



INTEGRATED ANNUAL REPORT 2022



A.C. Camargo
Cancer Center
Especializado em Vida



CONTENTS

About the Report..... 4

Message from the Administration..... 5

1 Specialized in life 9

Profile..... 9

Cancer Center Model..... 11

2 How we create value 19

A.C.Camargo value creation by type of capital.. 19

Institutional commitments for 2025 22

Vision of the future for healthcare
and oncology 24

Highlights 2022 26

3 Governance and strategy 27

Governance structure 27

Strategic Plan for 2023-2025..... 36

Balanced scorecard 38

Evolution in the material topics 39

Ethics, transparency, and compliance..... 43

Risk management..... 45

Communication channels..... 49

4 Integrated patient care 50

Overview 50

Personalized oncology: integration of patient
care and research 51

Quality of patient care 53

Patient-centered care 54

Patient experience 58

Engagement actions 59

Technology at the service of experience..... 60

Innovation 61

5 Specialized cancer knowledge 62

Education 62

Research 69

6 A.C.Camargo workforce 74

A workforce specialized in life..... 74

The employee journey 81

7 Links with society 86

Partnerships to advance in healthcare 86

Social responsibility and impact 88

8 Sustainability platform 90

Evolution in the material topics 90

Environmental indicators 94

9 Financial sustainability 98

Financial performance 98

Economic and financial management 100

Investments 101

Financial resources for research..... 102

10 Indicators 104

GRI content list..... 104

SASB content list..... 110

A.C.Camargo indicators 111

SDG correlations 114

11 Assurance letter 116

12 Credits 118



ABOUT THE REPORT

GRI 2-3 | 2-5 | 2-14

It is with great satisfaction that we present to our employees, partners, public bodies, local communities and other interested parties, the results achieved in the period of **January 1st to December 31st, 2022.**

For the preparation of this edition of our Integrated Annual Report*, we have utilized the main international sustainability management and reporting guidelines published by the Global Reporting Initiative (GRI) and the Sustainability Accounting Standards Board (SASB). In addition, for our patient care, education, and research practices, we monitor our own indicators, which allow us to assess our performance in the healthcare ecosystem. The symbols GRI XXX-X and SASB XX-XX-XX refer to the respective indicators, and a complete list of indicators can be found in Chapter 10.

Furthermore, we have adopted the recommendations of the International Integrated Reporting Council (IIRC) for integrated reporting, by describing the connections between the various types of capital that underly our activities and which enable us to create value and support the institution's long-term business continuity. The report also presents our efforts to contribute to the achievement of the United Nation's Sustainable Development Goals (SDGs) for 2030.

The preparation of the report was supervised by A.C.Camargo's Institutional Relations and Sustainability and Marketing and Communication teams, and its content was validated by the organization's senior management. After being submitted to a process of independent external assurance by KPMG, the report was approved by the Board of Trustees.



Types of Capital for Integrated Reporting



**Financial
Capital**



**Human
Capital**



**Intellectual
Capital**



**Manufactured
Capital**



**Natural
Capital**



**Social
Capital**



**Relationship
Capital**



If you have any questions or suggestions regarding the information contained in the report, please contact us by email at: relatorio_sustentabilidade@accamargo.org.br.

* REPORT WAS BASED ON THE TECHNICAL GUIDELINE CPC 09 FOR THE PREPARATION OF AN INTEGRATED REPORT PUBLISHED BY THE INTERNATIONAL INTEGRATED REPORTING COUNCIL (IIRC), WITH NO OMISSIONS.



MESSAGE FROM THE ADMINISTRATION

GRI 2-22



The institution has a history of almost 70 years and has always been firmly oriented by its central purpose of caring for each patient under its responsibility and guided by solid institutional values. In this context, the year 2022 was marked by a process of reflection and understanding about our roles in the healthcare sector, and in society. During the year we undertook an in-depth look at the institution and the dynamics of the oncology market and, based on the results, prepared a strategic plan, and defined commitments for the coming years.

This process brought together the knowledge of our senior management and workforce and the results will allow us to move forward, with even more determination, towards the objective of offering treatments with better clinical outcomes to our cancer patients, disseminating our practices and specialized knowledge in oncology and, through partnerships, positively influencing the oncology and healthcare markets.

In this Integrated Annual Report, we have presented our perspective on the **value created by A.C.Camargo, the institutional commitments for 2025 and a vision of the future of oncology and healthcare in Brazil**, explaining the collective thinking that permeates our activities and on which this integrated report was built. We have disclosed this information to our stakeholders with the aim of contributing by example to improving market reporting practices and because we are confident

that this will bring the institution closer to its stakeholders enabling us all to evolve together to achieve our purpose.

Our knowledge transforms

In order to understand how we create value for society and our mission for the future, in 2022, we dedicated ourselves to analyzing the healthcare value chain ecosystem and to understanding the challenges of each of its components. We also undertook detailed research to evaluate the epidemiological trends of cancer in Brazil.

The main challenges identified were a higher frequency of cancer cases, costs increasing faster than inflation and a bottleneck in the payment sources. Therefore, in 2022, to maintain our commitment to innovate in order to develop the nation's expertise in oncology, we approved a series of programs and projects that went beyond institutional sustainability, and which will be executed between 2023 and 2025.

These initiatives seek to contribute to the transformation and sustainability of the healthcare sector, with the aim of disseminating the knowledge we have accumulated in our almost 70 years of existence. These strategic projects have been integrated to meet the main challenges of Brazil's oncology ecosystem, while also enhancing the A.C.Camargo brand as a protagonist in the national oncology scene.

And, as part of this mission to promote a process of transformation, we have challenged ourselves to make a positive impact on **500 thousand lives per year** through treatments, services, courses, research, and the dissemination of knowledge to society. To achieve this challenge, we will need to count on contributions from a wide variety of partners.



Specialized in life

The brand name *A.C. Camargo Cancer Center - Especializado em Vida* (A.C. Camargo Cancer Center - Specialized in Life), which was adopted in early 2022, was designed to transmit, to both internal and external stakeholders, our differentiated approach of offering each patient a personalized, analytical, and propositional approach to care in accordance with their individual needs.

Cancer does not define our patients. And we, who have always taken an integrated approach to patient care, needed to express this concept in our brand. It is our guarantee and assurance that our best efforts will be applied to each person, listening to their anxieties and fears. It is helping them in daily achievements, during and after treatment, and personalizing the search for their well-being and social reintegration.

We were challenged by the fact that, as the number of cases of Covid-19 declined, there was a substantial increase in the number of cancer patients with a late diagnosis and greater complexity seeking treatment at our institution. Despite the increase in the number of patients compared to that initially planned, we succeeded in attending them all, and at the high standard expected of a cancer center, with its focus on the high quality of patient care and the safety of our patients and workforce.

In 2022, the environment unique to a cancer center was experienced by more than 90 thousand inpatients. Also, a further 300,000 outpatient and emergency attendances were carried out, in which patients were able to benefit from our integrated model in the Reference Centers. Our differentiated level of service was confirmed by a Net Promoter Score (NPS) of 89.6 in a patient satisfaction survey.

Advances in Patient Care

We have many reasons to be proud! In 2022, we made progress in establishing the tumor Reference Centers as business units and in implementing their infrastructure. We also recorded improvements in the quality of short and long-term clinical outcome indicators, in processes, and in the financial results achieved. In addition, we invested approximately R\$120 million in physical infrastructure, equipment, and in the launching of new products and services.

We inaugurated our Immunization Center, which is important for preserving the health of patients due to their increased vulnerability during their treatment. Furthermore, we modernized the Endoscopy and Rehabilitation sectors, which now occupy larger areas and have state-of-the-art equipment, for greater comfort and efficiency in care. The Reference Center for Pediatric Tumors was upgraded in terms of infrastructure, processes, and staff, in order to enhance our partnership with the Hospital Infantil Sabará (Sabará Children's Hospital). During the year, it was possible to observe the benefits from this integration, through the increase in cases treated, and the satisfaction of staff and family members. Today, the partnership between the A.C. Camargo Cancer Center and the Hospital Infantil Sabará offers the best infrastructure, availability of qualified staff and the most efficient equipment to treat the most complex cases of childhood cancer.

Advances in Education and Research

Another factor that differentiated A.C. Camargo in the market was the expansion of the efforts of our areas for education and research in disseminating knowledge in terms of both increased content and the larger number of people reached. In the education area, we increased the number of courses made available to the market in both digital and face-to-face platforms. In research, we had another year with a significant number of articles published in scientific journals. We also increased the



number of clinical trials, thereby benefiting patients, particularly in the area of our pioneering clinical research using CAR-T cell therapy.

By integrating patient care, research, and education we can innovate and develop talent, thus improving the skills of both our clinical and multidisciplinary teams. These cancer specialists come from all over Brazil and are in all stages of their careers. All this demonstrates the strength of our cancer center model in offering the best outcomes for patients and for society.

Innovation in products and services

The new immunotherapy approach using CAR-T cells is an innovative product with great potential. A.C. Camargo is one of only four institutions in Brazil accredited to work with this technique. We provided specific training for our clinical staff for the infusion of the first cell-therapy product in the institution's history. In addition to participating in a Phase 3 clinical trial, we were also at the forefront by opening the first Brazilian clinical trial using CAR-T for cases of newly diagnosed multiple myeloma. The use of this technique could replace the long journey of chemotherapies and bone marrow transplantation to which these patients are currently submitted. The use of CAR-T cells represents an unprecedented scientific advance and evolution in oncology. It requires an infrastructure of the highest complexity, which raises concerns about the treatment costs for the entire healthcare value chain. Inspired by the hope of a cure, even in the most advanced cases, we are dedicated to finding balanced payment models that will ensure access for all patients who need this type of treatment.





Our social impact capability

We understand A.C. Camargo's potential to reduce the incidence of cancer in the Brazilian population through education, training, access to prevention and treatment. For this reason, we reformulated the A.C. Camargo Social Impact Program in order to increase its geographic coverage, and the number of beneficiaries, by actions based on the following three pillars.

The first pillar is our agreement with the Municipal Health Department of São Paulo. Together, we redesigned the flow of SUS referrals for emergency care to focus on providing priority oncological care for these patients.

The second pillar is the Dona Carolina Tamandaré Program, which supports the survivors of childhood cancer who are in situations of social vulnerability and aims to promote their social reintegration and employability. We expanded this scope of our activities in 2022, which included pedagogical, psychological, and social support for these patients. In this way, we are contributing with the preparation of children to be productive adults in society.

The third pillar is the innovative A.C. Camargo Mission Program, which aims to contribute to society with technical, technological and management support for cancer prevention, as well as supporting municipalities that present major challenges or opportunities for improvement in their public oncology services. The program is composed of two fronts. Firstly, it will train

employees to meet the challenges for the accelerated evolution in cancer treatment within the available resources; secondly, it will provide training courses in cancer prevention for the population and healthcare practitioners, in all regions of Brazil.

We believe that, in this way, we will be contributing to the dissemination of knowledge throughout the oncology value chain and to the evolution of healthcare at the national level.

Our appreciation and thanks

We are an institution with a workforce of about five thousand people, all specialized in life. We thank each one of them for their dedication and the achievements we have reached together.

We also thank the members of the Board of Trustees for their important contributions.

To our patients, their family members and society, we would like to express our gratitude for the trust placed in our work and in our mission to maximize the opportunities for preserving life.

To our partners, suppliers, public bodies, volunteers, and local communities, we are grateful for yet another period of progress in fulfilling our mission of providing excellent care for each patient.

JOSÉ ERMÍRIO DE MORAES NETO

Chairman of the Board of Trustees

JOSÉ HERMÍLIO CURADO

Vice-Chairman of the Board of Trustees

VICTOR PIANA DE ANDRADE

CEO



1

RELATED CAPITALS



SPECIALIZED IN LIFE

PROFILE

GRI 2-1

With its 69 years of history, accumulated knowledge, and dedication to its patients, in 2022, A.C.Camargo maintained a leading position in oncology in Brazil. Throughout this trajectory, the institution has continually evolved and today its cancer model has been recognized as an international reference in the integration of patient care, education and research in oncology.

A.C.Camargo Cancer Center is a solid institution that offers advanced treatments, achieves high survival rates, and seeks to provide its patients with a full and productive treatment routine, with quality of life.

Care for each patient is a constant concern throughout the oncological journey, from diagnosis to rehabilitation. We know that each oncology journey is unique and that each type of cancer presents specific challenges. For this reason, the institution has established 12 specialized Reference Centers (RC), with specific protocols for each type of tumor.

For us, the patient always comes first. Caring is A.C.Camargo's essential purpose. Caring for each person and for everyone. Caring is synonymous with generating benefits for society.

Our purpose

**Fight cancer,
one patient at a time.**

Institutional values



Humanity



Sustainability



Ethical behavior



Resolution



Knowledge



Patient-centered
focus



Innovation



We are specialized in life

We seek to provide more time in your life,
and more life in your time

www.especializadoemvida.org.br



Network of units

GRI 2-1 | 2-2 | ACC 38

Our activities are distributed in a network of seven units located in the city of São Paulo (SP). The units occupy a combined area of almost **100 thousand square meters** and are dedicated to patient care, research, education, and administration.

Operating structure

GRI 2-1 | 2-2 | ACC 17 | 38

7 Units 5 patient-care units 1 administrative unit 1 research unit	3 Surgical centers (Antônio Prudente, Pires da Mota and Tamandaré) 1 Outpatient surgery center (Pires da Mota) 24 Operating rooms 369 Beds in use	63 Infusion stations distributed in two centers: 38 at the Antônio Prudente Unit and 25 at the Pires da Mota Unit 184 Consulting rooms
--	--	---

Certifications

Our Antônio Prudente and Tamandaré units have obtained international certifications that attest to the excellence of the institution's environmental management systems, governance, and best practices in attendance.



Qmentum
International
Diamond Level



ISO 14001:2015*

* THE RENEWAL OF ISO 14001 WAS POSTPONED FROM DECEMBER 2022 TO FEBRUARY 2023.



CANCER CENTER MODEL



GRI 2-1 | 2-2

The cancer center model is based on the concept of the integration of the actions in **patient care, education, and research** in oncology. The advantages of this model are:

- higher survival rates and improved quality of life;
- patient follows an oncological journey, with integrated protocols, receiving the best care, from the best specialist, at the right time, without wasting resources or time;
- solutions focused on the patient experience;
- agility in the routines, with access to exams, consultations, and therapies in one place;
- specialized multidisciplinary team, with a coordinated and optimized performance;
- combined analysis of clinical outcomes and costs in the search for strategies to increase value creation for patients, payment sources and the institution;
- solid knowledge base in cancer, disseminated by the education area;
- access to innovative medicines and state-of-the-art technologies, even in more complex cases, which ensures the best results for each patient.

These factors make all the difference for patients and staff who, working together, can overcome cancer.



PATIENT CARE

- Prevention
- Diagnosis
- Treatment
- Rehabilitation
- Follow-up
- Survivorship

We offer integrated and humanized patient care for high-complexity oncological cases with a constant focus on the patient's needs and safety.



EDUCATION

- Free courses
- *Sensu Stricto* postgraduate programs
- Medical and multidisciplinary residencies
- Scientific initiation
- Hospital school
- Corporate university
- Scientific events

We train specialists from, and for, all regions of Brazil, preparing them to disseminate knowledge and contribute to the evolution of the fight against cancer. The presence of an in-house area for education in the institution guarantees the excellence of our practitioners.

CANCER CENTER



RESEARCH

- Basic
- Clinic
- Translational
- Epidemiological

We are an important private cancer research center in Brazil, where doctors and scientists work in an integrated manner to develop research that will be applied in the future of oncology, through national and international partnerships.





Reference Centers – RC

ACC 1 | 8 | 42

The 12 Reference Centers are structured by type of tumor. They are attendance units with the appropriate infrastructure and specialized clinical protocols for each line of treatment. The RCs offer personalized and humanized care, in which patients receive an individual oncological navigation program, and are accompanied by a nurse specialized in that type of tumor. This approach facilitates the transition between specialties throughout the patient's long and complex journey, and provides support for ensuring compliance and efficiency in carrying out the therapeutic plan. The evolution of the cancer center model combined with the organization of treatment by RC, leads to better outcomes due to the in-depth knowledge of the practitioners who work in each center and the care dedicated to the particularities of each type of cancer.



New patients by Reference Center



HEAD AND
NECK TUMORS

2,584



SKIN
TUMORS

2,441



BREAST
TUMORS

2,273



UROLOGICAL
TUMORS

1,718



GYNECOLOGICAL
TUMORS

1,293



UPPER DIGESTIVE
TUMORS

1,032



PEDIATRIC
TUMORS

939



COLORRECTAL
TUMORS

837



HEMATOLOGICAL
NEOPLASMS

635



LUNG AND
CHEST TUMORS

496



SARCOMA AND
BONE TUMORS

453



CENTRAL NERVOUS
SYSTEM TUMORS

181

PATIENTS NOT LINKED
TO A SINGLE RC

2,183

17,065
TOTAL OF NEW PATIENTS



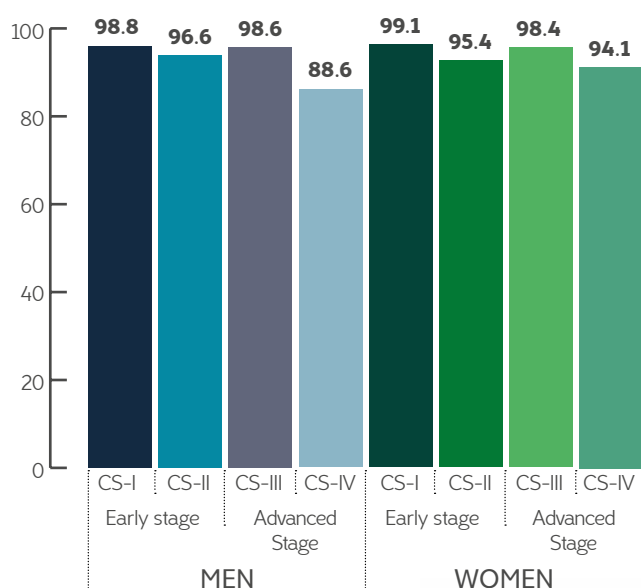
Survival rate

ACC 50

Our experience with the cancer center model is that it enables clear and significant gains for patients in terms of survival rates and quality of life. This can be demonstrated in practice by measuring the probability that a patient will be alive five years after diagnosis, and this is known as the survival rate.

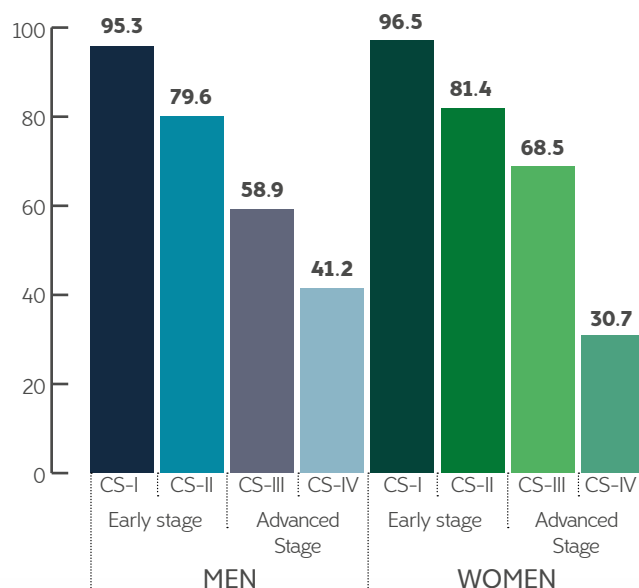
HEAD AND NECK TUMORS RC

Papillary thyroid cancer (C73)



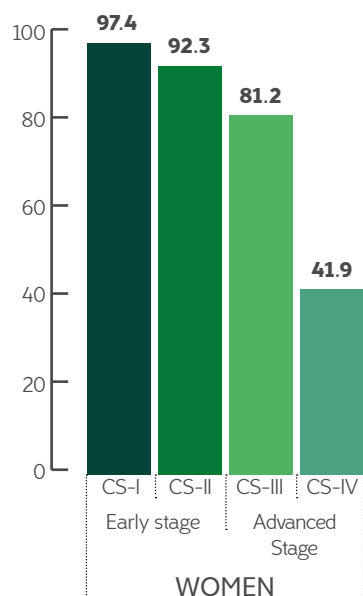
SKIN TUMORS RC

Skin melanoma (C43)



BREAST TUMORS RC

Invasive ductal carcinomas of the breast (C50)



Based on the guidelines of the Union for International Cancer Control (UICC), the cancer clinical stage (CS) can be characterized by:

Stage I: disease localized in the organ (local disease);

Stage II: disease advances beyond the organ, but does not yet extend to other regions (locally advanced disease);

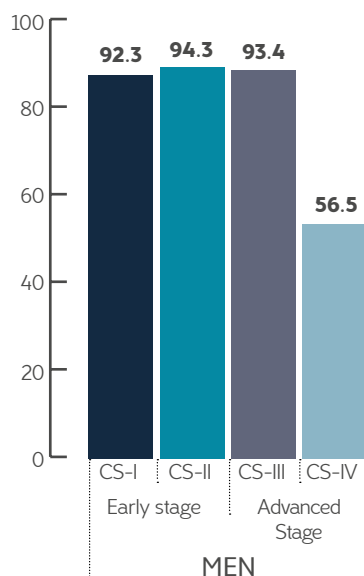
Stage III: more advanced disease, but not yet affecting distant organs (loco-regional disease). Lymph nodes around the organ are usually affected;

Stage IV: disease advances to distant organs (metastatic disease).



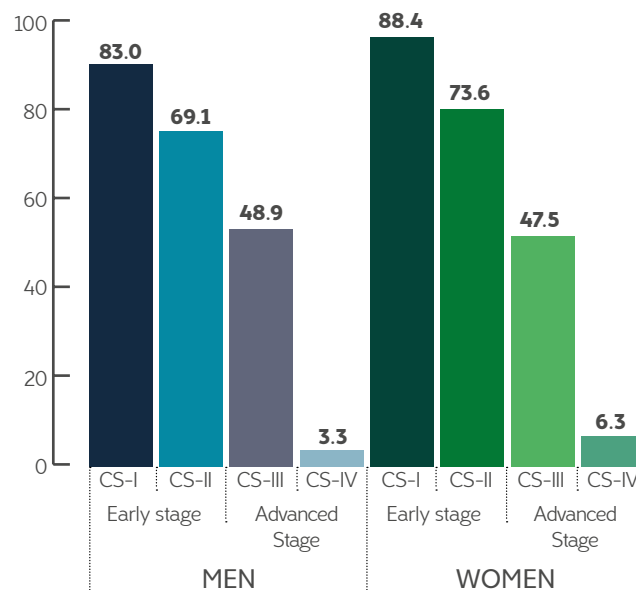
UROLOGIC TUMORS RC

Prostate adenocarcinomas (C61)



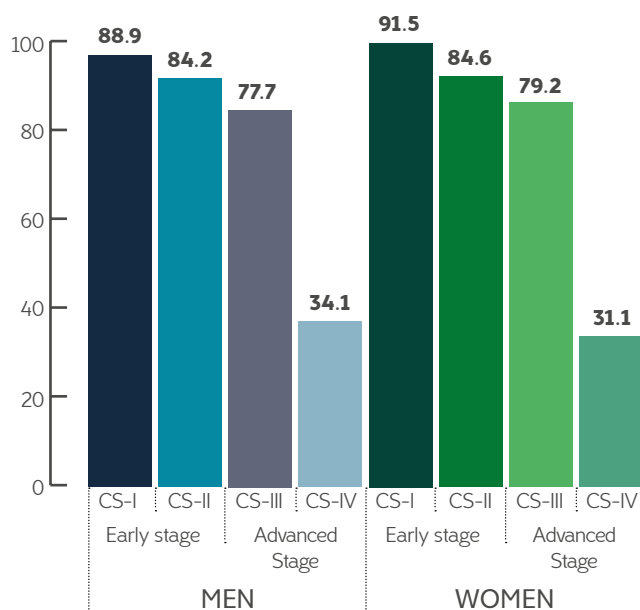
UPPER DIGESTIVE TRACT TUMORS RC

Stomach adenocarcinomas (C16)



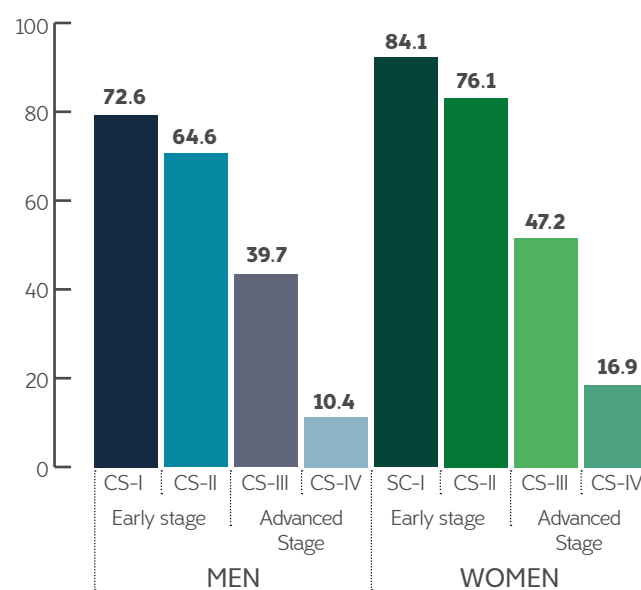
COLORRECTAL TUMORS RC

Colon and rectal adenocarcinomas (C18-C20)



LUNG AND THORAX TUMORS RC

Lung adenocarcinomas (C34)*



* ADENOCARCINOMA IN LUNG (C34) STAGES I AND IV:
LOG-RANK TEST BETWEEN MEN AND WOMEN, P<0.05



In the 2021 report (<https://accamargo.org.br/institucional/relato-anual-integrado>), we presented the results of the A.C. Camargo Cancer Center for the 5-year survival rates* (follow-up period) for new cases of cancer diagnosed from 2012 to 2017. This year, we have expanded the data series to include diagnoses from 2000 to 2017, organized by type of cancer, gender, and cancer clinical stage** (CS), as shown in the graphs above. Based on the consolidated data from 2000 to 2017, we found that patients with the initial clinical stage of cancer (CS I) had a survival rate of between 80 and 90%, a high cure rate for most types of tumors, except for lung and chest tumors. The probability of patients diagnosed with breast cancer to survive after five years reached 97.4%. The thyroid tumor treatments also showed a high degree

of success, with results of 99.1% for women and 98.8% for men. On the other hand, in the case of lung cancer, a type of tumor that is generally more aggressive to the body, this rate was 72.6% for men but significantly higher for women, reaching 84.4%. This was the only tumor type with significant variation in outcomes between men and women. The five-year survival rate was lower for cancers in more advanced clinical stages (CS III and IV), except for the papillary thyroid carcinoma, which showed similar results in the advanced stages for both genders. From the point of view of the public health system **the most advanced stage tumors have a larger impact on society** due to the greater probability of after-effects resulting in more complex treatments, and leading to increased financial and social impacts.

