



GS1 Healthcare Introduction Session

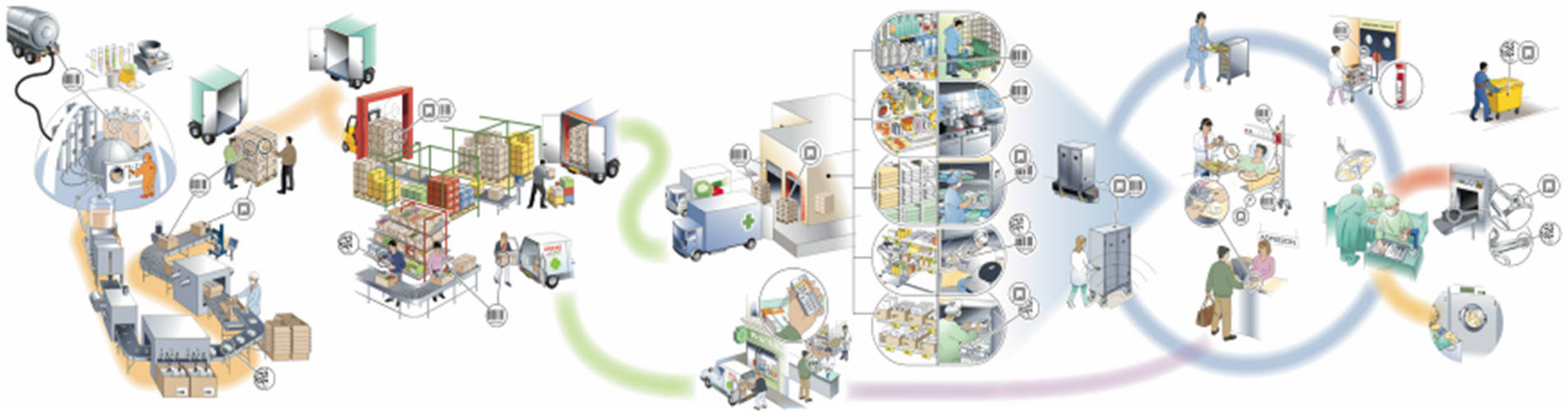
Copenhagen, 21 October 2014







GS1 Healthcare – a voluntary, global Healthcare User Group



To lead the healthcare sector to the successful development and implementation of **global standards** by bringing together **experts** in healthcare to enhance **patient safety** and **supply chain efficiencies**.



Huge cost savings and patient safety benefits when adopting a single global standard in healthcare

- “Implementing **global standards** across the entire healthcare supply chain **could save 22,000-43,000 lives** and avert 0.7 million to 1.4 million patient disabilities”
- “Rolling out such standards-based systems globally **could prevent tens of billions of dollars’ worth of counterfeit drugs** from entering the legitimate supply chain”
- [We] “estimate that **healthcare cost could be reduced by \$40 billion-\$100 billion globally**” from the implementation of global standards
- “Adopting **a single set of global standards** will cost significantly less than two” (between 10-25% less cost to stakeholders)

SOURCE: McKinsey report, “Strength in unity: The promise of global standards in healthcare”, October 2012



What will be covered

- Automatic Identification & Data Capture – ***Chuck Biss***
- Data synchronisation / GDSN – ***Pete Alvarez (Anouk Chavel)***
- eCom – ***Hans Lunenburg***
- Traceability – ***Janice Kite***





GS1 Enabling AIDC Solutions in Healthcare

Chuck Biss

Senior Director, AIDC Healthcare

GS1 Global Office





Automatic Identification & Data Capture (AIDC)

“Automatic Identification and Data Capture (AIDC) refers to the methods of **automatically identifying** objects, **collecting data** about them, and **entering that data** directly into computer systems (i.e., without human involvement).”

Wikipedia, 2009





GS1 AIDC Application Standards

GOAL - Define the **data** to carry using specific **data carriers** for every healthcare **product** at every **packaging level**



VISION - **EVERY** item has **ONE** set of key identification data carried in **ONE** data carrier able to be scanned by **EVERYONE** at every key process step...



AIDC for Healthcare...Why?

- **To improve patient safety**
 - Achieve the “5 Patient Rights” / “8 Patient Rights”
 - Reduce errors
 - Ensure needed information is readily available to the healthcare practitioner
- **To increase efficiency in supply chain and treatment chain**



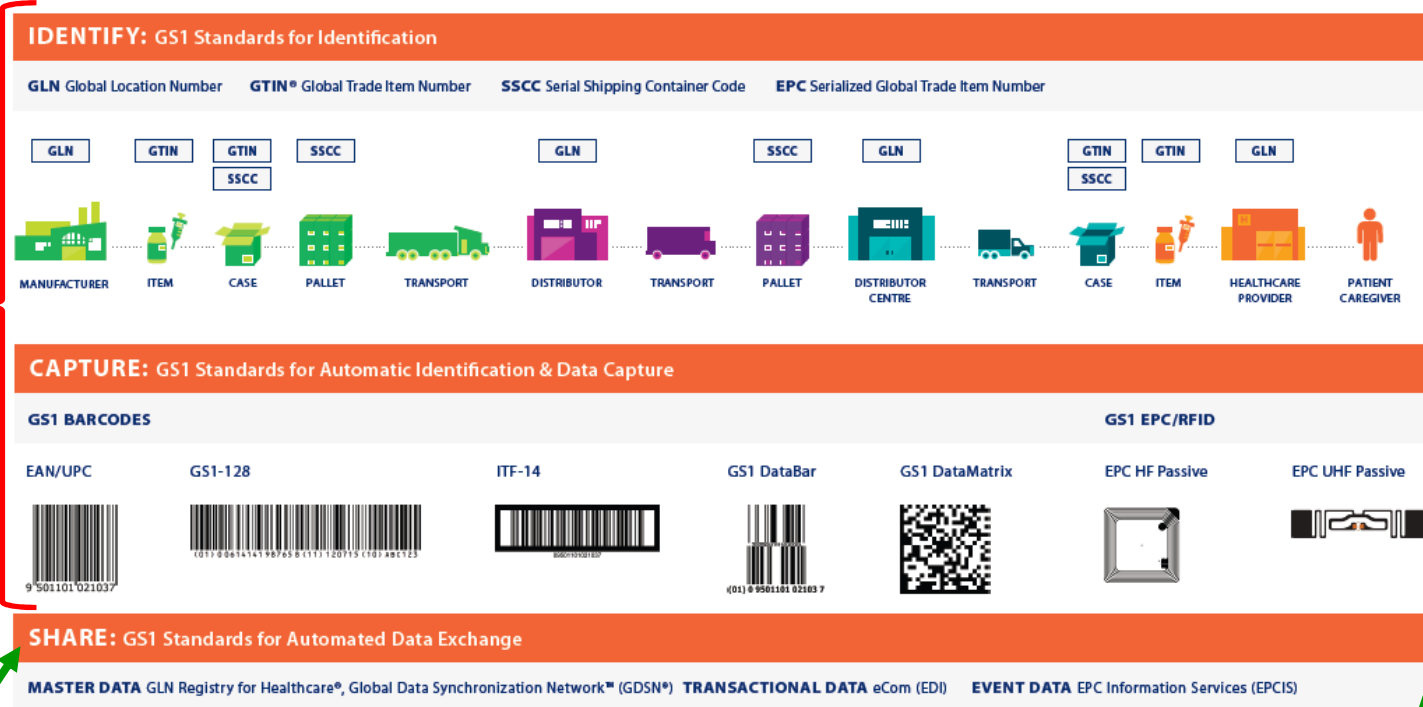


GS1 System “building blocks” ...

...Identify, Capture & Share

- “Identify”**
Unique Identification
- ✓ Product, Logistic Unit, Location & Legal Entity ID (static data)
 - ✓ Product Attributes (dynamic data)

- AIDC**
“Capture” Machine Readable Data Carriers
- ✓ 1D/2D Bar Codes
 - ✓ EPC/RFID Tags



“Identify, Capture & Share” enables...

T
R
A
C
E
A
B
I
L
I
T
Y

Pete will cover next...

Janice will cover later...

