Annual Progress Report

Project Number: SRI 51107 -002
ADB Loan and Grant Numbers – SRI - 3727 and SRI – 0618
APDRF Grant Number – 0702 SRI

Year –2020

Sri Lanka: Health System Enhancement Project (HSEP)

Prepared by HSEP (Health System Enhancement Project) Project Management Unit for the Ministry of Health Colombo, Sri Lanka.

GOVERNMENT OF SRI LANKA

MINISTRY OF HEALTH

ANNUAL PROGRESS REPORT

Year - 2020

20th January 2021

HEALTH SYSTEM ENHANCEMENT PROJECT

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Project Management Unit
3/19, Kynsey Road, Colombo 8, Sri Lanka

ABBREVIATIONS

ADB	Asian Development Bank
AGD	Auditor General's Department
APFS	Audited project financial statements
BCCM	Behavior change communication and community mobilization
CBSL	Central Bank of Sri Lanka
DMF	Design and monitoring framework
DDG-ET &R	Deputy Director General Education, Training and Research'
DDGMS	Deputy Director General Medical Services
EMP	Environment management plan
ERD	Department of External Resources
ESP	Essential service package
FHB	Family Health Bureau
FHC	Field health center
GAP	Gender action plan
GBV	Gender-based violence
GOSL	Government of Sri Lanka
HCWM	Healthcare waste management
HIT	Health information technology
HPB	Health Promotion Bureau
HRH	Human resources for health
HSEP	Health System Enhancement Project
IHR	International Health Regulations
MIS	Management information system
MOH	Medical officer of health
MOHNIM	Ministry of Health, Nutrition and Indigenous Medicine
MoH	Ministry of Health
MOMCH	Medical officer maternal and child health
MONCD	Medical officer Non-Communicable Disease
NCD	Non communicable disease
OCB	Open competitive bidding
PCC	Project coordination committee
PCR	Project completion report
PPC	Project Procurement Committee
PDHS	Provincial director health services
PFM	Public financial management
PHC	Primary health care
PHI	Public health inspector
PHM	Public health midwife
PHN	Patient healthcare number
PIU	Project implementation unit
PMCU	Primary medical care unit
PMU	Project management unit
POE	Point of entry
PPER	Project performance evaluation report
PPTA	Project preparatory technical assistance
PSC	Project steering committee
RDHS	Regional director of health services

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1. Introduction

1. The Health System Enhancement Project (HSEP) the first ADB-financed health operation in Sri Lanka after a gap of 20 years. This project is $60 million (comprising $37.5 million in concessionary loan and $12.5 million grant, and $10 million equivalent from the Government of Sri Lanka in counterpart funds). It is delivered through a project investment modality and is effective from February 2019 and will be completed in November 2023.
2. The project improves efficiency, equity, and responsiveness of the primary healthcare (PHC) system based on the concept of providing universal access and continuum of care to quality essential health services.
3. The project pursues an equity perspective in planning and delivering of essential primary health services. It expects to further inform and operationalize government PHC reform initiatives to reduce bypassing of PHC facilities by providing more comprehensive services, including for NCDs, develop a referral system, and functionally integrating preventive and curative services. Furthermore, the project is targeting underserved communities' access to PHC, and address selected gaps in core public health surveillance in line with the international health regulations (IHR).
4. The project is targeting all nine districts in four provinces of Central, North Central, Sabaragamuwa, and Uva with a special focus on the geographically, socially, and economically deprived populations. The beneficiary population of the project is approximately 7 million which is 33% of the Sri Lanka population of 21 million.
5. The expected project impact is to contribute to the Government development objective of ensuring a healthier nation with a more comprehensive PHC system. The project outcome is to improve efficiency, equity, and responsiveness of the PHC system.

1.1. Basic Project Data

ADB loan and Grant No	SRI 3727, Grant – SRI 0618
Project Title	Health System Enhancement Project
Recipient	Government of Sri Lanka
Executing Agency	Ministry of Health
Implementing agency (ies)	Central, North Central, Sabaragamuwa and Uva Provincial Health Departments
Date of Project Approval	23rd October 2018
Date of Loan agreements Signing	26th of October 2018
Date of Project Effectiveness	5th February 2019
Project Completion Date	30th November 2023
Elapsed Project period	1 Year and 10 Month

1.2. Basic Project data – Asia Pacific Disaster Response Fund

Project Name: APDRF – Covid 19 Emergency Response Project	
Project Number: 0702-SRI	
Country: Sri Lanka	Executing Agency: Ministry of Health
Project Financing Amount: US$ 3Mn	Project Closing Date: 08.03.2021
Total Fund Allocation	566 Mn LKR

1.3. Scope of the Project

Project is expected to contribute to the Government of Sri Lanka for the development objectives of ensuring a healthier nation with a more comprehensive PHC system. The project outcomes is to improve efficiency, equity, and responsiveness of the PHC system.

The project outcomes are assessed by observing a (i) 20% increase in outpatient utilization of PHC; (ii) 20% increase in patient satisfaction, knowledge and attitudes on utilization; (iii) 90% notified notifiable diseases investigate within the stipulated time in the Medical Officer of Health areas in the target Provinces; and (iv) Cluster system reform implemented and evaluated in all nine clusters.

The project outputs are (i) PHC enhanced in Central, North Central, Sabaragamuwa, and Uva Provinces (ii) Health information system and disease surveillance capacity strengthened; and (iii) Policy development, capacity building, and project management supported.

Scope of the APDRF project is to provide resources to arrest spread of Covid 19 infections in the country by providing facilities to enhance diagnosis capacity of the country and assist the government providing necessary logistics. This grant does not limit only to the project implementation provinces, covers the whole country.

1.4. Estimated Project Cost and Financing Plan

Table 1.4.1: Project Cost Estimate ($ Mn)

Cost Item	Grant	Loan	Counterpart	Total
1. Civil works	0	21.67	3.26	24.93
2. Equipment and Furniture	1.55	4.89	2.69	9.13
3. Vehicles	0	4.02	0.61	4.63
4. Training	2	0	0	2
5. Consulting	0	3.43	0.61	4.04
6. Project Management	3.84	0	0.02	3.86
7. PHC Innovation Fund	2	0	0	2
8. Incremental Cost	1.99	0	0	1.99
9. Physical Contingencies	0.43	0.61	0.3	1.34
10.Price contingencies	0.69	0.89	2.51	4.09
11.Intrest payment	0	1.99	0	1.99
Total	**12.5**	**37.5**	**10**	**60**

Table 1.4.2: Project Cost Estimate after Covid 19 reallocation ($ Mn)

Cost Item	Grant	Loan	Counterpart	Total
1. Civil works	5	13.17	3.26	21.43
2. Equipment and Furniture	1.55	14.89	2.69	19.13
3. Vehicles	0	4.02	0.61	4.63
4. Training	1.5	0	0	1.5
5. Consulting	0	3.43	0.61	4.04
6. Project Management	1.96	0	0.02	1.98
7. PHC Innovation Fund	1.5	0	0	1.5
8. Incremental Cost	0.99	0	-	0.99
9. Physical Contingencies	0	0	0.3	0.3
10. Price contingencies	0	0	2.52	2.52
11. Interest payment	0	1.99	0	1.99
Total	**12.5**	**37.5**	**10**	**60**

Table 1.4.3: Financing Plan ($ Mn)

Funding Source	Funding	Amount	Activities
ADB	Loan	37.5	Civil works Medical Equipment Vehicles Consultancy
	Grant	12.5	Computer and equipment Training Project management PHC Innovation fund Incremental cost
GOSL	CPF	10.0	Furniture for PMU/PIU and Health Institutions, Taxes and duties
Total		60.0	

Table 1.4.4: Financing Plan ($ million) – Reallocation for Covid 19 response

Funding Source	Funding	Amount	Activities
ADB	Loan	10	Medical Equipment and reagents
	Grant	5	Civil Works and Medical equipment
Total		15	

Table 1.4.5 Financial Plans for Special Funds

Funding Source	Funding	Amount $ Mn	Activities
Asia Pacific Disaster Response Fund	Grant	3	Medical equipment, reagents and consumables
RTA Covid 19 regional grant	Grant	0.9	Personal Protective Equipment and medical equipment
		0.1	Medical Equipment
Total		4	

2. Project Progress

2.1 Procurement Progress

Table 2.1.1: Basic Data

Project Information	Procurement Activities
Approval Date of Original Procurement Plan	23 October 2018
Approval of most recent Procurement Plan	1st December 2020
Publication for Local Advertisements	Publications for local advertisements are being done according to the procurement procedure in National Newspapers and in HSEP website.
Period covered by this Plan	18 Months

Table 2.1.2 Contract awarded – Civil Works

Package No.	Lot Name	Estimated Value ($ Mn)	Contract Value ($ Mn)	Date of Award
W – 06 Polonnaruwa	B - Sevanapitiya	0.092	0.10	28th January 2020
W -09 Ratnapura	A - Delwala,	0.099	0.11	6th February 2020
	C - Narissa,	0.123	0.18	6th March 2020
	E - Ranwela	0.088	0.12	6th February 2020
W-21.1	Improvements to buildings - Distance Learning Centers(NIHS Kaluthara)	0.51	0.028	27th August 2020
Total			0.538	

Table 2.1.3 Contract awarded Civil Works – Covid 19 reallocation

Package No.	General Description	Contract Value ($)	Procurement Method	Date Awarded
W 28.1	Construction of office complex for PCR lab at CEBH	32,600.00	RFQ	7th October 2020
W 29	Refurbishment of ICU GH Kalutara	19,799.00	RFQ	11th November 2020
W 29.3	Refurbishment of COVID-19 ward at TH Kurunegala	96,894.44	RFQ	11th December 2020
W 27.1	Construction of Gas and Oxygen storage room at BH Madirigiriya	8,140.00	RFQ	14th July 2020
W 27.2	Construction of Gas and Oxygen storage room at BH Thambuththegama	62,118.93	RFQ	22nd June 2020
W 29.2	Refurbishment of CSSD at DMH	62,118.93	RFQ	3rd September 2020
	Total	281,671.30		

Table 2.1.4: Contracts to be awarded - Civil work round one

Package No.	Lot Name	Estimated Value ($ Mn)	Procurement Method	Expected Date of Awarding	Comments
W -04 Matale	A - Kalundawa,	0.132	OCB	1st February 2021	Bid evaluation completed. Awaiting PPC approval
	B - Madawalaulpotha,	0.126			
	C - Paldeniya,	0.101			
	D - Kimbissa,	0.072			
	E - Galewela	0.092			
	Total	**0.523**			

Table 2.1.5 Contracts to be awarded - Civil work round two

Package No.	Lot Name	Estimated Value ($)	Procurement Method	Expected Date of Awarding	Comments
W-10	Round 2 (10 PMCU/DH) Monaragala District	1,230,000.00	OCB	1st February 2021	5 Bids are under evaluation

W-11	Round 2 (10 PMCU/DH) Badulla District	1,280,000.00	OCB	1st February 2021	5 Bids are under evaluation
W-12	Round 2 (10 PMCU/DH) Kandy District	1,250,000.00	OCB	1st of April 2021	5 bids have been advertised
W-13	Round 2 (10 PMCU/DH) Matale District	1,230,000.00	OCB	1st of April 2021	5 bids have been advertised
W-14	Round 2 (11 PMCU/DH) Nuwara Eliya District	1,230,000.00	OCB	1st of April 2021	4 bids have been advertised
W-15	Round 2 (11 PMCU/DH) Polonnaruwa District	1,230,000.00	OCB	1st May 2021	Bidding document has been finalized for 4 facilities
W-16	Round 2 (10 PMCU/DH) Anuradhapura District	1,220,000.00	OCB	1st May 2021	Bidding document has been finalized for 5 facilities
W-17	Round 2 (10 PMCU/DH) Kegalle District	1,270,000.00	OCB	1st May 2021	Advertisement has been done for 3 facilities
W-18	Round 2 (12 PMCU/DH) Rathnapura District	1,290,000.00	OCB	1st May 2021	Advertisement has been done for 5 facilities
	Total	**11,230,000.00**			

Table 2.1.6 Contracts to be awarded Civil Works– Covid 19 reallocation

Package No.	Lot Name	Estimated Value ($ Mn)	Procurement Method	Expected Date of Awarding	Comments
W 29.1	Laboratory complex at NIID with Lab furniture	1.24	OCB	1st February 2021	Bids are under evaluation
W 29.4	Molecular Biology Lab with furniture TH Karapitiya	0.270	RFQ	15th January 2021	Advertised
W 30.1	Refurbishment of isolation rooms at point of entries -Colombo	0.125	RFQ	15th January 2021	Bids are under evaluation
W 30.2	Refurbishment of isolation rooms at point of entries - Galle	0.046	RFQ	15th January 2021	Bids are under evaluation
W 30.3	Refurbishment of isolation rooms at point of entries - Hambantota	0.023	RFQ	15th January 2021	Bids are under evaluation
W 30.4	Refurbishment of isolation rooms at point of entries - Trincomalee	0.099	RFQ	15th January 2021	Bids are under evaluation
W 30.5	Refurbishment of isolation rooms at point	0.044	RFQ	15th January 2021	Bids are under evaluation

	of entries - Quarantine Suboffice MRI				
W 30.6	Refurbishment of isolation rooms at NIIDH (Requested by quarantine unit)	0.410	OCB	15th January 2021	Bids are under evaluation
W 31	Establishment of Iodine Therapy Unit at TH Rathnapura	0.107	RFQ	1st February 2021	Preparation of bidding document is in progress
W 32	Establishment of Iodine Therapy Unit at TH Anuradhapura	0.203	RFQ	1st February 2021	Preparation of bidding document is in progress
W 33	Refurbishment of ICU at BH Kahawatta	0.065	RFQ	1st February 2021	Preparation of bidding document is in progress
W 34	Refurbishment of ICU at BH Karawanella	0.016	RFQ	1st February 2021	Preparation of bidding document is in progress
W 35	Refurbishment of Covid 19 ward at TH Batticaloa	0.060	RFQ	1st February 2021	Preparation of bidding
W 36	Refurbishment Cold room at MRI	0.065	RFQ	1st February 2021	Preparation of bidding
W 37	Expansion of Virology Lab at NH Kandy	0.055	RFQ	1st February 2021	Preparation of bidding
	Total	**2.828**			

Table 2.1.7: Procurement of Goods- Contracts Awarded

Package No.	General Description	Contract Value ($)	Procurement Method	Date Awarded
G -07	Procurement of Medical Equipment - NCD	22,731.42	OCB	8th January 2020
G- 2.3	Procurement of Office Equipment – Laptops	2,405.71	RFQ	5th March 2020
G -8.3	Procurement of ETU equipment - Portable Ventilators	41,315.78	RFQ	3rd April 2020
G- 8.4	Procurement of ETU equipment – Suction Apparatus Procurement of Office Equipment – Laptops	44,447.36	RFQ	6th April2020
G 4.1	Procurement of Laboratory, Physiotherapy and X-ray Equipment for Apex Hospital – Biochemistry Analyses	8,368.42	RFQ	6th April 2020
G 4.3	Procurement of Laboratory, Physiotherapy and X-ray Equipment for Apex Hospital - Hot Air Oven	23,004.60	RFQ	6th April 2020
G 4.4	Procurement of Laboratory, Physiotherapy and X-ray Equipment for Apex Hospital – Autoclaves	33,157.89	RFQ	6th April 2020

G 4.6	Procurement of Laboratory, Physiotherapy and X-ray Equipment for Apex Hospital – Centrifuges 16 Buckets	93,473.68	RFQ	8th April 2020
G -02.3	Procurement of Office Equipment for PMU Laptops Teleconference system for PMU and PIUs	1,540.54	RFQ	8th July 2020
G 5.1	Procurement of Medical Equipment for Reproductive Health and Nutrition – Length board & Beam infant scale	33,651.89	RFQ	26th August 2020
G 5.2	Procurement of Medical Equipment for Reproductive Health and Nutrition - Height Rod (wall mounted height measuring tape), Standard weight set & Spring balance	18,871.89	RFQ	26th August 2020
G 5.3	Procurement of Medical Equipment for Reproductive Health and Nutrition - Forceps jar, Cheatle forceps 27 cm, Rectangular tray with lid - 35x25x6 cm, Cusco's bivalve specula - medium -90x35 cm, Sponge holders 24 cm & Vulsellum forceps 25 cm curved	42,019.31	RFQ	26th August 2020
G 5.4	Procurement of Medical Equipment for Reproductive Health and Nutrition - Uterine sounds 32 cm, Scissors - 14.5 cm blunt/sharp curved, Long artery forceps - for IUD removal - 20 cm, Kidney trays - large - 825 ml, Lotion bowl - 600 ml, Dressing jars, Stainless steel bowl 180 ml, Examination Lamp (spot), Pail Plastic - 15 litre, Adjustable revolving stool & coplin jar	40,108.04	RFQ	26th August 2020
G 8.1	ECG Recorders (also for Apex) -167	57,095.94	RFQ	31st July 2020
G 8.2	Sphygmomanometer (also for Apex), Peak flow Meter & Spot lamp	58,037.83	RFQ	11th September 2020
G -14	Procurement of Computers for Quarantine Unit	15,869.83	RFQ	31st July 2020
G 14. 1	Personal Protective Equipment with boots for Quarantine Unit	1,816.21	RFQ	31st July 2020
G 14.2	Personal Protective Equipment without boots for Quarantine Unit (North Central Provincial, MSD)	14,053.62	RFQ	31st July 2020
G-01	Lot 1 - Procurement of Vehicles – 38 Double Cabs	1,908,216.22	OCB	5th December 2020
	Lot 2 - Procurement of Vehicles – 9 Vans	471,405.40	OCB	9th December 2020

G -02.3	Procurement of Office Equipment for PMU DSLR Camera	5,893.62	RFQ	23rd December 2020
G 4.2	Coagulation, Hematology Analyzers (3 parts) with reagents, Hematology Analyzers (5 part)	50,702.70	RFQ	18th November 2020
G 20	Procurement of furniture for DLC	5,262.70	RFQ	11th December 2020
G 16	IT connectivity for DHs, PMCUs and epidemiology unit including monthly payment for 5 years	7,419.83	RFQ	14th December 2020
G 24	Procurement of cloud mail server for PMU	660.00	RFQ	2nd October 2020
	Total	**3,001,530.43**		

2.1.8 Procurement of goods – Awarded contract in Covid 19 reallocation

Procurement of Goods related to Covid 19 reallocation				
No	**General Description**	**Contract Value ($)**	**Procurement Method**	**Date Awarded**
G- 14.1	Procurement of Medical Equipment for Quarantine Unit- Personal protective Equipment for COVID 19	2,837.69	RFQ	10th March 2020
G-4.1	Procurement of Microscope Binoculars for Medical Research unit. To strengthen the National Reference Lab (COVID 19)	1,822.80	RFQ	12th March 2020
G -7.1	Procurement of Medical Equipment – NCD -Enhancement of Nebulizer order	3,634.28		18th March 2020
G 14.2	Procurement of Equipment for Quarantine Unit – Personal Protective Equipment	30,647.14	RFQ	18th March 2020
G 25.4	Procurement of Medical Equipment of Video laryngoscope GH Kalutara/CSTH	8,756.75	RFQ	26th August 2020
G 26.11	Medical Gas Pipe Line Extension at Thambuttegame Based Hospital	5,291.13	RFQ	29th July 2020
G 27.2	ECG Recorders -2, Multipara Monitors – 4 and Pulse Oximeter- 3	6,905.40	RFQ	19th September 2020
G 27.4.6	Purchase of Infrared Thermometer 50 Nos - Sabaragamuwa	5,270.27	RFQ	17th June 2020
G 27.4.7	Purchase of N 95 Mask 220 Nos - Sbaragamuwa	1,486.48	RFQ	17th June 2020
G 27.4.1	Purchase of Surgical Face Mask 4930 Nos - Sbaragamuwa	1,732.16	RFQ	17th June 2020
G 27.4.2	Purchase of Coverall Gown 500 Nos - Sabaragamuwa	1,432.43	RFQ	15th June 2020

	Portable PA system for Sabaragamuwa	9,107.02	RFQ	10th August 2020
G 28.2	Domestic refrigerator for PCR Lab at CEBH	459.72	RFQ	21st August 2020
G 28.6	Procurement of PPEs - LRH, FHB, CEBH (Goggles, Hand Sanitizers individual, Hand Sanitizers bulk, Surgical mask, Head caps, Face shields, Aseptic	30,870.26	RFQ	13th July 2020
G 28.1.1	Sample preparation table	572.97	RFQ	13th August 2020
G 29.1	Auto Nucleic Acid Extraction Machines for BIA, CEBH, TH Batticaloa and TH Jaffna	137,837.83	RFQ	13th July 2020
G 29.2	Safety Cabinet (BSL2)-Vortex, PCR hoods / Work Station	69,306.81	RFQ	10th July 2020
G 29.4	Cold boxes, Pharmaceutical Refrigerator, -20 C Freezers	73,029.72	RFQ	31st July 2020
G 29.5	Heat block, Thermo mixer, Mini Spinner, Digital thermo meters	24,025.13	RFQ	14th September 2020
G 29.7	-20 Freezers for MSD, MRI and CEBH	47,972.97	RFQ	31st July 2020
G 30.1	Material for reusable gown with hood	12,703.50	RFQ	Retractive financing
G 30.2	Tailoring for reusable gown with hood	4,662.15	RFQ	Retractive financing
G 30.3	Extension of Medical Gas supply to ICU GH Kalutara	8,486.00	RFQ	8th June 2020
G 30.4	MSD reimbursement of Covid 19 related expenditure	3,605,405.41	RFQ	
G 28.12	Reagents and consumable for PCR Labs	476,992.00	RFQ	4th November 2020
G 31.1	Medical/Surgical equipment and consumables to provincial hospital	9,305.00	RFQ	19th October 2020
G 28.8.1	UPS for PCR Lab equipment	350.81	RFQ	24th November 2020
G 26.1	Procurement of medical equipment for ICU -Ventilators -	665,275.67	LCB	30th November 2020
G 30.6	Medical furniture for CSSD -DMH	48,648.64	RFQ	7th December 2020
G 31	Medical furniture for provincial hospitals	91,648.64	RFQ	23rd December 2020
	Total	**5,386,476.78**		

Table 2.1.9: Goods- Contracts To be awarded

Package No.	General Description	Estimated Contract Value ($ Mn)	Procurement Method	Expected Date of Awarding	Comments
G -01.1	Procurement of Vehicles 2 – Lot 1 - 7 Double Cabs and 9 Lorries	0.740	OCB	7 double cabs – 1st March 2021 9 Lorries – 1st February 2021	7 double cabs – has to recall 7 Lorries – Awaiting approval from Department of Budget to issue PO
G – 02.3	Tab 10.5 inch	0.0005	RFQ	15th Fenruary 2021	Advertise scheduled on 8th January 2021
G - 4.8	Digital Radiographic Panel, Biochemistry Analyzer - Fully Automated	0.066	LCB	1st March 2021	Specification has been finalized
G - 05 G - 05.5	Procurement of Medical equipment for reproductive health and nutrition Autoclaves	0.116	LCB	1st March 2021	Awaiting ADB concurrence for the appeal board decision
G - 06	Procurement of Dental Equipment	1.010	LCB	1st March 2021	Bids are under evaluation
G - 08 G - 8.5	Procurement of ETU equipment Multipara monitors (138), Oxygen Concentrator (51) Mini Autoclave (68)	0.416	LCB	1st March 2021	Specification has been finalized. Preparation of LCB document has been completed.
G -10	Procurement of General furniture for 45 facilities	0.160	OCB	1st March 2021	Bids are under evaluation
G -11	Procurement of Medical furniture for 45 facilities	0.330	OCB	1st March 2021	Finalization of requirements is in taking place
G -18	Equipment for Healthcare Waste Management	0.080	RFQ	1st March 2021	Ready to advertise

G -19	Computers and peripherals for DLC	0.190	OCB	1st February 2021	Bids are under evaluation
G - 23	Medical Equipment for Essential Service package	1.960	OCB		Identification of needs and quantities completed by clusters. TEC has been appointed
G - 24	Design, Installation and User Training of Management Information System for HSEP	0.015	RFQ		Finalization of TOR is in progress
	Total	5.0835	`		

Table 2.1.10: Procurement of Goods Contracts to be awarded – Covid - 19 reallocation

Package No.	General Description	Estimated Contract Value ($)	Procurement Method	Expected Date of Awarding	Comments
G 25.9	Anthropometric equipment (Beam balance, Spring abalone, Bathroom scaler) FHB	135,135.00	RFQ	1st February 2021	Preparation of bidding document is in progress
G 25.10	Anthropometric equipment (Hight rod, Length board, Hight measuring tape) FHB	145,946.00	RFQ	1st February 2021	Preparation of bidding document is in progress
G 25.11	Hand Held dopplers FHB	270,270.00	LCB	1st March 2021	Preparation of bidding document is in progress
G 26.10.1	Central Air Condition System Madirigiriya	36,000.00	RFQ	1st February 2021	Preparation of bidding document is in progress
G 29.3	Mini-centrifuge for 1.5ml and 0.5ml, Bench top Centrifuge 14000 rpm (for 1.5ml tubes)	91,892.00	RFQ	1st February 2021	Rebidding is in progress
G 29.4.1	-80 C Freezers - Nos.6	45,946.00	RFQ	15th January 2021	Awaiting PC decision
G 29.6	Refrigerated Centrifuge-14000 rpm - Nos.5	58,378.00	RFQ	1st February 2021	Rebidding is in progress
G 30.5	Reimbursement of material for	55,000.00	RFQ	15th January 2021	Decided to remove from the activity list

	refurbishment of MICU at CSTH				
G 31.1.1	Medical/Surgical equipment and consumables to provincial hospital	44,750.00	RFQ	1st February 2021	TEC is in progress
G 31.2	Pulse Oximeter	108108.10	RFQ	15th January 2021	Awaiting PC decision
G 31.3	Multipara monitors (Basic and ICU)	108109.10	LCB	1st March 2021	Procurement has to be done
G 33	Equipment Reagents and consumable for PCR Labs/Covid 19 testing	3,800,000.00	LCB	1st March 2021	Advertise scheduled on 8th January 2021
G 34	Procurement of Next Generation Genetic Sequencer	427,807.48	RFQ	15th February 2021	TEC has to be completed
G 35	Procurement of Lab furniture for TH Karapitiya	16,250.00	RFQ	1st October 2021	Procurement has to be done once contract is awarded
G 36	Procurement of Lab furniture for Expanded Virology Lab at NH Kandy	16,250.00	RFQ	1st April 2021	Procurement has to be done after civil work is completed
G 37	Procurement of necessary equipment furniture for isolation rooms at fort of entries (office medical furniture and equipment	13,369.00	RFQ	1st April 2021	Procurement has to be done once contract is awarded
	Total	5,373,210.68			

2.1.11: Procurement of Individual consultancies and firms - Contracts Awarded

Package No.	General Description	Estimated Contract Value ($ Mm)	Actual Value ($ Mm)	Procurement Method	Date Awarded
S-02	Monitoring and Evaluation firm	0.490	0.538	CQS	19th January 2020
S-08	GIS- based planning and monitoring	0.030	0.070	Competitive	24th January 2020

S-16	Health communication expert	0.022	0.026	Competitive	13th January 2020
S -17	Development of Distance Education Portal	0.020	0.009	Competitive	1st June 2020
S -19	Legal expert for quarantine unit	0.012	0.011	Competitive	1st June 2020
S-12.1	Gender specialist	0.03	0.035	Competitive	29th September 2020
S-12.2	Social Safeguard Specialist	0.03	0.024	Competitive	7th August 2020
	Total	0.634	0.713		

Table 2.1.11: Procurement of Individual consultancies and firms - Contracts To be awarded

Package No	Consultants firm/individual	Expected Date of Awarding	Contract period	Contract Value	Comments
S-03	Behavior change and community mobilization for increasing primary health care utilization	1st March 2021	24 Months	0.77	Awaiting ADB approval for evaluation criteria
S-04	Design and Develop health IT system for continuity of care	15th January 2021	24 Months	0.466	Awaiting ADB concurrence for the selected firm
S-10	Financial Management Specialist	1st March 2021	1st Year 6 months and 2nd Year onwards 3 months per	0.018	Awaiting ADB concurrence for proceed the procurement
S-14	Provision of support for community empowerment and capacity building for improving the nutrition status of mothers and children under 5 years in 9 districts covering the state and rural sector	1st February 2021	48 Month	0.5	Technical Proposal evaluation has been completed
	Total			1.754	

2.2 Utilization of Funds (ADB Loan, Grant and Counterpart Funds)

Table 2.2.1: Quarterly Contract Awards

2020	Estimated Awards ($ Million)		Actual Awards ($ Million)		Remarks
	Loan	Grant	Loan	Grant	
Quarter 1	3.327	0.741	1.205	0.820	Medical Equipment, Consultancies and Civil work
Quarter 2	3.327	0.743	0.024	0.790	PHC innovation Fund and medical equipment
Quarter 3	3.327	0.743	4.115	0.383	Medical Equipment, Consultancies and Civil work
Quarter 4	3.329	0.743	3.259	0.626	Medical Equipment, and Civil work
Total	13.310	9.651	8.603	2.619	

Table 2.2.2: Quarterly Financial Progress (Disbursement)

2020	Estimated Amount ($ Million)		Actual Expenditure ($ Million)		Remarks
	Loan	Grant	Loan	Grant	
Quarter 1	2.272	0.625	0.332	0.116	Equipment and project management cost
Quarter 2	2.272	0.625	0.505	1.509	Project management cost, Mobilization advance for civil works, Consultancy Chargers, Equipment and management cost
Quarter 3	2.272	0.625	2.198	1.0226	Project management cost, Payments for civil works, Consultancy Chargers, Equipment and management cost
Quarter 4	2.274	0.625	3.294	2.311	Project management cost, Payments for civil works, Consultancy Chargers, Equipment and management cost
Total	9.09	2.50	6.329	4.9586	

Table 2.2.3: Cumulative Financial Progress[1]

Cost Item	Grant		Loan		Counterpart		Total	
	Estimate	Actual	Estimate	Actual	Estimate	Actual	Estimate	Actual
1.Civil works	5	2.255	13.17	2.204	3.26	0.23	21.43	4.69
2.Equipment and Furniture	1.55	1.335	14.89	6.5014	2.69	0.13	19.13	7.97
3.Vehicles	0	-	4.02	-	0.61	-	4.63	-
4.Training	1.5	0.032	0	-	0	0.0006	1.5	0.03
5.Consulting	0		3.43	0.5136	0.61	0.0269	4.04	0.54
6.Project Management	1.96	0.5729	-	-	0.02	-	1.98	0.57
7.PHC Innovation Fund	1.5	0.005	-	-	-	-	1.5	0.01
8.Incremental Cost	0.99	0.3447	-	-	-	0.0676	0.99	0.41
9.Physical Contingencies	-	-	-	-	0.3	-	0.3	-
10.Price contingencies	-	-	-	-	2.52	-	2.52	-
11.Interest payment	0	-	1.99		-	-	1.99	-
Total	**12.5**	**4.5446**	**37.5**	**9.219**	**10**	**0.46**	**60**	**14.22**

Table 2.2.4: Final Accounts and Audit Report

Activities	2018	2019	2020	2021	2023	Remarks
Submission of Final Accounts to AG	Received 26th February 2019	28th August 2020		-	-	
Submission of Audited Reports to ADB	3rd July 2019	ADB has extended deadline for the submission date – 31st December 2020.	-	-	-	
Submission of clarifications to ADB	No clarification from ADB	Clarification revied from ADB and clarification been submitted 15th December 2020	-	-	-	

3. Implementation Progress

3.1. PMU and PIU Staff

Table 3.1.1: PMU Staff

Description	Number
Total number of fulltime staff	
1. Project Director	1
2. Deputy Project Director	1

[1] Including Covid 19 emergency finance assistance related expenditure incurred from 15$ Mn.

3. Procurement Specialist	1
4. Finance Manager	1
5. Internal Auditor	1
6. Finance Officer	2
7. Procurement Officer	1
8. IT Officer	1
9. Monitoring and Evaluation officer	1
10. Project Secretory	1
11. Project Coordinator	1
12. Management Assistant	2
13. Project Office Assistant	3
14. Driver	1
Total	18
Positions need to be filled – Diver	1

Table 3.1.2: PIU Staff

Province	**Central**	**North Central**	**Uva**	**Sabaragamuwa**
Deputy Project Director	P	P	P	P
Regional Director of Health Services	(3) - P	(2) - P	(2) - P	(2) - P
Project Engineer	F	F	F	F
Project Accountant	F	F	F	F
Project Secretary	F	F	F	F
Procurement Officer	F	F	F	F
District Project Officer	F	F	F	F
Monitoring and Evaluation Officer	P	P	P	P
Project Office Assistant	V	F	F	V
Total Part time appointments	5	4	4	4
Total Full-time appointments	5	6	6	5
Total	10	10	10	9

*P- Part time appointments, F- Full time appointments, V- Vacant ** Application called

3.2 Implementation Progress of Civil Work Round 1

Table 3.2.1 – Financial Progress – Round One[2]

Province	District	Total Packagers	Contract Signed	Rebid	Total Amount			
					Estimated Amount ($)	Contract Value ($)	Financial Progress ($)	Financial Progress (%)
Central	Kandy	5	5	0	683,050.00	820,810.81	291,335.14	35.49
	Mathale	5	0	5	525,000.00	-		
	Nuwara Eliya	4	4	0	447,350.00	460,648.65	208,178.38	45.19
North Central	Polonnaruwa	4	4	0	378,750.00	402,486.49	214,237.84	53.23
	Anuradapura	5	5	0	739,500.00	848,324.32	292,356.76	34.46
Sabaragamuwa	Kegalle	5	5	0	515,300.00	584,162.16	312,205.41	53.44
	Ratnapura	5	5	0	539,100.00	641,621.62	202,972.97	31.63
Uva	Badulla	5	5	0	742,800.00	845,081.08	311,794.59	36.90
	Monaragala	5	5	0	622,470.00	597,729.73	251,432.43	42.06
Total		**43**	**38**	**5**	**5,193,320.00**	**5,200,864.86**	**2,084,513.51**	40.08

[2] Detail progress is with annex 2

Table 3.2.2 Implementation Progress of Development of Primary Medical Care Services –Round 1 Physical Progress

Civil Works Round 1						
	Facility Name	**Date of Commenced**	**Scheduled Completion Date**	**Physical Progress (%)**	**Financial Progress (%)**	**Remarks**
Kandy	Hatharaliyadda	21.08.2019	30.03.2021	59%	43.23%	Finishing work proceeding. Roof work completed
	Madulkale	21.08.2019	07.09.2021	14%	23.98%	Retaining wall proceeding and sub structure work completed
	Dolosbage	21.08.2019	-	3%	15.00%	Work temporary stopped due to land hall, after the discussion had with all stakeholders decided to commenced work with new scope
	Galaha	21.08.2019	15.12.2020	98%	79.44%	Substantially completed
	Deltota	21.08.2019	31.12.2020	73%	47.17%	Finishing work proceeding. Roof work & ceiling work completed.
Mathale	Kalundewa					Considering appeals is in progress by appeal board appointed by Chief Secretary
	Madavalaulpotha					
	Paldeniya					
	Kimbissa					
	Galewela					
Nuwara Eliya	Kotagala	20.08.2019	14.04.2021	50%	15.00%	ETU extension completed. Waiting area – Masonry work and electrical work proceeding Toilet Unit – Sanitary fittings and aluminum work to be proceeded. Roof work at kitchen area – to be proceeded.
	Laxapana	20.08.2019	09.01.2021	89%	51.27%	BOQ items completed and finishing work in progress
	Nanuoya	20.08.2019	21.05.2021	44%	38.38%	Roof work completed, Masonry work and plastering work proceeding
	Punadaluoya	20.08.2019	17.02.2021	88%	68.46%	BOQ items completed and finishing work in progress
Polonnaruwa	Ellewewa	15.07.2020		45%	45.81%	Work Not yet Stared due to variation approval/PPC Approval Obtained for Variation

	Sewanapitiya	29.01.2020	28.01.2021	75%	42.54%	Additions to existing OPD building work completed. Repairs existing OPD building in progress
	Damminna	15.07.2019		95%	43.06%	PPC approval Obtained for 5% of variation
	Ambagaswewa	15.07.2019	15.01.2021	95%	80.12%	Finishing work is in progress
Anuradapura	Horowpathana	15.08.2019	02.04.2021	57%	25.86%	Work Not yet Stared due to variation approval/PPC Approval Obtained for Variation
	Galenbindunuwewa	09.01.2020	18.12.2020	98%	58.57%	Finishing work is in progress
	Negampaha	15.08.2019	15.02.2021	61%	33.71%	Brik work is in progress
	Koonwewa	20.08.2020	15.02.2021	49%	9.28%	Roof work is in progress
	Thittagonewa	29.08.2020	29.02.2021	75%	32.16%	Finishing work is in progress
Kegalle	Bolagama	21.08.2020	03.12.2020	100%	62.12%	Completed
	Hewadiwela	21.08.2020	20.09.2020	100%	65.29%	Completed
	Minuwangamuwa	21.08.2020	18.01.2021	80%	43.38%	Aluminum work is in progress
	Aranayaka	21.08.2020	04.01.2021	98%	51.87%	External work is in progress
	Uyanwatta					Designing completed, decision pending for further construction
Rathnapura	Endane	21.08.2019	04.10.2020	100%	65.38%	Completed
	Dodampe	21.08.2019	20.01.2021	91%	25.20%	First phase completed
	Narissa	10.03.2020	02.03.2021	40%	-	Roofing, Brick work and toilet block is in progress
	Delwela	10.03.2020	09.03.2021	10%	13.17%	Construction of retaining wall is in progress
	Ranwela	10.03.2020	02.03.2021	31%	17.26%	Construction soakage pit, septic tank brickwork is in progress
Badulla	Meegahakiula	29.07.2019	06.11.2020	100%	84.04%	Finishing works is in progress
	Ettampitiya	11.01.2020	04.02.2021	53%	27.26%	Plastering, brick work and Roof work is in progres

	Haldummulla	06.01.2020	30.01.2021	85%	23.15%	Tilling, painting and aluminum works is in progress
	Kandeketiya	06.01.2020	30.01.2021	72%	41.26%	Ceiling, painting, wiring and tilling is in progress
	Koslanda	06.01.2020	30.01.2021	74%	20.86%	Ceiling, tilling and painting works is in progress
Monaragala	Dombagahawela	12.08.2019	15.12.2020	82%	27.27%	Tilling, wiring and painting is in progress
	Daliwa	12.08.2019	31.12.2020	70%	19.12%	Roofing work is in progress
	Dambagalla	21.08.2019	01.12.2020	98%	44.98%	Finishing work is in progress
	Thanamalwila	21.08.2019	01.12.2020	99%	79.82%	Finishing work is in progress
	Hambegamuwa	06.01.2020	30.01.2021	62%	34.21%	Floor concreting is in progress

Implementation progress – Civil Work Round 2[3]

[3] Detailed implementation progress is with appendix 3

3.3 Implementation Status of Outputs

Table 3.3.1: Design and Monitoring Framework

Project Output	Activities undertaken up 31st December 2020	Planned activities for the year Quarter 1 - 2021
1. Primary health care enhanced in Central, North Central, Sabaragamuwa, and Uva provinces	1.1 Development of primary medical care services Physical infrastructure development of PMCUs and DHs in 45 facilities in 9 Districts. (43 out of 45) Civil Work Contracts awarded = 38 Civil Work Contracts completed= 5 Civil Work Contracts to be awarded = 5	Award the remaining contracts of the round one civil work (5). Award the remaining contracts of the round two civil work (45). Supply Medical Equipment. G-04 – Laboratory, Physiotherapy and X ray Equipment for Apex Hospital G-05 – Medical Equipment for reproductive health and Nutrition G 06 –Dental Equipment G-08 - ETU equipment. G-23 – Medical equipment for ESP
	1.2. Development of primary preventive care services Vehicle procurement has been done (38 Double cabs, 13 Vans)	Procurement of 7 Cabs, 9 Lorries Completing the preparation of designs and BOQs by D&S firm for 127 FHC.
	1.3. Public awareness and BCCM for increasing PHC utilization. Procurement process for hiring the BCCM firm was initiated. EOI Evaluation completed	Complete the procurement of consultancy firm
	1.4. PHC Innovation fund Approval obtained for 22 new proposals from project steering committee	Review and grant approval for new proposals
2. Health information and disease surveillance capacity strengthened	2.1. Health information technology for continuity of care and disease surveillance. Software consulting firm for establishing HIT at PHC/cluster level has been selected and submit for ADB approval	Award the contract after get the Cabinet approval.
	2.1.2. Computers and Peripherals for HIT and GIS units. GIS units established.	Procurement of Computers and Peripherals for HIT once firm on board

	2.2. Support to implementation of IHR related to ports of entry. Current laws and regulations related IHR is being reviewed	Complete the review of IHR related laws and regulations
3. Policy development, capacity building, and project management supported	3.1. Policy development support. Advertised to recruit consultants. Recruitment of individual consultancies completed and extend contact period which was approved by review committee 3.2. Human Resource Development Master plan Due to the current global situation, national and international trainings have been suspended temporarily. 3.3. Project management and results monitoring. Tools have been completed for the initiate baseline survey	Conduct local training programmes. Initiating the baseline survey by M&E firm.

3.4 **Implementation Progress of PHC innovation fund.**

Implementation progress of PHC innovation fund is with appendix 5

4. Human Resource Development Program

Approval received from MoH Project Steering Committee and ADB for the human resource development master training plan and proposals invited from international training institutions. Trainings planned in this year will be delayed due to the prevailing situation of COVID 19 pandemic outbreak.

5. Progress of Social Safeguard and Environment

5.1 Social Safeguard

Most physical work associated with project confined within the existing government-owned lands and avoided involuntary resettlement impacts (land acquisition and physical or economic displacement of people).

output one of this project consists of refurbishment and renovation of PMCUs and DHs which do not have any significant adverse social impacts. The land identified for locating these facilities belong to respective institution without acquiring private lands.

