

# Infection prevention and control (IPC) and water, hygiene and sanitation (WASH) in Health emergency readiness for response operation capabilities “IPC & WASH HERO CAPE”

**Mahmoud HAMOUDA**

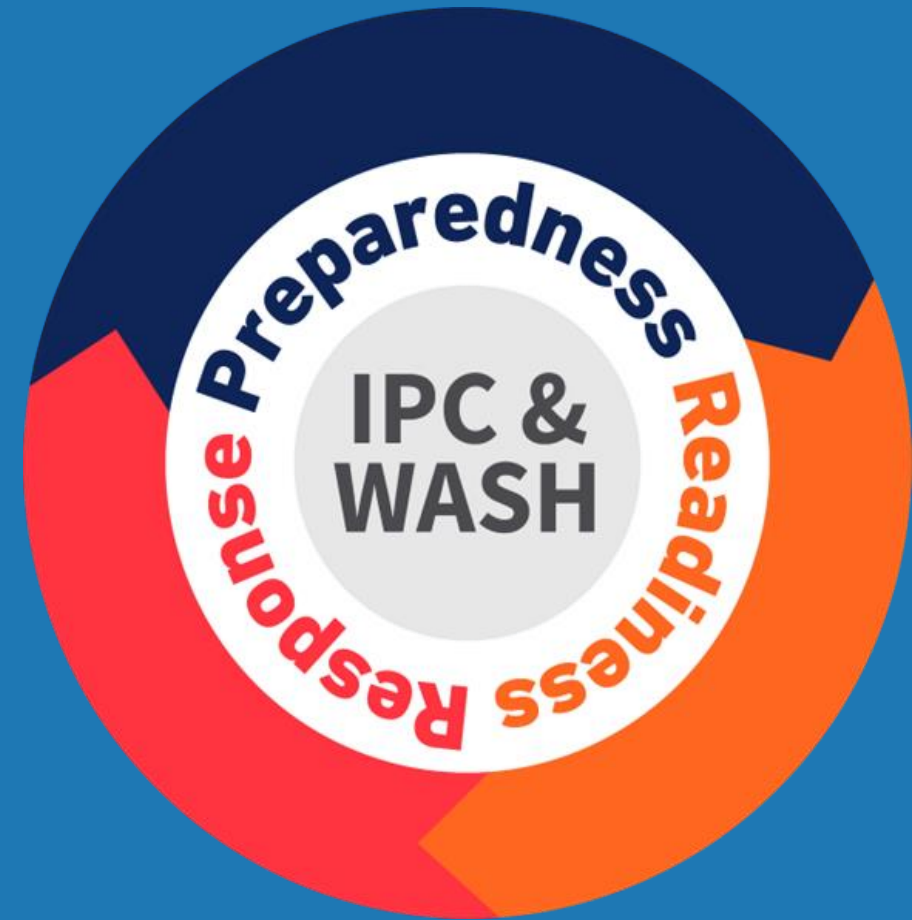
Health system officer

WHE IPC & WASH team

WHO Health Emergencies Programme

Geneva, Switzerland

28th August 2025



# What is the IPC & WASH-HERO CAPE Checklist?



Derived from the WHO-Framework and Toolkit for infection prevention and control in outbreak preparedness, readiness and response at the national level



The IPC & WASH-HERO CAPE checklist is a self-assessment tool



Helps health officials evaluate key functionalities of IPC and WASH readiness capabilities at national and sub-national levels



Aims to strengthen IPC & WASH operational readiness for response to public health threats



**FRAMEWORK AND TOOLKIT  
FOR INFECTION PREVENTION  
AND CONTROL IN  
OUTBREAK PREPAREDNESS,  
READINESS AND RESPONSE  
AT THE NATIONAL LEVEL**



# Why to use the IPC & WASH-HERO CAPE Checklist?



## General Objective:

Evaluate and **enhance** IPC and WASH readiness for imminent or recurring public health risks.



## Specific Objectives:

Assess existing readiness capabilities.

Identify gaps for operational readiness.

Develop improvement plans and monitor progress.

