### DECREE-LAW NO. 1/2008 OF 16 JANUARY

#### ORGANIC STATUTE OF THE MINISTRY OF HEALTH

Decree Law No. 7/2007 of 5 September relating to the Organic Structure of the IV Constitutional Government of the Democratic Republic of Timor-Leste determines the establishment of the services and bodies composing the different Ministries, namely the Ministry of Health, in order to ensure its capacity to design, execute, coordinate and evaluate the policies as defined and approved by the Council of Ministers for the areas of health and pharmaceutical activities.

The organic structure of the Ministry of Health became effective following the approval of Government Decree No. 5/2003 of 31 December, which establishes the structures and competencies of the respective services composing it.

Pursuant thereto, and in order to improve the access to, and quality of, the provision of health services through the decentralization of the operational interventions by services and institutions providing health care, it is essential to reformulate the organizational structure of the Ministry of Health while at the same time defining its respective competencies in an integrated, progressive, and functional manner.

Thus, pursuant to article 115.3 of the Constitution of the Republic and article 37 of the Decree-Law No. 7/2007 of 5 September, the Government enacts the following to have the force of law:

## CHAPTER I NATURE AND COMPETENCIES

### Article 1 Nature

The Ministry of Health is the Government's main body responsible for the design, regulation, execution, coordination, and evaluation of the policy as defined and approved by the Council of Ministers for the areas of health and pharmaceutical activities.

# Article 2 Competencies

- 1. It is incumbent upon the Ministry of Health to ensure the access of the population to health care through the establishment, regulation, and development of a health system that is based on the real needs and is compatible with the available resources, while granting special relevance to the equity of the system, giving priority to the most vulnerable groups and, whenever possible, promoting the active participation of civil society.
- 2. It is incumbent upon the Ministry of Health, namely:

- a) To propose the policy and prepare the draft regulations deemed necessary for the areas under its responsibility;
- b) To ensure access to health care for all citizens;
- c) To coordinate activities relating to epidemiological surveillance;
- d) To undertake health inspections of products which have a bearing on human health;
- e) To promote the training of health care staff;
- f) To contribute towards the success of humanitarian assistance, peace promotion, as well as security and social and economic development through coordination and collaboration mechanisms with other Government bodies responsible for related areas.

### CHAPTER II TUTELAGE AND SUPERINTENDENCE

# Article 3 Tutelage and Superintendence

The Ministry of Health is under the tutelage of the Minister of Health, who supervises it and is accountable for it before the Prime Minister.

### CHAPTER III ORGANIC STRUCTURE

## Article 4 Bodies and Services

The Ministry of Health exercises its competencies through services that come under direct State administration, through bodies that are integrated in the indirect administration of the State, and through consultative bodies and territorial delegations.

## Article 5 Services under direct State administration

The following central services are part of the State administration in the framework of the Ministry of Health, and come under the direct administration of the State:

- 1. The General Director;
- 2. The National Directorate of Hospital and Referral Services;

- 3. The National Directorate of Community Health;
- 4. The National Directorate of Human Resources;
- 5. The National Directorate of Planning and Finance;
- 6. The National Directorate of Administration, Logistics, and Supply;
- 7. The Inspection, Monitoring, and Audit Office;
- 8. The District Health Services.

## Article 6 Services under indirect State administration

The following are services under indirect State administration in the framework of the Ministry of Health:

- a) The Health Sciences Institute;
- b) The National Laboratory;
- c) The Guido Valadares National Hospital;
- d) The Secondary Care Referral Hospitals of Baucau, Maubisse, Suai, Maliana, and Oecusse:
- e) Medicine and Medical Equipment Autonomous Service (SAMES)

## Article 7 Consultative bodies

The following are consultative bodies in the framework of the Ministry of Health:

- a) The Board of Directors;
- b) The Consultative Council;
- c) The District Health Councils.

### CHAPTER IV SERVICES, ORGANISMS, CONSULTATIVE BODIES, AND TERRITORIAL DELEGATIONS

# PART I SERVICES UNDER DIRECT STATE ADMINISTRAITON

## Article 8 General Director

1. The General Director is the body in the Ministry of Health who supervises technically the central and district services, ensuring within these services the technical strictness of the execution of the policies approved for the health area.

- 2. It is incumbent upon the General Director to, namely:
  - a) Supervise the central and district services and coordinate and guide their activity in accordance with the directives of the Minister of Health;
  - b) Ensure the monitoring and evaluation of the technical programmes through the information and epidemiological surveillance system;
  - c) Approve the instructions deemed necessary for the functioning of the central and district services;
  - d) Provide guidance on the administrative and financial issues relating to all central and district services;
  - e) Exercise administrative and disciplinary authority over all the personnel of the central services;
  - f) Exercise any other functions conferred to him or her by law or delegated by the Minister of Health.

