



Ministry of Indigenous
Medicine Sri Lanka



කාර්ය කාඩ්ක වාර්තාව செயலாற்றுகை அறிக்கை PERFORMANCE REPORT 2012



Web : www.indigenousmedimini.gov.lk



<https://www.facebook.com/pages/Ministry-of-Indigenous-Medicine/130748173783098>



Ministry of Indigenous Medicine Performance Report - 2012



Message of the Hon. Minister of Indigenous Medicine



Beginning of Man is the beginning of the knowledge of medicine. Evidence could be found in every ancient civilization of the existence of knowledge of medicine and a medical practice based on the environment. Among these ancient medical practices, the Ayurveda medical practice based on '*thri-doshas*' is the most ancient and most supreme. This medical practice which nurtured in the valley of the '*Indu*' river over a history of five thousand years has been preserved as a health protecting system over the South Asian region.

It was the recognized expert view that this country gained the system of Ayurveda with Buddhism. However, the folks and legends witness the existence of a developed medical practice among the indigenous people of this country far beyond. It is evident in the history that the knowledge of medicine has expanded and developed with Buddhism and the community *Bhikkus*. The reports of Robert Knox supports the view that the knowledge of medicine and medical practice existed even within the ordinary villagers in the Mahanuwara era with a subjective understanding nurtured by generations of '*Gurukula*'. This medical practice was based upon medical practices, astrology, rituals as well as a huge lexicon of medicines and a greater belief in the environment.

Our traditional system of medicine has been neglected with the imperialism and colonization. Medical practice and the medical practitioner were sarcastically referred as '*Gode Vedakama*' and '*Gode Veda*'. Nationality and the local identity were considered as invaluable.

Even though we gained independence in 1948, we were able to stand with a national spirit only with the victory of 1956. The improvement by now has been immense. Knowledge of medicine has been developed in to University education. Indigenous medicine, which consists of expert professionals, professional organizations and factories of medicine, has been recognized as a Cabinet Portfolio. Ayurveda system; Lankayurveda alias indigenous medicine comprised of *Siddha*, *Unani* and Homeopathy contributes to the health protection of the nation.

Ayurveda is the knowledge of age. Ayurveda consists of the secret of a long secured life. This medical practice is essential for the world which suffers from the global economy as well as the global style of food consumption. The production processes based on super profits as well as the style of food consumption created by electronic media have become a disaster to the present world. This style of food consumption has caused for a number of non-communicable but fast spreading diseases. Diabetes, heart problems, cancers, high blood pressure, kidney infection and obesity have been rapidly spread among every age categories. Huge expenditure should be incurred for the treatments of these diseases. Therefore, the attention of the world has been drawn towards the indigenous medical practices nurtured with rich civilizations and including natural treatments, where our indigenous medical practice has become one of them. We possess the challenge of developing our medical practice to supersede the global capitalism and its style of consumption.

H. E. the President Mahind Rakjapaksa is directing this country towards a miraculous land in Asia. We are in an era of discarding reliance and dependent thinking and generating originality and nationalism under the Mahinda Chinthana Programme.

As the pioneer in health conservation of the nation, through creating a healthy public and a healthy work force, the sole objective of the Ministry of Indigenous Medicine is to build up the indigenous medical practice equipped with modern scientific technology.

Salinda Dissanayake
Minister of Indigenous Medicine

Message of the Hon. Deputy Minister of Indigenous Medicine



Ayurveda – the science of life, with this definition, any person can identify the importance of indigenous medicine. It is needless to say that man at present is more eager about his healthy life style.

The era of *King Dutugemunu* provides evidence that strong healthy men have been created with the life style followed by the people in the past. Mothers and fathers who have given birth to the ten giants resemble the then accurate life style in the country.

Each and every crop has been cultivated with the use of unique methods of cultivation, and the people who have consumed them have become a healthy generation. Nevertheless, even though we have inherited the system of Ayurveda from India, it was evident in the era of *Ravana* that we possessed a unique traditional medical practice, which is the system of indigenous medicine.

We have to face calamities at present by shedding all our values and embracing an alien mentality with the colonization. With the transformation of the mentality that everything should be done instantly, the people who have worked hard have become a group of invalids and thereby paved their way for a variety of diseases.

The future of the country has been stepping in to darkness with the inheritance of an unhealthy generation which has declined in every aspect as a result of consuming poisonous food imported from foreign countries. However, a new era, which sharpens the nation pride, has dawned under the leadership of H.E. the President Mahinda Rajapaksa, who put an end to the brutal separatist terrorism prevailed in the country for three decades. As a result the people have gained new enthusiasm and transforming in to our unique values. This current tendency has astonished not only our people but also the foreigners. Therefore, the '*panchakarma*' treatment of our indigenous medical practice has attracted many tourists to this country. My experiences in foreign visits indicate that a huge demand exists for our indigenous medical practice. In the near future employment opportunities will arise for the local medical practitioners even in countries such as Japan.

This Ayurveda system is the best way to continue with our traditional values. It has been easy to carve this in to the minds of people as it has survived from modernization from generation to generation. The most practical means of socializing this medical practice is to adapt it in to the system of school education. This message of healthy lifestyle would be socialized easily by enlightening the students as well as parents.

Man will become healthy due to the new life gained by planting medicinal plants while the medicinal gardens beautify the home environment. Even in paddy cultivation, adapting the ancient cultivating methods used by the people in the past in place of agro-chemicals will contribute to poison-free food production in the country as well as will create a healthy nation with long life.

In an era when the whole world has become a global village, if all human beings understand that regaining the virtues of man is not a miracle, it is positive that this world would become humanistic with the teachings of religious leaders and the healthy life style of man. My noble wish is that this new world would soon become a reality through Ayurveda medical practice.

Pandu Bandaranayake
Deputy Minister of Indigenous Medicine



Message of the Secretary

‘Ayurveda’ which is known as the science of life, has been a system of providing good health to all living beings on earth from ancient civilizations up to the present. When and wherever the man was born, he maintained his livelihood with the assistance of the nature. We Sri Lankans, who lived with nature, have been used not only to obtain healthy food but also cure for diseases with its assistance. Even Lord Buddha was cured by a medicine of the medical practitioner ‘*Jeewaka*’ which had been blended with the fragrance of a blue lily. The warriors of the ancient Sri Lanka, who have fought fiercely with armies of elephants, horses, armed vehicles, infantries and also with bows and arrows as well as fire arms, have cured their wounds with Sri Lankan medicines endowed by nature. *King Buddhadasa*, who was an expert in veterinary, has even cured a snake.

With the interrelationships among various geological areas, this indigenous Sri Lankan medical system has been nurtured by the natural health studies of each region. The indigenous medical practice in Sri Lanka at present has been nurtured with the *Siddhayurveda* in India, *Unani* system of the Arabic region as well as the Western Homeopathy.

The colonial economy and the complex life style resulted from the industrial revolution, has caused the suppression of indigenous medical practice. With the dangerous repercussions of the global industrialization, the human community has diverted again towards the indigenous medical practice.

The Ministry of Indigenous Medicine has launched a variety of programmes such as awareness programmes on indigenous medicine and their qualities, projects to promote cultivation of medicinal herbs, Korean Acupuncture methods and yogas aimed at the development of indigenous medical practices.

The prime objective of this Ministry is to endow this indigenous medical practice from generation to generation with its distinctive qualities. It will not only be an economic benefit but also an effort for the development of the socio-culture.

Therefore the Department of Ayurveda in collaboration with its affiliated institutions strive to protect the traditional medical practices and the knowledge of medicinal herbs for the benefit of the future generation, to encourage researches and surveys on the use of medicinal herbs for a better health service and their results and to introduce Sri Lankan medicine to the international community in accordance with the international standards.

This Performance Report influenced by the Mahinda Chinthana and the Mahinda Chinthana Vision for Future of H.E. the President of Sri Lanka and prepared for the betterment of the indigenous medicine is presented herewith with the intention of popularizing Sri Lankan medicine, which has been revived from time to time, not only within this island but in the world as well.

Lalith Kannangara
Secretary
Ministry of Indigenous Medicine

VISION

**HEALTH AND WFLBEING FOR ALL THROUGH INDIGENOUS
MEDICINE**

MISSION

**TO MAKE THE ENTIRE POPULATION CONTRIBUTE VIGOROUSLY
TOWARDS THE ACCOMPLISHMENT OF THE MILLENIUM
DEVELOPMENT GOALS THROUGH THE DEVELOPMENT OF
HUMAN SKILLS BY BESTOWING ON THEM HEALTH AND
WELLBEING UTILISING RESEARCH AND MODERN IDENTITY
TECHNOLOGY IN A MANNER THAT ENSURES THE SRI LANKAN**



Content



Introduction	8
Ministry Priorities	10
Specific Objectives	12
Staff of the Ministry of Indigenous Medicine	24
Organizational Structure	25
Institutions Affiliated to the Ministry of Indigenous Medicine	26
Development Projects implemented under the Ministry of Indigenous Medicine	27
Statistics of Ayurvedic Patients	46
Expenditure Report of the Ministry of Indigenous Medicine and the Department of Ayurveda	51



01. Introduction

History of indigenous medicine runs as far as the origin of the nation of Sinhalese. This medical practice unique to Sri Lanka is based on traditional knowledge. It has been nurtured by the ‘Ayurveda’ of the Northern India, ‘*Siddha*’ medical practice of South India, ‘*Unani*’ of the Arabic region.

Indigenous medical practice had been suppressed in the Colonial era and the Western medical practice had been popular island wide as a national health system.

However, the Governments, which have identified the quality of indigenous medicine, have acted for its development by establishing a separate Department under the Ministry of Health. Ministry of Health has been renamed as the Ministry of Health and Indigenous Medicine and the Ministry of Indigenous Medicine has been established as a separate Ministry in 1980. At present, this Ministry is under the supervision of the Cabinet Minister as well as a Deputy Minister. The Ministry of Indigenous Medicine plays a unique role in creating a healthy and prosperous nation for the development of the country through indigenous medical practice.

By now the indigenous medical practice has been popularize island wide and many have tend towards this treatment. It has been a victory for us being able to popularize this medical practice in other countries through the production of quality medicines. Prime objective of this Ministry is to secure and develop the indigenous medical practice for the wellbeing of the public.