It has been found that no additional land is required for the project. It is confirmed that there is no any land acquisition or structural damages or livelihood disturbances due to the implementation of this project. It is also confirmed that there is no presence of Indigenous people in this project area. Therefore, the results of this Due Diligence study concluded that, as per ADB Safeguard Policy Statement, the project has been categorized as 'C' for both Involuntary Resettlement and Indigenous Peoples. There is no temporary disruption of livelihood of any household or group of community in the project area during construction period. So that no needs to provide neither Resettlement Plan nor Indigenous People Development Plan as required by ADB's policy.

Table 5.1.1: Implementation of Grievance Redress Mechanism and establishment of Grievance Redress Committees (GRC)[4]

Province	Members of GRC	No. of complaints received	No. of complaints submitted to ADB	Action taken by GRC/PIU/PMU	Comments
North Central	1.DPD PIU -Chairman 2. District project officer – Secretary. 3. RDHS – Member 4. RDHS – Member 5. Officer Provincial Administration – Member 6. Journalist - Member	-	-	-	Complaint received regarding delay in civil works in quarter 3. DPD has been attained and arrange mechanism

[4] Detail progress will be included in Semi Annual Social Safeguard Monitoring Report.

					to close monitor to construction progress
Central	1. DPD PIU - Chairman 2.RDHS – Member 3.RDHS – Member 4.RDHS – Member 5. Grama Niladari - Representative of the community 6.Director Engineering Service – Member 7.Project secretary- social and environmental responsible officer	-	-	-	Complain received on 31.12.2020 from contractor which was bids Matale round one civil works regarding delaying awarding round 1 rebidding contract.[5]
Uva	1.DPD PIU - Chairman 2.RDHS -Member 3.RDHS – Member 4.Medical Officer – Representative of community 5.Legal officer – Nominated by PC 6. Project Secretary – Social and environmental responsible officer	-	-	-	No complaints received.
Sabaragamuwa	1.DPD PIU - Chairman 2. Project Officer PIU- Secretary. 3.RDHS – Member 4.RDHS – Member 5.Director Planning- Member 6.Retired Provincial Director Education - Member	-	-	-	One grievance received 2nd March 2020 and action has been taken.[6]

[5] PMU advised to DPD PIU Central province address the grievance and get necessary action

[6] In Kegalle district of Sabaragamuwe there has been a grievance received on 02 March 2020 from Uyanwaththa Farmer Organization, Uyanwaththa, and Dewanagala requesting to change the location of the PMCU Uyanwaththa to Aluthnuwara. This grievance has been received after the decision that has been made on 21 January 2020 to develop the existing PMCU at Uyanwaththa. This grievance has been discussed at the steering committee of the project in the province and decided to go ahead with the already started civil work on Uyanwaththa PMCU as planned but explore possibility to construct new PMCU in Aluthnuwara with funding from other possible sources

PMU	1. Dr Anil Dissanayake – Chairman - PMU 2. Dr. S Sridharan – Member – (MoH) 3. Mr. KP Yogachandra – Member – (MoH) 4. Mr. M Rahuman – Member – (MoH) 5. Dr.Nihal Weerasooriya– Member (PIU- NCP) 6. Dr. Palitha Bandara – Member (PIU- NCP) 7. Dr. Kapila Kannangara – Member (PIU - Sabaragamuwa) 8. Dr. Janitha Tennakoon – Member 9. Mr.RMWD Rathnayake (Assistant Secretary, Department of Planning NCP) – Member 10. Mr. Anil Wijesiri (Secretary MoH Uva)– Member 11. Mr.Parakrama Piyasena (Deputy Chief Secretary Sabaragamuwa)– Member 12. Mrs. Chamindika Herath - Member (Legal Officer- MoH) 13. Mrs.Shanthi Amarasekara (Member Country Coordinating Mechanism Sri Lanka)				No complaints received.

6**. Environment Management and Climate Adaptation**

Detail progress will be included in Semi Annual report which will be submitted with Quarterly progress report 2020

7. Progress of Gender and Social Dimensions

Progress of GAP is in Appendix 4

8. **Loan Covenant**

The government and ADB have agreed to comply with the loan covenants mentioned in the loan agreement signed by the government and ADB. According the loan agreement, the Loan Covenants Matrix must be implemented during the project period.

Progress of loan covenants is in Appendix 6

9. Reallocation for Covid 19 Emergency Financial Assistance

Project Name: Reallocation Covid 19 Emergency Response	
Project Number: Loan Sri 3727(COL) Grant 0618(SF)	
Project Financing Amount: US$ 15 Mn	Project Closing Date:
Project Closure	31.12.2021
Financial Progress as at 31.12.2020	1,066 Mn LKR (38.41%)

No	Activity	Estimated Cost (LKR Mn)	Progress
1	Construction of PCR lab at Colombo East Base Hospital with a capacity to perform 500 tests for 12 hours including equipment, reagents and consumables to perform 15000 tests with training	250	Completed and opened on 24th June 2020
	Proposed Office Space for PCR Laboratory		Completed
	Furniture for Office		Completed
	Supply of reagents and consumables for PCR lab at CEBH	80	Completed
	Regents and Consumables Rapid Antigen (G.33)	700	Ongoing
2	Refurbishment of isolation rooms at point of entries (Harbors) Colombo, Galle, Hambantota Trincomalee and MRI sub office	63	Bids are under evaluation
3	Procurement of necessary equipment, furniture for above isolation rooms (Office, Medical furniture and equipment)	2.5	Quarantine unit is preparing list of furniture to procure.
4	Refurbishment of isolation rooms at NIIDH (Requested by quarantine unit)	75	Bids are under evaluation
5	Refurbishment and procurement of medical equipment of ICUs at BH Thambuththegama and Madirigiriya.	270	Intensive Care Unit Thambuttegama has been declared open on 20th June 2020. Madirigirya works is in progress
	Supply of Medical equipment – ICU Thambuththegma and Madirigiriya		

	5.1 CRRT machines, DVT pumps, Defibrillators with face mask,		Completed
	5.2 Portable Ultrasound Scanner 2		Completed
	5.3 Mobile X Ray Machines 2		Completed
	5.4 ABG blood Gas analyzer, Pharmaceutical Refrigerators		Completed.
	5.5 Bed head tables, Bed side lockers, Crash cart/ Emergency trolly, Oxygen cart wheel chair		Completed.
	5.6 Stethoscopes, Mapleson C circuits, Pediatric Circuits, Laryngoscope adult and pediatric, Oxygen Humidifier apparatus, Ambu Bag, Forced air patient warmers		Completed.
	5.7 Central Air Condition System		Completed.
	5.8 Medical Gas pipeline extender Thambuttegama		Completed.
	5.9 Civil work at Thambuttegama		Completed.
	5.10 Civil work at Madirigiriya - Gas Room		Completed
6	Emergency financial assistance for provinces		
	6.1 Central Province	1.7	Completed.
	6.2 North Central Province	5	Completed,
	6.3 Sabaragamuwa Province	5	Completed,
	6.4 Uva Province	5	Completed
7	Construction of Laboratory Complex at NIID	225	Bids are under evaluation
8	Medical Equipment for PCR Labs	150	
	10.1 Real time PCR Machines 5		Completed
	10.2 Safety Cabinet (BSL2)-Vortex hoods / Work Station		Completed
	10.3 Mini-centrifuge for 1.5ml and 0.5ml, Bench top Centrifuge 14000 rpm (for 1.5ml tubes)		Procurement has to be done
	10.4 Cold boxes, Pharmaceutical Refregirator,20 C Freezers,20 C Freezers		Completed
	10.5 Heat block, Thermo mixer, Mini Spinner, Digital thermo meters		Completed

	10.6 Refrigerated Centrifuge-14000 rpm		Rebidding is in progress.
9	Refurbishment of MICU Colombo South Teaching Hospital (Material cost)	10	Dropped from the activity list
10	Refurbishment of ICU GH Kaluthara (Medical Gas extension)	2	Completed
	13.1. Supply of Video, Laryngoscope for GH Kalutara	2	Completed
11	Supply of equipment for MRI		
	14.1 Establishment of 2 cold room at MRI	15	Rebidding has to be done
	14.2 Nanopore Sequencer Including all accessories and special training ect.		Completed.
	14.3 Point of Care testing analyzer with facility to measure electrolytes		Completed
	14.4 Microscope - extended procurement		completed
	14.5 Nebulizer		completed
12	Procurement of medical equipment for Provincial Hospitals	100	Different procurement procedure at different level of the procurement.
	12.1 Medical furniture provincial hospitals		Procurement has been completed
	12.2 Medical Equipment and consumables		Procurement has been completed
	12.2 Pulse Oximeter Multipara monitors (Basic and ICU)		Pulse Oximeter- TEC evaluation has been completed Multipara monitors – Procurement has to be done
13	Procurement of PPEs - LRH, FHB, CEBH (Goggles, Hand Sanitizers individual, Hand Sanitizers bulk, Surgical mask, N95 Mask, Head caps, Face shields	14	Completed
14	Procurement of 360 Hand held dopplers one for each MOH (LCB)	50	LCB document has to be prepared by the procurement division.
15	Supply of Personal Protective Equipment	4.5	Completed
	Quarantine Unit, North Central Provincial Council, LRH and MSD		Completed
16	Refurbishment of CSSD at De Soysa Maternity Hospital	7	Contract has been awarded and variation approval is in progress
17	Refurbishment of Isolation ward at Kalutara – High Dependence Unit	4	Construction is in progress
18	Supply of -20C Freezer for MSD	3	Completed

19	Procurement of Medical Equipment, Reagents and Consumables for MoH. Reimbursement of COVID related procurement after 1st of March 2020	700	Reimbursement in progress - 694.12 Mn LKR reimbursed. Ongoing.
20	Establishment of Iodine Therapy at GH Ratnapura	20	Bidding document to be prepared by Procurement Division.
21	Establishment of Iodine Therapy at GH Anuradhapura	37	Bidding document to be prepared by Procurement Division.
22	Refurbishment of COVID 19 ward at TH Kurunegala	20	Bidding document is in progress
24	Procurement of 500KVA generator for Batticaloa	12	Procurement has been completed
25	Molecular Biology Lab with furniture TH Karapitiya	30	Rebidding has to be done.
26	Refurbishment of ICU Kahawatta	12	Procurement has to be done
27	Refurbishment of ICU Karawanella	3	Procurement has to be done
28	Refurbishment of Covid 19 ward at TH Batticaloa	11	Ready to send RFQ
29	Expansion of Virology Lab at NH Kandy	11	Preparation of bidding document is in progress
	Total Allocation	2999.07	

10. Progress of RTA regional fund

No	UNICEF – Allocation 0.9 $Mn	Progress
1	Face Masks	Completed
2	Test Kits and Reagents (Quantity -30000) PEPs without boots (Quantity -12000) VTM (Quantity - 30000) Thermal Scanner – (Quantity - 03)	UNICEF has to be completed the procurement. Balance of 400,000.00 $ awaiting request from MoH to procure requirement needs for the control Covid 19.

11 .Asia Pacific Disaster Respond Fund
(APDRF – Covid 19 Emergency Response Project)

Project Name: APDRF – Covid 19 Emergency Response Project	
Project Number: 0702-SRI	
Project Financing Amount: US$ 3Mn	Project Closing Date: 08.03.2021
Reporting Date	20.01.2021
Total Fund Allocation	566 Mn LKR
Financial Progress as at 30.09.2020	347.57 Mn LKR (61.40%)

Package Number	General Description	Estimated Value (in US$)	Comments
	Operation Cost	10,747.91	
APDRF – Reimbursement	**Retractive Financing (30% of Total)**	907,725.95	Completed
APDRF - G 1	**HPB Risk communication –** Printing wall charts for schools	29,335.34	Completed
APDRF - G 1.1	Flex banner printing in Sinhala and Tamil for HPB	20,760.27	Completed
APDRF- G 2.1	Procurement of PA system Sabaragamuwa	2,933.53	Completed
APDRF - G 2.2	Health Promotion/Risk communication Ministry of Health	12,103.60	Completed
APDRF – G 3	Automated Nucleic acid extractor for TH Karapitiya	84,605.84	Completed
APDRF – G 3.1	Fully automated serology machine for PCR Lab TH Karapitiya	0.00	Completed
APDRF - G 3.2	Procurement of Medical Laboratory Equipment- TH Karapitiya-Real Time PCR Machine -	23,282.79	PO issued
APDRF - G 3.3	TH Karapitiya- Automated Nucleic Acid Extraction Machine – High Throughput and Automated Nucleic Acid Extraction Machine -Low Throughput.	116,548.86	PO issued
APDRF - G 3.4	TH Karapitiya- Vortex, Biosafety Cabinet Class 2- Large, Biosafety Cabinet Class 2- Small, PCR Hoods- Medium, PCR Hoods- Small, Heat Block, Autoclave – Large (G3.4)	47,034.43	PO issued
APDRF - G 3.6	TH Karapitiya- (-20^{0}C) Freezer -Small, Pharmaceutical Refrigerator- Large, Pharmaceutical Refrigerator- Medium, Pharmaceutical Refrigerator- Under Counter	16,321.11	Completed
APDRF - G 3.7	TH Karapitiya- Micro Pipettes, Agarose electrophoresis apparatus, Gel imaging system, Electronic multi-channel Pipettes	14,277.37	Completed
APDRF - G 3.8	Procurement of medical laboratory equipment (Microwave Oven, Computers, Multifunctional printers, Barcode Printers, Readers,online UPS, Dotmetrix printers	1,234.55	50% completed

APDRF - G 3.9	Procurement of Water purifications system, Florescent Microscope, Stepper Pipette, Cryovial Storage Box	27,096.08	PO Issued
APDRF – G 4	150KVA Generator for BH Rikillagaskada	22,663.19	PO issued
APDRF – G 5	500KVA Generator for TH Batticaloa	95,583.35	Completed
APDRF - G 7	Procurement of Reagent and consumable related to PCR testing Test Kits for the Automated Extractors (Maxwell RSC)	401,307.49	Completed
APDRF - G 7.1	Procurement of Reagent and consumable related to PCR testing Test Kits for the Automated Extractors (Maxwell RSC)	200,653.74	Completed
APDRF - G 7.2	New Procurement -Test Kits for the Automated Extractors (Maxwell RSC)	369,776.90	PO Issued
APDRF - G 8	Procurement of reagents and consumables for Corona PCR and antibody system, Viral Nucleic Acid Extraction, SARS COV -2 Antibody Test	141,403.65	Completed
APDRF - G 10	Procurement of Optical Coherence Topography Machine	169,764.71	PO issued
APDRF - G 11	Raw Materials for Covid 19 Treatment Centers at Aththanagalla	2,706.09	Completed
APDRF - G 11.1	Raw Materials for Covid 19 Treatment Centers at Yakkala	2,670.33	Completed
APDRF – G 13	Procurement of medical equipment Adult and Neonatal suckers	20,860.69	PO issued
APDRF – G 13.1	Procurement of medical equipment - Neonatal Transport Incubator with inbuild Ventilator, Phototherapy unit and Neonatal Laryngoscope	14,341.72	PO issued
APDRF – G 13.2	Procurement of medical equipment Infant Warmers and CTG machine	110,366.08	PO issued
APDRF – G 14	Procurement of equipment for ICU Syringe pump	48,051.29	PO issued
APDRF – G 14.1	Procurement of equipment ICU Infusion pump	44,355.04	PO issued
APDRF – G 15	Procurement of equipment for PCR laboratory, Office furniture	1,865.66	PO issued
APDRF – G 16.1	Materials for the construction of Store Room at PCR lab CEBH	2,210.21	PO issued
	Total	**2,962,587.78**	

12. Major Project Problems and Proposed Actions

Identified Major issues	Action Proposed/ Taken
1. Delay in get approval from department of budget for issue the purchasing order for 9 lorries	PMU has submitted all necessary document to Department of Budget
2. Delay in approval additional carders (Civil Engineers as parttime basis) for supervise Covid 19 related construction from Ministry of Health	Request has been sent for the Ministry of Health
3. Due to change of procurement methods, delay in procurement of Medical Equipment	Re Package of medical equipment and procurement process has been initiated
4.Delay in awarding of civil works due to difficulties to finalized bid document	PIUs and Designing and supervision firm were advised to use provincial rates of BOQs and expedite contract awards and evaluation
5. Time taken to complete the rebidding process.	Project Engineers, D&S firm and procurement officers have to expedite works.
6. No financial allocation for whole year and allocations received from Vote on account.	Reschedule of disbursement according to the allocation.
Issues identified due to Covid 19 situation	
1. Price escalation of the products.	
2. Unavailability of products and transport problems.	
3. Social, economic and Health situations of the country have not normalized yet	

14. Appendices

Appendix 1: Procurement Plan
Appendix 2: Progress of Design and Monitoring Framework (DMF)
Appendix 3: Progress of Civil Works Round 1 and Round 2
Appendix 4: Updated Gender Action Plan (GAP)
Appendix 5: Compliance with loan and Grant Covenants
Appendix 6: Implementation Progress of the Project Schedule
Appendix 7: Progress of Financial Management Action Plan

Appendix 1

PROCUREMENT PLAN

Basic Data

Project Name: Health System Enhancement Project		
Project Number: 51107-002	**Approval Number:** 3727/0618	
Country: Sri Lanka	**Executing Agency**: Ministry of Health & Indigenous Medical Services	
Project Procurement Risk: Medium	**Implementing Agency**: N/A	
Project Financing Amount: US$ 60,000,000 **ADB Financing:** US$ 50,000,000 **Cofinancing (ADB Administered):** **Non-ADB Financing:** US$ 10,000,000	**Project Closing Date:** 31 May 2024	
Date of First Procurement Plan: 23 October 2018	**Date of this Procurement Plan**: 17 November 2020	
Procurement Plan Duration (in months): 18	**Advance Contracting:** Yes	**e-GP:** No

A. Methods, Review and Procurement Plan

Except as the Asian Development Bank (ADB) may otherwise agree, the following methods shall apply to procurement of goods, works, and consulting services.

Procurement of Goods and Works	
Method	**Comments**
Open Competitive Bidding (OCB) for Goods	Internationally and nationally advertised. All procurement activities (international) and first two procurement activities (national) carried out by PMU and/or PIU are subject to Prior Review.
Limited Competitive Bidding for Goods	As discussed with PPFD (esp for medical equipment with restrictions due to required supplier accreditation with NMRA)
Request For Quotation for Goods	First two procurement activities carried out by PMU and/or each PIU are subject to Prior Review.
Direct Contracting for Goods	All procurement activities carried out by PMU and/or each PIU are subject to Prior Review.
Procurement from Specialized Agencies for Goods	All procurement activities carried out by PMU and/or each PIU are subject to Prior Review.
Open Competitive Bidding (OCB) for Works	Nationally advertised. First two procurement activities carried out by each PIU are subject to Prior Review.
Request For Quotation for Works	First two procurement activities carried out by PMU and/or each PIU are subject to Prior Review.

Consulting Services	
Method	**Comments**
Quality- and Cost-Based Selection for Consulting Firm	All procurement activities carried out by PMU and/or PIU are subject to Prior review
Quality-Based Selection for Consulting Firm	All procurement activities carried out by PMU are subject to Prior review
Consultant's Qualification Selection for Consulting Firm	All procurement activities carried out by PMU are subject to Prior review
Least-Cost Selection for Consulting Firm	All procurement activities carried out by PMU are subject to Prior review
Fixed Budget Selection for Consulting Firm	All procurement activities carried out by PMU are subject to Prior review
Competitive for Individual Consultant	All procurement activities carried out by PMU are subject to Prior review

B. Lists of Active Procurement Packages (Contracts)

The following table lists goods, works, non-consulting and consulting services contracts for which the procurement activity is either ongoing or expected to commence within the procurement plan duration.

Goods and Works							
Package Number	**General Description**	**Estimated Value (in US$)**	**Procurement Method**	**Review**	**Bidding Procedure**	**Advertisement Date** (quarter/year)	**Comments**
G-01	Procurement of Vehicles	2,710,000.00	OCB	Prior	1S1E	Q4 / 2019	Non-Consulting Services: No Advertising: National No. Of Contracts: 2 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: Yes Bidding Document: Goods High Risk Contract: No Covid-19 Response? No Comments: Bidders from are eligible countries are permitted. Awaiting approval of Treasury to proceed: Increase in budget allocation already requested.
	Lot 1: 38 double cabs	2,450,000.00					
	Lot 2: 4 vans	260,000.00					
G-01.1	Procurement of Vehicles 2	1,320,100.00	OCB	Post (Sampling)	1S1E	Q2 / 2020	Non-Consulting Services: No Advertising: National

							No. Of Contracts: 4 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? No
	Lot 1: 7 double cabs Lot 2: 9 lorries Lot 3: 9 vans	450,000.00 290,000.00 580,000.00					
G-02	Procurement of Office Equipment for PMU and PIUs	71,862.82	RFQ	Prior		Q3 / 2018	Non-Consulting Services: No No. Of Contracts: 4 Advance Contracting: Yes High Risk Contract: No Covid-19 Response? Yes Comments: First two procurement is prior. Adjusted based on market price
G 2.3	Procurement of Office Equipment	13,850.00					
	Reverse Automatic Document Feeders Tab 10.5 inch	2,250.00					

		1,000.00					
	Air Cooler	350.00					
	Camera for PMU and PIU Nos. 5	5,250.00					
	CCTV system for PMU	2,000.00					
	Teleconference system for PMU and PIUs	3,000.00					
G 2.4	Procurement of Office Equipment – Additional office equipment -Future requirements	25,000.00					
G-04.8	Biochemistry Analyzer and Digital Radiographic Panel for Apex Hospital	661,380.00	LCB	Prior	1S1E	Q4 / 2020 Rebidding Q4 2020	Non-Consulting Services: No No. Of Contracts: 2 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? No Comments: Bidders from all eligible countries are permitted. NMRA registration a requirement. Bidding limited to suppliers already registered with NMRA. Re-advertised in Q4 2020
G-04.8.1	Digital Radiographic Panel	516,130.00					
G-04.8.2	Biochemistry Analyzer - Fully Automated	145,250.00					
G-05.5	Procurement of	116,600.00	LCB	Post	1S1E	Q3 / 2020	Non-Consulting

	Medical Equipment for Reproductive Health and Nutrition -Large instrument sterilizer 50x30x25 cm			(Sampling)			Services: No No. Of Contracts: 1 Prequalification of Bidders: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? No Comments: Bidders from all eligible countries are permitted. NMRA registration a requirement.
G-06	Procurement of Dental Equipment Lot 1: Dental Chair and Unit – 27 Nos,Light Cure Machine – 26 Nos, Ultrasonic Scalar – 59 Nos, Mobile Dental Box – 25 Nos, Air Rotor Hand Piece – 50 Nos	1,010,000.00 750,000.00	LCB	Post (Sampling)	1S1E	Q2 / 2020 Rebidding Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 2 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? No Comments: Bidders from all eligible countries are permitted. NMRA registration a requirement.

	Lot 2: Mobile Dental Chair and unit – 33 Nos	260,000.00					
G-08.2	Procurement of ETU Equipment- Lot 2 Sphygmomanometer (also for Apex) Lot 3- Peak flow meter	27,276.00	RFQ	Post (Sampling)		Q2 / 2020 Rebidding Q4/2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? No Comments: NMRA registration required
G-08.5	Procurement of ETU Equipment Lot 1: Multipara monitors 147 Nos Lot 2: Oxygen Concentrator – 56 Nos Lot 3: Mini Autoclave – 68 Nos	416,000.00 151,500.00 109,000.00 155,500.00	LCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 3 Prequalification of Bidders: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? No Comments: Bidders from all eligible countries are permitted. NMRA registration a requirement.
G-12	Procurement of Computers and Peripherals for HIT system for cluster facilities	705,800.00	OCB	Post (Sampling)	1S1E	Q1 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No

							Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? No Comments: after S4 is engaged
G-13	Procurement of computers and peripherals for QHRMS and other items for disease surveillance	110,000.00	OCB	Post (Sampling)	1S1E	Q4 / 2022	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? No
G-16	IT connectivity for DHs, PMCUs and epidemiology unit including monthly payment for 5 years	420,000.00	RFQ	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No

							Advance Contracting: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? No
G-18	Equipment for Healthcare Waste Management	80,000.00	RFQ	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? No
G-19	Computers and peripherals for DLC	190,000.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? No Comments: Q3 / 2020: after DLC consultant is engaged
G-23	Medical equipment for essential package	1,960,000.00	OCB	Post (Sampling)	1S1E	Q1 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of

							Bidders: No Domestic Preference Applicable: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? No Comments: Q3 / 2020: after ESP consultant is engaged
G-24	Management Information System for HSEP	15,000.00	RFQ	Post (Sampling)		Q1 / 2021	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? No Comments: Awaiting
G 25.2	Point of Care testing analyzer with facility to measure electrolytes	4,189.00 (Not required)	RFQ	Post (Sampling)		Q2 / 2020	NFA Purchase order cancelled Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Loan
G 25.3	Procurement of Containers for PCR Lab at NIID	100.00 (Not Required)	RFQ	Post (Sampling)		Q2 / 2020	NFA Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: NFA
G 25.5	Refurbishment Cold Room MRI	32,432.43 (Not required)	RFQ	Post (Sampling)		Q2 / 2020	NFA (Reconsider as Work W-36) Non-Consulting Services: No

							No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: NFA
G 25.6 G 25.7 G 25.8	These packagers identified under the Covid 19 response fund has been accommodated in the APDRF						
G 25.9	Anthropometric equipment (Beam balance, Spring abalone, Bathroom scaler)	135,135.00	RFQ	Post (Sampling)		Q1 / 2021	Loan
G 25.10	Anthropometric equipment (Hight rod, Length board, Hight measuring tape)	145,946.00	RFQ	Post (Sampling)		Q1/ 2021	Loan
G 25.11	Hand Held dopplers	270,270.00	LCB	Post (Sampling)		Q1 / 2021	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Loan
G 26.1	Procurement of medical equipment for ICU -Ventilators Lot 1: 1 High-end ICU Ventilator Lot 2: 2 CPAP Ventilator	1,141,000.00 492,000.00 113,000.00	LCB	Post (Sampling)	1S1E	Q3 / 2020	Non-Consulting Services: No No. Of Contracts: 3 Prequalification of Bidders: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? Yes Comments: Loan

	Lot 3: 3 Transport Ventilator Lot 3.4 Neonatal Ventilator	179,000.00 357,000.00					
G 26.3	Procurement of Syringe pump with STAG columns for 4 machines	189,189.18 (Not Required)	RFQ			Q2/ 2020	NFA This packager identified under the Covid 19 response fund has been accommodated in the APDRF
G 26.3.1	Infusion pumps with columns for 4 machines	189,189.18 (Not Required)	RFQ			Q2/ 2020	NFA This packager identified under the Covid 19 response fund has been accommodated in the APDRF
G 26.4	Central Monitoring system NCP						NFA (TEC not recommended)
G 26.10.1	Central Air condition system Madirigiriya	36,000.00	RFQ			Q4 / 2020	Covid-19 Response? Yes Comments: Loan
G27.4	Sbaragamuwa Proince	11,005.00	RFQ	Post (Sampling)		Q2 / 2020	Non-Consulting Services: No No. Of Contracts: 18 High Risk Contract: No Covid-19 Response? Yes Comments: Grant
G 28.8.1	UPS for PCR Lab equipment	360.00	Repeat Order				Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Grant
G 28.9	Material for Generator room						NFA
G 28.10	Pass through boxes						NFA
G 28.12	Reagents and consumable for PCR Labs	476,992.00	LCB	Prior	1S1E	Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 Prequalification of Bidders: No Bidding Document:

							Goods High Risk Contract: No Covid-19 Response? Yes Comments: Ongoing
G 29.3	Mini-centrifuge for 1.5ml and 0.5ml, Bench top Centrifuge 14000 rpm (for 1.5ml tubes)	91,892.00	RFQ	Prior		Q4 / 2020 Rebid	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Loan
G 29.4.1	-80 C Freezers	45,946.00	RFQ	Post (Sampling)		Q3 / 2020 Rebid	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Loan
G 29.6	Refrigerated Centrifuge-14000 rpm - 5	58,378.00	RFQ	Post (Sampling)		Q4 / 2020 To be Rebid	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Loan
G 30.5	Reimbursement of Material for refurbishment of MICU at CSTH	55,000.00	RFQ	Post (Sampling)		Q3 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Loan
G 30.6	Medical furniture for CSSD - DMH	48,648.64	RFQ	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract:

							No Covid-19 Response? Yes Comments: Loan
G 31	Medical furniture provincial hospitals	135,135.13	RFQ	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Loan
G 31.1.1	Medical/ Surgical Equipment and consumables to provincial hospitals	44,750.00	RFQ	Post (Sampling)		Q4 / 2020 Ongoing	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Loan
G 31.2	Pulse Oximeters	108,108.10	RFQ	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Loan
G 31.3	Multipara monitors (Basic and ICU)	108,108.10	LCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 Prequalification of Bidders: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? Yes Comments: Loan

G 32	PHC fund	1,500,000.00	RFQ			Ongoing	Grant
G 33	Equipment, Reagents and consumable for PCR Labs/ COVID-19 testing	3,800,000.00	Direct/LCB/RFQ	Post	1S1E	Q4 / 2020 Ongoing	Non-Consulting Services: No No. Of Contracts: Multiple Prequalification of Bidders: No Bidding Document: Goods High Risk Contract: No Covid-19 Response? Yes Comments: Ongoing, Loan
G 35	Procurement of Lab furniture for TH Karapitiya	16,250.00	RFQ	Post (Sampling)	1S1E	Q1 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? Yes Comments: Loan
G 36	Procurement of Lab Furniture for Expanded Virology Lab at NH Kandy	16,250.00	RFQ	Post (Sampling)	1S1E	Q1 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works

							High Risk Contract: No Covid-19 Response? Yes Comments: Loan
W-04P	Round 1 (5 PMCU/DH) Matale District	632,650.00	OCB	Prior	1S1E	Q2 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 5 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: Yes Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts.
	Lot 1: LOT A. Kalundawa	196,513.00					
	Lot 2: LOT B. Madawalupotha	41,562.00					
	Lot 3: LOT C. Paladeniya	193,897.00					
	Lot 4: LOT D. Kimbissa	177,129.00					
	Lot 5: LOT E. Galewela	23,549.00					
W-10P	Round 2 (10 PMCU/DH) Monaragala District	1,381,558.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National

							No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-11P	Round 2 (10 PMCU/DH) Badulla District	1,642,644.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-12P	Round 2 (10 PMCU/DH)	1,394,492.00	OCB	Post (Sampli	1S1E	Q4 / 2020	Non-Consulting Services: No

	Kandy District			ng)			Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-13P	Round 2 (10 PMCU/DH) Matale District	847,362.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is

							engaged
W-14P	Round 2 (10 PMCU/DH) Nuwara Eliya District	1,840,935.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-15P	Round 2 (10 PMCU/DH) Polonnaruwa District	1,799,000.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No

							Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-16P	Round 2 (10 PMCU/DH) Anuradhapura District	1,447,935.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-17P	Round 2 (10 PMCU/DH) Kegalle District	1,425,781.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Small Works High Risk Contract: No

							Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-18P	Round 2 (10 PMCU/DH) Ratnapura District	1,677,838.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-19P	Civil works related to healthcare waste management	350,000.00	RFQ	Post (Sampling)		Q1 / 2021	Non-Consulting Services: No No. Of Contracts: 1 Advance Contracting: No High Risk Contract: No Covid-19 Response? No Comments: To be clustered appropriately based on location, nature and cost of the work,

							etc.
W 20.1	Renovation of 11 Field Health Centers – Monaragala	382,834.65	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-20.1	Renovation of 11 Field Health Centers – Monaragala	382,834.65	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? Yes Comments: Package contains multiple lots and will be evaluated as multiple contracts. (for each FHC); After DSC firm is engaged; Q2 / 2020 advertisement

W 20.2	Renovation of 15 Field Health Centers – Badulla	522,047.25	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-20.2	Renovation of 15 Field Health Centers – Badulla	522,047.25	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? Yes Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W 20.3	Renovation of 18 Field Health Centers – Kandy	626,456.70	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National

							No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Small Works Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-20.3	Renovation of 18 Field Health Centers – Kandy	626,456.70	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? Yes Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W 20.4	Renovation of 10 Field Health Centers – Matale	348,031.50	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of

							Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-20.4	Renovation of 10 Field Health Centers – Matale	348,031.50	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? Yes Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W 20.5	Renovation of 17 Field Health Centers – Nuwara Eliya	591,653.55	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference

							Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-20.5	Renovation of 17 Field Health Centers – Nuwara Eliya	591,653.55	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? Yes Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W 20.6	Renovation of 7 Field Health Centers – Polonnaruwa	243,622.05	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works

							High Risk Contract: No Covid-19 Response? No Comments: ackage contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-20.6	Renovation of 7 Field Health Centers – Polonnaruwa	243,622.05	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Large Works High Risk Contract: No Covid-19 Response? Yes Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W 20.7	Renovation of 19 Field Health Centers – Anuradhapura	661,259.85	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works

							High Risk Contract: No Covid-19 Response? No Comments: ackage contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W 20.8	Renovation of 11 Field Health Centers – Kegalle	382,834.65	OCB	Post (Sampling)	1S1E	Q2 / 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W 20.9	Renovation of 19 Field Health Centers – Rathnapura	661,259.80	OCB	Post (Sampling)	1S1E	Q2/ 2021	Non-Consulting Services: No Advertising: National No. Of Contracts: 10 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? No

							Comments: Package contains multiple lots and will be evaluated as multiple contracts. After DSC firm is engaged
W-21.2P	improvements to buildings - Distance Learning Centers-Uva Province	17,250.00	RFQ	Post (Sampling)		Q1 / 2021	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? No Comments: W21 Package split in to 5 packages and eveluated as seperate 5 RFQ packages
W-21.3P	Improvements to buildings - Distance Learning Centers-Central Province	17,250.00	RFQ	Post (Sampling)		Q1 / 2021	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? No Comments: W21 Package split in to 5 packages and eveluated as seperate 5 RFQ packages
W-21.4P	Improvements to buildings - Distance Learning Centers-North Central Province	17,250.00	RFQ	Post (Sampling)		Q1 / 2021	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? No Comments: W21 Package split in to 5 packages and evaluated as seperate 5 RFQ packages
W-21.5P	Improvements to buildings - Distance Learning Centers-	17,250.00	RFQ	Post (Sampling)		Q1 / 2021	Non-Consulting Services: No No. Of Contracts: 1

	Sabaragamuwa Province						High Risk Contract: No Covid-19 Response? No Comments: W21 Package split in to 5 packages and evaluated as separate 5 RFQ packages
W-21.6	Improvements to buildings - Distance Learning Centers- (additional Works)	22,000.00	RFQ	Post (Sampling)		Q2 / 2021	Non-Consulting Services: No No. Of Contracts: 5 High Risk Contract: No Covid-19 Response? No Comments: W21 Package split in to 5 packages and evaluated as separate 5 RFQ packages
W 27.1	Construction of Gas and Oxygen storage room at BH Madirigiriya	8,140.00	RFQ	Post (Sampling)		Q2 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Grant
W 27.2	Medical Gas supply and Air distribution system to the ICU BH Madirigiriya	27,027.00	RFQ	Post (Sampling)		Q2 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Grant
W 29.1	Laboratory complex at NIID	1,250,000.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of

							Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: N Covid-19 Response? Yes Comments: Grant
W 29.2	Refurbishment of CSSD at DMH Variation	62,120.00 22,000.00	RFQ	Post (Sampling)		Q3 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Grant
W 29.3	Refurbishment of COVID-19 ward at TH Kurunegala	100,000.00	RFQ	Post (Sampling)		Q3 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Grant
W 29.4	Construction of Molecular Biology Lab for TH Karapitiya	162,000.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? Yes Comments: Grant

W 30	Refurbishment of isolation rooms at point of entries; Colombo, Galle, Hambantota, Trincomalee, Quaratine Suboffice MRI and isolation rooms at NIID.	748,011.00	OCB	Post (Sampling)	1S1E	Q4 / 2020	Non-Consulting Services: No Advertising: National No. Of Contracts: 6 Prequalification of Bidders: No Domestic Preference Applicable: No Bidding Document: Small Works High Risk Contract: No Covid-19 Response? Yes Comments: Grant
W 31	Establishment of Iodine Therapy Unit at TH Rathnapura	106,951.00	RFQ	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: Grant
W 32	Establishment of Iodine Therapy Unit at TH Anuradhapura	203,000.00	OCB	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Ye
W 33	Refurbishment of ICU at BH Kahawatta	65,000.00	RFQ	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes
W 34	Refurbishment of ICU at BH Karawanella	16,250.00	RFQ	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No

							Covid-19 Response? Yes
W 35	Refurbishment of COVID-19 ward at TH Batticaloa	60,000.00	RFQ	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes
W 36	Refurbishment Cold Room at MRI	65,000.00	RFQ	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes
W 37	Expansion of Virology Lab at NH Kandy	55,000.00	RFQ	Post (Sampling)		Q4 / 2020	Non-Consulting Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes

Consulting Services							
Package Number	**General Description**	**Estimated Value (in US$)**	**Selection Method**	**Review**	**Type of Proposal**	**Advertisement Date** (quarter/year)	**Comments**
S-03	Behavior Change Communication Marketing (firm)	770,000.00	QCBS	Prior	STP	Q4 / 2019	Non-Consulting Services: No Type: Firm Assignment: National Quality-Cost Ratio: 90:10 Advance Contracting: No Covid-19

							Response? No Comments: Time based; after interventions and cluster system
S-04	Design and develop health IT system for continuity of care	466,621.00	CQS	Prior	BTP	Q1 / 2020	Non-Consulting Services: No Type: Firm Assignment: National Advance Contracting: No Covid-19 Response? No Comments: Lump-sum EOI in progress
S-10	Financial Management Specialist	18,000.00	Competitive	Prior		Q1 / 2019	Non-Consulting Services: No Type: Individual Assignment: National Expertise: Financial Management Advance Contracting: No Covid-19 Response? No Comments: Time based
S-14	Review nutrition service and assist training in nutrition counselling for PHC staff	500,000.00	QCBS	Prior	STP	Q4 / 2019	Non-Consulting Services: No Type: Firm Assignment: National Quality-Cost Ratio: 90:10 Advance Contracting: No

							Covid-19 Response? No Comments: Time Based
S-18	External Evaluation of course content for DLC	30,000.00	Competitive	Prior		Q3 / 2023	Non-Consulting Services: No Type: Individual Assignment: international Expertise: Distance Learning Covid-19 Response? No Comments: Lump sum; Q3 / 2023 advertisement

C. List of GOSL Funded Packages (Contracts) Required Under the Project

The following table lists goods, works and consulting services contracts for which funded by the Government of Sri Lanka as per the agreement;

Goods, Works and Consultancies

Package Number	General Description	Estimated Value (in US$)	Procurement Method	Review	Advertisement Date	Comments
G 3.3	Furniture for PMU	3,000.00	RFQ	Post	Q4/2019	Advertising: National No. Of Contracts: 3 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods Comments: New requirements for the function and to meet day to day activities at PMU
G 10	Procurement of Furniture for 45 facilities	0.16	OCB	Post	Q3/2020	Advertising: National No. Of Contracts:

						Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods
G 11	Procurement of Medical Furniture for 45 facilities	0.3	OCB	Post	Q3/2020	Advertising: National No. Of Contracts: Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods
G 17	Furniture for healthcare waste management	100,000.00	RFQ	Post	Q3/2020	Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods
G 20	Procurement of furniture for DLC	0.03	RFQ	Post	Q3/2020	Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods
G 21	Procurement of Furniture for 90 facilities	0.33	OCB	Post	Q3/2021	Advertising: National No. Of Contracts: 1

						Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods
G 22	Procurement of Medical Furniture for 90 facilities	0.61	OCB	Post	Q3/2021	Advertising: National No. Of Contracts: 1 Prequalification of Bidders: No Domestic Preference Applicable: No Advance Contracting: No Bidding Document: Goods
G37	Procurement of necessary equipment, furniture for isolation rooms at fort of entries (Office, Medical furniture and equipment)	13,369.00	RFQ	Post (Sampling)	Q4 / 2020	Services: No No. Of Contracts: 1 High Risk Contract: No Covid-19 Response? Yes Comments: GOSL
S-20	Design and Supervision for civil works of DLC at NIHS and satellite centers	12,500.00	Direct Contract	Post	Q4/2019	No. Of Contracts: 1
S-21	Design and Supervision for IT solution of DLC at NIHS and satellite centers	25,000.00	Direct Contract	Post	Q4/2019	No. Of Contracts: 1

D. List of Indicative Packages (Contracts) Required Under the Project

The following table lists goods, works, non-consulting and consulting services contracts for which procurement activity is expected to commence beyond the procurement plan duration and over the life of the project (i.e., those expected beyond the current procurement plan duration).

Goods and Works						
Package Number	**General Description**	**Estimated Value (in US$)**	**Procurement Method**	**Review**	**Bidding Procedure**	**Comments**
G-15	Procurement of 4 servers for Epidemiology Unit	20,000.00	RFQ	Post (Sampling)		Non-Consulting Services: No No. Of Contracts: 1 Covid-19 Response? Yes

						Comments: Q1, 2021 after assessment and after S9 (IT specialist for epidemiology unit) is engaged
W-25	Refurbishment of PIU Office space and Interior Works - Uva Province	8,000.00	RFQ	Post (Sampling)		Non-Consulting Services: No No. Of Contracts: 1 Covid-19 Response? Yes Comments: New Requirement. To have a better working environment for PIU Staff.
W-26	Refurbishment of PIU – Sabaragamuwa Province	8,000.00	RFQ	Post (Sampling)		Non-Consulting Services: No No. Of Contracts: 1 Covid-19 Response? Yes Comments: New Requirement. To have a better working environment for PIU Staff.
G 38	Printing and translation	0.1	RFQ	Post		No. Of Contracts: 10 Comment: printing will be carries out as required

E. List of Awarded and Completed Contracts

The following table lists the awarded and completed contracts for goods, works, non-consulting and consulting services.

