Recommendations		Proposed activities	Respon sible		Monitoring performance indicator		Time frame and estimated expenditure (Rs. Mn)									
			agency		-	Yr.	14	15	16	17	18	19				
Strategic Area 1: Access to screen	ing															
1.1 Strengthening of screening guidelines	1.1.1	Prepare criterion for screening	MOH	1.1.1	Criterion prepared and distributed	PP	10%	25%	100%	100%	100%	100%				
		guidelines				FP	5	5	10	10	10	10				
1.2 Implement a systematic screening	1.2.1	Implement a systematic screening	МОН	1.2.1	% of eligible people screened in	PP	20%	40%	60%	100%	100%	100%				
programmes for CKD		programmes			each MOH/DS areas	No	0.5	1	1	1.2	1.5	1.8				
						FP	20	60	70	80	90	100				
1.3.1 Strengthening of infrastructure	1.3.1.1	management centres to identified hospitals in the effeted area	МОН	1.3.1.1	and patient management centres	PP	9	14	20	23	25	30				
facilities for CKD screening in key affected areas						FP	180	350	300	200	200	200				
arrected areas	1.3.1.2		МОН	1.3.1.2.1	% of District level CKD units	PP	20%	50%	100%	100%	100%	100%				
	1.0.112				established in high prevalent areas											
						FP	25		100	50	50	50				
				1.3.1.2.2	% of Divisional level CKD units established	PP	20%	50%	100%	100%	100%	100%				
1.3.2 Strengthening of laboratory facilities	1.3.2.1	Provide laboratory facilities for the	МОН	1.3.2.1	% of institutions with	PP	20%	40%	60%	100%	100%	100%				
for CKD screening in key affected areas		hospitals in the endemic area			adequatelaboratory equipment available	FP	60	150	200	200	200	200				
1.3.3 Strengthening of human resources	1.3.3.1	Appointment of AMOH CKDP to all high high risk RDHS and MOH areas		1.3.3.1	% of RDHS/MOH with AMOH CKDP in needy districts	PP	60%	100%	100%	100%	100%	100%				
for CKD screening in key affected areas			s			FP	N/A	N/A	N/A	N/A	N/A	N/A				
1.4.1 Improvement of mobile clinics	1.4.1.1	Provide vehicles to conduct mobile CKD screening	МОН	1.4.1.1.1	1 No. of RDHS/MOH areas provided	PP	15	5	2	2	2	2				
conducted at GSN Divisions					with vehicles	FP	118	40	20	20	20	20				
			МОН	1.4.1.1.2	% of screening programme conducted using mobile transport facilities	PP	10%	40%	70%	100%	100%	100%				
1.4.2 Improvement of transport facilities	1.4.2.1	Provide trasnport facilities to attend	МОН	1.4.2.1.1	No. of vahicles purchased	PP	0	4	3	2	2	2				
for Nephrologists and their team to attend		outreach clinics and cadaver				FP	0	40	30	20	20	20				
outreach clinics and the cadaver transplant programme (TH Anuradhapura, TH		transplant programme (TH Anuradhapura, TH Kandy, DGH		1.4.2.1.2	% of out reach clinics conducted	PP	20%	40%	60%	100%	100%	100%				
Kandy, DGH Polonnaruwa, PGH Badulla)		Anuradnapura, TH Kandy, DGH Polonnaruwa, PGH Badulla)		1.4.2.1.3	% of CKD patients treated in the	PP	20%	40%	60%	100%	100%	100%				
					% of cadaver kidneys obtained	PP	20%	40%	60%	100%	100%	100%				
1.5 Improve mobile lab services	1.5.1	Provide a mobile lab to NCP and other high risk areas	MOH	1.5.1.1	No. of mobile labs in NCP and other high risk areas	PP	1	1	2	2	2	2				
						FP	25	25	50	50	50	50				

				1.5.1.2	% of screening programme conducted by mobile lab	PP	0%	40%	60%	100%	100%	100%
				1.5.1.2	% of at risk population screened by mobile lab	PP	0%	40%	60%	100%	100%	100%
Total estimated expenditure for Strategic A	rea 1	·		•		FP	433	770	780	630	640	650
Strategic Area 2: Management of	patients											