...for Med Device & Pharma



Scope: Data & Data Carriers

Data – a few examples:

- ✓ Global Trade Item Number (GTIN)
- ✓ Expiry Date
- ✓ Batch / Lot
- ✓ Serial Number



(01)07612345678900(17)100503

(10)AC3453G3 (21)123

Data Carriers – a few examples:



(01) 0 0012345 67890 5



1012345678905

**GS1-128 &
GS1 DataBar**



(01)07612345678900(17)100503

(10)AC3453G3

GS1 DataMatrix



EPC / RFID



Scope: All healthcare products

Pharma / Vaccine / Nutritional



Medical devices



Retail



Non-retail





Scope: All packaging levels



**Pallet
(Tertiary*)**

**Case /
Shipper
(Tertiary*)**

**Secondary
package**

**Primary
package**

**Single Unit
package**

NOTE: * - Potentially a new definition that is needed...

Note: Images shown are for illustration example only, refer to local regulations and/or the latest version of the GS1 General Specification for more detail.



Scope: Data based on information needs

AIDC ID & Marking needs

Highest

Enhanced

Minimum



Cotton balls, bandages, patient exam gloves, ...



Catheters, needles, ...



Pacemakers, hip replacements, ...



Foundation of the GS1 System...

GS1 Identification Keys

Provide access to information held in computer files –
Information about company/location, package, product,
price, etc.

1234567891234





GS1 Identification Keys



Item identifier = **GTIN**

Global Trade Item Number



Logistics unit
identifier =

SSCC

Serial Shipping Container Code



Location identifier = **GLN**

Global Location Number

- ❖ **Unique**
- ❖ **Non-significant**
- ❖ **International**
- ❖ **Secure**
- ❖ **Foundational**

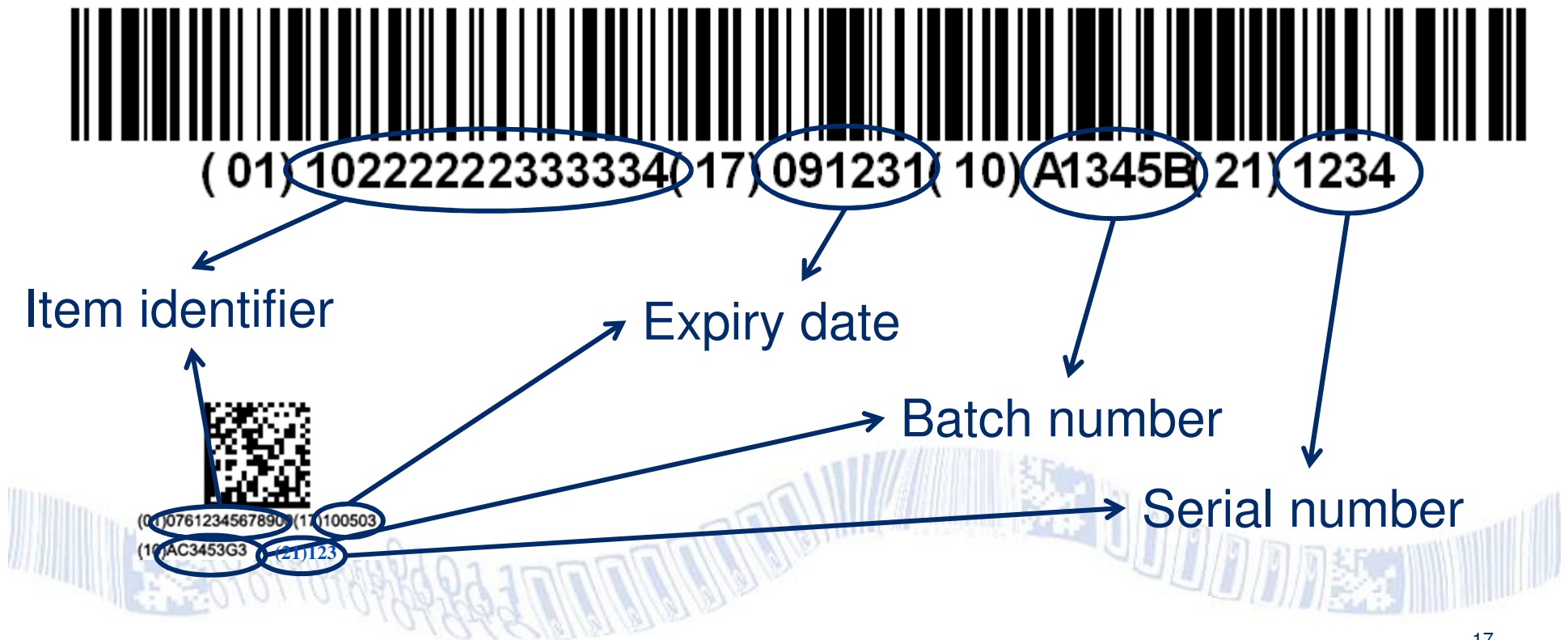
And there are more ...





The need to capture the trade item ID ... and beyond...

GS1 Keys prevail... but some users need more detailed information about that specific unit





GS1 Application Identifiers...

GS1 Gen Spec includes 100+ “Application Identifiers” or “Key Attributes”

Application Identifiers generally found in Healthcare

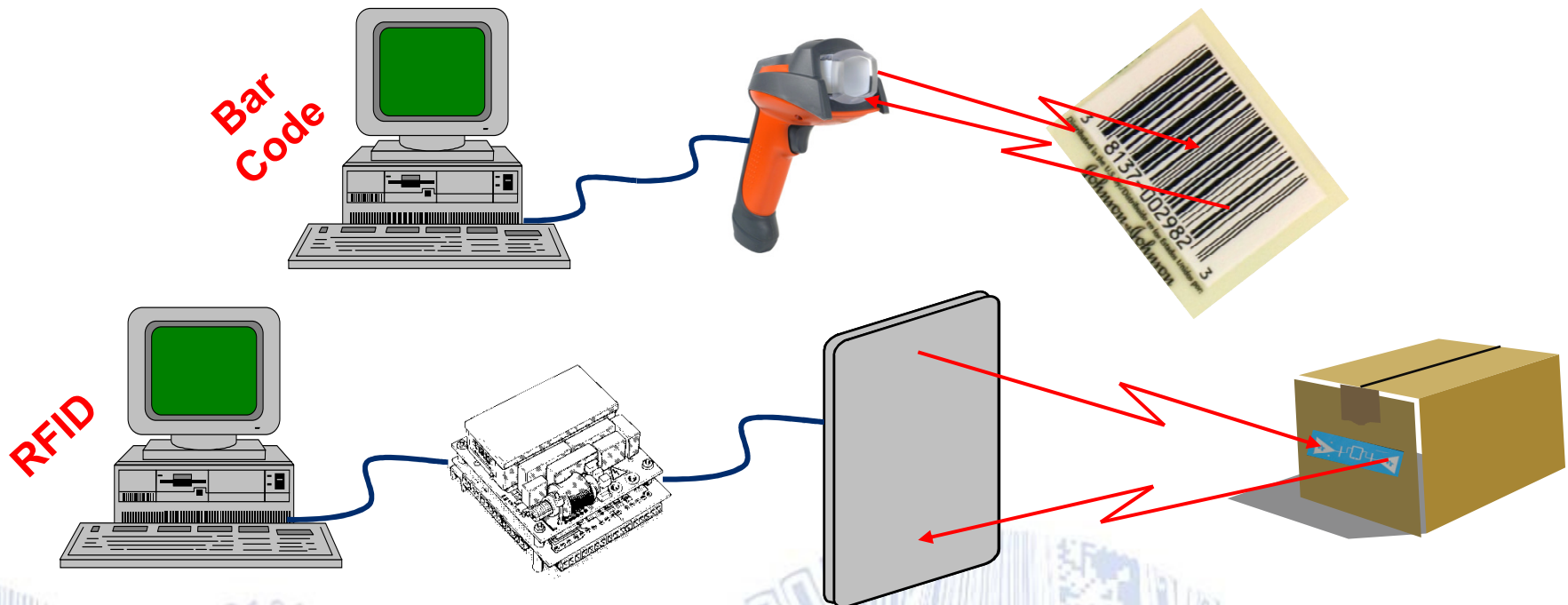
00	SSCC (Serial Shipping Container Code)
01	GTIN (Global Trade Item Number)
10	Lot / Batch
11	Production
17	Expiry Date
21	Serial Number
710	NHRN – Germany PZN
711	NHRN – France CIP
712	NHRN – Spain CN
713	NHRN – Brazil DRN
7003	Expiry Date + Time
7004	Active Potency
8003	GRAI (Global Returnable Assets Identifier)
8004	GIAI (Global Individual Assets Identifier)
8017	GSRN Service Provider
8018	GSRN Service Recipient
8019	Service Relationship Instance Number



GS1 Data Carriers

AIDC - Data Carriers

GS1's ISO compliant machine-readable **Data Carriers** for use with the product (via packaging, label or DPM... Direct Part Marking) containing the Product ID – 1D / Linear & 2D / Matrix bar code symbols, RFID.



