

# ANNUAL PERFORMANCE REPORT



**2018**

**Ministry of Health, Nutrition & Indigenous  
Medicine, Sri Lanka**



## **Preface**

Sri Lanka adopted the free health policy after gaining independence and has been consistent in its progress ever since. The Ministry of Health, Nutrition and Indigenous Medicine established in 1931 is responsible for safeguarding the health status of citizens of Sri Lanka by providing quality health services in preventive, curative, administrative and rehabilitative sectors. The key functions of the ministry include: formulating health policies, setting standards, provide strategic direction for health care delivery in the country, allocating resources, training and management of staff at all healthcare delivery agencies and providing healthcare to all its citizens free of charge at the point of delivery through an extensive network of healthcare institutions.

Sri Lanka has obtained tremendous improvement in the delivery of health services to the population due to the commitment of successive governments making sound social policies on free healthcare and education. Long term aim of any health system is sustainable health and well-being of the population it services, thus contributing to the economics and social development of the society. The Ministry of Health has taken steps towards advancing the provision of Primary Healthcare Services to all people with the intension of moving towards Universal Health Coverage (UHC) which ensures access to promotive, preventive, curative, rehabilitative and palliative health services to all people in need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.

The Annual Performance Report for year 2018 provides progress of the annual health sector work plan as well as the overall health sector performance against the set targets in year 2018. Further, the report provides the progress against key performance indicators giving an overview of what has been achieved during the past year.

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# **SECTION I: HEALTH & NUTRITION**

## 1.0 Overview

### **VISION**

**A healthier nation that contributes to its economic, social, mental and spiritual development**

### **MISSION**

**To contribute to social and economic development of Sri Lanka by achieving the highest attainable health status through promotive, preventive, curative and rehabilitative services of high quality made available and accessible to people of Sri Lanka**

### **Policy Objectives**

- Strengthen service delivery to achieve preventive health goals
- Appropriate and accessible high-quality curative care for all Sri Lankan citizens
- Promotion of equitable access to quality rehabilitation care
- Strengthen evidence-based service delivery to support journey along the continuum of care
- Develop new strategies to reduce out-of-pocket spending and reduce financial risk
- Ensure a comprehensive health system through a better re-structuring including HRM
- Develop strategic partnership with all providers of health care



## 1.1 Duties and Functions:

### Health & Nutrition

1. Formulation of policies, programmes and projects
2. Monitoring and evaluation with regard to the subjects of health and nutrition and those subjects that come under the purview of Departments, Statutory Institutions and Public Corporations listed below
3. Formulation of policies and standards required for public health services
4. Formulation and implementation of programmes to improve public health and nutrition
5. Implementation of rules and regulations in relation to international quarantine and sanitation
6. Regulation and supervision of the quality, standards and pricing of private hospitals and medical centres
7. Regulation and supervision of charitable medical institutions
8. Adoption of measures for the control, prevention and cure of epidemic, communicable and non-communicable diseases
9. Implementation of medical and oral health services of the School Health programme services
10. Matters relating to healthcare in estate sector
11. General sanitation
12. Implementation of the Thripasha Distribution Scheme
13. Management of all hospitals and staff employed therein (other than those under provincial councils)
14. Management and organization of all departments and services in scheduled training hospitals, and liaise with other higher medical education institutions
15. Matters relating to National Blood Transfusion Services
16. Matters relating to production, import and distribution of drugs
17. Administration and personnel management of Sri Lanka Medical Service
18. Expansion of training opportunities required for the enhancement of quality and skills of medical and paramedical services
19. Introduction of new strategies to expand research opportunities in health sector
20. Matters relating to national health insurance programmes

## **State-owned Enterprises**

1. Sri Jayawardenapura General Hospital
2. Wijeya Kumaratunga Memorial Hospital
3. National Authority on Tobacco and Alcohol
4. National Medicinal Regulatory Authority
5. State Pharmaceutical Corporation
6. State Pharmaceutical Manufacturing Corporation
7. Sri Lanka Thripasha Ltd

## 1.2 National Health Profile - Sri Lanka

Analysis of performance is a key for health care sector to achieve higher efficiency and effectiveness in providing services. The performance can be measured using selected indicators through which healthcare organizational goals and objectives can be monitored over time. Ministry of Health has identified a National Health Performance Framework to fulfil this need. These indicators could be used as the foundation to analyze and track health performance and base strategic decisions regarding staffing and allocating resources. Some of the important indicators selected are given below.

Indicator	2015	2016	2017
Life expectancy at birth	Male 72 Female 78.6 (2011-2013)		
Maternal Mortality Ratio	33.7	33.8	39
Under 5 Mortality Ratio (per 1000 live births)	10.75	9.27	10.90
Infant Mortality Rate (per 1000 live births)	9.16	8.20	9.00
Neonatal Mortality rate	6.59	5.80	6.30
Percentage of mothers registered before 8 weeks of gestation	77.08	78.47	79.40
Percentage of preschoolers (2-5 years) who are underweight	16.97	21.23	20.50
Percentage low birth weight	11.36	11.20	11.80
Child immunization: Percentage of infants receiving three doses of diphtheria-tetanus-pertussis containing vaccine		97	96
Number of new HIV infections per 1,000 uninfected population	0.03	0.03	0.0082
Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease	17.7		
Suicide mortality rate	14.5	14.3	15.1
Percentage of incident TB cases that are detected and successfully treated	83.2	84.1	84.6
Percentage of people living with HIV currently receiving antiretroviral therapy		15.13	36.98
International Health Regulations (IHR) core capacity index		79.2%	76%
Proportion of health facilities that have a core set of relevant essential medicines available and affordable on a sustainable basis		50%- Public-100.0 Private 95.29 75%- Public-82.16 Private 80.26 90%- Public-21.44 Private 53.04	

### 1.3 Human Resource Profile of Line Ministry Institutions-2018

No	Broad Category	Total Approved as at 31/12/2018	On contract basis	In-position as at 31/12/2018
1	Medical Consultants	1609	0	1580
2	Medical Officers	13398	0	11054
3	Medical Administrators	166	0	97
4	Consultant Dental Surgeons	71	0	66
5	Dental Surgeons	747	0	670
6	Administrative Service Officers	41	0	31
7	Medical Laboratory Technologists	1406	2	1231
8	Radiographers	773	1	470
9	Occupational Therapists	180	1	124
10	Physiotherapists	565	0	455
11	Pharmacists	1273	0	1076
12	Ophthalmic Technologist	156	0	140
13	Public Health Midwife	1687	0	1136
14	Public Health Inspector	208	0	188
15	School Dental Therapist	24	0	10
16	EEG Recordist	96	0	86
17	ECG Recordist	411	0	239
18	Food & Drugs Inspector	35	1	12
19	Orthoptist	23	0	9
20	Public Health Laboratory Technician	119	0	87
21	Entomological Officer	36	0	24
22	Dental Technician	57	0	32
23	Other Directors	7	0	6
24	Accountants	80	3	51
25	RMO/AMO	112	0	107
26	Other Technical Service Officers and Equivalent	352	0	175
27	Nursing Officers	28363	0	23857
28	Other Executive Officers	196	1	131
29	Other Primary Level Skilled	1301	2	998
30	Other Primary Level Semi Skilled	1753	0	1226
31	Other Primary Level Non-Skilled	909	0	574
32	Other Secondary and Tertiary Level Officers	5551	0	4120
33	Public Health Nursing Sister	63	0	41
34	Attendants	6313	0	4637
35	Labourers	20993	0	18721
36	Dispensers	140	0	128
37	Human Resource	1	0	0
	<b>Grand Total</b>	<b>89215</b>	<b>16</b>	<b>73589</b>

## 1.4 Summary of the Annual Financial Performance - 2018

Object Code	Description	Estimate 2018 (Rs.)	Revised Budget 2018 (Rs.)	Expenditure 2018 (Rs.)
<b>Recurrent Expenditure</b>		<b>133,043,550,000</b>	<b>137,592,550,000</b>	<b>134,448,816,751</b>
	<b>Personal Emoluments</b>	<b>69,894,750,000</b>	<b>74,007,005,000</b>	<b>73,976,446,141</b>
1001	Salaries and Wages	27,746,950,000	29,218,655,000	29,207,375,830
1002	Overtime and Holiday	16,432,800,000	21,747,400,000	21,735,028,177
1003	Other Allowances	25,715,000,000	23,040,950,000	23,034,042,135
	<b>Travelling Expenses</b>	<b>201,300,000</b>	<b>255,160,000</b>	<b>253,511,119</b>
1101	Domestic	132,300,000	165,860,000	164,948,220
1102	Foreign	69,000,000	89,300,000	88,562,899
	<b>Supplies</b>	<b>48,392,300,000</b>	<b>49,363,988,100</b>	<b>46,648,878,529</b>
1201	Stationary and office requisites	245,700,000	338,233,100	333,531,443
1202	Fuel	373,300,000	434,330,000	428,241,289
1203	Diets and Uniforms	2,340,300,000	1,921,400,000	1,917,109,196
1204	Medical Supplies	45,025,000,000	46,025,000,000	43,330,646,343
1205	Other	408,000,000	645,025,000	639,350,258
	<b>Maintenance Expenditure</b>	<b>681,400,000</b>	<b>800,714,400</b>	<b>794,047,301</b>
1301	Vehicles	253,500,000	264,620,000	261,389,695
1302	Plant and Machinery	171,200,000	200,020,000	198,930,869
1303	Buildings and Structures	256,700,000	336,074,400	333,726,737
	<b>Services</b>	<b>7,133,400,000</b>	<b>7,895,677,500</b>	<b>7,764,757,176</b>
1401	Transport	36,200,000	75,880,600	64,026,174
1402	Postal and Communication	575,200,200	635,790,500	634,314,166
1403	Electricity and Water	2,596,500,000	2,998,319,000	2,938,205,295
1404	Rents and Local Taxes	200,000,000	236,237,400	200,307,404
1408	Lease Rentals for Vehicles	667,000,000	4,350,000	4,230,288
1409	Other	3,058,500,000	3,945,100,000	3,923,673,848
	<b>Transfers</b>	<b>3,707,900,000</b>	<b>2,798,505,000</b>	<b>2,551,778,275</b>
	Welfare programmes	3,080,000,000	2,226,000,000	1,982,108,578
1503	Public Institutions	21,000,000	21,000,000	20,485,980
1505	Subscription and Contribution Fee	28,000,000	-	-
1506	Property Loan Interest to Public Servants	556,000,000	524,880,000	523,353,108
1508	Other	22,900,000	26,625,000	25,830,610
	<b>Other Recurrent Expenditure</b>	<b>3,032,500,000</b>	<b>2,471,500,000</b>	<b>2,459,398,208</b>
1703	Implementation of Official Languages Policy	3,000,000	-	-

Object Code	Description	Estimate 2018 (Rs.)	Revised Budget 2018 (Rs.)	Expenditure 2018 (Rs.)
<b>Capital Expenditure</b>		<b>43,349,000,000</b>	<b>46,998,688,000</b>	<b>32,534,934,021.98</b>
	<b>Rehabilitation and Improvement of Capital Assets</b>	<b>7,345,700,000</b>	<b>7,652,316,423</b>	<b>6,829,576,666.95</b>
2001	Buildings and Structures	4,717,250,000	4,992,306,337	4,218,970,484.54
2002	Plant, machinery and Equipment	2,530,450,000	2,552,482,356	2,517,538,146.40
2003	Vehicles	98,000,000	107,527,730	93,068,036.01
	<b>Acquisition of capital Assets</b>	<b>25,722,500,000</b>	<b>27,481,972,686</b>	<b>17,734,661,997.39</b>
2101	Vehicles	200,000,000	1,582,688,000	458,512,500.00
2102	Furniture and Office Equipment	425,000,000	448,374,544	420,239,946.61
2103	Plant, machinery and Equipment	13,198,500,000	13,046,771,519	8,345,605,736.55
2104	Buildings and Structures	11,540,000,000	12,045,138,623	8,487,109,250.23
2106	Software Development	359,000,000	359,000,000	23,194,564.00
	<b>Capital Transfers</b>	<b>1,404,500,000</b>	<b>1,404,500,000</b>	<b>1,079,479,687.63</b>
2201	Public Institutions	1,397,500,000	1,397,500,000	1,073,739,409.02
2202	Development Assistance	7,000,000	7,000,000	5,740,278.61
	<b>Capacity Building</b>	<b>928,300,000</b>	<b>1,010,237,421</b>	<b>972,622,441.37</b>
2401	Staff Training	928,300,000	1,010,237,421	972,622,441.37
	<b>Other Capital Expenditure</b>	<b>7,948,000,000</b>	<b>9,449,661,470</b>	<b>5,918,593,228.64</b>
2505	Procurement preparedness	148,400,000	141,251,262	93,892,562.93
2506	Infrastructure Development	1,190,000,000	1,126,000,000	618,520,334.26
2507	Research and development	106,000,000	181,000,000	115,591,717.99
2509	Other	6,503,600,000	8,001,410,208	5,090,588,613.46

## 2.0 Major Achievements in 2018

- **Hon. Minister of Health, Dr. Rajitha Senaratne received the "Suwapathi" award for the services rendered to the people of this country**



Hon. Minister of Health, Nutrition and Indigenous Medicine, Dr. Rajitha Senaratne was awarded the "Suwapathi" award. This award was organized by the Sri Lanka Health Services Trade Union Confederation under the patronage of the Ministry of Health and the World Health Organization (WHO) to recognize and appreciate the contribution made by the Hon. Minister in successfully addressing the health problems of the general public. The event was held on 31<sup>st</sup> of July 2018 with the participation of His Excellency the President Maithripala Sirisena, Hon. Prime Minister Ranil Wickremesinghe, Sri Lanka Representative of the World Health Organization Dr. Razia Pendse, Cabinet Ministers, Members of Parliament and other government officials. Among the services rendered by the Hon. Minister of Health to the general public are: the reduction of prices of all essential drugs, providing free lenses for cataract patients, free stents for heart patients, facilitating all blood tests to be done free of charge and lifting the ceiling of Rs. 1.5 million for each cancer patient was entitled for treatment of cancer.

