

Simple C

Always there.



What is SimpleC?

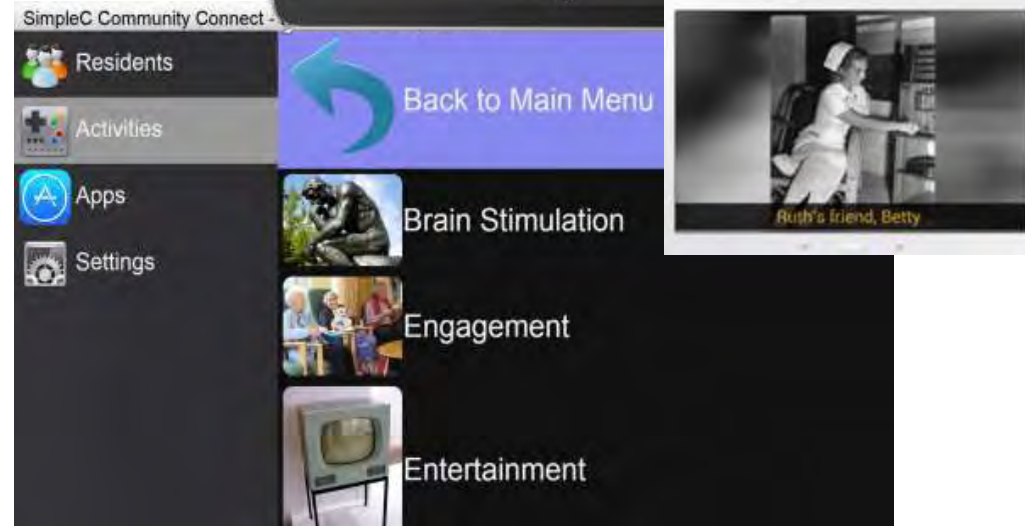
Easy to use care and wellness program, delivered via technology, that uses life history details combined with photos, music and voice recordings to create personalized audio-visual based therapies for individuals.

These therapies become a living care plan and toolset for care staff and family that is always there to help individuals maintain independence and function.

for residents, families, staff and communities



- Wellness Model
- Supports Person Centered Care
Validating the Person and their
Unique Life Story
- Activity Programming
- Engages Families
- Supports the Culture of the
Community



Centered Around Care Goals



Our innovative approach weaves care needs with personalized content to develop interventions that modify behavior to achieve:

- individual goals
- enterprise goals

Resulting in:

- ↑ Engagement & participation
- ↓ Symptom frequency
- ↑ Goal attainment
- ↓ Psychotropic drug use
- ↑ Staff effectiveness & efficiency
- ↑ Job satisfaction





Therapeutic Framework

Reminiscence

Trusted Voice

Music

Validation



We use images or sounds from our library and those provided by family and community to remind them of happy memories



Benefits

- Decreases depression
- Increases self -esteem
 - Improves mood
- Increases sense of mastery
- Calms anxiety and agitation by shifting the resident's focus



We match music from our collection to a resident's particular tastes

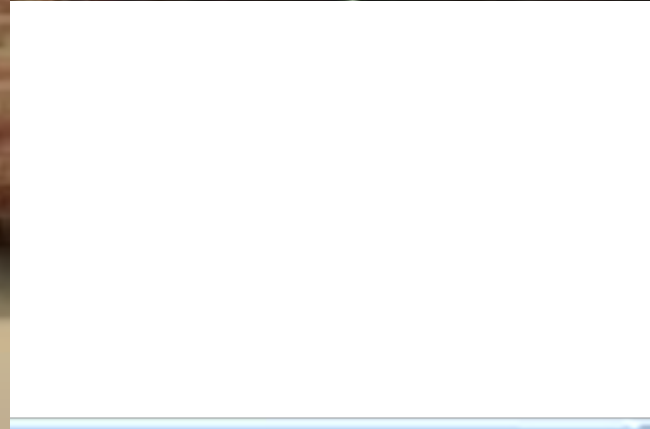
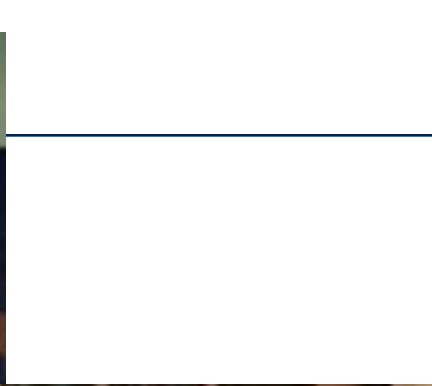
Benefits

