

Time to be Healthcareful®

Overview

Dec 2024

Chris Dial

Co-founder and Chief Executive

Professor Kevin Moore

Co-founder and Chief Medical Officer

Salutare:

Salutare

Software made with clinicians for clinicians
so patients don't get lost in the system

ONE automates outpatient pathways where
patients usually get lost: in referral, in monitoring,
and in diagnostic testing

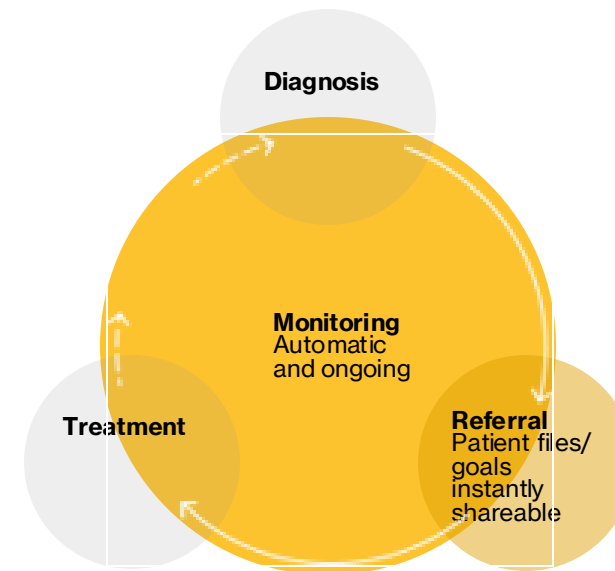
Today, serving 900,000+ patients in the UK

Saving UK NHS Trusts millions per year while
reducing wait times, errors, and staff overwork.

For private providers can generate new referral
streams and reduce costs

We believe **simplicity is safety**

Circular healthcare with Salutare software



<https://www.salutare.co.uk>



Chris Dial [chris@salutare.co.uk]
Co-founder and CEO

Dr Dara Vakili [dara@salutare.co.uk]
Head of Product

Salutare:

Patients face risks at many points in their care

Half of all outpatient appointments are to monitor patients for development of complications due to chronic disease, medications, or cancer

Patients get **lost to follow up**

A fundamental problem

Unmonitored patients come to harm when complications occur that are not found early and treated.

A third of patients who develop complications or disease are not referred in a timely manner

Patients get **lost in referral**

A fundamental problem

Failed or missing referrals lead to delays in treatment and patient harm.

Current systems let down clinicians, patients, and the health service

Half of all outpatient appointments are to monitor patients for development of complications due to chronic disease, medications, or cancer

Patients get **lost to follow up**

What goes wrong

Clinics cancelled. Appointments never rescheduled. Single points of failure. Not enough people and hours in the day to follow up everyone by hand. Plus see new patients properly.

A third of patients who develop complications or disease are not referred in a timely manner

Patients get **lost in referral**

What goes wrong

Forms not complete, information missing, unclear where to refer to. Over-reliance on emails and no internal system to keep track and follow up. EPR systems do not meet the needs of MDT teams.

How we keep patients safe

Healthcareful® means patients are never lost

Half of all outpatient appointments are to monitor patients for development of complications due to chronic disease, medications, or cancer

Patients get **lost to follow up**

Solving a fundamental problem
Simplified, automated common tasks for outpatient monitoring

Monitor

A third of patients who develop complications or disease are not referred in a timely manner

Patients get **lost in referral**

Solving a fundamental problem
A single place for 'multi-mind medicine' dialogue and referrals

Referral

Salutare:

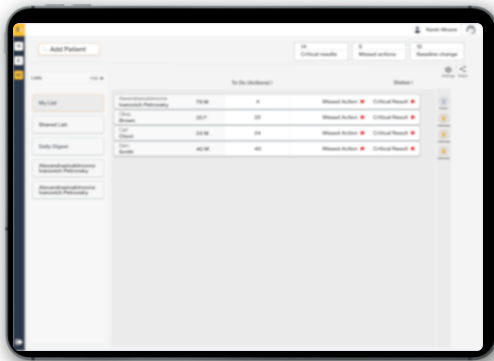
SALUTARE ONE

Simplify care

Salutare™ creates software that keeps patients safe by simplifying workflows and giving time back to clinicians

