

## CASE STUDY

### Case Series on Providing a Legal Framework for a National Public Health Institute: The Mozambique Experience

#### Mozambique National Institute of Health (INS)

The National Institute of Health of Mozambique (INS) was established in 1976 as a division within the Preventive Medicine Directorate of the Ministry of Health (MoH). In 1983, the INS became a distinct institution within the MoH, with limited autonomy. This changed in 2017, with the passage of Decree 57/2017.

#### Critical Aspects of the new INS Legal Framework

The 2017 Decree provides the INS with autonomy and assigns it additional public health responsibilities, while also increasing its operational efficiency. For example, the INS budget is now negotiated directly with the Ministry of Finance. In addition, the INS is now authorized to establish sub-national divisions. With more operational autonomy, INS will be better able to rapidly respond to outbreaks, have improved efficiency in conducting nation-wide surveys, and have increased capacity for grant management and oversight.

Under the Decree, the Director-General and Deputy Director-General are appointed by the Prime Minister for renewable terms of five years, which helps ensure institutional stability. The INS must establish strong collaboration and coordination with the MoH, as the INS is technically supervised by the Minister of Health.

INS funding derives from a number of sources, but still depends heavily on external funding through bilateral or multilateral funding mechanisms, as well as through competitive grants.

#### Legal Mechanism Used

The legal framework for the INS is the Decree passed by the Council of Ministers and signed by the Prime Minister, which is the approach used to establish public institutes in

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Mozambique. The Decree includes high-level parameters, such as the INS mission, INS functions, and qualifications and terms for leaders of the INS. Statutes passed by an Inter-Ministerial Commission, chaired by the Prime Minister, provide more detail, for example, about the functions of the directorates.

### Lessons Learned in Creating the Decree

- INS' reputation and visibility were critical for garnering support. The INS already had a solid national and international reputation, due to its achievements in fields such as research, surveillance, outbreak investigations, reference laboratory services, and education.
- The support of the Minister of Health was essential for the passage of the Decree.
- The INS had developed a strategic vision and was working to achieve it before the Decree was passed. (Fiocruz provided critical assistance in developing INS' vision and plans.) INS leadership recognized that more autonomy would help the INS to be a more nimble, efficient organization. When the political situation was favorable, the INS was poised to take advantage of the opportunity to redefine itself; it had clearly articulated plans and clear messages about how changing its status would be good for public health.
- In developing its framework, the INS consulted with NPHIs from around the world, Directorates within the MoH, and other Ministries in Mozambique to ensure a solid and robust organizational and functional structure, as well as alignment with national legislations. For example, consultation with the Ministry of Finance was essential for budgetary issues, with the Ministry of State Administration to ensure consistency of the organizational structure with national legislation, and with the Ministry of Science and Technology to ensure alignment with national policies and strategies on Science and Technology.

We thank Dr. Eduardo Samo Gudo Jr., Deputy Director-General at INS, for his assistance in developing this case study.

## Summary

Council of Ministers:

**Decree No. 57/2017:**

Redefines the nature, attribution, and competencies of the National Institute of Health in order to intensify the coordination, management, and realization of health research.

**Resolution No. 46/2017:**

Approves the Social Action Policy and Implementation Strategy and revokes Resolution No. 12/98 of April 9.

## COUNCIL OF MINISTERS

### Decree No. 57/2017

of November 2<sup>nd</sup>

There being the need to redefine the nature, attribution, and competencies of the National Institute of Health to intensify the coordination, management, and realization of health research, under provision 1 of article 82 of Law No. 7/2012, of February 8, the Council of Ministers decrees:

#### Article 1 (Nature)

The National Institute of Health, abbreviated as (INS) is the entity for the management, regulation, and oversight of activities related to the generation of scientific evidence in health to guarantee better health and well-being, endowed with legal personality, with administrative and technical-scientific autonomy.

#### Article 2 (Scope and Headquarters)

1. The INS has its headquarters in the Province of Maputo, in the District of Marracuene, and carries out its activities throughout the national territory.
2. With the authorization of the Minister who oversees the health area, after hearing the Minister who oversees the area of finance and the Provincial Government, the INS may create and extinguish delegations or other forms of representation in any part of the national territory.

#### Article 3 (Guiding Principles)

Within the scope of its activities, INS is guided by the following specific principles:

- a) Excellence and continuous self-evaluation;
- b) Respect for human rights;
- c) Respect for codes of ethics and professional deontology;
- d) Transparency and accountability;
- e) Promotion of participatory management and innovation capacity;
- f) Universality and equity;
- g) Collective solidarity;

- h) Promotion of multi-sectoral and transdisciplinary exchange;
- i) Appreciation of national professionals, as well as national biological and cultural heritage.

#### Article 4 (Attributions)

The powers of the INS are:

- a) Preparation of policy and strategy proposals in the area of health research, ensuring their correct implementation, monitoring and periodic evaluation.
- b) Promotion of the development of health research at different levels of care to ensure a better definition of Health Policy and program management in order to provide a timely and effective response to health problems.
- c) Conducting clinical, biomedical, pharmacological, epidemiological, socio-anthropological and health-related research, based on national priorities.
- d) Contribution to the development, evaluation, and promotion of the use of appropriate health technologies.
- e) Contribution to the prevention and control of endemic and epidemic diseases, and to the management of special Public Health events.
- f) Contribution to the development of human resources, in particular in the technical-professional and scientific areas specific to Health.
- g) Carrying out the quality control of laboratory analyses through a laboratory reference system.
- h) Dissemination of information of a technical-scientific nature, for the scientific community, health workers, and the public in general.
- i) Implementation of Health Observations to document the Health Status of the Population and its Determinants.
- j) Formation of partnerships with other national and international institutions for the execution of research, training, and public health activities.

