



SEVENTH NATIONAL ASSEMBLY

PARLIAMENTARY

DEBATES

(HANSARD)

(UNREVISED)

FIRST SESSION

TUESDAY 20 APRIL 2021

CONTENTS

PAPERS LAID

QUESTIONS (*Oral*)

MOTION

STATEMENT BY MINISTER

ADJOURNMENT

QUESTIONS (*Written*)

THE CABINET

(Formed by Hon. Pravind Kumar Jugnauth)

Hon. Pravind Kumar Jugnauth	Prime Minister, Minister of Defence, Home Affairs and External Communications, Minister for Rodrigues, Outer Islands and Territorial Integrity
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Hon. Avinash Teeluck	Minister of Arts and Cultural Heritage
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MAURITIUS

Seventh National Assembly

FIRST SESSION

Debate No. 04 of 2021

Sitting of Tuesday 20 April 2021

The Assembly met in the Assembly House, Port Louis, at 11.30 a.m.

The National Anthem was played

(Mr Speaker in the Chair)

PAPERS LAID

The Prime Minister: Mr Speaker, Sir, the Papers have been laid on the Table.

A. Ministry of Local Government and Disaster Risk Management

- (a) The District Council of Riviere du Rempart (Collection and Disposal of Waste) Regulations 2021. (Government Notice No. 85 of 2021)
- (b) The District Council of Riviere du Rempart (Cemetery/Crematorium) Regulations 2021. (Government Notice No. 86 of 2021)

B. Ministry of Land Transport and Light Rail**Ministry of Foreign Affairs, Regional Integration and International Trade**

The Eastern and Southern African Trade and Development Bank (PTA Bank) (Privileges and Immunities) (Amendment) Regulations 2021. (Government Notice No. 83 of 2021)

C. Ministry of Social Integration, Social Security and National Solidarity

The *Contribution Sociale Généralisée* (Amendment) Regulations 2021. (Government Notice No. 84 of 2021)

D. Ministry of Financial Services and Good Governance

- (a) The Securities (Brokerage Fees for Exchange Traded Funds on Foreign Underlyings) (Amendment No. 2) Rules 2021. (Government Notice No. 88 of 2021)
- (b) The Securities (Public Offers) (Amendment) Rules 2021. (Government Notice No. 89 of 2021)
- (c) The Financial Services (Special Purpose Fund) (Amendment) Rules 2021. (Government Notice No. 91 of 2021)
- (d) The Financial Services (Consolidated Licensing and Fees) (Amendment No. 2) Rules 2021. (Government Notice No. 92 of 2021)

E. Attorney General**Ministry of Agro-Industry and Food Security**

- (a) The Witnesses' Attendance Allowances (Amendment of Schedule)) Regulations 2021. (Government Notice No. 87 of 2021)
- (b) The Sugar Investment Trust (Election of Directors and Representatives) (Amendment No. 2) Regulations 2021. (Government Notice No. 90 of 2021)

F. Ministry of Labour, Human Resource Development and Training

Ministry of Commerce and Consumer Protection

- (a) The Consumer Protection (Control of Imports) (Amendment) Regulations 2021. (Government Notice No. 82 of 2021)
- (b) The Consumer Protection (Price and Supplies Control) (Amendment of Schedule) Regulations 2021. (Government Notice No. 93 of 2021)
- (c) The Consumer Protection (Consumer Goods) (Maximum Mark-Up) (Amendment) Regulations 2021. (Government Notice No. 94 of 2021)

G. Ministry of Health and Wellness

- (a) The COVID-19 (Closing Down of Premises and Restriction of Activities) (Amendment) Regulations 2021. (Government Notice No. 80 of 2021)
- (b) The COVID-19 (Closing Down of Premises and Restriction of Activities) (Amendment No. 2) Regulations 2021. (Government Notice No. 81 of 2021)

H. Ministry of Arts and Cultural Heritage

- (a) The Annual Report and Financial Statements of the Ramayana Centre for the period 01 July 2017 to 30 June 2018.
- (b) The Annual Report and Financial Statements of the Ramayana Centre for the period 01 July 2018 to 30 June 2019.
- (c) The Annual Report and Financial Statements of the Ramayana Centre for the period 01 July 2019 to 30 June 2020.

ORAL ANSWERS TO QUESTIONS**NEW SOUILLAC HOSPITAL - DIALYSIS PATIENTS - DEATH - INQUIRY**

The Leader of the Opposition (Mr X. L. Duval) (*by Private Notice*) asked the Minister of Health and Wellness whether, in regard to the ten recent fatalities amongst patients undergoing dialysis at the New Souillac Hospital, as well as one other patient undergoing dialysis presently critically ill, he will state if he will order a full-fledge independent inquiry into all the circumstances surrounding same.

The Minister of Health and Wellness (Dr. K. Jagutpal): Mr Speaker, Sir, before replying to the PNQ, with your permission, I wish to convey my sincere condolences to the bereaved families of the 10 dialysis patients and others who have passed away during the month of March and April 2021. *Chaque mort est une de trop.* I make an appeal to all Members of the House to show and to pay due respect to the deceased and their families.

Mr Speaker, Sir, allow me to express my gratitude to all our frontliners who are working relentlessly during the COVID-19 resurgence period for the prompt and efficient management of COVID-19, thus allowing the country to curb the curve of the pandemic.

Let me start at the very outset to give a broad picture of dialysis services in the public health sector. Presently, there are 1,579 patients undergoing dialysis treatment, with 1,285 patients in the Government hospitals and 294 patients in the private clinics with which my Ministry has a Service Agreement. Transport facilities to and from the dialysis centres are free of charge to all dialysis patients. Dialysis patients undergo three dialysis sessions weekly as per medical prescription. Each dialysis session lasts for 3 to 4 hours. Dialysis facilities are provided free of user costs to all patients requiring the treatment.

Mr Speaker, Sir, let me now come to the specific case of dialysis patients in New Souillac Hospital Dialysis Centre and to inform the House that I do not intend to order any inquiry for reasons which I will now elaborate.

Mr Speaker, Sir, the Dialysis Unit at the New Souillac Hospital is in operation since 2012 and is equipped with 16 dialysis machines where around 90 patients undergo their dialysis treatment.

The staffing as at March 2021 comprised –

- (a) 1 Nephrologist;
- (b) 1 Anaesthesiologist;

- (c) 3 Medical Health Officers, that is, 2 at the New Souillac Hospital and 1 at Tamassa Hotel;
- (d) 2 Anaesthetic Nurses;
- (e) 2 ICU Nurses;
- (f) 1 Charge Nurse;
- (g) 4 Dialysis Nurses;
- (h) 7 Nursing Officers;
- (i) 3 Health Care Assistants, and
- (j) 3 Attendants.

I wish to point out that all the above personnel are specialists in their respective fields and undergo regular training through continuous medical education and are fully committed to their duties, especially in those difficult and special circumstances where they have had to leave their respective families for weeks to cater for the needs of the dialysis patients. The staff I have referred to work as a team for the betterment of the dialysis patients and devote their whole time to these patients in accordance with evidence-based international guidelines.

Mr Speaker, Sir, during the outbreak of COVID-19 at the Dialysis Unit at the New Souillac Hospital, a total of 87 patients were undergoing dialysis at this Unit and 3 patients were admitted at Jawaharlal Nehru Hospital for other medical problems.

On Friday 26 March 2021, it was reported that the PCR test done on the eve of one female Nursing Officer posted at the Dialysis Unit at the New Souillac Hospital was positive. The public health measures as per the established protocol were enforced. Concurrently, appropriate measures were taken to ensure the continuity of medical care and treatment of all our patients.

On the same day, as soon as the above report was received, all staff members working in the Dialysis Unit were isolated and had their PCR tests done.

Following the screening, 7 staff members were found to be positive for COVID-19, namely 2 Doctors, 1 Charge Nurse, 3 Nursing Officers, and 1 Attendant. The above staff who were positive were admitted at ENT Hospital.

Mr Speaker, Sir, on that day, that is, on 26 March, dialysis patients were, therefore, not conveyed in our transport from their residence to the Dialysis Unit for their treatment.

However, 6 patients came to the New Souillac Hospital by their own means. PCR tests were done for those 6 patients, out of whom 3 were COVID positive and they were admitted at ENT Hospital on 26 March for treatment and the remaining 3 who were COVID negative were quarantined at Tamassa Hotel. All other dialysis patients undergoing treatment at New Souillac Hospital were also quarantined in Tamassa Hotel.

Patients in quarantine at Tamassa Hotel who requested for their relatives to stay with them as companion were given the permission to do so, provided they accepted to sign an undertaking form. There were 14 relatives who stayed with their respective patients. It is to be noted that the cost of the room for a single patient is Rs32,000 for 14 days of quarantine and the cost of the room for room shared with the relative is Rs54,000 for the 14 days of quarantine.

Mr Speaker, Sir, I wish to inform the House that Mauritius is one of the rare countries which isolates all COVID positive patients. In most countries, in Europe and America, there have been numerous outbreaks of COVID-19 in Dialysis Units. There has been no attempt to isolate these patients in quarantine centres. Patients are self-isolated at home and travel to and from the Dialysis Centre by organised transport. Hence, there is a high risk of further spread of the infection to the rest of the community in these countries.

In Mauritius, in order to protect the community, the protocol is to quarantine all contacts of COVID-19 cases and to isolate all COVID-19 cases in a treatment centre. This applies to dialysis patients also.

All standards regarding dialysis treatment have been adopted and maintained. All dialysis patients continue haemodialysis at the same original centre so as to minimise the risk of contamination to other centres.

Mr Speaker, Sir, the whole of the New Souillac Hospital, including the Dialysis Unit, was closed in order to allow for complete disinfection to be carried out over 24 hours as from Saturday 27 to Sunday 28 March and all dialysis treatments were rescheduled accordingly.

Concurrently, all other dialysis patients of the New Souillac Hospital were screened and 12 were found COVID positive on 28 March, making a total of 15 patients COVID positive. All positive patients who were admitted at ENT Hospital were sent back to the Isolation Ward at the New Souillac Hospital for treatment and to continue their dialysis sessions at the above hospital as from 28 March in the afternoon.

From 26 March, that is the Day zero to 09 April, that is Day 14, which corresponds to the incubation period, as from the first detected case of COVID-19, 39 COVID positive patients were admitted at New Souillac Hospital. One additional patient was tested COVID positive on 11 April, that is, on Day 16.

Mr X. L. Duval: On a point of order, Mr Speaker, Sir.

Mr Speaker: Point of order!

Mr X. L. Duval: Mr Speaker, Sir, the hon. Minister gave all these information during the last session. The question is specific about a much needed independent inquiry. There are people dying at the moment as we speak or critically ill. I will expect the Minister to have some respect for these people and to address the question, not give us information that he has already given during the last session, Mr Speaker, Sir.

Mr Speaker: Let us hear the Minister.

Mr X. L. Duval: Time is running out!

Mr Speaker: Let us hear the Minister before making any statement.

Dr. Jagutpal: Mr Speaker, Sir, this question is addressed to all those patients; we have to give these information. At no point in time, last week, I have given the detail. I am answering a PNQ. The public should be made aware of all the facilities, all the treatments that have been provided to all these patients. I will continue, Mr Speaker, Sir.

Unfortunately, out of those ...

Mr X. L. Duval: Mr Speaker, Sir, given the nature of this question, the very solemn nature of this question, I hope that you will give additional time.

Dr. Jagutpal: Mr Speaker, Sir, I will continue. Unfortunately, out of those COVID positive dialysis patients, three passed away; one passed away on 09 April and two passed away on 11 April due to COVID. Four COVID positive dialysis patients passed away on 29 March, 31 March, 05 April and 11 April and were declared dead with other comorbidities as cause of death, that is, Ischemic heart disease, chronic renal failure, cardiac arrhythmia and chronic renal failure as primary cause of death, respectively. Another patient passed away last night, that is, on 19 April, at the New Souillac Hospital with cerebrovascular accident as a cause of death.

Mr Speaker, Sir, two negative COVID patients who were in quarantine in Tamassa Hotel passed away; one patient passed away on 29 March due to chronic renal failure and the other one passed away on 07 April due to cardiac complications.

On 04 April, 2 dialysis patients at Tamassa Hotel were confirmed COVID positive and were admitted at the New Souillac Hospital, followed by two more dialysis patients on 09 April and one more on 11 April, who were also confirmed COVID positive patients.

As at date, there are -

- 31 COVID positive patients at New Souillac Hospital;
- all the COVID negative dialysis patients have been discharged from Tamassa Hotel, and
- 10 dialysis patients have passed away, out of whom two were COVID negative, 3 patients passed away due to COVID and 5 COVID positive patients passed away due to other comorbidities.

Mr Speaker, Sir, as regards the medical coverage, the three Doctors were posted at the Quarantine Centre to look after all patients in quarantine at Tamassa Hotel. One Doctor accompanied the patients for their dialysis sessions at New Souillac Hospital on a daily basis.

Mr X. L. Duval: This was all given last week. I can tell you, one Nephrologist; two other Doctors accompanied the persons to and from. All this was given during the last session, Mr Speaker, Sir.

Mr Speaker: I let you know that I am not ...

Dr. Jagutpal: Mr Speaker, Sir, I am answering this question and all the information I am giving is related to this PNQ. I am not going out of subject.

Four more Doctors, including one Nephrologist, one Anaesthesiologist and two Medical Health Officers were posted at New Souillac Hospital to look after patients who were PCR positive and who also required dialysis treatment.

In addition, six experienced Dialysis Nursing Officers, who were called from other Dialysis Units of different hospitals, were posted at Tamassa Hotel Quarantine Centre to look after the dialysis patients and also to provide their dialysis treatment sessions at the New Souillac Hospital.

Six more Nursing Officers were posted at the New Souillac Hospital to look after the patients who were COVID positive and also to provide their dialysis sessions at late hours. During the late hours' sessions, two additional Dialysis Nurses were posted to look specifically after the COVID positive patients. Arrangements were made for all patients to have their dialysis sessions at the New Souillac Hospital. Moreover, two Imaging Technologists and 11 Hospital Attendants were posted thereat to provide support services. It is to be noted that these staff members had to stay on a roster at the hospital during a period of one week, after which another team took over.

All patients tested positive/negative undergo earlier dialysis treatment scheduled between 7.00 hrs to 20.00 hrs and those patients who are positive for COVID are having their treatment at late hours, that is, after 21.00 hrs. The staff were fully equipped with Personal Protective Equipment, which were renewed after each dialysis session.

Mr Speaker, Sir, as regards the diet for the patients in Quarantine Centre, it was reported by some patients that on the first day of quarantine, they did not have an appropriate diet according to the medical condition.

Arrangements were made for one dietician of my Ministry to advise daily on the diet for the renal patients so as to cater the patients at Tamassa Hotel.

All protocols for cleaning and disinfection of the whole Units as well as the dialysis equipment were done in-between each dialysis session with appropriate and recommended disinfectant to prevent the spread of the virus.

All consumables used for each dialysis session for each patient were disposable ones for single use and only for one time use.

Mr Speaker, Sir, cleaning and disinfection of Dialysis Units and equipment are done in accordance to strict protocol, which includes the following –

- (a) cleaning the floor with sodium hypochlorite solution;
- (b) the dialysis machines are equipped with auto-disinfection programme, which is mandatory, and is done after each dialysis treatment with sterilising solution;
- (c) hot auto-disinfection is also done on daily basis using recommended sterilising solution;

- (d) surface cleaning of the dialysis machines and other equipment is done by usual special solution, and
- (e) fumigation of the room is being done daily at night after all sessions are completed.

Furthermore, all staff and patients are always instructed to abide by all sanitary precautions.

Mr Speaker, Sir, I will now come to the transport arrangements made for the conveyance of dialysis patients stressing on the fact that Mauritius is one of the very rare countries providing such dialysis facilities to its dialysis patients from their residence to the Dialysis Centres and back.

From 28 March 2021 to 11 April, two 15-seater vans and one ambulance were posted at the New Souillac Hospital for the conveyance of dialysis patients. For each session, 13 patients could undergo dialysis treatment.

Each 15-seater van was conveying six patients at a time so as to cater for physical distancing during the trip from Tamassa Hotel to New Souillac Hospital and back.

The dedicated vehicles conveying staff and patients from Tamassa Hotel to the New Souillac Hospital and back were equipped with a transparent plastic screen to separate the drivers from the passengers.

For the period 12 April 2021 to 17 April 2021, the number of transport for dialysis patients was increased to four, with one additional 15-seater van.

Mr Speaker, Sir, our Doctors are keeping themselves abreast of the evolution and scientific evidence since the beginning of the pandemic in line with good medical practice. The Nephrologists are kept updated on the scientific developments in the field of nephrology in relation to COVID-19. Specific treatment protocols have been elaborated for the care and management of dialysis patients well before the resurgence of COVID-19.

Literature reviews show that the prognosis of dialysis patients infected with COVID-19 is, unfortunately, very poor. Depending on various studies, the mortality rate is 20-35%. For instance, a large multi-centric study published by Journal of American Medical Association (JAMA), based on 65 dialysis centres show a mortality rate of 34.5%.

In Australia, where a stringent quarantine protocol applies, there have been seven fatalities out of 13 dialysis patients infected with COVID-19.

Similarly, in the UK, out of 6,488 COVID positive dialysis patients, 1,338 have passed away.

Mr Speaker, Sir, I would have preferred not to draw such comparisons, but we know the schemes of the Opposition. Mr Speaker, Sir, having said so, these figures refer to human beings and, behind every statistic, there is a person and a life that matters. The fight goes on, and our aim remains to save every single life.

Hence, Mr Speaker, Sir, I do not intend to carry out any inquiry.

Mr X. L. Duval: Mr Speaker, Sir, as a start, I would like to offer my sincere condolences to all the people who have suffered, people who died. I recognise the efforts of the staff, but I will also say, Mr Speaker, Sir, I consider it my moral duty that light be shed on the deaths of these 10 persons and the people who are critically ill at this moment.

I will start, Mr Speaker, Sir, by tabling a copy of a report published in *The Lancet*, which shows that Mauritius is the worst country in the world, with the highest death rate for kidney disease in the whole world. I will table that, Mr Speaker, Sir, to show that there should be no room for self-satisfaction.

I will ask the first question, Mr Speaker, Sir, concerning vaccines. 424,000 vaccines had been received by the time of the outbreak in New Souillac Hospital, yet not one single person at that hospital for the dialysis had been vaccinated, and I will refer, Mr Speaker, Sir, to what the Minister said in his PNQ of 23 March –

“(...) the vaccination programme for senior citizens and patients with comorbidities was put on hold - was stopped - and the vaccination programme was targeted to persons with Work Access Permit.”

Therefore, I ask the Minister, Mr Speaker, Sir, who and why were instructions given to stop vaccinating these highly fragile persons against WHO Guidelines of 30 November 2020? Who and why were these instructions given, Mr Speaker, Sir?

Dr. Jagutpal: Mr Speaker, Sir, I will first come up with the first information that the Leader of the Opposition has given; he has shown a document from *The Lancet*. Mr Speaker, Sir, in our country, all patients who had a kidney problem are given the chance of having dialysis, at all costs. In other countries, it is a selected group of people who is given the chance to do dialysis.

Mr Speaker, Sir, let me explain. In other countries, those patients who will get a renal donation will be given the chance to do dialysis. Secondly, Mr Speaker, Sir,...

Mr X. L. Duval: *Vaccin!*

Dr. Jagutpal: ...concerning the vaccination programme, yes, the Ministry, the Government has decided to give vaccination for comorbidities as a priority, but, at the same time, we had the confinement. During the confinement, what is our advice? Our advice is to protect people, to protect those people who are vulnerable; they should not be allowed to move out. This is the protection we have given. Secondly, Mr Speaker, Sir, for the vaccination, the Ministry has already, in the beginning, offered the chance for all cardiac patients and dialysis patients to get vaccination, but the vaccination programme is a voluntary one. It is a voluntary programme; we cannot force people to get the vaccination.

(Interruptions)

Mr Speaker: Let the Minister reply!

Dr. Jagutpal: Now, Mr Speaker, Sir, thirdly, a vaccine does not act immediately. It takes four weeks to develop the antibodies. Now, Mr Speaker, Sir, I also wish to highlight to the House that 63% of our patients have been vaccinated. Acceptance was low in the beginning, and even some refused to do the vaccination.

Mr X. L. Duval: Mr Speaker, Sir, no serious effort was made by the Ministry to vaccinate. Hence, zero vaccination at New Souillac Hospital. He stopped it and started again in confinement because he knew it was a disastrous policy to stop. Mr Speaker, Sir, I will now ask about Health Care workers. Dr. Musango, bless him, of WHO, said in October 2020 —

“The infection rate amongst health workers is very high. You have to be careful in case of resurgence of COVID.”

Why were there no routine PCR tests done with any of the health workers working at the hospitals in Mauritius, especially at the New Souillac Hospital? And this lady, Mrs Sunassy, she went of her own volition, not feeling well, to get a test. This was not a routine or even a procedure by the Ministry of Health. Why were you negligent in that way?

Dr. Jagutpal: Mr Speaker, Sir, I will first come up for Souillac Hospital. At a time when you have the personnel having been infected, they all have to move in quarantine as per our established protocol and, in quarantine, we cannot do vaccination. Similarly, for the

patients; all patients, whether they are tested positive, they are in treatment centres, or they are not tested positive, they are in quarantine. So, those who are in quarantine are suspect cases, and we cannot do vaccination at this point. This is the expert advice. At the same time, when Dr. Musango said the infection rate from that time, in October, was very high, no recommendation was given that the PCR test should have been done routinely on the staff of the hospital. The Leader of the Opposition is getting it very wrong. Mr Speaker, Sir, the first and foremost precaution that should be taken is wearing the mask. Wearing the mask is the most important and not the PCR test. Even if you do the PCR test at this time, the PCR test will give you information for the past. But what is more important is how you put in place the barrier measures, how you use the mask, how you do sanitisation. This is most important.

(Interruptions)

Mr Speaker: No, no, you do not have the floor!

An hon. Member: I do not want the floor!

Mr Speaker: As simple as that!

An hon. Member: I do not want the floor!

Mr Speaker: Please, quiet! Quiet! Continue Minister!

Dr. Jagutpal: Mr Speaker, Sir, this is the recommendation that all health personnel, even all the public in general, including the hon. Leader of the Opposition, have to follow. It is not the test that is primordial; it is the barrier method.

