1. Welcome and Introductions

To open the meeting, the Chief Executive from HUG made a brief appearance, welcoming everyone and expressing his interest for the future collaboration between the WCC and POPS.

Prof Didier Pittet (DP) officially welcomed everyone to the meeting and began with the introduction of the new setting of the POPS Hand Hygiene group, with the WCC responsible for the day-to-day management. Official presentation of the new project manager, Tcheun-How Borzykowski (TB) was made. All participants introduced themselves including new attendees from existing participating companies and two observer attendees (potential POPS participants). Apologies were also accepted.

For further information on the background to POPS please read [http://www.who.int/gpsc/pops/en/](http://www.who.int/gpsc/pops/en/)

2. Overview of the day’s agenda and objectives

TB outlined the agenda and objectives of the day (see Annex 1).

3. Summary of the Eleventh Meeting proceedings

**WCC/POPS administrative discussions**

TB gave a brief recapitulation of the decisions made during the last meeting in June 2015. WCC is now responsible for the on-going day-to-day management of the POPS hand hygiene group. However WHO HQ will retain the ownership of the POPS initiative and will continue to play an active role in strategic direction and governance. Claire Kilpatrick (CK) raised the attention of everyone on the last point made by the TB and added that even if the settings were changed, WHO HQ will remain omnipresent in the group.

*The hand hygiene research agenda in 2015*

Daniela Pires (DaP) outlined the last research agenda on hand hygiene between 2009 and 2015 focusing on 3 topics: education and promotion, agents/epidemiology and system change. Landmark studies have answered to important questions. However some areas are still lacking good studies.
A discussion ensued regarding agendas depending on the countries. However DP stated that there is no need for specific agendas for LMIC or developed countries for some aspects. He highlighted the importance of coming back to the roots on how to use the 5 moments. A short discussion ensued on monitoring and the need for more studies to address the most efficient ways to do this.

Fernando Bellissimo-Rodrigues (FB) continued the presentation with the last hand hygiene research activities that are currently ongoing in the department of infection prevention and control at HUG. For the last two decades, hand hygiene promotion was more focused on when to perform it. The HUG is now focusing their researches on the quality of hand hygiene action (how). FB then proceeded with some results obtained during the studies around the volume of ABHR and the hand size, the handrubbing techniques and the duration.

The participants shared some of their experiences around the world to illustrate the results.

DaP concluded the presentation with proposition of questions that still need to be answered in the future around the topics of the multimodal strategy in hand hygiene and microbiological studies.

5 May 2016 – WHO plans, WCC plans and discussion

CK briefly outlined what have been delivered for the 7th year of the campaign in 2015 and then went on to describe the WHO plans for 5 May 2016.

Discussions covered the following points:
The focus of the new campaign will be around hand hygiene in all surgical departments to support reduction of surgical site infections (SSIs). The campaign will also promote the forthcoming WHO SSI guideline and its key recommendations and link it with the WHO HH recommendations such as the 5 moments.
CK then reminded all the first goal of the campaign: It is a call to action to HCW and tries to change behaviours. In 2016, it will engage a “new” target audience, all HCW working in surgical departments. CK stated the need for advocates to achieve this goal. She also stated the important role of POPS to reach this new audience such as, surgical organisations/groups/societies/colleges, etc.

CK then introduced some suggested materials that will be provided for 5th of May:
- New posters
- An advocacy toolkit
- Key messages on the problem and new WHO SSI prevention recommendations
- Photo story
- Infographic with systematic analysis actions in the surgical department.

The next steps were highlighted as approvals by WHO SDS Director, engagement of IPC and surgical experts to inform the materials experts and discussion with a wide range of stakeholders using a communications strategy. It was explained that a project plan would drive all actions.

A first draft project proposals was presented to the POPS group, to create a wording sub-group (like 2015). Several participants agreed to be involved in the sub-group and a draft timeline was discussed (to be further agreed off-line).

Some points for POPS discussion were then added by CK:
• An advocacy toolkit – how to reach the media and help others do this?
• Dissemination of toolkits/materials to health-facilities
• Develop template action plans for/with health facilities – for taking action based on WHO recommendations.

