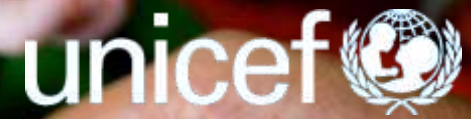


unite for
children



Creating safe environment for newborns in Madhya Pradesh
WASH in Health and Nutrition Rehabilitation Centers

Pankaj Mathur, WASH Specialist and Nageshwar Patidar, WASH Officer, UNICEF

WASH in Health in MP

Phase 1



WASH
assessment and
improvement
planning

2017

Phase 2



Handholding for
improvements

Phase 3



Scale-up under
National
Flagship
programmes

Pandemic



COVID Infection
Prevention and
Control

2020 onwards

Strategic approach

High Priority districts: Establishing model and results

Scaling-up State wide



- ▶ Institutional strengthening- Mentoring, District Health Society, WASH checklist
- ▶ Capacity development- health care functionaries, cleaning staff
- ▶ Resource mobilization and prioritization
- ▶ Engaging with patients and care takers-counselling
- ▶ Smooth WASH supplies and its use

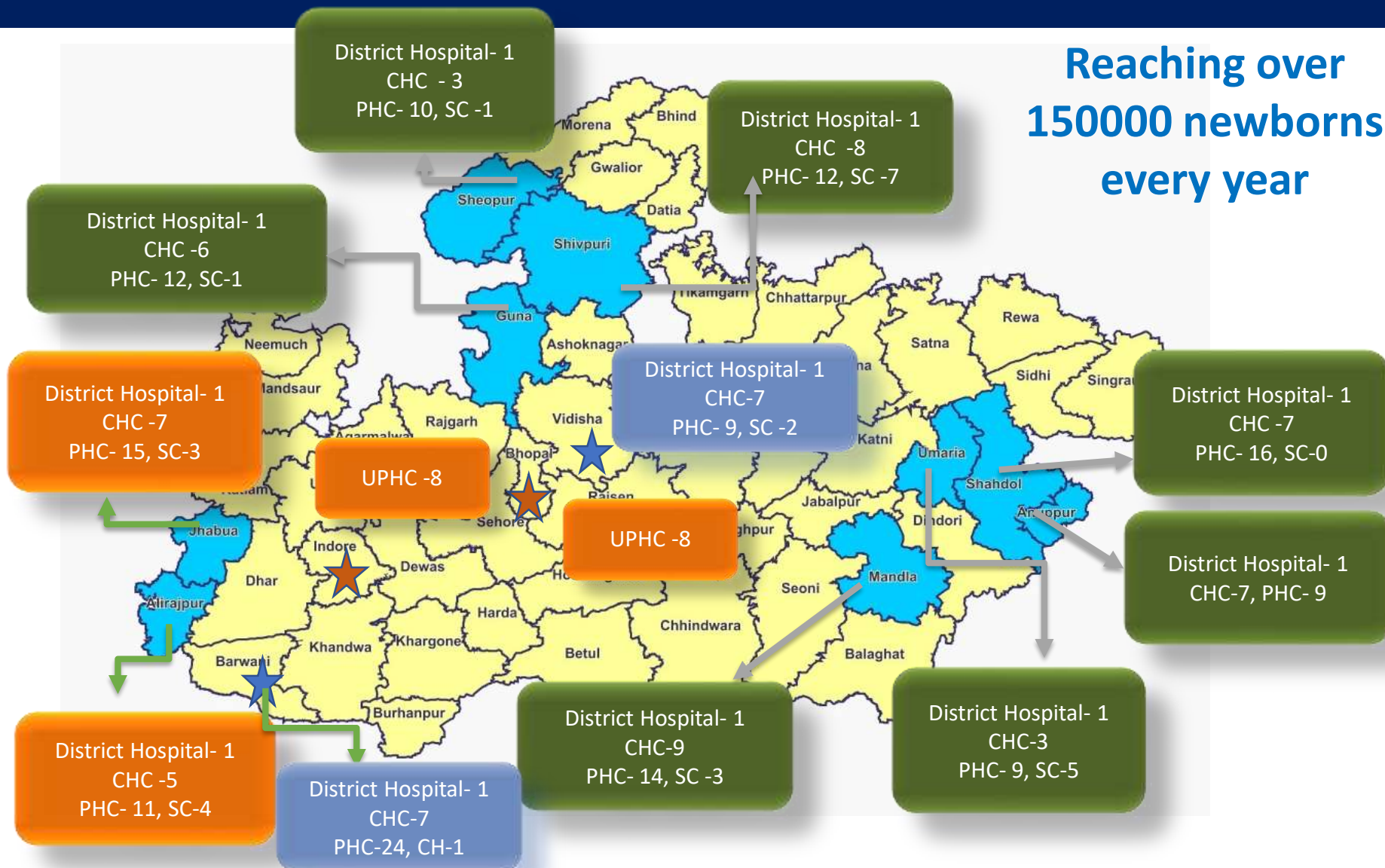
- ▶ Capacity development, scale-up under Swachh Swasth Sarvatra (SSS) and Kayakalp
- ▶ State roll-out guidelines and protocols
- ▶ State level advocacy

