



Dr. Amarjit Singh
Additional Secretary (EE-I)
Tele.No.011-23381096

सत्यमेव जयते

भारत सरकार
मानव संसाधन विकास मंत्रालय
स्कूल शिक्षा और साक्षरता विभाग
शास्त्री भवन

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GOVERNMENT OF INDIA

MINISTRY OF HUMAN RESOURCE DEVELOPMENT
DEPARTMENT OF SCHOOL EDUCATION & LITERACY
SHASTRI BHAVAN

NEW DELHI-110 115

14th February, 2014

D.O. No. 13-20/2013-MDM 2-1

Dear

Anjali

The 5th Joint Review Mission under the leadership of Dr. A. Laxmaiah, Scientist 'F' and HoD, Division of Community Studies and Officer In Charge of NNMB, National Institute of Nutrition, Hyderabad, Andhra Pradesh, visited the State of Punjab during the period from 20th January, 2014 to 28th January, 2014 to review the implementation of the Mid Day Meal and to assess the nutritional status in two districts, namely, Fatehgarh Sahib and Ludhiana.

The members of the Review Missions appreciated the following best practices in the two districts:-

- i) Storage bins for foodgrains and cooking ingredients.
- ii) Use of double fortified salt for preparation of MDM.
- iii) Contribution by community.
- iv) Availability of water filters in many schools.
- v) Dedicated Staff for MDM at State, District and Block levels.

The nutrition experts observed that the mean anthropometric measurements such as weight, height, mid upper arm circumference (MUAC) and body mass index (BMI) has increased from the age of 5 to 15 years of the school children. All the mean anthropometric parameters of these children were less as compared to the WHO standards. However, the mean measurements of children of Punjab were higher as compared to their rural counter parts in India.

The areas of concern as observed by the team are as follows:-

- i) Non-release of cost of unsubsidized LPG cylinders by the districts to implementing agencies.
- ii) Engagement of lesser number of cook-cum-helpers than the prescribed norms in Ludhiana district.
- iii) Disruption in serving MDM in many schools in the district of Ludhiana due to non-availability of foodgrains.
- iv) Medicines with expired dates were kept in the First Aid Box in schools.



मध्याह्न भोजन योजना
Mid Day Meal Scheme

- v) No or very little distribution of IFA, Vitamin-A Tablets.
- vi) Rice kanji is being removed while cooking of rice.
- vii) Only 1-2 varieties of pulses are being used.
- viii) Monotony of recipes.
- ix) Quantity of rice, pulses and vegetables provided in the Mid Day Meal was less than the prescribed norms.
- x) Leafy vegetables are not used in most of the schools and very little quantity of other vegetables are added.
- xi) Quantity of Mid Day Meal is not as per the actual attendance of the students.

The Review Missions has made the following recommendations:

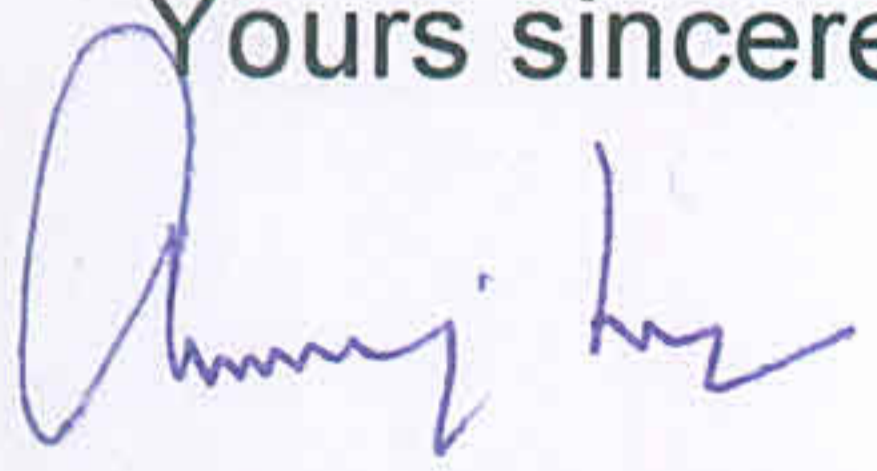
- i) The system of release of funds needs to be improved by removing intermediary levels, i.e. district. Funds may be directly released to implementing agencies by the State through banking channels.
- ii) Mid Day Meal Menu should have more variety and nutrient density per portion. The nutrition experts of the JRM team recommended implementation of suggested recipes in a phased manner, particularly by including leafy vegetables at least twice a week and seasonal fruits once a week.
- iii) Prevalence of under-nutrition was observed to be higher in the district of Ludhiana. It may be due to more migrant population settled in those areas.
- iv) The parents and teachers may be sensitized about the balanced nutrition diet and health education. Identification of children requiring special ration needs to be done.
- v) Both the upper primary level children and primary level children are being served same quantity of meals. The State Government should ensure that all the children must be provided meals as their entitlement.
- vi) Sensitisation and capacity building of officials at district and block levels towards their roles and responsibilities is essential for effective implementation of the Scheme.
- vii) State should use the information available at MDM-MIS portal to evaluate the performance of the Scheme and for focussed inspections and monitoring.
- viii) The State Government should engage requisite number of cook-cum-helpers in the schools and per norms. They should also be educated about proper of raw ingredients.
- ix) The rights and entitlements of children, menu, MDM Logo and emergency contact numbers should be displayed prominently on the wall of the schools.
- x) For effective monitoring and supervision of the Scheme the State should consider setting up of State Review Mission to review the implementation of the Scheme in districts periodically.

- xi) The State should also conduct research study on the areas like capacity building, community participation, etc.
- xii) The State may explore the possibility of convergence with corporate houses for using of the funds available under the Corporate Social Responsibility (CSR).
- xiii) Convergence with State Health Authorities may be strengthened for ensuring effective implementation of School Health Programme.
- xiv) Emergency Plan may be finalized along with the "Do's" and "Don'ts" in case of emergency. The Primary Health Centres should also be equipped suitably to handle cases of food poisoning and other medical emergencies.
- xv) Social Audit may be encouraged through participation of community so as to bring transparency and accountability in the Scheme.
- xvi) Removal of rice kanji leads to loss of B-complex vitamins. Therefore, kanji should not be removed and pressure cooking may be followed.
- xvii) All pulses like moong, red gram, lentil, green gram, chana, etc. may be served by rotation. Additional food like eggs and fruits may be given where possible. Variety of recipes depending on locally available food should be planned in order to enhance the acceptability of food by children. JRM has suggested a number of recipes in Annexure III of the Report.
- xviii) Locally available fresh green leafy vegetables like palak, drumstick and radish leaves, mustard leaves should be included in the menu. Similarly, more seasonal and locally available vegetables and nuts should be incorporated in recipes to make them more nutrients dense.
- xix) The quantity of MDM should be as per prescribed norms.
- xx) The quantity of each of the ingredient used to prepare recipes of MDM has to be modified daily depending on the actual attendance of children.

I shall appreciate if you could submit an Action Taken Note (ATN) on the recommendations made in the detailed Report of the Joint Review Mission, which has already been presented to the State Government of Punjab on 27th January, 2014.

A little effort on your part will ensure that no child goes hungry in schools of your State. Do let us know if we can facilitate this noble cause in any manner.

With regards

Yours sincerely,

(Amarjit Singh)

Ms. Anjali Bhawra,
Principal Secretary (School Education),
Govt. of Punjab,
Department of Education,
Mini Secetariat, Punjab,
Chandigarh-160 009