About ABHI

ABHI
Advancing Access to Medical Technology

Vision
To lead the advocacy of the UK medical technology industry

Mission
To champion the benefits and use of safe and effective medical technologies to deliver high quality patient outcomes

"The Association of British Healthcare Industries (ABHI) is the industry association for the medical technology sector in the UK."

"ABHI’s mission is to champion the benefits and use of safe and effective medical technologies to deliver high quality patient outcomes. With over 240 members, ABHI leads the advocacy of the industry in order to advance access to medical technology. Our membership includes some of the leading multinational businesses in the sector in the UK right the way through to small and medium sized enterprises (SMEs)."

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Strategic Pillars

Advocating policies that allow members to operate in a favourable business environment.

- In the UK Market: Policies that support the rapid evaluation, reimbursement and adoption of medical technologies by UK healthcare systems.

- In the International Markets: Policies to provide an effective gateway to foreign markets.

- With appropriate Regulations and Standards: Simple and smart regulation, providing patients with safe, effective, high quality and innovative medical technologies.

- With appropriate Ethics and Principles: Policies to ensure business is conducted in the correct manner.
Key Achievements 2013

Provided industry response to Procurement Review recommendations.
• Review published by Health Minister Dan Poulter in August.
• ABHI led industry response to Department of Health, Ministers and the media.
• ABHI embedded in implementation process and continues to work with Department of Health (DoH) to shape future procurement mechanisms.

Worked to improve medical technology leadership in NHS England.
• ABHI has worked hard with NHS England to ensure that medical devices get the strategic focus at senior NHS levels.
• Senior NHS England officials — including Robert Harris and Bruce Keogh, attended AdvaMed Conference to meet with representatives from the medical technology industry.
• NHS England established the Medtech and Diagnostic Advisory Board.

Helped to establish partnerships between NHS and industry.
• ABHI has developed a set of principles for partnership working with the key delivery vehicles for the sector: Academic Health Science Networks (AHSNs) and NHS England.
• ABHI has taken an active role in AHSN development across the country. ABHI staff are involved in West of England, South London, Oxford, East of England and North West Coast with representatives from industry involved in West Midlands, Greater Manchester and South West Peninsula.
• ABHI has given strong input to content and delivery of wealth creation agenda.

Influenced the Revision of the Medical Devices’ Directives.
• ABHI worked with MEPs, MPs and UK officials to ensure that the Revision delivers a regulatory regime that is fit for purpose.
• Gained MEP support for industry position.
• ABHI secured the support of the Medicines and Healthcare Products Regulatory Agency (MHRA) for industry position in the EU Council.

Maintained the highest levels of industry ethical conduct.
• This year ABHI opened up the Code of Business Practice to non-ABHI members.
• Launched the Medical Industry Accredited scheme for industry employees entering critical care areas of hospitals.

Supported more UK companies to access international markets.
• Successfully secured additional funding of +£250k to deliver enhanced support programmes to exporters, doubling overseas activity and trade show representation.
• Lobbied Cabinet Office, Trade and Health ministers to address the barriers to trade issues in key foreign markets.
# Core Priorities 2014

