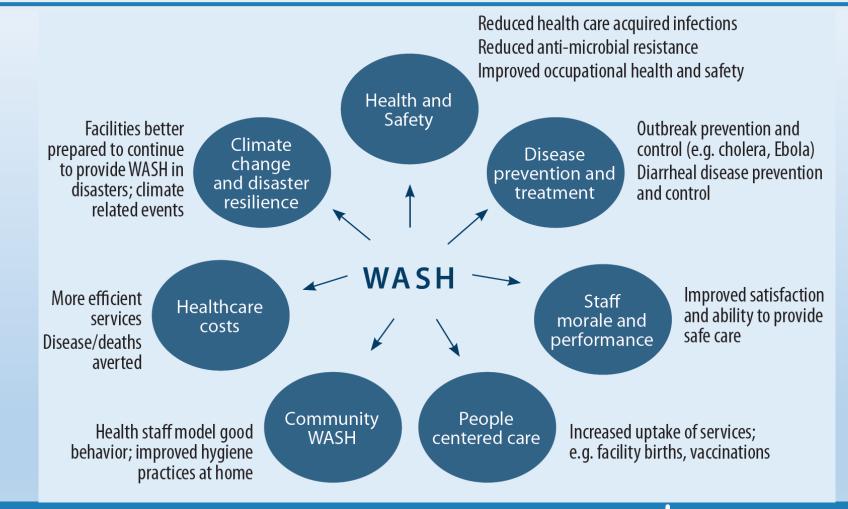
Delivering quality people centred health care for all: The role of water, sanitation and hygiene in achieving quality UHC

Prince Mahidol Award Conference Bangkok 2016

Alison Macintyre Water, sanitation, hygiene & health WHO HQ

#washinhcf #PMAC2016

Benefits of WASH services at health care facilities (HCF)





What does WASH in HCF cover?

- Water quantity
- Water quality
- Handwashing facilities
- Excreta and wastewater disposal
- Health care waste disposal
- Cleaning
- Information and hygiene promotion



















Improved WASH ➤ Quality UHC

Shared goal

To ensure that increasing demand and use of services is met with quality service provision, WASH services and hygiene practices in health care facilities must improve.



38% do not have ANY water source

do not have improved sanitation



not have water and soap for handwashing

WASH in health care facilities

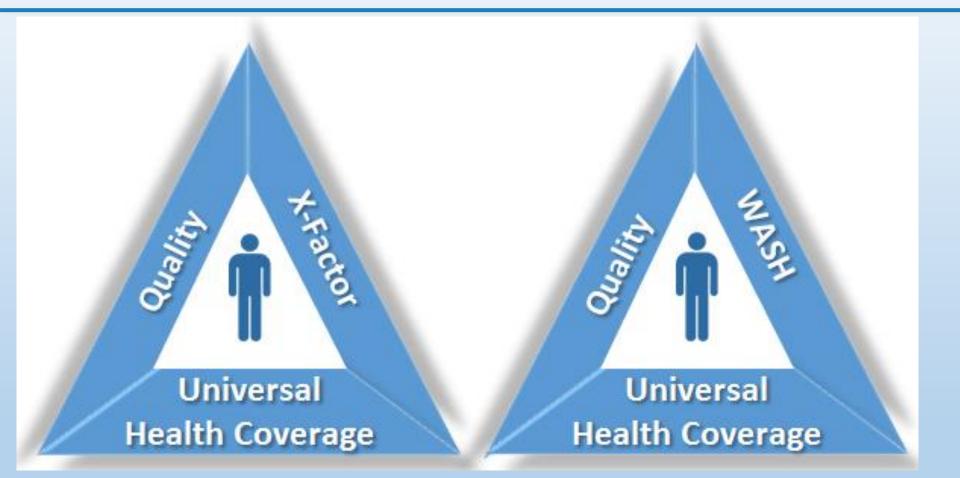
To ensure that every health care facility, in every setting, has safely managed, reliable water, sanitation and hygiene facilities and practices to meet staff and patient needs in order to provide quality, safe people-centred care.

> Safe health delivery

Quality care

Infection prevention control

WASH and quality UHC





Local Action - Liberia



- Development of joint Infection Prevention Control (IPC) and WASH indicators and monitoring tools
- Inclusion of WASH as key component of early recovery and health system strengthening efforts
- Coordinated WASH and IPC training
- Analyzing optimal health care waste destruction technologies



