

## A European Medicines Verification System

Fighting counterfeit medicines to ensure patient safety in Europe

**Speaker:** Grant Courtney

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#### Who am I



#### **Grant Courtney**

- Have worked as part of EFPIA team which established the ESM
- Member of the GS1Healthcare Leadership Team
- ☐ 19 years in product security for GlaxoSmithKline





### Introduction



#### **ESM Stakeholders**



- EFPIA is on of the 4 stakeholders developing the ESM solution
- The ESM solution is being developed by the stakeholders who will use it day-to-day
- ☐ Talks ongoing with AESGP, EAHP, EGA and HOPE









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AESGP Association of the European Self-Medication Industry
EAEPC European Association of Euro-Pharmaceutical Companies

EAHP European Association of Hospital Pharmacists EGA European Generic Medicines Association

GIRP European Association of Pharmaceutical Full-line Wholesalers

HOPE European Hospital and Healthcare Federation

PGEU European Association Representing Community Pharmacists



## ESM Stakeholders have a common vision

THE CO	□ Protect patients
	☐ Secure the legal supply chain
	■ Be proactive as market partners
	<ul> <li>Set up a stakeholder governed model that is</li> <li>Functioning</li> <li>Harmonised</li> <li>Cost-effective</li> </ul>
	<ul><li>Inter-operable</li><li>Supervisable by competent authorities</li></ul>



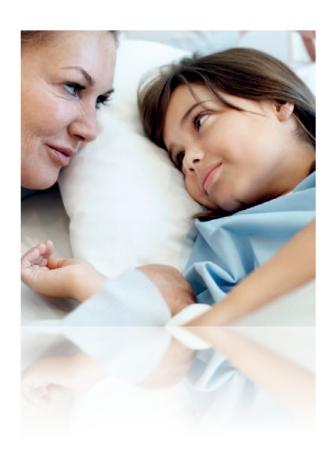
## EU Falsified Medicines Directive new legal framework



### **Context & Background**



- The threat of falsified medicines penetrating the European supply chain is substantial and growing
- ☐ The EU Falsified Medicines
  Directive (FMD) is an important
  step in protecting patients from
  counterfeit medicines, adoption
  on July 1, 2011
- ESM are developing a system that will meet the requirements of the FMD







### The Directive – Safety Features



### What Does the Directive Mandate?

- Safety features that enable relevant persons to
  - "verify...authenticity"
  - "identify individual packs"
  - Tamper evidence
- Rx and Vx included, all OTCs excluded. some exceptions based on a risk assessment
- Governments can use the system for reimbursement and/or pharmacovigilance purposes
- MAHs will pay for the 'repositories systems'

### What Will Be Decided by Implementing Measures?

- Characteristics & technical specifications of the 'unique identifier'
- Criteria for the risk assessments & process for notification of products included
- "Extent and modalities of verification of the safety features" to "ensure the verification of authenticity of each dispensed pack"
- Establishment (including accessibility) of the 'repositories'



### Result of COM's impact assessment

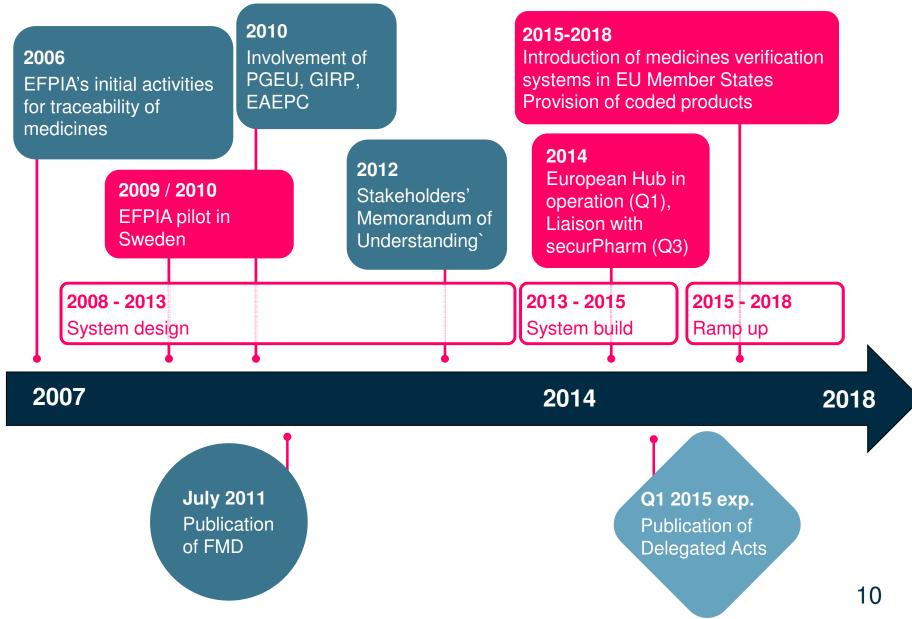
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#### Conclusions (I)

