

## Survey Questions for Alert Monitoring System for Dementia People

### Background

The objective of this survey is to gather requirements for the development of an Alert monitoring system which will act as a memory bank for the dementia people in their day to day lives.

### Confidentiality

The information corrected in this survey will be anonymously analyzed and stored in a password protected college server.

### Electronic Consent

By clicking ok ,you consent the information to be used for research purposes only not for commercial use.

☐ OK

### 1.Which of the following age brackets do you belong to?

- ☐ 18-25   ☐ 36-45   ☐ 56-65  
☐ 26-35   ☐ 46-55   ☐ 66-75

### 2.What gender are you?

- ☐ Male  
☐ Female  
☐ Chose not to tell

### 3.Do you have a mobile phone,Laptop or both?

- ☐ Laptop  
☐ Mobile Phone  
☐ Both

### 4.What type of phone do you have?

- ☐ Satellite Phone   ☐ Feature Phone  
☐ VoLP Phone   ☐ Smart Phone  
☐ Phablets   ☐ Cell Phone

### 5.What software platform does your mobile device run on?

- ☐ iOS   ☐ Android  
☐ Windows   ☐ Other

### 6.How often do you think you will use the mobile application service?

- ☐ Everyday   ☐ Once a week  
☐ Monthly   ☐ Never

**7.Do you have internet access ?**

- ☐ Always  
☐ Sometimes  
☐ No Access

**8.How often do you use a Laptop ?**

- ☐ Daily ☐ Sometimes ☐ Occasionally ☐ Not at all

**9.How often do you use the calendar on your phone or laptop?**

- ☐ Never ☐ Rarely ☐ Often ☐ Occasionally ☐ Every Day

**10.What do you prioritise as the means of contacting you?**

**1-High Priority      4- Low Priority**

- ☐ Text Message ☐ Telephone Call  
☐ Voice Message ☐ Email Message

**11.What security measures would you prioritise to use on the Alert Monitoring system for Dementia people? 1-High Priority      4-Low Priority**

- ☐ Geolocation check ☐ Login Password  
☐ Verification by Telephone number ☐ Verification by Email address

**12.Would you use the Alert monitoring system more on Mobile App,Web App or Both?**

- ☐ Web App  
☐ Mobile App  
☐ Both

**13.How would you prefer to access the App**

Without login ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 With Login

**14.What is your knowledge on Dementia? Rating 1- Low 5 - High**

☐ Fundamental ☐ Novice ☐ Intermediate ☐ Advanced ☐ Expert

**15.What technological features would you recommend to help the day to day activity challenges of the dementia person?**

☐ Transport Booking system ☐ Appointments ☐ Medication Reminder  
☐ Family Contacts ☐ Emergency Services ☐ Health Eating

**16.On day to day life of a person living with dementia,what activities are often challenging to remember?**

☐ Appointments ☐ Medications ☐ Health Eating  
☐ Names of places ☐ Names of Contacts ☐ Dates and Events

**17.What technological features would you recommend to help the carer/nurses in caring for a dementia person?**

☐ Dementia advice hub ☐ Caring Notes Pad ☐ Contacts  
☐ Medical History Bank ☐ Life Before Dementia of the client ☐ Likes/Dislikes of client

**18.What operating environment would you recommend to use the service?**

☐ Speech Recognition  
☐ Touch screen

☐ Keyboard

☐ Both

**19. How do you feel about social media links being included in the App**

Disagree ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 Strongly Agree

**20. The following are the list of features recommended for the App.  
Choose most important top 3**

☐ Health Eating

☐ Medication Reminder

☐ Events and Appointments

☐ Emergency Services

☐ Contacts

☐ Directions

☐ Transport

☐ Gallery / Pictures

☐ Social Links