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**YEREL YÖNETİM REFORMU  
PROJESİ (YR III)**  
LOCAL ADMINISTRATION REFORM  
PROJECT (LAR III)

## DRAFT IMPLEMENTATION GUIDELINE FOR PUBLIC HEALTH STANDARDS

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Reference to the Description of Action	
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Activity	A.2.2.1. Develop and implement local service delivery standards in order to simplify the processes for service provision
Output	Draft Implementation Guideline for Public Health Standards



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## Abbreviations

Full Form in English	EN-Abbr.	TR-Ks.	Türkçe Açık Hali
European Union	EU	AB	Avrupa Birliği
Disaster and Emergency Management Agency	AFAD	AFAD	Afet ve Acil Durum Yönetimi Başkanlığı
Ministry of Family and Social Services	MoFSS	ASHB	Aile ve Sosyal Hizmetler Bakanlığı
Metropolitan municipality	MM	BŞB	Büyük Şehir Belediyeleri
Ministry of Environment, Urbanization and Climate Change	MoEUCC	ÇŞİDB	Çevre, Şehircilik ve İklim Değişikliği Bakanlığı
Ministry of Labour and Social Security	MoLSS	ÇSGB	Çalışma ve Sosyal Güvenlik Bakanlığı
World Health Organization	WHO	DSÖ	Dünya Sağlık Örgütü
Ministry of Youth and Sports	MoYS	GSB	Gençlik ve Spor Bakanlığı
Ministry of National Education	MoNE	MEB	Millî Eğitim Bakanlığı
Ministry of Health	MoH	SB	Sağlık Bakanlığı
Non-governmental Organization	NGOs	STK	Sivil Toplum Kuruluşları
Union of Municipalities of Turkey	UMT	TBB	Türkiye Belediyeler Birliği
Ministry of Agriculture and Forestry	MoAF	TOB	Tarım ve Orman Bakanlığı
Turkish Standards Institute	TSE	TSE	Türk Standartları Enstitüsü
Turkish Statistical Institute	TURKSTAT	TÜİK	Türkiye İstatistik Kurumu
Ministry of Transport and Infrastructure	MTI	UAB	Ulaştırma ve Altyapı Bakanlığı
World Health Organization	WHO	DSÖ	Dünya Sağlık Örgütü
General Directorate of Local Governments	GDLG	YYGM	Yerel Yönetimler Genel Müdürlüğü
Local administration Reform	LAR	YYR	Yerel Yönetim Reformu
Local administration Reform Project Phase III	LAR III	YYR III	Yerel Yönetim Reformu III. Aşama Projesi

## 1. Introduction

Local administration Reform Project Phase III (LAR III) is implemented by the United Nations Development Programme (UNDP). The co-beneficiaries of the project are the Ministry of Interior (MoI) and Ministry of Environment, Urbanization and Climate Change (MoEUCC). The project is funded by the European Union. The overall objective of the project is to maintain the implementation support for local administration reform process executed between 2003 and 2013 and ensure an effective, inclusive, accountable and participatory local governance which is in accordance with international standards in Turkey.

With the enactment of the Law No. 6360 in 2014, the need emerged for the improvement of consistent and simplified standards for service delivery by metropolitan municipalities (MMs). The Project aims to develop service standards in five areas to increase the efficiency of service delivery in areas under the responsibility of MMs in the functioning of this new MM model and to implement such standards through pilot applications.

These standards are considered significant in terms of consistency especially in the delivery of increased and diversified local services of MMs and providing a certain service quality in accordance with international standards. At the same time, it is expected that prepared standards will contribute to the intended results of local administration reforms.

The outputs of this activity will contribute to the studies on local service standards undertaken by MoEUCC during the term of Eleventh Development Plan.

The following were carried out under the activity of “Develop and implement local service delivery standards in order to simplify the processes for service provision” in the scope of LAR III Project:

- Meetings on service areas were held with central government units including particularly MoEUCC and MoI, and 5 main service areas were identified for which standards were recommended to be developed for presentation to MMs to be considered.
- There were meetings with Project Advisory Boards, opinions of participating municipalities were received relating to standards that could be developed to prevent common problems and improve relevant conditions in municipal service deliveries, and a questionnaire was administered to participants which was prepared for the prioritization and improvement of areas of service standards.
- The “Workshop on Establishing Service Standards” was held with the participation of 8 MMs to develop service standards in certain areas.
- As a result of these studies, the following five service areas were identified;
  - Public Health,
  - Public Health in Public Transport,
  - Preventive and Protective Fire Department Services,
  - Elderly Home Care Services,
  - Agricultural Support Services.
- Baseline diagnostic interviews were conducted with central government units, UMT, and municipalities on the basis of identified service areas.

- Desk reviews were conducted relating to the structure and functioning of service areas that were identified in selected EU member states and online baseline diagnostic reviews were carried out with municipalities of selected EU member states.
- The “Current Situation Analysis Report” and “Comparative Assessment Report” were prepared for each service area as a result of national and international interviews and consultative meetings, feedbacks for prepared questionnaires and desk reviews; and in the light of these studies, the “Draft Report on Standards” was prepared.
- Service standards for public health were created in this report developed within a two-day workshop conducted under the Project.

After the said workshop, 10 MMs (Konya, Ankara, Ordu, Balıkesir, Kahramanmaraş, Tekirdağ, Muğla, Eskişehir, Denizli and Gaziantep) were visited and standards prepared by organizing a one-day seminar were discussed by means of informing municipalities and other institutions in the province.

The Implementation Guideline to guide our municipalities were prepared in this regard to provide intelligibility of developed standards and strengthen their implementation.

The World Health Organization (WHO) defines “health” concept as “not only being protected from diseases and treatment but also physical, mental and social well-being as a whole (WHO, 2013). Protective public health approach is critical rather than therapeutic service deliveries in order to ensure and maintain public health.

Activities relating to public health are closely connected with environmental, social and economic factors. In order to protect the health of individuals which constitute the society, consideration should be given to clinical service delivery including medical examination and treatment as well as factors such as improving environment, organizing infrastructure, increasing protective activities for disadvantaged groups, improving living spaces, reducing environmental and noise pollution, increasing social assistance and facilities, supporting physical activity and healthy nutrition. Accordingly, when it comes to health, it should be addressed not only in terms of therapeutic clinical service delivery but also in a multi-perspective way. National and local approaches to improve public health status were evaluated in the framework of different disciplines and on the basis of service deliveries in certain municipalities, strategic plans and answers to written questionnaires and interviews.

In this framework, legal and institutional infrastructure particularly relating to service delivery for public health were addressed under this study in terms of strategic and policy documents and current legislation. Then, the regulations and legal processes in the field of public health in Turkey were examined. In the scope of this report, baseline diagnostic interviews were carried out with municipalities and representatives of central institutions including particularly the Ministry of Health (MoH), activities conducted in the scope of public health were identified in the framework of feedbacks of municipalities to semi-structured questions and questions which were directly prepared with municipalities and their strategic plans were examined. In the interviews held, regulations and practices of local administrations relating to public health in the current situation and process management of COVID-19 pandemic, coordination, measures taken and factors relating to how public health standards are implemented and monitored under crisis situation were evaluated in online meetings with relevant municipalities and representatives of institutions under local administrations. The current situation analysis was completed with the help of findings obtained in the framework of written answers to semi-structured questions addressed to the participants. In this frame, it was evaluated according to what public health activities were prioritized and if there were any standards in implementation. Standards and guidelines were evaluated which could be used to create standards in activities by taking examples from direct and indirect activities included in the field of public health.

## 2. Purpose and Scope

It is important to address health not only as having no physical disease or disability but as mental and social well-being, and to consider people along with their physical, biological and social environment to protect and improve public health. In this frame, the success will be promoted by providing integration between public health approach, and general and local service delivery, integrating health services into other social services, service delivery that is proportionate in terms of population and appropriate for socio-demographic structure, prioritizing preventive healthcare services, accordingly supporting continuing education and completing the incomplete technical knowledge, skills and background of the personnel providing service in all areas, maintaining and diversifying mobile service delivery and providing participation and adaptation of the society for activities and objectives.

While public health refers to public service with a greater weight of the central government, community health requires an approach and service delivery with larger local dimension and social participation.

It is indicated in the Law No. 224 on Socialization of Health Services (Article 33) that municipalities shall carry out *“environmental health services such as water, sewer, slaughterhouse and sanitation works, inspection of public places, vehicles and residences, insect and food control, and cemeteries that are among municipal health services in regions where health services are socialized”*.

It is also indicated that *“doctors in public health stations shall perform health services that are apart from environmental health services of the municipalities in regions where health services are socialized, government doctoral duties and audit of environmental health services of the municipalities and no other government doctor shall be assigned to these regions.”* After this law, it has become a current issue to determine the distribution of health services according to the population. It is important that municipalities provide support for *“the society to maintain their lives in total physical, mental and social well-being”*, and in terms of protecting the health of individuals and societies which are among the functions and responsibilities of MoH.