- ☐ In summary, the Commission will propose:
  - Harmonisation of the composition of the number and the data carrier
  - Systematic verification of the safety features at the dispensing point and risk-based verification by wholesale distributors
  - Establishment and management by stakeholders with supervision by the relevant competent authorities



### The EMVS: Result of a long evolution





### EMVS Design and architecture The joint stakeholder proposal



### **EMVS Basic Principles**



- Point-of-Dispense Verification
- All verification activities are performed in national systems of the EU member states
- Interoperability between the different national systems through European Hub
- Data are owned by party that generates
- Data of other parties cannot be accessed except
  - For verification purposes
  - If specifically agreed between partners
- Supervision by relevant competent authorities
  - For reimbursement / pharmacovigilance purposes (article 54a.4+5)

#### **ESM**

A medicines verification
model for Europe
Using the
EMVS (European Medicines
Verification System)





### Each pack has its own unique identity



□ The ESM uses a 2D barcode, developed to internationally recognised standards



- 14 digit Manufacturer Product Code
- Randomised Unique Serial Number
- Expiry Date
- Batch Number (up to 20 alphanumeric characters)



**Product #:** (01)09876543210982

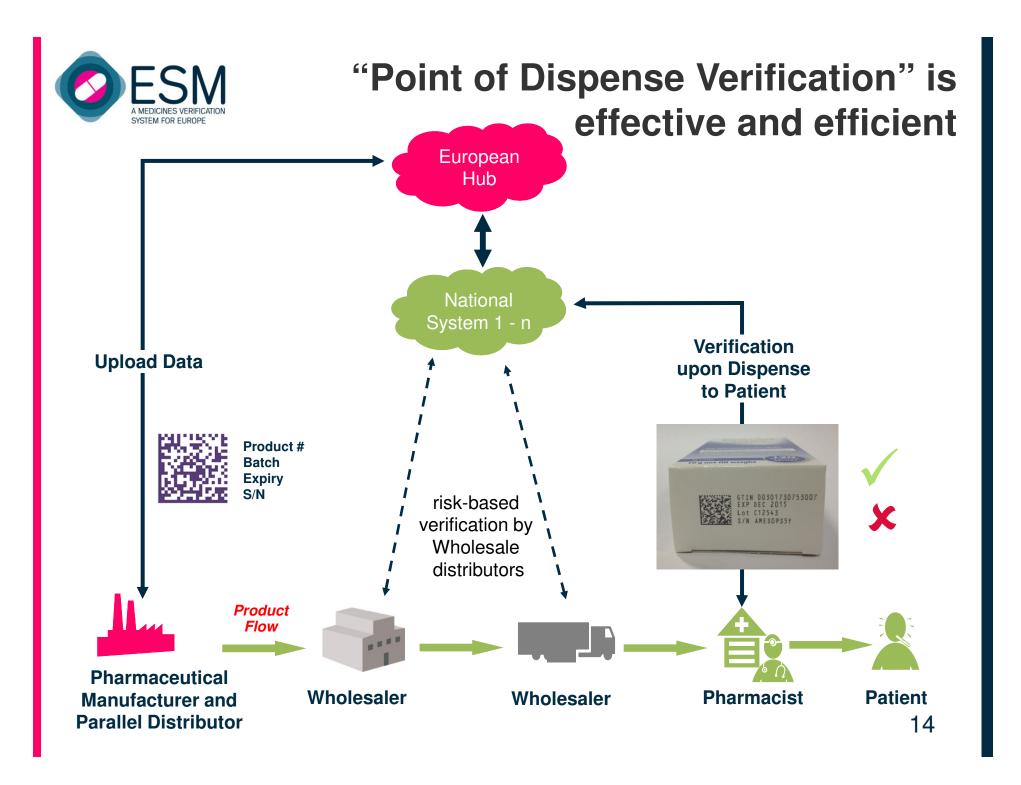