- **World Health Organization celebrated the 70<sup>th</sup> World Health Day in Colombo in April 2018.**

The 70<sup>th</sup> World Health Day of the World Health Organization (WHO) was celebrated on a grand scale on 07.04.2018 at the Nelum Pokuna Theater with the participation of His Excellency the President Maithripala Sirisena and the Director General of the WHO, Dr. Tedros Adhanom Ghebreyesus. World Health day is celebrated by the WHO on the 7<sup>th</sup> of April every year, and in 2018 the international event was held in Sri Lanka. The theme of World Health Day for the year 2018 was "World Health Cover: For Every One, Every Place".



HE the President officially launched of the National Quality Television Network (NQTV) e Health Card, commemorative stamp and the SDG Tracker for Sri Lanka. Prime Minister of Seychelles, Prime Minister Hon. Ranil Wickremesinghe, Minister of Health, Nutrition and Indigenous Medicine, Hon. Dr. Rajitha Senaratne, Deputy Minister Hon. Faizal Cassim, Director General of the World Health Organization Dr. Tedros Adhanom Ghebreyesus, South Asian Regional Director of the World Health Organization Dr. Poonam Khetrapal Singh and World Health Organization Representatives also participated in this event.

➤ **Sri Lanka is declared as a country that eliminated Rubella**



The World Health Organization (WHO) declared Sri Lanka as a Rubella-free-country on 05<sup>th</sup> of September 2018 at the WHO South-East Asia regional meeting in New Delhi, India. This certificate was awarded to Hon. Minister of Health Dr. Rajitha Senaratne by the Regional Director of WHO SEAR Dr. Poonam Khetrapal Singh. Sri Lanka was declared as a Malaria-free-country in 2015, Filaria-free-country in 2016 and neonatal tetanus-free-country in 2017 by the WHO. “Declaration of Sri Lanka as a Rubella-free-country was another landmark for the healthcare services of the country in 2018,”



Dr. Singh added. Further, the WHO Regional Director highlighted that Sri Lanka eliminates a disease every year, praising the country's leadership in health services as a big support for the achievements.

➤ **First SAARC Meeting on Non Communicable Diseases held under the Patronage of President of Sri Lanka.**

The first SAARC Annual meeting on Non Communicable Diseases (NCDs) was held at Galle Face Hotel under the patronage of President Maithripala Sirisena on 31<sup>st</sup> March 2018. Approximately 10 million people die across the world due to NCDs annually and it is mainly due to wrong dietary habits, lack of physical exercises, stress and indulgence in alcohol and tobacco. Many initiatives are introduced by World Health Organization (WHO) in many countries to control these non communicable diseases.



➤ **Hon. Minister of Health Dr. Rajitha Senarathne has been elected as the Vice Chairman of WHO**

Hon. Minister of Health, Nutrition and Indigenous Medicine Dr. Rajitha Senarathne was elected as a Vice Chairman of the Executive Board of World Health Organization (WHO) unopposed during its Executive Committee Meeting held in Geneva. He was elected Vice Chair from the South-East Asia region at the 143<sup>rd</sup> Session of the WHO Executive Board on 28.05.2018, for a period of one year. The Executive Board is composed of members technically qualified in the field of health. Members are elected for three-year terms. The main functions of the Board are to give effect to the decisions and policies of the World Health Assembly, to advise it and generally to facilitate its work.



- **Agreements were signed to obtain drugs and medical equipment manufactured in Cuba to Sri Lanka at the International Convention "Cuba Salud 2018"**



Key health sector personnel, including World Health Organization Director General Dr. Tedros Adhanom Ghebreyesus, together with over 3,000 delegates from 82 countries attended the convention organized by Cuba's Public Health Ministry. The Cuban Government pledged extended support to develop the Sri Lankan health sector. The Cuban Public Health Minister Roberto Morales Ojeda pledged to support Sri Lanka in a meeting held with Hon. Health Minister Dr. Rajitha Senaratne at the International Convention "Cuba Salud 2018" held in Havana Convention Center, Cuba, recently. During the discussions held between the two Ministers it was agreed to sign an agreement in connection with obtaining drugs and medical equipment manufactured in Cuba to Sri Lanka through the State Pharmaceuticals Corporation (SPC). More rounds of discussions will be held between Sri Lankan and Cuban health authorities before signing the agreement.

➤ **Construction on China – Sri Lanka Friendship Hospital (The Largest Kidney Hospital in South Asia)**



The construction work of the National Nephrology Hospital in Polonnaruwa, which is a gift from China, was commenced on 21.08.2018 under the patronage of President Maithripala Sirisena. This New Hospital is being built as the largest kidney hospital in South Asia, at a cost of Rs. 1.2 billion, fulfilling a long term aspiration of the President to provide services for kidney patients. The hospital would be a great asset and a gift to the people of Sri Lanka, not only for the people living in the North Central Province but also in other areas. The hospital project includes state-of-the-art equipment and all necessary facilities for kidney patients. The hospital consists of 200 bedded ward complex, OPD with 100 dialysis machines and six modern operation theaters. A 200-seated auditorium and a car park which has 300 parking slots and residential facilities for hospital staff will also be included in this hospital. The project is expected to complete within 24 months and accordingly in July 2020 the hospital will be ready for functioning.

➤ **Opening of the Accident & Emergency Unit of District General Hospital, Kalutara**

Newly established Accident & Emergency (A & E) Unit of the District General Hospital Kaluthara was declared open by the Hon. Minister of Health Dr Rajitha Senarathne on 10.05.2018. The Ministry spent about Rs. 1030 million for the project and it is one of the A & E Units of the country which was built under the guidance of Hon. Minister in order to develop the A & E Units of the country.



➤ **Construction of a Rehabilitation Centre for Teaching Hospital, Jaffna**



The foundation laying for the Rehabilitation Centre for Teaching Hospital, Jaffna was done on 16.08.2018 by Hon. Minister of Health Dr. Rajitha Senaratne. The total cost of the project will be Rs. 530 Million and is donated by the Kuwait Red Crescent Society.

➤ **Construction of the Accident and Emergency Treatment Unit of Ashroff Memorial Base Hospital – Kalmunai**

Foundation laying ceremony was held for the proposed modern Accident and Emergency Unit of the Ashroff Memorial Base Hospital – Kalmunai under the patronage of Hon. Minister of Health, Dr. Rajitha Senaratne on 17.06.2018. The project will cost about Rs. 1900 million.



➤ **Construction of Renal Care Treatment Unit of Teaching Hospital, Batticaloa**



Foundation laying was done for the Renal Care Treatment Unit of Teaching Hospital Batticaloa under the patronage of Hon. Minister of Health Dr. Rajitha Senarathne and the participation of Hon. Deputy Minister of Health Mr. Faisal Cassim on 17.06.2018. The project will cost about 383 million rupees and it is expected to complete the work within 1 year and 10 months.

➤ **Opening of the Level 04 Accident and Emergency Unit of Teaching Hospital, Batticaloa**



The level 04 Accident and Emergency Unit of Teaching Hospital, Batticaloa was declared opened by Hon. Minister of Health and Hon. Deputy Minister of Health on 17.06.2018. The total cost of the project was Rs. 895 million.

➤ **Renal Disease Prevention Unit and a New Administrative Building for Divisional Hospital, Bakamuna**



The newly built “Renal Disease Prevention Unit and the new Administrative Building” for the Divisional Hospital, Bakamuna of Polonnaruwa District was declared opened by Hon. Minister of Health Dr. Rajitha Senarathne on 01.08.2018. These constructions were completed under the programme of “Pubudamu Polonnaruwa”.

➤ **Commemoration of World No Tobacco Day - 2018**



World No Tobacco Day with the theme “TOBACCO AND HEART DISEASE” was held on 7<sup>th</sup> June 2018 at Water's Edge, Baththramulla. The programme was graced by Hon. Minister of Health, Nutrition and Indigenous Medicine, Dr.Rajitha Senarathne. The event was initiated with the welcome speech of Dr. Palitha Abeykoon -Chairman NATA. Key people in the events were Mr. Janaka Sugathadasa – Secretary, Ministry of Health Nutrition and Indigenous Medicine, Dr.Anil Jasinghe -Director General of Health Service, Dr.Razia Pendse -World Health Organization Representative-Sri Lanka, Dr.M.R Mubarak- President, Sri Lanka Heart Association, various individuals representing their organizations related to tobacco control with around 250 participants. The book "DUMWATIYEN BINDENA HADAWATH" was launched at this event.

➤ **Commemorating “Organ Donor Day 2018” in order to lift the Barriers for Organ Transplantation in Sri Lanka**



Hon. Minister of Health Dr. Rajitha Senarathne has taken steps to encourage the organ donation for transplant surgeries for required patients. Ministry of Health is planning to lift the cost burden over patients who are donating organs for patients at the public or private sector.

➤ **The Medicare National Healthcare Exhibition 2018**



The Medicare National Healthcare Exhibition 2018 is a B2C Exhibition that focuses on introducing and promoting the latest advances in medical science and technology. This exhibition offers businesses and medical institutions an ideal platform to network, do business and discover cutting edge breakthroughs in medical science. However, its primary purpose is to provide the public with timely, accurate and important information and updates on health issues and the latest technology available for disease diagnosis, prevention and cure.

➤ **Commemoration of World Blood Donors Day – 2018**



World Blood Donor Day 2018 hosted by Greece was held on June 14<sup>th</sup> at Nelum Pokuna under the theme 'Blood Connects us All' with the patronage of Hon. Minister of Health Dr. Rajitha Senarathne. It is an annual event, usually on the same date each year, to thank voluntary blood donors and acknowledge them and encourage blood donation and new donors, especially by representing how blood donations have saved and changed lives. The slogan of the day was 'Share Life, Give Blood'.



## 3.0 Programmes, Campaigns and Directorates under the Line Ministry

### 3.1 Control of Communicable Diseases

#### 3.1.1 Epidemiology Unit

Epidemiology Unit is the focal point within the Ministry of Health for prevention and control of majority of communicable diseases including vaccine preventable diseases. It's main functions include; Surveillance of communicable diseases including vaccine preventable diseases, surveillance of chronic kidney disease, conducting the National Immunization Programme, acts as the emergency response unit for disease control activities in disasters, training of undergraduates, postgraduates and clinical and field health staff, undertake research and collaboration activities relevant to communicable diseases and other related areas.

#### Major achievements during the year:

- Completion of the development and installation of an offline National Renal Registry in one sentinel site as a trial
- First year data collection of the CKDu cohort study was carried out
- Conduct two programmes for health officials from Timor Leste to strengthen immunization programme in Timor Leste
- Successful completion of outbreak investigation of influenza epidemic in southern province involving clinical and death reviews at institutional level with field epidemiological assessment
- Issuing of circular on institutional mitigation of influenza outbreak

#### Key Performance Indicators

1. Immunization coverage

Immunization coverage for key vaccine preventable diseases is nearly 100%

Indicator	Target	2016	2017	2018
BCG	>95 %	>95%	>95%	>95%
Pentavalent	>95 %	>95%	>95%	>95%
DT	>95 %	>95%	>95%	>95%
Measles	>95 %	>95%	>95%	>95%

2. Surveillance of Communicable Diseases

Completeness of reporting (reporting from all MOH offices ) – 100%

### 3.1.2 Tuberculosis and Chest Diseases Control Programme

The National Programme for Tuberculosis (TB) Control and Chest Diseases carries out several functions related to chest diseases. These functions include, decentralization of diagnostic and treatment services in government health institutions in pilot districts (Kaluthara, Gampaha and Kegalle), diagnostic services carried out through the National Tuberculosis Reference Laboratory (NTRL), Regional Culture Laboratories, District Chest Clinic Laboratories and Microscopy Centres, procurement of drugs through central drug stores of NPTCCD, supply and distribution of anti-TB medication to chest clinics, Infrastructure development and financial management of institutions under the direct administration purview, technical guidance and financial assistance from funds obtained from donor agencies for implementation of TB control activities at district level, training of medical and paramedical staff engaged in TB care, formulation of policies and guidelines for control of TB and other respiratory diseases, planning, implementation, monitoring and evaluation of TB control activities, TB surveillance activities and advocacy communication and social mobilization on TB.

