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ಸುಸ್ಥ ಮಹಾಶಿಕ್ಷಣ ದಿನದ ಸಂದರ್ಭ

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13:40 : ಸುಸ್ಥ



really excited to be doing this research as well. So, the health sector corruption risk assessment we are working with an international consultant, to identify what the vulnerabilities within the system, and we commissioned Dr. Hady Fink and Dr. Sara who is, there is team of German consultants who are working with us. And we started work I believe three months ago, and it's been going quiet well and desk research has been done. So, while Dr. Hady is here, we would want to meet with the committee and also hear from you what your views on this, as well maybe we can even share some of the findings that we have made but I will let Dr. Hady decide how he would like to proceed with that so.

Consultant, Dr. Hady Fink speaking:

So, great pleasure and honor to be here. Just to add on what Rilulu was saying. We as a team of consultants we have been conducting a desk review. We try to review as many documents as were available on the health sector on risks in documents. There were not too many available. So, we started doing interviews from home using zoom, and now I am here in the Maldives for three weeks to conduct qualitative interviews with stakeholders, with experts in the field. So, I've spent one week talking to experts, and it would be great to also to get your input on corruption vulnerabilities in the health sector in general and especially on this committees' work. Your view, where you see the risks based in the system whether there are vulnerabilities in the system, and also, based on the cases that you are aware of were actually problems are happening. So, it is two sides to the problem, right, a systemic risks where there is vulnerability, because there is a lack of transparency, lack of oversight or something like that in the system. And then the second thing is when you look at the audit reports, you can see based on the cases this is where we see what problems actually are happening. So, that would be the lines of inquiry that I am interested in, and then I have a few more sort of specific questions. The way I usually start these conversations they are much less formal, but this is, may be also in this formal setting I present myself, I present the study and then I go to the topics that I would like to discuss. Is that Ok for you than I will just, so I don't need to say much more about the study that Rilulu was said, that we are trying to identify the vulnerabilities and we using data that is available and complimented by interviews. So, what we looking at is, to identify vulnerabilities, not point at problems, but we are trying to focus on recommendations. So, the idea is that at the end of this we are going to have a report with recommendations that help improve the situation, reduce vulnerabilities. That is the study. Myself, my name is Hady fink, you've already seen



that. I am a German national. I have been working in anti-corruption for the last fifteen years. I have experience in compliance in Germany and in corporate compliance issues. And then I have worked in the State of Qatar for seven years, and now I am an individual consultant. And I am married with two children. So that's me, I really, so far I find it very exciting here in the Maldives. But from what I see it is also a challenging situation. One thing because, everything is changing so fast. So, I am worried about, we need to publish this study fast, because otherwise I think some of it is already going to be outdated. Because to everybody I talked to, they tell me were revising this and this has just recently been changed. And we are changing our mandate. So, I find it very exciting, but also challenging. Now, If I, please if you interrupt me at anytime, I am happy. Otherwise I will just continue talking. For the, first question is that the regulatory and legal frame work from your perspective I would just like to be sure that I am understandings everything correctly. So, this committee, to start from the bottom my understanding is that, am I running out of time already? The, each accountable entity in the public sector, like we are talking about general public sector now is required to do, is audited once a year by the Auditor General. This audit will be received by this committee, and you are than sort of the review of the final, of the supreme oversight institution. So, basically your work is that's the, sort of the in a nut shell. And you are its based on the audit act right? And is there anything else when we look at the regulatory framework, any other documents, terms of reference for this committee. Is there any?

Chairman speaking:

Sir, we have our standing order of the parliament, where we have the duties of Public Accounts Committee and responsibilities and what sort of excess we have and what we are obliged to do. And what are the areas within our mandate. So, one of it is going through the public accounts and look for value for money and I mean basically oversight of all the public spending. Okay. So, that is there.

Consultant, Dr. Hady Fink speaking:

That's perfect. These documents are publicly available?

Chairman speaking:

Yeah, yeah. That is in our parliament website. We have the standing order of the parliament. So, I think.



Consultant, Dr. Hady Fink speaking:

So, that the standing order contains that? Yea, prefect. So, it's just one document. I think we just need to have translated. Unfortunately, Dhivehi is not in google translate. So, that has also been made our life a little bit more difficult. So, that's very good now. And it would be very helpful if you could just spend the few minutes explain to me this oversight function and your experience and maybe you can also help me with you know in theory what you are supposed to do. I think this I already put in a nutshell. But also, in practice. If there is anything that you find there you know challenging or worth mentioning about being a vulnerability.

