Report from the Seventh Meeting of WHO Patient Safety Programme (PSP) and Industry Representative

with invited representative from University Hospitals Geneva
(WHO Collaborating Centre on Patient Safety and Infection Control – Improving Practices)

1 July 2013

World Health Organisation (WHO) Headquarters, Geneva, Switzerland

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1. Introduction

This Seventh Meeting, held on 1 July 2013, was convened to continue the collaborative discussions and exploration of potential projects between WHO and all parties signed up to WHO Private Organisations for Patient Safety (POPS). The meeting was opened by Dr Ed Kelley and Professor Didier Pittet, as well as introductions from all in attendance (including those participating by teleconference) and apologies were accepted.

For further information on POPS, its origins, aims and previous meetings, please go to www.who.int/gpsc

2. Summary of the Seventh Meeting proceedings

Dr Kelley outlined the main aim and objectives of the meeting which were included with the agenda. It was explained that overall the meeting was to be focused on finalising discussions, in order to agree on the way forward with collaborative projects, which had been presented to the group over the course of the year and virtually prior to the meeting. The critical need for this progress was emphasized based on the need to coincide with business planning for 2014. The need for a common focus and goal was also highlighted again.

It was noted that this meeting format differed from others as a considerable amount of time had been allocated to POPS participants, to present on key topics aimed at achieving the goal of the POPS collaborative and as requested by participants. Dr Kelley noted the importance of this in sharing and learning and continuing to find common areas of work.

Claire Kilpatrick (POPS manager) then presented a brief outline of the one-year POPS status report being prepared, with 12 key achievements in the last 12 months.

Presentations given at the meeting were then as follows:

- Campaigning and marketing for 5 May 2013 by POPS participants.
- Regional POPS activities.
• Developments in monitoring of hand hygiene.

Presentations were given by a range of POPS participants, asked prior to the meeting to up-dated on their activities in support of WHO hand hygiene recommendations.

• For the 5 May part of the presentations, Dr Benedetta Allegranzi provided an update on WHO activities and achievements, and reminded everyone of the goal of WHO ‘every 5 May’ including how collaborative working could have a added impact. Prof Pittet noted that a lot has been achieved, often with minimal resource, and that social media is now having an impact. He also noted that he was proud of the contribution that POPS had made in 2013.

• For the regional activities part of the presentations, Julie Storr of WHO African Partnerships for Patient Safety (APPS) and Claire Kilpatrick outlined the most recent POPS/APPS proposal with a range of options in order to capitalise on company strengths for providing hand hygiene products/improvement in areas of Africa (while it was noted that donations with the aim of improving hand hygiene is not the overall aim of POPS and any such activities should not lead to ‘addiction’).

A final presentation by Claire Kilpatrick was given on:

• Next collaborative POPS proposals including on routine POPS activities and a new public-facing campaign, as well as the approach of POPS ‘working sub- groups’ to facilitate progress between meetings on key issues/topics.

Key discussion points from the meeting:

• A discussion on the challenges of norms and regulations was limited given time but a next step agreed as sharing further information on this aspect virtually.

• For hand hygiene improvement, the following issues were raised and discussed; does there need to be a specific focus on compliance of doctors, are health-care settings providing accurate hand hygiene compliance feedback, are aspects of culture and human factors being properly addressed, do we have the right tools to engage all in healthcare, including senior management?

• The importance of hand hygiene in curricula was suggested as a way forward in the long-term to address knowledge gaps regarding the WHO 5 Moments in practice. A reminder of the WHO Patient Safety Curriculum was given which includes a section on infection control.

• Joining up hand hygiene messaging with other similar topics was suggested including antimicrobial resistance work.

• Learning from others was proposed as still being useful to POPS, including UNICEF and others in the commercial sector undertaking campaigning on other topics.

• Prof Pittet noted the on-going importance of when and how of product use, how much we have advanced but the need to keep advancing this in healthcare, with consistency to the 5 Moments. He added that the POPS collaborative is powerful; it ensures companies can talk to people as POPS, not just as a company that
produces a product. Feedback from POPS companies on the range of people they speak to on behalf of POPS and the influence this has was welcomed.

Immediate actions following conclusion of presentations were agreed as:

- The presentation slides to be made available to POPS participants through the POPS protected platform.

- For those interested in supporting the POPS proposal on short-term donations to APPS to be contacted to progress this activity.

- For further virtual discussions to be held on key regulation issues if submitted by POPS participants and fitting to WHO’s role.

- A campaign subgroup to be established to work up a public-facing proposal that would meet current needs and have the right approach.

- Aspects of the POPS one-year report to be shared with the group in draft for input.

- Next meeting dates for POPS to be agreed upon via email, for the end Nov/beg Dec 2013, and a date explored immediately prior to APIC conference in California in June 2014 to be set.

To close the meeting, Dr Kelley and Prof Pittet thanked everyone sincerely for their input to the meeting.