THE ALLIED HEALTH PROFESSIONALS COUNCIL ACT 2017

Act No. 9 of 2017

I assent

BIBI AMEENAH FIRDAUS GURIB-FAKIM

14 July 2017

President of the Republic

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FIRST SCHEDULE
SECOND SCHEDULE

An Act

To establish the Allied Health Professionals Council of Mauritius

ENACTED by the Parliament of Mauritius, as follows –

PART I – PRELIMINARY

1. Short title
This Act may be cited as the Allied Health Professionals Council Act 2017.

2. Interpretation
In this Act –
“allied health profession” means a profession specified in the first column of the First Schedule;
“allied health professional” means a person who is registered as such under section 17;
“annual fee” means the fee referred to in section 20;

“annual list” means the annual list of allied health professionals published under section 21;

“Chairperson” means the Chairperson of the Council;

“Code of Practice” means the Code of Practice, for each allied health profession, prescribed under section 39;

“committee” means a committee set up by the Council under section 10;

“Council” means the Allied Health Professionals Council of Mauritius established under section 3;

“delegated power” means the power delegated to the Council by the Public Service Commission, under section 89(2)(b)(i) of the Constitution and subject to Part IVA of the Public Service Commission Regulations, to enquire and report into any complaint of professional misconduct, malpractice or negligence against an allied health professional appointed by the Public Service Commission;

“Disciplinary Tribunal” means the Disciplinary Tribunal set up under section 15 of the Medical Council Act;

“foreign allied health professional” means a person registered as such under section 18;

“member”—

(a) means a member of the Council; and

(b) includes the Chairperson;

“Minister” means the Minister to whom responsibility for the subject of health is assigned;

“Ministry” means the Ministry responsible for the subject of health;

“officer” means an officer of the Council appointed as such under section 14;
“practising license” means a license issued under section 17 or 18, as the case may be;
“preliminary investigation” means an investigation carried out under section 25;
“Registrar” means the Registrar of the Council appointed as such under section 12;
“resident” has the same meaning as in the Immigration Act;
“visiting allied health professional” means a person registered as such under section 19.

PART II – THE ALLIED HEALTH PROFESSIONALS COUNCIL OF MAURITIUS

3. Establishment of Council

(1) There is established for the purposes of this Act the Allied Health Professionals Council of Mauritius.

(2) The Council shall be a body corporate.

4. Objects of Council

The Council shall –

(a) regulate the professional conduct of allied health professionals; and
(b) promote the advancement of allied health professions.

5. Functions of Council

The Council shall –

(a) register allied health professionals;
(b) temporarily register non-citizens, other than non-citizens who are residents of Mauritius, as foreign allied health professionals or visiting allied health professionals;
(c) exercise and maintain discipline in the allied health professions;
(d) prescribe, for each allied health profession, a Code of Practice on standards of professional conduct and ethics, and monitor compliance therewith;

(e) (i) approve, conduct or cause to be conducted examinations, training courses, programmes, lectures, seminars or conferences, including continuing professional development courses or programmes, for allied health professionals;

(ii) approve the institutions or persons who will conduct the examinations, training courses, programmes, lectures, seminars or conferences, including continuing professional development courses or programmes;

(f) cooperate with any other institution having objects wholly or partly similar to its objects;

(g) publish the annual list;

(h) advise the Minister on matters pertaining to this Act; and

(i) perform such other functions as are conducive to its objects.

6. **Powers of Council**

The Council shall have such powers as may be necessary to discharge its functions most effectively and may, in particular –

(a) enter into any contract or agreement;

(b) set up a committee of appropriate persons to assist it in the exercise of its functions;

(c) sell or exchange any property;

(d) make or receive any grant or donation, other than to, or from, an allied health professional, a foreign allied health professional or a visiting allied health professional;

(e) borrow money, other than from an allied health professional, a foreign allied health professional or a visiting allied health professional, and raise funds; and

(f) collect or receive any fee, rental, interest or other sum which may lawfully accrue to it.
PART III – MANAGEMENT OF COUNCIL

7. Composition of Council

(1) The Council shall consist of –

(a) a Chairperson, having at least 5 years’ experience as an allied health professional and elected from among allied health professionals;

(b) a representative of the Ministry;

(c) a representative of the Prime Minister’s Office;

(d) a representative of the Attorney-General’s Office;

(e) a representative of the Ministry responsible for the subject of education;

(f) 2 persons who are not allied health professionals; and

(g) one allied health professional, from each of the cluster of allied health professionals specified in the Second Schedule, who has at least 5 years’ experience as an allied health professional.

