

# ANNUAL REPORT ON PERFORMANCE FOR FINANCIAL YEAR 2023-2024



**Ministry of Health and Wellness  
October 2024**



## TABLE OF CONTENTS

List of Figures .....	i
List of Tables .....	i
Disclaimer .....	ii
Acronyms.....	iii
Foreword.....	iv
Message from Senior Chief Executive .....	v
<b>Highlights FY 23/24.....</b>	<b>vii</b>
<b>PART I ABOUT THE MINISTRY.....</b>	<b>1</b>
1.1 Vision and Mission .....	2
1.2 Role and Functions .....	3
1.3 Gender Statement.....	4
1.4 Our People.....	5
1.5 Organisational Chart .....	9
1.6 Key Legislations .....	10
1.6.1 Amendments and New Legislations - FY 2023-2024.....	11
1.7 Package of Healthcare Services .....	12
1.8 Major Achievements.....	14
1.9 Major Challenges .....	18
1.10 Status on the Implementation of Sustainable Development Goal 3 .....	21
1.11 Implementation of the Health Sector Strategic Plan (HSSP) 2020-2024.....	22
1.12 Adoption of the Strategy on Digital Health – A Game Changer.....	23
1.13 Climate change and Greening of the public sector .....	25
1.14 Adherence to The African Leadership Meeting (ALM) Declaration on Investing in Health.....	27
<b>PART II ACHIEVEMENTS BY HEALTH SERVICES.....</b>	<b>29</b>
<b>PART II - SECTION A HOSPITAL AND SPECIALISED SERVICES.....</b>	<b>30</b>
2.1 Hospital and Specialized Services .....	31
2.1.1 Cardiac Services.....	34
2.1.2 General Surgery.....	36
2.1.3 Renal Dialysis Services and Renal Transplant.....	37
2.1.4 Endocrine Unit .....	39
2.1.5 Chest Unit .....	40
2.1.6 Oncology Services Including Palliative Care .....	41
2.1.7 Breast Unit .....	42

2.1.8 Neurology Services .....	43
2.1.9 Gastroenterology Including Hepatology Services .....	44
2.1.10 SAMU Services .....	45
2.1.11 Obstetrics and Gynaecology .....	46
2.1.12 Fertility Clinic.....	47
2.1.13 Dermatology services.....	48
2.1.14 Ophthalmology Services .....	49
2.1.15 Ear, Nose and Throat (ENT) Services .....	51
2.1.16 Speech Therapy and Audiology Department.....	52
2.1.17 Mental Health including Electroencephalography (E.E.G) Unit .....	53
2.1.18 Dental Services .....	55
2.1.19 Physiotherapy services .....	57
2.1.20 Orthopaedic Services .....	58
2.1.21 Occupational Health Unit.....	60
2.1.22 Overseas Treatment and Visiting Foreign Team .....	61
2.1.23 Pharmacy Services .....	66
2.1.24 Central Health Laboratory .....	69
2.1.25 Radiology Services .....	72
2.1.26 Infection Prevention Control and Antimicrobial Resistance.....	73
2.1.27 National Aids Secretariat.....	74
2.1.28 AIDS Unit .....	76
2.1.29 Harm Reduction Unit (HRU).....	77
2.1.30 Integrated Care for Older People .....	80
2.1.31 Orthopaedic Appliances Workshop (OAW).....	81
2.1.32 Department of Operations Support Services .....	82
<b>PART II - SECTION B PRIMARY HEALTH CARE SERVICES .....</b>	<b>83</b>
2.2 Primary Health Care Services .....	84
2.2.1 Non-Communicable Disease (NCD) Clinics .....	86
2.2.2 Community Based Rehabilitation Unit .....	88
2.2.3 Maternal, Neonatal and Child Health services.....	89
2.2.4 Sexual and Reproductive Health services .....	91
2.2.5 Nutrition Unit .....	93
2.2.6 Ayurvedic Medicine .....	94
2.2.7 Tobacco and Alcohol Control Units .....	95
<b>PART II - SECTION C PUBLIC HEALTH SERVICES .....</b>	<b>99</b>
2.3 Public Health Services .....	100

2.3.1 Public Health and Food Safety Inspectorate.....	101
2.3.2 Mauritius Food Standards Agency (MFSA) .....	105
2.3.3 Environmental Health Engineering Unit.....	107
2.3.4 Communicable Diseases Control Unit (CDCU) .....	109
2.3.5 Government Analyst Division (GAD) .....	113
2.3.6 Vector Biology Control Division (VBCD) .....	115
2.3.7 Management of Dengue by MOHW.....	117
<b>PART II - SECTION D HEALTH EDUCATION, PROMOTION AND NCD SCREENING SERVICES.....</b>	<b>119</b>
2.4 Health Education, Promotion and NCD Screening Services.....	120
2.4.1 NCDs, Health Promotion and Research Unit (NHPRU).....	120
2.4.2 Health Information Education and Communication Unit.....	137
<b>PART II - SECTION E TRAINING, INFRASTRUCTURE, PROCUREMENT AND SUPPORT SERVICES.....</b>	<b>139</b>
2.5 Training, Infrastructure, Procurement and Support Services .....	140
2.5.1 Training, Research and Capacity Building Unit (TRCBU).....	140
2.5.2 The Mauritius Institute of Health (MIH) .....	142
2.5.3 Medical Procurement and Supply.....	144
2.5.4 Health Infrastructure.....	147
2.5.5 Planning, Finance and International Cooperation (PFIC) UNIT .....	151
2.5.6 Health Records Department.....	154
2.5.7 Health Statistics Unit .....	155
2.5.8 Health Economics Unit.....	156
2.5.9 Demographic/Evaluation Unit.....	160
2.5.10 Hospital Administration Unit .....	161
<b>PART III RISK MANAGEMENT, IMPLEMENTATION AND MONITORING OF KEY ACTIONS AND BUDGET MEASURES ON HEALTH SECTOR.....</b>	<b>163</b>
3.1 Risk Management, Citizen Oriented Initiatives and Good Governance.....	164
3.1.1 Implementation Plan to address shortcomings identified in audit reports and status of remedial actions.....	169
3.2 Management of Government Assets .....	172
3.3 Status on the Implementation of Key Actions 2022-2023 .....	173
3.4 Status on the Implementation of Budget Measures 2023-2024 .....	177
3.4.1 Status on the Implementation of Budget Measures from Budget annex FY 2023-2024.....	179
<b>PART IV FINANCIAL PERFORMANCE.....</b>	<b>183</b>
4.1 Financial Highlights .....	184

4.1.1 Statement of Expenditure under Vote 18-1..... 184

4.1.2 Statement of Revenue ..... 186

**PART V WAY FORWARD..... 187**

5.1 Challenges, Priorities and The Way Forward ..... 188

5.2 Strategic Directions ..... 192

## LIST OF FIGURES

Figure I: Health Personnel by Population for Medical/Paramedical Grade.....	7
Figure II: Fertility Clinic Attendances .....	48
Figure III: Admissions.....	54
Figure IV: Knee and Hip Replacements .....	59
Figure V: Summary of HIV Testing.....	77
Figure VI: Methadone Inductions .....	79
Figure VII: DUAP .....	80
Figure VIII: Attendances at PHC Institutions July 2023 to June 2024 .....	84
Figure IX: Ayurvedic Medicine New and.....	95
Figure X: HBP & DM Cases at Ayurvedic Clinics .....	95
Figure XI: Noise Monitoring.....	108
Figure XII: Environmental Hazards Monitoring .....	108
Figure XIII: Passengers referred to PHO for further surveillance .....	112
Figure XIV: Weekly Epicurve for Dengue .....	118

## LIST OF TABLES

Table I: Visiting Foreign Teams.....	62
Table II: Summary on Primary School Health Activity 2023.....	84
Table III: Maternal and Child Health Activities in Public Sector – FY 2023-2024 .....	90
Table IV: Vector-Borne and Other Diseases .....	111
Table V: Status of Implementation of Major Infrastructural Projects .....	147
Table VI: Implementation Plan to address shortcomings identified in Audit Reports and Status of Remedial Actions .....	169
Table VII: Status on the Implementation of Key Actions 2023-2024 .....	173
Table VIII: Status on the Implementation of Budget Measures 2023-2024 .....	177
Table IX: Status on the Implementation of Budget Measures from Budget Annex 2023-2024 .....	179
Table X: Statement of Expenditure Under Vote 18-1 .....	184
Table XI: Statement of Revenue .....	186

**DISCLAIMER**

*The Annual Report on Performance for FY 2023-2024 has been compiled based on information and statistics received from various units across the Ministry of Health and Wellness (MOHW). The Health Records Department and the Health Statistics Unit have complemented this report with the relevant statistics where necessary. The report was vetted by the concerned officers and approved by MOHW Management before its submission to the Ministry of Finance, Economic Planning, and Development. All efforts have been made to ensure the accuracy and reliability of the data presented.*



## ACRONYMS

AHC	Area Health Centres	MHO	Medical Health Officers
AGJH	A. Gaffoor Jeetoo Hospital	MIH	Mauritius Institute of Health
BSMHCC	Brown Sequard Mental Health Care Centre	MOHW	Ministry of Health and Wellness
CDCU	Communicable Disease Control Unit	NAS	National AIDS Secretariat
CHC	Community Health Centre	NBTS	National Blood Transfusion Service
EEG	Electroencephalography	NCD	Non-Communicable Disease
EHEU	Environmental Health Engineering Unit	NHA	National Health Accounts
ENT	Ear, Nose and Throat	NHPRU	NCDS, Health Promotion and Research Unit
FY	Financial Year	OAW	Orthopaedic Appliances Workshop
GAD	Government Analyst Division	OPD	Outpatient Department
ICOPE	Integrated Care for Older People	PHC	Primary Health Care
JNH	Jawaharlal Nehru Hospital	PHFS	Public Health and Food Safety
HIEC	Health Information and Education Unit	SBEH	Subramania Bharati Eye Hospital
HIV	Human Immunodeficiency Virus	SSRNH	Sir Seewoosagur Ramgoolam National Hospital
HSSP	Health Sector Strategic Plan	VBCD	Vector Biology Control Division
LIMS	Laboratory Information Management System	VH	Victoria Hospital
MCH	Maternal and Child Health	WHO	World Health Organization

## FOREWORD

I am honoured to present the Annual Report on Performance of the Ministry of Health and Wellness for the Financial Year (FY) 2023-2024. This report highlights the significant strides accomplished in safeguarding the health and well-being of the citizens of the Republic of Mauritius.

In 2020, the Ministry of Health and Wellness in collaboration with the World Health Organisation launched its first Health Sector Strategic Plan (HSSP 2020-2024) to ensure the enhancement of the health sector in Mauritius through 26 strategic goals, 362 strategic actions under 21 thematic areas. The latest progress monitoring showed that 65% of activities has been completed, 32% were in progress, while 3% were planned for the next financial year.

After more than 30 years of endeavours for Digital Health Transformation, Phase 1 of the National E-Health project was launched in January 2024 with the collaboration of the United Nations Development Programme. This phase is expected to strengthen the underpinnings for decision-making to achieve the visionary goal: 'One Patient One Record' through the introduction of a Patient Portal, a Patient Administration System, a Blood Transfusion System and advanced Reports and Analytics.

Maternal and Child Health, a key marker of overall health system performance indicates that improvements have been made in comparison to 2019. Maternal Mortality Rate has gone down by 50 %, Neonatal Mortality Rate has decreased by 14.6%, while Under-Five Mortality Rate has declined by 10%.

For FY 2023-2024, some Rs 1.8 billion were budgeted for health infrastructural works for a total project value of Rs 8.8 billion. During the period under review, several health infrastructures have been inaugurated namely the state-of-the-art National Cancer Centre at Solferino, 2 Mediclinics, 1 Area Health Centre, 3 Community Health Care Centres, 2 Autism Day Care Centres and 1 Speech Therapy and Audiology Department.

New services introduced in Hospitals include a Stroke Unit offering 24/7 management and delivery of thrombolysis at Victoria Hospital, Intrauterine Insemination, the first phase of Assisted Reproductive Techniques at SSRN Hospital, a Paediatric Intensive Care Unit at New ENT Hospital, the Drug Users Administrative Panel (DUAP), the Central Medical Procurement Authority (CMPA), the Mauritius Food Standard Agency (MFSA), Heated Food Trolleys and Food Containers in Pre-Natal, Post-Natal and Paediatric Wards, the MoBienet Application, Wheat Flour Fortification with iron, folic acid, Vitamin and Zinc, adoption of Artificial Intelligence into the Electrocardiography services among others.

Decentralisation of specialist services have been actively implemented with an increase of 82% between 2022 and June 2024, resulting in a 30-40% decline in Regional Hospitals OPD's volume of attendance.

I would like to thank development partners engaged in health sector, especially the World Health Organisation and the UNDP for their valuable contribution in the achievement of the Ministry's goals and targets. I seize this opportunity to express my gratitude to the whole staff of the Ministry of Health and Wellness for their dedication towards achieving our mission to deliver quality healthcare services to the whole population.

**Dr the Hon Kailesh Kumar Singh JAGUTPAL**  
**Minister of Health and Wellness**

## MESSAGE FROM SENIOR CHIEF EXECUTIVE

It is my privilege to present the Annual Report on Performance of the Ministry of Health and Wellness for the Fiscal Year 2023-2024, showcasing financial and non-financial performance, whilst highlighting the numerous challenges faced as well as achievements made during the financial year, impacted by the globally rising health costs and challenges related to the public health issues and ageing populations.

For the period under review, Government's allocation to health care was Rs 15.7 billion amounting to a per capita Government expenditure on health of Rs 12,438. In spite of globally rising health costs, Government through this Budget and the preceding ones, has been sustaining free universal access to quality health care services for all. In 2023, 8.9 million visits were recorded in hospitals, around 2 million visits have been registered at Primary Health Care Centres and more than 5 million consultations have been carried out across all public health institutions.

With a view to further increasing the quality of services and thereby, decreasing the stress on Regional Hospitals, specialised services for 15 specialties have been made available at 201 service points across the island. As it stands, every Mauritian household in the country is not further away than 3 kilometres to the nearest Primary Health Care Centre.

It is commendable to note that Mauritius has been the first African Country to administer the National Human Papillomavirus Vaccination Campaign for children aged 9 years to 15 years old, with a view to protecting our children against cancer and providing them with better quality of life. Surveillance systems have also been reinforced through the Public Health System to effectively monitor and respond to emerging and re-emerging infectious diseases, whilst also ensuring health security measures are in place. During the period under review, a number of National Action Plans and Policy documents have also been elaborated. These comprise the National Stroke Action Plan 2023-2027, the National Action Plan for the Prevention and Control of Sexually Transmitted Infections 2023-2027, the National Integrated Non-Communicable Diseases (NCD) Action Plan 2023-2028, the National Service Framework for NCDs 2023-2028, and a National HIV Action Plan (2023–2027).

The Ministry's vision is to provide quality and accessible patient-centred public health services and pursue medical excellence by leveraging on digitalisation and innovative technologies. The establishment of the Central Medical Procurement Authority (CMPA), which will be responsible for the procurement of medical supplies the country's public healthcare system has been a stepping stone to improving efficiency in as much the CMPA will ensure that the procurement process is done effectively and that all procurement activities are carried out in accordance with the rules and regulations set out by the Ministry and the Government. Moreover, it is an honour for the country that it has been selected to host the SIDS Pooled Procurement Secretariat.

In a bid to deliver a continuum of health promotion, preventative, curative, rehabilitative and palliative services appropriate to the needs of our population, massive investment in the infrastructure and the upgrading of existing health centres have been continual. In Financial Year 2023-24, the state-of-the-art National Cancer Centre was inaugurated. New health facilities such as Mediclinics, namely at Bel Air, Quartier Militaire, Stanley and Belvédère, in addition to Community Health Centres at Camp de Masque and Trou d'Eau Douce were inaugurated. Moreover, a Paediatric Surgery Department has been introduced at the ENT Hospital to provide specialised care to children.

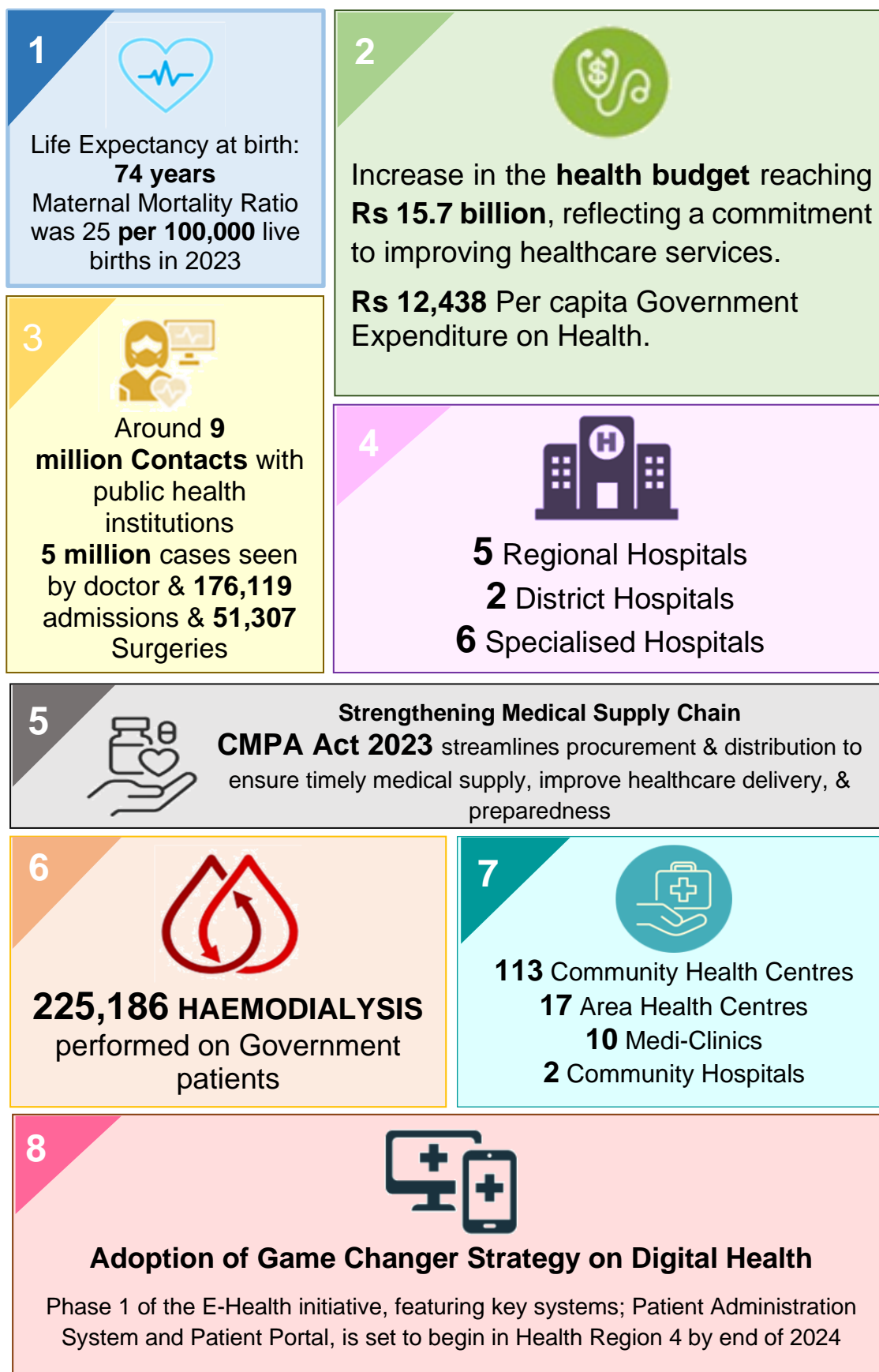
In addition, a number of foreign visiting specialists have undertaken complex surgical interventions, namely TAVI Surgeries, paediatric cardiac interventions, cleft lip and cleft palate surgeries and vitrectomy cases. As regards costly surgeries, which could not be carried out locally, these have been sustained through the overseas treatment scheme. My Ministry has also leveraged on providing thorough training for personnel to ensure an efficient healthcare service delivery, effective utilisation of the modern healthcare equipment for improved patient care and relief. Highlighting the achievements of the Ministry is of utmost importance as it depicts good governance, transparency and accountability.

I seize this opportunity to thank the Honourable Minister for his unwavering leadership, resolve and zeal to fruition the goals and objectives of the Ministry. I also commend the staff of the Ministry, both at headquarters and in health regions for their hard work and dedication.

I also avail myself of the opportunity to extend my appreciation and gratitude to the World Health Organization and to all donor agencies, partners and other entities, for their unwavering support and dedication throughout this year. The Ministry of Health and Wellness has made significant progress, and we will continue to strengthen our health-care system and strive towards Universal Health Coverage. I remain confident that the Ministry will continue to build on the health gains already achieved and will continue to work towards protecting what matters most, that is, healthcare and well-being of all our citizens.

**C. R. Seewooruthun (Mrs)**  
**Senior Chief Executive**  
**Ministry of Health and Wellness**

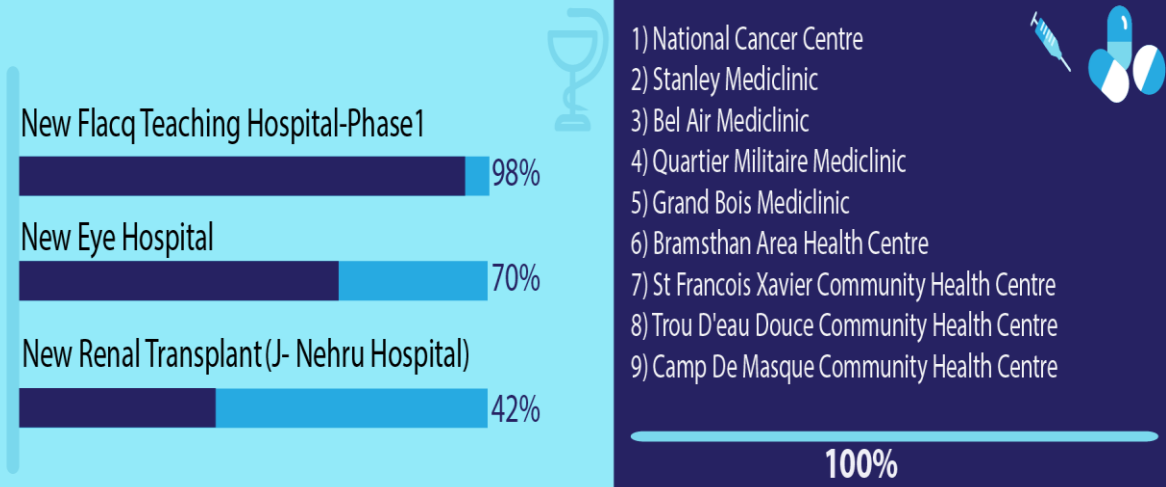
## HIGHLIGHTS FY 23/24



# PROJECT IMPLEMENTATION UNIT



For Financial Year 2023-2024 some Rs 1.8 Billion were budgeted for health infrastructural works for a total Project Value of around Rs 8.8 Billion. Apart from major infrastructural works, minor upgrading works, extension of existing services, paintings, renovations and waterproofing were also undertaken or under implementation



- 1) Cap Malheureux Area Health Centre
- 2) New Grove Area Health Centre
- 3) Curepipe Area Health Centre
- 4) Bambous Area Health Centre

**WORK IN PROGRESS**

**DESIGN STAGE**

- 1) Chemin Grenier Mediclinic
- 2) Plaine Magnien Area Health Centre
- 3) Wooton Area Health Centre
- 4) Roche Bois Area Health Centre
- 5) Baie Du Cap Community Health Centre
- 6) Case Noyale Community Health Centre
- 7) Piton Community Health Centre
- 8) Ecoignard Community Health Centre
- 9) Camp Thorel Community Health Centre
- 10) Tamarin Community Health Centre
- 11) Riviere Du Rempart Mediclinic

# PART I

## ABOUT THE MINISTRY



## 1.1 VISION AND MISSION



### OUR VISION

*A healthy nation with a constantly improving quality of life and well-being.*



### OUR MISSION

*Reinforce our health services into a modern high performing quality health system, that is patient-centred, accessible, equitable, efficient and innovative.*

*Improve quality of life and well-being of the population through the prevention of communicable and non-communicable diseases, promote healthy lifestyles and an environment conducive to health.*

*Harness the full potential of Information and Communication Technology to empower people to live healthy lives.*

*Ensure that the available human, financial and physical resources lead to the achievement of better health outcomes.*

*Facilitate the development of the Republic of Mauritius into a medical and knowledge hub and support the advancement of health tourism.*



## 1.2 ROLE AND FUNCTIONS

The Ministry of Health and Wellness has the overall responsibility of ensuring that quality and equitable health services are accessible to the entire population at all times, while also promoting healthy lifestyle. Its policy is to continually improve the delivery of health care by promoting greater efficiency and effectiveness while laying emphasis on customer satisfaction.

### The main role and functions of the Ministry of Health and Wellness are to:

- *Develop a comprehensive health service in order to meet the health needs of the population;*
- *Investigate the influence of physical environment and psycho-social domestic factors on the incidence of human diseases and disability;*
- *Implement Sexual and Reproductive Health, Maternal, Neonatal and Child Health Programmes;*
- *Plan and carry out measures for the promotion of health;*
- *Institute and maintain measures for the prevention of diseases including Non-Communicable Diseases and the epidemiological surveillance of important communicable diseases;*
- *Provide facilities for the treatment of diseases, including mental disease by maintenance of hospital and dispensary services;*
- *Make provision for the rehabilitation of the disabled;*
- *Control the practice of medicine, dentistry, pharmacy and allied health professionals;*
- *Provide facilities for the training of Medical and Para-medical staff and other personnel of the Ministry;*
- *Prepare and publish reports, statistical data and other information relating to health;*
- *Initiate and conduct operational bio-medical health studies of diseases of major importance in the country.*

## 1.3 GENDER STATEMENT

In Mauritius, everyone has the right to access health care, including reproductive health care without gender discrimination. The healthcare system ensures that the needs and concerns of all segments of the population are inclusively integrated during the design, implementation, monitoring, and evaluation of health-related policies, plans, and projects.

In addition, the Ministry is also committed to a gender-inclusive, equitable workplace and encourages a culture that enables all employees to thrive. This approach to gender equity demonstrates that the Government health delivery system serves everyone equally.

Furthermore, the foundation for health and well-being throughout the life course is being laid through the necessary provision of maternal, neonatal and child health services. Recognizing the unique health needs of women and girls, the Ministry addresses specific concerns across their lifespan including emotional, sexual, maternal, and reproductive health, as well as the prevention of cancers, delaying with menopause, and the pathology of ageing.

In the realm of women and reproductive health care services, Mauritius has already achieved the health-related SDG target set for 2030. In 2023, Maternal Mortality Ratio per 100,000 live births was 25 as compared to the global target of 70.

Life expectancy at birth was 70.1 years and 76.9 years for male and female, respectively in 2023. Available statistics indicate that, in 2022, 53 % of admissions in government hospitals and 51% of first attendance at primary health care centres consisted of girls and women. Moreover, the proportion of births attended by skilled health personnel was 99.7% in 2023.

A comprehensive set of actions has been identified to improve the health of women and children under the Health Sector Strategic Plan 2020-2024. The Ministry has also elaborated a National Sexual and Reproductive Health Policy 2022 and Implementation Plan 2022 – 2027, with emphasis being on Sexual and Reproductive Health.

Mauritius is dedicated to advancing women's health and the areas of action pertaining to women's health. The key activities to enhance women's health include family planning, encompassing infertility services, safe motherhood, and the prevention and management of reproductive tract infections; sexually transmitted infections and HIV/AIDS. Additionally, the strategy also addresses gender and sexual and reproductive health, the elimination of domestic and sexual violence, psychological counselling, management of reproductive tract cancers, Pap's smear screening, breast examinations, and the prevention of non-communicable diseases.

Further complementing the above initiatives, regular awareness sessions on gender-based violence are held at regional hospitals. In 2023, approximately 240 healthcare workers were trained in this field to enhance their understanding and response.

## 1.4 OUR PEOPLE



**Dr The Honourable Kailesh Kumar Singh Jagutpal,  
Minister of Health and Wellness**



**Mrs. Devi Chand Anandi Rye Seewooruthun  
Senior Chief Executive**



**Mrs. Zaheda Begum Lallmahomed  
Permanent Secretary**



**Mr. Dhanraj Conhye  
Permanent Secretary**



**Ms. G. Callychurn  
Ag Permanent Secretary**



**Dr Bhooshun Ori  
Director General Health Services**

The “WHO Global strategy on human resources for health: Workforce 2030” has set important objectives, including optimization of performance, quality and impact of the health workforce through evidence-informed policies on human resources for health, contributing to healthy lives and well-being, effective universal health coverage, resilience and strengthened health systems at all levels.

In this line, the Ministry of Health and Wellness aims to provide the required policy solutions, investments, and multi-sectoral partnerships to address workforce challenges and advance health systems towards universal health coverage and health security.

Since November 2019, Dr the Honourable Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness is occupying this portfolio in the Republic of Mauritius. The Honourable Minister has an impressive track record and experience in the Health Sector. From 2015 to 2016, he was the Vice-President of the Mauritius Psychiatric Association and also served as the Chairperson of the Medical Council of Mauritius from February 2016 to May 2019. As Minister of Health and Wellness, his portfolio comprises Medical and Public Health Services, all matters concerning quality of life, population wellness, population planning, licensing of Private Health Institutions, prevention of Addiction and Rehabilitation of Addicts, E-Health System, Drug Users Administrative Panel, the National AIDS Secretariat, the Trust Fund for Specialised Medical Care, the Mauritius Institute of Health, the Medical Council of Mauritius, the Dental Council of Mauritius, the Pharmacy Council of Mauritius, the Optical Council of Mauritius, the Nursing Council of Mauritius, the Allied Health Professionals Council of Mauritius, the Central Medical Procurement Authority (CMPA) and the Mauritius Food Standards Agency (MFSA).

As far as management of the Ministry is concerned, the Senior Chief Executive is the head of the institution and is accountable for the overall administration and general supervision of all Departments and Bodies falling under the purview of the Ministry. The Senior Chief Executive is assisted in her functions and duties by three Permanent Secretaries, the Director General Health Services and five Directors, Health Services.

Other personnel of the Ministry include officers from different cadres ranging from Medical, Paramedical, Administrative, Analyst, Health Promotion and Research, Statistics, Health Records, Pharmacy, Human Resources Management, Financial Operations, Procurement and Supply and other technical areas as well as officers from the general services grades.

In parallel, the health workforce is composed of medical doctors, nurses, midwives, dentists, pharmacists, other paramedical professionals. In addition, non-medical staff provide administrative support for the day-to-day running of the health services.

Across various healthcare levels doctors are significantly involved in consultations, diagnosis of diseases, treatment of patients and surgeries when necessary. Simultaneously, nursing staff is vital to the efficient and effective administration of the ward, maintaining a high standard of nursing care to patients, evaluating patient responses to care, close monitoring of vital parameters whereby doctors are promptly alerted to any deviations from the normal parameters, assisting doctors, surgeons, other paramedical personnel in the care process, and timely tracing of investigations as well as blood results, among others.

Around 15,000 officers in 375 different grades are employed by the Ministry of Health and Wellness, of whom 85% are technical staff, responsible for delivery of services and 15% are support staff ensuring that skilled personnel are available in a variety of medical specialities.

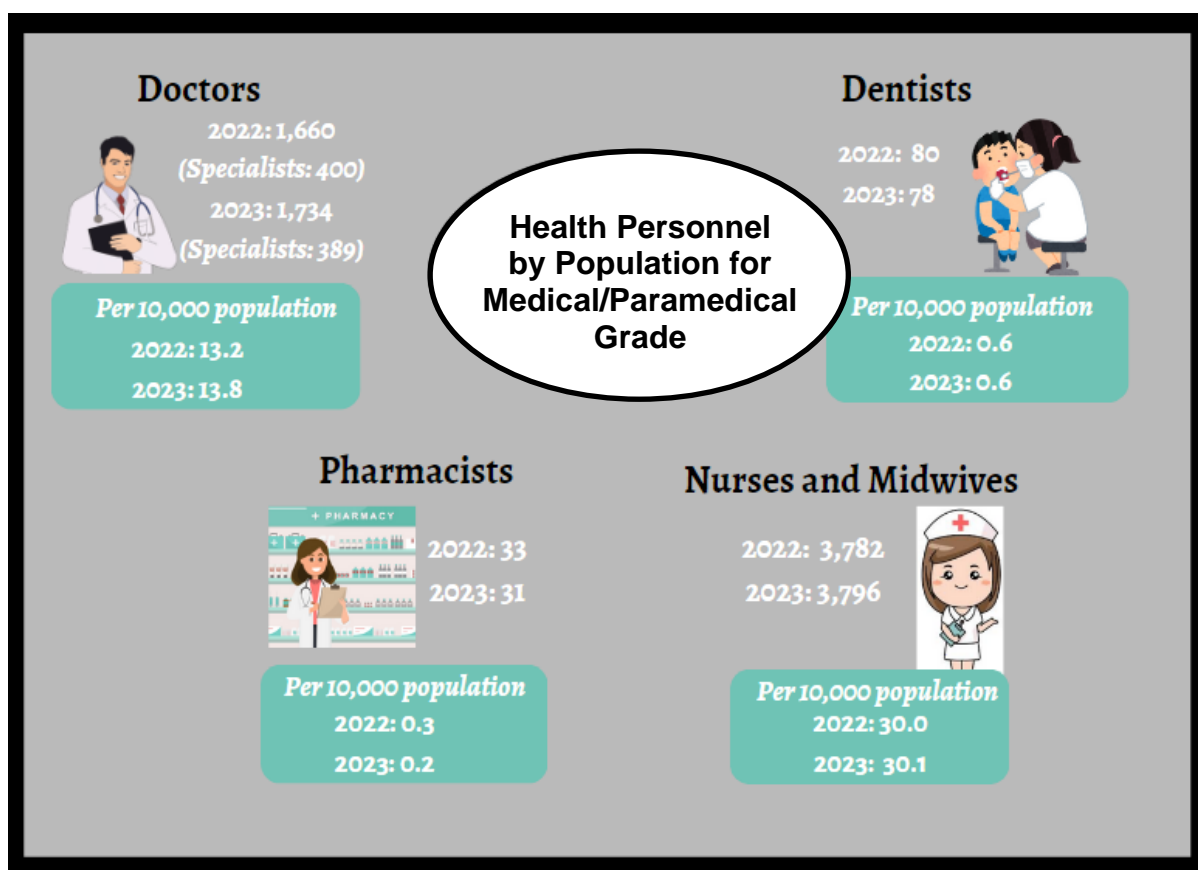


Figure I: Health Personnel by Population for Medical/Paramedical Grade

Source: Health Statistics Unit, MOHW

During the FY 2023-2024, recruitment/promotion of more than 1,288 officers from different cadres was carried out, including 2 Directors of Health Services, 15 Consultants in Charge, 26 Specialists/Senior Specialists, 124 Medical Health Officers/SMHOs, 2 Dental Surgeons/SDS, 20 Dental Assistants, 2 Directors, Nursing, 1 Deputy Director, Nursing, 7 Regional Nursing Administrators, 13 Nursing Administrators, 26 Nursing Supervisors, 78 Ward Managers, 70 Charge Nurses, 21 Trainee Medical Imaging Technologists, 6 Permanenciers/Senior Permanenciers, 10 Specialised Health Care Assistants, 95 Health Care Assistants/ SHCAs, 2 Senior Midwives (on shift), 20 officers from Pharmacy Technician cadre, 53 officers from Health Records cadre, 16 officers from Public Health and Food Safety Inspectorate cadre, 7 officers from the Health Surveillance Cadre, 189 General workers, 206 Attendants (Hospital Services) (on shift) amongst others.

In that particular period, some 276 officers have retired from different cadres including, 2 Directors Health Services, 1 Regional Health Director, 4 Medical Health Officers/SMHOs, 1 Community Physician, 3 Directors, Nursing, 5 Regional Nursing Administrators, 5 Nursing Administrators, 13 Nursing Supervisors, 22 Ward Managers, 8 Charge Nurses, 11 Nursing Officers, 2 officers from Medical Imaging Technologist cadre, 1 Health Care Assistants/ SHCAs, 6 officers from Health Records cadre, 5 General workers, 8 Attendants (Hospital Services) (on shift) amongst others.

The percentage of public health workforce in terms of gender is 44% Male and 56% Female for the MOHW (excluding statutory bodies). Further classification of the workforce by gender across hierarchy levels is as follows:

Staff in Post (FY 2022/23)	Number		
	Male	Female	Total
Top Management (Salary ≥ Rs110,000)	69%	31%	72
Middle Management (Rs47,000 ≤ Salary ≤ Rs100,000)	51%	49%	2,654
Support (Salary < Rs47,000)	42%	58%	13,435
<b>Overall</b>	<b>44%</b>	<b>56%</b>	<b>13,161</b>

Source: MOHW Budget FY 2024-2025

Staff in Statutory Bodies / Public Bodies	Number		
	Male	Female	Total
Trust Fund for Specialised Medical Care	51%	49%	297
Mauritius Institute of Health	46%	54%	24

Source: MOHW Budget FY 2024-2025

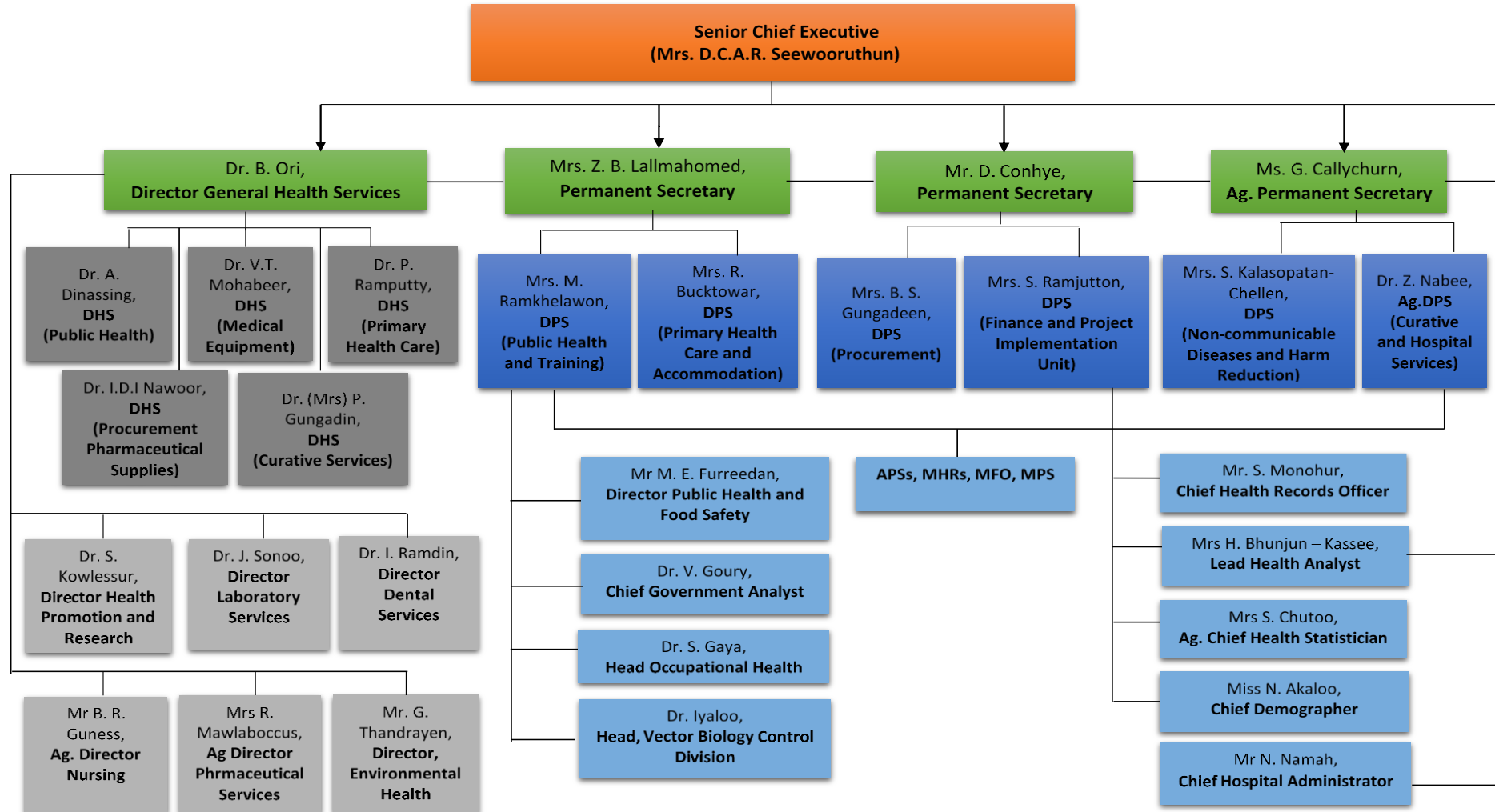


**Management Team of MOHW**



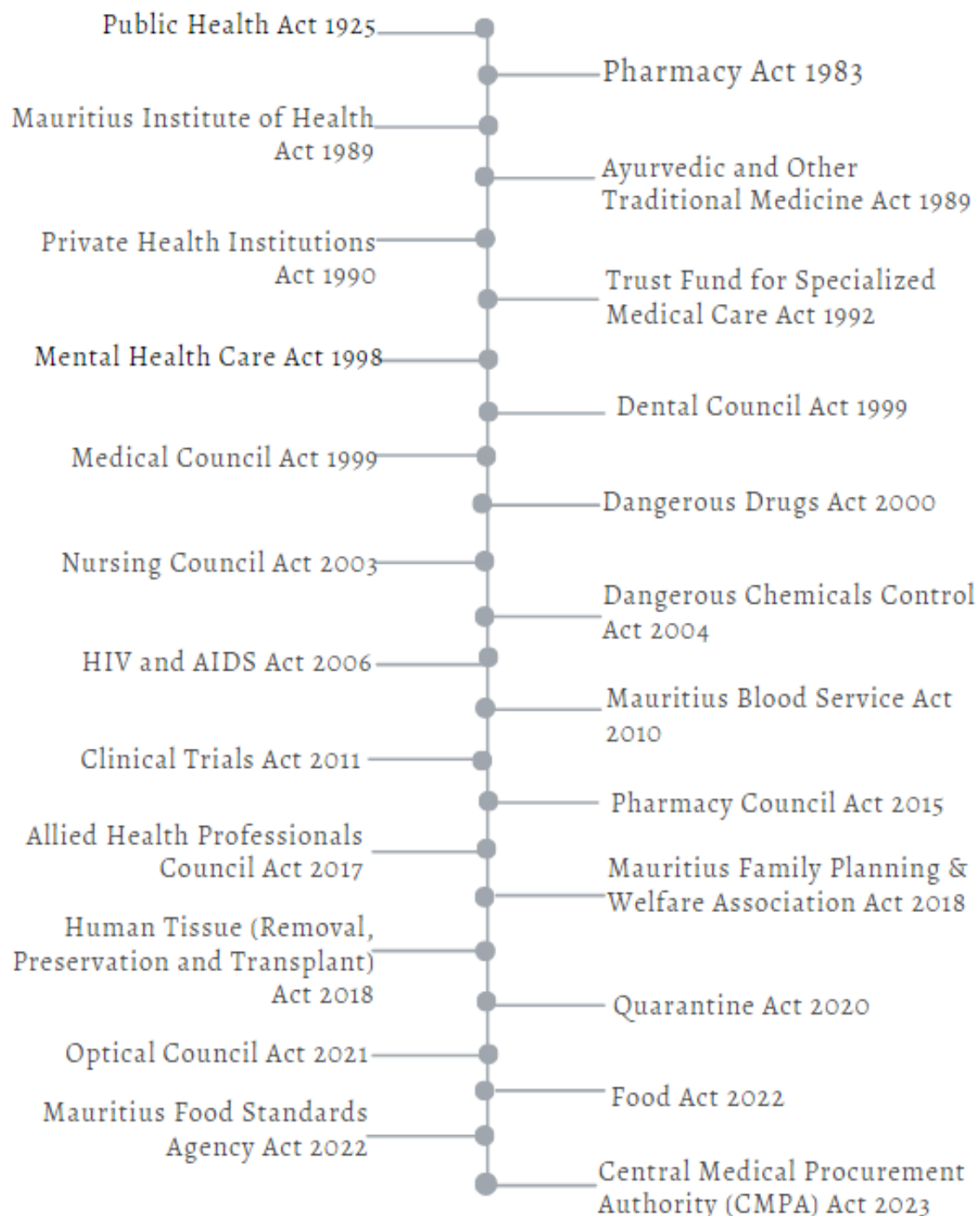
## 1.5 ORGANISATIONAL CHART

### MINISTRY OF HEALTH AND WELLNESS (AS AT 30 JUNE 2024)



(Source: Curative Section, MOHW)

## 1.6 KEY LEGISLATIONS





## 1.6.1 AMENDMENTS AND NEW LEGISLATIONS - FY 2023-2024

### Amendments brought through the Finance (Miscellaneous Provisions) Act 2023

- **Allied Health Professionals Council Act 2017**  
The Allied Health Professionals Council Act 2017 was amended to empower the Allied Health Professionals Council to establish Clinical Guidelines intended to optimizing patient-care and to provide for a timeline for processing of application, to review the composition of the Council as well as the terms of office of the Disciplinary Tribunal.
- **Ayurvedic and Other Traditional Medicines Act 1989**  
The Ayurvedic and Other Traditional Medicines Act 1989 was amended to facilitate registration of specialists in traditional medicine.
- **Clinical Trials Act 2011**  
The Clinical Trials Act 2011 was amended to enlarge the composition of the Board of the Clinical Research Regulatory Council and to provide for a timeline to process all applications.
- **Dangerous Drugs Act 2000**  
The Dangerous Drugs Act 2000 was amended to introduce an electronic register to record all transactions relating to the controlled drugs listed under the Act. The Register would be accessible to approved public sector entities for better control of dangerous drugs.
- **Dental Council Act 1999**  
The Dental Council Act 1999 was amended to enlarge the composition of the Dental Council consistent with the Medical Council Act, to empower the Council to establish Clinical Guidelines intended to optimizing patient-care and to provide for the terms of office of the Disciplinary Tribunal as well as to provide for a timeline for processing of application
- **Human Tissue (Removal, Preservation and Transplant) Act 2018**  
Sections 8 to 11 and 13 to 29 of the Human Tissue (Removal, Preservation and Transplant) Act 2018 was proclaimed in February 2024 to allow for tissue transplant.
- **Medical Council Act 1999**  
The Medical Council Act 1999 was amended to empower the Medical Council to establish Clinical Guidelines intended to optimizing patient-care, to review the composition of the Council and provide for the terms of office of the Disciplinary Tribunal as well as to provide for a timeline for processing of application.
- **Nursing Council Act 2003**  
The Nursing Council Act 2003 was amended to provide that the Council would comprise of 15 persons elected among registered nurses or midwives, instead of 12 persons, in line with the Schedule of its Act, to empower the Council to establish Clinical Guidelines intended to optimizing patient-care and provide for the terms of office of the Disciplinary Tribunal as well as to provide for a timeline for processing of application.
- **Pharmacy Act 1983**  
The Pharmacy Act 1983 was amended by adding new provisions to cater for and facilitate the development of the local pharmaceutical manufacturing sector in Mauritius.

## 1.7 PACKAGE OF HEALTHCARE SERVICES

### (i) Primary Healthcare Level

Services at Community Health Centres (CHC)	Services at Area Health Centres (AHC)	Services at Medi-Clinics
<ul style="list-style-type: none"> <li>▪ Accident and Emergency</li> <li>▪ Cancer Screening Clinics (cervical, breast, colon)</li> <li>▪ Community health rehabilitation services</li> <li>▪ Diagnosis and treatment of common diseases and injuries</li> <li>▪ Dentistry*</li> <li>▪ Diabetology*</li> <li>▪ Diet and Nutrition*</li> <li>▪ Expanded Programme of Immunisation for children aged up to 5 years old</li> <li>▪ Foot Care*</li> <li>▪ Follow up of referrals from hospitals</li> <li>▪ General nursing care including wound dressing referred from hospitals</li> <li>▪ Health education and promotion</li> <li>▪ Hepatitis C</li> <li>▪ Maternal and Child Health:               <ul style="list-style-type: none"> <li>➢ Antenatal clinics</li> <li>➢ Post-natal clinics</li> <li>➢ Pre-conception clinic</li> <li>➢ Well baby clinics</li> <li>➢ Cash gift scheme</li> </ul> </li> <li>▪ Methadone Clinic*</li> <li>▪ NCD Clinics</li> <li>▪ Nutrition education and counselling</li> <li>▪ Primary Care</li> <li>▪ Psychiatry*</li> <li>▪ Records keeping and dispensing of medications are done by Nursing Officers</li> <li>▪ Sexual and reproductive health clinic including Family Planning</li> <li>▪ Tobacco Cessation Services*</li> </ul>	<ul style="list-style-type: none"> <li>▪ All services as provided at CHC level with the following additional services including:               <ul style="list-style-type: none"> <li>▪ Dental Clinics</li> <li>▪ Diabetology</li> <li>▪ Diet and Nutrition</li> <li>▪ Food Handlers Clinics</li> <li>▪ Hepatitis C</li> <li>▪ NCD Screening for:                   <ul style="list-style-type: none"> <li>➢ Eye</li> <li>➢ Diabetic foot care clinic including podiatry</li> </ul> </li> <li>▪ Pharmacy dispensing</li> <li>▪ Records keeping</li> <li>▪ School Health</li> <li>▪ Specialist Clinics:                   <ul style="list-style-type: none"> <li>➢ Diabetic and Endocrinology</li> <li>➢ Paediatric</li> <li>➢ Obstetrics and Gynaecology*</li> </ul> </li> <li>▪ Paediatrics*</li> <li>▪ Integrated Harm Reduction and HIV Services at Bouloux AHC.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ All services as provided at AHCs including ambulance services               <ul style="list-style-type: none"> <li>▪ Ayurvedic Medicine*</li> <li>▪ Audiology</li> <li>▪ Chest Diseases*</li> <li>▪ Dermatology*</li> <li>▪ Echography (Ultrasound)</li> <li>▪ General Medicines (Internal)</li> <li>▪ Laboratory services*</li> <li>▪ More Specialist Clinics:                   <ul style="list-style-type: none"> <li>➢ General Medicine</li> <li>➢ Orthopaedics</li> </ul> </li> <li>▪ Obstetrics and Gynaecology</li> <li>▪ Ophthalmology* / Laser<sup>§</sup></li> <li>▪ Paediatrics</li> <li>▪ Physical Medicines</li> <li>▪ Psychiatry</li> <li>▪ Radiology</li> <li>▪ Retinal Screening<sup>§</sup></li> <li>▪ X Ray facilities</li> <li>▪ Integrated Harm Reduction and HIV Services at Hyderkhan Mediclinic, Plaine-Verte.</li> </ul> </li> </ul> <p style="text-align: right; font-size: small;"> <sup>§</sup> Carried out at Belvedere Clinic  * Service is partly available </p>

Source: Health Records Department, MOHW

**(ii) List of Hospital Services**

- Accident and Emergency
- Audiology
- Anaesthesia
- Autism (SSRNH & BSH)
- Angiography Cardiac
- Ayurvedic Medicine (SSRNH & VH)
- Bariatric Surgeries
- Breast Clinic (SSRNH)
- Cardiology/Cardiac Surgery
- Chest Unit
- COVID-19 Testing and Treatment Centres (Provisional services depending on the pandemic situation)
- Dental services including:
  - (i) Endodontics
  - (ii) Orthodontics
- Dermatology
- Diabetes/Endocrinology
- Diet and Nutrition
- Diagnostic Laboratory Investigations
- Ear, Nose and Throat (ENT) Services
- Early Dementia Clinic (SSRNH & VH)
- Echography (Ultrasound)
- Electrocardiography
- Electroconvulsive Therapy
- Electroencephalography
- Endoscopy
- Endovenous Laser Varicose Vein Surgeries
- Family Planning
- Fertility Clinic
- Gastro-enterology (AGJH)
- General Medicine
- General Surgery including Renal Transplant
- Geriatric Services
- Gestational Diabetes
- Haemodialysis
- Hyperbaric Chamber (VH)
- Harm Reduction
- HIV and AIDS Services
- Imaging facilities including CT scan & MRI
- Intensive Care Services
- Lithotripsy
- Medical Social Service
- Methadone Clinic
- Minimally Invasive Surgeries
- Neonatal Intensive Care Services
- Neonatology
- Nephrology services including Renal dialysis
- Neurology
- Neurosurgery
- Nuclear Medicine
- Obstetrics and Gynaecology
- Occupational Medicine
- Occupational Therapy
- Oncology and Radiotherapy
- Ophthalmology / Laser
- Oral and Maxillofacial surgery
- Orthopaedics
- Paediatric Surgery
- Paediatrics
- Pathological Laboratory
- Pharmacy
- Physical Medicines
- Physiotherapy
- Plastic Surgery (VH)
- Podiatry (SH & VH)
- Psychiatry
- Psychology
- Radiology
- Renal Transplant (VH)
- Respiratory Medicine
- Retinal Screening
- Rheumatology
- Smoking Cessation Clinic
- Speech Therapy
- Spinal Surgeries
- Unsorted OPD
- Vascular Surgeries

Source: Health Records Department, MOHW

## 1.8 MAJOR ACHIEVEMENTS

At the very outset of the FY 2023-2024, the strategic direction of the Ministry was already set in order to build on the health gains achieved and further improve healthcare services. Several challenges were faced but at the same time, remarkable milestones were achieved in the pursuit of a healthier nation. In a nutshell, the perseverance of Government to address the health needs of the population and respond to changing patterns of diseases was instrumental during the period under review.

