

WASH in HCF Community of Practice Event

Leveraging JMP Data for Action:

WHO/UNICEF Present Newest Data on WASH in HCF

Tuesday, February 7

8:00AM – 9:00 AM ET (NYC) and 20:00 – 21:00 ET (NYC)

The JMP's new report on WASH in HCF includes data from more than 900,000 facilities, providing insights into the WASH in HCF status and gaps across the globe. This session will present the newest data and discuss how we can leveraged them for advocacy, implementation, and monitoring purposes.

Simultaneous interpretation available in French and Spanish for 8AM ET session

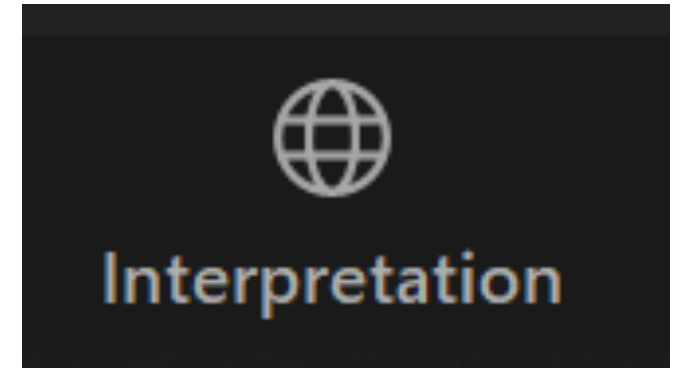
Connect. Share. Act.



WASH in **Health**care
Facilities Initiative

Interpretation

- **INTERPRETATION:** Select English, French, or Spanish. Then, click “Mute Original Audio.”
- **INTERPRÉTATION:** Sélectionnez Anglais, Français ou Espagnol. Puis, cliquez sur "Couper le son d'origine."
- **INTERPRETACIÓN:** Seleccione Inglés, Francés o Español. Luego, haga clic en “Silenciar audio original.”





WASH in Healthcare Facilities Initiative

This Community of Practice is an action-oriented learning platform that brings together the WASH and health communities to focus on policy, evidence, and practice in WASH in HCF.



CONNECT partners



SHARE experiences



Encourage groups to **ACT**

WASH in HCF Community of Practice Basic Principles

1. WASH is a **fundamental prerequisite for quality care** within a healthcare facility and **there cannot be effective infection prevention and control** without adequate WASH.
2. WASH in healthcare facilities is a **solvable issue** and will require multiple systems, sectors, and stakeholders to work together to see sustainable improvements.
3. The Community of Practice is **open to all who seek to learn and share** about WASH in healthcare facilities. We welcome all and **respect the diversity** of perspectives who participate.



New Resource Alert



New Global Report on Healthcare Facility Electrification finds more than 1 billion people served by facilities without reliable electricity

- This report presents the latest data on electrification of HCF in LMICs
- It also projects investments required to achieve adequate and reliable electrification in healthcare and identifies priority actions.

WASH in HCF actors can partner with those addressing healthcare facility energy needs - helping one another ensure the basics are in place for safe care for all.

Success Corner

UNICEF Vanuatu: Integrating Disaster Risk Reduction and climate change adaptation in WASH in Healthcare assessment and planning

- A national WASH in HCF assessment tool, **WASH in Heltkea** (WinHK) was developed by adapting the Vanuatu Department of Water Resources Drinking Water Safety and Security Plan template and WASH FIT template.
- When facilitated at the facility level, it **triggers disaster risk reduction actions** whilst setting infrastructure provision standards that are **climate resilient** for system upgrades.
- The WinHK tool was contextualized and tested in 4 provinces and will be used to develop climate-sensitive improvement plans to support upgrade of resilient WASH services in healthcare facilities



Progress on WASH in health care facilities 2000-2021: Special focus on infection prevention and control

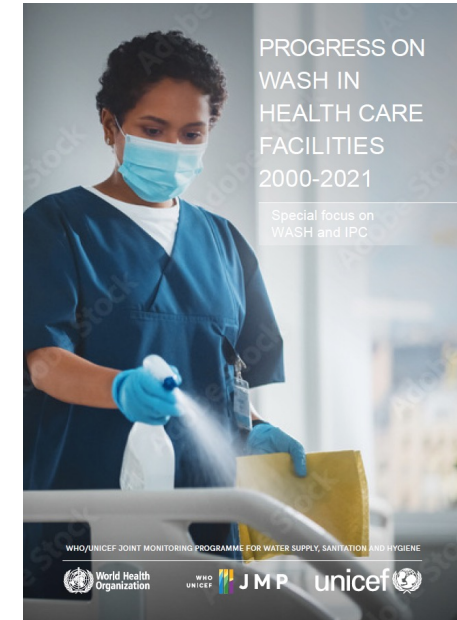
2019



2020



2022



7 February 2023

Rick Johnston (johnstonr@who.int) Tom Slaymaker (tslaymaker@unicef.org)

washdata.org

JMP 2022 progress report

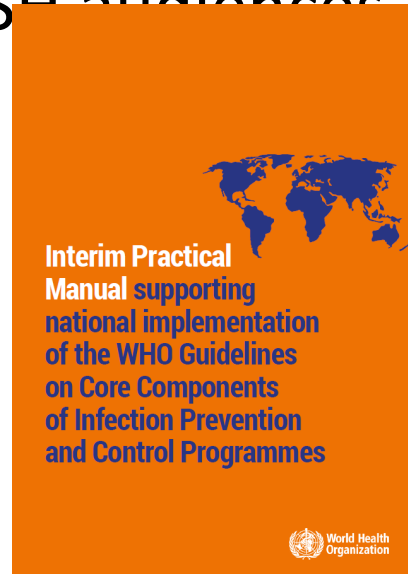
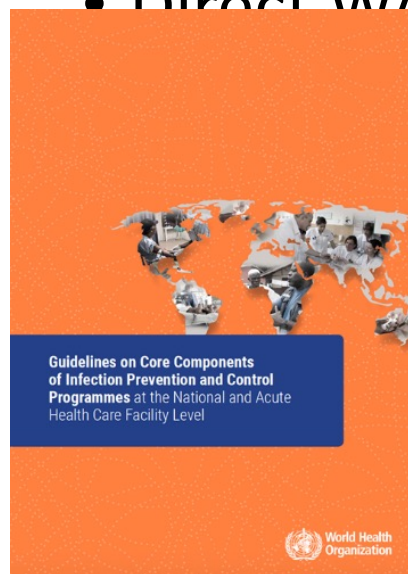


- Updates and supersedes data in 2020 “Fundamentals First” report
- Full JMP report
 - 2020 report: one chapter from JMP, 20 figures
 - 2022 report: ~80 figures
- Draws on data from 500+ national sources
 - Facility surveys, MIS, Published reports
 - Representing at least 933,000 health care facilities (up from 560,000 in the 2019 baseline)

SERVICE LEVEL	WATER	SANITATION	HYGIENE	WASTE MANAGEMENT	ENVIRONMENTAL CLEANING
BASIC SERVICE	Water is available from an improved source on the premises.	Improved sanitation facilities are usable, with at least one toilet dedicated for staff, at least one sex-separated toilet with menstrual hygiene facilities, and at least one toilet accessible for people with limited mobility.	Functional hand hygiene facilities (with water and soap and/or alcohol-based hand rub) are available at points of care, and within five metres of toilets.	Waste is safely segregated into at least three bins, and sharps and infectious waste are treated and disposed of safely.	Protocols for cleaning are available, and staff with cleaning responsibilities have all received training.
LIMITED SERVICE	An improved water source is available within 500 metres of the premises, but not all requirements for a basic service are met.	At least one improved sanitation facility is available, but not all requirements for a basic service are met.	Functional hand hygiene facilities are available either at points of care or toilets but not both.	There is limited separation and/or treatment and disposal of sharps and infectious waste, but not all requirements for a basic service are met.	There are cleaning protocols and/or at least some staff have received training on cleaning.
NO SERVICE	Water is taken from unprotected dug wells or springs, or surface water sources; or an improved source that is more than 500 metres from the premises; or there is no water source.	Toilet facilities are unimproved (e.g. pit latrines without a slab or platform, hanging latrines, bucket latrines) or there are no toilets.	No functional hand hygiene facilities are available either at points of care or toilets.	There are no separate bins for sharps or infectious waste, and sharps and/or infectious waste are not treated/disposed of.	No cleaning protocols are available, and no staff have received training on cleaning.

Special focus on WASH and infection prevention and control (IPC)

- Explore linkages between WASH and IPC, why WASH is important for IPC
- Direct WASH audiences towards IPC resources



The first WHO global survey on infection prevention and control in health-care facilities

Sara Tomczyk*, Anthony Twyman*, Marlieke E.A. de Kraker, Ana Paula Coutinho Rehse, Ermira Tartari, João Paulo Toledo, Alessandro Cassini, Didier Pittet, Benedetta Allegranzi

Summary

Background WHO core components for infection prevention and control (IPC) are important building blocks for effective IPC programmes. To our knowledge, we did the first WHO global survey to assess implementation of these programmes in health-care facilities.



Lancet Infect Dis 2022; 22: 845-56
Published Online
February 21, 2022

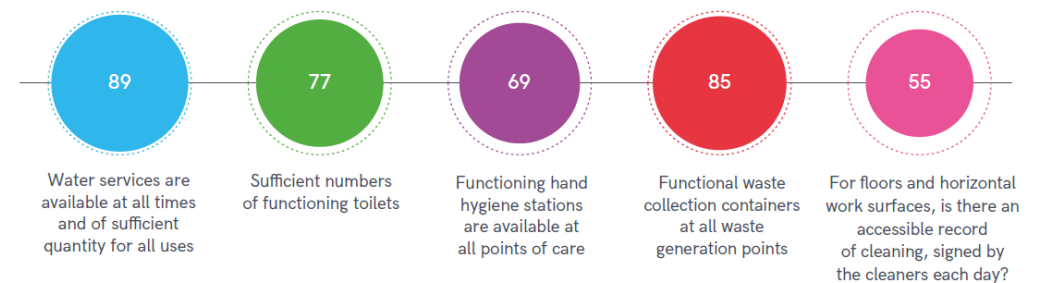


FIGURE 13 WASH elements from IPCAF survey 2019, weighted medians (%)

WATER

SANITATION

HYGIENE

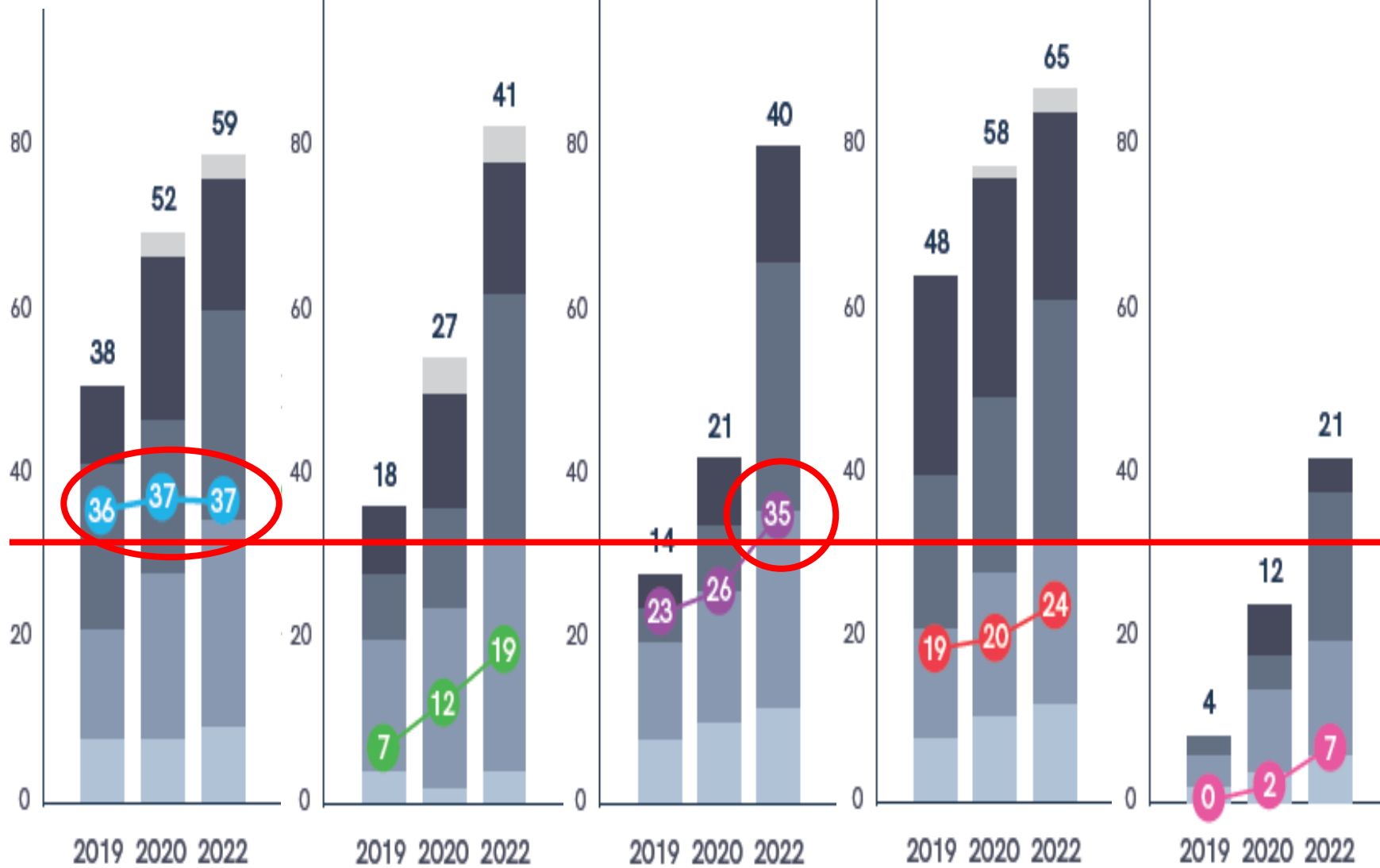
WASTE MANAGEMENT

ENVIRONMENTAL CLEANING

Numbers of countries

- Unclassified
- Low income
- Lower middle income
- Upper middle income
- High income

