Software: Spot's Software installed in the Touchsreen PC allowing them to make ad-hoc measurements & Team's Software which updates the Web Health file of each patient based on their measurements for the Municipality of Zlatograd

S.1. Brief summary of the e-SOHECA Project

The e-SOHECA project concerns the installation and operation of a single telemedicine system for all Municipalities involved in it (Municipality of Nestos, Municipality of Topeiros, Municipality of Zlatograd). The system will briefly include the following:

- Supply and installation of equipment for new Centers for Preventive Medicine (Spots)
- Supply and installation of equipment for new Mobile Units of the competent social services of the Municipalities (Teams)
- Development and operation of telemedicine and social welfare applications which will include the following:
    - Web Portal of Social Care and Welfare (e-SOHECA Portal)
    - Primary Care Subsystem
    - Mobile Phone Application for access to the Web health file.
    - Spot's Software allowing them to make ad-hoc measurements
    - Team's Software which updates the Web Health file of each patient based on their measurements

More specifically in the context of the e-SOHECA project, the following services will be developed:

a) **Web Protal of Social Care and Welfare (e-SOHECA Portal)**, through which the following services will be offered:

A) Training and Public Information Services for Preventing and Addressing health Incidents

Through the portal, an infrastructure will be created to provide training services to enable stakeholders (citizens, pupils, special groups such as the elderly, people with disabilities and special people living and caring for them) to be informed about care, health and especially preventive medicine.

B) Interactive Communication Services for Special Populations and Health Care Issues

Through the portal an infrastructure will be created to provide interactive communication services, enabling interested parties (citizens, students, special groups such as young parents, pregnant women, people with disabilities) to communicate, collaborate and exchange views on common issues that concern them in the area of Care and Health, using Internet technologies.

C) Classified Access to the Primary Care Subsystem and its associated services

Through the Portal, the users (citizens) and their relatives will be able to access the Primary Care Subsystem and its related services (described below) in a classified way through the https protocol and using SSL certificate. Access to user data by third parties (relatives, doctors, etc.) will only be possible at the command of the users using the passwords in order to ensure the protection of personal data and medical confidentiality. In order to ensure the confidentiality of Health Files and related information, these data will be encrypted (at least 128bit encryption).

b) **Home Surveillance and Care Services**, which will include remote monitoring of specific parameters of the health of the elderly and the disabled (pressure, pulses, temperature, etc.) using special devices and modern networks. This service is expected to strengthen the existing welfare structures of the Municipality and allow remote support of the citizens.

c) The Primary Health Subsystem will be the Central Information System responsible for monitoring the health status of citizens and providing immediate information to stakeholders (ambulances, nurses, etc.) and includes the following:

Medical Health File application, where all measurements and the entire medical history of the Public will be recorded. It is noted that in order to enhance the interoperability of the system, all diseases, symptoms, complaints, etc. in the Care Folder are encoded on the basis of ICD-10 (ICD-10) of the World Health Organization (WHO). Medical Health Care data will be stored in a RDBMS encrypted (at least 128 bit encryption) to ensure that even System Administrators will not have access.

In particular, the following specifications will be met for this application:

- Unified management and monitoring of citizens / servants in their contacts with all primary care and health care services.
- Recording and managing health data of citizens / servants arising from the provision of primary health and welfare services by all healthcare professionals in contact with the citizen / servant (medical staff, nursing staff, social worker, psychologist, physiotherapist, etc.).
- Access to the functionality of the system via web - based interface and through portable devices (eg smartphones, tablet PCs, etc.)
- Organization and presentation of the Medical Health File of the user/citizen through visit-oriented view.
- Search and find serving files in a quick and easy way (e.g. using demographics, etc.).
- Recording the contacts of Health Professionals, Teams, etc.
- Recording, depending on the user's access rights, the following items in the folder:
  - Insurances, Living Conditions.

