## Appendix second of the Government resolution <sup>1</sup>246, 2005

## ACTION PLAN FOR IMPLEMENTATION OF THE NATIONAL PROGRAMME ON NCD PREVENTION AND CONTROL

#	Activities	Responsible	Cooperating	Duration	Expected outcomes	Indicators
		organizatio n	organizations			
Ohi	l jective 1. Measures, directed to create sustainable	11	for management :	and coording	tion of NCD Prevention a	and Control
1	Establish network directed to increase	МоН	MoF&A,	2006-2007	Coordination of inter-	Increased number of
	participation of governmental, nongovernmental	111011	MoT&I,	2000 2007	sectoral collaboration to	stakeholders involved in
	organizations, business entities and citizens in		MoEC&S,		be improved	activities of the
	implementation of the programme		MoJ,		*	programme
			SPIA			
			MoC&UD			
2	Conduct meetings and discussions for	MoH	MoF&A,	2006-2008	Coordination,	Percentage of
	coordination of activities of the programme with		MoT&I, MoF,		collaboration and	coordinated programs,
	other programs, projects and activities.		NTO, SCO,		effectiveness of	projects and activities
			MoEC&S,		programs and projects	
			MoJ,		to be increased	
			MoC&UD			
			SPIA, MoRTT, MoFA,			
			IO, NGO			
3	Implement sub-program on NCD prevention and	Aimag and	MoH	2006-2007	Inter-sectoral	Decision on
	control at the aimag and capital city level and	Capital City	WIOII	2000-2007	coordination of the	establishment of
	establish inter sectoral working group to manage	Governors			program activities to be	working group
	implementation of sub-program	Office			improved	
4	Appoint an institution, which will provide with	МоН	MoF	2006-2007	NCD prevention and	Decision on
	professional methodology for management and				control will be	appointment of
	organization of an integrated NCD prevention				conducted by integrated	institution which will
	and control measures and study and decide to				methodology	provide with
	develop its organization					professional

			M.F.			methodology for management and organization of an integrated NCD prevention and control measures
5	Collaborate with other ministries and MoH organizations in the field of information and (NCH)		MoF , MoSW&L,	Every year	Community participation in	Percentage of community &
	encouragement of collectives, who has been achieved success in NCD risk factor reduction		MoEC&S, PR&TV, Mass Media		implementation of the program to be increased	collectives, encouraged
6	Carry out monitoring of the programme implementation at the 3-4 aimags and districts according to the specific program annually		SPIA, Aimag and Capital City Governors	Every year	Implementation of the program to be monitored and necessary further	Number of aimags and districts, involved in monitoring and their reports
			Office		activities to be determined	
7	Decide inclusion of indicators of activities directed to reduction of morbidity and mortality of major NCD-s and some risk factors in health information system  MOH  (NCH  PHI)		NSO, MoEC&S (HSUM)	2006-2008	NCD related health indicators to be updated	Updated NCD indicators
8	Establish information Database which included MoH		NSO,	2006-2008	NCD information	Decision on the
	the status of morbidity, mortality and risk factors of major NCD-s and measures, directed to reduce their prevalence and outcomes (PHI, NCC)		MoEC&S (HSUM)		Database to be established	establishment of NCD information Database
9	Enhance quality and accessability of information on the status of morbidity, mortality and risk factors of major NCD-s and implementation of the program and its outcomes to decision and policy makers as well as community	·ID,	MoEC&S (HSUM), PR&TV	2006-2013	It will be an evidence for conclusion, planning and implementation of policy and intervention	Percentage of activities, implemented based on information.
10	Conduct STEP survey on prevalence of NCD MoH		MoEC&S	2005,	The national baseline	Survey report

