



Keeping the Public's Trust: How to Communicate about NHSN Data and HAI Prevention

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Why we all need effective communication strategies



- ❑ **Public reporting of healthcare-associated infections**
- ❑ **Patient notifications during infection control breaches**
- ❑ **Emerging threats for patient safety**
- ❑ **Preparing your facility staff and chain of command to discuss HAIs**

Communication Landscape

- ❑ **HAIs generate significant press**
 - Shift to regional or local focus
- ❑ **Wide and varied audiences**
 - Need for reaching a broad healthcare team
- ❑ **Our science is complex**
 - Topics can be difficult for consumers to grasp
- ❑ **Numerous prevention recommendations**
 - No single behavior can prevent all HAI threats
- ❑ **Need for strong risk communications**
 - Patients experience variety of feelings: fear, loss of trust, lack of control



LIVING IN FEAR
Patients in hepatitis C case brace for fateful results

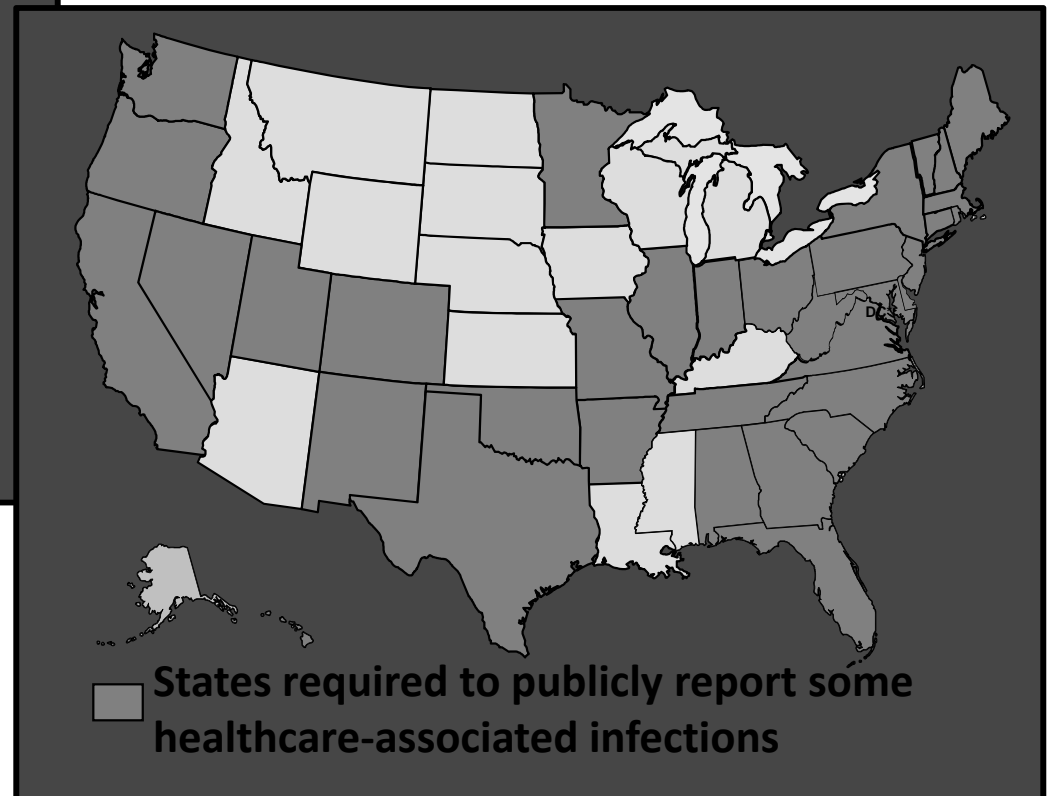


State Legislation Has Increased Transparency with Public Reporting of HAIs

2004



2013



Evolution of Transparency with Patient Notifications



Factors Influencing Risk Perception

Perceptions of risk are influenced by many factors, not just numerical data

More accepted risks:

Those perceived to...

