GS1 UK healthcare user group
Tuesday 13 June 2023

Present:

Ian Townend, NHS E – **CHAIR (IT)**	
Jackie Pomroy – Consultant (JP)	Sarada Chunduri-Shoesmith - NHS E (SCS)
James Mayne – University Hospitals of Derby and Burton NHS Foundation Trust (JM)	Paul Wright – NHS E (PW)
Gillian Fox – DHL (GF)	Dr Julia Coombes – MHRA (JC)
Maxine Chappell – NHS E (MC)	Siobhain Duggan, GS1 Ireland (SD)
Paras Shah – MHRA (PS)	Amanda Creane, GS1 Ireland (AC)
Andrew Smallwood – NWSSP, NHS Wales (AS)	Jennifer Lambert – DHSC (JL)
Matthew Burley – Sheffield University Hospitals NHS Foundation Trust (AS)	Akinluyi Emmanuel GSTT (AE)
Rachael Ellis – Hull University Teaching Hospitals NHS Trust (RE)	Simon White – Scottish Government (SW)
Marc Saaiman – South Tees Hospitals NHS Foundation Trust (MS)	Simon Walsh – Manchester University NHS Foundation Trust (SW)
George Lawton – GS1 UK (GL)	Glen Hodgson – GS1 UK (GH)
Natasha Smith – GS1 UK (NS)	Juliette New – GS1 UK (JN)
Fadi El-Turk – GS1 UK (FET)	Natalie Hackford – GS1 UK (NH)
Speakers	
Paras Shah – MHRA (PS)	Christopher McCorquodale, Royal Papworth NHS Foundation Trust (CM)

Apologies:

Mark Vallentine – NHS Supply Chain (MV)	David Lawson – DHSC (DL)
Luella Trickett – ABHI (LT)	Mark Songhurst – The Leeds Teaching Hospitals NHS Trust (MS)
Andrea Smith – Sheffield University Hospitals NHS Foundation Trust (AS)	Lindsay Robertson – NSS NHS Scotland (LR)
Dave Harris – Lancs Procurement Cluster	Karen Mayor – DHSC (KM)
Judie Finesilver – Independent Consultant	Andrew Stevenson, BHTA (AS)

Agenda:
10.00   Welcome and introductions   Ian Townend / All
10.05   Competition policy   George Lawton
10.10   Minutes from last meeting and actions log (attachment)   Ian Townend

Updates:
10:15   GS1 UK update   George Lawton
10:20   DHSC Med Tech update   Jennifer Lambert
10:30   NHS England Transformation Directorate programme update   Sarada Chunduri-Shoesmith/Ian Townend
10:35   MHRA medical devices update   Paras Shah
10:40   NHS Supply Chain update   Mark Vallentine
10:45   NHS Wales programme update   Andy Smallwood
10:50   NHS Scotland programme update   Lindsay Robertson/Simon White
10:55   Workstreams update   George Lawton

Workstreams:
Completed:
- Surgical instrument tracking
  https://www.gs1uk.org/sites/default/files/gs1_uk_surgical-instrument_traceability_guide.pdf
- Asset management
  GS1 UK | Asset management guidance
- Inventory management
  https://www.gs1uk.org/sites/default/files/gs1_uk_inventory_management_systems_guidance.pdf
- Closed loop Medicines
  https://www.gs1uk.org/industries/healthcare/medicines-administration
- S4S business case
  https://www.gs1uk.org/sites/default/files/S4S_business_case_template_0323.docx

Existing:
- Staff ID
- Loan Kits
- OPCS codes

Presentations and discussion:

11:00   Medical Device Safety Officer Network (MDSO)   Paras Shah, MHRA
        Medical device incident reporting

11:25   Scan4Safety and pharmacy, Royal Papworth NHS Foundation Trust   Christopher McCorquodale, CPIO

11.50   Any other business

11.55   Next meeting dates: 6 September (face-to-face) and 6 December   Ian Townend

Minutes

Item 1   Welcome, introductions and apologies
Ian Townend (IT) welcomed everyone to the meeting.

Item 2   Competition policy
George Lawton (GL) drew the attention of the meeting to the GS1 competition policy.

Item 3   Minutes and action log
Minutes from last meeting were approved as accurate by the meeting attendees (attached).
Outstanding actions highlighted by GL and log updated. Log sent in email with minutes.

HUG action points
06.2023.xlsx

Outstanding actions from action log:
1. NHS Scotland discussion case study later in the year
2. Action for Rachael on blueprint update on digital productivity
3. Loan kit process action delayed due to availability. JP and NH will discuss at NE and NC adoption group in September.

