

## Critical Issues Faced by Sri Lanka Medical Council

Sri Lanka Medical Council is the statutory organization responsible for upholding the standards of medical practice and medical education in Sri Lanka. During the recent past SLMC has been facing several critical issues which have a vital impact on maintaining standards of medical practice and medical education in Sri Lanka. Moreover, the trend has extended to challenge its existence wherein it would fail to safeguard the interests of the public and the medical professionals of this land.

Having realized the gravity of the situation, GMOA took the initiative to summon all organizations representing the medical profession. The intention was to discuss these critical issues and to reach a consensus to develop a widely agreeable strategy. This meeting was informed to all stakeholders of the medical profession and was well attended.

### Objectives of the meeting

1. To discuss the possibility of continuing the current Presidency of the SLMC
2. To discuss the vital issues

## Minutes of the meeting to reach consensus within medical professional organizations

### In Sri Lanka

Date and Time	-	05 December 2011, 10.00am
Venue	-	SLMA Auditorium
Convener	-	Government Medical Officers Association (GMOA) & Government Dental Surgeons Association (GDSA)
Chair	-	Dr. H.H.R.Samarasinghe (Past President/ SLMC)
Participants	-	Sri Lanka Medical council (SLMC) Sri Lanka Medical Association (SLMA) All Professional Colleges and associations GMOA including representatives of the branch unions

At the onset **Dr. A.B. Padeniya**, President/GMOA welcomed the gathering and explained the purpose of the discussion. He listed the following issues with background information and highlighted the value of continuity of the current SLMC leadership to complete the policy frameworks to ensure the standard of medical practice and medical education in Sri Lanka.

### Following issues were discussed

1. Intimidation of SLMC by politicians.
2. Assault on the Registrar of the SLMC.
3. Resignation of President/ SLMC and pending appointment of a controversial personality as President/ SLMC.
4. Efforts to transform SLMC as a 'Government Enterprise'.
5. An attempt by AMPs who possess a fraudulent six month Russian degree to register themselves as Medical Officers under section 29 of the medical ordinance.
6. Establishment of Private Medical schools without following the SLMC guidelines
7. Issues of the foreign doctors practicing as specialists in Sri Lanka without due qualifications.
8. Establishment of a Specialist Registry in the SLMC
9. Status of the EPRM examination

### **1. Intimidation of SLMC by politicians**

It was emphasized the importance of maintaining the autonomy and Independence of SLMC. The house discussed the role of SLMC as the superior governing body of medical practice and medical education. The recent outbursts by the Minister of Higher Education and the threats to dissolve SLMC were condemned unanimously by the house.

### **2. Assault of Registrar of SLMC.**

The shameful attack of Dr N J Nonis the Registrar, of SLMC was seen as an end result of extreme politicization of strictly medically related matters and was seen as an unwarranted hazard to those professionals who are engaged in their rightful duty. Therefore the house unanimously condemned the cowardly assault on Dr N J Nonis.

### **3. Resignation of President SLMC and pending appointment of a controversial personality as President SLMC.**

It was apparent that a sudden change in the SLMC presidency and the appointment of a person who is politically affiliated would adversely affect the progress of medical professional matters. While empathizing on the personal discomfort of Prof Lalitha Mendis, the house unanimously urged her to stay on till the end of her tenure for the sake of the profession. Upon request, Prof. Lalitha Mendis agreed to continue for another six months in the office, if she is allowed to continue by the authorities.

It was further emphasized that it has been a well-established tradition to appoint a president to the SLMC who is well qualified and duly respected among all professionals in the medical field. As such, it was decided to communicate this proposal to His Excellency the President of Sri Lanka and President/ SLMA was assigned to sign the letter on behalf of the house.

### **4. Efforts to transform SLMC as a government enterprise**

Prof Lalitha Mendis Pointed out that according to the Medical Ordinance the SLMC is a “body corporate” which could not be categorized as an Enterprise. She further shed light on the sinister move by certain individuals who are hell bent on destroying the structure of the SLMC to satisfy their vengeance.

