

Module 5. SANITATION IN HCF

Ministry of Health Liberia
Division of Environmental & Occupational Health

WASH & EH Package – Early recovery & Resilience Building from EVD outbreak



Sanitation

Objectives

- To outline the minimum requirements for sanitation facilities in Healthcare Facilities
- To understand use and maintenance of sanitation facilities in HCFs



Learning

Learning Points

By the end of the session, participants should be able to;

- Describe minimum requirements for sanitation in HCFs
- Share knowledge and skills to improve sanitation services in HCF in their counties

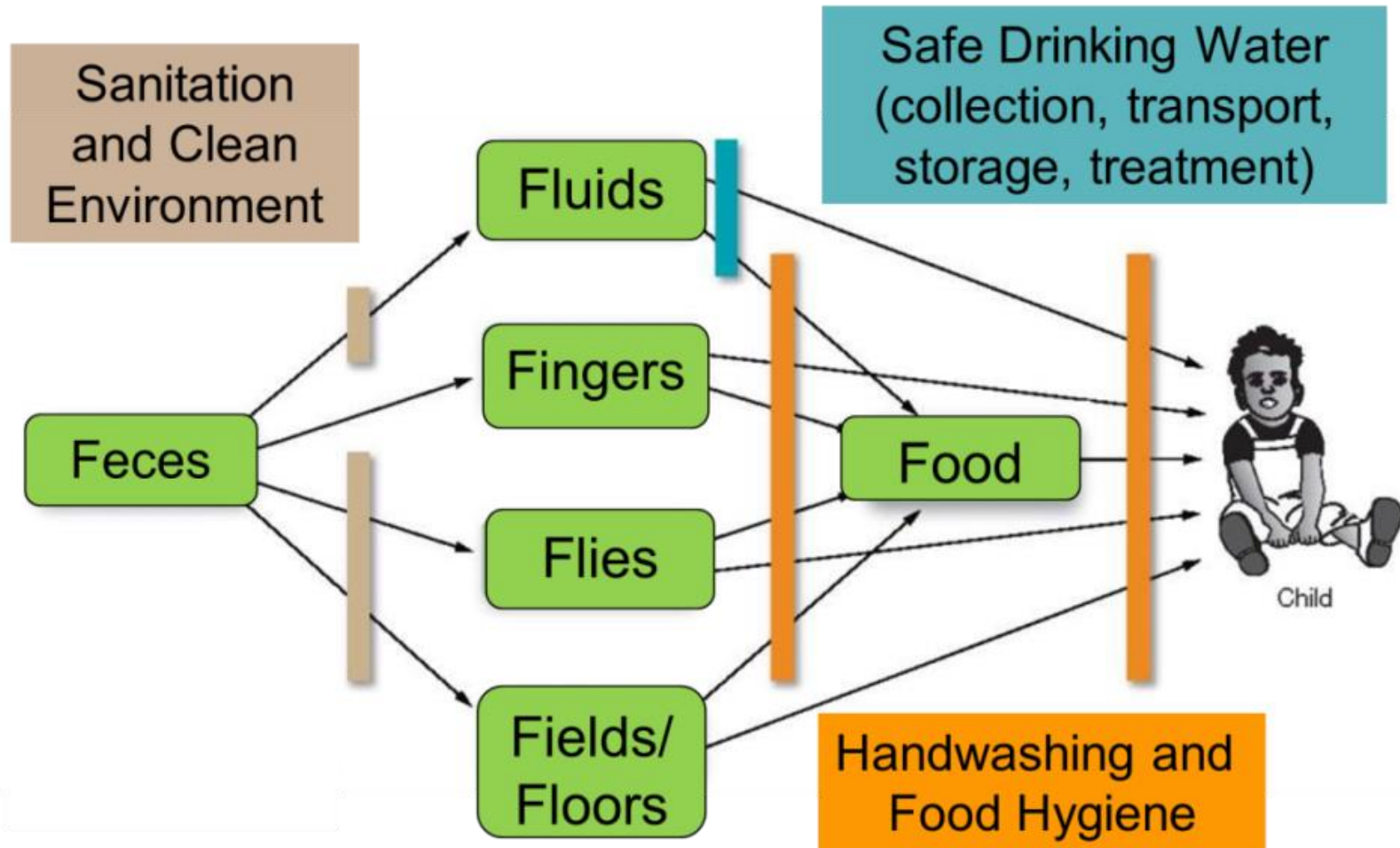


Sanitation Need

- Human faeces is the most common source of diarrhoea pathogens (germs)
- Germs are passed on from an infected person to a new host through contaminated food, fingers, fields and flies.
- Latrines / toilets is a primary barrier that breaks the transmission route by confining faeces to safe structures.
- Clean water supply (fluids) and hand hygiene provide the secondary barriers to the faecal – oral contamination



F Diagram



Barriers

- Which are the primary barriers to spread of germs?
- Which are the secondary barriers?