#### Article 5 (Competencies)

In order to fulfill its attributions, it is incumbent upon the INS to:

- a) Coordinate and oversee the definition of the national health research agenda and the application of it throughout the national territory;
- b) Promote and coordinate national health research development activities, in particular through institutional strengthening, the scientific training of national technicians and the monitoring of the research environment in the Health System;
- c) Develop clinical, biomedical, pharmacological, epidemiological, and socio-anthropological research, based on national priorities.
- d) Develop and conduct research in Health Systems as an instrument for the definition of health policies;
- e) Develop and guarantee multi-sectoral and transdisciplinary research, through related research institutions and other bodies of recognized competence.
- f) Promote funding for scientific research activities;
- g) Assess the health situation and its determinants;
- h) Develop and evaluate technologies applied to disease prevention and control;

- i) Contribute to laboratory diagnosis in the face of epidemic outbreaks;
- j) Carry out quality control of laboratory analyses through a laboratory reference system;
- k) Ensure biosafety aspects related to the operation of reference laboratories;
- l) Conduct postgraduate and continuing education courses for health personnel in coordination with the Ministries that oversee the areas of Education and Higher Education;
- m) Collaborate with teaching institutions in the training of health care personnel at medium and higher levels in coordination with the Ministry that supervises the area of Education.
- n) Cooperate with national and foreign scientific institutions and international development support agencies to promote technology transfer for the formation and training of national researchers and technicians;
- o) Promote actions of technical-scientific dissemination inherent in public health.

#### Article 6 (Tutelage)

1. The INS is supervised by the Minister who oversees the area of Health.
2. The guardianship includes, in particular, the power to authorize and approve the following acts:
  - a) Approval of INS Internal Rules;
  - b) Homologation of programs, activity plans, and annual reports;
  - c) Creation of forms of local representation;
  - d) Inspection of INS bodies, services, and documents;
  - e) Others resulting from the Law.

#### Article 7 (Directorate General)

1. The INS is headed by a Director General, assisted by a Deputy Director General, both appointed by the Prime Minister, on the proposal of the Minister overseeing the area of Health.
2. The Director-General and the Deputy Director-General shall serve for a renewable term of five (5) years.

#### Article 8 (Competencies of the Director General)

It is incumbent upon the Director General of INS to:

- a) Define the general direction of management and direct the activities of the INS, with the vision of realizing its attributions, reporting to the Minister of guardianship.
- b) Direct the activity of the external relations of the INS;
- c) Represent the INS in and out of court;
- d) Submit to the Minister of guardianship the plan and annual report of activities;
- e) Superintend the management of the human and financial resources of the INS;
- f) Appoint, dismiss, and discharge the heads of the central body, regional delegations, and other forms of local representation;
- g) Carry out the other duties assigned to him by the Minister of guardianship.

#### Article 9 (Competencies of the Deputy Director General)

The Deputy Director General shall:

- a) Under the guidance of the Director General, ensure technical and scientific coordination and integration of INS activities;
- b) Assist the Director General in the performance of his duties;
- c) Substitute for the Director General with his impediments, in accordance with the precedence he has defined;
- d) Exercise any other powers delegated to him by the Director General.

#### Article 10 (Bodies)

The INS has the following bodies:

- a) The Governing Board is the advisory and management body of the INS;
- b) The Consultative Council is the consultation and coordination body of the INS;
- c) The Technical-Scientific Council is the multi-sectoral consultation body of the Directorate General of the INS;
- d) The Institutional Scientific Committee is an advisory body to the Directorate General of INS, regarding the technical-scientific development of the institution;
- e) The Institutional Ethics Committee is a technical body that looks after the ethical aspects of the technical-scientific activities of the INS;
- f) The Institutional Biosafety Committee is a technical body that looks after the biosafety aspects of the technical-scientific activities of the INS.

#### Article 11 (Funding)

The following constitute the funding of the INS:

- a) Appropriations from the State Budget;
- b) Proceeds from the provision of services;
- c) Proceeds from the sale of publications edited by INS;
- d) Subsidies, donations, covenants, or liberalities attributed by any public or private entities, national or foreign;
- e) Any others resulting from the activity of the INS or that are legally awarded to it.

#### Article 12 (Expenses)

The following constitute expenses of the INS:

- a) Charges relating to operations;
- b) Costs resulting from the training and management of staff;
- c) Costs of acquiring, maintaining, and conserving goods, services, or facilities necessary for operations and the exercise of attributions.

#### Article 13 (Personnel)

The INS personnel are governed by the legal regime of the public function, but it is permissible to conclude labor contracts that are governed by the general regime, whenever this is compatible with the nature of the function to be performed.

#### Article 14 (Organic Statute)

It is the responsibility of the Ministry that oversees the area of Health to submit to the competent body the approval of the Organic Statute of the INS within a period of sixty (60) days from the date of publication of this Decree.

#### Article 15 (Implementation)

This Decree shall enter into force on the date of its publication.

Approved by the Council of Ministers on September 5, 2017.

Published.

The Prime Minister, *Carlos Agostinho do Rosario*.

#### **Resolution No. 46/2017**

**of November 2<sup>nd</sup>**

There being the need to redefine a normative legal framework that institutionalizes the general lines, philosophy, and strategy of the State in the field of social action in the country, according to item f) of No. 1 of Article 204 of the Constitution of the Republic, the Council of Ministers determines:

Article 1. The Social Action Policy and Implementation Strategy, which is an integral part of this Resolution, is hereby approved.

Article 2. Resolution No. 12/98, of April 9, is revoked.

Article 3. This Resolution shall enter into force on the date of its publication.

Approved by the Council of Minister on August 1, 2017.

Published.

The Prime Minister, *Carlos Agostinho do Rosario*.