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SPECIAL FEATURE - GS1 HEALTHCARE CONFERENCE IN ARGENTINA

Global GS1 Healthcare Conference
23-25 April 2013 - Buenos Aires, Argentina
ANMAT leading the way for traceability

GS1 Argentina hosted the 23rd Global GS1 Healthcare Conference from 23 to 25 April in Buenos Aires, with the theme of “Improving patient safety through visibility in the supply chain”. The conference focused on the latest advances in traceability of medicines and medical devices which optimise the supply chain and patient safety.

More than 300 attendees from over 25 countries joined the event, representing manufacturers, distributors, drugstores, pharmacies, hospitals, associations, universities and regulatory agencies.

During the opening, speakers from the National Institute for Retirees and Pensioners (PAMI) and the National Administration of Drugs, Foods and Medical Devices of Argentina (ANMAT) stated that traceability had become a state priority in Argentina.

In 2011, Argentina introduced its National Drug Traceability System which required the placing of a unique identification number - complying with GS1 Standards - composed of the Global Trade Item Number (GTIN), Serial Number and tamper-evident features on the secondary packaging.

Maria José Sánchez and Dr. Maximiliano Derecho, ANMAT representatives, confirmed that ANMAT had now reached 75 million transactions reported in the National Traceability System. 247 manufacturers and 8,000 pharmacies reporting daily transactions, as well as 450 distributors reporting the reception and shipping of their pharmaceutical products all of which enable full traceability of each drug in the supply chain.

Dr. Luciano Di Cesare, Executive Director INSSJP-PAMI, further commented that work was ongoing to implement electronic prescriptions of drugs. “PAMI has been using electronic prescription of drugs since 2011 and rewards physicians who implement this system”, he said. This measure aims to reduce errors that occur when performing manual prescriptions and also ensures patient safety.

Numerous local manufacturers, wholesalers, distributors and stakeholders took the stage to comment on their initiatives and to explain how GS1 Standards are used to identify and trace medicines.

Pfizer presented the implementation roadmap and benefits of serialisation, spanning from detecting counterfeit and stolen products to facilitating product recalls and providing real time track and trace information.

Suizo Argentina, an Argentinian wholesaler, pleaded for more standardisation in order to reap the benefits for the healthcare supply chain, whilst admitting that commitment from all stakeholders was the key to success.

FAICO, a surgical instrument manufacturer, stressed the importance of using GS1 DataMatrix for the identification and tracking of surgical instruments.

Realising the importance of traceability, Colombia is following the path with INVIMA, having launched a pilot to trace pharmaceutical products from the manufacturer to the pharmacy. The pilot included the participation of 16 national and multinational pharmaceutical companies, 8 wholesalers, 2 pharmacy chain stores, 13 independent pharmacies and 5 hospitals. The objective of the pilot was to validate a traceability model according to local requirements and to recommend a roadmap for implementation. INVIMA will draft a regulation proposal based on the results of this successful pilot.
Implementation reality in hospitals

Local hospitals commented their initiatives, and explained how GS1 Standards ensure patient safety. The Argentinian Institute of Diagnosis and Treatment (I.A.D.T), Hospital Alemán, Hospital Italiano, Hospital “Prof Dr. Juan P. Garrahan” and Sanatorio Güemes presented how they have been implementing the provisions of ANMAT’s National Drug Traceability System by applying GS1 Standards: Global Location Numbers (GLNs), GTINs, Serial Number, Batch or Lot Number, and Expiration Date. They discussed their procedures and plans to ensure full traceability of single unit doses of products when they fractionate, reconstitute, or repackage the products, using GS1 Standards to ensure the five patients’ rights.

Two Brazilian hospitals representatives travelled to Buenos Aires to present the traceability solutions implemented in their institutions. The medication process in hospitals is complex with many areas and professionals involved and numerous steps and manipulations. "There are many potential risks for medication errors in hospitals, either caused by re-labelling, the varieties of dosage forms, the look alike drugs, or the numerous manual processes, but some of these mistakes are avoidable with proper identification of products, patients and caregivers."

“Product waste can be reduced by 75% using GS1 Standards, by improving expiration date management”

These pioneers from Hospital Alemão Oswaldo Cruz and Hospital Grupo Santa Joana showed the participants how GS1 Standards have helped them reduce medications errors whilst at the same time increasing the efficiency of the logistics process by applying GS1 DataMatrix on the smallest unit (single unit package) and tracing it to the patient bedside.