Following steps have been taken to realize the goal of ‘Mahinda Chinthana’, that

“We possess a system of indigenous medicine which we can be proud of and which we can offer to the world at large. I consider it my responsibility to preserve this knowledge base and offer it to the world”

01. Use of indigenous medical practice and Homeopathy medical practice to build a healthy nation
02. Preservation and development of indigenous medical practices
03. Upgrade of the production of medicines by expanding the cultivation of indigenous medicinal herbs.
04. Development of the Homeopathy medical practice
05. Promotion of Homeopathy medical practice

By now, 62 Ayurveda hospitals and 208 dispensaries have been established island wide and nearly 3 million out patients and 25000 resident patients get treatments per year. 1424 Ayurveda doctors have been deployed in Government service. 250 provincial Ayurveda dispensaries give treatments for patients. Even though they are governed by Local Government Institutions the responsibility in providing medicines devolves on the Ministry of Indigenous Medicine and the Department of Ayurveda. As a whole, 11% of the total population of 20.87Mn obtained free government Ayurveda services, and a number of patients obtained medicines from private Ayurveda hospitals, dispensaries and traditional doctors. The total number of patients who have come to the Government Homeopathy Hospital in year 2011 with belief in Homeopathy medical practice are 24,011.

On the other hand, 20,353 Ayurveda doctors have been registered in the Ayurveda Medical Council as at 31.12.2011, including graduates, diploma holders, traditional ‘whole body’ and traditional- ‘specific’ doctors.

The following institutions are functioning to provide qualitative service for our clients.

1. Department of Ayurveda
2. Ayurveda Medical Council
3. Bandaranaike Memorial Ayurveda Research Institute
4. National Institute on Indigenous Medical Practices
5. Ayurveda Hospitals and Central Dispensaries
6. Herbal Gardens
7. Sri Lanka Ayurveda Pharmaceutical Corporation
8. Homeopathy Medical Council
9. Welisara Homeopathy Hospital and Clinics
10. Ayurveda Community Health Promotion Office - Anuradhapura

02. Ministry Priorities

Specified Priority Areas	Result Output Index
1. Strengthening the legal framework on indigenous medical practice	Minimization of irregularities in the use of Ayurveda medical practice Generation of professionally satisfied Ayurveda doctors Strengthening of Ayurveda treatment institutions on a legal base
2. Strengthening and upgrading of Ayurveda researches	Quantitative development of quality Ayurveda productions Ensuring the rights of Ayurveda researches Expansion of the recognition in Ayurveda medical practice. Provision of more opportunities for Ayurveda researches and researchers Upgrading of the number of archived Ayurveda documents Securing and systemizing of the intellectual property rights in relation to Ayurveda
3. Use of Information technology for Ayurveda	Creation of an updated database Creation of a systematic network operating system Creation of an e-Ayurveda medical practice. Expansion of the boundaries of indigenous medicine
4. Development of human resources for upgrading and improvement of Ayurveda medical conservation	Quantitative development of quality human resources Upgrading of professionally satisfied human resources Fulfillment of the global demand of indigenous medical practices Updating knowledge and skills of traditional doctors to suit the modern social requirements Quantitative development of skilled local doctors

	Development of knowledge, attitudes and skills of Ayurveda medical practitioners in state and private sectors
5.Development of the production of Ayurveda medicine and the cultivation of medicinal herbs	Quantitative development of high standard quality medicine Upgrading of the generation of income through Ayurveda. Upgrade of international market opportunities for Ayurveda medicine Upgrade the production of medicines easy to use
6.Maintenance of Ayurveda according to commercialization	Popularizing internationally the traditional medical practice, Ayurveda, Siddha and Unani medical practices Establishment of Ayurveda hospital equipped with modern facilities to provide specific Ayurveda treatments Upgrade of existing herbal gardens and new herbal gardens
7.Upgrade the use of Homeopathy medical practice	Establishment of related institutions for Homeopathy medical practice Generation of professionally satisfied Homeopathy human resource

Specific Objective 1

1.Reforming the laws and regulations related to indigenous medicine

Objectives, Strategies and activities			Time Schedule										Responsibility	Performance
Objectives	Strategies	Activities	Base Year	2013				2014	2015	2016	2017	Continued		
				Q1	Q2	Q3	Q4							
Removal of malpractices committed using the term Aurveda	Amend the Act	Enforce the Act	2011	x	x	x	x	x					Addl. Sec Development Commissioner of Ayurveda Director Planning Provincial Commissioner of Ayurveda	Draft Stage
Creation of satisfied Ayurveda Medical Officers	Amend the Service Minute	Implementation of the Service Minute	2011	x	x	x	x						Addl. Sec Admin S.A.S. Commissioner of Ayurveda Provincial Commissioner	Submitted for approval

													of Ayurveda	
Establishment of legal private Ayurveda Medical Institutions	Formulation and	Implementation of Regulations	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Development Commissioner of Ayurveda Director Planning Provincial Commissioner of Ayurveda	Draft Stage

Specific Objective 02

2. Promotion of Ayurveda, Siddha, Unani medical practices

Objectives, Strategies and Activities			Time Schedule										Responsibility	Performance
Objectives	Strategies	Activities	Base Year	2013				2014	2015	2016	2017	Continued		
				Q1	Q2	Q3	Q4							
Upgrade treatments for chronic diseases	Upgrade physical resources, development of skills of the Medical Officers, upgrade researches and introduction of modern technology	Construction of Teaching Hospitals and new buildings, provision of modern machinery and equipment and providing opportunities to enhance professional qualifications	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Development Commissioner of Ayurveda Director Planning Director Hospitals Provincial Commissioner of Ayurveda	Continuous evaluation and follow up
Control of communi	Expansion of communit	Programmes on nutrition,	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Development	Continuous evaluation

cable and non-communicable diseases	y health services	Awareness Programmes, Clinics												Commissioner of Ayurveda Director Planning Director Community Health Provincial Commissioner of Health	and follow up
Generate users of archived traditional Ayurveda practices	Upgrade of facilities for traditional doctors, development of skills, archiving and promotion	'Hela Weda Ruvanara' pension scheme, archiving and ancient prescriptions	2011	x	x	x	x	x	x	x	x	x	x	Addl. Sec Development Commissioner of Ayurveda Director Planning Registrar Medical Council Provincial Commissioner of Ayurveda	Continuous evaluation and follow up

Specific Objective 03

3 Development of Ayurveda Research

Objectives, Strategies and Activities			Time Schedule										Responsibility	Performance
Objectives	Strategies	Activities	Base Year	2013				2014	2015	2016	2017	Continued		
				Q1	Q2	Q3	Q4							
Production of new Ayurveda medicine for chronic and communicable diseases	Restructuring the Research Institute providing facilities for the development of knowledge and skills of researchers	Make the Research Institute an independent body, upgrade facilities for post graduate studies and training, providing facilities for researchers	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Development Commissioner of Ayurveda Director Planning Director Research Institute	Continuous evaluation and follow up
Protection of intellectual rights of	Amendment of legal requirements	Awarding of intellectual property	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Development Commission	Continuous evaluation and follow up

researches		rights, introduction of digital library system to protect traditional knowledge											er of Ayurveda	
													Director Planning	
													Director Research Institute	

Specific Objective 04

4.Upgrade of Ayurveda medicine production and the cultivation of medicinal herbs

Objectives, Strategies and Activities			Time Schedule										Responsibility	Performance
Objectives	Strategies	Activities	Base Year	2013				2014	2015	2016	2017	Continued		
				Q1	Q2	Q3	Q4							
Creation of a generation which is knowledgeable in medicinal	Make aware the concerned parties and engage them in activities	Contribute to the Programmes on School Herbal Gardens, 'Pansalen Gamata,	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Development Commissioner of Ayurveda	Continuous evaluation and follow up

herb		Programme , programmes in army camps, Divi Neguma programme												Director Planning Director Research Institute	
Make available qualitative medicinal herbs for the production of qualitative and strong Ayurveda medicines through researches	Implementation of public private joint programmes. Upgrade the standard of the pilot project for cultivation of herbs	Upgrade of herb farming companies, youth medicinal herb programmes, upgrade of storage of production facilities. Development of state-owned medicinal herb gardens and the development of productions of Ayurveda hospitals	2011	x	x	x	x	x	x	x	x	x	x	Addl. Sec Development Commissioner of Ayurveda Director Planning Director Research Institute Chairman Ayurveda Corporation	Continuous evaluation and follow up

Increase the income of cultivators	Introduction of an organized market system	Co-ordination of purchasing of the Corporation and the hospitals, establishment of regional purchasing centres, co-ordination of the private sectors	2011	x	x	x	x	x	x	x	x	x	x	Addl. Sec Developmen t Commission er of Ayurveda Director Planning Director Research Institute	Continuou s evaluation and follow up
------------------------------------	--	--	------	---	---	---	---	---	---	---	---	---	---	--	--

Specific Objective 05

Development of human resources for the improvement of Aurveda medical practice

Objectives, Strategies and Activities			Time Schedule										Responsibility	Performance
Objectives	Strategies	Activities	Base Year	2013				2014	2015	2016	2017	Continued		
				Q1	Q2	Q3	Q4							
Creation of a satisfied staff	Provision of a pleasant working environment. Employee motivation	Provision of infrastructure facilities and new technological equipment, implementation of productivity programmes, assessment of skills, introduction of a systematic promotion and transfer scheme	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Admin S.A.S Commissioner of Ayurveda Provincial Commissioner of Ayurveda	Continuous evaluation and follow up
Sustainable	Upgrade of training	Directing towards	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Admin	Continuous

develop ment of skills and knowled ge of tradition al doctors	facilities of traditional doctors, Managem ent Communit y Health Officers and officers related to plant and productio n	training, providing facilities for higher education, awarding certificates according to the knowledge												S.A.S Commission er of Ayurveda Provincial Commission er of Ayurveda	evaluation and follow up
Generati on of professio nals who could serve the public better	Recruitme nt of competent profession als, training and developme nt, changing attitudes	Directing towards training, providing facilities for higher education, awarding certificates according to the knowledge	201 1	x	x	x	x	x	x	x	x	x	x	Addl. Sec Admin S.A.S. Commission er of Ayurveda Provincial Commission er of Ayurveda	Continuou s evaluation and follow up

Specific Objective 06

6.Introduction of Information Technology for Ayurveda

Objectives, Strategies and Activities			Time Schedule										Responsibility	Performance
Objectives	Strategies	Activities	Base Year	2013				2014	2015	2016	2017	Continued		
				Q1	Q2	Q3	Q4							
Dissemination of information through the use of information technology	Use of websites, e-mail, facebook	Update the website, dissemination of information through e-mail messages, upload details of the doctors to the internet	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Development IT Officer	Continuous evaluation and follow up
E-health facility	E-channel service	Coordination	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Development IT Officer	Continuous evaluation and follow up

