

COVID-19 WASH Preparedness and Response Checklist



UNICEF Regional Office, WASH has developed this checklist to help UNICEF Country Offices, Government and implementing partners have an overview of the preparedness and planning requirements for an effective response to the COVID-19 outbreak. The checklists are intended to be used as a guide to ensure that all the orientation provided under many different guidance notes are simplified and used appropriately.

Terms and definitions are included in the Annex of the checklist.

Background

COVID-19 is a viral infection caused by a coronavirus that has not been previously identified in humans. It is a novel (new) coronavirus first identified in Wuhan, China. Since its discovery, its geographic distribution continues to evolve. The provision of safe water, sanitation and hygienic conditions plays an essential role in protecting human health during all infectious disease outbreaks, including the current COVID-19 outbreak. According to the WHO-UNICEF technical brief on “Water, sanitation, hygiene and waste management” for COVID-19:

- **Frequent and proper hand hygiene is one of the most important prevention measures for COVID-19.** WASH practitioners should work to enable more frequent and regular hand hygiene practices through improved facilities and proven behavior change techniques including avoidance of touching faces.
- **Existing WHO-UNICEF guidance on safe management of drinking-water and sanitation apply to COVID-19.** Extra measures are not needed.
- **Many co-benefits will be realized by safely managing water and sanitation services and applying good hygiene practices.** Such efforts will prevent many other infectious diseases, which cause millions of deaths each year.

This checklist is intended to trigger the following outcomes:

- As part of the national COVID-19 **coordination mechanism**, UNICEF WASH programming is fully coordinated with the Ministry of Health/Ministry of Education/World Health Organization (WHO) and other actors, enabling Country Offices' WASH sections to prioritize and integrate WASH interventions.
- Key essential **WASH supplies** requirements are identified and mapped at regional and country levels, and made available for immediate use.
- **WASH in Schools** program is coordinated with the Education Sector to ensure its integration into safe school protocols.
- In coordination with Health Sector, capacities are increased to assure continuity of **WASH services and improve IPC measures in Health Care Facilities (HCFs)**, as well as support increased water and sanitation demand from increased number of patients.
- **Hygiene promotion** activities targeting schools, HCFs, households and public places are well aligned with RCCE/C4D strategies, are specific and aim to reduce the exposure to the disease at home and in communities.
- Local **water and sanitation authorities** and utilities are supported to ensure business continuity and quality of water and sanitation services to avoid deterioration or collapse of essential public services as a secondary effect of outbreak.
- **Private sector** actors are called upon to ensure smooth and affordable supply of essential hygiene services.

CHECKLIST 1

COVID Preparedness

Ensure that UNICEF Country Offices have emergency preparedness measures in place to support affected, at-risk, low-capacity and fragile countries to secure WASH services in (1) health care facilities and sustain availability and access to WASH services in (2) schools and (3) communities.

Description

WASH preparedness activities should be coordinated with the Ministries of Health and Education, UN agencies, local water and sanitation authorities and key sector partners. While **coordination mechanisms** may vary from country to country, it is important to maintain a collaborative approach with partners in countries to ensure consistency in geographical targeting, messaging and approaches for responding to COVID-19 preparedness. When required by the government and when the cluster system is activated, it is crucial to provide a leadership role in **WASH cluster/sector coordination**.

In line with MOH priorities and strategies, whether the disease is already active or not, it is recommended to conduct a **rapid assessment** or review of WASH data in (1) health care facilities, (2) schools, (3) communities, (4) hygiene knowledge gaps, as well as (5) contingency planning to ensure continuity of WASH services.

Preparedness also requires a quick assessment of existing **WASH Human Resources capacity, financial resources, exiting programmes, available IEC materials and supplies**. Contingency partnerships can be prepared (and activated in case of an existing standby partnership), both with the government, UN Agencies, NGOs, CSOs and the private sector.

KEY STEPS: PREPAREDNESS

Sector Leadership and Coordination

- ✓ Advocate with lead sector ministry/departments to activate WASH cluster/sector and regularize cluster/sector meetings to develop **WASH sector preparedness and response plan**.
- ✓ Undertake a quick **mapping** of “Who is doing what and where in the sector” and assess sector capacity in terms of human resources, financial resources, supplies, etc.
- ✓ Identify key sector gaps and develop **action plan** for addressing the gaps.

Schools and Health Care Facilities

- ✓ Undertake a **rapid assessment** to determine schools, HCFs and communities without WASH services and those in the areas with larger populations which could undermine their safety.
- ✓ Prepare a **plan for providing, improving or upgrading WASH services** in schools, HCFs and communities through repair/rehabilitation of water and sanitation facilities.

