

Charity"No:"1066824" (EST – March 1988)



Annual General Meeting 24.11.2018

30 years of successful Healthcare Charity in UK







ADVRO
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Target for 2019
To Train
20 Healthcare
Assistants

Medical Institute of Tamils MIOT (UK)

Charity No: 1066824



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Agenda

Annual General Meeting Saturday 26th November 2016 5.00 - 6.00 pm

AGENDA

4.30 pm - 5.00pm

Registration

5.00 pm - 6.00 pm

President's Report - Dr S Uthayakumar

Approval of the minutes AGM held on

Annual Reports- General Secretary - Dr Logendran

Annual Accounts - Treasurer - Dr Girija Kugapala

To approve the annual subscription for the year ending 2017

Election of Office Bearers 2016/17

Members Question Time

Any Other business

6.00 pm

Close of meeting



MIOT Committees 2015/16

Central Committee

President	Dr. S. Uthayakumar	
Vice President	Dr. N. Sivayoganathan	
General Secretary	Mr. M. Logenthiran	
Assistant Secretary	Dr. R. Chelvan	
Treasurer	Dr. (Mrs.) G. Kugapala	
Editor	Dr. (Mrs.) T. Chelvan	
Trustees	Dr. (Mrs.) S. Natkunarajah	
19	Dr. M. Chandrakumar	
	Dr. (Mrs.) K. Niranjan	
	Mr. E. Velauthapillai	
Overseas Affairs	Dr. S. Poologanathan	
Community care & Research	Dr. N. Niranjan	
Social	Dr. Jeyapalan	
Membership	Dr. (Mrs.) T. Balakumar	
9	Dr. Sivarajaratnam	
Education	Dr. J.P.D. Gnanapragasam	
Youth Affairs	Dr. Ramyah Rajakulasingam	
	Dr. Arthy Uthayakumar	

Northern Committee

Executive committee members	Dr. E. Velauthapillai
Exceditive committee members	
	Dr. R. Gowribalan

Eastern Committee

President	Dr. James Gnanagapragasm	
General Secretary	Dr. S. Uthayakumar	
Educational Committee Members	Dr. Indu Uthayakumar	
	Prof. Raj Rajakulasingam	
	Dr. Thulasi Balakumar	
	Dr. Siva Mohan	
	Dr. Jeba Gnanapragasam	
	Prof. R N Chitramohan	
Junior Committee Members	Dr. Ramya Rajakulasingam	
8	Dr. Arani Uthayakumar	
	Dr. Aarthy Uthayakumar	
	Dr. Ramanan Rajakulasingham	



Wales Committee

President	Dr. V. Vipulendran	
Vice President	Dr. S. Kugathasan	
General Secretary	Dr. M. Pradeepan	
Treasurer	Dr. S. Murugiah	
Social Secretary	Mrs. T. Kugathasan	
Deputy Social Secretary	Mrs. R. Murugiah	

North Thames Region Committee

President	Dr. P. Kandasamay	
Vice President	Dr. M. Mylavaganam	
General Secretary	Mr. N. Sivarasan	
Treasurer	Dr. N. Niranjan	
Editor	Dr. A. Sivarasan	
Education	Dr. G. Niranjan	
Committee Members	Dr. (Mrs) J. Gnananandan	
	Dr. P. Kukathasan	
	Dr. S. Kulendran	
	Dr. (Mrs) K. Niranjan	
	Dr. S. Poologanathan	

South Thames Region Committee

President	Dr. S. Surenthiran
Vice President	Dr. R. Chelvan
General Secretary	Dr. S. Rajaratnam
Treasurer	Dr. N. Puvi
Committee Members	Dr. F. Balaratnam
	Dr. B. Baskaran
	Dr. M. Chandrakumar
	Dr. K. Gnaanachelvan
	Dr. S. Jeyanathan
18	Dr. S. Krishnapalasuriar
	Dr. I. KumarenDr.an
	Dr. A. Loganayagam
	Dr. A. MahenDr.arajah
	Dr. N. Navaratnarajah
	Dr. E. Selvanathan
	Dr. J. Sharavanan
	Dr. T. Sithamparathan
	Dr. S. Sivathasan
	Dr. V. Vijeyakulasingham



Annual Report from the President

It is my pleasure to present the annual report of the Medical Institute of Tamils. I consider this more as an honour rather than a privilege. We continue to excel in our aims and objectives as the one and only registered charity for Tamil doctors in the UK. We especially focus on education and training, relief of poverty and sickness, and the preservation and protection of the health of the Tamil community.

MIOT, together with other organisations is trying to rebuild the health and medical infrastructure of the Northeast, and trying to help the communities get back on their feet again. We are still facing challenges than ever before. Malnutrition, mental health disorders and even suicide rates have soared. But together we will meet them.

The Central Committee members attended in their own time and there were no additional administration costs. The committee and MIOT members were actively involved in several charitable activities which included fundraising and other community projects. We also continued to provide medical help to our people living in the homeland as well as in the UK.

'Wealth can disappear, but a solid education will always sustain'. MIOT continued the sponsorship to medical students from deprived areas as well as some of our regions has supported A level students as well. We are not only involved in charitable activities, but have also organised an excellent dinner dance event. This encouraged many young doctors and medical students to join MIOT activities. I am hopeful that these events will inspire our youngsters to get more involved in MIOT activities in future.

Following the overwhelming support at the extra-ordinary general meeting on the 10th May 2015, to go paper light and to communicate with members via web or e-mail, we upgraded the MIOT website and updated the email contact details.

We would like to reiterate that MIOT is a non-political, non-religious & non-profit charitable organisation, committed to help our people from the Homeland and other countries. I hope you are pleased with our services to the community and I thank you for our continued support. By being a member and participating in our various events, you strengthen our hands to do more to our community. I appeal to you to encourage other healthcare professionals known to you, to join MIOT; a non-political organisation which is mainly focused on the healthcare of our people.

"Success is not realised until it is shared". We also urge more of the younger generation to join MIOT in 'leading the way forward,' to make our organisation even stronger.

Dr. S. Uthayakumar President - MIOT



Annual Report from the General Secretary

MIOT annual report: It gives me great pleasure to present this year's annual report. It's been another busy year where we have initiated some new projects and also continued with existing projects mainly to serve the poor and less advantaged population in our homeland.

Medical Mobile unit:

This project initiated last year by Dr. Sivayoganathan, who worked very hard to purchase a vehicle, modified it as a medical mobile unit and this is now serving the people of Vanni. Siva has personally visited Vanni several times and oversees this project. Siva will present a separate report about this project

Eye camp projects

This is another ongoing project started in 2002 and continuing to serve the poor and disadvantaged. This year's eye camp was held in Mannar in April. The camp was held at Mannar district General Hospital. We again worked with the Jaffna Consultant eye surgeon Dr.Chandrakumar. The patients were selected by Medical officer in Mannar (his letter of gratitude appears on a separate page). We did 78 cataract operations in Mannar and another 22 in Jaffna.

Medical student sponsorship

MIOT continue to sponsor the less advantaged medical students in Jaffna, currently sponsoring 17 students. This includes sponsorship from the central committee and the regions as well.

Fundraising event with CANE:

This joint fundraising event was held on the 10th of September. Dr. Uthayakumar organised this event in conjunction with CANE. A sizable amount was raised at this event and donated to MIOT.

Nursing student training

MIOT has agreed to fund 15 nursing students in Jaffna to get proper training in order for them to get appropriate accreditation. This course is due to start soon and will be under the direct supervision of Dr. Surenthirakmaran, the head of Community and Family Medicine department of the Jaffna Medical Faculty.

HCA Training. We continue to support the training of HCAs between 5 – 10 each year to complete their training. This training is based at Manipay and is in its third year now.



Neurorehabilitation training centre at Manipay Green Memorial Hospital

This project started with the help of MIOT last year is continuing to serve the people in the north with neurorehabilitation. We continue to support this project.

Neurology unit Jaffna.

We continue to support this unit at Jaffna teaching hospital. This year they are embarked on a project of stroke awareness among the local population in the Northern Province. Dr. Arani Nitkunan oversees this project.

Thilagavadiar Illum:

MIOT continues to support this orphanage with annual donations. This girls orphanage in Vaharai in the Eastern Province is under the direct supervision of Dr.Vellauthapillai.

