Achieving quality universal health coverage through better water, sanitation and hygiene services in health care facilities: a focus on Ethiopia

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Embedded in the SDGs



Ensure healthy lives and promote well-being for all at all ages

Target 3.8 Achieve **universal health coverage**, including financial risk protection, access to **quality essential health-care services** and access to safe, effective, **quality** and affordable essential medicines and vaccines for all.



Ensure availability and sustainable management of water and sanitation for all



Foundational Concepts

UHC

Ensuring that all people can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of <u>sufficient quality</u> to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.

Quality

The degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge.

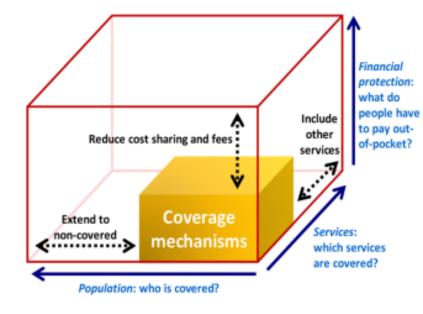


Working towards UHC

"What good does it do to offer free maternal care and have a high proportion of babies delivered in health facilities if the quality of care is sub-standard or even dangerous?"

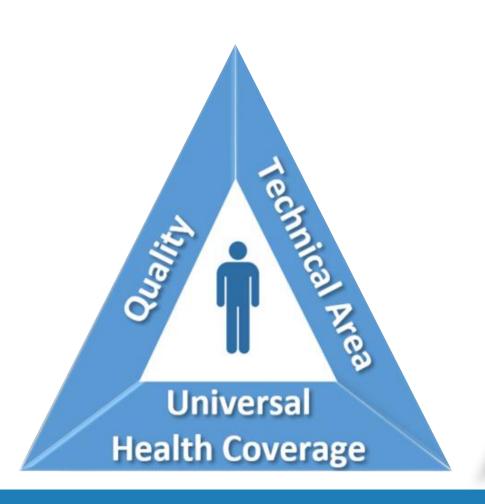
Margaret Chan,
World Health Assembly - May 2012

Towards universal coverage





Triangulation for Change







Why a joint mission?

- Learn about the interface between national quality strategy, its implementation in the decentralized health system and the linkages with WASH
- Establish collaborative work between WASH and QHC units.
- Learn and harvest knowledge about change drivers for improvement in Ethiopia as a framework for analysis in other countries.



Global Action Plan



Vision (2030)

To ensure that every health care facility, in every setting, has safely managed, reliable water, sanitation and hygiene facilities and practices to meet staff and patient needs in order to provide quality, safe people-centered care.



Why Ethiopia?



Clear identified need for improvements

Coverage of WASH in HCF*

Facilities, excluding health posts

Improved water source: 77% (urban 94, rural 65)

Access to piped water: **52%** (urban **83**, rural **30**)

Health posts

Improved water source: 45% (urban 50, rural 45)

Access to piped water: 3% (urban 28, rural 2)

- Demonstrated high-level national commitment
- Successful and innovative interventions implemented
- CASH Initiative, One WASH National Programme



Clean and Safe Hospital Initiative

Strategies & principles

- Aims to reduce hospital infections and make hospitals safer through attitudinal change;
- Strong emphasis on involvement of all;
- Internal and external audit tool on infection prevention, patient safety and cleanliness
- Recognition of best-performing hospitals;
- Emphasis on leadership, autonomy, empowerment in facilities.

Timeline

- Launched by the MOH in 2014;
- ~205 hospitals and 98 health centres have implemented CASH;
- Next phase: implement in all remaining hospitals (>300), health centres (>3,000) and health posts;
- Implementing facilities have to utilize their internal budget to support CASH



Mission overview – July 2016

Meetings with key partners

- National and Regional level Government
- WHO Ethiopia country office staff (Health Systems Strengthening, Quality, TB/HIV, MCH)
- Water, sanitation, hygiene and health actors (UNICEF, DFID, WaterAid, World Vision)

Health care facility visits (n = 7)

- Addis Ababa, Amhara, Tigray
- Urban and rural
- District hospitals and health centres

Selected themes

Leadership;

Monitoring and accountability;

Resource mobilization & budgeting;

Facility improvements.

