UNCAP – Ubiquitous iNteroperable Care for Ageing People
GA 643555

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DELIVERABLE

D3.5 – Bi-monthly Pilot Progress Report v05

Project Acronym: UNCAP

Grant Agreement number: 643555

Project Title: Ubiquitous iNteroperable Care for Ageing People

Revision: 1.0

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Dissemination Level		
P	Public	**x**
C	Confidential, only for members of the consortium and the Commission Services	

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1. Revision history and statement of originality

1.1. Revision history

Rev	Date	Author	Organization	Description
0.0	04/04/2016	Fabio Roncato	TRILOGIS	First draft of the monthly pilot progress report v05
0.1	13/04/2016	Fabio Roncato	TRILOGIS	Added pilot report from Skopje, Baia Spire, Tarzo, Thessaloniki.
0.2	15/04/2016	Fabio Roncato	TRILOGIS	Added pilot report from Simleu Silvaniei.
0.3	18/04/2016	Fabio Roncato	TRILOGIS	Added pilot report from Ovest Vicentino, Athens and Pergine.
0.4	19/04/2016	Fabio Roncato	TRILOGIS	Added pilot report from Città della Pieve.
0.5	21/04/2016	Fabio Roncato	TRILOGIS	Added pilot report from Maribor.
0.6	25/04/2016	Fabio Roncato	TRILOGIS	Added pilot report from Höhenkirchen.
1.0	26/04/2016	Giuseppe Conti	TRILOGIS	Final review.

1.2. Statement of originality

This deliverable contains original unpublished work except where clearly indicated otherwise. Acknowledgement of previously published material and of the work of others has been made through appropriate citation, quotation or both.

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2. List of references

Number	Full Reference
[1]	*http://www.uncap.eu/pilot-progress-v05*
[2]	*D.3.1 – Bi-monthly Pilot Progress Report v01*
[3]	*D.3.2 – Bi-monthly Pilot Progress Report v02*
[4]	*D.3.3 – Bi-monthly Pilot Progress Report v03*
[5]	*D.3.3 – Bi-monthly Pilot Progress Report v04*
[6]	*D.1.1 – Use cases description, system requirements and PIA/TRVA*
[7]	*D.1.4 - Pilots deployment and test plan*

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3. Executive Abstract

This document is the fifth release of the Pilot Progress Report and it covers the updated status of the pilots referring to M15-M16.

During this period pilot partners have continued with the collection of data by using the platform provided by partner SocialIT – Alt@nte – in order to refine the inclusion and exclusion criteria before the installation of the final UNCAP at the pilot sites, scheduled at the end of the first half of 2016.

Similarly to the first, second, third and fourth versions of the Pilot Progress Report, this deliverable is structured as a collection of reports released by each pilot partner, which are reported in Section 0 As it was pointed out in the previous report D3.3, the pilot in Höhenkirchen is no more collecting data with Atl@nte. For a complete description of the status the reader should refer to the report D3.3 since no variations have been reported.

The procurements phase has not started completely for all the partners. The consortium is trying to accelerate the procurements phase. Some criticalities could emerge from public structures due to them being forced to follow national laws and rules for procurement.

A possible criticality may be related to the approval of the clinical study by the ethical committee of the pilot in Pergine that should be submitted the first week of M17. This possibility emerges from past experiences in similar projects and trials but, precisely from those experiences. The consortium, and in particular FBK, already knows how to face this issue and better meet the strict and precise requirements of the ethical commission. Such a criticality could be extended to the others pilot.

In practice all the required documents needed for this phase have been provided to all the pilots.

A potentially blocking issue has emerged with the pilot in Skopje. The procurement procedure has been temporarily halted because of some political changes in Macedonia which have resulted in a law prohibiting (as a state university) to acquire any good until the constitution of the new parliament.

No others criticality can be envisioned.

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Individual reports, while in previous section 6. The report provides an overall view of the progress.

As in the previous reports, the management team has shared among the pilots and their technical supporting partners, an electronic form available online [1] in order to collect their feedback. The questionnaire maintains a structure similar to the previous releases. Details about the questionnaire are also reported in the Annex to this report.

In the previous document (starting from deliverable D3.3 - Bi-monthly Pilot Progress Report v03) a table, reporting the type and number of devices that the various pilots intend to install, has been added. The types of technology clearly depend on the use cases that were selected at the beginning of the project, as highlighted in D.1.1.

In this deliverable we have updated the current status by adding specific questions in the module. With respect to the last report, some pilots have slightly changed and updated the type of hardware they are willing to install. At this stage we can consider the chosen use cases as fixed and final, while some minor updates may still occur in terms of number of devices. Anyway, the complete list of the devices (and to a lesser extent the use cases) that will be used, pilot-by-pilot, will be fixed only when the procurement phase will be concluded.

For this reason, for some pilots, the table created in the last report has been updated with extra details on the technologies selected, the hardware that will be used and the quantity of the various UNCAP components that will be installed.

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6. Overall progress report

6.1. Activities carried out

The following sections report on the activities that were planned and the situation of the activities that, in the previous Pilot Progress Report (D3.4), were reported as "ONGOING" with details on their updated situation:

- **Identification of the details of the technologies**: this is an ongoing task. The partners are upgrading the technologies to be installed at each pilot and the number of devices needed according to the budget available to each pilot.

    o ONGOING: some pilot partners have refined their choices of the hardware and the quantity they plan to deploy at their site (especially regarding the quantity the definition this is an ongoing task). We had considered this task finished in the last report but we should account that minor variations may arise (mainly due to quantity of devices used by the pilot and market prices fluctuations). We will monitor the status and update the lists. This is an ongoing task that will be eventually closed at the end of the procurement stage.

- **Infrastructure preparation**: some technologies may require some significant infrastructural works to be carried out at the pilot site (e.g. setting up power plugs or Ethernet connectors).

    o ONGOING: the pilot in Höhenkirchen has already closed the sensing floor installation. Sensor Floor is the most complex solution to be installed of those available and Höhenkirchen is the only pilot interested in such technology. Most of the technologies in UNCAP do not require particular hardware installation, this should not create any criticality.

- **Analysis of the proposed pilot study**: The updated version of the deliverable "D7.8 Template for ethical approval and informed consent" has been released. All the pilots have been invited to evaluate the content of the deliverable. In addition to this deliverable, others documents have been made available to the pilot to help them to get approval of the UNCAP study (documents related to instructions of the devices that will be used in UNCAP, the risks related to the use of UNCAP and the clinical evaluation, have been provided).

    o ONGOING: A set of documents useful for the approval of UNCAP study have been provided to the pilots covering the aspect of the project. The same documentations will be used in order to notify the Italian Ministry and each ethical committee on the clinical study. All those documents have been drafted with the support of FBK, Social-IT and Trilogis. They have been shared among all partners in order to be adapted to each local legal framework. In the next weeks we will have to follow the various partners' activity in order to obtain the authorization for use of UNCAP at

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the various pilot sites. All the authorization must will be ready before M18 when the piloting phase will have to start.

