

2023

**ANALYSIS OF THE
INTERNATIONAL HOSPITAL
COOPERATION PROJECTS
FUNDING WINDOW (APCHI)
FROM THE MINISTRY OF
HEALTH/ CARE DEPARTMENT
(DGOS)**

S Y N T H E S I S



APCHI, 10 YEARS OF INTERNATIONAL COLLABORATIONS

The study analyzing the international hospital projects funding window (APCHI) was carried out between December 2022 and May 2023 to capitalize on the grant process.

A regular evolution of the grant

Between 2011 and 2022, the APCHI system awarded 856 grants for a total budget of **11,732,620 euros**, with a constant increase in applications (except in 2020 due to the COVID crisis). Over the entire period, 408 different projects were funded.

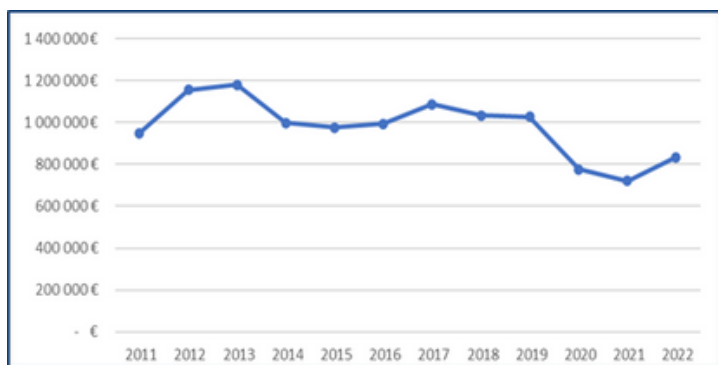


Table 1: Evolution of annual APCHI allocations from the Ministry of Health between 2011 and 2022

Between 2011-2022, the average total amount of projects is 28,756 euros and that of an annual grant is 13,700 euros. University hospitals) received the largest share of allocations (69%), including 19% for the public hospitals of Paris (APHP). The Ile-de-France region is in the lead with the largest cumulative amount of 3,399,420 euros, followed by the Auvergne-Rhône-Alpes region which benefited from 1,616,130 euros.

Projects that are increasingly oriented towards Africa

Over the period studied (2011-2022), 35% of the funding are sent to projects in Africa and 34% in Asia, 10% in North Africa/Middle East and also 10% in South America/Caribbean.

The funding granted to Africa increased significantly from 1,634,230 euros to 2,366,820 euros, while the funding granted to Asia significantly decreased from 2,387,600 euros to 1,442,300 euros between the period 2011-2017 and 2017-2022.

However, the three countries that benefited from the most funding over the period 2011-2022 are **China, Vietnam and Brazil**, with respective cumulative grants of 2,078,600 euros, 866,500 euros and 539,600 euros.

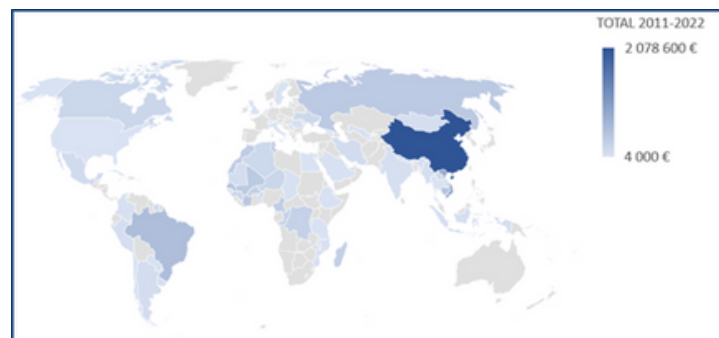


Figure 1: Mapping of cumulative allocation amounts over 2011-2022

Cooperation projects on surgery and other specialized topics are flourishing

Projects related to a **specialized technical field** (hygiene, waste management, information system, e-health and maintenance) are those which have benefited from the most funding since 2017, followed by **surgery projects**, maternal and child health projects and finally projects on non-communicable diseases.

74% of projects declare a collaboration involving other actors (225 projects out of 303 since 2017) and 31 of projects involve other local actors.

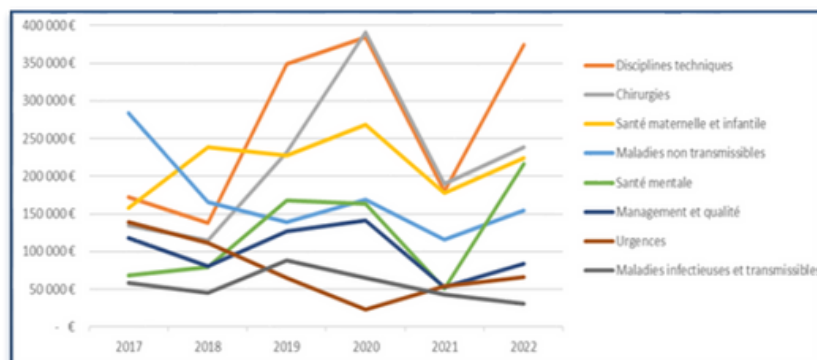


Figure 2: Evolution of the 8 main thematic areas during 2017-2022



APCHI, MOBILIZING FRENCH EXPERTISE

The PIRAMIG system is proposed to monitor and evaluate projects in order to enhance the value of hospital projects and partnerships initiated or generated by this fund.

