

#### **Foreword from Director**



I am glad to present the Strategic Plan of the Institute of Indigenous Medicine, prepared for the period from 2022-2026. During last two years we had to be very careful when dealing academic matters as well as the administrative activities due to Covid 19 pandemic situation all over the world. Therefore all the lectures for the students were conducted through online mode and examinations and practical were conducted adhering to the health guidelines and also by following safety measures declared by the Health sector of the Government. The Institute reviewed its internal operations through the reorganized academic / administration / non-academic / student structures and all aimed at implanting excellence, further enhancing our teaching and research capabilities.

One of our most important aims was to convert the Institute of Indigenous Medicine into a Faculty to meet the standard of the University of Colombo. Further, the steps have been taken to establish of professorial unit, medical education unit and also the teaching hospital of Avurveda.

The Institute has continued to deliver on its vision and is proud of how much has been accomplished and by the end of the year end the Institute had completed all the target projects successfully. We are now implementing our new structure of teaching and looking to the future with a great deal of excitement and optimism. Our focus in the year ahead will be on the initiation of our new education strategies to produce the best indigenous doctors through curriculum and infrastructure developments

The development of the strategic plan for 2022-2026 was a major task as it is not an easy to identify priorities into specific work plans. The goals of the strategic plan include preparation of policies for course design and approval, developing and maintaining research and development of Natural product Unit, improving herbal garden, and establishment of center for Sri Lankan Indigenous medicine. Further, improvement of existing lecture halls with full-fledged facilities, construction of 1st phase of the three storied building, improvement of playground with necessary facilities and improvement of the cafeteria were ongoing activities. Specially, it was taken necessary steps to establish MIS system to monitor administrative work.

Introducing Blended learning, Student Centered Learning, online teaching in study programmes were done during the last years. Further we are proud to say that it has been already taken necessary actions to create the Institute as a ragging free Institute in order to maintain conducive teaching and learning environment.

Senior Professor P.A. Paranagama Director

# **TABLE OF CONTENTS**

	<u>Page</u>
Introduction	02
Historical Background	04
The Institute Today	07
International Collaboration of the Institute	35
SWOT analysis	36
Vision and Mission Statements	41
Values and guideline principles	42
The Role of the Institute	43
Corporate Goals	44
Goals, Objectives and Strategies of IIM	45
Key Performance Indicators	48
Corporate Structure of IIM	76

# INTRODUCTION

## The Institute of Indigenous Medicine

The Institute of Indigenous Medicine (IIM) is the premier higher educational institute in Sri Lanka which creates medical graduates in Indigenous Medical Field. The institute was first started as the College of Ayurveda, subsequently upgraded and affiliated to the University of Colombo in the year 1977 as the Institute of Indigenous Medicine. The IIM has located in the heart of the busy capital city of Colombo. At present, it produces both Unani and Ayurveda medical professionals to meet the challenging needs of primary health care, general health care problems, health promotions, and disease prevention according to the indigenous medical system. The institute admits G.C.E. (A/L) students in Biological Science stream who conform to the criteria recommended by the University Grants Commission for admission to the university.







Thus, the selected undergraduates are offered two-degree programs by IIM under two major sections namely the Ayurveda section (BAMS degree program) and the Unani section (BUMS degree program).

- The BAMS program (Bachelor of Ayurveda Medicine and Surgery) spreads over 6 years of time duration, including 5 years of academic studies followed by 01-year internship.
- The BUMS program (Bachelor of Unani Medicine and Surgery) spreads over 6 years of time duration, including 5 years of academic studies followed by 01-year internship.

The Ayurveda section comprises of 8 academic units with 51 academic staff members and the Unani section comprise of 8 academic units with 29 academic staff members. Majority of the academic staff members have obtained their postgraduate degrees in the relevant field from local as well as foreign universities (India, China, Japan). Thus, the degree programs of IIM have been designed to produce Ayurveda/Unani practitioners who are capable of effectively utilizing the indigenous medical system as well as modern diagnostic technique/methods to treat patients effectively. The clinical component of the programs is conducted with the collaboration of the National Ayurveda Teaching Hospital at Borella, which is closer to the Institute.

In addition to the undergraduate programs, the Institute offers short term Certificate Courses related to Ayurveda relevant fields of Ayurveda.

To strengthen the involvement in research studies, the Institute has established the Ethics Review Committee and Research Management Committee. The IIM has provided adequate hostel facilities and other infrastructure facilities to the students and new proposals are being prepared to increase facilities in hostels. The employability of graduates of IIM is at satisfactory level as they can involve in both government and private sector institutes. The Institute of Indigenous Medicine has close relationships with Gampaha Wickramarachchi Ayurveda Institute and the Ministry of Health, Nutrition and Indigenous Medicine. Further, IIM has established strong collaboration with foreign institutes in India, Japan, and China to strengthen the skills of academic staff as well as undergraduates. The Institute organizes a research symposium annually (ICAUST/International Conference on Ayurveda, Unani, Siddha and Traditional Medicine) to enhance the research collaboration with international research institutes to provide a platform for academic staff members and undergraduate students to promote research.

# HISTORICAL BACKGROUND



At the end of the 19<sup>th</sup> century, the Ceylon (a British colony), had a system of indigenous medicine but without a college for providing indigenous medical education. The three associations / bodies which were established during the period had started the preliminary work for preservation of traditional status for those who are engaged in practicing Oriental medical system. These associations were known as "The Sinhalese Medical Association"(1891), "Sri Lanka Vaidya Maha Mandalaya" (1901) and "Sri Lanka Samajaya Prathishakthikarana Sangamaya"(1915). Eminent personalities like, Sri Solaman R Dias Bandaranaike, FR Senanayaka, K Balasingham, Donald Ubhayasekera and Ananda Kumaraswamy are the great patriots who were the pioneers in creating the fund for this purpose.

In 1926, for the first time, a committee that looked into indigenous medicine system proposed that a college should be established with an adjoining teaching hospital, to provide training for those who were keen to pursue this system of medicine. Then the state Council (Rajya Manthrana Sabawa) appointed an advisory council titled as "Ayurveda Sammelana Sabha" in 1928 appointing Dr. K Balasingham as its chairperson. Based on the Committee recommendation, the institute named as "Swadeshiya Vaidya Vidyalaya" (Indigenous Medicine College) which was established on 10th June 1929, and it was inaugurated by the Governor General of Ceylon, Sir Herbert James Stanley, at the Bauer building situated at Cotta road, Borella. Dr. ANN Panikkar from India who had western medical qualification and also who possessed a sound training in Ayurveda Science, was brought down to the newly established college by the government as its first principle. Similarly, Dr HM Jaffer and Dr. H Ahamed were also brought down from India to develop the Unani System Medicine.

Another milestone in the field of indigenous medical system was the enactment of Indigenous medical ordinance No. 17 of 1941. Hon. SWRD Bandaranaike as the Minister of health and chairperson of the Indigenous Medical Advisory Council was brought the legislation to uplift the quality of teaching of the college with a national standard. In 1961, the Ayurveda Act No. 31 of 1961 was enacted by repealing the Indigenous Medical Ordinance No. 17 of 1941 and

the College was renamed as Government College of Indigenous Medicine and was brought under the Management of the College and Hospital Board. This step was taken to uplift the quality of Ayurveda healthcare delivery and the systems of education in Ayurveda, Unani, and Siddha medicine. Four statutory boards namely, Ayurveda Medical council, the College and Hospital Board, Ayurveda Research and Ayurveda Drug Formulary Committee were also created.

In 1963, the name and qualification of Diploma in Indigenous Medicine and Surgery (DIMS) was changed to that of the Diploma in Ayurveda Medicine and Surgery (DAMS) under the new Ayurveda act.



In 1977, the College of Indigenous Medicine was renamed as the Institute of Indigenous Medicine and affiliated to the University of Colombo under the University Act No. 1 of 1972. This was done by the Institute of Ayurveda Statute No. 1 of 1977, published in the Government Gazette Extraordinary bearing number 258 of March 30, 1977. The objective of this step was to produce the qualified medical practitioners in the field of Ayurveda, Unani and Siddha medical systems. The Institute of Indigenous Medicine Ordinance No. 7 of 1979 published in the Government Gazette Extraordinary Bearing No. 67/14 dated December 21, 1979 under the Universities Act No. 16 of 1978 and with this enactment, the Siddha section was separated and affiliated to the University of Jaffna.

The institute has made many changes to the syllabus with the approval of the Senate of the university. One such major revision was in 1982 where the assistance of specialists in various sections in Ayurveda, Siddha, and Unani for which expert advice obtained from Prof. PNV Kuruppu, the advisor on Ayurveda of World Health Organization.

Currently the institute has the strength of well skill postgraduate qualified academic staff in the relevant field and 23 different subject areas are taught during 5 academic years under their teaching responsibilities. The syllabi consist study material on Ayurveda/ Unani and

other science related field to contribute a competent Indigenous Medical graduate. Each degree programme includes three professionals such as First, Second and Final. First and Second professionals contain three semesters each whereas final professional contains four semesters. End of each semester there is a CA examination and End Professional examination is held at the end of each professional. Each examination consists of written, viva-voce and practical /clinical components. (Objective Structured Practical Examination - OSPE, Objective Structured Clinical Examination - OSCE)

With the establishment of the Institute in 1977, imparting instructions for the two-degree programs, i.e. Degree of Bachelor of Ayurveda Medicine and Surgery (BAMS) and the Degree of Bachelor of Unani Medicine and Surgery (BUMS) commenced under two sections of the Institute and the degrees were conferred for the first time at the convocation of the University of Colombo held on 26.10.1992.

In addition to undergraduates' education, the institute conducted two postgraduate degree programs such as postgraduate diploma in Ayurveda and Unani Medicine.

Several steps have been taken for curriculum reforms and syllabus revision with the incorporation of more applied aspects in Indigenous of pioneers in providing human resources for the delivery of Indigenous System Medicine in the country.

# THE INSTITUTE TODAY

The institute consists of two departments; Department of Ayurveda and Department of Unani. Each department has eight units as given below.

Academic units of Ayurveda	Academic units of Unani				
1. Moulika Siddhantha	1. Kulliyat				
2. Allied Science					
3. Dravyaguna Vignana	3. Ilmul Advia				
4. Swasthavritta	4. Tahaffuzi va Samaji Tib				
5. Kaya Chikitsa	5. Moalijat				
6. Shalya Shalakya	6. Ilmul Jarahat				
7. Prasuthi Thantra Kaumarabhritya	7. Amraz e Niswan, Qabalat va Atfal				
8. Desheeya Chikitsa	8. Desheeya Ilaj				

# **Departments of Study (Ayurveda Section)**

# Head of the Department of study in Ayurveda

Dr. (Mrs.) SP Molligoda Senior Lecturer Grade I BAMS, MPhil, MD(Ayu), PhD



## Department of Study in Ayurveda

The earliest references of Ayurveda medicine in Sri Lanka are associated with a great physician; Ravana, a king of Sri Lanka dating back to the prehistoric times. Traditionally, it is believed that Ravana of Ramayana fame was well versed in Ayurveda medicine. Ramayana mentions that he represented Sri Lanka at a medical symposium at the base of Himalaya in India during his era. There were four tribes namely, Yaksha, Raksha, Naga, and Vaddas in Sri Lanka during this time. According to Historiography in Sri Lanka King Ravana was the author of the following medicine books of Ayurveda such as Arkaprakasya, Nadivignanaya, Kumarathanthraya and Udishathanthraya.

Sri Lanka has a rich assortment of medicinal plants of which some are endemic to the country. The majority of the plants used are the same as those used in India. Dolukanda and Rumassala are believed to be fragments of a part of Himalayas that were carried over to Sri Lanka by the mythical monkey King Hanuman of King Rama. Evidence unearthed from prehistoric burial sites speaks of the ancient practices of Ayurveda across Anuradhapura, Polonnaruwa, Madirigiriya and Pomparrippu.

The only structural remains of ancient hospitals that have so far come to light are of those established in the old monasteries of Mihintale, Madirigiriya and Alahana in Polonnaruwa. The identity of those hospitals has been established with the help of inscriptions and discovery of medicine and other equipment. As a reference to the Mahavansa and Chulavansa many of the ancient kings have dedicated their services to the development of Ayurveda medicine in Sri Lanka. For example, during the period of King Pandukabhaya (4th Century BC), King Sena (851-885 AD), King Buddhadasa (362-409 AD), King Datusena (460-478 AD) etc. As such ancient Ayurveda evidence shows that Sri Lanka has inherited a glorious history of indigenous medicine in the country.

But it had its setbacks during the late part of the 16<sup>th</sup> century due to foreign invasions. Afterwards Ayurveda developed on its own independent process. It is practiced annually as a traditional process. Ex: Es Vedakama (Ophthalmology) GediVana (Treatment of boils and carbuncle), *Sarpavisha* (Toxiology), *Pissubalu* (Hydrophobia), *VidumPillissum* (Burns), *KadumBidum* (Fractures and Dislocation).

At Present There are about 16,800 registered Ayurvedic medical officers of whom more than 5000 are academically and institutionally qualified to serve the country at large.



The College of Indigenous Medicine was established in 1929. It became a part of the University of Colombo adopting its current name, the Institute of Indigenous Medicine (IIM) in 1977. The unit of Basic Principles was established under the Department of Ayurveda. Presently, the unit is engaged in under graduate and postgraduate level teaching and research.

The unit of Basic Principles deals with study of *Ayurveda Ithihasaya* (history of Ayurveda) *Moulika Siddhanta* (Basic Principles), *Padartha Vignana* (Ontology) through the *samhitas* (classical texts) like *Caraka Samhita*, *Susruta Samhita*, and *Ashtangahridaya* Samhita for their scientific exploration and validation. These are the subjects which help to understand the philosophy of Ayurveda. Students who learn Ayurveda philosophy get many benefits. The basic tools taught by Ayurveda philosophy help to make a complete Ayurveda physician and their great use in further education and in employment. In addition to this, unit offers basic Sanskrit language for students in order to get the meaning of classical texts and terminologies.

Vision of the unit is to be nucleus of the BAMS undergraduate course and the mission of the unit is to produce competent committed graduates for local and Global service.



Academic unit of Allied Sciences is the common unit which was established for Ayurveda and Unani Study Programs under Preclinical Sciences, and also serves as a multidisciplinary division for the Institute. The unit engages in BAMS undergraduate and postgraduate teaching, practical work, and research which are relevant to the field of Ayurveda and in BUMS undergraduate teaching, practical work and research which are relevant to the field of Unani. The study programme of BAMS conducts the subjects such as *Shareera Rachana* (Anatomy), *Shareera Kriya* (Physiology and Bio Chemistry). The study programme of BUMS conducts Anatomy, Physiology, Pathology, Forensic Medicine, and Principles of Clinical Medicine.

Anatomy laboratory provide facilities for cadaver dissections and pathology specimens. Anatomical model demonstration hall and physiology laboratory are established with modern technological equipment for the students' practical and research purposes.

Previously, the Academic unit was named as the Academic unit of "Shareera Vignana". Currently, it is named as the Academic unit of Allied Sciences and it has proposed to be changed as academic unit of "Shareera Vignana" in Ayurveda and Tashreekh-e-Badan Wa Manafi-ul-Aazain in Unani in the proposed curriculum.

The aims and objectives of the Academic unit are as follows.

