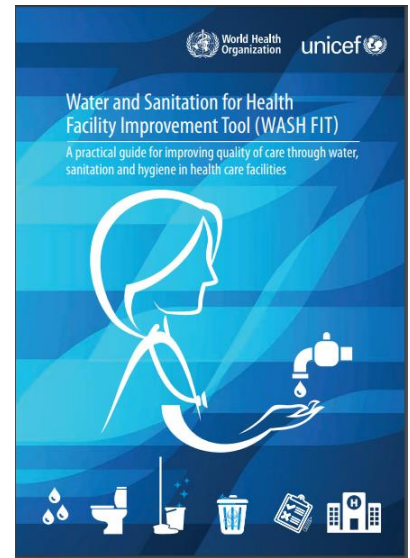


## REPORT ON PILOTING OF WASH FIT IN ALL HEALTH FACILITIES UNDER PUNAKHA DZONGKHAG

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## 1. EXECUTIVE SUMMARY

Accessibility to adequate water, sanitation and hygiene (WASH) including Health care waste management are essential components in providing basic health services to prevent infections and spread of diseases, protect staff and patients. It is estimated that 15% of patients in low-income countries develop one or more infections during a hospital stay, of which WASH is a contributor (*Allegranzi et al, 2011*). Infections account for a third of the 3.6 million neonatal deaths each year and for 15% of maternal deaths (Black 2003; Lawn 2010). A WHO/UNICEF 2015 global review reported that nearly 40% of facilities lack water supplies, 19% are without sanitation and 35% do not have any hand hygiene materials in Healthcare facilities.

In Bhutan, as per the national survey conducted by Ministry of Health (MoH) in 2019, water supply coverage stands at 100 percent however, about 5 percent of the HCFs have water availability issues. Additionally about 15 percent of HCFs reported water contamination (water quality issues). Despite high toilet coverage (99 percent), lot needs to be done in usage (84.05%), gender segregated toilets (30.6%), accessibility by all users including persons with disabilities (31.33%) and menstrual hygiene management (16.42%). In terms of hand hygiene facilities at point of care with water and soap and/ or alcohol hand rub available and handwashing facilities within 5 meters of the toilets stands at 73.39 per cent. Whereas only 35.9 per cent of the HCFs correctly segregates waste, infectious and sharps waste safely treated/disposed. These were further supplemented, validated and authenticated during the implementation of adapted WASHFIT approaches in Health care facilities (HCFs) activities in Punakha district.

To address the safely managed, reliable and safe water, sanitation and hygiene facilities and practices in HCF, WASHFIT- a risk- based approach for assessing and improving services has been piloted in Punakha Dzongkhag in line with RSAHP focused activities. WASH in Healthcare facilities (HCF) was introduced during the RSAHP Inception workshop in Punakha Dzongkhag in August, 2019. WASHFIT tools and approach was piloted at Samdingkha PHC as part of the orientation and training to Health staffs (including the care takers and cleaning/support) from all 9 healthcare facilities and the officials from the gewog/block in collaboration with SNV, WHO and UNICEF. Subsequently, WASHFIT tools including assessments and action planning was rolled out in all of the 9 health care centers in Punakha with technical support from SNV facilitators.

The WASHFIT approach was well received by both the health staffs in the PHCs and the local leaders. They acknowledged that WASHFIT approach has brought the local government and PHCs together to think, self-reflect, assess the risks and consequences and plan together in improving the healthcare facilities and services in their communities. The individual PHCs after the assessments developed their own action plans to improve and mitigate the risks. In Punakha, on average, the traffic light scorings are slightly better in water, health care waste, hand hygiene and facility environment domains while sanitation and management domains needs more attention. However, quality of facilities and services need to improve for all the domains.

The piloting of WASHFIT also provided adequate lessons and experiences for the Ministry of Health, particularly PHED and other development partners to further refine, review, adapt and improvise the WASHFIT methodology and tools to fit the context and needs of different health care facilities. This experiences can further be used in designing and developing interventions and full-fledged WASH programmes in Health care facilities that can be scaled, institutionalized and sustained.

## 2. Background and Rationale

Achieving and maintaining WASH services in health care facilities is a critical element for a number of health aims including those linked to quality universal health coverage (UHC), infection prevention and control (IPC), and child and maternal health. Access to adequate water, sanitation and hygiene (WASH) including Health care waste management are essential components in providing basic health services to prevent infections and spread of diseases. Whilst, lot have been achieved in the WASH in Health care facilities in Bhutan, there is no lead agency to coordinate, organize and monitor this programme at the national level and has been left to individual districts and health care facilities.

A WHO/UNICEF 2015 global review reported that nearly 40 per cent of facilities lack water supplies, 19% are without sanitation and 35% do not have any hand hygiene materials in Healthcare facilities. As per the national survey conducted by MoH in 2019, water supply coverage stands at 100 percent however, about 5 percent of the HCFs have water availability issues. Additionally about 15 percent of HCFs reported water contamination (water quality issues). Despite high toilet coverage (99 percent), lot needs to be done in usage (84.05%), gender segregated toilets (30.6%), accessibility by all users including persons with disabilities (31.33%) and menstrual hygiene management (16.42%). In terms of hand hygiene facilities at point of care with water and soap and/ or alcohol hand rub available and handwashing facilities within 5 meters of the toilets stands at 73.39 per cent. Whereas only 35.9 per cent of the HCFs correctly segregates waste, infectious and sharps waste safely treated/ disposed.

To address these gaps in health care facilities the ministry felt the need to develop sustainable and scalable interventions that can minimize the health care acquired risks. PHED's proposal to develop and pilot WASH intervention in HCF was approved by WHO funded through DFAT for the period 2018-2023. This pilot project identified globally used WASH FIT methodologies and tool for improving and sustaining WASH in HCFs. WASH FIT is a management tool that holistically protects health and upholds dignity through the assessment and management of risks from insufficient or unsafe water supply, inadequate sanitation and poor hygiene practices in health care facilities. WASHFIT methods and tools were reviewed and adapted to Bhutan's context and tested in few HCFs initially before rolling out to all 9 HCFs under Punakha districts with support from SNV and UNICEF.

## 3. OBJECTIVES

- Adapt WASHFIT methodology/tools to fit in to Bhutanese context
- Pilot WASHFIT methodology and approach to design and develop WASH in HCF programme
- Develop capacity building process for the Health and local government officials
- Awareness and advocacy to local government

## 4. Process and Methodology

PHED led the consultation process to adapt WASHFIT tool in close consultation with all relevant programmes (AMR, IPC, EHP, QASD) under Ministry of Health and all relevant stakeholders (JDWNRH, HIDD, RCDC and District Health sector) including WASH partners (WHO, UNICEF and SNV). The WASH assessment questions were reviewed and discussed (December 2018 and January 2019) by professional technical team comprising from clinical, public health and engineering backgrounds for adaptation to Bhutanese context and necessary changes were made and tools were adapted. Additionally, WHO Technical expert provided training on WASHFIT tools and methodologies in July 2019.

WASH in health care facilities was introduced to the elected local government and districts officials during the inception workshop of Rural Sanitation and Hygiene Programme (RSAHP) in Punakha. The participants strongly acknowledged and recognized the need to address WASH issues in the health care facilities.

Samdingkha Primary Health Care (PHC) facility hosted the first WASHFIT pilot testing of the adapted tools and methods. A 2 days training was conducted for health assistants, support staffs (cleaners, sweepers, Technicians and care takers) from all health care facilities under Punakha districts. The elected local government officials of Chubu gewog (block) also were part of the training.

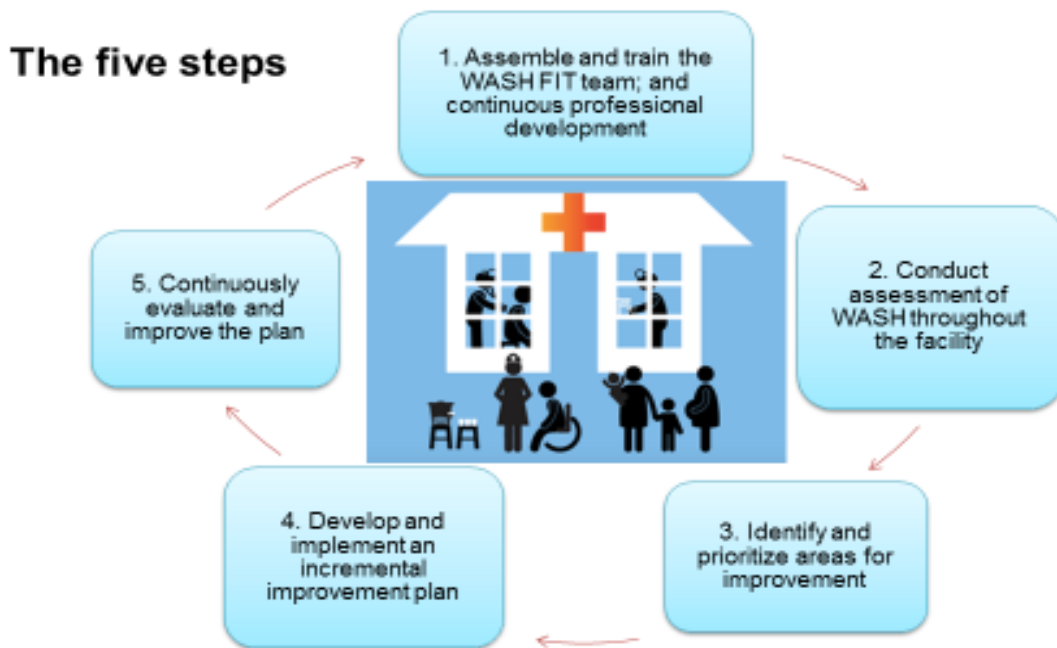
Subsequently, after the 2 days training in Samdingkha PHC, the WASHFIT piloting were carried out in all other health care facilities (PHCs and Hospitals) under Punakha district following the steps:

1. Assemble and train the WASH FIT core team; and continuous professional development  
The core group team members were defined for primary health care facilities and hospitals.

Core team for Primary Health Care	Core team for Hospital
<ul style="list-style-type: none"><li>• Gewog Thrizin</li><li>• Tshogpa of the PHC catchment area</li><li>• DHO</li><li>• HA</li><li>• Caretaker</li></ul>	<ul style="list-style-type: none"><li>• IPC Focal</li><li>• CMO</li><li>• ADM</li><li>• Nurse/ HA</li><li>• Cleaner</li><li>• Technician (all unit)</li><li>• DHO</li></ul>

2. Conduct assessment of WASH throughout the facility
3. Identify and prioritize areas for improvement
4. Develop and implement an incremental improvement plan
5. Continuously evaluate and improve the plan

# WASH-FIT Methodology



## 5. Output of the WASH in HCF pilot

A total of 26 participants (14 female) comprising of District health officer, health assistants, support staffs (cleaners, sweepers, Technicians and care takers) from all health care facilities under Punakha districts and, elected local government officials took part in the 2 days training. Further, the WASHFIT assessment was rolled out in all the health centers by the respective health in charges with support from RSAHP team. The training provided overall introduction to the WASH in HCF and WASHFIT methodology and tools.