# Article 9 National Directorate of Hospital and Referral Services

- 1. The National Directorate of Hospital and Referral Services is the service responsible for studying, designing, coordinating the technical support, and supervising the activities relating to the delivery of hospital and referral services.
- 2. It is incumbent upon the National Directorate of Hospital and Referral Services to, namely:
  - a) Prepare technical norms for delivering hospital and referral services;
  - b) Provide technical support to hospitals pertaining to the national health service and supervise them;
  - c) Ensure the functioning of the referral services network between primary health care and hospital health care;
  - d) Supervise the functioning of the national network of ambulances.

# Article 10 National Directorate of Community Health

- 1. The National Directorate of Community Health is the service responsible for studying, designing, coordinating the technical support, and supervising the activities on health promotion and education, disease prevention, delivery of primary health care, and pharmaceutical activities.
- 2. It is incumbent upon the National Directorate of Community Health to, namely:
  - a) Define national programmes and prepare technical norms for health promotion and education, disease prevention, delivery of primary health care, and pharmaceutical activities;
  - b) Provide technical support to institutions providing primary health care within the national health service;
  - c) Monitor and evaluate the implementation of national programmes;

d) Coordinate national initiatives in matters under its responsibility.

### Article 11 National Directorate of Human Resources

- 1. The National Directorate of Human Resources is the service responsible for studying, designing, coordinating the technical support, and supervising the activities of human resources development for the health sector, registering health professionals, and managing the staff assigned to the Ministry of Health.
- 2. It is incumbent upon the National Directorate of Human Resources to, namely:
  - a) Prepare the health sector human resources development plan and guide its effective implementation;
  - b) Prepare technical norms and coordinate, monitor, as well as evaluate the training programmes for the health sector human resources;
  - c) Ensure the management of the staff of the central services and coordinate the technical support to the services of the Ministry of Health;
  - d) Manage the registration of health professionals at the service of the national health system.

### Article 12 National Directorate of Planning and Finance

- 1. The National Directorate of Planning and Finance is the service responsible for supporting the planning as well as the budgetary and financial management of the services of the Ministry of Health, including the management of the partnerships.
- 2. It is incumbent upon the National Directorate of Planning and Finance to, namely:
  - a) Coordinate the strategic planning and the plans of action of the different services of the Ministry of Health;
  - b) Prepare the technical norms on planning, budgeting, and financial management, and guide their effective implementation;
  - c) Provide technical support to the services of the Ministry of Health;
  - d) Coordinate the management of the bilateral and multilateral partnerships established with the Ministry of Health;
  - e) Manage the implementation of projects resulting from the partnerships.
  - e) Supervise the financial management within the services of the Ministry of Health.

# Article 13 National Directorate of Administration, Logistics and Supply

1. The National Directorate of Administration, Logistics and Supply is the service responsible for supporting the administrative, logistical, and supply management of the services of the Ministry of Health.

- 2. It is incumbent upon the National Directorate of Administration, Logistics and Supply to, namely:
  - a) Prepare the technical norms on administrative, logistic, and supply management, and guide their effective implementation;
  - b) Provide technical support on administrative, logistic, and supply management to the services of the Ministry of Health;
  - c) Manage the movable and immovable property of the central services and supervise the management of such property in the other services of the Ministry.

# Article 14 Inspection, Monitoring and Audit Office

- 1. The Inspection, Monitoring and Audit Office is the central service that undertakes disciplinary action and auditing insofar as the institutions and services integrated in the national health service are concerned, and monitors their compliance with the laws and administrative regulations applicable to the national health system.
- 2. It is incumbent upon the Office of Inspection, Monitoring and Auditing to, namely:
  - a) Monitor the essential aspects relating to legality, normalcy, and quality of the functioning of the services;
  - b) Undertake management auditing;
  - c) Collect information on the functioning of the services and propose the advisable corrective measures;
  - d) Establish investigation proceedings, inquiries, and disciplinary investigation whenever so determined by the competent authorities;
  - e) Establish inquiry proceedings as determined by the Minister of Health;
  - f) Provide support to the services of the Ministry of Health and collaborate with the respective managers in the exercise of disciplinary power;
  - g) Monitor the observance of the laws and regulations applicable to the national health system.
- 3. For all legal purposes, the highest official of the Inspection, Monitoring and Audit Office shall be comparable to a General Director.

