

17 - 18 March 2022 | QEII Centre, London

# National Scan4Safety programmes

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### **National Scan4Safety programmes**

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# South-Eastern Norway Regional Health Authority SENRHA

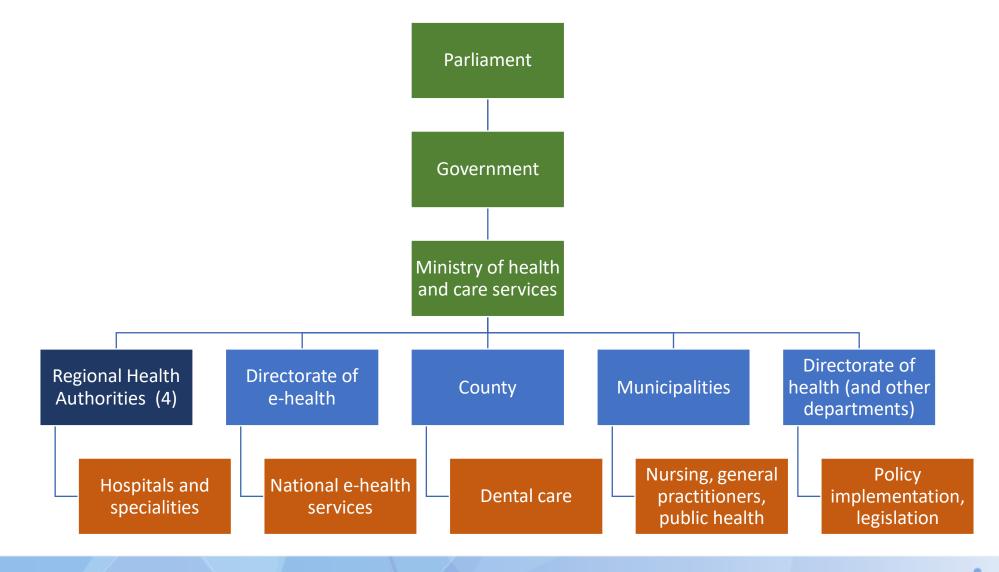
Implementing GS1 standards



# **Agenda**

- History and current project
- Regional standardisation
- National standardisation

# Simplified overview of Norwegian healthsystem



# **South-Eastern Norway Regional Health Authority**

### Norway's largest health authority:

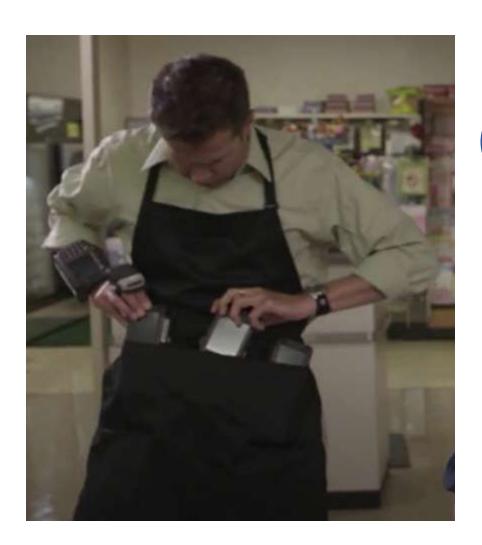
- Established 1st June 2007
- Nine hospital-trusts, one ICT-trust, and one pharmacy-trust
- 80 700 employees
- Turnover: £ 7,5 billion
- Population: 2,9 million 57% of the total population
- Manages 1500 production IT-systems.



# Year 2015: We have a problem

Many barcoding initiatives

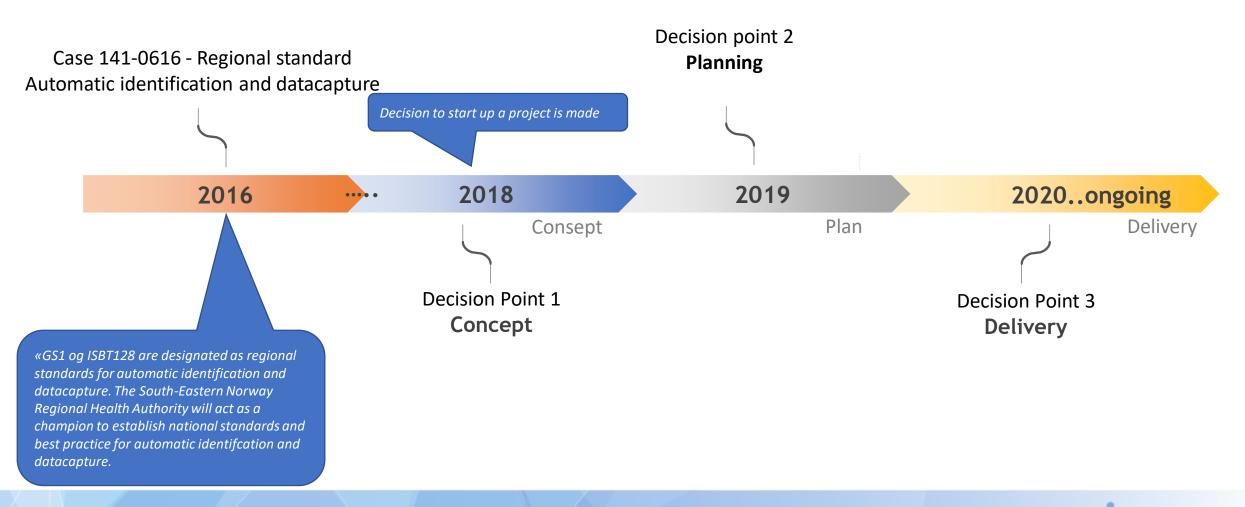
Regulatory developments (FMD, MDR)