Mr X. L. Duval: It is okay now! We have understood your muddling. Mr Speaker, Sir, why then, on 29 March, he had issued himself, the Senior Chief Executive had issued a circular to all hospitals to ask them to have routine PCR test? *C'est la mort après la tisane*, Mr Speaker, Sir! This is the whole point!

Mr Speaker: Put your question!

Mr X. L. Duval: And he is trying, Mr Speaker, Sir - I am very...

Mr Speaker: No, no debate! Put your question!

Mr X. L. Duval: Okay. Why is the Minister fuddling the issue when he is talking about vaccines? I am talking about vaccination before the pandemic at New Souillac Hospital. That is when he did not vaccinate one single person there. I am asking why? Do not answer me...

Mr Speaker: Okay, no comment!

Mr X. L. Duval: Okay, sorry!

Dr. Jagutpal: Mr Speaker, Sir, I will come back with the PCR test. Obviously, when in three of our institutions we have doctors, we have personnel that have been infected, it is important at this time to do routine tests, and again, in the future, it is not only routine tests that have to be done...

(Interruptions)

Mr Speaker: This is threatening! This is threatening!

(Interruptions)

I am just advising!

(Interruptions)

This is threatening, mind well!

Mr Mohamed: It is ...

Mr Speaker: Nobody should talk if he does not have the floor! This is Standing Order! I show it to the Chamber and the population!

Dr. Jagutpal: Mr Speaker, Sir, hon. Mohamed used to poke in-between whenever there is a question from the hon. Leader of the Opposition. Mr Speaker, Sir, he should be taken to task because he cannot! He has been doing that for months; we have been watching him. This is the word!

(Interruptions)

Mr Speaker: Order!

(Interruptions)

Order! Order!

Dr. Jagutpal: I will answer my questions, but...

Mr Speaker: Order! There is only one Leader of the Opposition!

Dr. Jagutpal: Hon...

(Interruptions)

Mr Speaker: There was another one, he is not here!

Mr X. L. Duval: Mr Speaker, Sir, I would like to ask the hon. Minister, this is what has shocked independent nephrologists most of all; it is that two patients died at Tamassa Hotel just after having their dialysis sessions, Mr Speaker, Sir. And this reminds me of what hon. Ivan Collendavelloo said in the papers on 10 April 2021. He said –

« Dimoun pa pou mort ar Covid, me ar movais dialyse. »

Here, I am asking the hon. Minister, has he had an inquiry to see why two people, otherwise healthy people, died under his watch,...

Mr Speaker: You made your point!

Mr X. L. Duval: Just after the dialysis session?

Mr Speaker: Let him give the reply!

Dr. Jagutpal: Mr Speaker, Sir, I will again come up with the question that was put to me about the dialysis patients; whether they have been vaccinated. Seven patients from Souillac Hospital went for vaccination before the outbreak on their own because this is what was issued from the Ministry; that dialysis patients and cancer patients have to be vaccinated. But vaccination is a voluntary element, and we have to understand that patients have been doing it on voluntary purpose.

Secondly, about what the Leader of the Opposition has said on the two patients who have passed away. Mr Speaker, Sir, this is not time for me to give all the details of those patients. Mr Speaker, Sir, I rely on the doctors who have been treating these patients. I rely on the nurses, on the health professionals who have been treating these patients. Before coming to dialysis, most of the patients have a long history of medical illness and these doctors, these nurses, they know their patients very well. They know who are very critical, who are very vulnerable, and they know what they have been doing for these patients. I am not going to comment because these are very sensitive issues for those patients. I have all the respect for those patients. We are not going to have a discussion on the mode of how their death happened. But, at the same time, it is very shocking, Mr Speaker, Sir, that people die before, after and during dialysis, and, unfortunately, this has become the debate of the day. This is what I wish to say, but, Mr Speaker, Sir, rest assured that the Ministry has taken all the information about those patients. We have studied it; the doctors have seen whether proper treatment was given to those patients who have passed away in the quarantine centres, and we are all satisfied that those patients, whoever, wherever, in whatever condition they

have passed away, we have seen that the doctors, the personnel who have been doing their job, they have done a fantastic job.

Mr X. L. Duval: Mr Speaker, Sir, the Minister has not listened at all to what the people in Tamassa have said. Nevertheless, I will come back to it in a Press Conference. I would like to ask the Minister, concerning his statement that he will not have any medical inquiry, whether he is aware that one family has already submitted a complaint for medical negligence during the weekend, whether he is aware of that, stating the basis for the complaint, whether he is aware of that, and whether he is also going to ignore this family's complaint.

Dr. Jagutpal: Mr Speaker, Sir, the Ministry of Health receives, every month, more than two to three complaints, and for these complaints, there is a procedure. The procedure is the Ministry of Health receives the complaint; first is wherever this patient is being treated in the regional hospital, there is an internal inquiry; the report is sent to the Ministry, the Ministry will send this report to an independent inquiry, that is, the Medical Negligence Standing Committee, chaired by independent persons, with all the three doctors who are involved in that. They will do the inquiry. They will come with a report. The Ministry will rely on the recommendation of the report. This is how the Medical Negligence Committee works and all the alleged negligence or all the complaints are treated in the same way. After that, the report will be referred to the Medical Council for another investigation and, if need be, the Medical Tribunal also will conduct an independent inquiry. These are the procedures, Mr Speaker, Sir. We are only following the procedures. All patients who are having a complaint will not come to the Minister. We will follow the procedures. It should not come to my Office, because this is for the proper governance. The complaints should be dealt with by the Officer responsible. It is not that the Minister should interfere into an inquiry. This should be the answer that I wish to give.

Mr X. L. Duval: I will table, with the permission of the family, a copy of the letter of complaint. And I must say that I am not surprised that the Minister does not agree to an inquiry on himself, on his own incompetence.

Mr Speaker: Use the time well!

Mr X. L. Duval: So, Mr Speaker, Sir, I will now come...

Dr. Jagutpal: Mr Speaker, Sir...

Mr X. L. Duval: And this is why I wanted to ask the question to your boss.

Dr. Jagutpal: Mr Speaker, Sir, I object to this comment.

(Interruptions)

Mr Speaker: Quiet!

Mr X. L. Duval: As far as psychological torture is concerned, Mr Speaker, Sir, he gave the impression that from the first day, everything was fine. In fact, he took six days up to April 02. I think there are some interventions by his colleague for him to realise the dramatic situation at Tamassa. Let me say, Mr Speaker, Sir, psychological torture, people were put by themselves for the first six days...

Mr Speaker: There is a question about that!

Mr X. L. Duval: Let me say whether he is aware of it! Is he aware that people were there six days, in fact, not six days, the whole time, without TV, without phone line, without Internet, and the first six days, no possibility of being accompanied by anyone, and they needed the support of their loved ones and so many people died, Mr Speaker, Sir?

Dr. Jagutpal: Mr Speaker, Sir, quarantine period is not difficult for one, it is a difficult time for everyone, but we have to safeguard lives of others. These are public measures. Mr Speaker, Sir, let me remind the hon. Leader of the Opposition that in the beginning when we first had passengers to be quarantined, at that time, we did not have a single hotel; at that time, we managed by the buildings provided by the Ministry of Social Security. We managed to keep Mauritius safe by using all our means to get it. It is at a later stage that we started having hotels. Mr Speaker, Sir, for me, for himself, quarantine is a difficult period to stay 14 days in a room. I understand this, but, at the same time, why are we doing this? It is only to save the life of the person who has been quarantined, not to make him infect others, and, at the same time, protect the families. We are doing everything in terms of accommodation, in terms of facilities being given at the quarantine centres. But, Mr Speaker, Sir, with all that we have been doing, we have been...

(Interruptions)

Mr Speaker: Order!

Dr. Jagutpal: All the quarantine officers, all the staff working in those centres have been up to the level because they have been delivering, and thanks to them, we have been able, today, to keep people in quarantine and that has helped us to curb the curve, that has helped us to date. One month back, we had a number of cases in the local community, and

these are the procedures. We should highlight that; we should make people aware of that, why we have been doing quarantine. I understand it has a huge psychological impact, but we have to go through that. This is the only way. By doing so, we have been able to curb the curve; we have been able for the last one week to have hardly one or two cases in the population.

Mr X. L. Duval: Mr Speaker, Sir, locking people up by themselves in a room, 24 hours without TV, without Internet, without a telephone line, is doing everything, Mr Speaker, Sir! Not at all!

(Interruptions)

Mr Speaker: Order!

Mr X. L. Duval: Mr Speaker, Sir, I would like to ask the hon. Minister about contagion. He is doing everything!

(Interruptions)

Mr Speaker: Order!

(Interruptions)

An hon. Member: *Bouffon!*

Mr X. L. Duval: About contagion...

Mr Speaker: Time is almost over, put your question!

Mr X. L. Duval: I am putting my question, Mr Speaker, Sir. This morning, there is an article in the paper to show that the procedure at the New Souillac Hospital, as far as dialysis is concerned, is being completely changed, *après la mort, la tisane*, with separate machines for positive and for negative patients. Mr Speaker, Sir, it is clear that these persons were in perfectly good health. Fathers, mothers, grandmothers, wives, husbands, breadwinners, and they came and they were quarantined or they were put at the hospital and they found their death, Mr Speaker, Sir. So, I would like to ask the hon. Minister why is it that so long after they caught the virus at the hospital, only now he is realising that there should be social distancing, that there should be cleaning, Perspex, etc. I am going to table, Mr Speaker, Sir; I am going to show...

Mr Speaker: Do not make any debate, put your question! Time is over by almost 10 minutes!

Mr X. L. Duval:...a picture, Mr Speaker, Sir, of the van where there was absolutely no social distancing on 29 March. Why is it only now, Mr Speaker, Sir?

Mr Speaker: Okay!

Dr. Jagutpal: Mr Speaker, Sir, I will come back with the question of lockdown. We have locked down people in the quarantine centres. Mr Speaker, Sir, these quarantine centres, why do we quarantine? If we have to allow everybody - in a quarantine centre, there might be more than 300 persons who are quarantined, so, we let everybody mix with each other.

(Interruptions)

Mr Speaker, Sir, let me reply...

(Interruptions)

Mr Speaker: Hon. Leader of the Opposition!

(Interruptions)

Hon. Leader of the Opposition, this is interrupting!

Dr. Jagutpal: He is refusing to...

(Interruptions)

Mr Speaker: Order!

An hon. Member: *Bouffon!*

Dr. Jagutpal: Mr Speaker, Sir, why should we have a quarantine if we have to allow everybody to move?

(Interruptions)

Mr Speaker: Order! No crosstalking! What is happening here?

Dr. Jagutpal: I'll again...

(Interruptions)

Mr Speaker: You are doing that! You are throwing the paper!

(Interruptions)

Please! You don't have the floor!

(Interruptions)

Time is over! Prime Minister's Question Time!

Let me first make the announcement. PQ B/225 will be replied by Dr. the hon. Minister of Health and Wellness. PQ B/229 will be replied by the hon. Minister of Land Transport and Light Rail, Minister of Foreign Affairs, Regional Integration and International Trade. PQ B/231 will be replied by the hon. Minister of Financial Services and Good Governance. PQ B/242 will be replied by the hon. Prime Minister, time permitting.

So, Prime Minister's Question Time! Hon. Ameer Meea!

PRISONS – CCTV CAMERAS

(No. B/217) Mr A. Ameer Meea (Third Member for Port Louis Maritime & Port Louis East) asked the Prime Minister, Minister of Defence, Home Affairs and External Communications, Minister for Rodrigues, Outer Islands and Territorial Integrity whether, in regard to the Closed-Circuit Television Surveillance Systems in the prisons, he will, for the benefit of the House, obtain from the Commissioner of Prisons, information as to the –

- (a) number of cameras thereof which are presently defective, indicating when remedial measures will be taken, and
- (b) duration of the storage of the video footages thereof.

The Prime Minister: Mr Speaker, Sir, I am informed by the Acting Commissioner of Prisons that 9 out of 12 penal institutions are equipped with a total number of ...

(Interruptions)

Mr Speaker: So, what is happening? Each time a Minister or the Prime Minister is replying, there is disturbance in the House; and these people will go in the Press and say we need decorum, Parliamentary democracy. This is here where we have to have Parliamentary democracy!

Mr X. L. Duval: Mr Speaker, Sir, on a point of order!

Mr Speaker: On what point of order?

Mr X. L. Duval: Hon. Hurreeram called me '*bouffon*', quite loudly. Did you hear that?

(Interruptions)

Mr Speaker: Did you?

(Interruptions)

Wait!

(Interruptions)

Wait! Wait! Order!

(Interruptions)

Order! If hon. Hurreeram said that word, please, withdraw that word.

Mr Hurreeram: No, Mr Speaker, Sir, I did not say anything.

(Interruptions)

Mr X. L. Duval: Mr Speaker, Sir,...

(Interruptions)

Mr Speaker: Order! Order!

Mr X. L. Duval: Mr Speaker, Sir, I have raised a point of order. You have the recording...

Mr Speaker: Order! Order, please!

Mr X. L. Duval: You have the recording; please listen to the recording at lunch and you will know who said it. I was looking at you and I heard it there. Obviously, I cannot look there and hear you. If you will kindly hear the recording at lunch time and find out who said it, please. Thank you.

Mr Speaker: Thank you very much! This is a very good way of bringing things.

Mr Speaker: Prime Minister!

The Prime Minister: May I continue? Let me start again.

Mr Speaker, Sir. I am informed by the Acting Commissioner of Prisons that 9 out of 12 penal institutions are equipped with a total number of 1,320 Closed-Circuit Television (CCTV) cameras. Of these, 454 are presently defective in the following prisons -

- | | | |
|------|-----------------|---|
| (i) | Central Prison | 1 |
| (ii) | New Wing Prison | 1 |

(iii)	Petit Verger Prison	3
(iv)	Women Prison	84
(v)	Eastern High Security Prison	365

The CCTV cameras at the Central Prison, the New Wing Prison and the Petit Verger Prison are defective due to technical problems which occurred during lockdown of this year and have already been reported to the Contractor. However, in order to keep our prisons a COVID-safe area, interventions inside these prisons have been stayed.

The CCTV system which was installed at the Women Prison as far back as 2013 is outdated and the maintenance contractor is unable to repair it. Tender was launched for the rental of 110 CCTV cameras last year. The contract has been awarded on 03 December 2020 to Mascareignes Suppliers Ltd for a period of 5 years at a monthly rate of Rs60,000, excluding VAT. As at date, 60% of work has been completed but has had to be stopped due to confinement in the context of COVID-19. Again, to keep the prison COVID-safe, the workers of the company are not being allowed inside the prison compound for the time being. The company has indicated that it will take two weeks for the remaining work to be completed.

Mr Speaker, Sir, with regard to the 365 defective cameras at the Eastern High Security Prison, I wish to refer the hon. Member to the reply I made to Parliamentary Question B/452 at our Sitting of 04 August 2020 on this issue.

Mr Speaker, Sir, I wish to point out that the Eastern High Security Prison was, since its construction, in a very bad state, more specifically the CCTV system thereat.

Under the construction contract, Prisons Department was bound to sign a maintenance contract for five years, that is, from January 2016 to December 2020 with the Contractor, although several interventions were effected during the first two-year defect liability period.

The maintenance contract was signed on 10 February 2016, but, by June of the same year, 73 cameras were already not operational, hence undermining the good running of the prison. This shows, Mr Speaker, Sir, the poor quality of work which had been done. Since Prisons Department could not do otherwise, it had to continue to rely on the services of the Contractor and the failing CCTV system, which went from bad to worse. By the end of December 2020, some 278 cameras were defective.

The system was installed at the initial cost of Rs29 m. for 254 cameras, but due to its inadequacy, the numbers had to be increased to 544, bringing the total cost to Rs63.1 m. This again shows, Mr Speaker, Sir, the poor planning that was done. The project which started at a cost of Rs1,491,686,781.53 culminated to Rs2,134,890,869.13.

Presently, out of the 544 cameras at the Eastern High Security Prison, 365 are defective.

The Contractor effected a survey from 05 October to 07 December 2020, following which it restored part of the system and carried out maintenance free of charge. On 04 March 2021, the Contractor submitted a report and a quotation for the sum of Rs10,656,281.80 to fully restore the system.

However, in view of the non-cost effectiveness of the repairs, it was decided to revamp the whole analogue CCTV system and go for the rental of new digital CCTV system.

Financial clearance was received on 01 April 2021 to proceed with the rental of 450 CCTV cameras at the Eastern High Security Prison for the sum of Rs6 m. on a yearly basis.

On 16 April 2021, tender was launched on the e-procurement system for the rental of 450 CCTV surveillance cameras at Eastern High Security Prison with the option to upgrade. The closing date for submission of bids has been scheduled for 17 May 2021.

Mr Speaker, Sir, the use of CCTV cameras, a key component of security, makes a positive contribution to the safety of staff and detainees, and reduces the risk of abuse. However, they are not complete without the services of Prison Officers.

Hence, although the CCTV system at the Eastern High Security Prison is not fully operational, security of the prison is not compromised as both General Duties and PSS Officers are being deployed at Strategic Points. Regular patrol is carried out both inside and outside the institutions by both vehicular and officers on foot patrols. In addition to armed sentries on the Watch Towers, dog handlers with dogs regularly patrol the inner and outer perimeter of the prison compound. Two way radios are also used by officers to communicate and they remain in contact with the Central Control Centre.

Mr Speaker, Sir, with regard to part (b) of the question, I am informed by the Acting Commissioner of Prisons that the Prisons Department complies with the provisions of section 21 of the Data Protection Act relevant to the retention period of the data.

The video footages are archived for a duration of 60 days. The system thereafter automatically overwrites the old ones to make room for new footages. However, if a footage had to be reviewed to investigate specific incidents, then any extracted footage could be retained for the purpose of that investigation and also to be used as evidence where required, until investigation is concluded.

Mr Speaker: Hon. Ameer Meea!

Mr Ameer Meea: Mr Speaker, Sir, it is a real concern that 67% of the cameras in a high security prison are not working, and this issue has been criticised by the Director of Audit down the years; even in his last report. But is the hon. Prime Minister aware that for images from operational cameras, that is, the rest that is working, were not recorded and not stored on an acceptable period? This defeats the whole purpose of having cameras if it is not recorded, and as I said, this was mentioned in the Director of Audit's report. Has this issue of working cameras not being able to record been dealt with since the report has been issued?

The Prime Minister: Yes, Mr Speaker, Sir, not only some of those cameras were not working, and since day one; there are also some DVRs which were not working properly, and it is obvious that if they were not working, they would not be able to record footages. But, as I have said, we are now reviewing the situation. We have been trying to review it in the past, and we are reviewing it now, and, therefore, there is a tender which we are launching for rental of new cameras.

Mr Ameer Meea: Mr Speaker, Sir, if I understand the hon. Prime Minister, the whole previous system which has not been working, which has had so many problems down the years, is being revamped completely and there will be a new system that will be in place at Melrose Prison.

The Prime Minister: Yes, in my answer, I said that on 16 April 2021, a tender was launched on the e-procurement system for the rental of 450 CCTV Surveillance Cameras with option to upgrade. I think the closing date for the submission of the bids has been scheduled for 17 May. So, we shall see!

Mr Ameer Meea: Mr Speaker, Sir, in its report, the Director of Audit mentioned that a Government Asset Register was introduced in 2017 to keep track of assets from acquisition to disposal and Rs25 m. have been disbursed for the last three years and, as at now, nothing has been done according to the Director of Audit report, that is, there is no Government Asset

Register. So, can I ask the hon. Prime Minister if he is aware of this issue and what has been done?

The Prime Minister: Mr Speaker, Sir, the question relates to CCTV Surveillance Cameras in the prisons. If the hon. Member will come with a specific question with regard to this specific matter, I shall provide the information.

Mr Speaker: Hon. Nuckcheddy!

Mr Nuckcheddy: Mr Speaker, Sir, the hon. Prime Minister mentioned that 9 out of 12 of our penal institutions are equipped with CCTV Cameras. Will he please inform the House if there is any plan, to mention the other three with CCTV Cameras?

The Prime Minister: Let me see. We have the Correctional Youth Centre. With regard to this institution, a tender was launched for the rental of 42 CCTV Surveillance Cameras on 09 April 2021. The closing date for the submission of the bid has been scheduled for 05 May 2021. I understand that provision has also been made for the Financial Year 2022-2023 for installation of CCTV Surveillance Systems at the Special Prison for Women and for Rodrigues Prison. And on 28 October 2020, Brinks Mauritius Ltd was awarded a contract to install 19 additional cameras on a rental basis at the Phoenix Prison.

Mr Speaker: Hon. Mrs Tour!

Mrs Tour: Thank you, Mr Speaker, Sir. Apart from the staff manning the Control Room, may I know from the hon. Prime Minister who else can have access to the Control Room?

The Prime Minister: Mr Speaker, Sir, given the critical role that the Control Centre in fact plays in daily operations, access to the Control Rooms is obviously restricted only to authorised personnel, and I am informed that even these Control Rooms are also under CCTV Surveillance to monitor the movements of the Prison Security staff who are working therein and, obviously, authorised personnel are those who have been designated to work thereat and to man this system.

Mr Speaker: Hon. Doolub!

Mr Doolub: Thank you, Mr Speaker, Sir. Can we know from the Prime Minister how many officers do work in the Control Room?

The Prime Minister: There are officers of the Prison Security Service who, obviously, have to be conversant with the system. They are being given a special training to

man the CCTV Surveillance System, and they are the ones who are posted there. They work on a roster basis and I am informed that, at any one time, there are at least two officers who are on duty and present in the Main Control Room.

The staff posted are responsible for supervising the daily operations of the Prison, and I must also point out that the system is operational on a 24-hour basis, so that the responsibility for managing and for monitoring night operations resides entirely with the Control Room.

I am also informed that these Control Rooms are normally manned by a team of at least 10 dedicated officers in the grade of Prison Officer and Lead Prison Officer. As I said earlier, these officers work round the clock and there are at least two officers each time.

Mr Speaker: Hon. Dr. Aumeer!

Dr. Aumeer: May I ask the hon. Prime Minister whether body cameras to Prison Officers are being considered, considering that sometimes there are sudden breakdown of the surveillance systems and no proofs of what has been reported so many times about brutality in prisons?

The Prime Minister: I did not get the question, Mr Speaker, Sir.

Dr. Aumeer: The question is whether body cameras to Prison Officers are to be considered to avoid sometimes the sudden disappearance and breakdown of specific cameras in prisons?

