

SOCIABLE DELIVERABLE D5.2

“Operational Pilot Sites”



Project Acronym	SOCIABLE
Grant Agreement No.	238891
Project Title	Motivating platform for elderly networking, Mental reinforcement and social interaction
Deliverable Reference Number	SOCIABLE_WP5_D5.2
Deliverable Title	“Operational Pilot Sites”
Revision Number	V1.2
Deliverable Editor(s)	University of Valencia- LabHuman (UPV)
Authors	Irene Zaragoza (UPV), Reyes Moliner (PREVI), Eva Rinnan (Trondheim), Chiara Zaccarelli (AUSL) , Antonella Bandini (COFO), Olga Lymperopoulou (HYGEIA), Roberta Annicchiarico (FSL) and Eva Stamou (SPC)

Project co-funded by the European Commission within the ICT Policy Support Programme		
Dissemination Level		
P	Public	P

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This deliverable contains original unpublished work except where clearly indicated otherwise.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.

PROPRIETARY RIGHTS STATEMENT

This document contains information, which is proprietary to the SOCIABLE Consortium. Neither this document nor the information contained herein shall be used, duplicated or communicated by any means to any third party, in whole or in parts, except with prior written consent of the SOCIABLE consortium

Revision History

Revision	Author(s)	Organization(s)	Date	Changes
0.1	Irene Zaragozá	UPV	05/04/2011	Provision of Structure and Table of Contents
0.2	Eva Rinnan	TRONDHEIM	20/04/2011	Contribution of the final status of TRONDHEIM
0.3	Chiara Zaccarelli and Antonella Bandini	AUSL, COFO	21/04/2011	Contribution of the final status of COFO and AUSL
0.4	Olga Lymperopoulou	HYGEIA	22/04/2011	Contribution of the final status of HYGEIA
0.5	Eva Stamou	SPC	03/05/2011	Contribution of the final status of SPC
0.6	Roberta Annicchiarico	FSL	05/05/2011	Contribution of the final status of FSL
0.7	Reyes Moliner	PREVI	06/05/2011	Contribution of the final status of PREVI
0.8	Irene Zaragozá	UPV	11/05/2011	Revision of the contents
0.9	Reyes Moliner, Roberta Annicchiarico. Chiara Zaccarelli and Antonella Bandini	PREVI, FSL, AUSL and COFO	20/05/2011	Update of contribution of status of some pilots sites
1.0	Irene Zaragozá	UPV	24/05/2011	PreFinal version
1.1	Irene Zaragozá, Stelios Pantelopoulos	SLG	03/06/2011	Fine Tuning and Quality Control, Addition of photos from the pilot sites
1.2	Irene Zaragozá	UPV	10/06/2011	Final version

PROPRIETARY RIGHTS STATEMENT

This document contains information, which is proprietary to the SOCIABLE Consortium. Neither this document nor the information contained herein shall be used, duplicated or communicated by any means to any third party, in whole or in parts, except with prior written consent of the SOCIABLE consortium

Abstract

This deliverable documents the status of the seven SOCIABLE pilot sites (HYGEIA, SPC, AUSL, FSL, COFO, TRONDHEIM, PREVI), prior to the start of the formal pilot operations based on the SOCIABLE clinical protocol. It report information about all the pilot sites of the project, while covering all the aspects of the sites' status (e.g., technical, medical, operational) This status is the result of intensive pilot preparation activities, as well as the formalization of pilot operations procedures following a three-month period of informal operations. Based on these preparatory activities all the sites have: (a) Installed/deployed the SOCIABLE technical developments including the project's infrastructure software, cognitive training games, book-of-life and back-office applications, (b) allocated the personnel to be involved in the pilots along with their roles and responsibilities, (c) scheduled the pilot sites in accordance to the SOCIABLE protocol, (d) tested the pilot sessions (and overall) process in the scope of realistic settings. The completion of this deliverable is an important milestone of the project, which signals the readiness of the pilot sites for formal pilot operations.

PROPRIETARY RIGHTS STATEMENT

This document contains information, which is proprietary to the SOCIABLE Consortium. Neither this document nor the information contained herein shall be used, duplicated or communicated by any means to any third party, in whole or in parts, except with prior written consent of the SOCIABLE consortium

Table of Contents

Revision History	2
Abstract.....	3
Table of Contents.....	4
List of Figures	5
List of Tables	5
Executive Summary.....	6
1. Introduction.....	8
2. Equipment and infrastructure	10
3. Platform installation and deployment (WE SHOULD INCLUDE IMAGES FROM ALL SITES).....	12
3.1. COFO	12
3.2. AUSL	13
3.3. FSL	13
3.4. Trondheim	13
3.5. PREVI	13
3.6. HYGEIA	14
3.7. Installation and deployment instructions	14
4. Ethical issues.....	16
4.1. COFO	16
4.2. AUSL	16
4.3. FSL	17
4.4. PREVI	17
4.5. Trondheim	17
4.6. HYGEIA	17
4.7. SPC.....	18
5. Human resources.....	19
6. Early Feedback from SOCIABLE deployments and Lessons Learnt	21
6.1. COFO	21
6.2. AUSL	21
6.3. FSL	21
6.4. PREVI	22
6.5. Trondheim	22
7. Localization	23
8. Plan for formal operations	24
8.1. Plan Operation for HYGEIA	24
8.2. Plan Operation for SPC.....	25
8.3. Plan Operation for AUSL and COFO	26
8.4. Plan Operation for FSL	26
8.5. Plan Operation for PREVI	27
8.6. Plan Operation for TRONDHEIM	27
9. Conclusions.....	30