- To provide Ayurveda and Unani medical graduates with knowledge and skills to practice Ayurveda and Unani Medicine scientifically
- To contribute the research work on basic and applied aspects of *Shareera Rachana, Shareera Kriya*, Anatomy and Physiology (Ayurveda, Unani and Modern) in collaboration with other disciplines and Institutions
- To provide a supportive environment for optimal teaching, learning, research and self-development for the BAMS and BUMS students.



The academic unit of Dravyaguna Vignana has six divisions; *Namarupa Vignana* (Pharmacognosy), *Guna Vignana* (Study of drug properties), *Karma Vignana* (Pharmacology), *Prayoga Vignana* (Clinical pharmacology), *Yoga Vignana* (Study of drug preparation), and *Kalpa Vignana* (Pharmaceutics). This Unit is engaged in teaching and conducting practical training for level I, II, III undergraduate and postgraduate students and also conducts short courses in three subjects viz. *Dravyaguna Vignana* (Ayurveda Pharmacology), *Bhaisajjya Kalpana* (Ayurveda Pharmaceutics), and *Rasa Shastra* (Alchemy). Also conducts short course and collaborative programme with other university and private sectors.

The unit also organizes field visits to Ganewatta, Peradeniya, Haldummulla and Pattipola herbal gardens, and Ayurveda drug cooperation and private drug manufacturing companies. The unit also maintains an herbal garden in collaboration with the Institute of Agro technology and Rural Sciences of University of Colombo at Weligatta in Hambanthota District. Collaborative programs are also conducted with the private sector such as JAPA program which is conducted in collaboration with Japan and Tree of life Nature resort. Furthermore, the unit conducts collaborative research and product development research activities.

### Aims and objectives of the Unit of Dravyaguna Vignana

- Provide knowledge of the identification, classification, and therapeutic actions of medicinal plants Mercury and other minerals used in Ayurveda and traditional medical systems.
- 2. To impart the knowledge of comprehending the collection, preservation, storage, preparation and administration of herbal and herb-mineral medicinal preparations used in the Ayurveda and traditional medical systems.
- 3. Dissemination of knowledge and providing laboratory facilities in order to conduct their relevant researches and drug development related to Ayurveda and traditional medicine.
- 4. Maximum utilization of conventional methods, knowledge and modern technology to facilitate good manufacturing, good laboratory, and good agricultural practices.

### Unit of of Swasthavritta



Ayurveda being a holistic science of life, it has the foremost aim to preserve the health of healthy individual and provides the preventive, promotive and curative aspects of positive health. The term Swasthavritta denotes the way of living healthy, which is known as Preventive and Social Medicine or Community Medicine.

The goals of the academic unit of Swasthavritta are to gain knowledge on promotion of positive health and prevention of diseases and to promote the physical, mental, social, and spiritual wellbeing.

The subjects offered from the academic unit are Research Methodology and Bio Statistics for Level III BAMS, Swasthavritta (Community Medicine) for Level III BAMS as core course units and Yoga and meditation and Ayurveda Roopalavanya Sanrakshana (Ayurveda Beauty Care) for Level IV BAMS as Optional course units. Under the Practical component, the academic unit is conducting clinical training in OPD at Ayurveda Teaching Hospital Borella, Yoga practical at the Yoga Centre and practical for Roopalavanya Sanrakshana at the SPA center at the institute. Educational Field tours included under the academic unit are Water purification centers, Slaughter House and Port Health Authority. In addition to these activities field surveys are conducted by Level III BAMS students for the subject of Swasthavritta.

To fulfill the social responsibility, the academic unit is organizing community-based awareness programs and health camps annually in collaboration with the students.

Yoga center and SPA center are included under the infrastructure facilities of academic unit of Swasthavritta.



Since its establishment in 1929, the academic unit of Kaya Chikitsa has been an integral part of Institute of Indigenous Medicine, University of Colombo. It continues to provide innovative Ayurveda medical education and cutting-edge discoveries, and delivers competent and compassionate patient care at the Ayurveda Teaching Hospital, Borella.

The academic unit of Kaya Chikitsa provides excellence in teaching, research, and clinical services related to the nature, cure, and prevention of diseases. The unit is committed to providing innovative and world-renowned Ayurveda general medical training to develop the next generation of Ayurveda medical leaders. The Ayurveda clinical medicine program provides core clinical training to undergraduate level III, IV and level V and postgraduate students. The unit offer broad clinical experiences through various disciplines to the highest professional standards to identify the Ayurveda path physiological mechanisms, and to prevent and treat diseases.

Academic staff members continue to excel in Ayurveda clinical medicine; *Panchakarma*, *Rasayana* and *Manas Roga* in the field of Kaya Chikitsa. The academic unit staff expertise includes areas of Ayurveda pathology, laboratory medicine involved in both basic science and healthcare delivery. Senior academics, technical and supportive staff members help to achieve the goal of improving health education and health care locally and globally.

A successful partnership with Ayurveda teaching hospital that emphasize innovation and care, allows us to attract the top medical minds and undergraduate and postgraduate research. The unit aims to build a successful foundation for the next generation of the health care leaders. Members of the academic unit regularly present their findings at local, national, and international conferences and publish in national and international publications.

## Unit of Shalya Shalakya



The academic unit of Shalya Shalakya provides teaching and training in Shalya and Shalakya for undergraduates and post graduates along with its clinical services to a large segment of the population. *Shalya Thantra* is one of the eight branches of Ayurveda which makes a sustained contribution in the fields of ano-rectal diseases wound management, urinary disorders and fracture healing where ancient clinical and surgical procedures are practiced. *Shalya Thantra* explicit many surgeries which are more advanced than that of the present era. *Shalakya Thantra* is the branch of Ayurveda which deals with the diseases above the clavicle viz. head and neck portions of the body. *Shalakya Thantra* focus on *Netra Chikitsa* (Ophthalmology), *Karna Chikitsa* (Otology), *Nasa Chikitsa* (Rhino logy), *Mukha roga* Chikitsa (Oral medicine and Dentistry) and Shiro roga Chikitsa (diseases of the cranium) with special treatment procedures which effectively manage eye, ear, nose, head and throat diseases. However, the accurate and timely diagnosis of disease continues to be an important aspect as well as the patient safety has become an essential component in quality healthcare. In depth learning and training in Shalya and Shalakya fulfill the current national requirements in the field of Ayurveda addressing the global trends.

### Aims and objectives of the academic unit of Shalya Shalakya:

- To disclose a profound knowledge of Shalya and Shalakya supplemented with knowledge of modern advances to be efficient physicians, surgeons, and researchers fully competent to serve the National health care services.
- To enable undergraduate and post graduate students to identify and manage surgical problems, eye, ear nose, head and oral diseases through Medicinal, Surgical, and Parasurgical treatment modalities.
- To produce Professionals with commitment, ethical and understand the legal responsibilities accountable to patients, community, and profession.

# Unit of Prasuthi Thantra Kaumarabhritya



The academic unit of Prasuthi Thantra Kaumarabhritya is responsible for teaching the compulsory subjects of Stree Roga Prasuthi Thantra (Gynecology and Obstetrics), *Bala Roga* (Pediatrics) BAMS for Level V students, and optional subject of Reproduction and Genetics for BAMS Level IV students. The clinical programme of the academic unit is conducted at the National Ayurveda Teaching Hospital Colombo. The *Prasuthi Thantra* encompasses the study of normal and abnormal pregnancy. In *Stree Roga*, the main areas of interest are in reproductive and sexual health, fertility control, disorders of the female genital tract and menopausal issues. The teaching program of *Bala Roga* includes bed side teaching in the ward and clinics to maintain general health states of children and managing their pathological conditions.

### Vision of the Academic Unit

To be the leading academic unit in Prasuthi Thantra Kaumarabhritya in imparting knowledge, skills and attitudes towards child survival and safe motherhood

### Mission of the Academic Unit

To provide adequate training opportunities to develop skills, knowledge and attitudes to produce Ayurveda graduates, self-empowered to practice at a primary health care level to promote, prevent, preserve, and treat common gynecological, obstetric and pediatrics conditions.

# Unit of Desheeya Chikitsa



Every country has its own medicinal system known as traditional or indigenous medicine this plays a major role in their primary health care of this country. Sri Lanka has a rich traditional medicinal system practiced from the time of king *Rawana*. Before the arrival of Ayurveda from North India to Sri Lanka there had been an indigenous system of medicine practiced from time immemorial in the island. This view has been proved with the invention of historical evidence such as excavation of ruins of an ancient hospital in *Mihintale*. This empirical indigenous system of medicine had several prominent disciplines practiced by different traditions (*Guru Kula*). Out of these expertises *Kadum bindum, Sarpavisha, Unmada, Akshiroga, Gedivanplika, Vidumpillissum, Devumpillissum, Mandam vedakama* etc became very much popular among people of the Island. With the propagation of Ayurveda in Sri Lanka after arrival of Mahinda thero the indigenous system of medicine started to be blended with the major theories of Ayurveda. Therefore, the indigenous medicine practiced today in the island is an amalgamation of indigenous system of Ayurveda.

Indigenous system is very rich in unique medical preparations, prescriptions, pharmaceutical products, techniques of diagnosis, therapeutic techniques etc. The purpose of incorporation of the subject of Desheeya Chikitsa is to protect, preserve, nature, develop and propagate the indigenous system in Sri Lanka. Thereby it is aimed at getting maximum benefit out of the people of the island.

## The aims and objectives of academic unit are;

- To impart detail knowledge pertaining to the various indigenous medical expertise to the students.
- To facilitate student to practice indigenous medical expertise and utilize local natural resources in alleviating disease and prevent them.
- To enable student to understand and to practice indigenous diagnosing techniques and therapeutic techniques.
- To develop the skills of the students to prepare *Desheeya Kasaya* (Decoction), *Guli* (Pills), *Churna* (Powders), *Taila* (Oils), *Patthu* (Paste), *Mallum* etc.

# **Departments of Study (Unani Section)**

## Head of the Department of study in Unani

Professor M.S.M. Shiffa BUMS, MD, PhD (R), LLB, Att. at Law



The IIM, University of Colombo is the only institute that provides the Unani medical Education in Sri Lanka. The Unani medical teaching is carried out at the institute since its inception in 1929. Unani medical division consists of 2 main study Programs such as undergraduate (BUMS) and Post Graduate Programs.

The Unani medical teaching is carried out by 8 academic units of the Unani Section. They include clinical and non-clinical related subjects and the undergraduates and Post Graduate students of the Unani medicine. The academic unit directly responsible for teaching training and evaluation of the undergraduate and post graduate students. There is a growing demand for health care services with traditional medical treatment modalities including Unani medicine. This situation compels the World Health Organization to take medical measure to improve the traditional medical health care to suit the expectation of the present society.

History of Unani Medicine begins from the period of Pericles (562-430B.C) and it was developed during the Arab civilization. Hence, it is also known as Arab medicine. The Arabs, who were seafarers in mediaeval time, had commercial links mainly with India, but later they resorted to direct trade with Sri Lanka. As a result, many of them settled down in Sri Lanka, especially in the coastal areas. The Muslims of Sri Lanka disseminated and preserved this system even in this 21st century. Its dominating figure was Boharath (Hippocrates 460-360 B.C) who is still preferred to as the "Father of Medicine", and he was the authority of the humoral theory. The great Philosopher Arasthu (Aristotle 384-322 B.C) was the next prominent figure in Unani Medicine. Jalinoos (Galen 131-210 B.C) introduced his Anatomical knowledge to the Arabians. Since then there have been so many authorities who contributed towards the development of Unani system. Ibn Sina (Avicenna 937-1037) was the most famous Physician and Philosopher in Unani Medicine System. Among his contribution to medicine "Canon of Medicine" which is an encyclopedia and text book of medicine is the best.



The academic unit of Basic principles is among the first subdivisions established in Unani section. This academic unit is an important one and the back bone of Unani Medicine. The theoretical framework of Unani medicine is based on the work of Hippocrates (460-377 BC). By his method of careful study and comparison of symptoms, he laid down the foundation for clinical medicine based on diet and rest. Educate the undergraduates and enabling to practice the Mizaj concept and research are responsible of this academic unit. Academic unit of Kulliyat contains all the basic principles of physiological and a therapeutic aspect of Unani Medicine. This unit has started to guide postgraduate diploma in Unani. The knowledge and skills of the studies are imparted to develop competent physicians to the world.

The main goal of the academic unit is to achieve excellence in teaching, research and clinical services in Unani fundamental theories /concepts/philosophies without ignoring scientific view of the same, along with its history and language. The academic unit strives to bring about progression in the science of Unani Fundamental Medicine through innovation and enterprise. The main objectives of this academic unit are to comprehend the philosophical aspects of medical systems, to identify non-physical entities of traditional Unani system, to apply philosophy, non-physical entity in medical practice to invigorate the modern Unani system, to comprehend the historical value related to indigenous medical systems, to recognize and develop medico-cultural relationship in Unani medical field among SAARC and Middle East countries, to understand the past, to put the best into practice in the present, to plan a better future in the medical field, to pronounce Urdu and Arabic words, especially Unani Medical Terms and to comprehend both modern and classical texts of Unani Medicine in Urdu and Arabic.

In order to assure the quality of this academic unit, it ensures implementing various practices such as, strictly following assignment deadline, conducting monthly unit meetings, and conducting departmental lecturers with student meetings etc.

Strength of the unit is arranging public awareness programs for the wellbeing of public and to make awareness of the Unani Medical system among public.



The academic unit of Ilmul Advia (academic unit of Unani pharmacology) of the Unani Section offers subjects of *Kulliyat e Advia, Mufrat Advia, Dawa Sazi,* and *Kustha Sazi*, which spread over Level I, Level II and Level III. These subjects are essential components of the BUMS curriculum. Further it offers Nutrition and Food cum Medicine, Industrial Drug Manufacturing and Agro Techniques of Medicinal plants as optional subjects which support and strength the Ilmul Advia. The academic unit strives hard to maintain academic excellence in all areas of studies of the academic unit. In addition, the academic unit also engages in community development programs such as conducting awareness programs, workshops and other activities.

## **Objectives of Academic unit**

To contribute to the development of a well-rounded Unani medical graduates who will demonstrate knowledge and competent with compassion in dealing with primary health care, desire for lifelong learning, evidence base practice and interdisciplinary team work in order to improve and sustain the health of the population.

To ensure that the medical graduate has acquired broad preventive health competencies needed to solve health problems of the community with the emphasis on health promotion, disease prevention, and cost-effective holistic interventions utilizing indigenous medical knowledge.

## Unit of Tahaffuzi va Samaji Tib



The academic unit of Tahaffuzi va Samaji Tib (TST), (Preventive and Social Medicine, Unani) under the Unani section of Institute of Indigenous Medicine strives to maintain academic excellence in all areas of departmental study. The academic unit of TST also involves several other activities, such as conducting special OPD at Ayurveda Teaching Hospital Borella and health awareness and health promotion programs under community engagement in various part of Sri Lanka. Following subjects are being taught from Level II to Level IV BUMS to meet the intended learning outcomes as per the curriculum. Core subjects are Research Methodology and Bio Statistics, Tahaffuziwa Samaji Tib, Community Medicine and Ilmus Sumoom. Herbal Beauty Culture and Drug Abuse Management as optional subjects.

### Field health activities and other students centered field programs:

According to the Level III of the BUMS curriculum the subject of Tahaffuzi va Samaji Tib (Preventive and Social Medicine, Unani) consists of community-based health educational programs focusing to identify the health-related problems among the general public and to implement health educational interventions by engaging Level III BUMS students. Further Level III BUMS students participate in practical sessions by visiting water purification plants as well as at Slaughter house on hygienic meat production under the same subject.

