Parliament Seies No. - **79**

Name of the Institution - **Ministry of Health**

Part One- 67.00

	Shortcomings identified by the Committee in accordance with the Performance Appraisal	**Steps taken to rectify the shortcomings and the Present Situation**
1	The record of losses has not been kept up to date.	Hospitals and institutions coming under Ministry of Health it currently maintains separate and up-to-date records of losses.
2	The risk register has not been kept up to date.	A risk register is not maintained.
3	Answers had not been submitted within a month for every audit query of the Auditor General.	Due to the fact that audit inquiries have to be directed to the Ministry of Health and other relevant hospitals and institutions for clarifications and it cause some delay in receiving answers. However actions are being taken to submit answers within the specific period of time whenever possible.
4	Answers had not been submitted to all the internal audit queries within one month.	All hospitals and institutions under the Ministry of Health have been informed that answers should be submitted for the internal audit reports within one month of receipt, which are submitted to the relevant institution issued after an internal audit query. Accordingly, a significant number of institutions have submitted answers to the audit reports up to now. Furthermore, since arrangements have been made to conduct Audit Management Committee meetings at the provincial level, actions have been taken to notify the Directors of hospital to submit answers to internal audit queries within a month, at the Provincial Audit and Management Committee meetings.

5	During the year under review, the meetings of the Audit and Management Committee had not been held in a proper manner.	Although 04 Audit and Management Committee meetings could not be held as scheduled in the year 2022 due to unavoidable reasons, only 03 meetings have been held. From the year 2023, arrangements have been made to conduct committee meetings once per quarter as per the provisions laid down by circulars. Committee meetings for the year 2024 were already held on 2024.03.21, 2024.07.26, 2024.11.06, 2024.12.09 and the fourth quarter on 2025.01.31. Instructions have been given to the relevant committee chairmen to hold Provincial Audit and Management Committee meetings once per quarter, in accordance with the circulars for the year 2024. All Provincial Audit and Management Committee meetings related to the 03rd quarter have been already held, while Audit and Management Committee meetings related to the 04th quarter have also been held in several provinces. The remaining Provincial Committee Chairmen have also been informed to conduct the Provincial Audit and Management Committee meetings for the 4th quarter in the year 2024.
6	The recommendations regarding surpluses, deficiencies and other recommendations revealed in the annual Board of Survey had not been implemented within the specified period of time.	Instructions have been issued to the Ministry of Health and the hospitals and institutions perform under the Ministry, through the Ministry of Health General Circular No. 01-38/2024 dated 2024.10.22. By this circular, it has been provided instructions regarding the time frame for conducting board of survey, appointing members for the board of survey submission of reports, indicate non-financial assets in the final financial statements in true and fair manner, actions to be taken on the reports of the boards of survey, inventory inspections/inquisitions, action to be taken on unserviceable articles, appointment of disposal boards and write off of disposed articles from the books.

7	Documents confirming the ownership of all the vehicles are not in the possession.	Steps have been taken to obtain extracts of the registration certificates of vehicles registered under the designations of the Health Secretary/Director General of Health Services, which do not currently have registration certificates, and actions are being taken to obtain originals of the registration certificates.
8	The emblem of Sri Lanka was not painted on all vehicles.	The emblem of Sri Lanka has been affixed to all vehicles in the pool and actions are being taken to affix the emblems of Sri Lanka for the vehicles attached to officers.
9	A vehicle has not been disposed after 08 months of condemning	The vehicles brought forward for the Valuation Committee, which have been presented to the Disposal Committee after following the auction held in January 2024. The auction will be carried out after receiving the report of the committee. As a certain number of vehicles have to be collected when conducting an auction and it will take some time, however auctions will be conducted at the provincial level and the process will be completed at the earliest convenience in the future.
10	Actions had not been taken on accidents occurred to motor vehicles owned by the government as per the Financial Regulations.	Currently, a register is being maintained up to date basis regarding accidents occurred to vehicles, in terms of the Financial Regulations.
11	Consequent to the utilization of provisions allocated for a vote as per 94(1) liabilities were exceeding the provisions that remained at the end of the year.	In order to provide health services continuously, many hospitals have incurred commitments exceeding the allocation limit. This situation has arisen for not approving of adequate allocations by the General Treasury. However, instructions have