- Be voluntary
- Be under an individual's control
- Have clear benefits
- Be natural
- Be generated by a trusted source
- Be familiar
- Affect adults

Less accepted risks:

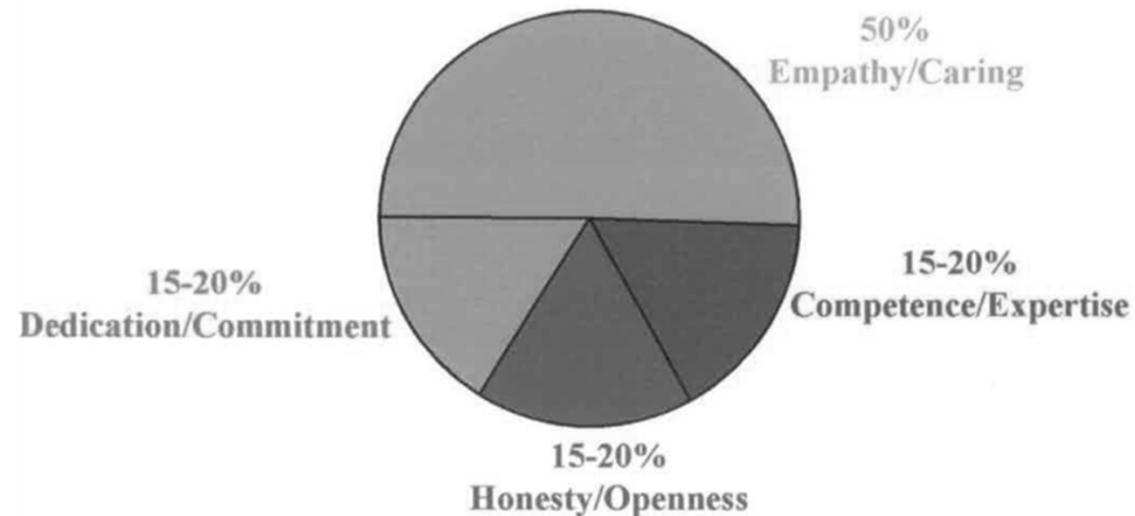
Those perceived to...

- Be imposed
- Be controlled by others
- Have little or no benefit
- Be manmade
- Be generated by an untrusted source
- Be exotic
- Affect children

Maintaining and building trust and credibility within your community is critical

- **Risk communication literature identifies 4 factors that determine whether the public will perceive a messenger as trusted and credible:**
 1. Empathy and Caring
 2. Honesty and Openness
 3. Dedication and Commitment
 4. Competence and Expertise

Trust and Credibility Factors



5 Principles of Risk Communications

1. **Acknowledge the situation**

If you don't acknowledge the situation, people will think you are not aware and then they will start rumors.

2. **Convey empathy**

Messengers are considered trustworthy when they convey: empathy and caring, honesty and openness, dedication and commitment, and competence and expertise.

3. **Ensure transparency**

Be honest, frank, and open. Trust and credibility are difficult to obtain; once lost, they are almost impossible to regain.

4. **Do your homework and brief your colleagues**

Make sure that you know your data and what you are doing to address patient safety. Make sure your facility and higher-ups know this information as well.

5. **Be ready – have a plan**

Develop a response plan for the three scenarios you are most concerned about.

Enhancing Transparency

Patient notification events -- what to do when things go wrong?

- ❑ **Patients may feel fear, loss of trust, and lack of control**
 - Give patients and their healthcare providers action steps
- ❑ **Acknowledge uncertainty**
 - Honestly admit when information is not known
 - Explain what you are doing to learn more; provide a timeframe
- ❑ **Acknowledge emotions**
 - Patients may be angry by the situation
 - Be empathetic and even apologize
 - Send the message that you are working hard to get the situation under control

LIVING IN FEAR

Patients in hepatitis C case brace for fateful results



After years of arthritic treatments that have left Pat Criscito's immune system in tatters, she said a positive test for hepatitis C after surgery last fall at Rose Medical Center would have been a death sentence. She learned Wednesday that her test was negative. See [Arson](#). *The Denver Post*

Photo from the Denver Post

Example #1: Using Transparency to Build and Retain Trust

“We realize that you turn to our medical facility to get better. This event is intolerable to us as well, and we want to work with you to resolve the situation and ensure your safety and well-being. We are taking steps to ensure that this event never occurs again in our facility.”