risk factors	(PHI, NCC,	Aimag and	2009,	data on NCD to be	
	,	•	2013	determined	
	NCHD.	Governors			
	· · · · · · · · · · · · · · · · · · ·	Office			
		011100			
Create ongoing monitoring system for risk factor,	MoH	MoF,	2006-2008	Evidence needed for	Established NCD
morbidity and mortality of major NCD-s and	(PHI, NCC,	MoEC&S		planning and	surveillance system
carry out measures, directed to improve its	DC,	(HSUM),		implementation of	
capacity	NCHD,			policy and intervention	
•	SCPC&S)			to be created	
Conduct training for health workers on detection,	МоН	MoEC&S	2006-2011	Knowledge of health	The number of
evaluation and control of NCD risk factors.	(PHI, NCC,	(HSUM)		workers on detection,	conducted training and
	DC,			evaluation and control	percentage of health
	NCHD,			of NCD risk factors to	workers, participated in
	SCPC&S)			be improved	training
Support research activities on tobacco, alcohol	МоН		2007-2013		The number of research
consumption, their negative social and economic	(PHI, NCC,	(HSUM)			study and their report
	DC,			and intervention to be	
and health benefits and effectiveness of	,			improved	
activities, directed to reduce NCD risk factor	SCPC&S,				
	IMS)				
Objective 2. Measures, directed to reduce	e NCD risk fa	ctors by promot	ting healthy li	ifestyles and supportive ei	nvironments
	MoJ	,	7, 2006-2008	$\mathcal{E}$	′   · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			decision and standard
alcohol and tobacco use and physical inactivity)		MoT&I,		factors to be updated	
		NCS&M, NGO			
Carry out measures directed to create sustainable	MoH	· ·	F,   2005-2007		
		NTO,			
NCD risk factors and creation of "health		MoF&A,		reduction of NCD, its	
promoting" environment for enhancing healthy		MoT&I,		risk factors and health	budget composition
lifestyle by establishing Health promotion		MoEC&S		promotion to be	2
	Create ongoing monitoring system for risk factor, morbidity and mortality of major NCD-s and carry out measures, directed to improve its capacity  Conduct training for health workers on detection, evaluation and control of NCD risk factors.  Support research activities on tobacco, alcohol consumption, their negative social and economic consequences, behavioral change, economical and health benefits and effectiveness of activities, directed to reduce NCD risk factor  Objective 2. Measures, directed to reduce Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Carry out measures directed to create sustainable funding mechanism for activities to reduce the NCD risk factors and creation of "health promoting" environment for enhancing healthy	Create ongoing monitoring system for risk factor, morbidity and mortality of major NCD-s and carry out measures, directed to improve its capacity  Conduct training for health workers on detection, evaluation and control of NCD risk factors.  Conduct training for health workers on detection, evaluation and control of NCD risk factors.  Conduct training for health workers on detection, evaluation and control of NCD risk factors.  MoH (PHI, NCC, DC, NCHD, SCPC&S)  Support research activities on tobacco, alcohol consumption, their negative social and economic consequences, behavioral change, economical and health benefits and effectiveness of activities, directed to reduce NCD risk factor  Objective 2. Measures, directed to reduce NCD risk factor SCPC&S, IMS)  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Carry out measures directed to create sustainable funding mechanism for activities to reduce the NCD risk factors and creation of "health promoting" environment for enhancing healthy	Create ongoing monitoring system for risk factor, morbidity and mortality of major NCD-s and carry out measures, directed to improve its capacity  Conduct training for health workers on detection, evaluation and control of NCD risk factors.  Consumption, their negative social and economic consequences, behavioral change, economical and health benefits and effectiveness of activities, directed to reduce NCD risk factor  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Review and update legislative acts and creation of "health promoting" environment for enhancing healthy  DC, NCHD, SCPC&S  MOF, MOEC&S  (HSUM)  MOF&A,	Create ongoing monitoring system for risk factor, morbidity and mortality of major NCD-s and carry out measures, directed to improve its capacity  Conduct training for health workers on detection, evaluation and control of NCD risk factors.  Support research activities on tobacco, alcohol consumption, their negative social and economic consequences, behavioral change, economical and health benefits and effectiveness of activities, directed to reduce NCD risk factor  Objective 2. Measures, directed to reduce NCD risk factors by promoting healthy is rorder to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)  Review and update legislative acts, standards in order to reduce risk factors (fat, salt, sugar, alcohol and tobacco use and physical inactivity)	Create ongoing monitoring system for risk factor, morbidity and mortality of major NCD-s and carry out measures, directed to improve its capacity  Conduct training for health workers on detection, evaluation and control of NCD risk factors.  Support research activities on tobacco, alcohol consumption, their negative social and economic consequences, behavioral change, economical and health benefits and effectiveness of activities, directed to reduce NCD risk factors  Objective 2. 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	foundation from portion of excise tax of tobacco and alcohol				established	
16	Develop and implement the national guideline for implementation of "The Global Strategy on Diet and Physical Activity"	MoH (PHI,DC, NCHD, SCPC&S)	MoF&A, MoT&I, NGO	2006-2007	Guideline, reflected local condition to be developed and implemented	Percentage of organizations, implemented approved guideline
17	Develop formal, informal and distance education programs, manual, methodology, recommendation and IEC materials for the public directed to enhance their knowledge, attitude and practice on healthy diet, physical activity, smoke free and alcohol free lifestyle, appropriated to their age, sex, and professions	MoH (NCHD, PHI, SCPC&S, DC, MNH&NC)	MoEC&S	2006-2013	Formal, informal training and distance education programs to be updated.  New manual, methodology, recommendation and IEC materials to be developed	Approved training program, Number & quality of published manuals, methods, recommendations and IEC materials,
18	Develop and enforce the joint ministers order directed to regulate healthy food service, improve physical activity and create "health promoting" environment at the school and work places	MoH (NCHD, PHI, SCPC&S,	MoSW&L, MoEC&S,	2006-2008	The joint ministers order & guideline on creation of "health promoting" environment to be developed and enforced	Approved order & guideline,  Percentage of implemented organizations
19	Review and update the national common food products standard in order to reduce salt, sugar and fat content, appropriate to population age according to the global standard and enforce	NCS&M	MoH (PHI), MoF&A, MoT&I, NGO	2006-2007	Food standard appropriate to population age to be updated	Updated & approved standard Percentage of entities and organizations implemented a standard
20	Provide advocacy campaign on creation of health promoting environment for decision makers and policy makers	MoH (NCHD, PHI)	MoEC&S (HSUM) PR&TV Other mass	2006-2008	Knowledge & attitude of policy makers and decision makers to be improved	Number of advocacy campaign  Number of policy