Prof Lalitha Mendis emphasized that the SLMC is a financially independent organization and there are provisions to monitor its finances adequately under the current set up. Hence the house concluded that categorizing SLMC as a government enterprise is both unlawful and unnecessary.

### **5. An attempt by Apothecaries who possess a fraudulent six month Russian Degree to register themselves as Medical Officers under section 29.**

Apothecaries are registered under section 41 of the medical ordinance. They approached the political hierarchy in mid 1990s to make arrangements to obtain a medical degree from St. Petersburg University, Russia. This tailor

made medical degree programme was confined to three years, while a usual medical degree course was six years at St Petersburg. Ministry of Health granted paid leave to follow the medical curriculum.

However, on their own admission, they did not bother about the possibility of their “degree” being recognized by the SLMC when they started the course.

Apothecaries did not attend this course, but enjoyed the privilege of doing fulltime private practice during this period of paid leave. They obtained the full salary as well.

Finally, at the end of three years, they produced a medical degree certificate which indicated that an entire six year curriculum was done in three years. As such they have trained 16 hours or more per day.

On perusal of the degree certificate it was found to be a “**Fulltime- Residential**” degree. However, scrutiny of the passports revealed that these apothecaries have been to Russia only for six months or less. As such SLMC ruled out that these certificates were fraudulent.

Later, GMOA demanded Ministry of Health to hold an inquiry and at the inquiry, apothecaries stated that they were trained locally under the guidance of Russian medical academics. The local address they mentioned in their applications as a teaching hospital was visited by the inquiring panel and revealed that there is a ‘Petrol filling station’ in this location. As such, Ministerial level inquiry confirmed the previous findings.

Later, police department also concluded the certificate was fraudulent and suggested to report it to the Supreme Court. Hon. Shirani Bandaranayake ordered the SLMC to reject the fraudulent medical degree certificates.

Despite being proven that Apothecaries have not undergone proper training, that they have produced fraudulent documents rejected by the Supreme Court these apothecaries are trying to get the SLMC registration as medical doctors under section 29 without following a proper medical degree course. The house agreed that these efforts and false claims by Apothecaries need to be addressed and challenged.

## 6. Ensuring the quality of Medical education and establishment of PMCs

In 2009, a business enterprise by the name of South Asian Institute of Technology and Management (SAITM) which claimed to have BOI approval announced that they are offering a medical degree program which culminate in to a degree granted by the Nizhny Novgorod State Medical Academy of Russia.

It was revealed later that this institute did not have approval for a Medical Faculty from BOI. In fact the BOI had indicated that if they wish to do so, they must get approval from the ministry of health.

The institution had requested the SLMC to recognize their program which the SLMC had rightfully rejected sighting the gross shortcomings of the institute.

1. No BOI approval
2. No approval from the Ministry of Health
3. No Teaching Hospital for clinical training
4. No permanent staff to teach
5. Entry criteria for students were unclear
6. The management and financial arrangements were unsatisfactory

The SLMC made efforts to inform the public through media with repeated paid advertisements that SAITM is not approved by the SLMC. Further, there was no provision in the Medical Ordinance for the SLMC to do so.

However, the institution continued to recruit students and function under the patronage of few influential health administrators and politicians.

GMOA had objected to this institution sighting the above mentioned shortcomings as well as the gross injustice caused to the students of the local state education system. The first report “ill-conceived Private Medical Faculty at Malabe” was published in 2010.

A gazette notification was published in August 2011 by the ministry of Higher Education granting SAITM the “degree awarding” status.

This was in spite of two panels of experts inquiring in to the conduct of the institute, concluding that it has gross shortcomings.

The GMOA threatened an Island wide trade union action against the move and as a result of the efforts by GMOA a 5 member committee was appointed by the minister of health to give a comprehensive report on SAITM.

