

SENATE*Tuesday, February 21, 2006*

The Senate met at 1.30 p.m.

PRAYERS[MADAM PRESIDENT *in the Chair*]**LEAVE OF ABSENCE**

Madam President: Hon. Senators, I have granted leave of absence to Sen. The Hon. Dr. Lenny Saith, Sen. The Hon. Mustapha Abdul-Hamid; Senators Ramesh Deosaran and Ato Boldon who are out of the country and Sen. The Hon. John Jeremie and Sen. The Hon. Satish Ramroop who are ill.

SENATORS' APPOINTMENT

Madam President: Hon. Senators, I have received the following correspondence from His Excellency the President, Prof. George Maxwell Richards:

“THE CONSTITUTION OF THE REPUBLIC OF TRINIDAD AND TOBAGO

By His Excellency Professor GEORGE MAXWELL RICHARDS, T.C., C.M.T., PhD, President and Commander-in-Chief of the Republic of Trinidad and Tobago.

/s/ G. Richards
President.

TO: MRS. JOAN HACKSHAW-MARSLIN

WHEREAS Senator Dr. Lenny Saith is incapable of performing his duties as a Senator by reason of his absence from Trinidad and Tobago:

NOW, THEREFORE, I, GEORGE MAXWELL RICHARDS, President as aforesaid, acting in accordance with the advice of the Prime Minister, in exercise of the power vested in me by section 44 of the Constitution of the Republic of Trinidad and Tobago, do hereby appoint you, JOAN HACKSHAW-MARSLIN, to be temporarily a member of the Senate, with effect from 21st February, 2006 and continuing during the absence from Trinidad and Tobago of the said Senator Dr. Lenny Saith.

Given under my Hand and the Seal of the
President of the Republic of Trinidad and

Senators' Appointment
[MADAM PRESIDENT]

Tuesday, February 21, 2006

Tobago at the Office of the President, St. Ann's, this 17th day of February, 2006.”

“THE CONSTITUTION OF THE REPUBLIC OF TRINIDAD AND TOBAGO

By His Excellency Professor GEORGE MAXWELL RICHARDS, T.C., C.M.T., PhD, President and Commander-in-Chief of the Republic of Trinidad and Tobago.

/s/ G. Richards
President.

TO: MRS. MAGNA WILLIAMS-SMITH

WHEREAS Senator Mustapha Abdul-Hamid is incapable of performing his duties as a Senator by reason of his absence from Trinidad and Tobago:

NOW, THEREFORE, I, GEORGE MAXWELL RICHARDS, President as aforesaid, acting in accordance with the advice of the Prime Minister, in exercise of the power vested in me by section 44 of the Constitution of the Republic of Trinidad and Tobago, do hereby appoint you, MAGNA WILLIAMS-SMITH, to be temporarily a member of the Senate, with immediate effect from 21st February, 2006 and continuing during the absence from Trinidad and Tobago of the said Senator Mustapha Abdul-Hamid.

Given under my Hand and the Seal of the President of the Republic of Trinidad and Tobago at the Office of the President, St. Ann's, this 17th day of February, 2006.”

“THE CONSTITUTION OF THE REPUBLIC OF TRINIDAD AND TOBAGO

By His Excellency Professor GEORGE MAXWELL RICHARDS, T.C., C.M.T., PhD, President and Commander-in-Chief of the Republic of Trinidad and Tobago.

/s/ G. Richards
President.

TO: MR. FRANCIS PAU

WHEREAS Senator John Jeremie is incapable of performing his duties as a Senator by reason of illness:

NOW, THEREFORE, I, GEORGE MAXWELL RICHARDS, President as aforesaid, acting in accordance with the advice of the Prime Minister, in exercise of the power vested in me by section 44 of the Constitution of the Republic of Trinidad and Tobago, do hereby appoint you, FRANCIS PAU, to be temporarily a member of the Senate, with immediate effect and continuing during the period of illness of the said Senator John Jeremie.

Given under my Hand and the Seal of the President of the Republic of Trinidad and Tobago at the Office of the President, St. Ann's, this 21st day of February, 2006."

"THE CONSTITUTION OF THE REPUBLIC OF TRINIDAD AND TOBAGO

By His Excellency Professor GEORGE MAXWELL RICHARDS, T.C., C.M.T., PhD, President and Commander-in-Chief of the Republic of Trinidad and Tobago.

/s/ G. Richards
President.

TO: MR. NILEUNG ROLAND HYPOLITE

WHEREAS Senator Satish Ramroop is incapable of performing his duties as a Senator by reason of illness:

NOW, THEREFORE, I, GEORGE MAXWELL RICHARDS, President as aforesaid, acting in accordance with the advice of the Prime Minister, in exercise of the power vested in me by section 44 of the Constitution of the Republic of Trinidad and Tobago, do hereby appoint you, NILEUNG ROLAND HYPOLITE, to be temporarily a member of the Senate, with immediate effect and continuing during the period of illness of the said Senator Satish Ramroop.

Given under my Hand and the Seal of the President of the Republic of Trinidad and Tobago at the Office of the President, St. Ann's, this 21st day of February, 2006."

Tuesday, February 21, 2006

“THE CONSTITUTION OF THE REPUBLIC OF TRINIDAD AND TOBAGO

By His Excellency Professor GEORGE
MAXWELL RICHARDS, T.C., C.M.T., PhD,
President and Commander-in-Chief of the
Republic of Trinidad and Tobago.

/s/ G. Richards
President.

TO: MS. ALTHEA ROCKE

WHEREAS Senator Professor Ramesh Deosaran is incapable of performing his duties as a Senator by reason of his absence from Trinidad and Tobago:

NOW, THEREFORE, I, GEORGE MAXWELL RICHARDS, President as aforesaid, in exercise of the power vested in me by section 40(2)(c) and section 44 of the Constitution of the Republic of Trinidad and Tobago, do hereby appoint you, ALTHEA ROCKE, to be temporarily a member of the Senate, with immediate effect and continuing during the absence from Trinidad and Tobago of the said Senator Professor Ramesh Deosaran.

Given under my Hand and the Seal of the
President of the Republic of Trinidad and
Tobago at the Office of the President, St.
Ann's, this 17th day of February, 2006.”

OATH OF ALLEGIANCE

The following Senators took and subscribed the Oath of Allegiance as required by law:

Joan Hackshaw-Marshlin, Magna Williams-Smith, Francis Pau, Nileung Roland Hypolite, and Althea Rocke.

WELCOME TO NEW SENATORS

Madam President: Hon. Senators, since I was not in the Senate last week, let me take this opportunity to welcome our two new Senators. Dr. Gopeesingh of course, has been with us as a temporary Senator on a number of occasions, but I believe that his appointment is now a more permanent one. So we welcome you back. A special welcome to our new Senator, Mr. Ato Boldon, who has advised me that despite strenuous efforts to get here today, he is unavoidably absent. I look forward to his contributions and wish him well in his new role.

It would be remiss of me if I did not thank both Senators Robin Montano and Roy Augustus for their roles in the Senate. They both made excellent contributions to debates, always concise and factual. Although Sen. Montano and I may have had our differences of opinion on a few occasions, I welcomed his legal analysis especially at the committee stage. I wish them both well. [*Desk thumping*]

**VALIDATION OF THE FIFTH REPORT OF THE ELECTIONS AND BOUNDARIES
COMMISSION (LOCAL GOVERNMENT) BILL**

A Bill to validate the Fifth Report of the Elections and Boundaries Commission under the Elections and Boundaries Commission (Local Government) Act, Chap. 25:50 for the purpose of Local Government Elections, brought from the House of Representatives [*The Minister Local Government*]; read the first time.

PAPERS LAID

1. Annual Report of the Central Bank of Trinidad and Tobago for the year ended September 30, 2005. [*The Minister in the Ministry of Finance (Sen. The Hon. Conrad Enill)*]
2. Report of the Auditor General of the Republic of Trinidad and Tobago on the financial statements of the Tobago House of Assembly for the year ended September 30, 2002. [*Sen. The Hon. C. Enill*]
3. The Eightieth Report of the Salaries Review Commission on a General Review of Salaries and other Conditions of Service of Officers within the purview of the Commission. [*Sen. The Hon. C. Enill*]
4. Administrative Report of the Ministry of the Attorney General for the period 2003 to 2004. [*The Minister of Community Development, Culture and Gender Affairs (Sen. The Hon. Joan Yuille-Williams)*]

ORAL ANSWERS TO QUESTIONS

**Enforcement of Order
(Jamaat al Muslimeen)**

- 17. Sen. Wade Mark** asked the hon. Attorney General:
- (a) Could the Attorney General state whether the Government intends to enforce the order for the payment of compensation of interest and costs made by Justice Joseph Tam to members of the Jamaat al Muslimeen during the insurrection of 1990?

- (b) If the Government has such intention, could the hon. Attorney General state what steps have been taken to enforce the judgment of hon. Joseph Tam that the members of the Jamaat al Muslimeen pay compensation which today stands at over \$40 million?

Sen. Joan Hackshaw-Marslin: The Government of Trinidad and Tobago intends to enforce the Order for the payment of compensation of interest and costs made by Justice Joseph Tam against members of the Jamaat al Muslimeen during the insurrection of 1990.

Enforcement procedures have been commenced. The return date for the summons of sale of property, subject to the judgment is March 10, 2006.

Sen. Mark: Madam President, if my friend, Sen. Hackshaw-Marslin is in a position to answer, I would like to ask if the Senator could tell us what is the sum that is involved? [*Inaudible*] No, no. I have \$40 million here; I have seen another figure elsewhere. So I would like the Senator, if she can, to clear the air, whether it is \$40 million, \$19 million or \$20 million?

Sen. J. Hackshaw-Marslin: Madam President, I do not have the answer to that question. The hon. Senator may wish to raise it with the hon. Attorney General at the next sitting.

Sen. Mark: Madam President, may I through you? Maybe after carnival, the Tuesday after, would you allow me the opportunity to just clear the air on this matter when the hon. Attorney General is here?

Madam President: The Leader of Government Business would you advise the Attorney General accordingly.

Sen. Yuille Williams: I will.

Terms and Conditions of Out of Court Settlement (CCN TV6/NLCB)

- 41. Sen. Wade Mark** asked the hon. Minister of Finance:

Could the Minister provide to the Senate details of the terms and conditions of an out of court settlement involving CCN TV6 management and the National Lotteries Control Board in respect of a Memorandum of Agreement which was signed between the Chairman of the NLCB and the management of CCN TV6 for the airing of the on-line games which were to begin from January 15th, 2005 and which were never aired on CCN TV6?

The Minister in the Ministry of Finance (Sen. The Hon. Conrad Enill): By letter dated December 30, 2004, the Chairman, National Lotteries Control Board indicated the Board's approval for CCN TV6 to begin preparations on facilities for the operations and broadcasting of the on-line games. The Chairman also asked that CCN TV6 submit a draft contract for the NLCB's perusal and agreement. Negotiations between NLCB and CCN TV6 were terminated because CCN TV6 was unable to maintain NLCB's 6.30 p.m. draw time and instead requested that the company change the draw time to 6.32 p.m. NLCB advised however, that the time change would have required major software changes on the NLCB's part. After protracted discussions, the parties failed to arrive at an agreement to this impasse. As a result, NLCB withdrew from the negotiating table before a formal contract was completed.

Following this action by the NLCB, CCN TV6 advised the NLCB that they (CCN TV6) had already made a significant investment in building materials for the construction of the studio to accommodate NLCB. They served notice on NLCB for the recovery of the sum of \$24,249.95. The Board of NLCB considered the matter and agreed to pay the said amount to CCN TV6. This was paid on June 08, 2005 in full and final settlement.

Sen. Mark: Is the Minister indicating to us that there was never a signed agreement between CCN TV6 and the National Lotteries Control Board, but just a gentlemen's agreement?

Sen. The Hon. C. Enill: At the time that NLCB withdrew from the negotiating table, a formal contract was not signed.

Sen. Mark: Could the Minister indicate whether there was a formal agreement signed by both parties as far as he is aware?

Madam President: I think he just answered the question.

Sen. Mark: In other words, he is saying at the time of the withdrawal there was none, so I am asking him whether he can categorically state that no agreement was signed.

Madam President: Can you categorically state?

Sen. The Hon. C. Enill: Madam President, I would categorically repeat what I just said. As a result, NLCB withdrew from the negotiating table before a formal contract was completed.

Sen. Mark: The Minister did indicate that there was a disagreement in terms of time, could he elaborate for us what is the implication of that? He said it was

6.30 and CCN TV6 was 6.32 and that caused a breakdown, could he elaborate for us?

Sen. The Hon. C. Enill: Negotiations between NLCB and TV6 were terminated because TV6 was unable to maintain NLCB's 6.30 p.m. draw time and instead requested that the company, NLCB, changed the draw time to 6.32 p.m. NLCB advised however, that the time change would have required them to make major software changes and that did not meet with their requirements.

**National Lotteries Control Board Chairman
(Role and duties of)**

42. Sen. Wade Mark asked the hon. Minister of Public Administration and Information and Minister of Energy and Energy Industries:

Could the Minister provide to the Senate the role and duties of the Chairman of the National Lotteries Control Board, Mr. Louis Lee Sing, in the management and operation of the Information Channel 4/NCC Channel 4 between the period January 15th to October 31st, 2005?

The Minister of Community Development, Culture and Gender Affairs (Sen. The Hon. Joan Yuille-Williams): Mr. Lee Sing acted as a consultant to the National Cultural Council and to the NCC programme committee with respect to the running of Channel 4. Payments to Mr. Lee Sing for services rendered are made to the Internet Cafe as the contract is with this organization. Mr. Lee Sing has provided advice on the programming structure, technical operations and the level of upgrade that should be undertaken during the lease period to enhance the quality of service.

**Caribbean Court of Justice
(Status of)**

43. Sen. Wade Mark asked the hon. Attorney General:

- A. Could the Attorney General indicate to the Senate whether the Caribbean Court of Justice is active and functioning?
- B. If the answer to A is in the affirmative, could the Attorney General inform this House:
 - (i) how many cases have been heard by the Court as at December 20, 2005; and
 - (ii) provide a brief description of the nature of the cases heard as at the date above?

The Minister of Community Development, Culture and Gender Affairs (Sen. The Hon. Joan Yuille-Williams): The Caribbean Court of Justice is a regional judicial body established on February 14, 2001, by the agreement establishing the Caribbean Court of Justice. The Government of Trinidad and Tobago is one of 15 signatories to this agreement. As such, the Court is not funded by the Government of Trinidad and Tobago, but by a trust fund established by all Caricom heads. The Court is an independent regional institution which does not report through the Attorney General, to the Parliament of Trinidad and Tobago. The Court reports to the Regional and Judicial Legal Service Commission which is appointed by Caribbean heads pursuant to the agreement to establish the court. Nevertheless, the Attorney General has by letter dated January 17, 2006, written to the President of the court requesting his comments, if any, on the question posed by the Senator. As of January 30, 2006, no response to this letter has been received from the Caribbean Court of Justice. As a consequence, the Attorney General is unable to give the information requested. Request for information of this sort may be directed to the Court itself.

**National Lotteries Control Board Members
(Details of)**

50. Sen. Basharat Ali asked the hon. Minister of Finance:

Could the Minister of Finance provide the Senate with the qualifications relevant to the performance of their functions as members of the National Lotteries Control Board of the following persons:

- (i) Ms. Norma Lewis-Phillip
- (ii) Ms. Cherryl Guide
- (iii) Ms. Lindsay Parmashwar
- (iv) Mr. Carl Groome

The Minister in the Ministry of Finance (Sen. The Hon. Conrad Enill): The National Lotteries Act, Chap. 21:04, Part I, section 3 states *inter alia*, that:

- “(2) The Board shall consist of a Chairman and not more than four other members.
- (3) The Chairman and members of the Board shall be appointed by the Minister and the appointment shall, subject to subsection (4), be for such period as may be specified in the instrument of appointment.”

Subsection (4) states that:

“A member may at any time resign his office by notice in writing addressed to the Chairman who shall forthwith cause it to be forwarded to the Minister.”

The Act does not stipulate any qualifications relevant to the performance of the functions for Members of the Board. It should be noted however, that Ms. Norma Lewis-Phillip’s term as a Member of the NLCB ended on January 24, 2006.

FAIR TRADING BILL

An Act to provide for the establishment of a Fair Trading Commission, to promote and maintain fair competition in the economy, and for related matters [*The Minister of Trade and Industry*]; read the first time.

**COMMITTEE OF PRIVILEGES
JOINT SELECT COMMITTEE—MUNICIPAL CORPORATIONS
AND SERVICE COMMISSIONS
(Appointment to)**

The Minister of Community Development, Culture and Gender Affairs (Sen. The Hon. Joan Yuille-Williams): Madam President, I beg to move the following Motion:

Be it resolved that this Senate appoint Dr. Tim Gopeesingh to replace Mr. Robin Montano on the Committee of Privileges of the Senate and on the Joint Select Committee appointed to Report on the Municipal Corporations and Service Commissions with the exception of the Judicial and Legal Service Commission.

Question put and agreed to.

2.00 p.m.

PHARMACY BOARD (AMDT.) BILL

Order for second reading read.

The Minister of Health (Hon. John Rahael): Madam President and hon. Senators, I beg to move,

That a Bill to amend the Pharmacy Board Act, Chap. 29:52, be now read a second time.

I am pleased to present this Bill to the honourable Senate. The Bill seeks to amend the Pharmacy Board Act to provide for the automatic registration of

graduates of universities and colleges listed in the proposed Sixth Schedule to the Act and also to remove the obligation of the Council of the Pharmacy Board to register and maintain a register of pharmacy students and pharmacy assistant trainees. This Bill seeks to simplify the registration process for the pharmacists.

I also intend to move two amendments to the present Bill before us, which have been circulated. One amendment is to the proposed Sixth Schedule where additional universities and colleges will be added. Clause 5 will also be amended by replacing the word "pharmacology" with the word "pharmacy" and deleting the word "diploma" in section 18(a).

Pharmacology is the science of the action of drugs on the body; whereas, the study of pharmacy involves the preparation and dispensing of drugs. A degree in pharmacology does not allow one to practise pharmacy. Further, one possessing a diploma in pharmacy will not automatically qualify for registration.

