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MINISTRY OF HEALTH

General Circular No: 02 - 25 / 2013 ,

All Provincial Directors of Health Services
All Regional Directors of Health Services
All Heads of Decentralized Units
Directors of Teaching Hospitals
Director NIHS
All MSs/DMOs/MOICs
All Heads of Institutions

Guideline for the Establishment of Healthy Lifestyle Centers (HLCs) in Healthcare Institutions

Non Communicable Diseases (NCDs) are the leading cause of death (65%) in Sri Lanka, causing more death than all other causes combined and cardiovascular diseases account for 30%. Unhealthy diet, lack of physical activity, tobacco and alcohol are key underlying factors for development of overweight/obesity, high blood sugar, high blood pressure and hypercholesterolemia which are directly contributing to Non Communicable diseases (NCDs). Despite their rapid rise much of the human and social impact caused each year by NCD-related diseases and deaths could be averted through well-planned, cost effective and feasible interventions.

Considering the impact of the Non Communicable Diseases, the National Policy and Strategic Framework on Chronic NCDs which has been approved by the Cabinet of Ministers has identified nine strategies to address the burden of Chronic NCDs in Sri Lanka.

Early detection of main risk factors and health guidance are among the strategies identified within the National NCD Policy Framework to reduce disease burden of the country. Hence, a decision has been taken by the Ministry of Health to establish Healthy Lifestyle Centers

(HLCs) in healthcare institutions throughout the country for people between the ages 40 to 65 years.

Besides, conventional single risk factor approach has been known to cause suboptimal control of the cardiovascular disease and failure to address other cardiovascular risk factors. The multiple risk factor approach through risk stratification as recommended by the World Health Organization is a useful tool to identify those at risk of developing cardiovascular disease during the next 10 years, thereby motivating them to adopt lifestyle changes and prescribe pharmacological treatment when the necessity arises.

You are hereby requested to make necessary arrangements to establish Healthy Lifestyle Centers in possible healthcare institutions in a phased out manner with at least one clinic per MOH area initially, under your administrative purview. These clinics should have facilities to provide screening and health guidance of target population. WHO ISH Risk prediction chart and Guideline for Management of NCD in Primary Health care (Ministry of Health) should be used for screening, basic treatment, referral and follow up. The Personal Health Record developed by the Ministry of Health should be used to follow up screened clients.

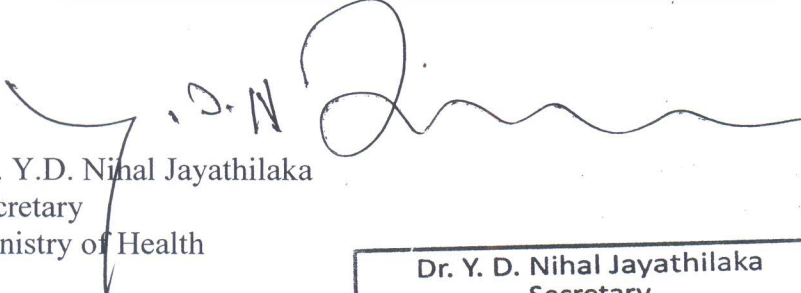
Provincial Directors of Health Services should ensure the establishment and functioning of Healthy Lifestyle Centers through Regional Director of Health Services by facilitating the Medical Officers of Non Communicable Diseases (MO NCD).

Guidelines for screening, data management and evaluation are given below.

1. Any person preferably 40 to 65 years and previously undiagnosed for NCD should be an eligible candidate for screening.
People could be recruited mainly by self-referral following community empowerment and through appointment by public health staff and health volunteers. In addition opportunistic screening and health guidance may be provided.
2. The Healthy Lifestyle Center should be conducted by MO/RMO in the primary healthcare institutions and MO/Public Health, MO/Health Promotion or any other Medical Officer in other institutions. Nursing Officer, Diabetic Nursing Officers, Health Education Nursing Officer, Health Education Officer and volunteers may provide support to carry out clinic activities.
3. Risk behaviours such as smoking, unhealthy diet, physical inactivity and use of alcohol should be assessed and intervened accordingly.

4. BMI assessment, blood pressure, fasting capillary blood sugar should be checked among previously undiagnosed persons. Total cholesterol may be checked depending on the facilities available.
5. Clinic sessions should be conducted at least once a week with the participation of at least 20 clients.
6. Screening and follow up of clients are to be carried out according to the WHO/ISH Risk Prediction Chart.
7. Treatment and follow up should be carried out according to the guidelines for Management of NCD in Primary Health care (Ministry of Health) provided.
8. Regional Director of Health Services should ensure the availability of essential drugs in all primary care institutions identified by the Ministry of Health for management of NCD patients.
9. Information management should be carried out according to the instructions given by NCD Unit, Ministry of Health (instructions are annexed).
10. Healthy Lifestyle Programme should be monitored and evaluated at District and National level.

This guideline is issued further to the guideline already issued on 15/08/2011 (My No. NCD/41/2011) by the Ministry of Health in order to enhance the management of NCDs in Primary Health care level.


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Health Information System for NCD Management (List of registers, records and returns)

1. Participant's Register in Healthy Lifestyle Center (H 1236) –

All the cages should be filled in the register. The serial number should be the sequential number / last two digits of the respective year. E.g.5/12 is the 5th person in 2012. Sequential number should start from one (1) at the beginning of the each year.

2. Follow up Register in Healthy Lifestyle Center (H 1237) –

All the cages should be filled in the register. The number column should start from one (1) at the beginning of the each year. The serial number is the number indicated in the Personal medical record which is the number given from the participant's register.

3. Summary of Daily Activities Done for Screening (H1238) –

At the end of the clinic session summary of the day's activities extracted from Participant's register should be entered in Summary of daily activities register by the MOIC/Nursing officer.

4. Monthly Report of Activities Done for NCD Screening (H1239) –

Monthly report is a register in duplicate. Monthly report should be prepared by MOIC, consolidating daily summary data at the end of the month and the copy should be sent to the District MO/NCD before the 5th of following month with MOIC's signature.

5. Monthly Summary of the Screening Activities Done in the District (H1240) –

Monthly summary is a register in triplicate. Monthly summary should be prepared by the MO/NCD, consolidating all monthly reports sent by the MOICs in HLCs in triplicate and two copies should be sent to Provincial Director (pink) and the Central NCD unit (yellow) respectively before the 25th of the following month with the RDHS's signature.

6. Quarterly Summary of the Screening Activities Done in the District (H1241) –

Quarterly summary is a register in triplicate. Quarterly summary should be prepared by the MO/NCD, consolidating Monthly summaries of the District in triplicate and two copies should be sent to Provincial Director (pink) and the Central NCD unit (yellow) respectively before the 25th of the following month duly signed by the RDHS of the area.