



The Global Language of Business

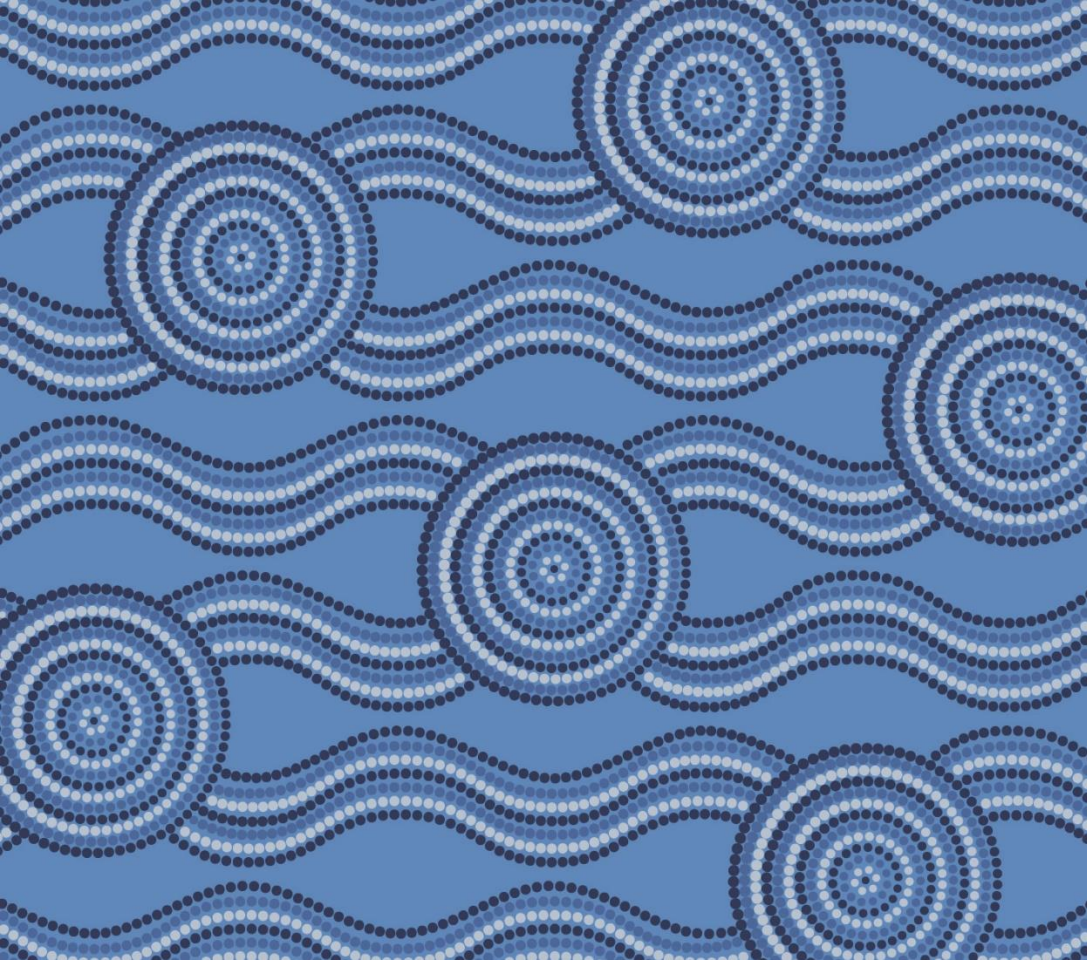
Healthcare NPC Advisory Group (HCNPCAG)

3Q 2022 meeting

3 August 2022



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



We acknowledge the traditional custodians of the lands on which we meet today, and pay our respects to their Elders - past, present and emerging.

We extend that respect to Aboriginal and Torres Strait Islander peoples joining us today.