When the functions and activities of municipalities are examined, it is observed that they participate in many activities that are directly or indirectly related to and supportive for public health in a comprehensive way. They have many functions, responsibilities and powers in the nature of local and joint needs in this regard. For instance, they contribute to:

- Organization of the urban infrastructure: urban infrastructure such as land development, water and sewer, transport, waste, environmental health and cleaning;
- Geographic and urban information systems;
- Social services and assistance: Aids and vocational training courses provided to business enterprises, families and individuals
- Emergency rescue and ambulance; fire department
- Parks and landscape gardening, forestation and green spaces
- Creating sports fields
- Cultural and art activities
- Organization of local traffic, bicycle and walking roads
- Burial and cemeteries, providing necessary precautions in terms of environment and health when required

- Opening nursing and rehabilitation centres and institutions for the elderly, women, children and disadvantaged groups
- Power to open health institutions that are preventive, diagnostic and therapeutic
- Providing food aids and other non-financial and cash assistance

According to the above-listed provisions, it is possible for the municipalities to open and operate health institutions and centres, invest in health, establish units and commissions for health services and conduct inspections within the framework of regulations relating to health. They are assigned with the delivery of required services by prioritizing basic services relating to public health including particularly environment and cleaning, as well as services relating to emergency health services.

Thus, considering current legislative pieces, it is observed that municipalities have roles and responsibilities in service delivery, inspection, coordination and cooperation processes in many areas relating to public health. Municipalities are public institutions that can be used effectively within the framework of legislative pieces in the delivery of public health services which also include a multisectoral structure. Even though the activities of MoH are laid down in various legislative pieces, it is important to standardize the distribution of roles and cooperation. It is possible for the municipalities to provide direct or indirect support for public health by making required arrangements while continuing current activities in many areas such as combating communicable diseases, protecting elderly health, combating addictions and preventing chronic diseases that are among the functions and responsibilities of MoH in this context.

**Moreover, it is understood in terms of legal regulations of MoH that MoH has the main responsibility of control and performance of activities for “public health”. In a way to complete this framework, MoH has the power to make arrangements and decisions relating to health in case of emergencies, pandemics and disasters.**

It has become clearer during the pandemic that it is important to be prepared for conditions regarding human health in general. It is also significant to prioritize this area, improve service standards and integrate standards in question to planning, implementation and monitoring processes in order to both manage the pandemic in a healthy way and organize the activities for public health in a way to strengthen public health and prevent possible risks after the pandemic. It is clear that it is necessary to adopt a proactive and transparent understanding to establish an environment of confidence and coordination during this process. It is observed when considering the country case studies that in Turkey, there is no standard in this context and there is no common implementation either in EU countries or USA due to many factors such as socio-economic structure, geographic situation and laws of the countries.

In this frame, it is necessary for all member states to have policies of “health for all” that are supported with institutional, administrative and innovative leadership at local and regional levels and carry out these policies.

Under this study aimed at creating standards, current regulations and practices of local administrations regarding public health as well as process management, coordination, precautions taken for COVID-19 pandemic and how the public health standards are applied and monitored in crisis situations were discussed in online current situation diagnostic meeting held with relevant municipalities and representatives of institutions under the central government including particularly MoH and current situation was analysed by means of findings provided within the framework of written answers to semi-structured questions addressed to the participants. The activities carried out by the municipalities under public health were determined and strategic plans were examined within the

framework of interviews. In this frame, it was evaluated how the public health activities were prioritized and if there were any standards in practice. Discussions also included the criteria and guidelines that could be used to create standards by choosing examples from direct or indirect activities in the context of public health.

In this context, the topics of “waste” and “healthy and active life” as examples for service delivery for public health are given as an appendix to the report under Turkish Standards Institute (TSE).

The theme headings relating to basic public health are identified below. These standards are indicated along with their explanations in the matrix of standards and responsible institutions. Relevant standards for the planning, coordination, implementation and control of general service delivery in the field of public health are also included in the following table of matrix.

The theme headings relating to service delivery in the field of basic public health:

- Smart cities and society
- Healthy nutrition
- Active life
- Handicap-free living
- Waste, smart-circular production and consumption
- Cleaning and disinfection
- Air and noise pollution, green energy
- Social assistance and facilities
- Addictions
- Migrant health
- Adaptation to climate change
- Adolescent health and self-development
- Elderly health
- Mother-child health
- Rehabilitations
- Prevention of communicable diseases
- Animal health
- Food safety
- Work safety
- Prevention of non-communicable diseases
- Disadvantaged groups\*
- Community mental health\*
- Sexual health\*
- Water security\*
- Tourism health\*
- Health literacy\*

- Emergencies and natural disasters.

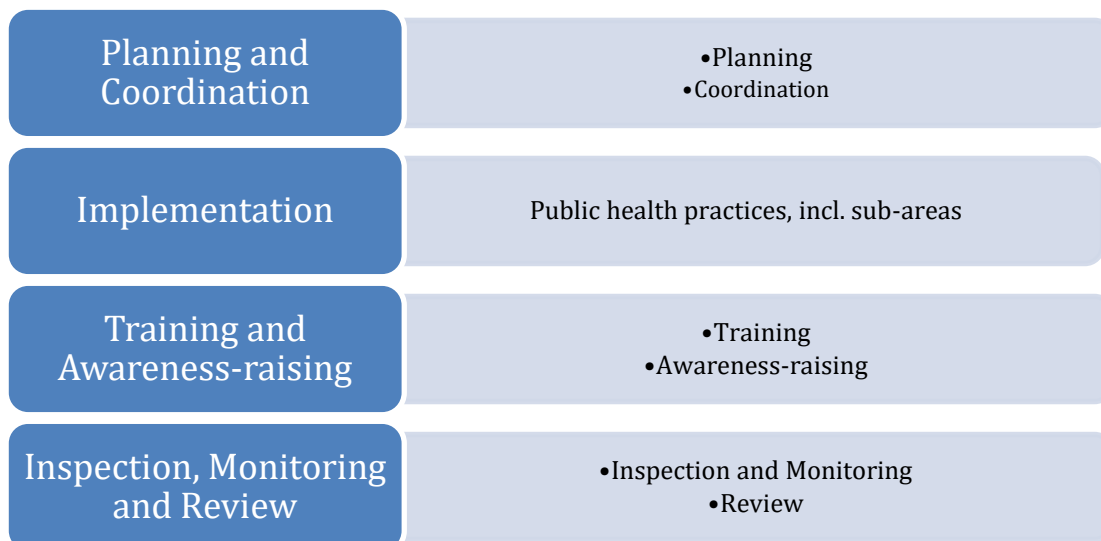
\*Those are included in accordance with the recommendations in workshops held in municipalities.

When establishing the standards under the Project, the following were used: the current situation diagnostic meetings conducted with MMs and relevant central institutions, findings provided from semi-structured questionnaires, international guide, publication and case studies. By observing a participatory approach, it was aimed for the standards to be guiding, increase their applicability and integrate business process by being easily adopted by practitioners.

Standards proposed relating to the protection of public health in this study are grouped under the following components:

- (i) Planning and coordination
- (ii) Implementation
- (iii) Training and awareness-raising
- (iv) Inspection, monitoring and review

*Figure 1: Structure of Standards for Public Health*



In our country, public health problems are different in each province, district and even neighbourhood. Moreover, it is important to include the activities to prevent health problems which primarily constitute a national issue in Turkey in action plans by identifying risks for that region. Measures to be taken to meet these standards, inter-institutional task sharing, protocols to follow and relevant performance indicators will be elaborated in implementation plans to be prepared after finalizing the standards. In addition to the impact of pandemic conditions, geographic and demographic differences among provinces under the purview of municipalities may require different implementation plans among municipalities. However, it will be useful to consider primarily the practices of MoH and legislation and guidelines of other ministries in terms of both providing association and coordination in practice as much as possible and guiding municipalities for planning, preparations of specifications and many technical details discussed in practice, as well as to take into consideration the technical standards which are currently established by TSE in relevant fields and to primarily refer to these standards.

### 3. Implementation Guideline for Public Health Standards

#### 3.1. Planning and Coordination

Theme	Planning, Coordination
<b>Standard</b>	<b>1.1. Create public health committees in municipalities to identify priorities for public health and their correct application.</b>
<b>Responsible Institutions</b>	MMs (R)
<b>Related Institutions</b>	Provincial Directorate of Health Provincial units of other relevant central institutions and local administrations Provincial Public Health Institutions, TSE, District Municipalities, Governorships, MoH, MoAF, MoLSS, Mol, MoFSS, MoYS, Professional associations, NGOs, Universities and Related Institutions

A public health committee is created consisting of representatives of relevant units of the municipality under public health and at least one health professional as well as other experts in the field of health. The committee collaborates with relevant ministries, central government units, other municipalities, universities and NGOs. It conducts prioritization and analyses on public health and creates implementation procedures. The committee also expresses opinion for administration to provide a smooth implementation process. Relevant units present report to the executive board about their activities and the effectiveness of practices within the specified time. It makes sure that appropriate environment is provided to form public health services and ensures that performance standards for environmental public health are implemented.

