Location: Home of PT-014
Date: Mar 3, 2020
Time: 11.00 a.m.
Attendees:
Participant: PT-014
Interviewer: XXXX
Observer: XXXX
Name of Transcriber: XXXX
Transcribed on: Mar 16, 2020
Checked by XXXX
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Checked by: XXXX

I: [00:00] There we go, so now it's working. So I'll put that there and we can start with our questions…

P: Yeah.

I: …okay? So the first one I have is What do you think will happen if you take your medications on time?

P: What do you mean?

I: So when-when you take your medications on time, what do you think happens?

P: What the medi-medication does to me?

I: yea, yea

P: Now it's probably supposed to keep you healthy or… when you get something, [inaudible 00:34] when you get the heart problem…

I: Yeah

P: …and then medications should take care of it… and the same with cholesterol…

I: Mhm.

P: …that's why I get, and the blood pressure, take the blood pressure down. That's why you take the medication.

I: Perfect, ok. And what do you think would happen if you don't take your medications on time?

P: Now, what do you think… your blood pressure could go up, you know.

I: Exactly

P: You can get higher cholesterol…

I: Mhm.

P: …and maybe heart beat, you know.

I: Yeah, perfect. Thank you. And um, did you, were there any advantages to using the SMART blister packs or did you find you liked using the product?

P: No, I mean, we don't need it, you know,

I: Mhm

P: it would maybe be good for people who... who forget about it but I'm afraid when this system, when there's somebody who forgets a lot, are they able to answer the phone? And the phone never rings, there is usually a message.

I: Mhm, do you th-…

P: Are these things people when they forget that maybe they forget...

I: Their phone too.

P: … maybe they not able to look up to the phone you know--

I: Mhm that's a good point. Do you think it would be better if they called you instead of send you a message?

P: Yes.

I: Yeah?

P: At least there's people that hear the ring you know [Mhm]. See you don't get a lot of older people, uh, there's telephones that are so confused for older people you know, and they don't [that's a good point]. You guys you can, you can open it [Mhm] but we never saw computers but the reason we started with work with computers is the reason I know, I use [I used them] computers… but now the women/older people who never… and they think that's the phone where you push the buttons maybe, but your, they're afraid for [Yeah] computers now, all the people [that's a good point, yeah]. There's I mean when they're not able to look out for the medication [Mhm], how can they look after the telephone, you know?

I: Yeah, that's a good point... So it might be better for people later on, or for younger people, [Yes] but not necessarily—

P: When there's somebody who forget about it, you know? [Yeah] And when they forget about the medication, you can be late sometimes and the reason is—Uh, normally I get out of bed about 8:30, [mhm] but sometimes you go away, or you get **comfy** or have Company and you go later [Yeah] … but you stay later in bed [Yeah]… and then the thing tells me you know to give me a message [mhm]. I can miss-I know I need it [laughs] but they know, they didn't know I was lying in bed because I was still sleeping, you know, [yeah] but when there's somebody who forget it really forget it... [mhm] and then they're that far, then the telephone [you don't think it will work, yeah] Especially not with a cell phone, you know. [yeah that's a good point] See the-the old phone, when it rings, the people know, they pick it up they can talk [Yeah], but the cell phone you have to push some buttons--

I: You have to look for the message [You know] — Yeah, that's a good point [Mm]. What did you think of the text messages themselves? Did you like how it was worded? Or—

P: Oh no, that's alright you know [Yeah], but I, but I think I got it two times or you know...

I: Ok, so you didn't get a lot of messages [Hm?], you didn't get a lot of text messages?

P: No no. [No] No because I, first thing in the morning I get out of bed and take a glass of juice and take my pills [you take it right away]. And at night with supper, I open the thing and take the (Cholesterol **04:34?)** for my heart except the blood pressure of the… of the-the blood thinner, I wait a little while [Mhm] because I want to keep the 12 hour gap because [Yeah] it's two times a day [that's right] and they want it for 24 h [Mhm], that's what I do… I-I put it right beside the plate because when I'm finished eating [05:00], and then I go here and watch tv and usually have a glass of water and I take the pill with me [Mhm] and around 9 o'clock you know [Yeah], then I-the pill is laying right here, I take it [that makes sense], you know the blood thinner [Yeah] because I need two times a day and it tells me [inaudible 05:21] the best is 12 hours, 12 hours [yeah] doesn't overlap because it's the type of blood pre- of um blood thinner. [Mhm] There are some types of blood thinners who take days and days to get out of your system [Yeah] but this is supposed to be really fast you know [oh I see] even now the blood thinners, even with aspirin, when you, when get an operation they ask you a week before, stop the blood thinners [Mhm] but with this [Only a couple days] one-one day, you know [Yeah], is enough you know?

