementation of new systems, ensuring that all adopted technological solutions comply with the fundamental pillars of security: confidentiality, integrity, and availability.

With this integrated and responsible approach, SPDM reaffirms its commitment to patient privacy, promoting a safe, ethical, and sustainable digital environment.

In this sense, the previous years represented progress for SPDM in ensuring the privacy and data protection of its patients. After creating its Privacy and Data Protection Committee in 2020, SPDM began an extensive process of adapting its activities to the obligations established by the



LGPD, appointing a person responsible for processing personal data, as expressly required by law, and creating a specific department to handle the institution's privacy issues.

Based on these initial measures, the institution adopted technical and administrative measures aimed at ensuring compliance with its legal obligations and, above all, the adequate protection of patient privacy and data.

SPDM contracted privacy management software, which is essential support for the institution's LGPD compliance project and the implementation of a robust privacy governance model. It also adopted a communication plan to raise awareness among its employees and service users.

This includes several initiatives, such as including a specific chapter on privacy in the employee and supplier handbook, creating onboarding training on the topic, making videos and comics, preparing technical opinions, and also providing a privacy notice on its institutional website and a communication banner so patients can easily access this information.

In addition to the measures, SPDM established its Privacy Standard. This document establishes institutional guidelines for the processing of personal data, both internally and externally, thus defining its institutional vision on the topic. Since 2022, the company has been implementing several measures to continue progress in protecting patient information and privacy.

Among these measures, we highlight the creation of a periodic newsletter to keep employees aware and informed on the topic, as well as the creation of specific training programs for various departments of the Institution, providing appropriate knowledge to employees responsible for the proper use and care in handling patient information.

Since 2023, SPDM has held Privacy Week. This annual event has become an essential part of the organizational culture, reinforcing the importance of privacy and data protection in the daily lives of data subjects.

During this week, various activities are held to engage employees, suppliers, and external guests, fostering an environment of learning and awareness.

Activities include daily lectures on different aspects of privacy, interactive workshops, educational games, giveaways, and much more. With the active participation of the entire organization, whether in-person or remotely, Privacy Week has already established itself as a fundamental milestone in the SPDM calendar, strengthening the culture of data protection and information security.

To ensure the effectiveness of its actions in protecting the privacy of patients and its employees, SPDM has established specific workflows to address privacy risks. These include mechanisms for evaluating suppliers and services, as well as workflows to handle incidents involving information processed by the Institution. SPDM, in compliance with legal provisions, carries out privacy compliance projects at the institutions it manages.

During this process, data processing workflows are mapped, appropriate legal bases are assigned, risks and vulnerabilities are identified, and, whenever necessary, controls to mitigate them are suggested.

This initiative ensures that units operate by current legislation, strengthening data protection and promoting a culture of privacy aligned with best practices. As part of the activities carried out, audits

are also conducted at the units, seeking to ensure the continuous evolution of confidentiality within the organization. This process allows us to evaluate the effectiveness of implemented measures, identify potential areas for concern, and reinforce the data protection culture. Furthermore, the audit provides a clear insight into employee engagement, enabling targeted actions to strengthen awareness and adherence to best privacy and information security practices.

Adequate privacy protection requires that personal data be adequately protected. Therefore, in addition to measures aimed explicitly at privacy, SPDM continues to dedicate significant efforts to data protection, relying on a dedicated information security department.



In 2024, SPDM implemented and configured a DLP (Data Loss Prevention) tool, which performs daily detection of potential personal data leaks. This solution enables continuous monitoring, identifying incidents in real time, and encouraging the adoption of quick and effective measures to mitigate risks.

Due to all the measures taken by SPDM in recent years, as well as the constant institutional evolution regarding privacy and data protection, it is clear that the organization has not received any incident or complaint of violation, leak, or loss of information from its patients to date (GRI 418-1).

SPDM / PAIS

To safeguard the privacy and protect the personal and sensitive data of all patients, employees, and suppliers, SPDM/PAIS has developed structured Information Security and Incident Response actions with the participation of a multidisciplinary team.

The ongoing work to improve governance and a data protection culture is underway through communication campaigns with content disseminated via institutional email on legal and privacy issues.

Data Protection Governance

In 2023, SPDM/PAIS began developing documents that established guidelines to achieve its mission and regulatory aspects of the General Data Protection Law (LGPD). These include: Personal Data Processing and Incident Management Policy; Information Security Policy; Document Storage and Disposal Policy; Access Control Policy; Backup Policy; Internal Rules for the Use of Computer Equipment; Internal Rules for the Use of Corporate Email; Internal Rules for Removable Media; Internal Rules for Monitoring Information Assets and Services; Internal Regulations for Protection Against Malicious Code; Internal Regulations for Response to Information Security Incidents; Internal Regulations for Acceptable Use of Information Assets; Internal Regulations for Management and Access Control; Internal Regulations for Backup Control; Internal Internet and Intranet Regulations; and Handbooks.

All documents prepared can facilitate the organization of processes that handle personal data with greater accuracy, reliability, and protection, in addition to minimizing the risk of data breaches, complying with legal requirements, and promoting ethical practices.



Conscientização

CONFORMIDADE COM A LGPD

LIDERANDO PELO EXEMPLO



Training Activities

SPDM/PAIS held awareness meetings, training sessions, and workshops on LGPD aspects for senior management, including managers and directors of business units in the cities of Diamema, Fortaleza, Porto Alegre, Praia Grande, Rio de Janeiro, Santos, Santo André, and São Paulo, as well as corporate professionals, with a total of 884 participants.

The topics covered were: What the LGPD is, to whom it applies, and why SPDM/PAIS must protect personal data (processing of sensitive personal data); What constitutes personal data and what constitutes sensitive personal data; Who are the data processing agents; Who is the DPO and what is their role; Who is the ANPD; The legal bases for processing personal data; Penalties that can be applied for non-compliance with the law; Documents required by law; Measures that must be taken under the LGPD, such as discarding documents containing personal data, how to store these documents, the importance of familiarizing yourself with the LGPD institutional guide, best practices for the proper storage and care of personal data; Means of communication between the data subject and the controller, as well as where to reach the controller.

The training sessions, starting with basic knowledge of the LGPD, cover the rights and duties of data subjects and the responsibilities of everyone regarding data security and protection, strengthening a culture of security.

SPDM/PAIS has implemented an Ongoing Training Plan for all employees on the Educa SPDM/PAIS Portal: LGPD Training.

Risk Management: Identifying what data is collected and who has access to it.

The LGPD Risk Mapping Portal for privacy risk management includes processes in which the risks involved in personal data processing operations were assessed, classified into lower and higher risk levels, and the measures taken to prevent them.

With the Risk Mapping, Personal Data Protection Impact Reports (DPIRs) were prepared for high-risk processes due to their “large scale” or “significantly affecting the interests and fundamental rights of data subjects,” such as: Requests for medical documents; Recruitment and selection processes; Electronic medical record systems.

We have a Privacy page on our website, where we disclose the rules on the collection, storage, processing, and sharing of personal data. We also have an external privacy notice and cookie policy.

Managing Access to Electronic Patient Records

The electronic medical record has been used as a patient safety tool, as it allows for accurate clinical records and improves data sharing among healthcare professionals, contributing to improving clinical and therapeutic patient management.

Furthermore, the electronic medical record restricts access to patient clinical data to registered healthcare professionals authorized for access to the system, based on their roles and subject to the safeguarding and confidentiality of the information.

To improve access management, Standard Operating Procedures were created as a preventative measure to ensure the integrity and privacy

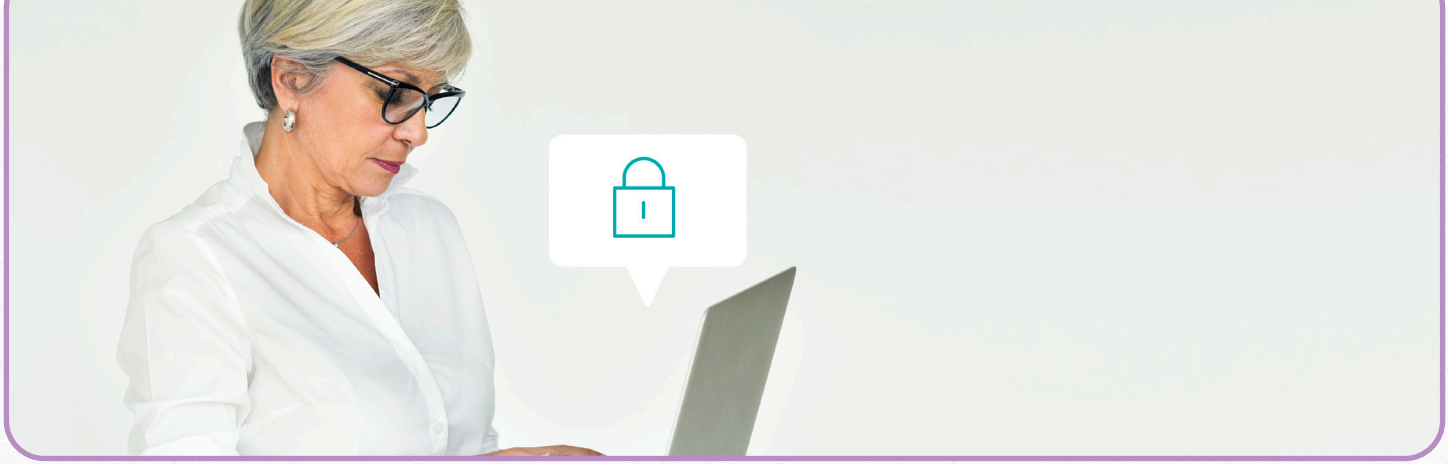
of patient data, and training was conducted with healthcare teams to foster a culture of data security awareness.

The implementation of the electronic medical record has promoted greater security in the processing of patient records, with more effective access management, identification of unauthorized access, and accountability in cases of misconduct. In 2023 and 2024, we had no personal data security incidents and no monetary losses resulting from lawsuits related to data breaches.





Patient Experience



(GRI 3-3)

Person-centered care, or humanization, is not just a form of care; it is the very essence of healthcare. At SPDM, it represents one of the pillars of sustainability, putting into practice values such as equity, empathy, inclusion, co-responsibility, and respect for diversity. The actions developed go beyond clinical care, promoting a culture of partnership, listening, and valuing the experience of everyone involved in the healthcare system: patients, families, and professionals.

The actions of person-centered care/humanization and strengthening social capital align with the Sustainable Development Goals (SDGs): SDG 3 – Good Health and Well-Being; SDG 5 – Gender Equality; SDG 10 – Reduction of Inequalities; SDG 16 – Peace, Justice, and Strong Institutions; SDG 17 – Partnerships for the Goals.



In a world marked by social, technological, and cultural transformations, this type of care is a sensitive and robust response to the complexities of living and illness. More than an organizational guideline, person-centered care is an ethical commitment to dignity, because caring is, above all, a human act.

Patient Experience

Connecting institutional values to actions

SPDM incorporates the principles of humanization and person-centered care into its institutional strategy through a coordinated set of actions, structures, and continuous improvement processes that ensure consistency between discourse and practice. This cultural transformation unfolds across five main fronts:

Transformation and Strengthening of Social Capital

Social capital is the set of relationships of trust, cooperation, support networks, and norms of reciprocity that connect people in a community, organization, or society. In the healthcare context, social capital manifests itself in the quality of interactions between professionals, patients, families, and administrators, and in the collective capacity to act collaboratively for the common good. In practice, social capital involves mutual trust between professionals, patients, and administrators, support networks that welcome, listen, and act in solidarity, shared norms of respect, empathy, justice, and co-responsibility, as well as the active participation of professionals and patients in decisions about care and services.



Why do culture and social capital matter in health?

- Improves patient experience and treatment adherence.
- Reduces conflict and increases team satisfaction.
- Promotes patient safety by encouraging clear and empathetic communication.
- Increases organizational resilience, as connected people better face challenges and changes.

Creation of Institutional Structures to Support Humanization

The institutionalization of humanized care is guaranteed by stable structures with an active role in governance, which encourage collaboration and integrate different perspectives in building a more inclusive, equitable, and person-centered care environment.

- Humanization Working Groups (GTH): spaces for dialogue between professionals, management, and users to critically analyze daily life and develop solutions.
- Patient and Family Councils: participatory bodies that contribute to strategic decisions and improvement projects.
- Inclusion and Diversity Committees: promote affirmative action, combat inequalities, and strengthen equity in access to and experience of care.

The Person-Centered Care Team is the humanization working group that develops and monitors the Institutional Humanization Plan, developing actions in each dimension of person-centered care. It is also co-responsible with the quality department for implementing the experience survey, discussing the results with the teams, and proposing improvement actions.

PERSON-CENTERED CARE TEAM HUMANIZATION WORKING GROUP – GTH



1. Improve the Individual Therapeutic Plan and Comprehensive Care.
2. Promote literacy, autonomy, and co-management of care.
3. Management of Palliative Care.
4. Value the employee.
5. Promote a welcoming environment.
6. Experience Survey: analysis and improvement actions.
7. Develop and monitor the Humanization Plan (PIH).



Actions Focused on Groups in Situations of Greater Vulnerability

The SPDM adopts specific protocols and policies focused on equity, with special attention to groups facing greater barriers to access and care.

- Palliative Care Policy and the Better at Home Program ensure continuity and dignity in care.
- Care Policy for the Frail Elderly: ensures multidimensional assessment and definition of an individualized plan.
- Highly Complex and Highly Dependent Care Team: coordinates critical cases and coordinates safe discharges.
- Caregiver Support Group: guides caregivers to improve continuity of care at home.
- Hospital School: guarantees the right to education for hospitalized children and adolescents, promoting inclusion.

Participation, Education and Connection as Vectors of Sustainability

The protagonism of patients and professionals is encouraged through educational and dialogic practices, programs that promote empathic connection, open spaces for listening to what matters to people, and shared responsibility for creating sustainable solutions to promote healing environments.

- Training in empathy, nonviolent communication, and a culture of safety.
- Singular Therapeutic Plans developed with the active participation of patients and the multidisciplinary team.
- Always Events: events considered essential to the care experience, defined in partnership with patients, family members, and caregivers.
- Reconnect Program: The patient and healthcare professional experiences are inseparable in practice. It is impossible to promote person-centered care without also caring for all people involved in the process: professionals, teams, patients, and families.

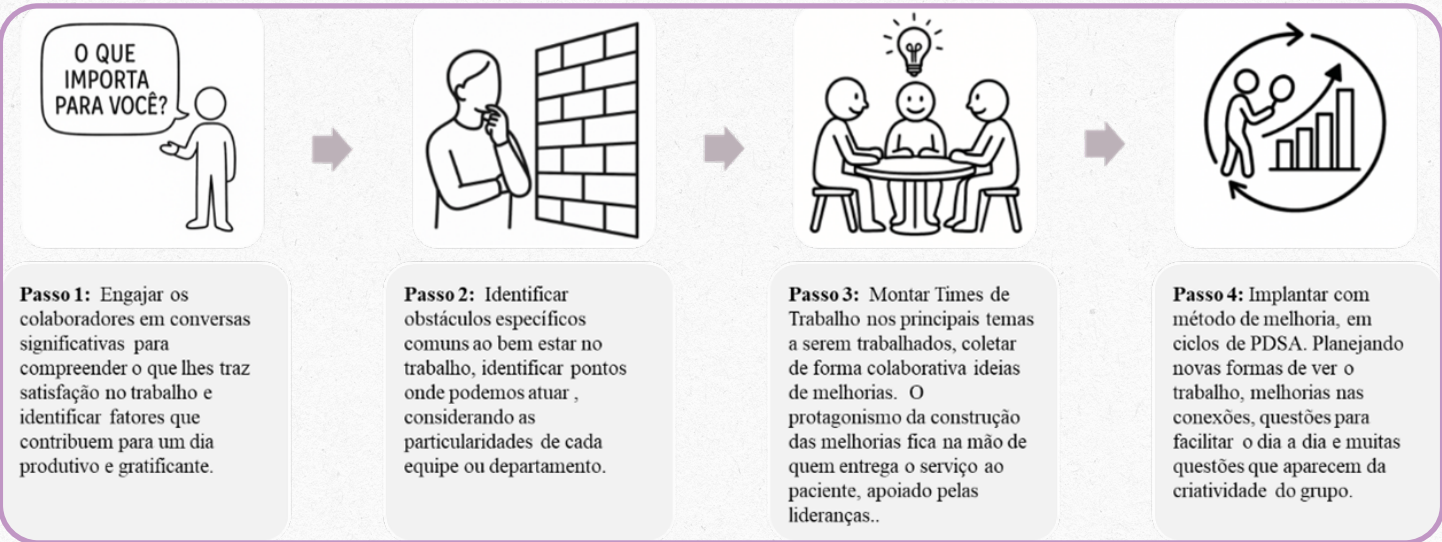


RECONNECT PROGRAM

Healthcare is a relational activity. It occurs through encounters between people, and the quality of that encounter depends on the quality of the connection established.

Working in healthcare is deeply meaningful, but also highly challenging. Continuous exposure to human suffering, limited resources, and the pressure to achieve results in a constantly changing environment make professionals especially vulnerable to psychosocial risks, such as burnout, now recognized by the World Health Organization as an occupational syndrome and a veritable epidemic among healthcare workers.

In Brazil, SPDM actively participates in the Reconnect project, designed by IHI in partnership with S rio-Liban s Hospital. By promoting active listening, mutual recognition, and small changes built by teams, Reconnect strengthens support networks and creates the conditions for a more humane, resilient healthcare system that is connected to what truly matters.

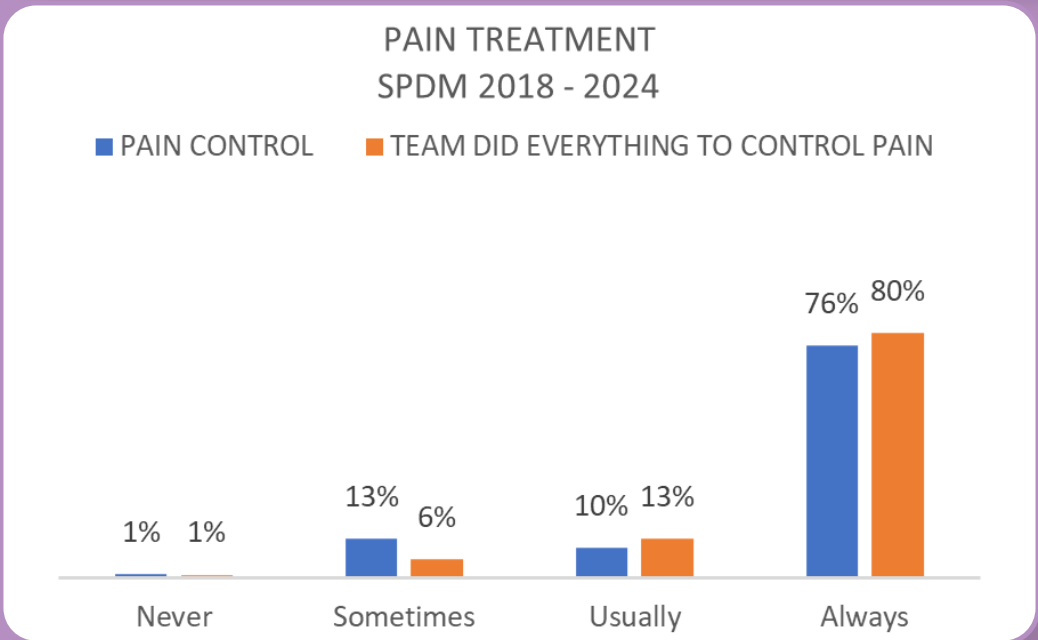
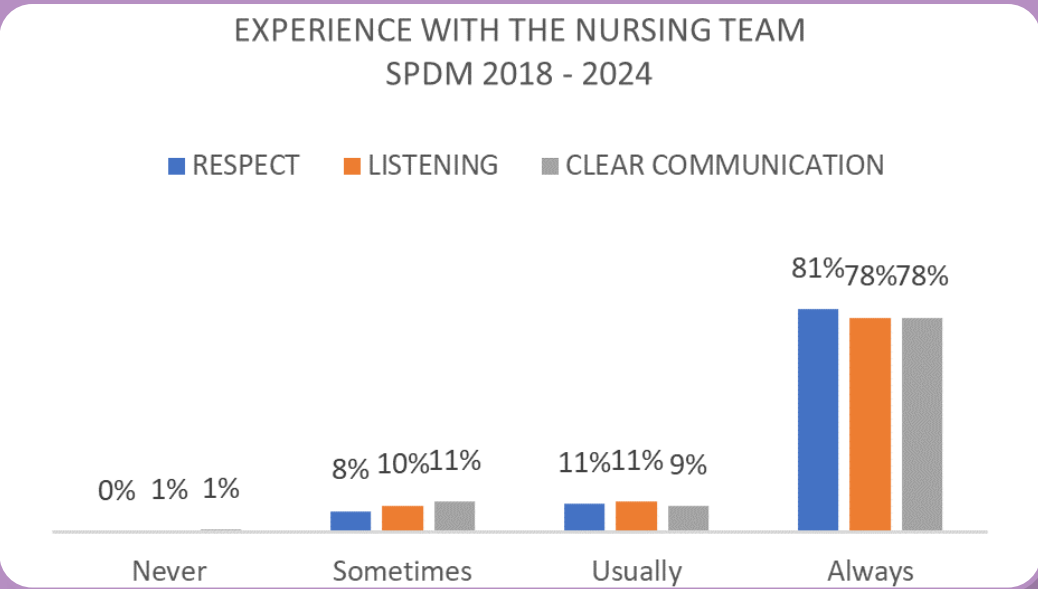


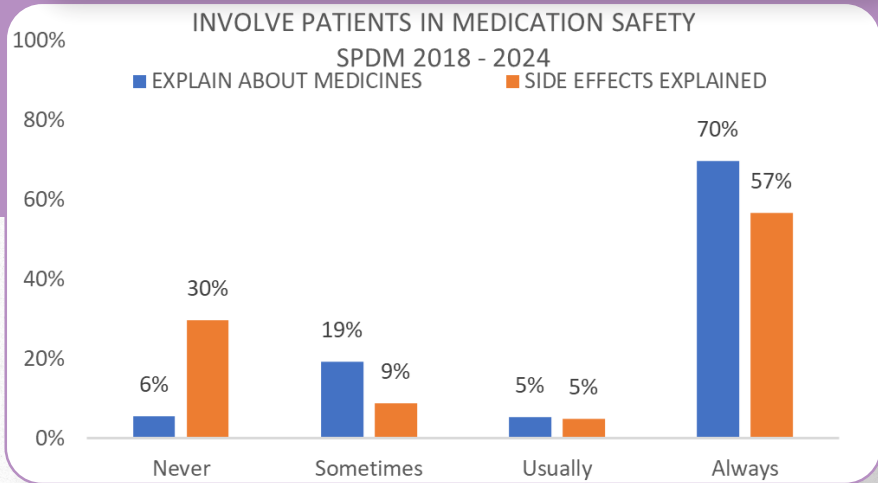
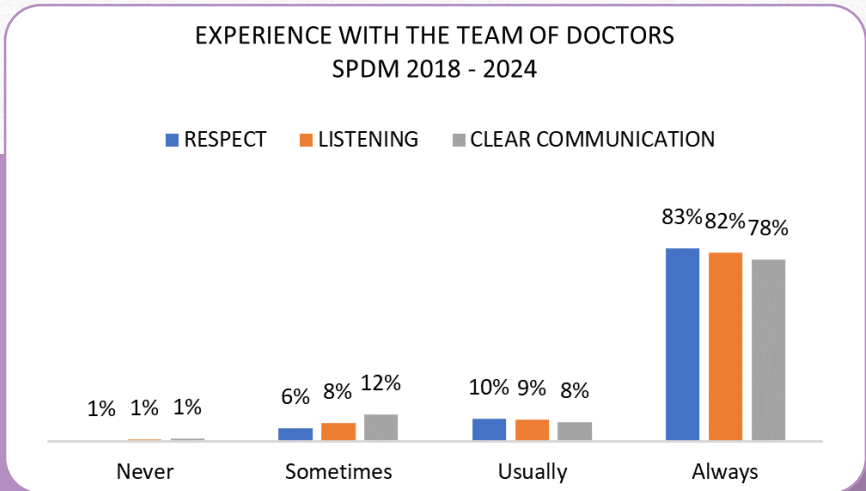
MEASURING THE EXPERIENCE OF CARE

There are several ways to measure person-centered care, and one of the most important is through patient experience surveys. At SPDM, we use the HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems), a standardized survey developed in the United States that has become an international benchmark for assessing patient perceptions of the hospital care experience. In addition to the hospital environment, SPDM-affiliated institutions also use adaptations of the HCAHPS for primary and secondary care settings, respecting the specificities of each level of care.

The HCAHPS measures several dimensions of the patient’s hospital experience, covering essential aspects of care. Among these are: communication with doctors and nurses; the attentiveness and responsiveness of the staff in responding to the patient’s needs; clarity of explanations about medications administered; pain control during hospitalization; the hospital environment; information provided to the patient at the time of discharge; and the degree of patient and family involvement in care decisions.

From 2018 to 2024, we had 3,214 responses to the Patient Experience Survey.