(Interruptions)

Body worn cameras by Prison Officers.

The Prime Minister: Well, this is a suggestion which obviously will be considered.

Mr Speaker: Hon. David!

CARGO HANDLING CORPORATION LIMITED – REACH STACKERS

(No. B/218) Mr F. David (First Member for GRNW & Port Louis West) asked the Prime Minister, Minister of Defence, Home Affairs and External Communications, Minister for Rodrigues, Outer Islands and Territorial Integrity whether, in regard to stackers used for container-handling activities, he will, for the benefit of the House, obtain from the Cargo Handling Corporation Limited, information as to –

- (a) the number thereof owned by the Corporation, indicating the number thereof not being operational, if any, and since when, and
- (b) if any stacker had to be borrowed recently to ensure a minimum service continuity of the Corporation.

The Prime Minister: Mr Speaker, Sir, the Cargo Handling Corporation Limited is a State-owned enterprise solely responsible for handling general and containerised cargoes.

Handling of containers in the harbour involves a number of operations and different types of specialised equipment are used for each operation. For instance, for the core operation of loading and unloading of containers onto and from vessels to the quay, Ship-to-Shore cranes are used. Tractors and trailers are used for conveying containers from the quay to the container park and vice-versa. Rubber Tyre Gantry cranes are mobile gantry cranes used in yard operations to stack or load containers onto trucks for delivery.

A reach stacker, which supplements the Rubber Tyre Gantry cranes' operations, is an equipment used for quick transportation of containers on a very short distance for stacking in the container park.

As regards part (a) of the question, I am informed by the Managing Director of Cargo Handling Corporation Limited that the Company owns 11 reach stackers, out of which five are 21 years old, four are 13 years old, and two are five years old. Three of the reach stackers, which are 13 years old or more, are beyond economical repairs and would need to be disposed of.

From the remaining fleet of eight reach stackers, there are presently five which are grounded for repairs since September 2019, September 2020, October 2020, November 2020 and January 2021 respectively and are awaiting provision of spare parts which are not readily available on the market. In fact, their spare parts are procured with much difficulty from overseas. One reach stacker is expected to be repaired by end of April 2021 and the remaining four by end of June 2021.

I am also informed that the Cargo Handling Corporation Limited has already launched tenders for the purchase of three additional reach stackers.

Mr Speaker, Sir, as regards part (b) of the question, I am informed that Cargo Handling Corporation Limited has not borrowed any reach stacker recently to ensure a minimum continuity of its activities. The three reach stackers currently in operation are

responding to the needs of the organisation although, from time to time, they may sustain temporary breakdowns, which are attended to by the in-house workshop.

I am also informed that, while waiting for the availability of spare parts for repairs, the Cargo Handling Corporation Limited conducted a market survey on 19 November 2020 through a restricted bidding exercise for renting of reach stackers from a selected list of users of the equipment around the Port Area. The purpose of the survey was to be aware of availability of reach stackers in case of absolute necessity. As at closing date of 20 November 2020, only one response was received. So far, the Cargo Handling Corporation Limited has not felt the need to have recourse to renting of reach stackers to ensure a minimum service continuity of the Corporation.

Mr David: Thank you, Mr Speaker, Sir. I understand that out of the eight reach stackers, three are operating and compensating the work of non-operational ones. May I know from the hon. Prime Minister whether the average delay in the release of containers and goods has been quantified as a consequence of its lack of handling equipment?

The Prime Minister: No, I am informed that it is not because there are only three stackers that there is delay; there can be delay because of other factors but not because of lack of stackers.

Mr Juman: Thank you, Mr Speaker. Can the hon. Prime Minister inform the House when the tender was launched for the three stackers?

The Prime Minister: I did say it in my answer. The tender was launched on 15 April and the closing date for submission of the bids is 15 May 2021.

Mr Speaker: Let me give the question to hon. Dhunoo first and then to you.

Mr Dhunoo: Thank you, Mr Speaker, Sir. In his answer, the Prime Minister has mentioned about the tender and everything. Is there any equipment replacement plan based on the future projection of business level at the Cargo Handling Corporation Limited?

The Prime Minister: Mr Speaker, Sir, I understand that management of Cargo Handling Corporation Limited has already worked on Business Plan 2021-2024, highlighting all the major investments that Cargo Handling Corporation Limited needs to embark onto for that period to lead the way to nurture the transshipment business through improved service. The Business Plan 2021-2024 is geared towards the Plan of investment in a state-of-the-art

yard equipment as well as focuses, amongst others, on the other major focal points which will help sustain a level of service deemed proper for a modern port.

Mr Juman: Thank you. Hon. Prime Minister, how can the Cargo Handling Corporation achieve the objective to position our port as a regional hub in preparation for the Panamax era when, in 2015, we had nine operating stackers with much less traffic compared to only three in 2021?

The Prime Minister: Well, as I said in my answer, the stackers are there to supplement the handling of containers. There are the RTGs which are, in fact, handling the containers from the Container Terminal Park to be loaded to lorries and trailers for these containers to be delivered to whichever company has to take delivery thereof. So, as I say, these stackers are not as if the machines which are doing only handling of containers. There are the RTGs, and I am informed that the three, for the time being, are providing the minimum service that is required. The others, as I have stated in my answer, are going to be repaired. Probably, by June, we should have more stackers in operation, and there is already a tender which is launched for acquiring three more stackers.

Mr Speaker: Hon. Armance!

Mr Armance: Thank you. Can the hon. Prime Minister confirm, regarding the maintenance of the stackers, whether Cargo Handling Corporation Limited has an in-house maintenance team and whether they are fully operational or it is just closed down? Because I understand that the Cargo Handling Corporation Limited employs a Technical Manager as well as a Maintenance Engineer.

The Prime Minister: I have answered to say that there is an in-house team that normally repairs those stackers that break down. But, unfortunately, there are certain spare parts that are not available due to the old age of some of the stackers and they have to be ordered, and it takes time. In fact, searches have to be made to find out where those spare parts are available. That is why it does take some time before they are able to be repaired, and I am informed that some of them are beyond repair. That is why we need to purchase additional stackers.

Mr Speaker: Time over! The Table has been advised that PQs B/221 and B/222 have been withdrawn. I have to announce that the Table has been advised that PQ B/257 will be replied by the hon. Vice-Prime Minister, Minister of Local Government and Disaster Risk Management.

Hon. Mrs Luchmun Roy!

COVID-19 LOCKDOWN – YOUTH & ELDERLY – ONLINE ACTIVITIES

(No. B/233) Mrs S. Luchmun Roy (Second Member for Port Louis North & Montagne Longue) asked the Minister of Youth Empowerment, Sports and Recreation whether, in regard to the youth and the elderly, he will state if his Ministry is providing online activities therefor, amid the Covid-19 pandemic lockdown.

Mr Toussaint: Mr Speaker, Sir, the resurgence of the COVID-19 pandemic has, once again, disrupted our way of living. Being fully aware of the impact that this pandemic has had on our citizens, especially on our youngsters, my Ministry has devised a series of online activities for them. These activities are meant to keep them active, focused, and entertained.

With your permission, I am tabling a list thereof.

Mrs Luchmun Roy: Thank you, Mr Speaker, Sir. Would the hon. Minister inform the House of the online platforms being used for such activities?

Mr Toussaint: We are using all the different digital platforms, for instance, the Facebook page of my Ministry, the website. So, these are the different platforms that the youngsters can use to participate in the different activities. We will be also having like you know, Mr Speaker, Sir, entrepreneurial courses and this will be on the zoom facility.

Mr Osman Mahomed: Some countries like Spain have had to do an assessment on the mental health of the youth in the short term and the long term because of confinement. Is the Minister envisaging to do the same for our youths in Mauritius?

Mr Toussaint: Mr Speaker, Sir, I think this does not fall under the mandate of my Ministry, however maybe my Ministry can collaborate with the Ministry of Health and Wellness and come up with such a suggestion.

Mr Speaker: Next question!

LA CROISÉE VALLÉE DES PRÊTRES - TRAFFIC DECONGESTION

(No. B/234) Mrs S. Luchmun Roy (Second Member for Port Louis North & Montagne Longue) asked the Minister of Land Transport and Light Rail, Minister of Foreign Affairs, Regional Integration and International Trade whether, in regard to La Croisée Vallée des Prêtres, he will state where matters stand as to the implementation of proposed measures for traffic decongestion thereat.

Mr Ganoo: Mr Speaker, Sir, I am informed by the Traffic Management and Road Safety Unit that following a survey carried out in connection with the precarious road conditions along the Bernardin de Saint Pierre Street, a series of traffic and road safety measures are being implemented thereat as follows –

- (i) Painting of slow road markings and stop lines;
- (ii) Fixing of stop traffic signs;
- (iii) Installation of five pedestrian crossings together with the associated traffic signs and road markings, and
- (iv) Provision of two raised tables along the Bernardin de Saint Pierre Street.

Mr Speaker, Sir, I am informed that the TMRSU has worked out a series of measures in order to alleviate traffic congestion at the junction of the Bernardin de Saint Pierre and the A.R. Mohamed Streets also commonly known as *La Croisée Vallée des Prêtres* which consist of, firstly, a link road to connect the Bernardin de Saint Pierre Street with the Military Road. Two options were proposed. Firstly, to connect to an existing track road and then, finally, connecting to the Military Road and, secondly, the setting up of three traffic lanes during morning and afternoon peak hours as from the junction Military Road and Mohamed Street up to junction of A.R. Mohamed Street to Cité Laval Street. This measure would increase the traffic volume entering Port Louis towards Kadhafi Square during the morning peak hours and thus would help reduce traffic congestion at junction Bernardin de Saint Pierre and A.R. Mohamed Streets. However, the second measure proposed was not favorably considered by the Police Authorities as it would have required that all on-street parking be banned along the Route des Pamplemousses Street during morning peak.

I am also informed that the Police had written to the Ministry of National Infrastructure and Community Development about traffic problems along Route des Pamplemousses and had requested to look into the possibility of constructing additional road connections from Vallée des Prêtres towards Route des Pamplemousses due to reasons mentioned below. Vallée des Prêtres has only one access exit road, namely Bernardin de Saint Pierre. The locality has, over the years, witnessed an influx of new residents with the setting up of numerous *morcellements* and concurrently a soaring population as well as an increase in vehicular traffic.

Thirdly, according to the Police, such state of affairs has worsen the traffic problem along Route des Pamplemousses which is the only main road connecting to Vallée des Prêtres.

Fourthly, in the absence of development in the road network, the situation will become unbearable in the near future with vehicles moving bumper to bumper. According to the RDA, there are no short term measures as such which can be implemented to relieve traffic congestion at Vallée des Prêtres junction. It has also informed that the construction of a new road will have to be addressed by way of a full-fledged feasibility study given the site constraints. The RDA has advised that a detailed traffic study be conducted by the TMRSU to identify the most appropriate solutions. The TMRSU is presently looking into the matter.

Mr Speaker, Sir, a committee will be set up comprising my Ministry, the TMRSU, the RDA, the Ministry of Housing and Land Use Planning and the Municipal City Council of Port Louis to look into the possibility of providing by-passes between Military Road, Route des Pamplemousses and Bernardin de Saint Pierre Street. A modelling exercise would then be carried out to assess the viability of any by-passes identified.

Lastly, Mr Speaker, Sir, I would like to thank the hon. Member who has given me a chance to enlighten the House about this issue and also who has raised the question at adjournment time in the past.

Mrs Luchmun Roy: Thank you, Mr Speaker, Sir. The hon. Minister mentioned about setting up of a committee. Can he give us a time frame about when the committee will be set up?

Mr Ganoo: This is a burning issue, I realized, Mr Speaker, Sir. The point is that all the traffic measures that had to be taken have been taken by the TMRSU. Now, the point is to set up this committee including the different stakeholders, I just mentioned. The solution is to look into the possibility of providing by-passes between Military Road, Route des Pamplemousses and Bernardin de Saint Pierre Street. So, I can assure the hon. Member that the setting up of the committee will be done as soon as possible.

Mr Ameer Meea: Mr Speaker, Sir, this issue I have raised in the House, I can say for more than 10 years now. It is a very long outstanding issue and as the hon. Minister rightly said there is no short term solution, there must be a Master Plan to address this issue. But in the meantime can I ask the hon. Minister if he can see to it that the only way to ease the traffic is to post Police Officers there in the morning and in the evening? It is the only present solution, if we can say, that can help to alleviate this problem.

Mr Ganoo: I asked the question to my officers, Mr Speaker, Sir, - this is a very pertinent question - I was given to understand that this is being done. Perhaps not on a regular basis but I will see to it that the proposal of the hon. Member is adhered to.

Mrs Luchmun Roy: Thank you very much, Mr Speaker, Sir. Can the hon. Minister state the areas around which the study took place as my colleague, hon. Lesjongard chaired numerous meetings with all the stakeholders as traffic congestion is a real problem in my constituency. It takes from Terre Rouge Roundabout till *la croisée de Vallée des Prêtres*. So, I think there is more like 30 lateral roads and then it causes a bottleneck effect at around *la croisée de Vallée des Prêtres*.

Mr Speaker: Put your question!

Mrs Luchmun Roy: So, my question is: would the hon. Minister consider to put maybe a traffic light also to alleviate the situation?

Mr Ganoo: Mr Speaker, Sir, the hon. Member is right. Vallée des Prêtres is a highly populated area now and the Vallée des Prêtres junction is congested at peak hours. There are many lateral roads, but I will leave it to the technicians who form part of this Committee to decide upon the modalities of how to proceed with the study with the hope that we will get a solution as quickly as possible.

BO DIGITAL COMPANY LIMITED - CONTAINERS - PURCHASE

(No. B/235) Mr A. Ameer Meea (Third Member for Port Louis Maritime & Port Louis East) asked the Minister of Energy and Public Utilities whether, in regard to the purchase of containers from Bo Digital Company Limited in 2020, he will, for the benefit of the House, obtain from the Central Electricity Board, information as to the number thereof, indicating the –

- (a) cost, and
- (b) purpose thereof.

Mr Lesjongard: Mr Speaker, Sir, I am informed by the Central Electricity Board that on 17 December 2019, bids were invited for the procurement of 6 high roof containers to be used for training purposes at the *Centre de formation et de perfectionnement professionnels* of the Central Electricity Board at Terre Rouge. The contract was awarded to Bo Digital Limited for the total amount of Rs2.3 m., exclusive of VAT. The Letter of Award was issued to Bo Digital Limited on 15 April 2020.

Mr Speaker, Sir, the Central Electricity Board has informed that following a Press article on 23 February 2021, which referred to the above-mentioned procurement exercise, the Internal Audit Department of the Central Electricity Board initiated an investigation into the procurement of the containers.

The Internal Audit Report which was submitted to the Central Electricity Board on 30 March 2021 had highlighted some disturbing elements in the procurement process leading to the award of this contract.

Mr Speaker, Sir, I have requested that an independent committee be set up to look into the matter and situate responsibilities in case of malpractices and irregularities.

Mr Ameer Meea: Mr Speaker, Sir, I must say I am relieved to hear the answer of the hon. Minister that an inquiry is being initiated at the level of CEB because, in fact, according to my information, the containers were first being bought by Neetee Selec from Velogic who fabricate the containers and then sold to Bo Digital, who, in turn, sell it again to CEB.

So, my question is - I don't know whether the hon. Minister would have this information - why is it that CEB did not buy the containers directly from Velogic? Why has there been a middle company because we all know what happens when there is a middleman...

Mr Speaker: You already put your question.

Mr Ameer Meea: ...a middle woman rather in this case, we know exactly what happened.

Mr Speaker: You already put your question.

Mr Lesjongard: Yes, Mr Speaker, Sir, I have taken note of what the hon. Member has stated. It is for certain reasons that I have requested to the Central Electricity Board to set up an independent enquiry because based on the Internal Audit Report, we have found out that there were some irregularities and the Independent Committee will look into all that.

Mr Speaker: Hon. Armance!

Mr Armance: May we find out from the Minister, since when is Bo Digital registered as a supplier to the CEB?

Mr Lesjongard: I don't have that information with me, Mr Speaker, Sir, unfortunately.

Mr Speaker: Hon. Ramful! Hon. Uteem, I am sorry.

Mr Uteem: May I know from the hon. Minister when has he informed CEB of the requirement to set up this Committee? When will this Committee be set up and whether the person going to chair that Committee has already been designated?

Mr Lesjongard: Mr Speaker, Sir, it was last week that I advised the Central Electricity Board to set up the Committee and it will be for the Central Electricity Board to appoint the person who will chair that Committee and its members and it will be for the Central Electricity Board to define the terms of reference of that Committee.

Mr Speaker: Hon. Juman!

Mr Juman: Thank you, Mr Speaker, Sir. Can the hon. Minister inform the House how many bidders were solicited for the supply of these containers, whether Bo Digital was among the solicited bidders?

Mr Lesjongard: No, Bo Digital was not among the solicited bidders.

Mr Speaker: Last supplementary!

Mr Ameer Meea: Yes, Mr Speaker, Sir, I won't dwell further into the details but just one information I would like to give the hon. Minister because...

Mr Speaker: You are giving information.

Mr Ameer Meea: My question is the answer that the hon. Minister gave to the House is that one container costs Rs383,000. Is he aware that Velogic - and I must correct - does not fabricate the container, imports it at the cost of Rs50,000. So, it was sold more than six times the value of the container.

Mr Speaker: Put the question!

Mr Ameer Meea: Is the hon. Minister aware of this issue?

Mr Lesjongard: Mr Speaker, Sir, it is for this reason that I have stated in this House following the question from the hon. Member that I have advised CEB to set up an Independent Committee to look into these issues that he has raised.

Mr Speaker: Hon. Juman!

Mr Juman: Given that Bo Digital was not among the bidders, hon. Minister, how can Bo Digital get the contract and get paid for?

Mr Lesjongard: Mr Speaker, Sir, it will be for the Committee to see what happened during this tendering exercise.

Mr Speaker: Time over! I suspend the sitting for one and a half hours.

At 1.00 p.m., the Sitting was suspended.

On resuming at 2.39 p.m. with Mr Speaker in the Chair.

Mr Speaker: Please be seated!

NEW ENT HOSPITAL - MEDICAL EQUIPMENT

(No. B/236) Mr A. Ameer Meea (Third Member for Port Louis Maritime & Port Louis East) asked the Minister of Health and Wellness whether, in regard to the new ENT Hospital, he will state the number of medical equipment, including CT Scans, that are currently not in use thereat following the conversion thereof into a Covid-19 Treatment Centre.

Dr. Jagutpal: Mr Speaker, Sir, I wish to inform the House that since 29 March 2020, the ENT Hospital has been converted into a Treatment Centre for the treatment of positive COVID-19 patients.

The medical equipment installed at the new ENT Hospital are as follows –

- (i) CT Scan Apparatus;
- (ii) Portable X-Ray machine;
- (iii) Electro Surgical Equipment;
- (iv) Shaver System-cum-Micro Drill;
- (v) Nerve Stimulator Apparatus;
- (vi) Automatic Clinical Chemistry Analyser;
- (vii) ENT Operating Microscope;
- (viii) Cochlear implant, and
- (ix) The BERA room equipment.

Mr Speaker, Sir, I wish to inform the House that both the CT Scan and the digital portal X-Ray machine are being used for diagnostic and therapeutic purposes for the positive COVID-19 patients by the X-Ray Department at the ENT Hospital. These two equipment are

of utmost importance in the prognosis of the pulmonary status of positive COVID-19 patients.

Mr Speaker, Sir, acute COVID-19 cases, essentially manifest themselves through respiratory distress. The WHO and in various international protocols, thoracic scanners are considered as a diagnostic tool whenever a patient's PCR is negative while his clinical status tends to indicate a probable infection.

In addition thoracic scans can be helpful to assess the initial status of a COVID-19 case with signs of respiratory distress and for the follow-up of a patient. In this case, thoracic scans are made at regular intervals to assess the evolution of the pulmonary status. Such scans are capital in order to adapt the therapeutic treatment administered to the patient.

Likewise the scanner is helpful in atypical cases. In the event of a brutal and sudden aggravation of a patient's state of health, a thoracic scan can be used to detect pulmonary embolism, pneumothorax and pulmonary interstitial emphysema.

As at date, CT scans were carried out on more than 100 patients and more than 1,000 X-Rays have been carried out on those positive COVID-19 cases.

Mr Speaker, Sir, I am further informed that the following medical equipment, not currently in use at the ENT Hospital have been shifted to Victoria Hospital. The Electro Surgical Unit which is a cutting and coagulation tool, the Shaver System-cum-Micro Drill which is a rotating device for cutting and aspiration of tissues, the Shaver System-cum-Micro Drill a rotating device for cutting and aspiration of tissues and the Nerve Stimulator, used to stimulate nerves. All these equipment are used for ENT Surgery.

Mr Speaker, Sir, I am also informed that the Automatic Clinical Chemistry Analyser which is an apparatus used for blood analysis and the ENT Operating Microscope which is used for microscopic surgery have not been relocated as they are costly and sensitive equipment which might get damaged due to relocation. However, the servicing of these two equipment are being done on a regular basis.

As regards the Cochlear implant and the BERA room equipment, these would be shifted to Floréal Mediclinic where a BERA room is already being set up.

Mr Ameer Meea: Mr Speaker, Sir, in the last Audit Report, mention is made for medical equipment for some Rs67 m. that have been delivered at the new ENT Hospital. Medical equipment already installed and commissioned were lying dormant and warranty

period has already lapsed. Is the hon. Minister aware of this remark of the Director of Audit and what actions had been taken?

Dr. Jagutpal: Mr Speaker, Sir, I request the hon. Member to come up specifically on this subject matter; I am ready to give all the information.

Mr Ameer Meea: My question, I think, was very specific. Medical equipment at ENT Hospital and the remark made by the Director of Audit is specific, Medical Equipment at ENT Hospital. I can't be more specific on that.

Dr. Jagutpal: Mr Speaker, Sir, I have already given the information on all equipment at ENT Hospital, what are the equipment that have been shifted to Victoria Hospital, and what are the equipment that have been used at ENT Hospital. Now, this question is more related to the Audit Report. I would be ready to answer the question on Audit Report if the question would be addressed to me.

Mr Doolub: Thank you, Mr Speaker, Sir. Can we know from the hon. Minister, over and above health services provided to COVID positive patients, are there any other health services currently available or dispensed at the new ENT Hospital? Thank you.

