

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

## CASE STUDY 2 - DQR

As per the agreed workplan, LFA has carried out a data quality review for all three diseases. However, the assigned Programmatic/M&E LFA expert was substituted at the last minute for another one, without informing the CT.

The list of health facilities to be visited was left up to the LFA to decide; CT did not input. Nevertheless, the CT was surprised to later read in the report that the districts were changed without requesting approval from the GF. It was not known which health facilities were providing which services related to the three diseases. In fact, at the moment of conducting the DQR, it was found that for two of the five selected indicators, only 1 health facility could actually be visited. This meant that the data collected could not be considered representative. For the sample indicator on MDR TB, the health facility visited did not have a GeneXpert machine available, so it was not possible to verify the planned indicator on number of confirmed MDR-TB cases.

During the debriefing with the PR, the PR complained about the CT's slowness in providing recommendations to the PR through formal Performance Letters. As a result, the PR requested the LFA to gain time by presenting to the PR and SRs the findings and recommendations from the DQR so that the implementers could already start addressing the recommendations, which LFA was happy to oblige.

The LFA encountered delays in writing up the deliverable due to the expert having to complete the PUDR for another portfolio under a tight deadline, and in the end LFA had to submit the report two weeks after the deadline agreed with the CT. The final invoice submitted to the GF includes LoE for a Finance Officer, which the CT could not understand.

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

- 1. What are the actions that the different stakeholders should take to address/avoid this type of situation?
- 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?