

# PERFORMANCE AND PROGRESS REPORT 2021



ජාතික බෝවන රෝග විද්‍යායතනය  
தேசிய தொற்று நோயியல் நிறுவனம்  
NATIONAL INSTITUTE OF INFECTIOUS DISEASES



MINISTRY OF HEALTH

# **PERFORMANCE AND PROGRESS REPORT 2021**



**Ministry of Health Sri Lanka**



*Present*



## **Ministry of Health**

*Future*







**Hon. Dr. Keheliya Rambukwella**  
Minister of Health



**Hon. Dr. Channa Jayasumana**  
State Minister of Pharmaceutical Production,  
Supply and Regulation



**Hon. Sisira Jayakody**  
State Minister of Promotion of Indigenous  
Medicine, Development of Rural Ayurvedic  
Hospitals and Community Health



**Hon. Dr.(Mrs.) Sudarshani Fernandopulle**  
State Minister of Primary Health Care,  
Epidemic and COVID Disease Control



**Dr. S. H. Munasinghe**  
Secretary, Ministry of Health



## CONTENTS

### Ministry of Health

	<b>Page No</b>
<b>1. INTRODUCTION</b>	<b>01 - 05</b>
<b>2. SPECIAL EVENTS OF HEALTH SECTOR IN SRI LANKA 2018 -2020</b>	<b>06 - 31</b>
<b>3. INSTITUTIONAL STRUCTURE OF MINISTRY OF HEALTH</b>	<b>32</b>
<b>4. INSTITUTIONS, CAMPAIGNS PROGRAMMES UNDER THE MINISTRY AND THEIR ACHIEVEMENTS</b>	
<b>4.1 DISEASE CONTROL PROGRAMME</b>	<b>33 - 69</b>
4.1.1 Anti-Leprosy Campaign	33 - 38
4.1.2 Anti Filariasis Campaign	39 - 42
4.1.3 Public Health Veterinary Services	42 - 45
4.1.4 Anti-Malaria Campaign	46 - 48
4.1.5 National Programme for Tuberculosis Control and Chest Diseases	49 - 54
4.1.6 National Cancer Control Programme for Sri Lanka	55 - 61
4.1.7 National STD/AIDS Control Programme (NSACP)	61 - 66
4.1.8 National Dengue Control Programme	66 - 67
4.1.9 Chronic Kidney Disease Management Programme	68 - 69
<b>4.2 PROMOTION &amp; PROTECTION OF HEALTH</b>	<b>70 - 165</b>
4.2.1 Epidemiology Unit	70 - 75
4.2.2 Maternal and Child Health Programme	75 - 103
4.2.3 Health Promotion Bureau	103 - 105
4.2.4 Mental Health Programme	105 - 109
4.2.5 Non-Communicable Disease Programme	110 - 124
4.2.6 Environmental & Occupational Health	124 - 135
4.2.7 Estate and Urban Health	135 - 138
4.2.8 Quarantine Services	138 - 144
4.2.9 Care for Youth Elderly Displaced and Disabled Persons	144 - 146
4.2.10 National Authority on Tobacco and Alcohol	146 - 156
4.2.11 Healthcare Quality & Safety	157 - 162
4.2.12 Disaster Preparedness & Response Division	162 - 165



	<b>Page No</b>
<b>4.3 NUTRITION</b>	<b>166 - 169</b>
<b>4.4 ORAL HEALTH SERVICES</b>	<b>170 - 172</b>
<b>4.5 NATIONAL BLOOD TRANSFUSION SERVICES</b>	<b>173 - 179</b>
<b>4.6 LABORATORY SERVICES</b>	<b>180 - 205</b>
4.6.1 Medical Research Institute	191 - 205
<b>5. INFRASTRUCTURE DEVELOPMENT</b>	<b>206 -223</b>
5.1 Medical Equipment	206 - 218
5.2 Constructions	219 - 220
5.3 Special Foreign Funded Project	221
5.4 Transport	222 - 223
<b>6. HUMAN RESOURCE DEVELOPMENT</b>	<b>224 - 232</b>
6.1 Education, Training and Research Unit	224 - 226
6.2 Capacity development of Service Providers	
6.2.1 In-service Training Programme	226
6.2.2 Online Training	227 - 228
6.3 Research	229 - 232
<b>7. CORPORATIONS BOARD MANAGED INSTITUTES</b>	<b>233- 241</b>
7.1 Wijaya Kumaratunga Memorial Hospital	233- 237
7.2 Sri Jayewardenepura General Hospital	238-241
<b>8. PRIVATE HEALTH SECTOR DEVELOPMENT</b>	<b>242 - 244</b>
<b>9. STATE MINISTRY OF PHARMACEUTICAL PRODUCTION, SUPPLY AND REGULATION</b>	<b>245 - 250</b>
<b>10. STATE MINISTRY OF PRIMARY HEALTHCARE, EPIDEMIC AND COVID DISEASE CONTROL</b>	<b>251 - 252</b>
10.1 1990 Suwa Sariya Foundation	253 - 254
10.2 Department of Social Services	255 - 257
10.3 National Council for Elders and National Secretariat for Elders	258 - 260
<b>11. STATE MINISTRY OF PROMOTION OF INDIGENOUS MEDICINE, DEVELOPMENT OF RURAL AYURVEDIC HOSPITALS AND COMMUNITY HEALTH</b>	<b>261 - 267</b>

**Ministry of Health**



## 1. Introduction

---

Better health is the key to human happiness and well-being, and also an important contributory factor to the economic progress of an individual, or the country as a whole. There are various factors which influence the health status and country's ability to provide quality health services for its people. Health system performance refers to how far the available health systems achieve each of these factors which contribute to the overall enhancement of health status of the country.

Western or the Allopathic system is the dominant sector catering to the healthcare needs of the majority of the Sri Lankan population. It is provided through both government and the private sector providers where the government sector provides almost 95% of inpatient care.

With the implementation of the Provincial Councils Act in 1989, the health services were devolved creating the Line Ministry of Health at the national level and separate Provincial Ministries of Health in the 9 provinces. Twenty-six (26) Regional Directorates of Health Services (RDHS) implement the Provincial Health plans of respective Provincial directorates. Each RDHS area is sub-divided into several Medical Officer of Health (MOH) areas, and these units are mainly responsible for preventive and promotional healthcare in a defined area. There are 354 MOH areas in the country. The curative arm of the provincial health directorates operates through District General, Base, Divisional Hospitals and Primary Health Care Units which comes under the purview of provincial health authorities.

The overall management of government health services are under the Cabinet Minister of Health and three state ministers for portfolios including Pharmaceutical Production, Supply and Regulation; Indigenous Medicine Promotion, Rural and Ayurveda Hospitals Development and Community Health; and Primary Health Care, Epidemics and COVID Disease Control.

The line Ministry of Health plays the vital role in safeguarding the status of health and well-being of all citizens of Sri Lanka as the key government organization, along with other government departments, local and international organizations, civil society groups and the general public. Ministry of Health is responsible for delivering high quality healthcare services to the people in an equitable manner.

**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'*

## Strategic Objectives of the Ministry of Health

- ✓ To provide technical advice in policy formulation, planning, and programming on the promotion of health through Advocacy, Behavior Change Communication, Social Marketing, and Community Mobilization.
- ✓ To support various health programmes conducted by the department of health services and other health-related sectors through advocacy, behavior change communication and social mobilization for health actions.
- ✓ To promote, support and undertake planning, implementing, monitoring and evaluation of health promotion programmes in different settings.
- ✓ To promote people's health consciousness through mass media.
- ✓ To assist and develop IEC / BCC materials required for health promotion and behavior change communication
- ✓ To develop the capacities of manpower, both within and outside the department of health services to act as health promoters and change agents through advocacy, behavior change communication and social mobilization.
- ✓ To educate and empower the public on health issues, to enable them to increase control over and promote individual and community health.
- ✓ To coordinate with health-related governmental, non-governmental and international agencies and organization in promoting the health of people.
- ✓ To develop managerial capacities of health and health-related sectors to manage health promotive programmes
- ✓ To monitor and evaluate the health promotion programmes and facilitate monitoring and evaluation of them at different levels.
- ✓ To support and undertake research related to Behavior change of the community and social mobilization.

Sri Lanka has achieved a commendable health status measured in terms of health indices comparable to those of developed countries mainly due to the social policies including free healthcare and education adopted by successive governments. However, emerging issues associated with the rapid increase of Non-Communicable Diseases (NCDs) coupled with the swift rate of population ageing and changes in diseases patterns have contributed to transforming the healthcare needs of the country.

Having successfully achieving the interim milestones of the Millennium Development Goals in 2015, Sri Lanka reaffirmed its commitment by aligning national policies and strategies in the direction of achieving Sustainable Development Goals (SDGs).



In 2015, Sri Lanka pledged its continuous commitment to achieve SDGs. The Goal 3 has been dedicated to 'Good Health and Wellbeing' with following targets to be achieved.

**Goal 3. Ensure healthy lives and promote well-being for all at all ages**

- 3.a Strengthen the implementation of the World Health Organization Framework Convention on Tobacco control in all countries, as appropriate.
- 3.b Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for all.
- 3.c Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and Small Island developing States.
- 3.d Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks.

## Targets

- 3.1. By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.
- 3.2. By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortalities to at least as low as 25 per 1,000 live births.
- 3.3. By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases.
- 3.4. By 2030, reduce by one-third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and wellbeing.
- 3.5. Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol.
- 3.6. By 2020, halve the number of global deaths and injuries from road traffic accidents.
- 3.7. By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.
- 3.8. Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.
- 3.9. By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination



## 2. Special events of the health sector in Sri Lanka 2020- 2021

### **International World Health Day 07<sup>th</sup> April 2021**

WHO Director General's opening remarks at the World Health Day webinar

“Health equity is the theme of World Health Day this year. This is one of the core challenges of our time, which is why we are launching a campaign to build a fairer and healthier world. Inequity is not a new problem, of course, but the COVID-19 pandemic has brought it into sharp focus”

#### *Together for a healthier world*



*"I envision a world in which everyone can live healthy, productive lives, regardless of who they are or where they live. I believe the global commitment to sustainable development – enshrined in the Sustainable Development Goals – offers a unique opportunity to address the social, economic and political determinants of health and improve the health and wellbeing of people everywhere. Achieving this vision will require a strong, effective WHO that is able to meet emerging challenges and achieve the health objectives of the Sustainable Development Goals. We need a WHO – fit for the 21st century – that belongs to all, equally. We need a WHO that is efficiently managed, adequately resourced and results driven, with a strong focus on transparency, accountability and value for money".*

*Dr Tedros Adhanom Ghebreyesus*

*Director General of the World Health Organization*

**✚ *Seventy-Fourth WHO Regional Committee Meeting: Sept. 2021***

On addressing the committee, Hon. Minister of Health Dr. Keheliya Rambukwella stated “Sri Lanka is proactively using free and open-source global public goods such as DHIS-2 based digital health products. These have been customized, based on the country’s needs to analyze and disseminate COVID-related information. The most impactful systems have been the national COVID-19 Health Information System, Immunization Tracker, and Smart Vaccine Certificate issuing platform. These have been used to obtain real-time data and for the development of aggregated dashboards that have supported timely and accurate decision-making. This is the country’s first experience in collecting individual-level disaggregated information for public health activities and is expected to be a catalytic investment for future digital health advancements”.



IT systems were utilized for capacity building, communication, and coordination activities effectively throughout the pandemic ensuring continuity of routine activities. Mixed and blended learning through electronic learning management systems have been initiated successfully. The social media platforms have been successfully used by the Ministry of Health in risk communication activities.

**✚ *WHO Ensures the Equity of Global Vaccination Process***



Following the approval of the World Health Organization (WHO) to vaccinate 20% of the population of Sri Lanka against Covid-19, Hon. Health Minister Pavithra Wanniarachchi made her remarks on the operationalization of the country-wide vaccination process.

***Sri Lanka's vaccination efforts are very, very impressive and done in a systematic way making an important contribution. Here, we find ambulances and doctors are on standby in case of any emergency, although nothing has happened.***

*Dr Alaka Singh*

*Representative in Sri Lanka, WHO Colombo, July 16, 2021*

### **Sri Lanka Eliminates Mother-to-Child Transmission of HIV and Syphilis**

Elimination of mother-to-child transmission (EMTCT) of HIV and Syphilis is the latest in a series of public health achievements in Sri Lanka. High-quality maternal and child health services, multi-sectoral support, strong community engagement, and concerted efforts by partners such as WHO, UNICEF, UNAIDS, UNFPA, and civil society organizations all contributed to the EMTCT of HIV and Syphilis. World Health Organization's Regional Office (South-East Asia) certified Sri Lanka for the 'Elimination of mother-to-child transmission of HIV and Syphilis' on 30<sup>th</sup> November 2019.

***Sri Lanka's achievement once again demonstrates the country's commitment to public health and builds on the strong foundation of primary health care services that it laid several decades ago.***

***The country has not reported any case of mother-to-child transmission of HIV since 2017 and its congenital syphilis cases has consistently been two per 100 000 live births, much less than fifty per 100 000 live births needed for elimination certification, as per the findings of the Global Validation Advisory Committee. Sri Lanka is the third country in WHO South East Asia Region to achieve this after Thailand and Maldives.***

*Dr Poonam Khetrapal Singh Director  
WHO South East Asia Region*

**✚ Honorable Minister Pavithra Wanniarachchi Assumed Duties as the Minister of Health on 13.08.2020 at the Ministry of Health, Suwasiripaya**

Attorney at Law, Mrs. Pavithra Wanniarachchi sworn in as the Minister of Health in the new Cabinet of Ministers, 2020 before His Excellency the President Gotabhaya Rajapaksa at the “Magul Maduwa of Sri Dalada Maligawa”, Kandy on 12<sup>th</sup> of August 2020. She commenced her duties at the Ministry of Health on the 13<sup>th</sup> August at an auspicious time.



**✚ Discussion with Professor Malik Peiris**



Hon. Minister of Health, Pavithra Wanniarachchi chaired a special discussion on the Covid-19 Pandemic situation, held with the health authorities and Professor Malik Peiris, the University of Hong Kong on 20<sup>th</sup> of August 2020.

**✚ Local and International Donations to Overcome the Covid- 19 Pandemic in Sri Lanka**

**INTERNATIONAL DONATION**

Korea Food for the Hungry International (KFHI) donated Rs. 22 lakhs worth of equipment to support the Covid-19 pandemic control program in Sri Lanka. The donation was handed over to the Hon. Minister of Health, Pavithra Wanniarachchi by Mr. Choi Sun Bong, President of KFHI, and Mr. Lasitha Nanayakkara, Secretary, KFHI at the Ministry of Health.





The Government of Switzerland and the International Organization for Migration (IOM) agreed to assist the Government of Sri Lanka on 27<sup>th</sup> November 2020 to repatriate Sri Lankan workers abroad.

### LOCAL DONATIONS

With the vision of "Protecting and Improving the Health of People around the World" B. Brown Company handed over KN95 face masks worth over Rs. 1 million.



To Strengthen Covid Treatment Services TEMASEK Singapore donated 50 Ventilators worth Rs. 80 million. to the Hon. Minister of Health Pavithra Wanniarachchi.

Lucky Industry, a private company in Sri Lanka donated a stock of KN95 / FFP2 protective masks to Dr. Sanjeewa Munasinghe, the Secretary of Health and Dr. Asela Gunawardhena, Director General of Health Services.



The Ministry of Health has received several donations from the state as well as private institutions for the prevention and control of the COVID-19 pandemic. The Hon. Minister of Health received a consignment of donations in the presence of the ministry officials.

## MAJOR DEVELOPMENTS OF THE CURATIVE HEALTH SECTOR

### *Opening of Children's Ward Complex at the Base Hospital Tangalle*

Opening Ceremony of Children's Ward Complex at the Base Hospital, Tangalle costing Rs. 300 Million. was held under the patronage of Hon. Prime Minister Mahinda Rajapaksa, Hon. Minister of Health, Pavithra Wanniarachchi with the participation of the political representatives and ministry officials.



**Medical Equipment Worth Rs. 300 million to Ratnapura Teaching Hospital**



Hon. Minister of Health Pavithra Wanniarachchi conducted an inspection tour on 19<sup>th</sup> January 2020 to explore the development needs and facilities of hospitals in the Ratnapura District. Minister handed over medical equipment worth Rs. 300 million to Ratnapura Teaching Hospital. She further stated that it would be developed to become one of the most advanced hospitals in Sri Lanka.

**Sri Lanka's First Paediatric Liver Transplant**



The Liver Transplant Unit of Teaching Hospital, North Colombo performed a liver transplant on a child suffering from chronic cirrhosis at the age of 9 years. The team led by Professor Rohan Siriwardena used a portion of a liver from a living donor. This was the first successful paediatric liver transplant in Sri Lanka.

**Opening of the Newly Built Paediatric Unit Base Hospital, Tangalle**

Newly built paediatrics ward complex at Base Hospital, Tangalle, funded by 'Ruhunu Karaliya' organization, Southern Provincial Council and Hospital Development Committee declared opened by Hon. Prime Minister Mahinda Rajapakshe on the invitation of Hon. Minister of Health, Pavithra Wanniarachchi.



**President Declares National Nephrology Specialized Hospital Open**



National Nephrology Hospital, Polonnaruwa, constructed with the assistance of the People’s Republic of China, was declared open to the public by His Excellency President of Sri Lanka Gotabhaya Rajapaksha, on 11<sup>th</sup> June 2021. It costs 12 billion rupees and was received as a gift from the Peoples’ Republic of China.

It is a 200-bedded hospital equipped with all modern facilities to treat kidney diseases. A hundred-bed dialysis unit has been the key feature. The outpatient department with ultramodern facilities, six modern surgical theatres facilitating kidney transplants, and specialized kidney patient’s clinic complex enhance the treatment options for patients suffering from kidney diseases.

**International Accreditation for MRI with UNIDO Assistance**

## International accreditation for MRI with UNIDO help

FOR the first time a Medical Research Institute testing laboratory functioning under the Ministry of Health and Indigenous Health Services secured accreditation for an international standard, ISO-IEC 17025:2005, which certifies the general requirements for the competence of testing and calibration laboratories.

This achievement was celebrated at a ceremony on 2 March at Hilton Colombo Residence, Colombo 2. The accreditation was achieved with the technical support of the United Nations Industrial Development Organization (UNIDO) within the framework of the EU-Sri Lanka Trade Related Assistance project, funded by the European Union (EU).

Dignitaries and distinguished guests, including Chief Food Authority Health Services Director General Dr. Anil Jasinghe, Environmental Health, Occupational Health and Food Safety Deputy Director General Dr. Lakshman Gamlath; Sri Lanka Accreditation Board Director and CEO Chandrika Thilakarathne; Medical Research Institute (MRI) Director Dr. Jayarawan Bandara and Delegation of the European Union (EU) Head of Delegation Frank Herx, Consultant Microbiologist and MRI Food and Water Laboratory Head Dr. Sujatha Pathirage and UNIDO International Technical Specialist Dr. Jaime Andres Vilamil Diaz.

trade, conformity assessment provides a company with a competitive edge in the market. When a company assesses its products and services in accordance with relevant standards, this helps the company adapt to the latest market trends regarding quality and mitigates the costs related to product returns, buyer complaints and loss of goodwill in local, regional and international markets.

Beyond MRI’s food and water laboratory, the project supports 25 other com-



**Chief Guest Chief Food Authority Health Services Director General Dr. Anil**



**UNIDO International Technical Specialist Dr. Jaime Andres Vilamil Diaz**



**Dr. Sujatha Pathirage, Consultant Microbiologist and MRI Food and Water**



## MEETING INTERNATIONAL DELEGATES

### *Meeting between the Minister of Health and the Sri Lankan Representative to UNICEF*

Hon. Minister of Health Pavithra Wanniarachchi, met Emma Brigham, UNICEF representative in Sri Lanka at the Ministry of Health. They discussed the current programs being carried out jointly and the measures that needed to be taken in improving effective implementation.



## OTHER EVENTS

### *20<sup>th</sup> Annual Sessions of the College of Cardiologist*



20<sup>th</sup> Annual Sessions of the College of Cardiologists, Sri Lanka was held on 20<sup>th</sup> October 2020 under the patronage of the Minister of Health Pavithra Wanniarachchi at the Cinnamon Grand Hotel, Colombo.

### *Induction Ceremony of the 35<sup>th</sup> President of the Sri Lanka College of Obstetricians and Gynecologists - 2021*



The induction ceremony of the 35<sup>th</sup> President of Sri Lanka College of Obstetricians and Gynecologists was held at the Bandaranaike Memorial International Conference Hall, Colombo. Prime Minister Mahinda Rajapaksa, Mrs. Shiranthi Rajapaksa and Hon. Minister of Health were among the distinguished guests.

**✚ Celebrating World Patient Safety Day 2021**



The National Celebration of the Patient Safety Day was held on the 17<sup>th</sup> September 2021 at the Auditorium of the Directorate of Healthcare Quality and Safety. All the precautions were taken to ensure safety from COVID-19. The iconic Lotus Tower was illuminated to mark World Patient Safety Day and as a tribute to all health sector workers in Sri Lanka.

**✚ Special Discussion on Opening of Airports for Foreign Tourists**

A discussion on providing facilities for the tourism industry amidst the Covid-19 pandemic was held on 03<sup>rd</sup> December 2020 under the patronage of Hon. Minister of Health Pavithra Wanniarachchi and Hon. Minister of Tourism Prasanna Ranatunga, at the Ministry of Health. The discussion was attended by the Heads of the Epidemiology Unit, Other Health Authorities, Airports and Aviation, and the Tourism Development Authority.



**✚ Discussion between the Minister of Health and the Minister of Sports to start school sports competitions according to the new health guidelines 21.01.06**



A special discussion was held between Hon. Minister of Health, Pavithra Wanniarachchi, and Hon. Minister of Sports Namal Rajapaksa, on the possibility of resumption of school sports competitions that were suspended due to COVID19 disease.

**Meeting between the Hon. Minister of Health and Representatives of the People's Republic of China**

A Chinese government delegation visited Sri Lanka to monitor the progress of China-assisted development projects being implemented under the Ministry of Health. The delegation met the Hon. Minister of Health, Pavithra Wanniarachchi and briefed her on the progress of projects and their concerns.



*It is critical for us to realize the centrality of health in achieving the SDGs. Thus, adequate and sustained funding for health will be a necessary precondition for “building back better”.*

*Dr Keheliya Rambukwella  
Minister of Health*

**PUBLIC HEALTH INITIATIVES**

**Introducing a non-toxic sustainable method to destroy Dengue mosquito larvae**

Chlorophyll less, a non-toxic sustainable method that can be used to destroy dengue mosquito larvae was introduced by a German expert Prof. Donat Peter Hayder, briefed to the Minister of Health at the Ministry of Health in the presence of higher ministry officials. Prof. Donat Peter Hayder pointed out that the current mosquito control methods and the processes available in Sri Lanka are very different. The mosquito control usually involves the application of a chemical compound that is toxic to mosquito larvae, which poisons not only the mosquito larvae but also other microorganisms in the environment. Hence the use of nontoxic alternatives could be the future priority.



**Public Awareness Program for Dengue Control**

A Dengue Mosquito Control program and a Public Awareness Program were launched on 19<sup>th</sup> October 2020 under the patronage of the Hon. Minister of Health Pavithra Wanniarachchi at Medical Officer of Health Kuruwita, Ratnapura.



**“Garbhani Mathru Pooja” Programme**

Hon. Minister of Health Pavithra Wanniarachchi, participating in the 33<sup>rd</sup> “Garbhani Matru Pooja” program conducted by Mawpiya Sevana Gnanodaya Foundation Meepagama, Kalawana on 07<sup>th</sup> March 2020.



**Hon. Minister of Health accepting initial consignment of 500,000 doses of Sinopharm Vaccine sent by the People's Republic of China.**

Representatives of the Peoples' Republic of China, Hon. Minister of Sports and Youth Affairs Namal Rajapaksha, Hon. Minister of Tourism Prasanna Ranatunga, Hon. State Minister D.D.Chanaka, Senior advisor to the President Lalith Weeratunga, Secretary Ministry of Health Dr. Sanjeewa Munasinghe, and retired Major General G. A. Chandrasiri were also present at the occasion with Hon. Minister of Health Pavithra Wanniarachchi at the Bandaranaike International Airport, Katunayake.



***Honorable Minister of Health Pavithra Wanniarachchi has appointed Covid-19 Emergency Action Committee.***



Hon. Minister of Health has appointed Covid-19 Emergency Action Committee including the Hon. State Minister of Primary Health Care, Epidemics and Covid Disease Control Dr. Sudarshani Fernandopulle, Secretary Ministry of Health, Director General of Health Services, and Additional Secretary (Medical Services) to advise all-relevant parties regarding emergency needs in mitigating the COVID-19 epidemic. The initial meeting was held at the Ministry of Health on 3<sup>rd</sup> July 2021

***Reinforcing the Primary Healthcare Services in Sri Lanka – Laying the foundation stone for the Primary Healthcare Centre at Watapotha, Niwithigala***



Hon. Minister of Health Pavithra Wanniarachchi participated in the event of laying the foundation stone for the Primary Health Centre at Watapotha, Niwithigala. Ministry of Health has taken steps to continue expanding the Primary Healthcare Services island-wide. The center for Watapotha is currently under construction which will be handed over to the Provincial Ministry of Health, Sabaragamuwa this year. Hon. Governor of the Sabaragamuwa

Province Tikiri Kobbekaduwa, Hon. State Minister Janaka Wakkumbur, Mr. Jagath Wellawaththa, Chairman of the Sri Lanka Insurance Corporation and several officials representing Sri Lanka Insurance Corporation participated in the event. Hon. Minister of Health received a donation of medical equipment from the Sri Lanka Insurance Corporation on that occasion.

**✚ Addressing National Authority on Tobacco and Alcohol**



The excellent support of Sri Lanka mass media in improving the public awareness on prevention of addiction to alcohol and narcotics-related drugs was commended by the National Authority on Tobacco and Alcohol. The keynote address was delivered by the Hon. Minister of Health Pavithra Wanniarachchi.

**MAKING HEALTH CARE AFFORDABLE**

**✚ 1990 'Suwaseriya' ambulance to Ayagama, Ratnapura**

Hon. Minister of Health, Pavithra Wanniarachchi, visited Ratnapura District to inquire into the development needs and facilities of hospitals. District Hospital Ayagama and Regional Hospital, Kiriella were also inspected by the Hon. Minister of Health. During the inspection of the District Hospital Ayagama, Hon. Minister of Health provided a 1990 “Suwaseriya” ambulance. The key was handed over to the Hon. State Minister of Export Agriculture, Janaka Wakkumbura.



### **Surveillance for Covid-19 at the Airport Expanded**

The decision was taken by Prasanna Ranatunga, the Hon. Minister of Investment Promotion, Tourism and Civil Aviation, along with Hon. Minister of Health, Pavithra Wanniarachchi, to improve PCR facilities during a special inspection tour of the Bandaranayake International Airport, Katunayake. Ministers pointed out that it was a key factor in preventing patients from entering the country or airport security personnel, immigration, customs, and other personnel and employees from contracting the virus.



### **PCR laboratory for Provincial General Hospital, Kurunegala**



A new PCR laboratory was declared opened by the Hon. Minister of Health Pavithra Wanniarachchi, in the presence of Hon. Minister of Road, and Road Development Johnston Fernando and Dr. Asela Gunawardane, the Director General of Health Services

### *Distribution of PCR Laboratories & their Test Capacity*

	Laboratory	Test Capacity
1	Medical Research Institution- Borella	1950
2	Bandaranayake International Airport Katunayake	2500
3	Base Hospital Mulleriyawa	2500
4	National Hospital Kandy	1000
5	Teaching Hospital Karapitiya	800
6	National Institute of Infectious Diseases - Mulleriyawa	600
7	Teaching Hospital Anuradhapura	800
8	Provincial General Hospital Badulla	1000
9	Teaching Hospital Jaffna	800
10	Teaching Hospital Batticaloa	1000
11	District General Hospital Kegalle	500
12	Teaching Hospital Rathnapura	400
13	General Hospital Sri Jayawardanepura	200
14	Apeksha Hospital Maharagama	300
15	District General Hospital Nuwaraeliya	800
16	Provincial General Hospital Kurunegala	300
17	Colombo North Teaching Hospital Ragama	250
18	National Institute of Health Sciences Kalutara	200
19	National Hospital of Sri Lanka Colombo	200
20	Base Hospital Teldeniya	600
21	Teaching Hospital Kalubowila	150
22	District General Hospital Hambantota	50
	<b>Total</b>	<b>16900</b>



**PCR machine for Teaching Hospital Ratnapura.**

A much-needed PCR machine worth Rs. 5 million was donated to the Teaching Hospital Ratnapura, by Hon. Minister of Health Pavithra Wanniarachchi at the presence of Hon. Governor of Sabaragamuwa Province, Tikiri Kobbekaduwa.



**Social Welfare Programme- Rathnapura & Embilipitiya**



A Social Welfare Programs were held in Divisional Secretariats, Ratnapura and Embilipitiya under the patronage of Hon. Minister of Health. It benefited many from low-income families.

**Increased production capacity of the State Pharmaceutical Manufacturing Corporation (SPMC)**

The government has decided to increase the production capacity of the SPMC to ensure the continuous medicinal supply during the prevailing COVID-19 pandemic. Targeted modernization activities were observed by Hon. State Minister, Pharmaceutical Manufacturing and Supply, Professor Channa Jayasumana.



**DEVELOPING HUMAN RESOURCES FOR HEALTH**

**✚ *New building complex to the Faculty of Medicine Sabaragamuwa***



Foundation stone was laid for the Clinical and Administrative Building of the Medical Faculty of the Sabaragamuwa University of Sri Lanka (SUSL). Hon. Minister of Health said that with the development of the Medical Faculty, it will be possible to reduce the shortage of doctors in the country.

**✚ *Opening of the New Head Office of the All-Ceylon Private Pharmacy Owners' Association***

The Head Office of the All-Ceylon Private Pharmacy Owners' Association was inaugurated at Pelmadulla, Ratnapura on 07<sup>th</sup> July 2020 by the Hon. Minister of Health, Pavithra Wanniarachchi.



**✚ *Meeting with Public Health Inspectors***



A discussion on the problems faced by Public Health Inspectors on discharging their duties was held on 02<sup>nd</sup> April 2020 under the patronage of Hon. Minister of Health, Pavithra Wanniarachchi, with the participation of the Secretary of Health and the Director General of Health Services. Hon. Minister immediately directed officials to attend to some of their issues.

**✚ Celebrating International Nursing Day**

Hon. Minister of Health, Pavithra Wanniarachchi highly appreciated the role of public sector nursing officers while addressing the ceremony held at the District General Hospital, Nuwaraeliya, on the occasion of commemorating international nursing day.



**✚ New appointments for Professionals Supplementary to Medicine and Paramedical Health Service**



Human resource is a basic need for providing quality health care to the nation. The awarding of appointments to 1360 trainees in the Professionals Supplementary to Medicine and Paramedical Services of the Health Service was made under the patronage of Hon. Prime Minister Mahinda Rajapaksa and with the participation of the Hon. Minister of Health, Pavithra Wanniarachchi. They were appointed to hospitals island-wide.

**Student Nurses, Pharmacists and Public Health Laboratory Technicians receiving appointments**

The awarding of appointment letters to Student Nurses, Pharmacists, and Public Health Laboratory Technicians was held under the patronage of Hon. Minister of Health, Pavithra Wanniarachchi at the auditorium, Ministry of Health on 15<sup>th</sup> June 2021. The Ministry of Health has taken all measures to enhance physical as well as human resources of the health service to provide a quality health service to the people of this country. Accordingly, 4,260 persons selected for the three-year nursing training program were being trained at 15 nursing schools, and 10 trainee nurses were symbolically given the appointment letters. Students enrolled for the Diploma in Pharmacy, 73 trainees who completed the 2-year Diploma course, and 59 Public Health Laboratory Technicians were given appointments. Secretary Ministry of Health Dr. Sanjeewa Munasinghe, Director General of Health Services Dr. Asela Gunawardena and Additional Secretary Medical Services, Deputy Director Generals, Directors, and other officials were also present at the occasion.



**Human Resource Recruitments for 2020 - 2021**

Intern Medical Officers	1941
Grade Medical officers	2276
Specialists Medical Officers	738
Special Grade Nursing Officers	65
Nursing officers - Grade III	3697

**Hon. Minister Dr. Keheliya Rambukwella assumed duties as the new Minister of Health**



Hon. Minister Dr. Keheliya Rambukwella who assumed duties as the new Minister of Health on 16<sup>th</sup> August 2021 at the Ministry of Health stated, “As a challenging responsibility in a challenging era, I am committed to fulfill the responsibility of providing the entire nation's health service to its fullest capacity. I am also committed to fulfilling the noble responsibility of rescuing Sri Lanka citizens from the catastrophe the entire world is facing”

Hon. State Minister Prof. Channa Jayasumana, Dr. Sanjeewa Munasinghe, Secretary Ministry of Health, and the Director General of Health Services Dr. Asela Gunawardena were also present at the occasion.

*Sri Lanka’s strong public health system and over-all emergency preparedness under a strong leadership that used a whole of society approach, have helped the country to overcome the waves of cases since the start of the pandemic. My Ministry worked with other government agencies, military, private sector, local authorities, civil society and development partners, including the WHO, to achieve our common goal of saving lives and protecting our people.*



*Dr Keheliya Rambukwella  
Minister of Health*

*at South East Asia Regional Committee meeting – WHO- 06.09.2021*

## INTERNATIONAL EVENTS

### ***The United States of America donated over 100,000 doses of Pfizer Biotech vaccines to Sri Lanka***

Sri Lanka received a donation of 100,000 doses of Pfizer-Biotech Covid-19 vaccine through the Covax facility on 28<sup>th</sup> August 2021. The donation was officially handed over by the Ambassador to Sri Lanka Alina Teplitz to Dr. Keheliya Rambukwella the Hon. Minister of Health at the US Embassy. Hon. Minister of Health stated that by the end of 2021, the people of this country would be fully vaccinated. WHO Country Representative, Sri Lanka Dr. Alaka Singh, UNICEF Country Representative, Sri Lanka Mr. Christian Skoog, Mission Director to Sri Lanka for the USAID Project Mr. Reed J. Aeschliman, Secretary Ministry of Health were among the participants.



### ***The Government of Japan and UNICEF donated a stock of equipment to the vaccination program***



The Ambassador of Japan in Colombo and the Sri Lankan Representative to UNICEF commended that the vaccination process in Sri Lanka for its rapid and successful progress. They pointed out the fact that the steps taken by the Government of Sri Lanka with this regard were being praised by the world. UNICEF and the Embassy of Japan jointly donated the stock of equipment through the 'Covax' program. The donated consignment was officially handed over to Dr. Keheliya Rambukwella, Hon. Minister of Health, on 25<sup>th</sup> August 2021. Dr. Sanjeewa Munasinghe, Secretary Ministry of Health, Dr. Asela Gunawardena, Director General of Health Services, Dr. Lakshmi Somatunga, Additional Secretary (Public Health Services) Country Representative UNICEF Sri Lanka Mr. Christian Skoog, and other officials of the Ministry of Health were also present.

**✚ A meeting between the Indian High Commissioner and the Hon. Minister of Health**



The official meeting between the Indian High Commissioner and the Hon. Minister took place at the Ministry of Health. Hon. Minister requested the Indian High Commissioner Mr. Gopal Baglay to pay special attention to the demand for oxygen in Sri Lanka at the time of discussion. Hon. Minister said that the mobile oxygen units manufactured in India were very important and hoped that India would pay close attention to that request and supply antiviral drug Tocilizumab (Tozi) to Sri Lanka. Dr.

Sanjewa Munasinghe Secretary Ministry of Health and a group of ministry officials were also present at this occasion.

**✚ Donation of COVID - 19 Treatment Equipment from the USA**

International Medical and Health Organization (IMHO) had shipped twelve 40 foots containers of supplies which contained 40 ventilators, 26 CPAP machines, 80 Oxygen concentrators, PPEs and other medical supplies. The PPEs included disposable respirator masks, N95 masks, Ear-loop masks, Gowns, Hand sanitizers, Alcohol wipes, and filtering accessories. The total cost of supplies was over 3.1 million USD.



**All citizens over the age of 18 must be vaccinated before the end of November 2021**



Hon. Minister of Health Dr. Keheliya Rambukwella said that all citizens over the age of 18 will be fully vaccinated before the end of November 2021. The vaccination of all citizens over the age of 30 was scheduled to be completed by mid-September. Hon. Minister stated those remarks when he called on Mr. Andres Garrido, the Cuban Ambassador to Sri Lanka on 26<sup>th</sup> August 2021. The Minister also requested the Ambassador to provide an opportunity to share the experience, knowledge, and technology of the world's highest level Cuban healthcare service with Sri Lanka. Dr. Sanjeewa Munasinghe, Secretary Ministry of Health was also present.

### MEETING SRI LANKAN OFFICIALS

**Briefing Secretaries of all Cabinet Ministries on Control of Covid 19 Epidemic - 17<sup>th</sup> August 2021**

Dr. Keheliya Rambukwella, Hon. Minister of Health had a discussion with all Secretaries of the cabinet ministries. The minister proposed to set up anti-Covid-19 committees in each Ministry and at each institution under an executive officer. The discussion further elaborated the ways of implementing the health guidelines in detecting cases without creating inconvenience to the institution. Dr. Sanjeewa Munasinghe, Secretary Ministry of Health, Dr. Asela Gunawardena, Director General of Health Services were also present at the occasion.



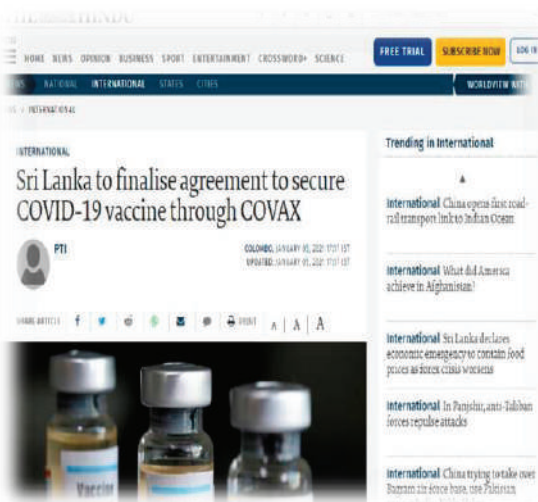


**WHO commends vaccination process in Sri Lanka**

Dr. Alaka Singh, the country representative of the World Health Organization (WHO), commended the ongoing vaccination drive in Sri Lanka. She pointed out that the government led by the President was implementing a very successful program. It was stated at the initial meeting with Dr. Keheliya Rambukwella, Hon. Minister of Health since his appointment.



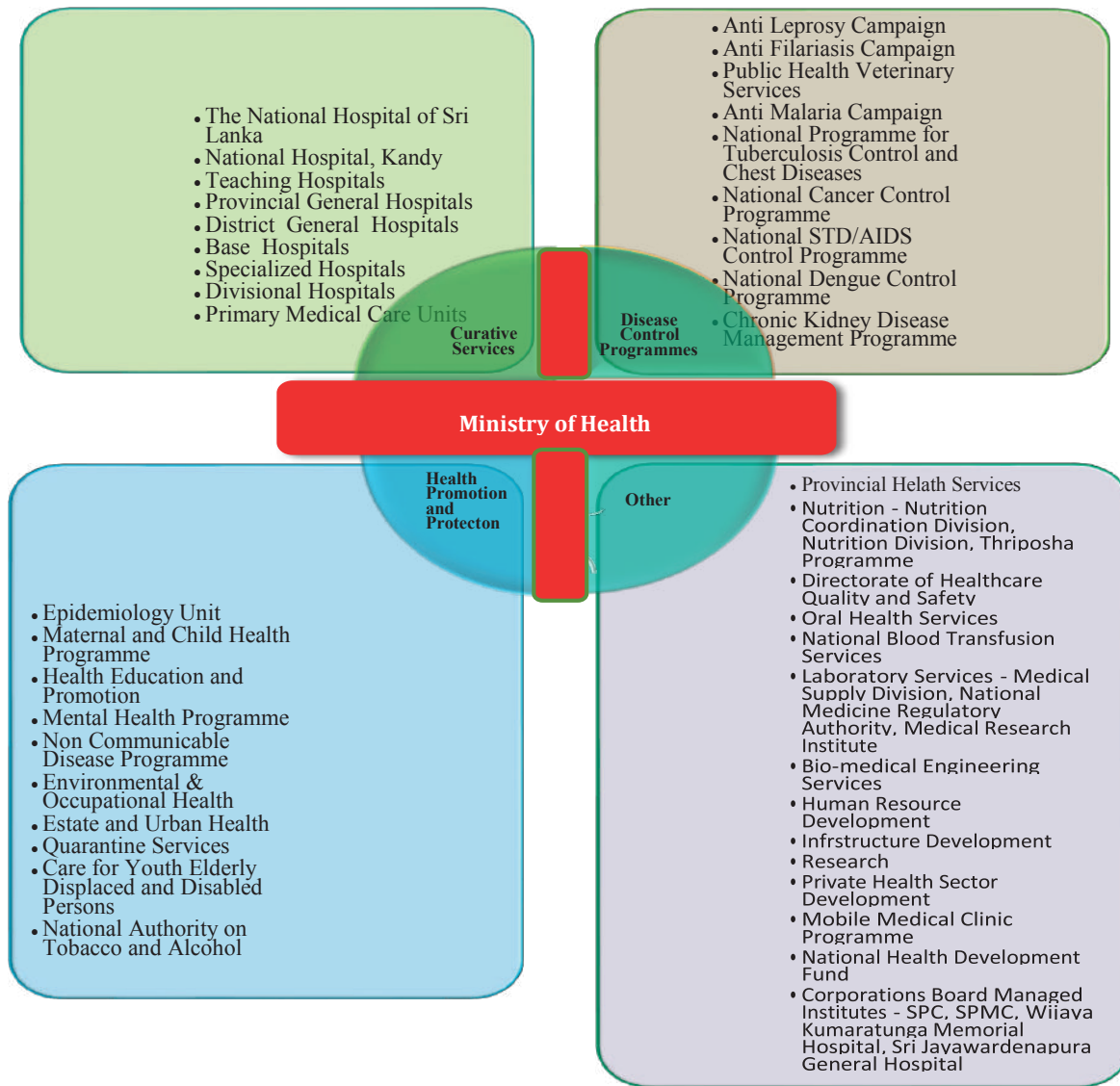
Dr. Alaka Singh briefed on her initiatives on the provision of emergency medical facilities and the supply of oxygen through the European Union. Rapid antigen test kits were also an offer on request made by the WHO country office. She noted that Sri Lanka maintained a longstanding relationship with the World Health Organization and praised the commitment. Minister Dr. Keheliya Rambukwella thanked WHO and emphasized the various measures taken by WHO to control the Covid-19 pandemic in Sri Lanka.



COVID-19 VACCINATION PROGRAMME



### 3. Institutional structure of the Ministry of Health



## 4. Institutions, Campaign, Programmes under the Ministry and their achievements

---

### 4.1 DISEASE CONTROL PROGRAMMES

#### 4.1.1 Anti-Leprosy Campaign

##### Introduction

The Anti-Leprosy Campaign's (ALC) primary role is creating policy, planning, monitoring & evaluation, training and maintaining health information system at the national and peripheral level of control of leprosy in the country. The performance is measured using different programme indicators outlined in the National Leprosy Strategy 2016-2020: "Accelerating towards a leprosy-free Sri Lanka" which has been adapted from the WHO "Global Leprosy Strategy 2016-2020: Accelerating towards a leprosy-free world". The ALC is also mandated to build and sustain partnerships with partners and coordinate and solicits support for the leprosy programme action plans. Also, Central Leprosy Clinic (CLC) and Leprosy Hospital Hendala are managed directly by ALC.

##### Vision

Leprosy free Sri Lanka.

##### Mission

To stop transmission of the disease and to plan and implement cost-effective quality leprosy services to all persons affected with leprosy, and to sustain such services to ensure a reasonable quality of life to those affected.

##### Objectives

- To reduce rate of new cases per 100,000 populations per year at district level to below 10 cases in a district by 2025
- To reduce rate of newly diagnosed leprosy patients with visible deformities < 1 per million in all districts by 2025
- To reduce the number of children diagnosed with leprosy and visible deformities to zero by 2025
- To reduce percentage of child cases in newly reported cases to less than 8% by 2025
- To improve the percentage of early reporting (< 6 months of the onset of symptoms) up to 90% by 2025
- To reduce the proportion of treatment defaulters to less than 5% in all districts by 2025
- To improve treatment completion rate in all districts to more than 80% by 2025

- To investigate all the relapsed cases in the country for drug resistance by 2025
- To improve the leprosy hospital at Handala to a center of excellence in training, research and prevention of leprosy with the aim of income generation in the future
- To improve current surveillance and health information system and the web-based system with geographical mapping for leprosy cases by 2025
- To improve monitoring and evaluation of preventive, curative services in leprosy at district level by 2025
- To reduce MDT related adverse events by 3% from the baseline by the end of 2025
- To amend the existing leprosy legislation by repealing discriminatory provisions on basis of leprosy by 2025.
- To establish at least two satellite clinics in districts with underserved population, with special emphasis on children and women by 2025
- To establish a rehabilitation center in high endemic districts for people with leprosy related disabilities by 2025

### **Major achievements in 2020/2021**

- Conducted house to house surveys in 17 high endemic districts.
- Purchased Micro- Cellular Corrugated Rubber shoes.
- Purchased ulcer care kits, splints and gutters.
- Conducted annual review meetings at Anuradhapura and Colombo.
- Conducted seven district review meetings at Nuwara Eliya, Badulla, Monaragala, Kandy, Matale, Gampaha, and Galle
- Five monitoring and evaluation visits done at Nuwara Eliya, Badulla, Monaragala, Matara, and Hambanthota districts
- Printed 8000 patient follow up forms.
- Conducted annual review meeting at Kandy.
- Conducted world leprosy day activities.
- Conducted awareness programs at Batticaloa, Gampaha, Kurunagala, and for staff at Handala leprosy hospital
- Conducted street drama at Anuradhapura district.
- Sent funds for prepare holdings to 13 districts.
- Prepared T- shirts for ALC staff at Anti – Leprosy Campaign at Walisara and Leprosy hospital at Handala.
- Monitoring and evaluation visits completed at Trincomalee, Jaffna, Nuwara Eliya, Kandy, Polonnaruwa and Kurunagala districts.

### Special Events 2019-2021

*Health staff training at Kandy on June 2019*



*External Review Programme held on September 2019 with WHO consultants*



*Inter-faith forum between religious leaders – Central province*

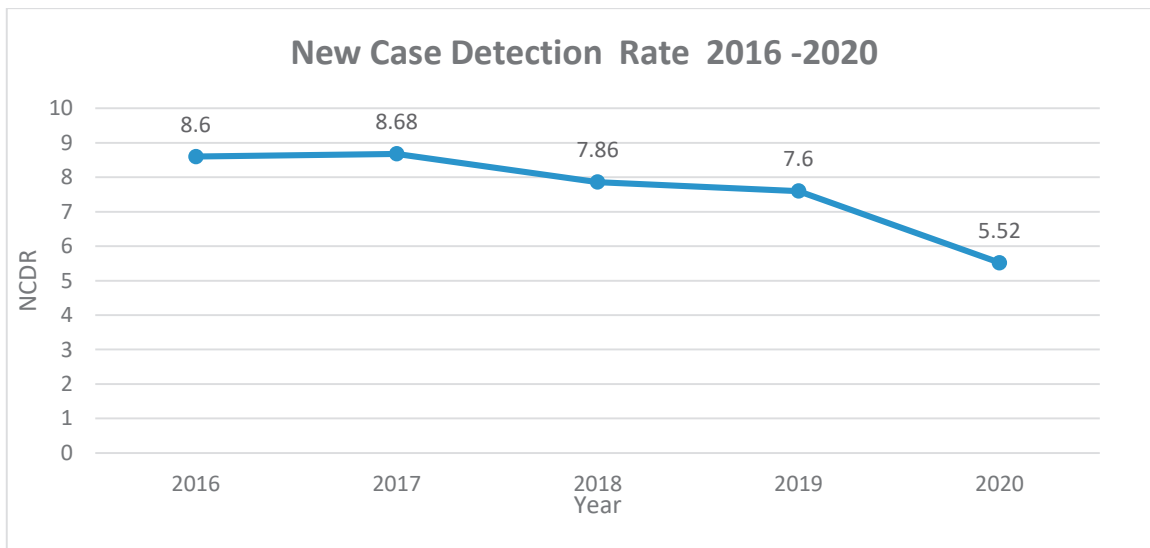


*Participating World Leprosy Congress at Manilla – Philliphines*

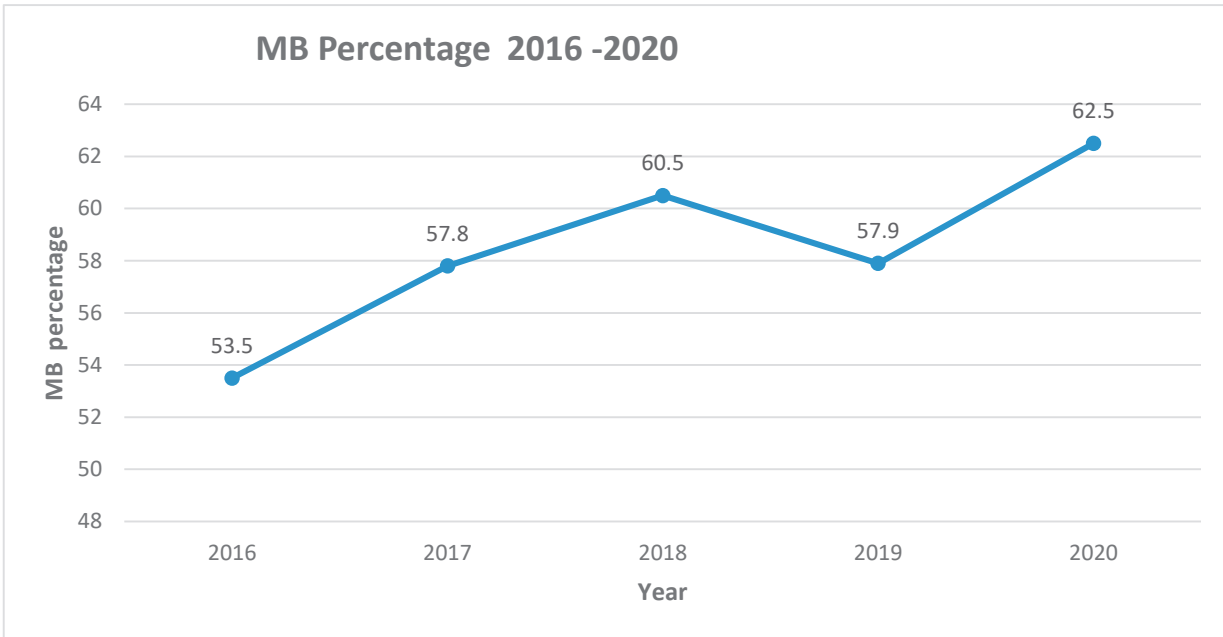


### Performance trend 2016-2021

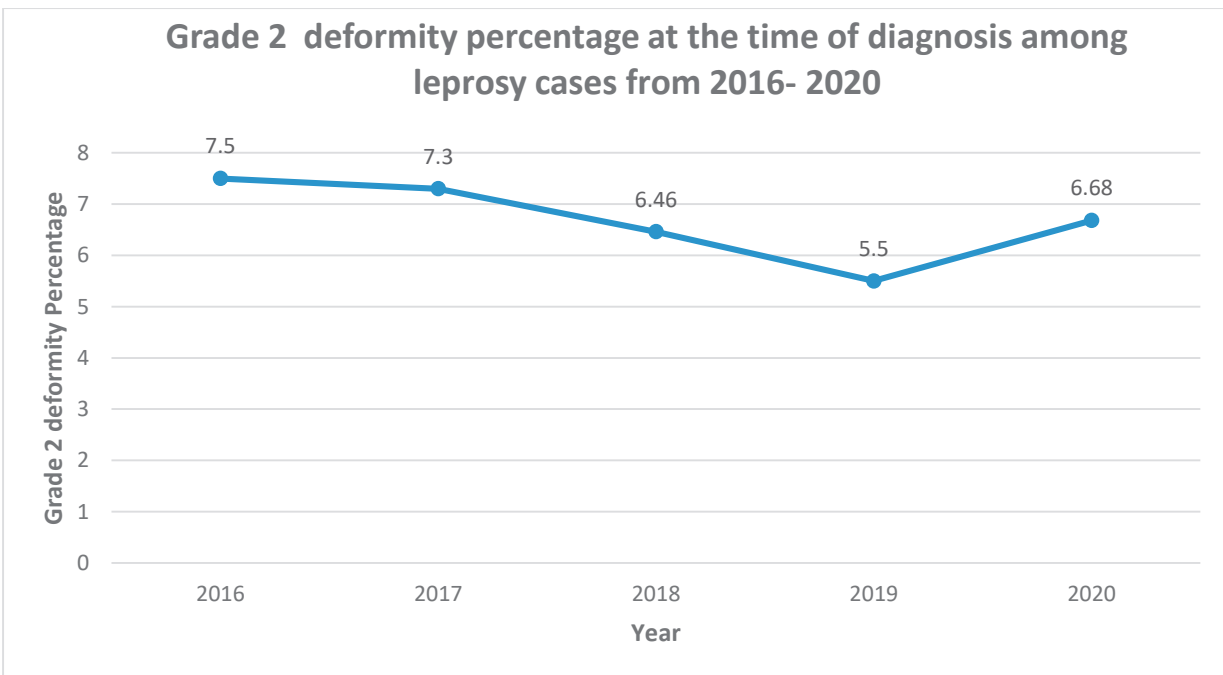
#### New Case Detection Rate



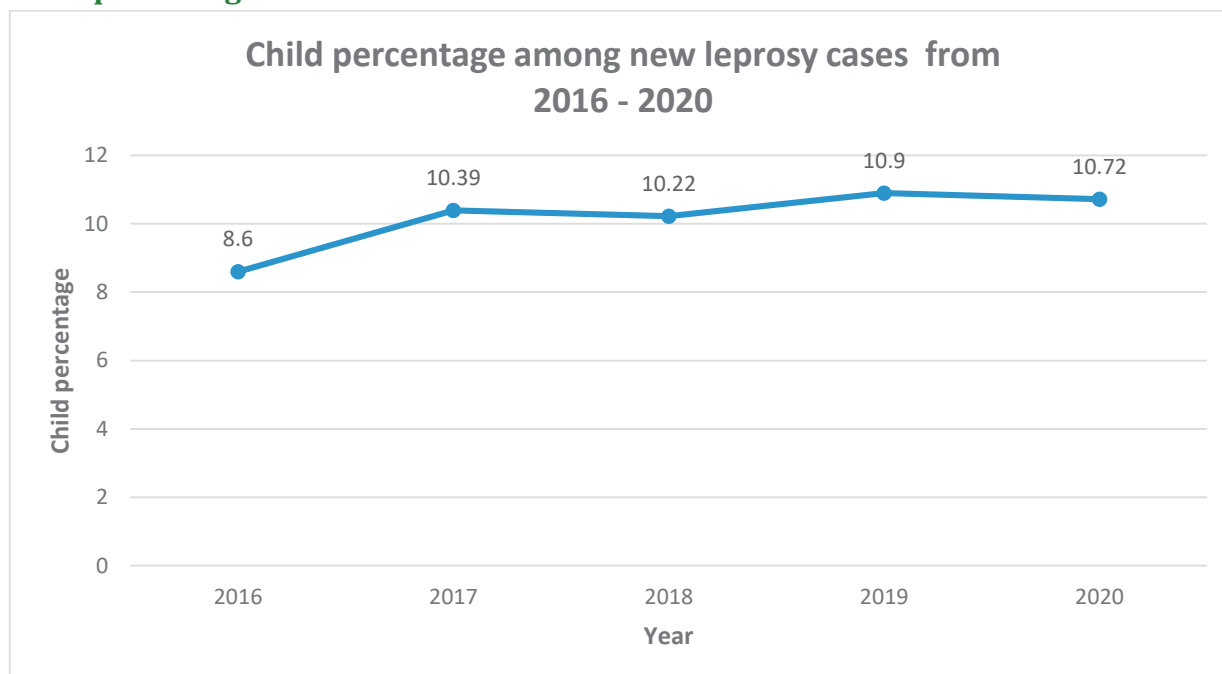
### Multi-Bacillary Percentage (MB Percentage)



### Grade 2 deformity Percentage



## Child percentage



## Ongoing Development project details

Project Description	Total Estimate Cost (Rs)	Physical Progress by 31.12.2020	Financial Progress by 31.12.2020 (Rs)
GOSL funds			
<b>Conducting house to house surveys in high endemic districts (17 districts)</b>	493000.00	53%	246185.00
<b>Rebudget of the balance of activity no.1 to purchase MCR shoes</b>	249193.00	100%	24193.00
<b>Provision of MCR shoes, ulcer care kits, splints and gutters</b>	1645065.68	100%	1645065.68
<b>Conducting Annual Reviews- Anuradhapura, Colombo</b>	141,000.00	100%	116,425.00
<b>District Reviews N' Eliya, Badulla, Monaragala, Kandy, Mathale ,Gampaha Galle</b>	3,14850.00	100%	243,704.00
<b>M&amp;E visits Anuradhapura, N'Eliya, Badulla, Monaragala, Mathara &amp; Hambanthota</b>	212,000.00	100%	193,040.00



<b>Rebudget of activity no 4,5,6 to print patient follow up forms</b>	108,680.00	100%	108,680.00
<b>Reprinting of patient follow up forms</b>	149,050.00	100%	1,49050.00
Ministry capital expenditure			
<b>Repair of buildings</b>	54,70153.00		410,065.60
<b>Vehicle maintenance</b>	202,375.00	100%	202,375.00
<b>Purchasing office equipment</b>	147,045.00	100%	147,045.00
WHO funds			
<b>Workshops with local experts for physiotherapists / Occupational therapists in Disability management and rehabilitation (4 Programs)</b>	10,00256.00	100%	9,92877.57
<b>Monitoring and evaluation of Leprosy related activities in Regional level(13 Programs)</b>	739,490.29	100%	709,620.84
<b>Anti-Leprosy Campaign capacity building program for staff and Public Health Inspectors (3 Programs)</b>	385,280	100%	384,780.00
<b>Capacity building for preventive and curative health staff for early diagnosis and referral of Leprosy(6 Programs)</b>	21,48238.86	100%	21,48238.86
<b>Training of health and other prison staff for early diagnosis and referral leprosy</b>	475,961.43	100%	475,961.43
<b>Detailed Case Analysis of Leprosy in Sri Lanka</b>			
<b>Preparation of the coasted National Strategic Plan 2021-2025(6 programs)</b>	805,165.71	30%	96472.80
<b>Capacity building program to raise awareness on leprosy - Commemorating World Leprosy Day 2021 (3Programs)</b>	186030.00	100%	186030.00

## 4.1.2 Anti Filariasis Campaign

### Introduction

The Anti Filariasis Campaign (AFC) was established in Sri Lanka in 1947. The activities of the AFC are decentralized and they are implemented by 3 provincial health authorities. Technical guidance is provided by AFC directorate. The Campaign conducts parasitological, Entomological and clinical management and surveillance on Lymphatic Filariasis and advice to the relevant provincial authorities.