- Music connects us to pleasant memories from our past
- The part of the brain responsible for auditory memory is particularly resilient to the effects of aging
- Provides distraction and a sense of calm decreasing agitation and anxiety
- Connections provided through music can help you wake up on the right side of the bed or relax you for a better night's sleep.
- Increases quality of life and communication skills



By combining photos and music we can leverage their abilities to bring positive memories up for a person which provides opportunities to reminiscence about important people, experiences and family stories.





Hearing particular music can bring up specific memories or positive periods of time in a person's life. When images are combined with preferred music it increases the ability to change moods and shift focus.





We use the familiar voices of family, friends, and staff to convey a message to the care recipient.

Benefits

Familiar voices are:

- Proven to be effective at delivering a message
- Calming to someone who is agitated
- Beneficial in decreasing distressed behavior and easing anxieties
- A way for individuals to feel connected to loved ones





We support the use of validation, a person-centered care technique, that validates the individual and what they are feeling or experiencing.

Benefits

- Helps a person feel more secure in their environment by informing them of where they are and what is coming up
- Validates the individual's concerns
- Calms someone who is agitated
- Decreases anxiety and agitation
- Improves quality of life



Companion: Individualized And Dynamic

Companions are personalized for each resident with:

- therapies addressing individual symptoms, care needs & goals
- media reflecting personal interests and life details
- family photos, if provided
- preferred music, and Trusted Voice recordings in appropriate language

Companions also contain therapies addressing each community's care and wellness interests:

- morning care
- meals
- hydration
- bathing
- activities
- sleep

Resident: _____ Community: _____

SimpleC

Music Preferences: Check the types of music the person most prefers. Blank spaces are available to write in types not listed.

<input type="checkbox"/> Big Band	<input type="checkbox"/> Country - Modern	<input type="checkbox"/> Decade 1960	<input type="checkbox"/> Irish Traditional	<input type="checkbox"/> Piano
<input type="checkbox"/> Blues	<input type="checkbox"/> Country - Old	<input type="checkbox"/> Decade 1940	<input type="checkbox"/> Italian Traditional	<input type="checkbox"/> Pop - Active
<input type="checkbox"/> Broadway				
<input type="checkbox"/> Christian - Inspir				
<input type="checkbox"/> Christian - Tradit				
<input type="checkbox"/> Classical - Active				
<input type="checkbox"/> Classical - Calm				

Routines

Is put in a good _____

Is put in a bad r _____

Is often anxious _____

Wakes Up at _____

Goes to Bed at _____

Is comforted by _____

Is discouraged _____

Breakfast at: _____

Lunch at: _____

Dinner at: _____

Snack at: _____

Interests: Check available to write _____

Air Force
 Agriculture
 Animals
 Art
 Art and Crafts
 Baking
 Baseball
 Beaches
 Bible Readings
 Books

SimpleC Companion Quick Configuration

SimpleC

Name of Resident	
Room/Apartment Number	
Community Name	
Companion/Device Number	
Birth Date, Race and Gender	DOB / / Race M F
Today's Date:	
Name of Person Filling out Form	