Strategic Focus

- In **9 high priority districts** (Poor health indicators, High tribal Population, hard to reach), and subsequently scaling up in State. **Expanded to additional 4 districts.**
- **High Delivery load**-270 health institutions in phased manner, reaching over 150,000 newborns each years
- **Over 95% institutional** deliveries
- **Convergent work of WASH, Health and Nutrition** Sectors
- Focusing on the **critical pathways of acquiring infections** in the Out Patient Department, Labor room, Sick Neo-natal Care Unit, Postnatal ward and Newborn Care Unit, for improving WASH
- **Linked with National Flagships** NHM, SBM, FFC



Geographical Coverage



Facility based interventions in HPDs

ASSESSMENT AND PLANNING

Short term: High importance, within available resources, easy to do

Medium term: Moderate importance, resource can be mobilized locally

Long term: high cost, integration in AIP and subsequent approval, convergence



Key Components:-

- I. Water Distribution Management
- ii. Excreta Disposal Management
- iii. Hand Hygiene & Infection control
- iv. Bio-medical waste Management
- v. Vector control
- vi. Location wise WASH assessment

**Comprehensive
Assessment and
Planning Tool (CAPT)**

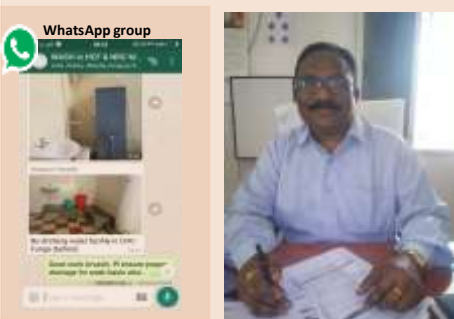


HANDHOLDING SUPPORT FOR IMPROVEMENTS

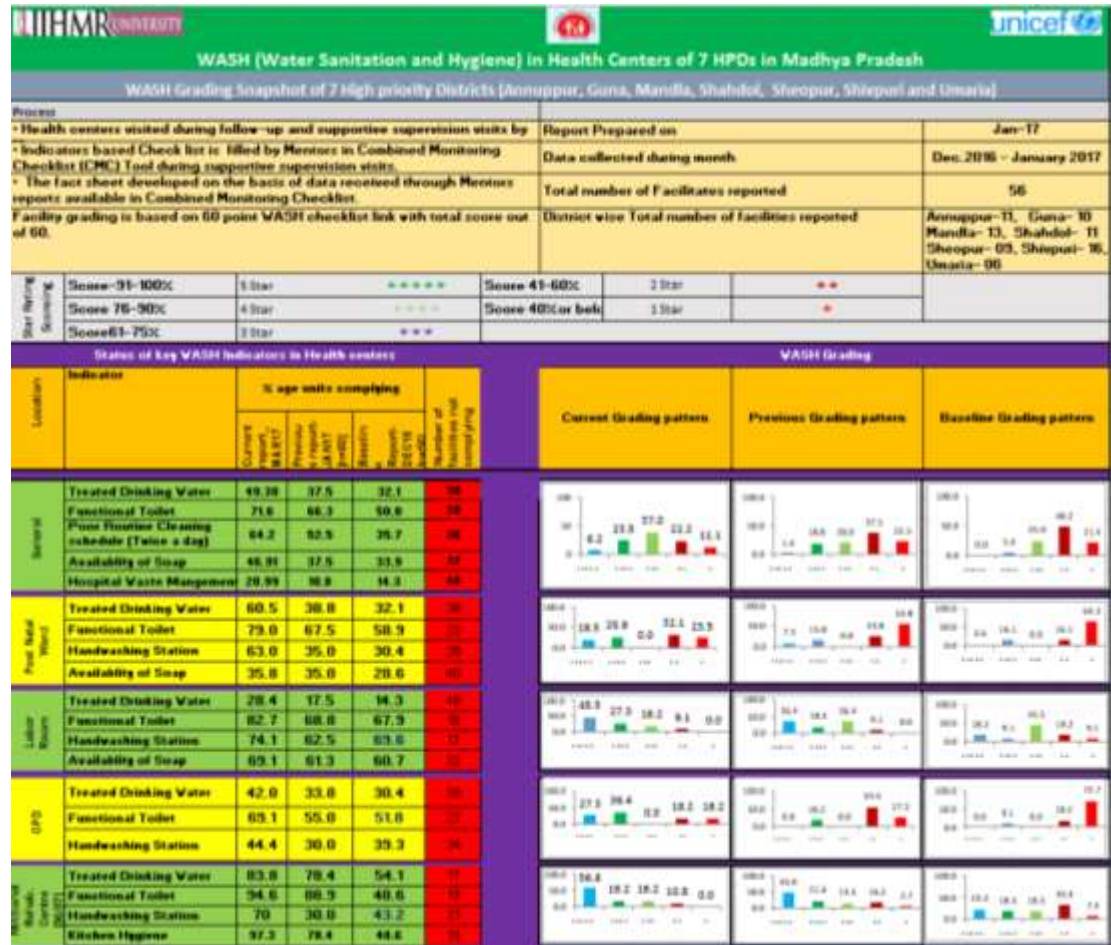
- Infrastructure improvements**, functionality and maintenance