I: That makes sense, hm. Now I remember when we first came here we were talking about putting your blood thinner [Yes] in the middle one and then your bedtime, or vice versa. Did you end up, did we end up doing that for you?

P: Hm… uh, I did not open once—

I: Or was it all in one container?

P: No, I think once I opened the wrong side once [Oh ok... ok] you know sometimes you are just so sleepy [yeah] and instead of open this one, you are open you unsure then you went back to that one, you know?

I: Yeah and then you left those in there right?

P: Oh yeah yeah, left them in there—

I: [Laughs] Ok, that makes sense. Yeah.

P: But, different people, when you get older you (**lose it a little bit? 6:55**) [Mhm] and other people do this all day it's and… I don't know—

I: Yeah. Would you have wanted a text message or something to say, hey, you took the, you opened the wrong one, or do you think..[no] No, because you knew already.

P: I know, I know, I knew right away.

I: Yeah okay, do you think it'd be helpful for other people maybe? If they ha-were getting some kind of message or phone call to say oh-make sure you're opening the right one.

P: Oh, maybe it would help for people [Mhm] to make sure, but messages have to come quite fast [That's a good point] because when you open it and it takes, say, half an hour to message, maybe the people already took because to open it maybe they take the medication right away.

I: Yeah, that's a good point [You know]. So you have to be very fast about it if you are going to do it.

P: You know [Yeah], because when you open it… Now I know that a mistake but some people, you know [Yeah], they open it and they go there are my pills and then they take [Mhm] the wrong one at the wrong time. I don't think it would kill them because they need those medication [Yeah] but in-instead of in the morning they take at night. It's not poison for them you know—

I: Exactly, it might make them feel a little sick depending on what it is but—

P: Well [the days? 08:20] maybe [Yeah], because the other one it's still working a little bit then [Yeah] you [inaudible 08:26] [Yeah] in that moment you get a double dose maybe.

I: Yeah. You get really controlled blood pressure [Yes, mhm], very good (laughs). Ok, um, so how did using the package change what you normally did. Because I remember before you kept your, uh, pill box over there [Yeah yeah I still got it], what did you do with this one? Did you keep it the same? Did you change things up?

P: Now, with these one (laughs), with that one [Mhm], when I'm in bed [yeah], I don't have to worry about 9'oclock [yeah]. See I'm sleepy but with this one, sometimes I find I'm sleepy but then I look-at 9 o'clock I went out of bed [yeah] open it, took the pills, and then went back in bed [ok, laughs], you know? [Yeah] To avoid your people calling [oh ok] but when I get my own pills I'm not gunna go out of bed [Yeah], I can wait for half an hour you know what I mean? [Yeah] There's more reflection [inaudible 09:35], when that way and this way, because here there is somebody or something is watching you [Yeah]. I went out of bed many times [Mhm], make some juice and took the pills, and I sneak back in bed [Laughs] for another little snooze, you know?

I: Yeah. Did you like doing that? Or-or did you find it annoying?

P: No, um for me [10:00], not yet, you know? [Okay] You know, I am more happy with the way that is you know? [Yeah] Because I don't need that you know [Yeah]. Because, as I said, when it's at 9 o'clock you have til 9 o'clock or you're gunna miss it, you know. [Mhm exactly] And that one, I **(Inaudible 10:22)** [Laughs]. You know?

I: Yeah that's a good point! [Mm] Did anything else change about the routine? Like in the morning time, was it the same? [No, no] No. Did you ever take this with you is you were going out, let's say, for um.... dinner, if you went out with ah friends. [No, no] You left it at home all the time? [Yes] Yeah, okay [Oh yeah, I never took--] You never took it with you? Ok.

P: Because when we-when we go out for dinner [Mhm], and a, it's not too often… usually we go for lunch you know [Mhm], but when-when we go out for dinner… then sometimes, I took the pills with me you know, the ones I needed, the two you know. [Yeah, yeah] But sometimes not I left them and as soon as I came home 8 o'clock I took them you know. [Ok that makes sense, yeah]. I'm not going to take that big thing in the restaurant you know (laughs).