DP added that the surgical is not a “new audience” but a new additional audience and that it is the right time to engage more people in the campaign. For DP the 5th of May is where at least once a year hospitals organise something for hand hygiene. The hand sanitizing relay will be again promoted in 2016 by the WCC. The action of a relay has shown that compliance improved between before and after.

Benedetta Allegranzi (BA) said that WHO has engaged a communication company to develop the new IPC Global Unit profile and that they would work also on 5th May. It will be also the occasion to announce the new guidelines for SSI prevention that will be published in 2016.

**POPS projects with a focus on low-and middle-income countries where possible**

Several participants gave presentations of some of their current projects in LMICs.

Several topics were covered such as :
• Strategy around hand hygiene in response to Ebola
• Education: teaching, users training
• Work close to the field
• Local production of ABHR
• Hand hygiene promotion in Schools
• Workshops (HHEA, Train the trainers)

During those presentations, DP stated that countries are still using too much PPE even if Ebola is gone. CK and JS added also that there still barriers to overcome in LMICs (ex: needs for empty bottles for local production).

DP stressed the importance that POPS should help in any way they can such as sending empty bottles, posters of the 5 moments,... He also added that the HHSAF is the best tool to ensure sustainability. The leading hospitals are very creative and eager to contribute to improve hand hygiene around the world.

To conclude, the ideal solution for LMICs would be to make available the best solution of the ABHR at the lowest cost.

**An advocacy document on ABHR – proposal for a POPS working sub-group**

CK explain why there is the need for an advocacy document:
• The benefits of ABHR use are known (WHO Guidelines)
• There are still challenges with ‘acceptance’ for many reasons
• The WHO Guideline recommendations and formula for local production can cause confusion
• ABHR is now on the WHO List of Essential Medicines
• Local production is expanding
• There is no one WHO tool that focuses on this topic
• There is now an opportunity to redescribe is use
A document will help to capitalize the fact that the ABHR is now in the WHO Essential Medicines List.

Potential formats were suggested:
- There are many ways to advocate for use of ABHR
- A sub-group of POPS could prepare key wording to describe its use (without bias or self-interest)
- This wording could then be formed into a style that could best be used/have the greatest impact.
- Finally, this could be issued by WHO and be part of the ‘toolkit’ for use in 2016 in support of 5 May SAVE LIVES: Clean Your Hands
- Julie Storr (JS) suggested that this documents could be in 1 or 2 pages and provided to Ministries of Health in a WHO policy brief for the use of ABHR format.

The group agreed to have a sub-group dedicated to this project.

Discussion on the research agenda & a new POPS working group (task force) – a focus on 2020

Ideas were suggested by CK and JS based on a 2014 project for the guidelines.

The Task and Finish Group could:
1. Provide sound, unbiased direction, information and recommendations on issues relating to hand hygiene improvement – research agenda, e.g. ABHR production, tolerability, acceptability and distribution to inform a report;
2. Expect all members to contribute to discussions and formulation of a final report;
3. Ensure all information related to group working is posted on the POPS platform;
4. Provide WHO with a draft report for review and final editing/approval;
5. Assure WHO of the quality and objective nature of the group’s work;
6. Only exist until a final report has been presented to the whole POPS group based on delivery of the agreed objectives.

Membership could comprise of POPS representatives, identified through an open call via the POPS Platform as normal, technical experts, representatives from WHO (other departments), others.

DP stressed the importance of the group working by task force. It would give the opportunity to bring key people in research together, to contribute to the group. Commitment from participants would be critical. The progress of a task force would be followed regularly through outputs which would be shared widely.

Presentation on the new IPC Global Unit

BA introduced the new IPC Global Unit created at WHO. Because of the strong foundation of CCiSC and the Ebola crisis, this unit was approved.

The vision and mission were shared and a web page is available http://www.who.int/gpsc/en/

AOB – global sepsis agenda, WHO Clean Care is Safer Care 10 years commemoration, update on letters regarding ethanol regulation, etc

One participant expressed their concerns on the possible regulation on Ethanol by the European authorities. A letter was sent by the group to the European council. An answer was given and the
situation is currently on hold waiting for any news in the future. DP thanked the group for helping him in drafting the letter.

