

Annual Report FAIRMED FOUNDATION Sri Lanka 2015



Vision

"Together, determine to improve the circumstances of all people at risk or affected by Leprosy and other Neglected Tropical Diseases in Sri Lanka".

Goal

"Through the use of lean systems, committed to strengthen the mechanisms that combat the causes perpetuating Neglected Tropical Diseases. Thereby facilitate an empowered and complete life, by one and by all".



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Abbreviations

ALC	Anti-Leprosy Campaign
DPA	District Project Assistant
DDG (PHS1)	Deputy Director General (Public Health Services 1)
DTCO	District Tuberculosis and Chest Officer
DLT	District Leprosy Team
ILEP	International Federation of Anti-Leprosy Associations
LPEP	Leprosy Post-Exposure Prophylaxis
MoU	Memorandum of Understanding
MLP	Model Leprosy Programme
MDT	MultiDrugTreatment
MB	Multibacillary
МОН	Medical Officer of Health
NCDR	New Case Detection Rate
NF	Novartis Foundation
РВ	Paucibacillary
PHI	Public Health Inspector
POD	Prevention of Disability
PHM	Public Health Midwife
RE	Regional Epidemiologist
RDHS	Regional Director of Health Services
STPH	Swiss Tropical Public Health
ТОТ	Training of Trainers
WHO	World Health Organization



Company Profile

Name of Company: FAIRMED FOUNDATION, Sri Lanka

Office Address: No. 20/72, Fairfield Gardens Colombo 08 Sri Lanka

Official Website: www.fairmedsrilanka.org

Official Social Media Presence:

www.facebook.com/FAIRMED.SriLanka

NGO Registration Number:

FL-153405

Country Coordinator for Sri Lanka:

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Manager Administration:

Ms. Chaminie Wijayalath BSc, MBA

Company Secretary:

Mr. Prasanth Abeykoon BSc, ACA, FSCMA, MBA

Auditors:

Jayasinghe & Co Charted Accountants 94/12 Kirulapona Avenue, Colombo 10

Banker:

National Development Bank PLC Sri Lanka



Organizational Structure

The FAIRMED FOUNDATION's country team is headed by the Country Coordinator -Sri Lanka, appointed by FAIRMED FOUNDATION Switzerland to oversee its interests and ensure outcomes are achieved on schedule and effectively in Colombo, Ampara, Hambantota, Puttalam, Gampaha and Kalutara Districts. The country office consists of four additional staff: a Manager Administration, Finance Officer, Project Officer and Office Assistant.

To support implementation the of district level goals, FAIRMED FOUNDATION employed six District Project Assistants for each district in which FAIRMED has a presence. All the DPAs with the exception of the Kalutara DPA engage with the Model Leprosy Programme, with the Kalutara DPA solely attending to the LPEP programme requirements.

To assist the Anti-Leprosy Campaign (ALC), Ministry of Health to implement the National Plan of Action for the Control of Leprosy and to coordinate between the Campaign and FAIRMED FOUNDATION a Project Assistant has been employed.

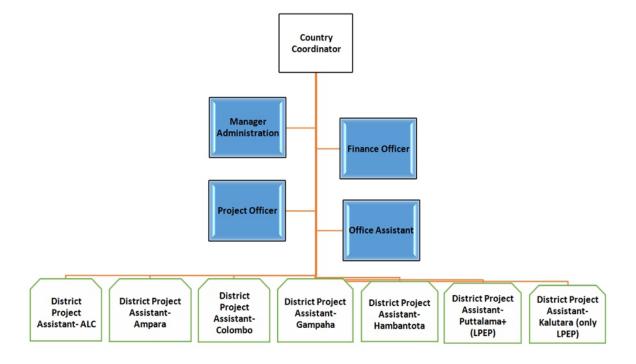


Figure 1. Organizational Structure FAIRMED FOUNDATION, Sri Lanka



Introduction

FAIRMED FOUNDATION based in Bern, Switzerland was founded in 1959 as Leprosy Relief Emmaus Switzerland. FAIRMED FOUNDATION concentrates its efforts mainly in the Asian and African continents, with special focus upon the regions south of the Sahara desert in Africa and the South-Asia region in Asia. Although our name has changed in the subsequent years the purpose of FAIRMED FOUNDATION has stayed true to its original mandate namely, combating Leprosy and has additionally added to its mandate the goals of covering one or more of the following three focus areas in each of the regions with our presence:

- Combat Neglected Tropical Diseases, among others Leptospirosis and Leishmaniasis
- Provision of Health services for people with disabilities
- Provision of Health services for marginalized communities

FAIRMED FOUNDATION in Sri Lanka is also the official representative for the International Federation of Anti Leprosy Associations (ILEP) with the country office in Colombo channeling funds and providing technical assistance for the implementation of programmes in the districts.

Guided by these affiliations, and goals, which also happen to align with the United Nations Millennium Development Goals. FAIRMED's work in Sri Lanka has a long and detailed history dating back to 1981 and in the subsequent years worked to provide health care access for all people regardless of their gender, social status, religious beliefs or political affiliations, enabling them to live a self-determined life.

