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SUWASIRIPAYA

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දිනය) 2026.01.12
திகதி)
Date)

සෞඛ්‍ය හා ජනමාධ්‍ය අමාත්‍යාංශය சுகாதார மற்றும் வெகுஜன ஊடக அமைச்சு Ministry of Health & Mass Media

පොදු චක්‍රලේඛ ලිපි අංක: 02-16/2026

සියලුම පළාත් ප්‍රධාන ලේකම්වරුන්
සියලුම පළාත් සෞඛ්‍ය ලේකම්වරුන්
නියෝජ්‍ය අධ්‍යක්ෂ ජනරාල්, ශ්‍රී ලංකා ජාතික රෝහල
අධ්‍යක්ෂ, ජාතික රෝහල - මහනුවර / අධ්‍යක්ෂ, ජාතික රෝහල - ගාල්ල
සියලුම පළාත් සෞඛ්‍ය සේවා අධ්‍යක්ෂවරුන්
සියලුම ප්‍රාදේශීය සෞඛ්‍ය සේවා අධ්‍යක්ෂවරුන්
සියලුම ශික්ෂණ රෝහල්, විශේෂිත රෝහල් සහ දිස්ත්‍රික් මහ රෝහල් අධ්‍යක්ෂවරුන්
මූලික රෝහල් වෛද්‍ය අධිකාරීවරුන්

රෝහල් කළමනාකරණ කමිටු රැස්වීම් සඳහා සම්මත “රෝහල් පැතිකඩ සහ කාර්ය සාධනය පිළිබඳ සාරාංශය” නමැති ආකෘති පත්‍රය ක්‍රියාත්මක කිරීම

ඒකාකාර සහ ප්‍රමිතිගත වාර්තාකරණ ආකෘති පත්‍රයක් නොමැතිවීම හේතුවෙන් රෝහල් කළමනාකරණ කමිටු (HMC) රැස්වීම්වලදී, විශේෂයෙන් සෞඛ්‍ය හා ජනමාධ්‍ය අමාත්‍යාංශයේ නියෝජ්‍ය අධ්‍යක්ෂ ජනරාල්වරුන් සහභාගිවන රුස්වීම්වලදී කරන ඉදිරිපත් කිරීම්වල (Presentations) අන්තර්ගතය, ව්‍යුහය සහ විස්තර මට්ටමින් සැලකිය යුතු ලෙස වෙනස්වන බව නිරීක්ෂණය වී ඇත.

02. මෙම ගැටළුව විසඳීමට සහ සාක්ෂි මත පදනම් වූ තීරණ ගැනීම, ආයතනික කාර්යය සාධනය සහ අමාත්‍යාංශ මට්ටමින් ඵලදායී අධීක්ෂණය ශක්තිමත් කිරීමට ගරු සෞඛ්‍ය හා ජනමාධ්‍ය අමාත්‍යවරයාගේ උපදෙස්වලට අනුකූලව සැලසුම් අධ්‍යක්ෂ අංශය විසින් සම්මත “රෝහල් පැතිකඩ සහ කාර්ය සාධනය පිළිබඳ සාරාංශය” නැමැති ආකෘති පත්‍රය සකස් කරන ලදී.

03. මෙම ආකෘති පත්‍රය තෝරාගත් ආයතනවල නියමු පරීක්ෂාවට ලක්කර ඇති අතර ප්‍රායෝගික අදාලත්වය මත පදනම්ව වැඩිදියුණු කර ඇත. අවසන් කරන ලද ආකෘති පත්‍රයේ පහත සඳහන් ප්‍රධාන තොරතුරු පුළුල් ලෙස අන්තර්ගත කරයි.