From the SPDM/PAIS perspective, user satisfaction refers to a patient’s expectations regarding the health service; this is part of the patient experience, which is measured through the types of manifestations, by type of service and monitored by indicators.

Table: Average percentage of types of user complaints, by type of service, by year – SPDM / PAIS

Attention category	Indictment		Praise		Information		Compliant		Request		Suggestion	
	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024
Primary care	1%	0%	9%	9%	1%	1%	32%	37%	57%	53%	0%	0%
Specialized attention	0%	0%	3%	5%	0%	1%	18%	19%	78%	75%	0%	0%
Hospital care	1%	1%	40%	35%	2%	4%	51%	55%	5%	5%	2%	1%
Home care	0%	0%	13%	0%	8%	0%	79%	50%	0%	50%	0%	0%
Rehabilitation	0%	0%	8%	8%	0%	0%	17%	20%	74%	72%	0%	0%
Oral care	0%	0%	63%	22%	0%	0%	13%	33%	25%	44%	0%	0%
Mental Health	3%	4%	11%	9%	0%	0%	67%	57%	18%	30%	1%	0%
Urgency and emergency	1%	1%	19%	16%	0%	9%	71%	65%	8%	9%	0%	0%

Disease Prevention and Health Promotion

(GRI 3-3)

SPDM adopts a comprehensive approach to health promotion, encompassing several priority areas, such as chronic disease prevention, mental health, sexual and reproductive health, combating domestic violence, multisectoral partnerships, education and social communication, and internal risk reduction.

In addition to these initiatives, the institution operates at other levels, benefiting both the population and its employees, with actions that include vaccination and post-exposure care for all ages; systematic data collection on behavioral and clinical risks; individual and collective risk reduction strategies; oral health education and services; and specific programs targeting maternal and child health, senior populations, and ethnic, racial, and gender segments.

Primary Health Care (APS), acronym in Portuguese, offers a wide range of services, ranging from health promotion and protection to diagnosis, treatment, and rehabilitation. Its main objective is to ensure comprehensive care that values individual autonomy, considering the social determinants that influence health. With its decentralized structure and proximity to communities, APS enables healthcare professionals to gain a deeper understanding of the realities of its users.

APS also plays a strategic role in mental health care, as it is easily accessible.

Interventions in this area go beyond a purely curative approach, seeking to foster new possibilities and improve living conditions, considering the individual in their multiple dimensions.

Integrative and Complementary Health Practices (PICS), acronym in Portuguese, play a fundamental role, especially in the context of Primary Care.

They broaden the understanding of the health-disease process, offering therapeutic options that promote self-care and overall well-being.

Among the practices covered are Traditional Chinese Medicine/Acupuncture, Homeopathy, Herbal Medicine, Social Thermalism/Crenotherapy, and Anthroposophic Medicine. This scenario highlights SPDM's commitment to promoting health in a comprehensive and integrated manner, using Primary Care and PICS as essential tools for building a healthier and more sustainable future.

Through ongoing health education, preventive health promotion, and environmental sustainability initiatives, the institution seeks to generate positive impacts on the quality of life of its population and its employees. By strengthening the Unified Health System (SUS) and ensuring equitable access to essential care, SPDM understands health promotion as a cross-cutting strategy, structured across multiple fronts.





SPDM Living Well Program (Programa Viver Bem da SPDM)

The Quality-of-Life Program, called “Programa Viver Bem,” remains fully operational and represents SPDM’s ongoing commitment to valuing people, promoting well-being, and building a more humane, safe, and inclusive work environment.

Through integrated and intersectoral actions, we seek to provide adequate support to employees in their various dimensions (physical, emotional, social, and professional), directly contributing to organizational health and excellence in services provided, recognizing that caring for people is essential for sustainable growth and the fulfillment of our institutional mission.

Active employee participation, leadership engagement, and cross-sector coordination are essential pillars for the success of this collective endeavor.

To ensure the effectiveness and continuous monitoring of employee-focused actions, the Institution relies on initiatives aligned with the UN’s SDG 3 – Good Health and Well-Being, such as:

Quality of Life Committees, Calendar with commemorative dates focusing on health and effective communication

These committees are essential for monitoring and directly supporting health initiatives across all units, focusing on an interdisciplinary approach. The committees have been established and have plans to monitor and record evidence of the actions taken over the years. In 2024, we had an average of 200 volunteer members at SPDM Affiliates.

In line with its focus on employee health, SPDM/PAIS created the Employee Welcoming and Quality of Life Committee in September 2023. This committee, comprised of various departments of the institution, aims to promote the health and well-being of employees and offer mental health support, especially for victims of violence or adverse events. The committee has already established workflows for these situations. It is developing two main programs: the Employee Health and Well-Being Program, which seeks to promote health, well-being, quality of life, and a welcoming environment in the workplace; and the Employee Reception and Emotional Support Program, which aims to raise awareness among leaders and teams about situations that require emotional support, creating intervention and support strategies, especially in cases of violence and adverse events.

The committee’s actions are aligned with accreditation guidelines, quality certifications, ESG practices, Ethos Institute indicators, and NR-1, which now includes requirements for psychosocial risks.

In addition to the members of the quality-of-life committees, the Action Calendar plays a crucial role in organizing and executing the various scheduled events. This calendar includes commemorative dates and awareness campaigns related to health and well-being, aligned with the institutional objectives of promoting quality of life and inclusion, integrated with ESG (Environmental, Social, and Governance) practices. The dates on the Institutional Calendar include both commemorative dates and essential days related to health, such as: World Health Day, Pink October (breast cancer), World Hand Hygiene Day, among others, which seeks to ensure, throughout the year, that units promote educational, prevention and awareness activities, reinforcing SPDM's commitment to the comprehensive health and well-being of employees.



SPDM Organizational Communication Space – ECOS

“ECOS” is SPDM’s Organizational Communications Space that aims to enhance organizational communication through an official channel with our employees, addressing strategic and relevant topics for the institution. Whenever the need arises to highlight specific vital dates and issues, as well as inform employees on events, announcements are also made through this channel, increasing engagement and awareness.



Ecos Ed. 90 Traffic Safety and Quality of Life

Ecos Ed. 99 World Day to fight against HIV/AIDS

Ecos Ed. 109 Dengue Prevention



Awareness and Training Actions focused on health and well-being

The institution maintains a firm commitment to the health and well-being of its employees through ongoing awareness-raising and training initiatives, offering lectures and educational campaigns on crucial topics such as dengue fever prevention, breast cancer, and suicide prevention. These initiatives not only inform but also empower employees to better care for themselves, service users, and the community.



Imagem Convite do Evento online sobre saúde e segurança no trabalho - 2023



Imagem Convite do Evento online SPDM na luta contra Dengue - 2024



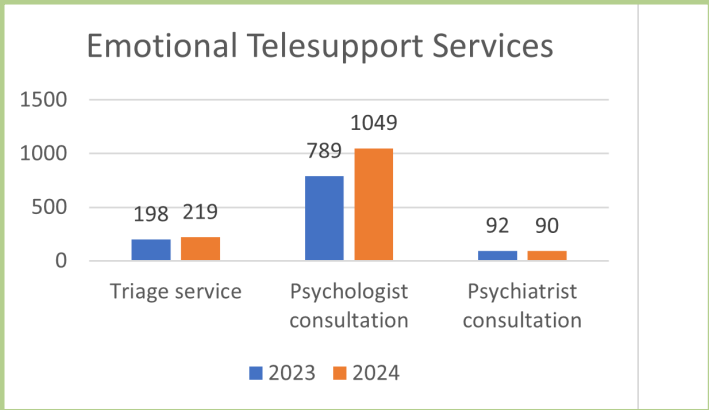
Image Invitation to the Online Breast Cancer Event - 2024



SPDM’s awareness and training initiatives demonstrated a growing impact between 2023 and 2024. The number of meetings more than doubled, from 7 events in 2023 to 15 events in 2024, resulting in a significant increase in participants, from 1,840 to 7,797. This increase was due to the implementation of new projects, including Quality of Life Week, dedicated to promoting well-being and quality of life meetings, which featured guest experts in various aspects of health and well-being inside and outside of work, and Journey for the Meaning of Life, a week of events focusing on mental health, loss, and suicide prevention. Employee satisfaction remained high, averaging 83% in 2023 and 82% in 2024, reflecting the effectiveness of these initiatives in promoting health and raising awareness.

Emotional TeleSupport Program: Continuous Mental Health Care

In response to the demand for mental health care evident during the COVID-19 pandemic, SPDM Affiliated Institutions are maintaining the Emotional TeleSupport program. The program's primary purpose is to support employees experiencing psychological distress by offering specialized treatment via telehealth services. This program aims to promote the well-being and quality of life of its staff, adapting to contemporary care needs. The results of the Emotional TeleSupport program demonstrate its relevance and the increased demand for mental health support among employees through telehealth services.



These data highlight the importance of its continued operation in promoting the mental health of SPDM employees.

Vaccination Campaigns: Our Commitment to Public Health

Within the scope of the Quality of Life at Work Program, vaccination campaigns represent an essential pillar of SPDM's commitment to the health and comprehensive well-being of its employees. The Institution maintains a proactive commitment to public health, organizing and promoting regular vaccination campaigns, always aligned with the recommendations of health authorities. The Institution's goal is to achieve high vaccination rates among employees, contributing to the creation of a safer and healthier work environment for all. As part of these ongoing actions, the Program organizes annual internal immunization campaigns against diseases of epidemiological significance, such as influenza and COVID-19.

Wellness Programs: Chair Yoga and Workplace Gymnastics

In the 2023-2024 biennium, SPDM further strengthened its commitment to employee health and well-being with programs focused on the workplace. Chair Yoga classes are available on the intranet and are developed by a specialist with extensive knowledge of yoga philosophy. This online program promotes simple movements at the desk, emphasizing alignment, breathing, and mindfulness. Its goal is to integrate yoga into the work routine for mental and physical well-being.

Workplace Gymnastics is performed during work hours and includes flexibility, relaxation, stretching, postural correction, and guidance exercises. The program aims to prevent musculoskeletal and ligament injuries, combat sedentary lifestyles, and correct poor posture during the workday, contributing to the overall health of employees.

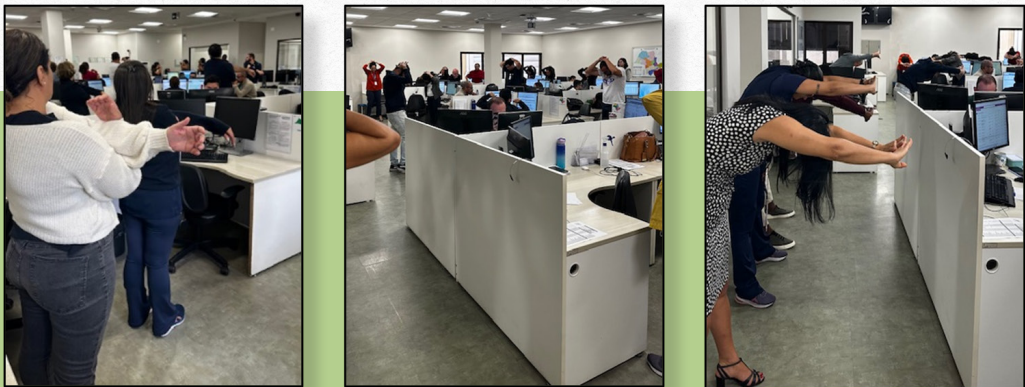


Image of a workplace exercise class with employees during Quality of Life Week 2024

Chronic Degenerative Diseases - Employee Support

Through a dedicated team of doctors and nurses, the institution monitors the health conditions of its employees. Specific control programs for hypertension, diabetes, and dyslipidemia are implemented, aiming not only to ensure adequate treatment adherence but also to promote healthier lifestyle habits. To strengthen employees' autonomy and knowledge about their health, SPDM holds educational lectures and provides informational materials on the prevention and management of chronic diseases. The primary objective is to provide comprehensive and personalized support, empowering each employee to manage their health proactively and effectively, contributing to a better quality of life.

Mindfulness Maze Mat

This internationally recognized technique consists of consciously navigating a labyrinth, guided by a professional. The goal is to use this journey as a tool for developing focus, mental clarity, self-knowledge, spiritual journey, relaxation, and significant stress reduction (mindfulness). Initially designed for HGP employees, the “Labyrinth” program has distinguished itself by its ability to be expanded to serve diverse groups, including patients, their families, and even workshops aimed at interested external groups. This breadth is made possible through strategic partnerships, such as the one developed with the renowned international organization **Institute of Noetic Sciences**. This initiative demonstrates SPDM’s commitment to innovative approaches that promote mental health and well-being, reinforcing a culture of care and humanization in its operations.



Image of the Maze Technique activity with HGP collaborators

Swadharma Project

We believe that trust is the foundation for engagement, commitment, and accountability, strengthening interpersonal and professional relationships. The Swadharma Project seeks to cultivate an environment of mutual respect among all employees, regardless of their roles or positions within the institution. The project remains active and is structured around four meetings, using information from Occupational Medicine, performance evaluations, and the identification of specific conflicts to inform discussions and actions. In summary, the project aims to: assess the organizational climate; identify the general state of the work environment; diagnose problems; promote dialogue; and encourage participation.



Support Program for Pregnant and Breastfeeding Women: Safety and Well-being at Work

The Pregnant and Breastfeeding Support Program establishes a mandatory individual analysis of the activities, operations, and workplace of each pregnant or breastfeeding employee. Based on this analysis, necessary changes and adjustments are made to their roles and environment, ensuring they are reassigned to a healthy and safe workplace. These guidelines are established and monitored at each unit or service, ensuring that employees receive adequate support during this crucial period of their lives. The program reflects SPDM's dedication to fostering a work environment that protects and values maternal and child health.

SPDM Self-Care Guide

The Self-Care Guide remains active, serving as an ongoing resource for those seeking guidance on self-care. Created during the COVID-19 pandemic, this guide is an essential tool with tips for maintaining physical health and emotional well-being, aiming to promote the adoption of healthy habits and encourage self-care.

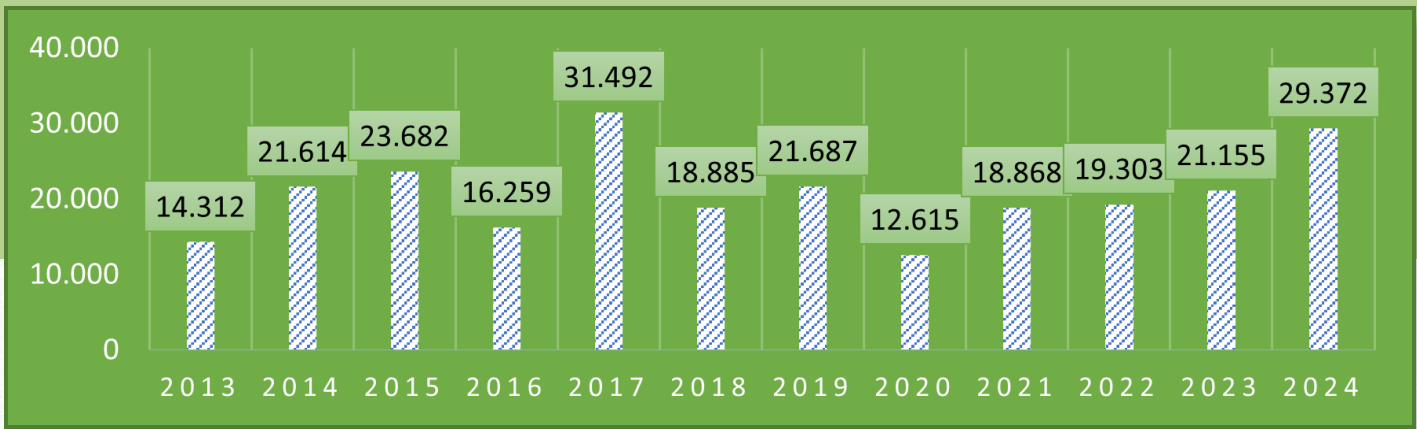
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<https://www.spdmafiliadas.org.br/wp-content/uploads/2021/06/Guia-do-autocuidado-na-pandemia.pdf>



Solidarity and Social Support Campaigns

SPDM demonstrates its commitment to the community through various solidarity and fundraising campaigns. The 11th and 12th editions of the Clothing Drive, held in 2023 and 2024, continue to be a pillar of the Viver Bem program, positively impacting people and services that serve socially vulnerable populations. Furthermore, during the same period, SPDM extended its support to other crucial initiatives, such as aid to flood victims in Rio Grande do Sul, support for UNIFESP volunteers, and the Christmas Fraternity Campaign, which annually distributes gifts to needy children.





Evolution of the Warm Clothing Drive from 2013 to 2024

With a continuous focus on sustainability and engagement, the Human Resources Management Unit annually promotes a creative campaign for employees' children up to 14 years old in October. This initiative invites them to create drawings or works of art using recyclable materials, aiming to **encourage creativity and environmental awareness**, while continuing to promote the importance of recycling and imagination.

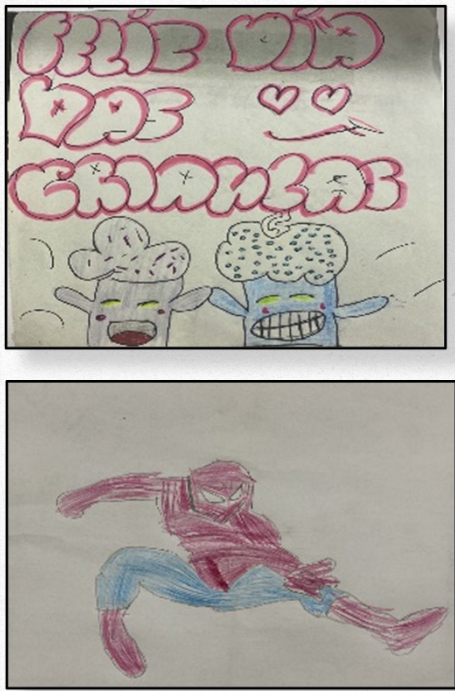


Image of campaign promotional folder and drawings by CEAF MC children

Health Prevention and Promotion Actions (Including Mental Well-Being) developed in the SPDM Technical Health Supervision Assistance Networks (RASTS) for the Population and Employees

In addition to detailed employee-focused initiatives, SPDM develops various health promotion initiatives, such as vaccination programs, health risk monitoring, education, and oral health services, as well as programs focused on maternal and child health, older people, and minorities. The institution develops strategic health promotion and disease prevention initiatives with a focus on employee mental health, based on the following guidelines:

- **Expanded Psychosocial Support:** diversification of care to promote belonging and respect for individuality.
- **Sensitive Leadership:** training leaders to identify signs of stress, burnout, and harassment, fostering empathy.

- **Safe and Dialogued Environment:** creating welcoming and ergonomic spaces with open communication channels.
- **Wellness Programs:** encouraging physical activity, discussion groups, and recognition initiatives.
- **Post-Leave-Away Support:** measures for reintegration after long absences.
- **Mental Health Surveillance:** reporting of work-related mental disorders to support public policies.
- **Support Resources:** Therapy groups, psychological support, and educational campaigns on stress and emotional health.
- **Ease of Access:** Quick access to mental health services and interventions based on warning signs.
- **Addiction Prevention:** Educational activities on substances, sedentary lifestyles, and addictions.
- **Financial Education:** Training on personal finances.
- **Sexual and Reproductive Health:** Guidance and access to family planning.
- **Combating Domestic Violence:** Coping strategies and victim protection.
- **Positive Organizational Culture:** A safe and valued work environment that destigmatizes mental health.

Primary Health Care (APS)

Primary care APS, acronym in Portuguese, represents the gateway to the Unified Health System (SUS), offering integrated actions that encompass prevention, treatment, and health promotion.

It operates in a decentralized manner, close to communities, and provides personalized care, including special attention to mental health. In this context, mental health in primary care is based on active listening and a comprehensive understanding of patients' needs, valuing their uniqueness.

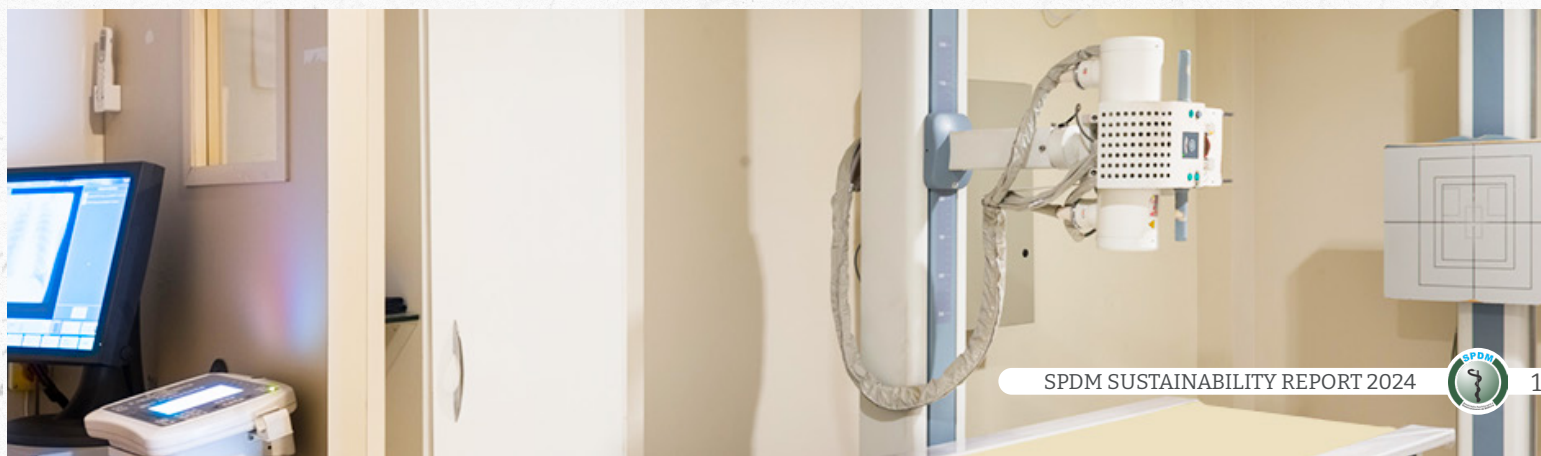
Multidisciplinary teams provide ongoing emotional support and develop care strategies in partnership with patients.

Integrative and Complementary Health Practices (PICS)

SPDM incorporates PICS into its services, aligning them with Primary Care as the preferred gateway to the SUS (Unified Health System). It aims to promote comprehensive care, assist in the management of chronic diseases, reduce medication use, and encourage social interaction and autonomy in self-care.

In addition to patients, employees also benefit from these practices, which are promoted both in healthcare units and in the corporate environment. These include therapies such as floral, aromatherapy, auriculotherapy, and Reiki, contributing to a healthier institutional climate.

SPDM also invests in PICS, which broadens the understanding of the health-disease process and offers new therapeutic alternatives. Techniques used include Traditional Chinese Medicine, Acupuncture, Homeopathy, Herbal Medicine, and Anthroposophic Medicine therapies. These practices are primarily developed in Primary Care and have been expanded within the Assistance Networks, such as those located in Vila Maria/Vila Guilherme and Butantã, with the gradual return of in-person activities starting in 2022, after the pandemic.



Between 2023 and 2024, we offered two courses:

- **Shantala Baby Massage:** In partnership with UNIFESP, the course certified 70 professionals in São Paulo. Its benefits include relaxation, strengthening bonds, physical and emotional balance, and stimulating motor development in babies.
- **Holy Fire Reiki:** In partnership with the Escola de Reiki Brasil, the course certified 66 professionals from São Paulo units. It aims to strengthen individual activities in PICS, with benefits such as reducing anxiety and chronic pain, improving quality of life, reducing insomnia, improving immunity, and developing self-awareness



First group of the Shantala Baby Massage Course and students of the Holy Fire Reiki Course in a practical class

Healthy Green Environments Program (PAVS)

Created to integrate health and the environment, PAVS promotes sustainable practices with a focus on community participation. It works by training community agents and addresses topics such as waste, energy, biodiversity, zoonoses, conscious consumption, and a culture of peace

Environmental Health as an Instrument for Health Promotion and Disease Prevention

These initiatives aim to broaden the understanding of health to include environmental aspects, which, when preserved, improve the quality of life of the population served by Basic Health Units (UBS). In the field of health surveillance, SPDM and PAVS developed the online course “Why Aedes Matters?” The 8-hour course trains healthcare professionals on the control and prevention of the Aedes aegypti mosquito and arboviruses, covering everything from the mosquito’s history in Brazil to methods of combat.

SPDM Affiliated Institutions

Prevention and Health Promotion Initiatives at RAST Vila Maria/Vila Guilherme and Butantã: Activities by Line of Care:

Between 2023 and 2024, 5,563 professionals received training through this SPDM/PAIS course.

Action in the secondary prevention of harm to the population in mass events

SPDM/PAIS plays a crucial role in the secondary prevention of health problems during mass events, such as the São Paulo Street Carnival, where it has been active since 2019, and several events in Rio de Janeiro since 2014, including New Year’s Eve and the recent Madonna concert.

The organization coordinates medical care with emergency services and ambulances, as well as a situation room for case management. In 2023 and 2024, SPDM achieved high case resolution rates, demonstrating its effectiveness in providing healthcare and referring patients to more complex services when necessary, protecting the health of the population in large gatherings.