Level IV BUMS students visit National Zoological Garden for practical training on identifying poisonous snakes under Ilmus Summom subject. Further the same Level IV BUMS students also engage in practical sessions at rehabilitation centers for drug addicts under the subject Drug abuse management.



The academic unit of Moalijat has 8 permanent academic members, a temporary demonstrator, and 3 visiting lecturers. The academic unit is mainly dealing with the undergraduates' Clinical programs of the of the BUMS curriculum. The clinical programs start from level III to Level V and comprises 3 core subjects namely Principles of Diagnosis, Fundamental of treatment and Unani Clinical Medicine. In addition to this there are 3 optional subjects namely Massage and Physical Therapy, Counseling and Psychotherapy and *Punchakarma*. The academic unit established a Regimental Therapy Unit recently in order to further upgrade the Regimental therapy modalities to meet the growing demand.

The clinical training is mainly provided at the Teaching Hospital of Ayurveda with the participation of the teachers of the academic unit of Moalijat and the Unani Physicians of the Teaching Hospital of Ayurveda.

In addition to the undergraduate programs the academic unit also involves in teaching and training of the Postgraduate scholars.

The academic members of the academic unit provide healthcare service to the public at the Teaching Hospital of Ayurveda on honorary basis.

The academic members of the academic unit of Moalijat involve in research activities including the undergraduate research program for the Level IV students.

The academic unit of Moalijat also conducts community-based programs such as Health camps, Health promotion awareness programs through electronic and Mass media.

The academic unit is now working to establish a Clinical Skills Development Laboratory and the Pathology Museum in order to produce competent Unani Medical graduates to meet the national and global demand.

Further the academic unit has taken a decision to train the trainers in order to update their knowledge and skills.

## **Unit of Ilmul Jarahat**



The academic unit of *Ilmul Jarahat* basically offers lectures and practical trainings on surgery and ear, nose, throat and ophthalmology and assist the smooth functioning of 285 direct student contact hours in the course units of *Ilmul Jarahat* (Unani Surgery) and Amraz e Ain Anf Uznva Halq (ENT Ophthalmology and Othodontology). The total credits offered by the unit of *Ilmul Jarahat* are 14 (lectures 135 hours and practical training 150 hours). Therefore, the academic unit plays an important role in disseminating knowledge and developing skills of the undergraduates with expected competencies which are vital to their sustainable and successful career as medical practitioner and researcher.

The main objectives of this academic unit are to identify the problems at the first level of case and be able to refer whenever necessary, Diagnose and manage common surgical conditions according to Unani concept as well as modern science, Diagnose and perform operative procedures in minor surgical conditions; Competent with the capabilities of diagnosis and management of disease related to Eye, Ear, Nose, Throat (ENT) & Oral cavity, Impart modern scientific methods and materials related diseases of Eye, ENT & Oral cavity. The specific strategic objectives are to uplifting infrastructure facilities and establishment of skill laboratory.

We have adopted interactive teaching methods in our teaching practice such as students led seminars, reflective practice, self - directed learning, case studies, short clips, group activities, assignments etc. and the end of the each semester, students' feedback is obtained from the students to improve the quality of teaching and peer-review assessment is practiced to enhance the teaching modality of lecturers.

The practical sessions of Eye, ENT and surgery are conducted at National Ayurveda Teaching Hospital (NATH) Borella. A well prepared, informative student guide book is provided to each and every student to understand the role of his / her in the academic unit. In order to assure the quality of the academic unit, it ensures implementing various practices such as, strictly following assignment deadline, using video clips to demonstrate surgeries, conducting monthly unit meetings with students' representatives etc. Strengths of the academic unit are arranging and participating medical camps, practical observation on cataract surgery, training program on circumcision and first aid.



The academic unit of Niswan, Qabalat va Atfal basically offers lectures and practical trainings on Unani Gynecology, Obstetrics and Pediatrics and assist the smooth functioning of 270 direct student contact hours in the course units of *Niswan* (Gynecology), *Qabalat* (Obstetrics) and *Atfal* (Pediatrics). The total credits offered by this academic unit are 19 (lectures 180 hours and practical 210 hours). Therefore, the academic unit plays an important role in disseminating knowledge and developing skills of the undergraduates with expected competencies which are vital to their sustainable and successful career as medical practitioner and researcher.

The main Objectives of the academic unit are to identify common Paediatric, Gynaecological and Obstetrical problems and compare and contrast the pathological changes based on Unani and modern medical systems, to guide the caregivers to promote and maintain health during childhood, reproductive age and menopausal period, manage paediatrics, gynaecological and Obstetrics problems with appropriate Unani treatment modalities and to refer when necessary and handle normal labour and identify major deviation and refer cases to the relevant institutions if required. The specific strategic objectives are uplifting infrastructure facilities and establishment of skill laboratory.

The unit has adopted interactive teaching methods in its teaching practice such as students led seminars, reflective practice, self - directed learning, case studies, short clips, group activities, assignments etc. and at the end of the semester, students' feedback is obtained from each and every student to improve the quality of teaching. Also, peer-review assessment is practiced to enhance the teaching modality of lecturers.

In order to assure the quality of the academic unit, it ensures implementing various practices such as, strictly following assignment deadline, using video clips to demonstrate deliveries, conducting monthly unit meetings with students' representatives etc.

Strength of this academic unit is arranging public awareness programs on nationally and internationally declared health related days, weeks, and months. Respective programs are conducted in the schools and other areas where relevant target group is identified.

## Unit of Desheeya Ilaj



The academic unit of Desheeya Ilaj (DI) basically offers lectures and practical trainings on Unani Traditional medicine; assist these mouths functioning of the course units of DI. The total credits offered by this academic unit are 07 (lectures 60 hours and practical 90 hours). Therefore, the academic unit plays an important role in disseminating knowledge and developing skills of the undergraduates with expected competencies which are vital to their sustainable and successful career as medical practitioners and researchers.

The main objectives of our academic unit are to identify common Medicinal plant using in Unani Traditional medicine and problems and compare and contrast the pathological changes based on Unani and Traditional medical systems, manage children, and gynaecological (*Pennoykal*) problems with appropriate Unani and traditional treatment modalities and to refer when necessary and refer cases to the relevant institutions if required.

The unit has adopted interactive teaching methods in its teaching practice such as students led seminars, Reflective practice, self - directed learning, case studies, short clips, group activities, assignments etc. at the end of the semester, students' feedback are obtained from each and every student anonymously to improve the quality of teaching. Also, peer-review assessment is practiced to enhance the teaching modality of lecturers.

The practical sessions of Desheeya Ilaj conducted at National Ayurveda Teaching Hospital (NATH) and Various Traditional Physician clinic. Students are instructed to follow up each in-warded case, even follow up visits under the supervision of consultant /lecturer.

A well prepared, informative student hand book is provided to each and every student to understand the role of them in the academic unit. In order to assure the quality of the academic unit, it ensures implementing various practices such as, strictly following assignment deadline, using video clips to demonstrate deliveries, conducting monthly unit meetings with student's representative etc.

Strength of this academic unit is arranging public awareness programs nationally on Health-related days, weeks, and months. Respective programs are conducted in the schools and other areas where relevant target group is identified.

## **Information Technology Section**



Information Technology Section established in 1986 as **Audio Visual Unit** through donation provided by the government of Japan. At the beginning Audio Visual Unit was limited to few functions. With the development of information technology, enhanced the IT services and changed the name as Information Technology Section.

Information Technology Section is the main Information Technology resources provider for the Institute of Indigenous Medicine. IT Section is equipped with main Auditorium, Mini Lecture hall, and two computer labs, with a total number of 50 client machines which are allocated for Students as well as for lecturers. One computer lab has been exclusively reserved for free use by students and the other lab is mainly used for practice under the supervision of a lecturer. IT Section conducts IT lectures for Ayurveda students and Unani students. Further IT Section provides Internet facilities, photography facility, sounds facilities, IIM domain email creation facility, and computer repairing and software installation facilities to the IIM. IT section is the main authorized unit to handle websites and Learning Management System (LMS) of the IIM. According to the request it updates the main website or it develops new websites.

IT section is headed by academic staff member and it also consists Two Computer Instructors, Assistant Network Manager, Technical Officer, and Two Lab attendants. The unit work as a team to provide best IT related services to the IIM.

The Information Technology Section is open on week days except on public holidays from 8 a.m. to 5.30 p. m. The said time period may be varied on institutional needs.



The library of the Institute of Indigenous Medicine, University of Colombo was founded in 1929, the same year that the Ayurveda College was inaugurated. This Library is the oldest and the largest Ayurveda medical library in Sri Lanka. The main book collection has over 35000 volumes of books. This comprehensive collection mainly covers a wide range of medical books related to Ayurveda system of medicine and Unani system of medicine and also other medical systems. Books on Ayurveda which are written in Sanskrit language and Unani books in Urdu language are among them. In addition to the Lending, Reference, Permanent Reference, Theses, and Archival collections there are three special collections comprising Medicinal plants, Ola leaf manuscripts and Hand written manuscripts.

All library resources are properly accessioned and recorded in catalogues, according to the second edition of Anglo-American Cataloguing Rules (AACR) 2 and according to the Dewey Decimal Classification (DDC) System for easy access of users. The whole library collection has been computerized according to the "KOHA" Software. Readers have access to library resources through online public Access catalogue (OPAC). The library provides various services and facilities including Reader service, Inquiry service, photocopying service, inter library loan service, Document delivery service, Scanning service, and User education programs etc. The library consists of Permanent Reference Section, Reference Section, Lending Section, Periodicals Section, Ola Leaf Manuscripts Section, Archival Section, Photocopying Section, and the Bindery.

At present the library expanded its services to meet information requirements of Undergraduate and Postgraduate students and also Academic and Non-academic staff. The library of Institute of Indigenous Medicine is one of the member libraries of Health Literature Libraries and Information Services Network (HeLLIS) and Sri Lanka Scientific and Technological Information Network (SLSTINET).

# **Student Population at IIM**

The Distribution of the student population of the institute among the sections is given in the following table.

# **Undergraduate Student Enrollment**

Intake	Ayurveda			Unani		
	Male	Female	Total	Male	Female	Total
2019/20 (1st Prof)	37	152	189	12	59	71
2018/19 (1st Prof)	35	135	170	7	41	48
2017/18 (2nd Prof)	39	122	161	4	41	45
2016/17 (3rd year)	33	138	171	6	43	49
2015/16 (4th year)	31	119	150	3	29	32
2014/15 (5th year)	28	103	131	12	33	45
Total	203	769	972	44	246	290

Number of total students: 1262



**Auditorium of the Institute** 



Waligaththa Medicinal Garden



**Pharmacy of the Institute** 



**Ayurveda Lecture Halls** 



**Annual Pirith Chanting Ceremony** 



Student's participation for cricket team, Matches organized by Cricket Association of Thailand



**Orientation Programme** 



Ayurveda Medical Camp in Vijayabahu Infantry Regiment -2021

## **Committees of the Institute**

### DEPARTMENTAL COMMITTEE OF AYURVEDA

Departmental Committee is entrusted with the responsibility to make recommendation on all matters connected with the courses of study, teaching programs and examinations in the relevant branches of Indigenous Medicine. In terms of section 15(1) of the Institute of Indigenous Medicine Ordinance No. 7 of 1979 the Academic Committee 2013 has been constituted. Chairperson of Ayurveda Departmental Committee – Sectional Head/ Ayurveda is Dr. (Mrs.) SP Molligoda. All permanent Lecturers are members of the Ayurveda Departmental Committee.

#### DEPARTMENTAL COMMITTEE OF UNANI

Departmental Committee is entrusted with the responsibility to make recommendation on all matters connected with the courses of study, teaching programs and examinations in the relevant branches of Indigenous Medicine. In terms of section 15(1) of the Institute of Indigenous Medicine Ordinance No. 7 of 1979 the Academic Committee 2013 has been constituted. Chairman of Unani Departmental Committee – Sectional Head/ Unani is Prof. MSM Shiffa. All permanent Lecturers are members of the Unani Departmental Committee.

### THE QUALITY ASSURANCE CELL

Institute of Indigenous Medicine established the Quality Assurance Cell (QAC) in par with the guidelines given in the manual published by the QAC of the UGC for public universities. The QAC comes directly under the Director of the IIM. The goal of the QAC shall be to create a culture that continually improving the quality of all academic related activities of the IIM. For this purpose, QAC has published the manual on "Standard Operational Procedures". Major functions of the QAC can be categorized as follows:

- Develop policies and procedures specially to improve the quality of teaching and learning activities, examinations, and research and student support systems.
- Liaise with the QAC in facilitating the conduct of external reviews in the IIM.

- Guide/assist Ayurveda Sectional Committee and Unani Sectional Committee in preparation of self-evaluation reports for the institutional review and the program review.
- Submit QA review report to the senate council
- To facilitate the implementation of the follow-up actions recommended by the Higher Education Ministry for the program or institutional review reports, and monitor progress in their implementation.
- To liaise with quality assurance activities and share good practices especially in:
  - ✓ Maintenance of the quality and standards of the examinations and assessments
  - ✓ Maintenance of ethics and standards of students, staff, examinations, and research
  - ✓ Ensure financial viability and availability of financial resources ✓ Professionalize the administration process
- As the Institute of Indigenous Medicine is a small institute, Staff Development activities are also organized by the QAC.

### ADMINISTRATIVE STAFF MEETING

Administrative Staff meeting of the institute has been established to discuss the matters pertaining to the administration.

The members of the administrative staff meeting are as follows

1. Senior Prof: PA Paranagama – Director

Dr. (Mrs.) SP Molligoda - Head/ Ayurveda
 Prof. MSM Shiffa - Head/Unani

4. Mrs. A. Ratnayake – Acting Deputy Registrar

5. Mr.TP Liyanarachchi – Deputy Bursar

6. Mr. HMG Punchibanda - Senior Assistant Bursar
 7. Mrs. APSM Dolage - Senior Assistant Bursar
 8. Mrs. P.M. Ayomi - Senior Assistant Librarian

9. Mrs. EHM Ranasinghe - Assistant Registrar
 10. Mrs. HRS Gomes - Assistant Registrar
 11. Prof. SMS Samarakoon - Head of the IT Unit

It will be held on the 1st Wednesday of every month.

Discussion regarding the progress of the administrative of every section is done at each meeting.

## **Objective**

The finance committee is a subcommittee of the Board of Management of the institute, responsible for all matters relating to the financial affairs of the institute, the areas of strategic financial planning, resource management, financial monitoring, and policy related issues and to provide timely advice to Board of Management (BOM) on areas within its responsibility.

### Membership of the committee

The committee, shall be appointed by the Board of Management.

#### **Members**

1. Senior Prof. PA Paranagama - Chair person 2. Dr. MDJ Abeygunawardhane - Member 3. Mr. MDD Peiris - Member 4. Prof. Kapila Senevirathne - Member 5. Dr. (Mrs.) SP Molligoda - Member 6. Prof. MSM Shiffa - Member 7. DR/SAR/AR - Member - Member 8. DB/SAB/AB 9. Internal Auditor (UOC) - Member

### **Period**

Membership of the committee is appointed for a period of three years

### **Meetings**

The committee shall meet at least quarterly every year.

