



PREVENTION OF CORRUPTION IN THE HEALTHCARE SECTOR: PRINCIPLES, MEASURES, AND THEIR IMPLEMENTATION IN THE HEALTHCARE SYSTEM OF LITHUANIA

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SUMMARY

Corruption in the healthcare sector is an extremely negative social phenomenon that harms society and every member thereof. Unfortunately, the healthcare system in Lithuania is considered the most corrupt. For this reason, this study was conducted to determine how Lithuanian healthcare institutions implement the measures and principles of corruption prevention established in the Law on Prevention of Corruption of the Republic of Lithuania. The analysis showed that institutions generally comply with the requirements of the law, but the measures applied differ in scope, and, consequently, do not ensure uniform prevention of corruption in the entire healthcare sector. To that end, it was suggested that Lithuanian healthcare institutions take into account the recommendations presented in the article. At the same time, some of the good practices of other European Union states in the fight against corruption are presented in the article, seeking to suggest positive examples that could help to improve Lithuanian corruption prevention in healthcare sector. The proposals presented are related to promoting the integrity of healthcare system workers, improving the anti-corruption environment, by increasing the cooperation of entities in the identification of corruption and its risks, and creating conditions for potential actors of corruption that would encourage them not to commit or discourage them from committing corrupt activities.

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KEY WORDS

Corruption in healthcare sector, corruption prevention, principles of corruption prevention, corruption prevention measures

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INTRODUCTION

Corruption in the healthcare system is an extremely negative phenomenon. High level of corruption not only undermines trust in healthcare institutions³, but also deprives people from “the access to medical care”⁴, foremost, poor people⁵. The spread of corruption in one of the most sensitive sectors harms the entire society, therefore, it is necessary to fight corruption. On the other hand, it is obvious that it is impossible to eliminate corruption.⁶ Nevertheless, this does not mean that it cannot be reduced with effective preventive measures. For this reason, the prevention of corruption is the main goal of this work. Another reason for this study is that in Lithuania the most corrupt sector is considered to be the healthcare system.⁷ Such an indicator presupposes the need to conduct a study on how healthcare institutions implement corruption prevention measures to seek to reduce the level of corruption, as well as to search positive examples in foreign states that have low level of corruption or have been successful in reducing it, and to use those good practices to suggest improvements for the prevention of corruption in Lithuania.

On the other hand, corruption prevention is a very broad topic, therefore, the article is limited to the analysis of the principles and measures enshrined in the main legal act in this area in Lithuania - the Law on Prevention of Corruption (hereafter – LPC)⁸, as well as the analysis of preventive measures applied by selected healthcare institutions and their compliance with the

³ Subrata Chattopadhyay, “Corruption in Healthcare and Medicine: Why should Physicians and Bioethicists Care and what should they do?” *Indian Journal of Medical Ethics* Vol. 10, No. 3 (2013): 157 // DOI:10.20529/IJME.2013.049.

⁴ Pietro Previtali and Paola Cerchiello, “The Prevention of Corruption as an Unavoidable Way to Ensure Healthcare System Sustainability,” *Sustainability* Vol. 10, No. 9 (August 2018): 3 // DOI:10.3390/su10093071.

⁵ Oana-Ramona Socoliuc Guriță et al., “Corruption and Population Health in the European Union Countries-an Institutional Perspective,” *International Journal of Environmental Research and Public Health* Vol. 19, No. 9 (April 2022): 14 // DOI:10.3390/ijerph19095110.

⁶ Bo Rothstein, “Fighting Systemic Corruption; the Indirect Strategy,” *Daedalus* Vol. 147, No. 3 (2018): 37.

⁷ European Commission, *Special Eurobarometer 523* (Luxembourg: Publications Office, 2022), 23.

⁸ Law on Prevention of Corruption of the Republic of Lithuania (hereafter – LPC), Official Gazette (2002, no. 57–2297, as amended in 2022).

requirements of the LPC. Also, the good practice of selected foreign countries in the fight against corruption, with the use of descriptive, analysis, comparative, logical, and principles' scientific methods, is analysed, considering the possibility of applying such measures in the Lithuanian healthcare sector (all translations from Lithuanian to English are done by the authors, except the “Law on Prevention of Corruption of the Republic of Lithuania”).

CORRUPTION IN LITHUANIAN HEALTHCARE SECTOR AND ITS PREVENTION

The first part of the study will examine how corruption is fought in Lithuanian healthcare sector. It will be done by evaluating the implementation of preventive measures of selected healthcare institutions in the light of the LPC.

All healthcare institutions in Lithuania are divided into three groups by the Ministry of Health of Lithuania:

- Group 1: Transparent institutions;
- Group 2: Candidates for Group 1;
- Group 3: Institutions where not all criteria are in place and there is a higher probability of corruption.⁹

There are four lists of institutions in total (district and regional; state hospitals; primary; and secondary and tertiary care centres), however, due to the limits of the research, only one of them (state hospitals) will be considered. This list is selected because state hospitals could be regarded as most closely representing the whole healthcare system in Lithuania. Also, selected state hospitals are from three of the largest cities in Lithuania: Klaipeda State Hospital (hereafter – Klaipeda Hospital), the Kaunas Hospital of the Lithuanian University of Health Sciences (hereafter – Kaunas Hospital), and Siauliai State Hospital (hereafter – Siauliai Hospital). Furthermore, from 2022 all three hospitals belong to group 1.¹⁰ Therefore, this selection could be considered as sufficient to provide evidence about the implementation of preventive measures in the healthcare sector both at local and national level.

The analysis of these hospitals will be done considering two aspects of the Law on Prevention of Corruption: 1) the principles of corruption prevention and 2) the proposed system of preventive measures since one of the ways to prevent corruption is to implement abstract principles of good governance through concrete measures¹¹.

⁹ Brigitte Slot et al., *Updated Study on Corruption in the Healthcare Sector* (Luxembourg: Publications Office, 2017), 61.

¹⁰ *Order on the Approval of the List of Transparent Healthcare Institutions*, (2022) // [https://rsl.lrv.lt/uploads/rsl/documents/files/2022%2003%2028%20%C4%AEsakymas%20d%C4%97l%20skaidri%C5%B3%20%C4%AFstaig%C5%B3%20vardo%20suteikimo%20\(2\).docx](https://rsl.lrv.lt/uploads/rsl/documents/files/2022%2003%2028%20%C4%AEsakymas%20d%C4%97l%20skaidri%C5%B3%20%C4%AFstaig%C5%B3%20vardo%20suteikimo%20(2).docx).

¹¹ Karen Hussmann, *Addressing Corruption in the Health Sector: Securing Equitable Access to Health Care for Everyone* (Bergen: Chr. Michelsen Institute, 2011), 8.

Principles of Corruption Prevention in the Law on Prevention of Corruption of the Republic of Lithuania

The LPC establishes nine principles of corruption prevention: legality, universal applicability, interaction, continuity, proportionate anti-corruption activities, subsidiarity, transparency, protection of personal rights, and involvement. Also, their definitions are provided together.¹² On the other hand, although all these principles are important in the fight against corruption, both international legal acts and jurisprudence emphasise the principles of transparency and accountability.¹³ Consequently, corruption prevention in Lithuanian healthcare sector will be evaluated precisely in the context of these principles.