Dr. Jagutpal: Mr Speaker, Sir, all the other services that are supposed to be provided at ENT Hospital, namely Emergency, the OPD, the Outpatient and the Inpatient Department and the operation services have all been shifted to Victoria Hospital.

As regards the services like Maxillofacial services, they have been shifted to an Area Health Centre.

Mr Ameer Meea: Mr Speaker, Sir, as at July 2020, there was a long waiting list for CT scan and the new CT scan at ENT Hospital could not be used. Can I ask the hon. Minister what is the situation currently?

Dr. Jagutpal: Mr Speaker, Sir, in my reply, I already said that that's why the ENT has been converted into a Treatment Centre because of the CT scan. This CT scan is being used for patients suffering from COVID because it's a tool that is used for both the diagnostic and for other purposes of the treatment.

Now, as far as the waiting list is concerned, there is no waiting list at ENT Hospital for CT scan. If ever there is a waiting list, they have been catered for at the different centres where we have CT scans in all of our hospitals, except the Flacq Hospital where they are being directed to other hospitals.

For the CT scan, the emergencies are being catered in the different hospitals while for the waiting list, it's being done, again, in the different hospitals, but as per the appointment and rendezvous.

Mr Speaker: Next question!

PENSIONS - OVERPAYMENTS

(No. B/237) Mr A. Ameer Meea (Third Member for Port Louis Maritime & Port Louis East) asked the Minister of Social Integration, Social Security and National Solidarity whether, in regard to overpayments of pensions since July 2017 to date, she will state where matters stand as to the –

- (a) recovery thereof, and
- (b) measures taken to avoid similar recurrences on the passing away of the beneficiaries thereof or during prolonged absences thereof from the country.

Mrs Jeewa-Daureeawoo: Mr Speaker, Sir, I wish at the very outset to point out that overpayment of pension has, in fact, been accruing over the years since the implementation of the National Pension Fund in 1979. The amount of overpayment is, therefore, cumulative. It occurs mostly where my Ministry is not notified of any change in status of a beneficiary such as death, remarriage of widows or prolonged absence of a beneficiary from Mauritius.

It is good to note that it is my Ministry itself which discovers cases of overpayment dating back to several years due to a series of appropriate measures taken in this respect.

From July 2017 up to March 2021, the total amount of Basic Pensions paid stand at Rs100.1 billion. My Ministry has been able to discover an overpayment of Rs255.5 m. during that period representing 0.25% of the total amount of pensions paid.

So far out of the Rs255.5 m. of overpayment, Rs136.4 m. has already been recovered.

For the Financial Year 2017-2018, an amount of Rs39.6 m. has been recovered.

For the Financial Year 2018-2019, Rs38.1 m. recovered.

For the Financial Year 2019-2020, Rs31.6 m. and for the Financial Year 2020 to 31 March 2021, Rs27.1 m. has been recovered.

With regard to part (b) of the question, my Ministry has taken specific actions to address the issue of overpayment. They are as follows –

- (i) following several meetings, chaired by myself with representatives of the Civil Status Office in 2015, a mechanism was put in place for my Ministry to be notified of the death of beneficiaries on a daily basis through the InfoHighway Platform;
- (ii) since October 2015, we also get information from the Civil Status Office on the change in status of widows who are residing in Mauritius again on a daily basis through the same Platform;
- (iii) since October 2018, timely information relating to the travel movements of beneficiaries are obtained from the Passport and Immigration Office through the same Platform, and
- (iv) we also receive information of beneficiaries over 60 years who have left Mauritius and been abroad for more than 6 months. As you may be aware if a beneficiary stays abroad for more than 6 months, his pension is stopped.

We have also sought the advice of the Attorney General's Office to write off overpayments which are already time barred by three years under Article 2279 of the *Code Civil Mauricien*. All the cases have been sent to the Internal Control Unit, Ministry of Finance and approval has been obtained for our Ministry to take actions to write off some cases.

My Ministry is also working on an e-social security project. In fact, being given that the project has huge cost implications, the approval of Cabinet was sought for its implementation and also in view of the complexity of the said project, the Ministry of Finance has advised my Ministry to enlist the services of an independent consultant to oversee the project and as such the needful is being done.

Mr Ameer Meea: Mr Speaker, Sir, I have two supplementary questions if you would allow me and then you can pass on to my other colleagues. Mr Speaker, Sir, despite the amount that has been recovered, overpayment keeps on increasing year by year because there are new cases every year and on 30 June 2020, the Attorney General's Office advised the Ministry that where overpayments are due to deliberate action, negligence of officers, necessary disciplinary measures be taken against those officers. Therefore, can I ask the hon. Minister where matters stand in relation to this recommendation from AG's Office?

Mrs Jeewa-Daureeawoo: Well, the recommendation of the AG's Office is if there is any case of *maldonne* from the officers, this is not the case. I beg to differ from your opinion. The issue of overpayment is a very complex issue. You need to understand as I have said in

my reply, cases of overpayment is being detected by my Ministry itself. We are detecting old cases dating back more than a decade and we are having new cases also.

You must not forget that there has been a considerable increase in the pension paid to our senior citizens. So, this inflates, of course, the amount of overpayment but I must also say even though the amount of overpayment is increasing, but if you see the trend, you will realise that there is a decrease in the number of cases. For example, for the year 2017-2018 we have had 2,085 cases whereas for the Financial Year 2020 up to 31 March of this year, my Ministry has only 1,189 cases.

Mr Ameer Meea: Mr Speaker, Sir, I will kindly recommend the hon. Minister to read the Report of the Director of Audit.

Mr Speaker: No! Question!

Mr Ameer Meea: In fact, there are 5 pages...

Mr Speaker: The second supplementary!

Mr Ameer-Meea: ... and the heading itself is no improvement regarding control of overpayments.

Mr Speaker: No debate, question!

Mr Ameer Meea: So, my question to the hon. Minister, is she aware that mention was made in relation to two cases, two dead cases whereby Rs3.7 m. were paid for more than 27 years to these two cases? Rs3.7 m. paid for 27 years where the people have already passed away! Is the hon. Minister aware of this shocking information and what has been done at the level of her Ministry?

Mrs Jeewa-Daureeawoo: Well, of course, Mr Speaker, Sir, I am aware of the observations made in the Audit Report. I must say that as soon as the Audit Report was released, I took cognizance of same. Discussions have already started with the Commissioner and other officers at the level of my Ministry. As I have said in my reply, a series of measures has already been taken to address the whole issue of overpayment. We are taking the Audit Report very seriously. We are working on new specific measures to address this particular issue, but you need also to mention that in the Report, the Audit Officer mentioned that there have been measures and the measures taken are partly effective.

Mr Speaker: Hon. David!

**ENVIRONMENT PROTECTION (BANNING OF PLASTIC BAGS) REGULATIONS
2015 - CONSULTATIONS**

(No. B/238) Mr F. David (First Member for GRNW & Port Louis West) asked the Minister of Environment, Solid Waste Management and Climate Change whether, in regard to Environment Protection (Control of Single Use Plastic Products) Regulations 2020 and the Environment Protection (Banning of Plastic Bags) Regulations 2020, he will state the number of consultations held prior to the coming into operation thereof.

Mr Ramano: M. le président, face à l'inquiétude croissante concernant l'ampleur de la pollution plastique et les impacts environnementaux et sanitaires qui en résultent, le programme gouvernemental 2020-2024 prévoit de faire de Maurice un pays sans plastique dans les délais les plus proches.

Le 28 février 2020, l'approbation du gouvernement a, en conséquence, été demandée et obtenue pour l'introduction de règlements concernant l'interdiction des produits en plastique non biodégradables à usage unique; et la révision du *Environment Protection (Banning of Plastic Bags) Regulations 2015* dans le but de réduire le nombre de déchets plastiques générés dans le pays.

M. le président, je suis informé que, conformément à la décision du gouvernement, pas moins de seize (16) réunions consultatives ont eu lieu avec diverses parties prenantes, publiques et privées, dont le '*Ministry of Finance, Economic Planning and Development*', le '*International Trade Division of the Ministry of Foreign Affairs, Regional Integration and International Trade*', le bureau de l'*Attorney-General*, le département des douanes de la *Mauritius Revenue Authority*, la Chambre de Commerce et d'Industrie, la *Mauritius Export Association* et les fabricants et entreprises locaux de plastique, et ce, avant l'entrée en vigueur de l'*Environment Protection (Control of Single Use Plastic Products) Regulations 2020*. Outre ces réunions en personne, des consultations ont également eu lieu par voie électronique et par l'échange de diverses correspondances.

L'*Environment Protection (Control of Single Use Plastic Products) Regulations 2020* qui a été introduit le 15 juillet 2020, prévoyait la partie I du '*Second Schedule*' qui consiste en une liste de produits en plastique non biodégradables à usage unique, qui entrerait en vigueur à partir du 15 janvier 2021, tandis que la partie II du '*Second Schedule of the Regulations*' spécifie d'autres produits en plastique non biodégradables à usage unique pour lesquels un moratoire jusqu'au 14 avril 2021 a été prévu.

M. le président, en ce qui concerne l'*Environment Protection (Banning of Plastic Bags) Regulations 2020* qui a abrogé et remplacé l'*Environment Protection (Banning of Plastic Bags) Regulations 2015*, je suis informé qu'une dizaine (10) réunions consultatives ont eu lieu avec les parties prenantes, notamment les fabricants de plastique locaux, la *Mauritius Export Association*, la Chambre de Commerce, la *Mauritius Revenue Authority* et aussi le *Ministry of Commerce and Consumer Protection*.

À un niveau plus opérationnel, M. le président, je suis informé que des discussions concernant les deux règlements ont été menées lors de plusieurs réunions du '*Environment Coordination Committee*' qui comprend des représentants de divers organismes publics, y compris les autorités locales, ainsi qu'au niveau du '*Committee of Environment Liaison Officers*' qui se compose de représentants de divers organismes publics. J'ai également rencontré le Commissaire de Police au sujet de l'application de ces règlements.

De plus, avant l'entrée en vigueur des deux règlements, des consultations ont eu lieu avec les petites et moyennes entreprises et les fabricants locaux pour assurer la disponibilité d'alternatives biodégradables, compostables et respectueuses de l'environnement sur le marché. Je suis informé que, au 15 avril 2021, quatre-vingt-dix (90) demandes d'enregistrement d'importateurs et de fabricants de produits en plastique biodégradable sous le *Environment Protection (Control of Single Use Plastic Products) Regulations 2020* et cent quinze (115) demandes de l'enregistrement en vertu du *Environment Protection (Banning of Plastic Bags) Regulations 2020* ont été reçues par mon ministère et cela, M. le président, démontre ainsi une évolution positive vers des alternatives compostables et biodégradables.

M. le président, permettez-moi aussi de souligner que mon ministère a reçu des représentations de la Chambre de Commerce et aussi de la MEXA concernant l'*Environment Protection (Control of Single Use Plastic Products) Regulations 2020* et dans un esprit d'ouverture, de réactivité, plusieurs séances de travail ont été organisées avec toutes les personnes concernées.

À la lumière des propositions reçues et compte tenu de l'environnement économique difficile résultant de la pandémie de COVID-19, le 08 janvier 2021, le gouvernement a accepté de prévoir un moratoire additionnel exceptionnellement pour certains produits dont je vais énumérer la liste et c'est un moratoire qui est prévu jusqu'au 14 avril 2021. Ces produits sont –

- a) les pailles en plastique, y compris les pailles en plastique scellées faisant partie intégrante de l'emballage d'un autre produit, et aussi
- b) des plateaux en plastique et récipients avec couvercle en plastique utilisés pour l'emballage de produits frais, surgelés, précuits ou cuits, tels que fruits, légumes, faratas, pâtisseries et sandwichs. Ces emballages sont communément appelés comme les *hinch containers*.

Le gouvernement a également accepté un moratoire jusqu'au 14 janvier 2022 concernant l'interdiction des produits en plastique, ce qu'on appelle les *Modified Atmosphere Packaging*, notamment pour les gobelets en plastique et bols en plastique utilisés uniquement pour l'emballage de produits alimentaires, tels que produits laitiers, yaourts, glaces et desserts et aussi en ce qui concerne les "*Modified Atmosphere Packaging*"; cela concerne les produits alimentaires frais, cuits, précuits tels que viande, fruits de mer, etc.

M. le président, un communiqué a été publié par mon ministère le même jour, c'est-à-dire, le 08 janvier 2021, et pour informer les parties prenantes et le grand public de nouvelles extensions et pour assurer une communication ouverte et pour la bonne mise en œuvre du règlement, un groupe de travail impliquant les officiers de mon ministère et des représentants de la Chambre du Commerce et aussi du MEXA a été mis en place.

Mr David: Merci, M. le président. Nous sommes 70 membres dans cette Chambre et je suis certain que les 70 parlementaires sont unanimement contre la pollution plastique dans notre pays. Pour autant, je ne peux m'empêcher de constater que la loi sur les *Single Use Plastic Products* est entrée en vigueur sous un délais de six mois pour une liste de 10 produits au cours d'une année durement frappée par la pandémie et surtout par la difficulté de nos fabricants locaux de se déplacer à l'étranger pour étudier de nouveaux outils de production conformes à la nouvelle loi. Le ministre peut-il nous dire donc quelles ont été les mesures prises par le gouvernement pour accompagner les entreprises locales dans cette transition afin d'éviter les fermetures d'usines et des licenciements?

Mr Ramano: M. le président, permettez-moi de faire une remarque pour dire que l'énumération de la liste des produits et aussi le *cut-off date* qui a été prévu par le ministère de l'Environnement suit une logique très simple que je souhaiterais approfondir là-dessus.

M. le président, tout changement requiert une certaine adaptation. C'est la raison pour laquelle les *Regulations* qui datent de juillet 2020 ne sont entrées en vigueur qu'en janvier

2021 pour les *Single Use Plastic* ; mars 2021 pour les sacs en plastique et avril 2021 pour les *straws* et autres *hinch containers* que je viens de mentionner.

M. le président, l'interdiction des sacs en plastique date de janvier 2016. Nous savons tous pertinemment bien que si les sacs en plastique se trouvent aujourd'hui toujours sur le marché, c'est parce que quelques fabricants persistent à violer la loi. Ne soyez pas surpris, M. le président, de découvrir que ceux qui font généralement - je ne suis pas en train de généraliser, mais il y a quelques-uns - un peu plus de bruit, sont toujours ceux qui ont été verbalisés à plusieurs reprises pour infraction à la loi depuis janvier 2016.

M. le président, aucun compromis n'est possible dans la protection de l'environnement ou même dans la violation de la loi. Si nous voulons protéger les générations futures, il faut avoir, je dirais, la force de ses convictions et il fallait venir de l'avant avec un *cut-off date*.

M. le président, que ce soit dans l'élaboration de la liste des produits interdits ou encore la fixation des *cut-off dates*, nous nous sommes assurés, après pourparlers avec toutes les parties prenantes, que deux critères fondamentaux soient respectés –

- (1) l'existence des produits alternatifs sur le marché, et
- (2) que ces produits alternatifs soient accessibles à des prix raisonnables.

M. le président, je suis personnellement satisfait aujourd'hui que les consommateurs et aussi les petites et moyennes entreprises mauriciennes se sont adaptés avec cette exigence et que requiert la protection de l'environnement.

Mr David: Le ministre peut-il déposer à la Chambre la liste des importateurs et la liste des fabricants locaux de produits en plastique biodégradables et à usage unique, et qui sont déjà enregistrés auprès de son ministère?

Mr Ramano: Oui, mais j'ai déjà fait mention, M. le président, qu'il y a, au 15 avril 2021, 90 demandes d'enregistrement d'importateurs et de fabricants de produits en plastique biodégradable, ce qu'on appelle le *Control of Single Use Plastic* et aussi 115 demandes d'enregistrement. Moi, je ne vois aucun empêchement à cela, M. le président, et bien sûr, cela sera fait d'une façon transparente.

Ms J. Bérenger: Merci, M. le président. Pourrait-on savoir qu'est-ce qui est fait au niveau du ministère pour contrôler l'importation de plastique auprès des commerçants réfracteurs?

Mr Ramano: M. le président, j'ai eu personnellement une séance de travail avec le Commissaire de Police. Il faut bien le savoir, et aussi le dire, que les *Enforcement Officers* ne sont pas limités aux officiers du ministère de l'Environnement, nous avons aussi les officiers de la force policière qui sont regroupés sous la Police de l'Environnement. Les différents inspecteurs, les différents *Enforcement Officers* sont aussi basés au niveau des différentes collectivités locales. Les membres de la force policière qui sont basés dans les différentes stations de police aussi sont considérés comme des *Enforcement Officers*. Donc, nous avons eu plusieurs séances de travail avec toutes ses entités pour s'assurer de la bonne marche pour la mise en application de toutes ces Régulations et, à ce jour, je dois dire qu'il y a eu un certain *compliance* des différentes parties prenantes et moi-même je suis assez satisfait de la réaction des grandes surfaces et aussi des petits commerces pour s'adapter avec les produits alternatifs. Je dois dire aussi qu'il y a une bonne collaboration entre les grandes surfaces, les boutiques et aussi les petites et moyennes entreprises en ce sens, M. le président.

Mr Speaker: Last supplementary!

Mr Osman Mahomed: Yes, thank you. Being given that the Minister has himself mentioned "*aucun compromis en ce qu'il s'agit de la protection de l'environnement* », can I ask him what are his plans for PET bottles which are also Single Use Plastic Products?

Mr Ramano: Oui, je remercie l'honorable membre pour sa question, M. le président. L'honorable membre a parfaitement raison de soulever la question. M. le président, nous sommes à produire 125 millions à 130 millions de bouteilles en PET chaque année. Je l'ai moi-même dit, ce n'est pas une question de politique de deux poids deux mesures, il faut absolument considérer la pollution plastique sous tous ses aspects. Les bouteilles en plastique font parties intégrantes de la pollution dans ce pays et je n'hésiterai pas à qualifier que les producteurs des bouteilles en plastique sont les gros pollueurs, malheureusement.

Selon les Régulations qui datent de 2001, les embouteilleurs ont l'obligation de s'enregistrer avec le ministère de l'Environnement et aussi de collecter les bouteilles en plastique. Mais c'est avec regret que je le dis, nous avons constaté que de ces 125 millions à 130 millions de bouteilles en PET, il y a seulement 40% qui sont collectées par les différents embouteilleurs et les 60% qui restent sont malheureusement laissées dans la nature et moi je considère que cela est quelque chose d'inacceptable. Nous sommes en train de travailler avec les différents embouteilleurs, nous sommes en train de travailler sur les différents types de propositions. Il y a plusieurs propositions qui sont venues de l'avant, y compris ce principe de

consignment, dépôt refund ; nous sommes en train de travailler sur tous les aspects et je dois dire que nous sommes arrivés à un stage assez avancé dans nos discussions avec les différents embouteilleurs. Dans un proche avenir, je viendrai de l'avant avec une déclaration dans ce sens.

Mr Speaker: The Table has been advised that PQ B/225 has been withdrawn.

Next question!

MEDICAL WASTES - COLLECTION - 2018-2020

(No. B/239) **Mr F. David (First Member for GRNW & Port Louis West)** asked the Minister of Health and Wellness whether, in regard to medical wastes, he will state the quantity thereof collected in 2018, 2019 and 2020, respectively, indicating the –

- (a) quantity thereof presently in stock, and
- (b) collection, treatment and disposal processes thereof.

Dr. Jagutpal: Mr Speaker, Sir, medical waste is any waste that is generated by a by-product of healthcare work at doctors, surgeries, dentists, hospitals and laboratories. It includes any material that could come into contact with the body during diagnosis, drug administration or any type of treatment. It is likely to be infectious or potentially infectious.

I wish to inform the House that hazardous wastes are defined under the Environment Protection Act and listed under the Environment Protection (Standards for Hazardous Wastes) Regulations 2001 as wastes that have the potential to cause harm or damage to human health and the environment due to their hazardous properties. These include waste from diagnosis, treatment or prevention of disease and natal care.

I am also informed by the Ministry of Environment that, following a request made by my Ministry for the disposal of medical wastes at the Mare Chicose Landfilling, approval was granted for the disposal of 800 tonnes in 2018, 815 tonnes in 2019 and 946 tonnes in 2020.

Mr Speaker, Sir, as regards the collection, treatment and disposal of medical wastes, I wish to inform the House that all the medical wastes such as swabs, cotton, gloves, drips, sanitary items, catheter and stomach bags, blood bags, intravenous tubing, dressing in the wards/units are removed on a daily basis and stored in yellow plastic bags in clinical sheds. All plastic bags are sealed and labelled before disposal in the clinical sheds.

The medical wastes are collected by a private contractor twice weekly or as and when required. Same are sent to Mare Chicose Landfilling for disposal following approval obtained from the Solid Waste Management Division of the Ministry of Environment, Solid Waste Management and Climate Change.

Mr David: Mr Speaker, Sir, almost all, if not all imported PPEs are made of plastic. *Je vais faire le lien avec ma question précédente.* May I know from the hon. Minister if any effort is being made by his Ministry to seek non-plastic PPEs or biodegradable plastic ones?

Dr. Jagutpal: Mr Speaker, Sir, so far we are using all the PPEs made of plastics. We already have in stock those PPEs in plastics, but in the future, I think we have to think on these lines to have disposable PPEs so that we do not have to incinerate them.

Mr Speaker: Hon. Uteem!

Mr Uteem: The hon. Minister just mentioned that for medical waste, there is a private operator who comes and collects those wastes and goes to Mare Chicose. Is he aware that in some public health institutions, hospitals, those medical wastes are actually incinerated? This is causing concern. I have raised it in the past in this House and this practice seems to be continuing.

Dr. Jagutpal: Yes, Mr Speaker, Sir, so far, from the information that I have, it is only at the Brown Sequad Mental Health Care Centre that there is an incinerator that is working and it is processing the medical wastes that have to be incinerated.

Mr Speaker: Hon. Mrs Luchmun Roy!

Mrs Luchmun Roy: Thank you very much, Mr Speaker, Sir. The hon. Minister mentioned about the disposable wastes going to Mare Chicose. Can he inform the House about the protocol adopted by his Ministry during this process?

Dr. Jagutpal: Mr Speaker, Sir, the protocol adopted for the medical waste, I think I have already highlighted it in my reply, but for medical waste involved from different quarantine centres or treatment centres, all those wastes are being incinerated.

Mr Speaker: Hon. Juman!

