



# *Automation Pilot in logistic process in Public Health System*

*Jose Luis San Juan – GS1 Chile*

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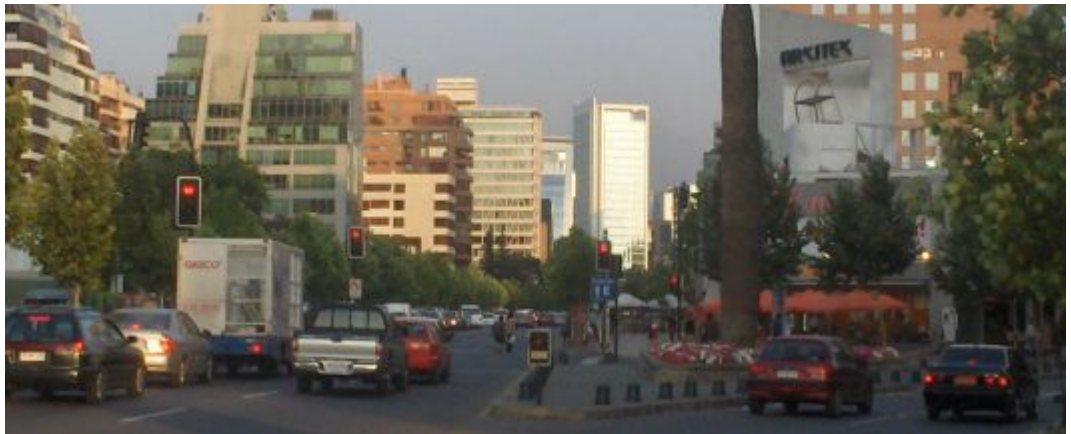


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# GENERAL REVIEW



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- 25% of products are lost
- Low level of control in acquisitions
- Lack of standard codification
- Some processes aren't sufficiently clear
- Lack awareness of the problem
- Misunderstanding between the chain's parts
- Increase of requirements by AUGE Plan (Universal Access to Explicit Guarantees)
- Greater logistic exigencies



### Logistic Objectives:

- To develop experiences of the readeness of bar codes throughout the supplying chain
- Integral solution that involves the units of supplying, pharmacy and the diverse clinical services of the establishment
- Reduction of inventory thanks to a more exhaustive control



### Process Objectives

- Increase the control of administered medicines in the patients (Increase security)
- To work with an only pharmaceutical product catalogue with a national classification level accepted
- To validate the consistency in the movement of medicines and to determinate cycle times
- Greatest improvements in the clinical area



### Management Objectives:

- Improvement of the management and greater control on the operation
- Reduction of the operational costs
- To know the costs associated each benefit (values of medicines)





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# Involved organizations and Institutions



( Public Health Institute  
Regulatory Body )



(National Institute of Cancer  
350 beds)



(National Center of  
Supplying )



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(Equipment)



(San Borja Hospital  
600 beds)

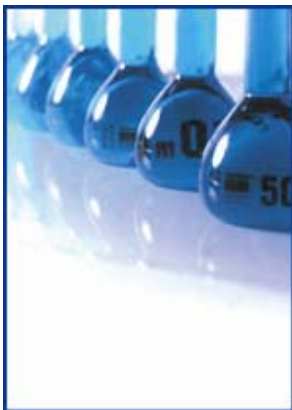




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# Scheme of the pilot and the supply chain

LABORATORY



GS1 128



Incorporation of technology in the supply chain of health



INSTITUTO NACIONAL DEL ANEP



EAN\*UCC 13  
DUN 14





## Benefits obtained through work of GS1

- Reduction of 80% of warehouse works reception (INC)
- Reduction of 38% of time using standard codification
- Increase from 0% in 80% in the amount of codified products
- Increase from 0% in 90% of products received with **DESADV** (Dispatch Advice)
- Improvement in the control of expiry date of products
- Data integrity of entrance and exit (real stock)
- Increase of the level of satisfaction in the internal clients
- Considerable reduction of digitations errors
- Availability of trustworthy data to make management



## Scene to today

- CENABAST (National Center of Supplying ) is in period of evaluation of purchase of a complete technological platform
- INC (National institute of the Cancer) already bought equipment, development applications and they are working
- Private clinics and public hospitals inform to their suppliers of the obligatory nature to give products codified correctly (GS1 cooperate with it )
- ISP and CATE are in synchronization process in order to become in a “Unique Catalogue”, to begin a test period of six months





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## Scene in the long term

- Cenabast controls all its operation with technological equipment and all their products are codified
- Shipments through **EANCOM** to hospitals (Dispatch (**DESADV**), and Reception (**RECADV**)) verifying against the order of the hospital
- Reception in internal warehouses using readers and data captures
- To dispatch by system to the internal pharmacies of the hospital
- Delivery of safe unit dose to the patient
- Automatic stock reduction, control of inventory and control of patient bill
- All institutions use the Unique Catalogue of GS1 - ISP



- Support of GS1 to Cenabast for **EANCOM** implementation.
- Revision by GS1 of 22.000 medicines
- Seminars
  - Iquique, Concepción and Temuco
  - With attendances of 250 people
- Work altogether with Hand Held Products (HHP) and Wireless & Mobile
- Committee of Work with Laboratories
- Publications on Health (GS1 Magazine)
- Breakfast of work in GS1 on Pilot Health





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## GS1 - Made work

### Breakfast of work in GS1 on Pilot Health



## Next Steps



- Chilean version of the HUG
- Commission of Work on Health
- Indicators of Management (more important KPI)
- To repeat the initiative in to the private sector
- To choice of right partner
- To work in order to incorporate EAN\*UCC 13 (box) and DUN 14 (pallet) to the logistic process of the chain
- To study the incorporation of EPC in the health area



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