		been given to the relevant officials not to incur commitments exceeding the provision.
12	The balances in arrears exceeding one year had not been settled.	As of 31.12.2024, the loan balance outstanding for more than a year is Rs. 90.928 million. However, necessary instructions have been given to hospitals and institutions to recover loan balances outstanding for more than a year, and necessary instructions and follow-up will be made to recover the loan balances as much as possible, during this year.
13	Action had not been taken in terms of F.R. 571 regarding the lapsed deposits in the General Deposits Account.	The reasons for non-settlement of general deposit balances exceeding 02 years, in terms of F.R.571 were depositors making no claim up to then, legal proceedings being pending and having it required to retain further the relevant deposits in the General Deposits Account. Many of the deposits have been made as relevant to the building division and those retentions were the deposits made in respect of constructions of buildings and regarding most of them no claim has been made by the contracting institutions so far. However, after it was informed to settle the general deposit balances exceeding 02 years in terms of F.R. 571, steps have been taken to credit the unclaimed amount existed for the year 2015which is Rs. 7,326,873 to the government revenue in January 2025 from the retention money in the General Deposits Account relevant to the Division of Buildings of the headquarters of the Ministry of Health. Similarly, the remaining deposits exceeding 02 years will also be credited to the government revenue in the year 2025. And, several hospitals have already taken steps to settle their general deposit balances.

14	The ad hoc sub imprests issued as per F.R. 371 had not been settled within one month from the completion of the task.	As per the provisions of the F.R. 371(5) and the Public Finance Circular 01/2020, each Division has been informed to settle the advance within 10 days after completion of the relevant work for which the advance was received and in case the work for which the advance was received is cancelled, to settle the advance received and to complete the relevant work by applying for the advance again. It has also been informed in the delegation of powers on financial control that no further imprests should be issued to officers who have received ad hoc sub imprests and have failed to settle two such imprests.
15	The revenue that was collected had not been refunded in terms of respective provisions.	All institutions have been informed to refund from revenue in accordance with the Financial Regulations and circulars. Accordingly, all institutions are currently reimbursing revenue upon obtaining formal approval.
16	The revenue collected had not been directly credited to the revenue or not been remitted to the Revenue account within a period less than one month having maintained them in the deposit account.	All hospitals and institutions have been instructed to directly credit the revenue collected by each hospital and institution to the revenue, and in cases where this is not possible, to hold them in the general deposit account and credit to the revenue account within a period less than a month.
17	The staff had been recruited exceeding the approved limits	Action will be taken to refer the matter of creating and revising the cadre required for the Ministry of Health and the institutions under to the Department of Management Services and obtain its approval for the same.
18	The staff details of the institution had not been sent to the Department of Management Services in line with the	Updating the cadre information of the Ministry of Health is carried out on 30 June and 31 December of each year. In order to update this information more

	Management Services Circular No.04/2017 dated 20.09.2017	efficiently and promptly, a procedure has been introduced to obtain information online. Accordingly, information regarding the approved cadre as at 30 June 2024 has been obtained online and that information has been published on the website of the Ministry of Health. Further you are kindly notified that steps are being taken to obtain the relevant information as at 31 December 2024 online.

Part Two-39.00

	Shortcomings identified by the Committee in accordance with the Performance Appraisal	**Steps taken to rectify the shortcomings and the Present Situation**
01	The Citizens'/Clients' Charter had not been properly prepared and implemented in accordance with the Circular No. 05/2008 dated 06.02.2008 of the Ministry of Public Administration and Management as amended by Circular No. 05/2018(1) dated 24.01.2018.	The Citizens'/Clients' Charter has been prepared and Sinhala version of it has been published on the official website of the Ministry.
02	A methodology had not been formulated to monitor and evaluate the application of citizen/ client charter by the institution.	Any issues regarding the implementation of the citizen/client charter related to the Ministry can be informed through the hotline at 1907, the WhatsApp number 0707907907, the email address suwasawana@health.gov.lk or the Grievance Coordinating Unit of the Ministry, and suggestions/complaints regarding the charter can be informed to the Senior Assistant Secretary (Information and Promotion) through the telephone number 0112670182, fax number 0112693866, or email address sasinformation@health.gov.lk.