* THE SURVIVAL TIME WAS CALCULATED AS THE DIFFERENCE BETWEEN THE DATE OF DIAGNOSIS AND THE DATE OF DEATH (FOR ANY REASON) OR THE DATE OF LAST INFORMATION. THE SURVIVAL RATES WERE CALCULATED USING THE KAPLAN-MEIER METHOD AND THE PROBABILITIES WERE ESTIMATED FOR 60 MONTHS.

** IT DESCRIBES THE EXTENSION OF THE NEOPLASM AT THE TIME OF DIAGNOSIS, WHICH ALLOWS FOR THE PROPER PLANNING OF THE PATIENT'S TREATMENT, BECAUSE EARLIER STAGES (SHORTER EXTENSIONS) HAVE A BETTER CHANCE OF CURE.

Based on the survival rate results, we can highlight the importance of a diagnosis in the early stages of a cancer. In the more advanced, high-complexity stages of cancer, access to treatment in a cancer center becomes the main differential in improving the patient's survival rate and quality of life.



You can follow our results in oncology in the **Cancer Observatory Report**.



Specialized in Life Campaign

ACC 39

The “Specialized in Life” Campaign was launched to demonstrate the **A.C.Camargo perspective**, based on our almost 70 years of experience, on this phase of life for people suspected or diagnosed with cancer and their families, and how **we prepare ourselves to care** for more than 90,000 patients a year.

This campaign aimed to strengthen the institution’s brand in the perceptions of both internal and external stakeholders. The campaign included the launch of our new positioning “Specialized in Life” and a video manifesto (<https://youtu.be/asjj6zRO46E>).

Impact generated



102 million views

Open, corporate and cable TV, social networks, street advertising and the media



995 thousand visits to the website

www.especializadoemvida.org.br



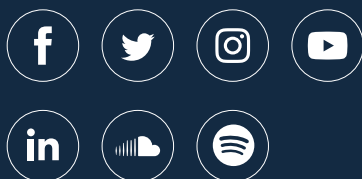
15 million views on social networks

YouTube, LinkedIn, Instagram, Facebook and Twitter



933 appointments and exams were pre-scheduled

For more information on “Specialized in Life” please **follow our social networks**



United around each patient
United around every family



2

RELATED CAPITALS



HOW WE CREATE VALUE

A.C.CAMARGO VALUE CREATION BY TYPE OF CAPITAL

GRI 2-24 | 201-1

In our 69 years of history, we have created value for society, both inside and outside the institution's walls. A.C. Camargo was founded with the mission to deliver value to society and since then we have faithfully maintained our commitment to this mission and institutional purpose. Each employee and partner working with the institution also shares this vision. By understanding our important role in oncology and in the Brazilian healthcare sector, **we have adopted the mission of generating value for society as a guiding principle.** In 2022, this mission was expressly incorporated in the guidelines of our strategic plan for the coming years.



TYPES OF CAPITAL FOR THE INTEGRATED REPORT 2022

FINANCIAL

- Revenue from a variety of sources
- Investments in employees, infrastructure, technology, and innovation in healthcare
- R\$17 million invested in basic, clinical, and translational research (84% from own resources and 16% from national and international partnerships)
- Investments by society in innovation and education
- Resources from funding agencies for education and research
- Financial resources donated by individuals and companies to projects of specific interest
- Management of the Social Impact and Evolution Reserve (RISE)

HUMAN

- Development and retention of employees in all the different areas
- Promotion of a comprehensive healthcare approach, and well-being and quality of life for patients and employees
- Multidisciplinary team with 3,717 specialized own employees
- 430 third-party staff
- 755 doctors in the clinical staff and multidisciplinary team
- 380 residents and students
- 60 doctor-researchers
- 15 scientists

INTELLECTUAL

- Initiatives aimed at improving patient journey predictability, cost-effectiveness and business transformation in healthcare and oncology
- Routines based on protocols and scientific evidence
- Creation and dissemination of technical knowledge in oncology
- Environment of innovation and partnerships with startups for advances in diagnosis, treatment, and patient experience

MANUFACTURED

- Strategic partnerships to optimize hospital resources
- Network of attendance units
- High-technology hospital complex integrated with outpatient units
- International Research Center (CIPE)
- Clinical Research Support Center (CAPEC)
- Modern technological infrastructure
- 12 Oncology Reference Centers
- 24 operating rooms
- Rehabilitation structure

NATURAL

- Renewable natural resources
- Non-renewable natural resources
- Matrix environmental management system and working group dedicated to the topic

SOCIAL AND RELATIONSHIP

- Relations with cancer patients and their companions
- Partnerships with public entities, companies from many different sectors, healthcare operators and service providers, educational institutions, third-sector organizations, network of cancer centers, important national and international institutions in oncology, and associations and entities representing the healthcare and oncology sectors
- Relations with local communities and partner doctors
- Interaction with social investors in healthcare
- Provision of services to several market segments
- Patient safety culture



A.C. Camargo
Cancer Center

Especializado em Vida

OUR GUIDING PRINCIPLES

- Purpose
- Institutional values
- Vision for the future of oncology and healthcare

HOW WE CREATE LONG-TERM VALUE

EXTERNAL BUSINESS IMPACTS (risk management)

Sector legislation and regulation

Recent political changes

Healthcare market dynamics

Macroeconomic questions



HOW WE CREATE LONG-TERM VALUE

VALUE CREATION IN 2022

GOVERNANCE

- Corporate structure
- Strategic planning
- Social impact responsibility
- Executive and advisory committees
- Institutional policies and codes
- Risk management and institutional and patient care opportunities
- Transparency

BUSINESS MODEL

- Decisions based on scientific evidence and market data
- Integrated cancer center model – patient care, education, and research
- Tumor Reference Centers
- Safe patient care process and standardized protocols
- Permanent body of clinical staff
- Value partnerships
- Healthcare innovation
- Patient-centered focus and experience
- Concept of oncological health

FINANCIAL

- Application of resources with social impact
- Projects in patient care, innovation, education, research, and social impact financially supported by individuals and companies
- R\$1.53 billion in net revenue
- R\$719.5 thousand in value added distributed to the institution, employees, and society

HUMAN

- Development of employee technical and leadership skills
- Senior management succession plan
- Multicriteria model for the remuneration of the clinical staff that recognizes their training and dedication to the institution
- Diversity and inclusion actions (launching of affinity groups and adherence to the Empowering Refugees Seal)
- Engagement actions with patients (Patient Consulting Council, Perception Forums and Patient Experience Week), partner doctors and society (Specialized in Life Campaign)
- 1,025 new hires
- 20 hours of training per employee
- 48 researchers trained in the institution, graduated during the year
- 88 medical and multidisciplinary residents graduated during the year

INTELLECTUAL

- Encouraged entrepreneurs and startups working on healthcare solutions through partnerships aimed at developing innovations in technology and healthcare.
- Organization of the José Eduardo Ermirio de Moraes Awards for innovations in preserving life to encourage initiatives in promoting interdisciplinary knowledge and innovation
- Creation of partnerships to disseminate knowledge in clinical and operational management
- 48 theses and dissertations in oncology
- 119 open training courses
- 82 clinical trials under development
- 111 completed projects
- 268 scientific articles published in 2022
- 286 professionals trained in CAR-T cell therapy
- Postgraduate course with a CAPES Score of 6 (2017-2020)
- 48 practitioners trained in postgraduate studies
- 154 students studying in postgraduate school (129) and scientific initiation (25)
- 98 graduates in residencies and fellowships, with 24 medical residents integrated into the clinical staff

SOCIAL AND RELATIONSHIP

- Oncology solutions for the Brazilian population
- Impact on thousands of lives through the dissemination of knowledge on prevention, diagnosis, quality of life and survival rates in cancer treatment
- Dissemination of good practices and quality information
- Collaborative institutional partnerships to promote actions in patient care, innovation, education, and research
- Access for high-complexity patients to treatment with disruptive therapies in oncology, such as CAR-T cells
- Relations with 90,000 patients in oncology journeys during the year, 17,000 of which were new patients
- 295,212 outpatient attendances
- 22,746 emergency attendances
- Several partnerships signed in patient care, education, and research
- Dissemination of knowledge to employees and practitioners: Cancer Observatory and Next Frontiers to Cure Cancer Congress
- Dissemination of knowledge to society through podcasts, webinars, magazines, and the video library
- 2,558 suppliers
- R\$833.5 million spent on hospital and medicinal supplies
- 155 children and adolescents undergoing cancer treatment were supported in their studies
- 13 families in social vulnerability situations were assisted

MANUFACTURED

- Welcoming patients and their companions into a humanized environment, providing comfort, accessibility, and ergonomic seating
- Reformulation of the Pediatric Tumors RC
- Endoscopy expansion
- Revitalization of the Rehabilitation area
- New linear accelerator in Radiotherapy
- Initiation of CAR-T cell therapies
- Digital channels made available to patients
- High-performance computer to enhance processing and streamline data analysis
- R\$119.5 million invested in infrastructure, technology, and equipment

NATURAL

- Seven environmental indicators with annual targets
- 1,430 tons of waste generated (-11% vs. 2021), 32% of which was recovered
- 88.6 thousand GJ of energy consumed (-1.4% vs. 2021), 11% of which was from fossil fuels
- 8.5 thousand tCO₂e (98% Scope 1)
- 26,000 reams of A4 paper used (-21% vs. 2021), and a 13% reduction in printed pages vs. 2021.



INSTITUTIONAL COMMITMENTS 2025

In 2022, as a result of the elaboration of the strategic plan and a better understanding of our value creation model, we defined A.C. Camargo's institutional commitments, organized by types of capital and positive impacts identified for each stakeholder group. In this report, we have disclosed them publicly as a way of demonstrating our commitment to our patients, partners, workforce, and to a sustainable future. The final year of this strategic planning cycle is 2025, and each annual report will show the progress in achieving each commitment.





FINANCIAL CAPITAL

Own resources destined to leverage our social impact

2023-2025: Ensure that 10% to 20% of the total EBIT in the period is directed to the Reserve for Social Impact and Evolution (RISE).

HUMAN CAPITAL

Fostering plural thinking in senior management to promote diversity in decision-making

2025: Have a diverse and inclusive senior management to promote a plural approach to institutional culture and decision-making, considering aspects such as age range, gender, color, inclusion of people with disabilities and LGBTQIAP+.

INTELLECTUAL CAPITAL

Positive impact and pioneering spirit in national oncology

2025: To be among the top five private institutions in oncology in the SCImago Institutions Rankings (SIR).

MANUFACTURED CAPITAL

Digitization of the patient journey

2025: Provision of self-service digital channels for patients, aimed at increasing service capacity, agility, and assertiveness in their interactions with A.C.Camargo.

NATURAL CAPITAL

Combating climate change

2025: Expand the measurement of the greenhouse gas (GHG) emissions generated in our value chain (Scope 3 – Other Indirect Emissions).

SOCIAL CAPITAL

Number of lives impacted nationwide

2025: Positively impact 500,000 lives per year.

RELATIONSHIP CAPITAL

Patient satisfaction index in the oncology journey in strategic RCs

2025: Achieve a minimum satisfaction rate of 90 points for patients treated at the Reference Centers for breast, urological, skin, and head and neck tumors.



VISION OF THE FUTURE IN HEALTHCARE AND ONCOLOGY



We interact with various partners in the healthcare value chain and, therefore, we have developed a comprehensive view of the risks and opportunities they present in the current context of transformations in the Brazilian oncology market. Based on productive internal debates, we now have a better understanding of our potential for being a positive influence. We see ourselves as capable of bringing together the various stakeholder groups in order to improve the business environment. Furthermore, we identified this role of **protagonist** as an important contribution in terms of value creation. In this report, we have presented the **concepts advocated by A.C.Camargo for the future of oncology and the healthcare business.**

Our business concepts for healthcare

The knowledge we have accumulated in almost 70 years of history and our caring for around 90,000 patients this year alone, allows us to evaluate the initiatives already carried out, compare them with our peers and make conclusions as to which practices can lead to success. This applies not only patient care and cancer treatment, but also to the business environment in which we operate.

We understand that certain concepts are key to success on all fronts. We have already put them into practice in our businesses, such as the cancer center model, and we will start to disseminate them in the healthcare value chain, based on the evidence of the benefits achieved by all parties, and in this way seek to build solid partnerships. We have the necessary accumulated knowledge and conviction of purpose to enable us to lead this transformation.

Predictability of the patient oncological journey

We are specialized in life and our wide range of knowledge and practical experience constitutes a robust base to enable us to design, by type of cancer and patient profile, the treatment stages and the tests and procedures that will make up each patient's oncological journey. The predictability of each patient's journey, in addition to providing the patient with quality of life throughout the treatment, allows us to be prepared to offer high-quality care and to use resources optimally, **allocating the right resources at the right time.**

Our initiative aims to create strategies, together with healthcare plan operators, for predicting the cancer journey, for example, the development of service models for cycles of patient care, with clinical, operational, and financial advantages.



Commitment to cost-effectiveness

ACC 53

A.C. Camargo understands that the healthcare market of the future will be based on the direct relationship between cost and effectiveness of procedures. This will require great transformations in the business, but it holds great potential for a more harmonious environment for medical practitioners, healthcare operators and their patients. It will provide more transparent and reasoned decisions, which is positive for the objective of ensuring access to good healthcare for all the population.

In 2022, we decided to initiate this transformation and, in addition to seeking new remuneration models to make the healthcare sector sustainable, we started to work in partnership with companies in the format of **risk sharing**. By means of a contractual agreement, we share the financial risks based on the clinical

outcomes of the cancer patient. The evaluation of the positive outcomes is carried out by an independent third party, which considers survival rates and quality of life through measurable and comparative indicators. We signed agreements with Pfizer, Roche, and Johnson & Johnson, and have already renewed these contracts, due to the initial success experienced.

To support us in designing solutions aimed at financial sustainability, in 2022, we set up the **Value Office**, which will be responsible for developing methodologies, indicators and cost-effectiveness analyses. Now, we intend to move forward, disseminating the advantages of this practice to our partners and the market, with the aim of improving the environment of access, financing, and quality of care, with benefits for all parties involved.



HIGHLIGHTS IN 2022

GRI 201-1 | ACC 32 | 33

**90,222**

Patients attended

**295,212**

Outpatient attendances

**R\$1.53 billion**

of Net Revenue

**17,065**

New patients

**22,746**

Emergency attendances

We increased the number of new patient consultations by 17% compared to 2021.

The large number of patients and consultations that we perform annually require constant improvements in infrastructure, services, and processes.

**Strategic Plan
2023-2025**

Page 36

**CAR-T cell
treatment**

Page 51

**Establishment of
affinity groups for
gender and people with
disabilities**

Page 80

**A.C.Camargo Mission
Program**

Page 88

**Reformulation of the
attendance of SUS
patients and the Dona
Carolina Tamandaré
Program**

Page 89

**Greenhouse gas
(GHG) inventory**

Page 97

Pediatric Tumors RC

Page 101

**Revitalization of the
endoscopy area**

Page 101



Demonstration of value added

R\$306.3

**million
Employees
(salaries and benefits)**

R\$265.4

**million
Economic value
retained**

R\$42.2

**million
Third-party capital
remuneration**

R\$2.5

**million
Taxes, charges,
and contributions**

We have set ourselves the challenge of positively **impacting 500 thousand lives annually** from 2025, nationwide, through the **dissemination of our cancer knowledge** and the provision of services, covering prevention, diagnosis, treatment, rehabilitation and increased quality of life and survival rates.



3

RELATED CAPITALS



GOVERNANCE AND STRATEGY

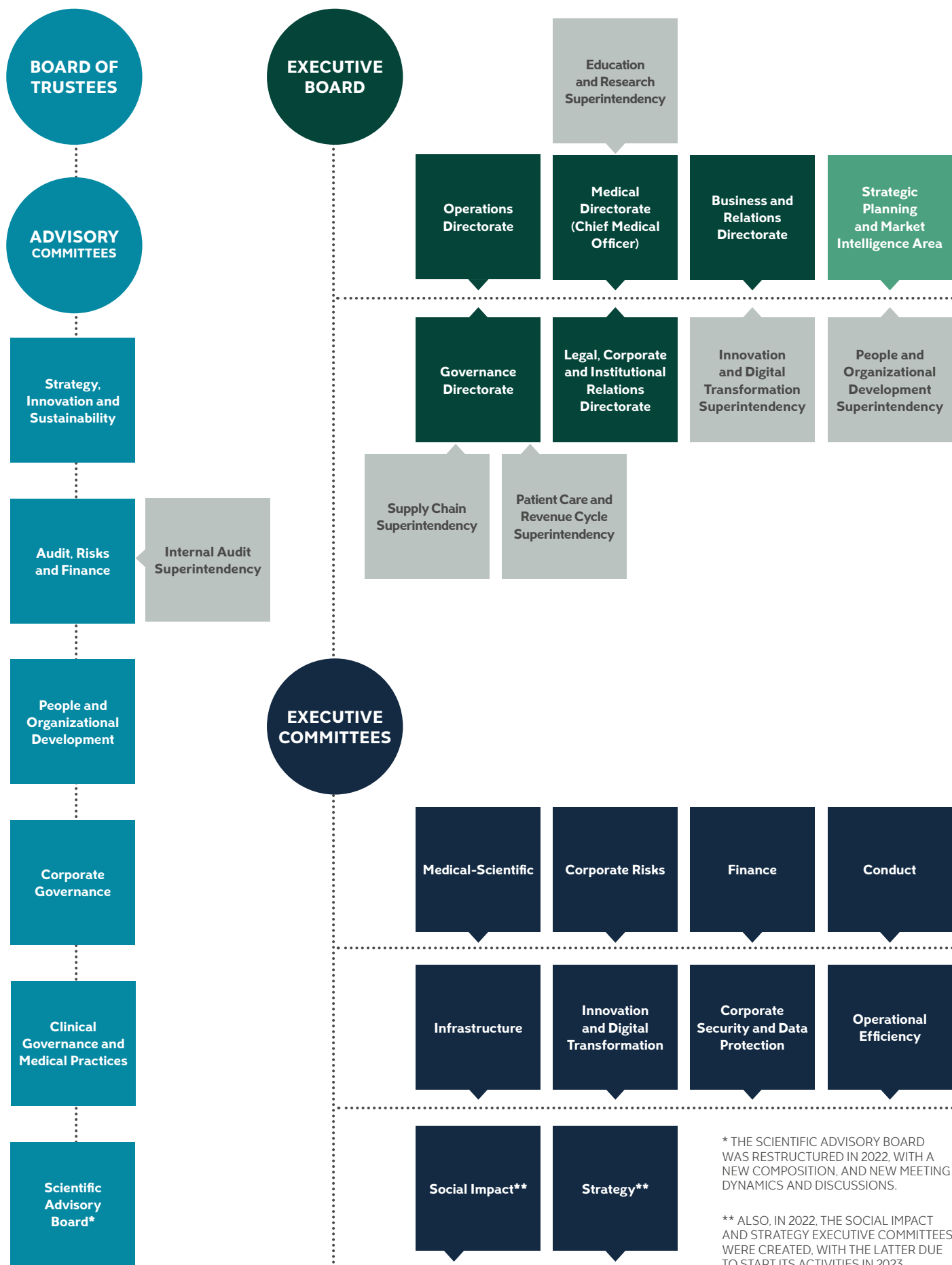
GOVERNANCE STRUCTURE

GRI 2-1 | 2-9

A.C.Camargo is a private, non-profit institution managed with efficiency, ethical rigor, transparency, and dedication. We pursue excellence in the quality of the services offered to patients daily. Our business model is designed to ensure that we maintain leading positions in the healthcare and oncology markets, and the long-term continuity of the institution.

The highest governing body is the Board of Trustees. It is supported by six Advisory Committees, and an Internal Audit Superintendency, which

acts independently to ensure the adequacy and effectiveness of the institution's governance and risk management processes; the day-to-day management of operations is the responsibility of the **Executive Board**, which is composed directly by five Directorates, two Superintendencies and one Area, and indirectly by three Superintendencies reporting to the Directorates; in addition, the institution has ten Executive Committees to provide support for the decision-making of the Executive Board.





Board of Trustees

GRI 2-9 | 2-10 | 2-11 | 2-12

The Board of Trustees is A.C. Camargo's highest governance body. It is composed of nine independent members, without any executive functions, and with a two-year mandate. They can be reappointed under the guidelines of the bylaws of the Antônio Prudente Foundation.

The responsibilities of the Board of Trustees are defined in the institution's bylaws and are as follows: determine the general orientation of the foundation's business; define its strategic guidelines; approve the strategic plan, expansion projects and investment programs; and approve institutional policies. In addition, it is responsible for establishing the institution's values, statutory purposes, and rules of ethical conduct, and ensuring they are followed. The Chairman and members of the Board of Trustees do not exercise any executive functions. They are all volunteers and are not remunerated for their work.

The nominations for the election of Board Members are subject to a prior analysis by the Corporate Governance Committee. The analysis is based on their prior professional experience and their potential contribution to the balance of the matrix of skills defined as necessary for the Board of Trustees. The analysis is then sent to the Board of Trustees which is responsible for the approval and appointment of new members.

In 2022, the Board of Trustees was composed of eight men and one woman, all aged between 67 and 76 years old, five of whom had their terms renewed for a further mandate. The combination of their different backgrounds enables the members as a group to bring a multidisciplinary approach to the decisions being taken. They are currently composed of two doctors, an economist, four engineers and two business administrators. The Board held 22 meetings during the year, with **an average attendance rate of 95%**.

Composition of the Board of Trustees

Name	Function	Mandate
José Ermirio de Moraes Neto	<i>Board Member, Chairman</i>	30/04/2022 to 30/04/2024
Waldomiro Carvas Junior	<i>Board Member, Vice-Chairman</i>	30/04/2022 to 30/04/2024
José Hermilio Curado	<i>Board Member, Institutional President</i>	30/04/2021 to 30/04/2023
Ademar Lopes	<i>Board Member, Institutional Vice-President</i>	30/04/2021 to 30/04/2023
Celso Marques de Oliveira	<i>Board Member</i>	30/04/2022 to 30/04/2024
José Ricardo Mendes da Silva	<i>Board Member</i>	30/04/2022 to 30/04/2024
Liana Maria Carraro de Moraes	<i>Board Member</i>	30/04/2021 to 30/04/2023
Nelson Koichi Shimada	<i>Board Member</i>	30/04/2022 to 30/04/2024
Pedro Luiz Barreiro Passos	<i>Board Member</i>	30/04/2021 to 30/04/2023



Advisory Committees

GRI 2-9 | 2-12 | 2-13

The Advisory Committees provide support to the Board of Trustees. Their members are appointed based on the recommendations of the Corporate Governance Committee, which evaluates the qualifications of the nominees and seeks to balance the complementary skills of the existing members and the nominees.

The Advisory Committees provide support to the Board of Trustees in order to strengthen the

institution's governance, and they complement each other in dealing with the strategic issues. Regarding aspects of sustainable development, the Strategy, Innovation and Sustainability Advisory Committee is responsible for monitoring the activities of the Sustainability Area and the Social Impact Executive Committee, which report to the Directorate for Legal, Governance and Institutional Relations and the Executive Board, respectively.

Composition of the Advisory Committees

Committees	Members	Names	Function	Class*	Mandate	Gender	Age Range
Strategy, Innovation and Sustainability	5	José Ricardo Mendes da Silva	Coordinator	T	09/05/2022 to 30/04/2024	M	49-73
		José Hermilio Curado	Member	T	09/05/2022 to 30/04/2024	M	
		Pedro Luiz Barreiros Passos	Member	T	09/05/2022 to 30/04/2024	M	
		Ricardo Augusto de Campos Soares	Member	I	09/05/2022 to 30/04/2024	M	
		Luiz Paulo Kowalski	Member	I	09/05/2022 to 30/04/2024	M	
Audit, Risk and Finance	4	Nelson Koichi Shimada	Coordinator	T	09/05/2022 to 30/04/2024	M	63-69
		Eduardo Henrique Giroud Joaquim	Member	I	08/07/2022 to 30/04/2024	M	
		Ana Maria Elorrieta	Member	I	09/05/2022 to 30/04/2024	F	
		Waldomiro Carvas Junior	Member	T	09/05/2022 to 30/04/2024	M	

* MEMBERS OF THE BOARD OF TRUSTEES (T) OR INDEPENDENT MEMBERS OF THE COMMITTEES (I).