Welcome, introductions and apologies



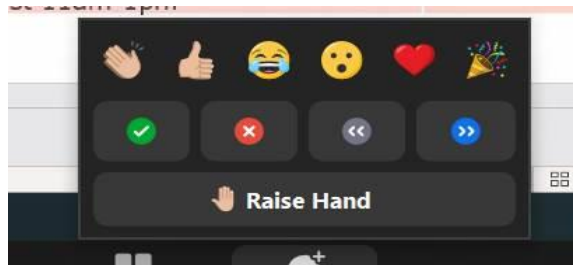
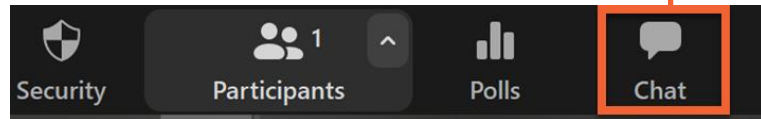
Note: todays meeting will be recorded for the purposes of preparing minutes

Your opinion matters



Click the bar at the bottom of your screen for the chat window or raise your hand to ask a question – all feedback is encouraged

Click here



We will be seeking votes on actions related to the 'Reimagining' improvements being proposed during the meeting via 'Polls'. Please make sure you enter your response when the polls pop up on screen

Proposed change to the 'Ready' process

Poll | 1 question

1. Do you support the proposed simplification of the supplier 'Ready' process to make it easier for them to publish their data to more trading partners (Single Choice) *

- Yes
- No
- Yes but I would like more information

Healthcare NPC Advisory Group Agenda



Time	Subject	Who
2:00pm	Welcome, introductions and apologies	Co-Chair
	GS1 Australia Limited Trade Practices Compliance Notice	GS1
2:05pm	Approve previous minutes from previous meeting	ALL
2:10pm	Review Action Items – Progress/Updates	Co-chair/ALL
2.20pm	Co-Chair – Call for Nominations	Cath Koetz/All
2.25pm	Regular Updates – Stats, Data Quality, AMT, Recipient updates	Ramesh/Sarah/ Recipients
2.40pm	NPC and AusUDID Sandpit – Brief Update	Long/James/Paul
2.50pm	Review and discussion of UNSPSC versions	Nigel Fuller/Ramesh Rayer/All
3.05pm	Reimagining of NPC for Healthcare - Update on completed items	Cath Koetz/Mark Blitenthall/Deb Prince/All
3.15pm	Reimagining of NPC for Healthcare – Data Lake proposal & discussion	Keith Lai/All
3.30pm	Reimagining of NPC for Healthcare – Sub-working Group updates & WIP	Nigel Fuller/Ramesh Rayer/Murray Robb/Justin Middleton/Keith Lai/All
3:50pm	Any other business Confirmation of actions, next steps, next meeting	Co-Chair/GS1
4.00pm	Thanks, and meeting close	Co-Chair/GS1

Trade Practices Compliance Notice



GS1 Australia Trade Practice Compliance Notice

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 of Actions Log



Actions Log (open items)



Action Items	Owner	Deadline	Status
2.1 <i>Executive level 'Value proposition'</i> Document for use within executive level discussions within suppliers providing 'talking points' to assist with understanding the value of the NPC	Mark Blitenthall/Emma Morrison/Cath Koetz (GS1)	01/05/2020 OVERDUE To be closed August 2022	Updated Value Propositions inclusive of feedback have been finalized and are now available as PDF and as webpages for recipients and suppliers https://www.gs1au.org/for-your-industry/healthcare/npc-in-healthcare/standardised-product-data
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	Recurring	Ongoing and linked to broader improvement discussions.
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)	Ramesh Rayer- GS1	Open	To be reviewed as part of review of DQI reports
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)	Ramesh Rayer - GS1	Open	To be reviewed as part of review of DQI reports
5.5 Investigate the possibility of an 'Interim load' of data (refer Dataset review feedback)	Murray Robb - GS1	Open	Included in Reimagining project deliverables - Working group has been formed to explore this requirement
7.1 AMT-CTPP Action plan to be developed including: Creation of an AMT-CTPP – GTIN Value proposition paper, outlining data linkage initiative and benefits to industry Practical Demonstration of how the AMT-CTPP and GTIN Linkage works in practice incl overview plus data flows etc..	TBC ADHA/AEHRC	Open	(This action is an amalgamation of 3.2, 6.3, 6.4) Changes to team at AHDA and the move of the NCTS to AEHRC has interrupted the ability to report on this
7.3 Allowing for the new dataset to stabilize and be implemented, complete a review/assessments of what data is actually being used and HCNPCAG to then decide whether any attributes can be removed from the sector requirements.	GS1 NPC team with Recipients	September 2022	Item added based on discussion in Sept 2021 to ensure that what is being requested is of value.
7.4 Use cases to be updated to add 'Supply Chain Surety' and reflect feedback from Reimagining workshops	Cath Koetz- GS1	To be closed August 2022	Updated Use Cases inclusive of feedback have been finalized and are now available as PDF and as a webpage https://www.gs1au.org/for-your-industry/healthcare/npc-in-healthcare/use-cases