Example #2: Using Transparency to Build and Retain Trust

With a mean lung function of 97.4% our outcomes for cystic fibrosis are among the best in the country.

Why?

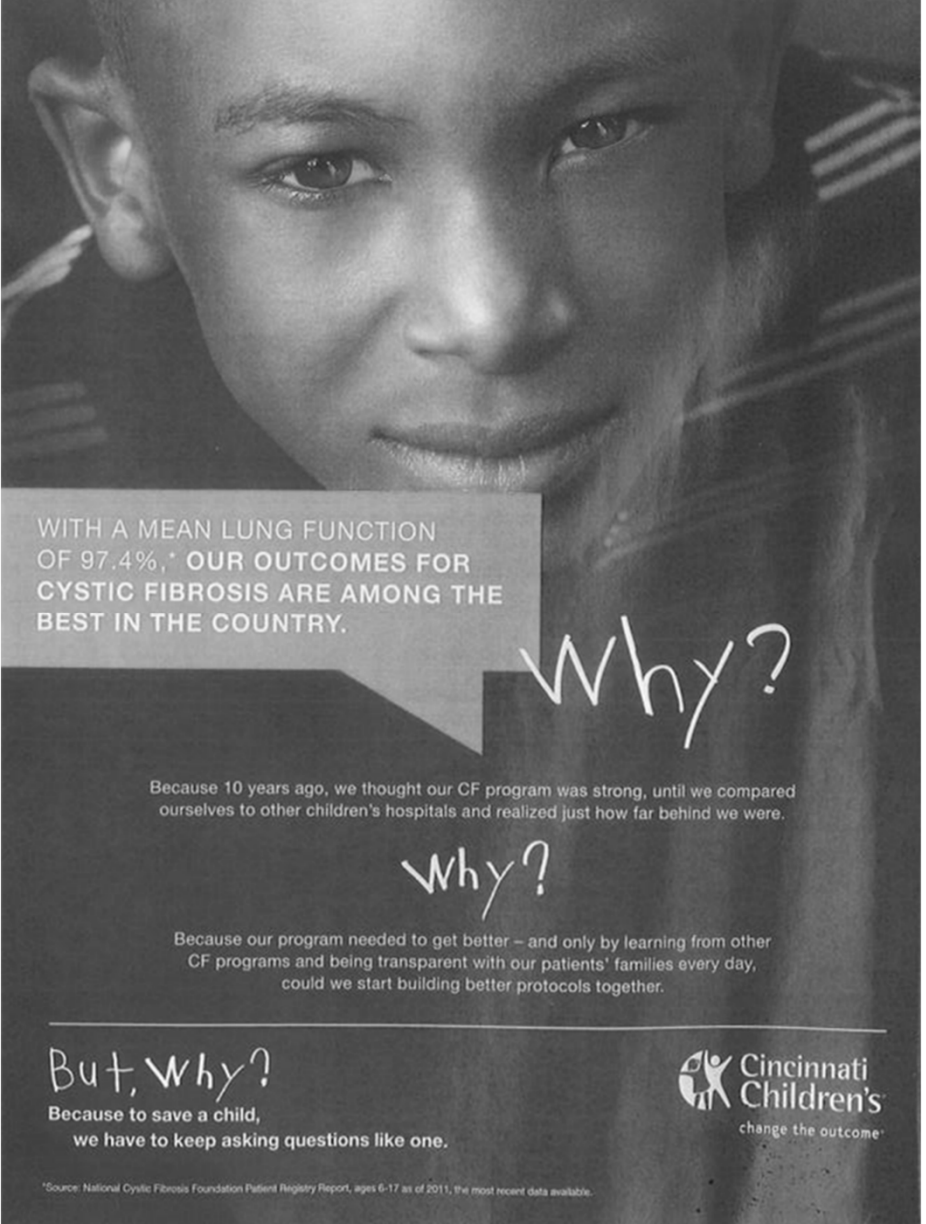
Because 10 years ago, we thought our CF program was strong, until we compared ourselves to other children's hospitals and realized just how far behind we were.