Committees	Members	Names	Function	Class*	Mandate	Gender	Age Range
People and Organizational Development	4	Celso Marques de Oliveira	Coordinator	T	09/05/2022 to 30/04/2024	M	60-71
		José Ricardo Mendes da Silva	Member	T	09/05/2022 to 30/04/2024	M	
		João Carlos Senise	Member	I	09/05/2022 to 30/04/2024	M	
		Victoria Christina Bloch	Member	I	09/05/2022 to 30/04/2024	F	
Corporate Governance	4	José Ermirio de Moraes Neto	Coordinator	T	09/05/2022 to 30/04/2024	M	67-73
		José Hermilio Curado	Member	T	09/05/2022 to 30/04/2024	M	
		José Ricardo Mendes da Silva	Member	T	09/05/2022 to 30/04/2024	M	
		Pedro Luiz Barreiros Passos	Member	T	09/05/2022 to 30/04/2024	M	
Clinical Governance and Medical Practices	6	José Hermilio Curado	Coordinator	T	03/06/2022 to 30/04/2023	M	45-76
		Ademar Lopes	Member	T	03/06/2022 to 30/04/2023	M	
		Helano Carioca Freitas	Member	I	03/06/2022 to 30/04/2023	M	
		Rubens Chojniak	Member	I	03/06/2022 to 30/04/2023	M	
		Marta Maria Moreira Lemos	Member	I	03/06/2022 to 30/04/2023	F	
		Genival Barbosa de Carvalho	Member	I	03/06/2022 to 30/04/2023	M	
Scientific Advisory Board	7	Eduardo Franco	Coordinator	I	28/10/2022 to 30/04/2024	M	46-74
		Gemma Gata	Member	I	28/10/2022 to 30/04/2024	F	
		Fernando Carlos de Lander Schmitt	Member	I	28/10/2022 to 30/04/2024	M	
		André Fabrice	Member	I	28/10/2022 to 30/04/2024	M	
		Mary Krystyna Evans	Member	I	28/10/2022 to 30/04/2024	F	
		Diane Medved Harper	Member	I	28/10/2022 to 30/04/2024	F	
		Eric Banks	Member	I	28/10/2022 to 30/04/2024	M	

NOTE: IN 2022, A NEW INDEPENDENT MEMBER WAS ELECTED TO THE AUDIT, RISK AND FINANCE COMMITTEE AND, TWO NEW INDEPENDENT MEMBERS WERE ELECTED TO THE STRATEGY, INNOVATION AND SUSTAINABILITY COMMITTEE. THE SCIENTIFIC ADVISORY BOARD WAS RESTRUCTURED WITH THE REPLACEMENT OF THREE MEMBERS BY FOUR NEW MEMBERS.

* MEMBERS OF THE BOARD OF TRUSTEES (T) OR INDEPENDENT MEMBERS OF THE COMMITTEES (I).



Executive Board

GRI 2-9

The members of the Executive Board are appointed by the Board of Trustees, based on the suitability of the nominee's profile and skills in relation to A.C. Camargo's strategic and institutional development objectives. The Executive Board is responsible for the day-to-day management of operations and

for ensuring the **long-term continuity of the institution**. Senior management must execute the policies, strategies, activity plans and budgets approved by the Board of Trustees. In 2022, the Executive Board was composed of six members, the CEO and five Directors.

Executive Committees

These committees were created to support institutional activities and their decisions are based on shared analysis and reaching a consensus. The ten executive committees are organized by themes focused on the quality of services, institutional sustainability, and risk management.

Topics addressed by the Executive Committees in 2022

Committee	Main topics
Medical-scientific	<ul style="list-style-type: none">• Strategic planning;• New remuneration model (publications and innovation);• Social Impact and Evolution Reserve (RISE)• Results of the clinical staff engagement survey;• New Value Office structure;• Scientific Advisory Board (SAB) assessment.
Corporate Risks	<ul style="list-style-type: none">• Reports of the internal audits on the Operations areas;• Patient experience• Governance;• Risk management;• Internal controls and compliance;• Invoicing.
Finance	<ul style="list-style-type: none">• Monthly financial results;• Capex disbursements;• Position of financial investments and investment funds;• Cash flow;• Position of accounts receivable and significant bad debts;• Reason for significant disallowances;• Invoicing;• RISE: presentation of the business unit calculations.



Committee	Main topics
Conduct	<ul style="list-style-type: none">Investigation of the main reports received by the Conduct Channel;Orientation and monitoring of the Integrity Program.
Infrastructure	<ul style="list-style-type: none">Cell Therapy implementation project;Project for the installation of tomographs (image diagnosis and interventional radiology);Implementation of the second phase of the Itaim unit;Acquisition of a surgical microscope;Renovation of floors at the Tamandaré unit;Renovation and transfer of the Rehabilitation area to the Tamandaré unit.
Innovation and Digital Transformation	<ul style="list-style-type: none">Patient and doctor digital journeys;Approval of the first phase of the Digital Pathology project;Internal innovation management tool (Platform of Ideas);Approval of the acquisition of equipment and support solutions for incremental innovation and process improvements;Partnership with a startup to use virtual reality to support image diagnosis and analysis;Partnership with Insper to structure a tool for guided patient care procedures
Corporate Security and Data Protection	<ul style="list-style-type: none">Information Security Master Plan;Management of logical access to information systems, with the implementation of the identity management system (IDM) and multifactor authentication (MFA);Implementation of tools for data loss prevention (DLP);Incidents of processing of personal data;Structure and processes for electronic monitoring of institutional environments (CCTV);Use of biometric data to control physical access;Business Continuity and Emergency Response Plan.
Operational Efficiency	<ul style="list-style-type: none">Monitoring and deliberation of the actions and findings of the Athena Project to improve efficiency in the areas of: order to cash, patient care in inpatient units, intensive care units, surgical center, and the emergency room;Demand flow for the Information Technology team, resolving, prioritizing, and adapting deliveries for all areas and projects.
Social Impact	<ul style="list-style-type: none">Role of the committee and its intersections;Review of RISE's Management Policy;Revision of the regulations and creation of rules for the Dona Carolina Tamandaré Program;Status and partnerships of the A.C.Camargo Mission Program.
Strategy	<ul style="list-style-type: none">Committee structured in 2022 and activated in 2023 with the responsibility of ensuring compliance with the execution of strategic projects, according to schedule, investments, risks, and targets. This committee will also provide guidance on changes in scope and plans to mitigate barriers, providing status reports to the Board of Trustees.



Governance Practices

Board of Trustees and senior management diversity by gender and age range

GRI 2-9 | 405-1

		Women	Men	<30 years old	30-50 years old	> 50 years old
Board of Trustees	9	1	8	0	0	9
Senior Management*	12	5	7	0	10	2

* INCLUDES SIX EXECUTIVE DIRECTORS, FIVE SUPERINTENDENTS AND ONE MANAGER.

Governance assessment

GRI 2-18

Governance assessments contribute to the continuous improvement of the performance of governance bodies. They measure the effectiveness of their performance and their adherence to best practices. We carry out biennial evaluations, through questionnaires and interviews and, in the 2022 cycle, the contributions of the 27 respondents were analyzed by the Corporate

Governance Committee. The responses resulted in a plan, approved by the Board of Trustees, for executing 25 actions for 2022-2023. They included guidelines for the composition of the board and its committees, development of the members of these bodies, review of procedures for holding meetings and the management of crises.





Succession plan

GRI 2-10

Succession Plan for the Board of Trustees

The Corporate Governance Committee initiated discussions for the preparation of a structured succession plan for members of the Board of Trustees and the Advisory Committees. Based on the strategic guidelines defined in 2022, a set of profiles and skills were defined for the members of the Board of Trustees, and they will guide the future movements of these bodies.

Succession Plan for Senior Management

To identify people with potential to take on senior management positions, we assess the institution's directors, superintendents, managers, scientists, supervisors, coordinators, and other leaders in relation to their potential, cultural adherence, professional development, and preparedness for promotion. In 2022, 24 people were promoted to new senior management positions.



Remuneration

GRI 2-19 | 2-20

The members of the Board of Trustees participate on a voluntary basis and do not receive any remuneration. In the case of senior management, they receive fixed remuneration, in line with the market, and a variable amount linked to performance against institutional goals. They undergo an annual evaluation in which they receive orientation and feedback in relation to their performance and professional development. Senior management's remuneration follows the rules of the institution's **Remuneration Policy**.



STRATEGIC PLAN FOR 2023-2025



The Strategic Plan for 2023-25 was oriented by the objective of strengthening and expanding the cancer center with an eye on the future of oncology. In the process, we identified actions to integrate and promote the positive evolution of the Brazilian healthcare market.

The Strategic Plan for 2023-2025 was prepared during the first semester of 2022 and was approved by the Board of Trustees together with the specific **strategic projects** that will enable A.C. Camargo to achieve its institutional goals.

This strategic planning cycle was motivated by the integration of the pillars of the cancer center model and the strengthening of patient care based on criteria for efficiency, cost-effectiveness, and the patient experience. Over the next two years, we will focus mainly on strengthening our leading position in the market at the national level, ensuring sustainability, driving innovation, and developing the performance of the Reference Centers.

The current cycle also aims to contribute to the achievement of the 2025 strategic targets, which are as follows:

- **increase the financial result from patient care and new business;**
- **increase the potential for monitoring new cases of cancer;**
- **positively impact 500,000 lives a year, nationwide;**
- **revitalize the institution's brand through promoting the advantages of the cancer center model;**
- **ensure excellence in the patient journey.**





To achieve these objectives, we have defined seven **strategic programs**, divided into 15 projects, with the following scopes:





BALANCED SCORECARD

We use the Balanced Scorecard (BSC) model to assess performance and define goals from the perspectives of processes, customers and the market, financial sustainability, and organizational development. Our main indicators are:

- Increase in the conversion rate for new cancer cases (loyalty);
- Increase in the number of new patients;
- Increase in the number of courses offered to the market;
- Decrease in the access time for patient treatment, by RC;
- EBITDA;
- Net Promoter Score (NPS), by area and segment;
- Gross revenue;
- Retention of high-performance managers and employees;
- Total number of new patients by business segment;
- Total number of new patients treated by business segment.



EVOLUTION IN THE MATERIAL TOPICS

GRI 2-29 | 3-1 | 3-2 | 3-3

In 2022, we defined the institution's material topics based on sustainability management guidelines, and stakeholder consultations. The topics were evaluated by identifying the governance, environmental and social impacts in combination with their influence on decision-making and the perceptions of the stakeholder groups. For more

details see pages 42 and 43 of the Sustainability Report 2021 (<https://accamargo.org.br/institucional/relato-anual-integrado>). In this year's report, we have presented the further development of the material topics during 2022. Several of these topics had already been adopted as priorities in A.C.Camargo's practices.

WATER USE MANAGEMENT



Environmental

With the objective of improving water use management, in 2022, we replaced the equipment in the central refrigeration system at the Tamandaré unit, which will reduce the demand for drinking water.

WASTE MANAGEMENT



Environmental

The handling, storage, transport, and final disposal of waste is managed in accordance with the Integrated Solid Waste Management Plan. It establishes specific procedures for healthcare service waste, with all stages of management being monitored for effectiveness by indicators and destination certificates. The evaluation and selection of service providers for waste destination follow internal norms, legislation, and good practices. As a result, in 2022, we generated 13% less waste compared to the established target.

COMBATING CLIMATE CHANGE



Environmental

We are contributing to combating climate change by measuring the main sources of greenhouse gas (GHG) emissions in our activities and identifying mitigation opportunities in the consumption of medicinal gases, refrigerant gases, electricity and natural gas for cooking food and the heating of water. This is managed by the Environment Working Group which permanently monitors GHG emissions for Scopes 1, 2 and 3 (partial) and establishes annual targets. In 2022, we took the following initiatives: acquired renewable energy from a hydro-electric energy source; disposed of waste in a sanitary landfill with methane recovery; and installed a new refrigeration center at the Tamandaré Unit. These actions made it possible to keep within the established target for annual GHG emissions.



PATIENT EXPERIENCE



Governance and Social

Under the supervision of a dedicated Patient Experience area, we monitored patient satisfaction before, during and at the end of their oncological journeys through committees and direct consultations. In 2022, we worked hard to identify the appropriate welcoming measures and infrastructure by providing specialized patient care in each unit. To avoid the occurrence of negative impacts, we constantly verified the adoption of criteria in healthcare and safety, infection prevention and patient care practices. With the goal of positively impacting the patient journey, we strive to provide individual care that can make a real difference in the patient's recovery and well-being.

ETHICS AND INTEGRITY



Governance

Financial, market and reputation issues were identified as the main impacts on this theme. To mitigate their negative effects, we mapped out the existing processes, risks, and controls so that activities which present risks, including those of an ethical nature, are identified and controlled. In addition, we have a Conduct Channel and have advanced in the structuring of programs for compliance, data privacy and integrity, and internal controls.

QUALITY AND SAFETY IN HEALTHCARE



Social

The main positive impacts are: patient loyalty in undertaking their whole journey of treatment at the institution; personalized care during the journey; prevention of unwanted events; and the control

of invasive interventions. To manage the negative impacts, we identify risks and adopt action plans or mitigation measures. In 2022, we created the Momento Segurança (Safety Huddle) Program, a daily meeting of the multidisciplinary teams. We have also continued to hold weekly debates on adverse events. In addition, we offer periodic training courses, engagement actions, construction and review of clinical and care protocols, and internal and external audits as inputs for improvements. To monitor the effectiveness of our actions, we manage care incidents and monitor care quality indicators.

HEALTHCARE EQUITY



Social

As a reflection of our business model, we seek to promote equity in healthcare with the strategy of expanding the patient portfolio, mainly in basic and intermediate healthcare plans. To make this feasible, we are seeking to: access healthcare agreements and plans not yet attended; develop new compensation models based on cost-effectiveness and risk sharing; and reposition our marketing efforts to address market movements. The positive impacts are: an increase in market share; strengthening of the brand; and a wider range of patients. The negative impacts are: lower growth rate; and the complexities of cost control and medical practice management. Mitigation actions are focused on: accompanying the creation of new agreements and plans with a representative number of lives; identifying potential partnerships; assessing operational risks in revenue management, patient care, and refusals of healthcare operators to pay for certain care treatments, and their disallowance rates. To provide patient access to our cancer center while ensuring compliance with the year's budget target, we monitor effectiveness through a new commercial business indicator, which measures the evolution in the number of new patients and the corresponding increase in revenue.



DATA PRIVACY AND SECURITY



Governance

Due to our having access to large amounts of personal data, data privacy and security are fundamental issues in the institution's routines. To prepare our employees on this theme, we provided training courses, and promoted awareness campaigns, gaming-based actions, and a wide range of communication initiatives. The Data Privacy and Security areas, which have recently increased the number of dedicated team members, work in an integrated and collaborative manner to jointly establish work routines, and hold periodic meetings for technical and institutional alignment. In 2022, we developed a Disaster Recovery Plan (DRP), revised the Information Incident Response Plans (PRII), and established a pilot project to develop a due diligence process with selected suppliers. In addition, prior to signing contracts with partners, we assess the data privacy criteria associated with these projects from their inception (privacy by design), especially in patient care initiatives, innovation, and new business.

CORPORATE GOVERNANCE



Governance

During the year, we moved forward with actions that produced significant positive impacts on the theme, such as: the construction of the Strategic Plan for 2023-25; the review of the processes for appointing and integrating new directors; and the definition of the skills matrix to guide the succession process for the members of the Board of Trustees.

DIVERSITY, INCLUSION AND SOCIAL JUSTICE



Social

We take action to ensure that A.C. Camargo employees do not suffer or act in a discriminatory manner, in accordance with the respective guidelines in our Code of Conduct. We adopt measures to guarantee the engagement of employees with the themes of physical and psychological safety, as well as promoting inclusive face-to-face and virtual environments, with communication campaigns and institutional development for the entire workforce. If these principles are violated, they can be reported through the Employee Channel or the Conduct Channel. In 2022, we promoted several actions, on the theme, among which: affirmative action in relation to vacancies to encourage the hiring of people over 50 years old and refugees, with support from the UN Refugee Agency (UNHCR) program; we issued 93 publications on the subject in the Workplace, which stimulated more than 6 thousand interactions; we launched Affinity Groups for Gender and People with Disabilities; we adhered to the UN Empowering Refugees Seal; and replaced bathroom signage with unisex symbols.



TALENT STRATEGY



Social

The lack of adherence of employees to institutional skills, values and culture, or the loss of talents who do adhere to them, constitute the main negative impacts on the theme. To mitigate them, we seek candidates who meet the expectations of the job vacancy managers and the institution's strategy. We always act in an ethical, responsible, transparent, and respectful manner towards candidates, internal and external, and others involved in the selection process. We worked with the concept of an employer brand and sought to awaken a genuine interest in joining the institution. To assess the effectiveness of this strategy, we used an indicator for the time taken to fill a vacancy. After a period of experience, we met with the managers, to analyze the adequacy of the concept and the performance in the retention of employees.

VALUE CHAIN MANAGEMENT



Environmental and Social

In 2022, we expanded the supplier base for the most critical services, and we carried out an analysis of both the supply risks and the associated social and environmental risks. This analysis enabled us to define the social and environmental criteria appropriate for evaluating the performance of suppliers. We now aim to draw up action plans for improvements, in order to stimulate the development of sustainable practices in our value chain.

PATIENT HEALTH AND WELL-BEING



Social

The main objective of our initiatives is to constantly seek ways to improve the health and well-being of our patients. To this end, we offer a complete patient journey in which the patient is always accompanied by a specialized nurse and supported by a multidisciplinary team. The patient's journey is controlled through care protocols that are periodically evaluated and audited. In 2022, we were recertified under the Qmentum Diamond Level Seal, a certification that attests that our practices are in line with healthcare quality and safety standards.



ETHICS, TRANSPARENCY AND COMPLIANCE



GRI 2-16 | 2-26 | 2-29 | 205-1 | 205-2 | 205-3 | 406-1

Ethical behavior is one of A.C.Camargo's institutional values and it governs the internal practices of our employees at all levels and our care relations with patients.

The institution's Code of Conduct, approved by the Board of Trustees, established principles and norms that govern the organizational culture and provide guidance for mutual respect among people in their day-to-day conduct, professional practices, and relations with all stakeholders. The Code of Conduct was developed based on our institutional values, current legal requirements, and principles of the United Nations Global Compact, to which we have been signatories since 2015. As a result of the internal dissemination of the importance of ethical conduct, in 2022, there were no confirmed cases of corruption.

The Executive Board considers that ethical behavior, in addition to being an institutional value, is fundamental to making progress on themes that are present in our society, such as: diversity and inclusion; fight against discrimination; prevention and eradication of child, forced or compulsory labor; prevention of moral and sexual harassment in the workplace; privacy; health and safety; preventing and combating corruption, fraud and money laundering; among others. Another preoccupation of the Executive Board is the assessment of the institution's operations for the risks related to acts of corruption. It is necessary for us to raise awareness on this theme and train teams and reinforce controls to prevent any eventual occurrence. During the year, our efforts in the area of compliance continued to strengthen, with initiatives to promote a culture of compliance and the revision or creation of regulations to make the theme even more robust in the institution.



Ethical behavior

In order to increase awareness of the theme we disseminated various publications on the internal social network with content on: combating moral and sexual harassment; how to report a complaint in the Conduct Channel; rules for receiving perks, gifts, and hospitality; publicizing the 'Day against Corruption: Ethical Dilemmas.' In addition, we distributed external content related to compliance, the General Law for the Protection of Personal Data, and data privacy. This year, new versions of the training courses in 'Data Privacy and Protection' and 'Information Security' were also launched, in a distance learning format.



Allegations

Our Conduct Channel is available in digital and telephone formats to receive reports of allegations of deviations from the norms and guidelines established in our Code of Conduct and other internal regulations. Deviations include irregularities, illegalities, and unethical conduct.

The reports are analyzed by an independent third party, which preserves the integrity and confidentiality of information about the event and the person making the report who can choose to remain anonymous. In a careful screening process, the reports are classified by type and level of criticality, and then forwarded to the institution's Compliance area for verification and handling of the themes. Internally, the Conduct Committee undertakes an evaluation of the most critical cases. As a result, it defines action plans, manages the consequences for the misconduct and, eventually, communicates the case to the competent authorities. This committee also monitors the development of the institution's integrity program, including employee training.

In 2022, we received 301 reports of misconduct, a 29% reduction compared to 2021, mainly due to a decrease in the reports related to Covid-19. Of this total, 83% were within the scope of the Conduct Channel and 69% were registered anonymously. The main themes of the reports



Conduct Channel

0800 377 8022

canaldeconduta@accamargo.org.br

<https://canaldeconduta.accamargo.org.br>

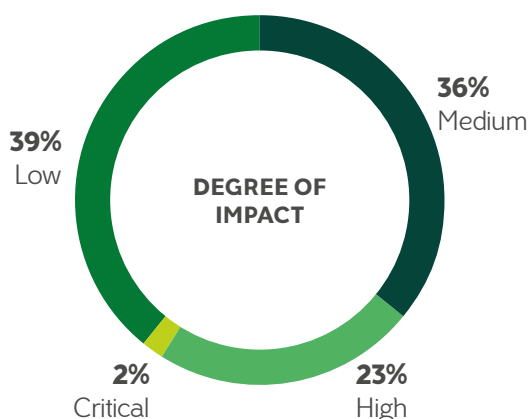
were related to: (1) moral or sexual harassment; (2) discrimination; (3) failure to comply with internal rules and policies; (4) favoritism or conflict of interest; (5) breach or misuse of information. As to the degree of impact of the reports, 2% were classified as having a critical impact, 23% as having a high impact, and 75% being considered as having a medium or low impact.

Most of the reports were related to behavior and, to mitigate this type of occurrence, we have adopted conflict resolution measures including dialogue and the empowerment of the direct manager in the search for solutions. This has reduced the time to respond to the issue and has also reduced the perception of non-resolution.

During the year, five cases of discrimination were reported, three of which were considered valid. The investigation of the reports and the actions on the measures related to the individuals involved were all completed in 2022. Among the plans to mitigate this type of occurrence are a series of actions related to strengthening the diversity and inclusion program, to be defined together with the People and Organizational Development area.

The time taken to resolve cases was up to 30 days for 36% of cases, 30 to 60 days for 21% and over 60 days for 43%. Overall, 97% of the reports were resolved during the year, with 3% (10 cases) remaining open at year-end 2022.

Breakdown of reports





RISK MANAGEMENT

GRI 2-12 | 2-13 | ACC 54

Institutional risk management

As the institution is a hospital, assuming and managing risks is at the core of our activities. It is a central part of our institutional commitment to achieve our objectives in relation to safety, compliance, responsibility, and transparency. This is a responsibility shared by all our employees. They must be aware of the risks inherent in their activities and manage them in accordance with the guidelines of our Risk Management Policy.

Risk management model

Our risk management process complies with the best market practices. It has been structured to be in line with the risk management guidelines in the ISO 31000 standard and in the Three Lines Model of The Institute of Internal Auditors (IIA).

In 2022, we continued to strengthen our risk management culture, with a comprehensive review of the roles and responsibilities of the management areas and the different control areas.

The patient care and business areas, as those directly responsible for operations, bear the first line of responsibility for risk management, establishing processes and creating appropriate controls. The second and third lines of governance are formed by the control areas, which support the monitoring process with their technical expertise and independently supervise decisions in the institutional risk management process. We also have several committees, linked to the operation, which support the management of specific risks (especially healthcare risks).

Strategic risks

In line with the strategic planning exercise, the institution reviewed the risks related to its strategy that could affect the ambitions of the business and its long-term continuity. The risks were reviewed, and we improved the links between the risk scenarios and the initiatives that supported our strategic choices. In this exercise, we identified ten strategic risks. They dealt with topics such as the market and competition in



A.C. Camargo's risk management principles

Segregation of activities

between lines of governance

Effectiveness

of risk management actions

Transparency

in disseminating information for decision-making

Prior analysis

of the risks for strategic decisions

Conformity

with internal and external standards

Best practices

as a basis for risk management



the healthcare area, partnerships; patient experience; technology; information security and personal data protection; people, processes, and ethics.

Internal controls

The structure and processes of the Internal Controls area were reviewed in 2022, with the aim of ensuring the best resources for properly assessing the efficiency of its control environment. The team was expanded from one to three employees and new work procedures were implemented. During the first two months after establishing the area (from October 2022), three internal control assessments were completed. In addition, the area prepared a work plan for 2023, which includes assessments of controls, awareness actions and training, and the evolution of risk management processes, including the use of electronic tools to support the effective management of information on institutional risks.

Business continuity

In 2022, we identified the risks in our business continuity processes. Based on the evaluation of 440 processes, 19 continuity risks were identified. This resulted in the definition of the governance of these risks and the development of 24 operational plans that will guide the institutional responses to critical events such as: the interruption of vital operations; emergency situations; cyber incidents; technology disaster recovery; and image crisis events. In 2023, we will continue with the evolution of the program, reinforcing training, communication and carrying out adherence tests for the defined protocols.

Information security and data protection (GDPR/LGPD)

GRI 418-1

Digitization integrates the reality of our activities and helps to facilitate the daily routines of patients, doctors, and employees. To this end, we are continually on the lookout to adopt or improve suitable platforms and the necessary infrastructure in order to ensure data privacy and security.

In 2022, we sought to improve our information security processes, with the definition of new policies and the implementation of tools that increased control over the logical access to systems and reduced the risk of data breaches. We carried out several actions to raise the awareness of employees, including the use of phishing tests to measure the maturity of our employees in relation to the detection of cyber threats.

Due to the highly sensitive nature of the data processed daily in the institution, especially that related to patient healthcare, we strengthened our commitment to compliance with the General Law for the Protection of Personal Data (LGPD). We revised the privacy notices in the light of the guidelines issued by the National Data Protection Authority (ANPD), as well as making progress in the assessment of privacy risk in organizational processes.

We also conducted a training course on privacy and information security for our workforce. The course, which was delivered in a distance learning format,



Privacy Portal

<https://accamargo.org.br/privacidade>



reached 3,500 people throughout the institution in this first year alone.

