aal-2014-171

SENIOR-TV

PROVIDING ICT-BASED FORMAL AND INFORMAL CARE AT HOME

Deliverable D5.7
Dissemination Plan

Document information	
Due date of deliverable	30/11/2016
Actual submission date	30/11/2016
Organisation name of lead contractor for this deliverable	CNTI
Revision	V1

Dissemination Level		
PU	Public	X
RE	Restricted to a group specified by the consortium (including the Commission Services)	
CO	Confidential, only for members of the consortium (including the Commission Services)	

Authors list	
Author	**Partner**
Aliki Economidou	CNTI
Giorgos Kostopoulos	GLUK

Peer Reviewers	
Reviewer	**Partner**
Luis Anido Rifon	IMATIA

Versioning	
Version	**Summary**
0.1	First draft
0.2	Second draft – Reviewed by Luis Anido Rifon
0.3	Third draft – Additions of Exploitation Section
0.4	Final Version

Table of Contents

1. INTRODUCTION

This document describes the envisaged dissemination activities planned to be carried out during the project, since its goal is to ensure that its products and outputs are going to be exploited and utilized by interested audience even beyond the project's duration.

More specifically it:
- identifies the need of interested sectors, domains and end users;
- defines the end users of the project and how they are going to be consulted during the life of the project;
- explains how during and after the end of the project, the results will be disseminated and exploited;
- explains how these objectives are going to be reached both during and after the development of the project, and which outside bodies are intended to be approached.

The target audience of this deliverable are going to be the members of the consortium and project officers in the AAL programme.

2. DISSEMINATION ACTIVITIES, GOALS & TARGET GROUPS

For the needs of the project, the target groups addressed by the foreseen dissemination and exploitation activities have been divided into primary and secondary target groups. More specifically:

The target groups addressed during the life of the project (primary) are going to be all the people directly involved to the project:

- End-users; older adults, carers

Secondary target groups addressed are going to be:

- Research communities
- Public Health Professionals
- Public administration with competences on public health and social care
- Associations of elderly people
- Academics
- SMEs
- Software developers
- Investors
- Policy makers

The following list of activities aims at approaching these target groups and informing them about the project but also receiving their feedback and input to the development of sufficient awareness tools and methodologies.

2.1 Media (TV, Radio, Popular Magazines)

Press releases for press and audiovisual media will be published when significant progress in the project has been made and at the end of the project. When appropriate, such material will be distributed from the coordinators to provide help for partner intuitions and to make the message reasonably uniform. When suitable, articles will be published in scientific publications. National and local media will also be invited at suitable times in order to spread knowledge about the project to the public.

It is a good method to formally advertise the SENIOR-TV project through the publication of official press releases that coincide with major achievements and/or events. The press releases outline what the SENIOR-TV project is, what it will do, who it is intended to, the innovation it will bring and its benefits. Consortium members are invited to dedicate some resources and

publish one or more press releases during the project lifetime. Press releases will be written in English but to maximize their impact, partners may undertake translations in other languages.

We will aim to reach all key local, national and international stakeholders, including written, TV and radio press.

The media remains one of the most important audiences for SENIOR-TV because it is a means to reach other audiences and generate interest from other groups. It is of course a key audience at this stage of the project and is likely to remain so for the project's duration. The quickest way to reach identified audiences is through specially targeted media (journals, magazines, websites and so on).

- Newspapers (particularly daily national newspapers with health and technology sections)
- Newsletters
- Broadcast (television –health and information technology programmes and radio-news)

Partners are free to disseminate SENIOR-TV through news releases and various types of publications at a local level. It is vital that partners retain detailed records of all coverage in their countries and/or Federations for the Dissemination Reports. Partners must keep a log of who they send news releases and publicity material to and keep track of coverage. The log should consist of date, publication, country, language, journalist, title of cutting (in English) and source (e.g. news release, telephone interview with whom). This is vital for measurement and evaluation of the project in general, and of the SENIOR-TV activity specifically.

Visibility in the press and promotion through other media can help us to:

- Reach our target groups;
- Make the project widely known

The first step is to clarify the kind of audience to be reached through different kinds of media. The partners have to prepare a list of the print and electronic media that SENIOR-TV members use regularly and are familiar with (daily/weekly newspapers, magazines, radio, TV and so on).

A basic package of PR materials will also be developed.

