

**Consumer Perceptions of Healthcare Associated Infection and Hand Hygiene – A Global Survey**  
**Claire Kilpatrick and Dr. Maryanne McGuckin**  
**Sponsored by the World Health Organization**

## Consumer perceptions of healthcare associated infection and hand hygiene - a global survey

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WHO Patient Safety Challenge  
Clean Care is Safer Care



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May 13, 2015

## Acknowledgements



- Facilitated by the World Health Organisation, Private Organisations for Patient Safety (POPS) is a collaborative that aims to promote and support global patient safety, in the first instance starting with hand hygiene improvement  
<http://www.who.int/gpsc/pops/en/>
- ORC International  
<http://www.orcinternational.com>

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POPS

Private Organizations for Patient Safety

World Health Organization

Clean Care is Safer Care

Private Organizations for Patient Safety (POPS)

With the aim of working with private industry companies, who in particular focus on hand hygiene related products in the first instance, the WHO Clean Care is Safer Care programme launched Private Organisation for Patient Safety (POPS) in May 2012. This took place on the occasion of the WHO **SAVE LIVES: Clean Your Hands** annual celebration after a number of years spent establishing this collaborative model and calling for interested parties to 'sign up'. POPS is managed under a password protected web based platform to allow proactive interaction with any committed private industry companies, such as manufacturers and distributors of products for hand hygiene, and holds face-to-face meetings at WHO HQ at defined times in a year. This all allows for a coherent and equitable means of sharing information and for progressing the altruistic aim of the collaborative.

The long term aim is to harness industry strengths to align and improve implementation of WHO recommendations in different parts of the world, including in least developed countries. The goal of the collaboration is to benefit patients, and not the participants in the platform. The expected public health benefits from working together with industry will be a reduction in health-care associated infections through...

## The question

- **Following years of a multimodal approach to improving hand hygiene in health care, could 'consumers' now further influence this agenda?**
- To understand the potential for a consumer engagement approach to hand hygiene improvement, a baseline of perceptions in countries around the world is required

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## Consumer engagement through the media

The collage consists of four main media snippets:

- ABC NEWS:** A snippet from an article titled "When you are very sick, you go to the hospital to get better. But what if the hospital you choose actually makes you sicker, or even kills you?" It mentions a book "SuperFreakonomics" and includes a video player with a quote from Stephen J. Dubner: "The worst thing is to go to a hospital to not die from one thing, and then to end up dying from something else," said Dubner.
- CNN.com/HEALTH:** A snippet from an article titled "Dr. Sanjay Gupta: Alarm about hospital germs" dated July 22, 2002. It features a sub-headline "Drug-resistant 'superbug' a worry" and text mentioning Professor Peter Collignon and the World Health Organization's concerns about antibiotic use.
- the guardian:** A snippet from an article titled "UK raises alarm on superbugs" with the sub-headline "Calls for clampdown on overuse of antibiotics to limit lethal infections".
- The Herald:** A snippet from an article titled "Superbug death inquiry reveals shocking failings" with a sub-headline "WIN CHILDREN'S BOOKS".

## Consumers and health care

- Engagement/activity appears to vary across the globe – is often culturally driven
- Ultimately, if consumers make decisions about their health care choices, would they consider hand hygiene/infection standards as part of this decision making?
- Note: this work focused on consumers, not patients, while some of those surveyed have/ may have been patients

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## Background

- McGuckin Methods International was invited to participate in POPS discussions on the potential for a consumer engagement campaign
- A project proposal was created and approved within the WHO Service Deliver and Safety (SDS) department and with POPS (including countries to be surveyed)
- A company with a track record in understanding what truly engages people around the globe (through market research) were engaged

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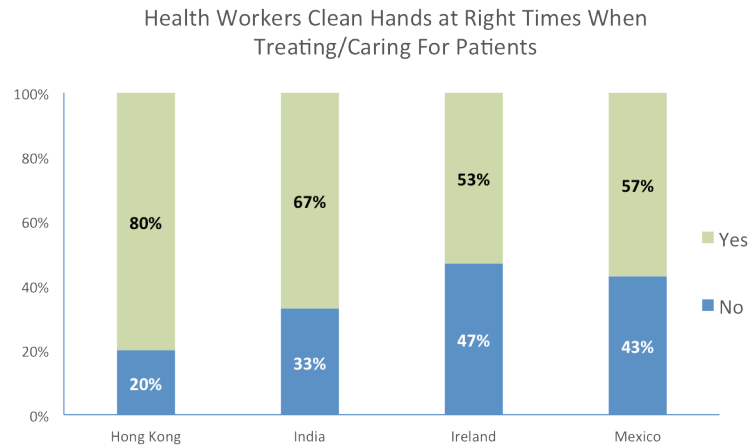
## Methods & Limitations