I take this opportunity to remind this honourable Senate that the Government, since 1997, embarked on a programme aimed at reforming the health sector. This programme is expected to end in mid 2007. The reform programme aims at promoting wellness and ensuring the availability of quality health care to the people of Trinidad and Tobago in an affordable, sustainable and equitable manner.

The main objectives of the programme are to strengthen the health sector policy and its planning capability; to ensure that the public health sector expenditure shifts to services that would reduce health problems; to influence a similar shift in private sector spending; to promote quality health care to achieve a high level of cost effectiveness in the public and private services consumed; to develop a high level of public awareness of the relationship between payment for service and health outcomes and to promote lifestyles and other interventions aimed at reducing preventable morbidity and mortality.

We are committed to the success of this programme and to the overall improvement of the health sector. Accordingly, there are many other activities presently being undertaken in the health sector, which are not covered by the health sector reform; such activities include the creation of two dialysis centres. Let me say at the outset that, in fact, I myself am disappointed that we have not as yet established these two dialysis centres. One of the reasons for this is that we went through the entire process.

We went out through the Central Tenders Board (CTB) and after months of evaluating and making the report available from the evaluation team, on which

the Central Tenders Board also sat, the CTB aborted the entire process without explanation. So the entire process had to be restarted. The proposal for the tenders are out and we are waiting. I think the closing of the receipt of the tenders is at the end of March. We are pursuing the initiative of establishing two dialysis centres, one in South Trinidad and one in North/Central Trinidad.

Madam President, end stage renal failure is brought about by diabetes, hypertension. The Ministry of Health, being very conscious of that, is taking measures to deal with that situation from a preventative and primary health care initiative and also at the tertiary health care level, where we are also embarking on a kidney transplant.

As you are aware, last year we did pass the regulations for transplantation and the Ministry of Health has a support kidney programme initiative; the unit has been established. Initially, that programme would start at the Eric Williams Medical Sciences Complex. As a matter of fact, very quietly about a month ago, we did our first live kidney transplant under this project at the Eric Williams Medical Sciences Complex and we are hoping to roll it out to also do those types of transplantation at the Port of Spain General Hospital and the San Fernando General Hospital.

This is in collaboration with the Jackson Hospital in Miami and we are hoping that once we move forward with respect to the transplantation of live donors, we would also move towards cadavers. That would make the public aware that they can become donors, so if they do become brain dead, we would be able to retrieve their kidneys to make them available to other citizens of Trinidad and Tobago.

As it stands right now, there are over 1,000 patients being dialyzed or in need of dialysis. The Ministry of Health, in addition to providing more beds at Mount Hope, San Fernando and Port of Spain, has also included the private sector where, at times, we assist patients who cannot afford to be dialyzed. These two dialysis centres would each accommodate 200 persons. As I said, there will be one dialysis centre in the South and one in North/Central.

We are also aware of the problem with respect to elective surgical care. It is a major problem, not only in Trinidad and Tobago, but worldwide. The waiting list for simple elective surgery in the United Kingdom can be as long as six months to one year. In Canada, it is not much better. I think it was two years ago the hon. Sen. Dr. Gopeesingh made a statement that there were about 11,000 patients on the waiting list. I advise this honourable Senate that, in fact, we have put in place for the past two years a surgical unit at the Ministry of Health.

Because the records at some of our institutions were not properly written, we even advertised on the radio, television and in the press, informing public health patients that if they were waiting for surgery they should call certain numbers and give us the information. We were able to do that by promoting the initiative of getting these surgeries done; some at our public institutions and, to a lesser extent, at private institutions.

In the year 2005, the Ministry of Health through the Regional Health Authorities did over 30,000 surgeries. [*Desk thumping*] Never before were we able to achieve that kind of number. As a matter of fact, the maximum achieved in any previous year was 25,000; so that is almost a 50 per cent increase. We were able to reduce the whole question of a waiting time for patients waiting for surgeries from two years to eight years. There were many elderly persons waiting for surgeries for cataracts, hernia and a lot of procedures that were elective such as fibroids and many others.

I am also pleased to inform this honourable Senate that in addition to moving forward with reducing the waiting list, we also looked at the question of a national health insurance system. That has been talked about for some 30 years now. As a matter of fact, in the year 2005, a steering committee was established with a mandate to recommend an appropriate model for a national health insurance system and to subsequently oversee the implementation of that system. It is expected that all the pre-implementation activities, including the development of a population registration and accreditation of providers, will be completed during the course of this year. Our goal is to commence system implementation in the year 2007.

On Thursday, Cabinet will get a report indicating the model recommended. As we are aware, there are many models in the world; you have the American system where you actually buy insurance. You have the Canadian system where there is a social programme and you also have the French system. We looked at all these systems and at the reports that were commissioned by PricewaterhouseCoopers 10 or 15 years ago. The steering committee is made up of persons from different sectors: insurance companies, the medical board and all the various stakeholders. The committee had implementation, where they had the necessary support in order to make this proposal.

We also interacted with many of the stakeholders. We made presentations to the stakeholders as well, as to the type of system being recommended. It is not cast in stone; this was a recommendation that the steering committee came up with, which is going to Cabinet this week. In addition to that, we also started the

school health programme that targets hearing and vision in primary schools and will eventually target secondary schools. We expect that in 2005/2006 we would do over 40,000 kids. We have already done quite a number of schools. We started with testing of their hearing. We screen these kids to see if they need further tests. If they need further testing, they would then move to the next stage of being tested. Based on the tests done on the child, it would then be determined what is required to improve the hearing of the child.

That is a joint project between the Ministry of Health and the Ministry of Education. Both ministries work together to ensure that our pupils are not left behind because of a lack of vision or hearing. The vision element of the programme we hope to implement in the second quarter of 2006, at the beginning of April. I am very pleased with the programme, because we are ensuring that kids who have hearing problems are no longer determined to be hardened or dunce and put to the back of the class. We are also ensuring that the child who does not see properly and whose teacher may not be aware of it, will not be put to the back of the class, making it even worse. [*Interruption*]

Madam President: I am reluctant to disturb you, because you are really giving us some excellent information, but I think we need to come back to the Bill before us, please.

Sen. Mark: I am very thankful for the President's intervention.

Hon. J. Rahael: I have absolutely no problem with complying with your request. I just thought it would be good information for the hon. Senators on the other side. We could talk a lot about the CDAP programme. Over 160,000 citizens of Trinidad and Tobago have accessed that programme.

Madam President: Mr. Minister, come back to the Bill.

Hon. J. Rahael: Madam President, let us talk a little about the Pharmacy Board Act.

Sen. Mark: That is very good. [*Laughter*] Thank you very much.

Hon. J. Rahael: I noticed that there was nothing else on the Order Paper, Madam President, so I was trying to ensure that the Senators do work for their pay. [*Laughter*]

Sen. Mark: No matter how small it is.

Hon. J. Rahael: We have found, after reviewing the Pharmacy Board Act, that the process one must endure before one is trained and registered as a

pharmacist, is cumbersome, unnecessary and, oftentimes, leads to frustration, thereby acting as a deterrent to persons pursuing and those wishing to pursue a career in this discipline.

Madam President, this process may have been relevant when passed, but we are of the firm view that it is now unnecessary as the programme has changed since 1996. In 1996, the part-time diploma programme was discontinued and replaced with a full-time four-year bachelor of science in pharmacy degree. So that the programme which now exists, was introduced after 1996. It is a four-year bachelor of science pharmacy degree. It is material to note that the existing infrastructure, the School of Pharmacy, can facilitate, at least, 45 students per year. However, over the past few years, we have failed to attract a significant number of students.

In 2001, 25 graduated out of a class of 26. In 2003, 22 graduated out of a class of 26. In 2003, 18 graduated out of a class of 18. In 2004, 23 graduated out of a class of 22, because there was one repeat; so the entire class was 23. In 2005, we had 10 graduating out of a class of eight, with two additional repeats; so that is 10 out of 10. We are seeing here that the graduates who stay in the system are very successful. The problem is that one gets frustrated in the system.

To give you an example; in 2001, the number of those who went to study pharmacy was 19. The numbers are as low as we see them here; although in 2005, we see an intake of 39, which is very encouraging. Prior to 2005, we have seen a decrease in the number of students pursuing the programme. We have a large intake, but a lot of them are not continuing to pursue the programme. After a while they drop off for whatever reason; most of them go on to do medicine. Therefore, we are currently developing a strategy geared toward attracting more people to this discipline.

This amendment is one of such activity. It is our intention to do all that is necessary to have, at least, 60 persons trained per year. It is with regret that I report that we encountered resistance when we sought to introduce foreign pharmacists in the system. You would remember that when we brought in the 50 Philippine pharmacists, we got resistance, not only from the local pharmacists, but also from the Pharmacy Board. Notwithstanding the provisions of the Pharmacy Board Act, the Council introduced a new criterion to be satisfied by foreign pharmacists. I want to repeat that.

The fact is, even before we brought the Philippine pharmacists to Trinidad and Tobago, we consulted with the Pharmacy Board. They gave us the impression that it was not a problem; that once they had a degree they would be registered. When

they arrived, the frustration that the Ministry got in order to have them registered, left a lot to be desired. In fact, they introduced a new criterion to be satisfied by foreign pharmacists.

Hon. Senator: What was the new criteria?

Hon. J. Rahael: I think it was a further test that they had to sit.

Sen. Mark: What test?

Hon. J. Rahael: I do not know; you have to ask them. [*Crosstalk*] That did not take place, because it did not happen. We ensured that once they were satisfied that they had qualified, like any other foreign pharmacist, they would go through the same process like any other foreign pharmacist. That aside, I will now outline the process one must go through before one is registered as a pharmacist; that is for a Trinidadian. If a Trinidadian wishes to become a pharmacist, before he is accepted by the University of the West Indies to pursue the bachelor of science in pharmacy degree, he must first register with the Pharmacy Board as a pharmacy student.

What are the stages? Stage one: The student must first apply to be registered; produce testimonial satisfactory to the Council; show that he or she has gained two passes at A level, one of which must be chemistry and five ordinary level passes, must include English Language, mathematics, biology, physics and one other subject acceptable to the Council. All well and good; no problem.

The council interviews persons applying to be students to determine their fitness. After you have qualified, after you have gained the 2 A levels; after you have passed five subjects—biology, physics, language, mathematics and two passes, one of which must be chemistry; after you have done all of that, you still have to apply to determine your fitness. A number of persons are rejected; notwithstanding that they possess all the required qualifications.

You must also recognize that the Pharmacy Board is mainly made up of pharmacists. You must also recognize that these pharmacists have their own pharmacies. These pharmacists, most of them, I am advised, own their own pharmacies; so you understand the need to restrict the number of pharmacists in Trinidad and Tobago. I do not need to say more. The Ministry has received over the years numerous complaints from persons who possess the required academic qualifications, but failed the council interview. In fact, many of those same persons went on to do medicine.

After the student obtains the diploma, he is entitled to be registered as a preregistration pharmacist. So let us assume that you are one of those sanctioned by the Pharmacy Board to be a pharmacist; if the Pharmacy Board determines that there are enough pharmacists in Trinidad and Tobago, then that is it. Even if you desire to become a pharmacist, you would not be allowed.

I am not aware of any other profession that allows that. I do not know; I stand to be corrected. There is no other profession in Trinidad and Tobago where a small group of persons determine whether you are allowed to become a student in the University of the West Indies to study pharmacy. That certainly cannot be.

Sen. Seepersad-Bachan: Where is that in the law?

Hon. J. Rahael: Madam President, after the student obtains the diploma, he is entitled to be registered. He has gone through all of this and after he receives his diploma, he is entitled to preregistration as a pharmacist, providing that he satisfies the Council that he has obtained a diploma of pharmacy from the University of the West Indies. [*Interruption*]

Sen. Prof. Ramchand: I am just a little confused. I thought the Minister had said that there was a four-year degree. Can people apply to do the four-year degree without such interviews? [*Crosstalk*]

Hon. J. Rahael: My understanding is no; definitely no.

Madam President: One at a time please.

Sen. Dr. Gopeesingh: What part of the legislation is that? [*Crosstalk*]

Madam President: Do you want to answer the question? [*Crosstalk*]

Sen. Dr. Gopeesingh: Are you making that up John?

Hon. J. Rahael: No, of course not.

Sen. Dumas: Nonsense, Gopeesingh! You know better.

Madam President: Uh, uh, uh! Sen. Dumas, it is not necessary. We are trying to sort out a matter.

Sen. Dumas: He is insulting the man! "How yuh mean he make it up?" [*Crosstalk*]

Hon. J. Rahael: I am advised by counsel that what I am stating here is accurate. My legal advisor has indicated that even with the four-year degree, the preregistration comes into place. The fact of the matter, hon. Senators, is that if tomorrow your son or daughter wishes to become a pharmacist, you cannot have

somebody who determines whether that should be allowed or not allowed; the independent body made up of individuals who may have their own self-interests at stake. That is the point we are establishing. [*Crosstalk*]

[*Sen. Seepersad-Bachan and Sen. Dr. Gopeesingh rise*]

Madam President: One person, please; Sen. Dr. Gopeesingh.

Sen. Dr. Gopeesingh: Hon. Minister, you are saying there is a degree programme for four years. Before you enter that programme, the Pharmacy Board interviews the individual wishing to do the degree programme. What part of the Act indicates that is a necessity or where under the Pharmacy Board does it state that is necessary? Could you draw us to that in writing, please, hon. Minister.

Hon. J. Rahael: Madam President, during our committee stage I will provide that information. I do not have it available to me right now. All I want to tell you, hon. Senators, is that not only have we had many complaints from individuals, but in speaking to one of the tutors at the university, he has also indicated that to me. We will provide the information with respect to what is requested. [*Interruption*]

Sen. Dr. Gopeesingh: If the hon. Minister comes to this Senate to present an amendment to the Pharmacy Board Act and he makes statements at the beginning of his presentation that the Pharmacy Board deliberately restricts people from entering the degree programme because there are certain pharmacists who have their own individual agenda, why has he not brought the evidence to this Senate to show us that part of the restriction is based on what is written in the documentation, rather than bringing it at the committee stage? That should be the preamble to the Pharmacy Board (Amdt.) Bill. [*Desk thumping*]

Sen. Yuille-Williams: I am listening to the debate as it goes on and I am thinking about what happened to my daughter. My daughter is a physical therapist. I remember that she went to Howard University and a medical college for a four-year programme. After two years, she was subjected to an interview; something which none of us knew about. That they all had to be subjected to an interview at that point and out of that they selected those who would continue the programme. It was stated nowhere. I myself was a little taken aback. I thought it was almost automatic. I am wondering if it is the same thing that is happening now, where, at some point, after two years there was an interview and then you move into the degree programme.

Madam President: Senators, please, please. Mr. Minister, there is some concern and maybe you could get that information from your people before you finish your presentation and give it to the Senate.

Sen. Prof. Ramchand: If the university is running a degree programme and people apply for it, how can anybody else intervene and say, "You are not admitted."? I want the university regulation that is being flouted.

Madam President: I have asked the Minister to clarify this matter; continue, please.

Hon. J. Rahael: Hon. Senator, like yourself, it is difficult to understand or to believe. However, we are going to try to get the information. [*Interruption*] It is available; so "we get it; we get it."

Let me put it to you this way, hon. Senators: I have no reason to come here and do anything that has not been properly advised.

Sen. Dumas: They used to restrict people in the university. I was President of the student guild. I know that. Make your case, John! [*Crosstalk*]

Madam President: Can we have some quiet, please.

Hon. J. Rahael: After you have received your diploma, you have to satisfy the council that you have obtained a diploma in pharmacy by the University of the West Indies and has served as a pharmaceutical student while undergoing a course of practice training in pharmacy for, at least, six months. All well and good. Now they are already preregistered pharmacists who have served their internship working under the direct supervision of a pharmacist who has practised for, at least, three years as a registered pharmacist. He or she may then apply to be registered as a pharmacist.

So after he has gone through all this, he now has to apply. After his preregistration as a pharmacist; he has served his internship for six months working under the direct supervision of a pharmacist, who must have, at least, three years experience as a registered pharmacist, then he may apply to be registered as a pharmacist and to do so he must satisfy the Council that he has obtained the age of 18; is of good character and mentally and physically capable of satisfactorily performing the duties of a pharmacist—that is all well and good—has been granted a diploma or degree in pharmacy; has undergone training as a pharmaceutical student for the term prescribed by the Council.

That is all well and good. These are the things you have to satisfy after your preregistration to get full registration. He has to also produce a declaration that he has satisfactorily undergone a period of preregistration experience as a preregistered pharmacist. So you have gone to school; you have studied for four years; you come out; you are preregistered and they say that you have to work as

an intern. You do all that is required. In addition to all that, you also have to obtain a favourable report from the person who supervised you. All these are requirements to move from preregistration to full registration. No problem, but tell me: Why do you still have to pass an examination set by the council?
[*Crosstalk*]

Madam President: Dr. Gopeesingh is asking when.

Hon. J. Rahael: Madam President, let me just finish. The information is that you have qualified with your four-year degree; you come out and you get a preregistration; so you are preregistered. After this preregistration and you spend some time actually practising, six months, then you have to get full recognition. All that is fine, but in addition you have to pass an examination set by the council.
[*Interruption*]

Sen. Dr. Gopeesingh: Madam President, the hon. Minister has made a statement; I am just asking him to substantiate that in writing. [*Crosstalk*] As I am aware, when you finish the degree programme of four years, you do a six-month internship under the supervision of a registered pharmacist and then that pharmacist tells the Pharmacy Board that this person has satisfactorily completed the programme of internship. I am not aware that there is an examination at the end of it.

Sen. Dumas: You are not aware of anything.

Hon. J. Rahael: Well, Madam President, the hon. Senator was not aware; I am now making him aware. [*Laughter*] [*Desk thumping*] I appreciate that you were not aware before, although you are in the medical fraternity.

Sen. Dumas: Defending privilege and abuse!

Hon. J. Rahael: The fact is, I am now making you aware.

I ask hon. Senators: Why should they have to sit another examination set by the council? Understand what is happening here. It is a cartel that is restricting the whole development of pharmacists in Trinidad and Tobago. That is the reality.
[*Crosstalk*]

Sen. Dumas: The whole medical cartel! [*Crosstalk*] [*Interruption*]

[*Cell phone rings*]

Madam President: Somebody has a cell phone on.