## Target Users of the Checklist

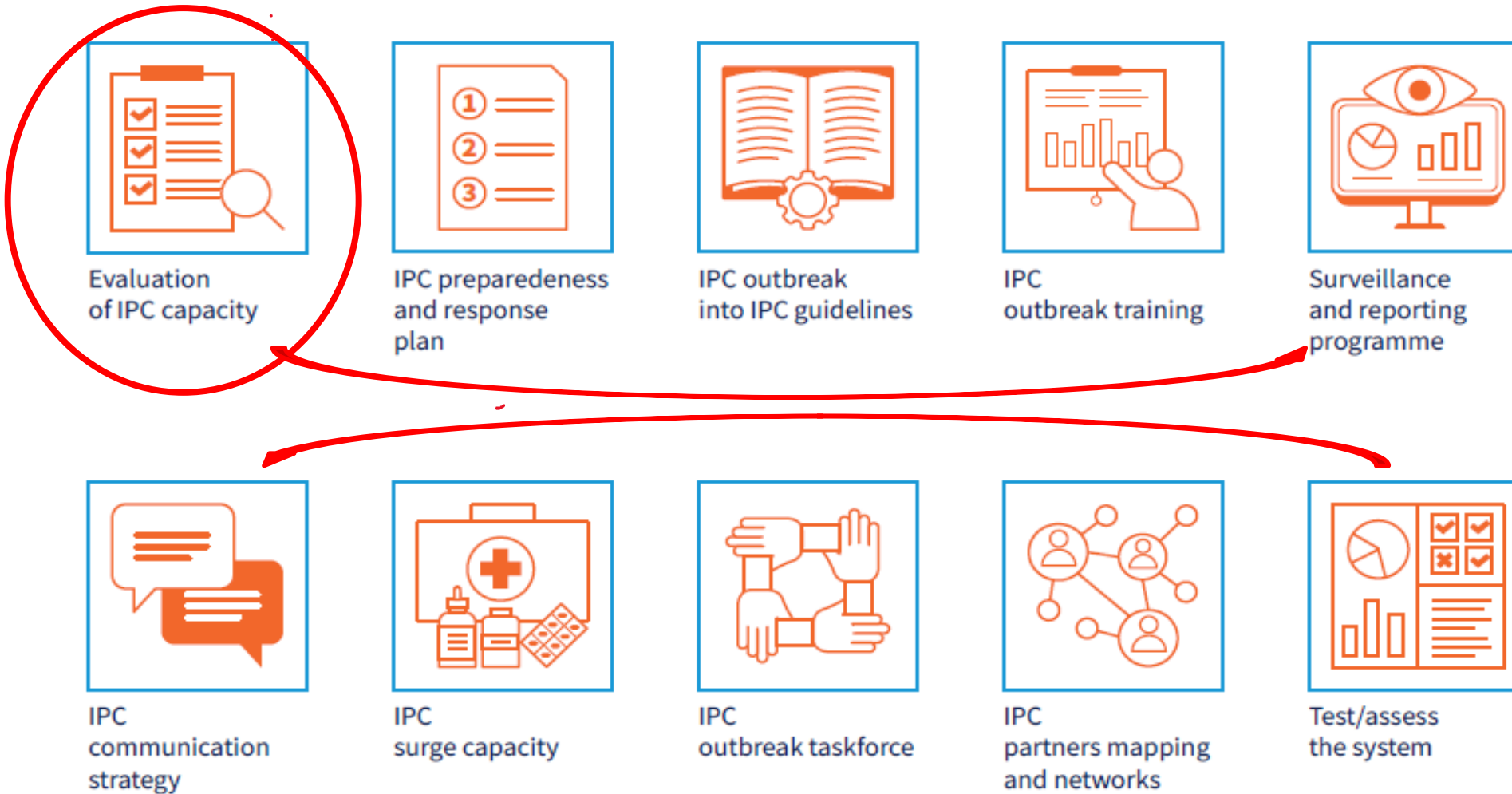
Governments, national and subnational authorities, e.g., ministries of health.

National-level CDC and emergency operations centers.