Proportion of population



30%

BASIC HYGIENE SERVICE

Functional hand hygiene facilities (with water and soap and/or alcohol-based hand rub) are available at points of care, and within five metres of toilets

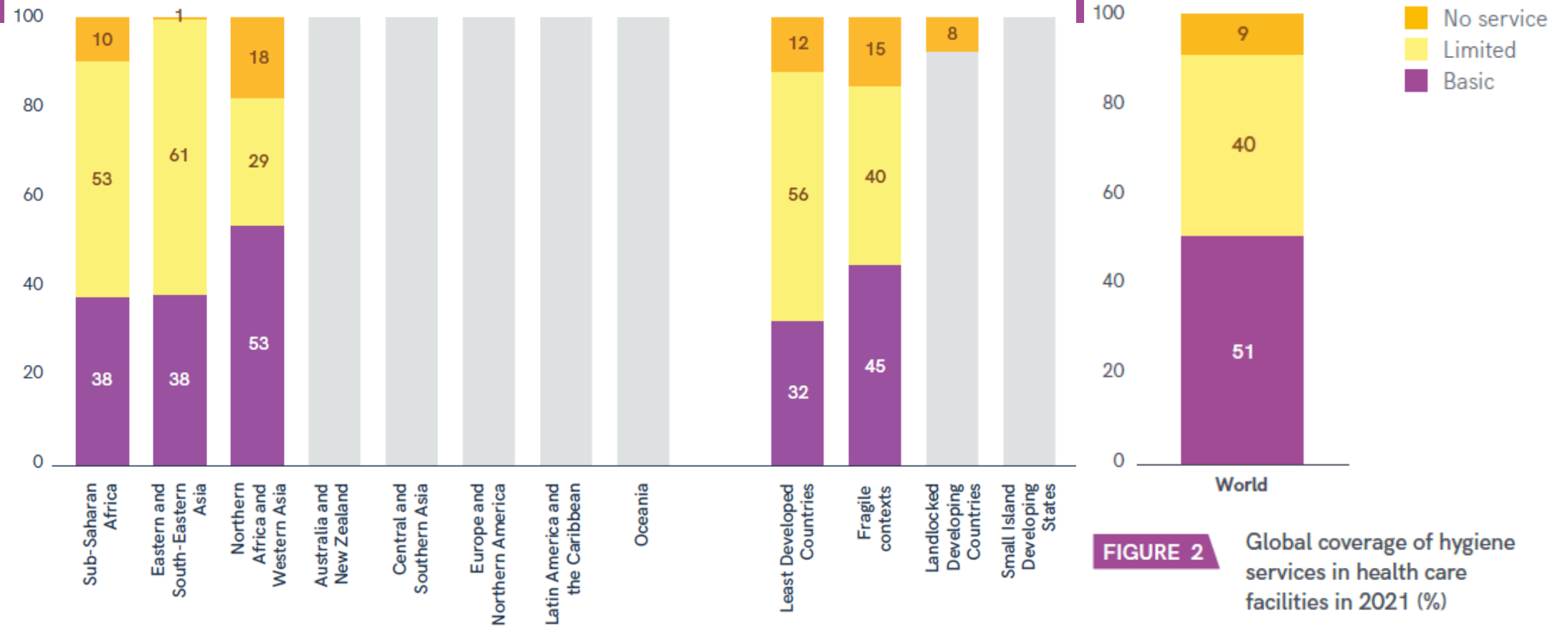


FIGURE 2 Global coverage of hygiene services in health care facilities in 2021 (%)

Rank Chart

Geography: Region Type

Rank countries: World

Measure: Coverage Population

Water Sanitation Hygiene

Waste management Cleaning

Residence / facility type: Total Rural Urban

Government Non-government

Hospital Non-hospital

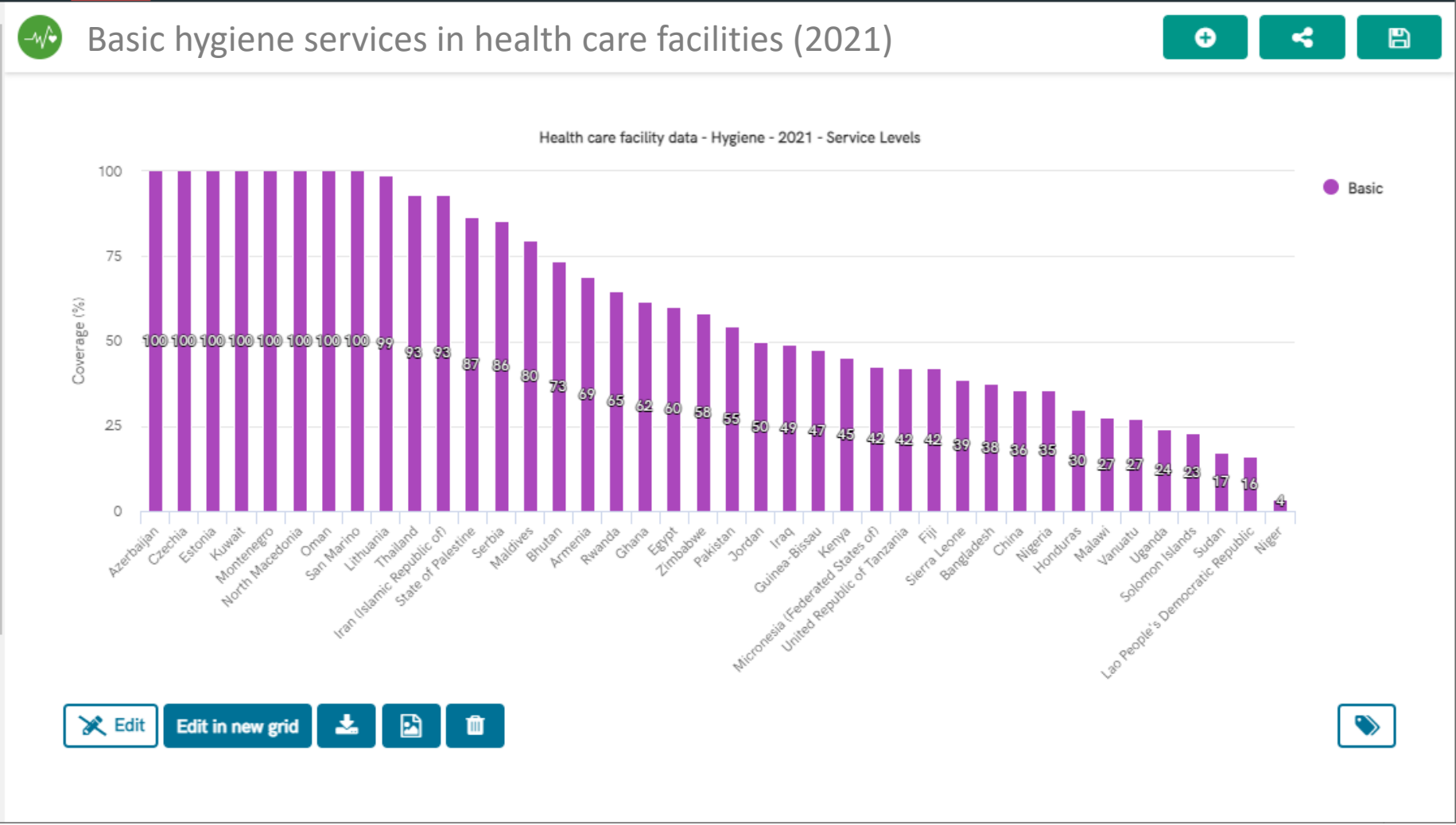
Ladder Type: Analyse by service level Analyse by health care facility service elements

None Points of care

Limited Soap and water at points of care

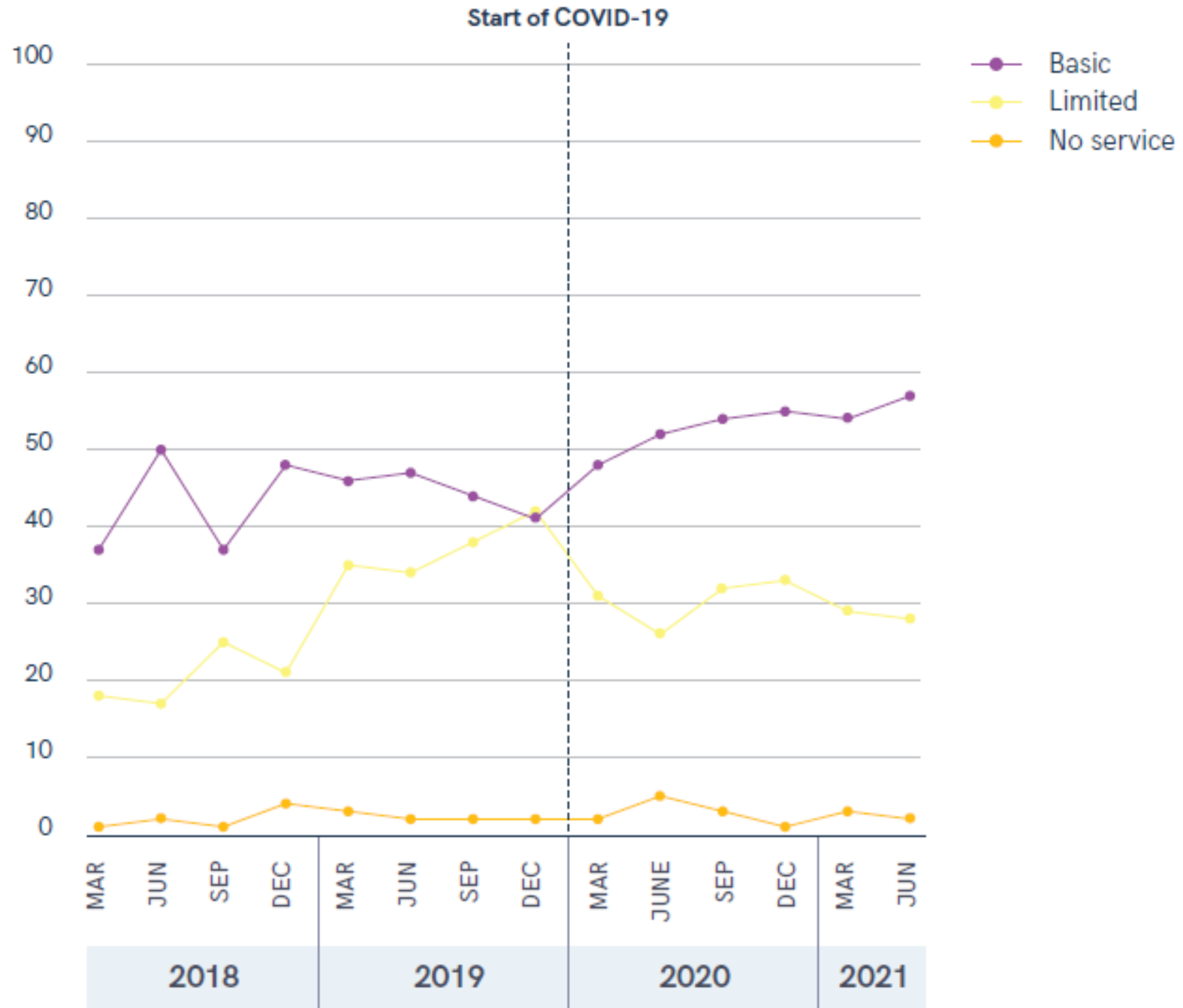
Basic Alcohol at points of care

Insufficient data Soap and water at toilets



Ghana DHIMS

- Routine MIS
- COVID -> hygiene improvement interventions
- Increase in basic
- Decrease in limited