List of Figures

Figure 1: Users playing SOCIABLE at COFO	12
Figure 2: Users playing SOCIABLE at AUSL.....	13
Figure 3: Users playing SOCIABLE at the day centre (PREVI pilot site).....	14
Figure 4: Users playing SOCIABLE at HYGEIA hospital	14

List of Tables

Table 1: Surface PCs for the in-home sessions	11
Table 2: PCs bought by each pilot site	11
Table 3: Human resources involved in the pilot operations (All Pilot Sites)	20

Executive Summary

The main objective of the SOCIABLE project is to introduce and pilot a novel ICT based approach to the cognitive training and social activation of elderly individuals. The approach is going to be piloted with the participation of 350 senior citizens in 7 different pilot sites (TRONDHEIM Kommune, Hygeia Hospital, Morgagni Pierantoni Hospital, Municipality of Forlì, Social Policy Center of the Municipality of Kifissia, Santa Lucia Foundation and PREVI S.L) from 4 European countries (Greece, Italy, Norway, Spain). The pilot operations of the project have a planned duration of 18 months, which includes: (a) An initial three month informal pilot period, which involves elderly users and medical experts engaging in the SOCIABLE approach and using the SOCIABLE surface platform, without however applying the formal clinical/medical protocols specified in the project and (b) A formal pilot operations period (following the initial three month period), which entails the faithful application of all the medical procedures (e.g., cognitive functional and affective assessments, specified number of sessions, planning of the cognitive exercises of the elderly) that have been prescribed in SOCIABLE WP2 and WP7. The present deliverable documents that the seven pilot sites have undertaken at necessary preparatory actions and are ready for commencing formal pilot operations. As the title of the deliverable indicates, all the pilot sites are «operational». Indeed, as of the first week of May 2011, all SOCIABLE pilot sites have commenced pilot operations based on the technological, infrastructural, human resources and operational processes described in this deliverable.

The specification of the SOCIABLE formal pilot operations prescribe a disciplined process, which is thoroughly described in SOCIABLE deliverable D6.1 and involves technical/technological, operational and medical/clinical aspects. Based on this process all sites had to take a series of preparatory steps prior to starting the formal pilot operations. From a technological perspective, the pilots are based on the use of the SOCIABLE platform including surface computing hardware (i.e. the Microsoft Surface and surface personal computers) and software/middleware that has been integrated in the scope of the project. Hence, the commencement of the SOCIABLE pilots hinges on the successful installation, deployment and use of the SOCIABLE platform at all the pilot sites. This has been achieved by all the pilot sites, which have successfully deployed and used the SOCIABLE platform, including all its modules (cognitive games, book of life, back-office application).

From an operational perspective, the SOCIABLE model had to be blended in the care service provisioning processes of the pilot sites. This includes the specification of the timing of the SOCIABLE sessions (at various timescales (e.g., weekly, monthly and semestrial)), along with the specification of the personnel to be involved. Indeed, all pilots have specified the carers and medical experts to be involved, along with their detailed roles and responsibilities during the pilots' period. Furthermore, all pilot sites have formalized the processes of user selection and assessment, based on

which they have selected the users to be involved in the first three months of the pilots. Moreover, all pilot sites have undertaken the processes required in order to acquire all the required ethical approvals, in accordance to the SOCIABLE ethical management strategy and to the national ethical-related rules and regulations at the various countries.

From a medical/clinical perspective, each pilot site possesses the resources required to apply the SOCIABLE approach, in terms of its clinical aspects. The later involve the performance of tests and the proper configuration of SOCIABLE sessions. Medical and operational aspects are also associated with the appropriate training of the personnel (and the elderly users) in order to ensure their graceful participation of the pilots.

The deliverable reports on all the above perspectives, with emphasis on the participating users, the availability of experts, the space and technology infrastructure required to accommodate the SOCIABLE technology platform and to conduct the pilots, as well as the required training programs and social interaction services. Note that this deliverable is the result of the preparatory actions that have been undertaken at the various pilot sites, and which have been reported in the earlier deliverable of this WP, namely Deliverable D5.1.

1. Introduction

The main objective of SOCIABLE is to pilot a novel model for ICT assisted cognitive training and social activation for a wide range of senior citizens including normal elderly, older adults with mild cognitive impairment, as well as patients suffering from mild Alzheimer disease. Pilot operations are going to be organized across various sites in four European countries (Greece, Italy, Norway and Spain). Senior citizens are going to participate to the SOCIABLE pilots within leisure/care centers, as well as within their homes. Overall, the organization of the pilot operations is associated with a host of different issues, spanning the administrative, organizational, technical, technological and medical perspectives.