Moolai hospital project

MIOT continues to support the free health clinics conducted weekly at this hospital with a annual donation of £1000,00 via Dr. Kugathasan.

Manipay Hospital clinics

MIOT continues to give £1000 per year to conduct these clinics for the poor who can't afford the hospital charges.

Registering MIOT as charity in Sri Lanka

Dr.Poologanathan is leading this project and has held several meetings with SriLankan authorities. Once this is completed it will be easier for members to do voluntary/charity work in Sri Lanka.

The Future.

I would like to reiterate that MIOT is a non-political organisation and would continue to work towards helping the poor and less advantaged population in our homeland. We continue to work with our friends and colleagues in Sri Lanka and without their support and commitment most of our projects wouldn't have been possible. I hope you all will continue to support our activities.

M.Logendran
General Secretary MIOT



Annual Report from the Treasurer

It is my great pleasure, on behalf of the central committee of MIOT, to present the 27th Annual Financial Report for the seventh year.

I would like to thank our accountant, Mr Sushilan, for his invaluable service in the preparation of the financial statements for MIOT, which are entirely voluntary.

All receipts and payments for the year ending 30 June 2016 are shown in the financial statements. In the past year our regular income was derived mainly from members' subscriptions and ad hoc donations. The expenses shown in the financial statement are inevitable, however, it is worth noting that many hours have been volunteered by dedicated MIOT members, whose impact and contribution needs to be acknowledged by all of us.

I would like to express our gratitude in particular to Dr Sivayogananthan who diligently provides services via the mobile unit; Dr Logendran who regularly undertakes eye clinics in Sri Lanka; Dr Velauthapillai who efficiently undertakes to obtain the tax rebate for MIOT. It is important that all members sign and return the Gift Aid forms to enable the organisation to obtain this valuable additional income to increase our revenue.

We continue to urge every member to actively assist in enrolling new members and would strongly encourage the 'younger' members to join the committee. This will enable our organisation to grow and continue to support the health care needs of the Tamil population in Sri Lanka.

Finally, as it is my last report as Treasurer I would like to take this opportunity to express my most sincere gratitude to all my colleagues on the central committee and all the members of the regions whose support and cooperation has been unwavering. I hope that MIOT will continue to grow from strength to strength, especially with the next generation of young Tamil doctors joining. The work and the variety of worthy projects we undertake to support our fellow Tamils, not only in our motherland, but also here in the UK, are very important and greatly valued by the recipients. We should not lose sight of this.

Dr (Mrs) GirijaKugapala Honorary Treasurer 7th October 2016



Report from the Regional Branches

Report from the MIOT-Northern Region

Another successful year has gone by and it is a pleasure to send this annual report from the Northern region.

Orphanage donations

This year we have provided continued support to the Thilagawathiyar llam in Vaharai and Hari Boys Home in Batticaloa.

Thilagawathiyar Illam

This houses 34 orphaned girls – the building work is all complete now and after long last the orphans have a proper and purpose built home. They have a study hall, shrine room, toilets and bathrooms, a library and a kitchen. This year we have been able to construct a complete wall surrounding the orphanage for purpose of privacy and security of the residents within the orphanage.

The orphaned girls are now being given extra classes in English, Mathematics, Science, Computing and dancing within the orphanage itself. We have 5 members of staff to look after these girls.

The number of orphans have increased since last year as the demand for such places have grown tremendously. There is enormous pressure to admit new orphans which are primarily done through courts of law.

Hari Boys Home

This orphanage is situated in the middle of Batticaloa housing nearly 65 orphaned boys. The orphans are very grateful for the help that MIOT provides in sustaining them.

Medical student sponsorship scheme

The MIOT Northern Region now supports two students in this scheme and they are due to graduate at the end of 2016.

Mental Relaxation classes

In order to help with relaxation, meditation classes are funded by the Northern Region in Northern Sri Lanka

Help with Post Graduate education

We provided a photocopier/fax machine to the JMA for their educational needs

Dr E Velauthapillai

Executive Committee Member - Northern Region



Report from the MIOT-EASTERN Region

Our committee has actively continued to focus on the development of medical education and to support people from underprivileged areas.

MIOR- ER has continued its venture, working with Anglia Ruskin University (ARU) organised training through the medical faculty of Jaffna for doctors & nurses. The MIOT-ER supported a team from ARU who went to Jaffna and carried out Medical Education lectures and ALERT course as well trained the local doctors to continue these course, accredited by the ARU.

MIOR-ER has financed over £3000 to purchase an inverter battery system for the blood culture machine and also paid for free tests for 300 patients. This will provide automatic back up for the automated blood culture analyser which is the first of its kind in the north and only the second of this latest model in the country. It should make a significant contribution to early and accurate diagnoses from blood cultures, as at present it is the manual method that is used at the hospital which risks contamination and takes several days sometimes. We will continue to work with Dr Mathy Ambalavanar, Senior Lecturer in Medical Microbiology and has embarked on an effort to provide a service commitment to patients in the Jaffna Hospital.

MIOR –ER continues working closely with the Inner Wheel Club of Colombo South, focusing on building a strong foundation for students to enter University education by helping them from A-Level. This project is our new vision on students who obtained good results in O-Level examinations, but were unable to continue to A-Level studies due to family circumstances. We are continuing to help the 5 students from various rural areas in Sri Lanka.

We continued our annual sponsorship to the 5 medical students of Jaffna Medical Faculty. Our educational committee, especially the junior committee helps them with their projects and offer support via e-learning.

MIOR-ER is actively working in UK as well. We have engaged with the local consultants in different specialties to find elective placement for AL students and also identify clinical attachments/job opportunities for those who had completed a Medical degree in Europe and other parts of the world. We would like to recruit more consultants to help us with this project. If you think you could help, please e-mail our Educational Team (uthaya_18@hotmail.com)

Our Junior committee has organized a social evening in December 2015 to raise the profile of MIOR-ER, which was attended by many medical students and junior doctors.

S.Uthayakumar Secretary MIOT – Eastern Region



Report from the MIOT-Wales Region

I am pleased to submit the general secretary's report which covers the events from September 2015 to August 2016.

As a charitable organisation, we have been committed to preserve and protect the health of Tamil community in Sri Lanka. As such we have been involved in the following activities.

Fund raising events

Karaoke and Thamashanite: This musical event took place successfully on 10th October 2015. Approximately £1000 was raised from ticket and food sales.

Charity Walk: This took place successfully in Gower on 21st May 2016. Approximately 700 pounds was raised from this event.

Charity Projects

Educational Bursary: We have continued to support five medical students, two nursing students and two allied professional students of the University of Jaffna with a monthly bursary.

Educational grant: We donated £550 via the Alumni association, University of Jaffna to sponsor Dr.Mathanki Balasubramaniam, lecturer at department of physiology, to attend a workshop on techniques in physiological sciences at the all India institute of medical sciences.

Puthukudiyiruppu hospital development: We donated £3500 via Assist RR charity to furnish the newly built male ward with 24 beds, mattresses and side cupboards. The ward was opened on 18th April and is serving approximately 45,000 people in the locality.

The proceeds of the charity walk mentioned above will be donated towards buying medical equipment for this ward.

Sampoor phase 2 resettlement – We donated £2500 via assist RR to build 13 permanent toilets to benefit the families resettled in the area.

Vavuniya Save Act Foundation – We donated £900 to this institution which is being set up to care for 10 paraplegic patients in the community. This money will be utilised to cover medical expenses.

Jaffna Teaching Hospital NICU – Funds have been raised to donate essential equipment to this unit. Details will follow in the next year's report.



Fellowship Event

This was a self-sponsored weekend out in August to nurture team building. This took place in Devon with all the MIOT Wales families.

Membership changes

Dr. V. Ravimohan has left the membership after moving to England.

The new committee was elected on 7th August 2016. The details are as follows:

President: Dr. S. Kugathasan

Vice president: Dr. K. Thevamanoharan

Secretary: Dr. V. Kirupalar

Treasurer: Dr. D. Vigneswaran

Social Secretaries: Dr. M. Yoganathan&Dr. D. Devarajan

I would like to thank all my fellow members for their hard work and support. My special thanks to Vipulendran, Kugathasan and Murugiah and best wishes to the new committee.