BASIC WATER SERVICE

Water is available from an improved source on the premises

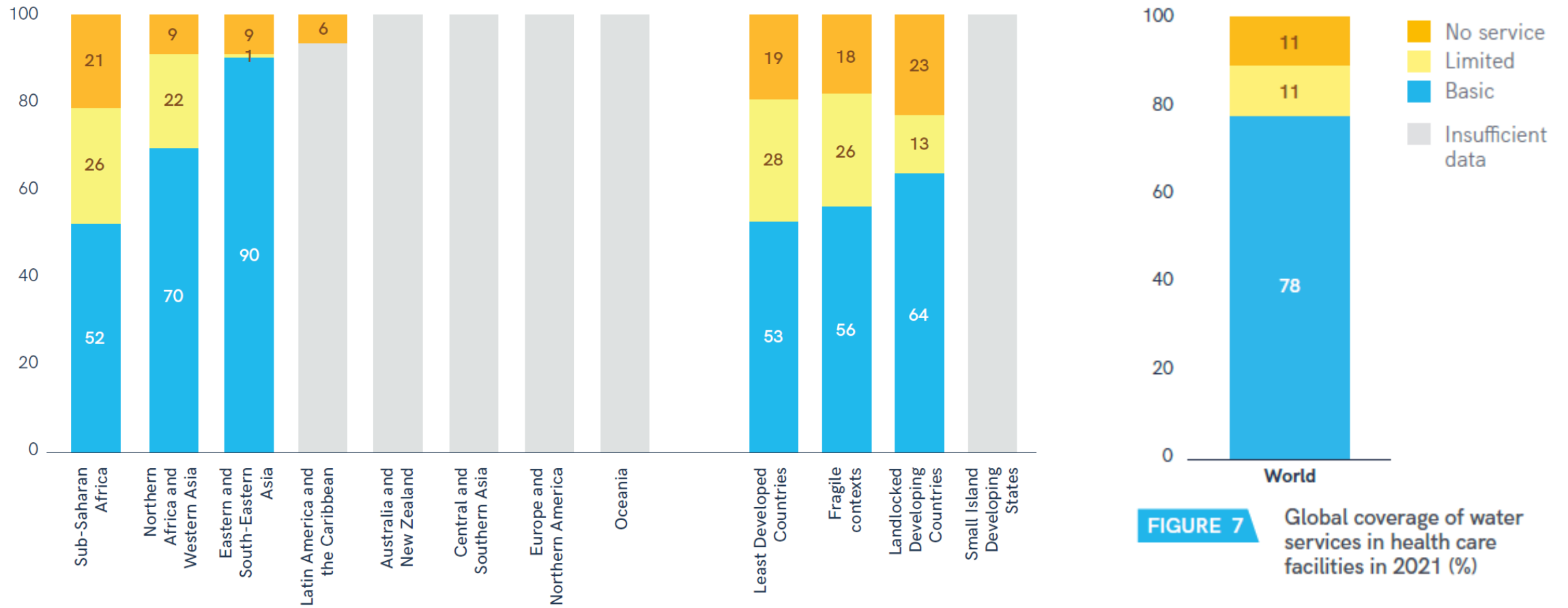
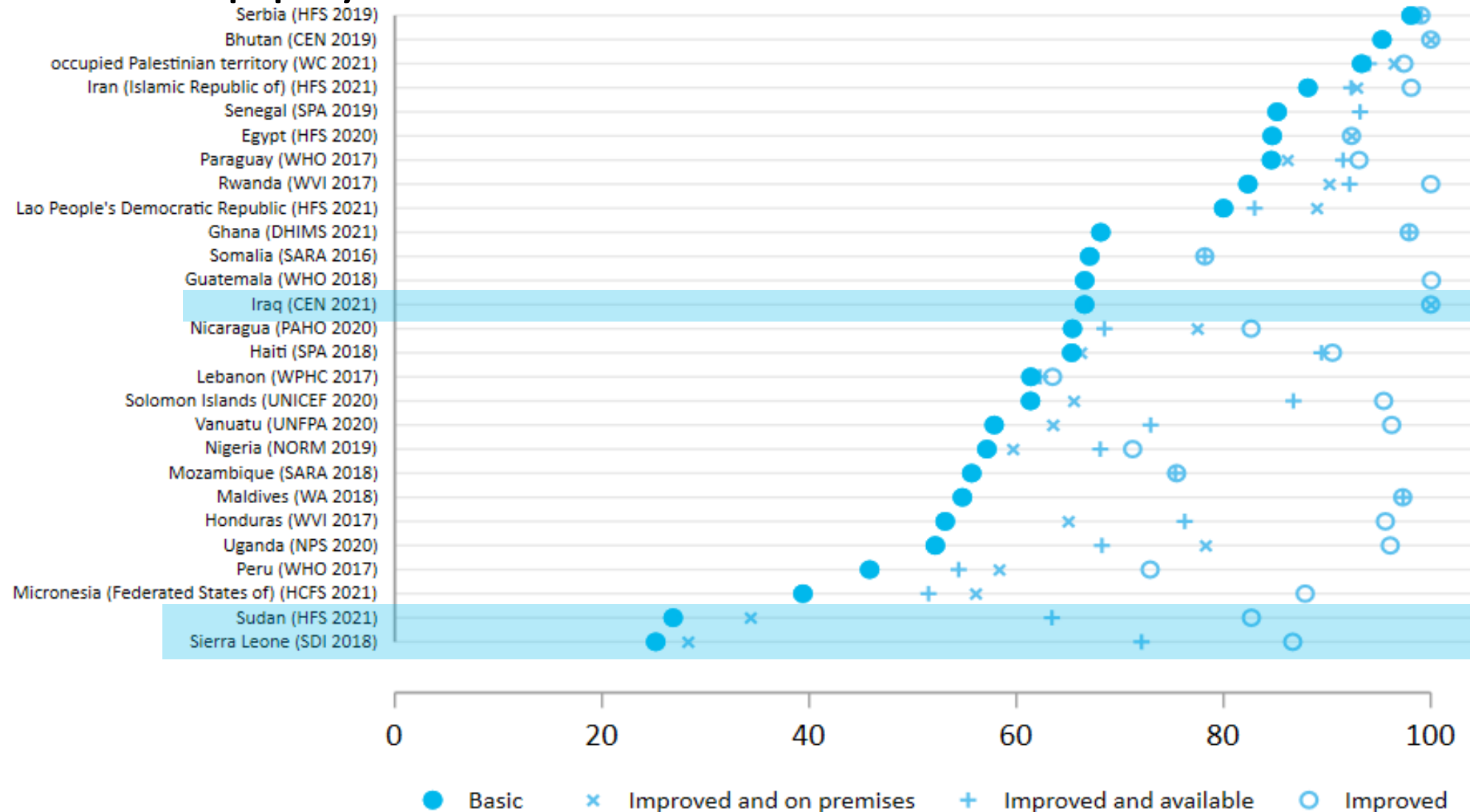


FIGURE 7 Global coverage of water services in health care facilities in 2021 (%)

Many health care facilities have an improved water supply but lack a basic water service



