



IMMERSE minutes
24/2/22
Steering Committee

Present

WP1	Inez Germeys Martine van Nierop
WP2	Simon Krause Johannes Schneider Jörg Ottenbacher
WP3	Thomas Ganslandt
WP4	Georgia Koppe
WP5	Maria Wolters
WP6	Luca Marelli
WP7	Ulrich Reininghaus Anita Schick Matthias Schwannauer Simge Celik Glenn Kiekens Daniel Dancik
WP8	Inez Germeys

1. General Management

MedX training was not great, they have offered to make the online version available for free, PMO will let the consortium know when we can have access. German should now be available, English soon.

Please all fill out the contingency google sheet, we'll use this for the discussion during the GA meeting in Edinburgh:

<https://docs.google.com/spreadsheets/d/16N3bl8tWiOmu79VAJecZo6OBaRF4-xxJE91lZ9ygSwY/edit?usp=sharing>

WP5 has a premeeting during the GA on Wednesday, before the GA starts. Everything else will be plenary.

SAB will be joining GA on Friday, please prepare some questions for them. We have 30 minutes with them. We'll discuss on Thursday which questions we'll discuss.

Evaluation of EC is planned on either December 1st or 9th, Martine will let you know soon which day it is (depends on PO). All WP leads (or alternatives who can respond to questions)

need to be present here (mandatory), and someone from the different sites of WP7. Martine will send around agenda beforehand.

We will have a live SC meeting every 6 months after a GA meeting. The first one will be in Leuven in November, Martine will send a doodle. Next GA can be in Slovakia? (Daniel will let Anty and Michal know)

Next quarterly report is due half March, please fill them out as a growing document (copy in info from your last reports).

Amendment has been approved, will be submitted soon (now waiting on legal signatory from Erlangen).

Anita will send Martine a name for checking the German translation of the IMMERSE website, Daniel will check the Slovak site.

2. WP2

Working towards finalized version of requirements and gamification, and hopefully can share first prototypes with visualizations, and worked on technical risk mitigations measurements to minimize identified risks.

For the ethics application they need all documents for verification of the system ready, which is 3 months earlier than estimated (and there were already delays). They're now setting up a usability and evaluation plan for the different phases of development. Testers don't necessarily have to be service users, just a mix of different education and cultural backgrounds. When they have a timeline for this ready movisens will reach out for help (local PIs are responsible for running those tests). The tests won't have to be done in every single site, we still have to decide whether also patients can be included (depending on whether new ethics are needed or it can be an easy amendment to existing ethics). Some level of testing is needed but if needed can be done by whoever is available.

Matthias is working on requirements document, should be concluded by end of February.

3. WP3

Finalized list of sensor items to be included from movisens XS, talked about privacy aspects with geo location data. Thomas had contact with Wouter Voorspoels (KUL) about HER integration, he's looking into it. Thomas is trying to schedule a meeting with Obasi. **He hasn't received any contact details for other clinical sites.** Please send him these details!

Thomas is working with Luca to keep working on Data Processing Agreement, which seemed too strict for our purposes. Situation in Erlangen will be easier as many security requirements are already present there.

4. WP4

Has uploaded requirements doc on visualization, anyone who would like to comment is welcome (**please do this soon**).

https://docs.google.com/document/d/1O_XgNk7W9uLRTit2-Vea0lB8_6hW2Ki5oZj0u1d7og8/edit

Talked with Peter about visualizations who said based on mPath experience it's best to keep things simple. Simon will post some examples of prototypes of visualizations in this doc, so please comment on this.

Not clear what the visualizations on the dashboard vs app will be – will there be a clear correspondence? All posted in this doc, please comment. The idea is now to keep the graphics similar so it's clearer for the service users.

Right now the dashboard is only accessible for clinicians, not service users. The dashboard also included visualizations based on statistical analyses that may be hard to interpret without a clinician there. But this may undermine important parts of our proposal where we say that in particular service users should have more access and understanding of their data. For now we keep as is due to time constraints, we could maybe change this along the way in a version 2 if we find out that it's needed. Possibly even a different version of the dashboard with the most complicated things omitted.

5. WP5

<https://docs.google.com/presentation/d/1r6EaPdTCDelBijH-fUGS2g8OBxACTRlyvEmdIBc4m1E/edit?usp=sharing>

Belgium is behind, no recruitment yet in the UK, problematic for D5.1. There is a list on Basecamp on all issues with the survey. We'll have both online and paper versions of the survey. We'll discuss in the GA what the transcription budget in Edinburgh will exactly be used for (maybe also for other sites?), as no budget is available at other sites, and time needed for this may be problematic.

In Belgium contingency for phase 1: contacting patients who were in previous studies (so not necessarily in the phase 2 study sites)

We'll maybe extend the deadline for milestone M6 a bit, to make sure we get as much data as possible for papers etc, but use what we have now for the report needed to get phase 2 moving (using 'informal' data, making that more formal). For now we won't strictly have to split by site but go by country. Maria may even get M6 in on time by pooling all info available.

6. WP6

Luca had to leave

7. WP7

Right now, based on the timeline that Simon will keep us updated about, we need to decide whether we roll out implementation in June, or later than that. But in any case WP7 will move ahead with compiling all ethics documents. Please all deliver all documents that Simge is asking for.

Sometimes attendance is a bit low at the WP7 meetings, and some of the same people were also not present in this SC meeting, please all keep in touch to keep things moving!

8. WP8

No news

9. Papers

Inez will submit the paper discussed last time (the Frontiers one) at Psychological Medicine (as an editorial paper), or otherwise JMIR.

Actions

Who	What
All	Fill out contingency file https://docs.google.com/spreadsheets/d/16N3bl8tWiOmu79VAJecZo6OBaRF4-xxJE91lZ9ygSwY/edit?usp=sharing before GA
All	Prepare questions for SAB on GA
WP leads	Deadline quarterly report 1_3 is due half March
All clinical sites	Look into what is possible for testing prototype, then let Simon know who is responsible for this at each site
All clinical sites except Belgium	Send Thomas contact details for clinical sites to have meetings about EHR integration options
All	Comment on Georgia's stats and visualization doc https://docs.google.com/document/d/1O_XgNk7W9uLRTit2-Vea0lB8_6hW2Ki5oZi0u1d7og8/edit