Substantial progress has been made in transforming the healthcare system for improved accessibility, affordability, and quality of care for all citizens. Key achievements under the following areas include:

### Upscaling of health services



- Availability of 24/7 management and delivery of thrombolysis for acute ischemic stroke patients island-wide with SAMU playing a crucial role in delivering this service.
- Corneal transplants and vitreo-retinal surgeries are now being performed locally instead of foreign treatment. These new services assist to reduce financial burdens on patients and hence, enhance accessibility to timely care.
- Introduction of Intrauterine Insemination has been a stepping stone in fertility care, offering patients access to this treatment at no cost. This advancement not only broadens the range of available fertility services but also provides substantial financial relief.
- The first dedicated Breast Unit in Mauritius has been established at SSRN Hospital for advanced treatment of patients. A successful Mastectomy and immediate Breast reconstruction with autologous Latissimus Dorsi Flap without implant was performed for the first time for one patient.
- Setting up of Transmagnetic Stimulation Therapy as innovative treatment at Victoria Hospital.

### Enhancing Service Delivery



- Decentralization of specialist services has been sustained. The number of specialist clinics in primary care has increased by 82% from 147 to 268 between 2022 to 2024. This has resulted in a 30-40% decline in regional Hospital OPDs attendance volume easing the burden on these facilities.
- To enhance patient experience, the MOHW has introduced one extra session of early morning Blood Sampling per week in 56 service points.
- Implementation of Innovative Packed Meals for patients in the Paediatric, Postnatal, and Prenatal Wards at all 5 regional hospitals. This initiative ensures meals are served in a more hygienic and convenient way while also saving time of Nursing Officers.
- Occupational Health Services now available in 22 Government Health Institutions compared to only 7 in previous years.
- Procurement of 14,800 HIV self-tests for community distribution has been possible due to the amended HIV and AIDS Act 2023.

- Early Dementia Diagnosis Clinics, initially at Victoria Hospital, have been extended to all 5 regional hospitals.
- Since November 2023, ENT services have been decentralized across all 5 regional hospitals, operating from 9:00 a.m. to 4:00 p.m.
- Hepatitis C services have been decentralized, with screening and linkage to care now conducted at Methadone Dispensing Sites.
- Extending Community Psychiatry Nursing to BSMHCC and all 5 Regional Hospitals.

### Adoption of New Technologies and Digitalisation



- After more than 30 years of endeavours to implement E-Health, the MOHW is now close enough to translate this game changer strategy into reality. A contract was signed between Consortium and UNDP in January 2024. Phase 1 of eHealth includes the implementation of Patient Administration System, a National Blood Transfusion System, a Patient Portal and Reporting features.
- The “Mo Bienet” smart App is a further step to achieving efficiency through digitally enabled health care delivery whose main objective is to disseminate health information to the public, provide IPC resources for health workers as well as implementing a patient satisfaction survey to enhance public health services.
- The Centre for Gastroenterology and Hepatology at Dr A.G. Jeetoo Hospital has been fully digitalized. This has notably reduced duplication of laboratory requests and enhanced workflow efficiency within the unit.
- Following the successful implementation of COVID-19 Laboratory Information Management System (LIMS) at Central Health Laboratory (CHL), the system has now been fully integrated into the Virology and Molecular Biology departments.
- The Ministry has been proactive for the control of vector borne diseases by leveraging new technologies such as drones for insecticide application in around 10 regions.

### Proactiveness in the Management and Control of Communicable Diseases



- A National Action Plan on Health Security has been developed with the collaboration of the WHO.
- Preparations have already started for the setting up of a Public Health Emergency Operations Center (PHEOC) with the technical assistance of the World Health Organization (WHO) for addressing emerging and re-emerging diseases.
- Daily and subsequent bi-weekly Multisectoral meetings on Dengue during the outbreak and peak of the epidemic represented a priority for MOHW. These meetings aimed at closely monitoring the dengue status, reinforcing response and planning ahead. The Ministry was successful in managing the outbreak since the peak of 2,330 cases in February 2024 was significantly reduced to reach 275 cases in June 2024.
- Establishment of a sterile mosquito production facility to prevent the spread of mosquito-borne diseases.

- Regulation on mandatory testing for infectious diseases was made in January 2024 in accordance with Section 193 of the Public Health Act.
- Adaptation of the 3rd Edition of AFRO Integrated Disease Surveillance and Response (IDSR) in the country context has been completed. A core committee for IDSR is in place to oversee the implementation of IDSR
- WHO Infection Prevention Control (IPC) Assessment Tool 2 (IPCAT-2) score improved from 5% in 2020 to 61% in 2023 and the WHO Minimum Requirements for IPC (Min-IPC) score improved from 7% in 2020 to 62% in 2023.
- Accreditation status of the Government Analyst Division to the ISO 17025:2017 Quality Management system standard as certified by the MAURITAS has been maintained during the reporting year.

### Management and Prevention of Non-Communicable Diseases



- Decisive actions are being taken at the level of MOHW to further address Non-Communicable Diseases (NCDs) and their risk factors.
- New National Action Plans and Policy documents have been elaborated including the National Stroke Action Plan 2023-2027, the National Integrated Non-Communicable Diseases (NCD) Action Plan 2023-2028, and the National Service Framework for NCDs 2023-2028.
- Increase in the number of participants screened to reach 49,738 as compared to 45,098 in FY 2022-2023. NCD Screening Programme also consist of an intensive health promotion campaign for the general public.
- Introduction of AI ECG in Mauritius aims to detect early signs of heart diseases and identify asymptomatic individuals thereby helping prioritise interventions and decrease the disease burden on health services. A rise from 2,350 to 6,742 tests has been observed from FY 22/23 to FY 23/24.
- The number of students screened increased to 33,338 as compared to 32,562 in FY 2022-2023.
- In line with the National Cancer Control Programme 2022-2025, vaccination against HPV has been extended to both girls and boys aged 9 to 15 years.
- A 3-day International Conference on Diabetes, Obesity and Associated Diseases was organised in January 2024.

### Enhancing Accessibility through investment in health infrastructure



- Accessibility to healthcare services is being clearly enhanced. Massive investment in the construction of new public health infrastructure and the upgrading of existing ones are ongoing both at the primary health care level and hospital level.
- The National Cancer Centre which was inaugurated on 08 May 2024 symbolises a pivotal shift in cancer care delivery, underscoring the fundamental belief that every individual should have access to life-saving treatments.
- For FY 2023-2024, some MUR 1.8 billion were budgeted for health infrastructural works for a total project value of around Rs 8.8 billion.
- At the end of reporting period, the Sir Anerood Jugnauth Hospital was 98% completed, the New Eye Hospital was 70% completed and 5 Mediclinics, 1 Area



Health Centre (AHC) and 5 Community Health Centres (CHC) were fully completed. Construction of 4 AHCs were in progress and 2 Medi-Clinics, 3 AHCs and 6 CHCs were still at design stage.

### New Structures and Initiatives for more sustainability



- Operationalisation of the Mauritius Food Standards Agency (MFSA), responsible for ensuring the safety and nutritional quality of food in Mauritius.
- Participation in Small Island Developing States (SIDS) Pooled Procurement of Medical Products for more affordability, cost efficiency, economies of scale and collective negotiation.
- Setting up of the Central Medical Procurement Authority to manage the overall procurement, warehousing, supply, and distribution of medical supplies in Mauritius. This centralized system is designed to eliminate waste, prevent shortages, and improve overall healthcare delivery.
- Collaboration with different national and international stakeholders for the holding of a National Dialogue on Health Financing (NHFD) in 2023. In a nutshell, the National Dialogue served to underpin exploration and adoption of viable domestic financing mechanisms, strategic policy advisory services, partner engagement, and resource mobilisation for the country.
- Collaborating with the WHO and the Green Climate Fund (GCF) to work on the structure of a dedicated unit to look into health issues associated with climate change. At present, a focal point on Climate Change has been designated at MOHW.
- Acquisition of 26.4 kW rooftop PV solar panel project at J. Nehru Hospital represents a pioneering initiative, the first of its kind to convert sunlight into electrical energy, allowing cost saving.

### Favourable Health Indicators



- Investment in health has paid rewarding dividends mostly in terms of an enhancement in the health status of the population. Life expectancy at birth has favourably improved to reach 70.2 years for male and 77.3 for female in 2023.
- Mauritius has already achieved some of the health-related Sustainable Development Goals targets set for 2030. Infant mortality rate and under five mortality rate was 13.0 and 14.4, respectively, per 1,000 live births and maternal mortality rate was 25 per 100,000 live births in 2023.
- The percentage of the population with access to affordable medicines and vaccines on a sustainable basis is close to 100.

### International Recognition



- The Honourable Dr. Kailesh Jagutpal, Minister of Health and Wellness in Mauritius, has been **bestowed with the prestigious title of African Public Health Leader of the Year 2023** by the African Leadership Organization from UK due to his exemplary leadership which has been instrumental in the successful implementation of numerous strategic initiatives aimed at safeguarding public health, particularly amidst the challenges posed by the COVID-19 pandemic. (Link:

<https://www.africanleadershipmagazine.co.uk/poty-2024-dr-kailesh-jagutpal-named-african-public-health-leader-of-the-year/>

- Human Development Index (HDI): 0.796 as compared to a global average of 0.732 (latest HDI Report).
- According to the recent joint publication of the WHO and the World Bank- “Tracking Universal Health Coverage 2023 Global Monitoring Report”, the UHC Service Coverage Index for Mauritius was 66 in 2021. Mauritius is ranked 3rd in the Southern African Region.
- According to the International Monetary Fund (IMF) country report 2024, the positive economic performance, with real Gross Domestic Product (GDP) growth of 8.9 % in 2022 and 7% in 2023 **was attributed mainly to the public health for the effective management of the pandemic** as it contained all the necessary conditions to return to normal life and kick-start the economy back.
- As per the ninth report on Global Tobacco Epidemic 2023, Mauritius is now the **third country in the world**, along with Netherlands, to have fully implemented the MPOWER strategy of the WHO FCTC at best-practice level in order to lower the current status of tobacco consumption.

## 1.9 MAJOR CHALLENGES



Notwithstanding the remarkable health achievements accomplished, Mauritius still faces existing and emerging challenges in the health sector, comparable to those seen in medium to high-income countries. There is a pressing need to enhance digital health systems, reduce substance abuse, and integrate climate change considerations into health policies.

Furthermore, international health issues such as pandemics, antibiotic resistance, and global health inequities underscore the importance of a resilient and responsive health system.

Our growing ageing population may be accompanied by an increase in NCDs, complex healthcare and social needs, and rising expectations for more patient-centred and higher-quality care.

The major challenges are as follows:

**Addressing the Incidence of NCDs:** As per the Mauritius NCD Survey 2021, improvements have been noted in the status of NCDs and their risk factors as compared to the situation in 2015. Still, NCDs remain a major public health problem in Mauritius and require constant attention. The NCDs and the chronic conditions associated with them are responsible for the largest share of morbidity, mortality and disability.

Unhealthy habits among the population such as smoking, alcohol abuse, poor eating habits and a sedentary life style have contributed to the high prevalence of NCDs in the country. Moreover, genetics play a significant role in NCDs like diabetes, heart disease, and cancer.



Identifying genetic predispositions can be challenging due to the complex relationship between multiple genes and environmental factors. In Mauritius, as we inherit our genes from African, Asian and less commonly Caucasian origin, we are genetically more predisposed to develop NCDs. Moreover, the lack of awareness and education about genetic risk factors often impedes on early detection and intervention. Therefore, this complexity requires comprehensive research and tailored healthcare strategies to understand and address the genetic components of NCDs effectively.

Yet, there is a strong political commitment to tackle NCDs and a number of fiscal measures and regulatory frameworks are in place. Regular surveys on NCDs and their risk factors are conducted and National Action Plans with multi-sectoral involvement have been developed and are being implemented.

**Countering the proliferation of infectious diseases:** Like many countries in the world, the country is not spared from the resurgence of infectious diseases and emerging ones which remain continuous threats to the country. COVID-19-related interventions led to higher unpredicted costs in this sector. Thus, preparedness and increased public health vigilance for containing the propagation of infectious diseases such as COVID-19, dengue, malaria, chikungunya, monkeypox, amongst others are crucial.

The need for a well-prepared public health unit to address these challenges in real time, has been strongly felt since 2020. To reinforce health resilience, the Ministry will implement the National Action Plan for Health Security (NAPHS) and operationalize the Public Health Emergency Operations Centre (PHEOC). Infection control programs will be reinforced and facilities set up to prevent the spread of mosquito-borne diseases.

**Responding to the Vulnerabilities of Mauritius as a Small Island Developing State:** Small islands like Mauritius are particularly vulnerable to the impacts of climate change on health. Climate change, identified as long-term shifts in temperature and weather patterns, has had a significant impact on both Communicable Diseases and NCDs in Small Island Developing States (SIDS). Severe climatic events such as cyclones, flash floods, and droughts have adversely affected human health.

As a SIDS country, Mauritius also depends a lot on importation of medical products and face high prices due to low volume of purchase. Moreover, shared risk factors, like air pollution and poor diet, link climate change to increased morbidity and mortality from NCDs, placing significant strain on both Government and individual resources.

In this line, actions are being taken to address these setbacks. The country is already engaging in the SIDs pooled procurement exercise for cost reduction and also envisaging the setting up of a dedicated unit to look into health issues associated with climate change.

**Addressing the Spillover Effects of Development on Health-** Mauritius is currently undergoing an important strategic period of economic and social development. These economic and social developments have brought about rapid changes in lifestyles, urbanisation, production and energy consumption in Mauritius over the last decades.

Environmental risks: To deal with the root economic and developmental driving forces affecting environmental health risks, it is essential that health be at the centre of inter-sectoral actions. It is thus important to monitor and assess environmental health risks associated with existing and future environmental polluting activities. The Environmental Health Engineering Unit which has already extended its field of activities regarding Environmental Surveillance pertaining to Legionella as well as Poliomyelitis and intends in the medium term to intensify

drinking water quality monitoring programmes with improved technologies such as in situ Testing equipment for measuring PH, Turbidity, Total Dissolved Solids and avail of the necessary training amongst others.

**Social risks:** Mental health issues particularly among adolescents and our elderly still need our attention. Adolescence also brings concerns related to substance abuse, sexually transmitted diseases, and reproductive health. Furthermore, low birth rates and the migration of young people abroad in search of better opportunities contribute to demographic shifts that impact the healthcare sector.

In view of the above, the Ministry is envisaging to implement a National Strategy for Adolescent Health (2024 - 2029). Government is also striving to address the healthcare needs of the ageing population through the implementation of the National Integrated Care for Older People (ICOPE) Strategic and Action Plan 2022-2026, comprising 7 Strategic Objectives and 55 activities.

The Harm Reduction Unit is upscaling its programmes and adopting new regulations for the prevention of substance abuse and rehabilitation of victims of all ages. Moreover, the “Loss to Follow up (LTFU) HIV/AIDS Cases” also represent a challenge to the Ministry. Stigma is one of the major barriers contributing to the LTFU cases. The AIDS Unit is continuously tracking patients not attending Day Care Centres for Immuno-suppressed (DCCIs) so that they can be re-engaged for treatment and care.

**Responding to the individual needs of units operating under MOHW:** Maintaining high-performing units in a health system presents challenges such as staffing shortages, limited resources, and managing complex patient cases. High patient volumes and acuity levels, along with regulatory compliance and quality standards, require efficient communication and coordination among multidisciplinary teams.

Many departments including the Breast Unit, SAMU, Centre for Gastroenterology and Hepatology, Mauritius Health Institute, Mauritius Food Standards Agency, Dental Services, Ayurvedic Services and the Central Health Laboratory have often highlighted the disruption in the workflow due to shortage of trained staff and equipment. It was also pointed out that lack of space and inappropriate infrastructure may also affect health and safety norms. In certain cases, revision of policies and regulations have been proposed.

Thus, there is the continuous need to ensure the maintenance of health infrastructure (Building and Equipment), improve implementation rate of new infrastructure projects, fill-in vacancies, build further the capacity of the health workforce and expedite the digitalisation of health services to meet the new demand of the public health sector.

## 1.10 STATUS ON THE IMPLEMENTATION OF SUSTAINABLE DEVELOPMENT GOAL 3



**SDG 3** stands as a cornerstone in the global agenda with an aspiring goal to *ensure healthy lives and promote the well-being for all at all ages*. This multifaceted goal encompasses a bold commitment to end the epidemics of AIDS, tuberculosis, malaria, and other communicable diseases. It also targets the reduction of premature mortality from Non-Communicable Diseases through prevention and treatment while promoting mental health.



13 Targets

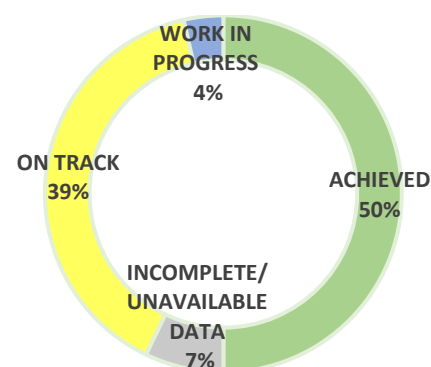


28 Indicators

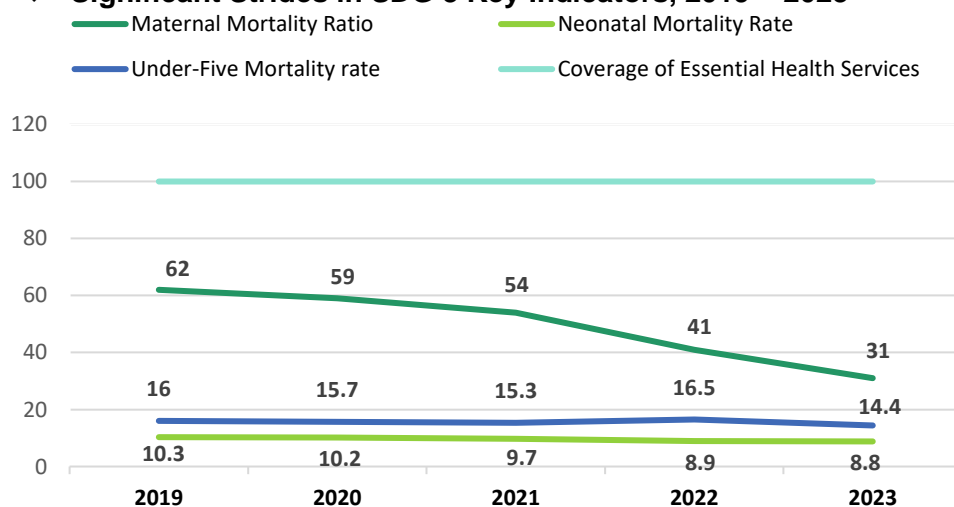
Furthermore, **SDG 3 seeks to reduce the maternal mortality ratio and end preventable deaths of new-borns and children under five years of age by 2030**. It also strives to achieve Universal Health Coverage and provide access to safe and effective medicines and vaccines for all.

The country is aligned with SDG 3 through the Government Vision 2030, Government Programme 2020-2024, and Health Sector Strategic Plan 2020-2024.

The 2024 Voluntary National Review (VNR) report of the Republic of Mauritius was under preparation by the Ministry of Foreign Affairs, during the FY 2023-2024. It highlights the achievements, experiences as well as the gaps and challenges identified in the implementation of the SDGs since 2019. The MOHW has reported on the progress achieved with respect to SDG 3. The country is required to present the aforesaid report at the High-Level Political Forum (HLPF) of the UN Economic and Social Council in July 2024 in New York. Most of the SDG 3 targets are either achieved or on track:



### ❖ Significant Strides in SDG 3 Key Indicators, 2019 – 2023

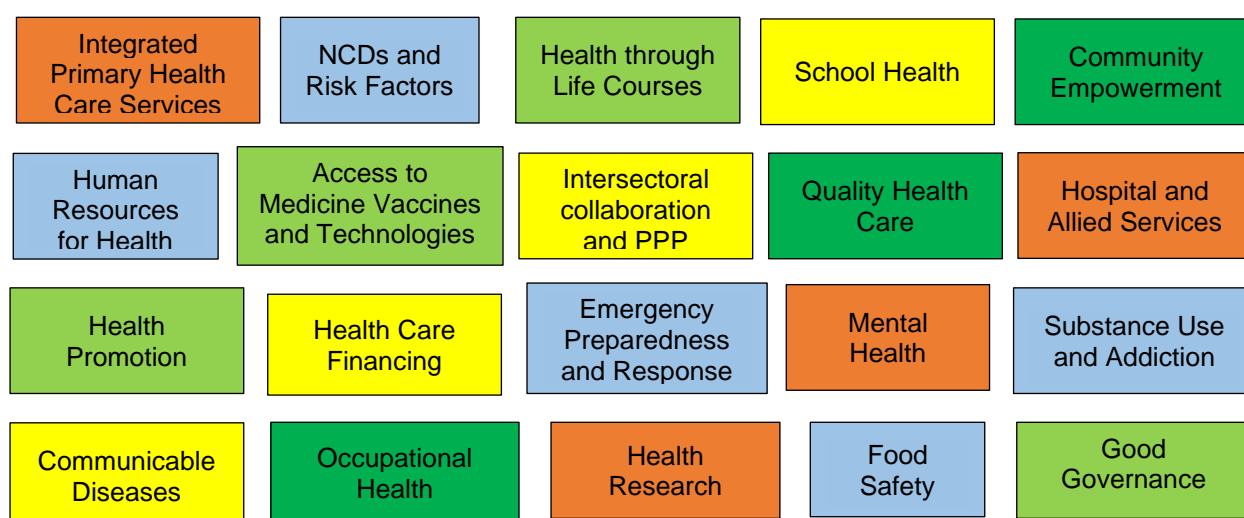


Key Indicators	Trends since 2019
Maternal Mortality Ratio	↓ by 50%
Neonatal Mortality Rate	↓ by 14.6%
Under-Five Mortality Rate	↓ by 10%
Coverage of Essential Health Services	→ Sustained

## 1.11 IMPLEMENTATION OF THE HEALTH SECTOR STRATEGIC PLAN (HSSP) 2020-2024

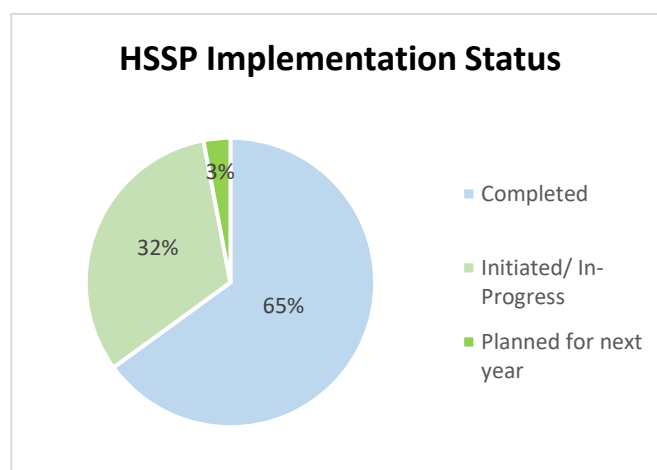
The Ministry of Health and Wellness, in collaboration with the World Health Organization (WHO), developed and launched its first Health Sector Strategic Plan (HSSP) (2020-2024) in August 2020. This five-year plan proposed a comprehensive set of actions to re-engineer and revamp our healthcare delivery services which conforms to Government’s policy in the health sector, aiming at achieving the highest standards of good health among the population.

The main objective of the HSSP 2020-2024 is to ensure enhancement of the health sector development in the Republic of Mauritius, including Rodrigues and the Outer Islands, to further improve positive health outcomes for the individual, the family, the community and the economy at large. The Plan contains 26 Strategic Goals and some 362 Strategic Actions to be implemented under the following 21 thematic areas.



The implementation of the HSSP 2020-2024 is receiving commitment at the highest level through progress monitoring by a Ministerial Committee and the presentation of an annual progress report to Cabinet. In this context, 21 Thematic Working Groups (TWGs) have been set up at the level of the Ministry for the implementation of the HSSP 2020-2024. Some 26 Operational Plans have been worked out with more than 700 activities identified by the different TWGS. During the FY 2023-2024, a third round of progress monitoring was undertaken and Cabinet was accordingly apprised of the status and progress achieved on the respective activities. A fourth round of progress monitoring is underway.

The implementation status as at end of 2023 is as follows.



## 1.12 ADOPTION OF THE STRATEGY ON DIGITAL HEALTH – A GAME CHANGER

The Global Strategy on Digital Health 2020–2025 was endorsed by the Seventy-third World Health Assembly in 2020. It promotes the appropriate use of digital technologies by countries to help address key health system challenges to support equity in access to digital resources so that no one is left behind.

The vision of the global strategy is to improve health for everyone, everywhere by:

- Accelerating the development and adoption of appropriate, accessible, affordable, scalable and sustainable person centric digital health solutions to prevent, detect and respond to epidemics and pandemics,
- Developing infrastructure and applications that enable countries to use health data to promote health and well-being.

Moreover, the G20 under India's presidency committed to support the establishment of the Global Initiative on Digital Health to in turn support the implementation of the WHO's Global Digital Health Strategy 2020-2025. This initiative aims to help reduce fragmentation, provide convergence of digital health initiatives and funds through promotion of digital health public goods, and promote a repository of quality assured digital health technologies in a transparent manner.

In line with the Global Strategy, the MOHW has already embarked on the digitalisation of the public health sector. The implementation of E-Health is also aligned to:

- Government Programme 2020-2024,
- Health Sector Strategic Plan 2020-2024, and
- Country's commitment on Sustainable Health Financing.

After more than 30 years of endeavours to implement E-Health, the MOHW is now close enough to translate this game changer strategy into reality. The adoption of the E-Health is expected to address the following identified gaps in the health system:

- Absence of One Patient One Record concept at time of care as there is no single uniform and unique record for each patient;
- Lack of transparency of treatment performance and resource consumption; and
- Lack of profound data for health reporting and health system planning.

Accordingly, this strategy is expected to strengthen the underpinnings for decision-making and assist the sector to further achieve efficiency gains. The Patient Administration System under E-Health will be bringing the 'One patient One record' concept, which will reduce wastage and duplication of work.

Under the MOHW, the Digital Health Secretariat together with the IT Unit coordinates Digitalisation Projects in the public health sector including the E-Health Portfolio implementation with the technical and financial collaboration of the United Nations Development Programme (UNDP).

These Projects are implemented in collaboration with the Ministry of Information Technology, Communication and Innovation, with the Central Informatics Bureau providing the Policy and Programme Management Support and the Central Information Systems Division providing operational support to digitalisation and computerisation initiatives at the MOHW.

Phase 1 of E-Health includes the implementation of Patient Administration System, a National Blood Transfusion System, a Patient Portal and Reporting features. This Phase is scheduled to go-live in Health Region 4 by November 2024. In this respect, a contract was signed between Consortium and UNDP in January 2024.

## DIGITAL HEALTH PROGRESS FOR FY 2023 - 2024



eHealth Accelerator Labs for Region 3, 4 & 5  
Status : In Progress



eHealth Communication Plan  
Status : Procurement Ongoing by UNDP



eHealth Hosting Infrastructure  
Status : Design Stage



Institutional setup assessment and recommendation  
Status : Completed



360° Site Readiness Assessment  
Status: Completed



eHealth Implementation - Phase 1  
Status:  
Demonstration of generic Solution: Completed  
Approved Project Workplan: Completed  
Software Requirement Specifications: Completed



IT Equipment for eHealth  
Status : Completed  
Award: Augus 2024



Mobienet  
Status : Completed



LAN Implementation for eHealth  
Status  
Region 1 - 80%  
Region 2 - Evaluation in Progress  
Region 3 - Completed  
Region 4 - 95%  
Region 5- 75%



Electricity Upgrading for eHealth  
Status : Design Stage



## 1.13 CLIMATE CHANGE AND GREENING OF THE PUBLIC SECTOR

### Initiatives related to Climate Change



The world remains vulnerable to the risk of infectious diseases, vector borne diseases, zoonotic diseases and pandemics. Climate change and the closeness of people to animals due to deforestation around the world places us at risks of threats such as Leptospirosis, malaria, dengue and Monkey pox.

As a Small Island Developing State (SIDS), Mauritius is particularly exposed to external shocks and must prioritize building resilience to effectively mitigate and respond to these emerging threats. Government is collaborating with the WHO and the Green Climate Fund (GCF) to build capacity for the development of climate resilient health systems. At present, a focal point on Climate Change has been designated at MOHW and a steering committee has been set up to guide project implementation.

An award for GCF financial contribution through United Nations Office for Project Services (UNOPS) has been created. A first disbursement of USD 130,000 has been made to WHO in order to kickstart implementation of activities. Terms of Reference for the recruitment of the Project Coordinator has been prepared by the WHO in conjunction with the MOHW and subsequently submitted for approval. As at December 2023, the WHO informed that a request for proposal was launched, accordingly. A technical evaluation committee was constituted for the evaluation of the offers received. WHO region office for Africa has completed the selection process and the contract has been awarded.

### Greening of the Public Health Sector



Greening of the Public Sector is one of the areas where the Government is committed to leading by example. The objective of the project is to encourage public organisations and institutions to green their activities through the adoption of sustainable consumption practices with respect to resource conservation, improvement of pollution management practices, mitigation of health risks to the local community, adoption of sustainable technology and business practices to sustain and improve service delivery.

The move towards **greening of the public healthcare sector** reflects a growing awareness of the environmental impact of healthcare services and a commitment to sustainability. In this context, the following initiatives were undertaken by MOHW:

- A Memorandum of Understanding (MoU) has been signed between MOHW and the Ministry of Environment, Solid Waste Management, and Climate Change for the implementation of the Global Environment Facility (GEF) funded project, “Indian Ocean Regional Project – Mauritius – Implementation Sustainable Low and Non-Chemical Development in SIDS (ISLANDS)”. This project is supported by the GEF through the United Nations Development Programme (UNDP) and aims to achieve the following objectives: **(i) Upgrade the Mauritius Network Services System that is being used by the Dangerous Chemicals Control Board to issue import**

**permits and clearances, and (ii) Implementing a Centralised Treatment Facility for Healthcare Wastes.** This MoU signifies a collaborative effort to enhance environmental and health safety standards in Mauritius, aligning with the goals of sustainable development and improved public health outcomes.

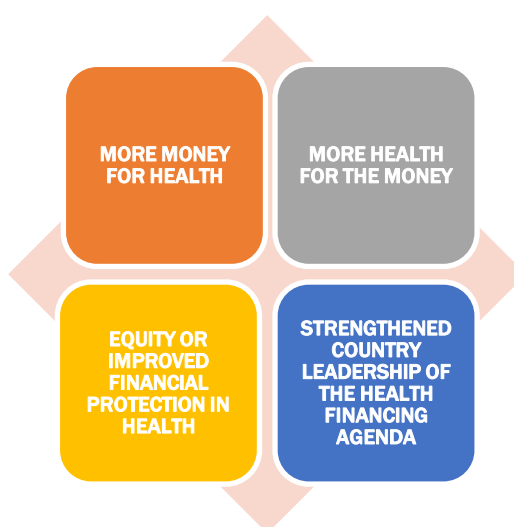
- The International Solar Alliance, in collaboration with the MOHW, has funded a 26.4 kW rooftop PV solar panel project at J. Nehru Hospital, costing USD 50,000. Commissioned in April 2024, this pioneering initiative represents the first of its kind to convert sunlight into electrical energy. This facility is expected to reduce the hospital's electricity expenses by approximately Rs 13,000 per month.
- The incinerator at Victoria Hospital was condemned several years ago, leading to significant challenges in healthcare waste management. In response, a healthcare waste autoclave and shredder were commissioned in November 2022 through collaboration with the UNDP, following a cost-sharing agreement with the Japanese government and the MOHW. The autoclave now treats around 31% of the total waste generated at the hospital daily.
- By adopting the above practices, health sector is not only contributing to a healthier environment but also enhancing patient care and operational efficiency.



## 1.14 ADHERENCE TO THE AFRICAN LEADERSHIP MEETING (ALM) DECLARATION ON INVESTING IN HEALTH

Being a Member State of the African Union Commission, the Republic of Mauritius adopted the Africa Leadership Meeting (ALM) Declaration on investing in Health in 2019, thus committing to increasing domestic resources for health, improving efficiency, equity and governance of the health sector.

In this context, the MOHW has collaborated with the African Union, the African Union Development Agency, Southern African Development Community (SADC), and Global Fund (GF) to undertake Pre-Dialogues and a National Dialogue on Health Financing (NHFD) from 03-06 July 2023 and from 11-13 September 2023, respectively. The focus was on the four key pillars of the ALM Declaration.



Some 150 participants including International Organisations, Development Partners, Private Clinics, Private Companies, Insurance Companies, Civil Societies, NGOs, Ministries, Commissions and public bodies, amongst others, participated in both the Pre-Dialogue and the NHFD meetings. Mauritius was among the first countries to organize such high-level financing dialogues in the SADC region.

The deliberations over the four days of the Pre-Dialogue laid the foundation for prioritisation of proposed activities and basis for commitments that were taken during the main NHFD. During the High-Level National Dialogue, public and private stakeholders were regrouped to brainstorm, reflect and reach a consensus for the drafting of a Statement on National Health Financing. The main priority areas identified by stakeholders under each of the four key pillars culminated into a **Position Statement** delivered by the Honourable Minister of Health and Wellness on the final day of the National Dialogue.

**More Money for Health-** The Statement emphasized on the need to accelerate the development of the medical hub; enhance collaboration between the public and the private sector to invest in state-of-the-art technology and standard of care; mobilise funds and other resources from our development partners for investment and capacity development. The need to fast-track the development of biotechnology, pharmaceuticals, local manufacturing of medical supplies and clinical research, was also underlined.

**More Health for the Money**-More guidelines and protocols should be provided to enhance efficiency and effectiveness in service delivery to further enhance Universal Health Coverage. In addition, primary health care will be improved through health literacy and the Family Doctor Service Scheme and digital transformation of the health system including “One Patient, One Record”. The need to adopt Pooled Procurement, rationalise use of essential medicines and operationalise the Central Medical Procurement Authority, was also highlighted.

**Equity for Improved Financial Protection in Health**-Implement transition, engagement and capacity building plans to support the programmatic capabilities of local implementers as well as increase accessibility of vulnerable groups in the healthcare system.

**Strengthened Country Leadership of the Health Financing Agenda**- Establish a multi-sectoral National Health Sector Committee; develop the second Health Sector Strategic Plan including the National Financing Strategy and coordination framework; and strengthen the Health Management Information System and Monitoring, Evaluation and Reporting (MER) framework.

In a nutshell, the National Dialogue served to underpin exploration and adoption of viable domestic financing mechanisms, strategic policy advisory services, partner engagement, and resource mobilisation for the country.

*(The Position Statement is available on the following link: <https://health.govmu.org/health/wp-content/uploads/2024/01/Position-Statement-Outcome-of-National-Health-Financing-Dialogue.pdf>)*

**PART II**

**ACHIEVEMENTS BY HEALTH**

**SERVICES**



**PART II - SECTION A**

**HOSPITAL AND SPECIALISED**

**SERVICES**

## 2.1 HOSPITAL AND SPECIALIZED SERVICES

Curative services of Public Health Institutions are provided by 5 Regional Hospitals, and 2 District Hospitals. They are supported by 6 specialised hospitals, in areas of psychiatric, chest, eye, ENT, Cardiac and Cancer.

Emergency services are provided by SAMU and Accident & Emergency departments of hospitals. Chronic cases are seen at Unsorted and sorted OPDs of Hospitals and at the primary healthcare centres. Specialised services are available on appointment provided by more than 23 specialties.

In FY 2023-2024, Accident and Emergency Departments of hospitals have catered for some 3,260 patients per day amounting to 1,192,878 visits as compared to 1,118,800 visits in the preceding FY. Sorted outpatients on appointment totalled 1,006,703 visits whilst there were 620,870 unsorted visits without appointment. Hospitals have thus catered for 7,706 outpatient cases per day.

Cases handled by individual hospitals during FY 2023-2024 are as follows:

Regional Hospitals	Accident and Emergency Department	Sorted OPD	Unsorted OPD	Flu Clinics	Admissions	Surgeries
Dr A.G. Jeetoo	215,099	167,225	106,474	2,078	34,402	7,500
SSRN	143,212	157,025	83,450	18,033	29,032	6,032
Dr B. Cheong	123,255	128,365	96,473	11,902	25,822	4,678
J Nehru	117,672	114,592	62,347	21,033	24,399	4,544
Victoria	135,107	255,191	169,367	22,825	33,897	8,972
<b>TOTAL</b>	<b>734,345</b>	<b>822,398</b>	<b>518,111</b>	<b>75,871</b>	<b>147,552</b>	<b>31,726</b>

\*26,888 unsorted OPD cases were also handled by Mahebourg Hospital,  
Source: Health Records Department, MOHW

District and Specialised Hospitals	Accident and Emergency Department	Sorted OPD	Admissions	Surgeries
Mahebourg	42,970	20,634	1,971	-
Souillac	75,893	29,762	5,446	2,716
Brown Sequad	14,832	14,667	3,283	-
S Bharati Eye	105,598	65,547	8,392	8,860
ENT Centre	77,437	10,132	2,815	7,080
Poudre D'or- Chest	-	6,129	446	-
Cardiac Centre	-	22,989	3,891	1,036
Long Mountain	49,915	10,887	-	-
Yves Cantin	41,973	3,528	-	-
National Cancer Centre	-	31,296	2,323	-
<b>TOTAL</b>	<b>408,618</b>	<b>215,571</b>	<b>28,567</b>	<b>19,692</b>

Source: Health Records Department, MOHW

A wide range of Support Services provided professional back-up to doctors which included Audiology and Speech Therapy, Clinical Psychology, Hydrotherapy, Hyperbar, Medical Social Service, Diet and Nutrition, Occupational Therapy, Physiotherapy, Podiatry and Foot Care, Occupational Health Service, Orthopaedics Workshop, Retinal Screening, Fertility Clinics and Smoking Cessation Clinics among others. They have catered for some 377,143 cases and the main ones are highlighted hereunder.

Services	Number of Cases FY 22-23	Number of Cases FY 23-24
Audiology	14,131	13,485
Speech Therapy	10,815	9,727
Clinical Psychology	15,781	15,843
Medical Social Service	27,490	23,751
Nutrition service	31,145	26,684
Occupational Health Service	9,331	9,777
Occupational Therapy	35,865	44,098
Orthopaedic Workshop	11,585	22,397
Physiotherapy	138,713	130,627
Hyperbaric Chamber	94	131
Podiatry	1,430	1,780
Foot care	40,265	39,943
Retinal Screening	31,907	36,831
Smoking Cessation Clinics	2,144	2,069

Source: Health Records Department, MOHW

	As at June 2023	As at June 2024
No. of wards in public hospitals	157	165
Available beds	3,584	3,604
<i>Including:</i>		
Intensive care beds for adults	60	111
Intensive care beds for neonatal	29	30
	FY 2022-2023	FY 2023-2024
No. of admissions	157,577	176,119
Overall bed occupancy	71.6%	69.4%
<i>Bed occupancy at:</i>		
Brown Sequad Mental Health Care Centre	82.4%	78.4%
Dr A.G. Jeetoo Hospital	75.5%	78.8%
Victoria Hospital	74.1%	69.0%

Source: Health Records Department, MOHW

	FY 2022-2023	FY 2023-2024
Surgeries carried out by Regional Hospitals, Souillac Hospital, S. Bharati Eye Hospital, ENT Centre and Cardiac Centre	51,289	51,418
<i>Including</i>		
Open heart surgeries	1,059	922
Cataract surgeries	8,091	8,209
Lithotripsy	869	1,012
Arterio-venous fistula cases	654	557
Cardiac angiographies/angioplasties	6,477	5,979

Source: Health Records Department, MOHW

Tests conducted	FY 2022-2023	FY 2023-2024
Laboratory Service	16 Million	17.4 Million
Radiology Department	FY 2022-2023	FY 2023-2024
X-ray examinations	708,110	727,183
excluding CT-Scans	35,233	32,459
MRIs	5,742	5,084

Source: Health Records Department, MOHW

Some other examinations and tests conducted are as follows:

Type of Tests	FY 2022-2023 Number of Tests	FY 2023-2024 Number of Tests
Chemotherapy	15,564	16,235
Electroconvulsive Therapy	229	183
Electroencephalography	1,468	1,730
Endoscopy	11,852	12,975
Laser (Ophthalmology)	4,767	5,616
Nuclear Medicine	1,550	1,776
Pacemaker implant	339	225
Stress Test	4,973	4,507

Source: Health Records Department, MOHW

The achievements of the different units of care for the FY 2023- 2024 falling under the Curative – Hospital and Specialised Services have been elaborated in this part of the Report.



## 2.1.1 CARDIAC SERVICES



Cardiovascular diseases (CVDs), the leading cause of death worldwide, are a significant health concern in Mauritius as well. The public health institutions are focused in tackling these conditions through early detection, management of risk factors, and promoting healthier lifestyles.

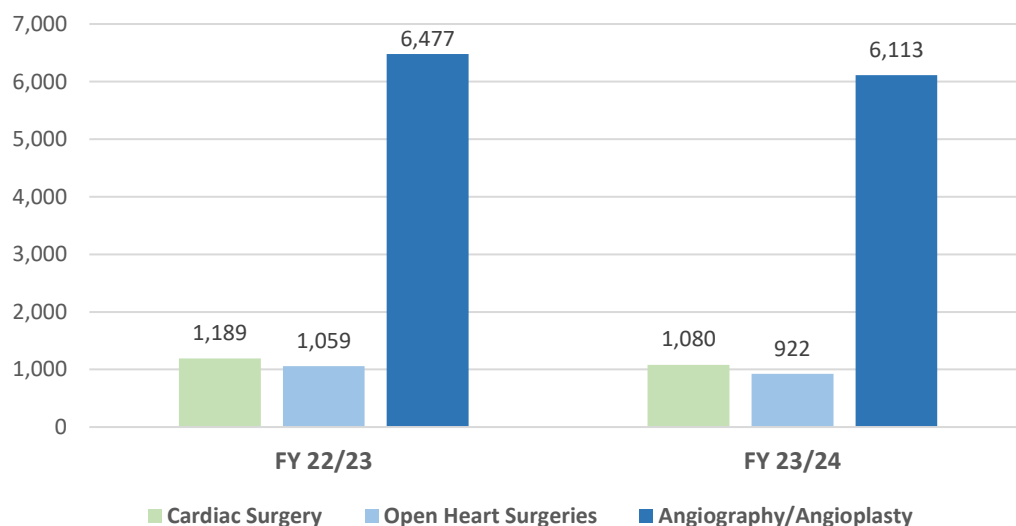
### Cardiology Units

Cardiology units operating at Regional Hospitals are equipped with the latest technologies to serve both outpatient and inpatient cardiology services. Cardiac outpatient departments (OPDs) address cardiac cases, post-angioplasty and Coronary Artery Bypass Grafting (CABG) follow-ups, new cardiac cases, and pre-operative assessments while maintaining a daily on-call service for cardiac emergencies.

Additionally, a range of cardiac-related services are provided including temporary and permanent pacemaker insertions and interventions, cardiac echography, stress tests, Echocardiograms, Holter monitoring, coronary angiography, angioplasty and primary Percutaneous Coronary Intervention (PCI).

### ACHIEVEMENTS FOR FY 23/24

- Advanced medical treatments, timely interventions, screenings and comprehensive rehabilitation programs have collectively contributed to a decrease in cardiology interventions compared to last financial year.



Source: Health Records Department, MOHW (\*inclusive of TFSMC statistics)

- Introduction of a Primary PCI service for heart attack patients:** In this procedure, patients are immediately treated in a catheterization laboratory, where a coronary angiography is performed, and the blocked artery is promptly opened under direct visualization. This service, initially launched as a successful pilot project at A.G. Jeetoo

Hospital, has since been expanded to other catheterization laboratories at the Cardiac Centre and Victoria Hospital.

- **Advanced cardiac imaging service at National Cancer Centre (NCC):** In 2024, a new advanced cardiac imaging service was inaugurated at the NCC. This state-of-the-art service offers both cardiac MRI and cardiac CT, providing non-invasive alternatives for diagnosing cardiac conditions. Patients with chest pain who previously required invasive angiography can now benefit from coronary CT angiography. Additionally, patients undergoing chemotherapy have access to cardiac MRI for accurate assessment of left ventricular function. The service is also set to expand to cater to patients suffering from iron overload.
- **Extension of Cardiac Outpatient Departments to:** Mahebourg Hospital, Souillac Hospital and 7 PHCs.
- **Reduced Cardiac Echo Waiting Time:** Patients now receive echoes within 2 to 3 weeks.
- **Shorter Stress Test Waiting List:** Reduced to 3 to 4 weeks.
- **Service Expansion:** Cardiac echography extended to outpatient clinics in Medi-Clinics and Area Health Centres (AHCs), improving accessibility for patients.
- **Prompt Treatment for Acute Myocardial Infarction:** Timely interventions for life-threatening cardiac conditions.
- **Regular Teaching Sessions (CMEs):** Continuous medical education provided for junior doctors, contributing to the continuous development of medical expertise within the department.

### **Cardiac Centre**

The Trust Fund for Specialised Medical Care (TFSMC) also known as the Cardiac Centre is a body corporate regulated by TFSMC Act 1992. The objects of the Fund are to set up and operate a Specialised Medical Care Centre and manage other institutions for the provision of high-tech medical care.

It is a tertiary medical institution where cardiac surgeries are conducted including Coronary Angiography, Coronary Angioplasty and Open-Heart Surgery. Patients from all over the island who are referred from the 5 Regional Hospitals and Rodrigues attend the TFSMC. Moreover, paediatric and congenital cardiac cases are conducted at the Centre by foreign teams.

### **ACHIEVEMENTS FOR FY 23/24**

- A total of 1,207 Cardiac Surgeries were performed (including 917 Coronary Artery Bypass Graft (CABG), 31 Mitral Valve Replacement (MVR), 40 Aortic Valve Replacement (AVR) among others).
- As of Cardiology procedures, a total of 3,474 procedures were performed out of which there were 549 Angioplasties (PTCA), 2,571 diagnostic angiographies, 12 Permanent pacemaker implantations, among others.
- A new angiography machine has been acquired and it required around 5-6 months for the installation. Moreover, renovation works were undertaken in the Operation Theatre

1. In this respect, there was a reduction in the number of Angiography and Cardiac Surgery conducted.

- In collaboration with foreign teams, Transcatheter Aortic Valve Implantation (TAVI) and Cardiac Resynchronisation Therapy (CRT) have been introduced at the Cardiac Centre.
- Waiting list and waiting time:

Activities	Waiting List		Waiting Time (Weeks)	
	Year 22-23	Year 23-24	Year 22-23	Year 23-24
Cardiac Surgery	183	121	5.3	5.3
Angiography	364	622	5.2	7.8
Angioplasty	109	69	18.5	13.1

Source: Cardiac Centre, MOHW

It should be noted that there has been a significant reduction in waiting time for Angioplasty.

## 2.1.2 GENERAL SURGERY

General Surgery addresses a broad range of operative procedures for diagnosing and treating injuries and diseases across various body parts. The General Surgery Department within a hospital is crucial for delivering comprehensive care through both routine elective surgeries and critical emergency procedures.

Conditions treated by General Surgeons:



- Traumatic and emergency injuries
- Breast pathologies, including cancer
- Vascular and diabetic foot conditions
- Endocrine conditions (thyroid, adrenal glands)
- Urological conditions (Kidney, Urinary bladder, Prostate, Penis, Testis)
- Upper and lower Gastro-intestinal tract conditions (oesophagus, stomach, small intestine)
- Biliary tract conditions (gallbladder, bile ducts, pancreas, liver)

### ACHIEVEMENTS FOR FY 23/24

- **13,299 surgeries** were performed at the 5 regional hospitals indicating a 1.8% increase as compared to the previous financial year. This reflects the department's capacity to handle a growing volume of complex cases, including **567 Arteriovenous Fistula (AVF) procedures** and **1,035 Lithotripsy cases**.
- Amputation cases dropped from **751 in FY 22/23** to **636 in FY 23/24** at regional hospitals, highlighting effectiveness of improved surgical techniques and enhanced patient care, especially for the management of NCDs related complications. First time amputees have also dropped to 10.1% for the same period.

## 2.1.3 RENAL DIALYSIS SERVICES AND RENAL TRANSPLANT

### RENAL DIALYSIS SERVICES



Government provides free dialysis services to all patients requiring the treatment in the Public Health Institutions. Some of the patients who cannot be accommodated in Public Hospitals are referred to the Private Clinics with which the MOHW has entered into agreement to provide the service against payment. The Private Clinics are provided with the dialysis consumables kits required for the dialysis sessions.