Transparency is defined as “the public availability of usable information.”¹⁴ Furthermore, two types of it are distinguished:

access to information by recipients (event transparency) and administrative processes which are accessible, simple, and comprehensible (process transparency).¹⁵

While accountability is “the obligation of those in power to explain, make understandable, and take responsibility for their decisions, actions, and performance.”¹⁶ Also, three elements of accountability are distinguished:

“answerability” — the obligation to justify one's action;
“enforcement” — the sanction if the action and/or the justification are not satisfactory; and
“responsiveness” — the willingness of those held accountable to respond to demands made.¹⁷

¹² LPC, supra note 8, art. 4.

¹³ UN General Assembly, United Nations Convention against Corruption, (2003, no. A/58/422), art. 5; Karen Hussmann, supra note 11; Pietro Previtali and Paola Cerchiello, supra note 4, 4; Rakhil Gaitonde et al., *Interventions to Reduce Corruption in the Health Sector: Review*, Vol. 8 (Chichester, UK: John Wiley & Sons, Ltd, 2016): 50; Tim K. Mackey, Taryn Vian and Jillian Kohler, “The Sustainable Development Goals as a Framework to Combat Health-Sector Corruption,” *Bulletin of the World Health Organization* Vol. 96, No. 9 (September, 2018): 637 // DOI:10.2471/BLT.18.209502.; Taryn Vian, “Anti-Corruption, Transparency and Accountability in Health: Concepts, Frameworks, and Approaches,” *Global Health Action* Vol. 13, No. sup1 (February, 2020) // DOI:10.1080/16549716.2019.1694744.

¹⁴ Taryn Vian, 2020, supra note 13, 2.

¹⁵ *Ibid.*, 8.

¹⁶ *Ibid.*, 2.

¹⁷ Ariane Lambert-Mogiliansky, “Social Accountability to Contain Corruption,” *Journal of Development Economics* Vol. 116 (2015): 158 // DOI:10.1016/j.jdeveco.2015.04.006.

It is also claimed that these two principles are inseparable from each other.¹⁸ One of the reasons is that “[t]he greater the transparency, the more space for government officials to be held accountable for their actions”.¹⁹

Therefore, transparency is related to making public institution’s area of inside affairs visible to society, while accountability requires public officials to explain why those affairs are as such. In other words, transparency helps to answer the question ‘What is happening?’, while accountability helps to answer the question ‘Why it is happening?’. These two questions should be considered when identifying corrupt practices, as well as when creating preventive measures which could clearly warn potential actors of corruption that society is given all means to answer these questions and to find out who is responsible. Albeit it is hard to achieve effective implementation of preventive measures, transparency and accountability are the most important principles to seek their implementation.

As mentioned above, the LPC establishes the principle of transparency, which determines that “anti-corruption activities should be open to the public and understandable”.²⁰ On the other hand, it makes no direct reference to the principle of accountability, although, a part of this principle can be derived from the principle of transparency, which insists entities of corruption prevention to make their actions understandable²¹. Nevertheless, accountability is one of the most important principles of corruption prevention, as well as without it, the principle of transparency is difficult to implement. Therefore, a situation where the content of this principle is indirectly derived from the description of another independent principle cannot be considered a suitable example for corruption prevention. For this reason, it is suggested in future to enshrine the principle of accountability separately along with the explanation of its content, including elements of this principle mentioned above.

Furthermore, in the LPC the principle of transparency is more directed at the performance of anti-corruption entities rather than potential actors and sectors of corruption. Although the content of this principle can be extended to match this concept, it would also be beneficial to establish this aspect directly in future amendments of the LPC. This is due to the fact that the transparency of not only prevention entities, but especially of those areas and actors that are least resistant to corruption is important for effective corruption prevention.

Besides the LPC, another legal act which enshrines anti-corruption principles specifically in the healthcare system is the Code of Anti-Corruption Conduct adopted by the Ministry of Health in 2022 (hereafter – CACC). It establishes four principles of proper behaviour: 1) intolerance to corruption; 2) transparency, publicity, and accountability; 3) impartiality; 4) anti-corruption integrity. The code also requests that all decisions made by an employee must be justified and clear, and if necessary, the employee must justify and present the reasons for making his or her

¹⁸ Suzanne J. Piotrowski, and Erin Borry, “An analytic framework for open meetings and transparency,” *Public Adm Manag* Vol. 15, No. 1 (2010): 37 and Taryn Vian, Jillian Clare Kohler, Gilles Forte, and Deirdre Dimancesco, “Promoting transparency, accountability, and access through a multi-stakeholder initiative: lessons from the medicines transparency alliance,” *J Pharm Policy Pract* Vol. 10, No. 1 (June 2017): 18 // <http://dx.doi.org/10.1186/s40545-017-0106-x>, quoted in Tim K. Mackey, Taryn Vian and Jillian Kohler, *supra* note 13, 637.

¹⁹ Suzanne J. Piotrowski, and Erin Borry, “An analytic framework for open meetings and transparency,” *Public Adm Manag* Vol. 15, No. 1, (2010) in Taryn Vian, 2020, *supra* note 13, 2.

²⁰ *LPC*, *supra* note 8, art. 4.

²¹ *LPC*, *supra* note 8, art. 4.

decision.²² Therefore, the code fills in the gaps left by the LPC by adding the principle of accountability and its content. This shows that the principles of corruption prevention in the healthcare sector established by the Ministry of Health are more in line with their concept presented in scientific literature. On the other hand, the principles are the basis of the fight against corruption, therefore, their precise definition should be provided in the LPC rather than in the act (the CACC) implementing the LPC. For this reason, it is recommended to expand the LPC in such a way that the principles of prevention of corruption established in it bind not only the entities of prevention of corruption, but also potential actors of corruption.

System of Preventive Measures in the Law on Prevention of Corruption of the Republic of Lithuania

Another important aspect of the LPC is the System of Measures to Create an Anti-Corruption Environment. According to it, the system directed at the fight against corruption should include:

- 1) corruption risk analysis;
- 2) corruption prevention planning documents;
- 3) anti-corruption assessment of legal acts or drafts thereof;
- 4) reporting of criminal acts of a corruptive nature;
- 5) determination of the probability of manifestation of corruption;
- 6) assessment of corruption risk management;
- 7) determination of the level of resilience to corruption;
- 8) implementation of anti-corruption standards of conduct.²³

Additionally, there is a ninth measure: raising anti-corruption awareness.²⁴

It is noted in scientific literature that the main method used in practice to fight corruption in the healthcare system is the implementation of anti-corruption measures.²⁵ Also, experts claim that particularly important are measures such as “awareness raising, prevention, detection and sanctions”²⁶, as well as other measures that ensure proper governance²⁷. For this reason, the further part of the study will be devoted to the analysis of the implementation of the anti-corruption measures established in the LPC.

Furthermore, the European Commission distinguishes three types of anti-corruption measures: “Generic anti-corruption policies and practices, ... (= non-healthcare specific); (ii)

²² Order on the Approval of the Code of Anti-Corruption Conduct of the Ministry of Health of the Republic of Lithuania, (2022), sec. 6.2.