NOTE: Though “any” approved machine-readable Data Carrier is applicable... GS1 Healthcare members have agreed to focus at this time on the use of bar code technology before considering other data carriers...



GS1 Bar Code Data Carriers for Healthcare



5 012345 678900
EAN/UPC



(01)00012345678905(21)12345678
DataBar



(00) 0 0123456 1234567
GS1-128



**GS1
DataMatrix**



00012345678905
ITF-14



Camera-based bar code scanners are needed in Healthcare for 2D Data Carriers AND are a GS1 Healthcare Leadership Team recommendation!!



GS1 System Standards



GS1 General Specifications – the ONE global standard for AIDC in Healthcare

- **The core standards document** of the “GS1 System”... describes how GS1 keys & data carriers should be used - Available online at: <http://www.gs1.org/genspecs>

GS1 Healthcare GTIN Allocation Rules – GTIN assignektn from a the ONE global standard

- **A guide to GS1 ID Key assignment**... the GS1 GTIN Allocation Rules presented in Healthcare related terms with Healthcare specific examples – Available online at: <http://www.gs1.org/1/gtinrules/index.php/p=static/t=healthcare>

Many countries have already adopted GS1 Standards... and we **anticipate many more!**





AIDC related sessions...

This Week:

Join Us!

- **Tuesday, 14:00 – 15:30 and 16:00 – 17:30**
“UDI Implementation Reality Breakout”
 - Medical devices: How to identify/mark my products
 - Chaired by Jackie Elkin (Medtronic)
 - Panel speakers: Georg Keller (Aesculap AG), Dennis Black (BD), Jay Crowley (USDM Life Sciences)
- **ALL week...**
Multiple AIDC related presentations during our Plenary Sessions

Looking Forward:

- **Global AIDC teams**
None active right now... stay tuned for future developments
- **Local AIDC teams**
Contact your local Member Organisation representative



The Global Data Synchronisation Network in Healthcare

21 October 2014

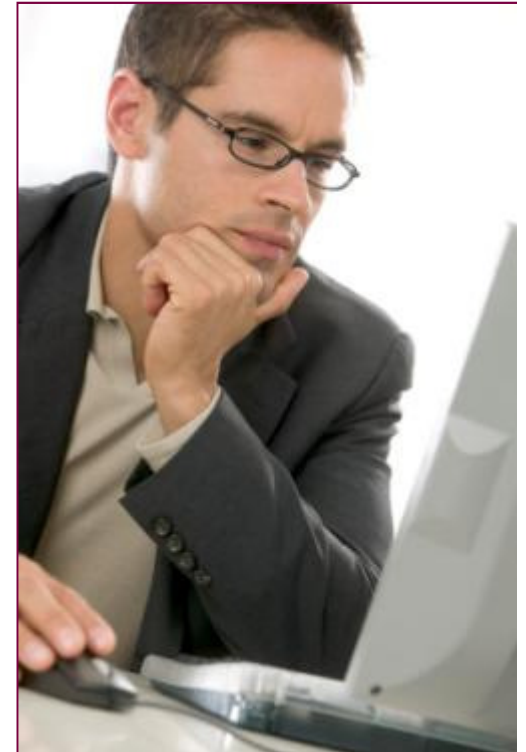




The master data problem

Every company has a **database** filled with master data about the products they **make, sell, or buy**

But when one company needs to **change** any bit of information in their database or **add a new item**, another database becomes **outdated!**





Managing master data

Where does the data come from?

Where does data come from - current situation:

- **Varying methods of communicating information**

Supplier A – printed catalog

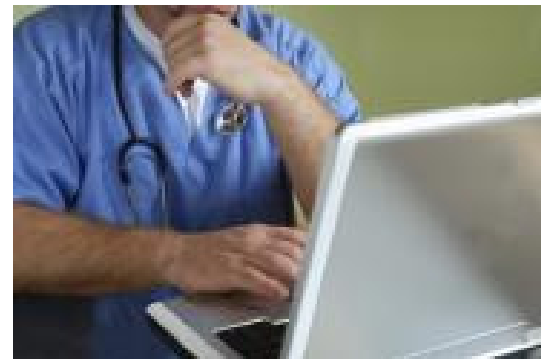
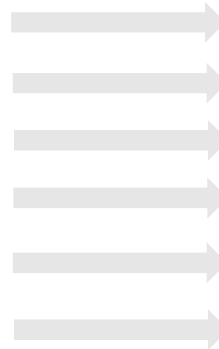
Supplier B – price quote

Supplier C – PDF data

Supplier D – Excel tables

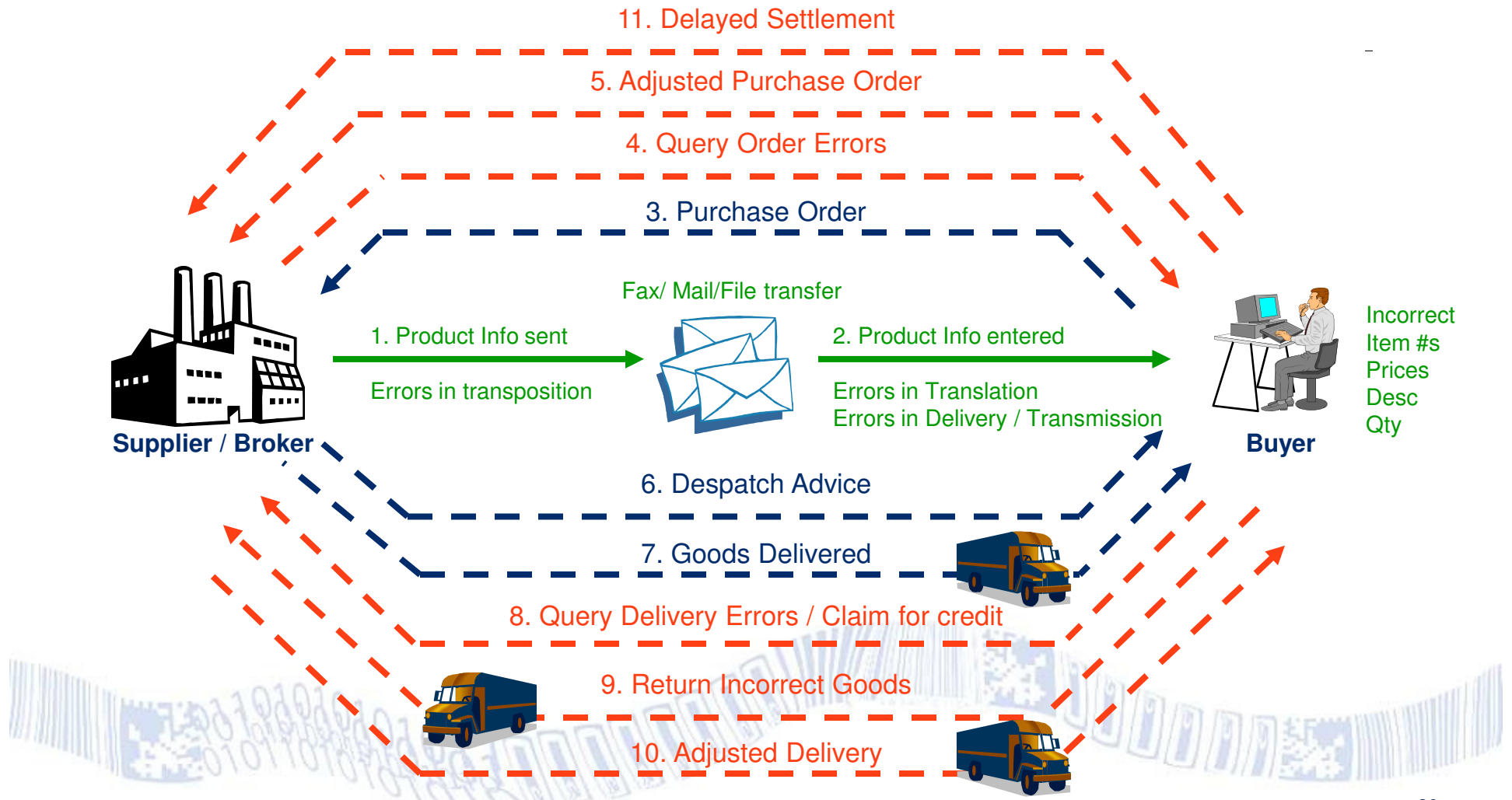
Supplier E – text data

Supplier F – link to website





Before Data Synchronisation





The Australian Data Crunch Report puts a cost to the problem!