- **Hardware procurement**: during the upcoming period, the technologies providers will get in touch with the pilot and supporting partners in order to provide a quote and strictly define the requirements for the installation. The hardware should be bought soon.

    o ONGOING: Few pilots have already started the procurement phase. In the current phase we have to accelerate the procurements. We do not foresee major criticalities due the fact that the majority of the hardware used in UNCAP is based on "off the shelf" devices. Some criticality has emerged from the pilot in Macedonia due to the organization and the procedure of purchase for the pilots (similar constraints have been addressed and solved by the other public structures).

- **Data collection monitoring**: similarly, this is an on-going task. The WP leader, together with technical supporting partners, will periodically monitor the status of the pilots and promote involvement of new users. With respect to the last progress report, the number of involved people in the UNCAP project has increased and will increase in the future.

    o ONGOING: The number of involved user has increased with respect to the last progress report but the partners will continue promoting greater involvement of new users, having as a goal the KPIs within the GA.

Moreover, pilots are continuously involving users by asking them to sign the informed consent and are carrying out the evaluations. The following figure reports the number of elderly involved in each pilot by highlighting the differences with the previous report. The total number of elderly involved is 428 (rising from 381 in the last period). The number of elderly has globally increased with respect to the previous report with some minor variations at all the pilot sites. The trend, if we take into account the last reports is of an increasing number of elderly involved.

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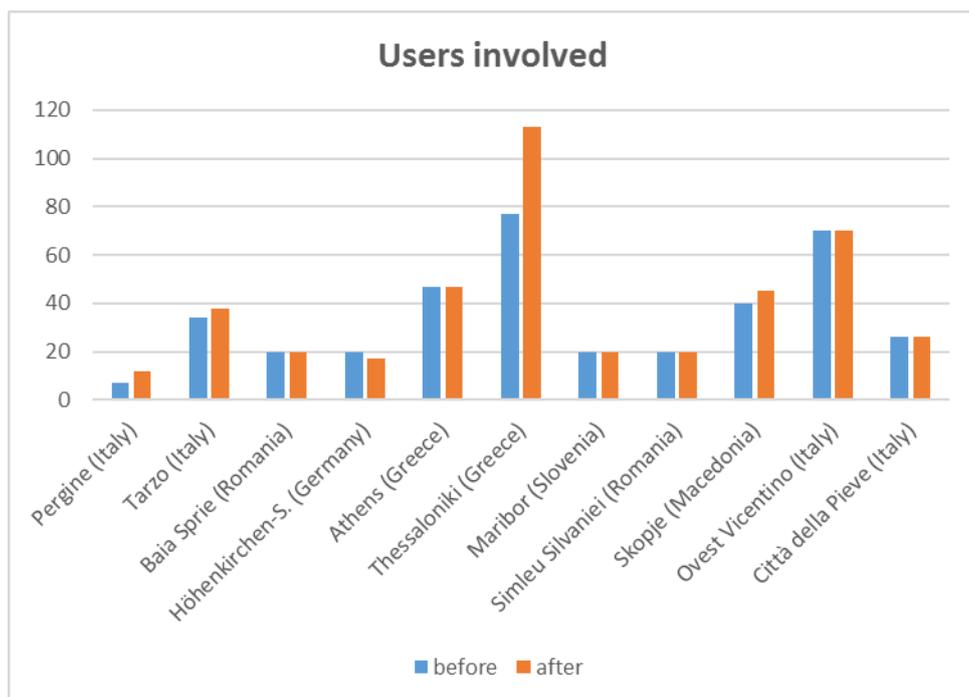
Figure 1: Elderly involved at the various pilots sites.

The time required for a single evaluation as reported by the pilots is as follows:
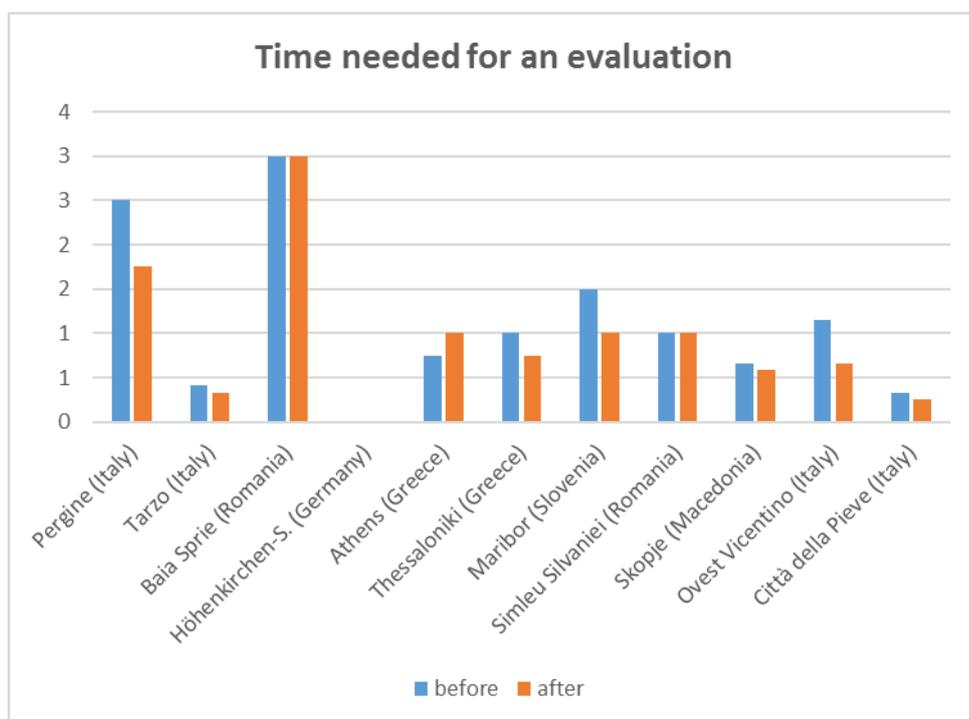
Figure 2: Time needed for a patient evaluation in the various pilots.

The time needed for an evaluation is decreasing, as visible from the chart above. There is large variance starting from the 15 minutes required by the pilot located in Città della Pieve to the 3 hours required by the pilot located in Baia Sprie. The pilot in

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Baia Sprie explained the reason for such an unusually long time (3 hours) in the last progress report: "At first we made an estimation of time from the interaction with the most sociable and with patients with less problems. Moreover, also the technical partner was there and helped during the evaluation. Later the nurses completed the assessments by themselves and spent more time with the elderly".

Conversely, we have to take into account that the time needed by Città della Pieve is correlated to the fact that were already using Atl@nte before the beginning of the project. On average the time required by the various pilots to run the assessment is approximately one hour (a mean of 1 hour and 5 minutes)

As already reported in the previous releases of the progress report, the status of the pilot in Höhenkirchen is different with respect to the rest of the pilot sites. This is explained within the "criticalities" section of this document.