- Human Resource:** Consistent availability of staff /outsourcing - Ensuring WASH consumables
- Finances:-** Leveraging flagship and local resources
- Supportive monitoring**
- Institutional WASH checklists**
- Regular review in **District Health Society**
- Escalating issues for state level action**

Real time monitoring and supportive supervision

Mobile base Star grading app



WASH Grading-Snapshot



IPC at COVID 19 in HCFs and Vaccination Centers

Updating tools with IPC protocols :

- CAPT and Star Grading tools updated and used including COVID19 IPC protocols
- Assessment tool developed for COVID vaccination centers

Assessment and planning:

- State level plan for supplies : PPE, Disinfectant, cleaning consumables
- Assessment and improvement planning for vaccination, State-wide roll-out.

Capacity Building:

- 5000 ASHAs, ANM and Nursing staff skilled on WASH and IPC
- 400 Community Health on “WASH and IPC protocols at Vaccination centers
- MOs/ BMOs skilled on revised CPCB’s guidelines to ensure BMWW and IPC

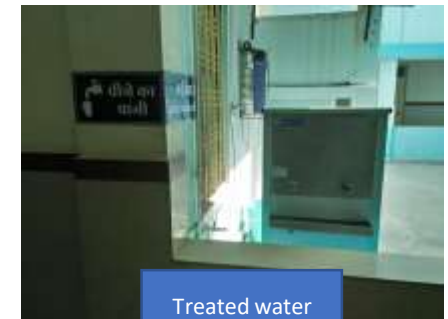
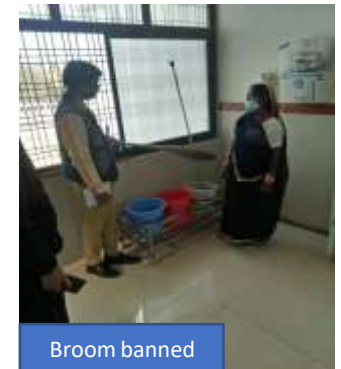
WASH and IPC protocols:

- Treated water at all vaccination sites
- 3 bucket cleaning procedure (Detergent, water & 1% Sodium Hypochlorite solution)
- Functional toilet with signages, Hand WASH Stations, clinical and general and cleaning schedule near to vaccination sites

