The Netherlands

Sharing best practice on the implementation and use of GS1 standards in hospitals

Challenge

GS1 standards are increasingly being implemented in hospitals across the globe. By scanning barcodes assigned to products, people, and places, it becomes possible to precisely track healthcare processes. However, hospitals - and even different departments within those hospitals - often approach the implementation of standards in different ways. What this means is that those involved in these projects inadvertently "reinvent the wheel"; failing to take lessons from previous implementations. This then reduces the efficiency with which standards are implemented and the speed at which benefits are realised.

Introduction

In recent years, global healthcare regulations on pharmaceuticals and medical devices - which includes implants - have become increasingly aligned to global standards for product identification. Regulatory agencies and jurisdictions in countries including Australia, Canada, the United States, the United Arab Emirates and in nations across Europe acknowledge the necessity of global barcoding standards in healthcare for procurement and traceability reasons. In addition, there is growing evidence for the efficacy of barcode solutions in improving overall patient safety. Teams at hospitals often work in isolation in implementing these standards, even though other organisations may have already successfully carried out a similar project and have lessons to share. To avoid this, GS1 member organisations may have already successfully collected and shared data in previous implementations. In the Netherlands specifically, there is a goal to ensure data from at least 10 hospitals has been collected and added to the dashboard by the end of 2022. Those from the team at GS1 Netherlands are going on a tour of hospitals to discuss the dashboard with healthcare workers involved in scanning processes.

Approach

GS1, in partnership with IT services and consulting firm PinkRoccade, has developed the Hospital Implementation Dashboard (HID). The dashboard brings together information on how hospitals have implemented and are using GS1 standards. It is being used to support knowledge sharing between hospitals, meaning teams can learn from one another on how to reap the benefits of such standards.

Sharing knowledge

“What we’re trying to show is what use cases there are for scanning, whether patient scanning, medical device scanning, pharmaceutical scanning, asset scanning, you name it,” explains Hans Lunenborg, sector manager healthcare at GS1 Netherlands. “My main aim is to show how other hospitals can help you in implementing; to learn from each other, network.”

Teams at the GS1 member organisations help hospital staff to complete the relevant data, to help reduce administration burden. This means the data on the dashboard is comparable between organisations. It also provides an opportunity for GS1 to forge closer connections with hospital staff, and to lend assistance and advice on implementation generally.

With the insights the tool provides, hospitals should be able to deploy standards more broadly and more efficiently, thus enabling improvements in patient safety and increasing operational efficiency. The dashboard helps give a sense of the variety of settings in which hospitals can valuably roll out the use of GS1 standards.

Next steps

The pilot of the dashboard in Denmark, the Netherlands, the United Kingdom and Japan has shown it can offer valuable insights into how to increase the use of barcodes in healthcare settings.

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In the longer term, it will also be possible to include data from other institutions on the HID - that might include, for example, laboratories and extramural institutions. Scanning barcodes is becoming increasingly important following the May 2022 passage of the European In Vitro Diagnostic Regulation (IVDR) legislation. By using the tool, it’s possible to create a roadmap of
what still needs to be done in the field of, among other things, diagnostic material.

In the meantime, GS1 member organisations are keen to collect data from more and more hospitals. “I want to have this dashboard on a local level, the regional level and then on the global level,” says Mr Lunenborg.

“Ultimately, we want to use the insights the HID tool provides to help hospitals, both nationally and internationally, to learn from each other’s best practices.” He encourages any hospital interested in sharing data to contact their local GS1 member organisation.

Conclusion

Understanding the current use of GS1 standards in healthcare – who is doing what, how, and where – should assist all those involved in the sector. It will mean lessons are shared, including on how to most effectively implement such standards.

The HID tool should help hospital teams learn from each other. In a world in which the amount of data is growing rapidly, GS1 standards can help by providing a common language to identify, record and share supply chain data. This way, important information is accessible, accurate and easy to understand. By helping hospital teams understand how best to implement standards, the HID supports the faster use of barcode scanning to improve efficiency and patient safety.