I: That's a good point... you'd have to bring a backpack to carry it with you right? [Mhm, yes] Okay. Um…

P: [Inaudible 11:28] We don't go too often for dinner anymore, you know [Mhm]. Usually when there's lunch, you know [Yeah], and then we take a big lunch and then at night we take only sandwich, you know [Yeah]. As you get older, especially in the wintertime, you don't feel like… you don't feel like going away you know. [Yeah, it's hard in the wintertime…] I know, I was young too […it's not fun], you want to go away, when we going? But now [Yeah] there's no place like home. [Yeah, home is nice]

I: Ok, so, now, when you think of this blister pack, what else comes to mind? What other, like, feelings—do you feel happy when you think of this? Annoyed when you think of this? What kind of feelings?

P: Now yeah for me I don't need it… [Yeah] yet, you know [Mhm]. I-I put yet behind it, you never know... [Yeah] But there is a financial thing involved too [Mhm] you know? And a lot of people… older people… they living on a tight budget… [Yeah] and the pension no high [Mhm]. And that is an extra bur-burden financial for people. See, I don't know what they're gunna charge. But… [Mhm] it costs something.

I: How much would you pay for this? [What?] How much would you pay for this?

P: I don't know, I'd have to see first what they asked.

I: Well, if-if you were in charge of putting a price on it, how much do you think it would cost?

P: Now, see, don't get [Inaudible 13:11] money, and the monitor I mean there are, there people involved you know? [Mhm] What they gunna charge $100-120 a month you know? [Mhm]

I: So they were thinking of maybe charging about $50 a month [Mhm] for this. Do you think that's a reasonable price for this? Or do you still think that's too much?

P: 50… that is reasonable. For some people even if it was $10 it's too much [Yeah], but for some people, you know, there really are a lot of poor older people. No pension and they count on their pension. No big pension, the maximum is $1400 a month… [Mhm] and when you take rent... [Yeah] it takes almost [yeah, rent is expensive now] you know [Yeah]. A lot of older people are very tight on money you know, they don't have, [Mhm] every dollar counts you know?

I: Yeah, that makes sense… so even 50 would be too much for some people—

P: For peop- [Mhm] even $10 for some-for some people you know? [Yeah] But 50 for me will be… easier [Easier], because I'm lucky. I had a very good job [Mhm] and I had a pension. I get more than most older people [Mhm], you know.

I: Yeah, that makes sense. Um, would you consider in the future if they marketed this product, um, with some upgrades based on all the feedback, and you felt that you now needed the product, would you, [15:00] would you buy a product like this or would you go a different way? What do you think?

P: No, well what, what, what, what, what is a different way?

I: Um, there, so there's actually a lot of devices now in the market that, uh, can dispense medications for you. So, there's some devices um that are about this big and have about a month's worth of medication, and you just push a button and it will spit out a little cup, or a little package [Yeah] that you can tear open.

P: But how much do those cost?

I: Those cost more (laughs) [They cost much more]. They're about $120-$200.

P: That's for people who've got the money [Mhm] for then for the average[Mhm] that-that would be too expensive. [That's a good point, yeah.] You know there is another way like [Bell rings 15:54] my family's home [Mhm] and my brother, older than me, he was 93, but his daughter called him [Okay], you know [Yeah]. In the morning, "hey did you take your medication?" [Yeah] And uh right away they know and how they're doing [Mhm], and it's supper time, she always called you know, and did you take your medication? But a lot of people don't have that you know.

I: Yeah, that's a good point. Yeah. Do- um, do you think she would be willing to pay for something like this to do that for her? So instead of her calling every day, this can remind them instead.

P: Maybe maybe, they moved you know. But don't forget in [Name of the place] is different, there's all these things paid by the government anyway, you know [that's a good point, yeah]. But then it's a private company and private companies care about business, they make money, you know. They want to make, they cannot lose money, you know.

I: Yeah… yeah, that's a good point. Thank you! Um, now I had another question for you. What did, so when you were using the product, what did the people around you think and feel about you using this for your medications?

P: No, my-my son he looked at it, you know, he didn't say anything.

I: No? He wasn't, like surprised or wow that looks complicated, or anything?