- A telephone survey was conducted
- A sample of 1,001 respondents, 18 years of age and older living in Ireland (n=250), India (n=251), Mexico (conducted in SP, n=251) and Hong Kong (n=249), were surveyed
- The period of study was October 22-29, 2014
- Respondents for this survey were selected from among those who have volunteered to participate in other polls
- Because the sample is based on those who initially self-selected for participation, no estimates of sampling error can be calculated
- All sample surveys and polls may be subject to multiple sources of error, including, but not limited to sampling error, coverage error, error associated with non-response, and error associated with question wording and response options

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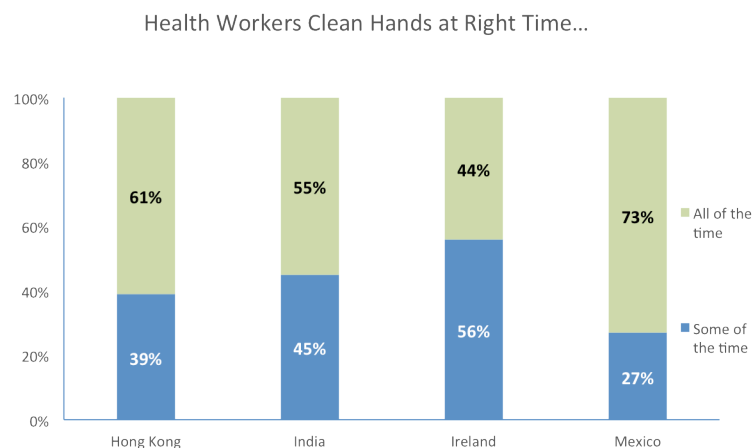
The majority of respondents surveyed believe that health workers clean their hands at the right times when treating or caring for patients. This belief is highest among those in Hong Kong, followed by India.



A1: Do you think that health workers (e.g. nurses and doctors) in hospitals and other settings (for example, clinics) clean their hands at the right times when treating/caring for patients? (Hong Kong=249, India=251, Ireland=250, Mexico=251)

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The majority of those who believe health care workers clean their hands at the right time believe they do so all of the time, except among those in Ireland. In Ireland, the majority believe it's just some of the time.



A2: Do you think that health workers are cleaning their hands at the right time...? Base=Think health workers clean their hands at the right time (Hong Kong=200, India=167, Ireland=133, Mexico=143)

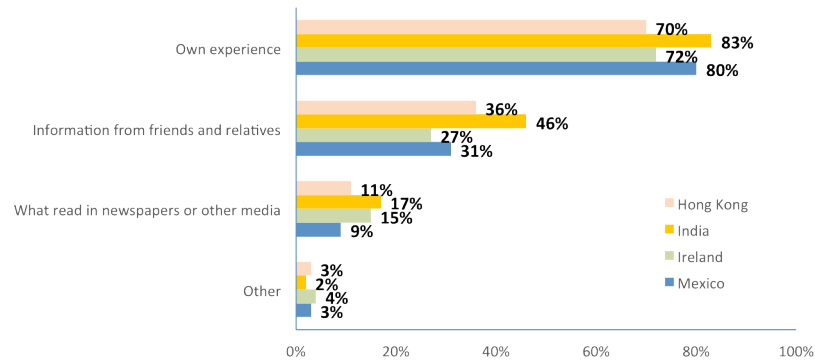
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Responses to questions about healthcare workers cleaning their hands at the right time were based on respondents' own personal experience for at least seven out of ten. Significantly fewer responses were based on information from friends and relatives, and few were based on media.

Responses Regarding Health Workers Clean Hands at Right Times Based On...