(2) A member, other than an ex officio member –

(a) referred to in subsection (1)(a) shall hold office for a term not exceeding 3 years;

(b) referred to in subsection (1)(f), shall –

(i) be appointed by the Minister; and

(ii) hold office for a term not exceeding 3 years and may be eligible for reappointment;

(c) referred to in subsection 1(g), shall –

(i) after consultation with the association or group which represents the interests of the allied health profession, be appointed by the Minister; and

(ii) hold office for a term not exceeding 3 years and may be eligible for reappointment for one additional term.
(3) The names of the members of the Council shall be published in the Gazette as soon as possible after the Council is constituted.

(4) Every member shall be paid such fee or allowance as the Council may, with the approval of the Minister, determine.

8. Vacancy in membership of Council

(1) A member, other than an ex officio member, shall cease to hold office –

(a) on completion of his term of office; or

(b) on his resignation, by notice in writing given to the Registrar.

(2) Where a member referred to in section 7(1)(a), (f) or (g) resigns, his seat shall become vacant as from the date on which the Registrar receives the notice.

(3) Where a vacancy occurs in the membership of the Council, the vacancy shall be filled, in the case of a member who is appointed by the Minister, by a fresh appointment.

(4) A person appointed under subsection (3) shall hold office for the remainder of the term of office of the person whom he replaces.

9. Meetings of Council

(1) The Council shall meet as often as the Chairperson may determine but at least once every 2 months at such time and place as he may determine.

(2) At any meeting of the Council, 7 members shall constitute a quorum.

(3) Where the Chairperson is absent from a meeting of the Council, the members present shall elect one of the members, who is an allied health professional, to chair the meeting.
(4) (a) A special meeting of the Council –
   (i) may be convened by the Chairperson at any time; or
   (ii) shall be convened by the Registrar within 5 days of the receipt of a request in writing signed by not less than 5 members.

(b) Any request made under paragraph (a)(ii) shall specify the purpose for which the special meeting is to be convened.

(5) The Council may, where it considers necessary, co-opt such other persons with relevant expertise not already available to the Council, to assist it in relation to any matter before it.

10. Committees

(1) The Council may set up such committees as may be necessary to assist it in the discharge of its functions consisting of at least one member of the Council and such other persons as may be co-opted by the Council.

(2) A committee shall –

(a) meet –
   (i) as often as is necessary at such time and place as the chairperson of the committee may determine; or
   (ii) as and when required by the Council;

(b) regulate its meetings and proceedings in such manner as it may determine; and

(c) submit a report to the Council within such time as the Council may determine.

11. Disclosure of interest

(1) Where any member, or any person related to the member by blood or marriage, has any pecuniary or other material interest in, or in relation to, any matter before the Council or a committee, that member shall –

(a) disclose the nature of the interest before or at the meeting convened to discuss the matter; and
(b) not take part in any deliberations relating to that matter.

(2) A disclosure of interest made under subsection (1) shall be recorded in the minutes of proceedings of the meeting of the Council or committee, as the case may be.

12. **Registrar**

(1) There shall be a Registrar who shall be appointed by the Council on such terms and conditions as the Council may determine.

(2) The Registrar shall be an allied health professional having at least 5 years’ experience as an allied health professional.

(3) The Registrar shall be responsible for –

(a) the proper administration of the Council;

(b) executing all decisions of the Council; and

(c) performing such other duties as the Council may assign to him.

(4) The Registrar shall act as Secretary to the Council and shall, for every meeting of the Council –

(a) give notice of the meeting to the members;

(b) prepare and attend the meeting; and

(c) keep minutes of proceedings of the meeting.

(5) The Registrar may also be required to act as the treasurer of the Council.

(6) The Registrar shall have such other functions as may be conferred upon him by the Council.