CARE NEEDS - Check all areas that are present for the individual

Behavior & Neuropsychiatric Symptoms: <input type="checkbox"/> Delirium <input type="checkbox"/> Hallucinations <input type="checkbox"/> Depression <input type="checkbox"/> Anxiety <input type="checkbox"/> Euphoria / Elation <input type="checkbox"/> Agitation / Irritability / Unrestless <input type="checkbox"/> Suddening (late day confusion) <input type="checkbox"/> General confusion <input type="checkbox"/> Disorientation to place / time <input type="checkbox"/> Repetitive motor behaviors <input type="checkbox"/> Repetitive vocalizations <input type="checkbox"/> Wandering <input type="checkbox"/> Exit-seeking behavior <input type="checkbox"/> Hypersexuality <input type="checkbox"/> Restless	Sleep: <input type="checkbox"/> difficulty initiating sleep <input type="checkbox"/> waking up more than once <input type="checkbox"/> early morning awakening <input type="checkbox"/> night time wandering <input type="checkbox"/> frequent daytime naps Lack of Participation: <input type="checkbox"/> withdrawn - refuses to leave room (passive participation) <input type="checkbox"/> withdrawn - refuses to socialize or join in (active participation) <input type="checkbox"/> Does not know what to do or how to get to activity Lack of Participation in: <input type="checkbox"/> physical activities <input type="checkbox"/> cognitive activities <input type="checkbox"/> recreational/entertainment <input type="checkbox"/> group activities (1 or more) <input type="checkbox"/> small group activities (2-7) <input type="checkbox"/> 1:1 activities <input type="checkbox"/> solitary activities	Daily Living Challenges: <input type="checkbox"/> Bathing <input type="checkbox"/> Dressing <input type="checkbox"/> Folding <input type="checkbox"/> Transfer <input type="checkbox"/> Chair use <input type="checkbox"/> Grooming <input type="checkbox"/> Change clothes <input type="checkbox"/> Housekeeping <input type="checkbox"/> Medication (taking meds) <input type="checkbox"/> attend Breakfast <input type="checkbox"/> attend Lunch <input type="checkbox"/> attend Dinner <input type="checkbox"/> Eating (consume food) <input type="checkbox"/> Hydration (drink water) If late day confusion/suddening is present, please describe what the resident is saying or doing during this time and what time this occurs _____ _____ _____
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Who is this Person Who They Are:
 This person? What are the stories, experiences, and parts of their life history that they like best?

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Three Main Therapy Uses

Prompt and Inform

- Activities
- Care events
- Housekeeping
- Hydration
- Meals
- Upcoming Visitors



