

Circular No: 2007/21.

All Provincial Secretaries of Education Provincial Directors of Education Zonal Directors of Education Principals of Schools.

School Health Promotion Programme

Various research studies and reports published in the media have revealed that the health status of Sri Lankans especially the school children is not at a satisfactory level. As schools can play a major role in overcoming this problem. This circular has been issued for launching a sustainable programme with the corporation of the Ministry of Health for the promotion of Health of the school community including the students and teachers.

The main objective of this program is to lead the school to work for the health promotion of the school community including the students and teachers by utilizing its fully organizational capacity building. Principal should take action to obtain the highest cooperation from the school community including the students and teachers for the school health promotion program.

2.0 Objectives:

In order to achieve the main objectives indicated above it is imperative that school fulfills the following requirements.

- 2.1 Formulation of health promotion school policies
- 2.2 Evaluate health promotion knowledge and skills among students.
- 2.3 Create a favorable environment within the school for health promotion

2.4 Obtain cooperation from the school community including students and teachers for school health promotion.

2.5 School health services conducted with assistance from Ministry of Health to be utilized for health promotion purposes.

3.0 Main features for which attention should be drawn for health promotion within Schools.

In planning programs for the fulfillment of the above objectives attention should be drawn to the following main features.

- 3.1 Maintain the school premises in a beautiful, safe and pleasing manner.
- 3.2 Maintain the bathrooms and urinals sufficiently and cleanly (Annex.1)

3.3 Availability of drinking water

- 3.4 Vigilance on students' health and nutritional status.
- 3.5 Maintain the canteen in a manner that contribute to the promotion of health and nutritional status.
- 3.6 Create a child friendly school environment.

4.0 Implementation and monitoring of the program.

It is essential to set up student health clubs and health promotion committees for effective the implementation of this program in schools and in institutions related to school.

4.1 School health promotion students clubs.

It is necessary to establish school health promotion student clubs for deciding the school health promotion activities and for their implementation. For this purpose it is advisable to have school health promotion students clubs separately for the Primary and Secondary divisions. All official positions and responsibilities in school health promotion student clubs should be entrusted to the students.

4.1.1 Composition

Consist of President, Vice president, Joint secretaries, Treasurer and committee members are open to any student.

4.1.2 Responsibility:

- Prepare an Annual Plan on School Health Promotion and implement it with the approval of the Health Promotion Advisory Committee

- Hold meetings monthly, review the progress in relevant activities, implement and monitor the program

- Adopt necessary procedures in accordance with the Health Promotion evaluation criteria
- Hold a school Health Day.

4.2 School Health Promotion Advisory Committee:

4.4 Provincial levels Education Health Promotion Committee:

4.4.1 Composition

Provincial Secretary of Education (Chairman)

Provincial Secretary of Health.

Provincial Director of Education.

Provincial Director of Health Service.

Regional Directors of Health Services

Deputy Director of Education in charge of Provincial Health Programs.

Deputy Director of Education in charge of Provincial Nutrition Programs.

Provincial Director of Primary Education.

Provincial Director of Special Education.

Accountant (Provincial Education Department).

District Samurdhi Managers.

4.4.2 Responsibilities.

- -Decide provincial level health promotion policies according to the national policy.
- Hold provincial meetings twice a year to evaluate and monitor activities relating to school health promotion.

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- Provide feed back of the successful implementation of school programmes.

4.5 National level Education health promotion committee

4.5.1 Composition

Secretary, Ministry of Education

Secretary, Ministry of Health

Director General, National Institute of Education

Director General (Health Services), Ministry of Health

Deputy Director General (Public Health Services) Ministry of Health

An officer nominated by the Secretary, Ministry of Nation

Building and Estates Infra Structure Development

An officer nominated by the Secretary, Media and Information

Additional Secretary, Ministry of Education (Education Quality Development)

Additional Secretary, Ministry of Education (Planning & Performance Review)

Chief Accountant, Ministry of Education

Director, Family Health Bureau

Director, Health Education Bureau

Director in charge of Health & Nutrition Programs, Ministry of Education

Director, Primary Education, Ministry of Education

Director, Non Formal and Special Education, Ministry of Education

Director, Sports and Physical Education, Ministry of Education

4.5.2. Responsibilities:

- Decide National level school health promotion policies.

4.2.1 Composition

Principal (Chairman)

Vice Principal in charge of Health Programs / Heads of divisions/Teachers concerned.

Vice Principal in charge of Primary section/ Head of division

Maximum of 03 teachers / Principal may appoint them based on number of students.