Goods and Works					
Package Number	**General Description**	**Contract Value**	**Date of ADB Approval of Contract Award**	**Date of Completion**	**Comments**
G-02	Procurement of Office Equipment for PMU and PIUs	USD 65,479.83	12-APR-19		John Keels Office Automation Pvt. Ltd.
		LKR 110,200.00	7-AUG-19		
		LKR 11,825.00	7-AUG-19		Solutioncity (Pvt) Ltd
		LKR 995,000.00	7-AUG-19		Singer (Sri Lanka) PLC

					Sri Lanka state Trading (General) Corporation Ltd
G-02.1	Procurement of Office Equipment for PMU and PIUs - Air Conditioners for PMU	2,600.00	21-MAY-19		Abans PLC
G-02.2	Procurement of Office Equipment for PMU & PIUs Refrigerator, etc for PMU	883.00 LKR 85,000.00 LKR 78,252.17	 25-Jun-19 25-Jun-19		 Softlogic Retail (Pvt) ltd D.R. Industries (Pvt) Ltd
G-04.1	Biochemistry Analyzer - Semi Automated for Apex Hospitals	8,594.59	PO date 06/04/2020		**Sunshine Healthcare Lanka Ltd**
G 4.2	Coagulation and Hematology Analyzers for Apex Hospitals Hematology Analyzer Five part and Three Part Coagulation Analyzer	 31,891.89 18,810.81	 PO date 18/11/2020 PO date 18/11/2020		 **Biomedica (Pvt) Ltd** **Maingate (Pvt) Ltd**
G-04.3P	Incubators and Hot Air Oven for Apex Hospitals	24,976.00	04-JUL-20		Analytical Instruments (Pvt) Ltd
G-04.4P	Autoclaves for Apex Hospitals	36,000.00	04-JUL-20		Nova Biomedical System (Pvt)Ltd
G-04.5P	Binocular Microscope for Apex Hospitals	34,054.05	04-APR-20		Delmege Forsyth & Co Ltd
G-04.5.1P	Binocular Microscope for Apex Hospitals	1,724.27	12/03/2020		Delmege Forsyth & Co Ltd
G-04.6P	Centrifuges for Apex Hospitals	96,000.00	09-APR-20		Delmege Forsyth & Co Ltd
G-4.7	Procurement of Physiotherapy Equipment for Apex Hospital	52,056.76	PO date 20 /12/2019		Delmege Forsyth & Co Ltd
G-05.1	Procurement of Length board & beam infant scale	 11,156.76 20,695.52	PO 26/08/2020 PO 26/08/2020		Electroscales and Equipment SAF International (Pvt) Ltd
G-05.2	Height Rod (wall mounted height measuring tape),	13,645.95	PO 26/08/2020		Electroscales and Equipment

	Standard weight set & Spring balance	18,871.89	PO 26/08/2020		SAF International (Pvt) Ltd
G-05.3	Procurement of Forceps jar 27 cm, Rectangular tray with lid - 35x25x6 cm,Cusco's bivalve specula - medium - 90x35 cm, Sponge holders 24 cm & Vulsellum forceps 25 cm curved	2,009.73 31,143.59 8,866.00	PO 26/08/2020 PO 26/08/2020 PO 26/08/2020		M G Medicals (Pvt)Ltd Shield Medical (Pvt) Ltd Tycon Lanka (Pvt) Ltd
G-05.4	Procurement of Medical Equipment for Reproductive Health and Nutrition - Uterine sounds 32 cm, Scissors - 14.5 cm blunt/sharp curved, Long artery forceps - for IUD removal - 20 cm, Kidney trays - large - 825 ml,	3,818.95 7,567.58 11,487.83 5,743.25 10,119.11 1,391.36	PO 26/08/2020 PO 26/08/2020 PO 26/08/2020 PO 26/08/2020 PO 26/08/2020 PO 26/08/2020		Best Chem Company and Online Pharmacy Biomed International (Pvt) Ltd Kish International (Pvt) Ltd **M G Medicals (Pvt) Ltd.** **Shield Medical (Pvt) Ltd.** **Tycon Lanka (Pvt) Ltd**
G-07	Procurement of Medical Equipment for NCDs	23,619.32	08-NOV-19		Biomed International (Pvt) Ltd **Technomedics Intonational (Pvt) Ltd.** **Medex Holdings (Pvt) Ltd.**
G-07.1	Procurement of Medical Equipment for NCDs	3441.08	13/03/2020		**Technomedics Intonational (Pvt) Ltd.**
G-08.1	Procurement of ETU Equipment-ECG machines (also for Apex)	57,095.95	PO date 31/0/2020		M G Medicals (Pvt) Ltd
G-08.2	Procurement of ETU Equipment- Lot 1 - Spot Lamp	44,324.00	PO date 14/9/2020		Technomedics International (Pvt) Ltd

G-08.3	Procurement of ETU Equipment-Portable Ventilator (in Apex hospital)	42,432.43	Po date 03-APR-20		Mervynsons (Pvt)Ltd
G-08.4	Procurement of ETU Equipment-Suction Apparatus	42,567.57	06-APR-20		**Medex Holdings (Pvt) Ltd.**
G-9	Procurement of Office furniture for Quarantine Unit	6,114.65 4,352.77			Alpha Industries (Pvt) Ltd **Richard Pieris Distributors Limited.**
G-12.1	Procurement of Computers and Peripherals for GIS	19,167.57 24,596.00	PO date 02-AUG-19		John Keells Office Automation (Pvt) Ltd Metropolitan Computers (Pvt) Ltd.
G 14	Procurement of Computers for Quarantine Unit	4,896.22 14562.17 1090.55 648.65 45.95 3080.00	PO date 31/07/2020 and 21/10/2019 PO date 31/07/2020 and 21/10/2019 PO date 21/10/2019 PO date 21/10/2019 PO date 21/10/2019 PO date 21/10/2019		John Keells Office Automation (Pvt) Ltd. Softlogic Information Technologies (Pvt) Ltd. Base HP Debug Computer Peripherals (Pvt) Ltd Gestetner of Ceylon Plc
G 14. 1	Personal Protective Equipment with boots for Quarantine Unit	2684.30	PO date 10/03/2020		**Shield Medical (Pvt)Ltd.**
G 14. 2	Personal Protective Equipment with boots for Quarantine Unit	25,540.55 3450.00	PO date 18/03/2020 PO date 18/03/2020		**M.D Centiimos** **Shield Medical (Pvt)Ltd.**
	Contract 1: Television and Microwave Oven	100.00	02-JAN-19	01-JAN-20	
	Contract 2: Refrigerator	100.00	02-JAN-19	01-JAN-20	
G 25.1	Nanopore Sequencer Including all accessories and special training, Special Training Auto Clave, Real Time PCR Machine, Biosafety	55,124.34 21,081.08	PO date 02/04/2020 PO date 02/04/2020		**Avon Pharmo Chem (Pvt)Ltd.**

	cabinet Class 1(BSL2), Densitometer/Turbidity Meter	11,383.79	PO date 02/04/2020		**IMS Holdings (Pvt) Ltd.** **Microtech Biological (Pvt)Ltd.**
G 25.4	Procurement of Medical Equipment of Video laryngoscope GH Kalutara/CSTH	8,756.76	PO date 26/08/2020		**Nextgen Healthcare (Pvt) Ltd**
G 26.2	Procurement of CRRT machines, DVT pumps, Defibrillators with face mask,	41,621.63 9,729.73 8,922.70	PO date 03/06/2020 PO date 03/06/2020 PO date 03/06/2020		**Diligence Healthcare (Pvt) Ltd.** **Meditechnology Holdings (Pvt) Ltd.** **Surgicare (Pvt) Ltd.**
G 26.5	Procurement of Portable Ultrasound Scanner 2	2,6486.49	PO date 03/06/2020		**Biomed International (Pvt) Ltd.**
G 26.6	Procurement Mobile X Ray Machines 2	49,081.08	PO date 03/06/2020		**Hayleys Life Sciences (Pvt) Ltd.**
G 26.7	Procurement of ABG blood Gas analyzer, Pharmaceutical Refrigerators	24,324.33 4,540.54	PO date 03/06/2020 PO date 03/06/2020		**Critical Care (Pvt) Ltd.** **Nova Biomedical Systems Pvt. Ltd**
G 26.8	Procurement of Bed head tables, Bed side lockers, Crash cart/ Emergency trolly, Oxygen cart	4,536.14	PO date 03/06/2020		**SAF International (Pvt) Ltd.**
G 26.9	Procurement of Mapleson C circuits, Pediatric Circuits, Laryngoscope adult and pediatric, Ambu Bag, Forced air patient warmers	2,594.14 8,878.11 1,1038.65	PO date 03/06/2020 PO date 03/06/2020 PO date 03/06/2020		**M D Centimos (Pvt) Ltd.** **Mervynsons (Pvt) Ltd.** **Technomedics International (Pvt) Ltd.**
G 26.10	Central Air Condition System Thambuttegama	25,102.70	PO date 02/06/2020		**Southern Airducts (Pvt) Ltd.**
G 27.1.	**Uva Province**	**24,014.00**			
	Infra-red thermometers	8,918.91			

	Surgical Face masks	8,648.64			
	N95 masks	2,432.43			
	Shoe covers	124.32			
	Haircaps	52.70			
	OT gowns	2,162.16			
	Nebulizer masks	161.08			
	Goggles	1,513.51			
G 27.2	**Central Province** (ECG machine -2, Multipara Monitors – 4, Pulse Oximeter- 3)	**6,905.00**			
G27.3	**North Central Province**	**25,224.00**			
G27.3.1	Gum Boots	481.28			
G27.3.2	Goggles	176.47			
G27.3.3	Dust Bin	1,417.11			
G27.3.4	Raw Material for Surgical Gown	1,885.03			
G27.3.5	Ac-18000btu	1,060.95			
	Ac-24000btu	665.24			
G27.3.6	Elbow Taps	2,773.80			
G27.3.7	Stand fans	2,326.20			
G27.3.8	Sealer Machine	577.54			
G27.3.9	Knaspack Power sprayer	343.06			
G27.3.10	IR Thermometers	4,518.72			
G27.3.11	Cover qll	1,443.85			
	N95 Mask	106.95			
G27.3.12	Kn 95 Mask	3,208.56			
G27.3.13	Knaspack Power sprayer	160.43			
G27.3.14	2000L Water Tank	572.19			
G27.3.15	1"Water Pump	256.68			
G27.3.16	Air Conditioner-24000 btu	204.28			
	Air Conditioner-18000 btu	1,411.20			
G27.3.17	Electric Pressure Pump	1,120.92			
G27.3.18	Halogen Lamp	235.08			

	Mega Horn	278.07			
G27.4	**Sbaragamuwa Proince**	14,219.00			
G 27.4.6	Purchase of Infrared Thermometer 50 Nos	5,270.00			
G 27.4.7	Purchase of N 95 Mask 220 Nos.	1,486.48			
G 27.4.1	Purchase of Surgical Face Mask 4930 Nos.	1,732.16			
G 27.4.2	Purchase of Coverall Gown 500 Nos	5,729.72			
	Portable PA system				
	Public address system				
G 28	Pharmaceutical refrigerators 2, chest freezer 1	35,541.00	PO date 05/05/2020		**Maraki Medical Technologies (Pvt)Ltd**
G 28.1	Total solution for PCR Lab with equipment	1,108,794.18			
G 28.2	Domestic refrigerator	460.00	PO date 21/04/2020		**Softlogic Retail (Pvt) Ltd.**
G 28.3	Generator 60KVA with Generator House	16,106.00	PO date 15/05/2020		**Trade Promoters (Pvt) Ltd.**
G 28.4	PCR Laboratory - Desktop Computer and Black and White Printer	120.41 5,134.44	PO date 11/05/2020 PO date 11/05/2020		**Metropolitan Computers (Pvt) Ltd.** **Softlogic Information Technologies (Pvt)Ltd.**
G 28.5	PCR Laboratory Furniture with reinforcement	11,899.00	PO date 13/05/2020 and 13/06/2020		**Grip Delmege (Pvt) Ltd.**
G 28.6	Procurement of PPEs - LRH, FHB, CEBH (Goggles, Hand Sanitizers individual, Hand Sanitizers bulk, Surgical mask, Head caps, Face shields, Aseptic	72,400.00	PO date 13/06/2020		**International Cosmatics (Pvt) Ltd.** **MD Centiimos.** **Sisili Projects Consortium (Pvt)Ltd.** **Supper Colloids Lanka (Pvt) Ltd.**

G 28.7	Networking of PCR Lab	1,135.00	Po date 21/05/2020		Lanka Com (Pvt) Ltd.
G 28.8	UPS for PCR Lab equipment	1,765.00	Po date 17/06/2020		**Super Neat Technology (Pvt) Ltd.**
G 28.11	Sample reparation table	573.00	PO date 13/08/2020		**Grip Delmege (Pvt) Ltd**
G 29	Real time PCR Machines 5	99,730.00	PO date 13/07/2020		**IMS Holdings (Pvt) Ltd.**
G 29.1	Auto Nucleic Acid Extraction Machine 5	137,838.00	PO date 13/07/2020		**Avon Pharmo Chem (Pvt) Ltd**
G 29.2	Safety Cabinet (BSL2)- Vortex - 15, PCR hoods / Work Station -10	64,173.00	PO date 13/07/2020 PO date 13/07/2020		**Micro Tech Biological.** **P and T Trading (Pvt) Ltd.**
G 29.4	Cold boxes, Pharmaceutical Refrigerator, -20 C Freezers	73,030.00	PO date 31/07/2020 PO date 31/07/2020 PO date 31/07/2020		**Avon Pharmo Chem (Pvt) Ltd.** **Biomedica (Pvt) Ltd.** **Meraki Medical Technologies (Pvt) Ltd.**
G 29.5	Heat block, Thermo mixer, Mini Spinner, Digital thermo meters	38,363.00	PO date 14/09/2020		**Analytical Instruments (Pvt) Ltd.** **Avon Pharmo Chem (Pvt) Ltd.** **Microtech Biological (Pvt) Ltd.**
G 29.7	-20 Freezers for MSD, MRI and CEBH	47,973.00	PO date 31/07/2020		**Meraki Medical Technologies (Pvt) Ltd.**
G 30.1	Material for reusable gown with hood	12,703.51			
G 30.2	Tailoring for reusable gown with hood	4,662.16			

G 30.3	Extension of Medical Gas supply to ICU GH Kalutara	8,486.00			
G 30.4	MSD reimbursement of Covid 19 related expenditure	3,661,887.15			
G 31.1	Medical/ Surgical Equipment and consumables to provincial hospitals	9,305.00	PO date 19/10/2020 PO date 19/10/2020		**IMS Holdings (Pvt) Ltd.** **Mervynsons (Pvt) Ltd.**
W-05	Round 1 (4 PMCU/DH) Nuwara Eliya District	85,237,942.23			
	Lot 1: Kotagala	12,871,164.51	20-Aug-19		
	Lot 2: Laxapana	21,146,819.02	20-Aug-19		
	Lot 3: Nanuoya	30,968,752.65	20-Aug-19		
	Lot 4: Punadaluoya	20,251,206.05	20-Aug-19		
W-06	Round 1 (4 PMCU/DH) Polonnaruwa District	74,485,952.38			
	Lot 1: Ellawewa	20,926,641.53	15-Jul-19		
	Lot 2: Sevanapitiya	16,005,252.01	29-JAN-20		
	Lot 3: Damminna	19,138,714.84	15-Jul-19		
	Lot 4: Ambagawewa	18,415,344.00	15-Jul-19		
W-07	Round 1 (5 PMCU/DH) Anuradhapura District	156,962,564.90			
	Lot 1: Horowpathana	47,721,845.30	15-Aug-19		
	Lot 2: Galenbindunuwewa	20,888,946.50	09-JAN-20		
	Lot 3: Negampaha	25,429,183.50	15-Aug-19		
	Lot 4: Konwewa	26,821,824.00	29-Aug-19		
	Lot 5: Tittagonawa	36,100,765.60	29-Aug-19		

W-02	Round 1 (5 PMCU/DH) Badulla District	145,430,975.83			
	Lot 1: Megahakiula	22,898,511.30	29-Jul-19		
	Lot 2: Ettampitiya	36,735,680.15	11-JAN-20		
	Lot 3: Haldummulla	27,750,283.96	06-JAN-20		
	Lot 4: Kandeketiya	33,109,954.63	06-JAN-20		
	Lot 5: Koslanda	24,936,545.79	06-JAN-20		
W-03	Round 1 (5 PMCU/DH) Kandy District	151,881,121.60			
	Lot 1: Hatharaliyadda	31,741,606.80	21-Aug-19		
	Lot 2: Madulkale	45,619,353.00	21-Aug-19		
	Lot 3: Dolosbage	38,109,422.75	21-Aug-19		
	Lot 4: Galaha	19,688,051.05	21-Aug-19		
	Lot 5: Deltota	16,722,688.00	21-Aug-19		
W-08	Round 1 (5 PMCU/DH) Kegalle District	108,098,814.51			
	Lot 1: Bolgama PMCU	19,065,723.50	21-Aug-19		
	Lot 2: Hewadiwela PMCU	17,639,349.85	21-Aug-19		
	Lot 3: Minuwangamuwa PMCU	23,544,110.65	21-Aug-19		
	Lot 4: Aranayaka DH	27,010,220.90	21-Aug-19		
	Lot 5: Uyanwatta PMCU	20,839,409.61	21-Aug-19		
W-01	Round 1 (5 PMCU/DH) Monaragala District	110,061,291.81			
	Lot 1: Dombagahawela PMCU	20,160,000.00	12-Aug-19		

	Lot 2: Daliva PMCU	19,845,000.00	12-Aug-19		
	Lot 3: Dambagalla DH	20,504,827.71	21-Aug-19		
	Lot 4: Thanamalwila DH	25,139,451.26	21-Aug-19		
	Lot 5: Hambegamuwa PMCU	24,412,012.84	06-JAN-20		
W-09	Round 1 (5 PMCU/DH) Ratnapura District	113,212,213.72			
	Lot 1: Delwela PMCU	19,633,711.05	10-Mar-20		
	Lot 2: Dodampe PMCU	27,501,853.98	21-Aug-19		
	Lot 3: Narissa PMCU	26,308,472.79	10-Mar-20		
	Lot 4: Endane DH	18,728,060.72	21-Aug-19		
	Lot 5: Ranwela DH	21,040,115.18	10-Mar-20		
W-21.1P	Improvements to buildings - Distance Learning Centers-NIHS Kaluthara	28,489.00	27-Aug-20		Oveska Engineering and Construction
W-24	Refurbishment of PIU Office space and Interior Works - North Central Province	5,822.00	01-JAN-20		
W-22	Refurbishment of PMU Office space and Interior Works	28,067.00	01-JAN-20		
W-23	Refurbishment of PIU Office space and Interior Works – Central Province				
W 28	Construction of PCR lab at Colombo East Base Hospital	74,881.00	24-Apr-20		LHP Eco Centre (Pvt) Ltd
W 28.1	Construction of Office complex for PCR Lab	32,600.00	07-Oct-20		LHP Eco Centre (Pvt) Ltd
W 29	Refurbishment of ICU GH Kalutara	19,799.00	11-Nov-20		Southern Construction

Consulting Services					
Package Number	**General Description**	**Contract Value**	**Date of ADB Approval of Contract Award**	**Date of Completion**	**Comments**
S-01	Design and	1,831,142.00	24-SEP-19	21-NOV-19	Resource Development

	supervision consultancy for infrastructure development				Consultant
S-06	Develop PHC HRH plan for cluster work force plan (national)	19,440.00	25-NOV-19	01-DEC-19	Dr. Herath Denuwara
S-07	Support establishment and implementation of clusters	19,440.00	25-NOV-19	01-DEC-19	Dr. Neelamani Hewageegana
S-05	Support operationalizatio n of ESP	19,440.00	25-NOV-19	01-DEC-19	Dr. Sarath Amunugama
S-16	Health Communications Expert	26,628.57	13-JAN-20	13-NOV-20	Dr. Pradeep Weerasingha
S-02	Monitoring and Evaluation Firm (baseline and endline)	538,000.00	25-SEP-19		Sri Lanka Business Development Consultant
S-08	GIS-based planning and monitoring (national)	100.00	01-SEP-20		Mr. Malika Priyanga
S-11	Environment Specialist	51,810.00	25-SEP-19		Mr. Jagath Manatunge was awarded with the contract
S-15	Health Care Waste Management Specialist	33,886.00	05-OCT-19		Ms. H.M.L.C. Jayawardana was awarded with the contract
S-12.1	Project Implementation Impact on Gender	12,350.00	29-Sep-20		Dr. Lakshmen Senanayake
S-12.2	Social Safeguard Specialist	9,211.00	07-Aug-20		Mr. Kiribandage Jinapala
S-17	Development of Distance Education Portal	9,460.00	28-May-20		Dr. Indika Mahesh Karunathilake
S-19	Legal expert for quarantine unit	11,420.00	28-May-20		Mr. Chanakya Jayadeva

Appendix 2 – Design and Monitoring Frame work

DESIGN AND MONITORING FRAMEWORK- 31st December 2020

Impact(s) the Project is Aligned with: A healthier nation is ensured with a more comprehensive PHC system (National Health Policy, 2016–2025)

Results Chain	**Performance Indicators with Targets and Baselines**	**Data Sources and Reporting**	**Progress/Status**
Outcome Efficiency, equity, and responsiveness of the PHC system improved	By 2024, a. Outpatient utilization (for each female and male) at PHC facilities (PMCUs and district hospitals) (disaggregated by age, sex, place of residence, district, and province) increased by at least 20% (2015 baseline: 62% for both sexes [sex-disaggregated data to be collected in baseline survey]) (2015 baseline: 62)	a. Annual health bulletins published by MOHNIM (data for the target provinces and districts) and baseline and end line surveys (disaggregated data)	Based on the Annual Health Bulletin published by the MoH,2018 = 63.10[7] Kandy 62.09 Matale 63.40 Nuwara Eliya 52.82 Anuradapura 79.10 Polonnaruwa 59.85 Badulla 68.82 Monaragala 62.76 Ratnapura 62.57 Kegalle 56.49 M&E firm has been commenced work for baseline survey
	By 2024, b. Patients reporting knowledge of and satisfaction with PHC services (disaggregated by age, sex, district) increased to at least 20% (disaggregated by age, sex, district) (2018 baseline: 0)	b. Baseline and end line surveys	M&E firm has been commenced work for baseline survey
	By 2024, c. Notifiable diseases notified to the medical officers of health offices, within the stipulated time, in the target provinces increased to at least 90% (2018 baseline: 0) (2018 baseline: 27.5)	c. Routine data from a 25% sample of medical officers of health in provinces Primary Care Unit, MOHNIM, and PDHS reports; health facility registers	When baseline data available correct percentage of notifiable has to be corrected. M&E firm has been commenced work for baseline survey
	By 2024, d. Cluster system reform implemented and evaluated in all nine	d. Evaluation report at end of project	M&E firm has been commenced work for baseline survey and evaluation of the clusters

[7] Annual Health bulletin will not disaggregate data by Age, Sex and Place of residence.

Results Chain	Performance Indicators with Targets and Baselines	Data Sources and Reporting	Progress/Status
	clusters (2018 baseline: NA) (2018 baseline: 0)		
Risks			
Changing health-seeking behavior take longer beyond project implementation			

Problems with Outcome		
1. Unavailability of proper referral system		
Problem(s)	**Action Taken/Proposed**	**Date**
1. Unavailability of proper referral system	National referral system has to be designed. A referral formats designed are to be pilot.	

Outputs
1. Primary health care enhanced in Central, North Central, Sabaragamuwa, and Uva provinces 2. Health information and disease surveillance capacity strengthened 3.Policy development, capacity building, and project management supported

Problems with Outputs		
1. Time taken to complete remaining first round civil work and rebidding		
Problem(s)	**Action Taken/Proposed**	**Date**
1. Time taken to complete remaining first round civil works.	PIU Engineers and D&S team closely working with provinces to expedite the process.	Round two civil works at 4 provinces (45 facilities) scheduled to be awarded 1st April 2021
2. Global Covid 19 situation impact on the country	PMU has taken measures to expedite the procurement and civil works in coordination with Provincial Councils and D&S firm.	

PERFORMANCE OUTPUT DETAILS

Output 1
Primary health care enhanced in Central, North Central, Sabaragamuwa, and Uva provinces
Recent Development towards Achieving Output 1
Civil works have been started to improve 38 health facilities and 7 facilities completed. Out of 90 facilities 23 advertised in round two civil works

Project Specific Indicators	Unit of Measure ment	Target Year	Target Value	Cumulativ e Achieve-ments	Progress/Status
					First round civil works in progress,

By 2023, PMCUs and district hospitals in target provinces upgraded and renovated with gender-responsive designs reached at least 30% (2018 baseline: 0)	Percent	2023	30	N	38 contracts were awarded 8 completed. 5 Contracts in rebidding process Matale – 5 contracts to be awarded before 30th March 2021 **Civil works round 2** D&S consultants have started design for 90 facilities in 9 districts.23 facilities advertised.
By 2023, gender-responsive and inclusive essential service package for outpatient and clinic services provided by at least 75% of PHC facilities in target provinces (2018 baseline: 0)	Percent	2023	75	N	Finalizing the equipment for ESP (Phase one) completed. Gender specialist working with Nutrition firm going to be recruit soon.
By 2023, gender-responsive and inclusive nutrition services provided by at least 75% of MOHs facilities (2018 baseline: 0)	Percent	2023	75	N	Procurement process of Provision of support for community empowerment and capacity building for improving the nutrition status of Mothers and children under 5 years in 9 districts firm in progress, will be completed by 1st February 2021. Gender specialist working with BCCM firm going to be recruit soon.
By 1 July 2020, a gender-sensitive behavior change communication plan is initiated by all target provinces (2018 baseline: NA)	Value	2020	0	N	Gender specialist has been appointed and commenced work. Procurement process of Behavior change and community mobilization for increasing primary health care utilization firm in progress, will be completed before 30th March 2021
Risks					
Delay in approval and implementation of national policy and management reforms					

No.	Activities	Target Completion Date	Completed	Progress/Status
1	Develop physical infrastructure in selected PMCUs and district hospitals (first round completed by	Q4 2021	On going	First round civil works in progress. Contract awarded for 38 facilities and 5 contracts will be award Q2 2021. Two out of 45 selected for Round 1 dropped due to very special reasons.

	Q4 2021)			1. Monaragala – 5 contracts awarded, 2 completed 2. Badulla – 5 contracts awarded 3. Kandy – 5 contracts awarded, one completed 4. Matale – All contracts are in rebidding. 5. Nuwara Eliya – 5 contracts awarded 6. Anuradapura – 5 contracts awarded, one completed 7. Polonnaruwa - 4 contracts awarded 8. Ratnapura – 5 contracts awarded 2 completed 9. Kegalle – 5 contracts awarded 2 completed
2	Complete physical infrastructure designs for all facilities (Q4 2019)	Q4 2019		Design for all remaining civil works will be completed on 30th March 2021.
3	Provide medical equipment to PMCUs and district hospitals and apex hospitals (first round completed by Q4 2019)	Q4 2019	On going	G -04 - Laboratory, Physiotherapy and X-ray Equipment for Apex Hospital – 7 packagers completed G -05 - Medical Equipment for Reproductive Health and Nutrition – 4 packagers completed G -06 - Dental Equipment – Procurement is in progress G -07 -NCD equipment completed G -08 -ETU equipment -4 packagers completed
4	Develop physical infrastructure in selected field health centers (Q4 2021)	Q4 2021		List of 127 field health centers has been identified. Refurbishment of the field health centers will be initiated by design and supervision consultancy firm by January 2021
5	Provide (replace) vehicles for PHC services (completed by Q2 2019)	Q2 2019	Q2 2020	PO issued for 38 double cabs and 13 Vans. Remaining procurement of 7 double cabs and 4 lorries will be awarded before 30th March 2021
6	Finalize the communications strategy and terms of reference for the behavior change communication marketing firm (Q2 2019)	Q2 2019	Completed	Awaiting request proposal from selected firms.
7	Award at least one innovative project by cluster via the PHC innovation fund (Q4 2019)	Q4 2019	Q4 2020	Approval granted for 29 proposals by the Project Steering Committee to proceed with planned activities. Monaragala= 11 proposals Badulla = 3 proposals Nuwara Eliya= 3 proposals Kandy = 2 proposals Mathale = 4 proposals

				Anuradapura = 1 proposal Polonnaruwa = 1 proposal Rathnapura = 3 proposals Kegalle = 1 proposal

Output 2
Health information and disease surveillance capacity strengthened
Recent Development towards Achieving Output 2
Consensus arrived with all stakeholders about the designing of the IT system and awaiting concurrence from ADB for selected firm

Project Specific Indicators	Unit of Measurement	Target Year	Target Value	Cumulative Achievements	Progress/Status
By 2023, electronic patient information sharing system across cluster facilities used by at least 25% of PMCUs and district hospitals and medical officers of health areas in all target provinces (2018 baseline: 0)	Percent	2023	25	N	Consultancy firm in final approval stage
By 2023, notifiable disease surveillance information via an electronic system sent to medical officers of health areas by at least 25% of PMCUs and district hospitals in target provinces (2018 baseline: 0)	Percent	2023	25	N	Consultancy firm in final approval stage
Core capacities to carry out quarantine services with a score of at least 4, in joint external evaluation report 2021 increase in the eight ports of entry in Sri Lanka (2017 baseline score in joint external evaluation report 2017: 3)	Number	2021	4		Has postponed 2021 for re need assessment.
2d. By December 2020, capacity to screen and diagnose covid-19 diseases (infectious diseases) increased by 90% from the baseline (Baseline 2020 April 4000)	Number	2020			As of 31th December 2020, Cumulative number of testing 1,299,336, number of confirmed cases 45,242 Death 215. Number of PCR Laboratories – 24(4 Private laboratories and 20 Government laboratories)

Risks
Delay in approval and implementation of national policy and management reforms

No.	Activities	Target Completion Date	Completed	Progress/Status
1	Finalize the rollout plan to introduce the health information system to nine cluster hospitals (Q1 2020)	Q1 2020		Firm will be on board from 1st February 2021
2	Establish GIS units in provinces and districts (Q4 2019)	Q4 2019		GIS unit established
3	Purchase computers and peripherals for clusters (Q2 2020)	Q2 2020		Evaluation/revisit of the hardware requirement has to be done by the IT firm which is going to be procured by February 2021.
4	Provide the equipment and vehicles for POEs (Q2 2019)	Q2 2019		Equipment and Computers provided. Procurement of Vehicles – PO issued for 38 double cabs and 13 vans
5	Complete first round of training for quarantine teams (Q4 2019)	Q4 2019		The review is QHRMIS -Q1 2021
6	Engage an individual consultant to carry out an IHR-related legal review (Q2 2019)	Q2 2019		Review ongoing
7	Procurement of essential medical equipment and consumables to combat covid-19 pandemic			46 procurement packagers completed and 27 procurements packagers is in progress
8	Establishment of PCR lab at Mulleriyawa Base Hospital, Colombo East			Completed
9	Establishment of molecular biology lab at national infectious disease hospital (IDH), Colombo			Bids are under evaluation
10	Renovation and refurbishment of isolation facilities at ports of entries at Colombo and Trincomalee			Bids are under evaluation

Output 3
Policy development, capacity building, and project management supported
Recent Development towards Achieving Output 3
Establishment of GIS units have been completed

Project Specific Indicators	Unit of Measurement	Target Year	Target Value	Cumulative Achievements	Progress/Status
By 2023, operational polices and guidelines with gender dimensions are developed for (i) delivering a comprehensive package of PHC (incorporating the essential service package); (ii) management and functioning of cluster hospitals; and (iii) GIS-based planning and monitoring in health sector (2018 baseline: NA)	Y/N	2023	Y	N	Recruitment of consultancies have been completed and working closely with programme. Gender specialist has started the work
By 2020, 11 units of FHB have integrated gender dimensions into all of their policies and strategic plans	Value	2020	11	N	Gender specialist has started the work. Preparation of need assessment is in progress
By 2023, at least 25% of medical officers and other staff of PMCUs and divisional hospitals (of which 35% are women) in target provinces are trained in PHC (family medicine) (2018 baseline: 0)	Percent	2023	25	N	Training and objectives are being finalized and trainings will be started after the current Covid 19 situation.
By 2023, at least 25% of PHC staff from PMCUs, divisional hospitals, and medical officer of health areas (of whom 35% are women) in the target provinces are trained in gender sensitivity, and gender related policies and interventions (2018 baseline: 0)					Training and objectives are being finalized and trainings will be started after the current Covid 19 situation.

Risks	Assessment of Current Status
Delay in approval and implementation of national policy and management reforms	

No.	Activities	Target Completion Date	Completed	Progress/Status
1	Hire consultant (local) to support policy development for essential service package implementation (Q1 2019)	Q1 2019	Completed	Engaged since 1st December 2019
2	Hire consultant (local) to support policy development for cluster hospital reforms (Q1 2019)	Q1 2019	Completed	Engaged since 1st December 2019
3	Develop PHC HRH plan for cluster work force	Q3 2019	Completed	Engaged since 1st December 2019
	Develop the physical			

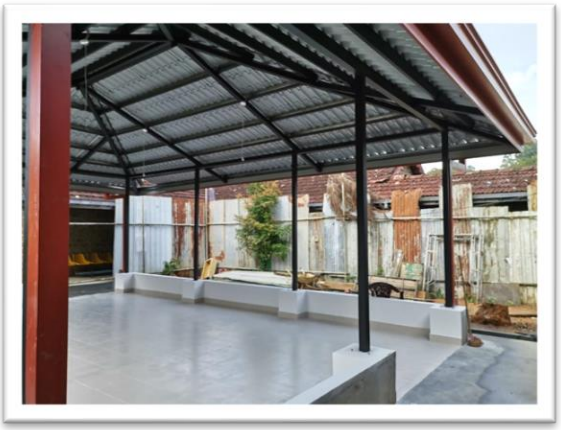
4	infrastructure and equip a distance learning center at the National Institute of Health Sciences in Kalutara (Q3 2020)	Q3 2020		Civil work tender awarded
5	Complete regular training annually in relevant PHC areas (Q4 each year)	Q4 2019		Training plan and objectives are being finalized.
6	Conduct baseline (Q1 2019) and end line (Q1 2023) surveys	Q1 2023		M&E firm has commenced work on baseline survey.

Appendix 3 – Progress of Civil Works Round 1 and 2

Central Province

W 3- Kandy	Contractor	Contract Value (LKR Mn)	Date of Commenced	Completion date	Extended date	Financial Progress (LKR Mn)	Financial Progress%
LOT-A Hatharaliyada	Central Engineering Services (Pvt) Ltd	31.74	21/08/2019	19/09/2020	19/11/2020	13.72	43.23
LOT-B-Madulkale	Central Engineering Services (Pvt) Ltd	45.61	21/08/2019	19/09/2020	19/08/2021	10.93	23.98
LOT-C-Dolosbage	Central Engineering Services (Pvt) Ltd	38.10	21/08/2019	19/09/2020	19/08/2021	5.71	15.00
LOT-D-Galaha	Central Engineering Services (Pvt) Ltd	19.68	21/08/2019	19/05/2020	15/10/2020	15.63	79.44
LOT-E-Deltota	Central Engineering Services (Pvt) Ltd	16.72	21/08/2019	19/04/2020	31/10/2020	7.88	47.17
		151.85				53.89	
W 4- Matale							
Kalundewa	Rebidding is in progress						
Madavalaulpotha	Rebidding is in progress						
Paldeniya	Rebidding is in progress						
Kimbissa Sigiriya	Rebidding is in progress						
Galewela	Rebidding is in progress						
W 5- Nuwareliya							
Kotagala	Malwatta Construction	12.87	20.08.2019	19/4/2020	19/02/2021	1.93	15.00
Laxapana	Malwatta Construction	21.14	20.08.2019	19/6/2020	19/11/2020	10.83	51.27
Nanuoya	Malwatta Construction	30.96	20.08.2019	19/8/2020	19/05/2021	11.88	38.38
Pundaluoya	Malwatta Construction	20.25	20.08.2019	19/6/2020	19/11/2020	13.86	68.46
		85.22				38.51	

Hatharaliyadda 15.12.2020	Galaha 15.12.2020
	
Deltota 18.12.2020	**Laxapana 01.11.2020**
	
Pundaluoya 20.12.2020	**Nanuoya 15.12.2020**
	

Madulkele 25.12.2020	Kotagala 10.12.2020
	

Round 1 Civil work Progress - North Central Province

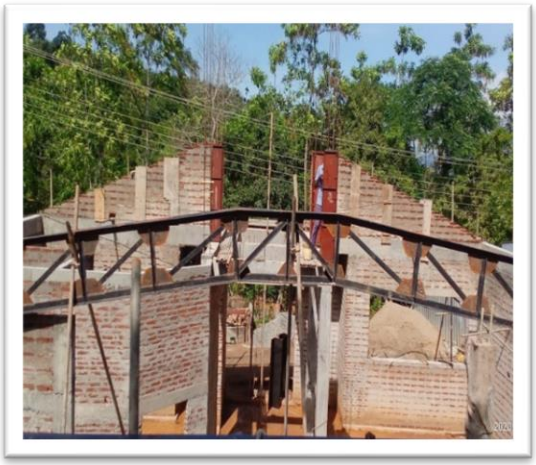
W 6- Polonnaruwa	Contractor	Contract Value (LKR Mn)	Date of Commenced	Completion date	Extended date	Financial Progress (LKR Mn)	Financial Progress%
Ambagaswewa	Gamodh Construction	19.13	15.07.2019	14.07.2020	14/10/2020	15.32	80.12
Ellawewa	DMC Construction	20.92	15.07.2019	14.07.2020	14/02/2021	9.58	45.81
Damminna	Premadasa Construction	16.00	15.07.2019	14.07.2020	14/02/2021	6.89	43.08
Sewanapitiya	Ranjith Motors & Building Constructors	18.41	29.01.2020	28.01.2021		7.83	42.54
		74.46				39.63	
W 7- Anuradhapura							
Negampaha	Nandana Rodgrigo Construction	25.42	15.08.2019	14.08.2020	14/02/2021	8.57	33.71
Horovpathana	Gamodh Construction	47.72	15.08.2019	14.08.2020	14/04/2021	12.34	25.86
Galenbidunuwawa	Pubudu Construction	20.88	09.01.2020	31.08.2020	30/11/2020	12.28	58.57
Tittagonawa	Nirupama Construction	36.10	29.08.2019	28.08.2020	30/12/2020	15.65	43.36
Konwewa	Devaki Enterprises	26.82	20.08.2019	19.08.2020	19/03/2021	5.21	19.45
		156.94				54.08	

Ellawewa 01.11.2020	Thiththagonawa 10.12.2020
	
Damminna 15.12.2020	**Ambagawewa 15.12.2020**
	
Horowpathana 01.12.2020	**Galenbidunuwewa 25.12.2020**
	

Negampaha 26.12.2020	Konwewa 22.12.2020
	
Sevanapitiya 25.12.2020	
	

Round 1 Civil work Progress - Sabaragamuwa Province

W 8- Kegalle	Contractor	Contract Value(LKR Mn)	Date of Commenced	Completion date	Extended date	Financial Progress (LKR Mn)	Financial Progress%
LOT A-Bolagama	SDS Construction	19.06	21.08.2019	20.08.2020		11.84	62.12
LOT B - Hewadiwela	SDS Construction	17.63	21.08.2019	20.08.2020		15.10	85.66
LOT C - Minuwangamuwa	SDS Construction	23.54	21.08.2019	20.08.2020	20/10/2020	11.00	46.74
LOT D - Aranayaka	SDS Construction	27.01	21.08.2019	20.08.2020	20/10/2020	19.79	73.30
LOT E - Uyanwatta (Inc Additional Works)	SDS Construction	20.83	21.08.2019	20.08.2020	20/09/2021	-	-
		108.07				57.75	
W 9- Rathnapura							
Delwala	Arcyn Engineering	19.66	10.03.2020	09.03.2021	9/5/2021	2.59	13.21
Dodampe	Mohan Enterprises	27.50	21.08.2019	20.08.2020	20/10/2020	11.73	42.66
Narissa	KEP Construction	31.78	10.03.2020	09.03.2021		3.41	10.75
Endana	KEP Construction	18.72	21.08.2019	20.08.2020		16.16	86.35
Ranwela	Arcyn Engineering	21.04	10.03.2020	09.03.2021		3.64	17.30
		118.70	118.70			37.55	

Endana 15.11.2020	Dodampe 10.12.2020
	
Narissa 20.12.2020	**Ranwala 25.12.2020**
	
Delwala 25.12.2020	**Aranayake 25.12.2020**
	

Hewadiwala 10.11.2020	Bolagama 10.12.2020
	
Minuwangamuwa 15.12.2020	
	

Round 1 Civil work Progress - Uva Province

W 1- Monaragala	Contractor	Contract Value (LKR Mn)	Date of Commenced	Completio n date	Extended date	Financial Progress (LKR Mn)	Financial Progress %
Thanamalwila-LOT-D	Suhada Enterprices	23.94	21/08/2019	7/6/2020	18/10/2020	19.11	79.82
Dambagalla-LOT-C	Suhada Enterprices	20.05	21/08/2019	7/6/2020	18/10/2020	9.01	44.98
Dobagahawela	KSP Building Material Supply and Construction	20.16	12/8/2019	7/6/2020	18/10/2020	5.49	27.27
Deliwa	KSP Building Material Supply and Construction	19.84	12/8/2019	7/6/2020	18/10/2020	3.79	19.12
Hambegamuwa	Suhada Enterprices	26.59	6/1/2020	1/11/2020		9.09	34.21
		110.58				46.51	
W 2- Badulla							
Meegahakiula	Wijewardana Construction	22.89	29/07/2019	7/6/2020	7/9/2020	19.23	84.04
Ettampitiya	Konesigha Construction	40.01	11/1/2020	6/11/2020	6/1/2021	10.90	27.6
Haldummulla	Senaratna Construction	30.22	6/1/2020	1/11/2020	6/1/2021	6.99	23.15
Kandeketiya	Konesigha Construction	36.06	6/1/2020	1/11/2020	6/1/2021	14.88	41.26
Koslanda	Chathura Constrcution	27.16	6/1/2020	1/11/2020	6/1/2021	5.66	20.86
		156.34				57.68	