**Batch:** (10)A1C2E3G4I5

**Expiry:** (17)140531

**S/N:** (21)12345AZRQF1234567890

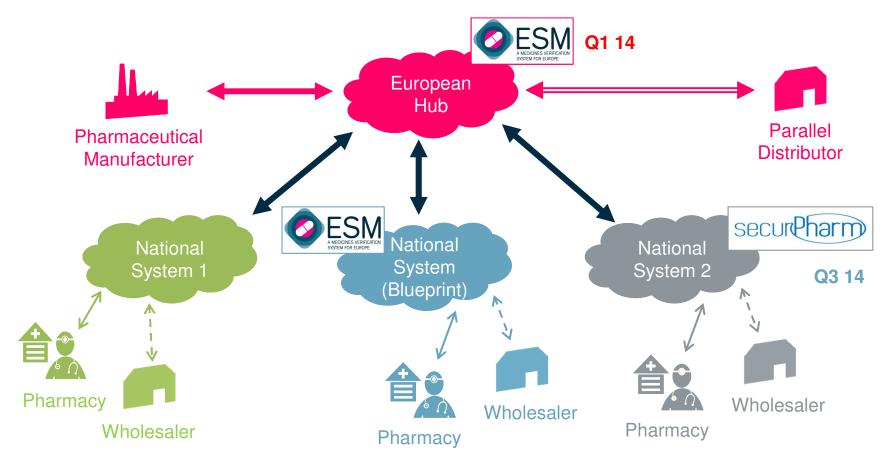








## Pan-European Architecture: The Hub connects National Systems





Manufacturer: data upload + voluntary verification

Periodic cross-region update

Pharmacy: mandatory verification

 $\langle --- \rangle$  Wholesaler: voluntary verification

System design for interoperability and efficiency



### The system has been demonstrated to be feasible



- ☐ Swedish pilot project (Sep 09 Feb 10)
- 25 pharmacies in greater Stockholm.180 dispensing points
  - 25 products. 110,000 packs. 14 manufacturers
- Key findings
  - Allows pharmacists to work at normal pace
  - Is customised to existing workflows
  - Is integrated into existing pharmacy software
  - Pharmacists and wholesalers are keen to get expiry date and batch number in machinereadable form

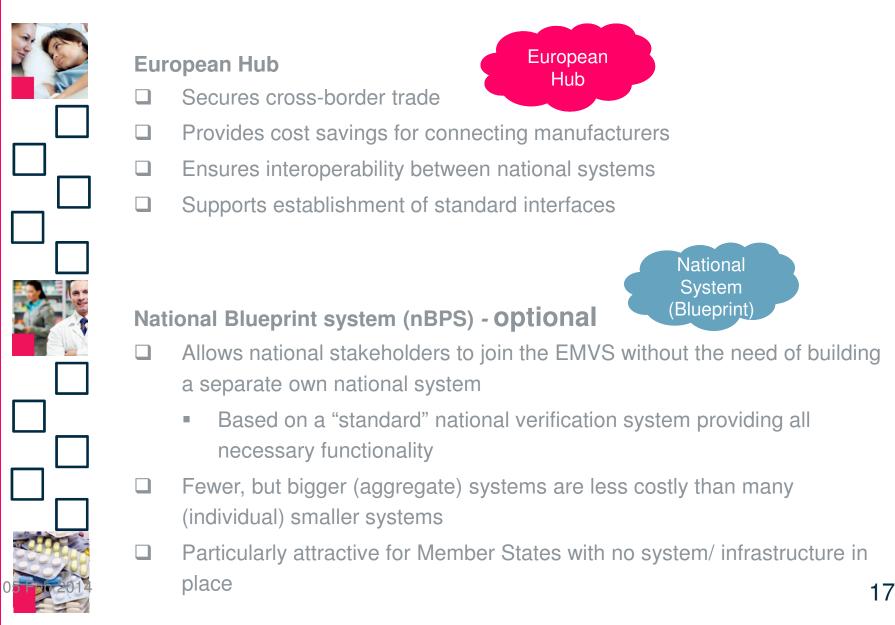
Sweden exceeded expectations and proved the concept in practice







#### The benefit of Hub and Blueprint systems



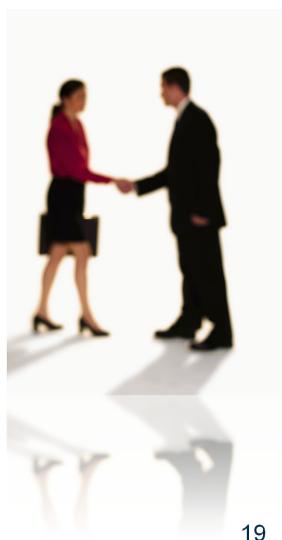


## Stakeholder governance at the European & national levels



### Who should be member of the governance organisation?

- Each relevant market partner constituency should be represented:
  - **Pharmacists**
  - Wholesalers
  - Marketing Authorisation Holders (branded & generic products)
  - Parallel traders
- supervision by competent authorities