In 2022, we recorded eight incidents involving the improper disclosure of customer data. They were characterized by the delivery of documents to the wrong recipients. The incidents were classified as having a medium level of criticality. There was no need to report these cases to the National Data Protection Authority (ANPD), since they were resolved promptly, avoiding any significant harm to the individuals involved.

Substantiated data privacy complaints

Third-party complaints	0
Notices from regulatory agencies	0
Breaches, theft, or losses of customer data	8 incidents of medium criticality

Patient care risk management

The institution is committed to ensuring the safety of patients in its care, and this commitment is part of our culture and service delivery routines. The Care Practices area is responsible for dealing with adverse events and risk factors in order to prevent any harm coming to patients. The area contributes to strengthening the institution's safety culture through the analysis of the causes of events and the definition of corrective measures.

To promote a comprehensive and effective analysis of patient care risks, we have established the following forums:

- **Operating Committees** to review the procedures that relate to the safety of patients and employees, to discuss improvements in protocols and to adopt measures to mitigate incidents;
- **Weekly meetings to follow up on adverse events** to define measures to prevent and mitigate possible adverse events;
- **Ombudsman Committee** to analyze the risks identified by patients and family members.



Internal Audit

Internal Audit provides assessment services by reviewing and reporting on the **effectiveness of the governance, risk management and control processes** developed to help the organization achieve its strategic, operational, financial and compliance objectives. Its independence of action is ensured by a direct reporting line to the Audit, Risks and Finance Committee, which reports to the Board of Trustees. In 2022, the Internal Audit carried out nine of the total ten tasks initially scheduled in the Annual Audit Plan. This resulted in the development of **151 action plans** aimed at strengthening the internal control environment and mitigating the associated risks. The progress on implementing these action plans is monitored every semester by Internal Audit. By December 31st, 2022, most of the action plans (105) were in the process of being implemented, 30 had been fully implemented during the year and 16 required new deadlines for their adequate execution.

External controls

The institution also relies on external service providers specialized in evaluation and control to complement the internal structures. The objective is to comply with the relevant legislative and regulatory expectations for the protection of the institution's assets and the best interests of its stakeholders.

- **Independent audit:** The institution's financial statements are audited annually by independent external auditors who are selected by the Board of Trustees for terms of up to five years. In 2022,

the institution's financial statements were audited by Ernst & Young and received an unqualified opinion. The firm has now completed its contractual service cycle. For the next cycle, the firm Grant Thornton has been appointed;

- **Public Prosecutor's Office:** As the institution is formally constituted as a foundation, its activities are supervised by the Curatorship of Foundations, a department of the Public Prosecutor's Office of the State of São Paulo. Every year, the institution reports on its corporate governance practices, financial management, activities developed and the value generated for society. In 2022, the institution provided its accounts for the year 2021, which were approved without reservations.
- **Quality Certifications:** The institution uses the monitoring services of independent certifying organizations to obtain quality seals for its operations. They assess the compliance of the institution's processes with international best practices, the addressing of risks and the effectiveness of related controls. In 2022, the quality certification for the Qmentum Diamond Level Seal was renewed.



COMMUNICATION CHANNELS

GRI 2-16 | 2-25

Criticisms, compliments, requests, and suggestions may be sent to us through the customer service (SAC) communication channels listed below.



55 (11) 2189-5000



sac@accamargo.org.br



<https://accamargo.org.br/form/contato>



(11) 2189-5000

13,543

Total number of reports (SAC)

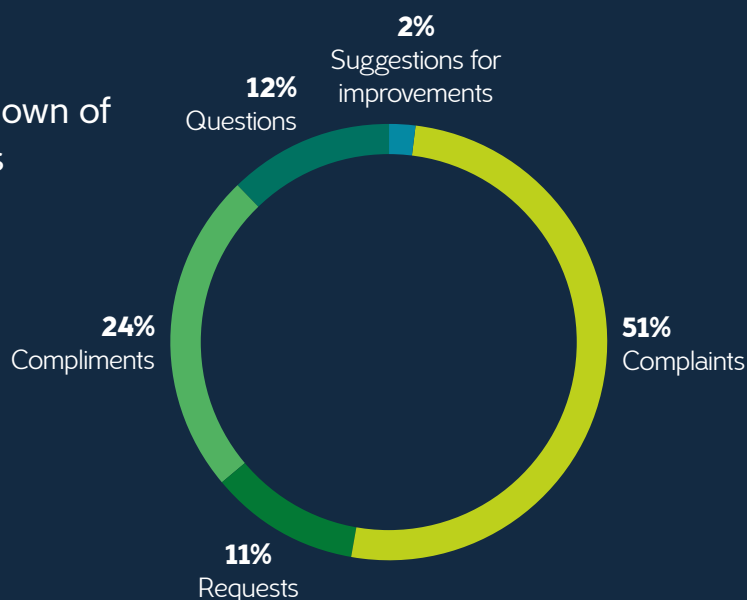
6,865

Number of concerns reported

72%

Responded to within 1 hour

Breakdown of reports



For cases of **non-compliance or ethical issues**, we request that the report be registered in one of the following channels:

OMBUDSMAN CHANNEL:

<https://accamargo.org.br/form/ouvidoria>

CONDUCT CHANNEL:

www.canalconfidencial.com.br/accamargo



4

RELATED CAPITALS



INTEGRATED PATIENT CARE

Overview

ACC 2



PATIENT CARE SUPPORT

OUTPATIENTS
295,212 (+3%)
outpatient
attendances

EMERGENCY
22,746 (+3%)
emergency
attendances

INPATIENTS
18,179 (+0.5%)
hospital
admissions

84,219 (-13%)
hospitalizations
(patient-days)

Antônio
Prudente and
Tamandaré
hospital
admission
units

90,222 (+4%)
patients attended

17,065 (+17%)
new patients



DIAGNOSIS

IMAGING
294,069 (+11%)
imaging examinations



TREATMENT

IMMUNOTHERAPY
331 (-8%)
patients

CHEMOTHERAPY
24,858 (-4%)
sessions

RADIOTHERAPY
2,277 (+11%)
cycles
32,889
sessions

General surgical
center, outpatient,
hemodynamic
and radiotherapy
areas of the
Antônio Prudente,
Tamandaré and
Pires da Mota units

SURGERIES
20,802 (+8%)
surgeries

607 (+37%)
robotic surgeries

(versus 2021)



PERSONALIZED ONCOLOGY: INTEGRATION OF PATIENT CARE AND RESEARCH



The presence of both patient care and research at A.C. Camargo allows us to advance jointly in both areas. Our research area follows the evolution of patients according to the medication and care practices adopted, and our patients have access to innovations developed in research.

We have presented below a description of two important innovations arising from clinical and translational research initiatives: the treatment with CAR-T cells and the studies of genomics and biomarkers by liquid biopsy for the diagnosis and monitoring of cancer, carried out by the Nucleus for Genomic and Molecular Diagnosis.

CAR-T cells

A.C. Camargo is a pioneer in Brazil in offering immunotherapy treatment with CAR-T cells to its patients. It is a truly disruptive treatment for cancer. In 2022, we carried out the first application of CAR-T cells to treat a patient. This therapy, which was developed over the last ten years in North America, uses lymphocytes that have been genetically modified and reprogrammed in the laboratory to destroy tumors.

During the two years of preparation to receive the research and the pharmaceutical product, our practitioners underwent several training courses in apheresis, handling, receiving, and storing cells from patients, all of which were focused on the specific procedures required for this therapy. Workshops were also held that brought together the research

and patient care teams to exchange knowledge. In addition, we inaugurated the area of cell manipulation in patient care and created integrated protocols with the necessary requirements to carry out the therapy in complete safety. Once everything was ready, we received verification visits by a multidisciplinary team from the pharmaceutical industry, who certified us to start using the treatment.

Ten patients have begun treatment with this promising therapy, which may be the key to guiding the future of oncology. Despite its benefits, this treatment is currently only used, when necessary, in the search for a cure for the patient due to its high cost and its applicability being restricted to a small number of types of tumors and neoplasms.

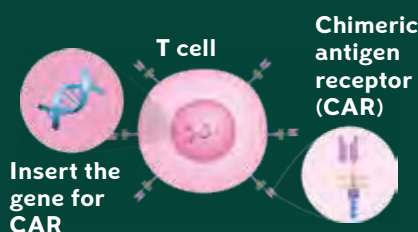


CAR-T cell therapy

1 Collection of blood from the patient to extract T cells



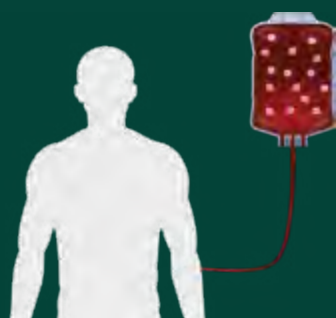
2 Production of CAR-T cells in the laboratory



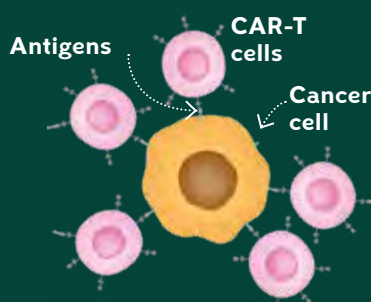
3 CAR-T cell multiplication



4 Infusion of CAR-T cells into the patient



5 CAR-T cells bind to cancer cells



6 Cancer cells die



Nucleus for Genomic and Molecular Diagnostics

Conducted by the Nucleus for Genomic and Molecular Diagnostics at A.C. Camargo, this portfolio of cancer diagnostic and monitoring tests is available to healthcare institutions interested in precision oncology. The team of specialists, which is composed of clinical oncologists, hematologists, oncogeneticists, pathologists and molecular biologists, helps in interpreting reports and discussing cases with doctors and other healthcare practitioners, in addition to providing these tests directly.

These tests are negotiated via A.C. Camargo's B2B partnerships as a service provider for networks of diagnostic medicine laboratories and pharmaceutical companies. In 2022, we carried out **1,155 examinations** related to 64 contracts with diagnostic laboratories and healthcare service providers, and eight contracts with pharmaceutical companies.



PATIENT CARE QUALITY

SASB HC-DY-250A.2 | HC-DY-250A.3 | HC-DY-250A.4

ACC 4 | 5 | 6 | 7 | 10 | 11 | 12 | 13

Time between consultation and start of treatment (average)

30 days

Bed turnover

4.85 Antônio Prudente

3.36 Tamandaré

Average rate of healthcare associated infections (HAI)

4.12% Antônio Prudente

2.68% Tamandaré

Reoperation in up to 30 days

0.12%

Occupancy rate (patient-days/bed-days)

74.3%

Average length of stay

IU - inpatient unit

4.6 days

ICU - intensive care unit

3.3 days

Readmission in up to 30 days

11%

Compliance with the correct timing of antibiotic administration

88.4%

Target of 80%

Fatality rate in cases of sepsis

25.1%

Average infection rate in clean surgery

1.2% Antônio Prudente

1.5% Tamandaré

0.1% Pires da Mota

Reportable serious events

Surgical or invasive procedures

2

Patient care management

29

Product or device, patient protection, environment, radiological or criminal potential

0

Adverse events

1,782

41.92% without any harm

55.27% low level of harm

2.58% moderate level of harm

0.06% severe level of harm

0.17% fatality

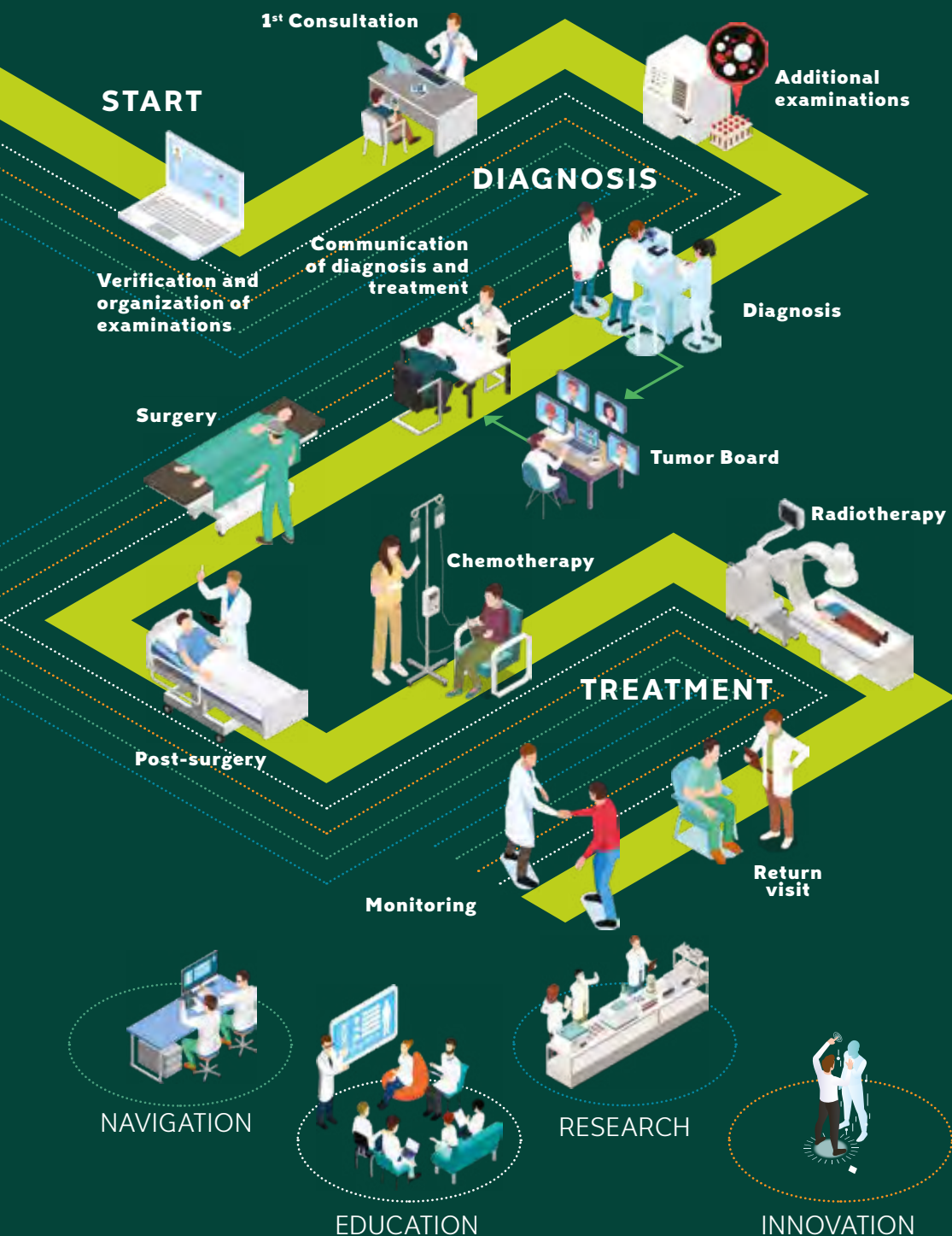
1.5% patients/day



PATIENTS AT THE CENTER OF CARE

Patient journey

We offer patients a complete journey, with access – in a single location – to the necessary examinations, consultations, and therapies. The analysis of the results is carried out by an integrated team of practitioners, which facilitates the provision of care in each stage of the treatment.



The integration of cancer treatment gives patients access to:

- Multidisciplinary team specialized in oncology;
- Medical and care teams for the care of critically ill patients;
- Support specialties;
- Optimized coordination of complex care and transition between teams.

Quality

Cost-Effectiveness

Patient experience



Patient health and safety

GRI 406-1 | 416-1 | 416-2 | ACC 6

Specialized in life, and an emphasis on patient healthcare, well-being and satisfaction are key to guiding all our initiatives.

Cancer treatment is a delicate moment in a patient's life and the individual's response to the selected treatments and protocols defines the level of success. For this reason, we monitor the effects of the treatment on each patient's body carefully and rigorously. Similarly, we take great care with our conduct when administering medication and carrying out care procedures and, for this reason, we have established several quality evaluation criteria:

- Qmentum Diamond Level Seal: external assessment of quality and safety standards in healthcare. The Antônio Prudente and Tamandaré units have been certified under this seal since 2015, and both were renewed in 2022;
- Revision of care and navigation protocols for patients, who are accompanied by a specialized nurse during their treatment;
- Evaluation and audit of the team in hand hygiene and the hospital infection control service (SCIH);
- Periodic technical visits carried out by the SCIH, with the participation of area managers;
- Internal and external assessments carried out by the Quality area to verify compliance with accreditation/certificate regulations;
- Monitoring of patient care indicators and adverse events;

- *Momento segurança* (Safety Huddle), implemented in July 2022. It is a daily meeting of the teams for patient care practices, nursing, hospital and clinical engineering, infrastructure, and pharmacy, aiming to manage, identify and respond to errors, problems, failures, risks, and concerns that occurred, preferably, in the previous 24 hours, for decision-making and immediate resolution, proactively addressing the potential risks to patient safety.

Using both external and internal assessments, we examine the processes and services that make up 100% of the patient care journey and the support areas that contribute. As a result, having evaluated 100% of the products and services regarding the impacts on the health and safety of patients, no significant case* of non-compliance was identified during the year.

In 2022, we received awards in the **3M Program for the Recognition of Good Practices** in the categories:

- Secure Fixation of Catheters, and
- Prevention of Skin Injuries.

In March, we started using the **linear accelerator** that we acquired in 2021. This equipment provides greater precision and quality in radiotherapy.



*SIGNIFICANT CASES ARE DEFINED AS THOSE THAT REQUIRE LEGAL ACTION FOR THEIR RESOLUTION.



Tumor Board for high-complexity cases

ACC 9

O Tumor Board exists to bring together transdisciplinary teams in an agile way in the search for the most effective treatment of a patient. This aim of this meeting of specialists, including oncological surgeons, clinical oncologists, radiotherapists, pathologists, radiologists, and researchers, is to discuss **the most effective approach for the care of patients with high-complexity cases of cancer,**

whether in treatments to be adopted, the need for surgical intervention and even difficult medical decisions, such as not going ahead with invasive treatments. The opinion of this medical board, based on scientific evidence, brings **security and clarity to the definition of the patient's journey.** In 2022, The Tumor Boards evaluated **2,238 cases**, in many different specialties.

Tumor Board meetings in 2022

Pathology or type of treatment	Number of cases
Upper Digestive System Tumors	411
Head and Neck Tumors	240
Colorectal Tumors	210
Skin Tumors	203
Sarcomas	181
Breast Tumors	176
Gynecological Tumors	164
Onco-Hematology	158
Chest	152
Urology	110
Central Nervous System	102
Pediatric	65
Molecular	34
Hypophysis	20
Vascular	12



Survivorship during the patient's journey - support groups and workshops

ACC 14A | 14B | 15

The activities of support groups and workshops provide moments of interaction between patients and their companions. They are made available throughout the patient's journey and in the stage of follow-up and survivorship, when potential after-effects of treatment are being accompanied by our team.

In order to prioritize the patient's health and well-being, the meetings are held both in person and online, and include the participation of psychologists, social workers, volunteers, and other specialist practitioners. Through conversation and social contact, the participants address their anxieties and suffering, as well as enjoying entertainment and practicing self-esteem activities. For the new patients who are about to undergo radiotherapy treatment, we offer a guided tour, known as Radiotour, to demystify this type of treatment.

Patients and their companions can sign up for support groups at: <https://accamargo.org.br/pacientes/apoio-ao-paciente-e-familiar>

Initiatives in 2022



**Coral Sua Voz
(Choir)**

15

patients

25

speech therapists



**Amor à vida
(Love of life)**

12

presentations,
viewed by

86,867

people



**Conversation
circles**

104

people



**Musical
performances**

44

volunteer musicians



**Fisiodança
(dance)**

14

rehearsals



**Arteterapia
(Art Therapy)**

71

participants

142

hours



**Superação
(Resilience)**

45

patients



Yoga

49

hours



**Automaquiagem
(self make-up)**

388

patients



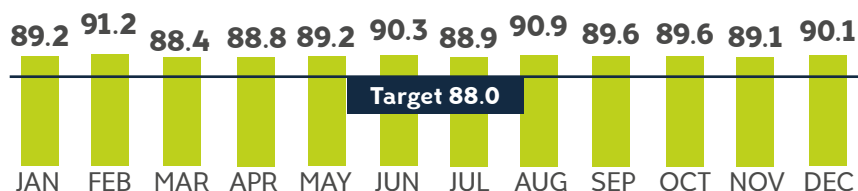
PATIENT EXPERIENCE



Patient satisfaction (NPS)

GRI 2-29 | ACC 52

Patient Satisfaction - monthly NPS



The Net Promoter Score (NPS) measures the level of patient satisfaction with the services used at the institution. It is an important parameter to measure service quality and is an integral part of our capacity to improve the patient experience. A questionnaire is sent to patients following treatment, seeking to

identify the occurrence of problems. The analysis of the responses is carried out by the managers of the areas involved in providing the service, who are also responsible for suggesting improvements. Over the year, we scored an **average of 89.6 NPS points**, which was above our established target.

Speed of attendance

ACC 3

We achieved a rate of 87% of attendances with a waiting time of less than 30 minutes, considering laboratory tests, exams, consultations, and surgeries. Since the waiting time is an important issue in our relations with patients, we routinely seek to streamline appointments and patient reception by using digital tools and simplifying processes.

	Attendances in 2022	2022	2021	2020
Up to 30 minutes	181,451	86.6%	87.4%	85.7%
More than 30 minutes	22,103	10.6%	10.2%	11.9%
More than 60 minutes	5,857	2.8%	2.4%	2.4%

NOTE: ATTENDANCES THAT WERE INITIATED BY CHECKING IN USING SELF-SERVICE TOTEMS

Welcoming patients and companions

One of the actions to improve the patient experience and organize the reception of patients and companions, was the creation of a janitorial service to ensure the proper maintenance of our entire infrastructure and, thus, provide a complete and fully functioning environment.



ENGAGEMENT ACTIONS

GRI 2-29 | ACC 48 | 49

Patient Consulting Council

Listening to patients and their companions is an essential input to effectively improve our services. In 2022, in discussions with members of the Patient Consulting Council, we were able to gain insights on the perceptions of patients and companions in relation to the facilities and restructuring of the rehabilitation area. We also took the opportunity to present our integrative and complementary practices in healthcare and collect their impressions of A.C.Camargo's image and brand.



4 meetings



8 hours

Patient experience medical committee

This committee meets monthly and seeks to better understand the doctor's perspective on our patient journey practices and how we could deliver a better experience. In 2022, the committee deliberated on topics such as: signage and communication in indoor environments; impacts on patients due to delays in outpatient care; restructuring of the psychiatric service; patient's sleep quality during hospitalization; and schedules and authorizations.



9 meetings



9 hours

Patient perception forums

In these forums, the main topics discussed were the issues raised by patients during the consultations to evaluate the patient journey, the responses to the Net Promoter Score (NPS) questionnaires and the reports received through the customer service channel (SAC). The forums were structured by the following topics: hospitalization and emergency, infusions, appointments, and diagnostic medicine. To provide information for the forum's discussions, the managers responsible for the patient journeys presented the results of the consultations and their proposed action plans.

Patient experience week

This is an annual event consisting of presentations, experience simulators, competitions, interactive activities, and exhibitions. Its main objective is to create awareness and engagement among A.C.Camargo's employees regarding the patient experience culture. In 2022, the event brought together more than 2,500 participants.





TECHNOLOGY AND THE PATIENT EXPERIENCE

Technology is an inseparable part of the future of medicine and, in 2022, we made good progress in improving the experience for all those involved. We believe technology to be an important ally in the journeys of both patients and employees. Projeto Athena sought to improve operational efficiency and provide guidance in prioritizing actions based on demand, cost, and value of services. The project also identified points for improvement in integrated patient care, and the safety and quality of attendance. Other initiatives aimed at improving communication were expanded, such as:

- **Remote monitoring of patients (immunotherapy)**, by which patients can call us remotely to receive clinical follow-up;
- **Digital emergency service**, which is a communication channel created during the Covid-19 pandemic to answer questions from patients with respiratory symptoms and to support remote clinical treatment;
- **Digital confirmation of appointments**, to handle an increase in the number of patient interactions. In 2022, there were more than **68 thousand contacts via WhatsApp and 31 thousand via chat**. With the increased use and acceptance of digital channels, in the month of December alone, more than 1,300 appointments were made via chat, which confirmed the interest and relevance in making these tools available.





INNOVATION



We believe in **partnerships with startups** to drive the creation of new products, advances in research and improvements in the quality of attendance. To move forward quickly, we are promoting an **innovation hub**, which reaffirms the institution's strategy and positioning in favor of innovation. We plan to encourage the search for solutions that increase productivity in patient care and facilitate the patient journey. Furthermore, we are accelerating support for biotech startups in their development of products, for example, regarding new diagnostic lines.

Among the many initiatives under development, we would highlight the following: biotechnology solutions with a research pillar; entrepreneurship program; self-check-in and self-scheduling solution; use of artificial intelligence to improve processes; solution for medical transfer; and the acquisition of a supercomputer.

The structuring of the Innovation Program was initiated, with the involvement of the institution's senior management in corporate affairs and patient care. It is aligned to the

Strategic Plan for 2023-25 and has the main objective of bringing together, and leveraging, all of A.C. Camargo's innovation efforts. In addition, it will promote the evolution of the oncology journey, with benefits that are accessible and integrated into the healthcare ecosystem.

As a result of this structured approach to innovation, which included national and international benchmarking exercises, interviews with stakeholders and senior management, and internal workshops, we identified 16 important areas of innovation and, of these, three were prioritized to orient both internal actions and the development of partnerships:

- Improved experience in the journey of patients, companions, and family members throughout the treatment;
- Increased efficiency of processes and treatments based on digital data and technologies;
- Proven cost-effective patient care.