(7) Where the Registrar is for any reason unable to discharge his functions, the Council may appoint another person to act as Registrar.
13. **Delegation**

The Council may, subject to such instructions as it may give, delegate to the Registrar such of its functions and powers as may be necessary for the effective management of the day to day business and activities of the Council, other than the power to –

(a) sell or exchange any property;
(b) make or receive any grant or donation;
(c) borrow money or raise funds.

14. **Officers of Council**

(1) The Council may, on such terms and conditions as it may determine, appoint such officers as it considers necessary for the proper discharge of its functions.

(2) The Council shall make provision to govern the conditions of service of its officers and, in particular, to deal with –

(a) the appointment, dismissal, discipline, pay and leave of, and the security to be given to, officers;
(b) appeals by officers against dismissal and any other disciplinary measure.

(3) Every officer shall be under the administrative control of the Registrar.

15. **Powers of Minister**

(1) The Minister may give such directions of a general nature to the Council, not inconsistent with this Act, as he considers necessary in the public interest, and the Council shall comply with the directions.

(2) The Minister may require the Council to furnish any information or document in respect of its activities, and the Council shall supply such information or document.
PART IV – REGISTRATION OF ALLIED HEALTH PROFESSIONALS, FOREIGN ALLIED HEALTH PROFESSIONALS AND VISITING ALLIED HEALTH PROFESSIONALS

Sub-Part A – Practice of Allied Health Profession

16. Practice of allied health profession

No person shall practise an allied health profession unless he is –

(a) registered as an allied health professional; or
(b) temporarily registered as a foreign allied health professional or visiting allied health professional.

Sub-Part B – Allied Health Professional

17. Registration as allied health professional

(1) A person may be registered as an allied health professional where he –

(a) satisfies the Council that he –
   (i) is a citizen, or resident, of Mauritius;
   (ii) has not been convicted of an offence involving fraud or dishonesty in any country; and
   (iii) has not been disqualified or deregistered as an allied health professional on account of professional misconduct, malpractice, negligence, fraud, dishonesty or breach of a code of practice in any country;

(b) holds the appropriate qualification and experience specified in the second column of the First Schedule in respect of the allied health profession he wishes to practise;

(c) satisfies the Council that his qualifications are recognised in the country where he has studied and would have entitled him to practise as an allied health professional in that country; and
(d) pays such registration fee as may be prescribed.

(2) An application for registration as an allied health professional shall be made to the Registrar in such form and manner as the Council may determine, and shall be accompanied by –

(a) the applicant’s birth certificate and National Identity Card or any other acceptable proof of his identity;

(b) the original or a certified copy of the applicant’s degree, diploma or equivalent qualification;

(c) such processing fee as may be prescribed; and

(d) such additional document or information the Registrar may require.

(3) On receipt of an application made under subsection (2), the Registrar shall refer the application to the Council for its determination.

(4) (a) The Council may, where it considers necessary, call an applicant for an interview.

(b) The Council shall, within 30 days of the receipt of an application, grant or reject the application and it shall notify the applicant of its decision.

(5) (a) Where the Council grants an application, it shall, on payment of such registration fee as may be prescribed, register the applicant as an allied health professional and issue to him a practising licence, subject to such terms and conditions as the Council may determine.

(b) Subject to this Act, a practising licence issued under this section shall be valid for a period of one year and may be renewed subject to the payment of such annual fee as may be prescribed.

(c) Where the Council is satisfied that an allied health professional has damaged or lost his practising licence, it may, on payment of such fee as may prescribed, issue a duplicate practising licence to him.
(d) Where the name of an allied health professional is removed from the register, his practising licence shall cease to be in force.

Sub-Part C – Foreign Allied Health Professional

18. Temporary registration as foreign allied health professional

(1) A non-citizen may be temporarily registered as a foreign allied health professional where he –

(a) undertakes to work in a company or other body where the relevant expertise required in the allied health profession is not available in Mauritius;

(b) holds a work permit, is exempted from holding a permit under the Non-Citizens (Employment Restriction) Act or holds an occupation permit under section 9A of the Immigration Act;

(c) satisfies the requirements referred to in section 17(1)(a) (ii) to (iv), (b) and (c); and

(d) pays such registration fee as may be prescribed.

