

LNCT Steering Committee Meeting

07/06/2019

Call participants: Irine Javakhadze, Ganiyu Salau, Alexis Mouro Moyoka Logan Brenzel, Joanna Wisniewska, Sarah Alkenbrack, Grace Chee, Elizabeth Ohadi, Christina Shaw, Leah List

Decision Points:

- LNCT should include all countries identifying vaccine hesitancy as a priority in proposed workshop with the LSHTM.
- LNCT to think through specific products documenting learning from these meetings that can be shared more broadly.
- LNCT to announce general dates (i.e. the month) of CCG calls in advance in the future to raise awareness, perhaps through a LNCT calendar, and reconsider how CCG calls are structured. Perhaps CCG calls should be used as a check up on two country identified priorities.

Discussion Points:

National Health Insurance meeting debrief:

- It could have been useful to send some background reading and additional handouts prior to the meeting.
- Irine- Too often, there is no follow up after a delegation attends a meeting even if the discussion is interesting. LNCT should consider making report out or summarization within the country mandatory
- Ganiyu- Countries should be encouraged to have bilateral engagement more
- LNCT should consider the products to be developed and follow up resulting from this meeting.

Network-wide meeting debrief:

- Overall, the meeting was successful. Countries interacted during the meeting and breaks and came away with new ideas.
- The website session was very valuable and helped participants feel more comfortable using the LNCT virtual platform
- In the future, it may be useful to better structure plenary report outs—perhaps through providing 1-3 slides as a template for report out.
- All members of the delegation were generally engaged with the sessions and enabled good exchange in smaller groups
- Small groups are generally more useful for in-depth discussion, but the plenary is still needed to ensure maximum cross-fertilization of ideas
- Some country pairings could be improved so both countries could benefit to greater degrees (for example, Sudan and Georgia in resource mobilization strategies)
- Countries could use more guidance on how the CCG can be effective liaising with other officials, and how members that attend the LNCT networkwide meeting can be more effective in communicating/exchanging information with CCG members unable to attend
- The site visit was useful, but more time could have been spent to discuss more practical aspects
- The gallery walk could be improved by ensuring every country gets asked questions

Country priorities:

- The top priorities include: Resource mobilization in decentralized health systems (9), Immunization and health insurance (7), Private sector involvement in advocacy and social mobilization (7), forecasting and budgeting for procurement (5) and Managing and preventing vaccine hesitancy (6, including Lao)
- How countries chose priorities may have been informed by the meetings they just attended on National Health Insurance and Immunization and Resource mobilization.
- As LNCT moves forward with these workstreams, it should aim to have concrete products in each workstream.