



The Global Language of Business

# Healthcare NPC Advisory Group (HCNPCAG)

1Q 2021 meeting

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10<sup>th</sup> February 2021



**Working together** to continuously **improve** the National Product Catalogue for the **whole of Australian healthcare**

# Welcome, introductions and apologies



# Healthcare NPC Advisory Group Agenda



Time	Subject	Who
2:00pm	Welcome, introductions and apologies	Co-Chair
2:05pm	GS1 Australia Limited Trade Practices Compliance Notice	GS1
2:10pm	Review/Approve minutes from Dataset Review Finalisation - 9 <sup>th</sup> December 2020	Co-Chair/All
2:15pm	Review of Action Items	Co-Chair/All
2:20pm	Regular updates	ALL
2:40pm	General Discussions	ALL
3:45pm	Any other business/topics	ALL
3:50pm	Confirmation of actions and next steps	Co-Chair/GS1
3:55pm	Confirm next meeting, Thanks, and meeting close	Co-Chair/GS1

# Trade Practices Compliance Notice



# GS1 Australia Trade Practice Compliance Notice

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Participants on GS1 Boards, committees, task forces, work groups, or other similar bodies, must always remember the purpose of the Board, committee, task force, or work group is to enhance the ability of all industry members to compete more efficiently and effectively to provide better value to the consumer or end user. GS1 activity almost always involves the cooperation of competitors; therefore great care must be taken to assure compliance with trade practices laws in Australia and in other jurisdictions

## **This means:**

- Participation must be voluntary.
- There will no exchange of confidential information such as prices products.
- Meetings will have a pre-prepared agenda and recorded by minutes.
- All recommendations from any meeting are recommendations only. Individual companies remain free to make independent, competitive decisions.
- Any standards developed must be voluntary standards.
- If any participant believes the group is drifting toward impermissible discussion, the topic shall be tabled until the opinion of lawyer(s) with experience in trade practices law can be obtained.

# Review/Approve previous minutes

Dataset Review Finalisation meeting – 9<sup>th</sup> December 2020



# Review of Actions Log

Refer to Minutes (26<sup>th</sup> August 2020)



# Actions Log (open items)



	Action Items	Owner	Deadline	Status
2.1	<i>Executive level 'Value proposition'</i> Document for use within suppliers providing 'talking points' to assist with understanding the value of the NPC	Mark Blitenthall /Marian Makram Perkins/Cath Koetz (GS1)	01/05/2020	Overdue Draft to be provided to AG members for review and comment post dataset review.
3.1	GHS (Global Harmonised System) as possible NPC attribute for Dangerous & Hazardous Goods classification and reporting	AG members to advise within dataset review	GS1 proposes item is closed	Agreement to add to the NPC Dataset as optional for all products
3.2	Creation of ADHA driven AMT-CTPP – GTIN paper, outlining data linkage initiative and industry support. Also call for ideas supporting other digital or meds management initiatives/policies, calls for ideas – note.	Pan Teng (ADHA) Cath Koetz/Murray Robb (GS1)	Open	Pan to seek assistance to craft statement on AMT-CTPP – GTIN initiative. Cath & Murray to look at mechanisms to support process from GS1 side
3.3	Understanding UNSPSC selection process for suppliers, specifically any barriers in fulfilling populating current code set values for products and publishing to NPC.	Cath Koetz/Murray Robb (GS1) & Rob Setina (HPV)	Open	GS1 to investigate UNSPSC selection issues and revert to group with more info to support further discussion and any further investigation. For action post dataset review
4.1	GS1 seeks the suggestions from the group regarding suggestions on what else GS1 or this group can do to help drive the Data Quality improvement within NPC.	GS1/ALL	New	For discussion in Feb 2021 meeting
4.2	All HCNPCAG members invited to actively participate in the Dataset Review process	GS1/ALL	GS1 proposes item is closed	Completed and participation from representatives across the sector very good (refer Nov 2020 meeting)
5.1	Finalisation of the Healthcare Dataset ready for implementation including new or amended fields	GS1	New	In progress with some aspects to be reviewed by the AG
5.2	Improvement to user documentation for the healthcare sector including the development of new tools to assist all users where needed/possible (refer Dataset review feedback)	GS1	New	
5.3	Explore options to show a catalogue has had a full review as part of the DQI reporting (Is this an Industry wide 'Ready' status?) (refer Dataset review feedback)	GS1/ALL	New	
5.4	Explore how to signify where a catalogue has been reviewed by another recipient (Is this an Industry 'Live' status?) (refer Dataset review feedback)	GS1/ALL	New	
5.5	Investigate the possibility of an 'Interim load' of data (refer Dataset review feedback)	GS1	New	
5.6	Improve ongoing improvement process (refer Dataset review feedback)	GS1	New	