### **Duties**

Develop and review policies relating to the financial management of the institute and recommend to the Board of Management for approval

#### RESEARCH MANAGEMENT COMMITTEE

Apart from teaching, Academic staff of the Institute of Indigenous Medicine (IIM) are entrusted to explore the innovative knowledge through research activities and to serve the community through developing the field of Ayurveda, Unani, and Traditional systems of medicine.

The main objective of the RMC is to assist the academics in the IIM to contribute to the field of Ayurveda, Unani and Traditional systems of medicine through high quality research and disseminating such research knowledge to the community partnership programs.

## **Objectives of RMC**

- · To strengthen the sustainability of the IIM
- To take full advantage of the value and usefulness of academic and intellectual resources
- To increase national and global contribution of the IIM  $\square$  To improve the image and raise the rank of the IIM

Composition of the Research and Management Committee

The committee is composed of following members nominated by the Board of Management.

- Director, Chairperson the committee.
- All the Senior Professors / Professors in Ayurveda and Unani sections
- · Heads of the department of study in Ayurveda and Unani
- · Heads of the Academic Unit of Ayurveda and Unani

### **ETHICS REVIEW COMMITTEE (ERC)**

The Ethics Review Committee of the Institute of Indigenous Medicine (ERCIIM), University of Colombo was established in 2011. It is a 17 members committee consisting of members nominated from Institute of Indigenous Medicine and other universities or institute with experience and knowledge in research in different fields. Present chairperson of the ERCIIM is Prof. (Mrs.) RDH Kulathunga and the secretary is Prof. (Mrs.) MI Manuha. The ERCIIM reviews all research projects including research involving human and animal subjects.

ERCIIM ensures that the safety and rights of research participants and the researchers are protected and the obligation to the society is fulfilled.

ERCIIM protects the mental and physical welfare, rights, dignity and safety of human participants and animals used in research and facilitate ethical research by effective and efficient review and monitoring processes in accordance with the guidelines of Ministry of Health, Forum for Ethical Review Committee of Sri Lanka (FERCSL), as well as with World Health Organization (WHO) Good Clinical practices (GCPs) guideline. ERCIIM helps to promote evidence-based bio medical research for upgrading the Ayurveda/ Traditional/ Indigenous and Integrated system of medicine.

Ethic Review Committee of IIM, on  $3^{\rm rd}$  January of 2019 approved by the Ministry of Health Nutrition & Indigenous Medicine.

The institute has established a Grievance committee to look into complaints made by employees and students under the guidelines given below.

- The Grievance committee determines whether the formal written grievances submitted by the members of the institute have matters that are within the jurisdiction of the committee and if so, to hear the grievance.
- Members of the Grievance Committee are expected to attend the initial orientation meeting and schedule hearing dates to discuss the cases that have been forwarded.
- Members of the committee must at all times maintain a neutral status vis-à-vis the parties of the grievance and must be fair and impartial decision makers with high level of integrity and trust.
- The Committee's role is to listen and review all testimony and documentary evidences presented during the hearing to make a decision based on the evidence presented by each party.
- Committee members must be open minded and not presume that either parties of the grievance are right or wrong. They should be able to weigh the credibility of the evidence, make specific findings of fact, and determine whether the grievant has established the charges.
- The grievance procedure requires at least three members form the grievance committee to hear the grievance and decide the action while a non-voting chair presides over the process.
- The Committee is responsible for making written findings of facts and recommendations with regard to the grievance and assist the chair in finalizing the written report of the committee's decision.
- The committee must maintain confidential records for each case.
- It is important to ensure that the process that is followed by the grievance committee is fundamentally fair to all parties and complies with the university procedures.

### **Members of Grievance Committee**

- 1. Prof. Vidya Jyothi Vajira H. W. Dissanayake, Dean, Faculty of Medicine, University of Colombo
- 2. Prof. S.S.B.D.P. Soysa, 361/1, Kotte Road, Nugegoda
- 3. Prof. Gominda Ponnamperuma, Professor, Dept. of Medical Education, Faculty of Medicine, University of Colombo

#### **HOSTEL COMMITTEE**

Hostel Committee of Institute of the Indigenous Medicine is functioning as a main administration body which gives solutions to the all hostel issues. The committee meets, when some matters arrived. Mainly it decides to grant hostel facilities to students who are in need according to the facilities available.

## **Composition of the Hostel committee**

- 1. Senior Prof. PA Paranagama
- 2. Mrs. A. Ratnayake
- 3. Dr. (Mrs.) MRM Wickramasinghe
- 4. Prof. SMS Samarakoon
- 5. Dr. (MRS.) AG Samarawickrama
- 6. Mr. WK Senevirathne
- 7. Mrs. DMCK Dissanayake
- 8. Mr. ARMCSB Rathnayake
- 9. Mrs. HRS Gomes

- Director (Chairperson)
- Acting Deputy Registrar (Member)
- Senior Student counselor (Member)
- Warden -Boys hostels (Member)
- Warden -Girls hostels (Member)
- Sub Warden -Boys hostels (Member)
- Sub Warden Girls hostels (Member)
- \_ Work Superintend (Member)
- Assistant Registrar (Secretary)

### LIBRARY COMMITTEE

The library committee is a sub committee of the IIM, which considers all matters related to library services.

## **Objectives**

Discussion regarding the progress of library activities and plan future endeavors of dissemination of knowledge to tally with teaching, learning and research purposes of the IIM.

The committee shall meet once in two months every year.

## **Composition of the Library Committee**

- 01. Senior Prof. P. A. Paranagama
- 02. Mrs. P.M Ayomi
- 03. Dr. S.P. Molligoda
- 04. Prof. M.S.M. Shiffa
- 05. Dr. S.K.M.K Herapathdeniya
- Chairperson
- Secretary, Senior Assistant Librarian II
- HOD/Ayurveda, Senior Lecturer Gr. I
- Head / Department of Unani
- Senior Lecturer I

06. Dr. A. Samarawickrama

07. Dr. K.R. Weerasekara

08. Dr. A.P.A. Jayasiri

09. Dr. M.S.M. Nasmeer

10. M.A.A. Sirajudeen

11. Dr. S.M. Raesuddeen

12. Mr. M.L. Warnasooriya

13. Mr. T.P. Liyanarachchi

14. Mrs. Manjula Ranasinghe

15. Mrs. Shiromi Gomas

- Senior Lecturer Gr. I

- Senior Lecturer Gr. II

- Acting Deputy Registrar

- Deputy Bursar

- Assistant Registrar/ Establishment

- Assistant Registrar/ Admin

## INTERNATIONAL COLLABORATION OF THE INSTITUTE

The institute has established international collaboration with recognized universities, research institutes and other relevant institutes in order to strength the teaching and research activities of IIM. Several Memorandum of Understanding (MOU) are under process and details are given below.

- 1. Memorandum of Understanding between Banaras Hindu University, Varanasi, UP, India and Institute of Indigenous Medicine, University of Colombo, Sri Lanka.
- 2. Concept paper on Memorandum of Understanding between Japan Association for promotion of Ayurveda (JAPA), Japan, and Institute of Indigenous Medicine, University of Colombo, Sri Lanka.
- 3. MOU between Institute of Indigenous Medicine, University of Colombo, Sri Lanka and National Institute of Unani Medicine, Bangalore, Karnataka State, India.
- 4. MOU between Institute of Indigenous Medicine University of Colombo Rajagiriya Sri Lanka and Ahmed Ashraf Memorial Unani Specialty Treatment Centre for Paralysis.

# **SWOT ANALYSIS**

SWOT analysis was carried out to identify the gap and to develop the lacking areas.

### > Strengths

#### Historical advantage

The IIM which was established as the Swadeshiya Vaidya Vidyalaya (College of Indigenous Medicine) on June 10, 1929, is the first Medical Collage for Indigenous Medicine. Accordingly, the IIM has the historical advantage to benefit from the associated goodwill and privileges.

This is the oldest Indigenous Medicine Institute in Sri Lanka and celebrated the 90<sup>th</sup> anniversary in 2019.

#### Extend of Land

Institute of Indigenous Medicine has 10 Acres total land area which can be considered as strength for the future institutional development

#### University state

The IIM is attached to the premium University of Sri Lanka, the University of Colombo. As the University of Colombo is the oldest and the highest ranked university in Sri Lanka, the graduates of IIM receive international recognition and foreign collaboration.

#### Locational Privilege

Since the IIM is located in Sri Jayawardhanapura Kotte, which is the administrative and business capital of the country, the institute is easily accessible to the stake holders. This has been a great advantage for the institute when catering its service. The Ayurveda Teaching Hospital, which is used for clinical studies, is located close proximity of the Institute. This location is a great advantage for the undergraduates to obtain the clinical knowledge pertain to the field of Ayurveda/Unani easily. The mother University, the University of Colombo, is also situated around 2 Km away from the Institute.

#### Availability of infrastructure Facilities

Lecture halls, laboratories, Library, Information Technology Center, Herbal Garden, Play Ground, and Hostel facilities can be considered as strength to enhance the quality of the existing teaching and learning environment.

#### Human Resources

IIM has the strength of qualified academic, administrative, and administrative support staff. Most of the staff members have obtained their postgraduate qualifications in the relevant field from local as well as overseas universities. Thus, the IIM has the potential to conduct teaching and research for undergraduate as well as postgraduate degree programs in the Ayurveda/Unani to encounter national and international health problems.

#### Library facility

The library of the Institute of Indigenous Medicine has a very comprehensive collection of books which consists of Ayurveda, Indigenous, Unani and other alternative medical systems. In addition to the main book collection there are two special collections on Ola leaf manuscripts and Hand written manuscripts, contain inherited invaluable indigenous medical knowledge.

#### Information Technology Center (ITC)

The Center provides IT related facilities with internet for both students and staff. The IT center plays a major role in the implementation of Learning Management System (LMS), which assist the teaching and learning of undergraduates to enhance the quality of the degree program.

#### Medium of Instructions

Being the medium is English; it facilitates the students to update their knowledge to meet the global job market.

#### > External courses

The certificate courses and diplomas of IIM provide the extended knowledge to professionals of indigenous health sector to meet the social market requirement.

### Weaknesses

Some of the weaknesses are common to university system and some are specific to the IIM.

#### Insufficient administrative and non-academic staff

Inability to retain and attract the experienced administrative and non-academic staff, has negatively affect to deliver the effective services of IIM.

#### > Insufficient infrastructure facilities for the current students' intake

Inadequate infrastructure facilities such as hostels, lecture halls, cafeteria, reading rooms, laboratories, IT facilities, have negatively affected the enhancing of academic activities and production of quality graduates.

#### Lack of generated funds

Unavailability of fully established center for open and distance learning, lack of link with private sector and lack of innovations which lead to entrepreneurship have made the IIM to depend entirely on treasury funds.

#### Less research output and innovation

Lack of research facilities have caused to less research output and innovation in both quality and quantity of research.

#### Unavailability of fully facilitated National Ayurveda Teaching Hospital

This has caused to dissatisfaction of stake holders.

### Opportunities

#### > Higher demand for indigenous medicine

The factors such as competitive University entrance, job market, medium of instructions and unique courses have increased the demand.

#### Locational advantage

The IIM has been located in the heart of the capital city of Sri Lanka, which consist of other important facilities, which has increased the students' demand for the entrance.

#### Competitiveness of University entrance

This has caused to increase the students demand for the University entrance.

#### Economic, social, and market development

This has created the opportunity to introduce new curriculum, continues medical education and innovative techniques to the study programs.

#### > Demand for the paramedical health system

This has caused to develop new courses to fulfill the demand of other relevant para medical professionals involved in Indigenous health sector.

#### **Employability**

Higher entrepreneurship due to global and local demand has created increased employability of IIM graduates and decreased waiting time. Further, converts graduates into entrepreneurs than job seekers.

#### > Motivation to research and development

Due to current trend, graduates have been motivated to research and innovations.

#### Contribution to the national economy

The Indigenous Medical System is well accepted nationally and internationally. Consequently, the indigenous medical products of Ayurveda and Unani Medical Systems are popular in the global market, attract national and international clients, and thereby contribute to the earning of foreign exchange in the country.

#### International recognition

The curriculum of IIM is recognized by international Institutes known as Central Council for Indian Medicine (CCIM) and this has created more placements for postgraduate studies in Ayurveda and Unani Systems of Medicine.

#### > Industrial oriented study programs

The present developments of the market emphasize the importance of introducing the industrial oriented study programs.

#### > Threats

#### > Environmental hazards

Due to the location, the IIM faces the threat of flooding and wet soil conditions. Further, increases room for epidemics such as dengue, Filariasis and Leptospirosis.

#### Access difficulties

The extreme traffic jam and difficult access have limited the recruitment and retention of qualified staff.

#### > Availability of substandard lateral entries to the field

Under the existing legal situations, certain personnel who do not even possess a degree in Ayurveda/Unani are able to get involved in the field. Thus, this is a real threat for the institutional degree holders as they can obtain the registration as Ayurveda medical practitioners.

#### Union actions/ Political Motives

Due to union actions and political motives; which lead to extend the academic programs and postponement of the completion of period of degree program.

#### Limited postgraduate placements and facilities

Due to limited placements for postgraduate studies, academic and professional developments have been decreased.

#### Strict rules and lack of competitive wages

These have caused to limit the attraction and retention of qualified staff

# **VISION AND MISSION STATEMENTS**

#### **VISION**

To be a nationally and internationally acclaimed Centre of Excellence in Ayurveda, Unani and Indigenous Systems of Medicine in Sri Lanka.

#### **MISSION**

To conduct teaching and research towards dissemination and promotion of knowledge in the enhancement of status of Ayurveda, Unani and Indigenous systems of Medicine in Sri Lanka.

#### **LOGO**



# VALUES AND GUIDING PRINCIPLES

#### > Innovativeness & Exploration

The institute is ready to find new ventures and used this as guiding principles for future development, emphasis on innovations and encourages new ideas as well as thoughts on Ayurveda/Unani.

#### > Integrity

Institute performing with integrity, its actions, and words always reflect its values and respect each other with equity and equality.

#### Continues learning

IIM will always involve in getting to latest technology and used it to disseminate knowledge to undergraduates and society

#### Traditional but unique superiorly

IIM courses are blended with unique traditional knowledge with immensely benefited for health sector and the industry. It is motivating factor to introduce new knowledge to heath sector.

#### > Responsibility and accountability

The institute responsible for its own actions and productions.

#### > Diversity of subject discipline

The institute always ready to revise and expand the study program to meet the changes in the environment.

#### Commitment & efficiency

The IIM expects its staff's commitments and efficiency in there works to meet the challenges and working with highest level of enthusiasm to achieve its goals.

#### Ownership and pride

All academic, administrative, and academic supportive staff will perform as a team and it's a pride to be a member of IIM team.

## > Equal Opportunity

The institute recognizes that its strength and unity come from providing equal opportunities to everyone, built on the foundations of social justice and equality.

#### > Futuristic view

To meet the needs of the stake holders, IIM will adjust according to the changing social technological and policy environment.