Chairman speaking:

Okay. First of all, some of our members we have two committees parallely going. So, they have joined online, so I could have the quorum they are going for another meeting. Yeah. So, I think as a Public Accounts Committee of the parliament we also have a similar sort of responsibilities as invest minister system. And what we are supposed to do, mainly we are supposed to assess the taxpayer's money. How it is spent, and why it is spent. And whether the purpose the money was spent has been achieved or the efficiency defectiveness of those spending's. So, we have the whole responsibility on us. But so far as a parliamentarian from with my experience I could say that even during 17<sup>th</sup> parliament that is once the new constitution came out. The first parliament that was sworn in 17<sup>th</sup>, 18<sup>th</sup> and this is the 19<sup>th</sup> parliament. The practice is that we just review the audit reports and if there are any issues, we sometimes ask for special audits based on those opinions or qualifications audit reports. And then make our recommendations, which could include prosecution or further investigation or ACC to carry out further investigations, Corruption related investigations. So, basically that's how it's supposed to happen. But very rarely these has happened during 17<sup>th</sup> and 18<sup>th</sup> parliament. But in this parliament, we have tried, and we have so far gone, I think completed over 100 audit reports and we have made our recommendations which have been ratified by the floor as well. And these recommendations include going for further investigations, prosecution and administrative measures and things like this. But it is always, we are very far behind form what is currently happening. So, now we have actually decided to bring some changes to the way we work. So, we have asked Auditor General for next years audits to more or less to concentrate more on the value for money audits, special audits, compliance audits. So, we would know what is the current outcome of the



money that been spend by the current government. So rather than going after the history we are trying to go with what's happening currently. But still we have a backlog of a more than seven, eight hundred audit reports which we have not been able to review so far. So, it has been coming year by year and it's been a pile that we inherited from the previous parliament as well. So, that is a challenge. But I think, yeah, we do. So, when it compacts to our responsibilities and our oversight function, I think we have a lot of responsibilities on us in terms of taxpayer's money. The work that transparency Maldives is doing I think is an area that lot of public has interest in, I mean lot of complaints. Mostly, in terms of value for money and even within the covid experience I think we have; it has been put to our attention that a lot of the spending towards health sector was, may be not value for money. Equipment's were too expensive, supplies were too expensive. And I think it's fair to say that even during the past years when we look at the medical supplies, I think it's been way way, way above the market average when we talk about the prices of the general supplies that been procured but the health sector. And this has contributed I think one because of the public health scheme where, I mean Aasandha scheme. Because it is somehow ensures that whatever money I mean that is spend on your health will be covered by the State. So that's an issue because we can see a correlation during 2009, 2000. I think 2011, 2012 and then the later years thirteen, fourteen, fifteen. Because, if I remember correctly, I think then the amount that the government spend on medical supplies were around three hundred plus million rufiyaa per month. But this increased with Aasandha introduction to above 800 million in just five years. So, even now it could be even more, yeah, with in three, four years. So, I mean these are money that government is spending on medical supplies, include medicine and other tools and etc. So, it's an area of concern, we have not been yet able to dig into it deep enough. But that is a sector that we are also working on. And it will be very helpful if you could also share your experience and the informations that you gather during your study. I am sure it would be very very helpful for us to assess and see what is going on, as you said, I mean it's not about going after a person's about getting the system, I mean getting the things right and get the value for money for the taxpayer. So please carry on.

Consultant, Dr. Hady Fink speaking:

Thank you. That's extremely interesting. As you went the long I had a lot of questions. But now as you continued you've already answered quite a few of them. For me, so as I was thinking about this, doing more and more interviews, I think the value for money is



definitely one thing that stands are something that go after. Because, in an environment that is changing so quickly, if we go after the rules, or after what is happening individual cases, it will be difficult. But its value for money is something that I think it's what should be pursued. Could you, maybe also share based on what if seen that it is, what would be you know, the recommendations and also, I mean, I think I can speak on behalf of Transparency Maldives. But from my point of view, it is that we have been share the results and also hopefully include you and other stakeholders in jointly findings recommendations. Because the ideal of the report is not say this and this should be done, and you need to be this. But rather to we actually have a joint effort of different stakeholders joining forces to say this is what makes sense to do. And, I think this is also with you are in an ideal position, because you know all the cases. So, what's the recommendation from and overall perspectives, but also, I believe from view of Transparency Maldives where should something be done, or where should the, you know where should the thrust of recommendation of improvements go. Do you have any thought on this?