			media			makers and decision makers involved
21	Review and update the existing regulation on creation of "health promoting" school, workplace and hospital and enforce	MoH (NCHD)	MoEC&S, MoSW&L, Business entities& organizations NGO	2006-2007	Regulation to be updated & enforced	Number & percentage of "health promoting" organizations, implemented the updated regulation
22	Conduct meetings and consultation regularly with food producers and importers on improving of nutrition quality assurance of food products	MoH (PHI)	SPIA, MoF&A, MoT&I,	2006-2012	Collaboration to be improved	Recommendation& decision of meeting or consultation and its status of implementation.
23	Study on possibility to establish national reference chemical laboratory of food products, and improve it's capacity	MoH (PHI)	MoF, MoF&A, MoT&I, SPIA, MoFA,	2006-2009	Sustainable control of food and nutrition quality to be established	Decision on establishment national reference laboratory
24	Develop and enforce order directed to evaluate healthy food producer-business entity and organization annually	MoH (PHI, NCHD, DC)	MoF, MoF&A, MoT&I, SPIA, NGO	2006-2013	Production of healthy food and nutrition to be increased	Percentage of healthy food producer- business entities
25	Evaluate and inform organization and collectives which established special places and rooms directed to improve physical activity of workers, students and customers and had constant activities	MoH (NCHD, SCPC&S)	MoSW&L, MoEC⪼, MoD, PR&TV, Other mass media	2006-2012	Number of agencies where places, rooms are available for physical activity to be increased	Number of agencies with physical activity rooms and places
26	Train national educators who provide with methodology for implementation of an integrated NCD prevention and control activities in central and local level.	MoH (NCHD, SCPC&S, PHI, DC)	MoEC⪼, (HSUM)	2006-2007	Educators to be trained	Training report. Percentage of trained people