Rank Chart

Geography: Rank ... | Region Type: SDG regions | Region: Sub-Saharan Africa

Measure: Coverage | Population

Water | Sanitation | Hygiene

Waste management | Cleaning

Residence / facility type: Total | Rural | Urban

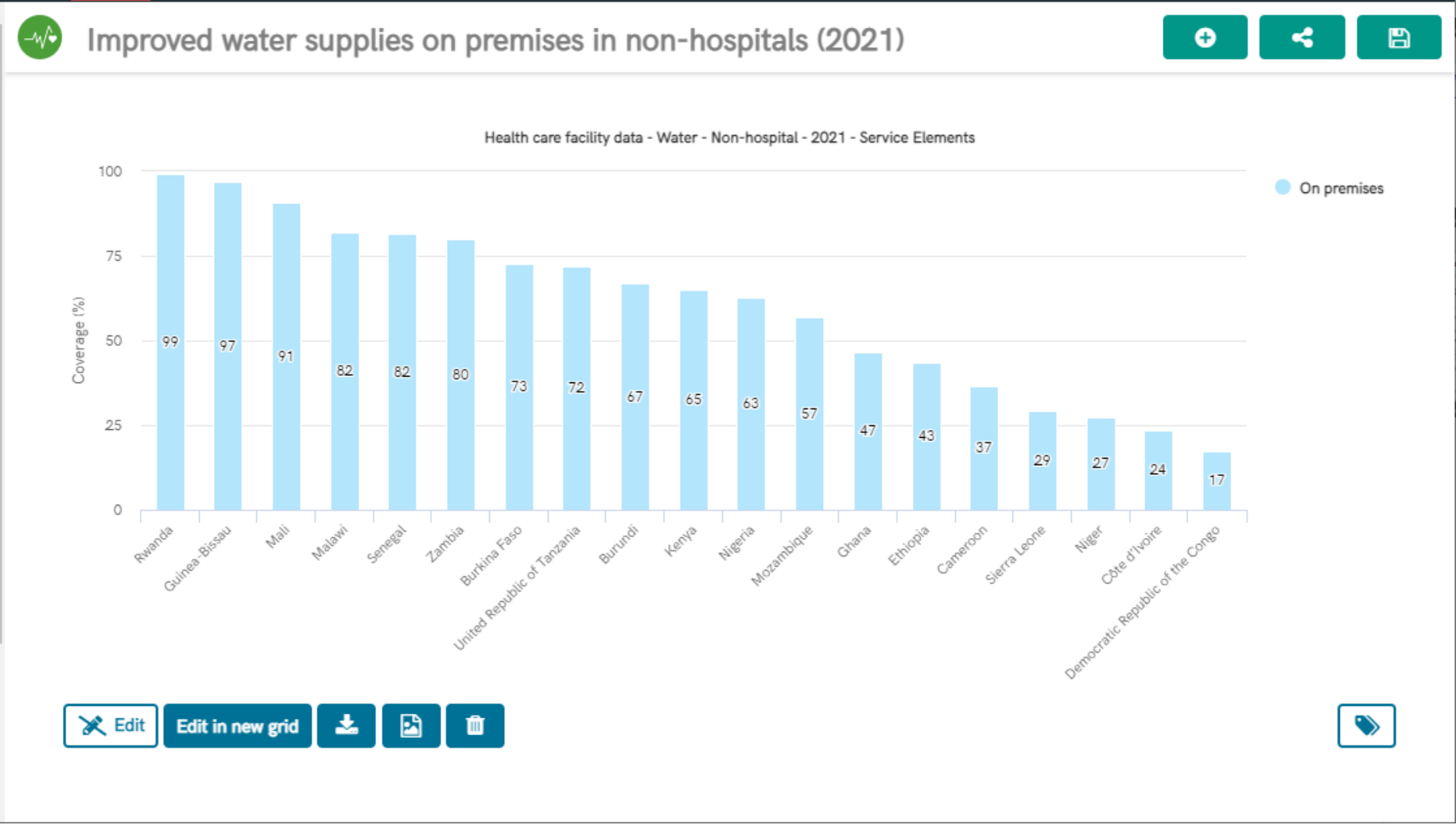
Government | Non-government

Hospital | Non-hospital

Ladder Type: None | Limited | Basic | Insufficient data

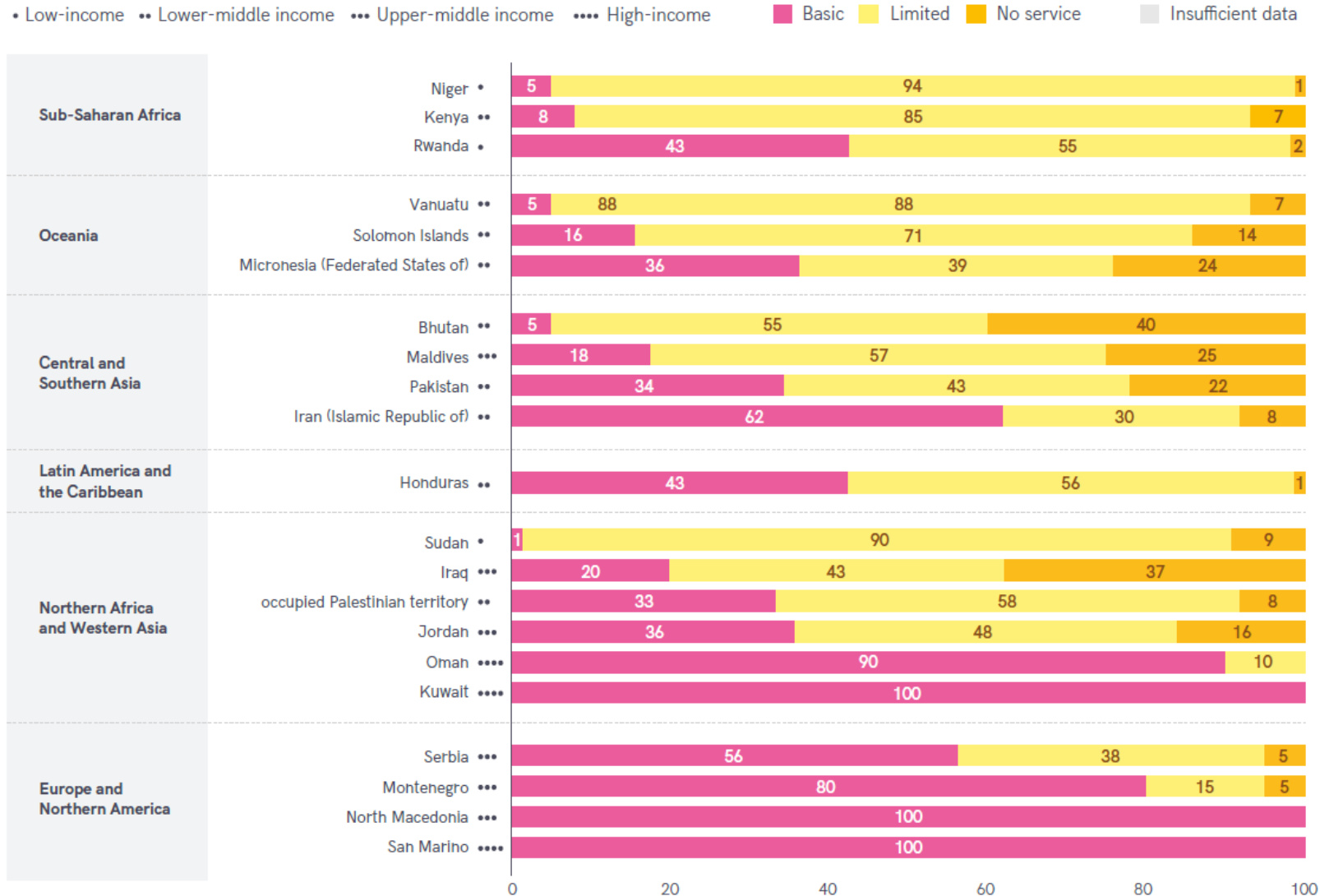
Analyse by service level | Analyse by facility type | Analyse by health care facility service elements

Improved | On premises | Available



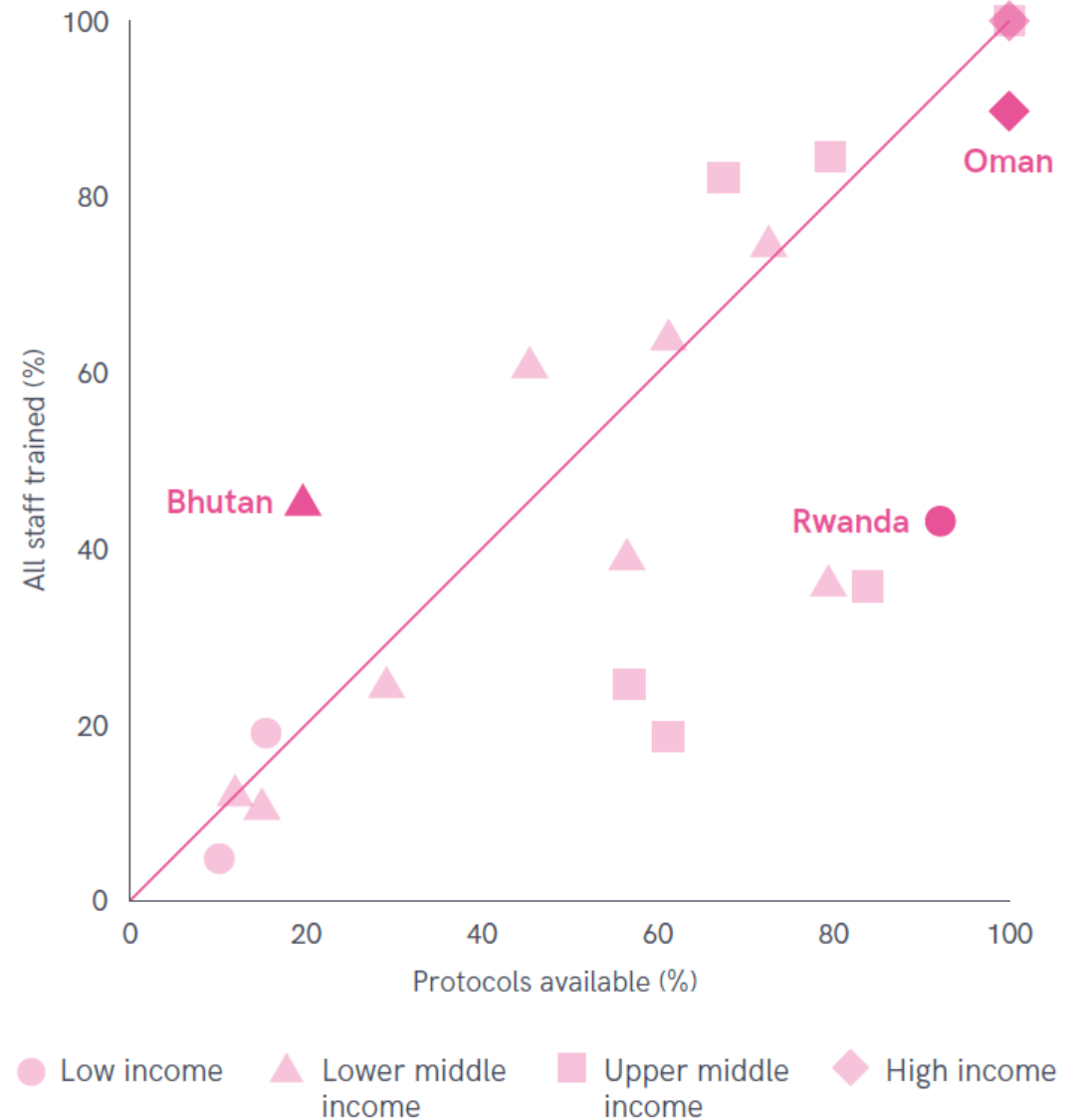
BASIC ENVIRONMENTAL CLEANING SERVICE

Basic protocols for cleaning are available, and staff with cleaning responsibilities have all received training



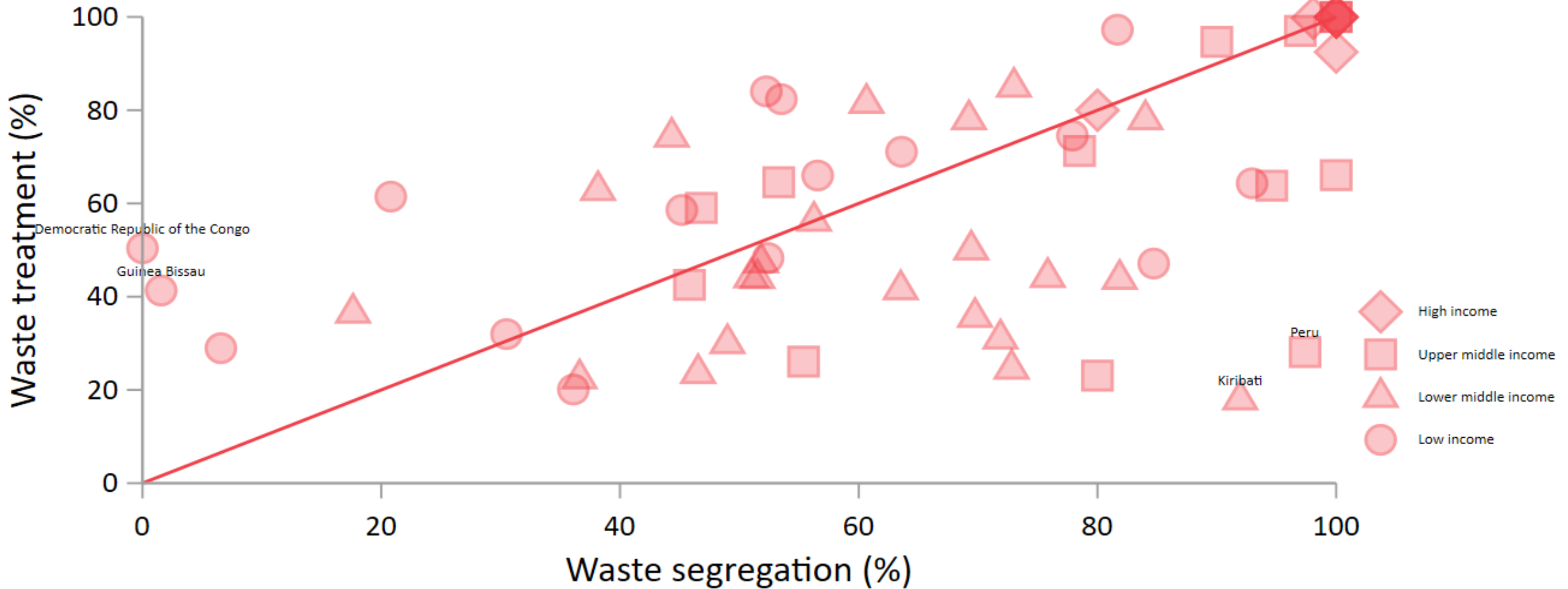
Limiting factor

- Sometimes availability of protocols (e.g. Bhutan)
- More often, incomplete training of staff responsible for cleaning (e.g. Rwanda)



BASIC WASTE MANAGEMENT SERVICE

Waste is safely segregated into at least three bins, and sharps and infectious waste are treated and disposed of safely



Rank Chart

Geography Region Type Region

Rank ... Least Developed Co... Least Developed Co...