2.1 Strengthening of management	2.1.1	Prepare criterion for management	МОН	2.1.1	Criterion prepared and distributed	PP	5%	25%	100%	100%	100%	100%
guidelines		guidelines				FP	10	5	10	10	10	10
2.2 Ensure access to identified essential	2.2.1	Provide essenbtial medication for the	МОН	2.2.1	% of institutions with essential	PP	70%	100%	100%	100%	100%	100%
drugs		hospitals in the endemic area.			drugs available for management of CKD/CKDu patients	FP	N/A	N/A	N/A	N/A	N/A	N/A
2.3.1. Improvement of dialysis facilities	2.3.1.1	Provide dialysis machines and	MOH	2.3.1.1.1	No. of institutions with dialysis	PP	9	14			19	
		required resources for dialysis units			facilities in CKDu afected areas	FP	100				200	
					No. of dialysis machines in CKDu	PP	110				220	
2.3.2. Establishment of renal units in PGH	2221	Establish renal units in PGH Badulla,	МОН	2.3.1.1.3		PP PP	50%	70%	90%	100%	100%	100%
Badulla, DGH Trincomalee, TH Batticaloa, TH Jaffna	2.3.2.1	DGH Trincomalee, TH Batticaloa, TH Jaffna, DGH Hambanthota	моп	2.3.2.1	renal units in CKDu afected areas	FP	50	150	300	450	600	600
2.3.3. Strengthen transplant facilities in	2.3.3.1	Strengthen transplant facilities in TH	МОН	2.3.3.1.1	No. of institutions with transplant	PP	3	3	3	4	5	5
TH Kandy, TH Karapaitiya, TH Anuradhapaura, TH Jaffna, TH Peradeniya		Kandy, TH Karapaitiya, TH Anuradhapaura, TH Jaffna, TH Peradeniya			facilities in CKD/CKDu affected areas	FP	0	0	600	1000	1000	1000
				2.3.3.1.2	% of kidney transplants conducted	PP	50%	60%	70%	80%	100%	100%
2.3.4. Strengthen Cadaver Transplant	2.3.4.1	Streamline Cadevar Transplant	МОН	2.2.4.1.1	% of cadevar transplants conducted	PP	0	30%	60%	90%	100%	100%
Programme		Programme Appointment of coordinator Cadevar	MOH			FP	N/A			N/A		N/A
	2.3.4.2			2.2.4.2.1		PP	0	40%	100%	100%	100%	
		Transplant Programme			for cadevar transplant programme	FP	N/A	N/A	N/A	N/A	N/A	N/A
2.3.5 Strengthening of laboratory facilities	2.3.5.1	Provide laboratory facilities for the	MOH	2.3.5.1	% of institutions with	PP	50%	70%	90%	100%	100%	100%
for CKD management in key affected areas		hospitals in the endemic area			adequatelaboratory equipment available	FP	150	50	75	100	100	100
2.3.6 Improvement of palliative care in TH	2.3.6.1	Provide facilities for palliative care in	MOH	2.3.6.1.1	-	PP	0	1	2	2	3	4
Anuradhapura, DGH Polonnaruwa, TH Kandy, PGH Badulla		TH Anuradhapura, DGH			care facilities	FP	0	30	60		90	
Kalidy, FOIT Badulla		Polonnaruwa, TH Kandy, PGH Badulla		2.3.6.1.2	% of patietns obtaining palliative care facilities	PP	50%	70%	90%	100%	100%	100%
2.3.7 Improving infrastructure of medical wards where CKD/CKDu patients are	2.3.7.1	Provide physical infrastructure facilities for medical wards	МОН	2.3.7.1	% of institutions with adequate physical infrastructure facilities in	PP	20%	50%	70%	100%	100%	100%
managed					medical wards of CKDu affected areas	FP	0	10	15	20	20	20

Total estimated expenditure for Strategic A	rea 2		-			FP	310	) 745	1460	1940	2020	2020
Strategic Area 3: Human resource	S											
3.1.1 Ensure availability of AMOH CKDP for screening, community empowerment & education, data management and assisting		Appointment of AMOH CKDP to all high high risk RDHS and MOH areas	МОН	3.1.1.1	% of RDHS/MOH with AMOH CKDP in needy districts	PP	60%	100%	100%	100%	100%	100%
in CKD clinics in all high risk areas						FP	N/A	N/A	N/A	N/A	N/A	N/A