Potential savings from improved data quality³

By conservative estimates, more than \$100 million in potential savings can be achieved by addressing product data quality issues by making only minor adjustments to existing processes.



Managing Master Data

How to improve?

Supplier = data source

Needs single point-of-entry

- One database to load new item data and update data on existing items

Needs security

- Authorization access by supply chain partners

Standards-based

- Standard identification keys
- Predefined (set of) product attributes

Hospital = data recipient

Needs single point-of-truth

- One source for up-to-date, accurate data
- Continuous synchronisation

Standards-based

- Standard identification keys
- Consistently formatted information
- Complete information



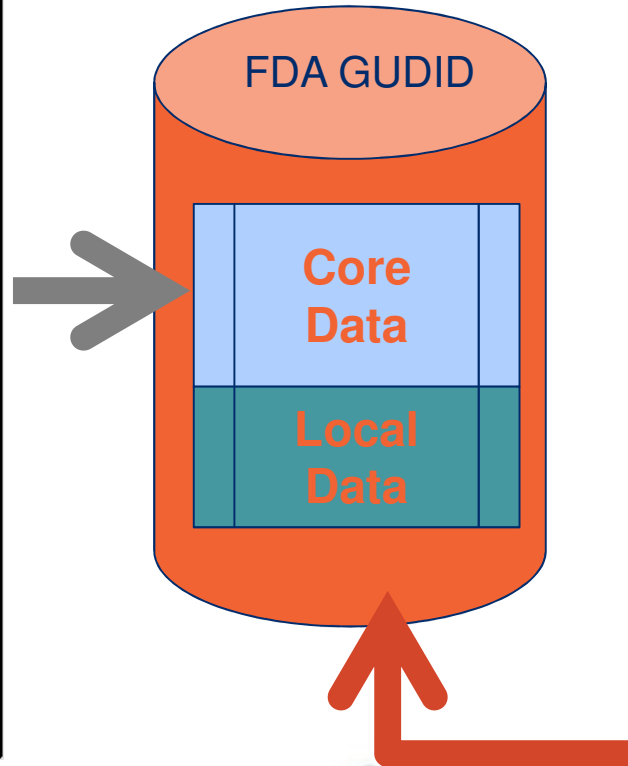


UDI Databases: Global Core Data + Local Data



- Packaging Hierarchy, per pack. level
 - DI / Unit of Measure / Quantity
- Unit of Use DI
- Manufacturer Name, Address, Contact info
- Authorized Representatives (list of countries)
- Nomenclature + Term (e.g. GMDN code)
- Brand Name
- Device Model or Version
- Reference Number (REF No./catalog no.)
- Controlled by (e.g. exp. date, lot no., serial no)
- Clinical Size (Size/Volume/Length/Gauge...)
- Special Storage Conditions
- Special Handling Conditions
- Labeled as 'single use'
- Sterility / Package sterile
- Need to be sterilized before use + Method
- Restricted number of reuses
- License / Marketing Authorization
- URL for additional information
- Critical warnings / contraindications as labeled
 - labeled as containing Latex
 - labeled as containing DEHP

Global **core data** elements defined by IMDRF

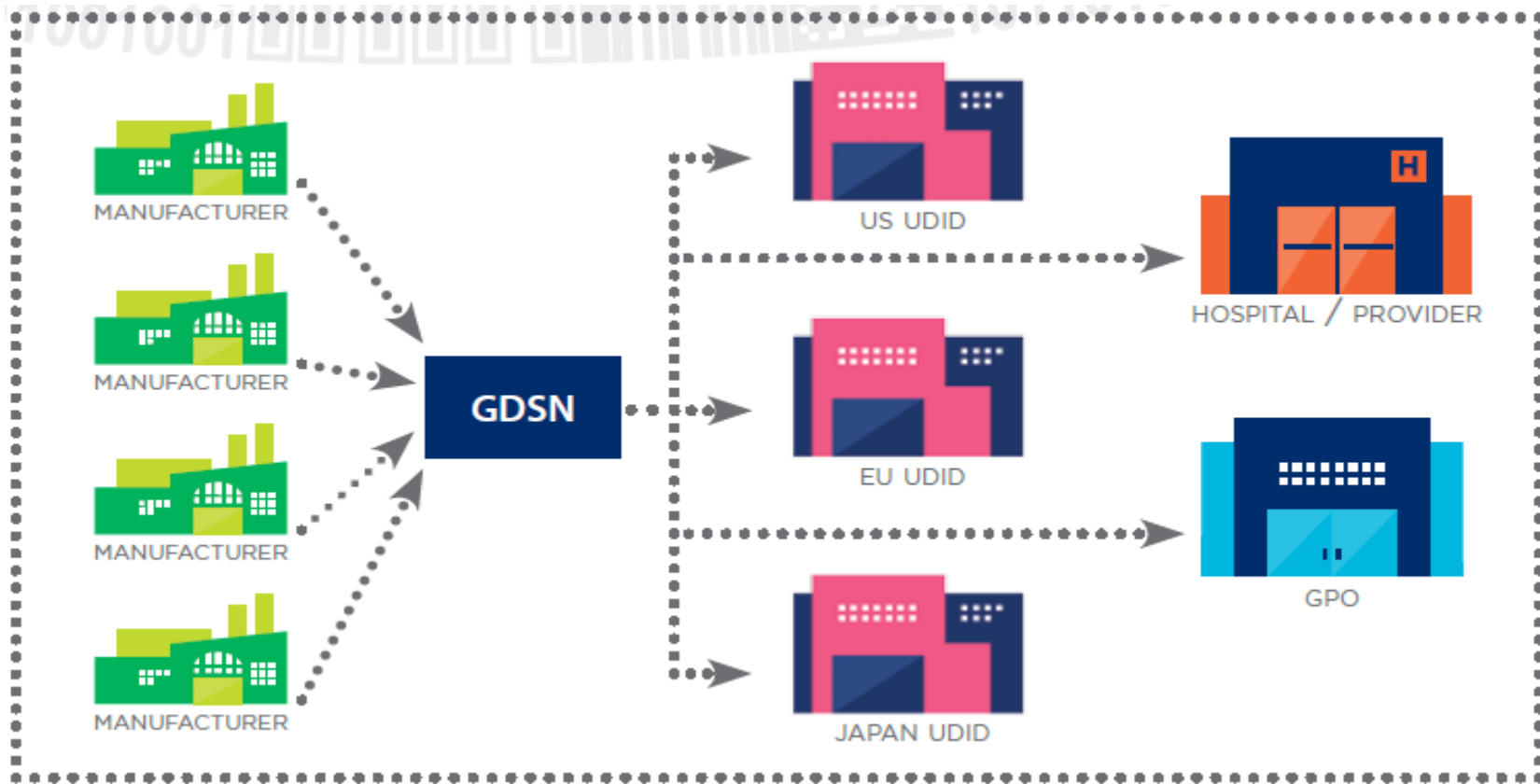


Additional **local data** elements defined by the FDA

- DUNS no
- Authorization no (510k)
- Product Code
- FDA Listing no
- Product exempt from PMA
- Prescription product
- Kit product
- Combo product
- Contains human cell / tissue
- MR safety
- ...



The right data for the right product to the right recipient



Manufacturers are able to provide data to all UDI databases and their customers (hospitals, distributors, wholesalers, GPOs) simultaneously, with a single connection, via the Global Data Synchronization Network.