Theme	Planning, Coordination
<b>Standard</b>	<b>1.2. Perform current situation analysis for the prioritization of activities which support public health</b>
<b>Responsible Institutions</b>	MMs (R)
<b>Related Institutions</b>	Provincial Directorate of Health Provincial units of other relevant central institutions and local administrations Provincial Public Health Institutions, TSE, District Municipalities, Governorships, MoH, MoAF, MoLSS, Mol, MoFSS, MoYS, Professional associations, NGOs, Universities and Related Institutions

It is necessary to primarily create a public health committee, and following this prepare detailed implementation plans including the functions and powers of stakeholders as well as protocols to follow and performance indicators for each standard by MMs in order for implementation principles and

steps of identified standards relating to the protection of public health in public transport. Under this standard consisting of three phases;

- 1) A public health committee is created consisting of representatives of relevant units of the municipality under public health and at least one health professional as well as other experts in the field of health. The committee collaborates with relevant ministries, central government units, other municipalities, universities and NGOs. It conducts prioritization and analyses on public health and creates implementation procedures. The committee also expresses opinion for administration to provide a smooth implementation process. Relevant units present report to the executive board about their activities and the effectiveness of practices within the specified time. It makes sure that appropriate environment is provided to form public health services and ensures that performance standards for environmental public health are implemented.
- 2) In order to provide inter-institutional coordination and guide municipalities, "Guide for Preparing Implementation Plan for Public Health Standards in Municipalities" addressing principles and procedures for the implementation of standards by MoEUCC will be prepared.
- 3) Implementation plans will be prepared in compliance with policy and programme documents using the guide in question by MMs. If the guide has not been published yet, implementation plans are prepared in the framework of principles and procedures included in running process, needs, regulations and this Implementation Guideline.
- 4) Public health profile and needs are identified by using socio-demographic characteristics, geographic structure, cultural situation, quality of life analysis, working condition, health indicators and prioritizations are determined with short-, medium- and long-term projections depending on the frequency and importance of the problem.
- 5) It is ensured to identify current situation and needs of the municipality, analyse its financial, technical and labour infrastructure and strengths and weaknesses in different subjects and make evaluations beginning from the general aspect of the MM and on the basis of neighbourhood and/or local region when required.
- 6) Planning is revised according to annual evaluations.
- 7) Analyses are revised in sudden social changes.
- 8) Indicators included in Annex-2 and Annex-3 are used during evaluations particularly including MoH reference evaluations.

In this frame;

- It is necessary to determine the method to follow in the implementation of each standard, responsible unit under the municipality and affiliated authorities, units to be cooperated with, protocols to follow in the implementation, monitoring and evaluation procedures and performance indicators.
- In this frame, it is necessary to conduct a current situation analysis by making evaluations on activities which are currently conducted in daily process directly or indirectly relating to public health, work flows, protocols and regulations included in laws and directives, and identify the required regulations and needs for capacity building and budget source to provide standards.
- Under the current situation analysis, public health profile and needs are identified by using socio-demographic characteristics, geographic structure, cultural situation, quality of life analysis, working condition, health indicators and prioritizations are determined with short-,

medium- and long-term projections depending on the frequency and importance of the problem.

- It is ensured to identify current situation and needs of the municipality, and analyse its financial, technical and labour infrastructure and strengths and weaknesses in different subjects. It is paid particular attention to make evaluations beginning from the general aspect of the MM and on the basis of neighbourhood and/or local region when required. Planning is revised according to annual evaluations and required revisions are applied to analyses in sudden social changes.
- The roles and coordination mechanisms of the stakeholders are clearly determined to provide effective coordination between central government and municipalities in all standards and between municipalities and other institutions, and relevant units of municipalities for the successful execution of implementation plans.
- Municipalities include the objectives determined in this field and activities to be undertaken in their strategic plans and performance programmes (during preparation and revision processes). It is anticipated that implementation plans and activities included in performance programme substantially correspond to each other and implementation plans indicate methods and protocols relating to these activities.
- When preparing the guideline and implementation plans, it is possible to use manuals published by relevant ministries including particularly MoH and technical specifications published by TSE in the relevant fields (urban planning, food and consumer safety, occupational health, areas supporting active living such as green spaces, sports fields, walking and bicycle roads etc., public transport vehicles, stops and stations, measurement and follow-up of service quality, cleaning, ventilation systems, waste management, nursing homes etc.).

#### **References:**

- Regulation on Procedures and Principles for Preparing Strategic Plans, Performance Programmes and Activity Reports in Public Entities (OG of 22.04.2021 issue 31462)
- Strategy and Budget Office of the Presidency (SBO) Strategic Planning Guide for Municipalities
- SBO Guide on Analysis and Methods for Strategic Planning
- Ministry of Treasury and Finance (MoTF) Guide for Preparing Performance Programme
- Annual Central Government Budget Preparation Guide or Guides prepared by Municipalities
- Strategic Planning Guide for Municipalities
- Guide on Analysis and Methods for Strategic Planning
- Environmental Public Health Performance Standards
- Public Health Information Services: Public Health Situation Analysis Standard Operating Procedures-WHO
- CDC Environmental Health Standards.
- WHO health indicators.
- Guidelines and data of MoH
- Data from TURKSTAT
- Data from MoLSS

- Studies of earth sciences
- Geographic analyses
- Legislative pieces on the matter

Theme	
Planning, Coordination	
<b>Standard</b>	<b>1.3. Include the protection of public health in Emergency Action Plans, create coordination mechanism and enable its operability</b>
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	MoLSS, MoEUCC, GDLG, MoI, MoH, MoTI, AFAD, Governorships, Centre of Transport Coordination, Provincial Directorate of Health, Provincial units of other relevant central institutions and local administrations, Provincial Public Health Institutions, TSE, District Municipalities, UMT, Professional associations, universities, NGOs

It is necessary for the protection of public health to implement action plans in a rapid and coordinative way during emergencies such as earthquake, flood, fire, pandemic, terrorism etc. Moreover, it has critical importance that public transport systems are not interrupted and proceed smoothly in order for meeting the needs of the society, continuity of service delivery and mobility as well as first aid delivery in case of disaster and emergencies.

In this frame;

- It is ensured that the roles and coordination mechanisms of the stakeholders are clearly determined to provide effective coordination between central government and municipalities in all standards and between municipalities and other institutions, and relevant units of municipalities in order for the successful execution of implementation plans. It is also ensured that emergency action plans are prepared to identify general and regional risks by performing regular risk assessments and to urgently carry out inter-institutional and municipal precautions relating to public health in cases where urgent action is required such as pandemic, fire, earthquake, flood etc. by developing risk reduction strategies.
- It is ensured to identify local risk profile by using geographic situation, social risks, socio-cultural condition and other health indicators and needs depending on different risk conditions, and prioritize preventive approach and supportive activities for the continuity of public health, healthy life and society of good quality.
- Action plans are created by evaluating the local, national and international effects of emergencies including particularly our country.
- Risk assessments are regularly conducted in the context of Emergency Plans and risk mitigation strategies are developed.
- Preventive and restrictive measures that will be taken during public health preparedness, emergency response (intervention) and recovery phases are included in plans.
- It is ensured to identify current situation and needs of the municipality and analyse strengths and weaknesses in different subjects.

- Planning is revised according to annual evaluations.
- Analyses are revised in sudden social changes.
- Current situation analyses are conducted for national and international natural disaster and risks.
- Indicators included in Annex-2 and Annex-3 are used during evaluations particularly including MoH reference evaluations.

**References:**

- Studies of earth sciences
- Geographic analyses
- WHO health parameters
- Guidelines and data of MoH
- Data from TURKSTAT
- Data from MoLSS
- Law on Occupational Safety and Health (OG of 30.06.2021 issue 28339)
- Regulation on Emergencies at Workplaces (OG of 18.06.2021 issue 28681)
- Regulation on Disaster and Emergency Response Services (OG of 18.12.2021 issue 28855)
- Regulation on Health Services in Disasters and Emergencies (OG of 25.05.2021 issue 31491)
- Legislative pieces on the matter
- Standards relating to TSE
- MoTF Guide on Public Internal Control
- Internal Control Plans of Municipalities

Theme	Planning, Coordination
Standard	<b>1.4. Regulate obligations relating to public health in regulations and contracts on public services which are not directly provided by municipalities and build its relationship with budget</b>
Responsible Institutions	MMs
Related Institutions	MoEUCC, GDLG, TSE, UMT

- It is ensured to identify supportive programme and activities for preventive approach and public health and continuity of healthy life and society of good quality by identifying priorities for public health and build relationship between the programme and budget.
- The programmes and main activities will be identified in this stage on the basis of priorities. Identified programmes will be related with the strategic plan and annual performance

programme of the institution and prepared plan and programme proposals will be shared with senior management. At this stage, it is provided that programmes and activities relating to awaited public health will reflect to strategic plan, performance programme and accordingly budget of the institution.