## Article 15 District Health Services

- 1. The District Health Services are the health services in the territorial delegations of the Ministry of Health responsible for the health of the populations in their respective geographical areas and shall coordinate the implementation of all health programmes and the provision of primary health care at the health centres, health posts and mobile clinics, including the health activities implemented at the community level.
- 2. It is incumbent upon the District Health Services to, namely:

- a) Ensure the access of the populations in the respective geographical areas to primary health care and to programmes aimed at promoting health education and disease prevention;
- b) Ensure the effective implementation of policies and programmes defined for the health sector in the respective geographical areas;
- c) Manage the material, human and financial resources necessary to the exercise of its competencies;
- d) Promote the participation of the community in the implementation of the health policies and programmes.

### PART II SERVICES UNDER INDIRECT STATE ADMINISTRAITON

### Article 16 Health Sciences Institute

- 1. The Health Sciences Institute is responsible for the training and refresher training of health professionals on the areas and at the levels required by the health system.
- 2. It is incumbent upon the Health Sciences Institute to, namely:
  - a) Support the Ministry of Health in the formulation of the education and training policy for the health area;
  - b) Coordinate and execute the non-university education policy as well as the professional training policy for the health area;
  - c) Organize and impart courses in the health area, both at (non-university) higher level and at the professional level, inserted into the national health system;
  - d) Organize and impart professional training courses in the health area, as well as specialization courses, extension courses, and upgrading courses;
  - e) Award credit to courses in the health area imparted by foreign entities that are equivalent to its own levels of competency;
  - f) Opine, whenever so requested, on the processes of registration of health professionals;
  - g) Grant scholarships to its students as well as grant exemption of tuition.
- 3. The Health Sciences Institute is a corporate body under public law with juridical personality as well as administrative, financial and property autonomy, pursuant to the respective organic statute approved by Decree-Law No. 2/2005 of 31 May.

### Article 17 National Laboratory

1. The National Laboratory is responsible for guaranteeing the provision at the national level of quality laboratory services to the population and for ensuring technical supervision of the works undertaken by the laboratories integrated in the national health system and it shall operate as a centre of reference for laboratory exams.

- 2. It is incumbent upon the National Laboratory to, namely:
  - a) Define the technical norms for the provision of laboratory services and guide their implementation;
  - b) Supervise the provision of laboratory services within the national health service;
  - c) Ensure mechanisms of quality control for the laboratories of the national health system;
  - d) Ensure its functioning as a centre of reference for the national health system.
- 3. The National Laboratory is a corporate body under public law with juridical personality and administrative, financial and patrimonial autonomy pursuant to the statutes to be approved by Decree-Law of the Government.

### Article 18 Guido Valadares National Hospital

- 1. The Guido Valadares National Hospital is the hospital of reference for the entire national territory and is responsible for the provision of health care as well as specialized or technical medical assistance at the national level.
- 2. It is incumbent upon the Guido Valadares National Hospital to, namely:
  - a) Ensure the provision of quality, specialized health care, accessible at all times;
  - b) Ensure its efficient and effective functioning in a balanced and sustainable economic and financial framework;
  - c) Promote the continuous improvement of the quality of services.
- 3. The Guido Valadares National Hospital is a corporate body under public law with juridical personality and administrative, financial and patrimonial autonomy, pursuant to the organic statute approved by Decree-Law No. 1/2005 of 31 May.

### Article 19 Secondary Health Care Referral Hospitals

- 1. Referral hospitals are hospitals responsible for providing secondary and surgical health care to the population residing in the respective geographical areas.
- 2. It is incumbent upon referral hospitals to, namely:
  - a) Ensure the provision of quality health care, accessible in due time;
  - b) Ensure efficiency and effectiveness in a balanced and sustainable economic and financial framework;
  - c) Develop areas of differentiation and reference in the provision of health services:
  - d) Implement projects for providing ambulatory as well as domiciled health care in order to minimize the impact resulting from hospitalization;
  - e) Promote the continued improvement of the quality of services.

- 3. Secondary health care referral hospitals are corporate bodies under public law with legal personality and administrative, financial, and patrimonial autonomy, pursuant to the organic statute approved by Decree-Law No. 1/2005 of 31 May.
- 4. In addition to those provided for in the present decree-law, other secondary health care referral hospitals may be established by instruction of the Minister of Health.

