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Glossary

Acronym	Meaning
MCI	Mild Cognitive Impairment
l.e.	That is;

1. Introduction

This report aims to evaluate the technical advancement of the second prototype of CoME platform as well as identify what has been successfully implemented to recognize the shortfall of the actual version to further improve the quality of the end product.

Results from this technical validation as well as from the validation performed with end-users (D4.4) will allow us to set the basis for the implementation of the third prototype according to the evolutionary incremental design methodology laid down in CoME. Further features and functionalities will be added in the coming version such as:

- MCI risk assessment module;
- Augmented reality interface;
- Forums;
- Other improvements identified in this document and from the validation with end-users of March 2018.

For more information about the functionalities included in this deliverable, please check the D3.4 Platform Architecture deliverable as well as D4.2 CoME User Manual for the second prototype.

After delivering the second prototype in December, an initial technical validation was performed and some errors were discovered. Most of them were already fixed (as you can see in the tables of "Identified fixed functionalities") while testing in order to ensure that the prototype is stable enough to get valuable insights from end-users.

This report has been used as a practical working paper for the review and testing of CoME's versions developed between December 2017 and January 2018. The last version tested is dated January 31 2018.

2. Methodology

As the purpose of CoME is to bring together all the stakeholders involved in the senior's medical and social support, the platform is composed of three interfaces:

- Senior interface
- Formal caregiver interface
- Informal caregiver interface

Each of these interfaces should be tailored to the specifics needs of its stakeholders. When testing the platform, we thus choose a holistic approach taking into account not only the proprieties that the platform should possess but also verify that the design does meet the specific needs of all the users.

In that light, we meticulously tested all the interfaces and their interaction using three accounts. The wearable tested was FITBIT so the functionalities assessed are related to this device. Although the Nokia device was already included in this prototype, it was not validated technically (but for seniors) as we prioritised in this prototype seniors vs developers, so we prefer that seniors have the available devices for testing purposes and for the technical validation we rely on the developing partner UniGe.



3. Conclusions

This deliverable aims to provide a granular review of the features of tested CoME prototype. In this spirit, all three interfaces (i.e., senior, formal caregiver and informal caregiver) have been separately and together tested.

Based our findings, we can confidently say that the overall design and graphics of the tested prototype fit the need of the key stakeholders (i.e., senior, formal and informal caregivers). In that light, the platform should be considered a good base for the implementation of the new features.

Main new features to be integrated into the upcoming prototype:

- MCI risk assessment module;
- AR device;
- Forum;
- Greater integration of MyGuardian.

Once the challenges and issues identified in the deliverable are corrected and the upcoming features added, the platform will unleash its full potential which is:

> For the seniors:

Giving them a service to help them to carry out a healthier lifestyle and be more autonomous in their daily life and health self-management. At the same time, their informal caregivers will feel more confident thanks to the monitoring tools and the involving of the formal caregivers.

> For the informal caregivers:

Provide the mechanisms to facilitate the information needed for informal caregivers and elderly people in health issues related to age, support in health care through asynchronous communication among informal or formal caregivers, with resources like videos recorded through augmented-reality devices, tutorials, guidelines, etc. as well as memory training materials for seniors. Possibility to contact with occasional caregivers to reduce the work charge they currently face.

> For the formal caregivers:

Provide them with a continuous flow of up-to-date information related to the senior's health status. After processing this information, the formal caregivers will provide health reports where activities to promote healthier lifestyle and slow down MCI will be gathered.