# Regular Updates

- NPC statistics – detailed update on # of users and product records
- Data Quality Improvement progress
- AMT CTPP/GTIN project update
- Updates from Recipients on their programs





## 67,079 GLN/entities involved

incl manufacturers/suppliers, recipients (health organisations, GPO, distributors etc..), government agencies etc..

\* Increase from **1,057** in September 2020

## 39 Active GDSN Datapools working in healthcare

Australia's NPC is 3<sup>rd</sup> largest globally

\* Increase by 1 since September 2020

## 252 Countries (Target Markets)

\* Increase from **133** in September

## 4,110,296 Product Records

- 3,368,435 MedTech
- 80,994 Pharma
- 660,867 Other

\* Small increase on September numbers

# NPC HC Statistics – AU (Jan 2021)



## 643 Publishers/Suppliers

\* Increase by **14** since Oct 2020

## 5 Certified Product Providers

\* no change

## 22 Recipients

- 8 state health departments
- 3 private hospital groups
- 10 distributors
- ADHA

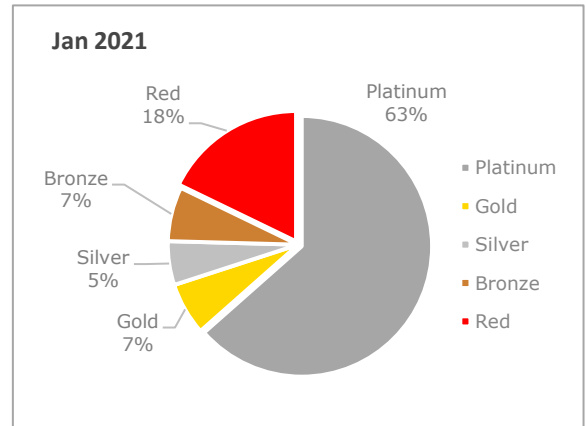
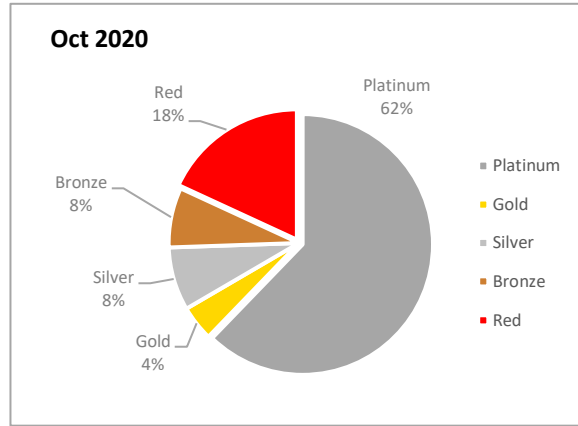
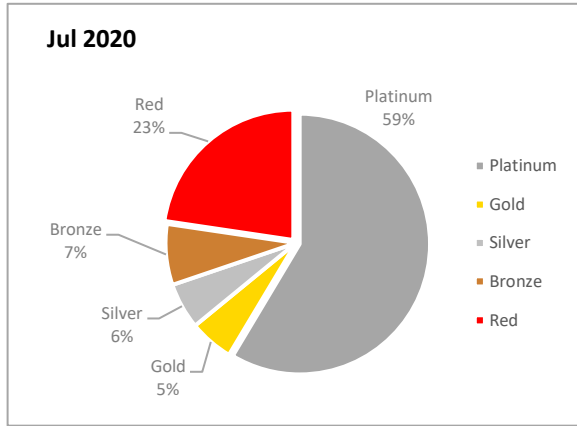
\* no change