27	Update test to determine fitness status of	MoH	MoEC⪼,	2006	Fitness test to be	Approved test
•	population.	(SCPC&S)	NCS&M	****	updated	
28	Take in to consideration the licensing of	МоН	SPIA,	2006-2007	The standard to be	Approved standard,
	organizations and centers, where provide an	(NCHD,	NCS&M,		created and the quality	manual, percentage of
	activities directed to improve fitness, body	SCPC&S,	Aimag and		of activity of centers to	implemented agencies
	building and weight loss and training of all kind	PHI)	Capital City		be improved.	
	of exercises,		Governors			
	develop and enforce standard, manual, provide					
	with methodology					
29	Take a measures directed to improve plan and	MoC&UD	Aimag and	2006-2013	Physical activity of the	Percentage of
	project of buildings and apartments to be newly		Capital City		people to be increased	buildings and
	established and reconstructed, by making		Governors			apartments, planned
	opportunities to create special roads and squares		MoH			to be have special
	promoting physical activity of the people		(SCPC&S)			roads and squares
30	Take a measures directed to establish places and	MoC&UD	Aimag and	2006-2013	Possibility of active	Percentage of
	squares to promote active movement of the		Capital City		movement to be created	apartments with
	people and improve supply of necessary		Governors			special places and
	equipment		Association of			squares and necessary
	• •		owners of the			equipments
			apartment,			• •
			Business			
			entities			
31	Promote community initiative for	МоН	MoEC⪼,	2006-2013	Participation of the	Percentage of
	implementation of activities, small projects,	(PHI, NCC,	(HSUM)		community in activities	community projects
	programs directed to reduce risk factors and		NGO		directed to reduce risk	and programmes
	enhance healthy lifestyle	SCPC&S)			factors, promote healthy	
					lifestyle to be increased	
32	Implement demonstration project on reduction	_	МоН	2006-2013	Number of aimags and	Number of people and
	of NCD risk factors and health promotion at	Capital City	(PHI, NCC,		districts actively	organization, involved
	some aimags and districts, conduct training and	Governors	DC, NCHD,		working in reduction of	in the best practice
	inform their best practice among other aimags		SCPC&S)		NCD risk factors to be	training
	and districts				increased	

33	Train human resources at the local and international level in NCD prevention and management and health promotion and updating their qualifications		MoEC⪼, (HSUM) IO	2007-2013	Capacity of human resources in NCD prevention and management and health promotion to be improved	Percentage of persons involved in local and international training
34	Develop and implement social marketing strategy directed to enhance healthy lifestyle and reduce NCD risk factors	MoH (PHI, DC, NCHD, SCPC&S)	Mass media	2006-2007	Social marketing to be improved	Approved social marketing strategy and plan
35	Develop guideline, manual and provide advocacy, training and information on creation of health promoting environment, enhancing healthy lifestyle and reduction of NCD risk factors for policy and decision makers at all level	(NCHD, PHI,	Aimag and Capital City Governors, NGO	2006-2010	Knowledge and attitude of decision and policy makers to be improved, Number of health promoting activities and organizations to be improved	Number of developed manuals, conducted training and number of people participated, Number of health promoting collectives and organizations
36	Develop manual and provide training and information on methodology of appropriate choice of food products and cooking "healthy" meal for the food specialists, food producers, importers, house wives, parents and community	MoH (PHI, NCHD)	MoF&A, MoT&I, PR&TV Mass media	2006-2009	Number of business entities which produce healthy food to be increased, Community knowledge on healthy nutrition to be improved	Number of business entities which produce healthy food, Community knowledge on healthy nutrition Number of TV and radio programmes, Number of developed and published IEC materials. Number of organized trainings and number of participants
37	Improve control on nutrition quality, fat, salt	MoF	MoF&A,	2007-2010	Number and type of	Approved law,

