

Date and Time

July 12th 2012, 2pm TO 3:30pm, GMT +2hrs

Participants

- Rhonwyn Cornell (RhC), Hannes Venter (HV), Lorinne Banister (LB), Liz Peloso (LP), Paul Biondich (PB), Mead Walker (MW), Ryan Crichton (RC), Carl Leitner (CL), Brooke Buchanan (BB), Emmanuel Rugomboka (ER), Dykki Settle (DS), Wayne Naidoo (WN), Shaun Granis (SG), Odysseas (OP), Luke Duncan (LD), Tiffany, Carl Fourie (CF)

Agenda

1. Project progress – RhC
 - Facility Registry update – EJ
 - Provider Registry update – DS
 - Client Registry update – SG
 - Terminology Service - RhC
 - Shared Health Record update– WN
 - Interoperability layer update– RC
 - OpenMRS update – WN/RhC
2. Testing
3. Any other business

Minutes Call Recording

The link for audio streaming is below.

Recordings are deleted after 30 days.

Key points of discussion:

Overall project

- Technical development is still on track
- Still some ambiguity with integration with PMTCT and Lab modules. Jembi working with MoH to plan and ensure there are resources available to do this.
- Training set to start with TS next week with FR and PR training set for the week of the 13th Aug, CR week of 27th Aug and OpenHIM first week of Sept.
- Client registry delayed delivery until 14th Sept means that we won't have a functioning HIE until the week of the 19th Sept.

Facility Registry

- Got one or 2 more development items related to how things look and feel, so nothing big
- Training call coming up next week
- Valeria will be carrying out training in country

Provider Registry

- No call yesterday
- Making steady progress. The user interface has not been polished and buffed. Have added some simple reports.
- The Amazon EC2 is up and should be a full functional site
- Web services; request for new web service to be able to look up the national ID from the EP ID this has been done. Also added some self documentation.
- Waiting for hosted solution up and running in Rwanda before uploading HIRS into the system.
- Q: what are the motivation behind using HL7 messaging? Original user requirements given.
- Q: should we consider HL7 standard now and look at mapping the PR close to IHE profiles or is that something we should look at now for the interoperability layer? HL7 option chosen a long time back. Open to looking at other options if there is something better
- Request to table the point of HL7 message format on next PR call
- PR HL7 messages that will be sent for providers are not in the current phase. They have been scoped out and we only need very basic web services dealing with identifiers of providers at this stage
- Request to add this to agenda for RHEA meeting in Sept

Client Registry

- 2 phases of activity; OpenMRS workflow and CR for OpenEMPI to support additional fields.
- Ongoing analysis of Ubudehe database to understand how it can be queried
- Finished modifying data model and now looking at file loader. Currently making changes to web services to suit workflow
- Trying to comply to schedule as much as possible.
- Hoping to make a release of OpenEMPI next week. Will go into EC2 cloud instance and will include new data model and file loader. Next release will include the enhancements being made to the matching algorithm to satisfy RHEA requirements
- Decision taken on last CR call about how to best use data returned from the CR and present to the user at the POC. The projected workflow and UI changes have been approved by MoH (GU). Team will work on building this out in the next 2 weeks.
- Q: when will we have a service on OpenEMPI that we will be able to test the interoperability layer against? Project plan is accurate. Not before Sept 1st but should be before Sept 15th. Using current model on EC2 instance that has some components needed for testing as a temporary measure.
- Q: what is the impact of the newly agreed workflows on the OpenMRS training on the system itself? In terms of development plan it's will take about 2 weeks to build out. MoH

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have actually been meaning to overhaul the screen that we need to change so this is actually in line with their planning. It does add a fair amount of complexity to what does exist.

- Q: What does introducing new screens mean to those using the system? Lets take off line
- OpenMRS ANC training set to start 20th Aug. The CR workflow will be included in this. Training materials haven't been developed yet. Development of POC is set to be finished by the 13th Aug. A train the trainer workshop will then be held in the week of the 13th Aug so they are prepared for delivering training from the 20th Aug.