²³ LPC, supra note 8, art. 5, sec. 2.

²⁴ Ibid, art. 14.

²⁵ Karen Hussmann, supra note 11, 9.

²⁶ Ibid.

²⁷ Jillian Clare Kohler and Deirdre Dimancesco, “The Risk of Corruption in Public Pharmaceutical Procurement: How Anti-Corruption, Transparency and Accountability Measures may Reduce this Risk,” *Global Health Action* Vol. 13, No. sup1 (February 2020): 7 // DOI:10.1080/16549716.2019.1694745.

Generic healthcare policies and practices, ... (= non-corruption specific); (iii) Specific policies and practices ... (= corruption-in-health policies).” Since the goal of the LPC is to ensure general prevention of corruption, not only of corruption in the healthcare sector, it falls under the first category. However, within the framework of our study, the second and the third type of measures are more relevant. As will be seen below, the provisions of the LPC, systematically interpreted with the principle of subsidiarity, establish the obligation for each healthcare institution to implement preventive measures at the institutional level. For this reason, it will be further examined how the measures established by the LPC are applied in the hospitals selected for analysis.²⁸

Application of Corruption Prevention Measures and principles in Lithuanian Healthcare Sector

Having presented the main requirements of the LPC, it will now be examined how the selected hospitals implement them. This will be done by consistently examining the application of each measure, also considering the mentioned principles of corruption prevention.

I. Corruption Prevention Planning Documents

According to the principle of subsidiarity²⁹, all public institutions have a duty to analyse their own risks by adopting corruption prevention action plans³⁰. All analysed hospitals have adopted corruption prevention planning documents. Siauliai and Klaipeda Hospitals have issued the Corruption Prevention Program³¹ and the Corruption Prevention Plan³² respectively, both including the Corruption Prevention Measures Plan. Whereas in Kaunas Hospital’s website only the Corruption Prevention Measures Plan is available.³³ Although the LPC does not establish what specific documents for the prevention of corruption should be adopted, the comparison of the documents adopted by the hospitals (presented below) shows that the plan adopted by Kaunas

²⁸ Except the first measure ‘Corruption Risk Analysis’ – which is performed exclusively by the Special Investigation Service of the Republic of Lithuania (*LPC, supra* note 8, art. 6, sec. 1).

²⁹ “Entities of the public or private sector shall be primarily responsible for corruption risk management” (*ibid*, art. 4).

³⁰ *Ibid*, art. 7, sec. 1, subsec. 5.

³¹ *Order on the Approval of the Corruption Prevention Program and the Implementation Plan of the Corruption Prevention Program of the Public Institution Siauliai State Hospital for 2020-2022 (hereafter – Siauliai Hospital Program)*, (2020) // https://rsl.lrv.lt/uploads/rsl/documents/files/Korupcija/V-1279_2020-12-31.pdf.

³² *2020-2023 Program for the Prevention of Corruption in the Public Institution Klaipeda State Hospital (hereafter – Klaipeda Hospital Program)*, (2020) // <https://www.rkligonine.lt/wp-content/uploads/2021/03/20210322163216668.pdf>.

³³ *2023-2025 Corruption Prevention Measures Plan of the Kaunas Hospital of the Lithuanian University of Health Sciences (hereafter – Kaunas Hospital Plan)*, (2023) // https://kaunoligonine.lt/wp-content/uploads/2023/01/Korupcijos-prevencijos-programa_2023-2025.pdf.

Hospital lacks some elements important for the fight against corruption found in the documents of other hospitals.

Table 1. Elements of the analysed Hospitals' corruption prevention planning documents³⁴

Hospital Elements	Siauliai Hospital	Kaunas Hospital	Klaipeda Hospital
Definition of Corruption and Corruption Crimes	Yes	No	Yes
Promotion of the Principles of Corruption Prevention	Yes	No	Yes
Determination of the Probability of the Occurrence of Corruption	Yes	Yes	Yes
Assessment of Corruption Risk Management	No	Yes	Yes
Encouragement to Report Corruption	Yes	No	Yes
Raising Anti-Corruption Awareness	Yes	Yes	Yes
Increasing Transparency and Accountability	Yes	Yes	Yes
Continuous cooperation with Special Investigation Service of the Republic of Lithuania (hereafter – STT)	No	No	Yes

As can be seen from the table, both Siauliai and Klaipeda Hospitals have defined corruption and corruption crimes.³⁵ Also, their aims of corruption prevention include promotion of

³⁴ Own work based on the corruption prevention planning documents of the Hospitals.

³⁵ *Siauliai Hospital Program*, *supra* note 31, sec. 3; *Klaipeda Hospital Program*, *supra* note 32, sec. 7; *Kaunas Hospital Plan*, *supra* note 33.

transparency³⁶. However, the Corruption Prevention Program of Siauliai Hospital is the only one to establish the implementation of the principle of the inevitability of legal liability,³⁷ which could be regarded as an essential part of the principle of accountability. Whereas Kaunas Hospital's Corruption Prevention Measures Plan does not provide any of these features. On the other hand, all three hospitals aim to increase the publicity and accountability of their activities to the public,³⁸ which shows direct implementation of the principles of transparency and accountability.

The comparison of the selected Hospitals' corruption prevention measures plans allows to conclude that Klaipeda Hospital's plan is the most comprehensive, describing each measure in sophisticated detail (13 objectives in total), while Siauliai Hospital's plan is shorter (5 objectives in total), lacking some points expressed in Klaipeda Hospital's plan. Kaunas Hospital's plan is also quite short (4 objectives in total), bearing in mind that it was not possible to find a separate corruption prevention program in its website. Therefore, these suggestions could be made: 1) Kaunas Hospital should introduce (or make available publicly) a Corruption Prevention Program which should include elements present in the same documents adopted by other hospitals; 2) elements that are missing from particular Hospital's documents could be added in future amendments according to the comparative table above. The implementation of these proposals, although not mandatory, could contribute to improving the prevention of corruption in hospitals.

II. Anti-Corruption Assessment of Legal Acts or Drafts thereof

Another preventive measure established by the LPC is the obligation for any public entity preparing a draft of a legal act to perform an anti-corruption assessment of it if its aim is to regulate public relations.³⁹ Since healthcare is related to the public interest, therefore, all proposed legislation in this area must be evaluated in the context of corruption.⁴⁰ The analysis of the selected hospitals shows that Klaipeda Hospital has established the anti-corruption evaluation of its domestic legislation as an objective to fight corruption.⁴¹ Siauliai Hospital also carries out the anti-corruption evaluation of its domestic legislation.⁴² However, Kaunas Hospital provides no information on the anti-corruption evaluation of its domestic legislation.

³⁶ Siauliai Hospital Program, supra note 31, sec. 6.1; Klaipeda Hospital Program, supra note 32, sec. 9.1.

³⁷ Siauliai Hospital Program, supra note 31, sec. 6.1.

³⁸ Siauliai Hospital Program, supra note 31, "Plan of Measures for the Implementation of the Corruption Prevention Program of the Public Institution Siauliai State Hospital," task 3; Klaipeda Hospital Program, supra note 32, sec. 10.2; Kaunas Hospital Plan, task 2.1.