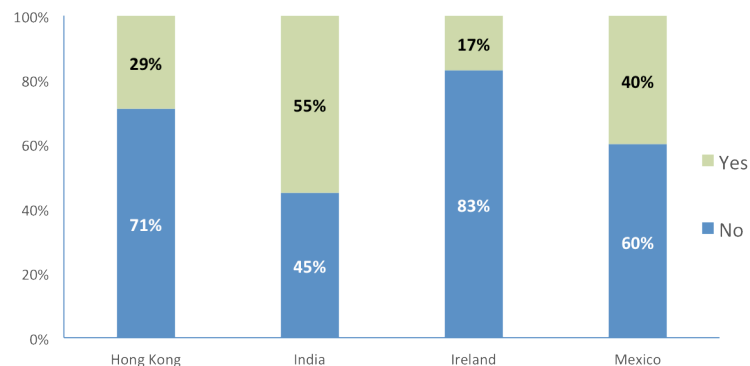


A3: Were your answers to the previous questions based on...? (Hong Kong=249, India=251, Ireland=250, Mexico=251)

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Those in India are most likely to have asked a health worker about clean hands with respect to a visit or treatment they were receiving. Those in Mexico are second most likely to have asked, followed by those in Hong Kong. Very few in Ireland have asked.

Ever Asked Individual Health Worker About Clean Hands with Respect to Visit or Treatment Receiving



A4: Have you ever asked an individual physician (doctor), nurse or other health worker, or a health care organization (e.g. hospital or clinic) any questions about this subject of clean hands with respect to a hospital/clinic visit or treatment you were receiving? (Hong Kong=249, India=251, Ireland=250, Mexico=251)

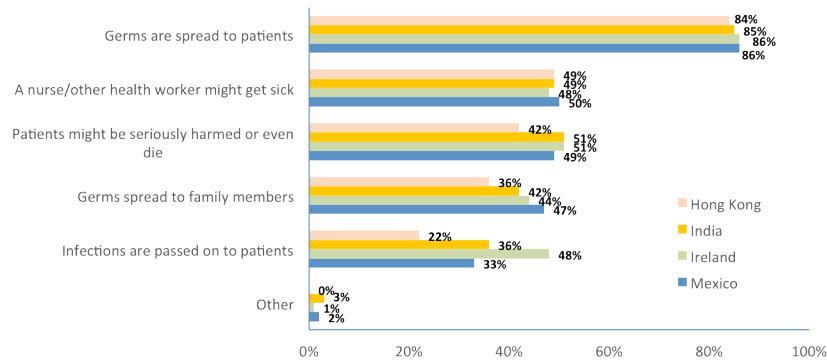
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When asked what they think happens if the hands of health workers are not cleaned at the right time before touching patients, more than four in five said that germs are spread to patients. Half said the health worker might get sick. Those in Hong Kong are least to think patients might be seriously harmed or even die, germs may spread to family members, or infections are passed on to patients.

What Happens if Health Workers' Hands Aren't Cleaned at Right Time Before Touching Patients

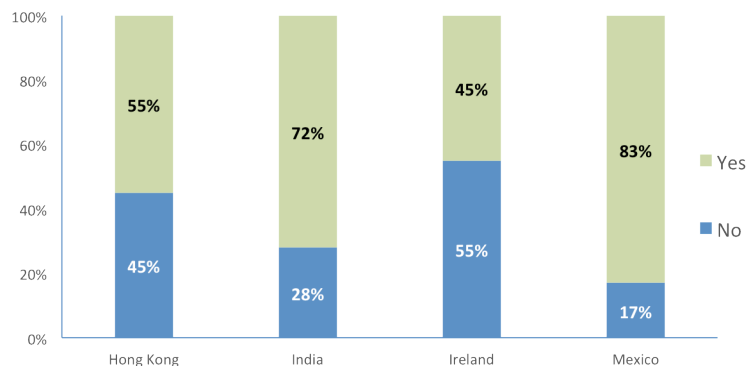


A5: What do you think happens if the hands of nurses/doctors/other health workers are not cleaned at the right time before touching patients? (Hong Kong=249, India=251, Ireland=250, Mexico=251)

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Those in Mexico are most likely to not go into a hospital if they thought health worker hands were not clean. Those in India are also more likely to not go into a hospital in this scenario than would those in Hong Kong and Ireland. Those in Ireland are least likely to be deterred from going into a hospital if they thought health worker hands were not clean.

