

Ten Immediate WASH Actions in Healthcare Facilities for COVID-19 Response

15 April 2020

Compiled by Lindsay Denny, Global Water 2020

This page describes ten immediate water, sanitation and hygiene (WASH) actions that low-resource healthcare facilities can undertake with limited budget in the near-term (0-3 months) to prepare for and address COVID-19. On the second page, WHO and UNICEF have provided input on how to best adapt their [Eight Practical Steps](#) in the midst of COVID-19. Finally, we have compiled resources for action. While some activities may be temporary stopgaps, the goal is to provide incremental improvements that can be sustained and built upon after the outbreak subsides. In particular, the proper management of WASH will be critical to protect healthcare workers and prevent infections. WHO has stated that WASH guidelines for COVID-19 are the same as for preventing other infections. The immediacy of the outbreak will require healthcare facilities, Ministries of Health, and partners to prioritize activities, with a focus on infection prevention and control and preparing for an influx of patients, causing greater demand on WASH services.

Ten Immediate WASH Actions in Healthcare Facilities to Respond to COVID-19:

- 1. Handwashing:** Set up handwashing facilities, like a bucket with a tap with soap, throughout the facility. Prioritize the facility entrance, points of care, and toilets, as well as patient waiting areas (and other places where patients congregate). If the facility is piped, repair any broken taps, sinks or pipes.
- 2. Water Storage:** Consider the water requirements to perform WASH/IPC activities with an increased patient load. If inconsistent or inadequate water supply is a concern, increase the water storage capacity of the facility, such as by installing 10,000L plastic storage tanks.
- 3. Supplies:** Solidify supply chains for consumable resources, including: soap (bar or liquid), drying towels, hand sanitizer, and disinfectant. Ensure cleaners have Personal Protective Equipment (PPE) for cleaning. If ingredients are available locally, produce hand sanitizer at the facility (or at district-level) – see [WHO protocols](#).
- 4. Cleaning & Disinfecting:** Review daily protocols, verifying based on national guidelines or global recommendations for resource-limited settings and noting additional levels and frequency of cleaning in clinical areas with high numbers of COVID-19 cases, including terminal cleaning. Ensure adequate supplies of cleaning fluids and equipment, making allowance for additional cleaning requirements. Ensure handwashing stations and toilet facilities are cleaned frequently.
- 5. Healthcare Waste Management:** Strengthen healthcare waste management protocols by making sure bins are located at all points of care, that they are routinely emptied, and waste is stored safely.
- 6. Staff Focal Points:** Assign staff member(s) – cleaners, maintenance staff, or clinicians -- whose job it is to oversee WASH at the facility, including: refilling handwashing stations, auditing availability of supplies in wards, reporting on WASH maintenance issues, monitoring cleaning and handwashing behaviors of staff, and communicating updates to the director daily.
- 7. Training:** Organize training for all staff on WASH as it relates to their role at the facility, including a specific training for cleaners based on the protocols reviewed above.
- 8. Daily Reminders:** Remind staff of WASH protocols during morning meetings. Post [hygiene promotion materials](#) throughout the facility, particularly next to handwashing facilities.
- 9. Hygiene Culture:** Encourage a culture of hygiene at the facility. Emphasize that all staff members, including cleaners and maintenance staff, are part of a team working to prevent the spread of infection. Recognize individual WASH champions in the HCF.
- 10. IPC Team:** Work with the Infection Prevention and Control (IPC) team at the facility to make sure efforts are reinforced and aligned, avoiding duplication. Encourage WASH focal points/partners to participate in IPC meetings. Coordinate WASH/IPC activities based on plans to isolate COVID-19 patients.

BONUS - Preventative maintenance: Check on WASH infrastructure and undertake any necessary preventative maintenance, such as repairing possible disruptions to the water supply, storage, distribution or treatment.