³⁹ LPC, supra note 8, art. 8, sec. 1.

⁴⁰ Ibid, art. 8, sec. 1, subsec. 14.

⁴¹ Klaipeda Hospital Program, supra note 32, "Plan of Measures for the Implementation of the Program for the Prevention of Corruption in the Public Institution of the Klaipeda State Hospital," task 3.

⁴² Siauliai State Hospital, "Anti-corruption Assessment of Legal Acts and Drafts thereof," // <https://rsl.lrv.lt/lt/korupcijos-prevencija/teisės-aktu-ir-ju-projektu-antikorupcinis-vertinimas>.

III. Determination of the Probability of Manifestation of Corruption and the Level of Resilience to Corruption, and Assessment of Corruption Risk Management

Furthermore, there are three similar measures: ascertaining of 1) the probability of corruption and 2) the level of resistance to corruption, as well as 3) the assessment of corruption risk management, therefore, their implementation will be analysed together.⁴³ All selected Hospitals' corruption prevention documents stipulate the determination of the probability of the occurrence of corruption.⁴⁴ Consequently, in all Hospitals the analysis of the risk of corruption in public procurement has been carried out. Besides, in Kaunas Hospital the risk of corruption in joint endoprosthesis activities has been analysed.⁴⁵ Both Kaunas and Siauliai Hospitals provide detailed conclusions of the analysis.⁴⁶ Also, suggestions for improvements are presented, while Kaunas Hospital monitors the implementation of them as well,⁴⁷ thus both Hospitals exhaustively perform the assessment of corruption risk management. However, Klaipeda Hospital simply states in one sentence that no corruption risk factors have been identified,⁴⁸ although at the same time the conclusion of corruption risk assessment by STT is presented with suggestions for improvement and monitoring of their implementation, where it is stated that some of the suggestions have not been implemented.⁴⁹ Lastly, according to the LPC, all information about the

⁴³ The determination of the level of resistance to corruption is executed not by hospitals themselves but by the Ministry of Health (see the grouping of healthcare institutions above).

⁴⁴ *Siauliai Hospital Program*, *supra* note 31, 11; *Klaipeda Hospital Program*, *supra* note 41, task 2, *Kaunas Hospital Plan*, *supra* note 33, 1.1.1.

⁴⁵ *Conclusion of the Special Investigations Service of the Republic of Lithuania regarding Corruption Risk Analysis in the Fields of Joint Endoprosthetics*, (2022) // <https://kaunoligonine.lt/wp-content/uploads/2022/12/Korupcijos-rizikos-analizes-isvada-sanariu-endoprotezavimo-veiklos-srityje.pdf>.

⁴⁶ *Determination of the Probability of the Occurrence of Corruption in the Siauliai State Hospital during Public Procurement for the Purchase of Medical Equipment Technical Maintenance, Prophylaxis and Metrological Inspection Services and Control, when Receiving these Services Already Purchased*, (2022) // <https://rsl.lrv.lt/uploads/rsl/documents/files/KPT%201%C5%A0VADA%202022%20METAL.pdf>; *Conclusion of the Special Investigation Service of the Republic of Lithuania on Corruption Risk Analysis in Public Procurement of Healthcare Institutions*, (2022) // <https://kaunoligonine.lt/wp-content/uploads/2022/12/Korupcijos-rizikos-analizes-isvada-viesuju-pirkimu-procesuose.pdf>.

⁴⁷ *Plan of Measures for Managing the Risk of Corruption in the Siauliai State Hospital, in the Field of Public Procurement*, (2021) // <https://rsl.lrv.lt/uploads/rsl/documents/files/Korupcijos%20rizikos%20valdymo%20priemoni%C5%B3%20planas%20VPS.pdf>; *Table of the Implementation of Corruption Risk Analysis Proposals in Public Procurement*, (2022) // <https://kaunoligonine.lt/wp-content/uploads/2022/12/Atliktos-korupcijos-rizikos-analizes-viesuju-pirkimu-procesuose-pasiulymu-igyvendinimo-lentele.pdf>.

⁴⁸ Klaipeda State Hospital, “Corruption risk analysis” // <https://www.rkligonine.lt/korupcijos-prevencija/korupcijos-rizikos-analize/>.

⁴⁹ *Implementation of the Submitted Recommendations for the Klaipeda State Hospital in the Conclusion of Corruption Risk Analysis no. 4-01-4722*, (2022) // <https://www.rkligonine.lt/wp-content/uploads/2022/09/Del-korupcijos-rizikos-analizes-isvados.docx>; *Monitoring of the Implementation of the Proposals Presented in the Conclusion of the Corruption Risk Analysis*, (2022) // <https://stt.lt/data/public/uploads/2022/09/stebesenos-priedas-aspi-vp.pdf>.

implementation of these measures should be in the websites of institutions,⁵⁰ thus contributing to transparency and accountability. The analysis showed that both the Ministry of Health and the selected Hospitals disclose information to public, however, a suggestion could be made for Klaipeda Hospital to provide clearer and more detailed information on the determination of corruption risks as well as the management of them.

IV. Reporting of Criminal Acts of a Corruptive Nature

Another significant tool in the fight against corruption is reporting. According to scientific literature, in the healthcare sector, the ability to report is directed mostly at patients and third parties. For instance, it is claimed that “it is important to stimulate – independent – media involvement, ‘civil society’ watchdogs and patient groups to identify and report on corruption.”⁵¹ Similarly, the LPC also establishes the principle of involvement, which aims to promote the involvement of a “civil society in the prevention of corruption”⁵². However, it only mentions ability to report in the article related to the raising of anti-corruption awareness,⁵³ because mentioned aspects are provided in another law⁵⁴. On the other hand, the LPC imposes a duty on employees of public institutions to report corruption.⁵⁵ Therefore, it places a greater emphasis on eliminating obstacles to identify corrupt practices rather than the ensuring of the ability to report.

Nevertheless, all analysed Hospitals have Schedules of Procedures for Providing Information on Violations with the forms to provide such information.⁵⁶ Also, all Hospital’s acts ensure confidentiality for whistle-blowers as well as set the duty for employees not to disclose data of whistle-blowers.⁵⁷ Furthermore, all Hospitals provide the ability to report about corruption directly to a competent person in the institution or by e-mail (except Kaunas Hospital which allows to report directly on their website).⁵⁸ Thus, sufficient opportunities have been created in hospitals to report corruption, but the question remains as to how the rules established in legal

⁵⁰ LPC, *supra* note 8, art. 12, sec. 4.

⁵¹ Brigitte Slot et al., *supra* note 9, 149.

⁵² LPC, *supra* note 8, art. 4.

⁵³ *Ibid*, art. 14, sec. 1.

⁵⁴ *Law on the Protection of Whistleblowers*, Register of Legal Acts (2017, no. 19743, as amended in 2022).

⁵⁵ LPC, *supra* note 8, art. 9, sec. 1.