## 448,535 Product Records

- 402,566 MedTech
- 45,969 Pharma & Other

\* No change (small decrease) on October numbers

# Healthcare Data Quality Program



	Red	Bronze	Silver	Gold	Platinum
Jan 2021	82 - 18%	31 - 7%	25 - 5%	30 - 7%	<b>292 - 63%</b>
Oct 2020	83 - 18%	34 - 7%	36 - 8%	20 - 4%	<b>285 - 62%</b>
Jul 2020	99 - 23%	33 - 8%	25 - 6%	24 - 5%	<b>256 - 59%</b>

	Top 6 DQ Errors
1	Missing Manufacturer Name
2	Missing v19.0501 UNSPSC code
3	Missing Manufacturer Internal Reference
4-6	Invalid values for width / depth / height

# Regular Updates

AMT CTPP/GTIN project update



# AMT-CTPP Update – January 2021



- 3,913 NPC records have a valid AMT-CTPP code
- 24 NPC records contain a deprecated code (replacement available)
- 276 NPC records contain an invalid AMT-CTPP code
  
- 6,037 NPC records have been identified as probable AMT-CTPP applicable records (not populated)

# Regular Updates

Updates from Recipients on their programs



# HealthShare Victoria introduction



# About HealthShare Victoria

HealthShare Victoria commenced on 1 January, with:

- A broader scope including an **end-to-end supply chain** and **shared corporate services**
- A **new Chief Executive and Board**
- A new **distribution centre** to be established at Derrimut
- New **organisational branding** and **domain name**



# About HealthShare Victoria

- HealthShare Victoria is an independent public sector commercially-oriented provider of supply chain, procurement and shared services.
- We are focused on helping to deliver:
  - **Consistent access to goods and services**
  - **Substantial benefits**
  - **Improved quality of care**
- We recognise the importance of customer engagement and service, safety, clinical expertise and operational excellence in achieving these goals

# HealthShare Victoria vision

- **HealthShare Victoria is helping to deliver safe, affordable and sustainable healthcare**
- We partner with our stakeholders to provide health sector goods and services that help deliver better healthcare for all
- We are focused on **safety** and **customer service**
- We have new organisational branding and a domain name:



[www.healthsharevic.org.au](http://www.healthsharevic.org.au)

# Regular Updates

Updates from Recipients on their programs



# Visibility of Recipient requirements



- What do you need?

Purpose: This document is intended to provide a summary of requirements for National Product