Actions Log (open items)



	Action Items	Owner	Deadline	Status
8.1	New Attribute for 'Volume' raised by Ian Boyle from Queensland Health. NPC team to investigate options for automatically calculating Volume by using data already provided or option for additional attribute (if not able to the calculated).	Ramesh Rayer GS1	Open	Awaiting feedback on details of requirement
8.2	Detailed actions from 'Reimagining NPC for Healthcare' to be reported at each meeting via project summary update and reporting on specific items. Individual owners of deliverables will report where needed on progress.	Cath Koetz/Mark Blitenthall GS1	Open	Refer to update provided within pre-read documents
8.3	Review of UNSPSC to ensure a. version 19 is still appropriate; b. look at how GS1 could provide more tools to support suppliers in mapping codes; and c. ensure clear communication regarding how recipients use/wish to use UNSPSC classification to support their processes (supply chain surety, catalogue groupings etc..)	Ramesh Rayer GS1	Open	Sub-working group has been formed to discuss. Proposal from meeting provided in pre-reads and topic included for discussion in agenda August 3 rd meeting

Nominations for Co-Chair



Vacancy for Healthcare NPC Advisory Group Co-Chair



Sincere thanks to Elizabeth Donohoo who was one of the groups inaugural co-chairs

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





66,904 GLN/entities involved

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

* Increase by **1,007** (1.5%) since Mar 2022

44 Active GDSN Datapools working in healthcare

Australia's NPC is 3rd largest globally

* No Change

253 Countries (Target Markets)

* No change

4,999,239 Product Records

- 4,163,828 MedTech +5.1%
- 83,806 Pharma +0.8%
- 751,605 Other +2.5%

* **4.6%** increase on March 2022 numbers

NPC HC Statistics – AU (July 2022)



663 Publishers/Suppliers

* Decrease by **3** since April 2022

5 Certified Product Providers

* no change since April 2022

24 Recipients

- 8 state health departments
- 4 private hospital groups
- 11 distributors
- ADHA

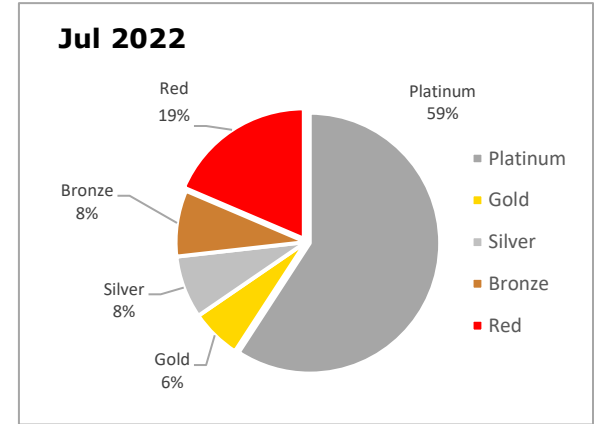
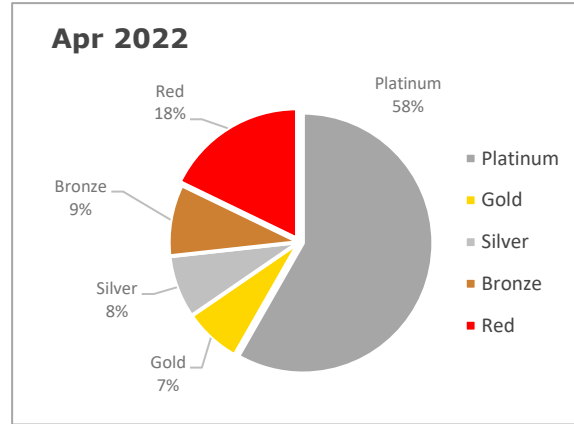
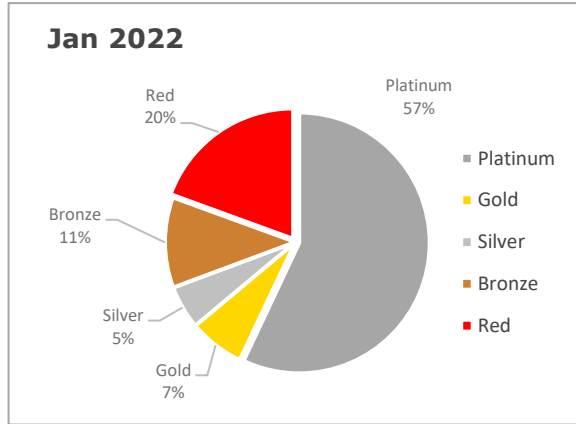
* no change since April 2022

