



**Millennium Development Goal Initiative**  
Accelerating the Reduction of Maternal, Neonatal and Child Mortality



**UNITED NATIONS**  
**Z A M B I A**

MDGi: A Joint Programme of the Government of the Republic of Zambia – European Union – United Nations

# MDGi – ER2 WASH in Health

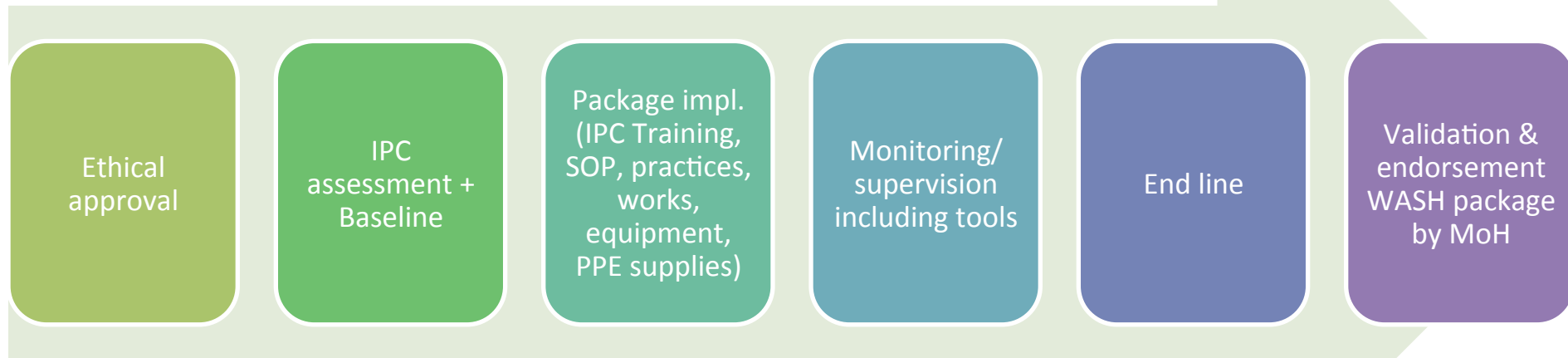
## the Zambian experience

### *From Pilot to Scale up*

Hilton Chibeleka  
London - March 2016

# OVERVIEW OF IPC WASH in HEALTH

- MDGi context: EU funded-*Accelerating Progress Towards Maternal, Neonatal and Child Morbidity and Mortality Reduction in Zambia*
- Pilot in 4 Health Facilities (9 months)
  - Partnership with NGO CIDRZ for implementation



- WASH in Health programme is IPC oriented

# WASH PACKAGE AND PRIORITIES

BARRIERS TO DISEASE TRANSMISSION	INTERVENTIONS (Soft+Hard)	Infection Prevention EFFICIENCY	COST
Disinfection + cleaning	Liquid chlorine production units + training (potential income generating activities)	+++++	+
Safe drinking Water	Water supply, Storage, Treatment (chlorine dosing)	+++	+++
Hand washing	Supply hand washing stations and sanitizers, practice	+++++	+
Sanitation - toilets	Build / rehabilitate toilets, maintenance	++++	+++
Sanitation medical wastes	Equipment for solid waste collection, storage and disposal (pits, incinerators...)	++	++++ +
Standard Operating Procedures	IPC committee; develop simple standards + capacity building	+++++	+

MILLENNIUM DEVELOPMENT GOAL INITIATIVE

A Joint Programme Accelerating the Reduction of Maternal, Neonatal and Child Mortality





# ACTIVITIES



MINISTRY OF HEALTH



WATER, SANITATION & HYGIENE RECOMMENDED  
MINIMUM STANDARDS FOR INFECTION  
PREVENTION & CONTROL IN HEALTH CARE  
FACILITIES  
ZAMBIA - 2015