### Vision

Filariasis free Sri Lanka.

### Mission

To sustain elimination of lymphatic filariasis and to prevent suffering and disabilities by enhancing surveillance and empowering health staff and the community.

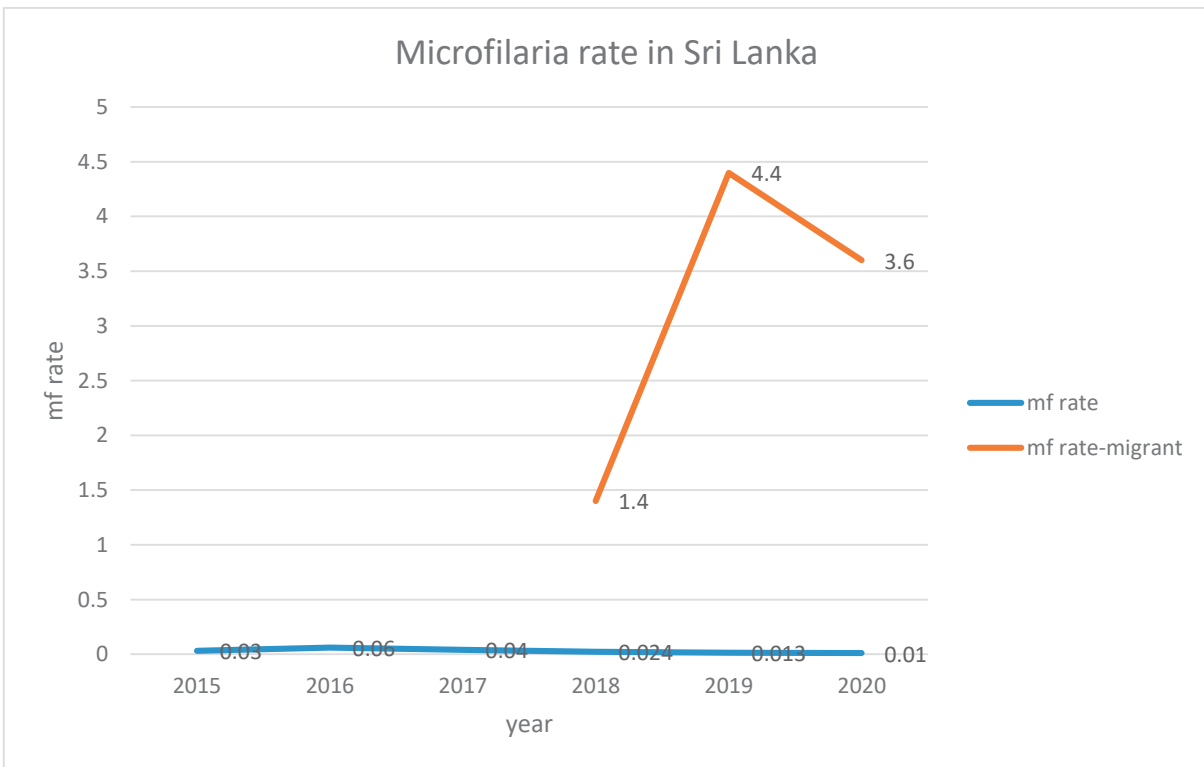
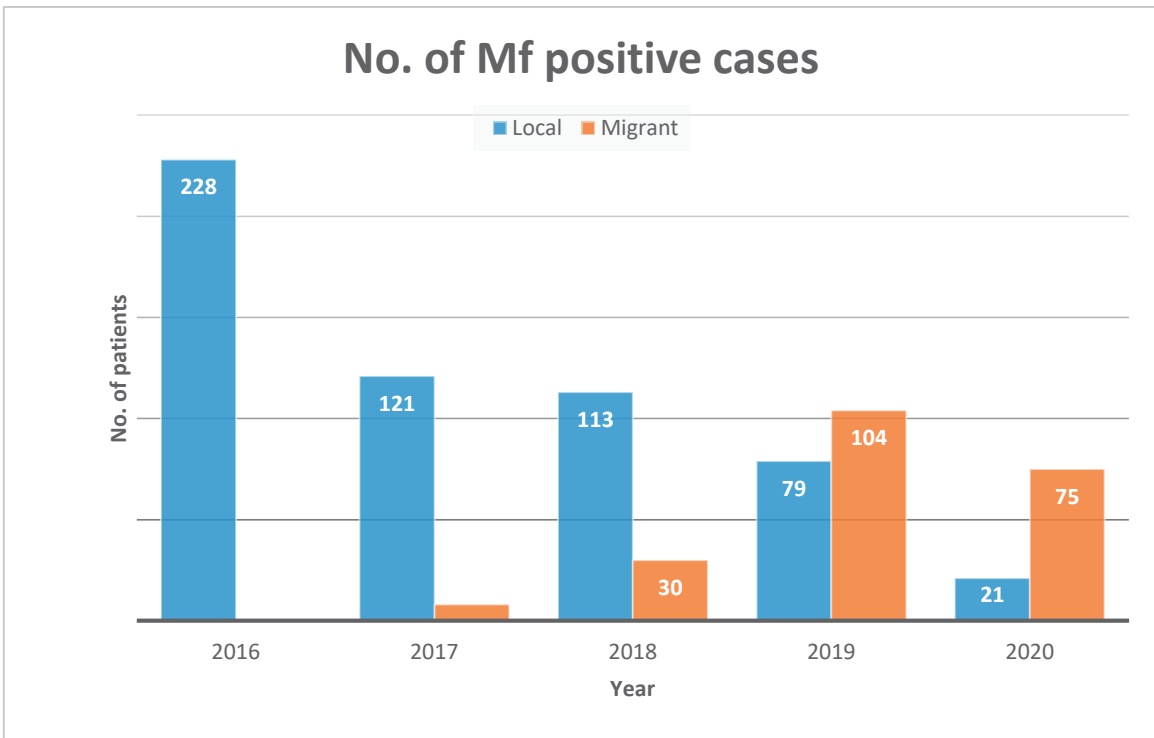
### Objectives

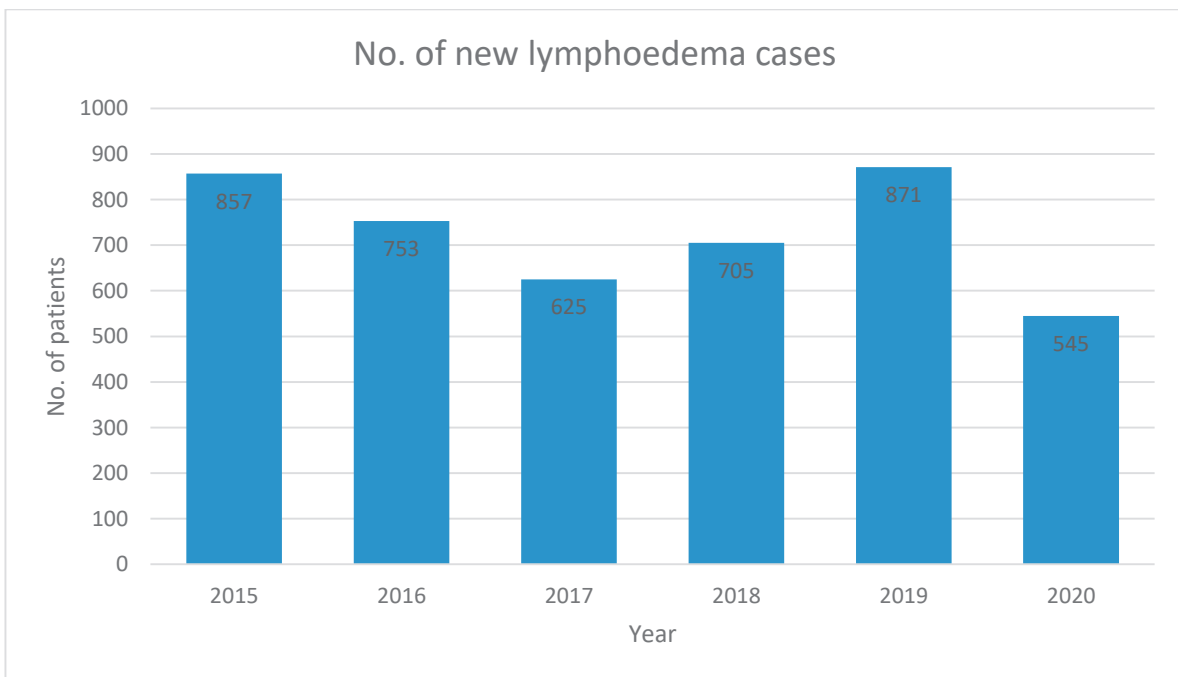
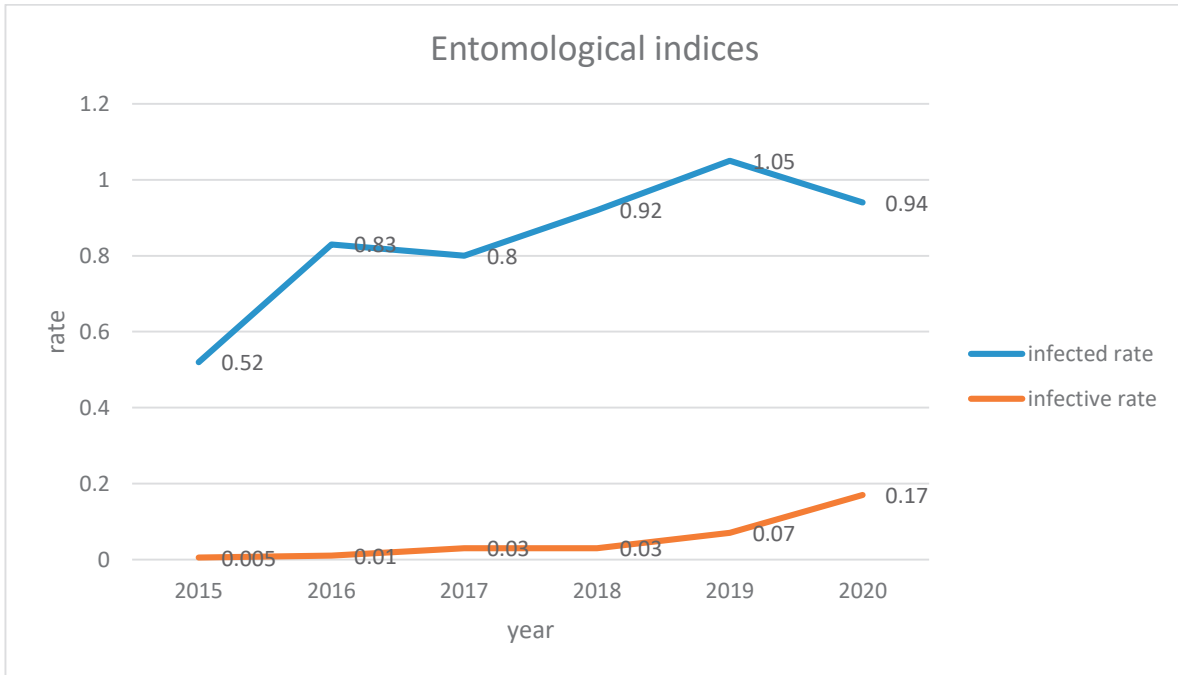
- To reach 0% of mf rate in endemic areas by 2030
- To ensure maintenance of 0% microfilaria rate in non-endemic areas
- To prevent progression of lymphoedema into elephantiasis among patients with past infection of filariasis

### Achievements/ special events in 2020

- Anti Filariasis Campaign was unable to conduct the training programmes, awareness programmes and special surveys which was pre planned due to the COVID 19 situation in Sri Lanka.
- Distribution of drugs to registered patients at lymphoedema clinic who were unable to attend clinic amidst the COVID 19 situation.

Performance trend for last 5 years





## Total number of activities done during the year 2020

	Activity	Number	Result
01	Number of Night Blood films taken (local)	215632	21 positive (*Wb-15,Bm-6)
02	Number of Night Blood films taken (foreign)	2066	75 positive (Wb)
03	Number of Antigen tests done	10999	163 positive
04	Number of PCR done	1259	17 positive

\*Wb-*Wuchereria bancrofti* Bm-*Brugia malayi* (filaria parasites)

## Special development activities planned for 2021

- Surveys are planned in selected non-endemic districts in order to monitor the sustenance of 0% mf rate.
- Procurement of material and equipment needed for entomological and parasitological surveys.
- Lymphatic Filariasis programme evaluation through Epidemiological, economic, entomological and parasitological assessments.

### 4.1.3 Public Health Veterinary Services

#### Introduction

Public Health Veterinary Services of Ministry of Health has been entrusted with national responsibilities in preventing human and animal rabies and controlling other zoonotic diseases in Sri Lanka. Rabies and Japanese Encephalitis are two major zoonotic viral diseases which affect humans in Sri Lanka. Dog is the main reservoir of dog rabies and the main transmitter of human rabies in Sri Lanka. Similarly, pigs act as an amplifier of Japanese Encephalitis.

#### Vision

Assure maximum protection to public from deadly rabies and other zoonotic diseases causing disability.

#### Mission

To monitor, promote and facilitate implementation of Rabies control strategies stipulated by the Ministry of Health to reach high coverage involving provincial health services whilst ensuring high community effort and promotion of rabies post exposure treatment involving government hospitals whilst ensuring cost effectiveness

## Objectives

1. To strengthen the monitoring of rabies control activities to eliminate dog mediated human Rabies incidences by 2025
2. To collaborate and communicate with stakeholders to increase the dog vaccination coverage
3. Improve the surveillance on animal rabies and dog bites

## Achievements/special events in 2020 and 2021



- World Rabies day was celebrated with collaboration of Municipal Council Gampaha
- District Reviews to evaluate Rabies control activities; were held with the participation of all relevant health staff. Identified concerns were addressed
- Collaborate with animal welfare NGOs to increase dog sterilization coverage



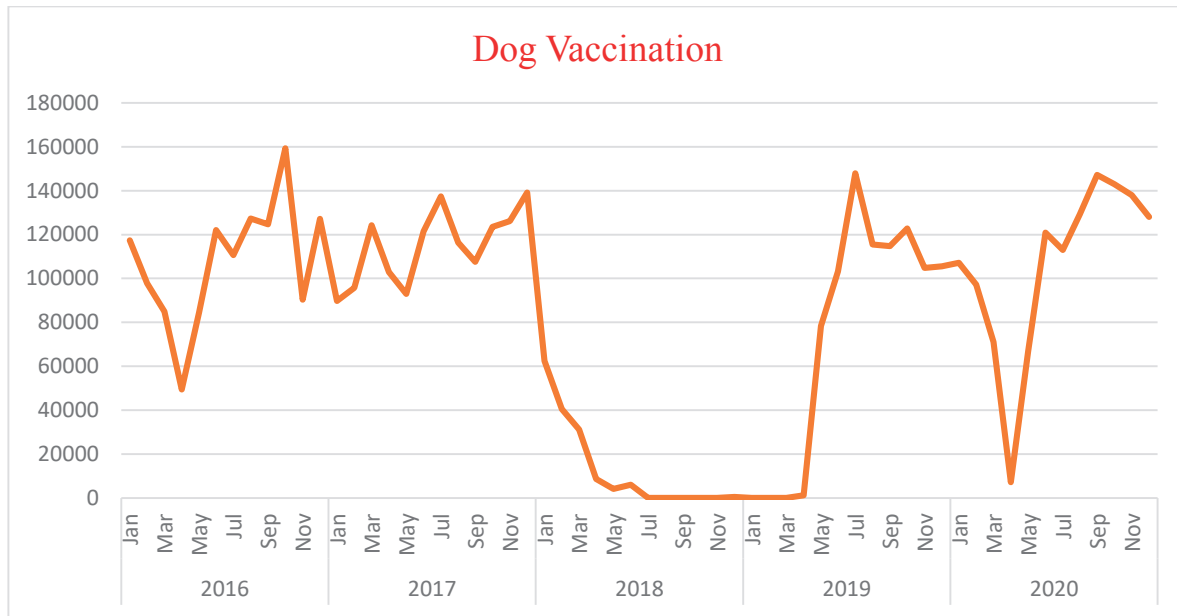
- Necessary measures were taken to strengthen multi-sectoral collaboration with a special emphasis in order to strengthen the partnership with the Provincial Councils and Local Government

- Conduct Rabies survey for the general population to identify existing knowledge gaps, and malpractices related to treatment seeking behaviors following suspicious exposures for Rabies
- Provision of recommendations and necessary technical assistance for the development of Rabies Legislations
- Development of National Strategic Plan for Public Health Veterinary Services for Rabies prevention and control activities for 2021-2025

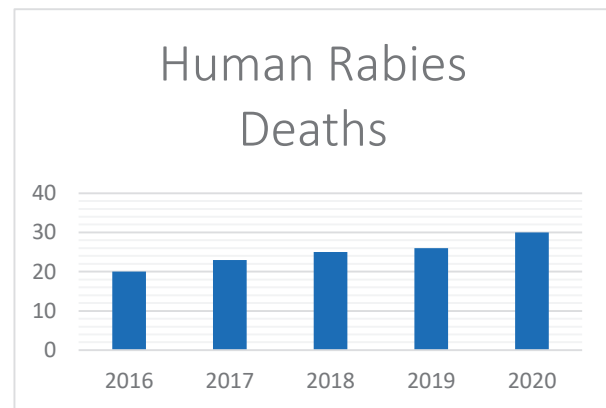
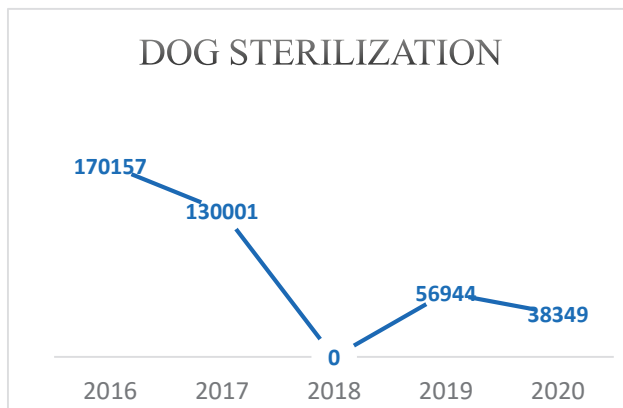
### Ongoing Development project details

Project Description	Total Estimated cost	Physical progress by 31.12.2020	Financial Progress 31.12.2020 (Rs. Mn)
<b>1) Implementation of dog population control through dog sterilization</b>	74	35119 female dogs sterilized.	61.351
<b>2) Commemoration of World Rabies Day</b>	0.35	Rabies day walk and awarded community	0.338
<b>3) Community level awareness programs and surveillance on zoonotic disease prevention</b>  (i) Training on cost effective Post Exposure Treatment (ii) Dog population survey training programs (iii) Awareness of Community Leaders on Rabies	0.4	08 programs completed	0.273
<b>4) Review meeting on rabies control activities at district level/Quarterly Review Meetings</b>	0.01	3 programs completed	0.075
<b>5) Infra structure development of PHVS – for logistics</b>	0.39	03 laptops were purchased (to strengthen the real time data system)	0.39
<b>TOTAL</b>	<b>75</b>		<b>62.438</b>

**Performance of last five years**



**2017 and 2018 dog vaccination program was conducted by Dept. of Animal Production and Health**



**Special Development activities planned for 2021**

1. Development of National Strategic Plan for Public Health Veterinary Services
2. Conduction of Art Competition among school children on Rabies Prevention
3. Organize and conduct dog population estimation surveys in selected districts
4. Enhance rabies surveillance by increasing the numbers of animal samples being sent to rabies laboratories, and also by improving real-time data entry to the web-based Rabies surveillance system



## 4.1.4 Anti-Malaria Campaign

### Introduction

Sri Lanka has been free of indigenous malaria since November 2012 and zero mortality due to malaria has been sustained since 2007. In September 2016 Sri Lanka was certified by the World Health Organization as a malaria-free country which has a great positive impact on development and tourism of the country. However, Sri Lanka is having a high risk of re-introduction of malaria as people traveling to malaria endemic countries can become infected with the malaria parasite (imported cases). If they are not promptly detected and treated, they can cause initiation of local transmission as the transmitting mosquito is present in Sri Lanka. The AMC carries out activities to prevent such occurrence.

### Vision

Malaria-free Sri Lanka.

### Mission

To plan and implement a comprehensive programme to sustain intensive surveillance and outbreak preparedness, prevention and rapid response for malaria elimination in Sri Lanka and to prevent re-introduction of malaria to Sri Lanka.

### Goal

To maintain malaria-free status.

### Objectives

- To prevent re-introduction and re-establishment of malaria in Sri Lanka.
- To maintain zero mortality due to malaria in Sri Lanka

### Major achievements

1. In 2020 and early 2021, Sri Lanka had no local transmission and continued to maintain the malaria free status. All imported cases (30 in 2020 and 11 in early 2021) were promptly admitted and treated. Anti-Malaria Campaign extends prompt service, free of charge with malaria diagnostics and treatment facilities, to both Government and private health institutions in managing these imported malaria cases. All necessary activities related to detected cases (including primary and secondary parasite screening, entomological surveillance, vector control) were promptly conducted
2. AMC continues to maintain a 24 hr hotline, to attend to all malaria related queries and notifications.
3. AMC continued activities amidst of Covid -19 pandemic by adapting following innovative ways

- a. Development and implementation of Interim Guidelines for surveillance during COVID-19 situation
  - b. Prioritization of essential work
  - c. Continuing reactive case-based activities as a priority while adhering to safety measures
  - d. Conducting routine meetings online using free platforms (eg: Monthly RMO review, Case review Committee, technical staff meetings and special meetings)
  - e. Follow up of patients and high-risk groups with use of WhatsApp and Viber groups
  - f. AMC took necessary action to screen all returnees coming from malaria endemic countries at the quarantine centers before they sent home. Eleven malaria cases were detected by AMC from Quarantine centers in 2020.
4. AMC was given an A2 rating by programmatic performance evaluation by the Global Fund. Sri Lanka was appreciated in Common Wealth Physician Journal, for malaria related activities conducted during the global Covid 19 situation.

### Special Events in 2020

- Simulation program was conducted in Hambantota in 2020 for all-Regional Malaria Officers and AMC-HQ staff, as a training program on how to handle a malaria outbreak.
- Mid Term Review on implementation of the Nation Strategic Plan 2018 – 2022 was conducted in 2020.
- ‘Vector control guidelines in Prevention of Reintroduction phase of malaria in Sri Lanka’ was developed in 2020.

### Key Performance Indicators and progress against targets

AMC has been able to achieve both of the objectives, prevention of re-introduction of malaria and maintaining zero mortality during the last 5 years.

	Key Performance Indicators	Target for 2021	Progress				
			2017	2018	2019	2020	2021 (Up to June 30)
1	No. of malaria deaths	0	0	0	0	0	0
2	Percentage of cases investigated within 3 days	100%	100%	100%	100%	100%	100%
3	Percentage of confirmed	100%	100%	100%	100%	100%	100%

	malaria cases that received first line treatment according to national treatment guidelines						
4	Annual Blood Examination Rate per 100 person per year	3%	3%	3%	3%	3%	3%
5	Percentage of healthcare institutions with no stock outs of malaria drugs and commodities	100%	100%	100%	100%	100%	100%

### Way forward

- Sri Lanka propose to establish an International Centre of Excellence for malaria in 2021 Sri Lanka can share the experience with member states on how we achieved elimination from the endemic status to malaria free status. Other countries can learn from our experience in eliminating malaria and maintaining the malaria free situation in a cost-effective manner.
- Online training programmes (using online platforms) is planned to be launched in 2021 for staff who are involving malaria activities.

## 4.1.5 National Programme for Tuberculosis Control and Chest Diseases

### Introduction

Tuberculosis (TB) remains to be a major public health problem in the country with an estimated incidence of 64/100,000 population in 2020. Around 9,000 cases are reported every year. In 2020, the total number of TB cases detected was 7258. Due to the COVID Pandemic situation in the country, there was a 10 – 15% decline in the total case finding, compared to previous years. The ratio for new Pulmonary to new Extra Pulmonary TB was 2.47 in 2020. Nearly 79% of total TB cases are Pulmonary TB (PTB), while 80% of these PTB are bacteriologically confirmed. The total cases detected in 2020 was 7,258 and out of them, 192 were paediatric TB cases. As a percentage, it was 2.64%. In 2019 paediatric cases detected as a percentage of total TB cases was 2.82%. In 2020, there were 21 Multi-Drug Resistant (MDR) TB patients registered and the number of people with TB/HIV co-infection was 33.

The National Programme for Tuberculosis Control and Chest Diseases is the national focal point for the prevention and control of TB in the country. Tuberculosis-related health services are provided through a network of 26 District Chest Clinics, one sub chest clinic, over 100 branch clinics and more than 180 microscopic centers scattered throughout the island. Diagnostic culture facilities are available at National TB Reference Laboratory (NTRL) located in Welisara and Intermediate TB Laboratories at Rathnapura, Kandy, Jaffna and Galle. Other diagnostic facilities of sputum smear testing, GeneXpert testing and chest X-ray are available at the district level, at each chest clinic, & at healthcare institutions above Base Hospital level, and microscopic centers. Anti-TB treatment is initiated by district chest clinics and Directly Observed Treatment Short-course (DOTS) is provided to each patient by a DOT provider under the close supervision of the District Chest Clinic.

### Vision

Sri Lanka free of Tuberculosis & other chest diseases

### Mission

To contribute to the socio-economic development of the nation by committing ourselves to create a TB free Sri Lanka by formulation of policies, planning, coordinating and monitoring of TB and chest disease control activities in the country

### Objectives of the National Strategic Plan 2015 – 2020

To improve the TB control by detecting at least 80% of incident TB cases (all forms) by 2017 and 90% of incident cases by 2020

1. To improve the outcome of enrolled TB patients

- a) By achieving 90% treatment success rate of all forms of non MDR-TB patients and;
  - b) To maintain at least 75% of treatment success rate among MDR-TB cases by 2017
2. To integrate TB control activities into the general healthcare system by establishing TB diagnostic and treatment services in 40% of all hospitals up to the level of Divisional Hospitals Type B or above by 2017 and in 80% by 2020
  3. To improve the accessibility to TB treatment and care by engaging 30% of all private health care providers (hospitals and General Practitioners) in TB control by 2017, and 50% by 2020
  4. Ensure that quality TB services in line with current international standards are provided by qualified and regularly supervised personnel at 100% of all implementation sites by 2017

### **Achievements/ special events in 2020 and early 2021 (Up to 30<sup>th</sup> June 2021)**

#### **1. Pilot district programme**

Sri Lanka has committed to achieve the WHO End TB strategy targets by the year 2035. Reaching these targets require intensive integrated strategic actions at the national and sub-national levels. As recommended by the mid-term review conducted in July 2017, NPTCCD introduced a pilot district programme that includes rigorous actions to overcome the challenges identified in eliminating TB. The pilot programme was initiated by recruiting Kalutara, Kegalle, and Gampaha districts in 2018. It was expanded in 2019 to include Kurunegala, Rathnapura, Kandy, Badulla and Monaragala. In 2020, Matara, Matale, Puttlum, Nuwaraeliya, Polonnaruwa, Ampara, Vavuniya, and Jaffna have been introduced as pilot districts. This will be expanded, and all 25 RDHS will be covered in 2021.

#### **2. Implementation of latent TB infection (LTBI) Guideline**

Detection and treatment of latent TB infection (LTBI) among high-risk populations is recommended as an effective strategy in controlling the TB disease burden. National guideline preparation for LTBI was initiated in 2019. Scaling up of the LTBI guideline was done in 2020.

#### **3. Epidemiological review 2020**

The National Programme for Tuberculosis Control and Chest Diseases (NPTCCD) has identified many strategies to achieve the End TB goal. Reviewing the progress of the pilot district programme and the activities identified in the 2015-2020 National Strategic Plan was one such important strategy. A good understanding of the level of TB burden and the capacity of the existing health system to cater to surveillance needs was of great importance at this juncture. To fulfill this aim, the NPTCCD planned to conduct an

epidemiological review in 2020, with the assistance of national and international experts, and the mission was completed.

**4. End term review of NSP (2015-2020) at the end of 2020**

The National Programme for TB Control and Chest Diseases (NPTCCD) has prepared the National Strategic Plan (NSP) from 2015 to 2020 based on the WHO End TB Strategy and the year 2020 was the last year of its implementation. Hence, it was very much important to review the achievements of objectives and targets identified by the NSP 2015-2020 to revise the objectives and activities in accordance with 2025 End TB targets in the new National Strategic Plan (NSP). End term programme review was an effective way of evaluating the achievements, identifying the barriers and lessons learned in order to take future actions. This review, organized by NPTCCD, was carried out by NPT staff and four national consultants.

**5. Regular supervisory visits**

Regular supervisory visits were conducted from the central level in 2020 to monitor the progress of the TB control activities and to identify the issues and constraints for the provision of diagnostic, curative and preventive care services.

**6. Regular capacity-building programs**

Regular in-service capacity-building programmes for chest clinic staff as well as for the hospital and field health staff was continued in 2020.

**7. Procurements**

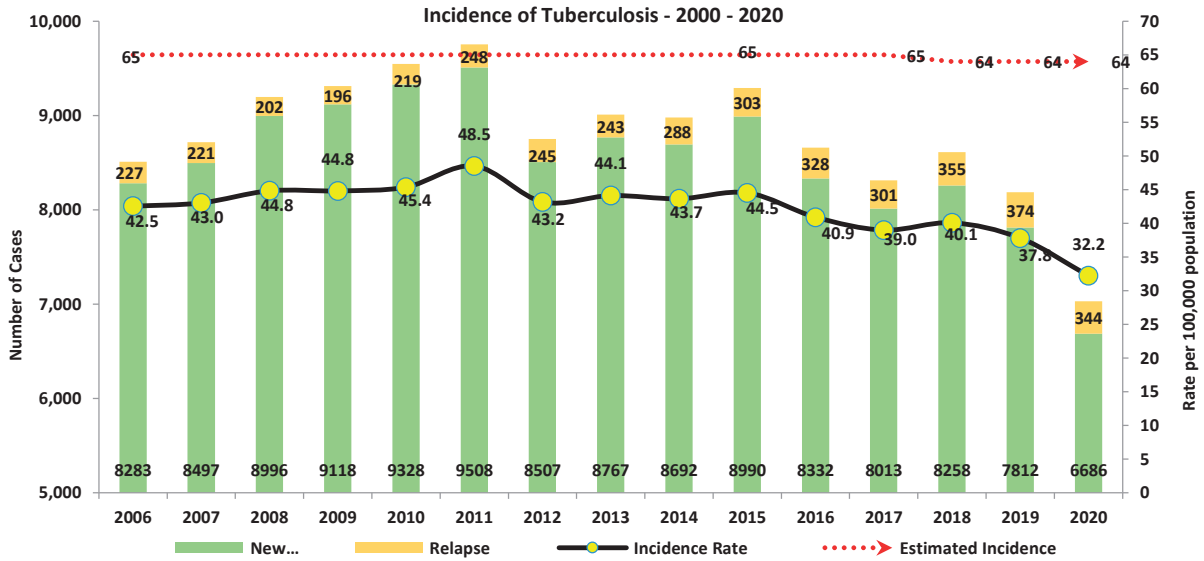
Procurement of lab equipment, consumables and Xpert MTB/Rif cartridges essential for smooth functioning of the laboratory diagnostic services was done to enhance the TB diagnostic capacity and thereby to increase the case detection rate.

**Ongoing Development Project Details**

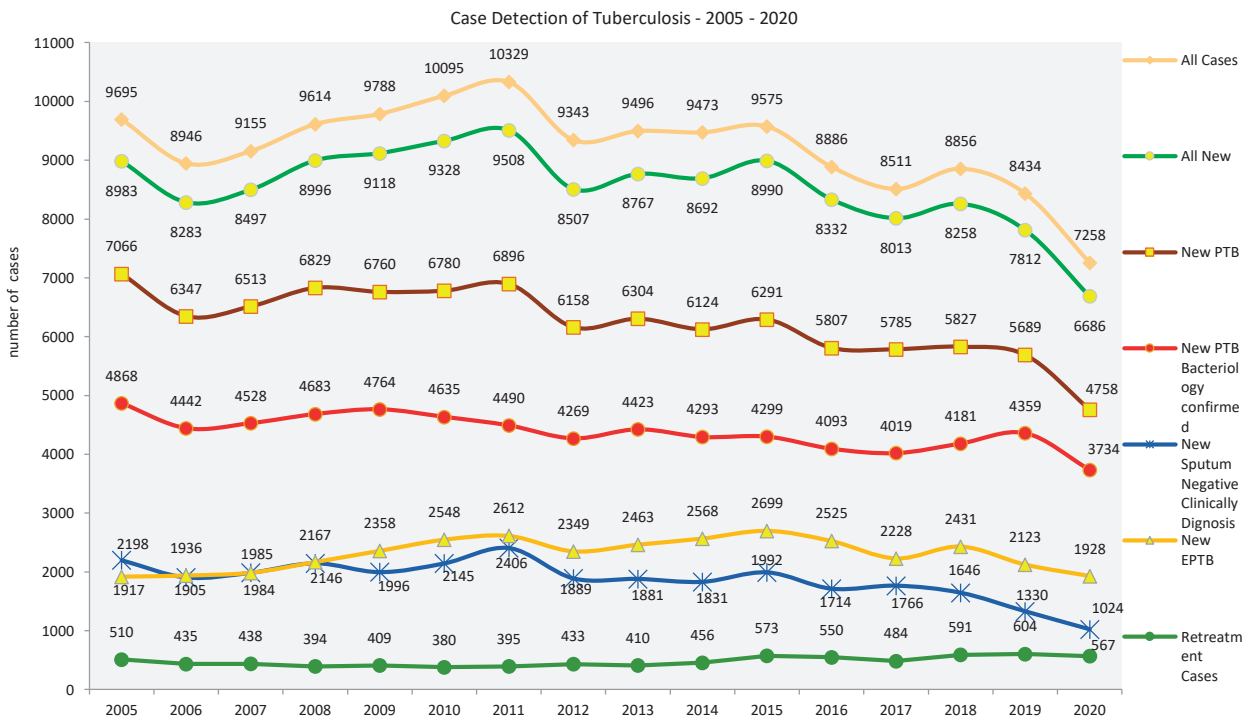
Project Description	Total estimated cost	Physical progress by 31.12.2020	Financial progress by 31.12.2020
<p><b>1. Improve treatment facilities at the peripheral level (PSSP/WB)</b>                      "Proposals sent for construction of 03 Sputum Collection Booths (SCBs) in Nuwaraeliya District and 03 SCBs at Kandy Districts. Procurement of 04 mini-refrigerators for Microscopic Centers at Kandy District. Renovation of Lab, record room and chest clinic in Kandy Chest clinic. Payment is done for the construction of SCB at Nawalapitiya, renovation of DCC Kalubowila, and mini-refrigerators procurement.</p>	5mn	60%	1.77mn

### Last 5 years' Performance trend Supportive data: (graphs and charts)

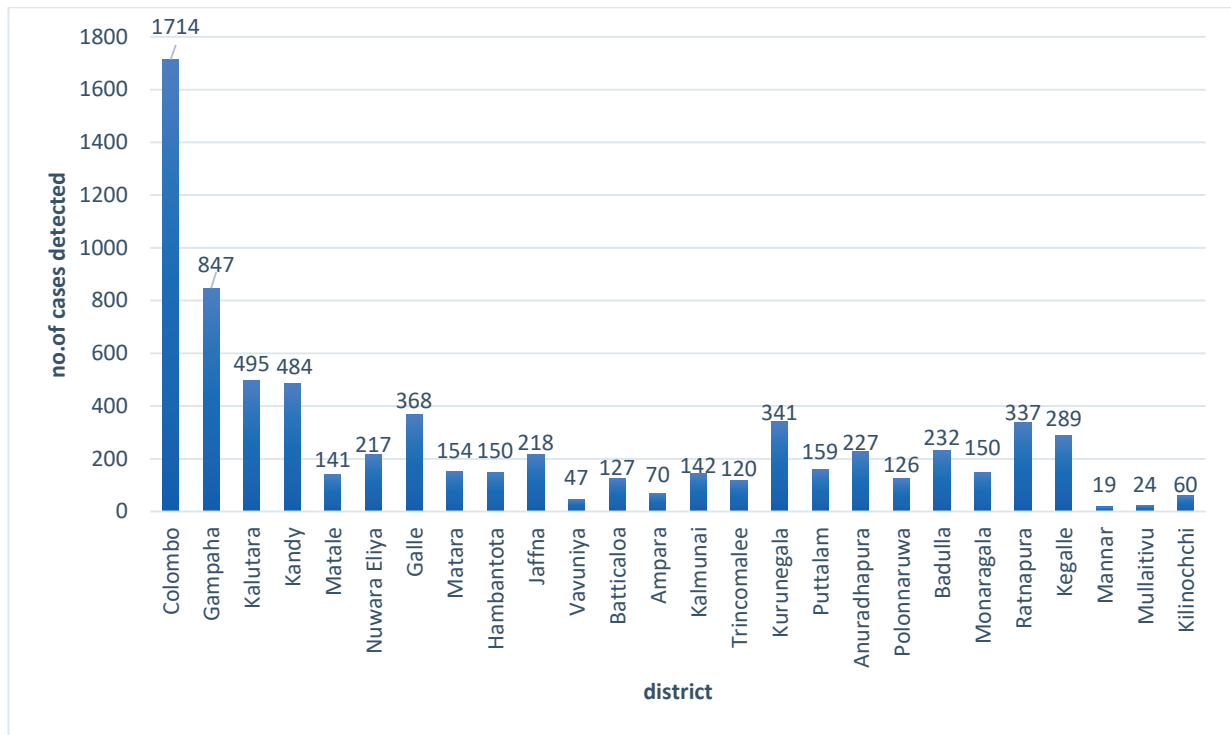
#### Gap between the estimated TB cases (new & relapse) and notified cases



#### Trend of case detection during 2005-2020



**District distribution of TB cases in 2020**

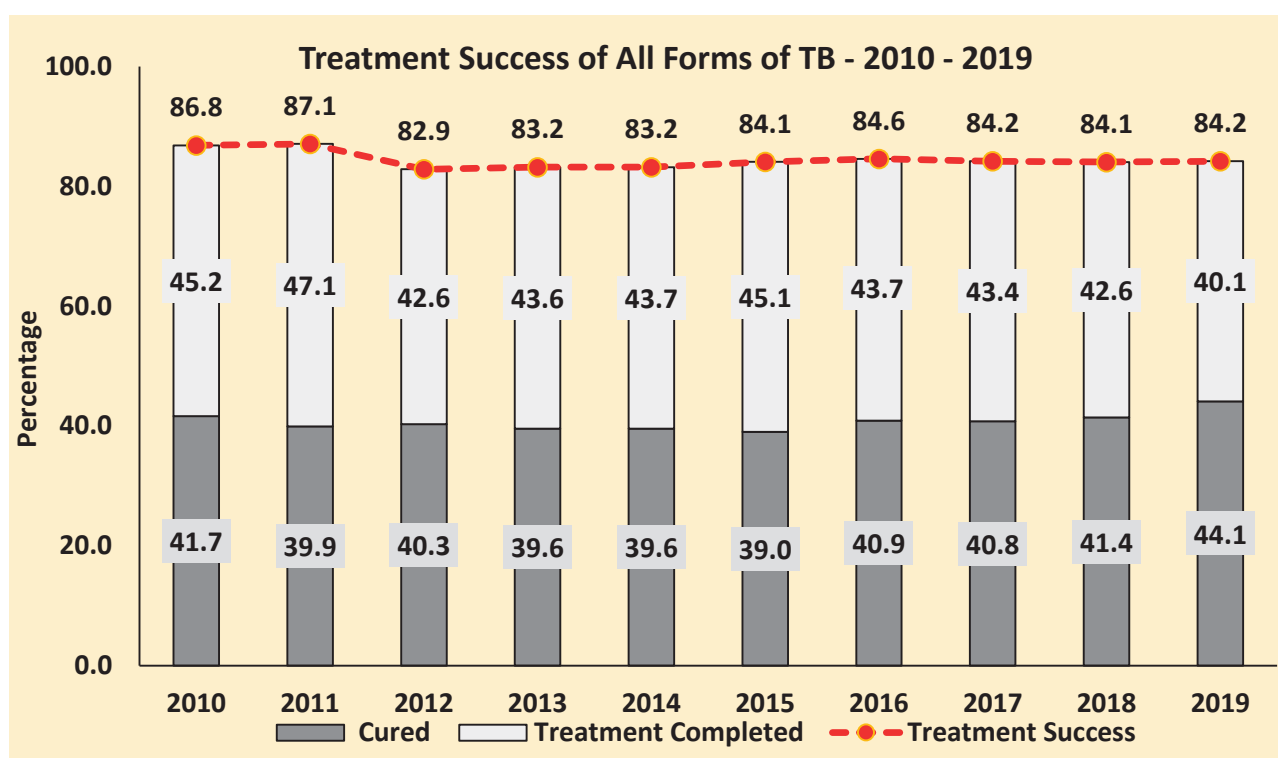


**Treatment outcomes of new and previously treated TB patients**





*Treatment success rate (Cured and treatment completed)*



**Special development activities planned for the year 2021**

Activity	Total estimate - LKR	Progress
<b>Improve treatment facilities at the peripheral level</b> 1. Construction of sputum collection booths at DBH Rikllagasakada, DBH Dikoya, and DH Lindula ongoing 2. Construction of sputum collection booths at DH Akurana, DH Delthota ongoing 3. Laboratory renovation works at District Chest Clinic Kandy ongoing 4. Chest ward repair at Eheliyagoda Hospital-20% advance payment done	5 Mn	Physical progress - 25%
<b>Construction/renovation and NTRL building expansion</b>	20 Mn	funds not allocated
<b>Procurement of vehicles to Central Unit (Van)</b>	20 Mn	funds not allocated
<b>Procurement of vehicles (Double cabs) to District Chest Clinics for TB control activities (Kalubowila - newly established clinic, Hambanthota, Kilinochchi, Ampara)</b>	20 Mn	funds not allocated

## 4.1.6 National Cancer Control Programme

### Introduction

National Cancer Control Programme (NCCP) is the national focal point of the Ministry of Health for prevention and control of cancers in the country. It is also responsible for policy, advocacy, planning, monitoring and evaluation of prevention and control of cancers including surveillance of cancers and facilitating research related to cancers. The NCCP coordinates activities according to the 'National Policy & Strategic Framework on Cancer Prevention & Control-Sri Lanka' and 'National Strategic Plan on Prevention & Control of Cancers 2020-2024'.

### Vision

A country with a low incidence of preventable cancers and high survival rates with good quality of life and minimal disabilities suffering from cancer.

### Mission

To reduce the incidence of cancers by controlling and combining determinants of cancers, ensuring early detection and providing holistic and accessible continuum of cancer care which addresses curative treatment options to end of life through an evidence-based approach.

### Objectives

- 1) High level political **leadership, advocacy and governance** to accelerate the national response for prevention and control of cancer with a robust integrated, coordinated, multi-sectoral, multi-disciplinary national programme with community engagement
- 2) **Primordial and primary prevention** of cancers by addressing risk factors and determinants throughout the life-cycle
- 3) Advocate for **screening and early diagnosis** through improved health literacy, availability of services for rapid diagnosis of cancers and linking to ensure early treatment and care.
- 4) Ensure sustained and equitable access to **diagnosis and treatment** and care facilities for cancers.
- 5) Ensure access & availability of **survivorship, rehabilitation and palliative care** facilities at all health service levels and at community level for cancer patients and support to their families and care givers
- 6) Strengthen **cancer information systems and surveillance** to provide accurate and timely data to monitor the progress and evaluate the outcomes of cancer control actions.
- 7) Promote **research** and utilization of its findings for prevention and control of cancers

## **Achievements/special events in 2020**

### **1. High level political leadership, advocacy and governance**

- Conducted quarterly National Advisory Committee Meetings of Prevention and Control of Cancers
- Conducted National Steering Committee Meeting on Palliative Care, Technical Advisory Committee meetings of Primary Prevention & Early Detection, Oral Cancer Control, Diagnosis & Treatment, Cancer Registration & Research
- Launched National Strategic Plan on Prevention and Control of Cancers for year 2020 -2024
- Developed Monitoring and Evaluation framework for the National Cancer Control programme.

### **2. Primordial and primary prevention of cancers**

- Commemoration of special days and months: The World Cancer Day and 4<sup>th</sup> February 2020 and World Head, Neck cancer day 27<sup>th</sup> July 2020, World Palliative Care Day 2020 and World Breast Cancer Awareness Month-October 2020 were celebrated and issued circulars to motivate national and provincial health staff to actively organize activities related to cancer prevention and control. Conducted media seminars in collaboration with Health Promotion Bureau and conducted competition on messages related to early detection of breast cancer.
- Developed video with visuals for the theme song of the National Cancer Control Programme in partnership with the Rotaract Club of Excellence.
- Development and Printing of Videos, Posters, Leaflets, Booklets and Other IEC Materials on prevention of cancers

### **3. Screening and early diagnosis**

- Made available the National Guideline on Early Detection and Referral Pathways of Common Cancers in Sri Lanka among primary care physicians.
- Procured 102 Self-breast examination mannequins and distributed among selected MOH offices in each district.
- Printed 100,000 leaflets on breast cancer in both Sinhala and Tamil languages, and distributed among all MOOH of the country.
- Developed a video clip for awareness of breast cancer in partnership with the Indira Cancer Trust.
- Printed 100,000 'Be breast aware' booklets in both Sinhala and Tamil languages and distributed among all districts, with the coordination of the MO-NCDs in the same manner as above.

- Printed 200,000 units of a special guide-card with a checklist in both Sinhala and Tamil languages, and distributed among all well-women clinics.
- Conducted a social media campaign for breast cancer awareness in the form of a Facebook 'post' competition in partnership with the MAS Intimates (Pvt) Ltd.
- Monitored and evaluated the mammography services in the mammography centers across the country using the mammography returns on a quarterly basis.
- Printed the National Colposcopy Training Module, Guideline & Standard Operating Procedure (SOP) and distributed among the relevant healthcare institutions.
- Capacity building programmes for medical officers and dental surgeons at district levels for early detection of oral cancer.

#### **4. Diagnosis and treatment**

- Conducted a situational analysis on cancer treatment centers in Sri Lanka.
- Developed a guide for Center of Excellence (CoE) which was planned to be established in provincial hospitals.
- Planned for establishment of breast care clinics and instructed all base hospitals and above through Secretary, of Health to initiate breast care.
- Radiation safety: Partnered with Sri Lanka Atomic Energy Board to develop Radiation Safety Guideline for Health Care Workers in Sri Lanka.
- Published the "National Guideline for the Management of Oral Cancer in Sri Lanka"

#### **5. Survivorship, rehabilitation and palliative care**

- Conducted capacity building programs on palliative care for different categories of service providers.
- Procurement and Distribution of Text books on Palliative Medicine and Palliative Nursing among Cancer Treatment Centers.
- "Aayu plus" a social media based health promotion campaign for general public was developed to disseminate the concepts of cancer prevention, early diagnosis, treatment and palliative care in an innovative manner using social media, mainstream media, celebrities and social media influencers.

#### **6. Cancer information systems and surveillance**

- Completion of cancer incidence data collection, coding and data entered with CanReg 5 data base up to 2019.
- Release of publications related to cancer registration – National Cancer Incidence Data 2012, Population Based Cancer Incidence Data 2012, Pathology Based Cancer Frequency Data 2017, Cancer Mortality Data – Colombo district 2017
- Appointed designated officer for Cancer registration.
- Issued a circular on mandatory reporting of cancers

- Conducted training programme and review meetings among the relevant staff related to cancer registration.

### 7. Cancer research

- Identified research priorities through stakeholder consultation and published at the National Cancer Control Programme website.

### Last 5-year performance trend (Table/graph/chart)

#### Financial Performances (in SLR)

	2016	2017	2018	2019	2020
<b>GOSL</b>	13,694,207.88	10,341,020.99	11,217,404.65	25,179,466.15	11,392,294.34
<b>WHO</b>	233,155.00	1,896,613.02	27,036.87	1,845,539.11	664,915.63
<b>World Bank</b>	17,864,261.63	38,239,241.19	14,538,182.09	128,195.00	28,203,025.30
<b>Total</b>	<b>31,791,624.51</b>	<b>50,476,875.20</b>	<b>25,782,623.61</b>	<b>27,153,200.26</b>	<b>40,260,235.37</b>

### Special development activities planned for 2021

#### 1. High level political leadership, advocacy and governance

- Development of National Strategic Plan for childhood Cancer care for 2021-2025
- Development of National Strategic Plan for cervical Cancer elimination 2021- 2030
- Development of National Strategic Plan for Radiotherapy on Cancer patients 2021 -2025.

#### 2. Primordial and primary prevention of cancers

- Capacity building of different target groups (policy makers, health care providers, armed forces) on cancer early detection and prevention.
- To conduct Media seminars, issuing of circulars and other related activities for world cancer day, World Head & Neck Cancer Day, World breast cancer awareness month
- Develop and print IEC materials on prevention and early detection of cancers.
- Finalize the manual for primary health care workers on prevention of cancers.

#### 3. Screening and early diagnosis

- To conduct district level training programmes on clinical breast examination for health care staff in WWC and HLCs.

- Procure 100 Self-breast examination mannequins and 26 clinical breast examination mannequins for the distribution among selected MOH offices and district offices in each district.

#### **4. Diagnosis and treatment**

- Upgrade all the provincial level cancer treatment centers to Centers of Excellence (CoE). Proposed CoE will have advance diagnostic and treatment facilities, in addition to basic facilities to provide expected cancer care services in each province.
  - Provision of equipment's for day care cancer treatment centers: Multipara monitors and chemotherapy chairs.
  - Provision of cytotoxic isolators
  - Provision of lab equipment's such as flow cytometry, immunohistochemistry
  - Provision of MRI machines, CT Simulators
  - Provision of radiotherapy machines- LINAC and Brachytherapy
- Establish breast clinic facilities in base hospital and above to facilitate early detection of breast cancer in Sri Lanka. Training of nurses for breast clinics and training of public health staff on breast cancer care.
- Radiation safety- Develop radiation safety guideline for healthcare workers and TOR for radiation safety officer.
- Development of a Health Information System to monitor cancer screening at Breast care clinics and Cancer Early Detection Centers.

#### **5. Survivorship, rehabilitation and palliative care**

- Capacity building programme for different health worker categories using different methodologies – In person and on line
- Strengthening palliative care services – Developing distant learning module, printing shared care booklet, care giver training modules

#### **6. Cancer information systems and surveillance**

- Printing National Cancer Incidence & Mortality Data 2016-2019.
- Printing Population Based Cancer Registry Data of Colombo district 2013-2019
- Establish a data visualization system on cancer incidence data.
- Piloting Hospital Based Cancer Registry electronic module
- Generate first report of Hospital based Paediatric Cancer Registry at Apeksha Hospital
- Updating monitoring and evaluation of prevention and control of Cancer through revised formats and conducting district Cancer control reviews

**7. Cancer research**

- Conduct monthly research seminar series
- Update research priorities through stakeholder consultation and published at the National Cancer Control Programme website.
- Form research committees for identified thematic areas

**Special events**



*Launching of 'Aayuplus' social media campaign to promote primary prevention, early detection, diagnosis and treatment, palliative care for cancer patients*



*Commemoration of 'World Breast Cancer Awareness Month - October 2020' through a media seminar*



*Leaflets on early detection of breast cancer*



*Special guide-card with a checklist for promotion of Self Breast Examination*

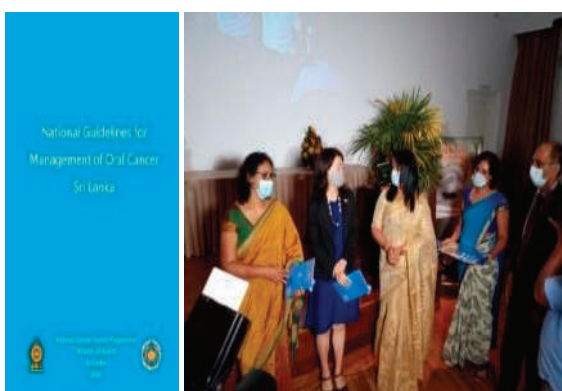


*Development and Printing of Videos, Posters, Leaflets, Booklets and Other IEC Material on Oral cancer*

## MOs training at Gampaha



*Dental surgeons training prevention and early detection of oral cancers at DGH Kalutara*



*Launching National Guideline for the Management of Oral Cancer in Sri Lanka*

### 4.1.7 National STD/AIDS Control Programme (NSACP)

#### Introduction

As of end 2020, there are 41 fulltime STD clinics and more than 28 branch STD clinics, 30 have the capacity to provide antiretroviral treatment (ART) services island wide. The only ART facility outside of NSACP is located in National Institute of Infectious Diseases (NIID). NSACP networks with all these clinics.

#### Vision

Country free of new HIV infections, discrimination and AIDS related deaths.

#### Mission

To prevent new HIV and sexually transmitted infections and provide comprehensive care and treatment services.



**Goal**

Ending AIDS by 2025

**Key functions**

- Coordinating 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 sexually transmitted Infections and sexual health promotion
- Provision of treatment and care for people infected and affected by HIV
- Provision of laboratory services for STI and HIV diagnosis and management
- 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
- Carrying out research in STI and HIV
- Carrying out Monitoring and evaluation of STI and HIV services

**Major achievement/special events in 2020 - 2021****Overall performance during 2020 and mid 2021**

1. Aids epidemic model was updated with new data and new estimations for the country projected through the model.
2. Annual review of STD and HIV services was held with two days residential programme in end of February 2020 with all stake holders.
3. Seven newly built STD clinics were declared open in 13<sup>th</sup> of March 2020.
4. During the COVID-19 all STD Clinics were functioned and with necessary precautions.
5. All pre service and in-service trainings were conducted through virtual platforms.
6. E-learning platform for electronic information management system (EIMS) was established and training conducted to 31 clinics in country.
7. Started to improve virtual reach for key population by remodifying know4sure website.
8. Establishing of prevention information management system (PIMS) to manage peer-led key population HIV prevention programme. Software in piloting stage.

9. Started Know4Sure Social media campaign for key population.
10. Pre-Exposure prophylaxis for HIV piloted and implemented in Colombo and Hambanthota Districts.
11. Started to develop online system to deliver self-testing kit.
12. HIV self-testing was introduced and scaling up in the country.
13. Police survey on HIV knowledge is ongoing and 70% of survey completed.
14. Pre-drug survey among newly diagnosed and defaulters within three months PLHIV countrywide is ongoing with 69% progress.