Prevention and Health Promotion Actions for the Population	Description of Actions
Childhood and Adolescence	Early Childhood Group: Early cognitive stimulation aimed at the integral development of children in the first years of life.
	Teenage Pregnancy: Educational and preventive actions aimed at raising awareness and caring for the sexual and reproductive health of adolescents.
	School Health Program (PSE): Disease prevention actions, vaccination, health education for teachers and school workers, screening for referrals, guidance on family planning and contraceptive methods available in the network.
	School Oral Health: The dental team performs oral assessments on all children, promoting prevention and referrals when necessary.
	Parents and Children Chat Group: Space for listening and dialogue about family ties, child development and the challenges of parenting.
	Expression Group for Children: Playful and expressive activities aimed at strengthening children's emotional and behavioral skills.
	Photography Workshop: Artistic activity that stimulates creativity, sensitive eye and expression through photography.
	Grow and Play Group (3 to 5 years): Stimulating motor, cognitive and emotional development through games and guided activities.
	Grow and Play Group (6 to 9 years old): Continuity of actions to stimulate development, adapted to the age group.
	Family Connection: Actions to strengthen emotional bonds and communication between family members.
	Fala Galera: Group aimed at teenagers, focusing on qualified listening, mental health, life projects and sexuality.
	“Conta Comigo” Group: Psychosocial support for children and adolescents, promoting acceptance and the development of social skills.
	Cognitive Stimulation Group (3 to 5 years): Structured activities to promote the development of cognitive functions in this age group.
Reproductive Health	Cognitive Stimulation Group (6 to 9 years old): Continuity of cognitive stimulation activities, focusing on attention, memory, language and logical reasoning.
	Family Planning Group: Space for guidance on sexual and reproductive health, covering contraceptive methods available online, pregnancy planning and reproductive rights.
Aging	Teenage Pregnancy: Educational and preventive activities aimed at raising awareness among adolescents about sexuality, risks and care related to early pregnancy, promoting access to health services and psychosocial support.
	Viver Bem Group on NCDs and Aging: Multiprofessional monitoring and guidance on self-care, treatment adherence and quality of life for people with chronic non-communicable diseases and the elderly.

Aging	Bereavement Group: A space for emotional support and psychosocial support for bereaved people, promoting active listening and coping strategies.
	Stretching: Activities aimed at promoting flexibility, preventing pain and improving body mobility.
	Upper and Lower Limb Exercise Group: Physical practices aimed at strengthening and improving the functionality of the upper and lower limbs, especially for the elderly and people with physical limitations.
	Coexistence Group: Integrative activities that promote the strengthening of bonds, socialization and well-being among participants.
	Active Aging: Actions aimed at valuing the elderly, encouraging autonomy, social participation and quality of life.
	Walking Group: Guided group physical activity practice, promoting cardiovascular health, mobility and socialization.
NCDs Cancer and Cardiovascular	"Living Well with NCDs" and Aging Group: Promoting self-care and quality of life for people with chronic diseases, through educational actions, integrative practices and encouraging adherence to treatment.
Violence and Mental Health	World Suicide Prevention Day: Mental health awareness campaign, focusing on suicide prevention and promoting life.
	Integrative Community Therapy: Collective space for listening, mutual support and strengthening of bonds, promoting emotional health care.
	Relaxation Workshops: Integrative practices to relieve stress, anxiety and promote physical and mental well-being.
	Qualified Listening: Welcoming individual care, focusing on identifying emotional needs and appropriate referrals.
Infectious Diseases	Active Tuberculosis (TB) Search Campaign: Strategy for early identification of suspected tuberculosis cases, focusing on vulnerable populations and those with respiratory symptoms.
	Rapid Testing Campaign for HIV, Syphilis and Viral Hepatitis: Expanded prevention and early diagnosis action, offering rapid testing, counseling and referral for treatment, when necessary.
PICS	Integrative and Body Practices: Activities such as stretching, walking, medicinal gardening, auriculotherapy, tai chi, and other practices that promote physical, mental, and emotional balance, contributing to comprehensive health care.
PAVS	Harvest and Tasting Activities: Educational activities on food cultivation and encouraging healthy eating, with an emphasis on harvesting and tasting locally grown products.
	Small Space Cultivation: Guidance and encouragement for growing vegetable gardens and gardens in small spaces, promoting sustainability and access to fresh and healthy food.
	Healthy Eating: Educational activities on healthy food choices, promoting balanced eating habits and disease prevention.
	Solid Waste and Synanthropic Animals: Identification and management of solid waste that attracts synanthropic animals (such as rats, flies and other vectors), preventing public health problems.
	Home Visit - Solid Waste and Accumulators: Guidance and intervention actions in the homes of hoarders, aiming at the reduction and proper management of waste.
	Revitalization of Public Spaces: Improvements and restoration of public areas, promoting social coexistence, safety, and community well-being. Actions Against Dengue: Strategies to prevent and combat the Aedes aegypti mosquito, focusing on eliminating breeding grounds and raising awareness about the disease.
	Waste Management, Conscious Consumption of Water and Natural Elements / Vegetable Garden: Integrated actions for sustainable waste management, rational use of water and vegetable gardening, promoting ecological practices and environmental preservation.

Disease prevention and health/mental health promotion initiatives for the population and employees:

Action	Method	Monitoring
Health promotion and prevention actions for injuries, risks and diseases	– Vaccination and post-exposure care for children, adults, and the elderly – Information on behavioral and medical health risks – Measures to reduce risks, both individual and population-wide – Inclusion of disease prevention programs in the daily work process of teams (dissemination and discussion of the national health promotion policy) – Promotion of a culture of peace and human rights – Promotion of safe mobility – Dissemination and discussion within teams of the 17 Sustainable Development Goals (SDGs) of the 2030 Agenda – Encouragement and concrete actions for the participation of users, family members, and stakeholders in the work process and strategic planning of teams	– Demographic survey of the assisted population – Survey of the intersectoral potential of the assisted population – Survey of vaccination coverage of the enrolled population – Survey of basic indicators of compliance with actions for the prevention of injuries, risks, and rehabilitation actions – Environmental mapping and the living conditions of the assisted population – Survey on the presence of the 5 basic actions in the strategic planning of the teams (PES): implementation of healthy public policies, creation of healthy environments, community training, development of individual and collective skills, and reorientation of health services and programs – Survey of compliance with critical indicators: women's health, oral health, prenatal care, child health, and chronic diseases (hypertension and diabetes mellitus) – Survey of user participation in the production and evaluation of the care offered – Presence of advocacy (technical and scientific information, experiences with proven success, etc.) to equip managers
Monitoring and management of patients and employees with chronic non-communicable diseases (NCDs)	– Groups focused on NCDs and government programs – Waiting room activities, discussion groups, community and workplace activities – Active search	– Morbidity and risk factors for NCDs – Quantitative survey of actions – Survey of actions by nutritionists and physical educators

Action	Method	Monitoring
Reception of children, adolescents, young people, and the elderly with depressive, self-harming, and suicidal behavior, with listening, insertion in a support group	– Scheduled and open-door spaces and availability for teams and services in all territories – Active search – Discussion groups – Intersectoral actions	– Epidemiological survey of negative events – Epidemiological survey of SINAN – Quantitative survey of reception and care actions – Referral control – Epidemiological survey of negative events – Epidemiological survey of SINAN – Quantitative survey of reception and care actions – Referral control
Unwanted pregnancy, teenage pregnancy, reduction of child sexual abuse, premature exposure to sexuality, prevention of sexually transmitted infections; prevention of violence	– Primary Care Groups – Parent and caregiver groups – Waiting room activities, discussion groups, community activities, and work environments – Facilitated and systematic reception with a focus on comprehensive and intersectoral care – Shared actions between departments – Coordination with Education, Social Assistance, Labor and Employment, Justice and Security, Culture, community leaders and groups	– Epidemiological survey of events – Survey of mandatory notifications – Quantitative survey of reception and care actions – Monitoring of intersectoral actions
Psychoeducation on safe sexuality, sexually transmitted infections, teenage pregnancy	– Formal and informal groups in the units and in the community – Integration of activities in community spaces – Links with education, social assistance, culture, and other sectors to discuss a more solid life plan – Support and empowerment for girls from poorly structured families – Permanence in school – Access to contraceptive methods – Specialized care and open support	– Epidemiological survey of events – Quantitative survey of reception and care actions – Monitoring of intersectoral actions – Survey of the distribution of inputs and teaching materials from the Ministry of Health and similar institutions – Survey of continuing education actions, presence in the PNEPS



Promote self-awareness and appreciation of life; develop healthy habits (healthy eating, physical activity, sleep hygiene); avoid addictions to nicotine, alcohol, and other drugs, compulsive buying, social media, and gambling; abusive relationships, etc.	– Open groups in units, community spaces, and comprehensive care initiatives – Inclusion of PICS in routine procedures – Mentoring to develop healthy habits – Implementation and encouragement to kick-start a healthy lifestyle – Implementation of the Health Academy program – Implementation of official anti-tobacco and substance abuse programs	– Epidemiological survey of the situation and mapping of the most vulnerable groups – Survey of units offering at least three different PICS services – Survey of the dissemination and distribution of free, specific educational materials – Presence of professionals specialized in the areas of activity related to lifestyle habits – Presence of actions to improve quality of life
Intervention in anxiety, depression, and common mental illnesses	– Training teams to provide support, facilitate access, humanize care, and monitor common mental disorders – Coordination of the RAS/RAPS at all levels	– Epidemiological survey of the prevalence of mental disorders in the region – Survey of non-pharmacological practices – Monitoring of mental health promotion and mental illness prevention actions in the PES
Raising access barriers, encouraging bonds and humanization	– Application of the National Humanization Policy	– Survey of negative events and implementation of corrective actions
Specific actions aimed at SPDM employees	- During occupational exams, employees are assessed for their fitness for work and vaccination status, by health legislation. Employees missing vaccinations are referred to a designated healthcare facility for immunization. During medical evaluations, if there is a complaint or acute health change, employees are referred for care at a SUS referral facility compatible with the assessment. - If any NCD is detected, they receive guidance on care and management and are directed to follow up at a compatible healthcare facility. - If any mental disorder is identified, the employee receives a list of addresses for specialized care teams through the SUS.	– All medical and nursing care is provided by ethical and legal confidentiality guidelines. – Records are archived in a system. Physical medical records are stored in a location with restricted access via facial recognition and controlled by a surveillance system. – Epidemiological survey of cases requiring referral, based on the occupational health examination, for (1) vaccination supplementation; (2) care for acute illness or

SPDM remains committed to promoting the health and well-being of both its population and its employees, adopting practices and strategies that seek to contribute to building a more sustainable and healthy future. The institution will continue to invest in innovative initiatives, focusing on integrated care and promoting conditions that promote collective and individual well-being, always with a close eye on the social, environmental, and health challenges that permeate the current scenario.

Training and Education

(GRI 3-3; 404-1)

Strengthening the management model through the continuous development of employees is the central focus of this material topic. Therefore, SPDM Affiliated Institutions has incorporated the strategic objective of “Developing and Training People” into its planning, reinforcing its commitment to focusing on training and developing teams. This objective is divided into four main strategic actions:

- Developing Leadership;
- Training the management team in financial management.;
- Implementing competency-based performance assessment.;
- Developing Strategic and Tactical Leadership for the Administrative Group in Sustainability;

Among the actions of SPDM Affiliated Institutions to train their employees and promote knowledge retention is the creation of a scholarship program, called PROBOLES, which produced the following figures during the period:

NUMBER OF EMPLOYEES BENEFITING FROM TRAINING COURSES AND SCHOLARSHIPS		
	2023	2024
TRAINING COURSES	75	60
PROBOLES TECHNICAL COURSE	9	6
PROBOLES GRADUATION / TECHNOLOGIST	130	133
PROBOLES POSTGRADUATE / MBA	38	24

AMOUNTS INVESTED IN ADVANCED COURSES AND SCHOLARSHIPS		
	2023	2024
TRAINING COURSES	R\$ 497.657,06	R\$ 233.826,60
PROBOLES TECHNICAL COURSE	R\$ 28.373,33	R\$ 16.777,16
PROBOLES GRADUATION / TECHNOLOGIST	R\$ 575.288,03	R\$ 541.735,16
PROBOLES POSTGRADUATE / MBA	R\$ 113.349,88	R\$ 53.281,10
TOTALS PER YEAR	R\$ 1.214.668,30	R\$ 845.620,02



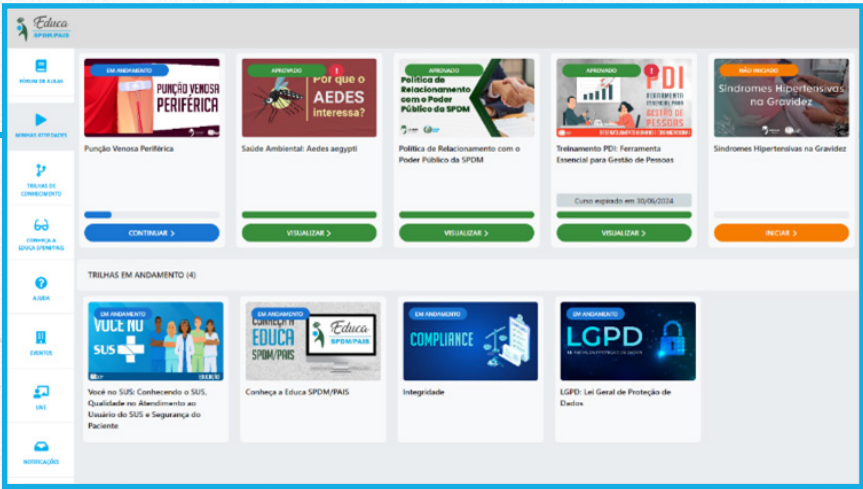
Distance Learning Platform

Throughout the 2023/2024 cycle, SPDM made progress in consolidating a culture of permanent learning, with emphasis on improving Distance Education (EaD) tools and implementing new educational strategies.

1 - Educa SPDM / PAIS

In 2023, the “Educa SPDM/PAIS” virtual learning environment was implemented. The launch of the virtual learning environment included an online event open to all units of the SPDM/PAIS Superintendence, with presentations from the Education, Organizational Human Development, and Quality teams.

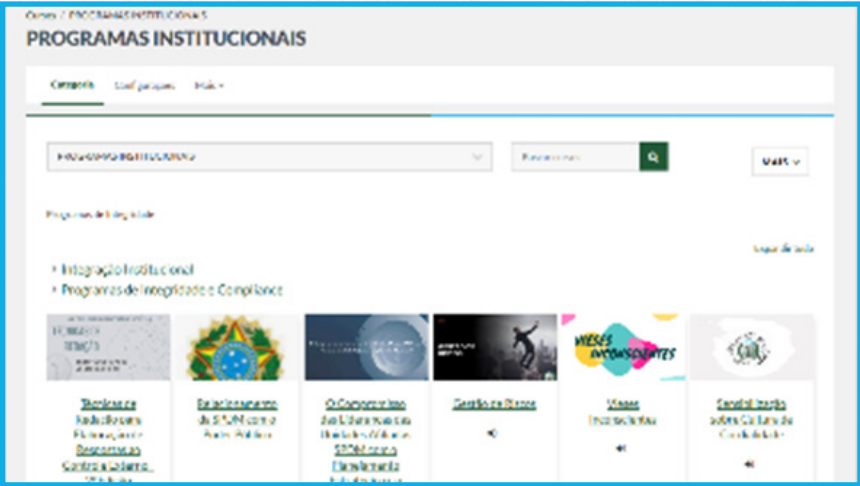
This initiative has expanded employee access and participation in learning strategies and integrated knowledge within the institution, creating connections between content from different areas. These actions foster a culture of learning, and the educational strategy implemented on the platform strengthen the institutional management model, aiming to implement best practices and continuously improve strategic planning.



2 - AVA – Ambiente Virtual de Aprendizagem da SPDM / SPDM Virtual Learning Environment

In 2024, the São Paulo Hospital Superintendence and SPDM Affiliated Institutions launched the Virtual Learning Environment (AVA), an enhancement to the Moodle distance learning platform. This technological advancement reflects SPDM’s ongoing commitment to training and developing people.

AVA was carefully designed to offer an enhanced learning experience, with more advanced features and a user-friendly interface, facilitating access and navigation. It enables the organization to provide ongoing and updated training to its employees across various locations, while also making content accessible to its suppliers and the community, thereby ensuring everyone has access to information.



3 - Training of Nursing Teams through the Virtual Learning Environment

With the advent of the COVID-19 pandemic, an opportunity arose to restructure the nursing team training process at affiliated institutions, leading to the development of VLE courses.

These courses are asynchronous and are intended to support practical care training, given the large number of nursing professionals working at these institutions.

Between January 2023 and December 2024, 17 modules were developed, drawing on the institutions' experience, across four strategic themes for implementing the nursing care model: Nurse Career Plan and Progression (11 modules); Nursing Process (3 modules); Update on Wound Treatment and Prevention: From Theory to Practice (1 module); and Technical Nursing Procedures (2 modules).

During this period, nursing staff at healthcare institutions accessed VLE courses more than 22,000 times. The "Nursing Career Plan and Progression" module received over 9,600 views; "Nursing Process" received over 8,300 views; "Nursing Technical Procedures" received over 2,700 views; and "Wound Treatment and Prevention Update" received over 1,700 views. The overall average post-test score was 8.7 points for the 10 multiple-choice questions assessed in the courses.

These results demonstrate that the use of online learning as an adjunct to nursing staff training proved accessible and well-received, contributing to improving nursing staff knowledge in healthcare.

Training Programs

Institutional training is an essential pillar for strengthening and modernizing organizations. Institutional training programs aim to continuously develop employees' technical and behavioral skills, promoting excellence in management, execution, and meeting societal demands.

1. Nursing Team Training Program

The nursing training program at SPDM Affiliated Institutions follows the Internal Regulations of the Corporate Nursing Center, which establishes a training goal of 15 hours per person per month. This program is divided into induction and ongoing training, focusing on patients and their safety during healthcare.

SPDM Affiliated Institutions believe that a healthcare organization's most important resource is its people. Therefore, the role of continuing education in nursing is precisely to promote the development of the nursing staff. In addition to induction and ongoing training, the Continuing Education Symposium is held annually for nurses in the network.

In 2023, this event had the theme "Paths, Trends, and Perspectives," aiming to reflect on the future of nursing. The event was attended by 200 nurses and HR members from the Affiliated Institutions. Internal and external speakers participated. It promoted the dissemination of scientific papers and reports on improvements developed in various units. In the end, of the 64 papers presented, the six highest-rated papers received awards.

A satisfaction survey measured post-event, 100% of participants would recommend the event to others, and 98.5% rated it as entirely satisfactory.





Also in 2023, patient safety training was provided to nursing assistants and technicians. This training was conducted on-site at the Affiliated Institutions, a partnership between Nursing Continuing Education and the Quality and Patient Safety Center. 3,260 professionals received synchronous training during a week of quality and patient safety.

Among the training courses conducted by the Continuing Education team, aimed at nursing staff, we can highlight:

Training of the Nursing Team in concurrent cleaning:

The multidisciplinary teams working in critical care units at SPDM Affiliated Institutions received theoretical and practical training on concurrent cleaning from the hospitals' Continuing Education Supervisors, in conjunction with the Hospital Infection Control Service. In 2024, 4,413 professionals were trained, with a total of 503 hours of training, to mitigate infections caused by resistant microorganisms.

I First Infection Prevention and Control Course: Created by the Corporate Nursing Center and tutored by Prof. Dr. Eduardo Medeiros (SCIH Corporativa), this course was designed for healthcare professionals who provide daily

patient care. In addition to classes with experts on the topics presented, the meetings provided an opportunity to share experiences. The course, offered online, both synchronously and asynchronously, had a total of 1,200 healthcare professionals enrolled, lasted 36 hours (classes, seminars, and case studies), and received a Certificate of Completion for students who attended more than 70% of the classes and achieved a score above 6.0 on the final exam. Nursing participation was notable, with 485 enrolled in São Paulo and 48 in Uberlândia, totaling 533 professionals.

Training and Simulation Center (CTS): Realistic simulation is considered an effective pedagogical strategy for adult education, especially in professional and academic contexts, such as healthcare. The first Training and Simulation Center (CTS) of the SPDM Affiliated Institutions opened in August 2022 to serve institutions managed by the Social Health Organizations, which are located in several cities in São Paulo and Minas Gerais.

Social-Emotional Skills Programs: The social-emotional skills development program for mid- and senior-level nursing leaders began in mid-April 2020, with the advent of the COVID-19 pandemic, and has continued to this day. Three programs with hybrid meetings were listed:

1. Swadharma (the Pythagorean method, which addresses the individual, the environment, relationships, and development, and studies bullying and aggressive relationships at work);
2. Emotional Intelligence (learning, language, mental model, communication, and emotion management); and
3. Spiritual Intelligence and Emotional Self-Management (Inner Skills and Soft Skills). From 2023 to 2024, socio-emotional skills programs impacted 26 Continuing Education Supervisors, 151 Nursing Supervisors, and 33 Nursing Managers across the 30 healthcare institutions of the SPDM Affiliated Institutions, totaling 1,040 hours of training on this topic. Swadharma is a program that aims to expand to nursing and multidisciplinary staff by 2024, with in-person applicability, with four meetings per group per month, totaling 1,440 meetings and 471 professionals impacted.

The Emotional Intelligence program, aimed at senior and mid-level leaders, began in 2022, with online meetings totaling 6,720 hours of training.

The Spiritual Intelligence with Emotional Self-Management program began in 2020, using various methodologies, including virtual and in-person sessions. In 2023, the Coaching Course enrolled 212 professionals, totaling 6,900 hours of training.

In 2024, it added 76 more participants and 4,560 hours. In 2023, the Mindfulness Program held seven meetings with leaders (531 participants) and seven with clinical nurses (630 participants), totaling 1,161 hours of training.

Career Advancement Program for Newly Graduated Nurses

At SPDM Affiliated Institutions, nurses must acquire competencies throughout their careers to develop skills and attitudes that result in quality care. To this end, these professionals are encouraged to improve their competency, and the Institution invests in a development or career advancement plan, a program designed by nursing leadership, to promote, retain, and reward clinical nurses.

The Corporate Nursing Center designed and developed the development plan for newly graduated and newly hired nurses, which initially includes eligibility criteria such as a bachelor's degree in nursing, registration with the Regional Nursing Council, and no prior nursing experience.

The career advancement program for junior nurses lasts 12 months. These entry-level professionals work in critical patient units, where they perform bedside activities and are directly supervised by a specialist nurse.

Throughout the program, overseen by the hospital's Continuing Education Supervisor and Nursing Manager, performance evaluations, development plans, feedback, and theoretical and practical tests are conducted. Since 2023, SPDM Affiliated Institutions have hired 114 new nurses.

2 - Primary Health Care Manager Training Course

In 2024, SPDM/PAIS launched its first Primary Health Care Manager Training course. The proposal arose from the identification of manager development needs during the selection process.

The main objective of the course is to provide current managers with technical training in administrative, healthcare, health surveillance, information, personnel management, and other management-related areas. This training can then be replicated/adapted to different professional categories within the units, preparing future managers.

To develop the course, an institutional committee was formed in March 2023, comprising representatives from the Administrative (Human Resources), Education, Technical, Planning, and Regional Managers' Directorates of São Paulo. The target audience for the first training course was defined as managers of Primary Health Care units in the city of São Paulo.



The course launched in August 2024 and lasted a little over a year, with weekly classes. The managers were organized into four in-person courses, with the first class beginning in 2024 and the remainder beginning in 2025. Classes are held at the headquarters of the São Paulo School of Health Sciences (FPCS) of the SPDM. After this first cycle, the course proposal will be replicated in other municipalities and for other professional categories at the units, preparing future managers, and later adapted for different services, such as emergency care, hospital care, mental health, and specialty care.

3 - Continuing Education of Health Units

In 2023, the Education and Sustainability Department implemented a process to plan, organize, and standardize records of educational activities through the development of the Annual Continuing Education Program (PAEP) for healthcare units. The PAEP implementation process began in the second half of 2023 with the Primary Care Units in the city of São Paulo and expanded in 2024 to other services and municipalities, achieving full implementation in the units of Diadema, Santo André, Fortaleza, Porto Alegre, and hospital units. The project continues to expand in the cities of São Paulo and Rio de Janeiro.

The PAEP offers a chance to link existing spaces in professionals' schedules and highlight the demands that arise in their work routine, including team meetings, technical meetings, and general meetings. Thematic committees and centers (Health Surveillance Center, Violence Prevention Center, Patient Safety Center, Sustainability Committee, Quality Committee, among others); necessary training according to health campaign calendars; training new professionals in health unit procedures; multiplication and dissemination of knowledge; actions related to municipal and institutional projects and initiatives; guidance on new work processes; leveraging the talents and expertise already present in the health team; mandatory training required by law or the institution.

The project continues to expand, aiming to reach 100% of the health units managed by SPDM/PAIS, strengthening the implementation of a system for recording educational activities, linked to the employee registration database. This project will enable the computerization of



processes, the mitigation of data collection errors, and comprehensive visibility at all levels of management of employee engagement and adherence to educational activities. The system is in the final stages of development, with a launch date scheduled for 2025.