Dombagahawela 15.12.2020	Daliva 01.12.2020
	
Dambagalla 15.12.2020	**Thanamalwila 01.12.2020**
	
Hambegamuwa 10.12.2020	**Meegahakiula 01.12.2020**
	

Ettampitiya 12.12.2020	Haldummulla 01.12.2020
	
Kandeketiya 20.12.2020	**Koslanda 15.12.2020**
	

Design Progress – Civil Work Round 2

District	Name of the Facility	Progress
Kandy	Ambagahapelessa	IEE report completed, advertised on 18.12.2020
	Kurunduwatta	IEE report completed, advertised on 18.12.2020
	Minipe Morayaya	IEE report completed, advertised on 18.12.2020
	Hasalaka	IEE report completed, advertised on 18.12.2020
	Kolongoda	IEE report completed, advertised on 18.12.2020
	Katugasthota	Designing is in progress (Electrical design completed)
	Suduhumpola	Preliminary cost estimate completed
	Marassana	Designing is in progress (Electrical design completed)
	Morahena	IEE report completed
	Digana - Rajawella	Designing is in progress (Electrical design completed)
Matale	Elkaduwa	IEE report completed, advertised on 18.12.2020
	Madipola	IEE report completed, advertised on 18.12.2020
	Leliambe	IEE report completed, advertised on 18.12.2020
	Nalanda	IEE report completed, advertised on 18.12.2020
	Gurubebila	IEE report completed, advertised on 18.12.2020
	Pallepola	Concept review is in progress
	Maraka	Preliminary cost estimate completed
	Handungamuwa	Preliminary cost estimate completed
	Dullewa	Preliminary cost estimate completed
	Aluthwewa	Structural design completed
Nuwara Eliya	Gonapitiya	IEE report completed, advertised on 18.12.2020
	Mandarannuwara	IEE report completed, advertised on 18.12.2020
	Agarapatana	IEE report completed, advertised on 18.12.2020
	Ragala	Preliminary cost estimate completed
	Hanguranketha	IEE report completed, advertised on 18.12.2020
	Nildandahinna	Preliminary cost estimate completed
	Kandapola	Preliminary cost estimate completed
	Watawala	Preliminary cost estimate completed
	Bogawanthalawa	Preliminary cost estimate completed
	Hangarapitiya	Preliminary cost estimate completed
Polonnaruwa	Sinhapura	Bidding document finalized
	Madagama	Bidding document finalized
	Parakrama Samudraya	Bidding document finalized
	Wijepura	Bidding document finalized
	Aralaganwila	Finalized concept design is in progress
	Aselapura	Finalized concept design is in progress
	weheragala	Finalized concept design is in progress
	Attanakadawala	Finalized concept design is in progress
	Mannampitiya	Finalized concept design is in progress
	Jayanthipura	Finalized concept design is in progress
Anuradhapura	Ethakada	Bidding document finalized

	Katiyawa	Bidding document finalized
	Labunoruwa	Bidding document finalized
	Andiyagala	Bidding document finalized
	Mahasenpura	Bidding document finalized
	Habarana	Finalize the initial concept design is in progress
	Wahalkada	Finalize the initial concept design is in progress
	Mahawilachchiya	Finalize the initial concept design is in progress
	Ratmalgahawewa	Finalize the initial concept design is in progress
	Poonewa	Finalize the initial concept design is in progress
Monaragala	Kotagama	Bids are under evaluation
	Pitakumbura	Bids are under evaluation
	Rathmalgahaella	Bids are under evaluation
	Nannapurawa	Bids are under evaluation
	Madagama	Bids are under evaluation
	Okkampitiya	Finalize the BOQs is in progress
	Bakinigahawela	Finalize the BOQs is in progress
	Buddama	Finalize the BOQs is in progress
	Kotiyagala	Finalize the BOQs is in progress
	Dewathura	Finalize the BOQs is in progress
Badulla	Metigahatenna	Bids are under evaluation
	Kirklees	Preliminary cost estimate completed
	Haputale	Bids are under evaluation
	Uva Paranagama	Bids are under evaluation
	Lunugala	Bids are under evaluation
	Udaweriya (EH)	Finalize the BOQs is in progress
	Wewegama	Finalize the BOQs is in progress
	Spring Valley (EH)	Finalize the BOQs is in progress
	Galauda	Finalize the BOQs is in progress
	Uraniya	Finalize the BOQs is in progress
Ratnapura	Waddagala	Initial concept has to be prepared
	Palmadulla	Finalize the BOQs is in progress
	Barenduwa	Initial concept has to be prepared
	Keeragala	Initial concept has to be prepared
	Galpaya	Finalize the BOQs is in progress
	Pinnawala	Initial concept has to be prepared
	Rajawaka	Finalize the BOQs is in progress
	Belihuloya	Finalize the BOQs is in progress
	Kuruwita	Finalize the BOQs is in progress
	Gallalla	Initial concept has to be prepared
	Kirimetithenna	Initial concept design completed
	Paragala	Initial concept has to be prepared
Kegalle	Hinguralakanda	Finalize the BOQs is in progress
	Pothdenikanda	Finalize the BOQs is in progress
	Bulathkohupitiya	Concept design has to be completed by D&S firm
	Basnagala	Finalize the BOQs is in progress

	Udugoda	Concept design has to be completed by D&S firm
	Deraniyagala	Concept design has to be completed by D&S firm
	Karandupona	Finalize the BOQs is in progress
	Maliboda	Concept design has to be completed by D&S firm
	Dothaloya	Concept design has to be completed by D&S firm
	Mahapallegama	Concept design completed

Appendix 4 – Gender Action Plan

Total activities: 8

Total quantitative targets: 17

Consultancy started on September 2020

Progress Report on the First Quarter of the Consultancy (Q 4 2020)

Activities and targets	Progress in reporting quarter	Cumulative progress	Assessments/remarks
Output 1: Primary health care services enhanced in Central, North Central, Sabaragamuwa, and Uva provinces			
Activity 1: Ensure all upgraded or renovated PMCUs and divisional hospitals have gender responsive construction features			
1.1.1 At least 30% upgraded or renovated PMCUs and divisional hospitals have separate toilets separate examination and changing areas for improved privacy for male and female patients (QT1)	Discussions with the consultant Engineers (Sabaragamuwa) ensured that ADB Guidelines are included in the construction Plans. Requested all plans to be copied so that they can be looked at in relation to the criteria to be considered as an institution with Gender responsive features. In the process of collecting the Plans.		Started and on going
1.1.2 All PHC facilities providing ESP (25% of all PHC facilities in target provinces) have gender responsive designs with facilities for privacy during patient examination, and for changing clothes (Baseline: less than 10%) QT2	1.Basic indicators and few items identified as gender responsive features for the Basic assessment that is being conducted by the Monitoring Firm 2. Initiated the process of developing detailed criteria to consider an institution as having Gender Responsive features	.	Started and Ongoing

Activities and targets	Progress in reporting quarter	Cumulative progress	Assessments/remarks
Activity 2. Integrate gender- responsive and inclusive PHC services with the implementation of the essential service package for outpatient and clinic services in the nine newly established clusters			
1.2.1 75% of PHC facilities in target provinces provide a gender responsive and inclusive essential service package (Baseline: 0) QT3		.	
1.2.2 All staff providing ESP services in the PHCs trained on gender sensitivity and responsiveness when providing ESP services (Baseline: 0) QT4	1.Process of assessing Gender Training Needs has been started, Questioners prepared, Translated, Institutions randomly selected assessment methodology agreed upon. Awaiting Ethical clearance from SLMA to conduct. 2 Basic curriculums for training drafted (to be modified after the Needs assessment). Communications with Consultant Distant training to explore the possibility of doing Online Training	.	Started and On going
1.2.3 Over 75% of women and men are reporting satisfaction over the services provided at PHC facilities QT5	To be conducted after the training in Gender Responsive Care and at the second customer satisfaction survey by the Consultancy Firm		
Activity 3. Develop a BCC campaign targeting increased utilizations of the PHC facilities by women and men			
1.3.1 BCC campaign strategy and materials (such as leaflets, video clips, and/or street dramas) developed	Procurement of consultancy firm in progress, Campaign strategy and material will develop once firm on board.		Not in the ToR of Gender Consultant

Activities and targets	Progress in reporting quarter	Cumulative progress	Assessments/remarks
1.3.2 Use of PHC facilities is increased by 20% each for women and men QT6	Activities are ongoing. Baseline will be available once baseline survey completed by Monitoring and Evaluation firm.		Not in the ToR of Gender Consultant
Activity 4. Encourage partnerships with local organizations for gender responsive and inclusive services at the PHC level			
1.4.1 At least 30% of the medical officer of health areas will establish partnerships with local organizations for encouraging male participation in PHC utilization (Baseline: 0) QT7	Not started yet Planned for 2022		This needs to be done followed by 1.4.2 without a time delay
1.4.2 Annually at least 10 awareness creation sessions for local organizations conducted on the advantages of PHC utilization for encouraging male participation QT8	Not started yet Planned for 2022		Pandemic is a constraint to conduct awareness workshops
Activity 5. Pilot male engagement approaches to promote reproductive health, maternal and child health/nutrition, PHC, and diminish violence against women			
1.5.1 A male engagement approach is designed to promote reproductive health, maternal and child health/nutrition, PHC for men, and diminish violence against women	Not started yet Planned for 2022		

Activities and targets	Progress in reporting quarter	Cumulative progress	Assessments/remarks
1.5.2 Conduct TOT targeting at least 50 health officials and/or local organizations who can transfer knowledge to men at PHC facilities QT9	Not started yet Planned for 2022		
1.5.3 Over 1,500 men reached though training and awareness QT10	Not started yet Planned for 2022		
Output 2: Health information system and disease surveillance capacity strengthened			
Activity 1. Introduce sex- disaggregated data to the eRHMIS, Annual Health Bulletin of FHB and to the eHealth surveillance system on the 29 notifiable diseases in Sri Lanka			
2.1.1 Sex-disaggregated data included in the eRHMIS and Annual Health Bulletin of FHB (Baseline: 0)	Sub activities planned and agreed upon. Assessment of existing records to be evaluated in Q1 2022 Pandemic is hindering the visits to randomly selected Hospitals		Started and Ongoing
2.1.2. Sex-disaggregated data included in the eHealth surveillance system (Baseline: 0)			Started and Ongoing

Activities and targets	Progress in reporting quarter	Cumulative progress	Assessments/remarks
2.1.3 Sex-disaggregated data analyzed, and gender related health issues identified for programming in the FHB and Epidemiology Unit (Baseline: 0)			To be started in 2022
Output 3: Policy development, capacity building, and project management supported			
Activity 1. Ensure all operation policies and guidelines developed for health sector are gender mainstreamed			
3.1.1. A team of experts on health and gender are consulted during the preparation of policies Comments of the expert/s are documented and incorporated.		.	Not in the ToR of the Gender Consultant ?
Activity 2. Integrate gender dimensions into policies and strategic plans of the FHB and the existing package for newly married couples			
3.2.1 By 2023, operational polices and guidelines with gender dimensions are developed for (i) delivering a comprehensive package of PHC; (ii) management and functioning of cluster hospitals; and (iii) GIS-based planning and monitoring in health sector		.	Not in the ToR of Gender Consultant ?
3.2.2 By 2020, 11 units of the FHB of the Ministry that have integrated gender dimensions into all their policies and strategic plans (Baseline: 0) QT11	List of Reproductive health policies coming under the Family Health Bureau prepared. Gender analysis of the policies will be done in Q1 Q2 2021		Initiated and ongoing

Activities and targets	Progress in reporting quarter	Cumulative progress	Assessments/remarks
3.2.3 By 2019, the package for newly married couples is reviewed and finalized		.	Not specifically mentioned in ToR Can be started in 2021
3.2.4 By 2023, nine advocacy workshops conducted as one per district (9 districts) with registrars of marriages (Baseline: 0) QT12		.	Workshop mode advocacy is constrained due to the Pandemic. If within the ToR to explore other possibilities
Activity 3. Conduct a gender training needs assessment to identify training gaps, develop a gender TOT module and roll-out a training program for the PHC staff			
3.3.1 By 2019, a gender expert recruited	Recruited on 1st September 2020		
3.3.2 By 2019, a gender training needs assessment conducted and a TOT training module for PHC staff developed (Baseline: 0)	(Will be done in a manner similar to PMCU/Apex Hospital staff) As de1.Process of assessing Gender Training Needs has been started, Questioners prepared, Translated, Institutions randomly selected assessment methodology agreed upon. Awaiting Ethical clearance from SLMA to conduct. 2 Basic curriculums for training drafted (to be modified after the Needs assessment). Communications with Consultant Distant training to explore the possibility of doing Online Training	Training will be organized once Gender Specialist onboard.	
3.3.3 By 2020, nine TOTs on gender conducted as one per district (at least 40% women) (Baseline: 0) QT13	Plans are being considered to conduct training On Line on account of the current Covid situation		

Activities and targets	Progress in reporting quarter	Cumulative progress	Assessments/remarks
3.3.4 By 2023, at least 25% PHC staff from PMCUs, divisional hospitals, and MOHs (of whom 35% are women) are trained on gender sensitivity, gender-related policies and interventions (Baseline: 0) QT14			
Activity 4. Introduce an updated training program on gender sensitive nutrition counselling and primary health care			
3.4.1 At least 75% of PHMs trained on gender sensitive nutrition counselling program (Baseline: 0) QT15			Not started yet Planned for 2022
3.4.2 At least 25% of medical officers and other staff of PMCUs and divisional hospitals (of whom 35% are women) in target provinces are trained in PHC (family medicine) QT16			Not started year Planned for 2022
Activity 5. Strengthen the capacity of PHMs and PHIs respond to GBV			
3.5.1 The life skills training course for PHMs and PHIs is gender mainstreamed			Not in the ToR specifically

Activities and targets	Progress in reporting quarter	Cumulative progress	Assessments/remarks
3.5.2 A basic counseling and family mediation induction course developed for PHMs and PHIs (Baseline: Not available)			Not in the ToR specifically
3.5.3 75% of PHMs and PHIs trained on life skills and family mediation (at least 50% women) (Baseline: 0) QT17			Not in the ToR specifically
3.6.1 New guidelines developed for field-based staff to address occupational issues faced by estate sector women workers, men and women engaged in unskilled labor and other occupations			Not in the ToR specifically

BCC = behavior change communication, eRHMIS = electronic reproductive health management information system, ESP = essential services package, FHB = Family Health Bureau, GIS = geographic information system, GBV = gender- based violence, MOH = medical officer of health, PHC = primary health care, PHM = public health midwife, PHI = public health inspector, PIU = project implementation unit, PMCU = primary medical care unit, TOT = training of trainers.

Source: Asian Development Bank.

Appendix 5 - Progress of Primary Health Care Innovation Fund

S. No.	Province	District	Cluster	Proposal Number	Proposal Title	Approved Budget(LKR Mn)
1	Uva	Badulla	Welimada	HSEP/PMU/UVA/WEL/01/2019	Improvement of Emergency care services in Welimada cluster hospitals	16,720,000.00
2	Uva	Badulla	Welimada	HSEP/PMU/UVA/WEL/02/2019	Improvement of Mental health services in Welimada cluster hospitals	9,689,000.00
3	Uva	Badulla	Welimada	HSEP/PMU/UVA/WEL/03/2019	Improvement of Quality and safety of patient care in Welimada cluster hospitals	14,700,000.00
4	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/01/2019	Improve the patient safety	440,000.00
5	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/02/2019	Updated drug (pharmaceutical and surgical equipment) management information system and availability of essential medicines at PMCIs in Bibile cluster	900,000.00
6	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/03/2019	Management emergency care services and maintenance of equipment to provide emergency care services	1,240,000.00
7	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/04/2019	Improve the necessary skills of health care teams	1,820,000.00
8	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/05/2019	Strengthen functional linkage between curative and preventive institutions	450,000.00
9	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/06/2019	Improve the accountability for care within the cluster (strengthening the	2,790,000.00

					performance by establishing cluster management system)	
10	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/07/2019	Improve health seeking behavior towards primary healthcare facilities	3,180,000.00
11	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/09/2019	Improve the patient responsiveness (Responsiveness- respect for patient and client orientation)	9,025,000.00
12	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/10/2019	Improve the continuity of care	9,123,000.00
13	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/12.1/2020	Revised: Improve hospital waste management	5,000,000.00
14	Uva	Monaragala	Bibile	HSEP/PMU/UVA/BIB/13/2020	Purchasing of equipment for palliative care unit at Medagama in Bibile Cluster	2,871,650.00
15	Central	Nuwareliya	Rikillagaskada	HSEP/PMU/CEN/RIK/01/2019	Improvement of emergency care services in cluster primary care institutions	18,285,000.00
16	Central	Nuwareliya	Rikillagaskada	HSEP/PMU/CEN/RIK/02/2019	Improvement of e-literacy among primary health staff	4,370,000.00
17	Central	Nuwareliya	Rikillagaskada	HSEP/PMU/CEN/RIK/03/2019	Improvement of the drug storage system apex and cluster hospitals	18,250,000.00
18	Central	Kandy	Theldeniya	HSEP/PMU/CEN/TEL/01/2019	Strengthening of NCD screening services and NCD management services in all health care institutions within the cluster	18,000,000.00
19	Central	Kandy	Theldeniya	HSEP/PMU/CEN/TEL/02/2019	Improvements for elderly friendly and differently abled friendly environment in cluster linked hospitals	18,000,000.00

20	Central	Matale	Dambulla	HSEP/PMU/CEN/DAM/01.1/2020	Improvement of ETUs in Dambulla Cluster	14,475,000.00
21	Central	Matale	Dambulla	HSEP/PMU/CEN/DAM/01.2/2020	Improvement of Physiotherapy Facilities	2,063,000.00
22	Central	Matale	Dambulla	HSEP/PMU/CEN/DAM/03.1/2020	Improvement of imaging facilities in the Dambulla cluster	7,065,000.00
23	Central	Matale	Dambulla	HSEP/PMU/CEN/DAM/04/2020	Community Support Centre	635,000.00
24	North Central	Anuradhapura	Thambuththegama	HSEP/PMU/NCP/THA/01/2020	Advocacy program on leishmaniasis	286,900.00
25	North Central	Polonnaruwa	No cluster (All MOH in District)	HSEP/PMU/NCP/POL/02.1/2020	Oral cancer prevention program	1,045,000.00
26	Sabaragamuwa	Rathnapura	Balangoda	HSEP/PMU/SAB/RAT/03.1/2020	Extension work in MOH Office, Balangoda	1,351,364.73
27	Sabaragamuwa	Rathnapura	Balangoda	HSEP/PMU/SAB/RAT/03.2/2020	Equipment required for the Dental Unit in MOH Balangoda	2,217,700.00
28	Sabaragamuwa	Rathnapura	MOH Udawalawa	HSEP/PMU/SAB/RAT/05/2020	Improvements to antenatal & postnatal clinic room	956,438.46
29	Sabaragamuwa	Kegalle	No cluster	HSEP/PMU/SAB/KEG/02.1/2020	Emergency care improvement project	15,327,000.00
					Total	**200,276,053.19**

Central Province

Proposal ID/ approval date	Title of the Project	Estimated Budget	Details of Budget		Remarks
			Activity	Amount	
HSEP/PMU/CEN/TEL/01/2019	Strengthening of NCD screening services and NCD management services in all health care institutions within the cluster	18,000,000.00	Repair Facilities (Nos 16)	8,000,000.00	RFQ preparation completed,
			Renovation of Patient Toilet	3,200,000.00	RFQ preparation
			Equipment and Furniture	2,400,000.00	Waiting for approval of RFQ & Specs by Tec Com
			workshop and programms	1,500,000.00	
			Training (NCD 10 trainings)	200,000.00	Master training plan is prepared for 25 training sessions, one training is already completed. Due to prevailing situation in the country, remaining programs postponed
			Development of IEC Material	2,700,000.00	RFQ ready
HSEP/PMU/CEN/TEL/02/2019	Improvement of elderly friendly and differently abled friendly environment cluster linked hospitals	18,000,000.00	Repair Facilities	5,000,000.00	Activities has to be started
			Modifications to existing wards	5,000,000.00	Activities has to be started
			Equipment	4,000,000.00	Activities has to be started
			Furniture	4,000,000.00	Activities has to be started
HSEP/PMU/CEN/RIK/01/2019	Improvement of emergency care services in cluster primary care institutions	18,285,000.00	Ambu bag	300,000.00	RFQ document has been prepared
			Ambu Bag	285,000.00	RFQ document has been prepared
			BP Apparatus	285,000.00	RFQ document has been prepared
			Cardiac Monitor	4,025,000.00	RFQ document has been prepared
			Diagnostic Set	600,000.00	RFQ document has been prepared
			ETU Bed	4,800,000.00	RFQ document has been prepared
			ECG machine	1,400,000.00	RFQ document has been prepared
			Glucometer	300,000.00	RFQ document has been prepared
			Laryngoscope set	700,000.00	RFQ document has been prepared

			Nebulizer	360,000.00	RFQ document has been prepared
			Spinal Board	1,200,000.00	RFQ document has been prepared
			spot lamp	480,000.00	RFQ document has been prepared
			Sucker	3,500,000.00	RFQ document has been prepared
			Workshop	50,000.00	According to the plain, two programs are scheduled and to be completed by 31.12.2020
HSEP/PMU/CEN/RIK/02/2019	Improvement of e-literacy among primary health staff	4,370,000.00	Renovation of Computer lab	500,000.00	Contract awarded,
			Purchasing computer table	330,000.00	Waiting for the technical committee evaluation
			computer chair	225,000.00	Waiting for the technical committee evaluation
			Trainer Table	20,000.00	Waiting for the technical committee evaluation
			Trainer Chair	15,000.00	Waiting for the technical committee evaluation
			Desktop computer	2,400,000.00	Waiting for the technical committee evaluation
			Multi Media projector	120,000.00	Waiting for the technical committee evaluation
			screen	10,000.00	Waiting for the technical committee evaluation
			Training	750,000.00	According to the plain,75 programs are scheduled and to be completed by 31.12.2021
HSEP/PMU/CEN/RIK/03/2019	Improvement of the drug storage system Apex and cluster Hospitals	18,250,000.00	Renovation of dispensaries (Nos 10)	1,000,000.00	RFQ preparation
			Renovation of drug storage	1,000,000.00	RFQ preparation
			Air conditioner (Nos 20)	1,500,000.00	Waiting for the technical committee evaluation
			Generator to apex	5,000,000.00	Removed
			Generators to other - 7	8,000,000.00	Waiting for the technical committee evaluation
			Refrigerator -	560,000.00	Waiting for the technical committee evaluation

			Tablet counting machines	500,000.00	waiting for the approval of RFQ from PMU
			Drug Racks	510,000.00	waiting for the approval of RFQ from PMU
			Dispenser Chair	80,000.00	waiting for the approval of RFQ from PMU
			Drug stores Management	100,000.00	According to the plain, 7 programs are scheduled and to be completed by 31.03.2021
HSEP/PMU/CEN/DAM/01.1/2020	Improvement of ETUs in Dambulla Cluster	14,475,000.00	Improving emergency treatment units in cluster hospitals	14,475,000.00	Waiting for specifications/estimates from RDHS office
HSEP/PMU/CEN/DAM/01.2/2020	Improvement of Physiotherapy Facilities	2,063,000.00	Improving rehabilitation centres in apex hospital	2,063,000.00	Awaiting specifications/estimates from RDHS office for the initiate work
HSEP/PMU/CEN/DAM/03.1/2020	Improvement of imaging facilities in the Dambulla cluster	7,065,000.00	Provide necessary safety equipment for staff	415,000.00	Awaiting specifications/estimates from RDHS office for the initiate work
			Establishing an ultrasound scanner in DH Galewela	6,500,000.00	Awaiting specifications/estimates from RDHS office for the initiate work
			Air conditioner for US	150,000.00	Awaiting specifications/estimates from RDHS office for the initiate work
HSEP/PMU/CEN/DAM/04/2020	Community Support Centre	635,000.00	Find a place to implements community support center	40,000.00	Awaiting specifications/estimates from RDHS office for the initiate work
			Infrastructure improvement	345000	Awaiting specifications/estimates from RDHS office for the initiate work
			Training programs	250000	Awaiting specifications/estimates from RDHS office for the initiate work

Uva Province

Proposal No/ Approval date	Title	Approved Budget	Project/Activity	Budget Rs Mn.	Remarks
HSEP/PMU/UVA/WEL/01/2019	Improvement of emergency care services in Welimada cluster hospitals	16,720,000.00	**Civil Works - Repair facility - Modification of ETU rooms**		
			Renovation of ETU room BH Welimada	2,500,000.00	Proposal need to be revised, change to PSPP, use money for toilet refurbishment
			Renovation of ETU room DH Nadungamuwa	1,500,000.00	Preparing Bidding Documents is in progress
			Renovation of ETU room PMCU Hewanakumbura	1,500,000.00	Work is in progress; Bills has to be submitted
			Renovation of ETU room PMCU Keppetipola	1,000,000.00	Work is in progress,Bills has to be submitted
			Supplying of essential emergency care instruments		
			Purchasing of 6 defibrillators	8,400,000.00	Bid Evaluation on going
			Purchasing of 18 ETU beds	1,620,000.00	Bid Evaluation on going
			Training of health staff on emergency care - 5 workshops	200,000.00	
HSEP/PMU/UVA/WEL/02/2019	Improvement of mental health services in Welimada cluster hospitals	9,689,000.00	**Civil Works - Repair facility**		
			Modification of mental health clinics/ Renovation of mental health clinics		
			BH Welimada	1,000,000.00	BOQ completed
			DH Uvaparanagama	1,000,000.00	Preparing BOQs is in progress
			DH Wewegama	500,000.00	Preparing BOQs is in progress

			DH Boralanda	500,000.00	Preparing BOQs is in progress
			Establish a welfare center for mentally ill patients		
			Modification of mental health welfare center - BH Welimada	4,500,000.00	Preparing BOQs is in progress
			Supply of essential furniture and instruments	1,989,000.00	Bid documents completed, PPC approved bid documents, RFQ next month
			Training of health staff on mental health - 5 workshops	200,000.00	Activity has to be started
HSEP/PMU/UVA/WEL/03/2019	Improvement of quality and safety of patient care in Welimada cluster hospitals	14,700,000.00	**Civil Works - Renovation and modification of infrastructures**		
			Renovation/ Modification (disable friendly) of toilets - HD Wewegama	1,000,000.00	Proposal need to be revised
			Renovation/ Modification (disable friendly) of injection room and staff rest room - DH Mirahawatta	2,000,000.00	Activity has to be started
			Renovation/ Modification (disable friendly) of toilets, OPD consultation room and staff rest room - DH Haggala	2,700,000.00	Activity has to be started
			Establish proper waste management system in the cluster		
			Renovation/ Modification (disable friendly) of toilets, injection room and waste segregation area - DH Bogahakumbura	2,500,000.00	Activity has to be started

			Renovation/ Modification of injection room, staff rest room and waste segregation area - DH Boralanda	2,500,000.00	Activity has to be started
			Renovation/ Modification (disable freindly) of toilets, staff rest room and waste segregation area - DH Nedungamuwa	2,500,000.00	BOQ Completed, need additional 0.5Mn
			Renovation/ Modification (disable freindly) of patient toilets - DH kerklis	1,500,000.00	Toilets will be constructed under Civil works Round 2
			Renovation water supply line - DH kerklis		Activity has to be started
HSEP/PMU/UVA/BIB/01/2019	Improve Patient Safety	440,000.00	**Training**		
			Training and strengthening the quality Management Strategies	280,000.00	Target was -Sep.2020 to March 2021
			Quarterly auditing of Grievances	160,000.00	3rd Q. 2020 to 2nd Q. 2022
HSEP/PMU/UVA/BIB/03/2019	Management emergency care services and maintenance of equipment to provide emergency care services	1,240,000.00	**Civil Works**		
			Establish Maintenance Unit at Apex Hospital to repair the equipment - Bibile	1,000,000.00	Awarded, Starting date - 14.12.2020 Completion date - 12.02.2021
			Training - Capacity Development for staff on Emergency care Management	240,000.00	Jan.- Dec. 2021 (2 programme per month)
HSEP/PMU/UVA/BIB/04/2019	Improve the necessary skills of health care teames	1,820,000.00	Continuous Child Mental Health Development Programme in Bibile Cluster	1,000,000.00	Stating from October. 2021
			Capacity Development of staff regarding management of	100,000.00	Scheduled on February, April, May, July 2021

			Hypertension, DM and Isthmic Heart Disease		
			Capacity development of staff on management of Rheumatology patients	100,000.00	October, December, 2020/ January, March 2021
			Capacity development of MOs, NOs and Other staff regarding Malignancies	100,000.00	February. April. June. August. 2021
			Capacity Development of staff regarding management of Vision care	100,000.00	September. November. 2020/ January. March 2021
			Capacity Development of Staff on Prostheses and Orthoses	10,000.00	Starting from February. 2021
			Continuous education on Communicable diseases and notifiable diseases on importance of notification	10,000.00	Starting from December. 2020
			Development of Hospitals at Bibile Cluster in Monaragala district, Sri Lanka - A Pre and Post Development Survey	400,000.00	On going
HSEP/PMU/UVA/BIB/05/2019	Strengthen functional linkage between curative and preventive institutions	450,000.00	**Civil Works - Repair facility**		
			Air conditioning Clinic Rooms in 3 MOH Offices (Bibile, Madulla, Medagama)	450,000.00	RFQ scheduled on February 2021
HSEP/PMU/UVA/BIB/06/2019	Improve the accountability for care within the cluster (strengthening the	2,790,000.00	**Civil Works - Other**		
			Renovate and Partition of a separate area for Cluster Management Unit	1,000,000.00	Awarded, Starting date - 14.12.2020 Completion date - 12.02.2021

	performance by establishing cluster management system)		Equipment		
			Purchase Furniture and Office Equipment for Cluster Management Unit	1,000,000.00	Bid documents completed, PPC has been approved bid documents, RFQ scheduled on February 2021
			Workshops/Programmes		
			Conduct workshops to develop Guild lines, Flow Charts regarding the management of patients with Hypertension, Ischemic Heart Diseases, Diabetes Mellitus and to review the process of the implementation within the cluster	100,000.00	Workshops scheduled in November. 2020/ January, May, December 2021
			Conduct workshops to develop Guild lines, referral pathways to manage patients with Rheumatology within the cluster and to review the process of the implementation within the cluster	100,000.00	Workshops scheduled in November. 2020/ January, May, December 2021
			Conduct workshops to develop Guild lines, referral pathways for management of Oncology patients within the cluster and to review the process of the implementation within the cluster	100,000.00	Workshops scheduled in December. 2020/ February. June. November. 2021

			Conduct Workshops to develop Guild lines and referral pathways for Management of Eye patients within the cluster and to review the process of the implementation within the cluster	100,000.00	Workshops scheduled in December. 2020/ February. June. November. 2021
			Conduct workshop develop Guild lines and referral pathways for Management of Surgical, Gyn and Obs , Pediatric, Clinical Nutrition, Psychiatric, Respiratory Medicine, Dermatology within the cluster and to review the process of the implementation within the cluster	100,000.00	Workshops scheduled in December. 2020/ February. June. November. 2021
			Conduct Morbidity and Mortality Reviews and Clinical Audits	200,000.00	Quarterly from 3rd Q. 2020 to 2nd Q. 2022
			Capacity development of Procurement and Financial Management	40,000.00	Programme scheduled on December. 2020/ June 2021
			Develop Health Education IEC Materials and Referral forms	50,000.00	Scheduled in January. 2021/ March 2021
HSEP/PMU/UVA/BIB/07/2019	Improve health seeking behavior towards primary healthcare facilities	3,180,000.00	**Training**		
			Advocacy on Empanelment process for Non-Health Sector	308,000.00	Programme scheduled in October 2020
			Awareness Programme on Empanelment process for Health Personals	308,000.00	Programme scheduled in November. 2020
			Awareness Programme on Empanelment process	1,280,000.00	Programme scheduled in October. to December. 2020

			for Public (One for a GN Division)		
			IT Equipment		
			Barcode reader	240,000.00	RFQ scheduled on February 2021
			card printers	1,050,000.00	RFQ scheduled on February 2021
HSEP/PMU/UVA/BIB/09/2019	Improve the patient responsiveness (Responsiveness-respect for patient and client orientation)	9,025,000.00	**Civil Works - Establish Play areas and reading area for children**	7,000,000.00	Preparation of specification is in progress
			Equipment - Other Equipment		
			Television 24’	625,000.00	RFQ scheduled on February 2021
			Electronic Customer Feedback System	1,400,000.00	RFQ scheduled on February 2021
HSEP/PMU/UVA/BIB/10/2019	Improve the continuity of care	9,123,000.00	**Civil Works**		
			Establish rehabilitation Centers - DH Medagama	2,500,000.00	RFQ scheduled on February 2021
			Modernization of Physiotherapy Unit at Apex Hospital BH Bibile	3,000,000.00	Awarded, Starting date - 14.12.2020 Completion date - 12.02.2021
			Transport		
			Restructuring existing vehicle for homebased care	2,000,000.00	Need to be revised
			Equipment - Medical		
			Purchase Ophthalmoscope for Eye Care	330,000.00	Bids Closed on 11.11.2020, Bid evaluation on going
			Purchase IR Thermometer	35,000.00	
			Purchase Wireless Doppler	70,000.00	
			Purchase Snellen’s Charts and Ishihara charts	5,000.00	
			Smart TV	840,000.00	

			Web cam	35,000.00	
			Head Phone set with Microphone	28,000.00	
			Workshops /Training		
			Workshops to implement the ESP within the Cluster	80,000.00	Once a quarter (3rd Q. 2020 to 2nd Q. 2022)
			Capacity Development on Family Medicine and ESP for Medical Officers and Other Staff	100,000.00	Programme scheduled in June, December. 2020/ June, November. 2021
			Training PHNO on home-based care and provision of facilities	100,000.00	Trainings scheduled in September., November 2020/ January., March 2021
HSEP/PMU/UVA/BIB/12.1/2020	Revised: Improve hospital waste management	5,000,000.00	Development of wetlands in BH Bibile and BH Wellawaya	5,000,000.00	Proposal approved 26.10.2020. Field visit done by Project Engineer
HSEP/PMU/UVA/BIB/13/2020	Purchasing of equipment for palliative care unit at Medagama in Bibile Cluster	2,871,650.00	Medical equipment	1,550,000.00	Proposal approved on 26.10.2020. Activities have to be started
			Supportive equipment	1,321,650.00	

Sabaragamuwa Province

Proposal No/ Approval date	Title of the Project	Estimated Budget	Details of Budget Activity	Amount	Remarks
HSEP/PMU/SAB/ RAT/03.1/2020	Extension work in MOH Office, Balangoda	1,380,000.00	Excavating of existing area and demolishing of existing walls	33,555.08	PCC Approved on 23.11.2020, activities have to be started
			Concreting of columns, beams and arranging form work	353,219.82	
			Arranging reinforcement	169,119.00	
			Arranging Masonry using cement blocks	42,378.60	
			Finishing with plastering and painting	261,258.03	
			Arranging of roof work	183,984.95	
			Installation of electrical appliances	101,895.50	
			VAT 8%	91,632.88	
			Contingencies	114,320.87	
HSEP/PMU/SAB/ RAT/03.2/2020(28.09.2020)	Equipment required for the Dental Unit in MOH Balangoda	2,217,700.00	Korean Dental chair with unit	2,217,700.00	PCC Approved on 23.11.2020, specification finalizing is in progress
HSEP/PMU/SAB/ RAT/05/2020	Improvements to antenatal & postnatal clinic room (MOH Udavalava)	1,000,000.00	Improvements to baby's examination room and pregnant mother’s examination room and meeting room	956,438.46	PCC Approved on 23.11.2020, BOQ completed
HSEP/PMU/SAB/ KEG/02.1/2020	Emergency care improvement project	15,327,000.00	Civil works	5,500,000.00	PCC Approved on 23.11.2020. activities have to be started
			Medical Equipment	8,599,000.00	
			Medical Furniture	108,000.00	
			Refrigerator	1,000,000.00	
			Training programmes	120,000.00	

North Central Province

Proposal ID/ Approval date	Title of the Project	Estimated Budget	Details of Budget	Amount	Remarks
			Activity		
HSEP/PMU/NCP/ THA/01.1/2020	Advocacy Program on Leishmaniasis	286,900.00	Advocacy program (1)	86,900.00	After Completion of the Programme it is proposed to purchase a Machine related to Leishmaniasis
			Awareness Program Among Community (6)	200,000.00	Activities have to be started
HSEP/PMU/NCP/ POL/02.1/2020	Oral cancer prevention program	1,045,000.00	Purchase of one portable sound system	160,000.00	Request from Polonnaruwa RDHS, TEC appointed, request received
			Printing HE materials (3600 booklets)	360,000.00	Activities have to be started
			Display boards for peripheral dental clinics and general practices (Rs. 12500.00 X 32)	400,000.00	Activities have to be started
			Procurement of Multimedia Projector	125,000.00	Activities have to be started

Appendix 6– Covenants – As per Legal Agreement

COVENANTS - AS PER LEGAL AGREEMENTS

No.	Sched	Para No.	Description	Remarks/Issues
Loan 3727	Sect	4.02	(a) The Borrower shall (i) maintain separate accounts and records for the Project; (ii) prepare annual financial statements for the Project in accordance with financial reporting standards acceptable to ADB; (iii) have such financial statements audited annually by independent auditors whose qualifications, experience and terms of reference are acceptable to ADB, in accordance with auditing standards acceptable to ADB; (iv) as part of each such audit, have the auditors prepare a report, which includes the auditors' opinion(s) on the financial statements and the use of the Loan proceeds, and a management letter (which sets out the deficiencies in the internal control of the Project that were identified in the course of the audit, if any); and (v) furnish to ADB, no later than 6 months after the end of each related fiscal year, copies of such audited financial statements, audit report and management letter, all in the English language, and such other information concerning these documents and the audit thereof as ADB shall from time to time reasonably request.	Complied Completed Central Bank account for PMU and opened provincial account for PIUs at commercial banks Submitted 2018 final account for ADB on 2019.2.26. Submitted audited report for ADB on 2019.7.3
Loan 3727	Sect	4.02	(b) ADB shall disclose the annual audited financial statements for the Project and the opinion of the auditors on the financial statements within 14 days of the date of ADB's confirmation of their acceptability by posting them on ADB's website.	Complied Audit report for 2018 sent to ADB,
Loan 3727	Sect	4.02	(c) The Borrower shall enable ADB, upon ADB's request, to discuss the financial statements for the Project and the Borrower's financial affairs where they relate to the Project with the auditors appointed pursuant to subsection (a)(iii) hereinabove, and shall authorize and require any representative of such auditors to participate in any such discussions requested by ADB. This is provided that such discussions shall be conducted only in the presence of an authorized officer of the Borrower, unless the Borrower shall otherwise agree.	Being complied with
Loan 3727	4	3	The Borrower through the Project Executing Agency shall ensure that no Works contract for a particular Subproject will be awarded until: (a) if required under the laws and regulations of the Borrower, the Central Environmental Authority of the Borrower has granted the final approval of the IEE for that Subproject; and	Complying IEEs were prepared for 45 Lots by PwC and IEEs for second round 90 works commenced by Environment Specialist
Loan 3727	4	3	b) the Borrower through the Project Executing Agency has incorporated the relevant provisions from the relevant EMP into the Works contract.	Complying Environment Management Plan is attached to the bid document for implementation
Loan 3727	4	4	Environment The Borrower through the Project Executing Agency shall ensure that the preparation, design,	Complying IEEs were prepared for 45 Lots by

			construction, implementation, operation and decommissioning of the Project and all Project facilities comply with (a) all applicable laws and regulations of the Borrower relating to environment, health and safety; (b) the Environmental Safeguards; (c) the EARF; and (d) all measures and requirements set forth in the respective IEE, the relevant EMP, and any corrective or preventative actions set forth in a Safeguards Monitoring Report.	PwC and IEEs for second round 90 works commenced by Environment Specialist Environment Specialist commenced work for preparation of second round IEEs. Semi Annual Safeguard Monitoring report (2020) submitted to ADB. Semiannual Safeguard Monitoring report will be submitted.
Loan 3727	4	5	Involuntary Resettlement and Indigenous Peoples The Borrower through the Project Executing Agency shall ensure that the Project does not have any indigenous peoples or involuntary resettlement impacts, all within the meaning of ADB's Safeguard Policy Statement (2009). In the event that the Project does have any such impact, the Borrower shall take all steps required to ensure that the Project complies with the applicable laws and regulations of the Borrower and with ADB's Safeguard Policy Statement.	Complying No resettlements and Plans are required and follow the ADB s safeguard Policies.
Loan 3727	4	6	Human and Financial Resources to Implement Safeguards Requirements The Borrower shall make available or cause the Project Executing Agency to make available necessary budgetary and human resources to fully implement the respective EMP.	Complying Environment Consultant recruited and Monitoring the EMP commenced, Semi annual Environment monitoring report (2020 submitted to ADB.
Loan 3727	4	7	Safeguards – Related Provisions in Bidding Documents and Works Contracts The Borrower through the Project Executing Agency shall ensure that all bidding documents and contracts for Works contain provisions that require contractors to: (a) comply with the measures and requirements relevant to the contractor set forth in the respective IEE and EMP (to the extent they concern impacts on affected people during construction), and any corrective or preventative actions set out in a Safeguards Monitoring Report;	Complying Safeguard monitoring carried out and GRCs established IEE and EMP are attached to the civil works bid documents for implementation by contractor
Loan 3727	4	7	(b) make available a budget for all such environmental and social measures; and	Complying
Loan 3727	4	7	(c) provide the Borrower with a written notice of any unanticipated environmental, resettlement or indigenous peoples risks or impacts that arise during construction, implementation or operation of the Project that were not considered in the respective IEE or EMP.	Complying EMP is being implemented by contractors and monitored by PMU and PIUs. Any issue will be included on the EMP monitoring report and Safeguard Monitoring report
Loan 3727	4	8	Safeguards Monitoring and Reporting The Borrower through the Project Executing Agency shall do the following: (a) submit semi-annual Safeguards Monitoring Reports to ADB and disclose relevant information from such reports to affected persons promptly upon	Semi Annual Safeguard Monitoring report (2020) submitted to ADB Semi Annual Safeguard Monitoring report will be submitted with Quarter four 2020 Progress Report.

