5th May 2023

Via email to efracom@parliament.uk

GS1 UK Response to: Collection of Private Healthcare activity data by NHS England (ADAPt)

GS1 UK is a not-for-profit membership body that sets and enables global standards across industry. Our standards are used ten billion times per day and form the basis of a global business language that identifies, captures and shares key information on products around the world – with the best known being barcodes and QR codes.

GS1 standards have formed the backbone of traceability and supply chain logistics for over 50 years across many different industries. Standards have the power to "join the dots" and help create a fully digital and interoperable health ecosystem in the NHS, saving lives and resources.

In healthcare, GS1 standards enable the globally unique identification of every person, every product and every place. From product barcodes to patient wristbands, our standards have the power to deliver change now and in the future, improving patient safety, increasing efficiency and reducing unwarranted clinical variation.

We welcome the opportunity to respond to the ADAPt consultation and support the drive to join up data from across different health service providers. We believe this can best be done by utilising existing standards within the NHS. We have set out our arguments and details in response to the questions below.

If you would like any additional information or clarity, please contact our Head of Policy using the details at the end of this document.

Kind regards,

Glen Hodgson

Head of Healthcare

GS1 UK

Please provide any comments on the vision, aims and expected outcomes of the ADAPt Programme (Section 3)

Vision

GS1 UK agree that alignment of data standards across private care and the NHS is needed to enable data sharing. Through a consistent approach to data capture via the use of common standards, it will be possible to share data between systems and organisations.

GS1 standards are already being used in acute care settings to enable the unique identification of every person, every product, and every place to improve traceability and patient safety. This includes patients and staff; medications, medical devices, assets and equipment; and locations such as a hospital site, ward, or bed bay.

The 2016 Department of Health and Social Care Scan4Safety programme, saw the implementation of GS1 standards across six acute NHS trusts in England. The programme results were showcased in the Scan4Safety report, and many acute trusts in England are using GS1 standards for their Scan4Safety programmes to improve patient safety and traceability. National programmes for Scan4Safety using GS1 standards are also in place in Scotland and Wales.

Supporting Staff Identification

The GS1 Global Service Relation Number (GSRN) is a globally unique number (standard) used for patient and staff identification.

Aligning staff identification numbers with a GSRN will create an identification number that is globally unique to the specific clinician. Records can then be accurately shared as part of a single staff repository across private and NHS care settings with confidence of accuracy. Relevant staff credentials can be associated with the record against the GSRN and used to maintain an accurate record for audit and traceability purposes.

Using the GSRN for staff identification could easily align and support activities surrounding the further development of a digital staff passport to facilitate movement and recordkeeping between organisations.

Traceability and national registries

In order to record and report activity, quality and outcomes, the data collected needs to be consistent across all relevant data points. GS1 standards enable data to be captured in a single format for procedural information. For example:

- o Products/devices used in a procedure (using the GS1 Global Trade Item Number – GTIN – already used by more than 90 per cent of global medical device suppliers)
- o Location (using the GS1 Global Location Number – GLN – can be used to distinguish between a site where a procedure has taken place i.e. a private hospital versus and NHS trust site)
- o Patient (using the GS1 Global Service Relation Number – GSRN – associated with the patient NHS number to enable accurate positive patient ID)
- o Staff (using the GSRN – to identify the clinician(s) involved in the procedure)

Aims

GS1 UK support the aim to deliver complete health records across both private and NHS funded care. By using each of the GS1 standards in conjunction, it is easier to link data across platforms to develop a full picture of a patient's care journey with a true and complete record.

In addition, information can be linked to national registries to improve traceability, and provide an audit trail to better monitor patient outcomes data. An example of this is the Surgical devices and Implants Information system (SDIIS) as part of National Perioperative Data Standard Programme.

Expected outcomes

NHS data standard, DCB1077 for patient identification, is already in place and was established to standardise patient identification across the NHS. This includes the use of the NHS number in line with the GS1 GSRN to make it globally unique.

The NHS number should be used for identifying patients by all healthcare

organisations (including private hospitals), and not the organisation's own medical record number (MRN). Beyond use in internal systems, the MRN can no longer be guaranteed as unique to the patient once associated records need to be shared outside of the organisation. This increases the risk of misidentification. Use of the MRN versus the NHS number, has been highlighted in patient safety investigations by [The Healthcare Safety Investigation Branch](#) (i.e. [for patient identification](#)) and [The Independent Medicines and Medical Devices Safety Review](#).

Using the NHS number, would enable accurate patient identification to mitigate identification errors and allow associated records to be standardised and interoperable across organisations.

Standardising the identification and capture of all procedural information alongside this (for patients, clinicians, products/devices, and locations), will enable comparable indicators to be derived from records. This too would provide data consistency, making it easier to assess data trends in order to better monitor patient outcomes effectively.

7. Please provide any comments on implications or concerns relating to the organisational aspects of this change proposal, such as policy or business processes (Section 5)

The NHS data standard for patient identification, DCB1077, which includes the NHS number, is mandatory for all NHS trusts implementing automatic identification and data capture (AIDC), however, adherence is not monitored or governed to ensure compliance.

For patient identification to be standardised across both private and NHS funded care settings, necessary data standards would need to be mandated for enforcement. This extends to all standards agreed as part of this consultation to ensure traceability and consistency is achieved.

8. Please provide any comments on implications or concerns relating to the technical aspects of this change proposal, such as changes to systems, data flows or standards (section 5)

Any changes will be reliant on the capacity of necessary systems to be able to capture and hold the desired standards. Solution providers (primarily providers of electronic patient record systems and inventory management systems) will need to

be engaged and mandated by the same standards to ensure full compliance.

GS1 UK has established an approval process which exists to validate solution provider systems for applicable GS1 standards. Any systems approved by GS1 UK as "GS1-compliant" have demonstrated capacity to hold necessary GS1 standards. Certification is issued as confirmation which can then be requested by healthcare provider organisations (such as NHS funded trusts and private hospitals), as a procurement tender requirement.

12. Do you have any further comments?

The benefits of using GS1 standards for unique identification of every person, every product, and every place, has been proven to deliver patient safety and traceability benefits. The Scan4Safety programme provides evidence of this and has since been widely referenced in NHS policy and healthcare investigation recommendations including: The Digital Clinical Safety Strategy and The Independent Medicines and Medical Devices Safety Review.

Standardisation of all procedural information across private and NHS funded care – including patient and clinician identifiers – would support the integration of data required for national outcomes registries. All applicable healthcare provider systems; such as those for electronic patient records, theatre management, inventory management; would need to accommodate and comply with required data standards.

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