



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

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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 are difficult for consumers to grasp
- ❑ **Numerous prevention recommendations**
 - No one behavior can prevent all HAI threats
- ❑ **Need for strong risk communications**
 - Patients may feel variety of feelings:
fear, loss of trust, lack of control



Objectives for HAI Communications

- ❑ Increase patients' and caregivers' awareness around healthcare-associated infections
- ❑ Educate healthcare providers on best practices to prevent HAIs in all healthcare settings
- ❑ Improve transparency and accountability around reporting of medical errors






Communication Science: *Myths vs. Actions*

<i>Myths</i>	<i>Actions</i>
Telling the public about a risk is more likely to cause undue alarm	Decrease the potential for alarm by giving people a chance to express concerns
We shouldn't go to the public until we have the problem solved	Discuss information about prevention programs early and involve consumers in the process
Consumer advocates stir up unwarranted concerns	Patient advocates help focus public attention that can even result in increased resources for IP programs. Work with them rather than against them.
HAIs are too difficult for the public to understand	Focus on delivering clear communication!
Risk communication is not my job	Effective communication is valuable for everyone in healthcare. You can play a unique role in leading this effort within your institutions and at the bedside.

Best practices in communication

- ❑ Select specific audiences for messages
 - Audience segmentation
- ❑ Learn from audiences and shape messages for them with their input
 - Formative evaluation
 - Working with consumers
- ❑ Use what we know about behavior
 - Behavior theory
 - Example: if you are tackling a healthcare provider behavior, use observation.
- ❑ Use multiple channels to reach audiences and to repeat messages
 - Optimizing exposure to messages
 - Frequency of the message can reinforce the behavior
- ❑ Build in feedback loops
 - What are audiences hearing?
 - How are they responding?

We will discuss how to...

- ❑ **Maintain trust with your patients, public, policymakers, and media**
- ❑ **Ensure accountability – improving communications around public reporting of HAI data**
- ❑ **Engage consumers toward infection prevention efforts**
- ❑ **Enhance transparency – what to do when things go wrong?**
 - Patient notification events





BEING ACCOUNTABLE

Improving communications around public reporting of HAI data

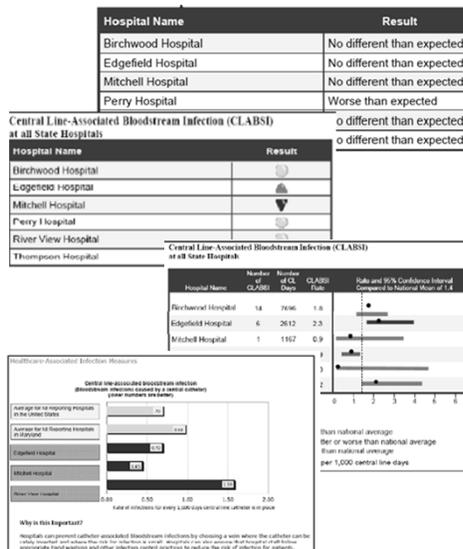
Changing landscape of HAI public reporting

- ❑ **28 states and D.C. have public reporting laws**
- ❑ **CMS requirements are impacting facilities nationwide:**
 - Hospitals
 - Dialysis facilities
 - Long term acute care hospitals
 - Inpatient rehabilitation facilities
 - Acute care hospitals
 - Outpatient surgical centers

We all need to be able to explain HAI data!

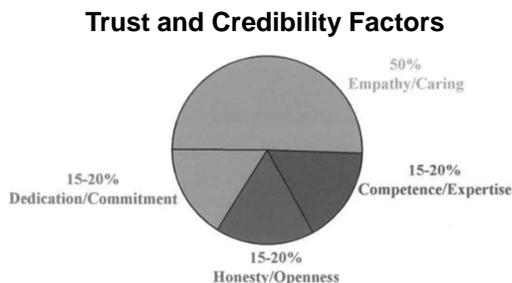
Limited data on patient's understanding of infection reporting

- ❑ Limited assessment of what patients understand from publicly reported infection data
- ❑ Focus groups done by HHS Region VI
 - Tested 6 examples of publicly reported data that is currently being used
 - Preference for data as displayed on CMS' *Hospital Compare* or combination of numbers and symbols
 - Mixed responses on how data would influence decision making
 - Full analysis and report being written
- ❑ What you can do
 - Release information simultaneously with data releases to frame the story for your facility, organization, or system



Need to maintain and build trust and credibility within your community

- ❑ When communicating on infection data, maintaining trust 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



Navy Environmental Health Center Risk Communication Primer: http://www-nehc.med.navy.mil/downloads/deployment_health/primer.pdf