## Strategic Priority

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<tr>
<th>2014 Critical Success Factor</th>
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<tr>
<td>• Ensure Office of Population Censuses and Surveys (OPCS) procedure code assigned for any new treatment using NICE-assessed technology</td>
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<td>• Medical Technology Guidance included on innovation scorecard</td>
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<td>• Map and engage with key stakeholders in NHS, DH, BIS &amp; Treasury regarding multi-year return on investment and funding/debt mechanism</td>
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<td>• Identify and engage with partners to produce ABHI proposal</td>
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<td>• ABHI representation on board or industry board of six leading AHSNs</td>
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<td>• Agreement on economic impact measures</td>
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<td>• Devise and gain agreement with DoH on industry engagement on implementation of Procurement Review</td>
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<td>• Jointly agreed methodology in place to analyse medical technology spend trends</td>
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<td>• Defined methodology with NHS England for engagement with Clinical Reference Groups</td>
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<td>• Agreement on transparency of Commissioning through Evaluation</td>
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<td>• Process and service specifications and linkage to NICE methods</td>
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<td>• Comprehensive member briefing on relevance of domains to industry and key access points</td>
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<td>• Case study of commissioning for outcomes with AHSN and industry linked to domain</td>
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<td>• Work with MHRA to ensure EU Council position is in line with that of industry</td>
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<td>• Ensure detailed industry concerns are clearly represented to MHRA</td>
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<td>• Work with Eucomed and MHRA to press for a pan EU policy on fees</td>
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<td>• Monitor on-going progress</td>
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<td>• Work with central government to establish a well defined export strategy to support sector growth</td>
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<td>• Development of support services and funding provision for UK medical technology exporters</td>
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<td>• Development of formalised communication with BIS and EC on market barriers in priority markets</td>
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<td>• Increased engagement with Ministers in the UK and overseas to communicate and raise up issue of trade barriers</td>
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<td>• Promotion of Code of Business Practice to Trade Associations and Medilinks</td>
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<td>• Gain senior NHS endorsement</td>
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<td>• Working on closer involvement with supporting organisations (AIPP, RCN, RCS, SDMA, BIVDA, AXrEM etc.)</td>
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<td>• Expand scheme to include ethical compliance through Code of Business Practice)</td>
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<td>• Maintain MEP contact for completion of Medical Devices Regulations</td>
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<td>• Complete and launch ABHI manifesto for 2015 elections and input to party manifestos</td>
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<td>• Communications Working Group designing proactive media campaign to highlight positive role of medical technology in healthcare delivery</td>
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<td>• Maintain active media monitoring and response mechanism</td>
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## Core Priorities 2014

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<th>UK Market</th>
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<td><strong>Market Access</strong></td>
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<td>Create linkage between evaluation process and financial incentives</td>
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<td>Establish accessible funding streams and financial mechanisms to enable rapid service change and uptake of technology</td>
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<td>Structured engagement with AHSNs</td>
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<td>Commercial strategy reflecting market-based principles</td>
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<td>Resolve industry challenges on new configuration of specialised services provision and commissioning</td>
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<td>Industry engagement with clinical domains</td>
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<th>Commercial</th>
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<tr>
<td>Develop and promote industry Accreditation Scheme and gain NHS agreement</td>
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<th>Clinical Advocacy</th>
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<td>Continue to influence the Medical Devices Regulations legislative process to ensure the best achievable outcome for industry</td>
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<td>Lobby central government to secure better funding for MHRA</td>
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<td>Conclude governance arrangements for Beyond Compliance Initiative</td>
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<th>Regulatory &amp; Standards</th>
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<tr>
<td>Raise market barriers with, and lobby central government on, importation and regulatory trade issues in key export markets</td>
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<th>International</th>
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<tr>
<td>Expand industry-wide adoption of ABHI Code of Business Practice</td>
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<th>Ethics &amp; Compliance</th>
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<td>Coordinated delivery of structured stakeholder engagement plan</td>
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<th>Communications</th>
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<td>Development and execution of plan to market the value of industry</td>
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How did the NHS changes impact industry?

Navigating the system has never been more difficult. There are a host of new organisations, some important elements of healthcare now sit outside the NHS and there is little co-terminosity (the lineages are not yet in place). An already complex system has become even more challenging to interact with, especially for our smaller members. I do get a sense, though, that doctors are engaging more readily in commissioning, offering better opportunities for compelling clinical business cases and the system is well placed to begin to move towards models of truly integrated care.

Johnny Lundgren

For industry the new NHS landscape represents both challenges and opportunities. New commissioning regimes and commissioners have required industry to move fast and form new relationships and ways of working. The cancellation of the Specialised Services Commissioning Innovation Fund was a big disappointment at the end of last year. On a positive note, the AHSNs have now begun work which should benefit industry.

Peter Ellingworth

I think it has set the stage well for dealing with the financial challenges that lie ahead. There are signs that it has become increasingly pragmatic, especially around competition and I think the service will evolve in a positive way over the coming months. There is obviously much anticipation surrounding the appointment of the new Chief Executive and the five-year strategic plan, Everyone Counts, adds a welcome longer-term view. I hope DoH will respect the arm’s length relationship and allow NHS England to flourish in the next stage of its development.

Johnny Lundgren

NHS England faced a number of challenges during its first year—including the on-going pressures following the Francis Enquiry and the pressures on funding. Against this backdrop NHS England performed well during its first year. For industry, it was important to build strong connections as early as possible, something ABHI was able to do, culminating in the establishment of the MedTech and Diagnostics Board in December 2013.

Peter Ellingworth

How would you rate the performance of NHS England in its first year?
What are the big challenges for industry in 2014-15?