The last chart represents the overall user experience with the platform. The range is from 1 (we are having serious problems with the software) to 5 (we are fully enjoying it and do not have any problem). For the pilot that is not using Atl@nte, no feedback is reported.
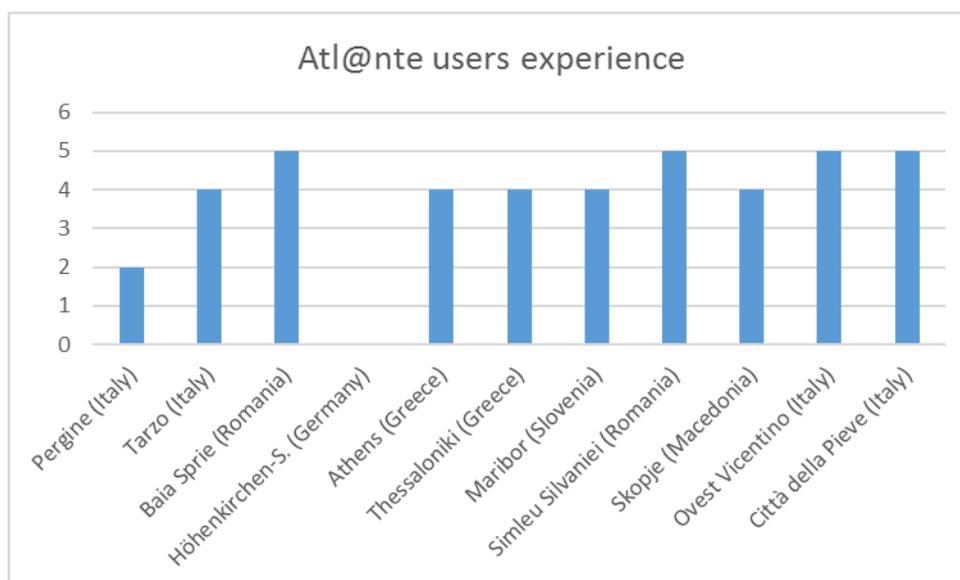

Figure 3: Experience of the various partners in the use of Atl@nte.

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6.2. Activities planned

The activities planned for the next period are as follows:

- **Hardware procurement**: during the upcoming period, the technology providers will contact the pilot and supporting partners in order to provide a quote and strictly define the requirements for the installation. This activity will be started as soon as possible, especially for the public structures that require a complex procedure for the purchases. Only at the end of this phase we will be able to considered complete the identification of the technologies that the pilots will adopted. Based on the experiences acquired while interacting with the pilots, the partners have been also able to define the type of use cases that they want to use, the technologies and the quantities.

- **Approval of UNCAP study by the pilot's ethical committee and the competent authority**: during the next weeks all the pilots will be involved in the assessment of the procedure to obtain the ethical clearance for UNCAP, pilot by pilot. Documents regarding UNCAP clinical evaluation, UNCAP risk and UNCAP devices instructions have been provided to the pilots. By the first week of M17, an additional document, regarding the assessment questionnaire, will be provided to the pilots. This will be essential to provide the pilot partners with a series of documents required to start the activities necessary to achieve ethical clearance of UNCAP. It should be noted that every nation has different laws and rules to be followed to obtain such a clearance.

- **Infrastructure preparation**: this is an on-going task as described in the previous Pilot Progress Report. This task will progress until the hardware technologies will be installed (M18).

- **Data collection monitoring**: this is an on-going task. With respect to the last progress report, the number of the involved people within the UNCAP project has increased and will have to increase in the future. Having an appropriate number of users will help collect a relevant dataset of statistical significance.

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6.3. Criticalities

As it was pointed out in the previous report D3.3, the pilot in Höhenkirchen is no more collecting data with Atl@nte. For a complete description of the status the reader should refer to the report D3.3 since no variations have been reported.

The procurements phase has not started completely for all the partners. The consortium is trying to accelerate the procurements phase. Some criticalities could emerge from public structures due to them being forced to follow national laws and rules for procurement.

A possible criticality may be related to the approval of the clinical study by the ethical committee of the pilot in Pergine that should be submitted the first week of M17. This possibility emerges from past experiences in similar projects and trials but, precisely from those experiences. The consortium, and in particular FBK, already knows how to face this issue and better meet the strict and precise requirements of the ethical commission. Such a criticality could be extended to the others pilot.

In practice all the required documents needed for this phase have been provided to all the pilots.

A potentially blocking issue has emerged with the pilot in Skopje. The procurement procedure has been temporarily halted because of some political changes in Macedonia which have resulted in a law prohibiting (as a state university) to acquire any good until the constitution of the new parliament.

No others criticality can be envisioned.

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7. Individual reports

7.1. Pilot in Pergine, Italy

The rehabilitation hospital "Villa Rosa" is located in Pergine and it is the reference point for intensive rehabilitation in the Province of Trento. Within Villa Rosa there is an advanced service (Centro Abilita) aimed to evaluating and projecting technology assistive solutions for patients with motor and cognitive impairment.

The service is aimed at inpatients and at external users from Autonomous Province of Trento.

Users involved	
Total number of elderly involved	12
Total number of caregivers involved	12
Was someone excluded from the experimentation?	No.
Other notes	
Not provided.	
Informed consent	
Describe the process of collection of the informed consent	
We have yet to upload the consent forms signed by the patients. We will do so in the very near future.	
Are you uploading a copy of the signed consents to the management website?	
No. For organizational reasons we have not uploaded them yet. We will do so in the near future	
Did you encounter any problem?	
Not provided.	
InterRAI/Atl@nte	
Are you using Atl@nte to collect data?	Yes.
Description of the work done	
Not provided.	
Average time needed to carry out an assessment	1 hour and 45 minutes.
Did you encounter any problem using Atl@nte?	
Observations: Question D4 Vision does not take into consideration if a person has a	

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heminopsia. Furthermore, there is no option available to indicate that the person does not have a secondary caregiver. So, we repeat the response given for the primary caregiver.

Do you have any suggestion?

Review the definition provided for short term memory which is not line with recent scientific literature.

User experience with Atl@nte	2

Activities

Past activities carried out in this period

We have conducted organizational meetings and coordination meetings with the various health care professionals involved to prepare for our local ethical committee.

Plan for the future

We are planning to continue to evaluate patients with InterRAI, select the technology, submit the local ethical committee request, and furnish our domotic apartment.

Did you encounter or do you envision criticalities?

Nothing at this time.

Other notes

Not provided.

Technologies

Technologies selected

EEG (Electroencephalography) monitor, HALe (video cameras from Trilogis), SensFloor (mats), Serious games.

No change respect the last bi-monthly report.

Procurement

The technologies are not yet available. We have started to process to obtain them.

Hardware installation

No, our engineers will be installing them.

Technologies question

We are currently selecting the technologies to install. Thus, we have no questions at this time.

Technologies budget

Our pilot site covers the community, thus we see individuals who live at home. The budget available limits the possible experimentations that we can conduct with this population of individuals. We cannot lend the various technologies to many individuals with the purpose of

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conducting a more in depth study.

7.1.1. Technologies details

The pilot in Pergine has not yet identified the specific number of devices that they plan to install, but only the technologies that they are interested in. Some updates to those information will follow during the procurement phase.

USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	UNCAP Box	Will serve to run the UNCAP platform	8
	Smartphone	At least one needed at each pilot site	1
	TV Set	At least one needed at each pilot site (evaluate the presence of existing hardware)	1
	Tablet	At least one needed at each pilot site	1
UC2.1	PC		8
	Touchscreen		n.d.
	Kinect	For full body rehabilitation	8
	Webcam	For cognitive/physical rehabilitation (3D Puzzle)	8
	EEG Emotiv	Optional	1
	Glucometer	Optional	n.d.
	Glucometer strips	50 strips/package	n.d.
	Pulse oxymeter	Optional	n.d.
UC4	Kinect		8
UC5	Sensfloor	Choice of mattress or floor, depending on the type of installation. Please see table of single technologies for further details. (used for motion detection)	8

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7.2. Pilot in Tarzo, Italy

The long-term facility "Villa Bianca" is located in the pre-alpine valley between Vittorio Veneto and Follina (Italy). The objectives of the pilot are:

- Detection of unmonitored wandering, getting lost and falling in order to:
    o Determine the position of the patient inside the nursing home.
    o Help nurses to intervene in a rapid and effective way when an event occurs.
    o Understand if a person gets out of the bed.
- Optimize and equally distribute the effort and the workload among all the units/departments (there are 4 departments), in order to:
    o Evaluate workloads.
    o Balance workloads.
    o Decrease the workload and work-related stress.
- Helps carers in nursing homes have a better overview of the patients based on their location. Help nurses intervene in a rapid and effective way when an event occurs.
- Helps carers at nursing homes have a better overview of the patients based on their location.

Users involved	
Total number of elderly involved	38
Total number of caregivers involved	50
Was someone excluded from the experimentation?	Yes
Other notes	
56 elderlies have been excluded following the exclusion's criteria. We refer to 56 people that have not been added to the experimentation adopting the exclusion criteria.	
Informed consent	
Describe the process of collection of the informed consent	
Not provided.	
Are you uploading a copy of the signed consents to the management website?	
No. I will use it as soon as possible.	
Did you encounter any problem?	
Not provided.	

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InterRAI/Atl@nte

Are you using Atl@nte to collect data?	Yes.

Description of the work done
All patients have been evaluated.

Average time needed to carry out an assessment	20 minutes.

Did you encounter any problem using Atl@nte?
Not provided.

Do you have any suggestion?
Not provided.

User experience with Atl@nte	4

Activities

Past activities carried out in this period
We have carried out meetings with caregivers.

Plan for the future
We need to prepare the house for devices' installation.

Did you encounter or do you envision criticalities?
No criticalities at the moment.

Other notes
Not provided.

Technologies

Technologies selected
Zigpos (Wi-Fi), SensFloor (mats).

Procurement
We don't have installed any components yet, and nothing is already available.

Hardware installation
No question.

Technologies question

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There are no questions.
Technologies budget
No, we don't.

7.2.1. Technologies details

The details of the technologies in which the pilot is interested and the number of devices is as follows:

USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	UNCAP Box	Will serve to run the UNCAP platform	1
	Smartphone	At least one needed at each pilot site	30
	TV Set	At least one needed at each pilot site (evaluate the presence of existing hardware)	1
UC3	ZigPos Wifi	Wifi Localization (wifi coverage required). Number of tags.	10
UC5	Sensfloor	Choice of mattress or floor, depending on the type of installation. Please see table of single technologies for further details. (used for motion detection)	10

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7.3. Pilot in Baia Sprie, Romania

Baia Sprie Elderly Nursing Home is a public facility aiming at providing care for elders sharing their last years. It is a unit providing support for 60 elder persons, some of which have cognitive problems. Financed mainly by the Baia Sprie Municipality, the centre is trying to adapt to new technologies and improve quality of life by using them. They are confronted with a lot of requests, but due to lack of space, they are unable to accept more persons. In Baia Sprie Elder nursing homes, patient and environment will be monitored to identify the ways in which the technology affects everyday life, both in nursing homes and for patients living at home.

Users involved	
Total number of elderly involved	20
Total number of caregivers involved	3
Was someone excluded from the experimentation?	No
Other notes	
Not provided.	
Informed consent	
Describe the process of collection of the informed consent	
Yes.	
Are you uploading a copy of the signed consents to the management website?	
All of them.	
Did you encounter any problem?	
No problems.	
InterRAI/Atl@nte	
Are you using Atl@nte to collect data?	Yes.
Description of the work done	
Not provided.	
Average time needed to carry out an assessment	3 hours.
Did you encounter any problem using Atl@nte?	
No problems.	
Do you have any suggestion?	

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Not provided.	
User experience with Atl@nte	5
Activities	
Past activities carried out in this period	
Teaching sessions with users/stakeholders.	
Plan for the future	
Completing acquisitions.	
Did you encounter or do you envision criticalities?	
I have not met yet critical factors.	
Other notes.	
Not provided.	
Technologies	
Technologies selected	
Blood pressure meter, EEG (Electroencephalography) monitor, Glucometer, Pulse oximeter, Scale, SensFloor (large area), Serious games, Sweat level monitor, Combain. No change respect the last bi-monthly report.	
Procurement	
Technologies are available, we don't start the procurement process.	
Hardware installation	
We ask if we need help.	
Technologies question	
Answers to the clarifications were received.	
Technologies budget	
The technologies cover the budget.	

7.3.1. Technologies adopted and connected use cases

The pilot has confirmed the technologies selected in the last progress report.

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USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	UNCAP Box	Will serve to run the UNCAP platform	3
	Smartphone	At least one needed at each pilot site	10
	TV Set	At least one needed at each pilot site (evaluate the presence of existing hardware)	3
	Tablet	At least one needed at each pilot site	3
UC2.1	PC		3
	Touchscreen		1
	Kinect	For full body rehabilitation	3
	Webcam	For cognitive/physical rehabilitation (3D Puzzle)	3
	EEG Emotiv	Optional	2
UC2.2	Option 1: Combain + GPS	Using WiFi (smartphone needed)	10
UC2.4	Glucometer		10
	Glucometer strips	50 strips/package	200
UC2.5	Blood pressure meters	Bluetooth, standard.	2
UC2.6	Pulse oxymeter		3
UC2.9	Sweat Level	Wireless GSR sensor	1
UC2.10	Scale	Wireless scale. Need to check the availability of APIs	2
UC4	Sensefloor	Choice of mattress or floor, depending on the type of installation. Please see table of single technologies for further details.	6
	PebbleWatch	To check whether we can implement this within UNCAP	10

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7.4. Pilot in Höhenkirchen, Germany

The pilot at Höhenkirchen (72 Apartments for the elderly with an average age of 86 years) will be equipped with SensFloor a large area floor sensor system. The floor will switch on an orientation light as soon as someone steps out of bed at night and alerts the carer, when someone has fallen down. In another 10 rooms sensor mats will be installed in front of the beds of the residents. The persons are chosen according to their risk of falling down. These mats will alert the nurse, as soon as someone starts to get out of bed. The nurse will be able to be there very fast, assisting the person and therefore preventing falls.

Users involved	
Total number of elderly involved	17
Total number of caregivers involved	15
Was someone excluded from the experimentation?	Yes.
Other notes	
3 elderly were dying and were excluded from the study. The SensFloor mats are given to residents with a risk of falling. The residents have a very high average age (87 years). When they start having a very high risk of falling, they may not live very much longer. That is why the mats have to be installed in other rooms quite frequently. Than new nurses have to use the mats and must be trained.	
Informed consent	
Describe the process of collection of the informed consent	
All residents in the large-area SensFloor rooms were asked to sign an informed consent and did it. For the use of SensFloor mats we did not do it, because we do not gather personal data for our statistics.	
Are you uploading a copy of the signed consents to the management website?	
Yes, all of them.	
Did you encounter any problem?	
Not provided.	
InterRAI/Atl@nte	
Are you using Atl@nte to collect data?	No.
Description of the work done	
Not provided (motivation described in the lasts progress report).	
Average time needed to carry out an assessment	Not provided.

