GS1

Welcome to our
29th Global GS1 Healthcare Conference

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Ryan Mavin

The Australian Capital Territory Government

The Global Language of Business

Cross hospital collaboration to develop a GS1 Standards Framework

Identification, Interoperability and Collaboration to achieve better healthcare within the Australian Capital Territory

Ryan Mavin, Senior Project Program Manager, ACT Government
Monday 18th April 2016

ACT Health

- 400,000 of 24,000,000 Australians live in ACT

  - Aging Population: Heavier demand for services

- Geographically manageable

  - Ideal for whole of jurisdiction innovation and standards implementation

- Investment in Digital Health Infrastructure

- Seeking to leverage this investment

Better outcomes for Patients

Whatever can go wrong, will go wrong.

Clinical Risks
- Wrong blood in tube
- Wrong medications
- Wrong procedure
- Wrong patient

Better outcomes for Patients

Treatment delays

- Equipment and Consumables incorrect or not available
- Staff not available
- Patient given a meal when nil by mouth

Sustainable Healthcare Services

- Spending: broader and better patient outcomes within budgets
- Struggling to rationalise costs
  - many hours manually preparing reports
  - low confidence in information provided
- Data mining labour intensive, incomplete, prone to human error
- **Planning for improvement is based on incomplete data**

Drivers for Change

Better outcomes for Patients

- Manage Clinical Risks
- Care when needed
- Equipment, devices and consumables when the patient needs them

Sustainable Healthcare Services

- Increase Efficiency
- Reduce Waste, Costs
- Spend Tax Payer money appropriately

Sustainable healthcare services are needed to deliver better outcomes for more patients. Information to achieve both is the same.

GS1 Engagement

- **2012: Go to market**
  - Expertise in Location Based Services (LBS)
  - Analyse needs and identify industry solutions
- **2013: GS1 Consultancy**
  - Established LBS Steering Committee
  - Review current state, list changes/priorities
- **2014-16**: **GS1 Guidance**
  - Developed and Validated LBS Framework
  - Working through changes/priorities
  - Keeping stakeholders engaged

Location Based Services
Steering Committee

- Assembled key stakeholders into Location Based Services (LBS) Steering Committee
- Identifying and capturing opportunities for automation of ID capture and standardisation
- Synergy in collaboration, both People and Systems
- **Directorate knows where to get help and advice on identification standards and capture automation**

Location Based Services Steering Committee

Representation

- Surgical Services
- Blood Products
- Pathology, Pharmacy
- Supply, Security
- Administration
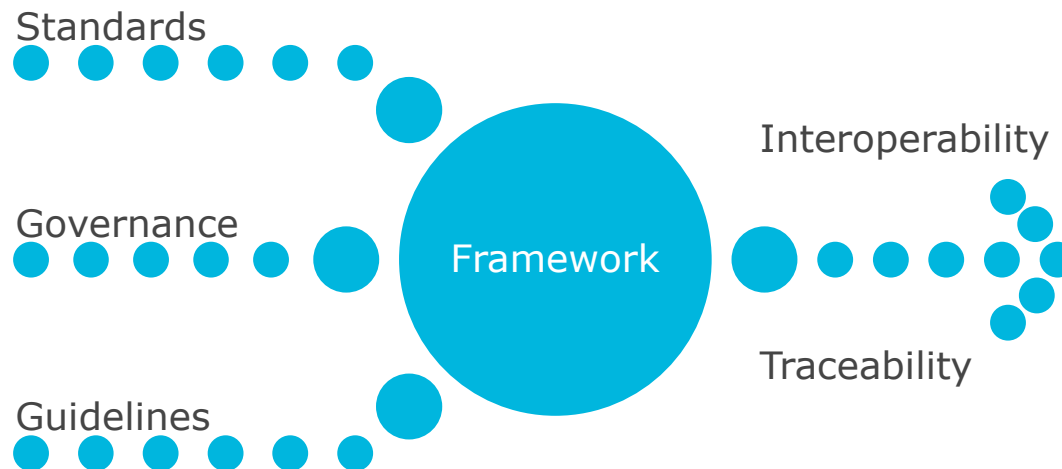- Business Intelligence
- Food Services
- and more

Common Problems
Common Solutions

Location Based Services Standards Framework

- Specify the application of the GS1 Identifiers
- Guideline for how to manage Identifier partitioning and allocation
- Blueprint for an integrated/interoperable future state

Framework Compliance Mandatory

If a product is not part of the solution, it is part of the problem.

- Products and components not supporting GS1 Standards Framework manually managed or not tracked at all

- Cost, Time, Quality impact of manual tracking expected to exceed unit purchase price savings

- Future purchases (consumables and systems) by ACT Health must comply with the Framework

Building Blocks

Currently In Use

- Patient ID Band – GSRN+SRIN in GS1 DMatrix
- Staff ID – GSRN in GS1 128
- Location ID – GLN (Ltd. Locations)
- Product ID – Serialised GTIN (Ltd. Compliance)

Future Projects

- Product ID (Full Compliance)
- Location ID (All Locations)
- Asset ID – GIAI (Where GTIN Not Applicable)
- Patient ID (Specimen) & Document ID – GDTI

Building Blocks

Patient ID Band
GSRN (Patient)+SRIN

Staff ID Card
GSRN (Provider)