Member of Thimarafusi Constituency Abdhulla Riyaz speaking:

Thank you very much. My name is Riyaz, and I am the member for Thimarafushi Constituency. With regards to the corruption on health issues, first of all, you know I think when you're doing a study on that, probably you know, one of my recommendations would be that, we need to have an exact national health service. I don't see that we have any a real national health service that we see from other countries like, you know, the hospitals, different hospitals comes under different boards. You know the health ministry is there. IGMH is running by a board, and you know, and it doesn't see a real regulatory authority in terms of national health service. So, that's one recommendation I would suggest. We can, the other thing is with regarded the corruption if you looked into the scheme where we are going on procurement, procuring the health equipment and medicines etc. you know the role of STO one of the public company. That's another issue, and the issue of health professionals into the business of health-related services. You know, there are even the pandemic we can see that you know, even to formulate the regulations there were people who are doing business. So that has, I mean in ethically I see that that shouldn't be the case. You now that we can see that there are, this has been a big business for some of the health professional who are currently working and doing the business. So that's another issue and also, I think I am sure you will be looking at the schemes that, we have the



insurance schemes. Aasandha, Noosandha, NSPA you know there are so many varieties. For MPs there is a several scheme for police, for the military and you know, I mean I think if you look at there is a necessity, my recommendation would be that there is a necessity that we have to re-look in to the insurance scheme. With regard to the Aasandha and NSPA you know, for public to get these assistance facilities, I'm still experiencing you know the general public is constantly contacting us as MPs. Requesting for to speed up to expedite the approval or to get the assistance you know, or to get. It's not really a good system that we currently have, I must say that. So, I think that's another issue and the, with regard to our roles and responsibilities, I think we are the Public Accounts Committees is looking at the mostly on government institutions. But we have another committee Small, Medium and Enterprises Committee which actually looks at the government related companies. You know there was that like STO, Aasandha, NSPA. They will be, but this company will be done by SME. They are looking at governance. But I just wanted to let you know that, there is a part that is being played by SME committee here in the parliaments apart from you know, So and we don't see that you know, before the budget of every year we don't see that auditor general is capable enough to give us the total data of these companies even. So that's another issue. I mean maybe they don't have the capacity to do the auditing of all the necessary, companies or you know institutions. So that is there. So that's basically you I mean, I think, in short, I think we need a robust.

Consultant, Dr. Hady Fink speaking:

Asking the last point. Can you explain that again? So, that mean, you say that's another body like this, another committee like this was looking small medium enterprises and also Sate Own Enterprises I believe.

Chairman speaking:

There is one committee called State Owned Enterprises in the parliament which is responsible for the governance of all State Owned Enterprises. So still, where the public money is spend, still it comes to Public Accounts Committee.

Consultant, Dr. Hady Fink speaking:

Okay, Basically the issues like with STO and where the money from public procurement you are seen here. So, it's not like we need to talk them separately because there...



Chairman speaking:

Not on the value for money. That is...

Consultant, Dr. Hady Fink speaking:

Okay. So, that's...

Chairman speaking:

But if you have any issues within how they run their businesses and how they manage their day-to-day businesses, than yes you should consult with SOE.

Consultant, Dr. Hady Fink speaking:

Okay. I mean the governance, it would be of interest. I would't say, I have issues, I have questions. But that's also very helpful. Thank you. The second thing, apart from value of money, we need to talk global over all issues this we call conflict of interest between different people from different entities and I think that's also would be if people are calling you as MP's, I think, I see that, I heard that in interviews recovering scheme, the challenge for me as an outsider is, I know that it's part of the culture. So, again the question will be, what's the recommendation. So, one thing we observe this is, what can actually be done about this. My idea is, we will discussing before, my idea is, sometimes when you receive calls, it helps that you have code of conduct or conflict of interest which we can say is, look I am not allowed to take your call right? Sometimes some thing you can somebody who is in that kind of position can be hide behind the rule. But say, look there are rules. And for me, one thing that I see like civil servants appears there is no conflict of interest regime at all. They don't have declare. So, this will be for me, given the idea that appears to be at the core like value for money, the other thing is like conflict of interest, that there are people who are making the rules, regulations have share on companies, these kinds of things, so, whether this is something that you would also agree with this is something you know brought to for a recommendation and then of course how can that be done. Like what's, what you suggest recommend there? If any comments?