## Last 5year performance trend

### Key Performance Indicator

Indicator	2017	2018	2019	2020
Number of cases with HIV - Newly Detected	285	350	439	362
Number of PLHIV on ART	1299	1574	1846	2167
Number of Children with HIV due to mother to child transmission- Cumulative since Epidemic Started	81	83	86	89
Percentage of HIV positive women who received EMTCT services.	100%	100%	100%	100%
Percentage of babies born to HIV positive women who tested HIV positive.	0	0	0	0
Number of HIV positive babies born to HIV positive women who received EMTCT services.	0	0	0	0
Number of HIV positive babies born to HIV positive women who not received EMTCT services.	0 (2 Children Identified born in 2016)	0	0	0

### Financial Achievement against annual budget allocation 2020

Financial Source	Description	Fund Allocation (LKR)	Fund Utilization (LKR)
<b>1. Capital Expenditure</b>			
<b>Ministry of Health</b>	Building construction	2,000,000.00	2,000,000.00
	DDG (PH)1	1,000,000.00	866,402.50
	Service Agreement	181,228.34	181,228.34
	<b>Sub total</b>	<b>3,181,228.34</b>	<b>3,047,630.84</b>
<b>UNFPA</b>	Consultative workshops, advocacy programmes, printing of publication	687,273.34	588,920.00
<b>WHO</b>	Consultative workshops, review meetings. training module	1,000,000.00	127,185.00

<b>GFATM</b>	Human Resources (HR)	37,012,025.00	35,337,961.85
	Travel related costs (TRC)	13,221,580.00	8,418,419.45
	External Professional services (EPS)	41,700,110.00	11,210,260.00
	Health Products - Non-Pharmaceuticals (HPNP)	26,956,165.00	20,405,540.70
	Health Products - Equipment (HPE)	74,635,660.00	37,889,644.65
	Procurement and Supply-Chain Management costs (PSM)	24,623,315.00	21,664,125.30
	Infrastructure (INF)	41,681,610.00	35,283,385.00
	Non-health equipment (NHE)	17,431,070.00	11,409,453.20
	Communication Material and Publications (CMP)	1,319,050.00	1,286,965.45
	Indirect and Overhead Costs	29,880,645.00	15,342,257.20
	<b>Sub total</b>	<b>308,461,230.00</b>	<b>198,248,012.80</b>
<b>Total Capital Expenditure</b>		<b>313,329,731.68</b>	<b>202,011,748.64</b>
<b>Financial Source</b>	<b>Description</b>	<b>Fund Allocation (LKR)</b>	<b>Fund Utilization (LKR)</b>
<b>2. Recurrent Expenditure</b>			
<b>Ministry of Health</b>	Personal emoluments (salaries etc.)	56,847,804.00	56,222,679.05
	Travelling expenses stationery and office requisites	185,669.00	185,669.00
	Fuel & supplies	1,177,298.00	375,236.11
	Maintenance expenditure	517,679.00	501,003.06
	Electricity and water	1,780,000.00	1,688,408.89
	Security, cleaning service and other	2,468,924.00	2,466,879.79
	Loan interest/transfers	197,201.00	197,200.72
	Antiretroviral drugs	42,058,827.95	42,058,827.95
	Other drugs (Non- Antiretroviral drugs)	5,794,077.15	5,794,077.15
	Medical Equipment/ Surgical Items	4,463,819.00	4,463,819.00
<b>Total Recurrent Expenditure</b>		<b>115,491,299.10</b>	<b>113,953,800.72</b>
<b>Grand Total (LKR)</b>		<b>428,821,030.78</b>	<b>315,965,549.36</b>

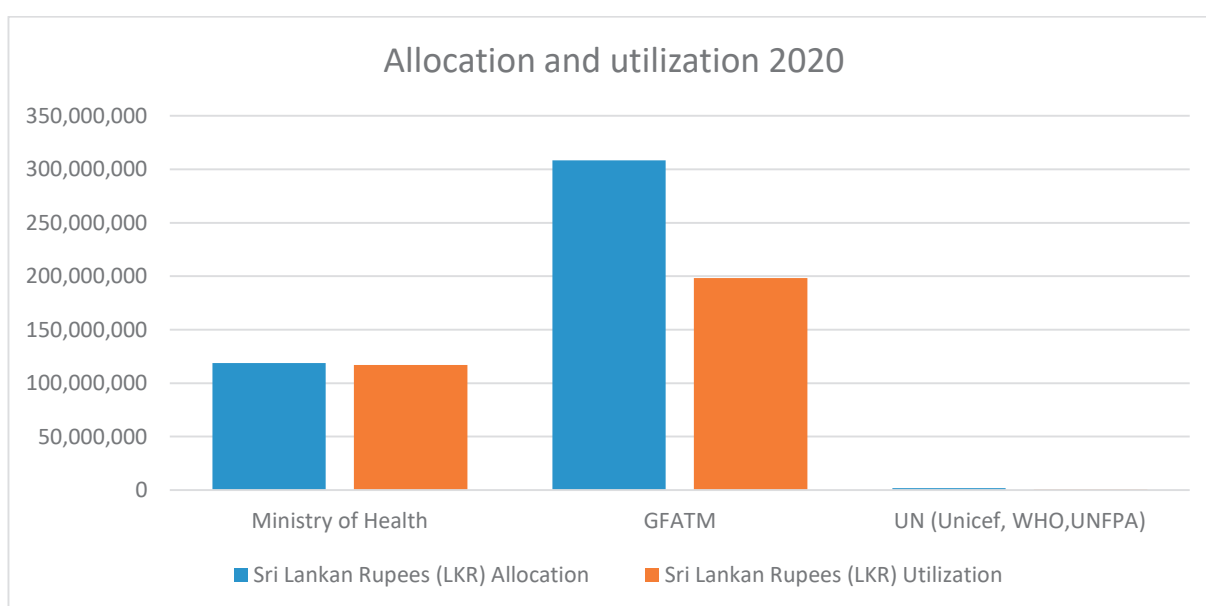
### Financial Achievement against annual budget allocation 2021

Financial Source	Description	Fund Allocation (LKR)	Fund Utilization (LKR)
<b>1. Capital Expenditure</b>			
<b>Ministry of Health</b>	Building construction	10,000,000.00	1,300,000.00
	DDG (PH)1	8,000,000.00	1,510,900.00

	Furniture & Office Equipments	1,222,160.00	1,222,160.00
	Construction	568,103.59	350,074.94
	Training Programme(GPS)	93,000.00	-
	<b>Sub total</b>	<b>19,883,263.59</b>	<b>4,383,134.94</b>
<b>UNFPA</b>	Consultative workshops, advocacy programmes, printing of publication	588,330.00	-
<b>WHO</b>	Consultative workshops, review meetings. training module	4,171,935.00	1,081,299.68
<b>GFATM</b>	Human Resources (HR)	48,969,047.29	19,018,674.29
	Travel related costs (TRC)	4,971,905.79	-
	External Professional services (EPS)	22,294,200.61	3,826,200.59
	Health Products - Non-Pharmaceuticals (HPNP)	29,576,338.74	2,276,053.44
	Health Products - Equipment (HPE)	57,539,414.78	14,072,191.46
	Procurement and Supply-Chain Management costs (PSM)	15,914,552.17	10,383,457.89
	Infrastructure (INF)	69,716,117.57	31,047,832.32
	Non-health equipment (NHE)	14,741,618.70	5,747,155.90
	Communication Material and Publications (CMP)	49,588,725.05	690,741.94
	Indirect and Overhead Costs	38,390,455.04	4,624,971.78
	<b>Sub total</b>	<b>351,702,375.74</b>	<b>91,687,279.61</b>
<b>Total Capital Expenditure</b>		<b>376,345,904.33</b>	<b>97,151,714.23</b>

Financial Source	Description	Fund Allocation (LKR)	Fund Utilization (LKR)
<b>2. Recurrent Expenditure</b>			
<b>Ministry of Health</b>	Personal Emoluments	168,727,563.00	81,042,012.30
	Travelling Expenses	700,000.00	270,729.00
	Supplies	6,600,000.00	2,154,206.95

Maintenance Expenditure	2,900,000.00	1,756,353.64
Services	18,550,000.00	8,189,662.58
Electricity & Water	7,500,000.00	3,033,432.22
Other	8,000,000.00	3,810,119.46
Transfers	700,000.00	347,010.96
<b>Total Recurrent Expenditure</b>	<b>115,491,299.10</b>	<b>113,953,800.72</b>
<b>Grand Total (LKR)</b>	<b>491,837,203.43</b>	<b>211,105,514.95</b>



#### 4.1.8 National Dengue Control Programme

##### Introduction

National Dengue Control Unit is the focal point for the dengue control programme in the Ministry of Health in Sri Lanka. It was established in the year 2005 as a decision taken by the Ministry of Health following the major DF/DHF outbreak in 2004. Initially it was functioned only as a Coordination Unit, but once dengue illness increasingly poses a socio-economic and public health burden, in 2011 it was upgraded to a directorate as National Dengue Control Unit (NDCU) with an annual budget allocation. Dengue illness continues to remain the major challenging public health problems in Sri Lanka. The Ministry of Health has implemented numerous activities to minimize the burden of dengue by early diagnosis and proactive case management during the past years, as reflected by the reduced case fatality rate.

### **Vision**

Sustainable Dengue prevention, control and management programme through comprehensive integrated approach.

### **Mission**

To optimize planning, prediction and early detection at all levels for better control and prevention of Dengue outbreaks through coordinated collaborative partnerships and sustainable efforts.

### **Objectives**

- To achieve incidence below 100/100,000 by 2023
- To decrease the case fatality rate due to Dengue to <0.1% by 2023

### **Achievements/ special events in 2020**

1. Achieving a case incidence of 145.17 in 2020 compared to the five year mean of 204.97 (2013-2018, excluding outbreak years of 2017 and 2019) and a low case fatality rate of 0.12 in 2020.
2. Eight special outbreak control programmes were conducted covering 432,115 premises including schools and construction sites in 180 High risk MOH areas in island wide. This has led to significant reduction in mosquito breeding in houses.
3. Allocations and equipment including multipara monitors, infusion pumps, syringe pumps, portable ultra sound scanners, haematocrits and blood pressure apparatus were provided to establish HDU in hospitals amounting to Rs. 75 million.

### **Special development activities planned for 2021**

1. Provision of HDU equipment to Base Hospitals and Hospitals above the level of Base Hospitals
2. Establishment of Regional Level Dengue Cells and Central and Regional Entomology Laboratories
3. Conduction of 2 mosquito control weeks and special mosquito control programmes

## 4.1.9 National Renal Disease Prevention and Research Unit

### Introduction

National Renal Disease Prevention and Research Unit (NRDPRU) was established in 2015 to facilitate the improvement of services provided to chronic kidney disease (CKD) patients.

### Vision

The center of excellence in providing technical and logistics support for preventive services, curative services and research on kidney diseases in South Asia Region

### Mission

To provide technical and logistics support to implement state of the art preventive care, curative care and research activities for kidney diseases in Sri Lanka

### Objectives

- To provide technical and logistics support for kidney disease preventive care
- To provide technical and logistics support for kidney disease curative care
- To provide technical and logistics support for kidney disease research activities
- To provide assistance to improve the quality of life and social care of chronic kidney disease patients

### Achievements/special events in 2020

Commencement of the National Peritoneal Dialysis programme

- Foundation stone laying for the Mihintale Palliative Care Center for CKD patients
- Receiving the eight mobile laboratories from China
- Introduction of the standards for Medical Grade RO plants
- Commencement of provision and maintenance of drinking water RO plants for CKD/CKDu affected areas
- Commencement of the activities of the Presidential Task Force for Prevention of CKD through NRDPRU
- Commencement of the activities of the National Kidney Fund through NRDPRU

### Performance trends for last 5 years

Activity	2016	2017	2018	2019	2020
Screening coverage	14312	7499	5243	8793	1939
GPS coverage	1018	4179	1781	644	1667
Drinking water RO plant construction	-	-	-	-	95
Medical RO plant construction	-	-	-	-	4
Foreign Training	-	9	21	19	-
NPD training programmes	-	-	-	-	6
Coverage of Sri Lanka Renal Registry	2	6	10	14	20

### Special development activities planned for 2021

1. Revision of Specification for RO plants
2. Introduction of point of care services for identified districts and hospitals
3. Development of Medical RO plant training to clinical staff
4. Collaborating the conduct of International Workshop on Peritoneal Dialysis
5. Development of the web site of NRDPRU



## 4.2 PROMOTION & PROTECTION OF HEALTH

### 4.2.1 Epidemiology Unit

#### Introduction

Epidemiology Unit of the Ministry of Health was established in 1959 with the assistance of the WHO. Since then it served the country as the National Centre for surveillance and control of communicable diseases.

#### Vision

Healthy people in a healthy Sri Lanka.

#### Mission

To promote health and quality of life by preventing and controlling disease, injury and disability.

#### Objectives

1. Responsible for surveillance, prevention and control of communicable diseases.
2. Disease control activities in disasters, emergencies and handles outbreak investigation and control.
3. Focal point for the National Immunization Programme (NIP).
4. Training medical postgraduates and health staff on activities related to communicable disease control and the National Immunization Programme.
5. International training centre on disease prevention and control and the childhood immunization programme.

#### Major achievements during the year 2020 and up to 30<sup>th</sup> June 2021

1. Epidemiology Unit as the leading technical body responsible for the communicable disease surveillance and control in the country, was able to successfully guide the Ministry of Health to control the Covid-19 wave 1<sup>st</sup>, 2<sup>nd</sup> and the ongoing 3<sup>rd</sup> wave.
2. Successfully managed to prepare the Covid-19 vaccination deployment plan for the country.
3. Provide technical inputs, logistic support to all the district to carry out the Covid-19 vaccination drive.
4. Continued childhood immunization programme in spite of Covid-19 pandemic situation in the country.
5. Successfully launched and monitoring the ongoing Covid-19 vaccination programme.

## Ongoing development project Details

	Project Description	Total Estimate (LKR) Mn	Physical progress as at 31-12-2021	Financial Progress as at 31-12-2020 (LKR)Mn
<b>1</b>	<b>GOSL</b>			
<b>1.1</b>	Control & Preventing Leptospirosis Disease at MOH Level		These activities are scheduled to do in 2020. Due to the covid 19 pandemic it was not possible to complete even up to date. These activities are scheduled to do in latter half of 2021 if situation improves or to do in 2022.	0
<b>1.2</b>	Educating the Community is of great importance for controlling & preventing Leptospirosis	4		0
<b>1.3</b>	Preparation and printing of IEC material - Posters and Leaflets in Sinhala and Tamil	1	100%	0.75
<b>2</b>	<b>WHO - Assessment of Expanded Programme on Immunization, Vaccine Preventable Disease surveillance, and causality assessment of AEFI to ensure access to quality and safety vaccines</b>			
<b>2.1</b>	EPI & VPD reviews, training and guidance for the health staff for improvement and sustaining high and equitable immunization coverage		Planned Programme 37, Completed Programme 5 – 13%	0.38
<b>2.2</b>	District reviews and awareness programmes on outbreak preparedness, response and strengthening communicable disease surveillance		Planned Programme 4, Completed Programme 0 -0%	0
<b>2.3</b>	District reviews on surveillance strengthening and awareness programmes on VPD outbreak preparedness and response plans in elimination of VPD	2	Planned Programme 5, Completed Programme 2 – 29%	0.14
<b>2.4</b>	Review and awareness programmes on AFP, Measles, Rubella, CRS in		Planned Programme 5, Completed Programme 0 – 0%	0

	hospitals and other institutions			
2.5	Consultative meetings on AFP, Measles, Rubella, CRS Programmes in hospitals and other institutions		Planned Programme 3, Completed Programme 0 - 0%	0
2.6	AEFI surveillance district reviews		Planned Programme 4, Completed Programme 0 - 0%	0
2.7	AEFI causality assessment expert committee reviews and severe AEFI case investigation		Planned Programme 4, Completed Programme 0 - 0%	0
2.8	National certification committee for Polio Eradication and Measles/ Rubella, CRS Elimination (NCCPE & MRCE)		Planned Programme 3, Completed Programme 2 - 66%	0.03
2.9	Consultative meeting with National Polio Expert Committee (NPEC)		Planned Programme 3, Completed Programme 0 - 0%	0
2.10	Consultative meetings for public health staff on middle level management of National Immunization Programme		Planned Programme 4, Completed Programme 0 - 0%	0
2.11	Field Epidemiology training programme		Planned Programme 1, Completed Programme 0 - 0%	0
<b>3</b>	<b>WHO - Capacity Building and Review of Dengue Surveillance and Clinical Management Activities</b>			
3.1	Biennial National Dengue Review Meetings	0.17	These activities are scheduled to do in 2020. Due to the covid 19 pandemic it was not possible to complete even up to date. These activities are scheduled to do in latter half of 2021 if situation improves or to do in 2022.	0
3.2	Review and Capacity Building of Clinical staff on Management of DF/DHF	0.37		0
3.3	Review Meeting of Hospital staff on DF/ DHF Disease Surveillance	0.20		0
<b>4</b>	<b>WHO - Conduct review meetings and consultative meetings to strengthen leptospirosis and leishmaniasis control and prevention in the country</b>			
4.1	Conduct review meetings on leptospirosis in high-risk districts	0.41	These activities are scheduled to do in 2020. Due to the covid 19 pandemic it was not possible to	0

4.2	Conduct consultative meetings with the Guideline development Committee on Leptospirosis in revising the management guidelines on Leptospirosis	0.16	complete even up to date. These activities are scheduled to do in latter half of 2021 if situation improves or to do in 2022.	0
4.3	Conduct review meetings on leishmaniasis in high-risk districts	0.37		0
<b>5</b>	<b>WHO - Conduct Hepatitis B Sero-Survey and Consultative meetings to develop National Policy on viral Hepatitis</b>			
5.1	Conduct study on viral hepatitis B Seroprevalence in Sri Lanka 2020	7.5	These activities are scheduled to do in 2020. Due to the covid 19 pandemic it was not possible to complete even up to date. These activities are scheduled to do in latter half of 2021 if situation improves or to do in 2022.	0
5.2	Conduct Consultative meetings to develop National Policy on control prevention of viral hepatitis	0.12		0
<b>6</b>	<b>GAVI(HPV) VIG Grant</b>			
6.1	Strengthen of Vaccine cold chain supplies of Fridge tags (250)	5.5	These activities are scheduled to do in 2020. Due to the covid 19 pandemic it was not possible to complete even up to date. These activities are scheduled to do in latter half of 2021 if situation improves or to do in 2022.	0
6.2	External audit of GAVI grant	0.2		0
<b>7</b>	<b>GOSL Disaster</b>			
7.1	Improve public and staff awareness	2	These activities are scheduled to do in 2020. Due to the covid 19 pandemic it was not possible to complete even up to date. These activities are scheduled to do in latter half of 2021 if situation improves or to do in 2022.	0
7.2	Testing laboratory samples collected during field investigations through WHO accredited regional/Global laboratory	0.5		0
7.3	Conducting outbreak investigations at the field level	0.5		0
<b>8</b>	<b>GOSL IT</b>			
8.1	Improving and maintenance of IT facilities in the Epidemiology unit	1	These activities are scheduled to do in 2020. Due to the covid 19 pandemic it was not possible to	0

			complete even up to date. These activities are scheduled to do in latter half of 2021 if situation improves or to do in 2022.	
--	--	--	---	--

### Last 5-year Performance trend

### Food and Water-borne disease trend in the country

Food and Water-borne disease trend in the country - Last 5 years			
Year	Viral Hepatitis	Dysentery	Typhoid
2016	884	2932	548
2017	321	1734	339
2018	294	1756	304
2019	352	1699	190
2020	245	875	138

### Cases Incidence, Deaths and Case Fatality Rate (CFR) of Dengue Fever (DF)/ Dengue Hemorrhagic Fever (DHF), Leptospirosis and Encephalitis 1996-2019

Year	DF/DHF				Leptospirosis				Encephalitis			
	Cases		Deaths	CFR (%)	Cases		Deaths	CFR (%)	Cases		Deaths	CFR (%)
	No	Incidence Rate/100,000 population			No	Incidence Rate/100,000 population			No	Incidence Rate/100,000 population		
2015	29777	142	56	0.19	4455	21	71	1.6	203	1	17	8.3
2016	55150	263	97	0.17	4018	18.9	62	1.5	238	1.1	14	5.8
2017	186101	866	440	0.24	3629	16.9	52	1.4	274	1.2	18	6.6

2018	51569	241.8	58	0.11	5257	24.6	108	2	208	0.95	17	8.1
2019	105049	489.8	157	0.15	6021	27.49	120	2.0	239	1.09	14	6.1

### Special development activities planned for 2021

- Planned to conduct a study titled “Viral Hepatitis B Sero-prevalence Survey in Sri Lanka – 2021”
- Planned to introduce a new web-based system to collect National Immunization Data

Both the above activities had to be postponed due to the ongoing Covid-19 pandemic situation.

## 4.2.2 Maternal and Child Health Programme

### Introduction

Family Health Bureau is the central organization of the Ministry of Health responsible for policy planning, coordination, monitoring and evaluation of reproductive health, maternal health, newborn health, youth health, child health, family planning and well woman clinic programmes within the country.

In this role the Bureau provides necessary guidance and direction for effective implementation of programmes at the periphery and implements special projects funded by international agencies. FHB lays foundation for practice of Maternal and Child Health services based on scientific evidence for optimizing service delivery in facing present and future challenges. FHB is mainly funded by the Government of Sri Lanka. However, a proportion of the total budgetary requirement is supplemented by the external resources (UN agencies) as various project activities.

Sri Lanka is committed to achieve Sustainable Development Goals by the year 2030. Family Health Bureau being the focal agency responsible for Maternal & child Health services, prepared action plan to achieve goal 3 - (Good Health and well-being) while monitoring its achievements at national and district levels very closely.

### **Vision**

A Sri Lankan nation that has optimized the quality of life and health potential of all women, children and their families.

### **Mission**

To contribute to the attainment of highest possible levels of health of all women, children, and families through provision of comprehensive, sustainable, equitable, and quality maternal and child health services in a supportive, culturally acceptable and family friendly setting.

### **Policy Goals**

**Goal 1** - Promote health of women and their partners to enter pregnancy in optimal health, and to maintain it throughout the life course.

**Goal 2** - Ensure a safe outcome for both mother and newborn through provision of quality care during pregnancy, delivery, and post-partum period.

**Goal 3** - Ensure reduction of perinatal and neonatal morbidity and mortality through provision of quality care.

**Goal 4** - Enable all children under five years of age to survive and reach their full potential for growth and development through provision of optimal care.

**Goal 5** - Ensure that children aged 5 to 9 years and adolescents realize their full potential in growth and development in a conducive and resourceful physical and psychosocial environment.

**Goal 6** - Enable children with special needs to optimally develop their mental, physical and social capacities to function as productive members of society.

**Goal 7** - Enable all couples to have a desired number of children with optimal spacing whilst preventing unintended pregnancies.

**Goal 8** - To promote reproductive health of men and women assuring gender equity and equality.

**Goal 9** - Ensure that National, Provincial, District and Divisional Level Health managers are responsive and accountable for provision of high quality MCH services.

**Goal 10** - Ensure effective monitoring and evaluation of MCH Programme that would generate quality information to support decision making.

**Goal 11** - Promote research for policy and practice in MCH.

**Goal 12** - Ensure sustainable conducive behaviors among individuals, families and communities to promote Maternal and Child Health.

### **Achievements and Special events in 2020/2021 of FHB**

The activities conducted during last year by Family Health Bureau (FHB) contributed to a significant improvement in Maternal and Child Health activities and achieved its targets. Sixteen units have been established in the bureau and each unit has its own roles and responsibilities.

### **Family Planning programme**

The goal of National Family Planning Programme is to enable all couples in union to have a desired number of children with optimal spacing whilst preventing unintended pregnancies. This programme is coordinated by the FP unit of the FHB.

### **National Family Planning Day 2020**

National Family Planning Day was celebrated at the Health Promotion Bureau on the theme of “A happy family with optimal birth spacing” to stress the importance of birth spacing. The Chief Guest was Dr Susie Perera, Deputy Director General Public Health Services II. Intersectoral collaboration was highlighted at the event. The event saw a ceremonial launch of a family planning video and was followed up by a Press Conference.



*Uninterrupted delivery of family planning services*

In order to provide uninterrupted family planning services, nearly Rs. 241 million of contraceptive commodities were procured and distributed to all districts. Therefore, a modern Contraceptive Prevalence Rate (mCPR) of 57% was achieved even though the country was affected by the Covid pandemic. The demand satisfied by modern contraceptive methods was 79.5%.

Equipment for family planning clinics were procured with the support of UNFPA (Promises Project), and distributed to 30 MOHs in Central, Southern, Eastern and Northern Provinces. The availability of FP equipment, enhanced services in the FP clinics and contributed to the



overall modern Contraceptive Prevalence Rate (mCPR) in the four provinces. The mCPR in the Central, Southern, Eastern and Northern Provinces were 61.1%, 60.3%, 55.5% and 56.6% respectively.

### Conducting capacity building programmes

To build the capacity of service providers, a 3-day workshop for Training of Trainers on Reproductive Health for 10 Medical Officers was conducted in September 2020.

A 2-day workshop for Training of Trainers on Reproductive Health for 15 Nursing Tutors, Public Health Nursing Sisters and Nursing Officers was conducted in August 2020.



### Development of IEC materials on FP and Subfertility for Health Staff and General Public

The Family Planning Unit developed a video about the Intra uterine device (IUD) both in Sinhala and Tamil with English translations to improve the knowledge on IUDs among health staff as well as the general public.

In order to revise knowledge on Contraceptives and Subfertility, the Family Planning Unit developed a set of Flash Cards, printed limited quantities. The flash cards were distributed among the health staff in selected MOH offices.

For the first time, the Family Planning Unit initiated the development of a mobile application on contraceptive methods and service availability for the general public.

### Family Planning performances from 2016 -2020

Performance indicator	2016	2017	2018	2019	2020
<b>Contraceptive Prevalence Rate (Any method) %</b>	66.4	66.6	67	66.9	66
<b>Contraceptive Prevalence Rate (modern methods) %</b>	57	57.3	57.9	57.9	57
<b>Couples with unmet need for contraception %</b>	6.2	6.3	6	5.8	5.7
<b>Demand satisfied by modern contraceptive methods (%)</b>	78.5	78.6	79.3	79.6	79.5

\* Source: eRHMS - FHB

## Gender and Women's Health programme

- Gender and Women's Health Unit of the FHB is the nodal agency at the national level responsible for addressing GBV in the health sector.
- The programmes implemented by this unit focus mainly on prevention of GBV, provision of care for survivors of GBV and activities and events set to create an enabling environment to strengthen the health sector response to GBV.
- To overcome the challenges faced by the health care providers due to the inadequacy of knowledge and skills on the subject and the uncertainty on how to respond to a survivor of GBV effectively, while conforming to the ethical and legal standards,
- Gender and Women's Health Unit of FHB developed "Health Sector Response to GBV: National Guideline and Standard Operating Procedures for First Contact Health Care Providers in Sri Lanka" in 2019. As the second phase of implementation of these standards, Provincial level Training of Trainers workshops for Supervising Public Health staff (MOOH/ AMOOH, PHNSs, SPHII, SPHMM) of Anuradhapura and Polonnaruwa districts were conducted by FHB.
- But unfortunately, the vulnerability of the survivors who lived with GBV/ Domestic Violence (DV) was aggravated and the incidents, frequency, and severity of DV increased during the Covid pandemic period.

### ***Guidance for health care providers***

Then the overwhelming need of strengthening the response to prevent DV and to manage survivors of DV during the COVID-19 pandemic period was identified and the following activities were carried out.

- The National Supplementary Guideline was developed for the staff of "Mithuru Piyasa": Hospital-based GBV/ DV care centres to be adopted during COVID-19 Pandemic and circulated to all the relevant stakeholders.

### ***Social media campaign to create awareness***

- Targeting the general public, positive inspirational posts aiming reinforcement of family wellbeing and encouraging the families who utilize the opportunity of travel restrictions to increase family wellbeing were created and posted through social media



- Targeting the general public, Educational and awareness posts regarding available services for DV survivors were created and posted through social media

**Care for safety homes**

- “Dignity kits” and “Baby kits” were distributed to two safety homes in Kandy and Wattala areas
- A supplementary guideline for safety homes on the provision of shelter for GBV survivors during the COVID-19 period was developed and circulated
- An electronic media message regarding the island-wide service availability for DV survivors was developed



- An electronic media message targeting the prevention of GBV was developed



- A short film: Sonduru Kedella/ Happy Family was developed targeting the enhancement of family wellbeing and happiness through violence-free relationships



### **Hotline for emotional support**

- A hot-line service was temporarily established to provide basic emotional support for DV survivors

### **Oral Health Programme**

Oral Health Unit (OHU) of the FHB is responsible for provision of essential oral health care services through existing maternal and child health programme. This mainly includes School Dental programme and oral health programme for the pregnant women.

Oral health unit with collaboration of Evaluation unit of FHB successfully launched eRHMIS system for School Dental Service and conducted island wide training programmes to RDSs, SSDTs, and Development officers to facilitate the implementation of the programme.

### **Annual work performance of the School Dental Service 2014 - 2019**

Year	No. of SDT	No. of students per SDT	Percentage of caries				Percentage of calculus			Screened %	Coverage %
			Grade 1	Grade 4	Grade 4 <sup>1</sup>	Grade 7 <sup>1</sup>	Grade 1	Grade 4	Grade 7		
2015	383	3035	54%	55%	9%	19%	2%	13%	18%	75%	66%
2016	382	3163	56%	57%	9%	18%	1%	14%	18%	73%	63%

<b>2017</b>	393	3278	56%	56%	7%	15%	1%	13%	17%	77%	67%
<b>2018</b>	369	3326	57%	58%	9%	17%	1%	13%	18%	76%	68%
<b>2019</b>	365	3311	57%	58%	9%	18%	1%	13%	17%	79%	70%
<b>2020</b>	362	2627	57.6%	59.4%	6.8%	17.3%	1%	13%	18%	40%	40%

Source: DHUFHB, RHMIS

*'Permanent teeth, Percentage of children screened out of the target group*

*\* Percentage of children who are healthy or whose treatment has been completed out of the target group*

## Child Nutrition Programme

Considering the Covid -19 pandemic which significantly impacted negatively on in-service training programmes of health staff which are essential to improve quality of services provided, development of an online training package for capacity building of health staff on Growth Monitoring and Infant and Young Child Feeding (IYCF) Counseling was initiated with UNICEF support.

Formative research on IYCF to identify drivers and barriers on feeding practices and child nutrition was initiated to provide evidence to support the development of strategies to strengthen and streamline child nutrition component of the maternal and child health programme.

### *Nutritional Indicators of the Children under five years from 2016-2020*

Nutrition Indicator (Children under five years)	2016	2017	2018	2019	2020
<b>Underweight</b>	15.6	14.5	14.3	14.0	13.1
<b>Stunting</b>	9.2	9.0	8.9	8.4	8.2
<b>Wasting</b>	11.3	11.1	10.2	9.9	8.6
<b>Overweight</b>	0.5	0.5	0.6	0.6	0.8

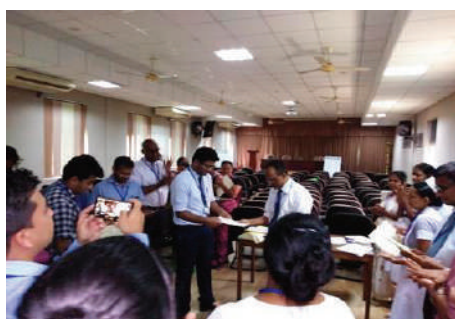
## Maternal Care Programme

During the current year following activities were implemented to strengthen care for pregnant women.

- Organizing healthcare for pregnant prison inmates as joint activity along with the NSACP. A screening and a checklist prepared by NSACP to be used during history taking. Local area Public Health Midwife (PHM) to visit the prison, register and issue pregnancy record and provide antenatal care. Clinic care should be provided at the closest specialist hospital.
- Development of guidelines on “Use of misoprostol in Obstetrics and Gynaecology” and “Hyperglycaemia in pregnancy”.
- Obstetric BHTs (H1252) were developed by Family Health Bureau in collaboration with Sri Lanka College of Obstetricians and Gynaecologists, to achieve uniformity of data recording and to streamline the information flow and piloted in selected hospitals in Western and Southern Provinces of Sri Lanka.
- Revision of maternal care package: The existing maternal care package was introduced in 2011, and some of the content is outdated. Also, there is a need for a guide for curative sector staff on management of the normal pregnancy. In order to fulfil the above gap, a consultant was commissioned by UNICEF for draft a new guide and reviewed by relevant stakeholders. This process was overseen by the TAC.
- Home delivery investigation: There have been frequent incidences reported by the field health staff on refusal of maternal and child health services by an organized group of individuals in some districts in Sri Lanka. This issue was considered as a severe risk for health of pregnant women and children, which can cause deaths, disabilities and severe illness among them. A field home delivery investigation format was developed and introduced to MOO/MCH during the annual review.

### ***Capacity building of health staff***

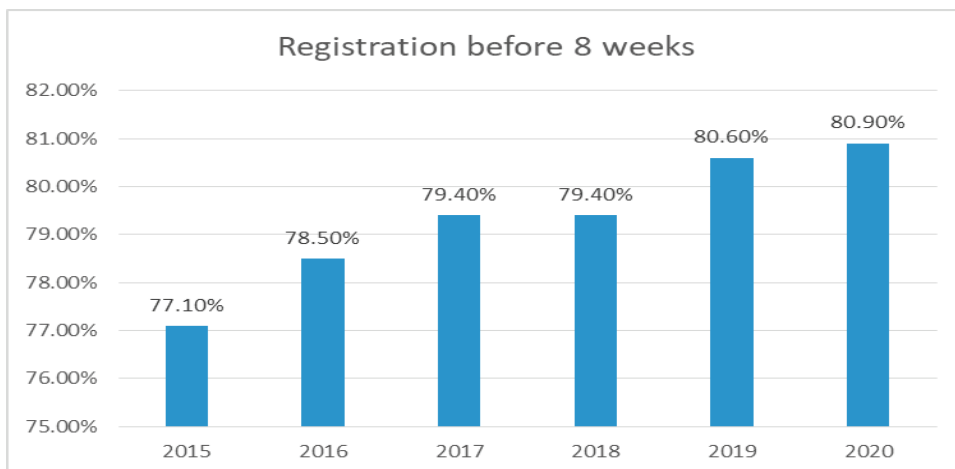
- An EMOC training program was held at FHB with 38 participants, which included 11 Medical Officers and PG trainees, 20 Nursing Officers and 07 midwives attached to obstetric units in 5 of hospitals.



**COVID 19 related activities**

- Interim guidelines for field and hospitals on maternal and childcare services during COVID 19 outbreaks, guidelines on antenatal care services at quarantine centers and maintaining MCH services during the COVID pandemic were developed, field staffs were instructed regarding notification of pregnant women admitted to and discharged from quarantine centres and procurement of PPE and home delivery kits for PHMs were carried out.
- IEC material was prepared on maternal danger signals include videos and social media posts in collaboration with Health Promotion Bureau. Further, several media briefings and interviews were carried out to educate public and other relevant stakeholders.
- A survey was carried out to gather details about the facilities available with regard to High Dependency Units in maternity wards of specialist hospitals.  
The data received indicate that there is a significant gap in the available and required HDU items and the data was summarized and forwarded to the Ministry of Health to facilitate distribution of necessary equipment to relevant hospitals.
- Family Health Bureau was able to provide facilities to **establish ten units of HDUs** in selected five hospitals utilizing GoSL funds.
- As part of the standard package of maternal care offered to pregnant women since the time of registration at local clinic, all pregnant women are provided with micronutrient supplementation, (iron, folic acid, vitamin C & calcium). The procurement and distribution of these commodities is done by Medical Supplies Division under the technical guidance of Family Health Bureau.

**Registration of pregnant women before 8 weeks of POA from 2015 - 2020**



## Adolescent and Youth Health Programme

Ensure that adolescents (10-19 years) and youth (15-24 years) realize their full potential in growth and development in a conducive and resourceful physical and psychosocial environment.

In the first quarter of 2020 initiated an innovative youth project to uplift adolescent and youth health. Several workshops were organized to develop the implementation plan, monitoring and evaluation plans and budgetary allocations for each project.

The costing of the strategic plan on Adolescent Sexual and Reproductive Health for the next five years has been conducted. Four consultative meetings and workshops were carried out to obtain expert views and suggestions.

Two training of trainer programmes on adolescent and youth health were conducted within first quarter and the third quarter for health care providers and youth headers.

Several important initiatives were implemented to improve health care for adolescents and youth. Developed several video clips for social media targeting youth staying at home during home-bound period due to Covid-19.

A short survey was carried out to identify the needs among youth during the home-bound period through telephone. This survey revealed that most of the youth need to be supported to initiate income

generation activities. Based on the findings of the survey several income generation online links were added to the 'Yowun Piyasa' web site. With relevant experts of the field conducted Weber series related to IT sectors such as Adobe Photoshop, illustrator, Canva etc. Further, in order to cater youth needs jointly worked with University of Moratuwa to develop social media-based platform to raise awareness on self-employment skills related to designing.

Ten online training programmes based on case scenarios on Adolescent Sexual and Reproductive Health for youth training instructors of vocational training institutions were conducted. Further nine online training programmes on Adolescent Sexual and Reproductive Health for officers at urban settlement development authority working with adolescents & youth were conducted.

Nine new 'Yowun Piyasa' centers with necessary furniture and equipment were established.

Development of video clips to enhance the Adolescent and youth health have been initiated. These videos have been developed in all three languages. Furthermore, these video clips



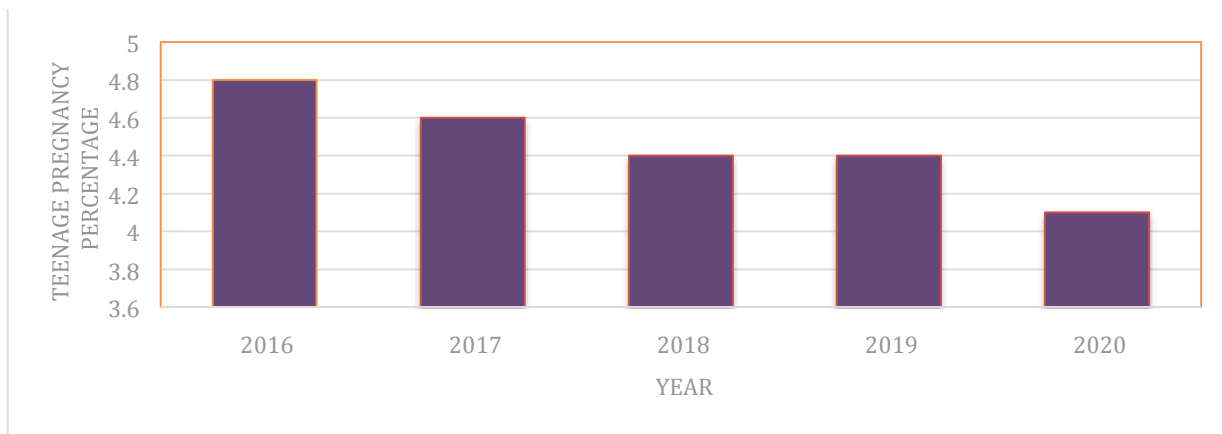


would be given to master trainers to use for the adolescent and youth health trainings, thereby improving the adolescent and youth health.



**Video-based trainer package on adolescent and youth health**

**Teenage pregnancy percentage over 2016-2020**



**Special development activities planned for 2021**

Planned to establish six new MOH based ‘Yowun Piyasa’ centers. It is planned to upgrade web site on youth health ([www.yowunpiyasa.lk](http://www.yowunpiyasa.lk)) making it more youth friendly. Ten one day refresher trainings on adolescent and youth health will be conducted for ten MOH areas where ‘Yowun Piyasa’ centers were newly established. Two skill development workshops have been planned for youth leaders and experience sharing workshop will be conducted for youth leaders, health, and non-health stakeholders on youth health initiatives by the youth and field health staff.

## Maternal & Child Morbidity & Mortality Surveillance Programme

- Review of maternal deaths reported in the year 2019**

Data from all sources were compiled to develop case scenarios for the maternal deaths reported in the year 2019 and national desk reviews were conducted for 26 health regions (100%) with the participation of related professionals. National Maternal Mortality Reviews at the district level (in physical modality) were conducted for 25 health regions despite the challenge of Covid19 pandemic situation. All the reported maternal deaths were reviewed (100%) and national & district maternal mortality ratios were published. Service gaps were identified and recommendations to improve system were documented in minutes for all the districts (100%) have been sent.

The total number of maternal deaths have been dropped to 93 from 105 (2018). National Maternal Mortality Ratio (MMR) has been declined to 29.2 from 32.0 (2018) per 100,000 live births.

Figure 3: Number of Maternal Deaths (2001 – 2019)

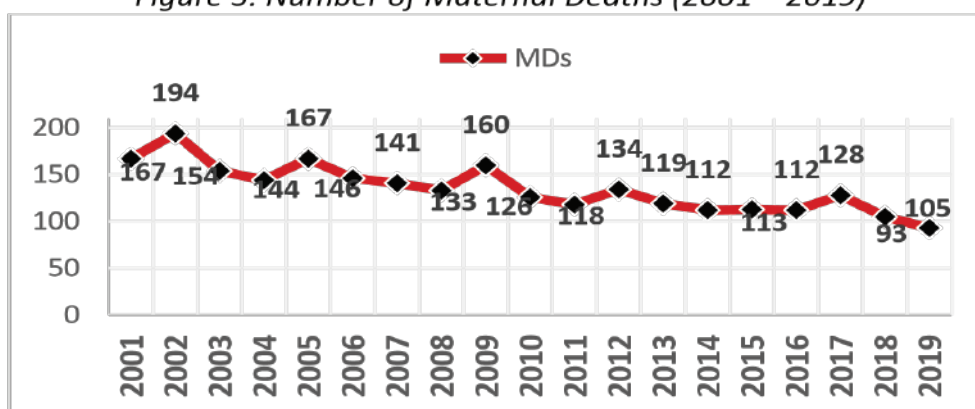
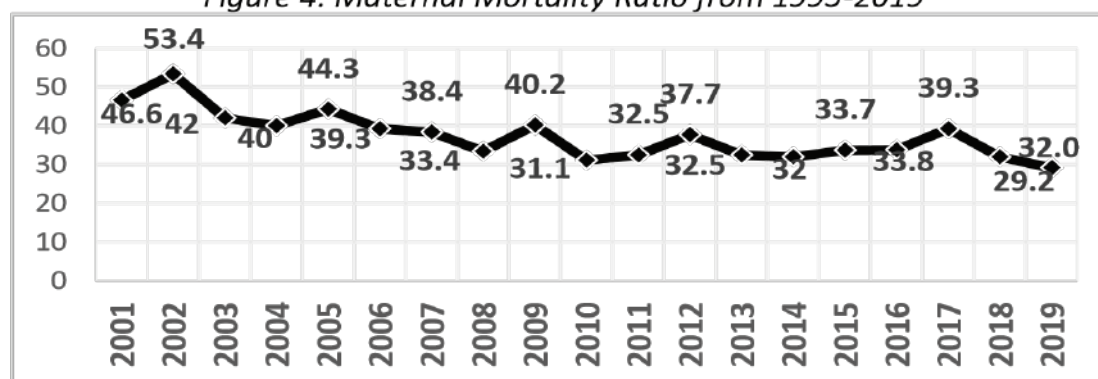


Figure 4: Maternal Mortality Ratio from 1995-2019



Source: Maternal & Child Morbidity & Mortality Surveillance Unit - Family Health Bureau



- ***Surveillance of Maternal Deaths in the year 2020***

Continuous close surveillance & response mechanism was maintained for the maternal deaths in the year 2020 despite the Covid19 pandemic situation. Immediate Response to Maternal Deaths meetings chaired by Director General of Health Services were conducted for 8 deaths with issues for system improvements. A review of the maternal deaths occurred during the lockdown period of the first wave of Covid19 was conducted, issues were identified and immediate corrective actions were undertaken.



*Desk reviews*



*Immediate Response to Maternal Deaths meetings*

- ***Coordinating logistics for Covid19 activities***

MCMMS unit actively contributed to facilitate provision of surgical face masks and other personal protective equipment through a donation from Sri Lanka China Society.



- ***Birth Defects and Perinatal Deaths Surveillance***

A web-based national birth defects and perinatal deaths surveillance system was launched at the beginning of the year covering all specialized hospitals (n=107) in the country. All stillbirths and early neonatal deaths occurring in these hospitals are being entered into the system.

The unit is triangulating stillbirths reported from different sources to compile a national profile of stillbirths for the year 2020

- ***Infant Mortality Surveillance***

The country-wide surveillance & response system on infant deaths was further strengthened during the year 2020. A total of 2258 infant deaths were reported from both field and hospital levels in the year. The system showed a drawback in reporting and review of infant deaths due to the ongoing Covid19 pandemic situation and travel restrictions.

- ***Zika-related microcephaly study***

The prospective study on microcephaly started in the year 2018 was continued successfully in the two premier women hospitals – Castle Street Hospital for Women and De Soysa Hospital for Women. A total of 07 cases of microcephaly were recruited in the year 2020.

- ***The 9th International Conference on Birth Defects and Disabilities in Developing World (ICBD2020)***

Recognizing the need to build capacity in lower-income countries for the prevention of birth defects and preterm birth and care of those affected, the Family Health Bureau in collaboration with Sri Lanka Medical Association (SLMA) hosted the 9th International Conference on Birth Defects and Disabilities in Developing World from 23<sup>rd</sup> to 26<sup>th</sup> February

2020 at the Hotel Cinnamon Grand in Colombo. The conference was co-organized with support from the Health Promotion Bureau of the Ministry of Health; the World Health Organization; March of Dimes, USA; the Centers for Disease Control and Prevention, USA; the Human Genetics Unit, Faculty of Medicine, University of Colombo; many professional associations in Sri Lanka including the Sri Lanka College of Pediatricians and College of Community Physicians of Sri Lanka.

The theme of this Conference was "Health for All: Accelerate Efforts for Birth Defects Prevention and Care". This theme aligned with the Sustainable Development Goal (SDG) # 3 and its aim to ensure Universal Health Coverage - health for all people, everywhere in the world regardless of their power to pay or speak for themselves.



The opening ceremony was held on 23<sup>rd</sup> February with the presence of the Minister of Health and Indigenous Medicine Hon Mrs. Pavithra Wanniarachchi.

ICBD 2020 offered a high-quality mix of sessions and unique networking opportunities. The technical program was rich with 7 plenary sessions with invited speakers, 15 simultaneous symposia including symposia featuring oral presentations and 10 poster sessions. More than 450 attendees from 36 countries attended this conference. They were from various disciplines and fields including healthcare professionals, policy makers, researchers, volunteers and students representing healthcare service organizations, academic institutions, governments, international organizations and civil society organizations.

The closing ceremony was graced by Mrs. Shiranthi Rajapakse and added vividity to the occasion by participant children with disabilities.



It has been a decade after the Sixty-third World Health Assembly Resolution WHA63.17 Agenda item 11.7 (2010) on Birth Defects. There were no or little efforts being envisaged by the key players on reviewing the progress in implementing this resolution or any efforts to add momentum to the Birth defects care and prevention. As such, the participants of ICBD2020 formulated the Colombo ***“Declaration on Birth Defects Care and Prevention”*** pressurizing World Health Organization and other lead agencies to revisit and review the actions focused on the subject.

### Special development activities planned for 2021

- Analysis of maternal suicides 2002 – 2019
- Analysis of maternal autopsies 2010 - 2019
- Compilation of the draft report on maternal deaths 2014 - 2018
- Comprehensive analysis of infant mortality data for the years 2017 - 2019
- Tightened surveillance of infant deaths with close central level monitoring
- Quarterly Desk review of infant deaths
- Development of management guidelines on common childhood illnesses
- Review of injury-related child deaths throughout the country

### Well Woman Programme

- ***HPV DNA Program for Cervical Cancer Screening in Sri Lanka***

HPV DNA, a PCR test, was introduced as a primary screening method for cervical cancer and precancer detection in the national cervical cancer screening program. It was planned to cover the target population of women aged 35 and 45 years according to WHO guidelines, and as recommendation of the Technical Advisory Committee.

High detection rate of cervical lesions, a lengthy screening interval compared to pap screening, reducing the workload of the cyto-screeners and Histopathologists and self-

collection of samples are the advantages of the HPV DNA screening. Furthermore, test capacity of one machine is about 200 samples a day and about 50,000 samples annually as well.

- ***Where we are now and the way forward***

Following the pilot project in Kalutara, in 2020 a limited number of HPV DNA test kits were distributed to 8 districts including Colombo, Gampaha, Kandy, Matale, Ratnapura, Monaragala, Anuradhapura and Batticaloa.

Currently purchasing of a limited number of test kits and reagents is funded through the World Bank. The World Bank funding is available to purchase limited number of test kits until 2023. Ministry of Health has approved use of GOSL funding for procurement of test kits from 2022 onwards.



Following lengthy discussions, it was decided in the latter half of 2020 to install a new HPV A DNA machine was installed in Feb 2021 at Teaching Hospital Anuradhapura in North Central Province (courtesy Rotary club).

HPV DNA program needs to be treated as a priority as “Women’s Health is a Nation’s Wealth”.

### **Special development activities planned for 2021**

It is planned to cover the entire cohort of 35-year-old clients with HPV DNA as the primary cervical cancer screening test in a stepwise manner. In order to achieve this objective government is expected to invest Rs 280 million annually.

In addition, “Liquid Based Cytology” is expected to be introduced as a cytology test (to see cellular changes in the cervix) for those that become positive for HPV.

### **Intranatal and Newborn Care programme**

Intranatal and newborn care unit of the Family Health Bureau is responsible for improving the health services during childbirth and newborn care with the aim of reducing maternal and neonatal morbidity and mortality.

National guideline for Newborn Care (three volumes) has been updated, printed and disseminated to the healthcare institutions.



The main focus of the year was to strengthen maternal and newborn care services for mothers and newborns suspected/ confirmed of COVID-19 while sustaining essential services.

- Guidelines to establish and function isolation units for maternal and newborn care in hospitals, have been developed and issued in collaboration with the Sri Lanka College of Obstetricians and Sri Lanka College of Paediatricians.
- Establish Colombo East Base Hospital and Base Hospital Homagama as designated hospitals for maternal and newborn care
- Well-equipped neonatal intensive care unit (NICU) was established in Colombo East Base Hospital (Mulleriyawa)



***Advocacy for improving human resources and facilities for NICU at Colombo East Base Hospital and designated hospitals for pregnant mothers with COVID-19***

- Supply of essential equipment for labor rooms, isolation units and neonatal units of hospitals was carried out through procurement of essential equipment and supply of equipment via Bio Medical Engineering division of Ministry of Health.



- Donor funds were mobilized to obtain essential medical equipment and items for pregnant mothers and newborns (**UNICEF** – neonatal ventilators, CPAP machines, infant incubators, infant warmers, labor room beds, infusion pumps, syringe pumps, CTG, multipara-monitors, maternity kits with baby nets, **HSEP**- 20 infant warmers, 20 adult suckers, 10 phototherapy units, 10 neonatal , 20 CTG machines, **UNFPA** – infant warmers, delivery beds, dignity kits, PPE s, COVID-19 specific kit for females, COVID-19 specific kit with face masks for pregnant mothers, infusion pumps, **other donations** – 01 ventilator, hand held dopplers, CTG, infusion pumps, PPEs)



- Observation visits were made to hospitals to identify issues, motivate health staff and assist in organizing services.
- Continuous dialogue with district public health teams, hospitals and other professionals were maintained to sustain quality services.

Two Training of Trainers programmes on Breastfeeding Counselling and Essential Newborn Care were conducted for Registrars in Paediatrics. A total of 55 registrars were trained.



Participant training on Emergency Obstetric Care at Family Health Bureau and training on Essential Newborn Care for hospital and public health staff were conducted.



*Training of public health staff on Essential Newborn Care*

### **Childcare, Development and Special needs programme**

Inauguration of the project “Include- Colombo” and the opening ceremony of the Regional Child Development Intervention Centre (CDICreg) Maligawatta

Although Child Development programme was incorporated into Child Care Programme of the country in 2002, it was focused mainly on the development promotion activities of all the children under 5 years of age.

Inclusive Early Childhood Development Program or project “IncluDe” was designed in order to fill this gap with the objectives of promoting development of all the children under 5 years of age, screening them for developmental delays and disabilities and providing comprehensive services for children with special needs. The first pilot project of this programme was launched on 31<sup>st</sup> of July 2020 with the collaboration of the Regional Directorate of Colombo District.

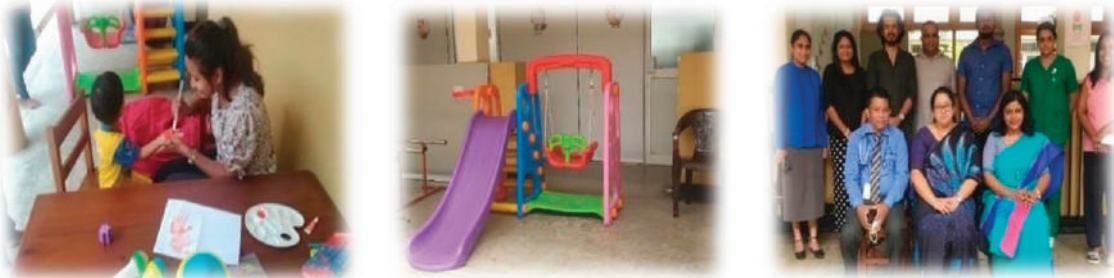
CDICreg is the clinic where those children were cared by a multi-disciplinary team (MDT) which was the most effective model of providing care according to the current global evidence. For the Colombo District CDICreg was developed within the premises of the Divisional Hospital Maligawatta and ceremonially declared open on 31<sup>st</sup> of July in parallel with the launching of the programme even with the minimum number of physical and human resources.

PHMs of the District were able to screen the children under care with coverage of 68% during August 2020 and the children who were identified and referred to the Community Pediatrician were managed and followed up within the outreach clinics as well as in the regional centre.

***Opening Ceremony of the CDICreg Maligawatta and launching of the “IncluDe” Colombo***



***Current situation of the CDIC Maligawatta***



***Angampitiya Outreach Clinic***



***Homagama Outreach clinic***



### Special development activities planned for 2021

- Launching the second pilot programme of the project “IncluDe” in Kandy district.
- Conduct the baseline survey using ECDI2030 to identify the proportion of children who are developmentally on track in order to set the objectives for achieving SGD goal 4.2.1 in 2030.
- Developed care pathways for early identification and management of children with developmental delays and disabilities and National management guidelines for cerebral palsy, Autism Spectrum Disorders and Learning Disorders.

### School Health Programme

Vision of school health programme is “Healthy, Happy, Safe and Active Young Generation”. However, the programme goal is to create a sustainable school health programme enabling the school children to optimally benefit from educational opportunities provided, and to make them empowered with the self-ability to promote healthy lifestyles among themselves, their families and the community.

#### • *Promoting psycho-social health among school children*

Due to high prevalence of risk behaviors in adolescents as reported in Global School Health surveys, promotion of psycho-social health of school children and adolescents was targeted in two different settings for two different target groups during the period of 2019-2021.

1. Enhance the capacity of health and education officers at school
2. Target parents at home by developing a parenting guide on parenting practices and disseminate the knowledge among parents using various strategies

In order to improve psychosocial wellbeing among school children, School Health Unit of Family Health Bureau has developed ‘Psychosocial Health Promotion of School Children: Handbook for Teachers’ and ‘Psychosocial Training Manual’ with the contribution of experts from different discipline. This is a cost effective, evidence-based intervention for the betterment of school children in Sri Lanka. Through this package, students are provided with adequate knowledge and skills to overcome the challenges in the day-to-day life.

Two 3-day Master Training Programmes were conducted in 2020 with the participation of 80 public health managers amounting into nearly 300 master trainers throughout the country since 2019. These trainers were able to conduct 3 training programmes for teachers in their respected area.

Due to the COVID -19 outbreak and its response, routine face to face training has been affected to a greater extent. School health unit decided to prepare a series of teaching electronic learning materials to facilitate TOT programmes and to conduct series of online trainings with the relevant provincial and regional trainers.



School health unit initiated to develop parenting booklet and explore the various strategies to empower parents using existing service delivery opportunities in the health and education systems and via social media etc.

The initial discussions were held, and basic steps were taken for the development of eLearning module on parenting of adolescents and designing a website with learning management system.

Three training of trainers' programs were conducted on life skills programmes in peripheries and trained nearly 150 public health staff who work directly with school children.

- ***Managing Nutrition problems among school children***

Double burden of malnutrition is an emerging health related problem among school children in Sri Lanka. Despite the reduction observed in the prevalence of under nutrition in the form of underweight, stunting, wasting together with micronutrient deficiencies such as Iron and Iodine deficiency, the rate of reduction of these nutritional problems are not satisfactory. On the other hand, the prevalence of overweight and obesity are on the rise not only affecting the urban population, but also the rural population as well. Hence, in creating supportive school environment to deal with nutritional problems among school children, considering the factors that influence obesogenic environment.

Weekly iron supplementation programme was completed for the year 2020 amidst the school closure due to the Covid - 19 outbreak by delivering drugs to homes via public health staff minimizing wastage.

Two TOT Programmes were conducted to health and educational staff on management of Nutritional problems among school children providing 100% coverage throughout the country.



- ***Advocacy for favorable policy decisions to improve health and wellbeing of school children***

A meeting to discuss the minimum age limit of a child for appear in advertisements related to food and beverages was held with the participation of key stake holders. The participants agreed upon the forthcoming amendments in the food act in relation to advertisements of food and non-alcoholic beverages for children under 12 years. But all the participants suggested to increase the minimum age from 12 to 18 in the future amendments in the food act since our constitution support the protection of the public.

National Institute of education and Ministry of Education were advocated to keep the health and physical Education subject as a compulsory core subject for GCE- O/L.

- ***National level reviews and meetings***

National level school health review meeting was held with the participation of representatives from all the districts. Annual school health performance was evaluated at district level. Two National Coordinating Committees which is the main executive body in the Ministry of Health, which takes the decisions with regard to the school health activities on school health were conducted under the chairmanship of Director General of Health Services.



- ***COVID-19 response activities towards school children***

The School Health Unit guided the educational sector on the prevention of COVID-19 at school immediately after the first case was identified in the country. Circulars were issued on Guidance for Preparedness and Response for COVID-19 outbreak in the school setting, sports activities in school settings, guidance for school re-opening, etc.

The School Health Unit gave its fullest cooperation to conduct the GCE/OL exam successfully amidst the COVID-19 outbreak while organizing separate examination centers for COVID-19 positive candidates. The support given by the peripheral health staff needs to be highly appreciated in this endure.