# THE ROLE OF THE INSTITUTE OF INDIGENOUS MEDICINE

#### The role of the institute is to;

- produce quality Medical Professionals of Ayurveda / Unani who are, equipped with knowledge, skills, attitudes competencies and perform their profession with highest moral and ethical standards as expected by the public.
- be a self-supporting, autonomous body administratively and financially.
- provide indigenous medical education in the relevant fields expected by the state and private sectors.
- taking into consideration of the development in the fields of Ayurveda, Unani and traditional medicine contents of the curriculum and review periodically.
- assist the health care services of the country.
- develop research culture to strengthen the Ayurveda and Unani medical systems.
- conduct Continues Medical Education (CME) programs.
- establish collaborative link programs with other research Institutes/ Universities.
- allow staff attend skill development programs.
- to analysis the health requirements of private and public sector
- strengthen a career guidance service for under graduates of the institute to develop their soft skills.
- introduce entrepreneurship development programs on drug manufacturing which encouraging students for self-employment.
- to improve the Cooperate Social Responsibility (CSR) of the Institute
- entering to the Holistic approach in order to integrate the indigenous medicine with other traditional Medical System.

# CORPORATE GOALS

- 1. Increasing the demand for higher education in Indigenous Medicine
- 2. Achieving excellence in academic programs
- 3. Achieving excellence in research, innovation and entrepreneurship
- 4. Ensuring the Socio Economic development of the country
- 5. Ensuring national and international recognition of IIM
- 6. Improving physical and esthetic environment, and ensuring stakeholders satisfaction of IIM.
- 7. Ensuing good administration and sustainability

# GOALS, OBJECTIVES AND STRATEGIES OF IIM

	GOALS	OBJECTIVES	STRATEGIES
Goal 01	Increasing the demand for	To strengthen the higher education in Indigenous medicine	Uphold the enrolment capacity of the Institute
	higher education in Indigenous Medicine	margenous medicine	Strengthen the mechanisms to increase the opportunities for the postgraduate diploma and certificate courses
		To increase the employability	Design the curriculum to meet the global and national demand for indigenous system of medicine
			Promote awareness on job opportunities in indigenous medical systems
		To meet the University Standard	Converting the IIM in to faculty to meet the standard of the University of Colombo
			Establishment of Departments
Goal 02	Achieving excellence in	To enhance the graduate attributes	Strengthen the effective methods of teaching, learning and assessments
	academic programs	via use of appropriate technologies and pedagogies	Upgrade and promote access to information resources through modern technology
		To enhance the quality of degree	Establish a systemic review of degree programs
		programs in par with global standard	Enhance the innovativeness and creativeness
			Develop professionalism
Goal 03	Achieving excellence in	To strengthen the research culture at	Strengthen the mechanism to improve research and innovation
	research, innovation and	IIM	Increase the H-index of IIM
	entrepreneurship		Expand the facilities for enhance research culture
			Encourage the academic staff to get the research funds
		To strengthen the research networks with local and foreign institutions	Research and collaboration with national and international institutions

		To promote innovativeness and entrepreneurships	Facilitate knowledge and technology transfer  Establish mutually beneficial associations with industries for the R & D
Goal 04	Ensuring the Socio – Economic	To contribute socioeconomic	Strengthen the social responsibility towards public
	development of the country	development by identifying and	Develop the collaboration with professional organizations
		addressing the needs of the society	Provide consultancy service at national policy level for the socioeconomic development of the country
		To ensure social harmony at IIM	Implement/ enhance positive cooperate culture in the institute
		To promote value addition for Indigenous products	Enhance innovativeness and creativeness lead researches
		To retain traditional medical systems	Promoting traditional medicine
		medical systems	Promote herbal garden projects
			Establish the State-of-the-art center for Indigenous medical system
Goal 05	Ensuring national and international	To ensure national and international	Promoting national and international collaborations
	recognition of IIM	visibility of IIM	Encouraging more publications from IIM
		To ensure visibility	Dissemination of knowledge
		of academic	Dissemination of research findings
		excellence	Promote collaborative academic activities with foreign and local institutes
		To achieve higher global ranking via	Upgrading the existing website to meet international standard
		strengthen the UOC ranking	Promote use of new research technology

Goal 06	Improving physical and esthetic	To upgrade physical environment	Optimal use of existing infrastructure facilities
	environment, and ensuring stakeholders satisfaction of IIM.		Improve and expand the infrastructure facilities
		To improve esthetic environment	Develop landscaping for beautification
		To ensure stake holders'	Provide welfare facilities for students and staff
		satisfactions	Improving services to the stakeholders
Goal 07	Ensuing good administration and	To create group of high caliber and	Recruiting staff to fulfill the required human resource
	sustainability	competent staff	Train existing staff into competent and high caliber individuals in their relevant working areas
		To provide effective and unbiased	Strengthen and maintain the effective management
		administration at all level	Improve existing administrative procedures and practices
			Improve examination procedures and practices
		To ensure effective management of finance	Sustainable use of finance to deliver the financial services to IIM
		To develop master plan	Attract the treasury funds
			Improve infrastructure facilities

# **KEY PERFORMANCE INDICATORS**

	Goals	Main KPI			Years		
	doais	No of registered UG students		2023	2024	2025	2026
1.	Increasing the demand for higher education in	No of registered UG students	296	296	296	296	296
	Indigenous Medicine	No of registered PG students	50	60	70	80	80
		No of students registered for certificate and diploma course		40	50	60	70
		No. of students completed postgraduate programs		50	60	70	80
2.	Achieving excellence in academic programs	Percentage of incorporating blended learning	85%	100%	100%	100%	100%
		No. of professional development programs for academic staff and students	15	18	22	27	30
		No. of students per computer per batch	4	3	2	1	1
		Capacity of university Wi-Fi service	100%	100%	100%	100%	100%
		Percentage of programs mapped with SLQF	100%	100%	100%	100%	100%
3.	Achieving excellence in research, innovation and	No of publication in Index Journals	50	60	70	80	90
	entrepreneurship	Total Google Scholar Citations of IIM	1500	2000	2500	3000	3250
		Research funding (Rs.)	3 Mn	4 Mn	5 Mn	6 Mn	6Mn
4.	Ensuring the Socio – Economic development of the country	Social impact index	44	46	50	55	60
5.	Ensuring national and international recognition	No. of nationals and international collaborations	7	12	14	15	15
	of IIM	World university ranking	801-1000		Below	v 800	
6.	Improving physical and esthetic environment, and ensuring stakeholders satisfaction of IIM.	Facility condition index		87%	92%	96%	100%
7.	Ensuing good administration and sustainability	Percentage of existing carder filled		90%	100%	100%	100%
		Percentage of utilization of annual budgetary allocation	100%	100%	100%	100%	100%

# **GOAL 1: Increasing the demand for higher education in Indigenous Medicine**

**OBJECTIVE 1.1:** To strengthen the higher education in Indigenous medicine

**STRATEGY 1.1.1:** Uphold the enrolment capacity of the Institute

NO	A CTIVITY	RESPONSIBILITY	IZDI	P	ERFOR	MANCE '	TRAGET	TS.	SDG
NO	ACTIVITY		KPI	2022	2023	2024	2025	2026	SDG
1.1.1.1	Organizing orientation program with parental involvement	Director, DR, HODs, Academic Staff	No. of orientation programs	1	1	1	1	1	16.6
1.1.1.2	Getting full quota of student through UGC	Director, DR	No. of meeting with UGC	1	1	1	1	1	4.3 4.4 4.6
1.1.1.3	Maintaining the ragging free	Director, DR,	No. of complaints	0	0	0	0	0	4.a
	environment	Departmental Heads, Anti Ragging	No of counselling programs for new entrance	2	2	2	2	2	5.1 16.2
		committee, Academic Staff	No of counselling programs for senior students						
1.1.1.4	Promoting awareness about higher education in indigenous medicine	Director, DR, Departmental Heads, Student Counselors	Percentage of students' dropouts	5%	4%	3%	2%	1%	4.1 4.7
1.1.1.5	Prepare the study program prospectus	Director, DR, HODs	Percentage of completion	100%	100%	100%	100%	100%	4

**STRATEGY 1.1.2:** Strengthen the mechanisms to increase the opportunities for the postgraduate diploma and certificate course

NO	ACTIVITY	RESPONSIBILITY	KPI	Pl	ERFORM	MANCE '	TARGE'	ΓS	SDG
NU	ACTIVITY		KFI	2022	2023	2024	2025	2026	SDG
1.1.2.1	Introducing new postgraduate certificate and diploma courses	Departmental Heads, Unit Heads	Number of courses	8	9	9	9	10	4.a 9.5
1.1.2.2	Increasing the number of departments	Director, DR, Departmental Heads	Number of academic departments	2	2	2	2	2	4.a
1.1.2.3	Establishing Center for Open and Distance Learning (CODL)	Director, DR, Departmental Heads	Percentage of institution	10%	10%	10%	20%	25%	9.1
1.1.2.4	Increasing the number of	Director, DR,	No of registered PG students	50	60	70	80	80	9.5
	postgraduate students at IIM	Departmental Heads	No of students registered for certificate and diploma course	27	40	50	60	70	9.5

# **OBJECTIVE 1.2:** To increase the employability

**STRATEGY 1.2.1:** Design the curriculum to meet the global and national demand for Indigenous system of medicine

NO	ACTIVITY	RESPONSIBILITY	KPI	P	ERFORN	IANCE '	ΓARGET	`S	SDG
NO	ACTIVITY	KESPUNSIBILITI	KFI	2022	2023	2024	2025	2026	SDG
1.2.1.1	Reviewing the Curriculum of degree programs intermittently	HODs, HOUs, CDEC	Frequency of curriculum revision		Onc	e in 5 ye	ears		4.7 16.6
	to meet the stakeholders' requirement		No. of CDEC meetings per academic year	2	2	2	2	2	
			Frequency of feedback obtaining from the final year and passed out students per year	1	1	1	1	1	

			Percentage of completion of IIM subject bench marks	100%	100%	100%	100%	100%	
1.2.1.3	Undergraduate research projects	HODs, CDEC	Percentage of innovative projects	30%	35%	40%	45%	50%	4.4 9.5

## STRATEGY 1.2.2: Promote awareness on job opportunities in indigenous medical systems

NO	ACTIVITY RESPONSIBILITY	IZDI	Pl	SDG					
NO		RESPUNSIBILITY	Y KPI	2022	2023	2024	2025	2026	SDG
1.2.2.1	Conducting carrier guidance programs	CGU	No. of programs	4	5	5	5	6	4.4 4.7
1.2.2.2	Organizing Job fairs	CGU	No. of job fairs	1	1	1	1	1	8.3

## **OBJECTIVE 1.3:** To meet the University Standard

**STRATEGY 1.3.1:** Converting the IIM in to faculty to meet the standard of the University of Colombo

NO	ACTIVITY	DECEMBER 1884	****	P	SDG				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
1.3.1.1	Gazette notification of establishment of faculty	Director, DR, HODs, HOUs	Percentage of completion	80%	100%	100%	100%	100%	4.4 4.7 8.3
1.3.1.2	Appoint a new dean	Director, DR, HODs, HOUs	Percentage of Implementation	0%	100%	100%	100%	100%	
1.3.1.3	Formation of faculty board	Director, DR, HODs, HOUs	Percentage of Implementation	0%	100%	100%	100%	100%	
1.3.1.4	Establishment of new faculties	Director, DR, HODs, HOUs	Percentage of Progress	5%	10%	15%	20%	25%	

**STRATEGY 1.3.2:** Establishment of Departments

				PI	ERFORM	ANCE T	ARGET	S	an a
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
1.3.2.1	Department of Maulika Siddhanta and Shareera Vignana	Director, DR, HODs, HOUs	Percentage of Progress	100%	-	_	-	_	4.4 4.7 8.3
1.3.2.2	Department of Dravyaguna Vignana and Swasthavritta	Director, DR, HODs, HOUs	Percentage of Progress	100%	-	_	_	-	
1.3.2.3	Department of Ilmul Advia	Director, DR, HODs, HOUs	Percentage of Progress	100%	-	_	-	ı	
1.3.2.4	Department of Kayachikitsa & Deshiya Chikitsa	Director, DR, HODs, HOUs	Percentage of Progress	100%	-	_	_	ı	
1.3.2.5	Department of Moalejat	Director, DR, HODs, HOUs	Percentage of Progress	100%	_	_	_	ı	
1.3.2.6	Department of Shalya Shalakya & Prasutitantra Kaumarabhrithya	Director, DR, HODs, HOUs	Percentage of Progress	100%	_	-	-	-	

# GOAL 2: Achieving excellence in academic programs

**OBJECTIVE 2.1:** To enhance the graduate attributes via use of appropriate technologies and pedagogies **STRATEGY 2.1.1:** Strengthen the effective methods of teaching, learning and assessments

NO	A CTIVITY	DECDONCIDILITY	IZDI	P	ERFOR	MANCE '	TARGET	`S	CDC
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
2.1.1.1	Promoting interactive methods in teaching, leaning and	DR, Departmental Heads, Academic	No. of capacity building programs	5	6	6	6	8	4.a 4.c
	assessments	staff, CDEC members	Percentage of incorporating blended learning	85%	100%	100%	100%	100%	
			No of tutorials per credit	1	1	1	1	1	
			No. of assessments per semester, per course unit	1	1	1	1	1	
2.1.1.2	Implementing teaching and learning activities to promote logical and critical thinking	Academic staff	No of activities such as case- based studies, problem-based studies, small group discussion per course unit	5	5	5	5	5	4.4 8.3
2.1.1.3	Increasing university-hospital industry collaborations to enhance graduate attributes	CGU	Percentage of internships provided for undergraduate students	100%	100%	100%	100%	100%	4.4 8.3
			No of industrial exposure provided through field trips and industrial visits	10	10	10	10	10	
2.1.1.4	Promoting community-based learning	Unit Heads	No of medical camps and community projects	5	5	7	7	7	4.4,4.7

2.1.1.5	Establishment of professorial unit	Director, DR, DB HODs, HOUs, All	Percentage of completion	50%	100%	100%	100%	100%	4.4,4.7
2.1.1.6	Establish medical education unit	academics	Percentage of progress	80%	100%	100%	100%	100%	4.4,4.7
2.1.1.7	Establish teaching hospital		Percentage of progress	50%	100%	100%	100%	100%	4.4,4.7

## **STRATEGY 2.1.2:** Upgrade and promote access to information resources through modern technology

NO	ACTIVITY	DECDONCIDILITY	IZDI	P	ERFORM	MANCE '	<b>TARGET</b>	TS .	SDG
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
2.1.2.1	Expand the access to ICT resources	Director, DR, IT Section	No. of students per computer per batch	4	3	2	1	1	9.C
			Capacity of University Wi-Fi service	100%	100%	100%	100%	100%	
2.1.2.2	Promote usage of information resources through modern technology	IT Section	Percentage of students accessed LMS	100%	100%	100%	100%	100%	9.C
2.1.2.3	Online teaching in study programs	IT Section	Percentage of implementation	100%	100%	100%	100%	100%	4.a 9.c

# **OBJECTIVE 2.2:** To enhance the quality of degree programs in par with global standard **STRATEGY 2.2.1:** Establish a systemic review of degree programs

NO	ACTIVITY RESPONSIE	DECDONCIDII ITV	KPI PERFORMANC		PERFORMANCE TARGETS				CDC
NO	ACTIVITY	RESPUNSIBILITY	KPI	2022	2022 2023 2024 2025 2026			2026	SDG
2.2.1.1	Obtaining feedback from students	IQAC, CDEC	Frequency of obtaining feedback		1/ Cours	se unit/ S	Semeste	r	
2.2.1.2	Mapping programs with SLQF	HODs, Academic	Percentage of programs	100%   100%   100%   100%   100%				4.4	
		Staff	mapped						

