The achievements of the European Healthcare Initiative
Presentation to the HUG
14th September 2005
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GS1 in Healthcare *reducing risk through certainty*
Information is not Power, Sharing Information is power

Agenda

1. Background
2. Current position and achievements in summary
3. EHI and HUG

GS1 in Healthcare reducing risk through certainty
Where it all began ..........

Europe

• 2002 - Healthcare proposal by the WEST group

• 2002 end - Business plan commissioned
  • Major opportunities for European MOs identified

• 2003 start - 3-5 Year project established with dedicated centralised resources
European Healthcare Initiative Marketing Strategy

Market Drivers

EU Directives

Brand Image, Track & Trace Vision

Focus
SC to & within hospitals & retail pharmacies - SCM - RM

A Awareness
R Relations.
I Initiatives
C Competition

Communication

Resources & Organisation

UCC

MO’s
Creating external awareness

Europe

In the past two and a half years ……… we have:

• Spoken at dozens of conference platforms around Europe
• Staged our own GS1 Europe events e.g. EPC
• Early days, ran booths at various exhibitions in pharma and medical devices
• Run various workshops for members and potential members
• Issued a number of issues of the EHI Newsletter
• Established a content rich healthcare focused website – www.gs1health.net

The result: huge increase in the market awareness of GS1 and the GS1 System
Relationship Programme – Key European Stakeholders

When we started ……

IHF  GIRP  EVM  EHFG  WMA
HOPE  EUCOMED  CEFIC  WHO  EHPA
EAHM  EFPIA  EBE  ICRC  IHE
EHMA  EFAHP  OECD  ISPE  EU
FIDE  AESGP  EMEA  CPMF  EGA
Relationship Programme – Key European Stakeholders

Where we are today …..
Initiative 1.

Pharma Supply Chain Initiative

(EPSCWG – Task Force)
Where we are today

- Pharma VAG Volume 1 developed
  - Id and marking – good draft status
  - Submitted to trials process
- Pharma VAG Volume 2 developed
  - eMessaging – priority message set (ordering/logistics process)
  - Submitted to trials process
- Labelling guidelines
  - BAPW work programme – ‘requirements identification’
  - Reference to General Specification for Labelling
- Code management documentation
- HDMA Auto Id Work Group
  - Refining guidelines to meet new FDA requirements
  - Our objective – to ensure standards harmonisation for US and Europe
  - Pharma VAG input – well received
- Trials underway now ........
1. Direct supplies to hospital
   - Baxter, AEXXDIS and hospitals in Rouen, Dijon and Lille
   - Based on Product Catalogue exchange
   - Marking at all levels of packaging
   - Project scoping – end October

2. CFCs traceability – EPCNetwork
   - Addition to current roll-out of traceability system of CFCs to the home
   - SGTIN and EPCNetwork
   - October start

3. e-Pedigree Pilot (UK NHS)
   - Patient safety and counterfeit protection safety
   - Demonstrating ‘Pharma Supply Chain’ vision
   - ‘Owner’ and product authentication at each step of the chain
   - Project established – funding is the next step
Initiative 2

Medical Device Traceability
Medical Device traceability

Our proposal to EUROMED

- Demonstrate the benefits of Automated Medical Device Traceability (AMDT)
- Develop Voluntary Application Guidelines (VAG) based on GS1 System
- Validate VAG & AMDT through ‘proof of concept’ trials
- Demonstrate feasibility of managing mixed GS1 & HIBC environment
- Gather market information of current relevant AMDT projects
- Develop Case Study & other PR materials
- Promote AMDT as ‘best practice’
• We are engaged ........
  • Active member of EBS
• Proposal adopted in principle
  • But activities slower than we proposed
• Industry wary of ability / desire of hospitals to exploit barcode systems .......
  But feel that they “have to move positively forward”
• Focused Working Group established
  • Market research conducted (hospitals, national associations, members)
• Strategy is to:
  • Hold October seminar with key stakeholders to help determine requirements
  • Gather information on process & data requirements for AMDT for all stakeholders (manufacturers, hospitals, insurers, etc.)
  • Seek ISO ratification
  • Pilot proposed standards in “advanced countries”
EHI
2006 Workplan

• EPSCWG / Task Force
• Medical Device traceability / EUCOMED
• Business case development
• Promotion via www.gs1health.net
• Information sharing via KnowledgeBank
• Lobbying and relationships development
• EPC programme
• Surgical instrument traceability
Complementary national initiatives

Europe

• Considerable healthcare activity all over Europe
• Just some examples
  • France – pharma ID moving to the GTIN; surgical instrument traceability, teaching hospitals
  • Germany – EDI pilot evaluation, inviting hospitals to read GS1 barcodes; MD traceability
  • Greece – EAN13 for ID of reimbursed drugs
  • Hungary – GS1 serialisation of medical prescriptions
  • Ireland – pharma supply chain group; CFC track & traceability incl. home treatment
  • Netherlands – pharma marking migrating to GS1
  • Portugal – GS1 in hospital processes
  • Spain – medical device traceability using GS1 128
  • Switzerland – GS1 at heart of narcotic control, hospital implementations
  • UK – pharma supply chain group; moving to the heart of the NHS

Strong Regional and National position – and getting stronger!
So, in Summary, where we are now?

- Clear rationale, strategy and value proposition for healthcare
- Awareness levels never higher
  - Regulatory bodies, trade and professional bodies, potential members, solution providers
- Positive relations with market influencers
- A significant set of deliverables
  - Market information
  - Voluntary Application Guidelines – ID, marking, eMessaging
  - Demonstrations of GS1 standards in action – including EPC / RFID
  - Phase 1 roll-outs underway
  - Examples of best practice
- Outline plan and budget for 2006

Growing momentum for GS1 in Healthcare all over Europe!
EHl and HUG
Why a European focus?

- Each major region (e.g. US, Asia Pacific, Europe) is different
  - Regulatory framework
  - Distribution and marketing practices
  - Business requirements
  - Culture

- Distribution, marketing and some manufacturing processes are either regional or national

- Key stakeholders are organised on a European basis:
  - Trade and professional bodies – typically umbrella bodies for national associations
  - Some major manufacturers

- For better relationship and account management

- For implementation and roll-out
**EH1 and HUG**

Europe

- We want to collaborate and support HUG
  - We see a need for a global initiative in healthcare by GS1 – in support of the regions, helping to co-ordinate regional activities
  - Why should HUG re-invent wheels? Exploit the VAGS we have developed

- We want to be recognised by HUG
  - For the work we have done
  - For our key role in standards implementation in Europe in the future

- We want HUG to be mindful of EHI relationships – we must not confuse the market!

- We want a clear market positioning statement as to how EHI and HUG are working together - in collaboration
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GS1 in Healthcare -
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Thank You!