(Health & Physical Education/Life Skills/Science or other teachers)

Student representatives – Chairmen, Joint Secretaries & Treasurer of School Health Clubs

Parent representatives (Maximum 05 persons)

Public Health Inspector

Samurdhi Development Officer

External Well Wishers (Maximum 02 persons)

4.2.2. Responsibility:

- Guidance for activities in School Health Promotion Student Clubs and monitoring and feedback of programs.
- Hold quarterly meeting and focus on school health promotion.
- Obtain active community participation for health promotion programs.

4.3 Zonal level Education Health Promotion Committee:

4.3.1 Composition

Zonal Director of Education (Chairman)

Deputy Director of Education /Assistant Director of Education in charge of the Health Promotion Programs in the Zone.

Deputy Director of Education /Assistant Director of Education in charge of the Non Formal and Special Education officer in the zone.

Maternal and Child Health Medical Officers 01.

A representative nominated by the Regional Director of the Health Service.

Medical Officers of Health (In the Medical Office of Health in the Zone)

Divisional Directors of Education (in the Divisional offices in the Zone)

Accountant (Zonal Education Office)

Samurdhi Development officers 02.

Principals of schools 04

(1AB -1 school, 1C-1 school, Type 2 -1 school & Type 3-1 school)

4.3.2Responsibilities

- -Hold zonal meetings quarterly to evaluate and monitor activities relating to school health promotion.
- -Provide feed back for the successful implementation of school programmes.
- -Provide necessary assistance.
- -Submit the list of schools obtaining Golden Awards to the provincial committee and the Ministry of Education.

- Hold meetings bi-annually and evaluate and monitor activities relevant to school health promotion.
- Provide necessary feedback to implement school programs successfully.

Establishment of Committees, holding Committee meetings according to the prescribed periods are the responsibilities of Chairmen of each Committee.

5.0 Evaluation:

Health promotion programs implemented in the various schools based on objectives and main features for which attention should be drawn for health promotion within the school, should be subjected to an evaluation (Annexure 2-Evaluation report) and by the Zonal Directors of Education should take action to identify the schools which have reached the expected level and an evaluation certificate should be issued to them.

5.1 Zonal Evaluation Board.

Zonal level evaluation should be made by a Committee consisting of 03 members of the Zonal Committee which shall include the Divisional Director of Education, Health Medical Officer of Health or his representative and another officer nominated by the Zonal Director of Education. Certificates should be awarded as indicated below at Zonal level for the schools obtaining higher marks for the evaluation sheet.

For Marks between 100 – 80 Golden Award Certificate
For marks between 79-70- Silver Award Certificate
For marks between 69-70 Bronze Award Certificate
Information relating to schools obtaining over 80 marks should be submitted to the Ministry of Education and such schools will be included for a National Level evaluation.

5.2 National Evaluation Board.

This Committee shall consist of officers nominated by the Secretary, Ministry of Education, an officer nominated by the Secretary, Ministry of Health, an officer nominated by the Provincial Director of Education and an officer nominated by the Director, Provincial Health Services. A National level school health promotion evaluation certificate will be issued for the schools obtaining more than 80 marks.

It is the responsibility of all Principals, teaching staff and other officers to extend their cooperation for the successful implementation of this Program.

Ariyaratne Hewage Secretary, Ministry of Education.

Sanitary Facility

Toilets and Urinals for Pupils

No of students	Required no of toilets for girls schools	schools			
	·	Toilets	Urinals		
100	2	1	2		
200	3	1	2		
300	5	2	3		
400	6	2	4		
500	8	3	5		
600	9	3	6		
700	11	4	7		
800	12	4	8		
900	. 14	5	9		
1000	15	5	10		
1200	16	5	11.		
1400	17	6	11		
1600	18	6	12		
1800	19	6	13		

For Mix schools, identify no of toilets and urinals separately for boys and girls using above table.

Example: 300 boys and 400 girls

For boys, two toilets and three urinals.

For girls, six toilets.

Teacher Toilets

For teachers.less than 10 two toilets 10 to 40 teachers – four toilets Above 40 – five toilets

Water

Water can be supplied from water supplying schemes under Urban Councils if schools are situated in urban areas. Please check as to availability of water for the school concerned. Even if water is supplied, overhead tanks have to be constructed.

If not, well water must be made available for students.

A well has to be dug in the premises of school, Overhead tank has to be constructed and pump house with electrical water pump has to be provided to pump water from the well to the tank. From there, water must be distributed to toilets, Laboratories, Home Science, Canteen, Administrative Block etc.

If school is situated in a close proximity to the sea, well water is not drinkable due to salinity.