Presently, the treatment is available in seven Government Hospitals and in six Private Clinics. Additionally, transport facilities are offered to the patients to attend their dialysis treatment both at the Government Dialysis Units and the Private Clinics, 3 times a week and back home.

### ACHIEVEMENTS FOR FY 23/24

- As at June 2024, a total of 1,453 patients were undergoing dialysis treatment as compared to 1,476 in the preceding year.
- Out of the 1,453 patients on dialysis, 1,245 were referred in the Government hospitals while the remaining 208 were following the treatment in the private clinics.
- A total of 225,437 dialysis sessions were performed in 2023 as compared to 221, 806 sessions carried out in the previous year, both in Government and private clinics.

Dialysis Centres	Number of Haemodialysis Performed			
Year	2020	2021	2022	2023
<b>Govt Hospitals</b>	173,714	182,287	186,314	191,122
<b>Private</b>	42,206	42,394	35,492	34,315
<b>TOTAL</b>	<b>215,920</b>	<b>224,681</b>	<b>221,806</b>	<b>225,437</b>

Source: Renal Dialysis Unit, MOHW

### Expansion of the dialysis facilities:

- During the past few years, new Dialysis Units have been set up and additional new equipment were acquired for improvement of the quality of the service in the public hospital.
- The new Dialysis Unit at the Quartier-Militaire Medi-Clinic has been completed and it will soon be inaugurated to cater for patients of the region.
- There are other projects for further expansion of the service in the Government hospitals.
- As far as Rodrigues is concerned, the number of dialysis machines at the Dialysis Unit

of Queen Elizabeth Hospital, has increased from 10 to 15, where 49 patients are undergoing the treatment. Regular visits are carried out by our Nephrologists to Rodrigues.

### Improved Capacity Building and Human Resources for better service delivery

- Previously, the Nurses posted in the Dialysis Units were only having on-the-job training. The Ministry has offered a training course which led to a Certificate in Nephrology, with the collaboration of the Mauritius Institute of Health (MIH) to some 50 Nurses posted in the Dialysis units.
- In addition to one Consultant in Charge in Nephrology, and 5 Senior Consultant Nephrologists who are in post at the hospitals, one more Nephrologist has joined the service since March 2024.
- In a view for the better management of the Dialysis Units, Ward Managers for the dialysis units have been appointed in each of the regional hospital, in addition to the existing Charge Nurses already in post.

## RENAL TRANSPLANT IN MAURITIUS



A kidney transplant is often the treatment of choice for kidney failure, compared with a lifetime dialysis treatment. Previously, patients and their compatible kidney donors were sent to India to have their renal transplants with all costs borne by the Ministry.

Renal transplants have resumed in Mauritius as from October 2022, by visiting teams from UK and India. Twenty-six patients have undergone their renal transplants at Victoria Hospital by the visiting teams as from October 2022 up to now, including 4 patients during this financial year.

**Two Continuous Renal Replacement Therapy (CRRT) machines have been procured for the ICU at SSRNH and the Thoracic ICU for the Renal Transplant Unit at JNH.** These machines are very sophisticated and are required for specialised treatment such as Haemofiltration, Haemodiafiltration and for Plasmapheresis among others.

The Ministry is envisaging to sustain the renal transplant at VH in the next financial year. Moreover, the construction of a full fledged Renal and Transplant Unit, at J. Nehru Hospital is underway through assistance from Government of India, and is expected to be operational early next year.

## NATIONAL RENAL REGISTER

Ministry has started a National Renal Register (NRR) that was launched by the Honorable Minister of Health and Wellness in March 2023. The NRR has been put in place to have better data collection as regards to all patients suffering from different types of kidney ailments and at the different stages of their diseases.

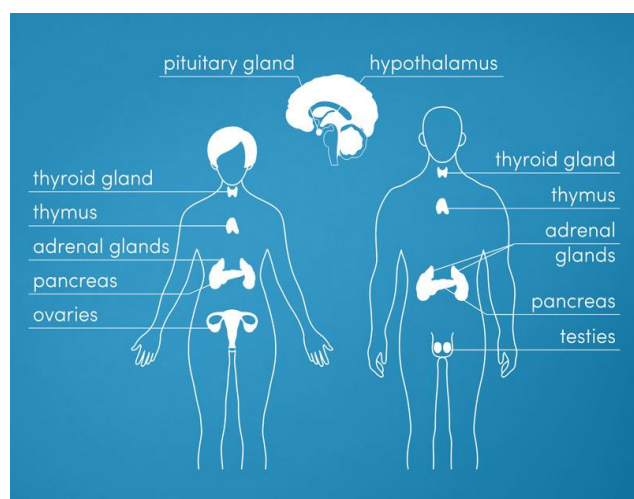


The above include patients having kidney diseases who are not on dialysis, those already undergoing dialysis treatment and also those patients who have undergone renal transplantation. The registry indicates the progress of the diseases at the different stages, the response and outcome of the treatment and the services being provided.

The National Renal Registry which is important for statistical and epidemiological purposes is also required for continuous evaluation of the service in view for improvement and better planning for renal care in future.

The activities for maintaining the renal register have been ongoing during FY 2023-2024 in all the public hospitals and the Dialysis Units, with participation of the medical, paramedical officers, medical records officers and health statisticians. Same will be extended to the private clinics undertaking the related activities as well.

### 2.1.4 ENDOCRINE UNIT



Since April 2022, Endocrinology and Diabetology Units have been merged under one roof thus creating the Endocrine Unit to manage endocrine disorders including diabetes in the five regions of the island. This allowed the decentralization of these services in all the five regions both at hospital and primary healthcare levels. There are 12 Endocrinologists/ Diabetologists serving the Unit.

Patients can presently benefit from Specialised Diabetic Endocrinology Care at close proximity to their home since the

objective is to improve access to Specialised Care. A work plan was devised to cover several points per Health Regions including Regional Hospital, Medi-Clinics, Area Health Centres (AHCs) and even Community Health Centres (CHCs), thus health points is better utilised, while the main hospitals are being decongested.

A protocol determining the level of care was devised and it allowed patients to be seen in a timely manner whereby all those having HbA1c  $\geq$  7%, are being referred to the Endocrinologists. Moreover, dedicated clinics for Gestational Diabetes Mellitus (GDM), complex Diabetic Foot and Type 1 Diabetes < 16 years old were respectively availed of the services of Endocrinologists.

### ACHIEVEMENTS FOR FY 23/24

- Reinforcing the Unit through the recruitment of three Specialists in Endocrinology/ Diabetology. A new Consultant in Charge was also appointed for better guidance on the provision of these services and better implementation of best practices.

- Improving equity of care by providing Diabetes Specialist clinics in all Health regions and by setting-up additional clinics in the Primary Health Care under the Endocrinology/ Diabetology Unit.
- The patients now receive treatment with the Endocrinologist, the Specialised nurses counselling as well as the nutritionist input in one go, saving time and reducing additional appointments. Same principle applied to the GDM and Type 1 clinics.
- As for the foot clinics, the complex diabetic foot ulcer cases were seen and under the expertise of the foot care nurses and the input of the multidisciplinary team reducing case deterioration in between specialist appointments.
- Training in basic podiatry management imparted to all Specialised Nurses (Diabetes Foot Care) by foreign team with the support of WHO led by Professor Maimouna Mbye, as well as another team from Canada (Mr. and Mrs. Bradley — October 2023). Simple cases are being seen by the Specialised Nurses.
- Sustained the provision for glucometers and strips to all women with Gestational Diabetes free of Charge.

### 2.1.5 CHEST UNIT



The Chest Unit is responsible for providing and delivering respiratory care for patients suffering from chronic and acute respiratory diseases. Approximately 10% of its activities are dedicated to the treatment and management of Tuberculosis (TB).

Decentralised Services are provided at all regional hospitals, Poudre D'Or Hospital, and various Medi-Clinics across the island along with uninterrupted smooth running of activities at Poudre d'Or Chest Hospital.

#### ACHIEVEMENTS FOR FY 23/24



- Provision of oxygen concentrators for inpatients at Poudre D'Or Hospital.
- Detection rate for TB has increased to over **90%**, with a cure rate exceeding **95%**.
- No cases of Multidrug-Resistant Tuberculosis (MDR-TB) have been reported in the last two years.
- P3 Unit laboratory is fully operational at Sir Edgar Laurent Laboratory and supports the Chest Clinic at Jeetoo Hospital.



- Establishment of guidelines and auditing systems to manage acute and chronic respiratory diseases.
- Upgrading of infrastructure at Poudre D'or Hospital

## 2.1.6 ONCOLOGY SERVICES INCLUDING PALLIATIVE CARE



The oncology section provides comprehensive cancer care, encompassing radiotherapy, brachytherapy, and chemotherapy. It supports various radiological investigations, including CT scans, MRI, mammography, and X-rays. The care structure includes both out-patient and in-patient departments, a follow-up clinic, and services for palliative and supportive care. Additionally, the section manages and treats new cancer cases, ensuring a holistic approach to patient care.

### ACHIEVEMENTS FOR FY 23/24



**The National Cancer Centre (NCC)**, inaugurated on 08 May 2024 by the Hon. Prime Minister, represents a major milestone in Mauritius' healthcare infrastructure. This state-of-the-art facility, with approximately 200 beds, offers cutting-edge cancer treatment technologies and is equipped with two Linear Accelerators, and multi-leaf collimators.

It provides a comprehensive range of advanced radiation therapies and radiological services, including X-ray, Ultrasound, CT scan, MRI, DEXA Scan, and Mammography, as well as Nuclear Medicine and PET CT scans.



Introduction of new drugs to the hospital formulary and updated criticality of new and existing drugs.

- Installation and commissioning of one linear accelerator, CT simulator, and MRI equipment.
- On-going installations of the new HDR brachytherapy and PET scan systems.



- Opening of wards and dedicated emergency department in May 2024.



Multidisciplinary Team Meetings were introduced in all five regional hospitals starting in 2023 to enhance collaborative patient care.

Safety Assessment Report (SAR) Part 1 was conducted for the new building, focusing on teletherapy bunkers to ensure safety and compliance.

- There was an Expert Consultation as part of the International Atomic Energy Agency (IAEA) expert mission.
- Appointment of an advisor breast surgeon from May to November 2023, to setup the breast unit as per the National Cancer Control programme 2022 in Mauritius.



Medicinal Cannabis Training was approved for refractory chemotherapy-induced nausea and vomiting, and chronic pain. In 2023, 3 additional oncologists were trained in medicinal cannabis.

- 2 medical physicists and 1 radiation therapist are undergoing training in Algeria on conformal radiotherapy under project MAR 6015. Radiation oncologists, medical physicists, and radiation therapists are also being trained on 3D radiotherapy techniques in Turkey.
- Under the Technical Cooperation Cycle of the International Atomic Energy Agency, procurement of PET/CT Scanner on a cost sharing basis, 70% for the Government of Mauritius and 30%, was made for the NCC. Moreover, procurement of 18F FDG radioactive tracer from Groupement d'Intérêt Public Cyclotron Réunion Océan Indien (GIP CYROI) of Réunion Island was also undertaken.

### 2.1.7 BREAST UNIT

The first dedicated Breast Unit in Mauritius has been established at SSRN Hospital during the FY 2023-2024. The unit officially commenced operations in November 2023.

Pathways for efficient diagnosis and treatment of breast diseases including breast cancer were established. Doctors with an interest in managing breast diseases were identified and posted at the unit. An external Advisor was also appointed who started his 6-month contract in mid-May 2023.

#### ACHIEVEMENTS FOR FY 23/24



52  
New Diagnosis  
Breast Cancer Cases



37  
Benign Lumpectomy  
Operations



64  
Trucut Biopsies



41  
Mastectomies

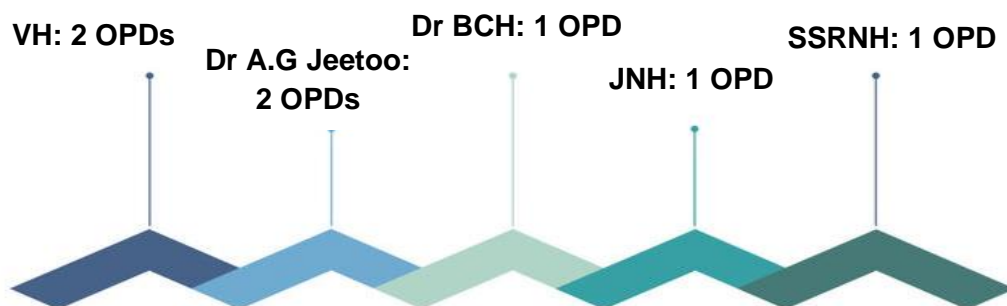
- Since October 2023, all patients with breast-related issues in the SSRN Hospital catchment area have been redirected to the specialized Breast Clinic.
  - Two surgeons with a special interest in breast disease have been appointed
  - Two clinics are running every week with Specialists and MHOs.
  - Data regarding all patients seen in the clinic is being recorded in real-time, including dates of investigations, and surgery.
  - Between November 2023 and mid-June 2024, **528** 'new' patients were seen in the clinic and **612** patients were followed up.
  - A new ultrasound machine has been installed and commissioned for specialized breast scans.
  - A digital mammogram machine is being procured.
  - Multidisciplinary team discussions are done for all breast cancers diagnosed, before and after surgery, to give patients the best treatment.
  - The pathway for pathology reports was made robust with full co-operation of the pathology department and doctors.
- Mastectomy and immediate Breast reconstruction with autologous Latissimus Dorsi Flap **without implant** was performed in one patient with excellent results.

### 2.1.8 NEUROLOGY SERVICES

All regional hospitals dispense neurology services through weekly outpatient consultations and inpatient management since the year 2022. Currently, three neurologists provide services across the five regional hospitals: two at Victoria Hospital and one at Jeetoo Hospital.

Since last year, the stroke unit has been operational, offering thrombolysis facilities for acute stroke patients who arrive within the critical window period. The neurologists at Victoria Hospital also ensure 24/7 coverage of the Stroke Unit.

Specific neurological disorders such as Muscular Dystrophy, Myasthenia Gravis, Multiple Sclerosis, Chronic Inflammatory Demyelinating Polyneuropathy (CIDP) patients, and Dystonia patients are given special attention at Neurology OPD consultation in the regional hospitals. The OPD weekly consultations are as follows:



- ICU Support: Neurology consultations are provided for critical cases in all ICUs across the island.



Support for Paediatricians: The neurology team offers clinical opinions and input to enhance management of complex neuro-pediatric cases.

Inpatient Neurology disorders are managed at VH and Dr A.G. Jeetoo Hospital.

- Neurology services are available at Early Dementia Diagnosis Clinics (EDDC) island-wide, with ongoing support as needed.

## ACHIEVEMENTS FOR FY 23/24



- The Stoke unit, featuring 6 ICU beds, offers 24/7 management and thrombolysis for acute ischemic stroke patients from across the island.
- **Over 500 patients have benefited** from the service since its inauguration in December 2023.
  - Around **8,000 new cases** and **25,000 follow-up cases** were seen in weekly or bi-weekly OPDs across all 5 regional hospitals.
  - With 24/7 on-call services now available for stroke patients, assistance to patients eligible for thrombolysis can be provided all over the island, with SAMU playing a crucial role in delivering this service.

### 2.1.9 GASTROENTEROLOGY INCLUDING HEPATOLOGY SERVICES

The Centre for Gastroenterology and Hepatology at Dr A.G. Jeetoo Hospital serves as a national tertiary referral centre for managing gastrointestinal and hepatology issues. It consists of two sub-units, namely, (i) Endoscopy Unit and (ii) the Gastrointestinal Out-Patients Department (GIOPD). It is staffed with one Specialist and three MHOs, providing both in-patient and out-patient services.

The Endoscopic Unit handles routine and emergency gastrointestinal problems in Region 1 and offers nationwide coverage for acute gastrointestinal bleeds, palliative stent placements for unresectable tumours, and other complex endoscopy procedures.

Complex endoscopic procedures, including ERCP, play a crucial role in helping patients avoid major surgical interventions, facilitating quicker recovery, and expediting the start of chemotherapy for patients with gastrointestinal malignancies.

The Gastrointestinal Out-Patient Department (GIOPD) schedules 12 assessment slots per week from Monday to Saturday, offering morning and afternoon sessions for assessments and referrals regarding endoscopy, blood tests, and radiological studies.

Additionally, the centre leads the National Hepatitis C Elimination Programme, collaborating closely with NGO sites, prisons, and Methadone Dispensing Sites to screen patients and facilitate access to treatment and care.

## ACHIEVEMENTS FOR FY 23/24



- Over the past 12 months, 6,420 endoscopy procedures were conducted, as compared to 5,397 in the last FY.
- Instructional leaflets for endoscopic procedures have been enhanced to make them more user-friendly for patients.
- Routine endoscopies are conducted within 6 weeks, and urgent cases are prioritized to be completed within one week. Moreover, endoscopic procedures undergo continuous monitoring to ensure adherence to international standards at all times.
- Patient flow in the GIOPD is consistently high, with all patients seen within 14 days of initial presentation at the casualty department.



- This department is the only fully digitalized one within MOHW, streamlining patient records from initial presentation to follow-up. This has notably reduced duplication of laboratory requests and enhanced workflow efficiency within the unit.
- Hepatitis C services have been **decentralized**, with screening and linkage to care now conducted at Methadone Dispensing Sites.
- The National Colorectal Screening Programme is being established involving collaboration from other ministries and the scaling up of laboratory equipment.

### 2.1.10 SAMU SERVICES



The Service d'Aide Médicale Urgente (SAMU) provides on-site pre-hospital medical treatment and stabilizes critical and vital emergencies during transport, aligning with the golden hour concept. SAMU also handles secondary inter-hospital transfers for CT scans, MRIs, and Primary and Rescue Percutaneous Coronary Intervention (PCI), as well as aero-medical transfers.

The SAMU 24/7 Control Room 114 at Victoria Hospital manages approximately 1,300 calls daily, utilizing an efficient triage and logistics system.

Since 2019, a Resuscitation Unit has been added to the Accident and Emergency departments in all five Regional Hospitals to address vital emergencies, including myocardial infarctions.

**OPERATIONS FOR FY 23/24**

- Primary Outings (For Emergency purposes): 10,163
- Secondary Outings (Transfer from one health institution to another): 4,482
- Number of Normal Ambulance Interventions: 24,215
- Number of aero transfers: 119

**ACHIEVEMENTS FOR FY 23/24**

- Operational hours of Resuscitation units in Accident and Emergency departments of Regional Hospitals extended to 24 hrs a day and 7 days a week (except at JNH).
- Training of 30 Nursing Officers in Emergency Care by Bordeaux University completed in April 2024.
- Training of additional 30 Emergency Physicians by Bordeaux University started in April 2024.
- Participation in simulation exercises with other stakeholders, for example, attending to mass casualties during natural or man-made disasters.
- Acquisition of 2 new Advanced Cardiac Life Support (ACLS) and 1 Normal ambulance in March 2024.

**2.1.11 OBSTETRICS AND GYNAECOLOGY**

The obstetrics and gynaecology services encompass treatment and surgical management for obstetric and gynaecological problems, providing antenatal care and gynaecological assessments with appropriate treatment in accordance with established guidelines and protocols.

The services are available at both primary healthcare and hospital levels, with each of the five Regional Hospitals having a Department of Obstetrics and Gynaecology to ensure enhanced accessibility to care and safe delivery of pregnant women and their babies. Trained midwives deliver antenatal, postnatal, and child welfare services at AHCs and CHCs island-wide. Moreover, Gynaecologists are available 24/7 at Regional Hospitals to address ongoing needs.

**ACHIEVEMENTS FOR FY 23/24**

<b><i>Number of Deliveries at Public Health Institutions</i></b>		
<b>Type of Deliveries</b>	<b>FY 22/23</b>	<b>FY 23/24</b>
Normal	3,089	3,106
Caesarean	4,178	4,360
Forceps/breech	138	92

*Source: Health Records Unit, MOHW*

- Advancements in obstetrics and gynaecology have allowed many oncology cases to be managed locally at the level of the hospitals that would have otherwise needed overseas treatment. This progress has not only enhanced accessibility to essential care but also reduced the financial and logistical burdens on patients and their families.
- Foetomaternal medicine, including screening for foetal anomaly is being done at the AHCs and hospitals. Ultrasound is performed using 3D modality to diagnose foetal anomaly and counselling is provided.
- Patients are offered diagnosis and treatment for their infertility issues at all the Regional Hospitals. Specialized service has recently started at SSRN hospital for more specific treatment that deals with infertility issues.
- Gynae-oncology facility in terms of undertaking complex surgeries dealing with the five main gynaecological cancers are also offered.
- Counselling done for all associated changes related to sexual and other related aspects of day-to-day life. Contraception care are also dispensed at the level of Medi-Clinics and hospitals to help ladies to take control of their fertility.
- Uro-gynaecology and menopause clinics are held and services offered to patient presenting with prolapse and symptoms related to the prolapse occurring after menopause.
- Consultants in Charge in all specialities, including Gynaecology and Obstetrics are required to make regular presentations to Management on the implementation of the recommendations of the Committee on maternal death.

### 2.1.12 FERTILITY CLINIC

Opened in February 2022, the Fertility Clinic at SSRNH offers comprehensive support for couples facing conception challenges. It operates two outpatient clinics managed by two gynaecologists and a daily morning walk-in clinic. Services include baseline assessments, fertility-enhancing surgeries such as laparoscopy and hysteroscopy, as well as medical management with timed intercourse. Besides, the Ministry is also providing fertility services at VH since August 2022.

Since the beginning of this year, the clinic has also introduced Intrauterine insemination, the first phase of Assisted Reproductive Techniques.

### ACHIEVEMENTS FOR FY 23/24

- The introduction of Intrauterine Insemination has been a stepping stone in fertility care, offering patients access to the treatment at no cost. This advancement not only broadens the range of available fertility services but also provides substantial financial relief.





Approximately 20 patients conceived through medical and surgical management.



This year, 2 patients conceived via Intrauterine Insemination.

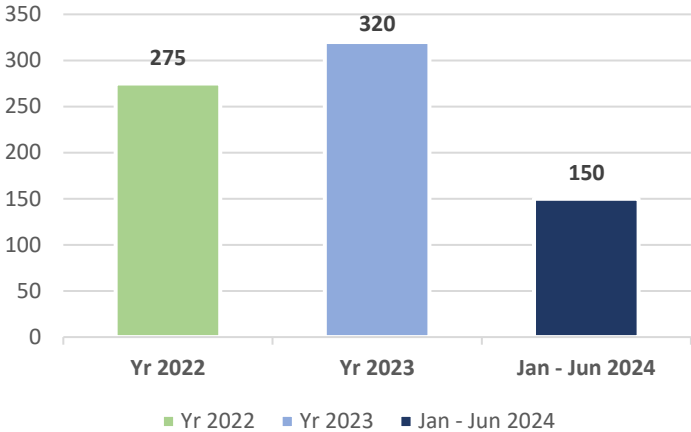


Figure II: Fertility Clinic Attendances

- Acquisition of a video laparoscopy and hysteroscopy set along with a new electro-surgical device, essential for diagnostic and therapeutic purposes for fertility-related issues.
- Addition of laboratory equipment to enhance fertility treatments.
- The introduction of Intrauterine insemination has been a stepping stone in the public sector fertility care, offering patients access to this treatment at no cost. This advancement not only broadens the range of available fertility services but also provides substantial financial relief.

### 2.1.13 DERMATOLOGY SERVICES



Dermatology services are provided at both primary and hospital levels. There are daily outpatient clinics in the five regional hospitals. Inpatients are seen daily in the wards. Emergency cases are attended when referred. Coverage also includes district hospitals, specialised hospitals, Medi-Clinics and prisons.

The unit is composed eight specialists and one Consultant in Charge. The staff of the Unit are also involved in the training of new officers, act as resource persons and attend workshops especially on sexually transmitted infections and participate in TV/Radio programmes on different skin topics.

## ACHIEVEMENTS FOR FY 23/24

- Dermatology services have managed **33,190** consultations conducted at hospitals and an additional **2,953** cases addressed at Primary Health Care Services.
- With the decentralization of services, **15 Primary Health Care (PHC)** centres now offer dermatology services, marking a notable expansion from the **9 centres** in the previous financial year, improving accessibility to specialized dermatological care across more regions.
- Introduction of the register for new cases of patients suffering from psoriasis and auto-immune bullous disorders.
- The unit has sustained the STI awareness campaign.
- Training of peer leaders and adolescents on Sexual and Reproductive Health in September 2023.
- Participation in the National Certificate Level 5 In Community Health Care concerning sexually transmitted infections.
- Participation in the Workshop on Integrated Disease Surveillance and Response in August/ September 2023.

### 2.1.14 OPHTHALMOLOGY SERVICES

Subramania Bharati Eye Hospital (SBEH) is Mauritius' sole public eye hospital, providing comprehensive eye care and services, including consultations, advanced ophthalmological studies, and surgeries such as cataract, vitrectomy and corneal transplant. Chalazion excision sessions are conducted twice weekly, enhancing surgical offerings.

Since January 2015, cataract surgeries at New Souillac Hospital (NSH) have contributed to a decrease in the number of patients on the waiting list and expanded the hospital's services to include three specialist OPDs, a Laser clinic, and an OCT clinic. Ophthalmic services are available at regional hospitals, Yves Cantin, and Mahebourg Hospital, with bi-monthly visits to Rodrigues. Additionally, foreign teams from Pakistan and India have visited SBEH, allowing patients to access advanced and complex surgeries.



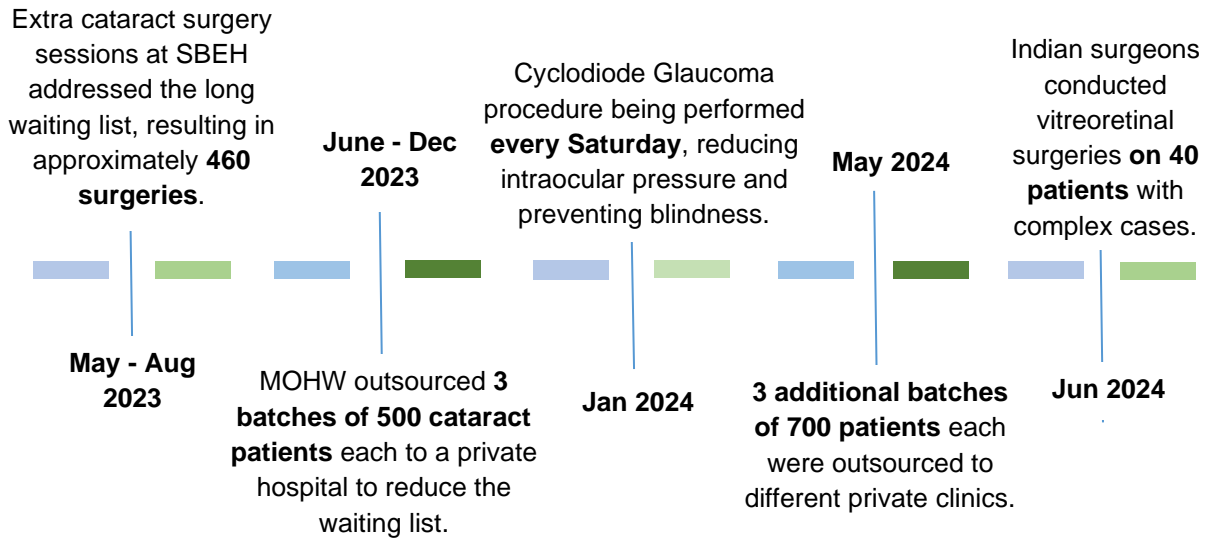
Refraction clinics have expanded to SSRNH and NSH



**4,531 surgeries** were performed from January 2024 till 30th June 2024



## ACHIEVEMENTS FOR FY 23/24



In September 2023, visiting surgeons from Pakistan performed complex surgeries at SBEH: 17 cornea patients, 15 retinal patients, 7 oculoplasty patients, and teaching sessions in these fields were held for SBEH ophthalmologists. This was supported by a signed MOU between the MOHW and the Pakistani team.

- **In April 2024**, Indian surgeons performed squint surgeries on 62 patients, primarily children and young adults.
- In view of reducing the number of unfit patients on the cataract surgery list, SBEH has updated its procedures and protocols to provide appointment date for surgery on the same day of consultation for patients deemed fit.



Crosslinking surgeries for keratoconus, which were halted due to COVID-19, are now regularly scheduled with no waiting list.

- The creation of new space for existing services and the new casualty has significantly reduced crowding in the existing building, leading to improved patient flow and enhanced service efficiency.
- **Previously, corneal transplants and vitreo-retinal surgeries required patients to seek foreign treatment, but nowadays most are performed locally, significantly reducing financial burdens enhancing accessibility to timely care.**



Rotary Clubs have supported strabismus and vitreo-retinal surgeries by sending teams from India, the U.S., Switzerland, and France, improving surgical capabilities and patient outcomes.

- With support from the Lions Clubs of Port Louis and Curepipe, corneas from the U.S. and Sri Lanka were received. Approximately fifty corneal transplants are performed

annually, including for young patients from Rodrigues and the Comoros Islands. These transplants are carried out exclusively in public hospitals by local ophthalmologists.

- An agreement with the Lions Club has been reached to ensure a regular supply of corneal tissues during the year, enabling consistent corneal grafting surgeries.

### 2.1.15 EAR, NOSE AND THROAT (ENT) SERVICES



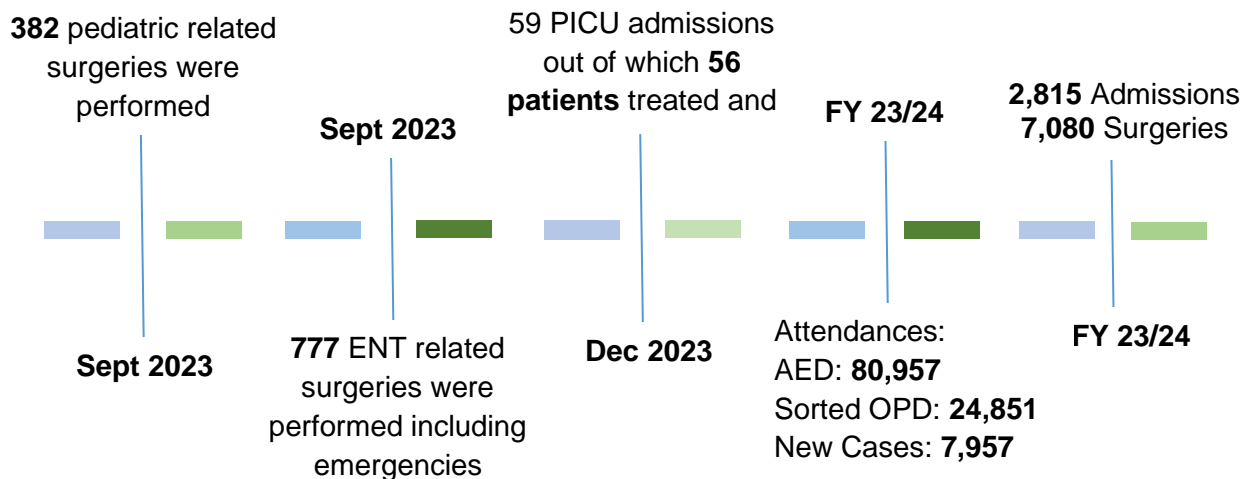
Specialized ENT services have been transferred back from Victoria Hospital to the new ENT Hospital on 20 September 2023. The hospital offers treatment in Rhinology, Otolaryngology, Head and Neck Surgery, as well as congenital hearing loss screening and treatment for newborns, including cochlear implant surgery following audiological tests.

The facility includes an Anaesthetic Unit with two major operating theatres for specialized ENT and pediatric surgeries. Moreover, a Pediatric Intensive Care Unit (PICU) inaugurated in

December 2023 with a six-bed capacity, offers specialized anaesthetic services for daily ENT and pediatric surgeries, 24/7 emergency anaesthesia and critical pediatric care.

Since November 2023, ENT services have been **decentralized across all five regional hospitals**, operating from 9:00 a.m. to 4:00 p.m.

#### ACHIEVEMENTS FOR FY 23/24



- 4 Cochlear Implants, 18 Stapedotomy Surgeries and 1 Glomus Tympanicum (left ear) were performed.
- In April 2024, the first Med EI temporal bone dissection 2-day training was held, specifically for all public ENT surgeons.

## 2.1.16 SPEECH THERAPY AND AUDIOLOGY DEPARTMENT

The Speech Therapy and Audiology Department caters for Speech Therapy cases (including ward cases) and those requiring Audiological Evaluations. This department is operational in each regional hospital with outreach to Autism Day Care Centers, Neuro Rehabilitation Unit and Cleft Lip/Palate Clinic. Regular visits are also undertaken to cover the cases in Rodrigues Island.

### STAFFING:

- 1 Chief Speech Therapist and Audiologist
- 6 Speech Therapist and Audiologists/Senior Speech Therapists and Audiologists
- 7 Speech and Hearing Therapy Assistants (including 2 senior assistants)
- 1 Health Care Assistant in each unit to help with day to day running of the service

### ACHIEVEMENTS FOR FY 23/24



#### Speech Therapy Cases:

**New cases: 2,582 and Follow up Cases: 11.835**

- (i) **Paediatric cases-** Delayed Language and Speech, Mental Retardation, Autism spectrum Disorders, Selective Mutism, Reading and writing Disorders, Stammering, phonological delays (including articulation disorders), Cerebral Palsy and Aural Rehabilitation (hearing aid and/or cochlear Implant users).
- (ii) **Adult cases:** CVA (Aphasia, dysarthria, apraxia), Dysphagia, Stammering, Voice disorders, articulation disorders and Aural Rehabilitation.



#### Audiology:

**Cases Seen: 15,380**

Routine Pure-Tone Audiometry, Aided audiometry, Speech tests, Tympanometry, Acoustic Reflex testing, OAE/AABR screening, Electrophysiological Tests (including BERA, EcochG, VEMP) which allows for neurodiagnostic testing, threshold search for “difficult to test” population and vestibular testing.; Aural rehabilitation for pediatric and adult population.

- **Accessibility and Infrastructural Upgrading** - (i) Opening of New Departments at Floreal Medi-Clinics, since the service was unavailable in region 5 during COVID-19 pandemic and there was a great demand from the public for same; (ii) Renovation of Departments at ENT center and SSRNH; (iii) Setting up the service in the Autism Day Care Centers, which includes soundproofing of the therapy room; (iv) All units are equipped with the latest Audiological equipment.
- **Upscaling and sustaining the existing Services:** (i) Neonatal Hearing Screening for high-risk babies in all Hospitals; (ii) Relaunching an improved service at the Cleft Lip/Palate clinic of Victoria Hospital and (iii) Assistance for the cochlear Implant surgery

- **Services for Rodrigues:** (i) Increase in the number of visits to Rodrigues and providing screening audiological service and (ii) Planning for upcoming Diagnostic Audiology department in Rodrigues. **Speech Therapy cases: 367 and Hearing Screening: 84**
- **Increasing Awareness of the existence of the service:** Regular Radio and TV programs and participation as speaker for Neuro-Rehabilitation Seminar (CANOSC)

### 2.1.17 MENTAL HEALTH INCLUDING ELECTROENCEPHALOGRAPHY (E.E.G) UNIT

Mental health care in Mauritius is accessible through a decentralized system, with services provided at the Brown Sequard Mental Health Care Centre (BSMHCC), 5 regional hospitals, 25 AHCs, and Medi-Clinics. The legal framework binding the functioning of the Psychiatric services is the Mental Health Care Act 1998, amended in 2021 and 2022, respectively.

BSMHCC features a 250-bed facility for acute cases and accommodates around 350 patients in long-stay wards. The different services proposed include Electroencephalography (EEG), Electroconvulsive Therapy (ECT), medical social services, adult and child psychiatry, psychological services as inpatient and outpatient services, laboratory services, 2 de-addiction rehabilitation centres for those suffering from substance use disorders, occupational therapy and welfare services.

Additional support includes the Life Plus Unit hotline (188) and the Drug Users Administrative Panel (DUAP) are operational since April 2024. Furthermore, regional hospitals offer consultation-liaison psychiatry, and Rodrigues has dedicated psychiatric services with a full-time psychiatrist.

#### ACHIEVEMENTS FOR FY 23/24



##### AUTISM

2 new Autism Day Care Centres have been opened: one at BSMHCC in November 2023 and another in Bois Chéri in April 2024.



Trans-magnetic Stimulation Therapy (TMS) for Major Depressive Disorder available at VH.



Community Psychiatric Nursing and Early Dementia Diagnosis Clinic extended to all 5 Regional Hospitals.

- **15,073 patients** were seen at the Outpatient department of BSMHCC.
- A total of **4,875 admissions** were recorded, as compared to 2,802 during last FY:

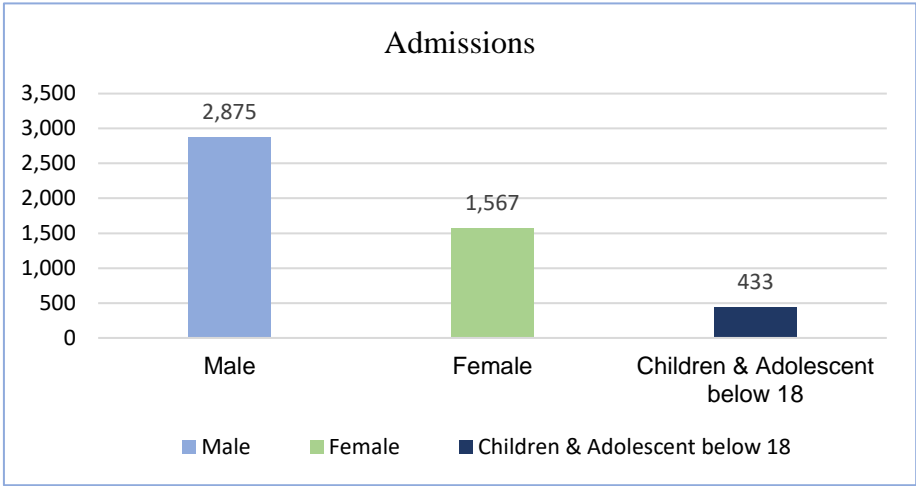


Figure III: Admissions


- Cases are referred from both public and private institutions, as well as Rodrigues Island.
- Electroconvulsive Therapy (ECT) is available exclusively at BSMHCC, with **206 ECT sessions** conducted.
- Life Plus Unit hotline service (188) received **510 calls**.
- **2,000** sensitization campaigns were conducted.
- Specialist psychiatric outpatient clinics are now being conducted at newly opened Medi clinics, including Bel Air, Stanley, and Coromandel.
- The 'Plan de L'Autisme' is in the final stage of being written.
- A Mental Health Action Plan has been written up.

**Electroencephalography (E.E.G) Unit**

The Electroencephalography (EEG) test detects abnormalities in the electrical activity of the brain and helps in diagnosing various neurological disorders. EEG services are currently available at the BSMHCC, catering to both pediatric and adult populations in Mauritius and Rodrigues. Additionally, the unit accommodates referral cases from private clinics at no cost.

Over the past 3-4 years, the Ministry has consistently enhanced its services with the goal of reducing patient waiting times for EEG tests and ensuring timely reporting of the results. The unit operates with a Neurologist, a Senior Technician, 2 Healthcare Assistants (HCA) and during the FY 23/24, to reinforce the team, 3 trainee EEG were recruited.

The EEG testing capacity has increased as reflected below:

FY 23/24	FY 22/23
 <p><b>Increased Testing Capacity</b></p> <ul style="list-style-type: none"> <li>▪ 1,799 tests</li> </ul>	<ul style="list-style-type: none"> <li>▪ 1,599 tests</li> </ul>

## 2.1.18 DENTAL SERVICES



According to the WHO, **oral health is essential to overall health**, well-being, and quality of life across the life course. It enables us to **eat, speak and socialize** in the community.

The policy of the MOHW on Oral Health Care is to improve access, quality and delivery of Dental Services by, *inter-alia*, reducing waiting time, putting emphasis on customer care and using latest medical technologies. The Director Dental Services manages the services along with a team comprising of Regional Dental

Superintendents, Consultants-in-Charge, Dental Specialists, Oral Health Coordinator, Dental Surgeons/ Senior Dental Surgeons, Principal Dental Assistants and Dental Assistants/Senior Dental Assistants as well as a dental technician.

### DENTAL FACILITIES



- 55 Dental Clinics (including Rodrigues) providing routine dental care
- 16 Specialised Dental Clinics (Oral Surgery, Orthodontics and Endodontics) in 5 Regional Hospitals.

### ACHIEVEMENTS FOR FY 23/24

#### A. GENERAL DENTAL SERVICES

- Dental Attendances for Mauritius for the year 2023 was 248,344 including 23,623 children as compared to 227,861 including 23,961 children in the preceding year.
- The implementation of National Action Plan for Oral Health 2022-2027 is ongoing with intensified Oral Health Promotion campaigns in pre-primary (**9366**), primary (**83,741**) and secondary schools (**93,917**).
- Distribution of the oral health kit comprising of a toothpaste, toothbrush, pamphlet and bookmark, **to 76,000 students** of primary schools in Mauritius, Rodrigues and Agalega has been completed, as compared **to 61,000 students** being reached during the last year.
- “Child-friendly” set-up at the dental clinic at Rose Belle AHC has been completed in November 2023.
- Participation in the Health Promotion campaigns organized by the NCD department and National Empowerment Foundation.
- Attending requests from various organizations (including sociocultural organisations and Rotary clubs, etc.) for dental check-ups, screening, and oral health talks.



- Mauritius featured **in the success story for oral health, on SIDS Action on NCDs and Mental Health in the Issue 2 Newsletter, June 2024.**

(Available via Link: [https://cdn.who.int/media/docs/default-source/ncds/sids-newsletter-issue-2-jun2024.pdf?sfvrsn=7e69b833\\_4](https://cdn.who.int/media/docs/default-source/ncds/sids-newsletter-issue-2-jun2024.pdf?sfvrsn=7e69b833_4))

- Mauritius was represented by Dr I. Ramdin, at (i) The WHO regional Oral Health Meeting for research prioritization of Oral Health in November 2023 in Nairobi, Kenya and (ii) The World Health Assembly (WHA) in the Side Event on WHO Global Oral Health Action Plan held on 28 May 2024 in Geneva, Switzerland.

## B. SPECIALISED DENTAL SERVICES

**(i) Oral Surgery** - Oral and maxillo-facial surgery is a speciality of dentistry that deals with diagnosis, surgical and adjunctive treatment of diseases, injuries and defects of the oral cavity, jaws and other associated structures. The oral and maxillo-facial surgeon is the specialist involved in managing these patients.

**Staffing** - The oral and maxillo-facial department comprises of four qualified Oral and Maxillo-facial surgeons and one Consultant-in-Charge posted in four main hospitals.

During the reporting period, the department collaborated with Dr. Prof. S. M. Balaji, Craniomaxillofacial Surgeon from India to operate on complex cases such as resection of tumors, cleft lip and palate and reconstructive procedures.

There is a marked decrease in the number of abscesses of oral and maxillo-facial region which is **a good indication of patient awareness of seeking prompt treatment for oral infections.**

The work performed is as follows:

- Attendance at four oral surgery clinics during FY 23/24: 7, 162 patients
- Surgery for impacted wisdom tooth: 609 patients
- Draining of oral and maxillo-facial abscesses: 124 cases
- Cysts enucleation: 147 cases
- 80 cases of jaw bone fractures were reduced.
- 72 cases of biopsy for oral cavity were performed (among which 50 patients were found positive for oral carcinoma.)

**(ii) Orthodontics Clinics-** This department specializes in Orthodontics which is the dental speciality that is concerned with the supervision, guidance and correction of the growing and mature dentofacial structures. This includes addressing conditions that necessitate movement of teeth or correcting malformations in related structures.

The main responsibilities of Orthodontics Clinics include diagnosing, preventing, intercepting, and treating various forms of teeth malocclusion and associated alterations in their surrounding structures. This is achieved through the use of functional and corrective appliances, ultimately guiding the alignment of dentition and supporting structures to achieve optimum relations in physiologic and aesthetic harmony among facial and cranial structures.



**Staffing** - The department presently consists of a Consultant-in-Charge, 4 Orthodontists, 1 Dental Technician, and 4 Dental Assistants. Orthodontics services are extended to Regional Hospitals in Mauritius and in Rodrigues.

Timely delivery of treatment is ensured at the Orthodontics Clinics. Work performed at these clinics, in the Republic of Mauritius, is as follows:

Details	FY 22/23	FY 23/24
Cases seen	6,277	6,342
Impressions done	826	855
Functional appliances delivered	688	805
New cases	698	595

*Source: Dental Services Unit, MOHW*

**(iii) Endodontic Clinics** – These clinics are dedicated to providing specialized dental services focusing on the diagnosis, prevention, and treatment of diseases and injuries affecting the dental pulp and surrounding tissues. Their main functions include root canal treatments, treatment of traumatized teeth, and consultation services for patients with complex dental issues. A team of highly skilled specialists in Endodontics are committed to delivering high-quality care, utilizing the latest techniques and equipment to ensure optimal outcomes for patients.

- During the period of July 1, 2023, to June 30, 2024, the department has achieved significant milestones, including:

Details	FY 22/23	FY 23/24
Cases seen	8,187	10,577
Root Canal Treatment done	2,279	2,836

*Source: Dental Services Unit, MOHW*

- Opening of two new Endodontic Clinics to further decentralize services to cater for patients in the Northern region, namely at (i) Baie Du Tombeau CHC (October 2023) aiming to serve residents in Plaine Verte, Roche Bois, Eastern Suburb, and Baie du Tombeau and (ii) Goodlands Mediclinic (April 2024) which caters for patients in Goodlands, Grand Baie and Rivere Du Rempart regions.

## 2.1.19 PHYSIOTHERAPY SERVICES

The physiotherapy department is dedicated to the rehabilitation and enhancement of physical function, it aims at improving patients' quality of life. It focuses on evidence-based practices to address conditions such as musculoskeletal disorders, neurological impairments, and chronic diseases among others. Physiotherapists deliver patient-centered care, emphasizing preventive measures and patient education to promote long-term health.

The department encompasses a wide range of services across the five regional hospitals and outstations island-wide. The primary areas where physiotherapy typically treats patients include:

- Orthopedic
- Neurological
- Cardiopulmonary
- Sports
- Geriatric
- Women's Health
- Chest

### ACHIEVEMENTS FOR FY 23/24

- **Patient Care: 143,913 patients** were served across the island, including inpatients, outpatients, and outstation facilities.



**Infrastructure Development:** The new physiotherapy department's establishment is awaited with completed repairs to existing therapy equipment and requests for new rehabilitation equipment are on-going.

- **Staff Training:** Physiotherapists are registered with Allied Health Professional Council (AHPC) and will receive advanced training. The MIH offers a Physiotherapy Assisting course for new physiotherapy assistants to develop essential skills.



**Specialized Care:** Palliative physiotherapy is offered at the NCC to enhance the comfort and quality of life for cancer patients, and pediatric physiotherapy at the ENT Hospital's PICU and Pediatric Ward to address developmental and congenital issues in children.

- **Patient Education:** Enhanced focus on self-care and preventive measures through workshops and informational materials.



**Rehabilitation Services:** Specialized units provide comprehensive rehabilitation for spine conditions, kidney transplant, and stroke recovery. These services focus on improving mobility, managing post-surgical pain, and enhancing functional independence as well as educating patients on lifestyle improvements. Additionally, collaboration with the Medical and Scientific Advisory Council (MASAC) provide enhance care for hematologic patients.

### 2.1.20 ORTHOPAEDIC SERVICES

Each Regional Hospital has an orthopaedic unit which is run by a Consultant-in-Charge, Specialists, Medical Health Officers and para-medical staff. Orthopaedic services are provided to patients suffering from orthopaedic pathologies and fractures.

Additionally, certain orthopaedic units across the island provide 24/7 coverage specifically for orthopaedic and trauma. They also cater for complex orthopaedic paediatric cases, Traumatology, Arthroplasties of the hip, knee and shoulder joints as well as general elective orthopaedic cases.

These units are supported by the radiology department as far as x-rays are concerned. Moreover, patients are referred for orthopaedic appliances to the Orthopaedic Appliances Workshop by medical practitioners, if needed.

## ACHIEVEMENTS FOR FY 23/24

### Statistics

- The total sorted out-patient attendances at orthopaedic specialised clinics was 128,818 as compared to 125,039 in the previous FY.
- Total Orthopaedic surgeries increased from 7,595 to reach 7,980 in the FY 2023-2024.
- 36 complex paediatric ortho surgeries were performed by foreign visiting teams.
- Knee replacements dropped from **229 in FY 22/23 to 182 in FY 23/24 (20.5%)** and hip replacements from **102 to 85 (16.7%)** for the same period, indicating improved preventive healthcare measures, patient management, and non-invasive treatments, helping patients avoid surgery where possible.

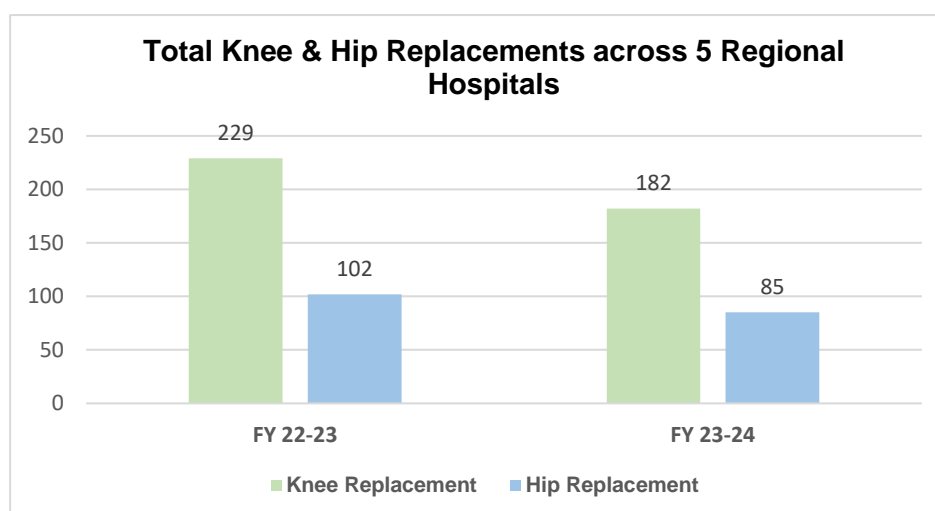


Figure IV: Knee and Hip Replacements

Source: Health Records Unit, MOHW

### Introduction of Innovative Treatment Techniques

- The department of orthopaedic surgery has introduced innovative treatment modalities including the Plasma Rich Platelet injection technique mainly for Osteoarthritis. Moreover, ongoing research in this field aims to further enhance patient outcomes.

### Improvements in Service Delivery

- A daily fracture clinic has been introduced to review the x-rays of all patients assessed by MHOs the previous day, ensuring that no fractures are missed in diagnosis
- In order to reduce patients waiting time, a dedicated daily Orthopaedic Dry Film Report (DFR) Clinic has been introduced in the casualty department to fast-track patients who have been called for DFR.
- Daily and weekly clinical meetings, involving consultants, specialists, MHOs, and nursing ward managers, are held to review patient case files from recent admissions or referrals and to discuss the management of complex cases.
- A monthly Mortality and Morbidity meeting has been introduced to enhance service quality and ensure alignment with IPC protocols.

