

Project Status Report as at 26-11-2012

Project: RHEA

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1. Project Status

| Green | Orange | Red |
|---|---|---|
| <i>Project expected to deliver agreed scope on time and within budget</i> | <i>Project expected to deliver at least 80% of agreed scope, with less than 10% overrun on time and/or budget</i> | <i>Project in danger of delivering less than 80% of scope, and/or project time or schedule overruns expected to be greater than 10%</i> |
| | ✓ | |

2. Project general update.

- The project is behind schedule – please see project plan, classic report and information report for activity level detail.
- The RHEA partners have received feedback on the 2nd draft of the RHEA YR2013 workplan and budget. The MoH have requested that we shrink the budget to \$500-600k for Track 1 activities. We are working on the 3rd draft of the workplan and budget that meets this request.
- The infrastructure site assessments have been delayed and their timing being re-evaluated by the MoH. From previous reviews the team are already aware that the maternity units at many of the health centres are not connected to the centre’s LAN and there are no computers in the maternity units. Additional information needs to be gathered about the gaps in infrastructure/hardware and the condition of these in order to address these issues before the system is rolled out to other sites. Jembi is concerned that delaying the site assessments will mean that there is not sufficient time for the MoH to procure missing equipment and fix issues. These concerns have been raise with the MoH who are responsible for the sire assessments and improvements and will ultimately make the decision as to when the assessments take place.
- The in-clinic support by the RHEA team at Ruhunda and Musha has been completed.
- Updates to the OpenMRS 1.6.5 currently deployed at Ruhunda and Musha have still not been deployed. The Jembi team is waiting on the MoH go ahead in order to do this. This delayed timeline is related to infrastructure issues on site.
- For the short term Jembi will be using the existing transaction console reporting page this will be updated on the Wiki and send out with the status report. The transaction report can be found at <https://jembiprojects.jira.com/wiki/display/RHEAPILOT/OpenHIM+Weekly+Transaction+Summary>

3. Progress

3.1. Tasks Completed

- Six week In-clinic support at Musha and Ruhunda period has finished.

3.2. Tasks currently underway/planned for the next week

- Upgrading of all RHEA modules developed by Jembi to OpenMRS 1.9
- Implementation of Security Fixes and Backup Scripts
- Requirements Gathering for Reporting functionality to be developed for Track 1
- Research and definition of our end-to-end development to deployment processes
- Gathering and Review of NDC Procedures
- Review existing help desk setup and process with MoH and work with them to define the help desk process for RHEA with an implementation plan.
- Testing of RapidSMS on the Production Server.
- Moving all RHEA OpenMRS modules developed by Jembi to GitHub (this includes adding the OMPL License info)
- The MoH and Jembi are organising an evaluation visit to the Ruhunda and Musha sites. This visit is due to take place towards the end of this week/beginning of next week.

4. Issues

- Due to poor Internet connectivity at Ruhunda and no Internet connectivity at Musha, our team has not been able to rollout the updates to these two sites. This activity is currently on hold until Gilbert and his team has resolved this.
- Delayed site infrastructure assessments reduce timeframe for procurement and fixing of infrastructure and hardware. As this is a MoH task final decision on when these take place sits with the MoH.

5. Project Risks and Concerns

- The RHEA YR2013 workplan and budget have still not been agreed. This is negatively impacting on the projects delivery against current deadlines and will have a knock-on effect with the project in the coming year. For details see project plan and information report.
- The team is aware that the majority of sites do not have sufficient/working infrastructure and hardware for the implementation of the system (particularly the health centre maternity units). If sufficient time is not given for site infrastructure upgrades/improvements the team will not be able to deploy the system according to the current time frame.

6. Project Change Requests

- The Jembi team is in the process of gathering the requirements for the basic OpenMRS reports requested by clinicians.
- Requirements for additional barcode functionality have been developed and shared with the MoH who are responsible for the development of the additional barcode functionality.
- Features and Fixes included in Update to be rolled out to Musha and Ruhunda
 - **Scheduling:** Created a fix to the scheduler class to enable it to pick up messages (Patients data to be sent to the Client Registry and Encounter data to be sent to the Shared Health Record) that had been stored in the processing queue due to connectivity issues and have these messages resent to the Interoperability Layer for processing.

- **Parsing Encounter Observations:** Implemented changes to the message parser to ensure that incoming encounter messages from the Shared health record are parsed with the correct set of observations.
- **Parsing Full Patient Demographics:** Corrected the message structure in the parser to be able to hold the parent's names in the outgoing message to the client registry, as well as properly render the cell value on incoming messages from the client registry.
- **Primary Care (Registration) Module:** For incoming results generated from queries to the client registry made additions to allow the full set of patient demographic information to be displayed and auto populated in the appropriate fields when creating a local record for a patient from CR results.
- **ANC Forms:** Added a fix to a bug on the forms that was causing date-based calculations to fail when using the French version of the forms.