



D7.5 Dissemination and Communication Plan V2

ehcoBUTLER Project

Version: 1.04
September, 30th 2020



This project has received funding from the European Union's Horizon 2020 research and innovation programme under Grant Agreement 643566

DOCUMENT CONTROL

Title: D7.5 Dissemination and Communication Plan V2
Date: September 30th 2020
Author: YDATA
Peer Review: EVERIS
Distribution: Public
Project: ehcoBUTLER (GA 643566)
Filename: ehcoBUTLER_D7.5_Dissemination_and_Communication_Plan_V2_v1r04.docx

DOCUMENT CHANGE RECORD

Date	Version	Author	Change Details
03/03/2020	1.00	YDATA	ToC Release
30/05/2020	1.01	ESE, everis, INTRAS	Updates on Communication plan and Dissemination capabilities
25/09/2020	1.02	YDATA	Inputs and additional modifications
29/09/2020	1.03	EVERIS	Revision
30/09/2020	1.04	YDATA	Final version

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1. ABBREVIATIONS

1.1. Abbreviations and acronyms

- **EC:** European Commission.
- **MCI:** Mild Cognitive Impairment

1.2. Definitions

- Words beginning with a capital letter shall have the meaning defined either herein or in the Rules or in the Grant Agreement related to the project.

1.3. Additional Definitions

- **Project:** Project refers to the ehcoBUTLER project funded from the European Union's Horizon 2020 research and innovation programme under Grant Agreement 643566.

2. EXECUTIVE SUMMARY

As said, dissemination is considered a key factor for the success of the ehcoBUTLER project due to both its foundational level (of specific interest for Academic partners) and its clear societal exploitation opportunities of promoting good and healthy behaviours. This is even more true considering the restart of the project after more than two years, with a need to re-establish a dissemination network. The dissemination objectives are the same illustrated in the first version of this deliverable:

- Stress the advantages in the preventive care for aged persons, its benefits, use and applicability in the different health market sectors, namely: persons with MCI; public institutions (hospitals, nursing home, tele-assurance, home care services, municipalities); private institutions (hospitals, nursing homes, tele-assistance, home care services, insurance, developers of new apps, ONGs, telecommunications companies and Elderly Associations).
- Find potential sponsors and partners for enforcement of ehcoBUTLER concept (hospitals, tele-care operators, manufacturers, health insurance companies, etc.).
- Co-creating two-ways communication channels with relevant stakeholders, research communities, policy makers, media and industry for disseminating the achievements and results.
- Ensuring that the project results will live on a commercial context after the project closure (thus assisting the Exploitation of the project results).

In this deliverable we have updated the rules of the dissemination activity, decided in the D7.1, with a particular attention to online dissemination (social media). Online tools, in fact, assume a crucial role during the COVID-19 outbreak: since March 2020, any in presence activity has been forbidden or difficult to undertake, due to moving restrictions and social distance.

Also, we insert some information about dissemination metrics monitoring. An important element that we add in this deliverable is the way of communicating to different target audience through different key messages.

Finally, we insert some small updates in the individual dissemination capabilities, already presented in D7.1.

3. INTRODUCTION

One of the most important elements for the success of ehcoBUTLER initiatives is the creation of awareness of its on-going activities and results in the enlarged stakeholders' community involved in the care management process of aged population.

A fundamental step of our research activity is achieving consensus of the scientific community on the project results, especially after its restart with the final aim of developing a solution for the market. An important step is, in fact, to update the stakeholders' mapping and have a new strategy to engage them.

To this end, Chapter 4 is dedicated to the understanding of the project key messages to be used in the communication strategy. After having defined in D7.1 the stakeholders' typologies, in this deliverable we detail the most important messages to deliver, associated to the different kind of stakeholders.

Chapter 5 describes the status of communication and dissemination metrics, based on the targets foreseen in the DoA.

Chapter 6 provides an updated version of the communication tools, with a specific focus on social media strategy: to foster the engagements on the different project social media accounts, some more detailed guidelines have been added, to help partners in the dissemination of project results as well as of content related to subjects connected to MCI, dementia and other.