Dr.Mahendiran Pradeepan, Outgoing Secretary



Report for MIOT-North Thames Region

MIOT's North Thames Region which is spearheading the development of primary healthcare in Sri Lanka, particularly in the North and East, has made significant progress in the year. A healthcare symposium was organised and held in January 2016, with the aim of connecting healthcare professionals in Sri Lanka with their counterparts in the UK and create links between Medical Education Institutions in both countries, especially, between their respective Community & Family Medicine divisions.

The symposium was attended by academics from Medical Faculties from Jaffna, Batticaloa, Manchester, Barts & The London Universities as well as dignitaries from Royal College of General Practitioners. The Health Minister of Northern Provincial Council and many other eminent professionals in the field of medicine and dentistry participated in the event. Following the symposium, the delegation from the North and East met with four universities in the UK and established links for collaborative work and affiliation. We are pleased to report that as a result of these initiatives we now have overseas students doing electives in Jaffna.

Moves are underway to construct a model primary care centre at Arivial Nagar in Kilinochchi. An acre of land has been earmarked for this purpose and work could commence as soon as funding is arranged.

The Institute of Family Medicine Centre in Jaffna, the Co-operative hospital in Moolai and Green Memorial hospital in Manipay have been identified for developing into model academic primary care centres and to provide support for post graduate training in primary care. We are in the verge of getting accreditation by PGIM for post graduate training at these centres.

As approved in the previous year, MIOT-NTR paid £10,000 towards the construction of a primary care centre/care home in Kurukkal Madam in Ampara district. A further £5,000 is pledged for the same project. This is a collaborative project with Amparai District Vipulananda Rehabilitaion Organisation (ADVRO) ADVRO.

MIOT-NTR also identified a need for training the carers to provide special care to autistic children. We will be working with "Serendip" a registered charity which is already doing some work in Sri Lanka in this field.

Locally, MIOT NTR had three clinical meetings in the year for the benefit of the members towards their appraisals and revalidation.

We are pleased to inform that another MIOT member, along with his family, has pledged to support setting up a primary care centre in their own town Chavakachcheri and has offered their family home for the project as a tribute to their parents. MIOT-NTR is taking the necessary steps to commence this centre.

We appeal to the members of the Tamil Diaspora to consider setting up primary care centres to serve the community, in memory of their loved ones.

N Sivarasan Secretary - North Thames Region



Report from MIOT-South Thames Region

It gives me great pleasure to write on behalf of MIOT South Thames Region. We recently celebrated our 25th Anniversary with a Dinner & Dance.

This event marked 25 years of MIOT South Thames Region's achievements and contributions to our Tamil community in Sri Lanka and in the United Kingdom. An event like this could not happen overnight. It requires careful planning and decision making over several months. We have been fortunate enough to be backed by a team of motivated and dedicated members and their spouses who have worked hard tirelessly to make this event successful. At this event, we honoured distinguished members **Dr.Rajayogeswaran** and **Dr.Mahendrarajah** for their valuable service to our region and its success.

It is absolutely critical that we continue to do what we do. Your donation is important and the need is always great. Your support makes a vital difference to our ongoing projects and we look to the current need and plans for developing primary care centres in the North and East of Sri Lanka.

With your support, MIOT STR has been able to undertake several projects successfully over the past decades since it was founded 25 years ago during the most difficult periods of war and natural disasters in Sri Lanka. The projects involved in providing shelter, food, clothing and education to victims of war for more than three decades. The Jaffna Medical School was supported by the MIOT donating medical journals, books and equipment to improve teaching and training. Also, the needy medical students were given financial support by the MIOT. Recently a team of surgeons and anaesthetists visited the district general hospital in Mannar and performed cataract surgery on patients in need. It is an unbelievable achievement that 78 patients have gained clear vision after the surgery.

I would like to take this opportunity to thank all the well-wishers, volunteers and committees through the years and donors for all the valuable contribution. With your continued support, we look to the future to take the MIOT STR from strength to strength.

Dr Sarojini Rajaratnam Secretary to MIOT South Thames



Message from the Editor

It has been a privilege to be a part of MIOT, and although it was started 28 years ago, the committee remains very much active as you can see. I am proud to say there have been several amazing projects that we have been involved in that have made a real difference to the most vulnerable men, women and children in Sri Lanka and there is more yet to come. Putting this souvenir together highlights the wonderful commitment our members show in providing funds and expertise to successfully achieve their goals in Projects like the Eye camp Project and Mobile Health Projects, providing access to life changing sight enhancing operations and essential clinics respectively which they would not have received otherwise. The reports from the regional committees demonstrate the wonderful projects they too have been involved in such as providing funds for vital medical equipment that is absolutely necessary in providing essential health care needs, such as a battery for the blood culture machine as well as providing training opportunities in Sri Lanka.

Looking to the future it is important to keep going with the legacy of our predecessors and at times it is easy for us to become complacent as the war is over. However, there is still much need in places with poor transport links to provide services so that our people can access vital healthcare.

Dr (Mrs) T Chelvan

Editor

Central Committee



Minutes of the AGM held on the 7th of November 2015 President Dr S Uthayakumar Hilton Watford, Elton way, Watford WD25 8HA Attendance register is with Dr.Poologanathan Vice President Dr N Sivayoganathan AGM commenced at 5:30pm General Secretary Dr. Uthayakumar presented the president's report Dr M Logendran Asst. Secretary Minutes of the 2014 AGM was circulated and was accepted without any Dr R Chelvan correction. This was proposed by byDr.M.Chandrakumar and seconded by Dr.N.Sivaypganathan. Treasurer Dr (Mrs) G Kugapala Secretary's report was presented by Dr.M. Logendran Editor Dr.(Mrs)T.Chelvan Treasurer's report was presented by DR(Mrs) G.Kugapala. Trustees Dr.Sarvaratnam noted a decline in the amount collected through subscription (Mrs) S Natkunarajah and asked why. Girija said this is due to some members cancelling their Dr M Chandrakumar subscription and also reduced rate for junior members and students. Dr (Mrs) K Niranjan Uthayakumar said regions should be active and recruit new members. Mr E Velauthapillai Dr.Maheswaran asked about the JFMOA. He was reassured this is not in Coordinating Secretaries competition with MIOT and we can work along with them. Overseas Affairs Dr S Poologanathan There was also a discussion about the money given to other organisations and Dr.D.Sivayoganathan a number of the members said this should be limited to MIOT projects only. Community Care and Research The members agreed to keep the subscription same for next year (2016) as Dr N Niranjan well. Dr M Sivarajaratnam Vella asked how long the junior members are going to pay reduced Social subscription and said there should be someone in the committee to oversee Dr (Mrs) T Balakumar that their subscription is increased after few years. Membership Dr K Rajakulasingam Election of office Bearers: Uthaya announced the results. said Education Dr.Rajakulasingam has left the committee and welcomed Dr.Jeyapalan into the Dr.JPDGnanapragasam new committee. Youth Affairs

Dr R Rajakulasingam

Members Question time:

Dr. Shanmugadasan gave a presentation of a new organisation known as the Friends of Killinochi hospital. Their first meeting was held in August 2015 with an Educational meeting and also they conducted Medical camps in 4 places. He said next year in July 2016 they plan to Medical camp for 5 days. He said there

Address

Dr.AarthyUthayakumar



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is need for psychiatric help to the people in that area.

Dr(Mrs)S.Natkunarajah presented about the old people home at Kaithady and asked the members to visit this place and help them.

Registration of MIOT as a charity in Sri Lanka: Dr.Poologanathan gave an update about this and said he has met with various authorities in Jaffna regarding this.

Poolo also mentioned about an event he is due to host on December 5th and 6th where he is planning to invite a number of health care professionals and politicians from the Northern province. He said he has emailed the membership about this event.