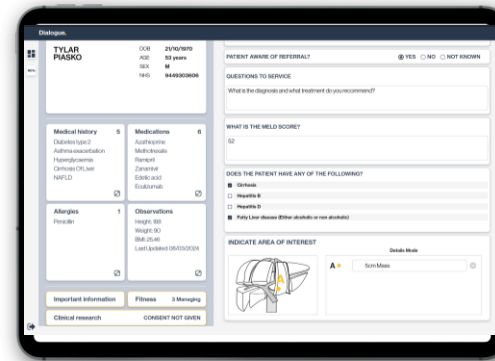
Monitor medicines safety and chronic disease progression

ONE Monitor



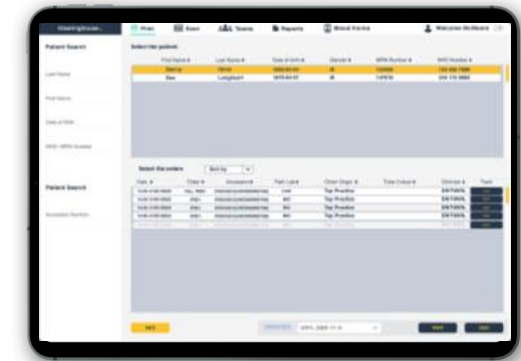
Refer patients for review

ONE Referral



Simplify pathology sample collection and tracking

ONE Testing



Easy to use
Cloud-based SaaS
Scalable and reliable
Healthcareful™

Salutare:

Our solution is ONE
Everyone benefits from a simpler solution

Who

Clinicians Hospitals Patients

Simplicity is safety

Safer care is cost-effective care No patients lost in the system

ONE simplifies patient referrals for discussion

For clinicians, coordinators, and administrators

Benefits

Manage referrals virtually and review from any internal or external location

Automated Monitoring

Patients streamlined, and reduce delays

Patients suitable for clinical research identified

Clinicians

Simple referral with clear questions to local or national MDT panel by looking up in a directory

Track your own referrals and know where they are in the process at any time

Easy to share to other clinicians locally, nationally, or by invitation

Digital notifications with clear questions to local or national MDT panel

Coordinators

Easy transfer of radiology, pathology, and important investigations

Track with alerts and reminders so that patients are not lost in the system

Quick list of tasks to complete and easy to see what's missing for discussion

Single discussion panel with all information in one place

Automated MDT report summary [including voice transcription]

Administrators

Referrals and outcomes uploaded to EPR (manual or automatic)

Centralized reporting by speciality, location, or region

Generate dataset cohorts of patients for research or service improvement

Salutare:

<https://www.salutare.co.uk/solutions>

ONE monitoring for chronic disease and medicines safety

No patients lost in the system

Benefits

Most patients with a cancer diagnosis or chronic disease or potentially hazardous medications require long-term monitoring.

Patients

Know where they are in the pathway and what's coming next

Access their own data to view

Give feedback directly to clinicians and the panel looking after them

Contact a clinician immediately if they need help

Clinicians

Follow pre-set and accepted guidelines for medications and chronic treatments

Highlight only important results and next tasks for a patient

Gain a broader view of the patient context, results and info from multiple sources

Automate certain regular tasks, like diagnostic tests and a response to results, based on guidelines and parameters

Administrators

PIFU

End to end auditing of a pathway and the patients' paths

Build data repositories behind specialist services for analysis or research

Population-level data for subsets of patients

Safely and easily **monitor patients**

Many patients with a cancer diagnosis or chronic disease or potentially hazardous medications need long term monitoring.