Sen. Bro. Khan: I am sorry.

Madam President: Will everyone please check that their cell phones are off.

Hon. J. Rahael: After a period of one year working under the supervision of a responsible pharmacist, the individual is considered a responsible pharmacist. So there is layer after layer after layer to really frustrate the individual in becoming a pharmacist. That is why we saw large intakes into the pharmacy school, but dropouts after they realize what the process was.

With respect to students and pharmacy assistants, clause 3 of the Bill seeks to amend section 17(1) by deleting paragraphs (c) and (e). It is material to note that this Act was amended by the previous administration by allowing for the introduction of a new cadre of staff called "pharmacy assistants", excellent.

Hon. Senator: Under what section?

Hon. J. Rahael: Clause 3 of the Bill seeks to amend section 17(1) by deleting paragraphs (c) and (e). [*Crosstalk*] Look under clause 3. It is material to note that this Act was amended by the previous administration by allowing for the introduction of a new cadre of staff called pharmacy assistants.

Sen. Seetahal: Minister, if I may, is that not in Act No. 25 of 2003, which was in this administration's time, as I understand it? Section 17 was amended by Act No. 25 of 2003, creating a register of pharmacy assistant trainees. Act No. 12 of 1998, which was passed under the previous administration, did not create or amend section 17; I think you have it a little wrong.

Hon. J. Rahael: So it was this administration that did it? Well, bravo for this administration. [*Laughter*]

Sen. Seepersad-Bachan: So it is bravo now?

Hon. J. Rahael: I was congratulating the previous administration for doing it, but, obviously, I was ill-informed.

Madam President: Senators, you are not listening. I heard the Minister complimenting.

Hon. J. Rahael: Nevertheless, the fact of the matter is that the pharmacy assistants were expected to perform non-technical functions. It was never implemented whenever it was amended. We have been working for the past two years to introduce this training programme to have persons already in the system trained to hold such positions as pharmacy assistants. [*Interruption*] I am pleased to report that the first batch of 50 students would begin training in March of this year.

It is expected that 200 students will be trained over a four-year period. Such individuals are being trained for both the public and private sector. It is our intention that all persons who are currently employed in public and private pharmacies who meet the criteria, would have access to the programme. This is the pharmacy assistant programme. So in addition to ensuring that we have enough pharmacists, we are also introducing a pharmacy assistant programme that would help the existing pharmacists in their work. This is all toward our continuing effort to raise the standard of health care by relieving the professionals of non-technical work, allowing them to concentrate on purely technical matters. That is what the pharmacists are supposed to do.

We are of the view that such students need not be registered by the Pharmacy Council prior to undergoing training. That is the amendment we are making here this afternoon. After they have successfully completed their training, they will then be obligated to register with the council and be subject to the rules of the council of the Pharmacy Board. These individuals do not need to register with the Pharmacy Council prior to undergoing the pharmacy assistant programme. If you want to enter that programme, you can do so without having the approval of the council.

Madam President, clause 4 seeks to repeal section 17(A) of the Act, which mandates one to register as a preregistration pharmacist. This provision is relevant as students must now undergo a full four-year degree programme. This provision was necessary, I said earlier, prior to 1996, but now that you have a four-year degree, we do not see the need for students to have preregistration. In that degree you would have all the necessary training and, if necessary, clinical training as well.

After you have done your four-year degree, you should be registered. There is no need for preregistration and then to have to be registered, to have the pharmacists subjected to that. That might have been so prior to 1996 when it was a three-year diploma, but now it is a full degree.

Clause 5 seeks to repeal section 18 of the Act and substitute it with a new section 18 which details a simpler process. The process would bring this discipline in line with other professions. This afternoon we are dismantling this cartel and bringing it in line with other professions. [*Crosstalk*] It is as simple as that. We are not asking for the Government to license them; the university is doing that.

This provision seeks to mandate the registrar to register an applicant wishing to be registered as a pharmacist. Someone who wishes to become a pharmacist

has to be registered. He has to be a holder of a degree in pharmacy by way of approved universities listed in the Sixth Schedule. So once you have a degree from a university or college accredited by the Accreditation Council of Trinidad and Tobago, then you should be able to be registered as a pharmacist.

New section 18(b) states:

“has produced a Medical Certificate of fitness from a medical practitioner stating that he is physically fit and mentally sound to perform the duties of a pharmacist;

(c) has produced a Certificate of good character; and

(d) has paid the prescribed fee.”

So all the other requirements have still been retained: that they must be of good character; must have a medical certificate of fitness and so on.

This Bill also seeks to introduce a new Schedule that contains universities or colleges offering degrees in pharmacy. Such universities and colleges have been approved by the Accreditation Council of Trinidad and Tobago. It is also our intention, with the assistance of the Accreditation Council, to keep such universities listed, under constant check to ensure that their standards are maintained. Where an institution listed under the Schedule falls below the accepted standard, it will be removed by order of the Minister. We will, over time, also add new institutions after they have been accredited by the council.

I wish to bring to your attention, hon. Senators, particularly those who raised the question that Regulation No. 3 prescribes that one needs to be registered as a student with the board before—[*Interruption*]

Sen. Dr. Gopeesingh: What is wrong with that?

Hon. J. Rahael: A lot is wrong with that.

Sen. Dr. Gopeesingh: How does it restrict them?

Hon. J. Rahael: Now it is a full-time degree; there is no need for it to have these types of restrictions. It is a four-year degree; if I want to study to become a pharmacist and I have the necessary qualifications, which is two A levels, one of which must be chemistry; five O levels: mathematics, language, biology and another science subject, therefore, I am now qualified to apply to the university that is accredited by the Accreditation Council of Trinidad and Tobago and if there is room, be accepted; not to go to an independent body that has self-interest, whoever they maybe, to be registered with them in order to access that in a university. That can never be right.

[*Sen. Seetahal and Sen. Prof. Ramchand rise*]

Madam President: I recognize Prof. Ramchand first.

Sen. Prof. Ramchand: I hope the Minister can explain it. I will like to know how UWI permits this. I would like to know who gave the board the power to tell somebody who has the credentials to enter the University of the West Indies, "You cannot enter until we approve you." I will like to see that the board has that power and where it is in writing. I would like to see whether UWI supports this.

Hon. J. Rahael: Whether it is there or not there, the fact of the matter is that it is the practice; that is what they have been doing for many years. This is not new. [*Crosstalk*]

Madam President, I beg to move.

Question proposed.

Sen. Dr. Tim Gopeesingh: Madam President, this side of the Senate is always in favour of progress in almost every area, at a national and international level. If we are to participate in a debate on amending a particular piece of legislation, you must come with some cogent, factual, empirical, substantiated information, so as to base your arguments on what you want to be validated as an amendment in that Bill.

The number of questions that emanated from this side of the Senate, both from the Independent Bench and our side, strongly indicates to the hon. Minister that there are lots of statements he has made to substantiate the necessity for this amendment, but which cannot be substantiated in actual writing or empirical data in any part of the Bill. Up to now he has not quoted any part of the Act which says that pharmacy students are restricted from entering the pharmacy programme.

We have all passed through the university. The university has a programme in medicine, dentistry, veterinary medicine and in pharmacy. The university puts out applications and advertises. Students apply; the university board of admissions examines the applications based on their qualifications and then determines their eligibility for admission.

It is UWI that determines eligibility of admission into medicine, veterinary medicine, dental surgery, dentistry and also pharmacy. It is not the Pharmacy Board or the Pharmacy Council that determines the requirements for entry into a pharmacy programme. The hon. Minister has not been able to substantiate his statements that there is a restriction by the Pharmacy Council to prevent students from being admitted into the programme. He then goes on to talk about whether it

is there or not there; that is a bogus statement from the hon. Minister. [Interruption] Okay, I take that word back.

Madam President: Please, Senator; that word is unparliamentary.

Sen. Mark: Bogus?

Madam President: In this context, I think it is unparliamentary.

Sen. Dr. T. Gopeesingh: It is questionable, Madam President. Whether it is there or not there, I am stating to this honourable Senate that the Minister is not trying to give us the truth to this matter. That is one point I would like to make first of all. [Crosstalk]

Hon. Senator: You are imputing improper motives.

Sen. Montano: On a point of order, clearly that is imputing improper motives to the Minister. [Crosstalk]

Madam President: Senator, please; you cannot say that a minister is not giving you the truth. You may have to find other means of putting forward your concerns.

Sen. Dr. T. Gopeesingh: He is not presenting the evidence in a proper manner to support his claim. [Desk thumping] There are two important issues in this proposed amended Bill. The first issue is that the administration is indicating that it is not in support of the six-month internship following the four-year programme of training in pharmacy. I want clarification from the Minister on this proposed Bill as to what he wants to have done; whether he wants the six-month internship programme removed or whether he wants the examination at the end of the six months removed. Can the hon. Minister clear that up before I continue my contribution?

Hon. Rahael: I will clear that up; go ahead.

Sen. Dr. T. Gopeesingh: If you do not want to clear it up, fine. That is the first argument. The second one is that it seems as though the administration does not want the Pharmacy Board to have any input into the registration of pharmacists in Trinidad and Tobago.

Hon. Rahael: If the hon. Senator would give way.

Sen. Dr. T. Gopeesingh: Madam President, I asked a question just now and he did not respond. Should I give way now? [Crosstalk]

Hon. Senator: It is up to you.

Hon. Rahael: What the administration would like to do is to ensure that there is equality in the system to ensure that for persons who wish to become pharmacists there are no unnecessary obstacles so that individual would be frustrated and, therefore, would not pursue becoming a pharmacist.

Sen. Mark: But they were never frustrated in the past.

Hon. Rahael: But they have been; I showed you the records; that is why there is only eight and 10 of them left.

Sen. Dumas: The citizens were frustrated.

Sen. Dr. T. Gopeesingh: Madam President, the hon. Minister is making statements which are not able to be substantiated and when he speaks about the frustration of getting into the programme, I would venture to say that there is no frustration whatever. If a student wants to enter the pharmacy programme, he applies to the University of the West Indies and they determine whether the student is suitable and qualified to go into it and the student is admitted into the programme. The student undergoes a training of four years. In that training programme, the student is able to work in pharmacies in the hospital system and in the public sector for a six-month period relating to pharmacists in the four-year programme. That is part of your training. You know that in medicine and dentistry we go through a clinical training programme.

The important thing I want to bring to this Senate, is that in medicine students have to go through a one-year internship programme after they qualify as doctors and they are supervised by the consultants who take the responsibility. In dentistry, they have to go through a one-year internship programme. There was a fight with the Dental Council under our administration. The Dental Council wanted them to sit an examination. We would be against the Pharmacy Board asking them to sit an examination after their six-month internship. Once they have gone through the internship and they have fulfilled their requirements, they should practise as pharmacists. If the hon. Minister wants to say that there should be no examination at the end of six months, fine, we accept that, but we do not accept that there must not be a six-month internship period. It happens in medicine in all parts of the world.

We had an 18-month programme in medicine and we have reduced it to 12 months now. In some parts of the world, it is just a year; in some parts it is 18 months. In dentistry it is a year. When a lawyer trains in a programme abroad, at the Gray's Inn or wherever, as attorneys, my distinguished colleagues, they have to satisfy the requirements for Trinidad and Tobago by doing a six-month training

programme here, articulated with a proper attorney. So in almost every profession, whether it is law, medicine, dentistry or veterinary medicine, you have to go through a six-month internship. So what is this administration trying to do, set standards that we are going to lower? Remember you are dealing with patients' lives.

Hon. Rahael: We brought in the four-year degree.

Sen. Dr. T. Gopeesingh: You have cross reactions of tablets that can kill people. You know that you can take a tablet now and then take another one and in just a few minutes you could be dead. You are playing with people's lives. The students must go through a six-month internship and they must be certified by a pharmacist.

Hon. Rahael: That is why they gave them [*Inaudible*] at Mount Hope and left the babies to die; and you want to talk about tablets!

Madam President: Minister, please.

Sen. Mark: You will get your chance to talk.

Hon. Rahael: We are not diluting it.

Sen. Dr. T. Gopeesingh: When he comes to the point about the six-month internship programme, we cannot accept that. I appeal to my Independent senatorial colleagues that if this is the proposed legislation they are coming with, when you look at this Bill and realize that in almost every profession the one year or six months is necessary, do not accept this proposed amendment.

Sen. Dumas: Talk to the President; talk to the Chair!

3.00 p.m.

Sen. Dr. T. Gopeesingh: Madam President, the hon. Minister said that they consulted with the Pharmacy Board. I have a letter from the former President of the Pharmacy Board—

Sen. Mark: They had removed him. They engineered a coup.

Sen. Dr. T. Gopeesingh: —where they had engineered a coup to remove him because he was obstructing what this particular administration wants to do repeatedly and I will draw an analogy to what happened. [*Crosstalk*]

Madam President, the letter here says that they had not been consulted on this. Imagine you have a pharmacy board and a pharmacy council and proposed legislation to make and you will just go through lip service of consultation?

Hon. Rahael: Madam President, he is misleading the House; it is not true to say that they were not consulted. They were certainly not in agreement, but do not say they were not consulted. We consulted with them.

Sen. Mark: Produce the proof.

Sen. Dr. T. Gopeesingh: Produce the proof that you consulted with them and what you wrote them.

Madam President, consultation takes place in a number of ways: It takes place orally, and in a written way. If you say that you consulted verbally is that really consultation, Madam President? This is an independent body created by statute and when the Minister says that the pharmacy board comprises people who will be restricting because they have their own pharmacies, it is for the President of the country to make sure that there are independent members on that Pharmacy Board or when the pharmacy association—which may comprise 500 pharmacists—will elect their council. The medical practitioners of about 1,200 or 1,300 will elect their council. So why can the pharmacists not elect their council? So you mean to say that the 500 pharmacists will be restricting pharmacists from coming in because they are not independent people? Is the Minister casting aspersion upon the members of the Pharmacy Board and the pharmacy council? Is this why they want to change the legislation? Because they feel that the members of the Pharmacy Board are obstructing what they want to do?

Sen. Mark: Yes, to bring in strangers.

Hon. Rahael: I am giving you the facts.

Sen. Dr. T. Gopeesingh: Madam President, so the first point there is the lack of consultation with the Pharmacy Board, and it is total disrespect for an independent authority where that authority is supposed to be the guardian of the work of the pharmacists throughout Trinidad and Tobago.

The Medical Board or medical council is the guardian for the medical profession, the Law Association is the guardian for the practice of law and we saw recently where the Law Association issued a warning to all lawyers about their advertisements. They are created by statute and this is in sync with this present administration's ability to try to abuse power, it is dictatorial and autocratic in its approach. It did it to the Medical Board. Do you remember when the Medical Board refused the admission of 75 United Nations Development Programme (UNDP) doctors and some of our Cuban doctors? My colleague, Sen. Dr. Kernahan, is one of the sound graduates from a university in Cuba, but there are two tiers of medicine. So when there is one doctor to 60 persons in Cuba, one should know that there are two tiers of medicine.

When the Prime Minister goes to Cuba he gets the higher layer of medical care there, which is an elegant layer but at the bottom we do not know what is happening. So there is one doctor to every 60 persons in Cuba. The question is when the present administration tried to get the UNDP doctors paying \$75 million in three years for 75 UNDP and some Cuban doctors—

Hon. Senator: Irrelevant.

Hon. Rahael: There is no relevance in this.

Sen. Mark: “Yuh cyar take the pressure or what?”

Madam President: Did you move a point of order?

Hon. Rahael: No, Madam President.

Madam President: I think he is trying to make a point and I am going to allow him to continue.

Sen. Dr. T. Gopeesingh: Madam President, the question is that the 75 doctors who came here did not make a difference in terms of the standard of medical care we are supposed to keep.

Sen. Dumas: That is not true at all.

Sen. Dr. T. Gopeesingh: So here it is that the Medical Board is trying to ensure that the standard of professionalism is kept at a high level, and the Government creates a parallel medical board. It is saying: you all do not like what we are doing, we want to bring in these doctors, and we are going to create a parallel medical board.

Madam President, you are a medical practitioner of sound repute of over 25 years in the medical profession. [*Desk thumping*] You have seen how the Medical Board and the medical council operate. One cannot create a parallel medical board to one's whims and fancies, this is something written in statute, and this was done so these doctors who have not made any significant contribution to medicine in Trinidad could be brought in. It is the same thing it is doing with the Pharmacy Board—trying to create a parallel institution—so people will be registered at the Ministry of Health and then do away with the Pharmacy Board.

Hon. Rahael: No. Madam President, that is really misleading the House because at no time did we talk about any parallel organization, at no time did we say that the Ministry of Health wants to register the students. What we are saying is that they must be allowed to study pharmacy. That is all we are saying. At no time in my presentation did I make any statement like that, and I do not think that the Senator should be allowed to say these things and get away.

Madam President: Our tempers seem to be flaring this evening.

Hon. Rahael: He must not mislead the House.

Madam President: Mr. Minister, you will have full time to respond to all these matters in your reply.

Hon. Rahael: No, I have to correct him as he goes along.

Madam President: He is saying it as he sees it. Let the Senator speak please.

Sen. Mark: “John, yuh not feeling well.” You were on medical sick leave, you come out mad today?

Sen. Dr. T. Gopeesingh: You see when somebody comes unprepared, they come—

Madam President: Senator.

Sen. Dr. T. Gopeesingh: All right, I will come back to the Bill.

Madam President, throughout the Caribbean, according to the CSME, this administration is very strong on taking Trinidad and Tobago to the CSME. Under the CSME, the Caricom Secretariat has been working throughout all the countries in the Caribbean and has discussed with the Caribbean Association of Pharmacists, and there is a Mr. Timothy Uddle of the Caricom Secretariat who has been going from country to country in the Caribbean looking at the areas of laws for professionals in health whether in medicine, dentistry, vet medicine or pharmacy and most of the Caribbean countries have this six-month internship for the practice of pharmacy subsequent to the degree programme.