Recipient Name	Target Data Set				Products to be published	Price Type requirements				Price notes	Contact details		
	AU Healthcare Industry	Pharmacy Wholesaler	Foodservice	NZ Healthcare		LIST PRICE	CONTRACT PRICE	TRANSACTION PRICE	ALLOWANCES		E-mail	Phone	Website
ACT Health	Yes	Yes	No	No	All Products.	Yes	Yes	No	Yes	i. Include prices per NSW contracts where applicable by having suppliers publish contract pricing to the ACT. ii. Note that while ACT may have Contracts Pricing published where minimum order thresholds are not supposed a different price may apply. This is a... iii. All pricing must have start and end dates. iv. Contract numbers must be maintained against all contract item pricing.			<a href="http://www.health.act.gov.au/">http://www.health.act.gov.au/</a>
Department of Health Northern Territory	Yes	Yes	Yes	No	All Products.	Yes	Yes	No	No				<a href="http://health.nt.gov.au/">http://health.nt.gov.au/</a>
Health Purchasing Victoria	Yes	No	Yes	No	All products.	Yes	Yes	Yes	No	i. Suppliers can publish HPV contract prices and also health service specific pricing. Refer to Victorian Product Catalogue System Information for Suppliers Fact Sheet on the HPV website.			<a href="http://www.hpv.org.au">http://www.hpv.org.au</a>
Healthscope	Yes	No	No	No	All products sold in Australia.	Yes	Yes	No	No	i. A single price per item, being the Healthscope price if one of our facilities ordered that product (could be LIST_PRICE if no contract exists, or CONTRACT_PRICE if one exists). ii. NSW Health accepts only "List" and "Contract" prices. Transaction prices are not accepted. iii. Whole-of-State (WoS) price publication enables secondary price publication to entities below the WoS hierarchy. iv. NSW Health Price GLN hierarchy = Level 1 = WoS / Level 2 = Public Health Organisations / Level 3 = "Ship-to" locations v. A valid "Price End Date" must be included on Contract and List Item Prices Lines.			<a href="http://www.healthshare.nsw.gov.au">http://www.healthshare.nsw.gov.au</a>
HealthShare NSW (NSW Health)	Yes	Yes	Yes	No	All Products.	Yes	Yes	No	No				
Queensland Health	Yes	Yes	No	NI	Project currently on hold	TBC	TBC	TBC	TBC	Project currently on hold			
Ramsay Health Care	Yes	Yes	No	No	All products sold to Ramsay.	Yes	Yes	No	No				<a href="http://www.ramsayhealth.com">http://www.ramsayhealth.com</a>
SA Health	Yes	No	No	No	All Products.	Yes	Yes	Yes	No				<a href="http://www.sahealth.sa.gov.au">www.sahealth.sa.gov.au</a>
Sigma Company Limited	No	Yes	No	No	Ranged Products Only.	Yes	No	Yes	Yes	i. TRANSACTION_PRICE should be the net price after all allowances and deductions have been made, related ALLOWANCES are to be detailed separately for visibility. Optional if there are no ALLOWANCES.			
St Vincent's Health Australia Ltd	Yes	Yes	Yes	No	All Products (across whole industry).	No	No	No	No	i. Pricing not required			<a href="http://www.svha.org.au">http://www.svha.org.au</a>
Symbion Pty Ltd	Yes	No	No	No	All Contracted products initially, then extended range.	Yes	No	No	No	i. Only Wholesale List Price			

Old matrix, hard to maintain

# General Discussion

- Dataset Review
  - Update on changes & implementation planning/timeframes
  - Feedback
- Data Quality Improvement (Action Items 4.1)
  - Workshop/Discussion
  - Healthcare Data Quality Framework – does this need review/updating
- Supplier data 'Flags' to signify data reviewed (ready)/data has been user validated (live)(Action Items 5.3 & 5.4)
  - Workshop/Discussion
  - Healthcare Supplier Statuses – not aligned to DQI anymore, updating needed
- Improvement to 'User' experience (Action Item 5.6)
  - Workshop/Discussion
- Other items of business



# General Discussion

## Healthcare Dataset Review



# Pharmaceutical + Medical Devices

## Post Data Set Review

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Post Data Set  
Review



# Post Data Set Review



## Actions / Tasks:

- Review and where necessary update business validation rules
- Update NPC healthcare documentation
- Submit development request to NPC development partner
- Communicate changes – internally, NPC Certified Healthcare Product Providers, NPC Publishers & NPC Recipients
- Review and where necessary update the Healthcare Data Quality Reporting module
  - Recommend a 3 month 'information only' grace period
- ❖ Anticipate a late Q2, early Q3 production deployment

# Proposed Additions to Data Set



## Warranty Attributes - Medical Devices (if applicable)

- Warranty Description 2500 (string)
- Warranty Duration + UOM
- Warranty Effective Date Type 80 (string)

## Allergen Information – Pharmaceutical Medicines (if applicable)

- Allergen Type Code code list (FSANZ)
- Level of Containment code list

## Material - Medical Devices (implants - optional)

- Material Statement Description 5000 (string) \*recommended

❖ materialCode, materialContent, materialPercentage, materialTreatment

# Proposed Additions to Data Set



## Product Sponsor – All products (if applicable)

- Sponsor Name (string)
- ❖ New attribute, to be populated when 'TGA Sponsor' = 'N'

## Globally Harmonized System (GHS) - (if applicable)

- All industry NPC project to introduce GHS attributes. Inline with the Australian & New Zealand transition to GHS7

## Controlled Narcotic Drug Number - Pharmaceutical Medicines (if applicable)

- Migrate 'local' attribute 'Controlled Narcotic Drug Number' to GDSN 'global' attribute 'Controlled Substance Schedule Code Reference'.
- ❖ Currently seeking additional information – minimal impact to existing NPC publishers