38	and sugar content of imported food products, and create legislative environment directed to promote healthy food products by taxation policy  Organize various competition, exhibition and demonstration activities directed to improve healthy diet and physical activity among population	,	MoT&I, MoH (NCHD)  MoF&A, MoT&I, MoJ Professional Associations NGO	2006-2010	"healthy" food products with minimal content of NCD risk factors to be improved  Knowledge, attitude and skills of the community on healthy diet and physical activity to be improved	
39	Develop guideline and standards of active movement appropriate to population age, work and profession, and conduct training of trainers and community and disseminate an information regularly through mass media	MoH (NCHD, PHI, SCPC&S)	MoEC⪼, PR&TV Mass media NGO	2006-2007	Guideline and standards of active movement appropriate to population age, work and profession to be developed  Methodologists of aimags and capital city and community to be involved in training and information	and standard,  Percentage of people
40	Organize age specific activities on fitness, physical culture and sport, take a measures directed to involve all age groups of the population	(SCPC&S)	MoEC⪼, MoSW&L Aimag and Capital City Governors,	2006-2013	All age groups of the population in activities on fitness, physical culture and sport to be involved	organised and competition  Number of people involved, by age groups
41	Organize a campaign "active movement" for preschool and school children, develop cartoon,		MoEC⪼, PR&TV	2007-2011	Physical activity of preschool and school	Number of organized campaign, developed

	and organize competition	SCPC&S)			children to be improved	cartoon and competition,
						Percentage of children involved
42	Expand measures directed to conduct the training on aerobics, fitness exercise and dancing among children, youth and population	Aimag and Capital City Governors,	MoEC⪼, MoH (SCPC&S, NCHD)	2006-2012	Physical activity of the public to be improved	Percentage of organized measures and participants involved
43	Improve possibility to do active movement for the community by improving lighting and safety of roads, squire and garden	Aimag and Capital City Governors,	SPIA, MoC&UD MoRTT, Business entities	2006-2011	Physical activity environment for the public to be improved	Percentage of aimags, districts, business entities and organizations taking measures
44	Provide and evaluate competition among organizations and business entities on creation of tobacco free environment, and disseminate best practice information	MoH (NCHD, MNH&NC)	MoEC⪼, MoSW&L Aimag and Capital City Governors, Mass media NGO	2006-2011	Number of organizations, created tobacco free environment to be increased	Percentage of organizations, established tobacco free environment
45	Develop manual and recommendation on methodology of creation of tobacco free environment, and provide training.	MoH (NCHD, MNH&NC)	Aimag and Capital City Governors, NGO	2006-2009	Manual on methodology of creation of tobacco free environment to be developed	Approved guideline,  Number of people involved in training,  Number of ogranizations, created tobacco free environment
46.	Review formal and informal training	MoEC⪼,	МоН	2007-2009	Training programme to	Approved new