4 - Events and Lectures

The 2023/2024 biennium was also marked by several educational events focused on disseminating knowledge within the institution, notably:

Webinar “Dimensions of Hospital Care for Legal Abortion of Pregnancy Resulting from Sexual Violence”: The event aimed to raise awareness among professionals about ethical and supportive care for women seeking legal abortions in cases of pregnancy resulting from sexual violence. The event featured guest speakers from the Women’s Hospital, Vila Nova Cachoeirinha Hospital, Maternity Hospital, and the Specialized Center for the Promotion and Defense of Women’s Rights (NUDEM) of the São Paulo State Public Defender’s Office. Professionals from various categories and services participated, including primary care units (UBS), hospitals, CAPS, polyclinics, emergency care units (UPA), and others.

Symposium on Successful Experiences in Ophthalmology in the Unified Health System (SUS):

This event, held in partnership between SPDM and IPEPO – Instituto da Visão (Vision Institute), took place in January 2023 in the SPDM auditorium. Its main objective was to promote the exchange of experiences regarding the quality of ophthalmology services offered by the Unified Health System (SUS). The event was held in a hybrid format, with in-person participation and live online streaming. The presentations included: the implementation of the Centro Carioca do Olho (Carioca Eye Center), a specialty service managed by SPDM/PAIS in Rio de Janeiro; and the experiences of IPEPO and the Paulista School of Medicine of Unifesp (Unifesp) in teleophthalmology consultations, pre-screening in panoramic retinal photography, and refractive surgery through the Unified Health System (SUS).

Women’s Health Seminar: OThe Women’s Health Seminar took place in April 2023 at CEU Parque Anhanguera, in the Perus region of São Paulo, and aimed to promote reflection on women’s care from a comprehensive perspective, as well as social and cultural contexts. Data were presented comparing regional and municipal figures, including domestic violence, maternal mortality, breast and cervical cancer, and successful projects carried out in Perus to improve these indicators. Projects included prenatal care for Haitian women, breastfeeding support, social interaction, and network building among women, as well as personalized Pap smear care.

Patient Safety Symposia in Fortaleza: : The SPDM/PAIS healthcare services in Fortaleza hold the Patient Safety Symposium annually, which had its second edition in September 2023 and third in September 2024. The event is organized by the Continuing Education and Quality departments and aims to strengthen and disseminate a culture of quality and safety in

healthcare facilities. The meeting provides an opportunity to share experiences in safe care practices. It allows participants to learn about the realities of other services, expanding their perspective on new proposals for Patient Safety Centers and the implementation of safer, higher-quality healthcare management and care. The third edition of the symposium was held in a hybrid format, with in-person participation and a live virtual broadcast.

FPsychiatric Care Challenge Forum in Emergency Care Units in Santos: The event promoted by the UPA Zona Noroeste in Santos, São Paulo, was held in March 2024. It focused on addressing sensitive issues in emergency care in Mental Health.

Lecture Series - LGPD Promulgation Week: The



SPDM/PAIS Compliance Department, in partnership with the Privacy Guaranteed DPO, held an online lecture series in August to train employees to understand the LGPD and adopt safe practices in the use and handling of personal data, addressing fundamental aspects of data protection in the corporate and digital context. Topics covered include: the importance of the LGPD and its application in organizations, best



practices related to the LGPD, data security and risks to personal data, application of the LGPD in people management, among others.

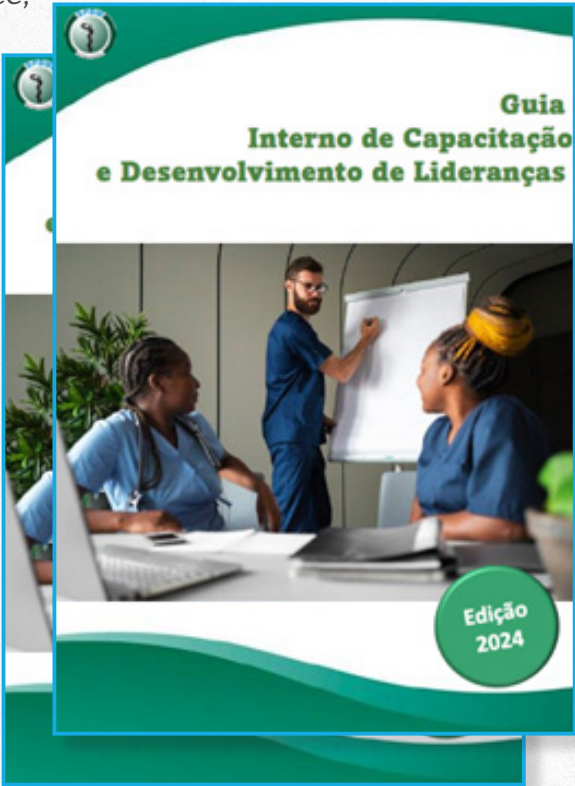
5 - Internal Guide to Leadership Training and Development

As part of its strategy, SPDM has been striving to enhance the behavioral and technical skills of its leaders. Leadership development initiatives bring a range of benefits to both individuals and organizations, such as improved organizational performance, talent engagement and retention, improved communication, strengthened organizational culture, and motivation, among others.

In 2023 and 2024, SPDM, at the São Paulo Hospital Superintendence and Affiliated Institutions, adopted the Internal Leadership Training and Development Guide, which provides guidelines for essential training for the development of the institution’s leadership activities, covering both technical, operational, and behavioral topics.

Through the Program, it is possible to provide continuous leadership development at SPDM Affiliated Institutions, promoting knowledge management and a more welcoming work environment.

SPDM aims to develop its leaders to promote more sustainable management in all aspects and therefore maintains in its strategic planning the goal of training 100% of administrative leaders in the theme of sustainability, both economic, ecological, and social.



Total Number of Leaders Trained		
Themes	2023	2024
Leadership in the Age of Competencies	815	
Leading People at SPDM		877
Sustainability	470	436



Young apprentices

Linked to the theme of Training and Education, SPDM understands its social responsibility as the promotion and professional inclusion of young people in its units, by current legislation. Therefore, SPDM fulfills its role by providing opportunities to young people interested in entering the job market and developing new knowledge and professional experience, as part of the Young Apprentice program.

Through the Program, it is possible to provide continuous leadership development at SPDM Affiliated Institutions, promoting knowledge management and a more welcoming work environment.

SPDM aims to develop its leaders to promote more sustainable management in all aspects and therefore maintains in its strategic planning the goal of training 100% of administrative leaders in the theme of sustainability, both economic, ecological, and social.

Total Young Apprentices		
	2023	2024
São Paulo Hospital	123	113
SPDM Affiliated Institutions	779	596
SPDM / PAIS	605	684

With a focus on inclusion and diversity, in August 2023, São Paulo Hospital and SPDM Affiliated Institutions joined the Indigenous Young Apprentice Program. They opened their work field for indigenous young people to begin their professional lives in an Apprentice position.

	2023	2024
Total Indigenous Young Apprentices	11	14

Future Path Program

At SPDM, education is one of the fundamental pillars for building more efficient and humane healthcare management. Therefore, we encourage, and value all forms of learning, recognizing internships as an essential tool for personal and professional development.

Opening opportunities in different sectors of the institution directly contributes to strengthening practical knowledge, in addition to encouraging the exchange of experiences between professionals and students.

Among these initiatives, the Future Path Program stands out, launched in September 2024, aiming to combat academic dropout by offering a learning environment and financial support to students in socially vulnerable situations. As a result, 10 positions were made available, filled by interns working at Hospital São Paulo, combining quality technical training with concrete study support.



Competency-Based Performance Assessment

Maintaining a focus on employee training and development, SPDM Affiliated Institutions aim to implement Competency-Based Performance Assessments for employees in eligible positions. The process, previously performed manually, was computerized in 2024, resulting in a significant reduction in paper consumption and greater agility. This allows more employees to be evaluated, receive feedback, and receive their Individual Development Plan (PDI). Through the IDP, employees receive the necessary guidance for their professional development and behavioral competencies, making them better prepared to conduct their activities and take on new challenges.

	2023	2024
Total Number of Employees Evaluated with Individual Development Program	16.553	12.665

Finally, the three SPDM Superintendencies have focused continuous efforts on promoting the development of their professionals, investing in various training options. As a result of this commitment, the table below shows the total training hours completed by our employees in 2023 and 2024:

Total Training Hours		
	2023	2024
São Paulo Hospital	3.520,29	4.828,72
SPDM Affiliated Institutions	377.502	625.014
SPDM / PAIS	551.998	922.069
Total Training Hours	933.020	1.551.912



Occupational Health and Safety



Occupational Health and Safety

(GRI 3-3; 403-9)

SPDM AFFILIATED INSTITUTIONS AND SÃO PAULO HOSPITAL

The Specialized Occupational Health and Safety Services (SESMT) plays a crucial role in ensuring the health and safety of our employees and service providers. With a team of multidisciplinary professionals, SESMT is dedicated to promoting health and identifying hazards inherent to work activities in the hospital workplace.

Once a risk is identified, the SESMT works to manage it through the Risk Management Plan, which includes a unit risk matrix and an action plan developed to monitor, mitigate, or eliminate the impact and frequency of undesirable occurrences. Units have a Risk Management Plan aligned with Regulatory Standards (NRs), containing risk matrices and an action plan to eliminate or neutralize the risk.

Every incident or accident is thoroughly investigated, seeking to determine the root cause, so that preventive or corrective actions can be recommended. In the event of a serious accident, the direct employee or service provider is assisted by a multidisciplinary team that conducts the accident investigation process.

Accidents on the way to work, especially in urban areas and involving motorcycles, are monitored to minimize workplace accidents with serious consequences.

Through regular medical examinations, employees' health and vaccination status are monitored by the Occupational Health Department. Furthermore, best practices in occupational safety are not just promoted, but continually reinforced, ensuring a safe and healthy hospital environment. The SESMT (Surveillance and Emergency Services) is responsible for submitting information on Workplace Accident Reporting, Employee Health Monitoring, and Environmental Workplace Conditions to the Federal Government via e-Social.

To this end, software was implemented to assist in the standardization and management of information, enabling more efficient and transparent management of employee health and safety.

All SESMT actions are guided by a set of documents, regulatory standards, procedures, and indicators that guide activities and services, ensuring compliance with best practices in occupational safety in hospital settings.



Personal Protective Equipment (PPE)

In this cycle, we emphasized conducting a comprehensive study on PPE, focusing on compliance with regulatory standards and employee well-being. The study resulted in the standardization and creation of a set of PPE for the range of risks observed at the Institution.

Employee Training in Occupational Health and Safety

Employees are trained according to the hazards and risks to which they are exposed, ensuring their safety and health.

From the perspective of Affiliated Units, in 2024, 29,945 employees were trained.

Accident Prevention Plan Involving Sharp Materials

Aware of the biological risk inherent in healthcare activities, SPDM Affiliated Institutions have a “Sharp Materials Accident Prevention Plan” that works to standardize supplies with safety devices, offer ongoing training, develop educational activities, regularly inspect sharps collection boxes, among other actions.

Technical Group for Analysis of Exposure to Occupational Risks

At SPDM Affiliated Institutions, the “Technical Group for Analysis of Exposure to Occupational Risks” stands out, ensuring the safety and health of employees by analyzing and identifying occupational risks in each work environment, and identifying potential agents that could pose a health risk.

The group is responsible for consolidating this information into a “Technical Manual,” which supports units in defining unhealthiness and hazardous conditions for their employees.

Firefighting Management

Attentive to the safety of employees and users, the SESMT conducts periodic tests on the entire firefighting system and organizes the signage of the unit’s escape routes, as well as conducting semi-annual evacuation drills. Among the advances made, several units received Fire Department Inspection Reports, ensuring that all facilities comply with safety standards.

Furthermore, a mobile training system was made available to the units. This system aims to ensure the inclusion of all employees, providing training close to the workplace and reducing the need for team travel.

Among the firefighting measures is the training and preparation of employees to respond appropriately to emergencies, ensuring a safe and well-prepared work environment for any eventuality.

Internal Week for the Prevention of Occupational Accidents and the Environment

The traditional “Internal Week for the Prevention of Accidents at Work” (SIPAT) began to address the need to raise awareness among employees about developing new habits for protecting the environment so that they can become social multipliers. It was renamed “Internal Week for the Prevention of Accidents at Work and the Environment” (SIPATMA).



E-Social and Occupational Safety

a. To all employess:

I. Number of deaths resulting from work accidents		
	2023	2024
São Paulo Hospital	0	1
SPDM Affiliated Institutions	1	0
II. Rate of deaths resulting from work accidents		
	2023	2024
São Paulo Hospital	0%	0%
SPDM Affiliated Institutions	0%	0%
III. The number of work accidents with serious consequences (except deaths)		
	2023	2024
São Paulo Hospital	0	0
SPDM Affiliated Institutions	39	12
IV. Rate of occupational accidents with serious consequences (except deaths)		
	2023	2024
São Paulo Hospital	0%	0%
SPDM Affiliated Institutions	0%	0%
V. Number of work accidents requiring mandatory reporting		
	2023	2024
São Paulo Hospital	76	90
SPDM Affiliated Institutions	1601	1821
VI. Rate of mandatory reportable work accidents		
	2023	2024
São Paulo Hospital	15,00%	5,63%
SPDM Affiliated Institutions	13%	10%

E-Social is an essential tool for managing information related to workplace safety in Brazil. Through it, the SESMT (Sistema de Assistência Social - SESMT) sends data to the Federal Government on Workplace Accident Reporting, Employee Health Monitoring, and Workplace Environmental Conditions. The tool encompasses a wide range of information, from incident and accident reporting to monitoring periodic medical examinations and employee vaccination status. By utilizing e-Social, all data is centralized, standardized, and easily accessible, thereby promoting transparency and compliance with regulatory standards. It provides a safer, more efficient, and legally compliant workplace.

Below are the indicators for workplace accidents (GRI 403-9).

Note: The rates were calculated based on 1,000,000 hours worked.

Employee safety is a top priority. We recognize the importance of creating a safe and healthy work environment, and therefore, we have implemented several actions and training programs to minimize the risk of accidents. Below, we list the types of accidents that can occur in a hospital setting and what has been identified:

Typical Accidents: These involve falls, cuts from sharp objects, and musculoskeletal injuries. In 2023, there was an increase in these accidents compared to 2022. In 2024, injuries from falls and cuts continued to be a concern at the Institution.

Commuting Accidents: These occur on the way between an employee's home and the workplace. In 2023, there was an increase in these accidents in a post-pandemic environment where commuting in large urban centers contributes to this indicator. In 2024, the rates remained stable.

Biological Accidents: These involve exposure to infectious agents present in bodily fluids and contaminated materials. In 2023, there was an incidence of percutaneous exposures and contact with biological fluids. This trend continued in 2024.

Our commitment to safety is ongoing, and we are always looking for new ways to improve our practices and ensure the protection of our team.

A safe work environment is essential to the quality of services provided and the well-being of everyone involved.



VIII. Number of hours worked

	2023	2024
São Paulo Hospital	2.990.505	3.192.322
SPDM Affiliated Institutions	120.963.074	174.171.396

b. For all workers who are not employees, but whose work and/or workplace is controlled by the organization:

I. Number of deaths resulting from work accidents		
	2023	2024
São Paulo Hospital	0	0
SPDM Affiliated Institutions	1	0

II. Rate of deaths resulting from work accidents		
	2023	2024
São Paulo Hospital	0	0
SPDM Affiliated Institutions	0	0

III. The number of work accidents with serious consequences (except deaths)		
	2023	2024
São Paulo Hospital	0	0
SPDM Affiliated Institutions	39	0

IV. Rate of occupational accidents with serious consequences (except deaths)		
	2023	2024
São Paulo Hospital	0	0
SPDM Affiliated Institutions	0	0

V. Number of work accidents requiring mandatory reporting		
	2023	2024
São Paulo Hospital	76	0
SPDM Affiliated Institutions	160	177

VI. The number and rate of work accidents requiring mandatory reporting		
	2023	2024
São Paulo Hospital	15	0
SPDM Affiliated Institutions	13	1229

Hazards are identified using a risk matrix that considers the criticality of the sectors. The Institution conducts regular inspections, ongoing training, and collaborates with management, maintenance engineering, and nursing to adapt procedures and environments. These actions allow for the identification of potential risks and the implementation of preventive measures. During the reporting period, the hazards that caused or contributed to workplace accidents with serious consequences were primarily related to failures in operational procedures, lack of adequate personal protective equipment (PPE), and unsafe conditions in the workplace. These incidents were documented and analyzed to understand their root causes and prevent recurrences.

To eliminate hazards and minimize risks, the Institution adopted a hierarchy of controls, which includes:

1. Elimination: Complete removal of the hazard when possible.

2. Substitution: Replacing hazardous materials or processes with less dangerous alternatives.

3. Engineering Controls: Implementation of physical barriers or ventilation systems to reduce exposure to hazards. .

4. Administrative Controls: Review and update operational procedures, increase the frequency of inspections, and provide specific training for employees.

5. Personal Protective Equipment (PPE): Provision and mandatory use of PPE appropriate for each type of risk identified.

These measures are continually monitored and adjusted as necessary to ensure employee safety and compliance with current safety regulations.

The Institution, using documents such as the ergonomic report, the risk management program, and the LTCAT (Technical Report on Environmental Work Conditions), has implemented several measures to eliminate other hazards and minimize the risk of workplace accidents.

These measures are continually reviewed and improved based on the results of inspections, internal audits, and employee feedback, ensuring a safer and healthier work environment for all.



SPDM / PAIS

SPDM/PAIS has an Occupational Health and Safety Management System, where all processes are monitored and defined in specific documents, such as standards, procedures, and workflows. These documents are entered into a Document Management System, overseen by specialized professionals who are part of the SESMT.

Hazard identification, risk assessment and incident investigation

SPDM/PAIS complies with the legal requirements of Regulatory Standard 01 – General Provisions and Management of Occupational Risks of the Ministry of Labor and Social Security.

Occupational Risk Management guides the company in implementing preventive measures aimed at the Health and Safety of its employees by the Risk Management Program (PGR), which surveys all workplaces to identify hazards and potential injuries or health problems, assess occupational risks and indicate the level of risk, classify occupational risks to determine the need for preventive measures, implement preventive measures based on risk classification and priority, and monitor occupational risk control.

Incident Investigation: This is conducted based on the Internal Incident Report (I.R.O.) flow. The Occupational Safety Technician investigates the incident, interviewing the employee and completing the I.R.O. form. After completing this report, and depending on the work physician’s advice, a Work Accident Report (CAT) is filed or not.

An incident is an unusual event that occurs during work or on the way to work and causes some change in the employee’s health.

In cases of traffic accidents or assaults during the commute, a police report must be filed.

In incidents involving exposure to biological material, this is considered a medical emergency, and the employee must be immediately referred to the nearest medical facility with Post-Exposure Prophylaxis. Additionally, the SINAN (Notifiable Injury Information System) must be completed for epidemiological surveillance purposes.

Employee participation, consultation and communication with employees regarding occupational health and safety

SPDM/PAIS has an Internal Accident Prevention Committee (CIPA), which, on March 20, 2023, was renamed to include harassment among its activities. Its name will now be the Internal Accident and Harassment Prevention Committee, comprising employee and employer representatives.

This committee holds monthly meetings, always attended by a representative from the SESMT (Staffing and Emergency Services), where all matters related to Safety, Health, and Harassment are discussed.

Representatives of this committee participate in, among other things, risk identification and assessment, incident investigation, and PPE selection. All members receive training to be part of this committee.

Employee training in occupational health and safety

SPDM/PAIS conducts training in compliance with current legislation, taking into account the hazards and risks to which employees are exposed, with the primary objective of ensuring the safety and health of its professionals. The main training courses offered are:

- NR-32 – Occupational Health and Safety in Healthcare Services
- NR-06 – Personal Protective Equipment



• NR-23 – Fire Protection
All time spent by employees in occupational health and safety training is considered practical work, and a technical supervisor validates all training.

Employee health promotion

During periodic occupational exams, employees are assessed for their fitness for work and vaccination status.

Nurses assess whether employees’ vaccinations meet the requirements of legislation and health agencies.

During medical care, if any acute health complaints or changes are identified, employees are referred for care through the Unified Health System (SUS) through their referral unit or emergency room.

For chronic non-communicable diseases, verbal guidance is provided on their care and management in primary care and the importance of regular follow-up care.

When an employee is identified as needing mental health support, a list is provided with the address and contact information for loca-

tions where the employee can receive free care, or, depending on the case, the employee is referred to the Employee Support and Quality of Life Committee for further understanding and guidance.

All medical and nursing care follows ethical and legal confidentiality principles, adhering to the LGPD guidelines.

Prevention and mitigation of occupational health and safety impacts directly linked to business relationships

The following programs are established at the Institution:

- PGR – Risk Management Program
- PCMSO – Occupational Health Medical Control Program
- LTCAT – Technical Report on Environmental Working Conditions
- PPP – Professional Social Security Profile
- CIPA – Internal Accident and Harassment Prevention Committee

All SPDM / PAIS employees are covered by the programs mentioned above.

Occupational accidents

Work Accident Information	2023	2024
Number of deaths resulting from work accidents	0	0
Number of work accidents with serious consequences (except death)	0	0
Number of Mandatory Reportable Accidents	1.760	2.078
Index of occupational accidents with serious consequences (except death)	0	0
Mandatory Reporting Accident Index	4	4
Number of hours worked	93189216	93404340

Occupational diseases

There was no communication or diagnosis of occupational diseases during this period.

Employment



(GRI 3-3; 401-1; 401-2; 401-3)

The ability to attract and retain highly qualified professionals remains crucial to the excellence of SPDM's services, the satisfaction of its users, and the institution's reputation. The global demand for healthcare specialists is skyrocketing, driven by an aging population and the prevalence of chronic diseases and mental health issues.

In December 2024, SPDM maintained 71,754 direct jobs, of which 54,020 (75%) were held by women, present at all hierarchical levels of the institution, in addition to 14,949 outsourced employees. By creating and sustaining these jobs, it contributes to reducing unemployment and stimulates the consumption of goods and services in the regions where it operates, strengthening the local economy.

SPDM also contributes to mitigating social inequalities by creating job opportunities for women, Black people, people with disabilities, migrants, refugees, Indigenous people, and economically vulnerable individuals, in addition to a comprehensive program of apprenticeships, internships, residencies, and rehabilitation for INSS beneficiaries.

All recruitment processes strictly adhere to the SPDM Administrative Compliance Manual, Policy, and Integrity Principles, in addition to the principles of impartiality, equality, morality, publicity, efficiency, transparency, and accessibility, ensuring the best possible experience for candidates.

SPDM advertises its open positions through the "Work With Us" section on the institution's website or through official channels. No fees or charges of any kind are charged at any stage of the recruitment and selection process.

To attract, welcome, and retain medical professionals, the SPDM/PAIS selection team relies on specialist medical professionals, improving communication, adaptability, and retention.

Most of these positions are for an indefinite period, by the Consolidation of Labor Laws (CLT) and other applicable legislation.

To foster talent retention, we invest in ongoing training programs, structured career paths, and internal mobility and growth opportunities.

The benefits offered to full-time employees include:

- Transportation allowance (if applicable);
- Basic food basket or food voucher (as per collective bargaining agreement);
- Life insurance;
- Funeral assistance;
- Daycare assistance (as per the collective bargaining agreement);
- Dental care;
- Medical care;



SPDM values educational incentives and, as the sponsor of the Paulista Faculty of Health Sciences (FPCS) and the Paulista Technical College of Health Sciences (CTPCS), offers its employees and their families special discounts on tuition fees for training and refresher courses in various fields of knowledge, through a variety of classes and educational events.

FPCS offers extension, undergraduate, and lato sensu graduate programs, while the Technical College offers courses such as Nursing Technician.

Regarding the question on the subject about benefits not offered to part-time or temporary employees, only the provision of meals in the cafeteria or through vouchers is included. This is conditional on the contracted daily hours, by current labor legislation, and is not provided to part-time or temporary employees.
(GRI 401-2) To protect jobs throughout our supply chain, the Supplier Qualification Technical

Committee (CTQF), among other activities, monitors social, environmental, and labor requirements, assessing:

- Compliance with legal quotas (young apprentices, people with disabilities).
- Existence and implementation of the PCMSO (Company's Occupational Health and Safety Program) and the PGR (Purchase and Employment Plan).
- Compliance with Regulatory Standards (NRs).
- Regularity of FGTS (Workers' Severance Indemnity Fund) and clearance certificates for labor debts.
- Absence of employers found to have subjected employees to conditions analogous to slavery in their records.

These initiatives reinforce SPDM's commitment to creating shared value: promoting local economic development, offering decent working conditions, and expanding access to quality services for the entire population.