After Data Synchronisation





The ultimate **value** of quality data



Healthy patients and happy care givers



GDSN related sessions **This Week:**

GDSN implementation success story and preparation for UDI databases

- Wednesday, 14:00 – 15:30 and 16:00 – 17:30
- **Panellists:**
 - Volker Zeinar, B.Braun
 - Mark Wasmuth, GMDN
 - Greg Patterson, FSEnet+
 - Dave Ralph, Commport

Join Us!



For more information



www.gs1.org/gdsn

www.gs1.org/healthcare





GS1 eCom in Healthcare

Hans Lunenburg
Sectormanager Healthcare
GS1 Netherlands

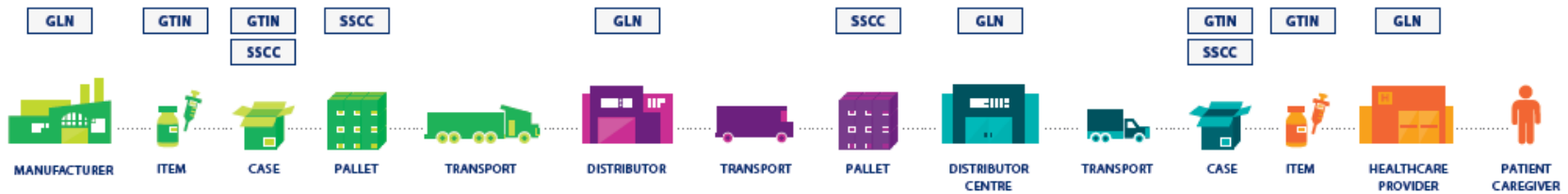




The GS1 System

IDENTIFY: GS1 Standards for Identification

GLN Global Location Number GTIN® Global Trade Item Number SSCC Serial Shipping Container Code EPC Serialized Global Trade Item Number



CAPTURE: GS1 Standards for Automatic Identification & Data Capture

GS1 BARCODES

EAN/UPC



9 501101 021037

GS1-128



(01) 0061414198765 8 (11) 120713 (10) ABC123

ITF-14



880101021037

GS1 DataBar



(01) 0 990101 02103 7

GS1 DataMatrix



GS1 EPC/RFID

EPC HF Passive



EPC UHF Passive



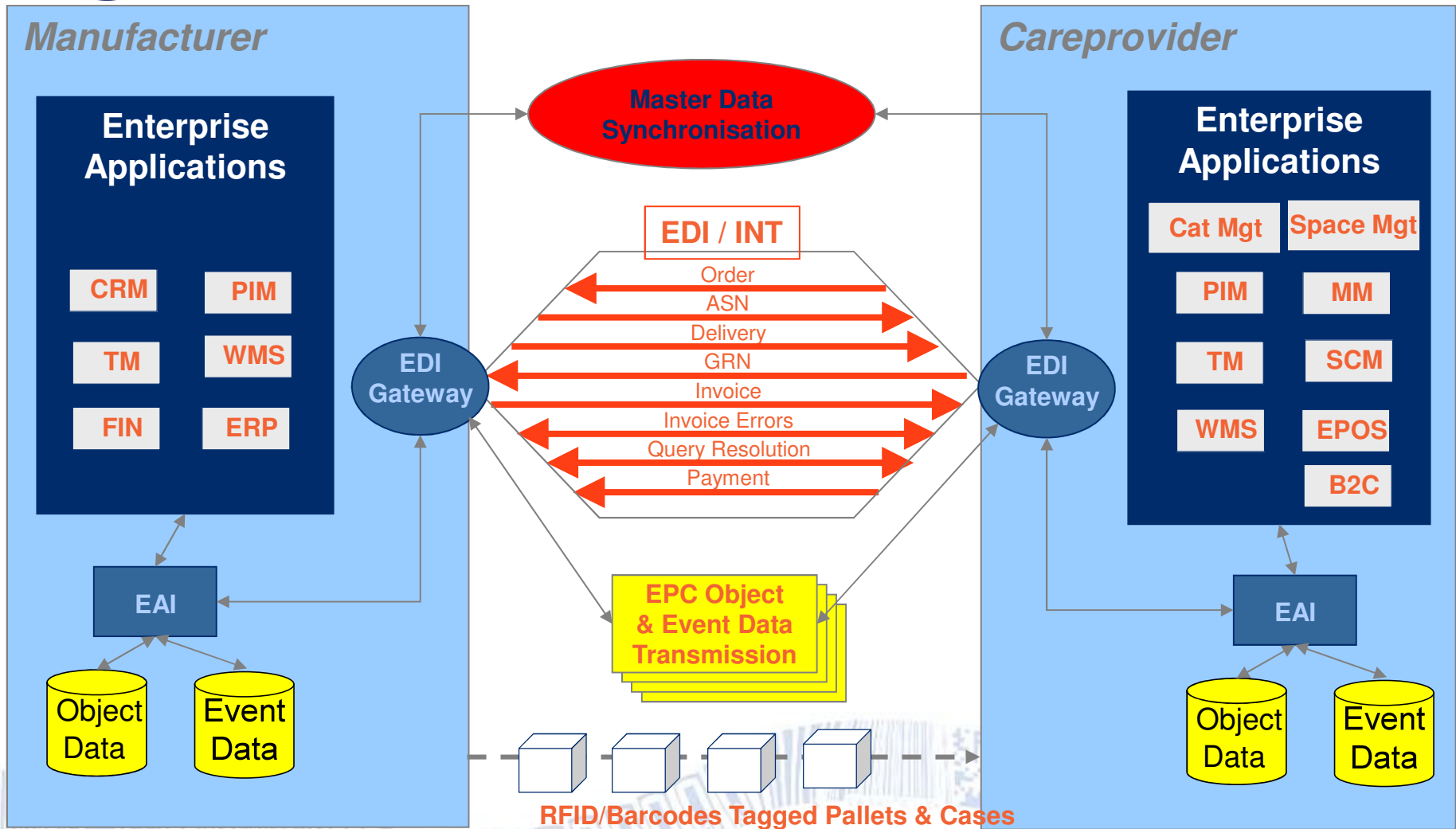
SHARE: GS1 Standards for Automated Data Exchange

MASTER DATA GLN Registry for Healthcare®, Global Data Synchronization Network™ (GDSN®) **TRANSACTIONAL DATA** eCom (EDI) **EVENT DATA** EPC Information Services (EPCIS)