Why?

Because our program needed to get better – and only by learning from other CF programs and being transparent with our patients' families every day could we start building better protocols together.

But, Why?

Because to save a child, we have to keep asking questions like one.



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Because to save a child, we have to keep asking questions like one.

 Cincinnati Children's
change the outcome.

*Source: National Cystic Fibrosis Foundation Patient Registry Report, ages 6-17 as of 2011, the most recent data available.

Example #3: Using Transparency to Build and Retain Trust

Hospital A

Highest
Infection
Rates

Reputation
Challenges

Hospital B

Lowest
Infection
Rates

Not Well
Known

Hospital C

Mediocre
Rates

Best
Reputation

Example #4: Using Transparency to Build and Retain Trust



- ❑ **Engaging consumers can be an opportunity**
 - Educate about prevention efforts
 - Correct misinformation
 - Build trust
 - Instill confidence

Building Trust Within Your Organization

- ❑ **Ensure your chain of command is aware**
- ❑ **Reassure chain of command that they will be kept in the loop**
- ❑ **Set up regular briefings**
- ❑ **Prevent unwelcome surprises**
 - For example: Change in the numbers of patients impacted or surprising infection rates



What you can personally do to earn and keep public trust

□ Always do your homework

- Find out what happened and prepare yourself/facility for responding to tough questions
 - Brief individuals up the chain to prevent surprises
 - Assess who else you should communicate with in the state
 - Engage patient advocates in advance
 - Develop a communication strategy

□ Dialogue as much as possible

- Communicate in a proactive manner
- Avoid communication vacuums which can escalate rumors
- Be transparent wherever possible

□ Messages must address emotional responses

- Expect a variety of emotional and practical responses from consumers
- Empathy, caring, honesty, openness, dedication are key!

Example #5: Be Ready – Have a Plan

- ❑ **Pick three scenarios that most concern you**
 - Public reporting of high HAIs
 - An outbreak
 - Patient notification
- ❑ **Identify the people you would need to speak with inside/outside your organization**
- ❑ **Work with your communications staff to develop a plan**



CDC's Patient Notification Toolkit

A template for a successful patient notification

□ Why a toolkit?

- The circumstances may vary, but the communications strategies are predictable and consistent
- You need to work quickly. Easier to start from a template based on best practices

□ Who should use the toolkit?

- State and local health departments
- Healthcare facilities

□ When to use the toolkit?

- After a health department or healthcare facility has decided to notify patients

Centers for Disease Control and Prevention
CDC 24/7: Saving Lives. Protecting People.™

A-Z Index A B C D E F G H I J K L M N O P Q R S T U V W X Y Z #

Injection Safety

Injected medicines are commonly used in healthcare settings for the prevention, diagnosis, and treatment of various illnesses. Unsafe injection practices put patients and healthcare providers at risk of infectious and non-infectious adverse events and have been associated with a wide variety of procedures and settings. This harm is preventable. Safe injection practices are part of Standard Precautions and are aimed at maintaining basic levels of patient safety and provider protections. As defined by the World Health Organization, a safe injection does not harm the recipient, does not expose the provider to any avoidable risks and does not result in waste that is dangerous for the community. Visit the page on CDC's role in safe injection practices.

New Outbreaks

Vial reuse causes severe infections. [Learn More >](#)

Public Health Education Resources

- Information for Providers**
Slide presentations, FAQs...
- Information for Patients**
Patient Resources, FAQs, Syringe Reuse...
- Preventing Unsafe Injection Practices**
Guidelines, Recommendations...
- Assisted Monitoring of Blood Glucose**
CDC Clinical Reminder, FAQs...
- Recent Publications**
Injection Safety Related Publications...
- Recent Meetings**
Ambulatory Surgical Centers (ASCs)...

