

## Project Status Report as at 15-01-2013

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.

- Track 1 partners scope of work and budget if still to be formally approved by Richard. Until this has happened partners can't submit their workplans and budgets to Cardno.
- Jembi has been asked to hand over the health facility level implementation to the MoH. This impact on the current implementation timeline although the extent of the delay is unknown. The MoH have sight for the existing implementation plan and are reviewing this in light of their financial and human resource restrictions. Jembi will be working closely with the MoH to ensure that the handover of these responsibilities goes as smoothly as possible.
- There are problems with the messages coming in to the RHIE from the health centres. The Jembi and MoH technical teams are looking into the causes of these issues and will work together to address them.
- The RHEA working group are in the process of identifying potential Track 2 work packages to discuss as a group. Jembi is coordinating these discussions.

The current up-to-date project plan can be viewed at

<https://dl.dropbox.com/u/63883595/130114%20RHIE%20Project%20Plan%20Track%201/index.html>

### 3. Progress

#### 3.1. Tasks Completed

- Jembi has completed the upgrade and testing of the RHEA OpenMRS modules to version 1.9

#### 3.2. Tasks currently underway/planned for the next week

- Rollout of OpenMRS 1.6.5 updates to Ruhunda and Musha. Jembi is still waiting for the go ahead from the MoH to deploy these updates. The MoH will give Jembi the go ahead once

the internet connectivity issues at these sites have been addresses. Internet connectivity at site is critical to deployment of the updates as without it it is not possible to test the updates when they are deployed.

- Submission of Track 1 YR2013 workplans and budgets to Cardno for approval.
- Further development of Track 2 workplans and budgets
- Discussions with MoH regarding SOW and partner roles in RHEA project M&E

#### **4. Issues**

- While the registries that are housed on the virtual servers at the NDC are covered by the NDC server back-up process the registries (client registry and share health record) house on the MoH servers on the racks at the NDC are currently not being backed-up. Jembi has been negotiating getting access to a back-up server at the MoH for a few months but little progress seems to be being made. We continue to follow up with the MoU but want the team to be aware of this gap and it's potential negative impact on the sustainability of the project.
- Delays in the development of the M&E plan have delayed the collection of baseline data to a point in which it will be difficult to gather required data before the rollout to the remaining sites according to the Dec 2012 timeline. If the implementation timeline shifts as the MoH assume responsibility for the health facility implementation it may still be possible to gather baseline data.

#### **5. Project Risks and Concerns**

- With all the individual workplan and budget negotiations partners have not been kept abreast of the changes to other organisations SOW and the potential impact of these on their own work. This could lead to gaps in the project when the pieces are finally put back together. Jembi have asked partners to share their agreed workplans with them so that they can be compiled back into a single project and we are waiting on responses.
- Handover and planning for the MoH assumption of health facility implementation responsibilities will take time and may impact on timelines as laid out in the project plan from Dec 2012.