

TELEHEALTH SYSTEM DEPENDENCY REGISTER

1. Technical Dependencies

Dependency Area	Description	Impact if missing	Dependency Owner
D1. Single Sign-On (SSO)	Telehealth platform depends on UNILAG ICT's student portal authentication and identity management.	Students cannot log in; system unusable.	UNILAG ICT Dept.
D2. Network & Bandwidth Infrastructure	Stable WiFi, fiber backbone, and internet access required for video consultations.	Dropped calls, poor video quality, system failure.	ICT Network Team, Vendors
D3. Server Hosting / Cloud Environment	Telehealth platform must be hosted on secure on-premise server or cloud environment.	System downtime, loss of data, security issues.	ICT Infrastructure Team
D4. Device Compatibility	System must work across Android, iOS, laptops, clinic desktops.	Users unable to access platform properly.	Telehealth Vendor
D5. EMR-lite Integration	Consultation records require integration with central student health profile.	Duplicate data, incomplete patient history.	Vendor + Medical Centre
D6. Notification System	SMS/email notifications depend on integration with messaging gateways.	Students miss appointment reminders → low usage.	ICT + SMS Gateway Provider
D7. Video/Voice API Integration	Real-time consultations require WebRTC or similar telemedicine API.	Consultations cannot take place.	Vendor

2. Operational Dependencies

Dependency Area	Description	Impact if missing	Owner
D8. Medical Staff Availability	Doctors must be available for video/audio consultations and triage review.	Appointments unfulfilled → system loses trust.	Medical Centre Management
D9. Training for Medical Staff	Staff need training on EMR, dashboard, triage tools.	Misuse, data errors, poor patient experience.	HR + Vendor
D10. Helpdesk & Support Team	In-app support depends on dedicated operations team.	Users cannot resolve issues → abandonment.	ICT Support Unit
D11. Triage Guidelines	Triage workflow requires clinical protocols approved by medical board.	Incorrect triage → medical risk.	Medical Centre
D12. Awareness Campaign	Student usage depends on orientation, flyers, portal banners, etc.	Low adoption → telehealth underutilized.	Student Affairs + Comms Unit
D13. Referral Workflow	To-be digital referral requires CMUL specialists to participate.	Referrals break down → incomplete care.	CMUL Clinic

3. Resource Dependencies

Dependency Area	Description	Impact if missing	Owner
D14. Budget Approval	Funding required for licensing, infrastructure, awareness, and training.	Project stalls or becomes underdeveloped.	University Management
D15. Human Resources	A dedicated project team required (BA, developer, UX, trainer).	Poor implementation quality.	PMO / ICT
D16. Telehealth Vendor	System features depend on vendor capacity and delivery timeline.	Delays, incomplete features, poor support.	Procurement + ICT

4. External Dependencies

Dependency Area	Description	Impact if missing	Owner
D17. Telecom Providers	Affordable data/internet packages for students.	Students unable to use telehealth regularly.	University Management + Telco Partners
D18. SMS/Email Gateway Providers	Notification system depends on 3rd-party providers.	Reminders fail → missed appointments.	ICT Team
D19. Power Supply	Medical centre + servers require stable electricity & backup.	System downtime, device failures.	UNILAG Facilities Unit

5. Compliance & Regulatory Dependencies

Dependency Area	Description	Impact if Missing	Owner
D20. NDPR Compliance	Platform must follow Nigerian Data Protection Regulation.	Legal risk, fines, project shutdown.	Legal Unit + ICT
D21. Medical Ethics & Clinical Standards	Triage + consultation must follow NMCN and MDCN guidelines.	Medical malpractice risk.	Medical Centre
D22. Data Retention Policies	EMR & telehealth records require defined retention guidelines.	Legal non-compliance.	Clinic Admin + Legal
D23. Accessibility Standards	Platform must meet accessibility standards for disabled students.	Exclusion of vulnerable groups.	ICT + Vendor

6. Project Timeline / Sequencing Dependencies

Dependency Area	Description	Impact	Owner
D24. AS-IS Analysis Completion	Must be completed before TO-BE design.	Incorrect future-state design.	BA Lead
D25. Requirements Sign-off	Must be signed before development begins.	Scope creep, rework.	All Stakeholders
D26. Vendor Selection	Must occur before system build.	Project delay.	Procurement
D27. Pilot Rollout	Depends on staff training + infrastructure availability.	Failed pilot outcomes.	ICT + Medical Team
D28. Full Deployment	Depends on pilot evaluation results.	Scaling risks.	PMO

7. Inter-Project Dependencies

Dependency Area	Description	Impact	Owner
D29. Student Portal Upgrade	Planned upgrade may affect authentication, UI integration.	Integration rework.	ICT Portal Team
D30. Campus WiFi Expansion Project	Strong connectivity required for video consultations.	System unusable in dorms & classes.	ICT Infrastructure
D31. Digital Record System Project	Telehealth EMR-lite may depend on future full EMR rollout.	Future migration complexity.	Medical Centre
D32. Smart Campus Initiative	Telehealth system is part of digital campus roadmap.	Governance influence on funding & timelines.	University Management