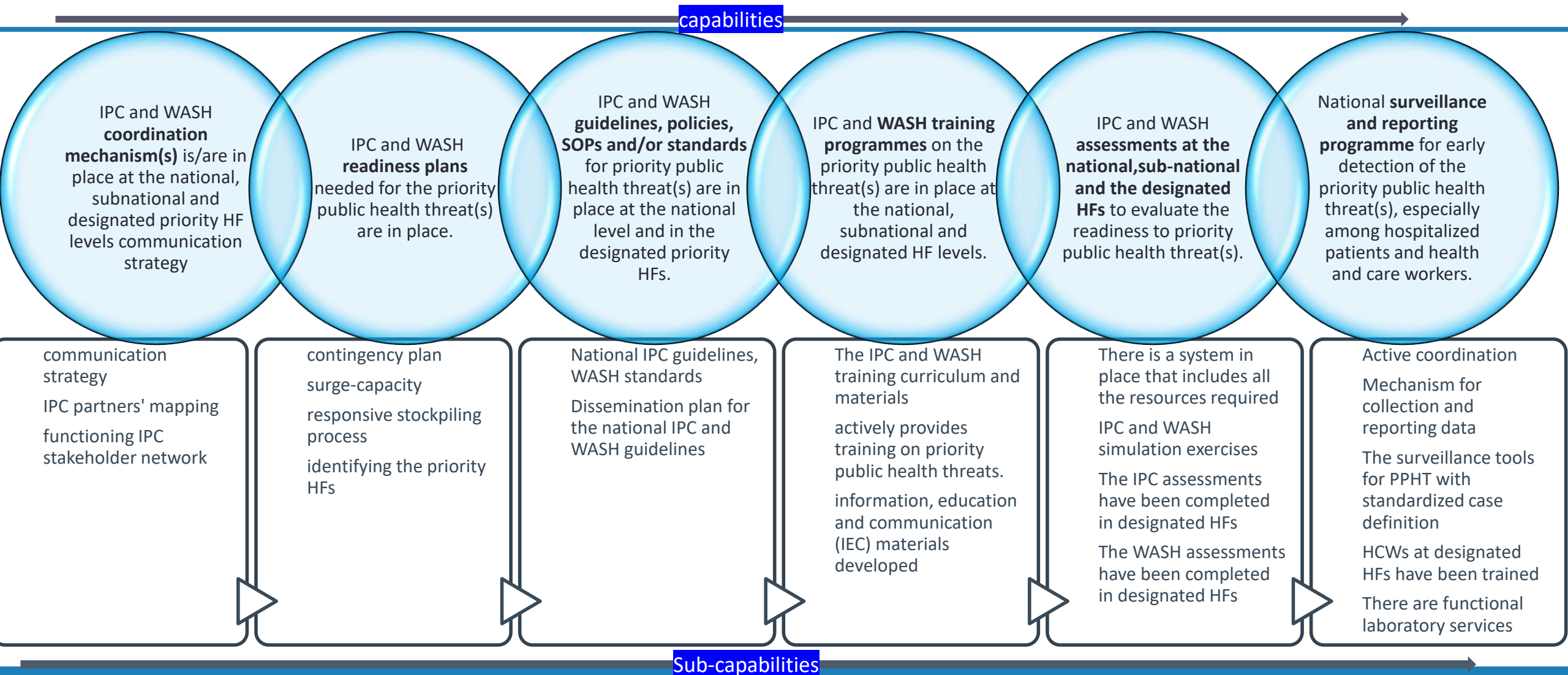
IPC and WASH focal points, public health professionals.

For joint assessments involving national teams, WHO, and other stakeholders.

# What are 10 key IPC activities at national, sub-national and HCF level?



# Overview of the IPC & WASH-HERO CAPE Checklist



# Scoring system

## TRAFFIC LIGHT SCORING:

### Not ready

Score "1" (0-20%)

The sub-capabilities are not in place (e.g. no/few updated guides, protocols or strategies/tools).

### Minimally ready

Score "2" (>20-40%)

The sub-capabilities are under development (e.g. documentation work has been updated but no resources are in place for implementation, e.g. no trainings/SimEx have been conducted, no financial resources and workforces are ready to be mobilized).

### Partially Ready

Score "3" (>40-60%)

The sub-capabilities are at national level only, with some limitations meeting the demands (updated documentations/protocols, tools, plans, SOPs and resources are in place).

### Mostly Ready

Score "4" (>60-80%)

The sub-capabilities are in place at national and subnational levels and/or among some of the designated health facilities\* (but need external technical, workforce and financial support).

### Completely Ready

Score "5" (>80-100%)

The sub-capabilities are in place at national and subnational levels and/or among all of the designated HFs (no need for external support; the country is able to manage all the resources and technical capabilities by internal capacity only).

**\* except for the assessment of the sub-capabilities 5.3 and 5.4**

- The numerator: is the number of health facilities that have achieved a target score  $\geq 80\%$ , except in cases where the IPC minimum requirement target is 100%.
- The denominator: is the number of the designated health facilities assigned by the country.

**\*some of the designated HFs means any number below the assigned number of the designated HFs**

# How to use the IPC & WASH-HERO CAPE Checklist

General assessment  
of IPC & WASH  
readiness  
capabilities

Disease specific  
when identified  
priority public  
health threats

## Identify

- Identify Priority Health Facilities
- Assign HFs proportionate to the overall number of facilities.

## Assess

- Assess Readiness at Designated HFs
- Use appropriate assessment tools (e.g., IPC, WASH FIT).