Chapter 7 presents the updated version of the Dissemination capabilities table, already built in D7.1.



4. EHCObUTLER KEY MESSAGES

One of the most important elements of each communication strategy is the definition of its target audience, with a clear identification of its most important stakeholders.

We recall from D7.1 that ehcoBUTLER target audience comprises a broad range of stakeholders:

1. The **private sector and business community**, to whom the exploitation plan is specifically addressed. It is represented by several typologies of organizations. Namely: hospitals, nursing homes, tele-assistance, home care services, insurance, developers of new apps, NGOs, telecommunications companies and Elderly Associations.
2. The **end-users of the identified solutions and their organisations**, both at national and European level, to whom the project awareness raising strategy is addressed and who may wish to make use of the scientific knowledge and policy recommendations to enhance their own social and political aims.
3. **Policy makers at local/regional/national/European and international levels**, who may wish to make use of project research to better plan their policies.
4. **Health-and social care related actors**, including practitioners, health authorities, health and social service providers, social workers, caregivers and so on, who may wish to implement project findings and outcomes in their everyday work.
5. The **wide European scientific community**, who will benefit from the literature reviews and the scientific research conducted during the project.
6. The **wide audience of European citizens**, comprising both experts and interested stakeholders, as well as lay-people, who will hear and learn from the project, whose findings will be disseminated also in a plain and user-friendly language.

We also distinguished them between clients and general stakeholders:

- potential clients, those who might need the service:
 - Persons with MCI
 - Relatives
 - Public Institutions: hospitals, nursing homes, tele-assistance, home care services, municipalities,
 - Private Institutions: hospitals, nursing homes, tele-assistance, home care services, insurance, developers of new apps, NGOs, telecommunications companies and Elderly Associations
- and general stakeholders, i.e. those not directly involved in the project, but that could make a difference in satisfying client needs:
 - Policy makers
 - Common citizens
 - Researchers

The stakeholders' analysis already performed in D7.1 has allowed to define a broad range of potential stakeholders, that we grouped in different ehcoBUTLER project perspectives:



- **Patients' perspective:** the most important perspective, since ehcoBUTLER solutions aim at directly addressing their needs and producing lifestyle changes in their healthcare behaviours.
- **Organization and management perspectives:** ehcoBUTLER solution intends to support cognitive impairment care management changes, creating a more patient-centric and self-management approach.
- **Policy perspective:** ehcoBUTLER solution will produce several changes in the cognitive impairment care management process.
- **Economic perspective:** ehcoBUTLER solution aims at increasing the quality of the cognitive impairment care management for ageing population, reducing costs of treatments and hospitalization.
- **Clinical perspective:** ehcoBUTLER solution would reduce pharmacological treatments and therapies as well as hospitalization of the aged persons, through behavioural changes in their lifestyle and proactive participation to personal care management processes.
- **Public health perspective:** ehcoBUTLER solution would also increase the knowledge of the ageing population in relation to their health conditions and their degree of responsiveness to more active lifestyle management and related support. Data collected from users' experiences can be useful to design more effective active healthy ageing campaigns and policy initiatives.

At this stage, after many years since the first version of the D7.1, we want to clearly state the key messages that the communication strategy should send to its audience, with a clear distinction among different stakeholders.

The key messages identified are:

KM1: ehcoBUTLER platform may help elderly people to live actively and with a better quality

KM2: ehcoBUTLER may help relatives and caregivers to monitor elderly people at risk of dementia and MCI

KM3: ehcoBUTLER could contribute to reduce welfare and healthcare systems to reduce their costs associated to MCI and Alzheimer diseases

KM4: ehcoBUTLER contributes to active healthy aging European and world targets

KM5: the number of elderly people is growing and the whole society will benefit from ehcoBUTLER ecosystem

Those key messages are going to be delivered to different stakeholders depending on their characteristics. The following table makes a summary of the most suitable key messages for each stakeholders' typology. Also, we indicate the typology of project objectives taken from DoA (reported in Annex I) that are connected to the delivery of each key message. We see that UO objectives are related to key messages 1-2-4-5 and are the most important, since ehcoBUTLER project considers the users' need as the most important element. Key messages 2 and 5 are also oriented to reach the technological objectives, while key messages 1 and 3 are more business oriented.