Information System Sources of Truth

Patient Administration

- Source of truth for Patients and Episodes
- Allocates Patient Identifiers (GSRN - Patient)
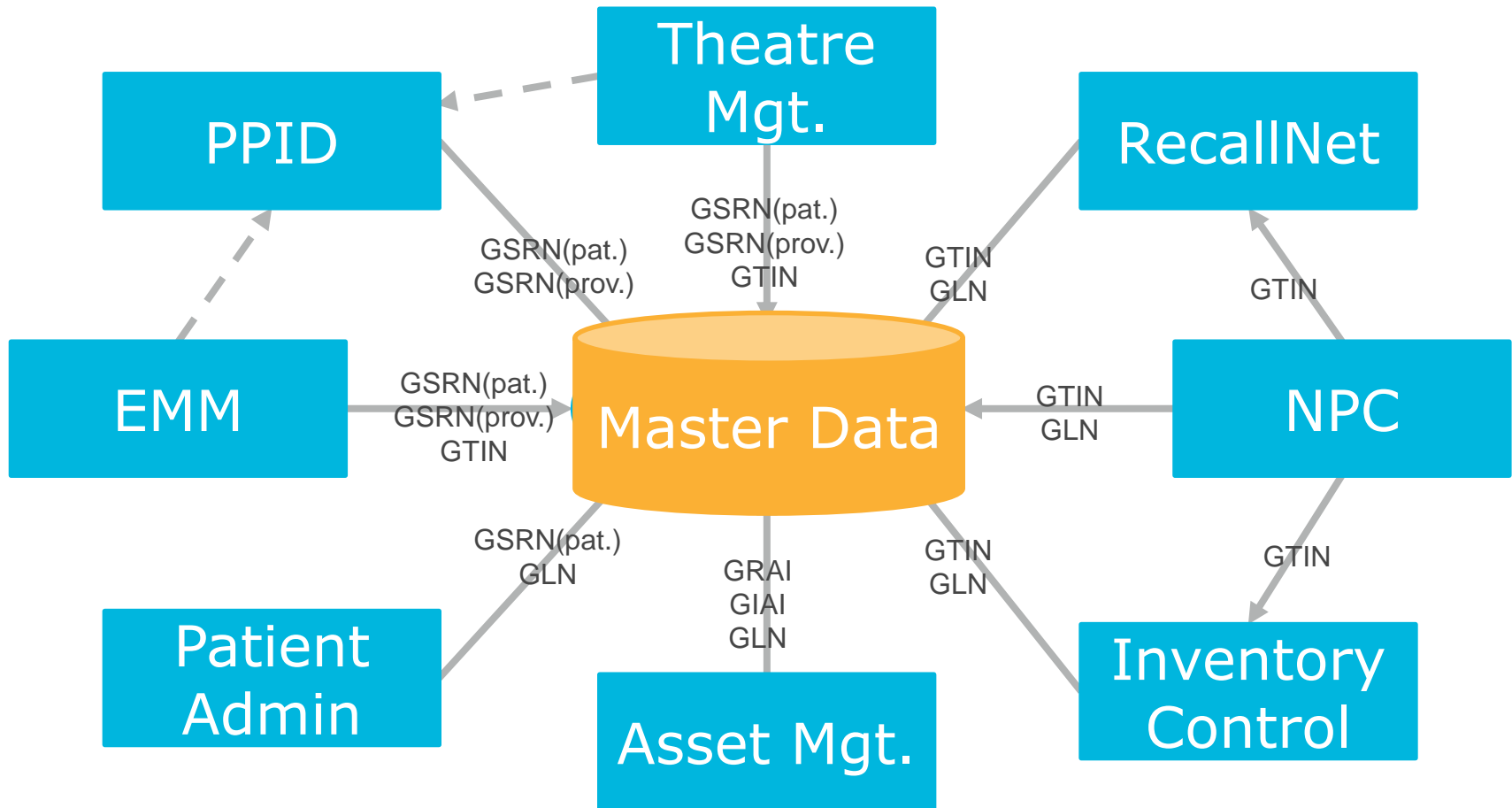- Produces Patient Wristbands

Identity Access Management

- Source of truth for Staff, facility and system access
- Allocates Staff Identifiers (GSRN – Provider)
- Produces Staff ID Cards

Asset Management

- Source of truth for Assets
- Records Serialised GTIN for Assets
- Allocates Asset Identifiers (GIAI) when Serialised GTIN unavailable

Blueprint for Master Data

Positive Patient Identification (PPID)

May 2016

Integrated Lab Order and Collection System

- Patient ID Band + Staff ID Card scanned before collection

- Specimen labelled on collection

Manage wrong blood in tube clinical risk

Positive Patient Identification (PPID)

Future Integration

- Electronic Medication Management (EMM)
- Electronic recording of patient observations
- Administration of blood products
- Identification of patients before procedure

Anticipated Benefits of Framework

- Zero wrong blood in tube incidents
- Interoperability & Reduced Integration Costs
- 100% product recalls notified real-time
- Elimination of Avoidable waste
  - Reduce product wasted/unused across Public Health sector
- Savings % of current spend
- No procedures delayed due to supply issues
- **Accurate activity based costing of Patient Care**

Future Direction

GS1 & Member Org. innovation the key to change ACT Health need to continue to deliver

- National Product Catalogue (NPC) complete
- Smarter ordering delivering when needed
- PPID ensuring the right patient
- Patient to Product linking at point of use
- RECALLNET ensuring timely recall notifications

Synergy created combining these systems will transform ACT Health, enabling our healthcare systems to meet growing demand

Future Direction

- Implementing standards as projects are delivered and solutions upgraded
- Real-time tracking of equipment
- Capturing required information to monitor trends and adapt for the future
- Only products and technology compliant with standards framework have a future with ACT Health

Working with GS1 has made this possible. Together we will make this work

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