Measure

Coverage Population

Water Sanitation Hygiene

Waste management Cleaning

Residence / facility type

Total Rural Urban

Government Non-government

Hospital Non-hospital

Ladder Type

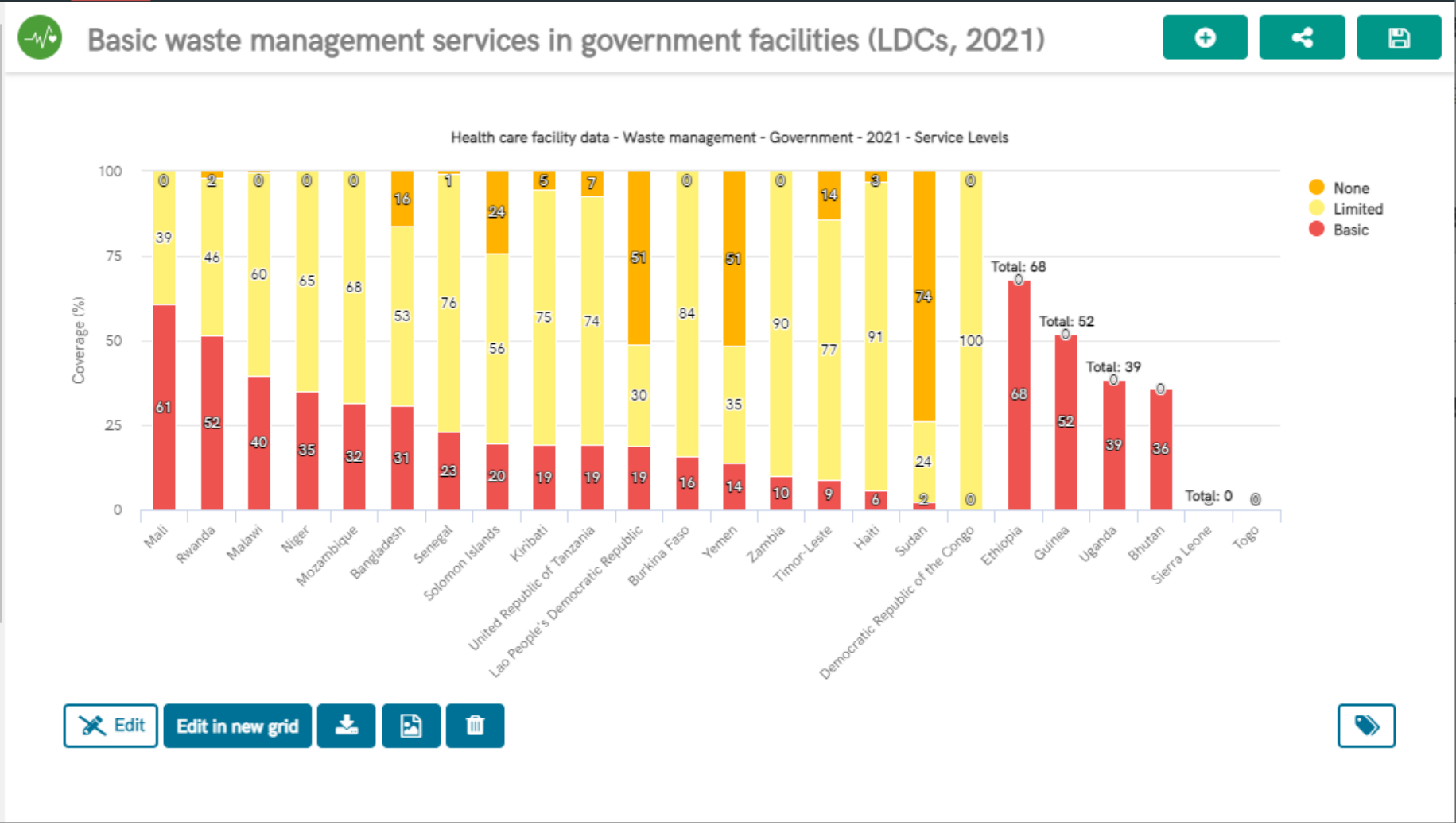
Analyse by service level Analyse by health care facility service elements

None Segregation

Limited Treatment and disposal

Basic Treatment and disposal (infectious waste)

Insufficient data Treatment and disposal (sharps)



Rank Chart

Geography: Region Type: Region

Rank ... ▾ Least Developed Co... ▾ Least Developed Co... ▾

Measure

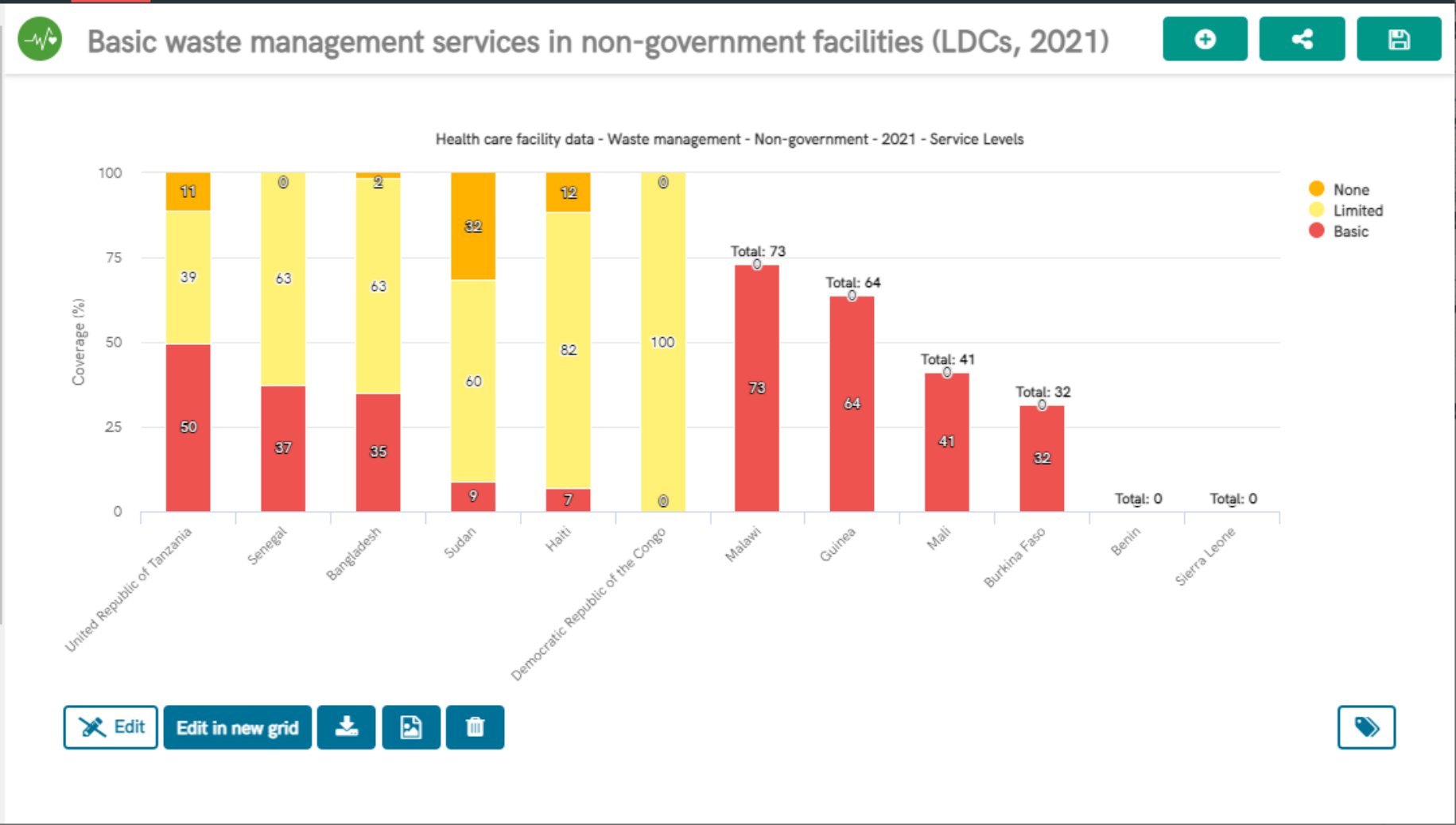
- Coverage Population
- Water Sanitation Hygiene
- Waste management Cleaning

Residence / facility type

- Total Rural Urban
- Government Non-government
- Hospital Non-hospital

Ladder Type

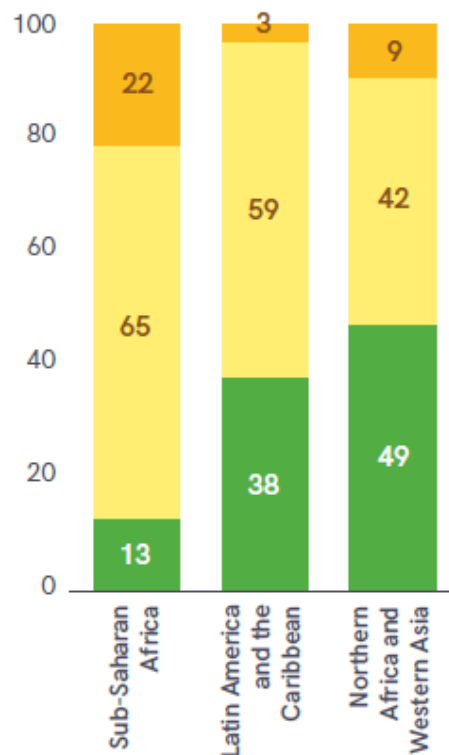
- Analyse by service level
- Analyse by health care facility service elements
- None Segregation
- Limited Treatment and disposal
- Basic Treatment and disposal (infectious waste)
- Insufficient data Treatment and disposal (sharps)



BASIC SANITATION SERVICE

Improved sanitation facilities are usable, with at least one toilet dedicated for staff, at least one sex-separated toilet with menstrual hygiene facilities, and at least one toilet accessible for people with limited mobility

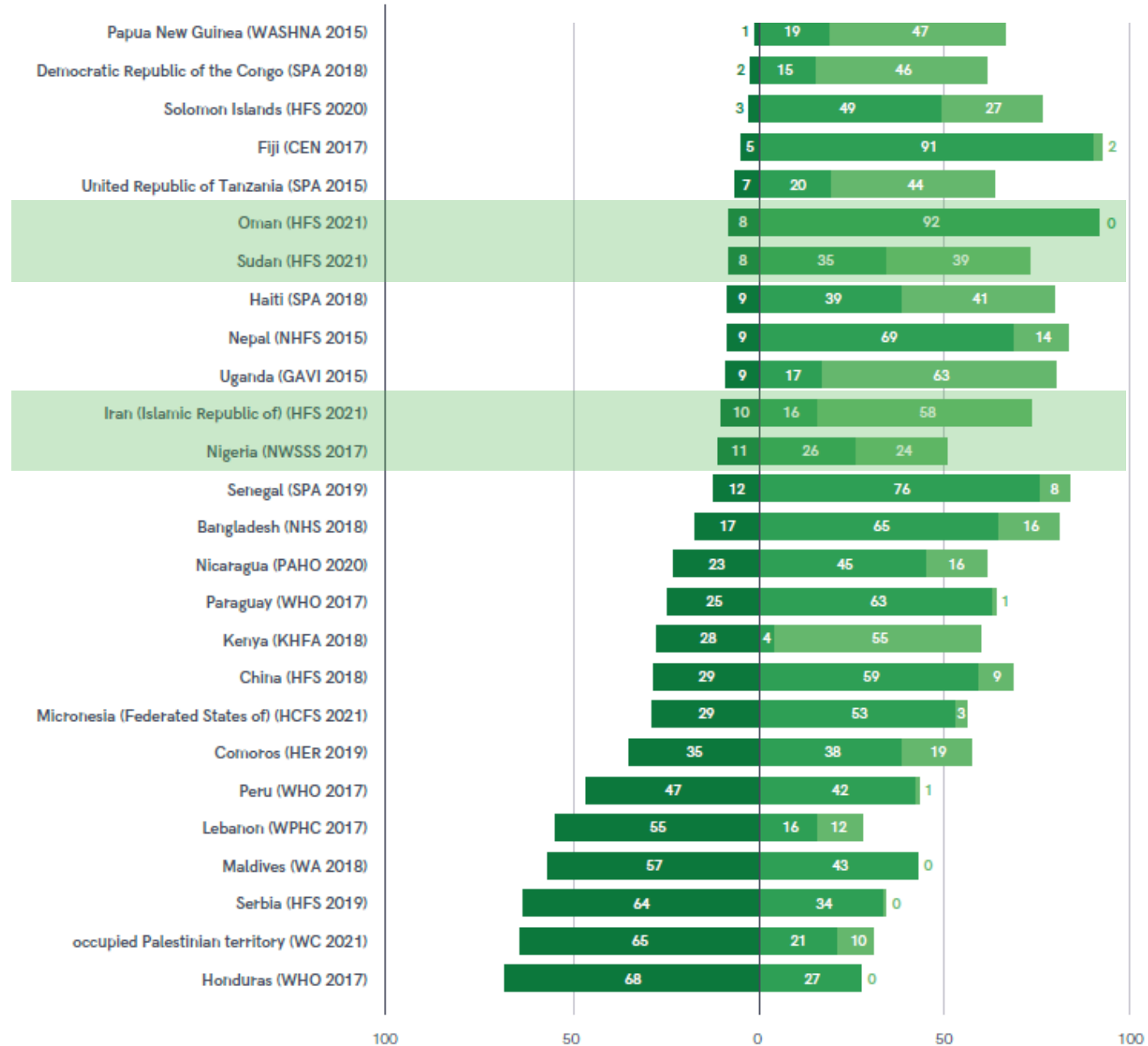
- 41 countries (up from 27)
- 3 SDG regions