José Eduardo Ermírio de Moraes Awards: **Innovations for Life**

The first edition of these awards, which was created through a partnership between the A.C. Camargo Cancer Center and the family of José Ermírio de Moraes Neto, was aimed at opening the institution's doors and putting us in direct contact with an effervescent ecosystem of innovation in healthcare and oncology. The awards attracted the participation of 64 companies in the categories "Scientific initiatives with entrepreneurial potential" and "Technology-based healthcare initiatives/solutions". The projects of the finalists in each category were evaluated by a panel of specialists in terms of relevance, feasibility, and potential business impact.



For more information on the projects of the finalists and the winners, please access our website at: <https://accamargo.org.br/sobre-o-cancer/noticias/conheca-os-vencedores-do-1o-premio-jose-eduardo-ermirio-de-moraes-inovacoes>



5

RELATED CAPITALS



SPECIALIZED CANCER KNOWLEDGE

EDUCATION

As a recognized center of excellence in oncology education, we receive practitioners from all over the country and we are honored to contribute to preparing them for success in their future careers while at the same time disseminating and projecting our knowledge at the national level. In their time at the A.C.Camargo Cancer Center, students can personally experience how integrated and multidisciplinary medicine works in practice, whether in scientific initiation or postdoctoral studies, thereby providing them with a robust body of knowledge and practical training in oncology.

Training

Open courses

ACC 23

The institutions program of open courses is one of the main channels for disseminating its vast knowledge base in oncology. These courses, some of which are free of charge, offer high quality content to the medical community and society and are delivered using distance learning.

For more information on the courses available, and to sign up, please access our website at <https://ead.accamargo.org.br/course>

Open courses and specialized training offered in 2022:

- **40** webinars
- **29** courses for external audiences on various topics
- **28** internal training courses
- **22** open online courses



Technical course in nursing

ACC 28

The A.C.Camargo Technical School was created in 1990 to strengthen the integration between the institution's areas for education and patient care, as well as to encourage ongoing learning by our nursing staff. In 2022, 14 nurses graduated from the program.

Residency and fellowship programs

ACC 21 | 24

The medical and multidisciplinary residencies and the specialized postgraduate programs offered to doctors (fellowships) enable these medical practitioners to become specialists by a combination of sharing experiences and practical learning in oncology. In 2022, there were a total of **380 residents and students, of whom 24 joined A.C.Camargo's permanent body of clinical staff.**

Practitioners trained in the residency and specialization programs

Program	2022	2021	2020
Medical resident graduates in the year	66	64	75
Total medical residency students	172	176	178
Multidisciplinary residents graduated in the year	22	27	26
Total multidisciplinary residency students	44	53	55
Fellows graduating in the year	10	10	17
Total fellowship students	10	11	13

NOTE: THE NUMBERS WERE COMPUTED AFTER THE PROGRAM GRADUATION CEREMONIES, WHICH ARE GENERALLY HELD IN FEBRUARY OF THE FOLLOWING YEAR.



Innovation in education

- 3D simulation of the surgical environment
- Digital recreation of human organs



Practitioner's masters degree in oncology

This course provides a qualification in healthcare service management, scientific methods, and precautions in cancer patient care. It is offered to practitioners in all areas of knowledge who are interested in studying the care of cancer patients and the dynamics of a cancer center. The discussion forums on the projects held among the students on the masters courses and the professors seek to enrich their training with an interdisciplinary vision. The program, which was relaunched in 2021, currently has 36 students and this first class will complete their masters in August 2023.

For more information, please access our website at: <https://accamargo.org.br/ensino/mestrado-profissional>

Sensu stricto postgraduate programs

ACC 22 | 25

The postgraduate program is composed of a series of courses for masters, doctorates, postdoctorates and in scientific initiation. They are administered by a multidisciplinary faculty composed of active and recognized scientists in the field of oncology.

The *sensu stricto* courses achieved a CAPES score of 6 in the 2017-2020 triennium after an evaluation by ad hoc consultants from the academic-scientific community. The CAPES score of 6 is the highest in oncology in the country, with a 7 being the maximum grade possible. This result is higher than in the previous evaluation, when we obtained a score of 5.

In 2022, a total of 48 practitioners completed their postgraduate training considering masters, doctorate and postdoctorate degrees. At year-end there were 129 postgraduate students and 25 scientific initiation students studying at the institution.

For more information on the **subjects, vacancies and registrations** please access our website at: <https://accamargo.org.br/ensino/pos-graduacao-stricto-sensu>

CAPES Score
Evaluation of the National Post-graduate System (2017-2020)

6

Sensu stricto postgraduate practitioners

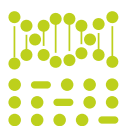
Course	2022	2021	2020
Masters completed	22	30	36
Total masters students	55	64	64
Doctorates completed	24	15	20
Total doctorate students	68	83	80
Postdoctorates completed	2	5	2
Total postdoctorate students	6	5	9
Scientific initiations completed	26	22	17
Total scientific initiation students	25	26	25



Masters, doctorates and postdoctorates

The education activities are fully integrated with the patient care practices in the cancer center. The research carried out by postgraduate students aims to increase our scientific knowledge in clinical, basic, and translational research.

For masters and doctorates, we offer the following lines of research:



Cellular, Molecular
and Genetic
Biology



Diagnosis in
Oncology



Epidemiology and
Prevention



Oncological
Therapies



Support and
Rehabilitation

For postdoctorates, we offer basic, clinical, and translational research lines. For more information, please access our website at: <https://accamargo.org.br/ensino/pos-doutorado>

Scientific initiation

With the objective of complementing the training of recently-graduated students, the scientific initiation course puts future practitioners in direct contact with research in oncology. This allows them to develop scientific reasoning, techniques, and research methods and, eventually, awaken their interest in a scientific career. The studies developed by the students are supervised by the institution's researchers and their scholarships are financed by the Institutional Scholarship Program for Scientific Initiation (PIBIC).

For more information, please access our website at: <https://accamargo.org.br/ensino/programa-institucional-de-bolsas-para-iniciacao-cientifica-pibic>





Knowledge dissemination

Observatório do Câncer (Cancer Observatory)

For the first time in Brazil, we compiled and published, in 2023, the A.C. Camargo Hospital Cancer Records Report for the period from 2000 to 2020. The report contains information and statistics on cancer in Brazil including social, demographic, and clinical profiles, and data on diagnosis, treatment, and survival rates.

This rich source of information on cancer is now accessible to researchers, practitioners, public entities, patients, and society in general.

This is another example of our initiatives to support the evolution of the **public healthcare system in Brazil**. The report can be accessed here:



Next Frontiers Magazine

The digital magazine, "Next Frontiers," aims to disseminate, to the scientific community and society in general, the education, research and innovation activities that are being developed at the A.C. Camargo Cancer Center.

The magazine can be accessed at:

<https://accamargo.org.br/institucional/revista-next-frontiers>





Video library

This is a video channel for the transmission of meetings, seminars and webinars sponsored by A.C.Camargo.

This channel can be accessed at: <https://accamargo.org.br/ensino/eventos-e-recursos/videoteca>

A.C.Camargo Webinars

In our webinars we present the vision of our practitioners and researchers on topics of importance in oncology and in the healthcare market in general. They include topics such as: innovations in treatment; technologies for patient relations; and the future of oncology medicine.

Our webinar channel can be accessed at: <https://youtube.com/@ACCamargoCancerCenter>



Cancer Center Radio Podcast

These podcasts have content produced for the general public, and focus on important topics in oncology. They provide scientific evidence to respond to the most frequently asked questions on cancer. The podcasts can be accessed at: www.accamargo.org.br/sobre-o-cancer/podcast

Theses and dissertations

The theses and dissertations developed at the institution can be accessed at: <https://accamargo.phlnet.com.br>

Library

We have a library of physical and digital books available for the education, research, and patient care areas. It is also available to patients and companions, and provides access to scientific knowledge platforms.

For more information, please access our website at: <https://accamargo.org.br/ensino/biblioteca>



Congress *Next Frontiers to Cure Cancer*

In 2022, we organized the sixth edition of the congress *Next Frontiers to Cure Cancer*. It was held from June 22nd to 25th, 2022 and was presented in a 100% digital format. During this international congress, organized by the A.C.Camargo Cancer Center, we debated the most important advances in research and innovation for the diagnosis and treatment of cancer. This congress is an important event in the oncology agenda to promote the evolution of medical practices and the transformation of cancer treatment. The participants included healthcare practitioners, residents, and undergraduate and postgraduate students.

4

days of events

718

national and international
speakers

23

sponsors

3,507

hours of online content

241

research summaries
received

Partnerships with internationally
recognized institutions in cancer
treatment

1,291

classes in 10 simultaneous rooms

Partnerships in education

Insper

The partnership between Insper and A.C.Camargo aims to promote mutual support in research, human resource training and technology transfer for cancer treatment. These scientific and technological exchanges aim to bring together A.C.Camargo's clinical staff and Insper's engineering students to develop course conclusion projects on topics that will be beneficial for cancer patients.

More information on the results of this partnership can be accessed at:

<https://accamargo.org.br/sobre-o-cancer/noticias/parceria-entre-accamargo-e-insper-amplia-diagnostico-de-cancer-de-mama>

www.insper.edu.br/noticias/cancer-de-mama-pfe-accamargo

Lifelong Learning (University of Cancer)

As in the case of the other two pillars of the cancer center, the education area also develops initiatives with strategic partners with the aim of expanding the dissemination of cancer knowledge to healthcare practitioners and society in general.

In order to implement the **Lifelong Learning** concept, we are building partnerships with educational institutions to offer courses for the further education of doctors and other healthcare practitioners that meet the needs of the different stages of their professional careers.



RESEARCH

ACC 30 | 40 | 47

Every single day, we strive to advance the frontiers of knowledge in oncology. In pursuing this great challenge, we owe many of our results to the integration of the areas of Research, Patient Care and Education in our cancer center model.

A.C. Camargo's research area has **176** employees and is composed of: **60** medical researchers;

15 scientists at the International Center for Research; and **101** members of the administrative support team*. We develop basic, translational, clinical, and epidemiological research. We integrate the knowledge generated in research and apply it to patient care, with the purpose of advancing in our capacity to develop **an effective approach to combating cancer.**

* EMPLOYEES OF THE ADMINISTRATIVE TEAM SUPPORT BOTH THE EDUCATION AND RESEARCH AREAS.



Types of research conducted at A.C. Camargo



Basic Research

Laboratory work to discover the mechanisms and ways in which tumors, appear, advance, and spread.



Clinical Research

Studies conducted with patients that lead to new clinical practices.



Translational Research

Use of molecular knowledge to solve real-life clinical problems. Transition from laboratory work to clinical practice.



Epidemiological Research

Studies to assess risk factors and the effect of cancer on the population.



For more information on our ongoing research projects see:

<https://accamargo.org.br/pacientes/estudos-clinicos/lista-de-estudos-clinicos>

For more information on our research groups see:

<https://accamargo.org.br/pesquisa/grupos-de-pesquisa>

In addition to having our own specialized team in oncology research, cooperation with other institutions also drives forward our research:

- **91 active cooperation agreements, of which 54 national and 37 international;**
- **46 new agreements in 2022, of which 32 national and 14 international.**

The total number of **active cooperation agreements increased by almost 30%** during the year compared to 2021 and, in order to carry out high-quality research, the number of our **medical researchers increased by more than 50%.**



Clinical Research

ACC 18 | 19 | 47

One of the main differentials of the cancer center model is the possibility for patients with high-complexity forms of the disease to have access to an innovative treatment. The new (experimental) drugs made available in the context of clinical research can be used in cases where the patient's body does not respond well to traditional treatments. For some patients this is an opportunity to have access to innovative medicines from our research, while respecting all ethical and scientific rigor protocols.

We developed 82 clinical trials in 2022, in different phases, mainly focused on targeted therapy and immunotherapy, such as the initiation of treatments with CAR-T cell therapies. One of the highlights of the year was the study denominated **CARTITUDE**, a Phase 3 clinical trial to evaluate T-cell therapy with chimeric antigen receptors (CAR-T) targeted at patients with multiple myeloma, a hematologic neoplasia. A.C.Camargo was one of the cancer centers with the highest number of clinical trial participants worldwide.

Clinical trials in progress and completed

Category	2022	2021	2020
New studies cataloged	18	19	-
Studies cataloged from 2001 to 2022	286	268	249
New patients included in clinical research projects	64	88	81
Patients included in clinical research projects from 2001 to 2022	3,553	3,489	3,401
Studies initiated*	18	19	26
Studies being monitored**	51	38	15
Studies recruiting** patients	20	25	83
Studies completed in 2022	11	27	4
Studies completed from 2020 to 2022	38	31	4

Studies by type of research	82
Targeted therapy	40
Immunotherapy	25
Patient Care Program	7
Others (hormone therapy and pain)	4
Chemotherapy	2
Cell therapy	2
Epidemiological	2

* FROM THE TIME OF THE SITE INITIATION VISIT.

** MONITORING AND RECRUITMENT AT DECEMBER 31ST, 2022.



International Research Center (CIPE)

CIPE has a complete infrastructure of laboratories with modern equipment and protocols defined for the development of basic, clinical, translational, and epidemiological research.

The main areas of research are: **tumor and cell biology, microbiome, personalized medicine (including liquid biopsy), hereditary cancer syndromes, data science and artificial intelligence, cancer epidemiology, immuno-oncology, and preclinical models.**

The CIPE organizational structure consists of: *Biobanco* (Biobank), Research Support Office (EAIP), Clinical Research Support Center (CAPEC), Hospital Cancer Registry, Nursing specialized in research, statistical consulting, core facilities and database management.



CIPE Team

<https://accamargo.org.br/pesquisa/pesquisadores>

Hotpapers

<https://accamargo.org.br/pesquisa/publicacoes-cientificas/hotpapers>

Biobanco (Biobank)

ACC 29

The Biobanco area is responsible for identifying the characteristics and profiles of tumors. It stores and analyzes samples of tissues, blood, biofluids (plasma, serum, urine, saliva, sputum, cytology, etc.) and DNA/RNA. By characterizing molecular and genetic aspects of patients and their tumors, it is possible to reach a more precise diagnosis and propose the most appropriate approach for treatment and monitoring for each patient, as well as contributing to research in the advancement of oncology.

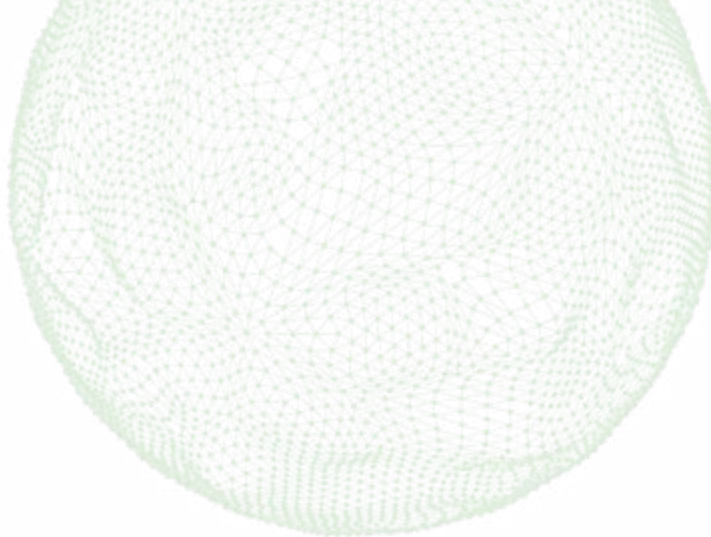
The Biobanco has been in operation since 1997, and, in 2022 it contained more than **177,000 tissue samples, 43,000 tissue and blood samples, and 31,000 DNA/RNA extractions.**



For more information see: www.youtube.com/watch?v=mXFttFqtbt0

Biobanco Samples

Sample type	2022	2021	2020
Tissues (collected and frozen)	909	1,317	1,428
Blood – leukocytes (isolated and frozen)	433	578	696
RNA and DNA extractions	1,417	1,869	1,891
Processed tissues and biofluids (includes RNA and DNA extractions)	3,953	4,672	4,617
Research projects that use samples stored in the Biobanco	15	26	21



Research Board

ACC 46

The Research Board brings together doctors, multidisciplinary teams, and researchers from the Reference Centers to discuss and develop new research projects. In 2022, the Research Board held 75 interdisciplinary meetings which addressed research into the following types of tumors: **Head and Neck (11 meetings), Thorax and Lungs (11),**

Skin (9), Breast (8), Upper Digestive System (5), Sarcomas (9), Colorectal (12), Urological (6) and Gynecological (4).

For more information see: <https://accamargo.org.br/sobre-o-cancer/noticias/research-board-discussao-da-pesquisa-servico-da-vida>

Scientific production

ACC 20

We make the results of our research available to the scientific community through articles published in high-impact journals. In this way, we contribute to advances in oncology research and provide information that will support diagnoses and decision-

making in the treatment of patients. Following the completion of 111 projects in 2022, our body of doctors and researchers published a total of **268 scientific articles.**



High-impact production

Prof. Dr. Luiz Paulo Kowalski, leader of the Head and Neck Reference Center, was a co-author in **642 scientific articles** in a career spanning over four decades, during which he received **22,330 citations**, and obtained an H-index factor of 69 (Web of Science).

His most cited article was: *Meta-analysis of chemotherapy in head and neck cancer (MACH-NC): An update on 93 randomized trials and 17,346 patients*. It was published by Radiotherapy and Oncology, and received 2,000 citations in 2022 alone.



6

RELATED CAPITAL



A.C.CAMARGO WORKFORCE

A WORKFORCE SPECIALIZED IN LIFE

The A.C.Camargo workforce consists of about five thousand people, specialists in their respective areas of expertise. They share a common commitment to offer an individualized, integrated, and purposeful approach to caring for each patient's life, without economizing efforts, demonstrating that treating cancer is truly to be Specialized in Life.

Who we are

GRI 2-7 | 405-1



3,717

Employees (CLT contracts) 99.5% on a permanent contract



755

Doctors and multidisciplinary specialists



430

Third-party staff



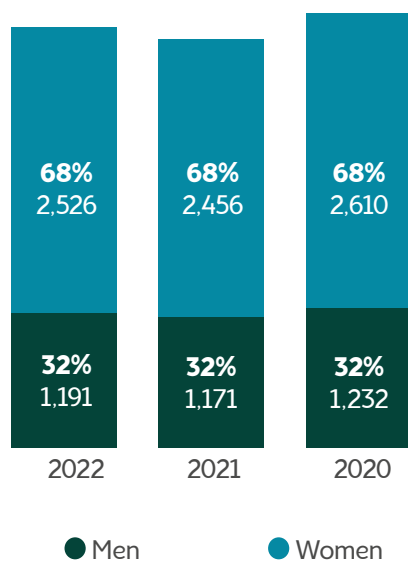
75

Research specialists dedicated to scientific research

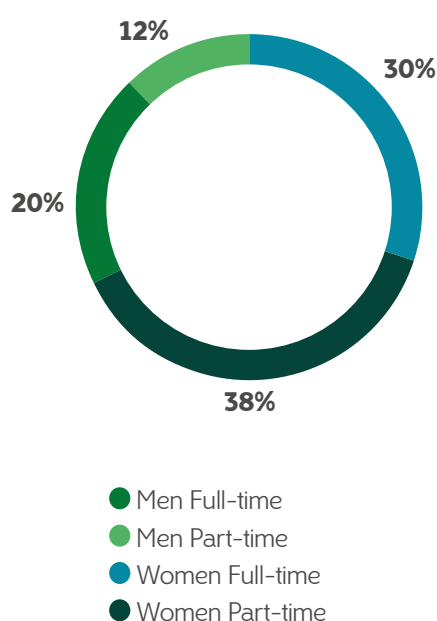
Anatomia Patológica



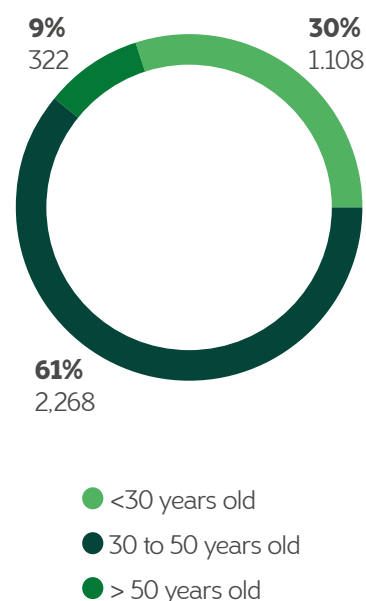
Total employees



Breakdown by gender/contract



Breakdown by age group



Employees		2022		2021		2020	
Total employees		3,717		3,627		3,842	
Employee profile		Men	Women	Men	Women	Men	Women
Sub-total		1,191	2,526	1,171	2,456	1,232	2,610
		32%	68%	32%	68%	32%	68%
Type of employment contract							
Permanent	3,698	1,186	2,512	1,125	2,362	1,155	2,442
Temporary	19	5	14	46	94	77	168
Type of work period							
Full-time	1,878	747	1,131	719	1,104	1,090	2,397
Part-time	1,839	444	1,395	452	1,352	142	213

NOTE: ALL OUR EMPLOYEES WORK IN THE STATE OF SÃO PAULO, IN THE SOUTHEAST REGION OF BRAZIL. THE TOTAL NUMBER OF EMPLOYEES INCLUDED THE FUNCTIONAL CATEGORY OF APPRENTICES.



Clinical staff

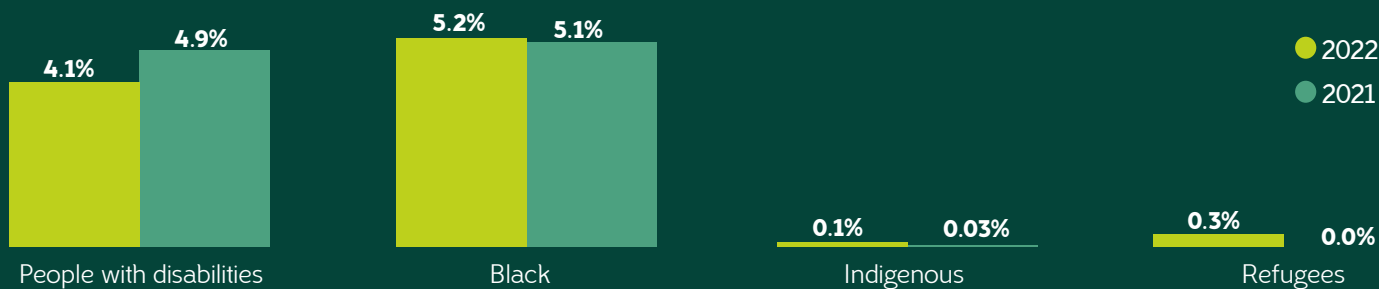
We value highly the 755 doctors and members of the multidisciplinary teams of different specialties that comprise our body of clinical staff. They are highly specialized practitioners, each in their own area of expertise, and they spare no effort to offer the appropriate treatment for each patient, whether they contribute in patient care, research, or education.



Employees by functional category



* THE SENIOR MANAGEMENT, COORDINATION AND SUPERVISION FUNCTIONAL CATEGORIES WERE ACCOUNTED FOR IN AN AGGREGATED WAY IN 2021 AND 2020.
 ** CATEGORY BROKEN DOWN IN 2022.



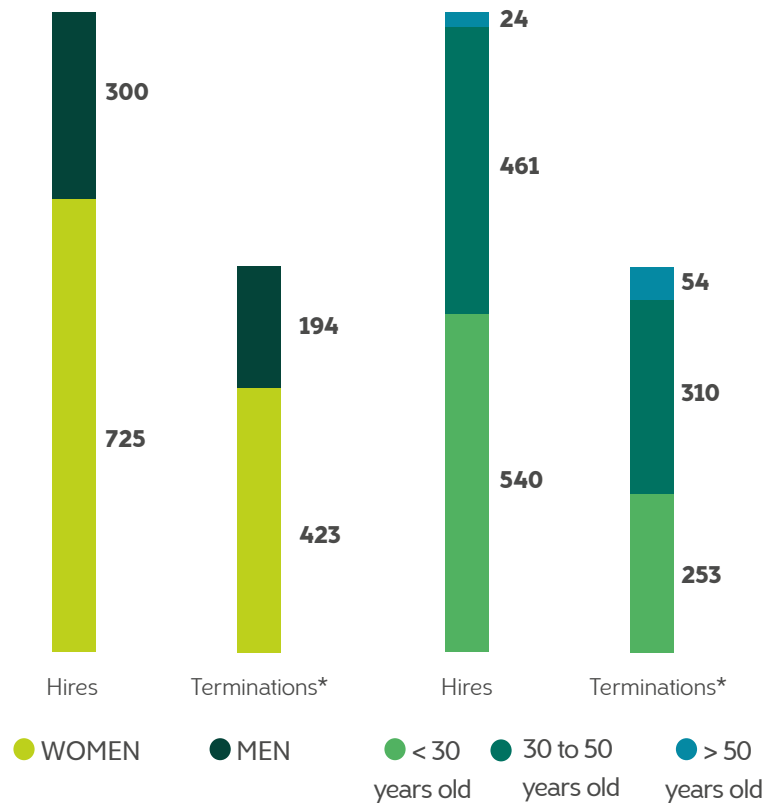
NOTE: ANNUAL AVERAGE EMPLOYEES AT DECEMBER 31ST, 2022.



Hiring and turnover

GRI 401-1

At year-end 2022 we had 3,717 permanent and temporary employees, an increase of 2.5%, compared to the previous year. During the year, there were 1,025 new hires and 617 terminations. For the team of permanent employees, we had a hiring rate of 28% and a termination rate of 17%. The new hires and terminations by gender reflected the same proportion of men and women in our team. In terms of age range, we had an increase in the number of employees under 50 years old.