- WASHFIT methods and assessment tool adapted, reviewed and finalized.
- Health and local government officials in Punakha familiarized on WASH FIT processes.
- WASH FIT piloting completed in nine HCFs under Punakha district.
- Identified, prioritized and prepared WASH interventions and action plans in all health care facilities under Punakha.

A simple excel based WASHFIT adapted tool has been developed to record and summarize the scores for all essential indicators in HCFs and the tool summarizes average scores for the district. The following table summarizes the average scores for all WASHFIT essential indicators under Punakha district.

Essential indicators		Meets target +++ (3)	Partially meets target ++ (2)	Does not meet target + (1)	Add date of assessment here	Dzongkhag Status
<b>Water</b>						<b>Punakha</b>
					August & September 2019	
<b>1.1*</b>	Improved water supply piped into the facility or on premises and available	Yes, improved water supply within facility and available	Improved water supply on premises, (outside of facility building) and available	No improved water source within facility grounds, or improved supply in place but not available		<b>3.0</b>
<b>1.2*</b>	Water services available at all times and of sufficient quantity for all uses	Yes, every day and of sufficient quantity	More than five days per week or every day but not sufficient quantity	Fewer than five days per week		<b>2.8</b>
<b>1.3*</b>	A reliable drinking-water station is present and accessible for staff, patients and carers at all times and in all locations/wards	Yes, at all times/wards and accessible to all	Sometimes, or only in some places or not available for all users	Not available		<b>2.2</b>
<b>1.4*</b>	Drinking-water is safely stored in a clean bucket/tank with cover and tap	Yes	All available drinking-water points are safely stored	Not safely stored in any water points or no drinking-water available		<b>2.7</b>
<b>Sanitation</b>						
<b>2.1*</b>	Number of available and usable toilets or improved latrines for patients	Four or more (outpatients) and one per 20 users (inpatients)	Sufficient number present but not all functioning or insufficient number	Less than 50% of required number of latrines available and functioning		<b>2.1</b>
<b>2.2</b>	Toilets or improved latrines clearly separated for staff and patients	Yes	Separate latrines are available but not clearly separated	No separate latrines		<b>2.0</b>
<b>2.3</b>	Toilets or improved latrines clearly separated for male and female	Yes	Latrines are separated for male and female, but not clearly separated	No separate latrines		<b>1.8</b>
<b>2.4*</b>	At least one toilet or improved latrine provides the means to manage menstrual hygiene needs	Yes	Yes, but toilet is not clean or in disrepair	No		<b>1.6</b>
<b>2.5*</b>	At least one toilet meets the needs of people with reduced mobility	Yes	Yes, but not available or in disrepair	No toilets for disabled users		<b>1.1</b>
<b>2.6*</b>	Functioning hand hygiene stations within 5 m of latrines	Yes	Present, not functioning or no water or soap	Not present		<b>2.9</b>
<b>Health Care Waste</b>						
<b>2.11</b>	A trained person is responsible for the management of health care waste in the health care facility	Yes, presented and adequately trained	Appointed but not trained	Not appointed		<b>3.0</b>
<b>2.12*</b>	Functional waste collection containers in close proximity to all waste generation points for: - non-infectious (general) waste - infectious waste - sharps waste	Yes	Separate bins present but lids missing or more than three quarters full; only two bins (instead of three); or at some but not all waste generation points	No bins or separate sharps disposal		<b>2.6</b>
<b>2.13</b>	Waste correctly segregated at all waste generation points	Yes	Some sorting but not all correctly or not practiced throughout the facility	No sorting		<b>2.9</b>
<b>2.14</b>	Functional burial pit/fenced waste dump or municipal pick-up available for disposal of non-infectious (non-hazardous/general waste)	Yes	Pit in facility but insufficient dimensions; overfilled or not fenced and locked; irregular municipal waste pick up, etc.	No pit or other disposal method used		<b>2.8</b>
<b>2.15*</b>	Incinerator or alternative treatment technology for the treatment of infectious and sharp waste is functional and of a sufficient capacity	Yes	Present but not functional and/or of a sufficient capacity	None present		<b>2.3</b>
<b>2.16</b>	Sufficient energy available for incineration or alternative treatment technologies (mark if not applicable)	Yes, always	Yes, sometimes	Never		<b>2.7</b>
<b>Hand Hygiene</b>						
<b>3.1*</b>	Functioning hand hygiene stations are available at all points of care	Yes	Stations present, but no water and/or soap or alcohol handrub solution	Not present		<b>2.9</b>
<b>3.2*</b>	Hand hygiene promotion materials clearly visible and understandable at key places	Yes	Some places but not all	None		<b>2.6</b>
<b>Facility Environment</b>						
<b>3.6</b>	The exterior of the facility is well-fenced, kept generally clean (free from solid waste, stagnant water, no animal and human faeces in or around the facility premises, etc.)	Yes	Partly but improvements could be made/yes, sometimes	Not kept clean at all		<b>2.4</b>
<b>3.7</b>	General lighting sufficiently powered and adequate to ensure safe provision of health care including at night (mark if not applicable)	Yes, always	Yes, sometimes	Never		<b>2.1</b>
<b>3.8*</b>	Floors and horizontal work surfaces appear clean	Yes	Some floors and work surfaces appear clean but others do not	Most and/or all floors and surfaces are visibly dirty		<b>2.8</b>
<b>3.9</b>	Appropriate and well maintained materials for cleaning (i.e. detergent, mops, buckets, etc.) are available	Yes	Yes, available but not well maintained	No materials available		<b>2.4</b>
<b>3.10*</b>	At least two pairs of household cleaning gloves and one pair of overalls or apron and boots in a good state, for each cleaning and waste disposal staff member	Yes	Available but in poor condition	Not available		<b>2.6</b>
<b>3.11</b>	At least one member of staff can demonstrate the correct procedures for cleaning and disinfection and apply them as required to maintain clean and safe rooms.	Yes	Procedure is known but not applied	Procedure not known or applied		<b>3.0</b>
<b>Management</b>						
<b>4.1</b>	WASH FIT or other quality improvement/management plan for the facility is in place, implemented and regularly monitored	Yes	Complete but not implemented and/or is not monitored, or incomplete	No plan		<b>1.3</b>
<b>4.2*</b>	An annual planned budget for the facility is available and includes funding for WASH infrastructure, services, personnel and the continuous procurement of WASH items (hand hygiene products, minor supplies to repair pipes, toilets, etc.) which is sufficient to meet the needs of the facility	Yes	Yes, but budget is insufficient	No budget		<b>1.7</b>
<b>4.3</b>	An up-to-date diagram of the facility management structure is clearly visible and legible	Yes	Yes, but not up to date	Not available		<b>2.3</b>
<b>4.4</b>	Adequate cleaners and WASH maintenance staff are available	Yes	Some available, but not adequate or not skilled/ motivated	None available		<b>2.7</b>

## 6. Monitoring and reporting system

Monitoring and reporting system plays an important role to sustain the management of WASH services in HCFs. The primary objective of monitoring WASH services in HCFs is to measure the extent of minimum WASH standards in HCFs and identify areas for remedial actions. During the piloting phase, the needs to institute the monitoring system at various key stakeholders levels - HCF, WASH FIT Committee members, District Health Sectors and PHED/ MoH were sensitized. The monitoring process involves the following:

- Measuring the level of adherence by the HCFs in maintaining the minimum standards of WASH services
- Identifying any shortfalls in the O&M of WASH facilities
- Alerting actors at different levels of the needed remedial actions

### Actors involved in monitoring

Level	Involved Actors	Specific monitoring/ follow up tasks
PHC	<ul style="list-style-type: none"> <li>• PHC In-charge</li> <li>• WASH FIT Committee</li> </ul>	<ul style="list-style-type: none"> <li>• Establish in-house routine monitoring and follow up</li> <li>• WASH services within HCF and implementation of remedial actions e.g. repairs and maintenance of WASH facilities</li> <li>• Coordinate monitoring process within HCFs</li> <li>• Collect data using the provided tools</li> <li>• Submission of collected data to strict Health Sector for validation</li> <li>• Propose fund allocation for implementation of remedial actions e.g. repairs and maintenance of WASH facilities at gewog level.</li> </ul>
District Health Sector (Districts)	DHO, ADM	<ul style="list-style-type: none"> <li>• Provide oversight of the monitoring activities in all HCFs within the district/municipality</li> <li>• Compile collected data and validate from all HCFs in the district and submit the same to PHED/ MoH</li> <li>• Make periodic follow up visits to HCFs within the district/ municipality to monitor WASH status</li> <li>• Fund allocation for WASH services and implementation of repairs and maintenance of facilities</li> </ul>
PHED/ MoH (National)	PHED,RCDC IPC,AMR QASD,PPD	<ul style="list-style-type: none"> <li>• Develop national monitoring framework including monitoring indicators and standards</li> <li>• Provide technical advice and build capacity to districts and HCFs on monitoring and follow up process.</li> </ul>

		<ul style="list-style-type: none"> <li>• Review monitoring reports from districts and Compile/Maintain national performance data from different health facilities</li> <li>• Periodic visits for quality assurance of monitoring process</li> <li>• Organize national review meetings for key stakeholders</li> </ul>
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Reporting:

Reporting of progress in the implementation of WASH in HCFs will be done by the different actors at different levels in the following manner:

- (i) PHC level: PHC In-charge will submit reports from their HCF and submit to the District Health Sector on quarterly/biannually basis
- (ii) District level: The team will verify the data and submit to PHED/ MoH
- (iii) PHED/MoH: PHED along with relevant agencies will review the reports and plan and take necessary remedial actions.