Trinidad and Tobago is the one which was at the forefront in the Caribbean Association of Pharmacists which encouraged the CSME to bring equivalent standards. They realized that people have to move from one country to another once you are a University of the West Indies (UWI) graduate. So how can one be a UWI graduate and Barbados or Jamaica wants you to have a six-month internship programme and Trinidad wants to move away from the six-month internship programme? That does not make sense. You are the ones at the forefront in trying to make sure that there is equivalence and people could move freely in the Caricom, but here it is you are creating a law to move away from what the other Caribbean countries want.

Sen. Mark: Where is the standardization?

Sen. Dr. T. Gopeesingh: Where is the common equality for the movement of people?

Madam President, I want to ask the hon. Minister to indicate whether this Sixth Schedule which he has brought for the universities are colleges, shops or parlours? I have been in medicine for 32 years and I have not seen some of these things in my life, and you would see it yourself.

Sen. Mark: Counterfeit universities! Bogus universities!

Sen. Dr. T. Gopeesingh: I am wondering who does the accreditation for this. From where does the accreditation come?

Sen. Mark: Give us the information.

Sen. Dr. T. Gopeesingh: The council has not accredited these universities. Who has done the accreditation of these query universities or hospitals?

Hon. Rahael: I would like to inform the hon. Senator, it is the accreditation council. It is not the Ministry of Health or the Minister. These universities and colleges background information went to the accreditation council. As a matter of fact, right now there is another list of universities before the accreditation council but we could not bring any other than those we have already brought because those are the ones that had been accredited. So there are many others and they are accredited by the Accreditation Council of Trinidad and Tobago.

I thank you.

Sen. Dr. T. Gopeesingh: Madam President, who deals with the accreditation council? It is the Pharmacy Board and the pharmacy council that work with the Accreditation Council of Trinidad and Tobago in determining which universities are to be recognized. This has not been done. These universities that have come on to this Sixth Schedule have not been discussed with the pharmacy council, so the Accreditation Council has not worked with the Pharmacy Board or the pharmacy council to determine whether these universities on the Schedule are acceptable or not.

Sen. Mark: It is a PNM accreditation council you have there.

Sen. Dr. T. Gopeesingh: You know when we were young doctors we had doctors coming from Guadalajara and while they were going to their textbooks to read about treating a patient, the patient was dying on the ward. So are you going to bring people from these universities, shops or parlours to Trinidad, give them the ability to practise right away without going through the internship programme or some degree of certification and then unleash them onto the society? Do you know how many people will be killed?

First of all they are working in a different scenario. Do you know that pharmaceuticals and drugs have different names in different countries? In Spanish countries they will have another name, in Latin countries another, in Trinidad and Tobago, there is the British name. So when they come straight from these universities where they speak Spanish and their drugs are in Spanish do you think they can understand what is going on as far as the pharmaceuticals are concerned? And these people will be unleashed on the population.

The Filipino doctors had to undergo 500 hours of training, they had to acquaint themselves with a number of laws. So how can you bring these people and register them off-the-bat without going through the process of proper accreditation? They have to know about the Narcotics Act, the Food and Drugs Act and the Antibiotics Act and you want to bring them to Trinidad and Tobago without the knowledge of these Acts and just unleash them onto the population? No, you cannot do that. That Bill has to be withdrawn, or it has to be looked at and come back.

Sen. Mark: Yes, withdraw it.

Sen. Dr. T. Gopeesingh: Madam President, the hon. Minister said that there are dropouts in the pharmacy programme but he gave the facts which seem to be contradictory to his statement that in 2001, 21 out of 26 graduated; in 2002, 22 out of 26 graduated; in 2003, 18 out of 18 graduated; and in 2004, 22 out of 23 graduated. Where is the dropout from the system?

Hon. Rahael: Let me explain please. Madam President, what I indicated is that the intake is a very large number, more than double those who eventually graduate. So at the end of the three-year, four-year programme you may start with 69 persons but end up with 19 because during that period, many dropped out because being aware of what the outcome would be, that even after they get their degree, the council still needed them to do an examination to register them and they knew of the difficulty that persons faced when going to the council. And you asked about the law, section 5 clearly states:

“The registrar shall remove from the register of pharmaceutical students...”

It went on to say:

“...if the Council so directs.” Look at section 5.

Sen. Mark: “John, yuh ain’t able. Get a doctor to present this case for yuh.”

Sen. Dr. T. Gopeesingh: Madam President, the hon. Minister spoke about dropouts. You know in medicine sometimes we have 200-plus applicants for 40

places all with three A levels and three “As” and you can only take in 40 or 50 local students. Similarly in pharmacy, if you have about 40 applicants—I have checked with the Medical Pharmacy School—generally they have about 30—35 applicants and some of the students do not satisfy the criteria because they do not have the O level or A level requirements. So it is not a matter of dropouts. They do not start the programme and dropout after two years or so. The fact is, they start the programme and they finish.

Hon. Rahael: They must have the requirements before they start.

Sen. Dr. T. Gopeesingh: There may be some failures during the programme, there are not dropouts. They may fail a part and then have to repeat. So when 21 of the 26 students graduate and 22 out of 23 graduate, there is no dropout there. So I do not think we should mislead the House into believing that is one of the reasons we are coming with this amendment: Dropout, frustration, and having to do an examination at the end of it when none of them are being properly substantiated.

Sen. Dumas: If somebody fails in the system they drop out.

Sen. Dr. T. Gopeesingh: Madam President, if we want to keep and make sure that we do not have to import pharmacists, why is it becoming necessary to import pharmacists to Trinidad?

Sen. Mark: From the Philippines, too.

Sen. Dr. T. Gopeesingh: Particularly from the Philippines. Madam President, let me draw some statistics for you. When the local pharmacist graduates get a salary of \$4,881—\$6,601, have no foreign duty allowance, no relocation allowance, they have a travelling allowance of \$1,300 per month—but only five pharmacists in Trinidad get \$1,300 per month—housing is nil, air fare is nil, licence fee to be met by the individual, vacation is 28—35 days, and pension is applicable.

The principal pharmacist in the public sector gets \$7,500 per month, the RHA pharmacist earns approximately \$7,000. What do you do then? You cannot pay these local people, but you want to bring in pharmacists from the Philippines and pay them \$5,600 per month, 25 per cent of salary per month, so 25 per cent of that is \$1,400 so that is \$7,000; \$500 per month if residing beyond one kilometre from the work station. So if you are more than one kilometre from Port of Spain General Hospital you get \$500, that is \$7,500; \$2,000 per month only if Government quarters cannot be found, so let us put a cost to it that is \$9,500; two-way airfare, \$15,000 minimum per airfare for a three-year contract so that is

\$30,000, that is 36 months so add another \$1,000. So here it is you are bringing Filipino pharmacists, which is costing the State approximately \$9,500—\$10,000 per month and frustrating the local pharmacists who are qualified and not keeping them within the system.

Sen. Mark: Very unpatriotic.

Sen. Dr. T. Gopeesingh: So we are introducing foreign pharmacists in the system and the level of skills is being reduced. So you bring these foreign pharmacists then they have to be subjected to 500 hours of training which they must, and this is what they want to abolish now, then you have to pay the local pharmacists to train them which they did not agree to do. They asked why bring them when we have our local pharmacists and why is it necessary. We have almost 40 students and within the next two years, we are going to have 100 pharmacists qualifying.

Sen. Mark: Frustrating the local pharmacists.

Sen. Dr. T. Gopeesingh: Ninety-four have qualified in Trinidad already. Where have they been absorbed? Do you know where they have gone, Madam President? They have gone into the private sector.

Sen. Mark: Because of John. “Dey gone SuperPharm.” Frustrating the public sector, John Rahael. He slaughtered 10,000 workers in Caroni.

Hon. Rahael: All of them better off than they were.

Sen. Mark: God will not forgive you. You are a wicked man. Evil!

Sen. Dr. T. Gopeesingh: Madam President, the experiment in the parallel medical board that this administration brought has been unsatisfactory, it has not brought the type of improvement in health care that was supposed to have come on, so they want to bring in the foreign pharmacists now. So they have drawn up a list of universities, shops or parlours, I do not know what they are, accredited by whom, we do not know. They say it is the accreditation council. The Pharmacy Board does not know anything about this and yet they want to bring them in.

Do you know what the purpose is? It is to flood the country with a lot of pharmacists from abroad so the private sector, possibly SuperPharm, might be involved and get pharmacists who are easily available. Why do we want to flood the country with pharmacists who are not qualified to come into the country? We are not creating conditions for the local pharmacists to remain, the quality of health care is dropping, we are losing control by what he wants us to do.

The public sector is not going to be strengthened by what we are doing, the nationals are being devalued and nationals must be valued. You know that our University of the West Indies graduates are some of the best in the world, they hold their end, so why are we relegating our UWI graduates to substandard things and bringing in foreign pharmacists? They are being driven out of the system purposefully and we know that the foreign standards are not equivalent to our standards. So we are having lower level skills in all professions in medicine, being introduced by this administration, and now in pharmacy and in almost every area. Where are they going to go next? Let them go to the Law Association and they will see what will happen. Let them try to touch the Law Association, the law council or the Criminal Bar Association. They know where to play. Do you remember when they went to the Mille Fleur Building with security guards and put locks on the doors and took away the Law Association building from them under heavy manners?

Sen. Kangaloo: Irrelevant.

Sen. Mark: Irrelevant, irrelevant. Hush girl!

Hon. Rahael: Do not talk to our ladies like that!

Sen. Mark: All right, you hush.

Madam President: Senators please. Sen. Dr. Gopeesingh, will you just take your seat for a moment?

Sen. Dr. T. Gopeesingh: Sure.

Madam President: Sen. Mark, I have asked you on many occasions to please keep your voice down and be careful of the kind of crosstalk. Do not tell other Members to shut up, please.

Sen. Mark: Okay Ma'am.

Madam President: Please continue.

Sen. Dr. T. Gopeesingh: Madam President, in the United States when you practise a certain profession in one State, you have to write the board exam for another State if you want to move from Miami to New York. Why is the hon. Minister afraid of these pharmacists coming from abroad to be subjected to a system by the Pharmacy Board so that they will be looked at carefully to determine whether they are fit and appropriate by the Pharmacy Board or council to work in Trinidad and Tobago?

Madam President, suppose there is a situation where there are enough pharmacists in Trinidad—which there will be shortly, in another two years—what will prevent the present administration from allowing pharmacists to come in from other countries and be registered off the bat when in almost every profession, the locals have to be given special consideration first? So it is only when there is an absence of qualified persons in the particular profession then you can get a work permit to bring someone in medicine or whatever. So here it is, people will be able to come into Trinidad and Tobago without a work permit and go into a private pharmacy and get a job easily.

Hon. Rahael: Madam President, again that is not accurate.

Madam President: I cannot have both of you standing.

Sen. Dr. T. Gopeesingh: He will have his chance to respond.

Sen. Mark: “John, yuh weak today, very weak.”

Sen. Dr. T. Gopeesingh: Madam President, as far as the salaries just alluded to are concerned, this issue with the reclassification of the local pharmacists has been going on for almost 20 years and this administration has the opportunity to solve the problem. We were in office for six years, this administration has the opportunity to solve it now, but it wants to perpetuate the problem and worsen the situation because the local pharmacists will be seeing their jobs taken away from them, and with their salaries being less than the foreign pharmacists, how will they feel working in such a system?

The other point I would like to make is that there is nowhere in this Bill which indicates that the pharmacists coming in are to be registered, or have to be in good standing. There is a difference between good character—because somebody can indicate that this person is of good character but you know, Madam President, that when doctors, veterinary surgeons and dentists are to be registered with their councils, they have to get a certificate of good standing from their relevant dental or veterinary boards where they are coming from, and if they do not have that they cannot be registered. Where is the check and balance in terms of us seeking information as to their authenticity and certificate of good character and standing from their foreign boards? In fact, we may be bringing in criminals into this country.

Hon. Rahael: Very good point. I want to assure the hon. Senator as well as all Senators that in fact we get all those requirements from the Government agency in the Philippines, and the information is sent to the Pharmacy Board.

Also, no one from the Philippines, through the Ministry of Health, is working in Trinidad and Tobago without a work permit. So they have to get a work permit and we also get all the necessary information required such as standing in good character and their mental state and there is no record against them. So all that information is in fact part of the package that we get from the Philippines when they send individuals to us and that is then forwarded to the relevant authority.

Sen. Dr. T. Gopeesingh: Madam President, they speak about getting work permits now, I hope this continues when there are sufficient local pharmacists here and when there will be no need for bringing in any foreign pharmacists.

Hon. Rahael: I look forward to that day.

Sen. Dr. T. Gopeesingh: The other question which I want to ask the Minister is, did we go to the Caribbean islands to determine whether there are enough pharmacists there who would want to come here rather than going outside Caricom?

Hon. Rahael: Yes. We went throughout the Caribbean islands, not just Caricom. There is a shortage of nurses and pharmacists.

Sen. Dr. T. Gopeesingh: We know there is a shortage of nurses.

Sen. Mark: “John, yuh not well, cool it.”

Sen. Dr. T. Gopeesingh: Madam President, the other issue of the pharmacy problem in Trinidad—you know that the United National Congress administration introduced the Chronic Disease Assistance Programme (CDAP) in about four areas. It has been expanded and we are very happy that the poor population can get the benefits of an expanded CDAP.

Sen. Mark: It is about 160,000 now?

Sen. Dr. T. Gopeesingh: It is 160,000. When we started we had about 20,000 it has moved to 160,000. If there are 160,000 citizens who are receiving CDAP help, that means that they will probably go to the private pharmacies with a prescription and generally, the average prescription will have four drugs on it and each of these pharmaceutical drugs charged by the private pharmacies is \$10, that is \$40 for a prescription; so 160,000 or 120,000 persons going through a year, a prescription is probably filled six times per year that is going to cost the State \$45 million.

There are 100 health centres in Trinidad and Tobago where people can get their medicine in health centres close to them. If one pharmacist is employed and paid \$10,000 per month which is \$120,000 per year, and you have 100 pharmacists, you will be paying \$12 million to the pharmacists working in the health centres where the people can get their drugs. So this must be considered as well. Here it is that the private pharmacies are doing a good job, giving the patients their pharmaceuticals, but it is going to cost the State approximately \$45 million, whereas, if our health centres are equipped with pharmacists on a daily basis it can cost us only \$12 million. The hon. Minister was a former businessman before he came to Parliament; he might still be a businessman and will understand the rationale in my thinking.

The other issue on that is the generic drug. There are a number of generic drugs that are being used in the pharmaceutical programme which have now expanded to 36. There is a multiplicity of these drugs in the CDAP, a number of them are not efficacious so one has to look at the whole question of the pharmaceuticals in the private and public pharmacies and how effective it is for the general population. I would like to suggest to the hon. Minister that in keeping with the whole expansion of the pharmacy programme, that the effectiveness of the pharmaceutical drugs that have been put out for the population be reanalyzed because we know that some are not effective and this is simply asking for a reevaluation of the programme based on the effectiveness for the population.

3.30 p.m.

I would like to suggest that we revisit this amendment to the Pharmacy Board Act, to look at the question of ensuring that six months remain after they have qualified; the examination could be removed, and we are not in agreement with moving away from an independent institution of the Pharmacy Board and the pharmacy council which would determine the practice and regulation of pharmacists throughout Trinidad and Tobago and giving it into the hands of absolutely no one, so someone could come from abroad and register in Trinidad and Tobago automatically without having to go through any programme.

I would like my colleagues to support our side on this Bill and I ask the hon. Minister to revisit this amendment to this Act and come back in future with some of the things that we have mentioned. In keeping with that—they did it with the Medical Board—a parallel medical board; they are doing it now with the Pharmacy Board; they want to bring another university—Johns Hopkins University in Port of Spain. We have a hospital in Mount Hope which we cannot even open, because under the last administration they built a white elephant.

There are so many wards to be opened. We fought desperately to open some of the wards at Mount Hope. We were only able to open two because of the high cost expended, but this present administration is thinking about bringing Johns Hopkins University and bought a piece of land in Port of Spain.

It is the same thing like saying, "I want the Tarouba Complex"; "I want Parliament for my office." It is the same thing as, "I want the President's grounds for my property." It is high-handed, autocratic and dictatorial and this thing must not be allowed to continue! You want a Johns Hopkins University and you cannot even run the university in Trinidad and Tobago. The poor medical students do not have a place to even eat or go to the toilet. The University of the West Indies is not doing anything about it nor is the State doing anything about it. Then you want to take students from Trinidad and Tobago and send them to St. George's University in Grenada, when the cost of sending these students there is higher than what it would cost the Government to be in Trinidad and Tobago. Who gives the scholarships? On what basis are these scholarships given? Who forms the scholarship committee? These are the questions we ask.

Madam President: Hon. Senators, the speaking time of the hon. Senator has expired.

Motion made, That the hon. Senator's speaking time be extended by 15 minutes. [*Sen. W. Mark*]

Question put and agreed to.

Sen. Dr. T. Gopeesingh: Thank you, Madam President. I thank Senators for allowing me the extra few minutes.

I have drawn the analogy between what is happening in the Medical Board and formation of a parallel medical board; what is happening in the disbandment of the pharmacy council or the Pharmacy Board and they want to have the autocracy to be able to bring in anybody they want and register them willy-nilly. That is the second point.

The third point is that they are trying to emasculate Trinidad and Tobago from the rest of the Caribbean region in terms of travel of qualified people, because they are having one law for Trinidad and Tobago, whereas Barbados and Jamaica and the other Caribbean islands have another law which needs the pharmacy students to have six months' internship.

The next point is, the same autocratic approach is continuing by wanting to bring the Johns Hopkins University; in giving scholarships to students to go to Grenada when our medical school can take our students here. I just want to ask

the hon. Minister to indicate to us who forms the scholarship committee. We have not been seeing any advertisements whatever in Trinidad and Tobago. You know that a number of States have been giving scholarships to citizens of Trinidad and Tobago over a number of years. We have not seen any advertisement over the last two or three years on any of these scholarships. Is it a secret mafia that is going on in the State, that we do not know who is getting the scholarships; what criteria is being used to give these students the St. George's, Grenada scholarships? There are many questions that this administration has to answer.