Seven Rules for Maintaining Trust

1. **Stop digging**
The first thing to do when you are stuck in a hole: stop digging. Overconfidence or over-reassurance makes the credibility hole deeper.
2. **Acknowledge the situation**
If you don't acknowledge the situation, people will think you are not aware and then they will start rumors.
3. **Empathize and even apologize**
Never let your efforts prevent your acknowledging the tragedy of an illness, injury, or death.
4. **Listen to and legitimize the public's concerns**
Your goal is to produce an informed public, not to defuse public concerns or replace actions.
5. **Ensure transparency**
Be honest, frank, and open. Trust and credibility are difficult to obtain; once lost, they are almost impossible to regain.
6. **Set up accountability mechanisms**
Let people know what you will do to address the issue and how you will report progress.
7. **Forecast new emerging problems on the horizon**
Anticipate future patient safety channels and how you are going to address them.

What you can personally do to win and keep public trust

- ❑ **Always do your homework**
 - Advance of public release of data
 - Pull your infection data; Brief individuals up the chain to ensure no surprises
 - Assess who else you should communicate with in the state
 - Engage consumers in advance
 - Develop a communication strategy
- ❑ **Dialogue as much as possible**
 - Communicate in a proactive manner
 - A communication vacuum can lead to escalating 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!

Communicating with the Public

Avoiding Pitfalls

Topic	Do...	Don't...
ACRONYMS	Define all technical terms and acronyms	Use language that may not be understood by even a portion of your audience
NEGATIVE ALLEGATIONS	Refute the allegation without repeating it	Repeat or refer to the negative allegation
RELIANCE ON WORDS	Use visuals to emphasize key points	Rely entirely on words
TEMPERMENT	Remain calm. Use a question or allegation as a springboard to say something positive	Let your feelings interfere with your ability to communicate positively
CLARITY	Ask whether you have made yourself clear	Assume you have been understood
ABSTRACTIONS	Use examples or analogies to establish a common understanding	Assume that people understand the complexity of HAIs

Communicating with the Public

Avoiding Pitfalls

Topic	Do...	Don't...
PROMISES	Promise only what you can deliver. Set and follow strict deadlines.	Make promises you can't keep or fail to follow through on promises made.
MONEY	Refer to the importance you attach to health and safety; remember your moral obligation to public health outweighs financial considerations.	Refer to the amount of money spent as a representation of your concern. Allow cost to get mixed into a conversation associated with patient safety.
RISK	Give your best estimation, based on the science, on the risk (especially associated with infection control lapses).	State absolutes or expect the lay public to understand risk numbers.
BLAME	Take responsibility for your share of the problem; use empathy.	Try to shift blame or responsibility to others.
NUMBERS	Emphasize performance, trends, and achievements. Explain what you are going to do to improve, especially if the numbers are bad.	Turn the conversation into an attack on the accuracy of the numbers, the system, or place blame elsewhere.

ENGAGING CONSUMERS



Engaging consumers is critical

- **External viewpoint always beneficial**
 - Get feedback on messages and communication efforts
 - Ensure that what we are embarking on makes sense to people outside your inner circle
 - Verify that the actions we are taking are appropriate given the risk
 - Cooperation increases credibility
- **To the extent possible, involve consumers in the decision-making process**
 - Engage early and clarify their role
 - Acknowledge situations where input is heard, but may not always be acted upon
- **REMEMBER -- At the end of the day, we all want the same thing – *Patient Safety!***

How CDC started working with patient advocates

- ❑ Regular conference calls with patient advocates
- ❑ Collaborations on topic-specific projects
- ❑ Specific calls to explain our science as embargos lift
- ❑ Held first “Conversation with Consumers” at CDC in June 2010



Response from Consumer Meeting – Blog Quotes



The Dirty Truth: Spread the Word, not the Germ

Patient safety activists hold “conversation” with CDC

Posted by Denise at 10:00pm on 06/16/10

On June 16, Consumers Union's Safe Patient Project and 11 patient safety advocates from 10 states attended the first “Consumer Conversation on Healthcare-Associated Infections” at the Centers for Disease Control and Prevention (CDC) in Atlanta. The goal of this day-long meeting was to discuss hospital infection issues and how consumers and CDC can work together to eliminate them.

And we had interactive discussions with CDC experts about their website, educational materials for consumers, multi-drug resistant organisms (C. diff, MRSA, gram-negative infections), the Recovery Act and funds going to the states on reducing hospital infections, tracking and reporting hospital infections, and medical harm in outpatient settings (ambulatory surgical centers, nursing homes, etc.). Consumers confronted agency staff with their concerns about various issues, including the agency's guidelines on preventing MRSA infections and the lack of high-profile attention to this problem that affects 2 million hospital patients every year.