(2) An application for registration as a foreign allied health professional shall be made to the Registrar in such form and manner as the Council may determine, and shall be accompanied by –

(a) the applicant’s birth certificate and, where necessary, his passport;

(b) (i) the original or a certified copy of the applicant’s degree, diploma or equivalent qualification; and

(ii) where applicable, a certified translation in English or French of his degree, diploma or equivalent qualification, where such qualification is in a language other than English or French;

(c) documentary evidence that the applicant’s expertise in the allied health profession is not available in Mauritius;
(d) the applicant’s work permit, where applicable, or occupation permit;
(e) such processing fee as may be prescribed; and
(f) such additional document or information as the Registrar may require.

(3) On receipt of an application made under subsection (2), the Registrar shall refer the application to the Council for its determination.

(4) (a) The Council shall, where it considers necessary, call an applicant for an interview.

(b) The Council shall, within 30 days of the receipt of an application, grant or reject the application and it shall notify the applicant of its decision.

(5) (a) Where the Council grants an application, it shall, on payment of such registration fee as may be prescribed, temporarily register the applicant as a foreign allied health professional and issue to him a practising licence, subject to such terms and conditions as the Council may determine.

(b) Subject to this Act, a practising licence issued under this section shall be valid for a period of one year and may be renewed subject to the payment of such annual fee as may be prescribed.

(c) Where the Council is satisfied that a foreign allied health professional has damaged or lost his practising licence, it may, on payment of such fee as may prescribed, issue a duplicate practising licence to him.

(d) Where the name of a foreign allied health professional is removed from the register, his practising licence shall cease to be in force.
Sub-Part D – Visiting Allied Health Professional

19. Temporary registration of visiting allied health professional

(1) A non-citizen may be temporarily registered as a visiting allied health professional where –

(a) he is engaged in Mauritius in the implementation of a Government scheme agreed upon by the Government of Mauritius and the World Health Organisation or any other similar international agency;

(b) he has been invited to offer his services under a scheme approved by the Ministry; or

(c) he visits Mauritius for the purpose of teaching, research or study in an allied health profession under a scheme approved by the Government of Mauritius.

(2) The Ministry shall, on behalf of the non-citizen, make all necessary arrangements for him to be temporarily registered as a visiting allied health professional with the Council.

(3) A visiting allied health professional shall be exempted from the payment of any fee prescribed under this Act.

Sub-Part E – Annual Fee

20. Annual fee

(1) Subject to subsection (2), every allied health professional or foreign allied health professional shall, on or before 31 January in every year, pay to the Registrar such annual fee as may be prescribed, in respect of the year commencing on 1 January of that year.

(2) Where an allied health professional or a foreign allied health professional fails to comply with subsection (1), he shall be liable to pay the annual fee, together with a surcharge of 50 per cent of the annual fee, by 15 February in the year in respect of which the fee is due.
(3) Where an allied health professional or a foreign allied health professional fails to pay the annual fee together with the surcharge required under subsection (2), the Council may deregister that allied health professional or foreign allied health professional.

(4) Where an allied health professional or a foreign allied health professional is deregistered under subsection (3), the Council shall cause the Registrar to remove the name and other particulars of that allied health professional or foreign allied health professional from the appropriate register.

(5) The Council may, where an allied health professional or a foreign allied health professional is deregistered under subsection (3), restore the name and other particulars of that allied health professional or foreign allied health professional on the appropriate register on good cause shown and on payment of the annual fee together with its surcharge.

**Sub-Part F – Annual List**

21. **Annual list**

(1) The Registrar shall, not later than the end of February in every year, transmit to the Minister an annual list of all allied health professionals registered for that year, including foreign allied health professionals and visiting allied health professionals temporarily registered for that year.

(2) The Council shall, not later than 15 March in every year, publish in the Gazette the annual list referred to in subsection (1).