It is important to have a clear target audience(s) in mind for both the Report and for promotional materials. The type of materials and writing that are effective with media are very different from those for policymakers, academics, educators, etc. Trying to please all those different audiences with one publication can often result in not pleasing any of them. Important target audience will be carefully selected and materials that will provide that constituency with the most powerful advocacy tool will be created.

A press kit with a standardized template for all project related material has been produced although the brochures await printing. The press kit includes:

- Logo
- Press release template
- Project brochure and
- Project summary.

A database with all promotional activities will be maintained, keeping all available PR materials (video clips, audio, newspaper publication copies, etc.) SENIOR-TV will also be promoted to existing websites of similar projects or Programs (outlined below).

Each WP leader is responsible producing and updating the dissemination material (e.g. international press releases and newsletters) related to the WP in question.

In compliance with the EU publicity rules, the project aims for a wide popular dissemination to relevant audiences and interest groups. All material produced by this project will be copyrighted and produced in the standard format developed in the press kit at the project's outset. The project dissemination and media template are designed in line with the EU publicity rules.

In compliance with the EU publicity rules all material will include the logo of the programme and the logos of the European Union. The participants of the project will be informed that operations are co-financed by EU.

2.2 Conferences

Even before the beginning of the project but much more intensively since the initiation of the SENIOR-TV project, partners have been trying to locate targeted conferences where they could disseminate initially the scope and the objectives of the project and later its products and results.

The following list of Conferences and Publications has been collaboratively formed by each partner in relation to their personal academic preferences, awareness of the credibility of the conferences and access. Dissemination at this level aims at approaching Academics, Researchers, Health Professionals and Policy Makers who are going to also participate in the conferences interested in listening to innovative ideas. The actual participation of project partners in these conferences will also bring them in the centre of interesting discussions and exchange of ideas that could promote the project work.

The following list of Conferences contains possible conferences that the Consortium members can participate at, in order to disseminate the project.

Med-e-Tel 2016

Med-e-Tel is an event of the International Society for Telemedicine & eHealth (ISfTeH), THE international federation of national associations who represent their country's Telemedicine and eHealth stakeholders. The ISfTeH exists to facilitate the international dissemination of knowledge and experience in Telemedicine and eHealth, to provide access to recognized experts in the field worldwide, and to offer unprecedented networking opportunities. Med-e-Tel 2016 (6-8 April 2016) will feature international experts and users who will present their experiences with current telemedicine and eHealth applications and future developments (virtual consultation, remote monitoring, eLearning, mobile solutions, health information exchange, smart technologies, business models, health economics, user needs/satisfaction, and more).

eHealth Week

eHealth Week 2016 is organised by the Dutch Ministry of Health as part of the Dutch Presidency of the Council of the European Union, the European Commission and HIMSS Europe. This year's educational programme will focus on three main themes: Empowering People, Trust & Standards and Social Innovation & Transition (http://www.ehealthweek.org/).

International Conference on Ubiquitous Computing and Ambient Intelligence

The Ubiquitous Computing (UC) idea envisioned by Weiser in 1991, has recently evolved to a more general paradigm known as Ambient Intelligence (AmI) that represents a new generation of user-centred computing environments and systems. These solutions aim to find new ways to obtain a better integration of the information technology in everyday life devices and activities. AmI environments are integrated by several autonomous computational devices of modern life ranging from consumer electronics to mobile phones. Ideally, people in an AmI environment will not notice these devices, but they will benefit from the services these solutions provide them. Such devices are aware of the people present in those environments by reacting to their gestures, actions and context. Recently the interest in AmI environments has grown considerably due to new challenges posed by society, demanding highly innovative services, such as vehicular ad hoc networks (VANET), Ambient Assisted Living (AAL), e-Health, Internet of Things and Home Automation among others.

The main focus of this edition of the UCAmI Conference will be "Ambient Intelligence: Sensing, Processing and Using Environmental Information". Ambient Assisted Living (AAL) proposes solutions based on Information and Communication Technologies (ICT) to enhance the quality of life of elderly people. AAL promotes the provision of infrastructures and services for the independent or more autonomous living, via the seamless integration of info-communication technologies within homes and residences, thus increasing their quality of life and autonomy and reducing the need for being institutionalized or aiding it when it happens. One natural and critical human need, where Ambient Intelligence can be used, is healthcare. In such a domain,

ubiquitous systems can be used to improve quality of life of the people. While Ambient Intelligence in health applications is increasingly getting research momentum, it does not reach a level of maturity yet. Reasons for such deficiency include not only the challenges of understanding the health domain by computer scientists, but also the difficulty of dealing with a critical domain, where errors are unacceptable. In this sense, a track of Health is aimed at boosting this area of research by focusing not just on innovations on the infrastructure and technology required for achieving the ambient intelligence in health, such as smart environments and wearable medical devices, but also on the development of novel testing, verification and evaluation techniques that make possible the actual implementation of such innovations.

