Supporting Information

The Survey Form for AAL Platform/Systems Usage
Real-world Usage of Ambient Assisted Living Platforms/Systems

(Please fill this form and email to: Mukhtiar Memon (mume@iha.dk), Stefan Wagner (sw@iha.dk).

Part A: Project/Program/System Profile:

This part provides a brief introduction of the ambient-assisted living platform/system/solution.

Name of the System/Platform/Project: __________________________________________

Duration: __________________________________________

Funded-by: __________________________________________

Contact Person: ______________________________________

Email: __________________________________________

Telephone: __________________________________________

Any other information about the project: __________________________________________

Should we publish the name of your project/solution in our findings/analysis?

☐ YES  ☐ NO (Keep in Confidential)

Part B: Platform/System Usage Information:

This part provides the usage information of AAL system/platform/solution.

Number of Systems deployed: __________________________________________

Number of End-users using system: __________________________________________

Number of Staff-users using system: __________________________________________

Homes deployed: __________________________________________

Medical Devices Supported: __________________________________________

Standards Supported: __________________________________________

Operating System supported: __________________________________________

Programming Languages Supported: __________________________________________

Service Model used: __________________________________________

Cost per System/User: __________________________________________

Any other information about usage of the system: __________________________________________

________________________________________________________________________

________________________________________________________________________