Building upon the platform set by the Memorandum of Understanding (MoU) signed with the Ministry of Health in 2014, for the implementation of the Model Leprosy Control Programme. FAIRMED FOUNDATION in 2015, has strived to work more closely with our partners in Sri Lanka to combat the constant threat that Leprosy possess especially to poor, disabled and largely vulnerable, and therefore marginalized communities in the country.



Our Partners

Our main partners include: the Anti Leprosy Campaign, Ministry of Health and district level government health authorities (RDHSs. The lead these entities take in public health initiatives pertaining to Leprosy is critical and over the years they have successfully built a strong working relationship with communities across the country. As such, they are trusted by the vulnerable communities which require assistance the most. In this context the ALC and district level government health authorities are able to approach those at risk or affected and secure their support in the battle to overcome the individual and cumulative impact that Leprosy has upon the individual and community.

FAIRMED in 2015

Continuing the work started in 2014, the annual report for 2015 will present a detailed account of the progress made during the past year and will embody the lesson of "less can be more" by putting more resources into fewer activities to maximize our impact. This maxim has greatly defined FAIRMED FOUNDATION over the years and is best seen through our specialization and commitment to combat leprosy through our two trailblazing projects the Model Leprosy Control Programme and Leprosy Post Exposure Prophylaxis programme. The later of the two projects commenced in 2015 and is concurrently implemented in six countries covering three continents with Puttalam and Kalutara chosen as the implementation districts in Sri Lanka. The project is scheduled to run until the end of 2017.



Model Leprosy Programme

The Model Leprosy Programme (MLP) conducted together with the Ministry of Health, Sri Lanka is designed to strengthen the existing collaborative partnership by agreeing on principles of cooperation and working relationship with regard to the implementation of selected activities in the National Plan of Action (2014-16) in five selected districts. The MoU signed in March 2014, enables FAIRMED FOUNDATION, Sri Lanka to support the ALC and the five implementation districts to achieve the shared common goal of "Burden of Leprosy in Sri Lanka to be considerably reduced".

The MLP is conducted in Colombo, Gampaha, Puttalam, Hambantota and Ampara Districts. Faced with limitations in resources allocated to the public health apparatus, FAIRMED believes that greater effectiveness and success may be achieved through the focus of resources to the selected districts as opposed to operating throughout the island which would dilute the potency of our efforts.

The measurements of success are derived from our general goal of 'Disability caused by Leprosy considerably reduced by 35%'. This in turn will be achieved through the six outcomes; namely:

- 1. Active transmission of disease curtailed
- 2. Delayed presentation and defaulting from treatment (Deformity due to Leprosy) minimized
- 3. All aspects of quality clinical management at treatment centers improved
- 4. Satisfactory rehabilitation services made available to all leprosy patients with disabilities
- 5. Trained human resources available for leprosy control
- 6. Project activities adequately monitored

Through the successful implementation of the MLP, it is intended that the Government of Sri Lanka would be enabled to analyze and internalize the best practices in the effective combat and control of Leprosy. Furthermore, external project evaluation will set the stage for recorded learning of experiences and assist in the shaping of future government efforts when combating Leprosy, nationally. Through the strengthening of monitoring capabilities of the ALC, the project will provide both competence and confidence to the public health framework. Thus, establishing standard operating procedures for future programmes conducted at the district and national levels.



Assistance for Leprosy Control- National Level Assessment

FAIRMED FOUNDATION assisted the ALC, Ministry of Health to conduct activities identified according to the National Plan of Action 2014-2016. The main activities supported by FAIRMED FOUNDATION in 2015 at the National Level are as follows,

Outcome 6: Project Activities Adequately Monitored

FAIRMED has assisted the Anti Leprosy Campaign to conduct the following meetings to monitor the activities carried out at the district level:

- Quarterly review meetings were conducted to review the progress of Leprosy control activities carried out in all the districts in Sri Lanka
- Conducted six on-site district review meetings in the respective districts during the second half of the year 2015
- Conducted monthly PHI review meetings on Leprosy with the participation of all District Leprosy PHIs in Sri Lanka
- Conducted a workshop for development and testing of indicators

FAIRMED FOUNDATION also supported the Anti Leprosy Campaign to publish their Annual Report 2015.

Furthermore, a 14 seater passenger van was donated to the Anti Leprosy Campaign in May, 2015.



FAIRMED, Sri Lanka Country Coordinator donating the vehicle to the Director-ALC



A summary of FAIRMED FOUNDATION assistance provided to the Anti Leprosy Campaign in 2015:

FAIRMED FOUNDATION EXPENSES INCURRED DURING THE YEAR 2015 FOR ANTI LEPROSY CAMPAIGN

Description	Amount (LKR)
Quarterly review meetings	48,000.00
On site district reviews	54,000.00
Monthly PHI reviews on Leprosy	31,500.00
14 seater passenger van for ALC	7,000,000.00
Workshop for development and testing of indicators	11,350.00
Publishing 2015 Annual Report	10,000.00
Logistical support for ALC	118,870.00
Total LKR (USD= 50,164.00)	7,273,720.00

Other Activities conducted at National Level

FAIRMED FOUNDATION under the MoU signed with the Sri Lanka Medical Association (SLMA) agreed to provide Research Grants to the value of Rs. 1 million per year. The objective of this exercise was to encourage Sri Lankan scientists to undertake operational research with regard to Neglected Tropical Diseases. In the year 2015, total amount of LKR 726,009.25 was cumulatively awarded to Dr. Ranthilaka Ranawaka, Dr. Manjula Kariyawsam and Dr. Madhuwanthi Dissanayake to conduct their research project.