479,679 Product Records

- 400,538 MedTech
- 79,141 Pharma & Other

* 1.43% increase on April 2022 numbers

Healthcare Data Quality Program



	Red	Bronze	Silver	Gold	Platinum
July 2022	86 – 19%	38 – 8%	36 – 8%	29 – 6%	274 – 59%
April 2022	82 – 18%	41 – 9%	36 – 8%	33 – 7%	268 – 58%
Jan 2021	90 – 20%	52 – 11%	25 – 5%	32 – 7%	264 – 57%

	Top DQ Errors
1	Missing v19.0501 UNSPSC code
2	Missing Manufacturer Name
3	Trade Item Description contains commas
4	Invalid Prostheses Rebate Code

Addressing the Top Data Quality errors



	Top DQ Errors	Count	Suppliers
1	Missing v19.0501 UNSPSC code	27495	82
2	Missing Manufacturer Name	15286	45
3	Trade Item Description contains commas	8089	37
4	Invalid Prostheses Rebate Code	7803	23
5	Missing Manufacturer Internal Reference	4216	40
6	Depth contains 9999, 99999, 999999	3879	22
7	Width contains 9999, 99999, 999999	3853	22
8	Trade Item Description = Additional Trade Item Description	3828	15
9	Height contains 9999, 99999, 999999	3826	22
10	Brand missing from beginning of Trade Item Description	3588	30

- Finding Healthcare suppliers are not as responsive as other industries.
- Top 2 DQ Errors will be the primary focus
- Team also focuses on quick wins (where DQ scores can be improved or if supplier drops Platinum status)
- Continued issues when working with suppliers with large catalogues
 - Team is aiming to follow up with the bigger suppliers
- Outstanding Action:
 - Review of validation rules to remove any that are unnecessary for AU Healthcare so focus on critical errors

AMT-CTPP Update – July 2022



- 6,215 NPC records have a valid AMT-CTPP code
 - **1.4%** increase Apr to July
- 41 NPC records contain a deprecated code (replacement available)
- 255 NPC records contain an invalid AMT-CTPP code
- 3,758 NPC records have been identified as probable AMT-CTPP applicable records - not populated
 - * single digit increase since April (approximately ½ belong to two distributors)