The financial situation is not going to ease anytime soon and we will have to work harder to develop evidence to support the value we bring to the NHS.

Johnny Lundgren

Following a period of change and uncertainty the NHS is entering into a more settled period. The new landscape is up and running and has had a chance to bed in. Pressure is likely to come from NHS Trusts trying to cut costs and balance budgets as we approach a general election.

Peter Ellingworth

How can ABHI have the most impact for industry in 2014/15?

There are some exciting collaborative initiatives happening, notably the AHSN project, but these are being countered by some rather narrow minded approaches to purchasing goods. We must strive tirelessly to reinforce our value proposition as an industry and ensure that open and honest collaboration with us is seen as a solution to the financial challenges faced by our healthcare system and not one of the problems.

Johnny Lundgren

It is critical for industry that we are building relationships with the new NHS architecture, ABHI has a pivotal role in signposting this and leading the way. Debates about how the NHS prioritises spending and activity are likely to increase this year. What is important for industry is that we have clear representation and a strong voice- something ABHI is there to provide.

Peter Ellingworth
“NICE has worked closely with ABHI since we were established almost fifteen years ago. It is important to us that we understand the medical device industry and are producing the kind of guidance and assessment that is appropriate for devices. The launch of the Medical Technology Evaluation Programme and the recent development of the Health Technology Adoption Programme have demonstrated this commitment. ABHI has consistently provided clear input and guidance on behalf of the medical device industry.”

Sir Andrew Dillon
Chief Executive, NICE

2013 has been a landmark year for the NHS. The implementation of the Health and Social Care Act saw the most significant change to the UK healthcare system since its inception in 1948. These have had far reaching effects on our industry with new organisations and people, further restrictions on budget and new initiatives that impact directly on the availability and uptake of medical devices.

Core Objectives in 2013 were:

- Leadership role on Procurement Review implementation;
- Establish mechanism and principles of partnership working; and
- Progress adoption of key Innovation, Health and Wealth outputs.

We have had significant success with the establishment of the MedTech and Diagnostic Industry Board providing a forum for industry and NHS England to discuss common goals and strategy, this dovetails perfectly into the Ministerial Medical Technology Strategy Group (MMTSG) which is proving an excellent vehicle to bring together the business and heath elements of our sector; a theme that is increasingly important as austerity measures impact the NHS.

2013 saw one of the key recommendations from Innovation Health and Wealth (IHW) come to fruition in the shape of AHSNs. This is a welcome addition to the innovation landscape with an important remit to both improve population health and create wealth. With a five-year licence and significant stakeholder involvement these could prove to be a significant mechanism to radically change how best and emerging practice is driven into clinical reality. ABHI is actively involved at board level in a significant number of these organisations. However we recognise the need for these networks to be sufficiently funded if they are to achieve our common goals. This appears to be under threat and during 2014 we will be working to ensure the necessary financial commitment is in place for NHS England.
Budget cuts elsewhere also saw the demise of Specialised Service Commissioning Fund. The fund was part of the IHW programme and was intended to benefit patients by supporting the adoption and spread of innovative treatments, many of which are supported by medical devices.

The re-organisation heralded by the Act saw new responsibilities for tariff, with NHS England and Monitor being given joint responsibility. The turmoil created by this change saw, to a large extent, a roll-over of the previous year’s tariff. This was disappointing as there was no opportunity for consultation coding, currencies and particularly the exclusion list, a similar situation to the previous year. The limited engagement afforded to industry is a concern and steps have been put in place and new contacts established to ensure that we have much closer links and working processes in the future.

Specialised Services has seen the centralisation of commissioning for clinical services that cover up to 80% of acute care and the establishment of Commission through Evaluation. ABHI has been working closely to ensure that service specifications and the evaluation process are fit for purpose.

Late in the year saw the delayed launch of another procurement review. Better Procurement, Better Value, Better Care published in August made recommendations around four key themes: data; information and transparency; short-term productivity gains; clinical engagement and improved procurement capability. ABHI has been working closely on the implementation of this programme, robustly challenging the data and process being used. We will be monitoring this activity closely and pushing for greater clarity on the aims, processes and impact of these measures. Representation of our members’ views has been sought at the highest levels with government ministers, Cabinet Office, DoH and NHS England.

**Strategy for UK Life Sciences – Two Years on**

In January 2014 LifeSciences UK (LSUK), the umbrella body for the UK’s life science trade associations, of which ABHI was a founder member, released its report on the progress made on the implementation of the Government’s Strategy for UK Life Sciences, published in 2011. The Innovation, Health and Wealth Report was part of this strategy.