Redirect or Calm

- Overstimulation
- Restlessness
- Sleep
- Wandering
- Sundowning

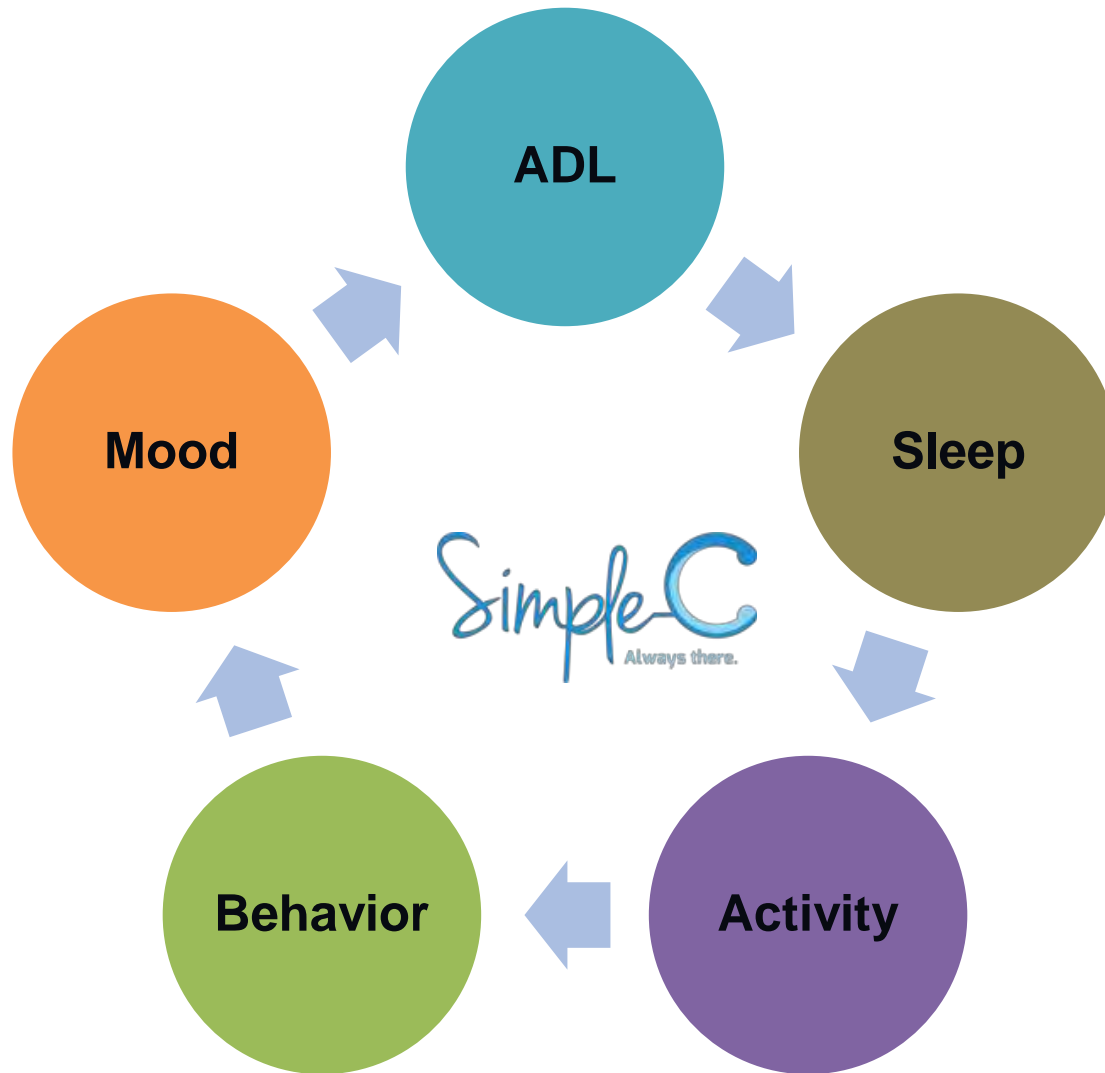


Engage or Stimulate

- Under-stimulation
- Socialization
- Enhance Communication



Supporting the Whole Person





SimpleC Process

What are the needs of THIS individual?

- Care Goal Process
- Life Story

Individualized Therapies Available

- Automated Schedule
- On Demand

On-Going Clinical Consultation

- Individual profiles change to meet changing needs

SimpleC Companion
Quick Configuration

Name of Resident	
Room/Apartment Number	
Community Name	
Companion/Device Number	
Birth Date, Race and Gender	DOB / / Race M F

Life Story

We personalize the Companion with information collected on this form based on the interests and likes of each individual. We use this information and our media library to create the majority of the content on the Companion. We also suggest that families share family photos and voice recordings to further enhance the personalization of the Companion. You should receive a family packet with directions for submitting photos and Trusted Voice Recordings. If you do not, please contact us and we will provide you with your packet. Please feel free to contact us at 770-290-0040 with any questions you have regarding this form or SimpleC. Please fax the completed form to SimpleC Fax 888-829-9794. Thank you for completing this form in as much detail as possible.