Terminology Service

- 4 code sets that weren't originally on list and we're working on accessing these by Sept. They aren't on the critical path.
- TS training starts Monday.
- Q: email about concerns about licensing? What about ownership long term?
- LP been working on accessing code sets with RG this week. MoH will get proper licenses. Wasn't aware HV was doing this but LP and RG will be pursuing the licenses, they need to get these not Jembi.
- Loading codes set in these areas can be a learning tool for MoH staff.
- Do we have correct medical knowledge within the MoH staff being trained? RG is aggressively looking for medical person to work on terminology management but hasn't found anyone yet. Tony (Apelon) however says that not having a medical person at the training won't be a problem.

SHR, OpenHIM components

- Developer team has continued testing from POC to SHR
- A RHEA workflow testing documented has been created and is on the Wiki on the RHEA transactions page.

OpenMRS

- IT skills training going well
- Finalizing when OpenMRS training will take place and will have more updates next week.

Testing

- With the revised timeline we are not going to have time to run testing on the full HIE workflow before the system needs to putting it out into the field in Sept. How do we mitigate this issues?
- Current approach is to get access to final deployment environment as soon as possible. The FR, TS, PR are all relatively complete and testing is happening on these services in the cloud. The challenge comes in with the CR and the impact this has on our ability to do full integration testing, all components, before turning on the point of care application and sending real data to the SHR. Current project plan only has a week to do this.
- If we waited for OpenMRS to collect data to be clinicians we won't have any for a few months after turning on the system as people have to be trained etc. We can use the

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applications without necessarily turning the interfaces on just let them queue and you can pull real messages out of the queue for testing end to end. This is good but doesn't really address above concern that is that we've only got a week for full integration testing once all the components are complete and running in final deployment environment.

- The initial deployment is going to be our integration test. So we should try to position the matter realistically – let people know there are going to be issues. Getting the POC working before we start storing the data is a good idea.
- We need to be nimble and flexible about what the testing plan will be so that it responds to where we are with development. Communicating where we are so that we can coordinate testing.
- Expectations in terms of timelines – not much integration testing and this is something the MoH needs to be aware of. Can we expand the testing plan to make it a more detailed testing dashboard? We are currently using Trello for the granular details. Team please review and comment on testing document. Jembi have added Kari to team.
- MoH (RG) Skyping with LP and said that their expectations will be appropriate come end Sept.
- Need to make sure testing has a clear plan which is shared and agreed.

AOB

NDC

- Update on NDC access? MoH has not signed the contract. RG is actively looking for a temporary solution and RhC is following up with RG and will let group know as soon as I have more info.
- Does this constitute a change to the critical path on the project plan? If I don't have an answer by Friday yes.
- Most systems are on EC2 instances and will just be able to be migrated when deployment environment is ready. However it only has test data as can't host actual data for confidentiality reasons.
- Through LP, RG says should sign contracts with NDC next week. Recommend we don't bank on that as there are longstanding and ongoing issues. This is a politically charged area so lets aggressively pursue an alternative. (ie. Jembi purchasing space at NDC as a temp measure).
- Issue with accessing data is not that it's outside of MoH control but outside of the country. RhC to verify with RG.

Admin

- Not had responses to training schedule and requirements. Please get these to me asap as we need to organize training venues and equipment and can't do this if we don't know what your needs are.
- Have sent out formal notification for the Sept RHEA meeting. One of the things on it is again a request for input around sessions and topics – please get those to me before 10th Aug.
- Q: Do we have flexibility on the Mon-Thurs? No that's set based on Doodle poll identifying availability.

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- Lets put objectives and sessions etc up on Wiki and lets get input.
- The management team will be having a call about RHEA going forward in the next 2 weeks.
- RhC and LB to talk about inviting reps from other countries offline.

Next Call

Next call will be on Thursday 2nd Aug at 2pm CAT (12pm GMT).

Action Items

Action Items THIS CALL	Responsible	Due Date
Review and comment on test plan	All	
Make session and topic suggestions for the RHEA conference on the Wiki	All	
Confirm issue with accessing data with RG	RhC	
Send RhC outstanding training schedules and requirements	All	
RhC and LB to talk about inviting reps from other countries offline.	RhC/LB	