# General Discussion

## Data Quality Improvement



# Data quality starts with clarity



- National Product Catalogue is not a technical/IT solution it is a community based data sharing environment that has a technical component (based on a set of global standards)
- Three distinct main roles in the NPC that are critical to ensuring data quality and ultimately value for the user community and Australian healthcare
- Each party involved needs to participate, subscribing and doing a minimum is not enough to ensure that there is value
- GS1 cannot (and will not) be the only party driving improvements to quality or the use of the NPC – we provide support, and assist both suppliers and recipients but we do not sit within the community that uses the data,
- Data in the NPC belongs to the company providing it – GS1 does not create/edit/'crowd source' the data – it comes directly from the supplier to their chosen recipients, passing through validations and cross referenced to prompt the maintenance of basic requirements

# Data quality starts with clarity



## Suppliers

- Internal
  - Understand requirements
  - Ensure strategic support
  - Internal program
  - Review available data (Source, validate, prepare)
  - Seek assistance & determine upload method
  - Ongoing maintenance processes
- External
  - Load data
  - Monitor quality
  - Review and update
  - Encourage use to drive value
  - Participate in ongoing improvement processes

## Recipient/Buyers

- Internal
  - Understand internal requirements for product data
  - Determine solution architecture to ensure data flows, validations and automated flows (where possible)
  - Compare to sector to map data usage and identify gaps
  - Executive support
  - Process changes (system & people)
  - Technical readiness
  - Engagement with suppliers plan
  - Ongoing improvement
- External
  - Ongoing Communication to/with suppliers
  - Receive/review data and provided feedback to suppliers
  - Participate in ongoing improvement processes

## GS1

- Technical Solution
  - Meets sector needs incl operation requirements
  - User guidance/tools
  - Support team to assist use by recipients and suppliers
- Community Engagement
  - Assist user community to define requirements and (help) ensure value
  - Communication to user community

## ADHA/NeHTA

- Sponsor of NPC development
- Ongoing participant in community
- Linked to areas of their ongoing programs federally
- Community engagement with key stakeholders

# Data quality – what do you need?



## Current

- Self assessment scorecards
- Data Quality framework
- Training
- Documentation/User Guides
- Load validations
- Ready check lists
- 'Ready' process
- Data Quality revalidation & reporting

## Needed

- On-demand Data Quality reporting for suppliers (GS1)
- Knowing how it is being used more clearly
- Communication to solution providers
- ???

# General Discussion

Supplier data 'Flags' to signify data is reviewed (Ready)/data has been user validated (Live)

How do we make activity more visible?





# How do we make activity more visible?



- Explore options to show a catalogue has had a full review as part of the DQI reporting (Is this an Industry wide 'Ready' status?) (refer Dataset review feedback)
- Explore how to signify where a catalogue has been reviewed by another recipient (Is this an Industry 'Live' status?) (refer Dataset review feedback)

Data Quality Ranking: '**Platinum**' Publishers

Publisher Name	Active GTINs		Percentage of Error Free GTINs		Unique Error and Warning Messages		Active Base Units	Days since last catalogue update	Number of Disabled Validation Rules	Data Quality Ranking		Publisher Status	
	Previous Month	Current Month	Previous Month	Current Month	Previous Month	Current Month				Previous Month	Current Month		
[Blurred]	[Blurred]	[Blurred]	[Blurred]	[Blurred]	[Blurred]	[Blurred]	[Blurred]	[Blurred]	[Blurred]	Platinum	Platinum	Healthcare Ready	Healthcare Ready
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# What do you need?

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# General Discussion

Improvement to 'User' experience



# What do you need?



- Better documentation

## **What else?**

- From GS1?
- From each other (suppliers/recipients)?
- Support?
- Tools?
- Training?
- Communication?
- What are the priorities?

# General Discussion

Any other items of business



# Confirmation of actions and next steps



# 2021 meeting dates

~~1Q 2021~~ - ~~Wed 10/02/2021, 2-4pm~~

**2Q 2021** - **Wed 12/05/2021, 2-4pm**

**3Q 2021** - **Wed 11/08/2021, 2-4pm**

**4Q 2021** - **Wed 10/11/2021, 2-4pm**



# Meeting close