Thinking Health Worker Hands are Not Clean Would Stop Respondent From Going Into a Hospital



A6: Would thinking that health worker hands are not clean stop you from going into a hospital? (Hong Kong=249, India=251, Ireland=250, Mexico=251)

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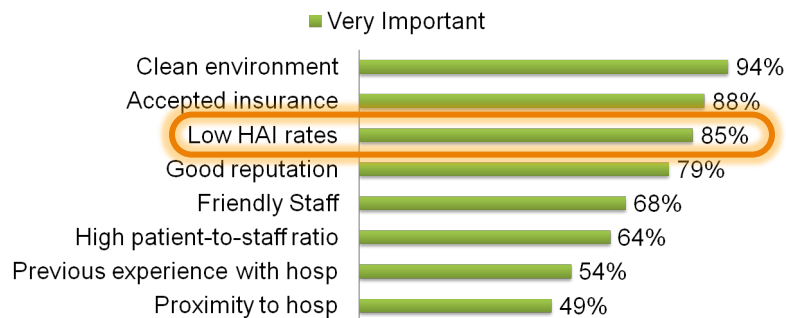
How does this compare with other similar studies?

**CONSUMER SURVEY IN THE USA –**  
**MCGUCKIN METHODS INTERNATIONAL**

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**2006 Survey of Consumer Attitudes HAI & HH**

1,000 respondents asked to rank each factor as “very, somewhat, or not important” when choosing a hospital



McGuckin M, Waterman R, Shubin A. Consumer attitudes about health care-acquired infections and hand hygiene. Am J Med Qual. 2006 Sep-Oct;21(5):342-6.

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**2012 Survey of Awareness and Engagement of HAI Public Reporting By Consumers \***

- Non-incentive random phone survey of 3,000 consumers in 48 States/DC
- Time: Three waves, April – May 2012
- Age: 18 years and older
- Gender: 50/50 (m/f) response pool

\*Mcguckin et al American Journal of Medical Quality. Vol 29, No 3 Jan/Feb 2014

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**Results**

		Awareness	Engagement	Intention
Sex	Male	37%	10%	48%
	Female	42%	15%	55%
		Females more aware <sup>1</sup>	Females more engaged <sup>2</sup>	Females more intent <sup>3</sup>
Age	18-34	31%	8%	53%
	36-64	42%	14%	52%
	65+	38%	11%	52%
		Older more aware <sup>4</sup>	Older more engaged <sup>5</sup>	Not significant <sup>6</sup>

<sup>1</sup>P = 0.0248 <sup>2</sup>P=0.0011 <sup>3</sup>P=0.0002 <sup>4</sup>P = 0.0143 <sup>5</sup>P = 0.0183 <sup>6</sup>P = 0.8620

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## Results (cont'd)

		Awareness	Engagement	Intention
<b>Educ</b>	High Sch	32%	8%	58%
	College	40%	12%	50%
	Post Grad	47%	18%	47%
		More educ more aware <sup>1</sup>	More educ more engaged <sup>2</sup>	More educ <b>less intent</b> <sup>3</sup>
<b>Inc</b>	<\$25,000	30%	9%	60%
	\$25-59,999	39%	12%	55%
	\$60-99,999	41%	12%	48%
	\$100,000+	46%	16%	43%
		More income more aware <sup>4</sup>	Not significant <sup>5</sup>	More income <b>less intent</b> <sup>6</sup>

<sup>1</sup>P < 0.0001 <sup>2</sup>P < 0.0001 <sup>3</sup>P < 0.0001 <sup>4</sup>P = 0.0007 <sup>5</sup>P = 0.0928 <sup>6</sup>P < 0.0001

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## Results (cont'd)

		Awareness	Engagement	Intention
<b>Prior infection (self or fam)</b>	Yes	205 (48%)	96 (23%)	391 (59%)
	No	539 (37%)	137 (9%)	1143 (50%)
		Prior infection more aware <sup>1</sup>	Prior infection more engaged <sup>2</sup>	Prior infection more intent <sup>3</sup>

<sup>1</sup>P=0.0001 <sup>2</sup>P < 0.0001 <sup>3</sup>P<0.0001

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## Results (cont'd)

		Of all respondents that are aware of public reports (n=1895)
Which two factors would you consider most important in choosing a hospital?	Recommendation from Physician, Nurse, other health professional	46%
	Reputation	37%
	Insurance coverage	34%
	Location or convenience	31%
	Recommendation from friends or family	20%
	<b>Hospital infection rate</b>	<b>14%</b>

In contrast, (2006) 85% of respondents said HAI rates were an important factor in choosing hospital. Importance vs. Priority.

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## What does this tell us and what does it not?