Tracks include AAL, Health, Smart Cities, Internet of Things, Ad-hoc and Sensor Networks, Security, Human Computer Interaction. Selected papers are to be published in the following journals: Sensors Journal, Journal of Mobile Information Systems and Journal of Ambient Intelligence and Humanized Computing.

Annual International Conference of the IEEE Engineering in Medicine and Biology Society

The overall theme of the conference is "Empowering Individual Healthcare Decisions through Technology" and will cover diverse topics from cutting-edge biomedical and healthcare technology research and development to clinical applications and biomedical education. The conference program will also feature high-profile keynote lectures, workshops, invited sessions, oral and poster sessions, sessions for students and young professions, and exhibitions. Themes include wearable biomedical sensor & systems, therapeutic & Diagnostic systems, devices and technologies, clinical engineering, biomedical and health informatics, biomedical engineering education and society and empowering individual healthcare decisions through technology.

AAL Forum

The AAL Forum is the annual showcase event for the people involved in the AAL Programme's projects and the AAL community. Each year, it brings together policy makers, health professionals, commissioners, carers and, of course, older adults, to come and see the latest developments in this exciting area of research. It will be held on the 26th to the 28th at St. Galen, Switzerland- http://www.aalforum.eu/ .

2.3 Scientific Journals

The Consortium aims at publishing scientific articles in at least 2 scientific peer reviewed journals. Possible journals include, but are not limited to:

- PeerJ[1], An open-access award-wining biological and medical science journal.

---

[1] https://peerj.com/

- IEEE Journal of Biomedical and Health Informatics[2]. This journal publishes papers describing recent advances in the field of biomedical and health informatics where information and communication technologies intersect with health, life science and biomedicine.

- Age and Ageing[3] an international journal publishing refereed original articles and commissioned reviews on geriatric medicine and gerontology.

- Gerontology[4] an international journal of experimental, clinical, behavioural and technological gerontology.

- Aging and mental health[5] that explores interdisciplinary and innovative approaches that explore new topics and methods.

- Journal of Ambient Intelligence and Smart Environments[6], which includes the publication of novel research on applications in health care, assisted living, fall detection, elderly care, patient monitoring and applications in smart homes, home safety, entertainment, ambience, multimedia.

- Journal of Intelligent Systems[7] that focuses on high quality research on paradigms, developments, applications and implications in the field of intelligent systems.

- International Journal of Smart Home[8], which publishes original research related to smart home technology and its applications.

- International Journal of Automation and Smart Technology[9], which publishes papers in the fields of mechatronics, automation, ambient intelligence, sensor network, human-computer interfaces and robotics.

- IOT Journal[10] that includes among a broad range of topics smart home, devices, health and fitness and smart vehicles.

2.4 Online dissemination

The project will be presented online at:

- University Websites
- Partners' Websites
- Social Networks (Facebook, Twitter, LinkedIn)
- Popular relevant websites

---

[2] http://jbhi.embs.org/
[3] http://ageing.oxfordjournals.org/
[4] https://www.karger.com/Journal/Home/224091
[5] http://www.tandfonline.com/loi/camh20#.V6IsffmLSM8
[6] http://www.iospress.nl/journal/journal-of-ambient-intelligence-and-smart-environments/
[7] http://www.degruyter.com/view/j/jisys
[8] http://www.sersc.org/journals/IJSH/
[9] http://www.ausmt.org/index.php/AUSMT
[10] http://www.iotjournal.com/

3 DISSEMINATION MATERIAL TO APPROACH END-USERS

Dissemination material will be developed to provide information to all target groups mainly aiming at end-users to attract their interest and involve them actively in the project.

3.1 Brochure

Initial dissemination material will be a brochure that will present briefly the project aims and objectives as well as the project expected outcomes. This short leaflet will be translated in the languages of project partners and will be distributed to all related parties to inform them and invite them to participate to the project.