- ආයතනික පැතිකඩ සහ පාලනය
- පවතින මානව සම්පත් පිළිබඳව
- සේවා සැපයීම සහ කාර්යසාධන දර්ශක
- රෝග නිශ්චය, රසායනාගාර, ඖෂධ හා ශල්‍ය සේවා

- මූල්‍ය භාවිතය සහ ක්‍රියාත්මක වෙමින් පවතින ව්‍යාපෘති
- රෝගීන්ගේ තෘප්තිය, හඳුනාගත් අවදානම් සහ ආයතනික අභියෝග

04. ඒ අනුව, මූලික රෝහල් සහ ඉන් ඉහළ සියළුම රෝහල්වල ආයතන ප්‍රධානීන්ට පහත පරිදි ක්‍රියා කරන ලෙස උපදෙස් දෙනු ලැබේ.

- මෙතැන් සිට පවත්වනු ලබන සියලුම රෝහල් කමිටු රැස්වීම් සඳහා මෙයට අමුණා ඇති “රෝහල් පැතිකඩ සහ කාර්ය සාධනය පිළිබඳ සාරාංශය” ආකෘති පත්‍රය භාවිතා කිරීම; සහ
- සෑම කළමනාකරණ කමිටු රැස්වීමක් සඳහාම මෙම ආකෘති පත්‍රය නිවැරදිව සම්පූර්ණ කර ඉදිරිපත් කර සහ සාකච්ඡා කර ඇති බවට සහතික වීම.

05. ඊට අමතරව, “රෝහල් පැතිකඩ සහ කාර්ය සාධනය පිළිබඳ සාරාංශය” ආකෘති පත්‍රයේ මෘදු පිටපත කාර්යාලයීය ප්‍රයෝජනය සඳහා සෞඛ්‍ය හා ජනමාධ්‍ය අමාත්‍යාංශයේ සැලසුම් අධ්‍යක්ෂ අංශය මගින් ලබාගත හැක. තවද ආයතන ප්‍රධානියා විසින් සහතික කරන ලද එම ආකෘති පත්‍රයේ නිසි ලෙස සම්පූර්ණ කරන ලද පිටපතක් එක් එක් රෝහල් කළමනාකරණ කමිටු රැස්වීමෙන් පසුව සමාලෝචනය, මහපෙන්වීම සහ වාර්තා කිරීමේ අරමුණු සඳහා අදාළ පරිපාලන දාමය හරහා ආයතනය / පළාත භාර, සෞඛ්‍ය හා ජනමාධ්‍ය අමාත්‍යාංශයේ අදාළ නියෝජ්‍ය අධ්‍යක්ෂ ජනරාල් වෙත ඉදිරිපත් කළ යුතුය.

06. ආකෘති පත්‍රයේ අඩංගු තොරතුරුවල නිරවද්‍යතාව, සම්පූර්ණත්වය සහ නිසි වේලාවට ඉදිරිපත් කිරීම සඳහා වූ වගකීම ආයතන ප්‍රධානියා සතුවේ. මෙම වක්‍රලේඛ ලිපිය වහාම ක්‍රියාත්මක වන අතර නැවත දැනුම් දෙන තෙක් අදාළ වේ.

විශේෂඥ වෛද්‍ය අනිල් ජාසිංහ
ලේකම්

විශේෂඥ වෛද්‍ය අනිල් ජාසිංහ
ලේකම්
සෞඛ්‍ය හා ජනමාධ්‍ය අමාත්‍යාංශය
“සුවසිරිපාය”
385, පූජ්‍ය බද්දේගම විමලවංශ හිමි මාවත,
කොළඹ 10.

පිටපත්:

- | | |
|---|--|
| 1. සියලුම අතිරේක ලේකම්වරුන් | - ඔබගේ කාරුණික දැනගැනීම සඳහා |
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உமது இல)
Your No.)
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திகதி) 27.01.2026
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சுகாதார மற்றும் வெகுஜன ஊடக அமைச்சு
Ministry of Health & Mass Media