#### Major achievements during the year:

- Completion of Biochemistry and Haematology laboratory for DCC Gampaha and renovation at DCC Kurunegala.
- Local training for administrative staff at NPTCCD
- Procurement of 12 Gene-Xpert machines, a mobile X-ray machine and 17 Digital X-ray machines
- 16 sputum collection booths were constructed in health institutes including NHSL and NSACP
- Development and piloting of electronic data management system. Hardware procurement was completed and piloting completed at Colombo, Kurunegala and Matara districts
- Initiating of TB screening programmes for inmates in Colombo prison complex
- SAARC regional training workshop on diagnosis and treatment of paediatric TB held from 23<sup>rd</sup>-27<sup>th</sup> April 2018

#### Key Performance Indicators:

Indicator	Targets		Year			
	2018	2019	2015	2016	2017	2018
TB Incidence rate	60.7 per 100 000 population	56.3 per 100 000 population	44.5 per 100 000 population	40.9 per 100 000 population	39.0 per 100 000 population	40.1 per 100,000 population
TB Treatment Success rate	>90%	>90%	83.2%	84.1%	84.6%	-
Loss to Follow up rate	<5%	<5%	4.5%	4.2%	3.9%	-
TB Mortality rate	<5%	<5%	6.9%	6.8%	7%	-

### **3.1.3 Leprosy Control Programme**

The Anti-Leprosy Campaign functions as the focal point of leprosy control activities in Sri Lanka. The Campaign is responsible for monitoring and evaluation of leprosy control activities and implementation of National Leprosy Strategy 2016–2020 using different programme indicators. The following tasks are also carried out by the Campaign: Monitoring and evaluation of leprosy control activities on implementation of National Leprosy Strategy 2016 – 2020 using different program indicators, build and sustain partnership with partners and coordinate and solicits support for the Leprosy program action plans, training of all categories of staff on leprosy and capacity building with regard to leprosy control, disease control through early detection by screening the population at risk of developing leprosy specially in the identified high endemic districts with special emphasis on screening activities and contact tracing, providing services to all leprosy affected persons with special emphasis on rehabilitation of persons with disability and improving the quality of services provided to leprosy patients in the dermatology clinics.

#### **Major achievements during the year:**

- Fifteen house-to-house surveys, 65 community screening activities and 51 training programs for health staff were carried out in the country with special emphasis on high endemic areas in 2018.
- Patient mapping system was expanded throughout the island in 2018.
- Training of all preventive and curative health staff in the country including MOOH, Nursing Officers, PHLTs, PHII, GPS, and Ayurveda Practitioners etc.
- Conducting mobile monthly clinics in CMC area (11 special clinics were conducted in 2018)
- Special monitoring activities of quality of treatment of leprosy in dermatology clinics and satellite clinics in 2018 (Trincomalee, Batticaloa, Galle, Matara, Anuradhapura, Hambanthota, Monaragala, Ampara, Kalmunai, Jaffna, Mannar and Badulla districts)
- Monitoring and evaluation of district Leprosy control activities in Kurunagala, Kandy, Mathale, Hambanthota, Nuwara eliya, and Kegalle districts in 2018 by conducting district reviews.
- Initiated a collaboration with the Leprosy Resaerch Centre, NIID, Japan for DNA/ PCR testing.
- Completed the KAP study in 2018 for ‘Social marketing campaign’ to be conducted in 2019-2020.
- Initiated AIM – Neglected Tropical Disease mapping for leprosy, leishmaniasis and filariasis in 2018.

**Key Performance Indicators:**

Indicator	2015	2016	2017	2018
New cases detected	1977	1832	1873	1683
NCDR (per 100,000 population)	9.4	8.6	8.9	8.03
Child percentage	11.3	8.6	10.4	9.74
Deformity percentage	10	7.5	7.3	6.5
MB percentage	53.8	53.5	57.8	61

**3.1.4 Quarantine Services**

The key functions of the Quarantine Division are as follows: Act as one of the Co-National Focal Points on International Health Regulations (IHR)- 2005 in Sri Lanka to coordinate with WHO, develop policies and guidelines related to border health security and IHR- 2005, supervision and monitoring of activities of Public Health Offices at Points of Entry (Ports and airports), providing technical guidance to staff of port/airport health offices at Points of Entry (PoEs), inspection of vessels and cargo for prevention of contamination, to maintain in a condition that they are free of sources of infection or contamination, including vectors and reservoirs, supervision for deratting, disinfection, disinsection or decontamination of baggage, cargo, containers, conveyances, goods, postal parcels and human remains or sanitary measures for persons, inspection of vessels/flights and issuance of free pratique, Issuance of ship sanitation certificates through port health offices at authorized ports, ensure the environment sanitation and vector control at PoEs, provision of yellow fever vaccine, oral polio vaccine, meningococcal vaccine and anti-malarial prophylaxis to travelers mainly through Assistant Port Health Office at MRI, maintain IHR core-capacities at PoEs, monitoring of implementation of IHR- 2005, Quarantine Act, Food Act, NATA, Nuisance Act and other relevant acts, training public health staff on border health security and IHR 2005, support to implement migration health policy by establishing in-bound health assessment procedure for long stay visa applicants

**Major achievements during the year:**

- Purchase equipment to Quarantine Unit and Public Health Offices of Ports and Air Ports
- Repair of buildings at Trincomalee Port Health Office
- Health education programmes for health and non health staff
- Amend and print the standard operation procedures at PoEs
- Conducting IHR steering committee meetings, review meetings and meetings on quarantine act
- Develop an online information management system

**Key Performance Indicators:**

Indicators	2016	2017	2018
International Health Regulations (IHR) core capacity index	79%	76%	
No. of travellers vaccinated against yellow Fever	4,830	4,126	4,724
No. of ships inspected for Ship Sanitation Certification	340	340	352

**3.2 Control of Vector – Borne Diseases****3.2.1 Dengue Control Programme**

The National Dengue Control Unit implemented several activities to minimize the morbidity and mortality due to Dengue. An intensified Dengue Prevention and Control Programme with many activities to enhance early diagnosis, proactive case management, integrated vector control and community empowerment was launched in June 2017. Many tasks such as Inter-sectoral coordination & social mobilization, risk communication & outbreak response, evidenced based clinical care, robust Dengue surveillance and innovative research are carried out by the programme.

**Major achievements during the year:**

- Reduction of Dengue incidence and case fatality rate
- Recruitment of SKS for vector control activities
- Establishment of HDUs (Fund allocations to Provincial Directors + equipment) of all high risk districts

**Key Performance Indicators:**

Indicator	Target	2016	2017	2018
Incidence	<100/100,000 by 2023	260/100,000	868/100,000	240/100,000 (updating)
Case Fatality rate	<0.1 by 2023	0.17	0.21	0.11 (updating)
Premise index	<1% by 2023	6.84%	9.68%	8.8 (updating)%
Breteau index	<1% by 2023	8.86%	11.67%	10.1% (updating)
No. of premise inspection programmes conducted (No. of premises inspected in millions)		18 (2.3)	20 (2.7)	12 (1.5)

### 3.2.2 Filariasis Control Programme

The Anti-Filariasis Campaign carries out strengthening of parasitological surveillance and reactive case detection; strengthening of entomological surveillance and response; morbidity management and disability prevention; advocacy, communication and social mobilization, engaging in operational research, quality control and improvement and monitoring and evaluation in Sri Lanka.

#### Major achievements during the year:

- Development of parasitological and entomological guidelines and standard operation procedures to standardize techniques used in surveillance.
- Implemented xenomonitoring (mosquito surveillance) guided enhanced parasitological surveillance in highest risk MOH areas (Balapitiya and Habaraduwa) in Galle district.
- Detected 30 patients (21% of total case load) among migrant Indian workers with active infection of Filariasis.
- Designed and produced a booklet on Filariasis for school children and conducted regional awareness programmes for school children living in endemic districts.
- Conducted non endemic surveys in four districts; Trincomalee, Monaragala, Anuradhapura and Nuwaraeliya and found one case of Filariasis from Anuradhapura district (Thirappane MOH area)
- Launched a communication campaign including a Facebook campaign, designing and printing of leaflets and posters to address current challenges, used mass media to make community aware (participated in TV and radio live shows), developed a video clip to be used for awareness programmes and in face book page and regional media briefings to overcome miscommunications.

#### Key Performance Indicators:

Indicator	Target	2016	2017	2018
Microfilaria rate	0 by 2021	0.06	0.04	0.02
Microfilaria Density	0 by 2021	355.48	316.87	281.42
Infected rate	0 by 2021	0.85	0.77	0.93
Infective rate	0 by 2021	0.01	0.03	0.03

### 3.2.3 Malaria Control Programme

Sri Lanka was certified by the World Health Organization as a malaria-free country in 2016 and continuing in this status without reporting any indigenous malaria cases. The Anti Malaria Campaign (AMC) had set its targets on preventing re-introduction of malaria in to the country and maintaining zero mortality from malaria. Sri Lanka has been free of indigenous malaria since November 2012 except one introduced malaria case reported in December 2018 and zero mortality due to malaria has been sustained since 2007.

However, Sri Lanka is having a high risk of re-introduction of malaria as there are vulnerable population and the receptivity is still high. The greatest threat is imposed by the constant importation of malaria in to the country through international migrants – both Sri Lankan nationals and foreigners who get infected abroad and return to Sri Lanka with malaria. The mosquito vector that can transmit malaria is also widely prevalent in the country and a new malaria mosquito which can breed in urban settings has also been detected in some districts of Northern and Eastern provinces .

**Major achievements during the year:**

- Anti-Malaria Campaign extended its prompt service, free of charge with malaria diagnostics and treatment facilities, to both government and private health institutions in managing these malaria cases
- In order to cease the malaria transmission within the country, the AMC has conducted outreach malaria mobile clinics targeting high risk groups. More than one million blood smears were examined as a part of parasitological surveillance which also included passive surveillance in hospitals and screening of blood bank slides
- Sri Lankans traveling abroad to malaria-endemic countries were provided with necessary guidance and preventive treatment free-of-charge by the AMC to prevent malaria during their overseas travel
- Extended routine sentinel site surveillance was carried out at 30 sites throughout the country in monthly basis. Quarterly routine surveys were done in nearly 50 sites to supplement the sentinel surveys

### **3.3 Control of Non-Communicable Diseases**

#### **3.3.1 National Cancer Control Programme**

The National Cancer Control Programme carries out the following functions: primary prevention of cancers by addressing risk factors and determinants by improved public awareness and empowerment, advocate for early detection of cancers by improved public awareness and relevant service providers, particularly primary care providers, through opportunistic screening of asymptomatic populations and, if clinically suspicious, ensure prompt referral of individuals with symptoms and signs suggestive of cancer in symptomatics leading to early clinical diagnosis, ensure sustained and equitable access to diagnosis and treatment facilities for cancers, ensure rehabilitation, survivorship and palliative care facilities for cancer patients and support to their care givers at all levels, strengthen cancer information systems and surveillance to monitor the progress and to evaluate the outcomes of cancer control actions, promote professional education of doctors,

nurses, technicians and health workers to augment trained human resources and promote research and utilization of its findings for prevention and control of cancers

**Major achievements during the year:**

- Developing guidelines and referral pathways for Primary Care Physicians on common cancers
- Developing a draft of the guidebooks on Palliative Care for Medical Officers and Nursing Officers in Primary Care
- Developing and printing booklet on Cancer Pain Management, the National Guideline for Management of Oral Cancer, the circular and relevant returns on obtaining services of PHM/PHI to identify and refer people at a higher risk for OPMD/Oral cancer
- Revision & printing of the National Guidelines for Management of Oral Potentially Malignant Disorders (OPMD)
- Printing and distributing of the circular on banning of betel quid chewing and selling of betel quid, tobacco and areca nut products in hospital premises and all other healthcare facilities
- First draft of the hand book on cancer control for PHC staff was developed and the manual for cancer registration on Standard Operational Procedures & printing the cancer surveillance form
- Launching of the National Strategic Framework on Palliative Care
- Purchasing ICD-0 manuals & Cancer staging manuals for cancer surveillance
- Conducting Research on “Psycho social needs and psychological distress of the primary caregivers of children & adolescents with cancers, at the National Cancer Institute, Maharagama and the impact of an intervention to address their emotional and informational needs”. Completion of data collection step and research conducted on “Care pathways, delays and the effect of delays on quality adjusted life years of female breast cancer survivors in Sri Lanka”.
- Conducting Training of Trainer programme for RDSs on prevention and screening for OPMD/ oral cancer, training & capacity building programmes for dental surgeons and primary healthcare staff on cancer control activities at 23 districts, training of trainer programme for dental surgeon in India on prevention & control of oral cancer and Training of Trainer programmes & training programmes on Palliative Care for health staff
- Conducting a workshop for the cancer registry staff of NCCP, staff of Medical Statistics Unit at the National Cancer Institute, Maharagama (NCI/M) and for the researchers in cancer control.
- Conducting Participation for the fifth leadership workshop for cancer control in Seoul, Korea