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Did you encounter any problem using Atl@nte?
Not provided.

Do you have any suggestion?
Not provided.

User experience with Atl@nte	Not provided.

Activities

Past activities carried out in this period
We had to do some changes in the SensFloor mat installation, because there were not enough power plugs in the rooms.

Plan for the future
We will do new instruction of use for the SensFloor mats and translate this into Croatian and Polish. We have to do tests for the installation of the UNCAP Box and the required technologies.

Did you encounter or do you envision criticalities?
We see the problem, that it is not easy to see that every available mats are immediately installed in a new room, when a resident is no longer in need of it.

Other notes
Not provided.

Technologies

Technologies selected
SensFloor (large area), SensFloor (mats).

Procurement
Yes.

Hardware installation
No.

Technologies question
We installed: - SensFloor mats   - Large-area SensFloor   - Orientation lights

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Everything is working with the nurse call system software.
Technologies budget
The costs for installation of the technologies were higher as expected because of the working times of the floor installer for the large-area SensFloor. They could not work continually, because the rooms were all occupied and only one room was empty for renovation at one time.

7.4.1. Technologies details

The pilot has already identified the technology that they want at their site, which is the SensFloor.

USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	UNCAP Box	Will be used to run the UNCAP platform	n.d.
	Smartphone	At least one needed at each pilot site	n.d.
	TV Set	At least one needed at each pilot site (evaluate the presence of existing hardware)	n.d.
	Tablet	At least one needed at each pilot site	n.d.
UC4/UC5	SensFloor	Choice of mattress or floor, depending on the type of installation. Please see table of single technologies for further details. (used for motion detection)	10 rooms
	Sensor Mat		10 rooms

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7.5. Pilot in Athens, Greece

Within the frame of the pilot, the users will each be provided with a tablet, a pulse oximeter and a smartwatch (optional). While at home, elderly people will be monitored by their attending doctors, who will create a personalized monitoring and treatment schedule for each of their patients. The doctors will have access and the right to update their patients' EHR, where the recorded biosignals will also be stored. Compliance to this schedule will be enforced via reminders. The system processes the data related to the schedule in real time and whenever a measurement exceeds a threshold that has been set by the attending doctor, the doctor is informed via a preselected communication channel (push notification, email, SMS etc.). Social networking aspects and video conferencing functionality with friends and relatives will also be provided to the participants in the pilot. Through the smartwatch, the service will be able to automatically detect potential falls and route the appropriate form of assistance (i.e. by contacting relatives).

Users involved	
Total number of elderly involved	38
Total number of caregivers involved	6
Was someone excluded from the experimentation?	Yes.
Other notes	
Since the last report a total of 9 elders have been excluded from the study, for various reasons. Two of them were excluded due to sudden acute deterioration of their condition and another one due to cognitive deterioration. One of the users moved away from Athens and thus would not be able to continue participating. Another elder moved to an assisted living facility. Finally, 4 elders decided to exit the pilot on their own, for personal reasons. Thus, we currently have 38 participants.	
Informed consent	
Describe the process of collection of the informed consent	
Since the last report, we have uploaded all remaining signed forms to the informed consent management site.	
Are you uploading a copy of the signed consents to the management website?	
Yes, all of them.	
Did you encounter any problem?	
We have not encountered any problems.	
InterRAI/Atl@nte	
Are you using Atl@nte to collect data?	Yes.

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Description of the work done

Nothing has changed in our process with respect to the last report. The patient assessments take place every three months. We have completed the third assessment of our first group of users, in Athens, and have just begun the second assessment of the group in Larissa. As before, attending doctors compile the interRAI assessments on paper. The data will be gradually uploaded to Atl@nte.

Average time needed to carry out an assessment	1 hour.

Did you encounter any problem using Atl@nte?

As we have reported in the past, assessments with the InterRAI questionnaire are very time consuming for doctors. We have encountered some minor issues with Atl@nte (e.g. trouble editing the data of an assessment), but nothing noteworthy.

Do you have any suggestion?

Not provided.

User experience with Atl@nte	4

Activities

Past activities carried out in this period

Within the last period, we have continued with the fulfilment of our pilot commitments. We have completed another round of assessments with InterRAI. We have also obtained a joint ethical approval for the pilots in Greece, in collaboration with AUTH.

We have also held meeting with cardiovascular experts to discuss the needs of elders with hypertension, promote our work within the project and gain critical input for the study and the improvement of our health monitoring services.

Plan for the future

Throughout the following months, our priority will be to finalize all preparations and setup of the technologies at the user's residences. Upon setup of the system at each residence, we will proceed with the training of our main user and their informal caregivers. We will also arrange training sessions with the doctors involved in the study, as needed.

Did you encounter or do you envision criticalities?

Throughout the last couple of months, a number of participants exited the pilot, for various reasons. Fortunately, we knew this was a possibility, so we had enrolled more elders than the 30 required for the study. We still have 8 more participants than needed. These extra participants will helps us handle such incidents in the future, by providing a pool of backup users, in case more people are excluded from the study.

Other notes

Not provided.

Technologies

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Technologies selected
Blood pressure meter, Glucometer, Pulse oximeter, PebbleWatch.
Procurement
We have already purchased most of the equipment (tablets, oximeters and blood pressure meters). We have asked for price quotes on the Pebble smartwatches and iHealth glucometers.
Hardware installation
Most of the devices used in our pilot work out-of-the-box and are fairly easy to use, so no guidance is needed.
Technologies question
We have already contacted the WP leader for clarifications regarding some of the devices.
Technologies budget
There are no problems regarding the technologies. The budget covers the cost of the devices we have chosen for our pilot.

7.5.1. Technologies adopted and connected use cases

The details of the technologies in which the pilot is interested and the number of devices is as follows:

USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	Tablet	At least one needed at each pilot site	30
UC2.4	Glucometer		TBD
UC2.5	Blood pressure meter		10
UC2.7	Pulse oxymeter		20
UC4	PebbleWatch	To check whether we can implement this within UNCAP	5

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7.6. Pilot in Thessaloniki, Greece

An ecologically valid active and healthy aging e-home/living lab is located within the lab of Medical Physics in the main building of Medical School of Aristotle University of Thessaloniki and it consists of a living-room space, a bathroom-like space and a hall-kitchen space.

Seniors visit the Active and Healthy Aging Living Lab and "live" there for 1-2 hours. They relax and can perform different daily activities (wash hands/face/dishes, change clothes etc.); seniors are also asked to utilize a smart watch (emergency button and heart rate measurement), a Smart TV (watching TV, menu navigation and calendar event creation), a tablet (chat and navigation), health measurement devices (blood pressure monitor) and a set of cognitive tasks on the Smart TV. Finally, the participants may undertake a short, in terms of time, physical training session with wFFA (exergaming) through the Smart TV.