TOTAL NUMBER AND RATES OF NEW HIRES DURING THE REPORTING PERIOD (401-1 a)

Total Number of New Hires		New Hiring Rate
2023	19.199	28%
2024	20.909	29%

NUMBER AND RATES OF NEW HIRES BY AGE GROUP AND GENDER (401-1 a)

		Men	Women	Rate
2023	Age Range			
	Under 30 years old	1.831	4.604	9%
	Between 30 and 50 years old	2.966	8.468	16%
	Over 50 years old	462	868	2%
2024	Age Range			
	Under 30 years old	2.077	5.670	11%
	Between 30 and 50 years old	3.001	9.028	16%
	Over 50 years old	327	806	2%



NUMBER AND RATES OF NEW HIRES BY REGION AND GENDER (401-1 a)				
2023	Region	Men	Women	Rate
	North East	139	305	0,6%
	Southeast	5056	13.509	27%
	South	64	126	0,3%
2024	Region	Men	Women	Rate
	North East	164	384	1%
	Southeast	5.206	14.992	28%
	South	35	128	0,2%

Total Turnover Number		Turnover Rate
2023	18.372	26%
2024	18.497	26%

NUMBER AND TURNOVER RATES BY AGE GROUP AND GENDER (401-1 b)				
2023	Age Range	Men	Women	Rate
	Under 30 years old	1.303	3.192	6%
	Between 30 and 50 years old	1.884	4.969	10%
	Over 50 years old	1.792	5.232	10%
2024	Age Range	Men	Women	Rate
	Under 30 years old	1.553	4.012	8%
	Between 30 and 50 years old	2.807	8.304	15%
	Over 50 years old	505	1.316	3%

NUMBER AND RATES OF TURNOVER BY REGION AND GENDER (401-1 b)				
2023	Region	Men	Women	Rate
	North East	115	384	0,7%
	Southeast	4.794	12.885	25,4%
	South	70	124	0,3%
2024	Region	Men	Women	Rate
	North East	163	304	0,7%
	Southeast	4.652	13.172	24,8%
	South	50	156	0,3%



Total number of employees entitled to take maternity/paternity leave, by gender (401-3 a).

2023			2024	
Men	Women		Men	Women
17.152	52.362		20.242	61.966

Total number of employees who took maternity/paternity leave, by gender (401-3 b).

2023			2024	
Men	Women		Men	Women
250	1.556		294	1.593

Total number of employees who returned to work after the end of maternity/paternity leave, by gender (401-3 c).

2023			2024	
Men	Women		Men	Women
250	1.502		294	1.562

Total number of employees who returned to work after the end of maternity/paternity leave and remained employed twelve months after returning to work, by gender (401-3 d).

2023			2024	
Men	Women		Men	Women
227	1.135		268	1.335

Return-to-work and retention rates for employees who took maternity/paternity leave, by gender (401-3 e).

2023			2024	
	Men	Women	Men	Women
Return to Work Rate	100%	97%	100%	98%
Retention Rate	91%	76%	91%	85%



Management Relations

Management Relations

(GRI 3-3; 402-1)

The Institution's labor relations are based on employment contracts, a formal document that establishes the employment relationship, agreed upon under the terms defined by the CLT (Consolidation of Labor Laws), which regulates labor practices and defines the rights and obligations in the relationship between employee and employer. Examples include working hours, breaks, advance notice, vacations, and other similar benefits.

While the Institution makes every effort to minimize any negative impact that any change in the standard of operations may have on employees during the performance of their activities, always prioritizing those that have a positive effect, it is important to emphasize that the characteristics of the Institution's activity—an essential health service—do not allow for the agreement of a minimum period to notify employees and their representatives of significant operational changes, such as: restructuring, outsourcing of operations, closure of activities, expansions, new units, acquisitions, mergers, and the sale of all or part of the organization (GRI 402-1 a).

Furthermore, by correctly and timely complying with all legal and conventional standards, which arise from collective bargaining agreements between employee and employer unions, applicable collective bargaining agreements do not

include clauses regarding notice periods or consultation procedures (GRI 402-1 b). We measure Workplace relations through Institutional Climate Surveys. At SPDM Affiliated Institutions, the model used to assess employee perceptions is that offered by the Fundação Instituto de Administração (FIA), which developed the FIA - Employee Experience - FEEEx methodology, which evaluates employee experience in the workplace. With the voluntary participation of over 50% of employees in 2023 and 2024, SPDM Affiliated Institutions achieved positive results, earning the Organizational Climate Seal in 2023 and the Incredible Places to Work Seal in 2024.

In 2024, SPDM invested in acquiring detailed Organizational Climate Survey reports, enabling a more in-depth analysis of employee perceptions, transforming a simple data collection into a powerful tool for organizational management and transformation. With this data, it became possible to more accurately identify strengths and opportunities for improvement in each of the assessed topics, favoring more strategic and targeted planning.

Based on the results of the 2024 Organizational Climate Survey, it is possible to highlight relevant data that led to the recognition of SPDM Affiliated Institutions with the Incredible Places to Work Seal.



These are:

“ESG” category – 83.7 points: The score obtained in this category reflects essential factors, such as:

- o Fair and respectful treatment, regardless of race, religion, gender, or sexual orientation.
- o Trust in the Institution.
- o Pride in working at the Institution.
- o Health and safety conditions offered by the Institution.
- o Work-life balance.
- o Feeling of professional fulfillment.

• **“Leadership” category – 81 points:** The score obtained in this category reflects important points that promote a trustworthy and welcoming work environment, including:

- o Trust in leadership.
- o Consistency in the approach adopted by leaders.
- o Employees feel respected by their leaders.
- o Performance evaluations provided by their leaders contribute to their development.





Diversity and Equal Opportunity

(GRI 3-3; 405-1; 405-2)

Advances in Diversity, Equity and Inclusion

SPDM recognizes diversity as an essential value for promoting equity and inclusion at all levels.

We strive to ensure that inclusion becomes a reality in our daily lives and that equity guides our decisions and practices. Within our organizational ecosystem, we value and celebrate the rich identities and backgrounds that comprise us, recognizing that it is through plurality that we build a more just, welcoming, and transformative environment.

This vision guides us especially in the healthcare sector, where caring also means welcoming and respecting. For both our employees and the community, we value each person in their multiple dimensions—including race, ethnicity, gender, sexual orientation, gender identity, age, physical and intellectual ability, religion, and social and cultural background.

Through specialized internal committees and groups, we drive ongoing actions that strengthen our strategies in every aspect of diversity.

Female representation is one of the pillars of our diversity and inclusion strategy.

Women currently comprise 75.3% of SPDM's staff, representing all hierarchical levels, reinforcing our commitment to gender equity across the board. In governance, female leadership has also been advancing during the reporting period, women held 36% of the Board seats. These indicators demonstrate the importance of women's presence in building a more diverse, inclusive, and responsive management system.

During these two years, SPDM has intensified its efforts on several fronts, and we will detail the main actions and progress made below:



Performance of the Inclusion and Diversity Committees (Institutional and local)

We maintained and strengthened the Inclusion and Diversity Committees, aiming to drive action in this area, with dynamic action at the institutional and local levels. In March 2024, we updated the composition of the Institutional Committee, expanding its work through affinity groups.

The new composition has 21 members, distributed across seven affinity groups, optimizing the deepening of knowledge and the development of more effective strategies for each aspect of diversity and inclusion.

With the support of the Inclusion and Diversity Committees, we strengthened awareness-raising initiatives on Human Rights, Inclusion, and Diversity, promoting various events. We maintained mandatory training on unconscious bias for all employees and leaders; we integrated diversity and inclusion guidelines into the review of various institutional materials, such as the SPDM Administrative Compliance Manual, Policy, Integrity Principles, Supplier Manual, and other documents, to promote equity in professional relationships and fairer practices for all.



Transparent and Engaging Communication (Institutional Calendar and ECOS Organizational Communication Space)

The ESG Institutional Calendar, which includes commemorative dates linked to Human Rights, Inclusion, and Diversity, has established itself as an essential tool for planning and coordinating SPDM's actions in this area. ECOS – the Organizational Communications Space – has emerged as the main channel for institutional positioning, reaffirming the institution's support and commitment to equity and respect for diversity.



SPDM's actions are aligned with the UN Sustainable Development Goals (SDGs) and integrated with ESG (Environmental, Social, and Governance) practices, specifically in the Social dimension. Dates such as LGBTI+ Pride Day, International Women's Day, World Refugee Day, and Black Awareness Day are examples of milestones that drive reflection and engagement with our entire audience.

In 2023 and 2024, ECOS broke a record for the number of publications, reaching 97, strengthening internal engagement with accessible and collaborative content.

In addition to promoting open dialogue on diversity and inclusion and engaging different areas of the institution, the ECOS channel communicates and informs about events related to this topic, expanding its reach and influence.

Links: [PESQUISA-DE-CLIMA-CERTIFICADO-DE-CLIMA-ORGANIZACIONAL---FEEx-2023.pdf](#); [ECOS -ED-106 Programa-Jovem-Aprendiz-Indigena-na-SPDM.pdf](#); [ECOS-ED-111-Dia-Internacional-da-Mulher-8-de-Marco.pdf](#); [spdmfiliadas.org.br/wp-content/uploads/2024/03/ECOS -E-D-115-Dia-Internacional-da-Visibilidade-Trans-28.03.2024.pdf](#)

In addition to the calendar, SPDM/PAIS prepared and distributed newsletters called “Knowledge Pills,” sharing interesting facts, specifics, workflows, and tips related to Diversity and Inclusion Programs. With encouragement and support from senior management, several strategic meetings were held with leaders to increase the hiring of people with disabilities across all business units, providing awareness-raising and information on the topic.



Internal Awareness and Education Initiatives

We hold lecture series, discussion groups, and thematic training sessions focusing on diversity, LGBTQIA+, people with disabilities, racial and generational issues, indigenous peoples, and more. We implemented the “16 Days of Activism to End Violence Against Women” in 2023 and 2024. These initiatives aim to foster a culture of respect and make the environment more humane, innovative, and inclusive. Holding awareness-raising events on relevant diversity and inclusion topics has become a consolidated tradition at our institution each year.



Respect for Diversity in Healthcare

The educational event “Respect and Diversity in Health - Building a more inclusive society together”, held by the Municipal Health Department of São Paulo and SPDM, aimed to promote understanding of aspects related to the reception and care of the LGBTQIAPN+ population in the SUS, differentiating issues of sexuality and gender, and disseminating the rights of this public.



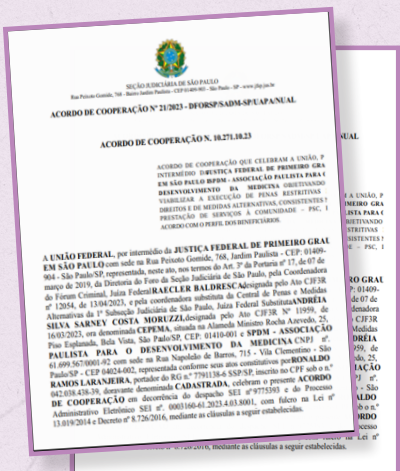
Inclusion and awareness of people with disabilities

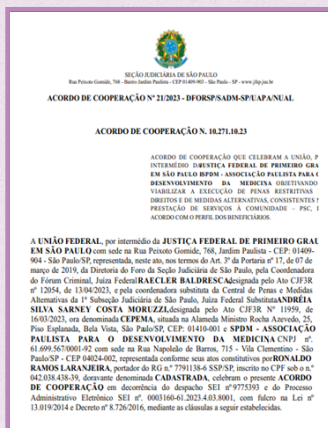
SPDM held an awareness-raising event that addressed the inclusion of people with disabilities, raising awareness among professionals about diversity issues. The event discussed the correct use of terminology, inclusion, equity, quota laws, accessibility, types of disabilities, and tips for coexistence.



Partnerships that transform

SPDM has established partnerships to expand its social and strategic impact in diversity and inclusion. We signed agreements with the NGO Visão Mundial, within the “Vem Tú Pudes” project to hire migrants and refugees, with the Federal Court in São Paulo, to facilitate the execution of restrictive rights sentences and alternative measures, with the INSS (National Institute of Social Security) to support the rehabilitation of insured individuals, with the Indigenous Young Apprentice Program, and with the LGBTI+ Rights Forum, demonstrating our commitment to inclusion and social justice





These partnerships demonstrate SPDM’s dynamism and forward-thinking approach to its social responsibility agenda. The institution remains attentive and open to prospecting new alliances that can further expand its positive impact and its contribution to a more just and inclusive society.

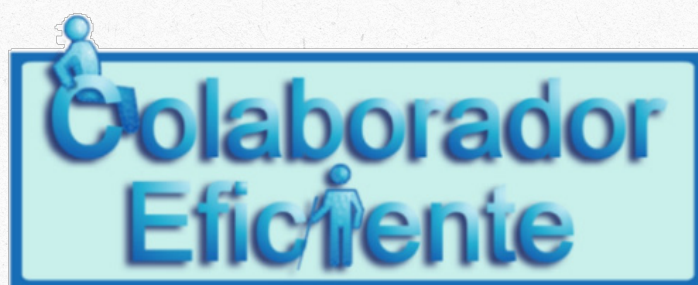
Expanding Opportunities for People with Disabilities

With the “Efficient Employee” and “My Inclusive Employment” projects, we promote not only the hiring but also the development and retention of professionals with disabilities, offering structured support and a Supported Employment methodology.

SPDM’s “Efficient Employee” project goes beyond simple hiring, encompassing orientation, infrastructure adaptation, active promotion of diversity, and ongoing awareness-raising among all employees.

This project provides support to individuals with disabilities during the first 90 days of their experience, as overseen by the Human Resources team.

The team, together with the immediate manager, assesses potential adaptation difficulties and seeks to minimize them, ensuring their continued employment with the institution and their integration with the team and its demands. SPDM also promoted the “Young Apprentice with Disabilities” program, creating equal opportunities for young people with disabilities to enter the job market, including young people



with intellectual disabilities who often face difficulties in accessing this market.

To further these efforts, SPDM implemented the “Meu Emprego Inclusivo” (My Inclusive Job) Program, which aims to promote the inclusion, retention, and professional development of people with disabilities in the job market, using the Supported Employment methodology.

To strengthen the inclusion of people with disabilities, SPDM maintains a partnership with the National Institute of Social Security (INSS) for the Professional Rehabilitation Program. This service is offered to insured individuals who, due to illness or accident, have become totally or partially unable to work. The goal is to help these individuals return to the job market, whether in the same position, in another compatible position, or even in a new professional field.

Through this partnership, our units receive insured individuals referred by the INSS who are on leave but have the potential to return to the job market. For three months, our units provide training on activities that respect their limitations.

At the end of the training, they can hire them as “rehabilitated” individuals, thus enabling these insured individuals to find new jobs.

Diversity Monitoring and Evaluation – Thematic Guides

In 2024, we began participating in the Ethos Institute’s Thematic Guides, which resulted in detailed diagnoses of our work in Gender Equity, Inclusion of People with Disabilities (PWD), and LGBTI+ rights.

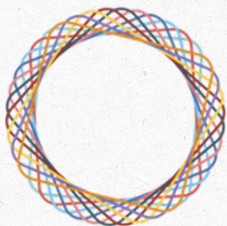
Certifications and External Recognition

Due to SPDM’s diversity actions, the initiatives

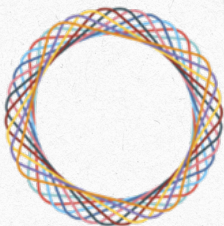


were recognized with the renewal of the “Municipal Seal of Human Rights and Diversity” in 2023 and 2024.

We participated and received, for the first time, the “Racial Equality Seal” from the Municipal Secretariat of Human Rights and Citizenship in 2024, which certifies organizations with effective practices in promoting racial equality.



SELO DE
Direitos Humanos
e Diversidade
6ª Edição



SELO MUNICIPAL DE
Direitos Humanos
e Diversidade
7ª Edição



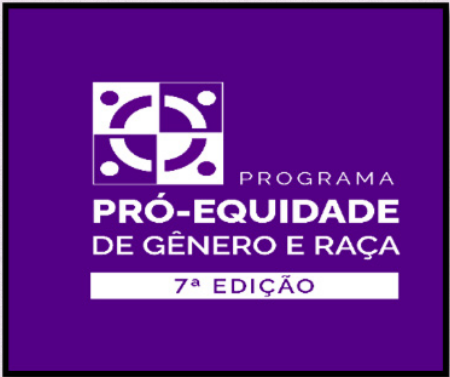
We participated in the “Social, Racial and Gender Profile of the 1,100 largest companies in Brazil” survey by the Ethos/IPEC Institute. We earned the “1100 Profile” Seal, a symbol we proudly adopt and which reiterates our dedication to this cause.



Strategic Commitment to Gender and Racial Equity

SPDM joined the 7th Edition of the Gender and Race Equity Program, undertaking concrete goals in People Management and Combating Discrimination, in line with Law No. 14.611/2023.

This Federal Government initiative, coordinated by the Ministry of Women in collaboration with UN Women, the ILO, and other ministries, aims to foster and consolidate gender and racial equity practices in medium-sized and large companies, with a focus on management and human resources.



On May 28, 2024, at the signing ceremony of the Commitment Agreement in Brasília, Dr. Nacime Salomão Mansur, Superintendent of Hospital São Paulo and Affiliated Institutions – SPDM, joined 102 other companies in taking on the responsibility of implementing concrete actions based on a detailed diagnosis.



Indicators:

Profile of Individuals who comprise the Institution's governance bodies, by gender:

SPDM - Governance Bodies	2023	2024
Women	36%	36%
Men	64%	64%

Profile of Individuals who make up the Institution's governance bodies, by age group:

SPDM - Governance Bodies	2023	2024
Under 30 years old	0%	0%
from 30 to 50 years old	0,0%	0,0%
over 50 years old	100,0%	100,0%

By Gender - 2023

Functional Category	%	%
	Men	Women
Administrative	4,1%	10,8%
Analyst	0,5%	0,9%
Young Apprentices	0,7%	1,5%
Coordination	0,4%	0,7%
Board of Directors	0,1%	0,1%
Management	0,3%	0,8%
Operational	18,4%	59,8%
Supervision	0,2%	0,6%

By Gender - 2024

Functional Category	%	%
	Men	Women
Administrative	5,9%	14,9%
Analyst	0,6%	0,9%
Young Apprentices	0,6%	1,3%
Coordination	0,4%	0,7%
Board of Directors	0,1%	0,1%
Management	0,2%	0,7%
Operational	16,7%	56,1%
Supervision	0,2%	0,6%

By aging group - 2023

Functional Category	2023		
	% Under 30 years old	% from 30 to 50 years old	% over 50 years old
Administrative	37,9%	23,9%	26,1%
Analyst	1,5%	1,6%	0,7%
Young Apprentices	12,3%	0,0%	0,0%
Coordination	0,2%	1,3%	1,5%
Board of Directors	0,0%	0,2%	0,7%
Management	0,1%	1,2%	1,4%
Operational	47,8%	70,7%	69,0%
Supervision	0,2%	1,0%	0,6%
TOTAL SPDM	17,6%	65,0%	17,3%

By aging group - 2024

Functional Category	2024		
	% Under 30 years old	% from 30 to 50 years old	% over 50 years old
Administrative	30,6%	17,6%	21,5%
Analyst	1,6%	1,5%	0,7%
Young Apprentices	9,8%	0,0%	0,0%
Coordination	0,2%	1,3%	1,5%
Board of Directors	0,0%	0,1%	0,7%
Management	0,1%	1,2%	1,3%
Operational	57,6%	77,3%	73,7%
Supervision	0,2%	1,0%	0,5%
TOTAL SPDM	19,8%	64,2%	16,0%

Percentage of Disabled employee employees by functional category:

2023	
Functional Category	Percentage
Administrative	66,8%
Analyst	1,2%
Young Apprentices	0,5%
Coordination	0,9%
Board of Directors	0,3%
Management	0,9%
Operational	28,8%
Supervision	0,6%
TOTAL SPDM	100,0%

2024	
Functional Category	Percentage
Administrative	62,4%
Analyst	1,3%
Young Apprentices	0,6%
Coordination	0,9%
Board of Directors	0,5%
Management	0,9%
Operational	32,7%
Supervision	0,6%
TOTAL SPDM	100,0%

By race:

2023						
Functional Category	Yellow	White	Indigenous	Undeclared	Brown	Black
Administrative	15,4%	24,8%	22,3%	16,5%	29,3%	30,1%
Analyst	0,7%	1,6%	2,1%	0,2%	1,3%	1,2%
Young Apprentices	0,9%	1,6%	18,1%	1,6%	2,5%	3,6%
Coordination	3,1%	1,5%	1,1%	1,1%	0,8%	0,5%
Board of Directors	1,7%	0,3%	0,0%	0,2%	0,1%	0,0%
Management	1,7%	1,4%	1,1%	0,1%	0,7%	0,4%
Operational	76,4%	67,7%	53,2%	80,0%	64,7%	63,8%
Supervision	0,2%	1,0%	2,1%	0,3%	0,6%	0,5%
TOTAL SPDM	0,8%	50,6%	0,1%	1,5%	36,9%	10,0%
2024						
Functional Category	Yellow	White	Indigenous	Undeclared	Brown	Black
Administrative	0,1%	10,0%	0,0%	0,1%	9,1%	2,5%
Analyst	0,0%	0,8%	0,0%	0,0%	0,5%	0,1%
Young Apprentices	0,0%	0,8%	0,0%	0,0%	0,9%	0,3%
Coordination	0,0%	0,8%	0,0%	0,0%	0,3%	0,0%
Board of Directors	0,0%	0,2%	0,0%	0,0%	0,0%	0,0%
Management	0,0%	0,7%	0,0%	0,0%	0,3%	0,0%
Operational	0,4%	37,2%	0,1%	1,2%	29,8%	7,8%
Supervision	0,3%	0,5%	0,0%	0,0%	0,2%	0,1%
TOTAL SPDM	0,9%	48,3%	0,1%	1,3%	39,2%	10,3%

By Education:

Functional Category	% Illiterate	% Incomplete Elementary School	% Complete Elementary School	% Complete High School	% Graduate Degree	% Postgraduate Degree	% Master's Degree	% Doctorate	% Post-Doctorate	% TOTAL
Administrative	0,00%	0,61%	1,05%	19,07%	4,92%	1,05%	0,05%	0,02%	0,00%	26,76%
Analyst	0,00%	0,00%	0,00%	0,20%	0,85%	0,38%	0,00%	0,00%	0,00%	1,43%
Young Apprentices	0,00%	0,00%	0,58%	1,60%	0,02%	0,00%	0,00%	0,00%	0,00%	2,17%
Coordination	0,00%	0,00%	0,00%	0,06%	0,67%	0,42%	0,03%	0,00%	0,00%	1,18%
Board of Directors	0,00%	0,00%	0,00%	0,00%	0,08%	0,10%	0,02%	0,01%	0,00%	0,22%
Management	0,00%	0,00%	0,00%	0,02%	0,55%	0,41%	0,04%	0,01%	0,00%	1,03%
Operational	0,00%	0,24%	0,84%	36,52%	19,25%	9,98%	0,27%	0,09%	0,01%	66,40%
Supervision	0,00%	0,00%	0,00%	0,06%	0,46%	0,26%	0,02%	0,00%	0,00%	0,81%
TOTAL SPDM	0,00%	0,86%	2,48%	56,70%	26,78%	12,60%	0,42%	0,14%	0,02%	100%
2024										
Functional Category	% Illiterate	% Incomplete Elementary School	% Complete Elementary School	% Complete High School	% Graduate Degree	% Postgraduate Degree	% Master's Degree	% Doctorate	% Post-Doctorate	% TOTAL
Administrative	0,00%	0,55%	0,88%	15,55%	4,09%	0,83%	0,02%	0,01%	0,00%	20,79%
Analyst	0,00%	0,00%	0,00%	0,22%	0,89%	0,39%	0,00%	0,00%	0,00%	1,42%
Young Apprentices	0,00%	0,01%	0,44%	1,58%	0,01%	0,00%	0,00%	0,00%	0,00%	1,94%
Coordination	0,00%	0,00%	0,00%	0,05%	0,65%	0,43%	0,04%	0,00%	0,00%	1,11%
Board of Directors	0,00%	0,00%	0,00%	0,00%	0,07%	0,09%	0,02%	0,01%	0,00%	0,19%
Management	0,00%	0,00%	0,00%	0,02%	0,53%	0,42%	0,04%	0,01%	0,00%	0,97%
Operational	0,00%	0,25%	0,94%	43,20%	20,54%	11,47%	0,28%	0,10%	0,02%	72,79%
Supervision	0,00%	0,00%	0,00%	0,06%	0,46%	0,28%	0,02%	0,00%	0,00%	0,78%
TOTAL SPDM	0,01%	0,76%	2,15%	57,51%	25,82%	13,19%	0,41%	0,14%	0,02%	100%



Non Discrimination

It should be noted that some reports eventually recorded as “discrimination” refer, after investigation, to other types of occurrences unrelated to prejudice or discriminatory conduct, which could lead to misinterpretations in GRI 406-1. Even so, all reports are analyzed with the necessary rigor and processed by institutional protocols.

SPDM publishes informative content, promotes the topic at events such as SIPATMA, and disseminates guidelines on expected conduct, reinforcing its role as an agent of social transformation.

In addition to institutional actions to prevent and combat discrimination, Affiliated Institutions regularly monitor their employees’ perceptions through the Organizational Climate Survey.

In the 2024 cycle, 15,668 volunteer respondents participated in the survey, whose reports demonstrate positive results in promoting an inclusive and respectful environment. The data reveal that:

- 89.6% of respondents reported being treated fairly and respectfully, regardless of their race or skin color.
- 91.0% stated the same regarding their sexual orientation.
- 90.8% indicated being treated equitably and respectfully, regardless of gender.