Election of office bearers Central Committee 2015 - 2016

Name of the member	Post	Proposed by	Seconded by
Dr.S.Uthayakumar	President	Dr.T.Balakumar	Dr.E.Velauthapillai
Dr.N. Sivayoganathan	Vice President	Dr.KNiranjan	Dr.M.Chandrakumar
Dr.M.Logendran	Secretary	Dr.KNiranjan	Dr.J.Gnananandan
Dr. Rishi Chelvan	Asst. Secretary	Dr.S.Natkunarajah	Dr.M.Chandrakumar
Dr.G.Kugapala	Treasurer	Dr.M.Chandrakumar	Dr.S.Natkunarajah
Dr. Tuvaraka Grianachelvan	Editor	Dr.M.Chandrakumar	Dr.S.Natkunarajah
Dr.JPDGnanapragasam	Education	Dr.S.Uthayakumar	Dr.E.Velauthapillai
Dr.K.Jeyapalan	Social	Dr.I.Uthayakumar	Dr.S.Uthayakumar
Dr.S.Poologanathan	Overseas Affairs	Mr.A.Sivarasan	Dr.Mrs.Poologanathar
Dr.D.Sivayoganathan	Overseas Affairs	Dr.R.Rajakulasingam	Dr.S.Uthayakumar
Dr.N.Niranjan	Community care & Research	Dr.S.Kulendiran	Dr.R.Pushparajah
Dr.S.Mohan	Membership	Dr.S.Uthayakumar	Dr.T.Balakumar
Dr.T.Balakumar	Membership	Dr.E.Velauthapillai	Dr.Mrs.I.Uthayakumai
Dr.E.Velauthapillai	Trustee	Dr.T.Balakumar	Dr.S.Uthayakumar
Dr.K. Niranjan	Trustee	Dr.S.Srikumar	Dr.S.Natkunarajah
Dr.S.Natkunarajah	Trustee	Dr.K.Niranjan	Dr.G.Kugapala
Dr.M.Chandrakumar	Trustee	Dr.S.Natkunarajah	Dr.K.Niranjan
Dr.R.Rajakulasingam Dr.A.Uthayakumar	Youth Forum	Dr.I.Uthayakumar	Dr.T.Balakumar

The meeting closed at 6:10pm





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T.P.No: 0777530526

Message for MIOT

I am very happy to share my views regarding MIOT and their valuable services to the Tamil community through this message. MIOT is the one of the great organization which is established by Sri Lankan Tamils in the United Kingdom. I know very well regarding their contribution to develop the Medical education and Health condition of Tamil who are living in north and east of Sri Lanka not only as the Dean Faculty of Medicine but also as the consultant surgeon.

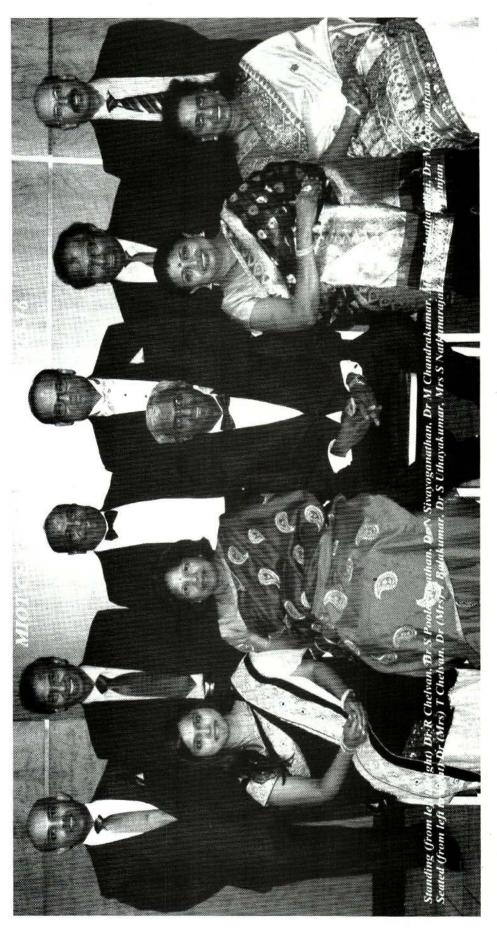
They have donated highly expensive medical equipments to the several medical institutions which are spread all over the North and East provinces in the Sri Lanka. Also they are giving scholarships to the Medical students who are facing Economical setback in their student's life. This is the remarkable contribution given by the MIOT to our Tamil Community which was highly affected by the last three decades ethnic conflict.

I would like to thank the members of MIOT for their concern about their Kith and kin and their healthy life. The MIOT never forgets their root which is deeply penetrates their hearts. I wish the MIOT for their long lasting services and thank them to giving me an opportunity to share my thoughts via this message.

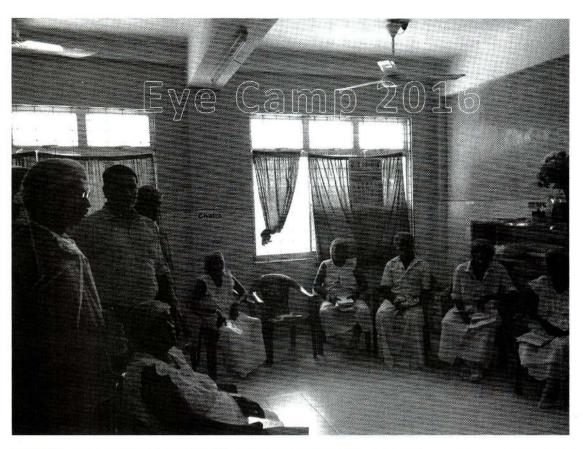
Thank you,

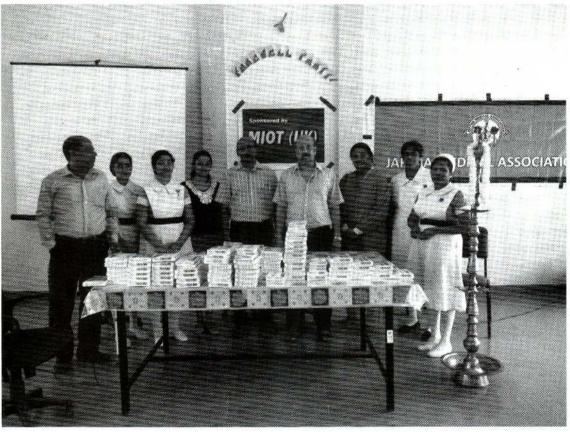
Dr.S.Raviraj
Dean Faculty of Medicine
University of Jaffna



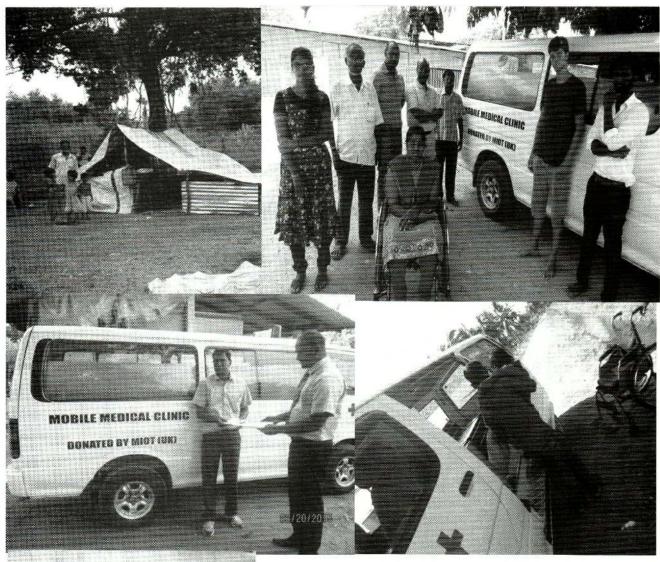














Mobile Health Project 2016







MIOT PROJECTS

MIOT AMBULANCE AND MOBILE CLINIC PROJECT

Our people in Sri Lanka are tremendously grateful for the numerous health projects that have been implemented by the MIOT over the last 27 years - and, overall, have been undeniably worthwhile. The MIOT Mobile Health Clinic project has been considered as one of the 'flagship projects' among the recent ones, and has been successfully running for the last 18 months.

We targeted the most vulnerable population in the war-affected areas of the Vanni region. In these remote areas there are no suitable health care facilities for their needs, therefore the patients have to make long, convoluted journeys to the district hospitals. The journeys are often difficult, expensive and time consuming.

The mobile health project was meticulously planned and implemented, and I am pleased to inform that so far we have supported numerous clinics in the Vanni region with a number of follow up sessions. The focus was mainly on the disabled people and their families.