Specific Objective 7

7.Commercialization of Ayurveda

Objectives, Strategies and Activities			Time Schedule										Responsibility	Performance
Objective	Strategies	Activities	Base Year	2013				2014	2015	2016	2017	Continued		
				Q1	Q2	Q3	Q4							
Strengthening the national economy	Acting for tourist attraction. Implementation of state-private joint commercial programmes. Improvement of Ayurveda productions and raw materials	Establishment of Ayurveda tourist resorts. Development of Ayurveda centres in close proximity of tourist hotels Development of paying wards in Ayurveda hospitals	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Development Commissioner of Ayurveda Director Planning Provincial Commissioner of Ayurveda Director Research Institute	Continuous evaluation and follow up

	at commercial level. Provision of quality Ayurveda services.	Establishment of attractive herb gardens. Providing facilities for education and researches on Ayurveda.													
--	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Specific Objective 08

8.Homeopathy Medical Practice

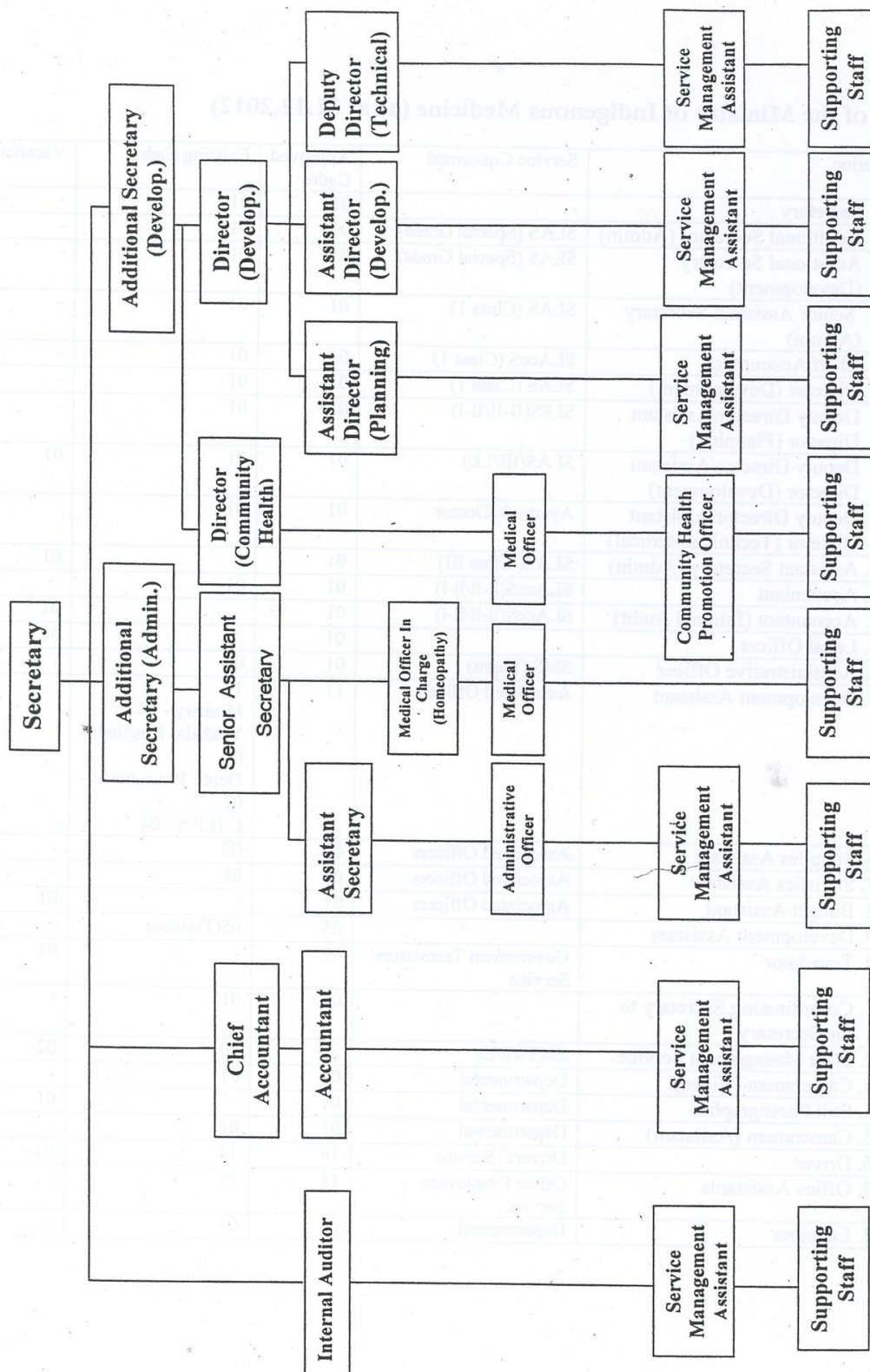
Objectives, Strategies and Activities			Time Schedule										Responsibility	Performance
Objectives	Strategies	Activities	Base Year	2013				2014	2015	2016	2017	Continued		
				Q1	Q2	Q3	Q4							
Expansion of Homeopathy medical practice	Creation of qualified doctors. Upgrade of institutional facilities	Providing scholarships to obtain Homeopathy medical degree Increase the number of clinics	2011	x	x	x	x	x	x	x	x	x	Addl. Sec Development S.A.S. Medical Council Medical Officer-in Charge	Continuous evaluation and follow up
Establishment of Homeopathy institute	Empowerment of	Restructuring	2011	x	x	x	x	x	-	-	-	-	Addl. Sec Development Addl. Sec Admin	Continuous evaluation and follow up

													Medica l Council	
													Medica l Officer- in Charge	
Generation of satisfied Homeopat hy human resource	Training for doctors and the staff	Organizatio n of training programmes . Providing facilities for higher education	2011	x	x	x	x	x	x	x	x	x	Addl. Sec. Develo pment Addl. Sec Admin Medica l Council Medica l Officer- in Charge	Continuou s evaluation and follow up

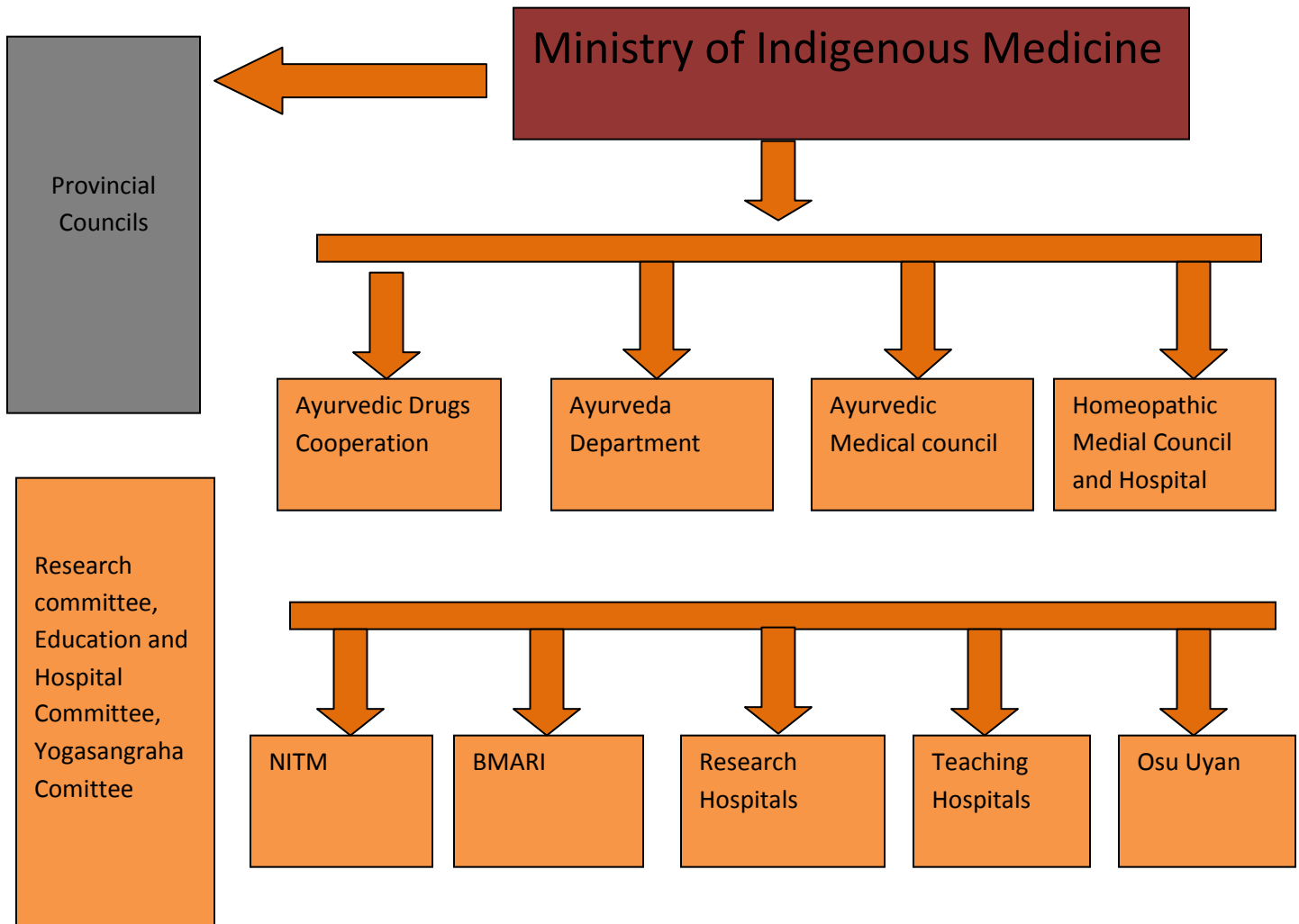
Staff of the Ministry of Indigenous Medicine (as at 31.12.2012)

