



Sanitation for Million Project (S4M)

Improved Inclusive WASH
Services in Public Institutions
in Distt Peshawar

Training Report on Infection Prevention Control (IPC) for HCF Staff

Capacity building of Healthcare Facilities Staff

Report Developed by Dr. Israr Ahmed

1. INTRODUCTION

Sanitation for Million (S4M) Project is being implemented by SABAWON in District Peshawar with the financial support of German organization GIZ and BMZ with the aim to contribute in creating enabling environment through policy and advocacy, provision of physical infrastructure in the targeted schools and healthcare facilities as well as linkages development and capacity building of health and education line departments. The project has been implemented in 30 selected Health Care Facilities and 30 selected schools of District Peshawar. The technical and management capacity building of health and education departments, elected representatives and other relevant service providers and stakeholders through formal training, workshops and accompaniment support is a vital component of the project.

The consultant Dr. Israr Ahmed was selected to design and conduct the series of 05 training sessions with focus on Infection, Prevention & Control (IPC)/Covid-19, Health Care Waste Management and surface disinfection. The training sessions were conducted from March 07 to 11, 2022 at Royal Guest House University Town Peshawar. The participants of training included Medical Doctors, Senior Medical Officers (SMTs), Medical Technicians (MTs), Lady Health Workers (LHWs), Lady Health Visitors (LHVs) and Lady Health Supervisors (LHSs) etc. Participants of the training sessions shared that they learnt practical knowledge and gained new skills regarding surfaces disinfection and safe disposal of Healthcare waste particularly biomedical waste disposal. They also learnt about routine environmental cleaning practices in health-care setting.

2. Training Overview:

| Title Training Sessions: | Health care Staff Capacity building on IPC/Covid-19 |
|------------------------------|---|
| Duration: | One Day each |
| Project Title: | Sanitation for Million (S4M) Project (Improved Inclusive WASH Services in Public Institutions in Distt Peshawar) |
| Donor Agency: | GIZ-BMZ Project |
| Implementing Agency: | SABAWON |
| Dates of Sessions conducted: | 1 st Training Session was held on March 07, 2022 2 nd Training Session was held on March 08, 2022 3 rd Training Session was held on March 09, 2022 4 th Training Session was held on March 10, 2022 5 th Training Session was held on March 11, 2022 |
| Venue: | Royal Guest House University Town Peshawar |
| Monitoring | Iftikhar Hussain, MEAL Director SABAWON Irfan Khan, Project Manager SABAWON Intikhab Alam, Admin & Finance Officer SABAWON Dr. Tariq, Health Officer SABAWON |

| Resource Person: | Dr. Israr Ahmed, HID Professional/Researcher/Trainer |
|-----------------------|---|
| Focal Person | Irfan Khan, Project Manager SABAWON |
| Logistic Support | Intikhab Alam, Admin & Finance SABAWON |
| Management support | Asif Khan, SO SABAWON |
| | • Rizwan, SO SABAWON |
| | Abdullah Shah, SO SABAWON |
| | • Gul Baz, SO SABAWON |
| | Asif Khan Khalil, Assistant SABAWON |
| Participants: | Healthcare Staff of the targeted 30 Facilities of Distt Peshawar: |
| | Medical Doctors |
| | Senior Medical Officers (SMTs) |
| | Medical Technicians (MTs) |
| | Lady Health Workers (LHWs) |
| | Lady Health Visitors (LHVs) |
| | Lady Health Supervisors (LHSs) etc. |
| List of Participants: | Attached as Annex-1 |
| Picture Gallery: | Attached as Annex-2 |

3. PROCEEDING

The training was formally started with the recitation of the Holy Quran by one of the participants. Project Manager Irfan Khan Khalil welcomed the participants in the training. Participants and the resource person introduced themselves one by one. Expectations and fears of the participants from the training session were noted down and norms were set for the training proceedings. A summary of the participant expectations and fears is given as under:

Expectations:

- To gain information and understanding regarding Coronavirus pandemic.
- To gain understanding on Infection, Prevention and Control (IPC) regarding Covid-19.
- To gain understanding on surfaces disinfection process and use of various chemicals.
- Focus was given on practical understanding rather than rhetorical approach.
- The targeted health facilities will be benefited from chemical disinfection.

Fears:

- Who will be ultimately responsible for the provision of equipment
- Use of chemicals (Bleaching Powder / NADCC) on different surfaces

4. TRAINING OBJECTIVE

The overall objective of the training sessions are to build the working capacity and knowledge of the targeted frontline Healthcare facilities' staff on World Health Organizations (WHO) Guidelines on Infection, Prevention and Control (IPC) in the context of COVID 19.

5. TRAINING MATERIAL / CONTENTS

5.1 Covid-19 Virus

The Participants of training were oriented with the history of Coronavirus. The resource person explained that the coronavirus was first originated in 1960's and till now has contributed to three major global pandemics namely SARS (2002-2003), MERS (2012-2013) and COVID-19. It was explained that coronavirus is a respiratory disease. It is transmitted mainly through close

physical contact and respiratory droplets. Its common signs and symptoms include fever, coughing, shortness of breath, nasal congestion, sore throat, or diarrhea. Precautionary measures including stay in well-ventilated single rooms, avoid crowded spaces, use of mask etc should be ensured to avoid its spread. Participants were guided to cover their mouth with a tissue or with flexed elbow while coughing or Sneezing, immediately throw the tissue in a covered dustbin and to avoid close contact with people, especially those who are coughing, sneezing and have a fever.