⁵⁶ *Order on the Approval of the Description of the Procedure for Providing Information on Violations in the Siauliai State Hospital*, (2019, as amended in 2021) // https://rsl.lrv.lt/uploads/rsl/documents/files/V-1341_su%20pakeitimu.pdf; *Schedule of the Procedure for Examining Reports of Violations Received at the Klaipeda State Hospital through the Internal Reporting Channel*, (2020) // <https://www.rkligonine.lt/wp-content/uploads/2021/04/2020-12-17-isakymas-del-ligonines-vidiniu-informacijos-apie-pazeidimus-teikimo-kanalu-ga-1-pages-deleted.pdf>; *Order on the Approval of the Procedure for Providing Information on Violations in the Kaunas Hospital of the Lithuanian University of Health Sciences*, (2022) // <https://kaunoligonine.lt/wp-content/uploads/2022/09/Informacijos-apie-pazeidimus-tvarka-atnaujinta-2022-09-12.pdf>.

⁵⁷ *Ibid*: Siauliai Hospital, sec. 14-15; Klaipeda Hospital, sec. 13-14; Kaunas Hospital, sec. 15-16.

⁵⁸ *Ibid*: Siauliai Hospital, sec. 7; Klaipeda Hospital, sec. 7; Kaunas Hospital, sec. 7.

acts are implemented in practice (e.g., to what extent procedures actually ensure protection of whistle-blowers and encourages reporting of corruption).

V. Implementation of Anti-Corruption Standards of Conduct

The LPC also stipulates that every public institution must adopt code of anti-corruption conduct, consisting of an extensive set of rules promoting transparency of its employees behaviour as well as their accountability, and presenting examples of corruption with suggestions how to deal with such situations.⁵⁹ Therefore, codes of conduct, on the one hand, should be made in the light of the principles of corruption prevention, on the other hand, they can implement the principles of transparency and accountability themselves by determining exact rules based on these principles.

All analysed Hospitals have their own codes of conduct. Klaipeda and Siauliai Hospital's codes are almost identical. Besides, all Hospital's codes establish principles, including transparency and accountability, together with the explanation of their content, which corresponds to the concept of these principles described above.⁶⁰ This means that all other rules established in these codes must be interpreted in the light of these principles, thus implementing the requirements of the LPC. Also, the CACC is present in all Hospital's websites.

VI. Raising Anti-Corruption Awareness

Besides the rules, it is necessary to promote continued training of personnel⁶¹ and public⁶². The LPC also draws attention to increasing anti-corruption awareness, including trainings organised by STT.⁶³ Therefore, all three Hospitals aim to raise the anti-corruption awareness both of public and their employees.⁶⁴ On the other hand, only Klaipeda Hospital emphasises continuous cooperation with STT⁶⁵, as well as invites STT to organise trainings⁶⁶. This reflects its openness and aspiration to raise the level of anti-corruption awareness. Nevertheless, Kaunas

⁵⁹ LPC, *supra* note 8, art. 13, sec. 1.

⁶⁰ *Siauliai Hospital Program*, *supra* note 31, sec. 5, 10, 11; *Kaunas Hospital Plan*, *supra* note 33, sec. 5.1, 5.9; *Klaipeda Hospital Program*, *supra* note 32, chapter 2, sec. 1, 6 (for some reason, the explanation of the principle of accountability is omitted from Klaipeda Hospital's Code).

⁶¹ Transparency International, "Executive Summary": xix; in: Jana Kotalik and Diana Rodriguez, eds., *Global Corruption Report 2006* (London and Ann Arbor: Pluto Press, 2006).

⁶² Robert Klitgaard, Ronald Maclean-Abaroa and H. Lindsey Parris, *Corrupt Cities: A Practical Guide to Cure and Prevention* (Washington, DC: World Bank, 2000), 39.

⁶³ LPC, *supra* note 8, art. 14, sec. 4.

⁶⁴ *Siauliai Hospital Program*, *supra* note 31, sec. 6.2, 7.1; *Klaipeda Hospital Program*, *supra* note 32, sec. 9.3, 23.4; *Kaunas Hospital Plan*, *supra* note 33, task 2.

⁶⁵ *Klaipeda Hospital Program*, *supra* note 32, sec. 23.6.

⁶⁶ *Klaipeda Hospital Program*, *supra* note 41, sec. 29.

Hospital also periodically organize anti-corruption education for employees⁶⁷, and both Hospitals give recommendations for employees on how to act to avoid violations⁶⁸. However, there is no information whether Siauliai Hospital organises periodic trainings for its workers, although there have been a few news reports about such trainings.

Moreover, both Siauliai and Klaipeda Hospitals provide commemorative booklets: Siauliai Hospital has one for employees about their conduct when a bribe is offered,⁶⁹ Klaipeda Hospital has a commemorative booklet of transparency, establishing it as one of the main values of hospital, thus directly implementing the principle of transparency, as well as determining rules for workers similar to those established by Siauliai Hospital's booklet. Furthermore, Klaipeda Hospital provides slides for employees called "How to conduct when a bribe is offered?" which include more information in plain language.⁷⁰ On the other hand, such information was not found in Kaunas Hospital's website (although, according to its corruption prevention documents, this hospital provides recommendations for employees, therefore, it is possible that information for them is provided through internal channels).

VII. Enforcement of Anti-Corruption

Along having anti-corruption laws or education of people, it is also necessary to ensure enforcement of the rules.⁷¹ Therefore, from 2022 the LPC determines that most public institutions must appoint persons responsible for creating a corruption-resistant environment.⁷² According to the LPC, this provision applies to the analysed Hospitals as well. Both Kaunas and Siauliai Hospitals have a Corruption Prevention Officer, while Klaipeda Hospital has a Person responsible for creating a corruption-resistant environment. They are also competent to receive reports of corruption.

The analysis of the LPC and the preventive measures implemented by healthcare institutions showed that preventive measures applied rely to a considerable extent on the principles of corruption prevention. In particular, most measures are based on the principles of transparency and accountability, consequently, this allows to conclude that these principles, enshrined in the LPC and the CACC, are successfully implemented in practice. On the other hand, it is noticeable that not all institutions apply certain preventive measures: in some institutions there is no information about the application of some measures at all, in others, although measures are applied, their scope varies. Such differences, which are likely to be characteristic not only of the examined hospitals, but also of other Lithuanian healthcare institutions, are a considerable challenge for the unified prevention of corruption, which is provided for in the LPC and the CACC. Therefore, in future, healthcare institutions should strive to implement the requirements

⁶⁷ Kaunas Hospital Plan, *supra* note 33, sec. 3.1.4.

⁶⁸ *Ibid*, sec. 2.1.7; Klaipeda Hospital Program, *supra* note 41, sec. 31.

⁶⁹ Siauliai State Hospital, "Commemorative Booklet for Hospital Staff when they are Offered or Given a Bribe" // https://rsl.lrv.lt/uploads/rsl/documents/files/Atmintine_korupcijos%20prevencija.pdf; Klaipeda State Hospital, "Transparency Commemorative Booklet" // <https://www.rkligonine.lt/korupcijos-prevencija/skaidrumo-atmintine/>.

⁷⁰ Klaipeda State Hospital, "How to Act when a Bribe is Offered" // <https://www.rkligonine.lt/wp-content/uploads/2021/03/kaip-elgtis-kai-yra-siulomas-kysis.doc>.