Although these results are positive and represent most respondents, compared to the results of the companies classified as “Most Amazing Places to Work” in 2024, which scored 96.9%, 97.0%, and 96.5%, respectively, in these same areas, we identified that there is still room for improvement.

Non-discrimination is, therefore, an institutional value, reflected in the mission:

“To provide excellence in healthcare without prejudice, distinction, or classification of citizens.”

Publications on the ECOS channel with the topic Non-discrimination:

spdmfiliadas.org.br/wp-content/uploads/2023/06/ECOS_-ED-80o-Dia-mundial-do-Refugiado.pdf;

[ECOS_-ED-82o-Dia-Internacional-do-Orgulho-LGBTQIA.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2023/06/ECOS_-ED-82o-Dia-Internacional-do-Orgulho-LGBTQIA.pdf);

[ECOS_-ED-84o-Evento-de-comemoracao-do-aniversario-de-tres-anos-do-Comite-de-Inclusao-e-Diversidade-da-SPDM-28.07.2023-1.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2023/07/ECOS_-ED-84o-Evento-de-comemoracao-do-aniversario-de-tres-anos-do-Comite-de-Inclusao-e-Diversidade-da-SPDM-28.07.2023-1.pdf);

[ECOS_-ED-107-Dia-de-Combate-a-Intolerancia-Religiosa.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2024/01/ECOS_-ED-107-Dia-de-Combate-a-Intolerancia-Religiosa.pdf); spdmfiliadas.org.br/wp-content/uploads/2024/01/ECOS_-ED-108-Dia-Nacional-de-Combate-ao-Trabalho-Escravo.pdf;

[ECOS_-ED-114-Dia-Internacional-de-Combate-a-Discriminacao-Racial_validado.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2024/03/ECOS_-ED-114-Dia-Internacional-de-Combate-a-Discriminacao-Racial_validado.pdf);

https://www.spdmfiliadas.org.br/wp-content/uploads/2024/03/ECOS_-ED-115-Dia-Internacional-da-Visibilidade-Trans-28.03.2024.pdf;

[ECOS_-ED-123-Dia-dos-povos-indigenas_2024.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2024/03/ECOS_-ED-123-Dia-dos-povos-indigenas_2024.pdf);

[ECOS_-ED-124-Dia-Internacional-da-Visibilidade-lesbica_Igor-MLD-20240426.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2024/04/ECOS_-ED-124-Dia-Internacional-da-Visibilidade-lesbica_Igor-MLD-20240426.pdf);

[ECOS_-ED-130-Dia-Mundial-da-Diversidade-Cultural.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2024/04/ECOS_-ED-130-Dia-Mundial-da-Diversidade-Cultural.pdf);

[ECOS-ED-136_Parceria-SPDM-e-Visao-Mundial.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2024/04/ECOS-ED-136_Parceria-SPDM-e-Visao-Mundial.pdf);

[ECOS-ED-145-Historia-Luta-e-Inclusao-agosto-como-Marco-na-Promocao-dos-Direitos-Humanos.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2024/04/ECOS-ED-145-Historia-Luta-e-Inclusao-agosto-como-Marco-na-Promocao-dos-Direitos-Humanos.pdf);

[ECOS_-ED-158-SPDM-oficializa-a-adesao-ao-Forum-de-Empresas-e-Direitos-LGBTI.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2024/04/ECOS_-ED-158-SPDM-oficializa-a-adesao-ao-Forum-de-Empresas-e-Direitos-LGBTI.pdf);

[ECOS_ED-166_-UNA-SE-para-Acabar-com-a-Violencia-contra-as-Mulheres-16-dias-de-Ativismo.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2024/04/ECOS_ED-166_-UNA-SE-para-Acabar-com-a-Violencia-contra-as-Mulheres-16-dias-de-Ativismo.pdf);

[ECOS_ED-170_-SPDM-recebe-Selo-Igualdade-Racial-2024.pdf](https://spdmfiliadas.org.br/wp-content/uploads/2024/04/ECOS_ED-170_-SPDM-recebe-Selo-Igualdade-Racial-2024.pdf)

Environmental Education and Awareness



Environmental Education and Awareness

(GRI 3-3)

In alignment with its institutional values, SPDM is unwavering in its dedication to promoting environmental awareness among its employees, patients, and the surrounding community. We achieve this commitment through training, events, newsletters, community waste collection campaigns, and other initiatives.

During this period, a target of 10 hours per year was set for strategic and tactical leadership within the administrative group to dedicate to Sustainability.

This comprehensive initiative covers a wide range of topics, including waste management, rational use of water and energy, food waste reduction, climate change, financial Sustainability, diversity and inclusion, the UN Sustainable Development Goals (SDGs), ESG/ESG, etc.

The data below presents, in a consolidated format, the total hours dedicated to Sustainability, by job category, by all employees of SPDM Affiliate Institutions between 2023 and 2024. This collective effort underscores our shared commitment to Sustainability.



HOURS DEDICATED TO THE THEME OF SUSTAINABILITY BY FUNCTIONAL CATEGORY		
CATEGORIES	2023	2024
Administrative	8.949	5.214
Analyst	606	480
Young Apprentices	399	309
Coordination	3.849	5.001
Board of Directors	569	571
Management	2.701	1.349
Operational	2.756	1.605
Supervision	1.238	3.739
Total Geral	21.067	18.268

Source: Shared Human Resources Management – SPDM Affiliated Institutions

Another crucial corporate initiative related to Environmental Education and Awareness is the holding of activities on June 5th (World Environment Day), where each year a central theme is defined for development by the Health Services. In 2023, the theme was “Daily Actions to Transform Our World Based on the Sustainable Development Goals (SDGs).” I

n 2024, the chosen theme was “Circular Economy,” which can play a crucial role in reducing material waste, improving energy efficiency, and promoting sustainability in the healthcare context.

Furthermore, the Health Services submit annual reports on sustainability actions related to the SDGs.

SPDM has projects in which its Units serve as collection points for receiving certain types of waste from its employees, patients, and the surrounding community.

The objective of these projects is to raise awareness about the importance of waste separation and promote the proper disposal of different types of waste. The table below summarizes the amount of waste received in these projects in 2023 and 2024:

Amount of waste collected (kg) in campaigns with patients and employees		
Types of waste	2023	2024
Used frying oil	1.625	1.205
Batteries	1.228	3.598
X-ray films	3.277	2.489
Expired medicines	2.451	2.862
Other waste (electronics, aerosols, plastic caps, etc.)	1.305	5.343
TOTAL	9.887	15.497

Source: Shared Environmental Management – SPDM Affiliated Institutions

The figure presented is the sum of waste collections from campaigns conducted by various Health Units. To develop this type of action, it is necessary to evaluate the Unit’s structure, the presence of suppliers in the region, among other factors.

SPDM Affiliated Institutions also participate in the Green and Healthy Environments Program (PAVS), part of the Family Health Strategy, which aims to contribute to the development of inte-

grated public policies in the Municipality of São Paulo, through an agenda of integrated actions focused on the development of environmental health policies.

Within the context of SPDM Affiliated Institutions, the program is carried out at the RASTS (Health Technical Supervision Assistance Network) of Butantã and Vila Maria/Vila Guilherme. The consolidated results for 2023 and 2024 are presented in the Table below:

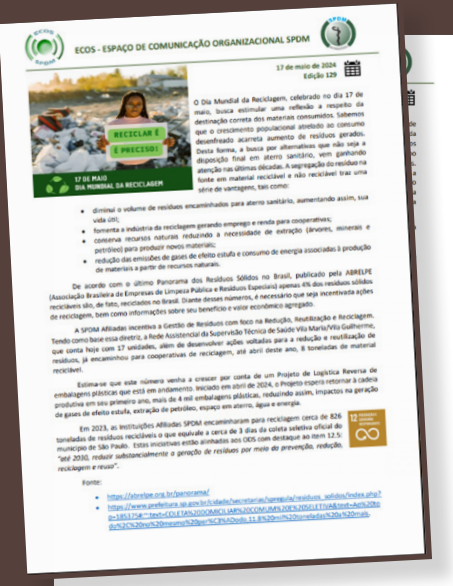
PAVS - RASTS VMVG and RASTS BUTANTÃ	2023	2024
Collective environmental awareness activities for the territory's population	1.422	1.013
Number of participants	36.291	35.300
Collective environmental awareness activities in schools (PSE)	175	110
Number of children (PSE)	4.859	4.698
Environmental home visits	10.319	7.165

Source: Environmental Managers PAVS – RASTS VMVG and Butantã



It's worth noting that the VADs aim to raise awareness among families about how to prevent disease and promote health through environmental issues. Their impactful work covers crucial topics such as combating the *Aedes aegypti* mosquito, water, nutrition, afforestation/vegetable gardens, and solid waste, directly benefiting families and communities.

Regarding communication, the ECOS Channel stands out, providing periodic newsletters to publicize its activities on topics such as compliance, sustainability, business ethics, strategic planning, goals and objectives achieved, financial results, etc. Between 2023 and 2024, we published 14 specific newsletters focused on environmental issues, highlighting important dates related to the environment, awards, participation in events, etc. It's important to note that in line with its strategic goal, SPDM's actions are proudly aligned with the SDGs, contributing to global goals. Therefore, all communications mention the SDGs related to the topic in question.

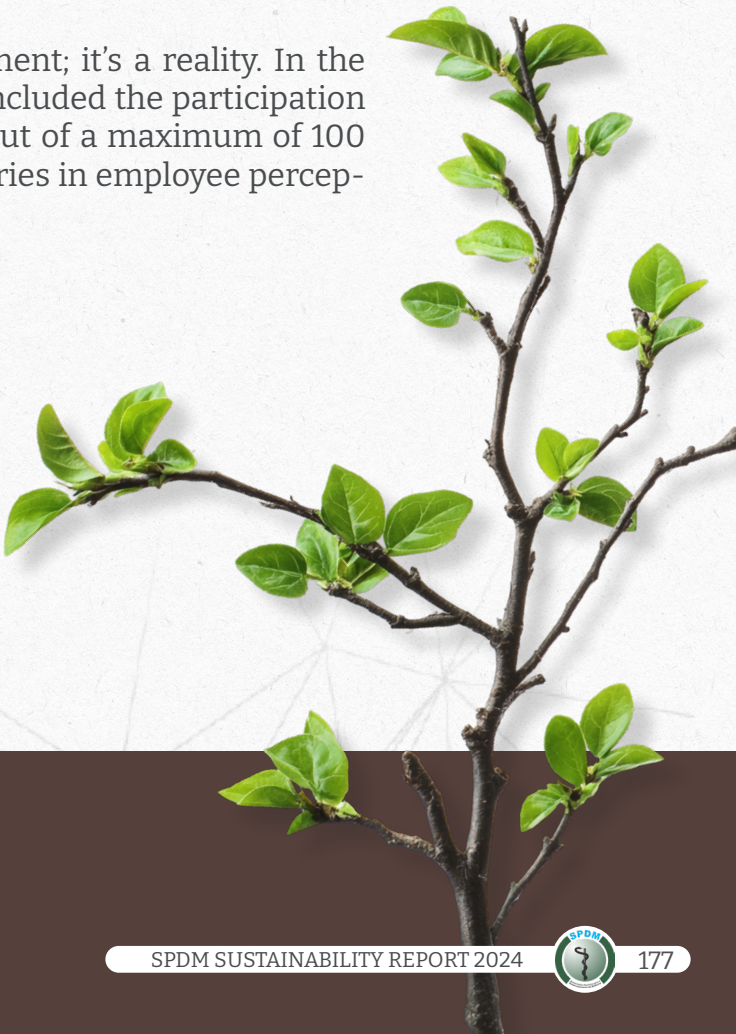


The SPDM Supplier Manual, updated and enhanced in 2023, is available on the institution's website (<https://spdm.org.br/flip/manual-de-fornecedores/>) and continues to serve as a reference for business partners on ESG practices, with a focus on the topic "Ethical Principles and Social and Environmental Responsibility."

To further influence environmental action, SPDM expressed its support for a letter from the healthcare sector coordinated by the organization Saúde sem Haro (Health Without Harm), aiming to intensify efforts to reduce the consumption of single-use plastics, including the healthcare sector, in the Global Plastics Treaty.

Our commitment to sustainability is not just a statement; it's a reality. In the most recent climate survey, the ESG category, which included the participation of 15,668 employees, obtained a score of 83.7 points (out of a maximum of 100 points), ranking among the three highest-rated categories in employee perceptions.

In 2024, aiming for greater integration of strategic ESG actions, the Affiliated Institutions restructured their ESG Committee, with significant responsibilities including: developing the ESG strategy; consolidating and developing goals and indicators; identifying and reporting risks; developing standards and procedures; creating corporate standards and procedures; reviewing reports and communications; monitoring external best practices, among others.





Also noteworthy are two SPDM initiatives that received the Friend of the Environment Award from the São Paulo State Department of Health, which recognizes the 15 best sustainability practices demonstrated by healthcare services linked to the Unified Health System (SUS) nationwide. The project “The Impact of Pharmacoeconomics on the Sustainability and Efficiency of Medication Use” was developed by Pedreira General Hospital and won an award in the 2024 edition. The project “Emissions Reduction by Replacing Gasoline with Ethanol in the Vehicle Fleet,” developed by Euryclides de Jesus Zerbini Transplant Hospital, won an award in the 2023 edition.

SPDM / PAIS

For SPDM/PAIS, sustainability means a balance between environmental, social, and economic health.

In pursuit of this balance, the organization aims to reduce waste and emissions, encourage conscious consumption, promote human development, community engagement, and social and cultural initiatives, encourage local and responsible sourcing, and act with operational

excellence, ethical relationships, and transparency toward society.

The strategies adopted for sustainability governance evolved in 2023 and 2024, through the update of the Sustainability Policy, reaffirming the institution’s commitment to this topic.

Below, we can see the number of actions developed between 2023 and 2024.

TOTAL MAN-HOURS IN SUSTAINABILITY TRAINING		
	2023	2024
Total hours of training in Sustainability	5.947,50	60.169,00

Source: Directorate of Education and Sustainability SPDM / PAIS

Below, the number of man-year hours developed within this education axis, in the period from 2023 to 2024, is systematized.

AVERAGE MAN-HOURS IN SUSTAINABILITY TRAINING PER ACTIVE EMPLOYEE		
	2023	2024
Average number of hours of Environmental Awareness Educational Actions per active employee/year	0,17	1,62

Source: Directorate of Education and Sustainability SPDM / PAIS

Event II PAIS + Sustentável: reflections on the relationship between health and sustainability

The event aimed to promote reflection on the relationship between health, disease, and the environment and to strengthen the institution's culture of sustainability. The II PAIS + Sustentável (+ Sustainable Country) was held in a hybrid format, allowing for both in-person and online participation, which attracted an audience of approximately 350 people. The highlight was the lecture **"Sustainability: What does it have to do with health?"**, led by Prof. Dr. Paulo Saldiva, a pathologist and full professor in the Department of Pathology at the University of São Paulo School of Medicine.

Sustainability Culture as a Strategic Indicator:

To provide a global vision that aligns results with the Institution's strategic objectives, promoting integration and avoiding isolated efforts, institutional strategic indicators were developed in 2024. The expectations with this new alignment were:

- Facilitate the standardization of processes and the identification of trends or systemic risks that could impact the Institution as a whole.
- Improve resource management, prioritizing investments in critical areas and strengthening the institutional identity by encouraging collaboration.
- Demonstrate integrated management capabilities and consistent results.

In this context, sustainability could not be overlooked. Being transversal to the institutional strategic planning, the sustainability principles had materialized in a strategic indicator, called "Culture of Sustainability," aimed at measuring institutional engagement in sustainability, aligned with the "Society/Patient/Client" perspective of Strategic Planning. This indicator will allow for monitoring progress in this area.



Environmental awareness in communities

In addition to educational initiatives focused on environmental awareness, we extend these initiatives to our Business Units and surrounding communities, especially in areas that encompass primary healthcare.

Starting in 2022, the Green and Healthy Environments Program (PAVS) of the São Paulo Municipal Health Department became part of the guidelines of the new Sustainability Policy, under the name **Environmental Health**, where the Institution commits to:

"Fostering the construction of sustainable local spaces, with environmental preservation and protection of the territory, as a tool for health promotion, considering the integration of health and the environment and local engagement as an ongoing process of building knowledge, values, skills, and experiences, in which individuals and communities come to understand and appreciate the interrelationships between human beings, their cultures, and their physical environments, acting sustainably".

Below, we present the number of activities developed in the period from 2023 to 2024, based on environmental education and awareness in the business units in São Paulo under the Institution's management, taking the environment and social reality as a reference as a source of health determinants.

	2023	2024	Total
Collective activities* to raise environmental awareness among the territory's population	5.466	5.405	10.871
Number of participants	90.69	166.585	257.281
Collective* environmental awareness activities in schools	229	539	768
Number of children	14.40	51.810	66.210
Environmental Home Visits**	35.40	54.234	89.643

* Collective activities: lectures, courses, workshops, events and collective efforts

Environmental Home Visits: environmental education and awareness action carried out by visiting the homes of health unit users.

- The most frequently discussed topics in these activities were:
- Synanthropic animals, with an emphasis on actions to combat the proliferation of the Aedes aegypti mosquito;
 - Solid waste, with an emphasis on material reuse and selective collection;
 - Community gardens and healthy eating;
 - Socio-environmental initiatives in educational institutions in partnership with the Health in Schools Program (PSE);
 - Environmental health;

From 2023 to 2024, socio-environmental initiatives and projects were developed, considering the relevance to the socio-environmental development of the areas covered by the business units as a starting point. These activities utilize a participatory and community management methodology, based on the assessment and mapping of strengths, weaknesses, and local partners. Below, we present some examples that stood out in the São Paulo business unit.



Project: Nutriser

Description: Carried out in the business units of São Paulo, it is an integrated project for all units with PAVS operations in partnership with the Municipal Health Department of São Paulo, aiming to encourage the construction of organic gardens in community spaces as a strategy to promote healthy eating, create therapeutic spaces for community socialization, environmental education and health promotion.



Project: Indigenous Beauty Day

Description: Indigenous Beauty Day is an annual event held in the Jaraguá Indigenous Territory, initiated by the PAVS (National Health Program) and supported by the Kwaray Djekupé Basic Health Unit (UBS). It features activities such as singing, dancing, a parade, music, tastings of traditional foods and crafts, a lecture, and workshops open to the public, such as conventional archery and natural cosmetics. The event aims to promote self-esteem and empowerment among Indigenous people, as well as highlight the importance of Guarani culture to the city of São Paulo.

Project: Healthy Paws

Description: Aiming to promote health, prevent zoonoses, and prevent abandonment due to animal overpopulation, this project aims to reduce existing damage and pave the way for future cases. Developed at the São Paulo business unit, at the Iguaçu Primary Health Care Unit and the Juta 1 Primary Health Care Unit in the southeast region of the city of São Paulo, the project included several educational initiatives on responsible pet ownership, visits to register owners for the animal spay/neuter queue via Portal 156, and collaboration with a partner clinic to facilitate dog and cat spay/neuter campaigns. The results for 2024 are as follows: 95 animals registered; 65 puppies donated; 18 educational initiatives carried out; 251 socio-environmental home visits; 20 animals receiving treatment for sporotrichosis.

Another successful initiative developed at the São Paulo business unit is solid waste management, which includes the implementation of voluntary drop-off points for waste such as batteries, used cooking oil from healthcare equipment, and other waste. These points aim to reduce improper waste disposal and promote environmental health. Below, we'll demonstrate the results of this collection and its environmental impact from 2023 to 2024.

	2023	2024	Total
Quantity of batteries collected in kilograms (kg)	9950,3	327,2	10277,5
Amount of used cooking oil collected in liters (l)	2234,4	1695	3929,40

Collecting batteries helps reduce hazardous household waste, enabling those around your business to dispose of it properly. Furthermore, collecting used cooking oil makes an essential contribution to preserving waterways.

Strengthening Environmental Sustainability in Healthcare Units

The pursuit of environmental sustainability in healthcare facilities, in partnership with municipalities, was reinforced this cycle with institutional adherence to the **Healthy Hospitals Project (PHS)**. As members of the PHS, SPDM/PAIS agreed to contribute to the organization's objectives by sharing knowledge and carrying out actions aimed at the continuous improvement of environmental and public health practices for the benefit of a more just, safe, and sustainable society, promoting environmental health for all.

Another successful initiative is the **S.I.M. Project (Sustainability, Innovation, and Improvement)**, developed in business units in partnership with Sustainability Committees, formed by multidisciplinary teams who promote the topic in healthcare facilities.



The S.I.M. Project aims to raise employee awareness of the importance of sustainability by offering specific knowledge related to the environmental and social aspects of the organization’s activities. It is structured around four thematic areas, each dedicated to a quarter of the year: water (1st quarter); quality of life (2nd quarter); energy (3rd quarter); Waste (4th quarter).

One of the strengths of the S.I.M. Project is its flexibility, allowing the Sustainability Committee to develop strategies, action plans, and customized activities autonomously, adapting to the specific needs of each unit. This adaptive approach aims to significantly contribute to improving environmental management within healthcare facilities, fostering a solid and lasting culture.

SPDM/PAIS invests in Sustainability Committees, fostering internal leaders dedicated to the cause of sustainability. With established internal regulations, it outlines functions and responsibilities, avoiding overload and ensuring that each Committee member understands their role. It simplifies the coordination of environmental actions and facilitates the implementation of planned initiatives. Below, we will demonstrate some examples of this work:



Action: Improvement in Environmental Management for sustainability committees in Diadema/SP

Description: The activity enabled an exchange of experiences and successful practices in sustainability, enabling the adaptation of solutions to different realities. Furthermore, innovative sustainability initiatives were shared for the Diadema, São Paulo, business unit, encouraging its expansion to other locations.



Action: “If you don’t want it, there are those who will.” Clothing, footwear, accessories, and home decor swap meet, Vila Prudente Day Hospital, São Paulo business unit.

Description: Action planned and executed by the Sustainability Committee of the Vila Prudente Day Hospital, located in the southeast region of the city of São Paulo, aiming to increase participants’ awareness about conscious consumption, reuse, solidarity, sustainability, and encouraging ecological practices in their daily lives.



Action on the SDGs

Description: Developed by the Sustainability Committee of the João Pompeu Lopes Randalda Polyclinic, a health unit in the city of Fortaleza/CE, using a gamification strategy, with a word and shape puzzle, it attempted to engage the Institution’s employees in the SDGs.

Emissions

(GRI 3-3; 305-1; 305-2; 305-3)

In 2024, SPDM/PAIS began preparing its greenhouse gas inventories for 2023, adopting the intersectoral GHG Protocol tool to calculate inventories and adopt an operational control approach. The emissions considered in the inventories include:

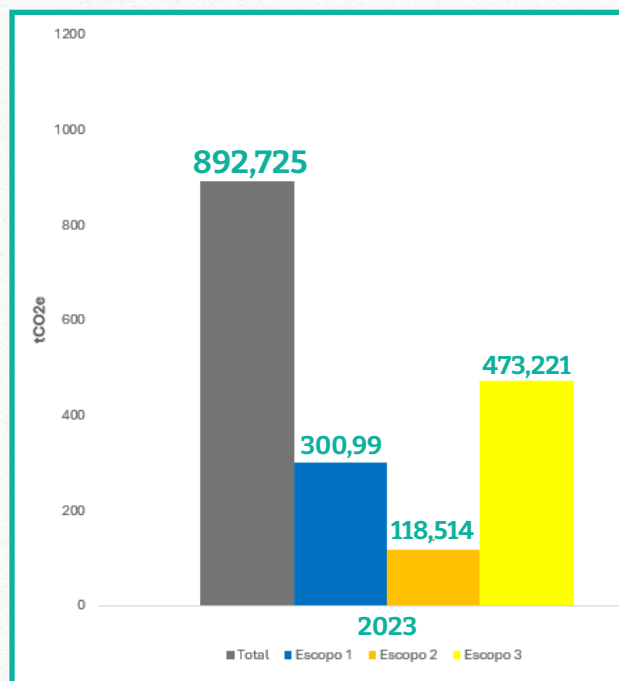
- Scope 1: stationary combustion and fugitive emissions.
- Scope 2: electricity.
- Scope 3: solid waste from operations.

The ongoing discussion about the collection of data related to GHG emissions from effluents for future cycles is of utmost importance, and your input is highly valued.

We conducted the 2023 inventories for the following units managed by SPDM/PAIS: Irmã Dulce Hospital Complex (Praia Grande), Amparo Maternal Hospital, and SP Plus Diagnostic Center Day Hospital. At the studied units, we monitor the Scope 1 gases: carbon dioxide, nitrous oxide, the anesthetic gases sevoflurane and desflurane, as well as dry natural gas, liquefied petroleum gas, and diesel oil. SPDM/PAIS continues to improve its processes to expand GHG monitoring. We are currently in the discussion phase for collecting data related to GHG emissions from effluents (GRI 305-1).

To calculate purchased electricity (Scope 2), we use the location-based approach provided by energy distribution companies.

Greenhouse Gases - SPDM PAIS 2023



It is important to note that the Irmã Dulce Complex has a photovoltaic energy system, and the accounting of the energy generated by this system was considered in the GHG emissions calculations (GRI 305-2).