- Medical Background: (diseases, drugs, allergies, etc.)
- Basic contact data: Date, responsible health, contact type, contact point.
- Symptoms: Main symptom, associated symptoms using ICPC and free text coding.
- Clinical examination data (temperature, pressure, etc.).
- Gynecological examination data.
- Diagnosis: Diagnosis is performed using ICD-10 coding and, in addition, free text o Medical actions - operations.
- Nursing services - actions: Recording the relevant actions of nursing staff of the "home help" program.
- Services by a social worker in a contact
- Services from a physiotherapist in a contact.
- Family assistant services.
- Data for prescribing and prescribing medicines
- Vaccination.
- Diet.
- Family APGAR
- Genital Problems
- Emergency Contact Details
- Contact with a social worker.

Access will be possible through the Web Protal of Social Care and Welfare (e-SOHECA Portal), via a personalized user page and special attention will be paid to protecting the sensitive data of the participants. The Primary Health Subsystem will be able to support, in the future, Health Level Seven HL7 for electronic data exchange with the purpose of automatically exchanging information between different public health information systems in health care. It is noted that HL7 is the most widely used standard for the exchange of information via messages in a health setting.

d) **Medical Data Recording and Collection subsystem for mobile devices** of Social Service Executives of the Municipality. Executives will be equipped with portable equipment (PDA's, Smartphone or Laptop), specialized application, and portable medical devices, and will record health parameters for participants who have not been allocated permanent medical telemedicine equipment within the project.

- **Preventive Medicine Centers (Spots)** at predetermined locations, equipped with Computer and Medical Devices and in an automated way will enable preventive measurements of critical medical parameters to citizens of particular categories. The citizens who are registered in the system will have access to their medical data through the centers or via their internet or mobile phones.

S.2 Scope of the project

The scope of this project is to develop and operate the applications of Spots Software and mobile devices for mobile units of the relevant social services (Teams Software) of the Municipality of Zlatograd.

In summary, the following applications will be deployed and installed:

- Team's Software which updates the Web Health file of each patient based on their measurements – 4 licenses
- Spot's Software installed in the Touchsreen PC allowing them to make measurements by themselves – 3 licenses

A detailed inventory of the software specifications to be developed for the municipality of Zlatograd to achieve the interface with the above subsystems is developed in Chapter S.4. Technical Software Specifications.

S.3 Functional specifications of the project

Below are analyzed the Functional Specifications of the e-SOHECA system in general and the applications to be developed for the Municipality of Zlatograd in particular.

S.3.1 Electronic Services

Service Description	Required data (input data)	Result data (output data)	Comments (eg access level, service level, etc.)
Remote Home Service for Home Surveillance and Care (Teams)	Basic Health Parameters of Measurement Results	Tables and Charts / Prevention and Diagnosis	5th - Personalized
Preventive Monitoring and Care Service	*Basic Health Parameters of Measurement Results*	Tables and Charts / Prevention and Diagnosis	5th - Personalized
Interactive Information Service for Participants and Entrepreneurs	*Basic Health Parameters of Measurement Results*	*Web / e-mail / SMS (Instant Update)*	5th - Personalized
Access Service to the Medical Health File via mobile phone	*User Details*	*Access to Medical Health Care File*	5th - Personalized
Medical Data	*Basic Health*	Tables and	5th - Personalized

Recording and Collection Service	*Parameters of Measurement Results*	Charts / Prevention and Diagnosis	

S.3.2 Users of the Project

The System users to be deployed within the Project will be:

- **Executives of the Municipality - System Operators** (Department of Planning, Development, Organization and Information Technologies and Communications, ICT Office), who will be responsible for the productive operation of the System
- **Executives of the Municipality – people who provide help at home**, who will have access to the services of the system in order to serve the participants who gain help in their home and in the Centers for Preventive Medicine
- **Participants** (participants who gain help in their home), who will also have graded access to Project Subsystems to monitor their health parameters
- **Third Parties** directly related to the participants (Relatives, Doctors) who, with the authorization from the participants, will have access to the Primary Care Subsystem and the Health Care Folder of the patient
- **Citizens** who will have direct access to the Web Protal of Social Care and Welfare (e-SOHECA Portal)