Hygiene Promotion

- ✓ Map existing national channels, campaigns and promotion activities for **hygiene and hand washing with soap** (e.g. WASH in schools, MHM in schools, WASH in health care facilities programs, nutrition/ education promotion, etc.).
- ✓ Develop a simple system to **monitor functionality of services** by ensuring availability of water and chlorine, handwashing systems with water and soap/ alcohol-based hand sanitizers, treated water, toilets cleanliness and thorough disinfection, fecal sludge management where required, medical and solid waste regular disposal and safe elimination.
- ✓ **Contingency planning** to ensure continuity of WASH services. In line with OPSCEN guidance, develop contingency plan for the sector and phase response.

RECOMMENDED SUPPLIES

- ✓ WASH and dignity kits
- ✓ Collapsible water tanks
- ✓ Soap
- ✓ Hand sanitizer
- ✓ Chlorine (HTH 60-70%) and chlorine tester
- ✓ Commercial disinfectant (e.g. Clorox)
- ✓ Disinfection materials (mop, buckets, etc.)
- ✓ Masks
- ✓ Drinking water dispensers
- ✓ Personal Protection Equipment (PPE)
- ✓ IEC materials

PARTNERSHIPS

- ✓ WASH and dignity kits
- ✓ Health, Education and C4D sections of UNICEF
- ✓ Ministry of Health, Education and Environment
- ✓ UN Agencies, NGO/CSOs
- ✓ Local partners
- ✓ Private sector

LINKS TO REFERENCE DOCUMENTS

[WASH in school assessment tool](#)

[Contingency planning guidance issued by OPSEN](#)

[3W mapping templates](#)

[WASH in health care facilities assessment tool](#)

[Hygiene promotion gap analysis](#)

CHECKLIST 2

WASH Supplies

Ensure that UNICEF Country Offices have adequate supplies for COVID-19 response in health care facilities, schools and nationwide hygiene promotion campaigns with appropriate human and financial resources.

Description

Supply planning requires a quick assessment of existing (1) WASH Human Resources capacity, (2) financial resources, (3) available IEC materials and (4) supplies.

KEY STEPS

WASH Human Resources Capacity

- ✓ Assess the capacity at the Country Offices and within partners if there are Hygiene Promotion Specialists, Emergency Water Supply Specialists and Sanitation Specialists. If not, start adapting the attached terms of references (TORs) for local recruitment.

Financial Resources

- ✓ There is a regional and global attempt to improve resources mobilization. The format for proposal development is in the reference document.

Available IEC Materials

- ✓ A list of IEC materials widely used are available and can be adapted.

Supplies

- ✓ Map sector partner's WASH supplies capacity and plan and identify gaps.
- ✓ Procure and preposition critical hygiene and prevention supplies like soap, hand-sanitizer, chlorine (HTH 60-70%), commercial disinfectant (e.g. Clorox) and disinfection materials (mop, buckets etc.), masks, drinking water dispensers, and personal protection equipment.
- ✓ Develop long term agreements (LTAs) and sleeping agreements with partners to improve water and sanitation services.
- ✓ Recruit designers to improve hygiene promotion materials.

RECOMMENDED SUPPLIES

- ✓ WASH and dignity kits
- ✓ Collapsible water tanks
- ✓ Soap
- ✓ Hand sanitizer
- ✓ Chlorine (HTH 60-70%) and chlorine tester
- ✓ Commercial disinfectant (e.g. Clorox)
- ✓ Disinfection materials (mop, buckets, etc.)
- ✓ Masks
- ✓ Drinking water dispensers
- ✓ Personal Protection Equipment (PPE)
- ✓ IEC materials

PARTNERSHIPS

- ✓ Health, Education and C4D sections
- ✓ Ministry of Health, Education and Environment
- ✓ UN Agencies, NGO/CSOs
- ✓ Local partners
- ✓ Private sector

LINKS TO REFERENCE DOCUMENTS

[Terms of references to recruit local consultant](#)

[Terms of references to recruit IEC designer](#)

[Terms of references for WASH Specialist services](#)

[List of essential supplies with costs for local adaptation](#)

CHECKLIST 3

COVID-19 Response: WASH in Schools

Ensure that UNICEF Country Offices have the necessary technical and managerial capacity, available supplies and financial resources to provide, improve or upgrade WASH services in selected schools through repair/rehabilitation of water, sanitation and hygiene services.

