



Connecting for Health

Auto Identification and Data Capture in the NHS

NHS CFH and GS1 UK



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The National Health Service of England

- Established in 1948 with a budget of £437million 2008 budget was £90billion
- The NHS employs 1.4million people which takes 60% of the budget in wages
- 77% of all staff is female
- Nursing makes up 33% of the entire workforce
- The NHS interacts with 1.5million people everyday
- 23 million people a month visit their General Practitioner
- 1.4 million people a week treated in their homes
- NHS Ambulances make 50,000 emergency journeys a week
- In the last 2 years community pharmacies have dispensed over 745million prescriptions
- Average life span in England has increased by 12 years since NHS established



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Patient safety issues

- In the UK, about 10% of inpatient episodes result in errors of some kind, of which half are preventable
- Of 8 million admissions to hospitals in England each year, more than 850,000 result in patient safety incidents which cost the NHS over £2 billion annually in extra hospital days. An average of 10,000 people suffer “serious harm” each year through misidentifying, misprescribing or wrong site surgery
- Last year alone, 1702 people died through misidentification and 1136 were involved in waiting list errors
- Study carried out at Charing Cross hospital found that patient ID checks were only being done 17% of the time. When bar-coded wrist bands were implemented they were checked 81% of the time.
- £900million of medical staff time wasted looking for assets, equipment, results etc per year



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Background

In February 2007 NHS CFH entered into an agreement with GS1 UK, an international standards body for Auto Identification and Data Capture (AIDC) technologies, for the provision of AIDC codes to the NHS.

This agreement followed a statement to Parliament by Lord Hunt (then Minister for Health) and the publishing of the Department of Health's "Coding for Success" report, both of which advocate greater use of AIDC technologies within the health service.

The decision was made that by centrally managing and funding the project, the adoption and application of the technology would be far greater. It also allows the "future proofing" of the technologies to be compatible with the National Programme for Information Technology (NPFIT) systems.



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The Vision

Through the adoption of simple coding standards we can deliver:

“The 5 Rights”

- Ensuring that the right patient
- Is given the right treatment
- In the right dose
- Through the right route
- At the right time

“Our vision should be an NHS that is safe, as safe as it possibly can be, giving patients and public the confidence they need in the care they receive”

Lord Darzi



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NHS CFH and GS1UK

Main benefits of the contractual agreement between NHS CFH and GS1UK

- Access to a set of globally unique “Organisational identifiers” solely for NHS usage
- Project management resource at GS1 UK
- Technical expertise and guidance on AIDC technologies
- Dedicated service desk facility to take calls directly from the health service
- Access to GS1UK classroom training and conferences
- Professional services consultancy for assisting trusts implement initiatives
- Expert consultancy to assist with Information standards board (ISB) submissions
- Publishing of “Application guidelines” for trusts



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Main benefits of the programme

- Great patient safety benefits
- Greater track and trace ability from manufacturer to patient
- Greater stock/waste management
- Removal of manual input and paper processes
- Greater record keeping and data usage
- Less time spent on menial tasks means healthcare staff can be more patient focused
- Great cost saving potential
- Opportunity to bring healthcare industry more in line with the NHS
- Greater protection against counterfeit medicines
- Greater links into other healthcare initiatives being run by the NPSA, PASA, MHRA, ABHI etc
- Common data set across the NHS will lead to greater efficiency



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Project team and inter agency support

The core project team that has been assembled to gain the greatest support and influence within the healthcare sector on both the NHS and the manufacturing/industry side has representation from the following area's:

- The Department of Health
- The National Patient Safety Agency (NPSA)
- The Purchasing and Supplies Agency (PASA)
- The Association of British Healthcare Industries (ABHI)
- The NHS Supply Chain (NHSSC)
- Southern Syringe, DHL, Molnlycke, Johnson&Johnson, Bunzl, Smiths Medical, Eucomed
- Regional Procurement Hubs
- Representation from both primary and secondary healthcare



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Key Focus Areas

When the programme was launched it was decided to focus on specific areas. This allowed more specific attention to be given to each area and more work teams to be established. These areas are:

- The decontamination of sterile surgical instruments (DSSI)
- Pharmaceutical manufacturing and medicines tracking
- Patient Identification
- Vaccine and blood derivatives tracking (EU Bridge Project)
- Global Location Numbers and the NHS Supply Chain
- The National Programme for E-Procurement
- Asset tracking