**References:**

- Regulation on Procedures and Principles for Preparing Strategic Plans, Performance Programmes and Activity Reports in Public Entities (OG of 22.04.2021 issue 31462)
- SBO Strategic Planning Guide for Municipalities
- SBO Guide on Analysis and Methods for Strategic Planning
- MoTF Guide for Preparing Performance Programme
- Annual Central Government Budget Preparation Guide or Guides prepared by Municipalities
- Legislative pieces of relevant institutions

Theme	Planning, Coordination
<b>Standard</b>	<b>1.5. Create coordination mechanism and enabling its operability</b>
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Other municipalities, Healthcare administrations and institutions in the province (Public health institution and other institutions) Provincial units of other central institutions Universities and relevant NGOs

In order to have an effective coordination between central government and municipalities; at local level between municipalities and other institutions, and relevant units of the municipalities to carry out implementation plans relating to the standards in a healthy way, different roles of the stakeholders on public health should be clearly identified within the framework of implementation plans and it should be enabled to proceed in coordination.

**3.2. Implementation**

Theme	Current Situation Analysis
<b>Standard</b>	<b>2.1. Perform current situation analysis for assessment process of identified public health priorities in accordance with the changing conditions</b>
<b>Responsible Institutions</b>	MMs

	Healthcare Department under MM (R) Senior Management Financial Services Department Other relevant head of departments
<b>Related Institutions</b>	Healthcare administrations and institutions in the province Directorates and boards of other central government units and related institutions in the province Relevant ministries Professional associations Universities NGOs

Reassessment of the strategic plan which is in practice according to the current situation is carried out in accordance with the following parameters:

- Current situation analysis of the society
- Current problems and risks analysis, operational and strategic risks
- Strengths-Weaknesses-Opportunities-Threats (SWOT) Analysis
- Legislative analysis and senior policy documents analysis
- Identify areas of activities and place of delivery for goods and services with up-to-date data
- Stakeholder analysis
- Internal analysis
- Political, Economic, Social, Technological, Legal and Environmental (PESTLE) analysis
- Regional intensity analysis
- Impact analysis of identified public health risks/problems
- Performance indicators
- Indicators included in Annex-2 and Annex-3 are used during evaluations particularly including MoH reference evaluations.
- Figure 2 is provided as an example for assessment (Vector analysis chart)

**References:**

- WHO health indicators
- Guidelines and data of MoH
- Data from TURKSTAT
- Data from MoLSS
- Studies of earth sciences
- Geographic analyses
- Regulation on Procedures and Principles for Preparing Strategic Plans, Performance Programmes and Activity Reports in Public Entities (OG of 22.04.2021 issue 31462)
- SBO Strategic Planning Guide for Municipalities
- SBO Guide on Analysis and Methods for Strategic Planning
- MoTF Guide for Preparing Performance Programme
- Annual Central Government Budget Preparation Guide or Guides prepared by Municipalities

- Legislative pieces of relevant institutions

Theme	Implementation
<b>Standard</b>	<b>2.2. Implementation of salutogenesis (positive health, recovery) and pathogenesis (root analysis, risks and reasons analysis) methods if identified situation caused public health problem</b>
<b>Responsible Institutions</b>	MoTI, MMs
<b>Related Institutions</b>	Healthcare administrations and institutions in the province Directorates and boards of other central government units and related institutions in the province Relevant ministries Professional associations Universities NGOs

Solution process for the prioritized public health problem is started according to the legislation. During the solution process, guidelines and legislative pieces of relevant ministries especially MoH, if any, are applied.

If there is no legislative regulation or guideline about the relevant problem, this is reported in writing to the Provincial Directorate of Health. At the same time, it should be also contacted with MoH, Public Health Directorate.

Some practices are carried out for the solution of coordination problem of MoH.

The cause of the identified public health problem is determined.

If any, guidelines/regulations for the reduction/elimination of the reason for identified public health problem are applied and if not, it is contacted with MoH.

An up-to-date working protocol is created for implementation or current protocols are revised.

Activities and projects for solution are identified.

It is ensured to have efficiency in terms of costs and technique/information/personnel infrastructure efficiency.

Performance indicators are established.

**References:**

- WHO health indicators
- Guidelines and data of MoH
- Relevant legislation

Theme	Implementation
<b>Standard</b>	<b>2.3. Implement rehabilitation methods for diseases caused by identified public health problem</b>
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	MoH and other ministries TSE, Healthcare administrations and institutions in the province Directorates and boards of other central government units and related institutions in the province Professional associations Universities NGOs

Activities for reducing social damage caused by public health problems which are identified by prioritization are conducted according to the legislation/guidelines relating to the subject.

**References:**

- WHO health indicators
- Guidelines and data of MoH
- Relevant legislation

Theme	Implementation
<b>Standard</b>	<b>2.4. Conduct activities in accordance with the planning of city in a way to support healthy life and quality of life</b>
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	MoH and other ministries TSE, Healthcare administrations and institutions in the province Directorates and boards of other central government units and related institutions in the province Professional associations Universities NGOs

To facilitate the preparation of implementation plans of municipalities, ensure efficiency, standardization and measurability, it is primarily necessary to develop standards by considering technical, economic and environmental factors along with cooperation between relevant institutions in the coordination of MoEUCC.

Implementation plans of municipalities may vary according to geographic and socio-demographic characteristics. Implementation plans should be prepared within the framework of guideline to be prepared by MoEUCC, General Directorate of Local Governments and by considering technical standards published by TSE in relevant fields to be able to provide applicability, social compliance and coordination among sectors and be guiding for municipalities. It is ensured to encourage people for walking or riding a bike to go to work, school and other local places by creating an attractive, safe and useful environments which also support healthy life. It is also ensured to support outdoor mobility, promote healthy water, provide adequate and safe waste system, reduce air and noise pollution, plan correct transport, and create adequate resting opportunities in development plans and equal distribution of these on the basis of their needs within the society and provide appropriate transport to these places.

#### References:

- ISO 37120
- Urban Design Guide (MoEUCC)
- Spatial standards and plans in urban planning
- Regulation on Making Spatial Plans
- Studies of earth sciences
- Geographic analyses
- Standards for sports fields
- Standards for transport
- TSE standards for environmental waste and other standards on this issue
- Standards (collective documents) relating to all fields of hygiene
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications (transport, rehabilitations, nursing homes, other green spaces etc.)
- All standards relating to the waste (domestic and medical)
- All standards relating to sewer system
- Standards to prevent diseases which are infected with zoogenetic and other environmental ways
- All legislative pieces and standards for occupational health and worker's health
- All standards about living spaces, production areas etc. relating to environmental pollution
- Regulations relating to compliance of drinking water with health
- Standards relating to nursing homes, kindergarten and schools
- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH

Standard	2.5. Carry out activities to support healthy nutrition
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoAF MoFSS MoLSS MoNE Professional associations NGOs University Related Institutions

It is ensured to develop and carry out community-based multisectoral policies that will affect production, marketing and consumption of goods promoting healthy nutrition in all society

It is provided to support life-long healthy nutrition skills and eliminate inequalities especially for disadvantaged groups. It is important to eliminate starvation, provide food safety, improve nutrition opportunities and support sustainable agriculture; assure everyone to have access for safe, nutritious and sufficient amount of food especially the poor and children and raise the awareness of society and individuals to support reducing malnutrition and diseases relating to nutrition.

It is ensured to carry out policies and plans for the solution of problems depending on nutritional disorders such as both obesity and malnutrition primarily for disadvantaged groups (women, children, pregnant women and women with babies, elderly, people with disabilities, workers, migrants, poor people, people with chronic diseases, prisoners, addicted people etc.) in the delivery of health services and especially protective services, conduct awareness-raising activities, provide training courses , make inspections at schools, canteens and production facilities and promote healthy nutrition.

Approaches specific to their own region are applied and the risk, advantage and disadvantages are taken into consideration.

**References:**

- TSE standards for Nutrition and Food
- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Guidelines and documents of MoAF
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.6.</b> Create and support appropriate background and carry out activities to promote active life
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	MoH MoYS Central and provincial units of other relevant ministries Other local administrations MoEUCC MoTI MoAF Local administrations MoFSS MoLSS Professional associations NGOs Universities and Related Institutions

It is ensured to conduct policies and planning to create life-long healthy living spaces and support physical activities.

**References:**

- ISO 37120
- Urban Design Guide (MoEUCC)
- Spatial standards and plans in urban planning
- Regulation on Making Spatial Plans
- Standards for sports fields
- Standards for bicycle and walking roads
- Arrangements of open spaces, parks and gardens
- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

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Theme	Implementation
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<b>Standard</b>	<b>2.7.</b> Conduct environmental arrangements for people with walking and other types of disabilities
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	MoH MoEUCC MoTI MoAF Local administrations MoYS MoFSS MoLSS Professional associations NGOs University and Related Institutions

It is ensured to create quality and healthy living spaces for people with disabilities as well as decide and implement activities for the participation of people with disabilities in active life.

