

# facErEhab

## DISSEMINATION STRATEGY AND PLAN

*Report*

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*D4.1 – Dissemination Strategy and Plan - Report*

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1.1	09.03.2022	Marina Salomão / IPN	Revised communication plan
2.0	27.04.2022	João Quintas / IPN	Update and revision

## Glossary

ABBREVIATION	DESCRIPTION
AAL	Active Assisted Living
CTE	Cognitive Training Exercise
IANI	Interface and Advanced Natural Interaction
EIP	European Innovation Partnerships
AHA	Active and Healthy Ageing
HRQoL	Health Related Quality Of Life
CA	Consortium Agreement
WHOQOL	World Health Organization Quality of Life
Dx	Deliverable (where x defines the deliverable identification number e.g. D1.1.1)
EC	European Commission
ECAS	European Commission Authentication Service
EU	European Union
Mx	Month (where x defines a project month, e.g. M10)
IPN	Instituto Pedro Nunes (Project Coordinator partner)
PP	Restricted to other programme participants (including the Commission Services)
PU	Public
R	Report
RE	Restricted to a group specified by the consortium (including Commission Services)
ZBI	Zarit Burden Interview

## Executive Summary

This document intends to provide the deliverable report related to the work carried out in “Task 4.1 – Dissemination strategy”. As defined in the main project guideline this task (4.1) will be taken during the entire FaceRehab project duration and will have as the main goal elaborate, monitor and keep on track all the execution of a dissemination strategy.

All the activities that will take place on this task are expected to be coordinated with the development of the exploitation and business strategy and the Intellectual Property Rights protection activities withing the collaboration of all the team members of the consortium

The most important goal of this task, at the end, will be to ensure the overall awareness as the most important aspect will be to maximize public awareness of the project, from the general public (companies, research entities and universities, and health professionals), namely the FaceRehab final results and achievements.

The final document, that will be delivered in month 24 of the project will be the result of all the project interactions and all the learning process that will be achieved by all the consortium partners. So, it can be assumed that this document will be enhanced during the work process of the project duration (24 months).

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# 1. Introduction

## 1.1. Context and motivation

The growth in the incidence of different health conditions that leads to facial paralysis is a growing problem worldwide. For instance, it is estimated that every year, in Europe, approximately 1.1 Million people is affected with facial paralysis.

As described by *UT Southwestern Medical Center*, usually, facial paralysis occurs when cranial nerve number 7, also known as the facial nerve, is for some reason injured and partial damaged.

This facial nerve is responsible for several functions in the face, which includes actions as:

- Activate the muscle responsible for all the motions in the face
- Interaction with the gland responsible for producing tears
- Activate the small muscle in the ear responsible for dampening certain noises
- Controlling the taste gland in the tongue
- Ensuring the sensation in a small portion of the skin of the ear

Injury to the facial nerve may affect several aspects of the face depending on the degree and location of facial nerve injury and the the most common causes include the following:

1. Bell's Palsy
2. Congenital Facial Palsy
3. Moebius Syndrome
4. Result of Medical Procedures
5. Trauma
6. Tumors
7. Viruses
8. Lyme Disease



## 1.2. FaceRehab unique perspective and challenges

The search for evidence-based practice has become essential in the therapeutic process. Thus, the use of scales to measure the degree of impairment of Facial Paralysis (FP) has become an increasingly common routine in clinical practice.

The need to establish a prognosis regarding the evolution of FP and to assist in therapeutic planning has led to the development of methods to quantify it clinically. However, traditional classification systems are based on subjective clinical observation by the treating physician.

FaceRehab targets people above 50 years old with facial paralysis, independently of cause and gender.

FaceRehab will engage end-users in co-creation and co-design of the solution, through at least three end-user organizations, involved directly in the consortium. Also, FaceRehab will deploy three pilots in relevant environments (60 installations) that will involve 135 end-users (60 primary end-users, 60 informal caregivers, 15 care professionals) to validate feasibility and adherence to the technology of the users, during the testing period of 12 months.

FaceRehab will develop a product that will provide a solution for supporting facial rehabilitation exercises using technology as a mean to improve digital transformation of the health and care for people affected with Facial Paralysis.