In addition, the MIOT ambulance has also been used to transport disabled patients from their home to base hospitals and tertiary hospitals. Because of their special needs, disabled people have to overcome numerous barriers in order to have access to doctors, rehabilitation services or other health care facilities. The lack of access to these services deprives them of appropriate clinical support in a timely manner.

A number of other local voluntary organisations have also requested the service of our ambulance to support their voluntary work.

How did we achieve this?

At committee level we have extensively discussed the business plan, agreed to a service model, and arranged a fund raising event at the University of Hertfordshire. We have also received donations from a number of well-wishers.

A seven-seated vehicle was modified into an ambulance by a professional company and was sent to the war torn area of Vanni.

We felt that MIOT alone can't keep the momentum going, so we made a strategic decision to work with a local NGO which already has well trained staff and volunteers who are well aware of the service needs of the people at the grass root level. The NGO has a few field officers who would initially make a visit to the remote areas and inform the local people well in advance of the clinic day. Furthermore, they ensure that the clinics are run smoothly on the day. So far this mobile clinic initiative has been a



very successful programme, and is considered to be one of the MIOT's low cost, high impact project.

I am pleased to inform you all that MIOT is now at the forefront in supporting mobile clinic projects in the Vanni region.

FUTURE

As we are currently focussing on the disabled and their families, there is huge potential to expand the service to aid vulnerable people in other parts of North-Eastern areas.

The use of telemedicine, new technologies, and improving the quality of care by training local volunteers are a few areas in which further improvements could be made.

It is a fantastic opportunity for our experienced doctors in the UK and junior volunteers to contribute towards this worthwhile project.

N Sivayoganathan Vice President MIOT

Thilagawathiyar Girls Home, Kathiravely, Vaharai - Annual Report 2016

I bring to you greetings from the above Home which is now in its 15th year of existence thanks to all of you who have contributed towards the upkeep of the home. We have 36 orphaned girls at the home at present given the amount it could legally hold is only 30. The demand for orphans to gain entry is enormous and this is strictly controlled by the courts of law and the Probation office in eastern Sri Lanka.

The orphans are in good spirits and attend the school opposite the home. In the evenings extra classes are arranged for them to be taught English, Mathematics and Science at the home itself. Lessons in music and dance are also being taught at the home. Computer classes are also taking place but with regular power cuts the computers do not survive too long.

The building is now complete but for safety and security of the girls home a surrounding perimeter wall is being constructed at the moment.

The management committee is quite enthusiastic and comprises of an all-female group which is now required by law.

Dr E Velauthapillai Trustee – MIOT



MIOT HOME FOR GIRLS (CHIRUMIYAR ILLAM), Thambiluvil

We have been successfully running this project since 2005. We are very fortunate to have close friends who donate to the home by monthly direct debit and also received donations from other well-wishers. We are lucky to have a good management committee that includes the local school principal and the bank manager. Dr. Ramasubbu, one of our batch-mates who is living in Colombo, is overseeing the management of this home.

At present we have 15 Girls aged between 10 to 19. The children are looked after by our Matron Anusha. The two girls who were employed at the local school are now continuing with their teachers' training course. The one who was successful in getting to the University to do the Art degree course, is doing well as well.

The House has continued to be used as a 'House of Learning' for our 15 girls and other local students of Thambiluvil. We are trying our best to provide not only food and education, but also a natural home environment.

MIOT –ER continued the sponsorship of the 'Orphanage& School' in Kaithady, one of the deprived villages in Jaffna, is thriving well. This venue is also hosting a weekend school to serve the local children, offering classes in music, education & community projects.

We take this opportunity to thank all our sponsors. Your continued support and generous donations are crucial for the home's success.

S.Uthayakumar Secretary MIOT ER & Orphanages, UK

Akilanderwary Illam – Vavuniya

MIOT has been sponsoring 13 children of this orphanage since the end of the war for the past 7 years through the central committee. This is a very big home with 200 children who are encouraged to take part in many activities in addition to their core education, preparing them for a bright future ahead.

MIOT Secretary, Dr Logendran and I visited the orphanage in February 2016. We were very impressed by the very high standard at which the home is functioning. Other sponsors who too have personally visited this place are fully impressed by the children's progress.

The orphanage is funded by MIOT and non-MIOT members whose support has made a world of difference without which these children would have faced an uncertain future.

I thank all the sponsors on behalf of MIOT for their generosity and continuing support.

Saratha Natkunarajah - Trustee



EYE CLINIC

DISTRICT GENERAL HOSPITAL, MANNAR

14/04/2016.

Dr M. Logendren, Consultant Eye Surgeon, U.K. Dear Sir.

Sharing our sincere gratitude

It is indeed to express our sincere and heartfelt gratitude to the team visited to Mannar and provided valuable services to poor patients by doing cataract surgery. It is unbelievable achievement of 78 patients who have received clear vision after the operation.

Most of the patients who have come clinic and expressed their heart full feeling of happiness and thankfulness. They are very happy to see the sight again.

Sir, on behalf of the patients and General public of Mannar I thank you and the team members, specially Dr S.T.S. Chandrakumar, Consultant Eye Surgeon, Dr.SarathaNatkunarah, Consultant Anaesthetist, U.K,and Doctors, Nurses, staff of Teaching Hospital, Jaffna, who has taken all the pains in the mission visited Mannar and did worthy services to the poor people.

Please convey my sincere thanks to the President, Secretary and members of MIOT (UK) donors who provided all medicine and Cataract surgery items to the patients

My best wishes and blessing to you all.

Thanking you,

Yours' Sincerely,

Dr. S. Jude Ravi Pachchek,



MO/ Eye, DGH, Mannar.

Centres of Excellence for academic Primary Care

The healthy people contribute for the sustainable social and economic development of a country. The Primary care in health system is commonly viewed as a first level of care or as the entry point for people who seek health related needs. A health system, where primary care is the backbone and family doctors are the bedrock, delivers the best health outcomes, at the lowest cost, and with the greatest user satisfaction (WHO, 2013). The primary care settings and practitioners play an important role in providing basic preventive and curative care.

The major challenge in primary care is to provide the right kind of access to the right kind of care (NHS, 2014). There are rising demands, growing complexity and increasing diversity of patient needs. Faced with numerous challenges related to quality, affordability and sustainability, primary care providers play a major part in a healthcare system in meeting the needs of the community at the least cost. Thus, there is an urgent demand to expand, primary care services throughout the country which is cost effective, patient centred and comprehensive.

An innovative care model would be a key element of the strategy to build a stronger primary health care system, in order to impose greater focus on management of chronic diseases, health promotion and illness prevention. The demographic, epidemiologic and technological transitions are on progress. Today, it is almost impossible to do anything alone due to complexity of the world. The changing disease patterns, constantly rising prices and increasing use of sophisticated technology for diagnosis and treatment make the situation further complex. With people now living longer, we have a larger population with multiple co-morbidities that need treatment by multiple specialists. Primary care physicians remain the guardian of the whole person, making sure that treatments ordered by different doctors do not result in dangerous drug interactions and that contraindications are respected (WHO, 2013).

Primary care centres with extended care services are in a position to provide the holistic care needed to a local population. Developing these places as academic primary care centres will pave way for training health care professionals in community and family medicine speciality. The centres could provide opportunities for undergraduate and postgraduate medical professionals to be engaged in research. Global collaboration and health care network would be important in achieving the aims of this type of centres where international exchanges and co-operation could be strengthened.

The North and East of Sri Lanka which has just emerged from a war has a significantly larger development need with respect to the healthcare system, compared to the rest of the country. We have a unique opportunity to redesign the healthcare services in the North and East with greater emphasis on primary care. A success of this system is likely to be replicated in the rest of the country in future.



In countries renowned for good overall healthcare systems primary care is plays a major part. These primary care centres are run, using a public private partnership model. The centres are owned and managed privately but the services are public funded. These centres provide excellent services which are delivered in close proximity to the users. To reach this target we need to create a network of functioning primary care centres.