Patient Notification Toolkit

Guide to Infection Prevention for

Find the toolkit on www.cdc.gov/injectionsafety

What Patients Expect to See in a Notification Letter

What to Include in a Letter	Key Concerns from Patients	Tone of the Letter
<ul style="list-style-type: none"> • How/where it happened 	<ul style="list-style-type: none"> • What to do next 	<ul style="list-style-type: none"> • Factual, clearly stated
<ul style="list-style-type: none"> • Possible symptoms 	<ul style="list-style-type: none"> • Time frame of disease/testing 	<ul style="list-style-type: none"> • Apologetic, empathetic
<ul style="list-style-type: none"> • Corrective action 	<ul style="list-style-type: none"> • Who's paying for what 	<ul style="list-style-type: none"> • Personal, urgent
<ul style="list-style-type: none"> • 24 hour contact number 	<ul style="list-style-type: none"> • Who's liable 	<ul style="list-style-type: none"> • Soft/neutral
<ul style="list-style-type: none"> • Something to ensure the right people are contacted 	<ul style="list-style-type: none"> • What is the disease and how serious 	<ul style="list-style-type: none"> • Accommodating to the potentially infected
<ul style="list-style-type: none"> • Plan of action/next steps 	<ul style="list-style-type: none"> • Want assurance they are contacting the right person 	<ul style="list-style-type: none"> • Assuring that things will be taken care of

PUTTING IT INTO PRACTICE

Lessons learned from the Outbreak of Fungal Meningitis and Other Infections



TIMELINE

May 21, 2012

First lot of contaminated steroid injections produced by NECC



September 25, 2012

Seven more patients identified by TN Dept. of Health all were treated at the same ambulatory surgical center

