



WASH FIT implementation – selected examples

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WASH FIT was first developed in 2015 and has been piloted in a number of different countries and contexts. A snapshot of examples is presented below.

Targeted facility trainings: Chad, Cholera hotspots (2015-2016)

WASH FIT was first used in Chad as part of a wider effort to improve WASH in health care facilities and households in cholera hotspot communities. Two 3-day trainings involving 50 staff from 13 health care facilities were held. Facilities were primary care facilities that also serve as cholera treatment centres with limited resources. All facilities received two to three follow-up visits from the government and project partners in the six months following the training. During the months that followed the training, all facilities made some progress in making improvements (i.e. posting handwashing reminders, cleaning and beautifying the grounds surrounding the facilities, installing handwashing stations). Facilities with committed leaders made substantially more progress than those without.

District and national training: Mali (2015-ongoing)

WASH FIT has been used to strengthen WASH in primary and secondary care facilities (all of which provide maternity and child delivery services) in two districts, as well as more widely through use by various NGO partners and the government. Two district level trainings were conducted, each with 11 facilities and district health officials taking part and a national training also took place to sensitize key WASH partners, including UNICEF and government leaders who are implementing WASH under their own efforts. In total, more than 240 facilities are currently implementing WASH FIT. While some facilities have made more progress than others, the establishment of a national taskforce and ongoing work to strengthen implementation of WASH standards, have been instrumental in driving the work at the national level. In addition, regular supervisory visits have helped motivate facilities to continue to make improvements.

National training of trainers: Liberia, Ebola recovery (2015-ongoing)

As part of post-Ebola early recovery efforts and to address serious gaps in WASH in health care facilities, the Vice President of Liberia launched a WASH and Environmental Health Package for Health Care Facilities in 2016 (Government of Liberia, 2016). To support implementation of the package, WHO and UNICEF facilitated a national training of trainers that, as of October 2016, has trained 94 trainers covering all eight districts of the country. Training lasted 4-5 days, incorporated new IPC standards and practice WASH FIT assessments in facilities allowing trainers to put theory into practice. Activities to roll-out the training to all facilities through environmental health and IPC officers as well as linking the work to the finalization and implementation of a national strategy on quality are underway.

Regional level: West Africa, country action planning (Senegal, 2016)

Eight countries (Chad, the Democratic Republic of Congo (DRC), Ghana, Guinea, Liberia, Mali, Senegal and Sierra Leone) participated in a regional workshop in Senegal in June 2016 to develop national action plans to implement WASH FIT as part of broader efforts on strengthening quality care and WASH in health care facilities. All eight countries committed to start implementation of WASH FIT, or continue existing efforts (Chad, Liberia, Mali) either at district level or nationally. Following the workshop, Senegal held a planning meeting with partners to develop a roadmap for their country action plan, Chad committed to roll-out WASH FIT to a subsequent 24 facilities (as well as continuing to monitor activities in the initial 13 facilities), Ghana is setting up a technical committee and will be conducting a national assessment on WASH in health care facilities and the DRC has included WASH indicators in the Ministry of Public Health's Strategic Plan for 2016-2020.