## 2.1.21 OCCUPATIONAL HEALTH UNIT



Occupational Health aims to protect and promote workers' health by preventing occupational diseases and injuries, ensuring a safe and healthy working environment. The Occupational Health Unit (OHU) of the MOHW has been operational for 33 years and oversees the following sections:

- Occupational Health Services,
- Migrant Worker Section,
- Dangerous Chemicals Control Board (DCCB), and
- Personal Examination Record (PER) Section.

As of 31<sup>st</sup> December 2023, Mauritius had 592,800 economically active individuals, representing 48.7% of the population, highlighting the importance of Occupational Health in industrializing society.

### ACHIEVEMENTS FOR FY 23/24

**Improved accessibility as Occupational Health Services are now available in 22 Government Health Institutions compared to only 7 in previous years.**



**15,260** Medical Surveillance of workers were performed up from **13,675** in the FY 22/23



**9,972** Medical exams for civil servants & parastatal employees

The number of medical boards dropped from **350** in FY 22/23 to **240**, indicating a more streamlined healthcare system with improved efficiency



**29,381** Expatriate workers' Medical Clearances were completed as compared to **21,255** in FY 22/23

525 specialised tests done through Health Quality Laboratory Activities



Dangerous Chemicals Control Board:

**11** Board Meetings

**5,783** Chemical Clearances

**813** Issued Permits

**425** Licenses issued (new & renewal)



Occupational Health Physicians conducted **28 site visits** to evaluate workplace hazards

- **Streamlining of Procedures for more effectiveness-** The Dangerous Chemicals Control Board has **automated all processes** and the newly introduced platforms include:

- Application for Registration of Extremely Dangerous Chemicals & Pesticides on NELS: <https://business.edbmauritius.org>
- Application for Clearances on Trade Net Portal MNS: <https://tradenetmns.mu/>
- Participation in various committees includes the Advisory Council for Occupational Safety and Health at the Ministry of Labour, the Chemical Standard Committee at the Mauritius Standard Bureau, and the Enhancement of Working Environment committee at the Ministry of Civil Service and Administrative Reforms, among others.

## 2.1.22 OVERSEAS TREATMENT AND VISITING FOREIGN TEAM

### Overseas Treatment Unit

For more financial protection with regard to access to healthcare, Government runs an Overseas Treatment Scheme whereby complicated cases which cannot be attended locally in public hospitals, are referred abroad for treatment. In this line, the Overseas Treatment Unit of the Ministry, provides financial assistance and all necessary support to patients who have been recommended for treatment abroad by a Medical Board set up in Regional Hospitals.

These patients also have to meet the income eligibility criteria as set by the Ministry. The household income ceiling eligibility criteria revised to Rs150,000 and arrangements are made for the patients to be admitted in health institutions in India with which the MOHW has signed a Memorandum of Understanding. In 2022, a framework was established with local private clinics to also allow patients, the choice to undergo treatment locally under the scheme, if treatment is not available in public hospitals.

The Overseas Treatment Scheme also provides the possibility for patients to opt for any medical institutions of their choice in other countries. Patients proceeding to hospital of their choices benefit financial assistance based on the lowest quotation received from the above-mentioned health institutions. They are, in addition, granted the equivalent of funds for a return flight ticket equivalent to India airfare. In some severe cases, upon recommendation of the treating doctor, medical personnel and a stretcher are also provided for the transfer.

### **ACHIEVEMENTS FOR FY 23/24**

- From 1 July 2023 to 30 June 2024, 341 patients have benefitted assistance under the Overseas Treatment scheme.
- An amount of approximately Rs182,260,715.58 million has been disbursed for their treatment.
- In the budget 2023/2024, the maximum amount of Rs 1 million under the Overseas Treatment Scheme was waived for paediatric patients up to the age of 17 years who require medical treatments not available locally.
- In addition, the Paediatric Cancer Scheme was introduced and provided for full financial assistance towards the costs of cancer care and treatment in foreign hospitals with the best expertise as well as in local private clinics.

- Financial assistance granted under Overseas Treatment Section for different types of treatment are as follows:
  - Up to Rs 1,000,000 (inclusive of air fare for patient and one attendant) for the treatment of: Leukaemia, Cochlear Implant, Liver Transplant, Osteosarcoma and Lung transplant.
  - Up to Rs 800,000 (inclusive of air fare for patient and one attendant) for the treatment of all other complicated cases such as Cancer, Neuro Surgery, Orthopaedic, Cardiac, Renal Transplant, etc.
  - Up to Rs 500,000 for eyes treatment (inclusive of air fare for patient and one attendant).

### Visiting Foreign Teams

Foreign visiting teams in different specialities are invited to Mauritius to offer their services in respect of surgical interventions which cannot be carried out by local specialists. **The number of visiting teams has increased to 28 as compared to 20 in the last FY.** The list of some foreign visiting teams for 2023-2024 and the number of cases operated are as follows:

Table I: Visiting Foreign Teams

SN.	Visiting Doctors	Period	Purpose of visit / No of cases operated
1.	Prof Ravi RAMALINGAM, ENT Surgeon and Managing Director, KKR ENT Hospital and Research Institute, Chennai, India	09 to 13 August 2023	Speciality: ENT Surgery  To operate on complex cases at the ENT Department of Victoria Hospital  Patients seen: 33 Patients operated: 18
		15 to 19 April 2024	Speciality: ENT  To operate on complex cases at the ENT Hospital.  Patients Seen: 21 Patients Operated: 17
2.	Dr Stéphane Marc VANDERBECKEN, Centre Hospitalier Universitaire de La Réunion Site Félix GUYON	24 to 30 August 2023	Speciality: Haematology  To optimize the treatment of patients suffering from complex haematological disorders, including patients with Haemophilia, in Mauritius

		11 to 14 April 2024	Speciality: Haemophilia  To optimize the treatment of patients suffering from complex haematological disorders, including patients with Haemophilia
3.	<b>A team of Specialist Doctors from Narayana Health, Bangalore, India</b>	02 to 08 September 2023	Speciality: Paediatric Surgery  To perform Paediatric Surgeries and Consultations
4.	<b>Associate Professor Arvin BUNDHOO, Neonatologist and team,</b> Connecticut Children's Medical Centre, USA and his team	25 August to 07 September 2023	Speciality: Neonatology  To improve the care management of the pre-term babies
		16 February to 03 March 2024	Speciality: Neonatology  To train our staff on evidence-based practices and the need for standardized policies and procedures in Neonatology
5.	<b>Dr Atul BHASKAR,</b> Paediatric Orthopaedic and Spine Surgeon  <b>Dr Pradnya SAWANT,</b> Consultant Paediatric Anaesthetist	25 to 29 September 2023	Speciality: Paediatric Orthopaedic Surgery  To perform complex paediatric orthopaedic surgeries at SSRN Hospital  Patients Seen: 17 Patients Operated: 12
6.	<b>Dr (Mrs) Marilyn BRADLEY &amp; Dr Mark John BRADLEY,</b> Podiatrists from Canada	12 to 23 October 2023	Speciality: Podiatry  To assess the status of Foot Care Facilities in Mauritius, impart relevant training to staff of the Foot Care Clinics and conduct podiatric surgical procedures on patients requiring foot care and treatment.
7.	<b>Dr Simon John CLARK,</b> Neonatal Consultant from Sheffield Teaching Hospitals NHS Foundation Trust, UK	26 September to 18 October 2023	Speciality: Neonatology  To support the implementation of neonatal guidelines and protocols to standardise the neonatal practice in the public hospitals.
8.	<b>Professor Wajid Ali KHAN,</b> Chief of Medical Services and Dean of Al Shifa Trust Eye Hospital, Pakistan and his team will be on official visit to Mauritius	02 to 10 September 2023	Speciality: Ophthalmology  To perform complex eye surgeries at Subramania Bharati Eye Hospital.



			Patients Seen: 187 Patients Operated: 40
9.	<b>Prof Xavier Paul Marie COMBES</b> , Head of Emergency Medicine Department, Centre Hospitalier Universitaire (CHU) de Bordeaux, France	05 to 08 November 2023	Speciality: Emergency Services  To perform an audit of our emergency health services
10.	<b>Dr Nirmal TULWA</b> , Consultant Paediatric Orthopaedic Surgeon  <b>Dr Rajiv SRINIVASA</b> , Consultant Anaesthetist, Mid Yorkshire Hospitals  <b>Ms Sarah TULWA</b> , Specialised Physiotherapist, Leeds Hospital, UK	17 November to 04 December 2023	Speciality: Paediatric Orthopaedic Surgery  To carry out complex paediatric orthopaedic surgeries and assist in the training of our physiotherapists who are involved in the treatment post-surgery at SSRN Hospital.  Patients Operated: 12
11.	<b>Dr Poul Martin GEHRCHEN</b> , <b>Dr Henrik JORGENSEN</b> , <b>Dr Jesper DIRKS</b> and <b>Dr Lars Valentin HANSEN</b> (University of Copenhagen)	25 November to 02 December 2023	Speciality: Spinal surgery  To perform complex spine surgeries  Patients Seen: 27 Patients Operated: 14
12.	<b>Dr Christopher van ISSUM</b> Oculoplastic, Lacrimal and Orbital Consultant, Vision Rive Droite, Geneva, Switzerland	16 to 22 December 2023	Speciality: Ophthalmology  To operate on complex ophthalmological cases at New Souillac Hospital  Patients Seen: 37 Patients Operated: 6
13.	<b>Dr Nizam MAMODE</b> , Consultant Renal Transplant Surgeon	27 December 2023 to 19 March 2024	Speciality: Nephrology and Renal Transplant  To sustain the local transplant programme and training of surgeons  Patients Operated: 8
14.	<b>Dr Benjamin David IVORY</b> , Consultant in Critical Care Medicine and Anaesthesia Torbay and South Devon Healthcare NHS Foundation Trust and National Education Lead for Organ Donation, UK	14 to 20 January 2024	Speciality: Critical Care Medicine and Anaesthesia  To provide training in the field of organ donation, brain death and anaesthetic optimisation of deceased donor for organ retrieval

15.	<b>Dr Charles YU,</b> Assistant Professor of Ophthalmology, Byers Eye Institute, Stanford, USA	15 to 20 January 2024	Speciality: Ophthalmology  To perform complex ophthalmological surgeries (corneal grafting) at New Souillac Hospital  Patients Seen: 38 Patients Operated: 13
16.	<b>Dr Hung DO CAO,</b> Medical Adviser in Public Health Inspection	04 February to 05 May 2024	Speciality: Public Health  To conduct audit and provide general advise on health matters
17.	<b>Prof Balaji SUBRAMONIAM MUTHIAH</b> Director, Balaji Dental and Craniofacial Hospital <b>Prof Deepak CHANDRASEKHARAN</b> Professor and Head, Department of Orthodontics, SRM Kattankulathur Dental College <b>Dr Sundarraj LAKSHMIAH</b> Consultant (Locum), Oral & Maxillofacial Surgery, Leicester Royal Infirmary	07 to 14 February 2024	Speciality: Plastic Surgery / Orthodontics  To operate on complex maxillofacial and reconstructive cases, review all cases he operated during his last visit and advise on any complex cases requiring his expert opinion  Patients Operated: 10
18.	<b>Delegation from Saudi Arabia – Turki Ghurm A AL SHEHRI,</b> Delegation Lead <b>Ibrahim Mohammed A AL NAAMI,</b> Neurosurgeon <b>Mufareh Hassan S. ALRAQEA,</b> Operation Theatre Technician <b>Aljohara Mahmoud H HMAZAH,</b> Cardiac Anaesthetist <b>Mohammed Hassan ALDUAYS,</b> Ophthalmologist	04 to 07 March 2024	Speciality: Cardiac Anaesthesia, Neurosurgery and Ophthalmology  A multidisciplinary team from the King Salman Humanitarian Aid and Relief Centre, Riyadh, Kingdom of Saudi Arabia was on official visit to provide their assistance to our health services in Mauritius.
19.	<b>Dr (Ms) Leena Duvika MEWASINGH</b> Consultant Paediatric Neurologist, St Mary's Hospital, Imperial College Healthcare NHS Trust, London, UK	14 to 22 March 2024	Speciality: Paediatric Neurology  To carry out consultations in respect of children suffering from epilepsies, spasticity and other neurological issues and train our medical and paramedical staff in Regional Hospitals
20.	<b>Dr Rajesh Kumar PANDE</b> Principal Director & Head, BLK MAX Centre of Excellence for Critical Care, BLK MAX	24 March to 01 April 2024	Speciality: Anaesthesiology  To provide non-invasive respiratory support training

	Superspeciality Hospital, New Delhi, India		
21.	<b>Dr Sulleman MOREEA</b> G.O.S.K., Consultant Gastroenterologist/Hepatologist, Bradford Teaching Hospitals, UK	30 March to 05 April 2024	Speciality: Gastroenterology  To review the endoscopy services and impart endoscopy training in Regional Hospitals as well as to oversee the National Hepatitis C Elimination Programme and the setting up of Colorectal Cancer Screening Programme
22.	<b>Prof Antonio PIGA</b> Head of the Division of Paediatrics and Hemoglobinopathies Centre, S. Luigi University Hospital of Orbassano, Italy	15 to 19 April 2024	Speciality: Thalassaemia and Haemophilia  To provide clinical expert for the welfare of patients with Thalassaemia and other haemoglobinopathies at the Regional Hospitals.
23.	<b>Dr R Ramesh RAJASEKARAN,</b> <b>Dr Milind KILLEDAR,</b> <b>Dr Avani PATIL KAKARE and</b> <b>Dr Sneha WAGHMARE, India</b>  from the Rotary Club of Pondicherry-Agaram, India	15 to 19 April 2024	Speciality: Ophthalmology  For consultations and surgeries at S. Bharati Eye Hospital  <u>OPD</u> Patients Seen: 37 Patients Operated: 6
24.	<b>Dr Elsa TOUMI,</b> Consultant Ophthalmologist, Nice University Hospital, France	20 to 25 May 2024	Speciality: Ophthalmology  To perform complex vitreoretinal surgeries at New Souillac Hospital
25.	<b>Dr Déa Maguy HADDAD,</b> Consultant Ophthalmologist, Nice University Hospital, France	08 to 17 June 2024	Speciality: Ophthalmology  To perform complex vitreoretinal surgeries at New Souillac Hospital

Source: Curative Section, MOHW

### 2.1.23 PHARMACY SERVICES

The Pharmacy Department of the Ministry is supported by Government Pharmacists and Pharmacy Technicians posted at different points of Service throughout the Island. Pharmacists are posted at the MOHW, Central Supplies Division, Main and Specialised Hospital Pharmacies whereas the Pharmacy Technicians ensure the dispensing activities at Hospital Pharmacies, Area Health Centres, CHCs, and Medi-Clinics.

This Department oversees the Pharmacy Services of both the Public and the Private sector. The main duties and responsibilities are to ensure that:

- (a) the population at large have access to drugs which are of required quality, safety and efficacy.
- (b) the Practice of Pharmacy is in line with the Pharmacy Act 1983, Dangerous Drugs Act 2000 and the Pharmacy Council Act 2015.

The Medicines list of the Ministry incorporates the Essential Medicines recommended by the World Health Organization and is continuously updated by the pool of technical experts. The Pharmacovigilance Department of the Ministry is being upgraded and shall henceforth ensure that medications in use in the country are closely monitored for safety.

The Pharmacy Board is responsible for the exercise of control over the manufacture, importation, distribution and sale of medications in the country. Moreover, the Board is also responsible for the grant of licence for the operation of retail and wholesale pharmacies. Presently there are 380 Community Pharmacies operating throughout the Island and 45 Wholesale Pharmacies.

The Pharmacy Council regulates and controls the profession of Pharmacists and also promotes the advancement in the field of Pharmacy. Among others, the Pharmacy Council registers Pharmacists and Pre-registered trainees, exercise and maintain discipline in the profession of pharmacists. As at date, there are 555 Pharmacists registered with the Pharmacy Council.

## **ACHIEVEMENTS FOR FY 23/24**

### **Procurement of Pharmaceutical Products**

- Drug availability has soared above 95%, significantly reducing local hospital-level purchases.
- The procurement process has been overhauled with streamlined procedures and SOP implementation, ensuring timely drug estimates, committee needs assessments, tender launches, and consignment receipts from annual tenders. Procurement challenges are now nearly non-existent.
- Introduction of new drugs has enriched treatment options, complemented by a comprehensive review of the drug formulary that has eliminated outdated medications.
- SIDS pooled procurement, guided by WHO, is now operational, with Mauritius currently undergoing its inaugural tender exercise.
- Furthermore, drugs under India's Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) scheme are being procured through HLL Lifecare Limited, aiming to enhance affordability and access.
- Notably, the introduction of Gardasil vaccine targets papilloma virus transmission prevention among both boys and girls, emphasizing a proactive approach to public health.

### **National Pharmacovigilance Unit**

The National Pharmacovigilance Unit (NPVU) of Mauritius, established in 2011 and joined the WHO program in 2014, formed a National Pharmacovigilance Committee comprising healthcare professionals from both public and private sectors to monitor adverse drug reactions.

- In 2023, the unit's capacity was bolstered, and a Technical/Causality Assessment was implemented to validate data from declaration forms.
- During the year, the unit collaborated with the WHO in a workshop which significantly increased reporting of adverse drug reactions and quality issues from 60 reports between 2011 and 2018 to 77 in 2023.
- Forty-nine adverse drug reactions were uploaded to the VigiFlow database, with only 30 reports uploaded during FY 2023-2024.
- Twenty-eight quality issues prompted recalls, including one item refunded for the first time due to microbial contamination. Poor storage conditions led to the recall of Paracetamol Syrup for infants and the closure of a warehouse.
- Additionally, four newsletters were published during 2023-2024 compared to three from 2014 to 2018.
- Collaboration with the Government Analyst Division involved analyzing around 100 molecules for quality.
- Standard operating procedures and reporting guidelines were validated in the second workshop with WHO consultants in May 2024, and a paper on the management of nOPV2 vaccine for Mauritius was submitted to a WHO conference.
- Members also received training on Causality Assessment following WHO guidelines in the second workshop held in 2024.

### **Review of the Structure and Functioning of the Pharmacy Department**

In January 2022, the services of the Office of Public Sector Governance (OPSG) were enlisted to review the structure, administrative and technical functioning of the Pharmacy Department. Additionally, the OPSG was requested to ascertain the existence of proper checks and balances on the processes and procedures for good governance, especially with regard to the management of the department. It is to be highlighted that the annual budget for the procurement of drugs amounts to approximately Rs 1.4 billion.

In this respect, in 2023, the Office of Public Sector Governance (OPSG) submitted its Report on the Review of Structure and Functioning of the Pharmacy Department of the Ministry. The report comprised the process for the annual procurement of pharmaceutical products at the level of the Ministry and for local purchase at regional hospitals. The OPSG submitted recommendations on how to better address weaknesses identified in order to improve the delivery of services.

Accordingly, a Monitoring Committee has been set up at the level of the Ministry to study the shortcomings identified and to consider the recommendations with a view to improving the functioning of the Pharmacy Department. Remedial actions are currently being taken to improve the functioning of the Pharmacy Department.

## 2.1.24 CENTRAL HEALTH LABORATORY



Laboratory services play a crucial role in healthcare delivery, providing essential support in the diagnosis, treatment, and management of diseases. The Central Health Laboratory (CHL) functions as both clinical and public health laboratory. Health Laboratory Service covers nine departments comprising of Bacteriology, Biochemistry, Blood Transfusion Services, Cytology, Haematology, Histopathology, Parasitology, Virology and Molecular Biology.

Besides the routine diagnostic services, CHL also supports many national programmes like NCD, Cervical Cancer Screening, HIV/Syphilis/Hepatitis B and C Screening aiming towards dual elimination (HIV/Syphilis) of Mother to Child Transmission (eMTCT) as well as Hepatitis C Elimination amongst others. More importantly, CHL has been highly effective and proactive in responding to the pandemic by providing timely diagnosis, patient monitoring as well as epidemiologic surveillance.

**CHL also operates a network of regional and peripheral laboratories.** The services provided by regional laboratories include Routine Biochemistry, Blood Bank/Cross Matching, Haematology, Parasitology and Bacteriology (at Dr. AGJH Laboratory only) while peripheral laboratories provide basic Biochemistry, Haematology and Parasitology services.

**Blood Transfusion Service** is a national service providing blood products to both public and private healthcare institutions. The National Blood Transfusion Service (NBTS) is responsible for recruitment of voluntary blood donors through education, information and motivation, collection of blood at fixed and mobile sites, processing of blood into components, testing and supply of blood and blood products to all health institutions in the country. NBTS is fully computerized as from 2007 and is also ISO certified.

### ACHIEVEMENTS FOR FY 23/24

#### CHL Statistics

- A total of 17.4 million tests have been performed during the reporting period as compared to 16 million tests in the last FY.
- 4513 Immunohistochemistry (IHC) markers have been done on 833 cases for cancer diagnosis during the reporting period as compared to 4,838 IHC markers done on 916 cases for cancer diagnosis in the previous FY.

#### Expansion of Lab testing capacity - Acquisition of new Immuno Histo Chemistry (IHC) panels

- The IHC panels for cancer diagnosis acquired have gone up from 50 to 57 in the FY 22/23 and in FY 23/24, the panels increased from 57 to 74 including molecular markers for cancer diagnosis and prognosis.



- This expansion has **enabled both time and cost savings** as earlier most cases requiring IHC were being sent abroad with higher costs and longer turnaround times to obtain results.

### Improved Service Delivery

- Flowcytometry services for diagnosis and monitoring of hematological cancers has been fully implemented and a total of 75 flowcytometry tests were done during July 2023 to July 2024 **which is a threefold increase over the past year**.
- There was also a sharp rise in the number of HLA tests performed. A total of 2999 HLA typing, 522 Donor antibody screening and identification and 480 flow cross matching were done to support renal transplantation program which in the previous year was 915 typings. 196 Antibody screening and 120 flow crossmatch.
- A sharp increase in Tacrolimus testing was also seen with a total of 890 tests done tests done compared to 535 in previous year.
- Genomic sequencing procedures are well established and COVID-19 sequencing for surveillance purposes is ongoing. This will soon be extended to Dengue and HIV drug resistance.

### Introduction of New Tests/Services

The following tests have been introduced:

- (i) Hormone testing such as Para Thyroid Hormone and Progesterone to support Fertility services
- (ii) New tumour markers for immunohistochemistry and flowcytometry for cancer diagnosis and monitoring
- (iii) Dengue sequencing

### Improved Blood Collection and Processing

- In 2023-2024 a total of **53,000** pints of blood have been collected as compared to **50,031** pints in the preceding FY.
- Platelet apheresis procedures also saw a sharp rise. A total of 148 procedures were performed during 2022- 2023 **which has almost doubled with 272 procedures** being performed during 2023-2024. This is attributed to increased demand in platelets due to ongoing Dengue outbreak.

### Laboratory Information Management System (LIMS)

- After successful implementation of COVID-19 LIMS at CHL, implementation has been completed in Virology and Molecular biology department. Version 3.0 of the open Elis which has modules in Histopathology and Cytopathology, Parasitology and Microbiology is being tested presently.



### Capacity Building of staff

A number of laboratory staffs have attended various trainings and workshops both locally and abroad.

#### (i) Overseas Training

Number of Staff	Training	Period of Training
2	Training on Flow Cytometry from Max Super Speciality Hospital, India	19 February to 01 March 2024
1	LQMS Kenya	4-8 September 2023
1	Workshop in TB Surveillance, Ethiopia	23-27 October 2023
3	Training course for Hospital Technicians for developing countries, China	6-29 September 2023
1	Training Workshop on Management of Biological waste	07-11 August 2023
1	HIV PCR and sequencing for HIV Drug Resistance, South Africa	22 April to 03 May 2024

#### (ii) Local Training

Number of staff	Training	Period of Training
2	Measles and Rubella Elimination Verification progress workshop at Royal Green Conference Room	15-19 April 2024
	Environmental Surveillance for Polio Workshop at Caudan Arts Centre	August 2023
1	Training in ISO15189:2022 at Mauritas	05-08 February 2024
1	Integrated Disease Surveillance and Response: WHO at Ravenala Hotel	October 2023

### Quality Management System

- Laboratory departments participate in various external quality assurance schemes (EQAS) **to maintain quality of laboratory results.**
- National Blood Transfusion Service is certified to ISO9001-2015 standards. **ISO certification has been maintained** as from year 2010.

## 2.1.25 RADIOLOGY SERVICES



Radiology is an important segment of medicine that utilizes imaging technologies to visualize and project different parts of the human body. It encompasses a variety of tests, including ultrasound, MRI, CT scans, mammography, echography, and X-rays. These imaging techniques are essential in assisting physicians with the accurate diagnosis and management various medical conditions.

These services are provided across both Regional Hospitals and Medi-Clinics, with 24/7 emergency care available for various

departments such as surgical, medical, neurosurgical, orthopaedics, and paediatrics. Radiologists, working on a roster basis, ensure urgent X-rays and scans are available to all departments. Additionally, C-arm facilities are accessible in operating theatres and the Cardiac Unit on a 24-hour basis. The key objectives of the unit are to reduce patient waiting times through additional sessions for specific tests, prioritize radiation safety using the As Low As Reasonably Achievable (ALARA) principle, and strictly adhere to international safety and sanitation standards.

### ACHIEVEMENTS FOR FY 23/24

- A total of 727,183 examinations were performed by the X-Ray Department excluding MRI and CT-Scan as compared to 708,110 in the last FY, reflecting an improvement in service capacity and efficiency within the Department.
- CT, MRI, Ultrasound and X-ray are done based on a routine list and emergency basis. Over and above the routine, Radiology Department also caters for a few sub specialties including (i) Interventional radiology services; (ii) Urgent SAMU requests; (iii) Pediatric radiology; (iv) Fertility diagnosis; (v) Renal transplant; (vi) Oncology Services; and (vii) Spine unit. The total number of CT-Scans and MRIs carried out were 32,459 and 5,084, respectively.
- Digitalised system for X-ray services was sustained, enabling the online transfer of soft version of X-rays through a local area network.

## 2.1.26 INFECTION PREVENTION CONTROL AND ANTIMICROBIAL RESISTANCE



According to the WHO, Infection Prevention and Control (IPC) is a clinical and public health specialty based on a practical, evidence-based approach which prevents patients, health workers, and visitors to health care facilities from being harmed by avoidable infections, including those caused by antimicrobial-resistant pathogens, acquired during the provision of health care services.

Antimicrobial Resistance (AMR) occurs when bacteria, viruses, fungi and parasites no longer respond to antimicrobial medicines. As a result of drug resistance, antibiotics and other antimicrobial medicines become ineffective and infections become difficult or impossible to treat, increasing the risk of disease spread, severe illness, disability and death.

The financial implication of uncontrolled hospital acquired infections and AMR further intensifies the burden not only for the health of the population but also for the country socio-economic impact.

Taking this into consideration, since 2020, the MOHW has brought major developments in these areas by encouraging the implementation of IPC in the health institutions and addressing the burden of AMR. These include the creation of a National IPC Committee and Regional IPC Committees to ensure IPC measures are followed and hospital-acquired infections are reduced. Also, a National IPC Focal Point was officially nominated and IPC/AMR action plans were developed and are being implemented.

### ACHIEVEMENTS FOR FY 23/24

- Data on AMR was collected and submitted for the Global Antimicrobial Resistance and Use Surveillance System (GLASS) with the support of the WHO.
- During 2023, about 1,000 checks of regional hospitals, CHCs, AHCs, Medi-Clinics and peripheral hospitals were carried out by IPC teams.
- IPC facilities and logistics were improved including Air purifiers with HEPA filters and UV radiation were procured and distributed and isolation rooms were constructed and an autoclave-shredder was installed at VH.
- The One Health Steering Committee on AMR and Zoonosis was set up and the second National Action Plan (NAP) on AMR was written using the One Health approach.
- The first national report on antibiotic consumption using the Defined Daily Dose methodology was written and submitted to MOHW. Antibigrams were created and updated using GLASS data.
- A diploma course in IPC and AMR was started by the Mauritius Institute of Health.
- The country's first National Antibiotic Guideline was approved and disseminated. Antimicrobial stewardship teams were set up for the first time in each health region to reduce antibiotic abuse.
- Outbreaks of multi-drug resistant organisms in non-ICU locations are being notified and investigated.

The impact of above measures could be summarized as follows:

1. WHO IPC Assessment Framework (IPCAF) **score improved from 28% in 2020 to 50% in 2023.**
2. WHO IPC Assessment Tool 2 (IPCAT-2) **score improved from 5% in 2020 to 61% in 2023.**
3. WHO Minimum Requirements for IPC (Min-IPC) **score improved from 7% in 2020 to 62% in 2023.**
4. The score on the WHO COVID-19 Scorecard **improved from 25% in 2020 to 89% in 2023.**
5. **The prevalence and incidence of 4 out of 8 high priority multi-drug resistant organisms decreased from 2022 to 2023.**

### 2.1.27 NATIONAL AIDS SECRETARIAT

The National AIDS Secretariat (NAS) operates under the MOHW and follows the 2005 Joint United Nations 'Three Ones' principles:

- **One agreed HIV/AIDS Action Framework:** Coordinates partner efforts.
- **One National AIDS Coordinating Authority:** Provides broad, multi-sectoral oversight.
- **One agreed Monitoring and Evaluation System:** Ensures effective progress tracking.



The NAS is pivotal in leading and coordinating the national AIDS response, ensuring alignment with the HIV National Action Plan. It implements a joint monitoring and accountability framework to effectively execute the National Strategy and promote multi-sectoral engagement. NAS ensures that all populations, including hard-to-reach groups, have access to necessary services. It develops and updates strategies, policies, and protocols to address the evolving HIV epidemic.

Additionally, NAS monitors and evaluates national HIV programs to achieve targets and mobilizes financial and technical resources from donors and development partners to support its initiatives.

## ACHIEVEMENTS FOR FY 23/24



### Funding and Allocations

- For the Global Fund Grant 2024 – 2026 (GC7), Mauritius was awarded USD 2,368,481 (approximately Rs 106,581,660). The MOHW, serving as the Principal Recipient, received Rs 49,611,149 to bolster the HIV program and develop a resilient, sustainable health system.
- Additionally, NGO PILS, as a Sub Recipient, was allocated Rs 56,970,511.30 to improve community engagement in the fight against HIV and AIDS.



### Strategic Initiatives and Collaborations

- Technical Working Groups established to achieve the 5 strategic goals of the National Action Plan 2023–2027, collaborating with line ministries, NGOs, and community representatives.
- **MoU with University of Mauritius:** Enrolled 25 MHOs/SMHOs in a Diploma course on HIV/AIDS and Addictology.
- **National HIV Prevention Strategy:** Developed for a Training of Trainers course with modules on HIV/AIDS and Substance Abuse.
- Two additional psychologists hired on a contract basis to support key populations and vulnerable groups.



### HIV Testing and Counselling

- Procurement of **14,800 HIV Self-Tests** for community distribution under the amended HIV and AIDS Act 2023.
- Strengthened Private Pharmacists Partnership; Capacity building and Training on HIV testing and counselling services.
- Development of HIV Testing Guidance and HIV Testing Guidelines for HIV Testing and Counselling including HIV Self-Test and Directly Assisted HIV Self-Test.



### Research and Evidence-Based Strategies

- In 2023, comprehensive surveys and studies were conducted to gather evidence-based data, including HIV surveillance of Transgender women, People who inject Drugs, and Female Sex Workers, as well as a study on Knowledge, Attitude and Behaviours on HIV/AIDS and Drug Use among adolescents aged 15-17 years in the Republic of Mauritius. Additionally, an assessment in Rodrigues provided recommendations to enhance the HIV response.



## Capacity Building and Community Engagement

- **Empowering Adolescents:** Capacity building of 375 adolescents across 5 health regions on safe behaviours and taking informed decisions.
- Training of 24 Officers from the Prisons Service, AIDS Unit, Harm Reduction Unit, and peer educators on HIV Rapid Diagnostic Test and Dual HIV-Syphilis Testing.
- Capacity of 69 Officers from the Ministry of Youth Empowerment, Sports and Recreation, and the Ministry of Gender Equality and Family Welfare on HIV prevention and counselling.

### 2.1.28 AIDS UNIT

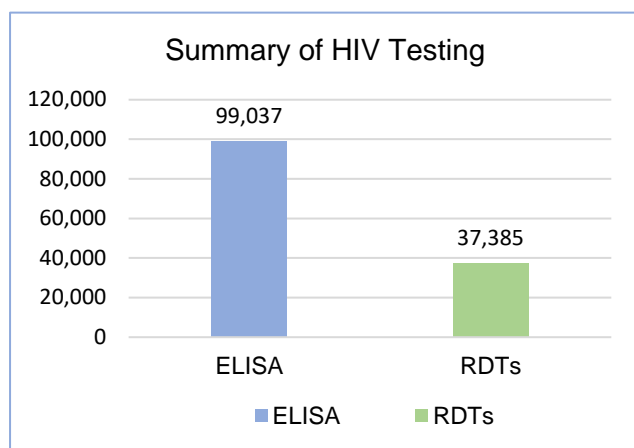
The AIDS Unit provides a comprehensive HIV service which include HIV testing, prevention, treatment, care and support to the PLHIV, affected by and at risk for HIV. A holistic approach is adopted for the management of PLHIV at the Day Care Centres for the Immunosuppressed, namely at:

Name of Centre	Contact Number	Hotline
The National Day Care Centre for the Immunosuppressed, Volcy Pougnet	231 8166	5257 7890
Day Care Centre (DCCI), Victoria Hospital	427 7946	5257 7891
Day Care Centre (DCCI), SAJ Hospital	490 1286	5257 7874
Day Care Centre (DCCI), Sir Seewoosagur Ramgoolam National Hospital	243 9930	5257 7892
Day Care Centre (DCCI), Jawaharlal Nehru Hospital	627 2792	5257 7902
Yves Cantin Community Health Centre (DCCI)	427 7946	5257 7891
New Souillac Hospital (DCCI)	627 2792	5257 7902
Mahebourg District Hospital (DCCI)	627 2792	5257 7902

The HIV service delivery points have been decentralized around the island in order to enhance quality care to People Living with HIV. Integrated services which include ART, sexually transmitted disease, Hepatitis C, Pre and Post Exposure Prophylactic treatment, Family planning services and psychological services are now accessible at HIV service delivery points including the prison setting, to improve quality care and retention rate of PLHIV.



## ACHIEVEMENTS FOR FY 23/24



A total of **140,598 HIV tests** were carried out, representing an increase of 5% in HIV testing compared to the previous year. This strategy has led to more people know their status and be linked to the HIV continuum of services.

Figure V: Summary of HIV Testing

- A total of 4,552 PLHIV have been initiated on antiretroviral therapy with an adherence rate of 70%. About 50% (1,757) of the patients who were tested for viral load have achieved viral suppression.
- To reduce delay in ART initiation and to lower AIDS-related mortality rate, the Medical Staff of the AIDS Unit have been empowered to perform fundoscopy. Subsequently, 14 individuals with advanced HIV disease have been screened for Cytomegalo Virus/CMV retinitis.
- 25 cashless vending machines have been installed in hot spots and other public places across the island to facilitate access to male condoms. Distribution has increased compared to last year, with 792,312 male condoms and 20,869 female condoms distributed.
- The collaboration of the MOHW and the civil society led to the setting up of the Banian Community Health Centre in the premises of NGO PILS, Port Louis. The Ministry of Health and Wellness supplies ART to this Centre and human resource for the follow-up of person living with HIV (59) and 225 individuals who are on PrEP at this Centre.
- Capacity Building of FY 1,953 Health Care Providers on HIV, STI, Hepatitis, TB, PrEP, PMTCT and treatment protocol have been carried out.

### 2.1.29 HARM REDUCTION UNIT (HRU)

The Harm Reduction Unit (HRU) is at the heart of service delivery in relation to Drug Demand Reduction and Harm Reduction since 2006. The Hotline of the HRU is **8001022** and it offers services including:

- Methadone Substitution Therapy (MST),
- Needle Exchange Programme,
- Addiction Treatment Units,
- Drug Use Prevention Programme,



- Rehabilitation and Detoxification, and
- Drug Users Administrative Panel (DUAP).

The Drug Use Prevention Activities carried out by HRU are in-line with the National Drug Control Master Plan 2019 – 2023. Moreover, there are treatment and rehabilitation services on a residential basis mainly for minors and young people under the age of 23 years at the **Nenuphar Centre situated at Long Mountain (Contact Number: 209 2030)**. The service is offered in full confidentiality to all People Who Use Drugs and tailor made with respect to the type of drug of concern. Counselling activities and psychosocial support are carried out by a multi-disciplinary team consisting of psychiatrists, psychologists, doctors and nursing officers.

In order to offer a comprehensive package of services to methadone beneficiaries, the MOHW operates 5 Day Care Centres namely at the following places:

Name of Centre	Contact Number
Sainte Croix Methadone Day Care Centre	242 0192
Dr. Bouloux Cassis Methadone Day Care Centre	211 2442
Mahebourg Methadone Day Care Centre	631 3075
Centre Frangipane - Beau Bassin, and	455 3187
Centre Orchidée for Women - Beau Bassin	455 9066

The services offered are methadone induction, methadone dispensing, medical follow up clinics, hepatitis C treatment, psycho-social support, counselling, distribution of condoms and educational materials. Treatment for detoxification with suboxone/naltrexone is also offered.

#### ACHIEVEMENTS FOR FY 23/24

- Throughout the period, the HRU conducted Drug Prevention Programme activities as follows:

	Drug Prevention Programme	
	<i>No of Schools/Sessions</i>	<i>No of Participants</i>
Educational Institutions	186	17,197
Community	289	3,212
Workplace	90	1,924
Out of School Youth	4	132

- There are around **8000 methadone beneficiaries** on Methadone Substitutions Therapy (MST) Programme as at June 2024. The number of methadone dispensing sites is **72**.

- Methadone Induction was conducted across various centres:

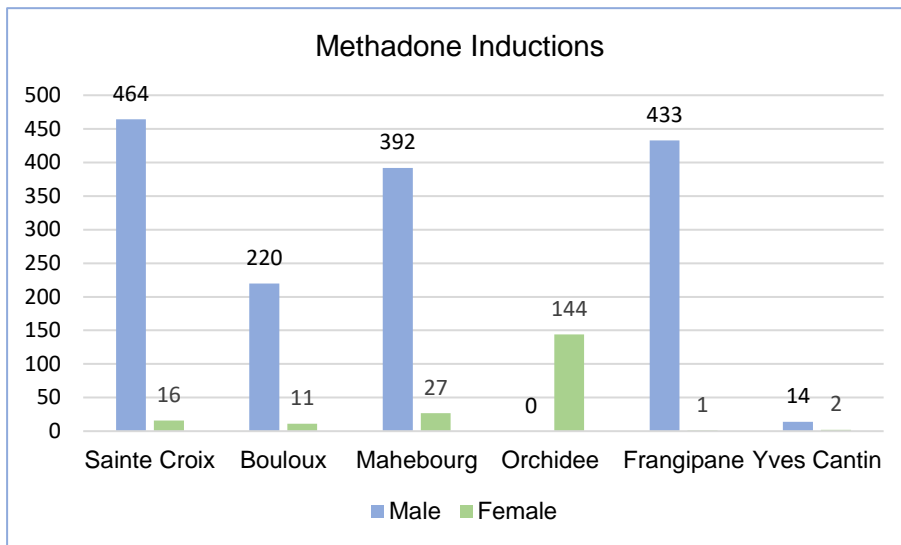


Figure VI: Methadone Inductions



In 2023, syringes and needles distributed amounted to 506,935 and 526,059, respectively. Total clients registered in Needle Exchange Programme (NEP) as at end of December 2023 was: **2717**.

- As of 20th May 2024, one mobile caravan covers **eight needle exchange sites weekly** and new fixed needle exchange sites have been setup at Bouloux Centre, Sainte Croix Centre, Hyderkhan Medi-Clinic and Mahebourg Centre.
- Following Legislative amendment to the HIV/AIDS Act 2006 in March 2023, beneficiaries of the NEP, in possession of Paraphernalia Kits do not face issues with the Criminal Justice system. On Friday 08 September 2023 paraphernalia kit distribution to beneficiaries has started at Saint Louis, Pailles needle exchange site.
- During the reporting period, the MOHW recorded **711 new cases** and a total of **4,113 attendances** at the addiction treatment units. Effective of April 2023, the Addiction Unit and Detox Rehabilitation were merged in Mahebourg.



The Nenufar Centre admitted a total of 46 individuals for rehabilitation and detoxification.

- The Drug Users Administrative Panel (DUAP) has become operational since 15th April 2024. The performance of the DUAP for May and June 2024 indicates a high level of attendances:

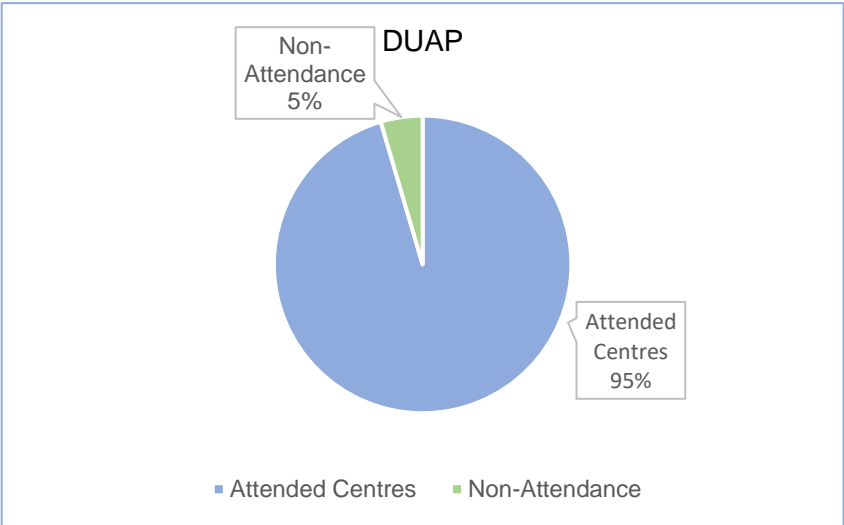


Figure VII: DUAP

### 2.1.30 INTEGRATED CARE FOR OLDER PEOPLE

The National Integrated Care for Older People (ICOPE) Strategic and Action Plan was developed in collaboration with the Ministry of Social Integration, Social Security and National Solidarity (MSISSNS) and World Health Organization (WHO). Launched in March 2023, the plan encompasses **55** activities across **7** strategic objectives.

A National Focal Person for ICOPE, with expertise in Internal and Geriatric Medicine, has been appointed as Director of the Medical Unit at MSISSNS to facilitate coordination between MOHW and MSISSNS.

Additionally, a Geriatric Healthcare Unit has been established under MOHW to support ICOPE screening, staffed by four doctors and overseen by the National Focal Person and the Primary Healthcare Unit of MOHW.

			
<b>2,000</b> Patients Screened	<b>Mo Bienet App</b> Incorporates ICOPE	<b>5 Regional ICOPE</b> Facilitation Committees	<b>Over 350</b> Trained Staff

## ACHIEVEMENTS FOR FY 23/24

- A pilot study screened 2,000 patients, revealing that 5-10% required referrals to other services.
- Early Dementia Diagnosis Clinics, initially at Victoria Hospital, have been extended to all 5 regional hospitals
- Over 350 MOHW staff and 150 MSISSNS staff trained in ICOPE and Dementia through Training of Trainers Workshops.
- Most of the 55 activities in the Action Plan are underway, with steady progress across all 7 Strategic Objectives with close collaboration of WHO.
- Mo Bienet app, adapted for ICOPE screening and elderly health education, was launched in early 2024.
- The first half of the Carnet, focusing on patient and family education, is now available on the Mo Bienet app
- Public awareness campaigns are actively broadcasted via TV and social media.

### 2.1.31 ORTHOPAEDIC APPLIANCES WORKSHOP (OAW)

The MOHW has an Orthopaedic Appliances Workshop which is divided into five sections namely Prosthesis section, Orthosis section, Leather section, Metal section and Seamstress. The main objective of the Orthopaedic Workshop is to assist disabled patients overcome their disabilities by fitting them with appropriate orthopaedic appliances. Patients are referred for orthopaedic appliances to the Orthopaedic Appliances Workshop by medical practitioners from all Regional Hospitals, AHCs and Rodrigues.

Services include provision of corrective braces, spinal braces for fracture of spine, night splints for corrective upper and lower limbs, adapted chairs for cerebral palsy, Minerva jacket for fracture of cervical, and lower limb prosthesis for amputees, lumbo-sacral belts, orthopaedic shoes and corrective insoles.

All these orthopaedic appliances are manufactured with specific materials, orthotics and prosthetics components mostly procured from abroad.

## ACHIEVEMENTS FOR FY 23/24

- 12,075 patients have attended the Orthopaedic Appliances Workshop to receive orthopaedic appliances.
- Staff of the OAW also have to attend to patients in regional hospitals once a month. From 01 July 2023 to 30 June 2024, around 10,518 patients were attended to.
- 19,304 Orthopaedic Appliances were delivered to patients.

### **2.1.32 DEPARTMENT OF OPERATIONS SUPPORT SERVICES**

The Department of Operation Support Services of the MOHW is responsible for the management of all health transport activities and the provision of adequate logistics. It also undertakes repairs and maintenance works pertaining to vehicles in its fleet. The department also attends to repairs, maintenance, refurbishment, extension and renovation works required at public health institutions.

#### **ACHIEVEMENTS FOR FY 23/24**

- Completion of Child Friendly Dental Clinic at Rose Belle
- Completion of renovation of old cooperative building at Bois Cheri into an Autistic Care Centre.
- Provision of logistics facilities for Dengue Eradication Program.
- Support for maintenance, repairs of buildings of Health Institutions.
- Embarking on cost cutting strategies. Conversion of 15-seater vans into ambulances.
- The MOHW has set up a committee to work on the renewal of fleet as the Ministry of Finance, Economic Planning and Development has agreed to finance this initiative.

# PART II - SECTION B

## PRIMARY HEALTH CARE

### SERVICES



## 2.2 PRIMARY HEALTH CARE SERVICES

According to the WHO, Primary Health Care (PHC) is the foundation for Universal Health Coverage. In Mauritius, PHC services are provided through a network of 113 CHCs, 17 AHCs, 10 Medi-Clinics, 2 Community Hospitals and other satellite PHC institutions. The network of PHC facilities is such as to enhance accessibility to primary care within a radius of 3 km.

In 2023, a total of around 4.7 million attendances were recorded at the 141 primary health care institutions for the treatment of common diseases and minor injuries. **FIGURE VIII** gives an indication of the total number of attendances recorded in all the PHC institutions at the level of the five Health Regions.



Figure VIII: Attendances at PHC Institutions July 2023 to June 2024

Source: Health Records Department, MOHW

In 2023, a total of 446 pre-primary schools were visited and 12,818 children were screened for common illnesses and dental carries. There were 1,463 children referred to PHC institutions for vaccination. **TABLE II** highlights on the activities undertaken at the level of primary schools in 2023.

Table II: Summary on Primary School Health Activity 2023

ACTIVITY AND RESULT	ISLAND OF MAURITIUS
<b>SCREENING BY NURSING STAFF</b>	
No. of schools visited	322
No. of children screened	38,515
<i>Nits and lice</i>	910
<i>Dental problems</i>	5,354
No. of children referred to dentist	4,407



VISION SURVEY (Std III, V & VI)	
No. of children screened	21,027
No. with defective vision	1,392
No. referred to specialists	1,207
IMMUNIZATIONS PERFORMED	
TDaP/IPV (New entrants)	9,824
TDaP (School leavers)	8,461

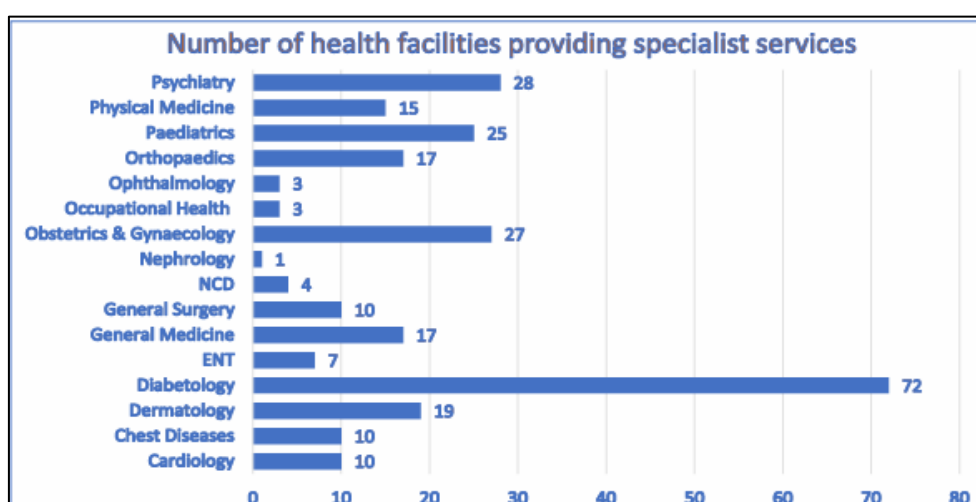
Source: Health Statistics Unit, MOHW

On top of hospitals, primary health care centres have also contributed for 1,840,171 consultations by doctors. 1,294,588 cases attended for general consultation during normal working hours and another 375,166 cases attended after normal working hours sessions, on Sundays and public holidays. Specialist clinics catered for 78,632 cases while other services such as Family Planning, Cash Gift, Screening programmes, Nutrition and Foot Care clinics have attended to 91,785 cases. Primary health care centres have thus catered for some 5,042 cases on average daily.

At PHC level, the nursing staff takes on a range of responsibilities, including the inspection of medical instruments and equipment, preparing patients for clinic visits and consultations through the monitoring of their vital parameters, collecting blood samples, tracking investigation results, providing health education and counselling to patients visiting AHCs/CHCs, administering prescribed patient dressings and maintaining records of medications and drugs.

### DECENTRALISATION OF SPECIALIST SERVICES

Decentralisation of 12 specialist services have been actively implemented since January 2022. The key objectives are: Decongestion of Regional Hospitals and in particular Accident and Emergency services along with proximity and democratizing access to specialist services at the doorstep of the ageing population.

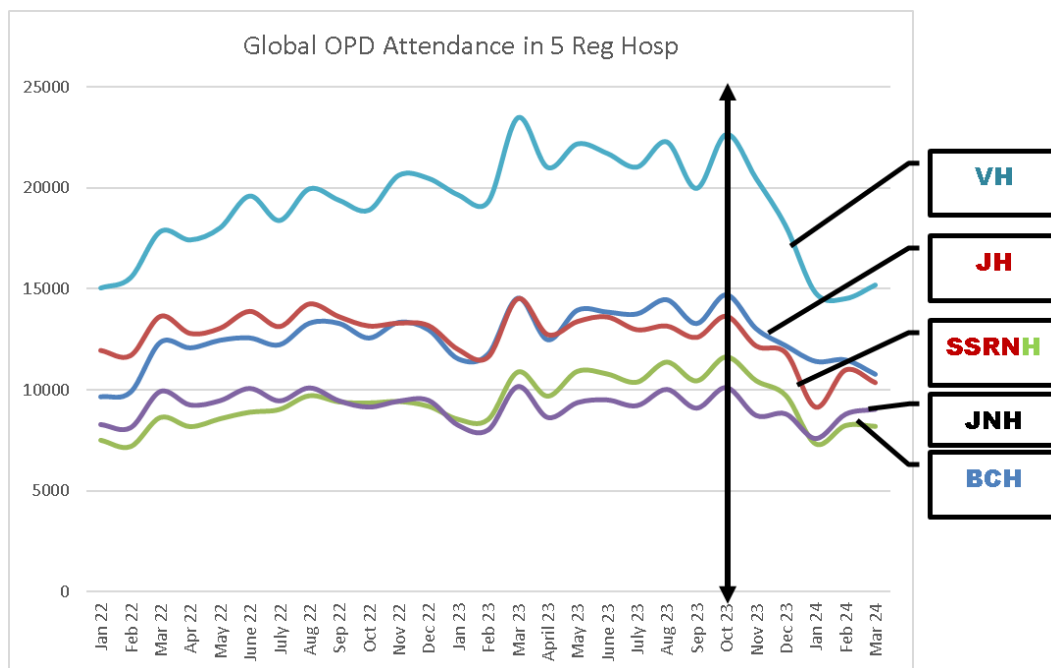


The number of specialist clinics in primary care has increased by 82% from 147 to 268 between 2022 to 2024.

