Rwanda Health Enterprise Architecture (RHEA) Project Conference Call Minutes

# Date and Time

June 27th 2013, 2pm, GMT +2hrs

# Participants

Rhonwyn Cornell (RHC), Carl Fourie( CF), Linda Taylor (LT), Dawn Smith (DS), Shaun Grannis (SG), Lorinne Banister (LB), Carl Leitner (CL), Wayne Naidoo (WN) (ER), Hamish Fraser (HF), Chris Seebregts (CS), Scott Teesdale (ST), Derek Ritz (DR) Luke Duncan (LD), Gilbert Uwayezu (GU)

**Call recording link**

<http://www.conferenceplayback.com/stream/24944690/88624701.mp3>

Call Recording File # 88624701

**Agenda**

* **Team Discussion Points**
	+ In-Country RHIE Implementation Team Update - Dawn/Richard
	+ Implementation Planning - Richard
	+ Anticipated Go-Live Date - Richard
* **AOB**

***Key points of discussion:***

There are two national holidays next week so requested changing the call to Wednesday instead at the same time. Please fill in the Doodle poll by midday tomorrow CAT.

***Implementation Team Update***

* RG will assign individuals to different tasks by end of week and then meet with partners to ensure this is reasonable and matches budget and availability.
* Aim to go over all task allocation on next call
* RHC asked if there is enough time to gather baseline data at each site prior to implementation?
* DS said they believed there will be enough time for that based on discussion with Caricia.
* DR asked about changes to forms and change to workflows – have we agreed on these? Are we confident these are stable enough for implementation? Seems like a very short time to collect baseline data – what is the research question?
* DS – Some of these activities can happen in parallel and will be prioritized.
* RG – evaluation will start this quarter – take about 1,5 months and will then detail research questions and methodology and then will start data collection. Need sites to have been live for at least 6 months to collect post-implementation data. Evaluation aims to be completed in about a year. InSTEDD and RG will design the elaborated research questions in detail.
* DR – it will be a challenge to do baseline analysis if questions not defined by August.
* HF – Hoping to have some additional funding for eHealth research in Rwanda - may start Aug/Sept.
* RG – grant for research into OpenMRS scale-up has been approved and should complement the RHEA evaluation work
* LB asked if this will use resources (people) planned for RHEA work?
* RG – just myself as co-PI with Hamish

***Anticipated start date for Go-Live = week of August 12th***

***Any Other Business***

*CR data cleaning*

* CF asked about cleaning of data in the CR – is there an update?
* WN – had a call with RG and agreed the need to clean up the Ubudehe data set and reduce in size down to those with accurate data only
* Re the gender mismatch we will be able to validate issues when we get access to NID data

Will be scheduling a call with the contact that RG has put us in contact with

* SG – if reduce no of records would do that first before dealing gender mis-match problem
* WN – will not necessarily reduce records in the CR but will reduce size of data set loaded into site implementations
* SG – Need to discuss strategy going forward for CR issues
* DR – Is there any progress or plans to increase the number of clients at clinics presenting with NID cards?
* RG – Have communicated this to the CHWs but still need to see if this has had any impact. Will find a way of measuring this.
* DR – what about posters as discussed previously?
* RG – Have discussed with health centre managers re: risk of discouraging women to come to the clinic and they are aware

*RapidSMS*

* DR asked about the progress on the RapidSMS integration?
* WN – contract has been approved by RG and MOH and JHS re-engaging with Pivot and development timelines should be agreed by early next week to connect to latest version of RapidSMS.
* DR – are there any other message types we could opportunistically “harvest” for our SHR database?
* DS – we can take a look into this and see if there are any that are useful and will share this with team
* RG –thought that all messages were being captured
* WN – currently capturing risk messages as per requirements

*Terminology Licensing*

* CF asked if we have all the required licensing for the terminologies that we are currently using.
* RG we are not using any that require licensing - not aware of any that we need to pay a licence fee.

*Recruitmen*t

* RG – we are recruiting people in the MOH to manage the terminologies and the CR

The call ended at 3 pm.

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| **Action Items** | **Responsible** | **Due Date** |
| Please fill in the Doodle poll by midday tomorrow CAT. | ALL | 12PM CAT Friday 28 |
| Will investigate possible other message types from RapidSMS that may be useful | DS |  |
| Circulate RapidSMS info from wiki | WN |  |
| Discuss activities and resources with partners  | RG  |  |