Performance of Leprosy Control at the National Level 2015

District	New Cases	Child Cases	Mb Cases	Female Cases	G 2 Defor mity Cases	Population	NCDR	MB Rate	Child Rate	Defor mity Rate	F Rate	number of early diagnosi s <6 months	Percent age number of early diagnosi s <6 months
Kandy	34	1	20	10	3	1416000	2.4	58.82	2.94	8.82	29.41	19	55.88
Matale	24	1	14	83 11	63	2502000	4.78	58.33	4.17	12.5	45.		
Nuwara Eliya	9	2	4	3	0	740000	1.22	44.44	22.22	0	33.33	5	55.56
Ampara	50	3	33	24	5	440345	11.35	66	6	10	48	18	36
Batticaloa	82	11	50	49	10	541000	15.16	60.98	13.41	12.2	59.76	37	45.12
Kalmunai	72	12	30	31	6	236655	30.42	41.67	16.67	8.33	43.06	34	47.22
Trincomalee	14	1	7	6	2	397000	3.53	50	7.14	14.29	42.86	6	42.86
Jaffna	36	8	20	17	0	597000	6.03	55.56	22.22	0	47.22	16	44.44
Kilinochchi	6	0	6	5	2	120000	5	100	0	33.33	83.33	3	50
Mannar	10	0	9	5	1	104000	9.62	90	0	10	50	1	10
Mulliativu	6	1	5	1	0	94000	6.38	83.33	16.67	0	16.67	1	16.67
Vauniya	16	2	8	8	0	179000	8.94	50	12.5	0	50	3	18.75
Anuradhapur a	85	6	58	36	11	893000	9.52	68.24	7.06	12.94	42.35	40	47.06
Polonnaruwa	83	11	40	45	12	419000	19.81	48.19	13.25	14.46	54.22	31	37.35
Kurunegala	105	8	56	46	11	1658000	6.33	53.33	7.62	10.48	43.81	49	46.67
Puttalam	97	15	54	27	11	790000	12.28	55.67	15.46	11.34	27.84	38	39.18
Kegalla	38	3	27	9	9	861000	4.41	71.05	7.89	23.68	23.68	21	55.26
Rathnapura	104	6	62	46	9	1127000	9.23	59.62	5.77	8.65	44.23	47	45.19
Galle	108	17	54	35	11	1091000	9.9	50	15.74	10.19	32.41	53	49.07
Hambantota	94	8	45	38	7	628000	8.62	47.87	8.51	7.45	40.43	49	52.13
Matara	110	7	58	42	8	837000	13.14	52.73	6.36	7.27	38.18	45	40.91
Badulla	25	0	17	12	4	844000	2.96	68	0	16	48	8	32
Moneragala	36	1	21	6	5	472000	7.63	58.33	2.78	13.89	16.67	14	38.89
Colombo	332	56	178	154	32	2375000	13.98	53.61	16.87	9.64	46.39	146	43.98
Gampaha	225	27	115	111	23	2354000	9.56	51.11	12	10.22	49.33	110	48.89
Kalutara	176	16	73	68	13	1250000	14.08	41.48	9.09	7.39	38.64	85	48.3
Total	1977	223	1064	845	198	20966000	9.43	53.82	11.28	10.02	42.74	885	44.76

A total of 1977 new cases have been detected in Sri Lanka for the year 2015 (Reported as of December 31st 2015). From this 974 cases (49% of the total number of cases) have been detected in the six districts in which FAIRMED invested in Leprosy control activities. Further, Colombo district has reported the highest number of female and child patients with 154 and 56 reported cases respectively.



Assistance for Leprosy Control- District Level Assessment

Outcome 1: Active Transmission of Disease Curtailed

The key activities undertaken in the districts to achieve this outcome

- IEC materials such as booklets, leaflets, flash cards, posters and pamphlets were developed and printed on leprosy prevention for the public and health staff. To maintain uniformity among the IEC materials developed in the districts, a 2-day workshop was held for the districts public health officers to collaborate in the IEC development process
- The above mentioned workshop was held with the participation of the district representatives; which included Regional Epidemiologists, Medical Officers, PHI/Leprosy, Range PHIs, Public Health Nursing Sisters, and Health Education Officers. Technical advice and support was obtained from the ALC for the workshop. The drafts were pre-tested among the target groups and amended accordingly prior to printing and distribution among the five districts and ALC. The varying IEC materials are currently being used by the DLTs for awareness campaigns and for public education projects.





• All districts conducted school screening programmes throughout the year. The children were provided with a pictogram via the class teachers, whilst the parents/ caregivers were requested to mark any skin patch detected on the child. The school screening programmes the medical officers would examine the children with the skin patches and those suspected cases were referred to the nearest Dermatology clinic.