Table 1 - Key messages, stakeholders and objectives

Key Message	Stakeholders	DoA objectives typology
KM1	End users, private sector and business community, European scientific community, Wide audience of European citizens	UO, BC
KM2	End users, Private sector and business community, Health-and social care related actors	UO, TI
KM3	Health-and social care related actors, European scientific community	BC
KM4	European scientific community, Wide audience of European citizens	UO
KM5	Health-and social care related actors, European scientific community, Wide audience of European citizens	UO, TI



5. EHCOCBUTLER DISSEMINATION METRICS

In this section, we give a brief sum up of the metrics foreseen in the DoA, indicating the targets already achieved.

Some of the metrics show an advanced status, while others are still far from the foreseen target. COVID-19 outbreak has had a negative impact on communication activities since March 2020: only online activities were allowed in most of the cases and partners' team have experienced an important slowdown. For this reason, it was not possible to attend nor to organize especially activities like conferences and workshop. D7.7 will contain a more detailed summary of activities performed with a tentative plan for next year activities, still in an uncertain situation due to COVID-19.

Table 2 - Dissemination metrics

Activities	Foreseen in DoA	Achieved
International Events and Conferences	24 papers submitted in conferences; 2 workshops organized by ehcoBUTLER consortium	7 papers submitted, 5 book chapters on conference proceedings; 1 workshop organized
International exhibitions and events of Horizon 2020	Participation in 3 exhibitions; 3 Horizon 2020 events	3 participation in exhibitions; 1 horizon event attended
Scientific publications	20 "gold open" and 10 "green open" access publications	2 golden and 7 green open access publications achieved
Traditional communication channels	10 articles to national non-specialized magazines; 10 articles to websites	
Online dissemination through Internet	1 website; 8 press releases; 4 promotional campaigns; 6 newsletters (one every six months); 3 outreach initiatives; 5 many-to-many initiatives; 5 open debates.	1 website; 2 press releases; 2 newsletters; 1 outreach initiative; 1 many-to-many.
Biomedical Communities and Social Research Networks	5 accounts on social networks; 200 followers after 18 months of the project; 500 at the end of the project activities.	5 accounts created; Followers 1769.
ehcoBUTLER Presentation Materials	12 posters; 5 brochures; 8 posters that will be utilized in workshops and conferences. 4 webinars will be developed and proposed to the on-line community of the project.	1 brochure; 2 posters.



Traditional communication channels	10 articles to national non-specialized magazines; 10 articles to websites	3 articles to national non-specialized magazines; 4 articles to websites
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6. EHCObUTLER DISSEMINATION AND COMMUNICATION STRATEGY, TOOLS AND PLAN

This section aims at discussing the project strategy for leveraging dissemination and communication activities through a continuous stakeholder engagement process. To this end, in D7.1, we defined the principles underpinning our dissemination and communication strategy, and then we presented the tools that will be used to support the strategy.

6.1 ehcoBUTLER dissemination and communication strategy

In the deliverable D7.1, we elaborated the first version of the dissemination-communication strategy. We also described the main online and offline tools to engage our stakeholders.

Here, we inserted a brief summary of the main rules that we need to keep in order to have our **social media** constantly updated and alive.

In the framework of ehcoBUTLER project, communication and dissemination activities on social media are essential to spread the message of the project, especially during COVID-19 outbreak.

With the project's suspension being lifted in December 2019, dissemination on social media started again. Three social media platforms are used: Facebook, Twitter, and LinkedIn, with a post on each platform every two weeks. Mostly, scientific articles about MCI, dementia and Alzheimer are shared.

Despite the partners' effort, the overall interaction with the published content could be improved.