From an administrative and organization perspective, the various sites have ensured the appropriate resources (i.e. human resources and materials) in order to successfully organize and carry out the pilots. From a technical/technological perspective, the sites have deployed the SOCIABLE ICT infrastructure, in order to blend innovative ICT activities in their existing care services offerings. Finally, from a medical perspective each site has defined the medical-related activities that are associated with the tasks of applying the SOCIABLE activities in a way that maximizes the positive effects on the target elderly participants/users.

The present deliverable provides a detailing status of each pilot site during the pilot operations, and describes the different actions done to get this status. The specification of the SOCIABLE formal pilot operations prescribes a disciplined process that involves technical/technological, operational and medical/clinical aspects. From a technical/technological perspective, the sites have purchased the needed hardware (Microsoft surface platform and surface PCs) and have installed and deployed the SOCIABLE platform on them.

From an operational perspective, the various sites have ensured the appropriate resources (i.e. human resources and materials) in order to successfully organize and carry out the pilots. A detailed planning of the activities of each pilot site has been prepared; this planning contains the number of sessions, groups, etc.

Finally, from a medical perspective each site has defined the medical-related activities associated with the tasks of applying the SOCIABLE in a way that maximizes the positive effects on the target elderly participants/users. It also involves the training of the different experts and careers that will participate in the pilot operations.

The deliverable is structured as follows: Section 2 following this introductory section presents the equipment decisions made and the equipment bought by each pilot site. Section 3 describes how the Microsoft surface and the SOCIABLE platform have been deployed at each site. Section 4 deals with the ethical issues and how all the pilot sites have obtained the ethical approval to start the pilot operations. In Section 5 the personnel involved in the pilot operation is listed. Section 6 describes the first

inputs obtained when the platform has been installed at the different sites. Section 7 explains how the localization issues have been managed and Section 8 provides a plan for the pilot operations for each site. Finally, section 9 concludes the deliverable.

2. Equipment and infrastructure

Each pilot has purchased a Microsoft Surface platform that will be used for the SOCIABLE sessions at the care centre. The technical characteristics of the platform are illustrated in SOCIABLE deliverable D3.2.

Five different proposals of PC were presented to the pilot sites so they could choose which one to buy based on their preferences:

- HP Touch Smart 300
- Dell Inspiron One 2205
- Asus EeeTop 2011E- B009E
- Samsung U300
- Gateway One ZX4300-31

The following table summarizes the main features of each model.

	HP Touch Smart 300	Dell Inspiron One 2205	Asus EeeTop 2011E-B009E	Samsung U300	Gateway One ZX4300-31
Screen	20" BrightView (1600x900) 16:9 multi-touch	21,5" WLED Full HD (1920x1080) multi-touch	20" LCD HD (1600x900) 16:9 multi-touch	20" LCD HD (1600x900) multi-touch	20" LCD HD (1600x900) 16:9 multi-touch
Processor	AMD Athlon II X3 400e (2,2GHz)	AMD Athlon II X2 240e (2,8GHz)	Intel Pentium Dual Core E5700 (3GHz)	Intel Core i3-370M (2,4GHz)	AMD Athlon II X2 240e (2,8GHz)
Memory	4 GB DDR3-SDRAM	4 GB DDR3	2 GB DDR3	4 GB DDR3-SDRAM	4 GB DDR3-SDRAM
Storage	640GB SATA 7200rpm	500GB SATA 7200rpm	320GB SATA	1 TB SATA 5400rpm	320GB SATA 7200rpm
Operating System	Windows® 7 Home Premium (64-bit)				
Graphic card	ATI Radeon® HD 3200	ATI Mobility Radeon HD 4270	Intel GMA X4500	nVIDIA GeForce 310M 512MB	ATI Radeon® HD 4270
Sound	High Definition	High Definition	2 x 2 Watt Speakers	High Definition	HD audio

	Audio 5.1	Audio, 2 x 4W speakers		Audio, SRS 3D Sound	
Included Accessories	Wired keyboard & USB optical mouse	USB keyboard, USB optical mouse	USB Keyboard and mouse	Wireless keyboard & Wireless mouse	Wireless keyboard & Wireless mouse
Weight	11 kg	7,88 kg	5,8 kg	7,2 kg	8,64 kg

Table 1: Surface PCs for the in-home sessions

For the in-home sessions each pilot site has bought a different number of PCs depending on the number of home users they have. The following table shows the number and model of PCs selected and purchased by each pilot site.

Pilot Site & Country	Number of PCS	Model of PC
HYGEIA S.A (Greece)	4	Dell Inspiron One 2205
Social Policy Centre of the Municipality of Kifissia (Greece)	1	Dell Inspiron One 2205
Commune Forli (Italy)	4	Asus EeeTop PC ET2010AGT
Morgagni Pierantoni Hospital (Italy)	3	Asus EeeTop PC ET2010AGT
Fondazione Santa Lucia (Italy)	3	Asus EeeTop PC ET2010AGT
Trodheim Kommune (Norway)	1	Dell Inspiron One 2205
PREVI S.L (Spain)	5	Dell Inspiron One 2205

Table 2: PCs bought by each pilot site

3. Platform installation and deployment

Before the commencement of the pilots the interim version of the SOCIABLE platform has been installed and deployed in each pilot site with the help of the technical partners.

