

To ensure that HSACF execute its mandate effectively, an operational structure in the form of a Steering Committee has been formed. The purpose of the Steering Committee is to receive health sector related allegations and assess them against objective criteria to determine its veracity. The most suitable Entity who will be assigned the matter is determined based on the nature of allegations received and mandate of various Entities who are stakeholders in the HSACF. The Steering Committee meet on a monthly basis to assess all health sector related allegations of corruption that have been reported, to follow up on matters referred for investigation to members of the HSACF, and provides quarterly progress reports to the HSACF.

HSACF Stakeholders

Below are the HSACF stakeholders who are signatories to the Terms of Reference. However, the stakeholders are continuously reviewed with a view to add those that will enhance the operations of the Forum.

#	HSACF Stakeholders	Sector
1.	Special Investigating Unit	Law enforcement
2.	Council for Medical Schemes	Regulator
3.	Health Professional Council of South Africa	Regulator
4.	National Prosecuting Authority	Law enforcement
5.	Financial Intelligence Centre	Regulator
6.	Directorate for Priority Crimes Investigations	Law enforcement
7.	Corruption Watch	Civil society
8.	Section 27	Civil society
9.	Board of Healthcare Funders Association	Private sector
10.	Health Funders Association	Private sector
11.	National Department of Health	Government
12.	Provincial Department of Health - invitee	Government
13.	National Treasury - invitee	Government
14.	Compensation Fund - invitee	Government
15.	State Security Agency - invitee	Law enforcement

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Health Sector Anti- Corruption Forum



CORRUPTION
FIGHTING CORRUPTION IS EVERYBODY'S BUSINESS



Background of HSACF

The National Development Plan (NDP) stipulates that the national health system needs to be strengthened by improving amongst others governance in the health system. However, in the recent past poor leadership and governance particularly in the public health sector has given rise to the acts of fraud and corruption that has eroded the much-needed resources in the health system to ensure access to quality healthcare.

To give impetus to the NDP and the Presidential Health Summit outcomes, which require all sectors to collaborate and devise solutions to end the crisis in the South African health system, the Special Investigating Unit (SIU) that convenes Anti-Corruption Task Team (ACTT) programme 4 embarked on an intensive exercise to conduct Corruption Risk Assessment (CRA) in various sectors. The CRA focused on those industries, sectors and/or institutions (e.g health, construction, transport, mining, finance sector, etc) with a high risk or specific vulnerabilities to the manifestation of fraud and corrupt practices or activities.

Through the CRA, health sector was identified as one of the vulnerable sectors that requires immediate attention due to its high exposure to fraud and corrupt activities. The CRA process further revealed key vulnerabilities in the health system, which included amongst others, doctor registration irregularities, medical aid fraud, fictitious claims related to doctors' negligence in public hospitals, regulatory weaknesses in the health sector compliance enforcement, pharmaceutical companies collusion, non-compliance with medical waste disposal, and procurement irregularities to mention just a few.

The common root cause in all the key vulnerabilities that were identified was "collusion amongst stakeholders". Hence, the key mitigation plan identified through CRA was a multi-sector collaboration in the form of Health Sector Anti-Corruption Forum (HSACF), which comprise of health sector regulators, law enforcement agencies, civil society, public and private sector. The main objective of the HSACF is to collaborate with various stakeholders in the fight against fraud and corruption, identify areas of co-operation to enhance prevention, detection and prosecution of fraud and corruption in the health system.

The HSACF is governed by the Terms of Reference that promote mutual collaboration, co-operation and assistance relating to addressing key vulnerabilities identified in the health sector. The Terms of Reference set out the rules of engagement in terms of how stakeholders will collaborate to ensure efficient resolution of health sector related fraud and corruption. The governance structure of the Forum dictate that quarterly meetings are held to monitor progress that has been made on all fraud and corruption related cases, which have been registered and referred to different HSACF stakeholders based on their respective mandates.

How it operates

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What has the HSACF done so far?