Regular Updates

Updates from Recipients on their NPC programs & engagement activities

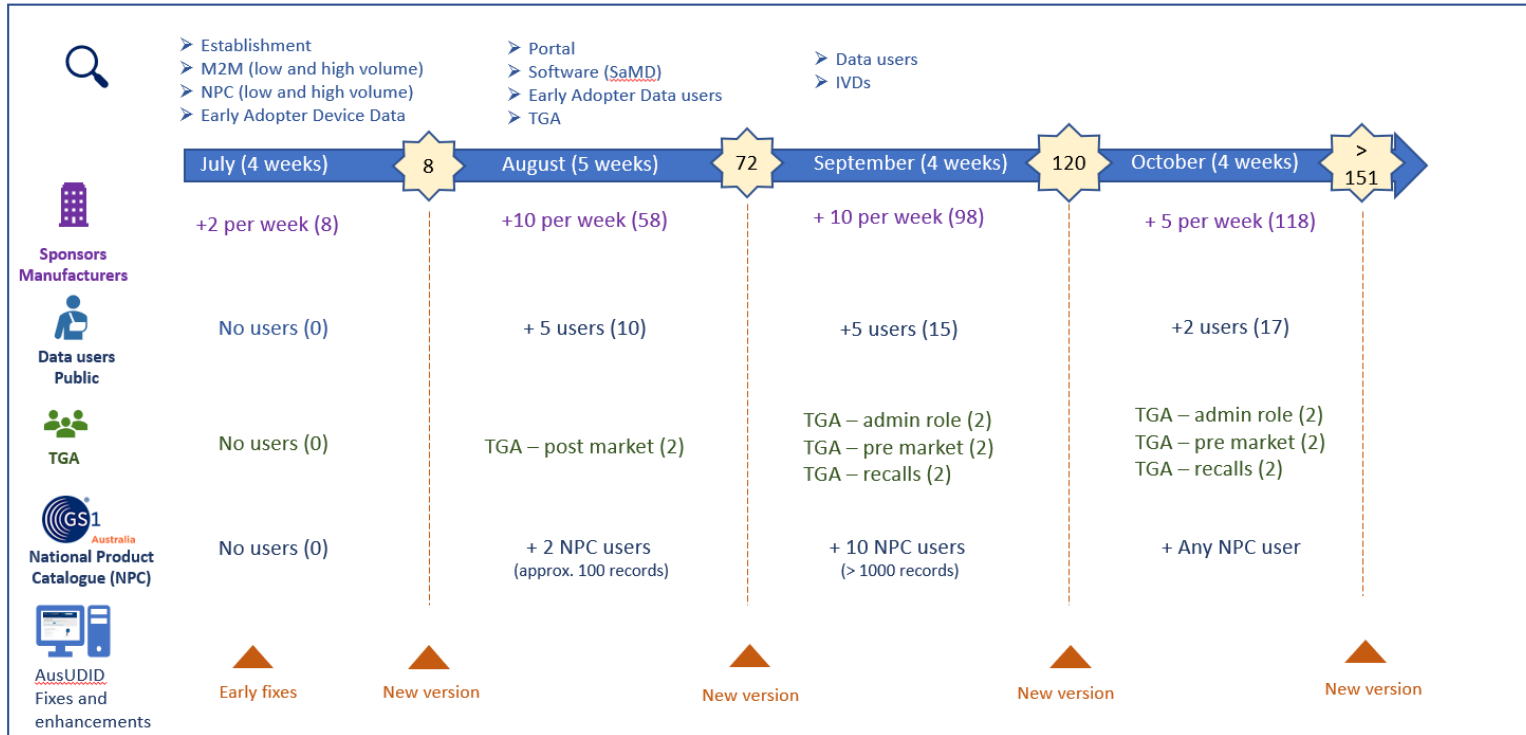


NPC and AusUDID Sandpit

Brief update



Indicative roadmap for NPC/AusUDID Pilot





Review & discussion of UNSPSC Version

HCNPCAG Action Item 8.3



Decision required by HCNPCAG

Summary of Changes Between v19 & V24



- Total Updates – 74,679

Updates from v19 to v24			
Type of Update	No. of Updates	No. of GTINs Impacted	No. of Suppliers Impacted
ADD	74109	NA	NA
DELETE	224	14	1
EDIT	281	18	3
MOVE	65	0	0

- No. of GTINs Impacted – 32
- No. of Suppliers Impacted – 4
- Note 1: Not all impacted GTINs affect Healthcare
- Note 2: Analysis does not capture items which could have possibly used the ADD (new) codes

Summary of Changes Between v19 & V24



- Total Updates for Healthcare Segments – 71,338 (3,341 difference)

Within HC Segment	Segment Description	ADD	DELETE	EDIT	MOVE
41000000	Laboratory and Measuring and Observing and Testing Equipment	895	5	14	2
42000000	Medical Equipment and Accessories and Supplies	180	46	141	54
51000000	Pharmaceutical Products incl. Contraceptives and Vaccines	243	50	7	0
85000000	Healthcare Services	69657	14	30	0
		70975	115	192	56



Discussion/Decision:

