

Name	Healthcare NPC Advisory Group (HCNPCAG) – 4Q 2021 meeting
Purpose	NPC Advisory Group for Healthcare industry

Meeting details:

Date	Time	Location
1 Dec 2021	2:00pm	Remote dial-in
Co-Chair	Elizabeth Donohoo, Director Terminology - Australian Digital Health Agency Peter Wilson – Uniting Care Health	
GS1 support	Cath Koetz, Industry Manager - Healthcare - GS1 Australia Murray Robb, Manager – Services Implementation – GS1 Australia	
Attendees & Apologies	Refer later in minutes	

Meeting minutes:

Welcome, introductions and apologies – Attendees/Apologies (refer later in this document)

GS1 Australia Trade Practices Compliance notice – Referred to each meeting, accessible on HCNPCAG HUB ([Link](#))

Presentation from TGA on UDI plans and pilot of NPC/GDSN to the AusUDID – Michelle van Wijk.

Explanation of Unique Device Identification – a globally unique series of characters that allows the unambiguous identification of a specific model of device on the market created through a globally accepted standard. Standards don't currently exist and various identifiers are currently used to identify devices from manufacturing to patient.

The use of UDIs will deliver benefits to patients and hospitals and e-health records in terms of providing data about medical devices including product information, tracking and tracing, etc. There is a lot of work being done internationally to align across markets.

Locally TGA will build and manage the UDI system. There are four streams of development occurring in parallel: engagement, regulations, database and technical solution, adoption. Approval and funding has obtained to build the UDI database within a four year timeframe. The process is currently at the stage of having engaged a technical delivery partner to build the technical components and in early discussions with hospitals, device clinical quality registries and software providers eg. electronic health records.

The database will include the use of APIs to enable interoperability, the ability to download publicly available data using a variety of standards and the ability to provide a snapshot of UDI records over time and the ability to see changes. It will contain device information, clinical characteristics, manufacturer information and supply chain information.

The NPC/ GDSN is being explored for provision of data and changes. Early adopter projects are being developed and the TGA is engaging with a range of stakeholders across the health ecosystem to gather and leverage learnings eg. manufacturers, sponsors industry and peak bodies, patients and patient advocates, etc. There is also a TGA web hub, a series of regular webinars and working groups to inform database design and regulations. The first of these is almost finished

Presentation from GS1 NZ on 'Health Supply Catalogue' for NZ & use of NPC – Gary Hartley.

Health Sector Catalogue will provide a single, up-to-date, comprehensive national procurement catalogue that all DHBs will use as part of a larger financial, procurement information management programme by the MOH. Currently focused on medical devices.

GS1 is the preferred way of publishing item and price data and are working with suppliers to on-board them and publish this data. 250 suppliers are being targeted, prioritised based on a mix of volume and data matching. Looking to get as many devices into the HSC by July 2022. The dataset contains a mixture of 46 mandatory, optional and conditional attributes and aligns very closely with existing GS1 NPC data standards.

The HSC foundation programme is a 21 month programme scheduled for completion in July 2022 divided into three phases: view (Dec 21) – early adopters will be able to view the HSC, interact (Mar 22) DHBs will be able to extract information from the HSC to use in their ERP systems for purchasing and completion (Jul 220).

Likely that plans to enhance and further develop the HSC will be developed after completion of this foundation phase. These could include the full range of medical devices, the inclusion of product images and other product information, inclusion of products other than medical devices. Initial engagement has been extended and all medical device suppliers in NZ are now invited to participate in the development of the HSC.

Scope of medical devices: Items purchased by DHBs over the past 12 months, all items routinely purchased within the public sector, all items that are included on contracts as well as any item covered under agreed pricing arrangements, complete product ranges, any items that a supplier wishes to include in the catalogue

Resumption of normal meeting agenda

Introduction of new HCNPCAG Co-Chair, Peter Wilson – Peter has many years' experience working in healthcare and also working with the NPC and is looking forward to bringing that experience to bear in his role as co-chair.

