

LFA TRAINING 2019/20
Getting the best out of the LFA- CT relationship

CASE STUDY 1 – CT Mission

On a recent CT mission to the country, the LFA Team Leader arrived on the afternoon of the second day, thinking that the first day of the mission was when the CT was travelling to the country. The CT requested a half-hour breakfast meeting with the LFA at the start of the mission. There was no agreed agenda, but the LFA expected that the objective of the meeting was to review the mission agenda and meeting objectives. The CT felt frustrated when the LFA could not provide an overview of ongoing deliverables, expected submission dates of key services, and LFA budget absorption since the beginning of the year.

On the second day, the HIV/AIDS meeting was held with the PR and all partners. Following the PR's presentation of latest results, the LFA was first to speak up and analyzed the PR's results and pointed out possible reporting errors in their indicators. The LFA told the PR that they need to speed up hiring vacant positions, otherwise they will never be able to move from B2 to B1.

A discussion ensued related to Global Fund-purchased drugs, which had been stuck in the port for the past six months (unknown to CT). The LFA sent a text message to the FPM during the meeting saying that he had some additional information about this, but as the FPM did not respond, the LFA decided not to speak up at this point. The FPM only saw the message after the meeting.

During the mission, which was rather intense, various partners requested ad hoc meetings with the delegation. The CT kept track of the agenda changes and discussed them at the daily debriefing meetings, but as the LFA was not invited to participate in those, they were not informed at which meetings their presence would be needed, and when and where the new meetings were being scheduled. One of the mix-ups regarding the agenda and logistics occurred on the third day, when the LFA PSM expert attended the meeting with the FPM and LFA Team Leader to meet the national authorities whilst the CT PSM expert went alone to the central medical store.

At the end of the mission, the CT received the LFA invoice for the mission support and was surprised that it did not correspond to the amount of time that individual LFA team members had actually participated in the mission, nor to the LFA team members that the CT had wished (but not requested) would participate in the mission.

By the end of the mission, both the FPM and the LFA Team Leader felt disappointed and frustrated. The CT decided not to rock the boat though, as it had been a tiring mission for all participants. As a result, no feedback was provided to the LFA, but the CT talked later on the way back home that they would have to record their discontent in the PET due in five months' time.

EXERCISE – in your group tables, please complete the below table to respond to the questions:

1. **WHO** should have communicated **WHAT** and **WHEN** to **WHOM**?
2. In your LFA-CT relationship, are there any **best practices** being implemented, which are designed to avoid the communication challenges presented in the scenarios?

3. What other practices can you think of which could help to avoid situations described in the scenarios?

WHO to WHO	WHAT	WHEN

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