2.2.1.3	Encouraging students to do research on remedy for national and global health issues	HODs, Academic Staff	No of presentations made (symposium per year)	55	60	65	70	100	9.5
2.2.15	Introducing fall back options to degree programs	Director, DR, HODs, HOUs	Percentage of implementation	70%	100%	100%	100%	100%	9.5
2.2.16	Prepare policy for course design and approval (SOP & TOR)	Director, DR, CDEC, IQAC	No of policies updated and finalized	100%	100%	100%	100%	100%	9.5

## **STRATEGY 2.2.2:** Enhance the innovativeness and creativeness

N.	10	A CTIVITY	RESPONSIBILITY	KPI -	P	CDC				
I N	10	ACTIVITY	2	2022	2023	2024	2025	2026	SDG	
2.2.2	2.1	Introducing Blended learning/ Student centered learning	IT Unit, All academic staff	No. of workshop/ seminars for academic staff	6	7	8	9	10	4.a 4.c
				Percentage of implementation	70%	80%	100%	100%	100%	

# **STRATEGY 2.2.3:** Develop professionalism

NO	ACTIVITY	DECDONCIDII ITV	KPI	P	SDG				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025		SDG
2.2.3.1	Formulating guideline to standardize internship and industrial program	Director, DR, CGU	Percentage of implementation	100%	100%	100%	100%	100%	4.7 16.6
2.2.3.2	Conducting carrier guidance, soft skills development and virtual training programs on regular basis	Director, DR, CGU	No. of programs conducted	2	3	3	3	6	4.4

# GOAL 3: Achieving excellence in research, innovation and entrepreneurship

**OBJECTIVE 3.1:** To strengthen the research culture at IIM **STRATEGY 3.1.1:** Strengthen the mechanisms to improve research and innovation

NO	A COTTANTONIA	DEGDONGIDII ITW	PONSIBILITY KPI	P	ERFOR	MANCE '	TARGE	ΓS	SDG
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
3.1.1.1	Motivating the academics to do research	Director, DR, DB, All academic staff	Percentage of hours allocated for the research per academic year	25%	25%	25%	25%	25%	9.5
			No of workshop to aware the academics on research methodologies and technologies	2	3	4	5	5	
			No of academics receiving awards	4	4	5	5	6	
3.1.1.2	Integrating research into undergraduates	Research Committee, CDEC	Percentage of students who undertake research as a part of the degree program	100%	100%	100%	100%	100%	9.5
3.1.1.3	Incorporating research into postgraduate certificate and diploma courses	Research and Higher Degree Committee	No of postgraduate research students	50	60	70	80	80	9.5 8.3

**STRATEGY 3.1.2:** Increase the H-index of academics in IIM

NO	ACTIVITY	DECDONCIDILITY	PONSIBILITY KPI			IANCE '	TARGE	ΓS	SDG
NU	ACTIVITY	RESPUNSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
3.1.2.1	Ensuring extensive dissemination of research	Departmental Heads, Unit	No of articles published in indexed/peer review journals	60	80	90	100	120	9.5
		Heads	Total citations of IIM	1500	2000	2500	3000	3500	
			Percentage of academics' H index 2 or above 2	40%	30%	40%	50%	60%	
			Percentage of academics' i10index 2 or above 2	25%	30%	35%	40%	45%	
3.1.2.2	Encouraging academics to enrolled in social networking site for scientists and researchers such as google scholar, research Gate, ORCID, etc.	All Academic Staff	Percentage of academics enrolled in social networking sites	100%	100%	100%	100%	100%	9.5

**STRATEGY 3.1.3:** Expand the facilities for enhance research culture

NO	ACTIVITY	DECDONCIDII ITV	KPI	Pl	SDC				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
3.1.3.1	Improving research infrastructure	Director, DR, DB, HOUs, All	Percentage of allocation of the fund per year	8%	10%	12%	15%	20%	9.5
3.1.3.2	Purchasing research equipment	Academics	Percentage of fund allocated to purchase equipment	8%	8%	9%	9%	10%	9.5
3.1.3.3	Increasing the E- resources, reputed journals and data bases to enhance research resources	Director, DR, DB, Librarian	No of subscriptions	5	5	5	5	5	9.5

**STRATEGY 3.1.4:** Encourage the academic staff to get the research funds

NO	ACTIVITY	RESPONSIBILITY	I/DI	KPI PERFORMANCE TARGETS	ΓS	SDG			
NU	ACTIVITI	KESPUNSIBILITI	KFI	2022	2023	2024	2025	2026	SDG
3.1.4.1	Organize workshop on writing research proposal	Academic Staff	No. of research proposals per year	13	15	18	20	25	4.c 9.5

# **OBJECTIVE 3.2:** To strengthen the research networks with local and foreign institutions **STRATEGY 3.2.1:** Research collaboration with national and international institutions

NO	ACTIVITY RESP	RESPONSIBILITY KPI	Pl	ΓS	SDG				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
3.2.1.1	Encouraging research on national and international health issues	Director, Academic Staff	No of research papers and book publications	50	60	70	100	120	9.5
3.2.1.2	Organizing national and international conferences, workshops and seminars	Director, DR, Departmental Heads, DB	No of programs organized per year	20	25	28	32	35	9.5
3.2.1.3	Increasing the participations of students and staff for national and international conferences, workshops and seminars	Director, Academic Staff	No of participations of academics per year	20	22	25	25	25	9.5
3.2.1.4	Promoting national and international research collaborations	Director, Academic Staff	No of collaborative research/publications	7	12	14	15	20	9.5
3.2.1.5	MOU with foreign and local institutes	Director, DR, DB	No of MOUs	3	3	4	5	6	9.5

# **OBJECTIVE 3.3:** To promote innovativeness and entrepreneurships **STRATEGY 3.3.1:** Facilitate knowledge and technology transfer

NO	ACTIVITY	RESPONSIBILITY	КРІ	PERFORMANCE TARGETS						
NO	ACTIVITY			2022	2023	2024	2025	2026	SDG	
3.3.1.1	Organizing seminar and workshops for students to motivate and facilitate knowledge on innovation and entrepreneurships	Director, DR, DB	No of training programs per year	4	4	5	5	5	9.5	
3.3.1.2	Establish research center to promote innovation and entrepreneurships	Director, DR, DB	Percentage of development	10%	20%	30%	40%	50%	9.5	

# **STRATEGY 3.3.2:** Establish mutually beneficial associations with industries for the R&D

NO	ACTIVITY	RESPONSIBILITY	KPI	Pl	SDG				
NO	ACTIVITY	RESPUNSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
3.3.2.1	Organizing industrial visits for exposure to new technologies	Director, DR, DB, All academic staff	No of visit	2	3	3	3	5	9.5
3.3.2.2	Encouraging collaborative work with industries	Director, DR, DB, All academic staff	No of joint work	5	7	7	8	8	9.5
3.3.2.3	Encouraging commercialization of R&D	Director, DR, DB, All academic staff	No of innovation and new product	2	4	6	8	10	8.3 9.5

## **GOAL 4: Ensuring the Socio - Economic development of the country**

**OBJECTIVE 4.1:** To contribute socio-economic development by identifying and addressing the needs of the society **STRATEGY 4.1.1:** Strengthen the social responsibility towards public

NO A 1 1 1 1 C	ACTIVITY	DECDONCIDILITY	VDI	Pl	ERFORM	MANCE	TS	CDC	
	ACTIVITI	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
4.1.1.1	Conducting community outreach programs and educational programs for school students	All Academic Staff	No of programs conducted	10	12	12	12	12	4.1 10.2

**STRATEGY 4.1.2:** Develop the collaboration with professional organizations

NO	A CTIVITY	RESPONSBILITY	SBILITY KPI	Pl	SDG				
NO	ACTIVITY	RESPUNSBILLLY	KPI	2022	2023	2024	2025	2026	SDG
4.1.2.1	Contribution to the society via staff engagement in collaboration with	Director, All academic staff	No of workshop conducted	15	20	25	30	30	8.2 8.3
	governmental and nongovernmental organization		No of staff involved	20	25	30	40	50	
4.1.2.2	Conducting professional development programs for public and private sector employees	Director, All academic staff	No of programs conducted per year	4	4	4	4	4	4.4 17.16

**STRATEGY 4.1.3:** Provide consultancy service at national policy level for the socio-economic development of the country

NO	ACTIVITY	RESPONSIBILITY	КРІ	Pl	TS	CDC			
	ACTIVITY	KESPUNSIBILI I		2022	2023	2024	2025	2026	SDG
4.1.3.1	Contribution in the publication for the national policy development	All academic staff	No of staff in advisory board	11	12	13	15	20	8.3
4.1.3.2	Participating in the discussions	All academic staff	No of plans discussed	11	12	13	15	15	

## **OBJECTIVE 4.2:** To ensure social harmony at IIM

## **STRATEGY 4.2.1:** Implement/ enhance positive cooperate culture in the institute

NO	ACTIVITY	DECDONCIDII ITV	КРІ	PI	SDG				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
4.2.1.1	Organizing multicultural events such as festival and religious events	Director, DR, DB	No of events	5	5	5	5	5	4.7

## **OBJECTIVE 4.3:** To promote value addition for Indigenous products

## **STRATEGY 4.3.1:** Enhance innovativeness and creativeness lead researches

	4 00000	DEGE ON GERMANIA	ту крі	P	SDC				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
4.3.1.1	Established fully fledged pharmacy	HOU/ DGV	Percentage of establishment	70%	80%	90%	100%	100%	4.a,9.b
4.3.1.2	Develop innovative research proposals	All academics	No of research grants	10	12	13	15	18	9.5
4.3.1.3	Develop & maintain Research and Development of Natural Product	Coordinator RADNPU, HOU/	Percentage of research and development	10%	20%	30%	40%	50%	9.5
	Unit (RADNPU)	DGV	No of new MOUs	0	1	1	2	2	
			Percentage of new products implementation	10%	20%	30%	40%	50%	

**OBJECTIVE 4.4:** To retain traditional medical systems **STRATEGY 4.4.1:** Promoting traditional medicine

NO	ACTIVITY	RESPONSIBILITY	КРІ	PI	SDG				
NO	ACTIVITY			2022	2023	2024	2025	2026	SDG
4.4.1.1	Providing honorary healthcare services	DR, DB, HOU/DC, HOU/DI	No. of medical camps, mobile medical clinics	5	5	6	6	6	3.4 3.b 3.d
4.4.1.2	Conducting awareness programs	All Academics, HOU/DC, HOU/DI	No awareness programs for public and school children	10	12	15	20	20	4.6 4.7

## **STRATEGY 4.4.2:** Promote herbal garden projects

NO	ACTIVITY	RESPONSIBILITY	КРІ	Pl	SDG				
NO	ACTIVITY			2022	2023	2024	2025	2026	SDG
4.4.2.1	Improving herbal garden at the Institute	HOU/ DGV	Percentage of implementation	65%	70%	75%	80%	100%	4.7 4.a
4.4.2.2	Awareness programs to the school and public to establish herbal	All Academic	No of programs	2	2	2	2	2	12.2 12.8
	garden		No of herbal gardens	2	2	2	2	2	11.7

**STRATEGY 4.4.3:** Establish the State-of-the-art center for Indigenous medical system

NO	ACTIVITY	DECDONCIDILITY	КРІ	P	CDC				
NO	ACTIVITY		KPI	2022	2023	2024	2025	2026	SDG
4.4.3.1	Establishment of center for Sri Lankan Indigenous Medicine	Director, Sectional Heads, Unit Heads	Percentage of implementation	10%	20%	30%	50%	50%	4.4 8.3 9.5

# **GOAL 5: Ensuring national and international recognition of IIM**

**OBJECTIVE 5.1:** To ensure national and international visibility of IIM **STRATEGY 5.1.1:** Promoting national and international collaborations

NO	ACTIVITY	DECDONCIDII ITV	KPI	I	PERFOR	MANCE	TARGET	rs .	SDG
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
5.1.1.1	Pursuing postgraduate degrees from recognized national and foreign universities	All Academics	Percentage of academics with the postgraduate degrees	96%	99%	100%	100%	100%	4.b 4.c 9.5
5.1.1.2	Getting academics services from other universities/institutions	Director, HODs, All Academics	No of services	29	31	35	35	35	4.c
5.1.1.3	Providing academics services to other universities/institutions	Director, HODs, All Academics	No of services	16	20	25	30	30	4.c
5.1.1.4	Enrolling foreign students	Director, HODs, All Academics	No of registered foreign students for certificate and diploma courses	1	2	3	4	5	4.3
			No of registered foreign students undergraduate courses	0	1	2	3	4	4.3
			No of registered foreign students for postgraduate courses	0	1	2	3	4	4.3
5.1.1.5	Receiving overseas short-term training	Director, HODs, All Academics	No of staff participations	4	5	6	7	8	4.c
5.1.1.6	Participating as guest/invited speakers	All Academics	No of invitations received	15	20	25	30	35	17.16
5.1.1.7	Obtaining membership in academic/professional associations	Director, HODs	No of memberships	50	60	70	80	90	4.c 17.16

5.1.1.8	Encouraging staff to participate in mass media discussion, interview and talks	Director, HODs	No of participations	30	35	40	50	55	5.b,9.5
5.1.1.9	Encouraging staff to participate in national and international conferences/workshops/training programs by providing funds	Director, DR, DB	No of staff participated	10	12	14	16	18	4.c 5.c

**STRATEGY 5.1.2:** Encouraging more publications from IIM

NO	ACTIVITY	DECDONCIDII ITV	VDI	PERFORMANCE TARGETS						
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG	
5.1.2.1	Publishing journal, Newsletters, Magazine, etc.	All academics	No of publications published by IIM per year	6	7	7	8	8	3 9.5	

# **OBJECTIVE 5.2:** To ensure visibility of academic excellence

**STRATEGY 5.2.1:** Dissemination of knowledge

NO	ACTIVITY	DECDONCIDILITY	КРІ	Pl	SDC				
NO	ACTIVITY	RESPONSIBILITY		2022	2023	2024	2025	2026	SDG
5.2.1.1	Disseminating the knowledge via print and electronic media	All academics	No of events	30	35	40	50	45	4.7 9.5
5.2.1.2	Encouraging the academics to serve as speakers in international conferences.	All academics	No of speeches made	26	30	35	40	60	
5.2.1.3	Participating as a resource person in workshops and seminars	All academics	No of events	14	20	28	30	50	

**STRATEGY 5.2.3:** Dissemination of research findings

NO	ACTIVITY	DECDANCIDII ITV	KPI	Pl	SDG				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
5.2.3.1	Serving as a reviewer and editorial board member in reputed journals	All Academics	No of academics	55	65	75	80	90	9.5 17.16
5.2.3.2	Organizing conferences / webinars	All Academics	No of programs	12	15	18	18	18	
5.2.3.3	Joining the social networking sites for research such as google scholar, research Gate, ORCID, etc.	All Academics	Percentage of academics enrolled in social networking sites	100%	100%	100%	100%	100%	

**STRATEGY 5.2.4:** Promote collaborative academic activities with foreign and local institutes

NO	A CONTINUOU	RESPONSIBILITY	КРІ	P	CDC				
NO	ACTIVITY			2022	2023	2024	2025	2026	SDG
5.2.4.1	Organizing CME and professional development programs	All Academics	No of programs	2	3	4	5	5	4.4 4.c
5.2.4.2	Promote academic and students to do collaborative PG and postdoctoral studies with foreign and local institute	All Academics	No of collaborative studies	11	13	14	15	20	4.4 4.c 9.5

