2024 ANNUAL REPORT

SRI LANKA MEDICAL COUNCIL

SRI LANKA MEDICAL COUNCIL

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SRI LANKA MEDICAL COUNCIL

(SLMC)

VISION

A health system in which the patients are treated and cared for by competent, humane, ethical, and safe healthcare professionals.

MISSION

To protect, promote, and maintain the health and safety of the public by setting, maintaining, and raising standards of education and
practice of healthcare across the country.

FUNCTIONS OF THE SLMC

- Develop regulatory practices and systems that strive for best practices and contribute to the provision of safe and effective healthcare by healthcare professionals.

- Develop tools to achieve an excellent outcome-oriented healthcare professional education system recognized globally.

- Guarantee standards by transparent accreditation of study courses in Sri Lanka and overseas.

- Maintain discipline of healthcare personnel.

- Give fair hearings opportunities in all disciplinary inquiries maintaining principles of natural justice.

- Registration and certification of healthcare professionals and assess, validate, and verify competencies of healthcare professionals.

- Collect, manage, and disseminate information.

- Respond to the needs of healthcare professionals and stakeholders.

- Act to protect the rights and safety of citizens who use healthcare facilities.

- Maintain a paperless, environment-friendly, and efficient administration.

Message from the President

It is with great pride and a deep sense of responsibility that I present this message on behalf of the Sri Lanka Medical Council (SLMC) as we conclude a year marked by significant regulatory, educational, and technological advancements. The year 2024 was one of strategic transformation, laying the foundation for a more responsive and forward-thinking regulatory system in Sri Lanka's healthcare landscape.

One of the most pivotal undertakings during the year was the development of the SLMC Strategic Plan 2025–2029. This comprehensive plan—rooted in stakeholder consultations, data-driven analysis, and foresight—sets the direction for our next phase of institutional growth. It focuses on strengthening regulatory oversight, embracing digital innovation, reinforcing ethical standards, and enhancing collaboration with healthcare professionals and institutions.

Among our major accomplishments was the successful rollout of the Online Renewal Registration System for medical and dental practitioners. This digital initiative has significantly improved accessibility and efficiency, allowing healthcare professionals to renew their registration with ease and transparency, while aligning with our broader vision of a digitally enabled regulatory environment.

In 2024, we also made great strides in modernizing the legislative framework that underpins medical regulation in Sri Lanka. The drafting of a new Medical Act has been a landmark achievement. This new legislation aims to align medical regulation with global best practices by introducing streamlined licensing, strengthened accountability, and improved patient safety measures. Alongside this, the enactment of the Medical (Amendment) Acts No. 46 and No. 47 of 2024 has enhanced the registration of foreign-qualified practitioners and the recognition of overseas medical schools, ensuring consistency and rigor in medical standards.

Our governance practices also saw important developments, with the establishment of an Audit Committee to promote financial transparency and compliance with national regulatory requirements. Further, we established several new committees—including the Revalidation Committee, Medical and Dental Education Committee, Ethics Committee, and the Cross-Border Telemedicine Sub-Committee—each designed to support continuous professional development, strengthen ethical medical practice, and address emerging issues in modern healthcare delivery.

Throughout these initiatives, our focus has remained steadfast: to uphold the trust of the public by ensuring that those who practice medicine and dentistry in Sri Lanka meet the highest standards of competence, professionalism, and ethics.

As we prepare to mark the centenary of the Sri Lanka Medical Council in 2025, we are reminded of our rich legacy of protecting the health of the people of Sri Lanka through sound regulation and ethical leadership. Our centenary will be a time to reflect, celebrate, and recommit to our mission in the years ahead.

On behalf of the Council, I extend my deepest appreciation to our members, staff, and stakeholders for their tireless efforts and contributions. Together, we continue to shape a healthcare system worthy of the people it serves.

Prof. Vajira H. W. Dissanayake
President
Sri Lanka Medical Council

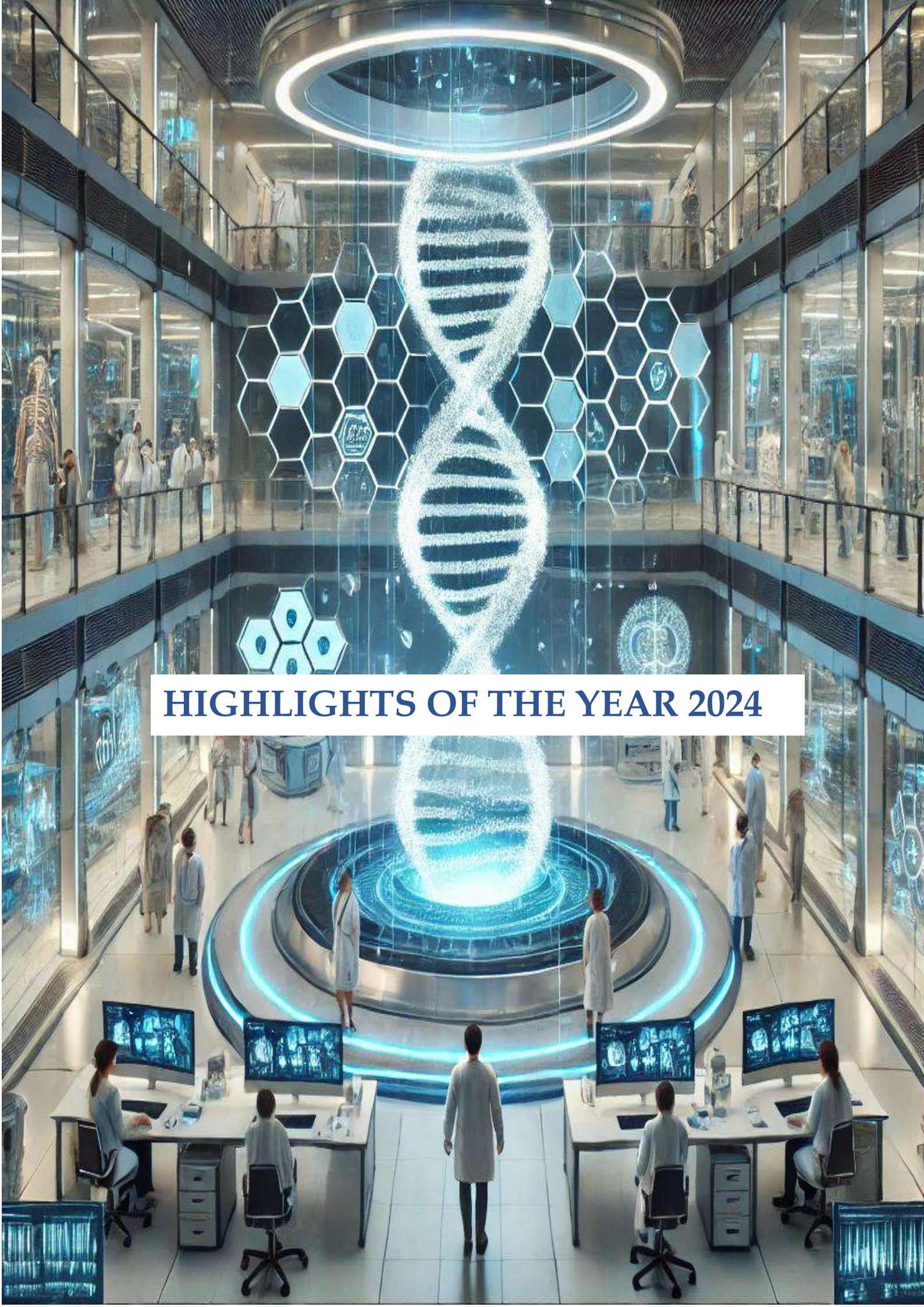
Message from the Registrar

It is with great pleasure and pride that I present this message for the 2024 Annual Report of the Sri Lanka Medical Council, marking a year of significant progress in advancing medical regulation and upholding professional standards. Following the determination by the Hon. Attorney-General in 2023 that the SLMC is a state-owned regulatory authority, the Council made further strides in aligning its operations with government procedures as part of a structured transition process.

Key achievements during the year included the development of the SLMC Strategic Plan 2025–2029, the drafting of the New Medical Act, and the launch of the Online Renewal of Registration System. These initiatives are expected to significantly enhance the Council's regulatory, administrative, and operational efficiency. Moreover, they will strengthen the Council's capacity to address both longstanding and emerging challenges in the context of rapid technological advancements, evolving global healthcare standards, and ongoing social, cultural, and economic changes.

As we prepare to celebrate the Council's centenary in 2025, I wish to thank all Council Members, staff, and stakeholders for their dedication and support. We move forward with renewed purpose to uphold the integrity and quality of healthcare in Sri Lanka.

Dr. H. D. B. Herath
Registrar
Sri Lanka Medical Council



HIGHLIGHTS OF THE YEAR 2024

HIGHLIGHTS OF THE YEAR 2024

PREPARATION OF THE STRATEGIC PLAN

The Sri Lanka Medical Council (SLMC) has initiated the development of its Strategic Plan for 2025–2029, focusing on strengthening medical regulation, advancing education standards, enhancing ethical practices, embracing digital transformation, and fostering stakeholder collaboration. This plan aims to ensure excellence in healthcare governance by addressing emerging challenges and opportunities in the medical sector.

The formulation of this strategic plan involves a comprehensive, data-driven approach, incorporating insights from key stakeholders, including medical professionals, academic institutions, policymakers, and healthcare organizations. Through extensive engagement, the SLMC seeks to establish a forward-thinking framework that enhances the effectiveness of medical education, regulation, and professional ethics.

A major focus of the strategy is the integration of digital technology to streamline regulatory processes, improve access to medical information, and modernize licensing and accreditation systems. Additionally, the SLMC is committed to reinforcing ethical standards and professional accountability, ensuring that medical practitioners uphold the highest levels of integrity.

Which sets the direction for the SLMC's efforts over the next five years. This initiative underscores the council's commitment to maintaining a strong, transparent, and globally aligned medical regulatory system in Sri Lanka.

IMPLEMENTATION OF ONLINE RENEWAL REGISTRATION FOR MEDICAL AND DENTAL PRACTITIONERS

In 2024, the Sri Lanka Medical Council (SLMC) successfully introduced the **Online Renewal Registration System** for medical and dental practitioners, marking a significant milestone in modernizing regulatory processes. This digital initiative was designed to streamline the renewal process, making it more efficient, accessible, and user-friendly for healthcare professionals across the country.

By transitioning to an online platform, the SLMC has significantly reduced processing time, minimized administrative burdens, and enhanced transparency in the registration system. Practitioners can now conveniently renew their registrations from anywhere, eliminating the need for physical visits and paperwork. Additionally, the system incorporates enhanced security measures to ensure data protection and regulatory compliance.

This initiative aligns with the SLMC's broader vision of embracing digital transformation to improve service delivery and governance in the medical sector. Moving forward, the council remains committed to leveraging technology to further enhance efficiency, accessibility, and accountability in medical and dental regulation. The successful implementation of the **Online Renewal Registration System** represents a crucial step toward a more modern and responsive healthcare regulatory framework in Sri Lanka.

DRAFTING OF THE NEW MEDICAL ACT

In 2024, one of the most significant milestones for the Sri Lanka Medical Council (SLMC) has been the drafting of the New Medical Act, a transformative initiative aimed at strengthening the legal and regulatory framework governing the medical profession in Sri Lanka. This landmark legislation is set to modernize medical regulation of healthcare professionals, enhance professional accountability, and align healthcare standards with global best practices.

The New Medical Act introduces comprehensive reforms, including streamlined licensing and registration processes, stricter oversight on professional ethics, improved accreditation standards for medical education training of other healthcare professionals, and enhanced patient safety measures. Additionally, the Act incorporates digital transformation to facilitate more efficient governance and regulatory mechanisms.

As the SLMC works closely with medical professionals, policymakers, and stakeholders to finalize the draft, this initiative stands out as a defining achievement of 2024. Once enacted, the New Medical Act will play a crucial role in shaping the future of Sri Lanka's healthcare system, ensuring higher standards of healthcare practice, education, and ethical conduct.

ENACTMENT OF THE MEDICAL (AMENDMENT) ACTS, NO. 46 AND NO. 47 OF 2024

In 2024, the Sri Lanka Medical Council (SLMC) successfully led significant legislative reforms through the enactment of the Medical (Amendment) Act, No. 46 of 2024 and the Medical (Amendment) Act, No. 47 of 2024, amending the Medical Ordinance (Chapter 105). These amendments were introduced to strengthen the medical regulatory framework, enhance professional standards, and ensure the highest quality of medical education and practice in Sri Lanka. By streamlining the granting of recognition for overseas Medical schools and registration of foreign qualified Medical / Dental specialists.

These legislative reforms represent a critical step forward in elevating medical education standards, reinforcing professional accountability, and enhancing patient safety across the healthcare system. The SLMC remains committed to upholding these standards to ensure the continued excellence of medical practice in Sri Lanka.

ESTABLISHMENT OF AN AUDIT COMMITTEE IN COMPLIANCE WITH GOVERNMENT CIRCULARS

The Sri Lanka Medical Council (SLMC) has taken a significant step towards enhancing financial transparency, accountability, and governance by establishing an Audit Committee in accordance with relevant government circulars. This initiative aligns with best practices. This initiative marks a crucial step toward ensuring transparency, regulatory compliance, and effective financial oversight within the institution.

By implementing this committee in accordance with government circulars, the SLMC reinforces its commitment to good governance, institutional accountability, and financial transparency. This milestone stands as a key achievement of 2024, reflecting the council's dedication to maintaining the highest standards of efficiency and credibility in its operations

ESTABLISHMENT OF NEW COMMITTEES FOR STRENGTHENING MEDICAL GOVERNANCE

In 2024, the Sri Lanka Medical Council (SLMC) took a major step forward in enhancing medical regulation, education, ethics, and digital healthcare by establishing several key committees. These newly formed committees are aimed at ensuring continuous professional development, maintaining ethical medical practices, and addressing emerging challenges in healthcare, particularly in cross-border telemedicine.

- **Revalidation (CPD) Committee –** Focuses on Continuing Professional Development (CPD) and revalidation to ensure ongoing competence for medical and dental practitioners.
- **Medical & Dental Education Committee –** Oversees education standards, accreditation, and curriculum alignment with global best practices.
- **Ethics Committee –** Strengthens ethical oversight to ensure healthcare professionals adhere to the highest standards.
- **Cross-Border Telemedicine Sub-Committee –** Develops guidelines and regulations for ethical and safe cross-border telemedicine.

These committees represent a major step forward in modernizing medical governance and embracing technological advancements in Sri Lanka's healthcare sector.

COUNCIL 2024

Seated (Left to Right) – 1st Raw

Dr. S. Shanmuganathan, Prof. M. Umakanth, Prof. Saman Nanayakkara, Prof. Madhawa Chandrathilake, Dr. Janaka Pushpakumara, Ms. A. Sabanathan (Assistant Registrar), Prof. F. Ranil Fernando (Vice President), Prof. Vajira H. W. Dissanayake (President), Dr. H. D. B. Herath (Registrar), Dr. P. G. C. Sanjeewa Bowatte, Prof. R. Surenthikumaran, Prof. Muditha Vidanapathirana, Prof. Manori Gamage, Prof. Surangi Yasawardene, Prof. B. M. H. S. K. Banneheka

Standing (Left to Right)

Dr. Kapila Jayaratne, Dr. Thenuwan Tharanga Wickramasinghe,
Dr. Chandika Epitakaduwa, Dr. Chandana Dhramaratne, Dr. Haritha Aluthge,
Dr. M. D. Samarasinghe, Dr. S. R. Wijayasingha, Dr. Janake Rajapakse
Dr. D. S. Samaraweera, Dr. Lal Panapitiya

Absent

Dr. Asela Gunawardane (DGHS) , Prof. Jayantha Jayawardena,
Snr. Prof. T. P. Weeraratne, Dr. P. A. G. Navaratne, Dr. D. K. D. Mathew, Prof. H. J. De Silva, Prof. Prasad Katulanda, Dr. Geetha Nanayakkara, Dr A. M. D. M. Indika Lanerolle, Dr. Y. V. N. Dharshana Sirisena, Dr R. N. A. M. U. K. Bandara Warakagoda

1. Introduction

1.1. Overview of the Sri Lanka Medical Council

The SRI LANKA MEDICAL COUNCIL (SLMC) is a statutory body established to protect healthcare seekers by ensuring the maintenance of academic and professional standards, discipline, and ethical practice by health professionals registered with it.

The SLMC derives its statutory powers from the Medical Ordinance No. 26 of 1927 and its subsequent amendments and the regulations gazetted under the Ordinance.

1.2. The History of the Sri Lanka Medical Council

HOW IT BEGAN - 1870 - 1880

The longest-standing Medical School in Sri Lanka, the Colombo Medical School, was founded on 1st June 1870 and admitted twenty-five students. They were awarded a diploma of Licentiate in Medicine and Surgery (L.M.S.). In 1880, the school was named the Ceylon Medical College and the L.M.S. was registered with the General Medical Council of Britain without further examination.

REGISTERED PRACTITIONERS 1905-1915

The Medical Registration Ordinance was passed in 1905 and persons with L.M.S. (Ceylon) were recognized as medical practitioners and registered to practice medicine and surgery by the Ceylon Medical College Council (CMCC). Any person registered in a country which recognized this diploma was also registered by the CMCC. The Medical Registration Ordinance of 1905 also makes provision for erasure of the name of a registered person

The Medical Registration (Amendment) Ordinance No. 36 of 1908 made legislative provision to register apothecaries and estate dispensers to practice medicine and surgery in the government sector on the approval of the Principal Civil Medical Officer, the equivalent of the present Director General of Health Services.

In 1915, the Dentists Registration Ordinance was introduced to register dentists to practice dentistry.

EXTENDED PROVISION FOR REGISTRATION 1920-1927

Midwives were earlier registered under the Midwives Ordinance No. 02 of 1920. Provision was made in the Medical Ordinance of 1924 for the registration of midwives. Eligibility for registration as a midwife is restricted to women.

The Medical Ordinance No. 26 of 1927 makes provision for the registration of pharmacists, and the dispensing of drugs and poisons was restricted only to registered pharmacists and pharmaceutical chemists.

The Medical Ordinance No. 26 of 1927 makes provision for erasure on disciplinary ground. The procedure for disciplinary inquiries currently applicable was published in the government gazettee no 757/7 of March 10, 1993

UNIVERSITY ORDINANCE AND INTERNSHIP 1942

Following the establishment of the University of Ceylon by the University Ordinance of 1942, the MBBS degree and the BDS degree awarded by it were also recognized for registration by the CMCC.

The Medical (Amendment) Act No.23 of 1955 makes provision for provisional registration of medical graduates to obtain pre-registration experience by serving a period of internship. It includes "good character" as a requirement for registration.

TEMPORARY REGISTRATION OF MEDICAL PRACTITIONERS 1946-1997

The Medical (Amendment) Act No. 25 of 1946 makes provision for the temporary registration of medical practitioners when there is a delay in the award of a degree and subsequent amendment for registration on other grounds.

The Medical (Amendment) Act No. 37 of 1961 makes provision for temporary registration of medical practitioners, dentists, and nurses who are invited by the government to serve the country. This was amended by the Medical (Amendment) Act No. 31 of 1997 where registration is recommended by the Secretary, Ministry of Health, the Director General of Health Services or a Dean of a Medical Faculty. Registration is restricted for a period of twelve months; the skill and knowledge of the applicant is judged by the Council.

REGISTRATION OF NURSES 1949-2005

The Medical Ordinance No. 10 of 1949 provided for the registration of nurses by the Ceylon Medical Council. This function is now under the Sri Lanka Nurses Council, which was established by Act No. 19 of 1988 and later amended by Act No. 35 of 2005.

REGISTRATION OF OVERSEAS QUALIFICATION 1996

The Medical (Amendment) Act No. 15 of 1996 makes provisions for registration of citizens of Sri Lanka who have obtained a degree or diploma from a medical school outside Sri Lanka and recognized by the Council, to be registered if they were in employment of the Department of Health Services prior to May 17, 1991.

REGISTRATION OF PARA MEDICAL ASSISTANTS 1987 & PROFESSIONS SUPPLEMENTARY MEDICINE

The Medical (Amendment) Act No. 30 of 1987 makes provision for the registration of para-medical Assistants. Persons included in this category are radiographers, medical laboratory technologists, physiotherapists, occupational therapists, electrocardiograph recordists, audiologists, clinical physiologists, speech therapists, chiropodists, dietitians, ophthalmic auxiliaries and clinical

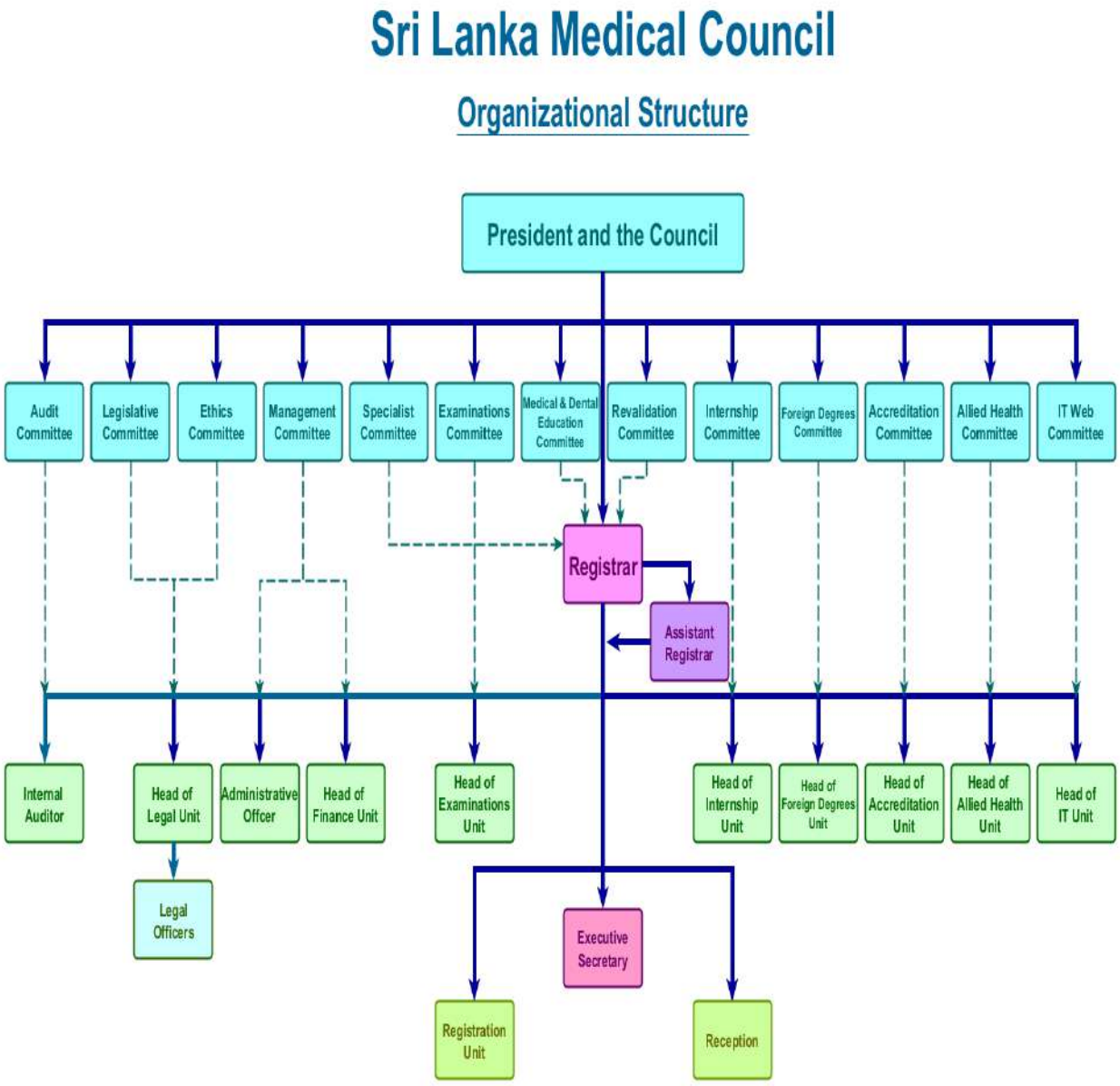
REGISTRATION TO ERPM / ERPDS 1965

The Medical (Amendment) Act No. 16 of 1965 makes provision for the registration of citizens of Sri Lanka who have obtained a degree or diploma from a medical school outside Sri Lanka and recognized by the Council to be registered following a special examination conducted by the Council and after serving an internship. The special examination was previously known as the Act 16 examination and is now referred to as the Examination for Registration to Practice Medicine (ERPM) in Sri Lanka and the Examination for Registration to Practice Dental Surgery (ERPDS) in Sri Lanka.

SLMC Cadre as at 31.12.2024

Designation	Actual Cadre
Registrar	01
Assistant Registrar	01
Head of Examination Unit	01
Head of Accreditation Unit	01
Head of Internship Unit	01
Head of Legal Unit	01
Head of Finance Unit	01
Head of Accreditation Unit	01
Head of Allied Health Unit	01
Legal Officer	02
IT System / Administrator	01
Prosecution Officer	01
Executive Secretary	01
PPC & PCC Co - Ordinator	01
Management Assistant - Registration Unit	10
Management Assistant - ICT Unit	01
Management Assistant - HR & Admin Unit	02
Management Assistant - Finance Unit	03
Management Assistant - Allied Health Unit	02
Management Assistant - Legal Unit	03
Management Assistant - Internship Unit	01
Management Assistant - Examination Unit	04
Management Assistant - Foreign Degree Unit	02
Management Assistant - Accreditation Unit	01
Management Assistant - Reception	02
Office Assistant	02
Office Assistant	01
General Workers	03
Total	**51**

THE ORGANIZATIONAL STRUCTURE OF THE SRI LANKA MEDICAL COUNCIL



1.3. Governing Authority

1.3.1 ROLE OF THE COUNCIL

Maintaining Standards and discipline of Registrants.

- Change of information of the Registrants, such as names, addresses, NIC numbers, etc.
- Entering additional qualifications in the relevant registries.
- Issuing certified extracts from the relevant registries.
- Renewal and restoration of names in the registries.
- Recognition of government hospitals for internship.
- Verification of registration of the registrants.
- Registration of specialists in the specialist register.
- Issue of certificates of registration.
- Replying to inquiries regarding registrations.
- Issue of certificates of good standing to the registrants.
- Issue of identity cards to registrants.
- Registration of apprentice pharmacists and the issue of indenture.
- Approval of degrees of the foreign graduates (Medical and Dental).
- Conduct of ERPM/ERPDS examinations for medical and dental graduates who qualified abroad.
- Inquire into disciplinary complaints.
- Recognition of foreign medical and dental schools and maintaining the registry of such approved schools.
- Certification of documents approved by the Council.