Description

The availability of water remains crucial to support personal hygiene including handwashing with water and soap as a key preventive measure. Water should also be available for regular cleaning and disinfection purposes, laundry (when applicable) and other activities.

Sanitation systems help prevent the spread of many diseases, provide clean and healthier surroundings in schools. While COVID-19 is mostly transmitted through the respiratory route, ensuring the availability of safely managed sanitation systems such as improved latrines or toilets connected to a septic tank or sewer lines can significantly contribute to reduce the risk of transmission and spread of disease.

Environmental cleaning is a key infection IPC measure for preventing the transmission of COVID-19. Surfaces in schools should be disinfected. There are many disinfectants, that are active against COVID-19. For schools, we recommend the use of commercial detergent with water, to remove dirt, followed by commercial chlorine-based disinfection.

KEY STEPS

- ✓ Provide **safe and adequate running water** in schools, especially at points of use, and for environmental cleaning and personal hygiene (MHM, hand washing, etc.).
- ✓ **Treatment of available water points.** A number of measures can be taken to improve water safety starting with collection and safe storage of treated water in regularly cleaned and covered containers.
- ✓ Provide **water stations** with pedal-operated taps when possible or water dispensers with sensors to minimize hand contact and reduce the risk of infection.
- ✓ **Collection, storage, transport, treatment** and final **disposal** of feces and wastewater in schools.

- ✓ Ensure that students and teachers have access to an **adequate number of toilets** (for girls and boys) that are clean and hygienic.
- ✓ Ensure availability of **cleaning and disinfection supplies** (chlorine, detergents, mop, buckets).
- ✓ **Clean and disinfect** frequently touched objects using a regular household cleaning spray or wipe.
- ✓ Implement **hygiene promotion** activities building on existing community engagement activities (e.g. hygiene, health, education, nutrition promotion) and in coordination with C4D.
- ✓ Ensure that school authorities and teachers have **adequate capacity, knowledge and skills** to understand and address the risks and impact of poor WASH services in schools on children and community at large.

RECOMMENDED SUPPLIES

- ✓ WASH and dignity kits
- ✓ Collapsible water tanks
- ✓ Soap
- ✓ Hand sanitizer
- ✓ Chlorine (HTH 60-70%) and chlorine tester
- ✓ Commercial disinfectant (e.g. Clorox)
- ✓ Disinfection materials (mop, buckets, etc.)
- ✓ Masks
- ✓ Drinking water dispensers
- ✓ Personal Protection Equipment (PPE)
- ✓ IEC materials

PARTNERSHIPS

- ✓ Education and C4D sections
- ✓ Ministry of Education
- ✓ UN Agencies, NGO/CSOs
- ✓ Local partners
- ✓ Private sector

REFERENCE DOCUMENTS

[Joint UNICEF-WHO-IFRC key messages and actions in schools](#)

[Joint WHO-UNICEF WASH technical brief](#)

[WHO technical guidance pages on IPC](#)

[COVID-19: WASH in schools](#)

[CDC guidance for cleaning and disinfection in schools](#)

[Technical note on residual chlorine in water](#)

[CDC handwashing guidance](#)

CHECKLIST 4

COVID-19 Response: WASH in Health Care Facilities

Ensure that UNICEF Country Offices have necessary technical and managerial capacity, available supplies and financial resources to support affected, at-risk, low-capacity and fragile countries to secure WASH services in Health Care Facilities (HCFs).

Description

Water is required to support personal hygiene including hand washing with soap as a key preventive measure. Water should also be available for regular cleaning and disinfection purposes, laundry and other activities while sufficient quantity and quality of drinking water remains crucial.

Sanitation systems help prevent the spread of many diseases, provide clean and healthier surroundings in health care facilities. While COVID-19 is mostly transmitted through the respiratory route, ensuring the availability of safely managed sanitation systems such as improved latrines or toilets connected to a septic tank or sewer lines can significantly contribute to reduce the risk of transmission and spread of disease.

Hand hygiene and safe behaviors are key IPC measures for preventing the transmission of COVID-19 in HCFs. Hand hygiene must be performed at every point and within moments after touching surfaces in HCFs, touching doors handles, elevator doors and buttons, after removing masks; before eating; and after coughing or sneezing. There is a need to have hand sanitizers or handwashing facilities positioned in every critical HCF room (entrance, screening and observation, care, near toilets, exit, etc.).