	programme of educational organizations at all level; introduce tobacco related harm, its		(NCHD, MNH&NC)		be updated and introduced,	programme,
	prevention and importance of tobacco cessation in training program.				Knowledge and attitude of students to be	Percentage of educational organizations
					improved	introduced new programme
47	Conduct training for teachers on tobacco harm	MoEC⪼,	MoH (MNH&NC NCHD) NGO	2006-2011	Knowledge and attitude of teachers on tobacco harm to be improved	Percentage of teachers involved in training
48	Select and make agreement with business entities and organizations directed to improve supply of necessary medicaments used in tobacco cessation based on estimation	MoH (MNH&NC)	Organization for supply of medicine, Business entities	2006-2013	Supply of necessary medicaments used in tobacco cessation to be increased	Percentage of improvement of supply of necessary medicaments used in tobacco cessation
49	Implement treatment-training programme on tobacco cessation and establish hotline based on agreement performance work	MoH (MNH&NC)	Organization for supply of medicine, Business entities	2006-2013	Possibility to get advice and treatment, who wants to quit smoking to be established	Number of people involved in tobacco cessation program,  Number of people got hotline advice
50	Develop and implement recommendation for organization of cultural show, competition, events and other measures to be "tobacco free" such as "Tobacco free youth", "Tobacco free cultural event", "Tobacco free sport "	MoH (NCHD PHI, MNH&NC)	MoEC⪼, MoSW&L NGO PR&TV	2006-2012	Number of tobacco free environment, activity and measures to be increased	Developed recommendation,  Number of tobacco free environment, activities and measures
51	Celebrate World No Tobacco Day (31 May of every year) and expand information, education (IEC) for the public at the aimag and capital	Aimag and Capital City Governors,	PR&TV, MoH (MNH&NC NCHD)	2006-2013	Knowledge and attitude of community on tobacco harm,	Percentage of aimags and districs celebrated World No Tobacco

	city level				importance of tobacco cessation, reduction of tobacco use and creation of tobacco free environment to be improved	Day
52	Develop and implement training and treatment strategy on tobacco cessation for the people in rural areas, people with low living condition and homeless people	MoH (MNH&NC NCHD)	Aimag and Capital City Governors, MoSW&L	2006-2013	Knowledge and attitude of the people in rural areas, people with low living condition and homeless people to be improved	Approved education programme,  Number of people involved in training
53	Celebrate Alcohol free Day in every month, develop manual and recommendation on alcohol free environment, organize competition among organizations and business entities, disseminate information for the puiblic	Aimag and Capital City Governors,	MoH, SPIA NGO	2006-2013	Manual and recommendation to be developed.  Number of Alcohol free activities and alcohol free environment to be increased	Approved order,  Number of Alcohol free Days, alcohol free organizations and business entities
54	Develop advice, recommendation and IEC materials on negative consequences of alcoholic beverages for human health and it's moderate use and provide training and information for the public	MoH (NCHD MNH&NC)	MoEC⪼ (HSUM) PR&TV, NGO	2006-2013	Accessibility of information to be increased	Number of advice, recommendation and IEC materials,  Number of trained people
55	Review formal and informal education programme of educational organization at all level and reflect issues related to negative consequences of alcoholic beverages for human health, it's prevention and importance of treatment of alcohol dependence	MoEC⪼	MoH (MNH&NC NCHD)	2007-2009	Training programme to be updated,  Knowledge and attitude of students to be improved	Approved training programme,  Percentage of organizations itroduced new

56	Provide with methodology and cooperate with organizations and community, initiated to organize volunteer clubs to help drinkers and their families	MoH (NCHD MNH&NC)	Aimag and 2007-201 Capital City Governors, NGO	drinkers and their families to be improved	programme Number of volunteer clubs, Number of activities implemented, Number of people involved			
•	Objective 3. Measures directed to make reorientation of health services (towards appropriate, accessible, effective, community-based) for common NCD-s							
57	Develop and approve integrated guideline and standard for diagnosis and treatment of major NCDs		MoEC⪼ (HSUM) Professional associations	Medical service to be implemented according to the integrated guideline and standard and its quality to be improved	Approved standard and guidelines			
58	Develop training programme and manual for implementation of guideline and standard for diagnosis and treatment of major NCDs and conduct training for health workers	MoH (NCC, NCHD, MNH&NC PHI, DC)	MoEC⪼ 2006-201: (HSUM) RDTC	Management of NCDs to be improved	Approved training programme and manual,  Percentage of health workers involved in training			
59	Select medicines (safe, effective, with reasonable prices) for treatment of NCDs based on clinical research evidence and introduce them in the national list of essencial medicines.	MoH (NCC)	MoEC⪼ (HSUM) 2006-201	Modern and effective medicine to be introduced	Number of medicines included in the list			
60	Determine necessary instruments, techniques and equipments for diagnosis and treatment of NCDs according to the level of health service	МоН	MoFA, MoF, MoT&I, 2006-200	Supply of necessary instruments techniques and equipments to be	Number of health organizations with appropriate supply of			