- Participation for the Planning and Management training programme for middle level managers, in Burapha University, Thailand, Asia Pacific training course in China on prevention & control of cancer, International symposium on understanding the double burden of malnutrition Vienna, Austria
- Designing & Printing of posters, leaflets, booklets & other IEC materials were done (leaflets, posters, flex banners and wall charts for primary prevention and early detection of common cancers in all languages and publishing educational messages on “No parking” boards)
- Media related activities –Conducted media seminars (World Head & Neck Cancer Day & World Breast Cancer awareness month) and mass media (TV, Radio, Newspaper) advertisements (World Breast Cancer awareness month) were published on prevention and early detection of cancers.
- Procurement of new mobile exhibition unit for NCCP, treatment planning unit & chemotherapy isolator for DGH Hambanthota, endoscopy unit for TH Anuradhapura, contaminating monitors and movable lead shield barrier for PGH Badulla and colposcopy machine for Apeksha Hospital and equipment and other necessary accessories (computers, other IT & communication equipment, public addressing system and furniture) for the office of NCCP and for the Cancer Early Detection Centre.
- Upgraded the computer network and intercom system of the NCCP
- Conducting review meetings with estate sector health administrators on oral cancer in Kegalle district, district level review meetings to appraise the progress of the cancer control activities at 19 districts, National Advisory committee meetings on prevention & control of cancers, meetings of National Steering Committee on Palliative care, progress review meetings with HOI and Oncologists of cancer treatment center
- Conducting two meetings with private health sector regulatory body & with relevant colleges in order to strengthen the cancer surveillance system at the private health institutions, supervisory visits to cancer treatment centers – Kurunegala Hospital, two progress review meeting with Death Registrars and MROs on population based cancer surveillance, the Annual progress review meeting for Regional Dental Surgeon and other health staff, stakeholders meeting to discuss "Reducing the Breast Cancer Burden in Sri Lanka-Way Forward
- Conducting the “National Symposium of Best Practices on Cancer Control and Palliative Care” in order to evaluate & appreciate the activities conducted by health care staff on cancer control & palliative care
- Analysing and publishing of 2011 & 2014 cancer incidence data

### Key Performance Indicators:

Indicator	Target	2016	2017	2018
Publication of cancer incidence data	Availability of the latest publication of "Cancer Incidence Data" should be not more than 3 years from the current year	2010 cancer incidence data published	-	Finalized the 2011 cancer incidence data Finalized the 2014 interim report of cancer incidence data
Conducting National Advisory Committee meetings	Four meetings a year (1 per quarter )	3 meetings conducted	3 meetings conducted	3 meetings conducted
Conducting District Review meetings	26 meetings a year (1 per District)	02 reviews conducted	18 reviews conducted	19 reviews conducted
Development of proper guideline & referral pathways for common cancers	Availability of guideline & referral pathways for common cancers	Management of OPMD guideline available	Development of Colorectal, Thyroid cancer & Breast cancer guideline revised	Development of Oesophageal and Prostate cancer guideline & referral pathway, Revised guideline on common Gynaecological cancer, Development of oral cancer guideline, Availability of referral pathways for OPMD & Oral Cancer

### 3.3.2 Mental Health Services

The key functions of the Mental Health (MH) Directorate are: Advocate to the policy makers on important areas of Mental Health which need priority , formulation or revision of policies related to Mental Health, develop strategic plans on mental health, alcohol and substance use, suicides and other relevant areas under the purview of the directorate, advocate and support strengthening of infrastructure facilities and human resources for mental health services, formulate national medium term and annual plans of MH and facilitate the development of provincial/district plans relevant to MH, establish and maintain partnership networks within and between government ministries, professional bodies, private organizations, development partners, civil societies and consumer groups, develop /revise technical and managerial guidelines and protocols/ formats including relevant duty lists with the involvement of professional bodies and other relevant stakeholders,

develop programme specific IEC /training material, build capacities of relevant staff at in-service and post graduate level, ensure provision of psychological first aid and mental health services in emergencies, disasters and special situations, monitor and evaluate Mental Health Programme at central level, ensure availability of updated database on mental health for programmatic action and identify the areas that need investigation and conduct operational research.

**Major achievements during the year:**

- Primary health care staff training in 5 districts on mental health promotion
- Promotion of mental wellbeing at work places
- Developing a Standard Package for Mental Health Care in Primary Medical Care Institutions
- Mental health promotion among school children and workshops for mental health professionals on child mental health
- Training on counselling skills for primary healthcare workers
- Overseas training of multi-disciplinary mental health team members on community mental health
- “Suwaya” magazine distributed among all schools and health institutions
- 18 district review meetings conducted with participation of national resource team
- Human resource development related to multi disciplinary mental health team
- Conducting National Mental Health review
- Development and disseminated media guidelines on suicide reporting
- Training on national resource pool on substance use-overseas
- Renovation of mental health units at Base Hospital Diyathalawa and Dematapitiya, construction of acute psychiatry unit at DGH Mullaitivu and DGH Kegalle, establishment of male psychiatry ward at DGH Nawalapitiya
- And construction of Mental health rehabilitation unit at DH Anamaduwa
- Celebration of world mental health day 2018

**Key Performance Indicators:**

Indicator	Target	2016	2017	2018
Number of districts having at least one Community Support Centre	25	DNA	DNA	11
No of districts with acute psychiatric inward care	25	21	21	24
No of districts with intermediate care units	25	-	15	16
No of districts with alcohol rehabilitation units	25	07	07	08
Suicide Rate (per 100,000 people)		14.3	15.2	
Alcohol use among population over 18 years		36% among males	-	

### **3.3.3 Chronic Kidney Diseases (CKD) Prevention and Control Programme**

There are approximately 60,000 estimated CKD/CKDu patients in known high risk areas of which majority are from North Central Province. In addition to this districts like Ampara, Trincomalee, Badulla, Moneragala, Hambanthota, Matale, Kurunegala, Vavuniya and Mullathivu are affected. Community screening for CKD/CKDu started in 2008 and there are 27,530 patients living with CKD/CKDu in the country. These figures were obtained from a survey conducted this year by the Ministry of Health. Around 2000 deaths occur in the government hospitals due to CKD/CKDu. Functions carried out by the Chronic Kidney Disease Prevention and Control Programme are; Screening of individuals above 20 years in the high risk areas, improve medical services for patients, Improve number of trained medical staff in affected areas, Establish a surveillance system to obtain data of patients with CKD/CKDu, empower the community to develop behaviours to prevent the disease, Establish coordination between sectors in prevention of the diseases and carry out research.

#### **Major achievements during the year:**

- During 2018 approximately 204,539 from the community were screened for early detection of CKD/CKDu from the high risk areas.
  - Building CKD clinic centres in CKD/CKDu high risk areas. Thirteen clinic centres were planned for Divisional Hospitals and Base Hospitals
  - Construction of 15 Dialysis Units in high risk areas – 10 units have been completed and establishment of 5 renal units with and without transplant facilities in Jaffna, Batticaloa Teaching Hospitals, Badulla, Trincomalee and Hambanthota hospitals – work for 4 units have been awarded
  - Improvement of laboratory services in the affected districts, Strengthening of transplant services and dialysis services in National Hospital, Kandy Teaching Hospital, Anuradhapura Teaching Hospital and Peradeniya Teaching Hospital
  - Establishment of Transplant units at Karapitiya Teaching Hospital
- are some of the activities conducted to strengthen the facilities in hospitals with CKD/CKDu high risk areas.

### 3.4 Maternal and Child Health Services

The Family Health Bureau (FHB) is responsible for planning, implementation, monitoring and evaluation of reproductive, maternal, new-born, child, adolescent and youth health (RMNCAYH) services in Sri Lanka.

#### Major achievements during the year:

- Updated national guidelines available on Management of Childhood illnesses,
- 30 HDU beds-installation on going (5.7M), Good received in 30 infusion pumps and (2,107,826), 30 syringe pumps (1.9M), 30 adult suckers (4.47M), 50 hand held Doppler (1.5M), 6 CTG Machines (3.7M), 50 spot lamps (4.5M) Quotation submitted for 20 multipara monitor (4.5M)
- CHDR is being printed and stocks being received. Reprinting of CF panels and printing of Obesity guide
- TOT on promoting Psychosocial wellbeing among Adolescents
- Pilot test completed on healthy foods availability in school canteens of three districts
- National review on AYFHS
- TOT, 8 hospital based programmes and 6 district level training programmes conducted on improving the capacity of health workers on Reproductive Health
- Capacity building: EMOC training for staff in Obstetric Units, Training on Essential Newborn Care, Neonatal Advanced Life Support, Breastfeeding counselling, Facility Based Care of the Sick Newborn, Family planning, Infant & Young Child Feeding, Child development & special needs, SMI, Life skills, psychosocial well-being, Adolescent Health, Gender and Women's Health, Research, communication material for field staff training
- 28 district MCH reviews, 2 MOMCH conferences, 1 RSPHNO conference, 1 SSO workshop, 1 National Nutrition Review, 8 eRHMS development meetings, Implementation workshops in 23 districts
- Maternal mortality review in 25 districts, Availability of functioning web-based Birth Defect Surveillance in 81 hospitals
- Training of disaster preparedness workshop in FHB staff

#### Key Performance Indicators:

Indicator	Target	2016	2017	2018
Maternal mortality ratio (per 100,000) live births		33.8	39	
Infant mortality rate per 1000 live births		8.2	8.7	
Post-partum visit coverage out of delivery reported		92.8	80.8	

Modern contraceptive prevalence rate		57.6	57.9	
Well women clinic coverage		52.8	53.3	

### 3.5 Oral Health Services

The Directorate of Dental Services ensures that oral health promotional activities are carried out at the community level and that essential dental equipment are provided for health institutions island-wide. Capacity building of dental professionals in quality and safety of oral healthcare, finalization of National Oral Health Policy document, finalization of National Oral Health Survey and recruitment of Dental Surgeons for Line Ministry Hospitals and provincial health institutions.

#### Major achievements during the year:

- Conducting training programmes on data submission to surveillance system for dental surgeons and regional dental surgeons
- Capacity building of Dental professionals on quality and safety in oral health care services
- Provision of essential dental equipment for health institutions and provision of CT cone beam scanner
- Maintenance and repair of dental units and equipments in National Dental Hospital Sri Lanka, DGH - Nuwara-Eliya, NIHS - Kalutara and CSTH
- 77.5% completion of the project on construction of new Maternity Hospital, Galle.

### 3.6 Training & Research

#### 3.6.1 Medical Research Institute

The Medical Research Institute (MRI) provides national level medical laboratory diagnostic services and conducts research activities. It also is a training centre for post-graduate medical students, provide National level Diagnostic Laboratory Services and Vaccine Quality Control.

#### Major achievements during the year:

- Establishment of high risk BSL 3 laboratory at MRI
- Negotiation with external resource department on donation to build 10 story building for MRI
- Purchase of equipment upgrading scanning electron Microscope

## Key Performance Indicators

Indicator	Target	2016	2017	2018
Number of research done per year		55	44	24
Number of tests done per year		606220	825973	1280538

## 3.7 Nutrition

### 3.7.1 Nutrition Division

The Nutrition Division carries out the tasks mentioned below: . Guide implementation of District Nutrition Action Plans (DNAP) to overcome malnutrition in the districts, manage Nutrition budget of Ministry of Health, Nutrition and Indigenous Medicine, coordinate with other relevant institutions of the Ministry to implement nutrition interventions, Provide health ministry partnership for implementation of multi sector nutrition action plan, implementation of National nutrition information and surveillance system, strengthening logistics of Thripasha Programme & improve the quality of product.

#### Major achievements during the year:

- Conducting nutrition related activities in all districts under District Nutrition Action Plan 2018 (DNAP)
- Conducting teacher training programs in 24 D.S Divisionas in 22 districts on Nutrition aspects of Early Childhood Development programme
- Conducting two prgramms in Jaffna District on District Nutrition Monitoring System
- Inauguration ceremony was held on 04.06.2018 on National Nutrition Month under the patronage of the Hon. Health Minister Dr. Rajitha Senaratne
- Conducting training programmes in Southern and Uva provinces on World Food Programme (WFP) Warehouse Management
- Conducting Youth Nutrition awareness programmes and Nutrition Steering Committee meetings

## Key Performance Indicators

Indicator	Target	2016	2017	2018
% utilization of funds of DNAP allocation= <u>Total expenditure on DNAP * 100</u> Total funds released to districts for DNAP	100%	75%	80%	85%
Coverage of pre-school nutrition programme	100%	90%	90%	98%

= No of Preschool Nutrition Promotion Programmes conducted No of Pre-school Nutrition Promotion TOT Programmes planned				
% of Thriposha storages completed= No of new Triposha storage facilities completed x100 No of new Thriposha storage facilities requested		65%	80%	82%
Coverage of Youth Nutrition promotion programmes via Youth Cubs= Number of Youth Nutrition promotion programmes conducted Number of Youth Nutrition promotion programmes planned		-		60%

### 3.8 Disaster Preparedness & Response

The Disaster Preparedness and Response Division is responsible to carry out the following activities such as improve structural, non-structural and functional capacity of health facilities through safe hospitals initiative, improve human resources for health sector disaster management, promote stakeholder coordination for health sector disaster management, improve information support, knowledge management and research for health sector disaster management, improve community participation towards health sector disaster management and integrate results-based monitoring and evaluation to health sector disaster management.