## Evaluate

- Evaluate Country Capabilities
- Score each capability and sub-capability using a traffic light system.

## Develop

- Develop Improvement Plan
- Identify actions and responsibilities, submit for decision-making.

## Conduct

- Conduct Follow-up Assessments
- Recommended every 6 months or when there are significant changes.

## Integrate

- Integrate with National Plans
- Use in conjunction with national strategic preparedness and response plans.



# Screenshot from the checklist



Infection prevention and control (IPC) & water, sanitation and hygiene (WASH) in health emergency readiness for response operations (HERO) capabilities checklist "IPC & WASH HERO CAPE"





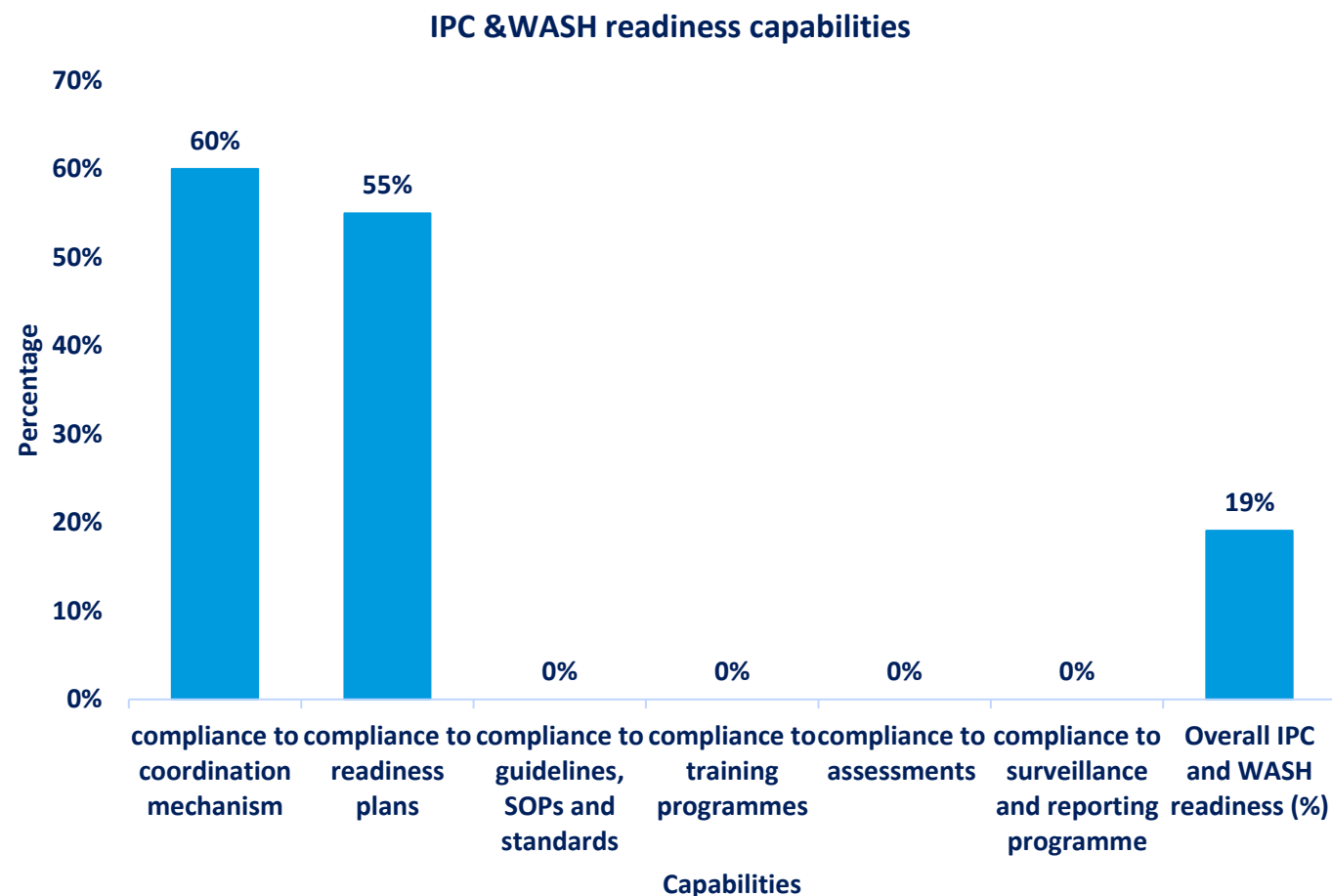
Risk-assessment			
The priority threat(s) identified in the country		Insert Threat(s) identified	
Others, please specify			
Number of the designated health facilities (HFs) assigned to handle the public health priority threats		Insert number here	
Number of the HFs that achieved the target score using appropriate IPC assessment tool		Insert number here	
Percentage of the designated HFs IPC-ready to deal with the priority health threat		#VALUE!	
Number of the HFs that achieved the target score using appropriate WASH assessment tool		Insert number here	
Percentage of the designated HFs WASH-ready to deal with the priority health threat		#VALUE!	
List of the designated facilities	Name	Type	Region