- **Prioritisation of improvement to NPC for Healthcare** – Cath outlined the approach that had been taken to prioritise requirements. An anonymous voting/survey process to all members of the Healthcare NPC Advisory Group. Each item (total of 38) provided with choices of: High Priority, Low Priority, Not required/Optional, Not applicable/No Comment. Items ranked based on votes & weighed where needed. Additional comments also invited for each section and overall.

Objective	Item Number
Enhanced use of NPC data	4.1
Review of User Education	10.2
Improve understanding and visibility of Recipient requirements	11.1
Streamline supplier 'Ready' process	3.1
Enhanced flexibility in LOADING and MAINTAINING data	2.1
More flexible options for Recipients to access the Data, have visibility of quality that will encourage and enable greater use	5.4
Enhancements to highlight Data Quality issues	6.4
Enhanced flexibility in LOADING and MAINTAINING data	2.2
Enhancements to highlight Data Quality issues	6.1

Ability for the NPC to support recipients and suppliers to message each other within the system to direct messages to teams managing data.	8.4
Enhancements to highlight Data Quality issues	6.3
Purge or filter known errant data	7.1
Review of User Education	10.1
Improve Healthcare Users' experience LOADING and MANAGING data	1.1
More flexible options for Recipients to access the Data, have visibility of quality that will encourage and enable greater use	5.3
More flexible options for Recipients to access the Data, have visibility of quality that will encourage and enable greater use	5.1

- **Comments/Questions from group:**
- **Peter Wilson (Uniting Care)** – do we want to integrate UDIDI requirements into NPC development timelines?
- **Cath Koetz (GS1 Australia)** - This is a priority for NPC, some of the attributes are already built into NPC. There is around 80% overlap in dataset.
- **Ryan Mavin (ACT Health)** – Want to ensure that we don't have a second set of information needing to be captured.
- **Trent Barrett (JnJ Medical)** – Review of User Education. What symptom are we addressing?
- **Cath Koetz (GS1 Australia)** – GS1 is having regular conversations around issues with the data.
- **Ian** – Timeframe for actioning – GS1 needs to break into streams.
- **Cath Koetz (GS1 Australia)** - GS1 meeting in a couple of weeks to confirm roadmap and timeline.
- **Ian** – Enhanced flexibility in Loading and maintaining data should be ranked higher.
- Item 5.4 – a number of respondents would like this moved higher.
- Item 8.4 – addressing this could address 6.1 and 2.2. Ian would like to see this raised higher. Kamlesh and Pan - any automation will help. Need to remember that some items are smaller effort to get ticked off then should be re-prioritised after evaluation of effort. Combine low hanging fruit analysis vs. ranking. Want to deliver as much as possible as quickly as possible. Marcel – GS1 needs to review design phase and will then be able to address commonalities in requirements/ priorities.
- **Kamlesh** – 7.1 can we go back to publishers to request correct information?
- **Cath Koetz (GS1 Australia)** - we have been doing this for a long time with limited success.
- 5.1 – needs to be higher up the list
- If anyone feels strongly about anything that has been missed, please raise with **Cath Koetz (GS1 Australia)** before end of week and it will be added

Review of Action Items

- b. **2.1 - Executive level 'Value proposition' development** – Draft prepared and in final GS1 review before sharing to HCNPCAG for comment. GS1 has taken the time to do a thorough review of all of the documentation around the use cases in different sectors and different geographies and also felt it would be beneficial to take the feedback from the recent consultation with industry stakeholders into account to ensure that we formulate a value proposition that incorporates new input arising from their input
- c. **3.3 – UNSPSC selection process improvement** – Further detail required from users in order for GS1 to action further. Issue originally raised by a member of the HCNPCAG who is no longer involved in the sector so may need to be reviewed.