Designation	Service Concerned	Approved Cadre	Existing Cadre	Vacancies
1. Secretary	-	01	01	-
2. Additional Secretary (Admin)	SLAS (Special Grade)	01	01	-
3. Additional Secretary (Development)	SLAS (Special Grade)	01	01	-
4. Senior Assistant Secretary (Admin)	SLAS (Class 1)	01	01	-
5. Chief Accountant	SLAccS (Class 1)	01	01	-
6. Director (Development)	SLAS (Class 1)	01	01	-
7. Deputy Director/Assistant Director (Planning)	SLPS(II-II/II-I)	01	01	-
8. Deputy Director/Assistant Director (Development)	SLAS(III/LL)	01	01	01
9. Deputy Director/Assistant Director (TechnicalMedical)	Ayurveda Doctor	01	01	-
10. Assistant Secretary (Admin)	SLAS(Class III)	01	-	01
11. Accountant	SLAccS(II-II/II-I)	01	01	-
12. Accountant (Internal Audit)	SLAccS(II-II/II-I)	01		01
13. Legal Officer		01		01
14. Administrative Officer	SMS (Supra)	01	01	-
15. Development Assistant	Associated Officers	11	11 Ministry - 04 Yakkala Hospital - 01 Dept. Pinnaduwa - 02 C.H.P.S - 04	
16. Supplies Assistant	Associated Officers	02	02	-
17. Statistics Assistant	Associated Officers	01	01	-
18. Budget Assistant	Associated Officers	01	-	01
19. Development Assistant		05	05(Trainee)	-
20. Translator	Government Translators' Service	01	-	01
21. Co-ordinating Secretary to the Secretary	-	01	01	-
22. State Management Service	SMS I/II/III	22	20	02
23. Cameraman (Video)	Departmental	01	01	-
24. Still Photographer	Departmental	01	-	01
25. Cameraman (Assistant)	Departmental	01	01	-
26. Driver	Drivers' Service	16	14	02
27. Office Assistants	Office Employees Service	18	18	-
28. Labourer	Departmental	01	01	-

Organizational Structure



Institutions coming under the Purview of the Ministry of Indigenous Medicine



04.Developmet Projects Implemented under the Ministry of Indigenous Medicine

4.1 Community Health Promotion Programme Anuradhapura

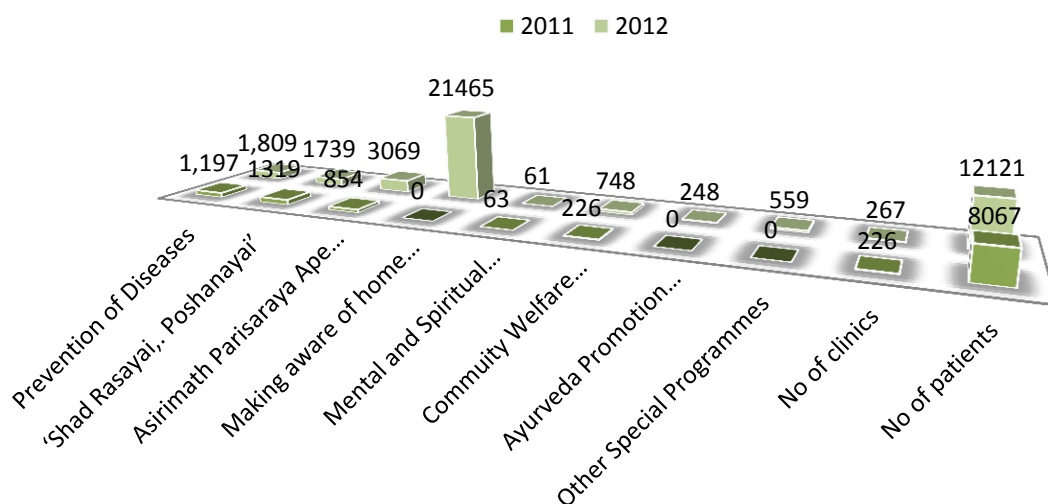
This programme has been inaugurated in 2005 with the objective of uplifting the health conditions and the living standards of people through raising public awareness. At present, the following officers have been deployed in this programme implemented covering 22 Divisional Secretariats in the Anuradhapura District.

Project Director	01
Ayurveda Medical Officer	22
Community Health Promotion Officers	210
Registered Ayurveda Doctors	84

Progress Report from 01st January to 31st December, 2012

Programme	2011	2012
Prevention of Diseases	1,197	1,809
‘Shad Rasayai,. Poshanayai’	1,319	1,739
Asirimath Parisaraya Ape Jeewayai	854	3,060
Making aware of home units	-	21,465
Mental and Spiritual Promotion Programme	63	61
Commuity Welfare Programmes	226	748
Ayurveda Promotion Programmes	-	248
Other Special Programmes	-	559
No of clinics	226	267
No of patients	8,067	12,121

Chart Title



Programme	No of Beneficeries
Establishment of CommunityHealth Regional Offices	134634
Youth Herb Cultivation Project	150
Herb Farms	For all Ayurveda Hospitals
Mobile Clinics	52800
Surveys to measure the nutritional level of children under 05 years of age	20000
Programme on securing professional health of government officers	All government officers
Special Programme "Gebini Mawa Deye Sampathai"	13200
Programme on Maternal and Child Health	10560
Organic Home Gardening	1500
Nutrition programmes to promote indigenous food	50000
Medical Clinics in Janasahana Seva Programme	11000
Survey on kidney patients	2500
Promotional programmes on hygiene	40000
Implementation of Ayurveda concepts	26520
Elder care service programmes	15000

Progress of the programmes implemented under this project from 2011 to 31st December, 2012 has been indicated here. Special attention has been focused on the kidney disease widespread in Anuradhapura district. A research has been conducted in this relation by Ayurveda and awareness programmes and clinics have been conducted based on the findings focusing on the families with kidney patients.

4.2 Youth Medicinal Herb Villages



Since the local raw materials do not satisfy the existing demand, raw material are being imported from countries such as India and Pakistan and it costs much foreign exchange. Finding raw materials in the market has been problematic due to the import restriction imposed in these countries. This programme of cultivating medicinal herbs has been implemented as a solution to this problem. It is expected to encourage youth to cultivate medicinal herbs and create them an additional source of income.

4.2.1 Activities conducted by the Project

- Organize 50 farmers in groups of five members
- Providing knowledge and guidance required for cultivation of medicinal herbs and understanding on group activities.
- Providing a financial assistance of Rs. 60,000 per one group in installments on progress.
- Continuous follow up and provide market opportunities



4.3 Poshana Mandira Programme

The prime objective of this programme is to upgrade the living standards of people with the use of indigenous medical practice. This objective is achieved by establishing ‘*Poshana Mandira*’ at the level of Divisional Secretariats, distributing congee (porridge) and herbal drink carts. By now, 16 carts have been distributed and 05 carts have been distributed in Anuradhapura district to coincide Deyata Kirula.

A ‘*Poshana Mandira*’ has been constructed in Nagadeepa and arrangements have been made to distribute 5 herbal drink carts for Deyata Kirula scheduled to be held in Ampara in 2013.



Nutrition Programmes



4.4 Awareness Programme on Indigenous Food Style and Ayurveda Philosophy of Life



Workshops have been organized to make aware the officers in government institutions, semi-government institutions and the private sector on indigenous medical treatments, indigenous food styles and health habits, popular medicines and means of uplifting and securing the nutrients in food preparation with the noble concept of endowing a healthy and patriotic generation to the nation. The second workshop of this programme was conducted

on 18th October, 2012 in the Provincial Council Auditorium – Kurunegala, to which over 250 persons attended.

Over 600 persons from various institutions attended these workshops conducted by the National Institution of Traditional Medicine and workshops are conducted at institutional level at their request.



Workshops



4.5 Hela Veda Gedara Programme

This is a programme which provides assistance for traditional doctors to establish ‘*Veda Meduru*’ at Divisional Secretariat Divisions in order for the patients to get residential Ayurveda treatments. This ‘*Veda Medura*’ consists of 10 beds. A sum of Rs.1.2Mn will be disbursed by the Ministry while the rest will be borne by the doctor. Since year 2004, 38 ‘*Hela Veda Meduru*’ have been established in 14 districts. Highest number of ‘*Hela Veda Meduru*’, i.e. 8 has been established in Anuradhapura District.



Opening of ‘Hela Veda Gedara’ in Thihagoda, Matara

05. Inter-Ministry Co-operation Programmes

Programmes are conducted by the Ministry of Indigenous Medicine in liaison with several other Ministries.

- 'Hela Veda Piyasa' programme with Abhimansala of the Army
- 'Pansalen Gamata' with the Presidential Secretariat
- 'Divi

Ministry of

Herb



Culture and the Arts

- 'Hela Veda Piyasa' programme with the Ministry of National Heritage
- **Deyata Kirula National Development Programme**
- **EXPO 2011 International Indigenous Medicine exhibition**

Neguma' programme with the Economic Development

➤ Programme on herb cultivation with the Ministry of Rehabilitation and Prison Reforms

➤ Programme of 'School Gardens' with the Ministry of Education

➤ Programme on protection of medical practices of indigenous people and herb cultivation with the Ministry of

5.1 Establishment of Herb Gardens in Religious Institutions.

Programmes on cultivation of medicinal herbs have been implemented in religious institutions at the level of Divisional Secretariat Divisions and Ministry provides seeds and saplings as well as technical assistance. This programme is implemented through Community Health Doctors and Community Health Assistants and 4500 religious institutions have been selected for this programme.

Raising public awareness on indigenous food style and upgrading the nutrition level of people through the consumption of vegetables and fruits with medicinal value have been conducted under the supervision of Provincial Ayurveda Commissioners. This has been a result of the programme on cultivation of home gardens implemented under '*Divi Neguma*'.

Another function of '*Divi Neguma*' is to encourage people towards the cultivation of indigenous medicine. This will result in an additional income for them while producing quality medicinal raw materials of economic value and thereby minimize the foreign exchange incurred upon the importation of medicinal raw materials.



Distribution of medicinal herbs for temples held in Kamburupitiya Matara

5.2 Programmes conducted in collaboration with the Ministry of Rehabilitation and Prison Reforms

Herbl gardens have been established in Out Prisoners' Camps in collaboration with the Ministry of Rehabilitation and Prison Reforms and harvest has been prepared for sale.

Ten farmers have been selected from the Mullaitivu District to cultivate '*Elabatu*'. This project is implemented in liaison with the Rehabilitation Authority.

Programmes are conducted under the supervision of Provincial Commissioner of Ayurveda to upgrade the nutritional level of the public by raising awareness on indigenous food styles using vegetables, fruits with medicinal value produced under the Divi Neguma Programme.



It is expected to provide a source of income for people by encouraging them towards the cultivation of medicinal herbs and thereby to produce qualitative medicinal raw materials. It would eventually lead to the decrease of foreign exchange incurred upon importation of raw materials.

5.3 Programmes conducted in collaboration with the Ministry of Education (School Herb Gardens)

The main objectives of this programme implemented in unison with the Ministry of Education are to introduce medicinal herbs to school students, encourage them towards conservation of medicinal herbs in the school and at home, providing students with basic knowledge in the medicinal value of the herbs and establishment of a school herb garden in every school over 1000 students.