3.1.2 Ensure adequate number of human resources for data management	3.1.2.1	Appointment of human resources for data management in all high high risk RDHS and MOH areas	МОН	3.1.2.1	% of RDHS/MOH with adequate I human resources for data	PP	0%	40%	80%	100%	100%	100%
					management in CKDu affected areas	FP	N/A	N/A	N/A	N/A	N/A	N/A
3.2.1 Ensure adequate number of MO Renal to all institutions with dialysis	3.2.1.1	Appointment of MO Renal to all institutions with dialysis facilities in	MOH	3.2.1.1	hospitals with dialysis facilities	PP FP	70%	0 100%	100% N/A	100% N/A	100% N/A	100% N/A
facilities in high risk areas 3.2.2 Ensure adequate number of nursing	3.2.2.1	high risk areas Appointment of nursing staff to all	МОН	3.2.2.1	No. of institutions with adequate	PP	70%		100%	100%	100%	
staff to all institutions in high risk areas	5.2.2.1	institutions in high risk areas		5.2.2.1	nursing staff in high risk areas		N/A	N/A	N/A	N/A	N/A	N/A
3.2.3 Ensure adequate number of MLT to	3.2.3.1	Appointment of MLT to all	МОН	3.2.3.1	No. of institutions with adequate	PP	70%	100%	100%	100%	100%	100%
all institutions in high risk areas		institutions in high risk areas			MLT in high risk areas	FP	N/A	N/A	N/A	N/A	N/A	N/A
3.2.4 Ensure adequate number of VPs to all institutions in high risk areas	3.2.4.1	Appointment of VPs to all institutions at the level of base hospitals and above in high risk areas	МОН	3.2.4.1	No. of institutions with adequate VPs in high risk areas	PP	70%		100%	100%	100%	100%
						FP	N/A	N/A	N/A	N/A	N/A	N/A
3.2.5 Ensure adequate number of dispensers/pharmacists to all institutions	3.2.5.1	<b>.1</b> Appointment of dispensers/pharmacists to all institutions in high risk areas	МОН	3.2.5.1	No. of institutions with adequate dispensers/pharmacists in high risk	PP	70%	100%	100%	100%	100%	100%
in high risk areas					areas	FP	N/A	N/A	N/A	N/A	N/A	N/A
3.2.6 Ensure adequate number of human resources for data management	3.2.6.1	Appointment of human resources for data management in all curative	МОН	3.2.6.1	No. of institutions with adequate human resources for data	PP	70%	100%	100%	100%	100%	100%
		institutions in high risk areas			management in CKDu affected areas	FP	N/A	N/A	N/A	N/A	N/A	N/A
3.3 Human resources needs to be assessed	3.3.1	Conducting assessment of human	MOH	3.3.1	1 1	PP	0%		60%	100%	100%	
and anlaysed	2.4.1	resources	MOL	2 4 1 1	resources	FP	(	0.2	0.5	0.5	0.5	
3.4 Development of expert resource group at Central, Provincial and District level for		Development of expert resource group at Central, Provincial and	МОН	3.4.1.1	No. of people in the expert resource group at central level	PP FP	N/A	) 10 N/A	10 N/A	10 N/A	10 N/A	10 N/A
continuing education for health and other sector staff		District level for continuing education for health and other sector	MOH	3.4.1.2	% of provinces having expert	PP	0%	100%	100%	100%	100%	100%
		staff			resource groups in CKDu affected provinces	FP	N/A	N/A	N/A	N/A	N/A	N/A
			МОН	3.4.1.3	No. of districts having expert	PP	0%	100%	100%	100%	100%	100%
					resource groups in CKDu affected districts	FP	N/A	N/A	N/A	N/A	N/A	N/A

3.5 Development of Continuous	3.5.1	1	МОН	3.5.1	% of provinces with CPD centres in	PP	0%	20%	50%	100%	100%	100%
Professional Development (CPD) centre for CKD/CKDu in Provinces		Professional Development (CPD) centre for CKD/CKDu in Provinces			CKDu affected areas	FP	0	2	5	10	10	10