• All districts with the exception of Hambantota conducted house to house surveys to detect suspected cases of Leprosy during the year 2015. 11 house to house surveys were conducted in the four districts and a total of 19,023 people were screened for Leprosy. From the total, 485 suspected cases were referred to the Dermatology clinics for confirmation of diagnosis and 21 were confirmed as Persons affected by Leprosy though the programme.







- Screening programmes for factory workers were conducted in the Gampaha district in Biyagama and Katunayake free trade zones during the 2nd half of 2015.
- The Hambantota district DLT conducted a screening clinics for prisoners in the open prison camp at Weerawila.





	Outcomes of conducted skin clinics									
	District	Total funds allocated (Rs)	Total funds utilized (Rs)	Percentage of utilization	No. of participants	Cost per participant (Rs)	No. of suspected cases identified	No. of Leprosy patients identified		
1	Ampara	703,000.00	495,428.00	70%	5,066	97.79	4	2		
2	Puttalam	747,500.00	485,555.00	65%	7,818	62.11	434	24		
3	Colombo	550,000.00	463,980.00	84%	11,659	39.80	249	13		
4	Gampaha	750,000.00	636,723.00	85%	5,756	110.62	85	6		
5	Hambantota	330,000.00	96,125.00	29%	1,592	60.38	6	1		



• Funded a monthly transport allowance for Leprosy patients with financial difficulties. The patients were provided with the allowance to sustain the treatment process until completion and to reduce the number of defaulters in the districts.



- During the 2nd half of 2015, the Ampara district DLT conducted awareness programmes using a public address systems. The programme was carried out in 67 PHM areas in three high endemic MOH areas in the Ampara district. The public statement was compiled by the Health Education Officer.
- The Colombo and Hambantota districts conducted an awareness programmes for General Medical Practitioners and Ayurvedic Doctors. The programme was implemented with the intention of enabling improved knowledge on the clinical diagnosis of Leprosy to be disseminated amongst the medical practitioner's community.





0	Outcomes of conducted awareness programmes							
	District	Total funds allocated (Rs)	Total funds utilized (Rs)	Percentage of utilization	No. of participants	Cost per participant (Rs)		
1	Ampara	300,000.00	57,116.00	19%	82230	0.69		
2	Puttalam	50,000.00	41,150.00	82%	135	304.81		
3	Colombo	130,000.00	90,000.00	69%	320	281.25		
4	Gampaha	50,000.00	45,191.00	90%	242	186.74		
5	Hambantota	50,000.00	22,850.00	46%	73	313.01		



Outcome 2: Delayed Presentation and Defaulting from Treatment (Deformity due to Leprosy) minimized

The key activities undertaken in the districts were,

• A counseling programme was conducted by a trained counselor for selected health staff in the high endemic MOH Areas in the Ampara district.



• Colombo, Gampaha, Hambantota and Puttalam districts carried out awareness and advocacy programmes for different stakeholders to commemorate World Leprosy



• A screening clinic was conducted in the 1st half of 2015 on the islet of Baththalangunduwa in the Puttalam district. Out of the total of 150 persons screened, five suspected cases were identified and were referred to the closest Dermatology clinic for further investigations. Of those referred two patients were confirmed as Persons affected by Leprosy.





Outcome 3: All Aspects of Quality Clinical Management at Treatment Centers Improved

The key activities undertaken in the districts were,

• Districts of Colombo, Hambantota and Ampara conducted special physiotherapy clinics monthly for the Leprosy patients with disabilities.



- Contact examination was carried out at the Dermatology clinics on a monthly basis and at the MOH offices on a weekly/ fortnight basis. The programme was limited to the districts in which the LPEP project were carried out.
- Facilities upgrading of two Dermatology clinics in Puttalam district was completed in the second half of 2015.



Outcome 4: Satisfactory Rehabilitation services made available to all Leprosy patients with disabilities

The key activities undertaken in the districts were,

• Wound care training programmes for the public health staff was conducted in collaboration with the College of Surgeons of Sri Lanka.



• Supported to upgrade the wound care facilities at select hospitals in Gampaha, Hambantota, Colombo and Ampara districts.



- Facilitated further improvement of the rehabilitation center at the Moratuwa District Hospital in the Colombo district.
- Improved the facilities of the physiotherapy unit at the Puttalam Base Hospital.



Outcome 5: Trained human resources available for leprosy control

The key activities undertaken in the districts were,

 An overseas training programme on Leprosy control was provided for a batch of 15 PHIs. The team of PHIs was selected from the districts with three PHIs each being chosen from the Ampara, Gampaha, Hambantota, Colombo and Puttalam districts. The training programme was held from the 14th September to the 1st October 2015 and was conducted at the training center of The Naini Leprosy Mission Hospital in Allahabad, India.