P: No, no, he just looked at it you know and—

I: And that was it? OK. Um, now if you took your-- if you were taking your medications through here, how did it affect the people around you? Or did it affect the people around you?

P: No, I mean, it's just the two of us. Once you get company, you're going for coffee or lunch you know, I mean [Yeah], it-it doesn't do anything to them [Mhm]. And I use it and they saw I was using it you know—

I: Yeah. So it-it worked out nicely [Mhm] because you were both using it together [Mhm]. OK. Do you think if only you were using it and [wife's name] wasn't using it, things would be different?

P: No, I don't think so…

I: No? Ok. An um, I think I asked you this question. But, how did using this affect the way you took your medications? So you were saying before that you would wake up in the night to take it… um, were there any other things that changed?

P: No, the only change is I had to make sure at 9 o'clock I open the thing… or they'd give me a message… [Okay] That was the only change you know.

I: Yeah. So you were more aware of the time then, so you'd want to make sure ok [Yeah] I have to do it before this time.

P: Before, you know, I felt sleepy, I keep my eyes closed and turn around [Yeah], but now, I felt obligated and you don't want the people to call. [Call, yeah] Cause I came out of bed [Yeah]. And then sneak in bed, you know.

I: Yeah (laughs) ok. Um and so, did you find that this product was useful for you?

P: Not for me. [No? Okay] No.

I: Did you find it was ah irritating or cumbersome?

P: No not that you know [Not that far]. Not that bad but I in the position, I don't need that, you know?

I: Mhm. So it was almost like a neutral feeling [Yeah], it didn't change too much, it wasn't really too different?

P: No

I: Ok. And, um, so what skills do you think you need to use this blister pack. Do you think you need some special training for it? Or do you think it's really ok to pick up and use right away?

P: Yeah, see, then again, for normal.. when you still normal pair, there's no problem [Mhm]. But then there's some people who… [Yeah] who start with dementia… then every little thing, how can they observe what you're telling them, you know?

I: Yeah. So would you say for yourself, was the training that we gave when we came in [oh that's nothing] was that enough? Was that too much?

P: No, no that's enough.

I: That's enough? Ok. Now if we made a video for example, would you prefer that instead? Or do you like having people come and show you how to use it?

P: No, video could do it too you know?

I: Mhm, so either or they're both the same.

P: Mhm

I: OK, now ah what about those, I know the pictures that we took with your hands [Mm], did you use those at all or?

P: No no [Was it], you had to look only once and… [Mhm] then you know how to open it [exactly] you do that two times a day... [Yeah] you know. This was the first time, you know.

I: Yeah, that makes sense.

P: But-but then I had, you know, a little bit, it was a little bit harder to open these [Ah]. And--

I: Was it just the, on this last one that it's harder?

P: No, it was when I, you know, when I had to open [inaudible 21:45] … I had a little spoon, in fact let me show you… [Oh okay] (leaves to show spoon) [End of recording 21:56]

P: [Inaudible from another room 00:00] Hard to get the medication out.

I: Okay.

P: She had a little spoon laying on top of it.

I: Oh, I see.

P: Yeah.

I: Yeah if we want…

P: (Crackling, difficult to hear 0:11) but then it was, see here, get-th, here I get like that.

I: I See.

P: And open and then [inaudible 00:21] hard to get that, [With the finger] the medication out and I was getting it out like that yeah.

I: Okay, so you use the spoon to scoop it out? [to scoop it out] That's so clever!

P: Sometimes you have to [inaudible 00:34] the pills, you know [Mhm]. Sometimes it's a little bit harder to get them out, and I use [spoons drop on counter 00:40]. [that's a great idea] And-and the spoon is laying on top of it all the time [spoons drops on counter 00:44].

I: It's the perfect sized spoon, [Yes] it's nice and small [Mm]. I like that, that's a, a very clever idea [Mm] I haven't seen something like that.

P: [inaudible 00:53] When they come out you get a pill and there's still some here [Mhm], the pill slides many times off you know.

I: Yeah it gets stuck in that paper [Yeah] groove so if you have a nice [Yes] clean cut with a spoon it's easy to scoop it out.

P: Yes, and I used to use little spoons see--

I: Yeah huh, so now my question is how long did it take you to come up with [something falls 01:18] Oh. To come up with the system? So when did you start using the spoon? Was it right away or?

