

14-16 February 2017 Lilongwe, Malawi

The role of WASH in health care facilities & linkages with quality of care



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WASH in HCF globally

Many health care facilities still lack basic water, sanitation and hygiene facilities



Fig.43 Proportion of healthcare facilities without basic water, sanitation and hygiene facilities





Many women give birth in settings with inadequate WASH

- Less than ½ of women had access to basic water and sanitation services in maternity units in 4 countries in East Africa
- Only 44% of birthing facilities had basic WASH while less than ¼ of delivery rooms had basic WASH
- High contribution to infections and sepsis
 - In high mortality settings, up to 50% of neonatal mortality is due to infections
 - 30-40% of infections that lead to neonatal sepsis deaths are transmitted at the time of childbirth





Blencowe, et al, *BMC Public Health*, 2011 Gon, et al, *Plos One* 2016 Benova, et al, *Plos One* 2015













- Essential environmental standards in health care - WHO 2008
 - Water quantity
 - Water quality
 - Hand hygiene facilities
 - Excreta and wastewater disposal
 - Health care waste disposal
 - Cleaning
 - Control of vector borne diseases
 - Information and hygiene promotion







Essential environmental health standards in health care

Edited by John Adams, Jamie Bartram, Yves Chartier













Standard 8 – cross cutting

The health facility has an appropriate <u>physical environment</u>, with <u>adequate water, sanitation and energy supplies</u>, medicines, supplies and equipment for routine maternal and newborn care and management of complications.

8.1: Water, energy, sanitation, hand hygiene and waste disposal facilities are **functional**, **reliable**, **safe** and **sufficient** to meet the needs of staff, women and their families.

→ WASH in HCF underpins safe and quality service provision for achieving UHC







WASH FIT

Water & Sanitation for Health Facility Improvement Tool

- A risk-based, management framework for undertaking continuous WASH improvements as part of **wider quality improvements** in HCF
- Designed for LMICs in primary & some secondary facilities
- Used in Chad, Liberia, Mali, Madagascar, Laos
- Ghana, Ethiopia & Malawi planning to implement and integrated with existing activities







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What should countries commit to?

- WASH in HCF standards should be established and enforced, placing people at the centre, to improve quality of care
- WASH in HCF indicators included in national health monitoring systems to track progress, guide improvements, and improve people-centred quality
- Cost of WASH upgrades & maintenance included in national health & facility level budgets
- WASH & health to combine advocacy efforts to reach global & national goals
- Jointly implement & document lessons learned from improving WASH and QoC in HCF



For more information:



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