- We have a foundation to build on
- A birds-eye view of what consumers think of hand hygiene and hospital infections
- One of the first articles on this topic was 40 years ago in the US – have we moved forward at all in ensuring consumers have accurate information?
- How we are going to improve the situation!
- How much effort should be put in to this agenda?

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## Conclusions

- What we have presented represents what people ‘think’ they know
- A common phrase when a problem occurs is ‘if only I’d known’ – this is supported by the range of perceptions presented
- We have a responsibility to drive this agenda in all our countries/settings...
- Still necessary - an exercise to validate the results within the African and Eastern Mediterranean regions is recommended
- Buy-in from governments and influential organisations could build on the patient engagement activities already underway – tailored to local cultures

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## 2014 WHO leaflets were a start

The image shows a screenshot of a WHO leaflet. At the top, there is an orange header with the WHO logo on the left and the text 'World Health Organization' and 'Hand hygiene and Antibiotic Resistance' on the right. Below the header, the title 'WHO Information for Patients and Consumers' is centered. The main body of the leaflet contains text explaining antibiotic resistance, how it spreads, and what patients can do to limit its development in hospitals. It includes a list of examples of when to clean hands and a general call to action for patients.

**World Health Organization** **Hand hygiene and Antibiotic Resistance**

**WHO Information for Patients and Consumers**

**What is 'antibiotic resistance'?** Sometimes an antibiotic that used to work in the past for a certain type of bacterial infection no longer works. This happens when the bacteria change and so can no longer be killed or inhibited by the antibiotic. The antibiotic (and others of the same "type") is then unable to cure an infection caused by these bacteria. In other words, the bacteria become resistant and can continue to multiply in a patient's body even while taking the antibiotic. The name for this is **antibiotic resistance** and is usually caused by the overuse and misuse of antibiotics.

**How do antibiotic-resistant bacteria get into our bodies?** Infections may occur when there is an 'entry point' for resistant bacteria to get into the patient's body, usually through a break in the skin, such as a surgical wound or an intravenous line. The most likely way this occurs is by directly touching the 'site' with unclean hands. In health-care facilities where the use of antibiotics is high and poorly regulated, bacteria are more likely to become resistant to antibiotics and can cause health care-associated infections (HAI - infections acquired during health care) which are much more difficult to treat.

**What can patients do to limit the development of antibiotic resistance in hospital?**  
When patients are in hospital, they can help stop antibiotic-resistant bacteria spreading by cleaning their hands. Here are some **examples** of when:

- a) before touching their own wound dressing or IV line site;
- b) after touching other patients;
- c) after using the toilet.

Patients can also work alongside their health-care workers, by politely asking if they have cleaned their hands before touching them and before a clean task - WHO has a document on this ([http://www.who.int/gpsc/5may/5may2013\\_patient-participation/en/](http://www.who.int/gpsc/5may/5may2013_patient-participation/en/))

**A general call to action for you**

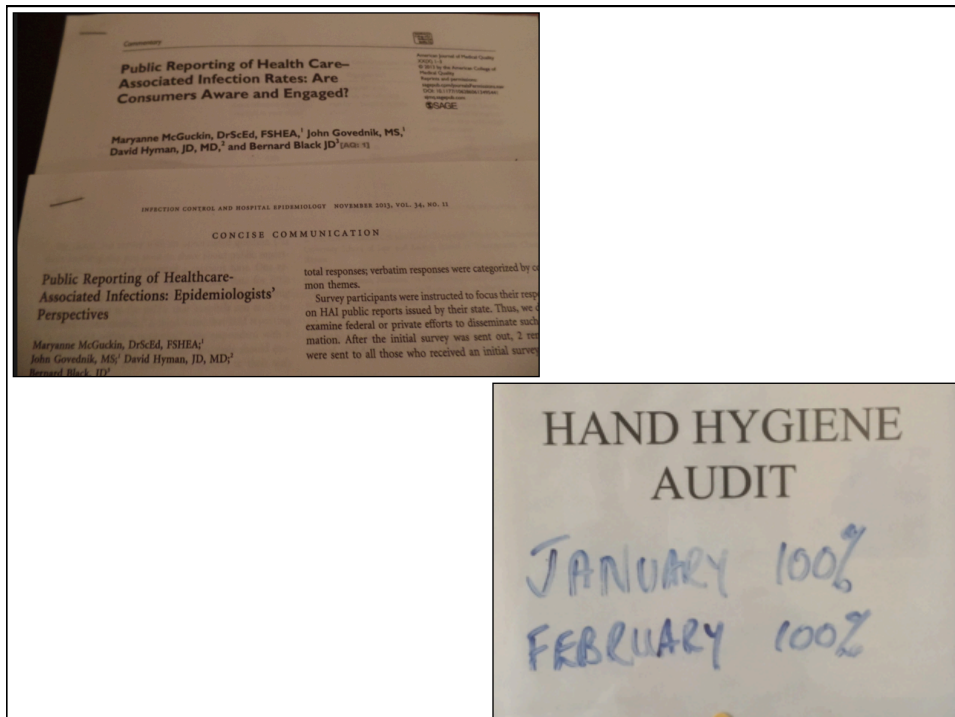
- Prevent infections from developing by staying healthy (e.g. through a healthy diet and practicing good hygiene) so that you won't need antibiotics.
- Avoid infections by cleaning your hands regularly in your home, office, school, gym, etc.
- Let a doctor or your pharmacist prescribe an antibiotic appropriate for your infection – don't demand antibiotics. Be aware that they don't generally work for viral infections.

