



WEBINAR SESSION 6 (FEB 2019) – RECOMMENDATIONS FOR ACTION

Understanding the Cost of WASH in Health Care Facilities: Where Do We Start? ‘

These recommendations provide suggestions for addressing gaps in WASH in HCF costing research. These actions were derived from applying a 10-step costing model to a study in Malawi and a cost analysis conducted in 117 HCF in 5 districts in western Kenya that were a part of a WASH program.

1. Increase stakeholder engagement.
 - Involve staff from diverse roles when collecting costing data.
 - Establish systems to support sustained use and maintenance of WASH interventions, cleaning staff, waste disposal, long-term interventions, etc.
2. Document costing process steps.
 - Identify data sources, collect costs and non-costs data, aggregate and assess findings, and iterate the process.
3. Triangulate results across data sources where available.
4. Document known gaps and limitations in costing analysis.
5. Contextualize findings with non-costs indicators.
6. Prospectively document lifecycle costs.
7. Be proactive about good record keeping.
8. Identify, adapt and/or develop cost data collection tools.
 - Pilot, revise data collection tools that are not designed for WASH in HCF.
 - Disseminate WASH in HCF cost data collection tools.
9. Share, review and disseminate WASH in HCF costing findings.
 - Share findings internally, to external stakeholders and sector-wide.
10. Work with health systems to ensure that commodities form part of the budget.