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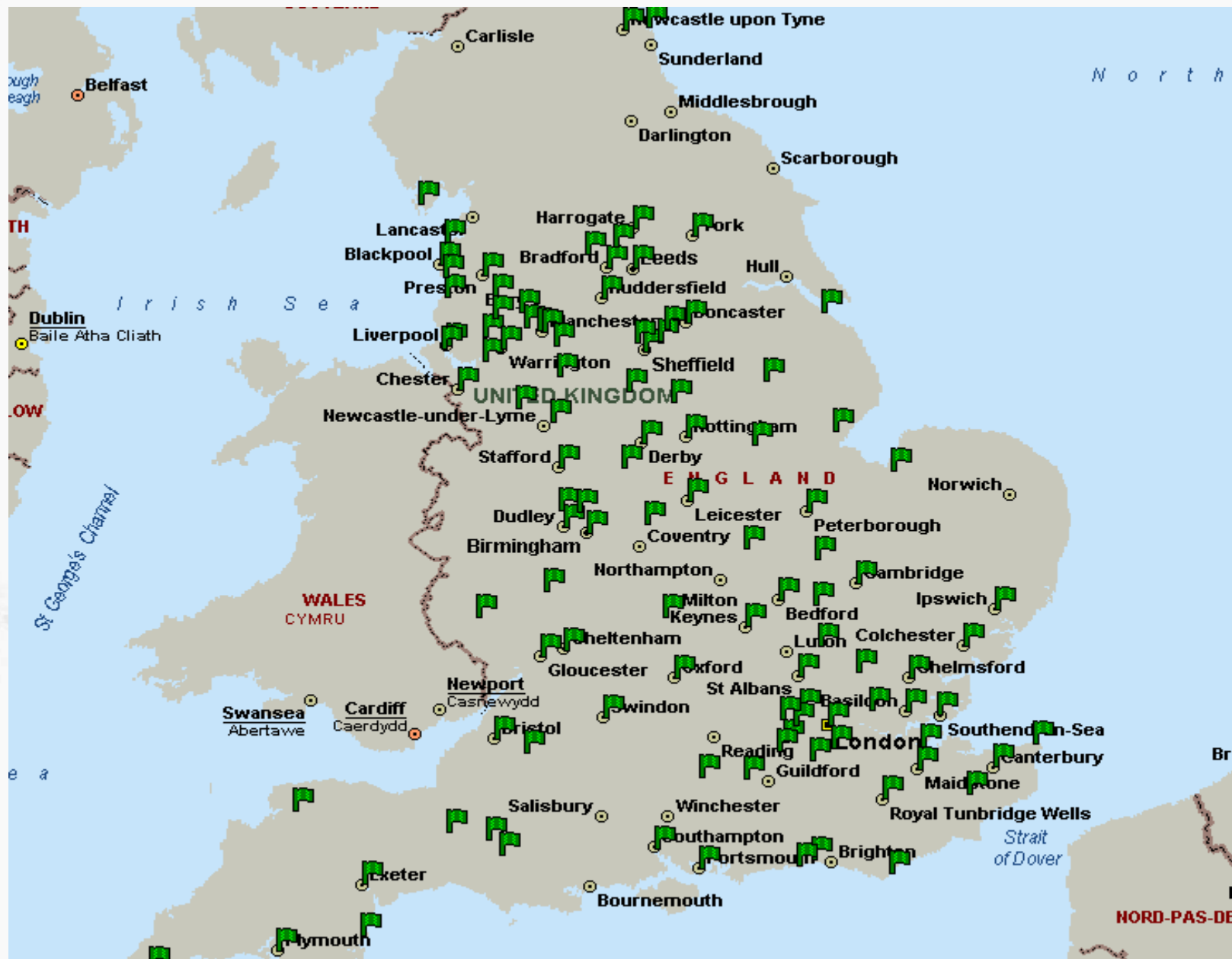


Current status of programme

- Over 220 trusts signed up to the programme
- Mass Media coverage of the programme continuing
- E-learning tool delivered by NHS CFH
- Mandatory work with the Information standards board progressing well
- AIDC work “in-lined” with the NHS number programme
- NPSA CEO fully backing wristband technology
- Procurement hubs publishing guidance on AIDC systems
- Real time tracking programmes being piloted in sites across the UK
- NHS Supply chain purchasing new systems to allow use of GLN’s
- Dedicated website being formatted for AIDC
- Global exposure increasing
- Document tracking projects being planned



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Contact Details

Neil Lawrence AIDC Manager
Technology Office
NHS Connecting for Health
2nd Floor, Princes Exchange, Princes
Square, Leeds LS1 4HY
T - 0113 397 4021
Mobile – 07917 210344
Email Neil.lawrence@nhs.net



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