

Project Status Report as at 30-01-2013

Project: RHEA

Prepared by: Rhonwyn Cornell and Wayne Naidoo

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 have been approved by Paul and Richard and have been submitted to Cardno for contracting.
- During the last RHEA working Group call it was decided that RHEA partner organisations will have individual discussion/negotiations with Richard regarding Track 2 activities. Each organisation will set up their own calls/meetings with Richard and submit agreed workplans and budgets to Cardno.
- With the plan for the handover of the health facility implementation still being discussed between Jembi and the MoH it is clear that the timeline for health facility implementation presented at the Sept RHEA meeting that had implementation starting at the beginning of Feb 2013 will not be possible. Revised dates for implementation will be decided by the MoH when they develop their project plan for implementation.

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

<https://dl.dropbox.com/u/63883595/130130%20RHIE%20Project%20Plan%20Track%201/index.html>

3. Progress

3.1. Tasks Completed

- Jembi has completed development work on upgrading the RHEA modules to be compatible with OpenMRS version 1.9. We have also completed an initial phase of integration testing on the collaborative Jembi-MoH Testing server setup by Jembi In-country for all joint-OpenMRS development. We are currently waiting on the MoH for a few outstanding issues to be resolved with the modules they are responsible for developing before we can run a final joint integration-testing sprint. The MoH team is currently installing their modules onto

the collaborative in-country testing server and will let us know when they are ready to start testing.

- Initial meeting with MoH team regards monitoring and management of the HIE implementation, further training and mentorship structure and content. Further meetings will be held on a weekly basis.

3.2. Tasks currently underway/planned for the next week

- Implementation and testing of basic auth security update to provider registry. This has been tested within our Amazon EC2 Testing Environment and has been deployed to the NDC environment. All short-term security fixes that have been implemented are detailed in the Security Enhancement plan shared with the RHEA team and this includes the status of each recommendation (whether its being implemented or not).
- Rollout of OpenMRS 1.6.5 updates to Ruhunda and Musha is planned for the 31st January 2013
- Further development of Track 2 workplans and budgets
- Discussions with MoH regarding SOW and partner roles in RHEA project M&E

4. Issues

- Previously due to poor Internet connectivity at Ruhunda and no Internet connectivity at Musha, our team had not been able to rollout the updates to these two sites. However we sent a team to both sites on the week starting the 14th of January to evaluate the infrastructure status as well as the system usage. As part of the evaluation, we also installed scripts to automatically log the status of the Internet periodically so that we could have more empirical data to present to the MoH and RHEA team regarding the availability and quality of the Internet at the sites. A detailed analysis of this was presented during last weeks RHEA Project call and summary of the Internet Logs.
 - At Ruhunda, the Internet is working and the system is being actively used. The OpenMRS transaction logs indicate the Internet is intermittent which causes the system to automatically switch between online and offline mode. Between 8am and 4pm, the Internet went down for at most 20 minutes from the data gathered so far. For the period between the 1st and 8th of January 2013, no transactions were sent from Ruhunda as a result of the server shutting down (for reasons unknown) and not automatically starting up. During this period, the clinic staff reverted to using paper forms. The IT manager was able to get the server up and running again. Similarly on the 21st of January, the server went down (for reasons unknown at this stage) and during this time, the clinic staff chose to use paper forms and only realized that the server was down and needed to be restarted when they tried to use the system the next day. The challenge of poor communication between staff within the clinic as well as no clear direction on how to report issues to the MoH as being raised on numerous calls and meetings with Gilbert and the MoH as well as on the RHEA calls. In addition to the support Jembi has planned to provide to the MoH team to define these processes, we plan to now dedicate technical resources to monitor both the HIE Registries in the NDC and the point of care implementations for the foreseeable future while the MoH prepare to take over. We did identify a problem with the configuration of Mutuelle and Rama ID's in the OpenMRS implementation. According to the logs, it seems that they are using the wrong identifier formats for Mutuelle and Rama. In addition to fixing these, we will also need to re-evaluate how we handle ID's in the rest urls as this may become problematic in the future.

- At Musha, the Internet is back online following a replacement of a router by the MoH on the 11th of Jan 2013. The team attempted to install the updates developed last year, but had an issue with the scheduler processing a large number of queued messages (4791). This issue has now been fixed and is being tested in our Testing Environment and we plan to go to sites this week for the installation of the updates.
- 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) housed 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 MoH but want the team to be aware of this gap and its 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 are impacting on timelines as laid out in the project plan from 2012.