S.3.3 e-SOHECA System Services

The e-SOHECA system to be developed as part of the complementary projects of the other partner partners will support the following:

- The exchange of data with the new Centers of Preventive Medicine (Spots)
- The exchange of data with the Mobile Units of the competent social services of the Municipality (Teams)
- Data exchange with the Mobile Phone Application for access to the citizens Health Care Folder
- Complete integration with the new medical equipment provided to Citizens measuring multiple parameters including blood pressure, pulse, pulse regularity, temperature meter, SPO2 respiratory rate, 1 –lead ECG, the glucose meter and the weight measuring device, in order to collect the measurements from them and automatically register them in the Health Care File of each user

S.3.4 Functional Application Specifications

As already noted, the broader purpose of the e-SOHECA project is:

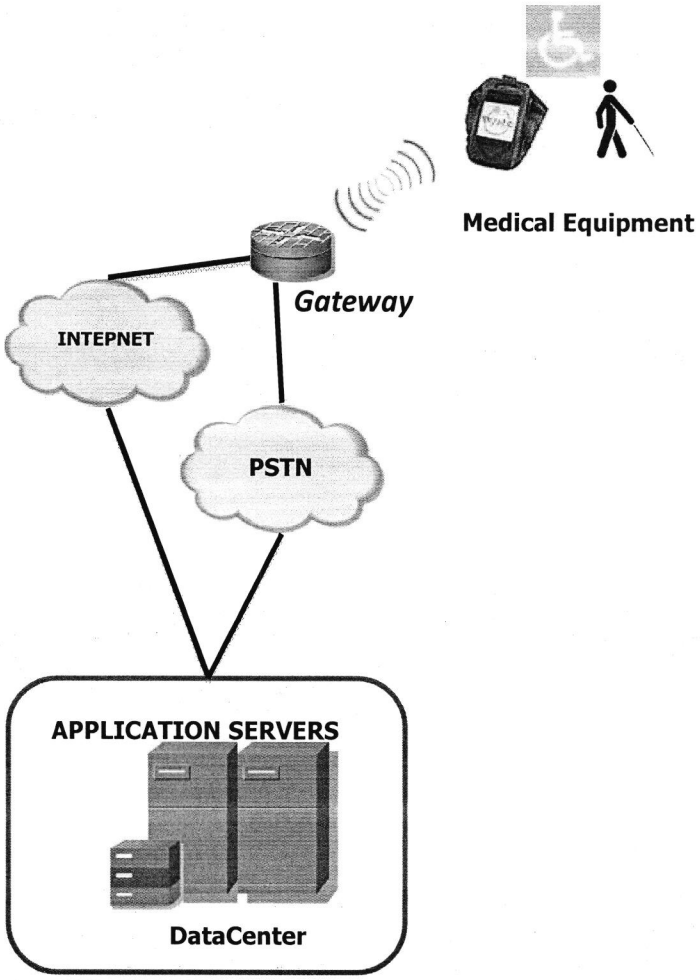
- Remote collection of medical data through medical devices aimed at providing remote home care and welfare services to particular population groups (the elderly, people with disabilities) and focusing on disadvantaged areas (remote) in need of using modern technology.
- Strengthening the capacity of the staff involved in the provision of social care services given at home
- Provide the ability of preventive medical measurements and their monitoring in a large proportion of the population through the Centers for Preventive Medicine.

Below is described how the system works for the case of remote users, the case of the preventive medicine centers (Spots) and the mobile units of the competent social services (Teams) of the Municipality.

Remote Users (Old People, People with Disabilities)

As far as the remote monitoring of critical user health parameters is concerned, this will be done through a handheld, multi-purpose, multi-monitor medical equipment with at least 10-hour battery-time running time. The user (elderly or disabled) will use the device at regular intervals and gateway measurements will end up in the e-SOHECA Portal and the citizens Health Care Folder.