The interim version of the sociable platform includes:

- The back-office module
- The book of life application
- A set of 12 cognitive training games

More detail about the interim version of the platform can be found in deliverable D4.2. The installation of the SOCIABLE platform allowed all pilot sites to experiment and actually use the platform, with a view to identify/report any problems/issues and provide relevant feedback to the technical partners. This process allowed the pilot sites to acquire practical experience on the use of the technological developments of the project.

3.1. COFO

The Microsoft surface, together with the PCs for the in-home sessions, was moved to the senior social center “Centro anziani Due Tigli” within the first week of May, so that the program could start on May 9th. As of the last two weeks of April, all the equipment was at CEDAF’s premises for the initial informal training of the medical experts, social workers and care assistants who would be working at the pilot sites of COFO and AUSL.



Figure 1: Users playing SOCIABLE at COFO

3.2. AUSL

The MS Surface has been located in the room identified of the Specialized Memory Centre and the technical personnel from Cedaf proceeded to the installation and deployment.

The training on the use of the platform, the back-office module and the cognitive games has been made by the technical operators of Cedaf in date 19/04/2011 to the personnel involved in the pilot operation.



Figure 2: Users playing SOCIABLE at AUSL

3.3. FSL

The MS Surface has been installed and deployed at FSL in a dedicate room in Day Hospital. Technical experts from Cedaf proceeded to the installation and deployment.

The technical experts from Cedaf, have made the training on the use of the platform, the back-office module and the cognitive games in date 21/04/2011. Personnel involved in the pilot operation have been trained.

3.4. Trondheim

The platform is installed, deployed and ready for use. TRONDHEIM was the first site to heighten the Microsoft surface platform in order to improve ease of use by the elderly. This paradigm has been followed by the rest sites as well. The games of the interim version of the platform (as listed in Deliverable D4.2) have been installed, deployed and tested. Health professionals have practiced during the informal phase.

3.5. PREVI

The MS Surface has been located at "Tres Forques" day centre in a dedicated room. Technical experts from UPV proceeded to the installation and deployment.

The technical experts have made the training on the use of the platform, the back-office module and the cognitive games in date 15/04/2011 and 06/05/2011.

The following images show a group of subjects playing SOCIABLE during a session.



Figure 3: Users playing SOCIABLE at the day centre (PREVI pilot site)

3.6. HYGEIA

The MS Surface has been installed and deployed at HYGEIA in a dedicate room near the Memory Clinic of the hospital by technical experts from SLG. Trondheim's paradigm has been followed in order to heighten the MS Surface and as a result, improve ease of use by the elderly. Personnel involved in the pilot operation have been trained on the use of the platform, the back-office module and the cognitive training games



Figure 4: Users playing SOCIABLE at HYGEIA hospital

3.7. Installation and deployment instructions

In order to facilitate the installation and deployment of the Sociable platform in the different pilot sites and to ensure that all the sites have the same set up, some instructions were provided to all the technical partners:

- Install .Net framework 4 (dotNetFx40_Full_x86_x64.exe)
- Install SQL Express 2008 and Management Tools (SQLEXPRT_x86_ENU.exe). When prompted select SQL Server Authentication. and give to the sa account password "P@ssw0rd"

- Choose the Default Instance of the SQL Express when prompted
- Add to the sql server administrators the local user 'Tableuser'
- Copy the contents of the Sociable subdirectory into a folder c:\Sociable (make sure you don't end up with c:\sociable\sociable)
- Copy c:\sociable\Sociable.xml into the hidden directory C:\ProgramData\Microsoft\Surface\Programs (control panel->folder options->view ->Show hidden files,folders, or drives)
- Install Teamviewer (www.teamviewer.com) (optional) so it is possible to have remote access if there are any issues.
- Give to the Network Service Account full permissions to the c:\Sociable folder
- Open Management Studio and attach the c:\sociableAzure.mdf database (clear the .ldf file so that it creates a new one)
- Microsoft surface normally has a user called TableUser that enters in game mode. This together with the pc Administrator (whichever you have created) should have full access to the database.
- To do that, go in Management Studio to Security->Logins ->Server roles and make both users public and sysadmin. In User Mapping select SociableAzure and give the db_owner role membership (for both make sure they use the sa for SQL Authentication)
- Now enter Surface with user TableUser (Game mode) and you should be able to get into Sociable! You can also try Sociable while being admin, by starting the User Input first (from the desktop) and then the Surface Shell (again from the desktop)

4. Ethical issues

The Sociable Ethical Committee elaborated the clinical protocol (see deliverables D6.1 and D7.1). Each pilot site has carried out the necessary activities to get the ethical approval to start the pilot operation. Following, are mentioned the main ethical activities performed by the different pilot sites:

- Presentation of the SOCIABLE clinical protocol to the regional/local committees or councils entitled to give ethical approvals for the SOCIABLE pilot operations.
- Creation of an informed consent form that should be delivering to the subjects participating in the SOCIABLE formal pilot operations.
- Secure storage, delivery and access of pilot's data (notably personal and private data) in order to safeguard privacy and confidentiality of the data. Mechanisms for secure access include also granting and managing access rights to the SOCIABLE Information. Such mechanisms have been incorporated in the interim version of the SOCIABLE platform (described in Deliverable D4.2).

4.1. COFO

COFO investigated local and national regulations applicable to the activities of SOCIABLE and no ethical issues have arisen.