Sanitation Components

Managing used water, faecal matter, storm water and related waste from within healthcare facilities in safe and sustainable manner.

- **Toilets:** Permitting safe defecation that protect public health and environment.
- **Bathrooms:** Permitting safe body washing that protect public health and environment.
- **Safe management of feces and urine:** Safe collection, storage, treatment, and disposal of human excreta.
- Proper drainage and disposal of wastewater or grey water.
- Drainage of storm water.



Sanitation

Toilets, Bathrooms and Wastewater Collection System:

- *Toilets and bathrooms should be accessible to all staff, patients and visitors (this includes being accessible for the disabled, pregnant women, etc) and not more than 30 metres from users.*
- *Toilets shall be separate for staff and patients as well separate for male and females*
- *There should be sufficient numbers of suitable, reachable and proper toilets and bathrooms in each healthcare facility.*



Sanitation continued

- *Wastewater generated in healthcare facilities should be disposed of promptly and safely to avoid contamination.*
- *Wastewater collection facilities can be onsite or off-site depending on availability of such facilities.*
- *Storm water should be drained through channels to avoid pooling*



Key activities towards proper sanitation: Implementation of hardware component

- ✓ **Toilets** (*construct/renovate*) → **1 toilet: 20 inpatient users**
4 toilets (in OPD for staff, female, male, children).
Accessibility = within 30 meters
- ✓ **Bathrooms** (*construct/renovate*) → **At least 1:40 inpatient users**
- ✓ **Wastewater system**
(*septic tanks/leach fields to accommodate wastewater generated*) →

575 gallons/day (Primary Health Care)	1440 gallons/day (Secondary Health Care)	5650 gallons/day (Tertiary Health Care)
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- ✓ **Storm water drainage** → **As per the Infrastructure Standards**



Dirty commodes/toilets and bathrooms without direct water supply are sources of nosocomial infections



Minimum Requirements

2. Sanitation Quality

- Sanitation facilities follow MoH specifications
 - Excreta and waste water safely managed
 - Safe Locate 30 metres or more from water sources (depending on gradient and type of soil)
 - 2 metres above ground water table
 - Cleaned and maintained regularly

3. Sanitation Access

- Access to males, females, children and limited mobility
- Within 30 metres from all users



Key activities towards proper sanitation: Implementation of software component

- Ensure supplies to permit effective cleaning
- Training of technical staff in operation and maintenance of facilities
- Clean **floors** at least twice a day or as needed with wet mop , detergent, water and a disinfectant cleaning solution; Scrub sinks frequently with a cloth or brush and disinfectant solution; Scrub commodes or toilet frequently at least 2 times a day or as needed.
- cleaning toilets should be clearly stated in job descriptions, there should be a cleaning record at all toilets of when they were cleaned and a process for addressing unclean/malfunctioning toilets
- Perform routine maintenance of sanitation facilities, decommission latrines that are full .
- Conduct supportive supervision and monitoring



Waste water handling

- Grey water (washing water) should be drained appropriately away from the facility to prevent standing water, breeding areas for mosquitoes, etc
- Black water (flushing toilet water) should be disposed of with appropriate drainage/soak away pit/septic line/septic tank system.
- The waste disposal point should be over 30 metres away from ground water sources and more than 1.5m above the water table.



Storm Water Drainage

- ***Storm Water Drainage System:***
- *There should be adequate and well-designed storm water drainage system in all healthcare facilities.*
- *The system should ensure that unblocked storm water channels exist and are properly sized and functional.*
- *It should also ensure that rain water does not flood or carry potentially infectious agents to nearby residents or communities.*



continued

- *Rain water should NOT be directed into septic tanks to avoid overspill*



Required Minimum Standards

1. The Quantity of Storm Water Channels

- Enough storm water canals to contain and direct water movement of storm water runoff in each HCF.

2. Quality

- Water channels constructed according to MoH specifications to ensure storm water is safely managed



Questions and Discussions



References

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