September 18, 2012

First meningitis case reported to TN Dept. of Health

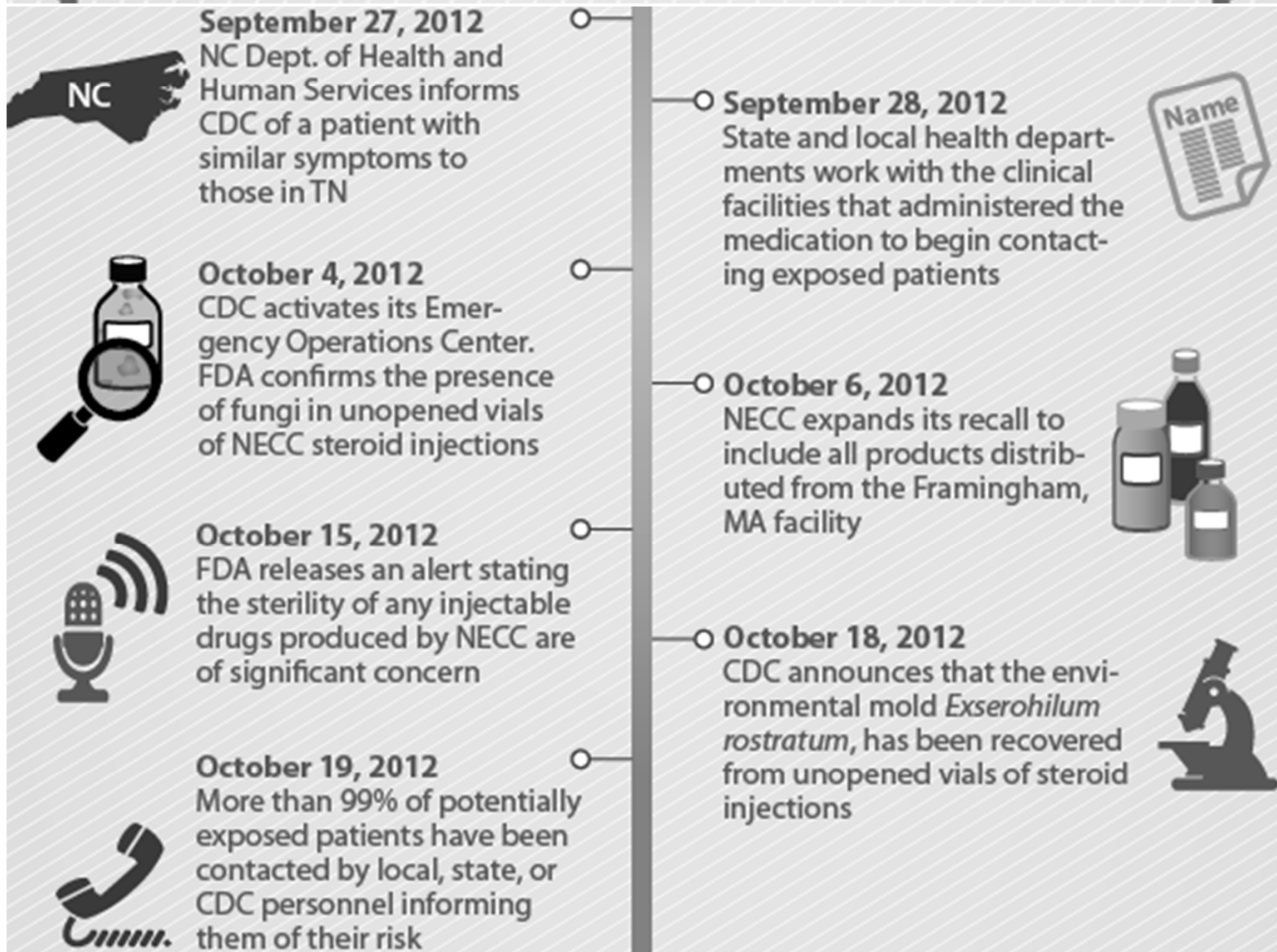
TN

September 26, 2012

NECC voluntarily recalls three implicated lots of steroid injections



TIMELINE



A Tragedy for 14,000 Patients

- **Diane Reed – a 56yo primary caretaker of her wheelchair-bound husband; became the 3rd TN death**

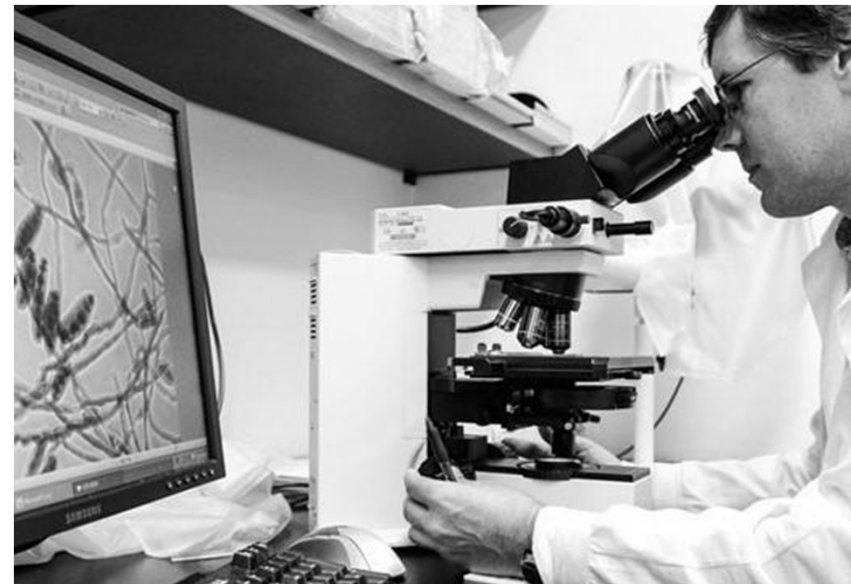


- **George Carey -- 65yo husband of Lillian who lost her life to fungal meningitis. George is still battling symptoms.**



Outbreak of Fungal Meningitis and Other Infections

- ❑ **Significant past experience with patient notifications**
- ❑ **Most patient notifications are around injection safety issues (bloodborne pathogen issues)**
- ❑ **Differences from past experience**
 - Geographic spread (23 states received one of the three contaminated lots)
 - Rarity and the severity of the illness
- ❑ **During patient notifications, clinicians and patients need “action” steps**