The primary care centres in Moolai, Manipay Jaffna, Kondavil, Kurukkalmadam and Kilinochchi will be part of this network of primary care centres. The Institute of Family Medicine centre in Jaffna and Kondavil centres are functioning as academic primary care centres. The Kondavil centre is owned and operated by Jaffna University Medical Faculty and is fully public funded. The others centres are privately funded and run as private trusts, charitable trusts or co-operatives. Primary care centre at Kurukkalmadam in the East is a charity. A new centre at Palameenmadu in Batticaloa district is to be established by the Eastern University, Faculty of Healthcare Sciences and will be similar to the Kondavil model. An innovative centre of excellence for primary is to be established in Kilinochi, Ariviyal Nagar. This centre will be built to international standards with global collaboration, offering extended primary care services as well as facilities for research and training.

A registered trust, "SUGHAM GLOBAL HEALTH FOUNDATION" has been formed to manage this centre. The trust initially formed with a "settlor" and three trustees for registration purposes will be strengthened further by eleven Global advisors in one year's time. The trust as a legal entity, will initially concentrate on acquiring a plot of land earmarked for primary care centre, close to the premises of the engineering faculty of university of Jaffna. This centre would be of much geographical importance as it lies very close to a planned shopping complex as well as being easily accessible by the A9 Highway from all districts.

The objectives of this centre are

- Providing high quality primary health care services by qualified and experienced family physicians, both local and overseas.
- Attaining the standards of excellence with accreditation & collaboration with overseas universities, colleges and other academic institutions.
- Conducting Training and Research in Primary Care to a high standard, using global linkages and collaboration.
- Complementing the National Healthcare development through integration with health and higher education as public private partnership.
- Evaluating, monitoring and reporting the activities in a transparent manner with universal standards

Furthermore, the centres will be equipped with electronic medical record system using suitable software, to facilitate continuity of care and research.

Dr.K.Arulanandem, Post MD, Overseas trainee in Family Medicine, Rush Green Medical centre, Romford UK - Arulanandem64@hotmail.com



CONSTITUTION OF THE MEDICAL INSTITUTE OF TAMILS

(Amended 10.05.2015)

1.0 GENERAL

- 1.1 The name of the organisation shall be: THE MEDICAL INSTITUTE OF TAMILS hereinafter called 'the Institute'.
- 1.2 The membership of the Institute is open to all Tamil Medical and Dental Practitioners, and all those who subscribe to the objectives of the Institute

2.0 OBJECTIVES

The objectives of the Institute are:

- 2.1 The relief of poverty, sickness and the preservation and protection of the health of the Tamil community in the homelands, in the UK and elsewhere.
- 2.2 (a) To advance the education and training in the Tamil community in the science and art of medicine.
 - (b) To provide facilities in the interests of social welfare for recreation and other leisure-time occupation primarily for persons within the Tamil community with the object of their improving the conditions of life.

In furtherance of the objects but not otherwise the Management Committee may exercise the following powers:

- 2.3 The power to raise funds and to invite and receive contributions provided that in raising funds the Management Committee shall not undertake any substantial permanent trading activities and shall conform to any relevant requirements by law;
- 2.4 The power to buy, take on lease or in exchange any property necessary for the achievement of the objects and to maintain and equip it for use;
- 2.5 The power subject to any consents required by law to sell, lease or dispose of all or any part of the property of the Charity:
- 2.6 The power subject to any consents required by law to borrow money and to charge all or any part of the property of the Charity with repayment of the money so borrowed;
- 2.7 The power to employ such staff (who shall not be members of the Management Committee)
 - as are necessary for the proper pursuit of the objects and to make all reasonable and necessary provision for the payment of pensions and superannuation for staff and their dependants;
- 2.8 The power to co-operate with other charities, voluntary bodies and statutory authorities operating in furtherance of the objects or of similar charitable purposes and to exchange information and advice with them;
- 2.9 The power to establish or support any charitable trusts, associations or institutions formed for all or any of the objects;
- 2.10 The power to appoint and constitute such advisory committees as the Management Committee may think fit;
- 2.11 The power to do all such lawful things as are necessary for the achievement of the objects;
- 2.12 To serve as a co-ordinating centre to help hospitals, medical schools and health projects for Tamils.



- 2.13 To be an information centre for medical and para-medical undergraduates and postgraduates.
- 2.14 To establish a resource centre for Tamils seeking further education in Medical and Dental fields.
- 2.15 To provide a forum for exchange of medical knowledge.
- 2.16 To undertake health advice and research projects among the Tamil community
- 2.17 To encourage and provide social and recreational activities.
- 2.18 To liaise with other professional and social organisations so as to achieve the above objectives.
- 2.19 To explore and establish methods for generating funds to support the various activities of the Institute.

3.0 MEMBERSHIP

- 3.1 All members must agree and support the aims and objectives of the Institute. The categories of membership shall be:
 - a)FULL MEMBERSHIP: This is open to any Tamil Medical or Dental Practitioner. Full members have the right to attend, speak and vote in general meetings.
 - b)STUDENT MEMBERSHIP: This is open to any Tamil medical or dental student. Student members have the right to attend and speak in General meetings but do not have the right to vote.
 - c)ASSOCIATE MEMBERSHIP: This is open to any Tamil working in the health field who supports the Institute but does not fulfil the criteria for full membership. These members have the right to attend and speak in general meetings but do not have the right to vote.
 - d)HONORARY MEMBERSHIP: Any person who has given distinguished services to advance the objectives of the Institute may be elected as an honorary member of the Institute for life. This person will be elected at an Annual General Meeting on the recommendation of the Management Committee and will require a two-thirds majority of the members' present. Such a member may attend and speak in general meetings but do not have the right to vote.

Any fee paying member who defaults the annual subscription by more than 1 payment will automatically lose his/her voting rights.

- 3.2 The Management Committee shall have the right:
 - i. To approve or reject applications for membership.
 - ii. To terminate any membership on good and valid grounds.
 - iii. To decide on any changes to the membership categories and fees together with consultation of the full members present at the AGM.

Any application for membership that was refused by the Management Committee or any termination of membership shall have the right to appeal at the Annual General Meeting.

3.3 Upon the acceptance to membership the member will be bound to pay such annual subscription as may be determined at the AGM from time to time. Any fee paying member who defaults the annual subscription by more than 1 payment will automatically lose his/her membership of the institute.



Any application for membership that was refused by the Management Committee or any termination of membership shall have the right to appeal at the Annual General Meeting.

3.3 Upon the acceptance to membership the member will be bound to pay such annual subscription as may be determined at the AGM from time to time.

4.0 STRUCTURE

- 4.1 Regional and Functional Divisions
 - 4.1.1 There shall be a Central Office with a number of Regional Offices as deemed necessary. Each Regional Office shall have an executive standing committee. The Regional Offices have to be approved by the Management Committee.
- 4.2 There shall be a Management Committee with executive powers which shall manage the affairs of the Institute.
- 4.3 The Management Committee shall be elected at the Annual General Meetings and the various tasks shall be taken up by choice from among the general membership in attendance at the AGM.
- 4.4 The Management Committee shall comprise:
 - 1) President
 - 2) Vice President
 - General Secretary
 - 4) Assistant secretary
 - 5) Treasurer
 - 6) Editor
 - Co-ordinator Overseas affairs
 - 8) Co-ordinator Community care / Research
 - 9) Co-ordinator Education
 - 10) Co-ordinator Social
 - 11) Co-ordinator Membership

The whole of the Management Committee would be trustees of the Institute. In addition there will be two trustees appointed from outside the committee.

- 4.5 The members of the Management Committee are expected to:
 - 1) Promote the aims of the Institute among the membership and the public.
 - 2)Discharge the duties allocated to the best of their ability.
 - 3) Function as a team and respect the skills and contributions of the colleagues.
 - 4)Participate actively in educational activities to improve the quality of the Institute's functions.
 - 5) Ensure their personal beliefs do not prejudice their contribution to the Institute.
 - Ensure honesty and trustworthiness.
 - 7) Form a team to ensure the efficient functioning of the Institute with the approval of the Management Committee.
- 4.6 The roles of the members of the Management Committee are as follows:
 - a) PRESIDENT Shall:
 - i) Have the capacity to lead the organisation.
 - ii) Facilitate efficient functioning of the Management committee.
 - iii) Ensure the treasurer discharges his or her duty.



iv) Maintain excellent diplomacy and networking both inside and outside the institute.

b) VICE PRESIDENT - Shall:

- i) Have duties assigned by the president
- ii) Chair meetings in the absence of the President.
- iii) Have similar functions to the President.

c) GENERAL SCRETARY - Shall:

- i) Convene meetings (of the Management Committee and of the general membership) at appropriate intervals in Keeping with the aims and objectives of the Institute.
- ii) Send communications to the membership at appropriate intervals in conjunction with the Editor.
- iii) Keep a good record of all official meetings.

d) ASSISTANT SECRETARY - Shall:

- i) Have duties assigned by the Secretary
- ii) Keep a good record of the meetings in the absence of the Secretary.

e) CO-ORDINATORS

OVERSEAS - Shall

- i) Deal with all health and health related activities overseas especially in the north and the east of Sri Lanka.
- ii) Maintain good links with NGOs, IGOs and Government organisations as well as generate funds for overseas activities.