The report found that whilst progress has been made in a number of areas there are several elements of the strategy where more work is needed. The report looked at 13 areas of the strategy. For the medical technology industry there were four key areas of interest:

- **Aligning financial incentives:** The LSUK found that little progress had been made towards the implementation of the measures around aligning financial incentives. The report called for better leadership in this area.

- **Academic Health Science Networks:** The AHSNs are now operational but are yet to make a real impact on industry. LSUK welcomed the progress but called for a longer-term commitment on funding.

- **Specialised Services Commissioning Innovation Fund (SSCIF):** LSUK believe that the announcement in October that SSCIF was to be delayed indefinitely will have a detrimental impact on patient access to innovation.

- **Procurement:** The delayed review of NHS procurement was published in October 2013. LSUK found that the procurement review was too focussed on supply side factors and the need for short-term cost cutting.
Health is Global
The pace of medical advances and our understanding of illness and disease are greater than at any time in our history. We are all acutely aware of the benefits of good health; quite simply, healthy populations mean a more secure and economically productive world. The challenges we face in meeting rising demand for high quality healthcare in the face of rapidly changing demographic shift and limited funding are however enormous.

The UK has one of the strongest life sciences sectors in the world and an incredibly vibrant medical technology sector dominated by innovative SMEs producing high quality equipment and medical devices. We have many of the world’s leading academic and clinical institutions and a unique proposition in the NHS. The UK is well placed to unlock many of the answers that will be needed to ensure an effective health system both at home and abroad in the coming years.

Medical technology is very much front and centre in presenting health solutions. It is a huge enabler for health systems not only delivering efficiencies but importantly improving outcomes for patients through its advances and the adoption of its technologies. Our industry’s ability to invest and develop new and improved technology for patients relies heavily on sustained growth, which is increasingly coming from outside of the UK. Over the last 12 months we have seen our members seek opportunities overseas more actively than at any point in recent years, a trend which seems set to continue.

Supporting our industry to expand overseas is of vital importance. Ensuring that our members and our industry are adequately supported and enabled to expand in markets around the world is a priority for ABHI. The UK has a powerful offer, but one that has not yet been effectively harnessed. That is why over the next 12 months ABHI will work closely with government to construct a comprehensive growth strategy which focuses on exports and supports industry’s expansion in overseas markets.
Throughout the year ABHI will once again lead large delegations from the UK to markets overseas providing valuable opportunities to meet with customers, potential partners and importantly better understand the markets that they are prioritising. 2014 will see ABHI take over 300 companies overseas to the Americas, Middle East, Europe, Asia and Far East as well as hosting delegations from around the world here in the UK.

Through ABHI’s International Policy Group (IPG) we will continue to engage with key stakeholders to ensure that support for export and international expansion remains a priority of this Government and that it remains so in the next Parliament. We will continue to strengthen relations with the DH, UK Trade & Investment (UKTI), Department of Business, Innovation and Skills (BIS), Foreign Commonwealth Office (FCO) and take the lead role in shaping their support for industry. ABHI remains an active member of the Trade & Investment All Party Parliamentary Group and sits on the Advisory Group ensuring that members’ views are heard.
UK Industry: A Snapshot

“Economic activity for the sector is more widely dispersed across the UK compared to other life science sectors but with significant concentrations of companies in the East and West Midlands of England and the South East and East of England”

Strength and Opportunity Report, 2014. Department of Business, Innovation and Skills

Examples of manufacturing hotspots

3M (3M Health Care Ltd.)
Loughborough site, region 6
Number Employed: 250+
This site carries out contract manufacturing and R&D
Total employed in UK by 3M: 750+

BD (Becton, Dickinson U.K. Limited)
Plymouth site, region 12
Number employed: 750+
This site carries out manufacturing
Total employed in UK by BD: 1000+

Biomet (Biomet Ltd.)
Cardiff site, region 8
Number employed: 250+
This site houses the UK head office and engages in R&D and Manufacturing for Hips and Trauma
Total employed in UK by Biomet: 500+

Eschmann (Eschmann Holdings Ltd.)
Lancing site, region 11
This site carries out: Manufacturing, R&D, Sales and Distribution
Total employed in UK by Eschmann: 250+