Users involved	
Total number of elderly involved	113
Total number of caregivers involved	3
Was someone excluded from the experimentation?	Yes.
Other notes	
We excluded 3 of our participants due to age related criteria (below 60 years old) and presence of psychiatric comorbidity.	
Informed consent	
Describe the process of collection of the informed consent	
The seniors were informed about the UNCAP with emphasis on the main goals of the project: to provide them the independent living and the improvement of their quality of life. The whole process was completed in their places without any difficulties with the template of the document, and the responsible person (Maria Karagianni-psycologist) for the evaluation filled in the informed consent by asking them to read it carefully and then to sign it.	
Are you uploading a copy of the signed consents to the management website?	
Yes, all of them.	
Did you encounter any problem?	
No, we didn't encounter any problems using the form in the UNCAP website.	
InterRAI/Atl@nte	
Are you using Atl@nte to collect data?	Yes.
Description of the work done	

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The evaluation for the specific seniors was completed. We thoroughly explained them the informed consent and let them read it in order to sign it. Then we proceed to take the identification information. Afterwards we continue to collect the information according to the InterRai test.

Average time needed to carry out an assessment	45 minutes.

Did you encounter any problem using Atl@nte?

Not provided.

Do you have any suggestion?

Not provided.

User experience with Atl@nte	4

Activities

Past activities carried out in this period

During the last period we informed a lot of people in order to provide the appropriate information to participate in the UNCAP. Participants were assessed and their data were collected so as to be entered to the Atl@nte system.

Plan for the future

Enrol more seniors to the Atl@nte System.

Did you encounter or do you envision criticalities?

Although it seems that the Thessaloniki trial is lacking behind in participant numbers this is not an issue of concern. The completion of the INTERAI tool data is not of critical importance for the Thessaloniki trial which is focused on the exergaming aspect of UNCAP. But in any case, participant number are increasing at Thessaloniki.

Other notes

Not provided.

Technologies

Technologies selected

Blood pressure meter, EEG (Electroencephalography) monitor, Glucometer, HALe (video cameras from Trilogis), Hearth Rate Monitor, Pulse oximeter, Serious games.

Procurement

It has not been initiated yet.

Hardware installation

Not yet.

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Technologies question
No.
Technologies budget
Budget issues are under control.

7.6.1. Technologies details

The details of the technologies in which the pilot is interested and the number of devices is as follows:

USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	UNCAP Box	Will serve to run the UNCAP platform	1
	Tablet	At least one needed at each pilot site	2
	Smartphone	At least one needed at each pilot site	4
UC2.1	PC		10
	Touchscreen		10
	Kinect	For full body rehabilitation	10
	Webcam	For cognitive/physical rehabilitation (3D Puzzle)	2
	EEG Emotiv	Optional	3
	Glucometer	Optional	4
	Glucometer strips	50 strips/package	10
	Pulse oxymeter	Optional	4
UC2.3	Combain + GPS	Using WiFi (smartphone needed) (working also outdoor if wifi coverage)	10
UC2.4	Glucometer		ref. UC2.1
	Glucometer strips	50 strips/package	ref. UC2.1
UC2.5	Blood pressure meter	Bluetooth, standard CONTINUA	10
UC2.10	Scale	Wireless scale. Need to check the availability of APIs	5

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7.7. Pilot in Maribor, Slovenia

Elderly Home Danice Vogrinec Maribor is the largest gerontology facility in the Maribor region, operating as a public institution established by the Republic of Slovenia. It offers institutional care services for elderly people and adults with special needs in four main units, together with a capacity of 809 residents, offering social services, health care and rehabilitation. In addition the institution offers home care services for elderly people living in their private homes in the Miklavž na Dravskem polju and Duplek municipalities, providing household help services, help with daily home routines (self-care, healthcare, personal hygiene), help with socializing and community integration, and support and companionship with urgent errands.

Users involved	
Total number of elderly involved	20
Total number of caregivers involved	25
Was someone excluded from the experimentation?	No.
Other notes	
Not provided.	
Informed consent	
Describe the process of collection of the informed consent	
Not provided.	
Are you uploading a copy of the signed consents to the management website?	
Yes, all of them.	
Did you encounter any problem?	
Not provided.	
InterRAI/Atl@nte	
Are you using Atl@nte to collect data?	Yes.
Description of the work done	
Do not provided.	
Average time needed to carry out an assessment	1 hour.
Did you encounter any problem using Atl@nte?	
Not provided.	
Do you have any suggestion?	

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Not provided.	
User experience with Atl@nte	4

Activities

Past activities carried out in this period
We had 2 meetings with our technical partner and 6 teaching sessions with users.
Plan for the future
We will collect the most advantageous offer for the purchase of equipment and we will bought equipment, install software and then start to test it.
Did you encounter or do you envision criticalities?
At this stage we have no questions or doubts.
Other notes
Not provided.

Technologies

Technologies selected
Blood pressure meter, Zigpos (Wi-Fi), Glucometer, SensFloor (the additional usage of this technologies will depend by the effective cost of the various devices respect to the fixed budget).
No change respect the last bi-monthly report.
Procurement
We expect our technical partner to start installing hardware soon, which will in the upcoming months be followed by commencement of the procurement process.
Hardware installation
We mostly rely on our technical partner, the Faculty of Electrical Engineering from Ljubljana to provide help and guidance regarding the hardware. Should the need arise, we will ask for further help.
Technologies question
At this stage we have no questions or doubts.
Technologies budget
Once we have acquired the technologies in question and have had a discussion with our technical partner, we should be able to provide the answer to this question.

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7.7.1. Technologies details

The details of the technologies in which the pilot is interested and the number of devices is as follows:

USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	UNCAP Box	Will serve to run the UNCAP platform	6
	Tablet	At least one needed at each pilot site	11
	Smartphone	At least one needed at each pilot site	11
	TV Set	At least one needed at each pilot site (evaluate the presence of existing hardware)	6
UC2.4	Glucometer		10
	Glucometer strips	50 strips/package	10
UC2.5	Blood pressure meter	Bluetooth, standard CONTINUA	10
UC3	ZigPos Wifi	Wifi Localization (wifi coverage required). Number of tag.	10
UC6	Smartphone	No extra cost foreseen, since the smartphone is already available.	Ref. ALL
UC9	Environmental sensors	It depends on the cost of single pieces of devices.	3

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7.8. Pilot in Simleu Silvaniei, Romania

The Municipality of Simleu Silvaniei, Romania aims at improving the quality of life of its citizens. The UNCAP project will be implemented throughout the city, the targeted group of elderly people being represented by elderly people living in their own homes.

The Day Care Centre will constitute an interface between the beneficiaries and the project team (distributing equipment, gathering data, interacting and evaluating the elderly people). The Centre provides physical rehabilitation services for elderly people after a physical trauma or a stroke. The structure currently employs an administrator, a rheumatologist, a physiotherapist, a nurse and a social assistant.

Users involved	
Total number of elderly involved	20
Total number of caregivers involved	0
Was someone excluded from the experimentation?	No.
Other notes	
Not provided.	
Informed consent	
Describe the process of collection of the informed consent	
20 patients were contacted by the project implementation team. It was used the output model. There were no difficulties. The responsible persons for enrolling the patients are Puscas Doru and Cioban Marcel.	
Are you uploading a copy of the signed consents to the management website?	
Yes, all of them.	
Did you encounter any problem?	
Not provided.	
InterRAI/Atl@nte	
Are you using Atl@nte to collect data?	Yes.
Description of the work done	
Not provided.	
Average time needed to carry out an assessment	1 hour.
Did you encounter any problem using Atl@nte?	
Not provided.	