The main objective and technical advance will be the development of new software, created and monitored by therapists, associated with a digital application, aimed at improving the facial rehabilitation process of users with Facial Paralysis.

FaceRehab smart solution for ageing well, will contribute to integrate actions of formal and informal careers using a common ICT-based solution by extending rehabilitation programs performed in hospital or clinical environments to the community setting (e.g. home care centre, patient home).

FaceRehab will impact healthcare by providing a new service model that can reduce the costs associated with health care for people with facial paralysis but maintaining the performance of caregivers.

### 1.3. Overview of Selling Strategy

FaceRehab has a clearly defined commercialization leader, the Portuguese SME ThinkDigital (TD), that will be the responsible for implementing a strategy and marketing process to sell this technology, as an end-user product.

Furthermore, business creation will also be supported by other business partners, operating as service providers in the care market, as the case of Centro de Medicina Física e Reabilitação – Fisioermesinde (CMFR), who will promote adoption from end-users and scale up the solution by providing services based on FaceRehab product.

The main market region for this product is expected to be European region.

IPN will be research and technology supplier to ThinkDigital, which also have it own technology inputs on the overall technological architectures.

ThinkDigital will pay license fees (or other commercial agreement) that satisfies all parties in order to sell the product.

### 1.4. IP Considerations

All intellectual property rights will remain with the developing party.

A special fee/ agreement will be paid to CMFR, PSSJD and RHZ as permanent expert consultants for FaceRehab co-creation key activity.

Financing the Market entry will be based on a co-funded level between TD and Vodafone (who manifested interest by a LOI). Based on the estimated market size, our initial financial projection for FaceRehab is that we can be profitable at year 3, and reach break-even at year 5 and sustainability at year 6 with at least 12300 users.

Additional considerations on IPR strategy are delegated to D4.3.

## 1.5. General Proposal of this Document

This deliverable (D4.1) will be consolidate all the dissemination strategy and plan, which includes a plan to address the following points:

1. Identification of the target audience
2. Definition of the overall message
3. Strategy to address the target audience
4. Definition of the communication plan, namely different approaches for international dissemination

This document is a contribution of all the consortium partners, and will be updated along the project in order to accommodate all the advances and knowledge acquired during the multiple tasks and activities of FaceRehab.

## 2. Consortium Engagement

The FaceRehab consortium is constituted by multiple project partners, with different types of backgrounds, technical and business expertise, which allows the project to develop a rich and more mature solution that not only be able to address patients' rehabilitation challenges but also ensure the solution could be in the future sold to the general public.

The consortium was built over a strong structure, which provides ensures:

- Scientific Knowledge
- Medical and partial expertise
- Business and Technological experience and skills

FaceRehab consortium has partners from multiple sites in Europe, namely in Portugal, Spain, and Luxembourg.

From Portugal, the project is supported by IPN (Instituto Pedro Nunes), which is responsible for all the scientific knowledge and research applied to the HMI (Human Machine Interfaces) that will interact with patients. Moreover, IPN is also the project coordinator and a respected research institute with a significant ALL and EU programs trackrecord; CMFR (Centro de Medicina Fisica e Reabilitação – Fisioermesinde) is represent the end-user and finally TD (ThinkDigital), a technology SME, that will be responsible to address Web Management platform and also create a business strategy in order to address general public with a commercial solution.

From Luxemburg, RHZ (Rehazenter) will provide an end-user perspective of the solution.

Finally from Spain, PSSJD (Parc Sanitari Sant Joan de Déu) will also ensure end-user focus, both ensuring the that technology and also technical applications will fit the general public needs.

The following tablet will describe FaceRehab project stack, regarding the main stakeholders:

GENERAL PUBLIC

Patients and Healthcare professionals that will use the solution

<p>END-USERS: RHZ   PSSJD   CMF</p> <p>End-users that will allow to defined medical approach, field practicality, and validate the business model.</p>
<p>SME: TD</p> <p>Technology development of the web management portals, and also the main business strategy for the solution</p>
<p>R&amp;D: IPN</p> <p>Technology research and development, HMI (human machine interface) design, overall scientific development, and validation.</p>

Table – Project stack and stakeholders

### 3. Dissemination Strategy

The FaceRehab consortium is committed to develop and implement a efficient dissemination strategy for the project in order to ensure that all the results and achievements of the project will be shared with the general public.