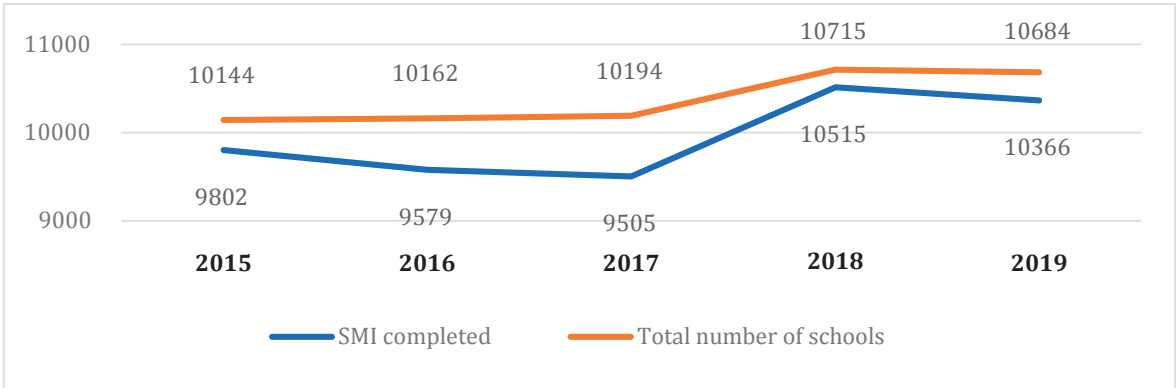
Videos for parents and adolescents with the advice to spend the locked down season effectively were developed and handed over to the Ministry of Education.

- ***Procurement of equipment for nutritional assessments***

Four hundred weighing scales and 400 height measuring tapes were purchased and distributed among Public Health Inspectors (PHIs) who are involved in measuring the nutritional status of school children. Despite the school closure due to the COVID-19

epidemic, the peripheral health staff managed to cover 53% of the school medical inspections (SMIs) whereas it was more than 90% in the previous five years.

**Number of School Medical Inspections performed from 2015-2020**



Total number of schools versus the number of schools where SMIs were conducted from 2015 to 2019 *Source: FHB eRHMIS, 2019*

\* 2018 data included government, Pirivenas and some international schools as well.

Even though there is a downward trend in low Body mass index (BMI) among grade 10 students according to the nutrition month data, there is an upward trend in obesity and overweight.

**Distribution of malnutrition among school children in 2019**



**Special development activities planned for the year 2021**

- Launching the e-learning module on parenting of adolescents and the website with a Learning Management System
- Printing the parenting booklet for parents with adolescent children

- Conducting online training on Psycho-Social Health Promotion for school children for the health and education staff
- Implementing the weekly iron folate supplementation programme for the year 2021
- Revisit the health-promoting school indicators and conduct a pilot programme to improve the quality and the coverage of the health-promoting school programme
- Development of IEC materials on the promotion of nutritional status and psycho-social wellbeing of school children

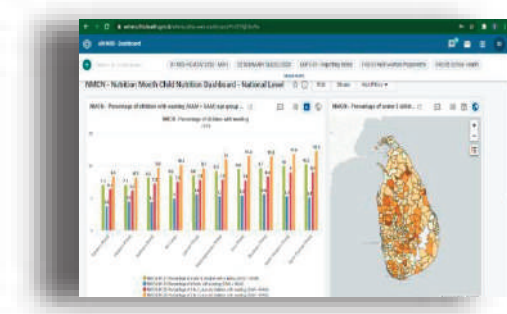
### Monitoring & Evaluation

The unit is responsible for monitoring and evaluating the entire Maternal and Child Health (MCH) programme within the country to provide the necessary guidance and direction for effective implementation.

- National MCH Reviews – amidst the COVID-19 pandemic situation, national MCH reviews were conducted covering all 26 health districts within the year using zoom technology involving wider participation of all grassroots level healthcare service providers.



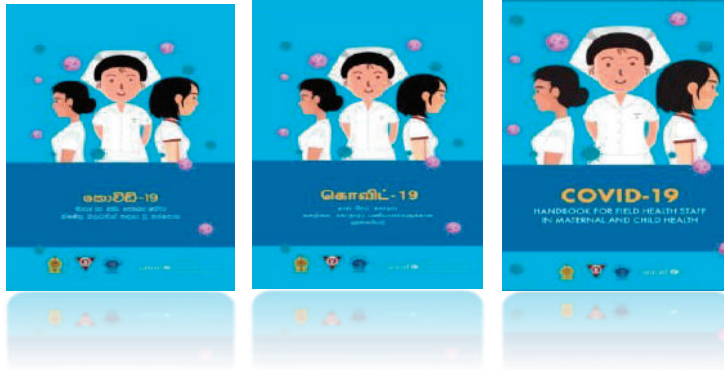
- Capacity building programmes for Public Health Midwives (PHMs) were carried out in several districts once the lockdown restrictions were eased.
- Electronic information systems were developed to capture the nutrition month data from all PHMs.





- Electronic information systems were developed to capture the data from all School Dental Therapists in the country.
- *COVID-19 activities*

COVID-19 Handbook for Field Health Staff in Maternal and Child Health was developed on precautions they should take while attending to routine services.



A WASH facility survey was carried out covering all districts in the country. Based on the findings, WHO and UNICEF supported the districts to improve the WASH facilities to combat the COVID 19.

Grama Niladhari Divisions were mapped by PHI and PHM areas covering the island for resource allocation.

- The paper titled “Survey on the adequacy of hand hygiene facilities in field clinic centers of Badulla District in response to the preparedness of COVID-19” was presented at the College of Community Physicians of Sri Lanka - 25th Annual Academic Sessions.
- The paper titled “Filling the gap: establishing the contribution of the private health sector for maternal and neonatal health data in Sri Lanka” was presented at the Annual Scientific Congress of the Perinatal Society of Sri Lanka.

### Special development activities planned for 2021

- Launching of a distant learning platform [eBridge] for the FHB
- COVID-19 Pregnant Mothers’ Field Information System
- The electronic version of the Child Health Development Record development

### Research

A National Survey on Maternal and Child Nutrition was initiated. The protocol of the survey was prepared, and the expert consensus was reached, data collection tool was prepared. Field data collection has been temporarily halted due to the COVID-19 epidemic. A data policy for the Family Health Bureau was developed.

### Special development activities planned for 2021

- To complete the National Survey on Maternal and Child Nutrition
- To complete the development and validation of the Psychosocial Screening Tool of maternal mental health
- To assess the investment needs for achieving the universal RMNCAH by 2030

## 4.2.3 Health Promotion Bureau

### Introduction

Health promotion captures the essence of health as the responsibility of every individual, family and community and not merely the responsibility of the health sector. It emphasizes the need for building partnership between all stakeholders: government, private and non-government organizations, civil societies and communities which would enable building healthy policies and environments suitable for healthy living. The Ottawa Charter on Health Promotion (2016) has identified five key action areas for health promotion: developing personal skills, strengthening community action, building healthy public policy, creating supportive environments and reorienting health services. Furthermore, the charter has identified three strategies: advocacy, mediation and enabling through which the key action areas could be implemented. The Health Promotion Bureau plans and implements its activities based on these three strategies.

### Key achievements 2020

- Routine activities were not conducted during the first quarter of the year but commenced as online programmes in June 2020.
- All technical units of the HPB were focused on planning activities to combat COVID-19 and key achievements are as follows:
  - Development of a risk communication plan for COVID-19 preparedness and initial response. Messages developed were in the form of wallcharts, posters, leaflets, videos, stickers, social media posts and audio recordings targeting the general public, high-risk groups and healthcare workers. The key messages were on social and physical distancing, hand hygiene, respiratory etiquette, self-quarantine process and the use of masks.
  - Media partnership in the dissemination of key messages through the participation of identified spokespersons of the HPB at talk shows on television, televising video clips on key messages on safe behaviours, conveying key messages via radio using voice clips and audio recordings and publishing key information about the disease via print media are important activities which were implemented during the period.
  - Information was continually disseminated through Social media posts made for the official Facebook page, Instagram account, Twitter handle and the official Viber group.

Messages were meticulously formulated according to daily social media analysis following social psychological principles and the results of meticulous planning were seen as the followers of these platforms such as the Facebook grew from 50,000 to over 500,000 to become the most followed Facebook page of a government institution within a short period. The current viewership exceeds 6.0 million.

- A new official website of the HPB was developed in March and now provides information on real-time local & global situation reports on COVID-19 disease, information on COVID-19 disease including symptoms, prevention, quarantine, hotlines, guidelines, a dashboard to represent all COVID-19 statistics with data analytics and an API to provide real-time local & global COVID-19 statistics to other websites, media agencies and mobile app developers. In addition, it provides information on the routine activities of the technical units of the HPB.

### **Key achievements in 2021**

- Strengthened media partnership and development of a routine mechanism to convey health information on issues related to COVID-19, by conducting regular media briefings three days a week .
- Developed a media campaign on COVID-19 prevention: development of short video clips, crawlers and news alerts.
- Strengthened partnership with funding agencies: World Bank, UNICEF and WHO by developing IEC material: leaflets, posters, audio messages and video clips which address vaccination campaign, vaccine hesitancy, post-vaccine behaviour paying particular attention to high-risk groups.
- Outdoor LED screen advertising on COVID-19 prevention and new normal practices Communication platforms with provincial and district level health administrators, technical staff and relevant stakeholders were developed and strengthened: WhatsApp, Viber platforms.
- Official social media platforms of HPB: FB page, Viber, Twitter and You Tube were utilized to convey messages on new normal lifestyle, vaccination, exit strategies and other messages based on public concerns received through 1999 Suwasariya hotline of HPB and rumour monitoring mechanisms.
- All training programmes, consultative meetings and Advisory Committee meetings were continued as virtual programmes.

### **Barriers to the effective and efficient implementation of project activities**

1. Lack of reliable transport facilities for long-distance travel which is required to monitor and evaluate the implementation of health education and health promotion activities in the districts (between peaks of the pandemic)
2. Administrative delays in obtaining approval to implement planned activities

3. Lack of an Accountant appointed to the HPB – delays in obtaining financial advances and payment approvals
4. Administrative delays in commencing the second stage of construction of new building complex
5. Lack of adequate and appropriate human resources to support technical work  
ICT officer  
Translator – English to Tamil and Sinhala  
Sinhala to Tamil and English
6. Inability to conduct regular inhouse training programmes, annual events such as Review on health education & health promotion, review and awards ceremony for Mothers’ Support Group achievers due to the pandemic
7. Travel restrictions and lockdown situations preventing supervision visits to districts to monitor the progress of activities

#### 4.2.4 Mental Health Programme

##### Introduction

The Directorate of Mental Health is the national focal point of the Ministry of Health responsible for the National Mental Health Program. The unit is responsible for policy development, strategic planning, strengthening of mental health services through improved infrastructure, human resources and monitoring and evaluation of the National Mental Health Program.

##### Vision

A society where mental well-being and human rights are valued and promoted, and people with mental disorders have timely and affordable access to comprehensive, integrated, effective, and culturally appropriate mental health and psychosocial care, free from stigma and discrimination.

##### Mission

To establish an enabling environment for the enhancement of mental wellbeing for all, through mental health promotion, illness prevention, treatment and rehabilitation, psychosocial care and protection of human rights.

##### Objectives

1. To strengthen effective leadership and good governance for mental health at all levels of care
2. To provide comprehensive, integrated and responsive mental health and psychosocial care

3. To implement mental health promotion and prevention strategies
4. To protect the human rights of persons with mental illness and psychosocial disabilities
5. To strengthen resources required for the delivery of services
6. To strengthen monitoring, evaluation and information system
7. To promote research and evidence-based practices in mental health
8. To promote advocacy to reduce the mental health treatment gap, stigma and discrimination

### **3. Major developments & achievements during the year 2020& up to 2021**

#### ***Health manpower and human resource development***

- The recruitment process of clinical psychologists to government institutions is ongoing.
- Primary Health Care staff at community support centers was trained on child mental health – Community support center - Meerigama
- Conducted a Capacity building workshop for Medical officers/Mental Health
- Training of medical officers in primary care institutions on common mental disorders
- Recruitment of community psychiatric nurses was initiated and ongoing
- District level training for medical officers was conducted on management of substance use disorders at primary care settings
- Initiated revising the job description and duty list of Medical Officers/Mental Health
- Capacity building program on mental wellbeing promotion conducted.

#### ***Community mental health services conducted***

- Mental health promotional activities conducted at Marawila and Mullaitivu – Drama Therapy

#### ***Progress of mental health preventive care services and mental health promotion***

- Programmes on the promotion of workplace mental wellbeing conducted for staff at the Ministry of Health
- Programs on the promotion of mental wellbeing in schools were conducted – the concept of happy schools was initiated and ongoing.
- Initiated the development of school mental health promotion package
- IEC material on child mental health and mental health promotion was prepared and printed.
- Conducted national, provincial and district level mental health review meetings
- Strengthened mental health promotion & services in primary care setting – Meerigama Community Support Centre

- Training workshop on drug rehabilitation was conducted for the staff at Minuwangoda Drug Rehabilitation Center

### ***Measures that were taken to deal with mental disorders and their management***

- The standard guideline for the assessment, diagnosis and management of persons with mental disorders in Primary Medical Care Institutions was finalized and printed.
- Medium Stay Mental Health Rehabilitation Guideline was finalized and printed.
- Long stay residential facilities for mentally ill patients was drafted to improve the rehabilitation services for severely ill psychiatric patients.
- A psychological autopsy tool was piloted and a suicidal registry was developed in Gampaha District.
- Procurement of supplies
  1. Purchasing ECT machine for DGH –Trincomalee
  2. Purchasing essential equipment for DH –Minuwangoda/Drug Rehabilitation Center
- Admission criteria were developed for the drug rehabilitation units.
- Procurement and supply of essential items for rehabilitation units island wide

### **Infrastructure development during the year 2020**

- Construction of Drug Rehabilitation Center at DH - Minuwangoda
- Renovation of Community Support Centers at Ragama, Ambalanthota, Kegalle, Uppuveli and Meerigama
- Renovation of Delthota Medium Stay Rehabilitation Unit and Alcohol Rehabilitation Center at DH - Rambukkana
- Renovation of Mental Health Units at BH - Eravur and DH - Divulapitiya

### **New policy enactments**

- New Mental Health Policy has been finalized and cabinet approval was obtained.
- A draft on Violence Policy Brief for the school sector was developed.

### **Effect of the COVID-19 on the health sector**

The unexpected pandemic left mentally ill patients, families and immediate responders in psychological distress. As a result, the following measures were initiated to strengthen the provision of services in such situations.

- A circular was issued on the continuation of psychiatric medication in wake of the COVID-19 crisis and home delivery of clinic drugs was implemented.

- Instructions were developed for mental health professionals in the wake of the COVID-19 crisis in the country.
- A guide on the mental health response for health care workers - front line health workers' mental wellbeing
- Video clips on the mental wellbeing of the general public and frontline health workers were developed with the collaboration of the Health Promotion Bureau and disseminated.
- Mental wellbeing assessment scale was developed for front-line workers and inward patients in COVID treatment centers.
- Pre and post-assessment scales for drama therapy among children were developed.
- COVID treatment and quarantine centers were visited to identify mental health issues, improve their mental wellbeing and survey on the mental wellbeing of frontline workers
- An online survey on stigma during COVID-19 response was conducted.
- Wall charts and health messages were developed on Post COVID-19 reopening of schools

### **Monitoring and Evaluation**

Conducted mental health reviews

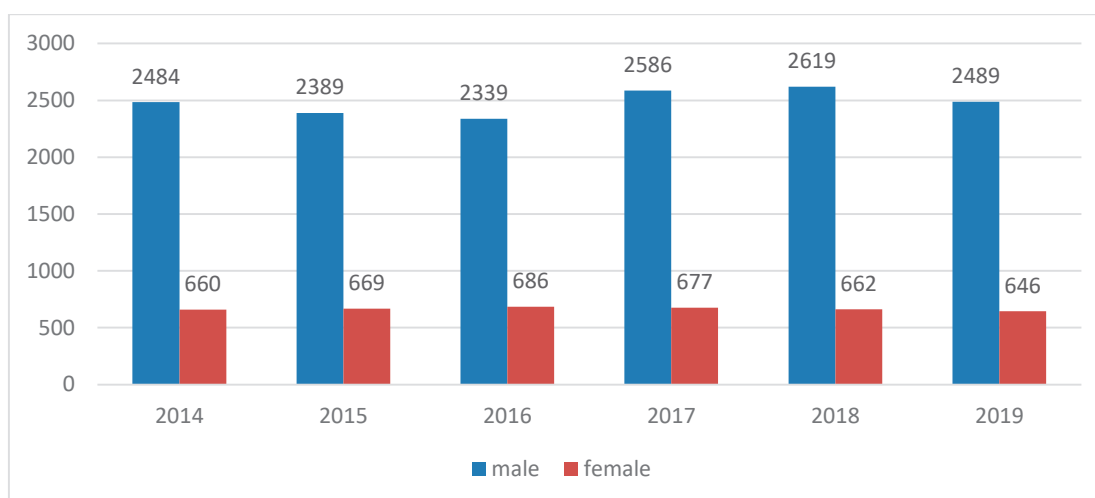
Review and revision of the Mental Health Management Information System (MHMIS)

Published Annual Mental Health Bulletin

### **Ongoing development activities**

- Distribution of guidelines for assessment, diagnosis and management of persons with mental disorders in primary medical care institutions and district level training
- Capacity building of Medical Officers of mental health and Community Psychiatry Nurses
- Expansion of 1926 help line services to district level
- Capacity building workshops on mental wellbeing
- Gazetting and printing of Mental Health Policy 2020-2030
- E-learning module for management of mental disorders in primary health care settings
- Recruitment of Psychiatric Social Workers (PSW)
- Establishment of Community Support Centres (CSC)
- Development of Facebook page on mental health promotion
- Development of suicide prevention strategies and action plan
- Development of mental health promotion materials - video clips

### Last 5 years performance trend



### Number of suicides by gender during 2014 - 2019 in Sri Lanka

### *New patients treated for mental and behavioral disorders due to opioids, cannabinoids and sedatives/hypnotics in mental health clinics from 2018 to - June 2020*

Number treated (New Patients)	Opioids	Cannabinoids	Sedatives/Hypnotics	Total
2020 (up to June)	2218	541	142	2901
2019	6908	1930	349	9187
2018	6242	1121	127	7490

### Special development activities planned for 2021

- Establishment/renovation/improving of eight community support centers
- Implementation of National Mental Health Policy 2020-2030 at the provincial level
- Development and revising guidelines - Comprehensive mental health package
- Establishment of an e-learning platform on mental health issues
- Establishment of sensory integration units at Community Mental Health Resource Center, Kandy and BH-Nawalapitiya
- Renovation of Mental Health Unit, DH – Kandana



## 4.2.5 Non-Communicable Disease Programme

### **Vision**

A country that is not burdened with non-communicable diseases, deaths and disabilities

### **Mission**

To contribute to reduce the preventable and avoidable burden of morbidity, mortality and disability due to chronic and acute Non-Communicable Diseases (NCDs) and ensure that populations reach the highest attainable standards of health, well-being and productivity and non-communicable diseases are no longer a barrier to the socioeconomic development of the country.

### **Introduction**

The Directorate of Non-Communicable Disease (NCD), Ministry of Health, was established in 1998 to plan, implement, monitor, and evaluate the national prevention and control program against the emerging epidemic of NCDs in Sri Lanka. The Directorate of NCD is the national focal point for prevention and control of acute and chronic NCDs in the country and coordinates and implements its activities through the Provincial and Regional health authorities. The strategies and the activities of the Directorate of NCD are lined up with the objective to reduce the preventable and avoidable burden of morbidity, mortality and disability due to acute and chronic NCDs through multi-sectoral collaboration and cooperation at all levels. The national and regional level activities are mainly funded by the government of Sri Lanka and the development partners, and international donor agencies like WHO and World Bank also provide financial assistance.

In 2020, the COVID-19 pandemic changed the health system priorities and deviated the attention from NCDs to communicable diseases. The COVID-19 affected the general living conditions of the people as well as the socio-economic status of the country. Most of the scheduled activities for the prevention and control of NCDs for the year 2020 could not be completed due to the pandemic situation in the country. The Directorate of NCD faced new challenges in providing uninterrupted essential services for NCD patients while ensuring their safety.

The National Policy and Strategic Framework for prevention and control of NCDs were launched in 2010 with a vision of a “Country that is not burdened with chronic NCDs, deaths and disabilities” based on the national policy, the ‘National Multi-Sectoral Action Plan for the Prevention and Control of NCDs 2016-2020’ was formulated with technical support of all health and non-health sector stakeholders. The ‘National Policy and Strategic Framework on Injury Prevention & Management in Sri Lanka’ was launched in 2016 with a vision of

'Injury-free Sri Lank'. Based on the national policy, the 'National Multi-Sectoral Action Plan for the Prevention and Control of Injuries 2021- 2025' was developed with technical bodies, non-health sectors, non-governmental organizations, and UN organizations.

The Multi-Sectoral Action Plan for chronic NCD has set up nine national targets related to NCD and their risk factors. These targets will be achieved through four strategic areas:

1. Advocacy, partnership and leadership
2. Health promotion and risk reduction
3. Strengthening health system for early detection and management of NCDs and their risk factors
4. Surveillance, monitoring, evaluation and research

The Directorate of NCD as the national focal point for injury prevention and management follows the below-mentioned six strategies as identified in the National Policy and Strategic Framework on Prevention and Management (2016).

1. Strengthen coordinated action for injury prevention
2. Raise awareness on the gravity of the injury problem and prevention of injuries
3. Maintain and recommend legislative and regulatory mechanisms supporting injury prevention
4. Empower community and stakeholders to design and develop safe environments
5. Strengthening the organization's capacity to provide optimum post-event care and rehabilitation of injury victims
6. Strengthen the injury information system and promote research

## **Achievements/special events in 2020**

### **National programme for Chronic NCD prevention and Control**

#### **Advocacy, partnership & leadership**

- The Directorate of NCD identified the need for revision of the existing National NCD Policy to incorporate newer concepts, evidenced-based policy directives to cater expanding scope needed for NCD prevention in the country. The finalized draft of the revised National Policy for Prevention & Control of Chronic NCDs 2020 was developed and disseminated among relevant stakeholders for their comments.
- The progress of the Multi-Sectoral Action Plan for Prevention & Control of NCDs 2016-2020 was evaluated and presented to stakeholders. Development of the MSAP for the next five-year period was initiated.

- Terms of Reference (TOR) were developed for the National NCD Council, the National NCD Steering Committee and National Advisory Board -NCD and conducted meetings with the participation of the health and non-health sector stakeholders from relevant ministries and organizations.
- The TOR were developed for District Committees for chronic NCD prevention & control. It was shared with all RDHS, PDHS and district level Medical Officers of NCD.
- Guide to perform duties of MONCD was developed and published.
- Commemoration of special days:
  - **The World No Tobacco Day - 31<sup>st</sup> May:** A media briefing conducted to commemorate the day under the theme “Protecting youth from industry manipulation and preventing them from tobacco and nicotine use” and “Commit to Quit” in the years 2020 and 2021 respectively aiming to create awareness among family members, parents, friends, school teachers, to empower the youth to stand up and speak out against Tobacco.
  - **The World Heart Day - 29<sup>th</sup> September:** was celebrated in September under the theme “use the heart to beat heart disease”. The purpose of the celebrations was to educate the public about heart disease and its main causes such as high blood pressure and unhealthy lifestyle choices and to educate the public on the benefits of early detection of heart disease to curb its associated mortality and morbidity. Screening for hypertension at public places such as railway stations, central bus stands, government workplaces such as Police Stations, Divisional Secretariats, among hospital staff was carried out at the district level by the district NCD focal points. A media briefing was conducted in collaboration with the College of Cardiologists. The NCD Unit conducted the coordination and facilitation with the National Hospital, Sri Lanka to conduct community screening for high blood pressure.
  - **Salt week:** Commemoration of salt week was done to increase the awareness among the public using mass media, social media and printed media. Many programmes were conducted at the national level and health promotion activities were conducted at the district levels with the facilitation of MONCDs and district teams.
  - **World Diabetes Day-14<sup>th</sup> November:** A public webinar was conducted to commemorate in collaboration with the College of Endocrinologists to increase awareness on the importance of prevention, screening and treatment of diabetes mellitus is understood by the health care worker and the general public.
  - **International Physical Activity Day - 06<sup>th</sup> April and national ‘Move More Month’ April 2021:** Awareness campaign to commemorate the day and month under the theme “Move More, Every Step Counts” to increase the awareness on

the importance of physical activity for a healthy life in collaboration with Sri Lanka Sports Medicine Association.

Advocacy meetings conducted were as below;

- Initial discussions were held with private sector stakeholders to establish facilities for self-blood pressure measurement at settings such as Supermarkets and Banks.
- To establish “health corners” for early identification and referral of people with NCDs and risk factors in leading government institutions and ministries starting with five institutions at the initial phase.
- Mobilizing the civil society to improve NCD care through encouraging screening, follow-up care and conducting out-reach clinics initiated in collaboration with the NIHR, UK Global Health Research Unit and SA Centre of Excellence for NCD epidemiology, University of Kelaniya
- Initial discussions were held with the Directorate of EOH to initiate periodic employee screening for NCDs in BOI.
- Joint advocacy meetings with Directorate of EOH & FS with large, medium and small-scale food industry on reformulating food with less salt, fat and sugar.

### **Health promotion & risk reduction**

Reduction of main modifiable risk factors (tobacco, alcohol, unhealthy diet and physical inactivity) and metabolic risk factors (high blood pressure, high blood sugar, high cholesterol) were addressed by conducting the following activities in 2020. Prevention of risk factors due to injuries was also addressed by the Directorate of NCD.

- **Establishing Healthy Settings**
  - A Health Corner was established in the Ministry of Health premises to promote NCD screening among the staff. Guidelines were issued and regular NCD screening was initiated. Staff members over 700 were screened from the Ministry of Health.
  - Exercise and physical activity promotion programme was initiated for the staff of the Ministry of Health and conducted at the ministry premises.
  - National level training was started for establishing at least a single tobacco-free zone for each PHI area.
- **Community awareness**
  - Developed messages on increasing public awareness on the interpretation of front-of-pack labeling for salt, sugar and fat among the population with the Directorate of EOH and Health Promotion Bureau.
  - Developed a documentary video on Healthy Lifestyle Centers and services provided.
  - Initiated the development of the official website for the Directorate of NCD.

- Initiated the revision of the "Api Nirogi Wemu" booklet which would be distributed among school children.
- Initiated development of training manual for nutrition promotion for primary care providers targeting nutrition promotion among public towards reducing NCD burden.
  - The landscape analysis conducted by the WHO was launched. Discussions on developing a National Strategy for Elimination of Trans-fat were initiated with the technical support of WHO HQ and SEARO.
  - Mobilizing the civil society to improve NCD care through encouraging screening, follow up care and conducting out-reach clinics
  - A stakeholder meeting of global RECAP, a capacity-building programme for risk reduction of NCDs, was held in Colombo in 2021. The overall aim was to strengthen the capacity of Sri Lanka to promote healthy diets and increase physical activity for the prevention of NCDs focusing on more effective regulatory and fiscal interventions.

- **Health system strengthening**

Infrastructure development

- Procurement and distribution of equipment, essential technologies such as glucometers, cholesterol meters, cholesterol strips, blood pressure apparatus, weight/height scale, measuring tape, tuning fork, Snellen chart, CVD risk chart as per the standard equipment list and printing of HLC Registers (H 1236 A-650, H 1236B-1050) and Returns (H1239-1100, H1240-100), PMR (male & female each), NCD screening manual for Healthy Lifestyle Centers were done.
  - A request was made for Emergency NCD kits from WHO to be used in Disasters in the country.

Funds were allocated for several projects such as for establishing Medical Nutrition Units at DGH Kegalle, DGH Chilaw and purchasing of equipment to facilitate physical activity in different settings.

### Capacity building

- Several training materials were developed during 2020. Video-assisted training on diabetic foot care for PHNO, Management Guidelines of Chronic Respiratory Diseases and Dyslipidemia for PHC level, training curriculum for Health Assistant - Gymnasium in collaboration with the SL Sports Medicine Association were some. In addition, the Training of Trainer (ToT) module was developed in collaboration with SLMNA and SLSMA for PHC staff Promotion of Physical activity among the general public.
- Consultative meetings were held for the development of the "National Dietary and Physical Activity Guidelines for selected Non-Communicable Diseases" and Training

of Trainer (Tot) module on “Brief interventions for tobacco cessation in Primary Health Care”

- The process of establishing “Quitting Clinics” for helping tobacco users for cessation was initiated.
- Capacity building of national-level programme managers and legal officers "RECAP: Global Regulatory & Fiscal Capacity Building Program" was initiated in collaboration with WHO and IDLO.
- In addition, a 2-day training program was conducted for MONCDs on the development of District Action Plans based on the priority health needs in their districts. Training on NCD Management Guidelines (DM, HT, Overweight & Obesity, CVD Risk, Dyslipidemia, Respiratory Diseases and other guidelines developed by cancer and mental health units) were conducted by the resource persons from the Directorate in 6 districts. Following the onset of the COVID pandemic, training was conducted as virtual training in some of the districts.
- Developed and launched a Virtual Learning Management System (VLMS) on NCD prevention and management i.e., NCD training platform <https://ncdlearn.health.gov.lk/> for health care providers in collaboration with the WHO.
- Conducted residential and virtual training for Nursing Officers from primary care institutions for the provision of NCD prevention and care services in collaboration with PSSP.
- Conducted training among HLC and public health staff of 10 districts using the TOT manual for physical activity promotion among the general public in collaboration with Sri Lanka Sports Medicine Association. Training of MONCDs as master trainers on the TOT manual for physical activity promotion among the general public by conducting a two-day residential workshop.
- Training on gym equipment maintenance for selected staff from healthcare institutions with gymnasiums in collaboration with National Institute for Sports Sciences, Ministry of Sports.

### **Surveillance, monitoring, evaluation and research**

- The Directorate of NCD together with the WHO Country Office initiated an independent review of the National NCD Program for Prevention and Control of NCDs. The proposed review was intended to critically evaluate the extent and the linkages of the existing chronic NCD Control Programme in Sri Lanka towards providing prevention and control of NCDs in the country. The findings of the review will be useful to further strengthen the NCD control strategies in Sri Lanka to meet the national NCD targets by 2025 and SDG NCD targets by 2030.

- The STEPS survey was started. Data collection was postponed halfway through due to the COVID-19 situation.
- The performance evaluation and the national award ceremony of the Healthy Lifestyle Centers (HLC) for the year 2019 were conducted.
- Several district NCD annual performance reviews were attended in person and virtually during the COVID-19 pandemic.
- A series of consultative meetings were conducted for the revision of HLC screening and follow-up guidelines, PMR, registers, returns, and evaluation forms.
- A series of consultative meetings were conducted to establish and maintain the Health Management Information System (HMIS) for HLCs. Training of Staff on Health Management Information System (HMIS) for HLCs of all PMCIs selected for the PSSP and those in PMCI not yet recruited for PSSP in 5 districts were conducted virtually.
- The system initiated to extract morbidity & mortality data from eIMMR codes for defined NCDs was finalized and handed over to the MSU.
- Quarterly Bulletins and the Annual report 2019-2020 for the Directorate of NCD were published.
- Development of a user manual for the hybrid data system for HLC was initiated.
- A post-training evaluation of the TOT program for the promotion of physical activity among the general public was conducted in June 2021.

### **Maintaining essential services during the COVID-19 pandemic**

The Directorate of NCD, Ministry of Health recognized it as a high priority endeavour to take measures to strengthen NCD service provision during the COVID-19 epidemic. Following activities were conducted to ensure continuity of services and health promotion and risk reduction during 2020.

- Facilitated distribution of medicines to the doorstep of the NCD patients on long-term follow-up at government by postal delivery, delivery through health and non-health government officers working at the community level, village leaders and volunteers. A web-based mechanism was established to get the drugs delivered to the homes of those who usually purchase drugs from the private sector, with the state and private pharmacies in collaboration with the Pharmacy Owners Association. More than 1800 pharmacies around the country were involved. Patients followed up at the private sector and having a prescription issued by an SLMC registered medical practitioner within the last six months were advised to present it to the OPD of a government sector hospital and obtain medicines for a maximum of two weeks.
- Developed and disseminated guidelines for the management of patients with NCDs during the COVID-19 outbreak to ensure uninterrupted service provision for NCD patients while minimizing exposure risks to both patients and healthcare staff.

- Printed 100,000 numbers of leaflets and 5,000 numbers of posters for NCD patients in home quarantine and lockdown areas and disseminated them.
- Distributed one million leaflets along with medicines distributed by post during the COVID-19 outbreak for patients with NCDs, on drug compliance and advice in an emergency, etc.
- Carried out social media: Facebook, WhatsApp/Viber and YouTube and mass media campaigns to promote a healthy lifestyle, focusing on being active, quitting smoking, avoiding alcohol and taking a healthy diet during the COVID-19 epidemic. Health messages were also disseminated via mass and social media on how to recognize danger signs of NCD-related emergencies and how to reach for medical services if an emergency is suspected.
- Facilitated patients to get information regarding drug delivery, treatment services and COVID-related information by operating a trilingual Hotline at the NCD Bureau. Hospitals were instructed to establish a hotline and numbers were made available to the public via the Ministry of Health website and mass media.
- Launched a telemedicine system in 16 Nephrology clinics in government hospitals which facilitated communication between high-risk immune-compromised patients (such as those who have undergone kidney transplant or on dialysis) and their treating physicians, and enabled the patients to interact with the physician via audio, video or e-chat.
- Coordinated the home delivery of drugs through the postal system and collaborating with Sri Lanka Police to trace and deliver drugs to households of the patients, during the first and second waves of the COVID-19 pandemic.
- Provided human resources for the mobile clinics conducted for vulnerable populations in lockdown areas in the Colombo Municipal Council with the support of main government hospitals catering to these areas.
- Several studies were conducted and published in scientific forums to disseminate the experiences and research findings to contribute to the pool of evidence.
- A telephone survey to evaluate access to essential medicines for NCD during the outbreak.
- Online survey among pharmacy owners to assess satisfaction with service provision
- A study among staff who underwent quarantine on NCD services received
- A study on the effectiveness of mobile clinics conducted for vulnerable populations in lockdown areas in the Colombo Municipal Council

### **Ongoing development activities**

- Revision of essential drug lists and essential investigations list for PHC level
- Developing guidelines for annual screening of medical clinic patients and frequency



of medical clinic visits for patients at PHC

- Developing guidelines for NCD management (CVD risk, Diabetes, Hypertension, Dyslipidemia, Chronic Respiratory Diseases) at secondary and tertiary care levels to standardize NCD care
- Piloting the concepts of ‘Patient-centered Primary Care’ to provide an integrated service across service levels through proper referrals and back referrals
- Behavioral Change Communication package in collaboration with World Food Program
- Revise and reprinting ‘Api Nirogi Wemu’ booklet for school children
- Develop 14 online modules for virtual training of health staff in collaboration with WHO on:
  - Guidelines for secondary and tertiary care on CVD risk assessment, diabetes, hypertension, chronic respiratory diseases, dyslipidemia and guidelines for primary care on hypertension
  - Diabetic foot care and diabetic eye care for primary health care staff
  - Tobacco cessation interventions for primary healthcare staff
  - Promoting physical activity in the community
  - Guideline on Cancer Detection and Referral Pathways and Palliative Care for primary caregivers
  - Guideline for Assessment, Diagnosis and Management of Persons with Mental Disorders in Primary Care
  - Managing efficient NCD services in a hospital setting

### Last 5 years’ performance trend of the Chronic NCD Screening Programme

	2015	2016	2017	2018	2019	2020
<b>Total number of HLCs</b>	814	826	871	922	1000	1002
<b>Cumulative % of the target population screened<sup>1</sup></b>	23.1	25.5	42.7	58.8	40.6	44.2
<b>Annual screening coverage</b>	391,260	540,535	493,965	511,438	605,148	321,055
<b>% of eligible population screened annually</b>	7.7	10.6	9.7	10.0	6.9	3.7%
<b>Ratio of men: women screened</b>	1: 2.6	1: 2.7	1: 2.3	1:2.2	1:2.6	1:2.4

*This percentage is calculated from the cumulative number of all eligible participants screened from the year 2011 to 2020. Target population of 40-65-year age group is calculated from the total population as indicated by 2012 Census, up to the year 2018 (5,089,860). For the year 2020, 35 years and above group is calculated from the total population as indicated by 2012 Census (8,856,356).*

### **Special development activities planned for 2021**

#### Development of the NCD Policy (2021-2030)

- Development of the MSAP for the 2021-2025 period was initiated. Suggestions from most of the health sector stakeholders were received. Requests were sent to the non-health sector.
- Establishing District Level Steering Committee for NCD co-chaired by District Secretary and the RDHS
- Expanding periodic employee screening for NCD through Health Corners in government sector organizations
- Private sector to encourage facilities for automated blood pressure measurements at public places (Supermarkets)
- Training of PHC staff based on the ToT modules: on Physical Activity and Sedentary Lifestyle Guidelines, and National Dietary and Physical Activity Guidelines for selected Non-Communicable Disease with the technical support of the Ministry of Sports
- A situation analysis on physical activity in Sri Lanka to review alignment with 'Global Action Plan on Physical Activity 2018-2030'.
- Development of guidelines and disseminating instruments on legal and fiscal measures for physical activity promotion in school and government sectors under global RECAP program with the support of WHO and IDLO
- Procurement and distribution of basic exercise equipment for exercise programs conducted at selected HLC

### **National Programme of Injury Prevention and Management Overview**

The Directorate of Non-Communicable Diseases (NCD) is the national focal point for injury prevention and management in the Ministry of Health, Sri Lanka. The Directorate of NCD works closely with many other directorates within the Health Ministry and other ministries, departments, authorities, private sector and with many Non-Governmental Organizations (NGOs) to implement the national injury prevention and management programmes.

#### **Vision**

A country free of injuries

**Mission**

To reduce the frequency and severity of injuries by incorporating injury prevention strategies into the everyday life of people.

The National Injury Prevention And Management Programme is implemented under five strategic areas to address the following key priority areas:

1. Transport safety
2. Home safety
3. Drowning safety
4. Workplace safety
5. Child and elderly safety (Vulnerable group safety)

Several programmes have been coordinated and conducted under the following strategic areas:

**Advocacy, partnership & leadership**

- Initiated development of the Multi-Sectoral Strategic Action Plan on Injury Prevention and Management, Sri Lanka 2021 – 2025
- Prepared the Terms of Reference (TOR) of the National Committee for Prevention of Injuries.

Prepared the TOR for the District Multispectral Steering Committee on Prevention and Control of Injuries.

- Several discussions were held in 2020 to explore the possibility to integrate injury prevention into the current program conducted by Public Health Inspectors (PHIs) as there is no authorized officer at the grass-root level (at Medical Officer of Health division level) to implement the injury prevention program
- Established Injury Preventions Steering Committees at the district level
- Establishment of several Safe Community Steering Committees at the district level
- Conducted meetings of the working groups on road safety, water safety, child/home/elderly safety, First aid (Post-event care)

**Health promotion & risk reduction**

- Distributed Home Safety Checklist among houses with an antenatal mother or a child less than 5 years of age.
- Developed the Preschool and Daycare Center Safety Checklist
- Finalized safe community concept note, and provided technical guidance to establish new safe communities at selected MOH areas

- Provided technical guidance to conduct National Injury Prevention Week-2020 and the Poison Prevention Week-2020
- Developed the Sinhala version of Child Injury Prevention – A practical guide for public health staff
- Raised public awareness on the importance of injury prevention during the COVID-19 epidemic through press releases media seminars, and TV interviews, conducted especially during the National Injury Prevention Week - 2020

### **Post-event care**

- Conducted first aid training programmes for community groups (mother support groups, preschool teachers) at district and MOH levels by district MONCDs and MOHs
- Initiated development of a basic first aid curriculum and a National Guide on Basic First aid to facilitate the implementation of standardized pre-hospital care programme throughout the country
- Started developing trauma management guidelines for primary care level (Guidelines on poisoning, ENT, eye, dental injuries and general trauma management)

### **Capacity building**

- Conducted capacity-building programmes for the provincial and district level CCPs and District MONCDs on National Injury Prevention and Management Programme based on strategic areas identified in the draft National Multisectoral Action Plan on Injury Prevention and Management
- Conducted training sessions on National Injury Surveillance System Data Management for relevant provincial, district and hospital staff in all districts. Surveillance, monitoring, evaluation, and research, national injury surveillance performance review was organized by the Directorate of NCD in March 2020 at Bandaranaike International Memorial Conference Hall (BMICH). This was the 2nd time that the best performances of the hospitals were rewarded.
- Developed the WHO Bi Regional Status Report for drowning prevention in South East Asia and Western Pacific Regions with the assistance of many governmental and non-governmental organizations and submitted it to WHO
- Taken steps to introduce injury death investigation and review National Injury Surveillance System
- Prepared injury surveillance supervision report format, checklist and quarterly return format on injury prevention for MONCDs
- Reviewed the National Injury Surveillance System performance at the provincial level

### Ongoing Development activities

- Conducting review meetings on Safe Community Program with Divisional Secretaries to establish -1 village per MOH
- Experience sharing session on Safe Community Programme conducted for all MONCDs by organizing a visit to the model safe community established in Gampaha district. Assisted initiation of safe communities in Kurunegala district and NIHS Kaluthara. Steps have been taken to promote the establishment of a safe community programme throughout the country through the Ministry of Home Affairs.
- Developing the national curriculum and a guide on basic first aid for health staff & general public & conducting training to district level teams
- Developing the Emergency Trauma Management Guidelines for Primary Care Level (Guidelines on poisoning, ENT, eye, dental injuries and general trauma management)
- Introducing the death investigation and review by developing a circular on injury death investigation
- Introducing a data management system for injury-related transfers

### Last 5 years' performance trend (Key Performance Indicators and progress against targets)

	Key Performance Indicators	Target	2016	2017	2018	2019	2020
1	No of sentinel sites conducting inward surveillance	100%	-	68%	85%	89%	91%
2	No of sentinel sites conducting outpatient surveillance	100%	-	49%	62%	65%	67%
3	No of sentinel sites conducting death notification	100%	-	-	-	40%	56%

### Special development activities planned for 2021

- Launching and implementing Multi-Sectoral Strategic Action Plan on Injury Prevention and Management, Sri Lanka 2021 – 2025
- Finalizing the national curriculum on basic first aid training and a national guide on basic first aid
- Introduction of injury death investigation and review at district level
- Introduction of Daycare and Preschool Safety Checklist

## Physical and financial progress of special activities conducted during the year 2020

Project description and summary of physical progress by 31.12.2020	Financial progress by 31.12.2020 (Rs. Mn)	Total estimated cost (Rs. Mn)
1. Draft of the revised National Policy for Prevention & Control of Chronic NCDs 2020 was finalized, developed and disseminated among relevant stakeholders for their comments.	0.03	1.5
2. Terms of Reference were developed for the National NCD Council, the National NCD Steering Committee and National Advisory Board - NCD and conducted meetings with the participation of health and non-health sector stakeholders from relevant ministries and organizations	0.014	1.2
3. Terms of Reference (TOR) were developed for District Committees for Chronic NCD Prevention & Control and Injury Prevention and Control, shared with all RDHS, PDHS and district level Medical Officers of NCD.	NA	NA
4. Conducted Advocacy meetings as below. Mobilizing the civil society to improve NCD care through encouraging screening, follow-up care and conducting outreach clinics initiated, field visit for NCD outreach clinic at BH Horana with MONCDs done. A presentation was done to PDHS at the NHDC meeting.		0.9
5. Initial discussions were held with private sector stakeholders to establish facilities for self blood pressure measurement at settings such as supermarkets and banks		
6. Initiated periodic employee's screening for NCDs in banks/BOI		
7. Joint advocacy meetings with Directorate of EOH & FS with the large, medium and small-scale food industry on reformulating food with less salt, fat and sugar		
8. Development of training modules; 'TOT module' on early detection and cessation counseling of tobacco use (with NATA) & TOT module in collaboration with SLMNA and SLSMA on physical activity and disease-specific dietary guidelines at PHC hospitals	0	0.06
9. Capacity building physical activity and disease-specific dietary guidelines at PHC hospitals (2 TOTs), two-day training program for MONCDs on development of District Action Plans based on priority health needs of their districts. Training on NCD Guidelines (DM, HT, Overweight & Obesity, CVD Risk, Dyslipidemia, Respiratory Diseases and other guidelines developed by Cancer and Mental Health Units) was conducted by the resource persons from the directorate in 6 districts (Gampaha, Kurunegala, Galle, etc.). Following the onset of the COVID pandemic, training was conducted as virtual training in the Matale district.	1.3	

The NCD unit technical staff - participation for local conferences, training on "RECAP: Global Regulatory & Fiscal Capacity Building program" was initiated.		
10. Procurement and distribution of equipment, essential technologies such as glucometers, cholesterol meters for Healthy Lifestyle Centers as per the standard equipment list	6.1	
11. Allocations of funds: Establishing Drug Rehabilitation Center - Minuwangoda, Establishing of Medical Nutrition Units at DGH Kegalle, DGH Chilaw, purchasing of equipment for advanced Cancer Management Center and purchasing of equipment to facilitate physical activity at different settings such as workplaces, hospitals and schools were facilitated, etc.	28.4	
12. NCD unit website development	0.08	
13. HLC performance evaluation programme and award ceremony	0.8	
14. National NCD review programme (4 national reviews per annum)	0.5	
15. Video recording & editing for the training programme on diabetic foot care for Public Health Nursing Officers	0.43	
16. Conducting consultative meetings for the revision of HLC screening and follow up guidelines, PMR, registers, returns, and evaluation forms	0.01	
17. Conducting stakeholder meetings for the development of a 5-year Multi-sectoral Injury Action Plan 2021 - 2025	0.018	
18. Conducting National Committee of Prevention of Injuries (NCPI), working group meetings (RTA, Drowning, Child/ home injury prevention, surveillance)	N/A	
19. Conducting consultative meetings to develop guidelines and checklist on injury prevention	0.015	
20. Conducting the National Annual Injury Surveillance Review, Provincial Injury Review including Injury Death Reviews	0.85	

## 4.2.6 Environmental & Occupational Health

### Introduction

Food Control Administration Unit which comes under the Directorate of Environmental Health, Occupational Health and Food Safety is responsible for coordinating and monitoring regulatory services, and providing technical guidance to local authorities in order to ensure the availability of safe and wholesome food for consumers.

### Vision

A healthy Sri Lanka free from environmental health risks

## Mission

To improve the health status of all Sri Lankans by creating a healthy environment, through the provision of environmental health services by

- advocating, collaborating and partnering with stakeholders
- promoting and supporting health staff
- empowering people to be leaders in their communities

## Objectives

- To formulate an institutional framework that enables efficient coordination and collaboration of the various sectors and stakeholders that have environmental health-related responsibilities
- To ensure an effective institutional capacity for rendering environmental health services
- To strengthen the capacity of health staff working in the area of environmental health to become efficient agents and catalysts for desired change
- To adopt a partnership approach with the purpose of facilitating holistic and integrated planning in environmental health
- To facilitate the development and maintenance of an effective Environmental Health Management Information System
- To promote community participation and development through empowerment in environmental health, to contribute to the promotion of own health

## Achievements/special events in 2020

- Rapid assessment of the prevailing healthcare waste management in healthcare settings funded by UNDP
- Capacity-building workshops for health staff to manage healthcare waste and prevention of infections under WHO and UNICEF funding were conducted at the following institutions.



*DGH - Ampara*



*BH - Theldeniya*





*DGH - Vavuniya*



*DGH - Kalutara*



*TH - Anuradhapura*



*BH - Thellipalai*



*BH - Kuliypitiya*

- Development and printing of a training module on healthcare waste for the health staff handling healthcare waste (under UNICEF funding)



- Development of a guideline for healthcare waste management during the COVID-19 pandemic
- Provision of basic logistic and infrastructure facilities for healthcare institutions
- Provision of an incinerator for District General Hospital Chilaw under WHO funding



- Provision of waste bins and waste carts to healthcare institutions under UNICEF funding – Base Hospital Minuwangoda, Base Hospital Homagama, Base Hospital Beruwela and Base Hospital Thelippalei

### Achievements/special events in 2021 (up to 30th of June 2021)

- Provided basic logistic facilities such as waste bins and waste carts to healthcare institutions under UNICEF funding – District General Hospital Chilaw, Provincial General Hospital Badulla and Base Hospital Panadura

### Completed activities in 2020

Project description	Total estimated cost (LKR)	Physical progress by 31.12.2020	Financial progress by 31.12.2020
1. Capacity-building of health staff to manage healthcare waste and prevention of infections-under WHO funding	1,842,295.86	100%	100%
2. Capacity-building workshops for staff handling healthcare waste in selected healthcare institutions-under UNICEF funding	636,851.00	100%	100%
3. Developed and printed a training module on healthcare waste management for staff handling healthcare waste-under UNICEF funding	374,422.57	100%	100%
4. Provided basic logistic facilities such as waste bins and waste carts to healthcare institutions to improve healthcare waste management-under UNICEF funding	1,875,400.00	100%	100%
5. Strengthening healthcare waste management in healthcare institutions during COVID-19 outbreak-under UNICEF funding	1,818,100.00	100%	100%

**Completed activities in 2021 (up to 30th of June 2021)**

Project description	Total estimated Cost (LKR)	Physical progress by 31.06.2021	Financial progress by 31.06.2021
1. Strengthening healthcare waste management in healthcare institutions during the COVID-19 pandemic-under UNICEF funding	4,000,100.00	100%	100%

**Special Development activities planned for 2021**

- Development of healthcare waste management provincial plans
- Development of National Strategic Plan on Health, Environment and Climate Change

**OCCUPATIONAL HEALTH PROGRAMME****Vision**

A healthy workforce contributing to the sustainable development of Sri Lanka

**Mission**

To contribute to the attainment of the highest possible levels of health of all workers through the provision of comprehensive, sustainable, equitable and quality occupational health services in a supportive and worker-friendly setting leaving no worker behind

**Objectives**

- To promote and maintain the highest degree of health among workers in all occupations
- To prevent adverse effects on health among workers caused by working conditions
- To protect workers from occupational risks resulting from factors adverse to health
- To adapt work to workers and workers to work

**Achievements/special events in 2020****1. Development of guidelines**

- Development of common guidelines for preparedness and response for COVID-19 outbreak for work settings

*Cover of the book 'Operational guidelines on preparedness and response for COVID-19 outbreak for work settings' (English, Sinhala and Tamil versions)*



- Development of specific guidelines for preparedness and response for COVID-19 outbreak for different work settings-*Apparel industry, manufacturing industry, government and private offices, government and private banks, barber and beauty salons, supermarkets, economic centers, open markets, groceries and small boutiques, book shops and communication shops, mobile food vendors, street vendors, solid waste handlers, restaurants, hospitality industry, tailor shops, textile shops, postal services, universities, and animal farms*
- Development of comprehensive guidelines for preparedness and response for COVID-19 outbreak for different work settings-*Manufacturing industry, apparel industry, government and private banks, government ministries and departments and the Ministry of Health*



*Front pages of the developed comprehensive guidelines*

- Development of circular guidelines with regard to the facilitation of operations in tea factories and export processing and manufacturing industries to the public health staff, during the COVID-19 outbreak
- Development of a guideline for screening and laboratory testing of employees for COVID-19

## 2. Development of IEC materials

- Development of IEC materials for workplaces with regards to prevention and response to COVID-19

## 3. Establishment of workplace monitoring mechanisms

- Introduction of 'Workplace COVID-19 daily alerts', a Google alert form to the Board of Investment (BOI) enterprises located in zones and outside zones
- Monitoring of enterprises under BOI regularly for early identification of COVID-19 outbreaks at the enterprise level

- Conducting review meetings to assess the preparedness and response for COVID-19 among BOI industries (14 review meetings were conducted covering all BOI zones and 5 review meetings were conducted in 5 districts)

#### 4. Awareness raising

- Capacity building workshops for health staff to engage in occupational health and safety activities during COVID -19 pandemic
- Capacity building workshops for the management of industries
- Capacity building of cooperate staff, focal point of enterprises on preparedness and response for COVID-19 outbreak
- Capacity building workshops for employees on preparedness and response for COVID-19 outbreak
- Awareness raising on workplaces preparedness and response for COVID-19 through mass media

### Achievements/special events in 2021(up to 30<sup>th</sup> of June 2021)

#### 1. Development of guidelines

- Development of revised specific guidelines for preparedness and response for COVID-19 outbreak for work settings



- Development of revised guideline for screening and laboratory testing of employees for COVID-19

#### 2. Development of IEC materials

- Development of IEC material for workplaces for prevention and response to COVID-19

### **3. Establishment of workplace monitoring mechanisms**

- Establishment of a monitoring mechanism to review the preparedness and response for COVID-19 for the selected work settings
  - The BOI enterprises - within zones and outside zones
  - Banks and non-bank financial institutes
  - Government Ministries and State Ministries
- Monitoring of enterprises under BOI regularly for early identification of COVID-19 outbreaks at the enterprise level

### **4. Raising awareness**

- Capacity building workshops for the management of industries, focal points, plantation sector, banks and other non-bank financial institutions on preparedness and response for COVID-19 outbreak.
- Awareness-raising on workplace preparedness and response for COVID-19 through mass media.

### **5. Special development activities planned for 2021**

- Development of national occupational health safety and wellbeing programme for healthcare workers

## **Food Control Administration Unit (FCAU)**

### **Introduction**

Director General of Health Services (DGHS) is the Chief Food Authority (CFA) of Sri Lanka under Food Act No.26 of 1980 which is the legal basis. The Food Control Administration Unit which comes under the Directorate of Environmental Health, Occupational Health and Food Safety is responsible to protect consumer's health by ensuring that food imported, produced, marketed, distributed and consumed meets the highest standards of food safety and hygiene. It coordinates and monitors regulatory services and provides technical guidance to local authorities in order to ensure the availability of safe and wholesome food for consumers.

### **Vision**

A healthier nation through provision of safe food for all

### **Mission**

Dedicated and using science base to protect consumer's health and build consumer trust by ensuring that food consumed, distributed, marketed or produced meets the highest standards of food safety and hygiene

### **Objectives**

- To protect consumers from preventable health risks
- To provide information to consumers to enable better consumer choice
- To protect consumers through a fair and effective science-based food regulations that supports comparative markets.
- To coordinate national food surveillance, enforcement and food recalls
- To support food safety at ports of entry

### **Achievements/ Special Events in 2020**

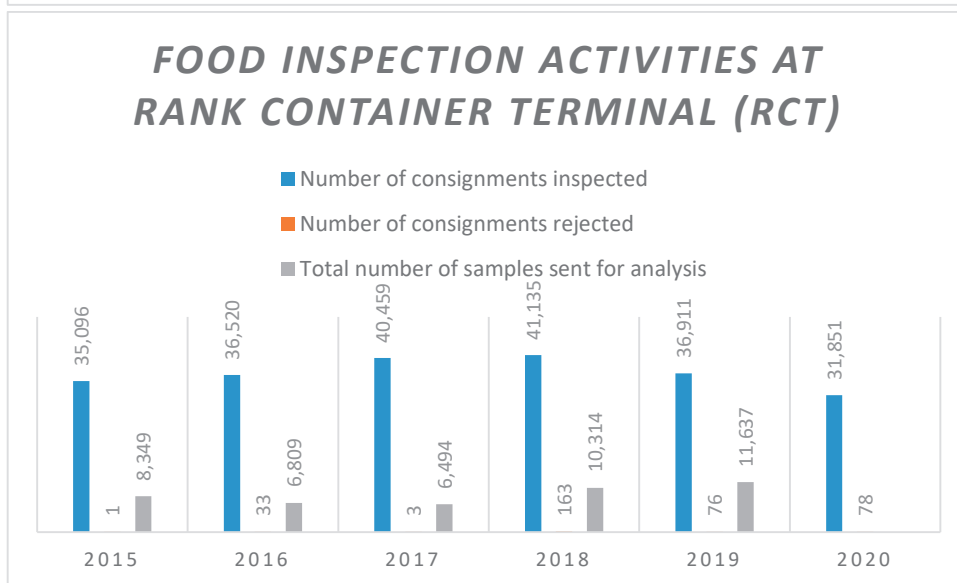
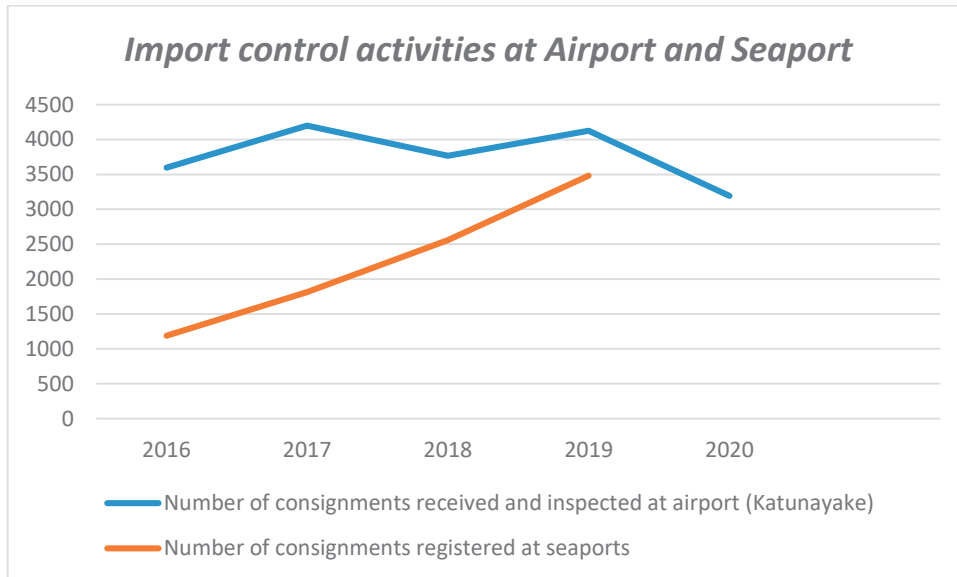
- i. A national food survey was carried out in 2020
- ii. Food (Wheat flour) Regulations and Food (Trans fats) Regulations were developed under food act
- iii. Food (Labelling and Advertising) Regulations and Food (Mycotoxin) Regulations updates were finished
- iv. MOH and PHI reviews for food related activities were carried out for the first time

**Ongoing development project details**

Project Description	Total Estimate Cost	Physical Progress 31.12.2020	Financial Progress by 31.12.2020
Strengthening of NIHS Lab	2.1 Mn	100%	100%

**Last 5-year performance trend**

**1. Import control**



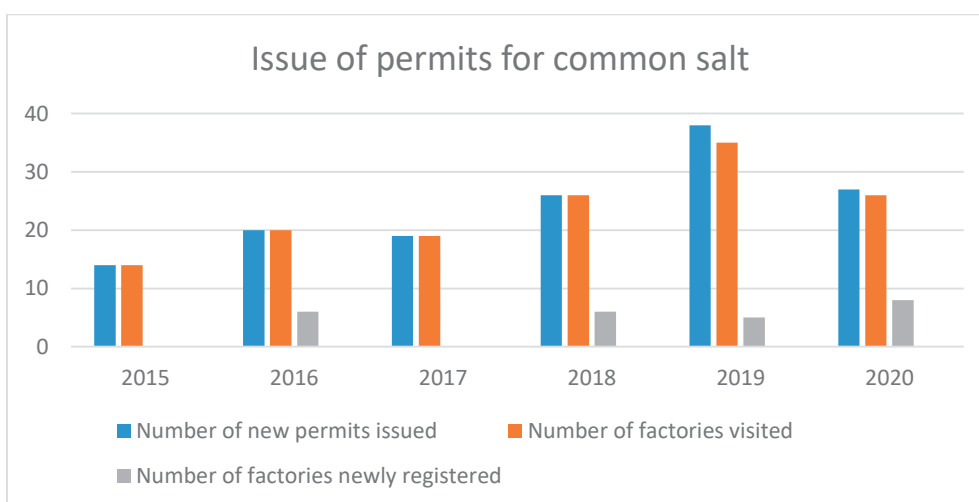


## 2. Export Control activities

### Export control activities of the unit

Activity	2016	2017	2018	2019	2020
Number of Health certificate issued	9,868	11,320	10,848	12,334	11,566
Number of food factories newly registered	76	49	55	6	39
Total Number of factories registered as an export food factory at FCAU	748	797	853	859	960
Number of factories visited	35	17	31	31	58

## 3. Domestic control



## 4. National water quality surveillance

### Water Quality Surveillance - 2018 - 2020

Year	Public water supplies sampled				Private water supplies sampled			
	Bacteriological		Chemical		Bacteriological		Chemical	
	Number of samples taken	Number satisfactory	Number of samples taken	Number satisfactory	Number of samples taken	Number satisfactory	Number of samples taken	Number satisfactory
2018	10488	3307	825	849	3615	3805	606	216
2019	16730	6800	2945	3328	5137	2451	609	309
2020*	7111	3296	1344	1757	2682	3231	428	177

\* Some districts have sent data only for the 1<sup>st</sup> quarter of 2020

### Special development activities planned for 2022

1. Infrastructure development and strengthening of food sampling and analysis
2. Conduct National food survey
3. Capacity building of authorized officers and health care staff
4. Strengthening of website and use of online platforms in food related activities

## 4.2.7 Estate and Urban Health

### Introduction

Estate and urban under-settlement populations are both vulnerable segments of the Sri Lankan population. They are considered vulnerable due to poor socio-economic factors, inclusive of poor housing and sanitation and poor health-seeking behaviors and practices. Estate and Urban Health Unit is the focal point for improvement of the health status of both vulnerable communities.