Number	Capabilities	CAPE score	Comments\Notes	verifiers
1	IPC and WASH <b>coordination mechanism(s)</b> is/are in place at the national, subnational and designated priority HF levels.	0%		
1.1	Sub-capabilities <p>There is a coordination mechanism in place that provides oversight of the IPC and WASH strategy, technical and operational actions and activities for the priority public health threats (e.g. national IPC committee, IPC task force or technical working groups (TWGs)) supported (e.g. co-chaired) by WHO and including all relevant stakeholders and implementing partners, such as national/international NGOs and health-care facilities' leaders.</p> <p>There is a communication strategy in place that has been adapted from and integrated with the broader, existing one, to disseminate IPC- and WASH-related information on the priority public health threat or outbreak to the stakeholders and various groups (HFs, health and care workers, community and public social media) using available platforms (social media, official website, WhatsApp groups, contact list emails, hotlines, etc.) in coordination with partners in risk communication and community engagement (RCCE).</p> <p>There is an IPC partners' mapping mechanism in place using the "5 Ws" to prepare and coordinate the IPC readiness activities for the priority public health threat(s).</p> <p>There is a functioning IPC stakeholder network in place at the national and subnational levels and among the designated HFs to handle priority public health threat(s). For example, IPC national focal points (FPs), quality and patient safety FPs, IPC leaders at the health facility level, hospital administrators and key decision-makers at the national and subnational levels for readiness and response to the identified priority public health threat(s).</p>			<ul style="list-style-type: none"> <li>■ copy of the IPC coordination mechanism TORs</li> <li>■ copy of minutes from coordination meeting(s)</li> <li>■ copy of the partners list (who, what, where, when and why)</li> <li>■ copy of the meeting minutes, if any</li> <li>■ link for the platform</li> <li>■ copy of provided material</li> <li>■ any evidence the dissemination</li> <li>■ copy of the IPC stakeholders list</li> <li>■ copy of the meeting minutes, if any</li> </ul>
1.2				
1.3				
1.4				
2	IPC and WASH <b>readiness plans</b> needed for the priority public health threat(s) are in place.	0%		
2.1	Sub-capabilities <p>There is a national contingency plan for specific priority public health threat(s) that includes IPC and WASH readiness activities with an allocated budget.</p> <p>There is a surge-capacity plan for the priority threat with allocated resources for IPC and WASH activities/interventions, including staffing, infrastructure and supplies.</p> <p>There is a responsive stockpiling process in place to ensure adequate IPC and WASH supplies and equipment.</p> <p>There is a mechanism in place to identify the priority HFs ensuring the coordination, delivery of resources (e.g. supplies) and an isolation-referral system in the event of a surge.</p>			<ul style="list-style-type: none"> <li>■ copy of the plan(s)</li> <li>■ list of the designated priority HFs</li> <li>■ copy of the referral system</li> </ul>
2.2				
2.3				
2.4				



