Trust Standard Operating Procedure

Master Data & Catalogue Management SOP (PP04 v2)

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<tr>
<th>Issue Date</th>
<th>Review Date</th>
<th>Version</th>
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<tr>
<td>15th November 2018</td>
<td>15th November 2021</td>
<td>V2</td>
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**Purpose**

To identify the key activities for the management of supplier master data and product catalogues throughout the Trust.

**Who should read this document?**

All those who are involved in the management of master data and catalogue management, including Head of Supply chain, Data Analyst, E-proc helpdesk and Buyers.

**Key Messages**

Carter Report


http://staffnet.plymouth.nhs.uk/departments/technet(imp)/scan4safety.aspx

SOPs aim to achieve efficiency, high quality output and consistency of delivery, while reducing miscommunication and failure to comply to industry or Trust regulations.

**Core accountabilities**

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<th>Production</th>
<th>Head of Supply Chain &amp; E-Procurement</th>
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<td>Procurement SMT Meeting</td>
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<td>Ratification</td>
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**Links to other policies and procedures**

- P2P Policy PP01 v.1
- New Product Information SC02
- Tendering Contracting SOP PP02 v.1
- Product Recall and returns SOP SC04

**Version History**

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<tr>
<th>Version</th>
<th>Date</th>
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<tr>
<td>1</td>
<td>14th September 2017</td>
<td>Ratified by Head of Supply Chain &amp; e-Procurement on behalf of Chief Procurement Officer and published Trust-wide</td>
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<tr>
<td>2</td>
<td>15th November 2018</td>
<td>Ratified by Chief Procurement Officer and published Trust-wide</td>
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The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.
Standard Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

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### Appendices

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TRW.PRO.POL.1113.2 Master Data & Catalogue Management SOP
1 Purpose and Scope

The purpose of this SOP is to identify the key activities in master data and catalogue management throughout the Trust.

It should be applied across the Trust, with particular relevance to Procurement and Supply Chain functions.

2 Definitions

- **SOP** – Standard Operating Procedure
- **CPO** – Chief Procurement Officer
- **DoF** – Director of Finance
- **HSCEP** – Head of Supply Chain & E-Procurement
- **PO** – Purchase Order
- **GDSN** – Global Data Synchronisation Network
- **DA** – Data Analyst
- **HOP** - Head of Procurement
- **RCA** – Root Cause Analysis
- **GS1 UK** – The governance body overseeing the business standards
- **GLN** – Global Location Number
- **GTIN** – Global Trade Item Number
- **GDSN** – Global Data Synchronisation Network

3 Regulatory Background

The [Department of Health’s eProcurement strategy](#) (as published April 2014) mandates the use of GS1 standards in every NHS England Acute Trust to increase efficiencies and significantly improve the quality and safety of care.

4 Key Duties

**Non-Pharmacy**

- Head of Supply Chain & e-Procurement – **accountable** for Supply Chain, logistics, Purchase to pay electronic systems ensuring products are available to order and are delivered in a timely manner to support patient care
- Lead Data Analyst – **responsible** for master data, ensuring product catalogues are appropriate and up-to-date including accurate pricing and product information
- Purchasing Systems Team – **consulted**, supporting the Lead Data Analyst by making changes to master data as requested
- Buyer – **responsible** for implementing the contract that generates updated product catalogues received from suppliers. **Informed** by users or the Lead Data Analyst of data issues.
- Supplier – **responsible** for the provision of product master data. **Accountable** for the accuracy of their product master data
- User – **responsible** for ensuring the validity of their requisition and **responsible** for escalating any issues identified by the supplier to the buyer.
Pharmacy

- Chief Pharmacy Procurement and IT Manager – accountable for Pharmacy Supply Chain, logistics, Pharmacy electronic systems ensuring products are available to order and are delivered in a timely manner to support patient care using GS1 standards.
- Pharmacy IT - responsible for importing master data and making amendments are requested.
- Assistant Technical Officer – responsible for adhering to the contract that generates updated product catalogues received from suppliers. Informed by users or the Lead Data Analyst of data issues.
- Supplier – responsible for the provision of product master data. Accountable for the accuracy of their product master data.