Chairman Speaking:

I think conflict of interest we have to address, if you have interest in certain issue that is been going to be regularize and you have to declare, and you have to make sure you



are not a part of this decision process. So, that is something that needs to be addressed. And as my colleague MP Abdula Riyaz mentioned, I think using the state owned enterprises like, the biggest one is State Trading Organization, as a party or a machine to procure all the medical equipment and medicines and etc is in one way contributing the problem. Because, when you get an SOE to do that. You are bypassing the public finance act. Because public finance act certainly clearly states that how a procurement process we taken place. I mean competitive bidding process, evaluation, and all these criteria's set very clearly in this. If it is a public procurement process, then of course we know that, everybody has a chance to be part of the bidding process. But when it goes through, most of the time when it goes through company problem is, there are so many ways they can do the procurement. Emergency procurement, it could be just getting quotations from, asking from few parties that they invite on the code rather than a competing bidding process. There are so many issues that comes with it. So, I think a good, I mean I don't know what should be their recommendation at the moment. But I think there are so many things that we could do to avoid these things. But I think one of, one very good question would be or area for you to research would be, just to compare some cost of the medical supplies and equipment that we use in Maldives. Even the medicines itself. Where it is coming? And what is the cost of it? And what we are paying is customer to get or Aasandha is paying on behalf of us for that medicine or that item. So, I think this comparison will at the end of the day shows you what kind of margins are we talking about. And that is, that could define the...

Consultant, Dr. Hady Fink speaking:

I agree, that's also I was thinking. At the end if Thailand all these three times expensive here as is in India than, there is somewhere there is a problem. So, I think something like that an observatory comparison of prices is definitely something that I think is where to look into out as a recommendation. I don't know if we have still...

Member of Hanimaadho Constituency Abdulghfoor Moosa speaking:

I was not fully aware of what is happening before, I just came. Anyway, the reason why I think at the moment they are doing with the government SOE's. Even the prices are high. End of the day it goes to the government. In the sense like, the profit margin 80% is owned by the STO and the balance 20% is owned by the public sector. So, if even the prices are high, in return you know, even the government is benefiting on in other hand. So, that maybe the reason that at the moment also government has intension to use the



government enterprises like if it is in medical regarding STO. If it is other contracts like MTCC and all. Because this carries both value for the government. But sometimes you know when they award the contract to STO, and they directly goes to the private party. And they do through them, you know so, there is a chances of doing the same thing in other way. So, I think most of the medicine and equipment supply through STO. And compare to the private parties the prices are also very high.

Member of Dhaandhoo Constituency Yaugoob Abdhulla speaking:

Thank you. For me you know, there the most of these corruption issues I have seen in health sector is through procurement. So, basically there are two ways that they do in the Maldives. That is one thing is mostly you know the, we want to buys medical equipment's or some medicines anything's, it will be normally directly awarded to STO, that is the State Owned Enterprise as our chair highlighted. And when it is awarded to directly to STO, we are bypassing the public finance act. So, that means you don't have to go for the open tender, there is no one to compete with you for this bid. So, directly you are going to STO, and from STO what they do is, they can source it from different suppliers without any quotation or any, though they have so many flexibilities on their procurement policy. So, they have ways means and ways that they can source their suppliers. And when they source through supplier, there is a chance, there is a room for them to add third party profit for that. And it will be distributed under the table. So, that's how they do in Maldives. That is what the practice so far. So, I think one of a very strong recommendation to minimize the corruption in the Maldives would be, especially if it is in these health sector issue, it will be, I think we will have to stop or do something of this directly awarding everything to or most of the health sector procurements to STO. I think we will have to think about it at least. Because, through STO, then they are having their having close suppliers, close, even the some of the suppliers where they have conflict of interests or all these things, but they are doing this same thing for the past 20, 30, 40 years. So, I think that is one thing which is very important that we will have to think about it. And during 2009 you know, by that time when I was, I experienced this incidence by myself. When I was having an audit work of one of the private company, and they are company who's supplying medical equipment's to government, mostly to the government. so, I saw one, some of the, during when we audit the payroll, I saw some of the payments which they have made, on regular basis made to some of the doctors. You know by then that is, \$3200 dollar per month in 2009. If we convert, if we include the inflation all those adjustments, by