P: A few days, [Few days, okay] when it was harder [Yeah]… and then I would have with the coffee or the tea [Yeah so, you'd have]— [inaudible 01:36] because it was hard sometime seen here, two, three… I take a little pill [Yeah] you know then it falls [inaudible 01:49] you know. [Yeah that's a good point, huh] once it fell on the, on the table and the floor, little pill lost, and then-then I could not get it.

I: With the spoon, hm. Did you end up finding the little pill that fell on the floor?

P: No, I did once and then I start the spoon—

I: Got it, ok. Perfect.

P: And I don't mind a little pill when it falls. [mhm] You know, we don't normally but my son got a dog [oh I see] and when he visits I don't want the dog to see the little pill laying somewhere [Mhm]… and dogs they sniff always they will find it [They probably will yeah]. **I was on my knees making sure I got that pill [Yeah], I'm not worried about the pill I can take another one but, know you.** [you're worried about the dog yeah] the dog you know [Yeah], or little kids you know [Yeah]. Pill on the floor, they will [inaudible 02:51]— [yeah that can be scary] but that is the reason I use the spoon.

I: Hm. Did you find with the spoon once you started using it, no more pills falling on the floor?

P: No no no

I: OK, ok. Hm. Um, so I'm just looking for my next question. Um, so how did you find reading the labels? Did you find that it was ok? [No] That it was hard to read

P: No, no, there was no trouble, you know.

I: Did you like the numbers and the words? Or did you think the numbers were confusing?

P: No, I mean I cannot say anything to improve that you know, it's alright you know.

I: Okay um, and, I kind of asked you, so how did you feel about the text messages? Did you find that they were—I know you tried your best so that you weren't getting text messages [Mhm] but when you did get text messages, um, did you find that um they were coming at the right time? Like you knew ok I missed it, I expect a text message? Or was it coming at really weird times?

P: No, they… sometimes I didn't, at night I was looking at the computer and was like hey they gave me a message [Mhm] and maybe I took the medicine a little late? But no, it was 6 o'clock. But sometimes you come home a little bit late [Mhm] and take it at 7. And I was so used to take the medicine that if I take an hour later there was message but because there was no ring [Mhm] I was looking always on the telephone. I took at 7 o'clock the medicine [Mhm] because with supper [Okay]. And then later on maybe or sometimes the next day, hey I had a message from the pharmacist, you know [Okay]. And that was the next day [Yeah]. [05:00] Because I think the messages, a ring is better you know?

I: Yeah, yeah. But the text messages, you don't get a sound.

P: No. [No okay] And I'm not when the thing is laying there [Yeah] and maybe-maybe I'm [inaudible 05:19] forget to it will me when I go away [Yeah]. Because I'm not like sitting all day. [Yeah] You know? [mhm I understand] Most times I'm home and then the computer go in the other room [Yeah] the computer you know [Mhm]. But most people, you know [inaudible 05:40] tv you know (laughs)

I: I don't have a tv, I have my phone right? [Laughs]

P: Yeah. But you walk in the street everywhere they go [Yeah] in the restaurants and they've got their big sign thing, you know?

I: Yeah. OK, and um I asked you before but the-the language of the text messages, so the way it was written, did you like it? Did you find that it was not very nice? Was it okay?

P: No no.. No... No…, doesn't bother me. You know [Okay]. It is a reminder you know [Mhm]. But sometimes the reminder I had the next day.

I: Yeah. So it wasn't-it wasn't too useful.

P: It was not ringing to warn me because that-they warn me but I didn't get a message [Yeah] because I don't look at the telephone [Hm]. That is that only thing I don't like, there should be a ring you know.

I: Yeah, that makes sense. Ok, thank you.

P: Mhm. You tell them there should be a ring.

I: There should be a ring yeah [No but many time I don't look at that thing you know] mhm, ok. That's a very good point to bring up, I like that. Um. And I think I mentioned that before but, for this particular device would you think about using this in the future if you needed to?

P: M-Maybe when-when I need it you know [Mhm], but it's very hard to say now. Because maybe something else comes up you know. [yeah no exactly] but it will help you [Mhm] but only when there is a ring. Not for the messages [Yeah]. Believe me all the people, they don't look at the telephone [Mhm]. You know, [inaudible 07:34] you need it, and I, when I go away I put it with me at least, [inaudible 07:43] and you need something you could call [Yeah]. And when you could, car trouble you know you could [You can call] phone [inaudible 07:52].