Οι	Outcomes of overseas training provision to health staff							
	District	Total funds allocated (Rs)	Total funds utilized (Rs)	Percentage of utilization	No. of participants	Cost per participant (Rs)		
1	Ampara	500,000.00	432,276.00	86%	3	144,092.00		
2	Puttalam	500,000.00	432,276.00	86%	3	144,092.00		
3	Colombo	500,000.00	432,276.00	86%	3	144,092.00		
4	Gampaha	500,000.00	432,276.00	86%	3	144,092.00		
5	Hambantota	500,000.00	432,276.00	86%	3	144,092.00		

A team Building workshop was organized for the DLTs of the five districts. The
programme consisted of specifically designed outdoor-based activities to further
enhance specific skills. Activities ranged from collective problem solving to decisionmaking and communication. The training was provided with the intent of aiding the
participants to expand their ability to work as a team and there by contributing
positively to their professional output.





• Puttalam district's DLT conducted a two day workshop on Leprosy for all PHMs and PHIs in the Puttalam and Chilaw MOH areas. The workshop was conducted at both the Chilaw MOH office and the Hendala Leprosy Hospital.

Οι	Outcomes of Local Training Provision to Health Staff							
	District	Total funds allocated (Rs)	Total funds utilized (Rs)	Percentage of utilization	No. of participants	Cost per participant (Rs)		
1	Ampara	820,000.00	844,387.00	103%	220	3,838.12		
2	Puttalam	412,000.00	433,514.00	105%	143	3,031.57		
3	Colombo	370,000.00	391,514.00	106%	186	2,104.91		
4	Gampaha	580,000.00	438,339.00	76%	170	2,578.46		
5	Hambantota	470,000.00	481,805.00	103%	88	5,475.06		



Outcome 6: Project activities adequately monitored

The key activities undertaken in the districts were,

- Assisted the ALC to develop and implement an online database. The database is intended to facilitate the relevant authority's data management capacity; and enhance informed decisions making capacities for planning and resource allocation for the Anti-Leprosy activities at the district and national levels.
- Provision of IT facilities to the DLTs to maintain and manage district level data.
- Supported the five district's DLTs and the Anti Leprosy Campaign by employing six Project Assistants in order to assist in the district level Leprosy control activities.
- Assistance provided to the districts in order to publish the annual district newsletter on Leprosy control activities conducted in year 2014.
- Assisted to update the facilities at the district Leprosy units in RDHS offices of the five districts.
- Provided funds for transport, printing and stationery requirements of the DLTs. Thereby supplementing Leprosy control activities in the districts to be conducted in an efficient and effective manner.

0	Outcomes of logistic support provision							
	District	Total funds allocated (Rs)	Total funds utilized (Rs)	Percentage of utilization				
1	Ampara	320,000.00	304,727.00	95%				
2	Puttalam	520,000.00	424,535.00	82%				
3	Colombo	879,150.00	806,727.00	92%				
4	Gampaha	910,000.00	414,687.00	46%				
5	Hambantota	310,000.00	317,882.00	103%				

FAIR MED Health for the poorest ANNUAL REPORT FAIRMED FOUNDATION, Sri Lanka, 2015 Leprosy Post Exposure Prophylaxis Project

The Leprosy Post Exposure Prophylaxis (LPEP) project is an operational research commenced in 2014 in six countries, where further reduction of new case detection rates has been a challenge. In Sri Lanka the project commencing in 2015 and was selected along aside Tanzania, India, Nepal, Myanmar, and Indonesia. Internationally, LPEP project is funded by Novartis Foundation for Sustainable Development and the Swiss Tropical and Public Health Institute (STPH) provides technical support and data analysis for the project and assesses the programme with specific focus upon reporting and recording system to ensure the consistency of approaches, procedures and indicators across LPEP project countries. To supplement the implementation, the International Federation of Anti-Leprosy Associations (ILEP) has committed to provide technical support and channel the Novartis Foundation's funds to the project in Sri Lanka.

To implement the project, FAIRMED FOUNDATION signed a MoU with the Director General of Health Services, Ministry of Health. Accordingly, the ALC will provide technical assistance and monitor the LPEP project in the relevant districts with the support of the RDHS, RE, PHI Leprosy and the District Project Assistants.

Accordingly, the LPEP project has the primary objective of 'evaluate[ing] the impact on Leprosy incidence and feasibility of contact tracing and single dose Rifampicin as leprosy post – exposure prophylaxis under routine programme conditions'. This primary objective will be achieved through the attainment of three specific objectives namely:

1. The routine implementation of contact tracing and administration of LPEP in a structured fashion

2. The feasibility evaluation of the implementation of LPEP in terms of compliance and other factors

3. Impact assessment of contact tracing and LPEP on the incidence of leprosy through an improved disease surveillance and reporting system

During the pilot study period 2015-2017, the project will attempt to record the experience and learn implementation lessons from the implementation districts of Puttalam and Kalutara based on which an island wide intervention may be designed and implemented in the future. The project will continue until the end of 2017.



LPEP Milestones in 2015

• To formulate the National Protocol, a draft protocol development workshop was held in April 2015 followed by another meeting in May for the finalization of the Protocol with the support of Dr. Peter Steinmann and Dr. Martin Bratschi, experts from Swiss Tropical Public Health Institute (SwissTPH), Basel.

• Prior to rolling out the programme in accordance with Sri Lankan regulation for medical research. Clearance for LPEP implantation was sort from the Ethical Review Committee from the University of Kelaniya.

