

A “cheat sheet” for developing national standards and accountability mechanisms
Developed by participants at the Global Meeting Learning Lab on standards & accountability mechanisms.
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Standards:

- **General definition for standards:** A set of requirements which dictate the infrastructure and resources necessary to provide sustainable WASH services within healthcare facilities. These requirements will vary based on the type of care provided at different HCF levels.
- **International standards already exist.** There are existing international standards on WASH in healthcare facilities as well as monitoring indicators that can be used to help develop and contextual standards in your country. In addition, there are various standards for infection prevention and control and HCWM that include WASH in HCF.
- **Some countries have published WASH in HCF-specific standards** (ex: Cambodia, Tanzania, Ethiopia, Nigeria). These can be used as examples of how to take international standards and apply them to a given country.
- **WASH in HCF standards don’t necessarily need to be standalone.** They may be incorporated in other documents (IPC, minimum package of activities, HCWM, etc.). There are benefits and drawbacks to both making them standalone vs. integrated. For example, having the WASH in HCF standards all in one place which may make implementation and monitoring easier but this means yet another set of disparate standards to follow.
- **We typically assume the MOH will be the “owner” of HCF standards.** However, there may be situations where other Ministries (WASH, planning, etc.) play a role or even are the ones responsible for developing WASH in HCF standards. They may have standards for a given element, like water quality testing.
- **The process of developing standards can be (highly) politicized.** While the standards are a technical document and finding the pertinent information is not difficult, getting the standards through proper channels and approved can be a laborious process. Determining the appropriate department or focal point to be leading the process and understand the steps required to get standards developed, reviewed, approved and disseminated will be critical.
- **Having standards does not mean that they will be implemented.** It is of course the necessary starting point. However, it is important to consider how these standards will be communicated to the subnational and facility levels and what plans are in place to upgrade facilities (link to other Practical Steps). This relates to the roll out, sensitization, engagement of partners, and accountability.
- **This process is not free.** Developing, rolling out and implementing standards will have budgetary implications which should be considered from the start.

Accountability Mechanisms:

- **Definition related to standards:** Mechanisms which ensure that standards required for WASH in HCF are implemented, met and upheld.
- **Accreditation and licensing are key ways to hold facilities accountability for WASH services.** By including WASH in the requirements for these processes, they will not only be regularly monitored but there are also consequences not meeting standards. Typically, we expect these will be overseen by the Ministry of Health, however for example private HCF like the Christian Health Associations often have their own systems of accreditation. Leveraging legislative support, such as public health acts, may be required to strengthen accountability mechanisms, particularly for private sector providers.
- **Other forms of incentivization – including rewards and penalties – may also be utilized.** For example, compliance to standards may be linked to performance-based financing, so facilities can receive more funding if there are meeting WASH standards and maintaining them. Competition between HCF has also been seen to drive action and the delineation of HCF as “Centers of Excellence” for meeting standards may further encourage compliance.
- **Citizen’s accountability:** In some context, community scorecards and accountability mechanisms are powerful way of holding facilities account for meeting standards. These are feedback mechanisms between duty bearers and the community on performance on WASH within HCF
- **Pluralistic health systems:** In many countries, services are provided by public, quasi-public and private health care providers. All need to meet standards for WASH in HCF – some have their own standards and accountability mechanisms, others none – are there examples of engaging private and quasi private services providers on standards?