Rwanda Health Enterprise Architecture (RHEA) Project Conference Call Minutes

# Date and Time

March 7th 2013, 3pm, GMT +2hrs

# Participants

Rhonwyn Cornell (RHC), Chris Seebregts (CS), Linda Taylor (LT), Wayne Naidoo (WN), Dawn Smith (DS), Carl Leitner (CL), Michel Makolo (MM), Tiffany Jager (TJ), Hamish Fraser (HF), Liz Peloso (LP), Luke Duncan (LD),

**Call recording link**

Call Recording File # 27623701

**Agenda**

1.     Updates:

1. ·       SHR/OpenHIM/TS activities - Wayne
2. ·       Client Registry activities - Shaun
3. ·       Provider Registry activities - Carl Leitner
4. ·       OpenMRS/site update – Desire/Wayne
5. ·       MoH activities - Richard / Gilbert / Liz

2.     AOB – Group Communications

***Key points of discussion:***

***Updates:***

*SHR/OPENHIM/TS*

WN – OpenMRS upgrade

* Fixes to the MOH module done and now doing preliminary testing which is going well – will do more next week and will then co-ordinate with MOH team to package whole upgrade for deployment at sites
* Fix to CR POC issues raised 2 weeks ago re: patient messages not being correctly queued – have fixed this and now need to install on site
* The extension to the patient search module is now 80% development now complete and aim to complete and deploy asap.
* Scripts referred to in MM’s report were the monitoring scripts, which was generating a log file which was becoming too large. JHS have modified this already.

*CR update*

* SG, OP and WN discussed design of SHR reconciliation and agreed on an overall architecture for a solution. Have not made much progress this week due to key people being involved with HIMMS Showcase but a development sprint will be planned for this soon.

*PR Update*

* The team has been working on the HPD profile and integrating module with OpenMRS i.e. querying PR from the POC
* Need to consider the XML formats which are not supported so will need an XML gateway that will translate to ALDAP queries
* WN asked CL to add some info to the wiki and can discuss further on next week’s call after reviewing
* The data model is different to the HPD profile so will need to plan these activities carefully
* RHC agreed need to plan deliverables and timelines but we are still waiting for confirmation on scope of work and approved budgets

*Feedback from live sites*

At Musha the system is still not connected to internet

At Ruhunda the system is working in live mode. There were a large no of errors in error queue but this will be addresses by the re-generation of messages and this will be done when fix is implemented on site

The data manager resigned at Ruhunda so only 1 person in the clinic and he is registering people, then using paper forms during clinic, and then doing back-entry of data. LP noted that the repeat registrations should be quick as the barcode can be scanned.

The head of ANC has also requested more training, both for the RHEA modules and other OpenMRS modules. Trainers were supporting people working in the clinic at that time but there is now have a new head of ANC who did the centralized training but not the supported in-clinic training.

***Any Other Business***

*Group Communications*

Following an earlier email thread, DS asked about ways of improving communications, such as use of the wiki more or smaller more focused email threads. RHC asked that any suggestion be sent to her and these will be considered and integtrated.

The next call will be on Thursday 14th March.

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| **Action Items** | **Responsible** | **Due Date** |
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