## Governance is required at European and National level

Governance

System management

EMVO

EMVO

EMVO

IT provider to EMVO

Cooperation agreements

**NMVO Board** 

**NMVO** 

IT provider to NMVO

National System **NMVO Board** 

NMVO / EMVO

IT provider to EMVO

National System (Blueprint) **European Medicines Verification Organisation (EMVO) will** 

- Govern EU Hub
- ☐ Set standards for the system
- Conclude agreements with NMVOs

National stakeholders govern national systems through National Medicines Verification Organisation (NMVO)

Blueprint system to be governed nationally, but managed by EMVO

supervision by competent authorities



## Cost-effectiveness Designed with cost in mind



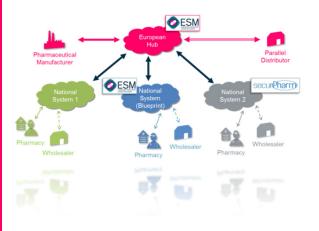
### The Directive asks for cost effectiveness

#### **How this drives cost effectiveness ESM** item Point of dispense authentication Less complex than a full track and trace model to build and operate (and risk based checking in the supply chain) • International recognised standards reduces manufacturing complexity and drives **2D DataMatrix** harmonisation in the supply chain • Dramatically reduces the number of point to Use of a Hub point interfaces required and so reduces cost Templated national system which reduces **National Blueprint system** development and implementation costs • The system operated on a not-for-profit basis Stakeholder governed



### Overall costs are incurred by different elements

### Repository system (Hub & national systems)



Manufacturers

### Installation for pack coding



Manufacturers

### Installations for pack verification



Pharmacies / wholesalers, respectively



## Status and next steps Perspectives for EU roll out



### **Phased Implementation**



- ☐ First steps towards the implementation of the EMVS' first phase have been initiated in 2012
- ☐ Timeline
  - 04/2013: Start development European Hub
  - 03/2014: Completion of European Hub
  - 07/2014: Connection between Hub and securPharm (D)
  - 07/2014: Connection of MAHs to Hub
- □ Roll-out to start upon publication of Delegated Acts (Early 2015)
  - Start date for development of Blueprint system not yet decided



### Timely implementation requires concrete planning now

	<ul> <li>Clarify governance options (private, public, private-public</li> <li>Delegated Act: stakeholder-governed model under supervision oversight by authorities</li> </ul>	,
	Develop principles for cooperation	
	Determine scope of functionality	
	Evaluate options to realise technical system (e.g. Blueprint)	
	<ul> <li>Develop milestone plan</li> <li>Governance organisation</li> <li>Implementation of technical system</li> </ul>	
	Plan for <b>budgets</b>	00



### Thank you

http://www.esmsystem.eu/home.html







# Back up slides Will not be presented but may be distributed



## Ten core principles as agreed by the current ESM members

	by the current Low members
	Combine tamper-evident packaging and unique serial number
	Continuity of protection by integration of parallel traders
	Ensure a single coding and identification system across EU
	Ensure interoperability of the national product verification systems
	Verify every serialised pack at pharmacy level
	Maximise potential benefits of mass serialisation by integration of batch number and expiry date in the coding system
	Transactional data remain in the sole ownership of the originator
	Use safety features that are simple, robust and cost-effective
	Key stakeholders work together in the interests of patient safety
	Involve other stakeholders (e.g. supervision by relevant competent authorities)



### Manufacturers decide on Tamper-Evidence technology



- Diverse solutions for tamperevident closure of original manufacturer's package exist
  - Glued cartons with/without perforation
  - Security seals
  - Wrap with foil
  - Bottles with tamper-evident screw caps
- Cost-effectiveness and technical feasibility need to be considered
- Selection should be left at each manufacturer's discretion





### Cost for the EMVS covers all relevant items



Set-up cost

- Core system development (incl. interfaces)
- Testing and Quality Assurance
- User Training
- Project Management

Technical running cost

- Licences
- Information technology infrastructure
- System & application maintenance
- Help-desk

Administrative cost

- Accounting
- User administration
- Management of system provider
- Analysis of exceptional events / reporting
- Public relations