To Do (Actions) :			Status :
Alexandraeiskimovna Ivanovich Petrovsky	79 M	4	Missed Action ■ Critical Result ■
Olivia Brown	25 F	25	Missed Action ■ Critical Result ■
Carl Olson	24 M	24	Missed Action ■ Critical Result ■
Sam Smith	40 M	40	Missed Action ■ Critical Result ■

Automate regular monitoring and generate the test requests with digital forms.

Send critical alerts for abnormal results to team.

Reduce the need for regular clinic appointments for manually undertaking monitoring of patient safety and with a patient initiated follow up request function.

Salutare:

<https://www.salutare.co.uk/solutions>

Assign tasks and follow-up outcomes

Single place to view tasks and MDT outcomes for patients. Assign people and see when they are not followed up.

Alexandraioakimovna Ivanovich Petrovsky

GP Level 2 DOB 27/12/78 AGE 44 years SEX F NHS 1333 333 4444

Medical history 2
Type 2 diabetes
Hypertension
Chronic Kidney Disease
NAFLD

Medications 3
Metformin
Ramipril
Amlodipine
Methotrexate

Action

Actions	Indications	Assignee	Due date	Schedule
U&E	Methotrexate Kidney Liver	Dara Vakili		3 months
ACR	Kidney	Chris Dial		1 months
FBC	Live methotrexate	Ben Longhurst		Every 2 weeks
LFT	Liver methotrexate	Kevin Moore		Every 2 weeks
LIPIDS	Methotrexate	Sergio Cabrera		Every 2 weeks

BACK

Customise pathways for each disease and medication

Alert patients and clinical staff for missing results or no follow-ups

Alexandraioakimovna Ivanovich Petrovsky

GP Level 2 DOB 27/12/78 AGE 44 years SEX F NHS 1333 333 4444

Medical history 2
Type 2 diabetes
Hypertension
Chronic Kidney Disease
NAFLD

Medications 3
Metformin
Ramipril
Amlodipine
Methotrexate

Results

Date	07 Jan	07 Jan	07 Jan	07 Jan	08 Jan	08 Jan	08 Jan	08 Jan	08 Jan	08 Jan
Time	08:00	08:05	08:00	14:00	08:00	08:15	14:00	14:15	15:00	15:00
General Haematology										
<input type="checkbox"/> Haemoglobin	155 g/L	155 g/L	155 g/L	155 g/L	155 g/L	155 g/L	155 g/L	155 g/L	155 g/L	155 g/L
<input type="checkbox"/> White Blood Count	4.3 x10 ⁹ /L	4.3 x10 ⁹ /L	4.3 x10 ⁹ /L	4.3 x10 ⁹ /L	4.3 x10 ⁹ /L	4.3 x10 ⁹ /L	4.3 x10 ⁹ /L	4.3 x10 ⁹ /L	4.3 x10 ⁹ /L	4.3 x10 ⁹ /L
<input type="checkbox"/> Platelet Count	227 x10 ⁹ /L	227 x10 ⁹ /L	227 x10 ⁹ /L	227 x10 ⁹ /L	227 x10 ⁹ /L	227 x10 ⁹ /L	227 x10 ⁹ /L	227 x10 ⁹ /L	227 x10 ⁹ /L	227 x10 ⁹ /L
<input type="checkbox"/> Haematocrit	27.7 x10 ⁹ /L	27.7 x10 ⁹ /L	27.7 x10 ⁹ /L	27.7 x10 ⁹ /L	27.7 x10 ⁹ /L	27.7 x10 ⁹ /L	27.7 x10 ⁹ /L	27.7 x10 ⁹ /L	27.7 x10 ⁹ /L	27.7 x10 ⁹ /L
<input type="checkbox"/> Red Blood Count	5.3 x10 ¹² /L	5.3 x10 ¹² /L	5.3 x10 ¹² /L	5.3 x10 ¹² /L	5.3 x10 ¹² /L	5.3 x10 ¹² /L	5.3 x10 ¹² /L	5.3 x10 ¹² /L	5.3 x10 ¹² /L	5.3 x10 ¹² /L
<input type="checkbox"/> Red Blood Distribution Width	12.3%	12.3%	12.3%	12.3%	12.3%	12.3%	12.3%	12.3%	12.3%	12.3%
General Biochemistry										
<input type="checkbox"/> Sodium	137 mmol/L	137 mmol/L	137 mmol/L	137 mmol/L	137 mmol/L	137 mmol/L	137 mmol/L	137 mmol/L	137 mmol/L	137 mmol/L
<input type="checkbox"/> Potassium	4.5 mmol/L	4.5 mmol/L	4.5 mmol/L	4.5 mmol/L	4.5 mmol/L	4.5 mmol/L	4.5 mmol/L	4.5 mmol/L	4.5 mmol/L	4.5 mmol/L
<input type="checkbox"/> Urea Serum	4.1 mmol/L	4.1 mmol/L	4.1 mmol/L	4.1 mmol/L	4.1 mmol/L	4.1 mmol/L	4.1 mmol/L	4.1 mmol/L	4.1 mmol/L	4.1 mmol/L
<input type="checkbox"/> CREATININE	85 mmol/L	85 mmol/L	85 mmol/L	85 mmol/L	85 mmol/L	85 mmol/L	85 mmol/L	85 mmol/L	85 mmol/L	85 mmol/L
<input checked="" type="checkbox"/> Alanine Aminotransferase	38 u/L	38 u/L	38 u/L	38 u/L	38 u/L	38 u/L	38 u/L	38 u/L	38 u/L	38 u/L
<input checked="" type="checkbox"/> Aspartate Aminotransferase Serum	19 u/L	19 u/L	19 u/L	19 u/L	19 u/L	19 u/L	19 u/L	19 u/L	19 u/L	19 u/L