#### Major achievements during the year:

- Printing of Strategic Plan book, a handbook for disaster relief workers in English and annual report 2017
- Procurement of public alert system for National Institute of Mental Health, Mulleriyawa, fire extinguishers and refilling at National Institute of Health Science, mannequin to Colombo South Teaching Hospital, equipments for disaster preparedness at PGH Badulla, equipment and internet network system for National Institute of Infectious Diseases and equipment for Emergency operation centre at RDHS Kegalle
- Conducting 13 nurses training programmes and disaster management drills at NHSL and 13 other hospitals



### Key Performance Indicators

Indicator	Target	2016	2017	2018
Number of Disaster Management Drills conducted in the hospitals	25	22 drills in 28 hospitals	21 hospitals	Drill at NHSL and 13 hospitals and National level Disaster Drill and review drills conducted 2017
Number of re-awareness training programmes for nurses on disaster management	10	09	13	13
No of Training programmes on disaster preparedness and response		01 Training programme training 30 officers at Civil Security Department	06 training programmes at GH Chilaw	Not applicable
Equipment purchased	05 hospitals	04 hospitals Procurement of mannequins for DPRD ministry of Health	04 hospitals, 02 DM cells at Kegalle Division	06 hospitals
Printing publications	3 types of booklets (500 copies each)	3 books (500 copies each)	3 books (500 copies each)	3 books (500 copies each)

### 3.9 Environment and Occupational Health

The Directorate is technically responsible for all environmental health activities including hospital waste disposal and treatment, occupational health and food safety.

#### Major achievements during the year:

- Capacity building of health staff on occupational health safety
- Conducting annual district reviews on occupational health
- Procurement of personal protective equipment (N95 masks) for public health staff
- Printing of posters on Occupational & Environmental Health
- Printing of leaflets on Occupational & Environmental Health
- Improvement of sewerage and waste water management. Two hospitals have obtained Environmental Protection License and scheduled waste License
- Import & export food inspection and sampling. 10845 Health certificates were issued

- 26 factories (Iodized salt) and 42 factories (bottled or packaged drinking water) were inspected
- Carrying food surveillance activities
- Strengthening food laboratories
- Capacity building of staff FCAU staff, provincial/district food and drug inspectors and SPHID
- Participating in codex meetings, electronic working groups and online commenting system

### Key Performance Indicators

Indicator	Target	2016	2017	2018
Percentage of Annual District Reviews conducted	100% (n=27)	7.5% ( n=2)	14.8% (n=5)	92.6% (n=25)
Number of occupational health trainings conducted for health professionals	10 – 12 per annum	100% (n=10)	100% (n=10)	100% (n=12)
Food safety regulations gazetted	3-5 per annum	01	01	Nil
Environment Protection license obtained (Line ministry hospitals)	Cumulative	DNA	13	18

### 3.10 Health Promotion

The Health Promotion Bureau (HPB) was upgraded from the status of Health Education Bureau in 2018. Technical units each under the supervision of a Consultant in Public Health have been established with a view to coordinating the activities of the HPB. Furthermore, key components of Health Promotion (HP) and possible settings to implement HP initiatives in Sri Lanka include Health Communication, Life skills, Advocacy, Social and Community Mobilization, Community Empowerment. The HPB conducts media seminars and media briefings to commemorate special health days and in situations where urgent advocacy and health communication is required as in disaster situations or epidemic situations. A 24 hour hotline ‘ Suwasariya’, provides instant and rapid answers to queries on general and oral health issues as well. The technical units of the HPB are responsible for implementing capacity building programmes of health and non – health staff on the areas identified as key components, development and printing of IEC material: leaflets, posters, guidelines, video documentaries on priority health issues, as well as conducting regular national, provincial and district reviews and field and institutional supervision of health promotion & health education activities.

**Major achievements during the year:**

- Materials were printed on Complementary feeding, Influenza, protect health during a disaster, IEC material on prevention of food contamination for food safety week and WWC
- Capacity building on communication for Nursing officers and trainee Medical Officers of Health, Capacity building on counselling skills for Nursing Officers, capacity building on oral health of elders for regional dental surgeons, capacity building on communication skills on reproductive health for primary health care staff, district level capacity building on Hospital HP for middle level managers from hospital sector, Central level advocacy and TOT on HP/community empowerment for middle level managers, Central and District level capacity building on school health promotion for Principals and Health Science teachers were successfully held this year
- Workshops on risk communication for relevant health officials and workshop on prevention of dental trauma and related first aid for educational officials and teachers in Colombo District was held

Key performance Indicators have not been identified so far.

**3.11 Services for the Youth, Elderly and Disabled**

The Directorate of Youth, Elderly and Disabled Persons of the Ministry is the national level body responsible for primary, secondary and tertiary level healthcare activities involving youth, elderly and the disabled. The directorate is responsible to improve physical, mental and social well being of the elders, achieve a healthier more active and more productive elderly population in future, improve the quality of life of disabled people, improve health services for disabled people and improve knowledge, attitude and life skills among youth to reduce youth problems and improve their well-being.

**Major achievements during the year:**

- Capacity building for health and non-health service providers on Elderly and Disability care
- Capacity building programme for nursing officers on Elderly and Disability care at district level
- Awareness programme on Elderly and disability care for healthcare providers at institutional level
- Advocacy consultative meetings for development of an educational material on Elderly and Disability care
- Consultative meeting to develop a priority assistive product list for Sri Lanka
- Consultative meetings to develop and finalize a guide on nutrition for community dwelling older persons and caregivers are some of the key achievements during the year

## Key Performance Indicators

Indicator	Target	2018
Number of capacity building programmes conducted on elderly and disability care per year		08
Number of individuals trained		206

### 3.12 Regulation of Private Health Services

The Directorate of Private Health Sector Development and the Private Health Services Regulatory Council (PHSRC) are jointly responsible for the registration of the private medical institutions, coordination of the procedures related to the amendment of the Private Medical Institutions act, when the need arises and act as a linkage between the Ministry of Health and the private health sector when seeking approvals. There are about 200 private hospitals in Sri Lanka with 5120 beds altogether.

#### Major achievements during the year:

- Continuation of registration and renewal of private medical institutions licensing
- Handling of complaints against private medical institutions
- Inspection and observation visits to private medical institutions
- Coordinating with other Directorate of Ministry of Health, Nutrition and Indigenous Medicine, Sri Lanka Medical Council, Health sector Trade Unions and Professional Organizations of and when necessary
- Establishment of proper information system in private medical institutions
- Granting preliminary approval to establish new private hospitals after evaluating the project proposals
- Processing of documents pertaining to kidney transplant by private hospitals
- Processing of documents pertaining to temporary registration of specialists
- Development of quality of services provided by the private medical institutions by advocating to adhere to national guidelines and standards in conducting preventive services
- Improvement of complaints handling procedure by timely investigation and enforcing remedial actions against private medical institutions
- Establishment and maintenance of proper information system in private medical institutions including data on human resource, communicable and non communicable diseases

- Initiation of the conduct of refresher/gap filling courses for “private Sector Nurses” who are currently employed at private hospital/ medical centers in collaboration with PHSD, PHSRC, NAITA and APHINH
- Initiation of the conduct to refresher/ gap filling curses for “Dental Surgery Assistants” who are currently employed at dental surgical practices/clinics in collaboration with PHSD, PHSRC, NAITA and SLDA
- Develop suitable charges/prices for various procedures and medical laboratory tests charged by private health sector
- Initiation of a survey in respect of private health sector with the help of PHI in the MOH areas and develop a data base on all existing private medical insitutions
- Conduct a survey on all admissions to private hositals with dengue fever
- Conduct a survey on all admissions to private hospitals during the past 3 years and details of all human resources

### **3.13 Supplementary Services**

#### **3.13.1 Laboratory Services**

Laboratory service coordinated under Deputy Director General of Laboratory Services plays a major role in Healthcare System in the country. The Deputy Director General and the Directorate of Laboratory Services are responsible for establishing and enactment of essential and relevant legislation and also for providing technical and managerial guidance for the maintenance of laboratories in compliance with nationally and internationally accepted standards. Key functions of the deviosion are ; Strengthen and regulate laboratory services in government Line Ministry hospitals and special campaigns, expansion and strengthening of laboratory services in provincial health institutions, provide allocation for purchasing of equipment for laboratories, provide funding for proper maintenance of laboratory equipment, support disease prevention, control, and surveillance through provision of diagnostic services, policy development relevant to laboratory services, training and education of laboratory staff, partnerships , communication and coordination with stakeholders relevant to laboratory services

#### **Major achievements during the year:**

- Allocation of Rupees 1275 million rupees to provide laboratory equipment for histopathology, hematology, chemical pathology and microbiology in line ministry hospital laboratories
- establish virology laboratories in TH – Kandy, TH – Karapitiya, TH – Jaffna, TH – Anuradhapura, ApekshaHospital - Maharagama

- Equipment purchased for National Hospital for Respiratory Diseases - Welisara and several other Teaching hospitals
- Improvement of accessibility and availability for necessary laboratory investigations to the population living in far remote and difficult areas were supported through mobile laboratory services.
- Awareness programs conducted systematically throughout the country among target groups. Over one hundred (100) programmes were conducted with participation of 1550 medical staff, health administrators and clinicians, and for 4565 paramedical staff.
- Public communication targeting the community on rational use of antimicrobials through video clips, printed media and distribution of IEC material to general public
- Establishment of National antimicrobial resistance surveillance system incorporating 25 sentinel sites with capacity building on software for data collection and provision of laptops and streamlining of supply chain for consumables required for testing
- Sri Lanka became a member of Global Antimicrobial Resistance Surveillance System (GLASS) since May, 2018
- Initiated the negotiations for support on AMR surveillance by the Fleming Fund (UK Grant for AMR) and agreements made to provide funds in 2019
- The five year action plan developed on establishing a comprehensive national biosafety and biosecurity framework and legislation for Sri Lanka
- National level awareness programmes on Biosafety and Biosecurity for core groups in Laboratory Sector conducted at several sites such as Colombo, Kandy, Karapitiya, Anuradhapura and Ampara.
- Guidelines developed with technical inputs from representatives of relevant professional colleges to be incorporated into Primary Health Care Strengthening Project

### Key Performance Indicators

Indicator	Target	2016	2017	2018
Percentage expenditure from capital fund allocation for laboratory equipment	Physical progress 100%	100%	100%	100%
	Financial progress 100%	56.6%	63.22%	64.16%
No of regional virology laboratories established	To establish virology laboratories in : TH – Kandy TH – Karapitiya TH – Jaffna TH – Anuradhapura Apeksha Hospital - Maharagama	N/A	1 Virology laboratory established. (TH Kandy)	2 Virology laboratories established. (Karapitiya and Anuradhapura)

Total no of locations	No of mobile laboratories offered:	111	155	135
Total no of tests performed		120	47,773	35,565
No of people trained on antimicrobial resistance	Implementation of a well-organized system to have AMR awareness island wide targeting different audiences	TOT for 86 personnel	TOT for 123 personnel	Total of 6965 personnel of different categories trained on AMR
Tools developed for general public awareness on AMR	Implementation of a well-organized system to have AMR awareness island wide targeting different audiences	N/A	N/A	Production of a documentary and short video clip for public awareness
No of functional sentinel sites participating for the national surveillance programme on AMR	Establishment of the National Surveillance programme on AMR	N/A	Development of protocol for the surveillance programme	Collection of data , data analysis, committee for data analysis interpretation
Contribute SL data for Global AMR surveillance 2017-2018 report	Obtain membership of Global Antimicrobial Resistance Surveillance System (GLASS)	N/A	N/A	SL is member of GLASS
No of people trained on Biosafety and Biosecurity	TOT to develop a the national level comprehensive common training programme	N/A	N/A	525 personnel trained on Biosafety and biosecurity

### 3.13.2 National Blood Transfusion Service

The division is responsible for all blood transfusion services across the country. Main functions of the National Blood Transfusion Services include; Collection of blood from community based blood donation campaigns and hospital blood banks, processing collected whole blood to blood components, testing all blood collection for Transfusion Transmissible Infections and blood grouping, storage and transport of blood components in appropriate conditions, provision of blood and blood products to all appropriate therapeutic needs for government and private sector hospitals, providing

technical assistance on patient management related to transfusion medicine, provision of therapeutic procedures related to transfusion and transplant (Stem cell processing and infusion, therapeutic plasma exchange, autologous PRP treatments), laboratory services for HLA typing and cross matching.