**References:**

- ISO 37120
- Urban Design Guide (MoEUCC)
- Spatial standards urban planning
- Regulation on Making Spatial Plans
- Standards for sports fields
- Standards for bicycle and walking roads
- Arrangements of open spaces, parks and gardens
- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

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Theme	Implementation
<b>Standard</b>	<b>2.8.</b> Promote smart-circular production and consumption and eliminate waste in a healthy way as well as conduct activities for its assessment where applicable

<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	MoH MoAF MoLSS Other relevant ministries Local administrations Professional associations NGOs University and Related Institutions

Policies and plans are conducted to create life-long healthy living spaces.

It is ensured to create and plan environmental arrangements in a way to support healthy life, prevent environmental pollution and communicable diseases, design production facilities in accordance with minimal waste, promote circular production, forward residuals to high value-added production, reduce loss of water and other energy types, check hazardous waste and evaluate and check domestic, medical and chemical waste separately.

#### References:

- ISO 37120
- TSE standards for environmental waste
- Standards for all fields of hygiene (public transport, rehabilitation, nursery, other living spaces etc.)
- All standards for waste (domestic and medical)
- All standards for sewer system
- Standards to prevent diseases which are infected with zoogenetic and other environmental ways
- All legislative pieces and standards for occupational health and worker's health
- All standards about living spaces, production areas etc. relating to environmental pollution
- Regulations relating to compliance of drinking water with health
- National and international legal process
- WHO documents
- Reports, guidelines and other documents of WHO
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making(?) institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.9.</b> Apply disinfection in all areas in a way to be appropriate for health and comply with hygienic measures
<b>Responsible Institutions</b>	MMs

<b>Related Institutions</b>	Local administrations, MoH Other relevant ministries
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Toilets and sewers are controlled in all areas (waste, public transport, public places, day-care centres, nursing homes etc.) where local administrations provide service in accordance with

Control of drinking water and inspection for its compliance of with health are performed in compliance with relevant guidelines.

It is provided in accordance with legal documents that restaurants, food production facilities and marketing places comply with general hygiene.

It is ensured that all these activities are practiced in accordance with the guidelines prepared by MoH and other relevant ministries.

**References:**

- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.10.</b> Carry out activities to protect ecosystem and provide healthy environmental conditions; plan activities to reduce air, noise and environmental pollution and support green energy
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations and relevant ministries Other institutions

It is ensured to take emergency steps to check climate change and its negative effects and integrate measures relating to climate change into national policies, strategies and plans. It is highly critical to protect all our living spaces which are forests, seas, water resources, air etc. It is prioritized to protect and restore ecosystems and provide their sustainable use for a sustainable healthy life; and conduct studies to protect forests, combat with desertification, stop and reverse the loss of productivity and stop the loss of bio-diversity. These activities are prioritized and differentiated according to local characteristics and needs. In this frame, smart urbanization practices are significant.

Selection and control of agricultural and industrial areas are organized in a way not to damage ecosystem.

It is ensured to have approaches for the compliance of national and international legal process with this.

**References:**

- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.11.</b> Support healthy life and participation of all individuals and disadvantaged groups who need social and economic support in society and active life
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	MoH MoYS MoLSS Professional associations NGOs University and Related Institutions

Appropriate social service model is identified for individuals and families who need social and economic support. Social and economic support are provided for individuals, families and disadvantaged groups who need social or economic support and cannot find opportunity to earn a living at minimum subsistence level for any reason by meeting their social needs in an equal and comprehensive way

It is ensured to open nursing homes and provide current nursing homes to operate as appropriate for health.

The elderly, people with disabilities, children under social risk, women and all other disadvantaged groups are supported and provided with training courses. Common projects are conducted in cooperation with relevant ministries, NGOs, private sector, public institutions and universities.

**References:**

- Regulations on public welfare facilities
- Ministry of National Education (MoNE) Regulation on Private Education Institutions
- Regulation on Private Vocational Rehabilitation Centres
- National and international process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health

- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.12.</b> Carry out activities to reduce use and addiction of hazardous substances
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	MoH MoFSS MoLSS MoNE Local administrations Professional associations NGOs University and Related Institutions

Studies are conducted to reduce the use of tobacco and alcohol products as well as addictive substances that are commonly used in our country. There are also studies planned for internet addiction and other addictions. It is provided to support disadvantaged groups by carrying out studies on public health to reduce addiction of tobacco, alcohol, drugs and other substances, identifying and prioritizing risk groups, raising awareness of individuals and society, providing training courses, supporting rehabilitation centres, encouraging vocational achievement. Activities are also carried out for problems such as internet addiction which is accepted among other addictions.

#### References:

- Implementation Manual of WHO Framework Convention on Tobacco Control
- Implementation Manual of Smoke-free Air Zone
- MoH, National Strategy Paper and Action Plan on Combating Drugs
- National Strategy Paper and Action Plan on Combating Behavioural Addictions 2019-2023
- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
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<b>Standard</b>	<b>2.13.</b> Support migrants' healthy life and participation in social health
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoI, General Directorate for Migration Management Other Related Institutions NGOs Universities

It is ensured to provide social participation of migrants in places where these people live intensely and support their adaptation to active life in order to promote their participation in active life, resolution of their problems, healthy lives, to overcome the problems resulting from language and culture barrier and to increase their Access to health services.

**References:**

- Regulation on Migrants' Health
- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

<b>Theme</b>	<b>Implementation</b>
<b>Standard</b>	<b>2.14.</b> Support adolescents' healthy life, personal development and active participation in life
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoFSS MoLSS MoNE MoYS Professional associations

	NGOs Universities and Related Institutions
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It is ensured to support development of all ages beginning from childhood, provide support to give nutritional, educational and social rights, create programmes for vocational achievement and vocational development, carry out activities for preventing and reducing addictions, promote healthy life and mobility, create and improve playgrounds and sports fields and increase their numbers. It is provided support to carry out activities, training courses and awareness-raising to support personal development

**References:**

- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.15.</b> Support elderly access to health services and participation in active life and society
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoFSS MoLSS Professional associations NGOs Universities and Related Institutions

Local programmes are developed, monitored and evaluated to improve and promote elderly health services. It is ensured to improve elderly care centres and increase access.

It is ensured to deliver home care services.

It is provided support for elderly to have access to health services.

It is supported to promote elderly healthy nutrition and participation in active life.

It is provided support for activities to prevent age-related chronic-noncommunicable diseases.

It is provided support for healthy aging process.

**References:**

- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.16.</b> Support lifelong woman-child health and reproductive health
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoFSS MoLSS MoYS MoNE Professional associations NGOs Universities and Related Institutions

It is provided support for studies to protect and improve reproductive health of women and men for life-long.

It is provided support to inform and support women who are between the ages of 15-49 in reproductive age about these subjects and carry out studies to reduce mother-child deaths.

It is ensured to provide information, consultancy and required support to protect and improve health during marriage and pregnancy and integrate training courses into vocational training courses.

Women in reproductive age are informed.

It is ensured that women are strengthened with vocational training courses for women.

It is ensured that women and children maintain their training.

It is ensured that day-care centres, childcare centres, shelters, rehabilitation centres comply with standards.

**References:**

- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health

- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.17.</b> Support to improve rehabilitation of disadvantaged groups and carry out activities that are supportive for healthy life
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoFSS MoLSS Ministry of Culture and Tourism Professional associations NGOs Universities and Related Institutions

It is ensured to provide rehabilitation of disadvantaged groups and raise awareness of the society on this matter.

It is ensured that centres for elderly, women, children and people with disabilities comply with health.

It is provided support for centres to support healthy life.

#### References:

- Directorate of Special Training and Rehabilitation Centres of the MoNE
- Regulations and guidelines for elderly care centres
- Physical therapy centres
- Control of thermal spring and other facilities
- Legal processes relating to health tourism
- MoNE Regulation on Private Education Institutions
- Regulation on Private Vocational Rehabilitation Centres
- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
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<b>Standard</b>	<b>2.18.</b> Support activities to reduce communicable diseases
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoFSS MoLSS MoEUCC MoTI MoAF MoNE Professional associations NGOs Universities and Related Institutions

It is ensured to support programmes for the control of communicable diseases in coordination with MoH and other relevant ministries and make these programmes be conducted.

It is provided support to ensure compliance with standards for hygienic measures and health in activities that may pose a risk for communicable diseases, carry out necessary inspections, raise awareness of individuals, society and employees.

It is ensured that MoH is supported in the fields of vaccination, disinfection, waste control which are critical for the control of communicable diseases and the waste is eliminated in compliance with health standards.

It is ensured to carry out activities in coordination with MoH under pandemic conditions and support home care services during pandemic.

It is provided support to raise awareness of individuals, society, businesses, employees of the municipality on using biocidal products, combat insects and disinfection.

**References:**

- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

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Theme	Implementation
<b>Standard</b>	<b>2.19.</b> Support protection of animal health

<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoLSS MoEUCC MoTI MoAF Professional associations NGOs Universities and Related Institutions

It is ensured to support activities for the control of zoonotic and vectorial epidemics, provide control of stray animals and carry out activities to reduce infection through waste, food and other ways.

Activities are carried out to support animal health in livestock breeding and similar activities.

It is supported to train and raise the awareness of individuals, society and employees.