Arrangements have been made to establish 28 school herb gardens in the Sabaragamuwa Province under the programme of “*Sisu Osu Arana*”. Steps have been taken to donate books on medicinal herbs to school libraries.

The programme “*Tikiri Osu Uyan*” too is being quite popular. Competitions have been conducted at district, provincial and national levels for the herb gardens established at school level and awards and certificates have been presented to the winners under the patronage of Hon. Salinda Dissanayake, Minister of Indigenous Medicine.

Over 1000 school herb gardens have been established in schools by now.



School Herb Gardens





5.4 Joint Programmes with the Ministry of Culture and the Arts

Programmes have been conducted under this project for conservation and promotion of traditional medical practices and cultivation of '*Prickly Nightshade*' and '*Elabatu*' has been introduced to indigenous people as a source of income. Accordingly, the indigenous people in *Nilgala* and *Rathugala* are cultivating these herbs.

Indigenous '*Veda Piyasa*' in Dambana has been constructed with the financial assistance of the Ministry of National Heritage under the project of conservation of the indigenous folk culture implemented under the Ministries of Indigenous Medicine as well as Culture and the Arts. It has been declared open on 22nd June, 2012 by Hon. Salinda Dissanayake, Minister of Indigenous Medicine at the invitation of *Uruwarige Wanniyala Aththo*.



Ministry of Indigenous Medicine supplies all the medicines required by this '*Veda Piyasa*' established with the objective of providing medicines for indigenous people.





Herb cultivation in Dantana and conservation of medical practices

Jeewaka Hamuwa Television Programme

Another strategy used by the Ministry of Indigenous Medicine for raising public awareness is the **Jeewaka Hamuwa** television programme telecast on every Monday at 11.30 a.m. with the cooperation of the ITN. In this programme, a veteran Ayurveda Doctor is invited to conduct discussions in raising public awareness on medicinal plants, food styles and society. Up to now, 36 doctors have participated in this programme



6. Information Technological Access of the Ministry of Indigenous Medicine

An information Technology Unit has been established in the Ministry, marking a new milestone with the intention of generating knowledge and understanding in Ayurveda as well as good habits among people. Firstly a trilingual website has been launched on 26th September, 2011 for the Ministry of Indigenous Medicine in the name of www.indigenousmedicine.gov.lk with the assistance of the Rainbow Institution who creates the national telephone directory of Sri Lanka Telecom.

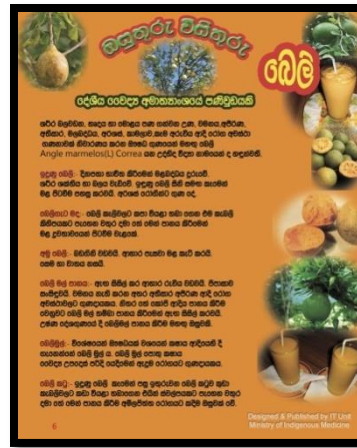
A series of e-papers containing information on medicinal herbs and food style has been uploaded in the trilingual website for reference.

“National business directory joins the promotion of indigenous medicine” At a time when attention of students in various countries of the world has been directed towards indigenous medical practice, Sri Lanka Telecom Limited along with the SLT Rainbow Pages has selected *‘Indigenous Medicine’* as their communication slogan in year 2012. This has been a great opportunity to win the international arena as it has been planned to publicize constantly within the year among the viewer network of millions.

Another unique function performed daily by the Information Technology Unit established in the Ministry of Indigenous Medicine is the commencement of attractive e-mail service containing information on medicinal herbs, Ayurveda food style and day to day Popular Medicines. This is being communicated to over 6000 government officers who use e-mail. The specialty of this service is that no money should be incurred for printing and distribution. .

Sri Lanka Telephone Index – 2012 has been designed with information on Ayurveda.





07.

Deyata Kirula National Development Programme

Deyata Kirula exhibition - 2012 has been commenced on 4th February, 2012 centering Oyamaduwā in Anuradhapura and a number of programmes have been implemented to coincide this.

Seven exhibition stalls have been created representing the Ministry of Indigenous Medicine.

- Exhibition stall on Ayurveda medicinal herbs
- Exhibition stall on traditional medical practices
- Ayurveda Community Health Unit
- ‘Gemi Gedara’ -
- Exhibition stall on ‘Panchakarma’ treatments
- Exhibition stall on indigenous food

Sales outlet of medicinal herb plants and Ayurveda books



Programmes implemented in year 2012 are as follows.

Programme	Divisional Sexretariat Division
1. Establishment of Regional Community Health Offices	Padaviya, Medawachchiya, Kebithigollewa, Mihinthale, Horowpathana
2. Youth Medicinal Herb Programe	Madyama Nuwaragam Palatha, Horowpathana
3. Cultivation of traditional indigenous paddy	Padaviya
4. Conducting mobile clinics	22 Divisional Secretariat Divisions in Anuradhapura District
5. Survey on nutritional level of children under 5 years of age	22 Divisional Secretariat Divisions in Anuradhapura District
6. Programme on securing professional health of government officers	22 Divisional Secretariat Divisions in Anuradhapura District
7. Special Programme”Gebini Mawa Deye Sampathai”	22 Divisional Secretariat Divisions in Anuradhapura District
8. Child and maternal health programme	22 Divisional Secretariat Divisions in Anuradhapura District
9. Organic home gardening	22 Divisional Secretariat Divisions in Anuradhapura District
10. Establishment of herb gardens	22 Divisional Secretariat Divisions in Anuradhapura District
11. Workshop on popularizing indigenous food	22 Divisional Secretariat Divisions in Anuradhapura District
12. Conducting clinics in ‘Jana Sahana	22 Divisional Secretariat Divisions in Anuradhapura District

Sewa Programme'	
13. Survey on kidney patients	22 Divisional Secretariat Divisions in Anuradhapura District
14. Hygiene promotion programme	22 Divisional Secretariat Divisions in Anuradhapura District
15. Implementation of Ayurvedic concepts	22 Divisional Secretariat Divisions in Anuradhapura District
16. Elder care services programme	22 Divisional Secretariat Divisions in Anuradhapura District

Many programmes have been implemented in Monaragala District to coincide with the Deyata Kirula programme -2012.

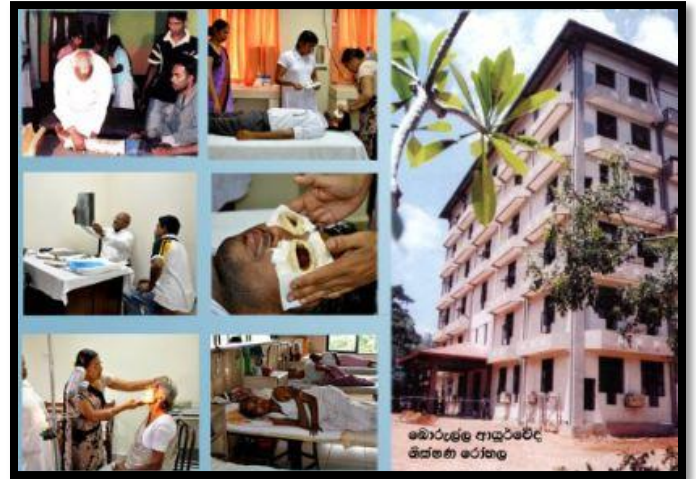
1. Establishment of school herb gardens
2. Nutrition programmes for school children
3. 'Hela Weda Gedara'
4. 'Poshana Mandira'
5. Congee carts
6. Herb cultivation in Army camps
7. 2 acre medicinal herb garden in the deyata Kirula exhibition grounds
8. providing free herbal drinks for the viewers of Deyata Kirula exhibition

Department of Ayurveda

- Ayurveda Medical Council
- National Institute on Indigenous Medicine
- Ayurveda Hospitals

There are 7 Teaching and Research Hospitals under the purview of the Department of Ayurveda

- Borella Ayurveda Teaching Hospital
- Kaithady Siddhaurveda Teaching Hospital
- Wickramarachchi Ayurveda Teaching Hospital, Gampaha
- Ayurveda Research Hospital - Navinna
- Ayurveda Research Hospital - Hambantota
- Ayurveda Research Hospital - Manchanthudai
- Ayurveda Research Hospital – Ampara

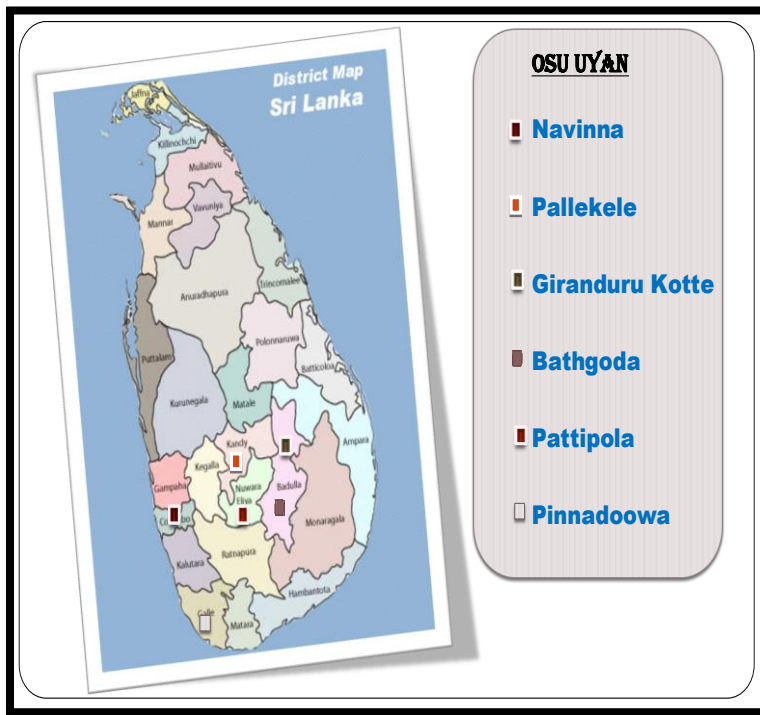


Out Patients' Division of the Navinna Ayurveda Research Hospital

Research Herb Gardens

- Navinna
- Girandurukotte
- Pallekele
- Bathgoda
- Pattipola
- Pinnaduwa





- Homeopathy Hospital - Welisara
- Sri Lanka Ayurveda Pharmaceutical Corporation
- Community Health Promotion Service

Other Institutions coming under the purview of the Ministry of Indigenous Medicine