Penlon (Penlon Limited)
Abingdon site, region 11
Number employed: 100+
This site is home to head office and an assembly plant
Total employed in UK by Penlon: 150+

£17.6bn
MedTech, UK annual turnover

4.6%
Employment annual growth rate (CAGR) since 2010

76,000
Total number employed by MedTech, UK
3310 MedTech companies in UK

6.6% Sector growth (2012 – 2013)

99% of companies SMEs

employing less than 250 people

85% with a turnover of less than £5m

4.5% global growth rate of MedTech to 2018

Smith & Nephew (Smith & Nephew PLC)
Hull site, region 5
Number employed: 750+
This site is home to global HQ of Advanced Wound Management division and manufacturing.
Total employed in UK by Smith & Nephew: 1250+

S Murray & Co (S Murray and Co Ltd)
Sheffield site, region 5
Number employed: 25+
This site is home to a manufacturing plant and an administration centre.
Total employed in UK by S Murray and Co: 50+

Smiths Medical (Smiths Medical UK)
Glasgow site, region 1
Number employed: 50+
This site engages in manufacturing and business operations.
Total employed in UK by Smiths Medical: 500+

Swann Morton (Swann Morton Limited)
Sheffield site, region 5
Number employed: 250+
This is home to an Engineering base and a manufacturing plant.
Total employed in UK by Swann Morton: 250+
“At a time when the medical device regulations are undergoing fundamental review, it is essential that the Agency understands the position of all stakeholders. Industry is of course a key player in this debate and ABHI provide balanced input not only from the UK industry perspective but also from the wider European standpoint.”

John Wilkinson
Head of Devices, MHRA
Today we have a situation where the Council has to consider a revised text from the Parliament and a large part of this will be unacceptable. This means that when the Council has completed its own deliberations the chance of any early agreement with the Parliament is almost non-existent. As a result, our best estimate for final agreement and adoption is early 2015 so full implementation of the Regulation will be not be until 2018.

ABHI representatives have worked hard in lobbying MEPs over the year and must now concentrate on working with the MHRA to try to ensure that the position of Council remains sensible and proportionate. This will also involve detailed discussion of the many lower profile topics which are still vital for a good outcome.

Two other major issues are of concern. The MHRA is under funded and, not unexpectedly, is likely to put forward proposals by which a levy is raised on the medical devices industry to close the gap. We firmly believe that all funding for the MHRA should come from Central Government acknowledging that regulation of medical devices is a public health benefit.

The other issue of concern is the Beyond Compliance initiative. This is a voluntary scheme in the UK orthopaedic sector to increase availability of short to mid-term clinical data to strengthen the evidence base for new implants. Industry sees this as a worthy and commendable initiative but one that needs suitable governance to ensure that there is no conflict with the regulatory system or with competition law. Achieving this has proved difficult but we are aiming for resolution early in 2014.

However it is the overall final form of the new Medical Devices Regulation which is of greatest concern as this will fundamentally affect the future of our industry and its ability to innovate. ABHI will continue to work at both political and technical level to try and ensure a good outcome.
Compliance

“It is vital that patient care within the perioperative setting is safe and effective. The ABHI credentialing scheme allows a 360 degree approach to safety, ensuring that every person entering the theatre or acute care setting are appropriately qualified. Managers have a duty of care to ensure that this is the case for every person admitted into their environment. A single system approach is an excellent way forward and can only benefit patients.”

Dawn Stott
Chief Executive,
The Association for Perioperative Practice

Accreditation Scheme (MIA)
The Medical Industry Accredited (MIA) scheme has been the primary focus of ABHI’s activities in the area of reputation and ethical compliance during 2013.

The genesis of MIA was the proliferation of ‘credentialing’ schemes in the USA and the way that these had developed into high-cost gatekeepers, restricting access to hospitals. ABHI believed there was a better way for the UK where a system could be provided to the industry at low cost and which would deliver benefits to the NHS at no cost to hospitals. The result was the MIA scheme which provides companies with the opportunity to obtain photo-ID cards for their representatives showing that they have successfully completed a recognised training course on theatre or acute care access.

The scheme launched in July 2013 and initial uptake was extremely encouraging. By the end of 2013 there were around 130 companies signed up to the scheme covering several thousand representatives. Thanks are due here to Wellards, ABHI’s partner in launching MIA and the organisation responsible for administering it. There was also a fair degree of recognition on launch from within the NHS and companies reported that their representatives were being asked for the photo ID almost from day one.