Name of Care Recipient	
Community Name	
Room/Apartment Number	
Birth Date of Resident	

Name of Person Filing out this Form	
Relationship	<input type="checkbox"/> spouse <input type="checkbox"/> partner <input type="checkbox"/> care staff <input type="checkbox"/> sibling <input type="checkbox"/> child <input type="checkbox"/> family <input type="checkbox"/> friend
Primary telephone number	
Best day / time to call	<input type="checkbox"/> Day(s): <input type="checkbox"/> Time(s):
Preferred Method of Contact	<input type="checkbox"/> phone <input type="checkbox"/> e-mail <input type="checkbox"/> mail
E-mail address	
Mailing address	
Today's date	____/____/____

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Mr. Williams

Key Need Areas

- Changing Clothes
- Dressing for Bed
- Anxiety
- Agitation
- Depression
- Wandering/Pacing
- Bathing
- Sleep
- Waking Up
- Eating



Mrs. Johnson



Key Need Areas

- Delusions
- Depression
- Anxiety
- Agitation
- Bathing
- General Confusion
- Difficulty Communicating
- Physical Aggression
- Sundowning
- Disinhibition
- Disrobing
- Sleep

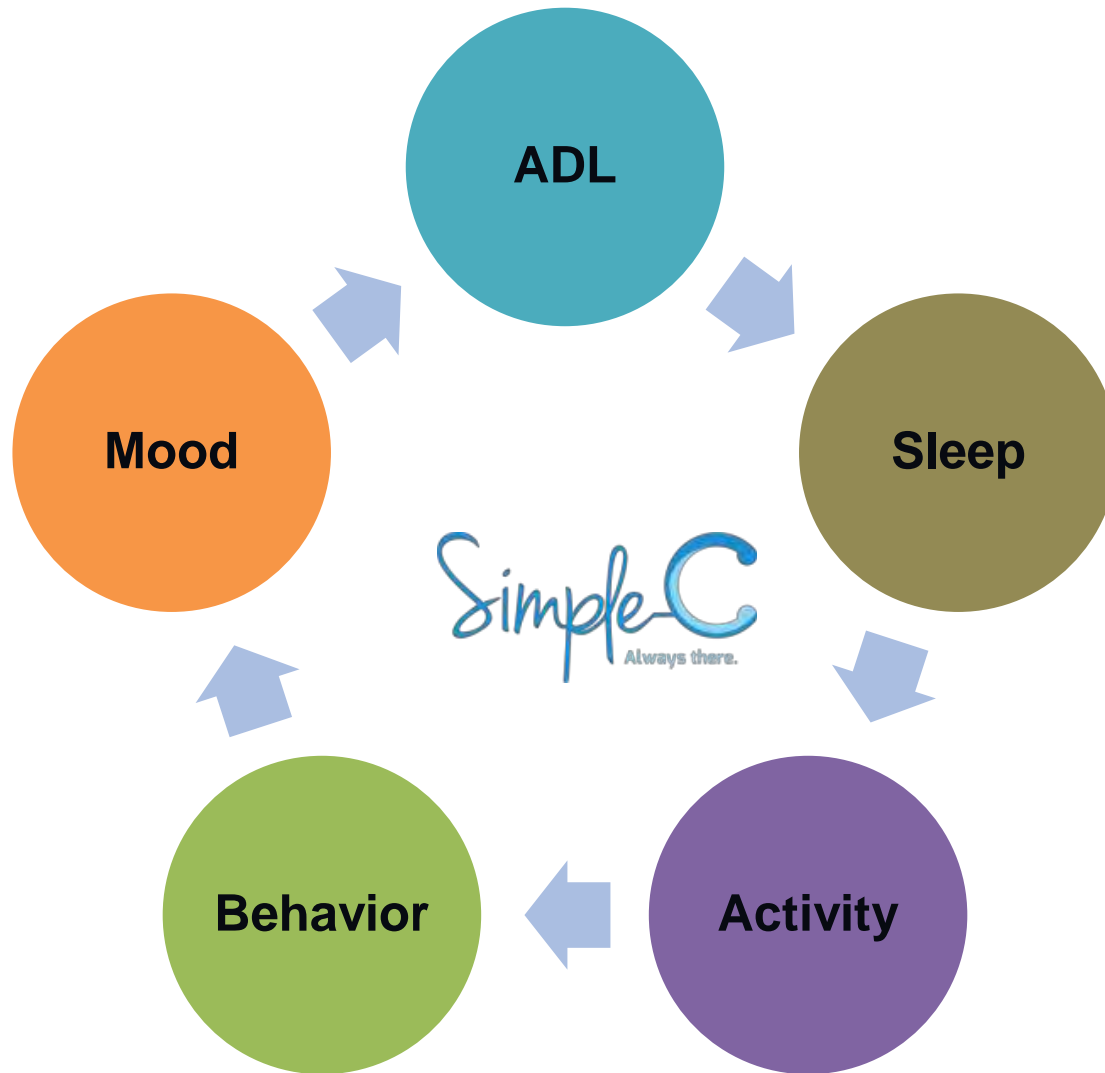
Mrs. Davis

Key Need Areas

- Depression
- Agitation
- Apathy
- Withdrawn- often refuses to leave room
- Frequent Naps
- Lack of Participation in Activities
- Bathing
- Dressing
- Oral Care