	and take measures to improve their supply in collaboration with local and international donors and international organizations		Business entities		improved	equipments
61	Develop manual, recommendation and training programme on diet treatment for major NCDs for cooks of kitchen at hospital and sanatory and conduct training and information.	MoH (PHI)	MoEC⪼ (HSUM) Professional Associations	2006-2010	Knowledge, attitude and skills of cooks to be improved	Number of developed manual, recommendation and training programme
62	Establish model kitchen for treatment, training and research on healthy food, promote initiatives of business entities and organizations in relation to this, collaborate and provide them with methodology, and take a measures to disseminate best practices	MoH (PHI)	MoFA MoT&I, Professional Associations	2006-2008	Model kitchen for training to be determined/established with treating healthy food	Number of model kitchen,  Number of people involved in training
63	Develop NCD specific physical activity methodology and introduce in the practice of health service	MoH (NCHD, SCPC&S)	MoEC⪼ (HSUM)	2006-2009	NCD specific physical activity methodology to be developed	Approved methodology,  Percentage of health organizations implemented the methodology
64	Increase percentage of preventive measures in the health service for maior NCDs and create legislative environment of financial and other type of encouragement to the health promotive and preventive measures	MoH (NCHD)	MoF, Aimag and Capital City Governors,	2006-2008	Legislative environment to be created,  Health promotive and preventive measures to be improved	Approved legislative acts,
65	Develop and implement methodology and guidelines for integration of NCD prevention	MoH (PHI,	RDTC	2006-2007	Integration and coordination of NCD	Approved guideline, order

66	and control activities with primary health care - soum and family hospital services and for evaluation of it's effectiveness.  Provide nationwide medical examination of the population in every year, in order to make early detection of major NCDs and take necessary measures	NCHD, NCC DC)  Aimag and Capital City Governors, RDTC,		prevention and control activities with primary health care to be improved  Rate of early detection to be increased	Percentage of health organizations, implemented  Percentage of people involved in medical examination
67	In order to enhance the skills of individuals in control of NCD risk factors such as blood pressure, blood glucose, natrium salts in urine and weight control themselves, take a measures, directed to improve necessary supply of apparatus and reagent, and develop an information and education material and conduct training and information among people at risk and the community	MOH (PHI, NCHD, NCC DC SCPC&S)	MoF, MoFA, Aimag and Capital City Governors, RDTC, HO, Professional Associations Business Entities	Knowledge and skills of individuals to be improved	Percentage of individuals with knowledge and skills
68	Introduce costeffective methods for early detection of major NCDs such as detection of cervical cancer using 3 % acetic acid test for women and PAP steamer and detection of breast cancer by using self examination and mamagramm	MoH (NCC DC)	Aimag and Capital City Governors, RDTC, HO	New methods of early detection of common NCDs to be introduced	Approved new methods,  Percentage of introduced organization,  Percentage of detected cases
69	Develop and implement regulation on registration and recall of people/individuals	-	2006-2008	Number of registered patients to be increased,	Percentage of registered patients