Graph

Salutare:

Simple UI. No training. Just jump right in

Email any clinician in the network and make a referral in 3 minutes

Easy to follow 3-step process. Check guidelines. Confirm mandatory information.

New referral in **three steps**

Same platform can manage **MDT referrals, inter-hospital referrals, and specialist referrals**

Integrate patient data from other EPRs or national services

Create PDFs automatically without the need for typed letters

On request, we can offer a login to a demo site for any clinician to trial how to create a referral.

The screenshot displays the Dialogue. web interface for creating a referral. The top navigation bar includes the brand name 'Dialogue.' and a user profile for 'Chris Dial'. A vertical sidebar on the left contains three buttons labeled 'R', 'E', and 'M'. The main content area is divided into three numbered steps:

- 1 SELECT A PATIENT**: Features a search input field and a 'Search' button.
- 2 SELECT SERVICE**: Offers three service options, each with an icon and a title: 'Refer to MDT' (group of people icon), 'Inter-hospital Referral' (location pin icon), and 'Specialist Referral' (person with bag icon).
- 3 REASON FOR REFERRAL**: Provides five buttons for different reasons: 'Review Diagnosis', 'Plan Treatment', 'Treatment Review', 'Post Treatment Review', and 'Monitoring Review'.

Salutare:

Control process quality and audit usage

Maintain high standards and monitor proper interactions

Customize forms for every MDT
but within a set template to
maintain consistency

Complete audit trail of all activities
in the referral and discussion

Confirmation of treatment and
view of all comments from
attendees

Scoring systems to contribute to
decision-making

Dialogue. Dara Vakili

Display Patient List ▶ Elliott, Dom Rutter ◀ PAM, ARYANA CROQUENOIS ▶ TYLAR PIASKO

PAM, ARYANA CROQUENOIS

DOB 25/05/1969
AGE 54 years
SEX N/A
NHS 9449307741

Medical history 3

Autoimmune cirrhosis
Hyperlipidaemia
Acute Severe Asthma

Medications 3

Salbutamol
Atorvastatin
Azathioprine

Allergies 1

Penicillin

Observations

Height: 179
Weight: 80
BMI: 24.97
Last Updated: 27/03/2024

Important information

Clinical research

Fitness 4 Very Mild

CONSENT GIVEN

COMMENTS 1 TOTAL

Dara Vakili 17:02 27/03/2024
@Chris Dial can you please upload the pathology imaging or transfer sliced specimens to the MDT please

Type your comment here...