For Scope 3, we accounted GHG emissions from waste treatment, which includes future emissions resulting from the gradual generation of methane from landfilled waste (GRI 305-3).

In 2024, SPDM/PAIS participated in the 2024 Healthy Hospitals Seminar, held in Rio de Janeiro, presenting successful projects carried out at the Irmã Dulce Hospital Complex and Amparo Maternal Hospital, receiving an honorable mention for the work presented on energy efficiency:



Installation of Photovoltaic Systems at the Irmã Dulce Hospital Complex

Solar energy, sustainability, and savings were the opportunities presented by the energy distribution company to the Irmã Dulce Hospital Complex with the installation of 1,051 solar energy capture modules across two buildings: 943 at the hospital and 108 at the Charles Antunes Bechara Emergency Care Unit. The maintenance department continuously monitors this system, and the results are already being measured monthly in a very positive manner.

Sustainability and Energy Efficiency in the Building Management of a SUS Hospital Unit: A Commitment to the Global Green and Healthy Hospitals Agenda - Hospital Amparo Maternal

This project, developed by and meticulously aligned with the Global Green and Healthy Hospitals Agenda, has been making significant progress since 2023.

Our actions, including the replacement of light bulbs with LED lighting, conducting ecological awareness campaigns, and developing a manual of good building practices, have all contributed to a reduction in our environmental impact and a promotion of energy efficiency in the hospital.

Despite the increased number of people circulating through the Unit due to the expansion of health services and the growth in hospital demand, we have seen positive results.

The work of SPDM Affiliated Institutions focused on managing greenhouse gas emissions began in 2016, and its history is presented in the 2022 Sustainability Report. In 2023 and 2024, corresponding to this reporting cycle, the work continued to achieve significant results and recognition. It is worth noting that SPDM adopts the intersectoral GHG Protocol tool for calculating inventories and the Operational Control approach.

The emissions considered in the inventories include:

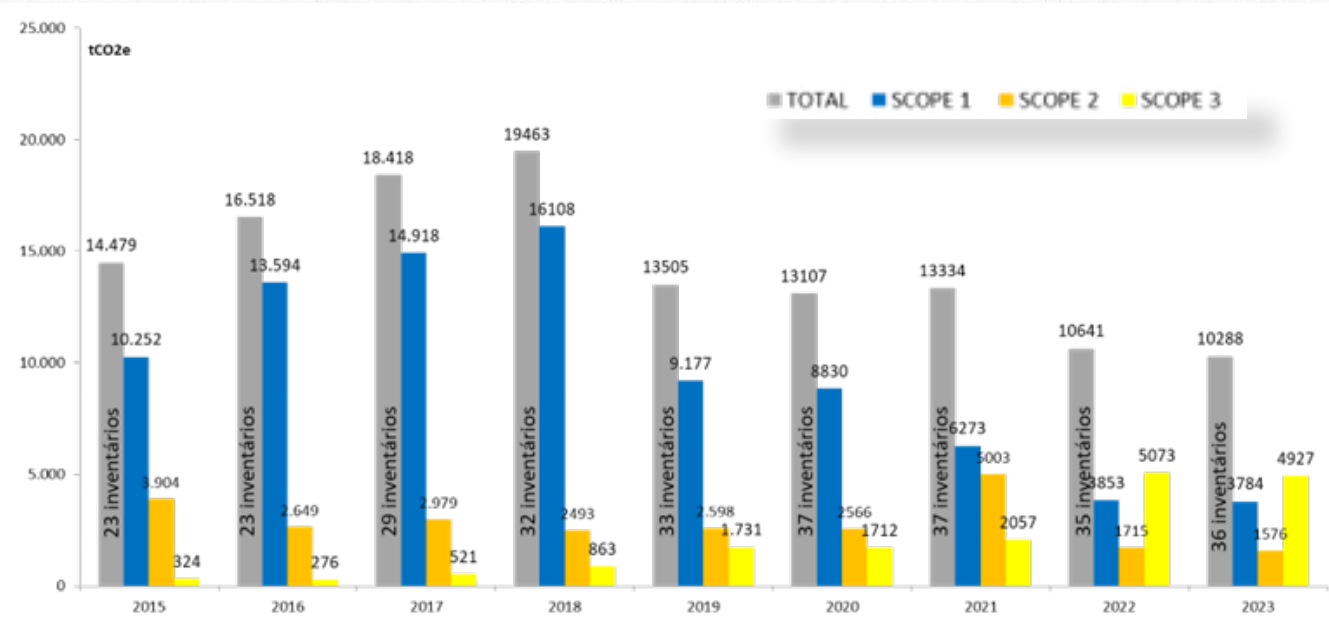
- Scope 1: stationary combustion, mobile combustion, fugitive emissions, industrial processes (anesthetic liquids), effluents.

- Scope 2: electricity.

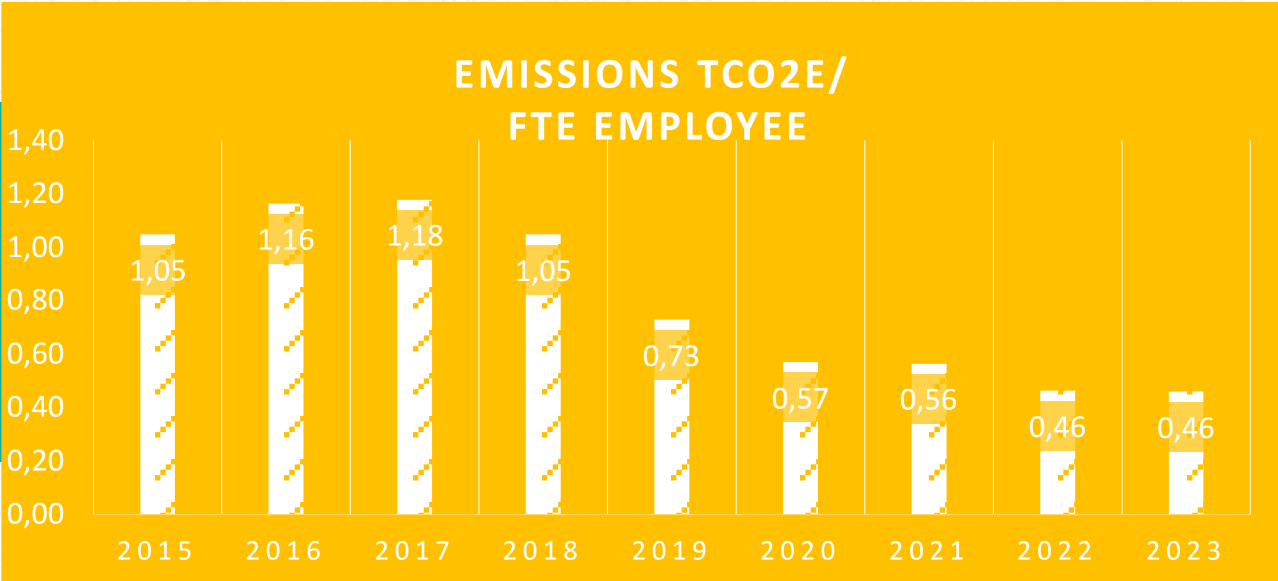
- Scope 3: solid waste from operations, effluents.

The chart below summarizes the history of the SPDM Affiliated Institutions' Greenhouse Gas Inventories since their first edition.

Comparison of greenhouse gas emissions - SPDM Affiliated Institutions - 2015 to 2023



We observed a significant reduction in emissions in the 2022 Inventory, and a slight decrease in emissions across all three scopes in 2023, reaching the lowest emissions level since measurements began. In 2023, we consolidated 36 Healthcare Service Greenhouse Gas Inventories, and to understand the evolution of emissions, we developed a relative indicator that reflects emissions in tCO2e per FTE (Full Time Equivalent) employee (a way of equalizing the different workloads for a 200-hour/month workday). Using 2018 as a baseline, the 2023 Inventory shows an approximate 56% reduction in emissions in tCO2e/FTE employee, as shown in the following graph:



It is worth noting that, in 2021, SPDM Affiliated Institutions joined the International Race to Zero Campaign, with emissions reduction targets for the year 2030 and net-zero reductions by the year 2050.

Between 2023 and 2024, we presented SPDM’s greenhouse gas emissions management work at three international events:

Event name	Organization	Date	Location
<i>“Addressing the Challenges of Climate Change & Health One Earth, One Family and One Future”</i>	Asian Development Bank (ADB), in partnership with the Ministry of Health and Family Welfare and the G-20 Secretariat in India	April 20, 2023	Goa, India
<i>“Global Gathering for Health Care Climate Action – Supporting Health Care on the Race to Zero”</i>	Centers for Chronic Disease Control (India); Climate and Health Alliance (Australia); GroundWork (South Africa); Projeto Hospitais Saudáveis (Brazil); Race to Zero; Health Care Without Harm Europe; Health Care Without Harm East Asia	May 22nd and 23rd, 2023	Pittsburgh, United States
<i>“Expert Consultation on “Climate Resilient and Environmentally Sustainable Supply Chains in the Health Sector”</i>	World Health Organization (WHO) and Unitaid	October 2-4, 2024	Geneva, Switzerland



SPDM's work was also cited alongside other organizations working on decarbonizing the healthcare sector in a scientific paper published in 2024. Karliner, J. (2024). Health Care Takes on Climate Change. Stanford Social Innovation Review, 22(2), 28–37. <https://doi.org/10.48558/QBVG-5H22>



Finally, in 2024, SPDM received the 2024 Climate Champion Award, an initiative of the international organization Health Care Without Harm. The awards ceremony took place on October 30th, during the Healthy Hospitals 2024 Seminar, held in Rio de Janeiro. The award covers three main pillars: mitigation, resilience, and leadership. And in 2023, a new category was launched called the Health Care Climate Champions Awards, or “Climate Champions.” According to the award’s website, “Climate Champions are true leaders with a strong commitment to comprehensive climate action and a dedication to the continuous improvement of sustainable practices across the three pillars of climate action.”

In 2024, only seven organizations worldwide were recognized, with a total of seven organizations recognized in this category worldwide: Associação Paulista para o Desenvolvimento da Medicina – SPDM, Brazil; Canadian Coalition for Green Health Care, Canada; Galician Health Service, Spain; Hunter New England Local Health District, Australia; Roosevelt Institute, Colombia; Netcare Limited, South Africa; Paul Hospital Iloilo, Philippines. Source: <https://greenhospitals.org/climate-champions-2024>

São Paulo Hospital began work in 2024 to reduce its greenhouse gas emissions from nitrous oxide. The nitrous oxide tank was shut down at the end of August 2024 and is requested on demand, as well as in specific cases, in cylinders at points of use.

GRI Content Index

Statement of use	SPDM (Associação Paulista para o Desenvolvimento da Medicina) has reported in accordance with the GRI Standards for the period: January 1, 2024 to December 31, 2024
GRI 1 used	GRI 1: Foundation 2021
GRI Sector Standard that apply to the organization's sector	Not applicable

GRI STANDARD/OTHER SOURCE	CONTENT	LOCATION	OMISSION			GRI SECTOR STANDARD REFERENCE NUMBER
			REQUIREMENT(S) OMITTED	REASON	EXPLANATION	
General Disclosures						
GRI 2: General Disclosures 2021	2-1 Organizational details	Pages 5, 13, 14, 22 e 23				
	2-2 Entities included in the organization's sustainability reporting	Pages 5 e 191				
	2-3 Reporting period, frequency and contact point	Page 5				
	2-4 Restatements of information	Page 5				
	2-5 External assurance	Page 5				
	2-6 Activities, value chain and other business relationships	Pages 13, 15 e 36				
	2-7 Employees	Page 16				
	2-8 Workers who are not employees	Page 18				
	2-9 Governance structure and composition	Page 24				
	2-10 Nomination and selection of the highest governance body	Page 25				
	2-11 Chair of the highest governance body	Page 25				
	2-12 Role of the highest governance body in overseeing the management of impacts	Page 25				
	2-13 Delegation of responsibility for managing impacts	Page 25				
	2-14 Role of the highest governance body in sustainability reporting	Page. 5 e 25				
	2-15 Conflicts of interest	Page 28				
	2-16 Communication of critical concerns	Pages 28 e 33				
	2-17 Collective knowledge of the highest governance body	Page 5				
	2-18 Evaluation of the performance of the highest governance body	Page 23				
	2-19 Remuneration policies	Page 24				
	2-20 Process to determine remuneration	Page 24				
	2-21 Annual total compensation ratio	Page 25				
	2-22 Statement on sustainable development strategy	Page 6				
	2-23 Policy commitments	Pages 28 e 33				
	2-24 Embedding policy commitments	Pages 29 e 33				
	2-25 Processes to remediate negative impacts	Pages 33 e 34				
	2-26 Mechanisms for seeking advice and raising concerns	Pages 30 e 33				
	2-27 Compliance with laws and regulations	Page 30 e 33				
Material Topics						
GRI 3: Material Topics 2021	3-1 Process to determine material topics	Page 9				
	3-2 List of material topics	Page 9				
Training and education						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 133				
GRI 404: Training and Education 2016	404-1 Average hours of training per year per employee	Page 142				
Disease prevention and health promotion / mental health						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 117				
Employment						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 153				
GRI 401: Employment 2016	401-1 New employee hires and employee turnover	Page 154				
	401-2 Benefits provided to full-time employees that are not provided to temporary or part-time employees	Page 153				
	401-3 Parental leave	Page 156				
Humanization						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 98				

Quality of care						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 76				
Patient health and safety						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 85				
GRI 416: Customer Health and Safety 2016	416-1 Assessment of the health and safety impacts of product and service categories	Page 85				
	416-2 Incidents of non-compliance concerning the health and safety impacts of products and services	Page 85				
Occupational health and safety						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 144				
GRI 403: Occupational Health and Safety 2018	403-9 Work-related injuries	Pages 146, 148 e 151				
Patient privacy						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 104				
GRI 418: Customer Privacy 2016	418-1 Substantiated complaints concerning breaches of customer privacy and losses of customer data	Pages 106 e 108				
Anti-corruption (Compliance)						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 27				
GRI 205: Anti-corruption 2016	205-2 Communication and training about anti-corruption policies and procedures	Page 28				
	205-3 Confirmed incidents of corruption and actions taken	Page 33				
Diversity and Equal Opportunity						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 161				
GRI 405: Diversity and Equal Opportunity 2016	405-1 Diversity of governance bodies and employees	Page 167				
Patient experience						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 110				
Environmental education and awareness						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 175				
Technological innovation						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 50				
Non-discrimination						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 172				
GRI 406: Non-discrimination 2016	406-1 Incidents of discrimination and corrective actions taken	Page 173				
Labor/Management Relations						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 158				
GRI 402: Labor/Management Relations 2016	402-1 Minimum notice periods regarding operational changes	Page 158				
Emissions						
GRI 3: Material Topics 2021	3-3 Management of material topics	Page 184				
GRI 305: Emissions 2016	305-1 Direct (Scope 1) GHG emissions	Pages 184 e 185				
	305-2 Energy indirect (Scope 2) GHG emissions	Pages 184 e 185				
	305-3 Other indirect (Scope 3) GHG emissions	Pages 184 e 185				



Relationship of material topics with the Sustainable Development Goals (SDG)

RELATIONSHIP OF MATERIAL TOPICS WITH THE SUSTAINABLE DEVELOPMENT GOALS (SDGs)		
1	Training and education	
2	Disease prevention and health promotion / mental health	 
3	Employment	 
4	Humanization	 
5	Quality of care	  
6	Patient health and safety	  
7	Occupational health and safety	 
8	Patient privacy	
9	Anti-corruption (Compliance)	
10	Diversity and equal opportunity	  
11	Patient experience	
12	Environmental education and awareness	
13	Technological innovation	 
14	Non-discrimination	  
15	Labor/Management relations	 
16	Emissions	

In 2024, the Health Services managed by SPDM were (GRI 2-2):

SUPERINTENDENCE – HOSPITAL SÃO PAULO
HOSPITAL SÃO PAULO
SAÚDE INDÍGENA
DSEI - ARAGUAIA
DSEI - KAYAPÓ - MATO GROSSO
DSEI - KAYAPÓ - PARÁ
DSEI - XAVANTE
SEI - XINGU
SUPERINTENDENCE – EDUCATION
FACULDADE DE CIÊNCIAS DA SAÚDE
CENTROS DE EDUCAÇÃO INFANTIL
AQUARELA
CARROSSEL
CASA DE CRIAR E BRINCAR
IBIRAPUERA
MUNDO INFANTIL
NOVA LUZ
PASSOS DO FUTURO
PEDACINHO DO CÉU
PEQUENOS CONSTRUTORES
PRIMEIRA INFÂNCIA
RECANTO FELIZ

SUPERINTENDENCY OF AFFILIATED UNITS

SPECIALTY CLINIC	AMBULAT MULTIDISC. ESPECIALIZ DO IDOSO-AME IDOSO SUDESTE
	AMBULATORIO MÉDICO DE ESPECIALIDADES - AME IDOSO OESTE
	AMBULATÓRIO MÉDICO DE ESPECIALIDADES DE MOGI DAS CRUZES - AME MOGI
	AMBULATÓRIO MÉDICO DE ESPECIALIDADES JARDIM DOS PRADOS
	AMBULATÓRIO MÉDICO DE ESPECIALIDADES MARIA ZÉLIA - AME MARIA ZÉLIA
	AMBULATÓRIO MÉDICO DE ESPECIALIDADES PSIQUIATRIA - AME PSIQUIATRIA
INTEGRATED MEDICAL SERVICE	SERVIÇO INTEGRADO DE MEDICINA/ CENTRO DE IMAGENS
	SERVIÇO INTEGRADO DE MEDICINA/ CENTRO OFTALMOLÓGICO
REHABILITATION CENTER	CENTRO DE REABILITAÇÃO LUCY MONTORO
	CENTRO DE TECNOLOGIA E INOVAÇÃO PARA PESSOAS COM DEFICIÊNCIA VISUAL
CENTRAL REGULATION OF HEALTH SERVICE OFFERS	
HIGH-COST PHARMACY	AMBULATÓRIO MÉDICO DE ESPECIALIDADES MARIA ZÉLIA - AME MARIA ZÉLIA - FARMÁCIA
	CENTRO ESPECIALIZADO DA ASSISTÊNCIA FARMACÊUTICA - CEAF - CAMPINAS
	CENTRO ESPECIALIZADO DA ASSISTÊNCIA FARMACÊUTICA - CEAF - GUARULHOS
	CENTRO ESPECIALIZADO DA ASSISTÊNCIA FARMACÊUTICA - CEAF - NGA VÁRZEA DO CARMO
	CENTRO ESPECIALIZADO DA ASSISTÊNCIA FARMACÊUTICA - CEAF MOGI DAS CRUZES
	CENTRO ESPECIALIZADO DA ASSISTÊNCIA FARMACÊUTICA - CEAF VILA MARIANA

SUPERINTENDENCY OF AFFILIATED UNITS

HOSPITALS	HOSPITAL CANTAREIRA
	HOSPITAL DAS CLÍNICAS LUZIA DE PINHO MELO
	HOSPITAL DE TRANSPLANTES DR. EURYCLIDES DE JESUS ZERBINI
	HOSPITAL ESTADUAL DE DIADEMA
	HOSPITAL GERAL DE GUARULHOS
	HOSPITAL GERAL DE PEDREIRA
	HOSPITAL GERAL DE PIRAJUSSARA
	HOSPITAL LACAN
	HOSPITAL MUNICIPAL DE BARUERI DR. FRANCISCO MORAN
	HOSPITAL MUNICIPAL DE PARELHEIROS
	HOSPITAL MUNICIPAL E MATERNIDADE DE UBERLÂNDIA - ODELMO LEÃO CARNEIRO
	HOSPITAL MUNICIPAL JOSÉ CARVALHO FLORENCE
	HOSPITAL MUNICIPAL VEREADOR JOSÉ STOROPOLLI - VILA MARIA
	HOSPITAL REGIONAL DE SOROCABA - ADIB DOMINGOS JATENE
	HOSPITAL REGIONAL ALTO TIETÊ
EMERGENCY SERVICES	PRONTO-SOCORRO MUNICIPAL VILA MARIA BAIXA
	PRONTO SOCORRO MUNICIPAL BANDEIRANTES - DR. CAETANO VIRGILIO NETTO
Day Hospital	HOSPITAL DIA – VILA MARIA
Lab	CENTRO ESTADUAL DE ANÁLISES CLÍNICAS ZONA LESTE - CEAC ZONA LESTE
PROJETO REDE	
PRONTOS-SOCORROS	PRONTO-SOCORRO MUNICIPAL VILA MARIA BAIXA
	PRONTO SOCORRO MUNICIPAL BANDEIRANTES - DR. CAETANO VIRGILIO NETTO
Mobile Emergency Care Service	SAMU REGIONAL SÃO JOSÉ DOS CAMPOS
SPDM CONSULTING	

SUPERINTENDENCY OF AFFILIATED UNITS

Healthcare Network of the Technical Supervision of Health – Vila Maria/ Vila Guilherme	AMA/UBS INTEGRADA VILA GUILHERME	UBS CARANDIRU	UBS PARQUE NOVO MUNDO II
	AMA/UBS INTEGRADA VILA MEDEIROS	UBS INTEGRAL IZOLINA MAZZEI / PAI IZOLINA	UBS PAULO GNECCO
	AMA/UBS/ESF JARDIM BRASIL	UBS JARDIM JAPÃO	UBS VILA EDE
	CAPS INFANTO JUVENIL II VILA MARIA/VILA GUILHERME DA VILA	UBS JARDIM JULIETA	UBS VILA LEONOR
Healthcare Network of the Technical Supervision of Health – Butantã	REDE ASSISTENCIAL DA SUPERVISÃO TÉCNICA DE SAÚDE VILA MARIA/VILA GUILHERME	UBS PARQUE NOVO MUNDO I	UBS VILA SABRINA
	AMA PERI PERI	SERVIÇO DE RESIDENCIA TERAPEUTICA II - MISTA	UBS ESF/NASF JARDIM D'ABRIL
	AMA/UBS /ESF JARDIM SÃO JORGE	UBS /ESF REAL PARQUE	UBS RIO PEQUENO
	AMA/UBS /ESF/NASF PAULO VI	UBS /ESF SÃO REMO	UBS VILA BORGES
	AMA/UBS /ESF/NASF JOSE MARCILIO MALTA CARDOSO	UBS /ESF VILA DALVA	UBS VILA SONIA
	CAPS AD III BUTANTÃ	UBS /ESF/NASF JARDIM COLOMBO	UBS/NASF JARDIM BOA VISTA
	REDE ASSISTENCIAL DA SUPERVISÃO TÉCNICA DE SAÚDE BUTANTÃ	UBS BUTANTÃ	UNIDADE HOSPITALAR BUTANTÃ
	SERVIÇO DE RESIDENCIA TERAPEUTICA I - MASCULINA	UBS CAXINGUI	URSI BUTANTÃ

SUPERINTENDÊNCIA OF AFFILIATED UNITS

Mental Health Units	PROJETO AUTISMO VILA MARIANA
	CAISM VILA MARIANA
	CAISM ÁGUA FUNDA
	CENTRO DE ATENÇÃO PSICO-SOCIAL CAPS ITAPEVA
	CLÍNICA DE PSIQUIATRIA - GOIA
	HUB DE CUIDADOS EM CRACK E OUTRAS DROGAS
	UNIDADE RECOMEÇO HELVÉTIA

SUPERINTENDÊNCIA UNIDADES AFILIADAS

Integrated Service Units of the municipality of Uberlândia- North Central Sector	AMBULATÓRIO DE OFTALMOLOGIA	UBS NOSSA SENHORA DAS GRAÇAS
	AMBULATORIO HERBERT DE SOUZA	UBS ROOSEVELT
	CAPS I NAPS INFANTIL	UBS SANTA ROSA
	CAPS II NAPS ADULTO (CAPS NORTE)	UBSF BOM JESUS
	CAPS LESTE	UBSF CRUZEIRO DOS PEIXOTOS
	CAPS OESTE	UBSF JARDIM BRASÍLIA
	CENTRO DE ESPECIALIDADES ODONTOLÓGICAS	UBSF JARDIM BRASÍLIA II
	CENTRO DE REF PRÁTICAS INTEGRATIVAS COMPLEMENTARES EM SAUDE	UBSF MARTA HELENA I
	CENTRO RADIOLOGICO MUNICIPAL	UBSF MARTA HELENA II
	UAI MARTINS DR JOÃO FERNANDES DE OLIVEIRA	UBSF MARTINÉSIA
	UAI ROOSEVELT DR JOSIAS DE FREITAS	UBSF MINAS GERAIS/NOVO UMUARAMA
	UBS BRASIL	UBSF SAO JOSE
	UBS MARTINS	UNIDADE DE ACOLHIMENTO INFANTIL
Integrated Service Units of the municipality of Uberlândia - West Sector	CAPS AD REDE AD	UBSF JARDIM DAS PALMEIRAS I
	PROGRAMA MELHOR EM CASA	UBSF JARDIM DAS PALMEIRAS II
	UAI LUIZOTE DR DOMINGOS PIMENTEL DE ULHOA	UBSF JARDIM DAS PALMEIRAS III
	UAI PLANALTO DR TUBAL VILELA DA SILVA	UBSF JARDIM EUROPA
	UBS DONA ZULMIRA	UBSF LUIZOTE DE FREITAS
	UBS GUARANI	UBSF MANSOUR
	UBS LUIZOTE DE FREITAS	UBSF MIRAPORANGA
	UBS PLANALTO	UBSF MONTE HEBRON
	UBS TOCANTINS	UBSF MORADA NOVA
	UBSF CANAÃ I	UBSF PEQUIS
	UBSF CANAÃ II	UBSF TAIAMAN I
	UBSF JARDIM CÉLIA	UBSF TAIAMAN II