# Article 20 Medicine and Medical Equipment Autonomous Service (SAMES)

- 1. The Medicine and Medical Equipment Autonomous Service has the responsibility to ensure the supply of medicines, medical consumables and medical equipment to the health system and, particularly, to the national health service.
- 2. It is incumbent upon the SAMES to, namely:
  - a) Purchase, namely by import, the medicines, medical consumables, and medical equipment necessary to the functioning of the health system;
  - b) Store the above-mentioned goods and manage the respective stocks;
  - c) Distribute them to institutions of the national health service requisitioning them as well as to other public institutions against the respective payment;
  - d) Sell the goods to profit and non-profit private institutions integrated in the health system that are interested in purchasing such goods against advance payment.
- 3. SAMES is a an autonomous public company with juridical personality and administrative, financial, and patrimonial autonomy, pursuant to the organic statute approved by Government Decree No. 2/2004 of 21 April.

#### PART III CONSULTATIVE BODIES

### Article 21 Board of Directors

- 1. The Board of Directors is a collective body that provides support and technical consultation to the Minister of Health and coordinates the implementation of policies defined for the Ministry of Health. It is incumbent upon it, among others, to:
  - a) Promote the search for quality and gains in terms of health, thereby ensuring the best articulation and collaboration among the diverse services of the Ministry of Health;
  - b) Advise on the plans of activity and budgets of the Ministry of Health;
  - c) Propose and develop intersectoral strategic health programmes and coordinate their implementation; and
  - d) Provide technical advice on all the processes of accreditation and licensing of institutions pertaining to the health system and pharmaceutical activities as

well as on all restrictive or corrective measures taken for protecting public health.

- 2. The Board of Directors shall comprise the following:
  - a) The Minister of Health, who presides it over;
  - b) The Vice-Minister of Health;
  - c) The Inspector;
  - d) The General Director;
  - e) The National Directors;
  - f) Any other people or entity that the Minister decides to invite depending on the working agenda.
- 3. The Board of Directors shall meet ordinarily once per week and extraordinarily whenever the Minister of Health so determines.

### Article 22 Consultative Council

- 1. The Consultative Council is the collective body that takes stock of the activities of the Ministry of Health, and it is incumbent upon it to, particularly:
  - a) Take a final stock of the activities carried out by the Ministry of Health and monitor the execution of the plan of activities;
  - b) Undertake a preliminary study of the plan of activities and the budget for the ensuing year and recommend their approval;
- 2. The Consultative Council is composed of the Minister and the Vice-Minister of Health and the managers of the services coming under the direct and indirect State administration within the Ministry of Health.
- 3. The Consultative Council shall meet ordinarily twice per year and extraordinarily whenever the Minister of Health so determines.

# Article 23 District Health Councils

- 1. The district health councils are bodies that provide support and consultation to the District Health Directors and have the responsibility to coordinate the provision of primary health care and to exercise their functions as provided for in article 21.1 of the present decree-law in their respective geographical areas.
- 2. The District Health Councils shall comprise the following:
  - a) The District Health Director, who presides it over;

- b) The District Deputy Health Director, the health technicians, and other assistants;
- c) The heads of the health centres located in the respective geographical area.
- 3. For the purpose of discussing matters relating to provision of primary health care in the respective referral hospital, or matters relating to coordination among the hospital services and the entities providing primary health care, District Health Councils located in the respective geographical area shall also include, with a right to vote, the chairmen of the boards of administration of the referral hospitals.
- 4. The district health councils shall meet ordinarily once per month and extraordinarily whenever they are convened by the district health directors.

### CHAPTER VI FINAL AND TRANSITIONAL PROVISIONS

### Article 24 Complementary legislation

- 1. Without prejudice to the contents of the present statute, it shall be incumbent upon the Minister of Health to approve, through a respective ministerial statute, the regulation of the organic and functional structure of the national directorates and the district services.
- 2. The staffing table and the specific careers, as well as the existence and number of senior and middle-level staff, shall be approved by ministerial statute of the Minister of Health and the Ministers responsible for the areas of Finance and State Administration.
- 3. The ministerial statute referred to in item 2 above shall be approved within ninety days from the date of entry into force of the present statute.

## Article 25 Revocatory norm

Decree-Law No. 5/2003 of 31 December is hereby revoked.

### Article 26 Entry into force

The present Organic Statute shall enter into force on the day immediately after its publication.

Approved by the Council of Ministers on 14 November 2007.
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The Prime Minister.	

Kay Rala Xanana Gusmao
The Minister of Health
Nelson Santos
Enacted on 9 January 2008
For publication.
The President of the Republic,
José Ramos-Horta