**Sub-Part G – Register**

22. **Register**

(1) The Registrar shall keep a register in respect of allied health professionals, foreign allied health professionals and visiting allied health professionals, or such other register as may be necessary, in such form and manner as the Council may determine.
(2) The Registrar shall, in respect of every allied health professional, foreign allied health professional and visiting allied health professional, enter in the appropriate register—

(a) his name, his address, his qualification and any other relevant particulars;
(b) any change in his particulars;
(c) where he is suspended or deregistered, an annotation to that effect;
(d) such other particulars as the Council may determine.

(3) (a) Subject to subsection (2), where after registration, an allied health professional obtains any additional qualification in respect of his profession, the Council may, on application made by the allied health professional, add the additional qualification to the allied health professional’s particulars in the appropriate register.

(b) An application made under paragraph (a) shall be accompanied by such fee as may be prescribed.

Sub-Part H – Continuing Professional Development

23. Continuing professional development

(1) Notwithstanding section 20 and subject to subsection (2), no person, other than a visiting allied health professional, shall have his name on the annual list unless he has followed, in such manner as may be prescribed, continuing professional development courses or programmes.

(2) Subsection (1) shall not apply to an allied health professional or foreign allied health professional who is excused by the Council on such ground as may be prescribed.
PART V – DISCIPLINE

24. Interpretation of Part V

In this Part –

“allied health professional” includes –

(a) an allied health professional in respect of whom the Council holds a delegated power;

(b) a foreign allied health professional; and

(c) a visiting allied health professional.

25. Preliminary investigation by Council

(1) The Council may investigate any complaint made against an allied health professional which relates to –

(a) professional misconduct, malpractice or negligence;

(b) a breach of the Code of Practice; or

(c) any other act likely to bring the allied health profession into disrepute.

(2) Where the Council investigates a complaint under subsection (1), it –

(a) shall notify the allied health professional whose conduct, act or omission is under investigation, of the nature of the complaint against him;

(b) may visit or inspect the premises where the alleged complaint has occurred;

(c) may summon and hear the allied health professional who shall be given an opportunity of being assisted by a legal representative of his choice;

(d) may summon and hear witnesses;
(e) may call for the communication or production of any relevant record, document or article; and

(f) shall submit its report not later than 3 months as from the date the investigation starts.

(3) Where, in the course of a preliminary investigation, any person refuses to communicate or produce any record, document or article on the ground of confidentiality, the Registrar may apply to the Judge in Chambers for an order directing that person to communicate or produce the record, document or article required for the purpose of the investigation.

(4) Where the Judge is satisfied that the record, document or article sought is bona fide required for the purpose of the preliminary investigation, he may make an order under subsection (4).

(5) (a) The Council may, for the purpose of a preliminary investigation, appoint a committee consisting of not less than 3 members.

(b) Any member who –

(i) is closely related to an allied health professional whose conduct, act or omission is under preliminary investigation; or

(ii) has any pecuniary or other personal interest in the subject-matter of a preliminary investigation,

shall disclose his relationship or interest, as the case may be, and refrain from participating in the investigation.

26. Disciplinary proceedings

(1) Where, after a preliminary investigation, the Council considers it necessary to prefer charges against an allied health professional, it shall forward to the allied health professional a statement of those charges and call upon him to state in writing, before such date as the Council may specify, any ground on which he relies to exculpate himself.
(2) Where the allied health professional does not furnish a reply to any charge forwarded under subsection (1) within the period specified or where, in the opinion of the Council, he fails to exculpate himself, the Council may, subject to section 30, institute disciplinary proceedings against him before the Disciplinary Tribunal.

27. Membership of Disciplinary Tribunal

(1) Notwithstanding section 15(1)(b) of the Medical Council Act, in relation to a matter referred to the Disciplinary Tribunal under section 26, the Tribunal shall consist of its President and, subject to subsection (2), 2 members, appointed by the Prime Minister, of whom one shall be from the public sector and one from the private sector, and who shall be allied health professionals with not less than 10 years’ experience.

(2) The Prime Minister shall not appoint a member of the Council as a member of the Disciplinary Tribunal.

28. Disciplinary measures

(1) The Disciplinary Tribunal shall, after having heard any disciplinary proceedings, forward to the Council its report and a copy of its proceedings, including any record, document or article produced, not later than one month after the completion of the proceedings.