**Major achievements during the year:**

- Opening of Blood bank Medawachchiya.
- 1500 blood donors and mobile blood camp organizers felicitated in the national event held in Colombo. Donor felicitation programs conducted in 14 cluster centers.
- Screened approximately 0.5% of donors from donor population for NCDs.
- Validation of the freezing and thawing of red cells performed and successful.
- Quality Management Unit established in the new wing. Equipment of Cord blood bank , sample archiving unit and HLA laboratory installed and awaits commissioning.

**Key Performance Indicators**

Indicator	Target	2016	2017	2018
Number of hospital blood banks providing 24 hour service	All (105)	70	74	77
Number of whole blood collection per year	>400,000	414,175	423,668	417,000
Number of new blood banks established	Depends on the new requirements	2	2	1
Number of blood banks providing therapeutic apheresis	Depends on the service expansions	26	29	31

**3.13.3 Quality and Safety of Health Services**

The Directorate of Healthcare Quality and Safety is responsible for the strengthening Institutional Quality Management Units by providing necessary technical assistance; for capacity building of institutional staff on quality & safety through training; for development of guidelines and revision of National Clinical Guidelines; for development of accreditation standards for healthcare services in Sri Lanka.

**Major achievements during the year:**

- Conducting quarterly performance review meetings of quality management units of line ministry institutions
- Conducting midterm of quality management units provincial ministry institutions



- Training of middle level managers and members of work improvement teams in line ministry institutions
- Conduct training programmes on patient safety
- Conducting training programmes on 5S, CQI and TQM
- Development of accreditation standards for healthcare institutions in Sri Lanka

### Key Performance Indicators

Indicator	Target	2016	2017	2018
Conduct quarterly performance review meetings of quality management units of 47 line ministry institutions	4 per year	4 PRM	4 PRM	3 PRM
Conduct midterm review of quality management units of provincial ministry institutions	2 per year	1 DPRM	2 DPRM	2 DPRM
Conduct training programme in 5S, CQI and TQM	3 per year	5 Programmes	3 programmes	3 programmes
Conduct training programme on patient safety	4 per year	Not planned	3 programmes	3 programmes

### 3.13.4 Public Veterinary Services

The Public Veterinary Services of the Ministry is the national level body responsible for veterinary services of the country. Key functions of the division is advocacy, health education i.e Awareness, social marketing, community participation and intersectional coordination, monitoring and evaluation.

#### Major achievements during the year:

- Conducting three community level awareness programmes on rabies prevention
- Conducting inservice training on cost effective PET and review meetings on rabies control activities at district level.

### Key Performance Indicators

Indicator	Target	2016	2017	2018
No of review meetings	4	4	4	1
No of training programmes		67	33	5
No. of people visited to exhibition hall		4820	7020	7420
No of leaflets distributed		17370	25070	26470
No of school children covered through awareness program		12550	18050	19050

### 3.13.5 Medical Statistics Unit

The Medical Statistics Unit is responsible for updating the health institutions list of the Ministry. A complete list of health institutions with the name of the institution, type, available facilities, ownership, head of institution and contact details have been prepared for the year of 2018.

The Unit also is responsible for data collection, analysis and publishing of the Annual Health Bulletin. Currently, preparation of chapters for the 201 book is underway. Data for the Annual Health Bulletin is collected through the Indoor Morbidity and Mortality Return, OPD return, Clinic return quarterly. Maternal and dental statistics are collected monthly and data on bed strength, health staff and specialists are collected as at 31<sup>st</sup> December each year from all health institutions of the state sector.

Implementation of the eIMMR has been successfully island-wide hospitals. The unit was also successful in preparing mid-year population estimates by Medical Officer of Health (MOH) areas for 2018.

#### Major achievements during the year:

- Complete the list of health institutes with the name, type, available facilities, ownership, head of the institute and contact details for the year 2018
- Publication of Annual Health Statistics 2016 and Annual Health Bulletin 2016. Preparation of the chapters for Annual Health Bulletin 2017.
- Implement the eIMMR system in all hospitals in Sri Lanka which have the capacity to start the system
- Sending data to all the data requested institutions on time

### Key Performance Indicators:

Indicator	Target	2016	2017	2018
Updated health institution list	Prepare complete list	Prepared the complete list of health institutes for 2016	Prepared the complete list of health institutes for 2017	Prepared the complete list of health institutes for 2018
Annual Health Bulletin	Publish Annual Health Bulletin	Annual Health Bulletin 2014 published	Annual Health Bulletin 2015 published	Annual Health Bulletin 2016 & Annual Health Statistics 2016 published
eIMMR System	Implement the system in all hospitals in Sri Lanka which have the capability to start the system	Implemented in 124 new hospitals	Implemented in 65 new hospitals	Implemented in 24 new hospitals (functioning in 513 hospitals islandwide by the end of 2018 )
Updated GN list of each MOH Area in Sri Lanka and mid-year population estimates	Updated GN list of each MOH Area in Sri Lanka for each year. Prepare mid-year population estimates by MOH areas for each year	Updated GN list of each MOH Area in Sri Lanka for 2016. Prepare mid-year population estimates by MOH areas for 2016	Updated GN list of each MOH Area in Sri Lanka for 2017. Prepare mid-year population estimates by MOH areas for 2017	Updated GN list of each MOH Area in Sri Lanka for 2018. Prepare mid-year population estimates by MOH areas for 2018

### 3.13.6 National Medicines Regulatory Authority

The National Medicines Regulatory Authority (NMRA) is the institution that ensures that the Pharmaceuticals and Medical Devices available to the public meet the required standards of quality and are within the existing legislative framework with respect to the production, marketing and dispensing of these items. Some of the key functions carried out by the authority include; Registering new drugs / cosmetics / medical devices, monitoring and approving changes/ variations to those products that are already approved and granted marketing authorization, monitoring and implementing Good Manufacturing Practices for Pharmaceutical products and Cosmetics, licensing and monitoring of importation, manufacturing, sale, advertisements and distribution Surveillance of quality of drugs available in the market, reviewing and approving of advertisements on cosmetics / drugs / devices (CDD), approving and monitoring of clinical trials, issuing WHO-format Certificates of Pharmaceutical Products for the purposes of export, recalling cosmetics, drugs and devices from the market on safety grounds, human resource development programs and flying squad activities and prosecutions

**Major achievements during the year:**

- Registration and licensing , 47 local and 7 foreign inspections of good manufacturing practices and issue 23 certificates for WHO goods manufacturing practices
- Registration and licensing of cosmetic products as per the cabinet approval received on 10.10.2017
- Implementation of the law against the abuse of medicines (ex: Tramadol, Pregablin)
- An awareness programme was conducted to enhance the capacity in detecting and handling of abusive medicines with STF and Police Narcotic Bureau officers.
- Post market surveillance on the quality and safety of medicines, medical devices and borderline products
- Development of human capital through various training/ conference locally and internationally
- Provide information pertaining to the functions of the authority to the stakeholders and general public
- Issue, review and update guidelines, recommendations, directives and rules as applicable to medicines, medical devices and borderline products

**3.14 Medico-Legal Services**

Institute of Forensic Medicine and Toxicology is the principal institute that manages medico-legal responsibilities in the country managed under the Chief Judicial Medical Officer Sri Lanka. Medico-legal services in the country are handled by designated medical officers and consultants medico-legal around the country in various hospitals. The key functions of the Institute of Forensic Medicine and Toxicology are medico Legal examination of patients, victims and accused persons, autopsy to find cause of death and related medico-legal issues, forensic odontology expertise advice, forensic histopathology laboratory service, toxicology analysis and other laboratory services, post graduate training and in-service training for doctors, training of other stake holders in justice delevary system and awareness programmes for public (School children and parents).

**Major achievements during the year:**

- Increase the quality and quantity of forensic histopathology
- National wide disaster management guidance and anthropology services
- Launching of institutional website under Ministry of health website ([www.ifmt.health.gov.lk](http://www.ifmt.health.gov.lk))
- Standardizing medico-legal management of dead in disasters and catastrophies

**Key Performance Indicators:**

Indicator	Target	2016	2017	2018
Number of patients examined		12,351	11,573	11,595
Number of Autopsies performed		1,458	1,534	1,686
Number of Odontology patients examined		272	239	233
Number of Histology slides prepared		4,711	6,120	7,442
Number of Laboratory Investigations done		1,825	1,457	1,604
Number of training programmes for doctors and other stake holders.		16	10	14

**3.15 Sexually Transmitted Disease Control Services**

National STD/AIDS Control Programme (NSACP) is the main body that manages the functions related to STD/AIDS prevention programmes. Main functions of the NSACP are; coordinating and participating in the national response to HIV epidemic, carrying out HIV prevention interventions, helping to create an enabling environment for STI and HIV prevention, provision of clinical services for STI, provision of treatment and care for people infected and affected by HIV, provision of laboratory services for STI and HIV, condom promotion for STI and HIV prevention, provision of counselling services for STIs and HIV, prevention of mother to child transmission of HIV and syphilis, training and capacity building of health and non-health staff, carrying out HIV and STI surveillance and research, monitoring and evaluation of STI and HIV services, dissemination of strategic information on STI and HIV, programme planning and coordination at district level, administrative work and special projects and activities implementation, increase the accessibility of STD services for most at risk population, implementation of national world AIDS day programme, continuation of the programmes of elimination of congenital syphilis, prevention of mother to child transmission of HIV, awareness programme for the school children, inter-sectoral coordination and targeted intervention for MARPS with behavioral change communication.

**Major achievements during the year:**

- Training on EMTCT for healthcare providers in field and hospitals
- Consultative meetings of National Validation Committee
- Printing MCH guidelines in Sinhala and Tamil
- Mass media awareness and District monitoring team meetings on EMTCT
- Meetings on data management for NSACP and FHB staff
- Consultative workshops to train police officers for prevention of HIV among sex workers, develop resource pool as trainers in youth council on behavior change communication to

promote safe sex and HIV test, training for trainers in youth officer of youth corps on behavior change communication to promote safe sex and HIV tests and training for trainers in Armed forces on behavior change communication to promote safe sex and HIV tests.

- Sensitization programmes for child protection authority
- Research on knowledge, attitude and safe sexual practices among youth in Youth Corp Institute Sri Lanka
- Assessment of behavior related stigma, among drug users in western province
- Development and printing of 30000 pocket calenders for promotion of HIV testing
- Training programme on STD/HIV counselling for MOs & NOs
- Printing annual report 2017 to the NSACP
- Develop electronic information management system

### Key Performance Indicators

Indicator	Target	2016	2017	2018
Annual rate of reported cases of MTCT of HIV per 100,000 live births	<50	1	0	0
Number of female sex workers reached with HIV prevention programme	11,400	2361	7927	
Percentage of PLHIV with viral load suppression	95	90	93	92
Percentage of PLHIV on ART	>90	90	90	
Number of MSMs that have reached HIV prevention program	8637		2596	

### 3.16 Medical Supplies Services

Medical Supplies Division (MSD) is responsible for providing pharmaceuticals, surgical items, laboratory items, radioactive items, printed materials etc. and keep the items stored until they are distributed among healthcare institutes. There are 26 regional stores at every district. In addition MSD is also responsible for supplying dangerous drugs and essential medical items which are not available in the private sector. Some key functions of MSD include infrastructure development in Central Level, Sub total and institutional level, Equipment and vehicles, Quality and safety development, capacity building, monitoring of supply chain management, research and evidence base management.

**Major achievements during the year:**

- Construction, renovation, expansion and refurnishment of different sections of Medical Supplies Division area
- Infrastructure development in sub store level at Digana, Welisara and Angoda
- Improving store facilities in curative care institutes and RMSDs island wide.
- Expansion of MSMIS project to peripheral institutes
- Capacity building programmes for staff at MSD
- Establishment of DTC committees at all institution in order to aware on supply chain management and developing realistic estimation
- Encourage research and Surveys on improving stores facilities at curative care institutions

**3.17 Biomedical Engineering Services**

The Division of Biomedical Engineering Services of the Ministry of Health is entrusted with procuring, installing, commissioning and maintaining medical equipment in line ministry hospitals. This division also provides technical assistance to the Provincial Health Authorities based on their requirements.

The main functions and responsibilities of the Biomedical Engineering Services (BES) are; procurement of medical equipment, repair & maintenance of medical equipment, training of end users and technical staff, provision of local/foreign technical expertise in medical equipment. The head office of the Biomedical Engineering Services Division is located in Colombo has workshop facilities, warehouse facilities for equipment and spare parts storage and administrative functions. Biomedical Engineering Services has started development of web-based software for Medical Equipment Inventory Management System.

**Major achievements during the year:**

- Ensure availability of medical equipment for line ministry hospitals on time through procurement.
- Ensure availability of spare parts and accessories through procurement.
- Maintenance of medical, dental and laboratory equipment in line ministry institutions on a regular basis and attend breakdowns within 24 hours.
- Training personnel, coordination of training of end users.
- Providing technical guidance to the Ministry and Provincial Health authorities
- Assist the provincial authorities for procurement of medical equipment.