ADD

WHO WAS INVOLVED IN THE DECISION MAKING

☒ Anjut Maraye - Chair
☒ Michael Parker - Radiologist
☒ Chris Jain - Pathologist
☒ Christine Sinra - Hepatologist
☒ Mireya Parika - Surgeon
☐ William Perkins - CNS

INDICATE AREA OF INTEREST

TNM Mode

A ● T 2 N 1 M 0

SUMMARY RECOMMENDATIONS

The patient is suitable for surgery, please add to Mireya's Surgical list to be seen within the next two weeks

Everyone can collaborate. From anywhere

Cloud-based software. Standard security protocols

Collaborative and asynchronous

All clinicians **share the same information**

All can **comment** and add new investigations as screenshots

During MDT meetings, unlimited number of staff can **view the same referral at the same time**

Access via PC, Mac, tablet, phone

Share a specific referral

Share a filtered patient list

The collage illustrates the Dialogue software's collaborative features. It includes a patient record view, a referral sharing interface, a filtered patient list, and an email confirmation for MDT sharing.

Referral List 4

Patient	DOB	Age	NHS No
QIANG SAM	08/01/1979	45	9449308918
GWENEVERE, SHERRY NE...	06/09/1967	56	9449303746
FIRST, SONNIE JUNE	01/06/1974	49	9449310114
KEIRA, MERLA JOLLIFF	16/12/1961	62	9449309515

MDT Shared

Salutare-No-Reply
To: Chris Dial

Thu 28/03/2024 09:32

View MDT

Email confirmation and link

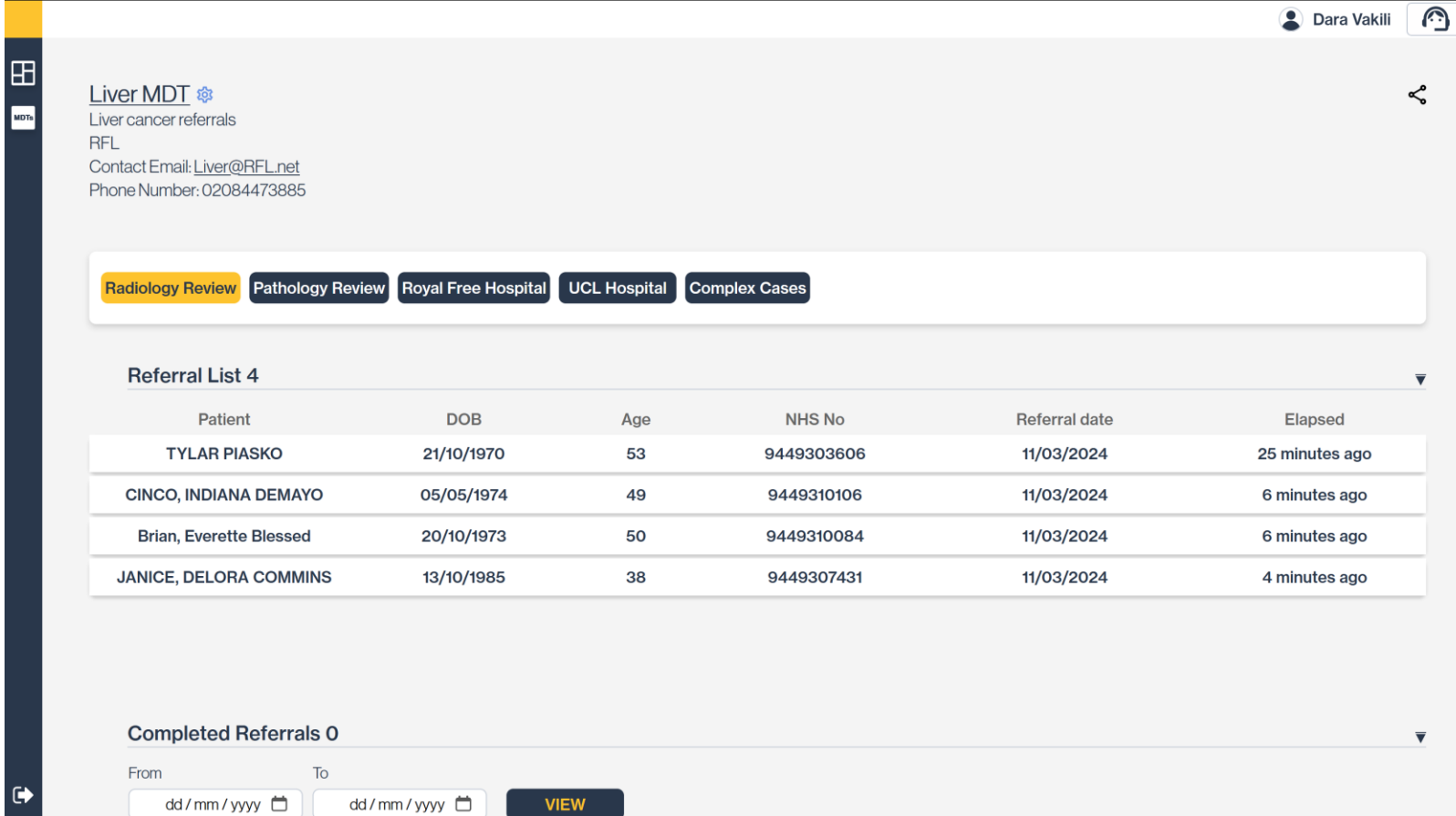
Create, share, and manage patients lists for discussion