Communication Strategy: Fungal Meningitis

Patient Outreach

- ❑ **Ensuring patients had the necessary information**
 - Provided names and locations of facilities that received product in a clickable map
 - 2 new websites with daily updates with English and Spanish info
 - Thousands of CDC INFO calls answered
 - Monitored and responded to social media in real-time
- ❑ **Based patient outreach on previous formative research and experience**



99%

of patients warned of the need to seek immediate care in less than one month

Communication Strategy: Fungal Meningitis

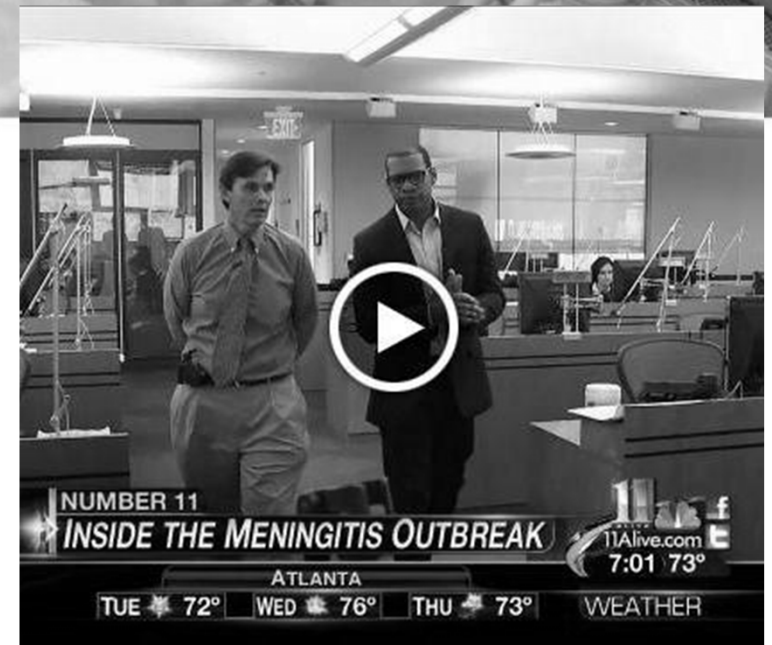
Media Outreach

- ❑ **Provided media with information to disseminate the message broadly**
 - Multiple press conferences
 - Invited press to CDC for tour of EOC and laboratory
 - Provided daily 2pm updates
 - B-roll package and still images
 - Digital Press Kit updated regularly
 - 2 press officers working full-time
 - Provided Spanish-speaking spokesperson

Inside CDC's efforts to stop meningitis outbreak

comments 0 Tweet 33 +1 3 More +

By Jonathan LaPook



Communication Strategy: Fungal Meningitis

Clinician Outreach

- **Enhancing clinician outreach**
 - Reached out to 245 professional organizations
 - Provided rapid notification to clinicians
 - 10 Health Alert Network notifications
 - 4 new treatment guidelines, updated regularly
 - Held clinical conference calls
 - 4 COCA calls and two webinars (reaching >5,500 clinicians)
 - Facilitated mechanisms to answer clinical questions directly
 - Enlisted public-private partnerships



Distributed via the CDC Health Alert Network
October 4, 2012, 17:05 ET (5:05 PM ET)
CDCHAN-00327