1.3.2. CONSTITUTION AND DUTIES OF THE COUNCIL

Part III of the Medical Ordinance defines the constitution and duties of the SLMC as summarized below,
The Medical Council shall be a body incorporated by the name and style of the "Sri Lanka Medical Council" having perpetual succession and a common seal with power to sue and to be sued in such name and to acquire and hold property movable and immovable and shall consist of members appointed by the Minister of Health, Ex-Officio members, nominated members by the Universities established under the Universities Act. Elected members from among the medical practitioners, dentists, persons entitled to practice medicine, specialist medical practitioners, and specialist dentists. The Minister appoints the President, and the Vice President is elected from among the members of the Council.

The duties of the Council

- Maintain the standards of professions registered with the Council (Minimum Standards Regulations);
- Maintain the discipline of the practitioners (Disciplinary Procedure Regulations), and maintenance of registries.
- The Medical Council shall appoint a registrar, who shall act as secretary of the Medical Council and also as treasurer unless the Medical Council shall appoint another person as treasurer and may appoint an assistant registrar who shall assist the registrar in the performance of his duties under this Ordinance.
- Regulations may be made by the Council for all or any of the following purposes;
  The election of members to the Medical Council and of the Vice President.
  The procedure at meetings of the Medical Council, including the quorum.
    - The appointment, suspension, removal, duties, and remuneration of officers and servants of the Medical Council.
    - The keeping of the accounts of the receipts and expenses in carrying out the provisions of this Ordinance, and the auditing of such accounts.
    - The maintenance of minimum standards of medical education, including standards relating to courses of study, examinations, staff, equipment, accommodation, training, and other facilities at the universities and other institutions which grant or confer any qualification which entitles a person to obtain registration under this ordinance.
    - The maintenance of minimum standards of postgraduate medical education at universities and other institutions.
- The Council conducts its affairs, discusses matters, and takes decisions through monthly Council meetings and establishes various committees and panels.
- The Council has established separate Units.
    - Examinations Unit to conduct licensing examinations
    - Accreditation Unit to accredit degree programs
    - Legal unit to address litigations and assist disciplinary procedures
    - Foreign Degrees Unit to recognize foreign degree programs
    - Internship Unit to monitor and improve the quality of the internship training.
- The council provides multiple services to the registrants and the public.
    - Registration of practitioners, renewal of registrations at fixed intervals.
    - Issuing Good Standing Certificates
    - Issuing copies of certificates
    - Verifying the registration of the practitioners

Members of the Council – 2024

President

Prof. Vajira H. W. Dissanayake
From 27.11.2020 to Present

Vice President

Prof. F. Ranil Fernando
From 29.05.2023 to 31.12.2024

Members

Dr. Asela Gunawardane
Director General of Health Services, Ministry of Health [Ex – Officio] from 29.10.2020 [Sec. 12.1 (g)]

Prof. S. Mandika Wijeyaratne
From 27.09.2023 to 08.01.2024 (Sec. 12.1 (b)) (Nominee of the Faculty of Medicine, University of Colombo)

Prof. Prasad Katulanda
From 09.01.2024 (Sec. 12.1 (b)) (Nominee of the Faculty of Medicine, University of Colombo)

Prof. Vasanthi Pinto
From 13.10.2021 to 11.09.2024 (Sec. 12.1 (b)) (Dean, Faculty of Medicine, University of Peradeniya)

Prof. S. Nanyakkara
From 12.09.2024 (Sec. 12.1 (b)) (Dean, Faculty of Medicine, University of Peradeniya)

Prof. Manjula Attygalle
From 10.08.2021 to 09.08.2024 (Sec. 12.1 (b)) (Dean, Faculty of Dental Sciences, University of Peradeniya)

Prof. B. M. H. S. K. Banneheka
From 10.08.2024 (Sec. 12.1 (b)) (Dean, Faculty of Dental Sciences, University of Peradeniya)

Prof. Madhwa Chandrathileke
From 25.09.2023 (Sec. 12.1 (b)) (Dean, Faculty of Medicine, University of Kelaniya)

Prof. Manori Gamage
From 17.11.2023 (Sec. 12.1 (b)) (Dean, Faculty of Medicine, University of Sri Jayawardenapura)

Prof. Surangi Yasawardena
From 29.04.2022 (Sec. 12.1 (b)) (Dean, Faculty of Dental Sciences, University of Sri Jayawardenapura)

Dr. Angela Arulpragasam Anthony
From 07.02.2019 to 06.02.2024 (Sec. 12.1 (b)) (Nominees, Faculty of Health Care Sciences, Eastern University of Sri Lanka)

Prof. M. Umakanth
From 01.08.2024 (Sec. 12.1 (b)) (Nominees, Faculty of Health Care Sciences, Eastern University of Sri Lanka)

Snr.Prof. T. P. Weeraratne
From 26.06.2023 (Sec. 12.1 (b)) (Dean, Faculty of Medicine, University of Ruhuna)

Prof. R. Surenthirakumaran
From 29.10.2021 (Sec. 12.1 (b)) (Dean, Faculty of Medicine, University of Jaffna)

Prof.Muditha Vidanapathirana
From 11.08.2023 (Sec. 12.1 (b)) (Dean, Faculty of Medicine, University of Uwa Wellassa)

Dr. P. G. C. Sanjeewa Bowatte
From 28.01.2021 (Sec. 12.1 (b)) (Dean, Faculty of Medicine, University of Wayamba)

Dr. Janaka Pushpakumara
From 11.08.2022 (Sec. 12.1 (b)) (Dean, Faculty of Medicine, University of Rajarata)

Dr. Udayangani Ramadasa
From 30.04.2021 to 20.02.2024 (Nominee of the Faculty of Medicine, University of Sabaragamuwa)

Dr. Geetha Nanayakkara
From 21.02.2024 (Nominee of the Faculty of Medicine, University of Sabaragamuwa)

Dr A. M. D. M. Indika Lanerolle
From 26.05.2023 (Sec. 12.1 (c))

Dr. E. G. D. Chandika Epitakaduwa
From 26.05.2023 (Sec. 12.1 (c))

Dr. C. S. Dharmaratne
From 26.05.2023 (Sec. 12.1 (c))

Dr. P. W. C. Panapitiya
From 26.05.2023 (Sec. 12.1 (c))

Dr. Y. V. N. Dharshana Sirisena
From 26.05.2023 (Sec. 12.1 (c))

Dr R. N. A. M. U. K. Bandara Warakagoda
From 26.05.2023 (Sec. 12.1 (c))

Dr W. A. D. Thenuwan Tharanga Wickramasinghe
From 26.05.2023 (Sec. 12.1 (c))

Dr. Haritha Punu Aluthge
From 26.05.2023 (Sec. 12.1 (c))

Prof. Janaka de Silva
From 29.10.2021 (Sec. 12.1 (cc))

Dr. S. R. Wijayasinghe
From 29.10.2021 (Sec. 12.1 (cc))

Dr. M. D. Samarasinghe
From 29.10.2021 (Sec. 12.1 (cc))

Dr. Gamini Nawarathne
From 29.10.2021 (Sec. 12.1 (ccc))

Dr. D. S. Samaraweera
From 31.03.2023 (Sec. 12.1 (d))

Dr. S. Shanmuganathan
From 31.03.2023 (Sec. 12.1 (e))

Dr. Anver Hamdani
From 08.06.2023 to 26.01.2024 (Sec. 12.1 (f))

Prof. Jayantha Jayawardene
From 12.02.2024 (Sec. 12.1 (f))

Dr. D. Mathew
From 27.09.2023 (Sec. 12.1 (f))

Dr. R. K. J. S. Rajapakse
From 28.06.2023 (Sec. 12.1 (f))

Dr.Kapila Jayarathne
From 30.06.2023 (Sec. 12.1 (f))

Former Presidents of the SLMC

Prof. H. De Silva
(January 2019 - November 2020)

Prof. C. Goonaratna
(September 2017 – July 2018)

Prof. C. Fonseka
(January 2012 – June 2017)

Prof. L. Mendis
(June 2009 – June 2011)

Dr. H.H.R. Samarasinghe
(June 1999 – June 2009)

Dr. G.C. Uragoda
(October 1996 – February 1999)

Dr. S.A. Cabraal
(October 1988 – September 1996)

Dr. O.R. Medonza
(July 1980 – October 1988)

Dr. S.H.P. Nanayakkara
(March 1975 – June 1980)

Dr. E.M. Wijerama
(December 1969 – December 1974)

Sir N. Attygalle
(June 1964 – December 1969)

Dr. W.A. Karunaratne
(September 1959 – June 1964)

Dr. J. Kahawita
(December 1953 – September 1959)

Dr. W.G. Wickramasinghe
(October 1949 – December 1953)

Dr. S.F. Chellappa
(September 1941 – October 1949)

Dr. S. T. Gunasekara
(March 1937 – September 1941)

Dr. R. Briercliffe
(January 1930 – March 1937)

Dr. J. O. B. Van Langenberg
(December 1929 – January 1930)

Lt. Col C. D. Myles
(June 1927 - December 1929)

Dr. N. D. Walker
(June 1925 - December 1926)

Former Vice Presidents of the SLMC

Prof. Jayantha Jayawardene
(February 2023 to September 2023)

Prof. Surangi Yasawardene
(January 2023)

Dr. S. Shanmuganathan
(September 2020 to December 2022)

Prof. N. De Silva
(April 2016 to August 2020)

Dr. L. Ranasinghe
(August 2014 – March 2016)

Dr. A. Hapugoda
(February 2013 – June 2014)

Dr. N. Amarasekera
(June 2009 – January 2013)

Dr. A. Samarasekera
(August 1998 - May 2009)

Dr. W.S.S. De Alwis
(July 1992 – July 1998)

Dr. S.M.G. Wijegoonaratne
(March 1991 – July 1992)

Dr. S.A. Cabraal
(June 1973 – March 1991)

Dr. W.D.L. Fernando
(March 1970 – June 1973)

Dr. E.M. Wijerama
(June 1964 – December 1969)

Sir N. Attygala
(September 1957 – June 1964)

Prof. J.R. Blaze
(June 1952 – September 1957)

Sir N. Attygala
(March 1952 – May 1952)

Dr. F. Gunasekara
(February 1933 – March 1952)

Dr. L. De Zilva
(June 1925 – February 1933)

Former Registrars of the SLMC

Dr. S. R. Wijesinghe (Acting)
(December 2022 to 31.01.2023)

Dr. A.Hapugoda
(November 2019 to November 2022)

Dr. C. L. K. Atapattu (Acting)
(August 2018 to November 2019)

Dr. S. Terrence G.R. de Silva
(July 2015 – May 2018)

Dr. H. M. S. S. D. Herath (Acting)
(March 2013 – June 2015)

Dr. N.J. Nonis
(February 2005 – March 2013)

Prof. P. S. S. Panditharatne
(September 1994 – February 2005)

Prof. H. V. J. Fernando
(December 1982 – September 1994)

Prof. M. A. Paul
(March 1939 – May 1982)

Dr. W. C. O. Hill
(June 1938 – March 1939)

Prof. F.O.B. Ellison
(June 1925 – June 1938)

Committees of the Council

Standing Committees of the Council as at 31 December 2024.

1. Management Committee Meeting

This Committee is responsible for managing day-to-day administrative and financial matters.

Prof Vajira H.W. Dissanayake
(President)

Prof Surangee Yasawardhane
Prof. Janaka De Silva
Dr. S R Wijayasinghe
Dr. D. S. Samaraweera
Dr. Suresh Shanmuganathan
Dr. R. N. A. M. U. K. Bandara Warakagoda
Dr. W. A. D. Thenuwan Tharanga Wickramasinghe
Dr. Haritha Punu Aluthge
Dr. A.M.D.M.Indika Lanerolle
Dr. Chandana Dharmarathne

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)
Prof. Gominda Ponnamperuma
(Head - Accreditation Unit)
Prof. R. B. Marasinghe
(Head - Internship Unit)
Prof. Pujitha Wickramasinghe
(Head - Examination Unit)
Mr. Jude Nanayakkara
(Head - Legal Unit)
Mrs. A. U. Waiydyaratne
(Head – Finance Unit)
Mr. Amila Herath
(IT Administrator)
Mrs. Shakila Bopearachchi
(Executive Secretary)

2. Examinations Committee

This Committee is responsible for managing all ERPM/ERPDS matters and recommending educational reforms to the Council.

Prof Vajira H.W. Dissanayake
(President)

Snr Prof TP Weerarathne
Dr. Sanjeewa Bowatte
Prof. Vasanthi Pinto
Prof. Saman Nanayakkara
Prof. Manjula Attygalle
Prof.B.M.H.S.K. Banneheka
Dr.P.A.G.Nawarathne
Prof.Ariyaranie Gnanathasan
Dr. Harsha Athapaththu
Dr. Dulshika Amarasinghe
Prof. Shamini Prathapan
Prof. Indira Kitulwatte
Prof. Manori Gamage
Dr.Malik Samarasinghe
Dr Chandika Epitakaduwa

Council Administration
Dr. H. D. B. Herath
(Registrar)

Mrs. Anusha Sabanathan
(Assistant Registrar)

Prof. Pujitha Wickramasinghe
(Head - Examination Unit)

3. Accreditation Committee

This Committee is responsible for providing oversight to establish an independent Accreditation Unit to accredit Sri Lankan Universities established under the Universities Act, No. 16 of 1978 and Sir John Kotelawala University.

Prof Vajira H.W. Dissanayake
(President)

Prof Surangee Yasawardhane
Prof. Madawa Chandratilake
Prof. Pandula Siribaddana
Dr. Palitha Abeykoon
Dr. Thenuwan Wickramasinghe
Dr. Chandana Dharmarathna
Dr Lal Panapitiya
Dr Chandika Epitakaduwa
Dr Bandara Warakagoda
Dr. Haritha Aluthge
Prof. Nirmalie Pallewatta
(Director QAC)

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)
Prof. Gominda Ponnamperuma
(Head - Accreditation Unit)

4. Foreign Degrees Committee

This committee is responsible for accrediting and monitoring the recognition of foreign medical/ dental degree programs, observing provisions of the Minimum Standards (Medical Education) Regulations, and device tools to streamline and effectively recognize, derecognize, reject foreign degree programs, and propose degree approvals to the Council.

Prof Vajira H.W. Dissanayake
(President)

Prof Surangee Yasawardhane
Prof. Manori Gamage
Prof.Manjula Attygalla
Dr. Janake Rajapakshe
Dr. Kapila Jayarathne
Dr. Suresh Shanmuganathan
Dr. Thenuwan Wickramasinghe
Dr. Chandana Dharmarathna
Dr. Chandika Epitakaduwa
Dr. Bandara Warakagoda

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)

5. Preliminary Proceedings Committee (PPC)

This Committee is responsible for initiating disciplinary procedures and regulations, investigating complaints, determining prima facie cases, and referring them to the Professional Conduct Committee (PCC).

Prof. Ranil Fernando
(Vice President)

Prof.Janaka De Silva
Dr. Duminda Samarasinghe
Dr. Suresh Shanmuganathan
Dr. Thenuwan Wickramasinghe

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)

6. Professional Conduct Committee (PCC)

This Committee is responsible for producing charge sheets against registrants with prima facie cases and hearing cases, making determinations, and imposing punishments.

Prof Vajira H.W. Dissanayake
(President)
Prof Surangee Yasawardhane
Prof. Manori Gamage
Dr. S. R. Wijesinghe
Dr. Lal Panapitiya
Dr.P.A.G.Nawarathne
Dr. Janake Rajapakshe
Dr. Chandana Dharmarathna
Dr. Chandika Epitakaduwa
Dr. Bandara Warakagoda

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mr. Jude Nanayakkara
(Head - Legal Unit)
Mr. Rasika Jayasinghe
(Prosecuting Officer)

7. Internship Committee

This Committee is responsible for managing and approving internship training institutions and supervising and evaluating the internship programs.

Prof Vajira H.W. Dissanayake
(President)

Prof Surangee Yasawardhane
Prof. A.M. Attygalla
Prof. Vasanthi Pinto
Dr.A.N. Arulpragasam
Dr.P.A.G.Nawarathne
Dr. Lal Panapitiya
Dr. Priyantha Athapaththu
Dr. Ayanthi Karunaratne
Dr. Indika Lanerolle
Dr. Bandara Warakagoda

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)
Prof. R. B. Marasinghe
(Head - Internship Unit)

8. Additional Qualifications Committee

This Committee is responsible for streamlining, supervising, and proposing approvals of Additional Qualifications(AQ) to the Council and proposing tools to effectively approve AQs.

Prof Vajira H.W. Dissanayake
(President)

Prof Surangee Yasawardhane
Snr.Prof. TP Weerarathna
Prof. A.M. Attygalla
Dr. Indika Lanerolle
Dr. Lal Panapitiya
Dr. Bandara Warakagoda
Dr. Thenuwan Wickramasinghe
Dr. Chandana Dharmarathna
Dr. Dharshana Sirisena

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)

10. Temporary Registration Committee

This Committee is responsible to review and approve the applications by practitioners for temporary registration to practice in Sri Lanka.

Prof Vajira H.W. Dissanayake
(President)

Prof Surangee Yasawardhane
Prof. Senaka Rajapakse
Dr. M. D. Samarasinghe
Dr.P.A.G.Nawarathne
Dr. Kapila Jayarathne
Dr. Indika Lanerolle
Dr. Lal Panapitiya
Dr. Bandara Warakagoda
Dr. Dharshana Sirisena

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)

11. IT/Web Committee

This Committee is responsible for managing, device, and implementing all IT and SLMC web-related matters. This Committee continued to aim at achieving a paperless green office environment.

Prof Vajira H.W. Dissanayake
(President)

Prof. Ranil Fernando
Dr. Kapila Jayaratne
Dr. Roshan Hewapathirana
Dr. Chamika Senanayake
Dr. Prasad Ranatunge
Dr. Gumindu Kulathunge
Dr.Duminda Samarasinhe
Dr Haritha Aluthge
Dr. Indika Lanerolle
Dr. Bandara Warakagoda
Dr. Thenuwan Wickramasinghe

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)
Mr. Amila Herath
(IT Administrator)

12. Specialists Committee

This Committee is responsible for supervising and streamlining the Specialist registrations and proposing Medical Ordinance amendments to activate silent provisions of the Specialist Registration Regulations.

Prof Vajira H.W. Dissanayake
(President)

Prof. Senaka Rajapakse
Prof. Surangee Yasawardene
Dr. Suresh Shanmuganathan
Dr S.R. Wijesinghe
Dr. Dharshana Sirisena

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)
Mr. Amila Herath
(IT Administrator)

13. Drafting Committee

The committee is to ensure that the standards of medical practice, ethics, and education in Sri Lanka align with national laws and international best practices, contributing to the development and improvement of the country's healthcare system. The committee's work is crucial for maintaining the integrity and professionalism of medical practice, ensuring patient safety, and supporting the continuous education and regulation of medical professionals.

Prof Janaka De Silva
(Chairperson)

Dr. Suresh Shanmuganathan
Dr. S.R. Wijesinghe
Dr. D. S. Samaraweera
Dr.Duminda Samarasinghe
Dr.Chandika Epitakaduwa

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)

14. Legislative Committee

This Committee is responsible for studying the Medical Ordinance and Regulations and proposing amendments for drafting the Medical Ordinance or drafting a new Medical Act.

Prof Vajira H.W. Dissanayake
(President)

Prof. Jayantha Jayawardhana
Dr S.R. Wijesinghe
Dr. Dharshana Sirisena
Dr. Chandana Dharmarathna
Dr. Chandan Epitakaduwa
Dr. Lal Panapitiya
Dr. Bandara Warakagoda
Dr. Thenuwan Wickramasinghe
Dr. D.S. Samaraweera

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)
Mr. Jude Nanayakkara
Head - Legal Unit
Shalini Senanayake
(Legal Officer)
Shamara Ferdious
(Legal Officer)

15. Procurement Committees (Major and Minor)

The procurement committee is responsible for following the National Procurement Guidelines for SLMC purchases inorder to maximize economy, efficiency, and effectiveness.

Major Procurement Committee

Prof Vajira H.W. Dissanayake
(Chairperson)

Dr. Suresh Shanmuganathan
Mr. R.B. Niranjan Premasiri
(Representative of the Ministry of Health)

Minor Procurement Committee

Prof Vajira H.W. Dissanayake
(Chairperson)

Dr. Chandika Epitakaduwa
Mr. R.B. Niranjan Premasiri
(Representative of the Ministry of Health)

16. Allied Health Committee

The committee is responsible for overseeing the regulation, standards, and practices of allied health professionals in Sri Lanka. Allied health professionals include individuals working in healthcare roles that are distinct from medical doctors and nurses, such as physiotherapists, radiographers, laboratory technicians, and occupational therapists, among others. The committee's role involves ensuring that allied health professionals meet specific educational, ethical, and practice standards.

Prof Vajira H.W. Dissanayake
(President)

Snr. Prof. T. P. Weerarathne
Prof. Surangi Yasawardene
Prof. Vasanthi Pinto
Prof. R. Surenthikumaran
Dr. Sanjeewa Bowatte
Dr. Haritha Aluthge
Dr. Dharshana Sirisena
Dr. Chandika Epitakaduwa
Dr. Thenuwan Wickramasinghe

Council Administration

Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)

17. Audit Committee

The committee is responsible for overseeing the financial reporting, auditing processes, and internal controls of the Council. Its primary role is to ensure transparency, accountability, and integrity in the financial management of the organization.

Mr. D. M. Weerasekara
(Chairperson)
Mr. B. G. Dharshana
(Assistant Auditor General (Observer)
Prof. Jayantha Jayawardena
Dr. Suresh Shanmuganathan
Dr. Bandara Warakagoda
Dr. Chandana Dharmaratne
Dr. Thenuwan Wickramasinghe
Dr. Chandika Epitakaduwa
Dr. Haritha Aluthge
Dr. D.S. Samaraweera

Council Administration

Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)
Mrs. A. Waidyaratne
(Head - Finance Unit)

18. Building Committee

The committee is tasked with overseeing the planning, development, maintenance, and management of physical infrastructure related to the Council's operations. This includes ensuring that the SLMC's facilities meet the necessary standards for functionality, safety, and compliance with regulatory requirements.

Prof. Vajira H. W. Dissanayake
(President)

Dr. Bandara Warakagoda
Dr. Janaka Rajapakse
Dr. Chandika Epitakaduwa
Dr. Suresh Shanmuganathan

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)

19. Revalidation (CPD) Committee Meeting

The Revalidation Committee plays a crucial role in ensuring the effective implementation and oversight of the National Continuous Professional Development (CPD) Programme. This initiative, led by the Ministry of Health, is carried out in partnership with a broad spectrum of stakeholders. The committee is responsible for facilitating, monitoring, and maintaining the standards of professional development, ensuring that healthcare professionals continuously enhance their knowledge and skills in alignment with national and international best practices.

Prof. Vajira H. W. Dissanayake
(President)

Dr. M. A. S. C. Samarakoon (Deputy Director General)
(Education, Training, and Research) – Ministry of Health
Dr. Samantha Ranasinghe (Director/Training)
- Ministry of Health
Prof. Manjula Attygalle

Prof. Manjula Attygalle
Dr. S. Shanmuganathan
Dr. D. S. Samaraweera
Dr. Chandika Epitakaduwa

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)

20. Medical & Dental Education Committee

The SLMC is tasked with maintaining medical and dental education standards. Recent developments pose risks to patient safety due to policy gaps and outdated legal frameworks. Rapid advancements in IT and social media demand swift action, especially after the Parliament-approved Charter on Patient Safety. Currently, there is no dedicated mechanism within SLMC to guide the future of medical and dental education. Establishing a specialized committee to address policy-level issues and provide recommendations is crucial.

Prof. Vajira H. W. Dissanayake
(President)

Prof. Manori Gamage
Prof. Surangi Yasawardene
Prof. Madhawa Chandrathileke
Prof. B.M.H.S.K. Banneheka
Dr. Suresh Shanmuganathan
Dr. Janaka Pushpakumara
Dr. Dharshana Sirisena
Dr. Haritha Aluthge
Dr. Chandana Dharmarathna
Dr. Chandika Epitakaduwa
Dr. Baadara Warakagoda
Dr. Thenuwan Wickramasinghe

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)

21. Ethics Committee

The Ethics Committee is responsible for addressing all matters related to professional and clinical ethics. Its key functions include defining ethical standards, developing and revising guidelines, and issuing relevant directives to ensure ethical integrity in medical practice. The committee plays a pivotal role in upholding ethical principles and fostering a culture of professionalism within the healthcare sector.