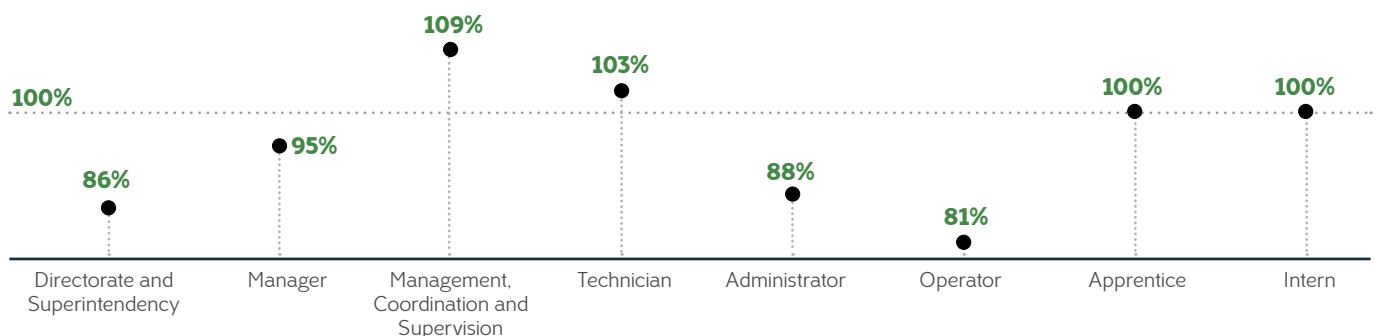
*TERMINATION REASONS INCLUDED DISMISSAL, VOLUNTARY DEPARTURE RETIREMENT AND FATALITY.

Remuneration

GRI 405-2

Our institutional policy is based on the principle of equity in the remuneration of all employees in all areas. Remuneration is based on salary surveys for functional categories and best market practices. There is a relatively low degree of variation in salary equality between women and men for management and technical positions, but a higher degree of variation for senior management, superintendencies, administrative and operational positions.

Salaries by gender and functional category*



*AVERAGE SALARY FOR WOMEN/AVERAGE SALARY FOR MEN



Communication and integration

Workplace

Launched in May 2022, the Workplace is an important channel of communication between the institution and employees. It is a dynamic, real-time communication channel to disseminate information on A.C. Camargo's training actions, events, and celebrations of commemorative dates.

This internal social network aims to **involve, engage, and connect employees**. In this format it improves efficiency and encourages collaboration, and, by fostering a sense of belonging and emotional connection, it develops a sense of responsibility and reduces the need for hierarchical communications.

Workplace also has a library, making the institution's knowledge available to all.



Example of Workplace communication



A.C. Camargo Cancer Center Corporate TV Channel

This institutional content platform informs, connects, and makes employees aware of outstanding initiatives and recent achievements. The 22 screens of the Corporate TV provide information with agility, technological quality, and sustainability. In addition to transmitting official communications, videos, personalized vignettes, and editorials from Workplace, it provides short extracts of content with QR codes linking them to the complete articles.



Engagement survey

GRI 2-29

We carried out an engagement survey with our employees, and the main conclusions were as follows:

- A declared **intention to remain in the institution for more than 5 years**: 75% of CLT employees and 92% of the clinical staff;
- Positive evaluations for the themes: **pride in belonging, patient experience, knowledge management, and autonomy and innovation**;
- **Differentials** for the clinical staff: integrated action and the research area;
- **Opportunities** for improvement: operational support, resources, and clarity and direction.



SATISFACTION INDEX*

Employees (CLT) **84%**

Clinical staff **65%**

* PUBLICLY DISCLOSED FOR THE FIRST TIME IN 2022.





Diversity, equity, and inclusion

GRI 406-1

We launched a series of initiatives on the theme of Diversity and Inclusion (D&I) throughout 2022:

- Launched two affinity groups (People with Disabilities and Gender);
- Adhered to the Empowering Refugees Seal (an UN initiative);
- Installed new signage for the restrooms at the Castro Alves Administrativa Unit;
- Pregnancy Program;
- *Empresa Mobilizadora* (Mobilizing Company) Seal;
- Panelists in the ReaTech International Congress (Inclusion, Accessibility and Rehabilitation), and participations in the Brazilian Internships Agency (NUBE) and the UN High Commission for Refugees (UNHCR);



- **Finalist in the Diversity in Practice Summit Awards;**
- Participated in the UNHCR event *Opportunity for Hiring - Work and Income Week*, in São Paulo.

To promote the dissemination and effectiveness of all our actions, we made **93 publications** available in the internal Workplace channel. Furthermore, we made two affirmative action vacancy disclosures, one internal and one to the market. As a result of our engagement efforts, we received **13,786 views of our publications and 6,349 likes**.

Affinity Groups



Gender



People with Disabilities

9 meetings

49 participants

The groups focused on the topic **Unconscious Biases**, which led to in-depth debates on the main concepts of inclusion, diversity, equity, and ableism.

For more information on our actions in Diversity and Inclusion (D&I) see the section on Sustainability Platform - Focus on people (Page 90).



Team management

The culture of using scientific evidence for data-based decision-making is part of the institution's DNA. Also, in the area of people management, we use data from People Analytics, which provides support for managers in leading their teams based on monthly indicators.

Skills assessment

GRI 404-3

All A.C.Camargo's permanent employees (CLT), in all functional categories, receive an annual assessment of their performance and behavioral skills. The process also includes a discussion of career development prospects and actions and provides an opportunity for feedback.

EMPLOYEE JOURNEY

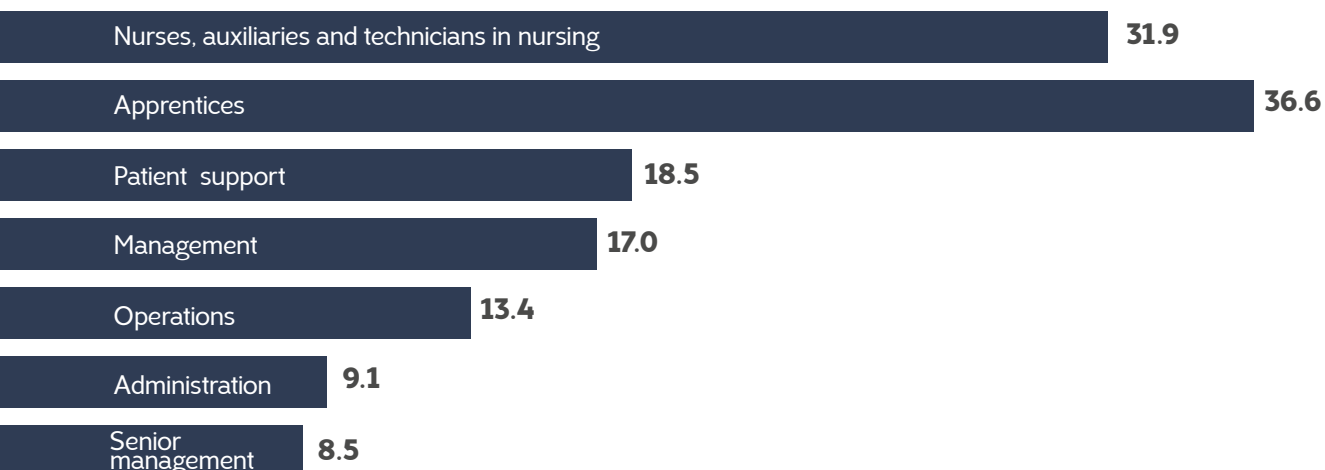


Training

GRI 404-1 | 404-2

The institution provides information and training on: oncology specialties; mandatory technical training and realistic simulations; and development of behavioral and leadership skills. The objective is to prepare our employees for both their daily work and the further development of their careers. We offered around **72.5 thousand hours** of employee training in 2022, which represented an average of around 20 hours per employee.

Hours of training by functional category





Main internal training courses offered in 2022

Internal courses	Teams involved
Skills assessment workshop	All
Assertive communication	
Humanized attendance	
Environmental management system	
Information privacy and security	
Mindset of indicators	Management
Extension course in oncology	Nursing and multidisciplinary teams
Educational Training Program for Therapy with CAR-T Cells	Clinical staff, nursing, and multidisciplinary teams
Ethical dilemmas	
Performance evaluation and feedback	Clinical staff
Patient-focus, emotional intelligence, and communication	Emergency Attendances
Empathy Map and Team Building	Pathological Anatomy
On-the-job multipliers	Nursing
Multidisciplinary training in cell therapy	
Patient Care Protocol	Modified Early Warning System (MEWS), Pediatric Early Warning System (PEWS) and Sepsis
Breastfeeding	Nursing and nutrition
Pathways for new managers	Nutrition
Positive nonconformity and sense of ownership	
Exercising leadership	
How leadership strengthens the team	
Agile methodologies workshop	Organizational development
Advanced life support	Adult and pediatric
Unconscious Biases	Interns and contact center staff
Communication and interpersonal relations	Kitchen staff

In addition to the above internal courses, the education area offered annual scholarships which were available to all A.C.Camargo employees. In 2022, 135 scholarships were offered, the majority of

which in the further education courses for 'Clinical Research', 'Cost-effectiveness in health', 'Navigation of cancer patients', 'Nutritional Therapy in Oncology' and 'Hospital Pedagogy'.



Employee health and safety

GRI 403-1 | 403-4 | 403-6

The institution promotes a culture of the continuous improvement of practices in health and safety.

To stimulate a process of evolution, we have an occupational health and safety management system, with full coverage of sectors and types of work activities. It complies with the relevant legislation and the standards established by the ISO 14001 and Qmentum International Diamond Level certifications.

The health of each employee is monitored by periodic assessments and we provide comprehensive

healthcare attendances in cases of chronic impairment, while maintaining the confidentiality of the employee's personal information. In addition to monitoring and facilitating requests with our healthcare insurance plan, in 2022, we increased the scope of attendance in our Integral Health Program in relation to mental health. We widely publicized the existence of our healthcare programs through internal communication channels, and we dedicated ourselves to preserving the physical and mental health of the people who make up the A.C. Camargo team.

Occupational risk management

GRI 403-2 | 403-3 | 403-4 | 403-5 | 403-7 | 403-9 | 403-10

We have defined protocols and carry out periodic training to prevent or mitigate any potential negative impacts in patient care and, especially, in relation to critical activities such as storing substances and their manipulation during emergency attendances. The main occupational risks identified were: repetitive efforts and movements; carrying loads; occurrence of impacts or falls; use of sharp instruments; and contacts with biological or radioactive material. All occurrences were monitored by indicators and the safety processes were periodically reassessed.

All accidents were investigated using the "5 whys" methodology and, in addition, our safety teams carried out technical inspections to identify potential risks. In both cases, the evaluations resulted in the elaboration of action plans with structural measures, in processes or in training. The orientation of the investigative teams was to clarify and mitigate the occurrence of adverse

events, but they did not have a mandate to punish the conduct of any those involved. The proposed action plans were supervised by Monitoring Committees, which held monthly meetings among the teams to discuss improvements; the Health Committees held regular meetings with the patient care team and the relevant area manager. In relation to two of the main risks identified we established two specific workgroups. Firstly, the Commission for the Prevention of Risks for Accidents with Sharp Materials (PPRAMP); and, secondly, a work group for preventive actions in intra-hospital traffic in the movement of patients.

With the aim of contributing to preventing accidents and occupational diseases, the Internal Commission for Accident Prevention (CIPA) was responsible for surveying the risk perceptions of employees in relation to their activities and workplaces. We also provided the Conduct Channel for registering reports on

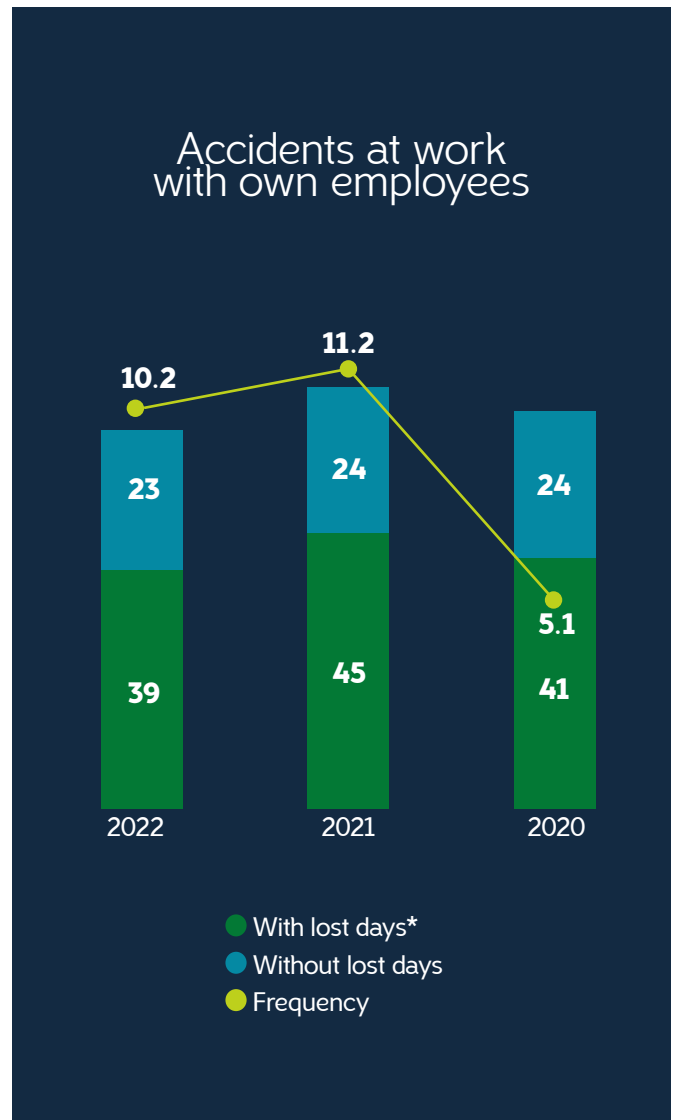


potentially dangerous situations in the workplace The system ensured the confidentiality of the reports and provided protection against potential reprisals.

In 2022, there were 62 accidents involving A.C.Camargo's own employees, 39 with lost days and 23 without. In relation to third-party staff there were 15 accidents, of which nine with lost days. None of the accidents led to a fatality of an employee, nor were there any cases of occupational diseases that were subject to mandatory reporting.

One of the important measures for mitigating occupational risks was the number of hours of training in occupational health and safety provided by the institution. During the year a total of **214 hours** of training was carried out with employees on the following themes:

- Fire and emergency brigade;
- Chemical product spill: containment flow and emergency activation;
- Isolation and precautions;
- NBR 14608 - Retraining of firefighters;
- NR 5 - Internal Commission for the Prevention of Occupational Accidents;
- NR 6 - Personal protective equipment;
- NR 10 - Safety in electricity installations and services;
- NR 17 - Ergonomics;
- NR 18 - Safety in civil construction work;
- NR 20 - Safety and health at work with flammable and combustible materials;



* EXISTENCE OF SERIOUS CONSEQUENCES (EXCLUDING FATALITIES)

- NR 32 - Radiological protection;
- NR 33 - Occupational health and safety when working in confined spaces;
- NR 35 - Safety when working at height;
- Environmental management system.



Comprehensive healthcare

GRI 401-3 | 403-6

At A.C.Camargo, we care for the carers.



Occupational Medicine
and Primary Care



Flu
symptoms



Pregnancy
Program



Gynecology



Immunization



Mental health



Smoking Program and
Medication for Diabetes/
Hypertension



Oncology
Attendance

Employees have access to a private healthcare plan and an in-company outpatient clinic, for both scheduled consultations and on-demand services.

The institution's Comprehensive Healthcare Program contributes to preserving the physical and mental health of our employees, ensuring better monitoring and disease prevention, in addition to improving their quality of life. The program includes the following benefits:

- Outpatient attendance focused on comprehensive care and prioritizing primary care, accompanying the entire healthcare cycle of prevention, patient care, health promotion and rehabilitation;
- Gynecological and psychological attendance;
- Smoking program;

- Attendance of cancer cases at the A.C.Camargo Cancer Center;
- Numerous additional benefits, such as dental care, discounts with gyms (Gympass) and drugstores, among others.

Parental leave

Maternity leave: 100 employees, with a return rate of 72%, and a retention rate of 70% after 12 months.

Paternity leave: 23 employees, with a return rate of 87%. The retention rate after 12 months has not been quantified for 2022.

We extended paternity leave by a further 5 days!



7

RELATED CAPITALS



LINKS WITH SOCIETY

PARTNERSHIPS FOR HEALTHCARE ADVANCEMENT

GRI 2-24 | ACC 45

Healthcare institutions

Our partnerships with healthcare institutions aim to avoid redundancy in investments, disseminate preventive healthcare practices and offer high-complexity cancer patients an excellent level of treatment.

Hospital Infantil Sabará (Sabará Children's Hospital)

This partnership agreement, signed in 2021, has the objective of **bringing together oncology and pediatric specialties**, to enable us to offer pediatric patients, from both institutions, a complete patient care journey. The format of the partnership is the provision of on-demand services. It involves the referral of high-complexity oncological cases to A.C. Camargo and the referral of non-oncological pediatric pathologies to the *Hospital Infantil Sabará*, with mutual guidance on diagnoses. Furthermore, it includes the provision by A.C. Camargo of a clinical oncologist in *Sabará's* physical structure to support cancer diagnosis, staging, treatment and interaction between medical teams. In 2022, 12 patients received integrated care under the agreement.

Hospital e Maternidade Santa Joana (Santa Joana Hospital and Maternity Clinic)

In 2022, A.C. Camargo and the *Hospital e Maternidade Santa Joana* (Santa Joana Hospital and Maternity Clinic) signed an agreement to establish a partnership for the

integrated care of newborn children and pregnant women, since this is an occasion when some women discover they have cancer. The partnership provides mutual medical support in the form of on-demand services, in which patients can have face-to-face or remote consultations with specialists.

Hospital Carinho (located in São José dos Campos SP)

Following institutional discussions to align objectives in 2022, the partnership will go into effect in 2023. The agreement foresees the referral of patients for chemotherapy, pathological anatomy, and participation in prevention programs.

Hospital Alemão Oswaldo Cruz (Oswaldo Cruz German Hospital)

This partnership was created to enable the *Hospital Alemão Oswaldo Cruz* to outsource certain pathological anatomy and genomics services and it can count on our expertise to carry out these important examinations for its patients.



Pharmaceutical companies

Our partnerships with pharmaceutical companies are the result of our vision of the future of healthcare. They have the objective of increasing patients' chances of cures by ensuring their access to new drugs. This will entail the designing of new business models and types of partnerships that allow for the optimized management of resources and the sharing of financial risks.

Healthcare plan operators

Based on the concept of emphasizing cost-effectiveness in oncology, our negotiations with healthcare plan operators aim to adopt indicators for the positive outcomes of patient care procedures. To guide our business activities, we are developing methodologies for providing cost-effective services and closed packages by type of treatment or surgery, often referred to as "bundles."

In these new models, in addition to the evolution towards service bundles and global rates for most healthcare plan operators, we carried out some specific projects with the following healthcare plan operators: Bradesco Saúde (cost-effectiveness indicators and integrated cycle); Unimed Seguros (bundles); Sulamerica (resource utilization indicators); Amil (plan segmentation and protocol management); among other operators.

For more information on our commitment to cost-effectiveness see page 25.

Corporate customers

We work together with companies on actions to promote the healthcare of their employees, especially in relation to cancer prevention, diagnosis, and treatment. During the oncology journeys of these company employees, we seek to reconcile their professional lives with the various stages of cancer treatment, defining a schedule that considers both oncological cycles and variations in work capacity.

Municipal healthcare

Municipal Secretary of Health

In 2022, we renewed our agreement with the São Paulo Municipal Health Department for the attendance of high-complexity cancer patients coming from the National Unified Health System (SUS).

Expansion of knowledge

The **A.C.Camargo Mission Project** is one of our priority social impact initiatives. The challenge is to disseminate our knowledge and best practices in cancer treatment throughout the country, through partnerships with Brazilian municipalities, and national and international organizations that are references in health and oncology. We have made an agreement with the organization **Comunitas** to support us in this mission of building innovative, evolving, and efficient partnerships with the public sector. For more information, see page 88.

Referral doctors

We have established a partnership format that creates a **direct channel between A.C.Camargo and doctors working in other institutions**.

Participating doctors refer patients to our specialized service.

Under the rules of these structured agreements, A.C.Camargo provides constant feedback on the evolution of the referred patients, and offers these doctors access to information, tools, education initiatives and services, among other benefits. In 2022, partner doctors referred 3,285 new patients, the result of 30 structured actions with them aimed at strengthening their bonds with the institution.



1,200
referral doctors
impacted



RESPONSIBILITY AND SOCIAL IMPACT



The Strategic Plan for 2023-2025 was based on a new perspective for A.C. Camargo's social responsibility initiatives, namely: **offer society our knowledge in oncology**. We intend to meet this objective, by means of the following three social impact initiatives: **A.C. Camargo Mission Program, Dona Carolina Tamandaré Program, and the Escola Especializada Schwester Heine (Schwester Heine Specialized School)**.

A.C. Camargo Mission Program

The **A.C. Camargo Mission Program** was designed to disseminate our accumulated cancer knowledge among the Brazilian population in general. It has the potential to have a high social impact by providing information and best practices in cancer prevention, diagnosis, and treatment in the context of the different realities and challenges in oncology in the different regions of Brazil.

The program, which was established as a result of the Strategic Plan for 2023-2025, will expand its activities to the national level, by **providing specialized knowledge and successful procedures to public entities** to help them meet the challenges faced in dealing with oncology cases or improving healthcare services.

We aim to develop a **local projects model**, through partnerships with municipal public authorities. We will

offer support in technical matters, patient care, and management in oncology, through actions in **education, training, access to prevention, diagnosis, treatment, and knowledge dissemination**.

In 2022, a partnership was signed with *Comunitas*, a non-profit entity, to use its methodology of encouraging transparent and agile public management as a model for local projects in the phases of mapping the opportunities and planning their execution.

We will also develop a **thematic approach**, in which we will support government agencies in relation to cancer prevention with a focus on the early diagnosis of the most prevalent tumors in the Brazilian population.

Looking ahead, we understand that, by focusing on early diagnosis, the project will contribute to an improvement in survival rates.



The program aims to expand our patient care, education, and research activities in oncology throughout the country.

For more information see:
www.accamargo.org.br
11 2189-5000
impactosocial@accamargo.org.br



Dona Carolina Tamandaré Program

GRI 2-24 | ACC 26

The program, which has been in operation since 2016, evolved conceptually in 2022, when we brought an oncological perspective to its activities. Today, the *Dona Carolina Tamandaré* Program, an integrated part of our priority social impact strategy, focuses on the employability of the teenagers and young adults who have survived cancer and are in a situation of social vulnerability. By directing our efforts to focus on young people who have experienced cancer treatment, we aim to prepare them to overcome this difficult phase of life. We will support them in their social and professional reintegration, promoting their productivity and well-being, helping them to live their youth with good physical and mental health. To achieve this, the program offers them vocational analysis, professional guidance, language and computer courses, technical training, job market training and follow-up until they obtain their first job.

In 2022, in the context of this new vision **the program assisted 13 families of children and adolescents in situations of social vulnerability**, who received treatment in the recently-inaugurated Pediatric Tumors RC.

Social Impact Executive Committee

Created in 2022, this committee will monitor the progress of the social initiatives supported by the institution. Furthermore, it will seek to scale up the impact generated in society, ensuring both the dissemination of cancer care and the construction of a legacy.

Escola Especializada Schwester Heine

GRI 2-24 | ACC 27

The *Escola Especializada Schwester Heine* (Schwester Heine Specialized School) is a national reference in kindergarten and secondary education for children and adolescents in hospital or in outpatient monitoring. It has the support of the São Paulo Municipal and State Departments for Education and aims to ensure the continuity of these students' studies during cancer treatment, in cooperation with the student's original school. In addition to avoiding delays in completing their studies, the project assists these young patients during their return and reintegration into school life. The project benefited **155 students in 2022**, with a total of more than **5,155 pedagogical attendances**.



RELATED CAPITALS



SUSTAINABILITY PLATFORM

EVOLUTION OF THE MATERIAL TOPICS



Focus on people



Focus on the future



Focus on the environment



Focus on the value chain

Focus on people

GRI 2-23 | 2-24 | ACC 16

Diversity and Inclusion Program

A.C.Camargo promotes a workplace that welcomes social and cultural diversity among employees of all profiles of race, religion, physical ability, age, gender, marital status, and ideologies, without distinction of their beliefs, and with respect for individual decisions. In the context of this plural environment, in 2022, we launched two affinity groups dedicated to the themes of **People with Disabilities** and **Gender**, and we continued to adhere to the **Empowering Refugees Seal** of the UN High Commission for Refugees (UNHCR).

Another initiative was the creation of the Diversity and Inclusion group, which disseminated communication

materials through the recently launched Workplace platform to raise employee awareness in relation to working in a diverse and inclusive environment.

Social Impact

After an important period of reflection initiated in 2021, on how to prioritize A.C.Camargo's social impact contribution to the UN Sustainable Development Goal (SDG) 3 - Health and Wellbeing, we decided to employ our best asset: the **oncological perspective**. As a result, we created the A.C.Camargo Mission Program and reformulated the *Dona Carolina Tamandaré* program. For more information on our social responsibility and impact initiatives see page 88.



Focus on the future

GRI 2-23 | 2-24 | ACC 16

Social Impact and Evolution Reserve (RISE)

The existing Endowment Fund for the Promotion of Education and Research was transformed into the Social Impact and Evolution Reserve (RISE) after deliberation and approval by the Board of Trustees.

In this new strategy to support the financial sustainability of the Antônio Prudente Foundation, RISE's resources and income will, as of 2022, be used to boost and develop education, research and institutional actions that have a social impact.

RISE receives donations from individuals and companies that are interested in supporting the constant evolution of oncology in the country and promoting their own legacies.

For more information on RISE see: https://accamargo.colabore.org/rise/single_step

Fundraising portfolio

With the objective of receiving financial support to enable it to achieve its important institutional initiatives and, at the same time, promoting a culture of donation for healthcare causes, the fundraising portfolio is an evolution of the previous institutional relations and social contribution strategy.