பொது சுற்றறிக்கை கடித எண்: 02-16/2026

அனைத்து மாகாண சபைகளின் தலைமைச் செயலாளர்கள்
அனைத்து மாகாண சுகாதார செயலாளர்கள்
இலங்கை தேசிய மருத்துவமனையின் துணைப் பணிப்பாளர் நாயகம்
தேசிய மருத்துவமனை இயக்குநர் - கண்டி / தேசிய மருத்துவமனை இயக்குநர் - காலி,
அனைத்து மாகாண சுகாதார சேவைகள் பணிப்பாளர்கள்
அனைத்து பிராந்திய சுகாதார சேவைகள் பணிப்பாளர்கள்
அனைத்து போதனா மருத்துவமனைகள், சிறப்பு மருத்துவமனைகள் மற்றும் மாவட்ட
பொது மருத்துவமனைகளின் இயக்குநர்கள்
அனைத்து ஆதார வைத்தியசாலைகளின் வைத்திய அத்தியட்சகர்கள்

**மருத்துவமனை மேலாண்மைக் குழு கூட்டங்களுக்கான நிலையான
"மருத்துவமனை சுயவிவரம் மற்றும் செயல்திறன் சுருக்கம்" வடிவமைப்பை
செயல்படுத்துதல்**

மருத்துவமனை மேலாண்மைக் குழு (HMC) கூட்டங்களின் போது, குறிப்பாக சுகாதாரம் மற்றும் வெகுஜன ஊடக அமைச்சகத்தின் துணை இயக்குநர் ஜெனரல்கள் கலந்து கொள்ளும் விளக்கக்காட்சிகள், சீரான மற்றும் தரப்படுத்தப்பட்ட அறிக்கையிடல் வடிவம் இல்லாததால் உள்ளடக்கம், கட்டமைப்பு மற்றும் விவரங்களின் அளவில் கணிசமாக வேறுபடுகின்றன என்பது அவதானிக்கப்பட்டுள்ளது.

02. இந்தப் பிரச்சினையைத் தீர்க்கவும், ஆதாரங்களை அடிப்படையாகக் கொண்ட தீர்மானங்களை ஊக்குவிப்பதற்காகவும், நிறுவன செயல்திறனைக் கண்காணித்தல் மற்றும் அமைச்சக மட்டத்தில் பயனுள்ள மேற்பார்வை ஆகியவற்றை வலுப்படுத்தவும், கௌரவ சுகாதார மற்றும் வெகுஜன ஊடக அமைச்சரின் அறிவுறுத்தல்களின்படி, திட்டமிடல் இயக்குநரகத்தால் தரப்படுத்தப்பட்ட "மருத்துவமனை சுயவிவரம் மற்றும் செயல்திறன் சுருக்கம்" வடிவம் உருவாக்கப்பட்டுள்ளது.

03. இந்த வடிவம் தேர்ந்தெடுக்கப்பட்ட நிறுவனங்களில் முன்னோடியாக சோதிக்கப்பட்டு, அதன் நடைமுறை பயன்பாட்டை கருத்தில் கொண்டு மேம்படுத்தப்பட்டுள்ளது. இறுதி வடிவமைப்பு, கீழ்க்கண்ட முக்கிய தகவல்களை முழுமையாக உள்ளடக்கியதாக அமைந்துள்ளது:

- நிறுவன சுயவிவரம் மற்றும் நிர்வாகம்
- மனித வளம் கிடைக்கும் தன்மை

- சேவை வழங்கல் மற்றும் செயல்திறன் குறிகாட்டிகள்
- நோய் கண்டறிதல், ஆய்வகம், மருந்தகம் மற்றும் அறுவை சிகிச்சை சேவைகள்
- நிதி பயன்பாடு மற்றும் தற்போதைய திட்டங்கள்
- நோயாளி திருப்தி, அடையாளம் காணப்பட்ட அபாயங்கள் மற்றும் நிறுவன சவால்கள்

04. இதனடிப்படையில், ஆதார மருத்துவமனைகள் மற்றும் அதற்கு மேற்பட்ட அனைத்து நிறுவனங்களின் தலைவர்கள் கீழ்க்கண்டவாறு பணிப்புரியப்படுகின்றனர்:

- இனிமேல் நடத்தப்படும் அனைத்து மருத்துவமனை மேலாண்மைக் குழு கூட்டங்களுக்கும் இணைக்கப்பட்டுள்ள "மருத்துவமனை சுயவிவரம் மற்றும் செயல்திறன் சுருக்கம்" வடிவமைப்பைப் பயன்படுத்தவும்; மற்றும்
- ஒவ்வொரு நிர்வாகக் குழு கூட்டத்தின் போதும் அந்த வடிவம் துல்லியமாக பூர்த்தி செய்யப்பட்டு, வழங்கப்பட்டு, கலந்துரையாடப்படுவதை உறுதிசெய்யவும்.