Number of outpatient clinics Initiated at PHCs per Year: 2022 – 2024

REGION	2022	2023	2024	TOTAL
I	18	34	6	58
II	20	29		49
III	34	14	9	57
IV	37	9	1	47
V	38	10	9	57
<b>TOTAL</b>	<b>147</b>	<b>96</b>	<b>25</b>	<b>268</b>

This has resulted in a constant decline in regional Hospital OPDs attendance volume of about 30-40% during this period as shown in the following chart.



The achievements for the FY 2023-2024 of the different units falling under the Primary Healthcare Services have been elaborated in this part of the Report.

### 2.2.1 NON-COMMUNICABLE DISEASE (NCD) CLINICS

NCD clinics are operational in Medi-Clinics, Area and Community health centres of the 5 health regions. The consultations in NCD Clinics are carried out by a multi-disciplinary team including Community Physicians, Diabetic Specialized Nurses and Nutritionists, amongst others. They provide personalized care to all patients. The Diabetic Nurses, besides counselling patients on their medications, including insulin injections, also motivate them to adopt a healthy lifestyle.

## ACHIEVEMENTS FOR FY 23/24

### Introduction of new Casualty and PHC Prescription card

During site Visits in Primary care setup, it was observed that only about 20 % of patients attending PHCs service Points were having the NCD parameters Blood Sugar, Blood pressure and anthropometrics (Height /Weight/BMI/Excess Weight /Ideal weight being taken. In the casualty Prescription card basic vital parameters were written haphazardly.

A new casualty and PHC prescription have been designed to include additional relevant parameters in a standardised format. This new format has been re-designed in way to be incorporated in the upcoming E Health system.

Date: .....		Ministry of Health and Wellness	
Time: .....		Hospital .....	
		<b>Casualty Card</b>	
No: .....			
Surname..... Mr/Mrs/Miss			
Other Name..... M/S/W			
Address.....			
Sex.....	Age.....	Tel No:.....	
Next of Kin.....		Tel No:.....	
N.I.C Number <input type="text"/>			
<b>Nursing Parameters</b>		<b>Medical Parameters</b>	
Temp	°C	LMP	
Pulse	/mn	PT Test	
BP	mmHg	Troponin Test	
SPO <sub>2</sub>	%	ECG	
Weight	KG	X-Ray	
RBS	mmol/l	Allergy	
HB	gm/l	Past Med illness	
		Past Surg illness	
<b>Referrals</b>			
Time	Doctor Name	Prev. Diagnosis:	
D1			
D2			
D3			
D4			
Outcome Admit-Discharge-Review PHC-Review OPD: .....			
Doctor Stamp + Signature			
<small>Note: This card is a Government Property and must not be taken away from the institution to which it belongs.</small>			

Date: .....		Ministry of Health and Wellness	
Time: .....		PHC .....	
		<b>Primary Health Card</b>	
No: .....			
Surname..... Mr/Mrs/Miss			
Other Names..... M/S/W			
Address.....			
Sex.....	Age.....	Years	Tel No:.....
Next of Kin.....		Tel No:.....	
N.I.C Number <input type="text"/>			
<b>Vitals Parameters</b>		<b>NCD Parameters</b>	
Temp	°C	Height	cms
Pulse	/min	Weight	Kg
BP	mmHg	Body Mass Index	Kg/m <sup>2</sup>
SPO <sub>2</sub>	%	Ideal Weight	Kg
RBS	mmol/l	Excess Weight	Kg
HB	gm/l	Abdominal Girth	cms
Preg Test		Smoking	Units/day
LMP		Alcohol	tots/day
		Physical activity	mins/day
<b>Medical Parameters</b>			
Allergy		Cardiac Risk Score:	
Past Med illness:			
Past Surg illness:			
Clinical Diagnosis:			
Time seen:	Doctor Stamp + Signature		
<small>Note: This card is a Government Property and must not be taken away from the institution to which it belongs.</small>			

### Sustained primary education on the risk factors of NCDs

The NCD Coordinators deliver talks in the Social Welfare Centres to outreach more people on Healthy Lifestyle Hygiene.

### Additional early Morning Blood Sampling Sessions



The volume of patients coming for blood samplings in the early morning in the Primary Healthcare Centres is expected to increase with the decentralisation of health services. The blood sampling takes place between 6.45 am to 9.00 am. Due to the lack of adequate sitting facilities, the NCD patients, especially the elderly patients come fasting for blood sampling and often have to stand in long queues.

To enhance the patient experience, **the MOHW has introduced one extra session of Blood Sampling per week in 56 service points.**

### ▪ Diabetic Retinopathy Screening in patients with Diabetes across the island

All diabetic patients are referred for screening of the eyes for early detection of diabetic eye complication and appropriate referral to eye specialist for early treatment is made in order to prevent blindness. Diabetic Retinal Screening services are carried out by trained diabetic retinal screeners.

- 36,089 patients have received Retinal Screening in 2023
- 148,143 patients with diabetes following treatment in Hospitals, Medi-Clinics, AHCs and CHCs
- 1 new digital camera was received in donation from WHO to serve the Retinal Screening Service in Region 2 (Goodlands Medi-Clinic) operational since December 2023.

### ▪ Foot Screening in patients with Diabetes across the island

- 59,043 patients have received foot screening in 2023
- 22,544 visits at Foot Care Clinics in 2023
- 1987 Patients with healed ulcers in 2023
- 13 Nurses are following the National Diploma courses in Diabetes Foot Care Nursing (2022 – 2025) at the MIH.

## 2.2.2 COMMUNITY BASED REHABILITATION UNIT

At the Primary Health Care level, rehabilitation services are designed to support patients medically while directing them toward social, vocational, and educational rehabilitation. The approach is community-based, utilizing local resources and involving collaboration among individuals with disabilities, their families, community members, and both governmental and non-governmental institutions. This collective effort promotes understanding, cooperation, and support crucial for the disabled person's rehabilitation and societal integration. Furthermore, Community-Based Rehabilitation (CRB) provides essential services, including occupational, speech, and physiotherapy, to facilitate recovery and reintegration into daily life and the workplace.

Disability can affect anyone due to unforeseen events like a stroke or accident. CRB provides **hope and inspiration for a brighter future** by emphasizing individual abilities, transforming attitudes towards disability, and offering unwavering support to empower people to achieve their best under any circumstances.

### Disabilities and Related Services:



**General:** Awareness through NGOs; job placement/training; accessibility improvements; recreation/social integration at community centres.

**Visual Impairment:** Treatment at AHC/CHC/Hospitals; health education.



**Mobility issues (stroke, amputation, cerebral palsy, paraplegia, road traffic accident fracture):** Physiotherapy and occupational therapy; referrals to social security offices for benefits and appliances; health education.



**Hearing and Speech:** Speech therapy; referrals to special needs schools for special education; progress monitoring.



**Mental Illness:** Psychotherapy (psychiatric); education through pre-primary/primary schools; follow-up care.



**Orthopaedic Workshop:** Provision of appliances; technology transfer; national solidarity fund for benefits and appliances.

**Epilepsy:** Vocational training at training institutions; community involvement for learning; follow-up care.

### ACHIEVEMENTS FOR FY 23/24

ACTIVITIES	TOTAL
▪ Recovery cases for social integration	<b>136</b>
▪ Recovery cases for progress in daily activities	<b>216</b>
▪ New cases registered	<b>648</b>
▪ Number of visits	<b>24,027</b>
▪ Number of referrals	<b>3,212</b>
▪ Number of appliances received	<b>631</b>
▪ Number of institutions' visits	<b>753</b>

### 2.2.3 MATERNAL, NEONATAL AND CHILD HEALTH SERVICES



Maternal and Child health (MCH), a key marker of overall health system performance, is a policy priority area for the Ministry of Health and Wellness. MCH is one of the key components of Primary Health Care. Reducing maternal, neonatal and child mortality and ensuring high quality care remain the top priority of the Ministry. The maternal and Child Health Services are provided through Preconception Clinics, Antenatal Clinics, Postnatal Clinics, Cash Gifts and Well Baby Clinics. The Ministry prioritises on the life course approach, providing opportunities to improve MCH from the preconception period and through various stages of the mother and child journey.

## ACHIEVEMENTS FOR FY 23/24

- The activities carried out in FY 2023-2024 by the Maternal and Child Health Services are given below:

Table III: Maternal and Child Health Activities in Public Sector – FY 2023-2024

ACTIVITY	NUMBER
<b>DOMICILIARY VISITS BY MIDWIFE/NURSE</b>	
Antenatal	798
Postnatal	1,595
<b>CASES REFERRED TO HEALTH CENTRES &amp; HOSPITALS</b>	
By doctor for specialised treatment	8,176
<b>EXAMINATIONS CARRIED OUT AT CLINIC</b>	
<b>ANTENATAL EXAMINATIONS BY MIDWIFE/NURSE</b>	
First attendances	7,863
Subsequent attendances	29,166
<b>ANTENATAL EXAMINATIONS BY DOCTOR*</b>	
First attendances	7,931
Subsequent attendances	27,760
<b>POSTNATAL EXAMINATIONS BY DOCTOR</b>	
First attendances	3,441
Subsequent attendances	1,222
<b>CHILDREN SEEN FOR GROWTH MONITORING</b>	
Number of attendances	132,622
<b>EXAM. OF CHILDREN UNDER 5 YEARS BY DOCTOR</b>	
First attendances	5,468
Subsequent attendances	10,418
<b>TOTAL ATTENDANCES AT CLINIC</b>	<b>225,891</b>

\*Include cases examined by specialists at first and subsequent attendances.

Source: Health Statistics Unit

- The Maternal and Child Health status of the population has known progress over the last year. The maternal mortality ratio per 100,000 live births has decreased from 41 to 31. The Under-five mortality rate per 1000 live births have improved from 16.5 to 14.4 and the neonatal mortality rate per 1000 live births has decreased from 8.9 to 8.8.
- The following activities to promote Breastfeeding were undertaken:
  - Celebration of World Breastfeeding Week 2023 and Billboard Campaigns on Breastfeeding (World Breastfeeding Week 2023)
  - Prohibiting promotion of Breastmilk Substitutes in health facilities by sales representatives
  - Training of health professionals and NGOs on breastfeeding
  - 24 Community sessions on Breastfeeding by Community Physicians, Midwives, Community Health Care Officers and Nutritionists
  - Support to pregnant and lactating mothers in terms of counselling, home visits and visits in hospitals

- 6) Collaboration with NGOs eg Action Familiale and GEM (Groupe Enfants et Meres) on 1000 days and endorsement of Health Information, Education and Communication (HIEC) materials from GEM by the Ministry of Health and Wellness
  - 7) Continuous Medical Education (CME) on 1000 days and Breastfeeding in all regional hospitals
  - 8) Production of 4 short videos in collaboration with MBC, MCB, Ministry of Civil Service
  - 9) Training of trainers on Maternal Nutrition, Child and Young Feeding in August 2023 by International Baby Food Agency Network (IBFAN).
  - 10) Development of HIEC materials on Breastfeeding:
    - a. L'allaitement
    - b. Les bases de l'allaitement
    - c. La conservation du lait maternel
    - d. Allaitement maternel : Les problèmes courants
    - e. L'allaitement : Positions et Prise du sein
- The following activities to promote Maternal and Child Health were undertaken
    - 1) Training of health professionals on maternal health: antenatal care, post-natal care
    - 2) Training on monitoring of labour
    - 3) Celebration of International Day of Midwife May 2023
    - 4) Community sessions on Maternal and Child Health by Midwives and Community Health Care Officers
    - 5) Reviewing and printing of 24,000 copies of the Maternal and Child Health Handbook
    - 6) Ateliers Partage Parents in collaboration with National Children's Council
    - 7) Capacity Building on Maternal and Perinatal Death Surveillance and Response
    - 8) 20 Sessions - Radio and TV programs

## 2.2.4 SEXUAL AND REPRODUCTIVE HEALTH SERVICES



Sexual Health is a crucial part of general health. The Ministry is fully committed to the goal “Health for All” and has always pursued a policy of strengthening and sustaining reproductive health services. The Sexual Health services are integrated into the general health services and are provided free of charge all citizens, irrespective of their economic situation through a network of



accessible health care delivery institutions at the primary, secondary and tertiary levels. Implementation of activities are guided by the:

1. Health Sector Strategic Plan 2020 – 2024
2. The National Sexual and Reproductive Health (SRH) Policy 2022 and
3. The National SRH Implementation Plan 2022-2027

## **ACHIEVEMENTS FOR FY 23/24**

During the reporting period, the Ministry has been sustaining the required strategies in the following areas pertaining to women's health:

### **Family Planning Services**

- The number of clients benefitting from Family Planning services in 2023 is 56,332 which indicates a mild increase from 56,040 in 2022.

### **Training Workshops**

- 3 Training workshops on Modern methods of contraception and preconception care – 135 Participants
- 2 Training on Sexually Transmitted Infections and Linking it with infertility – 90 Participants
- Training workshops on Gender Based Violence – 100 participants
- Training workshops on Cancers of reproductive tract – 150 participants
- Training workshops for health professionals on Adolescent Sexual and Reproductive Health – 50 participants

### **Counselling Sessions and Sensitization Workshops**

- 48 Counselling sessions on Family Planning services in communities by Community Health Care Officers
- Collaboration with Ministry of Gender Equality and Family Welfare:
  - Counselling on Sexual and Reproductive Health in Premarital sessions – 5 sessions
  - “Man, as caring partners” - 24 sessions
- Community sessions on SRH (Family planning, sexual health, menopause) by Community Health Care Officers 12 sessions
- Sensitization Workshop for out of school adolescents on Sexual and Reproductive Health – 50 participants
- National Sexual and Reproductive Health Workshop 2023: Training of Peer leaders – 250 participants
- Sensitisation session on Adolescent sexual and reproductive health for out of school adolescents (NGO: SAFIRE) by Community Health Care Officers – 4 sessions

### **Other Activities**

- Reviewing course curriculum of Community Health Care Officers

- Celebration of World Population Day July 2023: Unleashing the power of gender equality: Uplifting the voices of women and girls to unlock our world's infinite possibilities. What women and girls want matter – 50 participants
- Collaboration with Ministry of Education, Tertiary Education, Science and Technology: School talks on Sexual and Reproductive Health by Community Health Care Officers: a calendar has been set and is ongoing

## 2.2.5 NUTRITION UNIT



The Nutrition Unit of the MOHW is involved in the prevention and control of NCDs and the promotion of healthy eating habits. The Unit advises on all matters relating to nutrition and on the formulation of health nutrition policies, amongst others. The nutrition services offered by the Nutrition Unit are both preventive and curative. The unit is composed of a Chief Nutritionist, 2 Principal Nutritionists and 13 Nutritionists/Senior Nutritionists.

Diet counselling is provided by the Nutritionists to both outpatients and inpatients on therapeutic diets at hospital level. This service is also extended to the Community through the AHCs and CHCs. The Nutritionists are also called upon to advise on the nutritional standard of the hospital's general food services and ensuring that the prescribed diets are prepared and supplied to patients. Health Promotion activities including talks on nutrition and healthy eating habits are targeted to all age groups.

### ACHIEVEMENTS FOR FY 23/24



- **Mandatory Wheat Flour Fortification with iron, folic acid, Vitamin B<sub>12</sub> and Zinc**

In April 2023, the Mauritian Standards for Wheat Flour Fortification was gazetted. The Mauritian Standards for the Wheat Flour Fortification has been embodied in the Food Regulations 2024 making the fortification of wheat flour mandatory in Mauritius. The first batch of fortified wheat flour (both brown and white) is available on the local market as from October 2023.



- **Review and Strengthen the National Nutritional Surveillance System (NNSS) for children from zero to less than five years in the Republic of Mauritius**

Anthropometric equipment (baby weighing scale, Length boards and Mother-child tarring scale) as per WHO standards have been procured and distributed to all Health institutions around the island including Rodrigues involved in data collection for infants and children. Moreover, growth charts for children 0-5 years have been updated with the technical assistance of WHO. These charts have been

included in the “Maternal and Child Health handbook” which will be used for growth monitoring of infants and children.

▪ **Food Regulations 2024:**

The Food Regulations 2024 have been promulgated and include the following:

- (i) Level of salt in bread: The level of salt in the commonly consumed bread has been regulated through Food Regulations 2024 to less than 1 gram of salt per 100 grams of baked bread.
- (ii) Sale of foods in school canteens (pre-primary, primary, pre-vocational and secondary schools): The list of healthy foods allowed for sale in school canteens being enforced as from 2010, has been revised and updated and included in the Food Regulations 2024.
- (iii) Trans Fatty Acids: The permitted level of industrially produced Trans Fatty Acids in fats and oils has been amended. The amended regulations will limit industrially produced TFA to a maximum of 2% of total fat in all fats, oils and foods.

## 2.2.6 AYURVEDIC MEDICINE



### 6 AYURVEDIC CLINICS AROUND THE ISLAND

Ayurvedic Medicine in Mauritius operates under the health system, MOHW since 2004. The ‘Ayurveda and other Traditional Medicine Act-1989’ recognises and regulates the practice of Ayurveda, Homeopathy, and the Chinese system of Traditional medicine.

#### SERVICES OFFERED:

- Consultation and Diagnosis
- Advising and Counseling
- Ayurvedic Panchakarma Therapy
- NCD Management Sessions
- Dispensing of Ayurvedic Medicine
- Awareness Programs



#### AYURVEDIC CLINIC STAFFING:

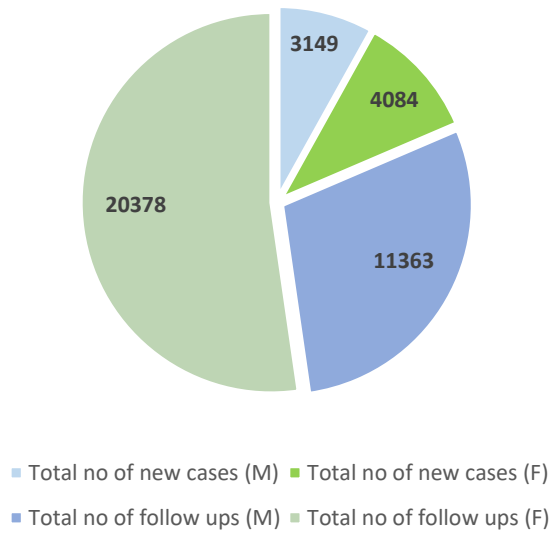
- Ayurvedic Medical Officer
- Nursing Officer
- 2 Health Care Assistants, trained in Ayurvedic Panchakarma
- Health Record Clerk
- Senior Pharmacy Technician, trained in Ayurvedic dispensing
- Hospital Care Attendant

#### ACHIEVEMENTS FOR FY 23/24

##### YEAR 2023 STATISTICS:

- Total number of attendances: **38,974**
- Total number of cases for diseases treated: **70,144**

**Ayurvedic Medicine New and Follow-Ups Cases**



*\*Statistics compiled for all 6 Ayurvedic Clinics*

**Figure IX: Ayurvedic Medicine New and Follow-Ups Cases**

**Continuous Medical Education (CME)**

Since 2022, regular CME sessions have been organized in collaboration with the University of Mauritius.

**Awareness Workshops**

Ayurvedic Medical Officers conduct regular workshops for senior citizens through the National Women Council (NWC), enhancing community engagement.

**Media Outreach**

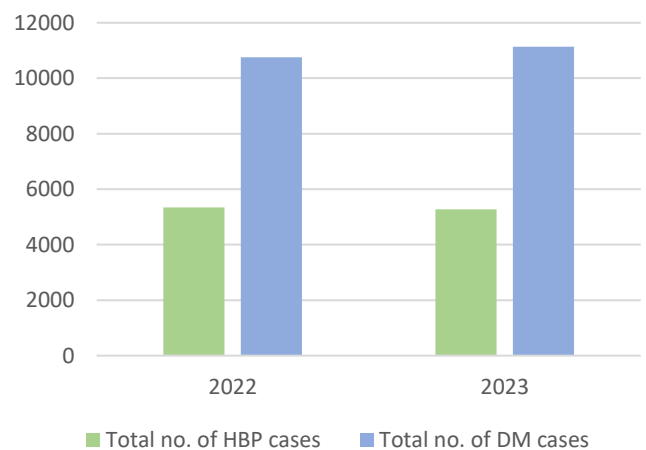
Regular radio and TV programs are scheduled to promote awareness and educate the public about Ayurvedic medicines.

The Ayurvedic Clinic has been actively addressing chronic conditions such as High Blood Pressure (HBP) and Diabetes Mellitus (DM) over the past years. In 2023, there was a slight decrease in HBP cases to 5,279, while DM cases saw an increase to 11,131.

The statistics reflect ongoing efforts to provide comprehensive care and management for these prevalent health issues.

*\*Statistics compiled for all 6 Ayurvedic Clinics*

**Ayurvedic Clinics: HBP & DM Cases**



**Figure X: HBP & DM Cases at Ayurvedic Clinics**

**2.2.7 TOBACCO AND ALCOHOL CONTROL UNITS**

**TOBACCO CONTROL UNIT**

Established in 2009 following the ratification of the WHO Framework Convention on Tobacco Control (FCTC) in 2004, the Tobacco Control Unit (TCU) focuses on drafting policies with respect to the public health implications and the subsequent impact of tobacco consumption on the population. It also oversees the implementation of the Protocol to Eliminate Illicit Trade in Tobacco Products (2018) recommendations and supports the enforcement of the Public Health (Restrictions on Tobacco Products) Regulations 2022.

## ACHIEVEMENTS FOR FY 23/24

# 3<sup>rd</sup>

Mauritius ranks worldwide for having fully implemented the MPOWER strategy of the WHO Framework Convention on Tobacco Control (FCTC) at best-practice level.

- Sensitization campaigns, including TV and radio, are held year-round with the Health Information, Education, and Communication Unit (HIEC), and a specific campaign with Alliance Media (Metro Express) was conducted from December 2023 to January 2024.
- Over 150 Public Health and Food Safety Inspectors have been trained to enforce tobacco regulations through capacity building with the WHO, AFRO, and the Attorney General's Office.
- World No Tobacco Day 2024 featured a theme "Protecting children from tobacco industry interference", with a new pamphlet and video on the Public Health (Restrictions on Tobacco Products) Regulations 2022 launched.

## TOBACCO CESSATION SERVICES

Tobacco cessation services offer comprehensive pharmacotherapeutic treatments and counselling to support smokers in overcoming nicotine dependence. These services are provided at no cost and are integral to the MPOWER initiative of the WHO's global tobacco control strategy.

## ACHIEVEMENTS FOR FY 23/24



Ongoing sensitization through media and health screening programs reached **over 60,000** individuals in 2023, conducted by the NHPRU.

- 9 HIEC unit officers were trained in tobacco cessation strategies to enhance their ability to deliver community talks.



A tobacco cessation clinic was launched at Quartier Militaire Medi-Clinic, with additional clinics in the pipeline for Bel Air, Stanley Medi-Clinic, and Mahebourg Hospital.

- Targeted training for 40 police officers at the Police Training School on enforcement measures and modalities of treatment provided by MOHW.



In the context of World No Tobacco Day 2024, which is celebrated on 31 May every year, 4 radio programs and 2 TV programs aired in prime time, focusing on the harmful effects of smoking and tobacco cessation.

- 2 newspaper articles on tobacco cessation were published.

## **ALCOHOL CONTROL UNIT**

The Alcohol Control Unit focuses on strategies and frameworks to control alcohol consumption as a modifiable risk factor for NCDs. It offers specialized care in psychiatric units of Regional Hospitals for both in-patients and out-patients.

The unit is implementing the National Action Plan to Reduce Harmful Use of Alcohol 2020-2024, aiming for a 10% relative reduction in harmful alcohol use by 2025, as outlined in the Global NCD Target: Reducing Harmful Use of Alcohol (2016) article by the WHO. A midterm review of the Action Plan has been conducted by a consultant from the WHO Country Office to assess the effectiveness of its strategies.

## **ACHIEVEMENTS FOR FY 23/24**

- Abusive alcohol consumption decreased from 19.1% in 2015 to 15.4% in 2021, a relative reduction of approximately 4%. However, for regular alcohol consumption, it has risen from 52.8% to 60.8%.



Sensitization sessions were conducted through the “Life Enhancement Education Program” with 13 NGOs and the Ministry of Social Integration, Social Security, and National Solidarity.

- Training program was organized by MOHW psychiatrists in collaboration with the Ministry of Civil Service and Administrative Reforms to help HR personnel detect and refer workplace alcohol cases to concerned treatment facilities at the Municipality of Port-Louis.
- A campaign in collaboration with Metro Express Ltd. displayed art on alcohol's risks on digital billboards at Metro Express stations during December 2023 and January 2024.



Educational sessions on alcohol were conducted by HIEC officers in tertiary institutions.

- An algorithm was developed by the Ministry of Education, Tertiary Education, Science and Technology to address alcohol use and abuse among youths and adolescents.
- A media monitoring committee has been established to deter illegal online advertisements of alcoholic beverages, with two meetings held to discuss strategies.





## PART II - SECTION C

# PUBLIC HEALTH SERVICES

---



## 2.3 PUBLIC HEALTH SERVICES

According to the WHO, “public health refers to all organized measures (whether public or private) to prevent disease, promote health, and prolong life among the population as a whole”. The Public Health Unit of the Ministry drives policies with regard to public health and deals with emerging and re-emerging communicable diseases, environment health, food safety and licensing of private health institutions. In the wake of the COVID-19, the need for well-prepared public health services to address these challenges in real time, has been strongly felt.

In this line, disease surveillance at the points of entry is being reinforced. The Ministry partnered with the WHO to commit to the multisectoral engagement using the One Health approach to strengthen public health emergencies detection, early preparedness, and swift response through a multi-year action plan known as the National Action Plan for Health Security (NAPHS) to be implemented over 2 years.

As a signatory of the International Health Regulations (IHR) (2005), the Republic of Mauritius had conducted voluntary and external assessments such as the State Party Annual reporting (SPAR) and the Joint External Evaluation (JEE) in 2018. The results of these evaluations, coupled with lessons learned from the national response to the COVID-19 have enabled the identification of all necessary actions to improve national capacities and define the NAPHS.

With the support of WHO, the MOHW is working on the finalisation of the NAPHS which reflects stronger political commitment and multi-sectoral engagement to advance a comprehensive preparedness and response plan to strengthen the country’s health security. It is a milestone that sets the country to invest smartly to further protect its population and to minimize effects of outbreaks and pandemics.

The Ministry has initiated actions for the setting up of a Public Health Emergency Operations Center (PHEOC) with the technical assistance of the World Health Organization for addressing emerging and re-emerging diseases. The PHEOC will serve as a coordinating platform for the preparation, readiness, response, and recovery from public health emergencies among relevant stakeholders. A functional PHEOC will be the backbone of a strong disease surveillance system and will provide real-time response to any public health emergency, early disease detection and response for timely decision making and efficient management of resources and communication.

It is expected to have fewer human casualties and consequently lesser socio-economic consequences with adequate preparedness for the early detection of public health emergencies and timely interventions. The international platforms have shown that preparedness to public health emergencies were better in terms of cost effectiveness as compared to unplanned and unprepared responses.

**The achievements for the FY 2023-2024 of the different units falling under the Public Health Services are further elaborated in this part of the Report.**

### 2.3.1 PUBLIC HEALTH AND FOOD SAFETY INSPECTORATE

The Public Health and Food Safety (PHFS) Inspectorate Unit is responsible for the protection of public health in order to promote a healthy living environment. It enforces, *inter-alia*, the Public Health Act 1925, the Tobacco Regulations, the Alcohol Regulations, the Food Act 2022, the Food Regulations, the Quarantine Act 2020 and its Regulations, the Dangerous Chemicals Control Act as subsequently amended, and other related Regulations, including the International Health Regulations. Its objective is to sustain measures for the prevention and control of communicable diseases, environmental sanitation, and food safety.

#### ACHIEVEMENTS FOR FY 23/24

##### A. PUBLIC HEALTH

##### Environmental Sanitation

Statistics as regards Environmental Sanitation is given in the table hereunder.

Item	July 2022 – June 2023	July 2023 – June 2024
No. of premises inspected	61,357	184,256
No. of Sanitary notices served	2,583	4,204
No. of Notices served (water nuisances)	3,133	8,583
No. of Statement of Nuisances issued	916	3,513
No. of complaints attended	3,294	4,197
No. of contraventions established for environmental sanitation	27	51
No. of cases sentenced in District Courts	27	27
Revenue from Fines paid in District Courts (Rs)	(as fine) 53,200 + (as costs) 2,200	(as fine) 57,200 + (as costs) 2,700

Source: PHFS Inspectorate Unit

##### Prevention and control of epidemic-prone communicable diseases (Vector-borne diseases)

Statistics as regards to communicable diseases are provided as section 2.3.4 and for larviciding are given in the following table:

Item	July 2022 – June 2023	July 2023 – June 2024
<b>Larviciding</b>		
No. of premises covered during larviciding	393,464	668,769
Amount of chemical larvicide used (Temephos – common name Abate)	206 Kg	515.52 L

Source: PHFS Inspectorate Unit

## B. FOOD SAFETY CONTROL

### Food Hygiene

Item	July 2022 – June 2023	July 2023 – June 2024
No. of Food premises inspected	21,618	16,143
No. of school canteens visited	1,153	746
No. of Improvement Notices served	3,243	15,098
No. of Prohibition Orders issued	61	36
No. of Notice prior to Emergency Closing Order issued	12	2
No. of food complaints attended	437	425
No. of Contraventions established	549	404
No. of cases sentenced in District Courts	461	442
Revenue from Fines paid in District Courts (Rs)	(as fine) 1,054,700 + as costs 140,600	(as fine) 861,900 + as costs 54,650

Source: PHFS Inspectorate Unit

### Food Seizures

Statistics in respect of food seizures are given in the table hereunder.

Food seized	July 2022 – June 2023	July 2023 – June 2024
Meat & meat products	7.8 Kg	115.5 Kg
Fish & fish products	149 Kg	61.8 Kg
Milk & milk products	33.9 Kg	21.4 Kg
Vegetables & Fruits	117.9 Kg	42.1 Kg
Canned foods, bottles & others (eggs)	36.3 Tons	9,163.1 Kg

Source: PHFS Inspectorate Unit

### Food Handlers Training

Statistics in respect of food handlers training are given in the table hereunder.

Item	July 2022 – June 2023	July 2023 – June 2024
No. of food handler's training sessions delivered	697	493
No. of food handlers examined	68,035	37,844
<b>Food Handler's Training upon request from private food establishments against payment</b>	<b>July 2022 – June 2023</b>	<b>July 2023 – June 2024</b>
Revenue collected for delivering Food Handler's Training upon private food establishments (Rs)	2,645,000	1,755,001

Source: PHFS Inspectorate Unit

## Food Sampling

Statistics in respect of food sampling are given in the table hereunder.

Item	July 2022 – June 2023	July 2023 – June 2024
No. of food samples taken for chemical analysis	331	275
No. of food samples taken for bacteriological analysis	N/A	747
No. of physical examination of food samples	N/A	3,081

Source: PHFS Inspectorate Unit

## Squad Operations

Squad operations are conducted to target activities which are normally unreachable or not carried out during normal working hours. Such activities include cooking and selling of food by roadside, 'grillade', and also food establishments like restaurants, bakeries etc.

Item	July 2023– June 2024
<b>Food Control</b>	
No. of squad operations carried out during office hours	107
No. of squad operations carried out after normal working hours, Saturdays, Sundays and Public Holidays	113
No. of premises visited	1,681
No. of contraventions established	201
<b>Tobacco Squads</b>	
No. of squad operations carried out during office hours	78
No. of squad operations carried out after normal working hours, Saturdays, Sundays and Public Holidays	31
No. of premises visited	949
No. of contraventions established	72
<b>Alcohol Squads</b>	
No. of squad operations carried out during office hours	37
No. of squad operations carried out after normal working hours, Saturdays, Sundays and Public Holidays	25
No. of premises visited	631

Source: PHFS Inspectorate Unit

## C. TOBACCO CONTROL

Statistics in respect of tobacco control are given in the table hereunder.

Item	July 2022 – June 2023	July 2023 – June 2024
No. of Visits effected	14,182	9,514
No. of Contraventions established	40	72
No. of cases sentenced in District Courts	21	43
Revenue from Fines paid in District Courts (Rs)	38,000	114,700

Source: PHFS Inspectorate Unit

## D. PORT HEALTH ACTIVITIES

### General Port Health activities

Statistics as regards general Port Health activities are given in the table hereunder.

Item	July 2022 - June 2023	July 2023 – June 2024
<b>General</b>		
No. of ships given pratique	2,919	5,469
<b>De-ratting of ships</b>		
No. of deratting of ships performed	16	10
<b>Fumigation of ships</b>		
No. of ships fumigated	17	8
No. of holds of ships fumigated	42	31
Total no. of containers of food fumigated	2,732	2,955
<b>Revenue Collected for de-ratting and fumigation services</b>		
Revenue collected in respect of services offered at the Port (viz. fumigation of food containers, deratting of vessels and Ship Sanitation Certificates) (Rs)	2,622,000	2,725,250

Source: PHFS Inspectorate Unit

### Rodent Control

Statistics pertaining to rodent control are given in the table hereunder.

Item	July 2022 – June 2023	July 2023 – June 2024
No. of complaints attended	50	53
No. of visits carried out	7,805	10,828
No. of rats caught/ killed	3,912	3,813
No. of specimens forwarded to laboratory for detection of plague disease (N.B. All were negative for plague)	62	99
No. of Sensitization programs effected	3,716	10,828

Source: PHFS Inspectorate Unit

## E. ACTIVITIES AT AIRPORT HEALTH OFFICE

Activities undertaken at the airport health office include the disinsection of planes on arrival and screening of passengers for communicable diseases such as Ebola, Dengue, Chikungunya, Cholera, and Malaria amongst others.

Some statistics as regards Airport Health activities are given in the following table.

Item	July 2022 – June 2023	July 2023 – June 2024
No. of planes landed	10,079	11,315
No. of planes disinsected on arrival	25	94

Source: PHFS Inspectorate Unit

## F. LODGING ACCOMMODATION FOR EXPATRIATE WORKERS (Dormitories)

Statistics pertaining to rodent control are given in the table hereunder.

Item	July 2022 – June 2023	July 2023 – June 2024
No. of dormitories inspected	1,877	1,573
No. of dormitories in good sanitary condition during 1st visit	533	760
No. of dormitories issued with list of requirements for compliance	877	813
No. of Health Clearances issued	703	769

Source: PHFS Inspectorate Unit

## G. CREMATION / EXHUMATION

Statistics concerning cremation and exhumation are given in the table hereunder.

Item	July 2022 – June 2023	July 2023 – June 2024
No. of cremation permits issued by Health Offices	5,716	5,713
No. of private cremation sites visited	27	17
No. of exhumations attended	8	7
No. of Unclaimed dead bodies for which needful done for interment by Health Offices after completion of formalities by Police	14	22

Source: PHFS Inspectorate Unit

## 2.3.2 MAURITIUS FOOD STANDARDS AGENCY (MFSA)



The Mauritius Food Standards Agency (MFSA) is a novel body, established under the Mauritius Food Standards Agency Act 2022. The Agency is responsible **for ensuring the safety and nutritional quality of food in Mauritius**. It is an advisory body, assessing and proposing draft regulatory measures for adoption, as well as, coordinating and reviewing the food control system.

The MFSA has the objective of harmonising the activities between all the stakeholders across the whole food supply chain to ensure the safety and nutritional quality of food on the market through the development of regulatory measures. The setting up of the MFSA had filled a gap by improving the effectiveness of our food control system through better collaboration among the stakeholders having objectives wholly or partly similar to that of the MFSA.





### ACHIEVEMENTS FOR FY 23/24

- During the FY 23/24, the MFSA developed its logo, website, as well as Facebook page and has used them to communicate with consumers and food business operators on matters related to the safety and nutritional quality of food. (Website link: <https://mfsa.govmu.org/mfsa/> )
- The MFSA has been collaborating with stakeholders to promote trade, oversee financial management, prepare budget estimates and procurement requirements.
- The Board of the MFSA had 12 meetings and established 8 sub-committees.
- During this period, 8 draft regulatory measures, focusing on standards for vegetarian and halal food, front-of-pack nutrition labelling, and amendments to the Food Act 2022 have been developed.
- The MFSA has moved in its new office accommodation, situated at Rose Hill since 10<sup>th</sup> of June 2024.
- The Officer in Charge (OIC) of the MFSA has been designated by the Ministry as member of a technical working group (TWG) on breast feeding legislation. The purpose of the TWG is to provide technical expertise and guidance in developing policies to protect, promote, and support breastfeeding practices in Mauritius. As member, the OIC is responsible to provide inputs to the TWG and support it in discharge of its functions.
- The MFSA collaborated with local tertiary institutions through workshops organised by the University of Mauritius and University of Technology. The MFSA also participated in media programmes on radios, television and newspapers to create awareness on its objectives and functions.



*Workshop organised by the University of Mauritius in collaboration with Rutgers University, USA, and the Mauritius Food Standards Agency on May 7th, 2024, on the topic of Food Safety in the World of Trade*

### 2.3.3 ENVIRONMENTAL HEALTH ENGINEERING UNIT

The MOHW also has the important responsibility to manage public health risks, such as unsafe drinking water, inadequate sanitation, noise, and odour pollution. In this respect, the Environmental Health Engineering Unit (EHEU) of the Ministry monitors and enforces standards under the Environment Act 2024.

The EHEU responsibilities include:

- Monitoring drinking water quality to ensure safety in line with Drinking-Water Standards of the Environment Act 2024 and WHO Guidelines
- Monitoring environmental noise to ensure it stays within permissible limits as prescribed under the Environment Act 2024.
- Investigating and monitoring environmental issues related to odour and wastewater.

Additionally, the EHEU assists the Project Implementation Unit in the conception and implementation of civil projects, including evaluating and preparing Terms of Reference for major projects and attending site visits and meetings with consultants and contractors.

#### ACHIEVEMENTS FOR FY 23/24

- A total of **4,060 drinking water samples** were analysed for bacteriological and physico-chemical during the review period.
- Noise Monitoring Progress between FY 22/23 and FY 23/24:

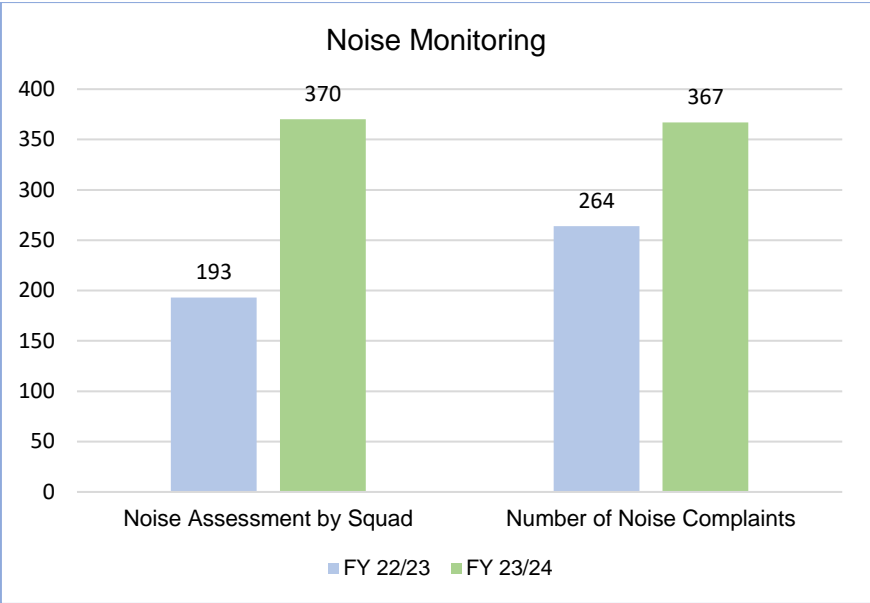


Figure XI: Noise Monitoring

- Site visits are undertaken for the processing of Environment Impact Assessments (EIAs), Preliminary Environment Reports (PERs) and morcellement applications.
- Other activities to safeguard environmental health and ensure that proper environmental sanitation are as follows:

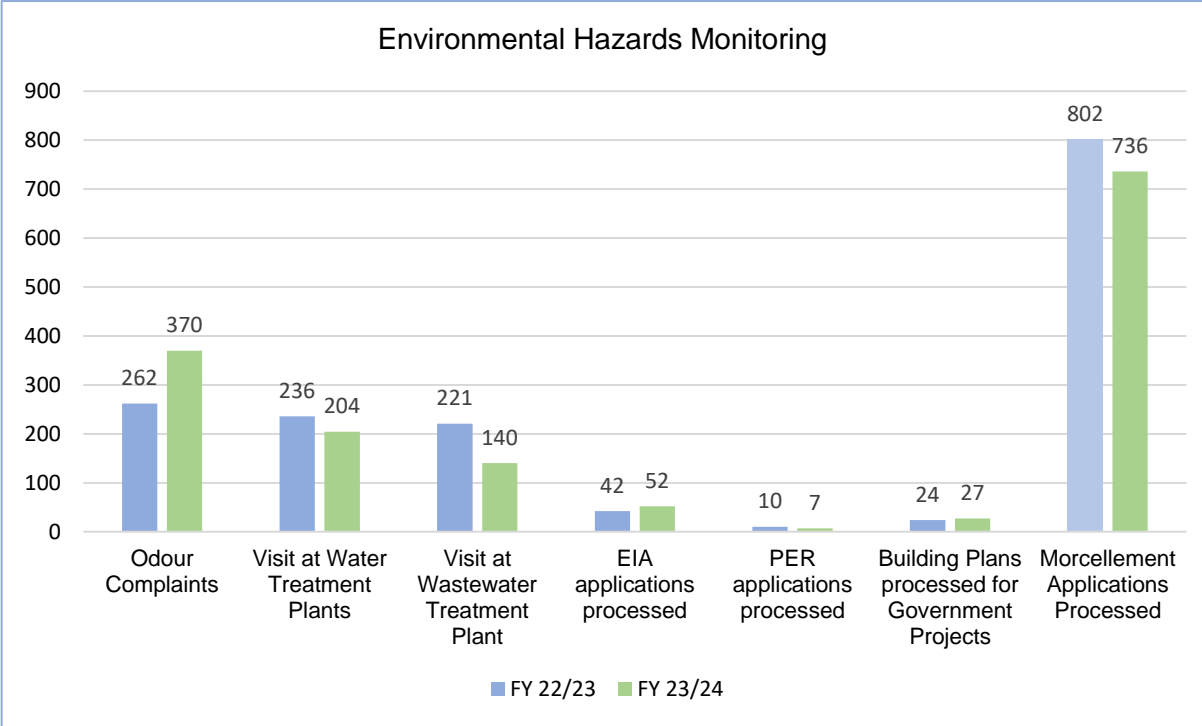


Figure XII: Environmental Hazards Monitoring

## 2.3.4 COMMUNICABLE DISEASES CONTROL UNIT (CDCU)



The Communicable Diseases Control Unit (CDCU) serves as the primary agency for ensuring an effective, efficient public health surveillance and response system resulting in the reduction of morbidity, mortality, and disability from disease outbreaks. The activities of the CDCU include but are not limited to:

- Surveillance and monitoring of communicable diseases of national public health importance such as dengue, malaria, food poisoning, leptospirosis.
- Collection and processing of data pertaining to these diseases.
- Supporting the International Health Regulations National Focal Point in ensuring national health security.
- Carrying out outbreak investigations and field case investigations.
- Ensuring preparedness for emerging and re-emerging epidemic prone communicable diseases by drafting and subsequently updating protocols, plans and procedures.

### ACHIEVEMENTS FOR FY 23/24

#### A. Public Health Emergency Operations Center (PHEOC)



The Ministry has initiated actions for the setting up of a Public Health Emergency Operations Center (PHEOC) with the technical assistance of the World Health Organization for addressing emerging and re-emerging diseases. The PHEOC will serve as a coordinating platform for the preparation, readiness, response, and recovery from public health emergencies among relevant stakeholders. A functional PHEOC will be the backbone of a strong disease surveillance system and will provide real-time response to any



public health emergency, early disease detection and response for timely decision making and efficient management of resources and communication.

In this respect, during the FY, the CDCU has been undertaking the following actions for the operationalization of the PHEOC:

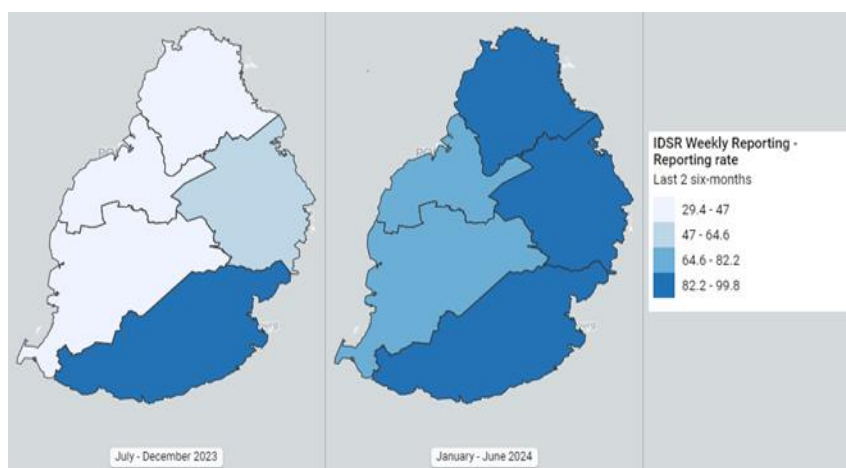
- Development of documents required for operationalization the Public Health Emergency Operations Center (PHEOC) namely, PHEOC Manual of Management and Operations, PHEOC handbook, inputs for legal framework, Terms of Reference for the PHEOC Steering Committee, and SOP for activation and deactivation of the PHEOC.
- Training of 37 officers from different ministries and stakeholders on the Incident Management System (IMS) which is an emergency management structure and have protocols that provide an approach for coordination of response of the PHEOC in a coordinated manner, to respond to and mitigate the effects of all types of emergencies. The system is modular and scalable, hence can be partially or fully activated depending on the scale of the public health event.
- Validation of a costed two-year implementation plan.

## B. Integrated Disease Surveillance and Response (IDSR)

Adaptation of the 3rd Edition of AFRO IDSR in the country context has been completed.

A core committee for IDSR is in place to oversee the implementation of IDSR.

In addition, a rapid risk assessment for IDSR was done through 52 field visits at health centres, health offices and Points of Entry in September 2023



An implementation plan for IDSR 2024-2029 is being developed. Training of Trainers was done for 36 officers of different departments of the Ministry and partner Ministries. 151 officers were trained for roll out to all regional hospitals, Medi-Clinics and health centers.

A review of the prioritized diseases for IDSR was done based on disease trends and results of the Strategic Toolkit for Assessing Risks (2023) and IHR (2005).

## C. Other Activities

- A multisectoral capacity building was conducted on the International Health Regulations (2005) in September 2023 to support IHR Implementation in Mauritius.
- The COVID-19 Transition Plan was developed with the support of WHO.
- A National Preparedness Plan on Cholera and an Operational Plan for Leptospirosis have been developed.
- A strategy for Environmental surveillance for Polio has been developed and implemented with the collaboration of WHO.

- Working documents for novel OPV2 vaccines in case of outbreak of wild polio virus in the country have been finalised and submitted.
- Regulations on mandatory testing for infectious diseases made in January 2024, under Section 193 of the Public Health Act.
- Capacity building was led by the CDCU for officers of the surveillance and response teams involved at Headquarters, regions, laboratory and the Expanded Programme on Immunisation for the elimination of the vaccine preventable diseases Measles and Rubella.
- Setting up of the Technical Working Group for Mortality Surveillance.
- Participation in 56 radio and television talks.
- Regular coordination meetings are held with the surveillance team in Rodrigues on Dengue Outbreak
- Three Field visits were conducted in Rodrigues with a view to strengthening surveillance and response activities on the Island and the CDCU supported the (Rodrigues Regional Assembly) RRA in developing the island specific Strategic toolkit for Assessment of Risks (STAR).

#### D. Statistics

Table IV: Vector-Borne and Other Diseases

<b>Vector-borne diseases</b>		
	<b>FY 2022-2023</b>	<b>FY 2023-2024</b>
<b>Malaria Surveillance</b>		
Number of Incoming passengers placed under Malaria surveillance	299,998	362,733
Number of blood smears (slides) taken	69,460	67,766
Number of positive malaria cases detected	38*	44**
<b>Dengue Surveillance</b>		
Total number of incoming passengers put under Dengue Surveillance		414,460
Total Number of Positive Dengue cases	13*	6,836**
<b>Chikungunya Surveillance</b>		
Total number of incoming passengers put under Chikungunya Surveillance		378,044
Number of cases	<i>Nil</i>	<i>Nil</i>
<b>Zika Surveillance</b>		
Total number of incoming passengers put under Zika Surveillance	59,958	73,462
Number of cases	<i>Nil</i>	<i>Nil</i>
<b>Filariasis Surveillance</b>		
Number of Positive Filariasis Cases detected (all imported)	297	559

**Malaria: \*all imported cases, \*\*2 introduced and 42 imported; Dengue: \*all imported, \*\* all local cases**

Source: CDCU, MOHW

### E. Mauritius All-in-One Travel Digital Form

For the period December 2023 to June 2024, some 715,123 passengers used the "Mauritius All-in-One Travel Digital Form". Out of these passengers, 219,703 were referred to the Public Health Offices for further surveillance.