This brochure will also be used for wide dissemination in the general public and will act as initial information material that will be posted through e-mail to contact persons from TV and Radio programmes.

A poster will also be created, if and when required, during the lifecycle of the project, containing screenshots and other information related to the project's products.

Target audience for this outcome includes the elderly, their families, health professionals, academics, researchers and the wider health community interested in the project (authorities, health policy makers, researchers, university staff and students, etc.), local and national authorities of all levels of health, the general public.

3.2 Project Logo

An important action in establishing the project's identity was to create its logo, which would be associated and included in all the documents (paper or electronic) developed by the project partners.

Prior to the start of the project, the consortium selected a logo that would serve as the project's identity throughout the duration of the project as well as beyond. To achieve this, a number of alternative project logos were created and proposed. The final choice was made with the following criteria:

- The logo should be self-representative
- It should be printed and distinguished in high quality on a colour and greyscale format
- It should be easily conceived
- It should be memory grasping

In order to immediately improve the Project visibility, a logo was designed and is to be used in all the dissemination tools, ranking from the web site to fact sheet and posters.

The logo is simple and distinctive.

There are no formal restrictions regarding the use of the logo. Nevertheless it is requested not to edit, squeeze, distort or rotate it as logos in three predefined sizes (2000x1600, 1000x800, 500x400 300x240, 100x80) were developed.

The Logo was prepared at the project's launch.

3.3 Electronic Newsletters

Electronic Newsletters will be created at key points in the project's lifetime to inform the public about its progress and other interesting information that may be available at the time. The newsletters will also be available online at the project's website. In total 6 newsletters will be produced during the lifecycle of the project.

4 Exploitation Plans

4.1 Audience identification and profiling

In this step we will identify and profile the audience to be targeted with the present communication initiative. Evaluating closely the audience is **essential in choosing the most effective ways to communicate with it**.

Within the audience, there are groups of interest. These are groups of individuals that have an interest or are going to be affected by Senior-TV's initiative. Within these groups of interest one may find:

- Employees
- Executives
- Managers
- Business units
- Allies
- Project teams from companies belonging Senior-TV's consortium

Secondary target groups addressed are going to be:

- Research communities
- Public Health Professionals
- Public administration with competences on public health and social care

- Associations of elderly people
- Academics
- SMEs
- Software developers
- Investors
- Policy makers

The analysis of these groups of interest should revolve around the following questions:

- Whose knowledge, attitudes or behaviour must be changed in order to meet Senior-TV's goal? These are Senior-TV's **primary groups of interest**.

- Who else is affected if Senior-TV's initiative succeeds in its goal? These are Senior-TV's **secondary groups of interest**.

- Are there others who can influence primary and secondary groups of interest? These are Senior-TV's **tertiary groups of interest**.

If a given group of interest shows consistency within its members due to the fact that they all have similar knowledge, attitudes and behaviour, it is not necessary to fragment it further. If this is not the case, fragmentation is required in order to achieve groups with consistent characteristics.

For each group of interest identified, the following issues should be considered:

- What does the consortium know about the group's knowledge, attitudes and behaviours as related to the issue in question?

- What are the barriers to this group fully supporting or participating in reaching Senior-TV's goal? What are the benefits if they do?

- What are the characteristics of this group? How do they spend their time?

- What is Senior-TV's potential impact on ethical, social and legal aspects related to the group?

- Are there language considerations?

- What or who are they influenced by?

- What makes new information credible for them?

- What or who could motivate change or action?

It may be useful to generate a map showing the relations between the different groups of interest, including their level of influence on each other.

4.2 Stakeholder groups

Senior-TV has identified five main groups of client stakeholders relevant for the scope of the project:

- **Developers** – developers of AAL solutions and technologies in form of both hardware and software developers;
- **Deployers** - deployers of integrated AAL solutions, or technical service providers responsible for installation, configuration, customization, and orchestration of integrated AAL solutions;
- **End users** - end-users, such as assisted persons and their caregivers, who use installed AAL applications and services;
- **Assistance providers** - providers of external services to the end-users that may acquire solutions provided by the developers and use services provided by the deployers in order to set up an infrastructure necessary for their business, usually with interoperability needs toward home AAL systems and front-ends for the end users;
- **Authorities and supporters** – supporting organizations and authorities that deal with socioeconomical and legal context of AAL, thus having an impact on the dissemination and uptake of Senior-TV.