#### References:

- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.20.</b> Conduct activities for consumer access to healthy and safe food
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoAF Professional associations NGOs Universities and Related Institutions

Activities are conducted on healthy food consumption of individuals in coordination with MoAF and MoH.

Educational and awareness-raising activities are conducted on food safety in coordination with relevant ministries.

It is ensured to conduct activities in legal framework for the compliance of food production and marketing facilities to healthy and safe food delivery.

It is supported the delivery of safe, healthy and hygienic products for customer needs in a healthy and hygienic environment and in accordance with conditions which are suitable for legal regulation and food safety conditions by making all necessary controls in each stage beginning from production until marketing and service delivery.

**References:**

- National and international legal process
- Food and Agriculture Organization (FAO) Documents
- European Food Safety Authority (EFSA) Documents
- WHO documents
- Reports, guidelines and other documents of MoAF
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.21.</b> Carry out activities to prevent noncommunicable diseases
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoFSS MoLSS MoEUCC MoTI MoAF MoNE Professional associations NGOs Universities and Related Institutions

Activities are supported for the prevention and control of noncommunicable diseases and chronic

conditions.

Awareness-raising activities are supported for the reduction of salt and sugar consumption.

It is ensured to perform training courses on awareness-raising and early diagnosis of cancer in coordination with MoH and in cooperation with relevant institutions.

It is provided support to raise awareness of individuals and society on diseases that can be prevented by changing life style such as diabetes, hypertension and fatty liver disease.

Activities are carried out to support healthy and quality life from birth until old-age.

Awareness-raising studies are conducted in fields such as mobility, healthy nutrition, protection of mental health, stress-free living.

It is provided support to prevent chronic diseases through smart urbanization.

Activities are carried out to get through chronic diseases depending on mental and physical problems at work environment.

**References:**

- National and international legal process
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

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Theme	Implementation
<b>Standard</b>	<b>2.22.</b> Provide occupational safety and health
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoLSS Professional associations NGOs Universities and Related Institutions

It is ensured to provide required training for employees on occupational safety and health, carry out activities to ensure compliance of workplaces with occupational safety and health in legal framework, conduct risk analyses for occupational safety and health, create emergency action plans and promote working in safe and healthy environments.

**References:**

- National and international legal process
- Law No. 6331 on Occupational Safety and Health
- WHO documents

- Reports, guidelines and other documents of MoH and MoLSS
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Implementation
<b>Standard</b>	<b>2.23.</b> Work to make society ready for emergencies and natural disasters, to take place for intervention in emergencies and get back into standard living in a safe and healthy way
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Local administrations MoH MoLSS All relevant ministries Professional associations NGOs Universities and Related Institutions Private sector

Make preparations for national emergency and natural disasters as well as according to geographic region and socio-demographic characteristics where they are located and their own risks, act in accordance with national action plans, prepare required technical and human infrastructure to make national and local action plans applicable.

Ensure control of waste in cases such as flood, fire and pandemic

Provide required support for the society to get back into their Daily life in emergencies

It is supported to provide required support and assistance to the elderly and disadvantaged groups, meet the needs of individuals who are quarantined at home and it is ensured to control medical and domestic waste.

Determine measures that are required in public living spaces and public transport vehicles to protect social health during COVID-19 period and provide the delivery of these services in coordination with relevant ministries.

Support and arrange activities to raise awareness of the society about emergencies, natural disasters and pandemic.

Work in coordination with relevant ministries to prevent failures in logistic system and service delivery in case of emergencies.

**References:**

- National and international legal process
- WHO documents

- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

### 3.3. Training and Awareness-Raising

Theme	Training
<b>Standard</b>	<b>3.1 Plan and carry out training for the implementers and society</b>
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	MoH Relevant ministries Other municipalities Provincial units of other relevant central institutions Professional associations NGOs and universities

- It is ensured to create up-to-date implementation methods and training for municipality personnel about national and local public health risks, healthy life, quality urbanization, provide cooperation with relevant institutions during training, prepare documents for the integration of public health in direct and indirect activities of the municipality, conduct regular documentation for theoretical and practical training courses on relevant legal processes, activities of institution that can be cooperated with and crisis management, public communication and stress management in different cases, natural disasters and emergencies.

#### References:

- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Training
<b>Standard</b>	<b>3.2 Carry out training courses for the trainers about planned training subjects</b>

<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Provincial Directorate of Health Other Related Institutions

- It is ensured to make planning by using training documents created through up-to-date implementation methods and training for municipality personnel about national and local public health risks, healthy life, quality urbanization, and cooperation with relevant institutions during training.
- Trainers are trained about prioritized subjects in the field of public health in coordination with relevant ministries including particularly MoH to be able to promote on-site training.

#### References:

- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	Training- Raising awareness of implementers
<b>Standard</b>	<b>3.3</b> Train municipality personnel and management about public health
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Provincial Directorate of Health Other Related Institutions

- It is ensured to make planning by using training documents created through up-to-date implementation methods and training for municipality personnel about national and local public health risks, healthy life, quality urbanization, and cooperation with relevant institutions during training.
- It is ensured to prepare documents for the integration of public health in direct and indirect activities of the municipality, conduct regular documentation for theoretical and practical training courses on relevant legal processes, activities of institution that can be cooperated with and crisis management, public communication and stress management in different cases, natural disasters and emergencies.
- In this frame, MMs should provide in-service training on standards for public health, implementation plans, protocols, basic legislation on public health, basic occupational health and safety rules and emergency plans to drivers and other personnel in

coordination with provincial directorates of health at the start of employment and periodically.

- When implementation plans are updated in the context of needs, training on new practices and protocol should be provided to personnel working in relation to updated field.
- The following points are determined when making annual planning for in-service training courses:
  - Training subjects
  - Duration of training courses according to subjects
  - Calendar planning for training courses to be carried out in more than one session
  - Competency (academic and professional training) of the personnel (of trainers when the service is outsourced) who will provide training
  - Number of personnel and participants who are the target group of the training

In this frame, it is required in the planning of training to fill the forms included in Annex-1.

**References:**

- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	
<b>Standard</b>	<b>3.4 Plan and implement activities to promote and raise awareness of society on healthy life</b>
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Provincial Directorate of Health MoH MoEUCC MoTI MoAF MoFSS MoLSS MoYS Professional associations Universities and Related Institutions

Provide information for and raise the awareness of the public by prioritizing the following subjects in terms of regional characteristics:

- The importance of public health
- One health concept
- Health literacy
- Protection from communicable diseases
- Protection from non-communicable diseases and early diagnosis
- Smart cities and society
- Healthy nutrition
- Active life
- Barrier-free living
- Waste, smart-circular production and consumption
- Cleaning and disinfection
- Air and noise pollution, green energy
- Social assistance and facilities
- Addictions
- Migrant health
- Adaptation to climate change
- Adolescent health and self-development
- Elderly health
- Mother-child health
- Rehabilitations
- Prevention of communicable diseases
- Animal health
- Food safety
- Occupational safety, Basic occupational safety and health rules
- "Prevention of non-communicable diseases
- Disadvantaged groups
- Community mental health
- Sexual health
- Water security
- Tourism health
- Emergencies and natural disasters
- Zero waste
- Disaster, emergency and crisis management
- First aid and rescue
- Communication in the society
- Stress management

- Awareness-raising activities are carried out by MMs through announces, boards, travel planning, social media etc. at vehicles and stations relating to public health standards and implementations in coordination with provincial directorates of health.
- It will be useful to publish public service announcements to be prepared by MoH about the protection of public health.
- It is required in the planning of training to fill the forms included in Annex-1 by being revised according to the public.
- The competency of the drivers is inspected with exams held after the training courses. The clarity and objective evaluation are ensured by determining the specifications of the exams as well as principles and procedures relating to preparation and evaluations of exams by way of arrangements to be carried out in the municipality.

#### References:

- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

### 3.4. Inspection, Monitoring and Review

Theme	Inspection, monitoring
<b>Standard</b>	<b>4.1. Evaluate opinions and complaints of the society</b>
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	All municipalities and relevant units Other relevant local administrations when required

- It is ensured to create monitoring and inspection mechanisms for compliance with public health standards and establish inspection procedures, officer and sanctions. In this frame, procedures and principles are established with a regulation to be prepared by receiving opinions of relevant ministries and other relevant institutions in relevant fields including particularly MoH.
- Evaluations are conducted by monitoring changes of hazards in relevant public health problems, the follow-up of the implementation process of guidelines and standards, evaluation of indicators in relevant guidelines and changes in public health parameters.
- Easy and effective communication mechanisms are created to receive the requests, evaluations and complaints of the society relating to public health services.
- It is possible to use call centres, online systems, mobile applications and kiosks to be placed in crowded stations for the communication in question.

- Necessary measures are taken to ensure that persons with disabilities also communicate their request, evaluations and complaints.
- Assignment is executed to conduct a preliminary examination on which units opinions and requests will be referred to from the municipality and affiliated administrations.
- A maximum period is specified to examine opinions and requests which are referred to relevant units.
- A monitoring system is created for the solution of requests and problems.
- Society is provided with feedback for the evaluation of requests and complaints.