Mr Juman: Thank you, Mr Speaker, Sir. Can the hon. Minister inform the House whether all hospitals have a medical waste incinerator? He just said only one is operational at Brown Sequad Hospital, but what about other hospitals?

Dr. Jagutpal: Mr Speaker, Sir, as the hon. Member just stated, in other hospitals, especially where there are people residing in the same region, especially at Dr. A.G. Jeetoo Hospital, the incinerator is not operational. But at the same time, wastes that have to be incinerated are sent to the Incinerator of Veterinary Services Division of the Ministry of Agro-Industry and Food Security for incineration.

Mr Speaker: Hon. Dr. Gungapersad, next question!

PSAC, NCE, SC & HSC EXAMINATIONS 2021 – COVID-19 POSITIVE STUDENTS

(No. B/240) Dr. M. Gungapersad (Second Member for Grand’Baie & Poudre d’Or) asked the Vice-Prime Minister, Minister of Education, Tertiary Education, Science and Technology whether, in regard to the Primary School Achievement Certificate, the National Certificate of Education, the Cambridge School Certificate and Higher School Certificate Examinations 2021, she will state the number of –

- (a) students who –
 - (i) could not/cannot take part therein on account of being tested Covid-19 positive, and
 - (ii) took part/are taking part therein in quarantine centres, and
- (b) supervisors, coordinators, markers and invigilators who were tested Covid-19 positive and/or were admitted in quarantine centres as a result of contact tracing exercises.

The Vice-Prime Minister, Minister of Education, Tertiary Education, Science and Technology (Mrs L. D. Dookun-Luchoomun): Mr Speaker, Sir, I am informed that a total of 19 students were tested positive for COVID-19 and were on treatment. As such, they could not sit for their respective examinations. The breakdown is as follows –

• PSAC	-	2 students
• NCE	-	9 students
• SC	-	4 students
• HSC	-	4 students
Total	-	19 students

As for part (a) (ii) of the question, 53 candidates were admitted in quarantine centres. Arrangements were made for them to sit for their examinations within a designated

quarantine examination centre under strict health, sanitary and examination conditions. This group of 53 candidates comprised 16 students from PSAC, 15 NCE students, 17 candidates for SC, and 5 for HSC.

Mr Speaker, Sir, in reply to part (b) of the question, one designated supervisor for the HSC examinations was tested COVID-19 positive. He was involved in a briefing session prior to the start of the examinations and as a result, six invigilators were quarantined.

As regards PSAC examination, one invigilator was found to be COVID-positive following a random test effected in Highlands. The result was obtained on the evening of 06 April and one reader has been placed in quarantine and the first two PCR tests carried out were negative.

Dr. Gungapersad: Thank you, hon. Minister. Like me, you must also have taken cognizance of the fact that there are around 1000 PSAC and 400 NCE students, apart from those you have mentioned, who did not take part in the exams, mainly because of the fear of contracting the virus. Can you inform the House if the MES has planned any resit for these students so that they are not penalised in whatsoever way, and if yes, when will these exams be held?

Mrs Dookun-Luchoomun: Mr Speaker, Sir, the MES has not decided yet upon this particular issue, but one thing is for sure that one can only resit for an exam if that student has taken part in the exam. You cannot have a resit if you have not taken part in the exams.

Dr. Gungapersad: Since we are at it, hon. Minister, kindly inform the House when will the PSAC and NCE results be made official?

Mrs Dookun-Luchoomun: The NCE results would be made official by most probably the end of May. And I would like, Mr Speaker, Sir, if you allow me, to state that when we talk about PSAC students, out of the 1105 students who were mentioned not to have sat for the exams, 200 students were, in fact, school candidates, the remaining ones were private candidates, or candidates from secondary schools, attempting for PSAC.

Mr Speaker: Next question!

**COVID-19 PANDEMIC 2020 - PRIMARY & SECONDARY SCHOOL
PREMISES – SANITIZATION CONTRACTS**

(No. B/241) Dr. M. Gungapersad (Second Member for Grand’Baie & Poudre d’Or) asked the Vice-Prime Minister, Minister of Education, Tertiary Education, Science and Technology whether, in regard to the sanitary protocols established amid the Covid-19 pandemic in 2020, she will state who is responsible for the sanitization of the primary and secondary school premises, indicating if contracts were awarded therefor and, if so, table the list of the contractors, indicating in each case, the –

- (a) terms and conditions ;
- (b) contract value;
- (c) date of award of contract, and
- (d) eligibility criteria of the contractor.

The Vice-Prime Minister, Minister of Education, Tertiary Education, Science and Technology (Mrs L. D. Dookun-Luchoomun): Mr Speaker, Sir, with your permission, I shall make a combined reply to PQs B/241 and B/282 as both relate to the same subject matter.

In the wake of the COVID-19 pandemic in Mauritius in March 2020, schools were closed as from 19 March and reopened on 01 July 2020. The Ministry worked out a general preparedness plan in consultation with the Ministry of Health and Wellness for the reopening of all schools and for cleaning of the departments of the Ministry. I wish to point out that a series of actions were taken by the Ministry to ensure a safe and secure environment. For example, full sensitisation of all sanitary precautions to be adopted by student community and the school personnel, flyers on precautionary measures against COVID-19 were distributed in all educational institutions, as well as posters. Health and sanitary guidelines were formulated with the collaboration of the Ministry of Health and Wellness to ensure adequate health and sanitary measures are taken throughout the academic year. Guidelines included temperature checks upon arrival at schools, the mandatory use of face masks by students and personnel, frequent cleaning and disinfection of the classrooms and high-touch places amongst others to ensure protection. Rapid PCR testing was carried out for all teachers and non-teaching staff to ensure health and safety of all students upon resumption. A series of sensitisation workshops were also held with the collaboration of the World Health Organisation and the Ministry of Health and Wellness, with members of school health clubs on infection prevention and control of Covid-19.

Mr Speaker, Sir, a procurement exercise was also launched for the cleaning of all Government and aided primary schools and State Secondary Schools on a one-off basis by the Ministry. Bids were invited from registered contractors for cleaning and disinfection. Contracts were awarded to the following two service providers, namely: Rolington Company Ltd for 105 schools in Zone 1, for the total sum of Rs1,349,000.00; 92 schools in Zone 2, for a total sum of Rs1,248,000.00, and the second contractor was ELM Services Ltd; 73 schools in Zone 3, for a total sum of Rs1,860,434.00; 56 schools in Zone 4, for the total sum of Rs1,680,847.00. The contract included transport, disinfection of all furniture, doors and windows of classrooms, offices, staircases, corridors, toilets, amongst others, in all the schools. The contract also included the warehouse of the Ministry.

In addition, Mr Speaker, Sir, the Ministry has also an ongoing contract with Mauri-Facilities Management Co. Ltd, a Government-owned company, under the aegis of Landscape, engaged in daily cleaning of all our primary and secondary schools. Cleaning and disinfection are also carried out by the general workers and office auxiliaries.

Mr Speaker, Sir, for the second wave of COVID-19 this year, schools were closed as from 10 March 2021. The cleaning and disinfection of schools during the period of examinations have been done as per the recent guidelines from the Ministry of Health and Wellness by Mauri-Facilities Management Co. Ltd and the personnel of the Ministry. No other contract was awarded for one-off sanitisation and disinfection by my Ministry.

Dr. Gungapersad: Given that we have to learn to adapt to new sanitary realities in the wake of COVID-19 pandemic, is the hon. Minister considering equipping our schools with sanitisation tunnels for the safety and security of our children and staff in the days to come?

Mrs Dookun-Luchoomun: Mr Speaker, Sir, all the measures taken were guided by the Ministry of Health and Wellness and the use of sanitizers, actually is being done, but then no sanitising tunnel has been planned for the near future.

Mr Speaker: Next question!

Mr Armance: On a point of order, Mr Speaker, Sir. The hon. Minister replied my PQ together with the PQ of hon. Dr. Gungapersad, and you did not even give me a chance to put one supplementary question.

Mr Speaker: Did you express ...

Mr Armance: Of course, I did.

Mr Speaker: I am sorry for that, I did not...

Mr Armance: If I may?

Mr Speaker: Please, go ahead!

Mr Armance: Can I know from the hon. Minister, for the procurement exercise, whether there has been due diligence on the contractor to avoid any recurring problem that occurs last time during the confinement, and whether the contractors are well qualified to perform sanitisation of the buildings and schools?

Mrs Dookun-Luchoomun: Mr Speaker, Sir, we did not have any problem at the level of my Ministry during the confinement period and the contractors who had sent their bids were all registered contractors at the level of the Ministry.

Mr Speaker: Next question!

SOCIAL REGISTER OF MAURITIUS - GRADES 10 TO 13 STUDENTS - TABLETS

(No. B/243) Dr. M. Gungapersad (Second Member for Grand’Baie & Poudre d’Or) asked the Minister of Social Integration, Social Security and National Solidarity whether, in regard to the project for the distribution of 2570 tablets for students of Grades 10 to 13 of families registered on the existing Social Register of Mauritius, as provided for in the Budget 2020-2021, she will state where matters stand, indicating the –

- (a) number of beneficiaries thereof, and
- (b) name of the contractor therefor, and
- (c) cost thereof.

Mrs Jeewa-Daureeawoo: Mr Speaker, Sir, I am informed that as at December 2020, there were some 1,124 children attending Grades 10 to 13 classes on the current database of the Social Register of Mauritius. The National Empowerment Foundation has however ordered 1500 tablets to cater for both students on the current database and new entrants.

With regard to part (a) of the question, I am informed by the National Empowerment Foundation that the consignment which reached Mauritius on 13 April 2021 has already been cleared by the Customs Department. Testing and commissioning of the said tablets ordered has started yesterday.

As for parts (b) and (c) of the question, I am informed by the National Empowerment Foundation that the contract for the supply, testing and commissioning of the said tablets was awarded on 25 January 2021 to Leal Communications & Informatics Ltd for the contract value of Rs17,279,152, inclusive of VAT.

Dr. Gungapersad: Thank you, hon. Minister. I would like one clarification from the hon. Minister. Once these tablets are distributed to these children, to these kids, who does the follow-up? Is it the Ministry of Social Integration, your Ministry, or the Ministry of Education?

Mrs Jeewa-Daureeawoo: The National Empowerment Foundation.

Dr. Gungapersad: Has there been any precaution taken so that these students, to whom these tablets are distributed, they are conversant with using this pedagogical tool?

Mrs Jeewa-Daureeawoo: Well, of course, if the students need support to use the tablets, we will do the needful.

Dr. Gungapersad: And once these tablets have been distributed, hon. Minister, who is responsible for the maintenance, update, et cetera of these tablets?

Mrs Jeewa-Daureeawoo: NEF itself.

Mr Speaker: Next question!

CONSTITUENCY NOS. 15, 16, 17 - LOCKDOWN - VEGETABLE PLANTERS

(No. B/244) Mr P. Assirvaden (Second Member for La Caverne & Phoenix) asked the Attorney-General, Minister of Agro-Industry and Food Security whether, in regard to the present lockdown and the impact thereof on the vegetable planters, namely, in Constituency Nos. 15, 16, 17, he will state the –

- (a) measures taken by his Ministry to alleviate the difficulties presently faced by the latter, and
- (b) proposed financial and other schemes put in place by his Ministry in favour thereof, if any.

Mr Gobin: Mr Speaker, Sir, with regard to part (a) of the question, I will list down the measures taken to alleviate the hardship of the planters in the current lockdown period. As the House will appreciate, planters and breeders, not only from the Constituency Nos. 15, 16 and 17, but from all over the island, have been authorised to use their farmer's card to attend

to their fields and farms, despite the temporary Restriction of Movement Order issued for the current lockdown period.

Secondly, Mr Speaker, Sir, the validity period of those farmers' cards which had expired have been automatically extended until June of 2021 in order to avoid farmers having to proceed to the Small Farmers Welfare Fund to renew their respective farmer's card.

Thirdly, Mr Speaker, Sir, despite the fact that Constituency nos. 15, 16 and 17 were, at some stage, declared Red Zone with strict restrictions of movement on the inhabitants, those planters residing in that Red Zone, were nevertheless authorised to travel to their fields using their planter's card.

Furthermore, and fourthly, Mr Speaker, Sir, taking into consideration the volume of vegetables under production in those regions and in order to support their economic activity, my Ministry, in collaboration with the Mauritius Police Force, organised, for the planters to trade their harvested products on Tuesdays and Fridays, that is, on those days on which auction normally is carried out at Vacoas Market. Trading of fruits and vegetables were therefore carried out, in the first instance, at seven Police checkpoints situated around the boundaries of the Red Zone. A first exercise was carried out on 19 March, from five in the morning to eight in the morning. Based on the number of trading activities, the arrangements were reviewed and two sites only were retained, namely at Wooton and secondly at Petrin. The arrangements were again reviewed as from 06 April, and only Wooton, which is adjacent to the site of the National Wholesale Market, has been retained, and the hours have been extended until nine in the morning. I am informed that on each day, there are about 10 to 15 planters, and some 8 vegetable sellers and intermediaries at the site.

Fifth, Mr Speaker, Sir, planters of the red zone have been given special access by the Police to leave the red zone and to proceed to the Agricultural Marketing Board to purchase potato seeds, starting this month.

Mr Speaker, Sir, with regard to part (b) of the question, I wish to reassure the planters' community and the House that at the level of my Ministry, several schemes are already in place, which are of direct benefit to planters and are continuously being implemented. Moreover, Government is providing financial support indiscriminately to those who qualify for the Self-Employed Assistance Scheme or Wage Assistance Scheme, and therefore, planters and breeders who are eligible can also take advantage of these facilities.

Finally, Mr Speaker, Sir, there are several proposals from the farming community which have been received in the context of Budget 2021-2022 and they are currently being studied and will be forwarded to the Ministry of Finance.

Mr Assirvaden: M. le président, l'honorable ministre est sûrement au courant que non seulement les planteurs ont souffert pendant le confinement, et surtout dans la zone rouge, à Bonne Terre, Carreau Laliane, Clairfonds, et autres, mais ils se sont confrontés aussi à des difficultés financières dues aux augmentations des engrais, du sel et des semences. Le ministre, envisagerait-il de supprimer certaines taxes sur la TVA pour alléger leur fardeau ?

Mr Gobin: It is premature for me to give a direct reply at this stage, Mr Speaker, Sir.

Mr Assirvaden: M. le ministre, peut-il informer la Chambre si la DBM peut aider ces planteurs de légumes, surtout dans la région de Bonne Terre, dans le numéro 15, et est-ce que la DBM peut proposer des prêts à ces planteurs qui ont perdu - il faut bien le dire dans la zone rouge - des tonnes et des tonnes de légumes pendant le dernier confinement ?

Mr Gobin: There are a number of schemes which are already in place, Mr Speaker, Sir. I can recall at least 10 such schemes which are in operation in collaboration with other institutions. I have in mind, for example, the Sheltered Farming Scheme, rain water harvesting, scheme for purchase of equipment, food protection, for banana bagging, for the upgrading of livestock farm, for pasture development, for cattle breeding, goat and sheep breeding, for the acquisition of CCTV cameras, as well as for the promotion of beekeeping, I can name a few more. And there are still budgetary provisions for these schemes and these will continuously be implemented. Over and above, as I said again, there are other proposals being submitted to the Ministry of Finance.

Mr Speaker: Hon. Ms Anquetil!

Ms Anquetil: Thank you, Mr Speaker, Sir. Can the hon. Minister state whether a survey has been conducted to estimate crops that were left unharvested in the fields?

Mr Gobin: The survey has just – well, let me start again. The House will appreciate that for the constituencies of 15, 16 and 17, it is only very recently that the 'red zones' have been reviewed following mass testing of inhabitants in the region. So, now that the region is no longer a red zone, this facilitates entry into those areas for officers. Now, it is not only a question of a loss due to the markets not being accessible. The House will appreciate it is not only, I repeat, not only farmers and breeders in the red zone and *circonscriptions 15, 16 et 17* who are facing difficulties but all farmers and breeders around Mauritius. The House will

appreciate that *les bazars sont fermés*. That is, I think, the main reason why *les produits ne peuvent être vendus*, but we are leaving no stone unturned to provide assistance to farming and breeding community in the whole island.

Mr Speaker: Hon. Yeung Sik Yuen!

CUREPIPE - ROADS - RESURFACING

(No. B/245) Mr M. Yeung Sik Yuen (Second Member for Curepipe & Midlands) asked the Vice-Prime Minister, Minister of Local Government and Disaster Risk Management whether, in regard to the roads in Curepipe requiring resurfacing, he will, for the benefit of the House, obtain from the Municipal Council of Curepipe, information as to if consideration is being given thereto and, if so, indicate the –

- (a) roads earmarked therefor, and
- (b) expected start and completion dates thereof.

The Vice-Prime Minister, Minister of Local Government and Disaster Risk Management (Dr. A. Husnoo): Mr Speaker, Sir, I am informed by the Municipal Council of Curepipe that an amount of Rs4 m. has been provided under the Local Development Projects 2020/2021 for the resurfacing of 10 roads within the town of Curepipe and the works are in progress now. The expected date of completion is end of May 2021. I am tabling a list of these roads.

Moreover, an additional amount of Rs19 m. has been made available under the Economic Recovery Fund for the resurfacing of roads. Bids were invited and the bids received are presently under evaluation.

Additionally, a sum of Rs17.8 m. has been earmarked by the Council for patching works in all the wards of the township of Curepipe and the contract has already been awarded for the sum of Rs5 m. Works order to the tune of Rs1 m. for patching works along 21 roads has so far been issued and works are in progress. A list of these roads is also being tabled.

I am further informed that –

- (i) the Road Development Authority has issued works orders for the milling and resurfacing of the main road under its responsibility in Constituency No.17 during the current financial year as follows –
 - Quartier Militaire Road (B6)

- Phoenix-Mahebourg Road (A10)
 - Phoenix-Plaisance Road (A10) again
 - Coriolis Road (B86) at Midlands, and
- (ii) the National Development Unit proposed in the forthcoming days, to award contracts for both resurfacing and construction of seven roads in Constituency No.17.

Mr Yeung Sik Yuen: J'espère que ces routes vont être asphaltées. Entre-temps, il y a une vidéo en ligne et j'aimerais déposer le lien de cette vidéo sur la Table de l'Assemblée pour que le VPM puisse regarder lui-même. Mais entre-temps, puisqu'on est à la veille du budget, est-ce que le Vice-Premier ministre peut prendre un engagement aujourd'hui d'allouer plus de budget au Conseil Municipal de Curepipe pour que le Conseil Municipal de Curepipe puisse faire asphalté ces routes.

Mr Speaker: No, this is not a good question. I do not know if you...

Mr Dhunoo: Thank you, Mr Speaker, Sir. Can the hon. Minister inform the House what is the total amount of money being disbursed by the Government for the maintenance of these roads in Constituency No.17?

Dr. Husnoo: Mr Speaker, Sir, under the LDP, that is, the Local Development Programme, I have just mentioned Rs4 m., under the Economic Recovery Fund Rs19 m., under the fund of the local authorities, that is, Curepipe Rs17.8 m., RDA Rs18.5 m., NDU Rs13.9 m. That makes a total of Rs73.2 m. this year.

Mr Speaker: Next question!

FORUM OF CUREPIPE - RENOVATION

(No. B/246) Mr M. Yeung Sik Yuen (Second Member for Curepipe & Midlands) asked the Vice-Prime Minister, Minister of Local Government and Disaster Risk Management whether, in regard to the Forum of Curepipe, he will, for the benefit of the House, obtain from the Municipal Council of Curepipe, information as to if the renovation of the temporary structure thereof is being envisaged and, if not, why not.

The Vice-Prime Minister, Minister of Local Government and Disaster Risk Management (Dr. A. Husnoo): Mr Speaker, Sir, I am informed by the Municipal Council of Curepipe that the temporary structure of the Forum of Curepipe is fully operational and around 400 vegetable sellers trade thereat on Wednesdays and Saturdays. I am informed that

the following renovation works have already been effected at Forum at the beginning of this year –

- renovation of existing toilets;
- replacement of fluorescent electric tube by water proof led lights, and
- replacement of gutter installation of down pipes of a length of 40 metres.

Mr Speaker, Sir, the following additional works would be considered in the next financial year –

- confection and replacement of 700 old metal stalls at an estimated cost of Rs3 m.;
- the second phase of replacement of the gutter down pipes for rain water discharge at an estimated cost of Rs200,000, and
- painting of the roof at an estimated cost of Rs3 m.

Mr Yeung Sik Yuen: M. le président, puisque le forum de Curepipe est presque pas praticable quand il pleut, et la ville de Curepipe, souvent il pleut, est-ce que l'honorable Vice-Premier ministre peut considérer et demander à la mairie de Curepipe d'exempter les frais de location des étaux aux maraîchers jusqu'à la rénovation du forum?

Dr. Husnoo: I think that will have to be considered later because as you know, with the COVID situation now, it is not Curepipe only that is affected, but a lot of other local authorities, markets in different places are affected. So, this is a different question. A decision would have to be taken at a different level.

Mr Yeung Sik Yuen: Find at least a discount on the price because it is among the most expensive in Mauritius.

Dr. Husnoo: Action is going to be taken at a different level.

(Interruptions)

Mr Speaker: Order!

Mr Yeung Sik Yuen: It is among the most expensive in Mauritius.

(Interruptions)

Mr Speaker: Order! Hon. Dhunoo!

Mr Dhunoo: Thank you, Mr Speaker, Sir. I would like to know from the hon. Minister, does the forum of Curepipe form part of the Master Plan of Curepipe which is being proposed by the Deputy Prime Minister?

Dr. Husnoo: Yes, Mr Speaker, Sir. Following the Government's decision to implement the Urban Terminal at Curepipe in the context of the Metro Express Project, the Minister of Housing and Land Use Planning decided to prepare a Master Plan for the central area of Curepipe and its vicinities.

The Master Plan which is being prepared under the chairmanship of the Deputy Prime Minister is still under preparation at the level of the Ministry of Housing and Land Use Planning. The draft Master Plan also covers the area to be served in future by the Metro Express Project at La Vigie. The Master Plan provides for the relocation of the forum in an economic development zone which is being envisaged further south at La Vigie.

Mr Speaker: The Table has been advised that PQ Nos. B/256, B/257, B/264, B/265, B/266 and B/271 have been withdrawn.

Next question!