⁷¹ Transparency International, *supra* note 61.

⁷² LPC, *supra* note 8, art. 24, sec. 2.

provided by the LPC, i.e., corruption prevention measures, in the context of the principles as fully as possible.

GOOD PRACTICE OF PREVENTION OF CORRUPTION IN FOREIGN COUNTRIES

As seen in the previous part, Lithuanian healthcare sector is making efforts to reduce corruption, but at the same time, there is also room for improvement in the overall corruption prevention system. Therefore, the last part of this research will present some evidence of an effective fight against corruption in other States that could serve as an example for improving the prevention of corruption in Lithuania. For the reference to the good practice of foreign countries in the fight against corruption, two States were selected: Denmark and Estonia. This is due to Denmark's constant position as the State that has the lowest level of corruption in the world⁷³ and the successful reduction of corruption in Estonia over the past five years.⁷⁴

It is claimed that post-communist states are “more vulnerable to corruption due to their inadequate institutional structures and their nature of transition to a functioning democratic state.”⁷⁵ Since Lithuania is a post-communist state, this might explain, why corruption in Lithuania is a common problem, especially in the healthcare sector.⁷⁶ On the other hand, being the post-communist state should no longer be an excuse for Lithuania to hold the second place in healthcare corruption among EU States⁷⁷. Such a note could be derived when examining the example of Estonia which like Lithuania had been occupied by the USSR but since 1990 managed to acquire much lower level of corruption,⁷⁸ while in 2018-2020 for control of corruption was evaluated as the best among post-communist EU countries⁷⁹.

One of the most significant reduces in corruption in Estonia is that of the healthcare sector (in 2017, 25 % of the respondents said corruption in the healthcare sector was widespread, while in 2022 – only 14 %) ⁸⁰. Also, a drastic change is visible in general level of corruption (in 2017, only 19 % of the respondents said corruption was rare, while in 2022 – 45 %) ⁸¹. Consequently, one can assume that there is a correlation between the prevention of corruption in the healthcare

⁷³ Transparency International, “Corruption Perceptions Index” // <https://www.transparency.org/en/cpi/2022>.

⁷⁴ European Commission, *Special Eurobarometer 470* (Luxembourg: Publications Office, 2017), 23; European Commission, 2022, *supra* note 7.

⁷⁵ Milada Anna Vachudova, “The Transformation of the State in Eastern Europe”: 607; in S. Leibfried et al., eds., *The Oxford Handbook of Transformations of the State* (Oxford: Oxford University Press, 2015) quoted in Andi Hoxhaj, “Anti-Corruption Policy in the EU and Reflexive Governance” (University of Warwick, 2019), 9.

⁷⁶ See Introduction.

⁷⁷ European Commission, 2022, *supra* note 7.

⁷⁸ European Commission, *Annex: Estonia to the EU Anti-Corruption Report* (2014), 10 // https://home-affairs.ec.europa.eu/system/files/2020-09/2014_acr_estonia_chapter_en.pdf.

⁷⁹ World Bank, “Worldwide Governance Indicators” // <http://info.worldbank.org/governance/wgi/Home/Reports>.

⁸⁰ European Commission, 2017, *supra* note 74, 23; European Commission, 2022, *supra* note 7.

⁸¹ European Commission, 2017, *supra* note 74, 17; European Commission, 2022, *supra* note 7, 18.

system and the prevention of corruption in general⁸². This allows to conclude that the level of corruption in the healthcare sector has possibly decreased due to common preventive measures, therefore, it will be continued by presenting some of common successful measures of Estonia in the fight against corruption.⁸³

The strength of Estonia in the fight of corruption is the wide digitalisation. It is claimed that 99 per cent of public services are digitalised, and this has reduced bribery as well as the use of personal connections.⁸⁴ Digitalisation contributes in particular to transparency, as everything is recorded, therefore, making it easier to detect corruption⁸⁵. This builds trust in public entities, ensures that officials act with integrity, and, consequently, leads to an “effective detection and prosecution of corruption”.⁸⁶ Therefore, digitalisation of public services is an important tool to reduce corruption and one of the means to implement the principles of corruption prevention.

It is also claimed that digitalisation was one of the main reasons why Lithuania improved in combating corruption in the healthcare sector.⁸⁷ However, Lithuania’s Digital Non-Corrupt Health Index value is only 0,7, way below than Estonia’s (0,8) or the most resistant to corruption States of the EU (Denmark - 0,94, Finland - 0,91, Sweden - 0,93)⁸⁸. Therefore, there is still room for increasing digitalisation in the healthcare system of Lithuania, by implementing more digital anti-corruption measures (including artificial intelligence, especially for the detection of corrupt activities⁸⁹).

As can be seen above, Denmark is also a leader in the digitalisation of the healthcare sector, confirming how important this measure is to prevent corruption. Nevertheless, it is claimed that “without instigating social change by engaging broadly with the environment, fighting corruption will not succeed”⁹⁰. Therefore, both Denmark and Estonia focus on the promotion of integrity as a means of preventing corruption. While Denmark like most other States firstly establish integrity standards in the codes of conduct, Estonia prefers “monitoring by means of self-assessment of corruption risks.”⁹¹ According to the findings in the first part of our research, Lithuania applies

⁸² E.g., „countries ... known for high perceived general corruption correlate to specific healthcare corruption. In contrast, the Scandinavian countries have low public and healthcare corruption”. (European Commission, *Special Eurobarometer 397* (2014) quoted in Alexandra-Codruța Bîzoi and Cristian-Gabriel Bîzoi, “Primum Non Nocere: How to Fight the “Pandemic” of Healthcare Corruption”: 348; in: Robert W. McGee and Serkan Benk, eds., *The Ethics of Bribery: Theoretical and Empirical Studies* (Cham: Springer International Publishing, 2023) // DOI:10.1007/978-3-031-17707-1_20.)

⁸³ Note: Denmark’s good practices will also be examined in the same way.

⁸⁴ Roberto Kukutschka, *Global Corruption Barometer: European Union 2021: CITIZENS' VIEWS AND EXPERIENCES OF CORRUPTION* (Transparency International, 2021), 20.

⁸⁵ *Ibid.*

⁸⁶ *Ibid.*

⁸⁷ Alexandra-Codruța Bîzoi and Cristian-Gabriel Bîzoi, *supra* note 82, 360.

⁸⁸ *Ibid.*, 357.

⁸⁹ *Ibid.*, 346, 351.

⁹⁰ P. D. Ocheje, “Norms, law and social change: Nigeria’s anti-corruption struggle, 1999–2017,” *Crime, law and Social Change*, (2017), 1-19, quoted in Maria Krambia-Kapardis, “Disentangling Anti-Corruption Agencies and Accounting for their Ineffectiveness,” *Journal of Financial Crime* Vol. 26, No. 1 (January 2019), 33 // DOI:10.1108/JFC-01-2018-0016.

⁹¹ Oksana Huss et al., *Handbook of Good Practices in the Fight Against Corruption* (Luxembourg: Publications Office, 2023), 21 // <https://data.europa.eu/doi/10.2837/575157>. Note: this source, newly published at the time of writing the article, thoroughly reviewed the selected corruption prevention

both these preventive measures. Therefore, the promotion of integrity in Denmark and Estonia will be analysed looking for improvements for Lithuania.