Prof. Vajira H. W. Dissanayake
(President)

Prof. Manori Gamage
Prof. Surangi Yasawardena
Prof. Madawa Chandrathilake
Prof. B.M.H.S.K. Banneheka
Dr. Janaka Pushpakumara
Dr. Suresh Shanmuganathan
Dr. Haritha Aluthge
Dr. Chandika Epitakaduwa
Dr. Bandara Warakagoda
Dr. Thenuwan Wickramasinghe
Dr. Chandana Dharmaratne
Dr. D. S. Samaraweera

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)
Mr. Jude Nanayakkara
(Head of Legal Unit)

22. Cross-Border Telemedicine sub-committee

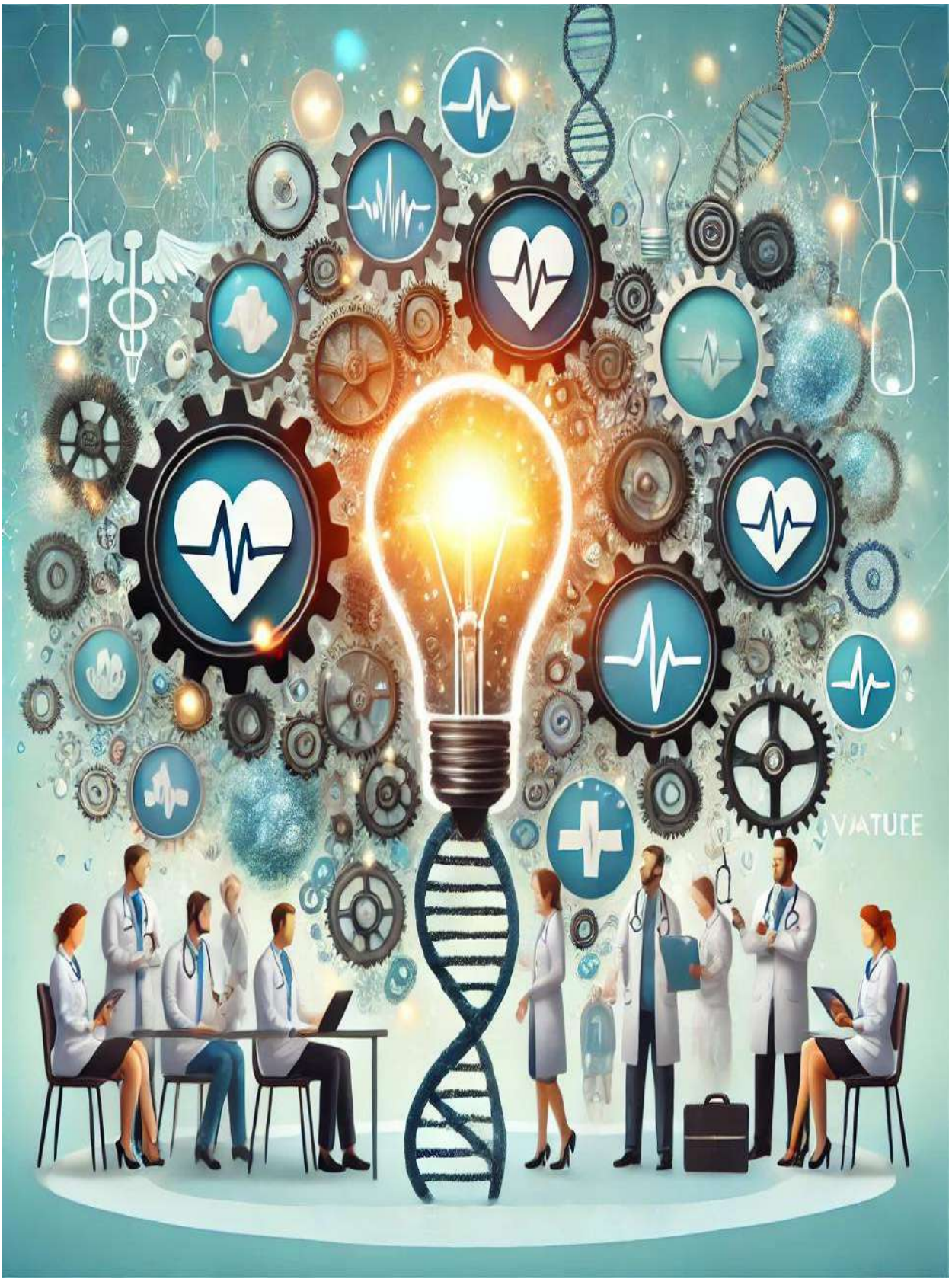
The Cross-Border Telemedicine Sub-Committee is a dedicated body that focuses on addressing the regulatory, technical, ethical, and operational challenges associated with providing healthcare services across international borders using telemedicine. This sub-committee works to develop guidelines, promote interoperability, ensure compliance with legal and data protection frameworks, and facilitate collaboration between healthcare providers, policymakers, and stakeholders in different jurisdictions. Its goal is to enhance access to quality healthcare globally while ensuring patient safety, data security, and adherence to international standards.

Prof. R.B. Marasinghe
(Chairperson)

Dr. Suresh Shanmuganathan
Dr. Chandana Dharmaratne
Dr. Janaka Pushpakumara
Dr. Haritha Aluthge
Dr. Lal Panapitiya
Dr. D. S. Samaraweera
Dr. Bandara Warakagoda
Dr. Anil Samaranayake
Dr. Gumindu Kulathunge

Council Administration
Dr. H. D. B. Herath
(Registrar)
Mrs. Anusha Sabanathan
(Assistant Registrar)
Mr. Jude Nanayakkara
(Head of Legal Unit)

VALUES CREATION FOR SLMC STAKEHOLDERS



4.1. PATIENTS

Maintaining Registers

The Sri Lanka Medical Council maintains the following registers for the information of patients:

- Specialist Medical Practitioners (Section 39B)
- Specialist Dental Practitioners (Section 39B)
- Medical Practitioner (Section 29 and ACT15)
- Dentists (Section 43)
- Registered Medical Practitioners (Section 41)
- Midwives (Section 51)
- Pharmacists (Section 56)
- Para Medical Assistants (Section 60A) - Electrocardiograph Recordists, Audiologists, Clinical Physiologists, Speech Therapists, Chiropodists, Dietitians, Ophthalmic Auxiliaries, Electroencephalograph Recordists, Nutritionists, Clinical Psychologists.
- Professions Supplementary to Medicine (Section 60F) - Radiographers, Medical Laboratory Technologists, Physiotherapists, Occupational Therapists.
- Temporary Registrations of Medical Practitioners, Dentists and Nurses (Section 67A)

Verifications

The Sri Lanka Medical Council provides the following verification services:

Verification of medical certificates issued to the Foreign Ministry for foreign employment.

Verification of registration of practitioners prior to employment by Healthcare Institutions.

Raise Concerns

The Sri Lanka Medical Council has the power to inquire into complaints made against any practitioner registered with the Council.

In making a complaint:

1.0. The complaint should be made by way of a letter addressed to the President along with an affidavit stating facts/matters alleged against the medical practitioner/s.

2.0 The full name/s of the accused practitioners should be clearly stated in the affidavit. The full name/s of the complainant/s along with the contact address and the telephone numbers should be clearly stated in the covering letter.

Inquiry Procedure at SLMC

Preliminary Inquiry:

Once a complaint has been directed to the PPC, the practitioner will be informed of the complaint against them. A copy of all affidavits produced shall also be made available to the practitioner. The practitioner will then be afforded an opportunity to submit any explanation that such practitioner has to offer regarding such complaint/report. The committee will then inquire into the matter by hearing the evidence of all relevant parties, and shall prepare and transmit a report embodying its findings to the Professional Conduct Committee.

Professional Conduct Inquiry:

- The PCC shall consider the report of the PPC and shall determine whether or not an inquiry should be held into the facts or matters alleged in the complaint or report. Where it is decided that no inquiry should be held, steps will be taken to inform the complainant and the practitioner of such a decision.
- If the PCC determines that an inquiry should be held into the matter, a notice of inquiry will be served on the practitioner specifying the charges preferred against the practitioner. A copy of the notice of inquiry shall also be served on the complainant.
- The inquiry will then be held into the matter whereby evidence will be adduced in respect of the facts alleged in the charges. The practitioner shall also be provided an opportunity to adduce evidence to disprove such charge preferred against him.
- At the conclusion of the case, the PCC shall determine whether the charges have been proved to the satisfaction of the PCC. If found guilty, the PCC will announce the determination in such a manner as the PCC may think fit. If found not guilty, such a finding will be recorded and such a decision announced in a manner that the PCC thinks fit. Possible penalties, if such practitioner is found guilty, include erasure of the practitioner's name from the register and suspension for a definite period of time, as per Section 25 of the Medical Ordinance No. 26 of 1927 (Chapter 105).
- The PCC will then inform the Council of such decision after which the Council will direct the Registrar of SLMC to take necessary steps to give effect to such decision.

4.3. MEDICAL / DENTAL PRACTITIONERS

Services Offered to Medical Practitioners and Dental Practitioners

- Specialist registration
- Registration of additional qualifications
- Update details in the register
- Issuing Certificate of extract of registration
- Renewal of registration / Restoration of names in the register/ Submit letters of request for documents
- Issuing SLMC identity cards
- Professional guidance
- Provisional registration
- Permanent registration
- Temporary registration (Non - Citizen Practitioners)
- Issuing internship certificate documents
- Disciplinary procedures

4.4. Guidance, Advice, and Ethics to Medical Practitioners

Medical Oath

1. Ethical and Professional Misconduct Guidelines

Guidelines on Ethical Conduct for Medical & Dental Practitioners Registered with the Sri Lanka Medical Council

Sri Lanka Medical Council Instructions on Serious Professional Misconduct to Medical Practitioners and Dentists

Guidelines For Medical Practitioners and Dentists - Medical and Death Certificates

2. Internship Guideline Book

Guidelines for Internship – Revised in 2013. This can be accessed *https://slmc.gov.lk/en/education/internship*

3. ERPM Guideline Book

The guideline for the Examination for Registration to Practice Medicine in Sri Lanka (ERPM) includes the Examination Rules compiled by the Education Committee of the Council. This revised new format is effective from 1 March 2017 and was updated on 26 May 2021. This can be viewed at *https://slmc.gov.lk/en/examinations/erpm*

Medical Education, Training, Monitoring, and Quality Assurance at SLMC

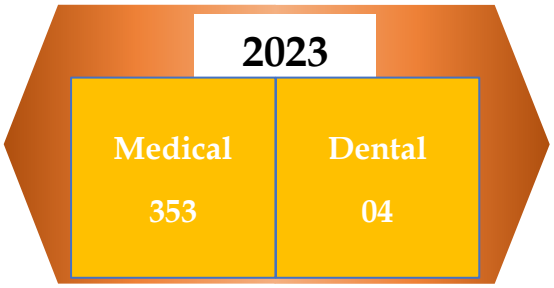
1. Minimum Standard Regulation

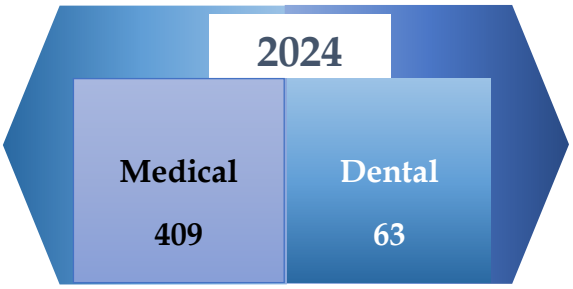
The Minimum Standards for Medical Education are stipulated in the gazette notifications listed below:

- Extraordinary Gazette No. 2055/54 – FRIDAY, JANUARY 26, 2018
- Extraordinary Gazette No. 2155/15 - THURSDAY, DECEMBER 26, 2019
- Extraordinary Gazette No. 2222/69 - SATURDAY, APRIL 10, 2021

MEDICAL/DENTAL STUDENTS

SLMC-approved Foreign Medical Graduates

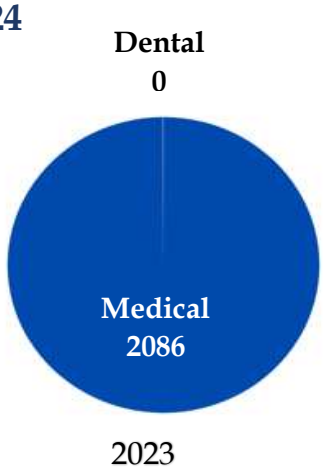




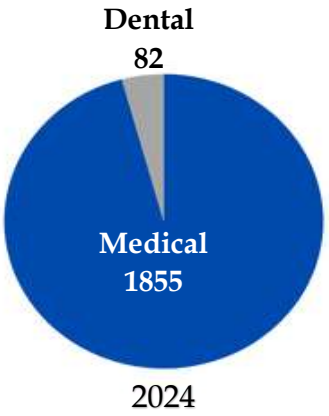
PERFORMANCE OF DIFFERENT UNITS DURING THE YEAR 2024

REGISTRATION UNIT
SRI LANKA MEDICAL COUNCIL

REGISTRATION OF THE MEDICAL/DENTAL PRACTITIONERS YEAR 2024

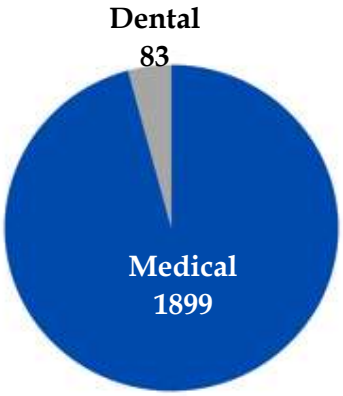


2023

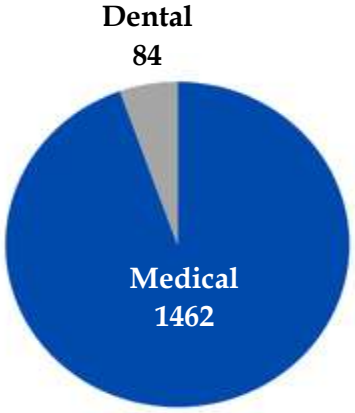


2024

PROVISIONAL REGISTRATION OF MEDICAL / DENTAL PRACTITIONERS 2024



2023



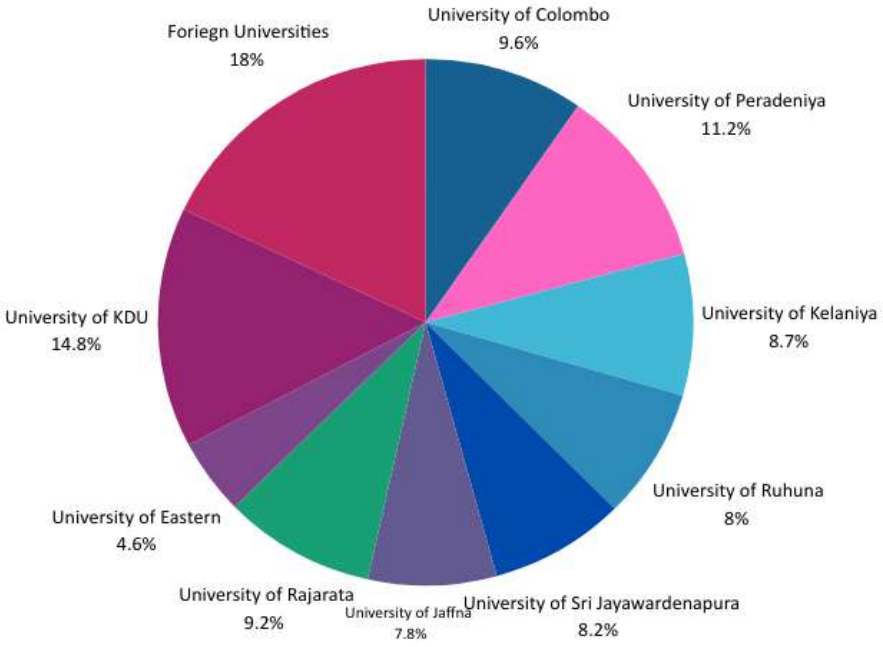
2024

THE MEDICAL / DENTAL REGISTERS

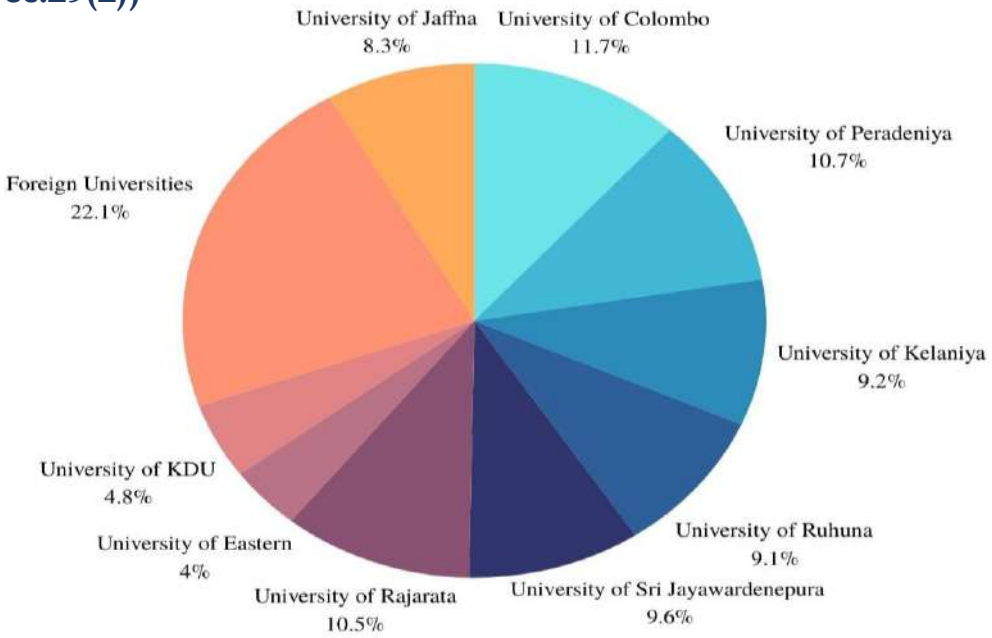
Number of Medical Practitioners with a License Number of Active Registrants by 31st of December each year	
2023	2024
35520	37463

Number of Dental Practitioners with a License Number of Active Registrants by 31st of December each year	
2023	2024
2499	2599

GRADUATES FROM LOCAL /FOREIGN MEDICAL SCHOOLS – 2024 (Sec.29)



PROVISIONAL REGISTRATION OF THE MEDICAL PRACTITIONERS - 2024 (Sec.29(2))



SPECIALIST REGISTRATION (SEC.39B)

2023	2024
Medical – 245	Medical – 752
Dental – 18	Dental – 24

REGISTRATION OF OTHER HEALTHCARE CATEGORIES UP TO 31.12.2024

Midwives Chiropodists Professions Supplementary Pharmacists Dietitians to Medicine Para Medical Assistants, Ophthalmic Auxiliaries Radiographers Electrocardiograph Electroencephalograph, Medical Laboratory Technologists

Number of Registrants – 2024

Registration Category	Number of Registrants – 2024
SEC51 - (Midwives)	1937
SEC56 - (Pharmacists)	6162
SEC60E - (Electrocardiograph Recordists)	0015
SEC60F - (Audiologists)	0046
SEC60G - (Clinical Physiologists)	-
SEC60H - (Speech Therapists)	0094
SEC60I - (Chiropodists)	-
SEC60J - (Dietitians)	0047
SEC60K - (Ophthalmic Auxiliaries)	0044
SEC60L - (Electroencephalograph Recordists)	0008
SEC60M - (Nutritionists)	0120
SEC60N - (Clinical Psychologists)	0027
SEC60A - (Radiographers)	0494
SEC60B - (Medical Laboratory Technologists)	1989
SEC60C - (Physiotherapists)	0698
SEC60D - (Occupational Therapists)	0067

ACCREDITATION UNIT
SRI LANKA MEDICAL COUNCIL

Key Mandate

Develop the policies and procedures for making the accreditation decision of a recognized university or institution or a programme in Sri Lanka as per "Medical (Maintenance of Minimum Standards of Medical Education) Regulations No. 01 of 2018" and its subsequent amendments. Undertake such accreditation of the medical and dental schools once in five years.

Staff of Accreditation Unit

Prof. Gominda Ponnamperuma	- Head of the Unit
Dr. Palitha Abeykoon	- Member
Prof. Surangi Yasawardene	- Member
Prof. Madawa Chandratilake	- Member
Prof. Pandula Siribaddhana	- Member
Ms. Nadeeka Wijadasa	- Management Assistant

Accreditation Unit Website

The dedicated website of AU was launched in September 2021 (www.au.slmc.gov.lk). The website provides up-to-date information regarding the functions of the AU, the processes, relevant documents as well as other important details regarding the accreditation of medical schools. The website was designed to be user-friendly and accessible even using mobile devices.

Meetings

The members of the AU attended the regular and the ad hoc AU meetings and in addition, a few members of the Council attended the Accreditation Committee meetings. The Director of QAC of UGC too was invited to the meetings of the committee. Before each meeting, the agenda and the minutes of the previous meeting were circulated to each member. For each meeting, the relevant memos were submitted for discussion and approval sought. Some meetings were held online/hybrid and others were onsite meetings.

Number of meetings of the Accreditation Unit	– 17
Number of Special meetings of the Accreditation Unit	- 01
Number of meetings of the Accreditation Committee	– 10
Number of meetings with Deans of Medical Faculties	– 01

Accreditation of Medical Schools in Sri Lanka

The Deans were requested to complete the Self Evaluation Report and submit the same to AU with relevant annexes. The Deans submitted the completed SER at different times. On receipt, the Review Teams were appointed by the AU. The review process included a desk review and a three-day "Review Visit" (site visit) to the relevant faculty and teaching hospital. At the completion of the site visit, the Leader of the review team submitted the Draft Review Report to AU. Following consultations with the reviewers and the Dean, the Final Review Report with the decision on accreditation was submitted to the Council for ratification. After the ratification by the Council, the accreditation decision was conveyed to the relevant Vice Chancellor and Dean. The accreditation decision (judgment) is either accreditation granted or rejected. All nine faculties completed the cycle and were granted "Accreditation" with a "Satisfactory Grade Average Score".

In addition to the above-mentioned accreditation reviews, the AU carried out two other types of reviews.

1. Review of newly established medical schools. This is a formative review to assist these medical schools in attaining the required standards by the time they are eligible for the accreditation review. At the end of the review, a review report with the recommendations was provided to the relevant school.
2. Reviews of proposed medical schools for approval before establishing. This is a formal review conducted by the AU to evaluate the suitability of approving a new medical school to commence operations.

Follow up second review visit - 01
Preliminary Review Visits to Faculties - 04
Preliminary Second review visits to faculties - 02
Non-State Medical School Stage 1- Review Visits – 03
(Desk evaluation, Review Visit, Final Review Report and Final Decision conveyed to the Vice Chancellor and Dean)

Preliminary Review Visit, Faculty of Medicine, Sabaragamuwa University of Sri Lanka

Preliminary Review Visit, Faculty of Medicine, Wayamba University of Sri Lanka

Reviewers

The reviewers for each Review Team (five members in each) were selected from the pool of reviewers based on the criteria for such appointments.

Total applications received – 45
Number of reviewers appointed – 35
Number of Review Teams appointed – 14

Training Programmes

Three training programmes for the Accreditation Unit members were held from 03.06.2024 to 08.06.2024. The first training programme was in Singapore, and that was followed by two other training programmes in Thailand and Indonesia. The AU members who attended these training programmes reviewed mutually beneficial policies and procedures that these countries follow related to accreditation. The AU members also observed an accreditation site visit in Indonesia. The training was sponsored by the WHO.

Number of training programmes for AU and Reviewers – 03
Number of training programmes for members of the AU and Reviewers (In Singapore)- 02
Number of training programmes for members of the AU and Reviewers (In Thailand)- 02
Number of training programmes for members of the AU and Reviewers (In Indonesia) – 02

Training workshop for Members of AU and Reviewers in Singapore

Training workshop for Members of AU and Reviewers in Thailand




Training workshop for Members of AU and Reviewers in Indonesia

The report on addressing the WFME recommendations in their recognition report was submitted and the WFME acknowledged the report. Also, the WFME has invited two members from the Accreditation Unit for their international conference to be held in May 2025.

Budget

The funds required were allocated by the Council. The relevant expenditures were approved by the Management Committee and Council on request with justification. The procurements and final payments were made by the Finance Division of SLMC. The funds from the WHO were obtained by the Head/AU and the procurement was done by WHO.

Salaries and recurrent expenditure	– Rs. 2.8 million
Total allocation by SLMC	- Rs. 3.0 million
Total Grant by WHO for training AU team and Reviewers (Singapore/Thailand/Indonesia)	– Rs. USD 26,000

Prof. Gominda Ponnamperuma
Head, Accreditation Unit

EXAMINATION UNIT
SRI LANKA MEDICAL COUNCIL

Annual report - 2024
Examination Unit -Sri Lanka Medical Council

ERPM / ERPDS Examinations

During the year, the examination unit was able to complete one ERPM examination, one Part A & D examination, one Part B & C examination, and two complete ERPDS examinations.

The respective part B & C of ERPM Parts A & D held on October/ November 2023, was held from January to March 2024 at 8 state medical faculties (Colombo, Peradeniya, Jaffna, Ruhuna, Kelaniya, Sri Jayawardena pure, Rajarata and Eastern). 582 candidates sat for the examination. The merit list of 162 qualified medical graduates was sent to the Ministry of Health on 6th June 2024.

The second ERPM examination Part A & D was held in June 2024 at the Aquinas College of Higher Studies, Colombo 8 and 868 candidates sat for the exam. Results were released on July 2024. The respective part B & C was held in August/ September 2024 at 8 state medical faculties (Colombo, Peradeniya, Jaffna, Ruhuna, Kelaniya, Sri Jayawardena pure, Rajarata and Eastern). 733 candidates sat for the examination. The merit list of 325 qualified medical graduates was sent to the Ministry of Health on 16th October 2024.

The third ERPM examination Part A & D was held in November 2024 at the Faculty of Graduate Studies, University of Colombo, and 784 candidates sat for the examination. Results were released in December 2024. The respective Parts B & C are planned to be held in February-March 2025.

The first ERPDS examination Part I was held in March 2024 at the Faculty of Medicine, University of Colombo and 14 candidates sat for the exam. The respective Part II was held on April 2024 at the Dental Faculty Peradeniya. 14 candidates sat for the examination and Results were released on May 2024. The merit list of 4 qualified Dental graduates was sent to the Ministry of Health on 3rd May 2024.

The second ERPDS examination Part I was held in September 2024 at the Faculty of Medicine, University of Colombo and 7 candidates sat for the exam. The respective Part II was held on November 2024 at 3 examination centers (National Dental Hospital, Colombo, Lady Ridgeway Hospital, Colombo, Faculty of Dental Sciences, University of Sri Jayawardenapura). 14 candidates sat for the examination and Results were released on December 2024. The merit list of 8 qualified Dental graduates was sent to the Ministry of Health on 6th January 2025.

FOREIGN DEGREE UNIT
SRI LANKA MEDICAL COUNCIL

SRI LANKA MEDICAL COUNCIL
SUMMARY ANNUAL REPORT OF FOREIGN DEGREES UNIT- 2024

Key Mandate

Develop the policies, procedures, and applications for making the recognition and approval decisions on following and submission of same to relevant Standing Committees and the Council for the final decision:

1. Recognition of Application 1 and 2 submitted by overseas universities/institutions and evaluation of same as per "Medical (Maintenance of Minimum Standards of Medical Education) Regulations No. 01 of 2018" and its subsequent amendments.
2. Degree approval of foreign graduates as per requirements determined by the council to enable them to register for the ERPM Examination.
3. Evaluation of applications submitted by registered medical practitioners to include the foreign and local additional qualifications obtained by them to be added before their name as per Ordinance and guidelines determined by the Council.
4. Evaluation of applications submitted by overseas specialists for Temporary Registration under 67A as per Ordinance and guidelines determined by the Council.