## **3.18 Management, Development and Planning Services**

### **3.18.1 Planning Unit**

The Planning Unit is one of the major Directorates under the Management, Development and Planning Unit of the Ministry of Health, Nutrition & Indigenous Medicine. It is the key focal point for planning and implementing activities pertaining to capacity development of health planning staff, both at the central and the provincial levels, with the aim of strengthening the health system to achieve universal health coverage and be the regional leader in healthcare. Key functions of the planning unit include preparing Health Development Plans (Master Plan, Five-year Health Development Plan and Annual Action Plan) and review progress of activities, facilitate cadre improvement at central as well as provincial healthcare institutions, facilitate the planning of health system development activities, provide technical guidance / assistance in planning activities and facilitate for capacity building on health planning & management at central and provincial level

#### **Major achievements during the year:**

- The Annual Action Plan of the Ministry of Health, Nutrition & Indigenous Medicine for the year of 2018 was compiled and distributed. In addition, Provincial Annual Action Plans were collected for monitoring purpose. The Annual Performance Report of 2017 for the Ministry was also prepared and tabled in the Parliament.
- Twenty three new project proposals received by the Planning Unit and 08 proposals were forwarded to the Department of National Planning for their consideration.
- Two Memorandum of Understanding (MoUs) for implementation of the following projects were signed between the Ministry of Health and relevant donors.
  - Construction and equipping a three-storied Rehabilitation Centre & implementation of a three-year training programme at TH-Jaffna (Sing Health Project)
  - Construction of ten-storied building for Cancer Treatment Unit at TH-Karapitiya (COC Project)
- Provincial General Hospital – Ratnapura was upgraded as a Teaching Hospital, in order to facilitate for clinical training of the medical students of the newly established medical faculty at the Sabaragamuwa University of Si Lanka
- Cadre revision of all line ministry institutions is in progress. Two reports on “Human Resource Profile” as at 31.12.2017 and 1<sup>st</sup> of January – 30<sup>th</sup> June 2018 were published. Developing cadre projection for Medical Specialist was commenced
- Capacity building programmes were conducted for health planning staff in Western & North-Western Provinces and Line Ministry Institutions



- Through the Matara District Maternal and New-born Healthcare Strengthening Project, it is planned to upgrade the Korea-Sri Lanka Friendship Hospital (KSFH) in Godagama, Matara as a tertiary referral hospital specialized in maternal and new-born care
- Two Consultative meetings were conducted to develop SDG targets and finalized the SDG targets through the National consensus achieving workshop

### 3.18.2 International Health

International Health Unit is responsible for coordinating donor funded work plans by planning, implementing, monitoring and evaluating, dealing with related overseas training of personnel, undertake co-ordination of all visits related to Health Department and to provide technical assistance for visits by foreign experts, visitors, consultants, trainers, NGOs, coordinate with other relevant ministries including Ministry of Foreign Affairs and coordinate health related international health and other relevant activities in Sri Lanka.

#### Major achievements during the year:

- Preparation & launching of WHO Biennium work plan 2018/19
- Preparation & launching of UNICEF Biennium work plan 2018/19
- Preparation & launching of UNFPA Biennium work plan 2018/19

#### Key Performance Indicators

Indicator	Target	2016	2017	2018
No. of activity proposals approved and sent to donor agency	100	WHO- 281 (Obligated amount is Rs.192,006,757.00)		WHO- 128 (Obligated amount is Rs.155,332,674.00)
	10	Other sources -28 (Obligated amount is Rs.41,286,772.00)		Other sources -10 (Obligated amount is Rs.44,978,548.00)
	20 - 25	UNFPA-62 (Obligated amount is Rs.10,252,179.14)	UNFPA-26 (Obligated amount is Rs. 6,265,640.00)	UNFPA-12 (Obligated amount is Rs.2,684,263.80)
	30	UNICEF-40 (Obligated amount is Rs24,212,809.33)	UNICEF- 36 (Obligated amount is Rs,12,554,588.38)	UNICEF-11 (Obligated amount is Rs.2,511,343.57)
No. of progress review meeting	WHO- 03 UNFPA-02 UNICEF-02	WHO- 03 UNFPA-02 UNICEF-02	WHO- 03 UNFPA-02 UNICEF-02	WHO-02 UNFPA-01 UNICEF-01
No. workshops on WHO proposal writing	03	-	-	Two days two workshop
Provision of fellowships to	-	-	251 of fellowships awarded for 737	305 of fellowships awarded for 995

officers in the Ministry of Health			fellows	fellows
Facilitating to grant visa & concurrences	-	-	Granting 35 Visa and 47 Concurrences	Granting 30 Visa and 46 Concurrences

### 3.19 Financial Services

Financing department is primarily responsible for managing the finances of health ministry including financial planning, record keeping and financial reporting. There are sub sections of the financial department to carry out different activities.

#### 3.19.1 Chief Financial Officer II

##### Major achievements during the year:

Managing expenses for

- Machinery and equipment repair
- Vehicle repair
- Purchase of machinery, furniture and office equipment
- Training of officers

##### Key Performance Indicators

Indicator	Target	2017	2018
No. of machinery and equipment repaired	100%	0%	0%
No. of vehicles repaired	100%	100%	100%
No. of office equipment purchased	100%	6%	80%
No of machinery and equipment purchased	100%	25%	25%
No. of furniture and office equipment purchased	100%	100%	100%
No. of officers trained	100%	90%	100%

#### 3.19.2 Chief Financial Officer III

##### Major achievements during the year:

Manage expenses for

- Repairing of vehicles, for Line Ministry, Nursing Training Schools and Institutes of Health Promotion and Disease Prevention

- Plant machinery and equipment
- Staff training for administration and financial sector
- Purchasing furniture and office equipment for line ministry hospitals and Institutes of Health Promotion and Disease Prevention
- Purchasing of books and journals for Institutes of Health Promotion and Disease Prevention

#### Key Performance Indicators

Indicators	Target	2016 Rs. (Mn.)	2017 Rs. (Mn.)	2018 Rs. (Mn.)
Vehicle repair (Ministry administration)		36.03	35.77	38.54
Plant machinery and equipment		65.44	16.33	5.10
Staff training for administration & financial sector		0.31	0.79	1.29
Repairing of vehicles for line ministry hospitals		16.8	21.90	34.62
Purchasing of furniture & office equipment for line ministry hospitals		164.44	232.55	304.77
Repairing of vehicles for Nursing Training Schools		3.71	0.82	1.97
Purchasing of hospital equipment for line ministry Hospitals		75.27	275.45	297.85
Repairing of vehicles for Institutes of Health Promotion & Disease Prevention		1.01	3.19	2.02
Purchasing of furniture & office equipment for Institutes of Health Promotion & Disease Prevention		6.69	3.53	6.03
Purchasing of books and journals for Institutes of Health Promotion & Disease Prevention		0.38	0.36	0.28

## 3.20 Infrastructure development projects implemented in healthcare institutions

### 3.20.1 Local funded projects

In the Health Budget, allocations for implementation of Local funded construction projects in line ministry healthcare institutions are given to Deputy Director General of Logistics. Accordingly progress of the projects listed in the following table carried out in 2018, are given.

#	Name of the project	Location	Physical Progress	Financial Progress (Rs. Mn)
1	Improvement of ETU Facilities of Hospitals under the Line Ministry (Development of Accident and Emergency Care Services)	TH-Jaffna , DGH-Polonnaruwa BH-Kalmunai DGH - Kaluthara  TH Anuradhapura,TH Kanady, PGH-Badulla, DGH-Chilaw, DGH-Matara, DGH-Kegalle, BH Mulleriyawa, DGH Trincomalee, BH-Gampola	TH- Kandy (25%), DGH-Trincomalee (17%), DGH - Chilaw (19%), DGH / Kegalle(9%) - construction in progress. TH/ Anuradhapura, DBH / Mullariyawa, BH-Gampola - contracts awarded works in progress. DGH-(Matara) Kamburugamuwa - site not confirmed. DGH-Ampara at TEC level. PGH-Badulla - Contract awarded and site clearing on going.	1,143.01
2	Construction of National Stroke Centre at Base Hospital Mulleriyawa	Mullariyawa	Foundation completed. Structural works started and in progress.	249.50
3	Construction of Millennium Ward Complex at TH Kalubowila - (Completion of balance work)	THCS- Kalubowila	Civil works completed.	179.36
4	Construction of Cardiology Unit, Catheter Lab, Laboratory Complex and Ward Complex at Teaching Hospital Batticaloa	TH-Batticaloa	Structural works in progress	77.30
5	Construction of Nursing Faculty/Hostel	Sri Jayawardanapura / Mullariyawa	Site preparation is in progress.	344.88
6	Construction of Doctors, Nurses & other staff quarters in Identified hospitals	TH-Karapitiya, TH-Anuradhapura, TH-Jaffna	TH-Karapitiya - completed, TH-Jaffna - finishing works started, TH-Anuradhapura - plastering in progress.	105.81
7	Development of Estate Hospitals	Sabaragamuwa Province	Completed the renovation activities in selected estate	95.24

			hospitals.	
8	Construction of Medical Ward Complex at DGH Chilaw	DGH - Chilaw	Piling works completed	42.00
9	Development of Polonnaruwa Hospital	DGH- Polonnaruwa	Completed the construction of Consultant quarters. Construction of OPD building at DH-Bakamuna and Medirigiriya construction works completed.	111.37
10	Development of Karapitiya hospital	TH-Karapitiya	Construction works on going.	200.07
11	Extension of OPD , Laboratory & Radiology Unit at IDH-Angoda	NIIDM - Angoda	Contract to be awarded.	19.03
12	Construction of Cancer Units at TH- Kandy, BH- Telippalai and TH- Karapitiya	TH-Kandy BH-Telippalai	Construction of 3-storied building at BH-Telippalai completed. Construction of 6 floors of 8 storied superstructure completed.	193.91
13	Upgrading Nurses Training Schools	Galle, Anuradhapura, Kalutara and Kandy	Piling works in progress.	238.22
14	Construction of New Theatre complex with modern facilities at BH Horana	BH- Horana	Foundation works in progress.	221.14
15	Construction of a three storied building consists of X - ray unit, OPD, A & E unit & Blood bank at BH Pimbura	BH-Pimbura	Structure up-to 2 floors completed. Roofing works in progress.	4.24
16	Construction of CKD Screening Centers	Sothorn, Eastern, North Central, and Uva provinces	Construction of buildings at hospitals in Hambantota, Trincomalee, Batticaloa, Badulla, Karapitiya, Mallavi, Settikulam, Padaviya, Padavi-Sripura, Sampathnuwara, Aralaganwila, Dehiattakandia, Hettipola, Bakamuna, Wellawaya, Tissmaharamaya, Kebithigollawa and Machchanduwa	723.55
17	Construction of a New Building (16-storied) for MOH	Colombo	Piling and construction of two basements completed. Construction of first floor is in progress.	762.30
18	Establishment Specialized Pediatric care complexes in TH-Karapitiya, TH-Jaffna and DGH-Ampara	TH-Karapitiya, TH-Jaffna and DGH-Ampara	DGH-Ampara - Finishing works of 2 <sup>nd</sup> floor of the building completed. TH-Karapitiya – Foundation work started.	561.95
19	Establish Base Hospital in Nintavur	Ninthavur	Piling completed.	200.00

20	Establish Oral Health Centre in Karapitiya Teaching Hospital	TH-Karapitiya	Site preparation completed. Foundation work started.	161.25
21	Construction of Little Heart Centre at LRH	LRH Colombo	Pile foundation completed. Structural works started.	103.94

### 3.20.2 Foreign funded projects

Progress of the foreign funded projects implemented in 2018 is given below:

#	Name of the project	Source of Fund	Physical Progress	Financial Progress (Rs. Mn)
1	Matara District Maternal and Newborn Health Care Strengthening Project.(GOSL - KOICA)	KOICA	New Generator Room constructed. Construction of new building was started.	187.00
2	Rehabilitation and Expansion of Production Capacity at State Pharmaceuticals Manufacturing Corporation (SPMC) JICA (Yen 1239.88M) / For 2017 JICA (12) - LKR 1092.45 Mn and GoSL (17) LKR 175 Mn	JICA	Building refurbishment & construction of buildings completed. Installation of machines / equipment 90% completed.	1,299.24
3	Helmut Khol Maternity Hospital Karapitiya, Galle (GOSL -Germany) -	Kfw German	Completed 70% of construction of structures of five building blocks. Finishing works in progress.	552.17
4	Development of District Hospital Kalutara as a Specialized Maternal and Children's Hospital	Netherland	Piling works completed. 1 <sup>st</sup> floor columns construction in progress.	811.80
5	Strengthening Patient Care Services by Establishing Clinical Waste Management Systems in the needy hospitals comes under the provincial councils in Sri Lanka (GSOL-Australia)	Australia	Five incinerators and 20 Metamizers purchased and installed.	206.42
6	Development of Ambulatory Care Centre (OPD) of National Hospital of Sri Lanka (GSOL- China)	China	Completed main structure up-to 8 <sup>th</sup> floor.	346.88
7	Provision of one MRI Scanner for Colombo North Teaching Hospital (GOSL - China)	China	MRI machine installed.	
8	Construction of a New Laboratory and a Hospital for Kidney Disease in Polonnaruwa (GOSL - China)	China	Foundation works started.	