They were able to show a reduction of 75% of product waste thanks to improved expiration date management, a reduction of errors due to manual processes, as well as process optimisations.

Are you ready for Unique Device Identification?

Jay Crowley, Senior Advisor for Patient safety at U.S. Food and Drug Administration, urged the manufacturers to get ready to implement Unique Device Identification (UDI). “The final rule is imminent”, he said to the audience.

Mandated by Congress in the FDA Amendment Acts of 2007, the UDI rule will require that manufacturers label their products at each packaging level with both human and machine-readable identifiers. Manufacturers will also need to submit requested product data to the US FDA via the Global Unique Device Identification Database (GUDID).

The UDI will be composed of:

- The Device Identifier (DI) containing static information: product number relating to manufacturer, make, model, and catalogue number
- The Production Identifier (PI) containing dynamic information: Serial Number, Batch or Lot number, and Expiration/Manufacturing Date.

The UDI will be created and maintained by the manufacturer.
The US FDA will take a risk-based approach, with a first implementation requirement for class III medical devices, one year after publication of the final rule.

Many manufacturers are already using Unique Device Identifiers, which in the GS1 System of Standards correspond to the Global Trade Item Number (GTIN) combined with relevant Application Identifiers (AIs).

Although the US FDA rule will be the first one to be adopted and implemented, it fits into a broader initiative aiming to develop and to implement a globally harmonised system for medical device identification led by the IMDRF (International Medical Device Regulators Forum). Hence, manufacturers, especially those operating globally, will need to consider the broader impacts of UDI on their organisations.

The traceability pilot undertaken by a team of visionary stakeholders, AbbVie, GHX, McKesson, and US Department of Veteran’s Health Administration (VHA), with the support of GS1 has shown that the use of serialisation can enable end-to-end visibility across the supply chain, from manufacturer to dispensing pharmacy.

Cases were serialised using GS1-128 linear bar codes with Global Trade Item Number (GTIN) and the Serial Number, whilst the secondary package was serialised using GS1 DataMatrix also containing GTIN and Serial Number.

GHX acted as an external data repository to which AbbVie, McKesson and VHA were connecting.

EPCIS events were used to track products (serialised cases) through the supply chain.

The pilot concluded that the events posted to GHX’s data repository from AbbVie and McKesson allowed the chain of custody for the serialised case to be traced prior to VHA receipt.
IMDRF publishes a draft guidance on UDI system for medical devices

The International Medical Device Regulators Forum (IMDRF) released its revised draft guidance on UDI in March 2013. This draft guidance is open for comments until 31 August 2013. GS1 Healthcare will provide the collected feedback from their members.

The IMRDF will work on a consolidated version of the guidance to be presented for adoption by their Management Board in November and for publication by the end of 2013.

This revised guidance will be a follow-up to the original document released in September 2011 by the Global Harmonisation Task Force (GHTF).

Read more

GS1 to lead the Track and Trace Systems Working Group

GS1 will lead the Track and Trace Systems Working Group (TTWG) of the APEC (Asia Pacific Economic Cooperation) project on supply chain integrity. This project is a 5 year project running from January 2013 to December 2017, consisting of nine different Work Groups:

- Single Point of Contact
- Manufacturing practices
- Clinic and pharmacy purchasing practices
- Detection technologies
- Internet sales
- Distribution practices
- Importing and exporting practices
- Surveillance/Pharmacovigilance
- Track and trace systems

The main tasks of the WGs will be:

- Carry out a Gap assessment of relevant regulatory practices affecting supply chain integrity across APEC (current regulatory status / need for improvement)
- Develop an integrated Strategic Roadmap for medical product integrity and supply chain security and its Recommendations
- Implement a comprehensive global training program with the relevant APEC subcommittee, including development of tool kits, workshops, guidance documents and others

The Strategic Roadmap, the Recommendations as well as the training program will be an integrated exercise consolidated in the outcome of each WG’s work. The target audience is global, including regulatory authorities, inter-government organisations and industry from APEC economies and from other non-APEC regions.

The Track and Trace WG (TTWG), can be expanded to include a couple of additional participants with a sound expertise in pharmaceutical traceability in Asia Pacific.