DP and Ed Kelley (EK, Director of WHO SDS Dept) stressed the global sepsis agenda. They suggested the group to participate in advocating sepsis since this topic deserves public health and healthcare attention. Updates would be given from WHO if a specific agenda is developed.

4. Close of the Twelfth Meeting proceedings

The meeting was closed by EK. He talked about the importance of strong health systems, with IPC at the heart of this including the work of the new Global Unit.

EK reminded everyone that POPS is a WHO project and that WHO will continue to support the model. WHO will be more involved in the future with private organizations.

EK finally announced that an event of around the 10 years of CCISC will happen and they will launch new products and also the IPC global unit.

Thanks were then given to all the participants by DP and EK and the next POPS meeting was suggested to be held in June as usual, exact dates would be circulated.
### Annex 1 - Meeting Agenda and Objectives

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>9.00-9.15</td>
<td>Welcome and Introductions&lt;br&gt;Dr. Edward Kelley &amp; Prof. Didier Pittet</td>
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<tr>
<td>9.15-9.20</td>
<td>Overview of the day’s agenda and objectives&lt;br&gt;Tcheun-How Borzykowski</td>
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<tr>
<td>09.20-9.40</td>
<td>WCC/POPS administrative discussions&lt;br&gt;Tcheun-How Borzykowski</td>
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<tr>
<td>9.40-10.40</td>
<td>The hand hygiene research agenda in 2015&lt;br&gt;Claire Kilpatrick, Prof. Didier Pittet, Prof. Benedetta Allegranzi &amp; HUG staff</td>
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<td>10.40-11.10</td>
<td>Break</td>
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<tr>
<td>11.10-12.25</td>
<td>5 May 2016 – WHO plans, WCC plans and discussion&lt;br&gt;Claire Kilpatrick, Prof. Didier Pittet &amp; all</td>
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<tr>
<td>12.25-13.40</td>
<td>Lunch at hospital restaurant</td>
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<tr>
<td>13.40-14.40</td>
<td>POPS company projects, with a focus on low and middle income countries where possible all (5 minutes each)</td>
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<tr>
<td>14.40-15.15</td>
<td>An advocacy document on ABHR – proposal for a POPS working sub-group&lt;br&gt;Claire Kilpatrick &amp; all</td>
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<td>15.15-15.45</td>
<td>Discussion on the research agenda &amp; a new POPS working group {task force} – a focus on 2020&lt;br&gt;all – Claire Kilpatrick or Jules Storr to present task force TOR (or other)</td>
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<tr>
<td>15.45-16.15</td>
<td>Break</td>
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<tr>
<td>16.15-16.35</td>
<td>Presentation of the new IPC Global Unit&lt;br&gt;Prof. Benedetta Allegranzi &amp; Dr. Edward Kelley</td>
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<tr>
<td>16.35-17.15</td>
<td>AOB – global sepsis agenda, WHO Clean Care is Safer Care 10 years commemoration, update on letters regarding ethanol regulation, etc&lt;br&gt;Prof. Didier Pittet &amp; Prof. Benedetta Allegranzi</td>
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<tr>
<td>17.15-17.30</td>
<td>Meeting close</td>
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Objectives of the meeting

To review and discuss new ways of (project) working for 2016, including administrative issues and building on discussions at the Eleventh POPS meeting (June 2015)

To outline the hand hygiene research agenda taking account of previous recommendations and current global needs, as well as some current research studies at the WCC (HUG)

To establish POPS’ role in progressing the hand hygiene research agenda as one POPS project, and clarify terms of reference for a working group

To describe the need for an advocacy document on alcohol-based handrub and establish a working group to do this work, as one POPS project

To establish current company projects as they relate to the overall POPS goal including progress towards improved hand hygiene in low and middle-income countries, with the aim of facilitating sharing and learning and to harvest rich ideas from the collective strength of the group

To outline WHO and WHO Collaborating Centre ideas/plans for 5 May 2016

To propose and confirm POPS participant contributions and plans for 5 May 2016 promotion, as one POPS project, and to establish a working group for on-going discussions

To provide information on other related global activities and facilitate open discussions

To outline and summarise next steps for POPS activities and agree the next POPS meeting