The last thing I want to know, and this is of very relevant importance, because it relates to the whole pharmacy question and the Pharmacy Board. We would like the Senate to know whether the SuperPharm pharmacies are part of the Chronic Disease Assistance Programme (CDAP), and we want the Minister to explain to the Senate whether he has any relationship to the SuperPharm pharmacies and what is the relationship to SuperPharm pharmacies and how do these pharmacies benefit now from CDAP; and whether CDAP is sending the pharmaceuticals into these SuperPharm pharmacies. This has a lot of implications in terms of conflict of interest, in terms of morality and, therefore, we should not be subjected to that type of thing in this Senate.

So I beg to move that we, on this side, would not like to support this amended legislation and we would like it to come back in a different form after the corrections by the hon. Minister of Health.

I thank you. [*Desk thumping*]

Madam President: Before I recognize the next speaker, you would realize that you have got some new amendments circulated. There is a date and a time at the top of it. This would be your amendments. So you would eliminate the first set that was circulated some time earlier.

Sen. Dr. Eastlyn Mc Kenzie: Madam President, before coming to the Parliament today I had some discussion with the people dealing with pharmacists in Tobago, especially about those coming from the Philippines. We have three of them in Tobago. I want to start by saying that I think the ridiculous salaries being paid to the pharmacists and also, if I may add, the physiotherapists, should be increased, and I think a part of our problem of keeping our pharmacists in the public sector would be minimized. I am not saying that would solve the problem totally but if we give them better conditions of service, that problem would be minimized. So I think almost immediately we should consider the increase in salaries for the pharmacists and also for our physiotherapists.

On the question of the performance of the pharmacists from the Philippines, the report from Tobago has been very good. They are being supervised and monitored by the experienced, qualified pharmacists and the report is that they are doing very well. There was a little impediment with the language and that has been overcome. In fact, they said it was really minimal where they had a little mix-up whenever you had a prescription saying "bedtime" versus taking the prescription at night. That was the only thing they could have cited. So these pharmacists are being monitored and assessed and the report has been very good.

The question of the use of the health centres in the various districts, what happens now is that the doctors go to these health centres and try to do the prescriptions for the patients who come, especially those from the country. In fact, we have eight pharmacies in Tobago: two in the Canaan/Bon Accord area, one in Carnbee and five just around Scarborough. We have none from Charlotteville to Scarborough; none from Scarborough to Parlatuvier, and these are the rural areas. So when the doctors go to the health centres and they carry the drugs with them, it is always helpful if they have pharmacists there to hand out the drugs to the patients. Many times this is where the Philippine pharmacists come in. They double up with the doctors. But just imagine if you did not have more pharmacists to do that and they are all stationed at the hospital in Scarborough, these old people would have to get their prescriptions filled by going into Scarborough. It is very hard on them, so any sort of assistance that could be given in cases like these, we would be happy.

What has been happening in Tobago is that they have been using the retired pharmacists. In fact, in the Scarborough Hospital I know of about two or three retired pharmacists who go back to help. This might be strange to Trinidad, but there is a private pharmacist, somebody who owns his own pharmacy, who works in the hospital pharmacy for about two hours on mornings, because people who have to get drugs through the Scarborough Hospital pharmacy, sometimes they are there from five in the morning waiting to get an early number so that they could get away from there early. But this special pharmacist goes early and works from 7.00 to 9.00 a.m. and then he goes to his pharmacy and opens from 9.00 a.m. onwards. So they are trying all sorts of ways and means of getting the service to the people.

Another point I want to bring to you is that I would insert a new section 18(e) to the amendments to the Act, to say that these people must complete the required internship period satisfactorily. [*Desk thumping*] New section 18(e) would read:

“...and has completed the required internship period satisfactorily.”

I do not agree that just having a degree, you just go out and work. [*Desk thumping*]

Hon. Rahael: Thank you very much for giving way. I think I need to point out to the honourable Senate that in the four-year degree programme, there is a six-month internship. That is part of the four-year programme. That is what we would be ensuring would happen.

Sen. Dr. E. Mc Kenzie: I know that very well, but I still think it should be in addition to. I know that the experience of being in the service and studying and being supervised and so on, is totally different from coming out of that and going on your own in a pharmacy. I think that we need to go on the side of care and caution and have that experience. Because I have never seen any of the pharmacists being trained in the school here going to Tobago to the rural areas and meeting those people, talking with them and understanding the culture and language; what they would tell you and how they depend on you and how you get a chance to educate them. I think that is a very necessary part of the training. It could be for six months, but I am still saying that they should have that supervised and monitored internship period after they graduate. So I have added to my amendments a new section 18(e).

My final point, I see where—not the dropouts—some of the people wanting to be pharmacists are using the entry into the pharmacy department as a stepping stone to study medicine. I do not know how this could be solved, but I think you have to look at that. I am not saying, you, per se, but the schools, the university, have to look at that. My final point is, even if you say the foreigners have to come and do an examination just as when you have graduated from a law school somewhere else and you have to come and do an examination; if you graduate from here as a nurse and you want to practise in Florida you have to do the State Board examination, my problem is, I feel that the pharmacy school in Trinidad and Tobago should be the one setting the examination for foreigners who are coming in to practise as pharmacists in Trinidad and Tobago and not the board or the council.

Thank you very much, Madam President. [*Desk thumping*]

The Minister of Local Government (Sen. The Hon. Rennie Dumas): Madam President, it is quite a privilege to be able to speak on this matter and to urge that all Senators support the proposal. Let us look at where we have come from, because I think that is important. What exactly has brought us to this proposal today? I want to suggest that the reason we are facing this amendment is that the Government has made a commitment to change the medical profession

for the better, the facility by which people access medical services. We have gone through a situation in which the people, whether they are dentists, medical doctors or pharmacists as a group, have been holding the citizens of this country to ransom. The 607 communities in Trinidad and Tobago have gone through the experience of going to our public health facilities and facing a situation in which the medical practitioners, including the pharmacists, have come to the clinics for an hour, have subjected our people to hours of waiting and uncertain care. That is our situation.

What did we have coming from the benches of the Opposition this evening? In my view, a clear case of—let me just be a little careful here—special pleading; an argument that says that there is some hallowedness to this professional management, who are, in fact, public employees who have access to a body of knowledge, in most cases provided to them by the State, but which they employ in such a way that the citizens who make up the State have no access, or little access, to their skills and services. People are arguing for the continuance of that situation. I am quite happy that the Independent Senator spoke, because at one time I was wondering if the only people who sit in this Senate representing the people of Trinidad and Tobago, are the PNM.

I was wondering if the Members of the Opposition Benches represent professional organizations, professional boards, professional systems of qualifying individuals, rather than the people of Trinidad and Tobago. Because, you see, the Senator from the Opposition side—and I think I am quite in place to congratulate him on the ease with which he replaced the ex-Senator. This ease, you know, it is like pulling your hand from a bucket of water. I am wondering if the other Senators on that side noticed the ease with which the hand was inserted and withdrawn.

I am therefore careful to suggest that the only constant that we could have is to the service of the people of Trinidad and Tobago and, therefore, we should be careful how we seek to protect special privilege, especially for groups who may not be inclined to give us full service. I want to suggest that opening the access to practise as a pharmacist to a larger number of people is more likely to lead to the access of pharmacist services to the population in our 607 communities, rather than blocking them up and reducing the number of people who we can have as pharmacists.

In the public system the practice has generally been, before people begin to make a certain argument, that the supply of pharmacists needed to be expanded; the service that we used to get in most of these health centres was one hour and

two hours, and for the other six hours of the normal work day these pharmacists were in some private practice, or generally unavailable. It is to provide the required services that the Government has asked for a system which expands the reach of the pharmacist services throughout Trinidad and Tobago. Do you see this argument being made that the privileges handed to this council that manages the pharmacists was written in statute? You know, the reason we come here every Tuesday is to rewrite or cross out statutes. We are saying today that we feel the abuse of privileges that people have had, the abuse of our citizenry, is what has been perpetuated by the council.

Let me just say this. I was a student of the University of the West Indies. I am quite proud of my alma mater. The student body—

Sen. Mark: Then how could you agree with this?

Sen. The Hon. R. Dumas: I would tell you. The student body also made me the president. [*Desk thumping*] As president of that student body I was a member of the academic board. That is the reality. I know that that academic board that we talk about so glibly here today, in which it selects its students and how it selects students, I know that that pharmacist council had an influence in the selection of students. So when the Senator gets up and says there is no proof, do you know what is proof? Our experience over the years is proof. The body called the PNM is embedded in this country and we know it. It is our children, our brothers and sisters who have been subjected to the choice. So when you come and say to me you want written evidence, written evidence what? People “does” write down “bobol”? Nobody writes down “bobol”.

So the council, in carrying out its activity and debarring and denying people access to education and advancement in the chosen profession—you know, if I was a miserable man I would have interfered when I saw the Senator putting his hand around her and saying, “my colleague is”. What the Senator was doing was supporting the same system which had denied his colleague access to practise in a profession. [*Crosstalk*] You do not know. These councils called Pharmacy Board, Medical Board, or whatever, are systems of oppression against students and professionals in this country. I am saying without fear of contradiction that these councils have been agents of oppression. Whether our children are coming from A levels, first degree, second degree or seeking to access professions, they had to face these people who hold on to their positions of privilege and treat them less than they should. I am saying to you that I know enough of the university to know I should question it very closely. I know enough to know that—

Madam President: Senator, speak to me.

Sen. The Hon. R. Dumas: I am speaking to you, Madam President. That is why I am so measured and careful.

The Senator questioned the Minister when he argued that he was in consultation with the pharmacists. In public affairs, the consultative process has been carried out. The Minister said it. The evidence is there. We cannot only have convenient memories. They were up and down the country talking about what they want to do. It was reported in all the newspapers when they quarrelled; when they said they did not agree. All of that was reported. The Senators opposite come with all these long texts that they cut from various newspapers, Internet and so on, and I am saying to you, you have good research. If this thing was not the subject of consultation, you would have come here and said from the arguments that were made in the press that they were not made.

Sen. Mark: I will make that just now. You “ain’t” give me a chance.

Sen. The Hon. R. Dumas: I know you are trying to argue that doctors should be in charge of health.

Sen. Mark: I am teasing the man, man. “Doh” worry.

Sen. The Hon. R. Dumas: Thanks for the correction, because I know the best manager of any system is a manager. What we are trying to suggest, the amendments laid out improve the access of the qualified people in pharmacology to practise pharmacology in Trinidad and Tobago. By that, they would have been more likely to lend to system development. When the Senator said that soon we shall have no need for foreign pharmacists because we would have trained enough, I got a little scared, because I wondered by what measure would we know that we have trained enough. Would we have had a pharmacist in every one of our 607 communities in Trinidad and Tobago? Would we have a pharmacist in every health centre accessible to every citizen in this country? Or do we have to continue to access the pharmacists in the world?

Do you know something? Let us just take this hypothetical case. Let us just suppose we are recruiting pharmacists from around the world. Is it just possible that as these pharmacists become available to us, we can then select the best, so that the more who are available to us, the more likely we are to select the best? That if in this first stage of development some of the pharmacists that we have, we may not be totally comfortable with—I am not accepting, but just supposing that some of the qualifications we feel can be improved—is it possible that as we open our borders and, if, as he said, we are paying competitive salaries to these foreigners that we are bringing in, is it possible that we would then be able to

select the best for the service of the people of Trinidad and Tobago? If that is possible, I feel that is reason enough to support the amendment. If the amendment leads us, as you said, to have an influx of people from around the world, so long as we continue to provide the training opportunity for our nationals and we also have access to the best pharmacists in the world, I think we would have been doing the best that we could do for the people of Trinidad and Tobago.

I am sure that some questions have arisen and I know that this Government is always willing to look at the suggestions that are made. You know, time and time again, Senators say that maybe we are not listening. But I am suggesting that if there are questions, then, certainly put the questions on the table. If you have amendments, bring the amendments, but let us participate fully in the process of law making.

4.00 p.m.

If we are amending the law, we amend the law to the best benefit. If changes to what we brought are required, then put them on the table. I got the feeling that the suggestion was that the Government had come to mislead or deceive the Senate. On the contrary, the Government came with the evidence that things were not satisfactory and there is need for a change. We have come to the law-making process with clean hands and noble intent. To the extent that we have done that we must take part in the process, point out the deficiencies that we think are there and treat with them.

The amendments as proposed have a good intent which should be supported by all of us. The argument of supporting privileges; ensuring that we block the entrance of people and the derision of people because of their origin—this is Trinidad and Tobago. I want us to read our Constitution well; walk the streets and see the faces of the people we meet. When there is a seemingly negative slur on the fact that some Filipinos came, how far is that from somebody saying to me that I should not walk down Frederick Street because I am from Tobago? When we are making laws we have to take into account the foundation of the law which is for all of us. Remember every creed and race.

This amendment is to serve the people of Trinidad and Tobago and it should enjoy the support of all the Senators.

Thank you.

Sen. Dr. Jennifer Kernahan: Madam President, thank you for allowing me to make a few remarks on the Pharmacy Board (Amdt.) Bill. We all agree that the efficient delivery of health service in this country must be supported by the

availability of trained personnel in the field of pharmacy. There is no point in the doctors prescribing medication and there are no trained personnel to deliver prescriptions. The Minister has come with these amendments and I do not have a sense of the gap analysis. The Minister has not made any attempt to give us the information. The Minister before me spoke about the need to continue to train pharmacists.

What is the gap analysis? What is our position? He wants support for this amendment but he should tell us how many pharmacists we need to serve the population of Trinidad and Tobago. If you fall sick at 11.00 p.m. and go to a regional health institution, there will be a doctor who would give you a prescription but nobody to give you medication. What is the point? We have to expand the service and ensure that there are enough pharmacists to work at nights. The absence of trained pharmacists has impacted and is impacting mostly on the poor, disadvantaged and pensioners in the country. We have to look at the interest of those people when we talk about the gap analysis.

The Minister spoke about people having no access to pharmacists. How does that tie into the special interest of the Pharmacy Board, Medical Board and Veterinary Board? I have an interest there. I have had my problems with these groups and I have spoken in the Senate about them. The lack of access to pharmacists has nothing to do with that. It has to do with proper management and accountability in the public health sector. This is where the public health sector has problems. If you do not manage the pharmacists in the sector you will always have problems. It has nothing to do with the councils and recognition. The councils have a different function. I do not understand that point the Minister made.

We have to recognize that in this country we have a serious problem with the delivery of pharmaceuticals. It is heart-rending to see how poor people and pensioners have to make trips and wait every day at the hospitals for a pharmacist who may never arrive or spend two hours and leave. These people do not have the money to buy these expensive drugs and they are left without proper medical care. This Government is talking about Vision 2020 and this is an urgent situation that has to be corrected soon if it is serious about caring for the people.

How do you correct this problem? The problem I have with this Government is that it has acted in this manner as it has always acted historically. It thinks that it can throw money in the situation. You have an oil boom and billions of dollars in the Treasury. You have a shortage of pharmacists; you have not told us how many you need, but you throw money in the situation by importing what you

need. In the short-term, to import might be a viable option for people to fill the gap. My major concern is that this Government does not seem to address the issue of long-term planning. If you are talking about national development, you have to direct your policies and programmes to ensure that you build a cadre of local pharmacists who will stay in the health sector after you spend thousands of dollars to train them.

The Minister has not told us if there is a problem with pharmacists or if there is brain drain. Are the 30 or 40 pharmacists who are graduating every year leaving the country? Do you have to do something to correct that problem? You need to build a strong cadre of pharmacists who will serve the expanded delivery system. How do you do that? By bringing in more pharmacists or by motivating the pharmacists you train and by expanding the intake? You know that you have to do that in the long-term to serve the country in a particular way. Instead of spending millions to import—you may have to do some level of importation in the short-term—you have to expand the training courses by a certain number of students because over the next 10, 15 or 20 years, we would need a certain number. Do the math and tell us how you intend to ensure that the poorest people have access to qualified pharmacists. Do not demotivate the pharmacists who are being trained here by bringing foreigners at superior salaries, terms and conditions.

The Government always looks at the short-term quick fix solutions and it is not telling us about the long-term stability of the system that it is trying to build. Everything is about money. You have it now and you use it to put a nice face. Cosmetic changes. I was horrified to hear my colleague talk about the salaries of pharmacists who have to work very hard. It is a technical and intricate field and they have people's lives in their hands. Sen. Dr. Mc Kenzie spoke about the culture of people. We know that culturally in this country, people tend to go to the pharmacists before they go to the doctors. When they have pain or whatever they go straight to the pharmacists, describe the symptoms and ask for medication. The pharmacists dispense medication to them. That is why you have to be very serious about the motivation and highly trained level of pharmacists in this country. People go to pharmacists more often than they go to doctors. We have to improve their salaries and conditions of work.

We have to expand the faculty and do a proper gap analysis to ensure that we are on track for developed country status. What is developed country status when you are building your programmes on short-term, quick fix solutions? When the gas and oil are gone, where will we get money to import Filipinos or Cubans? We have to spend the millions to train, motivate and promote a sense of national

pride in people who would be proud to work here, even though they might be attracted to higher salaries and perks elsewhere. This is the sort of nationalism that we have to engender and develop in our country and the Government has its part to play in that.

In terms of the prerequisites for pharmacists to work here, I agree with Sen. Dr. Mc Kenzie. Nobody is saying that you want to keep out anybody. Given the importance of that particular profession and of having efficient, competent people who are in tune with the culture of the people, you must have pharmacists who would be subjected to a period of internship before they are allowed to practise. This is so in every other field, in terms of medicine and veterinary science. Clause 18 says nothing about the need for internship and a practical period of orientation. In medicine you study for six years and you still have to do a one-year internship in order to practise. I do not see why we should exempt pharmacists from this period of internship.

We must have some sort of coherence in the way we approach things. I will quote the qualifications under the Caribbean Single Market and Economy (CSME) for pharmacists:

An applicant shall hold a Bachelor of Science Degree in pharmacy or an equivalent generated by a university or school of pharmacy.

It also says that you must have proof of satisfactory completion of no less than one year internship in the field of pharmacy. I do not see why we should be out of sync with this particular requirement.

The issue of special interest of the boards and councils in this country, I have had my experience with that. I believe that the boards and councils must be in sync with what is happening in terms of national development. I do not think that the boards and councils can dictate governmental policies in terms of national development, which should be broad based, accepted and seen to be transparent. You cannot have the tails wagging the dogs.