COVID outbreak has slowed down project partners' activities in a general way; many of the partners have not had the possibility to work with the whole staff and in many cases working conditions have been frozen. Also, project activities have been stopped in many cases, with no news to disseminate about the project.

Therefore, reshaping the social media strategy may increase the number of people reached and get the project known. The strategy will be based on the following elements.

1) Increasing the posting frequency

Since the beginning of October 2020, ESE, TME, everis, INTRAS, AIMA, VIDAVO and UJI will share one post per week. Therefore, the posting frequency will increase in the probability to get more interactions and engagements, and to show the public that the ehcoBUTLER project is restarting its activities, although facing the COVID emergency. Those activities will be coordinated and supervised by ESE.

2) Diversifying the content

Up until now, the content published on social media consisted mainly of scientific articles related to the project's topic such as Alzheimer's disease, dementia, and mild cognitive impairments (MCI). New and more entertaining content will now be proposed to the audience, still related to the topics mentioned above. The new contents include:

- Videos
- Infographics and images
- Quizzes
- Quotes
- Sharing news about the project's progress
- Scientific articles



By proposing a diversified content, partners' aim is to capture the attention of a wider audience and to reach more people than just the scientific community. The idea is to make the project accessible to a large number of people and that is why sharing a more playful type of content seems fitting to popularize ehcoBUTLER.

As mentioned above, partners will publish on social media once a week, following the schedule below that shows the content's turnover until the end of the year.

Week	Content
Week 1	Scientific article
Week 2	Quote
Week 3	Video
Week 4	Quiz
Week 5	Infographics
Week 6	Sharing news about the project

3) Establishing a more active presence on social media

If posting is important to keep people updated on what is going on about the project, interacting with others is also the very reason for social media. Therefore, partners will not only post but like, share, and comment on relevant publications in order to connect with other initiatives and always in the spirit of getting the project known by the greatest number of people.

This is particularly relevant for Twitter and LinkedIn. First of all, Twitter is very good for contacting people directly by replying to their tweets. Communication experts point out that a tweet's lifetime is around 18 minutes. Adding that to the character limitation, the opportunity of having an impact on Twitter is difficult, but not impossible. That is why the tweets sent have to be striking and on point, and it is essential that partners are on the lookout to spot the relevant tweets to reply to, share, and like.

Finally, the same attention should be paid to LinkedIn as it is a great tool for networking, and it allows to connect with professionals that might be interested in ehcoBUTLER. Therefore, partners will try to interact more on that network.

4) Hashtags' usage

Hashtags are particularly used on Twitter, and also a bit on LinkedIn and Facebook. Users place the symbol # in front of a keyword, which allows the word to be connected to a certain category and to be visible for people who are interested in that particular topic.

The main hashtag for ehcoBUTLER is #echcobutler. The following hashtags should also be used: #dementia, #Alzheimer, #caregiving, #mentalhealth, #brain, #Exercise, #tech, #health, #MCI, #healthyaging, #elderlypeople.

By using those hashtags, tweets and LinkedIn and Facebook posts will be easier to find for interested stakeholders and should increase the social media posts' visibility.

A part of fostering the dissemination through the use of social media, it is expected to establish synergies with current state of the art H2020 projects related to Healthy and Independent Living and EHR exchange (such as SMART BEAR and Smart4Health) that will help to reach more stakeholders through cross-dissemination activities.



6.2 Dissemination and communication tools

The dissemination tools, useful for ehcoBUTLER dissemination, were described in D7.1, §5.2.

We briefly recap that our dissemination tools are:

- a project logo.
- a project press release.
- a website with basic information on the project.
- social network activities.
- further dissemination and communication tools.

The main update has been the new version of the official project website. We were forced to implement a new website for the ehcoBUTLER project once the project was lifted due to the expiration of our previous web domain during suspension time. The new address is www.ehcobutler-project.eu.