			submission;	
Loan 3727	4	8	(b) if any unanticipated environmental and/or social risks and impacts arise during construction, implementation or operation of the Project that were not considered in the respective IEE or EMP, promptly inform ADB of the occurrence of such risks or impacts, with detailed description of the event and proposed corrective action plan; and	Complying Action taken for issues will be informed to ADB
Loan 3727	4	8	(c) report any actual or potential breach of compliance with the measures and requirements set forth in the respective EMP promptly after becoming aware of the breach.	Complying
Loan 3727	4	9	Prohibited List of Investments The Borrower through the Project Executing Agency shall ensure that no proceeds of the Loan or Grant are used to finance any activity included in the list of prohibited investment activities provided in Appendix 5 of the SPS.	Complying
Loan 3727	4	10	Labor Standards, Health and Safety The Borrower through the Project Executing Agency shall ensure that the core labor standards and the Borrower's applicable laws and regulations are complied with during Project implementation. The Borrower shall include specific provisions in the bidding documents and contracts financed by ADB under the Project requiring that the contractors, among other things: (a) comply with the Borrower's applicable labor law and regulations and incorporate applicable workplace occupational safety norms; (b) do not use child labor; (c) do not discriminate workers in respect of employment and occupation; (d) do not use forced labor; (e) allow freedom of association and effectively recognize the right to collective bargaining; and (f) disseminate, or engage appropriate service providers to disseminate, information on the risks of sexually transmitted diseases, including HIV/AIDS, to the employees of contractors engaged under the Project and to members of the local communities surrounding the Project area, particularly women.	Complying Contractor responsible for Laws and regulations for labor standard HIV/AIDS awareness programs will be conducted by PIUs.
Loan 3727	4	11	The Borrower shall strictly monitor compliance with the requirements set forth in paragraph 10 above and provide ADB with regular reports.	Complying Any labor issue will be included in the QPRs
Loan 3727	4	12	Gender and Development The Borrower shall ensure that (a) the GAP is implemented in accordance with its terms; (b) the bidding documents and contracts include relevant provisions for contractors to comply with the measures set forth in the GAP; (c) adequate resources are allocated for implementation of the GAP; (d) progress on implementation of the GAP, including progress toward achieving key gender outcome and output targets, are regularly monitored and reported to ADB; and (e) key gender outcome and output targets include the following:	Complying Gender Specialist recruited for implementation and monitoring of GAP
Loan 3727	4	12	(i) by 2020, sex disaggregated data shall be included in the electronic health surveillance system	Complying

			of the Borrower in the Project Provinces;	
Loan 3727	4	12	(ii) by 2020, 11 units of the Family Health Bureau of the Ministry of Health, Nutrition and Indigenous Medicine have integrated gender dimensions into all of their policies and strategic plans; and	Complying Progress will be included in the QPRs
Loan 3727	4	12	(iii) by 2023, over 25% of PHC staff (of which at least 35% are women) of the Project Provinces have received training on gender concepts.	Not yet due
Loan 3727	4	13	Counterpart Funds The Borrower shall ensure: (a) sufficient counterpart funds from its budget for each fiscal year, in a timely manner, for the efficient implementation of the Project; and	Complying PMU collecting budget estimates from PIUs and submit sufficient budget estimates for annual budget
Loan 3727	4	13	(b) adequate funds towards operations and maintenance of Project facilities, through budgetary allocations or other means, to be provided to the Project Executing Agency, during and after Project completion.	Complying MoH will include additional budget for maintenance
Loan 3727	4	14	Financial Matters The Borrower shall ensure or cause the Project Executing Agency to ensure that the agreed financial management action plan set out in the PAM is implemented within the stipulated time frame and the progress toward achieving the targets are monitored and reported to ADB.	Complying Follow the government and ADB policies
Loan 3727	4	15	Governance and Anticorruption The Borrower, the Project Executing Agency and the implementing agencies shall (a) comply with ADB's Anticorruption Policy (1998, as amended to date) and acknowledge that ADB reserves the right to investigate directly, or through its agents, any alleged corrupt, fraudulent, collusive or coercive practice relating to the Project; and (b) cooperate with any such investigation and extend all necessary assistance for satisfactory completion of such investigation.	Complying Follow the government and ADB policies
Loan 3727	4	16	The Borrower, the Project Executing Agency and the implementing agencies shall ensure that the anticorruption provisions acceptable to ADB are included in all bidding documents and contracts, including provisions specifying the right of ADB to audit and examine the records and accounts of the executing and implementing agencies and all contractors, suppliers, consultants, and other service providers as they relate to the Project.	Complying Follow the government and ADB policies
Grant 0618	Sect	4.02	(a) The Recipient shall (i) maintain separate accounts and records for the Project; (ii) prepare annual financial statements for the Project in accordance with financial reporting standards acceptable to ADB; (iii) have such financial statements audited annually by independent auditors whose qualifications, experience and terms of reference are acceptable to ADB, in accordance with auditing standards acceptable to ADB; (iv) as part of each such audit, have the auditors prepare a report, which includes the auditors' opinion(s) on the financial statements and the use of the Grant	Complying Separate accounts are already opened

			proceeds, and a management letter (which sets out the deficiencies in the internal control of the Project that were identified in the course of the audit, if any); and (v) furnish to ADB, no later than 6 months after the end of each related fiscal year, copies of such audited financial statements, audit report and management letter, all in the English language, and such other information concerning these documents and the audit thereof as ADB shall from time to time reasonably request.	
Grant 0618	Sect	4.02	(b) ADB shall disclose the annual audited financial statements for the Project and the opinion of the auditors on the financial statements within 14 days of the date of ADB's confirmation of their acceptability by posting them on ADB's website.	Complying
Grant 0618	Sect	4.02	(c) The Recipient shall enable ADB, upon ADB's request, to discuss the financial statements for the Project and the Recipient's financial affairs where they relate to the Project with the auditors appointed pursuant to subsection (a)(iii) hereinabove, and shall authorize and require any representative of such auditors to participate in any such discussions requested by ADB. This is provided that such discussions shall be conducted only in the presence of an authorized officer of the Recipient, unless the Recipient shall otherwise agree.	Complying

Appendix 7 – Progress of Financial Management Action plan

Financial Management Action Plan

S. No.	Risk Area	Description	Timeline	Responsibility	Status
1.	Staffing and capacity building	PMU will be staffed with a Finance Officer and each PIU will be staffed with a full time Accountant	By loan negotiations	MOHNIM (PMU) and Four Provinces (PIUs)	PMU has staffed a finance officer. All PIUs except Uva staffed with a full-time accountant. Action is going to be taken a full time Accountant for PIU Uva withing few months.
2.	Staffing and capacity building	Recruitment of FM Expert as Individual Consultant to build the capacity of PMU and PIUs on an intermittent basis	Before loan effectiveness	MOHNIM (PMU)	Removed
3.	Staffing and capacity building	PMU and PIU Accountants to be trained on ADB's disbursement procedures by attending training	Upon deployment and ongoing	MOHNIM (PMU) and Four Provinces (PIUs)	Completed
4.	Internal Audit	MOHNIM – PMU to advertise recruitment of Internal Auditor to conduct audit of PMU and PIUs on semi-annual basis (Sample scope of work attached in Appendix 2 of FMA)	Upon loan effectiveness	MOHNIM (PMU) and Four Provinces (PIU)	Completed
5.	Timely release of ADB fund	MOHNIM to open separate advance accounts for loan and grant at Central Bank of Sri Lanka for the proposed project MOHNIM to open sub-accounts for PMU (separate bank accounts for loan and grant) for receiving funds from Central Bank of Sri Lanka Respective Provincial Governments to open sub-accounts (separate bank accounts for loan and grant) at Provincial Government level	Upon loan effectiveness	MOF, MOHNIM and Provinces	Completed
6.	Timely release of ADB fund	Release of funds from advance account to MOHNIM (PMU) sub-account and from MOHNIM (PMU) to four Provinces (PIUs) sub- account shall be within a maximum of two weeks of receipt of request.	Upon loan effectiveness	MOF and MOHNIM	Complied

S. No.	Risk Area	Description	Timeline	Responsibility	Status
7.	Timely release of counterpart fund	Counterpart funds to be released to PMU within two weeks of release of funds from ADB MOHNIM-PMU to open separate bank account for receiving counterpart funds from Treasury. Respective Provincial Governments to open bank account for receiving counterpart funds from MOHNIM-PMU.	Upon loan effectiveness	MOHNIM and Provinces	Complied
8.	Information systems	PMU and PIUs to procure an accounting software, preferably an off-the-shelf to enable project accounting and reporting	Upon loan effectiveness	MOHNIM (PMU) and Four Provinces (PIU)	Complied
9.	Internal control (fixed asset maintenance)	PMU and PIUs to maintain separate Fixed Asset Register for assets procured under the Project	On-going	MOHNIM (PMU) and Four Provinces (PIU)	Complied
10.	Timely submission of APFS	MOHNIM (PMU) and Provincial Governments (PIUs) to complete preparation of project financial statements within 2 months of the end of the FY and present to AGD for audit	Within 2 months of end of FY	MOHNIM (PMU) and Four Provinces (PIU)	Completed
11.	Timely submission of APFS	Submission of annual audited project financial statements (APFS)	Within 6 months from the end of every financial year	MOHNIM (PMU) in consultation with AGD	Completed
12.	Timely resolution of audit observations	MOHNIM PMU to address audit observations raised in the AGD's Audit report	Every year, before submission of next year's APFS	MOHNIM and four Provinces along with AGD's office	Completed
13.	Internal Control	Audit and Management Committees at Provinces to meet regularly based on the sample TOR in Appendix 1 of FMA	During project implementation	Four Provinces	Setup the Project Internal Audit review committee as per the Department of Management Audit circular DMA/PRF/10/2019/01 and held the committee with the approved officers

14.	Reporting and monitoring	MOHNIM PMU to submit quarterly financial and disbursement reports to ADB including status of FM Action Plan	Ongoing on a quarterly basis	MOHNIM (PMU) and Four Provinces (PIU)	Complied

ADB = Asian Development Bank, APFS = audited project financial statements, FMA = financial management assessment, MOHNIM = Ministry of Health, Nutrition and Indigenous Medicine, PIU = project implementation unit, PMU

= project management unit.

Appendix 8 – Implementation Progress of Project Schedule

	Package No.		Progress	Adv. Act. 2018 Q3	Adv. Act. 2018 Q4	Year 1 2019 Q1	Year 1 2019 Q2	Year 1 2019 Q3	Year 1 2019 Q4	Year 2 2020 Q1	Year 2 2020 Q2	Year 2 2020 Q3	Year 2 2020 Q4	Year 3 2021 Q1	Year 3 2021 Q2	Year 3 2021 Q3	Year 3 2021 Q4	Year 4 2022 Q1	Year 4 2022 Q2	Year 4 2022 Q3	Year 4 2022 Q4	Year 5 2023 Q1	Year 5 2023 Q2	Year 5 2023 Q3	Year 5 2023 Q4	Assigned Weight	Actual Progress	Weighted Progress
		Output 1 Primary health care enhanced in Central, North Central, Sabaragamuwa, and Uva provinces																									
1.1		**Development of primary medical care services**																									
1.1.1	W 1-9	**Physical infrastructure development of PMCUs and DHs (Round 1: 45 facilities across 9 districts)**																									
		Agree on the physical infrastructure requirements at the PMCUs and DH OPD units	Completed			➡																				0.5%	100%	0.500%
		Agree on norm / standard space allocations for different levels of PHC	Completed			➡																				0.5%	100%	0.500%
		Complete visits by Structural engineer to 35% (45) of facilities	Completed			➡																				0.5%	100%	0.500%
		Prepare cost estimates for each of the 45 PHCs visited	Completed			➡																				0.5%	100%	0.500%
		Finalize the designs, BOQs for the 45 first round facilities (with PPTA team assistance)	Completed				➡																			1.0%	100%	1.000%
		Finalize the bid documents for the first-round civil works tenders	Completed					➡																		0.5%	100%	0.500%
		Advertise tender for the for 45 facilities to be covered in first round	Completed					➡																		0.5%	95%	0.475%
		Award the first-round tender for the 45 facilities (9 tenders)	Completed					➡																		1.0%	97%	0.970%
		Initiate construction supervision of the first-round facilities by D&S firm	Completed						➡	➡																1.0%	100%	1.000%
		Complete the first-round construction of 45 facilities	On going					➡	➡	➡																2.0%	0%	0.000%
1.1.2	W 10-18	**Physical infrastructure development of PMCUs and DHs (Round 2: 90 facilities across 9 districts)**																									0.000%
		Initiate designs for the second round 90 facilities by D &S firm	On going						➡																	0.5%	0%	0.000%
		Complete designs, BOQs for 90 facilities by D&S firm	On going						➡	➡																1.0%	0%	0.000%
		Advertise the tender for construction of 90 facilities	Not yet started																							0.5%	0%	0.000%
		Award tender for construction of 90 facilities	Not yet started																							1.0%	0%	0.000%
		Provide construction supervision (by D&S firm)	Not yet started																							1.0%	0%	0.000%
		Complete second round of construction of PMCUs and DHs	Not yet started																							2.0%	0%	0.000%
1.1.3		**Provide medical equipment to PMCUs and DHs in the target provinces**																									0.000%
		Finalize medical equipment items and quantities and distribution (agreed list in PAM)	Completed				➡																			0.5%	100%	0.500%
		Prepare/consolidate specifications for each item of medical equipment	Completed					➡	➡	➡																0.5%	100%	0.500%
1.1.3.1	G- 4	Develop the draft bid document for Laboratory, Physiotherapy and X-ray equipment	Completed																									0.000%
		RFQ 1 (Biochemistry Analyzer - Semi-Automated)	Completed						➡																	0.1%	100%	0.063%
		RFQ 2 (Coagulation Analyzers - Semi Automated, Hematology Analyzer - Five Part & Three Part)	Completed						➡																	0.1%	100%	0.063%
		RFQ 3 (Incubators and Hot Air Oven)	Completed						➡																	0.1%	100%	0.063%
		RFQ 4 (Autoclave)	Completed						➡																	0.1%	100%	0.063%
		RFQ 5 (Microsope Binocular)	Completed						➡																	0.1%	100%	0.063%
		RFQ 6 (Centrifuges (16 bucket)	Completed						➡																	0.1%	100%	0.063%
		RFQ 7 (Physiotherapy equipment)	Completed						➡																	0.1%	100%	0.063%
		LCB 1 (Digital Radiographic Panel and Biochemistry Analyzer - Fully Automated)	Completed						➡																	0.1%	100%	0.063%
		Advertise 7 RFQs and 1 LCB tenders for Laboratory, Physiotherapy and X-ray equipment	On going							➡																1.0%	88%	0.875%
		Award 7 RFQs and 1 LCB tender for Laboratory, Physiotherapy and X-ray equipment	On going							➡																2.0%	25%	0.500%
1.1.3.2	G- 5	Develop the draft bid document for goods (RH and nutrition equipment)	Completed						➡																	0.3%	100%	0.250%
		Advertise RH and nutrition equipment	Completed							➡																0.3%	0%	0.000%
		Award RH and nutrition equipment	On going							➡																0.3%	80%	0.200%
1.1.3.3	G- 7	Develop the draft bid document for goods (NCDs equipment)	Completed					➡																		0.3%	100%	0.250%
		Advertise tender for NCDs equipment	Completed					➡																		0.5%	100%	0.500%
		Award tender for NCDs equipment (by PMU)	Completed						➡																	0.5%	100%	0.500%
1.1.3.4	G- 6	Develop the draft bid document for goods (Dental equipment)	Completed						➡																	0.5%	100%	0.510%
		Advertise tender for Dental equipment	Completed						➡																	1.0%	100%	1.000%
		Award tender for Dental equipment (by PMU)	On going						➡																	1.0%	0%	0.000%
1.1.3.5	G-8	Develop the draft bid document for goods (ETU equipment)	Completed																							0.5%	100%	0.510%
		Advertise the tender for ETU equipment	Completed																							0.5%	100%	0.500%
		Award the tender for ETU equipment	On going																							1.0%	60%	0.600%
1.1.4		**Provide medical and general furniture to refurbish PMCUs and DHs (2 rounds)**																									0.000%
		Discuss/ develop norms for medical and general furniture by level of facility	Completed							➡	➡	➡														0.5%	100%	0.500%
	G 10-11	Finalize medical / general furniture needs, distribution plan (round 1)	Completed							➡	➡	➡														0.5%	100%	0.500%
		Prepare/consolidate specifications for medical furniture (round 1)	Not yet started																							0.5%	100%	0.500%
		Develop the draft Bid documents for goods (furniture) for Round 1 (45 facilities)	Completed																							0.5%	50%	0.250%
		Advertise the 2 tenders for medical and general furniture for round 1 (45 facilities)	Ongoing																							1.0%	50%	0.500%
		Award tenders for furniture (medical and general) with staggered delivery (45 facilities)	Not yet started																							0.5%	0%	0.000%
	G 21-22	Finalize medical / general furniture needs, distribution plan (round 2)	Not yet started																							0.5%	0%	0.000%
		Prepare/consolidate specifications for medical furniture (round 2)	Not yet started																							1.0%	0%	0.000%
		Advertise and award tender for medical and general furniture (90 facilities)	Not yet started																							1.0%	0%	0.000%
1.1.5		**Provide additional medical equipment for Essential Service Package**																									0.000%
	G- 23	Finalize additional medical equipment needs and quantities for implementation of ESP	On going							➡																0.5%	0%	0.000%
		Finalize the medical equipment distribution plan by facility	Not yet started																							0.5%	0%	0.000%
		Prepare/consolidate specifications for each item of medical equipment	Not yet started																							0.5%	0%	0.000%
		Prepare bid documents	Not yet started																							0.5%	0%	0.000%
		Advertise and Award tenders for additional medical equipment for ESP	Not yet started																							2.0%	0%	0.000%

1.2		**Development of primary preventive care services**																											0.000%
1.2.1		**Development of Field Health Centers (FHCs)**																											0.000%
	W- 20	Finalize the field health center list from all 9 districts (127 FHCs)	Completed							➡																0.5%	100%	0.500%
		Finalize designs and cost estimates by D&S firm	Not yet started																							1.0%	0%	0.000%
		Develop bid documents and award field health center civil works tenders	Not yet started																							0.5%	0%	0.000%
		Construction supervision of 127 field health centers by D &S firm	Not yet started																							2.0%	0%	0.000%
1.2.2		**Provision of vehicles for PHC services (all 67 vehicles)**																											0.000%
	G- 1	Develop a province level vehicles fleet analysis and justification	Completed	➡	➡																					0.3%	100%	0.250%
		Finalize the specifications, distribution plan by name of facility, and Bid documents (Lot 1:42 vehicles)	Completed			➡	➡																			0.3%	100%	0.250%
		Finalize the Bid documents (Lot 1:42 vehicles)	Completed					➡																		0.5%	100%	0.500%
		Advertise the tender for Vehicles (Lot 1:42 vehicles)	Completed						➡																	0.5%	100%	0.500%
		Award tender for vehicles (Lot 1:42 vehicles)	Completed																							0.3%	100%	0.250%
		Finalize the specifications, distribution plan by name of facility, and Bid documents (Lot 2:25 vehicles)	Completed							➡	➡	➡	➡													0.3%	100%	0.250%
		Finalize the Bid documents (Lot 2:25 vehicles)	Completed							➡	➡	➡	➡													0.5%	100%	0.500%
		Advertise the tender for Vehicles (Lot 2:25 vehicles)	Completed							➡	➡	➡	➡													0.5%	100%	0.500%
		Award tender for vehicles (Lot 2:25 vehicles)	Not yet started																							1.0%	0%	0.000%
1.2.3		**Consultancy firm for local level nutrition services and training in nutrition counselling for PHC staff**																											0.000%
	S- 14	Develop draft TOR for consultancy firm	Completed						➡																	0.3%	100%	0.250%
		Advertise for EOI	Completed							➡																0.3%	100%	0.250%
		Shortlisting of EOI and develop RFP for consultancy firm	Completed							➡																0.3%	100%	0.250%
		RFP from shortlisted firms and evaluation	Completed																							0.3%	100%	0.250%
		Award the tender	Not yet started																							0.5%	0%	0.000%
		Implement the tasks and complete the consultancy	Not yet started																							1.0%	0%	0.000%
1.3		**Public awareness and BCCM for increasing PHC utilization**																											0.000%
	S- 3	Finalize strategy for BCCM for encouraging PHC utilization	Completed																							0.5%	100%	0.500%
		Develop and Finalize the TOR for hiring a communications firm	Completed				➡	➡																		0.3%	100%	0.250%
		Advertise for EOI	Completed							➡																0.3%	100%	0.250%
		Shortlisting of EOI and develop RFP for consultancy firm	Completed							➡																0.3%	100%	0.250%
		RFP from shortlisted firms and evaluation	Not yet started																							0.3%	0%	0.000%
		Award the tender	Not yet started																							0.5%	0%	0.000%
		Develop KAP material and roll out of the BCCM campaign	Not yet started																							0.5%	0%	0.000%
1.4		**PHC Innovation fund**																											0.000%
		Develop draft guideline for use of resources	Completed				➡																			0.5%	100%	0.500%
		Inform the availability eligible activities for accessing PHC innovation fund	Completed				➡	➡																		0.5%	100%	0.500%
		Establish review committees for PHC innovation fund management at PIU levels	Completed				➡	➡																		0.5%	100%	0.500%
		Entertain proposals for review and award	On going					➡																		1.0%	20%	0.200%
		Output 2 - Health information system and disease surveillance capacity strengthened																											0.000%
2.1		**Health information technology for continuity of care and disease surveillance**																											0.000%
2.1.1		**Consulting firm to develop HIT system for PHC and Clusters**																											0.000%
	S- 4	Develop TOR for software consulting firm for establishing HIT at PHC/ cluster level	Completed						➡																	0.5%	100%	0.500%
		Advertise for EOI	Completed							➡																0.5%	100%	0.500%
		Shortlisting of EOI and develop RFP for consultancy firm	Completed							➡																0.3%	100%	0.250%
		RFP from shortlisted firms and evaluation	Completed							➡																0.3%	100%	0.250%
		Award the tender	Not yet started																							0.5%	0%	0.000%
		Discuss and develop/ adapt software for the rollout of the EMR/PBS system	Not yet started																							1.0%	0%	0.000%
		Roll out the HIT system in the 9 clusters	Not yet started																							2.0%	0%	0.000%
2.1.2		**Computers and Peripherals for HIT and GIS units**																											0.000%
	G- 12.1	Finalize the computers and peripherals for the GIS units	Completed				➡																			0.3%	100%	0.250%
		Develop the specifications of all required IT system related computers and peripherals GIS units	Completed				➡	➡																		0.3%	100%	0.250%
		Advertise tender for GIS related computers and peripherals	Completed					➡																		0.5%	100%	0.500%
		Award tender for GIS computers and peripherals	Completed						➡																	0.5%	100%	0.500%
	G- 12	Finalize the computers and peripherals for the HIT system in clusters	Not yet started																							0.5%	0%	0.000%
		Develop the specifications of all required IT system related computers and peripherals	Not yet started																							0.3%	0%	0.000%
		Advertise tender for HIT related computers and peripherals	Not yet started																							0.3%	0%	0.000%
		Award tender for HIT system computers and peripherals	Not yet started																							0.5%	0%	0.000%
2.1.3	G- 16	**Connectivity to PHCs**																											0.000%
		Develop Bid document for establishing IT connectivity to all PHCs in the provinces	Completed							➡																1.0%	100%	1.000%
		Advertise tender for connectivity and maintenance	Completed							➡																0.5%	100%	0.500%
		Award tender for connectivity and maintenance	Not yet started																							2.0%	0%	0.000%
2.1.4		**Training for HIT system**																											0.000%
		Develop training program to introduce HIT in clusters to staff	Not yet started																							0.5%	0%	0.000%
		Roll out the training for HIT (details in training plan)	Not yet started																							0.5%	0%	0.000%
		Pilot roll out of the HIT system in 9 clusters	Not yet started																							2.0%	0%	0.000%
2.1.5		**Establish GIS units in provinces and districts**																											0.000%
	S- 8	Develop TOR for GIS consultant to support MOHNIM and the provinces on GIS	Completed						➡																	0.5%	100%	0.500%
		Advertise to hire the GIS consultant	Completed							➡																0.5%	100%	0.500%
		Contract the services of a GIS consultant	Completed							➡																1.0%	100%	1.000%

2.2		**Support to implementation of IHR related to ports of entry (POE)**																											0.000%
2.2.1		**Support to Quarantine Unit**																											0.000%
	G 9,13&14	Finalize specifications and distribution plan for quarantine unit and POEs	Completed																							0.5%	100%	0.500%
		Develop Bid documents (3 tenders) for quarantine unit computers, furniture and QRMIS	Completed																							0.5%	100%	0.500%
		Advertise and award tenders (2 tenders)	Completed																							0.5%	100%	0.500%
		Carry out training of quarantine staff (details in training plan)	Not yet started																							1.0%	0%	0.000%
	S- 19	Develop TOR for Legal consultant	Completed																							0.5%	100%	0.500%
		Advertise, award and engage a consultant (legal)	Completed																							1.0%	100%	1.000%
2.2.2		**Support to Epidemiology Unit**																											0.000%
	G- 15	Develop and finalize specifications for the servers and develop shopping document																								0.5%	0%	0.000%
		Advertise tender for servers																								0.5%	0%	0.000%
		Award tender for servers																								1.0%	0%	0.000%
	S- 9	Develop and finalize the TORs for the IT specialist for the Epidemiology Unit																								0.5%	100%	0.500%
		Advertise for IT specialist for epidemiology unit																								0.5%	100%	0.500%
		Engage the services of an IT specialist for the epidemiology unit																								1.0%	0%	0.000%
2.2.3		**Improving infection control and prevention**																											0.000%
		Training on development of PHC level IPC module and exposure visit	Not yet started																							0.5%	0%	0.000%
		Develop a training module on Infection control with College of Microbiologists and NIHS	Not yet started																							0.5%	0%	0.000%
		Roll out training program of PHC staff from the 4 target provinces	Not yet started																							1.0%	0%	0.000%
2.2.4		**Support to Health care waste Management**																											0.000%
		Develop a standard design for waste storage at different levels of facilities	Completed																							0.5%	100%	0.500%
		Develop relevant bidding document for HCW storage space in all cluster facilities	Completed																							0.5%	100%	0.500%
		Advertise and award tender at PIU level for construction of storage space	Not yet started																							1.0%	0%	0.000%
	G 17-18	Develop bid documents for purchase of HCWM equipment, furniture to clusters	Completed																							0.5%	100%	0.500%
		Advertise and award tenders for HCWM equip and furniture to clusters	Not yet started																							1.0%	0%	0.000%
		Carry out workshops/ discussions to develop HCWM plans for each cluster (In progress)	Completed																							0.5%	50%	0.250%
		Roll out training on HCWM (details in training plan)	Completed																							1.0%	50%	0.500%
2.2.5	S- 13	**Support to implementation of inbound health assessment services**																											0.000%
		Develop TOR for consultancy for developing guidelines for inbound assessment facility																								0.0%	0%	0.000%
		Advertise and engage the services of an individual consultant																								0.0%	0%	0.000%
2.2.6		Reallocation for Covid 19 activities	On going																							1.0%	34%	0.340%
3		**Output 3 - Policy development, capacity building, and project management supported**																											0.000%
3.1		**Policy development support**																											0.000%
		Develop TORs (7) for consultants (ESP, Cluster, HRH, Env)	Completed																							0.3%	100%	0.250%
		Advertise (7) for consultants (ESP, Cluster, HRH , Env)	Completed																							0.3%	100%	0.250%
		Advertise FMS	Completed																							0.3%	100%	0.250%
		Advertise Gender and Social Safeguard	Completed																							0.3%	100%	0.250%
3.1.1		Award consultancies for ESP, Cluster, HRH, Env	Completed																							0.5%	100%	0.500%
		Award consultancies FMS	On going																							0.5%	0%	0.000%
		Award consultancies Social Safeguard	Completed																									0.000%
		Award consultancies Gender	Completed																									0.000%
3.2		**Capacity Building**																											0.000%
3.2.1		Roll out training for PHC staff and others (training plan in Cost sheet and PAM)	Not yet started																							1.0%	0%	0.000%
3.2.2		**Support to establishment of a Distance Learning Facility at NIHS**																									0%	0.000%
		Develop bid documents, advertise, award tender (2) for computers, furniture, equip.	On going																							0.5%	0%	0.000%
		Develop bid documents, advertise and award tenders for civil works renovations	On going																							0.5%	0%	0.000%
		Engage the services of 3 consultants to develop portal, external evaluation, course content	On going																							0.5%	30%	0.150%
		Develop training plans and carry out training programs via distance learning	Not yet started																							1.0%	0%	0.000%
3.3		**Project management and results monitoring**																											0.000%
3.3.1		**Project results monitoring baseline and endline surveys**																											0.000%
		Develop TOR to carry out two surveys for results monitoring at baseline and endline	Completed																							0.5%	100%	0.500%
		Advertise the tender for consultancy	Completed																							0.5%	100%	0.500%
		Award the tender for completion of baseline surveys and endline surveys	Completed																							1.0%	100%	1.000%
3.3.2		**Design and supervision consultancy for civil works**																											0.000%
		Finalize the TOR for the D&S consulting firm	Completed																							0.3%	100%	0.250%
		Advertise for EOI	Completed																							0.3%	100%	0.250%
		Shortlisting of EOI and develop RFP for consultancy firm	Completed																							0.5%	100%	0.500%
		RFP from shortlisted firms and evaluation	Completed																							0.5%	100%	0.500%
		Award the tender to consulting firm to design and supervise construction of PHCs	Completed																							1.0%	100%	1.000%
3.3.3		**PMU/PIU Operations**																											0.000%
		Advertise for renting of project office space (PMUs and PIUs)	Completed																							0.5%	100%	0.500%
		Develop the bid documents for furniture and equipment for PMU/PIU (2 tenders)	Completed																							0.5%	100%	0.500%
		Advertise and award the tenders for furniture and equipment for PMU/PIU	Completed																							1.0%	100%	1.000%
3.3.4		Inception mission	Completed																							1.0%	100%	1.000%
3.3.5		Review of environmental management plan and other safeguard documents	Completed																							1.0%	100%	1.000%
3.3.6		Review and finalize gender action plan key activities	Completed																							1.0%	100%	1.000%
3.3.7		Implementation of gender action plan	On going																							1.0%	10%	0.100%
3.3.8		Project completion report	Not yet started																							1.0%	0%	0.000%
																									Total		**100.0%**		**47.7%**

Appendix 9

Progress of Establishing GIS Cells

Under the guidance of Health Services Enhancement Project (HSEP), thirteen (13) GIS cells have been established within the project area. Four (4) cells are initiated in North-Central, Central, Sabaragamuwa and Uva PDHS offices and under them there are nine (9) cells established in RDHS offices. The GIS cell is functioned within Planning Unit of each office and two officers are assigned as operators of the cell at each location. Most of them are IT officers, IT assistants or Development officers.

HSEP has provided two desktop PCs to each GIS cells and for each of nine GIS cells at RDHS offices, five tablet PCs are provided for field data collection. It was decided to use free-and-open-source software (FOSS) products for GIS work and the PCs are set up with latest version of QGIS software. Some planning units have allocated printer facilities to these computers.

With the guidance of the Project Director-HSEP and the suggestions of the Health Informatics Division of the MOHIMS, a two-day introductory training was designed as an awareness program. This training was conducted in all nine Districts and more than 150 officers including Medical officers, Development officers, IT officers/IT assistants, Public health officers (PHIs), Public health midwives (PHMs) were trained in this training programs.

The second training program was conducted for only the personnel allocated for GIS cells on “How to create a customized form to collect field data using tablet PCs”. This was conducted online (using Google Meets). The objective of the training program was to enhance the capacity of officers of GIS cells to develop forms which should assist field data collection of PHIs and PHMs.

The main objective of the GIS cells is to develop spatial databases to manage data related to health services. Using these digital databases, it should enhance disease diagnosis, disease surveillance, resource management, planning & monitoring, evaluation and overall decision-making process. Also, this should uplift the process of data / information sharing and integration.

As the first task the GIS cells have worked on developing digital database of the administrative divisions such as MOH, PHI and PHM divisions. Majority of cells have already completed the task and now moving on to feeding health related data such as Mother-and-Child care data, Dengue & Malaria surveillance, tracing of COVID-19, Non-commutative Disease related data, etc.

Meanwhile forming sub-GIS cells at cluster level has been started and the first training was conducted in Medirigiriya MOH office. Sub GIS cells are going to be functioned as the data collection hubs and also data verification stations of the network.

Once the cells become fully functional, it is expected to connect GIS cells in hierarchical level to share and use spatial data for decision making in different tiers.

Training Program at Monaragala RDHS

Training Program at Nuwara Eliya RDHS

Training Program at Mathale RDHS

GIS cell in Anuradhapura RDHS

Training on field data collection at Medirigiriya cluster (MOH)

Appendix 10

Annual Report on Human resources development and Human Resources management in the primary Health care delivery system in the project area namely central province,Sabaragamuwa province,uva province and north central province

Health System Enhancement Project

Executive summary

Introduction

HSEP project area consists of four provinces mainly central, uva, sabaragamuwa and north central province. The beneficiary population of the project is approximately 7million which is 33% of the Sri Lanka population (21million) while the target population within the four provinces, is estimated to be approximately 2.4 million. (HSEP 2018). According to the TOR of the consultancy of HRH, HSEP Project, an attempt was made to identify HRH needs, training needs, HRH management issues – sharing arrangement for the nine clusters, to prepare a HRH, PHC road map – strategic plan for providing services via clusters, availability of job description of different categories of staff.

Methodology

Desk review of annual health bulletin 2017 MOH Sri Lanka, health policy 2016 – 2025, National human resources for health strategic plan 2016 – 2025, health master plan 2016 – 2025 and analysis of HR data available in the nine Apex hospitals, 66 Divisional hospitals (DH), 13 PMCU's (105 cluster hospitals) in the HSEP project area, through website search of Ministry of Health and respective provincial health Ministries. KII were conducted with Deputy project Directors, RDHSS, MSS of the selected hospitals and MOh's of the field area through face-to-face consultation during filed visits before Covid-19 out break and through virtual meetings during lock down period.

Results

- Except Sabaragamuwa Province all the other Provinces namely Central Province, Uva Province, North Central Province had their vision statement, mission statement and objectives to achieve higher health status for their respective Provinces.
- Central Ministry of Health plays the lead role in determining the numbers, recruitment, training, deployment, ensuring the right numbers of Human Resources are available in the right place and the right time who have the right attitude and skills to perform and achieve organizational objectives.
- To provide curative health care services from nine Apex hospitals even though they need nine medical administrators approved cadre is 01, no additional cadres are requested and only 01 is available. For medical consultants approved cadre is 29 and 33 in position and additionally 06 are requested even though need for consultant dental cadre is 06 approved cadre is 01 and it is also vacant and no additional cadres requested.
- The higher number of vacancies exists namely for Nurses, Mid wives, saukya karya sahayaka, 290, 26 and 112 respectively in the nine Apex hospitals in the HSEP project area.

- The higher number of vacancies exists among category of staff namely medical, nurses, hospital mid wives, development officers, saukya karya sahayaka(junior), 96, 153, 135, 72 and 209 respectively. Additional cadres were requested for the category of staff namely medical, nurses, 126, 110 respectively cluster hospitals in the HSEP project area.

- HRH situation of the offices of the deputy project Directors (PDHS), RDHS offices and HRH data on training units were not done due to HRH data was not received even though repeated requests were sent to the PIU's of the respective provinces for analysis.

- Provincial HRH activity plan was prepared under HRH planning, HRH management (service quality improvement, good governance/clinical governance), HRH training for health work force and risk factor reduction and sent to respective PIU's of the provinces to include in their annual District and Provincial Health action plans for implementation.

- Provincial HRH strategic plan was prepared and sent to respective PIU's of the Provinces for implementation. The provincial HRD units should be established and improve the communication with the HRD unit of the Ministry of Health and other HR units (under DDGMS1, DDGMS2, DDG planning and other DDG's).

- Medical officers' vacancies in the PMCI were analyzed and informed ministry of health to fill the vacancies in the phase manner

- TOT programs prepared in Sinhala and English medium to improve the quality and safety of the primary health care institutions in the HSEP project area.

Total MO vancies to be filled in cluster hospitals

Cluster	Phase 1	Phase 2	Phase 3
	No MOs to fill approved cadre	MOs present, need to fill Vacancies in the approved cadre	Additional requested cadre
Kegalle District – Karawanella Cluster	7	8	0
Rathnepura District – Kahawatta Cluster	7	9	0
Anuradhapura District – Thambuththegama Cluster	2	5	0
Polonnaruwa District – Medirigiriya Cluster	2	4	0
Badulla District – Welimada Cluster	5	9	0
Moneragala District – Bibile Cluster	5	0	0
Nuwara Eliya District – Rikillagaskada Cluster	1	20	3
Kandy District – Theldeniya Cluster	4	11	12
Matale District – Dambulla Cluster	4	5	3
Total	**37**	**71**	**18**

Conclusions/Recommendation

- Medical officers' vacancies in the PMCI's should be filled make use of the difficult station list or make suitable arrangements by the provinces to cater to needs of the respective PMIC's in the project area.

Medical Officers in PMCI's in HSEProject Area

No of PMCUs	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
40	26	23	3	22

Medical Officers in DH's in HSEProject Area

No of DHs	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
65	185	121	66	45

- Appointment of PHNO's to respective Apex Hospitals to cater to the needs of PHCI's of the project area or provinces should make suitable arrangements to get services of the existing nurses in the hospitals by giving the necessary training.

Nursing Officers in PMCI's in HSEProject Area

No of PMCUs	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
40	0	2	-2	19

Moneragala 03
Badulla 04
Polonnaruwa 04
Nuwara Eliya 03
Matale 05

Nursing Officers in DH's in HSEProject Area

No of DHs	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
65	360	263	97	39

- HRH training program could be implemented by developing the capacities of the training Institutes in the provinces.
  Ex. Virtual training sessions were conducted on health care quality and safety in the HSEP project area.
- Existing performance appraisal mechanism could be improved using the available formats.

- Informed Director General of Health services to update and upload the ministry website to include duty list – job description of the categories of staff in the HSEP project area.

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SECTION 01

Annual Report on Human resources development and Human Resources management in the primary Health care delivery system in the project area namely central province,Sabaragamuwa province,uva province and north central province.

Introduction

The project is targeting all nine districts in four provinces of Central, North Central, Sabaragamuwa, and Uva with a special focus on the geographically, socially, and economically-deprived populations. The beneficiary population of the project is approximately 7million which is 33% of the Sri Lanka population (21million) while the target population within the four provinces, is estimated to be approximately 2.4 million.(HSEP 2018)

Human resources for health (HRH) or health workforce – is defined as "all people engaged in actions whose primary intent is to enhance health", according to the World Health Organization's World Health Report 2006.[1] Human resources for health are identified as one of the core building blocks of a health system.[2] They include physicians, nursing professionals, midwives, dentists, allied health professions, community health workers, social health workers and other health care providers, as well as health management and support personnel – those who may not deliver services directly but are essential to effective health system functioning, including health services managers, medical records and health information technicians, health economists, health supply chain managers, medical secretaries and others. In this context attempt is made to do a situational analysis of the HR Development and HR Management activities taking place in the delivery of primary health care services in the HSE Project area. It is stated in the National Human Resources for health strategic plan 2016 -2025 Health sector human resources are managed through the Line Ministry and the provincial Health Administration. The strategic guidance for overall Human Resource development lies with the Line Ministry.

The total human resources in the Ministry of Health is 123,855 with 66,993 in the line ministry and 56,852 in the provinces (Health Information Unit, 2015). According to the Annual Health Bulletin (Sri Lankan Ministry of Health, 2015) 76,852 key of these, are key health care workers; 18,243 medical officers, 42,420 nurses (which includes 8,369 pupil nurses) and 16,189 working in other cadres such as pharmacists, laboratory technologists and physiotherapist. The central ministry plays the lead role in determining numbers, recruitment, training, deployment and ensuring optimum level of personnel management to ensure that the right numbers of human resources are available in the right place at the right time, who have the right attitudes and skills and perform to achieve Organization objectives and goals.

Table 1.1:Distribution medical and dental surgeons by category in the HSEProject area

Category	Approved cadre	In position	Vacancy	Additionally Requested	HRH Need
Medical Administrators	01	01	-	No	Not identified
Medical Consultant	29	33	-	06	Identified, not approved
Dental Consultant	01	-	01	No	Not identified
Medical Officers	478	310	169	69	-
Dental Surgeons	08	07	01	No	-
RMP/AMP	08	02	06	No	-

HSE project area to provide curative health care services from 09 Apex Hospitals even though they need 09 Medical Administrators, approved cadre is 01 no additional cadres are requested and only 01 is available. For Medical consultants approved cadre is 29 and 33 in position and additionally 06 are requested. Even though the need for consultant Dental carder is 06 and approved cadre is 01and it is also vacant and no Additional cadres requested. For Medical Officers approved cadre is 478 and 310 is in position and Vacancies are169 and additional 69 Medical Officers are requested. For Dental Surgeons approved cadre is 08 and 07 is in position. There is 01 vacancy and no additional cadres requested. For Registered Medical practitioners approved cadre is 08 and 02 is in position and there are 06 vacancies.