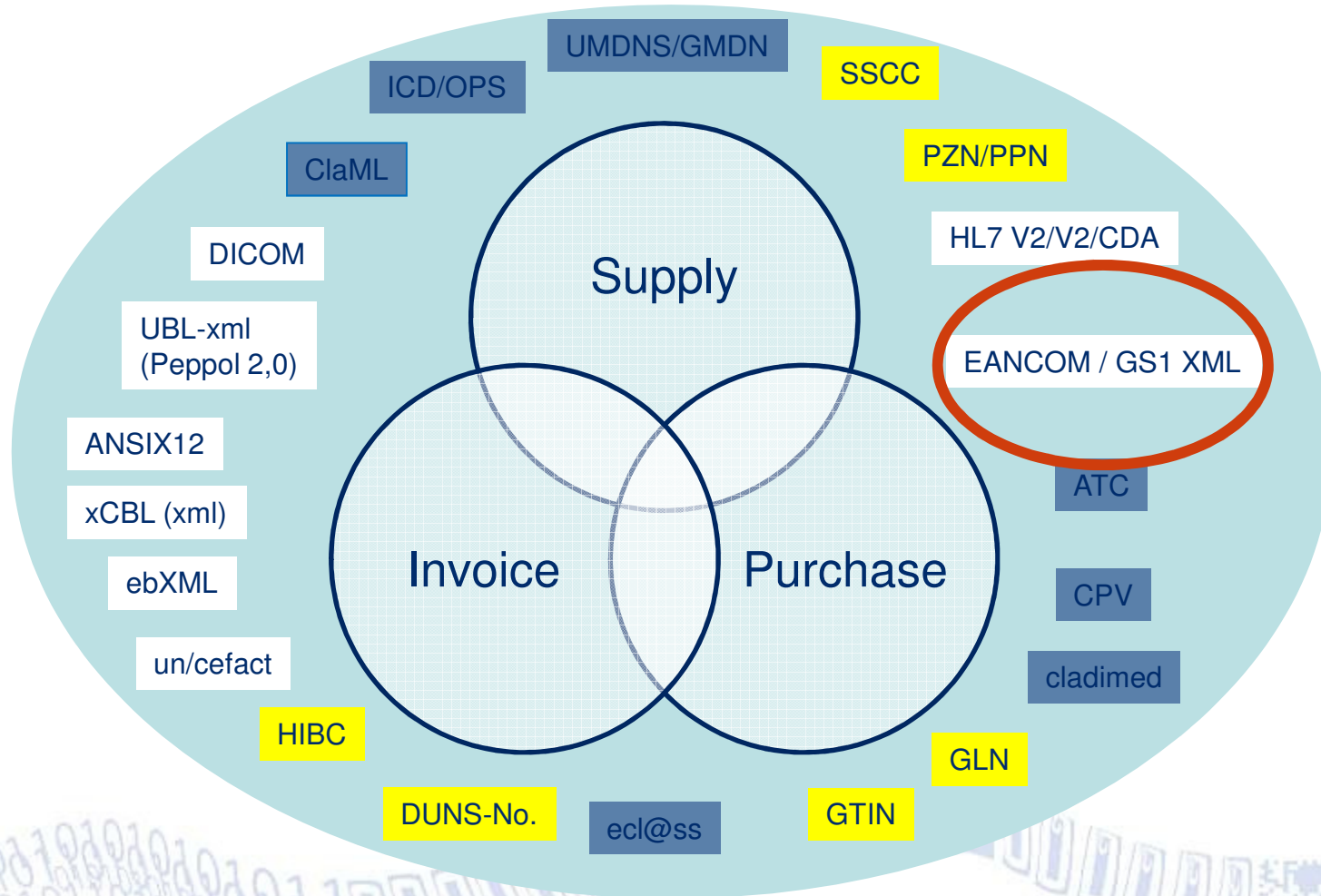


Supply chain visibility according to GS1





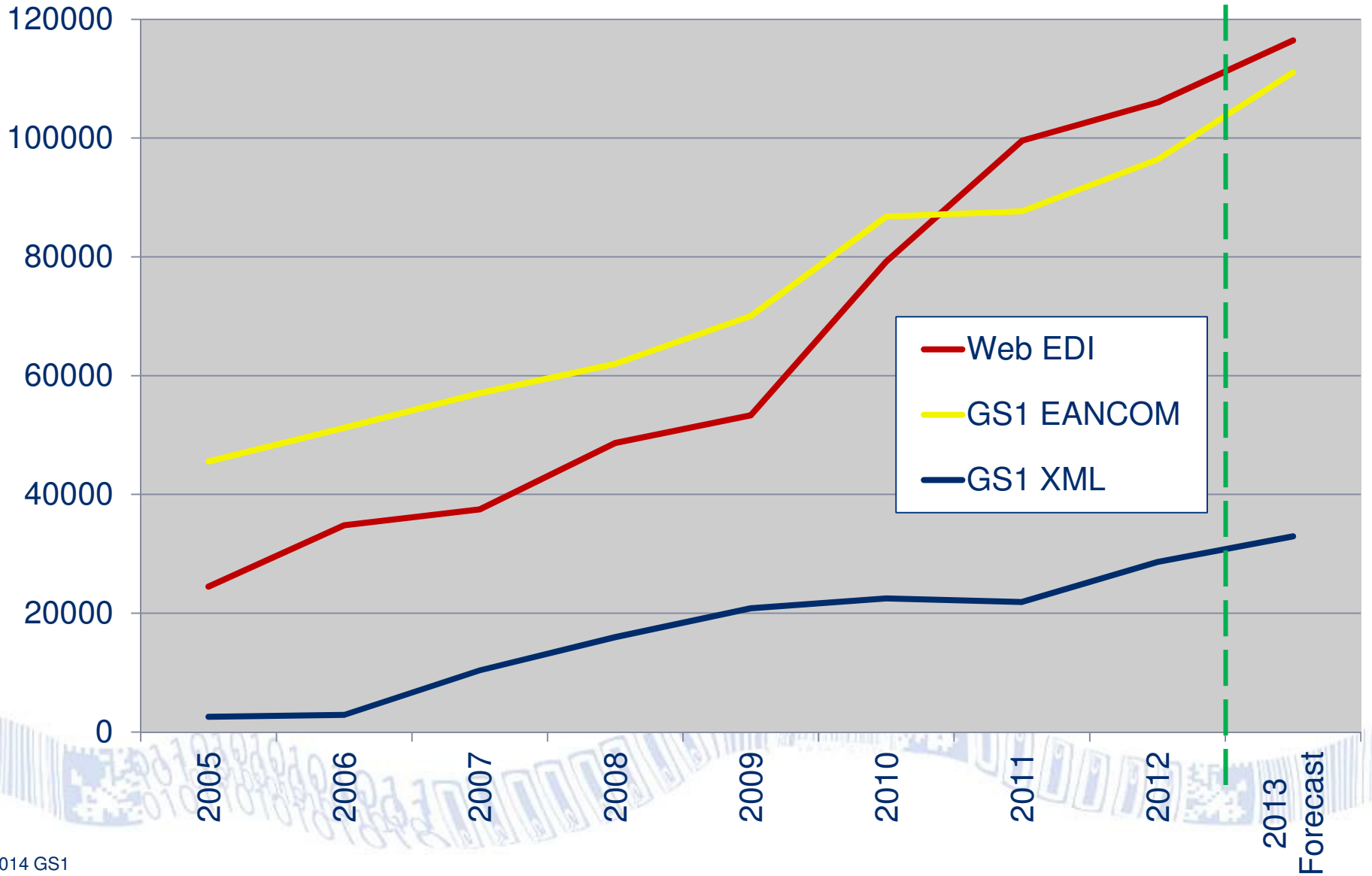
IT Standards of eCommerce





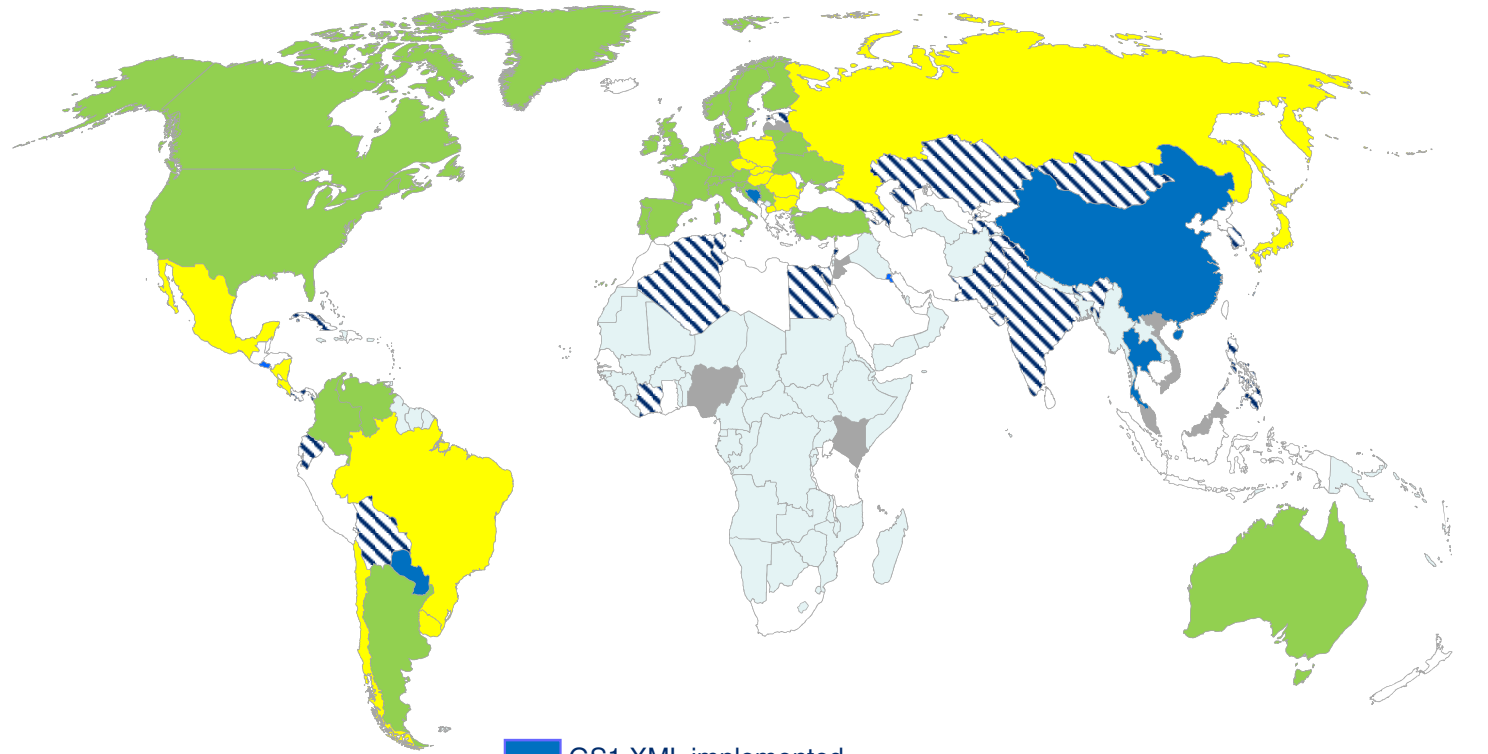
eCom implementation trends

GS1 eCom adoption 2005 - 2012





eCom implementation geography



-  GS1 XML implemented
-  EANCOM implemented
-  Both GS1 XML and EANCOM implemented
-  Only non-GS1 eCom standards implemented
-  No eCom standards implemented
-  Non-GS1 member countries (no data available)



Discussions and Statements

Customer:

We only accept format XXX, it is decided in our local GS1 group to use it !

Solution Provider:

You can get each format you want to your customer, costs are xxx !

IT Manufact

Currently we have no resources to do that !

IT Manufact

Why do we use a standard if the same process is used different in different countries !

IT Manufact

Costs for developing and testing of each format are xxx

Board of Manufact

If we are able to harmonize processes in SAP why isn't the healthcare market in different countries able to harmonize?