Also, we will foster the possibilities of cooperation with other EU funded projects, with the aim of improving cross dissemination activities. In particular, SMARTBEAR and Smart4Health projects, both financed by Horizon2020 programme, will be contacted for this scope.



7. EHCObUTLER CONSORTIUM DISSEMINATION CAPABILITIES

The following table provides an updated list of the ehcoBUTLER partners' dissemination capabilities that will be used to increase the dissemination and awareness creation of the ehcoBUTLER project achievements. It has been already presented in D7.1 and it contains some small modifications after partners' inputs.

These capabilities will be further updated in the next dissemination documents and they constituted integral part of the ehcoBUTLER exploitation and dissemination strategy.

Table 3 - ehcoBUTLER consortium individual dissemination capabilities Outlook of the dissemination activity already planned by ehcoBUTLER partners

Partners	Dissemination capabilities	Description of the dissemination networks used to disseminate and communicate relevant information about each organization	Preferred journals for publications of relevant information about each organization
EVERIS	Disseminate information related to business and about its projects through Corporate Communications Department, which has nationwide presence (Madrid, Barcelona, Bilbao, Zaragoza, Valencia and Sevilla), internationally and Europe and Latin-America.	It conducts the corporate disseminating information through news agencies and media on and offline, as well as through its website and social media channels (Facebook, Twitter and LinkedIn).	<p>Everis has participated in publications for different research projects but it does not have a regular collaboration with a journal/magazine. Some of the publications done in last 4 years concerning H2020 R&D projects include:</p> <p>“HEARTEN: A co-operative mHEALTH environment targeting adherence and management of patients suffering from Heart Failure”. I Congress on Coordination and Management of EU-funded Health Research Projects, Valencia, 8th November 2016.</p> <p>‘Integrating a mHealth application into the EHR ecosystem of Andalusian Health Public system’. Informatics for Health 2017, 24 – 26 April 2017, Manchester.</p> <p>“Take heart, take heed. The HEARTEN Project develops a co-operative m-health environment targeting the adherence and management of patients suffering from heart failure”. Pan European Networks: Health 01, pages 174-175, June 2017.</p> <p>“ehcobutler. Una plataforma eSalud para la atención socio-sanitaria de pacientes con deterioro cognitivo”. IV Congreso Internacional de Investigación en Salud y Envejecimiento && II Congreso Internacional de Investigación en Salud. Murcia, 29 y 30 Junio 2017.</p> <p>“Diseño de una plataforma de eSalud para pacientes de la tercera edad con deterioro cognitivo leve: resultados preliminares del proyecto ehcobutler”. IV Congreso Internacional de Investigación en Salud y Envejecimiento && II Congreso Internacional de Investigación en Salud. Murcia, 29 y 30 Junio 2017.</p>



<p>CIBER</p>	<ul style="list-style-type: none"> • Media relations • Social media management • Internal communication issues (Annual reports, etc.) • Newsletter • international and national events • conferences • international exhibitions and events of Horizon 2020 • publications in international and national scientific journals • Workshops. • Press conferences. 	<p>Informational alerts about relevant information collected from media among members of the organization and the scientific community. Holding of scientific symposiums. Emission of informative notes. Participation at international and national events and conferences. Publications in international and national scientific journals. CIBER usually publishes many articles in scientific journals every year, most of them located in the 1st and 2nd quartile.</p>	<p>PloS one Behaviour Research and Therapy The Journal of Positive Psychology Cyber therapy& Rehabilitation Interacting with Computers International Journal of Human-Computer Studies Human-Computer Interaction Computers in Human Behavior Cyber psychology, Behavior, and Social Networking Cyber psychology & Behavior Behavior Therapy Studies in health technology and informatics Aging and Mental Health International Journal and Telemedicine and applications</p>
<p>YDATA</p>	<p>Dissemination and communication activities of YourDATA are tailored to individual needs. The YourDATA team has an excellent expertise to disseminate through several on and offline media data obtained from a statistical activity.</p>	<p>YourDATA use common channels to disseminate its activities and specific communications to reach specific groups or partners where YD is involved. Main on and offline tools used by YourDATA are its website, Facebook and LinkedIn accounts, local and national press, television network.</p>	<p>No preference</p>