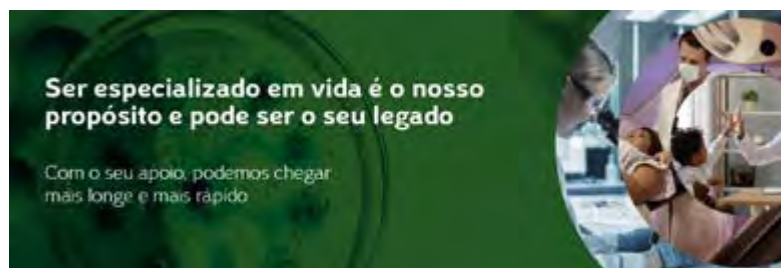
In practice, individuals and organizations have the autonomy to direct their contributions to specific projects of interest on the donation page of the institution's website, and they may also define the frequency of the donation.

Donations made to RISE will help to expand the institution's positive social impact on Brazilian oncology, by funding the activities shown below:



If you wish to support the legacy of oncology transformation, see: <https://accamargo.org.br/apoie-nossa-causa/doacao-projetos>

In relation to the activities of patient care, innovation, education, research, and social impact, in 2022, the portfolio consisted of seven projects, with the highlights being significant donations to two patient care initiatives: the Pediatric Tumors RC and the CAR-T cell laboratory.



Although being specialized in life is our purpose, it can also be your legacy. With your support, we can go further and faster.



Focus on the value chain

GRI 2-6 | 2-23 | 2-24 | 204-1 | ACC 16

Our value chain is composed of **2,558 suppliers**, of which 728 direct and 1,830 indirect, and the majority (74%) are in the State of São Paulo. During the year we invested R\$833.5 million in the acquisition of approximately **30 thousand items** and, of this total, 98% went to domestic suppliers.

Type of product or service	Direct	Indirect	Total	Amount allocated (R\$)	Breakdown by value
Hospital supplies/OPME*	379	-	379	100.6	12%
Medicinal and hospital supplies	261	-	261	353.9	42%
Nutrition	88	-	88	11.2	1%
Services	-	924	924	308.7	37%
Other materials and equipment	-	642	642	44.2	5%
Imports of products, materials, and equipment	-	264	264	14.9	2%
Total	728	1,830	2,558	833.5	
2021	679	1,635	2,314	728.3	
2022 vs. 2021	+7%	+12%	+11%	+14%	

* ORTHOSES, PROSTHESES AND SPECIAL MATERIALS.

Sustainable goods and services

GRI 2-29 | 308-2

Due to the complexity of managing supply and value chains, this subject gained greater importance in 2022. We carried out a cross-check between supply risks and social and environmental risks related to suppliers, with a considerable allocation of financial resources during the year. Based on this analysis, we incorporated social and environmental screening criteria into the standard supplier performance analysis questionnaire. This enabled us to better

assess them in terms of regulatory, technical, social, environmental and safety aspects. In order to maintain their approval status to work with the institution, the suppliers classified in the categories "approved with restrictions" or "failed" in the analysis of the questionnaire must present action plans within 90 days and improvement plans within 45 days. These plans will be evaluated in relation to their responses to addressing the critical points raised.



Focus on the environment

GRI 2-23 | 2-24 | 2-25 | ACC 16

With the aim of strengthening the culture of the responsible use of natural resources in A.C.Camargo's operations, we have defined a set of key environmental indicators that must be monitored by everyone in the institution. The performance against these indicators is regularly published in the institution's Workplace channel. In 2022, we expanded the scope to seven indicators, and the results achieved were within the target limits set for the year. The highlights in the performance versus the targets were the indicators for reams of paper consumption (-21%) and printed pages (-13%), as a result of the Paperless project, and we also reduced total solid waste generation (-13%).

Indicator	Unit	Result	Target for 2022	Result vs. Target
Water consumption	m ³ /m ²	1.23	1.24	-1%
Electricity consumption	kWh/m ²	210	213	-1%
Waste generation	kg/m ²	14	16	-13%
GHG emissions	tCO ₂ e	8,554	9,704	-12%
Consumption of A4 paper	Reams	26,564	33,759	-21%
Printing	Pages	15,616	17,878	-13%
Number of environmental events*	Units	17	–	–

* THE EVENTS THAT OCCURRED IN 2022 WERE AS FOLLOWS: CHEMICAL PRODUCT SPILLS - FORMOL, QT, PAINT, ETC (10.); INSTANCES OF NOISE POLLUTION (4); INCIDENTS OF FALLING TREE BRANCHES (2); AND OIL LEAK - WASTE DELIVERY TRUCK (1).

Combating climate change

For the second year running, we prepared an inventory of our greenhouse gas (GHG) emissions for Scope 1 (direct), Scope 2 (indirect from purchased electricity) and, partially, Scope 3 (indirect in the value chain). In an important milestone for our evolution on this theme, in 2022, senior management approved two important investments: external audit of the future GHG emissions inventories, and the publication of the results in the public registry of the Brazilian GHG Protocol Program, beginning in 2023.

Paperless project

The *Paperless* project was originally developed in 2021 as a pilot study for the service and billing areas. It aimed to promote the reduction of paper consumption for printing documents. Following its success, this practice was expanded to include the entire "revenue cycle," by adopting the use of digital signatures in corporate procedures, and it has also been partially implemented in patient care. Overall, we reduced paper consumption (in reams) by 21% and the number of printed pages by 13%. Due to the benefits identified in increased speed and improved traceability of processes, further actions will be taken to leverage the results achieved, as from 2023.



ENVIRONMENTAL INDICATORS

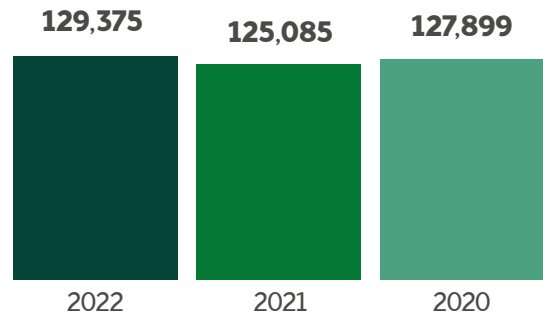


Water

GRI 303-3 | 303-5

In 2022, we consumed around 129 thousand cubic meters of water considering both the municipal water supply company and deliveries by contracted companies, representing an increase of 3.4% compared to 2021.

Water consumption (m³)

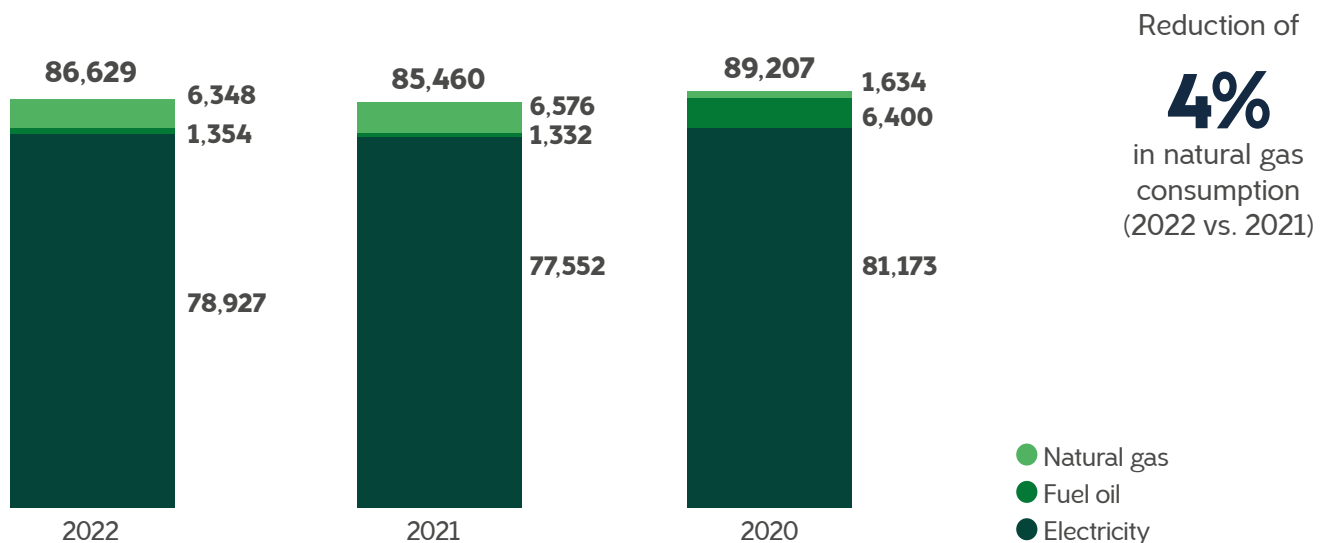


Energy

GRI 302-1 | 302-3 | 302-4

Our total energy consumption within the organization was 86,600 GJ, 91% of which was supplied from electricity and 9% from fossil fuels. Our operations require permanent and intensive energy consumption. During the year our electricity intensity indicator registered 0.7 gigajoules/patient-day.

Energy consumption (GJ)





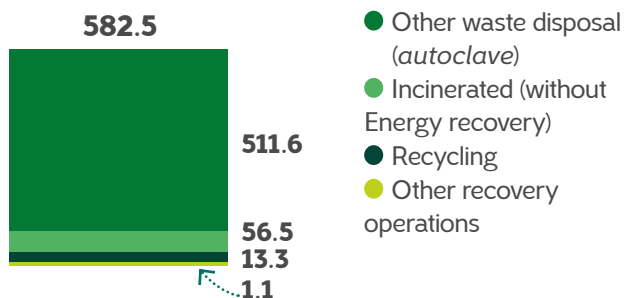
Waste*

GRI 2-25 | 306-1 | 306-2 | 306-3 | 306-4 | 306-5 | HC-DY-150A.1

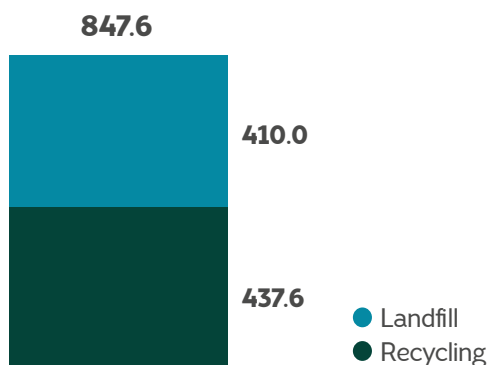
The institution's seven operating units generated a total of 1,430 tons of waste in 2022, an 11% reduction compared to 2021. This consisted of 41% of hazardous waste and 59% of non-hazardous waste. Of the total waste generated, 32% was reused, recovered, or recycled.

Hospital waste was treated in an autoclave or incinerated. In addition to the hospital waste from patient care operations, in 2022, the reformulation of the patient care infrastructure resulted in an increased volume of civil construction waste.

Hazardous waste (t)



Non-hazardous waste (t)



* DUE TO ITS INCORPORATION INTO OPERATING PRACTICES, THE TOPIC OF WASTE MANAGEMENT WAS REMOVED FROM THE RESPONSIBILITY OF THE SUSTAINABILITY PLATFORM IN 2022.



The waste generated can potentially have adverse impacts in terms of soil, water, and air pollution. The handling, transport, and storage of waste within the institution's units are carried out by our own trained team. The final disposal of waste is the responsibility of third-party specialist companies that are supervised by our team. To avoid the occurrence of incidents with adverse impacts, we strictly adhere to the guidelines of the Solid Waste Integrated Management Plan (PGIRS).

In 2022, we reduced the generation of recyclable waste by around 193 tons, compared to 2021. In the case of cardboard packaging, we developed a reverse-logistics program with the support of suppliers that saved around 100 tons of primary packaging used in the transportation of medicines. We also continued to provide regular training courses for the team responsible for the Environmental Management System. The courses focused on presenting best practices that could then be adopted in the daily work routine with a view to reducing waste in all our activities.

Waste generated (t)

	2022	2021	2020	Variation 22 vs. 21
Total	1,430.1	1,600.3	1,658.9	-11%
Hazardous waste	582.5	594.7	645.5	-2%
Healthcare services - Group A (infectious)	513.0	527.0	578.4	-3%
Healthcare services - Group B (chemical)	55.1	59.4	49.7	-7%
Hazardous civil construction / industrial waste (recyclable)	14.4	8.3	17.5	74%
Hazardous civil construction / industrial waste (non-recyclable)	0.0	0.0	0.0	-
Non-hazardous waste	847.6	1,005.7	1,013.4	-16%
Healthcare services - Group D (common) + civil construction and industrial waste (common)	410.0	368.9	429.6	11%
Healthcare services - Group D (recyclables) + civil construction and industrial waste (recyclables)	437.6	636.8	583.8	-31%



Greenhouse Gases (GHG)

GRI 2-25 | 305-1 | 305-2 | 305-3 | 305-4 | 305-5

Aware of its responsibility to contribute to the challenge of mitigating global climate change, in 2022, A.C. Camargo prepared another edition of its GHG inventory. The process followed the specifications of the Brazilian GHG Protocol Program and was verified by an independent auditing company. The total emissions for all A.C. Camargo's units amounted to 8,500 tCO₂e, 87% of which were due to the direct emissions (Scope 1) in its operations arising from the consumption of natural gas, diesel oil, extinguisher recharging, medical gases (nitrous oxide) and refrigerants (air conditioning). As a measure to off-set this impact, the institution purchased renewable energy certificates equivalent to around 11% of its total emissions.

GHG emissions (tCO₂e)

	2022*	Type of Emission	Biogenic
Total	8,553.9	100%	29.3
Scope 1 - Direct emissions (operations)	7,467.9	87%	8.1
Scope 2 - Indirect emissions (purchased electricity)	933.9	11%	-
Scope 3 - Indirect emissions (value chain)	132.1	2%	21.2
Emission intensity (tCO₂e/patient-day)	0.11		
Emission off-setting			
Purchase of renewable energy certificates (I-RECs: 21,438 MWh)	915.2		

* INCLUDES GREENHOUSE GASES NOT COVERED BY THE KYOTO PROTOCOL. DATA IS STILL BEING VERIFIED BY AN ACCREDITED VERIFICATION BODY.

The institution
off-set

98%

of its Scope
2 emissions
by purchasing
renewable
energy
certificates.



9

RELATED CAPITALS



FINANCIAL SUSTAINABILITY

FINANCIAL PERFORMANCE

GRI 201-1 | ACC 32 | 33 | 36

Net revenue rose to R\$1.53 billion* in 2022, an increase of 16% compared to 2021, with a distribution of value added of R\$719.5 million.

In 2022, revenue from net hospital activities rose to R\$1.44 billion, an increase of 26% compared to 2021, due mainly to the increased number of patients

treated in the A.C. Camargo Cancer Center. Part of this increase in revenue resulted from the demand repressed during the Covid-19 pandemic. The increase in revenue enabled the institution to expand its investments in its hospital complex by 105%, and so increase its offer of oncology treatment to society.

* INCLUDES REVENUE FROM ATTENDING PATIENTS FROM BOTH PRIVATE HEALTHCARE PLANS AND REFERRALS FROM THE SUS SYSTEM (+) INCENTIVES RECEIVED FROM THE MUNICIPAL HEALTH SECRETARIAT (-) PROVISION FOR DISALLOWED PAYMENTS (-) CANCELLATIONS AND COMMERCIAL DISCOUNTS.



Demonstration of Value Added (Fundação Antônio Prudente)	2022 (R\$ thousand)	2021 (R\$ thousand)
Revenues		
Revenue from hospital operations	1,441,446	1,142,277
Other revenue	43,057	159,036
Revenue related to the construction of own assets	63,479	35,437
Provision for doubtful debts	-17,266	-17,418
Inputs purchased from third parties		
Cost of goods and services sold	-721,308	- 640,373
Materials, energy, and third-party services	-214,999	- 178,517
Provision for losses in inventory and fixed assets	-2,109	-3,824
Gross value added	592,300	496,618
Depreciation and amortization	-87,974	-79,965
Net value added	504,326	416,653
Value added received in transfers		
Financial income	215,153	67,199
Total value added to be distributed	719,479	483,852
Distribution of value added		
Salaries and benefits	306,300	281,419
Direct remuneration	220,908	202,702
Benefits	64,524	59,568
FGTS	20,868	19,149
Taxes, charges, and contributions	2,536	2,926
State	28	584
Municipal	2,508	2,342
Expenses for SUS procedures	103,029	110,921
Remuneration of third-party capital	42,225	42,226
Interest income	37,975	39,298
Rents	4,250	2,928
Remuneration of own capital		
Surplus for the year	265,389	46,360
Total value added	719,479	483,852

To see the explanatory notes that accompany the Demonstration of Value Added, and for further information on the institution's financial performance, please refer to the institution's financial statements for 2022 using the QRCode.





ECONOMIC AND FINANCIAL MANAGEMENT

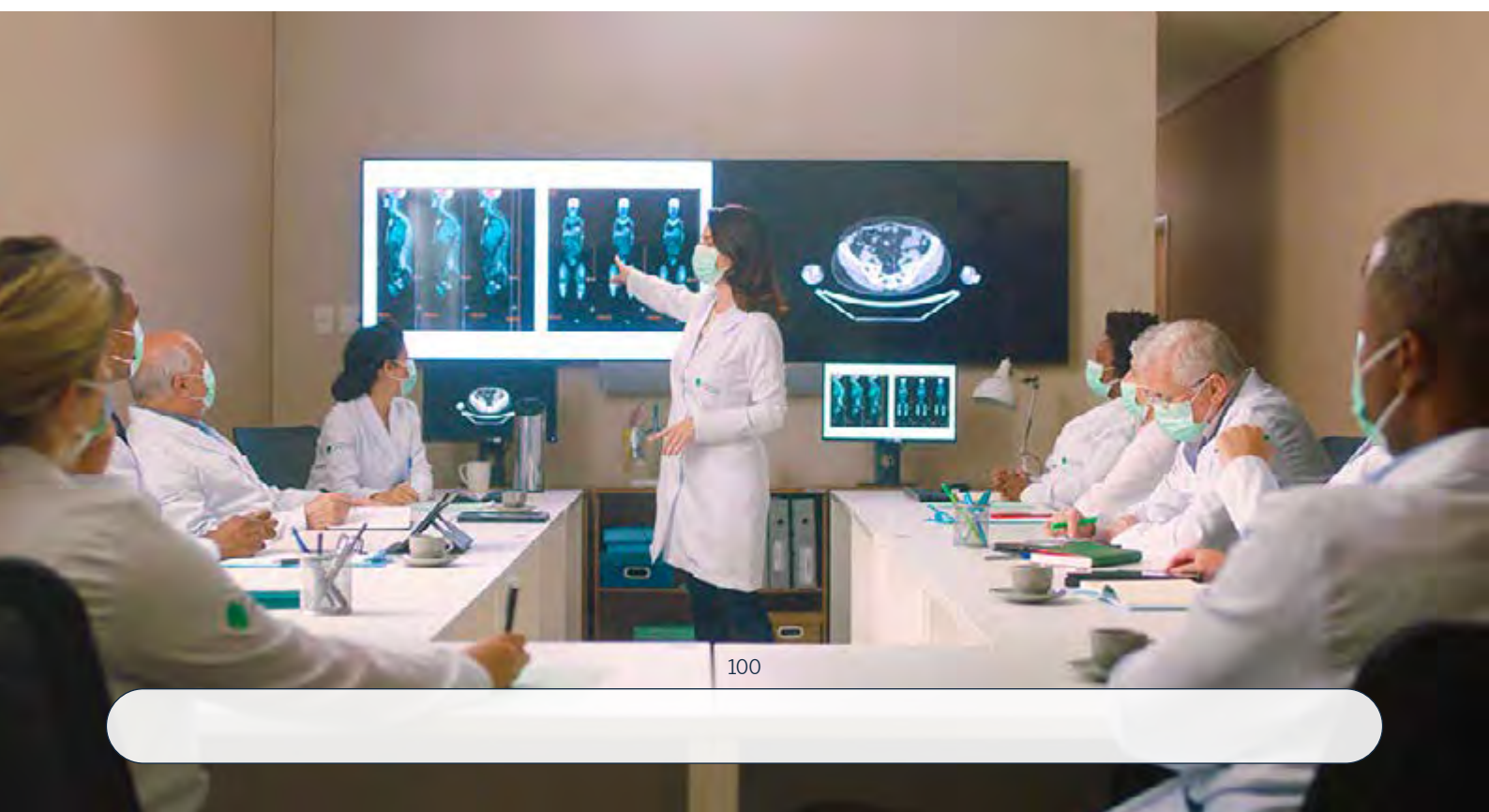
GRI 201-4 | SASB HC-DY-240A.1 | ACC 51

In 2022, we revised our classification of the four categories of healthcare plans. This resulted in a reduction in the proportions and revenues of the Basic Vital, Basic, and Premium plans compared to the Intermediate plans. Also, during the year, we renewed our agreement with the Municipal Health Department of São Paulo (SP) in relation to patients referred from the National Unified Healthcare System (SUS), focusing on attendances for high-complexity cancer patients.

Looking to the future, we carried out a review of our costs and product offerings based on **cost-effectiveness** performance indicators, and repositioned the institution in relation to the disclosure of these patient care and operational quality indicators. We also worked constantly to develop new remuneration models to address the challenges of the existing models in the oncology sector, in a year marked by major acquisitions and mergers in the supplementary healthcare sector.

Breakdown of patients by segment

Category	2022 (%)	2021 (%)
Basic Vital Plan	10.4	16.5
Basic Plan	3.9	9.4
Intermediate Plan	80.2	64.0
Premium Plan	5.5	10.1





INVESTMENTS

GRI 203-1 | ACC 37

In 2022, we made investments to improve infrastructure and technology, in a total amount of **R\$119.5 million**, an increase of 105% compared to 2021. The main investments were as follows: reformulation of the physical spaces for **endoscopy** (Antônio Prudente Unit), **pediatrics** (transferred from the Tamandaré Unit to the Antônio Prudente Unit) and **rehabilitation** (Tamandaré Unit). The reformulations were designed to create a humanized

setting with increased comfort, accessibility, and physical, cognitive, and organizational ergonomics, to improve patient care. In addition, a new area was inaugurated **in the interventional radiology ward**, with the replacement of the CT scanner, ultrasound, and procedure room. This upgrading of equipment, together with its operation by a specialized team, resulted in an increase in the technology, quality, and safety of our radiotherapy treatments.

Investments implemented

Type of investment	Highlights	2022 (R\$ million)	2021 (R\$ million)
Refurbishments and retrofits	Reformulation of the new pediatrics area, refurbishment of the endoscopy sector, revitalization of physiotherapy for rehabilitation, including civil construction and electrical works.	66.5	11.1
Information Technology	Technological upgrades (including hardware replacement), Tasy System, Data Center, new human resources platform and adaptations of systems to meet LGPD requirements.	24.4	25.7
Equipment replacement	Replacement of hospital equipment including anesthesia, pulmonary ventilators, pathological anatomy, endoscopy, surgical center, and the installation of electronic dispensaries.	23.9	16.8
New equipment and projects	Equipment for research with CAR-T cells, the Itaim Unit, innovation initiatives and partnerships with startups for the development of medical products.	4.6	4.8
Total		119.5	58.4



FINANCIAL RESOURCES FOR RESEARCH

GRI 201-4 | ACC 31 | 34

A.C. Camargo's research is funded by: financial resources from national and international development agencies; the Ministry of Health; donations from individuals and companies; studies sponsored by pharmaceutical companies, which totaled approximately R\$3 million, and own resources from the Fundação Antônio Prudente, which totaled R\$14.6 million in 2022.

Financial resources for research

Source		2022 (R\$ thousand)	2021 (R\$ thousand)	2020 (R\$ thousand)
Total resources		17,626	21,313	17,715
Antônio Prudente Foundation - own resources		14,559	16,731	13,348
National	Total national sources	2,823	4,160	4,180
	Development agencies (FAPESP)	1,235	1,300	1,579
	Grants	757	825	-
	Scholarships	478	475	-
	Development agencies (CNPq)	589	725	739
	Grants	196	222	-
	Scholarships	392	503	-
	Ministry of Health (PRONON)	816	1,896	1,570
	Personalized Medicine	296	882	-
	Microbial Profiles	423	962	-
	Biobanco (Biobank)	98	52	-
	Ministry of Health (PRONAS)	0,0*	0	0



Source		2022 (R\$ thousand)	2021 (R\$ thousand)	2020 (R\$ thousand)
National	Conduct Adjustment Agreements (TAC)	53	42	138
	TAC CTC (cc 15014)	33	36	-
	TAC CTC (cc 90717007)	20	6	-
	Other*	131	197	153
	HCOR - RENOVATE (90717002)	0*	9	-
	HCOR - HALO (90717004)	0,2	26	-
	HCOR - IMPACTO-MR (3904)	2	-	-
	FUNDAÇÃO CONRAD WESSEL (90717006)	54	55	-
	ROCHE (90717009)	6,6	1	-
	BDF NIVEA (90717010)	8	92	-
	AMGEN (90717011)	0**	12	-
	LIBBS (90717013)	23	2	-
	BAYER SA (BHC0233/2019)	4	-	-
	BMS (CA 209-950)	17	-	-
	LACOG (0116)	9	-	-
	LACOG (1918)	8	-	-
	Total international sources	243	421	187
International	IARC/WHO – Mutographs (cc 90717001)	9.5	8	32
	IAEA (CTC - Radio) (cc 15019)	14	1	-
	UNIVERSITY OF CALIFORNIA (90717005)	1.5	97	-
	UNIVERSITY OF CALIFORNIA (11935SC)	0**	-	-
	LADY DAVIS (90717008)	0*	160	-
	NIRVANA-PFIZER (15018)	203	154	-
	CARL ZEISS (3811)	15	-	-

* PROJECT TERMINATED

** PROJECT ONGOING BUT WITHOUT EXPENSES

NOTE: INCLUDES OPERATING EXPENSES (OPEX).