### **7. Issues of the foreign doctors practicing as consultants in Sri Lanka.**

The recent workshop on this matter organized by the GMOA concluded that there should be a clear protocol for recruiting foreign doctors to practice in Sri Lanka. The registration should take place under the scrutiny of SLMC and the assessment should be independent. The gathering acknowledged the progress made regarding this matter and unanimously agreed to go ahead in the intended pathway.

### **8. Issues which necessitated establishment of a Specialist Registry**

At the same work shop it was concluded that there should be a specialist registry to Sri Lanka and SLMC has initiated it with maintaining a specialists list. Consensus was reached to make regulations under current Ordinance empowering SLMC to register specialists. The necessary criteria were also laid down and the draft is now in the final process of implementation.

### **9. Status of the ERPM examination**

The structure of the ERPM examination, formerly known as the act 16 examination was changed in 2005. The examination was held by the SLMC and foreign medical graduates who possess degrees from recognized (by the SLMC) foreign universities are eligible to sit for the exam.

A group of 54 candidates who had failed the ERPM examination from 1999 filed a fundamental rights case against SLMC claiming that the exam was too tough and is even tougher than the state university final examination. A Supreme Court settlement was reached and the UGC was asked to supply the common MCQ papers used for the final examination of the state universities for the Examination. The pass mark fell further during the two years after that.

Another Supreme Court case was filed later requesting the exam to be handed over to SLMC back again. The 54 candidates who were still unable to pass the exam using all their influence and power tried to reduce the pass mark to 40%. Among their demands were

1. Reducing the pass mark to 40%
2. Eliminating negative marks
3. Eliminating the community medicine and forensic medicine papers

4. Appointing a superior body to (SLMC) monitor examination and SLMC members should not be a part of it.

The SLMC and the members of the SLMC including the president and the registrar were personally subjected to lot of personal harassment during the recent past because of this protracted legal tug-of-war.

However, the SLMC and the entire medical profession is firm on the stand that the pass mark should not be changed and the standard of the licensing examination should not be lowered at any cost. Further, it is clear that the SLMC is the unequivocal authority in deciding the standard of medical education and service provided to the public.

## Discussion

**Dr H H R Samarasinghe**, explained why it is absolutely necessary to persist on the track the SLMC has so far adopted with regard to the above mentioned critical issues.

**Professor S.P.Lamabadusooriya** President, SLMA, started a discussion on the second topic asking what circumstances lead to resignation of Professor Lalitha Mendis. She replied that no one has forced her to resign and she took the decision on personal grounds. She further clarified that her children could not bear up the torment after Dr. Nonis was assaulted. Therefore she was compelled to hand over the letter of resignation. However she expressed that she was pleasantly surprised to see the response from the medical fraternity towards her resignation. Moreover, she granted her will to continue in the office upon the immense request from the entire profession. The house unanimously agreed that Professor Lalitha Mendis should continue in the post until the end of her term and decided to draft a letter to His Excellency the President requesting to re appoint Professor Mendis as President SLMC. At this point **Dr. J. Balawardhana** Consultant Oncologist suggested that the representatives from each college should meet the His Excellency to discuss the matter further. Therefore it was decided to arrange a meeting with the Head of the State and Dr. Balawardhana took the responsibility of obtaining an appointment. Professor Lamabadusooriya agreed to draft a letter requesting a meeting as the SLMA president.

The next issue discussed was the standard of the EPRM examination. **Professor Laitha Mendis** described the effort SLMC made to bring minimum standards to the examination and issues regarding the current court case. **Dr. Ranjan Fernando, Consultant Otolaryngologist** in dissent with the house stated that SLMC is not concerned about all parties. Prof. Mendis then described the strenuous work the committee did to set up those criteria. Prof Lamabadusooriya stressed that under no circumstances that the pass mark of the examination should be lowered. Alternatively SLMC shall take steps to de-recognize the universities which produce low quality medical graduates. Prof.Lalitha Mendis said that the process is underway. **Dr. Lalantha Ranasinghe** pointed out the shortcomings in the University Grants Commission in formulating policies.