now it should be equal to \$6000. Per month they are paying for IGMH senior doctors, and they are actually the one who request for this specific medical equipment's and some of the medicines also. so, these private suppliers they are paying these IGMH officials, something like salary. But the arrangement is, when there pay this, their task is to request for the specific brands. Because there are some exclusive brands for some of the suppliers. So, what they have to do is, they have to request for these their brand of equipment's. So, through this their business deal is done. So, that is what, I have seen by myself in 2009. So, I believe it should be much more frequent, their practice would be more, not only in one company, within their, most of the private suppliers it there this practice would be done, I think. That's what I believe. And then the other thing is you know, so there should be some kind of recommendation to stop these kind of issues. And then the other thing is, Health Ministry is one of the main area, that we have to look in to. Because health ministry there is a procurement department. And the people, I think it's very good for your study if you go and meet them. If you check their procurement department and the period of the staffs who are working in the department. I think you will be surprised to. Because you know, there are some of the staffs who are working in the same department for more than ten, fifteen, twenty years. So, these are the people who are having the very close network with the private suppliers. So, they have very strong relationship with them. And some of the you know, I am sure the same with that there is private suppliers they did with the doctors, it would have been done with this procurement department of Ministry. So, I think you better investigate or study at least their period how long they are working in the same department. So, something like job rotation or anything, something like that should have been done for this areas. So, I think these are the main three areas that we are, there is highly corruption, high corruption in this health sector. Mainly, the main tool, main engine is through STO. Thank you.

Member of Hanimaadhoo Constituency Abdulgafoor Moosa speaking:

Even not only the medical sector. The throughout you know, A to Z the health sector is corrupt, from A to Z. From the doctors up, you know it is so corrupt and people are not much care about it. And the government heavy spending goes to the medical sector. And you know even doctors they have a networks. You know it works up to the dispensary, they pay the money and they even write the prescription according to them, and you know lot of things are happening. I think the biggest problem which we are facing is, we don't have enough management people to run hospitals here. Doctors are



the people who make the decisions. So, it goes on their favor. They are working like there are tycoons like. You know, this has to be you know changed. And even the brands will be also on their will, and on their availability on what they want they want to bring it here. You know, after sometimes those machineries are just ideal in their godowns. No one use those machineries. So, so much of corruption, so much of you know mismanagement is happening in health sector.

Consultant, Dr. Hady Fink speaking:

Thank you. I think you both mentioned two things that I also have experienced in the interviews. One that this feeling that there is so much corruption, and I think one particular problem; I mean it's a problem itself. But one particular problem is also that, it leads to situation where people sort of resignate, because once you have like you say it's everywhere and it's being there for twenty, thirty years. Then people can also see it's just the way it is. So, I think for us Transparency Maldives, and yes everyone general license coming up something that people can actually be staying behind. So, I have been lobbying with Transparency Maldives to join up with the other stakeholders to sort of you know make a statement that this is not acceptable and kind of put this out there. And I think your committee definitely is very a strong airline in this thing or in this fight. For me one question that is also recurring thing is, you are both mentioning things that are publicly knowledge. People know all that, like even the ones who are not sitting on the Public Accounts Committee. Why isn't the changing? Like, the question to me is if everybody knows it why are things not changing, why is there like no enforcement? There is ACC comes out, everybody comes out with recommendations. Nothing changes. Is there any idea of how like could be, I don't know by the way, if I am running out of time then; I mean but that would be one also, like a general question. And maybe you can help shine light on what could be done about that. It seems that the problem is not only the rules or not really all the rules. It's the practice, the things that are being done and even though everybody knows it's a problem, nothing happens. No, nothing changes. So, what's the?