Towards an interactive visualization of collaboration topics

The French hospitals with expertise in international collaboration are now listed by theme and accessible on an interactive Google map.

While some French hospitals already are specialized in a particular area of expertise, other choose to diversify cooperation themes thanks to APCHI grants.



Figure 3: Hospitals collaborating in the field of radiology at international level

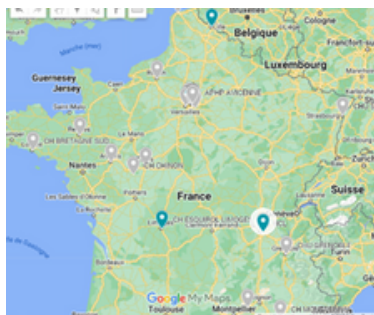


Figure 5: Hospitals collaborating in the mental health field at international level

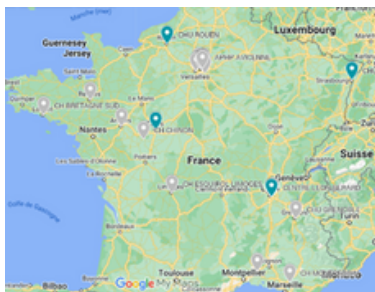


Figure 4: Hospitals collaborating on management and quality assurance at international level

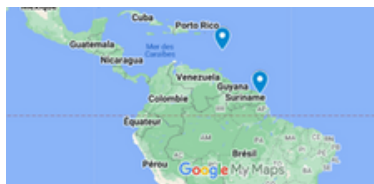


Figure 6: Hospitals of DROM TOM collaborating in the health field at international level

Towards an interactive visualization of active collaborations by country

French hospitals work with a great diversity of countries, which are also listed. The top 10 countries in term of grant total amount are in Africa and Asia.

Some countries benefit from a large number of French institutions, while other countries are in partnership with a very limited number of French hospitals.

The interactive map will facilitate professional networking, at national or regional levels. The effective Monitoring and Evaluation system of APCHI, in line with other existing hospital programs, strengthens this funding window.

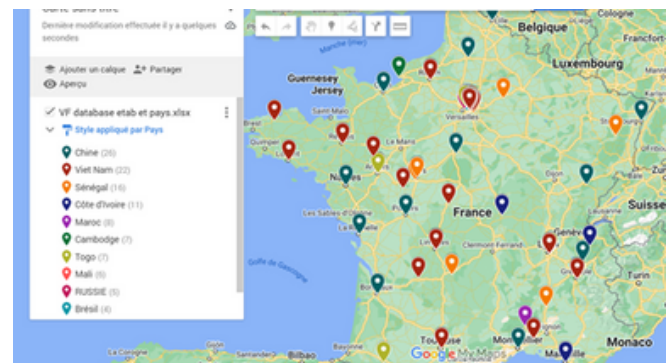


Figure 7: Hospitals granted per country

Doctors and also other professionals

38% of professionals mobilized in French hospitals are doctors, 23% are nurses and 18% have an administrative profile. The least mobilized categories of professionals (less than 3% each) are midwives, engineers, pharmacists and physiotherapists.

Public University-Hospital centers mobilize on average the most men and women/day per project (on average 73 mf/d per project) while intermediary hospitals have 15 mf/d per project. the other types of hospitals mobilize only 4 mf/d per project.



APCHI, CAPITALIZATION AND AN OPERATING MODEL

Areas of improvement have been identified, both in the funding and monitoring processes and in the support provided to stakeholders

Expectations and typologies

Several categories of hospitals have been identified in APCHI:

- **Hospitals where international cooperation is a strategic objective** and results in dedicated staff, time, and a specific organization: several university hospitals and some intermediary hospitals and ESPICs category.
- **Hospitals that have been involved in projects** with dedicated resources in the past but which have reduced these resources due to internal changes and especially redeployments linked to COVID.
- **Hospitals which do not have or have not had for a long time an international relations policy** and which have lost the experience or have never consolidated it. These Intermediary hospitals are the majority.
- **Hospitals in overseas territories** which combine international projects with the need to respond to specific cross-border challenges.