Table 1.2: Distribution of other category of staff in the Apex Hospitals

Cluster Hospitals

Category	Approved Cadre	In position	Vacancy	Additionally Required
Nurse	1053	755	298	89
Pharmacist	56	45	11	01
Dispenser	32	25	07	02
Medical Laboratory Technicians	54	43	09	02
Development Officer	10	09	01	00
ECG Recordist	05	05	00	00
Radiographers	07	09	-02	00
Ophthalmic Technologist	03	03	00	00
Microcopist	36	18	18	00
Hospital Midwife	60	34	26	00
Physiotherapist	04	04	00	00
;Occupational Therapist	01	01	01	00
Speech Therapist	01	01	00	00
Information communication Technology Officer	01	00	01	00
Nutritionist	01	00	01	00
Attendant	70	33	37	00
Hospital Overseer	05	05	00	00
Saukya Karakra Sahayaka (ordinary)	61	45	16	00

Saukya Karakra Sahayaka (Junior)	230	118	112’	00
Ward Clerk	04	02	02	00
Psychiatric Social Worker	01	00	01	03
PHNS	00	00	00	01

The higher numbers of vacancies exit for Nurses, midwife and Saukya Karakra Sahayaka 290,26 and 112 respectively in the Apex Hospitals of the HSE project area.

Table 1.3:Distribution of Medical and other Category of staff in the cluster Hospitals of HSE project area

Category	Approved	In Position	Vacancies	Additional Requirements
Medical Officers	410	316	96	126
Dental Surgeon	51	47	04	-
RMo/AMO	79	60	07	-
Nurses	657	504	153	110

Development Officers	134	60	74	-
Hospital midwife	198	63	135	02
Pharmacist	36	29	07	06
Dispensers	246	237	09	13
Medical Laboratory Technologist	27	31	-3	46
Microcopist/PHLT	60	36	24	-
Attendant	144	72	72	-
Saukay karya Shayaka (Ordinary)	199	188	11	
Saukay karya Shayaka(junior)	438	235	203	-

Source- HRD unit

Table 1.4: Projection of Human Resource Development Up toYear 2025 for Line Ministry and Provincial Council Health Care Institutions

The higher number of vacancies exit among category of staff Medical, nurses, hospital midwife, Development Officers, attendant , Saukay karya Shayaka (junior) 96,153,135,72,203 respectively and Additional cadres are requested for the category of staff Medical,Nurses,,126,110 respectively of the cluster Hospitals in the HSEProject area

No	Category name	Total Approved	In Position 30-06-2019	Vacancies As at 30-06 2019	Expected Number Of gratuades Per annum	Annual Traini ng. Capacity of the MOH	Need By 2025
1	Nursing officer	41808	36262	5546	187	2750	51000
2	Medical laboratory technologist	2103	1829	274	91	150	2740
3	Physiotherapist	748	632	116	50	30	820
4	Occupational Therapist	226	148	78	-	55	790
5	Radiographers	1004	633	371	35	40	1100
6	School Dental Therapist	544	383	161	-	50	550
7	Health Entomology officer	248	147	101	-	25	351
8	Ophthalmic Technologist	239	228	11	-	20	404
9	Prosthetics and Orthotist	32	30	2	-	10	143
10	Public Health Inspector	2111	1742	369	-	360	2745
11	Electro Cardiographer	604	351	253	-	60	585
12	Dental Lab Technician	53	31	22		20	100
13	EEG Recordist	1077	91	16	-	20	138
14	Public Health midwife	10927	8642	2285	-	850	14475
15	Public health Laboratory Technician(PHLT)	443	385	58	-	100	584
16	Pharmacist	2139	1776	363	94	250	2385

Human Resource Development

It was revealed the central ministry of health plays the lead role in determining the numbers, recruitment, training, deployment, ensuring the right numbers of Human Resources are available in the right place and the right time who have the right attitude and Skills to perform and achieve organizational objectives and goals.

Table 1.5: Distribution of other category of staff in the Apex Hospitals

Province	District	Apex Hospital
Sabaragamuwa	Kegalle	BH Karawanella
	Ratnapura	BH Kahawatta
North Central	Anuradhapura	BH Thabuttegama
	Polonnaruwa	BH Medirigiriya
Uva	Badulla	BH Welimada
	Moneragala	BH Bibile
Central	Nuwara Eliya	BH Rikillagaskada
	Kandy	BH Theldeniya
	Matale	BH Dambulla

- The higher numbers of vacancies exit for Nurses, midwife and Saukya Karakra Sahayaka 290, 26 and 112 respectively in the Apex Hospitals of the HSEproject area.

Category	Approved Cadre	In position	Vacancy	Additionally Required
Nurse	1053	755	298	89
Pharmacist	56	45	11	01
Dispenser	32	25	07	02
Medical Laboratory Technicians	54	43	09	02
Development Officer	10	09	01	00
ECG Recordist	05	05	00	00
Radiographers	07	09	-02	00
Ophthalmic Technologist	03	03	00	00
Microcopist	36	18	18	00
Hospital Midwife	60	34	26	00
Physiotherapist	04	04	00	00
;Occupational Therapist	01	01	01	00
Speech Therapist	01	01	00	00
Information communication Technology Officer	01	00	01	00
Nutritionist	01	00	01	00
Attendant	70	33	37	00
Hospital Overseer	05	05	00	00
Saukya Karakra Sahayaka (ordinary)	61	45	16	00
Saukya Karakra Sahayaka (Junior)	230	118	112'	00
Ward Clerk	04	02	02	00
Psychiatric Social Worker	01	00	01	03
PHNS	00	00	00	01

Table 1.6: Distribution of Medical and other Category of staff in the Cluster Hospitals Of HSE project area

Category	Approved	In Position	Vacancies	Additional Requirements
Medical Officers	410	316	96	126
Dental Surgeon	51	47	04	-
RMo/AMO	79	60	07	-
Nurses	657	504	153	110
Development Officers	134	60	74	-
Hospital midwife	198	63	135	02
Pharmacist	36	29	07	06
Dispensers	246	237	09	13
Medical Laboratory Technologist	27	31	-3	46

Microcopist/PHLT	60	36	24	-
Attendant	144	72	72	-
Saukay karya Shayaka (Ordinary)	199	188	11	
Saukay karya Shayaka(junior)	438	235	203	-

The higher number of vacancies exit among catergory of staff Medical, nurses, hospital mid wife, Development Officers, attendant, Saukay karya Shayaka (junior) 96,153,135,72,203 respectively and Additional cadres are requested for the category of staff Medical, Nurses,126,110 respectively of the cluster Hospitals in the HSE Project area

Table1.7: Distribution of Preventive Health Sector staff by category in the HSEP Area

Category	Approved	In position	Vacancies	Additional
Medical Officer	64	49	15	5
Dental Surgeon	3	5	-2	0
Development Officer	10	12	-2	0
PHNS	31	19	12	5
School Dental Therapist	28	17	11	1
Entomological Assistant	12	2	10	0
Public Health Midwife	637	563	74	0
Supervisory Public Health Inspector	28	17	11	1
Supervisory Public Health Midwife	36	30	6	0
Public Health Inspector	157	113	44	0
Public Health Field officer	10	16	-6	2
Public Management Assistant	10	10	0	0
Total	1026	853	169	14

The higher number of vacancies exit among category of staff Medical, PHNS, School Dental Therapist, Entomological Assistant, Public Health midwife, Supervisory Public Health Inspector, Supervisory Public Health Midwives, Public Health Inspector, 15,12,11,10,74,11,6,44 respectively and Additional cadres are requested for the category of staff Medical, PHNS, School Dental Therapist, Supervisory Public Health Inspector, Public Health Field officer 5,5,1,2 respectively of the Preventive Health Sector in the HSEProject area.

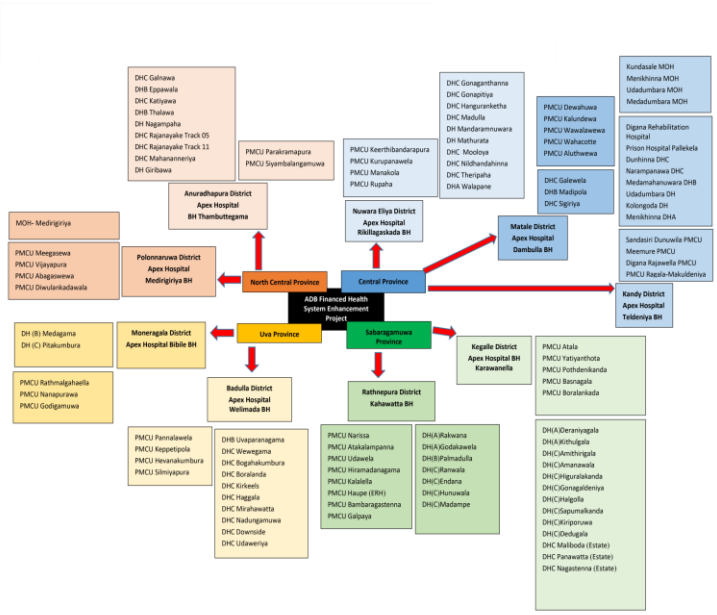

Table 1.8:

Approved Cadre	In position	Vacancies	Additionally required
6266	4544	1717	592

Distribution of Administrative and Supportive Staff Category by Apex Hospital, District and by Provinces

Province	District	Apex Hospital	Medical Administrator(Deputy Grade)				Medical Consultant				Medical Officer				Consultant Dental Surgeon				Dental Surgeon				RMO/AMO			
			Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
Sabaragamuwa	Kegalle	BH Karawanella	1	1	0	0	12	13	-1	0	83	54	29	0	0	0	0	0	5	5	0	0	2	1	1	0
	Ratnapura	BH Kahawatta	1	0	1	0	10	14	-4	0	79	38	41	0	0	0	0	0	3	2	1	0	2	0	2	0
Sabaragamuwa Total			**2**	**1**	**1**	**0**	**22**	**27**	**-5**	**0**	**162**	**92**	**70**	**0**	**0**	**0**	**0**	**0**	**8**	**7**	**1**	**0**	**4**	**1**	**3**	**0**
North Central	Anuradhapura	BH Thabuttegama	1	1	0	0	10	9	1	0	56	43	13	43	0	0	0	0	4	1	3	0	2	2	0	0
	Polonnaruwa	BH Medirigiriya	1	1	0	0	10	8	0	0	56	41	15	0	0	0	0	0	4	2	0	0	0	0	0	0
North CentralTotal			**2**	**2**	**0**	**0**	**20**	**17**	**1**	**0**	**112**	**84**	**28**	**43**	**0**	**0**	**0**	**0**	**8**	**3**	**3**	**0**	**2**	**2**	**0**	**0**
Uva	Badulla	BH Welimada	0	0	0	0	0	0	0	0	45	37	8	0	0	0	0	0	2	2	0	0	0	0	0	0
	Moneragala	BH Bibile	0	0	0	0	7	7	0	2	45	31	14	55	0	0	0	0	3	3	0	0	0	0	0	0
Uva Total			**0**	**0**	**0**	**0**	**7**	**7**	**0**	**2**	**90**	**68**	**22**	**55**	**0**	**0**	**0**	**0**	**5**	**5**	**0**	**0**	**0**	**0**	**0**	**0**
Central	Nuwara Eliya	BH Rikillagaskada	1	0	1	0	16	0	16	0	64	38	26	0	1	0	1	0	2	0	2	0	4	0	4	4
	Kandy	BH Theldeniya	1	1	0	0	6	6	0	4	40	34	6	60	1	1	0	0	2	3	-1	1	4	1	3	0
	Matale	BH Dambulla	1	1	1	0	24	18	6	5	100	60	40	10	1	0	0	0	6	3	0	0	2	2	0	0
Central Total			**3**	**2**	**2**	**0**	**46**	**24**	**22**	**9**	**204**	**132**	**72**	**70**	**3**	**1**	**1**	**0**	**10**	**6**	**1**	**1**	**10**	**3**	**7**	**4**

Out of the nine Apex hospitals in uva province in both Districts Badulla and Monaragala and in both Apex hospitals namely BH Walemada and BH Bibile there is no approved carder for Medical Administrative post (Deputy Administrative Grade) and both positions are vacant. In six Apex hospitals the approved carder for Medical Officers is 568 and in position number is 376 the number of vacancies is 192 and number additional required is 168. BH karawanella,BH Kahawatta, BH Medirigiriya, BH Walimada, BH Rikillagaskada not requested additional carder. Consultant dental surgeon approved carder for HSEP area is 3 and vacancies is 2.

Table 1.9:

Distribution of categories of nursing staff and hospital midwives by Apex hospitals, Districts and by provinces

Province	District	Apex Hospital	Ward Sister (Grade 1)				Nursing Officer(Special) Matron				Nursing Officer (Grade 1 1a & 1 1b)				Hospital Midwife				PHNS			
			Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)
Sabaragamuwa	Kegalle	BH Karawanella	12	14	-2	0	2	2	2	0	212	183	29	0	20	14	6	0	0	0	0	0
	Ratnapura	BH Kahawatta	10	0	10	0	1	0	1	0	184	6	178	0	0	0	0	0	0	0	0	0
Sabaragamuwa Total			**22**	**14**	**8**	**0**	**3**	**2**	**3**	**0**	**396**	**189**	**207**	**0**	**20**	**14**	**6**	**0**	**0**	**0**	**0**	**0**
North Central	Anuradhapura	BH Thabuttegama	9	10	-1	7	1	1	0	0	102	89	13	51	20	11	9	0	0	0	0	1
	Polonnaruwa	BH Medirigiriya	9	4	0	0	1	1	0	0	100	91	9	4	20	9	11	0	0	0	0	0
North Central Total			**18**	**14**	**-1**	**7**	**2**	**2**	**0**	**0**	**202**	**180**	**22**	**55**	**40**	**20**	**20**	**0**	**0**	**0**	**0**	**1**
Uva	Badulla	BH Welimada	0	0	0	0	0	0	0	0	125	99	26	40	15	13	2	0	0	0	0	2
	Moneragala	BH Bibile	7	6	1	9	1	1	0	0	100	94	6	40	17	11	6	10	0	0	0	1
Uva Total			**7**	**6**	**1**	**9**	**1**	**1**	**0**	**0**	**225**	**193**	**32**	**80**	**32**	**24**	**8**	**10**	**0**	**0**	**0**	**3**
Central	Nuwara Eliya	BH Rikillagaskada	7	0	7	0	0	0	0	0	140	75	65	0	2	2	0	0	0	0	0	0
	Kandy	BH Theldeniya	7	5	2	2	1	1	1	0	90	90	0	223	2	5	1	0	0	0	0	0
	Matale	BH Dambulla	20	8	12	0	3	3	0	0	240	198	42	25	9	4	0	0	0	1	0	1
Central Total			**34**	**13**	**21**	**2**	**4**	**4**	**1**	**0**	**470**	**363**	**107**	**248**	**13**	**11**	**1**	**0**	**0**	**1**	**0**	**1**

In Sabaragamuwa province vacancies exists for grade 1 nurses, nursing officer (special grade) matron, nursing officer (Grade II2 and IIB), Hospital midwives, PHNS 08, 03, 207, 06 respectively. In the North Central Province vacancies exists for Nursing officers (Grade IIA and IIB), Hospital Midwives is 22, 20 respectively. In Uva Province vacancies exists for Nursing Officer (Special Grade) Matron, Nursing Officer (Grade IIA and IIB), Hospital Midwives is 01, 32, 08 respectively. In Central Province vacancies exists for ward Sister grade I, Nursing Officer (Special Grade IIA and IIB) is 21, 01, 107 respectively.

Table 1.10:

Distribution of Profession of Supplementary Medical Staff by Apex Hospitals, Districts and by provinces

Province	District	Apex Hospital	Pharmacist				Medical Laboratory Tec				Radiographer				Physiotherapist				Occupational therapist			
			Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)
Sabaragamuwa	Kegalle	BH Karawanella	8	9	-1	0	7	9	-2	0	4	5	-1	0	2	2	0	0	1	0	1	0
	Ratnapura	BH Kahawatta	7	8	-1	0	6	9	-3	0	3	4	-1	0	2	2	0	0	0	0	0	0
Sabaragamuwa Total			**15**	**17**	**-2**	**0**	**13**	**18**	**-5**	**0**	**7**	**9**	**-2**	**0**	**4**	**4**	**0**	**0**	**1**	**0**	**1**	**0**
North Central	Anuradhapura	BH Thabuttegama	6	5	1	1	6	6	0	0	3	2	1	1	3	3	0	0	1	0	1	0
	Polonnaruwa	BH Medirigiriya	6	5	1	1	6	5	0	0	3	2	0	0	2	1	0	0	0	0	0	0
North Central Total			**12**	**10**	**2**	**2**	**12**	**11**	**0**	**0**	**6**	**4**	**1**	**1**	**5**	**4**	**0**	**0**	**1**	**0**	**1**	**0**
Uva	Badulla	BH Welimada	5	5	0	1	5	5	0	0	3	3	0	0	1	2	-1	0	0	0	0	0
	Moneragala	BH Bibile	5	3	2	1	4	4	0	1	2	1	1	0	2	1	1	0	1	0	1	0
Uva Total			**10**	**8**	**2**	**2**	**9**	**9**	**0**	**1**	**5**	**4**	**1**	**0**	**3**	**3**	**0**	**0**	**1**	**0**	**1**	**0**
Central	Nuwara Eliya	BH Rikillagaskada	8	3	5	0	8	4	4	0	2	0	2	0	0	0	0	0	1	0	1	0
	Kandy	BH Theldeniya	6	5	1	8	6	3	3	14	3	2	1	4	0	0	0	1	1	0	1	0
	Matale	BH Dambulla	15	9	6	0	15	8	7	0	6	3	0	0	1	0	0	0	1	0	0	0
Central Total			**29**	**17**	**12**	**8**	**29**	**15**	**14**	**14**	**11**	**5**	**3**	**4**	**1**	**0**	**0**	**1**	**3**	**0**	**2**	**0**

In Central Province vacancies exists for pharmacist, Medical Laboratory technologist is 12, 14 respectively.

Table 1.11:

Distribution of Para Medical Staff by Apex Hospitals, Districts and by provinces

Province	District	Apex Hospital	Dispenser				ECG Recordist				Opthalmic Technologis				Microscopist/PHLT			
			Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)	Approved cadre	Current in position	Number Of Vacant	Number additional required (critical)
Sabaragamuwa	Kegalle	BH Karawanella	4	3	1	0	3	1	2	0	2	1	1	0	2	1	1	0
	Ratnapura	BH Kahawatta	4	4	0	0	2	4	-2	0	1	2	-1	0	2	0	2	0
Sabaragamuwa Total			**8**	**7**	**1**	**0**	**5**	**5**	**0**	**0**	**3**	**3**	**0**	**0**	**4**	**1**	**3**	**0**
North Central	Anuradhapura	BH Thabuttegama	5	6	-1	1	3	3	0	0	1	1	0	0	1	1	0	0
	Polonnaruwa	BH Medirigiriya	5	3	2	1	3	2	0	0	1	1	0	0	2	1	0	0
North Central Total			**10**	**9**	**1**	**2**	**6**	**5**	**0**	**0**	**2**	**2**	**0**	**0**	**3**	**2**	**0**	**0**
Uva	Badulla	BH Welimada	6	6	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Moneragala	BH Bibile	6	3	3	0	2	2	0	1	1	0	1	0	1	1	0	0
Uva Total			**12**	**9**	**3**	**0**	**2**	**2**	**0**	**1**	**1**	**0**	**1**	**0**	**1**	**1**	**0**	**0**
Central	Nuwara Eliya	BH Rikillagaskada	6	4	2	0	2	0	2	0	1	0	1	0	18	9	9	0
	Kandy	BH Theldeniya	4	3	1	0	2	1	1	2	1	1	0	1	14	8	6	6
	Matale	BH Dambulla	4	3	1	0	5	3	0	0	2	1	0	0	25	14	11	0
Central Total			**14**	**10**	**4**	**0**	**9**	**4**	**3**	**2**	**4**	**2**	**1**	**1**	**57**	**31**	**26**	**6**

In Uva Province vacancies exists for Dispenser is 3. In Central Province vacancies exists for Dispenser, Microscopist(PHLT) is 04, 26 respectively.

FIGURE 01

Apex Hospitals, Divisional Hospitals and PMCI's in the Sabaragamuwa Province HSE project area

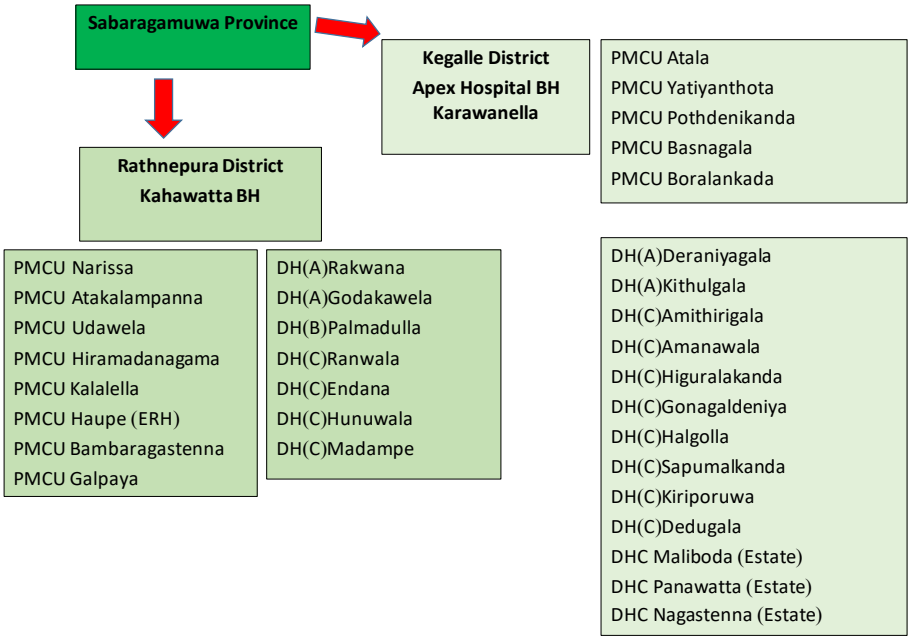

Table 1.12:

Distibution of Administrative & Supportive Staff Category by cluster hospitals, Districts in the Sabaragamuwa Province

Province	District	Cluster Category	Catchment population for PMCI	Medical Officer					Dental Surgeon					RMO/AMO				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
Sabaragamuwa	Kegalle	DH	0	31	22	9	0	0	11	7	4	0	0	8	7	0	0	0
		CD	0	2	3	-1	0	0	1	1	0	0	0	2	3	-1	0	0
	Total		**0**	**33**	**25**	**8**	**0**	**0**	**12**	**8**	**4**	**0**	**0**	**10**	**10**	**-1**	**0**	**0**
	Ratnapura	DH	0	25	14	11	0	0	7	7	0	0	0	9	6	3	0	0
		PMCU	0	3	4	-1	0	0	1	1	0	0	0	3	2	1	0	0
	Total		**0**	**94**	**68**	**26**	**0**	**0**	**32**	**24**	**8**	**0**	**0**	**32**	**28**	**2**	**0**	**0**
Sabaragamuwa Total			**0**	**127**	**93**	**34**	**0**	**0**	**44**	**32**	**12**	**0**	**0**	**42**	**38**	**1**	**0**	**0**

Kegalle Cluster (Karawanella BH)

05 PMCU
13 DH

Rathnepura Cluster (Kahawatta BH)

08 PMCU
07 DH

Table 1.13:

Distribution of Categories of Nursing Staff, Hospital Midwives by cluster hospitals, districts in the Sabaragamuwa Province

Province	District	Cluster Category	Catchment population for PMCI	Ward Sister (Grade1)					Nursing Officer(Special) Matron					Hospital Midwife					Nursing Officer (Grade 11a & 11b)					PHNS				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
Sabaragamuwa	Kegalle	DH	0	2	1	1	0	0	0	0	0	0	0	24	2	22	0	0	45	29	16	0	0	0	0	0	0	0
		CD	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	-1	0	0	0	0	0	0	0
	Total		**0**	**2**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**24**	**2**	**22**	**0**	**0**	**45**	**30**	**15**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Ratnapura	DH	0	2	2	0	0	0	0	0	0	0	0	21	7	14	0	0	42	28	14	0	0	0	0	0	0	0
		PMCU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	-1	0	0	0	0	0	0	0
	Total		**0**	**6**	**4**	**2**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**69**	**11**	**58**	**0**	**0**	**132**	**89**	**43**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
Sabaragamuwa Total			**0**	**8**	**5**	**3**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**93**	**13**	**80**	**0**	**0**	**177**	**119**	**58**	**0**	**0**	**0**	**0**	**0**	**0**	**0**

In the Sabaragamuwa Province vacancies exists for hospital Midwives, Nursing Officer (Grade IIA and IIB) is 80, 58 respectively.

Table1.14:

Distribution of Profession of Supplementary Medical Staff by Cluster Hospitals, Districts in the Sabaragamuwa Province

Province	District	Cluster Category	Catchment population for PMCI	Pharmacist					Medical Laboratory Technologist					Radiographer					Physiotherapist					Occupational therapist				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
Sabaragamuwa	Kegalle	DH	0	4	2	2	0	0	3	4	-1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		CD	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**0**	**4**	**2**	**2**	**0**	**0**	**3**	**4**	**-1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Ratnapura	DH	0	3	4	-1	0	0	3	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		PMCU	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**0**	**11**	**8**	**3**	**0**	**0**	**9**	**11**	**-2**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
Sabaragamuwa Total			**0**	**15**	**10**	**5**	**0**	**0**	**12**	**15**	**-3**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**

In Sabaragamuwa Province vacancies exists for pharmacist is 05 and there is a execs of 03 medical Laboratory technologist.

Table 1.15:

Distribution of Para Medical Staff by cluster hospitals, Districts in the Sabaragamuwa Province

Province	District	Cluster Category	Catchment population for PMCI	Dispenser					ECG Recordist					Opthalmic Technologis					Microscopist/PHLT					Hospital Midwife				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requested to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requested to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requested to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requested to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requested to increase Cardre/other remark
Sabaragamuwa	Kegalle	DH	0	20	23	-3	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	24	2	22	0	0
		CD	0	5	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**0**	**25**	**28**	**-3**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**1**	**0**	**1**	**0**	**0**	**24**	**2**	**22**	**0**	**0**
	Ratnapura	DH	0	9	9	0	0	0	0	1	-1	0	0	0	0	0	0	0	1	1	0	0	0	21	7	14	0	0
		PMCU	0	3	4	-1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**0**	**62**	**69**	**-7**	**0**	**0**	**0**	**1**	**-1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**3**	**1**	**2**	**0**	**0**	**69**	**11**	**58**	**0**	**0**
Sabaragamuwa Total			**0**	**87**	**97**	**-10**	**0**	**0**	**0**	**1**	**-1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**4**	**1**	**3**	**0**	**0**	**93**	**13**	**80**	**0**	**0**

There is excess of 10 Dispensers in the Sabaragamuwa Province.

FIGURE 02

Apex Hospitals, Divisional Hospitals and PMCI's in the Uva Province HSEproject area

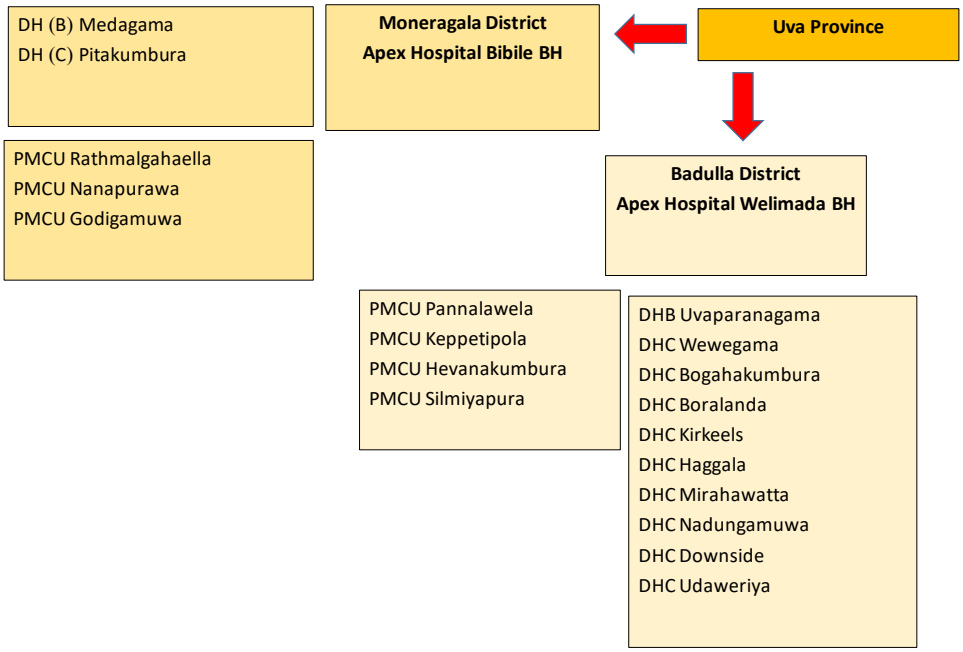

Table 1.16:

Distribution of Administrative & Supportive Staff Category by cluster hospitals, Districts in the Uva Province

Province	District	Cluster Category	Catchment population for PMCI	Medical Officer					Dental Surgeon					FMO/AMO				
				Approved Cadre	Current in position	Number Of Vacant	Number additional required (critical)	Requested to increase Cadre/ /otherremark	Approved Cadre	Current in position	Number Of Vacant	Number additional required (critical)	Requested to increase Cadre/ /otherremark	Approved Cadre	Current in position	Number Of Vacant	Number additional required (critical)	Requested to increase Cadre/ /otherremark
Uva	Badulla	DH	121175	24	12	12	8	0	0	0	0	0	0	2	2	0	0	0
		PMCU	33673	4	3	1	4	0	0	0	0	0	0	0	0	0	0	0
	Total		154848	28	15	13	12	0	0	0	0	0	0	2	2	0	0	0
	Moneragala	DH	177 15	10	6	4	0	0	2	1	1	0	0	0	0	0	0	0
		PMCU	21957	4	3	1	2	0	0	0	0	0	0	0	0	0	0	0
	Total		39672	14	9	5	2	0	2	1	1	0	0	0	0	0	0	0
Uva Total			194518	42	24	18	14	0	2	1	1	0	0	2	2	0	0	0

Moneragala Cluster (Bibile BH)

03 PMCU
02 DH

Badulla Cluster (Welimada BH)

04 PMCU
10 DH

In Uva Province Vacancies Exists for Medical Officers is 28.

Table 1.17:

Distribution of Nursing Staff by Cluster Hospitals, Districts in the Uva Province

Province	District	Cluster Category	Catchment population for PMCI	Ward Sister (Grade1)					Nursing Officer(Special) Matron					Hospital Midwife					Nursing Officer (Grade 11a & 11b)					PHNS				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
Uva	Badulla	DH	121173	0	0	0	0	0	0	0	0	0	0	21	3	18	2	0	55	33	22	14	0	1	1	0	2	0
		PMCU	33673	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	0	0	0	0	0
	Total		**154846**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**21**	**3**	**18**	**2**	**0**	**55**	**33**	**22**	**18**	**0**	**1**	**1**	**0**	**2**	**0**
	Moneragala	DH	17715	1	1	0	0	0	0	0	0	0	0	7	2	5	0	0	26	18	8	4	0	0	0	0	2	0
		PMCU	21957	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0	3	0	0
	Total		**39672**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**7**	**2**	**5**	**0**	**0**	**26**	**18**	**8**	**7**	**0**	**0**	**0**	**3**	**2**	**0**
Uva Total			**194518**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**28**	**5**	**23**	**2**	**0**	**81**	**51**	**30**	**25**	**0**	**1**	**1**	**3**	**4**	**0**

In Uva province vacancies exists for hospital midwives, nursing officer (Grade IIA and IIB) is23, 30 respectively.

Table 1.18:

Distribution of Profession of Supplementary Medical Staff by Cluster Hospitals, Districts in the Uva Province

Province	District	Cluster Category	Catchment population for PMCI	Pharmacist					Medical Laboratory Technologist					Radiographer					Physiotherapist					Occupational therapist				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
Uva	Badulla	DH	121173	3	2	1	0	0	1	1	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		PMCU	33673	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**154846**	**3**	**2**	**1**	**0**	**0**	**1**	**1**	**0**	**2**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Moneragala	DH	17715	1	1	0	1	0	1	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		PMCU	21957	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**39672**	**1**	**1**	**0**	**1**	**0**	**1**	**1**	**0**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
Uva Total			**194518**	**4**	**3**	**1**	**1**	**0**	**2**	**2**	**0**	**3**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**

In Uva Province vacancies exists for pharmacist is 01.

Table 1.19:

Distribution of Para Medical Staff by Cluster Hospitals, Districts in the Uva Province

Province	District	Cluster Category	Catchment population for PMCI	Dispenser					ECG Recordist					Opthalmic Technologis					Microscopist/PHLT					Hospital Midwife				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
Uva	Badulla	DH	121173	14	13	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	21	3	18	2	0
		PMCU	33673	4	3	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**154846**	**18**	**16**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**21**	**3**	**18**	**2**	**0**
	Moneragala	DH	17715	4	2	2	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	1	0	7	2	5	0	0
		PMCU	21957	3	3	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**39672**	**7**	**5**	**2**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**1**	**0**	**1**	**1**	**0**	**7**	**2**	**5**	**0**	**0**
Uva Total			**194518**	**25**	**21**	**4**	**4**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**1**	**0**	**1**	**1**	**0**	**28**	**5**	**23**	**2**	**0**

Vacancies in Uva Province exists for dispensers, Midwives is 04, 23 respectively.

FIGURE 03

Apex Hospitals, Divisional Hospitals and PMCI's in the North Central Province HSE project area

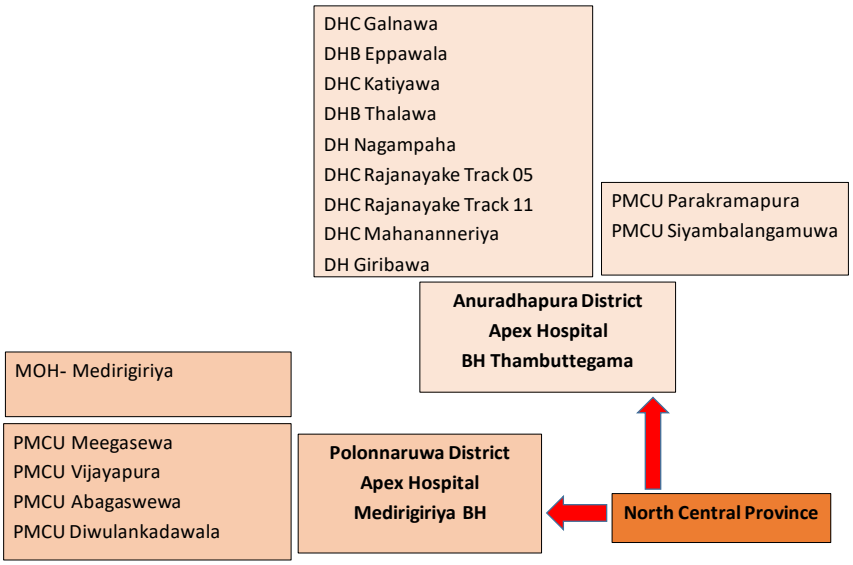

Table 1.20:

Distribution of Administrative & Supportive Staff Category by Cluster Hospitals, Districts in the North Central province

Province	District	Cluster Category	Catchment population for PMCI	Medical Officer					Dental Surgeon					RMO/AMO				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
North Central	Anuradhapura	DH	126389	20	16	4	7	0	0	0	0	0	0	0	0	0	0	0
		PMCU																
	Total		**126389**	**20**	**16**	**4**	**7**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Polonnaruwa	DH																
		PMCU	44508	2	2	0	3	0	0	0	0	0	0	2	1	1	0	0
	Total		**297286**	**42**	**34**	**8**	**17**	**0**	**0**	**0**	**0**	**0**	**0**	**2**	**1**	**1**	**0**	**0**
North Central Total			**423675**	**62**	**50**	**12**	**24**	**0**	**0**	**0**	**0**	**0**	**0**	**2**	**1**	**1**	**0**	**0**

Anuradhapura (Thambuttegama BH)

02 PMCU
09 DH

Polonnaruwa Cluster (Medirigiriya BH)

04 PMCU
01 MOH

Vacancies exist for medical officers is 12.

Table 1.21:

Distribution of Nursing Staff and Hospital Midwives by Cluster Hospitals, Districts in the North Central Province

Province	District	Cluster Category	Catchment population for PMCI	Ward Sister (Grade1)					Hospital Midwife					Nursing Officer (Grade 11a & 11b)					PHNS				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
North Central	Anuradhapura	DH	126389	0	0	0	0	0	25	15	10	0	0	45	47	-2	10	0	0	3	-3	7	0
		PMCU																					
	Total		**126389**	**0**	**0**	**0**	**0**	**0**	**25**	**15**	**10**	**0**	**0**	**45**	**47**	**-2**	**10**	**0**	**0**	**3**	**-3**	**7**	**0**
	Polonnaruwa	DH																					
		PMCU	44508	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	0	0	0	0	0
	Total		**297286**	**0**	**0**	**0**	**0**	**0**	**50**	**30**	**20**	**0**	**0**	**90**	**94**	**-4**	**24**	**0**	**0**	**6**	**-6**	**14**	**0**
North Central Total			**423675**	**0**	**0**	**0**	**0**	**0**	**75**	**45**	**30**	**0**	**0**	**135**	**141**	**-6**	**34**	**0**	**0**	**9**	**-9**	**21**	**0**

In North Central Province vacancies exists for Midwives is 30 and there is excess of 6 Nursing Officers(Grade IIA and IIB) .

Table 1.22:

Distribution of Profession of Supplementary Medical Staff by Cluster Hospitals, Districts in the North Central Province

Province	District	Cluster Category	Catchment population for PMCI	Pharmacist					Medical Laboratory Technologist					Radiographer					Physiotherapist					Occupational therapist				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
North Central	Anuradhapura	DH	126389	2	2	0	0	0	2	2	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		PMCU																										
	Total		**126389**	**2**	**2**	**0**	**0**	**0**	**2**	**2**	**0**	**2**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Polonnaruwa	DH																										
		PMCU	44508	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**297286**	**4**	**4**	**0**	**0**	**0**	**4**	**4**	**0**	**4**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
North Central Total			**423675**	**6**	**6**	**0**	**0**	**0**	**6**	**6**	**0**	**6**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**

There is no vacancies exists among Pharmacist, Medical and laboratory technologist.

Table 1.23:

Distribution of Para Medical Staff by Cluster Hospitals, Districts in the North Central

Province	District	Cluster Category	Catchment population for PMCI	Dispenser					ECG Recordist					Opthalmic Technologis					Microscopist/PHLT					Hospital Midwife				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
North Central	Anuradhapura	DH	126389	14	11	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	25	15	10	0	0
		PMCU																										
	Total		**126389**	**14**	**11**	**3**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**25**	**15**	**10**	**0**	**0**
	Polonnaruwa	DH																										
		PMCU	44508	4	4	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**297286**	**32**	**26**	**6**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**50**	**30**	**20**	**0**	**0**
North Central Total			**423675**	**46**	**37**	**9**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**75**	**45**	**30**	**0**	**0**

In North Central Province vacancies exists for Dispensers, Hospital Midwives is 09, 30 respectively.

FIGURE 04

Apex Hospitals, Divisional Hospitals and PMCI's in the Central Province HSE project area

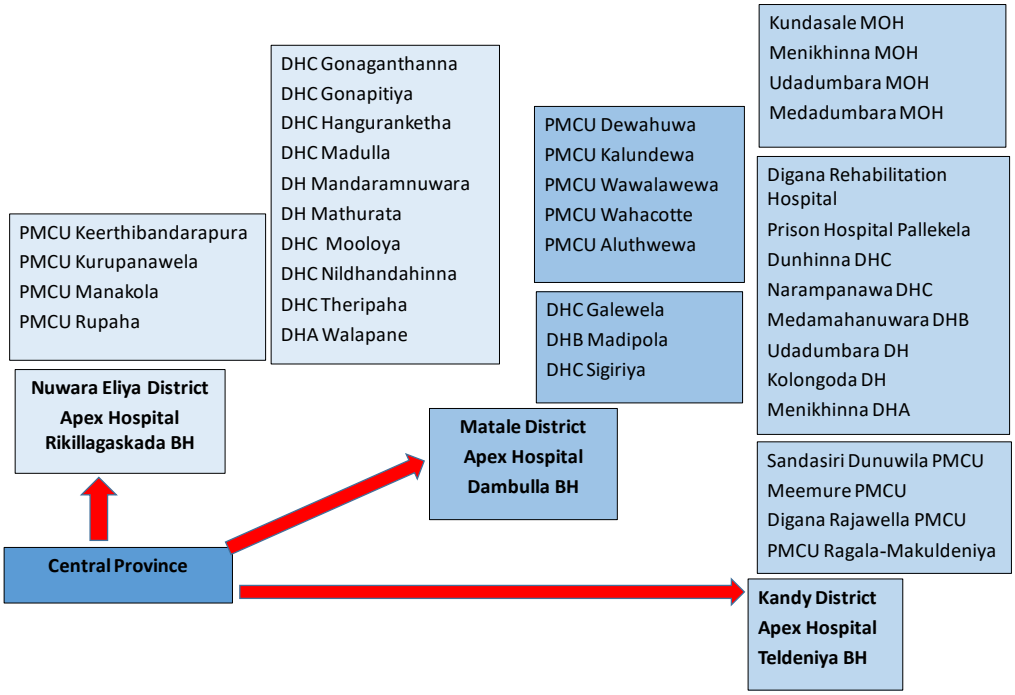

Table 1.24:

Distribution of Nursing Staff by Cluster Hospitals, Districts in the Central province

Province	District	Cluster Category	Catchment population for PMCI	Ward Sister (Grade 1)					Hospital Midwife					Nursing Officer (Grade 11a & 11b)					PHNS				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
Central	Nuwara Eliya	DH	89560	0	0	0	0	0	1	1	0	0	0	50	30	20	5	0	0	0	0	0	0
		PMCU	19360	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0
	Total		**108920**	**0**	**0**	**0**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**50**	**30**	**20**	**8**	**0**	**0**	**0**	**0**	**0**	**0**
	Kandy	DH	89111	0	0	0	0	0	0	0	0	0	0	62	45	17	5	0	0	0	0	0	0
		PMCU	55,067	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**144,178**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**62**	**45**	**17**	**5**	**0**	**0**	**0**	**0**	**0**	**0**
	Matale	DH	57782	2	2	0	0	0	0	0	0	0	0	35	33	2	1	0	0	0	0	0	0
		PMCU	47236	0	0	0	0	0	0	0	0	0	0	0	0	0	5	0	0	0	0	0	0
	Total		**105018**	**2**	**2**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**35**	**33**	**2**	**6**	**0**	**0**	**0**	**0**	**0**	**0**
Central Total			**358,116**	**2**	**2**	**0**	**0**	**0**	**1**	**1**	**0**	**0**	**0**	**147**	**108**	**39**	**19**	**0**	**0**	**0**	**0**	**0**	**0**

In Central Province vacancies exists for Nursing officers (grade IIA and IIB) is 39.