Firstly, Denmark's Code of Conduct in the Public Sector has an important feature that is significant for the healthcare sector, i.e., a section dedicated to gift policy. Although Denmark also has a general rule prohibiting public employees from accepting gifts or other benefits related to their work, there are examples of when employees could accept gifts in certain cases (one of the examples is related specifically to the healthcare system).⁹² The presented examples would be useful in improving Lithuanian public sector's gift policy⁹³, thus distinguishing between real cases of corruption and those without corrupt intentions.

In addition, the code provides useful provisions on issues of dual practice, confidentiality, protection of whistle-blowers, as well as other duties of public employees. All of this can be used to better identify corruption and create a more corruption-resistant environment. Besides, the code has been positively evaluated by GRECO⁹⁴, which shows that the adaptation and application of its provisions in Lithuania could be one of the ways to improve the fight against corruption.

Even more, although the code is non-binding, there are data that when discussions about gifts arise in public, one of the sources of arguments is precisely this code. This shows that provisions of the code, although not mandatory, are quite well established in society.⁹⁵ Such an impact of the code of conduct on society should be the aspiration of every state that strives to fight corruption more successfully, therefore, when improving the codes of conduct in force in Lithuania, the Code of Conduct in the Public Sector, especially its plain format, should be considered.

Similar to Denmark, Estonia also promotes integrity. However, it focuses more on integrity monitoring by introducing an electronic corruption risk self-assessment toolbox⁹⁶. On the other hand, this tool is only intended for the use of local governments. Nevertheless, it should be also possible to use a similar tool in institutions of other sectors, e.g., the healthcare sector. Such a conclusion can be made regarding that Estonia's toolbox consist of “guidance material on setting up anti-corruption work in local governments and a tool to identify corruption risks in local governments”⁹⁷. Also, the toolbox provides questionnaires which “help ... to identify and assess corruption risks, analyse the adequacy of existing activities [and] compare their results with other

measures, which at that time were hardly mentioned in other sources. For this reason, it is mainly relied on when presenting the selected examples from Denmark and Estonia.

⁹² *Code of Conduct in the Public Sector* (2017), Chapter 6, 31-32 // <https://modst.dk/media/18742/code-of-conduct-in-the-public-sectorforside.pdf>.

⁹³ Similar exceptions provided by Lithuanian legal acts in practice do not work (Eglė Kavoliūnaitė-Ragauskienė, *Dovanos Ir Kyšio Santykis: Antropologinės Implikacijos Teisės Sistemai (the Gift-Bribery Relationship: Anthropological Implications for the Legal System)*. (Vilnius: Lietuvos teisės institutas, 2019), 34.

⁹⁴ Group of States against Corruption, (GRECO), *Fifth Evaluation Round, Preventing Corruption and Promoting Integrity in Central Governments (Top Executive Functions) and Law Enforcement Agencies, EVALUATION REPORT, DENMARK* (2019), 17 // <https://rm.coe.int/fifth-evaluation-round-preventingcorruption-and-promoting-integrity-i/168097203a>.

⁹⁵ Oksana Huss et al., *supra* note 91, 115.

⁹⁶ *Ibid*, 116.

⁹⁷ *Ibid*, 117.

local governments”⁹⁸ Considering the contents of this toolbox, it seems that such a toolbox could also be applied to the self-analysis of corruption risks in healthcare institutions.

On the other hand, such a tool requires sufficient resources, otherwise, if there are no funds to support this tool, it might not be very effective.⁹⁹ Still, such a tool could contribute to increasing the level of digitalisation in the healthcare system in Lithuania and reducing the overall level of corruption. To that end, e.g., the CACC could serve as guidance material for such a toolbox, including the development of questionnaires. Over time, the expansion of the database, including information that would be filled by healthcare institutions, could allow comparisons of the corruption risks of healthcare institutions and even their governance. Therefore, such a tool could firstly facilitate the identification of corruption risks for healthcare institutions, and secondly, it would allow them to share good examples of corruption prevention (even specific ones) among themselves.

Nevertheless, promoting integrity alone is not enough to successfully fight corruption. Besides, a comprehensive system of various measures binding different members of society is necessary for the prevention of corruption. E.g., in Denmark there is a close relationship between parliament, activists and the media to identify corrupt practices.¹⁰⁰ Also, it is claimed that the Danes are not prone to corruption because the government is able to provide sufficient social guarantees, which in turn increases trust in the government¹⁰¹ and does not imply the need to satisfy one's interests in corrupt ways. As for companies, in Denmark their reputation is much more important to them than the satisfaction of short-term interests with the help of corruption¹⁰², since even a small case of corruption could ruin the company itself. Furthermore, Denmark “does not so much control corruption but reduces incentives for engaging in it”.¹⁰³ Whereas, in the case of corruption, the inevitability of punishment and the high probability of being caught are far more important than harsh punishments.¹⁰⁴ These examples allow to conclude that for successful prevention of corruption particularly important are cooperation in identifying corrupt acts, the inevitability of responsibility, and such a conjuncture of prevention measures, which make involvement in corrupt activities detrimental for actors themselves.

In the end, comparing the results of the study of the Lithuanian healthcare sector with the presented examples of other EU states, it can be claimed that the promotion of integrity is also a significant element of corruption prevention in Lithuania. Such a conclusion follows from the fact that among the corruption prevention measures provided for in the LPC, even two of them (implementation of anti-corruption standards of conduct and raising anti-corruption awareness)

⁹⁸ *Ibid.*

⁹⁹ *Ibid.*, 119.

¹⁰⁰ Vasył Topchii et al., “International Anti-Corruption Standards,” *Baltic Journal of Economic Studies* Vol. 7, No. 5 (2021): 282 // <https://doi.org/10.30525/2256-0742/2021-7-5-277-286>.

¹⁰¹ *Ibid.*

¹⁰² *Ibid.*

¹⁰³ M. Johnston (2013), “The great danes: successes and subtleties of corruption control in Denmark,” in: S.T.Q. Jon, ed., *Different Paths to Curbing Corruption* Vol. 23 (Bingley: Emerald Group Publishing Limited, 2013), quoted in Maria Krambia-Kapardis, *supra* note 90, 30.

¹⁰⁴ See A. Mungiu-Pippidi, *Public integrity and trust in the European Union*, (Berlin: European Research Centre for Anti-Corruption and State-Building (ERCAS), Hertie School of Governance, 2015), 31, quoted in Michiel De Vries and Iwona Sobis, “Increasing Transparency is Not always the Panacea: An Overview of Alternative Paths to Curb Corruption in the Public Sector,” *International Journal of Public Sector Management* Vol. 29, No. 3 (2016): 260 // <https://doi.org/10.1108/IJPSM-11-2015-0197>.

together with enforcement of anti-corruption contribute to increasing integrity. On the other hand, we have seen that healthcare institutions apply corruption prevention measures differently, therefore, to increase integrity the previously proposed improvements in the prevention of corruption for the analysed hospitals and other healthcare institutions, as well as the whole anti-corruption policy in healthcare, should additionally be based on the conclusions of this part.