The matter of specialist registry and registration of foreign doctors came up next. **Dr.Anuruddha Padeniya** presented the briefing of the workshop on the matter. Furthermore he stated that the draft document will be circulated to the colleges to come out with their suggestions in order to make the final report. The report then shall go to the minister for the cabinet approval and will be gazetted as a regulation under the current medical ordinance till the ordinance is amended.

Concerns over categorizing SLMC as a public enterprise (PE) were then raised by **Professor A.H.Sheriffdeen** and **Professor S.P.Lamabadusooriya**. Prof Mendis stated that the SLMC in an independent body which has financial independency. However the PEs run on government budget allocations. She stated that currently the SLMC seeks the Supreme Court opinion on this regard. Eventually the house agreed that regardless of the changes that take place the autonomy of the SLMC should be untouched.

The meeting was concluded with the decision stating that this gathering represents the entire medical profession in Sri Lanka, and we should take prudent steps to safeguard the dignity of the profession.

## **Final Consensus**

Consensus on the following was reached at this meeting

1. **To request His Excellency the President to re appoint Prof. Lalitha Mendis as President / SLMC**
2. **To request an appointment with His Excellency to discuss the matter further.**
3. **This gathering represents the entire medical profession in Sri Lanka, and we should take prudent steps to safeguard the dignity of the profession.**
4. **Demand the adherence to prescribed standards of medical education from all institutions disregarding whether they are foreign or local medical faculties.**
5. **Maintain the standards of ERPM examination equivalent to Final MBBS examination.**
6. **To finalize specialist registry**
7. **To finalize policy to deal with employing foreign medical professionals in Sri Lanka**
8. **In a matter of controversy this gathering will be the final decision making body for the profession and thus called the "Senate of the Medical profession" and this will be gathered for discuss the progress.**

*This report was compiled and edited by Drs. A.B. Padeniya, S. Marasinghe, S.U.Kannangara, U. Gunasekara, C. Epitakaduwa, N. Ariyaratne, N. Deshika, K.Weerasinghe & A Abeygunasekara*

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▶ උසස් අධ්‍යාපන ඇමති එස්.බී. කියයි



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රජයේ ප්‍රතිපත්තියට පටහැනි තීරණයක් වෛද්‍ය සභාව විසින් ලබාදුන්නොත් වෛද්‍ය සභාවට පටහැනි තීරණයක් ලබාදීමට සෞඛ්‍ය අමාත්‍යවරයාට හැකියාව ඇති බවද ඔහු පැවැසීය. එවිට රජයේ ප්‍රතිපත්තියට ගැලපෙන තීරණයක් සෞඛ්‍ය අමාත්‍යවරයා විසින් ලබාදෙනු ඇතැයිද ඔහු සඳහන් කළේය.

ශ්‍රී ලංකා වෛද්‍ය සභාවේ සභාපතිවරයා සහ කාර්යාල ප්‍රධානියාවරයා විසින් බවද රජයේ ප්‍රතිපත්තියට පටහැනි තීරණය වෛද්‍ය සභාවට ගත නොහැකි බවද අමාත්‍යවරයා පැවැසීය.

රජයේ ප්‍රතිපත්තියට පටහැනි තීරණය ශ්‍රී ලංකා වෛද්‍ය සභාව විසින් ගත් විට වෛද්‍ය සභාවේ තීරණවලට පටහැනි තීරණ සෞඛ්‍ය අමාත්‍යවරයා විසින් ලබාදිය යුතු බවද ඔහු පැවැසීය.



□ සංස්කෘතික සේවය

මාලමේ පෞද්ගලික වෛද්‍ය විද්‍යාලයෙන් වෛද්‍ය උපාධිය ලබාගන්නා උපාධිධාරීන් සම්බන්ධයෙන් රජයේ ප්‍රතිපත්තියට පටහැනි තීරණයක් ලබා දුන්නොත් ශ්‍රී ලංකා වෛද්‍ය සභාව විසුරුවා හැර අලුත් වෛද්‍ය සභාවක් පත්කරන බව උසස් අධ්‍යාපන අමාත්‍ය එස්.බී. කියාහැරියේය.