• Critical data gathering tools were developed, printed and distributed to all MOH offices prior to rolling out the programme.

• To assist the Public Health Staff in both implementation districts to grasp the ambit of the LPEP project a Training Manual was developed inclusive of all relevant means and methods to be employed in the LPEP programme. Two TOT programmes were conducted nationally for the Public Health Staff including Medical Officers attached to the chest and dermatology clinics in the two districts. This was followed by district level training for the remaining Public Health Staff in the respective districts.

• The Inaugural meeting with all LPEP stakeholders was chaired by the Director General of Health Services. Those attending the programme included representatives from the College of Dermatologists, College of Pulmonologist, the Epidemiology Unit, the RDHS, ALC and FAIRMED FOUNDATION Sri Lanka.

• A web based data management system was developed by the ALC to enter the data from the LPEP project.

• To support the primary objective of the LPEP project additional studies have been mandated. The Perception Study, a supplementary activity was outsourced to the Faculty of Medicine, University of Kelaniya.



• The dose of Rifampicin tablets required for the timely implementation of the LPEP study was requested from the Medical Supplies Division, Ministry of Health and distributed to the MOH officers via the district chest clinics.

• The first Annual Review of the LPEP project was held in Bangkok in December 2015. At the forum Sri Lanka was represented by the Director ALC Dr. Nilanthi Fernando, Consultant Community Physician Dr. Supun Wijesinghe and FAIRMED FOUNDATION Country Coordinator Dr. Nayani Suriyarachchi.

The first International Monitoring mission of the LPEP programme as held in December and was carried out by representatives of the FAIRMED FOUNDATION in Switzerland and Swiss TPH.



International Missions to Sri Lanka

Monitoring Visit by FAIRMED FOUNDATION, Switzerland- From 20th to the 24th of January 2015.

Director, FAIRMED FOUNDATION, Switzerland Mr. Rene Staeheli and Head of Programmes Ms. Ingrid Mason visited Sri Lanka on a monitoring visit to conduct an assessment of all monitoring activities in the country.

On the 20th January a review of the country office and programmes coordinated from the office in Colombo was conducted. Pursuant to the meeting the monitoring team along with FAIRMED's Country Team met Dr. Amunugama (DDG- PHS I) and Dr. Nilanthi Fernando, Director of ALC.

Subsequently the team visited the skin clinic of the Negombo General Hospital in the Gampaha District and visited a mobile skin clinic at the Palagaturai Sinhala Primary School.



Visit to finalize the Leprosy Post-Exposure Prophylaxis, Protocol for Sri Lanka- From 27th to the 29th of April 2015

Representing Swiss Tropical Public Health Dr. Peter Steinmann and Dr. Martin Bratschi visited Sri Lanka to assist in the finalization of the draft country specific LPEP Protocol for Sri

Lanka.

The visiting public health experts evaluated the Leprosy Control Programme in preparation for the LPEP project being rolled out in 2015. Through the assessment, the feasibility and impact incidence of the LPEP project was identified and this analysis was to be the key indicator in the attempt to finalize the country specific protocol. The experts were also mandated



with identifying gaps and challenges that existed in the current National Leprosy Control Programme.



Monitoring mission for LPEP Project by the Swiss Tropical Public Health Institution (STPH) and FAIRMED FOUNDATION, Switzerland- From the 11th to the 18th of December 2015

Ms. Ingrid Mason from FAIRMED FOUNDATION Switzerland and Dr. Peter Steinmann from Swiss Tropical Public Health Institution visited Sri Lanka on a monitoring mission to assess the progress of the local arm of the internationally conducted Leprosy Post-Exposure Prophylaxis project.

The mission met with the officials at ALC and discussed the progress and the way forward of the LPEP project initiated in Sri Lanka.



Special Mentions

2015 has revealed to be an eventful year for FAIRMED FOUNDATION, Sri Lanka. For instance the Country Office in Colombo was moved to its present two storied office in July 2015. In addition some other noteworthy effort undertake by FAIRMED FOUNDATION Sri Lanka include:

- In August 2015 FAIRMED FOUNDATION, Sri Lanka launched its website. Through this
 portal we intend on expanding outreach to both the country and international
 community and engage in a brand new awareness campaign designed to instill trust
 and confidence in the community with regard to FAIRMED FOUNDATION Sri Lanka's
 work with the vulnerable communities in the country. Secondly, utilize the website to
 inform the public and concern parties on the best means and practices which may be
 utilized to control Leprosy in the community.
- FAIRMED FOUNDATION Sri Lanka was registered with the State Non-governmental Organization Secretariat as an International Non-governmental Organization.
- Committed to our founding principles, FAIRMED FOUNDATION Sri Lanka continued to liaise with likeminded organizations committed to work towards the same goal.
 FAIRMED linked up with Alliance Development Trust and The Leprosy Mission to explore opportunities where our programmes could be synergized to create a mutually reinforcing context, to assist all partners to increase its operational outcomes and success.
- FAIRMED FOUNDATION Sri Lanka was a key stakeholder and supported The Leprosy Mission to develop its strategic country plan.