Strong leadership and collaboration with WCO Ethiopia









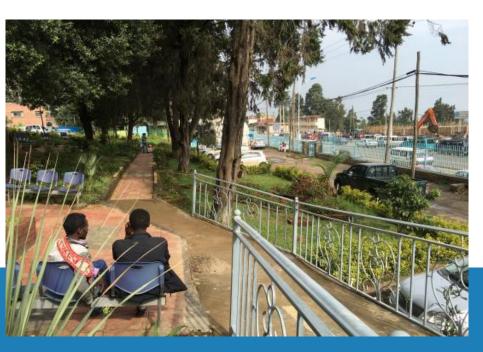
Facility assessments





Clean enough for weddings!

- Regular cleaning campaigns
- Everyone's responsibility
- Clean, green, environments
- Increased patient load
- Improved staff satisfaction





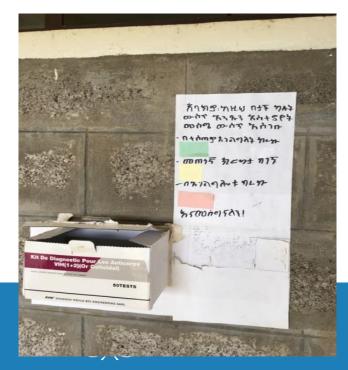
Encouraging change within facilities

- Incentivisation and award schemes
- Inter & intra facility competitions
- Patient and staff feedback









Change comes from all levels

- High level leadership and governance
 - Ministerial support
 - Celebrity endorsement
- Decentralisation of health system
 - Autonomy at all levels
- Commitment by all at facility level
 - Motivated managers
 - All staff (medical and non-medical) are involved
 - Community engagement and trust
 - Each hospital develops a charter of cleanliness
 - Opportunities for patient feedback



Recognising success



But challenges remain....in WASH

- Lack of coordination between programmes (CASH & One WASH National Program)
- CASH needed in smaller facilities
- Outdated infrastructure in HCF
- Action plans not built into CASH





...and in Quality UHC

- Financing There is no dedicated budget to sustain the program
- Health services the limited budget and resources makes improvements in service delivery and process improvement difficult
- Health Work force
 high staff
 turnover makes it difficult to keep
 staff trained





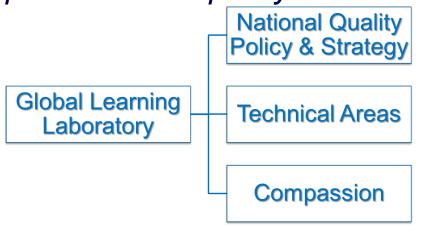
Recommendations & Next steps

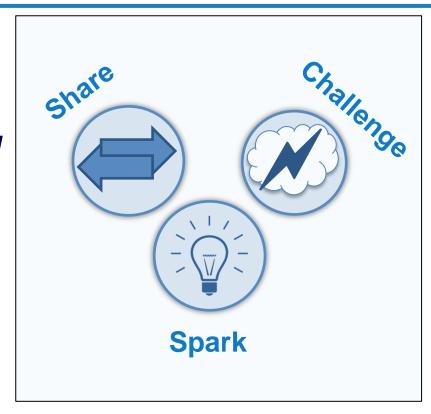
- Continue the momentum!
- Review CASH & develop implementation tool kit
- Improve national monitoring, including adoption of new WASH in HCF indicators in the context of SDGs
- Strengthen capacity building at all levels
- Document best practices and share lessons learned
- Improve coordination between various national initiatives using the umbrella of quality (eg. OWNP)
- Develop integrated QoC framework, and improve coordination between WASH and health sectors



WHO Global Learning Laboratory for Quality UHC

Purpose: To create and support a safe space to <u>share</u> lessons, <u>challenge</u> ideas and <u>spark</u> innovations to better inform global audiences on practical lessons learned from frontline experiences on quality UHC.





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Further information on WASH and Quality

For more information or to sign up to the **WASH in HCF newsletter**, contact: washinhcf@who.int

WHO/UNICEF WASH in HCF knowledge portal:

www.washinhcf.org

Twitter: @WASH_for_health

WHO UHC & Quality: http://www.who.int/servicedeliverysafety/areas/qhc/en/

For information on the WHO GLL:

http://www.integratedcare4people.org/communities/global-learning-laboratory-for-quality-universal-health-coverage/

To contact the WHO GLL: GLL4QUHC@who.int



Thank you