COMMUNITY CARE/RESEARCH - Shall

- i) Function as a facilitator for improvement of chronic illnesses (i.e.: Heart Disease, Diabetes Mellitus and Mental Illness) among the Tamil community in the UK.
- ii) Study and identify health problems and effect appropriate referrals.
- iii)Have a good liaison with local health, social and voluntary organisations.
- iv) Identify the funding organisations and generate funds to carry out community based research and service functions.

EDUCATION - Shall

- i) Create and maintain educational activities for the Medical and Dental profession association with the regions.
- ii) Provide appropriate Health education for the Tamil community.
- iii) Facilitate educational activity for the members of the Committee to enhance the Institute's output.

SOCIAL - Shall

- i) Organise, in conjunction with the regions, socio-cultural activities.
- ii) Maintain and work towards further development of the membership of the Institute.
- iii) Help to raise further funds from the above activities.

MEMBERSHIP - Shall

i) To help the Social Secretary to organise, in conjunction with the regions, socio-

cultural activities.

ii) Maintain and work towards further development of the membership of the Institute.

EDITOR - Shall

i) Ensure publication of the MIOT NEWS quarterly thus effectively



informing others of the activities and functions of the Institute.

- ii) Have a collection of informative/educational materials publications/ journals! books relevant to the Institute's activities.
- iii) Shall propagate the message of the Institute and its activities to other national and international organisations via the MIOT NEWS and other special press releases/journalists/ press interviews.

The foregoing expectations and functional components of the various task oriented posts of the Management Committee are in no way complete but enlist most of the requirements of its members. There is bound to be overlaps.

4.7 The role of the chair/vice-chair is to lead the board of trustees, ensuring that it fulfils its responsibilities for the governance of the charity; to work in partnership with the chief executive, helping him or her achieve the aims of the charity; and optimise their relationship between the board of trustees and the staff/volunteers.

The responsibilities of the chair/vice-chair will include:

- i) Providing leadership for the board of trustees in their role of setting the strategy and policy of the charity.
- ii) Planning the annual cycle of board meetings.
- iii) Setting agendas for board meetings.
- iv) Chairing board meetings.
- v) Monitoring that decisions taken at meetings are implemented.
- vi) Liaising with the chief executive to keep an overview of the charity's affairs and to provide

support as appropriate.

- vii) Leading the process of appraising the chief executive's performance.
- viii) Sitting on appointment and disciplinary panels.
- ix) Representing the charity at functions, meetings and acting as a spokesperson as appropriate.
- 4.8 In addition to the qualities needed by all trustees, the chair! vice-chair should also possess the following:
 - i) Leadership
 - ii) Experience of committee work
 - iii) Tact and diplomacy
 - iv) Good 'people' skills
 - v) Impartiality, fairness and the ability to respect confidences
- 4.9 The vice-chair acts for the chair when the chair is not available and undertake assignments at the request of the chair.
- 4.10 The overall role of the treasurer is to maintain an overview of the Institute's affairs, ensuring its financial viability and ensuring that proper financial records and procedures are maintained.
- 4.11 The roles of the treasurer will include:
 - Overseeing, approving and presenting budgets, accounts and financial statements.
 - ii) Being assured and presenting budgets, accounts and financial resources of the charity meets its present and future needs.
 - The presentation and preparation of financial reports to the board.
 - iv) Ensuring that appropriate accounting procedures and controls are in place.
 - v) Liaising with paid staff and volunteers about financial matters.
 - vi) Advising on the financial implications of the charity's strategic plans.



- vii) Ensuring that financial investments are consistent with the aims and objectives of the charity.
- viii) Monitoring the charity's investment activity and ensuring its consistency with the charity's policies and legal responsibilities.
- ix) Ensuring that the accounts are prepared in the form required by law, included in the annual report and submitted to the relevant statutory bodies, e.g. the Charity Commission.
- x) Ensuring that the accounts are audited in the manner required by law, and any recommendations of the auditors implemented.
- xi) Keeping the board informed about its financial duties and responsibilities.
- xii) Contributing to the fund-raising strategy of the charity.
- xiii) Making a formal presentation of the accounts at the Annual General Meeting and drawing important points in a coherent and easily understandable way.
- xiv) Sitting on appraisal, recruitment and disciplinary panels as required.
- 4.12 The board of trustees is the governing body and it holds ultimate power and responsibility. The Board is made up of volunteers who have to set aside their personal interests, giving their time and carrying out their duties for no payment. The charity benefits from the objectivity such a board brings, as well as from the skills and experience of its members. The board's duty is to act in the interest of the beneficiaries. It should ensure that the Institute has a clear direction and purpose and sense of urgency to get on with the work it was established to do.
- 4.13 The board's main roles are to:
 - I) Ensure that all the charity's activities are within the law.
 - ii) Ensure that all the charity's come within its charitable objects.
 - iii) Determine the charity's mission and purpose.
 - iv) Guard the charity's ethos and values.
 - v) Develop and agree the charity's policies.
 - vi) Develop and agree the charity's strategic plan.
 - vii) Agree the budget and monitor financial performance.
 - viii) Ensure the charity has adequate resources.
 - ix) Ensure the charity's property, assets and other resources are protected and managed efficiently.
 - Monitor the charity's programme and services.
 - xi) Ensure accountability as required by law (the Charity Commission, Inland Revenue, Customs and Excise, Registrar of Companies) and to others such as donors beneficiaries, staff, volunteers, and the general public.
 - xii) Review annually the performance of the board of trustees.
 - Appoint the chief executive and annually review his or her salary and other benefits.
 - xiv) Support the senior staff team and review his or her salary and other benefits.
 - xv) Act as a court of appeal on personal matters.
 - xvi) Support the senior staff and review their performance.
 - xvii) Act within its powers as set out in the governing document.
- 4.14 In order to carry out its role the board must:
 - Meet as often as is necessary for the proper administration of the charity.
 - Seek professional and other expert advice where necessary.
- 4.15 The board of trustees will need skills and experience in the following areas:



i) Setting targets, monitoring and evaluating performance and programmes in commercial and non-profit responsibilities.

ii) Financial management.

The type of work done by the charity.

iv) Legal matters.

v) Recruitment and personnel management, including a knowledge of employment legislation.

vi) Public relations.

- vii) Marketing.
- viii) Computers and information technology.

ix) Campaigning.

x) Education and learning.

4.16 The duties of the trustees are:

- To ensure that the Institute complies within its constitution, charity law and any other relevant legislation or regulations.
- To ensure that the charity pursues its charitable objects as defined in its constitution.
- iii) To ensure the charity applies its resources exclusively in the pursuit of its objectives, i.e. the charity must not spend any money on activities which are not in its own objectives, no matter how worthwhile or charitable those activities are.
- iv) To contribute actively to the board of trustees' role in giving firm strategic direction to the organisation, setting overall policy, defining goals, setting targets and evaluating performance against agreed targets.
- v) To safeguard the values and good name of the charity.
- vi) To ensure the effective and efficient administration of the charity.

vii) To ensure the financial stability of the charity.

- viii) To protect and manage the property of the charity and to ensure the proper investment of the charity's funds.
- ix) In addition to the above statutory duties of all trustees, each trustee should use any specific knowledge or experience they have to help the board of trustees reach sound decisions. This will involve scrutinising board papers, leading discussions, focusing on key issues and providing advice and guidance requested by the board on new initiatives or other issues relevant to the area of the charity's work in which the tussle has special expertise.

4.17 Each trustee must have:

- a commitment to the charity.
- ii) a willingness to devote the necessary time and effort.

iii) integrity.