3.6 Develop and implement training packages and manuals	3.6.1	Develop and implement training packages and manuals for	МОН	3.6.1.1	% of MOH/AMOH trained in CKD/CKDu screening guidelines	PP	100%	100%	100%	100%	100%	100%
		CKD/CKDu screening guidelines and procedures			and procedures in CKDu affected areas	FP	0.1	0.2	0.2	0.3	0.3	0.35
		Develop and implement training	MOH	3.6.1.2	% of renal MO trained in	PP	0%	100%	100%	100%	100%	100%
		packages and manuals for CKD/CKDu management			CKD/CKDu management in CKDu affected areas	FP	0	0.2	0.3	0.4	0.5	0.5
		Develop and implement training	MOH	3.6.1.3	8	PP	0%	100%	100%	100%	100%	100%
		packages and manuals for data management of CKD/CKDu patients			management of CKD/CKDu patients in CKDu affected areas	FP	0	0.2	0.2	0.3	0.3	0.35
		Develop and implement training	МОН	3.6.1.4	% MO trained in palliative care of	PP	0%	100%	100%	100%	100%	100%
		packages and manuals for palliative care of CKD/CKDu patients			CKD/CKDu patients in CKDu affected areas	FP	0	0.1	0.1	0.15	0.2	0.2
		Develop and implement training N packages and manuals for CKD/CKDu care givers	MOH	3.6.1.5	%care givers trained in care of	PP	0%	10%	25%	50%	80%	100%
					CKD/CKDu patients in CKDu affected areas	FP	0	0.5	0.7	1	1.5	2
3.7 Ensure opportunities for international	3.7.1	6 1	МОН	3.7.1	No. trained in abroad on	PP	0	4	8	10	10	10
training		for all the categories of staff in relevant areas			CKD/CKDu from CKDu affected areas	FP	0	2	4	6	6	6
Total estimated expenditure for Strategic A	Area 3		Į			FP	0.1	5.4	11	18.65	19.3	19.4
Strategic Area 4: Surveillance of	CKD/CI	XDu patients										
4.1 Establish sentinal sites in CKDu high	4.1.1	-	MOH	4.1.1.1	No. of sentinel sites established	PP	30	30	30	30	30	30
risk hospitals		risk hospitals				FP	10	10	10	10	10	10
			МОН	4.1.1.2	% of institutions sending information regularly	PP	50%	100%	100%	100%	100%	100%
	4.1.2	Identify new areas affected by	MOH	4.1.2.1	% of new areas identified	PP	100%	100%	100%	100%	100%	100%
		CKD/CKDu using the surveillance system		4.1.2.2	No. of MOH/DS areas with GN level data available	PP	25%	100%	100%	100%	100%	100%
4.2 Develop and implement a web based	4.2.1	Develop a web based information	MOH	4.2.1.1	No.of institutions with established	PP	0	15	30	30	30	30
information system		system			functional web based information system	FP	0	15	20	20	20	25
				4.2.1.2	% of institutions sending information regularly through web based system	PP	0	50%	100%	100%	100%	100%
4.3 GPS mapping of high prevalent CKDu areas to coordinate with other	4.3.1	Provide necessary equipments and facilities such as GPS, vehicles and	МОН	4.3.1.1	No. of Districts having GPS facilities for GPS mapping of	PP	20%	50%	100%	100%	100%	100%

determinants of CKDu		stationeries for the ground level officers			CKD/CKDu patients in affected areas	FP	2	6	9	3	3	3
				4.3.1.2	No. of Districts having adequate	PP	20%	50%	100%	100%	100%	100%
					transport facilities for screening nd follow up of CKDu patients	FP	50	100	150	50	50	50
	4.3.2	GPS mapping of CKDu areas to sgare information with other sectors to	MOH	4.3.2.1	No. of MOH /DS areas GPS mapping done	PP	10	15	20	25	30	35
		correlate determinants				FP	10	10	10	10	10	10
Total estimated expenditure for Strategic A	rea 4		•	ł	•	FP	72	141	199	93	93	98
Strategic Area 5: Community emp	owerme	ent										
5.1 Strengthen of facilities for	5.1.1	Train both field institutional health	MOH	5.1.1	% of relevant Health staff trained	PP	10%	50%	100%	100%	100%	100%