ganization

Local Action - Cambodia

				1 1	Hospital			Interviewer's Name	
				A2 1	Date		A6	Interviewee's name(s)	
WaterAid	Annex 2 – Assessment tool			A3 :	Start time		A7	Interviewee's position(:	5)
							A8	Hospital Director's Nam	2
Towards Safer and Better Quality Health Care Services in	S	afer Health Facilities in Cambodia	<u>+</u>						
Cambodia: A Situation Analysis of Water, Sanitation and Hygiene		Health Facility Assessment				DIRECTOR INTERVIE ospital director and/or dep		a partwor the following	auartians
in Health Care Facilities	SECTION 1: COVER PA	ACE.				oes not know the answers,			
	FACILITY IDENTIFICATIO	N				time permits.			
	002 NAME OF FACILITY			B1		me which of the following water are available at the		ater – municipality ater – private source	Purchased water bottles/sachets
	003 LOCATION OF FACI	עדע			hospital:			ed well (covered and ed from runoff)	 Surface water (lake, pond,
	004 REGION/PROVINCE	E			(Read all o	ptions aloud. Check all that	Unprote	ected well (not	river) Water from tanker trunks
	005 DISTRICT				apply]		protect not cov	ed from runoff and/or ered)	 Water brought from home Other:
FINAL REPORT	006 TYPE OF FACILITY	District/provincial hospital					Borehol	e	Don't know No response
		Maternal/child health clinic		B2					-
	007 MANAGING AUTHO	RITY Government/public		62	water, whi	nore than one source of ch is the primary source	D Piped w	ater – municipality ater – private source	 Purchased water bottles/sachets
Submitted on 15 June 2015		Private			used by th	e hospital?		ed well (covered and ed from runoff)	 Surface water (lake, pond, river)
	008 URBAN/RURAL	Other [specify] 96 Urban 1				asked if there is more than		ected well (not	 Water from tanker trunks Water brought from home
	009 OUTPATIENT ONLY	Rural 2 Yes 1			one source	e of water)	not cov		Other:
by	INTERVIEWER VISITS	No					Borehol	e	Don't know No response
	DATE			B 3	Is the prim	ary water supply for the	□ Yes		
Ir Por, MD, MPH, PhD	INTERVIEWER NAME				hospital fro	om an improved source?	Don't kr	104	
Health System Development Support Unit National Institute of Public Health	RESULT				If YES, skip	to 85.	□ No resp		
Email: ipor@niph.org.kh Cellphone: 012 657 725	RESULT CODES (LAST VIS 1 = FACILITY COMPLETED			B4		r source is not piped, where			meters
	2 = FACILITY RESPONDER 3 = POSTPONED				is the close	est source of water?	Don't kr		
	4 = FACIUTY REFUSED 5 = PARTIALLY COMPLET	ED		B5	Are there t	times when [the main water	□ Yes		
	6 = OTHER (specify)				source for	any use] is unavailable?	□ No □ Don't k		
Situation Analysis of WASH in					If NO, skip	to B7.	□ No resp		
Situation Analysis of WASH III	WaterAid	World Health		B6	If yes, why	?	D Power of		Pipe breakage
HCF		anidataja a			(Read all o	ptions aloud. Check all that	U Waterr	ationing/shortage ent malfunction	Other: Don't know
			35		apply]			ken pump)	No response
- Policies, planning standards,									
coverage targets	To develop and pilot assessments tool that								at 🗌
- Monitoring systems, routine	provide a comprehensive overview of the								
	provide a comprehensive overview of the								
data collection, data	WASH conditions within healthcare								
availability									
availability									
- Roles and responsibilities of		facilities							
key actors							N r	anniz	ation
					N.		U	ualliz	

Local Action - Cambodia

- Embed WASH in HCF indicators into National Health Plan
- Improve standards on WASH and IPC
- Undertake large scale assessment to comprehensively understand coverage and key challenges
- Improve and expand infection, prevention and control training of health care staff (clinical and non-clinical)
- Understand and develop links with UHC financing and quality improvement



Global Action

CO 1	WASH in health care facilities is prioritized as a necessary input to achieving all global and national health goals especially as those linked to Universal Health Coverage. Key decision makers and thought leaders champion WASH in health care facilities.
CO 2	All countries have national standards and policies on WASH in health care facilities and dedicated budgets to improving and maintaining services.
CO 3	Global and national monitoring efforts include harmonizing core and extended indicators to measure WASH in health care facilities.
CO 4	The existing evidence base is reviewed and strengthened to catalyze advocacy messages and improve implementation of WASH in health care facilities.
CO 5	Health care facility staff, management and patients advocate for and champion improved WASH services. Risk-based facility plans are implemented and support continuous WASH improvements, training and practices of health care staff.



Global Action





Joint Action – Making it Happen

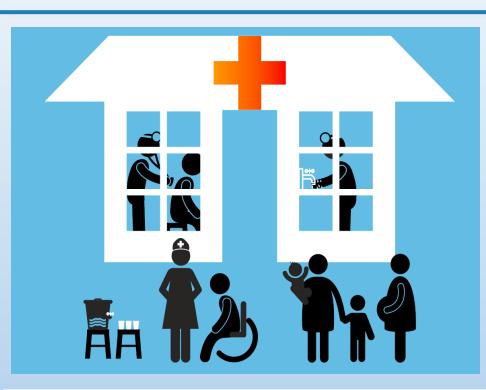


Global Café.....

What technical, financial and political inputs are required to improve and maintain infrastructure – for example WASH – to support improvements in quality of service delivery and access to care within the context of UHC?



Thank You and Join the Movement



Presentation References:

Thanks to: Maggie Montgomery, Fabrice Fotso (UNICEF), Shams Syed (WHO), Arabella Hayter (WHO)

For more information and to get involved contact:

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New Knowledge portal: www.washinhcf.org

- Bartram J, Cronk R, Montgomery M, Gordon B, Neira M, Kelley E, Velleman Y. 2015. Lack of toilets and safe water in health care facilities. Bulletin of the World Health Organization.
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