- iv) strategic vision.
- v) good, independent judgement.
- vi) an ability to think creatively.
- vii) a willingness to speak their mind.
- viii) an understanding and acceptance of the legal duties, responsibilities an liabilities of trusteeship.
- ix) an ability to work effectively as a member of a team.
- 4.18 The President and Vice-president shall hold office for a maximum period of two consecutive years and cannot be re-elected. Other officers (including the Trustees) shall hold office for a maximum period of two consecutive years, and only for two consecutive terms (one term is two years) at any one post, unless there is a paucity of interest for those positions from the members. All



- Officers, however, shall be elected annually at the Annual General Meeting. All Officers shall be honorary officers.
- 4.19 The Officers of the Regional Committee shall be the Chairperson Vice-Chairperson, Secretary, Treasurer and a minimum of three other committee members. The Regional Constitution approved by the Management Committee.
- 4.20 Nominations for the officers of the Management Committee shall be in the hands of the Secretary in time to allow their circulation to all members at least 28 days before the Annual General Meeting. Each nomination shall be proposed and seconded in writing and shall have the written consent of the candidate.
- 4.20 a) All correspondence to members will be via "emails". This includes meeting dates & AGM report and Information will be also available on MIOT website: www.MIOT.org.uk
- 4.21 When an election is contested the outgoing management committee shall elect a returning officer (who is a non-contestant) who shall send a ballot paper to all eligible paid up members of MIOT to be returned to him/her by email before the AGM. A protem chairman shall be elected at the AGM who will be assisted by the returning officer to count the ballot papers and announce the results. However postal votes delivered by any other means including those hand delivered to the AGM are not valid.
- 4.22 Any officer shall be permitted to resign or retire on giving not less than three months' notice to the Secretary. Interim arrangements shall be made by the Secretary, in consultation with the President and Vice-president, to cover the work of the officer concerned until the office is filled.
- 4.23 In the event of serious illness or death of an officer the Secretary in consultation with the President and the Vice-president may temporarily co-opt a member to fill the above vacancy until either the officer resumes his or her duties or pending an election as appropriate.

5.0 MEETINGS

- 5.1 The Institute shall meet at a convenient place at least once a year and this meeting will normally be the Annual General Meeting.
- 5.2 The quorum for this meeting shall be at least 20% or 35 whichever the smallest of the total eligible membership at the time of the meeting.
- 5.3 The President, or, in his or her absence, the Vice-president, or 30 full members may on the grounds of urgency call an Extraordinary Meeting of the Institute.
- 5.4 The Regional Committees shall meet as often as business dictates but at least three times a year.
- 5.5 The Management Committee or Regional Committees may co-opt other persons as appropriate, or invite other persons to attend particular meetings.
- 5.6 It shall be the duty of the Secretary to:
 - a) Ensure that accurate minutes of each meeting and the agenda for the next meeting are prepared and circulated to members at least fourteen days before the next meeting
 - b) Receive nominations for office bearers as described in 4.9.
- 5.7 The Officers of the Management Committee and the Regional Executive Committee shall have executive powers between meetings.
- 5.8 All decisions taken at meetings shall be by a majority vote. The Chairperson of the meeting shall have a casting vote.
- 5.9 Observers and speakers may be invited as appropriate.



6.0STANDING ORDERS

6.1 The Management Committee shall have the power to adopt and issue standing orders and/or rules for the use of the Institute. Such standing orders shall come into operation immediately provided that at all times they shall be subjected to review by a General Meeting of the Institute and shall not be inconsistent with the provisions of the Constitution.

7.0 AMENDMENTOFTHE CONSTITUTION

- 7.1 Subject to the following provisions of this clause the constitution may be altered by a resolution passed by not less than two thirds of the fully paid members. The notice of the general meeting must include notice of the resolution setting out terms of the alteration proposed.
- 7.2 No amendment may be made to clause 1, 2, 8 or this clause without prior consent in writing of the Commissioners.
- 7.3 No amendment may be made which would have the effect of making the Charity cease to be a charity at law.
- 7.4 The Management Committee should promptly send to the Commissioners a copy of any amendment made under this clause

8.0 DISSOLUTION

8.1 The Institute may at any time be dissolved by a resolution supported by not less than two thirds of those present and voting at a meeting of the Institute of which at least twenty-one clear days' notice in writing shall have been sent to all members of the Institute, stating the terms of the resolution to be proposed thereat. Such resolutions may give instructions for the disposal of any property held by or in the name of the Institute, provided that if any property remains after the satisfaction of all debts and liabilities such property shall not be paid to or distributed among the members of the Institute but shall be given or transferred to such other institution or institutions having similar objectives as the Institute as decided at the General Meeting.

9.0 FINANCE

- 9.1 The Institute's financial year shall run from July 1st to June 30th of the following year.
- 9.2 The Institute shall have the power to obtain, collect and receive money and funds by way of contributions, donations, subscriptions, legacies, grants, loans, the sales of publications or by any other lawful method and accept gifts or property of any description whether subject to any special trusts or not.



- 9.3 The income and assets of the Institute, whenever derived, shall be applied solely towards the promotion of the objectives of the Institute as set forth in clause 2 and no proportion thereof shall be paid to any member of the Institute, Management Committee, Regional Committees or any other providing that nothing herein shall prevent the payment in good faith of reasonable and proper remuneration to any Honorary Officer or Member of the Institute or the repayment of out-of-pocket expenses.
- 9.4 The Treasurer shall keep proper accounts of the finances of the Institute.
- 9.5 The accounts shall be audited at least once a year by one or more qualified auditors and shall be submitted for consideration as the next Annual General Meeting of the Institute.

10.0 TERMINATION

- 10.1 A member of the Institute may be removed by a meeting of members for the reason that the conduct of such a member is not conducive to the promotion of the objectives of the Institute. Such removal should have the approval of two thirds of the Members attending and voting at an Annual General or an Extraordinary Meeting convened specially for such purpose.
- 10.2 If, after adequate reminders, a member fails to pay his or her annual subscription he or she may be removed from membership of the Institute.

11.0 OMISSIONS

11.1 In matters not provided for in these rules the Management Committee may decide on the steps to be taken and such steps should be set out in the report of the Institute.



இகரத்தை தந்த அறிவின் தாய்மையே சிகரத்தில் வைத்து ஏற்றி போற்றுகின்றோம் உதிரத்தை சாறாக்கி நீங்கள் உழைத்த பணத்தை உண்மை சேவைக்காய் சமர்ப்பனம் செய்தமைக்காய்

வெளிச்ச உண்டியலை உடைத்து இருட்டுத் தரையில் சிந்திய சில்லறை காசுகளாய் ஒளிர நாதியற்று ஒரமாய் இருந்தோம் ஓடி வந்து கரங்கொடுத்த உத்தமர்களின் அமைப்பே MIOT

2 என்பதில் ஓய்வின்றி 2 மைப்பதிலும் ஓய்வின்றி இயந்திரம் போலியங்கும் இன்னொருவர் நாடதிலே புலம் பெயர்ந்த வள்ளல்கள் புலம் பெயரா மனதோடு பதினாறாண்டாய் செய்த பணி மறப்போமா நாமென்றும்

வலிகளை கூட வலிந்து ஏற்றுக் கொண்டு முகவரியற்ற மழலைகளுக்கு முகவரி தந்து மகத்தான பணி தனை அகமலர்ந்து செய்யும் MIOT எனும் எம் தாய் நன்றிகள் பலகோடி

அன்பளிப்பு : திலகவதியார் மகளிர் இல்லம், கதிரவெளி





MIOT's Landmark Project of 2018

Target for Moolai Primary Care Centre 2019

- ❖ The new Extended Primary Care Centre to open in January 2019.
- Provide Family Medicine, Public Health & limited Secondary Care Services to the National & International standards.
- * Train Allied Health Care Practitioners.
- ❖ Achieve accreditation from Post Graduate Institute of Medicine, Sri Lankan College of General Practitioners and Royal College of General Practitioners UK, for teaching & training for respective exams and assessments.
- Link up with Departments of Community & Family Medicine in undergraduate medical education of the National & International Universities.
- Collaborate with the Provincial Ministry of Health to ease the unmet needs in Health of the Local community (Rural Health).
- Networking with the Local and Global Health Care Charities & organisations.