## 7. Lessons learnt

1. Assessment of the WASH services in HCFs gives good understanding of the overall situation and plans in that particular health facility
2. WASH FIT provides opportunity to reflect the situation of their own health facilities and become role model for the communities;
3. WASHFIT helps to improve the coordination & collaboration between the health sector and local government
4. WASH FIT helps to prioritize the issues to be resolved on need based and resources available
5. Good opportunity to maintain & institutionalize WASH data base for health facilities;
6. Good opportunity to showcase the structured and exemplary WASH interventions in HCFs at the regional and global level
7. Support from the LG to take some form of ownership of the health facilities in their gewog
8. Action plan prepared by the team helps in proper planning and realistic budgeting for the respective health facilities from the LG/Dzongkhag
9. Effectiveness of the intervention is dependent on sustainability & pro-activeness of the team to take forward the agenda
10. Separate budget may be necessary for review meetings and miscellaneous expenses



11. LG leaders are still under the impression that health facilities are under the jurisdiction of the Dzongkhag Health Sector therefore it is very difficult to push for dedicated budget for O&M of WASH facilities
12. Lack of fund is one major deterring factor to address the issues and gaps
13. Regular monitoring and follow-up is required from both District and Centre to keep the momentum
14. Standard Monitoring and Reporting format needs to be developed including frequency of report submission
15. Poor level of understanding & support for WASH FIT by the decision makers at the central level

## 8. Conclusions and Recommendations

The WASHFIT pilot process has brought in local government (district and gewogs) and health care facilities closer and triggered participatory discussion, coordination and platform to work together to enhance health care services to the people. Thereby, the local government officials recognize the need to support the Health care facilities including allocation of adequate resources during planning and budgeting.

The piloting of the WASH in Health care facilities provided valuable lessons and avenue for the health care service providers to self-reflect, identify the risks and opportunities for improvement. The support staff and the health care management teams realizes not only the importance of each other's roles and responsibilities in providing quality health care services but also the capacity to address most of the WASH issues (both short and long term) within their facilities .

The piloting of WASHFIT also provided adequate experience for the Ministry of Health, particularly PHED to further refine, review, adapt and improvise the WASHFIT methodology and tools to fit the context and needs of different health care facilities. This experiences can further be used in sustaining, scaling, designing and developing full-fledged WASH intervention programme by the Ministry.

With lessons learnt and experiences from this pilot following are key the recommendations:

- Strengthening the existing WASH in health care implementation process and documentation (advocacy and awareness during inception/review/post ODF workshop, capacity building, facility assessments, baseline setting, facility improvement plans and implementation, periodic monitoring, follow ups and documentation)
- Finalize and disseminate the national WASH in HCF standards
- Strengthen and Institute WASHFIT assessment tools and monitoring system

## 9. Annexes

### List of Health facilities in Punakha

1. Samdingkha PHC
2. Punakha Hospital
3. Kabesa PHC
4. Goenshari PHC
5. Shengana PHC
6. Nobgang PHC
7. Tshochasa PHC
8. Thinleygang PHC
9. Lobesa Sub- post

### List of participants at Samdingkha BHU II/ PHC, Punakha

Sl.No.	Name	Designation	Health facility
1	Dilip Kumar Sanyasi	HA	Nobgang BHU II
2	Dema	Sr. HA	Punakha Hospital
3	Jamuna Chettri	Sr. HA	Lobesa Sub-post
4	Dhan Maya Adhikari	Sr. HA	Thinleygang BHU II
5	Thakur Kumar Rai	Sr. HA	Tshochasa BHU II
6	Ten Tshomo	Nurse	Punakha Hospital
7	Dilli Maya Ghimiray	Technician	Punakha Hospital
8	Phul Maya	Sweeper	Punakha Hospital
9	Tek Bahadur Rai	Electrician	Punakha Hospital
10	Sonam Tobgyel	HA	Punakha Hospital
11	Sonam	HA	Thinleygang BHU II
12	Chojay	HA	Goenshari BHU II

13	Sonam Choki	HA	Samdingkha BHU II
14	Pema Choden	HA	Shengana BHU II
15	Sonam Dorji	Adm Assistant	Punakha dzongkhag
16	Pema Choden	HA	Kabesa BHU II
17	Norbu Yangzom	Sr. HA	Samdingkha BHU II
18	Tauchu	Gup	Chubu
19	Namgay Dawa	DHO	Punakha
20	Kinley Tenzin	Tshogpa	Wangkla
21	Thinley Dem	WASH Advisor/ Resource	SNV
22	Kencho Wangdi	WASH SL/ Resource	SNV
23	Tashi Dorji	WASH Advisor/ Resource	SNV
24	Raj Kumar Bhattaria	WASH Advisor/ Resource	SNV
25	Sonam Pelzom	Engineer/ Resource	PHED
26	Yeshay Lhaden	Engineer/ Resource	PHED

**List of participants at Punakha Hospital**

Sl.No.	Name	Designation	Health facility
1	Dr. Manish Raj Gurung	CMO	Punakha Hospital
2	Ten Tshomo	Clinical Nurse	- do -
3	Norden Paljor	Sr. Nurse	- do -

4	Kunga	Physio	- do -
5	Tek Bahadur	Electrician	- do -
6	Dilli Maya Ghimeray	Plumber	- do -
7	Sherab Thinley	Lab. Technician	- do -
8	Prem Bahadur Darjee	Ward Boy	- do -
9	B. N. Sharma	ADMO	- do -
10	Dema	Sr. HA	- do -
11	Dorji	Clinical Nurse	- do -
12	T B Naphey	HA	- do -
13	Chela	Pharmacist	- do -
14	Dema Zomba	Caretaker	- do -
15	Tshering Phuntsho	ENT	- do -
16	Jeewan	Pharmacist	- do -
17	Dorji Nidup	Dungtsho	- do -
18	Ugyen Tenzin	Physio	- do -
19	Choki Dorji	Lab. Technician	- do -
20	Karma Lodey	Physio	- do -
21	Hem Raj	Ortho	- do -
22	Tashi	Eye technician	- do -
23	Namgay Dorji	DHO	Punakha
24	Chhime Dorji	CLO/ Resource	RCDC
25	Damcho	HA	Punakha Hospital
26	Yeshay Lhaden	Engineer/ Resource	PHED

**List of participants at Kabesa BHU II/ PHC, Punakha**

<b>Sl.No.</b>	<b>Name</b>	<b>Designation</b>	<b>Health facility</b>
1	Tshering Penjor	Gup	Kabesa
2	Thinley Gyelmo	Menpa	
3	Pema Tshering	Tshogpa	
4	Karma Gyeltshen	GAO	Kabesa BHU II
5	Pema Choden	HA/ Resource	
6	Kamal Kumar Rai	HA	
7	Rinchen Zangpo	Caretaker	

**List of participants at Lobesa Sub-post, Punakha**

<b>Sl.No.</b>	<b>Name</b>	<b>Designation</b>	<b>Health facility</b>
1	Nado	VHW	Barp Gewog
2	Kinley Penjor	VHW	
3	Pema Namgyel	Tshogpa	
4	Sonam	VHW	
5	Kinley Penjor	Tshogpa	
6	Dago	Tshogpa	
7	Lobzang Choda	GAO	
8	Kinley	VHW	
9	Jamuna Chhetri	HA	Lobesa Sub-post
10	Rinchen Wangdi	Chief Engineer/ Resource	PHED

11	Yeshay Lhaden	Engineer/ Resource	PHED

**List of participants at Goenshari BHU II/ PHC, Punakha**

Sl.No.	Name	Designation	Health facility
1	Yeshi Dorji	Gup	Goenshari
2	Pem Tshering	Mangmi	Goenshari
3	Sonam Jamtsho	Offtg. ADM	Goenshari
4	Tshering Gyeltshen	Tshogpa	Goenshari
5	Chojay	HA	Goenshari BHU
6	Tshering Phuntsho	Caretaker	Goenshari BHU
7	Pema Choden	HA	Kabesa BHU II
8	Namgay Dawa	DHO	Punakha
9	Kunzang Deki	Asst. Architect	PHED
10	Kencho Wangdi	WASH SL	SNV

**List of participants at Thinleygang BHU II/ PHC, Punakha**

Sl.No.	Name	Designation	Health facility
1	Sangay Dorji	Mangmi	Toeb Gewog
2	Tashi Dema	Tshogpa	

3	Darsingh Maiyer	HA	
4	Namgay Tenzin	Gup	
5	Yenten Jamtsho	GAO	
6	Tashi Dema	Caretaker	Thinleygang BHU
7	Sonam	HA	Thinleygang BHU
8	Dhan Maya Adhikari	Sr, HA	Thinleygang BHU
9	Raj Kumar	WASH Advisor/ Resource	SNV
10	Karma Choden	Asst. Architect/ Resource	PHED/ MoH

**List of participants at Nobgang BHU II/ PHC, Punakha**

Sl.No.	Name	Designation	Health facility
1	Dilip Kr. Sanyasi	HA	Nobgang
2	Dorji Wangchuk	Gup	
3	Kinley Dem	Tshogpa	
4	Damchoe Dorji	Water caretaker	BHU
5	Sonam Gyeltshen	Caretaker	BHU
6	Tashi Dorji	SNV/ Resource	SNV

**List of participants at Shengana BHU II/ PHC, Punakha**

Sl.No.	Name	Designation	Health facility
1	Samten Phuntsho	Gup	Shengana Bjemi Gewog

2	Phurpa Dorji	GAO	
3	Phurb Wangmo	Mangmi	
4	Sithub Namgay	Tshogpa	
5	Rinchen Dorji	Tshogpa	
6	Namgay Rinchen	Tshogpa	
7	Phurba Dorji	Tshogpa	
8	Yeshey Dorji	Gewog staff	
9	Samten Dorji	HA	BHU
10	Pema Choden	HA	BHU
11	Yeshay Lhaden	Engineer/ Resource	PHED
12	Rinchen Wangdi	Chief Engineer/ Resource	PHED

**List of participants at Tshochasa BHU II/ PHC, Punakha**

<b>Sl.No.</b>	<b>Name</b>	<b>Designation</b>	<b>Health facility</b>
1	Sonam Tobgay	Gup	Limbukha Gewog
2	Kencho Wangdi	Tshogpa	Dompola chiwog
3	Ugyen Dorji	VHW	Dompola chiwog



4	Thinley Norbu	HA	BHU
5	Thakur Kumar Rai	HA	BHU
6	Durga Man Darjee	Caretaker	BHU
7	Namgay Dawa	DHO	Dzongkhag
8	Bebita Maya	Staff	BHU
9	Passa Om	VHW	Gumkarmo
10	Yeshay Lhaden	Engineer/ Resource	PHED

