Pervasive technology

readings:

mandatory:
- Korhonen, I. & Bardram, J.E.: Introduction to this special issue on Pervasive healthcare, 2004

additional readings:
- Bardram, J.E. & Bossen, C: Interwoven Artifacts — Coordinating Distributed Collaboration in Medical Care, 2004
- Consolvo, S, Roessler, P, Shelton, BE, LaMarca, A, Schilit, B. & Bly, S. Technology for Care Networks of Elders, 2004

questions:

1. what sort of cscw system is Siren?
2. Ley et al discuss the challenges of collaborating across organizational borders. What do they see at the main difficulties?
3. how do they suggest to design for crisis management?
4. pervasive healthcare includes 1) applying pervasive technologies for health and healthcare and 2) making healthcare available everywhere, anytime for everyone. How do Korhonen and Bardram describe pervasive healthcare?
5. what are the main challenges for pervasive healthcare?
6. what is "tacit communication" and how can it be supported by IT?

follow-up questions

7. Klann compares Siren with FIRE, both addressing the extreme collaborative activity of rescuing fire fighters (and victims) from a fire. But the technical solutions are different. Is this because they see the work practices differently – or represent (model) them differently?
8. Klann argues for presenting fire fighters with as little information as possible. Why (because of fire fighting or cooperative work)? Do you agree? Jiang et al (additional readings) also write about the Siren system and argue for redundancy ...
9. Ley et al emphasize improvisation – why and how?
10. how is pervasive healthcare relevant for cscw? Would Schmidt & Bannon agree?
extra questions:
11. how can knowledge be shared between people and organizations?
12. what are the arguments in Jiang et al for redundancy and what sorts of redundancy do they argue for?
13. the additional readings describe less extreme environments, mainly health care. Will the concepts and arguments from Jiang et al be relevant for less dramatic environments?