My experience after having undergone six years training in Cuba and graduating as a doctor of veterinary medicine, I came home and applied to work. I went to the Veterinary Board, and the President of the Veterinary Board, Dr. Stephen Johnson told me, "You had no right to study in Cuba. You have to check with us first as to where we would accept graduates from." I said that the Government was spending millions of dollars at that point in time to send students to Cuba who will graduate and come back here to practise. He said, "The Government has to consult with us before they send anybody to Cuba. We are not

going to accept graduates from Cuba.” This is a separate issue. There are roles for councils and boards, but they are legislated by Parliament. The same way that we can legislate only veterinary students from Canada, England or other countries could practise here, in the same way we can change the legislation in Parliament.

Based on our requirements for national development; the CSME and the fact that we are deepening ties with Cuba in terms of trade, economy and culture, we have to re-write our legislation to suit the priorities of national development. The people in this country are demanding wider access to training and development. Not everyone can go to England, Canada or the United States to study. In the Caribbean we have recognized institutions that are training people. People in the highest level of medicine have been trained in Cuba and are recognized all over the world. When Cuban doctors flee Cuba for whatever reason and go to Miami they are recognized to practise in the United States of America.

I do not understand why graduates are not allowed to practise here. I have a medical colleague who graduated last year and came home. Do you know where he is at present after the Government has spent millions to train him in Cuba? He is in Miami practising because he got this long story from the Medical Board that they will not recognize him and he has to do this, that and the other. We have to acknowledge the fact that national development demands that we recognize institutions other than the traditional colonial institutions. The Caribbean is developing its training institutions and people in that system have to be dealt with in a certain way.

I want to find out from the Minister the purview of the Accreditation Council of Trinidad and Tobago. Who will they oversee? Is it all graduates or some? Does everybody who graduate with a foreign degree have to pass through the Accreditation Council of Trinidad and Tobago? Apparently, there is this ad hoc system that some people recognize you and some do not; sometimes you work and sometimes you have to leave this country. What is the system? What is the policy? What are the goals of national development? Where are we heading? This needs to be brought into synchronization so that the national developmental goals would be met. The bottom line is that the people of this country would be served by well-qualified and trained professionals who do not have to go to England, Canada or the United States to be trained. They can be trained in the Caribbean, in highly prestigious universities and come home to serve their people.

Thank you.

Sen. Prof. Kenneth Ramchand: Madam President, I am very concerned about the amendments before us. Unless something miraculous happens, I do not intend to support the Bill. In my contribution I will cover a number of points. One of these is the principle of the bulk importation of skilled labour. The second is the process by which this is done. The third is the existence of time lines, that is to say declaration of for how long the importation would be carried on and the simultaneous putting in place of fundamental long-term measures to remove the need for importation. I will also talk about standards with respect to health care and the provision of drugs, salary, cost—making the distinction between salary and cost—and finally, some suggestions about what needs to be done.

I will operate in two main sections. The first which might take us to the tea interval has to do with the position of the Pharmacy Board. I get a very strong impression that the Pharmacy Board is being sidelined. Whether they are being sidelined for incompetence or whatever reason, I do not know, but certain responsibilities are being removed from them. The simplifications that are being proposed will mean that the Pharmacy Board does not have much to do.

I am not taking a side. That is the impression I have got. I had some conversations with members of the Pharmacy Board. I am going to say what I was told. I hope that the Minister will clarify. If they have misled me the Minister will show where I have been misled. The first thing I was told is that the Pharmacy Board was not consulted. It was said to me that several scheduled meetings were cancelled by the Legislative Review Committee. They never met. I was also told by the board that they wrote a letter objecting, and in the letter of objection, they asked whether the Government had pursued this matter in any of the member states of the CSME. They said that they had a clear impression that no attempt was made to ask any member of the CSME whether they had pharmacists. Certainly, no advertisements were put out in those countries for pharmacists.

They were quite strong in their denial. They said that there is no shortage of pharmacists in Trinidad and Tobago. I do not believe it. I want the Minister to explain. They said that there are 150 in the public sector and 400 in the private sector. This makes it 550. I am repeating what I was told. I do not know about these things. I was told that an acceptable ratio is one pharmacist per 3,000 of the population and the figure of 550 represents an acceptable ratio.

Hon. Rahael: Senator, we heard from Sen. Dr. Mc Kenzie that someone in the private sector comes to help in the public sector. It works both ways. We have less than 70 pharmacists that we are paying for in the public sector Ministry of Health. Many of those same employees also moonlight and work in private

pharmacies. Public pharmacists work in the private pharmacies. Those who work in the private pharmacies also work in the public pharmacies. People can call what figures they want, the fact is that we do not have enough pharmacists in Trinidad and Tobago.

Sen. Prof. K. Ramchand: Thank you very much. That I think is the purpose of the Parliament. We ask questions, get answers and then we can make up our minds. The board is very strong in its objection to the terms and conditions being offered to the imported pharmacists. They prepared a chart. I think that Sen. Dr. Gopeesingh had the chart and spoke about it. The case was that local pharmacists get between \$4,000 and \$5,000 and the chief pharmacist gets \$7,500, but most of them are between \$4,000 and \$6,000. The imported pharmacists get \$9,500, plus the airfare and other things that put the bill even higher. It seems to me that whether the imported pharmacists are getting too much is one issue and the other issue is whether the local pharmacists are getting enough.

The pharmacists had a grouse that they were still being classified as technicians and not as pharmacists.

Sen. Yuille-Williams: Madam President, there is one correction I want to make to what Sen. Prof. Ramchand said. You said that the member of the Pharmacy Board said that several meetings with the Legislative Review Committee were postponed or cancelled. As chairman of that committee I do not know of any meeting being even scheduled. They could not be postponed or cancelled. It is probably some other committee they were talking about. For the record, we do not meet the boards

Madam President: Senator you have spoken for seven minutes. We shall return from tea at 500 p.m.

4.30 p.m.: *Sitting suspended.*

5.00 p.m.: *Sitting resumed.*

Madam President: Hon. Senators, you will have realized that we had to wait for two minutes outside the door. Senator, continue please and I will calculate your time.

Sen. Prof. K. Ramchand: Madam President, on the break the hon. Minister, Joan Yuille-Williams was confirming that no consultations took place; they had not even been scheduled.

Sen. Yuille-Williams: Wrong committee.

Sen. Prof. K. Ramchand: I was putting to the Minister, and I do not know if it is really true, that pharmacists are still classified as technicians. I do not know if the Minister would like to look into that. So the real grouse of the Pharmacy Board, after saying there is not a shortage, had to do with their salaries. And they were saying that pharmacists are more inclined to go into the private sector because of the salaries and not only that, the conditions of the dispensaries. I was told that in Maracas St. Joseph there were bats and termites; some of them are so hot that drugs perish. There is no proper storage of the drugs. There were problems too, as far as they were concerned, about the procurement of drugs, especially the need to put systems in place to make sure that the generic drugs were efficacious. It is a whole new field that has opened up with CDAP because we are importing so much in bulk that people can slip in substandard goods. We are doing generic stuff and we need to have systems in place to make sure the country is not defrauded. Thirdly, they were complaining about the distribution of the drugs and I want to agree with Sen. Dr. Gopeesingh's suggestion that the health centres should be used as distributing centres. But they are not upgraded and sufficiently prepared for taking on that task. In a way, it would deprive the pharmacies of some business. But it is costing us a lot to work through the pharmacies, so the money the pharmacies would have got for dispensing, those moneys could be spent upgrading the health centres and even putting a pharmacist there to manage.

Since the Minister began by talking about the whole health system, I feel we therefore have permission to mention two things that the Pharmacy Board raised. One of them was amendments to the Food and Drugs Act:

“...to combat Counterfeit Drugs which is a worldwide problem. It must be noted that from Viagra to Paracetamol is being counterfeited and we are certain that some of these are in Trinidad.”

[*Interruption*] I do not know these things because I do not take medicine. I take bush medicine. Madam President, that is the representation I have had from the Pharmacy Board—no consultation, no shortage. The real problem is their salaries and they need to be motivated.

I come now to the amendments and I think my general position about the employment of foreign nationals, especially on a bulk basis, is well known. We should do it only where absolutely necessary. We should do it on a stated short-term basis and it should be accompanied by a programme to produce our own so that you can tell us, we want to do this for the next three years and by the end of those three years, we would be able to supply our needs. I think this question about the importation of foreign labour is going to become a terribly important

one in the next few months as the Caribbean Single Market and Economy (CSME) arrangements begin to come into place. I do not think it is irrelevant to point out that the importation of—even if you call it, skilled labour in bulk, puts huge strains upon the economy. It raises rents, the cost of houses; it increases the traffic on the roads, the food import bill and leads eventually to additions to the large pool of illegal immigrants in this country. I hear all the experts about crime pontificating about what should be done but nobody has said that we should make a complete survey of all the illegal immigrants in this country and deport them because these are people who do not belong; they do not have a sense that they belong. They do not have a stake in the country. They are fugitives, and I am sure that a large part of the crime problem is our huge illegal immigrant population.

Sen. Dumas: Just so the fascist sounds.

Sen. Prof. K. Ramchand: They sound like that. Deportation is not decapitation. I want to come now to the degree at the University of the West Indies and to state a position and let the Minister get his facts at some point and rebut it. In the first place, I cannot believe that the University of the West Indies can have a degree programme and be satisfied that candidates deserve a place on academic qualifications and that they could have their judgment denied by any other institution in this country. The university is autonomous in these matters and so I find it hard to believe that the Pharmacy Board can impose that regulation, that before you can begin the four-year programme, “you have to be interviewed and approved by us”. If they are doing it, it is illegal. They cannot do it and if I were a student and they told me that, I would come and say the UWI says, “I am admitted”—unless the UWI is colluding. Does the university say these 80 persons have applied, we have selected these 35; what do you think of them? Does the university send a list of people they propose to admit? How does the Pharmacy Board get the list?

Hon. Rahael: Again, the Pharmacy Board does not get a list. I had individuals coming to me and they cannot apply to the university because they need to get a registration number from the Pharmacy Board. If you go to the university without a registration number from the Pharmacy Board, the university will then ask you for it so that you have to go now to the Pharmacy Board in order to get that and that is how—whether it is here or not, that is what has been happening.

Sen. Prof. K. Ramchand: Thank you very much, hon. Minister. I hope something will be done about this. What has to be done about it is that the Pharmacy Board is to be told you cannot interfere with the admission processes at the university and the UWI management can say that too. We refuse to respect—there is no way the university should allow that, and you are quite right, hon.

Minister, the university should just say we recognize that. These people are entering and confusion is being made between being registered as a pharmacist and being accepted as a student to the degree. But unfortunately, this amendment has not got anything to do with that.

Madam President, in the Minister's presentation he talked about—I do not know if he went so far as to say, “falling numbers”, but he gave statistics to show that we were not producing enough. Although 18 out of 20 is good, but 20 is not enough; more could have applied. I am assuming that there is room for more, that we would not have to get more staff and more physical facilities. There is room for more students in that degree. So the remedy for that is not to import. That should be a final passage. The first thing is that the university should embark, and the Government too, on a campaign to draw to people's attention that this degree exists and there is a career path that you can follow if you have it and there are prospects for you. You have to make it clear to people in the Sixth Forms that there is a career waiting here for you. It is the first time I have heard that there is a four-year degree in pharmacology at the University of the West Indies.

Hon. Rahael: Yes, that is what is being done.

Sen. Prof. K. Ramchand: It really has to be advertised, and I am sure if it is advertised in the right way there would be more people applying.

Hon. Rahael: In my opening statements I talked about the amendment to the Pharmacy Board, Act Chap. 29:52 where it will provide for automatic registration of graduates of the University. And it went on to say also to remove the obligation of the council of the Pharmacy Board to register and maintain a register of pharmacy students and assistant programmes. So part of the amendment, Sen. Bro. Khan, is the fact that we are saying we want to remove—whether it is ambiguous—of the council or the Pharmacy Board to register and maintain a register of pharmacy students and pharmacy assistant trainees. So this question about going to the Pharmacy Board to register as a student will not apply whatsoever.

Sen. Prof. K. Ramchand: Maybe I read the legislation a bit fast, but it seems to me that part had to do with registration as a pharmacist. [*Interruption*] I agree absolutely that the Pharmacy Board should not have any power to stop people who the UWI finds acceptable.

Now to the end of the process and the question of internship and examination. I really do not see why a graduate of the UWI, who is getting his degree from the UWI, should be subjected to an examination six months later. But I see very good reasons why there should be a period of internship. I agree with Sen. Dr. Gopeesingh, yes, internship but abolish the examination. But that is in relation

to graduates of the University of the West Indies. With respect to graduates of other universities, I think both the internship and the examination are necessary.

Hon. Rahael: By the council?

Sen. Prof. K. Ramchand: No, not at all. This examination could only be set by the University of the West Indies, and there are reasons for it. When an accreditation board accredits overseas institutions, it is saying first of all, that the procedures in this university, the staffing in this university, the teaching and so on are up to the standard of an international university, a general acceptance of the standard. And the next thing they are saying is that the content of degree includes most of what would be included in the content of other degrees in other places.

An accreditation council cannot, in such a short space, do more and when I look at this list of 45 universities that have been accredited I have to ask: Has the Accreditation Council looked at the curriculums, looked at what are the first-year courses, what are the second-year courses, the third-year courses, fourth-year courses, who teaches them; what are the core components of the degree, what are the outside subjects required? Have they done that? They cannot have done that, not for these 45 universities in such a short time.

If they had committees of people with degrees in pharmacology that could do that and the academic experience to vet the degree in a thorough way and say yes, this is a good degree for us, fine, but I do not think they can. They can comment on general standards, they can comment on general content, and so we need, when graduates of foreign universities come here—because when our doctors and nurses and everybody else go to other countries, and are asked to write an exam, what they are recognizing is that they are not being told you are substandard. They are being told there are certain practices, customs and regulations in this country for the practise of your profession which you have to show that you know before you can get a licence to practise. And the purpose of the examination would be to make sure that is. It is not a matter of saying you come from an inferior country, your university is not so good. They are saying, we want to make sure that you have mastered our system and understand how to use your degrees and qualifications in our system—and then the internship, of course, has to do with learning the culture, learning the people and if English is not your native language, gaining facility with the language and the examination at the end of the six months, should be a test of your ability to use the language that we speak here. So for foreign students, for graduates of foreign universities, Madam President, I would insist on the internship and the examination after six months. For the Trinidad graduates, internship alone.

There is a little problem that I have—maybe I am being pedantic. The word “diploma” means one thing to me and the word “degree” means something else. I see here:

“The Registrar shall register an applicant wishing to be registered as a pharmacist where he—

(a) is the holder of a diploma or a degree...” [Interruption] Diploma has been removed?

Hon. Member: Yes.

Sen. Prof. K. Ramchand: Thank God. So I do not have a problem. And in the other qualifications the medical certificate, certificate of good character and the prescribed fee, I want to agree with Sen. Dr. Gopeesingh, that the documents should include a certificate of good standing in his profession. It must be stated here in the legislation. We do not find out much when the Government says, “Yes, he is in good standing.” I am sure Mr. Bush must be telling us some of the criminals who are being deported back here are in good standing. A Government will always say those who want to come are in good standing. They want to ease their unemployment problems by having their people come here for jobs so they will say they are in good standing.

I have another problem with the list of institutions. My geography is not so hot. I do not know where Adamson University is; I do not know where Central Ilocandia College of Science and Technology is, I do not know where Central Luzon Doctors’ Hospital Educational Institution is; Central Escolar University. How many countries are involved? [Crosstalk] Which, National University? I would really like to know what countries and in the first set of amendments there was a name—a man in a list of institutions, they pulled out his name in a list of institutions. Thank God. They must have sent a cable to him and told him we do not have you on again—Dr. Hari Singh Gour Viswavidyalaya. They moved him and I do not know why they moved him. [Crosstalk] I am not making fun.

Madam President, it is a very serious question about the accreditation. I do not know whether—when you accredit a university, are you saying that everything they teach—that we accredit them in West Indian literature, in pharmacology, in traffic police management? People offer a whole range of degrees. Is it only the programmes? Let me be sure it is only the programmes and if it is the programmes, how thorough has the search been, and if we can be satisfied that the search had been thorough I might be willing to budge about the examination, but I

have a feeling that it cannot have been thorough enough and that we need the examination. I still think even if it is pharmacology you have to know what is the first-year programme, second-year programme, third-year programme, fourth-year programme.

Madam President: Senior Counsel, this is the President.

Sen. Prof. K. Ramchand: But even if I do not talk to you it is not that I am vexed with you or quarrelling with you. I am not like all my friends. I think we have to see whether some kind of discussion can take place with the Pharmacy Board to get their input: how do they feel about it? And we have to debate the issue with them, we have to find out from them whether there is a shortage in fact and we have to address the question of salaries that they have spoken about.

Madam President, I think I have covered the topics and I close on reminding the Minister, that in the medical profession, including the delivery of drugs, rigorous standards are essential and nothing must be done to dilute the regulations and the processes by which we ensure that people who are handing out drugs to the population can read properly, know about drugs, know the kinds of drugs that are being used in this country and kinds of diseases we have and so forth, and that is part of the supervision process and the learning about the place process. And it is even part of their professional qualifications. If you are coming from Alaska, and coming to work in a pharmacy in a tropical country there would be many drugs you would not have had the practice with and in a small country like this, the cultural context is important.

There are many people who regard pharmacists as doctors; they go to the pharmacy—they cannot afford to pay the doctor—and tell the pharmacist, look, I have so and so and this part hurting me and that part hurting me, what do you think I should take? What is the best thing? They get their drugs prescribed by pharmacists.

Madam President: It is illegal.

Sen. Prof. K. Ramchand: It is a bad thing but it happens. If you are very poor and you cannot afford to go to the doctor, you go to the pharmacist as the man in the drug store. I ask a lot of fellows who are not mechanics what to do about my car sometimes.

Madam President, I really do sympathize with the need to provide more nurses and pharmacists in this country, and I hope I have made a contribution to amending these amendments to bring about that end.

Thank you.