1. Action Plan of each health facility :

Table 1: Action Plan for Samdingkha BHU, Punakha

Domain	<p><b>What specific improvement action will be taken to resolve the hazards identified?</b></p> <p><i>The actions to be taken link to the hazards recorded in tool 3.</i></p>	<p><b>Who will carry out the task and is there anyone who will supervise it? List people responsible for implementation.</b></p>	<p><b>What resources are needed to do it?</b></p> <p><i>“Resources” could be <b>staff, technical</b> or <b>financial</b>.</i></p>	<p><b>When do you expect to complete this action?</b></p> <p><i>Indicate target date.</i></p>	<p><b>Completion date</b></p> <p><i>Once the activity has been completed, record the date of completion.</i></p>
Water	<p><b>1.2</b></p> <ul style="list-style-type: none"> <li>➤ Insufficient water will be solved by storage(Short term)</li> <li>➤ Different source has been identified(BHU) in the 12 five year plan(long term)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Storage by BHU health staff(Short term)</li> <li>➤ DHO and Geog administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Bucket and water pipe (1MM two roll/short term)</li> <li>➤ pipe, cement,rod,net fencing, tank and labour force,DzonkhagEngineering section,Technician</li> </ul>	<ul style="list-style-type: none"> <li>➤ Bucket arrangement immediately</li> <li>➤ Source identification materials before completion of 12 five year plan</li> </ul>	

	<p><b>1.8</b></p> <ul style="list-style-type: none"> <li>➤ Water storage is sufficient to meet the needs of patients for two days will be identified the new source in 12 five year plan</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO, Geog and Dzongkhag Administration Punakha</li> </ul>	<ul style="list-style-type: none"> <li>➤ pipe,cement,rod,net fencing,tank and labour force,DzonkhagEngineering section,Technician</li> </ul>	<ul style="list-style-type: none"> <li>➤ Source identification materials before completion of 12 five year plan</li> </ul>	
<b>Sanitation</b>	<p><b>2.1</b></p> <ul style="list-style-type: none"> <li>➤ One non-functional toilet will be clean</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs(immediate action)</li> <li>➤ unsolved problem will be carried out by geog administration and District health Office</li> </ul>	<ul style="list-style-type: none"> <li>➤ Sticks,gloves,gumbooti immediate cleaning)</li> <li>➤ materials required as per technical support(Unsolved problem)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before november,2019(Immediate cleaning)</li> <li>➤ Before January 2020(unsolved)</li> </ul>	
	<p><b>2.2</b></p> <ul style="list-style-type: none"> <li>➤ Separate toilet for staff and patients will be label</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> <li>➤ DHO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Sign labeling</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before Jan 2020</li> </ul>	
	<p><b>2.3</b></p> <ul style="list-style-type: none"> <li>➤ Toilet separation of patients for male and female will be label</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO</li> <li>➤ BHU staffs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Sign labeling(male/Female)</li> </ul>	<ul style="list-style-type: none"> <li>➤ immediately</li> </ul>	

	<p><b>2.4</b></p> <ul style="list-style-type: none"> <li>➤ Separate Female toilet will be provide to manage menstrual hygiene</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> <li>➤ Geog administration and District health office</li> </ul>	<ul style="list-style-type: none"> <li>➤ Plastic</li> <li>➤ Pad disposal bin with lid</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before 12 five year plan</li> </ul>	
	<p><b>2.5</b></p> <ul style="list-style-type: none"> <li>➤ No separate toilet for the people living with reduced mobility due to less patient</li> </ul>	Remarks(less patient record)	Remarks(less patient record)	Remarks(less patient record)	
	<p><b>2.7</b></p> <ul style="list-style-type: none"> <li>➤ Record of cleaning toilet will be maintained daily register</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Register book(1)</li> <li>➤ pen</li> </ul>	<ul style="list-style-type: none"> <li>➤ Immediately</li> </ul>	
	<p><b>2.12</b></p> <ul style="list-style-type: none"> <li>➤ Waste collection container needed separately with lid</li> </ul>	<ul style="list-style-type: none"> <li>➤ Gewog administration &amp; Dzongkhag DHO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Bucket with lid (8nos)</li> </ul>	<ul style="list-style-type: none"> <li>➤ January 2020</li> </ul>	
	<p><b>2.14</b></p> <ul style="list-style-type: none"> <li>➤ Fencing of burial pit</li> </ul>	<ul style="list-style-type: none"> <li>➤ Written proposal by BHU staffs</li> <li>➤ Gewog administration</li> <li>➤ Dzongkhag health office</li> </ul>	<ul style="list-style-type: none"> <li>➤ Metal Poles</li> <li>➤ Nail</li> <li>➤ Labour force</li> <li>➤ Wire</li> </ul>	<ul style="list-style-type: none"> <li>➤ Proposal submission before December 2019</li> </ul>	

			<ul style="list-style-type: none"> <li>➤ Cement(requirement as per the technical needs)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Fencing before 12 five year plan</li> </ul>	
	<p><b>2.18</b></p> <ul style="list-style-type: none"> <li>➤ Need separate place for Hazardous and non-hazardous waste stored</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO</li> <li>➤ Dzongkhag administration</li> <li>➤ MOH</li> </ul>	<ul style="list-style-type: none"> <li>➤ According to the plan</li> </ul>	<ul style="list-style-type: none"> <li>➤ According to the plan proposal</li> </ul>	
	<p><b>2.21</b></p> <ul style="list-style-type: none"> <li>➤ Development of SOP for safe management of health care waste clearly visible and legible</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Guidebook</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before January 2020</li> </ul>	
<b>Hand hygiene</b>	<p><b>3.1</b></p> <ul style="list-style-type: none"> <li>➤ Hand hygiene materials with placing of Hand washing steps</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> <li>➤ Relevant program</li> </ul>	<ul style="list-style-type: none"> <li>➤ Paper</li> <li>➤ Marker pen</li> <li>➤ Hand washing steps poster from relevant programmed</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before January 2020</li> <li>➤ Poster from the programmed</li> </ul>	

	<p><b>3.7</b></p> <ul style="list-style-type: none"> <li>➤ Need to have street light around the BHU area in collaboration of 12 five year plan with proposal submissions</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU Staffs</li> <li>➤ Geog administration</li> <li>➤ District health office</li> </ul>	<ul style="list-style-type: none"> <li>➤ Materials requirement as per the technical Judgement</li> </ul>	<ul style="list-style-type: none"> <li>➤ Proposal submission to geog before December 2019</li> <li>➤ Before 12 five year plan</li> </ul>	
	<p><b>3.8</b></p> <ul style="list-style-type: none"> <li>➤ Floors will be kept clean with daily cleaning</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs(daily supervision)</li> <li>➤ Caretaker</li> <li>➤ Geog administration</li> <li>➤ District health office(for material procurement)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Broom 30 nos(hard &amp; soft)</li> <li>➤ Mopping sticks 5nos</li> <li>➤ Surfs 30 kg/yr</li> </ul>	<ul style="list-style-type: none"> <li>➤ Daily cleaning and supervision immediately</li> <li>➤ Proposal submissions to geog and dzongkhag administration(materials procurement) before December 2019</li> <li>➤ Materials procurement</li> </ul>	

				in 12 five year plan	
	<b>3.9</b> <ul style="list-style-type: none"> <li>➤ Required Materials will be procure from the geog and dzongkhag administration with proposal submission</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> <li>➤ Geog administration</li> <li>➤ Dzongkhag administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Soap</li> <li>➤ Surfs</li> <li>➤ Buckets</li> <li>➤ Hand sensitizer</li> </ul>	<ul style="list-style-type: none"> <li>➤ Proposal submission before December 2019</li> <li>➤ Procurement before 12 five year plan</li> </ul>	
	<b>3.14</b> <ul style="list-style-type: none"> <li>➤ To maintain record of cleaning visible and signed by the cleaners each day</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs(supervision)</li> <li>➤ caretaker</li> </ul>	<ul style="list-style-type: none"> <li>➤ Register book</li> </ul>	<ul style="list-style-type: none"> <li>➤ Immediately</li> </ul>	
	<b>3.15</b>				

	<ul style="list-style-type: none"> <li>➤ Laundry room attached with BHU infrastructure</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO and geog administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Requirement as per technical report</li> </ul>	<ul style="list-style-type: none"> <li>➤ Within 12 five year plan</li> </ul>	
	<p><b>3.17</b></p> <ul style="list-style-type: none"> <li>➤ Kitchen stores need to be attached with BHU facilities</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO and geog administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Requirement as per technical report</li> </ul>	<ul style="list-style-type: none"> <li>➤ Within 12 five year plan</li> </ul>	
<b>Man age men t</b>	<p><b>4.1</b></p> <ul style="list-style-type: none"> <li>➤ Implementation of WASH FIT plan and to monitored quarterly</li> </ul>	<ul style="list-style-type: none"> <li>➤ Regular monitoring by core members(quarterly )</li> </ul>	<ul style="list-style-type: none"> <li>➤ Assessment form and action plan</li> </ul>	<ul style="list-style-type: none"> <li>➤ W.E.F January 2020</li> </ul>	
	<p><b>4.3</b></p> <ul style="list-style-type: none"> <li>➤ Display of organogram</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Passport</li> <li>➤ Chart paper</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before December 2019</li> </ul>	
	<p><b>4.8</b></p> <ul style="list-style-type: none"> <li>➤ Quarterly assessment/Auditing of availability of hand rub, soap, single use towels and other hand hygiene resources</li> </ul>	<ul style="list-style-type: none"> <li>➤ Core team member(Quarterly )</li> </ul>	<ul style="list-style-type: none"> <li>➤ Checklist</li> </ul>	<ul style="list-style-type: none"> <li>➤ W.E.F January 2020</li> </ul>	



	<b>4.9</b> ➤ Need to trained one staff for IPC	➤ DHO ➤ Relevant program	➤ Financial supports for the stationary	➤ Yearly once	
	<b>4.10</b> ➤ Need to train all the staffs on WASH/IPC	➤ DHO ➤ Relevant program	➤ Financial supports for the stationary	➤ Yearly once	
	<b>4.11</b> ➤ Appointment of IPC focal at BHU level	➤ BHU staffs	➤ Training ➤ Checklist	➤ Appointed ➤ (NorbuYangzom)	

Table 2: Action Plan for Punakha Hospital

	<b>What specific improvement action will be taken to resolve the hazards identified?</b>  <i>The actions to be taken link to the hazards recorded in tool 3.</i>	<b>Who will carry out the task and is there anyone who will supervise it?</b> <i>List people responsible for implementation.</i>	<b>What resources are needed to do it?</b>  <i>“Resources” could be staff, technical or financial.</i>	<b>When do you expect to complete this action?</b>  <i>Indicate target date.</i>	<b>Completion date</b>  <i>Once the activity has been completed, record the date of completion.</i>
<b>Water</b>	<b>1.3</b>  ➤ Insufficient water filter in Ward (IPD).	➤ Respective in charges will inform to the Committee. WASH committee will propose to AdmO and admo will follow up.	➤ Financial	➤ December, 2019	
	<b>1.8</b>  ➤ Water storage (Reservoir) is	➤ DHO, and AdmO, Dzongkhag	➤ Zinc Alum Tank, pipe,cement,rod,net		

	sufficient to meet the needs of patients for two days will be identified the new source in 12 five year plan	Administration Punakha	fencing,tank and labour force, Dzongkhag Engineering section,Technician	➤ November, 2019 to October, 2020.	
	<b>1.9</b> ➤ Water is treated and collection for drinking with the proven technology and meet WH performance.	➤ By municipal and Dzongkhag administration. ➤ District health Office	➤ Beyond Health Sector Capacity	➤	
<b>Sanitation</b>	<b>2.1</b> ➤ Number of available and usable toilet or improved latrines for Patient.	➤ DHO and AdmO,	➤ materials required as per technical support(Unsolved problem)	➤ Before next financial year. ➤	