### Vision

Sri Lanka with healthy, productive and empowered estate and urban populations

### Mission

To plan and implement a comprehensive programme to reduce health disparities in estate and urban communities by improving health services and their utilization among estate and urban populations to achieve health comparable to national indicators through the development of infrastructure, human resources and equitable service delivery.

### Goal

To upgrade the quality of life of the estate and the urban under-settlement populations by improving the overall health and health services

### Objectives

#### Estate health

- To improve the health status of the plantation community by minimizing health gaps that exist between the plantation community and the other communities, in the provision of basic health care services, through targeted interventions and by working in collaboration with health and non-health stakeholders
- To enable the plantation community to obtain government-provided curative and preventive health services by supporting in implementation of all national health

programmes and by developing a good communication system between plantation management and regional public health staff, for health promotion and empowerment of the plantation community

- To take over all plantation sector health institutions under the Ministry of Health and upgrade the services according to the National Health Policy

### Urban Health

1. To improve the health status of the urban under-settlement communities (ex: slum & shanty areas) by addressing the disparities within the sectors by strengthening collaborative partnership with all health and non-health stakeholders
2. To integrate health into all policies (eg: city planning and development) by developing coordination with other sectors
3. To streamline the legislature relevant to urban health for strong urban governance
4. To provide the urban migrant population with basic facilities for healthy living (safe food, water and shelter)

### Achievements/special events in 2020

1. Proposal to acquire 450 estate health institutions in a phased-out manner, to the government sector, according to the cabinet decision in May 2018 has been developed with the approval from all relevant stakeholders.
2. Collaborative partnerships for coordinated urban health promotion with local authorities (mayors, commissioners, chairpersons and secretaries) were developed.

### Ongoing development project details

Project description	Total estimated cost	Physical progress by 31/12/2020	Financial progress 31/12/2020
<b>Acquisition of estate health institutions to the government sector</b>	925 million	Advocacy meetings were conducted with all stakeholders in relevant ministries and relevant districts, and the proposal was prepared.	0.01%

<b>Establishment of 20 Healthy Lifestyle Corners in selected urban under-settlement settings in Colombo district</b>	3 million	Settings and human resources were identified to carry out the functions.	00
<b>Establishment of 60 Breast Feeding Corners in Child Development Centers in selected estates in Nuwara Eliya, Badulla and Ratnapura districts.</b>	3 million	Estates and Child Development Centers were identified	00

### Last 5 years' performance trend

Vote number		Allocation Rs.	Progress Rs.
<b>2020</b>	111-02-15-009-2509(11)	400,000.00	390,798.68
	111-2-14-0-2509(11)	1,100,000.00	632,474.40
	111-02-13-3-2509(12)	500,000.00	
	UNICEF	3,600,000.00	2,189,797.16
	World Bank	75,000.00	74,444.00
	Petty Cash		33,053.00
<b>2019</b>	111-02-14-0-2509 (11) Capital expenses	2	154,701.52
	WFP direct funding. Ongoing project. Data collection completed on 25.07.2019	2	00
<b>2018</b>	111-02-14-35-2509-0-11 Health Promotion & preventive control & NCDs	5	2,121,969.84
<b>2017</b>	111-02-15-9-2509-(11) Health promotion & other	20	15,001,779.00
	11-02-13-41-2104(11) Construction of building	20	221.53 M
<b>2016</b>	111-02-15-9-2502 (11) Development of preventive health services in the estate	20	6,913,459.80
	19-41-2014(11) Improve curative health services	150	18,149,958.17

### Special development activities planned for 2021

- Continuation of activities in the acquisition of estate hospitals to the government sector
- Conduct health promotion activities in collaboration with other preventive health programmes in the Ministry
- Introduction and continuation of the communication platform with Ministry of Health team and Estate Managers to all provinces
- Establishment of National Urban Health Steering Committee and development of collaborative partnerships with local authorities, UDA settlements & Projects Division and Urban Settlement Development Authority for coordinated urban health promotion
- Modifying legislature (MC Ordinance, UC ordinance, Nuisance Ordinance, Pradeshiya Sabha Act) for strong governance
- Development of Urban Health Guiding Framework & tools for healthy urban developments to incorporate health promotion concepts in urban planning & development projects
- Establishment of Healthy Lifestyle Corners (Wellness Corners) and champion groups in selected urban settlements aiming health promotion activities, screening for Non-Communicable Diseases and health promotion

### 4.2.8 Quarantine Services

#### Introduction

The quarantine unit of the Ministry of Health is the main partner involved in maintaining border health security in Sri Lanka. The main responsibility of this unit is to limit and respond to the international spread of diseases and other public health threats while avoiding unnecessary interference with international traffic and trade. Protection measures seek to prevent harm to human health, including the health and wellbeing of international travelers, aircraft and ship crew, and the general public.

The Quarantine Unit of the Ministry of Health works with other agencies with border control responsibilities including security, customs, biosecurity, maritime and aviation transport, animal health, policing and immigration responsibilities and other units of the Ministry of Health.

Public health offices managed by the Quarantine Unit are Airport Health Offices at International Airports (Bandaranayake International Airport, Mahinda Rajapaksa International Airport - Mattala, Jaffna International Airport, Rathmalana International Airport), Port Health Offices, International Ports (Colombo, Galle, Trincomalee, Hambantota

and Norochcholai), Assistant Port Health Office at Medical Research Institute and Immigration Health Unit.

Assistant Port Health Office of Quarantine Unit is involved in vaccination of travelers against yellow fever, Meningococcal meningitis and Polio.

The Ministry of Health with the International Organization for Migration (IOM) conducts inbound health assessment of resident visa applicants and screen them for Malaria, Filariasis, Tuberculosis and HIV. Immigration Health Unit of Quarantine Unit refers the positive applicants to relevant Public Health Campaigns of the Ministry of health and monitor their follow up. The history of the notification of communicable diseases in Sri Lanka dates back to the late 19<sup>th</sup> century as the Quarantine and Prevention of Diseases Ordinance had been introduced in 1897 to implement the notification system on communicable diseases in the country. Sri Lanka is also legally bound to comply and obliged to implement the International Health Regulations (IHR) - 2005. Quarantine Unit is one of the National Focal Points of International Health Regulations (IHR) - 2005 in Sri Lanka.

### **Vision**

Country free of international spread of diseases

### **Mission**

Effectively protecting, preventing and controlling of the possible entry of diseases or an event with public health risks to Sri Lanka without causing significant disturbance to international traffic and trade

### **Goal**

To ensure the maximum security against the international spread of diseases, with the minimum interference with world traffic and trade. This includes the measures to be adopted for preparedness and response during a Public Health Emergency of International Concern (PHEIC) or in a situation that might lead to a PHEIC.

### **Objectives**

1. To strengthen the points of entry (PoE) to prevent a possible entry of diseases concerned with international spread complying with IHR - 2005
2. To strengthen the surveillance system effectively detecting the disease threats and other health hazards at the PoE
3. To establish and develop Health Notification and Information System at PoE which links with the National Surveillance System
4. To strengthen the legal framework including the issues related to Public Health Emergency of International Concern (PHEIC) into the Quarantine Act

5. To train public health staff on border health security and IHR - 2005
6. To conduct operational research related to IHR - 2005
7. To improve the communication and corporation with WHO and member states

### Achievement and special events in 2020 and early 2021

- Airport Health Office, BIA and Port Health Office, Colombo received one vehicle each from ADB funds (A requirement of strengthening the implementation of International Health Regulations – 2005).
- Trained health and non-health staff of Points of Entry to facilitate maritimately and aviation transport during the pandemic of COVID-19
- Submitted the filled State Party Annual Reporting Tool on IHR - 2005 to WHO
- Established isolation centre at the Colombo Port Health Office
- Conducted COVID-19 vaccination programs by Airport Health Office staff and Port Health Office staff of Quarantine Unit for workers at Points of Entry
- Conducted COVID-19 PCR sample collection from travelers and workers by Airport Health Office staff and Port Health Office staff of Quarantine Unit at Points of entry

### Ongoing development project details

#### GoSL Funds

Project description	Total estimated cost (Rs. Mn)	Physical progress by 31.12.2020	Financial Progress by 31.12.2020
<b>1. Health education programs for staff (Health and non-health), simulation drills</b>		01. Training for postgraduate doctors on IHR - 2005 & activities of Quarantine Unit & Airport/Port Health Offices 02. Trained staff for PCR sample collection 03. Awareness programs for staff of the Airport & Port Health Offices, Immigration, Customs, SLPA and AASL on COVID - 19 preventive measures	

<b>2. Designing &amp; printing of SOP books</b>	1	It will be done by WHO.	
<b>3. Review meetings</b>		<p>01. Conducted meetings on the situation of Corona Virus for staff of Airport/Port Health Offices</p> <p>02. Conducted the quarterly review meeting</p>	0.05
<b>4. National Steering Committee meeting on IHR - 2005</b>		Couldn't conduct the meeting due to COVID - 19 pandemic	

Project description	Total estimated cost	Physical progress by 30.06.2021	Financial progress by 30.06.2021
<b>01. Purchase Equipment to establish core capacities of IHR - 2005</b>	0.5	Already requested equipment from the supply division of the Ministry of Health to provide equipment to the Airport Health Office, MRIA, & it is in the processing stage.	
<b>02. Health education programs for staff (Health &amp; non — health) Simulation drills</b>	0.1	Health education programs have been done for workers at Points of Entry and the Plant Quarantine staff of the Department of Agriculture without spending money.	

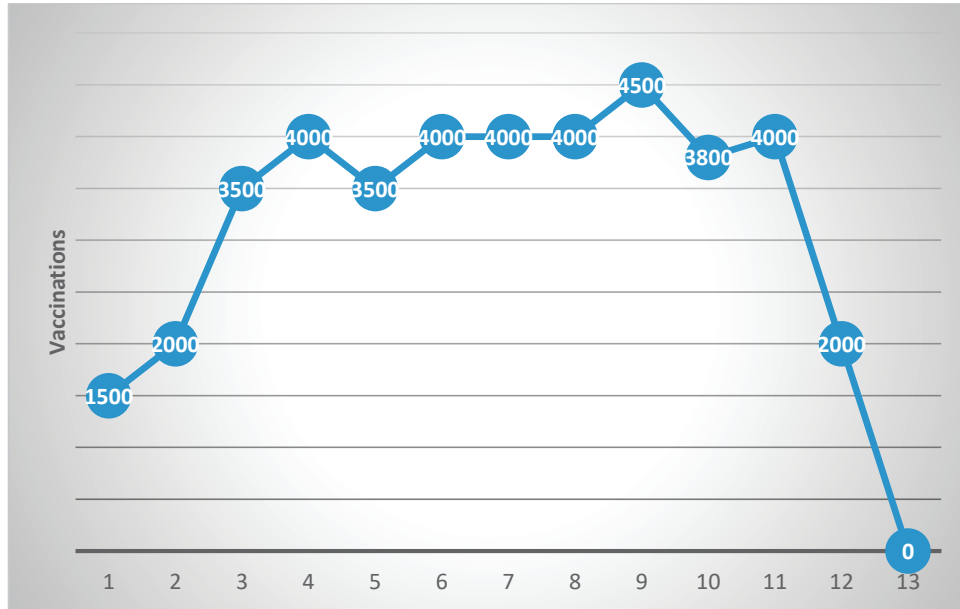


**WHO biennium funds 2020 - 2021**

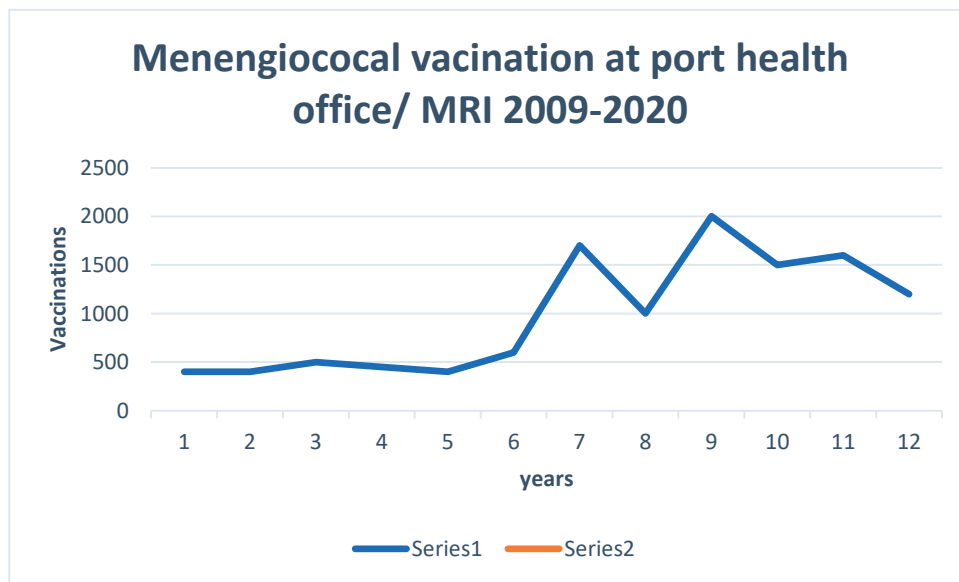
<b>Project description</b>	<b>Total estimated cost</b>	<b>Physical progress by 30.06.2021</b>	<b>Financial Progress by 30.06.2021</b>
<b>1. Midterm evaluation of the activities in National Action Plan for Health Security in Sri Lanka in 2020</b>	600,000.00	Could not perform due to the COVID-19 pandemic	
<b>2. Midterm evaluation of the activities in National Action Plan for Health Security in Sri Lanka in 2021</b>	600,000.00	Could not perform due to the COVID-19 pandemic	
<b>3. Consultative meetings to discuss on annual questionnaire on International Health Regulations' (IHR) Core Capacities</b>	<b>1,121,900.00</b>	<b>Conducted. Filled report and sent to WHO</b>	<b>115,400.00</b>
<b>4. Technical and travel facilitation to attend the annual workshop of the collaborative arrangement for the prevention and management of public health events in Civil Aviation Asia Pacific CAPSCA 2020</b>	1300,000.00	Could not perform due to the COVID-19 pandemic	
<b>5. Technical and travel facilitation to attend the annual workshop of the collaborative arrangement for the prevention and management of public health events in Civil Aviation Asia Pacific CAPSCA in 2021</b>	1300,000.00	Could not perform due to the COVID-19 pandemic	

Performance trends

**Yellow fever vaccination at Assistant Port Health Office/Medical Research Institute 2009-2020**



**Meneggiococal vaccination at port health office/ MRI 2009-2020**



**Pratique granted for vessels by Port Health Office, Colombo 2009-2020**

Special development activities planned to purchase equipment for strengthening of activities of Quarantine Unit and Public Health Offices at POE with ADB funds.

Fill the State Party Annual Reporting Tool on IHR - 2005 of WHO with the involvement of health and Non-health stakeholders.

#### **4.2.9 Care for Youth, Elderly, Displaced and Disabled Persons**

##### **Vision**

A country with an active healthy aging population optimizing the quality of life for youth, elderly & persons with disabilities

##### **Mission**

To improve the quality of youth, elderly and disable persons through the improvement of health facilities, disease prevention and health promotion according to the health master plan in Sri Lanka

##### **Elderly health care**

##### **Vision**

The healthy, active and productive elderly population

##### **General objectives**

1. To improve the physical, mental and social well-being of the present elders
2. To achieve a healthy, more active and more productive elderly population in future

##### **Disability health care**

##### **Vision**

Improve the quality of life of disabled persons

##### **General objective**

To improve the health services for disabled persons

##### **Youth-friendly health services**

##### **Vision**

Healthy and productive adolescent and youth population

##### **General objective**

1. To improve knowledge, attitude and life skills among youth to reduce youth problems and improve their well being

### Achievement and special events in 2020 and early 2021

Project description	Total estimated cost Rs.	Financial progress on 30 <sup>th</sup> June 2021	Physical progress on 30 <sup>th</sup> June 2021
<u>Elderly</u> Advocacy and awareness for the prevention of COVID-19 for vulnerable populations (elderly, disabled persons) <b>01. Elderly persons with disabilities/caregivers awareness through electronic and printed media</b>  <b>02. Collaboration with multi-stakeholders for prevention and service provision for vulnerable groups during COVID-19 (National Secretariat for Elderly and Help Age Sri Lanka)</b>  <b>03. Active collaboration with interministerial and directorate in developing a guideline for new normalization after COVID-19</b>	Funding by WHO	100%	100%
<b>04. Improvement of model elderly care unit at DH Athurugiriya</b>	5 Million	3.5 Million Balance - 1.5 Million	80%
<b>Total</b>	5 Million		

### Ongoing development project in 2020 - 2021

Description	Allocation Rs. Mn.	Expenditure Rs. Mn.	Progress
<u>Elderly</u>			
<b>01. Development and implementation of the National Strategic Plan on Healthy Ageing and strengthening of the services available for the older people supported.</b>	1,875,006.00	1,111,798.58 Balance - 763207.42	59% (Ongoing)
<u>Disability</u>			
<b>02. Development and implementation of the National Strategic Plan for Rehabilitation and implementation of the revised National Guidelines on Rehabilitation</b>	1,869,867.00	643,169.13 Balance- 1,226,697.87	34.4% (Ongoing)
<b>Total</b>	3,744,873.00	1,754,967.71	
<b>Ongoing development projects - 2021</b>			
Description	Allocation Rs. Mn	Expenditure	Progress
<b>03. Establishment of Elderly care units at DH Udupussallawa &amp; DH Pallebadda</b>	10	Ongoing	Ongoing
<b>04. Purchase equipment to Directorate of YED</b>	1.5	On going	On going

05. Celebrating International Elderly Day on the 03 <sup>rd</sup> of October 2021	0.5	On going	On going
06. Improvement of model Elderly Care Unit at DH Athurugiriya	02	On going	On going
<b>Total</b>	14		

## 4.2.10 National Authority on Tobacco and Alcohol

### Vision

A country and people free of tobacco & alcohol use.

### Mission

Mobilizing all social sectors to liberate our society from harm caused from tobacco and alcohol.

### Objectives

- To identify the board and specific policies in relation to tobacco and alcohol (and other narcotics) for protecting Public Health.
- To eliminate tobacco and alcohol related harm through the assessment and monitoring of the production, marketing, advertising and consumption of tobacco products and alcohol products.
- To make provisions discouraging persons especially children from smoking or consuming alcohol by curtailing their access to tobacco products and alcohol products.
- To promote and adopt and implement clean air laws and restrict the availability spaces to protect the community from tobacco and alcohol.
- To propose and promote all other measures, including cessation tobacco and alcohol programmes necessary to prevent harm from tobacco and alcohol to the population

### Functions

- Advise the Government on the implementation of the National Policy on Tobacco and Alcohol.
- Encourage and assist health promotion through the media sponsorships and community-based projects.
- Recommend measures to minimize the harm arising from the consumption of tobacco products and alcohol products.
- Recommend measures in consultation with the National Dangerous Drugs Control Board, for the elimination or minimization of illicit drug use.
- Recommend legal, taxation, administrative and other measures necessary for the implementation of the National Policy on Tobacco and Alcohol.

- Monitor and evaluate the implementation of such policy.
- Evaluate the impact of policy measures and advise the government on such modifications to the Policy as may be necessary.
- Encourage and assist research on issues relating to Tobacco and Alcohol.
- Monitor economic, health and other issues relating to the production, consumption and marketing of tobacco products and alcohol products.
- Conduct, promote and co-ordinate research in relation to the use of Tobacco and Alcohol.
- Secure participation of all necessary governmental, or non-governmental agencies and private sector organizations in the implementation of the National Policy on Tobacco and Alcohol.
- Encourage active community participation in the implementation and monitoring of the National Policy on Tobacco and Alcohol.
- Receive communications from the public on issues relating to tobacco and alcohol and to recommend necessary action in relation thereto the implementing agencies.
- Act as the coordinating agency for all activities carried out by the government and nongovernmental agencies and organizations

### **Achievements and special events in 2020 -2021**

National Authority on Tobacco and Alcohol, with the mission of mobilizing all social sectors to liberate our society from harm caused by tobacco and alcohol, has appointed new subcommittees as following.

01. Amendments Subcommittee to the NATA Act
02. Develop taxation formula for Tobacco & Alcohol Subcommittee
03. Cessation & Prevention of Tobacco & Alcohol Subcommittee
04. Smokeless Tobacco Subcommittee
05. Alternative Crops for Tobacco Cultivation Subcommittee
06. The curriculum development on Tobacco and Alcohol prevention for medical undergraduates Subcommittee
07. Enforcing & Strengthening NATA Media Policy Subcommittee

Name of the Subcommittee or Implemented activity	Objective of the subcommittee	Key Achievements
<b>Amendments subcommittee to the NATA Act</b>	To propose necessary amendments to the effective functioning of the NATA Act. These include increasing the scope of the Act, increasing penalties, introducing standard packaging, restricting children's employment, restricting the sale of tobacco and alcohol in sensitive areas, and increasing the powers of the magistrate courts	<ul style="list-style-type: none"> <li>• Identified the key areas to amend in the NATA Act. E.g.: Other than sections 4 to 13 every other section was proposed to amend.</li> <li>• In order to initiate the legislation process, it has been already drafted a proposal in Sinhala medium to cover the identified key areas where to amend in the NATA Act. (Explaining in detail what sections to be amended and how to be amended.)</li> <li>• The "Amendment Sub Committee to the NATA Act" has started to write the Cabinet Paper.</li> </ul>
<b>Develop taxation formula for Tobacco &amp; Alcohol Subcommittee</b>	To develop simple transparent taxation formula for tobacco and alcohol. To achieve these objectives, the national-level process has been implemented. World Health Organization (WHO), Ministry of Finance, and non-governmental organizations such as the Institute of Policy Studies have been collaboratively working with other relevant ministries and government institutes to develop the taxation formulas.	<ul style="list-style-type: none"> <li>• Gathered information on tax indexation in low-income countries, upper-middle-income countries, lower-middle income countries, and high-income countries</li> <li>Obtain the expertise from UCT to develop a taxation formula</li> <li>Developed a simple and uniform taxation formula for tobacco</li> <li>Developed Tobacco tax indexation formula was presented to the Minister of Health.</li> <li>The developed taxation formula is in the finalizing stage.</li> </ul>
<b>Cessation &amp; Prevention of Tobacco &amp; Alcohol Subcommittee</b>	To develop cessation & prevention of tobacco & alcohol awareness programs according to target group-oriented manner for sustainable change in the public. To achieve the objectives, National level programmes	<ul style="list-style-type: none"> <li>• NATA and Ministry of Education collaboratively prepared a curriculum for master trainers in the education sector with the help of relevant expertise.</li> <li>A special counseling course was conducted to develop knowledge, attitude and skills on counseling by targeting prevention and control of</li> </ul>

	<p>have been implemented collaboratively with Ministry of Health, World Health Organization (WHO), Ministry of Education and other relevant Ministries and government institutes.</p>	<p>Tobacco and Alcohol. The counseling course has been developed to work effectively in contributing to the processes of counseling skills for different target groups for prevention and control of Tobacco and Alcohol.</p> <ul style="list-style-type: none"> <li>•The course has been continued since March for 32 individuals representing PHIs, excise officers, police officers, Officers in youth co-ops and the NATA Staff. Eight sessions were completed and only two more sessions are remaining to complete the course.</li> <li>• A public opinion survey was conducted to analyze the opinions of the general public related to tobacco and alcohol. Responses were gathered to the website and to hard copies and the data are in the analyzing phase.</li> </ul>
<p><b>Smokeless Subcommittee Tobacco</b></p>	<p>To decrease usage of smokeless tobacco among the public and encourage users to quit from its use. (To achieve the objectives, National level programmes have been implemented collaboratively with Ministry of Health, World Health Organization (WHO), Ministry of Education, Ministry of Buddhasasana, Religious and Cultural Affairs, Sri Lankan State Universities and other relevant Ministries and government institutes.)</p>	<p>Study was conducted by NATA on the risk of oral cancer and smokeless tobacco consumption among the Sri Lankan indigenous community.</p> <ul style="list-style-type: none"> <li>• Introduced a developed (Chewable ayurvedic product) to the market through government institutions and Sri Lanka Ayurvedic Drug Corporation (SLADC).</li> <li>• Developed product was launched to the public along with "scientific magazine on 26th March 2021 at BMICH.</li> </ul>
<p><b>Alternative Crops for Tobacco Cultivation Subcommittee</b></p>	<p>To eliminate tobacco cultivation from Sri Lanka and to introduce alternative livelihoods for tobacco farmers. To achieve the objectives, National level programme has been implemented</p>	<p>"Creating sustainable tobacco cultivation free districts through a pilot test" was designed to support tobacco farmers to engage in economically viable alternatives. The pilot test was implemented in Anuradhapura and Monaragala</p>



	<p>collaboratively with Ministry of Health, World Health Organization (WHO), Ministry of Agriculture, Department of Agriculture, Universities and other relevant Ministries and Government Institutes. The target groups include farmer families, vulnerable child groups in the community etc.</p>	<p>districts after analyzing the results of a survey done in two districts. After analyzing the preliminary results of the study, it was identified vulnerable groups within two districts. NATA has created a strong link with the relevant officials in two districts to facilitate the process. IEC materials have been developed to distribute among farmer families and to distribute among agricultural officials.</p> <ul style="list-style-type: none"> <li>• An assessment was done with the economic division of the Faculty of Agriculture, the University of Peradeniya in the Anuradhapura area to capture the economic feasibility of using maize as an alternative crop.</li> <li>• NATA is facilitating the process of creating two districts free from tobacco cultivation.</li> <li>• The results will be used to expanding the project to the Island wide.</li> </ul>
<p><b>The curriculum development on Tobacco and Alcohol prevention for medical undergraduate's Sub-committee</b></p>	<p>To develop a curriculum on tobacco and alcohol prevention for medical undergraduates and implement it in all the state medical faculties in Sri Lanka.</p>	<ul style="list-style-type: none"> <li>• This sub-committee was initiated with honored academia such as professors, Doctors, senior lectures and lectures from all the state medical schools in Sri Lanka. Up to the date, the committee has been upgraded with 14 committee's members of honored academia covering all the state medical schools in Sri Lanka.</li> <li>• The curriculum framework has been prepared by the drafting group.</li> <li>• The curriculum is proposed to the UGC and getting the approval from relevant authorized parties.</li> </ul>
<p><b>Enforcing &amp; Strengthening NATA Media Policy Subcommittee</b></p>	<p>Taking action to stop tobacco and alcohol advertisements carried out by all media in Sri Lanka. It aims to prevent</p>	<p>The subcommittee members took steps to update the pictorial health warnings on cigarette packets.</p>

	indirect and direct promotion of Teledrama and Films, which are primarily broadcasted on television channels, as well as advertisements on the Internet, including on social media and to socialize the media policy framework to liberate future generations from tobacco and alcohol use.	<ul style="list-style-type: none"> <li>The subcommittee is developing sets of photographs for this purpose.</li> <li>The subcommittee is functioning to take all necessary steps to work through media policy to regulate tobacco and alcohol advertising across all media.</li> </ul>
<b>National Symposium on Tobacco and Alcohol Prevention (NSTAP 2021)</b>	To encourage and assist research on issues relating to Tobacco and Alcohol.	The Symposium will be held on 17 <sup>th</sup> December 2021. <ul style="list-style-type: none"> <li>NATA has developed guidelines in this regard and is coordinating the event.</li> </ul>
<b>Proposal Submission on WHO FCTC</b>		Proposal submission for the FCTC secretariat to initiate article 5.3 of WHO FCTC.
<b>Publishing Newspaper Articles</b>	To enlighten the general public on the effects of tobacco and alcohol during .	<ul style="list-style-type: none"> <li>Eleven newspaper articles were published during COVID 19 pandemic period to eliminate tobacco and alcohol</li> </ul>
<b>COVID 19 pandemic period</b>		
<b>Advocacy programme for Sri Lankan media personnel</b>	<p>To appreciate the media personals' contribution towards tobacco and alcohol prevention in the country.</p> <p>To encourage media them towards tobacco &amp; alcohol prevention.</p> <p>To advocate media personnel and stockholders towards tobacco &amp; alcohol prevention.</p>	Honorable minister of health, Pavitradevi Wanniarachchi (MP) graced the occasion as the chief guest and Five digital media channels, four journalists and Sri Lanka Broadcast Cooperation (SLBC) were felicitated behalf of their contribution on tobacco & alcohol prevention at this occasion.
<b>Workshop for trainee Public Health Inspectors (PHIs) in provincial health training center, Batticaloa, Jaffna and Galle</b>	To advocate the authorized officers in implementing the NATA Act.	<ul style="list-style-type: none"> <li>More than 150 trainee PHIs were advocated during three sessions.</li> </ul>

<b>Developing a school based National Level Action Plan to prevent tobacco and Alcohol</b>	To eliminate the use of the tobacco and alcohol among students	The discussed action plan was presented to Hon. Minister (Ministry of Health) and Hon. Minister (Ministry of Education) to sensitize them on the plan.
<b>1948 Quit Line Service</b>		<ul style="list-style-type: none"> <li>Signed the software development agreement for the year 2021.</li> <li>A meeting was conducted with the service provider to upgrade the system.</li> </ul>
<b>GATS Survey (Global Adult Tobacco Survey)</b>		<p>Up to date, all the data were analyzed and have been participated for the consultative meetings to finalize the fact sheet (GATS) with WHO, DCS and the CDC.</p> <p>The fact sheet is in the finalizing phase. It should have to be reviewed and finalized.</p>

### Ongoing Development Program details

Project Description		Total Estimate Cost	Physical progress by 31.12.2020	Financial Progress by 31.12.2020
1	Implementation of the NATA act	1,115,000.00	Advocacy programs for authorized officers. Conducted Amendments to the NATA Act sub-committee	304,425.00
2	Education & Trainings	2,000,000.00	Functioning of Cessation and Prevention and Smokeless tobacco sub committees and Conducted (2) exhibitions	133,290.00
3	Awareness Program & Advocacy Program	1,500,000.00	Conducted taxation sub-committee to plan tobacco taxation formula	410,712.00
4	Research & Information system	1,500,000.00	Functioning of 1948 counselling service	676,150.00
<b>Total</b>		<b>6,115,000.00</b>		<b>1,524,577.00</b>

No	Project Description	Total Estimate Cost	Physical progress by 30.06.2021	Financial Progress by
1	Implementation of the	4,000,000.00	Identified of the violation of media policy, developed necessary amendments and developed taxation with respect to NATA Act.	20,694.00
2	Education & Trainings	2,200,000.00	Developed knowledge on NATA act among authorized officers and conducted counselling course to educate the relevant parties.	42,638.00
3	Awareness Program & Advocacy Program	12,500,000.00	Assisted community-based alcohol and tobacco prevention programs to improve health of the community	42,267.00
4	Research & Information system	3,000,000.00	Launched the developed product (named as "scientific magazine, strengthening 1948 quit line and Developed reports.	1,739,857.79
5	Monitoring & evaluation	2,000,000.00		
6	Strengthening the NATA office	1,300,000.00	Purchased office equipment to the NATA office and conducted capacity training for officers	6,500.00
	<b>Total</b>	<b>25,000,000.00</b>		<b>1,851,956.79</b>

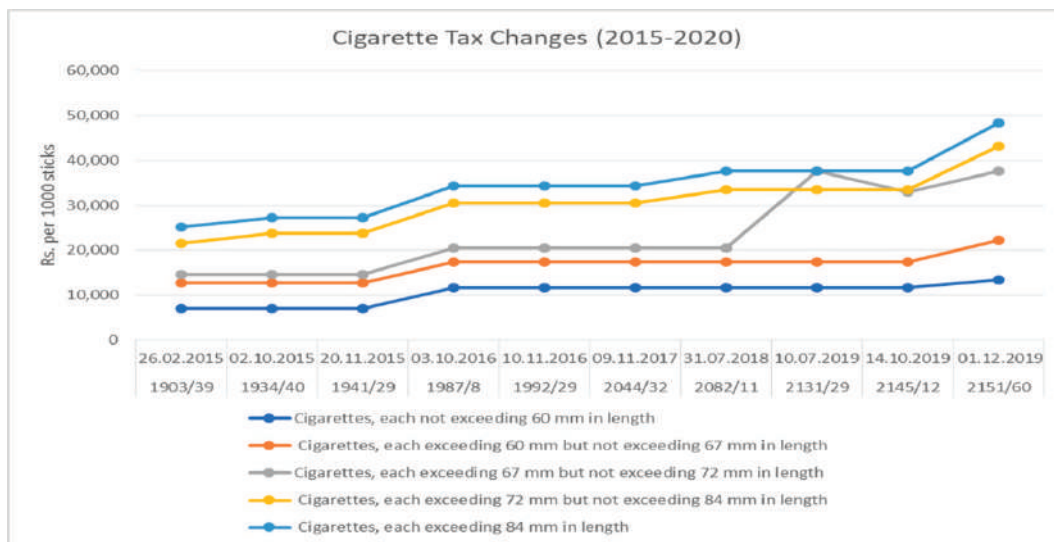
### Special Development Activities Planned for 2021

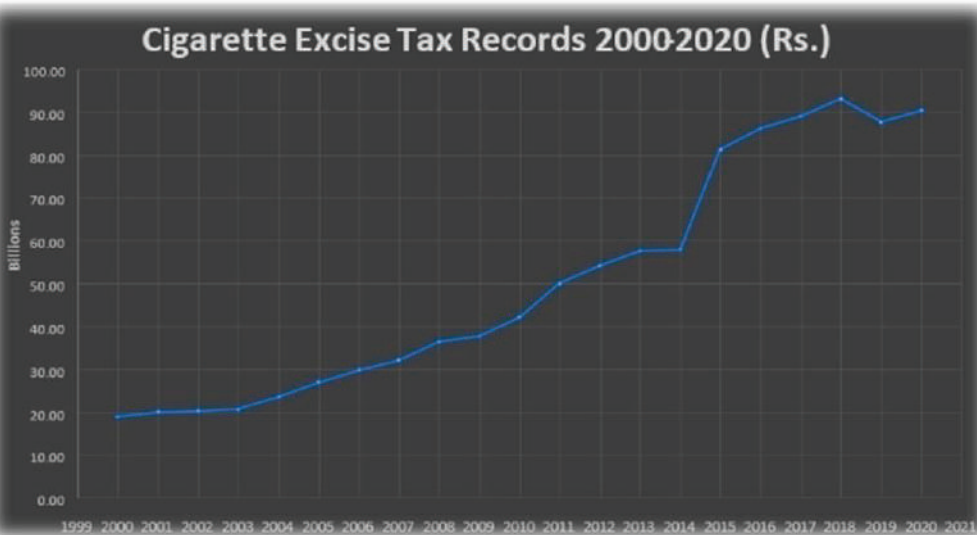
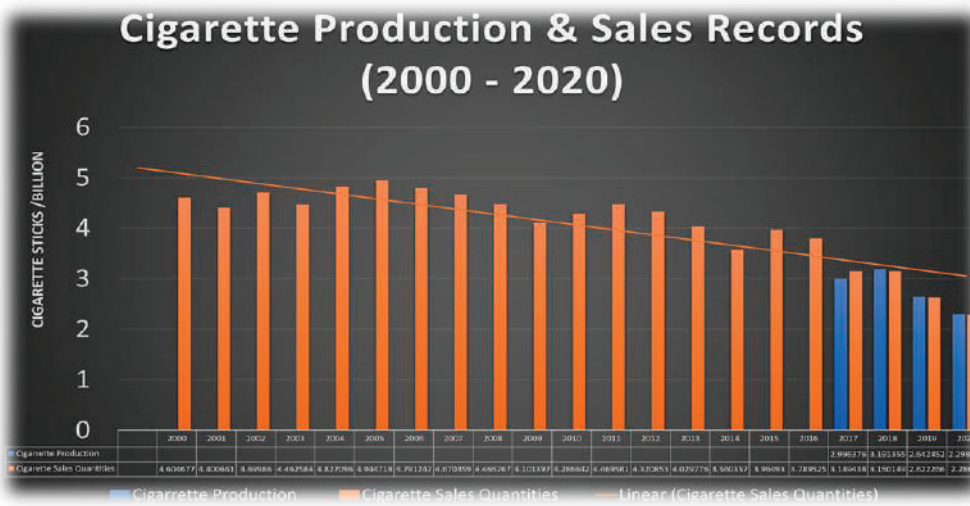
1. Enhancement of Tobacco Free Zones
2. Advocacy workshops for the higher officials of the Ministry of Mass Media and Education
3. Advocacy workshops for authorized officers
4. Develop a system to track illicit trade of tobacco
5. Advocacy programmes during Pilot Project in Anuradhapura and Monaragala districts to Introduce Alternative Crops for Tobacco

Year	Male	Female	Reference
2008	26.8	1.2	Alcohol and tobacco use among males in two districts in Sri Lanka. 2009; De Silva et al
2012	39.6	2.4	National alcohol use prevalence survey in Sri Lanka, 2014 Somathunga, et. al.
2014	48.1	1.2	Prevalence, patterns and correlates of alcohol consumption and its association with tobacco smoking among Sri Lankan adults Katulanda, et al.
2015	34.8	0.5	STEP Survey
2016 (Heavy Drinkers)	16.6	2.4	WHO – Fact sheet
2019	40.89	0.26	NDDCB National Survey

**National Prevalence Survey on Drug Use 2019  
Tobacco Prevalence among Adults (WHO Reports)**

මත්ද්‍රව්‍ය වර්ගය Drug type	වයස අවුරුදු 14 ට වැඩි ස්ත්‍රී ජනගහනයට ප්‍රතිශතයක් ලෙස (As a percentage for total female population of above 14 years)%	වයස අවුරුදු 14 ට වැඩි පුරුෂ ජනගහනයට ප්‍රතිශතයක් ලෙස (As a percentage for total male population of above 14 years) %	වයස අවුරුදු 14 ට වැඩි සම්ස්ත ජනගහනයට ප්‍රතිශතයක් ලෙස (As a percentage for total population of above 14 years) %
සිගරට් (Cigarette)	0.3	32.32	15.80
මද්‍යසාර (Alcohol)	0.26	40.89	19.93
හෙරොයින් (Heroin)	0.018	1.24	0.61
කැනබිස් (Cannabis)	0.02	4.07	1.98
ඖෂධමය පෙති වර්ග (Pharmaceutical Tablets)	0.004	0.32	0.16
වෙනත් (Other)	0.054	1.51	0.76





### 4.2.11 Healthcare Quality and Safety

#### Introduction

Directorate of Healthcare Quality and Safety (DHQS) was established in 2012 as the national focal point that implements healthcare quality assurance programme for Sri Lanka. DHQS has an island-wide network with Quality Management Units (QMU) established in all hospitals above Base Hospital Type B and offices of Regional Director Health Services to execute the quality assurance programme at the respective institutes.

#### Vision

To be the Centre of Excellence to ensure the provision of safety and quality healthcare services in Sri Lanka.

#### Mission

Facilitating healthcare institutions to provide the demonstrable best possible safety and quality healthcare services through continuous improvement while responding to customer expectations with the involvement of all stakeholders.

#### Objectives

1. To strengthen organizational settings towards customer-focused care responsive to their preferences, expectations, and values and patient-center care.
2. To establish effective leadership and develop governance and systems to facilitate healthcare quality improvement and patient safety.
3. To promote evidence-based, ethically accepted clinical practices to ensure the best possible outcome for the patient.
4. To mitigate risk from medications, procedures, and adverse events to ensure safety of patients and staff.
5. To internalize quality improvement strategies to assure shared values in creating health-promoting and environment-friendly healthcare organizations.
6. To develop a competent, healthy, and satisfied workforce to enhance productivity, quality, and safety in healthcare.
7. To promote research in the field of quality improvement and patient safety.

#### Achievements and special events in 2020

Amidst the COVID-19 pandemic, the Directorate of Healthcare Quality and Safety could complete most of the activities listed in its Annual Action Plan for the year 2020. Although the financial progress of the annual action plan was around 63%, the physical progress far



exceeds this percentage as the DHQS conducted the majority of the training programs and review meetings online, adapting to the 'New Normal'.

### **Achievements/Special Events in 2020 are as follows,**

#### **1. Celebration of World Patient Safety Day 2020.**

Featuring the theme "Health worker safety: A priority for patient safety", the Directorate of Healthcare Quality and Safety celebrated the national event of World Patient Safety Day on the 17th of September, at the auditorium of the Directorate. Honorable Minister of Health Mrs. Pavithra Wanniarachchi graced the event as the chief guest along with the distinguished officers of the Ministry of Health.

In parallel to the national event, a program was conducted to share best practices among healthcare institutions. All healthcare institutions were given the opportunity to share their innovative projects and best practices adopted during the pandemic. The best projects were selected by an expert panel and presenting these best practices was one of the key activities during the event.

In parallel to the national event, many healthcare institutions have celebrated patient safety day with the aim of raising awareness on the importance of patient safety. They shared their experiences during the performance review meeting held subsequently, along with photographs of the events.

Illumination of the iconic lotus tower in orange colour took place in parallel to the event, for recognizing the service of healthcare workers during the pandemic.

#### **2. Launching the website of the Directorate of Healthcare Quality and Safety**

The official website of the Directorate of Healthcare Quality and Safety was launched in the year 2020. It also was one of the main activities of the national event of patient safety day 2020. The website is intended to share activities conducted by the Directorate of Healthcare Quality and Safety and it also provides a platform to share best practices of all healthcare institutions.

#### **3. Publishing the Quality supervision tool for primary medical care institutions in Sri Lanka**

In parallel to the Primary Healthcare System Strengthening Project, a quality supervision tool was developed and published by the Directorate of Healthcare Quality and Safety in year the 2020. It was developed as a prerequisite for ensuring the quality of primary healthcare institutions in Sri Lanka.

This will be utilized by the regional directorates of health across the country for the quality supervision of verifiable hospitals under their purview.

#### 4. Re-printing of surgical safety checklist

The surgical safety checklist has been prepared by the Directorate of Healthcare Quality and Safety, adopting the WHO recommended checklist, and was introduced to all hospitals in 2013. This initiative is an essential prerequisite to ensure minimizing errors that can occur during the process of surgery. Since many errors can occur due to communication failures, this format is designed to prevent these errors ensuring surgical safety. The directorate of Healthcare Quality and Safety ensures printing and adequate supplies of the format for all hospitals across the country. Re-printing of 300,000 copies of the checklist was completed in the year 2020, ensuring the continuum of this program.

#### Ongoing Development project details in 2020

	Activities	Allocation (Rs.Mn.)	Expenditure as at 31/12/2020	Physical progress as at 31/12/2020	%
				In word	
1	Development of customer/patients need assessment tool and piloting in different levels	0.05	0.0	Initiated drafting the customer/patients need assessment tool	50
2	Quarterly Performance Review Meeting of Quality Management Units of 45 Line Ministry Institutions (03 days) **	0.4	0.133	2019 annual performance review meeting was done in March 2020. 1st, 2nd and 3rd quarter reviews were conducted as online meetings	100
3	District Performance Review Meetings (DPRM) of Quality Management Units of hospitals (Above Base Hospital Type B) of 26 districts/RDHS Areas **	0.2	0.031	2019 annual district performance review meeting was done in March 2020. Performance reviews of 1st & 2nd Quarters done Via online in December.	100
4	Web development and maintenance	0.65	0.248	Website developed and launched. (Uploading of translations not completed)	80
5	Development of standards and revision of indicators in healthcare quality and safety	0.2		Clinical indicators for 4 major specialities revised. Currently at the finalizing stage.	70
6	Revision of National policy on Healthcare Quality and Safety and development of five year Strategic Plan on Healthcare Quality and Safety	0.5	0.007	Review meetings conducted with WHO consultant and other stakeholders. National policy on healthcare quality and safety and the Strategic	80

				Plan developed. Currently at the finalizing stage.	
7	Workshop on clinical audits (02 day) **	0.185	0.07	1st workshop was conducted. 50 participants were trained in march 2020. second programme was done via Online	100
8	Development and Revision of National clinical Guideline / Protocols / Manuals / Survey formats	0.1	0.032	Conducted three consultative meetings to develop inform consent form for surgical procedures. It was finalized and translation was done to three languages. Four working group meetings were conducted for developing CSSD guidelines.	75
9	Standards/Guidelines printing	4	2.601	Final payment of printing chargers for National paediatrics guidelines on Respiratory Disorder book was done in March 2020 & 1M Surgical Check lists printed	75
10	Strengthening of incident reporting system (Revision of tool)	0.1			0
11	Preparation of data collection tool for clinical indicators	0.05		Initial draft of the tool prepared.	10
12	Training programme on healthcare quality and safety for curative sector (05 day) **	0.49	0.165	1st programme was conducted in September and 44 participants trained. 2nd Programme was conducted in December and 81 participants were trained	60
13	Revision of check list for supervision of primary healthcare institutions and conduct piloting in 3 provinces	0.05	0.021	Checklist for supervision of primary care institutions revised, piloted and published	100
14	Develop resource centre at DHQS	0.05		Requirement of the items to be purchased assessed and listed.	10
15	Establishment of repository on healthcare quality and safety research conducted in healthcare institutions	0.3		Research conducted in healthcare institutions related to healthcare quality and safety were collected	50

16	Celebration of Patient Safety day 2020			Featuring the theme " Health Worker Safety: A priority for Patient Safety" , DHQS celebrated the national event of World Patient Safety Day on 17th September 2020. Hospitals shared their best practices adhered during the COVID19 pandemic. DHQS appreciated their innovative practices.	100
17	Establishment of a distant education system for in-service training by DHQS	3.2		Proposal was sent to WHO	25
18	Strengthening of Directorate on Healthcare Quality & Safety	0.1	0.059	Purchased the colour printer	100
19	Strengthening of Digital Infrastructure at QMU in Line Ministry Institution			Procurement process initiated and 17 printers procured.	

### Last 5-year Financial Performance Trend

No	Indicator	Year				
		2016	2017	2018	2019	2020
1.	Quarterly Performance Review Meetings (PRMs) conducted	75%	75%	75%	50%	100%
2.	Biannual Performance Review Meetings / District Performance Review Meetings (DPRMs) conducted.	50%	50%	100%	100%	100%
3.	Number of( Percentage of) staff trained on Master Trainers on 5S, CQI & TQM, patient safety and clinical audit	255/380 (67%)	329/380 (86.5%)	369/3 80 (97%)	262/3 00 (87%)	209/3 00 (70%)

### Special development activities planned for 2021

1. Development of Strategic Plan of Directorate of Healthcare Quality and Safety 2021-2025.
2. Sharing of best practices among all healthcare institutions.
3. Training and supervision at the provincial level by DHQS.
4. Development of Teleconference unit and online training.
5. Celebration of Patient Safety Day 2021.
6. Revision and printing of the Informed Consent Form.
7. Printing of National Policy on Healthcare Quality and Safety and Strategic Plan on Healthcare Quality and Safety

8. Printing of “Management and Designing of Central Sterile Supplier Department Guideline”
9. Advocacy for medical professionals through SLMA
10. Software/web development and maintenance.
11. Development of customer/patient need assessment tool and exit interview format.
12. Establishment of a repository on healthcare quality and safety research conducted by PGIM trainees.
13. Strengthening of the Directorate of Healthcare Quality & Safety by providing IT equipment and furniture.
14. Development of resource center at Directorate of Healthcare Quality and Safety.
15. Conducted need assessment of preventive staff with regards to quality and safety for future training.
16. Training programme on healthcare quality and safety for minor staff.

#### **4.2.12 Disaster Preparedness and Response Division (DPRD)**

Disaster Preparedness and Response Division is the focal point of the Ministry of Health for the National Disaster Management Framework that aims at reducing mortality, morbidity, and health effects of displacement in the aftermath of disasters by providing strategic, evidence-based direction through preparedness and response functions.

##### **Vision**

Resilient health sector for safer communities.

##### **Mission**

To contribute towards a safer Sri Lanka through improving health sector functioning in relation to disasters, integrating disaster risk reduction into the health sector, and empowering communities as supporters on health sector disaster response.

##### **Objectives**

1. To improve the structural, non-structural, and functional capacity of health facilities through the safe hospitals initiative.
2. To improve human resources for health sector disaster management.
3. To promote stakeholder coordination for health sector disaster management.
4. To improve information support, knowledge management, and research for health sector disaster management.
5. To improve community participation towards health sector disaster management.

6. To integrate result-based monitoring and evaluation to health sector disaster management.

## **Achievements and Special Events in 2020 – 2021**

### **1. Disaster Response Activities**

- **COVID Pandemic**

DPRD office at the Ministry of Health was converted to a Health Emergency Operation Center (HEOC) which functioned 24/7 inclusive of a call center. The health desk of the National Operation Centre for Prevention of COVID-19 Outbreak' (NOCPCO) maintained by DPRD since it was established in 2020 to assist National Operation Center for COVID-19 to liaise with different agencies in the health sector. HEOC continued to compile and circulate the COVID19 situation report Ministry of Health, sentinel surveillance of deaths, emergency resource mobilization from Cooperate Sector and local donors to COVID19 treatment centers and intermediate centers to improve the quality of care in these centers, hosted a range of coordinating meeting with regional level through internal partner communication platforms at HEOC and multitude of emergency response functions were conducted through HEOC.

Information Management Equipment were upgraded at central HEOC with the support of the World Health Organization (WHO) and the Asian Disaster Preparedness Center (ADPC). DPRD assisted in logistics for information management system at HEOC/RDHS office in all 26 districts by providing necessary equipment with the support of WHO. DPRD HEOC assisted in the logistics with the 24/7 operations at the Bandaranaike International Airport. The refreshments and transport were provided for the health staff during the initial crisis period through the emergency funds that DPRD HEOC rapidly mobilized from the disaster response vote of the Ministry of Health. DPRD assisted with human resources for various departments in the health sector in the crisis providing surge capacity through medical officers specially trained for Disaster Management.

Internal Interim Review on health response to COVID19 was conducted by DPRD to identify and self-reflect on main strategies implemented, their outcome, strengths, and challenges at each phase of COVID19 in 2020 under fifteen strategic areas. Disaster Preparedness and Response Division, Ministry of Health, developed the methodology for the review, coordinated the review process, collected, analyzed, and triangulated the data for the review and conducted the review under the guidance of Additional Secretary Medical Services. Recommendations were finalized and circulated to all units representing fifteen strategic areas and handed over to Secretary Health and Director General of Health Services for Collective action.

- **Monitoring of hospital preparedness for COVID19 outbreak in health care institutions**

Hospital preparedness and implementation of preventive measures for COVID19 spread at health care institutions are paramount to combat the COVID-19 outbreak. Thus, hospital preparedness monitoring was conducted through DPRD since the first wave of COVID19, and the process was further strengthened during the second wave. The hospital monitoring survey was conducted at randomly selected hospitals of all levels representing each district at the initial stage. Gradually it was expanded to island-wide. Sixteen key components in a single checklist, facilitated with a google form, visualized at the central level using a dashboard system was developed based on the Ministry of Health guidelines “Hospital Preparedness for COVID – 19 Global Pandemic” and “Hospital Response to evolving COVID-19” issued on 12.04.2020 and 20.10.2020 respectively, and the “WHO guideline” and “checklist” on Hospital Preparedness. Corrective and supportive action to hospital settings based on survey details were taken through Deputy Director General Medical Service I.

- **Community Resilience for COVID19 outbreak**

A project was conducted by DPRD to identify and publicize “Champions” among the general public who restarted/continued their economic activities successfully adapting to new normalcy through innovative approaches and public health measures. People and occupational settings that have well adapted to new normalcy to combat COVID19 were randomly selected by observing different occupational settings of various parts of the country. A news segment was designed and telecasted regularly over two months in partnership with Sri Lanka Rupavahini Cooperation (SLRC) to introduce the “champions of new normalcy”. This was an opportunity given to people to share their real experience of “successful change” and its benefits with the public. This was a community-led, multisectoral coordinated effort using innovative communication approaches to combat COVID19 while securing the economy of the country. The news segment was published as “Rise again 2021 move forward with confidence” (“Yali nagitimu 2021, Vishvasayen Perata”)

- **Advocacy on implementation of public health measures for prevention and control of COVID19 outbreak**

Community Resilience through continuous media advocacy and public communication on prevention and control of COVID19 was carried out. Advocacy for parliament staff, staff of prime minister office and other government and private sector key organizations were conducted to minimize the spread of disease within occupational settings and ensure continuity of service.

## **2. Preparedness activities**

Development of camp management guidelines and training of disaster management officials at the district level was conducted in collaboration with the disaster management center to

ensure preparedness for monsoon season. Capacity building workshop on National Training Course on Radio Nuclear Emergency Preparedness and Response for First Responders was conducted in collaboration with National Atomic Energy Regulatory Council as a virtual course. A curriculum review of Hospital Preparedness in Emergency (HOPE) adapting to Sri Lanka was conducted along with multisectoral stakeholders. Table Top Simulation Exercise on Health Response to Beirut-like Explosion in Colombo Sea Port was conducted at DPRD with multisectoral stakeholders inclusive of Disaster Management Center as a preparedness activity for a similar event. DPRD- representing the Ministry of Health, applied for the extended assistance program on Biological Weapon Convention (BWC) by the United Nations Office for Disarmament Affairs (UNODA). DPRD got selected as the focal point for Biological Weapon Convention for the extended assistance program for implementation of BWC, among many competitive applicants from other countries. As a first step, International virtual training on Biological Weapon Convention and its Confidence Building Measures was organized by DPRD in Collaboration with UNODA and the European Union with the participation of 100 multisectoral stakeholders in June 2021. DPRD collaboration with Disaster Management Center for Preparedness activities for all anticipated disasters within 2020-2021 with regard to health sector preparedness and response.



## 4.3 NUTRITION

The subject of Nutrition has related functions in several ministries and requires a coordinated approach.

### 4.3.1 Nutrition Division

#### Introduction

Nutrition Division is the focal point to coordinate nutrition interventions across the country on behalf of the Ministry of Health. We also collaborate with other related ministries, Development Partners and Non-Governmental Organizations to conduct nutrition activities. Our major responsibility is the development and implementation of nutrition related policies including National Nutrition Policy, relevant strategies and guidelines. In addition to those, Nutrition Division conducts in-service training programmes, awareness programmes and other capacity building programmes for the health and non-health staff.

The Nutrition Division has worked relentlessly to serve the citizens of Sri Lanka to build a nutritionally steadfast nation.

#### Vision

Sri Lanka towards a nourished nation.

#### Mission

To ensure the accomplishment of optimum nutrition of all Sri Lankans through inclusive, equitable quality and sustainable provision of services and coordinated partnerships.