The staff of the Foreign Degrees Unit

Ms. Roshani Dissanyake – Management Assistant
Ms. Y.M. Madugala - Management Assistant

Reviewers of Applications of Overseas Universities/Institutions

Following members of the Reviewers Panel served as reviewers for the Universities/Medical and Dental schools evaluated during the year 2024. Medical Schools Reviewers Panel

- Prof. Manori Gamage
- Prof. Vasanthi Pinto
- Dr. R.Surenthirakumaran
- Dr. Janaka Pushpakumara
- Prof. Madhava Chandrathilake
- Prof. Gominda Ponnamperuma
- Prof. Anjana De Silva
- Prof. Ariyaranee Gnanathasan
- Dr. Sanjeewa Bowatte
- Dr. R.K.J.S.Rajapakse
- Prof. Rasika Perera
- Prof. Kosala Weerakoon
- Prof. Shyamaleee Samaranayake
- Dr. Umanga Sooriyarachchi
- Dr. Kapila Jayarathne
- Dr. W.A.D. Thenuwan Tharanga Wickramasinghe
- Dr Chandika Epitakaduwa
- Dr R.N.A.M.U.K.Bandara Warakagoda

Dental Schools Reviewers Panel

- Dr. S. Shanmuganathan
- Prof. Manjula Attygalla
- Prof. B.M.H.S.K. Banneheka
- Dr. Gamini Navarathne

Meetings

Number of meetings of the Foreign Degrees Committee – 12
Number

Applications from overseas Universities/Institutions for Recognition

Application 1

Total number received - 17
Total number evaluated - 17
Total number approved - 13
Total number under process - 04
Total number rejected - 01

Application 2

Total number received - 10
Total number evaluated - 10
Total number approved - 09

Total number under process - 08

Degree Approval Applications

ERPM Examination

Number of cycles held –

- 1st of November 2023 to 1st of February 2024 (Cycle 1)
- 6th of May 2024 to 15th July 2024 (Cycle 2)

Applications summary

- Cycle 1
  - Total Applications - 417
  - Approved - 414
  - Rejected - 03
- Cycle 2
  - Total Applications - 401
  - Approved - 395
  - Rejected - 06

ERPDS Examination

Number of cycles held –

- 1st of November 2023 to 15th of February 2024 (Cycle 1)
- 6th of May 2024 to 15th July 2024 (Cycle 2)

Applications summary

- Cycle 1
  - Total Applications - 10
  - Approved - 09
  - Rejected - 01
- Cycle 2
  - Total Applications - 01
  - Approved - 01
  - Rejected - 00

Degree Approval Application

Number of cycles held	-	02
Total duration of all cycles (opening of portal to closure)	-	08 months

Cycle 1 (April 2023) - The cycle is completed before Jan 2023; this summary is already mentioned in Annual Report 2022.

Cycle 2 (October 2023)

Total number of applications received	-	382
Approved	-	353
Rejected	-	09

Additional Qualification Applications (Jan - Dec 2023)

Local qualifications received	-	411 (145/2023/L-555/2023/L)
Approved	-	409
Rejected	-	02
Foreign Qualifications received	-	78
Approved	-	63
Rejected	-	02
Pending	-	13

67A Application (Jan - Dec 2023)

Received	-	75
Approved	-	73
Rejected	-	02

IT UNIT
SRI LANKA MEDICAL COUNCIL

Sri Lanka Medical Council - Annual Report of IT Unit 2024

Responsibility and Role of the IT Unit

The IT Unit is a critical component in ensuring that the technological framework of the Sri Lanka Medical Council aligns with its overarching goals and objectives. This involves the careful conceptualization and strategic implementation of technological solutions designed to improve operational efficiency and support the institution's mission. The Unit is entrusted with a wide array of responsibilities, including the installation of new systems, regular maintenance of existing infrastructure, and the timely upgrading of outdated technology. Additionally, the IT Unit actively explores innovative methods and tools to streamline workflows, enhance productivity, and address emerging challenges. By adopting a proactive approach to technology management, the Unit ensures reliable, efficient, and future-proof solutions that contribute to the seamless functioning of the Council.

The IT Unit is responsible for the following functions as necessary.

- Telephone & Voice system
- Internet Access & E-mail
- Computer/Laptop Hardware
- Program Software
- Copiers/Fax/Scanners – All peripherals
- Video & Audio equipment
- Maintains network security and performance; establishes workable directory structure, network security, and disk space allocation, etc.,
- Sets up user accounts according to set established policies, procedures, and limitations.
- Tracks all problems or issues through work orders.
- Plans new phone lines and data ports when needed.
- Performs network maintenance, changes, and upgrades.

The Unit ensures the uninterrupted operation of IT services, collaborates with vendors for procurement, and supports continuous improvement through innovation and effective resource management.

Projects and Improvements - Year 2024

1. Online Renewal System for Medical Practitioners and Dental Surgeons

The Online Renewal System for medical practitioners and dental surgeons is a flagship project undertaken by the Sri Lanka Medical Council to modernize and streamline the license renewal process. This initiative addresses the growing need for a secure, efficient, and user-friendly digital platform to facilitate timely compliance with regulatory standards.

Designed with the end-user in mind, the system ensures convenience and accessibility, allowing practitioners to complete the renewal process online without the need for physical visits or manual paperwork. Accessible at renewal.slmc.gov.lk, the platform integrates advanced features to cater to the diverse needs of its users while maintaining high standards of data security and operational reliability.

Objectives:

- Ensure a smooth renewal process for 35,000+ registered Medical Practitioners and Dental surgeons.
- Keep an accurate and updated practitioner database.
- Improve transparency and efficiency in renewals.
- Practitioners can download the Renewal E-certificate upon completing the renewal process.
- Facilitate verification of medical practitioners and dental surgeons using the QR code embedded in the E-certificate.
- Ensure practitioners' data is updated and verifiable through the registry available on the Sri Lanka Medical Council website (slmc.gov.lk) after the renewal process.
- Reduce manual workload and paperwork.
- Ensure 24/7 accessibility to the renewal system.

- Strengthen data security and privacy compliance.
- Minimize delays in license renewal approvals.
- Facilitate easy payment and confirmation tracking.

Scope:

- Development of an end-to-end online system for license renewal.
- Integration with secure payment gateways for fee submission.
- Real-time updates to practitioner profiles upon successful renewal.
- Comprehensive reporting for monitoring renewals.

Technical Details:

- **Database Management:** A robust, scalable database was implemented to handle large volumes of practitioner data and ensure secure transactions.
- **Servers:** High-performance, reliable servers were deployed to manage concurrent user activity and maintain system availability.
- **Security:** Advanced encryption methods and multi-factor authentication safeguard user data and transactions.

Collaboration:

This project was successfully executed with the active involvement of the Registrar, the IT Unit, and the dedicated team at the Sri Lanka Medical Council, ensuring timely delivery and maintaining high standards of quality assurance.

Process Overview:

Practitioners log in with secure credentials, update their details, complete compliance requirements, and submit renewal fees online. Upon approval, confirmation emails are sent, and renewed licenses are updated in their profiles.

Benefits:

- Convenience of renewing from any location.
- Streamlined administration with reduced manual processes.
- Enhanced data accuracy and operational transparency.
- A centralized, up-to-date database of all registered doctors and dental surgeons.

- Complete digitalization of the renewal process, offering ease and efficiency.
- Reduced processing time for renewals, ensuring timely license issuance.
- Eco-friendly approach by minimizing paper usage.
- Improved user experience with intuitive system design.
- Real-time updates and notifications for practitioners.
- Strengthened regulatory compliance through systematic data management.

Ongoing Activities and Maintenance

- Monitoring and enhancing system performance to support future scalability.
- Regular updates to the renewal.slmc.gov.lk platform to incorporate user feedback and regulatory changes.
- Continuous training for SLMC staff to ensure optimal use of the system.

The Sri Lanka Medical Council envisions a continuously evolving digital ecosystem that not only streamlines the renewal process but also sets new benchmarks in operational efficiency and service delivery. By expanding the online renewal system to encompass a broader range of professional categories and integrating AI-driven analytics, the Council aims to enhance decision-making and resource optimization. Future collaborations with industry leaders will further ensure the adoption of cutting-edge technology, solidifying the Council's commitment to excellence and innovation in serving the medical community.

2. Launch of the Sri Lanka Medical Council WhatsApp Channel

In 2024, the Sri Lanka Medical Council (SLMC) took a significant step towards enhancing communication with the medical community by launching an official WhatsApp channel. This initiative was part of the Council's broader strategy to utilize modern technology and digital platforms to improve accessibility, responsiveness, and the delivery of essential information to medical professionals, students, and the public. By leveraging a widely used messaging platform like WhatsApp, the SLMC aimed to reach a broader audience, including those in remote or underserved areas, ensuring that key updates and announcements are shared in real-time.

Highlights

The WhatsApp channel was officially launched on June 2024, marking a milestone in the SLMC's ongoing efforts to enhance its communication strategy. Since its launch, the channel has garnered a substantial following, with the current follower base reaching an impressive **20,000 individuals**. This rapid growth highlights the channel's popularity and the demand for a more direct and efficient way to receive information from the SLMC.

The primary objective behind the WhatsApp channel was to streamline communication between the SLMC and its stakeholders. The channel enables the SLMC to send real-time updates on regulatory changes, exam schedules, policy updates, and other critical news directly to subscribers' mobile devices. This immediate and direct communication mechanism has proven to be invaluable in ensuring that medical professionals and students stay informed of the latest developments.

Purpose and Functionality

The WhatsApp channel serves multiple purposes, including

- Delivering important regulatory updates, such as new guidelines, policy changes, and announcements regarding medical exams or certifications.
- Providing timely information on SLMC-related events and activities, including conferences, workshops, and seminars.
- Offering an efficient platform for the public and medical professionals to seek quick answers to frequently asked questions, reducing wait times for inquiries.
- Facilitating direct communication with the SLMC IT support team, allowing for faster resolution of technical issues and assistance with inquiries.

Impact:

Since its inception, the WhatsApp channel has had a significant impact on improving the SLMC's communication efficiency. The real-time nature of WhatsApp allows for rapid dissemination of information, ensuring that subscribers receive critical updates promptly. This has enhanced the SLMC's ability to engage with its audience effectively, fostering greater trust and transparency. The channel has also made it easier for medical professionals and students to access vital information, contributing to an overall improvement in the quality of communication within the medical community.

Moreover, the WhatsApp platform's interactive features have enabled the SLMC to address inquiries directly, providing users with a more personalized experience. This has led to a noticeable reduction in the time it takes for users to receive answers to their questions, making the channel a highly efficient tool for information exchange.

Future Plans:

Looking ahead, the SLMC plans to continue growing and improving the WhatsApp channel to better serve its followers. The Council aims to expand the channel's reach, with the goal of increasing the number of subscribers and further enhancing user engagement. Plans include introducing new features such as video updates, interactive polls, and surveys to gather feedback from subscribers and better understand their needs.

In the long term, the SLMC intends to integrate the WhatsApp channel with other digital communication platforms, creating a more comprehensive and seamless experience for its users. This integration will ensure that the SLMC remains at the forefront of digital communication in the medical field, providing reliable, timely, and accessible information to all stakeholders.

LEGAL UNIT
SRI LANKA MEDICAL COUNCIL

SRI LANKA MEDICAL COUNCIL
ANNUAL REPORT OF LEGAL UNIT - 2024

The Legal Unit of the SLMC handles all legal matters concerning the SLMC. Its scope includes court appearances, institution and the conducting of disciplinary inquiries, provision of legal advice and legal support. The unit consists of a Head of Legal, Legal Officers, Prosecuting Officer, and Management Assistants.

In the year 2024, the Legal Unit supported innovative measures and strategic decisions, thereby solidifying our position as a trusted partner for legal compliance and effective governance.

Over the past year, we have undertaken significant steps to enhance the capabilities and efficiency of the Legal and Documentation Unit, while aligning ourselves with the Sri Lanka Medical Council's broader growth objectives.

Of all the functions carried out by the Legal Unit, the institution and conduction of disciplinary inquiries against medical and dental practitioners takes precedence. The procedure that is followed is set out in the Medical Disciplinary (Procedure) Regulations 1990. The procedure implemented is as follows:

Complaint

- The complaint should be made by way of a written statement addressed to the Registrar setting out the facts or matters alleged against the practitioner.
- If such complaint/report alleges professional misconduct/negligence/incapacity relating to professional duties - the complaint should be supported by an Affidavit confirming the facts alleged in the complaint.
- Once the complaint is placed before Council, the Council shall decide whether there is an *ex-facie* case to put before PPC. If an ex-facie case is identified, such matter shall be placed before the Preliminary Proceedings Committee of the SLMC.
- If it is decided that such complaint/report shall not be placed before the Preliminary Proceedings Committee due to the absence of *ex-facie* case the Registrar shall take steps to inform the complainant of such decision.

Preliminary Proceedings Committee (PPC)

- Once a complaint has been directed to the PPC, the practitioner will be informed of the complaint against them. A copy of all affidavits produced shall also be made available to the practitioner. The practitioner will then be afforded an opportunity to submit any explanation that such practitioner has to offer regarding such complaint/report. The committee will then inquire into the matter by hearing the evidence of all relevant parties, and shall prepare and transmit a report embodying its findings to the Professional Conduct Committee.

Professional Conduct Committee (PCC)

- The PCC shall consider the report of the PPC and shall determine whether or not an inquiry should be held into the facts or matters alleged in the complaint or report. When it is decided that no inquiry should be held, steps will be taken to inform the complainant and the practitioner of such a decision.

- If the PCC determines that an inquiry should be held into the matter, a notice of inquiry will be served on the practitioner specifying the charges preferred against the practitioner. A copy of the notice of inquiry shall also be served on the complainant.

- An inquiry will then be held into the matter whereby evidence will be adduced in respect of the facts alleged in the charges. The practitioner shall also be provided an opportunity to adduce evidence to disprove such charge preferred against him.

- At the conclusion of the case, the PCC shall determine whether the charges have been proved to the satisfaction of the PCC. If found guilty, the PCC will announce the determination in such a manner as the PCC may think fit. If found not guilty, such a finding will be recorded and such a decision announced in a manner that the PCC thinks fit. Possible penalties, if such practitioner is found guilty, include erasure of the practitioner's name from the register or suspension for a definite period of time, as per Section 25 of the Medical Ordinance No. 26 of 1927 (Chapter 105).

- The PCC will then inform the Council of such decision after which the Council will direct the Registrar of SLMC to take necessary steps to give effect to such decision.

Summary of Preliminary Proceedings Committee (PPC) inquiries as at 31.12.2024

Preliminary Proceedings Committee (PPC)		
PPC Meetings Conducted in the year 2024	Initiated Cases in the year 2024	Concluded Cases in the year 2024
11th January	PPC 525	PPC 505
8th February	PPC 526	PPC 510
29th February	PPC 527	PPC 511
14th March	PPC 528	PPC 513
26th March	PPC 529	PPC 514
18th April	PPC 530	PPC 515
9th May	PPC 531	PPC 516
30th May	PPC 532	PPC 517
13th June	PPC 533	PPC 518
27th June	PPC 534	PPC 519
11th July	PPC 535	PPC 520
25th July	PPC 536	PPC 522
8th August	PPC 537	PPC 523
22nd August	PPC 538	PPC 524
26th September	PPC 539	PPC 525
10th October		PPC 526
24th October		PPC 528
07th November		
21st November		
19th December		
20	**15**	**17**

Pending cases as at 31.12.2024 – 12

Summary of Professional Conduct Committee (PCC) inquiries as at 31.12.2024

Professional Conduct Committee (PCC)		
PCC Meetings Conducted in the year 2024	Initiated Cases in the year 2024	Concluded Cases in the year 2024
27th January	PPC 495	PPC 495
10th February	PPC 496	PPC 499
11th May	PPC 497	PPC 507
15th June	PPC 498	PPC 508
13th July	PPC 500	PPC 509
28th September	PPC 505	PPC 510
12th October	PPC 510	PPC 511
30th November	PPC 514	PPC 476
	PPC 517	PPC 515
	PPC 521	PPC 516
	PPC 522	PPC 518
	PPC 524	PPC 519
	PPC 525	PPC 520
	PPC 526	PPC 523
		PPC 525
		PPC 528
		PPC 480 – Practitioner was suspended for Four (04) Months with effect from 29.01.2024
08	**14**	**17**

Pending as at 31.12.2024 – 11

Legislative Committee

The Legislative Committee of SLMC, presided by the President of SLMC, plays an active role in advising the Legal Unit in all matters related to legal cases, formulation of new regulations and guidelines, and in drafting of a new Sri Lanka Medical Council Act.

Legislative Committee - 2024
LC Meetings Conducted in the year 2024
17th January
14th February
14th March
17th April
15th May
12th June
10th July
14th August
18th September
18th October
20th November
Total - **11**

Ethics Committee

Sri Lanka Medical Council established the Ethics Committee for overseeing the ethical standards and professional conduct of medical practitioners in Sri Lanka. The committee also provides guidance on ethical dilemmas faced by healthcare providers, ensuring that medical practices align with the values of patient welfare, respect for autonomy, and fairness. Additionally, the SLMC Ethics Committee plays a role in promoting continuing medical education on ethical issues and upholding the integrity of the medical profession in Sri Lanka.
The inaugural meeting of the Ethics Committee was held on 20th November 2024. Appointed Members to the committee are as below.

- Prof.Vajira Dissanayaka (Chairperson)
- Prof. Manori Gamage
- Prof. B.M.H.S.K. Banneheka
- Prof. Muditha Vidanapathirana
- Dr. Suresh Shanmuganathan
- Dr. Bandara Warakagoda
- Dr. Thenuwan Wickramasinghe
- Dr. Chandana Dharmaratne
- Dr. Janaka Pushpakumara
- Dr. Haritha Aluthge
- Dr. Chandika Epitakaduwa

CROSS BORDER TELE MEDICINE SUB COMMITTEE

The establishment of a Cross-Border Telemedicine Sub-Committee involves creating a structured group to oversee and manage the implementation, regulation, and enhancement of telemedicine practices across different countries. This sub-committee aims to promote international collaboration, establish clear guidelines, and ensure the effective delivery of healthcare services remotely across borders.
The inaugural meeting of the Cross Border Tele Medicine Sub Committee was held on 22nd November 2024. Appointed Members to the committee are as below.

- Prof. R.B. Marasinghe (Chairperson)
- Dr. Suresh Shanmuganathan
- Dr. Chandana Dharmaratne
- Dr. Janaka Pushpakumara
- Dr. Haritha Aluthge
- Dr. Lal Panapitiya
- Dr. D. S. Samaraweera
- Dr. Bandara Warakagoda
- Dr. Anil Samaranayake
- Dr Gumindu Kulatunga

INTERNSHIP UNIT
SRI LANKA MEDICAL COUNCIL

SRI LANKA MEDICAL COUNCIL
SUMMARY ANNUAL REPORT OF INTERNSHIP UNIT- 2024

1. Head of Internship Unit Summary

a. Prof. R.B. Marasinghe is serving as the Head of the Unit (on a part-time basis) - Prof. Marasinghe holds an MBBS (Colombo), MPhil in Medical Education (USJP), and PhD from (UQ-Australia).

b. At present Consultant Dr. Sunil De Alwis is serving as the Consultant (Assignment Basis) to Evaluate for Internship stations. - Consultant Dr. Sunil De Alwis holds MD (LVOV) USSR, MSc. (Comm Med) (Colombo)

2. Overview of the Internship Unit

The inception of the Internship Unit within the Sri Lanka Medical Council in November 2022, approved by the 645th Council, marked a pivotal step in standardising the training provided to Intern Medical Officers—individuals who have completed their MBBS and BDS either locally or through foreign institutions. This dedicated unit was established with a clear mandate: to reimagine and streamline the internship program.

Under the guidance of its leader, this unit has embarked on an ambitious journey to revamp the existing framework comprehensively. The primary aim is not just to tweak superficial aspects but to fundamentally enhance the training experience. This overhaul involves a meticulous evaluation of the current curriculum, adapting it to meet evolving healthcare needs, incorporating the latest advancements in medical practices, and ensuring a more comprehensive and enriching learning environment for aspiring Medical and Dental professionals.

The intention behind this transformative initiative is not merely to change for the sake of change but to elevate the quality and effectiveness of the internship, thereby producing more adept, skilled, and compassionate healthcare practitioners capable of meeting the diverse challenges within the medical landscape.

The Sri Lanka Medical Council has initiated a process to increase the medical Internship opportunities to meet future demands. In this regard, SLMC has appointed a Consultant (on an assignment basis) to evaluate and report on the facilities thereby providing a list of potential stations that could be used to provide Internship Training by enhancing the quality of Internship stations (Training Hospitals /Units).

3. Achievement

No	Achievement	Date
1	Development of new internship evaluation forms to be implemented with Digital Platform.	The Internship Committee approved on 01 March 2024
2	Workshop Evaluation of the Intern Medical Officers for Completion of Provisional Registration.	05 April 2024
3	Special Meeting on the Provision of Internships to Dental Graduates	May 2024

4	Internship appointment list of Dental Surgeons & obtaining approval for the stations from the SLMC	May 2024
5	Development of Intern Outcome Statements (IOS) for Medical Internship training	Internship Committee 14 June 2024
6	Introduce a Digital platform for the Internship evaluation process	Internship Committee approved on 14 June 2024
8	Workshop to revisit Internship Guidelines (published the updated version)	06 September 2024
9	Online Awareness Workshop on Internship Training Programme for those who are currency supervising Intern Medical Officers in Sri Lanka	04 & 05 December 2024
10	Consultant Dr. Sunil De Alwis appointed to Internship Unit for Evaluate Stations for Internship	09 December 2024
11	Establishing a Medical Board -Complaints received regarding medical Internship with Psychiatric issues complaint handling mechanism	23 December 2024
12	Regular Internship Committee Meetings	

4. Future Plans for Internship Unit

I. A digital platform to monitor and evaluate the Internship Training - This includes registration of the active Intern Medical Officers, providing them with digital access to enter data for self-evaluation, evaluation by their supervisory consultant, and finally submitting to the SLMC with the Institutional Heads. These data can be used to monitor and evaluate the quality of the internship training and thereby to make information-based recommendations appropriately.

II. Develop new Internship Guideline documents to comply with the new Act.

5. Conclusion

Through the establishment of the Internship Unit and its ongoing efforts to revamp the internship program for MBBS graduates and Dental graduates, the Sri Lanka Medical Council aims to elevate the standard of training for future Medical Practitioners and Dentists. This commitment to refinement signifies a dedication to nurturing well-equipped professionals capable of addressing the complexities of healthcare with skill and compassion, ultimately contributing to a more robust and proficient medical workforce.

FINANCE UNIT

SRI LANKA MEDICAL COUNCIL

SRI LANKA MEDICAL COUNCIL

FINANCIAL STATEMENTS

31 DECEMBER 2024

ජාතික විගණන කාර්යාලය
தேசிய கணக்காய்வு அலுவலகம்
NATIONAL AUDIT OFFICE

මගේ අංකය
எனது இல.
My No.
MED/B/SLMC/
01/2024/32

ඔබේ අංකය
உமது இல.
Your No.

දිනය
திகதி
Date
2026 අගෝස්තු 18 දින

ලේඛකාධිකාරී,
ශ්‍රී ලංකා වෛද්‍ය සභාව

ශ්‍රී ලංකා වෛද්‍ය සභාවේ 2024 දෙසැම්බර් 31 දිනෙන් අවසන් වර්ෂය සඳහා වූ මූල්‍ය ප්‍රකාශන සහ වෙනත් නෛතික හා නියාමන අවශ්‍යතා පිළිබඳව 2018 අංක 19 දරන ජාතික විගණන පනතේ 12 වන වගන්තිය ප්‍රකාරව විගණකාධිපති වාර්තාව.

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1. මූල්‍ය ප්‍රකාශන

1.1 තත්ත්වාගණනය කළ මතය

ශ්‍රී ලංකා වෛද්‍ය සභාවේ 2024 දෙසැම්බර් 31 දිනට මූල්‍ය තත්ත්ව ප්‍රකාශනය සහ එදිනෙන් අවසන් වර්ෂය සඳහා වූ විස්තීර්ණ ආදායම් ප්‍රකාශනය, අරමුදල් හා සංචිත වෙනස්වීමේ ප්‍රකාශනය සහ එදිනෙන් අවසන් වර්ෂය සඳහා මුදල් ප්‍රවාහ ප්‍රකාශනය සහ මූල්‍ය ප්‍රකාශනවලට අදාළ සටහන්, සාරාංශගත වැදගත් ගිණුම්කරණ ප්‍රතිපත්තිවලින් සමන්විත 2024 දෙසැම්බර් 31 දිනෙන් අවසන් වර්ෂය සඳහා වූ මූල්‍ය ප්‍රකාශන ශ්‍රී ලංකා ප්‍රජාතාන්ත්‍රික සමාජවාදී ජනරජයේ ආණ්ඩුක්‍රම ව්‍යවස්ථාවේ 154(1) ව්‍යවස්ථාව සමඟ සංයෝජිතව කියවිය යුතු 2018 අංක 19 දරන ජාතික විගණන පනතේ සහ 1971 අංක 38 දරන මුදල් පනතේ විධිවිධාන ප්‍රකාර මාගේ විධානය යටතේ විගණනය කරන ලදී. ආණ්ඩුක්‍රම ව්‍යවස්ථාවේ 154 (6) ව්‍යවස්ථාව ප්‍රකාරව මාගේ වාර්තාව යථා කාලයේදී පාර්ලිමේන්තුවේ සභාගත කරනු ලැබේ.

මාගේ වාර්තාවේ තත්ත්වාගණනය කළ මතය සඳහා පදනම කොටසේ විස්තර කර ඇති කරුණු වලින් වන බලපෑම හැර, සභාවේ මූල්‍ය ප්‍රකාශන තුළින් 2024 දෙසැම්බර් 31 දිනට මූල්‍ය තත්ත්වය සහ එදිනෙන් අවසන් වර්ෂය සඳහා එහි මූල්‍ය ක්‍රියාකාරිත්වය හා මුදල් ප්‍රවාහ ශ්‍රී ලංකා ගිණුම්කරණ ප්‍රමිතිවලට අනුකූලව සත්‍ය හා යාථාරණ තත්ත්වයක් පිළිබිඹු කරන බව මා දරන්නා වූ මතය වේ.

1.2 තත්ත්වාගණනය කළ මතය සඳහා පදනම

(අ) ශ්‍රී ලංකා ගිණුම්කරණ ප්‍රමිති 01 හි 27 ඡේදය අනුව මූල්‍ය ප්‍රකාශන (මුදල් ප්‍රවාහ ප්‍රකාශය හැර) උපචිත පදනම මත පිළියෙළ කළයුතු වුවද, සමාලෝචිත වර්ෂයට අදාළ එකතුව රු. 10,599,325 ක් වූ වියදම් අයිතම 13 ක් ආදායම් ප්‍රකාශනයේ වියදම් ලෙස හා ඒවාට අදාළ වගකීම් මූල්‍ය තත්ත්ව ප්‍රකාශනයේ ගෙවිය යුතු වියදම් ලෙසද හඳුනාගෙන නොතිබුණි.

අංක 306/72, පොල්දූව පාර, බත්තරමුල්ල, ශ්‍රී ලංකාව
இல. 306/72, பொல்துவ வீதி, பத்தரமுல்லை, இலங்கை.
No. 306/72, Polduwa Road, Battaramulla, Sri Lanka.
+94 11 2 88 70 28 - 34
+94 11 2 88 72 23
ag@auditorgeneral.gov.lk
www.naosl.gov.lk

(ආ) ශ්‍රී ලංකා ගිණුම්කරණ ප්‍රමිති 7 හි 20 ඡේදයට අනුව මුදල් ප්‍රවාහ ප්‍රකාශනය පිළියෙළ කිරීමේදී මෙහෙයුම් ක්‍රියාකාරකම් වලින් ජනනය වූ මුදල් ප්‍රවාහය ගණනය කිරීම සඳහා වෙනත් ක්‍රියාකාරකම්වලට අදාළ ආදායම් ගැළපීම් කිරීමේදී රු.173,562,645 ක්වූ පොලී ආදායම වෙනුවට රු.152,953,478 ක් ලෙස රු.20,609,167ක් අඩුවෙන් ගැළපීම් කර තිබුණි.