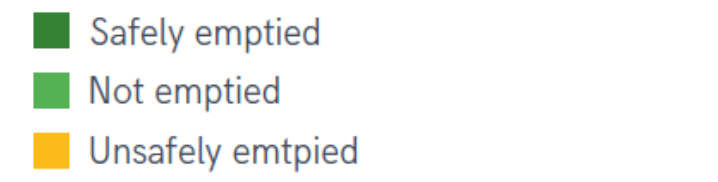
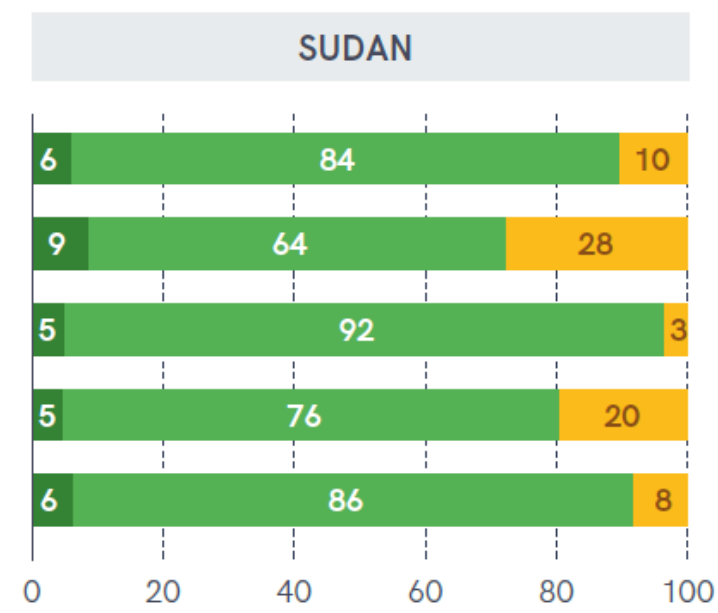
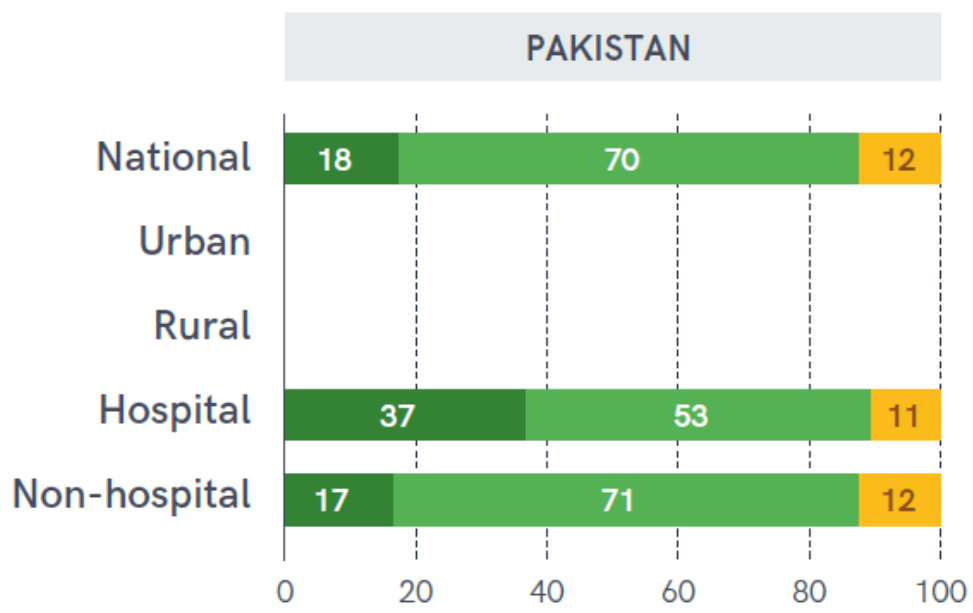
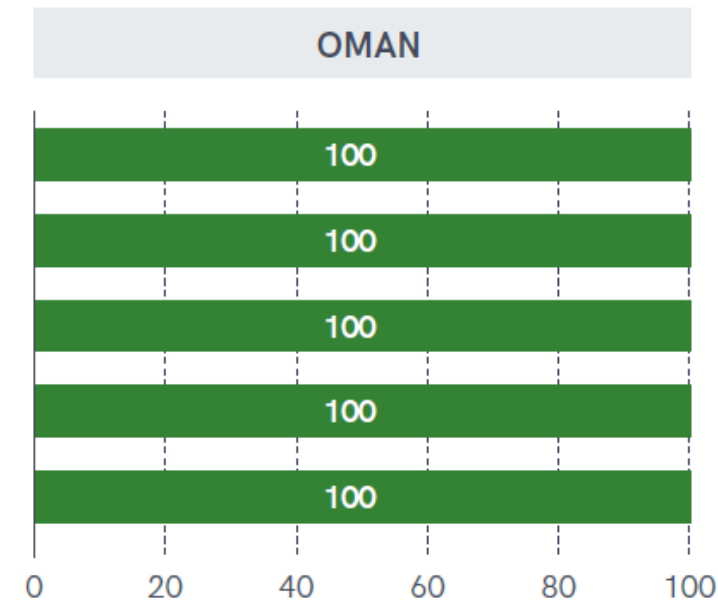
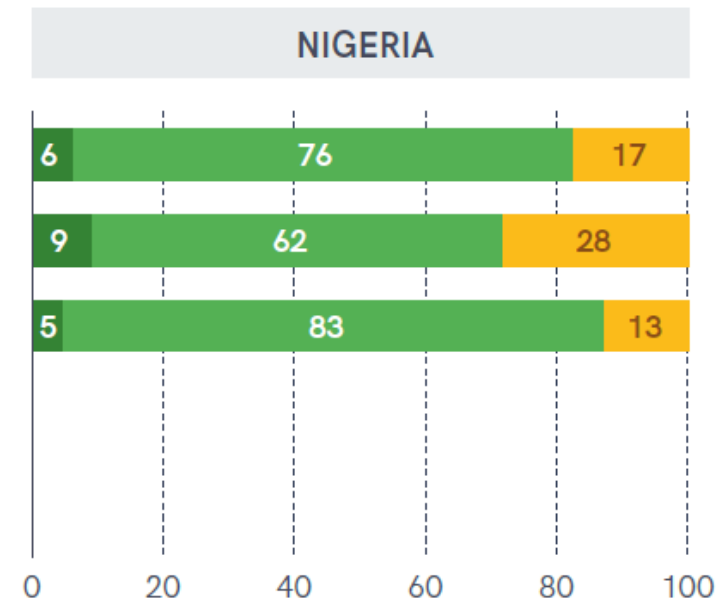
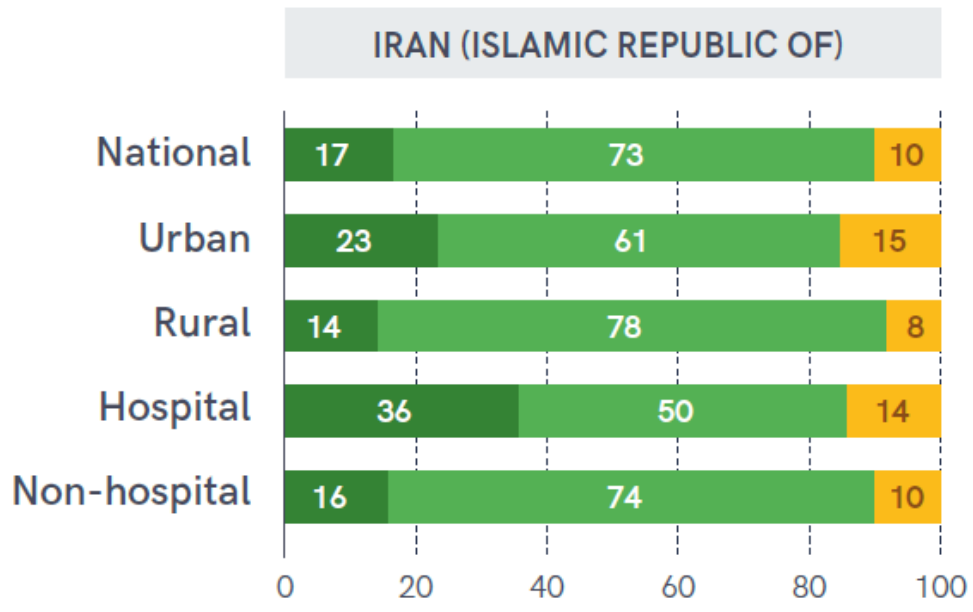


Country	Any sanitation facility	Improved sanitation facility	Improved and usable sanitation facility	Improved and dedicated for staff	Improved and sex-separated	Improved and providing menstrual hygiene facilities	Improved and accessible to those with limited mobility	Basic sanitation services
Kuwait	100	100	100	100	100	100	100	100
North Macedonia	100	100	100	100	100			100
Tokelau	100	100	100	100		100		100
Oman	100	100	100	95	100	100	100	95
Montenegro	100	100	100	100	100	100	85	85
Thailand			96	92		81	97	81
Egypt	94	94	94	74	68			68
Cook Islands		80	80	60		80		60
Burundi			73	72	48			48
Azerbaijan	100	100	98	48	100	100		48
Brazil	100	100	84	82			45	45
Mozambique	99		72	43	62			43
Jordan		86	68	77	71	63	41	41
Armenia		81	62	87	42	42	41	41
Bangladesh	97	94	36	98	93	31	38	31
Paraguay	100	88	63	31	26			26
Iran (Islamic Republic of)	98	84	79	62	29	26	22	22
Micronesia (Federated States of)	89	85	77	21	26	18	29	18
Zimbabwe	100	99	64	89	97	32	17	17
Guinea Bissau		100	48	68	32	17	24	17
Bhutan	100	99	84	73	31	16	31	16
Lebanon	96	83	83	70	59	31	16	16
Pakistan		86	78	67	30	22	16	16
Maldives	100	100	99	80	15	30	44	15
Sierra Leone	100	96	96		43		15	15
Nigeria	81	81	65	69	35	22	14	14
Fiji	99	88	62	9	37	17	33	9
Vanuatu		76	68	43	13	9	11	9
Peru	97	90	83	86	66		7	7
Sudan	91	81	71	47	38	7	8	7
Serbia	99	98	78	87	48	27	6	6
Rwanda	100	99	91	16	31	6	6	6
United Republic of Tanzania	73	73	73		55		6	6
Solomon Islands	81	79	5	14	24	20	46	5
Honduras	100	96	80	59	46	4	18	4
occupied Palestinian territory	100	97	83	44	38		4	4
Lao People's Democratic Republic	100		93	5	14		4	4
Kenya	99	86	86		62	15	4	4
Malawi		91	77	20	40	3	44	3
Comoros	97	92	38	43	9	2	7	2
Niger		74	29	30	31	0	27	0

FIGURE 63 Proportion of health care facilities meeting the criteria for a basic sanitation service, among countries with national estimates in 2021 (%)

Sewer ■ Septic tanks ■ Improved latrines





Multiple ladders

- Four ladders: LDCs, fragile contexts, sub-Saharan Africa
- Five ladders: available for 16 countries

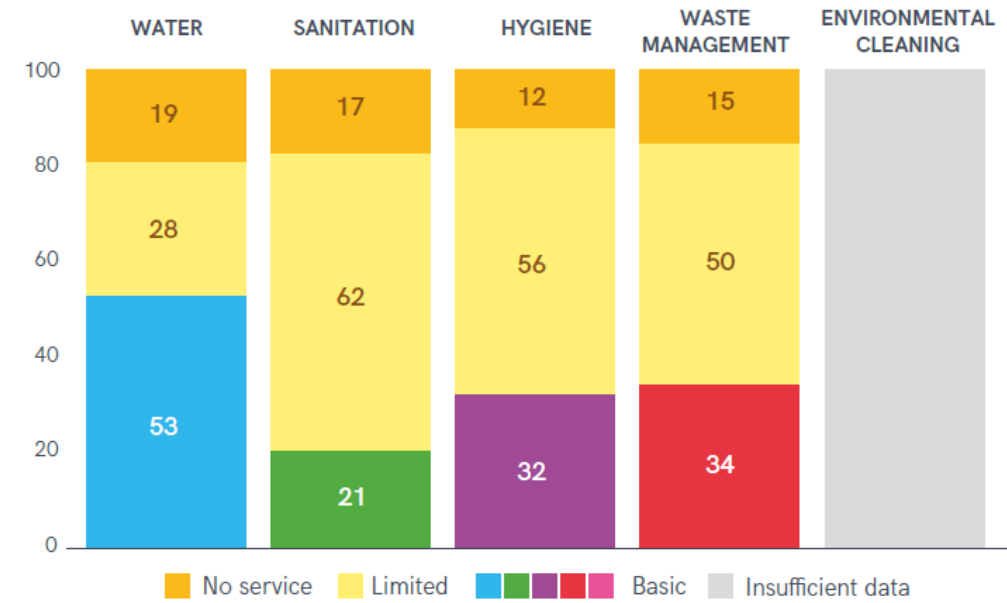


FIGURE 73 WASH service ladders in LDCs, 2021 (%)