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<u>Do you have any suggestion?</u>	
Not provided.	
<u>User experience with Atl@nte</u>	5
Activities	
<u>Past activities carried out in this period</u>	
No activiteis were conducted during this period.	
<u>Plan for the future</u>	
In the next period we will enter all the assessment Atl@nte and next we will monitor them.	
<u>Did you encounter or do you envision criticalities?</u>	
We will inform you what critical factors we found.	
<u>Other notes</u>	
Not provided.	
Technologies	
<u>Technologies selected</u>	
No change respect the last bi-monthly report.	
<u>Procurement</u>	
We don't start procurement process.	
<u>Hardware installation</u>	
No questions now.	
<u>Technologies question</u>	
No questions now.	
<u>Technologies budget</u>	
The technologies cover the budget.	

7.8.1. Technologies details

The pilot in Simleu Silvaniei has not yet identified the specific number of devices that they plan to install, but only the technologies that they are interested in. Some internal meeting are yet required in order to strictly define all the details.

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USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	UNCAP Box	Will serve to run the UNCAP platform	n.d.
	Tablet	At least one needed at each pilot site	n.d.
	Smartphone	At least one needed at each pilot site	n.d.
	TV Set	At least one needed at each pilot site (evaluate the presence of existing hardware)	n.d.
UC2.1	PC		2
	Touchscreen		2
	Kinect	For full body rehabilitation	2
	Webcam	For cognitive/physical rehabilitation (3D Puzzle)	2
	EEG Emotiv	Optional	2
UC2.4	Glucometer		3
	Glucometer strips	50 strips	3
UC2.5	Blood pressure meter	Bluetooth, standard CONTINUA	4
UC2.6	Pulse oxymeter		6
UC2.7	Pulse oxymeter		Ref. UC2.6
UC2.10	Scale	Wireless scale. Need to check the availability of APIs	1
U4	Sensfloor	Choice of mattress or floor, depending on the type of installation. Please see table of single technologies for further details.	1

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7.9. Pilot in Skopje, Macedonia

The pilot in Skopje will take place in Nursing Home Terzieva. It will include 40 participants who will be involved in the experimentation and will be required to measure their vital parameters (blood glucose, heart rate, blood pressure, blood oxygen saturation) on a daily basis and the data will be directly transmitted via Wi-Fi and stored into their Electronic Health Record (EHR). Considering the previous experience in the nursing home Terizeva where the Skopje Pilot will take place, and their statistics, the necessity for monitoring the patients' while getting up from bed.

Users involved	
Total number of elderly involved	45
Total number of caregivers involved	5
Was someone excluded from the experimentation?	Yes.
Other notes	
5 elderly have been excluded due to dead or because were dismissed from the structure.	
Informed consent	
Describe the process of collection of the informed consent	
Not provided.	
Are you uploading a copy of the signed consents to the management website?	
Yes. Most of those signed by those enrolled in the study.	
Did you encounter any problem?	
Not provided.	
InterRAI/Atl@nte	
Are you using Atl@nte to collect data?	Yes.
Description of the work done	
Not provided.	
Average time needed to carry out an assessment	35 minutes.
Did you encounter any problem using Atl@nte?	
Section O in the Atl@nte system could never be saved with a status completed (issue fixed).	
Do you have any suggestion?	
Mot provided.	

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User experience with Atl@nte	4
Activities	
Past activities carried out in this period	
Meetings and teaching sessions.	
Plan for the future	
Installation of the equipment.	
Did you encounter or do you envision criticalities?	
Administrative procedures in the equipment procurement.	
Other notes	
Not provided.	
Technologies	
Technologies selected	
Blood pressure meter, Glucometer, Hearth Rate Monitor, Pulse oximeter, SensFloor (mats).	
Procurement	
Still waiting due to bureaucratic and administrative procedures.	
Hardware installation	
Not at the moment.	
Technologies question	
Nothing at the moment.	
Technologies budget	
No.	

7.9.1. Technologies details

The details of the technologies in which the pilot is interested and the number of devices is as follows:

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USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	UNCAP Box	Will serve to run the UNCAP platform	6
	Tablet	At least one needed at each pilot site	11
	Smartphone	At least one needed at each pilot site	11
	TV Set	At least one needed at each pilot site (evaluate the presence of existing hardware)	6
UC2.4	Glucometer		10
	Glucometer strips	50 strips/package	10
UC2.5	Blood pressure meter	Bluetooth, standard CONTINUA	10
UC3*	ZigPos Wifi	Wifi Localization (wifi coverage required). Number of tag.	10
UC4/UC5	Sensefloor	Choice of mattress or floor, depending on the type of installation. Please see table of single technologies for further details.	2-3
UC6	Smartphone	No extra cost foreseen, since the smartphone is already available.	Ref. ALL
UC9	Environmental sensors	It depends on the cost of single pieces of devices.	3

* The implementation of this use case depend on the technologies prize and budget.

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7.10. Pilot in Ovest Vicentino, Italy

This pilot merges, under the same coordination, three different structures located in Italy:

- Villa Serena in Lonigo.
- La Pieve in Montecchio Maggiore.
- Villa Serena in Valdagno.

Each one of those structures is specialized taking care of patients with dementia.

Users involved	
Total number of elderly involved	70
Total number of caregivers involved	5
Was someone excluded from the experimentation?	No.
Other notes	
Not provided.	
Informed consent	
Describe the process of collection of the informed consent	
Not provided.	
Are you uploading a copy of the signed consents to the management website?	
Yes, all of them.	
Did you encounter any problem?	
Not provided.	
InterRAI/Atl@nte	
Are you using Atl@nte to collect data?	Yes.
Description of the work done	
Continuous activity of patient data update.	
Average time needed to carry out an assessment	40 minutes.
Did you encounter any problem using Atl@nte?	
Not provided.	
Do you have any suggestion?	

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Not provided.	
User experience with Atl@nte	5

Activities

Past activities carried out in this period
The two doctors have worked with Ms. DIAZ of ATHOS Madrid to define the criteria for inclusion of the elderly in the study. The staff of nursing homes have continuously updated data in Atl@nte.
Plan for the future
We must submit to the Vicenza Ethics Committee the study on UNCAP for the approval. For this we need the approval of the Ethics Committee of Trento
Did you encounter or do you envision criticalities?
No criticalities.
Other notes
Not provided.

Technologies

Technologies selected
UNCAP Box, Tablet, Smartphone, TV Set, PC, Touchscreen, Kinect, Webcam, EEG Emotiv, Glucometer, Glucometer strips, Pulse oximeter, Kinect, Scale.   No change respect the last bi-monthly report.
Procurement
Nothing.
Hardware installation
Nothing installed, we have not problems.
Technologies question
Nothing.
Technologies budget
No problem. Yes, the technologies cover the budget.