A desire for regional clinical and administrative solutions

No data standards

# **Year 2016: Starting to solve the problem**



### Agreed project deliverables



Target architecture for GS1 for procurement and supplychain.



'Proof-of-concept' for automatic identification and datacapture, localization, and eventbased traceability.



Procurement of technology to support GS1.



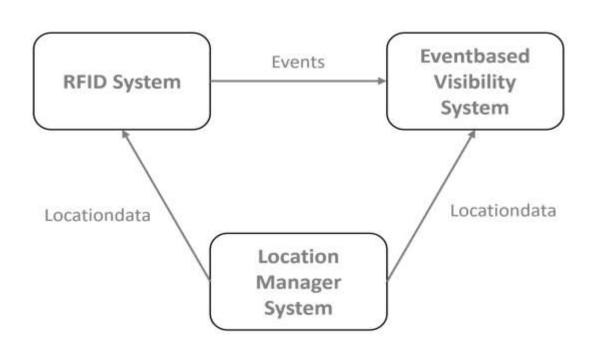
Implementation of technology.

# **Currently: Implementation of technology**

### Implementation of regional:

- RFID system
- Eventbased visibility system (EPCIS)
- Location manager system

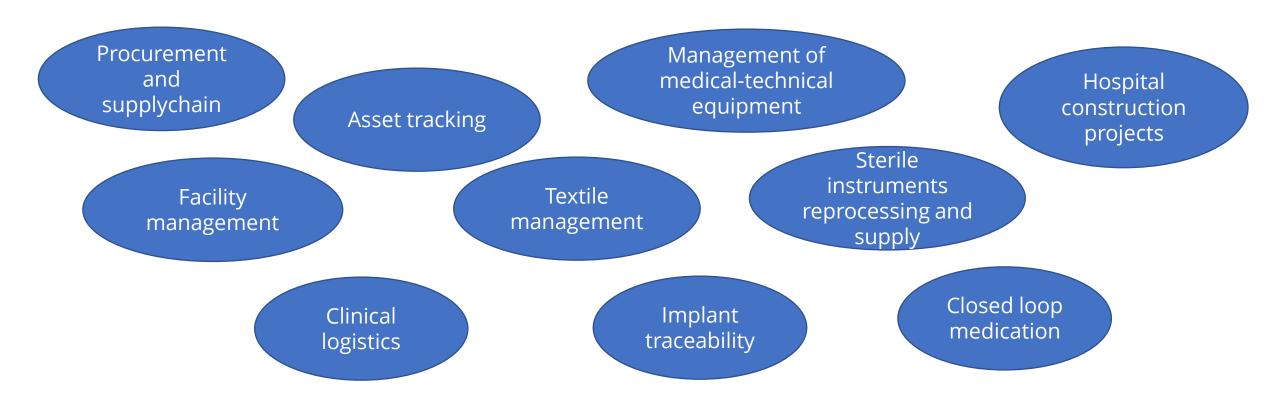
Running multiple proof of concepts in trusts, and assigning GLNs (60264 per March 15th).



# Regional standardisation

### **Coordinated use of GS1 standards**

The project is mandated to provide advisory to all other ongoing projects and initiatives within the health authority on how to use GS1-standards.



