

Partners Monthly Progress Statement

Project Code 10500

Project Acronym VISICAST

Reporting Period: November '00 Report No: RNID07

Project Manager Name: John Low

Address: Technology, RNID, 19-23 Featherstone St., London EC1Y 8SL

Phone Number: 020 7296 8014 **Fax Number:** 020 7296 8069

E-mail: john.low@rnid.org.uk

0 – Summary Expand all tables as necessary

| |
|---|
| <i>Main Achievements</i> |
| Recruitment strategy changed to solve difficulties in finding one person for all RNID objectives. |
| Progress towards implementing the Description of Work |
| Recruitment for two posts of Community worker and BSL level 3 trainer in progress |
| Highlights/Participated Problems for next period |
| - |

1 – Issues

1.1 Objectives

| Objectives | Progress towards achieving objectives |
|---|---|
| 6 Trial and evaluate the Application prototypes (WP6 Trials and Evaluation) | <ul style="list-style-type: none">Recruitment process for Community worker in progress. Advertising end Nov.Recruitment of a part-time BSL level 3 trainer in progress for sign-capture and input to development of the BSL lexicon (WP5). |

1.2/3 Deliverable/s this period

- None

| <i>Deliverable Code & Name</i> | <i>Month Originally planned</i> | <i>Current view Revised Month (*)</i> | <i>Actual delivery</i> |
|---|--|---------------------------------------|------------------------|
| Deliverable/ Milestone No | | | |
| Deliverable/Milestone Name | | | |
| Technical Achievement Description for that deliverable | | | |
| | | | |
| Problem / Delays Description | Corrective Action | | |
| Describe issues or problems that might affect achievement, delay activities, deliverables or milestones | Corrective action envisaged to overcome the issue. This should include the expected impact in terms of delays, quality and quantity of work. | | |

1.4 Deviations from Work Package Plan. Complete for each deviation

- None

Visicast

Partners Monthly Progress Statement

Project Code 10500

Project Acronym VISICAST

| WP No. | Deliverables effected | Action by date |
|--|-----------------------|----------------|
| Describe Deviation from plan: | | |
| Why are Deliverables not on schedule: | | |
| Describe possible solutions: | | |
| State proposed rationale for requested change: | | |
| Give pros | cons | |
| Recommend one solution: | | |

2 – Contractual Arrangements

| |
|---|
| <i>Serious problems requiring change of contract/consortium/description of work</i> |
| None |

3 - Project Meetings held

| <i>Title</i> | <i>Date</i> | <i>Location</i> | <i>Comments</i> |
|--------------|-------------|-----------------|-----------------|
| | | | |

4 - Dissemination / Promotional Information

4.1 Conferences and/or Workshops attended/foreseen

| <i>Date</i> | <i>Title of conference/workshop</i> | <i>No of Peopl e</i> | <i>Title of presented Paper</i> |
|-------------|-------------------------------------|------------------------------|---------------------------------|
| None | | | |

4.2 Articles Published , Press coverage etc.

None

| <i>Date and Type</i> | <i>Details</i> |
|----------------------|----------------|
| None | |

5.4 Main results: Patents, guidelines, standards, prototypes, PhDs, Specs

None

Visicast

Partners Monthly Progress Statement

Project Code 10500

Project Acronym VISICAST

| <i>Date and Type</i> | <i>Details</i> |
|----------------------|----------------|
| | |
| | |

6 – Project Effort

6.1 Make an entry for each member of staff on the project.

| Effort for the reporting period (in decimal person months) | Work Package No | | | | | | | | |
|---|-----------------|---|---|---|---|-------------|---|---|-------------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | T |
| names of staff * | | | | | | 0.26 | | | 0.26 |
| Amy Hunter | | | | | | | | | |
| Helen Hickey | | | | | | 0.11 | | | 0.11 |
| Total | | | | | | 0.37 | | | 0.37 |

6.2 Accumulated Effort

| Effort for the reporting period (person hours) | Work Package No * | | | | | | | | | | | | | | | | | |
|---|-------------------|---|---|---|---|---|---|---|---|---|---|----|---|---|---|---|-------|----|
| | 1 | | 2 | | 3 | | 4 | | 5 | | 6 | | 7 | | 8 | | Total | |
| names of staff | P | A | P | A | P | A | P | A | P | A | P | A | P | A | P | A | P | A |
| Amy Hunter | | | | | | | | | | | | 40 | | | | | | 40 |
| Helen Hickey | | | | | | | | | | | | 16 | | | | | | 16 |
| Total | | | | | | | | | | | | 56 | | | | | | 56 |

* Remember planned effort is for the work package not the individual

I confirm that the details entered on this form are correct

Signature

Note: The signature must match the name on the top of the form