Should you need more info or wish to join this project, please contact Géraldine Lissalde-Bonnet at g.lissalde@gs1.org

Denmark – Amgros extends tender requirements

Amgros, the Regions’ pharmaceutical organisation in Denmark, has the objective of centralising the purchase of pharmaceuticals to create economies of scale and administrative savings.

In 2012, Amgros mandated that all secondary packages of drugs needed to be identified with a Global Trade Item Number (GTIN) in a GS1 Data Carrier (EAN-13 or GS1 DataMatrix). In May 2013, Amgros extended its requirements and announced that tenders for framework agreements from 1 April 2014 to 31 March 2015 will also require a GTIN encoded in EAN-13 or GS1 DataMatrix for primary packages of injections and infusions.

Primary package requirements will then be active for drugs for oral use, injection and infusion as well as for topical medicines.

Read more

EU - Stakeholders move ahead with the European Stakeholder Model (ESM)

Taking a new step in the fight against counterfeit medicines, the EFPIA (European Federation of Pharmaceutical Industries and Associations) signed a five-year contract with IT service provider Solidsoft to implement the European Medicines Verification System (EMVS).
The founding principle of the ESM approach is that each pack of medicine is checked individually before it is dispensed to the patient, ensuring that the patient receives a genuine product.

The system will support the use of GS1 Standards (GS1 DataMatrix containing GTIN, Expiration Date, Batch or Lot Number and Serial Number) and PPN.

Dave Ricks, Senior VP and President Lilly Bio-Medicines and EFPIA board member said that “the announcement marks an important milestone in the development of a pan-European system to effectively combat counterfeit medicines. Patient safety is paramount for the European Stakeholder Model partners. This is why we are proactively investing to build the first elements of a medicines verification system for Europe. Working in partnership with governments, we intend to deliver a system that is robust, secure and cost-effective.”

Although still in the formative stage, the not-for-profit stakeholder organisation, called the European Medicines Verification Organisation (EMVO) will oversee the ESM.

The system is planned to be also composed by so-called blueprint systems, that can be rolled-out in a cost-effective manner on a national level.

Brazil - ANVISA issues a public consultation on identification and tracking of pharmaceutical products

ANVISA published its public consultation on pharma serialisation.

The proposal is to include a GS1 DataMatrix comprised of a national number provided by ANVISA, Serial Number and Expiration Date, and Batch or Lot Number. The new requirements are intended to be applicable 180 days after the publication of the final rule.

GS1 Brazil and GS1 Healthcare provided a joint answer to the public consultation on 9 May and suggested that ANVISA use the truly global GS1 System also in Brazil. This approach was supported by the Brazilian stakeholders. The input was acknowledged in a public meeting and the final rule is expected in the next weeks.

Saudi Arabia - Saudi FDA publishes a guidance document for pharmaceuticals

The Drug Sector in Saudi Food and Drug Authority (SFDA) believes that a standardised identification system for drugs from the manufacturer to the patient is imperative to comply with the increasing need for product integrity and traceability. The responsible department of the Saudi FDA is therefore urging all drug manufacturers in Saudi Arabia and international manufacturers exporting to Saudi Arabia to adopt GS1 supply chain standards.

All drugs’ markings must be upgraded from linear bar codes to GS1 DataMatrix bar codes.

The GS1 DataMatrix bar code must, at minimum, carry the GTIN (Global Trade Item Number), Expiration Date, Batch or Lot Number.

The new requirements must be applied by drug manufacturers on all type of pharmaceutical products (both human and veterinary drugs).

The SFDA published a circular stating the dates of implementation in two phases:

- Use of 2D bar codes with Batch or Lot Number, Expiration Date and SFDA code will be due on the 21 March 2015
- All of the above plus a Serial Number due on the 21 March 2016.
England – $390M fund to help hospitals move to “paperless” systems

The public sector in the UK has been challenged to “go-digital” by 2018. Nowhere is this challenge greater than in one of the largest public sector employers in the world, the National Health Service (NHS). To speed the transition to digital technologies, Health Minister Jeremy Hunt recently announced a fund of £260M ($390M) to enable hospitals to improve patient safety by implementing electronic patient records (EPR) and electronic prescribing systems.

