



Taking action to improve health for all

# ATENTO - Telehealth Center of ULS São José

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#### **CONTEXT & DIVERSITY**

#### **Contextual Overview:**

- 9 hospitals
- 33 primary care units
- 430 624 patients in the area of direct influence
- **1.8 million** as referral center (regional and national)

Guided by the core values of the **Portuguese NHS (SNS)**: *Universality, Equity, Humanity*.



A 521 year legacy of cultural and social diversity

#### **Sponsors**





**Technology Partner** 



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#### **CONCEPT**

# A Telehealth Centre that brings together:

- The experience and knowledge of our professionals
- The latest remote care technologies in an integrated model

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# TELEHEALTH CENTER ALLOCATED RESOURCES

	FTE
Physicians	1.71
Nurses	2.14
Hospital Administrator	0.20
IT and Systems Consultant	0.20
Diagnostic and Therapeutic Tec	1.00
Technical Assistant	1.00
Operational Assistant	0.20

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#### **DIFFERENTIATION**

- **Co-creation** Solutions designed based on the realities of our communities and professionals
- Integration with primary care by concept and from the beginning
- **Proximity to the patient** Closer, more personalized and continuous relationships.
- **Technological scalability** Cloud-based, modular solutions that enable sustainable growth

### **ATENTO Telehealth Centre**



### Mission

Provide healthcare services through the use of information and communication technologies

## **Propose**

Be the Aggregator of all e-health care services in our local health unit

# Main objectives

To improve access, health conditions, and user satisfaction, alongside reducing the number of non-elective hospital admissions and emergency episodes.



### **ATENTO Concept**



#### **WANTS & DON'T WANTS**

- Optimizing the patient journey
- The highest regulatory compliance
- No blackbox. To be able to customize part of the solution.
- Telemonitoring as the core technical solution
- Fragmented or non-interoperable solutions
- Personalised, and humanised care protocols



#### WHY

SOLUTION

We are a public institution committed to universal, equitable, and scalable care.

Digital health regulations are in force — compliance builds trust.

Empower internal teams to lead solution design and co-creation.

Rich RPM data enables better, outcome-driven healthcare.

Because we are committed to operational efficiency.

Enables better results and makes patients key actors in their treatment.

Native digital-first solutions enabling scalable, universal and equitable healthcare delivery

RPM is our backbone, so we followed MDR and selected Class IIb-compliant digital health platforms

Seeking committed partners — not mere suppliers.

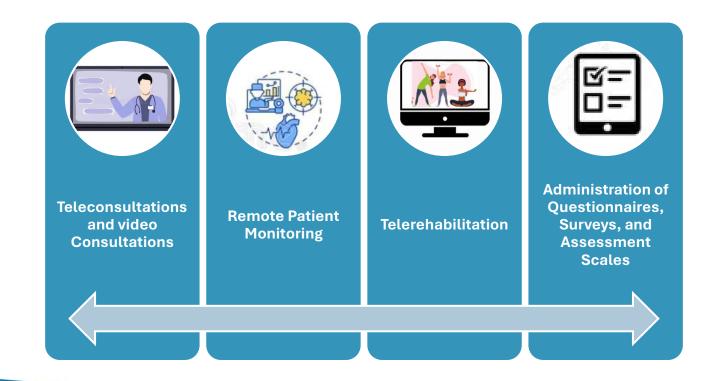
Choose platforms designed natively for RPM

Choose an aggregator platform that offers flexibility and adaptability.

Our solution combines monitoring, feedback, education, and engagement to empower patients in care.