Sen. Dana Seetahal: Madam President, I have studied the amendments proposed as against several pieces of legislation, not the original Act alone. The Act was amended in 1981 substantially by No. 42 of 1981, to change the entire law in some areas in replacing sections 16, 17, 18 dealing with discipline, dealing with regulation and matters of that kind. And it was subsequently amended—No. 12 of 1998, recently passed by this sitting Parliament in 2003.

Madam President, the first point I wish to make is that the amendment which is proposed to repeal section 18—the current section 18 requires or provides that a person may be registered. Let me deal with 17A first. A person who has been granted a degree by the University of the West Indies and served the prescribed time may be registered before the practical training period. The problem here is when you repeal that section, through you, Madam President, and replace it with section 18, you have removed the entire provision which says a degree of the University of the West Indies allows you to be registered. You have taken away section 17A. Section 17A provides:

“Every pharmaceutical student who—

- (a) has been granted a degree in pharmacy by the University of the West Indies or such other diploma, degree or certificate... and
- (b) has served as a pharmaceutical student for such terms and in accordance with such conditions as may be prescribed...shall be registered as a pre-registration pharmacist.”

So that no longer exists. So for any person to be registered as a pharmacist who has a UWI degree, he will now have to fall under your new section 18 which says:

“The Registrar shall register as an applicant wishing to be registered as a pharmacist where he—

- (a) is the holder of a diploma or degree in Pharmacology by any of the approved Universities...”

So you have removed the UWI provision and made a general provision for registration. That is what I understand the amendment to be saying.

Section 17A is repealed. Section 17A which is provided in Act 42 of 1981 talks about the degree. Prior to that, what you had was the old legislation dealing with this apprenticeship system and all of that. There were no degrees. There was this apprenticeship after two years; you went so and so and you did what. In 1981, in keeping with the modern world we provided for this degree, a degree granted by the University of the West Indies.

5.30 p.m.

This will be repealed if we pass this Bill. What we will have instead is just a system of registration. We will have, under clause 5, the proposed section 18 because the previous one is to be repealed. The previous one was a long section dealing with the registration of a pharmacist. He had to be of good character. He had to undergo training as a student. He had to pay fees. He had to have the pre-registration experience—a long thing. Now, it is proposed, once you are in this Schedule and you have the requisite medical fitness and a certificate of good character, all is well.

The problem I have—and it is almost laughable—is that when you look at the Schedule, nowhere was the University of the West Indies mentioned. So they threw out the baby with the bathwater. If this Bill had been passed, it meant that no person who was trained at the University of the West Indies would have been a pharmacist. Thankfully someone recognized that at the last hour and now we have a new list of universities. I take it that these are from India and there is also now included the University of the West Indies.

In my reading of the Act and the proposed amendment, unless you have a degree from one of these Philippine universities—and I mean no disrespect; I think that is the accepted term—some Indian universities or the University of the West Indies, you cannot be admitted. That is my understanding of what is here. There might be another understanding because I am reading it in conjunction with the other pieces of legislation that I have. It may be that it is hidden somewhere and I cannot find it. If it were otherwise, why would they have stuck the University of the West Indies in here as the last name?

Is there a provision in the Act about English degrees? Perhaps the Minister can tell me, through his technical advisors. Maybe it is in the original Act, which I do not have. I hope not, because it means that if you are trained in England or the United States or any of those places, you would not be admitted as a pharmacist. As I said, I hope it is otherwise.

Madam President, a question was raised by, I think, Sen. Dr. Gopeesingh and Sen. Prof. Ramchand about the accreditation of these universities on the list. We passed legislation in this Parliament to have an Accreditation Council. We went into it in detail and the then Minister of Science, Technology and Tertiary Education explained how important it is and that we would assess tertiary institutions here and that when we had foreign universities coming here, we would be able to say that a university in Iceland somewhere may not be as good as a university in New York and vice versa. You could look at the curricula.

There was a lot of debate about this and I remember Sen. Prof. Ramchand getting into it. We talked about the staff making a university and all of that.

The Minister has assured us that there was some thought put into the choice of these universities. I am not sure if anybody else knows any of them, but that is not a measure, except to say, like Sen. Prof. Ramchand that the names of some of these universities are so general that it could be national universities in Timbuctu; it could be Pines City College somewhere. I know there is a Pinehill in Barbados, unless there is a college there. St. Paul University could be in St. Paul, Minnesota. University of Bohol sounds as if you just changed it to a “B” by accident. There are many things that are not specific.

Having said that, the Minister did assure us that there was some thought about whether the universities could meet certain standards. My question is: Why not go through the Accreditation Council in the first place and have them approved? When you want to find out which university to go to in the United States, do you not call up—I do anyway—the United States Embassy and ask if it is on the list—and there are some lists—so that you know that you are getting a reasonably good quality university?

I think that, without any kind of protection, we can get a not-so-good standard of pharmacist. This is supported, in my view, by the fact that there were several universities—Banaras Hindu University, Dr. Hari Singh University, K. M. Kundnani College of Pharmacy and L. M. College of Pharmacy in the original amendment proposed, and they are now removed. We do not know why. There must be some good reason, but could the reason not be that it was found out that these may not have reached the desired standard? I have concerns about that.

There are two concerns there. The first is a major concern and I think I see the Minister's advisor shaking her head with respect to the first one, so it may well be that English- and US-trained people can be admitted even with the proposed amendment. I want to be assured of that and I am sure the rest of my colleagues would like to be too.

The second point I wish to make—and the Minister put forward the view. (I will query this): He suggests that there is an attempt by the Council to frustrate the entry into this country of pharmacists who are qualified. It may well appear so. I hold no brief for the Council—let me say that at the outset—but I have troubled to read some sections of the Act. In the original Act and the 1981 amendments, there are provisions which give the Council unholy powers. I think it has to do with the fact that the Council was the body initially that managed the whole system. They set the examinations—there was no university degree. The Council has these powers

and the powers are still in the Act. The Council is acting in accordance with the powers given it, so in my view when one says that the Council is taking upon itself a lot of things, it is not really so.

For example, section 16(2) of the current Act, and the 1981 amendments say that the Council shall appoint and define the duties of examiners in respect of any examination of candidates other than an examination conducted by the university for the purpose of registration.

If we are talking about any other examination, the Council is the one that sees about it. Up until 1981, the Council saw about all examinations. So, in 1981, it is the others, except examinations from the University of the West Indies. It is very wide. If you are dealing with other examinations of, probably, the pre-registered people, the Council has to deal with that.

Secondly, the Council supervises the holding of examinations. The Council has a lot of powers that include prescribing, under section 16(1), rules of discipline in respect of pharmaceutical students. That is the problem, Mr. Minister. The Council has powers under this Act that are not amended—an old Act. In the 1960s all these Acts were passed—Pharmacy Board, dental, nursing; all of these things were just taken together in a lump and brought to Trinidad and Tobago, probably from England. The Council has the power to prescribe rules of discipline in respect of pharmaceutical students and generally for the purpose of carrying into full effect the objects of the Council.

If that is so, Madam President, and there are students entering the University of the West Indies, if the Council has this duty, not in the regulations, but in the substantive Act requiring the prescribed rules of discipline in respect of students, does it not seem reasonable that they would want to approve the students who are going to be admitted?

I am not saying that it should be. I am saying that if the power is there and they are mandated to do, if you do not have students behaving properly, the Council could be accused of not doing what they are supposed to do. The Council could be challenged. The point is that that should be taken out from there if you want the whole thing to be a university system. To say that the Council is doing all these things illegally and is stepping outside of what it has to do is not right.

Now, in connection with that same point, there is a regulation—there are regulations, by the way, which we have not talked about—that deals with the practising certificate. I am not sure what the regulation number is. We are talking

about the requirement for a practising certificate that is made under subsection (40) of the substantive Act. I think it is Regulation 22. If you have this new provision, section 18, which deals with registration as a pharmacist, how do you practise?

In the Law Association, we have a practising certificate and if you do not have that you cannot practise. Someone can say: Who are you? Let me see your practising certificate. It has been done twice that I know of and if you have not been properly registered, that is it. Now under the regulations, there is this provision and the amendment does not take away that provision. So, will the Council not still have to issue the practising certificate? Is there some conflict in the view offered by the Minister that this whole thing is because the Council is exercising this power arbitrarily? If they are exercising it arbitrarily here to register, then what is the difference in terms of the issue of the practising certificate?

Take my point: You do not just deal with the registration. I am not saying that you put in an amendment now for that. I am saying that if your claim is that the Council is misusing power, then this will not resolve anything because you still have the practising certificate and I do not see that the amendment to the substantive legislation providing only for registration would deny the right of the Council to make this practising certificate a necessity. This is my view. You have been studying this much longer than I have. There might be some response to that that could make this more understandable.

My penultimate point is: it seems to me, Madam President, that of late we have been lowering the standards of the professions. In 2001, an amendment was passed to allow people who were trained in England to come to Trinidad to do six months without any reference to the Caribbean law schools to practise. That was a breach of the then agreement between the governments of the Commonwealth Caribbean. The purpose was to have Caribbean-trained lawyers. Now Caribbean-trained pharmacists might sound like a phenomenon to Senators, but whatever profession you have, when you practise in the area, you bring something of the region to it. When you are trained there, you have that experience. You are dealing with probably sand and different things, if you are dealing with limestone in Jamaica, volcanic soil and so on. You have the same thing with law and everything else. So when you start bringing a mass of foreign-trained people, there is a problem there.

With the English-trained lawyers, who can just do the six months, at least you still have a common law system, but when you are talking about foreigners and masses of them because the bulk of these universities are Philippine universities and we are dealing with a whole different culture, I am not saying that there might not be need. I am talking about the cultural situation. There are masses of people

trained abroad who are foreigners—we are not anti-foreigners; we are not xenophobic by any means—and when you bring this bulk of people into a foreign situation, there will be cultural and other problems, not to mention language problems.

I daresay the Minister might even agree that with some of the Cuban doctors there were problems. There was resistance in the system. I understand that there are a few of them who left. This is my understanding. It is not an indictment or a personal attack. I am saying that you have to face the situation and the reality.

5.45 p.m.

There is an issue there and we do not want to drop the quality. I think that is why the dentists were resistant as well. I am sure the pharmacist, with whom I spoke, had a concern there, because there are 518 registered pharmacists, I am told—I was given that specifically by the president—and 125 are employed with the Government. It is said that in recent times there has been a movement away from the public sector, because of the pharmacists. This is my final point. They are going into the private sector. There are 236 licensed pharmacies in this country. In 2005, there were 12 new ones established, but strangely enough seven were closed. It seems that many of them are moving away to try their luck in the private sector, for reasons of comfort, maybe money or a lot of things.

When there is a lot of conflict in any professional situation—I know that there was a lot of conflict in the government department when I was there in the 1980s and 1990s, with respect to salary and terms and conditions. At different times, when the conflict escalated, people would leave. We had that. It is not unexpected. The point is how do you get them to stay? Do we have enough in Trinidad and Tobago to satisfy the number of people here?

People talk about state lawyers and they always say that there are too few. When you add the numbers, you might find that is enough for the society. I guess it is the same thing that the Minister is saying, but is the answer bringing droves of foreign people? There is an animosity created in the system because we compare what they earn with what we earn. They have housing and we do not have housing. They have this and we do not have this. They are with the administration/government and we are the delinquents. There is conflict. I am seeing too many of those in different situations and they are created by this kind of legislation or situation, if you like. The obvious answer would be to raise the salaries, they say, and the terms and conditions and have the people stay. It is not as simple as that. It does not mean that they will stay. There are other ways that you can, in my view, go about trying to meet the imbalance in the public service.

My final point is the question of this imbalance. I am told that 188,000 persons were serviced under CDAP. This is Nipdec figures. I am not sure if it is for the period 2004 or 2005, but if that is so—if we have this body that is providing drugs, and if you can take your prescription and go anytime because there are pharmacies, I know of at least two in Curepe, that open 24 hours per day; I do not know if they still open like that with the number of shootings, but up to recently they open late—and you can get this prescription, then it begs the question as to why you want to have all these people working in the public service. Now do not misunderstand me, I am not saying that we should abolish the public pharmacists and have CDAP. In fact, some people may argue the other way. If you have this, it seems to me, in a practical situation, why do we need to have the number of public pharmacists? What do they do or what should they do? It might sound like a naive question, but I really want to know. There are all these prescriptions being filled out there, what is the need?

I see 188,000 persons were served, is that wrong? It seems to me that is a lot. I do not know if that is a handful. Anyway, the Minister could probably argue. My point though is that I would have thought that there is less need. I am not making any single point; there is a combination of points.

I have issues with the list of universities, whether or not this contemplates other English-speaking universities other than UWI. There is the question of the legislation. Should the whole thing not be done to reconsider the work of the Council and how it operates, but not blame the Council and say that they are doing these things when, in my view, the legislation mandates the Council to do all of this?

That is my contribution. Thank you very much, Madam President.

Sen. Wade Mark: Madam President, I rise to make my contribution to the Pharmacy Board (Amdt.) Bill. I want to say from the very outset that this legislation represents a knee-jerk reaction to a very intense, at times, heated industrial confrontation between the pharmacists in the public sector and the Ministry of Health. You will recall in 2005, many of the hospital dispensaries were closed or shut down because of industrial action embarked upon by pharmacists within the public sector. I think if the Minister is very straightforward as he is, he would admit, he has not told us to date the rationale for this piece of legislation that is before us. The Minister is ill-informed. He has been ill-advised and the approach that has been taken here is quite myopic.

When the Permanent Secretary in the Ministry of Health was sent to the Philippines and travelled first class and cost the country \$5,000 to recruit personnel in the Philippines, the whole exercise was not properly executed by the Minister and by extension the Government. It was poorly executed and today we have a piece of legislation that is totally flawed, being brought to this honourable Senate for approval. I think that the Minister has had experience in closing down industries, sending home, retrenching thousands of workers and confrontation with the doctors. His predecessor, Hon. C. Imbert has had his own confrontation with the pharmacists.

You would recall the kind of challenges that were faced by the San Fernando General Hospital, where there were shortages of pharmacists. What was the basis for the industrial confrontation and conflict? The root cause lay in the fact that these pharmacists were underpaid and over worked. The Government, for some strange reason, seems to be executing a policy of frustration, as it seeks to undermine the public infrastructure that was necessary to provide quality delivery health care services at the pharmaceutical level.

Madam President, you would have been here when we advised the Government in 2003, when they brought an amendment to the Pharmacy Board Act. If you recall, that amendment which was piloted by the hon. Minister's predecessor, was supposed to create a new category of support staff called, as he indicated earlier, pharmacy assistants. More importantly, the legislation reduced the qualifying period for internship after registration of pharmacists, from three years to one year. That was legislation that we passed in 2003. We warned the Government whether they knew what they were doing and whether they had thought out carefully the implications of that piece of legislation in 2003. There were consequences. Many persons who were in the public sector left and went into the private sector. They opened their own pharmacies and the kind of service that one would have expected after taxpayers' money would have been invested in training, was not realized, because the amendment reduced the period from the three years to one year.

An essential component of health care is the dispensing of pharmaceuticals, which includes the counselling of patients on the proper use of pharmaceuticals. We have to understand when we bring in strangers—I am a national of this country. We would always put Trinidad and Tobago first. We must put our citizens first and foreigners after, and I make no apologies for saying Trinidad and Tobago must come first and the citizens of the country must come first. Here it is, we have pharmacists and we are hearing from the Minister's statements as if the pharmacists, the Pharmacy Board and all the people who make up the pharmacy

association were in some conspiracy to undermine the Government, restrict people and frustrate the process, nationals of this country. Politics is about ideas and interests and it encompasses the land.

These amendments to the Pharmacy Board Act of 2003 were not properly thought out, and today there has been an exodus. The Minister said earlier that there are approximately 70—80 pharmacists in the entire public sector. I am hearing that we have only 70—80 pharmacists within the public service of Trinidad and Tobago? What has happened? What steps, not necessarily your good self, did your predecessor take to establish the infrastructure and promote the environment, in order to keep our pharmacists within the public service? The poor, measly and miserable terms and conditions of employment that these pharmacists have been subjected to over the years have become intolerable. They could not take it anymore and they had to go and look for a better way of life. It is very sad. A pharmacist has a very important role to play, particularly in counselling patients. I am not a medical doctor and I would not like to be one, although it is a noble profession. If people are not trained properly to administer proper health care to the patients, how are we going to reach this so called Vision 2020, which is only a word?

I have a document here which I am going through and I am seeing where in 2020, Trinidad and Tobago will be taken over by big businesses. This economy is going to be privately driven and the only role for the State is an enabling and facilitating role. They are giving infrastructure to big businesses and everything to the private sector. That is the kind of 2020 vision I am beginning to read about. That is a disaster for Trinidad and Tobago. That cannot be right for Trinidad and Tobago, given all that is taking place in the world today. That is another topic.

I would like to advise the Minister of Health that not every time we have a crisis in the health sector the first response is to import labour. Every time there is a crisis in the health sector, there is a tendency, on the part of this Government, to resort to the importation of labour, whether it is the professionals, in terms of doctors coming from the United Nations or now we have Filipino nurses. We have these people coming into the country, which I find to be shortsighted on the part of the Government. The Government is not prepared to provide its own employees with proper terms and conditions of employment, but they will send their Permanent Secretary to recruit people into this country. They would pay them, house them, give them perks and allowances and deny their very citizens the same terms and conditions that they are prepared to give to foreigners. Is that not an anti-nationalist posture on the part of this regime? What kind of patriotism

is the Government building in this land? What kind of love is the Government generating, in terms of looking after its own citizens of the republic? I cannot understand the logic of the Government's reaction to these kinds of developments in our country.

I think the Minister of Health would know that these public officers in the public sector, for years, have been calling for a reclassification, over 30 years.

Hon. Rahael: You were there for seven.

Sen. W. Mark: But the PNM has been in power for more than 30 years in this country and these people have been clamouring. I know your spell was short and it will be short. They already have a candidate for Port of Spain North/St. Ann's West. Your spell and your stint are short. I think this hon. Minister of Health, for whom I have a lot of respect, must be more straightforward and frank with this Parliament.