GS1 UK has worked with the NHS for many years and the NHS is committed to using GS1 Standards for all coding systems. By October 2013 all NHS patients should be identified using a wristband carrying a Global Service Relation Number (GSRN) based on the patient’s NHS number encoded in a GS1 DataMatrix. This level of identification combined with electronic prescribing, which the Health Minister described as “computer-generated prescriptions sent by doctors directly to pharmacies, linked to bar codes unique to each patient” will play a huge part in cutting medication errors and improving patient safety.

Tracking paper-based patient records using EPC standards and RFID technology is becoming increasingly common in the NHS. GS1 UK is developing an application to support the transitional technologies to enable the move from paper-based systems to digital systems. GS1 UK anticipates that the use of digital pens and OCR technologies will form a major part of this transition and an application based on Global Trade Item Numbers (GTIN), Global Document Type Identifiers (GDTI) and Global Location Numbers (GLN) keys will support partners in delivering the solutions this fund is aimed to encourage.

Ireland – Host to eHealth week

eHealth Week 2013, the largest annual gathering of pan-European eHealth communities, was hosted in Dublin in May with two main events: the eHealth Conference, co-organised by the European Commission and Irish Government as holder of the Presidency of the Council of the European Union, and WoHIT (World of Health IT Conference & Exhibition) organised by HIMSS Europe.

Participating in eHealth Week were 73 exhibiting companies, over 160 speakers and some 2300 delegates from all over the globe. During the event GS1 Ireland hosted a Breakfast Briefing which included guest speakers from St James’s Hospital, MSD, and McKinsey & Company who talked about their “Strength in Unity” report findings. The briefing was an outstanding success with over 80 invited healthcare professionals attending, including many international delegates.

Download the McKinsey report “Strength in Unity: the promise of global standards in healthcare”

GS1 Healthcare honoured with Way-Paver award

During the last unSUMMIT for Bedside Barcoding that took place from 24 to 26 April in Orlando, Florida, GS1 Healthcare was honoured with the Way-Paver Award.

Established in 2006, The Way-Paver Award acknowledges the exceptional contributions of organisations and individuals who have helped clear the path and pave the way to a safer point of care with bar-code technology.

GS1 Healthcare was granted the award for its efforts in refining bar code standards, gathering and inspiring influential healthcare leaders in many countries and promoting best practices, essential for implementing BPOC (bar-code-enabled point-of-care).

GS1 Healthcare is the first truly global entity to receive this honour.

Mark Neuenschwander, cofounder of unSUMMIT commented: “Because of GS1 Healthcare’s path-clearing efforts, inestimable harm will be avoided to patients around the world, and countless lives will be spared death from preventable medication errors.”

Read the full Press Release
Over 40 global stakeholders endorse GS1 Healthcare standards

The GS1 System of Standards for Healthcare has won the endorsement of more than 40 leading Healthcare stakeholders from around the world.

Healthcare stakeholders expressed their strong support in a signed position paper endorsing the adoption of GS1 System as the global standards best suited for their industry. They took this action after McKinsey & Company published a report stating significant patient safety benefits and cost savings can be obtained by implementing and using one single global standard in Healthcare. (Source: McKinsey report, “Strength in unity: The promise of global standards in healthcare”, October 2012).

The stakeholders who are calling for that standard to be GS1 represent major manufacturers, distributors, and hospitals from around the world including the United States, Canada, Europe, Australia, and Japan. The companies that signed the position paper include some of the most recognised and respected companies in Healthcare.

“Global adoption of the GS1 Standards will clearly benefit patients and industry stakeholders worldwide” said Orlando Serani, Vice President, Global Business Services, Johnson & Johnson Health Care Systems, Inc.

Recognition award attributed to Frédérique Frémont

Early 2013, the GS1 Healthcare Provider Advisory Council introduced two awards:

1. the Best Provider Implementation Case Study Award, for provider organisations or individuals who would submit the best implementation case study

2. the Provider Recognition Award, for an individual who has contributed highly to the GS1 Healthcare work efforts over the years.

Frédérique Frémont is the first individual to receive the Provider Recognition Award for her long standing involvement in the promotion and implementation of GS1 Standards. She has been involved with GS1 for more than 10 years at both local and global levels. She was presented with the award during the 23rd Global GS1 Healthcare Conference in Argentina last April.

Frédérique has been instrumental in numerous and on-going implementations of GS1 Standards in the “Centre Hospitalier Intercommunal Robert Ballanger” in France. She continues to drive implementation initiatives that have been proven to benefit patient safety and to control costs, namely in the field of traceability within hospitals.