**References:**

- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

Theme	
<b>Standard</b>	<b>Inspection, monitoring</b>
<b>Responsible Institutions</b>	<b>4.2. Monitor and inspect compliance of society with public health standards</b>
<b>Related Institutions</b>	MMs Other local administrations MoEUCC GDLG MoH MoI

It is necessary to create monitoring and inspection mechanisms for compliance with public health standards in the society and establish inspection procedures, officer and sanctions.

In this frame;

- Principles and procedures are determined by MMs relating to inspection for compliance of the society with standards and sanctions to be implemented in relevant regulations and other relevant secondary and tertiary regulations (regulations on health, municipal police etc.).
- Both routine and unplanned spot site inspections are conducted by MMs in accordance with the provisions relating to inspections and sanctions included in the legislation and contracts signed with business operators.
- Inspections are conducted by relevant units of the municipalities (transport, health and municipal police units) in coordination.
- Notices and complaints received through communication channels are evaluated.
- Different cameras and tracking systems are used.

- The compliance criteria for public health standards and implementations should be included in the criteria relating to measurement and evaluation of the quality of municipal services that are directly or indirectly related to public health.

**References:**

- Law on Misdemeanours (OG of 30.03.2005 issue 25772-bis)
- Documents of effective and rule-making institutions in national and international legislative process

Theme	Monitoring, review
<b>Standard</b>	<b>4.3. Evaluate and report compliance with standards, periodically review their applicability and effectiveness in terms of changing conditions and revise standards and implementation plans when required</b>
<b>Responsible Institutions</b>	MMs
<b>Related Institutions</b>	Healthcare administrations and institutions in the province Directorates and boards of other central government units and related institutions in the province Relevant ministries Professional associations Universities NGOs

It is necessary to review and revise if necessary the standards and implementation plans according to changing conditions, restrictions, targets for service quality, new technologies and passengers' requests on regular basis.

In this frame;

- Municipalities prepare annual "Monitoring and Evaluation Report on the Implementation of Public Health Standards in Municipalities" to evaluate compliance with standards, identification of problems encountered in the implementation and review the applicability and effectiveness of standards and implementation plans.
- Reporting on compliance with standards are conducted in accordance with activity reports as it is provided that policies and activities will be included in strategic plans and performance programmes relating to standards determined.
- In addition to annual evaluations, standards and implementations plans are also reviews during recovery period after disasters and emergencies. The course of COVID-19 pandemic is also another factor which will require review in the implementation.
- Municipalities prepare monitoring and evaluation report by filling "Monitoring and Evaluation Form for Standards and Activities" included in Annex-2 for each standard.
- Municipalities submit the monitoring and evaluations report which they prepared to MoEUCC along with the activity reports. MoEUCC evaluates municipalities' compliance with standards and revision proposals relating to standards and revises the standards when necessary.

- Municipalities performs necessary changes in implementation plans when required after monitoring and evaluation process.
- The evaluations of actualizations relating to compliance with service standards are also included in annual Local administrations General Activity Report by MoEUCC.

**References:**

- Regulation on Procedures and Principles for Preparing Strategic Plans, Performance Programmes and Activity Reports in Public Entities (OG of 22.04.2021 issue 31462)
- SBO Strategic Planning Guide for Municipalities
- MoTF Guide for Preparing Performance Programme
- Court of Accounts Activity Reports Evaluation Guide
- WHO documents
- Reports, guidelines and other documents of MoH
- Guidelines published by national representatives of expert associations in the field of health
- Documents of effective and rule-making institutions in national and international legislative process
- National and international scientific publications

## Annexes

### Annex-1. In-Service Training Form

<b>Subject of Training</b>	
<b>Objective of Training</b>	
<b>Target Group</b>	
<b>Number of Personnel to Receive Training</b>	
<b>Content of Training</b>	<ul style="list-style-type: none"><li>• ....</li><li>• ....</li><li>• ....</li></ul>
<b>Duration of Training</b>	Theoretical training: ..... hour(s) Practical training: ..... hour(s)
<b>Training Planning*</b>	
<b>Competency of Trainers**</b>	
<b>Training Materials</b>	

\* The duration and calendar of training courses on the basis of subjects will be written for training courses to be provided in more than one session.

**Annex-2. Monitoring and Evaluation Form for Standards and Activities**

<b>Standard ....</b>			
<b>Strategic Goal *</b>			
<b>Strategic Objective*</b>			
<b>Responsible Unit(s)</b>			
<b>Evaluation Period</b>			
<b>Relevant Activities Included in the Performance Programme</b>			
...1. ...2. .....			
<b>Performance Indicators relating to the Activities under Standard included in the Performance Programme</b>			
<b>Indicator</b>	<b>Baseline</b>	<b>Target</b>	<b>Actualization</b>
<b>Activities Carried out under the Standard</b>			
<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul>			
<b>Activities which have not been carried out during evaluation period under the standard</b>			
<ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul>			
<b>Basic Problems Encountered</b>			
<ul style="list-style-type: none"> <li>• ..</li> </ul>			

• ..	
<b>Need for Revision of Standard</b>	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Recommended Revised Standard</b>	
<b>Need for Revision of Implementation Plan</b>	<input type="checkbox"/> <input type="checkbox"/> Yes No
<b>Recommended Change in Implementation Plan</b>	
<b>Other Opinions and Evaluations</b>	
• ... • ...	

\* This indicates relevant strategic goal and objectives included in the Strategic Plan.

According to International Public Health Accreditation Board, it is recommended to carry out situation analyses for public health as follows ([www. phnci.org/innovations](http://www.phnci.org/innovations)):

1. Evaluate and monitor health status of the population, factors which affect health and needs and assets of the society
2. Research, diagnose and address health problems and hazards which affect population
3. Provide effective communication to inform and train people on health, factors which affect it and how it can be improved
4. Strengthen, support and mobilize communities and partnerships to improve health
5. Create, defend and implement policies, plans and laws which affect health
6. Benefit from legal and regulative actions which are designed to improve and protect public health
7. Provide an effective system that enables equal access to personal services and care which are needed to be healthy
8. Create and support a talented public health workforce that has diversity
9. Improve and renew public health functions through ongoing assessment, research and continuous quality improvement
10. Create and sustain a strong institutional infrastructure for public health

### **Annex-3. Situation Analysis relating to Activities of Emergencies for Public Health: Establishing and Prioritizing Public Health Standards**

When evaluating public health emergencies, it is necessary to carry out evaluations and emergency action plans by identifying level of impact on public health and business continuity, and local, national and international effects.

In this frame, there are national and international guidelines for national and international action plans and their creation.

In this frame, WHO recommends countries' local administrations to create their own action plans by taking into consideration the following parameters when making emergency action planning.

- 1- It is necessary to make local, national and international evaluation of public health effects of emerging incident and determine its limits.
- 2- Is the emerging public health problem an expected situation?
- 3- Is there any risk for the emerging public health problem to cause an international problem?
- 4- Does the emerging public health problem require limitations during travels?

MoH has previously created emergency action plan of Influenza Pandemic for communicable diseases. Most of the municipalities have started their activities by taking reference this action plan at the beginning of COVID-19 pandemic. MoH has created and published an action plan for public health and health of employees and the sustainability of service delivery through General Directorate of Public Health during COVID-19 period. It is important to make public health as well as health of employees and health services sustainable in all areas and prioritize continuity, by taking into consideration their impact on living spaces. When prioritizing these service deliveries, it is critical to capture short, medium and long-term social and economic effects of public health. In this context local administrations must create their own activities on the basis of guidelines. It is also presented as a pivot table how they can be included in the fields of policy-making, implementation, monitoring, follow-up and informing/raising awareness.

## Annex-4. Indicators That Can Be Used for Prioritizing Public Health Services

### 4.1 Indicators Recommended for Public Health Profile (Improving Health in the Community: A Role for Performance Monitoring 1997)

#### Socio-demographic characteristics

1. Distribution of population by age and race/ethnicity
2. Number and rate of people in groups which can be a source of concern in terms of Access to public services and sources such as migrants, homeless people or those who cannot speak local language
3. Number and rate of people who are aged 25 and older and educated lower than high school
4. Rate of students who have graduated from high school to students who were at ninth grade three years ago.
5. Average household income
6. Rate of children who are aged 15 or below and live in families at poverty level or below
7. Unemployment rate
8. Number and rate of single parent families
9. Number and rate of people with no health insurance

#### Health status

10. Baby mortality rate according to race/ethnicity
11. The mortality number by age, race and gender due to motor vehicle accidents, work-related injuries, suicide, murder, lung cancer, breast cancer, cardiovascular diseases and all reasons or mortality rates amended by age
12. Communicable diseases (AIDS, measles, tuberculosis and primary and secondary Syphilis incidence, and their distribution by age, race and gender accordingly)
13. Adolescent (between the ages of 10-17) birth rates in the scope of total live birth rate
14. Number and rate of verified abuse and negligence cases among children

#### Health Risk Factors

15. Rate of 2-year-old children who are vaccinated with all vaccines in accordance with their age as recommended by Advisory Committee on Immunization Practices
16. Rate of adults at the age of 65 and older who are vaccinated for pneumococcal pneumonia; rate of those who are vaccinated for influenza in the last 12 months
17. Rate of smoking population by age, race and gender
18. Rate of obese population who are aged 18 and older
19. Number and type of air quality standards of Environmental Protection Agency and number of standards which are not provided
20. Rate of rivers, lakes and estuaries that are considered to support beneficial use (for instance, those which are verified for fishery and swimming)

#### Consumption of Health Resources

21. Health expenditures per capita for Medicare beneficiaries (Adjusted Average Per Capita Cost [AAPCC] by Medicare)-prepared for USA

#### Functional Status

22. Rate of adults who have reported their general state of health as between good and great

23. Average number of days when adults have reported their physical or mental health as not good in the last 30 days

#### Quality of Life

24. Rate of adults who are satisfied with public health system
25. Rate of adults who are satisfied with quality of public life.