05. மேலும், "மருத்துவமனை விவரக்குறிப்பு மற்றும் செயல்திறன் சுருக்கம்" படிவத்தின் மென் நகலை சுகாதார அமைச்சின் திட்டமிடல் இயக்குநரகத்திலிருந்து அதிகாரப்பூர்வ பயன்பாட்டிற்காகப் பெறலாம். மேலும், நிறுவனத் தலைவரால் சான்றளிக்கப்பட்ட மேற்கூறிய படிவத்தின் முறையாகப் பூர்த்தி செய்யப்பட்ட நகலை, ஒவ்வொரு மருத்துவமனை மேலாண்மைக் குழுக் கூட்டத்திற்குப் பிறகும், மதிப்பாய்வு, வழிகாட்டுதல் மற்றும் பதிவு நோக்கங்களுக்காக, நிறுவனம்/மாகாணத்திற்குப் பொறுப்பான சுகாதார மற்றும் ஊடக அமைச்சகத்தின் தொடர்புடைய பிரதி பணிப்பாளர் நாயகத்திற்கு சமர்ப்பிக்க வேண்டும்.

06. இந்த வடிவத்தில் உள்ள தகவல்களின் துல்லியம், முழுமை மற்றும் காலத்துக்குள் சமர்ப்பித்தல் ஆகியவற்றிற்கான முழுப் பொறுப்பும் நிறுவனத் தலைவரையே சாரும். இச் சுற்றறிக்கை உடனடியாக நடைமுறைக்கு வரும் மற்றும் மேலதிக அறிவிப்பு வரை செல்லுபடியாகும்.


டாக்டர் அனில் ஜாசிங்கே
செயலாளர்

Dr. Anil Jasinghe
Secretary
Ministry of Health & Mass Media
"Suwasiripaya"
385, Rev. Baddegama Wimalawansa Thero Mawatha,
Colombo 10

பிரதி:

- | | |
|--------------------------------------|---|
| 1. அனைத்து மேலதிக செயலாளர்களும் | - மேலதிக கவனத்திற்காக |
| 2. சுகாதார சேவைகள் பணிப்பாளர் நாயகம் | - மேலதிக கவனத்திற்காக |
| 3. அனைத்து பிரதி பணிப்பாளர் நாயகம் | - மேலதிக நடவடிக்கை மற்றும் கவனத்திற்காக |

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திகதி)
Date) 22.01.2026

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சுகாதார மற்றும் வெகுஜன ஊடக அமைச்சு
Ministry of Health & Mass Media

General Circular Letter No.: 02-16/2026

All Chief Secretaries of Provinces
All Provincial Health Secretaries
Deputy Director General, National Hospital of Sri Lanka
Director, National Hospital – Kandy / Director, National Hospital - Galle,
All Provincial Directors of Health Services
All Regional Directors of Health Services
All Directors of Teaching Hospitals, Specialised Hospitals and District General Hospitals
Medical Superintendents of Base Hospitals

Implementation of the Standard “Summary of Hospital Profile and Performance” Format for Hospital Management Committee Meetings

It has been observed that presentations made during Hospital Management Committee (HMC) Meetings, particularly those attended by Deputy Director Generals of the Ministry of Health and Mass Media, vary considerably in content, structure, and level of details
, due to the absence of a uniform and standardised reporting format.

02. To address this issue and to strengthen evidence-based decision-making, monitoring of institutional performance, and effective oversight at the Ministry level, a standardised “Summary of Hospital Profile and Performance” format has been developed by the Directorate of Planning, in accordance with the instructions of the Hon. Minister of Health and Mass Media.