- Details were provided in pre-reads
- Differences for healthcare between v19 & v24 – total changes 224 Deleted, 74109 added
 - Segment 51000000 Drugs and Pharmaceutical Products
 - V19 = 8,425 Commodity Codes v v24 = 8,619 Commodity codes (↑ 194)
 - Segment 42000000 Medical Equipment and Accessories and Supplies
 - V19 = 3,471 Commodity Codes v v24 = 3,607 Commodity codes (↑ 136)
 - Segment 41000000 Laboratory and Measuring and Observing and Testing Equipment
 - V19 = 1,932 Commodity Codes v v24 = 2,864 Commodity codes (↑ 932)
 - Segment 85000000 Healthcare Services
 - V19 = 4,137 Commodity Codes v v24 = 73,794 Commodity codes (↑ 69,657)

For discussion = Decision on proposal needed



- **OPTION 1: Stay as we are** – v19 to remain as the industry minimum requirement, V23+ to be 'allowed' where codes do not exist in v19.
 - Update communications to reflect the position – Value, Clear sector alignment etc..
 - Ensure NPC technically will support all new versions up to 24 and beyond
 - Ensure tools in place to support
- **OPTION 2: Allow 2 versions** – v19 to remain as the industry minimum requirement, V24 to become specifically allowed as option (preferred?),
 - Update communications to reflect the position – Value, Clear sector alignment etc..
 - Ensure NPC technically will support 24
 - Ensure tools in place to support
- **OPTION 3: Transition whole sector to new Minimum Version** – v24 to become the industry minimum requirement, plan transition program
 - Update communications to reflect the position – Value, Clear sector alignment etc..
 - Ensure NPC technically will support 24
 - Detailed transition plan and support for suppliers
 - Ensure tools in place to support



Reimagining of NPC for Healthcare

Update on completed items



Progress & Plans – Updates



Healthcare NPC Reimagining - Agreed Actions and Project update

Grouping	Objective	Item	Details	Sector Priority	Summary update/planned actions	Scheduled delivery
Operational improvements	Improve Healthcare Users' experience LOADING and MANAGING data	1.1	Improving online capability for managing larger catalogues	1	Scoping/Planning phase - Updated tool for online users (NPC Xpress) to be build to suit healthcare requirements with capability to support larger catalogues and bulk maintenance. To be discussed at May 2022 HCNPCAG Significant interest in possibilities of NPCX to suppliers. GS1 exploring next steps to deliver UI improvements for suppliers - which may be via improvements to existing interface versus change to NPCX. GS1 to host a specific discussion on this topic with the sector representatives ahead of any development to help define/refine specific requirements for the product overlays (Medicines, Medical Devices, Other non clinical items)	Q3/4 2022
Operational improvements	Improve Healthcare Users' experience LOADING and MANAGING data	1.2	Review options to more readily enable data to be managed from supplier PIM to NPC without need of middleware, and thereby remove some complexity and cost that have been raised as concerns by suppliers	1	Review phase - Improve documentation and communication of options for Machine-to-Machine that allow data to be managed direct from PIM etc.. Existing options for XML not well known. Some service offerings may be needed to help in implementations. Further documentation of options beyond XML will be created as they are developed.	Q3/4 2022
Operational improvements	Improve Healthcare Users' experience LOADING and MANAGING data	1.3	Supplier UI experience improvements to enable greater tailorability for individual use profiles - across a business or within a business	3	Refer 1.1 update as updated online tool will improve UI to make it specific for users within healthcare. As per 1.1 update Primary focus on product overlays to help refine user experience.	Q3/4 2022
Operational improvements	Enhanced flexibility in LOADING and MAINTAINING data	2.1	Review how pricing updates can be provided through the system where item data may have known errors that currently block this (updates may not have been completed on item data but pricing changes are urgently needed so flexibility has been highlighted as a critical need)	1	Published items are able to have PRICE updated even where ITEM is out of date according to review of all methods of access (Certified middleware & Publisher). Noted that PRICE update needs to be possible within planned NPC Xpress for Healthcare (refer 1.1). To be discussed at May 2022 HCNPCAG. Further feedback regarding specific issues are invited, otherwise GS1 proposes closure of item. Agreement at May 2022 AG to close this item with option to revisit if it is found to be a problem.	Q2 2022 Completed
Operational improvements	Enhanced flexibility in LOADING and MAINTAINING data	2.2	Interim load capability for products where not all attributes are available when product is created, but there is urgency to set up a basic product record	2	Scoping/Planning phase - Initial scoping of a 'preliminary load' solution has been completed and will be discussed at May 2022 HCNPCAG. Proposal to form a working group to further investigate. Discussed at May 2022 HCNPCAG Advisory Group approved formation of the working group to look at this in greater detail. Sub-working group has been formed to review and provide recommendations to HCNPCAG on next steps.	Q2 2022