Identified project success factors

The success factors for sustainability and guidelines are:

- **The set-up of a regular bipartite steering committee** for the monitoring, the good continuity, and the response to specific needs, priorities and to measure the progress made.
- **An exploratory study** (mission) which helps stakeholders get to know each other, choose together achievable and realistic directions, collect data and prepare the evaluation.
- **A good mutual knowledge of the respective teams**, especially when the relationship was initiated with partner countries thanks to the training of doctors in France (allowing needs and possibilities for action to be quickly fine-tuned).
- Early engagement of the **diplomatic network of the French Ministry of Foreign Affairs**.
- A project supported by a suited professional network or a structured professional group
- **Inclusive projects** involving multidisciplinary teams, improving cohesion and interest in taking action (beyond the doctors who are often initiating the collaboration).
- **The concomitant consideration of transversal topics** for projects success, namely management, quality and especially maintenance.

- **The expansion to regional and territorial partnerships**, twinning in particular, allowing a more comprehensive action and sometimes an access to other fundings.
- **Support of a health policy** defining the allocated organization and the resources.

Towards an APCHI operating model

Several observations on which to rely to improve APCHI and act sustainably were noted:

- **APCHI is praised for its simplicity**: its general and with few constraints, which makes this funding window a starting point to international hospital cooperation. It is based on the autonomy of the hospital, on the institutional will and the dynamism of its actors and the indications given by the DGOS are accepted without difficulty.
- **Its corollary is the insufficiency of territorial or even regional and interregional cooperation**; this will be an area to prioritize.
- **There is great room for improvement** in many hospitals, including university hospitals when it comes to organizing international relations, resources and recruiting skilled professionals. Indeed, without effective internal support, sustainable and successful projects do not emerge.
- In the current reality of hospital operations, **the question of the time available to professionals for international projects** is a fundamental question for defining the possibilities of acting outside of short or very limited periods of time.
- **Many international collaborations are based on previous requests and knowledge acquired after the stays of doctors trained in France**. This network constitutes the breeding ground for cooperation. Preserving and revitalizing it requires ensuring that medical training in France is still attractive and feasible.
- Finally, **training materials, support and tools for professionals could be developed** and could contribute to improving the competence of the international relations network in hospitals. This would also result in better evaluation of projects and more systematic capitalization.



PROPOSALS FOR APCHI TO BECOME FUNDING WINDOW AND STARTING POINT FOR AN INTERNATIONAL COOPERATION AS PART OF A INTEGRATED LONG-TERM POLICY

Professionalizing the international department of hospitals

International departments of hospital, even if they operate in very different fields, cannot work in silos (humanitarian actions, cooperation activities, responses to foreign calls for tender, etc.) but should be thought of as **a systemic approach** because each concerned field can benefit from the others. In addition, all these various silos have specific access to funds.

Therefore, the recommendations for hospitals should be specified, including all areas and APCHI could become an entry point of new collaborations. France's global health strategy is critical regarding these recommendations. Cooperation actors, informed by the Ministry of the country's policy, could also benefit from training and capitalization tools from past experiences in order to perfect their professionalism and fully play their role as drivers, disseminators, and facilitators in hospitals.

Reinforcing cooperation between actors

Too many organizations in hospitals are not stable enough and long-term experience is missing. A horizontal network led by the University Hospital **International Relations Commission could ensure good dissemination of procedures, experiences, and human resources in hospitals so that professionals save time and get operational quickly in international cooperation sector. University hospitals**, the majority of which currently have experienced professionals, can boost regional hospital cooperation in health, as they already do in training and clinical research for example. But it would be necessary for everyone to have an ad hoc organization.

APCHI could also direct part of its envelope towards specific topics bringing together several hospitals within a region, several university hospitals (for example: PREPS in the field of research). Encouraging cooperation can serve France's global health strategy and indirectly bring together centers of expertise.

Developping long-term approaches to measure impacts

If APCHI becomes a funding window starting point for international cooperation, it is not to encourage short-term projects, but **to initiate successful relationships** which guarantee mutual capitalization. Measures can contribute to achieving this objective (regular hospital cooperation days, use of toolboxes and training platforms, sharing of experiences, thematic webinars, modus operandi for exploratory missions, twinning over time).

Since many projects have been initiated by professionals, in particular doctors trained in France, **developping medical training**, especially short and long-term training, is a lever for the future, and for maintaining a very strong relationship between French professionals and their counterparts in partner countries. Hospital cooperation depends on it. Questioning the conditions under which French professionals can carry out long-term missions is also critical, in particular regarding who they can have their work recognised when coming back to France.

Adapt APCHI funding window to new ambition

This adaptation involves a clarification of the various calls for projects, in particular APCHI and PRPH (Projet Réseaux et Partenariats Hospitaliers) which could benefit from a unique desk. The APCHI specifications can also be improved by:

- Clearly defining the eligibility of projects extended;
- Encouraging the evaluation of hospitals on both sides;
- Choosing topics to match France's strategy in international hospital cooperation;
- Enable clinical research projects as well as European or American benchmarks;
- Defining a percentage of funding for inter-hospital projects.