Tag referrals to streamline lists

Tag referrals with one or more **criteria** to easily sort into custom views to manage discussion

Use one or multiple tags to **quickly sort and share views** of the whole list – radiology image reviews for the radiologists

Services easily **create their own tags** according to their needs



The screenshot displays the Salutare web application interface. At the top right, the user 'Dara Vakili' is logged in. The main header shows 'Liver MDT' with a settings icon, followed by 'Liver cancer referrals', 'RFL', and contact information: 'Contact Email: Liver@RFL.net' and 'Phone Number: 02084473885'. Below this is a filter bar with five tags: 'Radiology Review' (highlighted in yellow), 'Pathology Review', 'Royal Free Hospital', 'UCL Hospital', and 'Complex Cases'. The main content area is titled 'Referral List 4' and contains a table with the following data:

Patient	DOB	Age	NHS No	Referral date	Elapsed
TYLAR PIASKO	21/10/1970	53	9449303606	11/03/2024	25 minutes ago
CINCO, INDIANA DEMAYO	05/05/1974	49	9449310106	11/03/2024	6 minutes ago
Brian, Everette Blessed	20/10/1973	50	9449310084	11/03/2024	6 minutes ago
JANICE, DELORA COMMINS	13/10/1985	38	9449307431	11/03/2024	4 minutes ago

Below the table, there is a section for 'Completed Referrals 0'. At the bottom, there is a date range filter with 'From' and 'To' date pickers (format: dd / mm / yyyy) and a 'VIEW' button.

Move between patients in the list quickly and easily

Shift simply from case to case. Use a list to search or jump to a patient

The patient list opens up to show some or all of the cases

Use the arrows at the top to **move left/right across the list** in order

Open the patient list to **jump ahead or back**; or search for the patient or criteria you want

Quickly see what's submitted, what's reviewed, and what is outstanding

Dialogue.