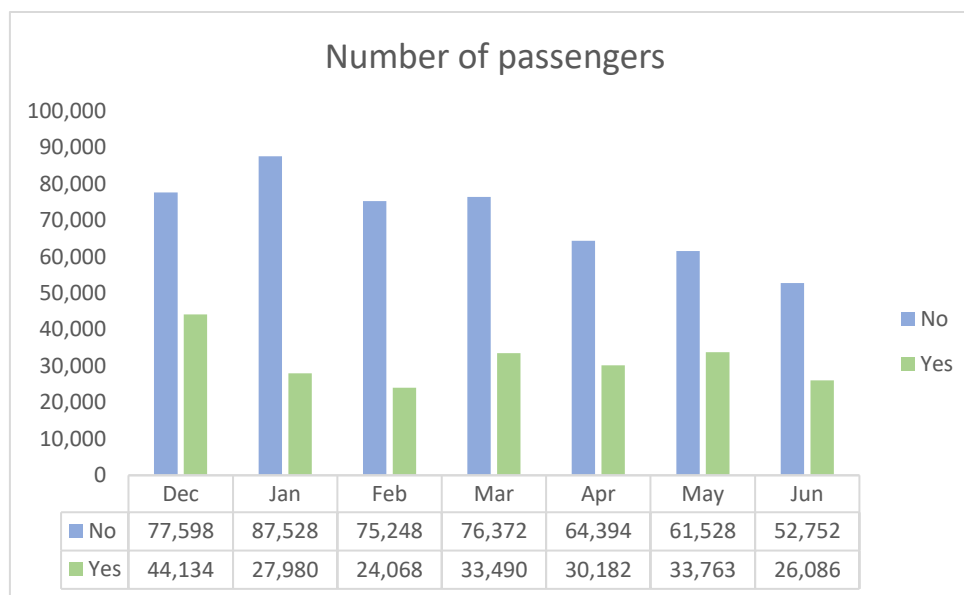


Figure XIII: Passengers referred to PHO for further surveillance

Please note that for each month, there are two figures:

- “Yes” are passengers referred to a Public Health Office: This represents the number of passengers who were flagged for further health screening.
- “No” are remaining passengers: This represents the number of passengers who did not require additional screening.

### F. Expanded Programme of Immunization

Under the Expanded Programme of Immunization (EPI), the following activities have been carried out during the period 01 July 2023 to 30 June 2024:



#### **Vaccinations:**

**13** types of Antigens for babies, infants, toddlers and children,

**13** types of Antigens for girls and **12** for boys





### Vaccines administered to babies:

Details	FY 2022-2023 Doses	FY 2023-2024 Doses
Bacillus Calmette-Guerin (BCG) against Tuberculosis infection	9,351	9,824
Rotavirus against diarrhea	16,731	15,070
Pneumococcal Conjugate vaccine against Pneumococcal infection	29,048	29,032
Hepatitis B vaccines	N/A	5
Measles, Mumps, Rubella (MMR)	18,835	20,221
Hexavalent vaccines against six diseases	37,749	36,899

Source: CDCU, MOHW



### Vaccines administered to children:

Details	FY 2022-2023 Doses	FY 2023-2024 Doses
Diphtheria, Tetanus, acellular Pertussis and Inactivated Polio Vaccine (DTaP-IPV) administered to school children (booster doses)	7,173	<b>10,619</b>
Human Papilloma virus vaccine administered to Primary school girls of Grade V and Grade VI	3,622	<b>1,390</b>
Diphtheria, Tetanus, acellular Pertussis (Tdap) administered to Grade V and VI school children	7,501	<b>10,187</b>

Source: CDCU, MOHW

## 2.3.5 GOVERNMENT ANALYST DIVISION (GAD)

The Government Analyst Division (GAD) is the Chemistry Laboratory of the Ministry of Health and Wellness. Analytical chemistry is essential in medical technology as it can measure the performance and safety properties of medical products and different types of samples, thus helping to improve an individual's health as well as their safety. The GAD provides analytical services for both public and private entities. Private firms and individuals are charged fees for the services.

The activities at the Division include:

- **Regulatory Activities:** Food analysis as per Food Act 2022, Alcohol analysis as per Excise Act, Drinking water analysis as per Environmental Protection Act 2002.

- **Clinical Analysis:** Toxicological screening for body fluids from patients in poisoning cases, and trace metals in Biomedical samples.
- **Support to different MOHW units:** Determination of blood cholinesterase level for sprayer men and other pesticide exposed workers, Heavy metals in Body fluids for industrial workers, Dialysis water quality from Haemodialysis Unit, Methadone quality for Harm Reduction Unit, Hypochlorite content in disinfection products, Mercury content in Cosmetics, Heavy metals content in Ayurvedic Medicines and Quality Control of Medicines.
- **Technical advisory services to the Government:** Assistance on matters of chemicals and health, food safety, chemical and biological weapons.
- **Involvement in National Surveys:** Lagoonal monitoring - Heavy metals levels in fish and Nutrition survey- Micro-nutrients in blood.

### ACHIEVEMENTS FOR FY 23/24

- From July 2023 to June 2024, GAD has analysed 2,961 samples which correspond to about 30,000 test parameters. The table below details the number and type of samples tested by GAD.

	Private Customers	Governmental Organisation
Analytical Toxicology (in poisoned patients)	102	1335
Trace metals in body fluids	96	64
Cholinesterase	283	208
Food Testing	147	447
Drinking water (EHEU)	-	98
Dialysis water	-	77
Bottled water	4	56
Medicines	-	8
Non-Food (including disinfection products)	8	28
<b>Total</b>	<b>640</b>	<b>2321</b>

Source: GAD, MOHW

- The GAD has obtained accreditation to the ISO 17025:2017 Quality Management system standard as certified by the MAURITAS in 2022. The division is accredited to the following Testing fields: Food and Chemical Testing. The system is being assessed annually and the accreditation status has been maintained during the reporting year.
- GAD has extended the number of accredited testing parameters to cover heavy metals testing in drinking water and biomedical samples. The GAD has also obtained accreditation for testing of Pharmaceuticals for quality control.

Parameters Accredited in 2022-2023 and maintained in 2023-2024	Additional Parameters Accredited in 2023-2024
<ul style="list-style-type: none"> <li>▪ Aflatoxins B1, B2, G1, G2 and Total Aflatoxins in Nut and Nut products</li> <li>▪ Total Sugars (Fructose, Glucose and Sucrose) in Beverages excluding milk-based</li> <li>▪ % saturated fatty acids (sat, poly unsat, mono unsat, trans) in oil and fats</li> <li>▪ % fat content in Snacks, Biscuits and Cookies</li> <li>▪ % Saturated fatty acids per 100g of edible portion in Snacks, Biscuits and Cookies</li> <li>▪ Level of Hydroxymethyl Furfural (HMF) in Honey</li> <li>▪ Moisture content in Fish and Fish products</li> <li>▪ Fat Content in Full cream milk powder%</li> <li>▪ Moisture in whole milk powder.</li> <li>▪ pH of Drinking water</li> <li>▪ Conductivity of Drinking water</li> </ul>	<ul style="list-style-type: none"> <li>▪ Anions (Fluoride, Chloride, Nitrite, Nitrate, Bromide, Sulphate, Phosphate) in Drinking water and water used for dialysis</li> <li>▪ Disinfectant (Bromate) in Drinking water and water used for dialysis</li> <li>▪ Cations (Sodium, potassium, Magnesium, Calcium) in Drinking water and water used for dialysis</li> <li>▪ Metals contaminants (Aluminium, Arsenic, Cadmium, Chromium, Lead, Nickel, Copper, Zinc and Mercury) in Drinking water and water used for dialysis</li> <li>▪ Lead level in blood</li> <li>▪ Identification of Pharmaceutical products</li> <li>▪ Assay of Pharmaceutical products</li> <li>▪ Anions (Fluoride, Chloride, Nitrite, Nitrate, Bromide, Sulphate, Phosphate) in Drinking water and water used for dialysis</li> <li>▪ Disinfectant (Bromate) in Drinking water and water used for dialysis</li> </ul>

Source: GAD, MOHW

### 2.3.6 VECTOR BIOLOGY CONTROL DIVISION (VBCD)

The responsibilities of vector studies, surveillance and strategical control are vested to the Vector Biology and Control Division (VBCD) of the MOHW. The overarching objective of the Division is to gear Mauritius to be free from resurging/newly emerging vector-borne diseases and to prone efficient control of existing vectors of such diseases in the country. Its main activities include the following:

- (1) Conducting daily surveys: i) to evaluate the incidence and behaviour of mosquitoes and other arthropods of diseases, ii) upon notification of vector borne disease and to provide guidelines for vector control interventions.
- (2) Evaluating fogging, spraying, larviciding operations, as well as the efficacy of insecticide products and vector control operations.
- (3) Surveying other disease vectors such as the fresh-water snail *Bulinus cernicus* and biting midges belonging to the *Culicoides* genus.
- (4) Screening for resistance to commonly-used insecticides in the island's mosquito populations and other arthropods (fleas, bedbugs, mites, ticks, etc.)
- (5) Participating in public awareness campaigns on vector-borne diseases, vectors and their control.
- (6) Conducting research on novel environment-friendly methods or strategies to decrease mosquito incidence in Mauritius.

- (7) Identifying insects of (i) forensic importance which are retrieved from human corpses and (ii) entomological importance from food specimens submitted by the sanitary department.
- (8) Conducting surveys and recommending control measures in case of infestation of hospitals, other private/public institutions or houses by arthropods such as bed bugs, fleas, ticks, amongst others.

### ACHIEVEMENTS FOR FY 23/24

- **Adoption of new technology** - The Ministry has been proactive for the control of vector borne diseases with the introduction of:

(i) Drones for insecticide application. Since its introduction, there were **10 regions** where insecticide was sprayed using drones.



(ii) Hand-held machine for space-application (mistblowing) of biolarvicide (Bti) and **21 localities** were targeted.

- **Reinforcing control of dengue** – During the reporting period, the division was called upon to double its efforts on the control of mosquitoes in the country. The surveys carried out and sites inspected **more than doubled since the last FY.**



The routine activities for the unit together with activities related to mosquito control over the last two FYs have been provided in the following table:

Routine activities	FY 2022-2023	FY 2023-2024
Number of mosquito survey carried out	413	945
Number of sites inspected for mosquito larvae	39,314	95,841
Number of sites with larvae that were overturned or treated with insecticide	395	1336
Number of bed bug surveys carried out upon request	114	47
Number of other pest-related surveys (ticks, fleas, mites, cockroaches, ants, millipedes, etc.) carried out upon request	26	15
Number of food specimens examined for insect infestation	8	7
Number of entomological exhibits from suspected criminal cases examined (Forensic entomology)	12	14
Number of times VBCD officers deponed in a court of law	11	8
Number of mosquito night-catch surveys carried out to assess mosquito biting incidence and behaviour	7	11
Number of insecticide products tested for their efficacy	10	29
Number of insecticide resistance tests carried out	35	51
<b>Additional/ research-related activities</b>		
Surveys related to <b>An. stephensi</b> : Number of special surveys conducted at points of entry	60	21
<b>Sterile Insect Technique</b> : Number of sterile male mosquitoes produced and released in Champs de Mars area	1.56 million	1.8 million

Source: VBCD, MOHW

### 2.3.7 MANAGEMENT OF DENGUE BY MOHW



Dengue fever has presented a significant public health challenge in Mauritius, with a marked surge between June and October 2023, followed by an unprecedented outbreak starting in December 2023. During the FY 2023-2024, a total of 6,836 confirmed local cases in the island

of Mauritius were recorded with a peak of 2,330 cases in February 2024 which declined significantly to reach 275 cases in June 2024. However, 8 related fatalities have been recorded since 1st July 2023 till 30th of June 2024.

As from February 2024, a Multi-Sectoral Meeting chaired by the Honourable Minister and comprising public and private sectors was held on a daily basis at the beginning of the outbreak to monitor the incidence of the vectors and the evolution of the cases. Subsequently, meetings were held on bi-weekly basis when there was a reduction in the number of dengue cases.

The outbreak has placed substantial pressure on healthcare services, with severe cases requiring hospitalization and platelet transfusions to manage dengue hemorrhagic complications. The Ministry of Health and Wellness implemented targeted vector control measures, including larviciding, fogging, and mist-blowing, in conjunction with intensified surveillance activities.

Outbreak investigation teams have been instrumental in contact tracing, conducting fever surveys, and vector surveillance. Risk Communication and Community Engagement (RCCE) strategies have enhanced public awareness of dengue prevention. Additionally, the Domiciliary Monitoring Unit continues to provide home-based care for non-hospitalized cases, ensuring comprehensive follow-up. Though the outbreak response incurred an estimated cost of 250 million rupees, these above-mentioned interventions have bolstered Mauritius' dengue response capacity.

In order to combat the dengue outbreak, the WHO has provided technical assistance in the development of:

- National Action Plan for the Management of Insecticide Resistance in Mosquito Vectors of Diseases (2024-2028)
- National Strategy for Integrated Vector Management (2024-2028)

All the necessary strategies were adopted to ensure a reduction in the number of Dengue cases. The weekly epicurve for dengue from 11 December 2023 to June 2024 has been provided in the following chart:

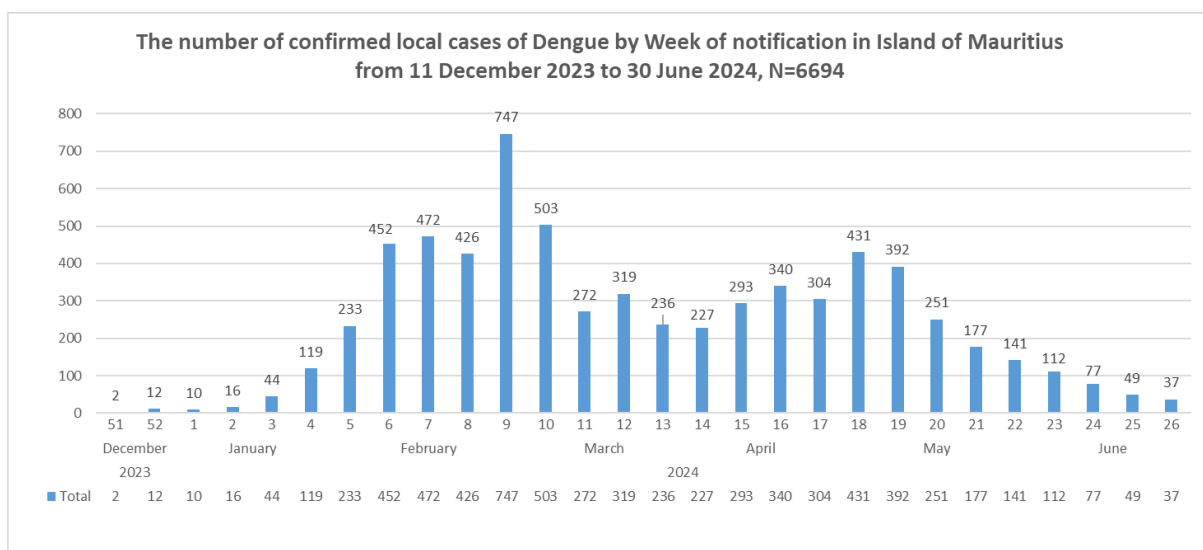


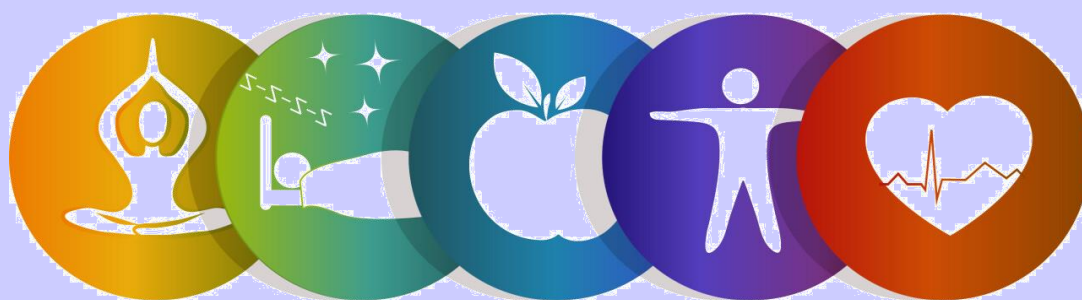
Figure XIV: Weekly Epicurve for Dengue

Source: CDCU, MOHW



## PART II - SECTION D

# HEALTH EDUCATION, PROMOTION AND NCD SCREENING SERVICES





## 2.4 HEALTH EDUCATION, PROMOTION AND NCD SCREENING SERVICES

According to the WHO, the majority of NCDs emanate from four specific behaviours; harmful use of alcohol, tobacco use, physical inactivity, and unhealthy diet that are leading to four key metabolic/physiological changes such as raised cholesterol, raised blood pressure, overweight/obesity and raised blood glucose.

Thus, the Ministry is also committed towards the development and implementation of appropriate health policy to address the rising global burden of NCDs. In order to address the growing challenges of NCDs while also contributing to communicable disease control efforts, distinct Units have been set up.

**The achievements of the different units for FY 2023-2024 falling under the Health Education, Promotion and NCD Screening Services are further elaborated in this part of the Report.**

### 2.4.1 NCDs, HEALTH PROMOTION AND RESEARCH UNIT (NHPRU)



The NCD, Health Promotion and Research Unit is responsible to organise, coordinate and execute health intervention programmes pertaining to prevention of NCDs and health promotion activities as well as to improve quality of life and well-being of the population through promotion of healthy lifestyles.

The objectives of the Unit are to screen and provide health education to as many people as possible at worksites, secondary schools and outreach regions and for the community at large; Promote the health status by means of nutritional intervention and increased physical activity; organize sensitization campaigns, talks and counselling sessions to prevent the development of NCDs; offer opportunities for lifestyle management; provide strategies for screening, educating and monitoring people; provide necessary infrastructure to enhance physical activity; and mobilize the community and enlist their participation.

### Surveys, trials and research work related to Non-Communicable Diseases (NCDs)

The focus is on Risk factors, namely: Obesity, Diabetes, Hypertension, Cardiovascular problems, Drug, alcohol, Smoking and Substance abuse among others.

### Surveillance programme for the control of communicable diseases.

In addition to NCDs programmes, the Unit also undertakes activities related to Communicable Diseases with a view to further strengthen the ongoing surveillance programme for the control of communicable diseases.

### Preparation/implementation of National Action Plans namely:

<ul style="list-style-type: none"> <li>▪ National Action plan to reduce the harmful use of alcohol (2020 - 2024)</li> <li>▪ National Action plan for Tobacco Control (2021 - 2025)</li> <li>▪ National Cancer Control Programme (2022 - 2025)</li> <li>▪ National Plan of Action for Nutrition (NPAN)</li> <li>▪ National Sport and Physical Activity Policy (2018 – 2028)</li> <li>▪ National Integrated NCD Action Plan (2023-2028)</li> </ul>	<ul style="list-style-type: none"> <li>▪ National Service Framework for NCDs (2023-2028)</li> <li>▪ National Integrated Care for Older People (ICOPE) Strategic and Action Plan (2022 - 2026)</li> <li>▪ National Strategy for Adolescent Health 2024 – 2029</li> <li>▪ Obesity Action Acceleration Roadmap 2024 – 2030</li> <li>▪ National Policy for Local Health Committees in Mauritius</li> </ul>
--	--

## ACHIEVEMENTS FOR FY 23/24

### A. NCD Screening Programme



NCD Screening Programme is being carried out regularly for people aged 18 onwards at work sites and community areas throughout the island, for early detection, prevention and treatment thereby laying much emphasis on the risk factors and complications.

The activities held are: Registration, Height and Weight, Blood Pressure, and Blood Test for Glucose level measurement, Vision Tests, AI Electrocardiography Consultation, Counselling / Health Education, Referral and follow up of positive cases and Issue of Health Cards.

The NCD Screening Programme **also consists of an intensive health promotion campaign for the general public.** During the reporting period, the number of participants screened increased to **49,738** as compared to **45, 098** in FY 2022-2023.



### Adherence to the UN SDG Principle of “Leaving No one behind”

During the reporting period, this Screening Programme also covered the **most vulnerable persons** as follows:

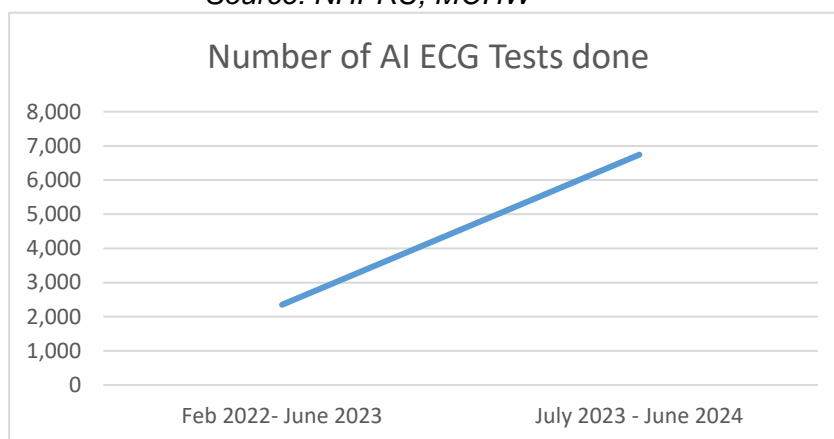
- i. National Empowerment Foundation (NEF) for Social Registry of Mauritius (SRM) beneficiaries in order to outreach the service to the most vulnerable and needy people in the society - Number of participants screened: **538**
- ii. Citizen Support Unit (CSU) - Number of participants screened: **1,790**



### Adoption of Artificial Intelligence (AI) – Cardisio into the Electrocardiography (ECG) services (AI ECG)

The NCD Health Promotion Research Unit (NCDHPRU) in Mauritius is at the forefront of a transformative mission. One of their ground-breaking initiatives involves the integration of **AI ECG** across the 5 health regions, Health Promotion Shop and 6 Medi-Clinics. The introduction of AI ECG in Mauritius aims to detect early signs of heart diseases. Most importantly it identifies asymptomatic individuals thereby helping to prioritise interventions and to decrease the disease burden on the health services. A rise from 2,350 to 6, 742 tests has been observed from FY 22/23 to the FY 23/24 as shown below.

Source: NHPRU, MOHW



### B. Breast and Cervical Cancer Screening Programme



Breast and Cervical Cancer Screening Programme is being carried out for 25 - 65 years for early detection and treatment using Liquid based cytology for married and sexually active women. For the period 01 July 2023 to 30 June 2024, **7,524** were screened for **Breast Cancer** and **4,635 for Cervical Cancer** (Note: No screening was conducted between September 2023- February 2024 due to rupture of stock of Liquid-based cytology kit)

### C. School Health Programme for Secondary Schools

Screening programme for students of secondary schools of Grade 7, Grade 9 and Grade 12 (aged between 13 – 17 years) is being carried out for the early detection of NCDs. The

programme also comprises health promotion activities. Over the reporting period, the number of students screened increased to **33,338** as compared to **32,562** in FY 2022-2023.

#### D. Physical Activity Programme



In line with National Action Plan on Physical Activity, **20 fully equipped health clubs** have been set up, including one for public officers on the 8th Floor of the Emmanuel Anquetil Building in Port Louis to raise awareness among the population at large about the need and importance of a physically active lifestyle.

In addition, the physical activity programme was expanded to **80 new regions** across the island, with Yoga, Tai Chi and Physical Exercise sessions being held on a routine basis, through the enlistment of

physical instructors on contract basis. Monitoring of the physical activity programmes are also conducted. Moreover, **7 Health Tracks** and **5 Outdoor Gyms** have been set up to encourage the community to undertake physical activity.

#### E. Health Promotion Clubs

The Ministry of Health and Wellness has set up **70 Health Promotion Clubs** in collaboration with the Prime Minister's Office, Ministry of Public, Administrative and Institutional Reforms, Public Officers' Welfare Council and Mauritius Sports Council in order to encourage public officers to practice regular physical activity and to adopt healthy eating habits. Through these clubs, frequent talks on health issues including mental health, stress management, diabetes, cardiovascular diseases, alcohol and substance abuse as well as medical check-ups are organised.

#### F. Health Promotion Shop



Health Promotion Shop located at the Renganaden Seeneevassen Building (Ex NPF), Port-Louis is easily accessible and offers a variety of screenings, including blood pressure checks, glucose monitoring, HbA1c test, anthropometric measurement, Bio-Electrical Impedance (body composition analyser), Breast and Cervical cancer screenings. Counselling and distribution of health pamphlets is done once per week. Moreover, the shop also offers AI ECG service for the prompt

identification of common heart diseases.

From period July 2023 to June 2024, the Health Promotion Shop conducted the following activities: NCD Screening: **5430**; Breast Cancer Screening: **121**; Cervical Cancer Screening: **88** and AI ECG: **807**



## G. Sensitization/Health Education Campaigns



Sensitisation campaigns on NCDs and their associated risk factors, physical activity, healthy lifestyle, tobacco cessation, mental health, cancer, sexual reproductive health, alcohol and substance abuse are considered as best-buys for the prevention of NCDs. The NHPRU undertook the following activities/channels for health promotion during the FY 2023-2024:

### a) Health Talks

Each year, over 100,000 persons are sensitized through the NCD screening programme at worksites, secondary schools and community even through CSU and NEF programmes. For the reporting period, some **101,783 talks** have been delivered.

### b) Health Promotion Campaigns

Health Promotion Campaigns have been conducted since 2022, in the compound of commercial centers, shopping malls, district councils, municipal councils across the island, to increase awareness on health-related issues such as diabetes, cardiovascular disease, cancer, food safety and good nutrition. Some 4,500 to 5,000 persons visited the different stands at each session. About 160,000 people were reached through live radio programme of local radio (Best FM and Kool FM) during the campaign. About 1,600 persons were sensitized on the Facebook page "Maurice en bonne santé."

### c) TV and Radio Programmes

The Radio and TV programmes namely "Tou Korek" is mounted in collaboration with the Prime Minister's Office with the aim to sensitize the population on Non-Communicable Diseases (NCDs) and to decrease the number of people suffering from NCDs.

### d) Website and Facebook

The Ministry's Health portal and Facebook have been re-engineered to provide accurate Health information to all which will enable this information to increase knowledge about diseases and their control, enhance disease management and will reduce patients' anxiety, as well as encouraging them to more actively participate in care, make better informed medical decisions and better accept medical advices.

### e) SMART APP - MoBienet

MoBienet is an online application for exchanging information by the Ministry of Health and Wellness. Its development has been funded by WHO. The application intends to adopt innovative/ new channels of communication as part of its health promotion strategy. Its mission is to facilitate communication for health promotion strategy to improve quality of life and well-being of the population including Health Care Workers.

## H. Exercise Referral Scheme

The Exercise Referral Scheme (ERS) was launched in 4 primary health care facility on a pilot basis in 2022 to investigate the effectiveness of a 20-week exercise referral scheme (prescription exercise) in a group of Mauritian adults diagnosed with diabetes, hypertension

and/or diabetes. The scheme demonstrated significant improvement in parameters such as weight, BMI and fasting blood sugar.

Thus, it was decided to sustain and integrate the ERS in various Primary Health Care Centres across the island and during FY 2023-2024, this scheme was made available at the new PHC facilities, namely Quartier-Militaire Medi-Clinic and Bel Air Medi-Clinic.

### I. Human papillomavirus (HPV) vaccination



Vaccination against HPV is the simplest and most cost-effective measure to safeguard the well-being of the future generation against HPV-related infection and cancers. Previously, vaccination against HPV was being carried out for girls aged 9 only and as from February 2024, the vaccination campaign **has been extended to both girls and boys aged 9 to 15 years** which is in line with the

National Cancer Control Programme 2022-2025 and with the Cervical Cancer Elimination Initiative by 2030 (SDG 3.4).

The new National HPV Vaccination Campaign using Gardasil-9 vaccine is targeting 68,000 girls and boys in approximately 470 primary and secondary educational institutions.

In this context, the communication strategy for the sensitization programme included

- Organisation of an awareness Workshop on National Human Papillomavirus (HPV) Vaccination Campaign with different concerned stakeholders
- Broadcasting of a series of 4 HPV videos since December 2023 on the National Television as well as on social platforms, and
- Distribution of posters and flyers at the start of the first school trimester.

Additionally, training of staff was conducted on the 8<sup>th</sup> January 2024 on the following:

- Administration of vaccine,
- Importance of vaccination against HPV and
- Maintenance of cold chain

For the period 6<sup>th</sup> February to 30<sup>th</sup> June 2024, **19,890 children aged 9 to 15 years** in educational institutions have been vaccinated namely 13,543 boys and 6,347 girls.

### J. Conferences / Workshops

The NHPRU is involved in the planning and holding of different international, regional and national meetings and conferences, namely:

**a) International Conference on Diabetes, Obesity and Associated Diseases**



A 3-day International Conference on Diabetes, Obesity and Associated Diseases was organised in January 2024.

Renowned international professors from various countries, experts in diabetology, cardiology, and obesity shared their knowledge and expertise through presentations of the latest research and case studies.

At the end of the conference, a Position Statement was made by the participants to develop strategies to prevent and control non-communicable diseases, so as to halt the proportion of diabetes in the Republic of Mauritius, as well as to take measures to enhance the quality of life of people living with diabetes, obesity and other co-morbidities.

**b) Workshop on Stroke and Neuro-rehabilitation**



A 2-day workshop was conducted in March 2024, in collaboration with the Canadian Advances in Neuro-Orthopedics for Spasticity Consortium (CANOSC). Foreign professors such as neurologists, neurosurgeons, physiotherapists, occupational therapists have delivered lectures to exchange experiences and for participants to acquire insights into optimal practices for the diagnosis, prevention and management of stroke and neuro-rehabilitation.

Likewise, the International Conference on Diabetes, a Position Statement was made, to formulate and establish a clear consensus on the prevention and rapid management of stroke and to enhance Mauritian stroke survivors' quality of life, ensure community reintegration.

**c) Stakeholders' Round Table on multi sectoral action to accelerate the prevention and management of obesity in Mauritius**



A 3-day "Stakeholders' Round Table on multi sectoral action to accelerate the prevention and management of obesity in Mauritius" was carried out from 23rd to 25th April 2024. The aim was to assess the nation's strengths and weaknesses in the field of obesity, providing the platform for identification of opportunities and threats towards fostering a healthier population by preventing NCDs and their associated risk factors by using a multi-sectoral approach.

At the end of the round table, a roadmap was proposed to accelerate the progress towards the prevention of obesity in Mauritius.



#### d) National Health Financing Pre-Dialogue and Dialogue

In collaboration with the SADC Secretariat and the Global Fund, a Pre-Dialogue and National High-Level Dialogue on Health Financing have been conducted in July and September 2023. These dialogues aimed at enhancing domestic health funding and sector governance by mobilizing stakeholders, assessing progress, identifying necessary reforms, and building consensus on feasible actions for health financing. Based on the outcomes of the Pre-dialogue and Dialogue, a work and technical support plan for prioritizing health financing and advocacy will be developed with the assistance of the concerned development partners to ensure sustainable and effective domestic health care funding.

#### K. National Action Plans/Policy

##### a) National Service Framework for NCDs and a National Integrated NCD Action Plan (2023-2028)



The National Service Framework for NCDs (2023-2028) and an Integrated National Non-Communicable Disease (NCD) Action Plan (2023-2028) for Mauritius was launched in September 2023 in the presence of Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness and other eminent personalities.

The National Service Framework (NSF) for Non-Communicable Diseases (NCDs) in Mauritius is a key policy and implementation tool for delivering a real change in the way health and social care bodies and their local partners working with people with long-term conditions to plan and deliver the services which they need to make their lives better. The National Integrated NCD Action Plan (NINAP) for NCDs provides a vision for identifying barriers and opportunities for NCDs and scaling up proven interventions through an implementation roadmap.

**b) The National Sport and Physical Activity Policy (2018-2028)** was developed in collaboration with the Prime Minister's Office and other Ministries and its implementation is ongoing to foster a culture of community sport and physical activity in Mauritius.

**c) The National Action Plan for Tobacco Control (2021-2025)** aims at preventing use of tobacco, especially among young people and adults, preventing exposure to second hand smoke and promoting smoking cessation.

#### L. Surveys / Research

##### a) Rodrigues Nutrition Survey 2023

The overall objective of this survey was to study food consumption patterns regarding the quality and quantity of dietary intake, and assess the nutritional status of the population in terms of body weight and micro-nutrient status, with a view to address diet and nutrition related health problems and non-communicable diseases on the island. The survey also examined lifestyle habits such as physical activity and sedentary habits that influence weight and health status of the population of Rodrigues. The results of the survey have already been disseminated in June 2024.

**b) Mauritius Salt Intake Study 2023**

The Ministry of Health and Wellness in collaboration with international institutions namely Monash University, Australia, University of Helsinki, Finland, Umea University Hospital, Sweden and Imperial College, UK conducted this survey with a target of 300 participants throughout the island from 31 August to 5 September 2023. The objective of this study was to measure the average salt intake in the Mauritian adult population, aged 30 to 59 years. Eventually, the response rate was 84.3%, with 253 participants. Ten clusters were involved were in this survey. The report has been disseminated in March 2024.

**c) Survey on the Determinants and Consequences of Abortion in Mauritius 2023**

The Ministry of Health and Wellness in collaboration with the World Health Organization is conducting a Survey on the Determinants and Consequences of Abortion in Mauritius 2023 around the island for 350 female participants, aged between 18 and 49 years. The main objective of the survey is to determine the key determinants leading to abortion and assess its consequences. The fieldwork of the survey has already been completed during December 2023 – January 2024. The report will be disseminated soon.

**d) The Prediction of Long COVID by Metabolic Profiling in the Mauritius population**

The Ministry of Health and Wellness in collaboration with Monash University of Australia conducted a second phase study on “The Prediction of Long COVID by Metabolic Profiling in the Mauritius population”.

This study aims to improve survival rates in high-risk groups, to reduce morbidity and mortality, and to improve the quality of life of people with COVID-19 infections. It also enables the development of models to better predict disease progression, tailor treatment and understanding of long-term impacts of COVID-19 on the health of affected individuals.

The second phase was conducted September 2023 in 9 clusters throughout Mauritius, with a total of 177 participants (71%). Data analysis and report writing is being done by International Professors.

**e) Contraceptive Prevalence Survey 2023**

The Ministry of Health and Wellness in collaboration with United Nations Population Fund (UNFPA) has initiated the preparation for the Contraceptive Prevalence Survey 2023 in June 2024.

The objectives of this study in Mauritius are to assess the current contraceptive prevalence rate among women of reproductive, aged 15- 49 years, to identify trends in contraceptive method preferences and usage patterns, to explore factors influencing contraceptive decision-making, including socio-economic status, education, cultural beliefs, and access to healthcare.

Moreover, the data collected will be used to design and implement a targeted reproductive health programs and policies. Additionally, it will also contribute to update the global and regional databases on contraceptive prevalence and reproductive health indicators.

The target for this survey is 1800 women of reproductive aged 15- 49 years in Mauritius. The training for the survey has been completed and the field survey will start by the end of July.

**f) Mauritius Global Youth Tobacco Survey (GYTS) 2024**

The MOHW has embarked on the 4<sup>th</sup> round of GYTS for Mauritius. The survey aims to provide data on the magnitude, patterns, determinants and consequences of tobacco use and exposure to tobacco smoke among students aged 13 to 15 years. It will enable to develop and

establish priorities, new intervention policies and implement appropriate tobacco control strategies targeting young people.

#### **g) The Household Out-Of- Pocket Expenditure on Health Survey 2024**

The MOHW in collaboration with World Health Organization has undertaken the field work for the Survey on Household Out-Of- Pocket Expenditure on Health in the Island of Mauritius during the month of April/May 2024.

The main objective of the study is to capture all expenditure incurred on treatment of diseases including seasonal diseases by the households over a period of one year from 01 April 2023 to 31 March 2024.

The OOP survey has been conducted in 80 Primary Sampling Units (PSU) across the 9 districts according to their population size. A sample of 3200 households were targeted for Island of Mauritius. The Report will be disseminated soon.

#### **h) Global Blood Pressure Survey - May Measurement Month**

This study is carried out throughout the month of May every year by the Ministry in collaboration with the International Society of Hypertension and the World Hypertension League. Its main aim is to raise awareness regarding high blood pressure. The article will be published at the end of this year.

### **M. Prevention of Infectious Diseases Outbreak**

#### **a) COVID-19 Vaccination Programme**

The NHPRU was entrusted to coordinate and implement the COVID-19 Vaccination Programme for COVID-19 Vaccines, following the development of the National Deployment Vaccination Plan. Since September 2023, the new Bivalent Pfizer BA.4-5 vaccine is being administered in the five regional hospitals.

#### **b) Hotline Services**

Since March 2020, a toll-free Hotline Service (8924) is available to function as an intermediary between the public and the MOHW, responding to questions about COVID-19 and offering guidance on a variety of medical issues.

In addition, the 141 Hotline Service was set up in 2021 at the Head Quarters to answer all the queries regarding COVID-19 Vaccination Campaign. It informs the public about the vaccination program and provides guidance on a variety of COVID-19 and HPV vaccines. These Hotline Services are still operational at the MOHW.

#### **c) Vector Borne Diseases**



Dengue remains a significant public health concern, and the NHPRU aims to educate and empower individuals to prevent its spread.

During the reporting period, the Unit conducted a half day training on prevention strategies for Dengue in Mauritius, engaging different levels of the population.

Date	Location	Target group	Number of Trainees
February 2024	Vaghjee Hall	Community centres, SWC, Village Hall, Municipal Hall, CAB, Youth Centres, District Council, National Women Council, Women Centres and SILWF	500
February 2024	L'Ecole Hoteliere, Ebene	personnel of Ministry of Tourism, Operators of the tourism sector such as AHRIM and Association of Inbound Operators, as well as MTPA, MPA and Airport	100
March 2024	MGI Auditorium, Moka	teachers and students involved in School Health Clubs of Secondary Schools	300
May 2024	Droopnath Ramphul State College	Heads of public and private educational institutions of the North (Zone 1)	120
May 2024	MGI Auditorium, Moka	Heads of public and private educational institutions of the East (Zone 2);	150
May 2024	District Council of Riviere du Rempart	The Chairman, District Councillors and Village Councillors	40
May 2024	District Council of Pamplemousses	The Chairman, District Councillors and Village Councillors	60
June 2024	District Council of Flacq	The Chairman, District Councillors and Village Councillors	70

Source: NHPRU, MOHW

**Interactive meetings** were organised in the affected regions, in collaboration with Local Community Leaders, Force vives, Village Councillors, Municipal councillors and representative of Women Associations, Senior Citizen Associations and Youth Club. From 1st July 2023 to 30th June 2024, 229 meetings have been organised and sensitising **12,009 individuals**.

**Door-to-door awareness** was conducted across the 5 Health Regions to distribute informational pamphlets and engage directly with residents of **62,730 households** during the same time period.

Health Talks were organised in community, worksites and secondary schools to educate individuals about the risks and preventive measures associated with dengue, thus contributing to control the spread of the disease and protect public health.

#### **N. Organisation of Official Functions**

The Unit is also responsible for organising official functions such as inaugurations, laying of foundation stones of health-related facilities/department and international health days. During the FY 2023-2024, the following events were organized:



**a) 75th Anniversary of the World Health Organization- Walk for Health, Walk for Life**



The World Health Organization celebrated its 75th Anniversary this year. In this context, the MOHW organized a ‘March’ on the theme “**Walk for Health, Walk for Life**” in collaboration with WHO (Mauritius) on 14 September 2023 where 8,000 peoples participated. The March started from MGI, Playground, Moka and ended at St Pierre Bus Station in the presence of Hon Pravind Kumar Jugnauth, Prime Minister, Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness, Dr (Mrs) Anne Marie Ancia, WHO Representative and other eminent personalities.

**b) A 12-hrs National Relay Walk, Jog and Run at Côte D’or National Sports Complex**



The MOHW participated in the fourth edition of the 12-hrs National Relay Walk, Jog and Run which was held on 26 November 2023 at the CÔte D’or National Sports Complex to promote physical activity. A Medical Checkup was also organised by the Ministry to screen all participants prior to their participation in the activity.

**c) World Heart Day 2023**



The World Heart Day 2023 with the theme “**Use Heart Know Heart**” was commemorated on 30 September 2023 at the Swami Vivekananda SSS, Souillac. The official ceremony was performed by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness in the presence of Dr Renganaden Padayachy, Minister of Finance, Economic Planning and Development, Dr the Hon Muhammad Ismael Rawoo, Parliamentary Private Secretary, Dr (Mrs) Anne Marie Ancia, WHO Representative and other eminent personalities.

**d) World Diabetes Day 2023: “Access to Diabetic Care”**



The World Diabetes Day 2023 was marked by a series of activities performed on 15 November 2023 at the Farmers Service Centre, Riviere du Rempart by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness in the presence of other eminent personalities.

**e) World Cancer Day 2024**

World Cancer Day is observed globally in February each year, with a specific theme. This year's theme is "**Close the care gap**". To mark the occasion, the MOHW organized a series of activities on 05 February 2024 at Plaza, Rose Hill. The activities included screening and counselling for NCDs, exhibitions on health-related issues, sensitization talks, and cooking demonstrations featuring food plate models.

The official ceremony was conducted by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness, in the presence of Hon (Mrs) Fazila Jeewa-Daureeawoo, G.C.S.K., Minister of Social Integration, Social Security and National Solidarity, Hon (Mrs) Marie Sandra Monia Mayotte, Parliamentary Private Secretary, Hon Ivan Leslie Collendavello, G.C.S.K., Member of National Assembly and other distinguished personalities.

**f) World Health Day 2024**

World Health Day is observed globally on 07 April each year, with a specific theme. This year's theme is "**My Health, My Right**". To mark the occasion, the MOHW organized a series of activities on 08 April 2024, at the Marie Marot Municipal Complex in Quatre-Bornes. The activities included screening and counseling for NCDs, exhibitions on health-related issues, sensitization talks, and cooking demonstrations featuring food plate models.

The official ceremony was conducted by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness, in the presence of Hon Kavydass Ramano, Minister of Environment, Solid Waste Management and Climate Change; Hon (Mrs) Marie Alexandra Tania Diolle, Parliamentary Private Secretary; Mr Dooshiant Ramluckhun, Mayor, Municipal Council of Quatre-Bornes; and other distinguished personalities.

**g) World No Tobacco Day 2024**

World No Tobacco is observed globally on 31 May each year, with a specific theme. This year's theme is "**Protecting children from tobacco industry interference**". To mark the occasion, the MOHW organized a series of activities on 03 June 2024, at the Dunputh Lallah SSS in Curepipe. The activities included screening and counselling for NCDs, exhibitions on health-related issues, sensitization talks, and cooking demonstrations featuring food plate models.

The official ceremony was performed by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness, in the presence of Hon Ashley Ittoo, Member of National Assembly and other distinguished personalities.

**h) Mega Health Day at Moka District Council, Quartier Militaire**

The MOHW, in collaboration with the District Council of Moka, organized a Mega Health Day on 15 June 2024, at the premises of the Council in Quartier Militaire. The event featured various health-related activities, including NCD screening, blood donation, dental check-ups, and health exhibitions. The Honourable Pravind Kumar Jugnauth, Prime Minister of the Republic of Mauritius, graced the event with his presence and participated by donating blood and also undertook the screening activities.



**i) International Day of Yoga 2024**

International Day of Yoga 2024 with the theme **"Yoga for Women's empowerment"** was organized on 20 June 2024 at Cote D'Or National Sports Complex by the MOHW in collaboration with the High Commission of India. Some **1000 participants** were present for the event.



**j) Official Launching of the WHO Report on the Global Tobacco Epidemic 2023 in the Republic of Mauritius**



The MOHW in collaboration with World Health Organization launched the WHO Report on the Global Tobacco Epidemic 2023 at Maritim Resort & Spa, Turtle Bay, Balaclava on 31 July 2023 in the presence of His Excellency Prithvirajsing Roopun, GCSK President of the Republic of Mauritius, Dr the Hon Kailesh Kumar Singh Jagutpal Minister of Health and Wellness, Dr (Mrs) Anne Marie Ancia WHO Representative in Mauritius and other eminent personalities.

**k) Launching of Decentralisation in Health Region 5 "Enhancing Decentralisation in Regional Hospitals"**

Launching of Decentralisation in Health Region 5 "Enhancing Decentralisation in Regional Hospitals" was done on 14 October 2023 at the Conference Room, Victoria Hospital.

**l) Inauguration of the Health Facilities related to Autism, Speech and Audiology**

- **Inauguration of the Autism Spectrum Disorder (ASD) Unit** was held on 27 November 2023 at **Brown Sequad Mental Health Care Centre** by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness.



- **The Autism Day Care Centre, Bois Chéri** was inaugurated on 03 April 2024. The Official Ceremony was performed by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness in the presence of Dr the Hon Renganaden Padayachy, Minister of Finance, Economic Planning and Development, Dr the Hon Muhammad Ismaël Rawoo, Parliamentary Private secretary and other eminent personalities.
- **The New Speech Therapy and Audiology Department and Therapy Park at SSRN Hospital** was inaugurated on 22 March 2024. The Official Ceremony was performed by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness in the presence of Hon Sharvanand Ramkaun, Parliamentary Private Secretary and other eminent personalities.

**m) Inauguration of the Catheterization Laboratory**



The Catheterization Laboratory was inaugurated by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness and other eminent personalities on 27 November 2023 at the Trust Fund for Specialised Medical Care, Cardiac Centre, Pamplemousses.

**n) Laying of the Foundation Stones for the construction of new Health Facilities**

- **The Foundation Stone for the Renal Transplant Unit was performed at Jawaharlal Nehru Hospital** on 23 November 2023 by the Hon Pravind Kumar Jugnauth, Prime Minister of the Republic of Mauritius in the presence of Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness and other Ministers and eminent personalities.



- **The Laying of Foundation Stone ceremony of the New Bambous Area Health Centre** was held on 3 Nov 2023 at Bambous by the Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness in the presence of Hon Alan Ganoo, Minister of Land Transport and Light Rail, Minister of Foreign Affairs, Regional Integration and International Trade, Hon Marie Sandra Monia Mayotte, Parliamentary Private Secretary and other personalities.

**o) Inauguration of Community Health Centres**



➤ **The Eastern Suburb Community Health Centre** in Port Louis was inaugurated on 21 June 2024 by the Ministry of Health and Wellness. The Official Ceremony was performed by Dr the Hon Mohammad Anwar Husnoo, Vice-Prime Minister and Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness in the presence of Dr the Hon Muhammad Ismaël Rawoo, Parliamentary Private Secretary, Hon Mohamad Salim Abbas Mamode, Member of National Assembly and other eminent personalities.



➤ **The Batimarais Community Health Centre** was inaugurated on 29 March 2024 by the Ministry of Health and Wellness. The Official Ceremony was performed by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness in the presence of Dr the Hon Renganaden Padayachy, Minister of Finance, Economic Planning and Development, Parliamentary Private Secretary and other eminent personalities.



➤ **The Camp de Masque Community Health Centre** was inaugurated on 28 June 2024 by the Ministry of Health and Wellness. The Official Ceremony was performed by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness in the presence of Hon Soomilduth Bholah, Minister of Financial Services and Good Governance, Hon Zahid Nazurally, Deputy Speaker and other eminent personalities.

**p) Inauguration of Area Health Centre**



➤ **The Bramsthan Area Health Centre** was inaugurated on 10 July 2024. The Official Ceremony was performed by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness in the presence of Hon Soomilduth Bholah, Minister of Financial Services and Good Governance, Hon Sanjit Kumar Nuckcheddy, Parliamentary Private Secretary, Hon Zahid Nazurally, Deputy Speaker and other eminent personalities.

**q) Inauguration of New Medi-Clinics**

➤ **The Bel Air Rivière Sèche Medi-Clinic** was inaugurated on 26 April 2024. The Official Ceremony was performed by the Hon Pravind Kumar Jugnauth, Prime Minister of the Republic of Mauritius in the presence of Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness along with Hon Soomilduth Bholah, Minister of Financial Services and Good Governance, Hon Sanjit Kumar Nuckcheddy,

Parliamentary Private Secretary, Hon Zahid Nazurally, Deputy Speaker and other eminent personalities.



- **The Stanley Medi-Clinic** was inaugurated on 03 May 2024. The Official Ceremony was performed by the Hon Pravind Kumar Jugnauth, Prime Minister of the Republic of Mauritius in the presence of Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness along with other Ministers and eminent personalities.

**r) Inauguration of Health Track at Souillac**

The Health Track at Souillac was inaugurated on 20 March 2024 by the Ministry of Health and Wellness. The Official Ceremony was performed by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness in the presence of Dr the Hon Renganaden Padayachy, Minister of Finance, Economic Planning and Development, Hon Kavydass Ramano. Minister of Environment, Solid Waste Management and Climate Change, Dr the Hon Muhammad Ismaël Rawoo, Parliamentary Private Secretary and other eminent personalities.

**s) Inauguration of Solar PV System**

The Solar PV System at Jawaharlal Nehru Hospital was inaugurated on 03 June 2024 by the Ministry in collaboration with the Ministry of Energy and Public Utilities and the International Solar Alliance. The Official Ceremony was performed by Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness and Hon Georges Pierre Lesjongard, Minister of Energy and Public Utilities in the presence of Hon Mahen Kumar Seeruttun, Minister of Agro-Industry and Food Security, Hon (Ms) Naveena Ramyad, Minister of Industrial Development, SMEs and Cooperatives and other eminent personalities.

**t) Inauguration of State-of-the-art Specialized Hospital- National Cancer Centre**

**The National Cancer Centre** was inaugurated on 08 May 2024. The Official Ceremony was performed by the Hon Pravind Kumar Jugnauth, Prime Minister of the Republic of Mauritius in the presence of Dr the Hon Kailesh Kumar Singh Jagutpal, Minister of Health and Wellness and other Ministers and eminent personalities.





## 2.4.2 HEALTH INFORMATION EDUCATION AND COMMUNICATION UNIT

The Health Information Education and Communication (HIEC) Unit supports health promotion and education across the MOHW, other government sectors like Education, Tourism, and Environment, as well as NGOs and the community. It focuses on mass media and community interventions, developing communication strategies to encourage healthy behaviours among Mauritians. The unit produces and distributes Information Education and Communication (IEC) materials such as posters, pamphlets, banners among others to health centres and the public, and manages the ministry's Facebook page.

### ACHIEVEMENTS FOR FY 23/24

#### Mass media campaign on all health-related issues

- Co-ordinate health programmes for MBC TV, Radio, and private radio stations.
- Manages Facebook page on Public Health Issues.



#### Dengue

- 200,000 posters were produced to be distributed around the island.
- Production and broadcast of two new spots on Dengue for MBC and Facebook, and a weekly TV programme on affected localities.
- Community Engagement carried out in the North and East of the island.
- Training Session by RCCE Expert from WHO for HIEC officers.



#### Leptospirosis

- Short video and artworks produced and posted on the ministry's Facebook page.
- Dengue and leptospirosis posters, created with WHO expert were shared with stakeholders to encourage their use.

#### Community-based interventions

- Inclusive of official requests for talks from the Ministry of Tertiary Education in ZEP schools for parents, primary and secondary schools, MITD centres, the Ministry of Gender Equality, workplaces, social welfare centres, community centres, and youth centres.

#### Decentralisation of specialist services across all health regions

- Inclusive of; Production of audio and video content, Mass media campaign on MBC, Uploading videos on Facebook and Production of 7 booklets.



**PART II - SECTION E**

**TRAINING, INFRASTRUCTURE,  
PROCUREMENT AND SUPPORT  
SERVICES**





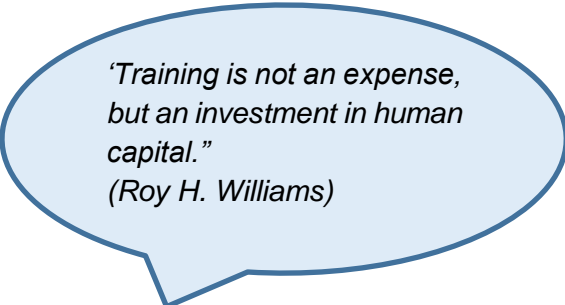
## 2.5 TRAINING, INFRASTRUCTURE, PROCUREMENT AND SUPPORT SERVICES

On a yearly basis, the public health sector is expected to take strategic directions that will naturally be requiring additional financial resources, more adapted infrastructure and proficient workforce to meet the rising needs of the population and a dynamic sector. During FY 2023-2024, Government has been making major strides in investing in the required infrastructure and equipment to better respond to the needs of the population.