motivational interviews of individuals and		staff on motivational interviews				FP	0.5	1	2	2	2	2
families				5.1.2	% of motivational interviews conducted	PP	10%	50%	100%	100%	100%	100%
5.2 Establish community leader groups in every affected villages / GSN divisions to change the behaviors of the community	5.2.1	Establish community leader groups in every affected villages / GSN divisions/institutions to change the	MOA, MOH	5.2.1	% of community leader groups formed and active	PP	10%	25%	75%	100%	100%	100%
		behaviors of the community people				FP	1	1.5	2	2	2	2
	5.2.2	Establish a monitoring system for		5.2.2	% of CKDU/CKD patients taking	PP	10%	25%	75%	100%	100%	100%
		community empowerment	MOH		treatment regularly	FP	1	1.5	2	2	2	2
	5.2.3	Commencing of a mass scale	MOA,	5.2.3.1	% of prgrammes conducted	PP	70%	100%	100%	100%	100%	100%
	education programme for specific Material definition of the specific data and the specif	MOH			FP	5	10	10	10	10	10	
	farmers, institutional staff to inclutate positive behaviours			5.2.3.2	% of CKD/CKDu patients visiting the renal clinics regularly	PP	60%	80%	100%	100%	100%	100%
				5.2.3.3	% with proper use of agrochamicals	PP	40%	60%	80%	100%	100%	100%
5.3 Strengthening of behavioural changes	5.3.1	Train both field institutional health staff on education and counseling	MOH	53.1	% of relevant Health staff trained	PP	20%	50%	100%	100%	100%	100%
		suit on education and counsering				FP	3	5	2	1	0.5	0.5
	5.3.2	Develop skills of health and other staff how to empower the groups		53.2	% of health staff trained in empowering communities	PP	20%	50%	100%	100%	100%	100%
		suir now to empower the groups			empowering communities	FP	3	5	2	1	0.5	0.5
	5.3.3	Developent of communication	МОН	53.3	No. of Health Learning Materials	PP	1	5	3	2	2	2
		materials			developed	FP	1	10	5	3	3	3
	5.3.4	Conduct a media campaign	MOH	53.4	No. of campaigns conducted	PP	0	3	5	5	5	5
						FP	0	50	200	200	200	200
Total estimated expenditure for Strategic A	rea 5	1	I		1	FP	14.5	84	225	221	220	220

Strategic Area 6: Intersectoral co	ollaborat	ion										
6.1 Establishment of Renal Disease Prevention and Research Authority	6.1.1	Establishment of Renal Disease Prevention and Research Authority	МОН	6.1.1.1	% of meetings held by Renal Disease Prevention and Research Authority for CKD/CKDu	PP FP	0	50%	100%	100%	100% 10	100%
				6.1.1.2	% of inter-ministerial meetings conducted	PP	0	50%	100%	100%	100%	100%
6.2 Strengthening of inter-sectoral committees	6.2.1	Conduct Intersectoral meetings at Divisional, District, Provincial and	МОН	6.2.1.1	% of meetings held by Provincial level coordinating committees	PP FP	0%	25% 1	75%	100%	100%	100%
		Central levels regularly	MOH	6.2.1.2	% of meetings held by District level P		0%	25%	75%	100%	100%	100%
			MOH	MOH 6.2.1.3	<ul><li>coordinating committees</li><li>% of meetings held by Divisional</li></ul>	FP PP	0%	1 25%	5 75%	5 100%	5 100%	100%
					level coordinating committees	FP	0	1	5	5	5	4
	6.2.2	Strengthening of Community Support groups	MOH	6.2.2	No of meetings held by Community Support groups	FP	0%		75% 5	100% 5	100% 5	100%
Total estimated expenditure for Strategic	Area 6					FP	0	9	30	30	30	30
Strategic Area 7: Strengthen evid	lence ba	sed management										
7.1 Identification of priority Operational research areas	7.1.1	Operational research to identify better marker for early diagnosis	MOH	7.1.1.1	% of completion of the research	PP FP	0	10% 10	40% 20	60% 25	80% 30	100%