(ඇ) ශ්‍රී ලංකා ගිණුම්කරණ ප්‍රමිති 7 හි 28 ඡේදය ප්‍රකාරව විදේශ විනිමය අනුපාත වෙනස්වීම් හේතුවෙන් ඇති වී තිබූ රු. 22,584,145ක් වූ විනිමය අලාභය, මුදල් නොවන ක්‍රියාකාරකම් ලෙස ගැළපීම් කළයුතු වුවද මෙහෙයුම් ක්‍රියාකාරකම් වලින් ජනනය වූ ශුද්ධ මුදල් ප්‍රවාහය ගණනයේදී ගැලපීම් කර නොතිබුණි.

(ඈ) පෙර වර්ෂ සඳහා ලද රු. 89,157,814 ක් වූ ආදායම් ශ්‍රී ලංකා ගිණුම්කරණ ප්‍රමිති 8 හි 42 ඡේදය ප්‍රකාරව අතීතානුයෝගීව නිවැරදි නොකර සමාලෝචිත වර්ෂයේ ආදායම් ලෙස ගිණුම්ගත කර තිබුණි.

(ඉ) සමාලෝචිත වර්ෂය අවසානයට සම්පූර්ණයෙන් ක්ෂය කර අවසන් නමුත් තවදුරටත් භාවිතයේ පවතින පිරිවැය රු. 30,628,206 ක්වූ ගොඩනැගිලි ශ්‍රී ලංකා ගිණුම්කරණ ප්‍රමිති 16 හි 51 ඡේදය හා ප්‍රමිති 08 ප්‍රකාරව ඵලදායී ජීව කාලය නැවත සමාලෝචනය කර ගිණුම්ගතකළ යුතු වුවද, ඒ අනුව කටයුතු කර නොතිබුණු අතර ශ්‍රී ලංකා ගිණුම්කරණ ප්‍රමිති 16 හි 79 (ආ) ඡේදය ප්‍රකාරව මෙම වත්කම් මූල්‍ය ප්‍රකාශනවල හෙළිදරව් කර නොතිබුණි.

(උ) රු.74,266,084ක වටිනාකමක් සහිත ඉඩමක් රු.73,949,175ක් ලෙස දැක්වීම හේතුවෙන් සමාලෝචිත වර්ෂයේ මූල්‍ය ප්‍රකාශන වල ස්ථාවර වත්කම් රු. 316,909 කින් අඩුවෙන් දක්වා තිබුණි.

ශ්‍රී ලංකා විගණන ප්‍රමිතිවලට (ශ්‍රී.ලං.වි.ප්‍ර) අනුකූලව මා විගණනය සිදු කරන ලදී. මෙම විගණන ප්‍රමිති යටතේ වූ මාගේ වගකීම්, මෙම වාර්තාවේ මූල්‍ය ප්‍රකාශන විගණනය සම්බන්ධයෙන් විගණකගේ වගකීම් යන කොටසේ තවදුරටත් විස්තර කර ඇත. මාගේ තත්ත්වාගණනය කළ මතය සඳහා පදනමක් සැපයීම උදෙසා මා විසින් ලබාගෙන ඇති විගණන සාක්ෂි ප්‍රමාණවත් සහ උචිත බව මාගේ විශ්වාසයයි.

1.3 සභාවේ 2024 වාර්ෂික වාර්තාවේ ඇතුළත් අනෙකුත් තොරතුරු

මෙම විගණන වාර්තාවේ දිනට පෙර මා ලබාගත් වෛද්‍ය සභාවේ 2024 වාර්ෂික වාර්තාවේ ඇතුළත් කර ඇති නමුත් මූල්‍ය ප්‍රකාශන සහ ඒ පිළිබඳව වූ මාගේ විගණන වාර්තාවේ ඇතුළත් නොවන තොරතුරු, අනෙකුත් තොරතුරු යන්නෙන් අදහස් වේ. මෙම අනෙකුත් තොරතුරු සඳහා කළමනාකරණය වගකිව යුතුය.

මූල්‍ය ප්‍රකාශන සම්බන්ධයෙන් වූ මාගේ මතයෙන් අනෙකුත් තොරතුරු ආවරණය නොකරන අතර මම ඒ පිළිබඳ කිසිදු ආකාරයක සහතිකවීමක් හෝ මතයක් ප්‍රකාශ නොකරමි.

මෙම විගණක වාර්තාවේ දිනට පෙර මා ලබාගත් අනෙකුත් තොරතුරු මත හා මා විසින් කරන ලද කාර්යයන් මත පදනම්ව, මෙම අනෙකුත් තොරතුරු ප්‍රමාණාත්මක වශයෙන් වැරදි ලෙස

දක්වා ඇති බව මම නිගමනය කරන්නේ නම්, එම කරුණ මා විසින් වාර්තා කිරීමට අවශ්‍ය වේ. මේ සම්බන්ධයෙන් මට වාර්තා කිරීමට කිසිවක් නැත.

1.4 මූල්‍ය ප්‍රකාශන පිළිබඳ කළමනාකරණයේ සහ පාලනය කරන පාර්ශවයන්ගේ වගකීම්

මෙම මූල්‍ය ප්‍රකාශන ශ්‍රී ලංකා ගිණුම්කරණ ප්‍රමිතිවලට අනුකූලව පිළියෙල කිරීම හා සාධාරණ ලෙස ඉදිරිපත් කිරීම සහ වංචා හෝ වැරදි හේතුවෙන් ඇතිවිය හැකි ප්‍රමාණාත්මක සාවද්‍ය ප්‍රකාශයන්ගෙන් තොරව මූල්‍ය ප්‍රකාශන පිළියෙල කිරීමට හැකිවනු පිණිස අවශ්‍ය වන අභ්‍යන්තර පාලනයන් තීරණය කිරීම කළමනාකරණයේ වගකීම වේ.

මූල්‍ය ප්‍රකාශන පිළියෙල කිරීමේදී සභාව අඛණ්ඩව පවත්වාගෙන යාමේ හැකියාව තීරණය කිරීම කළමනාකරණයේ වගකීමක් වන අතර, කළමනාකාරිත්වය සභාව ඈවර කිරීමට අදහස් කරන්නේ නම් හෝ වෙනත් විකල්පයක් නොමැති විටදී මෙහෙයුම් නැවැත්වීමට කටයුතු කරන්නේ නම් හැර අඛණ්ඩ පැවැත්මේ පදනම මත ගිණුම් නැබීම හා සභාවේ අඛණ්ඩ පැවැත්මට අදාළ කරුණු අනාවරණය කිරීමද කළමනාකරණයේ වගකීමකි.

සභාවේ මූල්‍ය වාර්තාකරණ ක්‍රියාවලිය සම්බන්ධව පරීක්ෂා කිරීමේ වගකීම, පාලනය කරන පාර්ශවයන් විසින් දරනු ලබයි.

2018 අංක 19 දරන ජාතික විගණන පනතේ 16 (1) උප වගන්තිය ප්‍රකාරව, සභාවේ වාර්ෂික සහ කාලීන මූල්‍ය ප්‍රකාශන පිළියෙල කිරීමට හැකිවන පරිදි සභාවේ ආදායම්, වියදම්, වත්කම් හා බැරකම් පිළිබඳ නිසි පරිදි පොත්පත් හා වාර්තා පවත්වාගෙන යා යුතුය.

1.5 මූල්‍ය ප්‍රකාශන විගණනය සම්බන්ධයෙන් විගණකගේ වගකීම

සමස්තයක් ලෙස මූල්‍ය ප්‍රකාශන, වංචා සහ වැරදි නිසා ඇතිවන ප්‍රමාණාත්මක සාවද්‍ය ප්‍රකාශනයන්ගෙන් තොර බවට සාධාරණ තහවුරුවක් ලබාදීම සහ මාගේ මතය ඇතුළත් විගණන වාර්තාව නිකුත් කිරීම මාගේ අරමුණ වේ. සාධාරණ සහතිකවීම උසස් මට්ටමේ සහතිකවීමක් වන නමුත්, ශ්‍රී ලංකා විගණන ප්‍රමිති ප්‍රකාරව විගණනය සිදු කිරීමේදී එය සෑමවිටම ප්‍රමාණාත්මක සාවද්‍ය ප්‍රකාශනයන් අනාවරණය කරගන්නා බවට වන තහවුරු කිරීමක් නොවනු ඇත. වංචා සහ වැරදි තනි හෝ සාමූහික ලෙස බලපෑම් නිසා ප්‍රමාණාත්මක සාවද්‍ය ප්‍රකාශනයන් ඇතිවිය හැකි අතර, එහි ප්‍රමාණාත්මක භාවය මෙම මූල්‍ය ප්‍රකාශන පදනම් කරගනිමින් පරිශීලකයන් විසින් ගනු ලබන ආර්ථික තීරණ කෙරෙහි වන බලපෑම් මත රඳා පවතී.

ශ්‍රී ලංකා විගණන ප්‍රමිති ප්‍රකාරව විගණනයේ කොටසක් ලෙස මා විසින් විගණනයේදී වෘත්තීය විනිශ්චය සහ වෘත්තීය සැකමුසුබවින් යුතුව ක්‍රියා කරන ලදී. මා විසින් තවදුරටත්,

- ප්‍රකාශ කරන ලද විගණන මතයට පදනමක් සපයා ගැනීමේදී වංචා හෝ වැරදි හේතුවෙන් මූල්‍ය ප්‍රකාශනවල ඇති විය හැකි ප්‍රමාණාත්මක සාවද්‍ය ප්‍රකාශනයන් ඇතිවීමේ අවදානම් හඳුනාගැනීම හා තක්සේරු කිරීම සහ ඊට අදාළ විගණන සාක්ෂි ලබා ගැනීමට අවස්ථාවෝචිතව උචිත විගණන පරිපාටි සැලැසුම් කර ක්‍රියාත්මක කරන ලදී. වරදවා දැක්වීම් හේතුවෙන් සිදුවන ප්‍රමාණාත්මක සාවද්‍ය ප්‍රකාශයන්ගෙන් සිදුවන බලපෑමට වඩා වංචාවකින් සිදුවන්නා වූ බලපෑම් ප්‍රබල වන්නේ ඒවා දුස්සන්ධානයෙන්, ව්‍යාජ ලේඛන සැකසීමෙන්, චේතනාන්විත මඟහැරීමෙන්, වරදවා දැක්වීමෙන් හෝ අභ්‍යන්තර පාලනයන් මඟ හැරීමෙන් වැනි හේතු නිසා වන බැවිනි.

- සභාවේ අභ්‍යන්තර පාලනයේ සඵලදායිත්වය පිළිබඳව මතයක් ප්‍රකාශ කිරීමේ අදහසින් නොවුවද, අවස්ථාවෝචිතව උචිත විගණන පරිපාටි සැලසුම් කිරීම පිණිස අභ්‍යන්තර පාලනය පිළිබඳව අවබෝධයක් ලබාගන්නා ලදී.

- භාවිතා කරන ලද ගිණුම්කරණ ප්‍රතිපත්තිවල උචිතභාවය, ගිණුම්කරන ඇස්තමේන්තුවල සාධාරණත්වය සහ කළමනාකරණය විසින් කරන ලද සම්බන්ධිත හෙළිදරව් කිරීම් අගයන ලදී.

- සිද්ධීන් හෝ තත්ත්වයන් හේතුවෙන් සභාවේ අඛණ්ඩ පැවැත්ම පිළිබඳ ප්‍රමාණාත්මක අවිනිශ්චිතතාවයක් තිබේද යන්න සම්බන්ධයෙන් ලබාගත් විගණන සාක්ෂි මත පදනම්ව ගිණුම්කරණය සඳහා ආයතනයේ අඛණ්ඩ පැවැත්ම පිළිබඳ පදනම යොදා ගැනීමේ අදාළත්වය තීරණය කරන ලදී. ප්‍රමාණවත් අවිනිශ්චිතතාවයක් ඇති බවට මා නිගමනය කරන්නේ නම් මූල්‍ය ප්‍රකාශනවල ඒ සම්බන්ධයෙන් වූ හෙළිදරව්කිරීම් වලට මාගේ විගණන වාර්තාවේ අවධානය යොමු කළ යුතු අතර, එම හෙළිදරව්කිරීම් ප්‍රමාණවත් නොවන්නේ නම් මාගේ මතය විකරණය කළ යුතුය. කෙසේ වුවද, අනාගත සිද්ධීන් හෝ තත්ත්වයන් මත සභාවේ අඛණ්ඩ පැවැත්ම අවසන් වීමට හැකිය.

- මූල්‍ය ප්‍රකාශනවල ව්‍යුහය හා අන්තර්ගතය සඳහා පාදක වූ ගනුදෙනු හා සිද්ධීන් උචිත හා සාධාරණව ඇතුළත් වී ඇති බව සහ හෙළිදරව් කිරීම් ඇතුළත් මූල්‍ය ප්‍රකාශනවල සමස්ථ ඉදිරිපත් කිරීම අගයන ලදී.

මාගේ විගණනය තුළදී හඳුනාගත් වැදගත් විගණන සොයාගැනීම්, ප්‍රධාන අභ්‍යන්තර පාලන දුර්වලතා හා අනෙකුත් කරුණු පිළිබඳව පාලනය කරනු ලබන පාර්ශවයන් දැනුවත් කරන්නෙමි.

2. වෙනත් නෛතික හා නියාමන අවශ්‍යතා පිළිබඳ වාර්තාව

2.1 2018 අංක 19 දරන ජාතික විගණන පනතේ පහත සඳහන් අවශ්‍යතාවයන් සම්බන්ධයෙන් විශේෂ ප්‍රතිපාදන ඇතුළත් වේ.

2.1.1 2018 අංක 19 දරන ජාතික විගණන පනතේ 12 (අ) වගන්තියේ සඳහන් අවශ්‍යතාවන් අනුව, විගණනය සඳහා අදාළ වන සියලු තොරතුරු සහ පැහැදිලි කිරීම් මා විසින් ලබාගන්නා ලද අතර, මාගේ පරීක්ෂණයෙන් පෙනී යන ආකාරයට නිසි මූල්‍ය වාර්තා සභාව පවත්වාගෙන ගොස් තිබුණි.

2.1.2 2018 අංක 19 දරන ජාතික විගණන පනතේ 6 (1) (ඈ) (iii) වගන්තියේ සඳහන් අවශ්‍යතාවය අනුව සභාවේ මූල්‍ය ප්‍රකාශන ඉකුත් වර්ෂය සමඟ අනුරූප වේ.

2.1.3 2018 අංක 19 දරන ජාතික විගණන පනතේ 6 (i) (ඈ) (iv) වගන්තියේ සඳහන් අවශ්‍යතාවය අනුව ඉකුත් වර්ෂයේදී මා විසින් සිදුකරන ලද නිර්දේශයන් ඉදිරිපත් කරන ලද මූල්‍ය ප්‍රකාශනවල ඇතුළත්ව ඇත.

2.2 අනුගමනය කරන ලද ක්‍රියාමාර්ග සහ ලබා ගන්නා ලද සාක්ෂි මත හා ප්‍රමාණාත්මක කරුණුවලට සීමා කිරීම තුල, පහත සඳහන් ප්‍රකාශ කිරීමට තරම් කිසිවක් මාගේ අවධානයට ලක් නොවීය.

2.2.1 2018 අංක 19 දරන ජාතික විගණන පනතේ 12 (ඇ) වගන්තියේ සඳහන් අවශ්‍යතාවය අනුව සභාවේ පාලක මණ්ඩලයේ යම් සාමාජිකයෙකුට සභාව සම්බන්ධවී යම් ගිවිසුමක් සම්බන්ධයෙන් සෘජුව හෝ අන්‍යාකාරයකින් සාමාන්‍ය ව්‍යාපාරික තත්ත්වයෙන් බැහැරව සම්බන්ධයක් ඇති බව.

2.2.2 2018 අංක 19 දරන ජාතික විගණන පනතේ 12(ඊ) වගන්තියේ සඳහන් අවශ්‍යතාවය අනුව පහත සඳහන් නිරීක්ෂණ හැර යම් අදාළ ලිඛිත නීතියකට සභාවේ පාලක මණ්ඩලය විසින් නිකුත් කරන ලද වෙනත් පොදු හෝ විශේෂ විධානවලට අනුකූල නොවන ලෙස ක්‍රියා කර ඇති බව.

නීතිරීති / විධානයට යොමුව		විස්තරය
(අ)	1971 අංක 38 දරන මුදල් පනත	
	i. 10 (5) වගන්තිය	විසර්ජනයන් සිදුකිරීමෙන් පසුව ඉතිරිවන ශුද්ධ අතිරික්තය ඒකාබද්ධ අරමුදලට බැර කළ යුතු වුවද, ඒ අනුව කටයුතු කර නොතිබුණි.
	ii. 11 වගන්තිය	මුදල් අමාත්‍යවරයාගේ සහ අදාළ අමාත්‍යවරයාගේ අනුමැතිය ඇතිව මීස රජයේ නීතිගත සංස්ථාවක කිසිම මුදලක් ආයෝජනය කරණු නොලැබිය යුතු වුවද, සභාව විසින් සමාලෝචිත වර්ෂය අවසානය වන විට ස්ථාවර තැන්පතුවල හා භාණ්ඩාගාර බිල්පත්වල පිළිවෙලින් රු. 1,150,724,550 ක් හා රු. 314,036,489 ක් ආයෝජනය කර තිබුණි.
(ආ)	ශ්‍රී ලංකා ප්‍රජාතාන්ත්‍රික සමාජවාදී ජනරජයේ මුදල් රෙගුලාසි සංග්‍රහයේ මුදල් රෙගුලාසි 225	නියමිත ආකාරයට නිවැරදි ලෙසත් සම්පූර්ණ ලෙසත් පුරවා පිළියෙල කරන ලද වවුචර සියළුම ගෙවීම් සඳහා ඉදිරිපත් කළ යුතු බව සඳහන් වුවද, සමාලෝචිත වර්ෂයේ දී මාර්ග ගත ක්‍රමයට රු. 42,849,131 ක් ගෙවීම් කර තිබුණද එම ගෙවීම්වලට අදාළ ගෙවීම් වවුචර් පත් පිළියල කර නොතිබුණි.
(ඇ)	2021 නොවැම්බර් 16 දින රාජ්‍ය ව්‍යාපාර දෙපාර්තමේන්තුව විසින් නිකුත් කරන ලද මාර්ගෝපදේශ සංග්‍රහයේ 6 පරිච්ඡේදයේ 6.6 ඡේදය	ගිණුම් වර්ෂය අවසන් වී දින 60 ක් ඇතුළත මූල්‍ය ප්‍රකාශන හා කෙටුම්පත් වාර්ෂික වාර්තාව විගණකාධිපති වෙත ඉදිරිපත් කළයුතු වුවත්, සමාලෝචිත වර්ෂයට අදාළ මූල්‍ය ප්‍රකාශන විගණනයට ඉදිරිපත් කරන ලද්දේ වර්ෂ 01 මාස 02ක් ප්‍රමාද වී එනම් 2026 මැයි 11 දින වන අතර සභාව විසින් වාර්ෂික වාර්තා සභාව ආරම්භයේ සිට පාර්ලිමේන්තුවේ සභාගත කර නොතිබුණි. තවද ඉකුත් වර්ෂයේ වාර්ෂික වාර්තාව පිළියෙල කර සභාවේ වෙබ් අඩවියේ පළකර තිබුණද මාර්ගෝපදේශය ප්‍රකාරව වාර්ෂික මූල්‍ය ප්‍රකාශනවලට අදාළ විගණකාධිපති වාර්තාව ඊට ඇතුළත් කර නොතිබුණි

2021 නොවැම්බර් 16 දින
රාජ්‍ය ව්‍යාපාර
දෙපාර්තමේන්තුව විසින්
නිකුත් කරන ලද මෙහෙයුම්
අත්පොත

i.	3 පරිච්ඡේදයේ 3.1 ඡේදය	සියලුම රාජ්‍ය ව්‍යවසායයන්, කාර්ය මණ්ඩල සහ වැටුප් සඳහා මහා භාණ්ඩාගාරයේ අනුමැතිය ලබාගත යුතු වුවද, සභාව එහි කාර්ය මණ්ඩල සහ වැටුප් සඳහා එසේ අනුමැතිය ලබාගෙන නොතිබුණි.
ii.	3 පරිච්ඡේදයේ 3.2 (i) ඡේදය	සේවක සංඛ්‍යාව, බඳවා ගැනීමේ යෝජනා ක්‍රමය, වැටුප් ව්‍යුහය සහ දීමනා සම්බන්ධයෙන් කළමනාකරණ සේවා දෙපාර්තමේන්තුවේ අනුමැතිය ලබාගත යුතු වුවත්, සභාව ඒ අනුව කටයුතු කර නොතිබුණි.
iii.	3 පරිච්ඡේදයේ 3.2 (v) ඡේදය	දිරිදීමනා යෝජනා ක්‍රමයක් ක්‍රියාත්මක කිරීමේදී ඒ සඳහා රාජ්‍ය ව්‍යාපාර දෙපාර්තමේන්තුවේ අධ්‍යක්ෂ ජනරාල්ගේ අනුමැතිය ලබාගත යුතු වුවද, ඒ අනුව කටයුතු නොකර වෛද්‍යවරුන්ගේ ලියාපදිංචිය සඳහා දායක වන නිලධාරීන් කාණ්ඩ 04 ක් වෙනුවෙන් දිරිදීමනා ලෙස 2024 වර්ෂයේදී රු.1,293,018 ක් වැයකර තිබුණි.

(ඇ)	2024 දෙසැම්බර් 23 දිනැති අංක 03/2024 දරන රාජ්‍ය ව්‍යාපාර වක්‍රලේඛයේ 01(03) ඡේදය	සියළුම රාජ්‍ය ව්‍යවස්ථාපිත ආයතන තම කාර්ය මණ්ඩලය සඳහා ප්‍රසාද දීමනා ගෙවන්නේ නම් 2023 වර්ෂය තුළ ලාභ උපයා ඇති විට බදු පසු ලාභයෙන් අවම වශයෙන් සියයට 30 ක් හෝ ඒකාබද්ධ අරමුදලට අයබදු ලෙස ගෙවිය යුතු වුවද, සභාව ඒ අනුව කටයුතු සිදුනොකර කාර්ය මණ්ඩලය සඳහා 2024 අප්‍රේල් මාසයේදී රු.581,129 ක් හා දෙසැම්බර් මාසයේදී රු.929,050 වශයෙන් එකතුව රු.1,510,179 ක් ප්‍රසාද දීමනා ලෙස සමාලෝචිත වර්ෂයේදී ගෙවීම් කර තිබුණි.
(ඉ)	ජූලි 18 දිනැති අංක 03/2018 දරන කළමනාකරණ සේවා වක්‍රලේඛයේ II ඡේදය	වැටුප් හා දීමනා පිළිබඳ තීරණය කිරීමේ බලය පාලක මණ්ඩලය වෙත ලබාදී නොමැති අතර අමතර ගෙවීම් ලෙස සිදු කරනු ලබන සියලු දීමනා සඳහා මහා භාණ්ඩාගාරයේ කළමනාකරණ සේවා දෙපාර්තමේන්තුවේ පූර්ව අනුමැතිය ලබාගත යුතු වුවද, 2018 පෙබරවාරි 23 හා 2022 අප්‍රේල් 20 දිනැති පාලක මණ්ඩල අනුමැතිය මත පිළිවෙලින් රු.8,700 ක් හා රු.10,000 ක් වශයෙන් එකතුව රු.18,700 ක් මාසික

දීමනාවක් ලෙස සමාලෝචිත වර්ෂයේදී සියලුම සේවකයින් හට රු.6,942,261 ක් ගෙවීම් කර තිබුණි.

2.2.3 2018 අංක 19 දරන ජාතික විගණන පනතේ 12(උ) වගන්තියේ සඳහන් අවශ්‍යතාවය අනුව පහත සඳහන් නිරීක්ෂණ හැර සභාවේ බලතල, කර්තව්‍ය සහ කාර්යයන්ට අනුකූල නොවන ලෙස කටයුතු කර ඇති බව.

(අ) වෛද්‍ය ආඥා පනතේ 12 (1) වගන්තියේ (g) උප වගන්තිය ප්‍රකාරව සභාවේ පාලක මණ්ඩලයට සෞඛ්‍ය සේවා අධ්‍යක්ෂ ජනරාල්වරයා නිල බලයෙන් තේරී පත්වුවද, සමාලෝචිත වර්ෂය තුළ පවත්වන ලද කිසිදු රැස්වීමකට ඔහු සහභාගී වී නොතිබුණි.

(ආ) වෛද්‍ය ආඥා පනතේ 19(c) උප වගන්තිය ප්‍රකාරව සභාවේ නිලධාරීන් සහ සේවකයන් පත්කිරීම, අත්හිටුවීම, ඉවත් කිරීම, රාජකාරි හා වේතන සම්බන්ධව රෙගුලාසි පිළියෙල කළ යුතු බව දක්වා තිබුණද 2014 පෙබරවාරි 28 දිනැති අංක 1851/31 දරන අතිවිශේෂ ගැසට් පත්‍රය මඟින් වෛද්‍ය සභාවේ ලේඛකාධිකාරී පත්කිරීමට අදාළව පළකරන ලද රෙගුලාසි පමණක් විගණනය වෙත ඉදිරිපත් කරන ලදී.

(ඇ) වෛද්‍ය ආඥා පනතේ 19 (d) උප වගන්තිය ප්‍රකාරව ලැබීම් සහ වියදම් පිළිබඳ ගිණුම් තැබීම සහ එවැනි ගිණුම් විගණනය සම්බන්ධව රෙගුලාසි පිළියෙල කළ යුතු බව දක්වා තිබුණද ඒ අනුව කටයුතු කර නොතිබුණි.

(ඈ) වෛද්‍ය ආඥා පනතේ 19 (f) උප වගන්තිය ප්‍රකාරව විශ්ව විද්‍යාල සහ අනෙකුත් ආයතනවල පශ්චාත් උපාධි වෛද්‍ය අධ්‍යාපනයේ අවම ප්‍රමිතීන් පවත්වාගැනීම සම්බන්ධව රෙගුලාසි පිළියෙල කළ යුතු බව දක්වා තිබුණද ඒ අනුව කටයුතු කර නොතිබුණි.