Under this section, the focus is laid on the training, research, and capacity building, operating within the MOHW which serves as a cornerstone for healthcare advancement. It embodies the commitment to holistic healthcare improvement through education, research, and workforce development.

It also describes the Project Implementation Unit, the MOHW's procurement function, supply management of medical products, and information providers within MOHW, amongst others.

### 2.5.1 TRAINING, RESEARCH AND CAPACITY BUILDING UNIT (TRCBU)



*‘Training is not an expense, but an investment in human capital.’*  
(Roy H. Williams)

The Ministry has continuously invested in the training of our health personnel, ranging from nursing to medical, para-medical and non-medical staff, to ensure that they are up to date with the latest technological advances and thus provide the highest quality of care to patients. The Training, Research and Capacity Building Unit of the Ministry promotes professional

medical development and capacity building through the conduct of training programmes to upgrade and enhance and develop the skills of the personnel.

In the budget for Financial Year 2023-2024, provision for a total sum of Rs 14.9 M was made for Training which has been fully utilised to effect payment to the training institutions. It is to be noted that training is not only dispensed by the training arms of the Ministry, that is, the Mauritius Institute of Health and the Central School of Nursing but also by the Polytechnics Mauritius Ltd, University of Mauritius and Civil Service College Mauritius.

#### ACHIEVEMENTS FOR FY 23/24

##### 1. Overseas Training

This Ministry is often called upon to nominate officers to attend training abroad. The requests emanate from different Training Institutions/ Organisations like the Indian Technical and Economic Cooperation (ITEC), International Atomic Energy Agency (IAEA), WHO, SADC, Africa CDC, among others. Some 100 officers from the MOHW have received training offered by the different Training Institutions/ Organisations abroad.

Under the collaboration with the IAEA, the following were undertaken during FY23/24:

- A two-week’s Scientific Visit from 06 to 17 November 2023 at the Lee County Mosquito and Hyacinth Control in Miami, Florida, USA, with respect to IAEA Project MAR5028 entitled “Enhancing National Capabilities on the Suppression of Aedes Albopictus in an Urban locality using the Sterile Insect Techniques as part of an Integrated Vector Management Strategy” for the Head and two officers from the Vector Biology and Control Division of MOHW.
- For IAEA National Project MAR6017, entitled “Implementing Nuclear Medicine Theragnostics and Strengthening Radiation Therapy to Enhance Cancer care”, an expert Mission from 18 to 22 March 2024 by Mr Peter Knoll, Technical Officer (Medical Physicist Nuclear Medicine, NAHU) was undertaken at the Nuclear Medicine Department at J. Nehru Hospital and New Cancer Centre.
- As regard to training on equipment, the IAEA had awarded fellowship training and scientific visit to the Nuclear Medicine Department on the use of PET/CT Scanner as well as to the Radiotherapy Department on the use of their equipment.

## 2. Local Training

Institutions*	Completed Programmes	Ongoing Programmes
<b>Mauritius Institute of Health (MIH)</b>	<ul style="list-style-type: none"> <li>▪ 10 training programmes</li> <li>▪ 988 Officers were trained</li> </ul>	<ul style="list-style-type: none"> <li>▪ 13 ongoing programmes,</li> <li>▪ 266 Officers are being trained</li> </ul>
<b>Central School of Nursing (CSN)</b>	<ul style="list-style-type: none"> <li>▪ 8 training programmes</li> <li>▪ 528 Officers were trained</li> </ul>	<ul style="list-style-type: none"> <li>▪ 4 training programmes</li> <li>▪ Aiming to train 298 Officers</li> </ul>
<b>Polytechnics Mauritius Ltd</b>	<ul style="list-style-type: none"> <li>▪ 80 Midwives were trained</li> <li>▪ 1 training programme</li> <li>▪ 33 Officers were trained</li> </ul>	<ul style="list-style-type: none"> <li>▪ 33 Nursing Officers are being trained in Diploma in Mental Health Nursing.</li> </ul>
<b>University of Mauritius (UOM)</b>	N/a	<ul style="list-style-type: none"> <li>▪ 82 Officers are being trained</li> </ul>
<b>Civil Service College Mauritius</b>	<ul style="list-style-type: none"> <li>▪ 4 training programmes</li> <li>▪ 270 Officers were trained</li> </ul>	N/a

## 3. Memorandum of Understanding (MoU)/Memorandum of Agreement (MoA)

### (i) Agreement between the Ministry and University of Mauritius

The Ministry and the UOM signed the Agreement for the professional training, in a clinical setting of students in respect of BSc (Hons) Biomedical Sciences, BSc (Hons) Nutritional Sciences, BSc (Hons) Pharmacy amongst others.

Additionally, MoA was signed for the training of Trainee Medical Laboratory Technologist.

**(ii) MoU between the Ministry, UOM and University of Geneva**

The MoU was signed to facilitate the setting up of full-fledged medical undergraduate programme of 6 years duration. The Ministry to provide clinical facilities within its public hospitals.

**(iii) Agreement between the Ministry and UOM, University of Bordeaux, Centre Hospitalier Universitaire de Bordeaux, University of Reunion and Centre Hospitalier Universitaire de Reunion**

The objective of the collaboration is to enable Mauritian General Practitioners to deepen, consolidate and update their medical knowledge and competencies by acquiring theoretical and practical (specialist) training within a French university hospital setting in specialised medical institution. Currently, training is being offered in the field of 'Imagerie Médicale' and Anesthésie-Réanimation'.

**(iv) MoUs between the Ministry and Polytechnics Mauritius Ltd (PML)**

The objective is to strengthen and broaden mutual cooperation in the provision of education and training by PML to staff of the Ministry in Nursing, Allied Health, Pharmacy, Paramedical and related specialisation areas including, but not restricted to, Mental Health, Midwifery, Public Health Nursing and Oncology Nursing.

Additionally, the MoU provides for the training of both Mauritian and international students in the Nursing and Paramedical fields, so that they are directly employable and will be empowered to contribute to this professional area of activity.

## 2.5.2 THE MAURITIUS INSTITUTE OF HEALTH (MIH)



The Mauritius Institute of Health (MIH) as the Training and Research arm of the Ministry of Health and Wellness since 1989, promotes medical and health professional development and capacity building through the conduct of training programmes to upgrade, enhance and develop the skills of personnel. The MIH also caters for health systems research and acts as a focal point and resource centre for the production, exchange and promotion of health learning and health information material.

### ACHIEVEMENTS FOR FY 23/24

■ **Training Programmes, Courses and Examinations**

**(i) Completed**

- Field Epidemiology Training Programme (FETP) Frontline One Health: A first cohort (Seychelles) of 18 candidates successfully completed this 13-week Certificate Course in April 2024.
- Diplôme Universitaire (D.U.) de Soins en Médecine d'Urgence - 30 Nursing Officers successfully completed the one -year course in March 2024 (10<sup>th</sup> Cohort)

- 11 Nursing Officers completed 1-year Certificate Course in Chronic Haematological Disorders in March 2024.
- Certificate Course in Phlebotomy (6 months) ended in November 2023 with 11 successful participants
- A 3-hour Written Examination was organised, on 26 January and 14 February 2024, for 92 candidates for employment as Medical Practitioners at the level of Medical and Health Officer/Senior Medical and Health Officer on a month-to-month contractual basis in the Ministry of Health and Wellness.

**(ii) Ongoing**

- Field Epidemiology Training Programme – Regional Master Degree Programme
- Diplôme d'Hygiène Hospitalière, Gestion des anti-microbiens, et de la prévention des infections associées aux soins
- Diplôme Universitaire de Spécialisation en Médecine d'Urgence for Medical and Health Officers - is a 3-year Degree Course
- National Diploma in Diabetes Foot Care Nursing
- National Pharmacy Technician Diploma (Level 6) Course is a three-year Diploma Course.
- National Certificate Level 5 in Physiotherapy Assisting -
- National Certificate Level 5 in Community Based Rehabilitation
- Training Course for Catering Supervisors
- Training for Operation Theatre Nurses.
- Certificate in Cooking
- Training in Electro-Encephalography (EEG)
- National Certificate Level 5 in Community Health Care

**(iii) Upcoming Training Programmes/Being Developed**

- Diplôme Universitaire (D.U) de Soins et Médecine d'Urgence
- Diploma in Speech and Hearing Science
- Training in Nuclear Medicine for Health Care Assistants/Nursing Officers
- Certificate for 'Permanenciers' (SAMU)
- Certificate in Phlebotomy for 34 Health Care Assistants and Senior Health Care Assistants
- Adult ICU Nurse Training
- Specialised Nurse in Cardiology
- Upgrading of Nursing Diploma to BSc
- Oncology Nursing training

▪ **MIH - Awarding Body**

The MIH acted as Awarding Body for following institutions:

- (i) Central School of Nursing/Ministry of Health and Wellness:
- (ii) Polytechnics Mauritius Ltd (Pml)

▪ **Continuing Professional Development (CPD)**

Face to Face CPD

- 81 Doctors attended Continuing Professional Development sessions during period July 2023 to June 2024. This is an ongoing programme
- 141 Dentists attended 5 Dental CPD Sessions.

Online CPD

- 23 Participants completed two online Medical CPD (FOCAD) Courses

▪ **Research Activities**

Ongoing: Mauritius Birth Defects Registry (MDBR), Participation of Mauritius in a French/Réunion Inter regional Vector Control (STI) Related Programme, Participation of MIH in the MOHW National Ethics Committee

Upcoming: International Tobacco Control Project (MU3) in collaboration with University of Waterloo under consideration.

## 2.5.3 MEDICAL PROCUREMENT AND SUPPLY

### PROCUREMENT AND SUPPLY UNIT

The Procurement and Supply Unit of the MOHW is responsible for the planning, management, acquisition, maintenance, storage, stock control and distribution of hi-tech medical equipment, other medical equipment, surgical items, pharmaceutical products as well as other goods, works and services required. The Unit is broadly subdivided into the Pharmaceutical and Non-Pharmaceutical Sections. There is a Clearing and Forwarding Unit for customs clearances at the Airport and Seaport, a Stock Control Unit and a Procurement Unit in each of the five Regional Hospitals.

As per the recent budget, Government has approved the construction of a modern warehouse of International Standard for essential medicines and medical consumables at Cote-D'or.

### **ACHIEVEMENTS FOR FY 23/24**

This MOHW undertook procurement of Pharmaceutical and Non-Pharmaceutical items amounting to some Rs 3.9 billion for the Financial Year 2023-2024. These procurement exercises are not only highly complex but also very specialised and have to be executed in a planned and timely manner to ensure uninterrupted supply of these items as most of them are lifesaving.

➤ **Procurement of Pharmaceutical Items**

The Procurement of Pharmaceutical Items Section deals mainly with the purchase of drugs, vaccines and active pharmaceutical ingredients.

**Procurement of Pharmaceutical Products**

Financial Year	Amount Spent (Rs)
2019-2020	1,288,291,496
2020-2021	1,010,186,687
2021-2022	1,210,284,540
2022-2023	1,726,087,562
2023-2024	1,217,440,398

Source: Procurement and Supply Unit, MOHW

➤ **Procurement of Non-Pharmaceutical Items**

The Procurement of Non-Pharmaceutical Items Section deals with all procurements other than drugs and vaccines such as medical equipment, consumables, reagents, among others.

**Procurement of Non-Pharmaceutical Products**

Financial Year	Amount Spent (Rs)
2019-2020	1,472,923,164
2020-2021	1,290,321,832
2021-2022	1,219,218,398
2022-2023	2,011,732,942
2023-2024	2,691,963,647

Source: Procurement and Supply Unit, MOHW

The Procurement Section is also responsible to ensure proper storage and distribution of all items procured to relevant health institutions. The Central Supplies Division is responsible for stocking and monitoring the overall stock of pharmaceutical products and other consumables, such as gloves, masks and suture materials, amongst others.

In order to avoid cases of shortage, the Stock Control Unit monitors and appraises management of the requirements for replenishment of the stock of relevant items.

**THE CENTRAL MEDICAL PROCUREMENT AUTHORITY**

Over the years, a number of persistent issues and challenges have been encountered with regard to the procurement of the above-described medical supplies. The main ones are:

- (i) inadequate procurement planning and execution, leading to recourse to emergency or direct purchases at high costs to Government;
- (ii) delays in procurement exercises due to time taken in regard to drafting and vetting of bidding documents, evaluation of bids, approval and issue of letters of award;
- (iii) poor stock management leading to frequent over-purchase and wastages;



- (iv) lack of effective contract management as well as poor monitoring and reporting system; and
- (v) possible collusion and governance issues.

These resulted in near out of stock situations for critical and lifesaving items. In this context, a new legislation namely the Central Medical Procurement Authority (CMPA) Bill was drafted to address the matter and ensure timely supply of medicines, equipment and medical disposables.

The Central Medical Procurement Authority Act 2023 has been gazetted on 08 July 2023. It provides for the setting up of a Central Medical Procurement Authority which will, *inter alia*, be responsible to manage the overall procurement, warehousing, supply and distribution of medical supplies, ensuring that the stock level of medical supplies is maintained and same are available at all times in all public health institutions in Mauritius.

The CMPA Board was constituted on 12 March 2024, and is working on the operationalisation of the Authority, its structure and staffing.

### **STRATEGIC ADVANCEMENTS INCLUDING SIDS POOLED PROCUREMENT**

- At the 8th Meeting of Ministers of Health of SIDS of the African Region of the WHO, held in Seychelles in March 2024, **Mauritius was selected to host the SIDS Pooled Procurement Secretariat.** Mauritius is honoured to assume this important responsibility and had thanked fellow SIDS countries and Madagascar for the confidence demonstrated in us to host the pooled drugs procurement secretariat,
- The establishment of the Secretariat in Mauritius is more than just an operational advancement, it is a beacon of hope and collaboration for small island nations worldwide and will be a centre for procurement excellence, a hub for knowledge exchange, capacity building, and the forging of lasting partnerships. It is expected that the SIDS Pooled Procurement Secretariat will be fully operational in Mauritius by May 2025, ready to serve as a platform for collaborative efforts and shared successes.
- On 27 May 2024, Mauritius was the first country to sign the long-term agreement with Angel Biogenics Pvt Ltd on the supply of pharmaceutical products, as part of the SIDS pooled procurement initiative to reduce medicine procurement costs and improve access to quality and effective medicines for its population.
- **Ensuring continuous availability of medications:** The Ministry signed an agreement on 28 February 2024 with M/s HLL Lifecare, which was designated by the Government of India as the nodal agency to implement the Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) Scheme. The PMBJP scheme, an initiative of the Government of India, is successfully being implemented within India by the Pharmaceutical and Medical Devices Bureau of India (PMBI). An extension of this initiative was proposed by the Government of India for the supply of cost-effective quality medicines, consumables and surgical items to interested key partner countries in Africa and Latin America. **Mauritius is the first country outside India to be implementing this scheme.**

## 2.5.4 HEALTH INFRASTRUCTURE



The Ministry has embarked on the implementation of numerous health infrastructural projects whereby new, state-of-the-art and upgraded health infrastructure are being provided for the improvement of health services in Mauritius.

The Project Implementation Unit (PIU) is responsible for the proper implementation of minor infrastructural works and capital projects. Consultancy Services for the implementation of major public health infrastructural projects have been entrusted to Hospital Services Consultancy Corporation (India) Ltd., a Government of India enterprise under a G-2-G Agreement with the Government of India. The Ministry of National Infrastructure and Community Development (MNICD) also provides technical expertise for the implementation infrastructural projects.

For Financial Year 2023-2024 some Rs 1.8 billion were budgeted for health infrastructural works for a total Project Value of around Rs 8.8 billion. These include minor upgrading works, extension of existing services, paintings, renovations and waterproofing.

Table V: Status of Implementation of Major Infrastructural Projects

S/n	Project	Status as at 30 June 2023	Status as at June/July 2024
1	<b>Sir Anerood Jugnauth Hospital (Phase 1)</b>	Progress of works at 73%.	Progress of works is 98%.
2	<b>National Cancer Centre</b>	Infrastructural Works Completed. Acquisition of Furniture and Equipment in progress.	<i>Completed. Inaugurated in May 2024.</i>
3	<b>New Eye Hospital</b>	Progress of works at 22%.	Progress of works is 70%.
4	<b>Extension and Renovation of the Pharmacy at J. Nehru Hospital</b>	Tender Stage.	Progress of works is 45%.

5	<b>New Renal Transplant Unit at J. Nehru Hospital</b>		Progress of works at 3%.	Progress of works is 42%.
6	<b>7 New Medi-Clinics</b>	a) Stanley	Progress of works at 72%.	Completed. Operationalised in May 2024.
		b) Coromandel	Completed. Operational since February 2023.	-
		c) Bel Air	Progress of works at 88%.	Completed. Operationalised in April 2024.
		d) Quartier Militaire	Progress of works at 82%.	Completed. Operationalised in December 2023.
		e) Chemin Grenier	At tender preparation stage.	At design stage.
		f) Grand Bois	Progress of works at 32%.	Completed. Operationalisation will be in July 2024.
		g) Rivière du Rempart	At design stage.	At design stage.
7	<b>8 New Area Health Centres</b>	a) Henrietta	At tender preparation stage.	At tender preparation stage.
		b) Cap Malheureux	Letter of Award issued in May 2023.	Progress of works is 75%
		c) New Grove	Letter of Award issued in May 2023.	Progress of works is 80%
		d) Plaine Magnien	At design stage.	At design stage.
		e) Curepipe	At tender preparation stage.	Progress of works is 25%
		f) Bramsthan	At tender stage	Completed. Operationalisation in July 2024.
		g) Bambous	At tender stage.	Progress of work is 45%
		h) Wooton	Not applicable	At design stage.
8	<b>11 New Community Health Centres</b>	a) St François Xavier	Progress of works at 76%.	Completed. Operationalised in June 2024.
		b) Roche Bois	Tender documents under preparation to complete outstanding works.	At design stage to complete outstanding works.
		c) Grand Bay	Completed. Operationalised in July 2022.	-
		d) Pointe aux Sables	Completed. Operational since February 2023.	-
		e) Trou d'Eau Douce	Completed. Awaiting inauguration.	Completed. Operationalised in July 2023.

	f) <i>Camp de Masque</i>	<i>Progress of works at 40%.</i>	<i>Completed. Operationalised in June 2024.</i>
	g) <i>Baie du Cap</i>	<i>At design stage.</i>	<i>At design stage.</i>
	h) <i>Case Noyale</i>		
	i) <i>Piton</i>		
	j) <i>Ecroignard</i>		
	k) <i>Camp Thorel</i>		
	l) <i>Tamarin</i>		

Source: Project Implementation Unit, MOHW

### Health Cluster

The Ministry embarked on four (4) projects in the Healthcare and Pharmaceutical sector at the Côte d'Or Integrated Smart City by Landscape (Mauritius) Ltd, of which, three (3) were under the Build Operate Transfer (BOT) scheme through a Public Private Partnership mechanism. The status of these projects are as follows:

<b>Project</b>	<b>Description</b>	<b>Status as at 30 June 2023</b>
<b>New Warehouse for Pharmaceutical and Other Medical Products</b>	<p>A modern Warehouse is being constructed and will be operated in line with best storage practices and in accordance with the guidelines issued by the World Health Organization and comprising:</p> <ul style="list-style-type: none"> <li>○ Proper Racking systems and Material Handling Equipment to ensure appropriate racking and material handling equipment that would facilitate First Expiry First Out (FEFO) inventory management systems.</li> <li>○ A modern Warehouse Management System with appropriate software, bar coding equipment, and radio frequency communications to provide computerised process management and inventory control.</li> </ul>	<p>The Project Inception and Draft Project Structuring Report were completed by the previous Transaction Advisor which wound up. Appointment of a new Transaction Advisor was being finalised.</p>
<b>New Cardiac Centre</b>	<p>A 225 bedded state-of-the-art Cardiac Hospital having new specialties such as paediatric and congenital cardiac surgeries, interventional paediatric and congenital cardiology, interventional and open vascular surgery, thoracic surgery, hybrid cardiac surgery, electrophysiology, round the clock Primary Coronary Intervention (PCI), PCI, Extracorporeal Membrane Oxygenation (ECMO) facilities and Transcatheter Aortic Valve Implantation (TAVI).</p>	<p>The Project Inception and Draft Project Structuring Report were completed by the previous Transaction Advisor which wound up. Appointment of a new Transaction Advisor was being finalised.</p>

<p><b>New National Health Laboratory</b></p>	<p>The NHLS shall be the principal public health laboratory of the Republic of Mauritius and will provide quality laboratory investigations and technical coordination of the entire network of health-related laboratories. It will be designed according to International infrastructural and ISO standards which will include BSL-3 level Laboratory and will aim to become a Supra-National Reference Laboratory in the region.</p>	<p>The Project Inception and Draft Project Structuring Report were completed by the previous Transaction Advisor which winded up. Appointment of a new Transaction Advisor was being finalised.</p>
<p><b>AYUSH Centre of Excellence</b></p>	<p>The AYUSH Centre of Excellence would be implemented in collaboration with the Indian Authorities and would be an eco-friendly facility comprising the following main components:</p> <ul style="list-style-type: none"> <li>○ A treatment Centre of Excellence;</li> <li>○ A training college and research centre;</li> <li>○ A wellness centre; and</li> <li>○ Promotion of Indian AYUSH medicines and products.</li> </ul>	<p>The feasibility study and concept proposal have been finalised. A Detailed Project Report has also been finalised for implementation of the Project in two (2) Phases.</p>

Source: Project Implementation Unit at MOHW

**Extension and upgrading of Health Institutions**



Furthermore, the Ministry has also embarked on more than 200 projects of upgrading of the existing health infrastructures which include upgrading works, leakages, extension of existing services, paintings, and renovations.



## 2.5.5 PLANNING, FINANCE AND INTERNATIONAL COOPERATION (PFIC) UNIT

The PFIC Unit is responsible for the effective monitoring and implementation of measures for the health sector as outlined in the Government Programme 2020-2024 and annual budgets of the Ministry of Health and Wellness (MOHW). The Unit is mainly involved in the:

- **Preparation and Monitoring of Budget:** Developing, allocating, and monitoring the MOHW's budget to ensure financial resources are effectively utilized.
- **Audit and Public Accounts Committee:** Conducting regular audits and engaging with the Public Accounts Committee to ensure accountability and transparency.
- **Bilateral-Regional-Multilateral Cooperation:** Engaging in international cooperation to enhance health service delivery through shared knowledge and resources.
- **Human Rights Matters:** Ensuring all health initiatives respect and promote human rights principles.

The unit also oversees the projects/strategies that are being implemented by the different departments under its purview including:

- Handling of financial transactions and budgeting for the MOHW by the Finance Section.
- Monitoring of progress on the implementation of the HSSP 2020-2024, Health Financing and Costing of Services by the Health Economics Unit.
- Production of Health Records by the Health Records Department.
- Development of Medical and Statistical Data by the Health Statistics Unit.
- Establishing and maintaining robust internal controls to safeguard the ministry's assets and ensure financial integrity by the Internal Control Unit.

### ACHIEVEMENTS FOR FY 23/24

#### A. Ensuring Effective financial management and strategic planning

##### 1. Preparation, Submission and Monitoring of MOHW Budget

- Monitoring of Budget implementation for Financial Year 2023-2024: Ensured the budget was effectively executed and aligned with the Ministry's goals and objectives.
- Preparation and Submission of Budget Proposals for FY 2024-2025: Developed and submitted comprehensive budget proposals for the upcoming fiscal year to secure necessary funding and resources.

##### 2. Regular Updating of the National electronic-Project Management Information System (e-PMIS)

- Regularly updated the ePMIS platform to reflect the progress of around 40 capital projects and 20 non-infrastructure measures, ensuring transparency and accountability in project implementation and resource utilization.



## B. Addressing audit findings

The Planning and Finance Unit has diligently responded to the Management Letters and Reference Sheets issued by the National Audit Office on the following areas:

1. **Warehousing of Pharmaceutical and Medical Disposables:** Addressed concerns and implemented measures to improve warehousing practices and ensure proper storage of pharmaceutical and medical disposables.
2. **Construction of Stanley and Coromandel Medi-Clinics:** Provided updates and clarifications on the progress, challenges, and measures taken to ensure timely and quality construction of these Medi-Clinics.
3. **Poor Stock Management of Pharmaceutical Drugs:** Implemented corrective actions to enhance stock management practices, ensuring the availability and proper tracking of pharmaceutical drugs.
4. **Laboratory Information Management System:** Responded to queries regarding the implementation and effectiveness of the Laboratory Information Management System, including steps taken to address any identified issues.
5. **Infrastructure Development for Regional Hospitals - New Flacq Hospital:** Detailed the progress and plans for the development of the New Flacq Hospital, highlighting steps taken to ensure successful completion.
6. **MRI Exams - Service Delivery:** Addressed concerns related to the delivery of MRI services, including measures to improve service quality and reduce waiting times.
7. **Upgrading of Health Infrastructures - Leakages:** Provided updates on the efforts to upgrade health infrastructures, specifically addressing issues related to leakages and ensuring robust solutions are in place.
8. **ENT Healthcare Service Delivery:** Responded to findings on ENT healthcare service delivery, outlining improvements and initiatives undertaken to enhance service provision in this area.
9. **Governance Issues - Non-compliance with Legislations:** Addressed governance issues raised, including steps taken to ensure compliance with relevant legislations and improve overall governance within the health sector.
10. **Follow-Up of Matters Raised in Previous Audit Reports:** Provided comprehensive updates on the follow-up actions taken in response to matters raised in previous audit reports, demonstrating a commitment to continuous improvement and accountability.

## C. Upscaling Bilateral-Regional-Multilateral Corporation

Donor Agency	Details on Assistance	Value of Donation
Government of Japan	<p><b>Implementation of the 2nd Grant under the Economic and Social Development Programme</b></p> <p>Under the 2nd Grant of the Economic and Social Development Programme, the Planning and Finance Unit has successfully provided the following medical equipment for the Ministry and the Trust Fund for Specialised Medical Care:</p>	JPY 550 million

	<ol style="list-style-type: none"> <li>1. <b>Three Operating Tables:</b> Acquired to enhance surgical capabilities and improve patient care during operations.</li> <li>2. <b>Six Anaesthesia Machines:</b> Procured to ensure safe and effective anaesthesia administration for various surgical procedures.</li> <li>3. <b>One Ultrasound Scanner for Echocardiology:</b> Provided to improve diagnostic capabilities in cardiology, allowing for detailed heart imaging.</li> <li>4. <b>Eight Bedside Monitors:</b> Installed to continuously monitor patients' vital signs, ensuring timely interventions and improved patient outcomes.</li> <li>5. <b>Twenty Electric Syringe Pumps:</b> Acquired to administer precise and controlled medication dosages, enhancing patient safety and treatment efficacy.</li> <li>6. <b>Two Electric Surgical Knives:</b> Procured to assist in precise and efficient surgical procedures, reducing operating times and improving surgical outcomes.</li> <li>7. <b>Five Ventilators:</b> Installed to support patients with respiratory difficulties, ensuring adequate ventilation and improved respiratory care.</li> <li>8. <b>One Electrosurgical Unit for Endoscope:</b> Acquired to assist in endoscopic procedures, providing precise cutting and coagulation capabilities.</li> <li>9. <b>One Endoscope for Gastroenterology:</b> Provided to improve diagnostic and therapeutic capabilities in gastroenterology, enabling minimally invasive procedures.</li> </ol> <p>These equipments will significantly enhance the medical capabilities of the Ministry and the Trust Fund for Specialised Medical Care, contributing to improved healthcare delivery and patient outcomes.</p>	
<p><b>United Nations Development Programme</b></p>	<p>A Memorandum of Understanding (MoU) has been signed between the Ministry of Health and Wellness and the Ministry of Environment, Solid Waste Management, and Climate Change for the implementation of the Global Environment Facility (GEF) funded project, “Indian Ocean Regional Project – Mauritius – Implementation Sustainable Low and Non-Chemical Development in SIDS (ISLANDS)”. This project is supported by the GEF through the United Nations Development Programme (UNDP) and aims to achieve the following objectives:</p> <ul style="list-style-type: none"> <li>▪ <b>Upgrade the Mauritius Network Services System that is being used by the Dangerous Chemicals Control Board to issue import permits and clearances.</b></li> <li>▪ <b>Implementing a Centralised Treatment Facility for Healthcare Wastes</b></li> </ul> <p>This MoU signifies a collaborative effort to enhance environmental and health safety standards in Mauritius, aligning with the goals of sustainable development and improved public health outcomes.</p>	<p>USD 1,394,450 from GEF-7 USD 925,000 from MOHW <b>(co-financing)</b></p>

Source: Planning, Finance, International Cooperation, MOHW

#### D. Upholding and Advancing Human Rights within the health sector

The Planning and Finance Unit has been actively involved in the compilation and consolidation of inputs relating to:

##### (i) Human Rights Division:

Collected and consolidated inputs from various sections of the MOHW for submission to the Human Rights Division of the Ministry of Foreign Affairs, Regional Integration, and International Trade.

##### (ii) International Commitments:

Collected and consolidated inputs from various sections of the MOHW to address international commitments undertaken by Mauritius, particularly in relation to the following bodies and treaties:

- **African Commission on Human and People's Rights:** Provided updates and data on health-related human rights issues pertinent to the African context.
- **Office of the United Nations High Commissioner for Human Rights (OHCHR):** Contributed health-related information for reports and submissions to the OHCHR.
- **United Nations Human Rights Treaties:** Prepared detailed responses and updates concerning:
  - **Convention on the Rights of Persons with Disabilities (CRPD):** Highlighted measures taken to improve healthcare accessibility and services for persons with disabilities.
  - **Convention on the Rights of the Child (CRC):** Reported on initiatives aimed at enhancing child health and well-being.
  - **Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW):** Provided data on efforts to ensure women's health rights and access to healthcare services.
  - **International Covenant on Economic, Social and Cultural Rights (ICESCR):** Updated on actions taken to uphold the right to health and related social and economic rights.

##### (iii) Formulation of the National Human Rights Action Plan 2023-2030:

- Contributed to the development of the National Human Rights Action Plan for 2023-2030 by providing health-related insights and recommendations.
- Ensured that the action plan incorporates comprehensive strategies to promote and protect health-related human rights in Mauritius.

## 2.5.6 HEALTH RECORDS DEPARTMENT

The Health Records Department, the primary point of contact for patients at health facilities, operates under the leadership of a Chief Health Records Officer at headquarters, a Senior Health Records Officer at hospitals and a workforce of around 375 officers providing 24-hour support.

This department plays a key role in patient registration and acts as the custodian of medical records, ensuring compliance with data protection laws and information governance. Additionally, it oversees health information management, from data collection to converting it into sound information.



A major focus for FY 23/24 has been on E-Health Software Requirements Specification (SRS) and collaboration with suppliers to implement the core Patient Administration System module, a key module within this department.

### ACHIEVEMENTS FOR FY 23/24

- **Government Health Services Statistics Report:** The forty-ninth volume of the report detailing activities of major health service departments of public health institutions for 2023 has reached finalisation stage. This yearly publication is a useful tool for decision-making and policy formulation to administration while also supporting research projects.
- **Records Retention Schedule:** governing retention date of registers and medical documents used in public health institutions is presently at printing stage. This first-of-its-kind document will be circulated to all Heads of Service Departments to regulate and standardise disposal of redundant documents and management of storage space at public health institutions.
- **Metadata Dictionary:** In collaboration with the Health Statistics Department, a Metadata Dictionary is being developed to simplify medical statistics jargon for the public and to standardize data collection and reporting. This initiative aligns one of the actions recommended by the present HSSP.

### 2.5.7 HEALTH STATISTICS UNIT

The Health Statistics Unit, led by the Chief Health Statistician, provides evidence-based data on health care delivery systems of the public and private sectors in Mauritius and Rodrigues. This includes population and vital statistics, mortality, morbidity, health services, and systems. The data support local, regional, and international reporting, policy formulation, strategy design, and health performance evaluation.

Furthermore, health indicators are used to monitor progress towards national health targets including those formulated in the HSSP 2020-2024 and the Sustainable Development Goal 3. The annual Health Statistics Reports are essential scientific documents for studying the population's health evolution since independence.

## ACHIEVEMENTS FOR FY 23/24



Data from the Health Statistics Unit for FY 2023-2024 are available on the Statistics Mauritius (SM) website and in SM's annual reports, including Environment, Gender, and Demography Statistics.

- The Unit has contributed to health-related SDG indicators included in the complete SDG dataset maintained by SM and collaborated with the Health Economics Unit on the SDG Voluntary National Review Report 2024.



Data from the Unit have been used for Parliamentary Questions, reporting Key Performance Indicators in the Budget 2023-2024, and situational analyses for MOHW Action Plans.

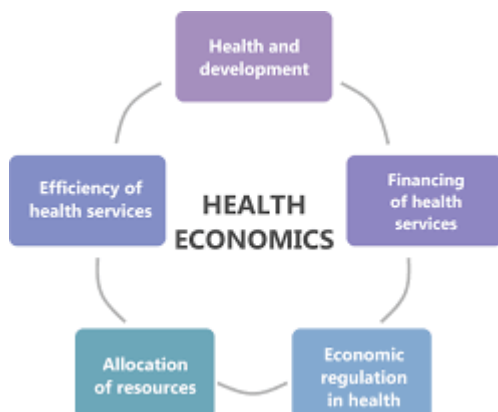
- The Unit also worked with the NCD, Health Promotion, and Research Unit on statistics for the International Conference on Diabetes, Obesity, and Associated Diseases.
- The Unit also managed and analyzed data for research projects such as the Integrated Biological and Behavioural Surveillance (IBBS) Surveys among high-risk groups, and supported the design and implementation of the Abortion Survey and the Out-of-Pocket Expenditure on health Survey.



In order to institutionalize a framework for the private sector to routinely submit data and standardize data collection mechanism across public and private sectors, the Unit redesigned statistical return forms for private clinics and developed customised templates for the National Health Workforce Account.

- Data on activities and services provided by the different departments from the Ministry and the private sector are compiled by the Health Statistics Unit and published in the Annual Health Statistics Report. During the FY 2023-2024, the unit has been compiling data for 2023 to be published in the coming report.

## 2.5.8 HEALTH ECONOMICS UNIT



The Health Economics Unit (HEU) is involved in a wide range of projects and strategies that are being implemented by the MOHW including, development of Health Financing Indicators, Annual Reports on Performance, costing of activities under different action plans and determination of hospital services unit cost and monitoring of progress on implementation of the Health Sector Strategic Plan (HSSP) 2020-2024 and the Sustainable Development Goal 3 by Programme Officers.



Nevertheless, the main function of HEU remains the conduct of health economic analysis for the formulation of health projects. During the FY 2023-2024, the Unit was manned by a Lead Health Analyst, two Senior Health Analysts and two Support Officers.

## ACHIEVEMENTS FOR FY 23/24

### Sustainable Health Financing Engagement

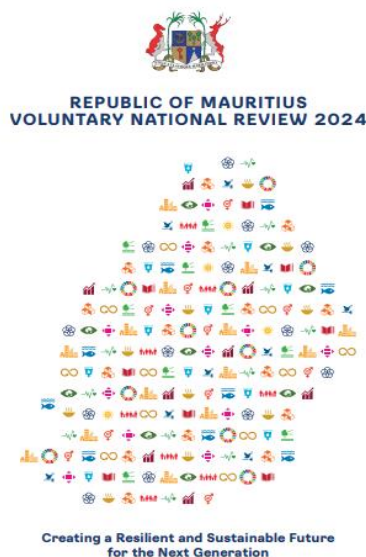


The HEU was designated technical focal point for the National Health Financing Dialogue engagement under the African Leadership Meeting Declaration on investing in Health. Under the guidance of the SADC/AU/GF experts, the HEU has been involved in the preparation of the concept note, scoping reports and meeting reports. The Planning and Finance Unit and the NHPRU of the MOHW have also braced the organisation of this high-level event.

The deliberations over the four days of the NHFD Pre-Dialogue held from 3 to 6 July 20203 laid the foundation for prioritisation of proposed activities and basis for commitments that were taken during the main National Health Financing Dialogue held from 11 to 13 September 2023.

During the High-Level National Dialogue, public and private stakeholders were regrouped to brainstorm, reflect and reach a consensus for the drafting of a Statement on National Health Financing. The HEU has worked on the prioritisation and formulation of the Statement together with the international and national stakeholders. The Statement was delivered by the Hon Minister of Health and Wellness on the last day of the NHFD. (Please refer to section 1.14 for more information on the NHFD)

### Formulation of the Voluntary National Review 2024- Chapter on SDG 3



As part of its follow-up and review mechanisms, the 2030 Agenda for Sustainable Development encourages member states to undertake voluntary national reviews (VNRs) which aim to facilitate the sharing of experiences, including successes, challenges and lessons learned, with a view to accelerating the implementation of the SDG 2030 Agenda.

These national reviews are expected to serve as a basis for the regular reviews by the high-level political forum (HLPF), meeting under the auspices of Economic and Social Council (ECOSOC) of the UN.

The 2024 Voluntary National Review (VNR) report of the Republic of Mauritius was coordinated and prepared by the Ministry of Foreign Affairs, Regional Integration and International Trade (MFARIIT). It highlights the

achievements, experiences as well as the gaps and challenges identified in the



implementation of the SDGs since 2019. The aforesaid report was presented to the High-Level Political Forum (HLPF) of the ECOSOC on 17 July 2024 in New York by the Ambassador of the Republic of Mauritius to the United States.

The HEU has worked on the compilation of information from different units and the drafting of one of the Chapters of the VNR 2024, namely **SDG 3: *Ensure Healthy Lives and Promote Well-Being For All At All Ages.***

[https://foreign.govmu.org/Documents/2024/VNR/UN\\_VNR\\_2024\\_A4\\_FA\\_WEB1.pdf](https://foreign.govmu.org/Documents/2024/VNR/UN_VNR_2024_A4_FA_WEB1.pdf)

### **Development of Health Financing Information Indicators**

In view to obtain updated and more recent estimates on Household OOP Expenditure on Health, a new data collection exercise was planned and undertaken for the Island of Mauritius. The main objective of the study was to capture all expenditure incurred on treatment of diseases including seasonal diseases by the households over a period of one year.

In this respect, an OOP Survey Management Team was set up under the purview of the Permanent Secretary (Planning and Finance) with officers from NHPRU, HEU and Health Statistics Unit, respectively.

The HEU has been involved in the planning of the different stages of the survey, the preparation of the OOP Questionnaire, the OOP Survey Protocol and a comprehensive set of Guidelines for Interviewers. The field activities of the survey were under the responsibility of the NHPRU. The data cleaning and analysis stage of the survey has been reached for Island of Mauritius. The same survey will be replicated in Rodrigues in due course.

The estimates obtained from the OOP Survey will be used for the upcoming National Health Accounts (NHA) 2024 study and will also be very useful to provide updates for WHO Global Health Expenditure Database.

Additionally, the HEU has also initiated the non-stochastic surveys for NHA 2024 with the objective to collect data with some 80 different health providers and financing agents from both the public and private sectors.

### **Monitoring of Progress on the Implementation of the Health Sector Strategic Plan 2020-2024:**

The HSSP 2020-2024 makes provision for the submission of reports at regular intervals on the status of progress made on the implementation of Strategic Actions. In this respect, 21 Thematic Working Groups (TWGs) have been set up at the level of the Ministry. These groups are required to act as coordination mechanisms and develop Operational Plans for the 26 Strategic Goals of the HSSP 2020-2024. 26 Operational Plans have thus been elaborated with over 700 activities identified by the different TWGs. The HEU has the overall responsibility to liaise with these TWGS, obtain the status of implementation of the operational plans and the preparation of the progress report to be presented to Cabinet. The third progress report was presented to Cabinet during the FY. The HEU has also initiated the collection of information with respect to the fourth progress report.

**Formulation of the Annual Report on Performance for the Ministry:** The HEU had the responsibility to liaise with all the different units of the MOHW and to take stock of the achievements, challenges, trends and way forward for the Ministry. Based on the information received from the different units, **the Annual Performance Report for the FY 2022-2023,**

was formulated and submitted to the Ministry of Finance, Economic Planning and Development during the period under review.

**Implementation of Hospital Services Costing Project:** The HEU has been liaising with the consultant from African Development Bank (AfDB) under the technical assistance (TA) for the Hospital Services Costing Project. Subsequently, a second field mission was undertaken by one AfDB consultant in July 2023 to finalize the TA. In this context, during the FY 2023-2024, the HEU had recurrent working sessions with relevant personnel at Hospital level for data collection with respect to a sample of hospital services.

In addition, the HEU has also provided estimate costing for retinopathy and cardiac services. The costing of laboratory fees and radiography services are in progress. These estimated costings provide a basis for decision-making by Management.

**Estimated Costing of different Action Plans:** A number of Action Plans and Policies have been developed by MOHW including the Risk Communication and Community Engagement (RCCE), Antimicrobial Resistance (AMR) and COVID-19 Transition Strategic Plans.

Based on the requirements of the user departments, the estimated indicative costing exercises were undertaken for the activities identified under these action plans.

#### **Determination of Schedule Fees for Food Seizures**

The HEU has supported the Mauritius Food Standards Agency for the determination of proposed fees that will be applicable for the disposal of seizures made at food operators' premises. The different scenarios were analysed and progressive charges were proposed based on the volume and type of seizures.

**Participation in the Health Financing Workshop for SADC Region:** The HEU was designated to showcase the health financing strategies of the Republic of Mauritius and to act as panellist at an International Conference in Lusaka, Zambia.

#### **Other Activities**

- Support to Planning and Finance Unit for Budget Preparation including formulation of Strategic Overview.
- Preparations of inputs for different Ministries, International Bodies and Attending webinars (e.g., WHO, AU Agenda 2063, WTO, SADC, WB, Trade-in -Services).
- Preparation of inputs on Human Rights and submission to the Planning and Finance Unit.
- Filling of survey questionnaires from different institutions.
- As regards to health care financing, with the support of the WHO, the Health Financing Progress Matrix was being finalized.
- Preparations of inputs for internal stakeholders on areas such as mental health, Universal Health Coverage, procurement and WHO Biennium.
- Preparation of inputs for the World Health Assembly and other important meetings.

## 2.5.9 DEMOGRAPHIC/EVALUATION UNIT

The Demographic/Evaluation Unit oversees the monitoring and evaluation of the national family planning program in Mauritius. It gathers family planning statistics from all government health service points and two key non-governmental organizations, Action Familiale and the Mauritius Family Planning and Welfare Association. Moreover, the unit has played a crucial role in assisting the Government in setting targets for its population policy.

### ACHIEVEMENTS FOR FY 23/24



Yearbooks, monthly bulletins, and other reports are published, providing data for program managers, policymakers, and researchers. The **Family Planning & Demographic Yearbook** presents data both on population trends and family planning use and accessibility, among others, for Islands of Mauritius and Rodrigues.



Family planning data is collected from two youth-friendly service points, with reports prepared in collaboration with the Sexual and Reproductive Health (SRH) Coordinator in view to extend services to additional tertiary institutions.



The population size of each government health service point's catchment area is updated annually and published in the yearbook for service planning.



Preparations for the 2024 **Contraceptive Prevalence Survey (CPS)** include a paper-based questionnaire developed with key stakeholders. This survey will assess the family planning program's strengths and weaknesses and provide updated contraceptive use data.



**World Population Day**, celebrated on July 11, 2023, focused on the theme "Unleashing the power of gender equality." A workshop on adolescent and SRH was held for health personnel to raise awareness and address key issues.



The Unit coordinated all activities related to the formulation of the national population policy by a United Nations Population Fund (UNFPA) team, which addresses four socio-demographic trends in Mauritius: leveraging the high proportion of workers, supporting young families, preparing for an ageing society, and promoting social justice and environmental sustainability.

#### UNFPA activities for FY 2023/2024 included:

- Sensitization workshops on sexual and reproductive health for youth.

- Training for healthcare providers on breastfeeding, child health, cancer screening, gender-based violence, STIs, infertility, healthy aging, and dementia.
- Conducting the contraceptive prevalence survey with UNFPA support.

In 2023, a UNFPA consultant prepared a report on the ten-year review of the Addis Ababa Declaration on Population and Development (AADPD), whereby this unit coordinated stakeholder inputs on the AADPD's implementation in Africa beyond 2014 and the International Conference on Population and Development (ICPD) Plan of Action.

## 2.5.10 HOSPITAL ADMINISTRATION UNIT

The Hospital Administration Unit is responsible for the overall management of hospital services, playing a vital role in the efficient operation of public healthcare facilities. This unit ensures the delivery of quality patient care and handles the complex administrative tasks necessary for the smooth running of all public health institutions.

The Chief Hospital Administrator (CHA) is the foremost position in the hospital administration cadre and 75 grades of staff and around 4850 staff fall under the latter's purview. The Unit is also supported by:



- 2 Deputy Chief Hospital Administrators
- 5 Regional Health Services Administrators
- 11 Hospital Administrators, and 16 Hospital Administrative Assistants

Together, these administrators ensure the seamless operation of hospital services, including oversight of cleaning, security, and laundry services, as well as the management and supply of equipment, food supplies, stores, clothing, bedding, utilities, and other logistical support.

### ACHIEVEMENTS FOR FY 23/24



**Implementation of Innovative Packed Meals:** In April 2024, the packed meals project was implemented for patients in the Pediatric, Postnatal, and Prenatal Wards at all five regional hospitals. Patients are able to consume their meal which is **served in a more hygienic and appealing manner, as per their convenience.** This food service also facilitates the task of Nursing Officers by **saving time.**

- **Fostering the efficient use of energy in health facilities:** The MOHW had engaged with the Energy Efficiency Management Office (EEMO) for an energy audit at SSRNH,

AGJH, VH, JHN, Souillac Hospital, BSMHCC, Central Supplies Division and BCH. In this respect, the Unit provided full support to the EEMO for undertaking this exercise which covers the verification, monitoring and analysis of use of energy, including the submission of a technical report containing recommendations for improving energy efficiency with economic and cost analysis and an action plan to reduce energy consumption. The draft final report on energy audit exercises at hospitals was received in May 2024.

- In accordance with IPC recommendations, yellow, black, and red waste bins in various sizes were procured for hospitals.



Renovation and upgrading projects were undertaken through the COVID-19 Fund in all health regions. Regional Health Services Administrators posted at 5 Health regions identified priority projects for upgrading and renovation of health centres in their respective health region. Those projects were implemented directly by the maintenance team / contracted at the level of hospitals or executed under Framework Agreement of Ministry of National Infrastructure and Community Development (MNICD).

- A Day Care Autism Centre was set up at BSMHCC in April 2024. The setting up of a Day Care Autism Centre at BSMHCC required the transformation of a building to meet the requirements and needs of Autism patients. The administrators contributed in the project finalisation, implementation and monitoring until its completion.



An Oxygen Generator Plant was procured for the ENT Hospital and Dry-cleaning services were operationalized at the National Cancer Hospital and ENT.

#### Day to day Management of Hospital Services:

- From July 2023 to June 2024, hospitals had prepared and served around **3,094,000** meals (breakfast, lunch and dinner) to patients and **852,204** meals to all eligible staff.
- The Unit managed the collection and disposal of **around 900 tons** of healthcare wastes generated by the public health institutions.
- The Unit also supervised the replacement of **around 72% fluorescent tube lightings** by LED lighting at our hospitals.
- Approximately **2,832,000 units** of linen items were sent for Dry Cleaning Services from our health institutions.

#### Collaboration with WHO:

- The installation of a gas piping system in two post-COVID-19 Rehabilitation Wards at JNH was fully funded by WHO.
- The setting up of Isolation Wards at four regional hospitals (Dr A.G. JH and SSRNH is completed while JNH and VH is currently in progress).
- New flooring has been installed in the Surgical ICU at Dr. A.G. Jeetoo Hospital.

**PART III**

**RISK MANAGEMENT,**  
**IMPLEMENTATION AND**  
**MONITORING OF KEY ACTIONS**  
**AND BUDGET MEASURES ON**  
**HEALTH SECTOR**



## 3.1 RISK MANAGEMENT, CITIZEN ORIENTED INITIATIVES AND GOOD GOVERNANCE

### Risk Management



Management of risks lies at the heart of good governance debates together with financial reporting, auditing, effective communication and decision-making process.

Risk management is the identification, evaluation, and prioritization of risks followed by coordinated and economical application of resources to minimize, monitor, and control the probability or impact of the risks or to maximize the realization of opportunities.

The achievement of risk Management objectives, such as: compliance with laws, regulations, and acceptable ethical behaviour; internal control; information and technology security; sustainability; and quality assurance is crucial for the Ministry.

### Risk Management Framework



As announced in the Budget Speech 2021/2022 and with reference to Circular No 8 of 2021 Guidelines for the establishment of Risk Management in the Public Sector which is based on the essence of the 'ISO 31000- Risk Management' and best international practices, from the Ministry of Finance, Economic Planning and Development, all Ministries/Departments are required to establish a formal Risk Management Framework (RMF) for the management and mitigation of risks.

The Risk Management Committee (RMC) for the MOHW was established in July 2023, co-chaired by two Permanent Secretaries and comprising seven members and one Secretary. The members represent various departments, including Hospital Administration, Human Resources, and Procurement.

The RMF is being developed to guide the creation, implementation, monitoring, review, and enhancement of risk management across the Ministry and Public Health Institutions. The RMF will apply to all MOHW divisions, units, sections, and functions. In this line, a presentation on the RMF was conducted at Dr. J. Nehru Hospital, Victoria Hospital, and SSRN Hospital for the respective Head of Sections to take cognizance of its importance.

The RMC proposed a list of Risk Owners, which includes Head of Sections at the Head Office and five Regional Health Directors and engaged in discussion on the RMF and Risk

Management Policy. The Risk Management Policy, signed by the Ministry's Accounting Officer, mandates the integration of risk management into the Ministry's culture, decision-making, programs, practices, business planning, and performance reporting.

In this respect, the Director, Internal Control made a presentation on the Risk Management Framework at the Ministry on 22 Nov 2023. Besides, given the Ministry's extensive scope and complex activities, an external consultant from the Ministry of Finance and Economic Development (MOFED) will be requested to assist in preparing the RMF.

Presently, Risk Management is carried out through the Internal Control Unit, the Audit Committee and the Anti-Corruption Committee.

### Internal Control Unit

The Internal Control provides independent and objective assurance and advice on the adequacy and effectiveness of governance, risk management and control processes in order to enhance and protect the organizational value. It thus helps the Ministry in accomplishing its objectives by bringing a systematic and disciplined approach to evaluate and improve the effectiveness of these vital processes.

After consultation with the Accounting Officer, Audit Committee and other stakeholders, a risk based internal audit plan was prepared in line with the Ministry's strategies, objectives and associated risks for the FY 2023/24.