I: Do you think if they had something inside this black box that made a sound, do you think that would be better?

P: As long is loud enough. [yeah] Because don't forget we're older. [Mhm] You are getting deaf too. There's have to be loud enough. See the telephone at least you can put it very loud you know.

I: Yeah, so you'd have to be able to adjust the sound [Mm] so that it's loud enough or [Loud enough you know]... Mhm that makes sense, ok. And um, I think we've talked about all of this already.. um so what would stop you from using this kind of product let's say, in 3, 4, maybe 5 years? What would be some issues that would say, you know what I wouldn't get this one, I'd get something else.

P: No, maybe (laughs) they come, I don't know, something fancier, I don't know, know you [Mhm]. And you said the one you press the button it comes in little cups [Yeah]. You don't have to open it you know [Yeah]. But that is of course more money and you cannot afford it you know. [yeah] But it is more good but it should ring with it [It should ring okay]. Not a silent phone.

I: OK, ok. But in terms of let's say the-the technology itself and being able to—

P: Oh the technology is good you know [It's good right]. The-they, Somebody [Mhm] or something is watching you know—

I: Did you like that feeling of having someone, knowing that someone was able to see that?

P: I don't need that feeling yet [Okay]… because I'm not in that stage yet [Yeah, yeah]. I'm lucky, I'm almost 90 but I still [can do it by yourself yeah] can do it myself and I… [10:00] it still works you know but I don't know [inaudible 10:05] now you know [Mhm].

I: Do you think that would be something other people would like? Or do you think that would scare other people? [huh?] Do you think that, knowing that, let's say someone was be-could see what you were doing [Mm], do you think other people would like that? That it would be comforting? Or do you think that it would be scary for other people?

P: Now for some older people who have never had computer or cell phone [Yeah], everything they think is spooky you know, there's something you know [Yeah]. You know for some people [Mhm]. Now and you get sometimes older women too, they're not in the work forced, they're always home [Yeah] and they don't know all the technology you know [Yeah]. And you ask most women, they always had a hard time even when you get a tape recorder to do things you know. [mhm] They're not medical-medical inclined you know what I mean. [Yeah. So it really depends] And for them they think it's kind of spooky you know [Mhm]. But the only thing I can say it is a good system but there has to be a ring.

I: Has to be a ring, ok, perfect. Um, and let's see. Got a few more questions, so um… So how was the process of using this device? So um, in terms of picking the device up from the pharmacy and dropping this one off. How was that process? Did you like that? [Now…] Did someone come and drop it off?

P: To tell you the truth, it's a pain in the neck [Pain in the neck]. Because, especially in wintertime you know [Yeah]. I mean I'm able, but you know, with ice and snow... Now they deliver it you know [Yeah] when they want. My case, I brought it back and picked it up you know what I mean [Yeah]. But I have to think it is still a few extra trips you know [Mhm].

I: So it's more trip because before you'd have about a month's worth of medications right?

P: Three months [Three months]— every three months.

I: Ok.

P: That's the maximum and that's every three months you know [Mhm]. It's really I think only once that I pick it up. Now I will bring these back usually on Wednesday [Once a week, yeah] and then on a Saturday morning I will pick it up and actually [ah ok]. I have to make two trips [Two trips yeah, that's a lot more time] And that's every week [Yeah]. Now with the other medication one trip every three months, is different. Now I'm very close to it [Mhm]. But maybe your pharmacist is even there you know, you have to take your car and go there you know [Yeah], so it depends where your pharmacy sometimes, sometimes is quite far away. Because before I went to this pharmacist, mine was [a new 13:35] street [Okay]. I lived there for a long-a long time [Yeah], you know, and that's where my drugstore was [Mhm]. Now, when I went to the doctor, and the doctor, and then went to passed the drugstore and said ok wait

for half an hour. And then I'd have the medication for three months you know what I mean [Yeah]. But a thing like that its [that's a while, it's a lot more going back and forth] Yes.

I: OK, now did you need any help with the either picking up this or using this product over the 2 months? Or were you able to do all of it all by yourself?

P: I didn't get that—

I: Did you need any help [No no] with picking up or dropping off the product?

P: No, no.

I: Did you need any help using the product in any way?