Item 4   GS1 UK update   George Lawton

- HSJ webinar on 24 May
- Ultimate message was that high-quality data is needed 100%
- International forum for Quality and Healthcare to be held in London April 2024
- Poster submission
- EPIC engagement been a challenge to date – collaborate around this to ensure that the standards are being read and captured correctly
- Well-established adoption group – national picture of IMS systems – summarised 41% of trusts have an IMS system and 31% of point of care
- Working on a user friendly way of trusts informing GS1 UK team about GTIN issues.

Item 5   Department of Health and Social Care - Med Tech Update   Jennifer Lambert

- PIM database – started stakeholder groups.
- Business case being written sat the moment and working on data flows and the building of the Product Information Master (PIM).
- Medical device outcome registries – NHSE are mandating registry submission. Aiming to have full data by the end of this year.
- Outcome registries has native barcoding scanning and will accept uploads from existing provider solutions.
- Med Tech strategy – working on implementing in practice – huge range of projects to put into practice.
- Sec of state's area of interest is on the innovation side and how to increase adoption
- Working on next step and approach with MHRA and whether take existing solution and roll it out or start from scratch.

Item 6   NHS England TD programme update   Sarada Chunduri-Shoesmith and Ian Townend

Sarada

- Sarada no longer in Transformation Directorate (TD) from NHS restructure as patient safety team has moved over to medical directorate.
- Kelsey Flott has returned to work and looking closely at outcomes registries programme and what that looks like for Scan4Safety this year.
- Sarada is currently making a case to SRO Aiden Fowler to identify appropriate package of support for Scan4Safety moving forward.
- Data analysis in progress of uptake on Scan4Safety from board survey and Sarada will share with the group in time.

Ian

- [S4S website](#) now launched.

Action: IT to provide a heads up on the headline comms to GS1 UK team.

Item 6   MHRA medical devices update   Paras Shah

- Two current statutory instruments in progress:
    1. Extension of MDR transitional period. This means that legacy devices can use current certification until then. See [here](#) for more information.
    2. Post market surveillance regulations to be ahead of the other regulations. Currently going through another loop through the world trade organisations technical barriers to trade.
- Future regs still planned for 2025
- No firm dates for any of these currently
- Working with the DHSC closely on the PIM and strategy

Item 7   NHS SC update – to be delivered next meeting

Item 8   NHS Wales update   Andy Smallwood

- £4 million transacted through inventory systems equating to 45,000 req lines which are automated.
- Benefits currently – cash releasing £50,000 per month but not seeing patient benefit side yet
- Focusing on use of GTINs, 156,000 GTINs loaded, 700,00 lines across all the different catalogues and health boards.
- Advise Inc are analytics partner, get catalogue feeds from all health boards and recently created feed of GTINs to them and they have run the GTIN checker against these.
- Preliminary results from looking at the catalogues and GTIN check. There are more than 200,000 GTINs that NHS Wales don't have and advise Inc do, so looking to feed that back through for health board catalogues and scanners.

- GLNs slower with the challenge of different systems, however, GLNs are rolling out and they are trying to speed the process up as e-enablement team want to run a PEPPOL pilot.
- The imminent pilot for patient identification is in west Wales at Hywel Dar. A feed comes out from the Welsh Patient Administration System (WPAS) into Omnicell (inventory management system) . The health board receive the patient information from WPAS and can scan the wristband. The pilot is significant as all are moving over to WPAS. Biggest hurdle is NDR (NDR is the National Data Resource) no clear destination of where to put the information of the product and the patient as do not want to hold it simply in the IMS system. The ultimate destination is the NDR.

Item 9   NHS Scotland update   Simon White
- Progress to date – standards information and medical device supplier guidance on website

- Continuation on collaboration with the other four nations continues.
- By end of June all health boards will be on a medical equipment management system
- Continue with stakeholder engagement plan – particular focus on getting on the agendas of executive groups including board chief execs and DoFs meetings.
- IMS now rolled out to all health boards in Scotland. This was achieved in March 2023. This means for the next phases working with boards areas to understand what they can use IMS for, including the national blood transfusion team, and non-national distribution centre areas.
- Holding a series of workshops with boards to discuss data to demonstrate where they could manage stock holdings better.
- This year – implementation is key for point of care scanning for three boards. There are local resource challenges and a continued need for senior buy in.
- Benefits realisation standards adoption continue at local level. This will result in more buy in.
- Medical device data hub (MDDH) going through technical design authority to be signed off. Plan for minimal viable product by October this year.
- New workstream on data report and analytics on how to best use the data.
- Doing work on patient insights to understand more about the information is given to patients to ensure consistency.
- Target Operating Model – keen to ensure continuous work on this programme after the three-year programme plan.
- Focus for next quarter – POC pilots and standards ownership at a national level. Currently engaging with data board on the standards.

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Additional item: GS1 Ireland update   **Siobhain Duggan**

- Keen to create a GS1 Ireland user group and keen to learn from challenges.
- Nationally implementing an integrated national management system and becoming clear that there are some learnings to take from other national programmes.
- Need to do more work on clinical engagement.