	<p>2.2.</p> <ul style="list-style-type: none"> <li>➤ Toilet or improved latrine clearly separated for staff and patients.</li> </ul>	<ul style="list-style-type: none"> <li>➤ AdmO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Lock and Keys</li> </ul>	<ul style="list-style-type: none"> <li>➤ after maintenance.</li> </ul>	
	<p><b>2.3</b></p> <ul style="list-style-type: none"> <li>➤ <b>Toilet or improved latrines clearly separated for male and female (pictorial Label).</b></li> </ul>	<ul style="list-style-type: none"> <li>➤ AdmO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Pictorial Label</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before December, 2019</li> </ul>	
	<p><b>2.4</b></p> <ul style="list-style-type: none"> <li>➤ Separate Female toilet will be provide to manage menstrual hygiene</li> </ul>	<ul style="list-style-type: none"> <li>➤ By IPD IPC FP (Mrs. Dorji)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Plastic</li> <li>➤ Pad disposal bin with lid</li> </ul>	<ul style="list-style-type: none"> <li>➤ End of December, 2019</li> </ul>	
	<p><b>2.5</b></p> <ul style="list-style-type: none"> <li>➤ No separate toilet for the people living with reduced mobility due to less patient</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO and AdmO,</li> </ul>	<ul style="list-style-type: none"> <li>➤ Financial Support from Dzongkhag Administration.</li> <li>➤ European Toilet/Pot</li> </ul>	<ul style="list-style-type: none"> <li>➤ Next financial year.</li> </ul>	

			➤ Wheel Chair accessible ramps.		
	<p><b>2.6</b></p> <p>➤ <b>Functioning hand hygiene station within 5 M of Latrines.</b></p>	➤ AdmO& Mr. SherubThinley	➤ Body scrubs	➤ Before end of November, 2019	
	<p><b>2.12</b></p> <p>➤ Functional waste collection container in close proximity to all waste generation points for Doctors chamber:</p> <ul style="list-style-type: none"> <li>● Non-infectious waste</li> <li>● Infectious waste</li> <li>● Sharp waste</li> </ul>	<p>➤ AdmO</p> <p>➤ Infection Control Focal Person.</p>	➤ Foot operated Bucket with color code and lid.	➤ January 2020	

Hand hygiene	<p><b>3.1</b></p> <ul style="list-style-type: none"> <li>➤ Hand hygiene materials with placing of Hand washing steps in Chamber No: 10 &amp; 12.</li> </ul>	<ul style="list-style-type: none"> <li>➤ By TekBdr.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Wash Basin (2Nos)</li> <li>➤ Water Tap (2Nos)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Next Financial year.</li> </ul>	
	<p><b>3.6</b></p> <ul style="list-style-type: none"> <li>➤ <b>The exterior of the facility is well fenced, kept generally cleaned</b></li> </ul>	<ul style="list-style-type: none"> <li>➤ By DHO and AdmO</li> </ul>	<p>Already in Plan</p>	<p>By the end of June , 2020</p>	
	<p><b>3.8</b></p> <ul style="list-style-type: none"> <li>➤ Floors will be kept clean with daily cleaning</li> </ul>	<ul style="list-style-type: none"> <li>➤ By supporting staff in charge</li> <li>➤ IPD in charge</li> </ul>	<ul style="list-style-type: none"> <li>➤ Mopping sticks 5nos</li> <li>➤ Surfs 30 kg/yr</li> </ul>	<ul style="list-style-type: none"> <li>➤ Daily cleaning and supervision immediately</li> </ul>	
	<p><b>3.9</b></p> <ul style="list-style-type: none"> <li>➤ Required Materials will be procure from the geog and dzongkhag administration with</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO, AdmO&amp; CMO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Soap</li> <li>➤ Surfs</li> <li>➤ Buckets</li> <li>➤ Hand sensitizer</li> </ul>	<ul style="list-style-type: none"> <li>➤ Proposal submission before December 2019</li> </ul>	

	proposal submission			➤ Procurement before 12 five year plan	
	<b>3.16</b> ➤ <b>The facility has sufficient natural ventilation and where the climate allows large opening windows, skylight and others vents to optimize natural ventilation.</b>	➤ Mr. Tek Bdr, supervised by AdmO	➤ Exhaust fan ➤ Labor ➤ Cement ➤ Sand ➤ Bricks ➤	June, 2020	
<b>Management</b>	<b>4.2</b> ➤ An annual planned budget for the facility is available and includes	➤ DHO and AdmO)	➤ DHO and Financial support	➤ W.E.F January 2020	

	<p>funding for WASH infrastructure, services, personal and continuous procurement for WASH items which is sufficient to meet.</p>				
	<p><b>4.3</b></p> <ul style="list-style-type: none"> <li>➤ <b>An up to date diagram of the facility management structures is clearly visible and legible (Consult with the engineer and other relevant stakeholders).</b></li> <li>➤ Display of organogram</li> </ul>	<ul style="list-style-type: none"> <li>➤ AdmO, WASH Team and DHO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Financial support from District Health Services.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before March, 2020</li> </ul>	
	<b>4.7</b>	<ul style="list-style-type: none"> <li>➤ WASH committee</li> </ul>	To make a proposal	Before March. 2020	



	<ul style="list-style-type: none"> <li>➤ <b>A protocol for operation and maintenance, including procurement for WASH supplies is visible, legible and implemented</b></li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO</li> </ul>			
	<p><b>4.8</b></p> <ul style="list-style-type: none"> <li>➤ Regular ward basis audit are undertaken to assist the availability of hand rub, soap. Single use towel and other hand hygiene resources.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Core team member(Quarterly)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Checklist</li> </ul>	<ul style="list-style-type: none"> <li>➤ W.E.F January 2020</li> </ul>	
	<p><b>4.10</b></p> <ul style="list-style-type: none"> <li>➤ <b>Health care staffs are trained on WASH/IPC each year</b></li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO</li> <li>➤ Relevant program</li> </ul>	<ul style="list-style-type: none"> <li>➤ Financial supports for the stationary</li> </ul>	<ul style="list-style-type: none"> <li>➤ Yearly once</li> </ul>	

	<p><b>4.12</b></p> <ul style="list-style-type: none"> <li>➤ All WASH Committee will have a job description written clearly and legibly including WASH related responsibility and are regularly appraised on the performances of individual in the IWP.</li> </ul>	<ul style="list-style-type: none"> <li>➤ All present Member of WASH initiatives in the hospital.</li> </ul>	<ul style="list-style-type: none"> <li>➤</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before January, 2020.</li> </ul>	
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Table 3: Action Plan for Goenshari PHC

Domain	What specific improvement action will be taken to resolve the hazards identified?	Who will carry out the task and is there anyone who will supervise it? <i>List people responsible for implementation.</i>	What resources are needed to do it? <i>“Resources” could be staff, technical or financial.</i>	When do you expect to complete this action? <i>Indicate target date.</i>	Completion date <i>Once the activity has been completed, record the</i>
	<i>The actions to be taken link to the hazards recorded in tool 3.</i>				

					<i>date of completion.</i>
<b>Water</b>	<b>1.3. 1.4 &amp;1.9</b> <ul style="list-style-type: none"> <li>➤ Drinking water station to be brought and installed</li> </ul>	<ul style="list-style-type: none"> <li>➤ Storage by BHU heath staff(Short term)</li> <li>➤ DHO and Geog administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Submit requisition to DHO for water filter</li> <li>➤ Follow up time to time</li> </ul>	<ul style="list-style-type: none"> <li>➤ Water filter supply to health center</li> </ul>	
	<b>1.14</b> <ul style="list-style-type: none"> <li>➤ Inpatient shower room to be furnish</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO, Geog and Dzongkhag Administration punakha</li> </ul>	<ul style="list-style-type: none"> <li>➤ pipe,cement,rod, and labourforce,DzonkhagEngineeringsection,Technician</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before completion of 12 five year plan</li> </ul>	

Sanitation	<p><b>2.4</b></p> <ul style="list-style-type: none"> <li>➤ Separate female toilet be provide to manage menstrual hygiene</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU Staffs</li> <li>➤ DHO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Plastic</li> <li>➤ Pad disposable bin with lid</li> </ul>	<ul style="list-style-type: none"> <li>➤ Immeditaly</li> </ul>	
	<p><b>2.5</b></p> <ul style="list-style-type: none"> <li>➤ 2 Toilet (male/female) with European pots for pregnant and disable and elderly</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO and Gewog administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Disable people not came till date</li> <li>➤ Martials and required technical support</li> </ul>	<ul style="list-style-type: none"> <li>➤ 12<sup>th</sup> five year plan</li> </ul>	
	<p><b>2.7</b></p> <ul style="list-style-type: none"> <li>➤ Record of cleaning toilet will be maintained daily register</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO</li> <li>➤ BHU staffs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Sign labeling(male/Female)</li> </ul>	<ul style="list-style-type: none"> <li>➤ immediately</li> </ul>	
	<p><b>2.12</b></p> <ul style="list-style-type: none"> <li>➤ Waste collection container needed separately with lid</li> </ul>	<ul style="list-style-type: none"> <li>➤ Geog administration and District health office</li> </ul>	<ul style="list-style-type: none"> <li>➤ Buckets with lid (8 nos)</li> </ul>	<ul style="list-style-type: none"> <li>➤ January 2020</li> </ul>	

	<b>2.15</b> ➤ Undertake Fencing and roofing	➤ DHO ➤ Gewog administration	➤ Barbate wire ➤ CGI sheet	12 <sup>th</sup> five year plan	
	<b>2.18</b> ➤ Dispose of waste on regular basis( daily)	➤ BHU staffs(caretaker)	➤ Register book(1) ➤ pen	➤ Immediately	
	<b>2.21 &amp; 3.14</b> ➤ Develop of SOP for safe management of health care waste	➤ BHU staffs	➤ Guide book	➤ January 2020	
	<b>2.22</b> ➤ Needed protective equipment for people handling waste management	➤ Relevant program	➤ Rubber boots ➤ Apron ➤ Tough ➤ gloves	➤ When Equipment supply from program	
	<b>3.1 &amp; 4.8</b> ➤ Hand hygiene materials with placing of hand washing steps	➤ BHU staffs ➤ Relevant program	➤ Hand washing steps poster from relevant program	➤ Poster from program	