# A practical approach



**5 Technical profiles** (Fairly technical stuff)



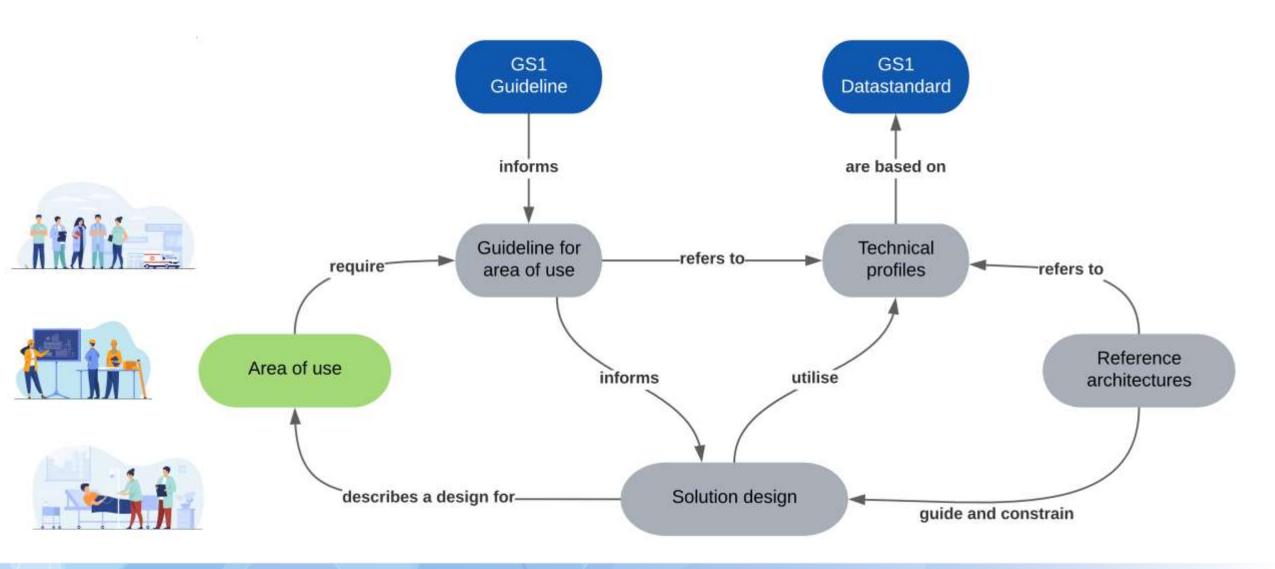
7 Guidelines (Practical «how to»)



**3 Reference-architectures** (A bit abstract)



# Methodology



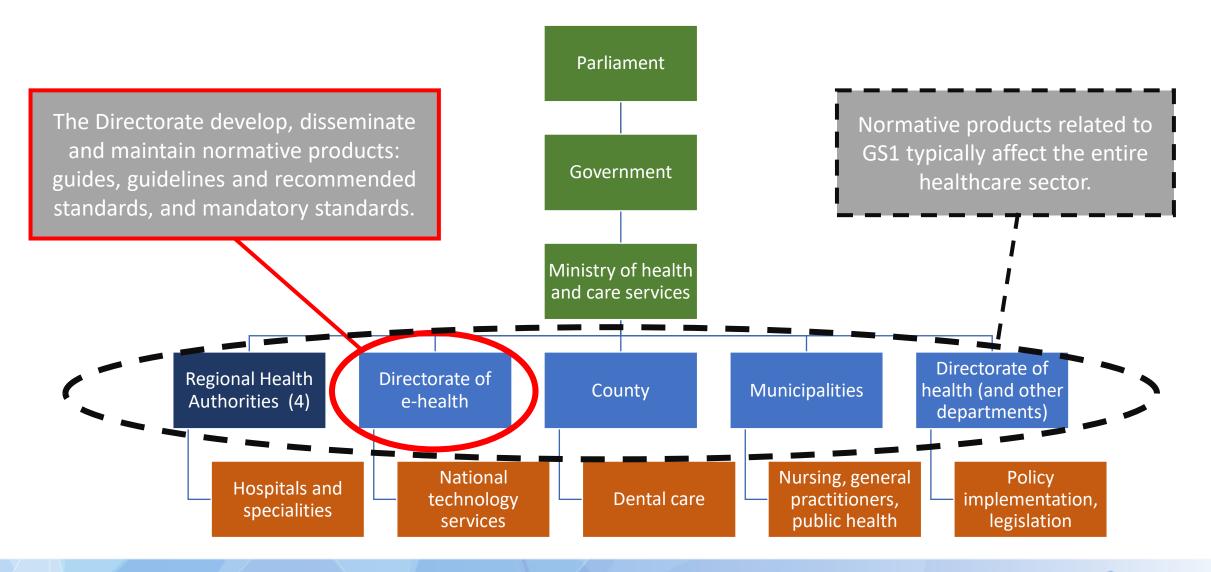
### Regional architecture governance

Deliverables are submitted to the regional architectural board in the health authority.

Adherence to regional standards are expected, but exemptions can be made when they are grounded.

# **National standardisation**

### Who is involved?



# **National Guide developed**

"The Directorate for e-Health recommends that GS1 standards be used for the following purposes:

- Global Trade Item Number (**GTIN**) for drug identification
- Unique Device Identification (**UDI**) issued by GS1 for identification of medical devices
- Global Location Number (GLN) for location identification
- Global Service Relationship Number (**GSRN**) for identification of patients and healthcare professionals

It is recommended that these standards be combined with a GS1 standard for data capture: barcodes, DataMatrix or RFID."



The regional health authorities provided input to the guide together with the Directorate

https://www.ehelse.no/standardisering/standarder/veileder-for-bruk-av-gs1-standarder-for-identifikasjon-og-sporbarhet

# The ladder of normativization Would like to get here **Mandatory standard** Recommended standard Guideline Guide (we are here)

# Thank you for your attention





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#### **National Scan4Safety panel**

#### Chaired by Anne Godfrey, CEO, GS1 UK

with **Andy Smallwood**, head of sourcing, NHS Wales Shared Services Partnership – Procurement Services **Simon White**, programme director, NHS Scotland **Bjørn Ravnestad**, advisor, South-Eastern Norway Regional Health Authority

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