5 Monitoring and assurance

Non-Pharmacy

- Accountability for adherence to this procedure will be monitored by the Head of Supply Chain & e-Procurement (HSCEP)
- Lead Data Analyst (LDA) will be responsible for ensuring this procedure is followed operationally
- Adherence to the identified procedure will be monitored through regular reviews with the HSCEP, LDA and Buyer
- Key Performance Indicators (KPIs) will be implemented with Service Level Agreements (SLAs) and monitored by the Purchasing Systems Team (PST) for service variances.
- KPIs that identify breaches in SLAs will be reported to the Head of Procurement & Logistics (HOP) through the specified monthly KPI review.

Pharmacy

- Accountability for adherence to this procedure will be monitored by the Chief Pharmacy Procurement and IT Manager
- Chief Pharmacy Procurement and IT Manager will be responsible for ensuring this procedure is followed operationally
- Adherence to the identified procedure will be monitored through regular reviews with Pharmacy IT and the Pharmacy Procurement Team
6 Procedure to Follow

The procedures outlined on the following pages include flows for non-Pharmacy and Pharmacy master data and catalogue management. This SOP should be commenced upon completion of the SOP PP02 - Tendering and Contracting SOP.

The primary purpose of deploying a catalogue management strategy is to realise an improvement in product data accuracy and consistency across multiple IT systems, essential for the successful implementation of GS1 Standards.

Catalogue Management is a process where suppliers make product content available to purchasing organisations, to allow procurement of goods electronically, where product content is held by either the supplier or the buyer.
Non-pharmacy master data flow

The expected outcome of the Scan4Safety programme is that suppliers will issue master data to the GDSN, however there may be other interfaces and manual processes required for an interim solution or smaller suppliers. This is shown in the flow below;

1) Fully enabled GS1 compliant suppliers will publish their data into the GDSN whilst others, GHX customers, may publish via GHX HealthNexus and non GHX customers may publish data via spreadsheets.

2) The catalogue manager will review the updates available to the Trust and approve or reject the updates as appropriate.

3) Nexus will publish catalogue data to Genesis and other end systems

4) The requisitioner, via iProc, will view the catalogue data and raise a requisition as required.

Non-pharmacy master data update process flow (new item)
To ensure the data flows in the expected route the process as outlined below must be adhered to.
This process follows the completion of Procurement SOP PP02 (Tendering and Contracting SOP).

The aim of the Trust is to achieve 100% of product master data from a public source. The preferred route for the transfer of product master data from suppliers is via a GS1 certified data pool within the GDSN.

A fully GS1 compliant supplier will publish their product master data to the GDSN via their GS1 approved datapool. The suppliers to the Trust will have varying levels of compliance potentially with class III implantable devices having data available within the GDSN prior to other products. For some suppliers, this may result in a mixed source of data (manual spreadsheet and automatic feed from the GDSN). It is expected that not all suppliers of goods and services to the Trust will provide data to a GS1 certified data pool. It is therefore necessary to ensure that the Trust supports both the GDSN connection and a manual process.

The buyer or the lead data analyst will monitor the data within GHX Nexus, with specific review of contract dates and pricing validity. An expired agreement or demand for a new item may initiate the below process.

1) The buyer tenders the contract via Bravo and reviews responses
2) The buyer decides if the contract is awarded
   3a) If the supplier is fully GS1 compliant they will have product data held within the GDSN
      a. The Purchasing Systems Team subscribe to the item(s) from the supplier via GHX Nexus
      b. The supplier will review the subscription request and action as appropriate
      c. The Purchasing Systems Team will be notified of new catalogue items awaiting approval within GHX Nexus
   3b) If the supplier is not fully GS1 compliant they may not have product data held within the GDSN
      a. The Purchasing Systems Team will provide a catalogue template for population by the supplier
      b. The supplier will populate and return the catalogue template to the Purchasing System Team
      c. The Purchasing Systems Team will upload the catalogue data into GHX Nexus
4) The Purchasing Systems Team will review, validate and approve the catalogue items for publication
   a. If the data is incorrect the Purchasing Systems Team will escalate to the buyer
   b. The buyer will resolve the issue within Nexus
   c. The Purchasing Systems Team will review the edits and publish the catalogue
5) The Purchasing Systems Team will update the catalogue attributes to allow for further publication to end requisitioning/order systems (i.e. Genesis, PlanetFM)
Non-Pharmacy end to end system integration

The full P2P data flow is as shown below:

1) The requisitioner raises a requisition via iProc, whilst the MatMan or InvMan will raise a replenishment order within the inventory system.