IT Manufact

If there are some major changes I have to change it several times !

Board of Manufact

How far away are we in using standards even the GS1 standards are not harmonized globally. Do we use the only the GTIN as an result

Board of Manufact

It is responsibility of department Global eCommerce & Auto ID to harmonize standards

Board of Manufact

GS1 is a Global Organization. Our expectations to them were global harmonization of standards !

IT Manufact

Why can't we use what we already have realized



1 Format in EANCOM and GS1-XML ?

80 – 90 % Global harmonized data and use

10 – 20 %
Country specific
add-ons

Key factor is processes harmonization!!





Healthcare Interoperability Model (HIM)

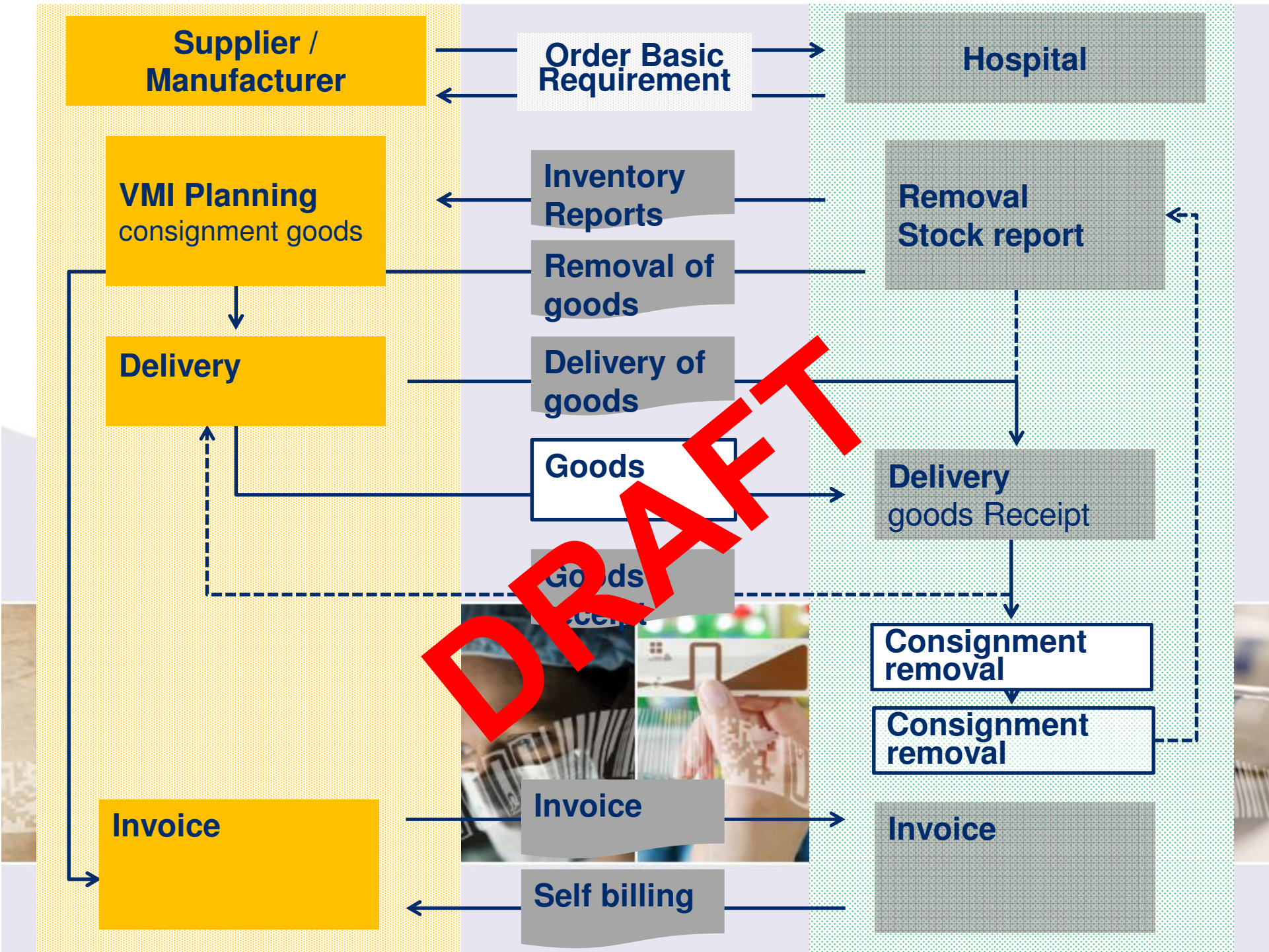
GOAL:

Develop a framework to align GS1 eCom standards so they can be used throughout the Global Healthcare supply chain from supplier to logistic end-user

HOW:

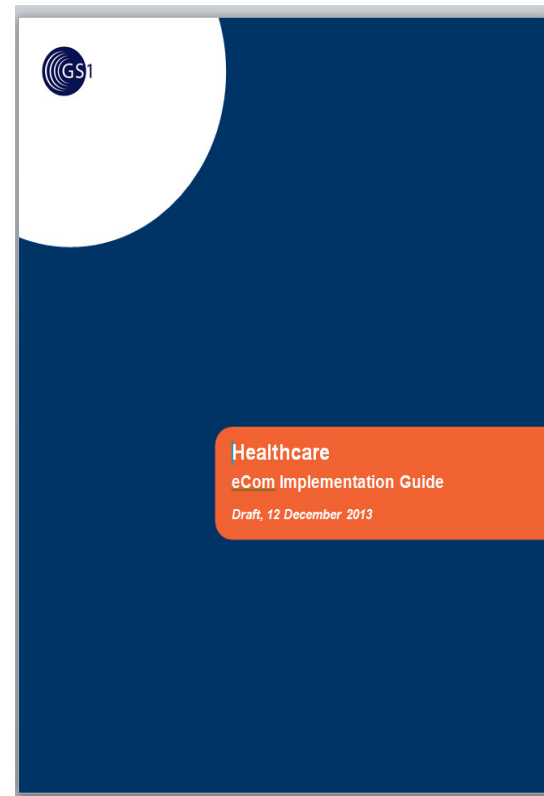
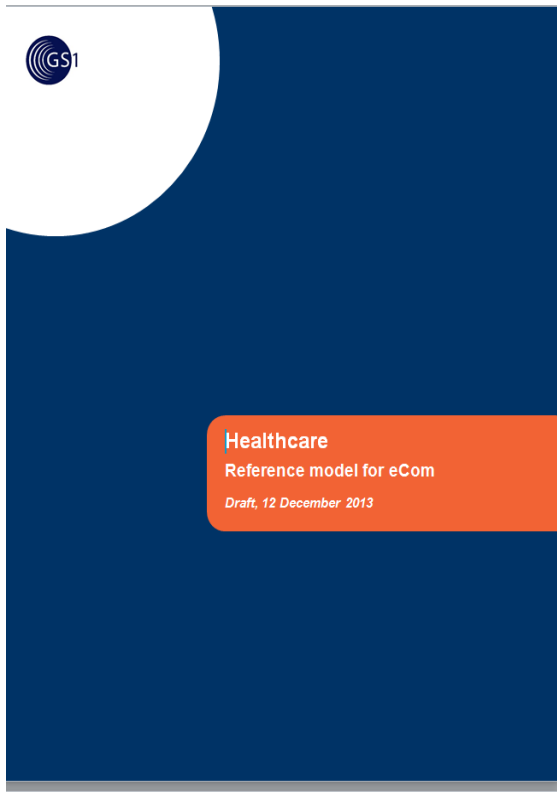
Define a common Healthcare Process Model