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WHO/UNICEF: WASH in HCF in the Context of COVID-19 and in Support of Sustained Improvement

Key recommendations from WHO & UNICEF on how their Eight Practical Steps for countries to achieve WASH in healthcare facilities can be adapted in the face of COVID-19:

- **Advocate for inclusion of WASH in national COVID-19 response and funding plans.** Adequate and sustainable WASH is fundamental to preventing spread and treating those infected with COVID-19. Financial and human resources should be dedicated to improving WASH services in healthcare facilities and making hand hygiene facilities available to all in public places. At the national level, this means WASH actors engage with and inform health sector colleagues in budgeting and operationalizing such interventions.
- **Improve hand hygiene practices (including increasing access to hand hygiene facilities) infrastructure and training (including financial contribution).** This will support frequent and effective hand hygiene action at the right times (point of care access in particular), using appropriate techniques. It also means that WASH workers (hygiene promoters, sanitation workers, health care waste workers) have access to hand hygiene facilities and understand the correct hand hygiene actions and timing.
- **Improve and maintain infrastructure.** This will provide sufficient and safe drinking water (to support the dignity of health care staff and communities), adequate and accessible toilets (including separate facilities for confirmed and suspected cases of COVID-19 infection), safe management of health care waste (including increasing capacity to segregate and treat additional waste generated through COVID-19 activities) and proper cleaning and disinfection (COVID-19 can be inactivated in one minute using common disinfectants). Using the WASH FIT tool “essential indicators” allows for quickly identifying key gaps and implementing improvement plans.
- **Empower and train staff/develop the health workforce** (may require financial contribution). This will address other areas of WASH including safe management of health care waste, safely managed sanitation, and ensuring that sanitation and waste workers have the proper protection, training and permission to keep safe and to continue to perform their work.
- **Engage local governments and communities to mobilize resources and action to implement key WASH activities.** Local government, civil society and existing community groups have an important role to play in making immediate WASH improvements, demonstrating good hand hygiene and mobilizing local funds to make quick, low-cost WASH improvements (e.g. portable hand hygiene and drinking-water stations).

To achieve these actions in the long-term:

- Set targets/define roadmap;
- Establish standards & accountability mechanisms
- Conduct operational research & share learning

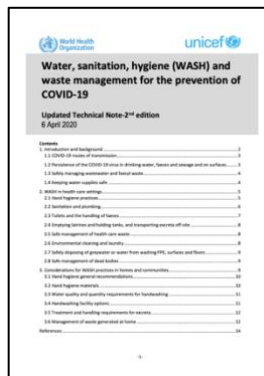
For more information including COVID-19 related documents, visit the global WASH in HCF knowledge portal: www.washinhcf.org.

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Resources for WASH in Healthcare Facilities and COVID-19



WHO/UNICEF WASH in HCF & COVID-19 Resources

- [WASH Guidance for COVID-19 Prevention \(Updated 7 April 2020\)](#)
This WHO/UNICEF document provides updated information from WHO and UNICEF on WASH, including WASH in HCF, in response to COVID-19.
- [Guidance note on WASH & IPC](#) (23 March 2020)
This UNICEF document for country and regional staff walks through key actions for WASH and IPC during COVID-19 response.
- [Webinar on Water & COVID-19](#) (9 April)
- [Webinar on Healthcare Waste Management & COVID-19](#) (14 April)
- [Future Webinars on Hand Hygiene \(16 April\); Environmental Cleaning \(21 April\); Sanitation \(23 April\)](#)



IPC Guidance for COVID-19 (Interim 19 March 2020)

This document provides information from WHO on infection prevention and control (IPC) in response to COVID-19. WASH partners are encouraged to work with IPC colleagues.



Local Production of Alcohol-Based Hand Rub for Health Facilities

- [Frequently Asked Questions](#)
This FAQ document focuses on the practical aspects of setting up local production of alcohol-based hand rub for healthcare facilities.
- [Webinar](#) (December 2019)
A recording of the webinar on the Makerere University/CDC project on the local production of alcohol-based hand rub for healthcare facilities in Uganda.
- [WHO Handrub Formulation](#)



Best Practices for Environmental Cleaning in Healthcare Facilities in Resource-Limited Settings

This CDC document discusses best practices that can be used in preparation of the COVID-19 outbreak, including protocols, policies, and monitoring.