#### Objectives

- To play a central role in planning, implementation, monitoring and evaluation of nutrition sensitive and specific interventions, together with multi-sectoral partnerships for improved service provision
- To coordinate with related Bureaus/Directorates within the Ministry of Health
- To formulate policies including National Nutrition Policy, guidelines including Food-Based Dietary Guidelines and necessary standards for nutrition care services
- To plan and implement in capacity building of relevant human resources
- To advocate on adopting a life cycle approach with the view of achieving optimum nutrition by all citizens of Sri Lanka

### Major achievements/special events in 2020 and early 2021

- Launching of revised Food-Based Dietary Guidelines
- Home gardening project implemented collaborating with Presidential task force for economic revival and poverty alleviation.
- Coordinating COVID-19 prevention and control activities in Sabaragamuwa Province.

### Ongoing Development project details

	Project Description	Total Estimated Cost	Physical Progress by 31.12.2020	Financial Progress by 31.12.2020
1	Implementation of the Activities related to District Nutrition Action Plan (DNAP)	13.5 Mn	Funds are released to following Districts, Gampaha, CMC, Kandy, Matale, Nuwaraeliya, Galle, Matara, Hambantota, Anuradhapura, Polonnaruwa, Jaffna, Mannar, Vavuniya, Mullaitivu, Kilinochchi, Batticaloa, Ampara, Trincomalee, Kalmunai, Kurunegala, Puttalam, Badulla, Moneragala, Rathnapura, Kegalle	5.617 Mn (51.4%)
2	Family Health Bureau	15 Mn	Printing of CHDRs	1.280Mn
3	Health Promotion Bureau	2.500Mn	Research report on stakeholder mapping was completed in research -1. Research -2 to assess complementary feeding practices was completed.	0.138Mn
4	Medical Research Institute	1.600Mn	Although purchase orders have been sent for the procurement of chemicals and accessories, all supplies are not received yet	0.185Mn
5	National Nutrition Month	2.100Mn	National nutrition month 2020 was not implemented Due to the COVID-19 pandemic in Sri Lanka	0.030Mn
6	Other activities (Consultative meetings/advocacy meeting)	0.400Mn	Due to the COVID-19 pandemic in Sri Lanka, the activities were not being able to conduct.	0.027Mn

7	Construction of nutrition unit in North Colombo Teaching Hospital (NCTH)	4.400Mn	Bill payment was done	4.362Mn
8	Technical activity committee meeting on MAM product	1.000Mn	All planned activities were not completed for the year 2020 due to COVID-19 pandemic situation	0.002Mn
9	Food fortification program		Rice fortification programme for School mid-day meal was evaluated in view of island-wide expansion. Operational feasibility report of the programme was tabled for discussion at the TAG. Awaiting report on cost feasibility with cost projections. Wheat fortification standards are formulated and challenges for implementation is explored	0.006Mn
10	Revised the Food Based Dietary Guidelines for Sri Lanka		Guidelines were launched with the support from FAO in December 2020 and formulation of practitioner's handbook in progress.	0.003Mn and other expenses Sponsored by FAO
11	National Strategy for Prevention and Control of Micronutrient Deficiencies in Sri Lanka		All planned activities were not completed for the year 2020 due to COVID-19 pandemic situation.	0.008Mn
12	Capacity building of staff at Nutrition Division			0.005Mn
13	Thriposha Programme	-	TAG on nutrition supplements has been formed. Content of vitamin and mineral premix specification for Thriposha is being updated with the support of an External Consultant.	-
14	Formation of the National Nutrition Standards for elders' homes	WHO funds	Formulated and printed. Awaiting dissemination and baseline study.	WHO funds

### Last 5-year performance trend Allocation and expenditure for DNAP

Year	Allocation	Expenditure
2016	25.8Mn	21.8Mn (76.4%)
2017	17.6Mn	15.6 Mn (88.6%)
2018	22.55Mn	17.15Mn (76%)
2019	9.14Mn	8.38Mn (91.6%)
2020	10.9Mn	5.61Mn (51.4%)
2021	13.50Mn (Allocation)	Activities are being conducted.

### Special development activities planned for 2021

- Launching National Nutrition Policy 2020-2030.
- Implementation and dissemination of revised Food-Based Dietary Guidelines.
- Implementation of nutrition standards for elder's homes.

## 4.4 ORAL HEALTH SERVICES

### Introduction

The government of Sri Lanka declared open its first dental clinic in the General Hospital of Colombo commencing public curative oral health services. Today oral health care services are widely distributed throughout Sri Lanka providing preventive oral health care services as well. Further, the training of school dental Nurses (now it is referred to as school dental therapists) was established in 1953 expanding its services to students age between 3-13years. Administratively oral health services are decentralized and conducted peripherally by the provincial ministries of health services and centrally by the ministry of health. Deputy Director-General Dental Services (DDG/DS) is the focal point of oral health services in the Ministry of Health and it provides technical guidance and coordination of the dental services Island wide.

The oral health service provided by the Ministry of Sri Lanka is free to its nation at the point of delivery. In addition, full-time private dental practitioners and part of government dental surgeons after working hours are engaged in providing services on a private basis.

Today oral health care services are expanding to specialities from the basic dental care such as oral Maxillo-Facial Surgeries, advanced restorative care, orthodontic care and the emerging oral pathology field. Further, oral health promotion and prevention, research and surveillance are mainly carried out in the community dentistry field.

### Vision

A healthier Sri Lankan nation with 20 functional teeth at the age of 80.

### Mission

To contribute social and economic development of Sri Lanka by performing all possible activities for achieving the highest attainable oral health status through promotive, preventive, curative dental services of high quality made available and accessible to people of Sri Lanka.

### Objectives

- To provide sustainable and equitable quality oral health care
- To provide cost-effective, evidence-based strategies for the prevention and control of oral diseases.
- To address demands and expectations of oral health in the population

## Service Delivery

There were 1602 Dental Surgeons during 2019, adding 83 new dental surgeons to the service during 2020; it increases its skilled workforce up to 1685. Eighty-seven new dental interns were recruited during 2020. There were 378 school dental therapists in the service including 27 contract basis appointees including 48 new appointees in early 2020.

The Regional Dental Surgeons are operating in regional settings at the office of the Regional Director of Health Services and coordinate with the provincial and the line ministry institutions to ensure the provision of effective oral health care services including preventive and promotive oral health care activities.

Category	No of recruitment for the year 2020
Dental Surgeons	83
Dental Interns	87
School Dental Therapists	48

## Mobile Oral Health Services

Mobile dental set up mounted on vehicles are in almost all districts that are under the supervision of the respective Regional Dental Surgeons providing mobile dental care throughout the country. Further, a dental mobile bus pertaining to the Ministry of health was used for the Covid-19 operation during 2020.

## Annual Oral Health Report

The annual Oral Health Report for the year 2018 was published in 2020 for the first time. This provides a comprehensive report of performances of dental surgeons and school dental therapists throughout the country. This produces overall dental disease burden, coverage and treatment provision. This would be helpful for planning, monitoring and evaluation of oral health services for the future.

## **Oral Health Care Programmes**

Four main ongoing special community oral health programmes are conducting successfully on Island wide.

1. School dental services
2. Oral health care services to pregnant mothers.
3. Early childhood caries prevention Programme/Fluoride Varnish programme.
4. Oral Potentially Malignant disorder (OPMD) and Oral Cancer Prevention and early detection programme.

## 4.5 NATIONAL BLOOD TRANSFUSION SERVICES

### Introduction

National Blood Transfusion Service (NBTS), Sri Lanka is a centrally coordinated specialized campaign of the Ministry of Health. It carries the national responsibility of supplying blood and blood products to all government hospitals and the majority of private sector hospitals. There are 105 hospital-based Blood Banks & two standalone Blood Centers affiliated to 24 cluster centers depending on the geographic distribution.

### Vision

To be a unique model for the world securing quality assured blood services, through a nationally coordinated system.

### Mission

To ensure the quality, safety, adequacy, and cost-effectiveness of the blood supply and related laboratory, clinical, academic and research services in accordance with the national requirement and WHO recommendations.

### Objectives

1. To strengthen basic blood bank testing laboratory facilities and establishing new blood banks
2. To strengthen community awareness on safe blood donation and improve in-house blood donation
3. To strengthen advanced laboratory services related to transfusion medicine
4. To strengthen technologies in blood component processing and storage
5. To strengthen continuous professional development
6. To assure the quality of services with external quality assessment and accreditation
7. To upgrade and renovate, and maintenance of buildings
8. To enhance service efficiency through digitalization
9. To strengthen facilities for blood and blood product transportation
10. To strengthen haemovigilance through improving monitoring and evaluation systems

### Key Functions

- Collecting 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 the 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 for organ transplant recipients
- Extending services of the WHO collaborating center

### Major Achievements during the year 2020

	Activity	Planned output	Actual output
1	Maintaining the collection of whole blood from 100% voluntary non-remunerated blood donors	Conducting awareness programmes	To increase the quality of blood collection and increase the number of collection programmes
		Development of National transfusion guidelines	To increase the quality of services of NBTS
		Introduce a new IT system to NBTS	Established the IT system for all blood banks to regularize donor recruitment
2	To introduce new technologies to transfusion-related laboratory services while ensuring cost-effectiveness	Regularize the screening cell panel	Increase the donor screening to increase the production the screening cell panel At once issued the monthly stocks
		Establishing the new services in the reagent laboratory Established the Levis Donor panel Recruitment the sufficient Levis donors and	Reduced the unnecessary workload for reference laboratory and blood supplement delay for patients

		increase the quality of screening cells	
3	To increase the number of hospital blood banks providing 24 hours service coverage	Renovation and restructuring of hospital blood banks with the provision of furniture and equipment	Renovation and furnishing of hospital blood banks

### Achievements during the year 2021 up to June 2021

1. Maintaining the collection of whole blood from 100% voluntary non-remunerated blood donors
  - Increase 100% voluntary non-remunerated blood donors by increasing in-house blood donors
  - Introduction of strategies to safe blood collection during COVID -19 outbreak
2. Digitalization of data receiving system of the National Blood Transfusion Service
  - NBTS monthly statistics reporting system
  - NBTS weekly haemovigilance reporting system
3. Introduction of “Best Practice Guide in Stock Management”

### Performance trend for last 10 years

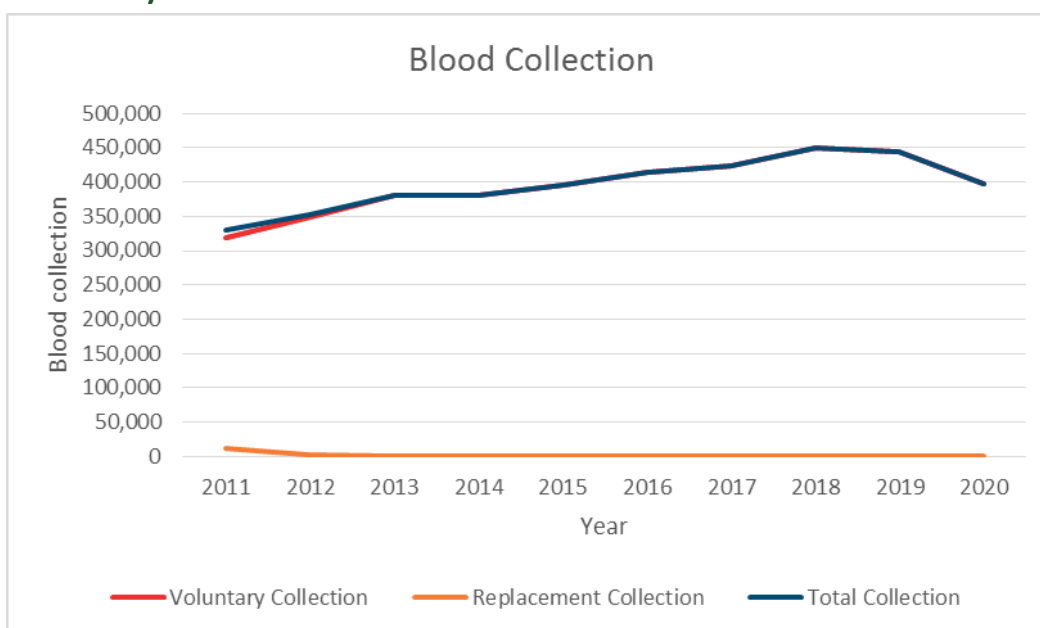
#### 1. Blood collection and component preparation

##### Yearly Improvement of the Blood Collection

Year	Voluntary Collection	Replacement Collection	Total Collection
2011	318,885	11,315	330,200
2012	349,423	2,182	351,605
2013	380,808	0	380,808
2014	380,367	0	380,367
2015	395,500	0	395,500

2016	414,175	0	414,175
2017	423,668	0	423,668
2018	450,640	0	450,640
2019	444,515	0	444,515
2020	397,833	0	397,833

**Yearly improvement of the blood collection with continuous maintenance of 100% voluntary donor base.**



**Annual Blood collection per 1000 population**

Year	Blood collection from voluntary donors	Blood Collection per 1000 population per year
2010	268,128	13
2011	318,885	16
2012	349,423	17
2013	380,808	19
2014	380,367	18
2015	395,500	19
2016	414,175	20

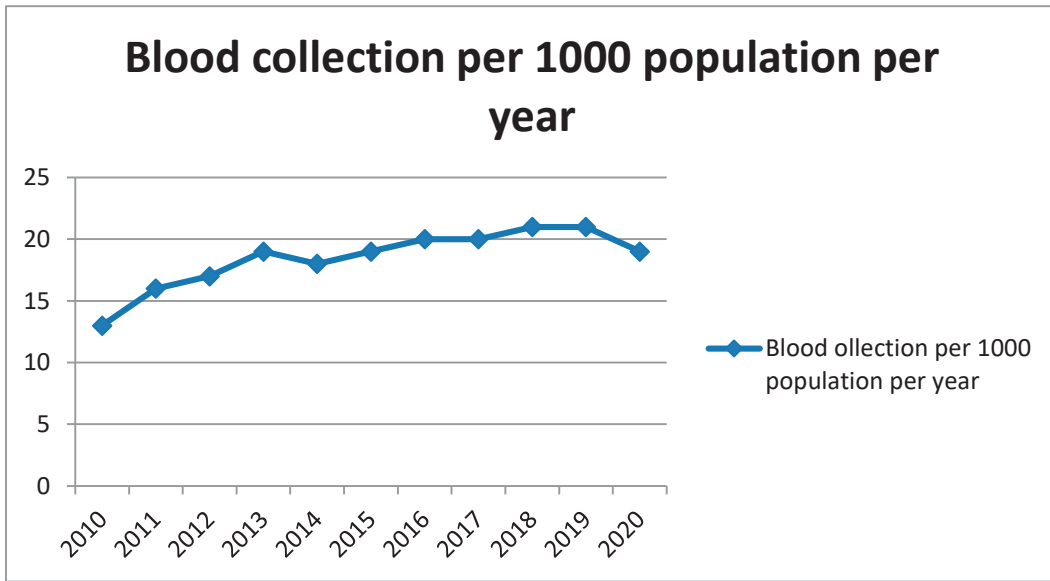
2017	423,668	20
2018	450,640	21
2019	444,515	21
2020	397,833	19

### Annual Blood Collection per 1000 population

Year	2014	2015	2016	2017	2018	2019	2020
Total Collection	380,367	395,500	414,175	423,668	450,640	444,515	397,833
HIV (scr.+ve)	648	646	696	764	797	694	533
Prevalence	0.17%	0.16%	0.17%	0.18%	0.17%	0.16%	0.13%
HIV (Conf.+ve)	26	21	25	28	29	44	34
Prevalence	0.007%	0.005%	0.006%	0.006%	0.006%	0.01%	0.0085%
Hepatitis B (rpt.+ve)	394	409	505	618	513	528	252
Prevalence	0.10%	0.10%	0.12%	0.14%	0.11%	0.12%	0.06%
Hepatitis C (rpt.+ve)	657	800	847	905	898	804	613
Prevalence	0.17%	0.2%	0.20%	0.21%	0.20%	0.18%	0.15%
VDRL +ve	1,265	1,125	1,027	1411	1577	1344	960
Prevalence	0.33%	0.28%	0.25%	0.33%	0.35%	0.30%	0.24%
TPPA +ve	152	175	152	152	107	119	96
Prevalence	0.04%	0.04%	0.04%	0.03%	0.02%	0.03%	0.024%
MP +ve	0	0	0	0	0	0	0
Prevalence	0%	0%	0%	0%	0%	0%	0%

(Scr.+ve) - Screening positive; (conf.+ve) – confirmed positive; (rpt.+ve) – repeat positive; MP - Malaria parasites; VDRL – Venereal Disease Research Laboratory; TPPA - *Treponema pallidum* particle agglutination

Table 3: Prevalence of TTI and comparison with previous years



**Comparison of HLA Laboratory Statistics (At NBC)**

Typing and cross matches	2015	2016	2017	2018	2019
Class 1	2288	2015	1253	2415	} 1702
Class 11	2214	1777	1099	2415	
Cross match	1471	2490	1954	828	703
B27	194	319	492	602	543
PRA (Class I, Class II)	295	484	475	2456	1255
<b>Transplantation</b>					
Kidney (Patients, Donor)	2094	1589	1027	2017	1704
Bone Marrow (Patients, Donors)	108	167	163	264	387
AP Donor	32	171	7	0	84
Cadaveric Donor	15	11	34	30	41

PRA - Panel Reactive Antibodies

### **Special Development activities planned for 2021**

1. Development of Regional Blood Center Kamburugamuwa
2. Development of blood bank equipment storage facilities at Regional Drug Stores of Anuradhapura, Kurunegala, and Rathnapura
3. Purchasing new equipment necessary for advanced laboratories related to transfusion medicine
  - a. National Bone Marrow Registry and relevant testing facilities in the NBTS
  - b. Nuclear Acid Testing
4. Enhancing service efficiency through digitalization
  - a. Purchasing IT equipment and the accessories necessary for operating Blood Bank Management System

## 4.6 LABORATORY SERVICE

### Introduction

The Laboratory Services Unit of the Ministry of Health provides support to curative, preventive, promotive and rehabilitative care services through public sector laboratory services. Laboratory Services Unit includes Laboratory Services Directorate, the Medical Research Institute and the National Blood Transfusion Service. Though the private laboratories are regulated by the Private Health Services Regulatory Council which is chaired by the Director-General of Health Services, the technical guidance is delivered through the Laboratory Services Unit. Laboratory Services are provided under five main subspecialties: Histopathology, Chemical Pathology, Haematology, Microbiology and Transfusion Medicine, each of which is subdivided into multiple areas in response to expanding clinical demands.

### Vision

To achieve standards for medical laboratories set by the International Organizations for standardization

### Mission

To provide timely, reliable, high-quality diagnostic services to relevant health care providers

### Key functions

1. Strengthen and regulate laboratory services in government line ministry hospitals and special campaigns
2. Expansion and strengthening of laboratory services in provincial health institutions
3. Provide allocations for purchasing of equipment for laboratories
4. Provide funding for proper maintenance of laboratory equipment
5. Support disease prevention, control, and surveillance through the provision of diagnostic services
6. Policy development relevant to laboratory services
7. Training and education of laboratory staff
8. Providing guidance to staff of all government and private health laboratories on new developments
9. Partnerships, communication and coordination with stakeholders relevant to laboratory services
10. Acting as the focal point of combating Anti-Microbial Resistance in the country
11. Carrying out SWOT analysis on laboratory sector with a view to prepare strategic plan to develop the sector catering to the existing or new challenges including emergency response to Laboratory Services
12. Improvement of biosecurity and biosafety in the laboratory sector

## 1. Expansion and maintaining the laboratory diagnostic services for COVID – 19

### 1.1 Development of guidelines and distribution those to healthcare institutions

Three guidelines were published immediately when the COVID-19 pandemic was announced as a global emergency.

- Interim guidelines on Emergency Preparedness and Response Plan of Laboratory Sector during Public Health Emergencies of International or National concern confined to Infectious Diseases
- Interim Biosafety Guidelines for Laboratories
- Laboratory Samples Handling Guidelines to Improve Primary Health Care Services

These guidelines were distributed throughout the healthcare institutions in the country as a measure to face a possible epidemic situation.



### Interim guidelines on Emergency Preparedness and Response Plan of Laboratory Sector and Interim Biosafety Guidelines for Laboratories

#### 1.2 Supervision of laboratories engaging in the diagnosis of COVID-19 infection

- Laboratories engaging in COVID – 19 PCR testing are regularly supervised by the Deputy Director General of Laboratory Services and Director, Laboratory Services.
- Special attention was made by the Laboratory Services unit, to take necessary steps to improve the laboratory services at the laboratories where the COVID – 19 diagnostic services have been established.
- Medical Research Institute is being continuously monitored on the activities with relation to the COVID - 19 infection.

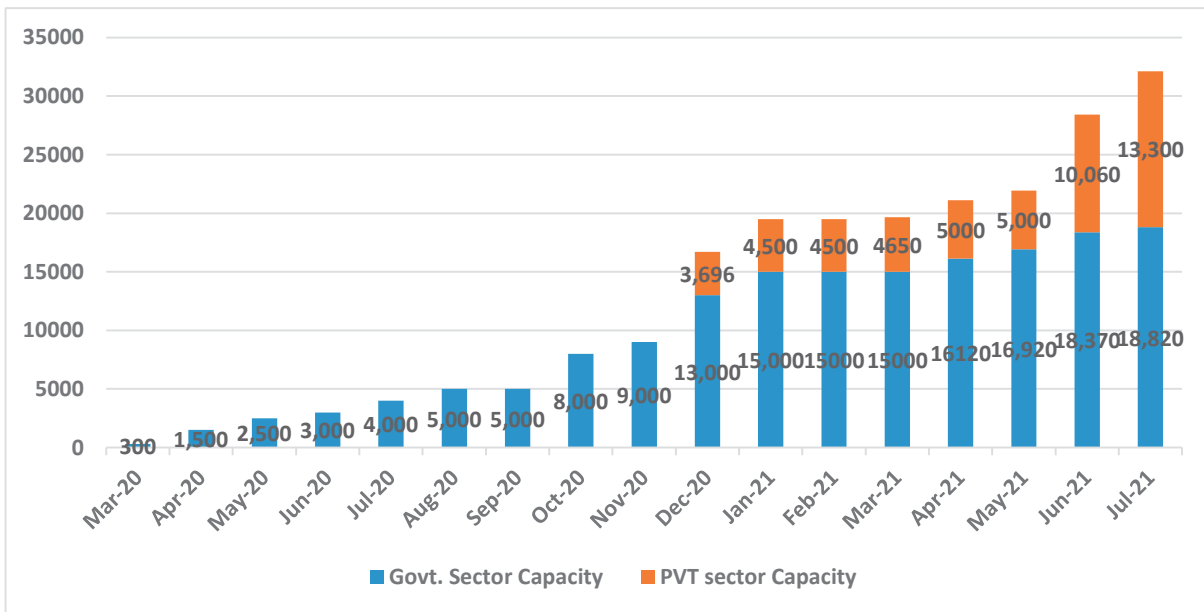
#### 1.3 Laboratory capacity of the COVID – 19 PCR testing in the country

At the end of the year 2020, nineteen laboratories (sixteen government sector and four private-sector PCR laboratories) were engaged in PCR testing for COVID – 19 and the testing capacity was around 10,000 per day. By end of July 2021, Laboratory Services increased the number of COVID -19 PCR testing laboratories to 39 (30 government sector and 9 private sector PCR laboratories) and the testing capacity of the country to 32,700 tests.



Type of Institution	No. of Labs	Extraction Machines	PCR Machines	Daily PCR Testing Capacity
Ministry of Health	21	32	53	15,950
Ministry of Higher Education	7			
Ministry of Defense	2			
<i>Total State sector PCR labs: 30</i>				
Private Sector	9			13,300
<b>Total PCR Capacity in Sri Lanka</b>	<b>39 Labs</b>	<b>37</b>	<b>67</b>	<b>32,470</b>

**The COVID -19 PCR testing capacity of Sri Lanka**



## The COVID-19 PCR testing capacity of the government sector and private sector laboratories in Sri Lanka

	Daily Capacity	Extraction	PCR
<i>Virology Lab</i>	1200	1	4
<i>Molecular Lab</i>	400	1	1
<i>Rabies Lab</i>	350	1	1
1. MRI Total	1950	3	6
2. BIA- Katunayaka	2500	3	5
3. BH Mulleriyawa	2500	2	3
4. NH Kandy	1000	2	3
5. TH Karapitiya	800	2	4
6. Infetious Disease Hospital	750	2	2
7. TH Anuradhapura	800	1	4
8. DGH Badulla	800	3	3
9. TH Jaffna	600	2	3
10. TH Batticaloa	900	4	2
11. DGH Kegalle	500	1	1
12. TH Rathanapura	400	1	4
13. GH Sri J'pura	200		1
14. Apeksha Hospital	300	1	2
15. DGH Nuwaraeliya	200	1	2
16. TH Kurunegala	300	1	2
17. CNTH Ragama	250	2	1
18. NIHS Kalutara	200		1
19. NHSL Colombo	200		1
20. BH Teldeniya	300	1	2
21. CSTH Kalubovila	150		1
<b>Total</b>	<b>15,600</b>	<b>32</b>	<b>53</b>

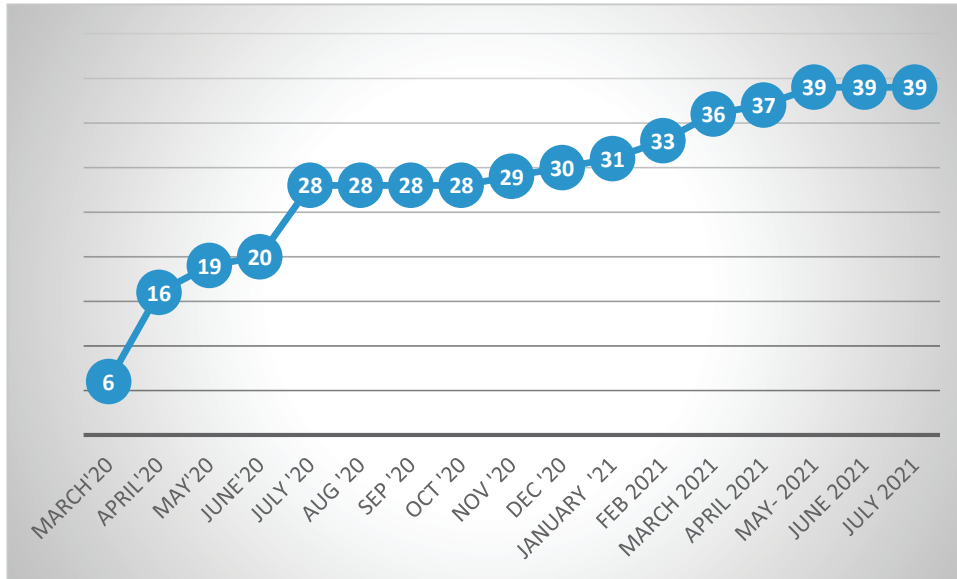
Ministry of Higher Education:			
	Daily Capacity	Extr.	PCR
1. Ja'pura University	1000	1	2
2. FOM Jaffna	400	1	1
3. Vet Faculty Peradeniya	200		1
4. FOM Peradeniya	100		1
5. FOM Colombo	90		1
6. FOM Karapitiya	30		1
7. FOM Kelaniya	200		1
<b>Sum</b>	<b>2020</b>	<b>2</b>	<b>8</b>

Private Sector:			
	Daily Capacity	Extr.	PCR
1. Nawaloka	3500	1	
2. Lanka	1400	1	
3. Durdans	1400	0	
4. Asiri	1400	0	
5. Credence	1400	2	
6. Hemas	1400	1	
7. Forte	900	1	
8. Melsta	900	0	
9. Kings	1000	1	
<b>Sum</b>	<b>13300</b>		

## The COVID - 19 PCR testing capacity of the government sector and private sector laboratories in Sri Lanka

### 1.3.1 Government sector

- NHSL Colombo, BH Mulleriyawa, DGH Negombo and TH Kalubowila were provided with many equipment to strengthen the laboratory services of the country.
- Requests for laboratory reagents and chemicals are being received by the laboratory services constantly. These requests have been forwarded to the Medical Supply Division and given the fullest attention to continue the supply chain uninterrupted.
- New COVID-19 PCR testing laboratories were established in Theldeniya, DGH Hambantota, DGH Ampara, DGH Vavuniya, BH Wathupitiwala, DGH Polonnaruwa to increase the testing capacity of government hospitals from 15,000 to 25,000 for COVID-19 diagnosis, surveillance and control.



**Total number of COVID -19 PCR testing laboratories in the country**

### 1.3.2 Private sector

Through a comprehensive process of assessment involving all the stakeholders, private sector laboratory authorization to perform PCR testing for COVID-19 was carried out. Up to now, the following nine (9) private sector laboratories have been permitted to perform PCR tests for COVID-19:

1. Genetic Laboratory, Asiri Health
2. Durdans Laboratory
3. Lanka Hospital Diagnostics
4. Nawaloka Laboratories
5. Melsta Laboratories
6. Kings Hospital Colombo Laboratory
7. Hemas Hospitals Laboratory
8. Forte Diagnostics
9. Credence Genomics

With the spreading of the COVID – 19 in Sri Lanka, it was required to expand the domestic COVID – 19 testing facilities. The involvement of the private sector was important in this situation for establishing tourism, repatriation of workers, and maintaining the regular functioning of factories and workplaces. Further, with the expansion of the private sector testing capacity, maintaining the quality of their testing had also become apparent.

#### **1.4 Quality Control of the COVID – 19 PCR Testing in Private Sector Laboratories**

The External Quality Assurance (EQA) programme has been established in the Medical Research Institute for private sector laboratories and all the approved private laboratories must be enrolled in the EQA programme.

#### **1.5 WHO coordinated External Quality Assessment Programme (EQAP) for Government sector PCR Laboratories in Sri Lanka**

Laboratory Services was able to establish an External Quality Assessment Programme with the coordination of Dr. Nalika Gunawardena, National Programme Officer of WHO.

##### **External Quality Assessment Programme (EQAP) 1**

On the invitation of WHO for the SARS-CoV-2 EQAP, four laboratories were initially registered for EQA 1 during May 2020, with the University of Hong Kong. All four laboratories had achieved correct results in July 2020, with 100% concordance, based on the report from the Center for Health Protection of the Department of Health, Hong Kong.

##### **External Quality Assessment Programme (EQAP) 2**

However, WHO has made arrangements to include all 25 PCR testing laboratories in a global EQAP in November 2020 with the Royal College of Pathologists of Australasia, Quality Assurance Programme (RCPAQAP). The 25 laboratories were included in EQA 2 and received the results in April 2021.

##### **External Quality Assessment Programme (EQAP) 3**

WHO has made arrangements for EQAP 3 for 25 PCR testing laboratories with the Royal College of Pathologists of Australasia, Quality Assurance Programme (RCPAQAP). The DDG/LS office has received 25 panels on the 7<sup>th</sup> of June 2021 and currently distributing the panels to the laboratories as follows.

**The PCR laboratories enrolled in the External Quality Assessment Programme (EQAP)**

	EQA 1 Results	EQA 2 Results	EQA 3 Results
	28 July 2020	08 April 2021	12 July 2021
<b>Ministry of Health</b>			
<b>Medical Research Institute (MRI)</b>			
(01) Virology Lab (Dr. Jude)	✓	✓	-
(02) Molecular Lab (Dr. Nadeeka)	-	✓	✓
(03) Rabies Lab (Dr. Dulmini)	-	✓	✓
BH Mulleriyawa	-	✓	✓
BIA	-	✓	✓
TH Anuradhapura	✓	✓	-
IDH Hospital	-	✓	✓
TH Karapitiya	✓	✓	-
NH Kandy	✓	✓	-
TH Jaffna	-	✓	✓
TH Batticaloa	-	✓	✓
GH Sri Jayawardenepura	-	✓	✓
Apeksha Hospital	-	✓	✓
North Colombo Teaching Hospital	-	✓	✓
TH Rathanapura	-	✓	✓
PGH Badulla	-	✓	✓
DGH Nuwaraeliya	-	✓	✓
TH Kurunegala	-	-	✓
National Hospital of Sri Lanka	-	-	✓
CSTH Kalubovila	-	✓	-
NIHS Kalutara	-	-	✓
DGH Kegalle	-	-	✓
BH Theldeniya	-	-	✓
<b>Ministry of Defence</b>			
Army Hospital	-	✓	✓
Kothelawala Defence University (KDU)	-	✓	✓
<b>Ministry of Higher Education</b>			
Faculty of Medical Sciences Sri Jayawardenepura	-	✓	✓
FOM Colombo	-	✓	✓
FOM Karapitiya	-	✓	-
FOM Jaffna	-	✓	✓
FOM Peradeniya	-	✓	-
Faculty of Veterinary Sciences Peradeniya	-	-	✓
FOM Kelaniya	-	-	✓

### 1.6 Streamlining the supply chain management for PCR testing for COVID19

The Ministry of Health is in the process of further strengthening the facilities and streamlining the supply chain management for PCR testing for COVID-19. Google sheet app is continuously being monitored as per the instruction given by the Secretary, Ministry of health.

The responsible officers are as follows.

1. DDG/LS unit - Dr. J Hamsanathy (Actg.CCP, DDG/LS unit)  
Dr. Manjula B Samarakoon (MO/Health Informatics)
2. DDG/MSD unit - Dr. P. A. C. Kumaranayake (MO/Health Informatics)
3. DDG/PHS I - Dr. Shasimali Wickramasinghe (Actg CCP, Epidemiology Unit)

### 1.7 Strengthening the Human Resource of the laboratories engaged in COVID - 19 Diagnosis

Hundred and fifty Medical Laboratory Scientists who completed a four-year degree in various universities in Sri Lanka under Paramedical Sciences were granted six months of in service orientation programme under the Ministry of Health to strengthen the diagnosis and control of the COVID-19 pandemic. Another 63 officers will be soon added to this number.

A hands-on training was conducted regarding the Rapid Antigen test to the Medical Officers of the institutions above the level of Base Hospitals.

### 1.8 Mobile Laboratory Services

The mobile laboratory and its staff carried out sample collection for PCR and has conducted around 32,000 Rapid Antigen Assays contributed to the control of the COVID - 19 pandemics. Other screening tests performed by the mobile laboratory services are as follows.

#### Numbers of screening tests performed by the mobile laboratory services during the last six years

Indicator	2015	2016	2017	2018	2019	2020
Mobile Laboratory screening Tests	39,436	47,773	42,674	42,935	46,574	55,320

### 1.9 Specifications for PCR reagents and consumables for COVID-19 PCR assay

According to the information received from the laboratories, different brands and models of PCR machines are being used. Therefore, it is important to order the test kits with specifications compatible with PCR machines and it will ensure the quality of testing.

'Specifications for PCR reagents and consumables for COVID-19 PCR assay' was prepared by the committee with the consensus of virologists and was shared with Medical Supplies Division.

### **1.10 Development and maintenance of PCR performance database**

Since the beginning of COVID-19 infection in the country, Laboratory Services Unit developed and maintained a PCR performance database, infection in the country to monitor the PCR and rapid antigen testing during the period of the pandemic. It is being used to integrate different aspects to the above database to facilitate decision-making about supply chain management, laboratory equipment, human resource management and other resources distribution.

### **1.11 Indicators identified for the performance framework**

Laboratory Services Unit achieved more than 80% of each of the following performance indicators by mid of 2021.

1. The COVID-19 PCR testing capacity
2. Percentage of PCR test results (by each laboratory) given within 24 hours of receipt of samples
3. Percentage of laboratories adhering to External Quality Assessment schedule

## **2. Combating Antimicrobial Resistance (AMR) in Sri Lanka**

Hands-on training programmes were conducted for 60 health care workers of 20 hospitals on WHONET software. The WHONET is the tool used for data collection, aggregation and analysis of data on antimicrobial resistance for the Antimicrobial Resistance Surveillance Programme. Training for seven more hospitals is to be conducted by the end of 2021.

Activities in progress:

- 1- Workshops to finalize the draft of National Policy on Infection Prevention and Control, Updating the Manual on Hospital Infection Prevention and Control, National Guidelines on Infection Prevention and Control are being conducted.
- 2- Monthly online meetings by AMR Surveillance System Data Analysis and Interpretation Committee with sentinel sites' staff are being conducted by the Laboratory Services.
- 3- Workshops are being conducted for the working groups on Infection Prevention and Control to finalize the IEC material for antibiotic awareness week.

### 3. Strengthen and regulate laboratory services in government line ministry hospitals and special campaigns

Indicator	2015	2016	2017	2018	2019	2020
Provisions of necessary laboratory equipment ( in Mn) Allocations provided	350	350	900	900	740	174
Allocations released	351	690	919	904	739	230

Programme/Activity/Item Description	Object Code	Funding Source	Budgetary provisions allocated up to 2020.12.31 Rs. Mn	Cumulative expenditure as of 2020.12.31 Rs. Mn	Physical Progress as of 2020.12.31
1.1. Provide allocation for purchasing of new laboratory equipment for Line Ministry Institutions	111-2-13-013-2103-11	GOSL	125 Mn + 33 Mn + 16 Mn = <b>174 Mn</b> (Jan-Mar, Mar-May, Oct-Dec) Vote on Account))	87 Mn (According to the Expenditure Reports from the institutions)	100% Given Allocations for Purchasing Laboratory Equipment to the Line Ministry institutions
1.2. Provide allocation for repair, service and maintenances of laboratory equipment for the Line Ministry institutions	111-2-13-013-2103-11	GOSL	20 Mn	2.2 Mn (Regarding hospital request)	40 % (Given to Services of Laboratory Equipment)
1.3. Provide allocation for purchasing of laboratory equipment for laboratories in Provincial Hospitals	111-2-13-013-2103-11	WB/PS SP/GOSL	88.5 Mn	88.5 Mn	100%
1.4. Provide allocation for purchasing laboratory furniture/IT	111-2-13-013-2103-11	WB/PS SP	10 Mn Eastern 1.1 mn, North Central - 2.68 Mn, Sabaragamuwa - 1.8 Mn, Southern - 3 Mn, Northern - 0.72 Mn	19.3 Mn	Estimates Received, Allocation Issued to Southern, North Western



equipment to laboratories in provincial council hospitals.					and Eastern Provinces) Matara - 0.9 Mn -(Rs. 920223.33) , Hambantota - 0.8 Mn (Rs.841484.02 ), Galle - 0.94 Mn - (Rs940851.60) Eastern 1.1 Mn - (Rs.1103625.00), North Western - 0.69 (Rs. 698607.10)
<b>Total</b>				197 Mn	

## 2020

Programme/Activity/Item Description	Object Code	Funding Source	Budgetary Provisions Allocated Up to 2021.12.31 Rs. Mn	Cumulative Expenditure as of 2021.07.30 Rs. Mn	Physical Progress as of 2021.07.30
<b>1.1 Provide allocation for purchasing of new laboratory equipment for the Line Ministry institutions in 2021</b>	11-2-13-013-2103-11	GOSL	470 Mn	451 Mn	95%
<b>1.2 Provide allocation for purchasing of laboratory equipment for laboratories in provincial hospitals in 2021</b>	11-2-13-013-2103-11	GOSL+ WB/P SSP	74 Mn	63 Mn	85%
<b>1.3 Provide allocation for repair, service and maintenance of laboratory equipment for the Line Ministry Institution in 2021</b>	11-2-13-013-2103-11	GOSL	10 Mn	2.5 Mn	25%

<b>1.4 Procurement of office equipment for Laboratory Services office</b>	11-2-13-013-2103-11	WB/P SSP	3 Mn	0.45 Mn	15%
<b>Total</b>			557 Mn	516.95 Mn	

### 3. Expansion and strengthening of laboratory services in provincial health institutions 2020

	Equipment	Number of machines	Number of benifited institutions	Fund	Amount
1	Fully Automated 5 -Part Heamatology Analyzer	12	12	GOSL	14,800,000.00
2	Hormone Analyzer	07	07	GOSL	12,600,000.00
3	HbA1C Analyzer	07	07	PSSP	12,800,000.00
4	Tissue Processor	03	03	PSSP	13,350,000.00
5	Microtome	10	10	PSSP	14,200,000.00
6	Blood Culture Machine	07	07	GOSL	23,100,000.00

### 2021

	Equipment	Number of machines	Number of benifited institutions	Fund	Amount
1	Fully Automated Biochemistry Analyzer (Medium output)-14 No.s	14	14	PSSP	47,600,000.00
2	Binocular Microscope-28 No.s	28	12	PSSP	4,157,720.00

## 4.6.1 Medical Research Institute

### Introduction

The Medical Research Institute, Colombo is a national-level healthcare organization that makes significant contributions to medical research and other specialized laboratory services. This is an institution with a network of many advanced multidisciplinary laboratories in Sri Lanka. As an excellent center with laboratory facilities recognized by the World Health Organization, it provides laboratory services not only to Sri Lanka but also to the entire Southeast Asian region. In addition, the Medical Research Institute serves as a training institute for medical staff categories, including undergraduate and postgraduate training programs for medical officers, medical laboratory technologists, and medical entomologists.

### **Vision**

To be the leading health care research, education, and training institute in the country and to provide the highest quality laboratory testing and expert laboratory diagnosis and consultations to patients institutionally, regionally and nationally.

### **Mission**

To improve the health of Sri Lankans through world-class medical research and investigations so as to achieve the national health goals set by the Ministry of Health.

### **Objectives of MRI**

- To act as a collaborative institution to facilitate and conduct applied, operational and intervention research at national and international levels
- To advise and give recommendations to the Government of Sri Lanka on health-related policies based on the new knowledge generated through research
- To provide specialized diagnostic services to public and private sector health institutions while functioning as a leading investigative laboratory
- To assist the Ministry of Health in designing and conducting research programs for major health problems (iodine deficiency, non-communicable diseases, dengue, polio, rabies, antimicrobial resistance) and implementing, monitoring and evaluating health interventions
- To conduct and support undergraduate and postgraduate training programs related to health
- To conduct stakeholder awareness programs on preparation and planning for emerging and re-emerging diseases

### **Achievements**

#### **Achievements and publications during the year 2020/2021**

#### **Department of Bacteriology - 2020**

1. Karunanayake L., Gamage CD, Gunasekera CP., Silva S., Izumiya H, Morita M., Muthusinghe DS., Yoshimatsu K., Niloofa R., Karunanayake P., Uluwattege W., Ohnishi M., Koizumi N. **Multi Locus sequence typing reveals diverse known and novel genotypes of *Leptospira* spp. circulating in Sri Lanka.** In PLoS Negl Trop Dis 14(8): e0008573. <https://doi.org/10.1371/journal.pntd.0008573>
2. Karunanayake L., Dassanayake M, Wickramasuriya U., Wimalawansa T., Yapa L.

***Corynebacterium diphtheriae* native-valve endocarditis in children: An emerging pathogen?** In International Journal of Infectious Diseases 101(S1) (2021)172 <https://doi.org/10.1016/j.ijid.2020.09.463>

3. Pamila Adikari, Sunil de Alwis, Lilani Karunanayake **Improving Report**

**Generation and Delivery System of Microbiological Investigations at MRI – Sri Lanka with Concern to Turn-Around-Time: An interventional study.** In International Journal online and biomedical engineering [iJOE] – Vol. 16, No. 9, 2020 p26-35

4. Karunanayake L, Gunawardena KDN, Mannapperuma B, Somaratne D, Jayasinghe A. **Whooping cough in children.** In The Bulletin of the Sri Lanka College of Microbiologists August 2020:18(1); p62-64.ISSN 1391-930X
5. Kulatunga KAKC, Karunanayake L, Rangama BNLD, Rajapakshe RRN, de Silva PGSM. **The National External Quality Assessment Scheme in Clinical Microbiology, Medical Research Institute: review of the national program in Sri Lanka.** In The Bulletin of the Sri Lanka College of Microbiologists August 2020:18(1);p54-58.ISSN 1391-930X

#### **Department of Bacteriology – 2021**

1. Roshan Niloofa, Lilani Karunanayake, H. Janaka de Silva, Sunil Premawansa, Senaka Rajapakse, Shiroma Handunnetti. **Development of in-house ELISA as an alternative method for the serodiagnosis of leptospirosis.** In, International Journal of Infectious Diseases 105 (2021) 135–140

#### **Department of Virology - 2020**

- 1) Peer review Journal publication  
Outbreak of severe acute respiratory infection in Southern Province, Sri Lanka in 2018: a cross-sectional study. Sky Vanderburg, Gaya Wijayarathne, Nayomi Danthanarayana, Jude Jayamaha, November 2020 BMJ Open 10(11):e040612 DOI: 10.1136/bmjopen-2020-040612
- 2) Subacute sclerosing panencephalitis: a rare cause of acute cortical visual impairment in an adult. HMMTB Herath, Shanika Nandasiri, A Chandrakumara, Jude Jayamaha, Sunethra Senanayake and Kishara Goonaratne. July 2020 Tropical Doctor 50(4):004947552093932 DOI: 10.1177/0049475520939325

#### **Department of Parasitology - 2020**

**Ancylostoma ceylanicum First Ever Case Detected in Sri Lanka – Research gate case report 2020**

Austin J Clin Case Rep - Volume 7 Issue 1 - 2020

Mallawarachchi C H and Samarasinghe S

Medical Research Institute, Sri Lanka

### **Department of Nutrition - 2020/2021**

#### **1. Stable iodine nutrition during two decades of continuous universal salt iodisation in Sri Lanka**

Renuka Jayatissa,<sup>1,\*</sup> Jonathan Gorstein,<sup>2</sup> Onyebuchi E. Okosieme,<sup>3</sup> John H. Lazarus,<sup>3</sup> and Lakdasa D. Premawardhana<sup>3</sup>

Published in Nutrients Journal

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7230738/>

#### **2. A method to monitor the national salt reduction efforts in Sri Lanka and status of salt, potassium and iodine intake in an adult Sri Lankan community**

Renuka Jayatissa,<sup>1,\*</sup> Jonathan Gorstein,<sup>2</sup> Onyebuchi E. Okosieme,<sup>3</sup> John H. Lazarus,<sup>3</sup> and Lakdasa D. Premawardhana<sup>3</sup>

Published in Journal of the National Science Foundation of Sri Lanka

<https://jnsfsl.sljol.info/articles/abstract/10.4038/jnsfsr.v49i1.10057/>

#### **3. Impact of COVID -19 on child malnutrition, obesity in women and household food insecurity in underserved urban settlements in Sri Lanka: a prospective follow up study**

Renuka Jayatissa<sup>1</sup> ,Himali P Herath, Amila G Perera, Thulasika T Dayaratne,

Nawamali D De Alwis, Hiyare Palliyage Laksiri K Nanayakkara

Published in Public Health Nutrition Journal

<https://doi.org/10.1017/S1368980021001841>

#### **4. Malnutrition in children with congenital heart disease- is it a concern?**

M.S.L Jayasekara, T.G Samarasekara, S.N Perera, Renuka Jayatissa, K.H De Silva

#### **5. Estimation of Iron Content and Its Contribution in Iron-Fortified Food Products Consumed by School Children in Sri Lanka**

D. Ruwani G. Perera , Dilantha Gunawardana ,Renuka Jayatissa , A. Buddhika G. Silva,

Journal of Food Quality, Volume 2020, Article ID 6079379, <https://doi.org/10.1155/2020/6079379>

**6. Determination and Comparative Study of Sugars and Synthetic Colorants in Commercial Branded Fruit Juice Products**

S. D. C. Sewwandi, P. C. Arampath, A. B. G. Silva, and R. Jayatissa

Journal of Food Quality Volume 2020, Article ID 7406506, <https://doi.org/10.1155/2020/7406506>

**7. Determination of Patient Perception on Hospital Diet and Quantitative Analysis of Salt, Crude Fat and Crude Protein Contents of Hospital Diets in Three Major Hospitals, Colombo, Sri Lanka- A Preliminary Study,**

T.P. Sathsara S. Perera Pahan I. Godakumbura, A. Buddhika G. Silva, Renuka Jayatissa, P.G. S. M. De Silva

International Journal of Scientific Research in Chemical Sciences, Vol.8, Issue.2, pp.01-10, April (2021)

Sri Lankan Journal of Cardiology, Volume 3: Issue 2 June 2020

**Department of Mycology - 2020**

1. A neglected case of facial chromoblastomycosis caused by *Rhinochrysiella*. T. P. Alahakoon, C. Udagedara, L. S. M. Sigera, N. G. N. Wijayawardhane, P. Rathnayake, P. I. Jayasekera, P. G. R. I. S. Welagedara, D. M. C. Sewwandi. *Sri Lanka Journal of Dermatology*, 2019/2020, 21: 84-86
2. *Candida auris*: A brief review. LSM Sigera, MN Jayawardena, H Thabrew, PI Jayasekera. *Sri Lankan Journal of Infectious Diseases* 2020 Vol.10 (1):2-8. DOI: <http://dx.doi.org/10.4038/sljid.v10i1.8270>
3. Rhinofacial Conidiobolomycosis: A Case Series and Review of the Literature. L. S. M. Sigera, G. H. D. C. Janappriya, M. T. D. Lakshan, N. J. Pitigalage, P. I. Jayasekera, R. P. Dayasena, C. G. U. A. Patabendige, and C. N. Gunasekera, *Ear, Nose & Throat Journal* 2020. DOI: 10.1177/0145561319892475
4. Mycetoma due to *Madurella mycetomatis*. L S M Sigera, K U L Narangoda, M Y Dahanayake, U L F Shabri, M A Malkanthi, Vijani Somarathne, P I Jayasekera, H A L P Kolambage *Elsevier IDCases*. 2020; 21: doi: 10.1016/j.idcr.2020.e00857

## Department of Mycology - 2021

1. Fusariosis in haematological malignancy – the skin is the clue... Experiences from the National Cancer Institute of Sri Lanka: A case report M.N. Jayawardena, S.H.C.K. De Silva, N.P. Madarasingha, M. Somathilake, S. Wanigasooriya, P.R. Chinthamani, L.S.M. Sigera, P.G.R.I.S. Welagedara, K.D.D.S. Wijeweera, P.G.R.U.M. Welagedara, Y.K. Perera, N.W.E.S. Nugahapola, U.E. Rathnayake, S.P. Gunasekera, **P.I. Jayasekera. Sri**

*Lankan Journal of Infectious Diseases* 2021 Vol.11(1):52-57.

DOI: <http://dx.doi.org/10.4038/sljid.v11i1.8336>

2. *Exophiala jeanselmei* causing subcutaneous phaeohyphomycosis in a healthy adult in Sri Lanka: A case report. P.G.R.I.S. Welagedara, L.S.M. Sigera, I.A. Liyanage, G.M.K. Bogamma, M.M. Abeykoon, **P.I. Jayasekera. Sri Lankan Journal of Infectious Diseases** 2021 Vol.11(1):47-51 DOI: <http://dx.doi.org/10.4038/sljid.v11i1.8340>
3. Pulmonary mucormycosis – diagnostic dilemma and uphill battle in treatment: A case report on life-threatening fungal infection. Sanchayan Thanancheyan, Aathavan Muthulingam, Nisanthan Selvaratnam, LSM Sigera, **Primali Irosha Jayasekera. Journal of the Postgraduate Institute of Medicine** 2021; 8(1): E130 1-9 <http://doi.org/10.4038/jpgim.8303>
4. Mucormycosis – commonly known as “Black fungus”. **Primali Jayasekera.**  
Category:  
Covid19 Resources. Sri Lanka College of Microbiologists.  
<https://slmicrobiology.lk/category/covid19-resources/>
5. Mucormycosis (Black fungus) and COVID-19: is it a deadly combination? Primali Jayasekera. SLMA News Letter May 2021.
6. A rare case of E. coli and Rhizopus sinusitis complicated with pneumocephalus, E. coli psoas abscess and sepsis Dulaanga Rathnayake, Basith M. M, Tharmini E, Umakanth M., Sundaresan K T, P I Jayasekara, L S M Sigera, P G R I S Welagedara, Vaithehi Francis. Access Microbiology. In print

## Animal Science Department - 2020

Biochemical and histopathological changes in Wistar rats after consumption of boiled and un-boiled water from high and low disease prevalent areas for chronic kidney disease of unknown etiology (CKDu) in North Central Province (NCP) and its comparison with low disease prevalent Colombo, Sri Lanka

M. G. Thammitiyagodage, N. R. de Silva, C. Rathnayake, R. Karunakaran, Kumara WGSS, M. M. Gunatillka, N. Ekanayaka, B. P. Galhena, M. I. Thabrew

## Reviewed Articles

### Department of Bacteriology – 2020

1. Karunanayake L Thilini ABDI Roshan N De Silva S Rajapakse S Karunanayake P

**Antimicrobial Susceptibility of Pathogenic Leptospira Spp. from Human Leptospirosis in Sri Lanka.** Journal of the Ceylon College of Physicians, Oral presentation 02. 2020:51(1):p 2

2. U.M.H.U. Uduwawala, A. Manamperi, G.P.S. Gunaratna, L. Karunanayake, M. Hapugoda. **Evaluation of two molecular-based assays: Quantitative Real-time**

**Polymerase Chain Reaction (q-PCR) and Recombinase Polymerase Amplification (RPA) for early diagnosis of leptospirosis.** Sri Lanka Association for the Advancement of Science Proceedings of the Annual Sessions 2020- Part 1 107/A p8

3. Karunanayaka, K.D.S.V., Hettihewa, S.K., Silva, D.D., Karunanayake, L. **Antimicrobial**

**Efficacy of Novel Hand Scrub with 4% Chlorhexidine Gluconate and Medicinal Aloe Against Selected Pathogens.** Symposium Proceeding on Engineering / Health Sciences / Education and Language / Management and Social sciences. CINEC Student Research symposium 27th November 2020 ISBN: 978-624-5601-00-4 p.61

### Department of Bacteriology – 2021

1. Samarakoon P. S. M. J. U.1, Karunanayake Lilani, Muthugala M. A. R. V., Dheerasekara W. K. H., Karunanayake S. A. A. P. **Leptospirosis and hantavirus infection in patients with acute dengue fever in the western province, Sri Lanka.** Webinar on leptospirosis and other rodent borne haemorrhagic fevers in Scientific Meeting European Leptospirosis Society 6<sup>th</sup> June 2021. In abstract book 2021; p2

2. Karunanayaka KDSV, Hettihewa SK, Silva DD, Karunanayake L **In-vitro antimicrobial activity of non-alcohol-based hand scrubs rich with cinnamon oil against selected pathogens** Proceedings of the Research Conference in Health Sciences 2021, Faculty of Allied Health Sciences, University of Sri Jayawardenepura. 2021; p92



3. Karunanayake Lilani, Balajii V., Gunawardena K.D.N., Wimalagunawardena P., Dhananja namalie K., Francis V.R., Varghese Rosemol, Chandrasiri N.S., Hapuarachchi T. **Serogroup and antimicrobial resistance in invasive meningococcal disease in Sri Lanka.** Sri Lanka Medical Association Academic sessions September 2021 – Accepted
4. Karunanayake Lilani, Balajii V., Vayishnavi A., Dassanayake Malka, Yapa Lakmini, Varghese Rosemol, Francis V.R., Herath Chamika, Chandrasiri N.S., **Serotype distribution and antimicrobial susceptibility of *Streptococcus pneumoniae* in Sri Lankan clinical isolates.** Sri Lanka Medical Association Academic sessions September 2021 – Accepted

### Department of Immunology – 2021

- 1) Autoimmune encephalitis in a South Asian population BMC Neurology Journal – 2021

Nilanka Wickramasinghe, Dhanushka Dasanayake, Neelika Malavige, Rajiva de Silva and Thashi Chang

### Department of Virology

1. Establishment of an in-house novel coronavirus (SARS CoV-2) real-time PCR assay and investigation of first few cases of COVID-19 in Sri Lanka. **Jayamaha C.J.S** Withanage, VH, Jayathunga S, Ekanayake, DHP, Chu DKW, Peiris M Bulletin of the Sri Lanka College of Microbiologists. OP-08, pp 14-15, 18 (1)
2. Preliminary study to detect mutations in UL97 gene in suspected ganciclovir resistant CMV patients' samples, presented to a diagnostic laboratory in Sri Lanka. JC

Thambyrajah, **CJS Jayamaha**, V Ratnayake, N Fernando, S Handunetti. Bulletin of the Sri Lanka College of Microbiologists. OP-06, pp 13, 18 (1) August 2020

3. Viral kinetics in serial respiratory samples and clade of the virus of the first positive (SARS CoV-2) patient reported in Sri Lanka. Jayamaha C.J.S Narangoda E. Withanage, VH, Jayathunga S, Ekanayake, DHP, Chu DKW, Peiris M Bulletin of the Sri Lanka College of Microbiologists. PP-08, pp 14-15, 18 (1) August 2020

### Invite Speaker

1. Laboratory Diagnosis: Sri Lankan Experience. Pre congress CCPSL on COVID 19 sharing experience. 25th Anniversary Annual Scientific Sessions, CCP, Sept. 2020.

2. 'Dilemmas in Laboratory Diagnosis in COVID-19'. 133<sup>rd</sup> SLMA International Congress, July, 2020.

### Book Chapter

Chapter author-12 – Influenza Vaccine, Sri Lanka Medical Association guidelines and information on vaccines 2020. Sri Lanka Medical Association. ISBN 978-955-9386-50-6

### Department of Mycology – 2020

1. Case report - Fungal infections in haematological malignancies... the clues on the skin. Jayawardena M.N., Madarasinga N.P., Somathilake M., Chinthamani P.R., Wijeweera K.D.D.S., Welagedara P.G.R.U.M., Perera Y.K., Nugahapola N.W.E.S., Rathnayake U.E., Welagedara P.G.R.I.S., Sigera L.S.M., Gunasekera S.P., Jayasekera P.I. Poster presentation at the Annual Academic Sessions of the Sri Lanka College of Oncologists

### Department of Mycology – 2021

1. Neonatal Candidaemia; Six-year experience from a Tertiary Care Centre in Sri Lanka. G. P. S. Gunaratna, M. G. T. D. Wijewardhane, A. Sutharson, U. A. G. H. Wickramasuriya, Y. C. Waniganayake, K. K. M. K. Premaratne, J. Galappaththi, D. Somasiri, S. M. P.