	<p><b>3.4</b></p> <ul style="list-style-type: none"> <li>➤ No tap or hand washing facility available in waste disposable area</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO</li> <li>➤ Gewog administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Pipe &amp; cement</li> <li>➤ Technical person</li> </ul>	<ul style="list-style-type: none"> <li>➤ 12th five year plan</li> </ul>	
<b>Hand hygiene</b>	<p><b>3.6</b></p> <ul style="list-style-type: none"> <li>➤ No proper fencing around the facility</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Barbet wire</li> <li>➤ Pole &amp; nails</li> <li>➤ labor force</li> </ul>	<ul style="list-style-type: none"> <li>➤ 12<sup>th</sup> five year plan</li> </ul>	
	<p><b>3.7</b></p> <ul style="list-style-type: none"> <li>➤ No proper lightning outside the facility</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU Staffs</li> <li>➤ Geog administration</li> <li>➤ District health office</li> </ul>	<ul style="list-style-type: none"> <li>➤ Materials requirement as per the technical judgment</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before 12 five year plan</li> </ul>	
	<p><b>3.9</b></p> <ul style="list-style-type: none"> <li>➤ Required materials will be procure from the gewog and dzongkhag administration with proposal submission</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> <li>➤ Caretaker</li> <li>➤ Geog administration</li> <li>➤ District health office(for material procurement)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Broom 30 nos(hard &amp; soft)</li> <li>➤ Mopping sticks 5nos</li> <li>➤ Surfs 30 kg/yr</li> </ul>	<ul style="list-style-type: none"> <li>➤ Proposal submissions to dzongkhag administration(materailas procurement)</li> </ul>	

				➤ Materials procurement in 12 five year plan	
Management	<b>4.1</b> ➤ Implementation of WASH FIT plan and to monitored quarterly	> Regular monitoring by core member(6 monthly follow up)	> Assessment form and action plan	➤ WEF January 2020	
	<b>4.2</b> ➤ An annual planned budget for facility	➤ DHO ➤ Gewog administration	➤ BHU do not have separate budget	➤ BHU do not have separate budget	
	<b>4.10</b> ➤ Need to train all the staffs on WASH/IPC	➤ DHO & Relevant program	➤ Finical support for stationary	➤ Once in a year	





Table 4: Action Plan for Nobgang PHC

Domain	<p><b>What specific improvement action will be taken to resolve the hazards identified?</b></p> <p><i>The actions to be taken link to the hazards recorded in tool 3.</i></p>	<p><b>Who will carry out the task and is there anyone who will supervise it? <i>List people responsible for implementation.</i></b></p>	<p><b>What resources are needed to do it?</b></p> <p><i>“Resources” could be <b>staff, technical or financial.</b></i></p>	<p><b>When do you expect to complete this action?</b></p> <p><i>Indicate target date.</i></p>	<p><b>Completion date</b></p> <p><i>Once the activity has been completed, record the date of completion.</i></p>
Water	<p><b>1.3</b></p> <ul style="list-style-type: none"> <li>➤ Water service available at all times and of sufficient quantity. (<b>Water sometimes not sufficient during dry session</b>)</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> <li>➤ To discuss with Tshogpa and water care taker of Nobgang for more connection.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Water care taker and tshogpa</li> </ul>	<ul style="list-style-type: none"> <li>➤ As and when water get shortage</li> </ul>	

Domain	<p><b>What specific improvement action will be taken to resolve the hazards identified?</b></p> <p><i>The actions to be taken link to the hazards recorded in tool 3.</i></p>	<p><b>Who will carry out the task and is there anyone who will supervise it? <i>List people responsible for implementation.</i></b></p>	<p><b>What resources are needed to do it?</b></p> <p><i>“Resources” could be <b>staff, technical or financial.</b></i></p>	<p><b>When do you expect to complete this action?</b></p> <p><i>Indicate target date.</i></p>	<p><b>Completion date</b></p> <p><i>Once the activity has been completed, record the date of completion.</i></p>
Sanitation	<p><b>2.1</b></p> <ul style="list-style-type: none"> <li>➤ To construct more toilet at BHU</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> <li>➤ To get help from Geog administration and District health Office</li> </ul>	<ul style="list-style-type: none"> <li>➤ Take support of Gewog and Dzongkhag for constructing Toilet at BHU.</li> <li>➤ Existing two toilet are sufficient for patients and staff by considering population and visitors</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before January 2020(unsolved)</li> </ul>	
	<p><b>2.5</b></p> <ul style="list-style-type: none"> <li>➤ No separate toilet for the people living with reduced mobility due to less patient</li> </ul>	Remarks(less patient record)	Remarks(less patient record)	Remarks (less patient record)	

Domain	<p><b>What specific improvement action will be taken to resolve the hazards identified?</b></p> <p><i>The actions to be taken link to the hazards recorded in tool 3.</i></p>	<p><b>Who will carry out the task and is there anyone who will supervise it? <i>List people responsible for implementation.</i></b></p>	<p><b>What resources are needed to do it?</b></p> <p><i>“Resources” could be <b>staff, technical or financial.</b></i></p>	<p><b>When do you expect to complete this action?</b></p> <p><i>Indicate target date.</i></p>	<p><b>Completion date</b></p> <p><i>Once the activity has been completed, record the date of completion.</i></p>
	<p><b>2.7</b></p> <ul style="list-style-type: none"> <li>➤ Record of cleaning toilet will be maintained daily register</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Register book(1)</li> <li>➤ pen</li> </ul>	<ul style="list-style-type: none"> <li>➤ Immediately</li> </ul>	
Sanitation	<p><b>2.14</b></p> <ul style="list-style-type: none"> <li>➤ Fencing of burial pit</li> </ul>	<ul style="list-style-type: none"> <li>➤ Written proposal by BHU staffs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Wood Poles</li> <li>➤ Nail</li> <li>➤ Labor force</li> </ul>	<ul style="list-style-type: none"> <li>➤ Proposal submission before June 2020</li> <li>➤ Fencing before 12 five year plan</li> </ul>	

Domain	<p><b>What specific improvement action will be taken to resolve the hazards identified?</b></p> <p><i>The actions to be taken link to the hazards recorded in tool 3.</i></p>	<p><b>Who will carry out the task and is there anyone who will supervise it? List people responsible for implementation.</b></p>	<p><b>What resources are needed to do it?</b></p> <p><i>“Resources” could be staff, technical or financial.</i></p>	<p><b>When do you expect to complete this action?</b></p> <p><i>Indicate target date.</i></p>	<p><b>Completion date</b></p> <p><i>Once the activity has been completed, record the date of completion.</i></p>
	<p><b>2.22</b></p> <ul style="list-style-type: none"> <li>➤ Appropriate protective equipment to all staff handling waste at BHU</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staff</li> </ul>	<ul style="list-style-type: none"> <li>➤ Requirement as per annual indent</li> </ul>	<ul style="list-style-type: none"> <li>➤ Indent in annual consumable 2021.</li> </ul>	
Hand hygiene	<p><b>3.2</b></p> <ul style="list-style-type: none"> <li>➤ Hand hygiene Promotion materials with placing of Hand washing steps</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> <li>➤ Relevant program</li> </ul>	<ul style="list-style-type: none"> <li>➤ Paper</li> <li>➤ Marker pen</li> <li>➤ Hand washing steps poster from relevant programmed</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before January 2020</li> <li>➤ Poster from the programmed</li> </ul>	
	<p><b>3.14</b></p> <ul style="list-style-type: none"> <li>➤ To maintain record of cleaning visible and</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs(supervision)</li> <li>➤ caretaker</li> </ul>	<ul style="list-style-type: none"> <li>➤ Register book</li> </ul>	<ul style="list-style-type: none"> <li>➤ Immediately</li> </ul>	

Domain	<p><b>What specific improvement action will be taken to resolve the hazards identified?</b></p> <p><i>The actions to be taken link to the hazards recorded in tool 3.</i></p>	<p><b>Who will carry out the task and is there anyone who will supervise it? <i>List people responsible for implementation.</i></b></p>	<p><b>What resources are needed to do it?</b></p> <p><i>“Resources” could be <b>staff, technical or financial.</b></i></p>	<p><b>When do you expect to complete this action?</b></p> <p><i>Indicate target date.</i></p>	<p><b>Completion date</b></p> <p><i>Once the activity has been completed, record the date of completion.</i></p>
	<p>signed by the cleaners each day</p>				
Management	<p><b>4.1</b></p> <ul style="list-style-type: none"> <li>➤ Implementation of WASH FIT plan and to monitored quarterly</li> </ul>	<ul style="list-style-type: none"> <li>➤ Regular monitoring by core members(quarterly )</li> </ul>	<ul style="list-style-type: none"> <li>➤ Assessment form and action plan</li> </ul>	<ul style="list-style-type: none"> <li>➤ W.E.F January 2020</li> </ul>	
	<p><b>4.2</b></p> <ul style="list-style-type: none"> <li>➤ Annual Plan Budget in place</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staff</li> </ul>	<ul style="list-style-type: none"> <li>➤ To submit requisition to DHO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Yearly requisition</li> </ul>	
	<p><b>4.3</b></p> <ul style="list-style-type: none"> <li>➤ Display of organ gram</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Passport</li> <li>➤ Chart paper</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before January 2020</li> </ul>	

Domain	<p><b>What specific improvement action will be taken to resolve the hazards identified?</b></p> <p><i>The actions to be taken link to the hazards recorded in tool 3.</i></p>	<p><b>Who will carry out the task and is there anyone who will supervise it? <i>List people responsible for implementation.</i></b></p>	<p><b>What resources are needed to do it?</b></p> <p><i>“Resources” could be <b>staff, technical or financial.</b></i></p>	<p><b>When do you expect to complete this action?</b></p> <p><i>Indicate target date.</i></p>	<p><b>Completion date</b></p> <p><i>Once the activity has been completed, record the date of completion.</i></p>
	<p><b>4.7</b></p> <ul style="list-style-type: none"> <li>➤ A protocol for reference</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Before January 2010</li> </ul>	
<b>Managemen</b>	<p><b>4.12</b></p> <ul style="list-style-type: none"> <li>➤ Jab description of all staff in WASH responsibilities</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staff</li> </ul>	<ul style="list-style-type: none"> <li>➤ Paper, Pen and computer</li> </ul>	<ul style="list-style-type: none"> <li>➤ Immediately</li> </ul>	

