

Value for Money of Health Partnerships: Summary of the COSECSA Oxford Orthopaedic Link Case Study

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Background

This document summarises the Value for Money (VfM) case study of the [COSECSA Oxford Orthopaedic Link \(COOL\)](#), a health partnership between the Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences at the University of Oxford and the College of Surgeons of East Central and Southern Africa (COSECSA).*

The aims of COOL are to increase the:

- **Capacity to manage care** of children and adults with trauma and musculoskeletal impairment (TMSI)
- **Profile** of TMSI treatment needs nationally and globally
- **Capacity of COSECSA** to improve and maintain standards and care

The primary activities of COOL are training for clinical hospital staff in primary trauma care (PTC), surgical short courses in advanced orthopaedics, clinical fellowships in paediatric orthopaedics and research into regional capacity and needs.

The VfM of COOL was assessed through review of project and financial reports and interviews with stakeholders in early 2015; results are presented according to the commonly used '4Es' of VfM (economy, efficiency, effectiveness and equity).†

Economy

The total project budget for COOL is £1,400,000, with £972,850 (69%) reported as spent to date. **Direct costs**, inputs that are directly linked to project activities, account for 88% of COOL spending to date. The largest **cost driver** for COOL is travel costs, accounting for 42% of spend to date.

Spending has been **minimised** through efficient project management and donations of resources and time, with all trainings led by volunteers. **Additional funding** to supplement project activities has included local funding to support additional trainings in PTC and co-funding of the key informant study in Malawi.

Efficiency

- Spending on **project management** accounts for 9% of spending to date
- Spending on **monitoring, learning and evaluation** accounts for 14% of spending to date
- The **cost per health worker trained** varies greatly, from £192 for those trained in PTC (*two day training*) to £5,807 for trainee surgeons completing clinical fellowships (*one to six months*).
- To January 2015, 142 international and 188 local volunteers have provided 1891 days of training
- Total direct spending on volunteers is £121,258, which translates to 12.5% of COOL spending to date and a **cost per volunteer day** of £134.28.

Through cost savings and additional funding COOL has been able to **extend its reach** to five more countries than was initially envisioned and expand the scope of the of the key informant study in Malawi.

Effectiveness

COOL is **on track to achieve all its aims**, with substantial evidence of how the training and research conducted under the project have improved regional **treatment capacity and profile** for TMSI. This includes the training of 545 instructors in PTC who are now able, and many have, delivered the training successfully themselves.

In some countries the project has **catylased sustainable national improvements** in TMSI care through incorporating of TMSI related training in national training curriculums and accreditation for continuing professional development activities. **Additional funding** has been sourced locally and internationally to continue several of the project activities beyond the end of COOL, which is due to complete in early 2016.

Equity

Beneficiaries of the project include the health workers being trained, and the patients receiving improved TMSI care at **rural and urban** hospitals. Due to the disparity in gender in the health workforce, COOL has made a concerted effort to prioritise female applicants for the short courses in orthopaedics and clinical fellowship placements.

* The partnership is supported through the [Health Partnership Scheme](#) (HPS) managed by the Tropical Health and Education Trust (THET) and funded by the United Kingdom Department for International Development (DFID).

† See the Independent Commission for Aid Impact (ICAI) report "ICAI's Approach to Effectiveness and Value for Money" from 2011 for more information on measuring Value for Money, including the definitions of the '4Es' used in this summary.