Kathy Day, a patient safety advocate from Maine who attended the meeting, wrote in her blog: “Never in my wildest dreams did I expect to be sitting in a conference room, having a ‘conversation’ with top ranking CDC physicians and others, and confidently and repeatedly expressing my personal and professional opinion on MRSA control.”

All of these advocates have been working on the front lines in their states for infection prevention and hospital accountability, to pass public reporting laws. As leaders of patient safety nonprofit organizations and committee members for state hospital infection advisory groups, these individuals brought personal experience and expertise about medical harm to the CDC. The CDC hears from hospitals, doctors, and health care administrators year-round, which is why this consumer meeting marked a critical moment for starting an honest, productive conversation with them about hospital-acquired infections beyond the statistics and the data, and we of course value that information too.

The availability of hospital infection rates—which motivates hospitals improve their prevention efforts—was brought upon by a consumer movement led by Consumers Union and advocates working together in the states. As our Campaign Director Lisa McChiffet wrote in her recent blog for the CDC, our efforts over the past 7 years have changed the health care environment where safety improvements became a must. In February, the CDC officially endorsed public reporting as a way to eliminate hospital infections, and consumers deserve credit for stimulating these changes.

CDC and activists intend this hospital infection conversation to be ongoing in order to support the CDC's efforts on infection prevention and for the CDC to incorporate consumers perspectives moving forward.

For visual evidence of this meeting and to learn more about these advocates and their work on hospital infections, visit our Flickr photo album here.

“Never in my wildest dreams did I expect to be sitting in a conference room, having a ‘conversation’ with top ranking CDC physicians and others...”

“...the CDC is becoming more consumer friendly.”

“It was wonderful to hear the CDC officials saying that ELIMINATION is their goal.”

“CDC and activists intend this hospital infection conversation to be ongoing in order to support the CDC's efforts on infection prevention and for the CDC to incorporate consumers perspectives moving forward.”

Engaging a patient advocate

- ❑ **Start local – look for advocates who are outside your healthcare system but in the vicinity**
- ❑ **Groups you can tap for assistance**
 - Consumers Union or other patient safety groups
 - State HAI Advisory Board (most have a patient advocate)
- ❑ **Initial face-to-face meeting to establish plan for working relationship**
- ❑ **Regular conference calls (monthly) and periodic face-to-face meetings (quarterly)**
- ❑ **Items to discuss:**
 - Progress on prevention collaboratives
 - New initiatives
 - Communicating with patients and the community
 - Public reporting of infection data

ENHANCING TRANSPARENCY

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



LIVING IN FEAR

Patients in hepatitis C case brace for fateful results



After years of arthritic treatments that have left Pat Crisisto'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. *By James The Cancer Post*

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

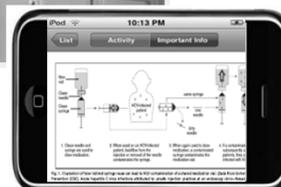
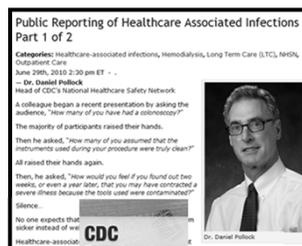
Fischhoff et al. 1981

Coming Soon: Patient Notification Toolkit

- Provides communication assistance to local/state health departments, healthcare facilities, and others
 - Example letters
 - Sample letter with no disease transmission identified
 - Sample letter with disease transmission identified
 - Sample letter for primary healthcare provider notification of testing recommendations
 - Sample patient test results letter (for negative results)
 - Planning for media
 - Writing messages, spokesperson prep, etc.
 - Example press releases and media fact sheets
 - Call center support
 - How to set up your call center
 - Questions and answers for call centers
 - Risk communication expertise

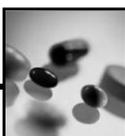
Website Resources

- A Primer on Health Risk Communication Principles and Practices:
 - <http://www.atsdr.cdc.gov/risk/riskprimer/index.html>
- Visit CDC On-line:
 - www.cdc.gov/hai
- CDC's Safe Healthcare Blog
 - <http://www.cdc.gov/safehealthcare>
- CDC's Expert Commentary Series on Medscape
 - <http://www.medscape.com/partners/cdc/public/cdc-commentary>



Take Away Points

- ❑ **Plan early**
 - Engage partners and build relationships before a crisis
- ❑ **Be transparent**
- ❑ **Communicate often**
- ❑ **Listen and be compassionate in your messaging**
- ❑ **Include patient advocates, your audience, in your planning efforts**
- ❑ **Focus on clear language**
- ❑ **Learn from others on what worked**



Questions?

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