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## Other examples



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## What tools are available?



A validated and systematic tool to obtain a situational analysis of hand hygiene infrastructure, promotional activities, performance monitoring and feedback, and institutional commitment – provides an overall score

[http://www.who.int/gpsc/5may/hhsa\\_framework/en/](http://www.who.int/gpsc/5may/hhsa_framework/en/)

## Presenting your HHSAF results to inform consumers around the globe

**Announcing the WHO Hand Hygiene Self-Assessment Global Survey for 2015! 1 June – 1 September 2015**

All health-care facilities registered for SAVE LIVES: Clean Your Hands will shortly be invited by WHO to participate and submit their Framework results. But everyone can get ready to participate - download the Framework if you are not using it already. Once completed, the results of the online survey will be issued in October 2015, for the 10th anniversary of the **Clean Care is Safer Care** programme (facilities' identity will remain anonymous in the results).

↓ To view the 2011 Global Survey report click here  
pdf, 413kb

To find out more about the 2015 global survey and to submit your details to participate click here

**Use the WHO hand hygiene improvement approach**

- Find a refreshed package of key tools here.
- Use three new WHO posters supporting prevention of catheter-related blood stream infections and ventilator-associated pneumonias through clean hands, to add to the one available on catheter-associated urinary tract infections.

↓ Focus on caring for a patient with a central venous catheter ↓ Print A3 pdf, 180kb

↓ Focus on caring for a patient with a peripheral venous catheter ↓ Print A3 pdf, 180kb

↓ Focus on caring for a patient with an endotracheal tube ↓ Print A3 pdf, 199kb

**SAVE LIVES**  
Clean Your Hands  
#SAFEHANDS

Arabic Chinese English  
French Russian Spanish

Web sites promoting WHO SAVE LIVES: Clean Your Hands – 5 May 2015

Disclaimers and terms of use of SAVE LIVES: Clean Your Hands 5 May 2015 campaign materials

**#safeHANDS photos**

[http://www.who.int/gpsc/5may/EN\\_PSP\\_GPSC1\\_5May\\_2015/en/](http://www.who.int/gpsc/5may/EN_PSP_GPSC1_5May_2015/en/)

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## Future considerations

- Make information relevant and appropriate to specific consumer decision-making
- Consider using creative but proven ways to help consumers simplify their choices
- Target your information, at the right audience;
- Cultivate the health care setting image as a trusted source for safety information
- Use the right media.....newspaper ads, websites
- Is there a place for a global consumer campaign? – a consideration for WHO POPS

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## The next WHO teleclass ....

**July 8, 2015**

### **THE USE OF SOCIAL MEDIA IN SUPPORT OF GLOBAL INFECTION PREVENTION AND CONTROL**

**Jules Storr & Claire Kilpatrick, World Health Organization**

#### **Objectives ....**

- Review current and historical applications of social media within infection prevention and public health
- Describe examples of the global application and impact of social media focusing primarily on antimicrobial resistance and outbreak threats
- Understand key features of what makes for an effective social media strategy
- Explore the potential future opportunities that social media has as a force for good in infection prevention and control

**[www.webbertraining.com/schedulep1.php](http://www.webbertraining.com/schedulep1.php)**

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