

# 2.5.5.5 Monitoring and evaluation

**The overall injury prevention program** is monitored at the National level, **at** the National Committee for Prevention of Injuries (NCPI). Additionally, district-level programs are monitored at quarterly and annual national NCD reviews and at district quarterly NCD review of respective districts

## National injury surveillance

**At the national level –** the 4<sup>th</sup> National injury surveillance performance review was organized by the Directorate of NCD in March 2020 at Bandaranaike International Memorial Conference Hall (BMICH), This was the 2<sup>nd</sup> time that the best performances of the hospitals were rewarded.









**At provincial level –** Two rounds of provincial injury surveillance reviews are conducted each year to review provincial, district, and hospital-level performances. Performances of the previous year and the 1<sup>st</sup> quarter of the current year in the 1<sup>st</sup> round, and performances of the first three quarters are reviewed in the 2<sup>nd</sup> round. In 2020, only the second round was completed due to Covid-19 pandemic situation-imposed restrictions in Sri Lanka; 2<sup>nd</sup> round – in November – December 2020.

**At the District level and hospital level –** District reviews are organized by relevant RDHS and hospital reviews are organized by both relevant RDHS and hospitals. The annual Injury report for 2020 was prepared based on the National injury surveillance data.





# 2.6 Special Activities of NCD prevention and control program during COVID-19 outbreak

Patients diagnosed with NCDs were found to have higher complications and mortality rate due to Covid -19. Continuing uninterrupted health services for patients with NCDs, amidst the COVID-19 pandemic was a challenge.

# 2.6.1 Ensuring a continuous supply of medicines for clinic patients with NCDs followed up in government hospitals

Non-urgent clinic visits were discouraged. A circular was sent by the Ministry of Health to issue medicines to patients with NCDs for a longer period than usual (2 months). Drugs were provided from the nearest health care institution to the patients if the clinic book was brought. Home delivering medicines through health staff (PHNO and Midwife) and non-health staff (Grama Niladhari, Development Officers, village





leaders, volunteers) was another mechanism adopted.

# • Delivery of drugs using the Department of Postal Services

Patients regularly taking treatment from government hospitals, but for whom there was no urgent need to be seen by a doctor, were delivered medicines through the Department of Postal Services so that patients do not have to visit the hospital to collect their medicines. To facilitate this process a list of contact numbers of all government hospital clinics was made available to the public via the Ministry of Health website.





#### • Pharmacy and Osusala drug delivery system

A web-based mechanism was established to get the drugs delivered to the homes of those who usually purchase drugs from the private sector. This system was established with the state and private pharmacies in collaboration with the Pharmacy Owners Association. The public could select a pharmacy through the Ministry of Health website and submit an order (in the form of an image of the most recent prescription) through a social media application (WhatsApp/Viber). Pharmacies delivered medicines to the customers for a reasonable delivery fee.

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# 2.6.2 Development of circulars/guidelines during COVID-19

Several circulars were published with regard to patient management during the COVID -19 pandemic. Namely:

- Guideline for provision of care for patients with Non-Communicable diseases (NCD) during the COVID-19 outbreak
- Operational Mechanism for home quarantining of individuals at high risk of COVID-19
- Provision of medicines for patients with Non-communicable diseases (NCDs) taking treatment from the private sector

It was identified that the patient with non-communicable diseases was not receiving adequate drugs and services during the period of the pandemic. As such the above circulars were published to ensure such treatment was received and due care was given; both to ensure that chronic diseases remained well controlled and to safeguard the susceptible NCD patient from COVID-19.

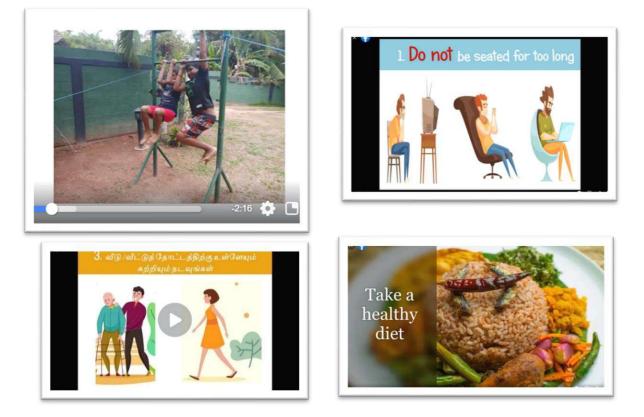
These circulars were published by the Directorate of Non-communicable diseases.

#### 2.6.3 Enhancing public awareness

Health messages, public notices were disseminated via mass and social media by means of posters and videos during the first and second wave of the COVID 19 pandemic. These included;



**Messages on health promotion** 



• Messages on how to recognize danger signs

During the COVID-19 pandemic, it was observed that the number of deaths that had risen was notably high amongst those who were elderly or having NCDs. As such it was felt that those with NCDs should be targeted to send messages regarding COVID-19 and non-communicable diseases.

