Guideline for the establishment of Healthy Lifestyle centers in healthcare institutions

Non-communicable diseases (NCDs) are the leading cause of death in Sri Lanka, causing more death than all other causes combined. However, despite their rapid growth much of the human and social impact caused each year by NCD-related diseases and deaths and they could be averted through well-planned, cost-effective and feasible interventions.

Considering the impact of the Non Communicable Diseases, 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.

Health guidance and early detection of main risk factors 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 (HLC) in healthcare institutions throughout the country for people between the ages 35-65 years.

You are hereby requested to make necessary arrangements to establish Healthy Lifestyle Centers in possible health care institutions in a phased out manner with at least three clinics per MOH area, under your administrative purview. These clinics should have facilities to provide health guidance, screening, basic treatment, referral and follow up for the target population (Annexure I).

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 35-65 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.

The Healthy life style Center should be conducted by MO/RMO in the primary health care institutions and MO/Public Health, MO/Health Promotion or any other medical officer in other institutions. Nursing Officer, Diabetic Nursing Officer, Health Education Nursing Officer, Health Education Officer and volunteers may provide support to carry out clinic activities.

2. Risk behaviours such as smoking, unhealthy diet, physical inactivity and use of alcohol, should be assessed and intervened accordingly.

3. 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.

4. Clinic session should be conducted at least once a week with the participation of about 20 clients.

5. Screening and follow up of clients are to be carried out according to the WHO/ISH risk Reduction Chart (Annexure II).

6. Treatment and follow up should be carried out according to the guidelines provided (Annexure III)

7. Information management should be carried out according to the instruction given by NCD Unit Ministry of Health (Annexure IV).

8. Healthy Life Style Programme would be monitored and evaluated at District and National levels.

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Secretary/Ministry of Health

C:

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2. Additional Secretary (MS)/ Ministry of Health
3. Director General of Health Services
4. DDG (MS)
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