(2) The report under subsection (1) shall include –

(a) a finding as to whether the charge has been proved or not, and the reasons for such finding;

(b) details of any matter which, in the Disciplinary Tribunal’s opinion, aggravates or alleviates the gravity of the charge; and

(c) a summing up and such comments as will indicate clearly the opinion of the Disciplinary Tribunal on the subject matter of the disciplinary proceedings.
(3) The Disciplinary Tribunal shall not, in its report, make any recommendation regarding the form of disciplinary measure.

(4) (a) Where the report is in relation to an allied health professional, other than an allied health professional in respect of whom the Council holds a delegated power, and there is a finding that the charge has been proved, the Council may –

(i) administer to him a reprimand or a severe reprimand;

(ii) suspend him as an allied health professional for a period not exceeding 2 years; or

(iii) deregister him as an allied health professional.

(b) Where the report is in relation to an allied health professional in respect of whom the Council holds a delegated power, the Council shall submit its report to the Public Service Commission, in accordance with regulation 46E of the Public Service Commission Regulations.

(5) Where the punishment inflicted by the Public Service Commission on an allied health professional, in respect of whom the Council holds a delegated power, is dismissal or retirement in the interest of the public service, as the case may be, the Council shall determine whether or not it shall suspend or deregister the allied health professional.

(6) A decision of the Council under subsection (4) or (5) shall be communicated to the allied health professional not later than 14 days from the date of the decision.

29. Other disciplinary measures

(1) Without any of the proceedings provided for in section 25, 26 or 28 being instituted, the Council may, where an allied health professional has been convicted of an offence and is serving a sentence of imprisonment or penal servitude –

(a) suspend him as an allied health professional for such time as the Council may determine; or
(b) give him an opportunity to show cause why he shall not be deregistered as an allied health professional.

(2) The Registrar shall cause any suspension or deregistration under this Act to be published in the Gazette and in 2 daily newspapers.

30. Summary proceedings

Where the Council is satisfied, after having carried out a preliminary investigation against an allied health professional, other than an allied health professional in respect of whom it holds a delegated power, that he has committed an act or omission which, in its opinion, is not considered to be of a serious nature, it may inflict upon him a warning or severe warning.

31. Name and other particulars removed from register

(1) The Council shall cause the Registrar to remove from the appropriate register the name and other particulars of any allied health professional who has been deregistered as an allied health professional.

(2) Where the name and other particulars of an allied health professional have been removed from the appropriate register, the name and other particulars of that person shall not be restored to the register except by order of the Council or of the Supreme Court, as the case may be.

(3) The Council may, on its own motion or on application of the allied health professional and after holding such inquiry as it may determine, cause his name and other particulars to be restored to the appropriate register.

PART VI – FINANCIAL PROVISIONS

32. General Fund

The Council shall set up a General Fund –

(a) into which shall be paid –

(i) any grant, donation and contribution received by it;

(ii) any fee, rental or interest; and
(iii) any other sum which may lawfully accrue to it;
(b) out of which all payments required to be made by the Council shall be effected.

33. Donations

Article 910 of the Code Civil Mauricien shall not apply to the Council.

34. Audit

(1) The Council shall keep proper accounts of all sums received or paid.

(2) The accounts for each financial year shall be audited by a licensed auditor appointed by the Council.

(3) In this section –

“financial year” has the same meaning as in section 2A of the Finance and Audit Act;

“licensed auditor” has the same meaning as in the Financial Reporting Act.

PART VII – MISCELLANEOUS

35. Protection from liability

No liability, civil or criminal, shall lie against the Council, the Registrar, any member or officer, in respect of any act done or omitted by it or him in good faith in the discharge of its or his functions, or in the exercise of its or his powers, under this Act.

36. Confidentiality

(1) The Registrar, any member or officer shall not, during or after his relationship with the Council, use or disclose any matter which comes to his knowledge in the discharge of his functions, except for the purposes of administering this Act.
(2) Any person who, without lawful excuse, contravenes subsection (1), shall commit an offence and shall, on conviction, be liable to a fine not exceeding 10,000 rupees and to imprisonment for a term not exceeding 12 months.