Now the scheme is underway the next phase is to continue to encourage closer involvement from the various sectoral trade associations and also from the relevant professional organisations. Work is well underway on this and we hope that next year we will be able to report a high degree of recognition, involvement and take-up of the scheme not only within industry but also across the NHS.

Further details are available on the MIA website www.miaweb.co.uk

Code of Business Practice
Whilst very few changes were made to the text of the CoBP, ABHI worked in hard behind the scenes to encourage wider compliance with the CoBP. ABHI continues to answer questions from members and non-members day-to-day about the code as well as dealing with disputes between members. To date there have still been no cases for the Complaints Adjudication Panel to deal with.

Towards the end of the year we were finally able to put in place a system enabling non-members to sign up to the ABHI code on the same basis that members do – they undertake to abide by its provisions and to be subject to the complaints procedure. This is a step forward in providing a recognised ethical compliance route which is available to the whole of the medical technology industry. Those companies not currently members of an industry association with a code of practice or those who wish specifically to use the ABHI code for ethical compliance may now do so.

Transparency
A topic of great interest to many members and one which will perhaps gain greater recognition in the coming year is on transparency of payments to health-care professionals. There are already systems in place in some EU member states, notably France, and ABHI has been working in the Ethical Standards for Health and Life Sciences (ESHLS) Group on a scheme for the UK. Although primarily aimed at the pharmaceutical industry, now the European Federation of Pharmaceutical Industry Associations (EFPIA) has committed its members to transparency on payments to healthcare professionals, ABHI is looking at how the medical devices sector might make use of this on a voluntary basis. This is still under consideration but will be a key topic for 2014.
ABHI Groups Structure

Board of Directors

Policy Groups
- Commercial
- International
- Legal Issues & Compliance Committee
- Market Access
- Public Affairs
- Technical

Working Groups
- Communications
- Evidence and Evaluation
- Health Care Acquired Infections
- Payment and Incentive Systems
- Specialised Services
- Sterilisation and Microbiology
- Supply Chain and eBusiness

Special Interest Sections
- Advanced Wound Management
- Cardiac Rhythm Management
- Elimination of Sharps Injuries
- Neurosciences
- Orthopaedics
- Spine
- Surgical Instruments
- Vascular
ABHI Board of Directors

Johnny Lundgren
Chairman
Vice President/General Manager - North West Europe, Becton Dickinson

Shah Fayyaz
Vice Chairman
CEO - Timesco Healthcare Limited

Tim Coutts
Vice-President - Healthcare Partnerships
Boston Scientific Limited

Jackie Fielding
Vice President - UK & Ireland
Medtronic Limited

Harry Keenan
General Manager - Baxter Healthcare Limited

Simon Talbot
Managing Director - P3 Medical

Philip Kennedy
Managing Director - Eschmann Holdings Limited

Sandra Lawrence
Commercial Director - Stryker UK Ltd

James Urie
Sales and Marketing Director - Medipius Ltd

Alison Yates
HR Director - MD&D UK / Ire & EMEA
Biosense Webster Johnson & Johnson

Staff on the Board

Peter Ellingworth
Chief Executive

Mike Kreuzer
Executive Director, Technical and Regulatory

Andy Taylor
Executive Director, Healthcare Policy
ABHI Staff List

Peter Ellingworth
Chief Executive

Mike Kreuzer, OBE
Executive Director, Technical and Regulatory

Andy Taylor
Executive Director, Healthcare Policy

Paul Benton
Director, International

Clive Powell
Senior Manager, Compliance and Regulation

Nishan Sunthares
Director, Commercial

Andrew Davies
Director, Market Access

Dr William Wynn-Jones
Clinical Fellow

Judith Mellis
Senior Manager, UK Market Affairs

Daniel Jones
Director, Communications

Sarah Izon
Exhibitions Executive

Liz Carrington
Manager, Events

Linette Irons
Manager, Facilities

Angela Jeffery
PA to Chief Executive and Membership Development Manager

Esther Mannoukas
Accounts Administrator

George J. Ross-Williamson
Communications Assistant

Ian Cranston
Accountant and Company Secretary

Andy Vaughan
Consultant, Standards Policy

Jane Sessenwein
Manager, International and Events

ABHI Membership List

3M Health Care Limited

A
A Algeo Ltd
Abbott Medical Optics
Abbott Vascular
Accentus Medical plc
Adam,Rouilly Ltd
Advanced Bionics UK Ltd
Aerocrine Ltd
Albert Browne Ltd
Alcon Eye Care UK Ltd
Alitoned Ltd
Altrax Group Ltd
Amcare Ltd
American Medical Systems UK Ltd
Anetic Aid Ltd
AngioDynamics UK Ltd
Ansell (UK) Ltd
Apos Medical UK Ltd
Applied Medical Technology Ltd
Aqualiant Orthopaedics - a division of
Aqualiant Ltd
Arnold & Porter (UK) LLP
Arthur Wood Ltd
Avental Ltd
Ayva Pharma Ltd