Since its inception on 06 June 2018, the HSACF has convened three (3) meetings where performance reports are reviewed. Through this collaboration, HSACF has received quite a number of fraud and corruption allegations that has culminated in formal investigations in the health sector by way of Presidential Proclamations. Amongst them, include allegations of fraud, maladministration and corruption in the following Entities:

- a) Council for Medical Schemes,
- b) Health Professions Council of South Africa,
- c) National Health Laboratory Services,

A proclamation is awaited in respect of the South African Health Products Regulatory Authority. Matters under assessment include allegations relating to healthcare risk waste management, the theft of ARVs, the irregular award of a catering contract, irregular appointments, maladministration in relation to the affairs of a medical scheme, lack of management and controls in respect of hospital stock and irregularities at government mortuaries which potentially has an impact on prosecutions.

There is also collaboration with various Provincial Health Departments to deal with Medico-Legal claims fraud and corruption. This relates to collusion between attorneys, touts, nurses, doctors and specialist in various hospitals across the country to defraud the State through lodging fictitious claims purporting doctor negligence in public hospitals. This collaboration has culminated in the arrest of an Eastern Cape attorney (Nonxuba) on three (3) counts of fraud to the value of R45 million. It has now been established that the Medico-Legal claim is not only limited to few Provinces but it is a National problem. Therefore, an assessment is being conducted to determine whether there are sufficient statutory grounds for the President to issue a Proclamation to mandate the SIU to investigate all Medico-Legal claims matters on a National Level.

What impact will it have going forward and how will it help the health system including NHI?

The HSACF is intending to significantly reduce fraud and corruption in the health sector through a multi-sector collaboration approach, which will ensure speedy investigations and turnaround times of fraud, corruption and maladministration that have been reported to the Forum. The other key impact of the Forum will be on the criminal prosecution of the perpetrators of fraud and corruption in the health sector. The NPA and Hawks, which are key stakeholders to the Forum, will mainly drive the criminal prosecutions.

However, the Forum is also intending to ensure that funds that have been lost by the State through fraud and corrupt activities are also recovered through civil litigation process. The civil litigation process will largely be driven by SIU through the recently proclaimed Special Tribunal Court by the President. The principle objective for the re-establishment of the Special Tribunal Court is to expedite the finalisations of civil litigation matters instituted by the SIU, which is a key stakeholder and convener of HSACF. The Tribunal is a dedicated forum for the adjudication of civil proceedings instituted by the SIU.

In the end, HSACF, will save the State much needed resources that can be re-deployed to ensure universal access to quality healthcare system. HSACF recognize that the best way to fight corruption is through a pro-active approach and implementation of robust risk management

strategies to detect fraud and corruption. In this regard, preventive and risk management strategies are being mooted with all role players, in particular focusing on collaboration with civil society.

NHI is a health financing system that is designed to pool funds to provide universal access to quality affordable personal health services for all South Africans based on their health needs, irrespective of their socio-economic status. It is intended to ensure that the use of health services does not result in financial hardship for individuals and their families. The HSACF recognises that National Health Insurance Bill is intended to preclude or limit undesirable, unethical and unlawful practices in relation to the National Health Insurance Fund and its users.

Therefore, if corruption in the health care system is not addressed decisively, it will undermine the government efforts to ensure universal access to quality healthcare system. The pool funds that are earmarked to ensure universal access to quality healthcare system will be wiped out through fraud and corruption. Hence, the HSACF will be the engine tool in ensuring that the NHI is not exposed to fraud and corruption.

The impact of the Forum will be measured against the following:

- a) Successful criminal prosecutions emanating from HSACF
- b) Civil recoveries emanating from HSACF
- c) Medical practitioners struck off the roll by HPCSA emanating from HSACF referrals
- d) Medical Aid Schemes sanctions emanating from HSACF referrals
- e) Preventive and risk management measures implemented

The HSACF is a programme implemented under ACTT Programme 4, convened by SIU that reports on the following governance structures:

- a) Anti-Corruption Task Team (ACTT) Executive Committee
- b) Anti-Corruption Inter-Ministerial Committee (ACIMC)
- c) JCPS Cluster
- d) Justice and Correctional Service Oversight Committee
- e) SCOPA