03	A human resource plan drafted in keeping with the provisions of public administration Circular No 02/2018 dated 24th January 2018 was not available.	The Human Resources for Health (HRH) Strategic Plan 2020–2030 is at the final drafting stage, developed by the Sri Lanka Representative Office of the World Health Organization (WHO Sri Lanka) in collaboration with an expert committee affiliated with the Faculty of Medicine at the University of Colombo. Updating the draft Human Resource Plan, which was developed considering the new trends, including human resource management, caused by the socio-economic challenges faced by Sri Lanka, and formulating a new human resource action plan based on that for the period 2025–2035 are currently underway as preliminary work. Since the necessary financial provisions have already been secured, the relevant plans are expected to be finalized shortly.
04	The human resource development plan that had been prepared, did not ensure at least a minimum training opportunity of not less than 12 hours per year for more than 50% of the member of the staff.	There are more than 150,000 healthcare workers serving in health institutions and hospitals across the island. However, the 50 million rupees allocated for training programs must cover not only in-service training courses but also the costs of 15 basic training courses and other related activities. As a result, it is challenging to meet the training demands of health institutions. However, training opportunities were provided to 6,175 individuals in 2022, and in 2023, arrangements were made to offer training to 10,147 individuals by securing provisions from other votes. According to the annual sectoral plan, an allocation of approximately 300 million rupees is required to achieve the targeted objectives. This proposal will be incorporated into the new human resource action plan for 2025-2035.
05	Performance agreements covering the entire staff had not been drafted or entered.	All heads of divisions have been informed through No. CA/GCE/Miscellaneous Orders/01/2022 dated 23.03.2022 regarding the signing of annual performance agreements for all staff employed in the institution, as per PA Circular No. 02/2018 dated24.01.2018. Accordingly, action was taken to obtain the annual performance agreements when the annual salary increments were submitted for approval from 2022.

		Subsequently, Circular No. 02/2018 (1) dated 30.11.2023, issued by the Ministry of Public Administration, Home Affairs, Provincial Councils, and Local Government as an amendment to PA Circular No. 02/2018, states in paragraph 03 that the signing of annual performance agreements is no longer required, and therefore, the practice has been discontinued with effect from that date.
06	A senior officer of the institution had not been named for the preparation of human resource development plans and to implement capacity and skill development programmes.	Dr. Samantha Ranasinghe, Director of the Education, Training, and Research Unit, has been assigned to prepare human resource development plans and oversee the implementation of capacity and skills development programmes
07	The audit opinion about the accounts of the institution had been a qualified opinion/disclaimed opinion/ an unfavorable opinion.	Steps have been taken to address the weaknesses underlying the audit opinion.
08	Recommendations indicated in the Auditor General's Report had not been implemented.	Each division and officer has been informed about the implementation of the Auditor General's recommendations outlined in the report, and follow-up actions are being carried out to ensure the recommendations are implemented
09	The directives/ recommendations issued by the Committee on Public Accounts had not been implemented.	The relevant divisions and officers have been informed about the implementation of recommendations/orders received from the Committees on Public Accounts concerning the Ministry of Health, and follow-up actions are being conducted to ensure their implementation.
10	The necessary action had not been taken to recover the loss caused to the Government by the officers as per Financial Regulation 156 (1).	Necessary instructions have been issued through General Circular No. 01-38/2024 dated 22.10.2024. Furthermore, while taking necessary actions to obtain approval for preliminary inquiry boards and providing support for preliminary matters, follow-up actions are being carried regarding recoveries based on the recommendations received from the inquiry boards.

11	Surcharges ordered to pay as per FR 119 had not been recovered.	Necessary instructions have been issued through General Circular No. 01-38/2024 dated 22.10.2024. Furthermore, while taking necessary actions to obtain approval for preliminary inquiry boards and providing support for preliminary matters, follow-up actions are being carried regarding recoveries based on the recommendations received from the inquiry boards.
12	Actions had not been taken to properly transfer the officers who had completed the maximum service period.	An internal memo was issued on 04.12.2023, to obtain service information of all Public Management Assistant Officers, Development Officers, Office Assistants, and Health Service Assistants, and based on the decisions of the Internal Transfer Committee, internal transfer orders were issued on 23.04.2024; however, due to issues arising from the transfer process, these orders were canceled on 23.07.2024. Approval has been received from the present Health Secretary for the internal transfer of officers who have been serving in the same division for more than five years, and to implement these transfers in accordance with the given instructions, a Transfer Committee must first be appointed, after which internal transfers will be carried out based on the committee's recommendations.

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