Supporting the Whole Person

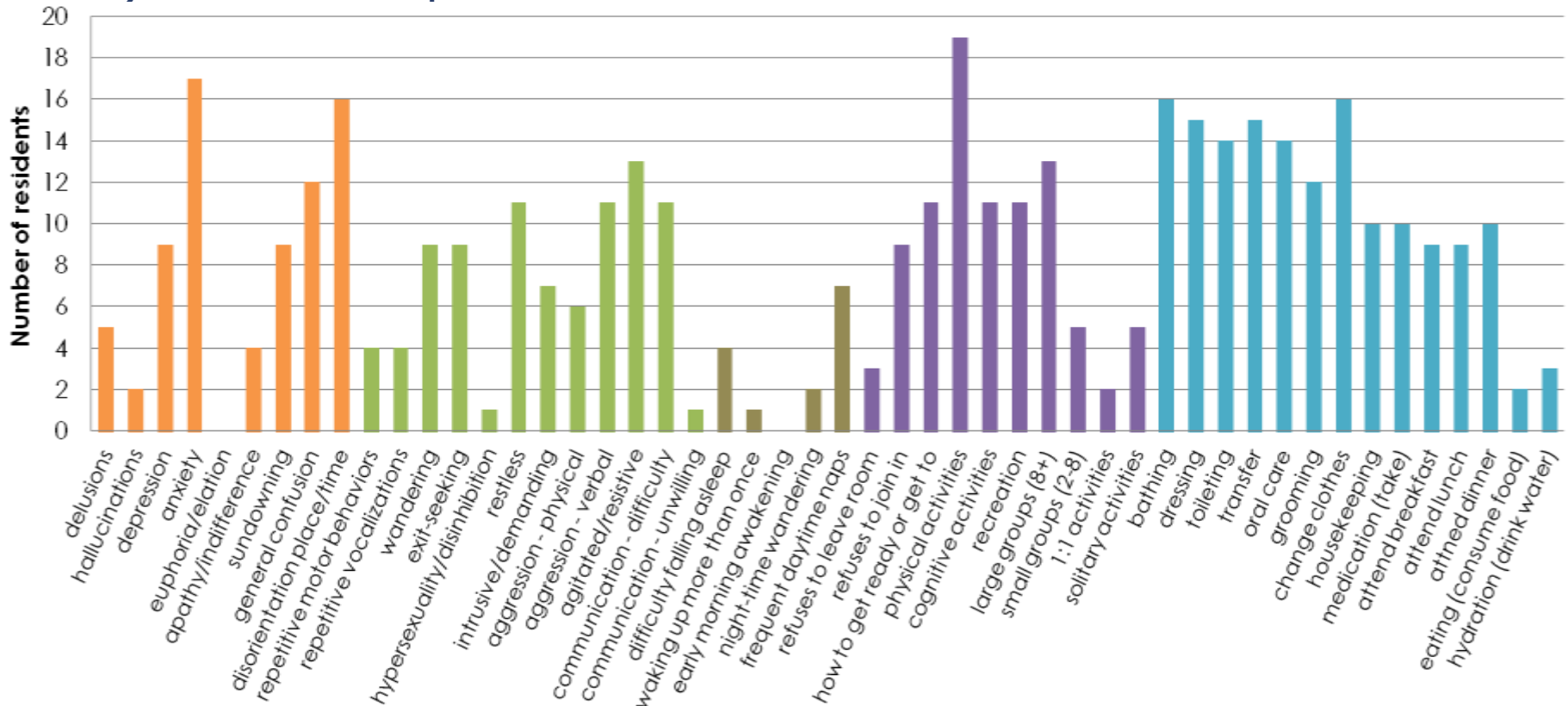


Symptoms & Care Needs

Top 5 Symptoms

- 1) lack of participation in physical activities
- 2) anxiety
- 3) bathing
- 4) change clothes
- 5) disorientation to place and time

Average: 14 per resident



Companion

Access Pleasant
Memories
& Manage
Schedule



Care Station

Start Therapy from Outside the
Room to Cue for Upcoming
Care



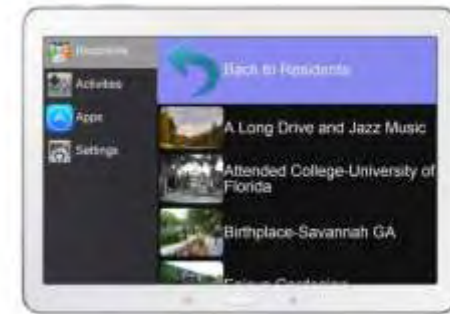
Community Connect

Therapies and Activities for
Use in
Group Settings



Community Connect on Tablet