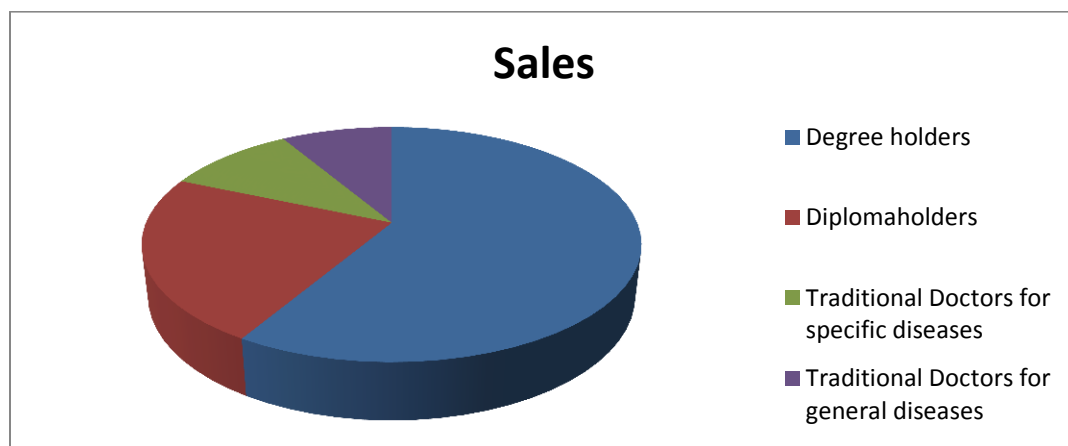
Administrative Unit	Ayurveda Hospitals	Ayurveda Central Dispensaries
Provincial Department of Ayurveda Western Province	9	16
Provincial Department of Ayurveda Sabaragamuwa Province	9	10
Provincial Department of Ayurveda Uva Province	3	20
Provincial Department of Ayurveda Central Province	9	21
Provincial Department of Ayurveda North Central Province	7	30
Provincial Department of Ayurveda Eastern Province	5	40
Provincial Department of Ayurveda Northern Province	6	18
Provincial Department of Ayurveda Southern Province	9	25

Provincial Department of Ayurveda Wayamba Province	10	31
Total	67	211

In addition to this 231 free Ayurveda dispensaries operated by Local Government Institutions are being implemented around the island

No of Ayurveda Doctors registered under the Ayurveda Medical Council as at 31st December, 2012

Medical Officer Category	No registered
Degree holders	2109
Diplomaholders	5024
Traditional Doctors for specific diseases	8239
Traditional Doctors for general diseases	5340
Total No of doctors registered	20712



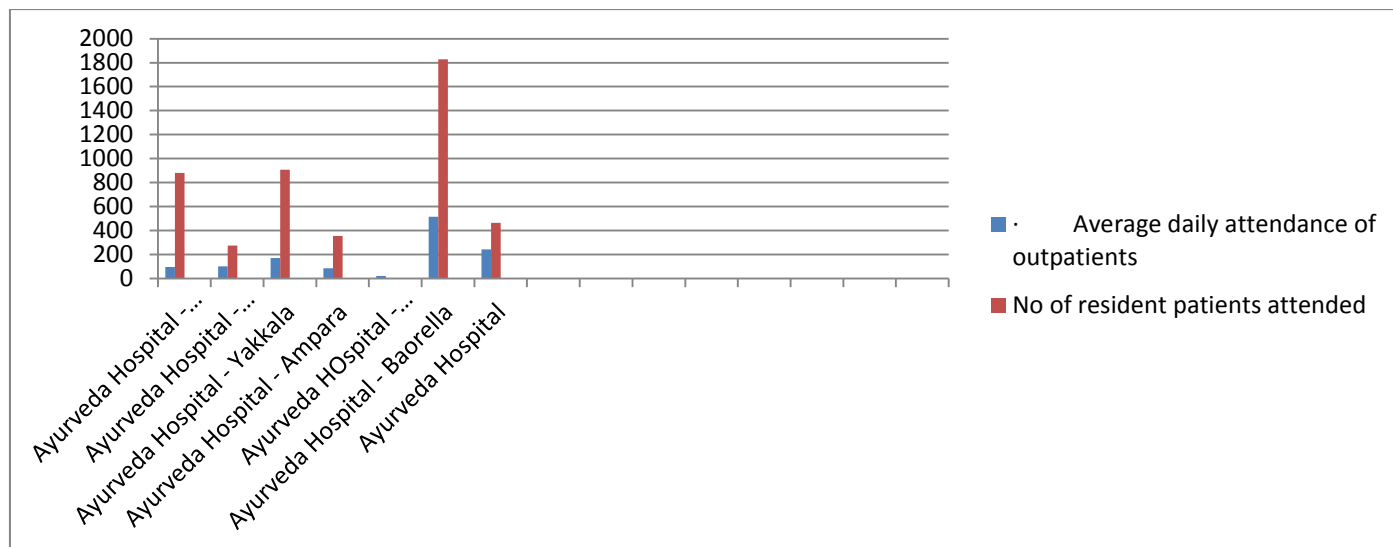
Statistics on Ayurveda Hospitals belong to the Central Government - 2012

Provincial Department of Ayurveda		No of days opened	First visits	Revisits	Total	Avg. daily attendance	Value of medicines issued for out patients	No of wards	No of beds	Patients admitted	Patients discharged	Value of medicines issued for resident patients
1	Southern Province	9378.5	238310	125080	363390	1271	21,529,193.00	23	435	3093	3071	3,373,303.90
2	Sabaragamuwa Province	5765	130670	137430	268100	924	22,764,057.00	28	458	4202	3865	6,188,324.00
3	Central Province	7612	169986	181918	351904	1290	22,044,799.91	20	486	4356	4253	5,412,919.13
4	Uva Province	7299.5	140115	183730	323845	1064	28,233,137.93	15	248	1925	1786	3,487,413.88
5	Western Province	7346	543863	462774	1006637	3364	76,111,108.64	23	308	3279	3214	5,663,888.38
6	Eastern Province	13872	168694	81485	250179	866	21,885,361.00	12	400	1854	1830	2,007,063.00
7	Northern Province	6144	95635	47808	143443	530	3,954,093.49	12	80	801	801	764.90
8	Wayamba Province	11734.5	167286	173976	341262	863	27,564,397.76	29	529	4729	4415	5,880,882.57
9	North Central Province	Statistics have not yet received										
	Total	66640	1612456	1357476	2969932	10172.15	217,159,357.48	156	2874	23561	22653	31,264,810.69

Statisticts on Patients in Provincial Ayurveda Hospitals - 2012

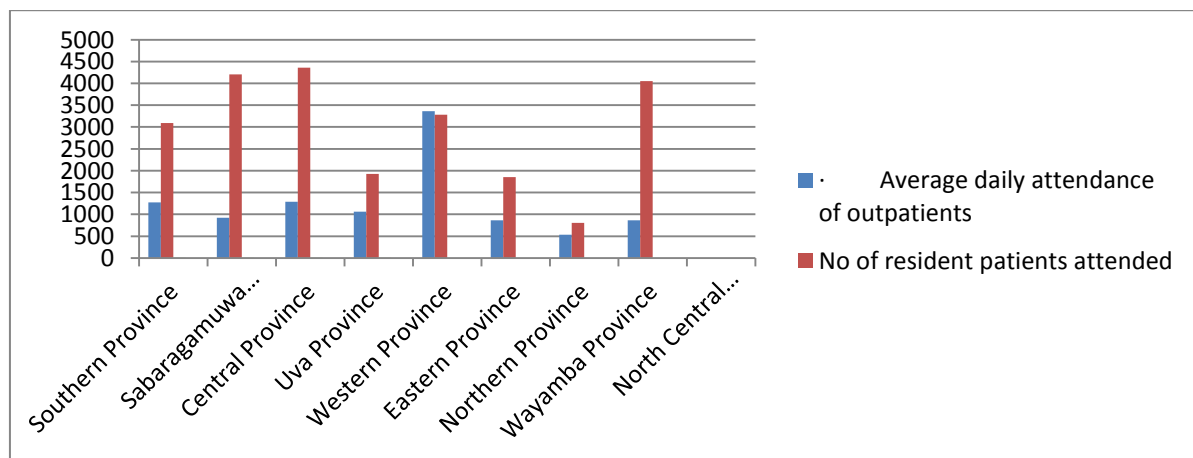
Institution	Telephone No	Date commenced	District	Divisional Secretariat Division	Statistics on out patients						Statistics on resident patients				
					No of days opened	First visit	Re-visits	Total	Avg daily attendance	Value of medicine issued for out patients (Rs.)	No of wards	No of beds	No of patients admitted	No of patients discharged	Value of medicine issued for resident patients
Ayurveda Hospital - Kaithady	021-2057104	1973.06.29	Jaffna	Thanmarachchi	306	19,060	10,652	29,712	97	4,111,768.00	5	140	881	886	2,055,885.00
Ayurveda Hospital - Hambantota	047-2256700	2010.02.13	Hambantota	Hambantota	283	11,868	17,355	29,223	103	4,511,115.00	2	55	277	226	665,040.00
Ayurveda Hospital - Yakkala	033-2227988	1984 June	Gampaha	Gampaha	292	27,866	22,197	50,063	171	9,308,550.00	4	109	907	896	4,413,150.00
Ayurveda Hospital - Ampara	063-2224349	1990.01.01	Ampara	Ampara	311	14,705	12,137	26,842	86	4,074,486.55	2	24	356	356	1,058,719.38
Ayurveda Hospital - Manchanthidai	065-2247178	1993.11.29	Trincomalee	Manmunai North	295	3,842	2,709	6,551	22	989,995.00	2	10			
Ayurveda Hospital - Baorella	0112-694637	1943	Colombo	Thimbirigasyaya	335	109,216	63,547	172,763	516	33,498,638.25	13	170	1827	1816	7,148,665.90
Ayurveda Hospital	0112-897287	1962.10.14	Colombo	Maharagama	294	47,744	24,061	71,805	244	10,773,456.00	4	71	466	445	447,537.85
Total					2116	234,301	152,658	386,959	1240	67,268,008.80	32	579	4714	4625	15,788,998.13

Statistics on Ayurveda Hospitals belonging to the Central Government - 2012



1.

Statistics on Patients of Provincial Ayurveda Hospitals - 2012



State Ceremony of Anointing of Oil

State ceremony of anointing of oil for the Sinhala and Hindu New Year – 2012 has been held on Saturday 15th April 2012 at 7.41 a.m. at “Ran Dupatha” Sri Rohana Upasathagara Maha Vihara under the patronage of H.E.the President Mahinda Rajapaksa. This is a prominent state ceremony organized with the collaboration of the Ministry of Indigenous Medicine and the Department of Ayurveda.