Thank you!
info@washdata.org

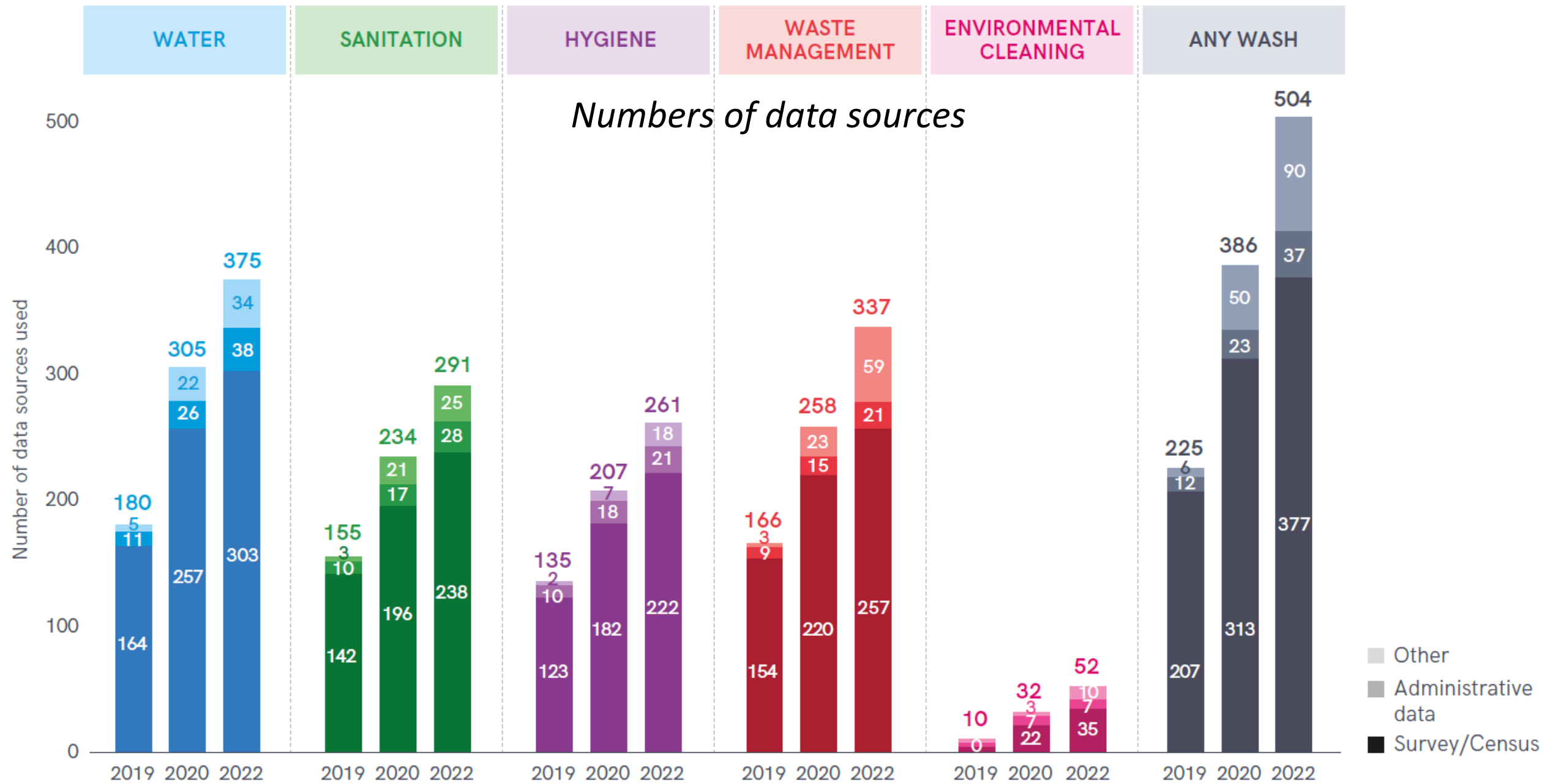




Core questions and indicators for monitoring WASH in health care facilities in the Sustainable Development Goals



1. Main water source (select one): Piped Tube well/Borehole Protected dug well Unprotected dug well Protected spring Unprotected spring Rain water Tanker truck Surface water (River/Lake/Canal) No water source Other: _____
2. Main water source is on premises: Yes Off premises but up to 500 m More than 500 m
3. Water from main source is currently available: Yes No
4. Number of usable (available, functional, private) toilets for health care facility: _____ (insert number)
5. Type of toilets/latrines (select one – most common): Flush/Pour-flush to sewer Flush/Pour-flush to tank or pit Flush/Pour-flush to open drain Pit latrine with slab/covered Pit latrine without slab/open Bucket Hanging toilet/latrine None
6. Toilets separated for staff and patients: Yes No
7. Toilets separated for male and female patients: Yes No
8. Female toilets have facilities to manage menstrual hygiene needs (covered bin, and/or water and soap): Yes No
9. At least one toilet accessible to people with limited mobility: Yes No
10. Soap and water (or alcohol-based hand rub) currently available in consultation rooms: Yes Partially (e.g. lacking materials) No
11. Soap and water currently available at toilets: Yes, within 5 m of toilets Yes, more than 5 m from toilets No, no soap and/or no water
12. Sharps, infectious and general waste are safely separated into three bins in consultation room: Yes Somewhat (bins are full, include other waste, or only 1 or 2 available) No
13. Treatment/disposal of sharps waste: Autoclave Incinerator (2 chamber, 850-1000 °C) Incinerator (other) Burning in protected pit Not treated, but buried in lined, protected pit Not treated, but collected for medical waste disposal Open dumping without treatment Open burning Not treated and added to general waste Other: _____ (specify)
14. Treatment/disposal of infectious waste: Autoclave Incinerator (2 chamber, 850-1000 °C) Incinerator (other) Burning in protected pit Not treated, but buried in lined, protected pit Not treated, but collected for medical waste disposal Open dumping without treatment Open burning Not treated and added to general waste Other: _____ (specify)
15. Protocols for cleaning (floor, sink, spillage of blood or bodily fluid) and cleaning schedule are available: Yes No
16. All staff responsible for cleaning have received training: Yes Not all trained None trained

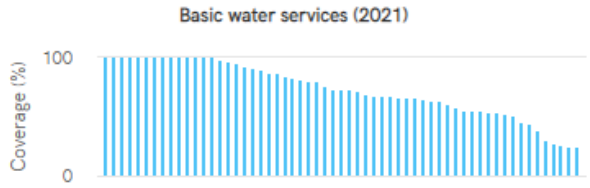


World

World

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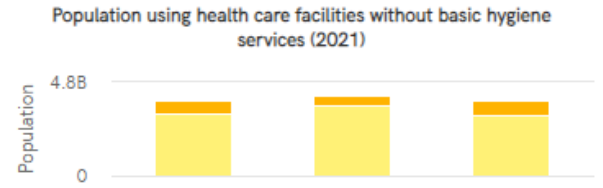
[Summary](#) | [Water](#) | [Sanitation](#) | [Hygiene](#) | [Waste management](#) | [Cleaning](#)



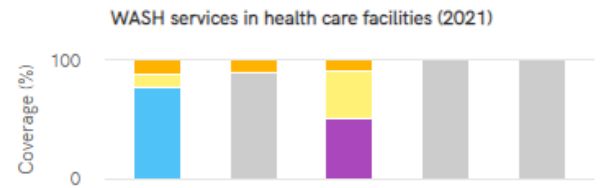
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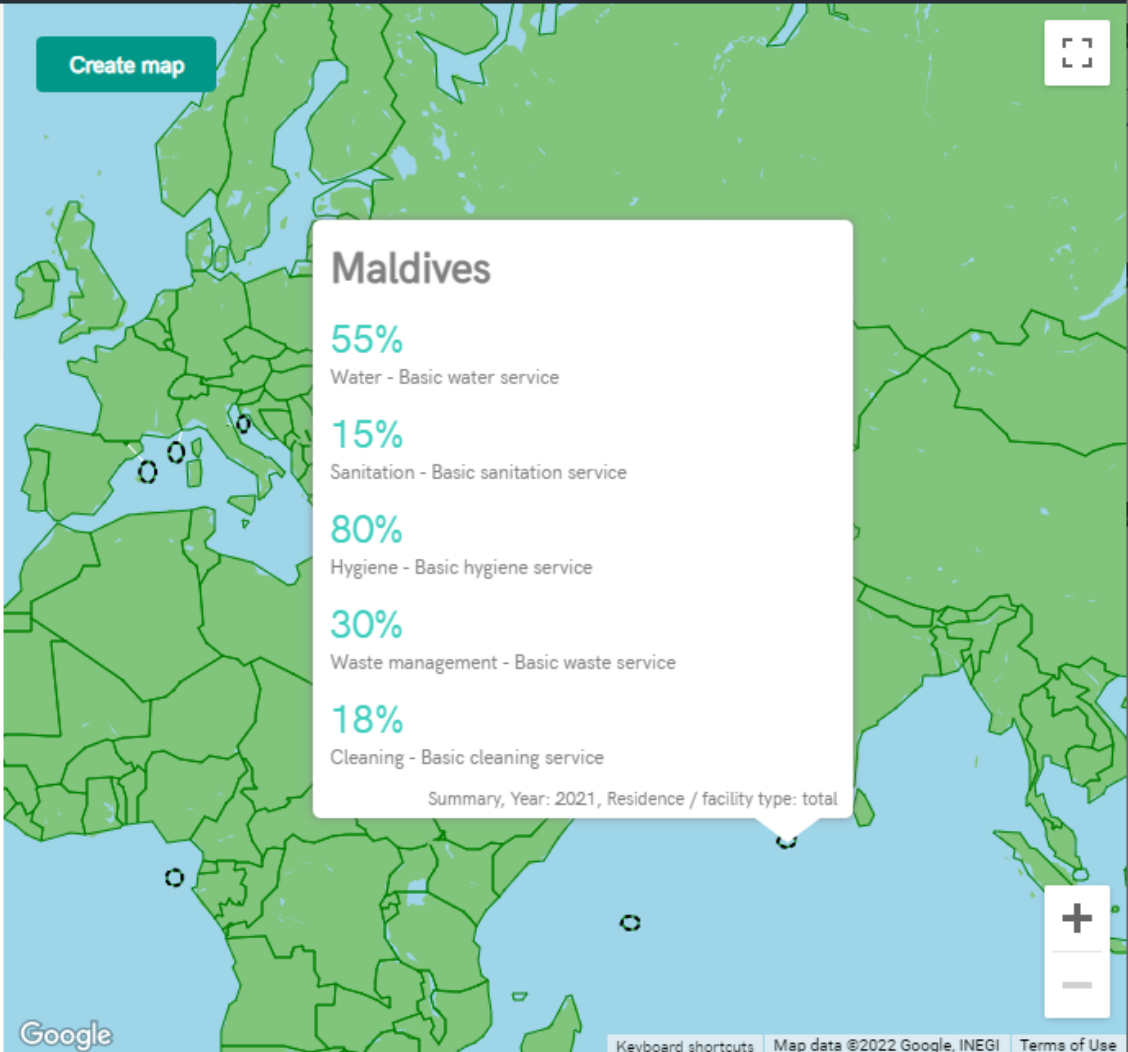
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Edit



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 Household	 School	 Health Care Facilities
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World	World file	World file	World file
Regions	Regions file	Regions file	Regions file
[+] Australia and New Zealand (2)			
[-] Central and Southern Asia (14)			
Afghanistan	Country file Inequalities	Country file	Country file
Bangladesh	Country file Inequalities	Country file	Country file




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G4 French

A B C D E F G H I J K L M N O P Q R S T U V W X Y



Programme commun OMS/UNICEF de suivi de l'approvisionnement en eau, de l'assainissement et d'hygiène