37. Appeal against decision of Council

(1) A person who is aggrieved by the decision of the Council –
(a) not to register him; or
(b) to take any disciplinary measure against him,
may apply for a judicial review of the decision before the Supreme Court.

(2) On an application under subsection (1), the Supreme Court may make such order or give such direction in the matter as it may determine.

38. Offences

(1) Any person who –
(a) wilfully and falsely pretends to be an allied health professional, a foreign allied health professional or a visiting allied health professional;
(b) takes or uses any name, title, addition or description implying that he is registered to practise any of the allied health professions,
shall commit an offence.

(2) Any person who, without reasonable excuse, fails to comply with any requirement lawfully imposed by the Council –
(a) for his attendance before such Council;
(b) for the giving of evidence; or
(c) for the production of documents,
shall commit an offence.
(3) Any person who procures or attempts to procure the entry of any name on a register established under this Act by wilfully making or producing or causing to be made or produced, either verbally or in writing, any declaration, certificate or representation which he knows to be false or fraudulent, shall commit an offence.

(4) Any person who is convicted of an offence shall be liable to a fine of not exceeding 10,000 rupees and to imprisonment for a term not exceeding 12 months.

39. Regulations

(1) The Minister may, for the purposes of this Act, make such regulations as he thinks fit.

(2) Any regulations made under subsection (1) shall be made after consultation with the Council.

(3) Any regulations made under subsection (1) may provide –

(a) for the Code of Practice;

(b) for the levying of fees and the taking of charges;

(c) for the amendment of the Schedules;

(d) that any person who contravenes them shall commit an offence and shall, on conviction, be liable to a fine not exceeding 10,000 rupees and to imprisonment for a term not exceeding 12 months.

40. Transitional provisions

(1) A person who, on the commencement of this Act, has, to the satisfaction of the Council, practised an allied health profession but does not hold the qualification and experience specified in the First Schedule in respect of that profession –

(a) may, notwithstanding this Act, continue to practise that profession for a period of 5 years from the commencement of this Act; and
(b) shall, where he wishes to be registered with the Council as an allied health professional, pass such examination as may be conducted by an internationally recognised institution.

(2) Where this Act does not make provision for any transition, the Minister may make such regulations as may be necessary for such transition.

41. Commencement

(1) Subject to subsection (2), this Act shall come into operation on a date to be fixed by Proclamation.

(2) Different dates may be fixed for the coming into operation of different sections of this Act.

Passed by the National Assembly on the eleventh day of July two thousand and seventeen.

Bibi Safeena Lotun (Mrs)
Clerk of the National Assembly
FIRST SCHEDULE
[Sections 2, 17 and 40]

ALLIED HEALTH PROFESSIONAL QUALIFICATIONS

1. Audiologist
   Bachelor degree in Audiology
   or
   Bachelor of Audiology and Speech Language Pathology
   or
   Bachelor of Speech and Hearing science

2. Chiropractor
   (1) General Chiropractor
   Chiropractic degree (BAC or HSC + 5-6 years study) issued by an institution accredited by the Council on Chiropractic Education (CCE) Europe, USA, Canada or Australia

   (2) Chiropractic Specialist
   A General Chiropractor qualification
   and
   Post-graduate Diploma (2 years issued by a recognised Board of Specialist Chiropractors
   or
   Master’s Degree (3 years) issued by an institution accredited by the Council on Chiropractic Education (CCE) Europe, USA, Canada or Australasia
3. Clinical Scientist

Master’s Degree in the field of Biochemistry, Cytology, Haematology, Histology, Immunology, Microbiology or Virology

or

Bachelor Degree in the field of Biochemistry, Cytology, Haematology, Histology, Immunology, Microbiology, Virology or Biomedical Sciences + at least 3 years’ clinical training in the field

4. Counsellor

Bachelor Degree/licence level in Psychology, Social Work or Education and 2 years’ specialisation in counselling from a recognised institution (minimum 400 hours)

or

Bachelor Degree in counselling from a recognised institution (minimum 900 hours effected over a period of 4-5 years)

or

Master 2 or DESS level (BAC or HSC + 5 years’ studies) in Counselling or Pastoral Care and Counseling
SCHEDULE - *Continued*