Annexure: School Health Promotion Program – Evaluation Report

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Criteria	Incleator	Evaluation Level	Marks Obtained	Source
1.School Health Committee	1A Committee is functioning 2Committee available. Not functioning 3. There is no Committee	2 1		Committee list of names, minutes Signature cards
2.Student Health Association	1. Association available. Student participation is 100%. Engaged in activities. Annual Plan available	8		Reports of Student Associations
	2. Association available. Student participation is only 50%. Engaged in activities. Annual Plan available	2 .		
	3 Association available. Student participation not sufficient. Activity engagement not sufficient. Annual Plan available	1		
3.Supply of First Aid	1. Procedures adopted to supply first aid for students. First aid unit available. First aid equipment available in accidents. Trained	6		First Aid equipment/ Reports relating To treatment/ Register
	teachers and students available 2. First Aid Box with facilities available. Procedures adopted. 3.No such facilities available	0 5		
4. Health Medical Examination	1. Held in last year.			

Cuitorio	Indicator	Evaluation	Marks	Source
CHICARA		Level	Obtained	
	All relevant students subjected to Health medical	ΰ		SMI Cards
	examination.	•		Log entries of
	2.SMI for students done only for 100%-50%	1	ga Turang	IVICII
	4.SMI not done annually	0		
5.Adopting procedures	1. Remedial programs done regarding identified	ω		Health problem notes
relating to problems	student problems. Action is being taken after examining them			H 456 Notes
Medical examination	2. There are remedial programs relating to	2		
	identified student problems. But they are not examined			
	3. No remedial programs for identified student			
	problems. But information available relating to			
	such identification.			
	4. Identified problems not known.	0	,	Percentage of
6.Contribution contribution	1. It is in a very high level (60% Has done at	ယ	٠	attendance for
for school health programs	least one activity in a school term,)	•		programs
	2. Less participation (30%) 3, No participation	0		
7. Community health	1, More than 3 activities done annually	3 Us	•	Notes of reports
programs conducted by the school	3. More than 1 activities done annually	20		
	4. No activities done annually	C		

Source	Sanitary facilities available relative to the number of students	Textel of mointaining	sanitary facilities	Existing water facilities and maintenance	
Marks Obtained					
Evaluation Level	9 8	0 5	o 4 70	v 4 0	0
Indicator	1. Facilities available sufficiently for use of the number of teachers compared with the number of students. 2. Sanitary facilities available but not sufficient (80%)	 3. Sanitary facilities available but not sufficient (50%) 4. No sanitary facilities available 5. Systematically planned (Constructed) 	Cleanly maintained. Water supply is continuous 2. Clean but no continuous supply of water. Water supply available 3. Clean. No water supply. 4. Cleaning system available	1. Water supply available. Maintained continuously. Economy adopted. Suitable drinking water available. 2 Water supply available. Maintenance system available. Economy not maintained. Suitable drinking water available. Maintenance system not	available. Economy not followed. Suitable drinking water available. 4Water available. Maintenance system not available. Economy not followed. Suitable drinking water available. 5. No water facilities.
Criteria	8. Provison of sanitary Facilities.	9 Sanitary facilities and	their cleanliness	10.Supply of water facilities	•

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18 Physical fitness programs	17 Students' physical Fitness	16.Providing health and Nutrition knowledge and skills	15.Minimizing Nutrition Problems
 Continuous program available. Every student is participating Continuous program available. Every student is not participating Random performance 	1.90% of students having proper physical fitness 2 90%-75% of students having proper physical fitness 3. 75%-65% of students having proper physical Fitness	1.Done more than 3 programs per year2 Done more than 2 programs per year3Done more than 1 program per year	 Identification done .Programs implemented Identification done. Provides awareness Identification done. But activities none.
0 4 0	10 6 4	0 4 6	1 2 4
		.	
	Obtaining information from students program	Students Fitness Notes	Program reports Report Notes

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	14. School atmosphere		13. Classroom atmosphere	12 Teachers' attendance	11.Attendance of students	Criteria	
	1.Maintains systematically cleanly ,beautifully and without having risky places Space available for playing.(Based on the prevailing positions marks between 1-5 should be given)	3 Out of classrooms 50% are kept systematically cleanly and with proper lighting and ventilation 4. Maintenance of the classrooms systematically, cleanly with proper lighting and ventilation is not sufficient	i Every classroom is kept systematically, cleanly and proper lighting and ventilation. There are methodologies adopted. 2.Out of classrooms 80% are kept systematically cleanly and with proper lighting and ventilation	1. Aaverage more than 90% 2. Average attendance between 90%-90% 3. Average attendance between 80&-70%	1. Last year average more than 90% 2. Average attendance between 90%-90% 3. Average attendance between 80&-70%	Indicator	
	U 1	0	3 Vs	- ω σ	3 3	Evaluation Level	<u>(</u>):
_					•	Marks Obtained	
	Physical environment		Physical environment	Attendance register/Leave records	Attendance register	Source	