I have learnt, and I want him to deny it here today, that at 11.00 a.m. yesterday the Permanent Secretary in the Ministry of Health was provided with all the temporary licences giving the 500 hours of supervision that the Filipinos were subjected to, under pharmacists over the last three months in this republic. They were given their instruments, that is their temporary licences, yesterday at 11.00 a.m. This hon. Minister has presented this Bill today and he has not told us that he has brought this Bill to surgically remove this provision. In spite of all the opposition, conflict and disagreements, the Filipinos have gone through the process. They have gone through 500 hours of supervision and they have been issued temporary licences. They are now able to administer health care, via the dispensary or pharmaceutical deliveries, and our citizens who are ill can be assured that they would not be murdered. I was waiting on the Minister to tell this Parliament that this has happened and, therefore, this Bill that he brought here is designed to achieve that objective. He is showing me. He does not want to get up. He is showing me, because I exposed him. You did not show me before. *[Interruption]* Madam President, I am addressing you. I am not addressing him.

What is the purpose of this Bill? Why did the Minister bring this Bill to the Parliament? He brought this Bill to excise from the parent Act that training component of 500 hours of supervision for foreigners who are coming here as pharmacists. He has brought a Bill to excise that from the parent Act. The same Filipinos have gone through the process and were issued with their temporary licences at 11.00 a.m. yesterday. Why is the Minister proceeding with this piece of legislation? Is that not a provocation on the part of the Minister? Why is he provoking this Parliament by bringing a piece of legislation that he knows is not

necessary, given what has happened? I find this Minister has really let me down. In other words, you have brought in 50 or 100 Filipinos, do you have intention of bringing more, as the case may be? The problem here is why is the PNM Government lowering the standards of our country?

Even if you have a degree, it does not qualify you to administer pharmaceuticals to me. There is a provision to allow these persons to go through 500 hours of supervision, under a responsible pharmacist. Why is the Minister of Health attempting to excise that particular provision? How can we support this? I think the Minister is really abusing his authority. I think that the Government is guilty of abusing its power in this context.

All you do as a Minister is advertise. I am sure the hon. Minister of Health has spent close to \$50 million so far just in PR. If he takes only one quarter of that money and provides—I say approximately \$50 million, maybe more. Every time I turn on my television, delivered, delivered, delivered, delivered! What is that? Delivered what? It is a hoax! There is no delivering of anything. People cannot get Panadol or aspirin and they are living on brown paper, but he say he delivered. I have never seen a man who likes himself so. “Oh gawd!” Take some of that money and give it to the poor, in terms of pharmaceuticals.

Would you believe that these Filipinos are going to be here for three years? My estimation is that it will cost the taxpayers between \$20 million—\$30 million to keep these foreigners here over the next three years. The Government has forsaken its own in the process. Why?

When we passed the amendment in 2003, we talked about training pharmacy assistants so that they could graduate over a period of time to become full-fledged pharmacists. Here it is, we have this disaster facing us as a result of the incompetence of this administration.

I understand that in Australia they would not accept these Filipinos because they are underqualified. They cannot be accepted in the United States, but we, like the aluminium smelter, we are a dumping ground. The Americans do not want aluminium smelter plants in America, but we are accepting them here.

As my colleague said, the Minister has provided no evidence or information. If we are part of the Caribbean Single Market and Economy and we have a law that raises or reduces the level of restriction on the movement of professionals within Caricom and those members who are within the Caribbean Single Market and Economy, in particular, did the Minister see it fit to approach Caricom and

the members of the Caribbean Single Market and Economy? He has not given us any information on that matter. He has not told us whether he has attempted that.

I want to refer you to an article in the *Newsday* of Saturday, August 06, 2005. The headline reads:

"Health Ministry placing public at risk

The Health Ministry is putting the public at risk in its hasty attempt to register pharmacists imported from the Philippines to work in the local health sector. This allegation was made on Thursday by first vice-president of the Public Services Association (PSA) Stephen Thomas... Thomas announced that Public Service pharmacists will not cooperate, supervise or assist with orientation of the Filipino pharmacists brought in by the ministry until all issues affecting them (local pharmacists) are resolved.

In an effort to safeguard the population, Thomas said, the custom over the past 30 years..."

Just as how the people of St. Ann's have been using the President's grounds for over 40 years, and now the Prime Minister wants to appropriate that ground for his own garden, so he could have his tea party, it is the same way we have a situation where the practice of 500 hours of supervision has been taking place in this country for 30 years and the Minister, in one fell swoop, is bringing legislation here to discontinue that practice in this country. How can you justify that kind of approach to the population?

I will continue quoting from this article.

"Thomas said, the custom over the past 30 years has been for foreign pharmacists..."

Not local. Locals would have gone through their period of internship. They would have had examinations. We do not want that. I agree with Sen. Dr. Gopeesingh, if that is what they have at the level of the Pharmacy Board, an examination, we should deal with that. In terms of the foreign pharmacists, to practise in our country they must complete 500 hours of supervised service, followed by an examination of the pharmacy laws of Trinidad and Tobago by the Pharmacy Board of Trinidad and Tobago. What is wrong with that? If I am a lawyer and I go to America they have exams for me to take. I cannot present my document and say that I am a lawyer and that I have come to practise in America. I have to go through certain processes. If a foreigner is coming here to administer pharmaceuticals to our citizens we must be assured that these people are of sound

mind. Therefore, 500 hours of supervised service, followed by an examination, is the practice here. Therefore, what the hon. Minister is attempting to do in this legislation, according to Mr. Thomas, is to waive this well-established and tested custom and practice to expedite the process of registering these foreign pharmacists. The Minister is using this Parliament to undermine the health care of the citizens of this republic. That is what the Government is doing here and it wants us to support that measure. We cannot! We will not compromise the health care and we will not put the patients at risk in that kind of way. I would not be able to live with my conscience.

The Minister destroyed approximately 10,000 lives and 40,000 families in central and south Trinidad and he sleeps well. If I were him I would have nightmares every night.

Hon. Rahael: I have liberated them. That is what I have done.

Sen. W. Mark: I have never seen such contempt and arrogance coming from this Member.

Madam President: Senator, come back to the Bill.

Sen. W. Mark: I would come back, Madam President. It hurts me because when I see working people being destroyed by elements of the bourgeoisie in this country and they claim to represent people. How can you represent people and destroy their lives? I cannot support that. That is why revolutions are had in countries; to get rid of you all.

Our view on this matter is that the Government should not be pursuing this legislation today. We believe that the Government should withdraw this legislation and if it cannot do it, we would want to support Sen. Dr. Eastlyn McKenzie's amendment to the legislation as proposed by her earlier.

There are so many important matters affecting the health care and health needs of our citizens in this country that the hon. Minister who advertises himself—I am sure that at times he gets fed up—should go about this exercise. There are laws that we need to put into effect.

Madam President: Senator, will you give way for the Procedural Motion?

PROCEDURAL MOTION

The Minister of Community Development, Culture and Gender Affairs (Sen. The Hon. Joan Yuille-Williams): Madam President, I beg to move that the Senate continues to sit until the end of this debate.

Question put and agreed to.

PHARMACY BOARD (AMDT.) BILL

Sen. W. Mark: I would have thought one of the areas that we should be addressing at this time, particularly when we deal with pharmaceutical products, is regulations to deal with the sale of herbal products in this country. I do not understand why the Government of this country continues to allow the importation of all kinds of herbal products. I understand they have a lot of beneficial effects. I do not know, but citizens of this country are being told that if they have sexual problems they can buy herbs, if they have cancer they can drink herbs, or if they have diabetes they can drink herbs. There are no regulations governing these products. What is the Minister of Health doing about this? These are regulations that are needed to protect the citizens and the public of the country. We have nothing, no action from the hon. Minister on this matter. I call on him to do something about this matter.

I wish to bring to your attention as well the whole counterfeit trade of drugs. That is a trade in which the industry is approximately \$2 billion. The pharmaceutical industry is valued at approximately \$2 billion per year.

Hon. Rahael: How did you arrive at those figures?

Sen. W. Mark: Do you want me to quote for you? Madam President, may I quote? I want to refer to an article in the *Daily Express* of Wednesday, March 31, 2004. The headline is:

“Counterfeit trade hurting pharmaceutical industry.

It is an industry worth more than \$2 billion in imports.”

That is the pharmaceutical industry. You have not countered that. What is worse is that a lot of the moneys that we are spending on the importation of pharmaceutical products may well be spent—or is the money being spent on counterfeit products? Those counterfeit products could kill. What is the Minister of Health doing about the counterfeit trade?

Sen. Dr. Kernahan: Delivering!

Sen. W. Mark: Why not put an ad, boy and say counterfeit, delivered? He is only delivering. I think he should work in the maternity department; he is only delivering. He should go and work there. He is a good gynaecologist.

I want to let you know that this is a very serious matter and I would like the hon. Minister to recognize that this particular trade is doing a lot of damage to the pharmaceutical industry in this land. I would like the hon. Minister to tell us what

steps are being taken by him to amend the Food and Drugs Act, in order to ensure that our citizens are not exposed unnecessarily to counterfeit drugs in this country.

All those “fellas” who are taking Viagra, I want to warn them that there is a lot of counterfeit Viagra in the country. That is why many of them are dying from heart attacks, it is counterfeit. “All ah all yuh who like Viagra be careful.” I am not saying—

Madam President: You are giving medical advice.

Sen. W. Mark: No, Madam President. I want to quote for you. I got it from here. They warned these “fellas” in this article to be careful with Viagra, because it is a form of counterfeit drugs.

On a more serious note, consumers are being defrauded. When you go to buy a product, it looks real as though it is the real thing, but it is a counterfeit product. The Minister of Health, who is supposed to be protecting the public interest through the Food and Drugs Division, has not done anything to amend the legislation to protect our citizens. Instead, he brings a Bill to support foreigners, instead of our people, in this country.

I want to also advise him of an article. Sen. Dr. Gopeesingh made reference to it, but I want to go in a more detailed way with this one. This article is in the *Newsday* of Thursday, July 21, 2005 and is headed:

“Arima pharmacist slams use of generic drugs”

I want to read this for you. One senior pharmacist by the name of Patrice Joseph expressed her concerns at a meeting in Arima, involving the Commission of Enquiry into the Health Sector over the adverse effects of generic drugs on patients. I quote:

“...hospitals in the past would stock up to 30 per cent generic drugs and 70 per cent brand.”

Today these figures have now changed and 70 per cent of generic drugs are being used in both pharmacies and hospitals in Trinidad and Tobago.

What is the Minister of Health doing about that? She made an example that all of those patients who are diabetic in this country were becoming more out of control, since the use of generic drugs showed no quick results. This is according to this lady who is a pharmacist by profession.

“Generic drugs are cheaper but are inferior to the brand itself.”

That is what Nipdec in Chaguaramas is importing and distributing to the hospitals. Maybe these smart importers of pharmaceuticals are probably doing the same thing too. There are no standards and regulations in this industry. That is what we are calling for, more regulations. It goes on:

“More patients have realised the drugs are not of good quality, and have become dependent on needing more prescriptions. Patients should not be given more than three months’ prescription, and yet as the drugs do not work, we have to administer more aggressive treatment.”

That is what a woman who is a pharmacist in Arima is saying. She called for tests at the laboratory level to deal with these drugs that are being given to patients, to see if these drugs can be relied on.

We are seeing drugs that we have never seen before coming from Israel. I know you all have a good relationship with Sharon. I hear the Government would be bringing offshore patrol vessels just now. Whilst people are dying and cannot get pharmaceuticals, the Government is buying three offshore patrol vessels costing \$1.7 billion even though two other tenderers are offering them for \$1.2 billion. We would like to ask the Minister of National Security, why are they spending \$500 million more on this particular—I would have a press conference on that one. I have enough information to expose the Ministry of National Security and the Prime Minister in this instance.

May I go on? We are seeing drugs we never saw before coming from Israel. We are seeing drugs which were taken off the list, reappearing again. Where are the standards? Where are the regulations? Where is the surveillance and monitoring? Nothing is taking place. She said several complaints were made about the use of generic drugs and nothing has been done about it. I call—

Madam President: Come back to the Bill.

Sen. W. Mark: I am dealing with drugs. We are talking about pharmaceutical products.

I want to reiterate that the pharmacist is the person who performs that function of dispensing pharmaceutical products to patients when they are given prescriptions by the doctor. We have to ensure that the kind of pharmaceutical products that they enjoy could in fact provide improvement in their quality of life and health.

I would like to ask the hon. Minister what kind of compliance is there, in the system, to ensure that pharmacists execute their counselling function as I indicated earlier. One gets the impression, and I have not been convinced to the contrary as yet, that there appears to be an orchestrated attempt at undermining and frustrating the public health sector worker, those who are pharmacists, to drive them out of the health care system within the public sector and force them into the private sector. Maybe the ultimate objective of this Government, as it seeks to privatize this economy and give itself an enabling and facilitating role—it seems as if there is a giant conspiracy to undermine the public health care system in this country and privatize health care services in this country. They are starting off with the pharmaceutical sector. Is that the objective? Why do we have, as the Minister said, a mere 70 pharmacists in the public sector? Just a few years ago we had more than 270 pharmacists in the public service. Where have these pharmacists gone? From 270 pharmacists a few years ago, now we have 70, where have they gone to? The Government has frustrated these pharmacists. The Government wants me to support a measure to bring in aliens and strangers into my land? I am not supporting this legislation to bring Filipinos into this country, when I know there are Trinidadians and Tobagonians who can do the job. I want to give them first preference. I want to know how the Minister of National Security could have issued work permits to these people.

Health care is a major component. The pharmaceutical industry constitutes a very important component in the health care system of our country. I would like to appeal to the hon. Minister to pursue a more aggressive health care education programme in this country.

Madam President: Hon. Senators, the speaking time of the hon. Senator has expired.

Motion made, That the hon. Senator's speaking time be extended by 15 minutes. [*Sen. Dr. T. Gopeesingh*]

Question put and agreed to.

Sen. W. Mark: I would not be long again. I only have 15 minutes more. All of them who are saying no, will miss me in a short while. I am sure all my colleagues would like to hear me speak. They always feel lonely when I sit.

I would like to ask the hon. Minister of Health to consider pursuing a more aggressive public health—we are talking about health care in the context of pharmaceuticals. Before people have to resort to pharmaceutical drugs or products to take care of their health, if, in the first instance, we could have prevented—we are talking about healthy lifestyles.

I think the Minister already has a budget of \$1 million for PR, he should take a portion of that. How much money were you given for PR? I think a certain portion of the money, not just for the carnival period—The Government must aggressively pursue that programme.

Diseases such as high blood pressure, diabetes, heart disease, cancer, HIV/AIDS and kidney failure are lifestyle diseases. The Minister should be pursuing a more aggressive programme at the primary level. What is happening to our children at the primary school level? What kind of programme is being aggressively pursued? There are killer institutions and organizations in this country.

In places such as Singapore, in KFC they demand of them to start serving healthy food. This chicken and chips business is killing people. They told them to fix it up—“de oil and thing.” Countries are taking their health care—I am not talking about the school feeding programme; that is one thing. Young people between the ages of 20—30 years are falling with heart attacks. Many young people, women in particular, have become victims of HIV/AIDS. These are lifestyle diseases. We need to pursue a more aggressive public education programme to make our people more healthy in this country. I call on the Minister of Health because he is now in charge. I would like him to address that matter.

I would also like to say that health care is in crisis in this country. With the best of intentions, on the part of the Minister, I learnt some time ago, maybe he can brief us on it as to whether there is a programme to force workers who are currently within the public service of Trinidad and Tobago to accept a package that his Ministry has formulated, in order to force them across to a very corrupt, inept, bankrupt and completely mismanaged—[*Interruption*]

Madam President: Senator, I have allowed you a lot of leeway. We are not even talking about pharmaceuticals. We certainly do not have a Bill before us about healthy lifestyles, as interesting as it is and as knowledgeable as you are, but please come back to the Bill.

Sen. W. Mark: As a health professional like yourself I am guided. This matter before us is a very serious matter. I would like to call on the hon. Minister either to withdraw this measure that is before this honourable Parliament or agree to an amendment that would in fact provide the kind of protection necessary for patients and citizens of this country.

I do not believe that the Minister would want to compromise the health and safety of citizens who are going to be subjected to a kind of arrangement if this Bill is passed in its current form, in which we would have no safeguards for the

citizens of this country. I would like him to reconsider this measure and to ensure, when we leave this Parliament this evening, we leave here with an understanding that we must put the citizens of our country first.

We must put the health care needs of our people first and we must ensure that any foreign pharmacist that comes into our country must be subjected to the 500 hours of supervision by a responsible pharmacist in our country. I do not believe the population would expect anything less from this honourable Senate. I thank you very much.

ADJOURNMENT

The Minister of Community Development, Culture and Gender Affairs (Sen. The Hon. Joan Yuille-Williams): A few minutes ago I did seek leave to move a Motion to continue sitting until the end of the debate on the Pharmacy Board (Amdt.) Bill. However, after brief consultations, I recognize that there are quite a few persons who would like to make contributions on the Bill before us. In the circumstances, I move that the Senate do now adjourn until Tuesday, 07 March at 1.30 p.m. where we will continue the debate on this Bill. If time permits, we would move to do the Motion by Sen. Prof. Deosaran. We would be missing next Tuesday, which is Private Members' Day, so we could have some contributions on Sen. Prof. Deosaran's Motion.

Before I sit, may I wish all of those who are here this evening a very clean, safe and enjoyable carnival.

Madam President: I believe we have a matter. Did you reach an agreement on that?

Sen. The Hon. J. Yuille-Williams: Yes, I have spoken to the Senator and that has been arranged.

Sen. Mark: May I join my hon. colleague and also wish the population and all my colleagues who play "mas"—I know I always see my dear friend, Sen. Conrad Enill. He is always with a big band; I do not know if it is Poison and also Sen. Howard Chin Lee. I want to wish them both in particular. I know they enjoy carnival profusely. I want to extend to them, their families and by extension to the nation and your good self and all of us to have a very peaceful, safe and a very festive and joyous carnival. Thank you very much.

Sen. Prof. Ramchand: I want to wish all colleagues a joyful carnival and a reflective one.

Adjournment

Tuesday, February 21, 2006

Madam President: I would also like to join to wish each and every one of you a very enjoyable carnival but, please make sure that it is a safe one.

Question put and agreed to.

Senate adjourned accordingly.

Adjourned at 6 43 p.m.