Process Model





eCom related session...

This Week:

Wednesday, 11:50 – 12:30

Ask the expert meeting on eCom

Join Us!





Traceability in Healthcare

Janice Kite

Traceability Director Healthcare

Global Office





GS1 Members Vision for Traceability in Healthcare

Full, End to End, actionable visibility of finished pharmaceuticals and medical devices in healthcare globally, from Point of Production¹ to Point of Use²

- All authentic **items** are identified with the appropriate **GS1 Identification Keys** (e.g. GTIN) and appropriate **Application Identifier** ((AI), e.g. Serial No. AI(21)), if applicable, at point of production
- Supply chain identifiers are associated with the patient and remain with/on items throughout their intended useful life
- All **physical locations** are identified with the appropriate **GS1 Identification Key** (e.g. GLN) across the entire supply chain
- All **patients and care givers**, when in a care giving environment, are identified with the appropriate GS1 identification Keys and appropriate **AI** (AI 8017, 8018, 8019)
- Agreed **master data** is captured and shared (e.g. via GDSN) amongst trading partners
- Agreed **transactional data** is captured and shared (e.g. via business-to-business messaging) amongst trading partners
- Agreed **event data** is captured and shared (e.g. via EPCIS) amongst trusted traceability stakeholders, based on data sharing/security policies

SO THAT:

1. The terms production or producer can also mean commercially available, manufacture(r), creation(or), compounding(er)...
2. The terms use or used can also mean consumed, infused, implanted, destroyed



GS1 Members Vision for Traceability in Healthcare

Full, End to End, actionable visibility of finished pharmaceuticals and medical devices in healthcare globally, from Point of Production¹ to Point of Use²

SO THAT:

- Items can be **tracked** (forward / downstream) across the entire supply chain (production to use) in real time
- Items can be **traced** (backward / upstream) across the entire supply chain (from current location back to the producer) in real time
- Item identification is available for use at patient bedside to ensure the Patient Rights³ are achievable
- Patients Electronic Health Records (EHRs) are updated with agreed traceability information, including Care Giver identification
- Counterfeit products are detected when entering the legitimate supply chain
- A **product recall** would be fast, efficient and effective

1. The terms production or producer can also mean commercially available, manufacture(r), creation(or), compounding(er)...

2. The terms use or used can also mean consumed, infused, implanted, destroyed

3. Pharmaceuticals (5): Right patient, right drug, right dose, right route, right time. Medical Devices (8): right device, right location, right time, right condition, right procedure, right anatomic site, right patient, right user



Traceability in Healthcare

Objective:

Ensure the GS1 System of Global Standards has both the **process** and **technical standards** necessary to achieve the GS1 Members Vision for Traceability in Healthcare

Approach: Two phases

TH-I - Process Standard - December 2007 to April 2009

TH-II – Technical Standards – April 2009 to date & ongoing





Traceability in Healthcare I (TH-I)

DELIVERED:



Global Traceability Standard for Healthcare (GTSH)

PUBLISHED 27th February 2009

[http://www.gs1.org/docs/gsm/traceability/Global Traceability Standard Healthcare.pdf](http://www.gs1.org/docs/gsm/traceability/Global_Traceability_Standard_Healthcare.pdf)

GTSH Implementation Guideline

PUBLISHED 24th April 2009

[http://www.gs1.org/docs/gsm/traceability/Global Traceability Implementation Healthcare.pdf](http://www.gs1.org/docs/gsm/traceability/Global_Traceability_Implementation_Healthcare.pdf)





Traceability – a definition



“Traceability is the ability to **track forward** the movement through specified stage(s) of the extended supply chain and **trace backward** the history, application or location of that which is under consideration”.

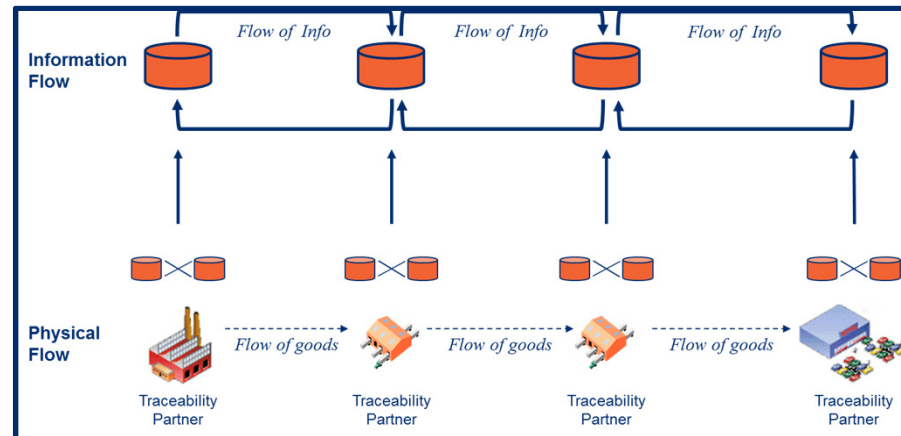
GS1 GTSH Issue 1.0.0, Feb-2009





Global Traceability Standard for Healthcare (GTSH) - Common themes

- PROCESS Standard
- Defines Traceability: both track & trace
- Defines foundational operational model:
 - one-up / one-down



- Physical flow of product **has to be** in parallel to flow of info. about product
- Inputs (eg receipt) must be linked to outputs (eg dispensing)
- Parties can have varying roles
- Business Requirements = Needs
- Business Rules = control and/or constraints



Current Standards Development: Event-Based Traceability with EPCIS foundation

Four dimensions of any EPCIS event:

- **WHAT** objects are the subject of event?
*Individual objects (**SGTIN**) or groupings (**GTIN + Lot/batch**)*
- **WHEN** did this event take place?
Date, time and time zone
- **WHERE** did this event take place?
***SGLN** of physical location & object's subsequent whereabouts*
- **WHY** did this event take place? *including...*
 - *Disposition (e.g., “expired”, “recalled”)*
 - *Source/Destination to indicate . . .*
 - *transfer of **ownership/responsibility/custody**,*
 - *intended party/location **endpoints** of the transfer*

Videos: [A general introduction to the GS1 Event-Based Traceability healthcare](#) and
[An introduction dedicated to Solution Providers](#)

Join: Link to Join MSWG: <http://community.gs1.org/apps/org/workgroup/gsmppedsccsmswg/>



Traceability – THIS WEEK!

TODAY – Two identical sessions: 14:00-15:30 and 16:00-17:30

Traceability implementation for all stakeholders in the supply chain, from manufacturer to patient

This session outlines the foundations for enabling traceability using global standards, showcases standards work in progress to enable “Event Based” Traceability models and looks to the future with presentations from two global manufacturers on how an established traceability system can improve supply chain efficiency, enhance patient safety and enable better engagement with patients.

Thursday: 09:00-11:50 - PLENARY SESSION – Traceability

Traceability is today in the focus of many regulatory bodies and worldwide regulations and activities are evolving. This session discusses traceability and authentication, counterfeiting and the need to get the original product to the patient.





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