# **OBJECTIVE 5.3:** To achieve higher global ranking via strengthen the UOC ranking **STRATEGY 5.3.1:** Upgrading the existing website to meet international standard

NO	ACTIVITY	DECDONCIDILITY	ч крі	Pl	SDG				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
5.3.1.2	Establish research links for increase information base of IIM	IT Section	No of links	77	Depend on Academic Carders				
5.3.2.2	Updating and upgrading the	IT Section	No of updating per month		Daily				
	website		No of upgrading per year	12	12	12	12	12	
			No of web committee meetings per month	1	1	1	1	1	

## **STRATEGY 5.3.2:** Promote use of new research technology

NO	ACTIVITY	DECDONCIDII ITV	VDI	Pl	CDC				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
5.3.2.1	Regular workshop to uplift the research technology	Director, DR, DB	No of workshops	1	1	1	1	1	4.4 4.c 9.5

## GOAL 6: Improving physical and esthetic environment, and ensuring stakeholders' satisfactions at IIM

**OBJECTIVE 6.1:** To upgrade physical environment **STRATEGY 6.1.1:** Optimal use of existing infrastructure facilities

NO	A CONTRACTOR	RESPONSIBILITY	LITY KPI PERFORMANCR TARGETS	PERFORMANCR TARG			TS	CDC	
NO	ACTIVITY	RESPUNSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
6.1.1.1	Optimal use of lecture halls, library, pharmacy and laboratories	Unit Heads, All academic staff,	Duration (hours) of lecture hall occupied during the day	10	10	10	10	10	16.6
		Librarian	Duration (hours) of opening time of library per day	11	11	11	11	11	
			No of drugs prepared per month	08	10	10	10	10	
			No of experiments and research carried out per year	30	40	50	60	70	

# **STRATEGY 6.1.2:** Improve and expand the infrastructure facilities

NO	ACTIVITY	RESPONSIBILITY	Y KPI	P	SDG				
NO	ACTIVITY	RESPUNSIBILITY	KFI	2022	2023	2024	2025	2026	SDG
6.1.2.1	Improving existing lecture halls with full-fledged facilities	Director, DR, DB, AR /GA	No of lecture halls	6	8	8	8	8	4.a 9.c
6.1.2.2	Expansion of Lecture halls	Director, DR, DB, AR/GA	Percentage of renovation	85%	100%	100%	100%	100%	
6.1.2.3	Expanding the facilities for library	Director, DR, DB,	Percentage of reference area	90%	90%	90%	90%	100%	
		Librarian	Percentage of improved modern facilities (Wi-Fi/ AC)	100%	100%	100%	100%	100%	

6.1.2.4	Implementation of 8 storied building	Director, DR, DB, AR/GA	Percentage of implementation	30%	50%	80%	100%	100%	
6.1.2.5	Implementation of 3 storied building (phase 1)	Director, DR, DB, AR/GA	Percentage of implementation	5%	100%	100%	100%	100%	
6.1.2.6	Improving playground with necessary facilities	Director, DR, DB,	Percentage of implementation	100%	100%	100%	100%	100%	
6.1.2.7	Implementation of Solar Panel system	Director, DR, DB, AR/GA	Percentage of progress (procurement process and installation process)	20%	100%	100%	100%	100%	
6.1.2.8	Implementation of Lightning system	Director, DR, DB, AR/GA	Percentage of progress	6%	100%	100%	100%	100%	
6.1.2.9	Upgrading the pharmacy and laboratory with fully-fledged necessary equipment and machineries	Director, DR, DB,	Percentage of implementation	65%	70%	75%	80%	100%	
6.1.2.10	Providing necessary furniture for the lecture halls, office and lecturers' rooms	Director, DR, DB, Sectional Heads	Percentage of implementation	90%	100%	100%	100%	100%	<b>4.</b> a
6.1.2.11	Improving herbal garden facilities	Director, DR, DB, academic staff,	No of verities of medicinal plant cultivated per year	325	350	375	400	400	4.a 11.7
		HOU/DGV, HOU/IA	Percentage of renovation of green house	75%	80%	85%	90%	100%	

## **OBJECTIVE 6.2:** To improve esthetic environment

## **STRATEGY 6.2.1:** Develop landscaping for beautification

NO	ACTIVITY	RESPONSBILITY	КРІ	P	SDG				
NO	ACTIVITY			2021	2022	2023	2024	2026	SDG
6.2.1.1	Introducing green environment	Director, DR, All academic staff, DB	Percentage of allocated area occupied by plants	50%	55%	65%	75%	80%	4.a 11.7
6.2.1.2	Increasing the student leisure areas	Director, DR, WS	Percentage of area developed	90%	100%	100%	100%	100%	
6.2.1.3	Improving parking areas	Director, DR, WS	Percentage of implementation	100%	100%	100%	100%	100%	

## **OBJECTIVE 6.3:** To ensure stakeholders' satisfactions

#### **STRATEGY 6.3.1:** Provide welfare facilities for students and staff

		RESPONSIBILITY	ry kpi	P	an a				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
6.3.1.1	Providing hostel facilities	Director, DR, DB, WS	Percentage of students received hostel facilities	65%	70%	75%	80%	90%	4.a, 9.1
6.3.1.2	Establishing fully-fledged gymnasium	Director, DR, DB, Physical Instructor	No of major gym equipment	12	13	14	15	16	3.4, 9.1
6.3.1.3	Encouraging physical activity	Director, DR, HODs	Availability of sport facilities	2	2	2	2	2	3.4, 9.1
6.3.1.4	Organizing sports events between students and staff	Director, DR,HODs, Physical Instructor	No of sports events	26	26	26	26	26	4.7
6.3.1.5	Promote and encourage social harmony	Director, DR, Sectional Heads	No of multicultural, social and multi-religious events	5	5	5	5	5	4.7

6.3.1.6	Improving the cafeteria	Director, DR, DB, AR, WS	No of students occupied at a time	175	200	200	200	200	3.4 9.1
			Percentage of improving existing infrastructure facilities	85%	100%	100%	10%	100%	
			Percentage of availability of traditional healthy food	25%	30%	35%	40%	40%	
6.3.1.7	Improving sanitary facilities	Director, DR, DB, AR, WS	Percentage of sanitary facilities	75%	85%	100%	100%	100%	6.2

# **STRATEGY 6.3.2:** Improving services to the stakeholders

	A CONVICTAL	DECDONCIDII IMV	WDI	P	CDC				
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
6.3.2.1	Re-establish the medical insurance according to the UGC circulars	Director, DR, DB	Number of medical insurance	0	1	2	2	2	3.c
6.3.2.2	Improving transport service	Director, DR, DB	No of vehicles	8	8	9	9	9	9.1
6.3.2.3	Improving services by healthcare center	Director, DR, DB, Medical officer	Percentage of facilities	80%	90%	100%	100%	100%	3.4 9.1

# GOAL 7: Ensuring good administration and Sustainability

**OBJECTIVE 7.1:** To create group of high caliber and competent staff **STRATEGY 7.1.1:** Recruiting staff to fulfill the required human resource

NO	ACTIVITY RESPONSIBILITY	RESPONSIBILITY	I/DI	P	PERFORMANCE TARGETS				
NO		KPI	2022	2023	2024	2025	2026	SDG	
7.1.1.1	Filling the vacant carder positions at all level	Director, DR, AR/ Est	Percentage of existing administrative carder filled	86%	100%	100%	100%	100%	4.c 8.5
			Percentage of existing academic carder filled	86%	100%	100%	100%	100%	16.6
			Percentage of existing non academic carder filled	78%	85%	100%	100%	100%	

# **STRATEGY 7.1.2:** Train existing staff into competent and high caliber individuals in their relevant working areas

NO	ACTIVITY RESPONSIBILITY	DECDONCIBILITY	IZDI	P	ERFOR	ERFORMANCE TARGETS			
NO		KPI	2022	2023	2024	2025	2026	SDG	
7.1.2.1	Implement awareness programs on administrative and academic process, procedures to relevant staff categories	Director, DR, AR/Est, All Academics	No of training programs for administrative staff (local & foreign)	6	6	6	6	6	4.4 4.c 8.3
			No of training programs for academic staff (local & foreign)	10	10	10	10	10	

			No of training programs for non-academic staff (local & foreign)	5	7	8	10	10	
7.1.2.2	Developing the skills, attitudes and knowledge of the staff	Director, DR	No of programs conducted per year	5	5	5	6	6	4.7 4.c
7.1.2.3	Encouraging academic staff to do postgraduate studies in the relevant field	Director, DR	Percentage of Mphil/MD and PhD qualified staff in Ayurveda and Unani	82%	90%	100%	100%	100%	4.4 4.c
7.1.2.4	Formulating work norms and ethics	Director, DR	Percentage of implementation  No of IQAC meetings per month	100%	100%	100%	100%	100%	8.3 16.6

# **OBJECTIVE 7.2:** To provide effective and unbiased administration at all level

**STRATEGY 7.2.1:** Strengthen and maintain the effective management

NO	A CTTYLEY	RESPONSIBILITY KPI	IZDI	PERFORMANCE TARGETS					
NO	ACTIVITY	ACTIVITY RESPONSIBILITY		2022	2023	2024	2025	2026	SDG
7.2.1.1	Reducing the recruitment duration for the vacant cadre for academic and administrative posts	Director, DR, AR/ Est	Average time taken to recruit staff in months	6	6	6	6	6	16.6
7.2.1.2	Promotion of the staff is done in a timely manner	Director, DR, AR/ Est	Average time taken to processing and getting promotions	1 year	1 year	1 year	1 year	1 year	16.6
7.2.1.4	Conducting statutory meetings in a timely manner	Director, DR, Sectional Heads	No of statutory meetings per month	1	1	1	1	1	16.6
			Average no of participants	100%	100%	100%	100%	100%	16.6

**STRATEGY 7.2.2:** Improve existing administrative procedures and practices

NO	ACTIVITY	DECDONCIDILITY	I/DI	P	ERFORM	MANCR '	TARGET	r <b>S</b>	SDG
NO	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
7.2.2.1	Establishing MIS system to monitor administrative work	Director, DR, AR/ Est	Percentage of implementation	100%	100%	100%	100%	100%	9.c
7.2.2.2	Introducing Manual of standard operational procedure (SOP)	Director, DR, AR/ Est	Percentage of implementation	100%	100%	100%	100%	100%	8.3 16.6
7.2.2.3	Promoting administrative matters doing via paperless mode	Director, DR, AR/ Est	Percentage of usage of online services in the administrative procedures and practices	70%	75%	80%	85%	90%	9.c 16.6
7.2.2.4	Developing a stress - free environment	Director, DR, AR/ Est	No of counselling programs and welfare activities	1	1	1	1	1	3.4 16.6
			No of welfare activities per year	4	4	4	4	4	
7.2.2.6	Develop Human Resource policy	Director, DR, IQAC	Percentage completion of policies updated and finalized	100%	100%	100%	100%	100%	9.1
7.2.2.7	Develop Gender Equity and Equality (GEE) policy	Director, DR, IQAC	Percentage completion of policies updated and finalized	100%	100%	100%	100%	100%	5

**STRATEGY 7.2.3:** Improve examination procedures and practices

NO	A CONTACTORY	DECDONCIDII IMV	.ITY	Pl	ERFOR	MANCR 7	RTARGETS		CDC
NO	ACTIVITY	RESPONSIBILITY		2022	2023	2024	2025	2026	SDG
7.2.3.1	Introduce a software program	Director, DR	Percentage of implementation	100%	100%	100%	100%	100%	9.c
7.2.3.2	Releasing the examination results of the students is done in a timely		Average time taken to release the exam results in month	1	1	1	1	1	16.6
	manner								

7.2.3.3	Develop and practice SOP for online examination for Students	DR	Percentage of implementation	100%	100%	100%	100%	100%	16.6
7.2.3.4	Develop and practice SOP for online examination for Staff	DR	Percentage of implementation	100%	100%	100%	100%	100%	16.6
7.2.3.5	Established exam Scrutiny board	Director, DR, HODs	Percentage of establishment	100%	100%	100%	100%	100%	16.6

# **OBJECTIVE 7.3:** To ensure effective management of finance

# **STRATEGY 7.3.1:** Sustainable use of finance to deliver the financial services to IIM

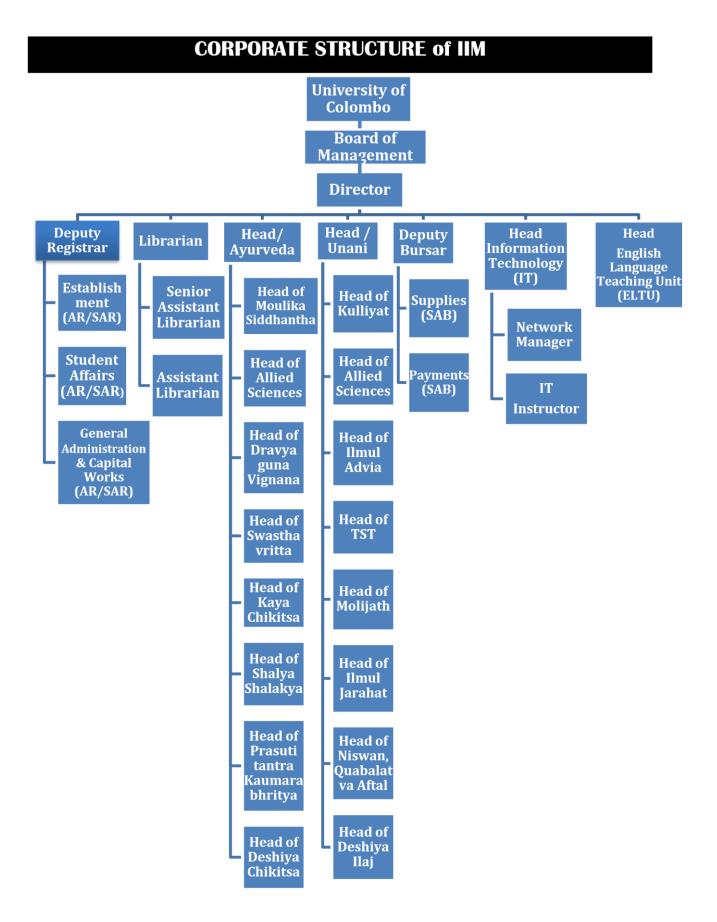
NO	ACTIVITY	DECDONCIDII ITV	IZDI	P	ERFOR	MANCE '	<b>TARGET</b>	TS .	SDG
NU	ACTIVITY	RESPONSIBILITY	KPI	2022	2023	2024	2025	2026	SDG
7.3.1.1	Hold Finance Committee and procurement committee regularly	DB, SAB	No of meetings per year	6	6	6	6	6	16.6 16.7
7.3.1.2	Adhere to financial regulations applied to university system	DB, SAB	Percentage of implementation	100%	100%	100%	100%	100%	16.6
7.3.1.3	Adopt finance regulations nearly introduced by UGC to all procurement activities	DB, SAB	Percentage of implementation	100%	100%	100%	100%	100%	16.6
7.3.1.4	Cash forecast management system	DB, SAB	Percentage of implementation	100%	100%	100%	100%	100%	9.c 16.6
7.3.1.5	Budgetary monitoring system	DB, SAB	Percentage of implementation	100%	100%	100%	100%	100%	
7.3.1.6	Utilization of annual budgetary allocation	DB, SAB	Percentage of utilization	100%	100%	100%	100%	100%	16.6