B
B. Braun Medical Ltd
Bailey Instruments Ltd
Baker & McKenzie Solicitors
Bard Ltd
Barema
Bausch & Lomb UK Ltd
Baxter Healthcare Ltd
Becton Dickinson UK Ltd
Bedfont Scientific Ltd
Biocompatibles UK Ltd
Biomet UK Healthcare Ltd
BIOtAK Ltd
Biotronik UK Ltd
Bircham Dyson Bell LLP
Bird & Bird LLP
Bolton Surgical Ltd
Boston Scientific Ltd
Bristows LLP
British Dental Industry Association
Browne Health Care Ltd
BSI

C
Caila UK Ltd
Cameron Health UK
Cegedim UK Limited
CeramTec UK Ltd
Cipher Surgical Ltd
Clement Clarke International Ltd
Clinimax Ltd
CMS Cameron McKenna
ConvaTec Ltd
Cook (UK) Ltd
Corin Ltd
Covidien (UK) Commercial Ltd
Cyberronics Europe S.A.

D
DDC Dolphin Ltd
Delteq Medical
Deputy International
Deputy Synthes
Deput UK
Device Access UK Ltd
Dixons Surgical Instruments Ltd
DLA Piper UK LLP
Donawa Lifescience Consulting
DTR Medical Ltd
Durbin plc

E
Edwards Lifesciences Ltd
Eschmann Equipment
Euromedica Ltd
EUSA Pharma (Europe) Ltd
ev3 Ltd - Covidien (UK) Commercial Ltd
Evexar Medical Ltd
Excellentcare Medical Ltd
Exmoor Innovations
Exmoor Plastics Ltd

F
Fannin UK Ltd, Surgical Division
Farnhurst Medical Ltd
Fasken Martineau LLP
Fertility Focus Ltd
Field Fisher Waterhouse LLP
Fresenius Kabi Ltd

G
GAMA Healthcare Ltd
GHX UK Ltd
Globus Medical UK Ltd
Griffiths & Nielsen Medical Division
GS1 UK
GSK Consumer Healthcare
Guerbet Laboratories Ltd

H
H W Andersen Products Ltd
Haag Streit UK Ltd
Harvey Medic LLP
Havas Life Medicom
Health Edge Consumables Ltd
Health Technology Solutions Spain s.l.
Healthcare 21 UK Ltd
Healthlogistics.co.uk Ltd
Heraeus Kulzer Ltd
Heraeus Medical
Heraeus Noblelight Ltd
Hologic UK Ltd
Hospital UK Ltd
Hull Associates
<table>
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<th>ABHI Membership List continued</th>
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**I**
- Infutech Ltd
- Intuitive Surgical Ltd

**J**
- JMH Publishing Ltd
- John Weiss & Son Ltd
- Johnson & Johnson Medical Ltd
- JRI Orthopaedics Ltd

**K**
- K2 Medical Systems Ltd
- K2M UK Ltd
- Kapitek Healthcare Ltd
- Karl Storz Endoscopy (UK) Ltd
- Kimal Plc
- KLS Martin UK Ltd

**L**
- Labcold Ltd
- LiDCO Ltd
- Lifecare Hospital Supplies Ltd
- Lifescan UK - a Johnson & Johnson Company
- Lloyds Register Quality Assurance Ltd
- Lombard Medical (Scotland) Ltd
- Lombard Medical Technologies Plc, Cardiovascular Division
- Lyall Willis & Co Ltd