HORSERACING SEASON 2021 - HORSES - IMPORTATION

(No. B/247) Mr F. Quirin (Third Member for Beau Bassin & Petite Rivière) asked the Minister of Finance, Economic Planning and Development whether, in regard to the 2021 horseracing season, he will, for the benefit of the House, obtain from the Mauritius Revenue Authority, information as to the number of horses imported, indicating –

- (a) the country of importation;
- (b) the purchase price thereof, and
- (c) if all recently established protocols have been strictly followed and, if not, why not.

Dr. Padayachy: M. le président, j'ai été informé par la *Mauritius Revenue Authority* que 88 chevaux de course ont été importés pendant la période allant du 01 janvier 2021 au 15 avril 2021 au titre de la saison hippique de 2021.

M. le président, en ce qui concerne la partie (a) de la question, 80 chevaux ont été importés d'Afrique du Sud, 6 chevaux de Nouvelle-Zélande et 2 chevaux d'Australie.

Pour ce qui est de la partie (b) de la question, je vais déposer le prix d'achat respectif des chevaux importés.

M. le président, en ce qui concerne la partie (c) de la question, j'ai été informé que le protocole du service des douanes de la *MRA* n'a pas été récemment modifié. Merci.

Mr Quirin: Merci, M. le président. Est-ce que l'honorable ministre pourrait répéter la dernière phrase concernant les protocoles, s'il vous plaît?

Dr. Padayachy: Je vais répéter. J'ai été informé par la *MRA*, *Mauritius Revenue Authority* que le protocole du service des douanes de la *MRA* n'a pas été récemment modifié. Est-ce que je – bon, ce n'est pas à moi de poser...

Mr Quirin: La question, M. le président, en fait cela concerne, est-ce que les protocoles établis ont été strictement suivis? Je vais poser une autre question supplémentaire. L'honorable ministre aura probablement l'occasion de répondre aussi à cette question. M. le président, je voudrais savoir de l'honorable ministre si les vérifications nécessaires ont été effectuées afin d'établir si tous les propriétaires de chevaux importés pour la saison 20-21 sont des propriétaires de bonne foi. Je veux dire *genuine ones*.

Dr. Padayachy: M. le président, je vais revenir par rapport à la question qui a été posée. La partie (c) de la question concernait la *MRA*. C'est pour cela que la *MRA* disait qu'il n'y a pas eu des changements dans les protocoles récemment. C'est pour cela qu'ils m'ont dit qu'il n'y a pas eu de changement de protocole, donc qu'il n'y a pas eu à suivre de nouvelles législations, etc.

Si l'honorable membre est en train de parler des changements de protocoles concernant la *GRA*, là on parle de la *Gambling Regulatory Authority*. Là cela concerne les dispositions concernant la FATF, à ce moment-là quand il va venir avec une question spécifique sur le sujet, je me ferais un devoir de lui répondre avec toutes les informations sur ce sujet.

Mr Quirin: M. le président, d'après certaines informations qui me sont parvenues, il y aurait un puissant homme d'affaires qui aurait utilisé des prête-noms pour importer un nombre important de chevaux. Et dans le milieu, on parle de plus d'une soixantaine qui ont été placés dans différentes écuries qui seront en opération cette saison. Ce qui est, à mon avis, contraire au protocole. L'honorable ministre des Finances a-t-il été informé de cela?

Dr. Padayachy: M. le président, non. Je remercie l'honorable membre de cette question. Je ne suis pas informé de cela. Si jamais il a des informations précises à ce sujet, je lui demanderais de bien vouloir me les fournir pour que je puisse faire le nécessaire auprès de la *MRA* et aussi de la *GRA*.

Mr Quirin: M. le président, justement concernant les protocoles, cela veut dire les conditions qui sont imposées par la *MRA* et le ministère des Finances autour de l'importation des chevaux, le ministre peut-il nous dire quelle est l'institution en fait qui a la responsabilité de s'assurer que les mesures mises en place sont suivies correctement?

Dr. Padayachy: M. le président, concernant les dispositions concernant la *MRA*, ce sera à la *MRA* de suivre les différentes dispositions des protocoles, de la loi par rapport à la *MRA Act*.

Concernant le *Gambling Regulatory Authority*, cela c'est autre chose. C'est à l'autorité concernée, la *MTC*, de prendre contact avec la *GRA* pour suivre les différents protocoles. Donc, il y a deux institutions qui régissent les courses.

Mr Speaker: No more bets! Next question!

(Interruptions)

COVID-19 - POSITIVE TESTED PATIENTS - PROTOCOL

(No. B/248) Mr F. Quirin (Third Member for Beau Bassin & Petite Rivière) asked the Minister of Health and Wellness whether, in regard to the quarantine/treatment centres, he will state if COVID-19 positive tested persons/patients have been allowed to leave same over the period end March to beginning April 2021 and, if so, give the reasons therefor in each case.

Dr. Jagutpal: Mr Speaker, Sir, I am informed that since the outbreak of the COVID-19 pandemic in Mauritius, a protocol for the care and treatment of patients infected with COVID-19 has been prepared in light of international literature and findings. The protocol is regularly updated as new evidence emerges and according to WHO recommendations. The protocol used by my Ministry has been devised by a panel of experts, comprising Doctors holding specialist qualifications in Internal Medicine, Infectious diseases, Gastro Enterology, Geriatrics, Emergency Medicine, Anaesthesia, Nephrology, Gynaecology-Obstetrics, Paediatrics and Microbiology.

The latest version of the protocol dates back to 25 February 2021 and this version was in use for the period end of March to beginning April 2021. The patients are discharged in line with this protocol.

Mr Speaker, Sir, I am further informed that this protocol, similar to other medical protocols, provides guidance for the care and treatment of the disease based on the medical history of the patient, age, presence of comorbidities and other immune deficiency as well as in relation to the clinical, biological and radiological status of the patient. The protocol also establishes the admission and discharge criteria of patients based on, *inter alia*, the stage and severity of the illness, and the clinical and biological evolution of the patients. Consequently, a protocol for the patients' care and treatment needs to be adopted by the treating doctor in light of the situation of each patient.

In line with the established protocol, an asymptomatic patient will undergo a PCR test on Day 7 and Day 10, and the patient will remain in the treatment centre for at least 10 days. The patient will be allowed to leave the treatment centre only upon 2 consecutive negative PCR test results.

In case the patient is tested positive for COVID-19 on Day 10, a PCR test will be carried out every 3 days. When obtaining a negative PCR result, the test will be repeated at least after 24 hrs and upon two consecutive PCR tests, the patient will be discharged from the treatment centre.

Mr Speaker, Sir, I wish to inform the House that there is a panel of experts whose mandate is also to determine and decide upon the release of atypical patients upon the verification of criteria like: age, clinical status of the illness, clinical status of the patient, immune status, length of admission in treatment centre, clinical status on the decision making day, the patient's serological status and the PCR tests results.

Additionally, the panel will then have to take a decision on these particular cases and the decision shall be based on the criteria specified earlier and including the cycle threshold CT. The CT Value corresponds to the number of amplification cycles needed for the detection of the genetic material of the virus. The greater the amount of amplification cycles needed corresponds to very limited amount of genetic material present. When there are only traces of the virus, more amplification cycles will be needed for detection. This means that the CT Value is high. At this stage, for a single patient, the CT can sometimes be negative or

considered as being positive, but with CT values which are highly positive. This will once more indicate that the patient is no longer infective.

I am further informed that the above applies for patients who have been tested positive for COVID-19 and who are admitted in treatment centres. Regarding patients who have been tested positive in quarantine centres, they are immediately transferred to treatment centres until the end of treatment.

Mr Quirin: M. le président, peut-on savoir de l'honorable ministre, est-il informé qu'il y a au moins une personne qui a passé 17 jours en quarantaine à l'hôtel La Pirogue d'après toujours les renseignements qui me sont parvenus et qui a été testée positif et qui malgré tout, a été autorisée à rentrer chez lui ? Est-ce que l'honorable ministre est au courant de cet état de choses parce que cette information a largement été véhiculée dans les médias?

Dr. Jagutpal: Yes, Mr Speaker, Sir. What the hon. Member is saying is right. The patient may have a positive test after he has been discharged but this is based on the CT Values. CT Values for patients who have been tested positive more than maybe two weeks, three weeks, four weeks but CT Values will indicate whether following this positive test, they are still infective or not. And, at the same time, we have to see whether this patient already has the serological status to be discharged. So, based on the serological status, positivity of the patient and the general condition of the patient, the decision is being taken by the expert who decides to discharge the patient or not.

Mr Speaker: Next question!

Mr Quirin: L'honorable ministre peut-il dire si, une fois que ces personnes ont été testées négatif et sont, donc, autorisées à quitter le centre de traitement, y a-t-il un protocole à suivre avant de pouvoir circuler normalement?

Dr. Jagutpal: Normally, Mr Speaker, Sir, the protocol is that the patients have to stay in isolation for one week before they are being allowed to go outside. But at the same time, we have patients, who, after they have been discharged, they have been followed on phone, and for any problem, they have to contact the treatment centers so that the appropriate advice is given.

Mr Speaker: Next question!

MAURITIUS MULTISPORTS INFRASTRUCTURE LTD - FUNDS

(No. B/249) Mr F. Quirin (Third Member for Beau Bassin & Petite Rivière) asked the Minister of Youth Empowerment, Sports and Recreation whether, in regard to the Mauritius Multisports Infrastructure Ltd., he will state the actions taken, if any, by his Ministry to strengthen the accountability and transparency in disbursement of funds thereto, following the observation made by the Director of Audit in its report 2019-2020 to the effect that Financial Instructions on “Administration of Government Grants” were not complied with.

Mr Toussaint: Mr Speaker, Sir, following the observation made in the Report of the Director of Audit on the Accounts of Government for the Financial Year 2019-2020, regarding disbursement of funds to the Mauritius Multisports Infrastructure Ltd (MMIL) by my Ministry, I have set up a Committee chaired by my Permanent Secretary and comprising of representatives of MMIL as well as the concerned officers of my Ministry. The term of reference of the Committee is to examine in depth the observations and recommendations made by the Director of Audit, in view of proposing a stronger disbursement mechanism between my Ministry and MMIL.

Mr Quirin: M. le président, des documents financiers qui ne sont pas signés, des demandes de fonds qui ne sont pas expliquées, comme l’a si bien souligné le directeur de l’audit, il faut croire qu’il y a une absence totale d’organisation et de standard au niveau du *MMIL*. De ce fait, l’honorable ministre peut-il nous dire qui est l’actuel directeur du *MMIL*? Quelles sont ses responsabilités, ses salaires et les autres conditions attachées à ce poste ?

Mr Toussaint: M. le président, je peux tout simplement dire qui est le *Chairperson* de *MMIL* mais, évidemment, par rapport à toutes les conditions rattachées à ce poste, je n’ai pas ces renseignements avec moi puisque que la question n’était pas directement liée. Donc, le *Chairperson* de *MMIL*, c’est M. Jean-Pierre Sauzier.

Mr Quirin: L’honorable ministre pourrait, M. le président, déposer justement les informations qu’il n’a pas en ce moment en sa possession par rapport aux responsabilités du directeur de *MMIL*, de ses salaires et d’autres conditions qui y sont rattachées? Est-ce qu’il pourrait, est-ce qu’il est disposé à déposer sur la table de l’Assemblée ces informations?

Mr Toussaint: Je vais prendre les renseignements nécessaires, M. le président.

Mr Speaker: Hon. Dhunoo!

Mr Dhunoo: Thank you, Mr Speaker, Sir. M. le président, le ministre dans sa réponse à mentionné qu'il a mis en place un comité pour regarder l'affaire en question, est-ce qu'on pourrait savoir du ministre qui sont les membres sur ce comité?

Mr Toussaint: M. le président, comme je l'ai dit dans ma réponse initiale, ce comité sera présidé par le *Permanent Secretary* de mon ministère, d'un *DPS* responsable des finances dans le comité, aussi *the Manager of Financial Operations of my Ministry, the Assistant Manager Internal Control of my Ministry, the Office Management Assistant will act as Secretary and the Chief Operating Officer of the MMIL forms part of this Committee.*

Mr Speaker: Hon. Juman!

COVID-19 PATIENTS - DIALYSIS TREATMENT

(No. B/250) Mr E. Juman (Fourth Member for Port Louis Maritime & Port Louis East) asked the Minister of Health and Wellness whether, in regard to patients under dialysis treatment, he will state the number thereof who have passed away since 05 March 2021 to date in the Dialysis Centres, including in the New Souillac Hospital, indicating the number thereof related to the Covid-19 pandemic.

Dr. Jagutpal: Mr Speaker, Sir, I wish to inform the House that as at date 1,579 patients are following treatment in the 7 Government Dialysis Centres and 6 Private Dialysis Centres. Since 05 March 2021 as at date, 76 patients following dialysis treatment have passed away.

In March 2021, out of 1,556 patients who are on dialysis, 53 have passed away. For April 2021 till date, out of 1,579 patients who are on dialysis, 23 have passed away.

However, none of the patients following dialysis treatment in our dialysis centres passed away in the dialysis centre itself since 05 March 2021. In case of any medical complications during dialysis, the dialysis patient is transferred to Intensive Care Units of the hospital to which the dialysis centre is attached.

Mr Speaker, Sir, I am informed that since 05 March 2021, 3 patients who were following treatment for dialysis at Souillac Hospital have passed away directly related to COVID-19. 2 of them were admitted at the Souillac Hospital and 1 at ENT Hospital.

I am further informed that 5 positive Covid-19 patients and 2 Covid-19 negative patients passed away with primary cause of death due to other comorbidities.

Mr Speaker: Hon. Juman!

Mr Juman: Merci, M. le président. Puisque vous êtes de bonne humeur, peut-être je vais prendre un peu plus de temps pour ma question, s'il vous plaît. Lors d'une conférence de presse, le docteur Ip, à vos côtés, M. le ministre, nous a bien fait comprendre que, je cite -

“Le stress, comme vous êtes au courant, peut déclencher le décès d'un patient positif au *COVID*, et autre facteur, c'est l'alimentation.”

Comment expliquez-vous, M. le ministre, qu'une patiente nommée F. M. qui a été dialysée le 25 mars, le lendemain le ministère l'informe qu'ils vont la récupérer pour la placer dans un centre de quarantaine ? On la récupère à 17h05...

Mr Speaker: I think you made your point already.

Mr Juman: S'il vous plaît...

Mr Speaker: Allow him to reply.

Mr Juman: Je veux poser ma question, s'il vous plaît ; deux minutes.

Mr Speaker: You have another question?

Mr Juman: C'est très important. Je n'aurais pas d'autres supplémentaires. Donc, on la récupère à 17h05 et ce n'est qu'à 23 heures qu'elle a pu avoir accès à une chambre à l'hôtel Tamassa, suivi d'un dîner à 23h40, menu briyani poulet et gâteau au chocolat.

Mr Speaker: Oh, come on!

Mr Juman: Attendez, s'il vous plaît ! C'est une patiente...

Mr Speaker: Put your question! You have the right to put a question.

Mr Juman: Ma question va suivre.

Mr Speaker: You are making a statement.

Mr Juman: Et le lendemain, ...

Mr Speaker: *Non!* You have to put your question.

Mr Juman : Le lendemain, pas de dialyse pour la patiente, M. le ministre, et déjeuner mine frit. M. le ministre, ce n'est pas un cas...

Mr Speaker: Now, I move to the next question, if you don't have a question. I move to the next question!

Mr Juman: M. le president...

Mr Speaker: I give you a last chance.

Mr Juman: *Please.* M. le ministre, ce n'est pas suffisant de donner une enquête indépendante pour situer les responsabilités, le plus important c'est que ça ne se reproduise plus à l'avenir.

Dr. Jagutpal: Mr Speaker, Sir, the first part of the question is related to the stress that these patients have had to bear. In the PNQ this morning, I have already given the condition, the situation, how we have been able to detect these patients and in which circumstances we have transported all these patients; I have given all the details. Now, concerning the second part of the question about the diet, Mr Speaker, Sir, the 20 patients follow a strict diet regarding the disease that they are suffering from and 80% do not follow that dieting. At that point in time, I agree with him that the Catering Officers over there have given whatever food available, briyani and all that, but at the same time, Mr Speaker, Sir, we have been a little bit flexible with patients so that their relatives could bring food for them and questions were raised about whatever food they brought for them in the centres. Mr Speaker, Sir, it is not the time now for us to start doing a post-mortem on the diet of those patients.

Mr Speaker: Hon. Uteem!

Mr Uteem: Thank you, Mr Speaker, Sir. Mr Speaker, Sir, from the PNQ and the questions today, we know that dialysis patients that were COVID negative went to Souillac Hospital, interacted with nurses who were COVID positive, and later on, these dialysis patients became COVID positive and some of them died. Doesn't the hon. Minister think that the State's responsibility is engaged and the State has failed all these dialysis patients?

Dr. Jagutpal: Mr Speaker, Sir, I object with this comment that the hon. Member has made. How can he say that a Nursing Officer, a staff who is COVID positive is working with patients on dialysis? All those who have been tested positive, nursing staff or patients with dialysis are being sent to treatment centers. Patients who have undergone dialysis, who are tested negative, obviously, they have done their dialysis with staff. This morning, I have enumerated on how we have managed to get staff in the treatment centers...

(Interruptions)

Mr Ramful: Mr Speaker, Sir, can I ask a question about the effectiveness of the vaccines on those patients? Has there been any clinical trial that has been done with regard to the vaccines that are being administered on those dialysis patients?

Dr. Jagutpal: Mr Speaker, Sir, we are having daily literatures coming up about efficacy of the different vaccines. I don't have the information right now. Obviously, you have a question on the effectiveness of vaccines; it keeps on changing. I will come up about the effectiveness of the different vaccines obviously.

Mr Speaker: We will not undergo any postmortem. Next question, hon. Juman!

H.E. MR S. S. - ROVING AMBASSADOR - APPOINTMENT

(No. B/251) Mr E. Juman (Fourth Member for Port Louis Maritime & Port Louis East) asked the Minister of Land Transport and Light Rail, Minister of Foreign Affairs, Regional Integration and International Trade whether, following the appointment of H.E. Mr Showkutally Soodhun as roving Ambassador to the Kingdom of Saudi Arabia, he will state if the Saudi authorities have been officially informed accordingly by way of a 'note verbale'.

Mr Ganoo: Mr Speaker, Sir, in line with diplomatic practice, a '*note verbale*' was issued to the Ministry of Foreign Affairs of the Kingdom of Saudi Arabia informing of the change in residency of H.E. Mr Showkutally Soodhun, Ambassador Extraordinary and Plenipotentiary of the Republic of Mauritius to the Kingdom of Saudi Arabia from Riyadh to Mauritius.

Mr Juman: Hon. Minister, is it possible to table a copy of the letter of appointment as Roving Ambassador in Saudi Arabia?

Mr Ganoo: You mean the '*note verbale*'?

Mr Juman: Yes.

Mr Ganoo: Well, the hon. Member should know, Mr Speaker, Sir, that diplomatic correspondences are formally exchanged between States, between Government through a '*note verbale*' in line with the diplomatic practices as governed by the Vienna Convention, and a '*note verbale*' is one of the many forms of communication between Governments. In fact, this is the most common form of communication, but it is not considered as a public document and it would not be appropriate for me, Mr Speaker, Sir, to circulate the said note.

Mr Armance: Can the hon. Minister only give us the date the '*note verbale*' was issued, please? Only the date we need.

Mr Ganoo: Yes, on 01 March 2021, the Ministry of Foreign Affairs, the Regional Integration and International Trade issued the ‘*note verbale*’ informing of the change in residency of H.E. Mr Soodhun to the Kingdom of Saudi Arabia.

Mr Mohamed: Was the ‘*note verbale*’ pre-PQ or post-PQ?

(Interruptions)

Well, the PQ where you did not give a right answer!

Mr Ganoo: Mr Speaker, Sir, the hon. Member has the date when the PQ was set, it’s up to him to find out whether the ‘*note verbale*’ was before or after because I mentioned the date in which the ‘*note verbale*’ was issued, the 01 of March.

Mr Speaker: Before the last one, hon. Dhunoo!

Mr Dhunoo: Thank you, Mr Speaker, Sir. Can the hon. Minister inform the House what is the difference between a Roving Ambassador and an Ambassador?

Mr Ganoo: Mr Speaker, Sir, a Roving Ambassador usually has residence in his country and he is accredited in many other jurisdictions.

Mr Speaker: Last supplementary!

Mr Juman: Being given that the Ambassador is now based in Mauritius, may we know what will happen to the representational cars purchased, one X6 and one Jaguar at the Embassy?

Mr Ganoo: If the hon. Member comes with a substantive question, I will certainly give him the answer.

Mr Speaker: Let’s hear hon. Dr. Aumeer!

ECONOMIC DEVELOPMENT BOARD - PREMIUM TRAVEL VISA - APPLICATIONS

(No. B/252) Dr. F. Aumeer (Third Member for Port Louis South & Port Louis Central) asked the Minister of Finance, Economic Planning and Development whether, in regard to Premium Travel Visa, he will, for the benefit of the House, obtain from the Economic Development Board, information as to the number of applications received since the launch thereof, indicating the –

(a) number thereof approved;

- (b) security checks requested from international security agencies, if any, prior to approval, and
- (c) measures taken by his Ministry to prevent holders thereof to enter into employment in Mauritius.

Dr. Padayachy: M. le président, le premium visa a été introduit en novembre 2020 en tant que nouveau programme de *Travel Visa Scheme*. Le premium visa est délivré pour une période d'un an renouvelable. Introduit dans le contexte de la pandémie de la *COVID-19*, le premium visa vise à attirer les professionnels, des touristes de moyens et longs termes, des retraités, des investisseurs et ceux dont les enfants étudient à Maurice. Les non-ressortissants qui demandent ce visa doivent être titulaires d'une police d'assurance valide couvrant à la fois les aspects médicaux et liés au voyage. Le demandeur doit également détenir la preuve qu'il dispose de fonds suffisants pour couvrir ses dépenses. L'*Economic Development Board* m'a informé que depuis le lancement du programme, 550 demandes ont été reçu.

M. le président, en ce qui concerne la partie (a) de la question, au 15 avril 2021, 384 demandes ont été approuvées par le *Passport and Immigration Office*.

Au regard de la partie (b) de la question, j'ai été informée qu'avant d'approuver les demandes de premium visa, le *Passport and Immigration Office* effectue des contrôles de sécurité relatif aux demandeurs auprès d'agences de sécurité internationale.

En ce qui concerne la partie (c) de la question, l'une des conditions attachées à la délivrance d'un premium visa et que le demandeur ne prenne pas d'emploi à Maurice. En cas de non-respect de cette condition, le premium visa peut être révoqué avec effet immédiat. Merci.