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## විශේෂඥ වෛද්‍ය හෝනිසට කළ පහරදීම හෙලාදැකී

□ අනුරාධපුර - මුද්දික මණේ විජේසූරිය

ශ්‍රී ලංකා වෛද්‍ය සභාවේ ලේඛකාධිකාරී වෛද්‍ය ජී.එස්.කෝනිස් මහතාට මැර ප්‍රහාරයක් එල්ල කිරීමට, විරෝධය පාමින් රජයට විශ්ව විද්‍යාලයේ වෛද්‍ය පීඨ සිසුන් විරෝධතා ව්‍යාපාරයක් නිරතවූහ.

වෛද්‍ය පීඨයේ සිසු සිසුවියන් 700කට ආසන්න පිරිසක් (06) ආ දහවල් අනුරාධපුර ශික්‍ෂණ රෝහල ඉදිරිපිටට පැමිණ සටන් පාඨ කියමින් විරෝධතාවේ නිරත වූ අතර මාලමේ පෞද්ගලික වෛද්‍ය විද්‍යාලයක් ආරම්භ කිරීමට ගෙන ඇති තීරණයටද විරෝධය පෑහ.



# Court stays move to take over Medical Council



By S.S. SELVANAYAGAM

The Court of Appeal yesterday issued an interim order staying the operation of the Finance Ministry's Public Enterprises Department (PED) circular, which calls for the Sri Lanka Medical Council (SLMC) to be categorized as a Public Enterprise.

The SLMC alleged that the purpose behind the move of the Finance Ministry

Secretary was to categorise it as a regulatory agency which fell within the supervision of the PED -- a circuitous route by some ministries to establish a doorway through which its functioning could be controlled by those with vested interests

The writ application which was filed by the SLMC and taken up by Justice W.L. Ranjith Silva cited as respondents the Finance, Planning and Economic

**A circuitous route to establish a doorway through which its functioning could be controlled by those with vested interests**

Development Ministry Secretary, the Public Enterprises Department Director General,

Public Administration and Home Affairs Minister, the Ministry Secretary, Health Minister and the Ministry Secretary.

The Court also issued another interim order staying the operation of the Circular issued by the Health Ministry Secretary directing the SLMC to comply with the provisions of the PED circular.

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## Court stays move to take...

*Contd. from Page 1*

The Court issued notices on the respondents' returnable on December 14.

Sanjeeva Jayawardane with Sandamali Chandrasekera instructed by Sonali Handapangoda appeared for the petitioner.

The SLMC is the sole authority which has exclusive control over not only medical practitioners (government, non-government and academic) of Sri Lanka, but also oversaw dentists, midwives, pharmacists and nurses and exercises vital and integral influence on the medical profession and its practitioners and also their proper conduct.

It is a creature of Statute, established by the Medical Ordinance of 1927 by Parliament, for the integral purpose of the regulation and monitoring of the entire medical profession of the country.



Petitioner states its unique and special character and nature is further highlighted by the fact that the legislature has made express provision vesting it with the power and discretion to appoint its own secretary, treasurer, registrar, assistant registrar and other persons, whom it may deem necessary for the purposes of the Medical Ordinance.

It emphasizes its right of employing its own employees is a right that it exercises under the

Medical Ordinance.

**The SLMC lamented that it clearly demonstrated the intentions and motives of the respondents and other persons with vested interests, to attempt to interfere with its independence and integrity**

Medical Ordinance.

The SLMC lamented that it clearly demonstrated the intentions and motives of the respondents and other persons with vested interests, to attempt to interfere with its independence and integrity.

It expresses fears and concerns pertaining to the compromising of its independence and autonomy was cemented with the issuance of the directive by the Health Ministry Secretary seeking compliance to it.