## **4.2. Health Indicators and Data according to European Union (EU) Regulations** [https://ec.europa.eu/health/indicators\\_data/indicators\\_en](https://ec.europa.eu/health/indicators_data/indicators_en)

### **Indicators of demographic and socio-economic Factors**

- Birth rate, unadjusted (raw)
- Live birth per one thousand people
- Income inequality – distribution by general population and age/gender
- Age distribution and educational levels of mothers (adolescent pregnancies, old mothers)
- Distribution of population below poverty line by age
- Population rate by gender/age

### **Population Projection**

- Total population projections, male population projections, female population projections
- Total population projections for age-group of 0-24
- Total population projections for age-group of 25-64
- Total population projections for age-group of 65 and older
- Fertility rate

### **Total unemployment**

- Unemployment rate, labour rate, rate of female/male, annual average, total population (between 15-74 years of age)

### **Health status indicators**

- Asthma: self-reported prevalence
- Chronic Obstructive Pulmonary Disease (COPD): self-reported prevalence
- Dementia / Alzheimer: Estimated number of dementia patients (Age-group of 30-95+)
- Physical and sensual functional restrictions
- Depression: self-reported prevalence
- Diabetes: self-reported prevalence
- Disease-specific mortality
- Drug-related deaths
- HIV/AIDS
- Health Expectancy: Healthy Life Years (HLY) since 2004
- Health Expectancy: Healthy Life Years (HLY) before 2004
- Infant death
- Low birth weight perinatal mortality
- Selected communicable diseases
- Injuries: at workplace, home, school or during leisure time: self-reported incidence
- Self-perceived health
- Self-reported chronic morbidity

## **Determinants of health indicators**

- Blood pressure
- Body mass index
- Fruit consumption
- Vegetable consumption
- Use of dangerous alcohol
- Particulate exposure
- Physical activity
- Regular smokers
- Social support
- Total (formal and informal) alcohol consumption
- Total (formal) alcohol consumption
- Illegal drug use
- Work-related health risks
- Health interventions: Health Service Indicators
- Health Insurance Coverage
- Medical Technologies (CT/MRI)
- Drug use
- Patient mobility
- Nurses
- General practitioners
- Selected outpatient treatment visits: self-reported visits
- Selected operations
- Rate of survival from cancer

## AMAÇ: TOPLUMDA VEKTÖRE BAĞLI HASTALIKLARI AZALTMAK

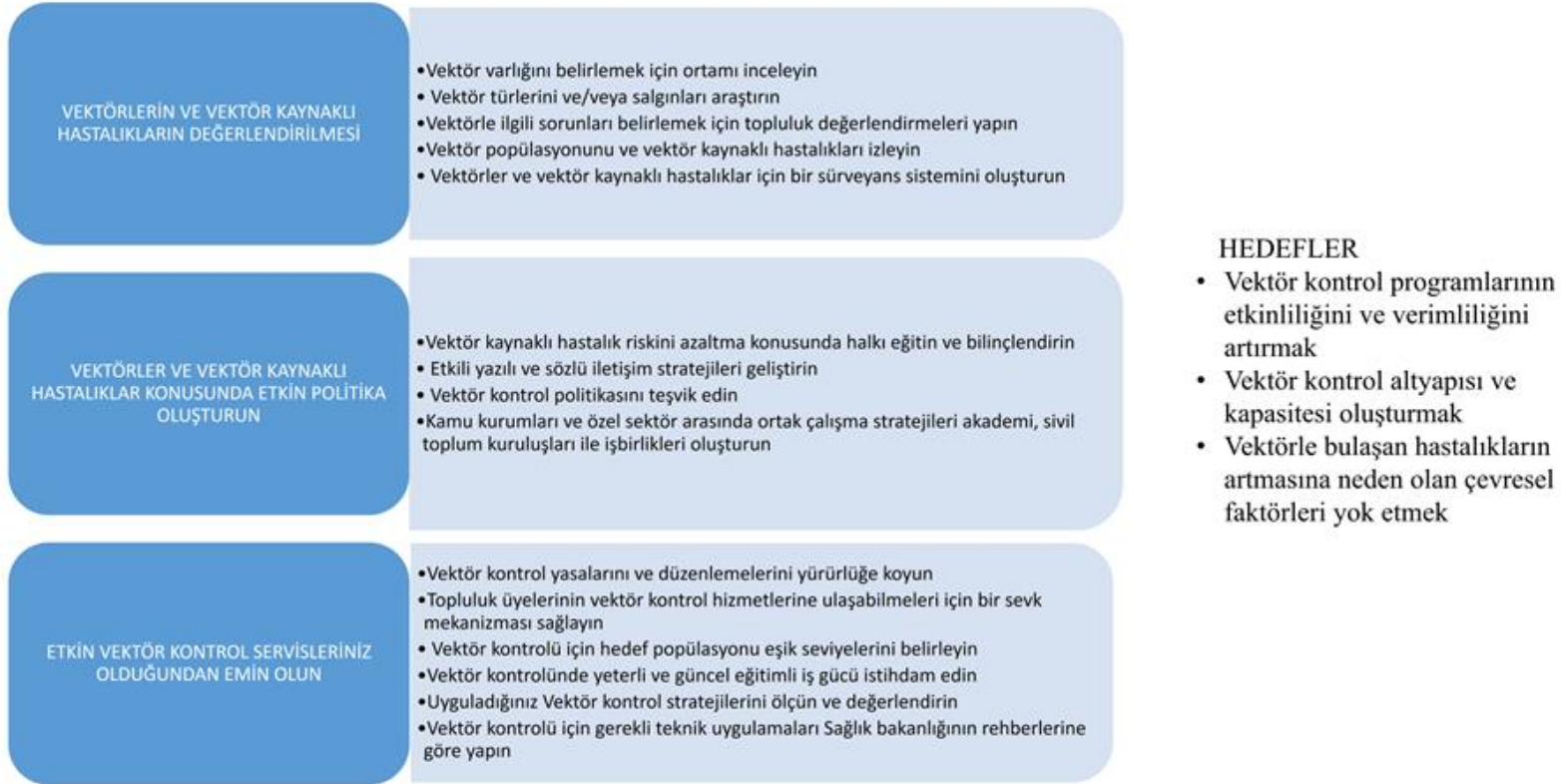


Figure 2: Basic schema for the implementation of Vector Control Programmes [EN translation next page]

<b>GOAL: REDUCE VECTOR-BORNE DISEASES IN THE SOCIETY</b>		
ASSESSMENT OF VECTORS AND VECTOR-BORNE DISEASES	<ul style="list-style-type: none"> <li>• Examine environment to determine the presence of vector</li> <li>• Research vector types and/or epidemics</li> <li>• Carry out public evaluations to determine vector-related problems</li> <li>• Monitor vector population and vector-borne diseases</li> <li>• Create a surveillance system for vectors and vector-borne diseases</li> </ul>	
CREATE EFFECTIVE POLICY ON VECTOR AND VECTOR-BORNE DISEASES	<ul style="list-style-type: none"> <li>• Train and raise awareness of the society on reducing vector-borne disease risk</li> <li>• Develop effective written and verbal communication</li> <li>• Promote policy on vector control</li> <li>• Create common working strategies between public and private sector entities, cooperation between academia and NGOs</li> </ul>	<b>OBJECTIVES</b> <ul style="list-style-type: none"> <li>• Increase effectiveness and efficiency of vector control programmes</li> <li>• Create infrastructure and capacity for vector control</li> <li>• Eliminate environmental factors which cause increase in vector-borne diseases</li> </ul>
ENSURE EFFECTIVE VECTOR CONTROL SERVICES	<ul style="list-style-type: none"> <li>• Bring into force laws and regulations on vector control</li> <li>• Provide a sending mechanism for community members to have Access to vector control services</li> <li>• Determine threshold levels of target population for vector control</li> <li>• Employ sufficient and up-to-date educated labour force in vector control</li> <li>• Measure and evaluate vector control strategies that you apply</li> <li>• Carry out necessary technical practices for vector control in accordance with the guidelines of MoH</li> </ul>	

**Figure 2: Basic schema for the implementation of Vector Control Programmes**