

Project Status Report as at 10-12-2012

Project: RHEA

Prepared by: Rhonwyn Cornell

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 rapidly getting more and more behind schedule as a result of delays in decision making around budget and workplan for YR2013 – please see project plan, classic report and information report for activity level detail.
- Partners have submitted 3rd draft workplans and budgets to Richard who will be having separate discussions with each partner regarding their 3rd drafts. It is important to note that in order to reduce budget to the \$500/600k make the team has had to make significant cuts to the YR2013 workplan, including massive reductions in Jembi's involvement in the health facility rollout. As a result responsibility for the rollout will have to be assumed by other teams (MoH).
- Infrastructure site assessments have begun and will run for the rest of this week.
- The transaction report can be found at <https://jembiprojects.jira.com/wiki/display/RHEAPILOT/OpenHIM+Weekly+Transaction+Summary>
- The Jembi offices in both South African and Rwanda will be closed between the 21st Dec and 2nd January. For urgent issues please email and follow instructions laid out in individual's out of office messages.
- Both Wayne and Ryan are out of the office until Jan 2013. Technical activities continue within Jembi but this will impact on design and planning activities.
- Jembi has been awarded a tender by the Rwandan MoH to develop a health insurance information system and the team are beginning work on this this month.

3. Progress

3.1. Tasks Completed

- A post implementation site assessment was carried out at Musha on the 7/12/12 and a report will be available early next week.
- YR2013 draft 3 workplans and budgets were prepared and submitted to Richard for review.

3.2. Tasks currently underway/planned for the next week

- Implementation of Security Fixes and Backup Scripts for CR and FR
- Requirements Gathering for Reporting functionality to be developed for Track 1
- Research and definition of our end-to-end development to deployment processes
- 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)
- MoH site infrastructure assessments (supported by Jembi) are taking place between the 10th and 14th Dec.

4. Issues

- Updates at Ruhunda and Musha have still not happened. We are waiting for the go ahead from the MoH team before deploying these updates.
- Decisions about M&E indicators have still not been made and the delays will have a roll-on effect with future M&E work.

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 has been informed that MoH funding for the data entry personnel at the health centres ends in June 2013 and these posts will no longer exist this is problematic as the RHEA team have been structuring first tier support around these posts. These plans are being revised.
- The quality of infrastructure at sites is low and creates network issues which have a negative impact on the systems response times. While addressing this issues lies beyond the RHEA team it is important to note as it impacts on the uptake of the system.

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.