This not only enhance the project awareness, from the scientific and medical community, but will also elevate the business strategy plan and action, on task T4.2.

#### 3.1. Dissemination Goals

During the project, the dissemination strategy will be focused in sharing the following information topics:

- **Project Vision** – Project vision is the first, and most important, aspect that our audience should be aware of. FaceRehab vision and main goals are fundamental aspects to understand not only the results but also the relevance of the technology in face rehabilitation processes.
- **Project Results** – Project results and achievements will be shared with general and scientific public, not only the technology aspects but also from the patient point of view and medical impact.
- **Project methodology** – Co-creating and Co-design aspects
- **Scientific Achievements** – Project scientific breakthroughs, not only in clinical aspects, but also from the technology enhancements such as the artificial intelligence mechanisms, specializes Human Machine Interfaces, etc.

## 3.2. Dissemination roadmap

In order to accomplish the dissemination strategy and plan, the project consortium will start work on specific tasks that will promote the awareness of the project.

### 3.2.1. FaceRehab Message

For the sake of ensuring a strong and good impact on general public, medical staff and also scientific partners, FaceRehab must have a strong slogan and project message.

***“The Artificial Intelligence enhanced technology that helps facial paralysis patients to get better”***

With this message the project will promote the following important aspects of FaceRehab:

- **Technology** – This project is 100% supported in cutting edge technology, using distributed systems, web interfaces and facial recognition that allows people to better achieve facial rehabilitation.
- **Artificial Intelligence** – A.I. always empower the futuristic vision on projects, and in this case, A.I. is responsible for all the facial recognition patterns on patients, and it would be impossible to achieve that without the A.I. mechanisms in place.

### 3.2.2. FaceRehab Logo:

During the dissemination tasks on WP4, the team will also work to create a refined better project logo. The following image depicts the current logo of the project:



Figura – Current logo of the project

A new logo, with a sales perspective in mind is needed in order to achieve better market and sales results.

The project logo will help people to understand not only the project ambition but also better engage with them, which will be crucial for a future commercial success of this technology promotion.



### 3.2.3. Website

In order to better promote the project, a new website will be created that will channel all the official communication strategy with the public. At first, this website will have the project research and development message in mind. However, as the project gets close to a more mature technology and closest to a sales domain, it will change the message for a more commercial sales speech.

The project website main URL will be <https://facerehab.las.ipn.pt>

The website will share relevant information for:

- Academic and Scientific Teams
- Medical Staff
- General Public and Patients

The FaceRehab website will have the following structure:

- Home/Welcome page
- FaceRehab
  - Medical Background
  - Technical Approach (for facial rehabilitation)
  - Benefits
- Success Stories
- Project Partners
- Events
- Contacts

In order to monitor the success and coverage of the website, it will be implemented some monitoring mechanisms, such as Google Analytics.

This will help the project team to better address the dissemination strategy on the website, and the messages, in order to get desired results.

### 3.2.4. Social media / networks

Social media is one of the most powerful communication mechanisms now a days. For that matter, the project team will disseminate on their own social networks profiles/pages to promote the project and engage with the general public.

This activity will be mostly focused in sharing success stories along the project execution but also, how this new technology will help patients to get back to their normal life after a facial paralyses.

Medical elements of the consortium will be invited to create stories and articles to address the importance of this subject and also the project.

These contribution will be shared on social networks profile / page and also are expected to be adapted and published on the project website.

### 3.2.5. Brochures and Posters

FaceRehab consortium will develop a brochure and a poster of the project, which will address the main goals, expected impacts on patients and medical audiences, and expected results of the technology on real patients.

These brochures and posters will be delivered in digital formats, that can be downloaded on the website or printed if needed.

### 3.2.6. Scientific Publications

From the scientific point of view, during tis project it will also be develop articles and publications in scientific journals of high impact and recognized in the field eHealth may be, for example, Portuguese Journal of Physical and Rehabilitation Medicine , Journal of Medical Internet, Research, Medical Engineering & Physics, The JAMA Network – JAMA Neurology Journal. This will be delivered by IPN – Instituto Pedro Nunes, as the main research partner in the consortium.