- d. **4.1 - Suggestions on what else GS1 or HCNPCAG can do to help drive the Data Quality improvement within NPC.** – Ongoing and linked to broader improvement discussions
- e. **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)** – Completed
- f. **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?)** – Included as action within Reimagining priorities
- g. **5.4 - Explore how to signify where a catalogue has been reviewed by another recipient (Is this an Industry 'Live' status?)** – being investigated but difficult to do in the case of M2M integration
- h. **5.5 - Investigate the possibility of an 'Interim load' of data (refer Dataset review feedback)** – Included as action within Reimagining priorities
- i. **6.1 - Co-Chair nominations to be sent to group** – nominations sent and received, new Co-Chair appointed at December 2021 meeting. Item to be closed.
- j. **6.2 - Project plan and 'dashboard' progress reporting related to the updated dataset (visibility of deliverables, timelines and where hold-ups are being experienced)** – delivered and completed
- k. **6.7 - Development of report informing suppliers which recipients are using/have accessed their data within the previous month** – WIP item as it is challenging to create such a report due to the diversity of how recipients access and use the data
- l. **7.1 – AMT-CTPP Action Plan** – (This action is an amalgamation of 3.2, 6.3, 6.4). Achieved significant milestone – big increases in the last year - 75% of base unit GTINS now have an AMT-CTPP code to link physical world to medicine management world
- m. **7.2 –Dataset Review changes implemented post go-live** – Feb/ March data quality reports for new dataset
- n. **7.3 – Review/Assessment of data usage** – Due to be completed September 2022 (Cath Koetz, GS1)
- o. **7.4 – Use Case review/update to reflect Re-Imagining workshops and inputs** – To commence now that the prioritisation exercise has finalized and will be delivered with 2.1 Executive VP (Cath Koetz – GS1)
- p. **7.5 –Actions from workshops to eb shared with HCNPCAG for feedback & prioritisation** – Completed with the addition of the discussion today (1 December 2021), action to be closed (Cath Koetz, GS1)

Regular Updates

GDSN statistics – 64,431 GLN/entities involved incl. manufacturers/suppliers, recipients (health organisations, GPO, distributors etc.), government agencies etc. Increase by 1,254 (2%) since Aug 2021.

41 Active GDSN Datapools working in healthcare. Australia's NPC is 3rd largest globally. Increase by 1.

253 Countries (Target Markets). No change.

4,624,077 Product Records: 3,823,101 MedTech +1.4%; 83,544 Pharma - 1.7%; 717,432 Other +3.9%; 1.7% increase on Aug 2021 numbers

NPC statistics – 667 Publishers/Suppliers - Increase by 6 since July 2021; 5 Certified Product Providers - no change; 23 Recipients: 8 state health departments, 4 private hospital groups, 10 distributors, ADHA - No change; 454,072 Product Records, 381,913 MedTech, 72,159 Pharma & Other - 1.4% increase on July 2021 numbers

Data Quality Improvement progress – top DQ errors remain consistent, Platinum suppliers have gone backwards indicating that people aren't addressing monthly reports as well as we would like. Once issues are resolved they should stay resolved.

- **Comments/Questions from group:** N/A

AMT CTPP/GTIN project update – Achieved significant milestone – big increases in the last year - 75% of base unit GTINS now have an AMT-CTPP code to link physical world to medicine management world. Congratulations to data suppliers. Now planning to publish AMT-CTPP – GTIN link to software vendors. Want to work with jurisdictions to get more data in and partner with software vendors to plan for project to test this data. Will work with GS1, software vendors and jurisdictions. Some org have volunteered to participate in POC – others can also do that let Cath know.

<ul style="list-style-type: none"> • Comments/Questions from group: N/A <p>Recipient Program Updates – N/A due to time constraints</p> <p>Any other business/Topics – N/A due to time constraints</p> <p>q. Confirmation of actions and next steps – refer to Actions Log.</p> <p>r. Confirmation of next meeting dates</p> <p>s. Meeting Close</p>

Next HCNPCAG meeting

Date & Time	TBC
Location	Remote dial-in (Note: new invitation to be provided)
Organiser	Cath Koetz – GS1
Co-Chairs	Elizabeth Donohoo – ADHA and Peter Wilson – Uniting Care Health

Actions Log:

	Action Items	Owner	Deadline	Status
1.1	Terms of Reference to be updated with feedback from Kick Off meeting & distributed to HCNPCAG members for review and approval at commencement of Meeting 1 2020.	Gary Russon (GS1)/ALL	Closed	Approved, Item closed 19 February 2020
1.2	Call for Co-Chair Nominations from HCNPCAG group members in accordance with Terms of Reference.	Gary Russon (GS1)/ALL	Closed	Rob Setina (HPV) and Elizabeth Donohoo (ADHA) confirmed as co-chairs 17 th June 2020
1.3	Detailed NPC statistics to be provided for reference at all future HCNPCAG meetings	Sascha Timoshanko (GS1)	Closed	This is to be closed as an action item and be included as part of the standing agenda for the AG meetings
1.4	Healthcare Data set & Use Case Review by industry	Cath Koetz & Murray Robb (GS1)	Closed – refer to Action 3.5	Discussion at meeting on 26 th August to launch after delays.
1.5	Enhancement requests for NPC platform and Data Quality Improvement reports	Justin Middleton & Murray Robb (GS1)/All	Closed	This will be closed as an action and be included as a part of the standing agenda of the AG meetings
1.6	Nominations for additional industry representation (in line with Terms of Reference)	GS1/ALL	Closed	Additional nominations open at any time This will be closed as an action and be included as a part of the standing agenda of the AG meetings
1.7	Meeting requests including Zoom dial in details to be sent to HCNPCAG group members for all 2020 meetings	GS1	closed	2020 meetings have all been set and invitations sent.
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/Marian Makram Perkins/Cath Koetz (GS1)	01/05/2020	Overdue Draft prepared and in final GS1 review before sharing to HCNPCAG for comment.
2.2	Recipients to share details of their programs on an ongoing basis to the AG (within Recipient updates) and aim to communicate this within their own programs.	Recipients (ALL)	Closed	This will be closed as an action and be included as a part of the standing agenda of the AG meetings
2.3	Further discussion in future meetings to ensure that required NPC statistics are available across all active Recipients to further detail the utilisation of NPC data.	GS1 staff Recipients (ALL)	closed	No additional feedback provided, closing item as an action and can revisit in future as needed
3.1	GHS (Global Harmonised System) as possible NPC attribute for Dangerous & Hazardous Goods classification and reporting	AG members to advise within dataset review	Closed	Agreement to add to the NPC Dataset as optional for all products, Closed Feb 2021
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)	Closed – refer 7.1	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.	Murray Robb (GS1)	Open	Further detail required from users in order for GS1 to action further. Issue originally raised by a member of the HCNPCAG who is no longer involved in the sector
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
4.2	All HCNPCAG members invited to actively participate in the Dataset Review process	GS1/ALL	Closed	Completed and participation from representatives across the sector very good (refer Nov 2020 meeting) Agreement to close 3 rd June 2021
5.1	Finalisation of the Healthcare Dataset ready for implementation including new or amended fields	Murray Robb - GS1	Closed	Closed as review has been finalized, but a new action added as 7.2 to allow for reporting on any outstanding items that need to be implemented.
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)	Murray Robb/Deborah Prince - GS1	Open	
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)	Murray Robb - GS1	Open	
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)	Murray Robb - GS1	Open	
5.5	Investigate the possibility of an 'Interim load' of data (refer Dataset review feedback)	Murray Robb - GS1	Open	Included as action within Reimagining priorities
5.6	Ongoing process improvement (refer Dataset review feedback)	GS1/ALL	Closed	Closed as agreed Sept 2021 as this is a core element of the HCNPCAG versus a single action item
6.1	Co-Chair nominations to be sent to group	Cath Koetz - GS1	Propose to close Dec 2021	Nominations sent and new Co-chair appointed
6.2	Project plan and 'dashboard' progress reporting related to the updated dataset (visibility of deliverables, timelines and where hold-ups are being experienced)	Murray Robb - GS1	Open	
6.3	Value proposition AMT-CTPP to be revisited / refined	Pan Teng ADHA / Cath Koetz GS1	Closed	Action amalgamated into 7.1
6.4	Arrange a practical demonstration for AMT-CTPP initiatives in action. Overview plus diagrams of data flows.	Pan Teng ADHA / Cath Koetz GS1	Closed	Action amalgamated into 7.1
6.5	Coordination of deep dive workshops separately for recipient and supplier NPC users to further investigate usage concerns	Cath Koetz / Mark Blitenthall	Closed	External workshops held 17 th & 19 th August
6.6	Improving visibility - NPC Recipient outreach to enhance visibility of recipient information that can be accessed via GS1 and Recipient websites (data usage, requirements, programs, contacts etc.)	Cath Koetz- GS1	Closed	New Australian Healthcare Recipient webpage created by GS1 (https://www.gs1au.org/for-your-industry/healthcare/npc-in-