Table 5: Action Plan for Shengana PHC

Domain	<p><b>What specific improvement action will be taken to resolve the hazards identified?</b></p> <p><i>The actions to be taken link to the hazards recorded in tool 3.</i></p>	<p><b>Who will carry out the task and is there anyone who will supervise it? <i>List people responsible for implementation.</i></b></p>	<p><b>What resources are needed to do it?</b></p> <p><i>“Resources” could be <b>staff, technical or financial.</b></i></p>	<p><b>When do you expect to complete this action?</b></p> <p><i>Indicate target date.</i></p>	<p><b>Completion date</b></p> <p><i>Once the activity has been completed, record the date of completion.</i></p>
Water		➤	➤		
Sanitation	<p><b>2.1</b></p> <p>➤ Separate toilet construction for the visiting patient</p>	<p>Gewog will put up in the plan or seek support from dzongkhag</p>	<p>➤ Cements , sand , toilet fittings and CGI sheet</p>	<p>➤ Within two years</p>	<p>30/11/2021</p>

	<p><b>2.2</b></p> <ul style="list-style-type: none"> <li>➤ Separate toilet for staff and patients will be labeled</li> </ul>	<ul style="list-style-type: none"> <li>➤ HA</li> </ul>	<ul style="list-style-type: none"> <li>➤ Sign board</li> </ul>	<ul style="list-style-type: none"> <li>➤ Within two weeks of completion of construction</li> </ul>	14/12/2021
	<p><b>2.3</b></p> <ul style="list-style-type: none"> <li>➤ Toilet separation of patients for male and female will be labeled</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staff</li> </ul>	<ul style="list-style-type: none"> <li>➤ Sign board (male/Female)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Immediately after construction</li> </ul>	
	<p><b>2.5</b></p> <ul style="list-style-type: none"> <li>➤ Disable friendly toilet will be planned during new construction</li> </ul>	DHO/GUP/ site engineer /HA	Disable friendly drawings with enough budget	Within two years	30/11/2021
	<p><b>2.7</b></p> <ul style="list-style-type: none"> <li>➤ Record of cleaning toilet will be maintained daily register</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Register book(1)</li> <li>➤ pen</li> </ul>	<ul style="list-style-type: none"> <li>➤ Immediately</li> </ul>	
	<p><b>2.8</b></p> <ul style="list-style-type: none"> <li>➤ Major Maintenance of the drainage outlet to main septic tank will be carry out</li> </ul>	DHO/Gewog Administration/HA	Budget from Dzongkhag and Gewog to procure construction materials	Within one year	



Hand hygiene	<p><b>3.4</b></p> <ul style="list-style-type: none"> <li>➤ Maintenance of old existing tape stand near disposal pit</li> </ul>	<ul style="list-style-type: none"> <li>➤ HA</li> <li>➤ Gewog Administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ 1 roll HDPE pipe</li> <li>➤ Cement 5bags</li> <li>➤ Sand &amp; Aggregate</li> <li>➤ Fittings</li> </ul>	<ul style="list-style-type: none"> <li>➤ End of January</li> </ul>	30/01/2020
Facility Environment	<p><b>3.7</b></p> <ul style="list-style-type: none"> <li>➤ Street light installation around the BHU area for lighting</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO for paln and approval</li> <li>➤ Geog administration will monitor</li> <li>➤ HA will propose immediately</li> </ul>	<ul style="list-style-type: none"> <li>➤ Materials required as per engineers estimates amd drawings</li> </ul>	<ul style="list-style-type: none"> <li>➤ Within two financial year (2021)</li> </ul>	
	<p><b>3.10</b></p> <ul style="list-style-type: none"> <li>➤ Procurement of protective attires annually through Dzongkhag Health sector stationary budget</li> </ul>	<ul style="list-style-type: none"> <li>➤ HA will write requisition to DHO</li> <li>➤ DHO will look on the possibilities</li> </ul>	<ul style="list-style-type: none"> <li>➤ 2 pairs of Household cleaning gloves</li> <li>➤ Apron</li> <li>➤ Boots</li> <li>➤ Mask</li> </ul>	Annual Procurement	
	<p><b>3.13</b></p> <ul style="list-style-type: none"> <li>➤ Connection of internet to track the IPC stocks and link with dzongkhag procurement</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO (Dzongkhag)</li> <li>➤ HA</li> <li>➤ HA</li> </ul>	<ul style="list-style-type: none"> <li>➤ Internet connectivity</li> </ul>	<ul style="list-style-type: none"> <li>➤ Within 2 years</li> </ul>	

		<ul style="list-style-type: none"> <li>➤ Dzongkhag ICT</li> </ul>			
	<b>3.14</b> <ul style="list-style-type: none"> <li>➤ Maintain record of cleaning visible and signed by the cleaners each day</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staffs(supervision)</li> <li>➤ caretaker</li> </ul>	<ul style="list-style-type: none"> <li>➤ Register book</li> </ul>	<ul style="list-style-type: none"> <li>➤ Immediately</li> </ul>	
	<b>3.15</b> <ul style="list-style-type: none"> <li>➤ Procurement of washing Detergent and Washing machine</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO and Gewog Administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Washing Machine</li> <li>➤ Detergent</li> </ul>	<ul style="list-style-type: none"> <li>➤ Within one year</li> </ul>	
	<b>3.17</b> <ul style="list-style-type: none"> <li>➤ Need separate Kitchen cum Store for patient</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO and geog administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Required as per technical specification</li> </ul>	<ul style="list-style-type: none"> <li>➤ Within 12 five year plan</li> </ul>	
	<b>3.18</b> <ul style="list-style-type: none"> <li>➤ Adjust patient bed (remove one bed for safety and space crunch)</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staff</li> </ul>	Not required	Immediately	
<b>Management</b>	<b>4.1</b> <ul style="list-style-type: none"> <li>➤ Implementation of WASH FIT plan and to monitored quarterly</li> </ul>	<ul style="list-style-type: none"> <li>➤ Regular monitoring by core</li> </ul>	<ul style="list-style-type: none"> <li>➤ Assessment form and action plan</li> </ul>	<ul style="list-style-type: none"> <li>➤ W.E.F January 2020</li> </ul>	

		members(quarterly ) ➤ Nominate focal person			
	<b>4.2</b> ➤ Annual Budget proposal to Dzongkhag and other agencies for support	➤ HA will propose budget annually to Dzongkhag Health sector	Materials as need based	Within a year	
	<b>4.7</b> ➤ Protocol for Operation and Maintenance implemented	➤ DHO ➤ HA ➤ PHED	➤ Protocol from MOH	➤ As per the directives from PHED, MOH	
	<b>4.9</b> ➤ Need to trained one staff for IPC	➤ DHO ➤ Relevant program	➤ Financial supports ➤ Resource person	➤ Yearly once	
	<b>4.10</b> ➤ Need to train all the staffs on WASH/IPC	➤ DHO ➤ Relevant program	➤ Financial supports ➤ Resource person	➤ Yearly once	
	<b>4.11</b> ➤ Appointment of IPC focal at BHU level	➤ BHU staffs	➤ Training ➤ Checklist	➤ Immediately (HA. Pema Choden Nominated )	

Table 6 : Action Plan for Thinleygang PHC, Punakha



Domain	<p><b>What specific improvement action will be taken to resolve the hazards identified?</b></p> <p><i>The actions to be taken link to the hazards recorded in tool 3.</i></p>	<p><b>Who will carry out the task and is there anyone who will supervise it? List people responsible for implementation.</b></p>	<p><b>What resources are needed to do it?</b></p> <p><i>“Resources” could be <b>staff, technical or financial.</b></i></p>	<p><b>When do you expect to complete this action?</b></p> <p><i>Indicate target date.</i></p>	<p><b>Completion date</b></p> <p><i>Once the activity has been completed, record the date of completion.</i></p>
Water	<p>1.10*</p> <p>&gt; Drinking water has appropriate chlorine residual (o.2mg.L or 0.5mg/L in emergency )or E.Coli/100ml and is not turbin</p>	<p>**Not Applicable in BHU Setting for chlorine ,but do water quality testing for every 6 month and also boil and filter water for consuming to reduce risk of getting water born diseases E.coli</p>			
	<p>1.11* The facility water supply is regulated according to national water quality standards( mark Not applicable if not standards exist)</p>	<p>Not Applicable</p>			

	1.14 At least one shower or bathing area is available per 40 patients in patients setting and is functioning and accessible	Not applicable in BHU Setting, but with bucket available			
	1.6 All end point (i.e taps) are connected to an available and functioning of water supply	One bib cock (tap) not functioning well	Financial resources require Done by I/C and reimbursement to DHO	Before 26 <sup>th</sup> of November	
<b>Sanitation</b>	2.5 At least one toilet meets the need of people with reduce mobility	Dzongkhag will look after this problem,  But not much disability patient in present ,and wastage of financial resource	➤ Financial and technical from DHO	➤ When as require ,but difficult to solve problem	When as require and need
Health care waste	2.15* Incinerator or alternative treatment of infection and sharp waste is	Do it by chlorination (bleaching)or disinfection in BHU setting	➤	➤	

	functional and of sufficient capacity				
	2.16 Sufficient energy available for incineration or alternative treatment technologies ( Mark if not applicable)	Not applicable	➤		
	2.19 *Anatomical/Pathological waste is put in a dedicated pathological waste/Placenta pit, burnt in a crematory or buried in cemetery( Marks if not applicable)	➤ Not applicable in BHU Setting, but in a year one or two delivery occurred in BHU and buried in manually.			
	2.21 Protocol or standard operation (SOP) for safe management of health care waste clearly visible and eligible	Not started (SOP)	BY BHU Staff	Before 26 <sup>th</sup> of November,2019	
Facility Environment	3.6 The exterior of the facility is well –fenced keep generally clean(free from solid waste stagnant water, no	Temporary fenced was done, no animals and human faeces seen	➤ Financial support and plan from DHO Office, under progress	Before financial june 2019	

	animal and human faces in or around the facility etc.	But no proper fence and need to be done			
	3.12 Bed have insecticide treated nets to protect patients from Mosquito borne diseases	Low risk of mosquito borne diseases ,but we have some net for emergency use	➤ Need to indent when as require		
	3.15 Laundry facility are available to wash linen from patients bed between each patient	Not applicable, but done with manually when as required	➤		
	3.17 kitchen store and prepared food is protected from files other insect and rat	Not applicable in BHU setting	➤		
Management	4.1 WASH FIT or other quality improvement/Management and regularly monitored	No plan	By BHU staff	Before 30 <sup>th</sup> of November,2019	



4.2 An Annual planned budget for the facility is available and include funding for WASH in fractures ,services, personal and the continuous procurement of wash item (Hand Hygiene product, minor supplies to repair pipes, toilets etc. which is sufficient to meet the needs to the facility	No budget, done by DHO Office		Every fiscal year	
4.7 a protocol for operation and maintenance including procurement of WASH supplies is visible, legible and implemented	procurement are done by DHO office, but some hand washing soap in emergency arranged by IC and reimbursement done			
4.9 new health care personal received IPC training as part of their orientation program	Not all staff were trained	Program, MoH and DHO	Refresher training in every year if not one time training to all heath care staff	
4.10 Health care staff are not trained on WASH/IPC each year	Yes	Program, MoH and DHO	Every year	

