

The Facility Evaluation Tool for WASH in Institutions (FACET)

Sustainable Development Goals 4 and 6 include the monitoring of institutional WASH services in schools and health care facilities. Developed by Sandec and Terre des hommes, the Facility Evaluation Tool (FACET) supports this monitoring task and is an easy to use mobile data collection tool. Samuel Renggli¹, Vasco Schelbert¹, John Brogan²

Introduction

Adequate WASH delivery services in health care facilities (HCFs) and schools are essential to maintain the health of patients and students and to enable the sustainable provision of health and education services. Without the provision of gender-sensitive basic WASH infrastructure and services, the risk of infection and/or disease transmission in HCFs is drastically increased. In schools, inadequate WASH facilities pose a public health hazard to (vulnerable) children and teaching staff, while female students might not be able to attend classes because adequate WASH equipment is missing, preventing them from basic menstrual hygiene management [1].

Including WASH parameters for HCFs and schools in the SDGs monitoring framework will allow for the development of a more precise picture of the global WASH situation [2]. In order to support the monitoring of the SDGs, FACET was jointly developed by Terre des hommes, Eawag and CartONG with support from the UNICEF/WHO Joint Monitoring Programme for Water Supply, Sanitation and Hygiene (JMP). FACET is based on globally recognised indicators developed by the Joint Monitoring Programme (JMP) for WASH HCF Global Task Team for monitoring [3].

FACET

FACET offers state-of-the-art on- and offline mobile data collection in Kobo Toolbox [4],

an open source platform. Surveys for HCF and school contexts are available two ways: a core version (short assessment of the JMP core indicators) and an expanded version (extended assessment including additional indicators). The four service areas monitored are: water supply, sanitation, hand hygiene and healthcare waste management for outpatient areas. A section for delivery rooms is planned following the issuance of new JMP indicators. The surveys (available in English and French) can be downloaded on any mobile device using the Android operating system.

The FACET manual (available in English and French) explains the monitoring process and the content of the FACET tool, and provides informative insights from field experience, material for enumerators and survey trainings, as well as report templates (Figure 1). Customised on- and offline tools allow for data analysis and visualisation (dashboards). All products are available for free and can be downloaded from the FACET homepage [5].

Field-application of FACET

FACET is a tool intended to be used by field practitioners for project development, monitoring and evaluation and to be complementary to participatory implementation methods, such as WASH FIT (WHO/UNICEF) and others [6]. Based on the results, more thorough assessments can be done that include corrective action planning. The results of core

questions are displayed immediately on the mobile device at the end of the survey and can be shared. Structured along the JMP ladder approach, FACET encourages institutions to climb the service monitoring ladder step by step.

Testing of FACET was undertaken in seven different countries in Africa and Asia and it has proven its applicability. Presented below are the results from an assessment of 123 HCFs in Bangladesh that was part of a Terre des hommes project (Figure 1).

Conclusion

FACET offers an easy to use complete survey package for mobile monitoring of WASH delivery services in HCFs and schools. The immediate display of results increases the transparency and credibility of the monitoring process. A key factor for success is the proper training of the enumerators who collect the data. To foster accountability and enhance progress, the data can be shared with regional authorities or the responsible persons for WASH in the respective institutions. The survey and reporting process help to set priority areas for investment and advocacy.

- [1] World Health Organization and UNICEF (2015): Water, sanitation and hygiene in health care facilities: status in low and middle-income countries and way forward. Geneva.
- [2] <https://washdata.org/monitoring>
- [3] <https://www.washinhcf.org/home/>
- [4] www.kobotoolbox.org/
- [5] Eawag and Terre des hommes (2018): Facility Evaluation Tool WASH in Institutions (FACET). Zürich.
- [6] World Health Organization. (2017): Water and Sanitation for Health Facility Improvement Tool (WASH FIT): a practical guide for improving quality of care through water, sanitation and hygiene in health care facilities.

REGION 1									
	WATER		SANITATION		HAND HYGIENE		WASTE MGMT		
Basic	40	83 %	1	2 %	10	21 %	0	0 %	
Limited	5	10 %	40	83 %	35	73 %	35	73 %	
No service	3	6 %	7	15 %	3	6 %	13	27 %	

REGION 2									
	WATER		SANITATION		HAND HYGIENE		WASTE MGMT		
Basic	40	53 %	0	0 %	8	11 %	0	0 %	
Limited	19	25 %	60	80 %	58	77 %	62	83 %	
No service	16	21 %	15	20 %	9	12 %	13	17 %	

Figure 1: Sample graphic of core indicator results comparison for health care facilities (FACET Analyser).

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