Table 1.25:

Distribution of Profession of Supplementary Medical Staff by Cluster Hospitals, Districts in the Central Province

Province	District	Cluster Category	Catchment population for PMCI	Pharmacist					Medical Laboratory Technologist					Radiographer					Physiotherapist					Occupational therapist				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
Central	Nuwara Eliya	DH	89560	2	1	1	2	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		PMCU	19360	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**108920**	**2**	**1**	**1**	**2**	**0**	**1**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Kandy	DH	89111	2	3	-1	1	0	2	2	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		PMCU	55,067	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**144,178**	**2**	**3**	**-1**	**1**	**0**	**2**	**2**	**0**	**2**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Matale	DH	57782	4	3	1	0	0	1	1	0	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		PMCU	47236	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**105018**	**4**	**3**	**1**	**0**	**0**	**1**	**1**	**0**	**7**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
Central Total			**358,116**	**8**	**7**	**1**	**3**	**0**	**4**	**4**	**0**	**9**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**

In Central Province Vacancies exists for pharmacists is 01 and additional required number for pharmacist and medical laboratory technologist 03, 09 respectively.

Table 1.26:

Distribution of Para Medical Staff by Cluster hospitals, Districts in the Central Province

Province	District	Cluster Category	Catchment population for PMCI	Dispenser					ECG Recordist					Opthalmic Technologis					Microscopist/PHLT					Hospital Midwife				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
Central	Nuwara Eliya	DH	89560	11	10	1	3	0	0	0	0	0	0	0	0	0	0	0	25	16	9	1	0	1	1	0	0	0
		PMCU	19360	4	3	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**108920**	**15**	**13**	**2**	**3**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**25**	**16**	**9**	**1**	**0**	**1**	**1**	**0**	**0**	**0**
	Kandy	DH	89111	10	9	1	1	0	0	0	0	0	0	0	0	0	0	0	14	8	6	0	0	0	0	0	0	0
		PMCU	55,067	3	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**144,178**	**13**	**10**	**3**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**14**	**8**	**6**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
	Matale	DH	57782	6	5	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		PMCU	47236	5	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Total		**105018**	**11**	**10**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
Central Total			**358,116**	**39**	**33**	**6**	**4**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**39**	**24**	**15**	**1**	**0**	**1**	**1**	**0**	**0**	**0**

In Central Province vacancies exists for Dispensers, Microscopist is 06, 15 respectively.

Table 1.27:

Distribution of Cluster MOH Staff by Districts in the North Central & Central provinces(MO,SDT)

Province	District	Category	Catchment population for PMCI	Medical Officer					School Dental Therapist				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
North Central	Polonnaruwa	MOH	71291	1	1	0	1	0	2	1	1	0	0
North Central Total			**71291**	**1**	**1**	**0**	**1**	**0**	**2**	**1**	**1**	**0**	**0**
Central	Kandy	MOH	0	7	5	2	0	0	0	0	0	0	0
Central Total			**0**	**7**	**5**	**2**	**0**	**0**	**0**	**0**	**0**	**0**	**0**

In North Central Province vacancies exists for SDT is 01 and in Central Province vacancies exists for Medical officers is 02.

Table 1.28:

Distribution of Cluster MOH Staff by Districts in the North Central & Central provinces(PHNS,PHM,SPHM)

Province	District	Category	Catchment population for PMCI	PHNS					Public Health Midwife					Supervisory Public Health Midwife				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
North Central	Polonnaruwa	MOH	71291	1	0	1	0	0	26	24	2	0	0	1	1	0	0	0
North Central Total			**71291**	**1**	**0**	**1**	**0**	**0**	**26**	**24**	**2**	**0**	**0**	**1**	**1**	**0**	**0**	**0**
Central	Kandy	MOH	0	4	1	3	0	0	73	73	0	0	0	4	4	0	0	0
Central Total			**0**	**4**	**1**	**3**	**0**	**0**	**73**	**73**	**0**	**0**	**0**	**4**	**4**	**0**	**0**	**0**

In North Central Province vacancies exists for Public health midwives, PHNS is 02,01 respectively. In Central Province vacancies exists for PHNS is 03.

Table 1.29:

Distribution of Cluster MOH Staff by Districts n the North Central & Central provinces(Ento. Asst. , FDI,Psy. Social worker, Sn. Tutor PHI)

Province	District	Category	Catchment population for PMCI	Entomological Assistant					Food and Drug Inspectors					Psyciatric Social Worker					Senior Tutor public Health Inspector				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
North Central	Polonnaruwa	MOH	71291	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
North Central Total			**71291**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**
Central	Kandy	MOH	0	0	0	0	0	0	0	0	0	0	0	4	3	1	0	0	0	0	0	0	0
Central Total			**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**0**	**4**	**3**	**1**	**0**	**0**	**0**	**0**	**0**	**0**	**0**

In Central Province vacancies exists for psychiatric social worker is 01.

Table 1.30:

Distribution of Cluster MOH Staff by Districts in the North Central & Central provinces(SPHII, PHI, PHFO)

Province	District	Category	Catchment population for PMCI	Supervisory Public Health Inspector					Public Health Inspector					Public Health Field officer				
				Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)	Requestted to increase Cardre/other remark
North Central	Polonnaruwa	MOH	71291	0	0	0	0	0	7	6	1	0	0	5	4	1	2	0
North Central Total			**71291**	**0**	**0**	**0**	**0**	**0**	**7**	**6**	**1**	**0**	**0**	**5**	**4**	**1**	**2**	**0**
Central	Kandy	MOH	0	3	1	2	0	0	15	8	7	0	0	1	1	0	0	0
Central Total			**0**	**3**	**1**	**2**	**0**	**0**	**15**	**8**	**7**	**0**	**0**	**1**	**1**	**0**	**0**	**0**

In North central Province vacancies exists for Public Health Inspector, Public Health Field Officer is 01, 01 respectively. In Central Province vacancies exists for supervisory public health inspector, public health inspector is 02, 07 respectively

Table 1.31:

Distribution of all the Staff Categories in the HSEProject Area

	Approved	In position	Vacant	Additional
All category total	6,126	4,217	1,751	1,104

In the HSEP area vacancies exist for all the categories of staff is 1751.

Table 1.32:

Medical Officers in PMCI's in the HSEProject Area

No of PMCI's	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
40	26	23	3	22

Medical Officers in DHH's in the HSEProject Area

No of DHH's	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
65	185	121	66	45

In the HSEP area vacancies exist for medical officers in PMCI's is 03 and number additional required (critical) is 22. In the HSEP area vacancies exist for Medical Officers in DHH is 66 and number additional required is 45.

Table 1.33:

Nursing Officers in PMCI's in the HSEProject Area

No of PMCI's	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
40	0	2	-2	19

Nursing Officers in DHH's in the HSEProject Area

No of DHH's	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
65	360	263	97	39

In the HSEP area, there is no approved carder for nursing officers and number additional required is 19 for PMCI. In the HSEP area vacancies exist for Nursing officers in DHH is 97 and number additional required is 39.

MO Vacancies in Cluster Hospitals to be Filled on Priority Basis in Phase Manner

Table 1.34:

Kegalle District – Karawanella Cluster

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 1	PMCU Pothdenikanda	PMCU	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	PMCU Boralankada	PMCU	1	No	Vacancies advertised by Min of Health in the difficult stations list 2020
	DH(C)Amanawala	DH	2	Yes	
	DHC Maliboda (Estate)	DH	1	No	Identified as a vacancy since HR data was not available
	DHC Panawatta (Estate)	DH	1	No	Identified as a vacancy since HR data was not available
	DHC Nagastenna (Estate	DH	1	No	Identified as a vacancy since HR data was not available
Total Vacancies to be filled in Phase 1 which have approved cadre			**3**		
Total Vacancies to be filled in Phase 1 which do not have approved cadre*			**4**		
Total Vacancies to be filled in Phase 1			**7**		
Phase 2	DH(A)Deraniyagala	DH	3	Yes	
	DH(A)Kithulgala	DH	1	Yes	
	DH(C) Halgolla	DH	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DH(C)Sapumalkanda	DH	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DH(C)Kiriporuwa	DH	1	Yes	
	DH(C)Dedugala	DH	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
Total Vacancies to be filled in Phase 2 which have approved cadre			**8**		
Total Vacancies to be filled in Phase 2 which do not have approved cadre*			**0**		
Total Vacancies to be filled in Phase 2			**8**		

Total Vacancies to be filled in Phase 1 which have approved cadre – 03

Total Vacancies to be filled in Phase 1 which do not have approved cadre - 04

Total Vacancies to be filled in Phase 1 – 07

Total Vacancies to be filled in Phase 2 which have approved cadre – 08

Total Vacancies to be filled in Phase 2 which do not have approved cadre - 0

Total Vacancies to be filled in Phase 2 – 08

Table 1.35:

Rathnepura District – Kahawatta Cluster

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 1	PMCU - Hiramadanagama	PMCU	1	No	
	PMCU Kalalella	PMCU	1	No	
	PMCU - Haupe (ERH)	PMCU	1	No	
	PMCU Bambaragastenna	PMCU	1	No	Identified as a vacancy since HR data was not available
	PMCU Galpaya	PMCU	1	No	Identified as a vacancy since HR data was not available. Vacancies advertised by Min of Health in the difficult stations list 2020
	DH(C)Madampe	DH	2	Yes	Identified as a vacancy since HR data was not available
Total Vacancies to be filled in Phase 1 which have approved cadre			**2**		
Total Vacancies to be filled in Phase 1 which do not have approved cadre*			**5**		
Total Vacancies to be filled in Phase 1			**7**		
Phase 2	DH(A)Rakwana	DH	3	Yes	
	DH(A)Godakawela	DH	2	Yes	
	DH(B)Palmadulla	DH	1	Yes	
	DH(C)Ranwala	DH	2	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DH(C)Hunuwala	DH	1	Yes	
Total Vacancies to be filled in Phase 2 which have approved cadre			**9**		
Total Vacancies to be filled in Phase 2 which do not have approved cadre*			**0**		
Total Vacancies to be filled in Phase 2			**9**		

Vacancies to be filled in Phase 1 which have approved cadre - 02

Vacancies to be filled in Phase 1 which do not have approved cadre – 05

Total Vacancies to be filled in Phase 1 – 07

Total Vacancies to be filled in Phase 2 which have approved cadre – 09

Total Vacancies to be filled in Phase 2 which do not have approved cadre - 0

Total Vacancies to be filled in Phase 2 – 09

Table 1.36:

Anuradhapura District – Thambuththegama Cluster

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 1	DHC Mahananneriya	DH	1	No	Identified as a vacancy since HR data was not available
	DH Giribawa	DH	1	No	Identified as a vacancy since HR data was not available
Total Vacancies to be filled in Phase 1 which have approved cadre			**0**		
Total Vacancies to be filled in Phase 1 which do not have approved cadre*			**2**		
Total Vacancies to be filled in Phase 1			**2**		
Phase 2	DHB Eppawala	DH	1	Yes	
	DHB Thalawa	DH	3	Yes	
	DHC Rajanayake Track 11	DH	1	Yes	
Total Vacancies to be filled in Phase 2 which have approved cadre			**5**		
Total Vacancies to be filled in Phase 2 which do not have approved cadre*			**0**		
Total Vacancies to be filled in Phase 2			**5**		

Vacancies to be filled in Phase 1 which have approved cadre - 0

Vacancies to be filled in Phase 1 which do not have approved cadre – 02

Total Vacancies to be filled in Phase 1 – 02

Total Vacancies to be filled in Phase 2 which have approved cadre – 05

Total Vacancies to be filled in Phase 2 which do not have approved cadre - 0

Total Vacancies to be filled in Phase 2

Table 1.37:

Polonnaruwa District – Medirigiriya Cluster

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 1	PMCU-Meegasewa	PMCU	1	No	Vacancies advertised by Min of Health in the difficult stations list 2020
	PMCU - Diwulankadawala	PMCU	1	No	
Total Vacancies to be filled in Phase 1 which have approved cadre			**0**		
Total Vacancies to be filled in Phase 1 which do not have approved cadre*			**2**		
Total Vacancies to be filled in Phase 1			**2**		
Phase 2	PMCU-Meegasewa	PMCU	1	No	Have requested I additional cadre because the catchment population is high. Vacancies advertised by Min of Health in the difficult stations list 2020.
	PMCU-Vijayapura	PMCU	1	No	Have requested I additional cadre because the catchment population is high.
	PMCU-Abagaswewa	PMCU	1	No	Have requested I additional cadre because the catchment population is high. Vacancies advertised by Min of Health in the difficult stations list 2020
	PMCU - Diwulankadawala	PMCU	1	No	Have requested I additional cadre because the catchment population is high.
	MOH-Medirigiriya	MOH	1		
Total Vacancies to be filled in Phase 2 which have approved cadre			**0**		
Total Vacancies to be filled in Phase 2 which do not have approved cadre*			**4**		
Total Vacancies to be filled in Phase 2			**4**		

Vacancies to be filled in Phase 1 which have approved cadre - 0

Vacancies to be filled in Phase 1 which do not have approved cadre – 02

Total Vacancies to be filled in Phase 1 – 02

Total Vacancies to be filled in Phase 1 which have approved cadre – 0

Total Vacancies to be filled in Phase 1 which do not have approved cadre - 04

Total Vacancies to be filled in Phase 1 – 04

Table 1.38:

Badulla District – Welimada Cluster

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 1	PMCU Hevanakumbura	PMCU	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DHC Nadungamuwa	DH	2	Yes	
	DHC Udaweriya	DH	2	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
Total Vacancies to be filled in Phase 1 which have approved cadre			**5**		
Total Vacancies to be filled in Phase 1 which do not have approved cadre*			**0**		
Total Vacancies to be filled in Phase 1			**5**		
Phase 2	PMCU Pannalawela (CD)	PMCU	1	No	Have requested I additional cadre because the catchment population is high.
	DHB Uvaparanagama	DH	1	Yes	Have requested I additional cadre because the catchment population is high.
	DHC Wewegama	DH	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DHC Bogahakumbura	DH	1	Yes	
	DHC Boralanda	DH	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DHC Kirkeels	DH	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DHC Haggala	DH	1	Yes	
	DHC Mirahawatta	DH	1	Yes	
	DHC Downside		1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
Total Vacancies to be filled in Phase 2 which have approved cadre			**8**		
Total Vacancies to be filled in Phase 2 which do not have approved cadre*			**1**		
Total Vacancies to be filled in Phase 2			**9**		

Vacancies to be filled in Phase 1 which have approved cadre - 05

Vacancies to be filled in Phase 1 which do not have approved cadre – 0

Total Vacancies to be filled in Phase 1 - 05

Vacancies to be filled in Phase 2 which have approved cadre - 08

Vacancies to be filled in Phase 2 which do not have approved cadre – 01

Total Vacancies to be filled in Phase 2 – 09

Table 1.39:

Moneragala District – Bibile Cluster

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 1	PMCU Rathmalgahaella	PMCU	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DH (B) Medagama	DH	2	Yes	
	DH (C) Pitakumbura	DH	2	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
Total Vacancies to be filled in Phase 1 which have approved cadre			**5**		
Total Vacancies to be filled in Phase 1 which do not have approved cadre*			**0**		
Total Vacancies to be filled in Phase 1			**5**		

Vacancies to be filled in Phase 1 which have approved cadre - 05

Vacancies to be filled in Phase 1 which do not have approved cadre – 0

Total Vacancies to be filled in Phase 1 – 05

Table 1.40:

Nuwara Eliya District – Rikillagaskada Cluster

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 1	PMCU Manakola	PMCU	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
Total Vacancies to be filled in Phase 1 which have approved cadre			**1**		
Total Vacancies to be filled in Phase 1 which do not have approved cadre*			**0**		
Total Vacancies to be filled in Phase 1			**1**		
Phase 2	PMCU Rupaha	PMCU	1	Yes	
	PMCU Kurupanawela	PMCU	1	Yes	
	PMCU Keerthibandarapura	PMCU	1	No	Have requested I additional cadre because the catchment population is high.
	PMCU Manakola	PMCU	1	No	
	DHC Gonaganthanna	DH	2	Yes	To replace 2MOs wo are on transfer orders in 2020 without replacement
	DHC Gonapitiya	DH	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DHC Hanguranketha	DH	1	Yes	
	DHC Madulla	DH	2	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DH Mandaramnuwara	DH	3	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DH Mathurata	DH	2	Yes	
	DHC Mooloya	DH	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DHC Nildhandahinna	DH	1	Yes	
	DHC Theripaha	DH	1	Yes	Vacancies advertised by Min of Health in the difficult stations list 2020
	DHA Walapane	DH	2	Yes	
Total Vacancies to be filled in Phase 2 which have approved cadre			**18**		
Total Vacancies to be filled in Phase 2 which do not have approved cadre*			**2**		
Total Vacancies to be filled in Phase 2			**20**		

Vacancies to be filled in Phase 1 which have approved cadre - 01

Vacancies to be filled in Phase 1 which do not have approved cadre – 0

Total Vacancies to be filled in Phase 1 – 01

Vacancies to be filled in Phase 2 which have approved cadre - 18

Vacancies to be filled in Phase 2 which do not have approved cadre – 02

Total Vacancies to be filled in Phase 2 – 20

Table 1.41:

Nuwara Eliya District – Rikillagaskada Cluster cont.

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 3	PMCU Keerthibandarapura	PMCU	1	No	Have requested I additional cadre because the catchment population is high.
	DHC Madulla	DH	1	No	Have requested I additional cadre because the catchment population is high.
	DHC Theripaha	DH	1	No	Have requested I additional cadre because the catchment population is high.
Total Vacancies to be filled in Phase 3 which have approved cadre			**0**		
Total Vacancies to be filled in Phase 3 which do not have approved cadre*			**3**		
Total Vacancies to be filled in Phase 3			**3**		

Vacancies to be filled in Phase 3 which have approved cadre - 0

Vacancies to be filled in Phase 3 which do not have approved cadre – 03

Total Vacancies to be filled in Phase 3 – 03

Table 1.42:

Kandy District – Theldeniya Cluster

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 1	Digana Rajawella PMCU	PMCU	2	No	
	PMCU Ragala-Makuldeniya	PMCU	1	No	Identified as a vacancy since HR data was not available
	Prison Hospital Pallekela	DH	1	No	Identified as a vacancy since HR data was not available
Total Vacancies to be filled in Phase 1 which have approved cadre			**0**		
Total Vacancies to be filled in Phase 1 which do not have approved cadre*			**4**		
Total Vacancies to be filled in Phase 1			**4**		
Phase 2	Sandasiri Dunuwila PMCU	PMCU	1	No	Have requested one additional cadre because According DLI3, 2 MO s needed for proper functioning of essential service package. Vacancies advertised by Min of Health in the difficult stations list 2020.
	Meemure PMCU	PMCU	1	No	Have requested one additional cadre because According DLI3, 2 MO s needed for proper functioning of essential service package
	Udadumbara MOH	MOH	1	Yes	
	Medadumbara MOH	MOH	1	Yes	
	Digana Rehabilitation Hospital	DH	1	Yes	
	Dunhinna DHC	DH	1	Yes	
	Narampanawa DHC	DH	2	Yes	
	Medamahanuwara DHB	DH	1	Yes	
	Udadumbara DH	DH	1	Yes	
	Kolongoda DH	DH	1	Yes	
Total Vacancies to be filled in Phase 2 which have approved cadre			**9**		
Total Vacancies to be filled in Phase 2 which do not have approved cadre*			**2**		
Total Vacancies to be filled in Phase 2			**11**		

Total Vacancies to be filled in Phase 1 which have approved cadre – 0

Total Vacancies to be filled in Phase 1 which do not have approved cadre - 04

Total Vacancies to be filled in Phase 1 – 04

Total Vacancies to be filled in Phase 1 which have approved cadre – 09

Total Vacancies to be filled in Phase 1 which do not have approved cadre - 02

Total Vacancies to be filled in Phase 1 – 11

Table 1.43:

Kandy District – Theldeniya Cluster cont.

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 3	Digana Rehabilitation Hospital	DH	2	No	Have requested two additional cadre to fill this gap of 2 RMOs with Medical Officer
	Dunhinna DHC	DH	3	No	Have requested one additional cadre to fill this gap of 1 RMO with Medical Officer and another 2 additional cadre because According DLI3, 3 MOs needed for proper functioning of essential service package
	Narampanawa DHC	DH	1	No	Have requested one additional cadre to fill this gap of 1 RMOs with Medical Officer
	Medamahanuwara DHB	DH	2	No	Have requested two additional cadre to fill this gap of 2 RMOs with Medical Officer
	Udadumbara DH	DH	2	No	Have requested one additional cadre to fill this gap of 1 RMO with Medical Officer and another one additional cadre because according DLI3, 2 MOs needed for proper functioning of essential service package
	Kolongoda DH	DH	1	No	Have requested one additional cadre because According DLI3, 2 MO s needed for proper functioning of essential service package
	Menikhinna DHA	DH	1	No	Have requested one additional cadre because According DLI3, 2 MO s needed for proper functioning of essential service package
Total Vacancies to be filled in Phase 3 which have approved cadre			**0**		
Total Vacancies to be filled in Phase 3 which do not have approved cadre*			**12**		
Total Vacancies to be filled in Phase 3			**12**		

Total Vacancies to be filled in Phase 3 which have approved cadre – 0

Total Vacancies to be filled in Phase 3 which do not have approved cadre - 12

Total Vacancies to be filled in Phase 3

Table 1.44:

Matale District – Dambulla Cluster

Priority	Institute	Category	Vacancies	MO Cadre Approved (Yes/No)	Remarks
Phase 1	PMCU Dewahuwa	PMCU	2	No	Have requested two additional cadre to fill this gap of 2 RMOs with Medical Officer
	PMCU Wahacotte	PMCU	2	No	Have requested two additional cadre to fill this gap of 2 RMOs with Medical Officer
Total Vacancies to be filled in Phase 1 which have approved cadre			**0**		
Total Vacancies to be filled in Phase 1 which do not have approved cadre*			**4**		
Total Vacancies to be filled in Phase 1			**4**		
Phase 2	DHC Galewela	DH	1	Yes	
	DHB Madipola	DH	2	Yes	
	DHC Sigiriya	DH	2	Yes	
Total Vacancies to be filled in Phase 2 which have approved cadre			**5**		
Total Vacancies to be filled in Phase 2 which do not have approved cadre*			**0**		
Total Vacancies to be filled in Phase 2			**5**		
Phase 3	DHB Madipola	DH	3	No	Have requested three additional cadre to fill this gap of 3 RMOs with Medical Officers
Total Vacancies to be filled in Phase 3 which have approved cadre			**0**		
Total Vacancies to be filled in Phase 3 which do not have approved cadre*			**3**		
Total Vacancies to be filled in Phase 3			**3**		

Total Vacancies to be filled in Phase 1 which have approved cadre – 0

Total Vacancies to be filled in Phase 1 which do not have approved cadre - 04

Total Vacancies to be filled in Phase 1 – 04

Total Vacancies to be filled in Phase 2 which have approved cadre – 05

Total Vacancies to be filled in Phase 2 which do not have approved cadre - 0

Total Vacancies to be filled in Phase 2 – 05

Total Vacancies to be filled in Phase 3 which have approved cadre – 0

Total Vacancies to be filled in Phase 3 which do not have approved cadre - 03

Total Vacancies to be filled in Phase 3 – 03

Table 1.45: Total MO vacancies to be filled in Cluster Hospitals

Cluster	Phase 1	Phase 2	Phase 3
	No MOs to fill approved cadre	MOs present, need to fill Vacancies in the approved cadre	Additional requested cadre
Kegalle District – Karawanella Cluster	7	8	0
Rathnepura District – Kahawatta Cluster	7	9	0
Anuradhapura District – Thambuththegama Cluster	2	5	0
Polonnaruwa District – Medirigiriya Cluster	2	4	0
Badulla District – Welimada Cluster	5	9	0
Moneragala District – Bibile Cluster	5	0	0
Nuwara Eliya District – Rikillagaskada Cluster	1	20	3
Kandy District – Theldeniya Cluster	4	11	12
Matale District – Dambulla Cluster	4	5	3
Total	**37**	**71**	**18**

Job description

The formats of job descriptions were sent to DPD's of PIU's of the provinces to fill the format and send it to me to identify the requirements / gaps which has to be corrected or changed according to the new/existing activities which were performed and not included in their duty list at present, which are available in the respective institutions/RDHS offices in the HSEP area.

RDHH were in the opinion that preparation of job description is the function of the line Ministry of Health, therefore online search was done to find out the job descriptions and performance appraisal forms which were used for performance appraisal mechanism for the following staff and non-staff categories in the HSEP area.

It was identified the job descriptions/duty lists(Annexture01) and performance appraisal forms(Annexture02) for the following categories of staff were not available for downloading on the website of Circulars section of the Ministry of Health.

Therefore I requested the DGHS/DDG planning/Director Organization development of the Ministry of Health to take necessary arrangements to upload the job descriptions/duty lists and performance appraisal forms for the following categories of staff.

Job Descriptions/Duty Lists Not available in the Ministry of Health Web portal:

- Administrative & Supportive Staff Category

- Consultants in different specialties
- Hospital Medical Officers
- Hospital Dental Surgeons

- Nursing Staff
  - Ward Sister (Grade1)
  - Nursing Officer(Special) Matron
  - Nursing Officer (Grade 11a & 11b)
- Profession of Supplementary Medical Staff
  - Pharmacist
  - Medical Laboratory Technologist
  - Radiographer
  - Physiotherapist
  - Occupational therapist
- Para Medical Staff
  - Dispenser
  - ECG Recordist
- Ophthalmic Technologist
- Hospital Midwife

Performance Appraisal Formats Not available in the Ministry of Health Web portal:

- Administrative & Supportive Staff Category
  - Medical Administrator (Deputy Grade)
  - Medical Consultant
  - Medical Officer
  - Consultant Dental Surgeon

- Dental Surgeon

- RMO/AMO

- Nursing Staff
  - Ward Sister (Grade1)
  - Nursing Officer (Special) Matron
  - Nursing Officer (Grade 11a & 11b)
  - PHNO
- Profession of Supplementary Medical Staff
  - Pharmacist
  - Medical Laboratory Technologist
  - Radiographer
  - Physiotherapist
  - Occupational therapist
- Para Medical Staff
  - Dispenser
  - ECG Recordist
  - Ophthalmic Technologist
    - Microscopist/PHLT

Draft: v6

Date: 26/03/2019

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சுகாதாரஇ போசணை மற்றும் சுதேச வைத்திய அமைச்சு
Ministry of Health, Nutrition & Indigenous Medicine

JOB DESCRIPTION

A. *Description of Provincial Director Health Services*	
A1. Job Title: Provincial Director of Health Services	A2. Salary Code:
A3. Institution:	A4. Department/Division:
A5. Service Category: Senior Executive Grade	A6. Grade/class:

A7. Summary of job:

The District Director of Health Services is responsible to ensure the delivery of quality care and services to fulfill the required health needs of the district. The DDHS should implement district health plans to achieve national health policies by managing all resources given to the district efficiently and generating additional resources wherever possible.

B. *Role/ Responsibilities*	
B1. Key Result Areas/ Key accountabilities	**B2. Key Performance Indicators**
1. Leadership and governance	
1.1. General Administration	1. Percentage of financial allocation utilized at the end of the financial year 2. Comprehensive updated district health profile is available
1.2. Planning, Implementation, Monitoring and Evaluation	1. Availability of 5 year district health plan 2. Percentage of physical progress achieved at the end of the year 3. Percentage/number of review meetings conducted timely according to national and provincial guidelines

1.3. Supervision	1. Percentage of Institutions (MOH/PMCU/DH/BH) supervised in the past one year of all institutions under purview of the DDHS
2. Service delivery:	
2.1. Preventive Health Services	1. Percentage of MOH meeting minutes available out of 12 held during the year 2. Availability of follow-up for supervisions done at ground level for public health staff
2.2. Curative Health Services	1. Percentage of Management Committee Meeting minutes available out of total that should be available for all institutions throughout the year
2.3. Disaster preparedness and response	1. Availability of an updated district disaster preparedness and response plan
3. Human Resources Management	1. Availability of updated database of human resources in the district
4. Health information system and research	1. Availability of health bulletin for the district for the year
5. Intra and inter-sectoral co-ordination and collaboration	1. Number of programs held in collaboration with other government and non government stakeholders in the district during the year
6. Functions to improve the access to essential medicines, vaccines and technologies	1. Percentage of hospitals with required buffer stock available throughout the year 2. Percentage of drug and therapeutic committee meetings held out of the number required at DDHS level during the year
B3. Supervisory responsibilities (direct & indirect): Health manager responsible for supervision of institutions and cadres under the purview of the DDHS add list	

B4. Tasks/functions:

1. Leadership and governance

1. General Administration

1.1. Be familiar with the prevailing administrative systems at the national and provincial levels and coordinate with line ministry and provincial authorities accordingly

1.2. Be aware of all health institutions in the district in relation to health service delivery, geographical distribution, and resources available, population structure and socio-economic status of the district

1.3. Act as the Financial Authority as vested by the relevant authority and efficient utilization of resources allocated to the district

1.4. Act as the Legal Authority to ensure effective implementation of all acts, ordinances, regulations, and statutory powers vested to DDHS in the legislations enacted to preserve the health of the public;

1.5. Conduct disciplinary inquiries and ensure timely implementation of recommended disciplinary actions

1.6. Ensure the rights of the public and employees are preserved

2. Planning, Implementation, Monitoring and Evaluation

2.1. Develop the annual health plan for the district within the framework of all national policies and guidelines, and considering district requirements including emerging needs

2.2. Advice and coordinate the district health planning process based on priority health needs of the district and the inputs of the district health team

2.3. Ensure effective implementation of approved annual development plans and health programs in the district with the support of the district health team

2.4. Conduct regular progress reviews on planned annual development activities with the district health team

2.5. Conduct the annual performance review on planned health programs with the district health team

2.6. Ensure that relevant district health officers carry out periodic analysis of the patterns of morbidity, mortality and service needs of the target population, forecasting future requirements due to seasonal variation or epidemiological transition, and take the necessary steps to rectify the gaps

2.7. Facilitate periodic surveys conducted in the district on health and health related aspects as per the national and/or local requirements

3. Supervision

3.1. Make regular supervisory visits to the preventive and curative health institutions and the field under the purview of the DDHS and take necessary corrective actions

3.2. Ensure regular supportive supervision of staff under the purview of the DDHS

2. Service delivery:

1. Responsible for provision of comprehensive range of health services, appropriate to the needs of the target population, including promotive, preventative, curative, palliative and rehabilitative services
2. Ensure interventions to provide patient centered, timely, equitable, accessible and safe, health services to cover entire population of the district
3. Ensure adherence to productivity, quality of care and patient safety objectives in health care institutions under the purview of DDHS through the district Quality Management Unit

4. Preventive health services

4.1. Review patterns of morbidity, mortality and preventive service needs of the population of the district and guide the district health team to address the gaps

4.2. Implement activities of national programs and special campaigns in the district in relation to health services related to life course (including reproductive, maternal, child, adolescent, youth, elderly, and oral health) prevention and control of communicable and non-communicable diseases

4.3. Ensure food and water safety, regulation of pharmacies, occupational safety, and environmental protection, including waste management

4.4. Review and recommend reallocation of population groups to MOH/PHI/PHM etc areas

5. Curative health services

5.1. Review curative service needs based on morbidity and mortality data and plan for improved curative service provision

5.2. Ensure provision of clinical, supportive and utility services within the curative institutions under the purview of the DDHS

5.3. Recommend establishment and upgrading of health institutions and catchment areas, and take necessary steps to provide the required level of services

5.4. Intervene to promote optimum utilization of primary level curative care institutions

6. Disaster preparedness and response

6.1. Responsible to coordinate disaster preparedness and response activities in the district

6.2. Act as the Incident Commander during a health-related emergency or disaster involving the district

6.3. Ensure the availability of a regularly updated district disaster preparedness and response plan and adequate buffer stocks of medicines and supplies for emergencies

6.4. Build capacity of the district health staff (both preventive and curative) for disaster preparedness and response and conduct regular simulation drills as per the national guidelines

3. Human Resources Management

3.1. Ensure to have an updated database of available cadre for all categories of health workers in the district

3.2. Assess human resource requirements and develop proposals for required cadre revisions for the district

3.3. Ensure equitable distribution of cadres within the district relevant to the service needs

3.4. Ensure regular in-service training programmes for relevant categories of health workers based on training needs analysis

3.5. Authorize/approve financial remunerations to the health workers in the district as per the financial regulations

3.6. Conduct regular performance appraisal of health workers and take corrective action when necessary

4. Health information system and research

4.1. Establish and operate relevant health information systems, epidemiological surveillance systems, databases and design and implement relevant processes and procedures to undertake periodic evaluations

4.2. Ensure evidence-based decision making based on the information gathered from the available information systems

4.3. Ensure periodic publication of health bulletins in the district

4.4. Conduct, encourage and assist research pertaining to healthcare in the district

5. Intra and inter-sectoral co-ordination and collaboration

5.1. Coordinate and maintain good public relations with government and non-government institutions and field services related to healthcare delivery in the district.

5.2. Contribute and give guidance to the planning process of other health related government organizations, NGOs and private sector in the district, and obtain their views as required for health development in the district

5.3. Actively participate in district level meetings involving other government sectors and advocate for improvement of health services in the district

6. Functions to improve the access to essential medicines, vaccines and technologies

6.1. Ensure equitable access and availability to essential medicines, vaccines and technologies in the district considering complaints, supervision reports and minutes of drug and therapeutic committee meeting conducted in institutions under the purview of DDHS

6.2. Ensure the appropriate management (selection, procurement, storage and distribution, and use) of drugs, technologies, equipment, laboratory and other diagnostic services in the health institutions under the purview of the DDHS

7. Any other duties as assigned by the PDHS

C. *Person Specifications*

C1. Minimum Educational Qualifications:

As per the latest available Medical Service Minute of Sri Lankan Health Service

C2. Skills required:

1. Conceptual skills
2. Human skills
3. Technical skills

C3. Competencies (General & Career):

General Competencias:

1. Communication
2. Planning and administration
3. Teamwork
4. Strategic Action
5. Multicultural
6. Self Management

Career Competencies:

- Operations, administration and resource management
- Knowledge of the health care environment
- Evidence-informed decision-making

C4. Special circumstances affecting the job, associated risks/working conditions:

- Maintain uninterrupted essential health services in the district in circumstances such as disasters, trade union action, political and civil unrest
- Responsible to both central and provincial authorities

C5. Service Standards:

- Guidelines, policies and circulars of the Ministry of Health and Provincial statutes, and legislation of the GoSL
- Should aim to reach annual targets in all main functional areas

C6. Values and ethics:

- Should follow a high personal and professional code of ethics
- Should appreciate the socio-cultural values of the local populations as well as healthcare workers in the context of healthcare management

C7. Responsibility of facilities and resources:

Shall be responsible for health facilities and resources in the department of health services within the district

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D. *Key Relationships*

D1. Authorizing Officer: Secretary, Ministry of Health	D2. Reporting to: Provincial Director of Health Services
D3. Supporting staff: Technical and Administrative Staff within the district	

D4. Approved by:

Secretary
Ministry of Health, Nutrition & Indigenous Medicine
Date:

JOB DESCRIPTION

A. *Description of RDHS*	
A1. Job Title:	A2. Salary Code:
A3. Institution:	A4. Department/Division:
A5. Service Category:	A6. Grade/class:

A7. Summary of job:

Write summary of job here

B. *Role/ Responsibilities*	
B1. Main Areas of Responsibility	**B2. Key Performance Indicators**
1. Fill main areas of responsibility here	Fill key performance indicators of each responsibility here
B3. Supervisory responsibilities (direct & indirect):	

B4. Tasks/functions:

Write tasks and functions here

C. *Person Specifications*

C1. Minimum Educational Qualifications:

As per the latest available Medical Service Minute of Sri Lankan Health Service

C2. Skills required:

1. Conceptual skills
2. Human skills
3. Technical skills

C3. Competencies (General & Career):

General Competencies:

Career Competencies:

C4. Special circumstances affecting the job, associated risks/working conditions:

C5. Service Standards:

C6. Values and ethics:

C7. Responsibility of facilities and resources:

D. *Key Relationships*

D1. Authorizing Officer: Secretary, Ministry of Health	D2. Reporting to: Provincial Director of Health Services
D3. Supporting staff:	

D4. Approved by:

Secretary
Ministry of Health, Nutrition & Indigenous Medicine
Date:

JOB DESCRIPTION

A. *Description of position*	
A1. Job Title: Public Health Nursing Officer	A2. Salary Code: MT07
A3. Institution: Ministry of Health	A4. Department/Division: Public Health Nursing
A5. Service Category: Sri Lanka Nursing Service	A6. Grade/class: Grade I, IIa, IIb, III

A7. Summary of job: Prevent and Control Non-Communicable diseases and provide comprehensive care to the Community in the context of Palliative care, Geriatric care, provision of specific services and research

B. *Role/ Responsibilities*	
B1. Main Areas of Responsibility	**B2. Key Performance Indicators**
1) NCD Activities 2) Palliative Care 3) Geriatric Care 4) Provision of specific services such as disaster management 5) Research and Surveys	1) Number of Patients registered. Number of Health Promotion Activities Conducted, Number of Mobile Clinic assisted. 2) Number of patients care given for Palliative Patients; number of nursing procedures conducted for Palliative patients. 3) Number of persons registered over 60 years; number of basic nursing services provided Number of special events conducted. 4) Number of researches, surveys conducted or Assisted.
B3. Supervisory responsibilities (direct & indirect): Direct- MOIC/DMO in the Hospital Indirect- PHNS,MOH, RSPHNO, RDHS, PDHS, District MO/NCD, Palliative and Geriatric care officers	

（01) As a Care Provider In the healthy lifestyle center activities

- Assist in the HLC clinics by drawing blood and collecting urine samples for biochemical analysis and taking anthropometric measurement (height and weight). Documentation of the above.
- Registration of persons tinder care attending HLC and maintain records and ensure Follow up and referrals.
- Conduct health promotional activities on lifestyle changes for a healthier living at the HLC's and in outreach programs.
- Assist with emergencies such as acute exacerbation of Bronchial asthma, acute coronary
  Syndromes of patients attend the PMCU.
- Assist in wound management and foot care.
- Provide palliative care, care for the pain management, and geriatric care of patients who
  attended the PMCU.
- Assist in mobile clinics
- Assist in follow-ups for patients attended the HT.C
- Conducting breast examination and doing pap smears
- Fallow up persons with Mental illness

（02) Palliative Care

Palliative Care focused on providing relief form symptoms and stress of chronic illnesses the

Goal is to improve quality of life for bath client and the family, Therefore PIINO need to,

- Attend 1o the client suffering from the diseases und providing comprehensive care
- Administer medicines and injections prescribed by the Medical Officer to the client if needed.
- Consider to provide psychological, social and spiritual support whenever needed.
- Get involve with holistic care
- Ensure bereavement support and end of life support
- Family meeting
- Management of total pain with pharmacological and non-pharmacological Intervention.
- Prevent complications with bedridden patient by providing appropriate care and Educating family members (bed sores, Circulation problems, Exercises etc.....)
- Insert Nasal-Gastric tubes and urinary catheters when advised.
- Provide ostomy care.
- Perform wound dressing when needed.

（03) Geriatric Care

- Nursing care provided for elderly person with a focus not only on illnesses hut on overall health and wellness.
- Assessment of the Older person(ADL, IADL, FRAI, LITY)

- Prioritizing issues with the coordination of multi stake holder approach (specially with the social service officer)
- Promotion active healthy ageing through advocacy to the older individuals, family members, care givers and other age categories according to life course approach
- Basic nursing services Provision through home visits- NG feeding, IV injection, wound dressing, urinary catheterization when advice under the supervision of MO.
- Effective communication with older person, care givers including family members to get the decision she can conduct family meeting regarding care.
- Assist in elderly clinics, including screening clinics
- Visit in elderly homes, day centers and village committees.
- Liaise with physiotherapist, occupational therapist, speech and language therapist in rehabilitation of person at community level.
- Maintain records and returns in relation to geriatric care
- Participation of in-service training programs on elderly care.
- Effective recreational activities.

(04) Provision of Specific Services

Provision of specific services when requested by the supervising officers, this may be including disaster management, assisting the public health staff for emergencies.

(05) Research and Surveys

Shall conduct research and studies under supervision of the supervising officers with a view to evaluating achievements/determining service needs/improving service delivery/identify patients out comes and improving community health etc.

(06) Any other duties are assigned by the MOIC.