Mobile to Meet the
Person Where
They Are



Community Connect Content Areas

- Brain Stimulation
- Engagement
- Entertainment
- Holidays and Seasons
- Mini-Adventures
- Mood and Spiritual Support
- Music
- Wellness Activities



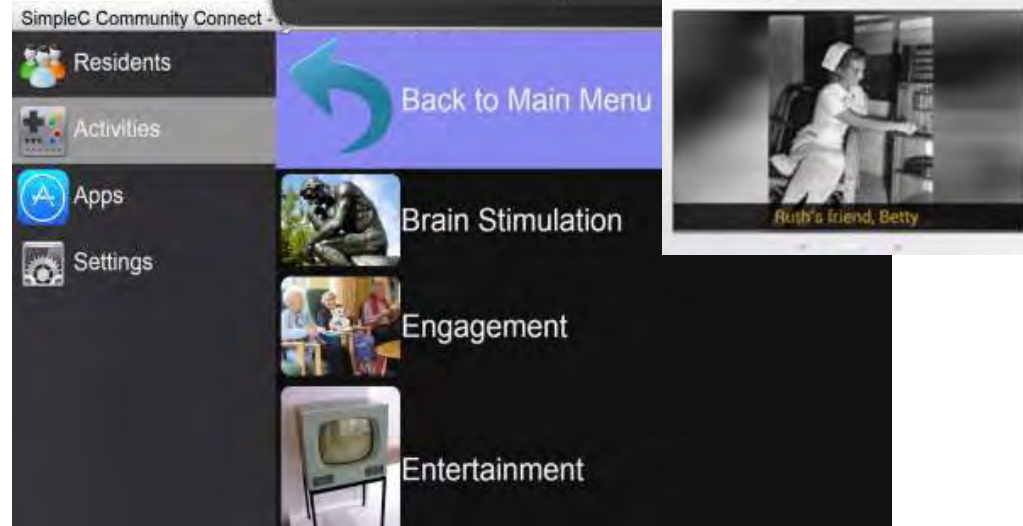
Features

- Compliments Activities
- Opportunities to Engage
- Supports Routine and Flow of the Day
- Community Building
- In-Between Activities
- Evening and Weekend Support

for residents, families, staff and communities



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