Dr. Aumeer: I thank the hon. Minister for his answer. Can the hon. Minister give us any reason as to why nationals of Pakistan with whom we enjoy bilateral reciprocal diplomatic relations having an embassy in Mauritius and a High Com in Islamabad are not eligible as per the list as affixed by the Economic Development Board?

Dr. Padayachy: M. le président, je n'ai pas d'information à ce sujet, je vais devoir enquêter auprès de l'*Economic Development Board* mais en tout cas, à ma connaissance, il n'y a pas de spécification concernant les pays. Je dois vérifier cette information auprès de l'*Economic Development Board*.

Dr. Aumeer: Can the Minister table the list that has been affixed...

Mr Speaker: Hon. Dr. Aumeer! You have four questions, I guess. Make sure you have time to ask all your questions.

Dr. Aumeer: I will deal with it accordingly. Thank you for the advice.

Mr Speaker: Final supplementary.

Dr. Aumeer: I just want to inform the hon. Minister that there is a list that is on the website of the Economic Development Board and that countries like Pakistan, Iran, Afghanistan, Algeria are not eligible for application of premium visa in Mauritius. My next supplementary is how many of these successful applicants have expressed interest since it is as per the conditions in the application for premium visa to be an investor or acquiring residential property in Mauritius?

Dr. Padayachy: M. le président, le premier visa n'a rien à voir avec le permis pour venir résider à Maurice en tant qu'investisseur. C'est un nouveau *scheme* qu'on a mis en place pour attirer les personnes pouvant venir vivre pendant une longue période sur le territoire mauricien, mais si le retraité ou l'étudiant ou la personne concernée veut acheter ou investir dans le pays, il doit faire le nécessaire auprès de l'EDB ; voilà ma réponse.

Mr Speaker: The Table has been advised that the following PQs have been withdrawn, B/261, B/274, B/275 and B/276. Next question, Dr. Aumeer!

NEW SOUILLAC HOSPITAL & ENT HOSPITAL - COVID-19 POSITIVE PERSONS - TREATMENT PROTOCOL

(No. B/253) Dr. F. Aumeer (Third Member for Port Louis South & Port Louis Central) asked the Minister of Health and Wellness whether, in regard to the Covid-19 pandemic, he will state the number of Covid-19 positive tested persons admitted in the Intensive Care Unit of the New Souillac Hospital and the ENT Hospital, respectively, since March 2020 to date, indicating the number thereof who required intubation and ventilation in each of these two hospitals, indicating the -

- (a) treatment protocol established therefor, and
- (b) number thereof who passed away and the cause of death thereof.

Dr. Jagutpal: I am informed that since March 2020, the number of COVID-19 positive tested persons admitted in the Intensive Care Unit of the New Souillac Hospital is 14. Out of the 14 patients tested COVID-19 positive, 7 required intubation and ventilation.

As regards the ENT Hospital, the number of COVID-19 positive tested persons admitted in the Intensive Care Unit is 20 and 13 of them required intubation and ventilation.

Mr Speaker, Sir, as regards part (a) of the question, as per the current protocol, no treatment is provided to asymptomatic patients.

Symptomatic patients with mild to moderate infection, that is, absence of viral pneumonia and hypoxia, are treated as per symptoms.

As for symptomatic patients with severe disease, that is, presence of pneumonia and hypoxia, they are treated with intravenous Dexamethasone and antiviral medication.

I am also informed that the following antibiotics are also readily available for administration intravenously, as and when required –

- Meropenem;
- Ceftriaxone;
- Clarithromycin;
- Amikacin;
- Vancomycin, and
- Moxifloxacin.

The antifungal intravenous Micafungin and the anticoagulant subcutaneous Lovenox are also part of the treatment protocol.

Mr Speaker, Sir, as regards part (b) of the question, I wish to inform the House that in total, the number of patients who entered the Intensive Care Unit since March 2020 is 34. However, out of those 34 patients, 14 have been treated in order to avoid being placed on ventilation and intubation.

Mr Speaker, Sir, I am also informed that out of those remaining 20 patients who required ventilation and intubation, 15 have passed away since March 2020.

Dr. Aumeer: Thank you, hon. Minister. The hon. Minister will surely share with us that there were 12 patients who were admitted last year in Souillac Hospital, out of which 10 passed away and recently there have been 5 who passed away following those admitted in ENT. Our death rate and case fatality rate is more than 78%. I would like to ask the hon. Minister, in the light of this very high figure that we have in our country, whether he is

considering to advise new therapeutic protocols, using the very drug that was discussed last week, Remdesivir which he said is under consideration and the steroids and surely which I asked him personally last week, new monoclonal antibody treatment which has proved to improve the survival rate of those who are severely sick and admitted in ICU, needing intubation and ventilation?

Dr. Jagutpal: Thank you, hon. Member. I think yes, the teams, the experts who are treating these patients will obviously consider the different medications that are being used on the international scene and also the anticoagulant medication that, I am aware, is being used in Mauritius for treatment of COVID-19 positive patients.

Mr Speaker: Next question, hon. Dr. Aumeer!

MEDICAL & HEALTH OFFICERS/SENIOR MEDICAL & HEALTH OFFICERS - RECRUITMENT

(No. B/254) Dr. F. Aumeer (Third Member for Port Louis South & Port Louis Central) asked the Minister of Health and Wellness whether, in regard to the recent application as Medical and Health Officer/Senior Medical and Health Officer in his Ministry in February 2021, he will state the number of posts earmarked and the department and specialty in which, posts are to be filled.

Dr. Jagutpal: Mr Speaker, Sir, as regards the process of recruitment of Medical and Health Officers/Senior Medical and Health Officers in the public sector, I wish to inform the House that the recruitment exercise is conducted by the Public Service Commission which is the Constitutional Body vested with the power to recruit and select persons in the public sector.

Whenever vacancies occur in my Ministry for Medical and Health Officers/Senior Medical and Health Officers, a recommendation is made to the Public Service Commission to conduct the recruitment and selection exercise. The post is then advertised by the Public Service Commission to the general public. A selection exercise is being conducted by the Public Service Commission which includes a written examination followed by an interview.

After the selection exercise, the Public Service Commission submits a list of suitable candidates to my Ministry for appointment of Medical and Health Officers/Senior Medical and Health Officers.

Mr Speaker, Sir, as regards the recent recruitment of Medical and Health Officers/Senior Medical and Health Officers, I am informed that vacancies for the post of Medical and Health Officers/Senior Medical and Health Officers were advertised on 27 October 2020. A written examination was carried out on 27 February 2021 by the Public Service Commission and the interview of the successful candidates would be conducted by the Public Service Commission in due course.

Given that there are 50 funded vacancies in the Budget 2020-2021, 50 Medical and Health Officers/Senior Medical and Health Officers will be recruited by the Public Service Commission to fill the vacancies.

Mr Speaker, Sir, I wish to inform the House that Medical and Health Officers/Senior Medical and Health Officers are general practitioners and as such, are not recruited for a specific speciality. However, Medical and Health Officers/Senior Medical and Health Officers are posted in the various speciality departments at the level of the hospitals on a six-month rotation.

Dr. Aumeer: Thank you, hon. Minister. Exams are very objective assessment and interview, unlikely, are very subjective. Will the Minister, for the purpose of transparency and good governance, see to it that results of the recent recruitment and exercise that has been carried out by the PSC and eventually be submitted to your office be published with the names and addresses of those who have succeeded in attaining those posts to dispel rumours of favouritism.

Dr. Jagutpal: Mr Speaker, Sir, as I stated in my reply, the Public Service Commission is a constitutional body having the prerogative of setting up the examination, and doing the selection. The Ministry cannot take any commitment of interfering in the affairs of the PSC.

Mr Speaker: Next question!

Dr. Aumeer: One supplement, Mr Speaker, Sir.

Mr Speaker: No, you have another question; I am giving you the chance of ...

Dr. Aumeer: This supplement is very important. Please!

Can I ask the hon. Minister, any reasons as to why further assessment through interview is conducted after such exams by the PSC, keeping in mind that a graduate had already conducted three exams before getting a post in the public sector?

Dr. Jagutpal: Mr Speaker, Sir, again the PSC decides on the different modes of examination and interview. The Ministry of Health and Wellness cannot interfere in the affairs of the PSC.

Mr Speaker: Put your last question!

**GAMBLING REGULATORY AUTHORITY - HEAD OF HORSE RACING
DIVISION & HEAD OF INTEGRITY AND COMPLIANCE DIVISION**

(No. B/255) Dr. F. Aumeer (Third Member for Port Louis South & Port Louis Central) asked the Minister of Finance, Economic Planning and Development whether, in regard to the Gambling Regulatory Authority, he will, for the benefit of the House, obtain therefrom, information as to if the Horse Racing Division has been set up, indicating if the posts of Horse Racing Director and Integrity officer have been filled and, if so, indicate the names and qualifications of the incumbents and, if not, why not.

Dr. Padayachy: M. le président, la *GRA* m'a informé qu'elle est actuellement en train de mettre en place une division spécialisée pour les courses hippiques au sein de l'autorité.

En attendant la mise en place de cette division, la division existante nommée *Integrity and Compliance Division* et qui compte huit agents, s'occupe entre autres de toutes les questions liées aux courses hippiques.

J'ai par ailleurs été informé que la division *Integrity and Compliance* était auparavant dirigée par un *Head of Integrity and Compliance*.

Suite à son départ, la division *Integrity and Compliance* est en cours de restructuration en deux divisions distinctes, l'une s'occupant des courses hippiques et l'autre de l'intégrité et de la conformité.

À cette fin, deux manifestations d'intérêt ont été lancées le 11 janvier 2021, invitant les candidats locaux et internationaux intéressés respectivement par les postes de *Head of the Horse Racing Division* et de *Head of Integrity and Compliance Division* à se manifester.

M. le président, le candidat sélectionné pour le poste de *Head of the Horse Racing Division* aura parmi ses responsabilités de faire des recommandations au Conseil d'administration de la *GRA* sur la mise en place de la Division dédiée aux courses hippiques.

En ce qui concerne le pourvoi de ces postes, je souhaite informer la Chambre que l'exercice de sélection est en cours et que les nominations devraient être finalisées prochainement.

Merci.

Mr Speaker: Supplementary!

Dr. Aumeer: I have one Supplementary. Thank you, hon. Minister. Can the hon. Minister inform the House as to the number of applicants who have put their request through the expression of interest with regard to the Head of the Horse Racing Division?

Dr. Padayachy: M. le président, je remercie l'honorable membre pour sa question. Il y a trois candidats qui ont été interviewé pour le post de *Head of Horse Racing*. Un Mauricien et deux *foreigners*.

Mr Speaker: Hon. Mrs Tour!

Mr Speaker: You've withdrawn the questions, already? Both questions? So, we come to hon. Uteem.

No comments!

VALLÉE DES PRÊTRES - SEWER SYSTEM

(No. B/256) Mrs J. Tour (Third Member for Port Louis North & Montagne Longue) asked the Minister of Energy and Public Utilities whether, in regard to the sewer system in Vallée des Prêtres, he will, for the benefit of the House, obtain from the Wastewater Management Authority, information as to –

- (a) the percentage of households connected thereto as at to date, and
- (b) if cases of connections of rainwater flowing from residential/ commercial premises thereto have been detected thereat over the past two years and, if so, indicate the –
 - (i) number thereof, and
 - (ii) measures taken or that will be taken in connection therewith.

(Withdrawn)

CHITRAKOOT - LANDSLIDE PROBLEM

(No. B/257) Mrs J. Tour (Third Member for Port Louis North & Montagne Longue) asked the Minister of National Infrastructure and Community Development whether, in regard to the landslide problem in Chitrakoot, he will, for the benefit of the House, obtain from the Geotechnical Unit, information as to –

- (a) where matters stand as to the –

- (i) setting up of landslide management plans, recommended in the Japan International Cooperation Agency Report 2015, and
 - (ii) carrying out of awareness campaign for the relocation of the residents concerned therewith, and
- (b) if a recent survey thereof has been carried out.

(Withdrawn)

MOGAS & GAS OIL - PRICE STRUCTURE

(No. B/258) Mr R. Uteem (Second Member for Port Louis South & Port Louis Central) asked the Minister of Labour, Human Resource Development and Training, Minister of Commerce and Consumer Protection whether, in regard to the price structure for Mogas and Gas Oil, he will state if consideration will be given for the review thereof and, in particular, to reduce the amount of the taxes and of levy components thereof.

Mr Callichurn: Mr Speaker, Sir, in accordance with the Consumer Protection (Control of Price of Petroleum Products) Regulations 2011 as amended, the Petroleum Pricing Committee (PPC) which is an independent Committee recommends the retail prices of Mogas and Gas Oil.

The price structure of Mogas and Gas Oil comprises of the following components –

- Excise duty;
- Contribution to the Road Development Authority;
- Contribution to Rodrigues Transportation and Storage;
- Contribution to the construction of storage facilities for petroleum products;
- Contribution to subsidy on LPG, flour and rice, and
- Contribution to the COVID-19 Solidarity Fund.

The revenue derived from each tax and levy in the price structure of Mogas and Gas Oil are collected by the STC and remitted to the relevant authorities.

As the regulation stands presently, the retail price of the petroleum products is maintained either when calculated price is less than 4% than the existing retail price or is more than 4% and funds are available in the PSA, that is, Price Stabilisation Account to make good for such increase. Alternatively, the retail price is increased.

Mr Speaker, Sir, due to COVID-19 pandemic in 2020, global human mobility experience significant disruptions with several countries placing restrictions on air, ground and sea travel which have had a heavy impact on the supply chain.

Supply distributions are caused by geopolitical events and severe weather and create uncertainty about future supply or demand which can lead to higher volatility in prices.

However, crude oil price is affected, not only by supply distributions but also by reduction in production by the Organisation of Petroleum Exporting Countries (OPEC) and non-OPEC countries and exchange rate fluctuations.

Consequently, further inventory withdrawals to meet rising crude oil demand will keep crude oil price elevated though at least to the end of April 2021.

From October 2020 to March 2021, the evolution of prices of Mogas and Gas Oil on the world market has accused a steady growth whereby the Platts Oilgram reference prices for Mogas and Gas Oil have increased from 425\$ per metric ton in December 2020 to reach 616.75\$ per metric ton in March 2021, respectively.

The retail prices of Mogas and Gas Oil was last revised downwards in June 2019. From June 2019 to December 2020, the PPC met on six occasions and have maintained the retail prices of Mogas and Gas Oil at their current level.

In April 2021, since the balance of the PSA was Rs62.2 m. in deficit for Mogas and Rs50.5 m. positive for Gas Oil, the PPC had no other choice than to increase the retail price of Mogas by 10% which is the maximum allowable increase under the Consumer Protection (Control Price of Petroleum Products) Regulations 2011.

Mr Speaker, Sir, it has always been the practice for the Ministry of Finance, Economic Planning and Development to consider revision in taxes at the time of budget exercise. For example excise duty on Mogas was increased from Rs10.80 per litre to Rs14.80 per litre and that of Gas Oil from Rs3.30 per litre to Rs7.30 per litre in August 2017.

Thereafter, in Budget 2019-2020, the excise duty was reduced to Rs12.20 per litre and Rs4.70 per litre for Mogas and Gas Oil, respectively.

As regards the contributions paid to the different authorities, same has also been revised previously. For instance the contribution to the Build Mauritius Fund which existed since January 2014 at the rate of Rs1 per litre was increased to Rs4 per litre in January 2015 and removed from the price structure of Mogas and Gas Oil in August 2017.

Similarly, the contribution to the COVID-19 Solidarity Fund introduced in April 2020 was reduced from Rs4 per litre to Rs1 per litre in December 2020 for each of Mogas and Gas Oil.

Mr Speaker, Sir, at this stage, it is not envisaged to reduce the amount of taxes and the levy on Mogas and Gas Oil. My Ministry and the STC are closely monitoring the worldwide oil prices. Should there be a need to review same, it will be considered at the appropriate time.

Mr Uteem: Mr Speaker, Sir, according to the price structure published on 02 April 2021, the price of Mogas per litre CIF is Rs20.40 and retail price is Rs48, that is 140% taxes. For Gas Oil, it is 100% taxes. Will the hon. Minister consider reducing the amount of tax being given that in the list of taxes that he has mentioned, he has deliberately failed to mention that this Government has increased contribution for subsidy to LPG, flour and Rice from Rs1.20 a litre to Rs4.20 a litre on Gas Oil?

Mr Callichurn: Well, I have already replied to this question. In the last part of my answer, I stated that it is not envisaged to reduce the amount at the moment because we have to consult the Ministry of Finance and take into consideration other factors before reducing the taxes.

Mr Speaker: Time over by 5 minutes!

MOTION

SUSPENSION OF S.O. 10(2)

The Deputy Prime Minister: Mr Speaker, Sir, I beg to move that all the business on today's Order Paper be exempted from the provisions of paragraph (2) of Standing Order 10.

The Vice-Prime Minister, Minister of Education, Tertiary Education, Science and Technology (Mrs L. D. Dookun-Luchoomun) seconded.

Question put and agreed to.

(4.32 p.m.)

STATEMENT BY MINISTER

HAVRE D'AVENIR SHELTER - MINORS - RELOCATION

The Minister of Gender Equality and Family Welfare (Mrs K. Koonjoo-Shah): Thank you, Mr Speaker, Sir. Mr Speaker, Sir, I wish to inform the House that following

reports to officers of my Ministry and *Brigade pour la Protection des Mineurs* on 09 April 2021 of alleged ill-treatment and physical assault on minors placed in Shelter Havre D'Avenir No. 2 situated in Rose Hill, the Police was requested to carry out an enquiry in the matter. Furthermore, based on the existing child protection protocol of my Ministry, the minors in question were relocated to another shelter so as to ensure that the Police enquiry be conducted without interference.

On 08 April, at around half past eleven at night, it was reported by the Shelter Manager of Havre D'Avenir No. 2, one Mrs N., that minors E. B. (14 years old) and U. J. (16 years old) had absconded from the shelter and Stanley Police Station had been informed accordingly. The next day, at around one o'clock in the morning, Albion Police Station called officers of my Ministry to inform that the mother of minor E. B. brought both minors to Albion Police Station and that both minors were safe.

The on-call team together with the Psychologist of my Ministry attended the case with the help of the Shelter Manager. The minors stated that Mrs A. T., the President of the NGO *Croissant Bleu* that runs Shelters *Havre D'Avenir* Nos. 1 and 2 was verbally aggressive towards them. They were scared and had decided to abscond from that shelter to go to minor E. B's residence at Albion. Both minors were taken to Victoria Hospital for medical assessment and both minors were examined and were found medically fit and, therefore, were not admitted to hospital.

On 09 April, a team comprising the Social Workers, the Psychologist of my Ministry and Officers of the *Brigade pour la Protection des Mineurs* attended the shelter in question for an enquiry. After interviewing all the minors, 11 of them, including the two who had absconded, reported that they had been physically assaulted by Mrs A.T. on 16 March this year.

The minors were seen by the Ministry's Psychologist. Officers of *Brigade pour la Protection des Mineurs* had recorded statements from three minors while the other eight minors were not in a position to give statements.

Consequently, a declaration on behalf of the remaining eight minors was made at Stanley Police Station. Police Form 58 was issued in favour of all the 11 minors and they were conveyed to Victoria Hospital for medical examination and thereafter were relocated to another shelter.

Mr Speaker, Sir, I would like to inform the House that at the time when the minors were being relocated to another shelter, with all sanitary measures being applied, the Red Zone restrictions had already been lifted.

On 10 April, the minors were again seen by the Psychologist and officers of the Children Rehabilitation Services of my Ministry for further support.

On the same day, a request was made to the management of *Havre D'Avenir* No. 2 to debar Mrs A. T. all access to the shelter until completion of the enquiry.

However, my Ministry was informed that, despite being prohibited, Mrs A. T. was still visiting the shelter. Consequently, the Ministry had no choice than to relocate the remaining 21 minors to other shelters, pending the outcome of the Police enquiry.

Mr Speaker, Sir, I wish to reassure the House that my Ministry has acted in the best interests of those children as we always do, the more so that the children placed in shelters come from precarious situations and have been subject to considerable psychological and emotional turmoil. There is a rehabilitation process, be it emotional or psychosocial, that is ensured during their stay in these shelters.

This Government's and my Ministry's actions remain guided by the principle of the best interests of the child, in particular those who are vulnerable.

In the light of the outcome of the Police enquiry, appropriate actions will be taken accordingly.

I thank you, Mr Speaker, Sir.

ADJOURNMENT

The Deputy Prime Minister: Mr Speaker, Sir, I beg to move that this Assembly do now adjourn to Tuesday 27 April 2021 at 11.30 a.m.

The Vice-Prime Minister, Minister of Education, Tertiary Education, Science and Technology (Mrs L. D. Dookun-Luchoomun) seconded.

Question put and agreed to.

Mr Speaker: The House stands adjourned.

Adjournment matter! Hon. Osman Mahomed!

(4.37 p.m.)

HOUSING UNITS - PROPOSED DEVELOPMENT PROJECT

Mr Osman Mahomed (First Member for Port Louis South & Port Louis Central): Thank you, Mr Speaker, Sir, I am thankful indeed for being granted this opportunity to raise an important public matter. The matter of public concern, Mr Speaker, Sir, pertains to the proposed development project of 12,000 housing units which now appears, to our astonishment, to be spearheaded by a new company, the New Social Living Development Limited which throughout my discourse I shall refer to as the new company.

First, let me mention that I was, in the past, Officer-in-Charge of the Housing Unit at the Ministry of Housing and Lands, Board Member of the National Housing Development Company, in short NHDC, and I was later on, its Managing Director. It is noteworthy that the NHDC has not renewed the contract of its CEO last week when there is such an important project at hand.

Now, the current Government Programme 2020-2024 which is titled “Inclusiveness at the Heart of the Nation” states that Government will facilitate access for everyone to a decent and affordable housing in a sustainable living environment. In his 2021 Budget presentation, setting the agenda for the New Normal, the hon. Minister of Finance, Economic Planning and Development stated, and I quote –

“First, we are providing Rs12 billion for the construction of 12,000 Social Housing Units across the whole island.”