Since these people are not very familiar with technology and probably do not have their own computer at home, they will use special gateways that are easy to use. The gateway, depending on the technical approach, can be either a smartphone / tablet / laptop or another handy box of a special type that will collect data from medical devices and transfer them over a broadband connection , 3 / 4G, DSL) in the data center, where the Information System will be hosted. There, the data will be processed to monitor the status of the attendee and will be stored in the Health Care Folder.



The data collected will be readily accessible by the responsible members of the participating Municipalities, Home Help Officers, their attendants and their relatives through the Social Care and Welfare Portal (e-SOHECA portal). The total number of users served by the system in the municipality of Zlatograd will be **at least 40 within the project. But the system will be expandable and potentially able to cover multiple users with home appliances and an unlimited number of portal users.**

Medical equipment for monitoring multiple health parameters

The project will provide Medical equipment for monitoring multiple health parameters to at least forty **(40)** people. The device should be a user-friendly monitoring unit for important medical parameters that can be carried by these individuals without causing them any difficulty.

The device should be capable of recording ECG events and designed for cardiac monitoring and recording of electrocardiogram events and capable of performing 30-second ECG measurements by storing electrocardiogram records and also having possibility of setting thresholds for alert.

Generally, the device will be able to measure at least the following parameters: blood pressure, ECG, pulse rate, regularity, oxygen saturation (SpO2), and body temperature.

The device should measure, store and transmit wireless physiology data to a telemedicine monitoring center via gateways. Gateways will be interfaced wirelessly (RF, Bluetooth). It should also allow the user to keep his daily life undisturbed while at the same time constantly monitoring the environment of the home, work or outdoors.

Mobile Phone Application for access to the Health Care Folder Access.

Αφορά σε mobile εφαρμογή μέσω της οποίας, συγγενείς των συμμετέχοντων, αλλά και οι ίδιοι οι συμμετέχοντες θα έχουν διαβαθμισμένη πρόσβαση στο Φάκελο Φροντίδας Δημότη απευθείας και σε υπηρεσίες της Διαδικτυακής Πύλης. Σημειώνεται ότι τρίτα πρόσωπα (συγγενείς, ιατροί, κλπ.) θα μπορούν να έχουν πρόσβαση στα δεδομένα του Φακέλου Φροντίδας του χρήστη, μόνο αν ο ίδιος ο χρήστης τους δώσει ρητά τέτοιο δικαίωμα. Η εφαρμογή κινητού τηλεφώνου θα δίνει την δυνατότητα απεικόνισης των δεδομένων σε κατάλληλη μορφή για τα διάφορα μεγέθη οθόνης κινητών, ενώ παράλληλα επειδή θα διατηρεί αποθηκευμένα κρίσιμα ιατρικά δεδομένα, τα οποία μετά από σχετική έγκριση, θα μπορούν να είναι προσβάσιμα άμεσα σε περίπτωση ανάγκης. It concerns a mobile application through which, participants' relatives as well as the participants themselves will have access to the Health Care Folder directly and to the services of the e-SOHECA Portal. It is noted that third parties (relatives, doctors, etc.) will be able to access the data of the user's Health Care Folder only if the user provides them such a right. The mobile phone application will be able to display the data in the appropriate format for the various mobile screen sizes, while keeping critical medical data stored, which, after approval, can be accessed immediately in case of an emergency.

Particularly, the application will provide access to the following services / subsystems of the solution:

- Health Care File,
- Social Care and Welfare Portal (e-SOHECA Portal) with an emphasis on Information and Interactive Communication Services.

The application should be a cross platform, that is to support the majority of known mobile platforms. Required support for at least the following platforms: iOS, Android. It is noted that although logical design and functionality should be unified, support for the above-mentioned platforms will be done with autonomous applications.

The application will enable the user to offline locally store basic medical records and the latest measurements on their mobile devices by the medical devices so

that these data can be accessed even if access to the central services over the Internet is not possible. The number of measurements to be held locally will be parameterized.

Applications are required to be fully interactive with the ability to retrieve dynamic information and content from a central server via a special protocol over TCP / IP or HTTP and 3 / 4G / WiFi / using https security protocols and SSL certificates,

The basic requirement is that applications are easy to use, provide intuitive navigation logic to make full use of them with a limited number of keys and with only one hand.

Spot's Software installed in the Touchsreen PC allowing them to make ad-hoc measurements

The Preventive Medicine Centers (Spots) will be equipped with an Internet-connected PC, a laser printer for printing measurement results and reports, and a range of medical devices that will be wirelessly interfaced (RF, Bluetooth) with a gateway if required the PC or wired with the PC. The computer with easy-to-use software will allow users to serve their medical devices, access classified, update and access to the Health Care Folder for printing reports and examinations.

The medical devices that will be available will be:

- A medical equipment provided to Citizens measuring multiple parameters including blood pressure, pulse, pulse regularity, temperature meter, SPO2 respiratory rate, 1 –lead
- Wireless Glucometer, which will enable diabetic patients and their physicians to monitor and analyze the results in real time.
- Professional Weight Scale for weight monitoring.

In this case, with this application, the data will be collected centrally in the Primary Health Subsystem and the Health Care Folder will be updated. The procurement of this application is the subject of this tender.

Team's Software which updates the Web Health file of each patient based on their measurements

This application aims to make use of the social services provided by the Municipality and to coordinate them through the Medical Data Collection and Collection application, which will be specifically designed for smart mobile devices (mobile phones, PDAs, laptops).

Executives of these services will be provided with mobile medical devices that will be capable of communicating via Bluetooth with the specific application of the PDA / Smartphone / laptop for the purpose of recording, collecting and sending data from participants in the program to whom they have not given appropriate medical devices for remote monitoring. In particular, the strains will be equipped with a medical device, which will measure at least the following medical parameters:

- **Blood pressure**
- **ECG, cardiogram**
- **number of pulses**
- **oxygen saturation (SpO2 oximeter) and**
- **body temperature.**

The data will be stored through the application on the PDA / Smartphone / laptop and the Social Care Information System will be updated upon the return of the staff to the Preventive Medicine Centers or to the premises of the competent social services of the Municipality.

It is noted that the supply of computer for the competent social services of the Municipality is absolutely necessary in order to allow for the connection with the system and the access by the interested persons to the data.

The procurement of this application is the subject of this Tender.

S.3.5. Interoperability

The information system that will be implemented should provide a single and complete set of functions. At the same time, the ability to exchange data and provide services to third-party information systems will be supported.
Also, as an important feature of the system, it should be noted that it should have the capabilities for its scalability and integration in the future with other subsystems within a single operating framework.
Therefore, in order to allow the future integration of the information system with other systems and the HERMES portal, its design and implementation will be based on the Greek eGovernment Framework and the relevant eGiP and Recommendation European Commission on the Interoperability of e-Health Systems (Draft Commission Recommendation of 16-7-2007) on electronic patient records, electronic patient files the emergency data and interoperability standards in the NHS space and should investigate the integration of the "Common \ Open Technology Platform Development Services for Local Government" (LGAF).
Also, the system should be able to support HL7 in the future for electronic data exchange in order to automatically exchange information between different IT systems in health care, while all diseases, symptoms, complaints, etc. in the Health Care Folder should be coded based on ICD-10, or other internationally

recognized standards.
Moreover, since the main feature of the application is interoperability and communication to send data to third-party applications such as National Health Systems, widespread standards will be used to ensure interoperability.
In particular, in the context of the application and content study (design, definition of data structures) and in the implementation of applications, the contractor has to implement the following technical specifications on interoperability:

- **Take care of Content Management and Metadata** - Adopt internationally recognized protocols that allow the collection and transfer of metadata between different systems.
- Indicate the **process of accessing information** - Use the Health Level Seven (**HL7**) or other equivalent internationally recognized protocols to define application interfaces and data exchange interfaces in the health sector.

The offered system should support open architectures and standards such as:

- Interoperability with third-party systems through support for SOAP, WSDL, and UUDI protocols
- Support for TCP / IP protocols at the network and application level (IP v4, DNS, FTP, HTTP, SMTP / MIME, POP3, IMAP)
- Distribution of content through multiple communication channels (eg Atom, RSS Feeds)

A.3.6 Open Standards

The System should be based on proven mature and proven system platforms and ensure uniformity to facilitate its support and maintenance. Implementation platforms will follow widespread open technology standards to ensure both the interoperability of the system and its adaptation to future technological developments. The implementation of the project will take on the use of Open Standards for software and processes and Open Formats for data and content. In particular, it should:

- Be available for everyone to read and apply to software
- Allow the creation of extensions to the open standard subject to the publication of relevant documentation if this is required for interoperability between the applications of the template.

Within the framework of the above guiding principles, it is proposed to adopt the following architectural options:

- Application software should be independent of the server and database operating system.
- Obligatory use of the MVC model in order to be able to create a system where the data representation (V for View) is disconnected from the

Model that follows in the system logic (M for Model - Business Logic) and from the application processing subsystem in the system (C for Controller). At the same time, this architecture should be based on Database Abstraction Layer so that the system is not directly dependent on the DB that supports it.

- Support for widespread application implementation architectures
- Application Programming Interface (API) support and, more generally, an Object Model or Customization Workbench to extend the application from Developer Organizations
- Support for open architectures and standards for interconnection, communication and interoperability
- Interoperability with third-party systems through support for SOAP, WSDL, UUDI and RESTful web services.
- Support for TCP / IP protocols on the network and application level (IP v4, DNS, FTP, HTTP, SMTP / MIME, POP3, IMAP, LDAP v3)
- Implementation of techniques to ensure the operation of systems in a high-availability environment
- Ability to share application components on multiple servers to distribute workload to multiple processors (scalability).
- The requirement is for the system to support the relevant eGif s as well as the Open Standards set out in the European Commission's Recommendation on the e Health Interoperability Systems and in the future the HL7 standard.

S.3.7 Security Requirements

designing the Project, the Contractor should take special care and initiate appropriate actions for:

- Security of Information Systems, Applications, Media and Infrastructure
- protecting the integrity and availability of information
- protection of personal data to be processed and stored by seeking and identifying in a methodical manner the technical measures and the organizational and administrative procedures.
- the preparation of the required documents for the acceptance of the terms of use of digital services, medical equipment and the maintenance of personal data

As already mentioned in previous paragraphs, the Health Care Folder data should be stored in the encrypted database (at least 128 bit encryption) to ensure even by System Administrators. In connection with access to the Primary Care Subsystem and the related services of both participants and relatives this should be done in a classified manner through https protocol and using SSL certificate. Access to user data by third parties (relatives, doctors, etc.) will only be possible

at the command of the users using the passwords in order to ensure the protection of personal data and medical confidentiality. For the design and implementation of the Project's technical security measures, the Contractor must take into account:

- the institutional and legal framework in force
- modern developments in ICT
- best practices in the field of ICT security
- the most widely available software and hardware products
- any international de facto or de jure relevant standards

which will be included in the System Security Action Plan to be delivered by the Contractor to the Municipality based on the aforementioned technical and functional description of the system.

The technical security measures will be implemented by the Contractor in the context of the products and services he has already provided.

In conclusion, the e-SOHECA portal should meet the following security requirements:

- User login using username and password in the administration interface (for web portal administrators)
- Ability to register a user and assign predefined rights to the new user. Alternatively, the administrator will be able to approve / reject the new user's registration.
- Providing information to the portal that does not require the entry of a registered user and, accordingly, the definition of domains of the portal that will require a login.
- Encrypt user password when stored in the database so that it is not known to those who have direct access to the database and create a secure SSL connection during user authentication and transferring its password to the system to be tested.
- Encrypt the Health Care Folder data and store on a relational database
- Data integrity between the subsystems and their interfaces with other Information Systems must be ensured.
- Confidentiality of the information (data confidentiality) that moves between the subsystems of the solution and its interfaces with other Information Systems must be ensured.