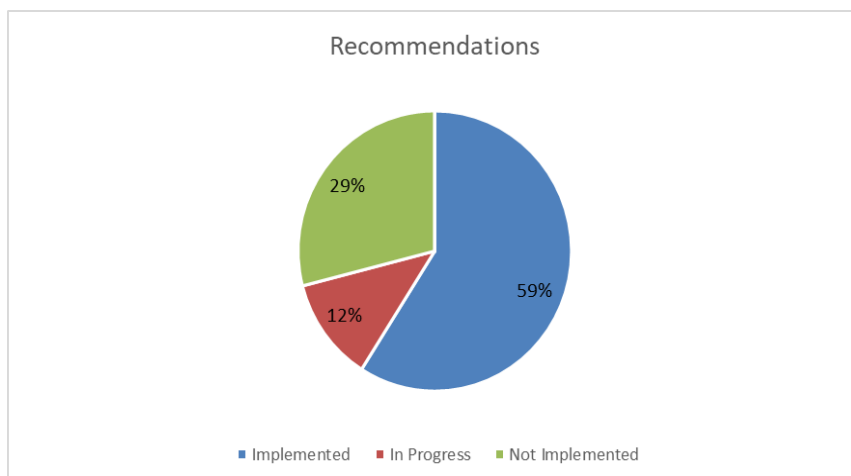
### ACHIEVEMENTS FOR FY 23/24

During the FY 2023/24, 18 audit assignments were planned. 13 audit assignments which represent around 72 % of the Annual Internal Audit Plan 2023/24 were completed. It can also be noted that 6 Audit Assignment for Planned Audit 2022/23 were completed in FY 2023/24.

### Follow Up Audit

At the end of each quarter, follow up is conducted on engagement findings and agreed recommendations to ascertain corrective actions initiated. All recommendations not implemented are referred to the Audit Committee.

Follow up audit was carried out on recommendations issued for the Financial Year 2021/22; 2022/23 and 2023/24 to determine the status of recommendations implemented. At least 59% of the recommendations has been implemented with 12% still in progress. Results of the follow up audit are illustrated as per Chart:



### Anti-Corruption Committee

The Anti-Corruption Framework Committee of the MOHW is in place since July 2020 and has come up with an Anti-Corruption Policy. The main objective of this anti-corruption policy is to strengthen and sustain an integrity culture within the Ministry. This is achieved through:

- a) The setting up of effective processes characterized by broad participation and transparency,
- b) Regular evaluation of corruption risks, systems and procedures,
- c) Ensuring that projects have clearly formulated goals, expected results as well as monitoring and follow-ups, and
- d) Learning from experiences and continually improving organizational performance and the corporate image.

Anti-Corruption Sub-Committees have also been set up at the level of Regional Hospitals, the MIH and the Trust Fund for Specialised Medical Care-Cardiac Centre (TFSMC).

For the financial year 2023-2024, the Ministry has worked in close collaboration with the Financial Crime Commission (Formerly known as the Independent Commission Against Corruption (ICAC)) for the conduct of Corruption Prevention Reviews (CPRs). In this context, CPRs have been carried out at the Central Health Laboratory and the Training and Capacity Building Unit of the Ministry.

### Medical Negligence Standing Committee

The Medical Negligence Standing Committee (MNSC) has been set up in June 2020 following a decision from this Government, to conduct preliminary investigation in cases of alleged medical negligence at public health institutions. The aim of the MNSC is to expedite matters and to ascertain as whether there has been any act of medical negligence during the medical treatment and hospitalisation of a patient.

The MNSC has been meeting regularly to conduct enquiries into the list of cases that were referred by the Ministry in order to address complaints from patients and related parties regarding alleged medical negligence in a prompt manner.

Since the constitution of the MNSC in June 2020, the committee has investigated into 154 cases of alleged medical negligence. The MNSC has been reconstituted in February 2024 and as at 30 June 2024, the committee has investigated into 13 alleged cases of medical negligence.

Year	No of Investigations
2020 (Jun – Dec )	29
2021	42
2022	42
2023 (Jan-Jun)	28
2024 (Jan-Jun)	13
<b>Total</b>	<b>154</b>

With regard to cases where medical negligence has been established by the MNSC, the Ministry has already initiated the necessary procedures to refer the cases to the relevant authorities, for further investigation and appropriate actions as deemed necessary.

### **Facility Assessment Agreement**

Mauritius has made significant strides in healthcare, with an extensive network of healthcare facilities. However, there are still some challenges in providing quality healthcare to all citizens. In this line, Budget for Financial Year 2023/2024 announced that the MOHW would partner with the National Health Service (NHS) of the United Kingdom (UK), under a Government-to-Government initiative, to carry out a quality assurance and audit of clinical and overall healthcare services in hospitals.

The services to be provided by King's College NHS Foundation Trust under this Facility Assessment audit would, amongst others, include reviewing key policies, procedures, guidelines and pathways, reviewing Key Performance Indicators and outcomes, assessing quality management functions and processes, evaluating safety, experience and outcomes tracking, and reviewing service delivery, including surgery, critical care, theatres and emergency care.

The health institution where King's College NHS Foundation Trust will conduct the facility assessment is Dr A. G. Jeetoo Hospital and will subsequently submit a Report together with findings and recommendations for the MOHW to implement. The preparations to obtain the necessary clearances and Government approval have started in the FY 2023-2024 and the assessment team from UK King's College NHS is expected in Mauritius around October/November 2024 to carry out the facility assessment.

### **Parliamentary Questions and Private Notice Questions**

During the period July 2023 to June 2024, the Hon Minister of Health and Wellness has responded to some 140 Parliamentary Questions requiring oral answers and 1 Private Notice Question, especially on the Ministry's policies and actions related to Dengue fever, Leptospirosis, and E-health.

These questions and answers represent important means used by members of Parliament to ensure the Government is accountable to the Parliament for its policies and actions and, through the Parliament, to the nation.

### **Audit Committee**

The Audit Committee is an essential element of public accountability and governance. It plays a key role in ensuring compliance by Ministries/Departments with their legal and fiduciary responsibilities, especially with respect to the integrity of a Ministry/Department financial information and the adequacy as well as effectiveness of internal control system.

The Committee supervises the entire audit, reporting processes and ensures that weaknesses in the system raised by both the Internal Control Unit and the National Audit Office are looked into and that their recommendations are complied with.

The Audit Committee has had 6 meetings during FY 2023-2024. Specific meetings were held with management and departments falling under MOHW, to discuss amongst others, issues reported by the Director of Audit (DOA), review of queries raised, follow up on the DOA's recommendations and identify remedial actions to be taken. The Implementation Plan to address shortcomings identified in audit reports and status of remedial actions have been provided in the following table.

### 3.1.1 IMPLEMENTATION PLAN TO ADDRESS SHORTCOMINGS IDENTIFIED IN AUDIT REPORTS AND STATUS OF REMEDIAL ACTIONS

Table VI: Implementation Plan to address shortcomings identified in Audit Reports and Status of Remedial Actions

Issues	DOA Comments	Status of Action taken	% Completion
<b>Provision of Security and Cleaning Services to Hospitals and Health Institutions – Value for Money not obtained</b>	<ul style="list-style-type: none"> <li>Contracts renewed on a Monthly Basis Despite Poor Performance of Service Provider</li> </ul>	<ul style="list-style-type: none"> <li>A procurement exercise was initiated at the level of the Central Procurement Board (CPB) level. The evaluation exercise has already been completed. Letter of award has been issued for both Security and Cleaning Services. <b>The Audit Committee noted that a Circular has been issued to all regional hospitals to ensure proper monitoring and compliance to the contracts for cleaning services and security services respectively.</b></li> </ul>	95%
	<ul style="list-style-type: none"> <li>Penalty Clauses not applied for Non-Compliance with the Scope of Service</li> </ul>	<ul style="list-style-type: none"> <li>Penalty clauses are being applied by all hospitals for non-compliance to the scope of service and performance specifications as laid down in Bidding Documents.</li> </ul>	ongoing
	<ul style="list-style-type: none"> <li>Lack of Proper Monitoring Measures leading to Poor Level of Security and Cleaning Services</li> </ul>	<ul style="list-style-type: none"> <li>Existing monitoring measures, more frequent roll calls and surprise checks have been reinforced to ensure better quality of service from contractors. The site supervisor is regularly apprised of any complaint regarding performance. Monthly Reports are submitted to the</li> </ul>	90%



	<ul style="list-style-type: none"> <li>Proper Procurement Procedures not followed in selecting the Provider for Security Services</li> </ul>	<p>Procurement Unit for subsequent necessary action; for vendor rating and reporting to Performance Review Committee.</p> <ul style="list-style-type: none"> <li>List of Security Services providers for restricted bidding exercises have been established by the Procurement Section. The list is being updated twice per year.</li> </ul>	90%
<b>Ophthalmology Services – Long Waiting Lists for Eye Surgeries</b>	<ul style="list-style-type: none"> <li>Patients waited for more than five years to get an appointment for eye surgery</li> </ul>	<ul style="list-style-type: none"> <li>The situation is being monitored on a regular basis, through a High-Level Committee at the Ministry. The issue of clearing of backlog is being addressed, amongst others through outsourcing to private clinics and re-organisation of services delivered by Ophthalmology Units. Measures are being taken to optimize the use of the Laser Machines.</li> </ul>	100%
	<ul style="list-style-type: none"> <li>Surgeries were cancelled due to the unavailability of medical items at SBEH</li> </ul>	<ul style="list-style-type: none"> <li>All consumables have been received and surgeries are ongoing.</li> </ul>	100%
	<ul style="list-style-type: none"> <li>Closure of Ophthalmology Unit at Dr A G Jeetoo Hospital</li> </ul>	<ul style="list-style-type: none"> <li>The Eye Outpatient Department, Laser Treatment sessions and Refraction Sessions are still ongoing till date at Dr AG Jeetoo Hospital.</li> </ul>	100%
<b>Electronic Inventory Management System at the Ministry – Stock Management Issues</b>	<ul style="list-style-type: none"> <li>Decisions were made based on inaccurate Stock Balances</li> </ul>	<ul style="list-style-type: none"> <li>The stocks figures at CSD are now updated on the system on a real time basis, with inputs being made within one day.</li> </ul>	100%
	<ul style="list-style-type: none"> <li>Inadequate Training, Monitoring and Corrective Actions to ensure proper</li> </ul>	<ul style="list-style-type: none"> <li>Additional trainings/handholding are being provided to all users of the system since January 2023.</li> </ul>	100%

	<p>implementation and efficient use of EIMS in all hospitals</p> <ul style="list-style-type: none"> <li>Discrepancy between Stock Value as per EIMS and Returns submitted to Treasury</li> </ul>	<ul style="list-style-type: none"> <li>The Steering Committee meets on regular basis and looks into the implementation of EIMS. Discrepancies have been identified and corrected and actions have been completed for submission of returns to the Treasury.</li> </ul>	100%
<b>Land Infrastructure Assets – Land Ownership and Usage Shortcomings</b>	<ul style="list-style-type: none"> <li>No Consolidated and Updated Database of Lands</li> </ul>	<ul style="list-style-type: none"> <li>All regional hospitals have already submitted the list of vested state lands in their respective catchment areas and the database has been consolidated by Project Implementation Unit</li> </ul>	100%
	<ul style="list-style-type: none"> <li>Absence of Documentary Evidence for Land Ownership and Health Centres constructed on Private and Leased Lands</li> </ul>	<ul style="list-style-type: none"> <li>Implementation of action is at level of the Ministry of Housing and Land Use Planning.</li> </ul>	100%
<b>Construction of Community Health Centres - Implementation Issues</b>	<ul style="list-style-type: none"> <li>Sanctioning the Defaulting Contractor</li> </ul>	<ul style="list-style-type: none"> <li>For Roche Bois CHC, this Ministry approved termination of contract on 14 February 2023 due to default by the Contractor. The issue was reported to the Performance Review Committee on 04 May 2023 for any further action. Performance Security amount to Rs3 M was forfeited.</li> </ul>	99%
<b>Governance Issues – Non-compliance with Legislation</b>	<ul style="list-style-type: none"> <li>Non-submission of Report on Performance</li> </ul>	<ul style="list-style-type: none"> <li>Management has taken appropriate actions to ensure that the Annual Report is submitted within the prescribed timeframe.</li> </ul>	100%

Source: Audit Committee, MOHW

## 3.2 MANAGEMENT OF GOVERNMENT ASSETS

### Government Asset Register



The Government Asset Register (GAR) of the Ministry of Health and Wellness (MOHW) includes assets owned or in use by the Head Office and five Regional Hospitals. This encompasses vehicles, furniture, medical equipment, IT equipment, land, and buildings. Each Regional Hospital has appointed an officer as the GAR user, while the Deputy Permanent Secretary at the Head Office serves as the GAR Coordinator.



Updating of the ADI template and the GAR system is underway at both the Regional Hospital and Head Office levels. With regard to Land Infrastructure Assets, the Ministry is collaborating with the Ministry of Housing and Land Use Planning (MHLUP). As at date, 65 plots of state land are vested in this Ministry to accommodate health infrastructure and the MHLUP will be updating the GAR for these plots in use.



Additionally, the Ministry is arranging GAR system training for a new batch of officers in collaboration with the Accountant General's Office.

### 3.3 STATUS ON THE IMPLEMENTATION OF KEY ACTIONS 2022-2023

Table VII: Status on the Implementation of Key Actions 2023-2024

Vote 18-1 Ministry of Health and Wellness				
Outcome	Outcome Indicator	Target 2023/2024	Achievements as at 30 June 2024	Remarks
<b>An efficient and effective healthcare delivery system</b>	Mortality rate due to NCDs per 100,000 population	<600	630	<p>In 2021 and 2022, increases in mortality were registered mostly among people with co-morbidities, such as, cardiovascular diseases and diabetes; this phenomenon is mostly associated with an ageing population coupled with high prevalence of NCDs and their risk factors.</p> <p>Consequently, mortality rate per 100,000 population attributed to NCDs had increased from 556 in 2020 to 650 in 2021 and to 655 in 2022.</p> <p>However, in 2023, a notable decrease has been noted with a rate of 615. Unfortunately, following an increase in mortality in the period March to June 2024, the rate calculated for the financial year 2023-2024 has gone up to 630.</p> <p>Several measures are being taken to reduce mortality due to NCDS as follows:</p> <ol style="list-style-type: none"> <li>1. With the implementation of the National Integrated NCDs Action Plan 2023-2028, the sensitization of the community at large is being reinforced for the prevention of NCDs mainly through the promotion of healthier lifestyle and good eating habits.</li> <li>2. With the implementation of the National Service Framework for NCDs 2023-2028, the screening service is being consolidated for the early detection of NCD risk</li> </ol>

					<p>factors. The clinical management of NCDs is also being upgraded for the prevention of complications as well as for better treatment outcomes.</p> <p>3. The National Stroke Action Plan 2023- 2027 is being implemented. One of its objectives is to create awareness and inform the public on early warning signs of stroke and immediate action to be taken.</p> <p>4. A primary percutaneous coronary intervention service on a 24/7 basis has been set up to improve outcomes in the management of acute myocardial infarction and similar emergent conditions.</p>
		Infant Mortality Rate per 1,000 live births	13.5	13.4	Target has been achieved.
<b>Delivery Unit</b>	<b>Main Service</b>	<b>Key Performance Indicator</b>	<b>Target 2023/2024</b>	<b>Achievements as at 30 June 2024</b>	<b>Remarks</b>
<b>Hospital and Specialised Services</b>	Reduce prevalence of NCDs	Implementation of National NCD Action Plan 2022-2027	45%	20%	<p>Cabinet has been apprised on 04 August 2023 on the development and implementation of the National Service Framework for Non-Communicable Disease (NSFNCD) 2023-2028 and the National Integrated Non-Communicable Disease Action Plan (NINAP) 2023-2028.</p> <p>The National Integrated NCD Action Plan and National Service Framework for NCDs 2023 - 2028 have been launched on 5th September 2023.</p> <p>The implementation of the plan implicates a multi sectorial approach involving the collaboration of different ministries, institutions and NGOs.</p> <p>Thus, six subcommittees have been proposed, namely:</p>

					<p>1. Health Promotion: Screening, Prevention and Sensitization; 2. Training and Capacity Building; 3. Legislation, Regulations, Guideline, Policies and Curriculum; 4. Research, Innovation and Digitalisation; 5. Healthy Eating; 6. Treatment and Primary Health Care</p> <ul style="list-style-type: none"> <li>▪ These subcommittees are monitored by the Implementation Committee.</li> <li>▪ The Multi Sectoral NCD Committee is already functional and has been subdivided into 6 subcommittees.</li> <li>▪ An internal meeting was held on 17th May 2024 under the chairmanship of SCE.</li> </ul>
		Mauritius Food Standards Agency (MFSA) operational	Mar-24	April 24	<p>The Board of the MFSA held 12 meetings and established 8 committees, which collectively conducted 23 sittings to draft regulatory measures.</p> <p>During the period, 8 draft regulatory measures, focusing on standards for vegetarian and halal food, front-of-pack nutrition labelling, and amendments to the Food Act 2022 were developed. All these draft regulatory measures had been approved by the Board and submitted to the Ministry for consideration.</p> <p>In addition, the MFSA had already developed its logo, website, as well as Facebook page and used them to communicate with consumers and food business operators on matters related to the safety and nutritional quality of food.</p>
	Improve neonatal services	Number of neonatal ICU ventilators (Cumulative)	50	37	<p>(37 existing + 6 soon to be delivered] Moreover, request has been made for additional 20 Neonatal ventilators for the upcoming financial year</p>



<b>Primary Health Care</b>	Provide quality primary healthcare services	Number of new Medi-Clinics / AHCs / CHCs constructed	5	6	The status of projects completed is as hereunder: <ul style="list-style-type: none"> <li>▪ Medi-Clinic at Quartier Militaire (Completed on <b>13 November 2023</b>)</li> <li>▪ Medi-Clinic at Stanley (Completed on <b>14 February 2024</b>)</li> <li>▪ Medi-Clinic at Bel Air (Completed on <b>21 March 2024</b>)</li> <li>▪ Medi-Clinic at Grand Bois (Completed on <b>15 May 2024</b>)</li> <li>▪ CHC at St Francois Xavier (Completed on <b>16 February 2024</b>)</li> <li>▪ CHC at Camp de Masque (Completed on <b>14 June 2024</b>)</li> </ul>
	Strengthen laboratory services	Percentage of common laboratory results available within 24 hours	90%	90%	Some tests are done in batches by weekly basis so all results cannot be made available within 24 hours. Turnaround times will be further improved with full implementation of Laboratory Information Management System.
<b>Management and Administration</b>	Digitalise health services through an effective E-Health system	E-Health Patient Administration System developed	30%	5%	The signature of contract for E-Health was made by the UNDP on <b>09 January 2024</b> due to delays in concluding the evaluation process as per UNDP procedures.  The status of deliverables as at <b>30 June 2024</b> is as follows: <ul style="list-style-type: none"> <li>▪ Demonstration of generic solution – <b>13 February 2024</b></li> <li>▪ Approved project workplan – <b>04 April 2024</b></li> <li>○ Software Requirements Specifications gathering – in progress</li> </ul>

Source for Actual 2023/2024: Information compiled by Planning and Finance Unit, MOHW

### 3.4 STATUS ON THE IMPLEMENTATION OF BUDGET MEASURES 2023-2024

Table VIII: Status on the Implementation of Budget Measures 2023-2024

Budget Para	Measure	Status Updates / Remarks as at 30 June 2024
70(e)	Introduction of a silent is consent of 4 weeks for registration of foreign professionals with professional bodies including the Medical, Dental and Veterinary councils.	Completed. Measure is already operational.
70(f)	Reviewing of the composition and process of the Medical, Dental, Veterinary and Allied Professionals Councils.	Completed. Measure is already operational.
134(a)	Amendments of the Human Tissue Act to enable in-vitro fertilisation.	<p>Invitro-fertilisation is already being practiced in Mauritius under the Public Health Act by private health institutions.</p> <p>The Human Tissue Act concerns, among others, the donation and transplant of organs and is not the appropriate legal framework for in-vitro fertilisation.</p> <p>The Ministry of Health and Wellness is providing two new services at the Sir Seewoosagur Ramgoolam (SSR) National Hospital, namely an Assisted Reproductive Technology Centre (Fertility Clinic) and an Epidural Service for women in labour. This specialized service at SSRN hospital provides for more specific treatment that deals with infertility issues.</p> <p>This service has been extended to Victoria Hospital. These Fertility Clinics provide a holistic approach to those couples who are facing difficulties to conceive based on the assessment, diagnosis and treatment modalities.</p> <p>Remark: An Assisted Reproductive Act is being worked out to regulate in-vitro fertilisation.</p>
276/277	Implementation of the E-Health system in hospital facilities as from July 2023 will enable the 'One Patient – One Record' for every Mauritian Citizen.	<p>Letter of award has been issued on 22 November 2023 and contract has been signed between the UNDP and the Joint Venture on 09 January 2024.</p> <p>The implementation of Phase 1 of E-Health comprising the Patient Administration System, the Patient Portal, a Blood Transfusion System and Query/Analytics would span over 18 months, with implementation at Health Region 4 prior to rolling</p>

Budget Para	Measure	Status Updates / Remarks as at 30 June 2024
		<p>out to the remaining health regions.</p> <p>The Project is at Software Requirements Specification preparation stage and is planned to Go-Live in November 2024.</p>
<b>285</b>	A provision of Rs 20 million will be made for increased screening for cancer risks assessments and early detection.	Measure is already operational.
<b>289</b>	Vaccination of some 80,000 children against human papillomavirus (HPV).	<p>Measure is already operational.</p> <p>Vaccination of girls and boys aged 9 -15 years with single dose of the vaccine ongoing.</p> <p>Remarks: As at 30 June 2024, 19,890 children aged 9-15 years have been vaccinated out of the 68,000 children targeted.</p>
<b>292</b>	Provision of a continuous glucose monitor for some 1000 Type-1 diabetes patients.	Discussions are ongoing with regard to the procurement of some 200 CGMs in the first instance to be distributed to 100 Type-1 diabetic children and 100 Type-1 diabetic pregnant women. The proposal is under consideration.
<b>293</b>	Some 450 high risk diabetic patients will be provided with an insulin pump.	<p>Discussions are ongoing in respect of the specifications, and further meetings would be held more importantly on the use and training on the Insulin Pump-Continuous Glucose Monitors.</p> <p>Remark: Discussions are still ongoing as there are several risks associated with the use of insulin pumps.</p>
<b>295</b>	The recruitment of additional 1,400 staff this year for the public health sector.	<p>Measure is already operational and ongoing.</p> <p>Remark: Around 1,300 staff recruited</p>
<b>296</b>	Provision for referral of priority cases to local private hospitals for treatment, to reduce the waiting time for eye surgeries.	Completed. Measure is operational.

Budget Para	Measure	Status Updates / Remarks as at 30 June 2024
413/414	Waiving of the Maximum amount of Rs 1 million under the Overseas Treatment Scheme For pediatric patients up to the age of 17 years who require medical treatments not available locally. Thereby, covering the full cost of overseas treatment by the Government.	Completed. Measure is operational.
420/421	Financial assistance for the full costs of cancer care and treatment in foreign hospitals with the best expertise for children in the Republic of Mauritius diagnosed with cancer as well as those in local private hospitals.	Completed. Measure is operational.

Source: Project Implementation Unit, MOHW

### 3.4.1 STATUS ON THE IMPLEMENTATION OF BUDGET MEASURES FROM BUDGET ANNEX FY 2023-2024

Table IX: Status on the Implementation of Budget Measures from Budget Annex 2023-2024

Budget Para	Measure	Status Updates / Remarks as at 30 June 2024
B.1 (f)(i)	Introduction of a silent is consent principle of 4 weeks, for the registration of foreign professionals with the Allied Health Professionals Council.	Measure already operational
B.1(f)(ii)	Introduction of a silent is consent principle of 4 weeks, for the registration of foreign professionals with the Dental Council.	Measure already operational
B.1(f)(iii)	Introduction of a silent is consent principle of 4 weeks, for the registration of foreign professionals with the Medical Council.	Measure already operational

Budget Para	Measure	Status Updates / Remarks as at 30 June 2024
<b>B.5(a)</b>	Introduction of a mandatory feedback mechanism in hospitals on care being delivered to in-patients. Treating medical staff will have to provide information on the medical condition of admitted patients to a designated relative at regular intervals.	Feedback form already designed. Same has been included under the "Mo Bienet" Mobile App of the Ministry. App was launched on 06 May 2024.
<b>B.5(b)</b>	Partnership between the Ministry of Health and Wellness with the National Health Service of the United Kingdom, under a Government-to-Government initiative, to carry out a quality assurance and audit of clinical and overall healthcare services in hospitals.	<p>Clearances have been obtained from SLO, MOFA and MOFEPD with regard to the Agreement.</p> <p>Pursuant to provisions in the Public Procurement Act, a due diligence exercise is being conducted, following which, a report would be submitted to the High-Powered Committee at the Prime Minister's Office.</p> <p>Remark: At its meeting of 12 July 2024, Cabinet agreed to the signature of the Agreement. Thereafter Cabinet's approval would be sought.</p>
<b>B.5(c)</b>	Enhancement of the Harm Reduction Unit Computerised System for better follow up and care to substance abuse patients.	<p>Measure is already operational. Harm Reduction Unit is already computerised.</p> <p>Additional features with regard to the Drug Users Administrative Panel will be included in the existing Harm Reduction Unit system.</p>
<b>B.5(d)</b>	Introduction of a 'Carnet de Santé' for our elderly persons above 60 years to better keep track of illnesses, undertake close health monitoring, any cognitive health deterioration and provide effective medical checks.	<p>Carnet de Santé was officially launched on 23 March 2023.</p> <p>Work is in progress for the Carnet de Santé at the level of printing</p> <p>A Screening Form will also be filled in and kept in patient's file</p> <p>The NCD and Health Promotion team is helping the ICOPE team for the collection of data</p>
<b>B.5(e)</b>	Development of a SMART Health Mobile App with the assistance of the World Health Organization to provide information geared towards infection prevention control.	The "Mo Bienet" Mobile App is live since 07 September 2023 and was officially launched on 06 May 2024.

Budget Para	Measure	Status Updates / Remarks as at 30 June 2024
<b>B.5(f)</b>	Enhancement of the District Health Information System with the support of the World Health Organisation, for better monitoring of ongoing vaccination programmes, diseases surveillance, HIV/AIDS care and treatment and digitisation of renal registry, cancer registry and cardiac registry.	<p>The WHO has informed that support for DHIS-2 would not be provided and for Ministry to mobilise its own funds and resources.</p> <p>The E-Health Project contract has been awarded in January 2024 and is at Software Requirements Specifications preparation stage. Therefore, a policy decision has been taken for the different services to be included during Phase 2 of E-Health implementation.</p> <p>For HIV/AIDS, DHIS-2 implementation is being pursued under Global Fund.</p>
<b>C.4</b>	The Ayurvedic and Other Traditional Medicines Act will be amended to cater for specialists in traditional medicines.	<p>The Act has been amended. Measure already operational.</p> <p>Remark: Given that the Ayurvedic and Other Traditional Medicines Act has been amended in the Finance Act 2024-25, consultations will be held with the AGO and the MPSAIR to facilitate the registration of Specialists.</p>
<b>C.9. (a)</b>	The Clinical Trials Act will be amended to create a combined ethics and scientific sub-committee of the Clinical Research Regulatory Council (CRRC) to assess the welfare, safety and health of human subjects as well as consider all the scientific parameters to ensure that the clinical trial being proposed meet international safety standards.	Measure already operational
<b>C.9. (b)</b>	The Clinical Trials Act will be amended to amend the composition of the Board of the CRRC.	Measure already operational
<b>C.9. (c)</b>	The Clinical Trials Act will be amended to provide for a maximum period of 15 days to process all applications.	Measure already operational
<b>C.14.</b>	The Dangerous Drugs Act will be amended to introduce an electronic register to record all transactions relating to the controlled drugs listed	The Act has been amended. Measure already operational Remark: The Electronic Register has been implemented at Dr Bruno Cheong



Budget Para	Measure	Status Updates / Remarks as at 30 June 2024
	under the Act. The Register will be accessible to approved public sector entities for better control of dangerous drugs.	Hospital on a pilot basis and would be rolled out to all Regional Hospitals in 2025.
<b>C.15.</b>	The Dental Council Act will be amended to enlarge the composition of the Dental Council consistent with the Medical Council Act.	Measure already operational
<b>C.27.</b>	The Human Tissue (Removal, Preservation and Transplant) Act will be fully proclaimed by August 2023 to allow for transplant of renal parts.	Completed Remark: Already proclaimed since February 2024.
<b>C.33. (a)</b>	The Medical Council Act will be amended to empower the Medical Council to establish Clinical Guidelines intended to optimizing patient-care.	Measure already operational
<b>C.33. (b)</b>	The Medical Council Act will be amended to provide for the terms of office of the Disciplinary Tribunal.	Measure already operational
<b>C.40</b>	Amendment will be made to the Nursing Council Act to provide that the Council will also comprise of 15 persons elected among registered nurses or midwives, instead of 12 persons, in line with the Schedule of its Act.	Measure is already operational
<b>C.44</b>	Amendment will be made to the Pharmacy Act to cater for and facilitate the development of the local pharmaceutical manufacturing sector in Mauritius.	Measure already operational Remark: Completed

Source: Project Implementation Unit, MOHW

**PART IV**

**FINANCIAL PERFORMANCE**

## 4.1 FINANCIAL HIGHLIGHTS

In response to evolving healthcare needs, increasing demand for advanced medical services, rising healthcare costs amongst others, the Government, through the FY 2023-2024 Budget, has continued to prioritize strategic investments in the public health sector. A financial envelope of Rs 15.7 billion was allocated to the MOHW to provide free universal access to quality health care services to the population and thus leaving no one behind.

Government spending on health has increased by nearly 71% over the past nine years, from Rs 9.2 billion in 2014 to Rs 15.7 billion for FY 2023-2024. Government Expenditure on Health as a percentage of GDP has improved from 2.36 % in 2014 to nearly 3 % in FY 2023-2024. Per capita government expenditure on health which was Rs 7,292 in 2014 has increased to Rs 12,438 in FY 2023-2024, representing an increase of nearly 71%.

### 4.1.1 STATEMENT OF EXPENDITURE UNDER VOTE 18-1

Table X: Statement of Expenditure Under Vote 18-1

		2022-2023	2023-2024	2023-2024
		Actual	Revised Estimates	Actual
<b>18-1 HEALTH AND WELLNESS</b>				
	<b>18-101: GENERAL</b>	<b>574,084,499</b>	<b>782,697,500</b>	<b>777,855,360</b>
<b>20</b>	Allowance to Minister	2,400,000	2,400,000	2,400,000
<b>21</b>	Comp of Employees	315,979,822	327,461,601	326,570,593
<b>22</b>	Goods & services	84,408,326	93,247,445	91,203,705
<b>25</b>	Subsidies	748	2,825,454	2,825,454
<b>26</b>	Grants	33,065,471	35,533,000	35,440,008
<b>27</b>	Social Benefits	76,945,621	108,530,000	107,612,903
<b>28</b>	Other Expenses	2,932,800	4,600,000	3,705,000
<b>31</b>	Acquisition of Non-Financial Assets	58,351,711	208,100,000	208,097,696
			<b>782,697,500</b>	<b>777,855,360</b>
	<b>18-102: Hospital and Specialised Services</b>	<b>13,183,145,580</b>	<b>14,432,114,975</b>	<b>14,357,281,148</b>
<b>21</b>	Comp of Employees	7,830,347,950	8,099,094,339	8,076,685,380
<b>22</b>	Goods & services	3,600,101,468	4,654,823,236	4,602,412,296
<b>26</b>	Grants	400,700,000	370,000,000	370,000,000
<b>31</b>	Acquisition of Non-Financial Assets	1,351,996,162	1,308,197,400	1,308,183,472
			<b>14,432,114,975</b>	<b>14,357,281,148</b>

	<b>18-103: Primary Health Care &amp; Public Health</b>	<b>1,233,577,801</b>	<b>1,479,713,077</b>	<b>1,473,333,982</b>
21	Comp of Employees	811,141,221	894,944,949	892,342,245
22	Goods & services	181,798,737	199,165,528	195,409,250
31	Acquisition of Non-Financial Assets	240,637,843	385,602,600	385,582,487
			<b>1,479,713,077</b>	<b>1,473,333,982</b>
	<b>18-104: Treatment and Prevention of Aids and HIV</b>	<b>67,564,922</b>	<b>94,470,111</b>	<b>94,067,959</b>
21	Comp of Employees	26,543,920	25,939,255	25,616,106
22	Goods & services	41,021,002	68,530,856	68,451,853
			<b>94,470,111</b>	<b>94,067,959</b>
	<b>18-105: Prevention of Non-Communicable Diseases and Promotion of Wellness</b>	<b>121,681,990</b>	<b>111,004,337</b>	<b>109,815,165</b>
21	Comp of Employees	76,127,931	80,531,047	79,447,928
22	Goods & services	45,554,059	30,473,290	30,367,236
31	Acquisition of Non-Financial Assets			
			111,004,337	109,815,165
	<b>Total</b>	<b>15,180,054,792</b>	<b>16,900,000,000</b>	<b>16,812,353,613</b>

Source: Finance Section, MOHW

### Analysis of Changes

In Mauritius, healthcare costs have been notably high, primarily due to the country's heavy reliance on the importation of pharmaceutical products, vaccinations, medical consumables, and equipment. This year, the nation faced a resurgence of Dengue fever and Leptospirosis, which further strained the healthcare system.

Several external factors have contributed to escalating healthcare costs. The depreciation of the Mauritian Rupee against the US Dollar, coupled with a high inflation rate and the ongoing impacts of the Russian-Ukraine war, has resulted in significant price increases for medical supplies and pharmaceuticals.

Additionally, the healthcare system experienced a surge in hospital visits, totalling approximately 8.8 million. This increase has led to heightened consumption of medicines, drugs, medical disposables, and laboratory supplies, exacerbating the financial pressures on the Ministry of Health and Wellness.

To address the above and ensure continued healthcare service delivery, an Estimate of Supplementary Expenditure was approved, allocating an additional Rs 1.2 billion to the Ministry of Health and Wellness. This supplementary budget was intended to cover:

- Payment of Allowances: Ensuring that healthcare staff are adequately compensated for their services.

- Medicines and Drugs: Procuring essential medicines and drugs to meet the increased demand.
- Medical Disposables and Laboratory Apparatuses: Purchasing necessary medical disposables and laboratory supplies to maintain healthcare services.
- Minor Equipment: Acquiring minor but essential medical equipment to support healthcare operations.

#### 4.1.2 STATEMENT OF REVENUE

Table XI: Statement of Revenue

SN	Description	Actual 2023/2024
1	Pharmacy Licences	1,529,550
2	Central Health Laboratory Fees	11,999,945
3	HIV & Filarisis	1,124,784
4	Deratting Fees	2,445,800
5	Vaccination Fees	18,991,710
6	Fumigation and Disinfection Fee	2,235,050
7	Sale of Drugs, Serum and Sundry	972,078
8	Health - Miscellaneous Sales of Goods and Services	22,712,876
9	Licence to run Private Hospitals	2,195,500
10	Entertainment Fees	37,000
11	Government Analysis Div	1,399,100
12	Forfeiture of performance Bond	17,031,542
13	Dangerous Chemical Licence	2,321,150
14	Refund of Bond	618,923
15	Food Handler's Training Course	155,000
16	Medical Report	108,320
17	Sale of Drug Prescription Pads	46,770
18	Registration of Pharmaceutical Products	559,500
	<b>TOTAL</b>	<b>86,484,598</b>

Source: Finance Section, MOHW

## PART V

# WAY FORWARD





## 5.1 CHALLENGES, PRIORITIES AND THE WAY FORWARD

Government's philosophy is to provide free universal access to quality health care services to each and every citizen in the Republic of Mauritius. In this vein, during the FY 2023-2024, Government, as in preceding years, stood guided by one sole objective that is, putting the health and wellness of our citizens as top priority. Thus, actions will be planned to ensure accessibility and affordability to quality health care services from primary to specialized care to the population, regardless of income, gender, race and religion.

Altogether, the public health sector requires constant development to meet rising expectations. The MOHW is called upon to sustain progress made in the public health sector, address the challenges and thrive for a better and more resilient future for the sector.

Thus, the Ministry has to keep pace with new health technologies, implement its strategic directions and actions as approved by Government and also continue investing in the health workforce and health infrastructure.

Areas of priorities, *inter-alia*, include the following:

### Operationalisation and Strengthening of New Structures/Initiatives

The Central Medical Procurement Authority has been established under the CMPA Act 2023 to manage the overall procurement, warehousing, supply, and distribution of medical supplies in Mauritius. The CMPA aims to optimize healthcare procurement and ensure equitable access to quality medical supplies. The CMPA Board was constituted on 12 March 2024, and in the coming FY, the structure will have to be operationalized.

With the CMPA in place, the Ministry anticipates a significant reduction in procurement inefficiencies and stock management issues that have plagued our healthcare system. The Authority's strategic approach will enhance transparency, reduce costs through bulk purchasing, and ensure timely delivery of medical supplies. This centralized system is designed to eliminate waste, prevent shortages, and improve overall healthcare delivery, thereby reinforcing our commitment to providing high-quality care for all citizens.

SIDS Pooled Procurement Secretariat: Mauritius has been selected to host the SIDS Pooled Procurement Secretariat, aiming to streamline procurement processes, optimize resource allocation, and foster innovation in healthcare for small island nations. This Secretariat will be a centre for procurement excellence, knowledge exchange, capacity building, and partnerships. The Ministry, in collaboration with WHO, is drafting a host agreement for the Secretariat's setup, expected to be operational by May 2025.

The establishment of the Secretariat represents a significant milestone in our commitment to regional health collaboration. It will facilitate the sharing of best practices and innovative solutions tailored to the unique challenges of small island states. Furthermore, it underscores our leadership role in promoting sustainable health initiatives and our dedication to improving health outcomes not only locally but also for our fellow SIDS communities around the world.

Public Health Emergency Operations Center (PHEOC): The Ministry plans to operationalize the PHEOC for addressing emerging and re-emerging diseases. The PHEOC will serve as a coordinating platform for the preparation, readiness, response, and recovery from public health emergencies among relevant stakeholders. A functional PHEOC will be the backbone of a strong disease surveillance system and will provide real-time response to any public

health emergency, early disease detection and response for timely decision making and efficient management of resources and communication.

### **Enhancing the Management and Prevention of NCDs**

Moving forward, Mauritius would prioritize a comprehensive strategy to combat Non-Communicable Diseases (NCDs) by implementing the National Service Framework for NCDs (2023-2028) and executing the National Integrated NCD Action Plan (2023-2028) with a multi-sectoral approach to ensure consistent care standards across all health services. Continuous research, surveys, and health literacy initiatives are vital for informed policy-making. Strengthening prevention through early screening, lifestyle changes, and promoting healthy habits must be central to national health policies. Additionally, structured NCD education programs, NCD registries, and the use of Artificial Intelligence in healthcare are essential for sustainable health outcomes, supported by regular conferences and international collaboration. To address overweight and obesity, the Obesity Action Acceleration Roadmap Mauritius (2024-2030) is being prepared to reduce prevalence by 5%.

Tackling NCDs due to climate change in Mauritius requires a multi-sectoral stakeholder involvement. The Ministry of Agro-Industry ensures affordable food crops and monitors pesticide use. Such collaborative efforts will be sustained to decrease diabetes, hypertension, cardiovascular diseases, and other risk factors associated with NCDs, such as obesity, among others. In addition, at the level of the Ministry, decentralisation of health services are on-going to provide resilient primary care, even during cyclones.

Managing genetic challenges in NCDs demands a multifaceted approach. Strengthening healthcare infrastructure is important, including establishing genetic testing facilities and training healthcare professionals in genomics. Public health campaigns should focus on raising awareness about genetic risks and promoting preventive measures. Implementing community-based health programs to identify high-risk individuals and provide early interventions can mitigate the impact of genetic predispositions.

### **Digitally Enabled Health Care Delivery**

The MOHW has already embarked on the Phase 1 of the digitalisation of the public health sector through the implementation of Digital Health Solutions with the support of the United Nations Development Programme (UNDP). This strategy is expected to strengthen the underpinnings for decision-making and assist the sector to further achieve efficiency gains.

The Patient Administration System under E-Health will bring the “One Patient One Record” concept which is expected to reduce wastage and duplication of work. Additionally, the establishment of real-time monitoring for healthcare expenditures and public health facility operations via e-Health are planned to roll-out during Phase 2.

Altogether, the effective implementation of Digital Health initiatives will be reinforced. Nevertheless, the concept of “One Patient One Record” will only translate into reality if there is parallel investment in IT infrastructures, networking equipment, hardware and software, IT cloud storage, high data security, IT literate health workforce and real time back-office IT support amongst others.

Given the importance of graduating to digital health services and the complexities associated therewith, it is crucial to adopt the right management model with qualified and skilled IT professionals able to provide 24/7 support through an independent and agile organisation in the form of a Digital Health Agency. This Agency would be capable of proactive and flexible

implementation of digital health initiatives and support sustainable growth and impact within the digital health landscape.

Moreover, improving the Digital Health Maturity for eHealth adoption, parallel investment in IT infrastructures, networking equipment, hardware and software, IT cloud storage, cyber security, IT literate health workforce, real time back-office IT support, a Digital Health Architecture and Blueprint responsive to technological advancements, data privacy considerations and the legal and policy frameworks amongst others are being pursued.

### **Improving Quality of Health Services and Human Resources for Health (HRH)**

In order to sustain the provision of quality and accessible patient-centred public health services, the following are also envisaged: (i) Partnership with the National Health Service of the United Kingdom, under a Government-to-Government initiative, to carry out a quality assurance and audit of clinical and overall healthcare services in hospitals and (ii) implementation of recommendations provided by oversight bodies (National Audit Office, Internal Control etc).

Additional staffing and further capacity building of medical and non-medical staff will certainly be needed. As far as HRH is concerned, the Managers Human Resources would need to provide monthly updates on the status of vacancies and ensure close follow-up so that all funded vacancies are filled in a timely manner. The MOHW is upgrading the services, implementing new services, specialities and super specialities, for example at the National Cancer Centre and the upcoming New Renal Transplant Centre, New Eye Hospital, and New Cardiac Centre. Thus, there is a need to ensure that more officers are continuously trained and equipped to provide these health services. There is also the need to re-engineer the human resources for Public Health separately so as to cater for any future pandemic like COVID-19. As announced in the MOHW Budget FY 2024-2025, a rise in health workforce across the different grades from 15,890 to 16,211 will be brought over one year. Interestingly, it will be allowed to recruit foreign specialists to exercise in public hospitals.

### **Reinforcing Community Health Systems**

Encouraging community participation involves forging partnerships with local organizations, businesses, schools, healthcare providers, and Government agencies. The Ministry aims at empowering community members to promote health literacy and self-care practices, utilizing technology and social media to engage with the public.

In addition, to enhance community empowerment a Local Health Policy has been designed to strategically frame and guide the establishment of local Health committees. The Committees will be set in order to foster engagement between the community and public sector in addressing health issues by informing, influencing, motivating and involving the population.

Recognizing adolescence as a critical period of rapid physical, mental, and psychosocial development that significantly impacts an individual's future, the Ministry is developing a National Strategy for Adolescent Health 2024-2029. This strategy aims to prevent unhealthy behaviors, such as physical inactivity, smoking, substance abuse, excessive alcohol consumption, and risky sexual activities, which can lead to NCDs and sexually transmitted diseases. To implement this strategy, the MOHW should coordinate and collaborate closely with the Community.

## Strengthening Strategic, Legislative and Institutional Frameworks

In order to underpin developments in the health sector, the Ministry is envisaging to undertake an evaluation on the implementation of the HSSP 2020-2024 and subsequently the development of a new Strategic Plan for the Health Sector for the period 2025-2030 in collaboration with the World Health Organization. The development and implementation of Strategic Plans conform to Government's policy in the health sector, which aims at achieving the highest standards of good health for the individual, family, community and thus improving the economy at large. The upcoming exercise will include the identification of best practices, gaps, lessons learnt and establishment of the basis for the development of the next strategic plan for the health sector together with all respective stakeholders.




As far as the other frameworks are concerned, the following amendments and initiatives will be undertaken as proposed in the MOHW Budget FY 2024-2025:

- I) The Allied Health Professionals Council Act will undergo an amendment, extending the period for individuals to practice as allied health professionals by three years.
- II) The Ayurvedic and Other Traditional Medicines Act will be amended to facilitate the registration of specialists in the field of Ayurvedic and Other Traditional Medicines.
- III) The Dental Council Act, Medical Council Act and Pharmacy Council Act will be amended to review the requirement for a Higher School Certificate, or its equivalent, for the registration of dental surgeons, general practitioners and pharmacists respectively.
- IV) The Private Health Institutions Act will be amended to cater for Scientific Research and Development Laboratories and allow for the conduct of activities related to scientific research and development.
- V) The National Social Inclusion Foundation (NSIF) which manages the Corporate Social Responsibility funds from private sector will contribute, in the Consolidated Fund, for financing, amongst others, the following social schemes and programmes – (i) Overseas Treatment Scheme; (ii) Grant for Antenatal Care; and (iii) L'Allocation Egalité des Chances.
- VI) Medical, Biotechnology or Pharmaceutical Sector income will be taxed at the rate of 15% instead of 3% in order to comply with international norms. This would increase revenue which could be reinvested in public health.




## 5.2 STRATEGIC DIRECTIONS

In order to build on the health gains achieved and further improve healthcare services, the Ministry has set out its strategic direction for the next three years. Accordingly, the following strategies will be implemented:

Strategic Directions		Enablers
<b>Reduce preventable and premature morbidity, mortality and disability due to NCDs</b>		<ul style="list-style-type: none"> <li>▪ Accelerate the implementation of the National Integrated NCD Action Plan 2023–2028 to scale-up the screening services for early detection of NCDs</li> <li>▪ Pursue Human Papillomavirus vaccination for children (aged 9 to 15 years)</li> <li>▪ Set up Obesity Clinics in all health regions</li> <li>▪ Strengthen cardiac prevention services through Cardiac Risk Assessment Score and Cardiac Registry</li> <li>▪ Pursue the implementation of the National Action Plan for Tobacco Control 2022-2026, the National Cancer Control Programme 2022-2025, the National Action Plan for Oral Health 2022-2027, the National Action Plan to reduce the Harmful Use of Alcohol 2020-2024, the Integrated Care for Older People Action Plan 2022-2026 and the National Strategy for Adolescent Health 2024-2029</li> </ul>
<b>Modernisation of public health infrastructures for improved health care service delivery</b>		<ul style="list-style-type: none"> <li>▪ Operationalise the new hospital at Flacq</li> <li>▪ Introduce an effective mechanism for the timely maintenance of health infrastructures</li> <li>▪ Construct the Flacq Teaching Hospital (Phase 2) with private sector participation</li> </ul>
<b>Provision of specialised health care services</b>		<ul style="list-style-type: none"> <li>▪ Fully operationalise the National Cancer Centre</li> <li>▪ Complete the construction of the new Subramania Bharati Eye</li> <li>▪ Hospital at Reduit and the Renal Transplant Unit at J. Nehru Hospital</li> <li>▪ Construct a Haemodialysis Unit at the SSRN Hospital, a new Orthopaedic Appliance Workshop and a new Autistic Ward</li> <li>▪ Construct the National Health Laboratory Services Centre and the new Cardiac Centre with private sector participation</li> <li>▪ Establish an AYUSH Centre of Excellence with the collaboration of the Indian Authorities</li> <li>▪ Acquire high tech medical equipment to improve treatment</li> </ul>

Strategic Directions	Enablers
<b>Decentralisation of health services</b>	 <ul style="list-style-type: none"> <li>▪ Provision of targeted specialised services in different Medi-Clinics</li> <li>▪ Construct additional Medi-Clinics, 4 Area Health Centres (AHC), 7 Community Health Centres (CHC) and upgrade existing primary healthcare infrastructures</li> <li>▪ Complete construction of and operationalise 4 additional Area Health Centres (Bambous, Curepipe, New Grove and Cap Malheureux) and 2 Community Health Centres (Roche Bois and Ecroignard)</li> </ul>
<b>Reinforce health resilience against emerging and re-emerging infectious diseases</b>	 <ul style="list-style-type: none"> <li>▪ Implement the National Action Plan for Health Security and operationalise the Public Health Emergency Operations Centre</li> <li>▪ Reinforce the Infection and Prevention Control programme to reduce Hospital Acquired Infections (HAIs)</li> <li>▪ Implement rapid testing for novel synthetic drugs to facilitate diagnosis and treatment</li> <li>▪ Set up a sterile mosquito production facility to prevent the spread of mosquito-borne diseases such as Dengue/Chikungunya/Zika and the invasion of new mosquito vectors</li> </ul>
<b>Ensure health for all and enhance the quality of patient-centred services</b>	 <ul style="list-style-type: none"> <li>▪ Formulate a new Health Sector Strategic Plan, with the collaboration of the World Health Organization</li> <li>▪ Strengthen personalised-patient services</li> <li>▪ Modernise the legal framework for Private Health Institutions</li> <li>▪ Undertake quality assurance and audit of hospital services to improve overall care</li> <li>▪ Pursue capacity building programmes for medical and paramedical staff</li> <li>▪ Enhance logistics for HIV treatment in line with the HIV National Action Plan 2023 – 2027</li> <li>▪ Pursue the implementation of the Sexual and Reproductive Health Action Plan 2022-2027 and the Action Plan for the prevention of Sexually Transmitted Infections 2023-2027</li> <li>▪ Scale up the existing Fertility Clinic services at the SSRN Hospital and Victoria Hospital and extend fertility services to other Regional Hospitals</li> <li>▪ Set up facilities in all health regions to integrate patients with autistic spectrum disorder</li> </ul>



Strategic Directions	Enablers
	<ul style="list-style-type: none"> <li>▪ Enhance tertiary care services including renal transplant, spine surgery, endodontics and orthodontics</li> <li>▪ Modernise the Public Health legal framework to cater for genomics, cord blood, assisted reproductive technologies and fertility services</li> <li>▪ Improve access to mental health services including community mental health in collaboration with community organisations</li> </ul>
<b>Efficient procurement, storage and distribution of medical supplies</b>	 <ul style="list-style-type: none"> <li>▪ Fully operationalise the Central Medical Procurement Authority</li> <li>▪ Construct a State-of-the-Art Modern Warehouse with private sector participation for storage and distribution of medicines, drugs, vaccines, medical disposable and other supplies</li> <li>▪ Resort to WHO Small Islands Development States pooled procurement initiative</li> </ul>
<b>Digitalising the health services</b>	 <ul style="list-style-type: none"> <li>▪ Roll out E-Health in all health facilities</li> <li>▪ Ensure infrastructure readiness for E-Health implementation</li> <li>▪ Establish a mechanism for an effective implementation of Digital Health initiatives</li> <li>▪ Implement real-time monitoring of healthcare expenditures and operations of public health facilities through E-Health</li> </ul>
<b>Encourage community participation for wellness of population</b>	 <ul style="list-style-type: none"> <li>▪ Partner with local organizations, businesses, schools, healthcare providers, government agencies, Senior Citizen Council, Religious Leaders and NGO's to promote healthy lifestyles</li> <li>▪ Empower community members by promoting health literacy</li> </ul>

Source: MOHW Budget FY 2024-2025