Welcoming H.E. the President
who have approach the
ceremony of annointing of oil

Ministry of Indigenous Medicine
Expenditure Report as at 31st December, 2012

Allocations (Rs.)	Allocations freezed	Net Allocations	Total Expenditure as at 31.12.2012	Balance Allocations	Total Expenditur e as a percentage of allocations	Balance Allocation s as a percentage of Total Allocation s	Expenditure Head
10,000,000.00		10,000,000.00	9,057,075.46	942,924.54	90.57	9.43	Salaries and wages
3,000,000.00		3,000,000.00	2,758,483.68	241,516.32	91.95	8.05	Overtime and Holiday pay
4,900,000.00		4,900,000.00	4,605,304.09	294,695.91	93.99	6.01	Other Allowances
2,000,000.00		2,000,000.00	1,910,755.72	89,244.28	95.54	4.46	Transport - Local
5,350,000.00		5,350,000.00	4,555,712.98	794,287.02	85.15	14.85	Transport - Foreign
1,000,000.00		1,000,000.00	920,263.52	79,736.48	92.03	7.97	Stationery and office requirements
12,000,000.00		12,000,000.00	9,490,897.53	2,509,102.47	79.09	20.91	Fuel and Lubricants
15,000.00		15,000.00	4,960.00	10,040.00	33.07	66.93	Food and Uniforms
1,250,000.00		1,250,000.00	1,025,126.70	224,873.30	82.01	17.99	Other Supplies
4,200,000.00		4,200,000.00	3,970,647.96	229,352.04	94.54	5.46	Vehicles
200,000.00		200,000.00	197,290.76	2,709.24	98.65	1.35	Machines and Tools
75,000.00		75,000.00	13,760.00	61,240.00	18.35	81.65	Building and Construction
4,925,000.00		4,925,000.00	3,390,400.00	1,534,600.00	68.84	31.16	Transport
1,000,000.00		1,000,000.00	803,036.77	196,963.23	80.30	19.70	Postal and Communication
2,000,000.00		2,000,000.00	658,099.56	1,341,900.44	32.90	67.10	Electricity and Water
100,000.00	100,000.00	-	-	-	-	-	Lease and Local Government Tax
2,800,000.00		2,800,000.00	1,615,542.69	1,184,457.31	57.70	42.30	Other Services
10,000.00	10,000.00	-	-	-	-	-	Interest for property loan of Government Servents
54,825,000.00	110,000.00	54,715,000.00	44,977,357.42	9,737,642.58	82.20	17.80	
5,954,000.00		5,954,000.00	1,867,217.53	4,086,782.47	31.36	68.64	Building and construction

600,000.00		600,000.00	29,500.00	570,500.00	4.92	95.08	Upgrade of machines and tools
3,900,000.00		3,900,000.00	3,561,796.98	338,203.02	91.33	8.67	Rehabilitation and upgrade of vehicles
20,000,000.00		20,000,000.00	13,933,920.72	6,066,079.28	0.00	100.00	Acquiring of vehicles
971,000.00		971,000.00	966,190.98	4,809.02	99.50	0.50	Furniture and office equipment
400,000.00		400,000.00	-	400,000.00	0.00	100.00	Machines and Tools
400,000.00	400,000.00	-	-	-	-	-	Land and land development
32,225,000.00	400,000.00	31,825,000.00	20,358,626.21	11,466,373.79	63.97	36.03	
87,050,000.00	510,000.00	86,540,000.00	65,335,983.63	21,204,016.37	75.50	24.50	

19,150,000.00		19,150,000.00	18,620,936.54	529,063.46	97.24	2.76	Salaries and wages
1,700,000.00		1,700,000.00	1,575,592.05	124,407.95	92.68	7.32	Overtime and Holiday pay
8,500,000.00		8,500,000.00	8,492,077.40	7,922.60	99.91	0.09	Other allowances
800,000.00		800,000.00	481,375.24	318,624.76	60.17	39.83	Travelling Expenditure - Local
2,000,000.00		2,000,000.00	1,927,401.19	72,598.81	96.37	3.63	Travelling Expenditure - Foreign
1,500,000.00		1,500,000.00	1,416,448.56	83,551.44	94.43	5.57	Stationery and office requirements
3,500,000.00		3,500,000.00	3,311,754.98	188,245.02	94.62	5.38	Fuel and lubricants
150,000.00		150,000.00	94,727.50	55,272.50	63.15	36.85	Food and uniforms
800,000.00		800,000.00	640,504.19	159,495.81	80.06	19.94	Newspapers, books and other
3,000,000.00		3,000,000.00	2,680,987.64	319,012.36	89.37	10.63	Vehicle maintenance

350,000.00		350,000.00	310,091.93	39,908.07	88.60	11.40	Machinery maintenance
150,000.00		150,000.00	11,300.00	138,700.00	7.53	92.47	Building maintenance
2,300,000.00	1,000,000.00	1,300,000.00	935,483.49	364,516.51	71.96	28.04	Transport and rent
1,750,000.00		1,750,000.00	1,656,090.09	93,909.91	94.63	5.37	Post and communication
2,500,000.00		2,500,000.00	1,200,000.00	1,300,000.00	48.00	52.00	Electricity and water
100,000.00	100,000.00	-	-	-	-	-	Lease and Local Government Tax
5,000,000.00		5,000,000.00	352,903.06	4,647,096.94	7.06	92.94	Security services
600,000.00		600,000.00	298,918.57	301,081.43	49.82	50.18	Sanitary services
650,000.00		650,000.00	328,262.96	321,737.04	50.50	49.50	Entertainment expenditure
500,000.00		500,000.00	109,427.00	390,573.00	21.89	78.11	Staff training
55,000,000.00	1,100,000.00	53,900,000.00	44,444,282.39	9,455,717.61	82.46	17.54	
16,800,000.00		16,800,000.00	14,733,437.09	2,066,562.91	87.70	12.30	Homeopathy hospital
6,000,000.00		6,000,000.00	2,132,993.20	3,867,006.80	35.55	64.45	Other services
6,600,000.00		6,600,000.00	5,513,898.97	1,086,101.03	83.54	16.46	Homeopathy Council
2,050,000.00		2,050,000.00	47,270.00	2,002,730.00	2.31	97.69	Establishment of the 'Poshana Mandiraya'
100,000.00	100,000.00	-	-	-	-	-	Subscription and membership fees
350,000.00		350,000.00	297,936.15	52,063.85	85.12	14.88	Interest for property loan of Government employees
48,902,000.00	2,427,000.00	46,475,000.00	41,906,166.31	4,568,833.69	90.17	9.83	Provincial Councils
80,802,000.00	2,527,000.00	78,275,000.00	64,631,701.72	13,643,298.28	82.57	17.43	
135,802,000.00	3,627,000.00	132,175,000.00	109,075,984.11	23,099,015.89	82.52	17.48	

3,500,000.00	500,000.00	3,000,000.00	263,130.48	2,736,869.52	8.77	91.23	Building and construction
300,000.00		300,000.00	53,270.00	246,730.00	17.76	82.24	Machinery and upgrade of machine equipment

2,000,000.00		2,000,000.00	1,481,630.48	518,369.52	74.08	25.92	Vehicle maintenance and upgrade
4,600,000.00	1,000,000.00	3,600,000.00	1,916,348.28	1,683,651.72	53.23	46.77	Furniture, office equipment and other
4,600,000.00	1,000,000.00	3,600,000.00	1,695,083.71	1,904,916.29	47.09	52.91	Acquiring machine and machine equipment
2,000,000.00		2,000,000.00	1,381,086.78	618,913.22	69.05	30.95	Acquiring building and construction
116,000,000.00	9,950,000.00	106,050,000.00	106,000,000.00	50,000.00	99.95	0.05	Ayurveda Pharmaceutical Corporation
2,000,000.00		2,000,000.00	117,302.00	1,882,698.00	5.87	94.13	Hela Veda Gedara
1,500,000.00		1,500,000.00	540,003.00	959,997.00	36.00	64.00	Training and capacity building
136,500,000.00	12,450,000.00	124,050,000.00	113,447,854.73	10,602,145.27	91.45	8.55	
3,000,000.00		3,000,000.00	3,000,000.00	-	100.00	0.00	Programme on nutrition
12,000,000.00	5,000,000.00	7,000,000.00	6,754,428.00	245,572.00	96.49	3.51	Development of Homeopathy practices
95,000,000.00		95,000,000.00	84,623,618.85	10,376,381.15	89.08	10.92	Ayurveda Community Health Project, Anuradhapura
1,100,000.00	488,000.00	612,000.00	150,000.00	462,000.00	24.51	75.49	Programme on medicinal herb villages
800,000.00		800,000.00	507,388.92	292,611.08	63.42	36.58	Programme on youth medicinal herb villages
111,900,000.00	5,488,000.00	106,412,000.00	95,035,435.77	11,376,564.23	89.31	10.69	
471,252,000.00	22,075,000.00	449,177,000.00	382,895,258.24	66,281,741.76	85.24	14.76	

Ministry of Indigenous Medicine

Expenditure Report as at 30th December, 2012

		Allocations	Expenditure	Balance	Percentage of Expenditure	Percentage of the balance
Minister's Office	Recurrent	54,715,000.00	44,977,357.42	9,737,642.58	82.20	17.80
	Capital	31,825,000.00	20,358,626.21	11,466,373.79	63.97	36.03
Ministry's Office	Recurrent	132,175,000.00	109,075,984.11	23,099,015.89	82.52	17.48
	Capital	230,462,000.00	208,483,290.50	21,978,709.50	90.46	9.54
	Total	449,177,000.00	382,895,258.24	66,281,741.76	85.24	14.76

Total Recurrent Expenditure		186,890,000.00	154,053,341.53	32,836,658.47	82.43	17.57
Total Capital Expenditure		262,287,000.00	228,841,916.71	33,445,083.29	87.25	12.75

Department of Ayurveda

Expenditure Report as at 30.12.2012

Project	Allocations		Expenditure (Rs.)	Balance (Rs.)	Percentage of Expenditure	Percentage of the Balance
Administration and institutional services	Recurrent	76,205,000.00	74,288,487.00	1,916,513.00	97.49	2.51
	Capital	10,100,000.00	7,565,881.00	2,534,119.00	74.91	25.09
Treatment services	Recurrent	364,814,751.00	364,434,374.00	380,377.00	99.90	0.10
	Capital	178,870,400.00	35,667,107.00	143,203,293.00	19.94	80.06
Research	Recurrent	99,517,676.00	99,480,792.00	36,884.00	99.96	0.04
	Capital	45,160,200.00	14,244,327.00	30,915,873.00	31.54	68.46
Education and training	Recurrent	28,842,163.00	28,718,361.00	123,802.00	99.57	0.43
	Capital	5,500,000.00	3,543,420.00	1,956,580.00	64.43	35.57
Conservation of medicinal herbs	Recurrent	42,765,410.00	42,749,527.00	15,883.00	99.96	0.04
	Capital	32,150,000.00	9,689,089.00	22,460,911.00	30.14	69.86

Total Recurrent	612,145,000.00	609,671,541.00	2,473,459.00	99.59	0.41
Total Capital	271,780,600.00	70,709,824.00	201,070,776.00	26.01	73.99

Audit observations in relation to the Appropriation Account of the Ministry of Indigenous Medicine for year 2012 are as follows.