Yet, Mr Speaker, Sir, nowhere has it been mentioned in the Budget Speech or subsequently, as far as I know, that this huge undertaking will be undertaken by a newly created company and not by the NHDC nor the MHC, Mauritius Housing Company, which are the Government executive arms in development of social housing, NHDC being a bank as well, but which has done development as well. Only recently, about 2 to 3 weeks ago, and very subtly did this new company start making its appearance throughout vacancy adverts in the newspapers while describing itself as the Implementing Agency of the Government of Mauritius for the construction of 12,000 residential units.

I have thus decided to take this matter up to this House and I was expected to intervene today on this issue. To my surprise, last Friday at the Cabinet Meeting, decision paragraph 13 reads as follows, and I quote –

“Cabinet took note of progress achieved so far in regard to the projected construction of 12,000 residential units as announced in the Budget Speech 2021. The New Social

Living Development Limited has issued a request for proposal for the appointment of Project Management Consultants in Construction.”

Mr Speaker, Sir, this is a first. I have checked past Cabinet Decisions and this company was never mentioned in the Cabinet Decision until last Friday. Mr Speaker, Sir, I am here intervening with regard to a project –

- (1) entailing a colossal investment of Rs12b. which I believe is public money unless the hon. Minister tells us otherwise later on in his intervention;
- (2) which comprises of Government led Housing facilities being provided to some 12,000 families which has to be made on a just, fair, equitable and transparent manner, and finally
- (3) which comprises of 12,000 units that have to be constructed as per expected international norms and standards and ensure that they do not contain any inherent structural defects or any other defects whatsoever but are safe and secure buildings in the long term, *un toit pour tout pour la vie*, there I say.

So, Mr Speaker, Sir, firstly what is this new company? As per company search effected this morning, the New Social Living Development Company was created in May 2019 with its registered Office at Wall Street, Ground Floor, Sicom Tower, Cybercity, Ebène. Secondly, who are its shareholders? The new company is wholly owned by the NHDC, therefore, a wholly owned subsidiary of NHDC. The new company purely and simply is a special purpose vehicle created under the NHDC to spearhead this project and its mandate is to act as the Implementing Agency of the Government of Mauritius for the construction of 12,000 residential units which I mentioned earlier.

Nowadays, SPVs are very common in the private sector. In that after the projects it can easily be dismantled and all the main actors get back to their respective core businesses but creating an SPV under the NHDC what can that entail in our case at hand. Firstly, both NHDC and MHC are public bodies under the Public Procurement Act and therefore have to operate under its legal framework regarding its procurement, tendering processes, etc., but the new company does not fall under the purview of the PPA. So, it would appear that there is an attempt to bypass the PPA through the SPV. This might lead to a *festival de contrat* as the newspaper has been writing so much about this these days and oh, yes, we surely do not have a short memory, Mr Speaker, Sir, especially not me.

This country has had its share of parastatal owned SPVs in the recent past with the CEB and its three private companies, which created a ruckus on matters concerning good governance, procurement, allocation of contracts, recruitment and conditions of employment with the CEO of CEB Fibre Net earning Rs350,000 per month and that too in dollars.

This side of the House had voiced out its apprehension regarding these SPVs and finally they have or being dismantled. CEB green is now operating as a Unit of CEB and its workforce are now employees of the CEB. Secondly, if the new company is dismantled after the project as it is only as the implementing agency of the Government of Mauritius, who will remain accountable and liable for the ensuing matters? Contractual agreements will be entered into by the company with contractors and we are here talking about both local contractors and potentially foreign contractors without needing to be in joint ventures with local partners as prospective agreement amendments to the construction and to the CIDB Act before the House entails.

Who will then have the mandates to take actions regarding terms and conditions, post project delivery if the new company is dismantled after the project? It is noteworthy that as per job adverts of the employment contract is for an outright duration of three years only, and thirdly, about the company still, Mr Speaker, Sir, who are the Directors of this new company? I am tabling copy of the list of Directors of both the NHDC and the new company. Errors may happen but we learn from our lessons, *the proof of the pudding is in the eating*, the Ex-Chairman of the CEB was also at the same time sitting as Chairman on the Board of Directors of the subsidiaries. This resulted in a situation of poor governance, bad leadership, no proper accountability and transparency. Simply put, this was a one man show from holding to subsidiaries. Why am I bringing this at the forefront today is simply yet again we have a case where the Chairman of the NHDC, the holding company, is also sitting on the Board of the new company as Chairman. This creates a situation compromising effective Chairmanship and subsidiary governance. The Chairman of the holding will only be looking into its own decision reaching the subsidiary level. Is this what this Government earmarks as professionalism, good governance and good leadership? As I said, initially, this matter raises important matter of public concern, Mr Speaker, Sir and you can trust that I have tried to be as brief as I can and I would end by raising a few issues which would require a reply from the hon. Louis Steven Obeegadoo, Deputy Prime Minister, Minister of Housing and Land Use Planning, Minister of Tourism.

Firstly, with the experience of the NHDC in this sector and the existing competence and capabilities of some 125 staff or so, ought not this project be undertaken by the NHDC. If the staff are not enough, surely recruitment can be made to beef up the staff of the NHDC rather than creating a new company. With the creation of a new company, substantial operational expenses are being incurred with the recruitment of a new CEO, staffing, lease of premises at Wall Street in Ébène, etc.

Will these extra expenses not increase the sale price of the Social Housing Unit because cost will have to be passed on? With the project being undertaken by the new company, it will not be under the legal purview of the PPA, Public Procurement Act, and we are here talking about a project of Rs12 billion. Wouldn't it be wise therefore to have the project undertaken by the NHDC for transparency and accountability? Fourthly, the new company, will it be subject to the scrutiny of Parliament and accountable to the National Audit Office?

Fifth, with the same Chairman on both holding and subsidiary, does not that create a situation of one man show, creating room for corruption and poor decisions regarding an investment of Rs12 billion? This is surely not good governance, Mr Speaker, Sir.

Sixth, a company has a separate legal entity. If dismantled as is the case of the CEB green, a signatory party on the one hand to contractual agreements, how will legal actions be entertained?

And seventh, is this project being spearheaded by an SPV so that all parties have the chance to get away scot-free so that there is no one who will be held accountable for any mismanagement, professional negligence, etc?

I thank you and I look forward to listening to the hon. Deputy Prime Minister.

The Deputy Prime Minister, Minister of Housing and Land Use Planning, Minister of Tourism (Mr S. Obeegadoo): Mr Speaker, Sir, thank you. Many points have been raised; I have a maximum of 15 minutes to respond. Let me thank the hon. Member for the opportunity provided to me to enlighten Members as to the implementation of this mega project of construction of 12,000 new housing units.

Without that project, the Adjournment Matter would not have had its *raison d'être*. So, let me perhaps, quickly, set the context. We all agree that there is a stark mismatch in Mauritius right now as between the demand for housing and the supply which a dysfunctional market cannot meet. Hence, Government intervention and the creation nearly 30 years ago,

by my now departed friend and mentor, Jayen Cuttaree of the NHDC, because the then existing CHA precisely was not adequate. It had done good work but it was not adequate to rise to the scale of the new challenges. History of social housing in Mauritius since 1991 is very instructive. Let me remind you that between 1991 and 2019 when this Government comes into Office, 14,451 housing units were built, of which only some 1,900 over the 2005 to 2014 decade. *14,451 maisons en vingt-huit ans, donc seulement 1,900 sur dix ans, 2005 à 2014.*

The result is a total disconnect between supply and demand. People are suffering and when we came into Office, this Government, there was a waiting list assessed by the NHDC approximately at around 20,000. So, how does a progressive Government respond to such a situation?

Last Budget Speech, the Minister of Finance, Economic Planning and Development, and my good friend, came forward with this revolutionary concept of a massive programme of social housing, construction of 12,000 residential units for Mauritian families with a monthly income of up to Rs60,000, unprecedented, but however ambitious it is in the light of historical experience, reminder 14,500, 1991 to 2019, and here we are purporting to build over and above the ongoing Social Housing Programme of the NHDC an additional 12,000 units but this was the only possible response to the suffering of thousands of our compatriots in need of affordable and decent housing but asked the hon. Gentleman and the Opposition for that matter outside this House. Why a new Special Purpose Vehicle or entity by the name of the NSLD? Now, very briefly, let me recall that an SPE or SPV is a distinct legal entity which is created for a limited or specific purpose. We have the NHDC; we have this *ad hoc* Programme for 12,000 houses. It enables Government to implement projects more rapidly and effectively, based on innovative approaches to partner with private parties and civil society, and can mobilise financing using tools more appropriate for the purpose and general Government financing, which relies mainly on borrowing. An SPE also allows for the sharing of risks which a Government Entity would have otherwise to bear *in toto*. Such a consideration has become more important after the great recession, and now, the COVID crisis is prompting Governments across the world to seek new forms of financing and operation in the delivery of public services. SPEs or SPVs are desirable when the objective is complex and how to attain it is not obvious.

Moreover, an SPV is also useful when there is uncertainty in the framework that may affect the optimal design and/or most cost-effective way of proceeding. This is why SPEs are

increasingly popular, as the hon. gentleman has just said, not just in the public sector, but also in the private sector. For example, due to the extreme market volatility caused in part by the general pandemic, Wall Street in the US is using special purpose acquisition companies as an alternative to the traditional International Public Offerings (IPOs). An SPE has a single objective, it offers flexibility to more effectively attain the objective set out, but this comes at a cost of not being able to perform more generalised functions as a typical parastatal, or Government Department.

The IMF notes, I quote, that –

“SPEs are intentionally created as separate legal entities, with various degrees of operational autonomy, and various arrangements establishing their relationships to the originators, partners and investors.”

International experience reveals a very pragmatic approach to SPEs. There are many different approaches, not only across the globe but also within countries. Now, in our own housing sector, what is the advantage of an SPE? Firstly, rapidly building social housing, while ensuring social integration is a complex task with an uncharted path to success.

(Interruptions)

I am very pained by the fact that I listened attentively and the hon. gentleman seems to be intent on listening to his colleague. So, I wonder what is the point of my, out of courtesy and politeness, in responding to all the different questions.

(Interruptions)

I will not give way unless this is a point of order. So, allow me to proceed and, maybe, you might be polite enough to listen to my response.

(Interruptions)

An hon. Member: *Malélvé!*

Mr Speaker: What is happening here?

(Interruptions)

The Minister is replying!

Mr Obeegadoo: The first point is that rapidly building social housing, while ensuring social integration, is a complex task with an uncharted path to success. This means that the

whole endeavour will require a collaboration and input from partners in forms that cannot be anticipated at the outset.

Traditional approaches used by all Governments - this is my second point - have given the complexity of the task, at times, failed to produce the desired results, even when financing was provided in the budget. This is the history of social housing.

Thirdly, success may require formal and informal partnerships with the private sector, with Civil Society that cannot be accommodated by existing parastatals or Government Departments.

Fourthly, innovation would be the key to success, and fifthly, speed and flexibility may require new forms of working that are not in line with existing schemes of service and processes that are innovative and not anticipated by existing rules and regulations.

Now, clearly, all such innovation needs to be transparent and ensure value for money, but the approach that will deliver this for low and middle income public housing may be very different throughout what works in other cases. Specifically, Mr Speaker, Sir, the eventual test of whether the SPV was worth setting up and was successful is whether it met its objectives in a timely and more cost-effective manner than through traditional partnerships. The role of the NSLD is to ensure the cost-efficient construction of 12,000 units in the shortest possible time, but in line with the principles of sustainable and inclusive housing.

Let me be even more specific and explain why we have opted for the NSLD –

- (i) The existing agency for social housing construction, the NHDC has delivered to the population 951 houses since this Government is in place and is committed to the construction and sale of some 4,500 housing units between now and 2024. This is apart from the 12,000. The NHDC must build and sell 4,500 houses on top of the 1,000 it has already built, just now since the election. Moreover, it manages the Roof Slab Grant Scheme; it undertakes rehabilitation works on existing NHDC Housing Estates; it oversees Syndic matters over 41 Housing Estates. The NHDC has achieved a lot over the years and I commend its staff for excellent work.

By the way, we did not refuse to renew the contract of the former CEO. He decided not to renew his contract.

With its existing resources, the NHDC Ltd is already overstretched and does not have the resources to undertake this *ad hoc* project of construction of an

additional 12,000 units. The NHDC, let the hon. gentleman rest assured, will go on. The NHDC will go on and this project of its wholly owned subsidiary, the NSLD, will proceed concurrently with all the on-going housing projects of the NHDC Ltd;

- (ii) To ensure timely implementation of the most ambitious project in the history of social housing, Government will have to work in close partnership with the private sector in respect of both expertise and financing. Selected contractors following the tendering exercise will be called upon to part-finance construction works and the corresponding amount will be refunded to them on completion of the project. Under this financing mode, the private sector is being encouraged to invest in Public Sector Capital Projects to support our economic recovery;
- (iii) Whereas the NHDC and the NEF have been catering for the poorer sections of the community and the MHC, generally offering loans to the, let us say, middle classes, the NSLD will, in addition to the low-cost housing, focus on a new segment of the housing market, and will rise to a new challenge the provision of demand-driven housing for the middle class;
- (iv) The NSLD is mandated to innovate, to break with the past, to innovate by revisiting the whole concept of housing, building for the future, with an emphasis on green sustainable and healthy living, within an overall objective of social and economic integration of the new housing communities;
- (v) The housing complex of the future will resort to greener technology, with more energy efficiency and lower carbon footprint, will provide for tapping the potential of solar energy and rainwater harvesting, and environment-friendly waste disposal, and I can go on and on and on, but suffice it to say that for all these reasons, Government has decided that the construction of the 12,000 residential units, as a special project, as distinct from the on-going programme of the NHDC, will be entrusted to the NSLD as a special purpose vehicle or entity.

Is this a crime, Mr Speaker, Sir? It is a crime to resort to an SPV, as the Opposition would have us believe? Would you know, Mr Speaker, Sir, that there are perhaps 20 SPVs, if not more, created by various Governments over the years. Would you wish me to provide

examples? The Informatics Park Ltd, in 1993; the State Investment Finance Corporation Ltd, in 1998; the BPML Freeport Services Ltd, in 2001; the Airport Terminal Operations Ltd, in 2008; the Polytechnics Mauritius Ltd, in 2013; the Metro Express Ltd, in 2018. So, why the hue and cry now? Mr Speaker, Sir, the NSLD is not a new creation. It was incorporated in May 2019, almost two years ago, as a wholly owned company, subsidiary of the NHDC itself wholly stated. It was precisely created to construct 6,000 houses on a PPP basis using a novel approach based on part-financing of construction by the private sector, as now envisaged for the 12,000 housing units. So, why the hue and cry now? In any event, the 2021 Budget provided a year later the opportunity to make good use of the NSLD one year after it was created. In August 2020, the NSLD Board was reconstituted and I see no issue about the Chairperson of the NHDC also being the Chairperson of a subsidiary, the NSLD. I cannot comprehend how that could be an issue of good governance and I would invite the hon. gentleman to quote chapter and verse on relevant treaties on good governance that do not recommend such a practice. On the contrary, we thought it would ensure continuity as between the work of the NHDC and the work of the NSLD. Now, the NSLD has been working and I am surprised to learn that the hon. gentleman was not aware. In all my interviews, in all my statements to the Press, I have mentioned the NSLD since August last year and it has been working on the identification and obtention of eventual construction sites as a function of land requirements in all our constituencies, and I am speaking to all Members of this House. The NSLD launched an expression of interest at the end of last year; subsequently, a request for proposal for procurement of Project Management Consultants in construction since the beginning of this year. So, why all the hue and cry now? And it adopted the normal procedure, and well-established procedures, and it is expected that contracts for the Project Management Consultant will be awarded by May 2021. The NSLD has resorted to an open and public advertisement for the recruitment of key staff, a service level agreement or MOU will define and structure the interaction between NSLD and NHDC.

So, to finish, Mr Speaker, Sir, let me reassure the hon. gentleman and all colleagues of the House that governance and procurement matters of the NSLD will conform to acceptable procedures. The operation of the NSLD will be as transparent as is that of the NHDC and I shall be only too happy, in line with the principles of Parliamentary Accountability to provide relevant information to the House as and when the hon. gentleman or any other Member of the House for that matter to put a relevant question relating to the 12,000 construction projects or the NSLD. So, I wish to thank the hon. gentleman, the First Member for Port

Louis Central and Port Louis South, in the hope that I have dispelled some of the misunderstandings and let me reassure him that I will continue to welcome constructive criticisms and suggestions to help us achieve this unique and unprecedented opportunity to uphold the right to decent housing as a fundamental human right for each and every Mauritian.

Thank you, Mr Speaker, Sir.

Mr Speaker: Hon. Members, let us call it a day!

At 5.07 p.m., the Assembly, was, on its rising, adjourned to Tuesday 27 April 2021 at 11.30 a.m.

WRITTEN ANSWERS TO QUESTIONS

HORSERACING - INQUIRIES

(No. B/221) Mr F. Quirin (Third Member for Beau Bassin & Petite Rivière) asked the Prime Minister, Minister of Defence, Home Affairs and External Communications, Minister for Rodrigues, Outer Islands and Territorial Integrity whether, in regard to horseracing, he will, for the benefit of the House, obtain from the Commissioner of Police, information as to if alleged attempts to rig some races during the International Racing Day in December 2019 and the first race meeting of the 2020 season have been reported and, if so, indicate if inquiries have been initiated in relation thereto and the outcome thereof.

(Withdrawn)

PAY RESEARCH BUREAU REPORT- PUBLICATION

(No. B/222) Mr E. Juman (Fourth Member for Port Louis Maritime & Port Louis East) asked the Prime Minister, Minister of Defence, Home Affairs and External Communications, Minister for Rodrigues, Outer Islands and Territorial Integrity whether, in regard to the next Report of the Pay Research Bureau, he will state the expected date of publication thereof.

(Withdrawn)

COVID-19 HIGH-LEVEL COMMITTEE - PACK & BLISTER COMPANY

(No. B/225) Mr D. Nagalingum (Second Member for Stanley & Rose Hill) asked the Prime Minister, Minister of Defence, Home Affairs and External Communications, Minister for Rodrigues, Outer Islands and Territorial Integrity whether, in regard to the Covid-19 High Level Committee, he will state –

- (a) when the Pack and Blister company was introduced thereto, and
- (b) who acted as intermediary thereof thereto.

(Withdrawn)

COVID-19 LOCKDOWN - NEETEE SELEC LTD - CONTRACTS

(No. B/261) Mr D. Nagalingum (Second Member for Stanley & Rose Hill) asked the Minister of Labour, Human Resource Development and Training, Minister of Commerce and Consumer Protection whether, in regard to Neetee Selec Ltd., he will, for the benefit of the House, obtain from the State Trading Corporation, information as to the mode of payment for the contracts awarded thereto during the 2020 Covid-19 lockdown.

(Withdrawn)

CONSTITUENCY NO. 17 - FLOOD-PRONE AREAS - SURVEY

(No. B/264) Mr S. Dhunoo (Third Member for Curepipe & Midlands) asked the Minister of National Infrastructure and Community Development whether, in regard to the flood-prone areas in Constituency No. 17, Curepipe and Midlands, he will, for the benefit of the House, obtain from the Land Drainage Authority, information as to if a survey has been carried out in relation thereto and, if so, indicate the outcome thereof.

(Withdrawn)

LA BRASSERIE - FOOTBALL PLAYGROUND PROJECT

(No. B/265) Mr S. Dhunoo (Third Member for Curepipe & Midlands) asked the Minister of National Infrastructure and Community Development whether, in regard to the implementation of the football playground project in La Brasserie by the National Development Unit, he will state where matters stand.

(Withdrawn)

**ROBINSON ROAD GOVERNMENT SCHOOL, CUREPIPE -
RECONSTRUCTION**

(No. B/266) Mr S. Dhunoo (Third Member for Curepipe & Midlands) asked the Vice-Prime Minister, Minister of Education, Tertiary Education, Science and Technology whether, in regard to the proposed demolition of old blocks and the re-construction of new ones at the Robinson Road Government School, in Curepipe, she will state where matters stand.

(Withdrawn)

DISABILITY BILL - INTRODUCTION

(No. B/270) Ms J. Bérenger (First Member for Vacoas & Floréal) asked the Minister of Social Integration, Social Security and National Solidarity whether, in regard to the proposed introduction of a Disability Bill in the Assembly, she will state where matters stand.

Reply: The Disability Bill is currently at the level of the State Law Office.

AGALEGA PROJECTS – EIA REPORTS

(No. B/271) Ms J. Bérenger (First Member for Vacoas & Floréal) asked the Minister of Environment, Solid Waste Management and Climate Change whether, in regard to the projects being implemented at Agalega, he will state –

- (a) if same are exempt from the requirement of the Environment Impact Assessment licence and, if so, why and, if not, will the EIA reports be made public and, if not, why not;
- (b) the actions –
 - (i) taken to mitigate the negative impacts thereof, if any, on the environment, and
 - (ii) that will be taken for the rehabilitation of the ecosystems thereat, if required, and
- (c) who is carrying out environmental monitoring onsite.

(Withdrawn)

**MINISTRY OF AGRO-INDUSTRY & FOOD SECURITY AND WORLD
BANK- REIMBURSABLE ADVISORY SERVICES AGREEMENT**

(No. B/274) Mr D. Ramful (First Member for Mahebourg & Plaine Magnien) asked the Attorney General, Minister of Agro-Industry and Food Security whether, in regard to the Reimbursable Advisory Services Agreement signed between the Ministry of Agro-Industry and Food Security and the World Bank in the context of the study on the viability of the sugarcane sector in Mauritius, he will state if the World Bank has submitted its Report and, if so, indicate the recommendations contained therein.

(Withdrawn)

**NATIONAL COVID-19 DEPLOYMENT AND VACCINATION
PROGRAMME - FRONTLINE WORKERS**

(No. B/275) Mr D. Ramful (First Member for Mahebourg & Plaine Magnien) asked the Minister of Health and Wellness whether, in regard to the National Covid-19 Deployment and Vaccination Programme, he will state the number of frontline workers having been –

- (a) vaccinated as at to date;
- (b) placed in quarantine centers, and
- (c) tested Covid-19 positive.

(Withdrawn)

BUDGET DEFICIT 2020/2021 - BREAKDOWN

(No. B/276) Mr D. Ramful (First Member for Mahebourg & Plaine Magnien) asked the Minister of Finance, Economic Planning and Development whether, in regard to the budget deficit for 2020/2021, he will give a breakdown of the –

- (a) estimated total revenue, and
- (b) total expenditure for the financial year.

(Withdrawn)