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Contact Investigations for Highly-Resistant Microorganisms (HRMO): a Mixed-methods Analysis of Patients' Comprehension of and Self-reported Compliance with (Self-)sampling Requests Post discharge.

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BACKGROUND & AIM

When a Highly-Resistant Microorganism (HRMO) is unexpectedly found in a clinical culture of a patient, contact investigation is an important tool to identify other, unrecognized, colonized patients. Many Dutch hospitals include contact patients that are already discharged. These contact patients receive a (self-)sampling request at home, including a letter with materials and instructions

This study aimed: to provide insight into patients' comprehension of and self-reported compliance with HRMO (self-)sampling requests post-discharge.

METHODS

- Multicentre study with a mixed-methods approach: •
 - 8 hospitals in the South-western region of the Netherlands.

<u></u> 1. Letter analysis:

- 15 (self-)sampling request letters from different hospitals.
- The Common European Framework of Reference (CEFR) language level was determined.

Questionnaires:

- Random selection of patients that received a (self-)sampling request letter from their hospital in 2018/2019 (n=664). Determine discharged patients':
 - Comprehension of the letter
 - П. Self-reported compliance with (self-)sampling request
 - III. Reasons for (non-)compliance.

3. Semi-structured interviews:

- Random selection of questionnaire respondents (n=29).
 - Gain insights in letter comprehension and reasons for (non-)compliance.

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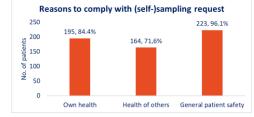
1. Letter analysis

- 4 letters CEFR-level B1.
- 4 letters CEFR-level B1-B2.
- 7 letters CEER-level B2

2. Questionnaire

- Response rate: 237/664 patients, 35.7%
 - MRSA: 100 patients. 42.2%
 - VRE: 90 patients. 38.0%
 - CPE: 25 patients. 10.5%
 - Acinetobacter baumannii; 13 patients, 5.5%
 - Pseudomonas aeruginosa; 9 patients, 3.8%.

High self-reported compliance: 207/235 patients, 88.8%.



More patients did not comply with (self-)sampling requests when receiving a letter in a higher CEFR-level (B2) compared to a lower CEFR-level (<B2) (9.8% vs. 2.5%). although non-compliant numbers were small.

CONCLUSIONS

Patients showed an overall good comprehension of and high self-reported compliance with contact investigations postdischarge.

However, the language level in communication to patients should receive more attention when involving patients in infection prevention.

Table 1 Patients' comprehension of (self-)sampling request letter

Question	N	%		
Was the information about the contact investigation clear at the	time? (n=2	29)		
Yes	206	90.0%		
No/Partially	23	10.0%		
Did you find the information about the bacteria clear at the time? (n=230)				
Yes	188	81.7%		
No/Partially	42	18.3%		
Did you find the information about taking the swabs clear at the time? (n=228)				
Yes	206	90.4%		
No/Partially	22	9.6%		
Was it clear how you would get the results of the screening? (n=230)				
Yes	187	81.3%		
No/Partially	43	18.7%		

Semi-structured interviews Qualitative analysis is ongoing.

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