(ඉ) වෛද්‍ය ආඥා පනතේ 26(1) වගන්තිය ප්‍රකාරව රෙජිස්ට්‍රාර්වරයා විසින් එක් එක් ලේඛනය නිවැරදිව යාවත්කාලීනව තබා ගත යුතු බවත් ලේඛනයේ නම සඳහන් අයකු මිය ගිය විට ඔහුගේ නම අදාළ නාම ලේඛනයෙන් ඉවත්කළ යුතු බවත් දක්වා තිබුණද එසේ මිය ගිය අයගේ නම් අදාළ ලේඛනවලින් ඉවත්කිරීම සඳහා හඳුනාගැනීමේ ක්‍රමවත් වැඩපිළිවෙළක් නොතිබුණි. වර්ෂ 05 කට වරක් ලියාපදිංචිය අලුත් කිරීම හේතුවෙන් මියගිය වෛද්‍යවරුන්ගේ නාමයන් යොදාගැනීම තුළින් අක්‍රමිකතා සිදුකිරීමේ හැකියාවක් පැවතියද සභාව ඒ සම්බන්ධයෙන් අවධානය යොමුකර නොතිබුණි.

(ඊ) වෛද්‍ය ආඥා පනතේ 26 (A) (1) වගන්තිය ප්‍රකාරව මෙම ආඥාපනත යටතේ ලියාපදිංචි වී සිටින පුද්ගලයින්ට ලියාපදිංචිය අලුත් කිරීම සඳහා නියමිත වලංගු කාලයන්ද, ගාස්තුද අමාත්‍යවරයා විසින් නියම කළ හැකි වන නමුත් එම නියමිත වලංගු කාලය හා ගාස්තු දක්වමින් රෙගුලාසි නිකුත් නොකිරීම තුළ ආදායම් රැස් කිරීමේ නීත්‍යානුකූල බව ගැටලු සහගත විය. තවද විදේශීය මුදල් ඒකකයක් තුළින් ගාස්තු නියම කර තිබුණද මෙලෙස විදේශීය මුදල් ඒකකයක් තුළින් ගාස්තු නියම කිරීමට අදාළ ප්‍රතිපාදන සලසා නොතිබුණි.

(උ) වෛද්‍ය ආඥා පනතේ 70 වගන්තිය මඟින් පවරනු ලබන සියලුම ගාස්තු කාලයෙන් කාලයට රෙගුලාසි මඟින් වැඩිකිරීමට හෝ අඩු කිරීමට හැකියාව පවතින නමුත්

ආඥාපනතේ 72 (4) වගන්තිය අනුව ඕනෑම රෙගුලාසියක් පාර්ලිමේන්තුව විසින් අනුමත කර රජයේ ගැසට් පත්‍රයක් මඟින් ප්‍රකාශයට පත්කරන තෙක් බලාත්මක නොවූවද සභාව ඒ අනුව කටයුතු සිදු නොකර ගාස්තු වැඩිකර තිබුණු අතර සමාලෝචිත වර්ෂයේ මූල්‍ය ප්‍රකාශන අනුව එලෙස නීත්‍යානුකූල ක්‍රමවේදයකින් තොරව රැස්කළ ආදායම රු. 338,381,882 ක් වී තිබුණි.

2.2.4 2018 අංක 19 දරන ජාතික විගණන පනතේ 12(ඌ) වගන්තියේ සඳහන් අවශ්‍යතාවය අනුව සභාවේ සම්පත් සකසුරුවම් ලෙස, කාර්යක්ෂම ලෙස සහ ඵලදායී ලෙස කාලසීමාවන් තුළ අදාළ නීතිරීති වලට අනුකූලව ප්‍රසම්පාදනය කර භාවිතා කර නොමැති බව.

3. වෙනත් කරුණු

(අ) සේවය හැරගිය රජයේ වෛද්‍ය නිලධාරින්ගෙන් රජයට අයවිය යුතු හිඟ මුදල් හා විදෙස් පුහුණුව ලද විශේෂඥ වෛද්‍ය නිලධාරින් අනුයුක්ත කිරීම සම්බන්ධයෙන් වූ 2025 සැප්තැම්බර් 29 දිනැති අංක MED/MH/SR/2023/78 දරන විශේෂ විගණන වාර්තාවට අනුව 2015 වර්ෂයේ සිට 2024 වර්ෂය දක්වා සේවය හැරගිය වෛද්‍ය නිලධාරින් සංඛ්‍යාව 1437 ක් වුවද එම වෛද්‍ය නිලධාරින්ගෙන් 860 ක් 2024 වර්ෂය දක්වා ලියාපදිංචිය යාවත්කාලීනව පවත්වාගෙන ගෙන ගොස් තිබුණි. තවද සේවය හැරයාමේ නිවේදන නිකුත් කරන ලද වෛද්‍ය නිලධාරින් 288 දෙනෙකුගේ ලියාපදිංචි තොරතුරු වෛද්‍ය සභාවේ ලියාපදිංචිය පිළිබඳ තොරතුරු පද්ධතියේ නොමැති බව දක්වා තිබුණු බැවින් ලියාපදිංචි අංකයක් රහිතව වෛද්‍ය නිලධාරින් සේවයේ නියුක්තව තිබුණි.

(ආ) සභාවේ සභාපතිගේ හා රෙජිස්ට්‍රාර්වරයාගේ උපදෙස් මත වෛද්‍ය සභාව හා සම්බන්ධ සියලුම සීමාවාසික කටයුතු පිළිබඳව සමස්ථ අධික්ෂණය සඳහා සීමාවාසික ඒකකයේ ප්‍රධානී තනතුරට මාසිකව රු.100,000 ක දීමනාවක් මත කොන්ත්‍රාත් පදනමට 2023 ජනවාරි 01 වන දින සිට වර්ෂ 02ක කාලයක් සඳහා නිලධාරියෙකු බඳවාගෙන තිබියදී සීමාවාසික ඒකකයේ ප්‍රධානියා වෙත පවරන ලද කාර්යභාරයෙන් කොටසක් ඉටුකරවා ගැනීම සඳහා තවත් උපදේශකවරයෙකු බඳවාගෙන තිබුණු අතර ඒ සම්බන්ධයෙන් පහත කරුණු නිරීක්ෂණය විය.

i. 2024 ජනවාරි 10 දිනැති අංක BD/CBP/01/01/01-2024 දරන ජාතික අයවැය චක්‍රලේඛයේ 12.5 ඡේදය අනුව කළමනාකරණ සේවා දෙපාර්තමේන්තුවේ නිසි අනුමැතියකින් තොරව අත්‍යාවශ්‍ය තනතුරු පුරප්පාඩු පිරවීම හෝ නව බඳවාගැනීම් සිදු නොකළ යුතු බව සඳහන් වුවද ඒ අනුව කටයුතු සිදු නොකර කාර්ය පැවරුම් පදනමින් මාස 06 ක කාලයක් සඳහා සීමාවාසික ඒකකයේ උපදේශක තනතුරට උපදේශකයකු බඳවාගෙන තිබුණි.

ii. 2024 නොවැම්බර් 29 දිනැති වෛද්‍ය සභාවේ පාලන මණ්ඩල අනුමැතිය මත යටොක්ත උපදේශකවරයාට 2024 දෙසැම්බර් 09 වන දින සිට දිනකට රු. 30,000 බැගින් ද, (උපරිමය මසකට දින 20) ක්ෂේත්‍ර චාරිකා සඳහා නවාතැන් ගාස්තු ප්‍රතිපූර්ණය රාත්‍රියකට රු.15,000 බැගින් රාත්‍රී 25 ක් වෙනුවෙන් රු.375,000 ක්ද, මාස 06 ක කාලය සඳහා උපරිම කිලෝ මීටර් 10000 ක් සඳහා උපරිම ඉන්ධන ලීටර් 1000 කට රු.311,000 ක් සහ වාහන සේවා ගාස්තු ලෙස රු.50,000 බැගින් දෙවතාවක්ද ලබාදීමට පාලක මණ්ඩලය අනුමැතිය ලබා දී තිබුණි. උපදේශකයාගේ පත්වීම් ලිපිය අනුව මෙය මාස හයක පූර්ණ කාලීන කාර්ය පැවරුමක් වන අතර උපරිමය දින 20 ක් ලෙස දක්වා තිබුණි. එසේ වුවද 2024 දෙසැම්බර් 09 වන දින බඳවාගත්

මෙම උපදේශකවරයා දින 03 ක් පමණක් දෙසැම්බර් මාසයේදී සේවය කර තිබුණද දින 20 ක් සඳහා රු.600,000 ක් ගෙවීම් කර තිබුණි.

iii. එසේම 2024 දෙසැම්බර් මාසයේ දින 03 කදී කිලෝමීටර් 1138ක් ධාවනය කළ බව දක්වා තිබුණු අතර එම මුදල් ප්‍රතිපූර්ණය සඳහා බිල්පත් ඉදිරිපත් කර නොතිබුණ ද රු. 36,895ක් ගෙවීම් කර තිබුණි. තවද උපදේශකවරයා විසින් සංවිධානය කරනු ලබන රැස්වීම් සඳහා සහභාගී වන්නන්ට සංග්‍රහ වියදම් ලෙස එක් පුද්ගලයෙකුට රු.500 බැගින් අතිරේක ප්‍රතිලාභ අනුමත කර තිබුණි. මෙම ලබාදෙන ප්‍රතිලාභයට අදාළව උපරිම සීමාවක් සඳහන් නොවුණු අතර බාහිර ආයතනයක් වෙත ගොස් රැස්වීම් පැවැත්වීමේදී සංග්‍රහ කටයුතු අදාළ උපදේශකවරයා විසින් සිදුකිරීම ප්‍රායෝගික නොවීමද නිරීක්ෂණය විය.

iv. 2020 අගෝස්තු 28 දිනැති මුදල් අමාත්‍යාංශයේ අංක 01/2020 දරන රාජ්‍ය මුදල් චක්‍රලේඛයේ 06 ඡේදය අනුව රජයට අවශ්‍ය හදිසි සේවාවන් සපයාගනු පිණිස ආයතනය තුළ සුදුසු පුද්ගලයකු නොමැති බවට අමාත්‍යාංශ ලේකම් පෞද්ගලිකව සෑහීමකට පත්වන්නේ නම් බාහිර පුද්ගලයෙකුගේ සේවය ලබාගත හැකිය. එම කාර්යය දින 90 ක් නොඉක්මවන්නා වූ කෙටිකාලීන පදනමක් මත ලබාගත යුතු හදිසි සේවාවක් විය යුතු අතර එවැනි සේවාවක් සඳහා ගෙවිය හැකි උපරිම මුදල රු.150,000 ක් වේ. මෙම සීමාවන් ඉක්මවන අවස්ථාවලදී එම වෙනස්වීම් වලට හේතු වූ කරුණු පැහැදිලි කරමින් ගණන්දීමේ නිලධාරියාගේ හා ප්‍රධාන ගණන්දීමේ නිලධාරියාගේ නිර්දේශ සහිත ඉල්ලීමක් මහා භාණ්ඩාගාර අනුමැතිය සඳහා රාජ්‍ය මුදල් දෙපාර්තමේන්තුව වෙත ඉදිරිපත් කළ යුතු වුවද මෙම පත් කිරීම සම්බන්ධයෙන් ඒ අනුව කටයුතු කර නොතිබුණි.

එල්.එස්.අයි. ජයරත්න
විගණකාධිපති

Sri Lanka Medical Council

STATEMENT OF FINANCIAL POSITION

As at 31 December 2024

As at 31 December	Note	2024	2023
ASSETS		**Rs.**	**Rs.**
Non-Current Assets			
Property, Plant and Equipment	4	97,122,847	93,436,746
Intangible Assets	5	13,365,103	17,929,431
WFME Recognition	5.8	28,321,706	31,743,246
Financial Assets at Amortized Cost	6	66,707,990	1,124,820,856
Loans to staffs	7.1	1,526,954	-
Deferred Tax Assets	9.2	3,634,249	925,016
Total Non-Current Assets		**210,678,848**	**1,268,855,296**
Current Assets			
Withholding Tax Receivable		145,163	3,198,031
Loans to staffs	7.1	833,250	1,832,825
Financial Assets at Amortized Cost	6	1,398,053,049	181,162,390
Advances, Prepayments, and Refundable Deposits	8	2,767,505	4,001,424
Cash and Cash Equivalents	13	77,142,949	71,271,938
Total Current Assets		**1,478,941,916**	**261,466,609**
Total Assets		**1,689,620,765**	**1,530,321,904**
FUNDS AND LIABILITIES			
Accumulated Fund and Reserves			
Balance as at the Beginning of the Year		1,330,560,815	1,130,298,164
Accumulated fund		-	
OCI Reserve		(756,638)	
Excess of Income over Expenditure		236,094,453	200,262,651
Total Accumulated Fund and Reserves		**1,565,898,630**	**1,330,560,815**
Non-Current Liabilities			
Retirement Benefit Obligation	10	14,575,212	12,086,368
Deferred Income	11.2	36,353,738	59,252,751
Total Non-Current Liabilities		**50,928,949**	**71,339,119**
Current Liabilities			
Deferred Income	11.3	14,780,456	30,224,172
Income Tax Payable	9.1	55,497,435	32,640,590
Payable and Retention	11.1	1,093,288	51,908,375
Accrued Expenses	11.4	1,422,006	13,648,835
Total Current Liabilities		**72,793,185**	**128,421,971**
Total Liabilities			
Total Funds and Liabilities		**1,689,620,765**	**1,530,321,904**

The accounting policies and notes on pages 05 to 40 form an integral part of these financial statements.

These financial statements have been prepared and presented in compliance with Sri Lanka Accounting Standards issued by the Institute of Chartered Accountants of Sri Lanka.

Mr. K. Waduge
Head of Finance

Dr. H.D.B. Herath
Registrar

Dr. H. D. B. Herath
Registrar
Sri Lanka Medical Council

The Governing Board is responsible for these Financial Statements. Signed for and on behalf of the Council By:

Prof. Jayantha Jayawardene
President

Prof. Jayantha Jayawardana
MBBS, MS, FRCOG, FSLCOG
President
Sri Lanka Medical Council

Dr. E.G.D.C. Epitakaduwa
Vice President

Sri Lanka Medical Council

STATEMENT OF COMPREHENSIVE INCOME

Year ended 31 December 2024

	Note	2024	2023
		Rs.	Rs.
Income	**3**	338,381,882	231,618,081
Operating Expenses	**18**	(51,641,606)	(38,140,372)
Operating Income		**286,740,276**	**193,477,709**
Other Income	**12**	105,057	1,171,986
Net Operating Income		**286,845,333**	**194,649,695**
Administrative Expenses	**19**	(113,132,289)	(101,212,388)
Financial and Other Expenses	**20**	(26,738,526)	(36,218,271)
Income over Expenditure for the Year Before Interest and Tax		**146,974,518**	**57,219,036**
Finance Income	**17.1**	173,562,645	220,180,698
Finance Cost	**17.2**	(61,528)	(52,242)
Income over Expenditure for the Year Before Tax		**320,475,635**	**277,347,492**
Income Tax Expense	**9**	(84,381,181)	(77,084,841)
Excess of Income over Expenditure After Taxation		**236,094,453**	**200,262,651**
Other Comprehensive Income			
Items that will not be reclassified subsequently to profit or loss			
Actuarial (Loss)/Gain on Defined Benefit Obligation	**10.1**	(756,638)	-
Total Comprehensive Income for the Year After Tax		**235,337,815**	**200,262,651**

The accounting policies and notes on pages 05 to 40 form an integral part of these financial statements.

Sri Lanka Medical Council

STATEMENT OF CHANGES IN FUNDS AND RESERVES

Year ended 31 December 2024

	Accumulated Fund Rs.	OCI Reserve Rs.	Total Rs.
Balance As at 01 January 2023	1,130,298,164	-	1,130,298,164
Excess of Income over Expenditure After Taxation	200,262,651	-	200,262,651
Actuarial loss on Defined Benefit Obligation	-	-	-
Balance As at 31 December 2023	**1,330,560,815**	**-**	**1,330,560,815**
Balance As at 01 January 2024	1,330,560,815	-	1,330,560,815
Excess of Income over Expenditure After Taxation	236,094,453		236,094,453
Actuarial Gain / Loss on Defined Benefit Obligation	-	(756,638)	(756,638)
Balance As at 31 December 2024	**1,566,655,268**	**(756,638)**	**1,565,898,630**

The accounting policies and notes on pages 05 to 40 form an integral part of these financial statements.

Sri Lanka Medical Council

STATEMENT OF CASH FLOWS

Year ended 31 December 2024

	Note	2024	2023
		Rs.	Rs.
Excess of Income over Expenditure Before Taxation		320,475,635	277,347,492
Adjustments for			
Depreciation	**4.2**	9,535,439	6,103,712
Amortization of Intangible Assets	**5.2**	4,564,328	1,055,527
Amortization of WFME	**5.8**	3,421,540	2,584,955
Interest Income	**17.1**	(152,953,478)	(197,918,781)
Interest for the year - Gratuity	**10.1**	1,080,395	-
Gratuity Provision	**10.1**	1,293,018	986,042
Operating Surplus /(Deficit) before Working Capital Changes		**187,416,878**	**90,158,946**
(Increase)/ Decrease in Withholding Tax Receivable		3,052,868	(198,714)
(Increase) / Decrease in Advances and Prepayments		1,233,919	33,284,428
(Increase)/ Decrease in Receivables		(527,379)	(265,357)
Increase/ (Decrease) in Advances from Members & Other		(50,815,086)	39,274,873
Increase/ (Decrease) in Accrued Expenses		(12,226,829)	6,656,795
Increase/ (Decrease) in Deferred Income		(38,342,728)	(26,703,101)
Cash Generated from/ (used in) Operating Activities		**89,791,643**	**142,207,870**
Income Tax Paid	**9.1**	(64,233,570)	(88,661,731)
Gratuity Paid	**10**	(641,208)	(389,769)
Net Cash from /(used in) Operating Activities		**24,916,865**	**53,156,370**
Cash Flows from/(used in) Investing Activities			
Interest Income	**17.1**	152,953,478	197,918,781
Net Movement in Fixed Deposits	**6.1**	(307,582,258)	(120,553,831)
Net Movement in Treasury Bills and Bonds	**6.2**	148,804,466	(67,267,881)
Accreditation - WFME Recognition	**5.8**	-	(34,328,201)
Purchase of Property Plant and Equipment	**4.1**	(13,221,540)	(2,205,225)
Purchase of Intangible Assets	**5.1**	-	(17,936,248)
Net Cash from/(Used in) Investing Activities		**(19,045,855)**	**(44,372,605)**
Net increase/(Decrease) in Cash and Cash Equivalents		5,871,011	8,783,766
Cash and Cash Equivalents at the Beginning of the Year	**13**	71,271,938	62,488,172
Cash and Cash Equivalents at the End of the Year	**13**	**77,142,949**	**71,271,938**

The accounting policies and notes on pages 05 to 40 form an integral part of these financial statements.

NOTES TO THE FINANCIAL STATEMENTS

Year ended 31 December 2024

1. CORPORATE INFORMATION

1.1. General

Sri Lanka Medical Council ("The Council") is registered as a Statutory Body under the Medical Ordinance No. 26 of 1927. The registered office of the Council is located at No. 31, Norris Canal Road, Colombo 10.

1.2. Principal Activities and Nature of Operations

The Council is established for the purpose of protecting health care seekers by ensuring the maintenance of academic and professional standards, discipline and ethical practice by health professionals who are registered with the Medical Council.

1.3. List of Banks

- Bank of Ceylon
- People's Bank
- National Saving Bank
- Hatton National Bank

1.4. Auditors

The National Audit Office

2. BASIS OF PREPARATION OF FINANCIAL STATEMENTS

2.1. Basis of Preparation

2.1.1 Statement of Compliance

These financial statements have been prepared in accordance with the Sri Lankan Accounting Standards (SLFRSs & LKASs) issued by the Institute of Chartered Accountants of Sri Lanka.

2.1.2 Components of the Financial Statements

These financial statements comprise the Statement of Financial Position, Statement of Comprehensive Income, Statement of Changes in Funds and Reserves, Statement of Cash Flows and Notes to the Financial Statements.

2.1.3 Financial Period

The financial period of the SLMC represents a twelve months period from 1st January 2024 to 31st December 2024.

2.1.4 Basis of Measurement

The financial statements have been prepared on the accrual basis and on the historical cost convention, except where appropriate disclosures are made with regard to fair value under relevant notes.

2.1.5 Comparative Information

Comparative information including quantitative, narrative and descriptive information is disclosed in respect of the previous period for all amounts reported in the financial statements, in order to enhance the understanding of the financial statements of the current period and to improve comparability. Certain prior year figures and phrases have been re-arranged whenever necessary to conform to the current year's presentation.

2.1.6 Functional and Presentation Currency

The financial statements are presented in Sri Lankan Rupees, which is the Institute's functional and presentation currency, in the primary economic environment in which the SLMC operates.

2.1.7 Rounding

All financial information presented in Sri Lankan Rupees has been rounded to the nearest Rupee (Rs.), except when otherwise indicated.

2.1.8 Offsetting

Assets and liabilities or income and expenses, are not offset unless required or permitted by Sri Lanka Accounting Standards (SLFRS & LKAS).

2.1.9 Materiality and Aggregation

Each material class of similar items is presented separately in the financial statements. Items of a dissimilar nature or function are presented separately, unless they are immaterial.

2.1.10 Responsibility and Approval of Financial Statements

The Council of the Sri Lanka Medical Council acknowledges their responsibility for the financial statements. The financial statements for the year ending 31/12/2024 were approved and authorized for issue by the Council at the meeting held on 24th April 2026.

2.1.11 Significant Accounting Judgments, Estimates and Assumptions

Accounting estimates are monetary amounts in financial statements that are subject to measurement uncertainty. The preparation and presentation of financial statements, in conformity with Sri Lanka Accounting Standards, requires Management to make judgments, estimates and assumptions that affect the application of accounting policies and reported amounts of assets, liabilities, income and expenses. Actual results may differ from these estimates and judgments used.

Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognized in the period in which the estimate is revised, if the revision affects only that period or in the period of the revision and future periods if the revision affects both current and future periods. Information about significant areas of estimates, uncertainty and critical judgments in applying accounting policies that have the most significant effects on the amounts recognized in the financial statements is as follows.

2.1.11.a. Defined Benefit Plans

The cost of the defined benefit plan of employees is determined using Projected Unit Credit (PUC) method. Such method involves use of assumptions concerning the discount rate & future rate of salary increments. Due to the long-term nature of the plan, such estimates are subject to significant uncertainty.

2.1.11.b. Changes in Accounting Estimates and Judgments

Any changes in accounting estimates and critical judgements are disclosed in the relevant notes to the financial statements.

2.1.12 Going Concern

The Financial Statements of the Council have been prepared on the assumption that the Council would be able to continue its operations in the foreseeable future. Furthermore, the Council is not aware of any material uncertainties related to the event of conditions that may cast significant doubt upon the SLMC ability to continue as a going concern. Therefore, the Financial Statements continue to be prepared on a going concern basis.

Information about judgments, assumptions and estimation uncertainties that have an effect on the amount recognized and significant risk of resulting in a material adjustment to the SLMC Financial Statements is included in the following Notes:

a) Estimating the useful lives of Property, Plant and Equipment (PPE)
b) Income Tax (current tax and deferred tax)
c) Measurement of defined benefit obligation
d) Recognition and measurement of provisions and contingencies: key assumption about the likelihood and magnitude of an outflow of resources

2.1.13 Current Assets versus Non-current Assets Classification

The SLMC presents assets and liabilities in the Statement of Financial Position based on current/non-current classification.

An asset is classified as current, when it is:

a) Expected to be realized or intended to sold or consumed in the normal operating cycle;
b) Held primarily for the purpose of trading;
c) Expected to be realized within twelve months after the Reporting Period; Or
d) Cash or cash equivalent unless restricted from being exchanged or used to settle a liability for at least twelve months after the Reporting Period.

The SLMC classifies all other assets as non-current.

2.1.14 Current Liabilities versus Non-current Liabilities Classification

A liability is classified as current, when it is:

a) It is expected to be settled in the normal operating cycle;
b) It is held primarily for the purpose of trading;
c) It is due to be settled within twelve months after the Reporting Period; Or
d) There is no unconditional right to defer the settlement of the liability for at least twelve months after the Reporting Period.

The SLMC classifies all other liabilities as non-current. Deferred tax liabilities if any are classified as non-current liabilities.

2.1.15 Statement of Cash Flows

The Statement of Cash Flows has been prepared using the 'indirect method' in accordance with Sri Lanka Accounting Standard – LKAS - 7 on 'Statement of Cash Flows'. Cash and cash equivalent comprise cash in hand, cash at bank and Short-Term investments that are readily convertible to known amount of cash and subject to an insignificant risk of change in value.

Interest received is classified as investing cash flows, while interest paid is classified under the operating cash flows for the purpose of presentation of Statement of Cash Flows.

Bank overdrafts and Short-Term borrowings if any that are re-payable on demand and form an integral part of the SLMC cash management are included as a component of cash and cash equivalent for the purpose of the Statement of Cash Flows.

2.2. CHANGES IN ACCOUNTING POLICIES

The accounting policies have been consistently applied by the Council with those used in the previous year.

2.3. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The principal accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

2.3.1 ASSETS AND THE BASES OF THEIR VALUATION

2.3.1.1. PROPERTY, PLANT AND EQUIPMENT

The SLMC applies the requirements of LKAS 16 on 'Property Plant and Equipment' in accounting for its owned assets which are held for and use in the provision of the services or for administration purpose and are expected to be used for more than one year.

2.3.1.1.(a) Recognition and Measurement

Property, plant and equipment are recognized if it is probable that future economic benefits associated with the asset will flow to the SLMC and the cost of the asset can be reliably measured.

All items of property, plant and equipment are initially recorded at cost and subsequently measured at cost less accumulated depreciation and any impairment losses. Repair and maintenance costs are recognized in the statement of comprehensive income as incurred. The SLMC applies cost model to property, plant and equipment and records at cost of purchase or construction together with any incidental expenses thereon less accumulated depreciation and any accumulated impairment losses. The carrying values of property plant and equipment are reviewed for impairment when events or changes in circumstances indicate that the carrying value may not be recoverable.

2.3.1.1.(b) Freehold Assets

The cost of an item of property, plant and equipment comprise of its purchase price and any directly attributable costs of bringing the asset to working condition for its intended use. The cost of Self-constructed assets includes the cost of materials, direct labor, and any other costs directly attributable to bringing the asset to the working condition for it intended use. This also includes cost of dismantling and removing the items and restoring in the site on which they are located and borrowing costs on qualifying assets. When parts of an item of property, plant and equipment have different useful lives, they are accounted as separate items (major component) of property, plant and equipment.

Property, plant and equipment transferred from third parties are initially measured at fair value at the date on which control is obtained. Purchased software that is integrated to the functionality of the related equipment is capitalized as part of equipment.

2.3.1.1.(c) Leasehold Assets

Leases in terms of which the SLMC assumes substantially all the risk and rewards of ownership are classified as finance leases. Upon initial recognition the leased asset is measured and capitalized at an amount equal to the lower of its fair value and the present value of minimum lease payments. Subsequent to initial recognition, the asset is accounted for in accordance with the accounting policy applicable to that asset. No leasehold assets were belonged to the SLMC at the end of this financial period.