Environmental cleaning is a key IPC measure for preventing the transmission of COVID-19. Surfaces in HCFs should be disinfected. There are many disinfectants that are active against COVID-19. For HCFs, we recommend the use of commercial detergent with water, to remove dirt, followed by commercial chlorine-based disinfection.

KEY STEPS

- ✓ Ensure that **safe and adequate running water** is available in HCFs, especially at points of care, and for environmental cleaning and personal hygiene and decontamination of equipment and surfaces.

- ✓ Ensure the water is **safely treated**. A number of measures can be taken to improve water safety starting with collection and safe storage of treated water in regularly cleaned and covered containers.
- ✓ When possible, provide **water stations** with pedal-operated taps and devices or water dispensers with sensors to minimize hand contact and reduce the risk of infection.
- ✓ Ensure the **safe collection, storage, transport, treatment** and final **disposal** of feces and wastewater in HCFs.
- ✓ Ensure the availability of **clean and adequate toilets or latrines**, dedicated for suspected and confirmed cases of COVID- 19, complying with local MoH standards.
- ✓ Ensure the availability of **disinfection supplies** (chlorine, lime materials, detergents) and equipment (backpack and hand sprayers, incinerators and autoclaves).
- ✓ Support and advise on the proper use of toilets to **avoid droplets spread**.
- ✓ Implement **hygiene promotion** activities building on existing community engagement activities (e.g. hygiene, health, education, nutrition promotion) and in coordination with C4D.
- ✓ Ensure that health care authorities and workers have **adequate knowledge and capacity** to manage hospital wastes in line with global guidance and protocols.
- ✓ Ensure that health care authorities and workers have **adequate capacity, knowledge and skills** to understand and address the risks and impact of poor WASH services in the HCF on children and community at large.

RECOMMENDED SUPPLIES

- ✓ WASH and dignity kits
- ✓ Collapsible water tanks
- ✓ Soap
- ✓ Hand sanitizer
- ✓ Chlorine (HTH 60-70%) and chlorine tester
- ✓ Commercial disinfectant (e.g. Clorox)
- ✓ Disinfection materials (mop, buckets, etc.)
- ✓ Masks
- ✓ Drinking water dispensers
- ✓ Personal Protection Equipment (PPE)
- ✓ IEC materials

PARTNERSHIPS

- ✓ Health and C4D sections
- ✓ Ministry of Health
- ✓ UN Agencies, NGO/CSOs
- ✓ Local partners
- ✓ Private sector

LINKS TO REFERENCE DOCUMENTS

[Joint WHO-UNICEF WASH technical brief](#)

[WHO technical guidance pages on IPC](#)

[COVID-19: WASH in health care facilities](#)

[Protocols for the safe collection and disposal of health care facilities contaminated sewage \(adapted from Liberia Ebola response, 2015\)](#)

[CDC protocol on personal protective equipment \(PPE\)](#)

[Technical note on residual chlorine in water](#)

[ICRC guidance on medical waste management](#)

CHECKLIST 5

COVID-19 Response: Hygiene Promotion and Handwashing with Soap

Ensure that UNICEF Country Offices have necessary technical and managerial capacity, available supplies and financial resources to support affected, at-risk, low-capacity and fragile countries to carry out national, district and community level hygiene promotion and hand washing campaigns.

Description

UNICEF's hygiene promotion and hand washing activities varies by country and depends on the (1) technical capacity of UNICEF C4D and WASH colleagues; (2) strength of government systems, especially related to the existence of national channels, campaigns and promotion activities (e.g. national health/nutrition/education promotion). In any scenario, UNICEF WASH staff should provide technical inputs on the design, implementation and monitoring of national hygiene promotion activities to ensure the behaviors promoted are adequate in addressing hygiene needs.

Hand hygiene and safe behaviors are key IPC measures for preventing the transmission of COVID-19 in communities. Handwashing with soap, when done correctly, is the most effective method of preventing the transmission of many respiratory diseases including the novel coronavirus disease. Hand washing with soap is the most straightforward skill that people should have to avoid infectious disease transmission.

Hand hygiene must be performed at every point and within moments after touching surfaces in HCFs, touching doors handles, elevator doors and buttons, after removing masks, before eating, and after coughing or sneezing. There is a need to have hand sanitizers or handwashing facilities positioned in every critical room.