Number		Capabilities	CAPE score	Comments\Notes	verifiers
1		IPC and WASH <b>coordination mechanism(s)</b> is/are in place at the national, subnational and designated priority HF levels.	60%		
1.1	Sub-capabilities	There is a coordination mechanism in place that provides oversight of the IPC and WASH strategy, technical and operational actions and activities for the priority public health threats (e.g. national IPC committee, IPC task force or technical working groups (TWGs)) supported (e.g. co-chaired) by WHO and including all relevant stakeholders and implementing partners, such as national/international NGOs and health-care facilities' leaders.	3		<ul style="list-style-type: none"><li>■ copy of the IPC coordination mechanism TORs</li><li>■ copy of minutes from coordination meeting(s)</li><li>■ copy of the partners list (who, what, where, when and why)</li><li>■ copy of the meeting minutes, if any</li><li>■ link for the platform</li><li>■ copy of provided material</li><li>■ any evidence the dissemination</li><li>■ copy of the IPC stakeholders list</li><li>■ copy of the meeting minutes, if any</li></ul>
1.2		There is a communication strategy in place that has been adapted from and integrated with the broader, existing one, to disseminate IPC- and WASH-related information on the priority public health threat or outbreak to the stakeholders and various groups (HFs, health and care workers, community and public social media) using available platforms (social media, official website, WhatsApp groups, contact list emails, hotlines, etc.) in coordination with partners in risk communication and community engagement (RCCE).	5		
1.3		There is an IPC partners' mapping mechanism in place using the "5 Ws" to prepare and coordinate the IPC readiness activities for the priority public health threat(s).	1		
1.4		There is a functioning IPC stakeholder network in place at the national and subnational levels and among the designated HFs to handle priority public health threat(s). For example, IPC national focal points (FPs), quality and patient safety FPs, IPC leaders at the health facility level, hospital administrators and key decision-makers at the national and subnational levels for readiness and response to the identified priority public health threat(s).	3		
2		IPC and WASH <b>readiness plans</b> needed for the priority public health threat(s) are in place.	55%		
2.1	Sub-capabilities	There is a national contingency plan for specific priority public health threat(s) that includes IPC and WASH readiness activities with an allocated budget.	2		<ul style="list-style-type: none"><li>■ copy of the plan(s)</li><li>■ list of the designated priority HFs</li><li>■ copy of the referral system</li></ul>
2.2		There is a surge-capacity plan for the priority threat with allocated resources for IPC and WASH activities/interventions, including staffing, infrastructure and supplies.	3		
2.3		There is a responsive stockpiling process in place to ensure adequate IPC and WASH supplies and equipment.	4		
2.4		There is a mechanism in place to identify the priority HFs ensuring the coordination, delivery of resources (e.g. supplies) and an isolation-referral system in the event of a surge.	2		
3		IPC and WASH <b>guidelines, policies, SOPs and/or standards</b> for priority public health threat(s) are in place at the national level and in the	88%		

<i>Score summary</i>	
Total not ready	1
Total minimally ready	1
Total partially ready	3
Total mostly ready	1
Total completely ready	1
compliance to coordination mechanism	60%
compliance to readiness plans	55%
compliance to guidelines, SOPs and standards	0%
compliance to training programmes	0%
compliance to assessments	0%
compliance to surveillance and reporting programme	0%
<b>Overall IPC and WASH readiness (%)</b>	<b>19%</b>
Overall interpretation	Not Ready
Assessment completion	32%



# IPC & WASH HERO CAPE ON WHO PARTNERS PLATFORM

---



**World Health  
Organization**

# Value of the IPC & WASH-HERO CAPE Checklist on WHO partners platform

Supporting countries to scale up core capabilities to be ready to respond with partners