4.11 Facility has a dedicated WASH or IPC focal person	NO	By BHU Staff	Before 30th of November 2019	
4.12 All staff have a job description written clearly and legibly including WASH related responsibilities and are regularly apprise on their performance	No	By BHU staff	Before 30th of November 2019	
4.13 High performance staff are recognized and rewarded and those that do not perform are dealt with accordingly	No, but DHO give equal chances to attend workshop/ training and also encouragement and praise.	DHO Office		
4.14 WASH FIT coordination meeting, Team member Gup, DHO, tshokpa respective chewog, HA and care taker	No	WASH FIT team member	Quarterly, march, June, September, December,2920	

Table 7:  
Action  
Plan for

Kabesa BHU II

Domain	<p><b>What specific improvement action will be taken to resolve the hazards identified?</b></p> <p><i>The actions to be taken link to the hazards recorded in tool 3.</i></p>	<p><b>Who will carry out the task and is there anyone who will supervise it? List people responsible for implementation.</b></p>	<p><b>What resources are needed to do it?</b></p> <p><i>“Resources” could be staff, technical or financial.</i></p>	<p><b>When do you expect to complete this action?</b></p> <p><i>Indicate target date.</i></p>	<p><b>Completion date</b></p> <p><i>Once the activity has been completed, record the date of completion.</i></p>
Water	<p>1.14</p> <p>1. No shower room at present shall be solved by installing shower facilities in existing toilet</p>	<ul style="list-style-type: none"> <li>➤ HA, DHO and Gewog Administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ GI pipe</li> <li>➤ HDPE pipe</li> <li>➤ Fittings</li> <li>➤ Shower head</li> </ul>	<p>End of this fiscal year</p>	<p>‘30/06/2020</p>
Sanitation	<p>2.3</p> <ul style="list-style-type: none"> <li>➤ No separate latrines for male and female can be solved by labelling the existing toilet.</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staff</li> </ul>	<ul style="list-style-type: none"> <li>➤ Sign board (male/Female)</li> </ul>	<ul style="list-style-type: none"> <li>➤ Within one week</li> </ul>	<p>‘14/11/2019</p>

	<b>2.4</b> ➤ Separate female toilet will be provided to manage menstrual hygiene	<ul style="list-style-type: none"> <li>➤ BHU staff</li> <li>➤ DHO to supply pad disposal bin</li> </ul>	<ul style="list-style-type: none"> <li>➤ Plastic</li> <li>➤ Pad disposal bin with lid</li> </ul>	➤ Before end of this financial year.	30/06/2020
<b>Healthcare waste</b>	<b>2.19</b> ➤ No dedicated place for anatomy waste disposal	<ul style="list-style-type: none"> <li>➤ Gewog Administration</li> <li>➤ BHU staff</li> </ul>	<ul style="list-style-type: none"> <li>➤ Fencing materials</li> <li>➤ Tin sheet for roofing</li> </ul>	➤ Before end of this financial year.	30/06/2020
<b>Hand hygiene</b>	<b>3.2</b> ➤ Hand hygiene promotion material is not available	➤ BHU staff	<ul style="list-style-type: none"> <li>➤ Paper</li> <li>➤ Marker pen</li> <li>➤ Handwashing steps poster from relevant programme</li> </ul>	➤ Before end of this financial year.	30/06/2020
<b>Facility Environment</b>	<b>3.7</b> ➤ Currently no general lighting to ensure safe provision of health care including at night can be solved by installing glove light within BHU premises.	<ul style="list-style-type: none"> <li>➤ BHU staff</li> <li>➤ DHO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Electrical wire</li> <li>➤ Glove light bulb</li> <li>➤ Switch</li> </ul>	➤ Before end of this financial year	30/06/2020

	<p><b>3.9</b></p> <ul style="list-style-type: none"> <li>➤ No appropriate mops</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staff</li> <li>➤ Gewog administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Mops</li> </ul>	<p>Before end of this financial year</p>	
	<p><b>3.12</b></p> <ul style="list-style-type: none"> <li>➤ Insecticide treated nets to protect patients from mosquito born not require at its not malarias area at Kabjisa Gewog</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staff</li> </ul>	<ul style="list-style-type: none"> <li>➤ If required will seek from DHO for necessary supply.</li> </ul>	<ul style="list-style-type: none"> <li>➤ As and when require</li> </ul>	
	<p><b>3.15</b></p> <ul style="list-style-type: none"> <li>➤ Laundry facilities are not available to wash linen can be solved by supplying washing machine</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU Staff</li> <li>➤ DHO</li> <li>➤ Gewog Administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Washing Machine (8.5kg)</li> </ul>	<ul style="list-style-type: none"> <li>➤ At the end of this financial year</li> </ul>	30/06/2020
<b>Management</b>	<p><b>4.1</b></p> <ul style="list-style-type: none"> <li>➤ WASH FIT action plan will be developed and regularly evaluated half yearly</li> </ul>	<ul style="list-style-type: none"> <li>➤ Regular monitoring by core members</li> </ul>	<ul style="list-style-type: none"> <li>➤ Assessment form and action plan</li> </ul>	<ul style="list-style-type: none"> <li>➤ W.E.F January 2020</li> </ul>	

	<p><b>4.2</b></p> <ul style="list-style-type: none"> <li>➤ BHU does not have separate budget and its integrated with the dzongkhag health budget. Fund allocated is insufficient</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO</li> <li>➤ Gewog Administration</li> </ul>	<ul style="list-style-type: none"> <li>➤ Budget</li> </ul>	<ul style="list-style-type: none"> <li>➤ From next financial year (2020-2021)</li> </ul>	'01/07/2020
	<p><b>4.7</b></p> <ul style="list-style-type: none"> <li>➤ Currently no protocol for Operation and Maintenance can be solved by framing protocol</li> </ul>	<ul style="list-style-type: none"> <li>➤ BHU staff</li> <li>➤ DHO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Technical support</li> </ul>	<ul style="list-style-type: none"> <li>➤ From next financial year</li> </ul>	'2020-2021
	<p><b>4.13</b></p> <ul style="list-style-type: none"> <li>➤ High performing staff needs to be recognized and rewarded in order to increase the efficiency of the public service delivery</li> </ul>	<ul style="list-style-type: none"> <li>➤ DHO</li> </ul>	<ul style="list-style-type: none"> <li>➤ Timely monitoring</li> </ul>	<p>Next year</p>	'2020 - 2021

**Table 8: Action Plan for Tshocha PHC**

Domain	<b>What specific improvement action will be taken to resolve the hazards identified?</b>  <i>The actions to be taken link to the hazards recorded in tool 3.</i>	<b>Who will carry out the task and is there anyone who will supervise it? List people responsible for implementation.</b>	<b>What resources are needed to do it?</b>  <i>“Resources” could be staff, technical or financial.</i>	<b>When do you expect to complete this action?</b>  <i>Indicate target date.</i>	<b>Completion date</b>  <i>Once the activity has been completed, record the date of completion.</i>
	1.6  All end points(i.e. taps) are connected to an available and functioning water supply	HA IC	Need money	30/3/2020	
Water	1.14*  At least one shower or bathing area is available per 40 patients in inpatient settings and is functioning and accessible	Dzongkhag	Needed money	30/3/2020	
	1.15		Needed money	30/3/2020	

Showers are adequately lit including at night	Not Applicable			
2.2 Toilets or improved latrines clearly separated for staff and patients.			30/3/2020	
2.3 Toilets or improved latrines clearly separated for male and females			30/3/2020	
2.4 At least one toilet or improved latrines provides the means to manage menstrual hygiene needs			30/3/2020	
2.5 At least one toilet meets the need of people with reduce mobility	Dzongkhag will look after this problem,  But not much disability patient at present ,and wastage of financial resource	Financial and technical from DHO	When need arises ,but difficult to solve problem	When need arises



	2.16 Sufficient energy available for incineration or alternative treatment technologies ( Mark if not applicable)	Not applicable			
	2.19 *Anatomical/Pathological waste is put in a dedicated pathological waste/Placenta pit, burnt in a crematory or buried in cemetery( Marks if not applicable)	➤ Not applicable in BHU Setting, but in a year one or two delivery occurred in BHU and buried in manually.			
Facility Environment	3.6 The exterior of the facility is well –fenced keep generally clean(free from solid waste stagnant water, no animal and human faces in or around the facility etc.	Temporary fenced was done, no animals and human faeces seen  But no proper fence and need to be done	➤ Financial support and plan from DHO Office, under progress	Before financial June 2020	

	3.7 General lightning sufficiently powered and adequate to ensure safe provision of health care including at night (mark if not applicable).	Low risk of mosquito born diseases ,but we have some net for emergency use	➤ Need to indent when as require	Renovation going on	
	3.12 Beds have insecticide treated nets to protect patients from mosquito born disease.		Have to make Annual Indents by October 2020	Receives in Annual supply 2021	
	3.13 A mechanism exists to track supply of IPC-related materials (such as gloves and protective equipment) to identify stock outs.		Annual supply from Dzongkhag		
	3.18 Beds for patients should be separated by 2.5 m from the center of one	Yes all beds meet this guidance			

	bed to next and each bed has one patients.				
Management	4.1 WASH FIT or other quality improvement/Management and regularly monitored	No plan	By BHU staff	30/3/2020	
	4.2 An Annual planned budget for the facility is available and include funding for WASH in fractures ,services, personal and the continuous procurement of wash item (Hand Hygiene product, minor supplies to repair pipes, toilets etc. which is sufficient to meet the needs to the facility	No budget, done by DHO Office		Every fiscal year	
	4.3 An up- to- date diagram of the facility management structure is	yes			

clearly visible and legible				
4.7 A protocol for operation and maintenance, including procurement of WASH supplies is visible, legible and implemented	Yes			
4.10 Health care staff are not trained on WASH/IPC each year	Yes	Program, MoH and DHO	Every year	
4.11 Facility has a dedicated WASH or IPC focal person	NO	By BHU Staff	30/3/2020	
4.12 All staff have a job description written clearly and legibly including WASH related responsibilities and are	No	By BHU staff	30/3/2020	

regularly apprise on their performance				
<p>4.13</p> <p>High performance staff are recognized and rewarded and those that do not perform are dealt with accordingly</p>	<p>No, but DHO give equal chances to attend workshop/ training and also encouragement and praise.</p>	<p>DHO Office</p>		