**M**
- Maetrics Ltd
- Malaysian Rubber Export Promotion Council Management Forum Ltd
- Mathys Orthopaedics Ltd
- MatoOrtho Ltd
- Max Medical Products Ltd
- MDM Medical Ltd
- Mecobo Ltd
- Medacta UK Limited
- Medartis Ltd
- Medeuronet UK Ltd
- Medi UK Ltd
- Medical Wire & Equipment Co (Bath) Limited
- Mediplus Ltd
- Meditec International England Ltd
- Meditech Systems Ltd
- Medtronic Limited
- Merck Sharp & Dohme Ltd
- Mi3 Ltd
- MicroPort Orthopedics
- Miprovention UK Ltd
- MITAC Europe Ltd
- Molinlycke Health Care Ltd
- Moor Instruments Ltd
- Movianto UK Ltd

**O**
- O’Mara Medical Supplies
- Olympus Keymed
- OPTIC (UK)
- Orthofix Limited
- Orthovita UK Ltd
- Owen Mumford Ltd

**P**
- P W Coole & Son Ltd
- P3 Medical Ltd
- Pall Medical
- PDI Europe
- Penlon Ltd
- Pentax (UK) Ltd
- Pfizer Consumer Healthcare Ltd
- Phagenesis Limited
- Pharma Modus Ltd
- Pinsent Masons LLP
- Philips Healthcare
- Procter & Gamble Technical Centres Ltd
- Proplink Medical (Europe) Ltd

**Q**
- QSpine Ltd
- Quanta Fluid Solutions Ltd
- Quintiles Consulting

**R**
- Rayner Intraocular Lenses Ltd
- Ream Surgical Ltd
- Renfrew Group International Ltd
- Richard Wolf UK Ltd
- Roberts Surgical Healthcare Ltd

**S**
- S Murray & Co Ltd
- Saharan Trading Company Ltd
- Sarstedt Limited
- ScanTrack Healthcare Ltd
- Schulke UK
- Scient’x (UK) Ltd
- SGS United Kingdom Ltd
- Schuco International (London) Ltd
- Simmons & Simmons LLP
- Smith & Nephew
- SmithKline Beecham Ltd
- Smiths Medical International UK
- SMS Technologies Ltd
- Sorin Group (UK) Ltd
- Sovereign Medical Ltd
- Sphinix Medical Ltd
- SpineVision Ltd
- Squire Sanders (UK) LLP
- St Jude Medical
- Stanmore Implants Worldwide Ltd
- Star Medical Ltd
- Star Syringe Ltd
- Sterigenics UK Ltd
- STERIS Ltd
- STOK UK Ltd
- Stryker UK Ltd
- Swann-Morton Ltd
- Symbios UK Ltd
- Systagenix Wound Management International Ltd

**T**
- Talley Group Ltd
- Taylor Wessing LLP
- Terumo UK Ltd
- The Tinnitus Clinic Ltd
- Timesco Healthcare Limited
- Tornier UK Ltd
- Toumaz Healthcare
- TUV SUD Limited

**U**
- UK Medical Ltd
- Unirose Medical Ltd
- Unomedical Ltd
- Ungo Ltd

**V**
- Verathon Medical

**W**
- W L Gore & Associates (UK) Ltd
- Walker Morris
- Welch Allyn (UK) Ltd

**X**
- Xiros Ltd

**Z**
- Zimmer Ltd
ABHI Membership

ABHI represents the medical technology sector. We proactively engage with members to understand their needs and ambitions. Membership is open to manufacturers as well as service companies involved in the sector. We represent a large number of professional associate members such as solicitors, technical services and a wide variety of consultancies who benefit from our knowledge, expertise and networking events.

Members can benefit from:
Participation in a range of Special Interest Sections, working groups, policy groups and committees.
- Regular technical and regulatory updates
- Primed e-newsletter
- Regular Blogs
- Chief Executive Updates
- ABHI News Review
- Annual Report
- Code of Business Practice
- Access to the 'Members Only' area of website
- ABHI key event briefings – insight into key issues affecting the sector
- Discounts on Events and Exhibitions
- Free attendance at ABHI’s Regional Briefings
- Use of ABHI Logo

Types of ABHI membership:

Corporate Membership
Corporate membership is applicable to manufacturers, distributors and organisations providing non-pharmaceutical healthcare products and services. The subscription fee is based on turnover derived from UK operations.

Professional Associate Membership
Professional associate membership is open to members of other professions or professional bodies not involved in areas covered by corporate membership. Professional associate membership includes organisations involved in law, medicine, financial services, communications, consultancy and insurance.

For further membership information, or to obtain an ABHI membership pack, together with current subscription rates, please contact us through the enquiry form.

Join us at ABHI’s Member Introduction Seminars to learn more about ABHI and how membership can benefit you.

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