1. Welcome and Introductions

Dr Ed Kelley (EK), WHO SDS Director welcomed everyone to the meeting. Prof Didier Pittet (DP) added his welcome. Introductions were then made.

For further information on the background to POPS please read http://www.who.int/gpsc/pop/en/

2. Overview of the day’s agenda and objectives

Claire Kilpatrick (CK), POPS Programme Manager, outlined the agenda and objectives of the day (see Annex 1). She emphasized that the second half of the meeting would focus on group discussions with the aim of articulating future POPS projects.

3. Summary of the Eleventh Meeting proceedings

2015 activities

CK outlined all that WHO had delivered for 5 May 2015. The impact and reach of SAVE LIVES: Clean Your Hands campaign messages and activities including for the #safeHands social media exercise were presented. The specific point of new government commitments that have been featured on the WHO web pages was highlighted http://www.who.int/gpsc/5may/quotes/en/ as well as the acknowledgement given to those who had promoted SAVE LIVES: Clean Your Hands on their web pages and the appreciation given in Professor Pittet’s 5 May global teleclass including for POPS http://www.who.int/gpsc/5may/slcyyh-10years.pdf?ua=1. Before finishing the overview of 5 May 2015, CK acknowledging the leadership and role of Professor Pittet at the WHO Collaborating Centre at HUG and recapped on the new posters available in the ongoing promotion of hand hygiene http://www.who.int/gpsc/5may/tools/workplace_reminders/en/.
CK then highlighted the planned activities for the rest of 2015 including; that Professor Pittet will continue to lead on collating health facility hand sanitizing relay information until September, that WHO will continue with the Hand Hygiene Self-Assessment Global Survey aiming to have thousands of health facilities submit their results, that the WHO Clean Care is Safer Care web pages will be updated including the POPS pages, and that an announcement will be made regarding the 10 year Clean Care is Safer Care anniversary commemoration plans (October 2015).

Action: for WHO to share plans through emails to ensure POPS participants are kept up to date, particularly in relation to the 10-year anniversary plans.

Formal presentations were then given by GOJO, 3M, and Deb with the remaining POPS attendees giving informal updates on all the efforts made in support of 5 May 2015. Activities ranged from creating new social media accounts to drive messages, creating new web pages to promote 5 May, issuing blogs, press statements and videos, hosting events, targeting consumers, targeting health facilities in specific regions and countries – with a wide range covered by all companies as a result (NB All slides were shared on the POPS sharing ‘platform’). CK noted once again that in order to present a robust POPS 5 May report numbers are actually needed. Discussion ensued with all participants regarding the successes and challenges of executing 5 May plans. Professor Pittet noted that some countries still need more support than others and thanked everyone for their amazing efforts given the reach to health facilities is very much achieved through POPS work. CK also thanked participants for their contribution to the 5 May sub-group project working, which had worked well through regular virtual communications. A question was asked with regards to other health care campaigns that companies support and promote; world water day and global handwashing day were noted as well as support for occupational skin disease campaigning.

Benedetta Allegranzi (BA) gave a presentation on all of the infection prevention and control work currently underway within WHO and the focus for next steps – this included all programmes of work, hand hygiene being just one of these.

**Hand hygiene related to the Ebola outbreak and African context**

Julie Storr (JS) gave a general overview of the situation related to hand hygiene and infection prevention and control given all that had been learned from the Ebola outbreak. She featured recent reports and progress and how this all related to universal health coverage and the millennium development goals which will be moving to the sustainable development goals. She ended this stimulating session by posing probing questions to the group:

- Does the “new world” post Ebola make a difference to potential future POPS projects?
- Is there a potential project for 2016 to leverage the “ABHR on the Essential Medicines List” and get ABHR into areas it currently is not?
What is the role of POPS in training and capacity building (e.g. HHSAF) in the future?

Overcoming barriers to product availability

Maggie Montgomery from WHO Water and Sanitation and Hygiene (WASH) presented to the group as an invited guest. She explained how WASH work to enhance standards in developing countries including work with governments, UNICEF and other non-governmental organizations (NGOs). Key learning included the common goal of addressing barriers to the right infrastructure in health care for hygiene and Maggie explained how pooled funding from a range of sources is used to enhance standards in what they are calling early adopter countries. Meetings are held in countries and evaluation of impact to increase water quality and decrease diarrhea, for example, is a goal. It was agreed that an open mind would be kept as to how collaborative working with WASH could be further enhanced.

The group was reminded by one participant that there previously had been a discussion on how WHO logistics arranges purchases and how POPS could play a role in this. It was noted that this discussion had not progressed as yet.