5. **Dietitian**
   Bachelor Degree in Human Nutrition and Dietetics, or Dietetics
   or
   Bachelor Degree in a science subject with a 2-year post-graduate Diploma or higher Degree in Dietetics, including 300 hours’ or 6 months’ full-time clinical training

6. **Medical Imaging Technologist/Technician (Radiographer)**
   Certificate in Diagnostic Radiography from a recognised institution equivalent to the Certificate in Radio-diagnosis issued by the Ministry of Health and Quality of Life
   or
   Diploma in Medical Imaging Technology from the University of Mauritius

7. **Medical Laboratory Technologist**
   Bachelor Degree in Biomedical Sciences with one year’s experience in a medical laboratory
   or
   Diploma in Medical Laboratory Technology from the University of Mauritius + 10 years’ experience in a medical laboratory
   or
   Diploma in Biomedical Sciences + at least 5 years’ experience in a medical laboratory provided registrants follow BSc upgrading from a recognised institution within a non-renewable 5-year period post-registration
SCHEDULE - Continued

8. Nutritionist
   Bachelor Degree in Human Nutrition
   or
   Degree in Home Science or Home Economics + post-graduate qualification in Dietetics or Diet Therapy

9. Occupational Therapist
   Diploma in Occupational Therapy obtained before 2012 and recognised by the World Federation of Occupational Therapist
   or
   Degree in Occupational Therapy recognised by the World Federation of Occupational Therapist + 1,000 hours of clinical training, during or after academic years

10. Orthopaedic Technician (Prosthetist/Orthotist)
    Brevet de Technicien Supérieur in Orthopaedic appliances
    or
    Diplome Universitaire Supérieur de Technologie (DUST) in prosthesis/orthosis

11. Osteopath
    Minimum of 4 years’ study for a Diploma in Osteopathy from a recognised osteopathic training school approved by the Ministry of Health of the country in which courses are dispensed
12. Physiotherapist
   Diploma in Physiotherapy before 1990
   or
   Degree in Physiotherapy including 1,000 hours of clinical training during or after academic years

13. Podiatrist/Chiropodist
   Diplôme d’État de Pédicurie-Podologie
   or
   Bachelor Degree in Podiatry
   or
   Bachelier en Podologie-Podothérapie

14. Psychologist
   Master 2 level in Psychology
   or
   Diplôme d’Etudes Supérieures Spécialisées (DESS) level in Psychology
   or
   Master’s Degree in Psychology

15. Psychomotor Therapist
   Diplôme d’État de Psychomotricien from France
   or
   Bachelor in Psychomotor Therapy from Belgium, Switzerland or Portugal
   or
   Certificate of Capacity in psychomotricity from Germany or Italy
   or
   Equivalent qualifications
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<tr>
<td><strong>16. Psychotherapist</strong></td>
<td>Degree in psychotherapy from a recognised institution with a minimum of 900 hours training effected</td>
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<tr>
<td><strong>17. Speech and Language Therapist/ Pathologist</strong> (Orphophoniste/ Logopédiste)</td>
<td>Bachelor Degree in Speech and Language Pathology or Bachelor Degree in Speech and Language therapy or Certificat de capacité d’orthophoniste or Gradué en logopédie or Bachelor of Audiology and Speech and Language Pathology</td>
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<tr>
<td><strong>18. Sports Therapist</strong></td>
<td>Bachelor Degree in Sports Therapy or Post-graduate Diploma in Sports Therapy from an institution recognised by the Society of Sports Therapists of UK</td>
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SECOND SCHEDULE

[Section 7(1)(g)]

CLUSTERS OF ALLIED HEALTH PROFESSIONALS

Cluster 1
Occupational Therapist
Orthopaedic Technician
Physiotherapist
Podiatrist/Chiropodist
Sports Therapist

Cluster 2
Audiologist
Speech and Language Therapist

Cluster 3
Dietitian
Nutritionist

Cluster 4
Counsellor
Psychologist/Clinical Psychologist
Psychotherapist
Psychomotortherapist

Cluster 5
Chiropractor
Osteopath

Cluster 6
Clinical Scientist
Medical Imaging Technologist
Medical Laboratory Technologist