**Identify gaps with tools driven by the latest guidance**



**Prioritize actions to address evolving risks dynamically**



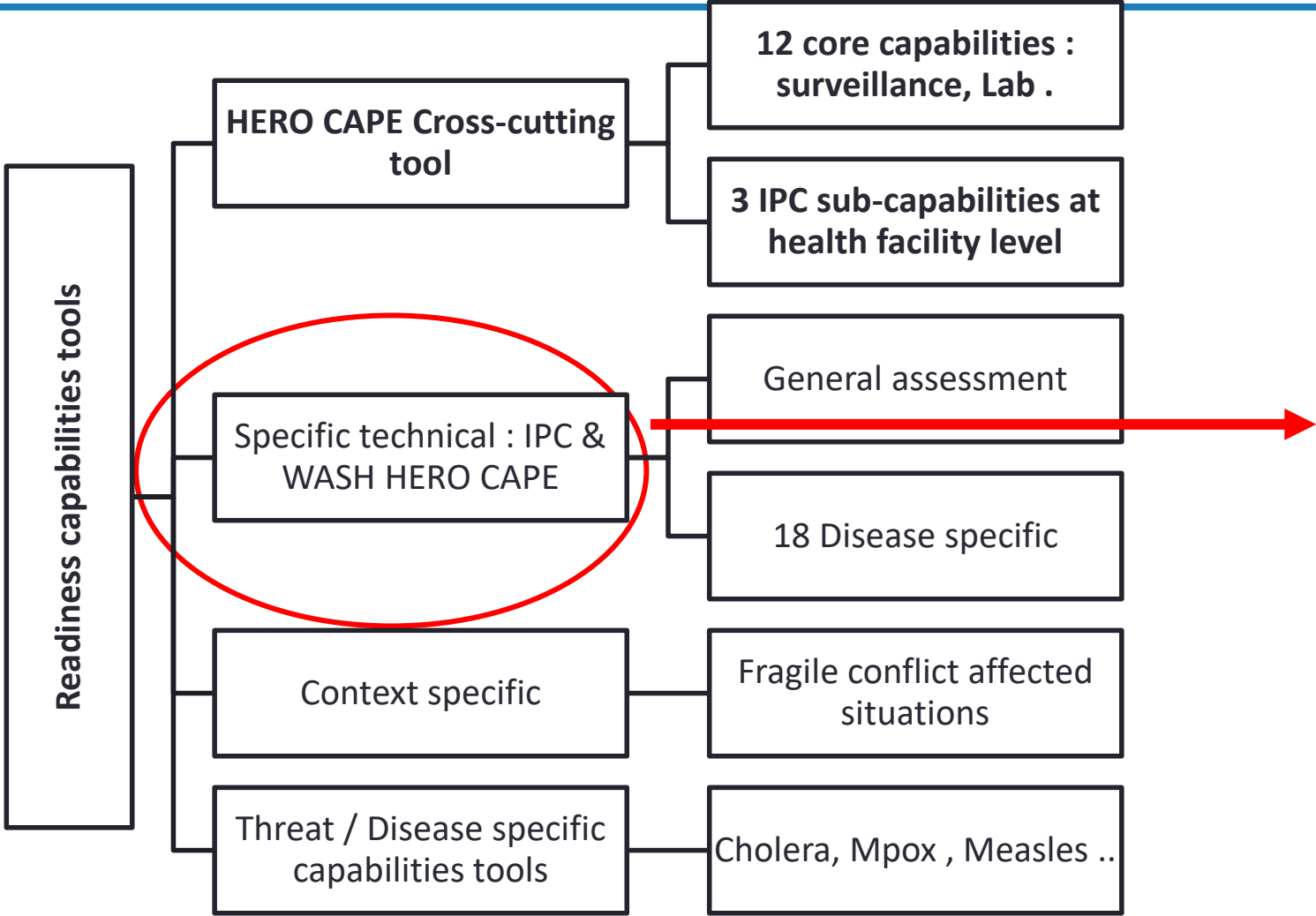
**Engage partners and donors by sharing plans and needs**



**Be ready for emergency response**



Readiness capabilities (CAPE) tools: a growing Family on partners platform





**Supporting countries  
to scale up core  
capabilities to be  
ready to respond**





# Planning tools for scaling up capabilities

## Action Planning Tools



### HERO CAPE Tool

Digital tools supporting countries to identify, implement and track their risks, core capabilities, readiness gaps and anticipatory actions needed to be ready to respond to high priority or imminent threats.

↓ Offline CAPE Tool

Online CAPE Tool



### NIP and Funding Proposal Tools

HEPR templates to support the development of national investment plans (NIPs) and funding proposals.



### WHO Country Office ERF Readiness Checklist

Essential readiness guide for all WHO Country Offices to support emergency response.



### IPC & WASH HERO CAPE checklist

Supports countries in assessing six core IPC and WASH capabilities and tracking actions to strengthen readiness for priority public health threats and outbreak response.

↓ Offline Checklist

Online Checklist

# IPC & WASH HERO checklist on WHO partners platform

A graphic for the IPC & WASH HERO CAPE checklist. It features a photograph of a group of people in a meeting room on the left. To the right of the photo, the title "IPC & WASH HERO CAPE checklist" is displayed in white text on a dark blue background. Below the title, a paragraph describes the checklist's purpose: "Supports countries in assessing six core IPC and WASH capabilities and tracking actions to strengthen readiness for priority public health threats and outbreak response." At the bottom, there are two buttons: "Offline Checklist" with a download icon and "Online Checklist". Two yellow arrows point to these buttons from the right side of the graphic.

**IPC & WASH HERO CAPE checklist**

Supports countries in assessing six core IPC and WASH capabilities and tracking actions to strengthen readiness for priority public health threats and outbreak response.

↓ Offline Checklist      Online Checklist

You can also download the offline Excel version of the checklist from the same link: [IPC & WASH HERO CAPE](#)

To activate the disease specific checklists please visit this link: [activate the disease specific checklists](#).

[IPC and WASH CAPE training videos](#)



## Workspace

This workspace provides core capabilities, gaps and anticipatory actions for any potential high-priority threats that will help you develop your contingency plan. It also provides the status of core capabilities to ensure timely and effective response.