The publication in scientific journals of high impact and recognized in the field of Human-machine interaction and autonomous system may be, for example, IEEE Transactions on Human-Machine Systems, IEEE Transactions System Man & Cybernetics: Systems, IEEE Transactions on Affective Computing, ACM Transactions on Computer-Human Interaction

### 3.2.7. Events

Project team will also attend to multiple events and conferences during the project which could be as visitors, guests or promoters.

Project teams will participate in international scientific conferences, which bring together experts from academia and industry, such as AAL Forum (mandatory), International Conference on Integrated Care, World Forum for Medicine (MEDICA), and eHealth Week, Human Computer Interaction, IEEE System Man & Cybernetics, IEEE International Symposium on Robot and Human Interactive Communication.

## 4. Dissemination Plan

Overall, during the period May 2021 to December 2021 most of the attention was on setting up the website, collecting and prepare basic information that could be shared with the public.

Still, worth to notice the activities implemented during 2021 included.

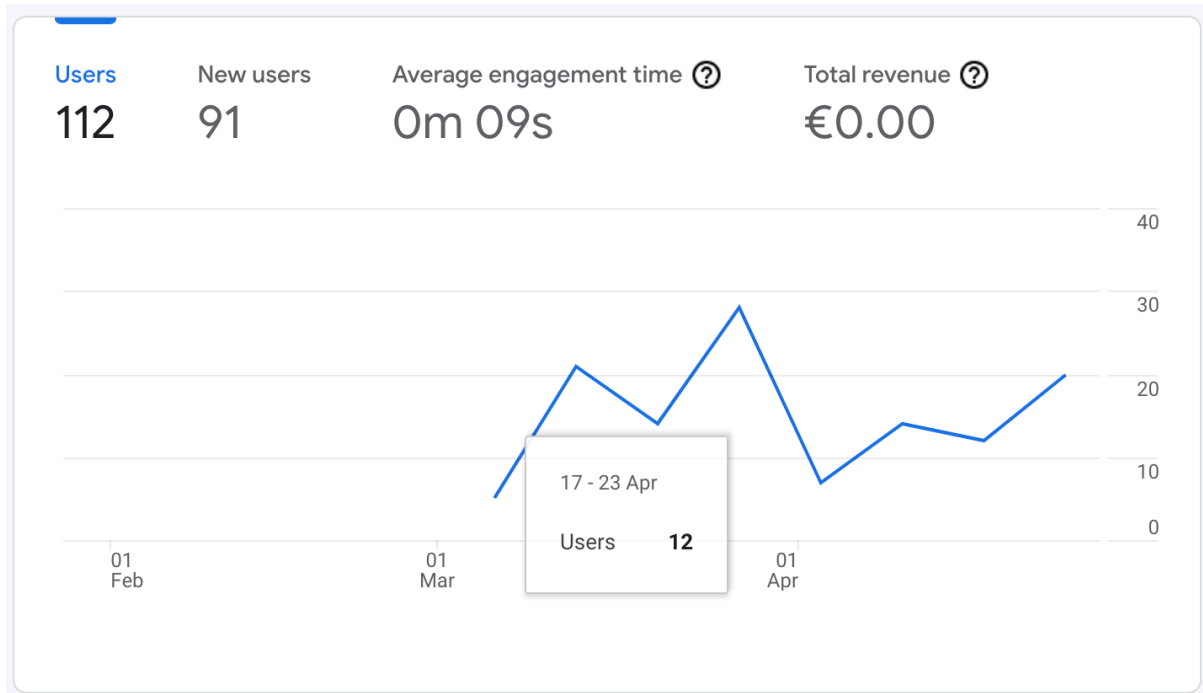
Date	Activity
17/06/2021	FaceRehab press release (in several digital newspapers and social networks)
30/06/2021	Dissemination in partners newsletters, social networks
30/06/2021	Dissemination in partners websites
22/07/2021	FaceRehab website launch
18/10/2021	AAL Forum 2021 (online)

By the end of 2021, it was recognized an updated dissemination plan was needed to improve engagement with the community and prepare better for the upcoming year 2022.