# **OBJECTIVE 7.4:** To develop Master Plan **STRATEGY 7.4.1:** Attract the treasury funds

NO	ACTIVITY	DECDONCIDII ITV	LITY KPI	PERFORMANCE TARGE			TARGETS		CDC
NO	ACTIVITY	RESPONSIBILITY		2022	2023	2024	2025	2026	SDG
7.4.1.1	Writing a good proposal	Director, DR, DB	Percentage achieved as per the need	25%	30%	35%	40%	50%	4.a,9, 8.8

# **STRATEGY 7.4.2:** Improve infrastructure facilities

NO	O ACTIVITY RESPONSIBILITY	DECDONCIDILITY	IZDI	P	ERFOR	FORMANCE TARGETS			
NO		KPI	2022	2023	2024	2025	2026	SDG	
7.4.2.1	Introduce new boys' and girls' hostels	Director, DR, DB, Wardens	Percentage of implementation	70%	100%	100%	100%	100%	4.a 5.1
7.4.2.2	Strengthen physical resources	Director, DR, DB, Wardens	Percentage of implementation	70%	80%	90%	100%	100%	4.a 9.c



#### The Board of Management of the Institute of Indigenous Medicine

01. Senior Prof. (Ms.) PA Paranagama Director, IIM(Chairperson) 02. Mr. AK Senevirathne Additional/Secretary (Non-State Higher Education) Ministry of Education 03. Ms. Geethamani C Karunarathne Additional Secretary (Admin), State Ministry of Promotion of Indigenous Medicine, Development of Rural Ayurvedic Hospitals and **Community Health** 04. Dr. MDJ Abeygunawardena Commissioner/Ayurveda 05. Dr. HMJB Herath Acting Director, Ayurvada Teaching Hospital, Borella 06. Mr. AMRN Rajapaksha Deputy Director, Department of External Resources, Ministry of Finance 07. Dr. (Ms.) Swarna Kaluthota Acting Director, Bandaranaike Ayurveda Research Institute 08. Prof. Vidya Jyothi Vajira HW Dissanayake Dean, Faculty of Medicine/University of Colombo 09. Dr. (Ms.) SP Molligoda Head, Ayurveda 10. Prof. MSM Shiffa Head, Unani 11. Prof. MC Weerasinghe Department of Community Medicine, Member of Faculty of Medicine Department of Bio Chemistry, Member of 12. Prof. (Ms.) Kithmini Siridewa Faculty of Medicine 13. Dr. Sanjeewa Senevirathne Department of Surgery, Member of Faculty of Medicine Member of Avurvedic Medical Council 14. Dr. MH Nimal Karunasiri 15. Mr. MDD Peiris **UGC** Appointed Member 16. Prof. Kapila Senevirathne **UGC** Appointed Member 17. Dr. Harsha Dharmavijaya **UGC** Appointed Member 18. Prof. (Ms.) SSBDP Soysa **UGC** Appointed Member **UGC** Appointed Member 19. Dr. SMH Senabanda 20. Prof. HAS. Ariyawansa **UGC** Appointed Member

**UGC** Appointed Member

**UGC** Appointed Member

Deputy Bursar (Invitee)

Assistant Registrar (Acting Secretary)

21. Dr.BM Rishad

23. Mr. TP Liyanarachchi

24. Ms. EHM Ranasinghe

22. Dr. (Ms.) Dayangani Senasekare

#### Administrative Staff of the IIM

Acting Deputy Registrar (Examination) - Mrs. A. Rathnayake
Assistant Registrar (Establishment) - Mrs. EHM Ransinghe

Assistant Registrar (Student Affairs/ Admin) - Mrs. HRS Gomes

Deputy Bursar (Accounts)

Senior Assistant Bursar (Payment)

Senior Assistant Bursar (Supply)

Senior Assistant Librarians

- Mr. TP Liyanaarachchi
- Mr. HMG Punchibanda
- Mrs. APSM Dolage
- Dr. (Mrs.) CK Gamage

- Mrs. PM Ayomi

Medical Officer - Dr. (Ms.) KKVS Peshala

**Student Counselors** 

Senior Student Counselor - Dr. (Mrs) WASS Weerakoon

**Student Counselor/Ayurveda** - Dr. (Mrs.) SKMK Harapathdeniya

- Prof. PK Perera

Dr. (Mrs.) APA JayasiriDr. KWK SomarathnaDr. (Mrs.) JM DahanayakaDr. (Mrs.) IAM Leena

- Dr. (Mrs.) OTMRKSB Kalawana - Dr. (Mrs.) YSG Wimalasiri

- Dr. A Gunasekara

- Dr. (Ms.) KKVS Peshala

Student Counselor/Unani - Prof. (Mrs) MUZN Farzana

- Prof. (Mrs.) N Fahamiya- Dr. (Mrs.) J Rumeiza- Dr. (Mrs) AM Muthalib

- Dr. ALM Ishan

- Dr. (Mrs.) MCN Razana

**Head / Information Technology** - Prof. SMS Samarakoon

**Hostel Administrators** 

Hostel Warden / Girls
 Sub-Warden/Girls
 Hostel Warden/Boys
 Prof. SMS Samarakoon
 Sub-Warden/Boys
 Mr. WK Senevirathne

#### The Heads of Units of Study

#### Unit of Study in Ayurveda

Head / Ayurveda Section Unit of Moulika Siddhantha

Unit of Allied Sciences

Unit of Dravyaguna Vignana

Unit of Swasthavritta Unit of Kaya Chikitsa Unit of Shalya Shalakya

Unit of Prasuthi Thantra Kaumarabhritya

Unit of Desheeya Chikitsa

- Dr. (Mrs.) SP Molligoda

- Dr. A Gunasekara

- Dr. (Mrs.) MRM Wikramasinghe

Dr. (Mrs.) JM DahanayakeDr. (Mrs.) YSG Wimalasiri

- Dr. (Mrs.) EDTP Gunaratna

- Dr. (Mrs.) LDR De Silva

- Dr. (Mrs.) IAM Leena

- Dr. (Mrs.) AG Samarawickrama

#### **Unit of Study in Unani**

Head /Unani Section

Unit of Kulliyat

**Unit of Allied Sciences** 

Unit of Ilmul Advia

Unit of Tahaffuzi va Samaji Tib

Unit of Moalijat

Unit of Ilmul Jarahat

Unit of Niswan, Quabalat va Aftal

Unit of Desheeya Ilaj

- Prof. MSM Shiffa

- Mrs. AR Hasmath

- Dr. SM Raeesuddeen

- Prof. N. Fahamiya

- Dr. (Mrs.) MNF Rizwana

- Dr. (Mrs.) AM Muthalib

- Dr. MAA Sirajudeen

- Dr. (Mrs.) J Rumaiza

- Dr. (Mrs.) MCN Razana

# The Academic Staff of the Departments

# Department of Study in Ayurveda

\* There are eight Units of Study in the Department of Ayurveda

#### **Unit of Moulika Siddhantha**

Dr. RS Jayawardhana BAMS, MD (Ayu), PhD	Professor
Dr. (Mrs.) IGPR Kulanatha BAMS, MD (Ayu)	Senior Lecturer Gr I
Dr. (Mrs.) SP Molligoda BAMS, M Phil, MD (Ayu)	Senior Lecturer Gr I
Dr. (Ms.) MWSJ Kumari BAMS, MD (Ayu), PhD	Senior Lecturer Gr II
Dr. Asoka Gunasekara BAMA, M Phil, PhD	Senior Lecturer Gr II
Dr. PK Wendabona BAMA, M Phil, PhD	Senior Lecturer Gr II
Dr. (Mrs.) PASN Silva BAMS, BA, MA	Lecturer Probationary
Dr. (Ms) R.M.D.A. Amarasiri	Lecturer Probationary

#### **Unit of Allied Sciences**

Dr. (Mrs.) PR Waratenne BAMS, MD (Ayu), PhD	Senior Lecturer Gr I
Dr. (Mrs.) MRM Wikramasinghe BAMS, MD (Ayu)	Senior Lecturer Gr I
Dr. DAL Munasinghe BSc, MSc, PhD	Lecturer
Dr. (Mrs.) S Weerasekara BAMS	Lecturer Probationary
Dr. S.PA.S. Nishan	Lecturer Probationary
Dr. H.L.N.R. Pradeep	Lecturer Probationary
Dr. (Ms.) L.A.W.J. Chathurika	Lecturer Probationary
Dr. (Mrs.) BSMM Sooriyaarachchi BAMS	Lecturer Probationary

#### **Unit of Dravyaguna Vignana**

Professor
Senior Lecturer Gr I
Senior Lecturer Gr II
Lecturer Unconfirmed Lecturer Probationary

#### **Unit of Swasthavritta**

Dr. (Mrs.) WMSSK Kulathunga BAMS, MD (Ayu)	Senior Lecturer Gr I
DI. (MIS.) WMSSK Kulatifuliga DAMS, MD (Ayu)	Sellioi Lecturei Gi i
Dr. TDN Karunaratne BAMS, MPhil (Ayu) PhD (UOK)	Senior Lecturer Gr I
Dr. (Mrs.) YSG Wimalasiri BAMS, PhD	Senior Lecturer Gr II
Dr. (Mrs.) PANG Perera BAMS, MSc	Lecturer Unconfirmed
Dr. (Ms) M.D.P. Ishara	Lecturer Probationary
Dr. M.A.C.L.Muthukuda	Lecturer Probationary
Dr. (Ms) K.D. Manori	Lecturer Probationary

# Unit of Kaya Chikitsa

Professor
Professor
Senior Lecturer Gr I
Senior Lecturer Gr II
Lecturer Probationary
Lecturer Probationary

# Unit of Prasuthi Thantra Kaumarabhritya

Dr. (Mrs.) SAD Siriwardhana BAMS, MD (Ayu), PhD	Senior Lecturer Gr I
Dr. (Mrs.) KPKR Karunagoda BAMS, MS (Ayu)	Senior Lecturer Gr I
Dr. (Mrs.) WASS Weerakoon BAMS, MPhil (Ayu), PhD	Senior Lecturer Gr I
Dr. (Mrs.) IAM Leena BAMS, MD (Ayu)	Senior Lecturer Gr I
Dr. (Mrs.) YAUD Karunaratne BAMS, MS (Ayu)	Senior Lecturer Gr I
Dr. (Mrs.) OTMRKSB Kalawana BAMS, MD (Ayu)	Senior Lecturer Gr II

# Unit of Shalya Shalakya

Dr. LPA Karunathilake BAMS, MS (Ayu), PhD	Senior Lecturer Gr I
Dr. (Mrs.) DAR Sakunthala BAMS, MS (Ayu)	Senior Lecturer Gr I
Dr DPA Dissanayaka BAMS, M Phil (Ayu)	Senior Lecturer Gr II
Dr. (Mrs.) LDR De Silva BAMS, MD (Ayu)	Senior Lecturer Gr II
Dr. (Mrs.) BMS Amarajeewa BAMS, MSc, MS (Ayu)	Senior Lecturer Gr II
Dr. (Ms.) R.L.Y.U. Rathnayake Dr. (Mrs.) KKVS Peshala BAMS, MS (Ayu)	Senior Lecturer Gr II Lecturer Unconfirmed
Dr. (Mrs.) BSMM Sooriyaarachchi BAMS	Lecturer Probationary

# Unit of Desheeya Chikitsa

Dr. (Mrs.) AG Samarawikrama BAMS, MPhil (Ayu), MD (Ayu)	Senior Lecturer Gr I
Dr. (Mrs.) RLDS Ranasinghe BAMS, MD (Ayu)	Lecturer

#### Department of Study in Unani

\*There are eight Units of Study in the Department of Unani.

#### **Unit of Kulliyat**

Dr. (Mrs.) MI Manuha BUMS, M Phil (Unani), PhD Professor

Dr. MCM Mahees BUMS, MD (Unani)

Senior Lecturer Gr I

Dr. ALM Ihsan BUMS, MD (Unani)

Senior Lecturer Gr II

Dr. AR Hasmath BA Lecturer

#### **Unit of Allied Sciences**

Dr. SM Raeesuddeen BUMS, MD(Unani)

Senior Lecturer Gr II

Dr. M.M.M. Nifras

Lecturer Probationary

Dr. (Ms) M.S.F. Sapra Lecturer Probationary

#### Unit of Ilmul Advia

Prof. (Mrs.) N Fahamiya BUMS, MD (Unani) Professor

Dr. AHM Mawjood BUMS, M Pharm, PhD

Dr. MMM Rifaee BUMS, M Phil (Unani)

Dr. M Nasmeer BUMS, MD (Unani)

Senior Lecturer Gr II

Senior Lecturer Gr II

Dr. (Mrs.) MNF Rizniya

Senior Lecturer Gr II

Dr. (Mrs.) EMGKN Begum

Lecturer Probationary

Dr. (Ms) A.S.F. Shifra Lecturer Probationary

#### Unit of Tahaffuzi va Samaji Tib

Dr. MHM Hafeel BUMS, M Phil, MD (Unani) Senior Lecturer Gr I

Dr. (Mrs.) MSS Fawmiya BUMS, MPhil (Unani) Senior Lecturer Gr II

Dr. (Mrs.) AA Rizwana BUMS, MD(Unani) Lecturer

#### **Unit of Moalijat**

Prof. MSM Shiffa BUMS, MD (Unani)

Dr. (Mrs.) AWS Fowziya DAMS, M. Phil. (Unani)

Dr. (Mrs.) MLU Salma BUMS, MD (Unani)

Dr. MHM Nazeem BUMS, M Phil (Unani)

Senior Lecturer Gr I

Dr. SM Raeesuddeen BUMS, MD(Unani)

Senior Lecturer Gr II

Dr. (Mrs.) AM Muthalib BUMS, PhD

Senior Lecturer Gr II

Dr. (Mrs.) MCN Razana BUMS, MD (Unani) Lecturer

#### Unit of Ilmul Jarahat

Dr. (Mrs.) AHA Fazeenah BUMS, MD Unani

Dr. MAA Sirajudeen BUMS, M Phil (Unani)

Senior Lecturer Gr I

Senior Lecturer Gr II

Lecturer Probationary

Dr. (Ms.) A.R.F. Rifshiya

Lecturer Probationary

#### Unit of Niswan, Qabalat Va Atfal

Prof. (Mrs.) MUZN Farzana BUMS, MS (Unani)

Dr. (Mrs.) H Nizamdeen BUMS, MD (Unani)

Professor

Senior Lecturer Gr II

Dr. (Mrs.) J Rumaiza BUMS, MS (Unani)

Senior Lecturer Gr II

#### Unit of Desheeya Ilaj

Dr. (Mrs.) MCN Razana BUMS, MD (Unani)

Lecturer

Dr. (Mrs.) FN Jamaldeen BUMS

Lecturer (Probationary)

# **Strategic Management Plan Committee**

- 1. Senior Prof. PA Paranagama
- 2. Dr. (Mrs.) SP Molligoda
- 3. Prof. MSM Shiffa
- 4. Prof. (Mrs.) N Fahamiya
- 5. Prof. SMS Samarakoon
- 6. Dr. (Mrs.) MRM Wickramasinghe
- 7. Dr. ALM Ihsan
- 8. Dr. DAL Munasinghe
- 9. Mrs. A Rathnayake