2) The PR will be approved and POs will be issued from Oracle. For e-Ordering the PO will reach the supplier via Exchange, for others the PO will be issued via email or paper.

3) For GHX based suppliers e-Invoices will be received via Exchange. For Tradeshift based suppliers, e-Invoices will be received via tradeshift. Other, paper, invoices will be scanned into Oracle by SBS.

4) All e-Invoices will be imported into Oracle via Tradeshift.
To reduce the number of supplier queries, PO amendments and amount of time it takes to process an order (and any corrections) it is necessary that the data on the PO is accurate. Certain attributes will need to be correct if a PO is to be accepted by a supplier, these may include item description, GTIN, price and/or quantity.

By ensuring that the processes and data flows are correct for inbound master data; not only will the PO be accepted by the supplier, but the invoice being received into the Trust could be matched automatically, saving the Trust a significant time on invoice query management.

The active management of accurate master data has positive impacts throughout the Trust. The process for updating master data is as below. The process diagram is on the following page.

1) The supplier makes amendments to master data
   2a) If the supplier is fully GS1 compliant they will have product data held within the GDSN
      a. The updated master data is sent to those who have subscribed to that item
      b. The Purchasing Systems Team will be notified of changes to catalogue items awaiting approval within GHX Nexus
      c. If the item is to be removed from the catalogue (no longer sold to the Trust) the Purchasing Systems Team will be notified of an item deletion
   2b) If the supplier is not fully GS1 compliant they may not have product data held within the GDSN
      a. The supplier will populate and return the catalogue template to the Purchasing System Team
      b. The Purchasing Systems Team will upload the catalogue data into GHX Nexus
   4) The Purchasing Systems Team will review, validate and approve the catalogue items for publication
      a. If the data is incorrect the Purchasing Systems Team will escalate to the buyer
      b. The buyer will resolve the issue within Nexus
      c. The Purchasing Systems Team will review the edits and publish the catalogue
   5) The Purchasing Systems Team will update the catalogue attributes to allow for further publication to end requisitioning/order systems (i.e. Genesis, PlanetFM)

The system integration for this process is as defined within the non-Pharmacy end to end system integration diagram.
Non-pharmacy master data update process flow (existing item)

Pharmacy master data flow
Although Pharmacy has its own requirements for data management (over and above the Scan4Safety programme) best practice of master data management is platform agnostic. There is an expectation that the implementation of the Dictionary of Medicines and Devices will necessitate a national data repository. Some suppliers may publish direct to this whilst others may publish via wholesalers. The below data flow represents the as is.

1) Suppliers publish their data to the CMU, wholesaler database or on their website

2) The data manager takes the information and updates end systems as appropriate and ensures that the item is ready for purchase

Pharmacy master data update process flow (new item)
To ensure the data flows in the expected route the process as outlined below must be adhered to.
Similar to the non-pharmacy process the demand for data may be driven by new items being procured, contracts expiring with new contracts coming into place, a PO rejection or an invoice being placed on hold.

1) The Chief Pharmacy Procurement and IT Manager identifies a requirement for data.

2) The Chief Pharmacy Procurement and IT Manager commences population of the new drug request form.

3) The Chief Pharmacy Procurement and IT Manager and Formulary Pharmacist reviews the requirement for the new drug.

4) Pharmacy IT ascertains if the data is available within the EMIS DSS. If the data is to be provided by the master drug database in EMIS Pharmacy IT will create the master drug file from the EMIS Database. If the data is not available Pharmacy IT will create a file based on the data provided on the new drug file request form. (This is all duplicated below. I suggest switching 2 and 3 around and getting rid of point 4.

5) The Chief Pharmacy Procurement and IT Manager ascertains if the data will be provided by the Commercial Medicines Unit.

5a) If the data is to be provided by the CMU
   a. The Chief Pharmacy Procurement and IT Manager will take the data from the CMU and populate the required forms.

