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## Module A: A Scorecard for Monitoring and Evaluating Basic Water, Sanitation, Hygiene and Infection Prevention in General Facility/ Outpatient Wards in Nigeria

**Scorecard Purpose:** Maintaining a basic level of cleanliness and infection prevention readiness is a pre-requisite to providing quality health care services. This scorecard was using existing and emerging global and national standards for water, sanitation, hygiene (WASH) and infection prevention in health care environments. The scorecard is meant to serve as a quality improvement, monitoring and evaluation tool. The scorecard consolidates lengthy guidelines and condense them into one useful monitoring and evaluation tool for use among various stakeholders within the health system. The scorecard should be used for informal quarterly (or semi-annual) monitoring visits, annual evaluation/certification visits, and routine supportive supervision visits.

While this observational scorecard includes assessment information on the presence of critical WASH and infection prevention infrastructure and supplies within a health care facility, it does not evaluate the proper management and use (behavior) of the infrastructure and supplies assessed. Therefore, it is recommended that this tool be used in conjunction with other interventions to ensure consistent compliance with proper WASH and infection prevention behaviors among health care facility staff (clinical and non-clinical), patients and visitors. Other interventions may include (but are not limited to):

- Implementing systems of personal and collective responsibility and motivation
- Ensuring the presence of conveniently placed reminders to comply with proper hygiene and infection prevention procedures
- Making improvements to infrastructure access and placement
- Training health care facility staff (health workers and non-healthcare staff) on standards, roles and responsibilities

**Clean Clinic Certification Levels:** Local, state and federal governments can use this scorecard to assess facility infection prevention readiness in a standardized way. Health care facilities can attain various “cleanliness” certifications. Each certification is valid for one year or until an official government, certification visit is conducted. The three levels of certification are:

- A facility achieving a score of 70 – 79 points achieves a **BRONZE** certification



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- A facility achieving a score of 80-89 points achieves a **SILVER** certification
- A facility achieving a score of 90-100 points achieves a **GOLD** certification.

### Recommended Scorecard Use for Various Health System Stakeholders:

- **Healthcare and non-healthcare facility staff:** This scorecard can be used by individual staff members within a health facility to understand the expectations of maintaining a basic level of infection prevention readiness within their ward. Staff members can use the scorecard to maintain awareness of their ward's current infection prevention readiness status, identify needed improvements and prioritize improvements based on the weight of each criteria. Staff members can also use their familiarization with scorecard criteria to ensure compliance with basic WASH and infection prevention practices among themselves and their colleagues, as well as patients and visitors.
- **Ward supervisors, infection prevention and control committees, and Health Care Facility Administrators:** This scorecard can be used by health care facility leaders to continually monitor ward readiness status, identify gaps, prioritize improvements and shift or mobilize resources to improve and maintain a basic level of infection prevention readiness. The scorecards can also serve as a supporting tool in monitoring staff, patient and visitor compliance with basic hygiene and infection prevention practices.
- **Local, State and Federal governments:** This scorecard can be used by health system leaders to systematically collect consistent, useful data for decision-making. Using the scorecard on a routine (annual or semi-annual basis) allows health system leadership to assess facility readiness, reward high performing facilities and staff members, allocate resources to facilities in need and collect consistent and assess risk in the event of a disease outbreak or natural disaster.

**Scoring Overview:** This Scorecard consists of six sections:

1. Descriptive Questions
2. Water
3. Sanitation
4. Hygiene & Infection Prevention
5. Health care Waste
6. Cleaning and Administration



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Within each section is a list of basic WASH and infection prevention criteria. Each criteria is assigned a specific score. The scorecard criteria apply to any health care facility, regardless of facility level (primary, secondary, tertiary) or facility type (public, private, mission, etc.).

