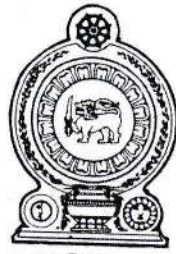


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சுகாதார மற்றும் சுதேசவையத்தியச் சேவைகள் அமைச்சு
Ministry of Healthcare and Indigenous Medical Services

Provincial Directors of Health Services,
Regional Directors of Health Services,
Heads/Directors of Health Institutions,
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Guidelines for resumption of services offered by routine Healthy Lifestyle Centers (HLCs)

Non-communicable diseases (NCDs) are the leading cause of deaths in Sri Lanka, causing more deaths than all other causes combined. The main service objective of the HLCs is to reduce the risk of NCDs of people more than 35-year old by detecting risk factors early and improving access to specialized care for those with a higher risk of cardiovascular disease (CVD). During the COVID19 epidemic, the NCDs related screening and preventive services were not accessible at the government hospitals as there were restrictions on people's movement. This guideline is issued in relation to the conduct of routine HLC clinics and the services offered by the HLCs.

Under the existing situation of COVID-19 transmission in the country, it is essential to take all relevant measures to prevent transmission of the disease at clinic settings. A careful risk assessment should be conducted in each district before resuming the conduct of routine HLCs, considering the COVID-19 exit plan of the country.

1. The function of the HLC should be resumed before 1st of July 2020. However, this decision is amenable to revision, depending on the dynamics of the COVID19 situation of the country.
2. The eligible clients should come to the HLC based on a prior appointment. The method of giving the appointment can be decided by the Head of the Institution based on available facilities e.g. hospital/clinic hotline
3. Have a maximum number of 20 clients per session
4. Have the minimum number of medical staff allocated for the HLC session.
5. All health staff should wear appropriate personal protective equipment (e.g. face masks) when working with clients. Hand washing or alcohol-based hand rub must be used before and after attending to a client.
6. It is important to adhere to the standard protective measure to minimize unnecessary exposure of staff and clients to COVID 19 infection.

- There should be a reception desk in the HLC/OPD for screening of COVID symptoms/contact history/quarantine history. Only clients without COVID symptoms/contact history will be sent to the clinic.
 - Minimize the number of visitors accompanying the client and only the client should be present at the clinic premises unless she/he needs assistance.
 - Arrange a well-ventilated area for waiting and accommodating clients to the HLCs.
 - The clinic seating should be arranged to maintain physical distance of at least 1 meter.
 - Only one client should be taken inside the examination/consultation room at a time.
 - Hand washing facilities/alcohol-based hand rub should be provided to clients in the waiting area of the HLC with clear instructions on proper hand washing to encourage patients to wash their hands before and after entering into the HLC.
 - Display health education messages on sneeze and cough etiquette, hand washing, not to share phones to clients at the reception, waiting area, HLC etc.
 - All clients should be instructed to wear face masks.
 - Provide no-touch waste containers with disposable liners at waiting area, clinic room, and restroom areas.
 - HLC premises should be cleaned/disinfected with appropriate cleaning solutions before and after each clinic session.
 - Equipment, such as Stethoscopes, Blood Pressure Apparatus, measuring tape, weight/height measuring equipment should be cleaned with appropriate cleaning methods.
7. The clients identified as no risk should be offered with the following routine services at HLC.
 - History taking and screening for main risk factors
 - BMI assessment (Height and Weight measuring)
 - Waist circumference
 - Blood Pressure
 - Vision
 - Breast Examination
 - Cardiovascular disease (CVD) risk assessment
 - Fasting blood sugar or random blood sugar
 - Total cholesterol
 - Serum creatinine (If available)
 - Lifestyle modifications and counselling
 8. Oral Examination and dental referral should not be performed until further notice.
 9. Other referrals should be done with an appointment from the referred clinic or institution.
 10. Outreach mobile HLC sessions should not be performed until further notice.
 11. Health promotive and preventive activities can be conducted at HLC premises or in the community e.g. health education sessions, exercise programmes, Yoga programmes etc. However, it is mandatory to adhere to the standard protective measure mentioned above by the staff and the clients to minimize unnecessary exposure to COVID 19 infection during these programmes as well.
 12. When conducting group activities, a maximum number of 10 people could participate per session while maintaining a 1-meter physical distance between clients.
 13. Registration and documentary work routinely performed at HLC should be continued as per the HLC guidelines.
 14. Follow up of HLC clients should be continued based on an appointment system.

Please bring the contents of these guidelines to the notice of all relevant staff at your institution/district/province and arrange to resume the conduct of routine HLCs accordingly after performing an area specific risk assessment for feasibility of implementation.


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 - All Deputy Director Generals
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 - Medical Officers of Non Communicable Diseases (MONCD)