				7.1.1.2	No. of researches published in peer reviewed jounrals	PP	0	0	0	0	1	2
	7.1.2	marker for early diagnosis Image: marker for early diagnosis Image: marker for early diagnosis FP 0 10 20 20   7.1.1.2 No. of researches published in peer reviewed journals PP 0	MOH	7.1.2.1	% of completion of the research		-			60% 25	80% 30	100%
			0	1	2							
	7.1.3	Development of resource group for research	MOH	7.1.3	% of research groups formed	PP	0%			100%	100%	100%
	7.1.4	Development and submission of	МОН	7.1.4.1	% of abstracts published	FP PP	0			1 50%	1 70%	100%
		abstracts and journal articles on CKDu research		7.1.4.2	% of journal articles published	FP PP	N/A	N/A	N/A 10%	N/A 40%	N/A 60%	N/A 100%
7.2 Establishment of a fully functional	7.2.1	Establish a research centre at TH	МОН	7.2.1.1	% of construction of research centre		0	0	25%	40% 70%	100%	100%
research centre at TH Kandy/TH Peradeniya		Kandy			completed at TH Kandy/TH Peradeniya	FP	0	0	000	1000	1000	(
				7.2.1.27.2.1.3	<ul><li>% of researches conducted</li><li>% of researches published in high</li></ul>	PP PP	0	0% 0%		60% 60%	80% 80%	100% 100%
7.3 Strengthening of capacity of MRI to undertake analysis of heavy metals, other	7.3.1	Strenthening of capcacity of MRI to undertake anallysis of heavy metals,	МОН	7.3.1.1	<ul><li>impact journals</li><li>% of development completed at MRI</li></ul>	PP	0	0	25%	70%	100%	100%

nephrotoxic substances and other contaminants injurious to health such as		other nephrotoxic substances and other contaminents injurious to health				FP	0	0	600	1000	1000	0
DCD, Melamine etc.		such as DCD, Melamine etc.		7.3.1.2	% relevant samples investigated	PP	0	0	20%	50%	80%	100%
7.4 Strengthening of toxicology facilities	7.4.1	Strengthen of toxicology facilities	MOH	7.4.1	% of institutions with essential	PP	10%	25%	50%	100%	100%	100%
					toxicology facilities improved	FP	50	60	80	80	100	100
Total estimated expenditure for Strategic A	irea 7	•			•	FP	50	80.5	1321	2131	2161	171
Strategic Area 8: Welfare of CKD	/CKDu p	patients										
8.1 Provision of financial assistance to	8.1.1	Provision of financial assistance to	MOH	8.1.1	% of families with financial	PP	0	40%	80%	100%	100%	100%
CKD/CKDu patients		CKD/CKDu patients			assistants	FP	N/A	N/A	N/A	N/A	N/A	N/A
8.2 Provision of temporary lodging	8.2.1	Provision of temporary lodging	MOH	8.2.1.1	% of CKD/CKDu patients obtaining	PP	0	40%	80%	100%	100%	100%
facilities with meals for patients and their bystande		facilities with meals for patients and their bystande			temporary lodging facilities	FP	0	10	15	20	20	20
	8.2.2	Facilitate transport from the peirpheral hospitals to centres	МОН	8.2.1.2	% of CKD/CKDu patients obtaining transport facilities	PP	0	40%	80%	100%	100%	100%
						FP	0	0.5	1	1.5	1.5	1.5
8.3 Establishment of social service units in	8.3.1	Establishment of social service units	MOH	8.3.1.1	% of institutions with established	PP	0	40%	80%	100%	100%	100%
Teaching Hospitals and Base Hospitals in		in Teaching Hospitals and Base			social service units	FP	0	1	2	2.5	2.5	2.5
CKD/CKDu affected areas	Hospitals in CKD/CKDu affected areas	МОН	8.3.1.2	% of patients obtaioning assistance from social service units	PP	0	40%	80%	100%	100%	100%	
Total estimated expenditure for Strategic A	rea 8					FP	0	11.5	18	24	24	24
							880					
Grand Total for CKDu Strategic Plan								1846	4044	5088	5207	3232