### Scoring Instructions:

1. Read each criteria and mark the appropriate score by circling the score earned. If notes are provided for specific criteria, review the notes before marking the score.
2. If the criteria is met, the facility being assessed will be awarded the corresponding score (noted by circling the number in the "yes" column). If the criteria is not met, the ward being assessed will be awarded a score of "0" (noted by circling the number in the "no" column). No partial points are given.
3. Upon assessing all of the criteria within the scorecard, the evaluator should added up the points earned for all three sections and note the final score in the last row of the scorecard.



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## A Scorecard for Monitoring and Evaluating Basic Water, Sanitation, Hygiene and infection Prevention in Health Care Facilities (General Facility/Outpatient Ward)

### Section 1: Descriptive Questions

Question #	Question:	Response:
1.1	Enumerator Name:	
1.2	Facility Name:	
1.3	Facility Level (primary, secondary or tertiary):	<input type="checkbox"/> Primary <input type="checkbox"/> Secondary <input type="checkbox"/> Tertiary
1.4	Facility type (public, mission, private):	<input type="checkbox"/> Public <input type="checkbox"/> Mission <input type="checkbox"/> Private
1.5	State in which the health facility is located:	<input type="checkbox"/> Ebonyi State <input type="checkbox"/> Kogi State

### Sections 2 – 6: WASH and Infection Prevention Criteria

Criteria #	Criteria	Notes and Definitions	Score	
			No	Yes
<b>Section 2: Water</b>				
2.1	The facility has access to an improved water source as its primary water source	Improved water source includes any of the following: a piped municipal water system, borehole, tubewell, or rainwater catchment system	0	4



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Criteria #	Criteria	Notes and Definitions	Score	
			No	Yes
2.2	The primary water source is located on the grounds of the Health Facility		0	2
2.3	The water system is functional at the time of visit		0	8
2.4	The water system provides water all the time (during all weeks, summer and winter)		0	2
2.5	The quality of water is safe enough for human consumption	Without physical, chemical, or bacteriological contaminants. Continuity, coverage, quality. Give a higher score to water quality, more than availability. Requires Ministry of Health water quality testing	0	3
2.6	Drinking water is stored safely in a clean tank or container with a lid and tap OR the piped water is of drinking water quality (suitable for human consumption)		0	1
2.7	The facility has a written protocol that describes the procedures and frequency of water treatment (disinfection) that is used for water for human consumption		0	1



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Criteria #	Criteria	Notes and Definitions	Score	
			No	Yes
2.8	There is a management plan to ensure a secondary water source is accessible In the event that the water source of the facility is broken and the plan describes the responsibilities of the staff to ensure water at the critical points of water. attention and water, sanitation and hygiene facilities.		0	2
2.9	The facility has constant, uninterrupted supply of electricity		0	1
<b>Section 3: Sanitation</b>				
3.1	The facility / room has an improved toilet or latrine that is functional at the time of the visit	Improved Toilet Facilities include: Piped toilet systems Septic tank systems Latrines with an impermeable, cleanable flooring surface (cement, tile, plastic)	0	3
3.2	Toilet facilities are separated by gender and clearly marked as male / female	if there are no facilities, record a "0"	0	1
3.3	At least one toilet is accessible for people with limited mobility (such as women who are in labour or who recently gave birth)	Accessible means free of obstacles and without elevation changes (stairs). If there are no facilities, record a "0"	0	2



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Criteria #	Criteria	Notes and Definitions	Score	
			No	Yes
3.4	Women's sanitation facilities have a handwashing station, soap and waste bin in the toilet stall to meet menstrual hygiene management needs	if there are no facilities, record a "0"	0	2
3.5	Toilet facilities are generally clean	Removed dust, dirt and no odors. If there are no facilities, record a "0"	0	2
3.6	The toilet facilities provide privacy	an exclusive service per person, without being observed by other people. If there are no facilities, record a "0"	0	1
3.7	There are functional sinks located at the toilet facility work with soap and water present at the time of visit (if there are no facilities, record a "0")		0	3
<b>Section 4: Hygiene and Infection Prevention</b>				
4.1	The sink has running water and soap and is available in the outpatient / inpatient area		0	8
4.2	Chlorine solution for disinfection and a functioning autoclave are available at the facilities of the health establishment		0	8
4.3	Each bed in each ward/ room only has a maximum of one patient (or a couple of mother and child)		0	2