List of Patients

Patient name

Name	Referral Date	Elapsed	Status
Elliott, Dom Rutter	27/03/2024	4 minutes ago	SUBMITTED
PAM, ARYANA CROQUE...	27/03/2024	1 minute ago	SUBMITTED
TYLAR PIASKO	27/03/2024	4 seconds ago	SUBMITTED

17:02 27/03/2024

ADD

AS INVOLVED IN THE DECISION MAKING

Maraye - Chair

hael Parker - Radiologist

is Jain - Pathologist

istine Sinra - Hepatologist

ya Parika - Surgeon

iam Perkins - CNS

ATE AREA OF INTEREST

TNM Mode

A ● T 2 N 1 M 0

Close the loop with recommendations and next actions

Clear summary with owners

Send back the referral to the original clinician with a summary and next actions

Follow up actions tracked by staff or role

Simple summary recommendation emailed to team and imported into any EPR

Controlled path to next steps – transfer to other service, return to referrer, or submit final

Sarah Omar

DOB 27/12/1981
AGE 42 years
SEX Female
NHS 333 333 4444

Diagnosis ■ BREAST
AREA OF ABNORMALITY



PATIENT AWARE OF REFERRAL ●

Co-Morbidity

- Type 2 diabetes
- Hypertension

Medications

- Metformin
- Ramipril
- Amlodipine

Recommendations
Imaging and histology confirm a T1N1M0 HER2 positive breast carcinoma. Recommend lumpectomy followed by 3 course of radiotherapy. Review in clinic by Mr Ghosh on 6th March to discuss treatment options.

Follow up actions

Action

Action

Action

Owner

- Mr. Gosh

- Dara Vakili

- Dara Vakili

Summary
42 year old woman with strong family history of breast cancer (mother and sister) presents with a 2-3 cm right sided breast lump and a small axillary palpable lymph node.

Previous treatments
An MDT in September 2020 recommended 3 monthly MRI breast, and latest MRI shows likely increase in size of breast lesion.

Questions of MDT
Patient very against reductive surgery. What are the potential outcomes and various options for treatment?

Important information
Single mother, two children aged 9 years and 6 years.

Task	Assignee	Due Date	Status
01 Refer to Colorectal Surgery	AA Alexandrasakimovna Ivanovich Petrovsky	10/04/2024	DONE
02 Order a Endoscopic retrograde cholangiopancreatography	AI James Smith	01/02/2024	IN PROGRESS
03 Gastroenterology Clinic Appointment	AI Emily Johnson	20/03/2024	IN PROGRESS
04 Bloods for Monitoring	AI William Taylor	12/03/2024	IN PROGRESS
05 Write discharge summary	AI Olivia Brown	07/03/2024	IN PROGRESS

SUMMARY RECOMMENDATION

MDT consultant

Last Step

REFER TO ANOTHER SERVICE




Forward this referral to another service.

SEND THE REFERRAL BACK



Send the referral back to sender for action.

SUBMIT PANEL RECOMMENDATIONS



Close the referral and send recommendations to the referrer.

Build standard and custom reports

Meeting and beating the guidelines

Better, clearer reporting for national requirements and local analyses

Choose criteria at panel creation to set which fields you must capture

Create and extract in standard formats for reporting requirements

Connect data to tools and use your own reporting tools like PowerBI and Tableau

Manage performance by combining system metrics with COSD metrics to improve excellence

MDT Audit Data - All Cases

Clinical category

(Blank)	Treatment: Commenced
Diagnostic	Treatment: Completed
Monitoring	Treatment: Planned

Was the case rolled over?

(Blank)	Yes
No	

Was a patient advocate present?

(Blank)	Yes
No	

Could this have been done offline?

(Blank)	Unclear
No	Yes

MDT

MDT	AH	JC	MN	Total
BR		62		62
CR	71	85	246	402
HPB		219	330	549
KC	198	218		416
SKN		182		182
Total	71	564	976	1611

What was the outcome of this discussion 1

Outcome	Count of Editor
Treatment recommended	470
Further investigations	393
Watchful waiting / monitoring / surveillance	301
Referral to another MDT	146
Discharge	93
Other	67
Total	1611

AutoSave Off COSD_Test_Patient_Download_from_SCR - Read... Saved to this PC

File Home Insert Draw Page Layout Formulas Data Review View Automate Help Acrobat Power Pivot Table Design

