Globally

- 1 in 4 health care facilities lack basic water
- 1 in 5 have no sanitation
- 2 in 5 lack hand hygiene at the point of care
- 2 in 5 lack systems to segregate waste

Dirty environments are a major contributing factor to 1 million mothers and newborns dying each year because of infections. Nearly all of these deaths can be prevented.

WASH is a “best buy” for achieving safe, quality care for all. Join us in making a difference.
A solvable problem.  
A high return on investment.  
Eight practical steps to improve WASH and quality care.

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| 1. | Establish baseline  
Conduct comprehensive national assessments and quantify the availability, quality and needs for safe water, sanitation, hygiene and health care waste (WASH) and infection prevention and control (IPC) in health care facilities. |
| 2. | Develop, cost and budget national roadmap  
Develop and implement a road map so that every health care facility in every setting has: safely managed and reliable water supplies; sufficient, safely managed and accessible toilets for patients, caregivers and staff of all sexes, ages and abilities; appropriate core components of IPC programmes, including good hand hygiene infrastructure and practices; routine, effective cleaning; safe waste management systems, including for excreta and medical waste disposal; and sustainable and clean energy. |
| 3. | Establish and implement standards  
Establish and implement, according to national context, minimum standards for WASH and IPC in all health care settings and build WASH and IPC standards into accreditation and regulation systems; and establish accountability mechanisms, including with the community, to reinforce standards and practices. |
| 4. | Set targets and monitor progress  
Set targets within health policies and integrate indicators for WASH and IPC into national monitoring mechanisms to establish baselines, track health system performance and progress on a regular basis. |
| 5. | Integrate WASH into health programming  
Integrate WASH in health care facilities concepts into health policies, programmes, trainings and budgets including for maternal, newborn and child health, nutrition, vaccines, emergency, IPC and antimicrobial resistance within the context of quality universal health coverage. |
| 6. | Allocate regular funding  
Have procedures and funding in place to operate and maintain WASH and IPC services in health facilities, and to make continuous upgrades and improvements so that WASH services continue to operate and climate smart approaches are applied. In addition budget is needed to support human resources, training and mentoring to maintain safe hygiene and IPC practices. |
| 7. | Establish multisectoral coordination mechanism  
Establish strong multisectoral coordination mechanisms with the active involvement of relevant ministries, particularly those responsible for health, water, sanitation, financing and energy. Such coordination mechanisms should serve to regularly review data and prioritize interventions and underserved facilities, advocate for sufficient WASH and IPC financing, including for health care workers, cleaners and engineers, and jointly apply common implementation approaches, tools and learnings. |
| 8. | Conduct regular awareness campaigns and advocacy  
Educate and raise awareness, in line with regional protocols and plans on health and WASH, with a particular focus on facilities used by mothers and children. Conduct ongoing education campaigns on the risks of poor sanitation, including to discourage the practice of open defecation, and encourage community support for use of toilets and safe management of faecal waste by health workers. |