Clinical aspects are the responsibility of AUSL, who applied for and received the approval of the Ethics Committee concerning the SOCIABLE clinical trial.

4.2. AUSL

AUSL submitted the SOCIABLE Clinical Protocol (elaborated in agreement among the different pilot sites) and the other documents required to the Internal Ethical Committee for the approval in compliance with the national/regional rules.

The required documents included the preparation of an Informed Consent form to be delivered to the users participating in the SOCIABLE formal pilot operations.

All the documents required have been translated and submitted to the Internal Ethical Committee, in order to be processed and evaluated for the approval.

The Ethical Committee expressed its positive vote and granted its approval to the Sociable study on April 7th 2011.

In addition to the ethical approval AUSL assured the secure storage, delivery and access of pilot's data (notably personal and private data) in order to safeguard privacy and confidentiality of the data.

4.3. FSL

The Ethical Management activities for the Santa Lucia Foundation were focused on Preparation of the Informed Consent as a part of the document submitted to FSL Ethical Committee. This form will be used to collect consent from the users involved in the project. We also realized translation in Italian of the core of the project especially focused on the clinical protocol submitted. A copy of this summary will be delivered to patients and a copy of the doctor who will care.

Submission of the Sociable protocol, informed consent, official request form, Curricula of clinician participant in the protocol have been sent to the FSL Ethical Committee.

The Ethical Committee approved the Sociable study in date 18th of February, 2011. As a part of the information sent to the Ethical Committee we guarantee the secure storage of data collected and private data protection.

4.4. PREVI

PREVI presented the SOCIABLE Project to the social wellbeing technicians of the Valencia municipality (which oversees the "Tres Forques" day centre). We also present the assessment protocol to the management team of the centre and to the medical experts.

PREVI has now the formal approval of the ethical committee of the centre and the signed informed consent form of the users. The informed consent form was written by the SOCIABLE consortium and then translated into Spanish.

Finally remark that the users' data will be stored securely in order to ensure their confidentiality, and based on the process described in D4.2

4.5. Trondheim

Trondheim pilot site has finished the local ethical protocol and presented it for the local scientific and ethical committee. An approval is expected the first week in May. An informed consent and other information materials to the participants are created along with procedures for how to include and to follow up the included users.

Each patients name is assigned to an ID that is connected to the results. The patients name/ID is written on a paper and stored in a secure place off-site. Patients will use a plastic card with a second ID to log in to the platform. If a medical expert needs a named patients results - that expert need the patients main ID (from the secure place off site)

4.6. HYGEIA

The SOCIABLE Clinical Protocol (in English) and the Informed Consent Form (translated in Greek) and an extended summary of the SOCIABLE Clinical Protocol (in Greek) were submitted for approval to the Ethical Committee of the hospital. The Committee expressed its positive vote and approved the SOCIABLE study. The users' data and all the formal documents regarding SOCIABLE will be stored securely in order to ensure confidentiality.

4.7. SPC

The Social Policy Center of the municipality of Kifissia has prepared (jointly with HYGEIA) the documentation required for the reception of the ethical approvals. The relevant documentation included: (a) An extended summary of the SOCIABLE protocol translated in the Greek language, (b) The informed consent form in the Greek language and (c) The detailed/full version of the SOCIABLE protocol. SPC has got ethical approval by the municipal council.

5. Human resources

Following tables list the people involved in the pilot operations and their activities for each pilot site:

HYGEIA	
Health professional Name	Activities performed
Olga Lymperopoulou	Neuropsychological assessment Sociable training sessions
Paraskevi Sakka	Medical issues
Eva Ntanasi	Sociable training sessions
SPC	
Health professional Name	Activities performed
Maria Stefa	Sociable training sessions
Eva Stamou	Sociable training sessions
Giannis Roxanis	Neuropsychological assessments
AUSL	
Health professional Name	Activities performed
Chiara Zaccarelli	Neuropsychological Assessment Coordinating of the Sociable training sessions
Francesca Di Tante	Sociable Training sessions
Lucia Fabbri	Sociable Training sessions
COFO	
Health professional Name	Activities performed
Chiara Zaccarelli	Medical expert
Antonella Bandini	Social worker
Oretta Mariotti	Care assistant
Alessandra Sanna	Care assistant
Mariangela Bertoni	Care assistant
Loredana Casamenti	Care assistant
Arianna Manfredi	Care assistant
FSL	
Health professional Name	Activities performed
Francesco Barban	Neuropsychological assessment Sociable training sessions
Alessia Federici	Neuropsychological assessment Sociable training sessions
Nadia Tini	Neuropsychological assessment Sociable training sessions
Simone Giuli	Sociable training sessions
Claudia Ricci	Sociable training sessions
PREVI	

SOCIABLE: Motivating platform for elderly networking, mental reinforcement and social interaction
 WP5- Pilot Sites Preparation
 Deliverable D5.2: “Operational Pilot Sites”