	with major NCDs	DC, PHI)				
70	Develop the regulation on provision of external audit in the health services for NCDs	MoH (NCHD, NCC)	SPIA	2006-2008	Quality of health services for NCD to be improved	Approved system and regulation on external audit,
						Percentage of organization involvement
71	Take a measures directed to extension of telemedicine system for diagnosis, consultancy, training and monitoring of NCDs.	IMS, NCC)	MoF, MoFA, IO	2007-2012	Accessibility of measures directed to diagnosis, consultancy, training and monitoring of NCDs to be improved	Percentage of health organizations involved in tele- medicine system
72	Develop guideline, programme and recommendation on reduction of NCD risk factors and prevention of consequences such as treatment of alcohol dependance, tobacco cessation, reduction of overweight and detection and treatment of causes of obesity and conduct training among people at risk and patients	MoH (PHI, NCHD, DC, SCPC&S, MNH&NC)	MoEC&S, (HSUM) MoF&A, Professionals Associations NGO	2006-2007	Risk level among risky populations to be reduced and their health status to be improved	Approved programs,  Percentage of people involved
73	Develop and implement regulation on improving supply of essencial medicine and instruments for the treatment of NCDs and coordination of medical services (price, provision of supply and selfcontrol of patients etc.)	МоН	MoSW&L MoF Organization s for supply of medicines	2006-2009	Supply of medicines and instruments to be improved	Approved regulation
74	Develop IEC materials, methodological recommendation and conduct training and information directed to make a selfcontrol by patients themselves on intermediate risk factors (such as blood pressure, blood glucose level,	MoH (PHI, NCHD, DC, SCPC&S)	MoEC&S, (HSUM)	2006-2007	Knowledge and skills of patients and people with risk to be improved	Percentage of people who have knowledge and skills of selfcontrol.

	natrium salts in urine, overweight etc.) and improve involvement of the family members.					
75	Take measures directed to improve supply of specific food products for diabetic patients	MoF&A	MoH (DC), MoT&I, SPIA, Professionals associations, Business entities, NGOs	2006-2013	Supply of specific food products for diabetic patients to be improved and possibility of prevention from disease complications to be increased	Increasing number of diabetic patients who use specific food products
76	Develop palliative care management guidelines and conduct training of health professionals	MoH (NCC)	MoEC&S, (HSUM) NGO TCPC	2006-2009	Palliative care management guidelines to be developed  Knowledge and skills of family and soum doctors on palliative care management to be improve	Guidelines for palliative care management,  Percentage of family and soum doctors, trained in palliative care management
77	To establish a multidisciplinary palliative home care team in all aimags and districts.	MoH (NCC)	HO NGO TCPC	2006-2007	Multidisciplinary palliative home care team at all aimags and districts to be established	Percentage of provinces and districts with palliative home care team  Percentage of patients, to whom provided service
78	Take a measures directed to improve and provide sustainable supply of slow released morphine for oral use with reasonable prizes for palliative care		MoF, MoFA, Mongol Em Impex, Other	2006-2009	Supply of slow released morphine for cost effective and oral use to be improved	Percentage of patients, users and their level of satisfaction

			Companies for supply of Medicine, NGO-s TCPC			
79	Conduct training for oncologists, internists, gynaecologists and surgeons at provinces and districts and improve their basic knowledge on palliative care	MoH (NCC)	HO NGO TCPC	2006-2009	Capacity to provide consultancy for the palliative home care team to be improved	Percentage of doctors including oncologists, internists, gynaecologists and surgeons, trained in palliative care management
80	In order to improve supply, make an estimation and order the nursing instruments and supplies necessary to provide palliative care and make a proposal to the donor countries	MoH (NCC)	MoF, MoFA, Companies for supply of Medicine, NGO-s TCPC	2007-2009	Supply of instruments, necessary to provide palliative care to be improved,  Level of satisfaction of patients to be improved	Percentage of health organizations with improved supply of instruments, necessary to provide palliative care
81	Develop manual and recommendation on palliative care directed to improve knowledge, attitude and skills of family members and community and provide information, education and training	MoH (NCC, NCHD)	NGO-s TCPC	2006-2013	Knowledge, attitude and skills of family members and community to be improved  Level of satisfaction of patients and their quality of life to be improved	Manuals and recomendations,  Percentage of families and communities trained in palliative care