<p>INTRAS</p>	<p>Resources and communication channels:</p> <ul style="list-style-type: none"> • Communication Department which coordinates the communication strategy of INTRAS as organization but it is also in charge of coordinating the communication activities in European Projects (currently running 25 EU projects). • Managing/updating and making dynamic30 web pages that Intras has designed for specific actions and projects and at least five communities for caregivers, people with disabilities, e-Health professionals, etc. • One Editorial House: EdINTRAS • Scientific communication: Researchers at INTRAS play an active role in the scientific community constantly publishing articles, papers and attending conferences and events. 	<p>INTRAS is an active member of more than 50 Associations, Platforms & National, European and Ibero American Networks</p> <p>INTRAS is leading a unique Cluster in Innovative Solutions for and independent life in Spain (SIVI Cluster), in collaboration with the regional administration on social services and innovation. INTRAS was recognized in 2011 as a Centre of Excellence Janssen and this award highlights INTRAS Social & Health Coordination Model as a good practice. Integr@tención ecosystem (led by INTRAS) has been awarded as a Reference Site by the EIP on AHA, as a model of excellence for a comprehensive approach to active and healthy ageing. In the frame of different projects centred on mental health prevention & treatment, a close approach with local and national stakeholders is central.</p>	<p>Age and Ageing Aging and Mental Health International Psycho geriatrics International Journal of Geriatric Psychiatry Archives of Clinical Neuropsychology Health and Quality of Life Outcomes</p>
<p>TELEFONICA</p>	<p>Through its internal and external channels (Webs, Social Media, Annual Report, Fundación Telefónica) once the pilot is running.</p>	<p>We will use common channels for mass media and specific communications for specific partners and groups through our partnerships, organizations where we are members, etc.</p>	<p>No preference.</p>



ASISTEL	ASISTEL as a part of Social Care System in Serbia will participate in numerous events covered by press, TV and other media. In all of events ASISTEL will present ehcoBUTLER project and explain relevance of such project on future steps in cognitive care and prevention	ASISTEL will use web page, internet forums, press release, articles in specialized and daily magazines as well as professional contacts of all of members of Association of Social Workers of Serbia	ASISTEL has regular cooperation with all of municipality paper monthly news in more than 20 municipalities in Serbia. Also through investigation unit of University for Medicine of Belgrade on Psychology ASISTEL will try to publish results and methods for cognitive prevention
ESE	Members network, partners network and social network. Some partners usually agree disseminating for E-Seniors about its projects (Age Village, CNAV forums, Association forums, some Seniors clubs).	E-Seniors newsletter, website and accounts for Facebook, Twitter and LinkedIn. Flyers of its projects during events, conferences and meetings; ESE organizes its own events (in October and in January) where it disseminate about the organization and its projects.	ESE does not make publications in journals, it publishes the information and news about its projects on the websites or Facebook pages as Age Village, Waléa Facebook page, Vivastreet, Izineo, etc.
AIMA	AIMA for dissemination will use mostly his social network: website (4000 visitors per month) and Facebook page (1200 friends). Through Listening Center open from Monday to Friday from 9 am to 6 pm AIMA will inform its users of the project. All with the support of its press officer	Website Facebook journalistic tested television network	Il Mattino Redattore Sociale Napoli Città Sociale Il Quotidiano Sanità



8. HISTORY OF CHANGES

7.1 Version 1.00

Initial version. ToC Release.

7.2 Version 1.01

Revisions. Updates on Communication plan and Dissemination capabilities.

7.3 Version 1.02

Revisions and Input contents.

7.4 Version 1.03

Peer review. Corrections.