Lessons Learnt

Through a year of challenges FAIRMED FOUNDATION Sri Lanka has encountered many experiences ranging from the uneventful to the exciting. In this section we shall lay bare a cross section of those experiences and practice a founding principle of our organization which is to establish and inculcate a culture of evaluation based on continued learning and knowledge sharing.

On Community Awareness Generation

The efforts taken to expand community awareness and combat the stigma related to the disease has shown significant returns. This is indicated by the willingness of majority of the patients to bring forth their family members and other close contacts for screening purposes and participation in the LPEP project which is specifically designed for the patient contacts.

To disseminate an accurate message across to the public, classic awareness methods utilized thus far such as interactive leaflets to the public, training manuals and booklets for public health staff and Ayurvedic doctors along with posters displayed in public locations must be persisted with. Additionally, it is also important to synchronize training and screening programmes to carry an awareness component which may contribute towards riding the public health professional and public of misinformation which continues to impede the timely and effective delivery of health care to those affected and at risk.

On Community Oriented Support Services

It was observed that the travel allowance provided for Leprosy patients attending the clinics are significant, especially to the poor and vulnerable communities to prevent lost to follow up and defaulting in treatment process. This observation especially made by the DPAs, have reported the importance of expanding this effort.

On Implementation Lessons

The need for greater information sharing between stakeholders has proven its importance to create a comprehensive and flexible budget which may accommodate the ever changing grass root level dynamics which are faced whilst combating Leprosy. This is specially so of newly



conceptualized activities or activities where the scope continues to rise or alter with the implementation of the project.

Another critical lesson learnt was from the challenges faced due to the constant transfer of senior administrative at the district level. The Regional Directors of Health Services (RDHSs) in four of the five project districts with the exception of Puttalam changed in the first half of 2015. The time lag which naturally had arisen from the organizational change resulted in the smooth progression of activities being delayed and at time the halting of the programme; as the incoming officers required time to carry out their own assessments of the already approved plan of action. To overcome this lag and to get the projects back on par with the programme timeline FAIRMED Country Coordinator met the RDHSs and relevant officers in all the districts to redress any concerns and in doing so overcome perhaps one of the most potent barriers towards the complete implementation of the projects. This experience can be identified as a critical lesson and will be studied in detail to ensure such a situation does not impact the activity programme in the future as much as it was affected in 2015.

Lastly, one of the reasons for the success of FAIRMED's efforts in 2015 was due to the timely identification of our organizational strengths. In previous years the number of mandated activities needs to be conducted failed to align with the number of activities which were ultimately implemented. Therefore, to maintain the morale and support of our implementing partners and to make the projects more feasible for the DLTs to complete –whilst taking to account their capabilities- it was decided to reduce the quantity of activities for the year. Alternatively, it was decided to expand the scope and emphasize the quality of implementation; therefore concentrating upon the overall impact of the project. The path chosen has shown results and most districts has achieved between 61% - 76% progress during the year, adjudged in terms of financial expenditure from the allocated budget.



Way Forward

In envisioning and planning for the path that remains ahead to combat against Leprosy; the lessons learnt over the past years have profoundly contributed to our deepened understanding of the innards that sustain the circumstances that Leprosy fosters in Sri Lanka. Building upon these realizations the following areas have been identified throughout the course of the past year by varying members of the FAIRMED country team.

• The battle to improve and sustain the level of awareness regarding Leprosy in the public consciousness is an ever present challenge. This challenge magnified in the vulnerable and economically disadvantaged communities which are most affected by Leprosy. As such the need to explore new and more effective methods, continue to be of critical importance for FAIRMED FOUNDATON's mandate and efforts in Sri Lanka.

With the launch of the FAIRMED FOUNDATON Sri Lanka website, we have committed ourselves to utilizing social media towards expanding public levels of awareness over the long term. This platform has been proven a success in expanding our reach amongst the youth of Sri Lanka. Yet, its reach towards communities who are characterized by the lack of access to adequate resources and the inadequacies of their financial wherewithal, is a significant weakness in pursuing a pure electronic awareness mechanism. Therefore, though we intend to continuously build our social media presence, it is acknowledged that this effort should be conducted in tandem with traditional print based methods of awareness building, which still continues to be the most effective means of reaching the vulnerable communities.

The DPAs over the course of the year have proven to be vital points of reference for our activities in Sri Lanka. Among the many observations which filtered through, the importance of synchronizing and simultaneously initiating similar projects and activities were brought to the forefront. For instance through the House to House Surveys and Mobile Clinics, the primary beneficiaries are the public. Not only due to the free and door step medical assistance rendered, but also due to the substantial time savings, and ease of interaction and transaction; which also benefits the public and public health staff to improve their own performance and contribution.



Appendences

Appendix 1- Independent Auditors Report

Jayasinghe & Co

CHARTERED ACCOUNTANTS Correspondent Firm of Russell Bedford International 94/12, Kirulapone Avenue, Colombo 05. Tel/Fax: +94 11 2512069, 2512400, 2512514 Website: www.aajco.lk, E-mail: audit@aajco.lk

INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF FAIRMED FOUNDATION

We have audited the accompanying financial statements of Fairmed Foundation which comprise the statement of financial position as at 31st December 2015, the statements of comprehensive income, changes in reserves and the cash flow for the year then ended and notes comprising a summary of significant accounting policies and other explanatory information set out.