Estimations sur l'eau, l'assainissement, l'hygiène, les services de déchets médicaux et le nettoyage de l'environnement dans les établissements de santé

Cambodge

Mis à jour en août 2022

Suivez les liens ci-dessous pour trouver les informations suivantes :

Estimations JMP :

- Échelles WASH pour les établissements de santé
- Tendances du WASH de base dans les établissements de santé
- Estimations (2000-2021) pour les établissements de santé

Entrées de données :

- Résumé des données
- Données sur l'eau
- Données d'assainissement
- Données d'hygiène

Choose language

French

- English
- Spanish
- French**
- Russian
- Arabic
- Chinese
- Other

ISO3 CODE

KHM

Notes sur la façon de lire le fichier pays

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A B C CQ CR CS CT CU CV CW CX CY CZ DA DB DC DD DE DF DG L

1 **Summary of data from national surveys,**
 2 [values in square brackets not used]
 3

- Water
- Sanitation
- Hygiene
- Waste
- Cleaning

Hygiene

National Urban Rural

Handwashing facility	Station with basin, soap, and water	Station with alcohol-based hand rub	Station with basin, soap, and water OR alcohol-based hand rub	Station within 5m of toilets with water and soap	Basic (station with basin, soap, and water OR alcohol-based hand rub AND within 5 metres of toilet)	Handwashing facility	Station with basin, soap, and water	Station with alcohol-based hand rub	Station with basin, soap, and water OR alcohol-based hand rub	Station within 5m of toilets with water and soap	Basic (station with basin, soap, and water OR alcohol-based hand rub AND within 5 metres of toilet)	Handwashing facility	Station with basin, soap, and water	Station with alcohol-based hand rub	Station with basin, soap, and water OR alcohol-based hand rub	Station within 5m of toilets with water and soap	Basic (station with basin, soap, and water OR alcohol-based hand rub AND within 5 metres of toilet)
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4 Source	Type	Year
6 KHM_2009_EMONC	Survey	2009
7 KHM_2014_EMONC	Survey	2014
8 KHM_2016_WASH	Survey	2016
9		
10		

			[92]	[50]	[50]	[15]	[15]											

1
2 Water, sanitation, hygiene, health care waste services and environmental cleaning in health care facilities
3

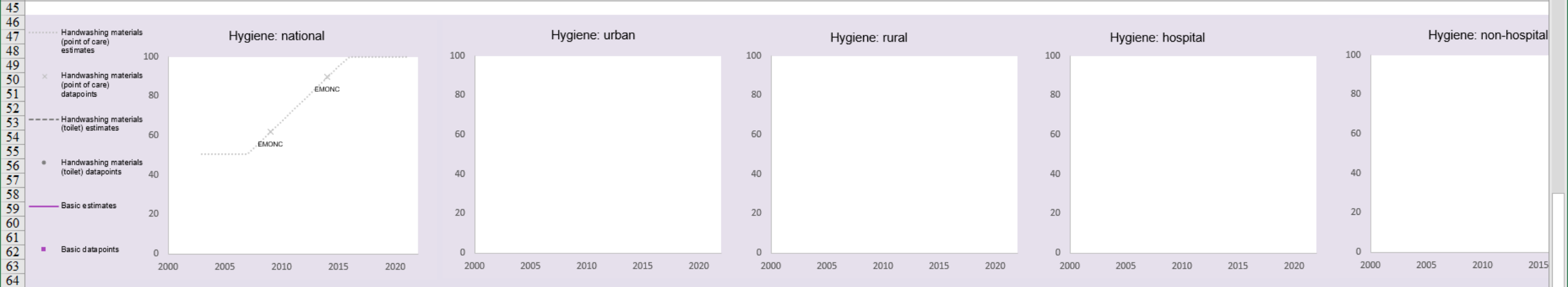
Water

Sanitation

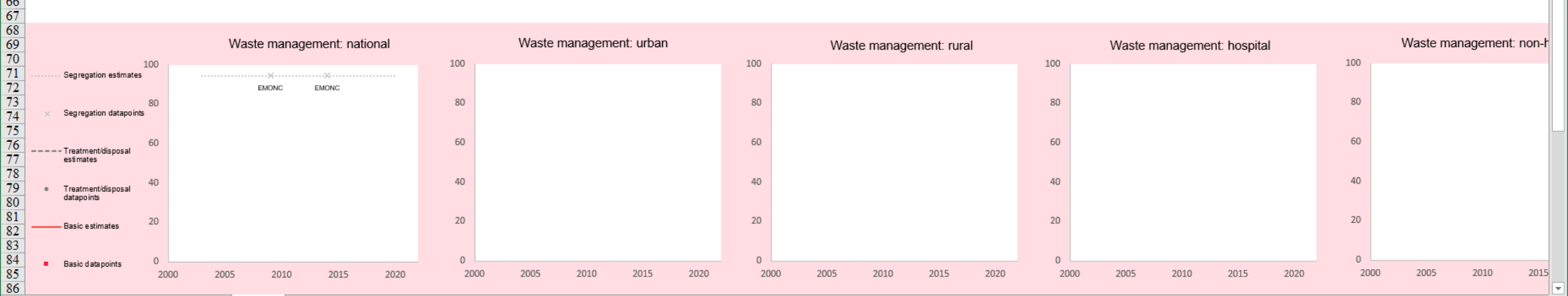
Hygiene

Waste

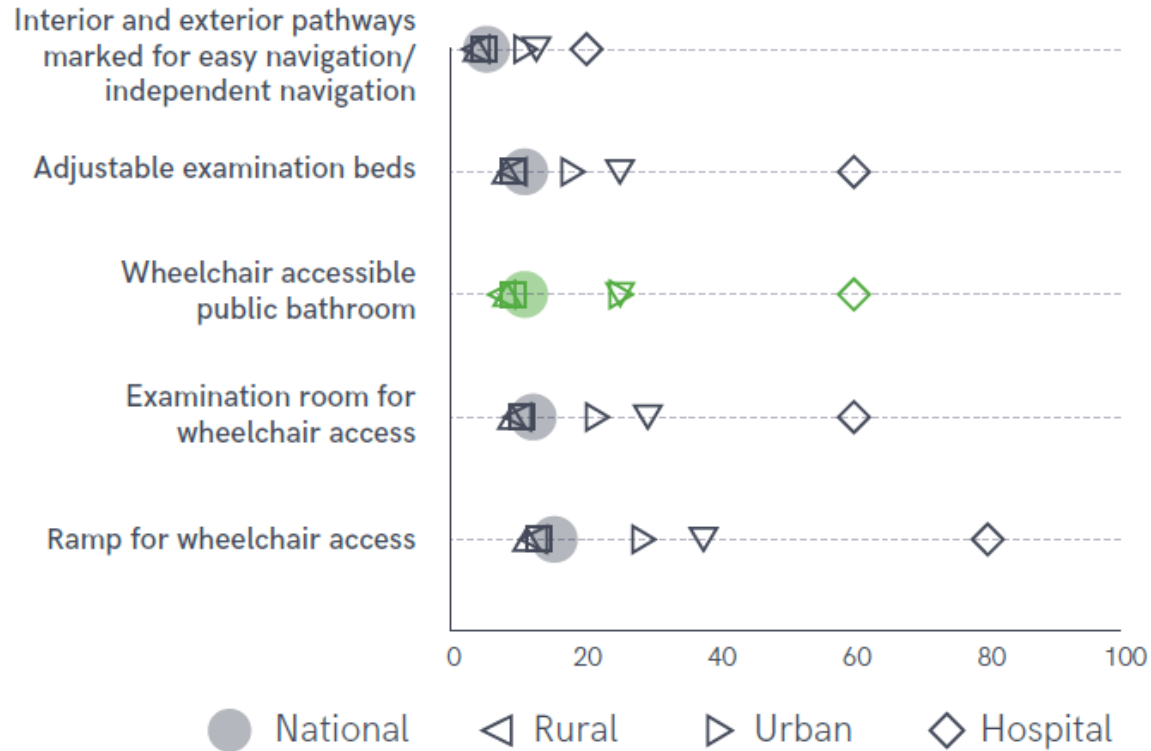
Cleaning



65 Source: WHO/UNICEF JMP (2022) Basic service: functional hand hygiene facilities (with water and soap and/or alcohol-based hand rub) are available at points of care, and within 5 meters of toilets. Limited service: functional hand hygiene facilities are available at either points of care or toilets, but not both. No service: no functional hand hygiene facilities are available



ACCESS FOR PERSONS WITH REDUCED MOBILITY IN HEALTH FACILITIES IN VANUATU



ACCESS FOR PERSONS WITH REDUCED MOBILITY IN HEALTH FACILITIES IN KENYA

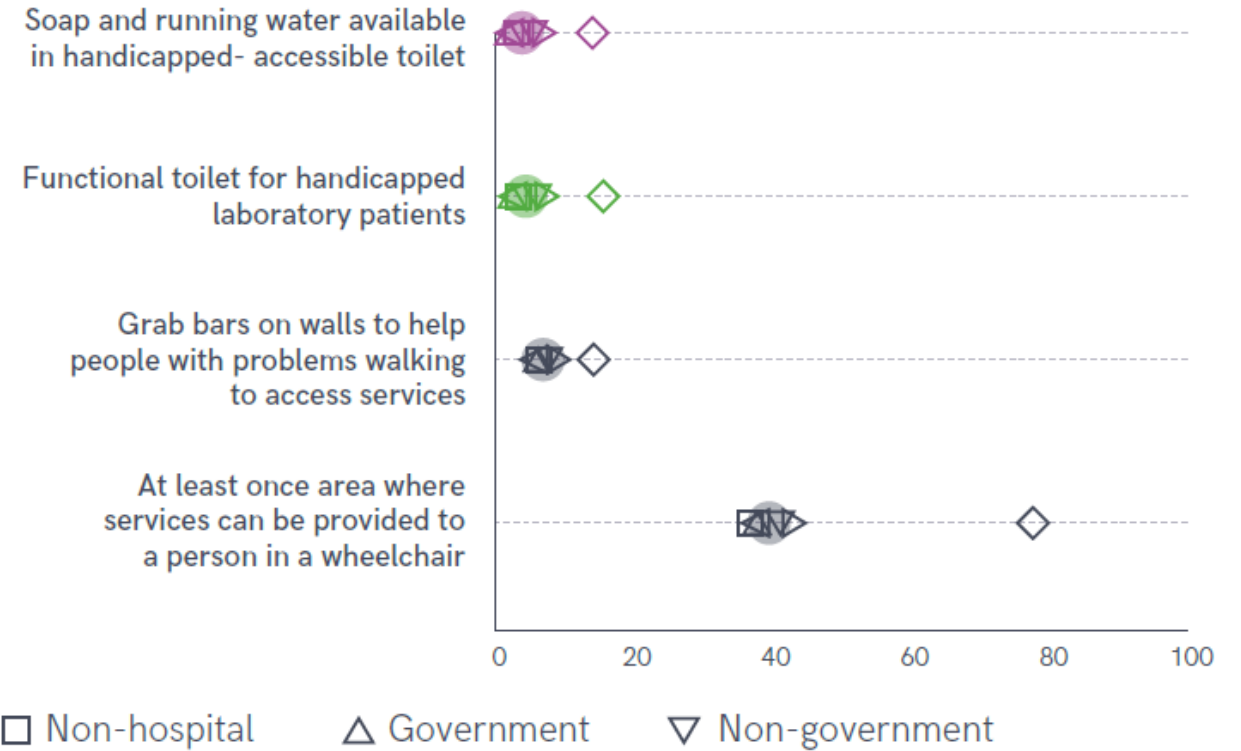


FIGURE 79

Proportion of health care facilities with services accessible by people with reduced mobility in the Vanuatu Health Facility Survey (2020) and Kenya Harmonized Health Facility Assessment (2018) (%)

Ways to Get Involved

1. **Subscribe to the listserv** to receive updates on events and resources (link in chat). Join live sessions and connect with others in the space.
2. **Send us topic recommendations.** We want to know what you want to learn about, what you feel needs more discussion.
3. **Nominate a success story.** Every live session + newsletters will highlight successes, big and small, around WASH in HCF.
4. **Join our next session!** March 2023 will focus on the environmental cleaning.





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WASH in Healthcare Facilities Community of Practice

The WASH in HCF Community of Practice Initiative, facilitated by Emory University, is an action-oriented learning platform seeking to connect practitioners around the world.

CREDIT-Lindsay Denny Global Water 2020