Karunaratne, G. S. B. Wijethunga, S. D. Amarasinghe, T. M. R. Perera, **P. I. Jayasekera**, R. Sathanandaraja, N. S. Chandrasiri. E-poster presentation at the Pathology Update 2021. *Abstract Supplement Pathology Update* (2021), 53(S1). DOI: [10.1016/j.pathol.2021.06.106](https://doi.org/10.1016/j.pathol.2021.06.106)

2. A Case of subcutaneous infection caused by *Basidiobolus ranarum* in a child. H. Madhumanee W. Abeywardena, Primali Jayasekera, Samitha D. Ekanayake, Mathula Hettiarachchi, Amila Rajamanthri. Poster presentation at the Annual Academic Sessions of the Sri Lanka College of Microbiologists 2021.
3. Emerging problem of recalcitrant dermatophytosis in Sri Lanka. Nayani Madarasingha, Surammika Eriyagama, Primali I. Jayasekera, Shreenika de Silva. Oral presentation at the International Congress of Dermatology 2021.
4. Pattern of organisms causing onychomycosis among patients attending to dermatology outpatient clinic. Himali sudasinghe, Primali Jayasekera. E-poster presentation at the International Congress of Dermatology 2021.
5. Localised primary cutaneous histoplasmosis – A case report. Kanchana Mallawaarachchi, Primali Jayasekera. E-poster presentation at the International Congress of Dermatology 2021.

- 6.** Emerging Problem of Recalcitrant Dermatophytosis in Sri Lanka. Nayani Madarasingha, Surammika Eriyagama, Dr. Liyanage Shamithra Madhumali Sigera, Primali I. Jayasekera, Shreenika de Silva. Oral presentation at ISHAM Asia 2021.
- 7.** Antifungal susceptibility pattern of *Candida* species isolated from Sri Lankan patients. Dr. Liyanage Shamithra Madhumali Sigera, Dileepa Ediriweera, W.A.S. Wijendra, Primali I. Jayasekera. Oral presentation at ISHAM Asia 2021.
- 8.** First report of Rhinocerebral mucormycosis caused by *Mortierella wolfii* from Sri Lanka. L.S.M. Sigera, P.G.R.U.M. Welagedara, P.G.R.I.S. Welagedara, R.A.T.K. Ranasinghe, N.M. Jayawardena, Chameera Bandara, Samanmalee Gunasekera, Dhammika Vidanagama, C.G.U.A Patabendige, P.I. Jayasekera, Sybren de Hoog. E-poster presentation at ISHAM Asia 2021.
- 9.** Gastrointestinal basidiobolomycosis: First case from Sri Lanka. Gunathilake, N.W., Peramuna, A.D., Gunarathna, G.J.R., Sigera, L.S.M., Jayasekera, P.I. E-poster presentation at ISHAM Asia 2021.
- 10.** Subcutaneous Basidiobolomycosis – the commonest form. H. Madhumanee W. Abeywardena, Samitha D. Ekanayake, Mathula Hettiarachchi, Amila Rajamanthri, L. S. Sigera, Primali Jayasekera. E-poster presentation at ISHAM Asia 2021.
- 11.** First paediatric patient with gastric basidiobolomycosis in Sri Lanka: A case report. Sandini A. Gunaratne, M.V. Chandu de Silva, Malik C. Smarasinghe, P.G. R. Isanka S. Welagedera, L. Shamithra M. Sigera, Yoosuf Ubaithullah, Primali I. Jayasekera. E-poster presentation at ISHAM Asia 2021.
- 12.** First Sri Lankan child with Conidiobolomycosis – A rare incidence. H. Madhumanee W. Abeywardena, Samitha D. Ekanayake, P.G.R.U.M. Welagedara, P.G.R. Isanka S. Welagedara, L. S. M. Sigera, Bandula Bandaranayake, Dr. Chanuka Dharmadasa, Primali Jayasekera. E-poster presentation at ISHAM Asia 2021
- 13.** Disseminated Fusarium infection in an immunocompromised patient -Successful outcome with combined antifungal therapy. Welagedara P.G.R.U.M., Somawardana U.A.B.P., Madarasingha N.P., Manchanayaka M.A.N., Wijesinghe C.N., Premathilaka G.D.I., Welagedara P.G.R.I.S., Sigera L.S.M., Gunasekera S.P., Jayasekera P. I. E-poster presentation at ISHAM Asia 2021.

14. Mucormycosis: A diagnostic and therapeutic challenge. Darshana Wickramasinghe, L.D. Liyanapathirana, N.Z. Miskin, L.S.M. Sigera, R.L.P.R. Liyanage, P.I. Jaysekera. E-poster presentation at ISHAM Asia 2021.

15. *Nigrospora sphaerica* in a sealed dialysate fluid container from Sri Lanka. Wickramasinghe D., Samarakoon S.M.S.G., Thabrew H., Sigera L.S.M., Piyadasa, U.P.L.A., Jayasinghe H.A.S.N., Jayasekera P.I. E-poster presentation at ISHAM Asia 2021.

16. Eumycetoma by *Madurella grisea* – Case Report from Sri Lanka. Wickramasinghe D, Vidanagama A, Ransimali L.G.H.N, Sigera L.S.M., Jayasekera P.I. E-poster presentation at ISHAM Asia 2021.

17. First Covid 19 associated mucormycosis case from Sri Lanka: A Case Report. Geetha Nanayakkara, Madhawika Dayaratne, Menu N. Pitagampola, M.A.D.P. Gunarathna, Sanath Jayasinghe, K.D.N.U.D. Jayasena, P.G.R.U.M. Welagedara, L. S. M. Sigera, Primali I. Jayasekera. E-poster presentation at ISHAM Asia 2021.

18. Covid -19 and Crptococcal meningitis in a patient with lepromatous leprosy: A case report. Priyadharshana W.B.U., Kumara K.A.S., Kularathna H.P., Rasmali N., P.G.R.U.M. Welagedara, Sigera L.S.M., Jayasekera P.I. E-poster presentation at ISHAM Asia 2021.

19. The clinical significance of colonization of respiratory tract by *Candida* species in intubated patients – a single-centre pilot study in Sri Lanka. Naamal Jayawardena, Primali I. Jayasekera. E-poster presentation at ISHAM Asia 2021.

20. Chromoblastomycosis in Sri Lanka; causative agents and in vitro susceptibility testing in a resource limited setting. Harshani Thabrew, Maya Attapattu, Preethi Perera, Primali Jayasekera. Oral presentation at ISHAM Asia 2021.

### Department of Bacteriology

1. **President's Award for Scientific Publications 2019.** Effects of antimicrobial agents on inflammatory cytokines in acute leptospirosis. *Antimicrobial Agents and Chemotherapy* 62(5): e02312-17 May 2018 DOI: 10.1128/AAC.02312-17 (Awarded in 2021 by National Research Council)
2. **W A S De Silva award for the best paper on Tropical Disease.** Antimicrobial Susceptibility of Pathogenic *Leptospira* Spp. from Human Leptospirosis in Sri Lanka. *Annual Conference Ceylon College of Physicians*, November 2020.

## Department of Virology - 2021

1. Rotary Central District Award for outstanding contribution to public service during COVID-19 outbreak in 2020.
2. Second prize for the best oral presentation. Establishment of an in-house novel coronavirus (SARS CoV-2) real-time PCR assay and investigation of first few cases of COVID-19 in Sri Lanka. Annual Scientific Sessions of Sri Lanka College of Microbiologists, 2020.
3. Third prize for the best oral presentation. Preliminary study to detect mutations in UL97 gene in suspected ganciclovir resistant CMV patients' samples, presented to a diagnostic laboratory in Sri Lanka. JC Thambyrajah, **CJS Jayamaha**, V Ratnayake, N Fernando, S Handunetti. Bulletin of the Sri Lanka College of Microbiologists. OP-06, pp 13, 18 (1) August 2020.

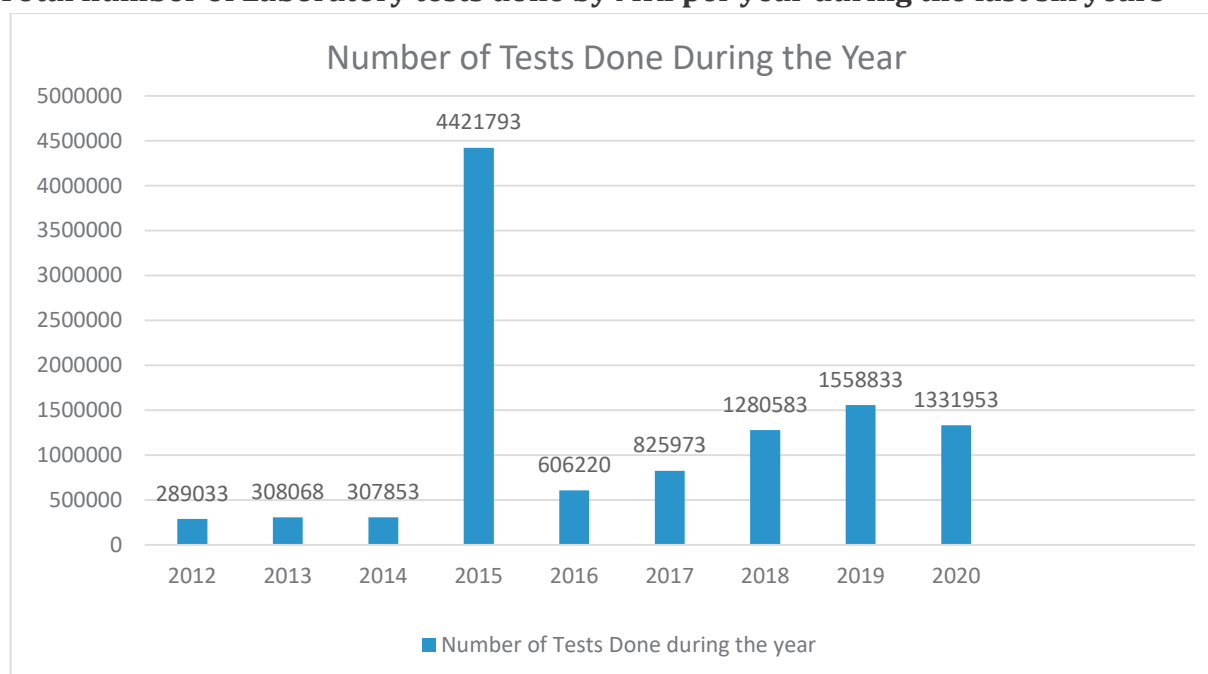
## Details of ongoing development project

Project details	Total estimated cost	Physical progress by 31/06/2021	Financial progress by 31/12/2020
<b>1. Construction of a new ten-story building for the MRI</b>	3382 Mn.	<ul style="list-style-type: none"> <li>• Has been approved by the National Planning.</li> <li>• Has been approved by the Cabinet.</li> <li>• The donor agency has been identified.</li> <li>• The project has been streamlined as a soft loan project under the Ministry of Health.</li> </ul>	Waiting for allocation.
<b>2. Construction of a new three-story building for the Food and Water Department</b>	204 Mn.	<ul style="list-style-type: none"> <li>• Has been approved by the National Planning.</li> <li>• Has been approved by the Cabinet.</li> <li>• The donor agency has been identified.</li> </ul>	Waiting for allocation.
<b>3. Upgrading &amp; Accreditation of the laboratory in</b>	8 Mn.	<ul style="list-style-type: none"> <li>• 40% of the upgrading process has been completed.</li> </ul>	Delayed due to the pandemic and to be completed by the end of 2021.

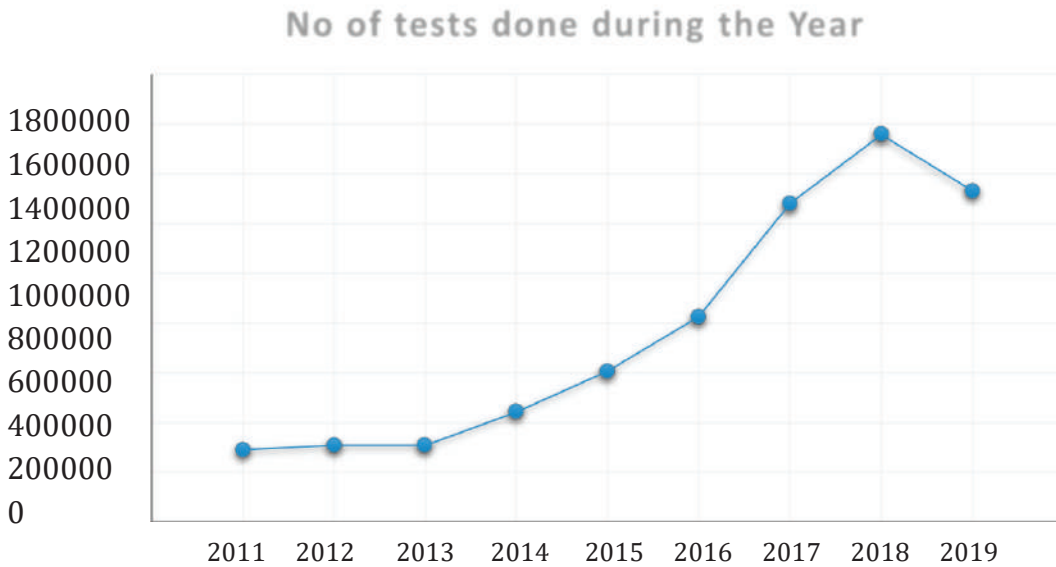
<b>the Department of Nutrition</b>			
<b>4. Publishing food composition tables for Sri Lanka</b>	4.5 Mn.	<ul style="list-style-type: none"> <li>45% of the publishing tables has been completed.</li> </ul>	
<b>5. Building repair of old accounts section</b>	5 Mn.	<ul style="list-style-type: none"> <li>40% of the repair have been completed.</li> </ul>	To be completed by December 2021.
<b>6. Electrical wiring of MLT school, Administration and Accounts Department</b>		<ul style="list-style-type: none"> <li>70% has been completed.</li> </ul>	To be completed by December 2021.

### Performance Trends for the Last Eight Years

#### Total number of Laboratory tests done by MRI per year during the last six years



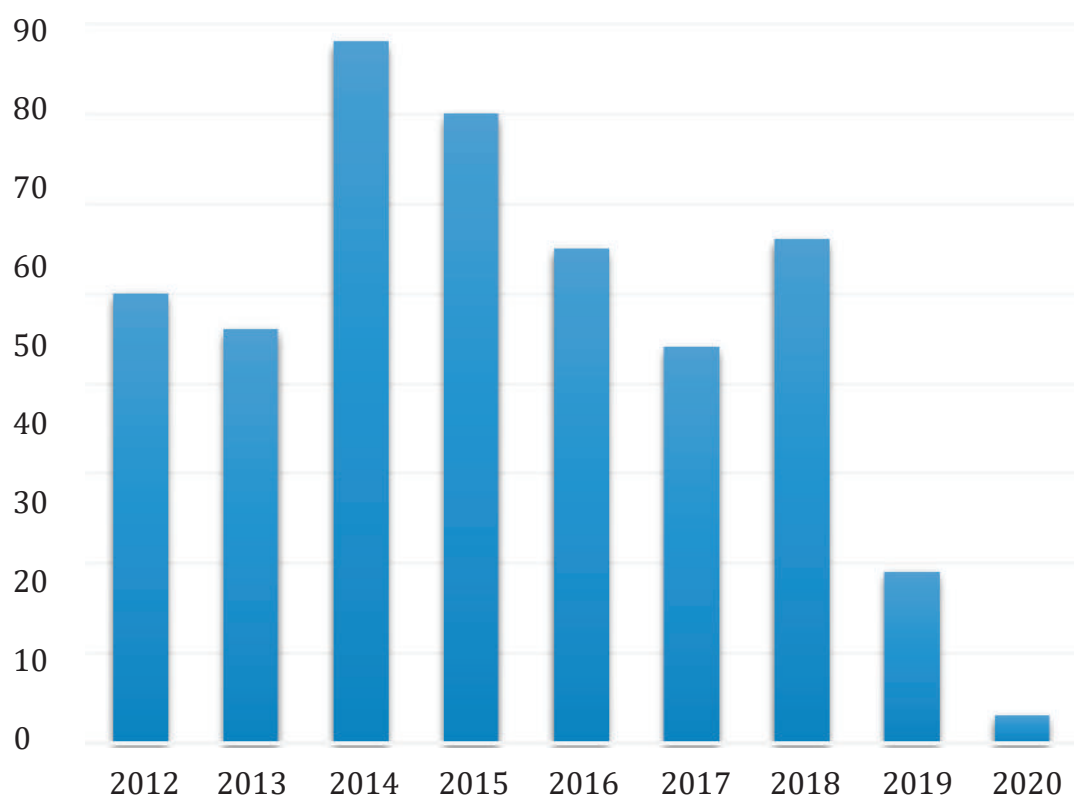
**Trends of number of tests performed by MRI over the last eight years**



**Research in the last few years**

The Research Committee of the Medical Research Institute provides funding for various research projects planned within the institute and by external researchers, taking into account the relevance and importance of such projects that contribute to the improvement of the health of Sri Lankans. During the year 2020, four of such projects have been approved for funding after review and three new research projects have been submitted for approval during the year.

Number of research projects per year



**Special development activities designed for the year 2021**

- A. Completion of groundwork and designing of the ten-story building of MRI and commencement of construction work, and commencement of construction work on the relevant three-story building for the Food and Water Department
- B. Repair and renovation of the Department of Rabies
- C. Establishing a gas line for the training laboratory of MLT School at MRI



## 5 Infrastructure Development

---

The importance of improving health sector infrastructure, which is essential to achieve and improve health indicators and healthy life of the people, has been well recognized by health managers. Benefiting from continuous investments, a gradual improvement can be observed over the years in the country's health infrastructure, which includes medical equipment's, transport and buildings.

Continues provision of quality and efficient service in all levels of health sector namely Primary, Base, General, District and Tertiary are essential to achieve rapid growth and development in the country. In this context, the government continued with its role as the main health service provider in the country, while the private health sector investment on health has increased significantly over the years.

In 2018-2019, the government further continuing a number of new health projects directed at improving the well-being of the general public, while taking measures to enhance the quality of health care services. Other than the constructions, medical equipment base of the government health sector improved further during 2018 - 2019.

### 5.1 MEDICAL EQUIPMENT

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

The main functions and responsibilities of the Biomedical Engineering Services (BES) are as follows.

1. Technical Assessment and Planning
2. Procurement of medical equipment
3. Repair & maintenance of medical equipment
4. Preparing standard specifications for medical devices and guidelines for the maintenance of medical devices and their supporting systems.
5. Training of end users and technical staff
6. Provision of technical expertise in medical equipment

The head office of the Division of Biomedical Engineering Services Division is located in Colombo has workshop facilities, warehouse facilities for equipment and spare parts storage and administrative functions.

At present following staff is available to perform above functions.

Technical Staff		Non-Technical Staff	
Director	01	Accountant	01
Biomedical Engineer	14	Administrative Officer	01
Foreman	42	Development Officers	11
Technician	42	Management Assistant	27
		SKS	35
		Drivers	12

Biomedical Engineering Service also provide facilities for industrial training for Engineering undergraduates at Peradeniya University and Sri John Kothalawala Defense University.

BES is in the process of extending regional Biomedical Engineering Units in the line ministry hospitals listed below.

- Anuradhapura
- Badulla
- Kandy
- Jaffna
- Batticaloa
- Ragama
- Rathnapura
- Kurunegala
- Maharagama
- Matara

Biomedical Engineering Services has initiated development of web-based software for medical equipment Inventory Management System.

### **Vision**

To become the South Asian center of excellence in Biomedical Engineering Services.

### **Mission**

To support the Ministry of Health to achieve its vision for healthier nation by providing appropriate state of art medical equipment technologies for the government hospitals in the country while achieving, the highest standards of safety, Quality, Reliability and Accuracy.

### **Objectives**

1. To ensure availability of appropriate medical equipment for line ministry hospitals at the right time.

2. To ensure availability of spare parts and accessories to maintain equipment uptime at the desired level.

### Achievements/ special events in 2020

No	Name of the Equipment	Source of Receive	Quantity	Estimated Cost (Rs.Mn)
1	Adjustable Beds	Donation	32	3.200
2	Ambu Bags	BES Tender	47	0.423
3	Anesthesia Machine	Project	102	822.32 4
4	Auto Clave Machine Table Top	BES Tender	59	63.325
		Donation	90	
5	BI PAP Machine	BES Tender	19	73.500
		Donation	65	
6	Blood Fluid Warmer	BES Tender	14	3.402
7	Blood Gas Analyzer	Project	26	136.210
		BES Tender	27	
8	BP Apparatus	BES Tender	484	10.982
		Donation	162	
9	Bronchoscope Portable	BES Tender	25	20.000
10	C PAP Machine	BES Tender	22	21.840
		Donation	2	
11	Cath Lab Machine (Anurdhapur a TH)	BES Tender	2	218.392
12	Central Monitoring System (Matale DGH)	BES Tender	1	3.185
13	Colour Doppler	Project	12	197.41 2
14	Cooling Micro Centrifuge	Donation	8	52.328
15	CRRT Machine	BES Tender	5	12.500
16	CT Cone Beam Scanner	BES Tender	2	45.126
17	CT Scanner (Kandy NH, Karapitiya TH, Chilaw DGH, Horana BH, Wathupitiwala BH, Gampaha DGH)	BES Tender	4	566.100
		Project	2	
18	CTG Machine	Project	109	73.030
19	Defibrillator	BES Tender	67	400.520
		Donation	18	
		Project	225	
20	Dental Air Compressor	BES Tender	3	2.428
21	Dialysis Machine	BES Tender	2	20.000
		Donation	8	
22	Digital BP Apparatus	Donation	64	0.512
23	Digital Thermometer	Donation	34	0.170
24	Diathermy Machine	BES Tender	16	24.000

25	Digital Fluoroscopy Machine (Ragama TH,SBSCH Peradeniya)	BES Tender	2	105.000
26	ECG Recorder	BES Tender	74	251.750
		Project	150	
		Donation	41	
27	Echo Cardiography (Matale DGH, NHSL, Anuradhapura TH, Jaffna TH, LRH, Kurunagala TH)	BES Tender	1	83.280
		Project	5	
28	Endoscopy System	BES Tender	31	298.840
29	ENT Laser System (Jaffna TH)	BES Tender	1	33.241
30	HDU Bed	Donation	65	27.625
31	Heart Lung Machine (Karapitiya TH)	BES Tender	1	41.500
32	High Flow Oxygen Machine	BES Tender	109	243.775
		Donation	90	
33	High Pressure Sterilizer	BES Tender	19	15.568
		Project	9	
34	ICU Bed	BESTender	24	43.350
		Donation	78	
35	Infant Incubator	BES Tender	22	94.251
		Project	67	
36	Infant Incubator Transport	Project	28	67.900
37	Infant Warmer	Project	64	158.78 4
38	Infusion Pump	Donation	186	37.700
		BES Tender	568	
39	Laboratory Microscope	BES Tender	50	13.600
40	Laparoscopy System	Project	5	80.000
41	Laryngoscope	Donation	11	5.800
		BES Tender	47	
42	Laryngoscope Video	Donation	4	3.200
43	Laser Thermometer	Donation	47	1.410
44	Light Curing Machine	BES Tender	11	0.352
45	Mammography Machine	BES Tender	4	160.000
46	Microhematocrit Centrifuge	BES Tender	50	4.200
47	Mobile OT Lamp	Project	52	24.440
48	Multipara Monitor ICU	BES Tender	29	240.755
		Project	235	
		Donation	5	
49	Multipara Monitor WD	BES Tender	236	391.160
		Project	439	
		Donation	214	
50	Nebulizer	BES Tender	98	4.560
		Donation	130	
51	Nitric Oxide Therapy Machine	BESTender	18	147.366
52	OT Table	BESTender	2	63.000
		Project	16	

53	Oxygen Regulator	Donation	35	0.455
54	OT Lamp (Ceiling)	Project	8	16.000
55	Oxygen Concentrator	BESTender	25	81.000
		Donation	110	
56	PCR Machine	Donation	3	12.600
57	Phaco Emulsifications on Machine	BES Tender	20	149.860
58	Phototherapy Machine	Project	87	31.755
59	Phototherapy Machine DS	BES Tender	33	16.500
60	Pulse Oximeter	Donation	106	62.764
		Project	392	
		BESTender	425	
61	Pulse Oximeter Fingertip	Donation	216	21.600
62	Spot Lamp	BES Tender	34	34.000
63	Suction Apparatus	BES Tender	110	38.416
		Donation	86	
64	Syringe Pump	BES Tender	435	39.720
		Donation	227	
65	Therapeutic Cooling System	BES Tender	15	4.500
66	Ultrasound Scanner	Donation	7	80.580
		Project	24	
		BESTender	37	
67	Ultrasound Scanner Portable	Donation	15	80.580
		Project	19	
		BESTender	34	
68	Ventilator ICU	Donation	6	670.072
		Project	102	
		BES Tender	28	
69	Ventilator Neonatal	Project	55	270.98 5
70	Ventilator Transport	BES Tender	26	537.880
		Donation	212	
71	X Ray CR System	BES Tender	5	12.500
72	X Ray Machine Mobile	BES Tender	20	464.000
		Project	9	
73	X Ray Machine Portable	Donation	4	32.000
74	X Ray Machine	BES Tender	3	23.700
75	X RayMachine C Arm (Karapitiya TH)	BES Tender	1	2.500
76	X Ray Machine Digital (Polonnaruwa DGH)	BES Tender	1	40.000
77	X Ray Machine Digital Static	BES Tender	14	140.000
Total Cost (Rs.Mn.)				<b>8278.093</b>

## Details of ongoing development projects

### Ongoing Development Project Details

No	Equipment	Qty	Est.Cost (Rs.Mn)
<b>vital requirements of ME 2020</b>			
1	CT Simulator	3	262.10
2	CT Scanner 128 slice for Apeksha Hospital	1	99.00
3	Transport Ventilator	3	4.47
4	Infant Warmer	49	106.80
5	ENT Navigation system for TH Jaffna	1	30.81
6	MRI Machine (1.5 T) for Apeksha Hospital	1	150.00
7	Ventilator Transport (Neonatal)	3	6.00
8	Ventilator with high frequency	3	12.00
9	OT Table	12	33.60
10	03 Nos. Diathermy	3	3.33
11	CT Scanner - 128 Slice (Batticaloa)	1	92.43
12	BP Apparatus	774	10.06
13	X-Ray Illuminator	17	0.03
14	56 Nos. Nebulizer	56	1.23
15	CT Scanner for Awissawella	1	120.00
16	DSA M/c	3	300.00
17	Anesthetic m/c with ventilator	10	51.90
18	C-Arm X-ray unit	2	20.00
19	02 Nos. Endoscopy	2	32.00
20	Ventilator - Transport	68	170.00
21	X-ray Machine - Digital	2	80.00
22	97 Nos. Infusion Pumps	97	12.61
23	Spot Lamp	17	17.00
24	Syringe Pump	134	21.98
25	Phototherapy Unit (Double Surface)	3	0.93
26	Ultrasound M/C (High End) (Welisara)	1	10.00
27	03 Nos. C-PAP (Adult & paed)	3	3.09
28	Slit lamp with tonometer	8	32.50
29	Vitreotomy Machine	5	80.00
30	CRRT	10	35.00
31	04 Nos. Patient warmer Adult	4	1.64
32	Suction Apparatus Double Jar	47	9.40
33	Ultra sound Scanner	12	150.00
34	Urology Laser Machine(120W)	2	50.00

35	Ventilator (Therapeutic) - Neonatal	16	80.00
36	Ventilator (Therapeutic)	84	252.00
37	Arthroscopy	4	96.00
38	Cardiac Output Monitor	11	13.75
39	05 Nos. C-PAP High flow	5	5.15
40	71 Nos. Defibrillator	71	56.80
41	03 Nos Laparoscopy	3	60.00
42	Ventilator ICU (transport)	13	32.50
43	BI PAP Machine	250	200.00
44	High Flow Therapy Machine	150	150.00
45	MRI Scanner for GH Kalubowila	1	300.00
46	Cath lab for TH Batticaloa	1	150.00
47	Cath lab for TH Karapitiya	1	150.00
48	CT Scanner for GH kalutara	1	150.00
<b>Urology Equipment for Kalutara</b>			
49	C-arm x-ray	1	15.00
50	Holmium Laser	2	100.00
51	Laparoscopy system	1	12.00
52	Electrosurgical Units	1	1.00
53	OT Table (Urology)	1	3.00
54	Pneumatic Lithotripter	1	40.00
55	Rigid Endoscopy system	1	15.00
56	Flexible Endoscopy	1	12.00
57	Shockwave Lithotripter	1	15.00
<b>Medical Equipment for NHSL OPD</b>			
58	02 Nos OT Lamp	2	3.95
59	03 Nos OT Table	3	11.25
60	01 No Anesthetic Machines	1	3.82
61	05 Nos Diathermy Machines	5	0.90
62	01 No MRI Scanner	1	252.71
63	01 Nos CT Scanner with Accessories	1	89.42
64	54 Nos Spot Lamp	54	9.57
65	02 Nos Laryngoscope	2	0.20
66	04 Nos X-Ray portable	4	80.00
67	04 Nos X-Ray Digital	4	96.00
68	46 Nos X-ray Illuminator -Double	46	0.69
69	28 Nos Ophthalmoscope	28	2.80
70	02 Nos Phototherapy Unit	2	0.62
71	32 Nos Multipara Monitor	32	16.00
72	90 Nos Infusion Pumps	90	9.00
73	90 Nos Syringe Pumps	90	14.76

74	01 No Sterilizer	1	0.10
75	02 Nos High-pressure Autoclave (>500L)	2	16.00
76	04 Nos High-pressure Autoclave (>800L)	4	48.00
77	01 No Low Temperature Autoclave M/c	1	12.00
78	169 Nos BP Apparatus	169	2.20
79	04 Nos ECG Machine	4	0.98
80	10 Nos Nebulizer	10	0.22
81	28 Nos Auroscope	28	5.60
82	02 Nos Thoracoscope	2	10.00
83	01 No Argon Plasma Coagulation M/c	1	3.50
84	02 Nos Electro Cautery	2	0.60
85	01 No Radio Frequency Electro Cautery	1	1.00
86	09 Nos Ultra Sound Scanner	9	90.00
87	02 Nos Doppler - Hand Held	2	0.40
88	03 Nos Echo Machine	3	45.00
89	01 No C-Arm Fluoroscopy	1	15.00
90	01 No Ultra Sound Scanner (Color Doppler)	1	8.00
91	01 No Endoscopy Ultrasound (EL's) System - Processor	1	15.00
92	01 No Endo Ultrasound Scopes (Ebus)	1	20.00
93	01 No Dual Energy X-ray Absorptiometry Scanner	1	10.00
94	03 Nos Endoscopy System (Processor, Light Source, Monitor, Cart)	3	48.00
95	06 Nos Duodenoscopes	6	12.00
96	06 Nos Gastroscope	6	12.00
97	06 Nos Flexible Sigmoidoscope	6	24.00
98	06 Nos Colonoscope	6	30.00
99	01 No Double Balloon Enteroscope sys	1	16.00
100	01 No Holmium Yag Laser Machine with Endoscopic	1	30.00
101	02 Nos Video Bronchoscope	2	8.00
102	01 No Photodynamic Therapy Unit	1	1.50
103	05 Nos Portable Ventilator	5	10.00
104	05 Nos Defibrillator	5	6.00
105	03 Nos Capnometers	3	6.00
106	04 Nos Blood Gas Machine	4	4.00
107	03 Nos Electrolyte Machines	3	2.10
108	01 No Retinal Digital Camera	1	10.00
109	01 No Laser (Harmony XL)	1	40.00

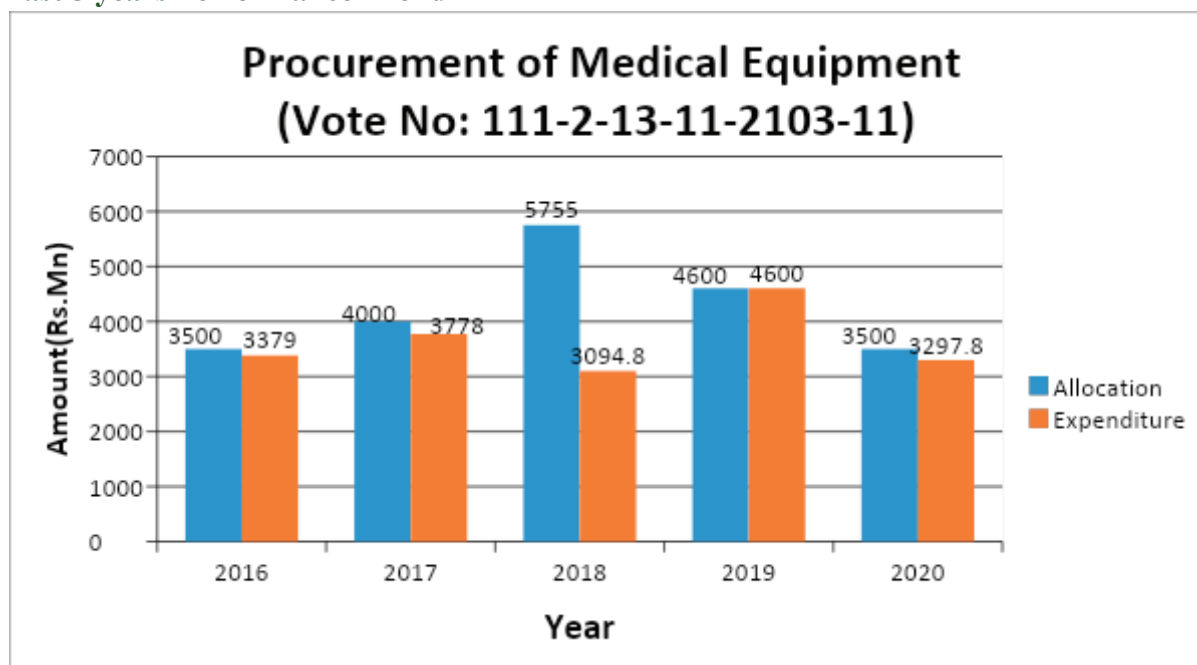


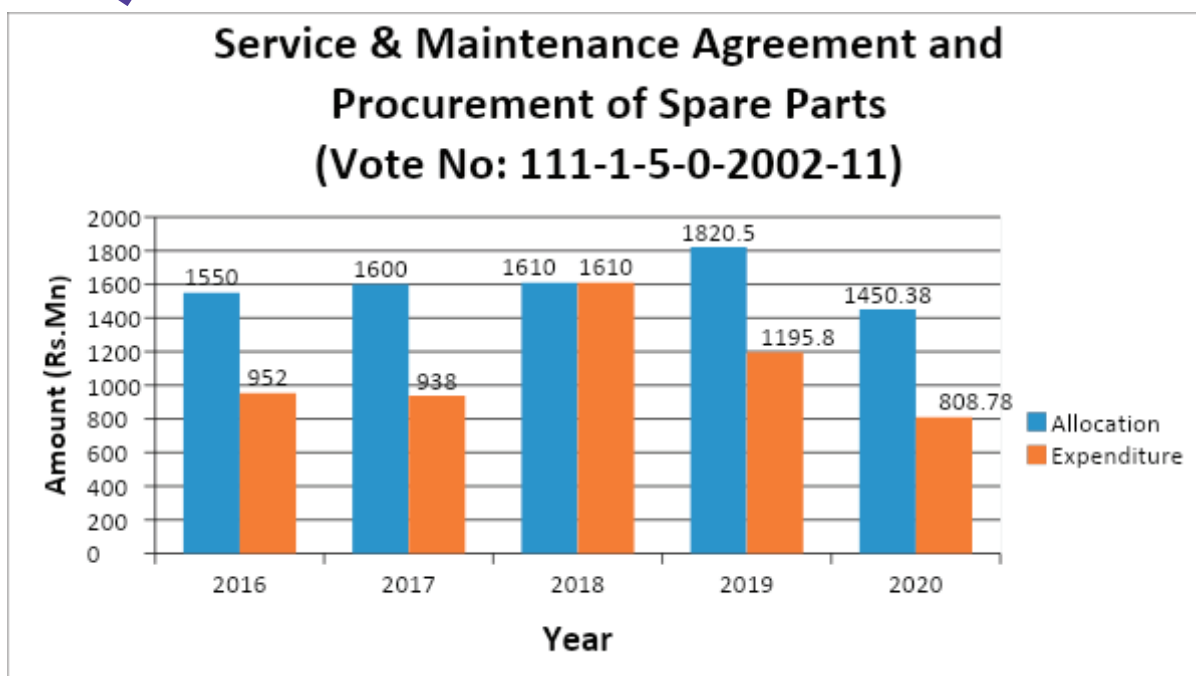
110	01 No Esophageal PH & Manometry Equipment	1	19.00
<b>Medical Equipment for LRH New Theatre</b>			
111	Instruments for Pediatric Orthopedic	11	41.50
112	Tourniquet system	2	3.00
113	Drill System	4	26.60
114	Lazaro System	1	2.00
115	Adolescent Limb Reconstruction system	5	36.50
116	Telescopic nail system	1	5.00
117	Video Arthroscopy system	1	33.40
118	C-Arm X-ray machines	1	14.00
119	Spine deformity Correction system	3	9.80
120	Halo Brace	1	0.65
121	Scoliosis correction	2	20.80
122	Neuro Endoscopy system	1	37.00
123	Cranial Stabilization system	1	3.50
124	Transcranial Doppler Ultrasound	1	5.70
125	cranial Ultrasound scanner	1	15.00
126	Surgeons Operating Chair	1	5.00
<b>Emergency Procurement for COVID</b>			
127	HDU Bed	150	63.75
128	Adjustable Bed	2400	24.00
129	Autoclave Machine	150	63.75
130	BI PAP Machine	300	262.50
131	Blood Gas Analyzer	7	17.99
132	BP Apparatus	1500	25.50
133	BP Apparatus Digital	2250	18.00
134	C PAP Machine	184	167.44
135	CTG Machine	33	22.11
136	Defibrillator	50	64.60
137	Dialysis Machine	20	40.00
138	ECG Machine	270	256.50
139	High Flow Therapy Machine	325	398.13
140	Ventilator ICU	75	369.53
141	Infusion Pump	500	25.00
142	Laryngoscope	100	10.00
143	Laser Thermometer	750	22.50
144	Multipara Monitor WD	750	330.00
145	Multipara Monitor ICU	100	89.50
146	Nebulizer	1110	22.20
147	RO Plant Portable	20	40.00

148	Pulse Oximeter	960	65.28
149	Pulse Oximeter Finger Tip	100	10.00
150	Spot Lamp	100	100.00
151	Suction Apparatus	135	26.46
152	Syringe Pump	1600	96.00
153	Ventilator Transport	25	56.50
154	Ultrasound Machine Portable	135	159.98
155	X Ray Machine Mobile	5	80.00
156	X Ray Machine Portable	35	280.00
157	Infant Warmer	50	124.05
158	Infant Incubator	50	52.95
159	Oxygen Regulator	5000	65.00
160	Ventilator Neonatal	10	49.27
161	Phototherapy Unit	50	18.25
162	Hand Held Doppler	100	10.00
			8879.18

Excluding above equipment, Chinese project will fulfill many requirements of medical equipment in most line ministry and provincial hospitals in 2020.

#### Last 5 years Performance Trend





All above figures as at 31st of June,2021

Ongoing Development Project Details (Bio Medical Engineering Service)				
No	Project Description	Total Estimate Cost (Rs.Mn.)	Physical Progress by 31.12.2020	Financial Progress by 31.12.2020 (Rs.Mn.)
1	Construction of Faculty of Nursing at Sri J'pura	7,171.88	17%	1,619.00
2	Improvement of ETU-Facilities Under Line Ministry Hospitals A & E -Jaffna (Stage II)	1,224.64	15%	430.00
3	Construction of Millennium Ward PCU & Paramedical Services Building Colombo South TH Kalubowila	743.01	70%	432.00
4	Construction of Cardiology Unit, Catheter Laboratory Complex and ward Complex at TH Batticaloa	324.29	65%	222.00
5	New Medical Ward Complex at DGH Chilaw	583.77	32%	187.00
6	Construction of Surgical and Medical Ward Complex TH Karapitiya	690.29	35%	260.00
7	Construction of Stroke Treatment Centre, TH Karapitiya	68.92	80%	43.00

8	Construction of new building for Ministry of Health	5,979.00	45%	1,861.00
9	Construction of Proposed cancer Treatment Center Stage II	1,944.83	27%	676.00
10	Construction of New Theatre Complex with modern facilities at Base Hospital Horana	1,330.00	10%	240.00
11	Construction of Three Storied Building Consist of X-Ray unit "OPD" Accident & Emergency Unit and Blood Bank at BH-Pimbura	139.95	65%	74.00
12	Establishment Specilized Pediatric care complexes in TH Karapitiya	1,587.00	15%	430.00
13	Construction of Reproductive Treatment Centre for Castle Street Hospital for Women	104.70	9%	29.00
14	Establish Oral Health centre in TH Karapitiya	997.00	22%	318.00
15	Establish Bone Marrow Transplant Unit at GH Kandy	856.90	18%	241.00
16	Construction of Renal care Treatment Centre TH-Batticaloa	383.69	85%	327.00
17	Construction of Renal care Treatment Centre GH Hambantota	210.05	17%	54.00
18	Construction of Renal care Treatment Centre GH-Badulla	668.20	5%	59.00
19	Construction of Heart Centre, Lady Ridgway Hospital, Borella (Little Heart)	2,631.00	15%	651.00
20	Nephrology Dialysis & Transplant Unit, TH-Karapitiya	790.00	finishing works (95%)	637.00
21	Improvement of DH Moratuwa	1,035.00	Progress 5%	160.00
22	Establishment of Highly Specialized Centre to manage serve obstetric complications and medical diseases complicating pregnancies in Colombo DMH	249.84	2%	38.64
23	Construction of Surgical wards & Surgical complex, DGH-Monaragala	793.00	Structural works	121.00
24	Construction of New 10 Storied Building, GH-Badulla	2,835.00	5%	150.00

25	Construction of Maternity Ward Complexity-Kurunegala (Stage III)	914.94	To be Finished	720.10
26	NTS-Development of Infrastructure of NTS Kalutara	714.20	20%	102.30
27	NTS-Development of Infrastructure of NTS-A'pura	789.41	38%	122.62

### Achievements/Special Events in 2020

The following construction works have been completed during 2020 and 1st six months of the current year

No	Project	Project Cost (Rs.Mn.)
1	Establishment Specialized Paediatric care complexes in Ampara	1,263.00
2	Construction of A & E Building for BH Kalmunai (Stage II)	311.75

### Special Development Activities Planned for 2021

1	Construction of building for specialized paediatric development centre in Colombo District.
2	Construction ward complex for Cancer units (stage II) G.H.-Rathnapura
3	Construction of Oral Health Complex including all Dental specialities in GH Rathnapura
4	Construct 10 numbers of Stroke canters and Develop Accident & Emergency Care facilities
5	Construction of 5 Storey Building at BH Kolonna
6	Construction of 5 Storey Building at BH Kahawatta
7	Development of Teaching Hospital Rathnapura
8	Establishment of Cardiology Unit with Cath Lab at DGH Ampara
9	Construction of Studio type Staff Quarters - BH Dickoya
10	Establishment of National Heart Centre at National Hospital, Colombo
11	Construction of National Training centre (GOSL)
12	Proposed Exercise centre at NCD premises

## 5.2 CONSTRUCTIONS

The logistic division is responsible for the provision of allocations for maintenance and services of the following activities and also for construction of new buildings as required by hospitals and institutions under the control of the Ministry of Health Nutrition and Indigenous Medicine.

The logistic division is responsible for the provision of allocations for maintenance and services of the following activities and also for construction of new buildings as required by hospitals and institutions under the control of the Ministry of Health Nutrition and Indigenous Medicine.

<b>On-going Construction Projects (Local Funded)</b>			
	<b>Project</b>	<b>TEC (Rs.Mn.)</b>	<b>Cumilative Expenditure up tp 2021.08.31 (Rs.Mn.)</b>
<b>1</b>	Upgrading of Nurses Training Schools	2,933.34	796.15
<b>2</b>	Construction of Nursing Faculty/ Hostel	7,171.80	1,827.82
<b>3</b>	Improvement of ETU Facilities under Line Ministry Hospitals	9,525.00	3,241.01
<b>4</b>	Millennium Ward Complex at TH Kalubowila	988.76	1,271.42
<b>5</b>	Construction of Cardiology Unit, Catheter Lab, Laboratory Complex and Ward Complex at Teaching Hospital Batticaloa	427.00	278.15
<b>6</b>	Constructions of Staff Quarters for Medical Officers, Nurses& Others in Identified Hospitals	200.00	305.81
<b>7</b>	Development of Estate sector Hospitals	373.22	374.57
<b>8</b>	New Medical Ward Complex at DGH Chilaw	311.00	202.65
<b>9</b>	Development of TH Karapitiya Hospital	1,024.00	426.47
<b>10</b>	Construction of Ministry Building	5,979.00 (3,896.55)	2,955.64
<b>11</b>	Construction of National Stroke Centre at Base Hospital Mulleriyawa	1,111.86 (543.00)	372.83
<b>12</b>	Provision of High Quality Radiotherapy for Cancer Patients in Sri Lanka with High Energy Radiation	6,872.24	3993.14
<b>13</b>	Construction of Cancer Hospitals at Thellipalei, Kandy and Galle Karapitiya	3,000.00	1,320.63

14	Construction of well Equipped 10 District Based stroke Centres and Strengthening the Accident & Emergency Care Service in Hospitals	4,494	74.88
15	Construction of Three Storied Building Consist of X-ray unit, OPD, Accident & Emergency Unit and Blood Bank at BH-Pimbura	293.7	4.05
16	Establishment specialized Pediatric care Complexes in Karapitiya, Ampara and Jaffna Hospitals	4676	1538.99
17	Establishment of a Base Hospital in Nintavur		796.92
18	Establishment of an Oral Health Center in Karapitiya Teaching Hospital	1,076	366.65
19	Establishment of a Bone Marrow Transplant Unit at Kandy General Hospital	856.9	284.69
20	Construction of Heart Centre at Lady Ridgeway Hospital	2,439.78	335.13
21	Construction of Oral Health Complex including all Dental specialties in PGH Rathnapura	340	41.58
22	Establishment of Highly Specialized Centers in colombo, Kandy & Anuradhapura to manage Serve Obstetric Complications and Medical Diseases Complecating Pregnancies	1,844.78	250.62
23	Construction of Ward Complex to Oncology Unit-Stage 11 PGH Ratnapura	530	
24	Construction of Building for National STD/ AIDS Control Programme	126	32.12
25	Implementation of Electronic Medical Records in Sri Lankan Government Hospitals		256.44
26	Establish a Reproductive Treatment Centre at the Castle Street Hospital for Women	100	44.47
27	Improvement of DH Moratuwa	1,000	210.24
28	Expand the Beruwala Base Hospital	300	392.94
29	Construction of Surgical Wards and Operation Theatre Complex-DGH Monaragala	790	121.26
30	Construction of a Ten Storied Building at the PGH Badulla	2,835	340
31	Establishment of Kidney Dialysis Centers in Chronic Kidney Disease Prevalent areas	6,500	2,207.24

## 5.3 SPECIAL FOREIGN FUNDED PROJECTS

	Project	TEC (Rs.Mn.)	Cumilative Expenditure up tp 2021.08.31 (Rs.Mn.)
1	Primary Health Systems Strengthening project (PSSP)-GOSL-WB	36,440.00	1,263.11
2	Development Ambulatory Care center (OPD) of NHSL (GOSL China)	14,600.00	1,608.16
3	Development of District Hospital Kalutara as a Specialized Maternal and Children's Hospital(GOSL & Netherland)	5,400.00	2,042.68
4	Helmut Khol Maternity Hospital Karapitiya, Galle(GOSL - Germany - kfw)	6,733.94	328.11
5	Matara District Maternal and Newborn Health care Strengthening Project (GOSL-KOICA)	1275.00	494.47
6	Construction of a surgical unit and Procurement of Medical equipment at Teaching Hospital in Batticaloa (GOSL-India)	275.00	24.40
7	Upgrading Health Facilities of Selected Hospitals (EXIM Bank of china)	15,292.00	9,955.11
8	Construction of National Nephrology Hospital in Pollonnaruwa (GOSL China)	13,000.00	790.79
9	A Neonatal and Obstetrics Reference Center for the De Zoyza Maternity Hospital(France-HNB)	830.00	1,219.58
10	Primary Health system Enhancement Project ADB	10,500.00	3,188.91
11	Upgrading of Operation Theatres and ICU Equipment (GOSL-Austria)	1,700.00	1,734.74
12	Health and Medical Service Improvement Project (GOSL - JICA)	16,594.00	284.11
13	Development of Hospitals in Nothern Province (DRIVE) (GOSL-Netherland)	12,225.00	3,866.63
14	Sri Lanka COVID19 Emergency Response and Health systems preparedness project (WB-GOSL)	41717.50	8,360.50
15	Global Fund to Fight Against AIDS, Tuberculosis and Malaria (GFATM)	1,715.00	3,290.59



## 5.4 TRANSPORT

### Transport Unit

The transport unit of the Ministry of Healthcare, Nutrition and Indigenous Medicine plays a very important role in the provision of services in the health institutions by providing the necessary transport facilities. The following section are included to the transport section

- Service station – at Mulleriyawa
- Repair section – at Bio Medical Engineering Unit

It has been also possible to prevent irregularities and ensure saving on expenditure as a result of the setting up to above station/section belonging to the Ministry of Health. The following table given the details of the vehicles of the Ministry of Health.

Type of Vehical	Over 2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Total
Ambulances	529	26	52	43	52	30	12	-	250	87	-	-	-	3	192	1,276
Double cabs	267	13	65	-	58	9	-	92	-	-	5	35	-	11	3	558
Cars	48	-	-	-	-	-	-	5	-	-	-	-	3	-	-	56
Lorries	110	-	10	-	-	-	-	-	-	-	-	-	-	-	-	120
Vans	84	-	2	7	-	3	-	9	-	-	17	-	48	7	-	177
Mini Vans	-	-	-	30	-	-	-	-	-	-	-	-	-	-	-	30
Bowser	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9
Jeeps	78	27	13	4	-	1	-	-	-	-	2	2	-	2	-	129
Buses	59	-	5	11	1	-	-	-	-	-	-	-	-	8	5	89
Ref.Lorries	2	-	2	3	4	-	-	-	10	-	-	-	-	-	-	21
Three Wheels	49	-	-	3	1	-	-	-	-	-	-	-	-	-	-	53
B/C Vehicles	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7

Vans (Mobile)	33	-	-	-	1	-	-	-	-	-	-	-	-	-	-	34
X-ray Vehicles	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Crew Cabs	10	-	-	-	-	-	-	-	-	-	10	-	-	-	-	20
Motor Cycles	1010	-	-	-	-	125	-	140	150	-	-	-	5	-	-	1,430
Mini Truck	-	-	-	-	-	-	-	-	-	-	-	-	-	50	-	50
Tractor	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
<b>Total</b>	<b>2,297</b>	<b>66</b>	<b>149</b>	<b>101</b>	<b>117</b>	<b>168</b>	<b>12</b>	<b>246</b>	<b>410</b>	<b>87</b>	<b>34</b>	<b>37</b>	<b>56</b>	<b>81</b>	<b>200</b>	<b>4,061</b>

## 6. Human Resource Development

---

### 6.1 EDUCATION, TRAINING AND RESEARCH UNIT

#### **Introduction**

Education, Training and Research Unit of the Ministry of Health functions under purview of the Deputy Director General (Education, Training & Research) and has three directorates i.e. Directorates of the Training, Research and Nursing (Education).

#### **Vision**

Quality and qualified members of health staff contributing to economic, social, mental and spiritual development of Sri Lanka

#### **Mission**

To be the focal point of facilitation, central agency of monitoring and evaluation and principal provider of technical expertise in education, training and research spheres in Sri Lankan health sector for the development of knowledge, skillful, efficient, effective, patient centered and innovative health staff members

#### **Objectives**

The Education, Training & Research Unit is the focal point in policy formulation, providing technical guidance related to training and also coordinating basic training programs for all staff categories except for basic degree programs for Medical Officers and Dental Surgeons. Furthermore, the Unit is responsible for capacity building of the health workforce through post basic and in-service training programs. In addition, the Unit develops policies and capacity in research related to health and provide financial allowances to the relevant officers for carrying out work place-based research.

National Institute of Health Sciences (NIHS) is also under the administrative and technical supervision of the DDG (ET&R).

Furthermore, the ET&R Unit coordinates with Ceylon Medical College Council, University Grants Commission and other relevant academic and professional institutions and organizations in Sri Lanka with the objective of strengthening the human resource capacity of the health sector.

The unit has broadened its capacity in coordinating important training programs aims with the international organizations to improve the capacity of health workforce in Sri Lanka.

## Achievements/ special events in 2020/2021

- **Recruitment and Basic Training**
  - **Intake for basic training programmes**

Intake for training is determined by the administrative sections of the Ministry of Health in consultation with ET&R Unit, Planning Unit and HR Coordinating Unit. Training profile in 2020-2021 is given in following

### Profile of basic training programs and Degree Holders carried out in 2020 -2021

S. No.	Category of staff	Number recruited During 2020	Number completed the training During 2020	Number recruited During 2021 (up to June)	Number completed During 2021 (up to June)
1	Nursing Officers (Basic Training)	2,614	3,431	4276 ( to be recruited in October)	2654 ( to be out in September)
2	Medical Lab.Technicians	113	133	187	
3	Pharmacists	32	79	-	
4	Physiotherapists	-	8	-	
5	Occupational therapists	51	5		
6	Radiographers		6		
7	Public Heath Midwives	847	-		752
8	Public Health Inspectors	317	43		
9	Entomology Assistants	15	23		
10	Cardiographers	-	-		
11	Electro-encephalograph Recordists	16	-		
12	Ophthalmic technicians	-	8		
13	Dental Technicians	12	-		
14	School dental therapists	55	14		
15	Public health laboratory Technicians	-	61		60
16	Public Health Field Officers	-	-		
17	Prosthetics & Orthotics	8			
18	Hospital Attendance	409	394		
	<b>Total</b>	<b>4,489</b>	<b>4,205</b>	<b>189</b>	<b>812</b>

○ **Post Basic Training for nursing officers**

**Categories of post basic training programmes carried out in 2020 -2021 with numbers of Nursing Officers recruited and number completed the training**

	Training Programme	Duration	Number Recruited		Number completed	
			2020	2021	2020	2021(up to June)
1	Psychiatric Nursing Training	6 months	-	-	59	-
2	Stoma care Training	6 months	-	-	-	-
3	ETU Training	6 months	-	-	-	-
4	Teaching & Supervision	1 year	29	-	80	-
5	Ward Management & Supervision	1 ½ years	822	-	-	847
6	Midwifery Training	6 months	-	-	612	-
7	Public Health Nursing Sister		125	-	-	125
	Public Health Nursing Officer		88	-	-	-
	<b>Total</b>		<b>1,064</b>		<b>751</b>	<b>952</b>

## 6.2 CAPACITY DEVELOPMENT OF SERVICE PROVIDERS OF THE DEPARTMENT OF HEALTH

The ET&R Unit plays the pivotal role in management of in-service training programmes in the health sector by providing the necessary technical and financial assistance. Depending on the institutional needs, during the year 2019 funds were allocated for the training of many categories of the health workforce. The ET&R Unit reviews the training proposal for eligibility based on the training needs identified by the relevant institutions. Training programmes fulfilling eligibility criteria were funded. Funds utilization is monitored and evaluated.

### 6.2.1 In-service Training Programme

ET&R Unit itself, regularly carries out in-service training programs for different staff categories based on the requests made by the heads of the institutions and professional organizations

Numbers and categories of staff in-service training received with funds from the ET&R unit during the year 2020 -2021 for Group Training Programmes ,Language Training Programmes, Individual

Category of Health Personnel	In Service Training - 2020			In Service Training - 2021 (up to June)		
	Group Training	Individual Training	Language Training	Group Training	Individual Training	Language Training
Consultants	85		140	163	-	
Medical Officers	1,844	12	-	777	155	15
Principals/ Tutors		17	-	10	-	11
Nursing Officers	3,041	15	1,344	3,137	-	20
PSM categories	975	-	90	288	-	
Paramedical	220	-		217	-	
PPO/PPA/DO/HMA/MA	888	62	-	1,173	-	54
Health Assistants	535	-	-	2,512	-	1
Other staff	701	-	-	-	-	54
<b>Total</b>	<b>8,298</b>	<b>106</b>	<b>1574</b>	<b>8,277</b>	<b>155</b>	<b>155</b>

## 6.2.2 Online Training Programmes

### ▪ Under the PSSP Funds

1. Conducted 3-day in service training programs for newly recruited Management Assistants attached to the Ministry of Health – Completed 3 programs and trained 210 participants
2. Two 20-day programs are scheduled during 2021 for class I Public Health Management Assistance – for 140 participants
3. Supply of necessary equipment for CPD programs is ongoing (processing procurement)

Programs Under the WHO Funds

No.	Registration Number	PO #	Ex. Type	Short Description	Funds Received SLR	Progress up to June 2021
1	2020/1037373	202569649	511-DFC	Establishment of a distance education system for the training facilities and schools under the Ministry of Health	6,441,600	IT support for distant educational to the schools is completed and online training is ongoing. The Draft document of the report submitted and discussed; wait for the final report. The basic training module developed is in use for capacity development.
2	2021/1107825	202661745	511-DFC	Revising and finalizing of Standard Operating Procedures (SOP) of Training Programmes of Professions Supplementary to Medicine (PSM) and Para Medical Categories	742,707.43	Finalized the SOP of the Basic Training of EEG, ECG and Dental Techn, Ophthalmic technology and Radiography. Other SOPs are ongoing.
3	2021/1103179	202654769	511-DFC	Development of the National Health Research Strategy for Sri Lanka and implementation of selected activities supported	1,885,300	Funds received for 3 activities. Activity 3 is completed and Activity 2.a & 2.b are 80% completed. Activity 1 is ongoing (with University of Colombo).
4	2021/1103220	202654192	511-DFC	Enhancement of HELLIS network services and develop distance education learning materials for the end users training services	620,993.37	Received funds for 1 activity. 80% . Scheduled to be spent on preparing Videos.