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Criteria #	Criteria	Notes and Definitions	Score	
			No	Yes
4.4	Beds and cribs for patients are separated by a distance of 2 meters from the edge of one bed to the nearest point of the next bed		0	1
4.5	The protocols for handling, safe handling and food safety exist. If a kitchen exists, prepared foods are protected from flies, other insects or rats.		0	1
4.6	A stock of <u>sterile gloves</u> is available in the facility at the time of the survey		0	3
4.7	A stock of examination gloves (non-sterile) is available within the facility at the time of survey		0	2
<b>Section 5: Health Care Waste</b>				
5.1	The waste is segregated safely in at least three containers, one for non-infectious waste, one for infectious waste, and one for sharps waste		0	3
5.2	The waste containers are clearly labeled and/or color coded to observe the type of waste receptacle		0	3
5.3	Appropriate sterile protective equipment (gloves, mask, goggles, rubber boots) is available for staff to use when transporting or disposing of hospital solid waste.		0	2



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Criteria #	Criteria	Notes and Definitions	Score	
			No	Yes
5.4	Appropriate protective equipment (utility gloves, mask, goggles, rubber boots) is available for staff to use when transporting or disposing of hospital solid waste.		0	1
5.5	Facility protocols clearly describe a process and frequency for the disposal and treatment of health care waste and the protocols clearly describe who is responsible for the storage and proper disposal of hospital solid waste.		0	2
5.6	Health care waste is stored safely and separately in temporary storage prior to their external transport from the health facility and the waste is safely transported and disposed of the grounds of the health facilities through appropriate waste management services		0	1
5.7	Radioactive waste must be deposited in lead containers appropriate to the level of radiation that corresponds to them, duly identified and separated from the rest of the waste, in accordance with the regulations of the Ministry of Energy and Mines.		0	1

**Section 6: Cleaning and Administration**



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Criteria #	Criteria	Notes and Definitions	Score	
			No	Yes
6.1	There are cleaning protocols and clearly describe the cleaning procedures for various wards and areas of the facility		0	2
6.2	The facility has a written cleaning schedule or calendar that is updated and obviously used daily		0	2
6.3	The ward/room has a written summary of the roles and responsibilities of the staff for cleaning		0	2
6.4	Patient beds are visibly clean		0	2
6.5	The 0.5% chlorine solution is available for use in the installation generated at the time of the visit		0	3
6.6	Cleaning materials (mops, detergent, bleach, etc.) are available		0	2
6.7	There are sufficient laundry services available to wash and disinfect soiled linens		0	2
6.8	The cleaning staff report having received training on cleaning procedures in the last 24 months.		0	2
6.9	The facility staff report having received training on cleaning procedures in the last 24 months		0	2
6.10	Signs or posters are placed on walls or doors reminding health workers to wash their hands at critical times		0	2



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Criteria #	Criteria	Notes and Definitions	Score	
			No	Yes
6.11	The health care facility has an annual improvement / management plan that includes WASH and/or infection prevention action items		0	3

Total Score		points
Total Points Possible		100 points
Official Certification Status (Circle Corresponding Status Level)		70-79 points (Bronze)
		80-89 points (Silver)
		90-100 points (Gold)

**Recommendations for sharing annual certification results:** It is important that certification results are shared with health care facility staff and the public in order to maintain collective accountability and provide data for more informed decision-making. Suggested communication platforms for sharing annual certification results include radio, television, social media, Ministry of Health webpages and/or annual certificates that are posted in the health care facility.