Finally, after examining the good examples of corruption prevention in Denmark and Estonia, it is suggested to strengthen the cooperation of various entities in Lithuania in revealing corrupt acts or identifying risks of corruption, as well as promoting integrity among healthcare sector workers, and to improve the anti-corruption system, which would ensure that it would not be beneficial for the actors of corruption to carry out corrupt activities.

CONCLUSIONS AND RECOMMENDATIONS

1. The review of scientific sources studying the prevention of corruption showed that two of the most important principles for the prevention of corruption are transparency and accountability.
2. The analysis of the main law on the prevention of corruption in Lithuania (LPC) revealed that it enshrines the principle of transparency, but its content is directed more towards the activities of corruption prevention entities rather than potential actors of corruption. Moreover, the principle of accountability can only be derived indirectly from the content of the principle of transparency. Considering this, in future it is recommended to expand the content of the principle of transparency and include the principle of accountability.
3. On the other hand, the identified shortcomings of the LPC, at least in relation to the healthcare system, are minor, since the mentioned principles are consolidated and developed by the Code of Anti-Corruption Conduct adopted by the Ministry of Health, in which their content corresponds to the interpretation of these principles presented in scientific doctrine.
4. The practical application of the mentioned principles is manifested through the implementation of anti-corruption measures. For this reason, after examining how the anti-corruption measures established by the LPC are applied by Lithuanian healthcare institutions, it can be concluded that the examined institutions comply with the requirements of the LPC. However, the extent of the measures applied by them is different, which creates an obstacle to the unified enforcement of corruption prevention. Therefore, it is recommended that the analysed and other institutions consider improvements suggested in the article.
5. Finally, after examining the good examples of corruption prevention in Denmark and Estonia, it is suggested to strengthen the cooperation of various entities in Lithuania in revealing corrupt acts or identifying risks of corruption, as well as promoting integrity among healthcare sector workers, and to improve the anti-corruption system, which would ensure that it would not be beneficial for the actors of corruption to conduct corrupt activities.

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SANTRAUKA

KORUPCIJOS PREVENCIJA SVEIKATOS APSAUGOS SEKTORIUJE: PRINCIPAI, PRIEMONĖS IR JŲ ĮGYVENDINIMAS LIETUVOS SVEIKATOS APSAUGOS SISTEMOJE

Korupcija yra itin neigiamas reiškinys, darantis žalą tiek visuomenei, tiek kiekvienam jos nariui. Neigiamos korupcijos pasekmės ypač ryškios tokiuose jautriuose sektoriuose kaip sveikatos priežiūra, nes aukštas korupcijos lygis pažeidžia tiek pacientų pasitikėjimą sveikatos priežiūros įstaigomis, tiek ir atima galimybę gauti tinkamą medicininę priežiūrą, ypač neturintiems žmonėms. Vis dėlto Lietuvoje būtent sveikatos priežiūros sektorius ne vienerius metus laikomas labiausiai korumpuotu iš visų viešųjų sektorių. Tokia situacija suponavo poreikį atlikti tyrimą, kurio tikslas – taikant aprašomąjį, analitinį, loginį ir principų mokslinius metodus, nustatyti, kaip Lietuvos sveikatos priežiūros sektoriuje įgyvendinami korupcijos prevencijos principai ir priemonės, įtvirtinti Lietuvos Respublikos Korupcijos prevencijos įstatyme.

Tuo tikslu, remiantis moksliniuose šaltiniuose akcentuojamų vienu svarbiausių korupcijos prevencijos principų – skaidrumo ir atskaitomybės – samprata, analizuojama, kiek šių principų, įtvirtintų minėtame įstatyme bei Lietuvos Respublikos Sveikatos ministerijos patvirtintame Antikorupcinio elgesio kodekse, skirtame konkrečiai korupcijos prevencijai sveikatos priežiūros sistemoje, turinys atitinka mokslininkų pateikiamą šių principų sampratą. Be to, vertinama, kiek pasirinktų sveikatos priežiūros įstaigų taikomos korupcijos prevencijos priemonės skatina šių principų įgyvendinimą praktikoje.

Siekiant, kad tyrimas kuo labiau reprezentuotų padėtį visame Lietuvos sveikatos priežiūros sektoriuje, analizei buvo pasirinktos trys Lietuvos respublikinės ligoninės iš skirtingų didžiųjų miestų (Klaipėdos, Kauno ir Šiaulių). Išanalizavus sveikatos priežiūros įstaigų teisės aktus ir viešai pateikiamą informaciją apie taikomas korupcijos prevencijos priemones, nustatyta, kad ligoninės laikosi Korupcijos prevencijos įstatymo reikalavimų, taip pat skiria dėmesį skaidrumo ir atskaitomybės didinimui, tačiau jų taikomų priemonių apimtys skiriasi, kas gali sudaryti kliūtis užtikrinti sėkmingą korupcijos prevenciją Lietuvos sveikatos priežiūros sektoriuje. Tuo tikslu pateikiami pasiūlymai analizuotoms ligoninėms ir kitoms sveikatos priežiūros įstaigoms suvienodinti prevencinių priemonių taikymą, atsižvelgiant į įstatymo reikalavimus bei nustatytus kitų įstaigų geruosius pavyzdžius.

Kartu straipsnyje, taikant lyginamąjį metodą, pristatomi užsienio valstybių sėkmingos kovos su korupcija pavyzdžiai, siūlant jų pritaikymo galimybę Lietuvos sveikatos priežiūros sektoriuje. Pateikiama Danijos, kurioje korupcijos lygis yra žemiausias pasaulyje, bei Estijos, posovietinės valstybės, geopolitiniu ir istoriniu požiūriu artimos Lietuvai, tačiau žymiai sėkmingiau kovojančios su korupcija ir ženkliai sumažinusios korupcijos lygį, įskaitant ir sveikatos priežiūros sistemoje, geroji korupcijos prevencijos praktika. Akcentuojamas sąžiningumo (angl. “integrity”) didinimas, pasireiškiantis antikorupcinių taisyklių tobulinimu bei korupcijos rizikų identifikavimo sistemų kūrimu. Be to, pažymima įvairių subjektų (asmenų ir institucijų) bendradarbiavimo svarba nustatant korupciją arba jos rizikas bei antikorupcinės aplinkos

tobulinimas, siekiant, kad potencialūs korupcijos veikėjai iš savo neteisėtų veiksmų neturėtų jokios naudos.

Kiekviename straipsnio skyriuje nustačius tam tikrus trūkumus teisės aktuose ar užtikrinant tinkamą korupcijos prevenciją, pateikiamos rekomendacijos (pvz., skirtos Korupcijos prevencijos įstatymo tobulinimui, sveikatos priežiūros įstaigų taikomų prevencinių priemonių tinkamesniam įgyvendinimui). Pristatant užsienio valstybių gerųjų korupcijos prevencijos pavyzdžių elementus, kartu vertinamas jų galimas pritaikymas Lietuvos sveikatos priežiūros sektoriuje.

RAKTINIAI ŽODŽIAI

Korupcija sveikatos priežiūros sektoriuje, korupcijos prevencija, korupcijos prevencijos priemonės, skaidrumas, atskaitomybė.