Refer to pre-read document for full details of updates

Progress & Plans



Completed

- Use Cases
 - [Web page](#)
 - [PDF version](#)
- Value of NPC to Australian Healthcare
 - [Landing webpage](#)
 - [Suppliers webpage](#) & [PDF](#)
 - [Recipients webpage](#) & [PDF](#)
- Sector Governance & Managing Requirements
 - [Webpage](#)

Pending completion

- Simplified Read process

Working groups/Work in progress

- Following for discussion within the agenda today



Reimagining of NPC for Healthcare

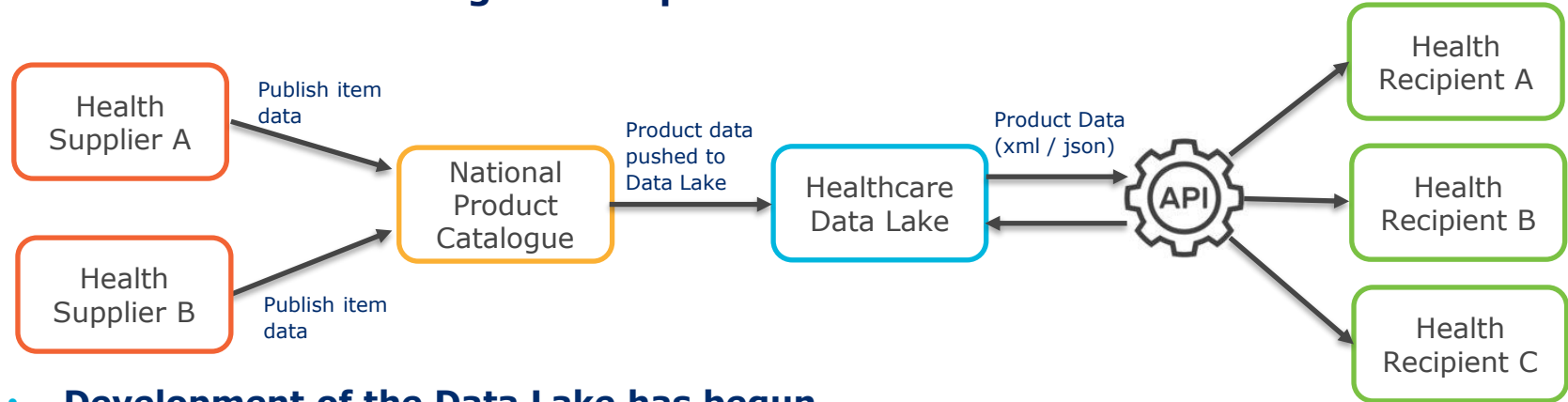
Data Lake proposal & discussion



Item 5.4 More flexible 'catalogue'



- **5.4 Facilitated through development of a Data Lake and API's**



- **Development of the Data Lake has begun.**

- GLNs allocated and setup of the Healthcare Data Lake as a data recipient in the NPC.
- Building the Data Lake.
- Develop a new JSON file for the product payload.
- Develop a library of API search parameters to query the Data Lake.

Item 5.4 More flexible 'catalogue'



- **API sub working group to discuss requirements this morning.**
 - Develop a set of 6 -10 API search parameters to query the Data Lake.
 - Consider the number of GTIN records to return in a single API call to a manageable capacity.
 - Single GTIN response for the API but will investigate support of full item hierarchy responses (e.g. CASE – INNER – BASE).
- **Next Steps:**
 - Send out a Microsoft Forms survey to the group.
 - Research on existing API solutions that's already in use provided by the sub working group (e.g. TGA API and HL7)
- **Timeline:**
 - Aim to deliver an initial solution before the end of the year.