5b) If the data is not provided by the CMU
   a. The Chief Pharmacy Procurement and IT Manager will request data from the supplier or take the data from the supplier’s website.
   b. The Chief Pharmacy Procurement and IT Manager will take the data from the CMU and populate the required forms.

6) The Chief Pharmacy Procurement and IT Manager issues the completed drug request form to Pharmacy IT to create the drug file within EMIS.

7) The Chief Pharmacy Procurement and IT Manager will review the master drug file and update/correct as necessary.

8) The item is put into use for ordering.

9) The Chief Pharmacy Procurement and IT Manager ensures that Powergate is updated to ensure that Purchase Orders can be issued for the new item.
Pharmacy system integration

The full P2P data flow for pharmacy is as shown below;

1) Powergate issues the PO to the suppliers via GHX Exchange
2) EMIS issues the PO to Powergate
3) Invoices are manually loaded into EMIS for matching
4) A ready to pay file is issued from EMIS to the ERP
5) The suppliers issue invoices direct to the Pharmacy department within the Trust
6) The user raises the requisition in EMIS
To reduce the number of supplier queries, PO amendments and amount of time it takes to process an order (and any corrections) it is necessary that the data on the PO is accurate. Certain attributes will need to be correct if a PO is to be accepted by a supplier, these may include item description, manufacturer’s product code, price and/or quantity.

By ensuring that the processes and data flows are correct for inbound master data; not only will the PO be accepted by the supplier, but the invoice being received into the Trust could be matched automatically, saving the Trust a significant time on invoice query management.

The active management of accurate master data has positive impacts throughout the Trust. The process for updating master data is as below. The process diagram is on the following page.

1) The Chief Pharmacy Procurement and IT Manager identifies a requirement for data. Often a data update is caused by an incorrect PO being rejected, or an invoice being placed on hold. The supply base within the Pharmacy sector have yet to become pro-active in its data publication.

2) The Chief Pharmacy Procurement and IT Manager commences the drug change request form.

3) The nature of the change is ascertained. If the change is complex (i.e. new pack size) it is treated as a new item and undertakes the new item process. If the change is not complex (i.e. spelling error in database or GTIN changed without a product change) the Chief Pharmacy Procurement and IT Manager proceeds with step 4 below.

4) The Chief Pharmacy Procurement and IT Manager ascertains where the new data is available. The Chief Pharmacy Procurement and IT Manager ascertains if the data will be provided by the Commercial Medicines Unit.

5a) If the data is to be provided by the CMU
   a. The Chief Pharmacy Procurement and IT Manager will take the data from the CMU and request Pharmacy IT to upload in to EMIS

5b) If the data is not provided by the CMU
   c. The Chief Pharmacy Procurement and IT Manager will request data from the supplier or take the data from the supplier’s website
   d. The Chief Pharmacy Procurement and IT Manager will take the data from the previous step and populate the EMIS upload template

6) Chief Pharmacy Procurement and IT Manager will review the data. If the data is incorrect the Chief Pharmacy Procurement and IT Manager will correct

7) The Chief Pharmacy Procurement and IT Manager updates the EMIS master drug file directly with the corrected/updated information

8) The item is put into use for ordering

The system integration for this process is as defined within the Pharmacy end to end system integration diagram.
Pharmacy master data update process flow (existing item)

1. **CMU**
   - Product data changed
   - **Yes**: Fill in drug item change request form
   - **No**: Complex change?
     - **Yes**: Process: New Pharmacy Product
     - **No**: Data available on EMIS DSS master file?
       - **Yes**: Data published by supplier?
         - **Yes**: Request data
         - **No**: Manually take data from supplier’s website
       - **No**: Product on CMU database?
         - **Yes**: Take data from CMU
         - **No**: Product on CMU database?

2. **Update CMU Database**
   - **Update EMIS master drug file**
   - Make available for ordering

3. **Update Powergate Mapping**

Chief Pharmacy Procurement and IT Manager
Location master data flow

As a part of GS1’s ongoing improvement work the expectation is that the publication of Location data to the Location Manager system will support automated updates to end users in Q2 2018. The as-is and to-be data flow is identified below

4) Facilities take the next GLN available to allocate and update MiCAD with the data.