5.2 Cleaning / Disinfection

Participants were sensitized about the survival rate of Covid-19 virus on different surfaces like wood. Steel, plastics, paper, and glass. Principles of environmental cleaning in context of Covid-19. They were guided that always move from cleanest area to dirtiest area while cleaning, frequency of cleaning by housekeeping in patient care areas should be increased. It was highly recommended to damp dusting and wet mopping to minimize dispersal of dust. It was shared that avoid direct spray of disinfectants, always wash reusable cleaning supplies, disinfect them and allow them to dry after use. Cleaning supplies for isolation should be kept in and only use in the isolation area.

Participants were oriented that what is environmental cleaning in healthcare settings and what are the items or the surfaces it include i-e furniture and other fixed items inside and outside of patient rooms and bathrooms, After that participants were guided on what are high touched surfaces and how often these surfaces or equipment needs to be cleaned, they were guided that as per WHO standards it is highly recommended to clean the high touch surfaces twice a day or if twice a day is not possible then they should ensure cleaning / disinfection at least once a day. They were sensitized on the two and three bucket cleaning systems. In healthcare setting sensitive sites such as OPD, patients/visitors waiting areas, public toilets, labor room, bedsheets, medical equipment should always be disinfected with different concentrations of chemical disinfectants.

5.3 Solid Waste Management in Healthcare Facilities

Participants were oriented on disposal of general and bio-medical solid waste in Healthcare facilities. It was explained that it is needed to ensure and sustain hygiene in the health care facilities by protecting patients & staff and safeguarding the environment to prevent the spread of infection. It includes planning & procurement, availability of tools, protective gear and machinery, staff training, record keeping and regular monitoring. Participants were sensitized on the types of waste including general solid waste and bio-medical solid waste (solid, liquid, organic, recyclable and Hazardous waste etc). Classification of waste, its transportation and final disposal. Understanding of different colours of dustbins such as yellow, red, green etc.

Participants were oriented on the different waste collection procedures. It was shared that always collect hazardous and non-hazardous waste separately. It is recommended to collect the waste on daily basis, depending upon waste volume. It needs to be ensured that waste containers should not be overfilled. Ensure that containers should be covered using thick cloth or plastic sheet weighted at each corner to prevent spillage. It is recommended to wear protective clothing while collecting and disposing waste particularly bio-medical waste. Follow basic personal hygiene practice after waste handling.

5.4 **Waste Transportation** (on-Site Transportation in smaller health facilities)

Participants were sensitized that hazardous and nonhazardous waste should be transported separately to avoid mixing. Use transporting tools (waste/garbage trolleys, wheel borrows etc.). Ensure the use of most direct route to the storage point or disposal area. The transporting tools should be leak proof. Avoid overfilling. The transporting tools should be covered and locked.

5.5 Off-Site Transportation

Participants were oriented that Waste transporting vehicles (trollies) should be used when disposal facility is not available onsite or permanent municipal landfill is available. Ensure that vehicle should be easy to load. Vehicle must be properly covered to avoid leakage. Always adopt the most direct route pre-decided to the disposal site. Occupational safety measure need to be adopted while transporting waste.

5.6 Waste Storage

Participants were sensitized that storage point must be located on-site. Ensure that it secure from unauthorized access, to prevent scavengers, animals, birds, rodents or insects etc. If the healthcare facilities are large, make small storage points for easy excess, or central storage point in smaller health centers.

If disposal point is on site, then the storage facility must be as close as possible to the final disposal point. Storage facility should be large enough to accommodate all the waste. The storage facility must not be located near the food storage or food preparation sites. Participants were guided that disposal area with the following considerations should be identified:

- Located in the premises of health facility.
- Away from general access (properly fenced) and water points.
- Located on down wind direction.
- Easily accessible for sanitary staff and waste transporting tools.
- Enough space available for possible extension.
- Incinerators, dumping pit, sanitary landfills availability.

6. RECOMMENDATIONS

A summary of the recommendations is given as under which came under discussion during the training session:

- The healthcare facilities may be provided with a pack of garbage bags for collection of
 waste, particularly bio-medical solid waste, so that the waste should be safely stored in
 dustbins and safely transported to respective solid waste collection/disposal points.
 Through the healthcare facilities have been provided with three-colored waste bins by
 UNICEF.
- 2. The solid waste collection points in health care facilities are open and can pose a potential health risk by scavenging activities of birds, animals, rodents and humans etc.

it is recommended that folding steel covering lid may be installed, so that when the waste is disposed off, it will be kept safely out of the reach of any unauthorized person or creature. In this manner the stored waste will not be spread by any air or water born medium also.

- 3. It is recommended that a proper mechanism should be developed in consultation with health department or respective healthcare facilities to ensure the daily record and maintenance of disinfection process to ensure the sustainability of the process and make the effective use of the provided disinfectant items on a regular basis to keep the environment clean for patients and health care staff.
- 4. The health care facilities need to adopt effective and sustainable mechanism for solid waste disposal particularly bio-medical solid waste management. This can be done in consultation with health department and coordination with relevant line departments.
- 5. The capacity of the healthcare facilities need to be enhanced to cope with pandemic situations, particularly in the context of current Covid-19 and dengue outbreaks.

Annex-1

Photo Gallery