### HERO CAPE Tools (living documents)

[CAPE tool user feedback form](#)

#### HERO CAPE – Cross Cutting

[Open capability action matrix](#)

Population at risk 1000

Assessments



Plans

37 Actions

Updated on 05/26/2025

#### HERO CAPE – Dengue & Chikungunya

[Open capability action matrix](#)

Population at risk 11170

Assessments



Plans

10 Actions

Updated on 05/20/2025

#### IPC & Wash - HERO-CAPE General Assessment

[Open capability action matrix](#)

Population at risk N/A

Assessments



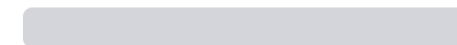
Updated on 06/13/2025

#### IPC & Wash - HERO-CAPE Avian flu

[Open capability action matrix](#)

Population at risk 0

Assessments



Afghanistan ▾ National ▾

## ← Readiness assessment and planning

Export ↴

✳️ IPC &amp; Wash - HER ▾

📋 Identify gaps &amp; actions

📅 Prioritize for scale up

Filter ▾



✳️ Coordination mechanism(s)

← Capability: 1. IPC and WASH coordination mechanism(s) is/are in place at the national, subnational and designated priority HF levels.

> Subcapability: 1.1. There is a coordination mechanism in place that provides oversight of the IPC and WASH strategy, technical and operational actions and activities for the priority public health threats (e.g. national IPC committee, IPC task force or technical working groups (TWGs)) supported (e.g. co-chaired) by WHO and including all relevant stakeholders and implementing partners, such as national/international NGOs and health-care facilities' leaders.



3 Partially ready ▾



✓ Subcapability: 1.2. There is a communication strategy in place that has been adapted from and integrated with the broader, existing one, to disseminate IPC- and WASH-related information on the priority public health threat or outbreak to the stakeholders and various groups (HFs, health and care workers, community and public social media) using available platforms (social media, official website, WhatsApp groups, contact list emails, hotlines, etc.) in coordination with partners in risk communication and community engagement (RCCE).



Select readiness status ▴



5 Completely ready

4 Mostly ready

3 Partially ready

2 Minimally ready

1 Not ready

> Subcapability: 1.3. There is an IPC partners' mapping mechanism in place using the "5 Ws" to prepare and coordinate the IPC readiness activities for the priority public health threat(s).



> Subcapability: 1.4. There is a functioning IPC stakeholder network in place at the national and subnational levels and among the designated HFs to handle priority public health threat(s). For example, IPC national focal points (FPs), quality and patient safety FPs, IPC leaders at the health facility level, hospital administrators and key decision makers at the national and subnational levels for readiness and response to the identified priority public



Tools &amp; Resources 🗃️

Publish 📄



Afghanistan ▾ National ▾

## ← Readiness assessment and planning

Export ↴

\* IPC &amp; Wash - HER ▾

📋 Identify gaps &amp; actions

🔄 Prioritize for scale up

Filter ▾

✚ Coordination mechanism(s)

← Capability: 1. IPC and WASH coordination mechanism(s)

> Subcapability: 1.1. There is a coordination mechanism and activities for the priority public health threats (chaired) by WHO and including all relevant stakeholders.

✓ Subcapability: 1.2. There is a communication strategy for IPC- and WASH-related information on the priority public health threats (e.g., through health workers, community and public social media) using etc.) in coordination with partners in risk communities.

> Subcapability: 1.3. There is an IPC partners' mapping mechanism in place using the "5 Ws" to prepare and coordinate the IPC readiness activities for the priority public health threat(s).

> Subcapability: 1.4. There is a functioning IPC stakeholder network in place at the national and subnational levels and among the designated HFs to handle priority public health threat(s). For example, IPC national focal points (FPs), quality and patient safety FPs, IPC leaders at the health facility level, hospital administrators and key decision makers at the national and subnational levels for readiness and response to the identified priority public health threat(s).

Tools &amp; Resources 🗶

## 📋 Publish



Publish 18.06

## Permission setting

- ☒ This document should be available to all Partners Platform users
- ☐ This document should be available to designated regional and country focal points/penholders
- ☐ This document should be available to designated country focal points/penholders

Cancel

Publish 📋



3 Partially ready ▾



Select readiness status ▾



Add custom action +



Select readiness status ▾






Select readiness status ▾



Publish 📋

Afghanistan ▾ National ▾

-  Workspace
-  Intelligence
-  How To

Open capability action matrix

## IPC & Wash - HERO-CAPE Fragile, conflict-affected and vulnerable settings

Open capability action matrix

Population at risk

0

Assessments



Updated on 05/20/2025

## Documents

Upload  ...

IPC & Wash - HERO-CAPE General Assessment

Publish 18.06

18 June 2025

 ... 



*Thank You*

---

*Any Questions ?*



**World Health  
Organization**