Reimagining of NPC for Healthcare

Sub-working group updates & discussions



Item 2.3 Distributor Data Loading



- Sub-group met for the first time on the 19th July
- GS1 provided the sub-group with initial thoughts on how a 'Distributor Model' could be implemented by the sector
 - Key objective (allocate responsibility to either Brand Owner, Distributor or Both)
 - Listing of healthcare attributes, responsibility / ownership assigned to each attribute
 - Challenges (co-ordination & agreements)
- The sub-group members agreed that further work should be directed towards a healthcare sector 'Distributor Model' – agreed with primary objectives
- A survey has been sent to sub-group members requesting feedback on the responsibility indicators assigned to the various attributes / groups of attributes
- **Next Step:**
 - GS1 to consolidate responses, provide implementation recommendations
 - Report back to sub-group (assumption that additional meetings will be required)

Item 2.2 Interim Load = 'Preliminary Item'



- Sub-group met for the first time on the 27th July
- GS1 provided the sub-group with an overview of the 'Preliminary Item' attribute
 - Attribute details (simple status flag only)
 - How 'Preliminary Item' could be used by the sector
- The concept was welcomed by the sub-group (publishers & recipients), with agreement to poll members to better understand the types of attributes that can be difficult to source (for a new item)
- A survey has been sent to sub-group members requesting that they list the attributes or groups of attributes that they would like to see included within a Preliminary Item model
- **Next Step:**
 - GS1 to consolidate responses, provide implementation recommendations
('blank' or 'dummy-data', business validation rules, trigger for 'FINAL', data quality reports)
 - Report back to sub-group

Item 4.1 Use of NPC in Tendering Process



Background:

Historically, NSW Healthshare, Healthshare Victoria & SA Health have supported the use of the NPC within their tendering processes. For a range of reasons, this no longer occurs. Proposal to investigate how the NPC could be used by Publishers to enhance the tendering process by reducing data entry tasks and by improving data accuracy.

Update:

- Sub-group met for the first time on the 1st August 2022
- Group supported a detailed review of requirements
- Groups members providing examples of tendering templates (recipients) and details of common challenges with multiple definitions requiring recreation of data (suppliers) – due by Friday 5th August
- **Next Step:**
 - GS1 to consolidate responses to map common attributes and challenges and provide back to sub-group for further discussion
 - Next meeting to be scheduled once analysis is completed to discuss options



Any other business/topics





Visibility of Recipient use of data

- Raised during the NPC for Tendering working group meeting
- Previously raised as an action item to try to help highlight who is using the data that suppliers provide and how to demonstrate the value of the investment
- Possible actions:
 - Recipient short webinars to help explain their processes?
 - Clearer communication of use by recipients (refer examples)

Important note: In cases where data is provided to centralised teams at group or state level, the data is being shared/is available to individual hospitals, area health services and local health districts, in addition to cataloguing teams and whole of organisation technology platforms. This sharing or data downstream, across organisations is one of the most important value adds of the NPC so where you are being asked for data at a local level please encourage them to connect to their centralised teams to have access to the data they seek.

- Data published to HSV for the National Product Catalogue is made available to all Victoria Health Services. They will access the data via the Victorian Product Catalogue System which combines the NPC data with HSV contract information provided during the tendering process. This data is also being integrated into systems across the state wherever possible. The people using the data may not realise it has come from the NPC.

- Other thoughts?

<https://www.gs1au.org/for-your-industry/healthcare/npc-in-healthcare/australian-healthcare-data-recipients?viewmode=0>



Supplier NPC forum

- Raised post the series of sub groups in the past few weeks
- Large number of working groups that are focussed on recipient requirements and feedback re various activities
- Noted that suppliers are sometimes less forthcoming in speaking on the calls
- Would a supplier only forum be useful as a sub group to ensure the supplier voice to existing work and also allow discussion of more supplier centric needs?

Confirmation of actions and next steps



2022 meeting dates

~~1Q 2022~~ - ~~Wed 9/02/2022, 2-4pm~~ skipped due to project planning

~~2Q 2022~~ - ~~Wed 11/05/2022, 2-4pm~~

3Q 2022 - **Wed 3/08/2022, 2-4pm**

4Q 2022 - **Wed 9/11/2022, 2-4pm**



Meeting close