Hand washing and drinking point



Personel Protective  
Equipment



Chlorine Production



Big clean up



Waste incineration



IPC on site training



Waste management supplies



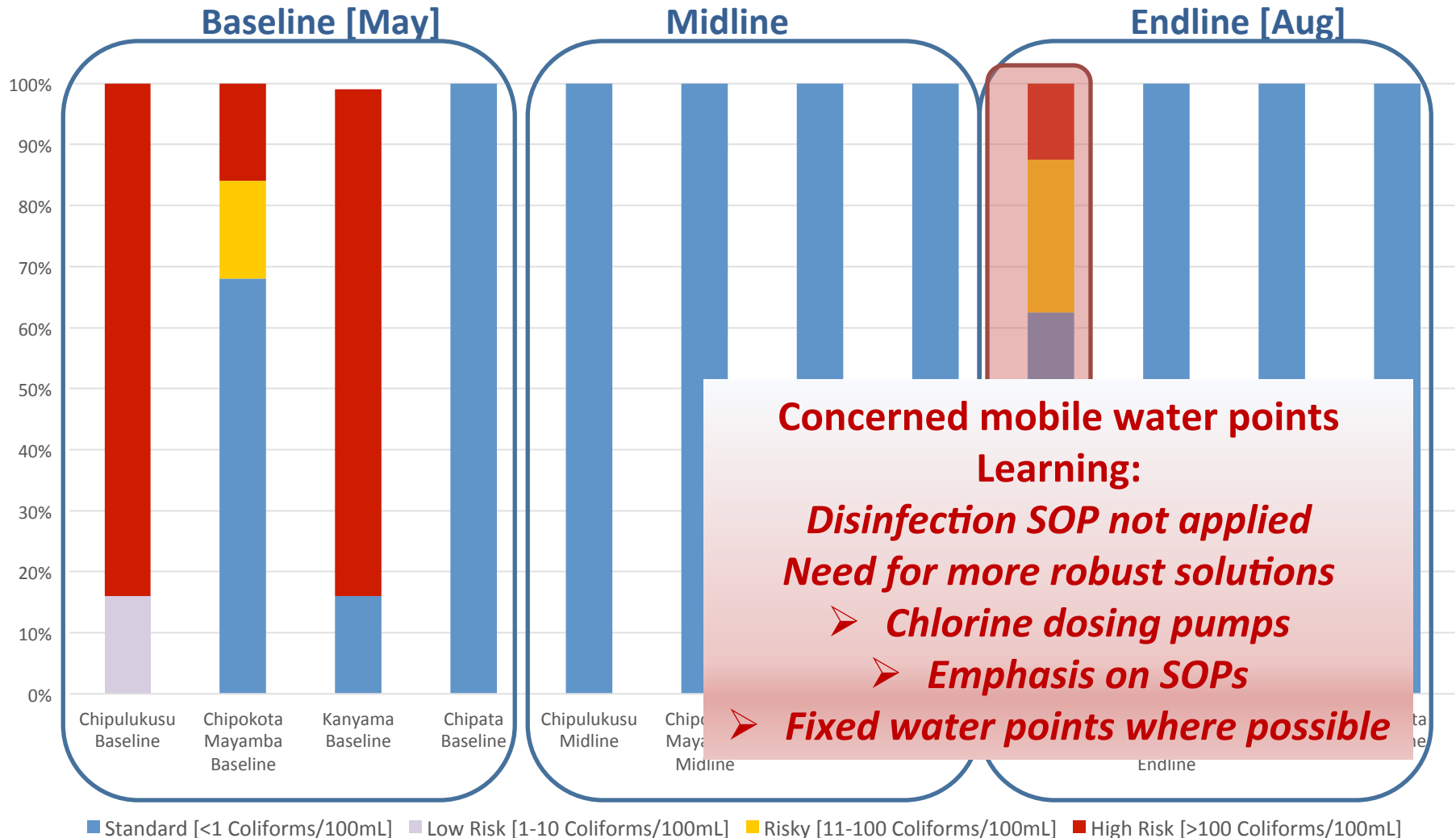
New ablution block



IPC Training of Trainers

# Water Quality Results

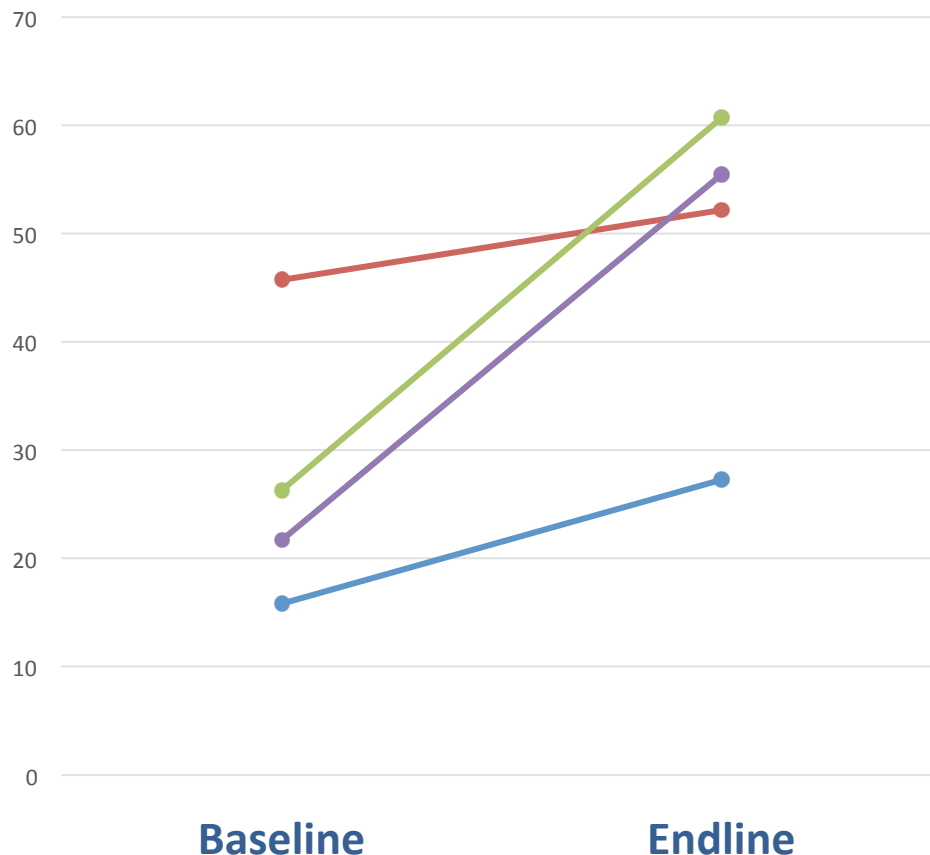
Water Quality Results - % of Samples per site at



WHO / Zambian water quality standards

# Hygiene status (hand touch sites)

Hygiene Status: proportion of **key surfaces-hand touch sites** that "**passed**" [ $<5\text{cfu}/\text{cm}^2$ ]



**Total Aerobic Colony Count (ACC)**

2.5 to  $5\text{cfu}/\text{cm}^2$  is classified as *hygiene failure*<sup>[1,2,3]</sup>

**A pass is defined as having**  
 $<2.5$  Colony forming Units (cfu)/ $\text{cm}^2$

% of sites passed	Baseline	Endline	Improvement
Kanyama	15.8	27.3	73%
Chipata	45.7	52.2	14%
Chipokota	26.3	60.7	131%
Chipulukusu	21.7	55.5	156%

## Findings:

- $>50\%$  drug resistance (10 commonly used antibiotics)
- Only approx 30% of antibiot. still sensitive
- 1 antibiotic (out of 10) sensitive for all 4 indicator pathogens

# SCALING UP NOW

- **Current rolling-out and take-aways -> 51 additional health facilities**
  - GRZ ownership through MoH leadership in scaling up phase with UNICEF direct support
  - Institutionalization framework: DIRECT implementation by Districts, Provinces and Ministry
  - Increase mentoring/support period
  - Joint IPC assessments conducted in 51 HF validated by MoH
  - IPC WASH in Health Training of Trainers at Prov/District level
  - Provinces and Districts to develop action plans and budget
  - Continue outcome research: evidence based implementation
  - HCF Equipment and supplies through LOCAL vendors for after sale services (maintenance and spare parts)
- **Challenges**
  - Inadequate funding for impact research to generate evidences of direct benefit to patients
  - Insufficient funds to institutionalize operations of the project (fuel, salt, power...)
- **Opportunities**
  - Leveraging EIB funds for country wide scaling up (harmonization of WASH package)