Item 10   Workstreams update   **George Lawton**

Staff ID
- Relevant for all four nations. Digital passport programme is in progress and multiple meetings with Phil Stradling and Phil Graham.
- Programme is based on verified credentials and not a national identifier.
- What we are not clear on if there is a specific number in those systems and if there is, why is it not a single identifier

Action: IT to link in with Phil Stradling following the HUG to provide some clarity on the identifier used for staff identification

Loan Kits
- The group will use the maturity assessment to get an overview of current processes in the region and use this data to see where GS1 standards can be adopted in the process.
- JP, who wrote the HCSA to attend next adoption group in NE and NC to help trust with toolkit and ultimately get a regional view.

Action: JP to attend September NE and NC adoption group

OPCS codes
- OPCS guidance been updated and currently under review.

Action: GL to send to HUG once been reviewed by all

Item 11

Presentation

Medical Device Safety Officer (MDSO) Network, MHRA   **Paras Shah**

- Alert went out to state each trust must have an MDSO, MHRA person on the ground.
- Roles to support learning, help with reporting and be a contact for MHRA/NHS.
- No funding to create a specific role so is part of a current role.
- Forum set up to share ideas.
- FSAs go to MDSOs to execute what needs to be done e.g. learning on equipment NAMDET https://namdet.org/mdso-resources-page/
- MHRA are seeing that information on the products is missing. Last study demonstrated that 30% of product info was missing.
- Now that there are local reporting systems and the PIM, there is an opportunity to link them together to increase the data quality and the reporting is more accurate.
- From some preset questions, there is not a link for all trusts of the systems/departments.
- When reporting to registries this would also help.
- Different roles take the MDSO role. See breakdown in slides.
- Example given of Southampton Trust and reduction in errors on infusion pumps.

  - AE explained that even in distribution of alerts, within an organisation, cascading the alert down, the traceability of data would help in this process.
  - Pulse oximeters in GSTT and false positive incident. Could only speculate which oximeter it was but really want to trace it by a GTIN and by having a PIM the risk is reduced hugely.
  - PS concluded that Data is there but just needs to be joined up.
  - MHRA have worked on a data standard for reporting that is quite flexible.
  - SC stated that Kelsey and the patient safety team will be reviewing all reporting information. Both the reporting systems that exist can take photos, but this relies on staff members uploading the relevant information.

Action: PS to connect with Didi post meeting

2023_06_MDSO
Slides GS1 HUG V1.0.

Item 12

Scan4Safety in pharmacy, Royal Papworth NHS Foundation Trust   **Chris McCorquodale**

- Chris is CPIO and works in pharmacy and alongside the digital team.
- Digital journey – in 2016 was very much paper based and implemented an EPR rapidly.
- Standards are core to what they do in digital health.
- Small organisation so standards are critical to working with other people. This enables traceability and specifically for counterfeit, to deliver harm free care and enabled by Scan4Safety principles.
- Brand new building opened in 2019. Made mapping to GLNs simple. RFID readers are built in as core of asset management programme. Utilising passive RFID not new or complicated but getting it embedded enables that traceability.
- Continue to roll out the programme for legacy devices.
- In pharmacy using robotics to capture GTINs, not new tech, but making use of what they have.
- GTINs give richer data set that they can make use of. Reduces human error of picking the wrong medicines and robot dispenses in date order so improved stock rotation.

- Missed opportunity: counterfeit – when part of EU and FMD came in, whilst created operational problems, principles behind it were sound. Sometimes patients do not get the drugs that they need so tracing from manufacturer to point of care using the GTIN with the serial number perhaps should have carried on.
- Working on meds administration more recently. Medical and legal problems for the trust and potentially for an individual member of staff.
- Scan wristband opens patient's drug chart so know looking at the right thing. Implemented last year and successfully scanning. Has highlighted mismatch with scanning the patient wristband.
- Challenges with overrides.
- Next step is closed-loop medicines and using closed-loop medicines toolkit.
- Saving huge amount of time potentially.
- Also implementing for pathology and blood transfusion incidents.
- CLMA group include nurses, change management professionals in digital teams and pharmacy. Good senior engagement but challenges at ward matron and ward management level.

GS1 Presentation.pdf

Item 13

AOB   **Ian Townend**
- Remembered David Cousins who died recently who was a huge advocate of GS1 standards.
- GL suggested linking Kelsey Flott with James Mayne at Derby with regards to all the work done to date there in linking information with the National Joint Registry.

   Action: GL to link Kelsey to James Mayne at Derby

Item 14   Next meeting dates   **Ian Townend**

Next meetings are:

- 6 September 2023 – Meeting details to be confirmed on invite

- 6 December 2023