P: No I didn't need anything, I could do it all myself [Okay perfect]. Picking it up and bringing it back you know—

I: Mhm and then opening it up and making sure it's all good.

P: Yes

I: OK. And um, did you have any feelings about using this blister pack? Like were you worried about what other [15:00] people thought when you were using it?

P: No no [no?] I don't care what other people think of me [Okay, okay]. (laughs)

I: Um do you think that would be a problem for other people?

P: Maybe some people [Okay]. Maybe they're ashamed they think oh people think I'm losing it. You know, you know? [Yeah] Everybody's different you know [yeah]. I don't give a damn you know, what they think [Mhm].

I: That's a good way, I wish I had more of that [Mhm] (laughs). Um, and um, when you were using this blister pack, did you have people supporting you to use it? Were people going yay, good job you're doing it?

P: Some [inaudible 15:48], and I've got friends same age as me that went over you know [Mhm], and that looked at it. But they don't need it either yet you know [Yeah]. I'm like a guinea pig trying something out [Mhm]. And they look at it but that's all.

I: OK, ok. Got a few more (laughs). Um, now how do you feel that using this affected or did this affect the way you acted or interacted with your um doctor? Did this change anything with you doctor [no no no] No? And what about with your pharmacist? Do you feel that this changed anything with your relationship with the pharmacist?

P: No, I go there a lot more often you know [Yeah]. I get close to him, I know him better and he know me better [Yeah] because I go two times a week now you know (laughs). And sometimes you talk for a minute about something else you know [Yeah okay]. Because that's what I like about this pharmacy, it's close by and you start to know each other you know.

I: Yeah, ok, so it was good then to be able [Yeah] to connect with them. OK. And um, overall if you could rate how happy or how satisfied you were with this product, what-what do you think? Overall, were you satisfied, were you not satisfied, were you a little?

P: No, the reason is I'm not satisfied with it because there's no ring [Okay]. I don't like the messages you know [mhm] because sometimes I found "oh I got a message [Mhm] from yesterday" [Yeah]. [inaudible 17:39] put it together, then it doesn't work like for me you know [Yeah], right [Exactly] I got the message a day later or sometimes more days later [laughs] I get a message.

I: Ok, so then it, the messaging really didn't work. [No] okay [not for me no] Ok. And if the messaging did work, would you like this a bit more or? [Yeah but the-the messages have to come with a ring]. With a ring yeah Ok, ok. Um and I think I asked you some of these questions already, but the photos that we took at the very beginning [Yeah], how did you feel about that process? Was it ok? Did you not like it?

P: It was ok. [ok] But you have to look only one or two times, you know [Yeah]. You open it once or two times you know how to do it. [Yeah, exactly, ok, um] but then again maybe people lose it a little bit that's a different story [Mhm].

I: Now if you decided to use this in the future, would you want to use those photos again? Or would you, do you think you'd remember it? Or do you think you [No the..]would want someone to come and give you a refresher?

P: What you can do, because it could be two years from now [Yeah], you could put a picture with it you know.

I: Mhm. So maybe on the, on the front, it comes with a picture or something?

P: You know there's many times you buy something and you get to, what to do, when you get a picture you know [Yeah], to remind people you know [Okay]. Don't forget the people need that… they're very slow with that you know [Mhm]. And they forget things you know. [mhm] But you tell them today, maybe two weeks from now they don't know [They don't know yeah]. The people get it all there, and they don't need it you know [Mhm]. This is for people with dementia or very forgetful. [mhm]

I: Ok, and my last question is, how did you feel about me and Sadaf coming to your house to do the study? Did you like that process? Did you not like that process?

P: No, I mean that's alright [Yeah] because your-your people called and, took the people then they get the feeling how people think about it too you know [Mhm were you...] and [Yup? No keep going]. And they can ask questions, you know what I mean? [Yeah, yeah]

[Female voice 20:30: You're almost finished?]

I: Okay. We're almost done (laughs).

Female voice: Okay

P: We're not in a hurry you know

I: [Laughs]

Female voice: [Inaudible 20:38]

I: [Laughs] Um, what else was I going to ask. Um did you, were you comfortable with having us here or did you, would you have rather met us, let's say, somewhere else, at the pharmacy?

P: No, no, no, I like home [Yeah okay]. No no that's alright.

I: Okay, so that's actually all of my question left, so we're gunna stop the- [21:02]