Congratulations on this well-deserved award!

Submit your case study or your candidature for the awards by contacting janice.kite@gs1.org

eCom Healthcare harmonisation group launched

According to the latest eCom survey, GS1 eCom standards (EANCOM and GS1 XML) are used in the healthcare sectors by multiple countries. In support of this, some Member Organisations have developed implementation guides that are now used locally. No profiles or guidelines were however developed on a global or regional level so far.

The eCom Healthcare Harmonisation Group has issued a Call to Action to recruit users from the healthcare industry from everywhere in the world with the view to harmonise the eCom messages for the Healthcare sector.

For more information and instructions to join this group, please contact Anders Grangård from GS1 Global Office at: anders.grangard@gs1.org. The GS1 IP Policy is not a requirement to participate in this group.
Chuck Biss receives exceptional leadership award

We are proud to share with you the great news about our colleague Chuck Biss, GS1 Healthcare AIDC expert, who was honoured with the 2013 INCITS Award for Exceptional International Leadership.

The InterNational Committee for Information Technology Standards (INCITS) is the primary U.S. focus of standardisation in the field of Information and Communications Technologies (ICT). As such, INCITS also serves as ANSI’s Technical Advisory Group for ISO/IEC Joint Technical Committee 1 (JTC 1). JTC 1 is responsible for international standardisation in the field of Information Technology and is the governing “parent” of ISO/IEC SC 31, the AIDC Subcommittee of which Chuck Biss is presently Chairman.

This award (which Alan Haberman was a recipient of in 2007) is an honorary award presented to no more than two participants for their exceptional leadership of an international committee.

Congratulations from all of us to Chuck Biss for this acknowledgement of his work in ISO – we are very proud to have him working for GS1.

New stakeholders video released!

Find out more on the benefits of adopting one single global standard in Healthcare from different stakeholders: McKinsey & Company, Eucomed, NEHTA, U.S. Food & Drug Administration, B.Braun, Johnson & Johnson, McKesson, Pfizer, St James’s Hospital.

Watch the video on Youtube

GS1 Healthcare publishes a discussion paper on the use of SMS for drug authentication

Use of SMS solutions in healthcare and their potential benefits to increase patient safety can be viewed as promising. A number of solution providers have developed proprietary SMS solutions that have been adopted by a few pharmaceutical manufacturers and wholesalers, and almost exclusively for those products destined for Low-Medium Income Countries (LMIC).

The LMICs have been widely reported to be a major source or recipient of falsified pharmaceuticals. Reducing and/or detecting falsified medicines are therefore a key driver for deployment and use of Mobile Authentication Services solutions. But while these solutions may be suitable for specific drugs in specific countries, they are not scalable on the broader, regional or even global level as they are often proprietary and not standards-based. This document acknowledges that SMS solutions represent one of several possible technologies that can strengthen the likelihood that only genuine products will reach patients.

It raises awareness on the fact that, based on limited adoption to date of SMS applications in Healthcare, the strength and robustness of these solutions have not been demonstrated. In addition, on a practical level, manufacturers remain technically challenged by the application of these codes to the various types of primary or secondary packaging.

The discussion paper concludes that it may be ill-advised for any regulator or government to mandate the use of SMS technology for product verification purposes without a strict regulatory framework.

Read discussion paper

Austria - Electronic Data Interchange (EDI) guidelines improve logistics in Healthcare

In cooperation with Datacare and GS1 Austria, the “Pharma EDI Working Group” has developed new guidelines on the use of EDI messages in the Austrian healthcare sector.

So far, only the sending of the purchase order message (ORDERS) had been used between industry and wholesaler. But since April 2013, not only the purchase order message but also the purchase order response message (ORDRSP), the dispatch advice message (DESADV) and the invoice message (INVOIC) are being interchanged.

Companies are now collecting, processing and distributing information more efficiently, increasing patient care.

Download the latest message standards at: www.gs1.at/index.php/downloads
Australia - HealthShare aligns with National Product Catalogue and GS1 Locatenet

To benefit its network with the continuous improvement of the supply of medicines, medical devices and consumables, HealthShare, along with NEHTA (National E-Health Transition Authority), GS1 Australia and other Health jurisdictions, have aligned their procurement business processes for the use of data from the National Product Catalogue (NPC) and the location information from GS1 Locatenet.