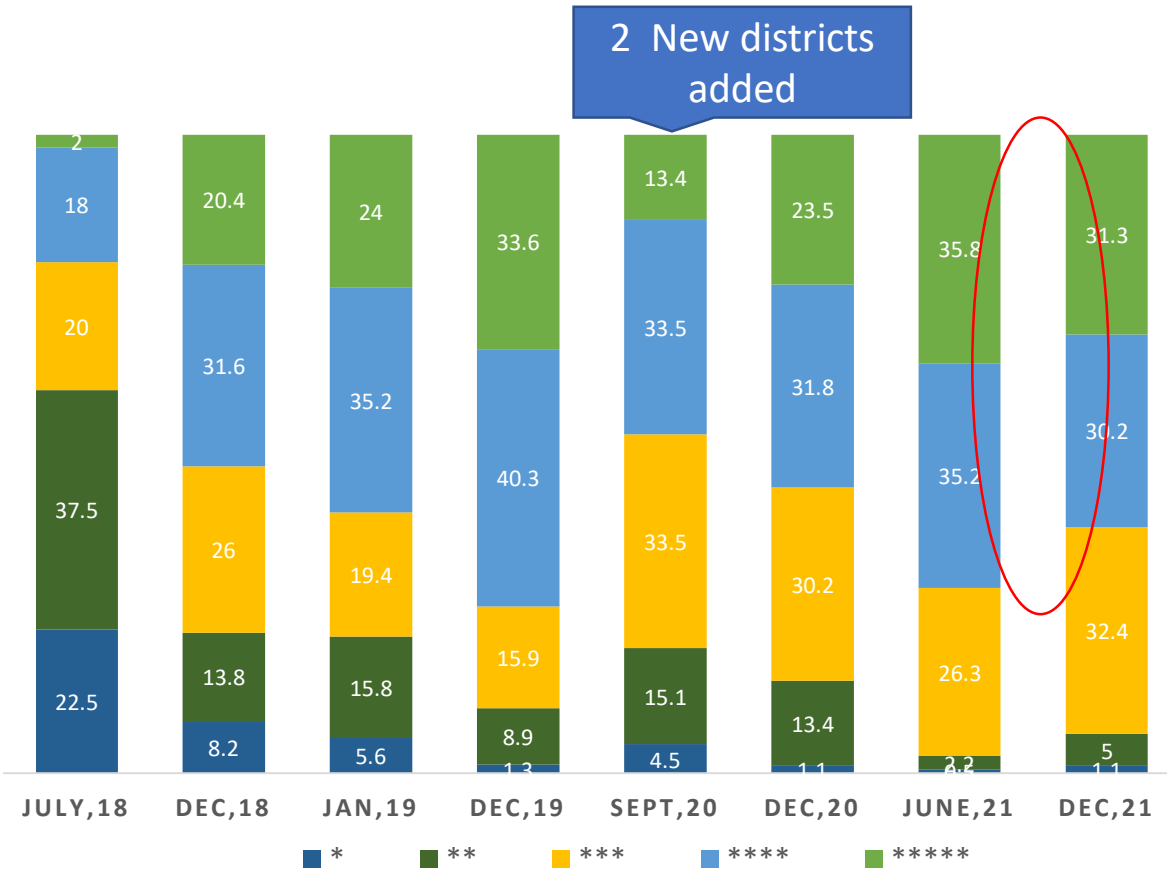
- Sunday Cleaning

Supportive supervision and Monitoring :

- Regular visits and support to 250 vaccination centers for IEC, WASH and BMWW
- Best practice documentation on COVID Vaccination drive



Key Achievements



Four/ Five Star Facilities (over 75% WASH Compliance) increased from 20% to 71% in last three years (2018 to 2021)

6000 + health care providers trained on WASH and IPC till date . WASH in Health & IPC compliance in all 176 HCFs of 8 HPDs

About 1 M USD leveraged in focus districts each year dedicated for WiHNRC

62 HCFs received Kayakalp Award in 2020-21 from supported districts

More and More Facilities conforming to NQAS standards

IPC support in HPDs ensured safe environment to more than 2 Million people in HCFs and vaccination centers