SUPERINTENDENCE SPDM/PAIS

Specialized Care

AMA ESPECIALIDADE JARDIM GUAIRACÁ	CEO II JABAQUARA
AMA ESPECIALIDADE SAPOEMBA	CEO II PIRITUBA
AMA ESPECIALIDADES PERUS	CEO II SAPOEMBA
AMA ESPECIALIDADES VILA DAS MERCÊS	CEO II VILA CARRÃO
AMA ESPECIALIDADES VILA ZATT	CER II PERUS
AMBULATÓRIO NEFROLOGIA PG	CER III PIRITUBA
CEEDI - CENTRO ESPEC ESTÍMULO DESENV INFANTIL	CER III MOEMA
CEMED - SERVIÇO DE ESPECIALIDADE CLÍNICAL E CIRÚRGICAS - DIADEMA	CER II - POLICLÍNICA PASSARÉ
CENTRO CARIOCA DO OLHO	CER II TATUAPÉ
CENTRO DE REFERÊNCIA DE DOR CRÔNICA	CER III SAPOEMBA
CENTRO DE REFERÊNCIA DE DOR CRÔNICA - VILA MARIANA	POLICLÍNICA DR JOÃO P L RANDAL
CENTRO ESPEC. ODONTOL. DIADEMA	POLICLÍNICA Dr. LUSMAR VERAS RODRIGUES
CENTRO OFTALMOLÓGICO DE DIADEMA	POLICLÍNICA REGIONAL IV PASSARÉ
CENTRO OLÍMPICO DE TREINAMENTO E PESQUISA	POLICLÍNICA REGIONAL V – BONSUCESSO
CEO - BOM SUCESSO	URSI SÃO VICENTE DE PAULA
CEO II VILA BERTIOGA	URSI VILA PRUDENTE

SUPERINTENDENCE SPDM/PAIS

Hospital Care

HOSPITAL AMPARO MATERNAL
HOSPITAL INF DRA LÚCIA RIBEIRO
HOSPITAL IRMÃ DULCE
HOSPITAL FEDERAL CARDOSO FONTES
HOSPITAL MATERNIDADE MARIA AMELIA BUARQUE DE HOLANDA
HOSPITAL MUNICIPAL PEDRO II AP 5.3
HOSPITAL NOSSA SRA. CONCEIÇÃO
HOSPITAL DIA / CASA DO PARTO
CASA DO PARTO SAPOEMBA
HOSPITAL DIA FLÁVIO GIANNOTTI
HOSPITAL DIA MOOCA
HOSPITAL DIA VILA PRUDENTE
SP PLUS

SUPERINTENDENCE SPDM/PAIS

Primary Health Care

AMA/ UBS VILA CALIFÓRNIA - ZEILIVAL BRUSCAGIN	CMS CLEMENTINO FRAGA	UBS JARDIM SECKLER
AMA/UBS ÁGUA RASA	CMS CYRO DE MELLO MANGUARIBA	UBS JARDIM SINHÁ
AMA/UBS ANHANGUERA I	CMS DECIO AMARAL FILHO	UBS JOAQUIM ROSSINI / VILA CARIOCA
AMA/UBS JARDIM IPANEMA	CMS EMYDIO CABRAL	UBS LUIZ ERNESTO MAZZONI
AMA/UBS PARI	CMS ERNANI AGRICOLA	UBS MARIA TEREZA
AMA/UBS VILA ORATÓRIO	CMS ERNESTO ZEFERINO TIBAU JR	UBS MASCARENHAS DE MORAES
CF CARLOS NERY DA COSTA FILHO	CMS FAZENDA BOTAFOGO	UBS MILTON SANTOS
CF ADERSON FERNANDES	CMS FLÁVIO DO COUTO VIEIRA	UBS MOINHO VELHO
CF ADOLFO FERREIRA DE CARVALHO	CMS FLORIPES GALDINO PEREIRA	UBS MOINHO VELHO II
CF ADV MARIO PIRES	CMS HAMILTON LAND	UBS MOOCA I
CF ALICE DE JESUS REGO	CMS HARVEY RIBEIRO DE SOUZA FILHO	UBS MORADA DO SOL
CF AMAURI BOTTANY	CMS ITANHANGÁ	UBS MORRO DOCE
CF ANA MARIA CONCEICAO DOS SANTOS CORREIA	CMS JORGE SALDANHA BANDEIRA DE MELLO	UBS NEUSA ROSALIA MORALES
CF BARBARA MOSLEY DE SOUZA	CMS JOSÉ MESSIAS DO CARMO	UBS PARQUE IMPERIAL - PROF MANOEL ANTONIO DA SILVA SARAGOÇA
CF CANDIDO RIBEIRO DA SILVA FILHO	CMS MANOEL ARTHUR VILABOIM	UBS PARQUE MARIA DOMITILA
CF CYPRIANO DAS CHAGAS MEDEIROS	CMS MARCOLINO CANDAU	UBS PARQUE NAÇÕES UNIDAS/SEM TERRA
CF DANTE ROMANO JUNIOR	CMS MARIA APARECIDA DE ALMEIDA	UBS PARQUE REID
CF DEOLINDO COUTO	CMS MÁRIO OLINTO DE OLIVEIRA	UBS PARQUE SÃO LUCAS
CF DEPUTADO PEDRO FERNANDES FILHO	CMS NASCIMENTO GURGEL	UBS PASTORAL
CF DONA ZICA	CMS NEWTON BETHLEM	UBS PIRAPORINHA
CF EDSON ABDALLA SAAD	CMS NOVO PALMARES	UBS PROMISSÃO
CF ENFERMEIRA EDMA VALADAO	CMS OSWALDO CRUZ	UBS PROMORAR
CF ENGENHEIRO SANITARISTA PAULO D AGUILA	CMS PORTUS E QUITANDA	UBS RECANTO DOS HUMILDES

SUPERINTENDENCE SPDM/PAIS

CF ENGENHEIRO SANITARISTA PAULO D AGUILA	CMS PORTUS E QUITANDA	UBS RECANTO DOS HUMILDES
CF EPITACIO SOARES REIS	CMS RAPHAEL DE PAULA SOUZA	UBS REUNIDAS I
CF ERNANI DE PAIVA FERREIRA BRAGA	CMS SALLES NETTO	UBS REUNIDAS II
CF ESTACIO DE SÁ	CMS SANTA MARIA	UBS SACOMÃ
CF ESTIVADORES	CMS SAVIO ANTUNES / ANTARES	UBS SANTA CRUZ
CF FERNANDO ANTÔNIO BRAGA LOPES	CMS SYLVIO FREDERICO BRAUNER	UBS SANTA MADALENA
CF GERSON BERGHER	CONSULTÓRIO ODONTOLÓGICO TCM	UBS SANTO ELIAS
CF HELANDE DE MELLO GONCALVES	CSE LAPA	UBS SERRARIA
CF HELENA BESSERMAN VIANNA	CSE SÃO FRANCISCO DE ASSIS	UBS TEOTONIO VILELA
CF ILZO MOTTA DE MELLO	UBS ÁGUA FUNDA	UBS UNIÃO DAS VILAS DE TAIPAS
CF IVANIR DE MELLO	UBS ALDEIA JARAGUÁ	UBS V FORMOSA I DR ANTONIO DA SILVEIRA E OLIVEIRA
CF JAMIL HADDAD	UBS ALMIRANTE DELAMARE	UBS VILA ALPINA
CF JOAO BATISTA CHAGAS	UBS ALPES DO JARAGUÁ	UBS VILA ARAPUÁ
CF JOSE ANTONIO CIRAUDO	UBS BELENZINHO	UBS VILA BERTIOGA
CF JOSÉ DE SOUZA HERDY	UBS BRÁS	UBS VILA CAIUBA

SUPERINTENDENCE SPDM/PAIS

Primary Health Care	CF JOSÉ NEVES	UBS CENTRO	UBS VILA CAMPESTRE
	CF JOSUETE SANTANNA DE OLIVEIRA	UBS CHE GUEVARA (UBS PARQUE REAL)	UBS VILA CANAÃ
	CF LENICE MARIA MONTEIRO COELHO	UBS CITY JARAGUÁ	UBS VILA DAS MERCÊS
	CF LOURENÇO DE MELLO	UBS COMENDADOR JOSÉ GONZALEZ	UBS VILA EMA
	CF LOURIVAL FRANCISCO DE OLIVEIRA	UBS CONCEIÇÃO	UBS VILA GUARANI
	CF MAESTRO CELESTINO	UBS CUPECÊ - DR. WALDOMIRO PREGNOLATTO	UBS VILA GUMERCINDO
	CF MAICON SIQUEIRA	UBS DOMINGOS MANTELLI	UBS VILA HELOISA
	CF MANOEL FERNANDES DE ARAUJO	UBS DR. OSWALDO MARASCA JÚNIOR	UBS VILA MAGGI
	CF MARCOS VALADAO	UBS EDUARDO ROMANO RESHILIAN	UBS VILA MARIANA
	CF MARIA DE AZEVEDO RODRIGUES PEREIRA	UBS ELDORADO	UBS VILA MORAES
	CF MAURY ALVES DE PINHO	UBS FAZENDA DA JUTA I	UBS VILA NOGUEIRA
	CF MEDALHISTA OLÍMPICO MAURÍCIO SILVA	UBS FAZENDA DA JUTA II	UBS VILA NOVA CONQUISTA
	CF MEDALHISTA OLÍMPICO RICARDO LUCARELLI SOUZA	UBS FORMOSA II	UBS VILA NOVA MANCHESTER
	CF MESTRE MOLEQUINHO DO IMPERIO	UBS Guarani Vargas	UBS VILA NOVA YORK
	CF NÉLIO DE OLIVEIRA	UBS HELIÓPOLIS	UBS VILA PAULINA
	CF OTTO ALVES DE CARVALHO	UBS IACAPÉ - JARDIM PLANALTO	UBS VILA PIRITUBA
	CF PADRE JOSÉ DE AZEVEDO TIÚBA	UBS IGUAÇU	UBS VILA PRUDENTE
	CF PADRE MARCOS VINICIO MIRANDA VIEIRA	UBS INDIANÓPOLIS SIGMUND FREUD	UBS VILA RENATO
	CF RAIMUNDO ALVES NASCIMENTO	UBS INTERATIVA	UBS VILA SANTA CATARINA
	CF SAMUEL PENHA VALLE	UBS JARDIM ABC	UBS VILA SANTO ESTEVÃO
	CF SÃO SEBASTIÃO	UBS JARDIM CANHEMA	UBS VILA SÃO JOSÉ
	CF SERGIO AROUCA	UBS JARDIM CASA GRANDE	UBS VILA ZATT
	CF SÉRGIO VIEIRA DE MELLO	UBS JARDIM CIDADE PIRITUBA	UBS/AMA AMERICANÓPOLIS
	CF SOUZA MARQUES	UBS JARDIM DAS NAÇÕES	UBS/AMA ELISIO TEIXEIRA LEITE
	CF VALERIA GOMES ESTEVES	UBS JARDIM DOS EUCALIPTOS	UBS/AMA GERALDO DA SILVA FERREIRA
	CF WALDEMAR BERARDINELLI	UBS JARDIM GUAIRACÁ	UBS/AMA JARDIM ELBA - HUMBERTO GASTÃO BODRA
	CMS ADELINO SIMOES	UBS JARDIM INAMAR	UBS/AMA JD GRIMALDI
	CMS ALBERTO BORGERTH	UBS JARDIM INDEPENDÊNCIA - HERMENEGILDO MORBIM JUNIOR	UBS/AMA PARQUE ANHANGUERA
	CMS ALICE TOLEDO TIBIRICA	UBS JARDIM IVA	UBS/AMA PARQUE BRISTOL
	CMS ALOYSIO AMANCIO DA SILVA	UBS JARDIM LOURDES	UBS/AMA PERUS
	CMS ALVARO RAMOS	UBS JARDIM PAINEIRAS	UBS/AMA SÃO VICENTE DE PAULA
	CMS AUGUSTO DO AMARAL PEIXOTO	UBS JARDIM PANAMERICANO	UBS/AMA VILA ANTONIETA
	CMS CARLOS CRUZ LIMA	UBS JARDIM RINCÃO	UBS/AMA VILA CARRÃO
	CMS CARMELA DUTRA	UBS JARDIM ROSINHA	UBS/AMA VILA CLARA
	CMS CATTAPR ETA	UBS JARDIM RUYCE	UBS/AMA VILA PEREIRA BARRETO
	CMS CECÍLIA DONNANGELO	UBS JARDIM SÃO SAVERIO AURÉLIO MELLONE	UNIDADE CONSULTÓRIO NA RUA - DIADEMA
	CMS CESARIO DE MELLO	UBS JARDIM SAPOPEMBA	

SUPERINTENDENCE SPDM/PAIS

Psychosocial Care	CAPS AD ESPAÇO FERNANDO RAMOS DA SILVA - DIADEMA	CAPS IJ DIADEMA	SRT LESTE - DIADEMA
	CAPS AD II MOOCA	CAPS IJ II MOOCA	SRT NORTE - DIADEMA
	CAPS AD II SACOMÃ	CAPS IJ II PERUS	SRT PIRITUBA/JARAGUÁ I - FEMININO
	CAPS AD II SAPOEMBA	CAPS IJ II SAPOEMBA	SRT PIRITUBA/JARAGUÁ II - MASCULINO
	CAPS AD III HELIOPOLIS	CAPS IJ II VILA PRUDENTE	SRT PIRITUBA/JARAGUÁ III - MISTA
	CAPS AD III PIRITUBA - CASA AZUL	CAPS IJ III ARICANDUVA	SRT PIRITUBA/JARAGUÁ IV - MISTA
	CAPS ADULTO II ARICANDUVA/FORMOSA	CAPS IJ III HELIÓPOLIS	SRT SAPOEMBA I - MISTA
	CAPS ADULTO II JABAQUARA	CAPS IJ III PIRITUBA	SRT SAPOEMBA II - MISTA
	CAPS ADULTO II PERUS	CAPS INFANTIL II REGIONAL V - Fortaleza	SRT TIPO I JABAQUARA
	CAPS ADULTO II VILA MONUMENTO	CECCO HELIÓPOLIS	SRT TIPO I JABAQUARA II
	CAPS ADULTO III MOOCA	SIAT III HELIÓPOLIS	SRT VILA MONUMENTO
	CAPS ADULTO III PIRITUBA/JARAGUÁ	SRT ARICANDUVA I FEMININO	SRT VILA PRUDENTE I - FEMININO
	CAPS ADULTO III SAPOEMBA	SRT ARICANDUVA II MASCULINO	SRT VILA PRUDENTE I - MASCULINO
	CAPS DIADEMA LESTE	SRT ARICANDUVA III MISTA	UA ADULTO - JABAQUARA
	CAPS DIADEMA NORTE	SRT II IPIRANGA I	UA ADULTO SACOMÃ I- TIPO II
	CAPS DIADEMA SUL OESTE	SRT II IPIRANGA II	

SUPERINTENDENCE SPDM/PAIS

Urgent and Emergency Care	AMA 24H SAPOEMBA	SAMU SANTO ANDRE	UPA LOMBA DO PINHEIRO
	CER CENTRO AP 1.0	UPA BANGU	UPA MOOCA
	CER SANTA CRUZ AP 5.3	UPA BOM JESUS	UPA PERIMETRAL
	COMPLEXO REGULADOR DA CIDADE DO RIO DE JANEIRO	UPA CARRÃO "MASATAKA OTA"	UPA PERUS
	PLANO DE ATENÇÃO MÉDICA CARNAVAL DE RUA DE SÃO PAULO	UPA CENTRAL EMILIO PIRES MAGALHAES	UPA PIRITUBA
	PRONTO ATENDIMENTO DE PARANAPIACABA	UPA CENTRO	UPA SACADURA CABRAL
	PRONTO ATENDIMENTO ELDORADO	UPA CITY JARAGUÁ	UPA SACOMÃ
	PRONTO ATENDIMENTO JARDIM PAINEIRAS	UPA DR CHARLES ANTUNES BECHARA "SAMAMBAIA"	UPA TATUAPÉ
	PRONTO SOCORRO AUGUSTO GOMES DE MATOS	UPA JABAQUARA	UPA VILA LUZITA
	PRONTO SOCORRO HOSPITAL MUNICIPAL DIADEMA	UPA JARDIM SANTO ANDRÉ	UPA VILA MARIANA
	SAMU DIADEMA		

SUPERINTENDENCE SPDM/PAIS

Primary Health Care	CF JOSÉ NEVES	UBS CENTRO	UBS VILA CAMPESTRE
	CF JOSUETE SANTANNA DE OLIVEIRA	UBS CHE GUEVARA (UBS PARQUE REAL)	UBS VILA CANAÃ
	CF LENICE MARIA MONTEIRO COELHO	UBS CITY JARAGUÁ	UBS VILA DAS MERCÊS
	CF LOURENÇO DE MELLO	UBS COMENDADOR JOSÉ GONZALEZ	UBS VILA EMA
	CF LOURIVAL FRANCISCO DE OLIVEIRA	UBS CONCEIÇÃO	UBS VILA GUARANI
	CF MAESTRO CELESTINO	UBS CUPECÊ - DR. WALDOMIRO PREGNOLATTO	UBS VILA GUMERCINDO
	CF MAICON SIQUEIRA	UBS DOMINGOS MANTELLI	UBS VILA HELOISA
	CF MANOEL FERNANDES DE ARAUJO	UBS DR. OSWALDO MARASCA JÚNIOR	UBS VILA MAGGI
	CF MARCOS VALADAO	UBS EDUARDO ROMANO RESHILIAN	UBS VILA MARIANA
	CF MARIA DE AZEVEDO RODRIGUES PEREIRA	UBS ELDORADO	UBS VILA MORAES
	CF MAURY ALVES DE PINHO	UBS FAZENDA DA JUTA I	UBS VILA NOGUEIRA
	CF MEDALHISTA OLÍMPICO MAURÍCIO SILVA	UBS FAZENDA DA JUTA II	UBS VILA NOVA CONQUISTA
	CF MEDALHISTA OLÍMPICO RICARDO LUCARELLI SOUZA	UBS FORMOSA II	UBS VILA NOVA MANCHESTER
	CF MESTRE MOLEQUINHO DO IMPERIO	UBS Guarani Vargas	UBS VILA NOVA YORK
	CF NÉLIO DE OLIVEIRA	UBS HELIÓPOLIS	UBS VILA PAULINA
	CF OTTO ALVES DE CARVALHO	UBS IAÇAPÉ - JARDIM PLANALTO	UBS VILA PIRITUBA
	CF PADRE JOSÉ DE AZEVEDO TIÚBA	UBS IGUAÇU	UBS VILA PRUDENTE
	CF PADRE MARCOS VINICIO MIRANDA VIEIRA	UBS INDIANÓPOLIS SIGMUND FREUD	UBS VILA RENATO
	CF RAIMUNDO ALVES NASCIMENTO	UBS INTERATIVA	UBS VILA SANTA CATARINA
	CF SAMUEL PENHA VALLE	UBS JARDIM ABC	UBS VILA SANTO ESTEVÃO
	CF SÃO SEBASTIÃO	UBS JARDIM CANHEMA	UBS VILA SÃO JOSÉ
	CF SERGIO AROUCA	UBS JARDIM CASA GRANDE	UBS VILA ZATT
	CF SÉRGIO VIEIRA DE MELLO	UBS JARDIM CIDADE PIRITUBA	UBS/AMA AMERICANÓPOLIS
	CF SOUZA MARQUES	UBS JARDIM DAS NAÇÕES	UBS/AMA ELISIO TEIXEIRA LEITE
	CF VALERIA GOMES ESTEVES	UBS JARDIM DOS EUCALIPTOS	UBS/AMA GERALDO DA SILVA FERREIRA
	CF WALDEMAR BERARDINELLI	UBS JARDIM GUAIACÁ	UBS/AMA JARDIM ELBA - HUMBERTO GASTÃO BODRA

SUPERINTENDENCE SPDM/PAIS

CMS ADELINO SIMOES	UBS JARDIM INAMAR	UBS/AMA JD GRIMALDI
CMS ALBERTO BORGERTH	UBS JARDIM INDEPENDÊNCIA - HERMENEGILDO MORBIM JUNIOR	UBS/AMA PARQUE ANHANGUERA
CMS ALICE TOLEDO TIBIRICA	UBS JARDIM IVA	UBS/AMA PARQUE BRISTOL
CMS ALOYSIO AMANCIO DA SILVA	UBS JARDIM LOURDES	UBS/AMA PERUS
CMS ALVARO RAMOS	UBS JARDIM PAINEIRAS	UBS/AMA SÃO VICENTE DE PAULA
CMS AUGUSTO DO AMARAL PEIXOTO	UBS JARDIM PANAMERICANO	UBS/AMA VILA ANTONIETA
CMS CARLOS CRUZ LIMA	UBS JARDIM RINCÃO	UBS/AMA VILA CARRÃO
CMS CARMELA DUTRA	UBS JARDIM ROSINHA	UBS/AMA VILA CLARA
CMS CATTAPR ETA	UBS JARDIM RUYCE	UBS/AMA VILA PEREIRA BARRETO
CMS CECÍLIA DONNANGELO	UBS JARDIM SÃO SAVERIO AURÉLIO MELLONE	UNIDADE CONSULTÓRIO NA RUA - DIADEMA
CMS CESARIO DE MELLO	UBS JARDIM SAPOPEMBA	

SUPERINTENDENCE SPDM/PAIS

Psychosocial Care	CAPS AD ESPAÇO FERNANDO RAMOS DA SILVA - DIADEMA	CAPS IJ DIADEMA	SRT LESTE - DIADEMA
	CAPS AD II MOOCA	CAPS IJ II MOOCA	SRT NORTE - DIADEMA
	CAPS AD II SACOMÃ	CAPS IJ II PERUS	SRT PIRITUBA/JARAGUÁ I - FEMININO
	CAPS AD II SAPOPEMBA	CAPS IJ II SAPOPEMBA	SRT PIRITUBA/JARAGUÁ II - MASCULINO
	CAPS AD III HELIOPOLIS	CAPS IJ II VILA PRUDENTE	SRT PIRITUBA/JARAGUÁ III - MISTA
	CAPS AD III PIRITUBA - CASA AZUL	CAPS IJ III ARICANDUVA	SRT PIRITUBA/JARAGUÁ IV - MISTA
	CAPS ADULTO II ARICANDUVA/FORMOSA	CAPS IJ III HELIÓPOLIS	SRT SAPOPEMBA I - MISTA
	CAPS ADULTO II JABAQUARA	CAPS IJ III PIRITUBA	SRT SAPOPEMBA II - MISTA
	CAPS ADULTO II PERUS	CAPS INFANTIL II REGIONAL V - Fortaleza	SRT TIPO I JABAQUARA
	CAPS ADULTO II VILA MONUMENTO	CECCO HELIÓPOLIS	SRT TIPO I JABAQUARA II
	CAPS ADULTO III MOOCA	SIAT III HELIÓPOLIS	SRT VILA MONUMENTO
	CAPS ADULTO III PIRITUBA/JARAGUÁ	SRT ARICANDUVA I FEMININO	SRT VILA PRUDENTE I - FEMININO
	CAPS ADULTO III SAPOPEMBA	SRT ARICANDUVA II MASCULINO	SRT VILA PRUDENTE I - MASCULINO
	CAPS DIADEMA LESTE	SRT ARICANDUVA III MISTA	UA ADULTO - JABAQUARA
	CAPS DIADEMA NORTE	SRT II IPIRANGA I	UA ADULTO SACOMÃ I- TIPO II
	CAPS DIADEMA SUL OESTE	SRT II IPIRANGA II	

SUPERINTENDENCE SPDM/PAIS

Urgent and Emergency Care	AMA 24H SAPOPEMBA	SAMU SANTO ANDRE	UPA LOMBA DO PINHEIRO
	CER CENTRO AP 1.0	UPA BANGU	UPA MOOCA
	CER SANTA CRUZ AP 5.3	UPA BOM JESUS	UPA PERIMETRAL
	COMPLEXO REGULADOR DA CIDADE DO RIO DE JANEIRO	UPA CARRÃO "MASATAKA OTA"	UPA PERUS
	PLANO DE ATENÇÃO MÉDICA CARNAVAL DE RUA DE SÃO PAULO	UPA CENTRAL EMILIO PIRES MAGALHAES	UPA PIRITUBA
	PRONTO ATENDIMENTO DE PARANAPIACABA	UPA CENTRO	UPA SACADURA CABRAL
	PRONTO ATENDIMENTO ELDORADO	UPA CITY JARAGUÁ	UPA SACOMÃ
	PRONTO ATENDIMENTO JARDIM PAINEIRAS	UPA DR CHARLES ANTUNES BECHARA "SAMAMBAIA"	UPA TATUAPÉ
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	SAMU DIADEMA		

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