### **3.20.3 Second Health Sector Development Project (SHSDP)**

SHSD Project was a five-year project which started in 2014 and completed in 2018. The project was funded by the World Bank and the project consists of two components. Component I contributed to achieve goals of of the National Health Development Plan supporting the overall programme specifically focusing on four thematic areas: Health system improvement, Maternal & Child Health and Nutrition, Communicable Disease Control & Prevention and Non Communicable Disease Prevention & Control. Component II supported the implementation of innovations, operational research and opportunities for capacity building.

Through this project, 20 indicators were monitored. Out of 20 indicators, 09 are linked to disbursement of funds (DLI) and 11 are not linked to disbursement of funds. In 2018, the target was to achieve 100% progress of DLI 1, DLI 3, DLI 5, DLI 6, DLI 7 and DLI 9. According to the progress report, DLI 1, DLI 5, DLI 6 and DLI 7 have reported 100% achievement and DLI 3 was 90% and DLI 9 has achieved 75.8%. Actual expenditure was Rs. 2,142 mn.

### **3.20.4 Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) Project**

This five-year project funded by the Global Fund was completed in 2018. The project consist of four components: HIV, TB, Malaria and HSS (Health System Strengthening). Most of the planned activities under each component had been completed. Total expenditure of 2018 was Rs. 946.13 mn.

### **3.20.5 Implementation of Policy on Healthcare Delivery for Universal Health Coverage**

The Ministry of Health, Nutrition and Indigenous Medicine is committed to ensure the operationalization of the above policy, which focuses on reorganizing and strengthening the primary healthcare delivery system. The services identified in the Sri Lanka Essential Services Package (SLESP) will be delivered by the Primary Medical Care Institutions. Following two projects were initiated in order to implement the proposed primary healthcare delivery system.

- **Primary Healthcare System Strengthening Project (PSSP) funded by World Bank**

This project is implemented in all provinces in the country for five-year period.

- **Health System Enhancement Project (HSEP) funded by Asian Development Bank (ADB)**

This project also a five-year project and is implemented only in Central, North Central, Sabaragamuwa and Uva Provinces.

## 4.0 Summary of the Annual Performance of Line Ministry Hospitals-2018

Indicator	Name of Hospital									Board Managed Hospitals		
	National Hospital of Sri Lanka	Teaching Hospital Anuradhapura	Teaching Hospital Batticaloa	Teaching Hospital Colombo North	Teaching Hospital Ragama	Teaching Hospital Colombo South	Teaching Hospital Jaffna	Teaching Hospital Kandy *	Teaching Hospital Karapitiya *	Teaching Hospital Peradeniya	Sri Jayawardenapura General Hospital	Wije Kumaratunga Memorial Hospital
Dengue case fatality rate	0.45	0.36	0.2	0	0	0.22	0.107	0	0	0	0	0
Proportion of deaths out of patients admitted with myocardial infarction	14.7	12.2	10.91	6.73	10.17	15.16	9.9	16.9	11.2	7.93	0	0
Number of beds	3231	2058	1150	1447	1110	1265	24.5	1908	957	1062	132	52.65
Bed occupancy rate	80	61.82	74.23	83.61	88.53	83.05	78	79.8	80	66.03	757	77.9
Number of major surgeries performed during the year	39864	15047	9090	9505	11874	11136	5171	3102	10839	8186	757	100
Percentage of essential drugs for NCD management available throughout the last quarter out of the total number of 16 essential drugs	68.75	100	87.5	75	93.75	100	18.8	-	81.25	93.75	100	77.9
Number of investigations performed per MLT per month	7028200	52345.5	5518.1	6470.34	4675	4892	9029	3601	3886	3018	775	77.9
Percentage expenditure for local purchase for drugs out of the total allocation for drugs	71.4	120.59	0.05	7.8	1.75	99	72	112.34	4.14	60.25	77.9	77.9

\*- include data of a quarter



Indicator	Name of Hospital									Board Managed Hospitals	
	National Hospital of Sri Lanka	Teaching Hospital Anuradhapura	Teaching Hospital Batticaloa	Teaching Hospital Colombo North	Teaching Hospital Colombo South	Teaching Hospital Jaffna	Teaching Hospital Kandy *	Teaching Hospital Karapitiya *	Teaching Hospital Peradeniya	Sri Jayawardenapura General Hospital	Wije Kumaratunga Memorial Hospital
Caesarean section rate (number of Caesarian sections per 100 live births) per year	-	35.54	43.14	40.36	40.25	37.13	44	-	59	52.8	0
Rate of post LSCS infections for the year	-	0.4	0.27	1.5	0.55	0.34	0.3	-	-	0.53	0
Percentage of staff (by category who underwent at least one capacity building programme during the year											
1. Doctor	22.4	0.05	-	13	-	57	14.8	4.86	-	76.73	20
2. Nurses	31.3	0.41	-	33	-	27	34.6	4.72	-	400	16
3. Other technical officers	15.6	0.5	-	5	-	0	94.3	14.8	-	86.67	-
4. Minor staff	13.7	0.49	-	-	-	26	1.35	0	-	12.73	8
Average number of general OPD patients seen per doctor per day	48	92.35	62.66	66	34	114	25.56	113	41	40	95

Indicator	Name of Hospital											
	Lady Ridgeway Hospital for Children	Srimavo Bandaranayake Specialised Childrens Hospital	Rheumatology and Rehabilitation Hospital, Ragama	National Hospital for Respiratory Diseases	National Institute for Nephrology, Dialysis and Transplant, Malingawatta	Apeksha Hospital Maharagama	National Institute of Mental Health, Angoda	National Eye Hospital	De Soysa Hospital for Women	Castle Street Hospital for Women	Teaching Hospital Mahamodara	National Dental Hospital
Dengue case fatality rate	0.14	0.8	-	-	-	-	-	-	-	0	0	-
Proportion of deaths out of patients admitted with myocardial infarction	-	0	-	-	-	-	-	-	-	0	0	-
Number of beds	1000	341	272	654		950		503	343	460	364	
Bed occupancy rate	64.9	52.48	54.2	52.5		78		64.5	82.45	0.67	74.36	76.25
Number of major surgeries performed during the year	3660	2021	-	798		2630		19663	3559	5711	5390	-
Percentage of essential drugs for NCD management available throughout the last quarter out of the total number of 16 essential drugs	-	-	100	100		-		100	100	100	100	-
Number of investigations performed per MLT per month	11223	1942	29566	33544		3782		12640.5	13425	7139	24803	-

Indicator	Name of Hospital											
	Lady Ridgeway Hospital for Children	Srimavo Bandaranayake Specialized Childrens Hospital, Peradeniya	Rheumatology and Rehabilitation Hospital, Ragama	National Hospital for Respiratory Diseases	National Institute for Nephrology, Dialysis and Transplant, Malignawatta	Apesha Hospital Maharagama	National Institute of Mental Health, Angoda	National Eye Hospital	De Soyza Hospital for Women	Castle Street Hospital for Women	Teaching Hospital Mahamodara	National Dental Hospital
Percentage expenditure for local purchase for drugs out of the total allocation for drugs	91.07	61	0	22.7	-	-	-	99.3	100	4.2	1.2	-
Caesarean section rate (number of Caesarian sections per 100 live births) per year	-	-	-	-	-	-	-	-	29.45	33.66	36	-
Rate of post LSCS infections for the year	-	-	-	-	-	-	-	-	0.92	7.5	0.1	-
Percentage of staff (by category who underwent at least one capacity building programme during the year												
1. Doctor	-	31	78	41		36.9		4	48.4	49	14	32.96
2. Nurses	-	38	85	56.9		77.7		14	64.22	43	68	56.6
3. Other technical officers	-	24	65	46		92.1		-	58.06	36	12	37.5
4. Minor staff	-	5.7	38	57		44.2		56	21.0	25	22	60.89
Average number of general OPD patients seen per doctor per day	227	35	16/Clinic	19		No OPD		39	11	12	35	19

Indicator	Name of Hospital												
	Provincial General Hospital, Badulla	Provincial General Hospital, Kurunegala	Teaching Hospital, Ratnapura	District General Hospital Ampara *	District General Hospital Chilaw	District General Hospital Hambantota	District General Hospital Kalutara	District General Hospital Kegalle	District General Hospital Matara	District General Hospital Moneragala	District General Hospital Nuwara Eliya *	District General Hospital Polonnaruwa	District General Hospital Trincomalee
Dengue case fatality rate		0.19	0.227	0	0	-	0.12	0.23	0.15	0	0	0	0.43
Proportion of deaths out of patients admitted with myocardial infarction		13.51	8.413	16.31	9.1	2.67	12.96	16	11.49	6.1	13.26	16	1.0
Number of beds			1400		579	655	1099		1034	465	422	920	523
Bed occupancy rate			70	59.42	59.5	70.55	58.6	64	68.6	89	85.78	83.5	63.99
Number of major surgeries performed during the year		17762	8900	29.23	4317	1359	1568	16859	18514	3792	55.47	7283	4191
Percentage of essential drugs for NCD management available throughout the last quarter out of the total 16 essential drugs		100	100	-	-	100	100	81.25	100	87.5	87.5	62.5	25
Number of investigations performed per MLT per month		4201.76	4530.01	4721.2	41478	6493	2900	2303	2814	11646	16002	4743	43816

\* - include data of a quarter

Indicator	Name of Hospital												
	Provincial General Hospital Badulla	Provincial General Hospital, Kurunegala	Teaching Hospital, Ratnapura	District General Hospital Ampara *	District General Hospital Chilaw	District General Hospital Hambantota	District General Hospital Kalutara	District General Hospital Kegalle	District General Hospital Mataara	District General Hospital Moneragala	District General Hospital Nuwara Eliya *	District General Hospital Polonnaruwa	District General Hospital Trincomalee
Percentage expenditure for local purchase for drugs out of the total allocation for local purchasing		91.8	7.78	81.81	36.4	83.85	79.57	9.21	10.07	29.6	7.67	30	8.86
Caesarean section rate (number of Caesarian sections per 100 live births)		44.98	42.833	35.9	41.5	43.53	40.96	20	44.28	36	32.99	40.7	35.6
Rate of post LSCS infections in the last year		-	1.859	0.8		0.49	0.59	1.13	0.3	1.2	0.77	0.7	2.21
Percentage of staff (by category who underwent at least one capacity building programme during the year													
1. Doctors		-	74	262.5	30	58	2.58	56	76.61	20.3	244.5	83	81.5
2. Nurses		78.25	31.36	325	49	152	41.18	107	126.99	55	66.03	88	88.2
3. Other technical officers		-	17.8	151.2	-	84	11.34	95	36.3	9.2	43.39	7	59.7
4. Minor staff		9.56	10	54.33	16	35	51.79	30	60.9	6.7	65.34	21	61.8
Average number of general OPD patients seen per doctor per day		58.66	117.5	61	320	38	55	53	50	64	72	105	50.8

Indicator	Name of Hospital								
	Base Hospital Akkaraipattu	Base Hospital Gampola	Base Hospital Kalmunai North	Base Hospital Kalmunai South	Base Hospital Kanthale	Base Hospital Colombo East	Institute of Oral Health, Maharagama	National Institute of Infectious Diseases	Dental Hospital Peradeniya
Dengue case fatality rate	0	0	0.2	0.1	0	0	-	-	-
Proportion of deaths out of patients admitted with myocardial infarction	18	9.09	4.1	17.6	6.38	7.18	-	2.8	-
Number of beds	274	371	374	279	235			-	40
Bed occupancy rate	60	62.13	63	77	41.42	60.72	-	53.9	56.26
Number of major surgeries performed during the year	1983	4055	2331	2305	632	740	-	-	573
Percentage of essential drugs for NCD management available throughout the last quarter out of the total number of 16 essential drugs	100	81.25	100	100	100	90	-	94	6.25
Number of investigations performed per MLT per month	13866	33732	3217	4513.5		29056.43	-	10709	-
Percentage expenditure for local purchase for drugs out of the total allocation for drugs	1.9	12.64	67	98.07	75.28	9.75	64.5	36.4	-
Caesarean section rate (number of Caesarian sections per 100 live births)	36	56	35.57	50.8	34.41	26.4	-	-	0
Rate of post LSCS infections for the quarter	0.4	0.28	0.47	1.21	1.56	0	-	-	0
Percentage of staff (by category who underwent at least one capacity building programme during the year									
1. Doctors	38	11	17	87.5	66.67	44.9	49	54	69.38
2. Nurses	70	25	14	77	83.33	64.7	85	95	88.3
3. Other technical officers	65	6	39	57.62	61.76	50	64	90	100
4. Minor employees	60	23	7	22.9	100	58.39	39	20	36.9
Average number of general OPD patients seen per doctor per day	46	72	94	84	56.4	59.41	14	56	18.67