Rwanda Health Information Exchange (RHIE) Project Conference Call Minutes

# Date and Time

5th September 2013, 2pm CAT

# Participants

Dawn Smith (DS), Richard Gakuba (RG), Chris Seebregts (CS), Carl Fourie (CF), Linda Taylor (LT), Lorinne Banister (LB), Paul Biondich (PB), Wayne Naidoo (WN), Ryan Crichton (RC), Carl Leitner (CL), Shaun Grannis (SG)

**Call recording no: 82474201**

**RHIE Team Call Agenda:**

* **Project status update - Dr. Richard/Dawn/Wayne**
	+ New site (Nyagasambu HC) deployment update - Wayne/Emmanuel
	+ Elbow support updates - Emmanuel/Michel/Dawn
	+ HIE Transaction Summary - Wayne
* **2014 Project Plan Review - Dr. Richard/Dawn**
	+ *Please make time to comment on the documents and provide input on where you could contribute to specific themes and activities.*
	+ [**2014 Project Plan Discussion**](https://docs.google.com/document/d/1Xj3RYH8fONpRDIJmU02qo5dKIUqZsQ_Ku2Iol2esh0s/edit?usp=sharing)**-**The high-level goals in this document were outlined by Dr. Richard. The blue text is the outcome of discussions which elicited more detail about the outputs of each of the high-level goals and their proposed quarters of work in 2014.
	+ [**RHIE 2014 Definitions of Success**](https://docs.google.com/spreadsheet/ccc?key=0AnIsCIjgSFVzdE8xOE16dEpJRk1ZUHdObExLLWFsaXc&usp=sharing) - The high-level goals taken from *2014 Project Plan Discussion* were put into this spreadsheet. The "[DRAFT] Themes-activities-deliverables" tab identifies each theme which we broke down into deliverables, activities, assigned durations for work completion, and the team members that could ideally contribute to each activity.
	+ [**RHIE 2014 Project Plan: Quarter 1**](https://docs.google.com/document/d/1gMmby_KfksGRxQcVPjSWqiuVAw7fOWfRhwwFVLuY9JM/edit?usp=sharing) - This document describes in more detail the specific theme and activities proposed for Quarter 1 along with the envisaged function of each partner.
* **AOB**

***Key points of discussion:***

**Project status update**

* MOH and RHEA 1.9 OpenMRS has been upgraded and implemented on site – we now just need to test connection to HIE and currently the internet connectivity is not good. ER is working with ISP teams sent to the site to assist and then we can finalise this task.
* The elbow support: The 2 contractors cannot help any longer so the schedule for this has been adjusted and team are looking to hire replacements. Will be completed hopefully before end of September but otherwise by early October.

**HIE Transaction Summary**

* Gishari and Rwamangana– have logged 23 and x transactions from 2 sites and 100% successfully processed by HIE
* 99 transactions form Karange 0- 85% processed successfully. Of the 14 transactions that failed these were result of an invalid provider account – so a simple problem to fix
* Avega – over 700 trans over last 3 weeks – only 1% processed – reason for failures (messages not persisting) is that the Client ID not correctly set for the – have a fix in place to remedy this
* CF – Can we pre-empt or only fix reactively
* WN – Problem with PR IDs is education of clinicians on site via elbow support – For CR domain issues we can update deployment manuals to minimize this happening again
* Around 16 providers at Avega - WN thinks may be the back-entered data – over half of 732 were new patient registrations – Are not pre-loading CR data anymore so there will be new registrations
* PB – May be useful to see how well these records line up with the OpenEMPI
* PB summarised: 7 sites have been implemented and we are ahead of schedule. Regarding the HIE transactions there are specific issues within some sites where we can make some changes to make this better, but generally there is good traffic now coming through.

**2014 Project Plan Review - Dr. Richard/Dawn**

* DS asked if there are any questions relating to the documents sent out last week.
* PB may have some additional capacity to provide extra technical resources if needed – i.e. Suranga has expressed interest in remaining involved in this project. CF asked about what sort of allocation of time could we expect? PB thinks between 20-50% of his time possibly but will have to confirm. CF suggested keep him as supporting resource and not assign to critical path activities for now
* PB asked about relative prioritization from RG. RG said direction will be clearer after tomorrow’s call.

***Any Other Business***

The call ended at 2.40 pm. The next call will be on Thursday 12th September.