Member of Dhaandhoo Constituency Yaugoob Abdhulla speaking:

Yes, that's a good question. We everyone knows everything. But there is no any action to minimize or to stop these things. So, it's a very good question. I think we will have to think about it. But so far, as far as I know, very recently you know, there was a one staff who is hired for the procurement department; he is actually the finance executive. And



he should take all the responsibility of procurement and accounts, all these transactions. So, he is a new staff, not from the Ministry itself and he has to accountable to the Finance Minister, I think. It's been very very; I think it's less than a month now. So, we are hoping the practice would be changed. But still that is a good question because it's been; yeah I am talking about the Health Ministry. Yeah, okay.

Chairman Speaking:

I think we are actually doing a similar work as what you are doing. But we are not at the moment on public about these work that we are doing. We are doing some analysis on what's the prices and how it has been manipulated through the system. So, it's a study that we are doing. So, once it is done we will be having our recommendations as well. And that's why we don't want to talk, I mean about the findings that we have. But I think, more or less we are also at a stage where it's not very; it's not yet conclusive. But we have gathered information and we are also doing a similar work at the moment. So, it's a bit early. We actually had the issue on; started on the issue on 2019. One of our members present that the issue to the committee. And then we had pandemic, and then I was delayed our response to what we have to do. So, it would still take some time, because huge work, and we have to go through a lot and, but we are finding very very interesting information based on the materials that we have. So back to you.

Consultant, Dr. Hady Fink speaking:

I think that is encouraging. It seems many people that I have talked, they are looking at this issue and it is of interest. And they are coming out with recommendations. I think that the big challenge for me and anyone else who comes up with recommendations is making recommendations that actually have a chance of making any kind of difference. So, well I don't have a solution for me yet, how would I am going to write in my report. But, the hope is to make Maldives for this really to bring different stakeholders to get together and say, look this a problem to bring them, to carry the message out there. So, we will see if it's something there can be managed. If I, do I have time for another question? its time...

Member of Dhaandhoo Constituency Yaugoob Abdhulla speaking:

You know to add his comment, Chair's comment. Very recently the government change the policy of maximum price, maximum retails price for the medicines, you know previously it was 600% 700% profit. So, government is changing the policies and



taking some action and as our chair mentioned it is very recently these changes are taking place. So, we are hoping for the good.

Consultant, Dr. Hady Fink speaking:

I have seen that, and I think in addition to study there, I heard a lot of things people where people are telling me that things would be done. I think that's why it's good looking at value for money. Because that's in the end where it's gonna show. Because, usually you know it's, I don't know it's like, they came where try to hit potato head, like to get rid of one, but than another problem pops up. So, there are, but I think looking at value for money is really good. Because that's very in the end going to be seen.

Member of Hanimaadhoo Constituency Abdulgafoor Moosa speaking:

Yeah, I think government is taking few steps at the moment. Because even the north and the south, they have already given the hospital with a board, and you know separated from the Health Ministry. But other things is, there is no proper people to operated hospitals. That's the main thing. So, you know, we need a trained people to operate these places. And Health Ministry should not be you know, should not be a implementing agency. There should be a regulatory body. And there should be a financially independent to all the island where the health centers or whatever the thing, you know then we can minimize this you know, then we can give them financial independents. And then I think this can be going the same way like you know. The IGMH is operating separately and Hulhumale hospital also operating separately. But still, you know they have big hand on the health sector. They; you know, the authorities are given part by. Not all. So, this has to be change in all.

Consultant, Dr. Hady Fink speaking:

I thank you very much really. It's been very helpful.

Chairman speaking:

Yeah, we really appreciate what Transparency Maldives is doing. And I think this is very very crucial area that needs to be addressed. Everybody knows that the elephant is in the room. But it is still a bit premature for us to talk about it. But yes, this is the right place. This is the place where we should start doing something about it. So, it would be very very helpful for us. That whatever that your finding that you have, we would be





Chairman speaking:

Thank you very much. And we will see the possibility whether we could have a meeting next week. Because I think on 30th we will go for recess. So, if it is before that, yes, we will accommodate. Or else we can have it after we come back from recess.

Consultant, Dr. Hady Fink speaking:

Plan is to have a second mission in, to come here for second time in January where we trying to do the stakeholder. But then it would also be fine, because then the findings will be sort of consolidated. So, anytime you have time for us, I will be happy to provide it.

Chairman speaking:

Yes. Ok thank you. The meeting is adjourned. Thank You.

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