7.3 Version 1.04

Final version



9. ANNEX I – EHCObUTLER OBJECTIVES

As reported in the DoA (pages 56-57), the key objectives of the project are classified in three groups (namely user-oriented (UO), business (BC), and technological (TI) objectives). They are:

1. **UO-OBJ1.** To create and analyse the use cases related to the promotion of healthy aging and independent living that should support the provision of the different pilots and related business models. User with Mild Cognitive Impairments (MCI) participation in the creation of these use cases will be a critical element in ensuring their success. In all the stages of the project, the needs and expectations of end users will be specially taken into account for each module composing the platform. Every kind of users (elder people with mild cognitive impairments, caregivers, physicians, etc.) that interacts with the platform will also contribute with their requirements. Even though the platform is based on solutions already approved and validated by a large number of users, several changes will need to be performed to adapt it to the identified use cases. The requirements will be categorized according to the main areas of application of the platform, thus covering leisure and health issues. As a result, elderly needs will be defined in a modular set of services and apps. Due to the heterogeneity of skills and limitations of users with MCI, the design process must be applied to a “design space”. This leads to consider, from the beginning of the design stage, the potential modifications derived from the different user needs. The second concept, “design for all”, refers to the design of interactive applications, services, and products usable in the different scenarios considered. This methodology will ease the system’s scalability and the possibility of changing the user scenario optimizing cost-efficiency rate only by adding or removing services and apps.
2. **UO-OBJ2.** To enhance the connectivity and social network as well as the inclusion of seniors with first cognitive disorders by deploying an open cross-technology platform accessible through personal computers and mobile devices (tablet, smartphones, etc.).
3. **UO-OBJ3.** To use positive emotions in the psychological and cognitive treatments of elder with cognitive diseases by adding virtual environments with several stimuli to produce changes in users’ moods.
4. **UO-OBJ4.** To design a mood evaluation tool for early preventing and detecting any anxiety or depression symptoms in the elderly population that could lead to cognitive disorders. This tool will help caregiver and/or relatives to decide the most appropriate playful or therapeutic option and, in case it is necessary, to facilitate psychological techniques and support procedures.
5. **BC-OBJ1.** to create an open market and ecosystem for third party providers and data sources to enrich ehcoBUTLER platform through the development of new applications and tools.
 - Interoperable API
 - Sustainable business model for service delivery
 - Involvement of several companies developing APPs through API
6. **BC-OBJ2.** to demonstrate basing on ROI, ROTA, NPV, IRR, analyses, the viability of business and finance models in several pilots with different features and end-users (all with mild cognitive impairments). They are identified in four segments:
 - Public Organization that provides Health & Social services to the citizens.
 - Tele-assistance Company that provides services to its customers.
 - Telecommunications Company with a large network of users.
 - Enterprises oriented to the specific provision of social services to elder people.
7. **BC-OBJ3.** To ensure that the platform can be scaled to an operational deployment in the European Market, taking cost and operational support elements factors into account. These key factors will be included in the exploitation analysis.
8. **BC-OBJ4.** To provide a reliable platform with the necessary QoS requirements and SLAs for ensuring long-term trust from end-users and provider companies.
9. **TI-OBJ1.** To generate a technological ecosystem where IT providers are able to include and promote their own apps which are all integrated in a comprehensive agenda for all involved stakeholders. This shared agenda will be developed for checking activities of the elderly, and engage them for being active in their life.



10. **TI-OBJ2.** To use evidence based psychological and cognitive techniques and procedures to promote confidence, self-esteem, and self-control in the elderly as they use new ICT tools included in ehcoBUTLER.
11. **TI-OBJ3.** To develop several modules adapted to end-user needs and preferences for the Leisure and Healthcare areas of ehcoBUTLER, such as “Collaborative Games”, “Depression prevention”, “Social Network”, “My memories”, “Book of life”, “Lifestyle prescription”, etc... ehcoBUTLER will try the elderly become more self-confident as they use more and more the BUTLER tools.
12. **TI-OBJ4:** To make use of the standard interoperability mechanisms for health and social information exchange among the involved stakeholders and depending on the business model deployed. The platform must be available both in the Mobile and PC environment. It is necessary also to provide the tools and mechanisms for data security based on standardization of data sources.