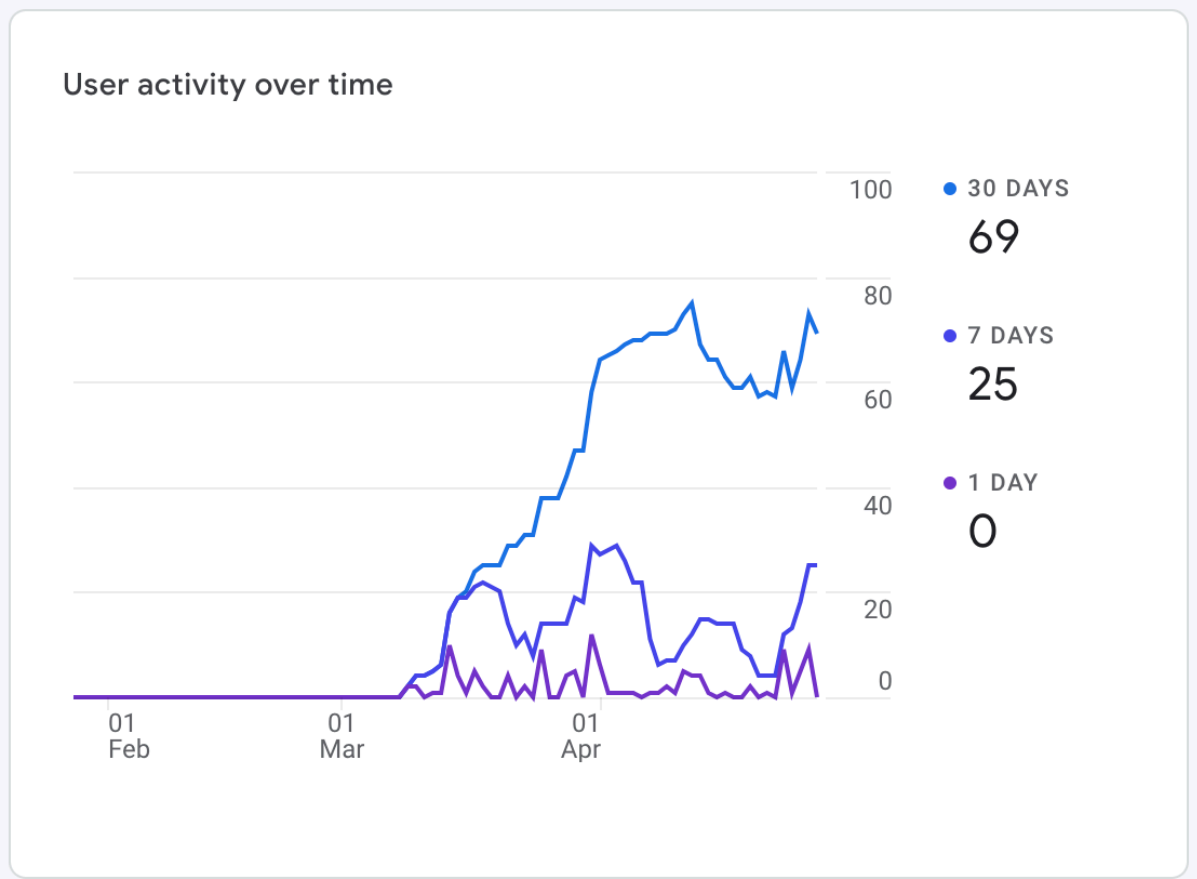
Specific actions were planned by M8 and started to be implemented as from M10:

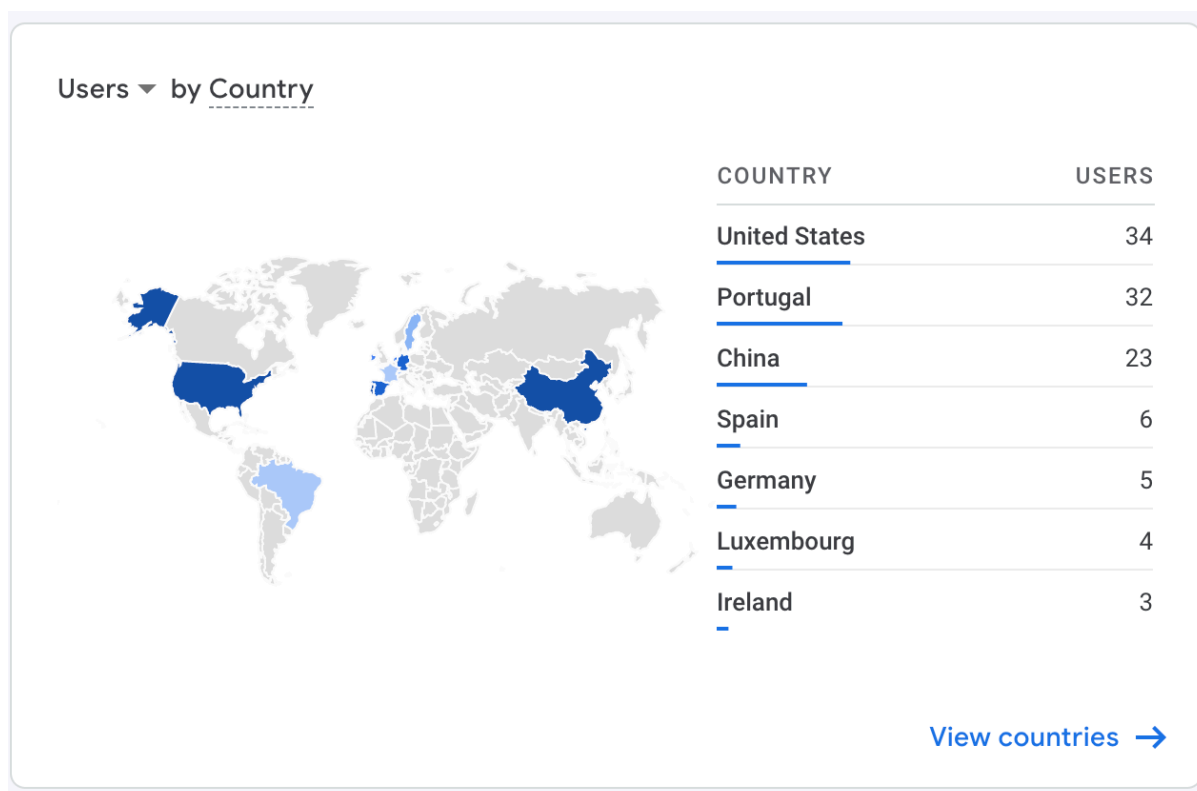
- Setting up pending Google Analytics connected to the website
- Revised a plan for posting in social networks
- Identifying opportunities to present FaceRehab (e.g. EIT-Health Match Making events, trusted partners of consortium members, etc.)
- Preparing videos with updated version of the prototype to better explain the project and generate interest

Hence, while during the initial months of the project, the engagement was quite low, we have now initial data that demonstrates some interest since M10, as we can see from Google Analytics.



### HOW ARE ACTIVE USERS TRENDING?





Additionally, the consortium has been increasing its activity in social networks, mainly through LinkedIn, and following the planned schedule:

Date	Activity
09/03/2022	Co-design sessions
24/03/2022	Meet the partners: IPN
01/04/2022	National day of stroke survivors
26/04/2022	Meet the partners: CMFR
03/05/2022	Functional Prototype - demo
10/06/2022	Meet the partners: PSSJD
08/07/2022	Meet the partners: RHZ
12/08/2022	Functionalities highlight: Execution of exercises for recovery - Telemedicine
09/09/2022	Functionalities highlight: Virtual Agents as exercises coach
14/10/2022	Functionalities highlight: Biofeedback of the correct execution of the exercises
11/11/2022	Functionalities highlight: Assess the user's progress
18/11/2022	Medica Trade Fair
09/12/2022	Functionalities highlight: Measure the degree of nerve involvement
	Pilots: Start

	Pilots: Results
	Project closing

So far, we are assisting to an increasing interest on the project, with posts accounting with more than 2000 views (for a period of little more than 1 month).

## 5. Conclusion

FaceRehab consortium is committed to develop and execute a structured dissemination plan, which will be a crucial component of the overall project.

This dissemination strategy will also impact on the success of the business development of the project, which is important to ensure the sustainability beyond the end of the funding period.

This plan will be executed and monitored by all the partners of the consortium in order to ensure the success of the dissemination strategy present in the document.