The NPC and GS1 Locatenet benefit suppliers and purchasers by enabling electronic transmission of accurate item, pricing and location data and by allowing procurement departments to access a greater range of suppliers and products.

They also offer suppliers a platform to market their products to a wider market, replacing the current manual and unverified communication from their customers.

GS1 Australia’s CEO Maria Palazzolo said: “the NPC and GS1 Locatenet provide the foundations for Australian healthcare to achieve continued supply chain reform, and ultimately improve patient safety”.

“Both of these tools were developed specifically for Australia’s healthcare sector, to facilitate direct electronic communication between organisations wanting to accurately and efficiently source and supply pharmaceuticals, as well as medical consumables, equipment and devices,” further commented Ms Palazzolo.

For assistance or more information, contact GS1 Australia (gs1net@gs1au.org), NEHTA (supplychain@nehta.gov.au) or HealthShare (cdmt@hss.health.nsw.gov.au).

Ireland - 32nd Healthcare User Group launched

On 19 April GS1 Ireland hosted the first Irish Healthcare User Group (HUG) meeting and became the 32nd GS1 HUG to launch globally.

Participants include HSE Procurement (the Irish government health agency), HSE Patient/Medication Safety, St James’s Hospital, St Vincent’s Hospital, Galway Clinic, DCC Vital, Pfizer, Molnlycke, DePuySynthes and IPHA (the Irish association of international research-based pharmaceutical companies).

The HUG’s mission is to increase patient safety and improve efficiency and value in the delivery of healthcare (public and private) in Ireland through the use of global standards. “The launch of Ireland’s Healthcare User Group illustrates the significant progress made in the adoption of GS1 Standards in a number of areas of healthcare in Ireland. The HUG can further facilitate communication about the adoption of GS1 Standards for patient safety and efficiency savings, issues that are now central to the Government’s health strategy,” stated Vincent Callan, Co-Chair of HUG IRL on the occasion of the launch.

For more information about GS1 Healthcare activities in Ireland please contact siobhain.duggan@gs1ie.org.

UK - kicks-off first Healthcare annual conference

The Ricoh Arena is home to Coventry City Football Club and played host to GS1 UK’s first exclusive Healthcare conference on 1 May.

Over 180 delegates demonstrated the draw of an excellent line-up of speakers at the event, with more than half of the attendees coming from NHS Hospital Trusts. The ability to talk directly to a large number of hospital decision makers in one place has proven invaluable.

Jim Spittle (Chairman, GS1 UK) and Gary Lynch (CEO, GS1 UK) opened proceedings with an overview of GS1 and the challenges facing the NHS. The keynote address was delivered by Lord Hunt of Kingsheath, President of the Healthcare Supply Association and shadow spokesman on Health in the House of Lords. Lord Hunt underlined the importance of supply chain standards in helping the NHS to achieve £20Bn in efficiency savings before 2015.

Further speakers from 3M, Bunzl, the Department of Health, the Medicines and Healthcare products Regulatory Agency (MHRA) and the NHS Commercial Medicines Unit covered the key themes for UK Healthcare: Unique Device Identification (UDI), the Falsified Medicines Directive (FMD), the usage of data pools in Healthcare and GS1 Standards in care delivery.
UPCOMING EVENTS

GS1 Healthcare speaking at the following events

GLC’s 2nd Annual Pharma Packaging and Labelling Forum
19-20 September 2013 in Vienna, Austria
http://www.glceurope.com/conferences/pharma-packaging-labelling-forum

Medical Device UDIs and Traceability
24 - 26 September, 2013 - Munich, Germany
http://www.udisandtraceability.com

2nd Annual Pharma Anti-Counterfeiting 2013
8-9 October 2013 in London, UK
http://www.virtueinsight.com/pharma/2nd-Annual-Pharma-Anti-Counterfeiting-Congregation-2013/

Informa Life Sciences’ 7th Annual Labelling Compliance for Medical Devices and IVDs Conference
9-10 October 2013 in London, UK
http://www.informa-ls.com/event/Labelling2013

ABHI 2013: The MedTech Conference
15-16 October 2013 in London, UK

CPhI Worldwide Pre-Connect Conference 2013
21 October 2013 in Frankfurt, Germany
http://www.cphi.com
24th Global GS1 Healthcare Conference
1-3 October 2013 - San Francisco, USA

Invitation to San Francisco, USA
"GS1 Standards in Action"

Register now!