Health professional Name	Activities performed
María Carbonell	Neuropsychological Assessment Sociable training sessions
Milagros Burguera	Neuropsychological Assessment Sociable training sessions
Carolina Pérez	Sociable training sessions
TRONDHEIM	
Health professional Name	Activities performed
Ann Elin Johansen	Practical Coordinator and supervisor for Sociable training sessions.
Julie Krutå	Assisting practical coordinator Performing training sessions
Mimmi Næss	Sociable training sessions
Kirsti Næss	Sociable training sessions
Maja Albrigtsen	Sociable training sessions
Marie Therese Arntsen	Sociable training sessions
Berit Ileraand	Sociable training sessions
Karen Olderø	Sociable training sessions
Signe Sæther	Sociable training sessions
Solbjørg Nilsen	Sociable training sessions
Tomas Munkvold	It- coordinator
Eva Rinnan	Pilot site coordinator
Olav Sletvold	Medical expert, Neuropsychological assessment
Ingvils Saltvedt	Medical expert, Neuropsychological assessment
Ann kristin Lyngvær	Health professional, Neuropsychological assessment
Solaug Kjøllestad	Health professionals, Neuropsychological assessment
Ingri Furuly Eriksen	Communication and marketing activities
Ingrid Haug Olsen	Health professionals and supervising training sessions
Solveig Dybvik	Manager of Valentinlyst health and welfare centre.
Helge Garåsen	Leader of the Sociable in Trondheim

Table 3: Human resources involved in the pilot operations (All Pilot Sites)

6. Early Feedback from SOCIABLE deployments and Lessons Learnt

As previously commented the SOCIABLE platform has been installed and deployed in the different pilot sites. In some of them an informal use of the platform with elderly users has been done.

These initial tests has arisen important issues. For example it was detected the need of lift up the table to make it more comfortable for the users. The different pilot sites have bought or built a structure to lift up the Microsoft Surface.

6.1. COFO

Since the platform was installed at the senior social centre "Centro anziani Due Tigli" only a few days before the beginning of the trial, no previous informal use by the elderly was possible. As mentioned above (see 3.) the platform was used for the initial informal training of medical experts, social workers and care assistants at CEDAF's premises in the second half of April.

6.2. AUSL

Considering that the Sociable platform has been installed and deployed at AUSL only a few days before the beginning of the trial (on 22nd April), no informal testing by elderly users was possible.

As already mentioned, the platform has been used for the initial informal training of medical experts, social workers and care assistants at CEDAF's premises.

An informal use of the platform with elderly users could take place in the few days just before start of the formal pilot operations.

As for the need to elevate the Platform in order to make it more comfortable or the users, the issue was sorted out by placing the MS surface on a purpose-built wooden base.

6.3. FSL

The SOCIABLE platform has been installed and deployed at FSL in date 21/4/11. The platform has been used during the training sessions.

The informal tests have been done with elderly patients (volunteers). The preliminary results are quite satisfactory.

About the need of lift up the table to make it more comfortable for the users, we are providing to make built a structure to lift up the Microsoft Surface.

6.4. PREVI

The Sociable platform has been installed in the day centre 'Tres Forques' 15th April. We have done an initial informal training of medical experts, and also we have test the surface with some elderly people in order to decide the new height of the Surface.

From the first sessions with the elderly people we have concluded that:

- They like SOCIABLE platform, specially the games, and they would spend the entire hour with them.
- With the games, an improvement in mood is observed, however this is not like this in book of life, as remembering affects them emotionally. As a suggestion, could we assess making 'the book of life' firstly and the games later?
- When we've asked for permission to use images to the families, they have expressed their appreciation as their relatives are very happy, excited and like the Surface.
- They don't understand the statement "How lonely do you feel now?"
- They find difficulties with the rules of the game "guess who"
- The time given by the game to hide the objects is excessive (15 minutes), and therefore, later is very difficult to find them and the user hasn't got time to play the rest of the game.

6.5. Trondheim

The table has been lifted. Trondheim has also tested the different developed games and started training health professionals.

7. Localization

All the software components of the Sociable interim version have been localized: sociable shell, cognitive games, book of life application and back office. The platform supports five languages (English, Spanish, Greek, Italian and Norwegian).

The localization of the software is based on the use of:

- The internationalization capabilities of the underlying technologies of the SOCIABLE services: These technologies provide the means for building internationalized applications.
- The design of the SOCIABLE databases: The SOCIABLE database have been specially designed in order to hold text and other resource in all target languages. Hence, the proper population and management of data in the target language can enable the internationalization of the SOCIABLE applications.

More information about the localization of the sociable platform can be found in Deliverable D3.3.

Also the non-software elements used in the pilots (test, informed consent form, manuals, etc) have been translated into the different languages.

8. Plan for formal operations

Following are listed the common decisions made by all the pilot sites related to the pilot operations:

- Execution of a SOCIABLE program comprising several sessions. Each of the session involved cognitive training games and the Book-of-Life application for social activation. The duration of a SOCIABLE programme will be 3 months. In the scope of this programme the elderly will attend two sessions per week, each one featuring 60 minutes duration.
- A SOCIABLE pilot program must include 12 weeks of continuous Cognitive Training without any interruption i.e. there is not flexibility in interrupting programs or shuffling/spacing the sessions.
- Half of the elderly will participate in group sessions, while the rest half of users will be participating in individual sessions.
- Initially, the drop outs will be counted as a results associated with the program. In case the number of droop-outs appears high, the policy will be revisited.
- Elderly users' absence in some/several sessions should be expected. The absences will be recorded as a statistical indicator associated with the program. No rescheduling of the relevant sessions will take place. If the total number of absences exceeds a certain percentage then this (individual) will be considered as "Drop out" or "not counted because of the absences". The percentage of absences leading to a drop-out or not-counted has to be between 25% and 35%.

