**Critique on Iteration 0**

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Upon reviewing your Iteration 0 document, we have encountered a few issues.

# Presentation of the Document

A title page for the document would make the document as a whole much more impressive. A title page would give the reader a better idea of what they are about to read as they pick up the document.

The orientation of the document made it very hard to read. Tabs at the beginnings of the paragraphs would give the reader an easier way to decipher between the different paragraphs. The paragraphs were also very large, and could have been split into smaller paragraphs to make the document easier to understand.

The headings of some of the different sections are different. This makes it very hard for the reader to determine which section of the document that they are reading.

Having sections overlap onto different pages of the document makes the section harder to read (such as your stability/reliability section). This could be avoided by starting “Critical Success Requirements” on the next page.

# Vision Statement

The first sentence of the vision statement should relate more to the functionality of the product. The current opening sentence is very vague and does not give the reader a good idea of what the product is or what it does.

Without having a little bit of background on the product, the reader would not know what “HMS” means. It would be a good idea to spell the whole acronym out the first time.

The vision statement as a whole is very long-winded, and very generic. It would be a good idea to have a shorter vision statement which summarized the functionality of the product.

The vision statement section could be split up into three smaller sections. Section such as “Vision Statement”, “Project Goals”, and the last part could just be thrown out as it talks about how your group will be working together which we don’t really care about.

In the vision statement there is a part which describes notifications being sent out to patients when beds are assigned to them, shouldn’t the notifications be sent out to the nurses as this application is for the hospital, not the patients?

The vision statement talks about “Certain flexibility must be available”, but you do not talk about what needs to be flexible or how you will meet the target flexibility.

**Main Features**

We find it very odd that there are 5 features within the first priority, but there is only one feature in each of the other priorities.

The order of the priorities seems to be very sensible, the basic functionality of the system should be first, and then followed by the more nice to have features.

How does a priority queue work? How are the priorities defined? Does each ward have a unique priority queue?

We would like if feature 1.5 could be in the first iteration, as our patients personal info is very important to us and should remain confidential.

We were wondering if the following features could be added to the system:

* Keep a history of what rooms/wards a patient has been to
* Keep track of patients previous operations and medicines taken
* The ability to view the queue and make changes to the queue as needed
* The ability to view a nurses weekly schedule
* The ability to view which user entered/edited a patient’s info or who checked them into the hospital
* The ability to automatically send or retrieve a patient’s medical file from another hospital using the same software system even though the software is specialized to suit that specific hospital

**Operational Requirements**

The operational requirements section sounds very “techie”. What is “OS”? What is “MySQL”?

**Critical Success Requirements**

When reading through the critical success requirements section, it seemed as though the scalability and extensibility sections were the same section. Combining the two sections might be a good idea.

We strongly agree that one of the main concerns of the system in that the system should be stable and reliable, as the system crashing would be one of the worst possible possibilities. Even though the system crashing would be catastrophic, we do not believe that the system crashing will “easily result in patient deaths”. If the system failed, will the data be recoverable? If yes, how often is the data backed up? Will the information be stored locally at my hospital?

We like to hear that the system will be very easy to use, as the people who will be using the system will not be very tech savvy.

**Technical Requirements**

As your customer I have no idea what your methodologies are or what the acronyms mean.

Why do you say “using some” of the tools listed below? Do you not know what you are making?

Our hospital has many Linux computers as they are cheaper. Will I not be able to run your product on them?