3) The internal location manager is notified and updates the GS1 Location Manager as well as Pharmacy and the Purchasing systems team, as appropriate.

2) System owners update the required systems with the new location information

1) System owners update the affected parties with the change or additional location

Location data update process flow
To ensure the data flows in the expected route the process as outlined below must be adhered to.

1. **Supplier**
   - Create new or update supplier.
   - Notify GHX if new supplier or existing supplier.

2. **Location Manager (GS1 Website)**
   - Notified of new location or change.
   - Log in to Location Manager and update.
   - Published in Location Manager.
   - Select GLN from database of allocated GLNs.
   - New Location?
     - Yes: Notify Supplier.
     - No: Update Sales System.

3. **Facility**
   - Request to update Location manager.
   - Notify GHX.
   - Update EMIS with location.
   - Update GHX Systems.

4. **Pharmacy**
   - Button is to Location manager and update.
   - Notify EMIS and location.
   - Update EMIS with location.
To ensure that all required parties are aware of any location changes or new locations the Purchasing Systems Team is required to ensure the Location Manager website is up to date. To support full data automation for POs and Invoices it is also necessary to update other systems with the required information.

The active management of accurate location master data has positive impacts throughout the Trust. The process for updating master data is as below. The process diagram is on the previous page.

1) For new locations facilities will take a GLN from the list of GLNs available to the Trust. For updates of a GLN (i.e. update the phone number for a location) a new GLN is not required.

2) Facilities will update the location details within MiCAD and notify the Internal Location Manager.

3) The Internal Location Manager notifies, as appropriate, either the Purchasing Systems Team or Pharmacy of a new location or updated attribute.

4) The Internal Location Manager updates GS1’s Location Manager with the new location or update the existing location with improved data.

5) If the new location is a non-pharmacy inventory location the Purchasing Systems Team will update Genesis, as the inventory system, with the new location and allocate material(stock) items within the system as appropriate.

6) If the new location is a pharmacy location the Pharmacy IT Team will update EMIS, as the pharmacy system, with the new location.

7) If the new location is a ship-to or bill-to (locations that affect the supply or payment of goods and services) the Purchasing Systems Team will notify SBS and GHX of a new location and will also notify suppliers of how the location affects them.

If the supplier notifies the Trust of a location change, i.e. a new invoice payment address or a new sales address the process below should be followed.

1) A supplier will have updated the GS1 Location Manager and notified GHX of new locations for EDI support.

2) The supplier would have notified the Trust about a change in ordering or payment locations.

3) The Purchasing Systems Team will request a Supplier Site amendment to NHS Shared Business Services. SBS will update the site and send a notification to the Purchasing Systems Team upon completion.

Measurement of KPIs & SLAs

The Trust has the requirement to achieve 100% of addressable requisition volume ordered using catalogue data.

The Trust will monitor, by department / cost centre / subjective, the number of catalogue requisitions, inventory orders (that use catalogue data) and non-catalogue requisitions.

The Trust’s back office functions must be no more than 7% of total revenue. It is expected that data automation through GDSN and EDI adoption will support cost reduction and potentially offer new revenue sources.
The Trust will measure the number of perfect transactional documents (PO and Invoices) as a % of total transactional documents by department / cost centre / subjective. The Trust will also measure the number of catalogue amendments and catalogue queries as a supplier performance metric.

7 Document Ratification Process

The design and process of review and revision of this procedural document will comply with The Development and Management of Trust Wide Documents.

The review period for this document is set every three years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be approved and ratified by the CPO.

Non-significant amendments to this document may be made, under delegated authority from the CPO, by the nominated author.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes.

8 Dissemination and implementation

Following approval and ratification, this procedural document will be published in the Trust’s formal documents library and all staff will be notified through the Trust’s normal notification process, currently the ‘Vital Signs’ electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Trust Wide Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the CPO and for working with the Trust’s training function, if required, to arrange for the required training to be delivered.

9 Reference Material

GHX user guide

G:\GSPEPPOL\7. P2P (PEPPOL)_Workstream\Governance\Policies\P2P SOP’s\NexusUserGuide.pdf

Appendix

Appendix 1

N/A