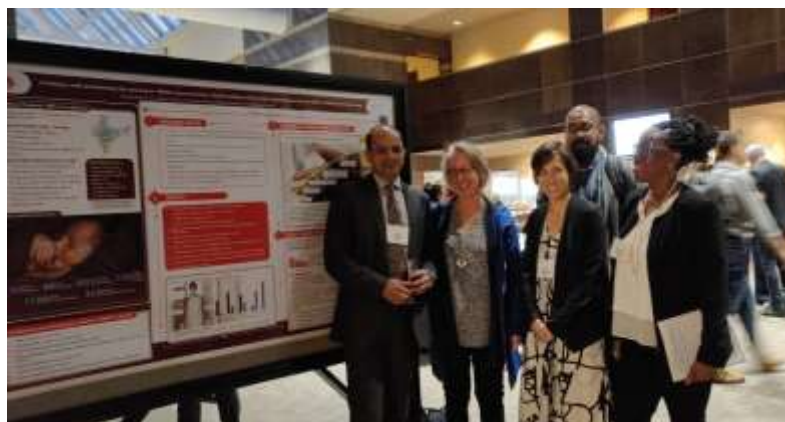
Key Supplies: 90000 Face Shields, 75000 N 95 Masks, 12000 Liquid Hand Wash and 8000 Refill packs to HCFs

An International Best practice



“Good & Replicable Practices & Innovations in Public Health Care System” Assam, Oct. 2018

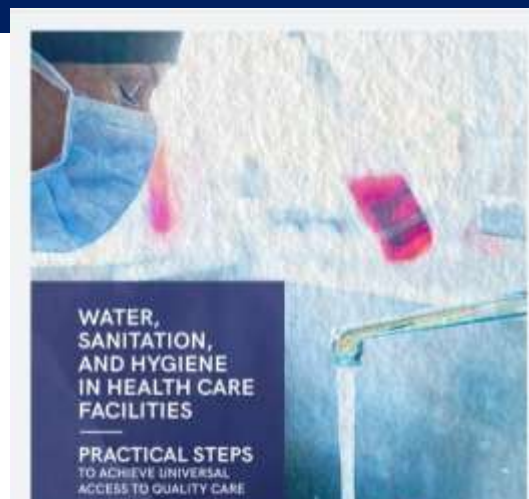
Best Practice in WASH in Health : Emory and UNICEF Global Course



Water and Health Conference Oct 2018
University of North Carolina, Chapel hills



Global Practice Document: WHO and UNICEF



Key Learnings

- The willingness of the district to undertake the Comprehensive WASH assessment and improvements is key to success
- Due to the high number of health facilities in the districts, it is best to initially target the high delivery load institutions which make up the bulk of the district institutional deliveries.
- Almost 3/4 of the actions for improvement can be taken at the facility level only, remaining need higher level interventions
- Regular bimonthly meetings of District Health Society wherein WASH status of HCF to be reviewed by District Collector and release directives to improve accordingly
- Joint visits of officials from QA-NHM and UNICEF/resource agency to decide rationale use of available resources
- Experience sharing sessions between best performers and poor performers for peer learning always gives better results
- Role of Gram Panchayats/ PRIs is critical in mobilizing local resources and supportive monitoring



Hand Hygiene



Healthcare Waste Management



Medical Equipment Processing



Environmental Cleanliness

Water Source (Before intervention)



After intervention



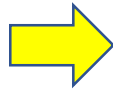
Over Head Tanks (Before intervention)



After intervention



Water pipe line passing through a flooded area



Cleaning and covering the gaps



**Open air dumping & burning of BMW
(Before intervention)**



**Deep burial pits available for Sharp and
Placenta disposal (After intervention)**



**Un hygienic dirty floor, broken delivery table and open bins in Labour room
(Before intervention)**



**Clean & tiled new floor with new delivery table and yellow covered bin at Labour room
(After intervention)**



Cleaned surface of facility premises after interventions



CHC Narayan Ganj, District Mandla

Changes has its own way...



Champions of Madhya Pradesh. Let's join hands to congratulate them for setting a milestone on improving WaSH Compliances at Health Facilities.