KEY STEPS

- ✓ **Map existing national channels, campaigns and promotion activities for hygiene** (e.g. WASH in schools, MHM in schools, WASH in HCFs, nutrition/education promotion, etc.).
- ✓ **Explore opportunities to mobilize social media influencers and platforms** to disseminate key hygiene messages

- ✓ **Review internal C4D and WASH (hygiene) capacity** and provide technical inputs in the planning and implementation of hygiene promotion and HWWS activities.
- ✓ Implement **hygiene promotion activities** building on existing community engagement activities (e.g. hygiene, health, education, nutrition promotion) and in coordination with C4D.
- ✓ Build/update **handwashing with soap stations in school and public places** and ensure that at those places, the WASH washing pre-requisites of water and soap are available.
- ✓ **Review the capacity of implementing partners and private sector** in delivering hygiene supplies and behavior change communication. Identify their reach and target groups and determine whether any significant gaps exist in their reach.
- ✓ **Identify existing government or cluster coordination mechanisms** related to hygiene promotion in public health emergencies and potential gaps, both at national, sub-national, regional and local levels.
- ✓ **Collect existing hygiene promotion materials and tools** tailored to specific country context (culturally appropriate, in local language, etc.) and align these materials with COVID-19 needs.
- ✓ **Review existing country-specific data** (e.g. MICS, DHS, KAP) on relevant hygiene practices and behavioral drivers of these practices.
- ✓ **Review lessons learnt** from past hygiene promotion and hand washing activities including in emergency context.

RECOMMENDED SUPPLIES

- ✓ WASH and dignity kits
- ✓ Collapsible water tanks
- ✓ Soap
- ✓ Hand sanitizer
- ✓ Chlorine (HTH 60-70%) and chlorine tester
- ✓ Commercial disinfectant (e.g. Clorox)
- ✓ Disinfection materials (mop, buckets, etc.)
- ✓ Masks
- ✓ Drinking water dispensers
- ✓ Personal Protection Equipment (PPE)
- ✓ IEC materials

PARTNERSHIPS

- ✓ Health, Education, Nutrition and C4D sections
- ✓ UN Agencies, NGO/CSOs
- ✓ Local partners
- ✓ Private sector

LINKS TO REFERENCE DOCUMENTS

[Joint WHO-UNICEF WASH technical brief](#)

[WHO technical guidance pages on IPC](#)

[COVID-19: UNICEF hygiene programming](#)

[Behavior change communication in emergencies: A toolkit](#)

[Handwashing promotion monitoring and evaluation module \(pages 81 to 110\)](#)

[WHO guidance on hand hygiene](#)

[Lessons learnt from hygiene promotion activities during 2013-2014 Ebola outbreak](#)

CHECKLIST 6

Humanitarian Performance Monitoring

Ensure that UNICEF Country Offices have necessary technical and managerial capacity and available resources to carry out monitoring and evaluation activities.

Description

Humanitarian Performance Monitoring (HPM) will monitor and track progress against targets in support to the COVID-19 Emergency Response Plan in the East Asia and Pacific region.

KEY STEPS

- ✓ Develop an integrated **monitoring and evaluation plan** in coordination with partners, including data collection and analysis to inform program decision-making.
- ✓ **Strengthen UNICEF and partners capacity** to monitor the response.
- ✓ **Monitor the secondary impacts** of COVID-19 on WASH services such as disruption of markets, shortages of essential WASH supply etc.

PARTNERSHIPS

- ✓ Health, Education, Nutrition and C4D sections
- ✓ UN Agencies, NGO/CSOs

LINKS TO REFERENCE DOCUMENTS

[Joint WHO-UNICEF WASH technical brief](#)

[WHO technical guidance pages on IPC](#)

[UNICEF COVID-19 program guidance](#)

[UNICEF secondary impact questionnaire](#)

[HPM guide](#)

Definition of Terms

COVID-19: A mild to severe respiratory illness that is caused by a coronavirus (Severe acute respiratory syndrome coronavirus 2), transmitted primarily by contact with infectious material (such as respiratory droplets), and is characterized especially by fever, cough, and shortness of breath and may progress to pneumonia and respiratory failure.

HPM: Humanitarian Performance Monitoring

Hygiene Promotion: planned, systematic attempt to enable people to take action to prevent or mitigate water, sanitation, and hygiene related diseases and provides a practical way to facilitate community participation and accountability in emergencies.

IPC: Infection Prevention and Control (IPC) is a scientific approach and practical solution designed to prevent harm caused by infection to patients and health workers. It is grounded in infectious diseases, epidemiology, social science and health system strengthening. IPC occupies a unique position in the field of patient safety and quality universal health coverage since it is relevant to health workers and patients at every single health-care encounter.

WASH: Water, sanitation and hygiene

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