2.3.1.1.(d) Subsequent Costs

The cost of replacing part of an item of property, plant and equipment is recognized in the carrying amount of the item if it is probable that the future economic benefits embodied. Within the part will flow to the SLMC and its cost can be measured reliably. The carrying amount of the replaced part is derecognized. The costs of the day-to-day servicing of property, plant and equipment are recognized in statement of comprehensive income as incurred.

2.3.1.1.(e) De-recognition

Property, plant and equipment are derecognized on disposal or when no future economic benefits are expected from its use. Any gain or loss arising on de-recognition of the asset (calculated as the difference between the net disposal proceeds and the carrying amount of the asset) is recognized in the statement of comprehensive income in the year the asset is derecognized.

2.3.1.1.(f) Depreciation

Depreciation is recognized in the statement of comprehensive income on the straight-line basis over the estimated useful lives of each part of item of Property, Plant and Equipment. Leased assets are depreciated over the shorter of the lease term and their useful lives unless it is reasonably certain that the SLMC will obtain ownership by the end of the lease term. Depreciation of an asset begins when it is available for use whereas depreciation of an asset ceases at the earlier of the date that the asset is classified as held for sale and the date that the asset is de-recognized.

Depreciation is not charged on Freehold Land and Capital Work in Progress. The estimated useful lives are as follows:

Asset Category	**Useful Lives (years)**
Building	20 years
Furniture and Fittings	4 years
Office Equipment	4 years
Other Equipment	4 years
Telephone System	4 years
Computers	4 years
Simulators and Examination Trainer	4 years
Motor Vehicle	5 years

The SLMC reviews annually the estimated useful lives of PPE based on factors such as business plan and strategies, expected level of usage and future developments. Future results of operations could be materially affected by changes in these estimates brought about by changes in the factors mentioned. A reduction in the estimated useful lives of PPE would increase the recorded depreciation charge and decrease the PPE balance.

The depreciation method and residual values of assets are reviewed when indications are present that the residual value or useful life of an asset has changed. If there has been a significant change in the current expectations, residual value, depreciation method or useful life is amended to reflect such changes.

2.3.1.1.(g) Capital Work in Progress – PPE

Capital expenses incurred during the year which are not completed as at the Reporting Date are shown as capital work in progress, whilst the capital assets which have been completed during the year and available to use have been transferred to Property, Plant and Equipment. i.e. when it is in the location and conditions necessary for it to be capable of operating in the manner intended by the SLMC.

2.3.1.2. INTANGIBLE ASSETS

Intangible assets acquired separately are measured on initial recognition at cost. Following initial recognition, intangible assets are carried at cost less any accumulated amortization and any accumulated impairment losses.

The useful lives of intangible assets are assessed to be finite. Intangible assets with finite lives are amortized over the useful economic life and assessed for impairment whenever there is an indication that the intangible asset may be impaired. The amortization period and the amortization method for an intangible asset with a finite useful life is reviewed at least at each financial year end. Changes in the expected useful life or the expected pattern of consumption of future- economic benefits embodied in the asset is accounted for by changing the amortization period or method, as appropriate, and treated as changes in accounting estimates. The amortization expense on intangible assets with finite lives is recognized in the statement of comprehensive income in the expense category consistent with the function of the intangible assets.

2.3.1.2. (a) Computer Software

Acquired computer software licenses are capitalized on the basis of the costs incurred to acquire and bring to use. These costs are amortized over their estimated useful life of four years. Costs associated with maintaining computer software programmes are recognized as an expense as incurred.

Costs recognized as intangible assets are amortized over their estimated useful lives. Costs relating to development of software are carried in capital work in progress until the software is ready for use.

2.3.1.3. THE WORLD FEDERATION FOR MEDICAL EDUCATION (WFME) RECOGNITION

The Accreditation Unit of the Sri Lanka Medical Council (SLMC) achieved the prestigious World Federation for Medical Education (WFME) recognition status spending Rs. 34,328,201.37 in the year 2023 and valid until 31st March 2033. WFME is recognized as an Intangible Asset separately in the Statement of Financial Position and amortized periodically over 10 years.

2.3.1.4. Impairment of Non-Financial Assets

The SLMC assesses at each reporting date whether there is an indication that an asset may be impaired. If such an indication exists or when annual impairment testing for an asset is required, the SLMC makes an estimate of the asset's recoverable amount.

An asset's recoverable amount is the higher of an asset's fair value less costs to sell and its value in use and determined for an individual asset, unless the asset does not generate cash inflows that are largely independent of those from other assets or group of assets.

Where the carrying amount of an asset exceeds its recoverable amount, the asset is considered impaired and is written down to its recoverable amount. In assessing value in use, the estimated future cash flows are discounted to their present value, using a discount rate that reflects current market assessment of the time value of money and the risk specific to the asset. Impairment losses of continuing operations are recognized in the statement of comprehensive income in those expense categories consistent with the function of the impaired asset.

A previously recognized impairment loss is reversed only if there has been a change in the estimates used to determine the assets recoverable amount, since the last impairment loss was recognized. If that is the case, the carrying amount of the asset is increased to its recoverable amount. The increased amount cannot "exceed" the carrying amount that would have been determined, net of depreciation, had no impairment loss been recognized for the asset in prior years. Such reversal is recognized in the statement of comprehensive income.

2.3.1.5. FINANCIAL ASSETS – Initial Recognition and Measurement

2.3.1.5. (a) Financial Assets

The classification of financial assets at initial recognition depends on the financial asset's contractual cash flow characteristics and the SLMC's business model for managing them. With the exception of trade receivables that do not contain significant financing components for which the SLMC has applied the practical expedient, the SLMC initially measures financial assets at their fair value plus transaction costs.

Trade receivables that do not contain a significant financing component for which the SLMC has applied the practical expedient are measured at the transaction price determined under SLFRS 15. In order for a financial asset to be classified and measured at amortized cost or fair value through OCI, it needs to give rise to cash flows that are 'solely payments of principal and interest' on the principal amount outstanding.

The SLMC's business model for managing financial assets refers to how it manages financial assets in order to generate cash flows. The business model determines whether cash flows will result from collecting contractual cash flows or selling financial assets or both. Financial assets and financial liabilities are offset, and the net amount is reported in the Statement of Financial Position, if there is a currently enforceable legal right to offset the recognized amounts and there is an intention to settle on a net basis, to realize the assets and settle the liabilities simultaneously.

The financial assets of the SLMC include receivables, loans and advances to staff, fixed deposits held to collect contractual cash flows, government securities, repurchase agreements and cash and cash equivalents. The SLMC's financial assets are subsequently measured at amortized cost upon satisfaction of both of the following conditions:

a) The financial assets are held within a business model with the objective to hold financial assets in order to collect contractual cash flows and

b) The contractual terms of the financial assets give rise on specified dates to cash flows that are solely payments of principal and interest on the principal amount outstanding.

Accordingly, financial assets at amortized cost are subsequently measured using the effective interest (EIR) method and are subject to impairment. Gains and losses are recognized in profit or loss when the asset is derecognized, modified or impaired.

2.3.1.5. (i) Investment Policy:

Funds are invested only in Government Securities and fixed deposits in state owned banks. Investments are made after considering the higher yield on investment, liquidity, and interest rate risk for reinvestment. All new investment and reinvestment decisions require the approval of the management committee.

2.3.1.5. (ii) Withdrawal Policy:

Withdrawals are not made other than at maturity. Any early withdrawal requires the approval of the management committee and the Council.

2.3.1.5. (b) Financial Liabilities

All financial liabilities are measured at amortized cost, except for financial liabilities at fair value through profit or loss. The SLMC does not have financial liabilities other than payables for the year ended 31st December 2024.

2.3.1.6. TRADE AND OTHER RECEIVABLES

Trade receivables are stated at the amounts they are estimated to realize net of allowances for bad and doubtful receivables.

Other receivables and dues from Related Parties are recognized at cost less allowances for bad and doubtful receivables.

2.3.1.7. CASH AND CASH EQUIVALENTS

Cash and cash equivalents are cash in hand, demand deposits and short-term highly liquid investments, readily convertible to known amounts of cash and subject to insignificant risk of changes in value.

For the purpose of receipts and payments statement, cash and cash equivalents consist of cash in hand and deposits in banks net of outstanding bank over drafts. Investments with short maturities i.e. three months or less from the date of acquisition are also treated as cash equivalents.

2.3.2. LIABILITIES AND PROVISIONS

A liability is classified as current when it is expected to be settled in the normal operating cycle; held primarily for the purpose of trading, it is due to be settled within twelve months after the reporting period or there is no unconditional right to defer the settlement of the liability for at least twelve months after the reporting period. The SLMC classifies all other liabilities as non-current**.**

2.3.2.1. DEFERRED INCOME

Deferred income results when;

2.3.2.1. (a) Renewal and Restoration of Registration of the Members

The Sri Lanka Medical Council (SLMC) receives renewal and restoration fees for member registrations covering a period of five years in advance. Accordingly, such receipts are initially recognized as deferred income.

Income is then recognized in the Statement of Comprehensive Income on a straight-line basis, at the rate of one-fifth (1/5th) of the total fee per annum. The unearned portion relating to future periods is carried as a liability in the Statement of Financial Position, classified between current and non-current liabilities, until it is recognized as income over the remaining period.

2.3.2.1. (b) Recognition of Foreign Medical Schools

The Council has adopted a two-stage evaluation process, comprising Form 1 and Form 2, for the assessment of foreign medical and dental schools. Recognition granted under this process shall remain valid for a period of five years. Accordingly, fees collected in respect of Form 1 and Form 2 evaluations are initially recognized as deferred income.

Income is recognized in the Statement of Comprehensive Income on a straight-line basis at the rate of one-fifth (1/5th) per annum over the five-year recognition period. The unearned portion relating to future periods is carried as a liability in the Statement of Financial Position, classified between current and non-current liabilities, until it is recognized as income.

2.3.2.2. PROVISIONS

Provisions are recognized when the Council has a present obligation (legal or constructive) as a result of a past event, where it is probable that an outflow of resources embodying economic benefits will be required to settle the obligation and a reliable estimate can be made of the amount of the obligation. If the effect of the time value of money is material, provisions are determined by discounting the expected future cash flows at a pre- tax rate that reflects current market assessments of the time value of money and, where appropriate, the risks specific to the liability. Where discounting is used, the increase in the provision due to the passage of time is recognized as an interest expense.

2.3.2.3. EMPLOYEE BENEFITS

(a) Employee Defined Benefit Plan - Gratuity

Defined benefit plan is a postemployment benefit plan, other than a defined contribution plan. The defined benefit is calculated using Projected Unit Credit (PUC) method. The present value of the defined benefit obligation is determined by discounting the estimated future cash outflows, using interest rates that are denominated in the currency in which the benefits will be paid and that have terms to maturity approximating to the terms of the related liability.

The present value of the defined benefit obligations depends on a number of factors that are determined on an actuarial basis using a number of assumptions about discount rate, future salary increments and mortality rates. Due to the long-term nature of these plans, such estimates are subject to significant uncertainty. All assumptions are reviewed at each reporting date.

The SLMC accounting policy for gratuity is to recognize actuarial gains and losses in the period in which they occur in full in the statement of other comprehensive income.

Defined benefit plan defines an amount of benefit that an employee will receive on retirement, usually dependent on one or more factors such as age, years of service and compensation. However, according to the Payment of Gratuity Act No. 12 of 1983, the liability for gratuity payment to an employee arises only after the completion of five years of continued service. The liability is not externally funded by SLMC.

(b) Defined Contribution Plans- Employees' Provident Fund and Employees' Trust Fund

Employees are eligible for Employees' Provident Fund Contributions and Employees' Trust Fund Contributions in line with respective statutes and regulations. These are recognized as an expense in the statement of comprehensive income as incurred. The SLMC contributes 15% and 3% of gross emoluments of the employees to Employees' Provident Fund and Employees' Trust Fund respectively.

2.3.2.4. CURRENT AND DEFERRED TAX

Income tax expense comprises current and deferred tax. It is recognized in profit or loss account.

(a) Current Tax

The provision for current taxation has been computed in accordance with the Inland Revenue Act No 24 of 2017 and as amended subsequently by Inland Revenue (Amendment) Act, No. 45 of 2022.

(b) Deferred Taxation

Deferred tax is recognized in respect of temporary differences between the carrying amounts of assets and liabilities for financial reporting purposes and the amounts used for taxation purposes.

Deferred tax assets are recognized for unused tax losses, unused tax credits and deductible temporary differences to the extent that it is probable that future taxable profits will be available against which they can be used. Deferred tax assets are reviewed at each Reporting Date and are reduced to the extent that it is no longer probable that the related tax benefit will be realized; such reductions are reversed when the probability of future taxable profits improves.

Unrecognized deferred tax assets are reassessed at each Reporting Date and recognized to the extent that it has become probable that future taxable profits will be available against which they can be used. Deferred tax is measured at the tax rates that are expected to be applied to temporary differences when they reverse, using tax rates enacted or substantively enacted at the Reporting Date. The measurement of deferred tax reflects the tax consequences that would follow from the manner in which the Company expects, at the Reporting Date, to recover or settle the carrying amount of its assets and liabilities.

Deferred tax relating to items recognized outside profit or loss is recognized outside profit or loss. Deferred tax items are recognized in correlation to the underlying transaction either in Other Comprehensive Income or directly in equity. Deferred tax assets and deferred tax liabilities are offset if a legally enforceable right exists to set-off current tax assets against current tax liabilities and the deferred taxes relate to the same taxable entity and the same taxation authority.

Significant Judgments Relating to Deferred Taxes

Deferred tax assets are recognized for unused tax losses to the extent that it is probable that taxable profit will be available against which the losses can be utilized. Significant management judgment is required to determine the amount of deferred tax assets that can be recognized, based upon the likely timing and the level of future taxable profits, together with future tax planning strategies.

2.3.3 FOREIGN CURRENCY TRANSLATION

2.3.3.1. Transactions and Balances

All foreign exchange transactions are converted to functional currency. The SLMC determines the functional currency and items included in the Financial Statements of SLMC are measured using that functional currency. Transactions in foreign currencies are initially recorded by the SLMC at their respective functional currency spot rates at the date the transaction first qualifies for recognition. Monetary assets and liabilities denominated in foreign currency are retranslated to functional currencies equivalents at the spot rate of exchange at the Reporting Date.

Non-monetary items that are measured in terms of historical cost in a foreign currency are translated using the exchange rates as at the dates of the initial transactions. Non-monetary assets and liabilities are translated using exchange rates that existed when the values were determined. Foreign currency differences are generally recognized in Statement of Profit or Loss.

NOTES TO THE FINANCIAL STATEMENTS

Year ended 31 December 2024

STATEMENT OF COMPREHENSIVE INCOME

2.3.4 INCOME RECOGNITION

2.3.4.1. Income

The sources of revenue of SLMC are recognized as per SLFRS 15 on "Revenue from contracts with customers". Accordingly, SLFRS 15 establishes five step model to account for revenue recognition at an amount that reflect the consideration where SLMC expects to provide services to its stakeholders. In terms of SLFRS 15, Revenue is recognized upon satisfactory performance obligation is achieved. SLMC expects that, the revenue recognition to occur over time where stakeholders (mainly students and members) simultaneously receive and consume the benefits provided by SLMC and when the SLMC has an enforceable right to receive payment for performance completed. Otherwise, the revenue of the SLMC is recognized at point in time.

The following table provides the details of the sources of revenue and recognition of revenue upon satisfaction of performance obligations as per SLFRS 15.

Revenue Source	Description of Revenue	Recognition of Revenue
Registration	Registration of health professionals is one of the major functions of the SLMC. It registers a total of 19 categories of health professionals. In addition, the SLMC maintains separate registers of Medical Specialists and Dental Specialists who have been registered under Sections 29 and 43 respectively.	Fees received in connection with registration of health professionals are recognized as income at the point in time where the approval of the Council is granted, and payment is due on such applications as the performance obligation to stakeholder service is established.
Renewal of Registration	The SLMC has made the following five-yearly renewal of the number of registrations during the reporting period a) Medical Practitioners, Dentists and Section 41 b) Allied Health	Fees received in connection with renewal of registration applicable for the financial period that is charged from members is recognized as income over time since the performance obligation satisfied over the financial

Revenue Source	Description of Revenue	Recognition of Revenue
		period in which the subscription is due. The subscription charged relating to future periods are shown in the statement of financial position as fees received in advance under current and non-current liabilities as deferred income.
Restoration of Registration	Registrants who failed to renew their registration during the prescribed period are permitted to restore their registration following the due procedure as per the provisions of the Medical Ordinance (Chapter 105). SLMC receives restoration of registration fees for member registrations covering a period of five years in advance.	Fees received in connection with restoration of registration applicable for the financial period that is charged from members is recognized as income over time since the performance obligation satisfied over the financial period in which the subscription is due. The subscription charged relating to future periods are shown in the statement of financial position as restoration of registration fees received in advance under current and non-current liabilities as deferred income.
Specialist Registration	Specialist registration of the SLMC is a separate process under a different Section (Sections 39B and 39BA) of the Medical Ordinance.	Fees received in connection with registration of specialist professionals are recognized as income at the point in time where the approval of the Council is granted, and payment is due on such applications as the performance obligation to stakeholder service is established.
Registration of Additional Qualifications	The SLMC is processing and approving the applications for registration of additional qualifications.	Fees received in connection with registration of additional qualifications are recognized as income at the point in time where the approval of the

Revenue Source	Description of Revenue	Recognition of Revenue
		Council is granted, and payment is due on such applications as the performance obligation to stakeholder service is established.
Temporary Registrations	The SLMC is processing and approving the applications for temporary registrations.	Fees received in connection with temporary registration are recognized as income at the point in time where the approval of the Council is granted, and payment is due on such applications as the performance obligation to stakeholder service is established.
Examinations	The SLMC conducts the Examination for Registration to Practice Medicine (ERPM) and the Examination for Registration to Practice Dental Surgery (ERPDS), each examination two times per year.	Fees on examinations are recognized as income upon satisfactory execution of the performance obligation in the generation of admission.
Recognition of Foreign Medical Schools	The SLMC has adopted a two-stage (Form 1 and Form 2) evaluation process for the evaluation of foreign medical and dental schools for SLMC recognition.	Fees received in connection with recognition of foreign medical schools for the financial period that is charged from those universities is recognized as income over time since the performance obligation satisfied over the financial period in which the subscription is due. The subscription charged relating to future periods are shown in the statement of financial position as fees received in advance under current and non-current liabilities as deferred income.
Issuance of Certificates	The SLMC is processing and approving the applications for certificates of Good Standing (CGS).	Income from issuance of certificates is recognized at the point in time upon issuance of certificates and collect on the payment for the activity.
Medical Verifications	The SLMC is processing and approving the applications for Verifications	Fees on medical verification are recognized as income upon satisfactory execution of the performance obligation in the generation of admission.

Revenue Source	Description of Revenue	Recognition of Revenue
Other Services	The SLMC responds to applications for change of information, requests for issue of certified extracts of documents and in specific occasions, requests for re-issue of corrected/updated certificates.	Income from other services is recognized at the point in time upon providing that other service and collect on the payment for the activity.
Arrears, penalties and fines	Any arrears, penalties and fines in connection with the payments received after the due date	Arrears, penalties and fines in connection with the payments received after the due date are recognized upon receipt of income. Therefore, revenue is recognized at point in time.
Miscellaneous Income	Any other income not specified above	Any other income not specified above is recognized on accrual basis.

2.3.4.2. Finance Income:

Finance income comprises of Interest income which has been recognized using effective interest rate method (EIR) according to SLFRS 09 Financial Instruments.

2.3.4.3. Gains & losses

Net gains and losses of a revenue nature arising from the disposal of property, plant and equipment and other non-current assets, including investments, and foreign currency translation are accounted for in the statement of comprehensive income, after deducting from the proceeds on disposal, the carrying amount of such assets and the related selling expenses.

2.3.4.4. Other income

Other income is recognized on an accrual basis.

2.3.5. EXPENDITURE RECOGNITION

Expenses in carrying out activities of the SLMC are recognized in the statement of comprehensive income during the period in which they are incurred. Other expenses incurred in administering and running the SLMC and in restoring and maintaining the property, plant and equipment to perform at expected levels are accounted for on an accrual basis and charged to the statement of comprehensive income. Expenses are presented in the statement of comprehensive income using nature of expenses method.

(a) Project Expenses

Expenses in carrying out the projects of the SLMC are recognized in the statement of comprehensive income during the period in which they are incurred and the basis for identifying project expenses are mainly on locations of the project, staff allocated to the project and projected activities of the project according to the project proposal.

Expenses are recognized in the statement of comprehensive income on the basis of direct association between the cost incurred and the earning of specific items of income.

(b) Administrative and Operational Expenses

All administrative and operational expenditure incurred in the running of the SLMC and in maintaining the capital assets in a state of efficiency has been charged against income in arriving at the income over expenditure for the year.

All administrative and operational expenditure incurred are recognized in the statement of comprehensive income on an accrual basis.

(c) Finance Expenses

Finance expenses are recognized on an accrual basis when they are paid or create liabilities.

3. INCOME	**2024**	**2023**
	Rs.	**Rs.**
Fees - Registration, Registration Renewal and Services	207,888,208	155,578,907
Examination Fees	120,298,820	68,724,323
Recognition of Foreign Medical Schools Income - Form I & 2	10,194,854	7,314,852
	338,381,882	231,618,081

4. PROPERTY, PLANT AND EQUIPMENT

4.1 Carrying Amounts	**Balance As at 01.01.2024**	**Additions**	**Disposals**	**Balance As at 31.12.2024**
	Rs.	**Rs.**	**Rs.**	**Rs.**
At Cost				
Land	74,266,084	-		74,266,084
Buildings	35,990,804	5,624,310		41,615,114
Furniture and Fittings	6,329,222	1,579,396		7,908,618
Office Equipment	21,369,496	5,969,777		27,339,274
Other Equipment	3,834,673	48,057		3,882,729
Telephone System	479,771	-		479,771
Simulators and Examination Trainer	749,570	-		749,570
Computer Software	248,874	-		248,874
Motor Vehicles	217,500	-		217,500
Computer Network System Equipment	4,634,155	-		4,634,155
Total Value of Depreciable Assets	**148,120,150**	**13,221,540**	**-**	**161,341,689**

4.2 Depreciation	**Balance As at 01.01.2024**	**Change for the year**	**Disposals**	**Balance As at 31.12.2024**
	Rs.	**Rs.**	**Rs.**	**Rs.**
At Cost				
Buildings	27,366,848	3,964,732		31,331,580
Furniture and Fittings	5,011,489	793,196		5,804,685
Office Equipment	15,348,494	3,416,354		18,764,848
Other Equipment	3,366,378	232,052		3,598,429
Telephone System	446,598	8,769		455,367
Simulators and Examination Trainer	749,570	-		749,570
Computer Software	248,874	-		248,874
Motor Vehicles	217,500	-		217,500
Computer Network System Equipment	1,927,652	1,120,337		3,047,989
Total Depreciation	**54,683,404**	**9,535,439**		**64,218,843**

4.3 Net Book Values

	2024	**2023**
At Cost	**Rs.**	**Rs.**
Land	74,266,084	74,266,084
Buildings	10,283,534	8,623,956
Furniture and Fittings	2,103,933	1,317,733
Office Equipment	8,574,425	6,021,002
Other Equipment	284,300	468,295
Telephone System	24,404	33,173
Simulators and Examination Trainer	-	-
Computer Software	(0)	(0)
Motor Vehicles	(0)	(0)
Computer Network System Equipment	1,586,166	2,706,503
Total Carrying Amount of Property, Plant and Equipment	**97,122,847**	**93,436,746**

4. PROPERTY, PLANT AND EQUIPMENT (Contd...)

4.4 The useful lives of the assets are estimated as follows:	**2024**	**2023**
Buildings	20 Years	20 Years
Motor Vehicles	5 Years	5 Years
Furniture and Fillings	4 Years	4 Years
Office Equipment	4 Years	4 Years
Other Equipment	4 Years	4 Years
Telephone System	4 Years	4 Years
Simulators and Examination Trainer	4 Years	4 Years
Computer Network System Equipment	4 Years	4 Years

4.5 Title Restrictions on Property Plant & Equipment

There is no title restrictions on property plant & equipment items as at the reporting date.

4.6 Right of use asset

There were no items of property, plant and equipment categorized as right of use asset as at the reporting date.

4.7 Fully depreciated property, plant and equipment at cost

As at 31 December 2024	**2024**	**2023**
Furniture and Fittings	4,427,373	4,381,754
Office Equipment	11,961,448	11,719,070
Other Equipment	3,359,845	3,001,910
Telephone System	444,771	444,771
Simulators and Examination Trainer	749,570	749,570
Computer Software	248,874	248,874
Motor Vehicles	217,500	217,500
Computer Network System Equipment	170,000	170,000
Total	**21,579,381**	**20,933,449**

4.8 Impairment of property, plant and equipment

The Management has assessed the potential impairment loss of property, plant and equipment as at 31 December 2024. Based on the assessment, no impairment provision is required to be made in the financial statements as at the reporting date in respect of property, plant and equipment.

4.9 Property, plant and equipment pledged as security

There were no items of property, plant and equipment pledged as securities for liabilities as at the reporting date.

5. INTANGIBLE ASSETS

Software

5.1 Carrying Amounts At Cost	**Balance As at 01.01.2024 Rs.**	**Additions Rs.**	**Disposals Rs.**	**Balance As at 31.12.2024 Rs.**
CGS Module Version 1.0.0	75,000	-	-	75,000
Document Archiving system	16,162,873	-	-	16,162,873
EMIS Software-Uni Consultancy	3,234,800	-	-	3,234,800
Paper Marking Software	470,000	-	-	470,000
QuickBooks Acc.Software 2020	216,000	-	-	216,000
Intangible Assets:SLMC Database	1,305,000	-	-	1,305,000
Intangible Assets: Windows Server	468,375	-	-	468,375
Year As at 31 December	**21,932,048**	**-**	**-**	**21,932,048**

5.2 Amortization	**Balance As at 01.01.2024 Rs.**	**Change for the year Rs.**	**Disposals Rs.**	**Balance As at 31.12.2024 Rs.**
CGS Module Version 1.0.0	26,507	18,801	-	45,308
Document Archiving system		4,051,789	-	4,051,789
EMIS Software-Uni Consultancy	3,234,800	-	-	3,234,800
Paper Marking Software	470,000	-	-	470,000
QuickBooks Acc.Software 2020	159,041	49,488	-	208,529
Intangible Assets:SLMC Database	-	327,144	-	327,144
Intangible Assets: Windows Server	112,268	117,107	-	229,375
Year As at 31 December	**4,002,616**	**4,564,328**	**-**	**8,566,945**

5.3 Net Book Value

	2024	2023
At Cost	**Rs.**	**Rs.**
CGS Module Version 1.0.0	29,692	48,493
Document Archiving system	12,111,084	16,162,873
EMIS Software-Uni Consultancy	-	-
Paper Marking Software	-	-
QuickBooks Acc.Software 2020	7,471	56,959
Intangible Assets:SLMC Database	977,856	1,305,000
Intangible Assets: Windows Server	239,000	356,107
Total Carrying Amount of Intangible Assets	**13,365,103**	**17,929,431**

5.4 The useful lives of the assets are estimated as follows:	**2024**	**2023**
All Intangible Assets (All Types of Computer Software)	4 Years	4 Years

5.5 Impairment of intangible assets

The Management has assessed the potential impairment loss of intangible assets as at 31 December 2024. Based on the assessment, no impairment provision is required to be made in the financial statements as at the reporting date in respect of intangible assets.