A lengthy discussion look place with regards to a current move in Europe to regulate the use of ethanol in health care due to perceived potential carcinogenic harms (this is not directly related to hand hygiene products but could affect these). Previous work by some POPS members and Professor Pittet was outlined with a number of suggestions for next steps including a letter to be presented at a meeting being held in September. Professor Pittet agreed to lead on this. CK reminded all of the recent addition of the WHO alcohol handrub formulation to the official Essential Medicines List and the opportunity this provides. It was agreed that understanding of alcohol handrub was still variable around the world and more advocacy would be important including the potential of using both infection prevention and occupational health communities. CK and JS reminded all that terms of reference for a working group on aspects related to alcohol based handrub use had been previously circulated but no feedback had been received.

POPS forward strategy

Firstly, CK briefly outlined the POPS achievements in the last year that would be summarized as normal for an annual overview in the coming weeks.

EK emphasized that ways of working should evolve to ensure POPS can meet its overall goal, including a focus on developing countries, and explained to the group that the department in WHO was also evolving.

Everyone was reminded that at the 10th POPS meeting in December 2014, it was stated that the working/governance structure for POPS would be revisited in 2015. A revised working model for POPS was then presented as follows; the WHO Collaborating Centre at HUG will assume day to day management
and administration of POPS working, with the initiative remaining under WHO HQ’s overall leadership i.e. strategic direction and governance will still being provided on a routine basis. It was explained that this was a great opportunity after three years of POPS for hand hygiene, in order to revise roles and responsibilities and refresh the working model. The next stage in this plan was explained as being appointment of a new project manager at HUG and intense collaborating working between HUG and WHO HQ to ensure a smooth transfer of responsibilities while continuing with POPS communications as normal. EK later ratified and reemphasized this new approach for the group.

In support of the POPS forward strategy discussion, including collaborative projects, CK provided some suggestions related to education, research and system change (affordable, reliable product availability) in order to drive next steps. A number of comments were received from participants including the potential need for a five-year strategy and understanding the volume of work, budgets, etc. A range of ideas were muted. CK reminded everyone that POPS document templates exist for progressing project plans. BA noted that there might be an opportunity for other areas of project working outside of those muted for hand hygiene. A further discussion ensued on accreditation and while CK explained this is not WHO’s role a way in which some kind of acknowledgement to programmes would be explored; the hand hygiene self-assessment framework is currently the way WHO practically promotes standards in health care.

**Action:** A table featuring muted ideas, grading scores in relation to priority and interest in being part of any sub group working, to be circulated and completed by all with a view to project proposals being available for the next POPS meeting where final decisions will be made.

### 3. Close of the Eleventh Meeting proceedings

**Date of next meeting**

It was agreed that a Doodle poll would shortly be circulated to agree a date in December 2015.

Professor Pittet and Dr Ed Kelley then closed the meeting.

**Annex 1 - Meeting Agenda and Objectives**

Chairing Organizations: WHO and HUG

- **9.00-9.15**  *Welcome and introductions - Dr Kelley (EK) & Prof Didier Pittet (DP)*

- **9.15-09.25**  *Overview of the day’s agenda and objectives – EK & Claire Kilpatrick (CK)*
09.25-10.00 Overview of 5 May 2015 and on-going activities in 2015 + discussion – CK & All

10.00-10.30 Feedback from POPS participants on 5 May 2015 activities – All (5 mins each)

10.30-11.00 Break

11.00-11.30 Feedback from POPS participants on 5 May 2015 activities – All (5 mins each)

11.30-12.00 Overview of hand hygiene progress related to Africa/the Ebola outbreak - CK, JS

12.00-12.45 Overcoming the barriers to product availability in low-and middle-income countries – examples from others - TBC

12.45-13.45 Lunch

13.45-14.00 Introduction to the potential for a POPS forward strategy & afternoon workshops

14.00-15.30 Working group time

15.30-15.50 Break

15.50-16.30 Workshop feedback

16.30-17.00 Closing discussion, date of next meeting and meeting close

**Objectives of the meeting**

To outline the WHO/WCC aims for hand hygiene promotion and improvement in 2015 including photo promotions, hand sanitizing relay, completion of the WHO Global Hand Hygiene Self-Assessment Framework Survey and use of WHO hand hygiene improvement tools

To describe the role of POPS in influencing action in support of the WHO 5 May call to action

To overview hand hygiene activities related to Africa/the Ebola outbreak including inclusion of alcohol-based handrub on the WHO Model List for Essential Medicines

To consider the learning from other programs who provide/support resources/products in developing countries

To identify next steps in addressing outstanding barriers to reliable product availability in low income countries
To facilitate sharing and learning to harvest rich ideas from individual POPS participants

To outline and summarise next steps for POPS activities.

**Proposed working groups for meeting discussions on future projects**

Research and development – a POPS ‘small grant’ concept
Education/awareness raising – role in 5 May going forward and a new campaign?
System change – overcoming barriers/regulatory challenges (key actions/projects)
POPS working going forward – evaluation of the platform model.