				healthcare/australian-healthcare-data-recipients?viewmode=0 Further enhancements require Recipient action to be completed
6.7	Development of report informing suppliers which recipients are using/have accessed their data within the previous month	Deb Prince & Murray Robb - GS1	Open	WIP item as it is challenging to create such a report due to the diversity of how recipients access and use the data
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.. (This action is an amalgamation of 3.2, 6.3, 6.4)	Pan Teng ADHA	New	(This action is an amalgamation of 3.2, 6.3, 6.4)
7.2	Implementation including new or amended fields resulting from the Healthcare Dataset Review 2020/21	Murray	New	
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 with Recipients	September 2022	Details to be determined. 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/Mark Blitenthall GS1		1/12/2021 Suggestion for discussion with HCNPCAG to create a new document that reviews the use cases and incorporates these with 'value proposition'
7.5	Actions from Workshops to be shared with HCNPCAG for feedback to help define priorities	Cath Koetz GS1		1/12/2021 Prioritization exercise completed and presented at December 2021 meeting for final discussion prior to action

Meeting attendee summary

Name	Healthcare NPC Advisory Group - Meeting 09 - 4Q 2021
-------------	--

Meeting details

Date	Time	Location
1 Dec 2021	2pm-4pm AEDT	Remote dial in – Zoom details in meeting invitation

Attendees	
Name	Organisation
Annette Fennell	3M
Chris Hawke	Device Technologies
Gary Hartley	GS1 New Zealand
Iain Murray	Symbion
Ian Boyle	Queensland Health
Ian Bull	ACT Health
John Armstrong	WA Health
Julie Domanski	NT Health
Kamlesh Lal	HealthShare Victoria
Michel Hulzebos	Healthscope
Michelle van Wijk	TGA
Pan Teng	Australia Digital Health Agency
Peter Wilson	Uniting Care Health
Raji Kadikatla	B.Braun
Reuben Daniels	Queensland Health
Ryan Mavin	ACT Health
Sandy Giles	Cook Medical
Sarah Kong	Australia Digital Health Agency
Sarah Lankshear	Stryker
Sharon Couper	Pfizer
Stanley So	HealthShare Victoria
Trent Barrett	JnJ Medical
Yuki Tanubrata	Olympus
Andrew Brown	GS1 Australia – Services Engagement
Catherine Koetz	GS1 Australia – Industry Engagement (Healthcare)
Nigel Fuller	GS1 Australia – Industry Engagement (Healthcare)
Margo Fraser	GS1 Australia – Industry Engagement (Healthcare)
Murray Robb	GS1 Australia – NPC Service
Mark Blitenthall	GS1 Australia – Services Engagement

Marcel Sieira	GS1 Australia – Chief Customer Officer
Marian Makram-Perkins	GS1 Australia – Marketing
Deborah Prince	GS1 Australia – NPC Service

Apologies received from	
Elizabeth Donohoo – Australia Digital Health Agency	
Deepti Shukla – WA Health	
Anojan Sivarajah – NSW Healthshare	
Paula Bandini – Boston Scientific	
Andy Dalton – Ramsay Health Care	
Daniel McKavanagh – Queensland Health	
Rosanna Cimbora – Seqirus	
Kush Gupta – JnJ Medical	
Will Monaghan – NT Health	
Robert Webb – Cook Medical (will be late)	
Adelaide Terlich – Arrotex	

End of document