More details about the pilot operation plan can be found in deliverable D6.1. Following all the pilot sites provides a detailed scheduling of the cognitive assessments and of the cognitive training sessions.

8.1. Plan Operation for HYGEIA

		Pre-intervention	Intervention	Post-intervention	Follow-up
G1		early May 2011	May - July 2011	late July 2011	October 2011
G2	late May	late July	Sept - Nov 2011	early Dec 2011	

G3		late Nov 2011	Dec - Feb 2012	early March 2012	May 2012
G4		late March 2012	March-May 2012	early June 2012	

8.2. Plan Operation for SPC

The cognitive assessments will take place at 21st of April and will last until 6 of May.

The leaker and the LSNS-18 tests will happen simultaneously in the beginning of each phase, in the end of it and three months after the end of each.

The cognitive training sessions for the first period will launch at 9 May and will end 29 July.

USERS	INDIVIDUALS	GROUPS*	TOTAL	%
G1	9	2	15	25
G2	9	2	15	25
G3	6	3	15	25
G4	6	3	15	25
TOTAL	30	30	60	100
%	50	50	100	

- *Each group will consist of three individuals

We divided the users equally for each phase and according to the table we are going to have 15 users for each phase 50% attending individual sessions and 50% attending group sessions. Following the plan of 2 session per week for each user we have included in our plan 22 sessions/week for G1, 22 sessions/week for G2, 18 sessions/week for G3, 18 sessions/week for G4.

SESSIONS	PER WEEK		TOTAL
	INDIVIDUALS	GROUPS	
G1	9 x 2 = 18	2 x 2 = 4	22
G2	9 x 2 = 18	2 x 2 = 4	22
G3	6 x 2 = 12	3 x 2 = 6	18
G4	6 x 2 = 12	3 x 2 = 6	18
TOTAL	30	30	60

Each user by the end of each phase (3 months – 12 weeks) will have attended 24 sessions

8.3. Plan Operation for AUSL and COFO

As of the first week of May 2011 all pre-training assessments for G1 have already been carried out and training sessions are due to start on 9th May 2011. A schedule for all plan operations (training sessions and cognitive assessments) until July 2012 has also been compiled, but it could be subject to changes in the future.

		GROUP 1	GROUP 2	GROUP 3	GROUP 4
2011	W1: 17 Apr – 23 Apr	G1 pre-training assessment (8)			
	W2: 24 Apr – 30 Apr				
	W3: 1 May – 7 May		G2 pre-training assessment (8)		
	W4: 8 May – 14 May	G1 2 group sessions	G1 3 ind. Sessions	G2 control group (8)	
	W5: 15 May – 21 May				
	W6: 22 May – 28 May				
	W7: 29 May – 4 Jun				
	W8: 5 Jun – 11 Jun				
	W9: 12 Jun – 18 Jun				
	W10: 19 Jun – 25 Jun				
	W11: 26 Jun – 2 Jul				
	W12: 3 Jul – 9 Jul				
	W13: 10 Jul – 16 Jun				
	W14: 17 Jul – 23 Jul				
	W15: 24 Jul – 30 Jul				
	W16: 31 Jul – 6 Aug	G1 post-training assessment (8)	G2 control assessment (8) + G2 pre-training assessment (8)		
	W17: 7 Aug – 13 Aug	summer vacations			
	W18: 14 Aug – 20 Aug				
	W19: 21 Aug – 27 Aug		G2 2 group sessions G2 3 ind. Sessions		
	W20: 28 Aug – 3 Sep				
	W21: 4 Sep – 10 Sep				
	W22: 11 Sep – 17 Sep				
	W23: 18 Sep – 24 Sep				
	W24: 25 Sep – 1 Oct				
W25: 2 Oct – 8 Oct					
W26: 9 Oct – 15 Oct					
W27: 16 Oct – 22 Oct					
W28: 23 Oct – 29 Oct					
W29: 30 Oct – 5 Nov					
W30: 6 Nov – 12 Nov					
W31: 13 Nov – 19 Nov	G1 follow-up assessment (8)	G2 post-training assessment (8)	G3 pre-training assessment (10)	G4 pre-training assessment	
W32: 20 Nov – 26 Nov					
W33: 27 Nov – 3 Dec					
W34: 4 Dec – 10 Dec					
W35: 11 Dec – 17 Dec					
W36: 18 Dec – 24 Dec					
W37: 25 Dec – 31 Dec	winter vacations				
W38: 1 Jan – 7 Jan					
W39: 8 Jan – 14 Jan			G3 2 group sessions	G3 4 ind. Sessions	
W40: 15 Jan – 21 Jan				G4 control group	
W41: 22 Jan – 28 Jan					
W42: 29 Jan – 4 Feb					
W43: 5 Feb – 11 Feb					
W44: 12 Feb – 18 Feb					
W45: 19 Feb – 25 Feb					
W46: 26 Feb – 3 Mar					
W47: 4 Mar – 10 Mar					
W48: 11 Mar – 17 Mar					
W49: 18 Mar – 24 Mar					
W50: 25 Mar – 31 Mar					
W51: 1 Apr – 7 Apr			G3 post-training assessment (10)	G4 control Assessment + G4 pre-training assessment	
W52: 8 Apr – 14 Apr					
W53: 15 Apr – 21 Apr					
W54: 22 Apr – 28 Apr				G4 1 group sessions G4 4 ind. Sessions	
W55: 29 Apr – 5 May					
W56: 6 May – 12 May					
W57: 13 May – 19 May					
W58: 20 May – 26 May					
W59: 27 May – 2 Jun					
W60: 3 Jun – 9 Jun					
W61: 10 Jun – 16 Jun					
W62: 17 Jun – 23 Jun					
W63: 24 Jun – 30 Jun					
W64: 1 Jul – 7 Jul					
W65: 8 Jul – 14 Jul			G3 follow-up assessment	G4 post-training assessment	
W66: 15 Jul – 21 Jul					
W67: 22 Jul – 28 Jul					

