

GOJO SMARTLINK Observation System Application



The Hypochondriacs

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GOJO's Project Goals

- **Are we solving the right customer problem? What is the biggest pain point for our customer?**
- Does the customer care about the problem or are they doing it because it's a regulatory requirement?
- **What additions could round out the total solution?**
- What is the right business model to drive behavior change in staff hand hygiene observation?
- **What other market activation approaches should we be considering?**
- **This is GOJO's first software-only product – how can we most effectively promote and sell this?**
- In this digital age, what mediums can we & should we leverage?
- What are some best practices in trial-to-subscription models for software?

Our Objectives

Research the background on hand
hygiene

Understand the application and hygiene
monitoring market

Gather information on hospital needs

Look for alternative markets and the
barriers to sales



1980: First national hand hygiene guidelines published

2009: HITECH Act put into place to accelerate the use of electronic health record systems

VANDERBILT UNIVERSITY
MEDICAL CENTER

2009 - 2014: Vanderbilt University Medical Center increased hand hygiene compliance rates from 50% to 95% with the use of education, incentives, monitoring systems and eventually an app almost identical to SMARTLINK Observation System

1995-1996: CDC/HICPAC in US suggests that antimicrobial soap/water less antiseptic agent be used to clean hands



2002: HICPAC guidelines make alcohol-based hand rubbing new standard

Application and Hygiene Monitoring Market

- Main competitors

- HandyAudit, mAiriner, and Hygistics
- Many features tend to be similar between each hand hygiene app on the market
- All three of these companies are small software companies devoted to this application



Why Should Hospitals Adopt This Technology?

- Legal
 - “Corporate negligence is a doctrine under which the hospital is liable if it fails to uphold the proper standard of care owed to the patient.”-Pennsylvania Supreme Court, 1991
- Customer satisfaction
 - Gallup poll: 57% claimed a hospital’s history of medical errors had “a great deal of influence”
 - Researchers in Taiwan found the use of cloud computing resulted in higher perceived levels of trust

Why Should Hospitals Adopt This Technology?

- Moral
 - Intra-hospital infections cause 100,000 deaths per year

- Financial
 - Estimated intra-hospital infections cost upwards of \$30 billion
 - Loss of government funding
 - IOT spending estimated to increase to \$9.5 billion by 2020
 - HITECH Act

Surveys

- Interviewed nurses from 5 area hospitals
- Focus of questions
 - Current Procedures
 - Current Methods
- What are current methods for monitoring?
 - Not a lot of consistency
 - Both paper and computer utilized in many cases
- Who records the data?
 - Rotational
 - Lack of concrete schedule
 - Reactionary

Hospital Hand Hygiene Compliance Survey

Name of Hospital:

Name of Contact:

1. How is hand hygiene currently monitored and recorded?
2. Who is responsible for recording data, and how often does the recording process take place?
3. How is the data used and how is it entered into your system?
4. What are some of the pain-points in the data collection and entering process?
5. Are you/hospital management satisfied with current hand hygiene compliance levels?
6. How would you improve the process? Do you think the adoption of new software to increase efficiency would be an option?
7. Do you currently use any GOJO products in your hospital?

Surveys

- How is that data used?
 - Hospital standards
 - Regulatory reporting
 - Spreadsheets
- Are there any current pain points?
 - Anonymity
 - Favoring peers
- Satisfied with current levels
- Ideas to improve process
 - Age gap

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Phone Surveys

Contacted hospitals where SMARTLINK is currently used:

- University of California Irvine
 - Have 2 teams that travel for observations to avoid bias; other staff is trained to use it as well
 - Love the tags feature; Want better reporting tools
- Dartmouth-Hitchcock
 - Use Smartlink, patient surveys, and a competitor's application for compliance monitoring
 - Reactive rather than proactive approach to monitoring, low on the hierarchy of priorities
 - Strongly value direct observation

Barriers to Sales

- Internal
 - Stronger focus on high-margin/commission products
 - Selling OBV system is very low priority
- External
 - Tough to convince companies to adopt new technology
 - One top concern of many hospitals is “financial challenges”

Conclusions

- Current sales strategy is ineffective
- Some hospitals prefer having both automated and manual observations
- Hospitals need incentive to increase hand hygiene levels
- Users of the application found it to be intuitive
- Education is vital to improving compliance levels

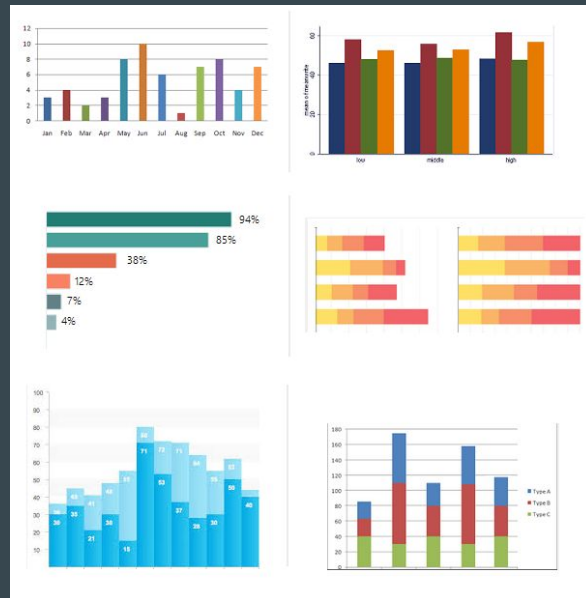
Recommendation 1: Improve Features

Feedback from existing customers

- Reporting tools are lacking to some degree
- Need more colors, graph styles, etc.
- Improve PDF export utility for reports

Suggestions for acquiring new customers

- Streamline the sign-up process
- Allow for demos with access to reporting features



Recommendation 2: GOJO Gold Star Approval Rating

- Conferences
 - NAHQ
 - M&M Conference
- Gold Star Approval Rating
 - Multiple tiers?
 - Recognizable logo
 - Incentivize compliance
 - Build brand recognition

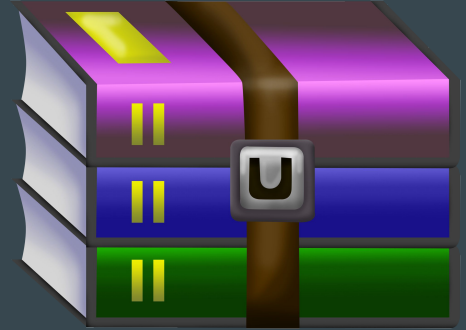


Recommendation 3: Bundle

Current Sales Model: **Inadequate**

How to fix it:

- Explore freemium options to boost market share
 - WinRAR, Netflix
- Derive value indirectly
 - Drive soap sales through increased compliance rates
 - Free marketing for Gojo
- Bundle software with soap purchases and fully automated system



Recommendation 4: Seek Out Other Markets

Create a more general purpose application for use in...

- Schools
- Daycares
- Restaurants
- Culinary Programs
- Chemical Labs
- Factories