A2 244395

ID	NHSHNumber	OrganisationSiteIdentifierOfDiagnosis	BasisOfDiagnosisCancer	MorphologyCdo3	MorphologySnomedDiagnosis	SnomedVersionDiagnosis
244395	Y0001008	RAL01	7	54666007	05	

Linkage Patient ID Linkage Diagnosis Demographics Non Primary Pathway ReferralAndPatientPathway Breast - Site Specific

Ready Accessibility: Investigate

A new foundation for clinical excellence and research

Every speciality gains a data repository of thousands of patient cases

Identify patient populations with ease

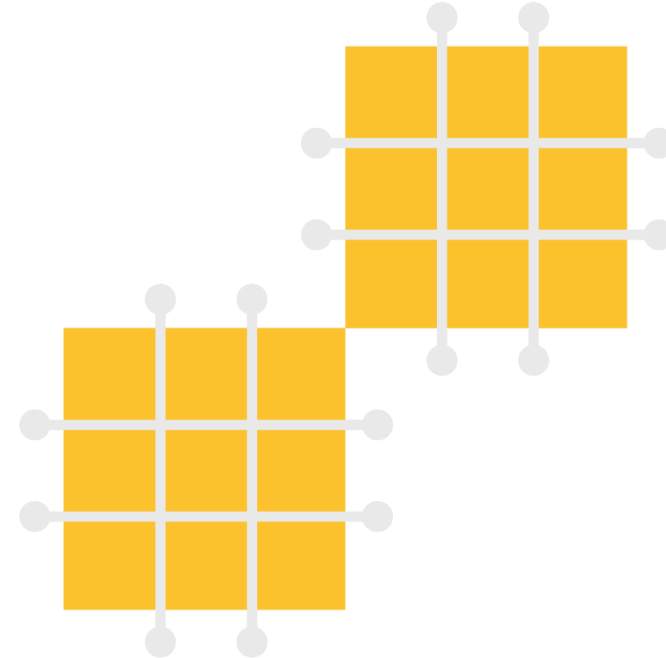
Store data stored highly structured, accessible, and coded to optimise for analytics and research

Improve clinical excellence

Unlock detailed service performance analytics to inform and improve clinical practice

Easily create and export extracts

as you need and connect to the tools you use [such as PowerBI or Tableau]



**Healthcareful®
means patients
are not lost**

Salutare:

Team and Strategy

Executive team

Our clinicians and software developers understand technology's transformative power for healthcare.



Chris Dial
Co-Founder, CEO

An ex-senior executive from Microsoft.
Led the development of software companies across Europe and the US.



Prof. Kevin Moore
Co-Founder, CMO

A Professor of Medicine, hepatologist and clinical pharmacologist, and biochemist [B.Sc. and Ph.D]
More than 100 publications with an H-index greater than 65. Led teaching of therapeutics at UCL and course creator and director for Applied Medical Sciences.



Dr Ameet Bakhai
Research, CSO

A nationally leading clinical researcher and cardiology consultant.
Experience in clinical trials and digital innovations in the NHS. A researcher with a history of change and innovation in the hospital and healthcare industry.

Salutare:

Certifications and recognition

Our current partners

Two years of investment and work to gain important certifications



NHS

NHS Digital certifications on DSP Toolkit, SPINE access for patient records



Care Quality Commission

Passed certification and approval for private blood testing service with public offers: thePharmacyClinic



Cyber Essentials Certified

Core digital safety and privacy management in place



Crown Commercial Service

Accepted and approved both major products for purchase by UK public organizations

Recognition to date

In the UK

2025



2024



FINALIST / Primary Care Project of the Year



FINALIST / Diagnostics Project of the Year



Current engagements in the UK

A variety of NHS and private engagements across the country

More than a dozen ICBs
Several international hospitals

Deployments



Proof of value / evaluations / research



Salutare:

Current engagements

UK and rest of world



Salutare: