



# indiPendant Companion Services

## Personal Emergency System

### 5 Things We Will Do Today:

1. Ask questions to understand the health and safety needs of your loved one at home
2. Present the system
3. Tell you more about ADT Security
4. Develop and agree on the best solution for your loved one
5. Leave this paperwork with you

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*indiPendant*

# Needs Analysis

Helping to understand your loved ones needs

Name? \_\_\_\_\_ Relation? \_\_\_\_\_

What prompted you to call ADT? \_\_\_\_\_

What are your personal home health security concerns for your loved one? \_\_\_\_\_

Anything else? \_\_\_\_\_

Has something happened recently that would make you more concerned about their security than normal? \_\_\_\_\_

Can you give me more details? \_\_\_\_\_

Does your loved one have the same concerns for himself/herself? \_\_\_\_\_

Are your concerns the same for both your mother and father? Explain. \_\_\_\_\_

Do you check in on your loved one on a regular basis? \_\_\_\_\_

By phone? How often? \_\_\_\_\_

In person? How often? \_\_\_\_\_

How long have your parents lived in their home? \_\_\_\_\_

Have they ever had a security system before? \_\_\_\_\_

Daily routine? \_\_\_\_\_

Travelling? \_\_\_\_\_

Do they drive? \_\_\_\_\_

Are you concerned about their safety while in their vehicle? \_\_\_\_\_

Do any other adults live there? \_\_\_\_\_

Any other frequent visitors or in-home services? \_\_\_\_\_

Special needs we have not covered? \_\_\_\_\_

How do your concerns for your loved one impact your life? \_\_\_\_\_

Who is their GP? \_\_\_\_\_

Besides ADT, what other alternatives have you explored for addressing your loved one's home health and security concerns?  
\_\_\_\_\_

Other than yourself, who else has these concerns for your loved one? \_\_\_\_\_  
\_\_\_\_\_

## Three Objectives in System Design

- Independence
- Privacy
- Peace of Mind



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