1. Expenditure details according to the Appropriation Account

(a) Net allocations and expenditure for year 2012 according to the Appropriation Account are as follows.

	<u>Net Allocations</u>	<u>Expenditure</u>	<u>Balance</u>	<u>Balance Percentage</u>
	Rs.	Rs.	Rs.	%
Recurrent	190,627,000	154,053,341	36,573,659	19
Capital	<u>280,625,000</u>	<u>228,841,917</u>	<u>51,783,083</u>	18
Total	471,252,000	382,895,258	88,356,742	18

(b) Allocations not expended

2. It has been observed in certain instances that allocations have remained 100% unexpended as follows due to not following the directives of F.R. 50(i)(ii)(iii) in preparation of annual estimates.

<u>Expenditure Object</u>	<u>Net allocation</u>
	Rs.
01-01-1506	10,000
01-01-2103	400,000

3.

2. Inefficiency and weaknesses in preparation of estimates

I. More than 40% of allocations made for recurrent expenditure have remained unexpended as a result of allocating without clearly identifying the requirements.

Expenditure Object	Net Allocation	Balance	Balance Percentage
	Rs.	Rs.	%
01-01-1203	15,000	10,040	67
01-01-1303	75,000	61,240	81.65
01-01-1403	2,000,000	1,341,900.44	67.09
01-01-1405	2,800,000	1,184,457.31	42.30
01-02-1303	150,000	138,700	92.47
01-02-1403	2,500,000	1,300,000	52
01-02-1405-01	5,000,000	4,647,096.94	92.94
01-02-1405-02	600,000	301,081.43	50.18
01-02-1405-03	650,000	321,737.04	49.5
01-02-1405-04	500,000	390,573	78.11
01-02-1405-06	6,000,000	3,867,006.80	64.45
01-01-1503-02	2,050,000	2,002,730	97.69

II. More than 40% of capital expenditure has remained as follows.

<u>Expenditure Object</u>	<u>Net Allocation</u>	<u>Balance</u>	<u>Balance Percentage</u>
	Rs.	Rs.	%
01-01-2002	600,000	570,500	95.08
01-01-2101	20,000,000	6,066,079.28	75.50
01-02-2001	3,500,000	3,236,869.52	92.48
01.02.2002	300,000	246,730	82.24
01-022202(1)	2,000,000	1,882,698	94.13
01-02-2401	1,500,000	959,997	64

3. Freezing of Allocations

4. According to para 2.2 of Budget Circular No 155, relevant savings including rehabilitation and improvement of capital assets, capital expenditure of development projects implemented under foreign aid and provisions for capital expenditure of provincial councils should be made from allocations in saving from capital expenditure. However, no money has been saved from the Expenditure Object No 138-01-01-2001, 138-01-01-2002 and 138- 01-01-2003

4. Liabilities

- I. Certain liabilities amounting to Rs. 5,766,765.31 as at 31st December, 2012 have not entered in the liability account (Annexe 01)
- II. As per F.R. 94(2) liability agreements for annual services and supplies, the liability should not exceed 50 % of the estimated allocations of past three years, yet the Expenditure Object No 01-02-2003 being Rs. 498,500 it has entered in to liabilities of Rs. 921,415 (along with the liabilities not indicated in the Appropriation Account)
- III. The balance of allocations of the Expenditure Object No. 01-01-2003 is Rs.338,203 and the liabilities of the expenditure object is Rs.439,810.
- IV. As per F.R. 115(3)(b), a sum which should have been paid before 30th November in a certain financial year could be paid upon the approval of an authorized officer. However, such approval has not been obtained for the following payments.

<u>Date of Payment</u>	<u>Voucher No</u>	<u>Description</u>	<u>Value</u>
			Rs.
07.01.2013	131/34	Newspaper bills of August, September, October, November, and December 2012	8,480.00
04.01.2013	131/27	Telephone bills from 01 st September, 2012 to 30 th September, 2012	1,029.30
		Telephone bills from 01 st October, 2012 to 31 ^s September, 2012	902.18

Motion of Non-current Assets

- I. Initial balance of Non-current Assets as at 01.01.2012 and the final balance as at 31st December, 2012 have not reconciled in the report on the motion of non-current assets in note (i) of the Appropriation Account and it has been observed that the same initial balance as at 01.01.2011 has been indicated as the initial balance as at 01.01.2012 and while the value of total assets as at 31.12.2011 being Rs. 95,941,607 it has been indicated as Rs. 67,848,747 in the Appropriation Account as at 01.01.2012.
 - II. A systematic inventory for fixed assets including the purchased date, discarded value and net balance has not been maintained.
- 5.
5. Bank Reconciliation
- 6.

The value of six cheques, which have been issued over six months yet not been banked as at 31st December, 2012 in the bank account of the Ministry of Indigenous Medicine in the Maharagama Branch of Bank of Ceylon No.7040752 has been indicated as Rs. 129,080.99. The cheque No 382359 issued on 23rd July, 2012 amounting to Rs. 112,777.79 has also been included.

Date issued	Cheque No	Value (Rs.)
14/10/2011	210858	6,525.00
09/03/2012	350941	1,750.00
29.03.2012	351051	2,350.00
24/04/2012	351198	5,568.20
25.06.2012	382196	110.00
23/07/2012	382359	<u>112,777.79</u>
		<u>129,080.99</u>

6. Annual Board of Survey

The annual Board of Survey for year 2012 has not been conducted before 15th March, 2013 and submitted the report to the Auditor General as instructed by F.R. 756 and Public Finance Circular No 441 dated 09th December, 2009.

7. Losses and Waivers

As per F.R. 104, losses have not been reported to the Auditor General and a Register of Losses has not been maintained.

Annexe 01

Liabilities not indicated in the Appropriation Account

<u>Date</u>	<u>FC No</u>	<u>Voucher No</u>	<u>Description</u>	<u>Object</u>	<u>Values (Rs)</u>
06.02.2013	378	132/32	Overtime – December, 2012	1-2-1405-5	5,137.00
19.02.2013	488	132/93	Accommodation – official duty Nuwara Eliya	1-2-1405	2,655.00
15.02.2013	454	132/80	Sanitary allowance	1-2-1503-1	1,800.00
	455	132/80	Sanitary allowance	1-2-1503-1	1,800.00
	456	132/80	Telephone cards	1-2-1503-1	400.00
15.02.2013	434	132/79	Cleaning the clinic December, 2012	1-2-1503-1	1800.00
	435	132/79	Cleaning the clinic December, 2012	1-2-1503-1	1800.00

	437	132/79	Cleaning the clinic December, 2012	1-2-1503-1	1800.00
	438	132/79	Cleaning the clinic December, 2012	1-2-1503-1	1800.00
13.02.2013	453	132/65	Mobile bills (December, 2012)	1-2-1402	725.65
13.02.2013	465	132/64	Newspapers– December, 2012	1-2-1205	892.50
13.02.2013	460	132/62	Telephone bills- December, 2012	1-2-1402	4,518.53
13.02.2013	441	132/61	Telephone bills- December, 2012	1-2-1402	3495.02
	443	132/61	Website –December, 2012	1-2-1402	46,531.00
13.02.2013	449	132/59	Telephone bills -December, 2012	1-2-1402	1436.11
21.02.2013	494	132/111	Telephone bills- December, 2012	1-2-1402	606.13
21.02.2013	497	132/112	Telephone –December, 2012	1-2-1402	909.93
					782.33
21.02.2013	493	132/113	Telephone – December, 2012	1-2-1402	2420.58
26.02.2013	600	132/134	Travelling	1-2-1405-5	1358.00
	601		Overtime – December, 2012		
13.02.2013	453	132/65	Mobile bills (December, 2012)	1-2-1405-5	2594.00
27.02.2013	565	132/142	Vehicle repair (2012/12/26)	1-1-2003	439,810.00
	566		Fuel (2012/12/26)	1-1-1202	2,000.00
28.02.2013	509	132/172	Telephone (11/1-11/30)	1-2-1405-5	2332.00
28.02.2013	626	132/169	Travelling (2012/12/25)	1-1-1101	388.00
	627		Overtime (25/12/2012)	1-1-1002	1163.22
28.02.2013	594	132/155	Telephone (2012/11)	1-2-1503-1	800.00
	595		Electricity (2012/11,12)	1-2-1503-1	300.00
28.02.2013	623	132/153	1/20 pay	1-2-1405-5	1372.50
28.02.2013	427	132/152	Printing name boards	2-3-2502-3	32,500.00
08.03.2013	737	133/46	Holiday pay	1-2-1405-5	1372.50
07.03.2013	695	133/29	Telephone (2012/11/05- 2012/12/04)	1-1-1405	1651.95
19.03.2013	853	133/100	Telephone (December, 2012)	1-1-1402	4614.65
				1-2-1402	27,189.96
19.03.2013	841	133/99	Telephone (December, 2012)	1-1-1402	7923.01
28.03.2013	951	133/200	Phar. Corp. December, 2012	2-3-2502-3	5,094,540.00
28.03.2013	934	132/192	Railway Warrant, April, 2012	2-3-2502-3	11,520.00
				1-2-1405-5	1400.00
				1-2-1101	1400.00
28.03.2013	933	133/191	Railway warrants -April, 2012	2-3-2502-3	600.00
28.03.2013	937	133/183	Refreshment- Nov/Dec, 2012	1-1-1405	24,458.00
22.03.2013	910	133/158	Overtime–Oct/Nov, 2012	1-2-1405-5	10,170.74
04.01.2013	62	131/124	Fuel– December, 2012	1-2-1202	6297.00
03.01.2013	38	131/02	Travelling	1-1-1101	2625.00
	39	131/02	Travelling – December, 2012	1-1-1101	2450.00
Total					<u>5,766,765.31</u>



THANK YOU!!