10 INDICATORS

GRI CONTENT LIST

INDICATORS		REFERENCE (PAGE)/DIRECT RESPONSE
Universal standards		
The organization and its reporting practices		
2-1	Organizational profile	The A.C.Camargo Cancer Center is a private, non-profit institution, whose legal name is the Fundação Antônio Prudente. Pages 9-11 and 27.
2-2	Entities included in the organization's sustainability reports	100% of its operations: Units of Antônio Prudente, Tamandaré, Pires da Mota, Castro Alves Assistance, Castro Alves Administrative, Itaim, and the International Research Center (CIPE). This report provides information on the same units reported in the financial statements. Pages 10 and 11.
2-3	Reporting period, frequency and point of contact for questions on the report	Annual, from January 1st to December 31st, 2022. More details on page 4.
2-4	Restatements of information	There were no restatements.
2-5	External assurance	The report was externally assured. In order to ensure the transparency of our reports, A.C.Camargo's Board of Trustees appointed KPMG Assessores Ltda, an independent external auditor with global experience in sustainability services, to verify this Integrated Annual Report, prepared according to the GRI Standard.
Activities and employees		
2-6	Activities, value chain and other business relations	Page 92.
2-7	Employees	Page 74.
2-8	Workforce members who are not employees	On average, 430 third-party staff worked in support activities, such as food preparation, hygiene, and parking.
Governance		
2-9	Governance structure and composition	Pages 27-34.
2-10	Nominating and selecting the highest governance body	The highest governance body is the Board of Trustees. It is composed of nine independent members, with a two-year mandate. Pages 29 and 35.



INDICATORS		REFERENCE (PAGE)/DIRECT RESPONSE
2-11	Chairman of the Board	The Chairman of the Board does not have any executive functions. Page 29.
2-12	Board of Trustee's role in managing impacts	The Board of Trustees is supported by six Advisory Committees: Corporate Governance; Clinical Governance and Medical Practices; Scientific Advisory Board; People and Organizational Development; Strategy, Innovation and Sustainability; and Audit, Risks and Finance. Pages 29, 30 and 45.
2-13	Delegation of responsibility for managing impacts	The Sustainability Platform reports to the Legal, Governance and Institutional Relations Directorate and has the support of the Executive Board and the People and Organizational Development Superintendency. Pages 30 and 45.
2-14	Highest governance body's role in sustainability reporting	The report was validated by the Executive Board and the Board of Trustees. The Directors of the Executive Board were consulted to determine the topics that would be addressed in this report. Page 4.
2-15	Conflicts of interest	The Code of Conduct provides the guidelines on practices related to the subject.
2-16	Communication of critical concerns	The CEO and Directors of the Executive Board are responsible for communicating critical concerns to the Board of Trustees at their meetings. Pages 43 and 49.
2-17	Collective knowledge of the highest governance body	Currently, no measures are taken to develop and improve collective knowledge about sustainable development. However, Board Members have considerable experience and knowledge on issues such as social and environmental responsibility, diversity, and inclusion.
2-18	Evaluating the highest governance body's performance	Page 34.
2-19	Remuneration policies	Page 35.
2-20	Process for determining remuneration	Page 35.
2-21	Annual total compensation ratio	Confidential information.
Strategy, policies, and practices		
2-22	Statement on sustainable development strategy	Pages 5-8
2-23	Policy commitments	Pages 90-93.
2-24	Embedding commitment policies	Pages 19, 86 and 89-93.
2-25	Processes to remedy negative impacts	Pages 49, 93, 95 and 97.
2-26	Mechanisms for seeking advice and raising concerns	Page 43.
2-27	Compliance with laws and regulations	An important result of our commitment to governance and risk management was that no significant cases of non-compliance with laws and regulations were registered in 2022. Significant cases were defined as those where there was a need for legal action for their resolution.



INDICATORS		REFERENCE (PAGE)/DIRECT RESPONSE
2-28	Membership of associations	ANAHP - National Association of Private Hospitals We have institutional representatives in 14 ANAHP working groups, aiming to contribute with their technical vision in strategies for the constant evolution of the healthcare sector. Additionally, our CEO, Victor Piana, is the Coordinator of the Oncology Work Group.
		Ethos Institute for Business and Social Responsibility For the second year running we completed the "Ethos Indicators" questionnaire which assesses the degree of institutional maturity in ESG.
		UICC - Union for International Cancer Control A.C.Camargo has been a member since 2012 and has actively participated in the Master Course of the entity's World Congress, by providing representatives in the select group of speakers.
Stakeholder engagement		
2-29	Approach to stakeholder engagement	Patients – Pages 58 and 59. Employees – Page 79. Suppliers – Page 92. Communities – Pages 39–42.
2-30	Collective bargaining agreements	100% coverage of employees.
Material topics		
3-1	Process to determine material topics	We prepared a materiality matrix in 2022, based on consultations with 3,266 stakeholders, and a market analysis for the sectors of A.C.Camargo's activities, prioritizing the topics with greater potential for impacting the business. For more information, see page 39.
3-2	List of material topics	Pages 39–42.
3-3	Management of material topics	The material topics were reviewed in 2022 and their management evolved in the context of A.C.Camargo's business. Pages 39–42.
Topic Standards - Economic Content		
Economic performance		
201-1	Direct economic value generated and distributed	Pages 19, 26 and 98.
201-3	Defined-benefit plan obligations and other retirement plans	The institution's private pension plan is offered to salaried (CLT) employees. The beneficiary contributes 5% and the institution contributes 3% of the nominal salary, with a coverage of 50% in 3 years and 100% in 5 years.
201-4	Financial assistance received from government	The institution receives financial transfers through an agreement with the Municipal Health Department of the Municipality of São Paulo (for funding SUS procedures) and from a research funding agency (grants and scholarships). For more information see pages 100 and 102.
Indirect Economic Impacts		
203-1	Investments in infrastructure and services supported	Page 101.



INDICATORS		REFERENCE (PAGE)/DIRECT RESPONSE
Procurement Practices		
204-1	Proportion of spending on local suppliers	Page 92.
Anti-corruption		
205-1	Operations assessed for risks related to corruption	Page 43.
205-2	Communication and training about anti-corruption policies and procedures	Page 43.
205-3	Confirmed incidents of corruption and actions taken	In the Conduct Channel, no situations of corruption considered valid were recorded. Page 43.
Topic Standards - Environmental Content		
Energy		
302-1	Energy consumption within the organization	Total consumption: 86.6 thousand GJ. Page 94.
302-3	Energy intensity	Electricity: 0.7 GJ/patient-day. Page 94.
302-4	Reduction of energy consumption	1.4% reduction in total energy consumption and 4% reduction in natural gas consumption. Page 94.
Water		
303-3	Water withdrawal	Municipal water supply and contracted companies. Page 94.
303-5	Water consumption	Total consumption: 129.4 thousand m ³ . Page 94.
Emissions		
305-1	Direct GHG (Scope 1) emissions	Page 97.
305-2	Energy indirect GHG (Scope 2) emissions from purchased electricity	Page 97.
305-3	Other indirect GHG (Scope 3) emissions	Page 97.
305-4	GHG emissions intensity	Page 97.
305-5	Reduction of GHG emissions	Page 97.
305-6	Emissions of ozone-depleting substances (ODS)	Not applicable.
305-7	Nitrogen oxides (NOx), Sulfur oxides (SOx) and other significant atmospheric emissions	Not applicable.
Waste		
306-1	Waste generation and significant waste-related impacts	Total of 1,430 tons (41% hazardous and 59% non-hazardous). Page 95.
306-2	Management of significant waste-related impacts	Page 95.
306-3	Waste generated (type and method of disposal)	Page 95.



INDICATORS		REFERENCE (PAGE)/DIRECT RESPONSE
306-4	Waste diverted from disposal (recovery, reuse, and recycling)	Page 95.
306-5	Waste directed to disposal	Page 95.
Supplier Environmental Assessment		
308-2	Negative environmental impacts in the supply chain and actions taken	Page 92.
Topic Standards - Social Content		
Employment		
401-1	New employee hires and turnover	Page 77.
401-3	Parental leave	Page 85.
Occupational Health and Safety		
403-1	Occupational health and safety management system	Page 83.
403-2	Hazard identification, risk assessment and incident investigation	Page 83.
403-3	Occupational health services	Page 83.
403-4	Worker participation, consultation and communication on occupational health and safety	Page 83.
403-5	Worker training on occupational health and safety	Page 83.
403-6	Promotion of worker's health	Pages 83 e 85.
403-7	Prevention and mitigation of occupational health and safety impacts directly linked by business relationships	Page 83.
403-8	Workers covered by an occupational health and safety management system	100% of salaried (CLT) employees (3,717) are covered by an occupational health and safety management system, submitted to internal and external audits. 100% of third-party staff (160) are covered by an occupational health and safety management system, submitted to internal and external audits.
403-9	Work-related injuries	Page 83.
403-10	Work-related ill-health	Page 83.



INDICATORS		REFERENCE (PAGE)/DIRECT RESPONSE
Training and Education		
404-1	Average hours of training per year, per employee	20 hours of training per employee. Page 81.
404-2	Programs for upgrading employees' skills and transition assistance	Programs for developing employee skills. Page 81. The institution does not have programs aimed at employability and end-of-career management.
404-3	Percentage of employees receiving regular career development and performance reviews	100% of employees. Page 81.
Diversity and Equal Opportunity		
405-1	Diversity of governance bodies and employees	Pages 34 and 74.
405-2	Ratio of basic salary and remuneration of women to men	Page 77.
Non-discrimination		
406-1	Incidents of discrimination and corrective actions taken	Pages 43, 55 and 80.
Child labor		
408-1	Operations and suppliers at significant risk for incidents of child labor	All contracts signed with suppliers and partners include a declaration of commitment to the effective abolition of child labor (Term of Adherence and Commitment to Compliance Program of the Antônio Prudente Foundation).
Forced or Compulsory Labor		
409-1	Operations or suppliers at significant risk for incidents of forced or compulsory labor	We consulted the Ministry of Labor's Register of Employers, on the Federal Government's website, who have been known to subject workers to compulsory labor conditions prior to approving a supplier.
Security Practices		
410-1	Security personnel trained in human rights policies or procedures	100% of security staff and supervisory leaders, both in-house and outsourced, received formal training in institutional policies and procedures related to human rights and their applicability to security.
Consumer Health and Safety		
416-1	Assessment of the health and safety impacts of product and service categories	Page 55.
416-2	Incidents of non-compliance concerning the health and safety impacts of products and services	Page 55.
Customer Privacy		
418-1	Substantiated complaints concerning breaches of customer privacy and losses of customer data	Page 46.



SASB CONTENT LIST



INDICATORS		REFERENCE (PAGE)/DIRECT RESPONSE
Waste management		
HC-DY-150a.1	Description of the total amount and percentage of medical waste by destination (a) incinerated, (b) recycled or treated, and (c) sent to landfill	Page 95.
Access for low-income patients		
HC-DY-240a.1	We are discussing a strategy for managing the patient mix between insured and uninsured (SUS) patients, including alternative pricing programs	Page 100.
Quality of care and patient satisfaction		
HC-DY-250a.2	Number of Serious Events Number of Reportable Major Events as defined by the National Quality Forum (NQF)	Page 53.
HC-DY-250a.3	Hospital-acquired Condition score	Page 53.
HC-DY-250a.4	Excess readmission rate by hospital	"Rehospitalization rate within 30 days". Page 53.
Employee Recruitment, Development & Retention		
HC-DY-330a.2	Description of talent recruitment and retention processes for healthcare employees and practitioners	<p>We have a competency-based assessment management system with the following aims:</p> <ul style="list-style-type: none"> • Maintain the alignment of the availability of skills to the organizational strategy; • Stimulate the process of communication among employees; • Give feedback from different points of view (manager, peers, team members and internal customers); • Obtain an overview of the availability of skills in the institution; • Establish individual and corporate development actions for talent development and retention; • Mental health program with two psychologists for daily consultations and a psychiatrist (2x/week), in addition to an in-company outpatient clinic with family doctors for scheduled and on-demand appointments; • Training, conversation circles and communication on the theme.



A.C.CAMARGO INDICATORS



CODE	GROUP	THEME	REFERENCE (PAGE)/ DIRECT RESPONSE
1	Patient Care	Reference Centers – RC	Page 13.
2	Patient Care	Patient attendance	Page 50.
3	Patient Care	Patient attendance waiting time	Page 58.
4	Patient Care	Time elapsed between consultation and start of treatment	Page 53.
5	Patient Care	Bed occupancy rate (IU and ICU)	Page 53.
6	Patient Care	Adverse events	Pages 53 and 55.
7	Patient Care	Sepsis fatality	Page 53.
8	Patient Care	Patients treated with immunotherapy by RC	Page 13.
9	Patient Care	Cases discussed in the Tumor Board	Page 56.
10	Patient Care	Reoperation within 30 days	Page 53.
11	Patient Care	Readmission within 30 days	Page 53.
12	Patient Care	Average length of stay (IU and ICU)	Page 53.
13	Patient Care	Bed turnover (Antônio Prudente and Tamandaré Units)	Page 53.
14a	Patient Care	Views of Support Groups via social networks	Page 57.
14b	Patient Care	Participation in Support Groups in face-to-face and on-line formats	Page 57.
15	Patient Care	Activities carried out in the Support Groups	Page 57.
16	Operational	Sustainability Platform	Pages 90–93.
17	Operational	Certifications	Page 10.
18	Research	Clinical search by type of therapy	Page 71.
19	Research	Clinical research by status of projects and patients included	Page 71.
20	Research	Scientific production	Page 73.



CODE	GROUP	THEME	REFERENCE (PAGE)/ DIRECT RESPONSE
21	Research	Trained residents incorporated into the clinical staff	Page 63.
22	Research	CAPES Assessment	Page 64.
23	Research	Open courses and continuing education	Page 62.
24	Research	Medical and multidisciplinary residencies and fellowship programs	Page 63.
25	Research	<i>Sensu Stricto</i> postgraduate programs	Page 64.
26	Patient Care	Dona Carolina Tamandaré Program	Page 89.
27	Patient Care	Escola especializada Schwester Heine	Page 89.
28	Education	Technical course in Nursing	Page 63.
29	Research	Biobanco: patients, stored samples, and research	Page 72.
30	Research	National and international cooperation agreements	Page 69.
31	Financial	Partnerships and financial resources in research	Page 102.
32	Financial	Direct economic value generated and distributed	Pages 26 and 98.
33	Financial	Net revenue	Pages 26 and 98.
34	Financial	Own investment in research	Page 102.
35	Operational	Physical expansion of the units	There was no increase in the built-up area during the year; the areas inaugurated were reformulations of the institution's existing areas.
36	Financial	Ebitda Margin	Page 98.
37	Financial	Investments in infrastructure and technology	Page 101.
38	Operational	Infrastructure in patient care, education, and research	Page 10.
39	Institutional	Engagement in institutional actions	"Specialized in Life" Campaign. Page 18.



CODE	GROUP	THEME	REFERENCE (PAGE)/ DIRECT RESPONSE
40	Research	Employees dedicated to Research area: scientists, research doctors and the CIPE administrative support team	Page 69.
41	Patient Care	Fatality rate	Not reported.
42	Patient Care	New patients treated by RC	Page 13.
43	Patient Care	Response to Covid-19	Employees: - vaccinated: 4,665 - contaminated: 2,262 - fatality: 1 Patients 5,309
44	Patient Care	Second Opinion Program	This is a feasibility tool for telemedicine and remote consulting. It can be used in strategic projects in a business format with patients and partners.
45	Patient Care	Partnerships in patient care	Page 86.
46	Patient Care	Research Board	Page 73.
47	Research	Advances in basic, translational, and clinical research	Pages 69 and 71.
48	Patient Care	Patient Consulting Council	Page 59.
49	Patient Care	Patient Experience Medical Committee	Page 59.
50	Patient Care	Survival rate	Page 15.
51	Patient Care	Economic and financial management in patient care	Page 100.
52	Institutional	Net Promoter Score (NPS)	Page 58.
53	Financial	Cost-effectiveness model	Page 25.
54	Institutional	Institutional risk management	Page 45.



SDG CORRELATIONS

Contributions to achieving the UN Sustainable Development Goals



Ensure a healthy life and promote well-being for everyone, at all ages

- Our Purpose. Page 09.
- Comprehensive Healthcare Program. Page 85.
- Partnership with the Municipality of São Paulo. Page 87.
- Partnerships with municipalities to disseminate knowledge in oncology. Pages 87 and 88.



Ensure an inclusive and equitable quality education and promote lifelong learning opportunities for all

- Education Pillar. Page 62.
- Social responsibility and impact actions. Page 88.
- Promote employee development. Page 81.
- Train managers and employees in diversity and inclusion. Pages 80 and 90.



Achieve gender equality and empower all women and girls

- Ensure gender equity in all functions. Page 77.
- Promote equity in employment conditions, for women and minority groups. Page 76.



Ensure the availability and sustainable management of water and sanitation for all

- Reduce water consumption and manage the use of water resources. Pages 93 and 94.



Ensure reliable, sustainable, modern, and affordable access to energy for all

- Reduce the consumption of our various energy sources. Pages 93 and 94.
- Prioritize energy consumption from renewable sources. Page 94.
- Acquire renewable energy certificates. Page 97.



Promote sustained, inclusive, and sustainable economic growth, full and productive employment, and decent work for all

- Create direct and indirect job opportunities. Page 77.
- Monitor suppliers and support their development. Page 92.
- Promote sustainable economic growth. Pages 98 and 102.



Reduce inequality within and between countries

- Implement strategies to foster diversity and inclusion. Pages 80 and 90.
- Integrating refugees into the workforce. Pages 76 and 90.



Ensure sustainable production and consumption patterns

- Ensure the responsible use of lower impact raw materials. Page 92.
- Promote waste reduction and reverse logistics. Pages 93 and 95.
- Disseminate an ESG culture among patients and companions. Page 90.



Take urgent measures to combat climate change and its impacts

- Ensure a strategy for emission monitoring and reduction. Pages 93 and 97.
- Prioritize carbon neutral products and services. Page 97.
- Implement waste management strategies. Page 95.



Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable, and inclusive institutions at all levels

- Maintain high standards of corporate governance. Page 27.



11

ASSURANCE LETTER



KPMG Auditores Independentes Ltda.
Rua Verbo Divino, 1400, Conjunto Térreo ao 801 - Parte, Chácara
Santo Antônio, CEP 04719-911. São Paulo • SP
Caixa Postal 79518 - CEP 04707-970 - São Paulo • SP • Brasil
Telefone +55 (11) 3940-1500
kpmg.com.br

Independent auditors' limited assurance report on non-financial information included in the Integrated Annual Report 2022

(A free translation of the original report in Portuguese,
containing the Assurance Report).

To the Board of Trustees
Fundação Antonio Prudente
São Paulo - SP

Introduction

We have been engaged by Fundação Antonio Prudente ("Entity") to present our limited assurance report on the non-financial information included in the "Integrated Annual Report 2022" of Fundação Antonio Prudente, for the year ended December 31, 2022.

Our limited assurance does not extend to prior period information or to any other information disclosed in conjunction with the Integrated Annual Report 2022, including any embedded images, audio files or videos.

Responsibilities of Fundação Antonio Prudente's management

The management of Fundação Antonio Prudente is responsible for:

- select and establish appropriate criteria for the elaboration of the information contained in the Integrated Annual Report 2022;
- prepare the information in accordance with the criteria and guidelines of the Global Reporting Initiative (GRI - Standards), with the Sustainability Accounting Standard - Health Care Delivery, of the Sustainability Accounting Standards Board (SASB) and with the International Integrated Reporting Council (IIRC);

- design, implement, and maintain internal control over information relevant to the preparation of Integrated Annual Report 2022 that is free from material misstatement, whether due to fraud or error.

Responsibility of the independent auditors

Our responsibility is to express a conclusion on the non-financial information included in the Integrated Annual Report 2022, based on the limited assurance engagement conducted in accordance with Technical Communication CTO 07/2022 issued by the CFC, and based on NBC TO 3000 - Assurance Engagements other than Audits and Reviews, also issued by the CFC, which is equivalent to international standard ISAE 3000 - Assurance engagements other than audits or reviews of historical financial information, issued by the International Auditing and Assurance Standards Board (IAASB). These standards require compliance by the auditor with ethical requirements, independence, and other responsibilities relating to it, including the application of the Brazilian Quality Control Standard (NBC PA 01) and, therefore, the maintenance of a comprehensive quality control system, including documented policies and procedures on compliance with ethical requirements, professional standards and applicable legal and regulatory requirements.

Additionally, the standards require that the work be planned and performed with the objective of obtaining limited assurance that the non-financial information in the Integrated Annual Report 2022, taken as a whole, is free from material misstatement.

A limited assurance engagement conducted in accordance with NBC TO 3000 (ISAE 3000) mainly consists of inquiries to Fundação Antonio Prudente's management and other Fundação Antonio Prudente's professionals who are involved in the preparation of information, as well as the application of analytical procedures to obtain evidence that enables us to conclude, in a limited assurance manner, on the information taken as a whole. A limited assurance engagement also requires the performance of additional procedures when the independent auditor becomes aware of matters that lead him to believe that the information disclosed in the Integrated Annual Report 2022, taken as a whole, may present material misstatements.

The procedures selected were based on our understanding of the aspects relating to the compilation, materiality and presentation of the information contained in the Integrated Annual Report 2022, other circumstances of the engagement and our consideration of areas and the processes associated with the material information disclosed in the Integrated Annual Report 2022 where material misstatements could exist. The procedures comprised, among others:



- a. planning the work, considering the materiality of the aspects for Fundação Antonio Prudente's activities, the relevance of the information disclosed, the volume of quantitative and qualitative information and the operating and internal control systems that served as a basis for the preparation of the information contained in the Integrated Annual Report 2022;
- b. the understanding of the calculation methodology and the procedures for the compilation of the indicators through inquiries with the managers responsible for the preparation of the information;
- c. the application of analytical procedures on the quantitative information and inquiries on the qualitative information and its correlation with the indicators disclosed in the information contained in the integrated Annual Report 2022;
- d. for the cases in which the non-financial data correlate with indicators of a financial nature, the confrontation of these indicators with the accounting statements and/or accounting records;
- e. analysis of the processes for preparing the Report and its structure and content, based on the Content and Quality Principles of the Sustainability Reporting Standards of the Global Reporting Initiative (GRI - Standards), with the Sustainability Accounting Standard - Health Care Delivery, of the Sustainability Accounting Standards Board (SASB) and with the International Integrated Reporting Council (IIRC);
- f. evaluation of the sampled non-financial indicators;
- g. understanding the calculation methodology and the procedures for the compilation of the indicators through interviews with the managers responsible for the preparation of the information.

The limited assurance work also comprised adherence to the guidelines and criteria of the GRI - Standards elaboration framework applicable in the preparation of the information included in the Integrated Annual Report 2022.

We believe that the evidence we have obtained is sufficient and appropriate to provide a basis for our limited assurance conclusion.

Scope and limitations

The procedures performed in limited assurance work vary in nature and timing, and are smaller in extent than in reasonable assurance work. Consequently, the level of assurance obtained in limited assurance work is substantially lower than that which would be obtained if reasonable assurance work had been performed. If we had performed reasonable assurance work, we could have identified other issues and possible distortions that may exist in the information contained in the Report. Therefore, we do not express an opinion on this information.

Non-financial data are subject to more inherent limitations than financial data, given the nature and diversity of the methods used to determine, calculate or estimate these data. Qualitative interpretations of materiality, relevance, and accuracy of the data are subject to individual assumptions and judgments. Additionally, we did not perform any work on data reported for prior periods, nor in relation to future projections and targets.

The preparation and presentation of sustainability indicators followed the GRI - Standards criteria and, therefore, are not intended to ensure compliance with social, economic, environmental or engineering laws and regulations. These standards do, however, provide for the presentation and disclosure of any non compliance with such regulations when significant sanctions or fines are incurred. Our assurance report must be read and understood in this context, inherent to the selected criteria (GRI - Standards).

Conclusion

Based on the procedures performed, described in this report and the evidence obtained, nothing has come to our attention that causes us to believe that the non-financial information included in the integrated Annual Report 2022 for the year ended December 31, 2022 of Fundação Antonio Prudente, have not been prepared, in all material respects, in accordance with the Sustainability Reporting Standards of the Global Reporting Initiative (GRI - Standards), with the Sustainability Accounting Standard - Health Care Delivery, of the Sustainability Accounting Standards Board (SASB) and with the International Integrated Reporting Council (IIRC).

São Paulo, July 7th, 2023.

KPMG Auditores Independentes Ltda.
CRC 2SP014428/O-6

Original report in portuguese signed by

Sebastian Yoshizato Soares
Accountant CRC 1SP257710/O-4



12

CREDITS

A.C.CAMARGO CANCER CENTER

Rua Professor Antônio Prudente, 211 – Liberdade
São Paulo-SP – Brasil
CEP 01509-010
Telephone: + 55 (11) 2189-5000
relatorio_sustentabilidade@accamargo.org.br

COORDINATION

Luciana Spring and Wilson Pedreira
Supervision

Fernanda Mediano

Production coordination

Aline Alvarenga and Clayton Ribeiro

Editorial production

Diego Nascimento

Layout review

EDITORIAL PROJECT, GRAPHIC DESIGN AND BUSINESS MODEL

Consulting, Report Writing, Layout Design
Ricca Sustentabilidade
www.linkedin.com/company/riccasustentabilidade

PHOTOGRAPHS AND ILLUSTRATIONS

A.C.Camargo archives, Adobe Stock, Freepik
and Grupo Photo

ENGLISH TRANSLATION

Richard Wightwick



A.C. Camargo
Cancer Center

Especializado em Vida