C. *Person Specifications*

C1. Minimum Educational Qualifications:

Diploma in General Nursing/two years experiences/six months training.

Two weeks training in public health nursing at the beginning

Six months on the job training in post basic school in Colombo for public health nursing

C2. Skills required:

1. Basic Public Health Sciences Skills

Defines, assesses an understands the health status of populations, determinants of health and illness, factors contributing to health promotions and disease prevention, and factors influencing the use of health services.

Applies the basic public health sciences including behavioral and social sciences, biostatistics, epidemiology, environmental public health and prevention of chronic and infectious diseases and injuries.

2. Community Dimensions of Practice Skills

Establishes and maintains linkages with key stakeholders in public health.

Collaborates with community partners to promote the health of the population.

3. Cultural Competency Skills

Utilize appropriate methods for interacting sensitively, effectively and professionally with persons from diverse culture, socioeconomic, educational, racial, ethnic and professional backgrounds and ages and lifestyle preferences

4. Communication Skills

Uses the media, advanced technologies and community networks to communicate information

Effectively presents accurate demographic, statistical, programs and scientific information for professional and lay audiences

5. Analytic Assessment Skills

Defines a problem

D. *Key Relationships*

D1. Authorizing Officer: DMO/RDHS/PDHS	D2. Reporting to: MOIC
D3. Supporting staff: all other health officers	

D4. Approved by:

Secretary
Ministry of Health, Nutrition & Indigenous Medicine
Date:

JOB DESCRIPTION

A. *Description of position*	
A1. Job Title: Cluster Nursing Officer	A2. Salary Code: MT07
A3. Institution: Ministry of Health	A4. Department/Division: Public Health Nursing
A5. Service Category: Sri Lanka Nursing Service	A6. Grade/class: Grade I, IIa, IIb, III

A7. Summary of job: Prevent and Control Non-Communicable diseases and provide comprehensive care to the Community in the context of Palliative care, Geriatric care, provision of specific services and research

B. *Role/ Responsibilities*	
B1. Main Areas of Responsibility	**B2. Key Performance Indicators**
6) NCD Activities 7) Palliative Care 8) Geriatric Care 9) Provision of specific services such as disaster management 10) Research and Surveys	5) Number of Patients registered. Number of Health Promotion Activities Conducted, Number of Mobile Clinic assisted. 6) Number of patients care given for Palliative Patients; number of nursing procedures conducted for Palliative patients. 7) Number of persons registered over 60 years; number of basic nursing services provided Number of special events conducted. 8) Number of researches, surveys conducted or Assisted.
B3. Supervisory responsibilities (direct & indirect): Direct- MOIC/DMO in the Hospital Indirect- PHNS,MOH, RSPHNO, RDHS, PDHS, District MO/NCD, Palliative and Geriatric care officers	

（01) As a Care Provider In the healthy lifestyle center activities

- Assist in the HLC clinics by drawing blood and collecting urine samples for biochemical analysis and taking anthropometric measurement (height and weight). Documentation of the above.
- Registration of persons tinder care attending HLC and maintain records and ensure Follow up and referrals.
- Conduct health promotional activities on lifestyle changes for a healthier living at the HLC's and in outreach programs.
- Assist with emergencies such as acute exacerbation of Bronchial asthma, acute coronary
  Syndromes of patients attend the PMCU.
- Assist in wound management and foot care.
- Provide palliative care, care for the pain management, and geriatric care of patients who
  attended the PMCU.
- Assist in mobile clinics
- Assist in follow-ups for patients attended the HT.C
- Conducting breast examination and doing pap smears
- Fallow up persons with Mental illness

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- Administer medicines and injections prescribed by the Medical Officer to the client if needed.
- Consider to provide psychological, social and spiritual support whenever needed.
- Get involve with holistic care
- Ensure bereavement support and end of life support
- Family meeting
- Management of total pain with pharmacological and non-pharmacological Intervention.
- Prevent complications with bedridden patient by providing appropriate care and Educating family members (bed sores, Circulation problems, Exercises etc.....)
- Insert Nasal-Gastric tubes and urinary catheters when advised.
- Provide ostomy care.
- Perform wound dressing when needed.

（03) Geriatric Care

- Nursing care provided for elderly person with a focus not only on illnesses hut on overall health and wellness.
- Assessment of the Older person (ADL, IADL, FRAI, LITY)
- Prioritizing issues with the coordination of multi stake holder approach (specially with the social service officer)
- Promotion active healthy ageing through advocacy to the older individuals, family members, care givers and other age categories according to life course approach
- Basic nursing services Provision through home visits- NG feeding, IV injection, wound dressing, urinary catheterization when advice under the supervision of MO.
- Effective communication with older person, care givers including family members to get the decision she can conduct family meeting regarding care.
- Assist in elderly clinics, including screening clinics
- Visit in elderly homes, day centers and village committees.
- Liaise with physiotherapist, occupational therapist, speech and language therapist in rehabilitation of person at community level.
- Maintain records and returns in relation to geriatric care
- Participation of in-service training programs on elderly care.
- Effective recreational activities.

(04) Provision of Specific Services

Provision of specific services when requested by the supervising officers, this may be including disaster management, assisting the public health staff for emergencies.

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Shall conduct research and studies under supervision of the supervising officers with a view to evaluating achievements/determining service needs/improving service delivery/identify patients out comes and improving community health etc.

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C. *Person Specifications*

C1. Minimum Educational Qualifications:

Diploma in General Nursing/two years experiences/six months training.

Two weeks training in public health nursing at the beginning

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C2. Skills required:

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Uses the media, advanced technologies and community networks to communicate information

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5. Analytic Assessment Skills

Defines a problem

D. *Key Relationships*

D1. Authorising Officer: DMO/RDHS/PDHS	D2. Reporting to: MOIC
D3. Supporting staff: all other health officers	

D4. Approved by:

Secretary
Ministry of Health, Nutrition & Indigenous Medicine
Date:

JOB DESCRIPTION

A. *Description of position*	
A1. Job Title: Nursing Officer PMCI/HLC	A2. Salary Code: MT07
A3. Institution: Ministry of Health	A4. Department/Division: Public Health Nursing
A5. Service Category: Sri Lanka Nursing Service	A6. Grade/class: Grade I, IIa, IIb, III

A7. Summary of job: Prevent and Control Non-Communicable diseases and provide comprehensive care to the Community in the context of Palliative care, Geriatric care, provision of specific services and research

B. *Role/ Responsibilities*	
B1. Main Areas of Responsibility	**B2. Key Performance Indicators**
11) NCD Activities 12) Palliative Care 13) Geriatric Care 14) Provision of specific services such as disaster management 15) Research and Surveys	9) Number of Patients registered. Number of Health Promotion Activities Conducted, Number of Mobile Clinic assisted. 10) Number of patients care given for Palliative Patients; number of nursing procedures conducted for Palliative patients. 11) Number of persons registered over 60 years; number of basic nursing services provided Number of special events conducted. 12) Number of researches, surveys conducted or Assisted.
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- Assist in wound management and foot care.
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(05) Research and Surveys

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(06) Any other duties are assigned by the MOIC.

C. *Person Specifications*

C1. Minimum Educational Qualifications:

Diploma in General Nursing/two years experiences/six months training.

Two weeks training in public health nursing at the beginning

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C2. Skills required:

1. Basic Public Health Sciences Skills

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Applies the basic public health sciences including behavioral and social sciences, biostatistics, epidemiology, environmental public health and prevention of chronic and infectious diseases and injuries.

2. Community Dimensions of Practice Skills

Establishes and maintains linkages with key stakeholders in public health.

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4. Communication Skills

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Effectively presents accurate demographic, statistical, programs and scientific information for professional and lay audiences

5. Analytic Assessment Skills

Defines a problem

D. *Key Relationships*

D1. Authorising Officer: DMO/RDHS/PDHS	D2. Reporting to: MOIC
D3. Supporting staff: all other health officers	

D4. Approved by:

Secretary
Ministry of Health, Nutrition & Indigenous Medicine
Date:

SECTION 02

HRH Training Needs

Annual HRH action plan was prepared under HRH planning, HRH training, HRH management and requested DPD's of the PIU's of the respective provinces to send their training needs to accommodate when preparing the training need of the different categories of staff in the HSEP area. No responses received from the provinces except North Central Province. Therefore, virtual training programs on Health Care Quality and Safety (Annexure03) were arranged and it was successfully completed.

Updated HR Capacity Gaps and developed capacity development plan to address capacity gaps

Training need assessment

Staff category	Training need / human resource capacity gaps	Capacity development plan to address the gaps	Time interval Yearly/ quarterly/ monthly	Resource persons
1. RDHS	1.Traning on human resource development 2.Traning on procurement 3.Traning on project management 4.Traning on emotional intelligence	Three-day residential programme for all RDHS of the country on procurement, human resource development, personal branding and personality development, public speaking, conflict resolution. Online training programme on project management	Annually	1.HR specialists, 2.Motivational speakers 3.Marketing specialists
2. Medical consultants	1.			
3. Accountant				

4. All programme officers at the RDHS office / other health institutions	1. Training on preparation of annual plan, 5 years plan, 10 years plan. 2. Training on Power point presentation preparation and delivery skills 3. Training on public speaking 4. Traning on financial mangement , budgeting	Residential training on planning, financial management budgeting. Training on IT skills, personality development, public speaking.	Annually	1.Officials from department of national planning, treasury 2. IT specialists
5. Medical Officers Medical officer in charge at the PMCI (MOIC) /	1.Traning on management of anaphylaxis, road traffic accidents, snake bites, rational use of antibiotics, hospital acquired infections. 2. Training on palliative care of back referral of patients with terminal cancer, maintenance therapy of patients with psychiatric illness 3. Training on planning, budgeting, financial management, human resource management, establishment code, drug management,	Facilitation of the conducting of monthly clinical meetings at Base Hospital Madirigiriya and facilitation of participation of MOICs of PMCIs by arranging relief Medical officers on the days of clinical meetings Three-day annual, residential programme for all medical officers in charge (MOIC) of PMCI on all aspects of management of an institution. Online training programmes for which the MOICs can participate and acquire an certificate on completion on selected aspects of management of an institution – e.g. Leadership skills, personality development,	Monthly Annual	1.Medical consultants 2.Human resource management specialists 2.Quality improvement specialists 3. Accountants 4. Administrative officers 5. Marketing specialists

OPD Medical officers of Apex hospital/ Medical officers – blood bank of Apex / Medical Officer Quality Management Unit of Apex Hospital / MO – Medico legal of the Apex Hospital	inventory management 4. Training on maintenance of necessary documents 5. Training on patient safety, quality – total quality management, 5S, 5. Training on conducting disciplinary proceedings and on instituting disciplinary action. 6. Training on liaising with media, public relations, marketing of the institution 7. Traning on digital medical records	public speaking, branding the institution, public relations. Training on branding the health care institution, marketing the institution among the clients, making the institution attractive to the clients. Online training on total quality management, continuous quality improvement, public relations, branding and marketing of the health care institution which the MO can complete on his own pace and a certificate will be issued upon completion.	Periodic training online for three months / six months	

	Training on quality, patient safety, branding and marketing of the institution, public relations, conflict management, change management.			
6. Dental Surgeon	1.Traning on advanced life support, treatment of anaphylaxis, rational prescribing of antibiotics, 2. Training on Digital Medical record maintenance 3. Training on inventory management	Facilitation and conducting residential/ nonresidential full day workshops on relevant medical aspects of management of a patient with oral / dental complaint e.g., management of anaphylaxis, management of medically compromised patient, basic and advanced life support, medico legal aspects		Consultant microbiologist Consultant anesthetist Judicial medical officers Cardiologist, nephrologist, psychiatrist Senior administrative officers in government service Fitness instructors

		Training and guidance on personality development, public speaking, interpersonal communication, personal financial management, personal health		
7. School Dental Therapist	1.Traning on child psychology, motivation and behavior change. 2.Traning on interpersonal communication , personality building, time management 3.Traning on inventory management, financial regulations, establishment code 4.Traning on new developments in oral health, restoration of teeth, dietary guidelines, infection control	Online training programmed on child psychology, motivation, behavior change, interpersonal communication, personality building, time management.	Annual three months programme upon completion a certificate will be awarded.	Consultant psychiatrist Motivational speakers Administrative officers of government service Communication and personality development trainers Medical and dental consultants
8. Planning and programme officers	1.Traning on annual, 5-year, 10-year programme planning 2. Training in multimedia usage,			Senior public administrative officers, Professors / lectures from institute of personal management

	computer graphics, IT			
9. Administrative officer				
10. Management assistants	1.Traning in file management, inventory management and verification 2.Traning in computerized information management systems 2.Traning in interpersonal communication	Residential workshop on file management, inventory management, verification, financial management	Annually	Senior public administrative officers Professors / lectures from institute of personal management
11. Health care assistants	1.Training on basic life support, resuscitation, nebulization, 2. Training on effective communication , ethics in patient care, interpersonal communication 3. Training on personality development, management of personal finances			Consultant surgeon, anesthetist, respiratory physician
12. Drivers	Training on road safety, discipline in using public highways, avoiding accidents. Basic training on motor mechanism, minor repairs,	Facilitating and conducting training programmes on responsible driving, road usage. Facilitating and conducting training on vehicle	Annually	Officials from the Sri Lanka Police Department.

	maintenance of motor vehicles. Training on dos and don'ts in the event of an accident/ event on the vehicle being subject to a disaster.	maintenance, repairs.	Quarterly	Mechanical engineers
13. Public health inspectors				
14. Public health midwives	1.Traning on team building, networking, change management, conflict resolution, victim support and care in child abuse / gender-based violence 2. Training on personality development,	One-week residential workshop on team building, networking, change management, conflict resolution, victim identification and support on child abuse/ gender-based violence	Annually	Communication specialists Marketing specialists
15. Pharmacists	Training on drug management, verification of drug stores, stores maintenance, documentation, proper management of short expiry drugs, procedure in the event of quality failure	Facilitating and organizing training programs on drug management, stores management, verification of physical balance and book balance, proper documentation,	Quarterly	Divisional Pharmacist Officials from medical supplies division
16. Dispensers in charge of drug stores at PMCIs.	Training on drug management, verification of drug stores, stores	Facilitating and organizing training programs on drug management, stores management,	Quarterly	1.Divisional Pharmacist

	maintenance, documentation, proper management of short expiry drugs, procedure in the event of quality failure	verification of physical balance and book balance, proper documentation,		2.Officials from Medical Supplies Division
17. Radiographers	1.Traning on advanced radiological techniques 2.traning on inventory management,	Residential training on advanced radiological techniques	Annually	Consultant Radiologists
18. ECG Technicians	1.Traning on advanced techniques of electrographs	Residential programmes on electrocardiography		Consultant electrophysiologists
19. Eye technicians	Training on advanced diagnostic and treatment procedures in detecting / management of eye ailments/ vision issues	Training on advanced techniques on detecting eye ailments / management and diagnosis	Annually	Consultant ophthalmologist
20.				
21. Medical Laboratory technicians	Advanced programmes on maintenance of laboratory equipment, on new modern diagnostic procedures	Residential work shop on modern diagnostic and testing procedures, maintenance of laboratory equipment	Annually	Consultant microbiologists, haematologist, virologists, pathologists
22. Public Health Medical Laboratory Technicians	Advanced programmes on maintenance of laboratory equipment, on new modern	Residential work shop on modern diagnostic and testing procedures, maintenance of laboratory equipment	Annually	Consultant microbiologists, hematologist, virologists, pathologists,

	diagnostic procedures			
23. Public health nursing officers	Advanced training on communication , habit intervention, change communication , team building, networking	One-week residential work shop on new methods of team building, networking, change communication, habit intervention Online training programmes on health promotion,	Quarterly	Communication and marketing specialists
24. Health Education Officer	Training in effective communication , public speaking, motivation, habit intervention,	One-week residential training in effective communication, public speaking, habit intervention, change communication,		Communication specialists, marketing specialists, motivational speakers, psychiatrists, psychologists
25. Cluster nursing officer	Training on management of anaphylaxis, snake bites, road traffic accidents, Basic and advanced life support exacerbations of NCD s – e.g. diabetic ketoacidosis, Training on counselling, providing dietary advice and life style modification to clients of Healthy Life style clinics, Training on public speaking, leadership	Organizing training by medical consultants at the Apex hospital Organizing a three to five days Residential workshop on all above aspects to	Annual	1.HR specialists 2.Marketing and branding specialists 3.Quality management and Patient safety specialists 4. IT specialists

	skills and personality development Training on IT and digital document maintenance , power point presentation skills. Workshop on field nursing / public health nursing skills	all newly appointed cluster nursing officers Practical workshop in the field for cluster nursing officers	Annual Quarterly	

26. Health Care Assistants	Training in basic life support, nebulization, management of emergencies in collaboration with medical and nursing staff- e.g. snake bites, road traffic accidents. Maintenance of documents / computer usage. Training / motivational sessions on personal financial management, inter personal communication , conflict management. Training on life skills development	Practical training in management and assisting in minor emergencies. Provision of practical training on computer usage, proper maintenance of documents Three-day residential workshop on personality building, personal finance management, personal grooming, interpersonal communication.	Quarterly Quarterly Annually	Medical consultants, medical officers 1.IT specialists 2.Medical Recording Officers 1.Leadership and personality development coaches 2. Public health nursing officer 3. Consultant Psychiatrist 4. Accountant

SECTION 03

HRH strategic plan/HRH PHC road map for Provincial Health Department in the HSEPROJECT Area

The provincial HRH strategic plan was prepared after reviewing the Human Resources for Health strategic Plan (2009-2018) of Ministry Of Health & indigenous Medicine Sri Lanka. It states that the provincial and District level management teams are expected to develop HRH action plans Based on their needs guided by the strategic objectives of the strategic plan (2009-2018). Provincial Ministries of Health training institutions are expected to develop implementation plans with defined Time frames. The strategies should be aimed at achieving the following results at the Provincial levels.

- A health workforce that is responsive to population health needs
- An effective and efficient workforce supply at Provincial levels.
- Effective workforce management.

HRH strategic plan for Provincial Health Department in the HSEPROJECT Area

Strategic Objectives

1. Strengthen HRH planning process to respond to service and population needs.
2. Institutionalization of HRH planning as an integral part of National HRD Unit Of the MOH.
3. Improve quality of training (In Service) to meet skill and development needs in changing service Environments
4. Develop and institutionalized Human Resources management system.
5. Address health workforce needs to ensure optimal workforce retention and participation.
6. Establish performance management system for HRH to improve productivity and performance of Health workers.
7. Ensure effective deployment procedures that minimize distribution imbalances.

Policy Directives

- To assist HRD Unit MOH to develop comprehensive set of norms for clinical and public health services at Provincial level.
- Separate HRH Unit with a new staffing profile.
- To develop HRH information system linked to MOH HRIS system.
- Policies related to continuing education /in service training/ fellowships carrrier progess structure in consultation with MOH.
- Retention and motivation policies.
- HRH research/Document best practices/ lessons learned/ HRH problems solving skis and active role for HRH Total Quality Management.

Strategic Objective 01

Strengthen HRH planning process to respond to the Service and population.

Activities

a. Support development of annual operational plan for HRH.

b. Establish an effective mechanism for collection, analysis and use of data for HRH Planning.

c. Develop a mechanism for improved coordination of data gathering. (From RDHS/institutions/campaign etc) Maintain an accurate up to date staffing database.

d. Develop a methodology to utilize HRIS for better management and development of health workers.

e. Identify new categories/roles/skills levels of health workers in line with PHC strategy.

f. Develop new norms based on work load required skill

g. Conduct workload analysis and revise cadre norms.

h. Develop a strategic plan considering population health needs of vulnerable populations groups.

i. Improve amenities and working environment in underserved areas.

j. Develop a methodological framework and indicators for monitoring and evaluation.

k. Establish train M&E teams.

Strategic Objective 02

Institutionalization of HRH planning as an integral part of National HRD Unit of the MOH.

Activities

a. Identify policies on relevant areas of HRH such as deployment and working conditions of all categories of health personal.

b. Define policies for rationalizing the health technology.

c. Establish an inter-sectoral coordination mechanism with (education and other relevant agencies) to ensure integration of HRH with Health System Development.

d. Develop and implement HRH workforce plans and provincial level.

Strategic Objective 03

Improve quality of training (In Service) to meet skill and development needs in changing service environments

- Activities

a. Coordinate with technical Units (MOMCH,RE, RDS,MO planning, MO quality, MO mental health, etc) administration, accounts to carry out training need assessment

b. Conduct and institutionalize training need assessment for all categories of staff.

c. Develop and implement an integrated training plan for Identified training needs

d. Introduce a mechanism to monitor implementation of the plan regularly.

e. Maintain a training database.

f. Establish appropriate quality improvement mechanisms for training programs.

g. Strengthen health professional regulations and practice.

h. Review and reorient curricula for in service training.

i. Review the post Basic Training Program with a view to strengthening them to deliver appropriate skills and competencies.

j. Strengthen training capacity in the training institutions.

k. Strengthen the infrastructure facilities in the training institutions.

l. Strengthen the capacities of training institutions to update knowledge through access to information, technology and knowledge dissemination facilities.

m. Establish a mechanism to strengthen links and to ensure sustained coordination between health services and academics institutions.

n. Prepare 3 year plans for in service training with a mechanism for regular updating.

o. Develop a continuing professional education mechanism.

p. Develop a range of in-service training programs to suit the changing service environment and those that address priority health areas.

q. Strengthen quality assurance and evaluation systems.

r. Make internet access and distant learning facilities available to remote workers.

s. Provide a future workforce skilled in the delivery of increasingly complex care in Community settings.

Strategic Objective 04

Develop and institutionalized Human Resources management system.

Activities

a. Establish HRD Unit at PDHS office

b. Reach consensus on restructuring the organization to accommodate HRD Unit.

c. Develop an advocacy plan to mobilize political commitment for the reorganization.

d. Identify HR functions and tasks

e. Ensure that the Regional/ Divisional/ institutional (Apex, Cluster, MoH) level are supported by HRD Unit.

f. Ensure means of enhancing leadership qualities and capacities in advocacy.

g. Develop HRH research agenda and commission research and studies

Strategic Objective 05

Address health workers to ensure optimal work force retention and participation

Activities

a. Develop and implement a plan to improve working conditions for health Personal.

b. Establish a scheme for health Care access to Health Personal and families.

c. Prepare career plans and career development pathways for each category of health personal.

d. Ensure all support systems are in place such as provision of adequate supplies, equipment and drugs.

e. Prepare a mentoring scheme for young health professionals.

Strategic Objective 06

Establish performance management system for HRH to improve productivity and performance of Health workers.

Activities

a. Update standard job description for each category of health workers.

b. Develop performance management framework.

c. Use and integrate performance management tools for regular performance appraisals, supportive supervision and quality assurance.

d. Prepare guidelines and tools for the development and use of HRH performance indicators to monitor service activities and enhance management performance.

e. Improve the existing performance appraisal system.

Strategic Objective 07

Ensure effective deployment procedures that minimize distribution imbalances.

Activities

a. Reviews revise deployment policies.

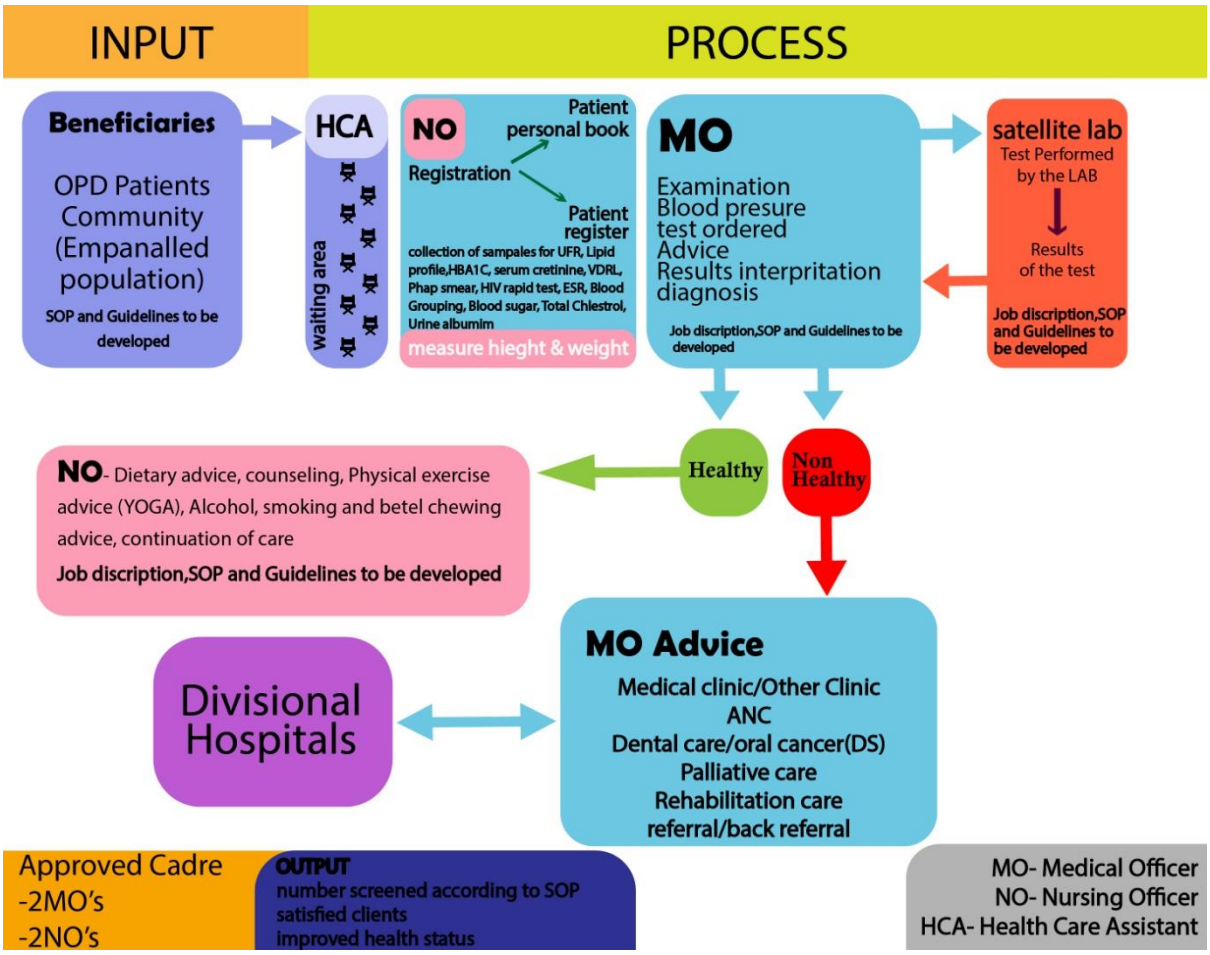
b. Develop a mechanism to ensure optimum balance of distribution of health personal.

c. Develop a mechanism to provide accurate and timely information on staffing to help decision making on deployment.

d. Ensure availability of skilled health professionals to health facilities in remote areas.

e. Improve working conditions and amenities in underserved areas.

System Model - PMCI



SECTION 04

Conclusions/Recommendation

- Medical officers' vacancies in the PMCI's should be filled make use of the difficult station list or make suitable arrangements by the provinces to cater to needs of the respective PMIC's in the project area.

Medical Officers in PMCI's in HSEProject Area

No of PMCUs	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
40	26	23	3	22

Medical Officers in DH's in HSEProject Area

No of DHs	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
65	185	121	66	45

- Appointment of PHNO's to respective Apex Hospitals to cater to the needs of PHCI's of the project area or provinces should make suitable arrangements to get services of the existing nurses in the hospitals by giving the necessary training.

Nursing Officers in PMCI's in HSEProject Area

No of PMCUs	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
40	0	2	-2	19

Moneragala 03
Badulla 04
Polonnaruwa 04
Nuwara Eliya 03
Matale 05

Nursing Officers in DH's in HSEProject Area

No of DHs	Approved Cardre	Current in position	Number Of Vacant	Number additional required (critical)
65	360	263	97	39

- HRH training program could be implemented by developing the capacities of the training Institutes in the provinces.
  Ex. Virtual training sessions were conducted on health care quality and safety in the HSEP project area.
- Existing performance appraisal mechanism could be utilized using the available formats.
- Informed Director General of Health services to update and upload the ministry website to include duty list – job description of the categories of staff in the HSEProject area.
- Existing job description of PHNO could be utilized for cluster nursing officers and nursing officers attached to PMCI/Divisional hospitals/MOH.

- Training need assessment could be utilized for the human resource development of the different categories of staff in the HSEP area.
- HRH data base should be developed in the PDHS offices of respective provinces make use of Information Technology for the updating of personal files, salary payments, increments, training and etc.

Appendix 11

Progress of cluster establishment and management

Introduction

Sri Lanka has a health care delivery system consisting of primary, secondary, and tertiary care institutions which include Primary Medical care units, Divisional Hospitals, Base Hospitals, District General Hospitals, Provincial General Hospitals, Specialized Hospitals, Teaching Hospitals and National Hospitals.

In 2018 the Ministry of Health adopted policy on Healthcare Delivery for Universal Health Coverage for the strengthening of the Primary Healthcare system in the country. As per the policy directions, a new primary health care service model was proposed to establish in Sri Lanka. New primary health care model is set into a network of clusters referred to as “shared care clusters”. “shared care cluster” is defined as “Clustering of a group of primary-level curative institutions around an apex hospital and demarcating a catchment population for the cluster.

The ADB funded Health system enhancement Project (HSEP) launched in 2018 support to establish, implement, monitor and evaluate the pilot shared care cluster system in four provinces (Central, North Central, Sabaragamuwa and Uva) until 2023. In this, four provinces nine clusters are identified in the nine districts:

Process

Consultant was recruited as the National Consultant Cluster Management (Establishment and Implementation) by the HSEP on 1st December 20I9. Firstly, consultant did an in-depth Desk review of background documents (Ex; Project administrating Manual, Cluster guide, Essential health service package). Then consultant visited all clusters, conducted workshops and discussions with all stakeholders. The main purpose of the discussions and workshops were creating same thinking pattern, guiding to look over the establishment of the cluster and reviewing the cluster management plans. Workshops intended to guide the services to be given through the clusters as well as by each institution according to the ESP (Essential Service Package). The workshops elicited the gaps regarding to the HR requirement, resources and training needs by institution to be addressed to deliver the ESP, as well as the Policies and guidelines needed for implementation of the clusters. It further supported to Identify the capability and the integrations needed by service providers by each cluster and to have discussions and plans on the role of the Apex hospital. Establishment of better linkage between Apex hospital and other institutions were discussed in length. In depth discussion were held on Laboratory and Radiology services to be provided via the clusters and using novel thinking of implementation distant laboratory system wherever and whenever needed.

Consultant had workshops at Theldeniya cluster at Theldiniya Apex hospital on 20.01.2020 in Kandy District, Dambulla cluster at RDHS office Matale on 28.02.2020., Rikillagaskada cluster at Nuwara Eliya RDHS office on 24.02.2020, Thambuththegama cluster at RDHS office Anuradhpura on 10.02.2020, Madirigiriya cluster at Polonnaruwa RDHS on 11.02.2020, Kahawaththa Cluster and Karawanalla cluster work shops were held together at Provincial Director Sabaragamuwa on 17.12 2019, Walimada cluster at the Apex hospital Walimada on 10.12.2019 and Bibila cluster at RDHS Monaragala on 02.01.2020. All areas in cluster were discussed in an interactive manner leading to defining the purpose of cluster. Overcoming issues and establishing cluster and identifying the gaps and weaknesses to be addressed.

The workshops showed that there were different levels of understanding of the shared cluster project and their role. Several formats were drafted to guide in establishment in clusters to help the Provincial and District authorities to develop the clusters to be in the same level. Further the workshops gave the consultant understanding of the guidelines, circulars needed to establish and implement the shared cluster project.

DDG planning DDG MS2 DDG Medical Supplies department DDG laboratory were met to find answers to address the constrains of the smooth running of clusters.

Due to Covid 19 consultant invented a modified Delphi technique to develop the needed guidelines with resource panels. To find the readiness of cluster establishment Supervisory check lists were developed according to the type of service and level of service. Continuous online dialogue was kept with the Provincial authorities to help them in identify the areas for PHC fund application etc

1 Tools developed

1. **Formats**

Formats made with the following on view:

Guiding to think of the services to be given through the cluster by each and every institution

Guiding to understand according to the services to be given the need and the gap of human resource, equipment and facility need. The training needs by institution to give the essential service package

Identifying the role of the Apex hospital in successful cluster implementation

Format A): Identify the catchment population by Facility by MOH area and from distant to Apex

Format B): Service plan

Format C): Gap Identification (According to the ESP given at that institution)

2 Supervisory check lists

PCU 8 check lists

Dh 11 check lists

Apex/BH and above 14 check lists

Supervisory check lists were made with following on view

> Formats made for supervision of PMCU based on the Ministry of Health and Nutrition Director General of Health letter dated 2019 April addressed to the Provincial Directors, Regional Directors Heads of Institutes on Sri Lanka Essential Services Package (SLESP) 2019

Features of the supervision check lists are:

1. All aspects of the Sri Lanka Essential Services Package (SLESP) according to the Apex/BH level had been identified
2. Supervision check lists have been designed keeping in mind the supervisory officers at RDHS ex MOMCH, RE, MONCD, MO Mental Health, RDS, Divisional pharmacist etc, Provincial MLT
3. Supervision check lists made with a scoring system to enable monitoring and evaluation possible across clusters.
4. Numbering to the components of the supervision check lists made with a scoring system to help when making the data base

DDG planning instructed these check lists to be used one time only to assess the Cluster readiness

The Supervisory check lists developed by the consultant (9 PMCU and 11 DH +Apex/BH 14) were guided to be used in the 9 piloting districts to assess the progress and the readiness for cluster establishment and implementation. Nine districts were guided to present one area each from the supervisions done so that the Project Management Unit and the provincial health authorities could get a cross sectional view on the progress of the cluster establishment in the project area. On 23rd and 24th of August at the Workshop held in Kandy all the districts led by their district leaders presented their given areas and the other districts joined in the discussion. From the discussions it revealed that the situation in the other clusters did not differ much from the presented facts. Anyhow some cluster presentations were a good inspiration to others as well as it provided excellent opportunity of show casing and sharing good practices.

Table 1 Cluster readiness assessment through Supervisory Check Lists

Province	District	Cluster	Area of Supervision in cluster	Who presented
Central	Kandy	Theldeniya	Laboratory services	RDHS with MO planning
	Mathale	Dambulla	Emergency Services	RDHS with MO planning
	Nuwaraeliya	Rikiligaskada	Maternal Care	RDHS with MO planning
North Central	Anuradhapura	Tambuthegama	Communicable Diseases	Deputy RDHS (Polonnaruwa helping Anuradhapura) RDHS
	Polonnaruwa	Madirigiriya	Non-Communicable Diseases	RDHS,
Sabaragamuwa	Rathnapura	Kahawatha	Mental Health Services	RDHS, MO Mental Health
	Kegalle	Karanawella	Dental Services	Provincial consultant
Uva	Badulla	Welimada	Apex Hospital	RDHS
	Monaragala	Bibila	PMCU	RDHS, Deputy RDHS

11 Cluster leader/manager

Different identification as Cluster leader/manager in the districts

Apex MS

RDHS

Deputy RDHS

Consultant public health

MO Planning

Once the pilot starts need to re investigate who is the identified leader in the cluster as according to many constrains faced by the Provincial and District authorities the cluster head is not static. Difference in cluster governance need to be accommodated.

TOR for the cluster head had been drafted with a resource panel using a modified Delphi technique.

111.Management of the Laboratory services in cluster

Facilitated the cluster teams to define the supplies and reagents management and the Laboratory and Radiology services to be provided via the clusters as per the Guidelines developed by the DDG (LS).

Following are the salient points

Referral system in laboratories had been identified in all clusters.

Clusters have identified according their resource availability the way to transport the samples collected.

Most of the Apex hospitals are providing the referral investigations

Clusters have identified their future improvement needs in the laboratories and mostly the laboratories in the District Hospitals need strengthening. Provincial and district authorities were improving the cluster laboratories utilizing whatever funds available to them. HSEP assistance is needed in this area.

Laboratory services in PMCU need strengthening in all Clusters

Common challenges in the laboratory system in all clusters

Expensive equipment

Recurrent cost of reagents

Lack of human resource on expansion especially the lack of MLT

Two Laboratory guidelines have been drafted through a modified Delphi technique with the participation of a resource panel

1V Equipment need and Training etc

All clusters have identified their equipment need and training need with the help of the formats and the supervision check lists

V Linkages strengthening

All clusters had strengthened the linkages with the preventive health sector as well as liaising with other health care sectors (Aurwedha,Unani). The other government offices as Divisional secretary, Education office, social services, have been linked.

Linkages with the private sector is yet to be established

V Discussions with the MOHNIM

DDG Planning and Directors in planning unit, DDG MS2 and Director Primary care. DDG MSD, Directors in MSD, DDG Laboratory service, DDG public health

Results of the Discussions

DDG Planning Director O and D contributing to the guidelines

Director Information has assured once the computers are in place the Medical information System to be introduced with training to help the population registration

DDG MS2 and Director, Primary Health Care in the Ministry of Health had emphasized the need to address the approved cadre vacancies in the clusters, as getting the support of the 1990 Ambulance service to PMU as they have no way of transferring patients Director Primary Care had conveyed his willingness to address the issues discussed.

DDG MSD and Directors: to address the level of drugs given to PMU (primary medical units) as they will have to manage the referral patients as well PD/RDHS can request from the MSD with evidence from the Therapeutic committee meetings the drugs needed at the PMCUs.

Additional drugs can be made available to satellite clinics or if the consultants visit institutions.

If the Project Director HSEP request officially infrastructure and soft where connectivity can be given to link the cluster DH.

Divisional Pharmacist can help to MSMS in the periphery

DDGs Laboratory Service Contributing to the guidelines

VI Guidelines

A Modified Delphi technique developed by the consultant was used to work with a panel of selected resource person to develop guidelines This has contributed to the resource mobilization guidelines, transfer guidelines, Laboratory specimen transfer, and cluster head TOR. This participatory approach has proved successful in this hour of the Corona epidemic.

The status of the guidelines made by the Modified Delphi technique

TOR on cluster heads had been sent to Dr Sridharan DDG planning for his final contribution, then the document will be perused by Dr S.Samarage.

Two documents drafted as laboratory guidelines in the piloted shared cluster project Laboratory guidelines for Apex guidelines for primary care institutions including DH. Dr Rathnayaka and Dr Benaragama had contributed to the drafts now the new DDG Dr Dharmarathna need to be made aware and his contribution taken.

Finalized cluster transfer/referral form (combined form for referral and back referral as well as for transfers out and in) and the finalized format for transfer register sent for formal approval by Ddg planning.

Transfer/referral guidelines is well developed. Once all the panellist had contributed it will be re sent to Dr Samarage for his expert eyes.

First draft of guidelines on resource mobilization circulated for opinions.

Resource panels in modified Delphi Technique

1. **Resource panel in Cluster Head Term of Reference**

Dr S SriDharan (DDg Planning)

Dr Anil Dissanayake (Project Director HSEP)

Dr Janitha Thennakoon (PDHS Uva)

Dr Thilini Wnigasekara (Director Organization and Development)

Mr.Ajith Udayantha (Health Policy Planning)

Dr Neelamani S.R.Hewageegana (National Consultant HSEP)

(Dr S Samarage will be joined after a document had been further enriched)

2. **Resource panel -Laboratory Specimen Collection and transport guidelines)**

Dr Hemantha Beneragama (Former DDG Laboratory)

Dr Ananda Jayalal (Former acting DDG laboratory)

Dr Saman Rathnayaka (present Acting DDG laboratory)

Dr Manjula Samarakon (MO DDG laboratory)

Dr Neelamani S.R. Hewageegana (National Consultant HSEP)

Dr S Dharmarathna (DDG laboratory) will be invited to join to finalize

3. **Resource panel -Transfer/referral guidelines**

Dr S Samarage (Former DDG Planning)

Dr S SriDharan (DDG Planning)

Dr Aruna Sadanayaka (Registrar Medical Administration)

Dr Chaminda Abeysekara (Deputy Director Hambanthota Hospital)

Dr Neelamani Hewageegana (National Consultant HSEP)

4. **Resource Panel- Resource Sharing in cluster**

Dr S Sridharan (DDg Planning)

Dr Lakmali Jayaweera (Deputy RDHS Polonnaruwa)

Mr. Kithsiri Wanansingha) (Accountant RDHS Polonnaruwa)

Dr T Karthi (Registrar Medical Administration)

Mr.Ajith Udayantha (Health Policy Planning)

Dr Neelamani S.R.Hewageegana (National Consultant HSEP)

(Dr S Samarage will be joined after the document had been further enriched)

VII Communication Strategy

- Discussion with the communication specialist
- Keeping to the theme “Lagama Rohala Hodhama Rohala”
- Need to explain people and staff the new constructions and Why this change may be disturbing the functions people
- Identified Stakeholders
- Hospital Staff/ unions
- Provincial level advocacy Administrator, HSEP, consultancy companies
- Same level D.S., Pradeshiya Sabaha education, agriculture bidirectional
- NGO
- Community mobilize, aware and BCC
- Identify the groups already with the hospital, maranadhra Samithi. Need to give awareness, and mobilize them.
- Cluster concept continuity of care
- Recognition to staff
- Job satisfaction due to continuity of care
- Productivity developed.
- Research and development
- Efficiency and effectiveness
- A Brainstorming session held developing a conceptual framework
- How to give awareness regarding the primary care strengthening discussed.
- Training needs in communication, motivation of clusters for
- Establishment and Implementation of clusters identified. Posters, invitation note to be given for population empanelment discussed.
- Pathway in establishing cluster pilot and the linkages into primary care and the benefits to the population
- Strategy will be participatory communication tools such as traditional folk media, street drama, rabam pada, kawi kola. These tools will be used to mobilize and empower the community
- Online Discussion with the Communication specialist on communication strategy is advancing. Pathways of advocacy and awareness identified with the stakeholders and areas. Working on the concepts and the tangible documents