Management's Responsibility for the Financial Statements

The management of the Organisation is responsible for preparing and presenting these financial statements in accordance with the relevant Sri Lanka Statement of Recommended Practice for Not-for-Profit Organisations (Including Non Governmental Organisations). This responsibility includes: designing, implementing and maintaining internal controls relevant to the preparation and fair presentation of financial statements that are free from material misstatements, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Scope of Audit and Basis of Opinion

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Sri Lanka Auditing Standards. Those standards require that we plan and perform the audit to obtain a reasonable assurance whether the financial statements are free from material misstatements.

An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting policies used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

We have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purposes of our audit. We therefore believe that our audit provides a reasonable basis for our opinion.

Opinion

In our opinion, so far as appears from our examination, the Organisation maintained proper accounting records for the year ended 31st December, 2015 and the financial statements give a true and fair view of the financial position of the Organisation as at 31st December, 2015 and of its financial performance and its cash flows for the year then ended in accordance with Sri Lanka Statement of Recommended Practice for Not-for-Profit Organisations (Including Non-Governmental Organisations).

Jayaengh & Co. JAYASINGHE & CO CHARTERED ACCOUNTANTS Colombo.

1st April 2016



Russell Bedford International

L.D.A. Jayasinghe FCA.FCMA R.K.A. Ranaweera B.Sc(Spe.),FCA.FCMA G.V.M. Nanayakkara FCA.FCMA(UK) Indranee Jayasinghe FCA, MPA (Harvard) - USA PG Dip. (ISS) - Netherlands

G.D.N. Mendis B.Sc.(Spe.),ACA P.I.S. Jayathilaka B.Sc. (Spe.). ACA



Appendix 2- FAIRMED Foundation Statement of Comprehensive Income for the Calendar Year 2015

FOR THE YEAR ENDED 31 ST DECEMBER (All Amounts Are In Sri Lanka Rupees)	Note	2015	2014
Incoming Resources			
Restricted Revenue	03 .	40,567,481.93	24,062,757
Total Income	-	40,567,481.93	24,062,757
Direct Project Expenses			
Anti Leprosy Campaign National Programme	04	(7,694,214.15)	(915,878)
Regional Director Of Health Services, Colombo	05	(4,270,416.21)	(2,965,511)
Regional Director Of Health Services, Ampara	06	(4,425,829.51)	(2,862,442)
Project Monitoring & Office Expenses (Sri Lanka Office)	07	(7,405,030.48)	(9,451,576)
Regional Director Of Health Services, Gampaha	08	(4,108,677.10)	(2,677,889)
Regional Director Of Health Services, Puttlam	09	(3,805,733.62)	(2,523,506)
Regional Director Of Health Services, Hambantota	10	(3,859,439.24)	(2,617,908)
Leprosy Post Exposure Prophylaxis Programme (LPEP)	11	(3,893,054.02)	-
Sri Lanka Medical Association (SLMA)	12	(726,009.25)	(48,046)
Nepal Visit	13	(379,078.35)	-
Total Direct Project Expenses	-	(40,567,481.93)	(24,062,757)
Other Income	14	65,160.84	80,718
Net Surplus/(Deficit) Before Tax		65,160.84	80,718
Taxation	15		-
Net Surplus/(Deficit) After Tax		65,160.84	80,718

Notes on pages 05 to 17 form an integral part of these Financial Statements.





Appendix 3- FAIRMED Foundation Statement of Financial Position as at 31st December 2015

FAIRMED FOUNDATION STATEMENT OF FINANCIAL POSITION AS AT 31 ST DECEMBER (All Amounts Are In Sri Lanka Rupees)	Note	2015	2014
ASSETS		and the second second	
Non Current Assets			
Property, Plant & Equipment	16	633,593.16	3,108,006
Total		633,593.16	3,108,006
Current Assets			
Receivables	17	2,387,543.74	1,687,034
Cash & Cash Equivalents	18	15,577,279.03	12,920,281
Total	_	17,964,823.67	14,607,316
Total Assets	-	18,598,416.83	17,715,322
EQUITY & LIABILITIES Reserves			
Restricted Fund		7,805,047.19	11,775,617
Unrestricted Fund	_	4,228,506.34	4,163,346
Total	_	12,033,553.52	15,938,963
Current Liabilities			
Payables	19	6,564,863.31	1,776,359
Total		6,564,863.31	1,776,359
Total Equity & Liabilities		18,598,416.83	17,715,322

Notes on pages 05 to 17 form an integral part of these Financial Statements.

I certify that these Financial Statements are in compliance with the requirements of the Companies Act No. 7 of 2007.

Head of Finance The Management is responsible for the preparation and presentation of these Financial Statements.

Signed for and on behalf of the Foundation.

Myorachen -

Country Coordinator 1st April 2016 Colombo



"Leprosy work is not merely medical relief, it is transforming frustration of life into joy of dedication, personal ambition into selfless service."

- Mahatma Gandhi