### 6.3 RESEARCH

Education, Training and Research Unit of the Ministry of Health coordinates the research activities in collaboration with the National Health Research Council (NHRC) to promote health and health related research in Sri Lanka.

#### Main Activities

The research proposals submitted to the unit for funding are scrutinized for suitability by a team of experts appointed by research management Committee of ministry of Health and are thereafter approved for research allowance payment by consolidated fund.

Overseeing the granting of administrative approval for research activities conducted in the government sector Health Institutions. Including perusal of material Transfer Agreements and data Transfer agreements when international collaborative research is carried out.

Ensuring the ethical aspects of health research by establishing and capacity building of Ethics Review Committees Island wide.

Establishing the mandate for health research in Sri Lanka. Capacity building of Researchers in scientific methodology and dissemination of research findings.

#### Activities carried out by the Research unit during the period from 2020-2021

Name of the activity	Description	Remarks
<b>1. On line research methodology programme</b>	Basic Research Methodology programs for Health staff Advanced research methodology programmes for doctors	January 2020 1 <sup>st</sup> work shop March 2020 2 <sup>nd</sup> work shop
<b>2. Started to evaluate Ethics review committees under the ministry of Health</b>	Data collecting format was prepared and sent to relevant ERCs to gather data from relevant ERCs Number of ERCs Registered and approved by Ministry of health for health research	Completed.
<b>3. Started the dissemination of research findings of studies submitted for research allowance</b>	Categorization of researches according to directorates and copied to CDs	Ready to send to units



<b>4. Granted admin clearance for 03 covid19 related researches and others</b>	Administrative Clearance granted	Total Approved -25 Provisional approved 4 Pending approved 1
<b>5. Revised the circular on administrative Clearance issued 2015 and 2017</b>	Identified the need of revising the circular on administrative Clearance. NHRC contributed to develop it	Circular issued under the No. 01/30/2020
<b>6. Identify the National Health Research priority</b>	Format developed for gathering data	In process – being carried out by the expert service hired by WHO
<b>7. Identified the need of revise the existing National guide lines on establishing ERCs at institutional level</b>	RMC Advised to prepare guide to established ERC in Ministry of Health	Resource pool identified. New guideline completed awaiting approval by NHRC and RMC prior to printing
<b>8. Focal points for institutional research cells identified</b>	Meeting was arranged with regional CCPs	Pending the feedback from focal point
<b>9. Started to develop curriculum to train the ERC members</b>	Committee identified	In process
<b>10. Developing a pathway to approve research proposals with MTA</b>	Preliminary discussion was taken place at the Research Management Committee	A subcommittee under the chairmanship of DDG ETR has been formed under the main tissue transplantation committee
<b>11. Awareness was done regarding research allowance for non-medical categories</b>	Workshop was conducted to aware and promote non-medical categories such as, bio-medical engineers/financial officers and administrative officers	Completed. Awaiting feedback
<b>12. Approving NHRC act.</b>	Cabinet memorandum prepared	Awaiting to brief the Minister of Health
<b>13. Online research methodology programme for medical officers</b>	Advanced on line research methodology programme was developed	completed in March-May 2021 as a virtual workshop ended with a final examination.
<b>14. Develop an online research submission &amp; tracking system</b>	System completed	awaiting to launch
<b>15. National Health Research Repository</b>	Started to upload the research	In process

- **Paying Research Allowance**

Payment of research allowance for senior officers, as per the budget proposal in 2011 was commenced in 2011. Numbers of proposals approved for payments in 2020 & 2021(up to June) were as follows.

Paying Research Allowance - 2020				Paying Research Allowance – 2021 Up to June			
Date of the approved	New proposals	Progress Reports	Publications	Date of the approved	New proposals	Progress Reports	Publications
2020.01.25	20	4	3	2021/01/16	5	2	2
2020.02.15	5	2	1	2021/02/20	3	5	3
2020.04.18	14	2	1	2021/04/12	9	3	2
2020.05.23	5	3	4	2021/05/19	2	2	2
2020.06.23	4	2	3	2021/06/16	-	2	3
2020.07.18	6	10	3				
2020.08.15	6	8	5				
2020.09.19	13	8	1				
2020.10.17	5	10	0				
2020.11.21	4	7	4				
Total	82	56	25		19	14	12

- **Last 5 years Performance Trend**

No.	Indicator	Years					
		2016	2017	2018	2019	2020	2021 upto June
1.	Number enrolled in Basic Training	1,794	2,968	2,757	835	4,489	-
2.	Number of Trainees successfully completed	448	3,975	3,951	2,541	1,853	812
3.	Number of Trainees (degree holders) orientation Programme completed	264	356	351	341	340	187
4	Number of trainees of Post Basic Nursing Training completed	1,596	179	1,011	173	751	952

5.	Number of In- Service Training programmes conducted	203	468	Group Tr.596 Individual Training s.-386 Language Training s.115	Group Tr - 708 Indivi. Trainings - 358 Language Training e Tr.110	Gro. Tr.- 1017 Indivi.Tr - 143 Lang Tr.16	Gro. Tr.- 603 Indivi.Tr - 155 Lang Tr.4
6	Number of Research proposals received for research allowance payment	251	287	259	114	29	19

## 7 Corporation Board Managed Institutes

### 7.1 WIJAYA KUMARATUNGE MEMORIAL HOSPITAL

Wijaya Kumaratunga Memorial Hospital was established by an Act of the Parliament referred as "The Wijaya Kumaratunga Memorial Foundation Act No. 31 of 1998. The Hospital was officially opened by Her Excellency, the President Chandrika Bandaranaike Kumaratunga on the 09th of October 1999, The Hospital is managed by a Board of Directors and consists of Chairman and 5 Directors. At present, the Hospital consists of an Out Patient Department, Primary Care Unit, Dental Unit, Eye Unit, General Surgical Unit, Wound Care unit, Medical Unit and Family Medical Unit.

Utilization & Facility Details			
No of Wards	05 Wards		
No of Beds	131		
No of Specialist Available	2	Permanent (Consultant Physician, Consultant Surgeon)	
	1	Temporary Attachment (Consultant Family Physician)	
	4	Visiting basis (Prof./ Consultant Physician,) (Consultant Endocrinologist) (Consultant ENT) (Consultant Pediatrician)	

### Human Resource Details

	Category	By December 2020
1	Medical Director	01
2	Consultants -Permanent	02
3	Consultants -temporary basis	01
4	Consultants -visiting basis	02
5	Accountant	01
6	Internal Auditor	01
7	Medical Officer	22
8	Dental Surgeon	01

9	RMO	03
10	Administrative Officer	01
11	Special Grade Nursing Officer & Nursing Sister	02
12	Nursing Officers	70
13	MLT	04
14	Pharmacists	06
15	Radiographer	02
16	Para Medical Staff	06
17	Clerical & Allied Staff	11
18	Other Staff	08
19	Saukya Karya Sahayake	65

### Utilization Details

	Service Rendered	Total No of Patients
1	Eye Surgery-Major	3,519
2	Eye Surgery- Minor	205
3	General Surgery -Major	497
4	General Surgery - Minor	178
5	OPD	71,220
6	OPD2-Injection	1,102
7	OPD2-Dressing	8,703
8	PCU	15,134
9	Total In Patients-WARD Admissions	8,863
<b>CLINICS</b>		
1	Dental	4,757
2	Medical	34,012
3	Diabetics/ Hypertension	5,413
4	Surgical	2,933
5	Pediatric	182
6	Psychiatric	1,895
7	Family Medical Clinic	6,929
8	Well Women Clinic	15
9	Wound Care Unit	11,179
10	NCD Clinic	279
11	ENT Clinic	135

INVESTIGATIONS		
1	LAB	69,697
2	X-Ray	1,929
3	E.C.G	5,409
4	Endoscopy Unit	748
5	Refraction Test	5,602
6	OCT Test	897

### Achievements/Special Events in 2020 /2021

1. Innovations, New Establishments & Events
  - Triage system was introduced to justify the COVID 19 positive patients
  - Preventive measures were taken to protect the staff & patients during the COVID 19 Pandemic
2. Purchasing Medical Equipment
  - Fistuloscope - Video Assisted Anal Fistulectomy set & Operating Rectoscope System Rs 4.3Mn.
  - Ultrasound Scanner -Portable Rs. 3.48Mn.
  - Diathermy Unit Rs. 1.26Mn.
  - Installation of piped medical gas system - Rs. 1.14Mn.
3. Building Works
  - Repair of toilet blocks of Eye Ward & Surgical Ward Rs. 2.02Mn.
  - Laying floor tilling -Eye Clinic Rs. 2.2Mn.
  - Painting Eye Clinic Rs. 1.31Mn.
  - Partitioning work of Eye Clinic Rs. 1.28Mn
  - Repairing Ceiling of WD 1- Medical Ward (Male) Rs. 2.06Mn.
  - Painting Eye Building Rs. 1.19 M
4. Donations
  - 2 Normal Air Oxygen Concentration converting Machine (second hand)-4Mn.
5. Furniture & Fittings, IT Equipment
  - Total Rs.2.6Mn. Has spent for purchasing furniture & fittings and IT Equipment.

### Last 5-year performance trend

Section/Year	Total No. of Patients Treated				
	2016	2017	2018	2019	2020
OPD	131,953	117,080	103,420	102,883	71,220
ETU	20,901	23,054	21,718	23,008	15,134
Dental	8,057	7,556	8,756	6,693	4,75

### Medical Unit

	Total No. of Patients attended the clinic				
	2016	2017	2018	2019	2020
Medical Clinic	43,282	43,180	40,695	41,570	34,012
	Total No. of Patients attended the Ward				
	2016	2017	2018	2019	2020
WD-1 (Medical Ward-Male )	1,541	1,434	1,509	1,140	731
WD-2 ( Medical Ward-Female )	1,973	1,802	2,238	1,555	1,046

### Visiting Clinics

	Total No. of Patients attended the clinic				
	2016	2017	2018	2019	2020
Diabetic & Hypertension Clinic	2,346	3,046	3,548	3,897	5,413
Pediatric Clinic	1,295	1,145	904	532	182
Psychiatric Clinic	2,056	2,609	2,344	1,915	1,895
ENT					135

### Other Clinics

	Total No. of Patients attended the clinic				
	2016	2017	2018	2019	2020
NCD Clinic	79	566	484	523	279
Family Medicine Clinic			2,123	5,299	6,929
Well Women Clinic					15

### Eye Unit

	Total No. of Patients				
	2016	2017	2018	2019	2020
Eye Clinic	69,338	49,423	47,570	45,748	30,078
Eye Surgery	10,910	1,994	1,336	2,835	3,724
WD-3 Eye Ward (Male )	5,789	3,129	1,863		
WD-4 -Eye Ward (Female )	8,325			3,747	4,402
Laser Treatments	1,943	962	1,648	988	723
Refractive Investigations	15,193	7,484	8,622		5,602

### Surgical Unit

	Total No. of Patients				
	2016	2017	2018	2019	2020
Surgical Clinic	2,415	3,697	4,494	4,427	2,933
Endoscopy tests		657	950	1,085	748
General Surgeries	477	889	1,023	997	675
WD-6 (Male & Female Ward)	-	2,631	3,541	3,512	2,565
Wound Care Patients	24,221	19,926	15,556	16,745	11,179
WD-5-wound care ward (Male &FemaleWard)	292	408	358	279	119

### Supportive Services

	Total No. of Patients				
	2016	2017	2018	2019	2020
LAB Tests	59,178	90,605	111,620	101,066	69,697
XRAY Investigations	5,478	2,796	4,728	3,791	1,929
ECG Investigations	4,303	7,344	7,776	8,882	5,409

### Special Development activities planned for year 2021

Purchasing Medical Equipment to develop patient service in Eye, Surgical & Medical Units  
 Development of infrastructure facilities to provide facilities for patients



## 7.2 SRI JAYAWARDENAPURA GENERAL HOSPITAL



Sri Jayewardenepura General Hospital was inaugurated on 17th September, 1984 and completed 36 years of excellence by the year 2020, established and empowered by the act of parliament, Sri Jayewardenepura Hospital Act No: 54 of 1983. Hospital was set up to supplement curative health services in Sri Lanka & to assist in the training of medical undergraduates, post graduates and other health care personnel. Highly qualified, experienced and competent medical, nursing and technical staff is engaged in patient care and other hospital activities.

### **Vision**

The best tertiary health care provider in the South Asia

### **Mission**

“To maintain exceptional, safe, ethical and quality standards while offering cost effective healthcare solutions, with modern technology and to deliver undergraduate and postgraduate education in medical and allied health sciences”

### **Major Achievements / Special Events in 2020/2021**

#### **Services Infrastructure Developments**

- Initiation of a Primary care unit
- Expansion of laboratory services
- Introduction of new measures in combating the Covid-19 pandemic in the country
- Establishing PCR and Rapid Antigen testing
- Streamlining of emergency care

### Infrastructure Developments

- Enhancing the physical condition of sanitary facilities
- (Management has been able to formulate a stepwise plan to renovate and refurbish the buildings. This onerous task is in progress. Completion of this renovation will provide an edge to SJGH when competing with the modern private sector health facilities.)
- New training and development programs were introduced and conducted covering all categories of staff during the year 1019, 2020 & up to now
- Hospital information management system is being constituted.
- IT system of the hospital was further expanded to manage the stock control system, whereby drugs, dressings, surgical and other items could be managed by the system without paper works.

### Hospital Expansion Project

- Construction of new female nurses' quarters - completed
- Construction of Administration and Financial Building – final stages in progress
- Construction of work shop building. - in progress
- Construction of Nurses (Male) quarters. - final stages

### New Technology

- Purchase of new medical equipment for 2020 – 2021
- PCR and rapid antigen test equipment
- Infra-Structure Development – (existing facility)
- Refurbishing of the ultra sound scan unit
- Renovation of the mortuary
- Renovation of exiting sanitary facilities (in progress)
- In all wards & rooms completed renovation and refurbishment of male/female toilet complexes
- Colour Washing of the buildings
- Upgrading the electrical & cabling system (in progress)

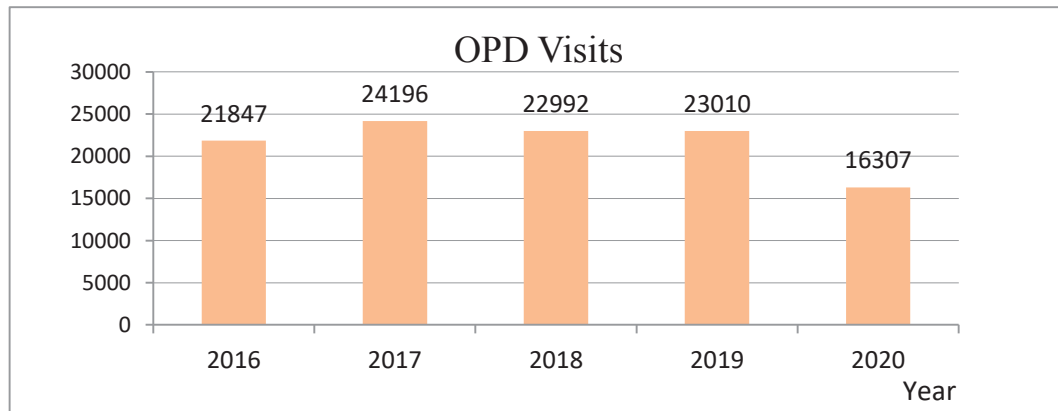
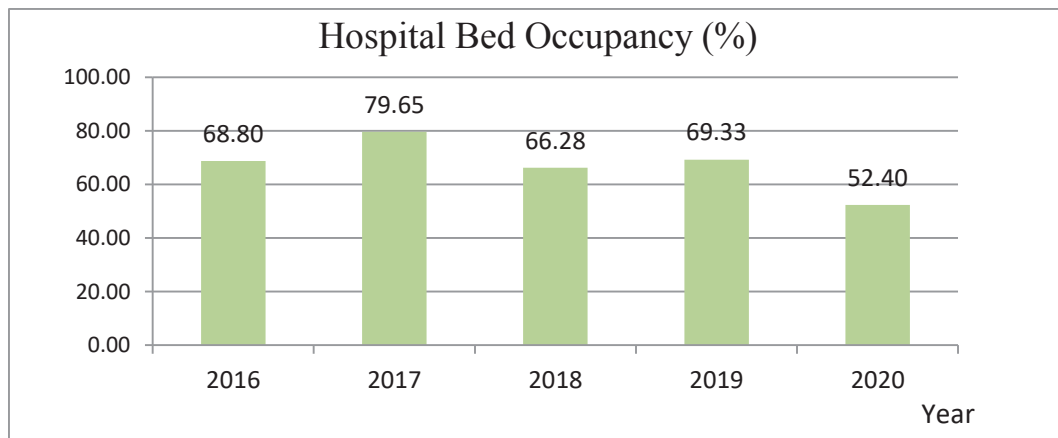
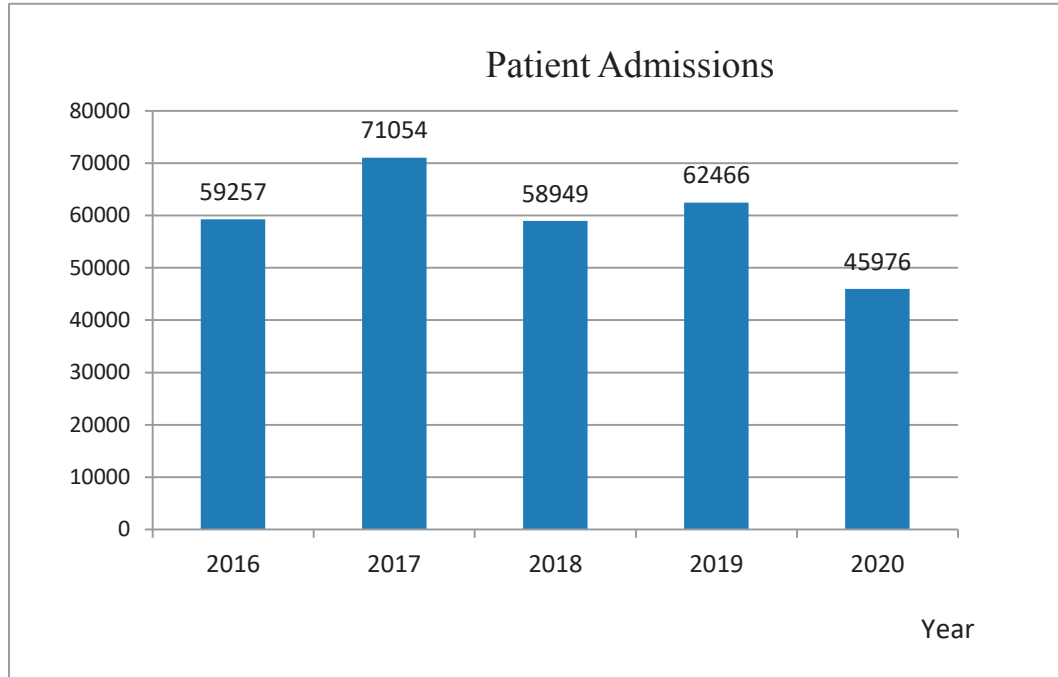
### Quality achievements

- Implemented 5S concept with the assistance of National Productivity Secretariat.
- Commendation by National Productivity Secretariat

**Utilization & facility details in 2020**

<b>1. Number of Patient Beds</b>	<b>1,065</b>
<b>2.Total Number of Patient Admissions</b>	62,466
<b>3.No of specialist available</b>	47
<b>4.Number of Admissions to ICUs</b>	1,366
<b>5.Number of Admissions through ETU</b>	32,870
<b>6.Maternity Admission</b>	4,566
<b>7. Average Length of Stay (Days)</b>	4.3
<b>8. Hospital Bed Occupancy (%)</b>	69.33
<b>a. Bed Occupancy of General Ward (%)</b>	69.81
<b>b. Bed Occupancy of Paying Ward (%)</b>	73.69
<b>9. Number of Out Patient Department Visits</b>	23,010
<b>10. Number/ of Emergency treatment Unit Visits</b>	46,973
<b>11. Number of Dressings</b>	11,068
<b>12.Number of Clinic held</b>	4,704
<b>13. Total Number of Patients attended for Clinics</b>	190,716
<b>14.Total Number of Blood collection</b>	5,552
<b>15.Total Number of deaths</b>	847
<b>16. Total Number of live discharges</b>	62,436

**Last 5-year performance**



## 8. Private Health Sector Development

---

### Introduction

Ministry of Health recognizes the value of safe, efficient and quality health service provision either through State or Private Healthcare Services, through monitoring and evaluation, regulating through guidelines and developing through capacity building and technical support.

### Vision

Safe, efficient and quality health services through Private Health Sector.

### Mission

To regulate the functioning of the Private Health Sector by streamlining registration of Private Medical Institutions, developing standards and guidelines, providing technical guidance and assistance in human resource development programmes, observation and inspection of institutions, handling complainants against institutions, reducing offences committed by institution and enforcing relevant penalties.

### Objectives

- To complete the process of amending the PMI Act
- To improve registration and regulation of private medical institutions
- III) To streamline the mechanism to collect Health Information from private health sector
- To strengthen the human resources capacity of the private health sector
- To educate all authorized officers at provincial levels on PMI Act and executing the power vested to them
- To create awareness among health professionals, general public and patients' rights groups on PMI Act, patients' rights and obligations of health professionals
- To request private health sector to limit the prices for laboratory tests and specific selected procedures.
- To upgrade the resources at Directorate of Private Health Sector Development (D/PHSD) and Secretariat of Private Health Services Regulatory Council (S/PHSRC) including human resources, infrastructure facilities ect.

### Achievements/ Special Events in 2020

- Coordination of the process of amending the existing Private Medical Institutions (Registration) Act with legal decision of the Ministry of Health and Legal Draftsman.
- Continuation of registration & renewal of private medical institutions' licensing

- Providing technical expertise in human resource development training programmes conducted by provinces and private health institutions
- Handling of complaints against Private Medical Institutions
- Inspection and observation visits to private medical institutions, especially to grant permission for kidney transplant surgeries
- Coordinating with other Directorates of Ministry of Health, Sri Lanka Medical Council, Health Sector Trade Unions and Professional Organizations if 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 transplants by private hospitals
- Processing of documents pertaining to temporary registration of foreign specialists

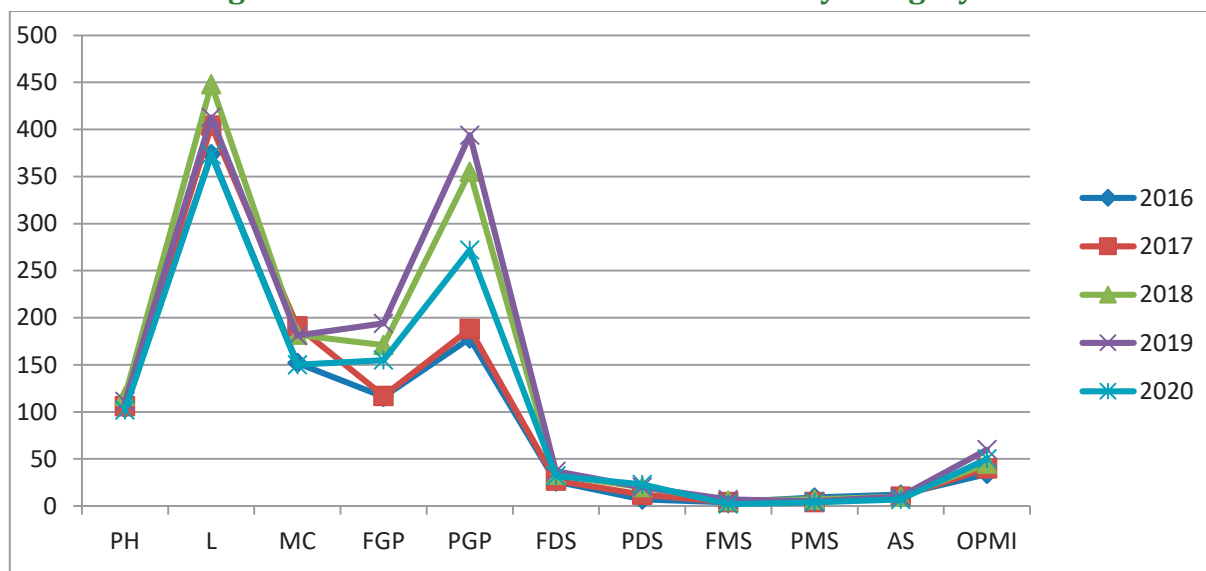
### Last 5-year Performance Trend

#### Numbers of Registered Institutes at PHSRC from year 2016 to 2020 (As at 19/07/2021)

Category	Abbreviation	Number of Registrations				
		2016	2017	2018	2019	2020
Private Hospitals and Nursing Homes & Maternity Homes	PH	104	106	117	111	102
Medical Laboratories	L	374	404	448	413	373
Medical Centers/ Screening Centers/ Day Care Medical Centers/ Channel Consultations	MC	152	191	182	181	150
Full Time General Practices/ Dispensaries/ Medical Clinics	FGP	116	117	171	194	155
Part Time General Practices/ Dispensaries/ Medical Clinics	PGP	178	188	355	394	272
Full Time Dental Surgeries	FDS	26	27	33	37	32
Part Time Dental Surgeries	PDS	7	12	20	20	23
Full Time Medical Specialist Practices	FMS	4	04	6	7	2
Part Time Medical Specialist Practices	PMS	9	04	7	5	4
Private Ambulance Services	AS	12	10	10	10	7

Other Private Medical Institutions	OPMI	34	40	45	60	50
Total Private Medical Institutions		<b>1,016</b>	<b>1,113</b>	<b>1,394</b>	<b>1,432</b>	<b>1,170</b>

### Status of the Registration of Private Medical Institutes by Category



### Special Development activities planned for 2021

- Initiation of a survey in respect of private health sector with the help of Public Health Inspectors in MOH areas.
- Conduct of an island wide survey on prices charged by Private Health Institutes for 51 identified medical and surgical procedures.

**State Ministry of  
Pharmaceutical Production,  
Supply and Regulation**



## 9. State Ministry of Drug Production, Supply and Regulation

---

### **Vision**

Creating a healthy nation through the production, supply and regulation of high quality drugs.

### **Mission**

Achieving a high level of health by regulating the quality of medicines and providing timely medicines to healthcare institutions by formulating policies and formulations to promote the production and supply of drugs.

### **Objectives**

The main responsibility of the State Ministry of Pharmaceuticals, Supply and Regulation is to manufacture, supply and regulate the quality and standardized drugs required by the health sector to produce a healthy population. It is the primary responsibility of this State Ministry to take steps to completely ban the importation of substandard drugs into Sri Lanka and to take necessary steps to manufacture in the country all drugs and related equipment that can be manufactured in the country in accordance with international standards. Accordingly, through the encouragement of local and foreign investors, all pharmaceuticals that can be manufactured in the country in accordance with international standards will be manufactured in Sri Lanka and a strategy has already been established to establish “Drug Production Zones” in Sri Lanka as a strategy to reduce the foreign exchange spent on importing drugs and provide high quality drugs to the people at concessionary prices. Work has begun. It is planned to produce 60% of the country's pharmaceutical demand locally by the year 2025.

In addition, the Ministry of State will take the necessary steps to ensure timely delivery of quality medicines to all hospitals through the Medical Supplies Division without delay.

The State Ministry of Pharmaceuticals, Supply and Regulation was established in accordance with the Extraordinary Gazette Notification No. 2187/27 of the Democratic Socialist Republic of Sri Lanka dated 09 August 2020.

### **Main Functions**

- Expansion of laboratory facilities subject to the recommendations of the World Health Organization to ensure the quality of medicines.
- Establish a regulatory framework for the implementation of prices to protect the consumer safety in the production, import and marketing of quality drugs, to prevent the monopoly of the pharmaceutical market and to promote the promotion of quality pharmacies.

- Develop a strategy to encourage local entrepreneurs and investment in pharmaceuticals.

## Performance of the Ministry

### COVID-19 Vaccination Program

The World Health Organization (WHO) has identified vaccination as the safest and most effective solution to the Covid epidemic. Accordingly, work was commenced to bring the required vaccines to Sri Lanka for vaccination and as a result, the vaccination program was able to commence from the beginning of 2021. The total number of vaccines received by the country as at 20.10.2021 is 33,304,560. The details are as follows.

#### Doses of vaccines received in the country (as at 20.10.2021)

	AstraZeneca	Sputnik V	Pfizer	Sinopharm	Moderna
Direct grants	500,000			3,000,000	
Purchases	500,000	330,000	1,848,600	2,300,000	
Under the program WHO (COVAX)	1,719,840		906,200		1,500,100

As at 20.10.2021, 14,789,068 persons had been given the first dose and 12,850,329 persons had received both doses.

### Establishment of Pharmaceutical Production Zones

Drug production to meet the local demand as a strategy to encourage local businessmen and investors to reduce the foreign exchange spent on importing all drugs manufactured locally in Sri Lanka in accordance with international standards and to provide high quality drugs at affordable prices to the people. Work has been commenced on the establishment of Drug Manufacturing Zones in Oyamaduwa, Millewa, Horana, Arubokka in the Hambantota District and Anuradhapura under the program to establish Dedicated Production Zones for.

The Board of Investment of Sri Lanka (BOI) will operate the proposed pharmaceutical manufacturing zone in the Arubokka area in the Hambantota District, which will primarily target foreign markets. The Pharmaceutical Manufacturing Zone to be established at Millewa, Horana will be operated by the Sri Lanka Pharmaceutical Corporation with the intention of increasing the production capacity of the Sri Lanka Pharmaceuticals Corporation.

The State Ministry of Pharmaceutical Production, Supply and Regulation initiated the establishment of a Pharmaceutical Production Zone in the Oyamaduwa area in the Anuradhapura District with an area of 80 acres provided by the Mahavilachchiya Divisional Secretariat. After obtaining the approval of the Department of National Planning on 26.11.2020, the call for aspirations (EOI) from local investors for this project

was made on 10.01.2021 through public newspaper advertisements. Under this, all the project proposals received by the 31 project proposals were referred to a specially appointed expert committee and recommendations were obtained from them. Accordingly, 20 local investors were finally selected for the project. In addition, three project proposals were received for ZONE Development activities and the committee appointed to evaluate those proposals selected Spectrum Pharma Tec Lanka. Cabinet approval was granted on 23.03.2021 for the implementation of this project. Also, after submitting the Environmental Assessment Report to the Central Environmental Authority, the necessary environmental approval for the implementation of the project was obtained on 15.07.2021.

Approval of the Attorney General's Department for the signing of the Development and Management Agreement between the Selected Zonal Development Investor and the State Ministry of Pharmaceutical Production, Supply and Regulation was received on 26.08.2021 and the Agreement was signed on 30.08.2021. Accordingly, the Regional Development Investor has already commenced preliminary development work in the Pharmaceutical Manufacturing Zone.

### **Performance of the Medical Supplies Division**

During the Covid-19 epidemic, a special unit was set up to expedite the storage and distribution of medical supplies to the island-wide COVID-19 treatment centers and other affiliates. Mainly 15 items were issued on request by the hospitals and in accordance with the normal distribution plan. These items were issued on time to Prison Hospital, Army Hospital, Air Force, Municipal Councils, Election Commission, Airport, Base Hospitals and Regional Hospitals.

Donations from the World Bank, the Asian Development Bank, the World Health Organization, China, etc. were stored and issued by this special unit. The unit is operational within 24 hours and is directly supervised by the Director of Medical Supplies and supervised by the Deputy Director General. This unit has a daily reporting system on receipt and issuance of goods.

- 1) The Computerized Medical Supply Management Information System (MSMIS) has been extended to provincial healthcare institutions (District General Hospitals, Base Hospitals and Regional Hospitals). 145 institutions are covered by this information system.
- 2) The Supply Review Meeting was held weekly under the chairmanship of the Director General of Health Services with the participation of the National Drug Regulatory Authority, the National Drug Corporation and the Ministry of Health.
- 3) The "Project to Strengthen Medical Storage Facilities in Hospitals and Indigenous Medical Supplies" has been initiated and Rs. 86.21 million has been allocated for 31 institutions. By the year 2020, the work of 11 of these institutions has been completed.

- 4) “Osu Diriya” was established with the objective of providing a 24/7 active telephone service to solve the medical problems of the general public and medical institutions.



- 5) The Procurement Unit (Pricing and Testing) was established with the objective of providing quality customer service to clients.

### Infrastructure Development

01. The air conditioning system in the main warehouse of the Medical Supplies Division is in the final stages of being updated.
02. Reconstruction work of the Wholesale Control Unit has been completed.
03. Renovation work of Digana Drug Store has been completed.
04. An action plan has been implemented to improve the infrastructure of the Medical Supplies Division and other sub warehouses.

### Introducing new drugs to the new country under the new medicine program

The State Pharmaceutical Corporation (SPMC) has recently introduced the following drugs to the market.

- Flucloxacillin Capsules BP 500g
- Hydroxychloroquine Sulfate Tablets usp- 200 mg)
- GABAPENTIN 300mg
- Clopidogrel USP 75 mg
- Nimodipine (Nimodipine - 300mg)



**Financial Performance of the Ministry (as at 30.09.2021)**

Type of expenditure	Provisions (Rs.)	Total Cost (Rs.)
Recurring expenses	660,000,000.00	518,073,262.68
Capital expenditure	500,000,000.00	98,258,035.98
<b>Covid 19 Emergency Response and Health System Preparation Project</b>	13,409,000,000.00	8,057,985,363.67
Medical Supplies-SPC	33,600,000,000.00	34,294,168,943.94
Medical Supplies- SPMC	9,600,000,000.00	4,450,000,000.00
Medical Supplies-MSD	16,800,000,000.00	15,330,176,619.71
Covid Vaccine Program (11)	35,000,000,000.00	26,007,678,018.00
Covid Vaccine Program (12)	17,000,000,000.00	3,600,000,000.00
<b>Total</b>	<b>126,569,000,000.00</b>	<b>92,356,340,243.98</b>

**State Ministry of Primary  
Healthcare, Epidemic and  
COVID Disease Control**

## 10. State Ministry of Primary Health Care, Epidemics and COVID Disease Control

---

### Vision

Ensure the rights of the marginalized communities and save the lives of all Sri Lankans.

### Mission

Identify the marginalized communities in Sri Lanka, persons with special needs and senior citizens, improving their living standards and providing facilities for save the lives of Sri Lankan citizens.

### Objectives

- a. Provide allocation for expand the ambulance service operated by 1990 Suwa Seriya Foundation to fulfill public needs.
- b. Formulation of policies for providing livelihood training opportunities for people with special needs and assist to upgrade their living standards.
- c. Formulation of policies on guidance for the children with special needs and secure of their future through coordination of relevant activities.
- d. Provision of advice and guidance on improving rehabilitation facilities for drug addicts.
- e. Formulation of policies for empowering and ensure the rights of senior citizens.
- f. Direct supervision and monitoring the activities of National Council for Elders, being the Secretary of this State Ministry appointed as ex-officio Chairman of National Council for Elders.

### Institutions under the supervision of the Ministry

1. 1990 Suwa Seriya Foundation
2. Department of Social Services
3. National Council for Elders and National Secretariat for Elders.

### Special Development Activities for the Year - 2021

- Provision of 112 ambulances for the 1990 Suwa Seriya Foundation.

## 10.1 1990 Suwa Sariya Foundation

### Introduction

The “1990 Suwa Seriya” free ambulance service, being the first of its kind in Sri Lanka, started its pioneering journey on the 28th July, 2016 with 88 fully equipped ambulances in the Southern and Western provinces along with a state-of-the-art Emergency command and control center based in Rajagiriya, Sri Lanka to provide an effective and quality pre-hospital emergency care service in the country. Currently the service is covering the entire country with 297 ambulances.

### Objectives

1990 Suwa Seriya’s focus, Mission, Vision and objective is set only for one matter that is “Save a Life”. Where any development or improvement will always be looking at how more lives could be saved.

### Achievements



The 2nd Batch of 1990 Suwa Seriya Staff completed their training in October 2020 to handle transport of patients with mental illnesses in collaboration with the National Institute of Mental Health.

In April 2020, 1990 Suwa Seriya Pre hospital Ambulance Service signed an MOU with the Sri Lanka College of Cardiology to obtain professional advice on Handling of Cardiac Patients who are being transported via the 1990 ambulance service.



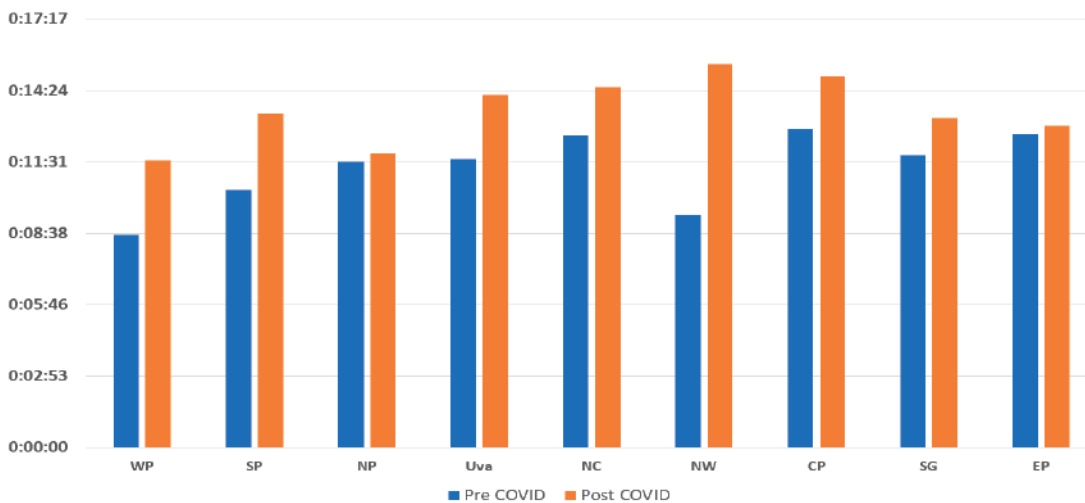


**Ongoing Projects table**

Project	Status
Public Education on Giveaway to Ambulances	<b>Ongoing</b>
Fall detection wearable (a wearable for elderly people to alert 1990 in a medical emergency)	<b>Ongoing</b>
Supporting 247 & 1904 on Patient transportation	<b>Ongoing</b>
Transport Cardiac Patients directly to CAT LABs	<b>Ongoing</b>
Training of staff to handle psychiatric patients and transportation	<b>Ongoing</b>
Onboarding 25 Toyota Ambulances to the fleet	<b>Fabrication stage</b>
Purchasing of 60 Ambulances	<b>Tender stage</b>

**Last 5 years' performance**

**Average response time Pre & Post COVID19**



**No of Incidents handled from 2016 to 2021**

Year	2016	2017	2018	2019	2020	2021
No of Incidents	7,376	49,980	84,521	240,170	335,630	349,815

## 10.2 Department of Social Services

---

### Introduction

With a view to safeguarding the social and economic well-being of the community of persons with disabilities, the Department of Social Services carries out a host of activities focused on them, which includes providing vocational training to the male and female youths with disabilities, directing them to employment and self-employment, empowering the community of the persons with disabilities through Community Based Rehabilitation programmes, rehabilitation of drug addicts, directing children with special needs for inclusive study through early intervention.

### Vision

“To be the forerunner of creating a secured Sri Lanka where the rights and equality of marginalized and disadvantaged community is fully safeguarded, by 2030”

### Mission

“To achieve the expected results by conducting research, formulating policies and implementing programmes in an efficient, expeditious and effective manner, adopting innovative approaches through inter-institutional co-ordination and professional intervention, for integrating the target community into society through protection of their rights and empowerment of them”

### Objectives

- Empowerment of the vocational activities and extra-vocational activities related to male and female youths with disabilities who are aged between 16 and 35 years.
- Providing residential care for mentally retarded children who do not have guardians.
- Early intervention to mitigate the disability in children aged between 0-18 years, who are suffering from various disabilities.
- Intervention for minimizing the various issues faced by the community of persons with disabilities in daily their life, and empowerment of them.
- Recognition and promotion of the Sign Language.
- Empowering the voluntary organizations that provide services to the persons with disabilities.

Carrying out residential rehabilitation, providing vocational training, rehabilitation and socialization of drug addicts

### Achievements/ Special Events in 2021

1. Opening of the renovated women's hostel and the Kitchen constructed under the Food Technology Division at the Amunukumbura Vocational Training Center, on 11.02.2021.
2. Opening of the new building at Puwakpitiya, constructed with the objective of providing care for 50 mentally retarded boys who have lost their parents and guardians, on 01.04.2021



3. Conducting of interviews as per the scientific methodology have been completed in April, 2021 for admission of trainees for vocational training for the year 2021. Admission could be carried out due to the risk of the spread of the prevailing Corona epidemic, and the admission and training courses are scheduled to be commenced in November.
4. Construction and modernization of Batticaloa Vocational Training Center, Kottawa Skills Development Center and Ambalantota Sithijaya Child Guidance Center, recruitment of staff, purchase of equipment and raw materials for training courses and selection of students have been completed. Arrangements are being made to start the institutions in November 2021.

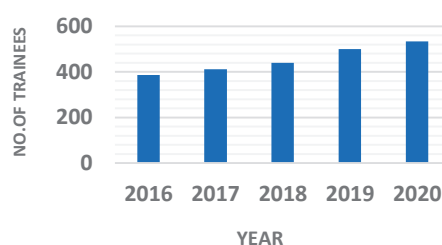
### Ongoing Development project details

Project Description	Total Estimatecost (Rs.Mn)	Physical progress by 31.08.2021	Financial progress by 31.08.2021 (Rs.Mn)
<b>Providing vocational training and socialization for rehabilitation of the disabled youth.</b>	30.00	Conducting of interviews as per the scientific methodology have been completed in April, 2021 for enrollment of trainees for vocational training for the year 2021. Providing allowances for 25 Skill Development Centers / Child Guidance Centers / Special Units.	6.02
<b>Rehabilitating of the Visually Handicapped Trust Fund</b>	9.00	Providing assistance to 4 visually impaired persons' organizations for the preparation of speech books. Providing Braille Writers for the Sri Lanka Federation of Visually Impaired Persons and instruction allowances for the visually impaired instructors.	4.50

		Providing scholarships for 345 the children of the visually impaired parents	
<b>Community Based Rehabilitation National Program (CBR)</b>	12.50	The National Level Winners have been selected covering the 25 districts of the island under the 'Swaabhimani' 2020' National Program for appreciation of Self Help Organizations for Persons with Disabilities. Under the direct assistance, air mattresses, water mattresses, access facilities, water and electricity facilities have been provided to 77 beneficiaries.	1.11
<b>Construction of the Vocational Training Center, Batticaloa</b>	25.00	The Batticaloa Vocational Training Center stood possible for opening by 2021.05.13.	5.09
<b>Construction of the Vocational Training Center, Kilinochchi</b>	28.00	Phase I Constructions (Women's / Men's Hostel and Training Division) have been completed.	2.40

### Last 5-year Performance Trend

This chart provides information related to admission of trainees to the vocational training institutes functioning under the Department of Social Services from 2016 to 2020.



### Special development activities planned for 2021

1. Commencing admission of students and conducting of courses at the Batticaloa Vocational Training Center.
2. Establishment of a Child Guidance Center by the name of "Sithijaya" at the Ambalantota Divisional Secretariat Division to provide services to the children with disabilities in early childhood in the Hambantota District.
3. Establishment of the Kottawa Skills Development Center to prepare the youth with disabilities for future vocational training.



## 10.3 National Council for Elders and National Secretariat for Elders



### Introduction

The Protection of the Rights of the Elders Act No. 09 of 2000 as amended by Act No. 5 of 2011 empowers the National Council for the Elder to protect the rights of Sri Lankan Senior Citizens and established the National Secretariat for Elders for its administrative functions.

### Vision

Achieving an active, energetic and productive elderly life through care for the people of Sri Lanka.

### Mission

Ensuring the freedom, care, self-sufficiency, participation and dignity of the elders, encouraging the participation of the elders in social development activities and protecting the rights of the elders through awareness programs.

### Objectives

- Protecting and promoting the rights of senior citizens.
- Identify issues faced by senior citizens and formulate and implement policies accordingly.
- Making social development by implementing programs using elders' knowledge, skills and experience.
- Making awareness for healthy ageing.
- Providing guidance and welfare for low income senior citizens.
- Updating information related to senior citizens.
- Establishment of Elderly Day Centers to provide senior citizens with the opportunity to spend a safe and productive day time.

### Achievements / Special Events in 2021

- Vaccination of 8,806 elders for COVID-19 in 349 elders' homes island-wide.
- Obtaining cabinet approval for the payment of Rs. 2,000 / - allowance for 238,640 waiting listed low income senior citizens above 70 years of age.

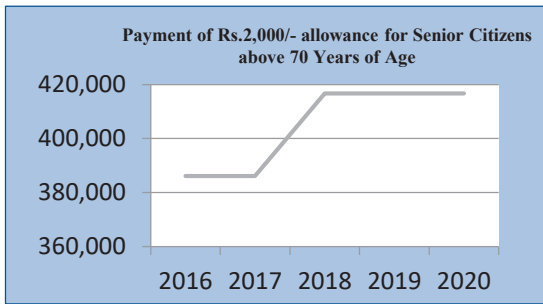




### Ongoing Development Project Details

Project Description	Total Estimated Cost (Rs. Mn.)	Physical Progress 2021).(08.31	Financial Progress )Rs.Mn( (2021.08.31)
Issuing of Elderly Identity Card	0.70	21,739 identity Card issued	0.08
Repair and Maintenance of Elderly Homes	1.34	Administrative and Maintenance cost of 02 elderly home	0.48
Financial Assistance program for Self Employments	18.75	55 beneficiaries have been granted	2.12
Conducting Maintenance Board	1.60	Held 04 meetings	0.32
Construction and Renovation of Elderly Homes	100.00	03 elderly home have been granted	4.01
Providing Hearing Aids	13.00	Cost incurred for paying 94 hearing aids in 2020	1.17
Provision of Equipments for Elders` Day Centers	20.00	Granted for purchasing equipments for 16 day centers	6.56
Strengthening of Rural Level Elders` committees	20.00	Financial grants have been made for 122 elderly committees	9.60
“Suwapahasu” Financial Assistance Program	120.00	Financial grants have been made for 365 beneficiaries	10.83
“Diriya Piyasa” Housing Project	15.00	Financial grants have been made for 10 beneficiaries	3.00
“Arogya” Medical Assistance Program	20.00	Financial grants have been made for 108 beneficiaries	2.78
Renovation and Maintenance of “Welcome Village” Elders` Home Pannala	8.00	Administrative and maintenance cost of the Elder home	4.50

### Last 5 Year Performance Trends



### Special Development Activities Planned for 2021

- Payment of Rs. 2,000 / - allowance for 238,640 waiting listed low income senior citizens above 70 years of age.
- Construction of new building complex at Kataragama Government Elders' Home maintained under the Nat



**State Ministry of Indigenous  
Medicine Promotion, Rural and  
Ayurvedic Hospitals  
Development &  
Community Health**



## 11. State Ministry Indigenous Medicine Promotion, Rural and Ayurvedic Hospitals Development & Community Health

---

### Vision

Good Health for all through Indigenous Medicine

### Mission

To contribute to achieve National Economic and Sustainable Development Goals by developing human resources of the entire community by utilizing research and modern technology in a manner that preserves Sri Lankan identity.

### Duties & Functions

To assist in formulation of policies related to Indigenous Medicine Promotion, Rural and Ayurvedic Hospital Development and Community Health in accordance with relevant laws and regulations to create a “healthy population” on the advice and guidance of the Minister of Health; Implementation of projects under the National Budget, Public Investment and National Development Program and implementation, follow up and evaluation of the subjects and functions of the Departments, Public Corporations and Statutory bodies under the Ministry and related policies, programs and projects (Gazette Extraordinary No. 2187/27 of 09<sup>th</sup> August 2020)

### Key Functions

1. Availability of a framework of regulations and a national policy enabling achievement of duties and functions in the Ministry.
  - i. To formulate policies for enhancement of the system of indigenous medicine
  - ii. To introduce amendments to existing laws to protect the system of indigenous medicine to cater to timely requirements.
  - iii. To impose regulations and introduce new regulations in terms of existing laws in order to protect the systems of indigenous medicine.
  - iv. To establish and formalize Councils/ Boards to be set up in terms of existing rules and regulations.
2. Endowing people with a quality service of indigenous medicine with essential facilities.
  - i. To introduce systems of administration required for improvement of productivity in health service utilizing state-of-the-art technology and to develop existing systems.
  - ii. To implement standard regulatory methodologies to provide a securer service of indigenous medicine.

- iii. To provide facilities to communities with difficulty to access treatment services.
  - iv. To provide a people centered medical service.
  - v. To develop physical resources in all institutions to cater to up-to-date requirements.
  - vi. To provide facilities for specific diseases and preventive measures.
3. Securely safekeeping systems of indigenous medicine for future generation.
- i. To keep updated the documents required for conservation of knowledge.
  - ii. To protect knowledge of traditional doctors.
  - iii. To protect and popularize cultural features associated with the system of indigenous medicine.
  - iv. To protect endangered herbal plants and saplings.
  - v. To implement a social security program for those who are involved in the practice of indigenous medicine.
4. Availability of educational, higher educational and awareness opportunities on systems of indigenous medicine.
- i. To improve understanding on the systems of indigenous medicine in school education.
  - ii. To improve understanding on the systems of indigenous medicine in higher education.
  - iii. To maintain an optimum and sustainable human resource to provide a quality service of indigenous medicine to people.
  - iv. To popularize knowledge in the system of indigenous medicine to build up a healthy nation.
5. Improvement of quality of the field through research in indigenous medicine.
- i. To provide more opportunities and encouragements for research in the field of indigenous medicine.
  - ii. To popularize new medicines, clinical systems and contemporary knowledge pursuing scientific research methodologies.
  - iii. To safe keep research findings.
6. Getting international attraction for systems of indigenous medicine
- i. To take systems of indigenous medicine to international communities by awareness raising and providing opportunities to share experiences.
  - ii. To implement a program under coordination and regulation of the Tourist Board by prioritizing local traditional and Ayurvedic systems of treatment to treat tourists.
  - iii. To increase access of products of indigenous medicine with international standard to foreign market.

- iv. To obtain assistance of international organizations for quality and sustenance of the field.
7. Availability of quantitatively and qualitatively manufactured medicine required for indigenous medicine.
    - i. Island wide sustainable implementation of "Suwa Dharani" Sinhalese medicine development and protection project.
    - ii. To facilitate common availability of indigenous medicine in the country.
    - iii. To create quality products of indigenous medicine in the country to cater to specific requirements.
    - iv. To make Sri Lanka Ayurvedic Drugs Corporation the leading institution in the field of local indigenous medicine.
  8. Keeping spread of communicable and non-communicable diseases at minimum level.
    - i. To promote community awareness on spread of communicable and non-communicable diseases using concepts of indigenous medicine.
    - ii. To establish in society, the vision of life based on indigenous medicine.
  9. Dissemination of non-toxic food consumption among all age groups.
    - i. To promote awareness in indigenous medicine enrichment concepts in society.
    - ii. To popularize non-toxic food consumption.
  10. Receiving sufficient contribution for achievement of sustainable development goals.
    - i. To minimize outflow of foreign exchange.
    - ii. To implement foreign exchange earning programs.
    - iii. To contribute to improve means of income generation of people.
    - iv. To contribute to improve institutional means of income generation.

### Financial Progress of the Ministry as at 31.08.2021

#### Ministry Office

Category/Object/Item	Provisions (Rs.)	Expenditure (Rs.)	Percentage of Expenditure (%)
<b>General Administration / Other Programs</b>	284,300,000.00	154,506,616.43	54.35
<b><u>Establishment Services</u></b>			
<b>Public Institutions</b>	26,200,000.00		
<b>Homeopathy Medical Council</b>		15,470,915.10	59.05
<b>Homeopathy Hospital</b>	21,000,000.00	4,989,762.60	71.38

<b>Recurrent</b>	<b>331,500,000.00</b>	<b>184,967,294.13</b>	<b>55.80</b>
<b>General Administration</b>	7,500,000.00	1,103,764.85	14.72
<b>Special Programs</b>			
• Ayurvedic Drugs Corporation	23,500,000.00	60,299.00	1.21
• Conservation Councils	5,000,000.00	-	-
• Homeopathy Council	2,000,000.00	-	-
• Homeopathy System Development	5,000,000.00	-	-
• Establishment of Nutrition Homes	5,000,000.00	29,560.00	0.59
• Repairing Inter-Treatment Centers for Covid - 19 Patients	91,011,000.00	50,000,000.00	54.94
<b>Capital</b>	<b>139,011,000.00</b>	<b>51,193,623.85</b>	<b>36.83</b>
<b>Total</b>	<b>470,511,000.00</b>	<b>236,160,917.98</b>	<b>50.19</b>

### Office of the State Minister

	Provisions (Rs.)	Expenditure (Rs.)	Percentage of Expenditure (%)
<b>Recurrent</b>	32,500,000.00	15,860,789.95	48.80
<b>Capital</b>	5,000,000.00	1,331,729.99	26.63
<b>Total</b>	<b>37,500,000.00</b>	<b>17,192,519.94</b>	<b>45.85</b>

### 01. Department of Ayurveda

#### Functions

- I. Establishment and maintenance of hospitals and other institutions for research and teaching purposes.
- II. Conducting seminars, training classes and courses of study.
- III. Conducting clinical, medical service, medicine and literary research.
- IV. Cultivation, conservation and propagation of herbal plants.
- V. Supervision and administration of all registered Ayurvedic Doctors in the island.
- VI. Formulating and regulation of rules and regulations for Ayurvedic drugs, hospitals, dispensaries, medicine manufactories, stores of medicine, trade centers and private education in Ayurveda.

**Department of Ayurveda – Financial Progress as at 31.08.2021**

Category/item/object	As at 31.08.2021		
	2021 provision (Rs.)	Expenditure (Rs.)	Percentage %
<b>1. General Administration</b>	120,000,000	72,747,832	60.62
<b>2. Hospital Services</b>	1,282,000,000	782,640,888	61.04
<b>3. Research</b>	271,500,000	143,438,070	52.83
<b>4. Education and Training</b>	29,600,000	18,395,829	62.15
<b>5. Conservation and dissemination of herbal cultivation</b>	76,900,000	43,065,037	56.00
<b>Recurrent expenditure</b>	<b>1,780,000,000</b>	<b>1,060,287,656</b>	<b>59.56</b>
<b>1. General Administration</b>	12,000,000	3,329,371	27.74
<b>2. Hospital Services</b>	372,000,000	205,898,130	55.34
<b>3. Research</b>	32,000,000	10,219,652	31.93
<b>4. Education and Training</b>	7,000,000	1,464,727	20.92
<b>5. Conservation and dissemination of herbal cultivation</b>	29,000,000	4,422,041	15.24
<b>Capital expenditure</b>	<b>452,000,000</b>	<b>225,333,921</b>	<b>49.85</b>
<b>1. General Administration</b>	132,000,000	76,077,203	57.63
<b>2. Hospital Services</b>	1,654,000,000	988,539,018	59.76
<b>3. Research</b>	303,500,000	153,657,722	50.62
<b>4. Education and Training</b>	36,600,000	19,860,556	54.26
<b>5. Conservation and dissemination of herbal cultivation</b>	105,900,000	47,487,078	44.84
<b>Total expenditure</b>	<b>2,232,000,000</b>	<b>1,285,621,577</b>	<b>109.41</b>

**02. Homeopathy Medical Council****Projects implemented during year 2021**

Development of Homeopathy College building as an office building by spending Rs. 2.00 million has been completed and action pertaining to purchasing equipment and air conditioning are in progress.

A new Homeopathy clinic has been opened on 13.07.2021 at Ratgama town, Galle.

**03. Homeopathy Hospital****Construction and infrastructure development activities**

Capital provisions of Rs. 05 million are allocated for year 2021 out of which amount Rs. 3.7 million are being utilized for renovation of Outer Patients' Department, hospital gate and access way and construction of water tanks etc. Providing 12 wooden almirahs to

store medicines in Homeopathic medical clinics and designing name boards in 03 clinics are in progress.

### Outer Patients' Department of Homeopathy Hospital

Although there are Divisions such as Laboratory Services functioning under In Patients' Department, Resident Patients' Division remains temporarily out of service since In Patients' Department is used as a Covid 19 Treatment Center.

31,446 patients during year 2020 and 8,990 patients up to July in 2021 have been treated by Homeopathy hospital.

## 04. Ayurvedic Drugs Corporation of Sri Lanka

### Production of Ayurvedic Medicine - 2021

#### Planned production and actual production – year 2021

(Rs.M.)

Production	Planned production	617.403
	Actual production (as at 30.09.2021)	353.461
sales	Targeted sale	559.005
	Actual sale (as at 30.09.2021)	418.385

### Sale of products

In sale of products, sale to the public sector (Ayurvedic hospitals, and free Ayurvedic dispensaries) account for a higher percentage of sales. A number of steps have been taken to diversify sales by identifying local and foreign market opportunities for Ayurvedic medicines. Sales are in progress through 17 sales outlets and Sales Representatives of this Corporation.

### Increasing production capacity

Taking action to increase capacity by installation of a Shampoo Mixing Machine (600 Liters Stainless Steel Cosmetic Mixing Machine) worth 2,646,000 for the new manufactory.





**Management Development & Planning Unit  
Ministry of Health**

**DREAM for  
COVID-19  
Prevention**



**Let's Be Responsible**