This is an official
CDC HEALTH ADVISORY

Meningitis and Stroke Associated with Potentially Contaminated Product

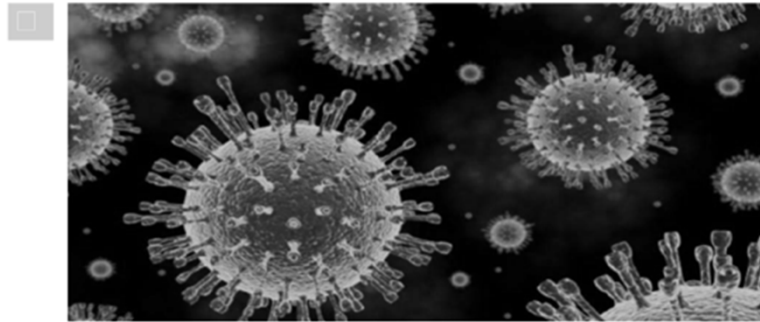
Summary

The Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA) are coordinating a multi-state investigation of fungal meningitis among patients who received an epidural steroid injection. Several of these patients also suffered strokes that are believed to have resulted from their infection. As of October 4, 2012, five deaths have been reported. Fungal meningitis is not transmitted from person to person. These cases are associated with a potentially contaminated medication. Investigation into the exact source is ongoing; however, interim data show that all infected patients received injection with preservative-free methylprednisolone acetate (80mg/ml) prepared by New England Compounding Center, located in Framingham, MA.

CDC Applauded for Communication Efforts

Twitter's Surprising Reaction to the Meningitis Outbreak

5.1k /
SHARES



Lorenzo Franceschi-Bicchieri / Oct 16, 2012

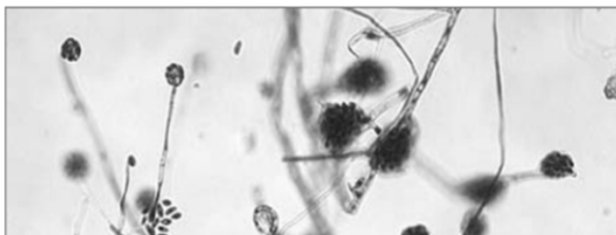
Fedblog

Government Executive Editor in Chief Tom Shoop, along with other editors and staff correspondents, look at the federal bureaucracy from the outside in.

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Meningitis, Twitter and Federal Brands

By Tom Shoop | October 16, 2012 | 2 Comments



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SHARE

“When a dangerous disease outbreak hits social media, the connected generation trusts some governmental agencies more than others, and Twitter users tend not to panic.”

Mashable.com

October 16, 2012

“[CDC has] done an excellent job in communicating this story to clinicians and patients a like. From the website, to FAQs, to clinician webinars...the CDC has been transparent, clear, direct and timely.”

Reflections On Contemporary Issues In The Fields Of
Business Continuity Planning & Emergency Management

October 20, 2012

“When it comes to a public health crisis, the public apparently wants to know what the Centers for Disease Control and Prevention has to say”

Fedblog

October 16, 2012

Building trust takes commitment *before* the crisis

RAGAN'S
PR Daily

Home Social Media Crisis Marketing Writing & Editing Events Training Awards

CDC adopts lead role in communicating deadly meningitis outbreak

By Gil Rudawsky | Posted: October 15, 2012

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The Face of the Matter

In today's world, what you say is as important as what you do



With the deadly o
Disease Control e

The CDC has a p
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Home About Me

Posted on **October 17, 2012** — Previous

“The CDC has spent buckets of time, money, personnel and resources on establishing themselves as a credible, plain language, accessible, available source of health information, and now we’re seeing the result of that effort. In a crisis, the public (and the media) are turning to them for updates and the latest news...If we want to be trusted in a crisis, we have to build that trust before the crisis. And there’s no shortcut for doing that.”

The Face of the Matter
October 17, 2012

<http://faceofthematter.com/2012/10/17/building-trust-is-an-everyday-job/>

Building Trust is an Everyday Job

It's not often that I come across situations that involve crisis communications, public health, social media and reputation management. Call it the Jim Garrow quad-fecta (yes, I just made that up). But today I have one. And it's a doozy.

Keys to Success

- ❑ **Be transparent by demonstrating**
 - Honesty & openness, empathy & caring, dedication & commitment, and competence & expertise
 - Acknowledge uncertainty and patient's fears
- ❑ **Listen and be compassionate in your messaging**
 - Include patient advocates, your audience, in your planning efforts
- ❑ **Staying ahead of the communication curve**
 - Communicate often
 - Utilize a traditional and social media strategy
- ❑ **Ensure collaboration with key stakeholders**
- ❑ **Build trust in advance of a crisis**
- ❑ **Prepare in advance so you can *ACT FAST!***





Questions?

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