5.6 Intangible assets pledged as security

There were no items of intangible assets pledged as securities for liabilities as at the reporting date.

5.7 Title restriction on intangible assets

There are no restrictions that existed on the title of the intangible assets of the SLMC as at the reporting date.

5.8 WFME recognition

	2024	2023
5.8 WFME recognition	**Rs.**	**Rs.**
5.8.1 At Cost		
As at 01 January	34,328,201	-
Additions during the	-	34,328,201
Year As at 31 December	34,328,201	34,328,201
5.8.2 Amortization		
As at 01 January	2,584,955	-
Amortization charge for the Year	3,421,540	2,584,955
As at 31 December	6,006,495	2,584,955
5.8.3 Net Book Value	28,321,706	31,743,246
As at 31 December	**28,321,706**	**31,743,246**

5.8.4 The useful lives of the assets are estimated as follows:	**2024**	**2023**
WFME Recognition	10 Years	10 Years

6. FINANCIAL ASSETS AT AMORTISED COST

As at 31 December	2024	2023
	Rs.	**Rs.**
Maturity within one year - Fixed Deposits	1,084,016,561	-
- Bills	303,835,065	-
- Bonds	10,201,424	181,162,390
Total Financial Assets at Amortized Cost Maturity within one year	**1,398,053,049**	**181,162,390**
Maturity after one year - Fixed Deposits	66,707,990	843,142,292
- Bills	-	272,242,821
- Bonds	-	9,435,743
Total Financial Assets at Amortized Cost Maturity after one year	**66,707,990**	**1,124,820,856**

As at 31 December	**2024**	
	Carrying Value	**Fair Value**
	Rs.	**Rs.**
Fixed deposits	1,150,724,550	1,231,549,702
Treasury Bills	303,835,065	328,931,060
Treasury Bonds	10,201,424	10,284,960
Total	**1,464,761,039**	**1,570,765,722**

6. 1 TOTAL INVESTMENT IN FIXED DEPOSITS

As at 31 December	2024	2023
	Rs.	Rs.
Bank of Ceylon	589,143,058	532,146,203
National Savings Bank	203,780,746	178,996,280
Peoples Bank	357,800,746	131,999,809
Total Carrying Value of Investments	**1,150,724,550**	**843,142,292**

6. 2 TOTAL INVESTMENT IN TREASURY BILLS AND BONDS

As at 31 December	2024	2023
	Rs.	Rs.
National Savings Bank - **Treasury Bills**	303,835,065	272,242,821
National Savings Bank - **Treasury Bonds**	10,201,424	190,598,133
Total Carrying Value of Investments	**314,036,489**	**462,840,954**

6.2 Impairment of Financial Assets

Refer Note 2.3.6. for Risk management disclosures and maturity analysis of the financial assets.
Fixed deposits, Treasury Bills, and Treasury Bonds have been placed in a state owned bank .

7. LOANS TO STAFFS	2024	2023
	Rs.	Rs.
Staff Loan	916,397	1,072,950
Distress Loan	1,443,807	759,875
	2,360,204	**1,832,825**

7.1 CURRENT & NON CURRENT OF STAFF LOAN AND DISTRESS LOAN	2024	2024
	Rs.	Rs.
	Staff Loan	Distress Loan
Receivable within one year	293,730	539,520
Receivable after one year	622,667	904,287
Total	**916,397**	**1,443,807**

8. ADVANCES, PREPAYMENTS AND REFUNDABLE DEPOSITS	2024	2023
	Rs.	Rs.
Festival Advances	369,000	297,000
Prepayments and Refundable Deposits	2,398,505	3,704,424
	2,767,505	**4,001,424**

9. INCOME TAX		**2024 Rs.**	**2023 Rs.**
The major components or income tax expense for the years ended 31 December areas follows:			
Statement or Profit or Loss			
Current Income Tax Charge (9.1)		87,090,415	76,282,179
Under/(Over) Provision in Respect of Prior Year		-	-
Deferred Income Tax	**9.2.1**	(2,709,234)	802,662
Deferred Taxation Charge/ (Reversal)			
Income tax Expense reported in the Statement or Profit or Loss		**84,381,181**	**77,084,841**

9.1 A. reconciliation between tax expense and the product of accounting profit multiplied by the statutory tax rate is follows,

	2024 Rs.	**2023 Rs.**
Income Over Expenditure Before Taxation	320,475,635	277,347,492
Aggregate Allowed Items	(92,260,256)	(233,586,472)
Aggregate Disallowed Items	58,910,527	38,470,964
Net Income	**287,125,907**	**82,231,984**
Allowed Other Income	3,175,477	172,041,948
Statutory Tax@ 14%		
Statutory Tax@ 24%		
Statutory Tax@ 30%	87,090,415	76,282,179
Income Tax Expense Reported in the Statement of Income and Expenditure	**87,090,415**	**76,282,179**

9.1. B. INCOME TAX PAYABLE

As at 31 December	**2024**	**2023**
Balance brought forward	32,640,590	45,020,142
Tax provision for previous years		
Charge for the period	87,090,415	76,282,179
Total payable	**119,731,005**	**121,302,321**
Tax paid during the year	64,088,407	85,463,700
WHT paid	145,163	3,198,031
Income tax payable	(119,731,005)	(121,302,321)
Income tax receivable		
Net income tax payable	**(55,497,435)**	**(32,640,590)**

9.2 Deferred Tax

Deferred Tax Assets, Liabilities and Income Tax relates to the Followings	**Statement of Financial Position** **2024 Rs.**	**2023 Rs.**
Deferred Tax Assets/Liability		
Deferred Tax Liability (Property, Plant and Equipment)	(7,468)	(2,700,893)
Deferred Tax Liability (Intangible Assets)	(730,846)	
Deferred Tax Assets (Defined Benefit Plans)	4,372,563	3,625,910
Net Deferred Tax Assets Deferred Tax Income /(Expense)	**3,634,249**	**925,017**

9.2.1 The movement in Deferred Tax Assets/(Liabilities) is as follows	**2024 Rs.**	**2023 Rs.**
As at I January	925,016	1,727,678
Deferred Tax (Expense)/Reversal for the year	2,709,234	(802,662)
As at 3 I December	**3,634,249**	**925,016**

10. RETIREMENT BENEFIT OBLIGATION

As at 31 December	2024	2023
10.1 Provision made during the year	**Rs.**	**Rs.**
Balance at the beginning of the year	12,086,368	11,490,095
Payments made during the Year	(641,208)	(389,769)
Interest cost	1,080,395	-
Current service cost	1,293,018	986,042
Net actuarial loss/(gain) recognized in other comprehensive income	756,638	-
Total provision made during the year	**14,575,212**	**12,086,368**

Under the Gratuity Act No.12 of 1983, gratuity liability arises only upon an employee completing a continuous service of five years.

10.2 Principal assumptions used

The assumptions used in determining the cost of retirement benefits as at 31 December 2024 are as follows,

Assumption	**2024**
Discount interest rate *	10% per annum
Staff turnover rate	7% per annum
Salary increment rate	10.00%
Retirement age	60 years

* In the absence of a deep market in long term bonds in Sri Lanka, a long term interest rate of 10% p.a has been used to discount future liabilities considering anticipated long term rate of inflation.

10.3 Sensitivity analysis

The following table demonstrates the sensitivity to a reasonably possible change in the key assumptions used with all other variables held constant in the retirement benefit obligation measurement.

As at 31 December **Assumption**	**2024** **Increase / (decrease) of defined benefit obligation**
Sensitivity analysis to discount rate	
1% increase in discount rate	(993,741)
1% decrease in discount rate	1,086,178
Sensitivity analysis to salary escalation rate	
1% increase in salary escalation rate	1,075,951
1% decrease in salary escalation rate	(1,002,458)

10.4 Maturity Profile of the defined benefit obligation

Future working life time As at 31 December	**Defined benefit obligation** **2024**
Within next 12 months	38,675
Between 1 to 5 years	1,022,423
Between 5 to 10 years	1,926,778
Beyond 10 years	11,587,335
Total	**14,575,211**

Weighted Average duration of Defined Benefit Obligation is 9 years.

11 CURRENT LIABILITIES

11.1 ADVANCES FROM MEMBERS & OTHER	**2024**	**2023**
	Rs.	**Rs.**
11.1 Current Liability - Retention Payables and Other Payable		
Retention Payables and Other Payable	1,093,288	51,908,375
	1,093,288	**51,908,375**
11.2 Non Current Liability - Deffered Income		
Deffered Income - Renewal & Restoration	14,295,360	57,506,681
Deffered Income - Form I & 2	22,058,378	1,746,070
	36,353,738	**59,252,751**
11.3 Current Liability - Deffered Income		
Deffered Income - Renewal & Restoration	3,573,840	29,489,672
Deffered Income - Form I & 2	11,206,616	734,500
	14,780,456	**30,224,172**

11.4 ACCRUED EXPENSES	**2024**	**2023**
	Rs.	**Rs.**
Electricity	221,356	-
Water	31,254	-
Security services	269,395	-
Audit fees	750,000	-
Tax Preparation Fees	150,000	
Other Accrued Expenses	-	13,648,835
	1,422,006	**13,648,835**

12. OTHER INCOME	**2024**	**2023**
	Rs.	**Rs.**
Miscellaneous Income	87,557	60,740
Penalty charges from Renewal & Registration	-	1,092,246
Non Refundable Income- Bid	17,500	19,000
	105,057	**1,171,986**

13. CASH AND CASH EQUIVALENTS	**2024**	**2023**
	Rs.	**Rs.**
Components of Cash and Cash Equivalents		
13.1 Favorable Cash and Cash Equivalent Balances Cash and Bank Balances	79,015,608	72,044,632
13.2 Unfavorable Cash and Cash Equivalent Balances Bank Overdrawn - as per ledger	(1,872,660)	(772,695)
Total Cash and Cash Equivalents For the Purpose of Cash Flow Statement	**77,142,949**	**71,271,938**

Unfavorable cash book balance, arising from unpresented cheques, are reclassified as Bank overdrafts in Cashbook and presented under favorable balances of cash and cash equivalent.

14. EMPLOYEE COSTS	**2024**	**2023**
For the year ended 31 December	**Rs.**	**Rs.**
Salaries and wages	52,111,184	44,090,203
Defined contribution plan cost		
- Employees' Provident Fund	4,504,765	4,052,144
- Employees' Trust Fund	1,133,984	810,429
Other staff related cost	3,234,618	3,773,919
Insurance	2,550,543	1,907,472
Defined benefit plan cost	1,293,018	986,042
Total employee costs	**64,828,112**	**55,620,209**

15. MAINTENANCE OF PREMISES	**2024**	**2023**
For the year ended 31 December	**Rs.**	**Rs.**
Utilities (Electricity, Water, Security)	6,919,231	6,855,965
Maintenance of building	1,396,777	1,514,563
Maintenance of equipment	882,672	625,258
Total maintenance of premises	**9,198,679**	**8,995,786**

16. DEPRECIATION AND AMORTISATION	**2024**	**2023**
For the year ended 31 December	**Rs.**	**Rs.**
Depreciation for the year	9,535,439	6,103,712
Amortization of intangible assets	4,564,328	1,055,527
Total depreciation and amortization	**14,099,768**	**7,159,238**

17. NET FINANCE INCOME

17.1 Finance income

For the year ended 31 December	**2024**	**2023**
Interest income from,	**Rs.**	**Rs.**
Interest on Fixed Deposits (LKR)	99,823,562	106,798,758
Interest on Fixed Deposits (USD)	20,536,171	22,176,976
Interest on Treasury Bills/ Bonds	50,132,492	89,354,433
Interest on Fund Management and Money Market Account	2,824,761	1,652,068
Interest on Savings Account	89,788	65,418
Interest on Staff Loans	72,996	84,940
Interest on RFC Account	82,875	48,103
Total finance income	**173,562,645**	**220,180,698**

17.2 Finance cost	**2024**	**2023**
For the year ended 31 December	**Rs.**	**Rs.**
Bank Charges and Debit Tax	61,528	52,242
Total finance cost	61,528	52,242
Net finance income	**173,501,117**	**220,128,455**

Sri Lanka Medical Council

DETAILED INCOME STATEMENT

Year ended 31 December 2024

18. OPERATING EXPENSES	**2024**	**2023**
	Rs.	**Rs.**
Examiner Fees	6,221,680	9,829,786
ERPM Exam	15,708,723	-
Supervisors and Co-Ordinator's Fees	4,551,080	3,195,420
Result Board	-	15,000
Supporting Staff Payments - SLMC	409,235	429,165
Supporting Staff Payments - Others	3,911,773	5,836,110
Exam Hall Charges	1,536,250	1,509,750
Exam Equipment	-	25,500
Payments for Patients	1,294,900	1,613,750
Refreshments	4,608,985	5,796,853
Payment for ERPDS exam	705,763	217,800
Printing, Postage and Stationery	483,640	921,366
Travelling	140,917	82,418
Meeting Expenses	469,748	862,500
Telephone Charges	8,001	13,041
Advertisements	742,123	389,597
Repairs and Maintenance	228,453	117,545
Identity Card Preparation Charges	1,148,070	1,585,820
Committee Meeting Allowances	5,661,635	2,673,000
Council Meeting Allowances and Travelling Charges	2,598,930	2,693,180
Covid 19 Expenses(General)	-	7,200
Courier Charges	5,300	1,750
Quest. Papers& Correction Fees	320,725	314,820
Document Archiving	822,676	-
Re-scrutiny	63,000	9,000
	51,641,606	**38,140,372**

19. ADMINISTRATIVE EXPENSES	**2024**	**2023**
	Rs.	**Rs.**
Staff Salaries and Allowances	35,428,415	30,538,586
Overtime	679,391	337,409
Allowance to Registrar	3,557,988	3,226,775
Allowance to Staff-Renewal Registration	1,235,724	87,543
Allowance to Asst. Registrar	2,709,504	1,860,438
Allowance to Legal Officer	1,637,660	1,725,000
Allowance to Accreditation Head	1,714,000	1,980,000
Allowance lo President	620,000	720,000
Allowance lo Head of Finance	1,755,662	974,252
Allowance to Internship Head	1,200,000	1,200,000
Allowances on Reports of PPC	1,469,589	1,320,000
Allowances: Mrs. Daluwalta	-	79,200
Allowances: NITA Trainees	103,250	41,000
Fees for Reviewing Medical School	1,773,979	998,600
EPF	4,504,765	4,052,144
ETF	1,133,984	810,429
Bonus	1,510,179	1,663,798
Gratuity Expense	1,293,018	986,042
Election Expenses	-	9,555,471
Hall Charges	757,488	870,000
Depreciation	9,535,439	6,103,712
Amortization	4,564,328	1,055,527
Staff Welfare	256,881	520,805
Refreshment and Others	1,526,737	1,117,574
Travelling	753,309	443,543
Rates-Colombo Municipal Council Security Services	289,212	300,608
Security Services	3,398,510	3,465,419
Electricity	3,105,506	3,007,054
Water	415,216	383,492
Telephone	1,634,297	1,050,411
Events Celebrations	1,561,510	-
Staff Insurance	2,550,543	1,827,057
Subscription for Professions	339,291	0
General Insurance	-	80,414
Repairs and Maintenance		
Computers	114,062	33,500
Motor Bicycle	110,770	62,647

Sri Lanka Medical Council

DETAILED INCOME STATEMENT

Year ended 31 December 2024

19. ADMINISTRATIVE EXPENSES (Cont.)	**2024**	**2023**
	Rs.	**Rs.**
Building, Office and Equipment	959,161	1,088,077
Elevator	110,000	84,000
Web Site	1,891,874	1,785,006
Air Conditioner	189,128	271,761
Quick Book Software	18,720	17,985
Online Renewal and Restoration system	598,000	-
Other Repairs and maintenance	254,258	-
Microsoft 365 Subscription	25,243	55,801
Printers	-	56,750
Telephone	72,422	62,138
Software	31,900	14,809
Adobe Acrobat Subscription	59,523	73,130
Photocopiers	312,659	378,973
Board PAC Software	-	593,973
Fire Extinguishers	18,500	31,250
Grammarly Software	-	53,973
Virtual Hosting Server/ Zoom Subscription	93,828	150,787
Printing and Stationery	2,184,505	2,612,710
Postage	222,230	198,880
Newspapers and Periodicals	47,400	62,280
Advertising and Establishment	4,053,646	1,346,025
Oath Ceremony Expenses	2,525,675	3,505,621
Staff Training	735,900	285,750
Gardening Expenses	-	35,400
Hall Charges	-	62,750
Refreshments	62,149	77,639
Accreditation Site Visit	1,110,850	1,814,954
Building Repairs (Accreditation)	138,488	70,725
WFME Recognition	3,421,540	2,584,955
Work Shop Expenses	731,658	1,083,566
Cleaning & Maintenance Expense	22,826	54,269
Leave Encashment	-	220,000
	113,132,289	**101,212,388**

20. FINANCIAL AND OTHER EXPENSES	**2024**	**2023**
	Rs.	**Rs.**
Exchange Loss	22,584,145	26,024,586
Legal Fees	1,118,232	8,165,286
Audit Fees	1,273,920	517,201
Tax Preparation Fees	150,000	-
Interest for the year - Gratuity	1,080,395	-
Consultation Charges	-	95,000
Surcharge	1,350	34,968
PCC Expenses	135,000	135,000
Professional Fees	395,484	1,246,230
	26,738,526	**36,218,271**

21. COMMITMENTS AND CONTCNGENCIES

21.1 Commitments

There are no significant commitments as at the end of the reporting period

21.2 Contingent Liabilities

There are no significant contingent liabilities as at the end of the reporting period, except for the following legal cases which are in progress.

- **SC Appeal 81/2023** – This is a case filed by Prof. Narada Digagamini Warnasuriya and Dr. Pushpitha Dharshana. The 01st respondent is the Minister of Health, the 02nd respondent is the Chairman and 03rd to 06th Respondents are the members of the Committee appointed by the 01st respondent for the purpose of inquiring into the complaints related to the SLMC. The 07th Respondent is the new President of the SLMC Appointed by the 01st Respondent.

- **SC Appeal 82/2023** – This is a case filed by Prof. D.G. Harendra De Silva, Dr. W.M. Sunil Rathnapriya and Dr. U.M. Gunasekara. The 01st respondent is the Minister of Health, the 02nd respondent is the Chairman and 03rd to 06th Respondents are the members of the Committee appointed by the 01st respondent for the purpose of inquiring into the complaints related to the SLMC. The 07th Respondent is the new President of the SLMC Appointed by the 01st Respondent.

- **SC Appeal 83/2023** – This is a case filed by Prof. Narada Digagamini Warnasuriya and Dr. Pushpitha Dharshana Sunil Abeysiri. The 01st respondent is the Minister of Health, the 02nd respondent is the Chairman and 03rd to 06th Respondents are the members of the Committee appointed by the 01st respondent for the purpose of inquiring into the complaints related to the SLMC. The 07th Respondent is the new President of the SLMC Appointed by the 01st Respondent.

- **SC Appeal 84/2023** - This is a case filed by Prof. D.G. Harendra De Silva, Dr. W.M. Sunil Rathnapriya and Dr. U.M. Gunasekara. The 01st respondent is the Minister of Health, the 02nd respondent is the Chairman and 03rd to 06th Respondents are the members of the Committee appointed by the 01st respondent for the purpose of inquiring into the complaints related to the SLMC. The 07th Respondent is the new President of the SLMC Appointed by the 01st Respondent.

- **SCFR 84 / 2018** – This is a case filed by Mr. K.D.N. Kadadora against Dr. A.M.S. Weerabandara, Dr. K.A.S. Samarasinghe, Dr. P.G. Mahipala. The 3rd and 4th Respondents of Minnistry of Health, SLMC, Mr. Pujitha Jayasundara, AGS's Department regarding Fundamental Rights Application.

- **SCFR 180/2021** – This is a case filed by Dr. Chandana Atapattu against the SLMC, Ministry of Health and AG's Department.

- **SCFR 104/2023** – This is a case filed by Dr. Changa Kurukularatne. The 1st respondent is Sri Lanka Medical Council.

- **SC Contempt 05/2018** - This is a case filed by Nawaloka Hospitals PLC and Dr. Viveganath Vinoth. The 1st Respondent is Sri Lanka Medical Council.

- **CA WRIT 296/2020** – This is a case filed by Dr. Dilini Herath Samarakoon. The 1st respondent is Sri Lanka Medical Council.

- **CA WRIT 445/2021** – This is a case filed by Dr. Priyankaran Muthukumar. The 1st and 2nd Respondents are Sri Lanka Medical Council.

- **CA WRIT 575/2023** – This is a case filed by Dr. Gamage Rangana Sandakelum. The 1st respondent practitioner is Sri Lanka Medical Council.

- **CA WRIT 574/2023** – This is a case filed by Ms. Shemankkary Kesawan, a graduate from Maharashtra University of Health Science in India, which is not recognized by the SLMC.

- **CA WRIT 798/2023 –** This is a case filed by Prof. Mohamed Rezvi Sheriff, invokes the jurisdiction challenging the decision of the SLMC.

- **CA WRIT 59/2024** – This is a case filed by Dr. Umasugi Nadarajah. The 1st Respondent is Sri Lanka Medical Council.

- **CA WRIT 153/2024** – This is a case filed by Vinayagamoorthy Thinesh. The 1st Respondent is Sri Lanka Medical Council.

- **CA WRIT 407/2024** – This is a case filed by Mr. Yapa Mudiyanselage Dharmasena. The 1st and 2nd Respondents are Sri Lanka Medical Council and Registrar.

22. ASSETS PLEDGED

No assets have been pledged as securities for liabilities.

23. EVENTS AFTER THE REPORTING DATE

Events after the reporting period are those events favorable and unfavorable that occurs between the end of the reporting period and the date when the Financial Statements are authorized for issue.

The materiality of the events occurring after the reporting period is considered and appropriate adjustments to or disclosures are made in the Financial Statements, where necessary.

24. RELATED PARTY DISCLOSURE

24.1 Transactions, Arrangements and Agreements Involving Key Management Personal (KMP) and Their Close Family Members (CFM)

According to LKAS 24 – 'Related Party Disclosures', Key Management Personnel (KMP) are those having authority and responsibility for planning, directing and controlling the activities of the entity. Accordingly, Members of the Council (including Registrar and Assistant Registrar) has been classified as Key Management Personnel of the SLMC.

Close Family Members (CFM) of the KMP are those family members who may be expected to influence or be influenced, by that KMPs in their dealing with the Council. They may include:

(a) The individual's domestic partner and children;

(b) Children of the individual's domestic partner; and

(c) Dependents of the individual or the individual's domestic partner.

CFM is related parties to the entity. There were no transactions with CFM during the year.

24.2 Council Members' Loan

No loans have been given to the Members of the Council at the end of this financial period.

NOTES TO THE FINANCIAL STATEMENTS

Year ended 31 December 2024

25. FINANCIAL RISK MANAGEMENT

The SLMC has exposure to the following risks from its use of financial instruments. These are monitored by the Council and Management Committee on a regular basis:

25.1. Credit risk

Credit risk is the risk of finance losses to the SLMC if a recipient of a service or counterparty to a financial instrument fails to meet its contractual obligations.

25.1. (a) Maximum exposure to credit risk

The maximum risk exposure of financial assets which are generally subject to credit risk are equal to their carrying amounts.

Carrying Value as at 31 December	**2024 (Rs.)**	**2023 (Rs.)**
Fixed deposits	1,150,724,550	843,142,292
Treasury bonds	10,201,424	190,598,133
Loans to Staffs and Festival Advances	2,729,204	2,129,825
Treasury bill	303,835,065	272,242,821
Maximum exposure to credit risk	**1,467,490,243**	**1,308,113,071**

25.1. (b) Risk response to credit risk

To minimize the credit risk, fixed deposits, treasury bonds, and treasury bills are invested with state owned banking institutions.

Carrying Value as at 31 December	**2024 (Rs.)**	**2023 (Rs.)**
Fixed deposits	1,150,724,550	843,142,292
Treasury bonds	10,201,424	190,598,133
Treasury bill	303,835,065	272,242,821
Total Financial Assets with State Owned Banking Institutions	**1,464,761,039**	**1,305,983,246**

25.2. Liquidity risk

Liquidity risk is the risk that the SLMC may not have sufficient liquid funds to meet its obligations when they fall due.

The SLMC is managing the liquidity risk by ensuring that there will always be sufficient liquidity to meet its liabilities when due without incurring unacceptable damages to the SLMC's reputation.

25.2. (a) Maturity analysis of financial assets and liabilities

Description	On Demand (Rs.)	Less than 12 months (Rs.)	More than 1 year (Rs.)	Total (Rs.)
Financial assets				
Receivables	**-**	145,163	-	**145,163**
Loans and advances to staff	**-**	1,202,250	1,526,954	**2,729,204**
Fixed deposits	-	1,084,016,561	66,707,990	**1,150,724,551**
Treasury bonds	-	10,201,424	-	**10,201,424**
Treasury bill	-	303,835,065	-	**303,835,065**
Cash and cash equivalents	77,142,949	-	-	**77,142,949**
Total Financial Assets	**77,142,949**	**1,399,400,463**	**68,234,944**	**1,544,778,356**
Financial liabilities				
Payables	-	26,590,723	-	**26,590,723**
Accruals	-	1,422,006	-	**1,422,006**
Total Financial liabilities	-	**28,012,729**	-	**28,012,729**
Net Financial Assets	**77,142,949**	**1,371,387,734**	**68,234,944**	**1,516,765,627**

25.3. Market risk

Market risk is the risk that changes in interest rates, exchange rates which will affect the SLMC's income or the value of its holding of financial instruments.

The SLMC manages and controls the market risk exposure within acceptable parameters, while optimizing the return. The SLMC's market risk exposure is minimal.

NOTES TO THE FINANCIAL STATEMENTS

Year ended 31 December 2024

26. AMENDMENTS TO SRI LANKA ACCOUNTING STANDARDS (SLFRSS /LKASS) ISSUED BUT NOT YET EFFECTIVE

- SLFRS 17-Insuarance contracts
- Amendments to SLFRS 17