The first step should be to provide a record of the Information Resources included in the Security Policy. An informational resource may be generally anything that has information and is valuable in terms of information about the Agency. This defines the scope of the Security Policy.

Finally, with regard to Security Policy, this should be reviewed by a specific organizational unit of the Agency. This review should be based on the changes that have been made in relation to the initial Risk Analysis, the effectiveness of the Security Policy as well as the technological changes that affect the security of the Information Resources.

S.3.8 System Usability Requirements

The system and related applications are characterized by their particular requirements for a high level of usability in the organization and presentation of the digital services they provide.

The Contractor should take into account the different user groups in design, and therefore the different ways of fulfilling the provided functionality without reducing the usability of the applications. It is thought that designing applications with the basic principle of achieving high usability and ergonomics is a crucial success factor for this project. The rational / functional completeness of applications is not in itself a condition for successful system operation but must coexist with an interface (or interfaces) that allows users with little networking experience to handle their transactions with ease.

The Contractor must document in his Offer the design approach as well as the usability testing and design adjustments plan to follow to ensure the desired usability level.

The main principles towards usability include:

- *Consistency:* Apps should be uniform in appearance and consistency in the use of verbs and symbols. The vocabulary used to describe concepts, signs and functions throughout the range of applications and systems must be consistent. Corresponding consistency must be demonstrated by any graphic depictions, page layout, and placement of objects in the web site. At the level of applications and interactive features, similar verbal and functional depictions must correspond to similar results.

- *Reliability:* The user must have clear assurances and an acquired perception through the appearance and behavior of the system that:

    - the information it introduces to the system is correct and several (minimizing user errors through integrated first-level control)

    - the information received from the system is accurate and up-to-date

    - the behavior of the system is predictable

- *Response:* The functions of the internal network - INTRANET must have a response time of <3 sec. The response time does not include the delay time due to the malfunction of the carrier's core infrastructure software and the delay time due to the network. Steps and actions by the user for each desired function must be minimized and depending on his profile.

- *User Support:* The system should include support and help functions for users to provide appropriate information whenever and when required. The Contractor should in his / her proposal describe in detail the methodology he / she will follow for the design of the systems / subsystems and applications, thus

documenting his / her systematic approach to ensuring the above principles.

S.4. Technical Software Specifications

S.4.1 Spot's Software installed in the Touchsreen PC allowing them to make ad-hoc measurements

SPECIFICATION		REQUIREMENT	ANSWER	REFERENCE
General characteristics				
1	Number of licenses	**3**		
2	It will be able to perform preventive measurements of critical medical parameters of specific category citizens in an automated way	OBLIGATORY		
3	It will provide access to Population Medical Data • via specific centers or • via the internet or • mobile phones	OBLIGATORY (to indicate the access medium)		
4	Full Interoperability with Medical Metering Units of Preventive Medicine Centers	OBLIGATORY		
5	Handy Graphic Environment	OBLIGATORY		
6	User authentication mechanism	OBLIGATORY		
7	Full Compliance with the requirements of paragraph **S.3**	OBLIGATORY (to describe its operation in detail)		
8	Full Compliance in connection with the sub-system specification of the paragraphs **S.3.3** and **S.3.4**	OBLIGATORY (describe in detail)		

S.4.2 Team's Software which updates the Web Health file of each patient based on their measurements

SPECIFICATION		REQUIREMENT	ANSWER	REFERENCE
General characteristics				
1	Number of licenses	**4**		
2	User authentication mechanism	OBLIGATORY		
3	Full Interoperability with Mobile Medical Measurement Units	OBLIGATORY		
4	Possibility to locally store Medical Data and send it to the Health Care Folder application with date / time stamp when a broadband network is available	OBLIGATORY		
5	Handy Graphic Environment in Greek Language	OBLIGATORY		
6	Full Compliance with the requirements of paragraph **S.3 Λειτουργικές Προδιαγραφές Έργου**	OBLIGATORY (to describe its operation in detail)		
7	Full Compliance in connection with the sub-system specification of the paragraphs **S.3.3** and **S.3.4**	OBLIGATORY (describe in detail)		