7.10.1. Technologies details

The details of the technologies in which the pilot is interested and the number of devices is as follows:

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USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	UNCAP Box	Will serve to run the UNCAP platform	3
	Tablet	At least one needed at each pilot site	3
	Smartphone	At least one needed at each pilot site	6
	TV Set	At least one needed at each pilot site (evaluate the presence of existing hardware)	3
UC2.1	PC		8
	Touchscreen		8
	Kinect	For full body rehabilitation	8
	Webcam	For cognitive/physical rehabilitation (3D Puzzle)	8
	EEG Emotiv	Optional	8
	Glucometer	Optional	8
	Glucometer strips		8
	Pulse oxymeter	Optional	8
UC4	Kinect	Price referring to the installation of one Kinect and a workstation. Check with the provider if multiple Kinects can be attached to a single computer	3
UC2.10	Scale	Wireless scale. Need to check the availability of APIs	3

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7.11. Pilot in Città della Pieve, Italy

The structure in a nursing home where we assist 56 old people. The location is in Città della Pieve (PG, Italy) and we constantly receive lots of visits (parents, friends, volunteers, citizens) to help us to keep an high level of quality assistance.

The users involved in the study have high level of comorbidity, such as mental deterioration, heart failure, respiratory disease, diabetes, hypertension.

The main goal is preventing all critical situations going to happen.

Our participation in the study is very important to develop new system and methodology in the caring of old people.

Users involved	
Total number of elderly involved	26
Total number of caregivers involved	40
Was someone excluded from the experimentation?	No.
Other notes	
Not provided.	
Informed consent	
Describe the process of collection of the informed consent	
Not provided.	
Are you uploading a copy of the signed consents to the management website?	
Yes. most of those signed by those enrolled in the study.	
Did you encounter any problem?	
The tutors of some patients did not give back the informed consent yet. We will continue to ask again.	
InterRAI/Atl@nte	
Are you using Atl@nte to collect data?	Yes.
Description of the work done	
No problems. Nevertheless I still have some evaluations to collect in Atl@nte web. I hope to finish for this week (the last week of M16)	
Average time needed to carry out an assessment	15 minutes.
Did you encounter any problem using Atl@nte?	

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No problems.

Do you have any suggestion?
Not provided.

User experience with Atl@nte	5

Activities

Past activities carried out in this period
I have continued to collect new evaluation of patients included in the project .

Plan for the future
To finish the collecting phase.

Did you encounter or do you envision criticalities?
No criticalities at the moment.

Other notes
Not provided.

Technologies

Technologies selected
Webcam, Glucometer, Glucometer strips, Blood pressure meter, Pulse oximeter, Scale, Serious games, EEG (Electroencephalography), Kinect. No change respect the last bi-monthly report.

Procurement
We did not have installed some components.

Hardware installation
Yes.

Technologies question
Actually I think the technologies chosen before are good to follow our patients and to improve their quality of life. We hope there will be a moment to discuss on how to use specific technologies.

Technologies budget
No problems. The technologies cover the budget.

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7.11.1. Technologies details

The details of the technologies in which the pilot is interested and the number of devices is as follows:

USE CASE	REQUIRED TECHNOLOGY	NOTES	QUANTITY
ALL (MANDATORY)	UNCAP Box	Will serve to run the UNCAP platform	0
	Tablet	At least one needed at each pilot site	3
	Smartphone	At least one needed at each pilot site	0
	TV Set	At least one needed at each pilot site (evaluate the presence of existing hardware)	0
UC2.1	PC		2
	Touchscreen		2
	Kinect	For full body rehabilitation	2
	Webcam	For cognitive/physical rehabilitation (3D Puzzle)	2
	EEG Emotiv	Optional	0
UC2.4	Glucometer		3
	Glucometer strips	50 strips	10
UC2.5	Blood pressure meter	Bluetooth, standard CONTINUA	4
UC2.6	Pulse oxymeter		3
UC2.7	Pulse oxymeter		Ref. UC2.6
UC2.10	Scale	Wireless scale. Need to check the availability of APIs	1
UC2.11	Pulse oxymeter	Wireless scale. Need to check the availability of APIs	0
	Blood pressure meter	Bluetooth, standard CONTINUA	0
UC2.12	EEG Emotiv	Optional	2
U4	Kinect	Price referring to the installation of one Kinect and a workstation. Check with the provider if multiple Kinects can be attached to a single computer	2

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8. Annexes

8.1. The online module

This section reports in detail the titles of the questions included in the online module and the related guiding text.

General information	
Your name	Please provide your name. It will be added in the "authors" field of the deliverable. (You can add more than one person).
Pilot name	Please select your pilot site.
Description of the pilot	Provide a brief description (5-10 lines) of your pilot site.
Users	
Elderly involved	How many (in total) elderly users have been involved until now?
Users involved	How many (in total) caregivers have been involved until now?
Elderly excluded	Has someone been excluded from the experimentation during the last two months? (Yes/No)
Number	Provide the number of elderly excluded.
Motivation	Please provide a description (i.e. he/she has voluntarily decided to quit, He/she was dismissed from the structure, ...).
Notes	Please provide here any other information you think may be relevant. i.e. any note on inclusion/exclusion criteria, how did you involve the users?, ...
Informed consent	
Description	Please provide a description of the work done with respect to the informed consent and add any information you think may be relevant. i.e. Are you asking patients to sign an informed consent? Are you having any problem with the template we have sent you? Are you using your own template (in this case please send it to us (Trilogis) if you haven't done already)? Who is responsible for the enrolment of patients and who is asking patient to sign the document? Describe the procedure and if there are problems...
Informed consent management site	Are you using the website http://uncap.eu/consent to upload the informed consent signed by the patients? (Yes/No)
Number of entries	How many signed copies of the informed consent have been uploaded to the site?
Problems/suggestions	Did you encounter any problem using the website? Do you have

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	any suggestion to improve the procedure?
InterRAI/Atl@nte	
Using Atl@nte	Are you collecting data with Atl@nte? (Yes/No)
Description of the work done	Please provide a description of what you are doing regarding the collection of data with Atl@nte. How many patients have been evaluated? How often do you do it for each patient (once every week, monthly, ...)?
Time needed	How long does it take (on average) to evaluate a patient using Atl@nte?
Problems	If you encountered any problem with InterRAI/Atl@nte please provide an exhaustive description of the problem.
Suggestions	Please provide any suggestion you may have about the use of InterRAI/Atl@nte.
User experience	Rate it from 1 (Not at all, it's a mess!) to 5 (Everything is fine and we enjoy using it!) regarding the experience using Atl@nte.
Activities	
Past Activities	Please describe any activity that you have carried out in the last period (i.e. meetings, teaching sessions with users/stakeholders/caregivers, conferences...).
Plan for the future	Please describe what you are planning for the next months.
Criticalities	Please let us know if you encountered or envision possible criticalities.
Other notes	
More	If you feel like we have skipped something in the module this is the place where you can add anything you want. Feel free to provide any information you think is relevant and that you want to be added in the deliverable.
Technologies	
Technologies selected	The technologies that you plan to install at your pilot site according to the use cases that you have selected.
Procurement	Describe the actual status of the hardware (available? do you have already installed? procurement process already started? ….) Into www.uncap.eu/hardware the details about each technology component.
Hardware installation	Do you need some guidance on how to use or install them ?
Technologies question	Have you any question or dubts that you want to clarify regarding the technologies ?.

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Technologies budget	Do you any problem with regarding the technologies selected and your pilot budget ? The technologies cover the budget ?