03. This format has been pilot-tested at selected institutions and refined based on practical applicability. The finalised template comprehensively captures key information related to:

- Institutional profile and governance
- Human resource availability
- Service delivery and performance indicators
- Diagnostic, laboratory, pharmacy, and surgical services
- Financial utilisation and ongoing projects
- Patient satisfaction, identified risks, and institutional challenges

04. Accordingly, all Heads of Institutions of Base Hospitals and above are hereby instructed to:
- Utilise the attached “Summary of Hospital Profile and Performance” format for all Hospital Management Committee Meetings conducted henceforth; and
 - Ensure that the template is accurately completed, presented, and discussed during each Management Committee Meeting.
05. In addition, the soft copy of the “Summary of Hospital Profile and Performance” format may be obtained from the Directorate of Planning, Ministry of Health, for official use. Furthermore, a duly completed copy of the said format, certified by the Head of the Institution, shall be submitted to the relevant Deputy Director General of the Ministry of Health & Mass Media in charge of the institution/province, following each Hospital Management Committee Meeting, through the relevant administrative channel, for review, guidance, and record purposes.
06. The responsibility for the accuracy, completeness, and timely submission of the information contained in the format rests with the Head of the Institution. This Circular Letter shall come into effect immediately and remain applicable until further notice.


Dr. Anil Jasinghe
Secretary

Dr. Anil Jasinghe
Secretary
Ministry of Health & Mass Media
"Suwasiripaya"
385, Rev. Baddegama Wimalawansa Thero Mawatha,
Colombo 10

Cc:

- | | |
|--|------------------------|
| 1. All Additional Secretaries | - F.Y.I. Please |
| 2. Director General of Health Services | - F.Y.I. Please |
| 3. All Deputy Director Generals | - F.Y.I. & N.A. Please |

Summary of Hospital Profile and Performance

1. General Information

Hospital Type	NH	Specialized	TH	DGH	BH	
Catchment area	Province:		District:		Catchment Population:	
Availability of permanent Head of the Institution	Yes			No		
Availability of the Hospital organogram	Yes			No		
Availability of approved Hospital master plan (Based on General circular no – 01-35-2016, on 17/6/2016; not only building plan)	Yes			No		
Availability of a Disaster Preparedness Plan	Yes	No	If yes, date of the last Drill:			
Availability of Environmental Protection License (EPL)	Yes	No	Remarks:			
Availability of Scheduled Waste Management License (SWML)	Yes	No	Remarks:			
Total number of approved carder (All categories)						
Total number of In-position (All categories)						
Percentage of vacant positions (All categories)						
Availability of the Hospital Management Committee	Yes	No	If yes, last date of the meeting:			
Availability of the Hospital Development Committee	Yes	No	If yes, last date of the meeting:			
Availability of the Hospital Drug Therapeutic Committee	Yes	No	If yes, last date of the meeting:			
Availability of the Hospital Infection Prevention and Control Committee	Yes	No	If yes, last date of the meeting:			
Availability of the Antimicrobial Stewardship Programme	Yes	No	If yes, last date of the meeting:			
Availability of the Security Committee	Yes	No	If yes, last date of the meeting:			
Availability of the Hospital Housing Committee	Yes	No	If yes, last date of the meeting:			
Total number of vehicles available in the institution?	Number of vehicles in running condition?		Number of non-running vehicles not initiated with repairs?		Number of vehicles under repair currently?	
Total Financial Allocation for the year (Capital Budget) (LKR)		Physical progress %	Financial Progress %	Any specific reason for underutilization:		
Expenditure on local purchase of drugs during the Last quarter (Amount, LKR)				Remarks & Reason:		

Availability of <i>disability access in the hospital</i>	Yes	No	Remarks:			
Availability of functional <i>disabled toilets</i> and numbers	OPD / Clinics	Male	Yes	No	If yes, number:	
		Female	Yes	No	If yes, number:	
	Wards	Male	Yes	No	If yes, number:	
		Female	Yes	No	If yes, number:	
Availability of staff quarters	Category	Number	No. of unused quarters	Any requirements/challenges		
Availability of paying wards	Yes	No	If yes, number of beds:		Bed Occupancy Rate of the paying ward during the last quarter:	
Availability of security services	Yes	No				
Availability of the Complaints box and the number of boxes	Yes	No	If yes, number:			
Hospital diet and supply of food	Yes	No	Challenges:			

