

Urgent

No.EDN-HE(21)B(15)38/2015-WIFS  
Directorate of Higher Education,  
Himachal Pradesh, Shimla-1  
Tel:0177-2653120Extn.234\_E.mail:genbr@rediffmail.com, Fax:2812882

Dated Shimla-1 the November,2015

To

All the Deputy Directors of Higher Education,  
Himachal Pradesh

**Subject:-** Regarding Weekly Iron Folic Acid Supplementation Programme.

Sir,


This is with reference to letter No.HFW-H(WIFS-Gen.)2013-Vil-II-40902 dated 29-10-2015(copy alongwith enclosures enclosed), received from the Mission Director(NHM), Directorate of Health Services, Himachal Pradesh, Shimla-9, on the subject cited above.

In this regard, it has been desired by the Ministry of Human Resource Development, Department of School Education and Literacy, New Delhi, that following should be regularly reviewed, so as to improve the school health coverage and also to ensure for increase coverage of beneficiaries in the state:-

- Ensuring availability and supervise ingestion of IFA and Albendazole at Schools. Also Workout a convenient modality in coordination with State Health Department for collection and safe storage of the monthly IFA tablets, supplies and recording of the data regarding the consumption of IFA tablet at school level;
- Updating of the list of WIFS Nodal Officers/ Teachers (District & School Level) and also ensure to designate a Nodal Officer at District level and also Nodal Teacher at school level for school health programme including RBSK, WIFS. The Updating of the list of WIFS School Nodal Teachers from the Schools and active participation in State Level Convergence meetings;
- The designated Nodal Officer/ Nodal Teacher must liaise regularly with the State Health Department for issuance of joint instructions, annual plan for coverage of all Government schools in the State and to monitor the same/ provide solutions to bottlenecks;

- Timely preparation and monitoring of the micro-plans for school health checkups of children, periodicity of health checkups and regular follow up of the referrals district wise/ block wise;
- Ensure to coordinate with the SSA, RMSA, MDM programmes of the State and the Health Department regarding maintenance of school health cards of students, doctors' visits and logistical arrangements as required.

Therefore, you are directed to issue necessary instructions and also to take necessary efforts to establish institutional mechanisms for effective convergence Weekly Iron Folic Acid Supplementation Programme.

  
(Dr. B.L. Vinta),  
Joint Director of Higher Education(C),  
Himachal Pradesh

Endst. No. even dated Shimla-1 the November,2015  
Copy for information and necessary action is forwarded to:-

1. The Mission Director (NHM), Directorate of Health Services, Himachal Pradesh, Shimla-9, w.r.t. letter No.HFW-H(WIFS-Gen.)2013-Vil-II-40902 dated 29-10-2015.
2. Superintendent (G-II), IT Cell, with the direction to upload the same on the departmental website.
3. Guard file.

  
Joint Director of Higher Education(C),  
Himachal Pradesh

F. No.13-3/2012 – EE.5 (MDM-1-2)  
Government of India  
Ministry of Human Resource Development  
Department of School Education and Literacy  
Mid-Day-Meal Division

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Shastri Bhawan, New De  
dated 17<sup>th</sup> September, 20

To

Education Secretaries of all States / UT's.

**Subject:** *Weekly Iron and Folic Acid Supplementation (WIFS) Programme for adolescent population in the age group of 10-19-reg.*

Sir/Madam,

Government of India through Ministry of Health and Family Welfare is implementing Weekly Iron and Folic Acid Supplementation (WIFS) Programme across the country since 2012 for adolescent population in the age group of 10-19. WIFS utilizes the platforms of schools and anganwadi centres to reach the beneficiaries. The school system is responsible for the (i) distribution of IFA and Albendazole tablets free of cost and (ii) providing dietary counseling to the adolescent boys and girls in Government/Government-aided and municipal schools. The schools are also responsible for preparing estimates of IFA and Albendazole requirements and compiling monitoring information on IFA consumption and sharing it with the Department of Health.

2. In pursuance of the discussions held during Inter-Ministerial Convergence meeting for WIFS Programme held in Ministry of Health and Family Welfare on 17.07.2015, the State/UT Governments are requested to take the following steps to improve the coverage and strengthening of implementation of the WIFS programme:

- Ensuring availability and supervise ingestion of IFA and Albendazole at schools;
- Updating of the list of WIFS State Nodal Officers from Education field and active participation in State Level Convergence Meetings;
- Strengthening of reporting mechanism for WIFS; and
- Joint visits and reviews at the State and district level.

3. Further, the need for convergence as requested vide D.O. letter of even number dated 22.8.2014 (copy enclosed) from Shri Rajarshi Bhattacharya, the then Secretary in this Department is again reiterated.

4. Cooperation and valuable suggestion of State/UT Governments in the matter is solicited.

Yours faithfully,

-Sd/-

(J. Alam)

Joint Secretary to the Government of India

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राज्य  
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स्कूल शिक्षा और साक्षरता विभाग  
नई दिल्ली - 110 001

Government of India  
Ministry of Human Resource Development  
Department of School Education & Literacy  
124 'C' Wing, Shastri Bhawan  
New Delhi - 110 001

August 22, 2014

Dear Secretary,

I write to draw your attention to the important issue of convergence between your Department and the State/UT Health Department for monitoring of the health of school going children. As you are aware that under the National Health Mission (NHM), the Rashtriya Bal Swasthya Karyakram (RBSK) focuses on the screening of children from birth to 18 years for birth defects, diseases, deficiencies, development delays and disabilities.

2. The other important intervention under the NHM is the Weekly Iron Folic acid Supplementation (WIFS) Programme to address the high prevalence of anemia amongst adolescence population especially girls, through provision of weekly iron folic acid (IFA) tablets.

3. As per the data made available by the States/UTs in their Annual Work-Plan and Budget 2014-15 under the Mid Day Meal scheme, it is observed that coverage under both the RBSK and WIFS is low against the enrolment figures of children in school. It is therefore requested to kindly refocus on and regularly review the following, so as to improve the school health coverage:-

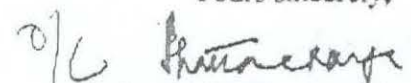
- Ensure designation of a nodal officer for school health including RBSK, WIFS coverage in the Department of School Education in the State. The designated officer must liaise regularly with the State Health Department for issuance of joint instructions, annual plan for coverage of all govt. schools in the State and to monitor the same /provide solutions to bottlenecks.
- Timely preparation and monitoring of the micro-plans for school health checkups of children, periodicity of health checkups and regular follow up of the referrals district wise/block wise.
- Work-out a convenient modality in coordination with the State Health Department for collection and safe storage of the monthly IFA tablet supplies and recording of the data regarding the consumption of the IFA tablet at the school level.
- Co-ordinate with the SSA, RMSA, MDM programmes of the State/UT Department of School Education (both Elementary and Secondary Education) of the State Govt. and the State Health Department regarding maintenance of school health cards of children, doctors visits and logistical arrangements as required.

4. I would like to reiterate the need for convergence as requested vide our earlier communication (copy enclosed). Efforts should be made to establish institutional mechanisms for effective convergence.

5. I look forward to your cooperation and further suggestions in respect of the issues highlighted.

With regards,

Yours sincerely,

  
(Rajarshi Bhattacharya)

Encl: As above.