8.4. Plan Operation for FSL

USERS	INDIVIDUALS	GROUPS*	TOTAL	%
G1	3	3	12	25
G2	3	3	12	25

SOCIABLE: Motivating platform for elderly networking, mental reinforcement and social interaction
 WP5- Pilot Sites Preparation
 Deliverable D5.2: “Operational Pilot Sites”

G3	3	3	12	25
G4	3	3	12	25
TOTAL	12	36	48	100
%	25	75	100	

*Each group will consist of three individuals

The cognitive assessments will take place on 21st of April and will last until 6 of May. Whereas, the cognitive training sessions for the first period will begin on 9th of May and will end after 24 sessions of training.

8.5. Plan Operation for PREVI

The following table shows the timing of the PREVI pilot.

	N	T0	M1-M3 May-July	T1	August	M4-M6 Sept-Nov	T2				
					Summer vacations		T0	M7-M9 Jan-March	T1	M10-M12 April-Jun	T2
G1	5 (group: 1 of 3 people; individual: 2)	X	SOC	X	Summer vacations		X*				
G2	5 (group: 1 of 3 people; individual: 2)	X		X	Summer vacations	SOC	X				
G3	5 (group: 1 of 3 people; individual: 2)				Summer vacations		X	SOC	X		X**
G4	5 (group: 1 of 3 people; individual: 2)				Summer vacations		X		X	SOC	X

8.6. Plan Operation for TRONDHEIM

SOCIABLE: Motivating platform for elderly networking, mental reinforcement and social interaction
 WP5- Pilot Sites Preparation
 Deliverable D5.2: "Operational Pilot Sites"

Detailed schedule from May to Nov. 2011 for the first pilot operations with group A and B

Month	Week	Inclusion of users	Training health professionals	Cognitiv assessment	Training sessions	Evaluation/ adjustment
May	17		X			
	18	X Group A Inter- vention	X	X		
	19	X Group A Inter- vention	X	X		
	20	X Group B Controll		X	X Group A	
	21	X Group B Control		X	X Group A	
June	22				X Group A	
	23				X Group A	
	24				X Group A	
	25				X Group A	X
	26				X Group A	
July	27				X Group A	
	28				X Group A	
	29				X Group A	
	30				X Group A	
Aug	31				X Group A	
	32			X Group A		
	33					
	34					
	35					
		Summer holiday	Week	33, 34, 35		
Sept.	36			X Group B	X Group B	
Sept. Nov.	37- 48	Group C Group D Week 44- 49			X Group B	

SOCIABLE: Motivating platform for elderly networking, mental reinforcement and social interaction
 WP5- Pilot Sites Preparation
 Deliverable D5.2: "Operational Pilot Sites"

Nov. Dec	49-51			X Group A and B		
---------------------	-------	--	--	--------------------	--	--

Detailed schedule for every week with training sessions

Monday	Tuesday	Wednesday	Thursday	Friday
Start at 10.00	Start at. 10.00	Start at. 10.00	Start at. 10.00	Start at. 10.00
Start at. 12.00	Start at 12.00	Start at. 12.00	Start at. 12.00	Start at. 12.00
Start at. 14.00	Start at 14.00	Start at. 14.00	Start at 14.00	Start at. 14.00

Our plan is to give the participants regular training days and hours. We have the possibility to have four sessions some days.

9. Conclusions

This deliverable has presented the status of the different pilot sites at the beginning of the pilot operations. All the pilot sites have done a great effort to be ready for the pilot commencement.

At this document, different critical aspects to reach this status have been considered:

- Infrastructure and equipment commission.
- Deployment and installation of the Sociable platform.
- Ethical Approvals
- Personnel involved in the pilots.
- Localization of the contents.

For each one of the above mentioned aspects, first the common activities done by all the pilot sites have been described. Then the specific activities done by each pilot site are presented.

Moreover each pilot site has provided a detailed plan for the pilot operations, describing how the users will be divided in groups, and a detailed scheduling of the cognitive assessments and of the cognitive training sessions.

Overall, the SOCIABLE pilot sites are «operational» and ready for the commencement of the pilot operations. The later operations have commenced (as far as their formal part is concerned) as planned i.e. during the first week of May, 2011.