Stakeholders are defined as individuals, teams, or organizations (or classes thereof) with interests in, or concerns relative to, Senior-TV project results. Each stakeholder group has different needs that should to be addressed with different dissemination activities.

Annex – Dissemination Reporting Form

Name:	Date:	Partner Responsible:
Location (Country/City):	Type of dissemination activity (i.e. brochure, conference, meeting, fair etc.)	Number and Type of Participants:
Scope:		
Description of Activity:		
Supporting Documentation:		
Comments:		

aal-2014-171

SENIOR-TV

PROVIDING ICT-BASED FORMAL AND INFORMAL CARE AT HOME

Quality Checklist
Dissemination Plan

Peer Reviewer	
Reviewer	**Partner**
Cibran Ledo	IMATIA

CRITERIA	VERIFIED
1) Conformity to Standards and Project templates	**X**
Logos (AAL, SENIOR-TV)	**X**
Project title, reference, author, version, revision, data	**X**
Mandatory statements (disclaimer)	**X**
Conformance to the standard structure required by EACEA (ex. Disclaimer, Executive summary, Acknowledgement, Introduction, page numbers, etc.)	**X**
2) Language check (typing mistakes, grammar, etc.)	**X**

3) Coherence with objectives declared in the Technical Annex	**N/A**
Obj. 1: To elaborate the project's Quality Plan following well-accepted methodologies tailored to the learning domain and based on a detailed description of projects objectives, success indicators and work plan.	
Obj. 2: To monitor all project activities and provide quality control of all project results as well as recommendations for improvements and identification of best practices.	
4) Reliability of data	**X**
Information and sources well identified	**X**
Data and information are free from factual or logic errors	**X**
The analysis (if applicable) is reliable, i.e. previous studies have been sufficiently reviewed; qualitative information and quantitative data are balanced and appropriate	
5) Credibility of findings	**N/A**
Findings supported by evidence based on data analysis	
Replicability of findings	
6) Validity of conclusions	**X**
Conclusions meet evaluation questions and information needs	**X**
Conclusions supported by proper evaluation findings	**X**
No conclusions missing according to the evidences presented	**X**

7) Please indicate any deviations from contractual conditions (WP objectives declared in the technical annex)

-

8) Comments/Suggestions for revision

-

9) Implementation of revisions/modifications suggested and explanation for eventual rejections (performed by the Responsible of the Deliverable)

10) Deliverable accepted

☒ YES
☐ NO

If NO, please state reasons:

---

aal-2014-171

SENIOR-TV

PROVIDING ICT-BASED FORMAL AND INFORMAL CARE AT HOME

Quality Checklist
Dissemination Plan

Peer Reviewer	
Reviewer	**Partner**
Anna Philippou	SMMFF

CRITERIA	VERIFIED
1) Conformity to Standards and Project templates	X
Logos (AAL, SENIOR-TV)	X
Project title, reference, author, version, revision, data	X
Mandatory statements (disclaimer)	X
Conformance to the standard structure required by EACEA (ex. Disclaimer, Executive summary, Acknowledgement, Introduction, page numbers, etc.)	X
2) Language check (typing mistakes, grammar, etc.)	X
3) Coherence with objectives declared in the Technical Annex	

Obj. 1: To elaborate the project's Quality Plan following well-accepted methodologies tailored to the learning domain and based on a detailed description of projects objectives, success indicators and work plan.	
Obj. 2: To monitor all project activities and provide quality control of all project results as well as recommendations for improvements and identification of best practices.	
4) Reliability of data	**X**
Information and sources well identified	**X**
Data and information are free from factual or logic errors	**X**
The analysis (if applicable) is reliable, i.e. previous studies have been sufficiently reviewed; qualitative information and quantitative data are balanced and appropriate	
5) Credibility of findings	
Findings supported by evidence based on data analysis	
Replicability of findings	
6) Validity of conclusions	**X**
Conclusions meet evaluation questions and information needs	**X**
Conclusions supported by proper evaluation findings	**X**
No conclusions missing according to the evidences presented	**X**
7) Please indicate any deviations from contractual conditions (WP objectives declared in the technical annex)	
8) Comments/Suggestions for revision	
9) Implementation of revisions/modifications suggested and explanation for eventual rejections (performed by the Responsible of the Deliverable)	
10) Deliverable accepted	
☒YES ☐ NO	
If NO, please state reasons	