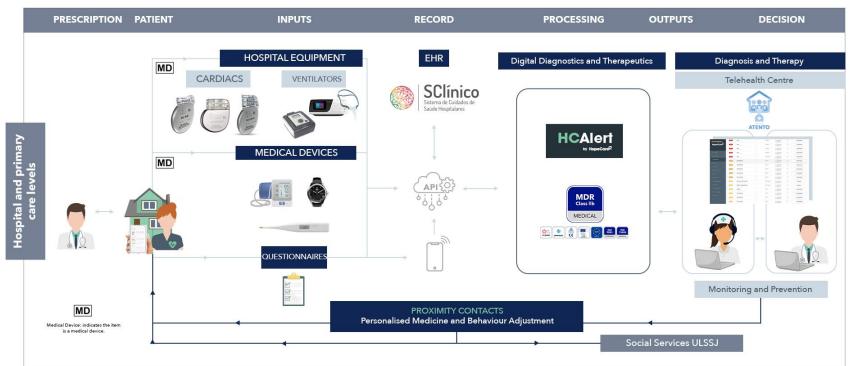


### **ATENTO Telehealth Centre – key services**



### **Remote Patient Monitor Solution ATENTO**





### **ATENTO Dedicated Interfaces**





Institutional Branding <</p>

Create sense of belonging between patients, professionals, and the institution. Keep the connection alive: "my doctor, my nurse."



#### **Patient Interfaces**

Designed for patients to share information and remain linked to their healthcare professionals.

#### **ATENTO Clinical Team Dashboard**

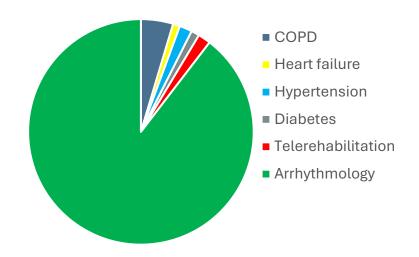
A central hub for clinical decision-making, alerts, and patient follow-up.

### **ATENTO 1st year in production**



#### **PATIENTS MONITORED**

Health Programme	nº
Chronic Obstructive Pulmonary Disease	51
Heart failure	11
Hypertension	20
Diabetes	13
Telerehabilitation	20
Arrhythmology – implanted cardiac device	989
Total	1104



#### 314 Face-to-face consultations

4418 tele/videoconsultations

530 Telerehabilitation sessions

9714 alarms processed

### **First Audited Results in Respiratory Patients**

(n43, in full 12M enrollment period)





	2024	2025	Variation
Hospitalizations			
Mean	0,53	0,16	-70%
Minimum	0	0	
Maximum	3	2	-33%
Total	23	7	-70%

Hospitalization Days			
Mean	10,91	2,65	-76%
Minimum	0	0	
Maximum	200	37	-82%
Total	469	114	-76%
Costs	248 246 €	60 341 €	-76%

Medical Consultations			
Mean	2,77	1,53	-45%
Minimum	0	0	
Maximum	8	5	-38%
Total	119	66	-45%
Costs	28 491 €	15 802 €	-45%

ER Visits				
Mean	0,88	0,23	-74%	
Minimum	0	0		
Maximum	6	2	-67%	
Total	38	10	-74%	
Costs	8 544 €	2 248 €	-74%	

Total Costs	2024	2025	G/Total
	285 281 €	78 391 €	- 206 890 €

#### Footnotes:

- \* To ensure meaningful impact assessment, we opted to calculate the average number of patients monitored during a full period of 12-month.
- This approach reflects not only initial enrollment but also sustained participation throughout the program's operational cycle.
- The 12-month reference period allows for the capture of seasonal variation and clinical trends.
- A before-and-after comparison will be used to evaluate both clinical outcomes and healthcare resource utilization.
- This methodology is designed to provide better visibility into the return on investment (ROI), including direct and indirect cost savings.
- The referenced costs correspond specifically to different types of healthcare activity, as defined within the cost structure of ULS São José.



EHMA 2025

The first year of activity was foundational: ...building the team; setting up the infrastructure; acquiring equipment, engaging with different specialties; defining clinical follow-up protocols, Integration of existing systems, adjusting the IT solution....

### Main challenge:

To increase the number of patient referrals; expand activity, both in terms of user volume and in the types of care and medical conditions.

### **Next steps**

Integration of predictive analytics and artificial intelligence, leveraging tested algorithms from ATENTO's technology partner.





"Innovation cannot be decreed Innovation cannot be imposed Innovation is not a product It is a process. An attitude "

\*Nóvoa (1988)



# **THANK YOU**



**Ana Isabel Santos** 



Want to know more? Glad to get in touch