2. Cadre Summary

Approved and in-position cadre summary of major skilled categories

[illegible]

3. Hospital Performance

No. of OPD attendance	2023:	2024:	2025 Q1:	2025 Q2:	2025 Q3:	2025 Q4:
No. of Inward patients	2023:	2024:	2025 Q1:	2025 Q2:	2025 Q3:	2025 Q4:
No. of beds (<i>Excluding examination beds & ICU beds</i>)			Bed Occupancy Rate			
How many wards had floor patients during the last month	Ward category	Yes	No	Reason		
	Medical					
	Surgical					
	Obs & Gyn					
	Paediatrics					
	Other					
Availability of bed management plan	Yes			No		
Number of ICU beds			Number of ICU bed occupancy rate			
Availability of ETU/A & E	Yes	No	Availability of PCU		Yes	No
Availability of the Triage area at OPD/ ETU	Yes	No	Remarks:			

4. Laboratory Services

Essential laboratory equipment is available (According to the general circular NO 2- 118/2024 On12/09/2024; it shows tests to be done at the different categories of hospital level. Equipment to be identified based on the tests)	Yes	No	If not, Reason:			
If available, essential laboratory equipment is functioning	Yes	No	If not, Reason:			
Equipment calibration & servicing logs maintained	Yes	No	Remarks:			
Power backup and water supply are functional	Yes	No	Remarks:			
Average waiting time for Laboratory testing (<u>Minutes</u>)	Routine testing:		Special testing:		Remarks:	
Number of tests performed outside the hospital that should be conducted within the hospital (During the last quarter)	Name	No		Remarks		

(According to the general circular NO 2- 118/2024 On12/09/2024)			
Any other matters relevant to the laboratory services			

5. Other Diagnostic Services

Availability of Essential Diagnostic equipment is (USS, X-ray, etc.)	Yes	No	If not, Reason:	
If available, essential Diagnostic equipment is functional (USS, X-ray, etc.)	Yes	No	If not, Reason:	
Equipment calibration & service maintained	Yes	No	Remarks:	
Number of tests performed outside the hospital that should be conducted within the hospital (During last quarter)	Name		No	Remarks
Any other matters relevant to the Diagnostic services				

6. Pharmacy & Supply Chain

Percentage of essential drug availability during the last quarter		Remarks for non-availability:	
Non-availability of other drugs during last quarter	Name		How many days

7. Operation Theatre Facilities and Surgical Procedures

Number of functioning operation theatres			Remarks:
Availability of theatre facilities for all surgical specialities	Yes	No	Remarks:
Average waiting time (weeks) for routine surgeries (Cataract, Hernia, etc.)			
Availability of Day surgeries and the type of surgeries	Yes	No	Remarks:

Updated maintenance of theatre equipment	Yes	No	Remarks:
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8. Maternity Care Services

Number of labour rooms available		Number of <u>non-functional</u> labour rooms		If <u>non-functional labour rooms</u> are there, the reasons:
Number of all deliveries in the last quarter				
No. of LSCS		LSCS Rate		Remarks:

9. Patient Satisfaction

Patient satisfaction surveys conducted during the last quarter (Including the waiting time satisfaction)	Number:	Results:	Remarks:
Complaint resolution rate			Remarks:

10. Ongoing Projects

Name of the Project	Source of Fund	Allocation (LKR)	Physical progress %	Financial progress %

11. Identified Risks

(Any identified risks in the hospital, such as elephant attacks, floods, landslides, infrastructural problems, etc.)

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12. Summary

Strengths Identified

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4.
5.

Key Challenges

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3.
4.
5.

Recommendations

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Certified by the Head of the Institution

Name:

Date:

Signature:

Official Stamp: