

A caregiver in a pink uniform and white mask is assisting an elderly man with a cane. The caregiver is smiling and looking at the man. The man is wearing glasses and a dark blue jacket. They are in a room with large windows in the background.

Sophiamedi Experience

BEACON OF HOPE

Sophiamedi
Annual Report 2022

2020.10 ▶ 2021.09

 Sophiamedi for home nursing
Sophiamedi

Illuminating people's hearts
by devoting our wisdom to
caring for lives.

To be a “light of hope” in this chaotic time.

“BEACON OF HOPE”

A ray of light shining in the darkness.

A warm light that illuminates the world.

The world around us is changing drastically
due to the COVID-19 pandemic.

Many people are anxious because of the unfamiliar
environment.

There are clients who are waiting for us to visit them.

We hope that we can be a light
that illuminates society and people.

Sophiamedi will continue to
take on this challenge.





For me, “care for life” means to face the present
of the customer while looking to the future.

I will look into every corner of your mind
and think together with you to solve
what is troubling you now.

At the same time, as a medical professional,
I also consider the future course of
the patient’s life and propose various options.

We believe that it is important
to give you a concrete image of the future
as much as possible.

(Nurse/Station Meisei)



Rehabilitation is a joint effort with the client.
It requires both the customer's positive attitude and
the therapist's hard work,
and it can't happen unless they are both facing
in the same direction.

That's why we need to think together
about what kind of life
they want to have in the future.

(Physical Therapist / Station Nishimagome)



I try to provide nursing care
using all five senses.

“You don’t look so happy today” or
“Your room is more messy than usual.”


I try to understand the smallest details
of the client’s feelings.

I believe that this leads to client-oriented nursing.

One of my seniors once told me,
“From a nurse’s point of view,
there are many patients to take care of,
but from the patient’s point of view,
you are just one nurse”.

I feel the importance of these words more than ever
because I often work alone
with clients in home nursing.

(Nurse/Station Fudomae)

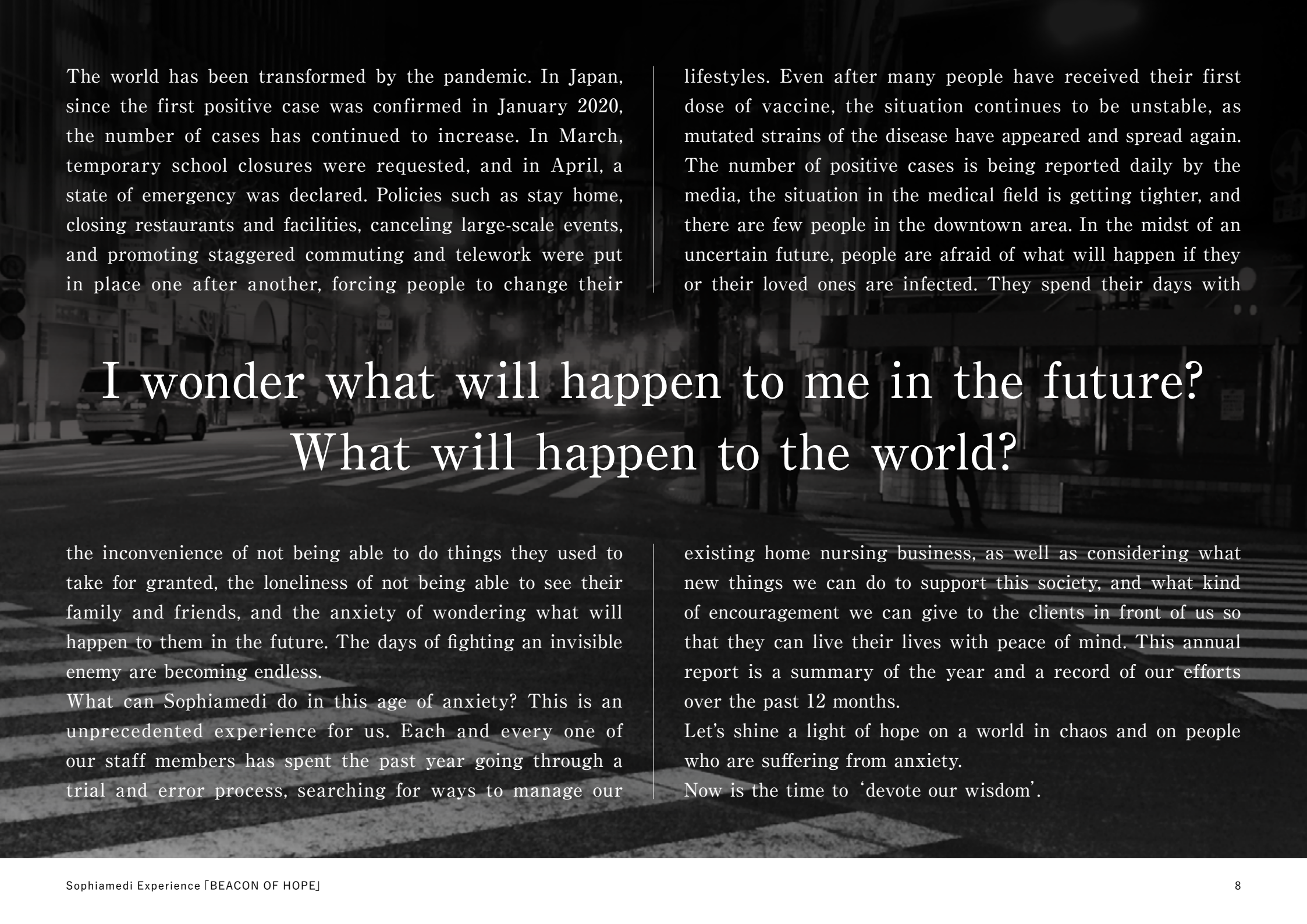
A close-up photograph of a baby lying down, looking up with their mouth open. The baby has a nasal cannula and other medical sensors attached to their face. A person's hands are visible, gently holding the baby's head and chest. The background is a quilted blanket with a diamond pattern.

For me, “care for life” means to worry together
and face challenges together.

And to achieve this, as a therapist,
I believe that it is important
to create a mechanism
that encourages people to
want to challenge themselves.

Through my daily interventions as a therapist,
I want to build trust
so that my clients always feel
“suggestions from this person will lead my life
in the right direction”.

(Occupational Therapist / Station Motosumiyoshi)



The world has been transformed by the pandemic. In Japan, since the first positive case was confirmed in January 2020, the number of cases has continued to increase. In March, temporary school closures were requested, and in April, a state of emergency was declared. Policies such as stay home, closing restaurants and facilities, canceling large-scale events, and promoting staggered commuting and telework were put in place one after another, forcing people to change their

lifestyles. Even after many people have received their first dose of vaccine, the situation continues to be unstable, as mutated strains of the disease have appeared and spread again. The number of positive cases is being reported daily by the media, the situation in the medical field is getting tighter, and there are few people in the downtown area. In the midst of an uncertain future, people are afraid of what will happen if they or their loved ones are infected. They spend their days with

I wonder what will happen to me in the future? What will happen to the world?

the inconvenience of not being able to do things they used to take for granted, the loneliness of not being able to see their family and friends, and the anxiety of wondering what will happen to them in the future. The days of fighting an invisible enemy are becoming endless.

What can Sophiamedi do in this age of anxiety? This is an unprecedented experience for us. Each and every one of our staff members has spent the past year going through a trial and error process, searching for ways to manage our

existing home nursing business, as well as considering what new things we can do to support this society, and what kind of encouragement we can give to the clients in front of us so that they can live their lives with peace of mind. This annual report is a summary of the year and a record of our efforts over the past 12 months.

Let's shine a light of hope on a world in chaos and on people who are suffering from anxiety.

Now is the time to 'devote our wisdom'.

Now is the TIME.



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Period covered in this report

This report is based on the period from October1, 2020, to September 30, 2021.

* Some statements may cover information from before and after this period when necessary

01

Who We Are Our Purpose

The future Sophiamedi aims for

What kind of future are we aiming for?

Since our founding in 2002, we have been working to deliver safe and warm home care throughout Japan. With the aging of the population accelerating, the need for home healthcare is expected to increase further in the future. We will continue to create a future where we can continue to support society effectively.



Vision

To develop safe, warm home care environments throughout Japan and create a world where all patients can live happy and comfortable lives.

Mission

To devote our wisdom to caring for lives.

5Spirits

- 1** **[Customer-first]**
Commit to the customer-first principle and see things from their point of view.
- 2** **[Expertise]**
Be proud to be a professional and pursue every possibility.
- 3** **[Humanity]**
Have a sensitive and human approach.
- 4** **[Growth]**
Continue to learn and let it be a driving force for change.
- 5** **[Team]**
Respect and support each other with a friendly spirit.



What are we here for?
To contribute to everyone's life choices
by applying "Care for life"
in this turbulent era.

President and CEO

Aya Ito



Profile: After working at a publishing company and being a housewife, she joined Recruit Co in 2000. In 2014, she became General manager of the Media Production Department of the Bridal Business Division, and in 2015, General Manager of the Diversity Promotion Department of Recruit Holdings Co. In 2016, she became General Manager of the Social Enterprise Promotion Department (currently the Sustainability Transformation Department). In 2019, she became General Manager of the VMS Promotion Division (currently the Organization Development Division) of Sophiamedi, and from February 2022, she assumed the position of CEO.

Japan's super-aging society Increasing demand for home care

To devote our wisdom to caring for lives. This year marks the 21st year since Sophiamedi started its home nursing business in Shinagawa Ward, Tokyo, and in the year to September 2021, we had 14,039 clients, 81 offices, 720,659 visits, and 1,361 employees. Morning, noon and night, sunny days, cloudy days, rainy days and snowy days, pedaling our bicycles, riding in our cars, or in our day services and corporate departments we are thinking of each and every one of our clients. In each visit, there is our 'care' for the "living" of our clients.

However, home care is still a limited

option in Japan. In today's super-aging society, many people want to spend their final days in a familiar place, such as their own home or a nursing home, living a life similar to their usual life¹⁾. On the other hand, about 70% of the places where people die are hospitals²⁾, and in order to increase the number of options for living in accordance with their wishes, it is essential to secure home medical care and improve nursing care services. Furthermore, it has been suggested that approximately 490,000 people may not be able to receive end-of-life care in 2040 due to the further acceleration of the aging population³⁾. The demand for home care and home nursing is increasing, but the number of home nurses in 2020 will be about 90,000⁴⁾. The number of full-



time equivalents is estimated to be about 50,000⁵⁾. If the percentage of patients at home were to rise to about 30%, it is thought that about 150,000 home health care nurses would be needed⁶⁾, so there is an urgent need to secure human resources to work in this field. Our business is taking on the challenge of this major social issue. In 2021, COVID-19 continued to rage, and the number of people receiving home treatment skyrocketed, especially during the fifth wave in summer. For us, the past year has been a time of systematic efforts to respond to COVID-19 while continuing to care for our clients daily, and it was also a time when it became more challenging to fulfil our vision; “To develop safe, warm home care environments throughout Japan and create a world where all patients can live happy and comfortable lives”. As of February 2022, when this report is being produced, we are still struggling to cope with the sixth wave. In Japan and around the world, the spread and threat of COVID-19 has accelerated the social fragmentation that has long been a concern, and people are becoming increasingly anxious and lonely. Not only infectious diseases, but also rising temperatures, frequent natural disasters, and global

environmental crises are adding to a critical agenda. At this turning point where we need to build a sustainable society, we are being asked to rethink the way we used to work, the way we live, and the way we as individuals and companies should be. I believe that we are being confronted with the question, “How do we act and what role do we play? What are we, Sophiamedi, going to do in this rapidly changing world? What is the purpose of each visit today and tomorrow, what are we doing for our clients and for this society?” In the COVID-19 pandemic, we have been asking ourselves these questions.

“Care for Life” is your choice of how to live.

It was just six years ago now. My own father was also one of the users of home nursing. As he suffered from severe diabetes, lost sight in one of his eyes, and his kidney function weakened, he made the choice to stay at home to recover. For example, every day he would look out the window at the familiar view of the outside world. Watching a baseball game on TV with his grandchildren. Eating a little shaved ice with azuki beans at snack time. Surrounded by doctors, nurses, therapists, helpers, and care managers, my father's body, which

he had worked so hard on alone for the sake of his family, was being looked after by the hands and eyes of everyone. For my father, it was a difficult struggle against his illness, but his choice of “home treatment” was not only a treatment, but also a choice of his own “way of life”, and I think it was a time when he could look at himself rather than his illness.

Why are we here? What is our role? Our role is to provide not only hospital care, but also the option of home care, and to “Care for life” not only the disease, so that our clients can cherish their own identity. There is no right answer as to how to live, but we create care that allows people to feel that they can choose their own life. By having the community work together to provide this care, we can create an infrastructure that supports people. We hope that aging and living will be less anxious and more reassuring, and if possible, more enjoyable. This is the reason why we, Sophiamedi, are moving forward. To achieve this, we must face up to what we are not doing now and what we need to improve. The disclosure of various facts, measures and reflections in this report is part of this effort. And one more thing. In order to put this into practice, we must ask ourselves whether we are

also valuing the “life” of those we work with. Are our medical and career-track colleagues healthy and fulfilled, improving their skills and humanity, trusting each other, and feeling happy to be here? We must continue to look at the survey, ladder indicators, and individual voices to recognize the challenges and make changes. We still have a long way to go, and more effort is needed.

What we can do to help in the great transition to a sustainable society

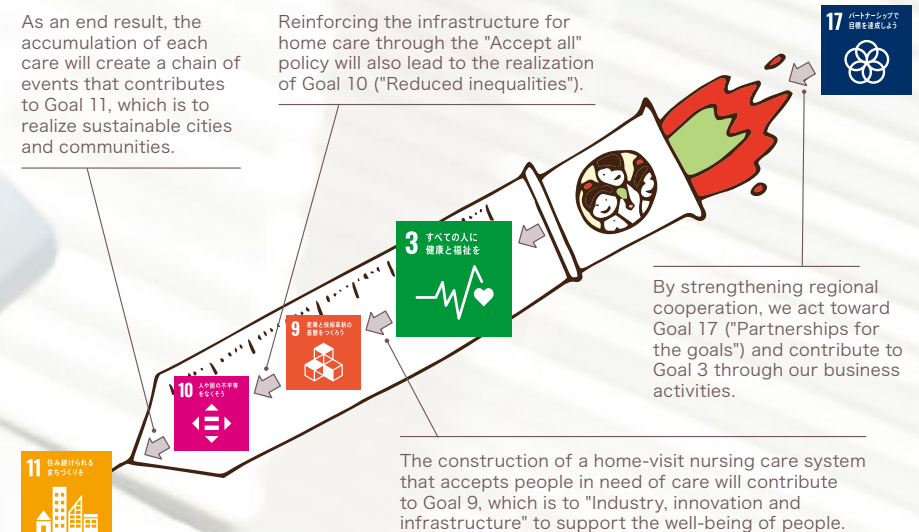
The 2030 Agenda for Sustainable Development (SDGs), unanimously adopted by the United Nations in 2015, are guidelines for those of us living in the 2020s. I am particularly moved by the preamble of the SDGs, which is based on the idea of “greater freedom”, and “no one will be left behind”. The section on “People” states, “We are determined to end poverty and hunger, in all their forms and dimensions, and to ensure that all human beings can fulfil their potential in dignity and equality and in a healthy environment”. In other words, the message here is to respect the lives and human rights of all people living today, to discover the value of everyone, and to strive to contribute to the well-

being of society as a whole. We, Sophiamedi, will support the life choices of everyone by “devoting our wisdom to caring for lives” and join the great challenge of building a sustainable society. One case at a time, one day at a time, one year at a time - we will continue to make efforts to evolve, by reviewing and improving together.

- 1.Ministry of Health, Labour and Welfare. Survey Report on Attitudes toward Medical Care in the Final Stage of Life [Internet]. 2014 [cited 2022 Feb 1]. Available from: https://www.mhlw.go.jp/file/05-Shingikai-10801000-Iseikyoku-Soumuka/0000041847_3.pdf
- 2.Ministry of Health, Labour and Welfare. Vital Statistics: Number and percentage of deaths by year, by place of death [Internet]. 2019 [cited 2022 Feb 1]. Available from: <https://www.e-stat.go.jp/dbview?sid=0003411652>
- 3.Ministry of Health, Labour and Welfare. Central Social Insurance Medical Council. Basic data on healthcare in Japan [Internet]. 2011 [cited 2022 Feb 1]. Available from: <https://www.mhlw.go.jp/stf/shingi/2r9852000001hsqc-att/2r9852000001hswu.pdf>
- 4.Ministry of Health, Labour and Welfare. Overview of the 2020 survey of nursing care service facilities and offices [Internet]. 2020 [cited 2022 Feb 1]. Available from: <https://www.mhlw.go.jp/toukei/saikin/hw/kaigo/service20/index.html>
- 5.Ministry of Health, Labour and Welfare. Overview of the Year 2020 Health Administration Report (Employment Medical Personnel). 2020 [cited 2022 Feb 1]. Available from: <https://www.mhlw.go.jp/toukei/saikin/hw/eisei/20/>
- 6.Japanese Nursing Association, Japan Visiting Nurse Foundation, The National Association for Visiting Nursing Service. Home Nursing Action Plan 2025 [Internet]. 2015 [cited 2022 Feb 1]. Available from: <https://www.zenhokan.or.jp/wp-content/uploads/actionplan2025.pdf>

Sophiamedi's SDGs injection

We believe that realizing our vision will lead to contributing to the SDGs
This is a conceptual model of how Sophiamedi views and addresses the SDGs



Each and every one of us living in the modern world is an agent of the realization of the SDGs. How will Sofia work toward this goal? Sophiamedi's SDGs Injection is a model born from such questions. The point is to create a strong push and linkage through the image of an injection. Our home-visit nursing begins with strong regional cooperation (Goal 17), and each care strongly contributes to Goal 3 ("Good health and wellbeing"). It is a never-ending activity that aims to evolve and improve quality and quantity, and practicing it throughout Japan will lead to

the support of the well-being of people and will build a resilient infrastructure as in Goal 9. We also have a "Accept all" policy in our Valued Actions. We are also committed to Goal 10 by expanding our reach and building the local infrastructure. We practice care for life through regional cooperation and aim to build an infrastructure in which people can select medical care to suit their needs. As a result, we create sustainable cities and communities (Goal 11). This outcome is the materialized form of our vision.

Highlights

2020.10 ~ 2021.09

As medical needs increase in a super-aging society, we want to become the infrastructure for home care in the community and spread safe and warm home care throughout Japan. In order to achieve this goal, we are opening new offices and hiring more staff to expand the scale of our business. We are also actively investing in human resource development and measures to support the balance of work and family life, as well as improving the skills of our staff and creating a comfortable working environment.

Visit

Number of clients

14,039

※ Total number from October 2020 to September 2021

Number of visits made

720,659

Our acceptance is growing due to the voices of people who wish to receive medical treatment at home. In response to the needs of society, we will continue to grow in both quality and quantity.

Development of offices

Number of facilities

81

Number of facilities opened

16

Average number of staff per station

16.7

※ Not including stations that have been in operation for less than one year

We are actively developing our business to become the infrastructure for home medical care in the region. We have opened 16 new locations, including Toyohira, our first location in Hokkaido.

Cooperation with communities

Number of collaborating medical facilities

3,049

Number of collaborating facilities

2,068

In addition to the new locations, we have also strengthened our ties with local institutions in existing areas, which has led to a significant increase in the number of partners.

Recruitment of staff

Number of collaborating facilities

606

New employee training hours

17,760

We have welcomed 606 new staff members. Although the hiring environment is severe, we will continue to focus on strengthening our hiring system without lowering the quality. .

Human resource development and support for balancing work and family

Number of online training content

905

Number of paid leave that can be taken in quarter-day increments

5,209

Number of management training participants

480

Number of relocation assistance provided

21

We are proactively investing in human resource development and support for balancing work and family life in order to create an environment where diverse human resources can work happily and with fulfillment.

Evaluation from outside the company

Number of certified international awards

2



Number of certified domestic awards

1



We actively disseminate information to our stakeholders and have received positive evaluations both in Japan and overseas.

02

What We Do Our Challenge

Medical Report and COVID-19 Initiatives

How much did we contribute to the world?

A year of rapid changes in the environment due to the COVID-19 pandemic.
The social situation and the healthcare delivery system changed drastically day by day,
and many people were worried.
We have continued to move forward over the past year,
asking ourselves "What can we do?"

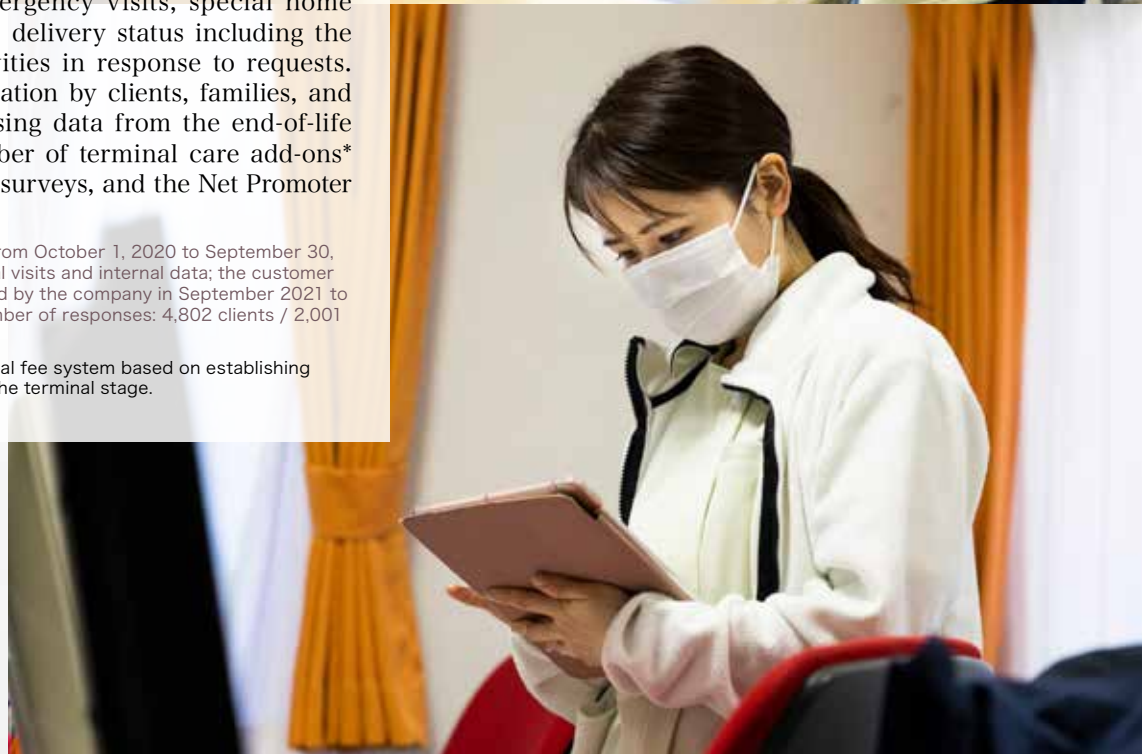


Medical Report

Continuing from last year, we assessed the quality of medical care from three aspects of the Donabedian model. Structure shows the management structure of the stations, the percentage of staff members providing services, the ladder level, and the system of cooperation with related organizations in the community. Process indicates the number of routine and emergency visits, special home nursing instructions, service delivery status including the duration of visits, and activities in response to requests. Outcome indicates the evaluation by clients, families, and community organizations using data from the end-of-life care at home rate, the number of terminal care add-ons* calculated, client satisfaction surveys, and the Net Promoter Score (NPS®).

The data covers the one-year period from October 1, 2020 to September 30, 2021, and is calculated based on actual visits and internal data; the customer satisfaction (CS) survey was conducted by the company in September 2021 to clients and related organizations. (Number of responses: 4,802 clients / 2,001 related organizations)

*"Terminal care add-ons" is an additional fee system based on establishing special care programs for patients in the terminal stage.



Structure

Station

“I want to stay at home.”

Establishment of new offices and
a 365-day system to meet people's needs.

As a result of prioritising both the conversion of existing stations that were closed on weekends and holidays to a 365-day system and the establishment of new 365-day stations, the percentage of 365-day systems has increased from 41.5% in the previous fiscal year to 64.7%.

There is no rest for disease
so our care doesn't rest, we want to
be always available for our clients.
Always available, will be our norm.

I feel that our efforts to build a more convenient home nursing infrastructure in the community by increasing the number of stations that operate 365 days a year, even during the year-end holidays, as well as on weekends and national holidays, are steadily yielding results. Our first priority is to improve the quality of our services and become the standard for more convenient home health care nursing stations for our clients, and our second priority is to create a work environment where the employees who will be responsible for this can work with enthusiasm and fulfillment. I would like to continue to focus on these two points while actively expanding our services to areas where they are needed.



CAO
(Chief Administrative
Officer) /
CQO
(Chief Quality
Officer)

Akira
Shinoda

Number of stations

81

(2020.09: 65)

Number of home-visit nursing stations

68

(2020.09: 53)

Home care support stations

8

(2020.09: 7)

Additional point for specified
business establishment

1 2 3
0 1 4

Day service

4

(2020.09: 4)

Corporate division

1

(2020.09: 1)

Percentage of stations
operating 365 days a year

64.7%

(2020.09: 41.5%)

(Operating as usual including weekends
and holidays)

Average number of staff per station

16.7

(2020.09: 16.9)

(not including stations that have been in
operation for less than one year)

National average
10.8

Reference: Ministry of Health,
Labour and Welfare - The
FY 2020 Survey of Nursing
Care Service Facilities and
Offices (Number of employees at
home nursing stations 133,845/
Number of offices 12,393)

Period: 2020.10 - 2021.09

Structure

Staff

Accelerate new hiring.

At the same time, we will strengthen training and maintain the ladder level.

Although the hiring environment continued to be as difficult as in the previous year due to the impact of the COVID-19 pandemic and the sharp rise in recruitment fees, we were able to recruit a high number of top class staff for the second year in a row without compromising the quality of human resources we seek. We also strengthened training in order to maintain the ladder level even with many new hires.

More focus on strengthening the recruitment system and issues to be resolved.

In this fiscal year, we released the home nursing online media "Sophiamedia". We wanted to introduce not only our company's systems and staff, but also the reality of home health care nursing to as many people as possible, both inside and outside the industry. In addition, as the person in charge of recruitment, I recognize that it is essential to further strengthen our ability to create recruitment plans that ensure quality and deliver results, implement measures to control recruitment costs, and take action to improve operational productivity leading up to this. As a result, we plan to further enhance our recruiting capabilities by continuing to develop our recruiting system and focusing on issues that need to be resolved in the next fiscal year.



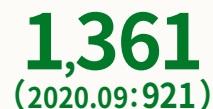
COO
(Chief Operating Officer)

Masahiro
Hada

Number of new employees



Number of staff



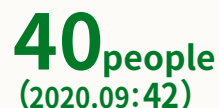
Home-visit nursing station



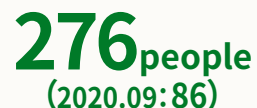
Home care support station



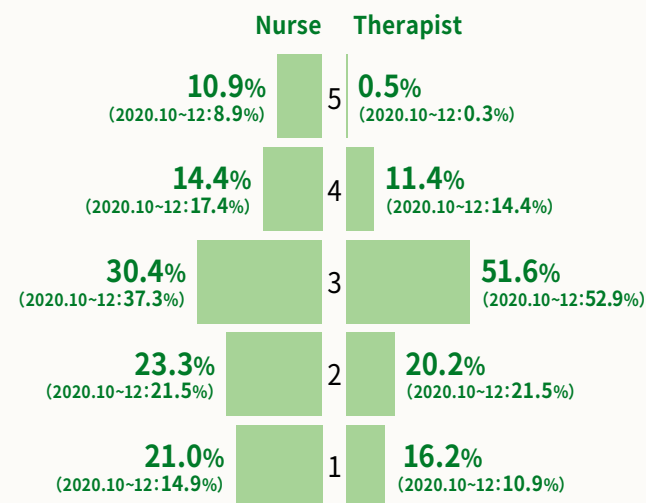
Day service



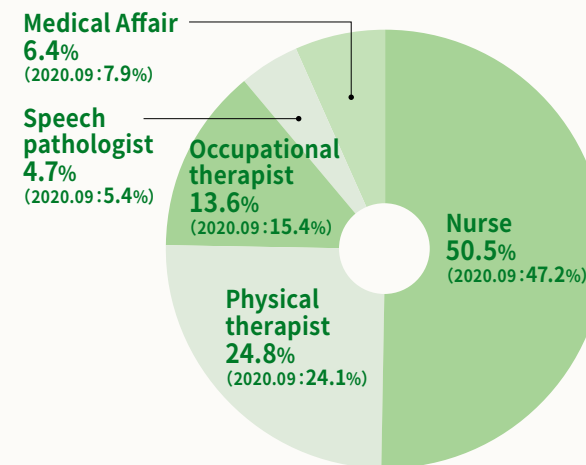
Corporate division



Ladder level



Percentage of professional staff



Period: 2020.10~2021.09

Structure

Cooperation system

Strengthening regional collaboration as we expand our offices.

The number of collaborating medical institutions, primary physicians, offices, and personnel have all increased significantly. Particularly this fiscal year, we have expanded our collaboration system in new areas due to new openings. On the other hand, the CS survey showed a 5 to 8 point decline compared to last year, and we see the speed and quality of our actions as issues that need to be improved.

Planning lectures and study sessions to educate people about home medical care and create opportunities for interacting with our stakeholders.

This fiscal year, we put even more effort into visiting medical institutions and planning lectures and study sessions for the purpose of raising awareness. By continually communicating the value of Sophiamedi's services, we were able to establish partnerships with a greater number of related institutions. The increase in the number of collaborators means that we are meeting more clients, and we would like to continue to focus on this. In addition, we will take the results of the CS survey seriously and improve them as we move forward so that we can more deeply communicate the value of utilizing home nursing services.



Group Manager,
Community
Collaboration
Promotion Group

Ryota
Arimura

Number of collaborating
medical facilities

3,049
(2020.04~09: 2,058)

Number of collaborating doctors

7,319
(2020.04~09: 4,407)

Number of collaborating facilities

2,068
(2020.04~09: 1,491)

Number of assigned staff members

4,358
(2020.04~09: 2,882)

Number of dedicated counselors

18 (2020.09: 16)

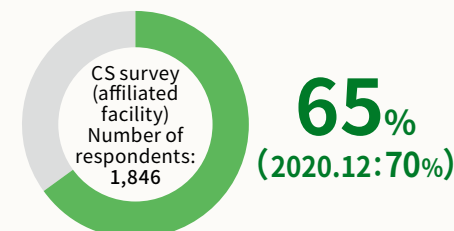
Number of actions taken

80,653
(2020.04~09: 40,041)

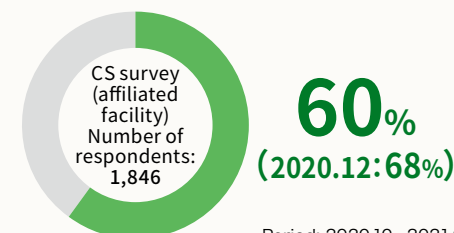
Number of consultations provided

70,002
(2020.04~09: 24,960)

Q I find counselors of Sophiamedi to be quick to act on requests.



Q Counselors of Sophiamedi explain home-visit nursing in an easy-to-understand way.



Period: 2020.10~2021.09

Process

Clients

The number of clients is on the rise due to new station openings and increased awareness.

Over the past year, we have interacted with 14,039 clients, and the ratio of those needing support and care was about 2 to 8, about the same as last year. In addition to home nursing care, we strive to support our clients' choices by providing comprehensive services such as in-home care support and day services.

We are ready to accept anyone who wants to live and receive care in their own home.

Many of our clients and their families have concerns. For example, some people are worried about whether they can live at home with medical devices or not, because their families often have little information due to COVID-19. In order to help such people live their lives with peace of mind, we visit them daily to provide comprehensive care as soon as they have been discharged from hospital. In addition, we provide monthly medical device study sessions where staff members serve as instructors. We also strive to continually enhance our knowledge and skills by regularly inviting companies that handle complex medical equipment to come directly to the hospital to demonstrate how to operate the equipment.



Manager,
Yukigaya Station
**Ayano
Ogawa**

Number of clients
(Home-visit nursing station)

14,039

(2020.04~09: 9,648)

(Total number from October 2020 to September 2021)

Number of clients
(Home care support station)

1,093

(2020.04~09: 611)

Percentage of clients
using home-visit nursing

60.2%

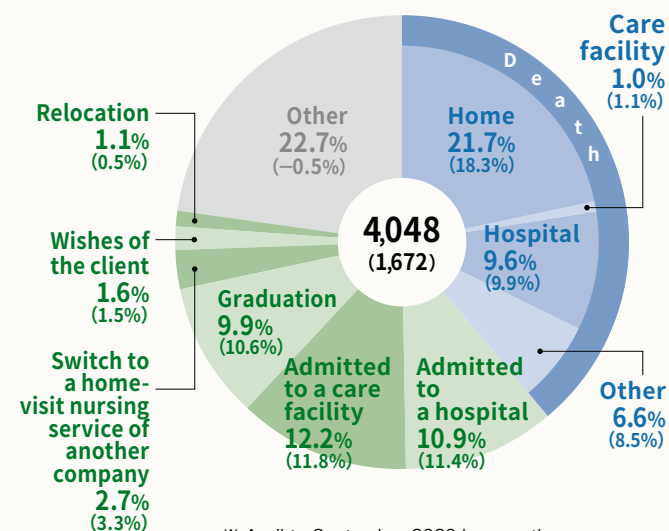
(2020.04~09: 60.1%)

Number of clients (Day service)

299

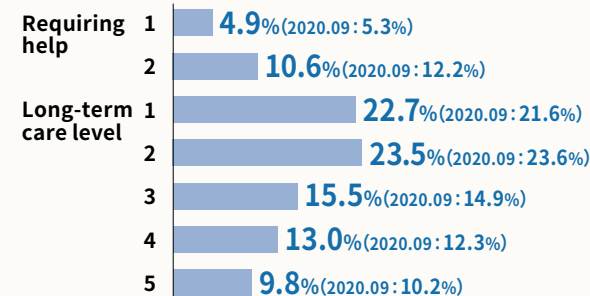
(2020.04~09: 232)

Number of ended services/by reason



※ April to September 2020 in parentheses

Care-level



※as of September 2021

Period: 2020.10~2021.09

Process

Visits

The number of emergency nighttime visits is rising due to increased handling of critically ill patients.

The number of visits is increasing as the amount of clients rises, with the increase in the number of emergency visits being particularly high. We will continue to strengthen our response to severe illnesses, including the ongoing development of the 24-hour, 365-day system, so that people with any disease can stay at home with peace of mind.

Supporting safety and security for clients and their families.

We support the safety and security of our clients by working closely with medical institutions and various other related organizations. As the number of emergency visits during the night is increasing, we are working to implement an interval system, cooperating within the station to ensure that the emergency visits do not interfere with the next day's visits. This system means the time interval between visits is carefully managed. Also, with the increase in the number of new clients, we need to deepen our understanding of clients and their families and provide care in a short period of time. By devising ways to improve the quality of information sharing and cooperation, and by providing effective home nursing care, we aim to make our clients and their families feel that they are happy to be at home.



Area Manager, Josai/
Tama East Area

Masako
Kawata

Number of visits made

720,659
(2020.04~09: 283,715)

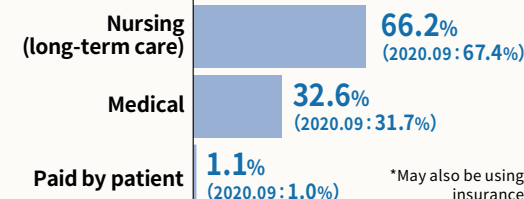
Number of emergency visits (nighttime)

3,440
(2020.04~09: 1,141)

Number of visits made with special home-visit nursing instructions

23,713
(2020.04~09: 9,230)

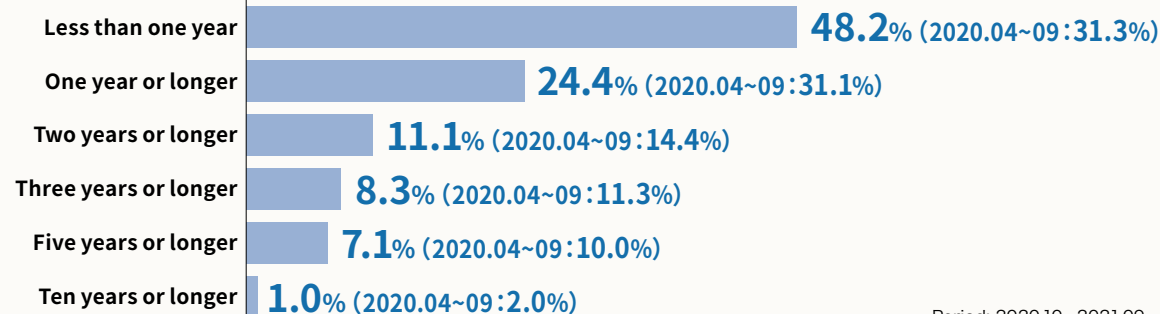
By insurance type



(September 2021 single month result)

*In the previous report, calculations were based on the number of customers who used insurance, but for more precise measurement, calculations are based on the number of visits covered by insurance from this year.

Duration of visits



Period: 2020.10~2021.09

Process

Orders

Responding to numerous orders from medical institutions and nursing care service offices.

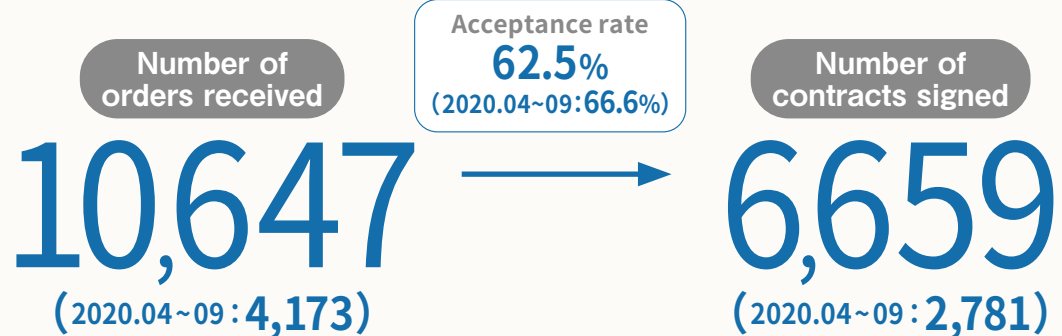
About 77% of our orders are from nursing care service offices, and about 19% are from medical institutions. As a result of opening new stations and strengthening ties with the local community, we were able to increase the number of orders to 10,647 and the number of contracts to 6,659, which is equivalent to the same period of the previous fiscal year.

Working to build trust relationships with the community so that they understand they can rely on us.

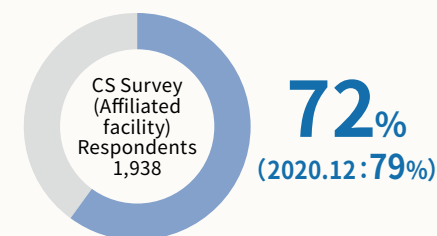
In order to deepen our relationship with the local community, even under the COVID-19 pandemic we carefully listened to clients' needs, requests, concerns, and local information during our visits, and matched up the information with what we can do to help. We are planning to open new stations in various locations in the next fiscal year, and we will continue to work on building trust relationships with the community. In addition, based on the results of the CS survey, we would like to improve the quality of our proposals for solutions. By looking at issues in the process of connecting medical institutions to homes from the perspective of both groups, we can provide even more services for people with serious illnesses.



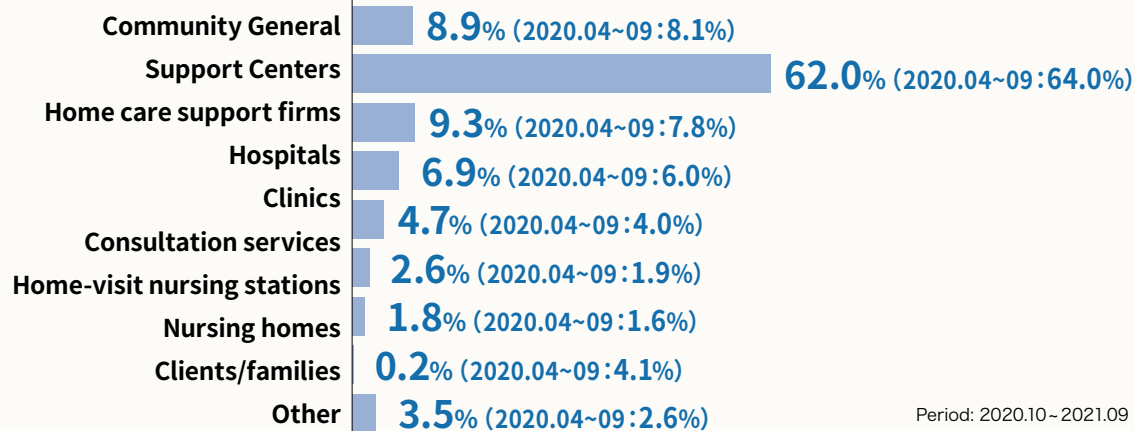
Leader,
Community Relations
Promotion Groupe
**Yasuhiro
Kawasaki**



Q I feel that even if a patient has a high level of medical dependency, Sophiamedi will not refuse to respond.



Ordering from



Period: 2020.10~2021.09



Outcome

To enable people with any disease to live at home

Significant increase in the number of psychiatric and pediatric home nursing services.

The number of psychiatric and pediatric home nursing services increased compared to the previous survey, and, in addition, more than 80% of respondents answered "I feel that my caregiver is choosing the right method for me". However, other questions in the customer survey showed a decrease of 1-6 points compared to last year.

Aiming to enhance the home nursing system to serve as a hub in the community.

The number of psychiatric visiting nurses and pediatric visiting nurses has increased compared to the previous survey, and we believe that they are serving as necessary hubs for the limited number of facilities in the community. In the COVID-19 pandemic, the local medical care provision system and each client's situation continue to change drastically day by day, so we think about what kind of home nursing and rehabilitation is needed at the time and create an environment where people with any disease can live in the community.



The Sophiamedi Institute for Home Care Research Researcher

Ayumu Yoshie

Psychiatric home nursing

584 people

(2020.09: 407 people)

Percentage of total
5.6% (2020.09: 5.1%)

*Single month results for 2021.09

Pediatric home nursing

328 people

(2020.09: 239 people)

Percentage of total
3.1% (2020.09: 3.0%)

*Single month results for 2021.09

Additional points certified as special management

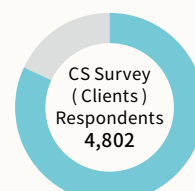
14,925 cases

(2020.04~09: 5,723 cases)

Percentage of total
14.1% (2020.09: 13.2%)

*Total number of calculations from 2020.10~2021.09
*Percentage is single month results for 2021.09

Q I feel that my caregiver is selecting methods that are suitable for me.



82%
(2020.12: 82%)

Q I feel that Sophiamedi is sharing necessary information among multiple professions and discussing the direction of care.



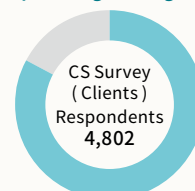
71%
(2020.12: 73%)

Q I feel that my caregiver is trying to treat me as a person with sincerity rather than simply treating my illness or disability.



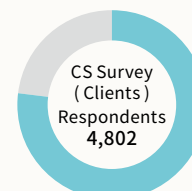
78%
(2020.12: 80%)

Q I feel that my caregiver is providing thorough care.



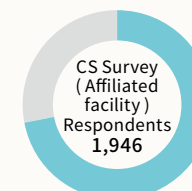
83%
(2020.12: 83%)

Q I feel that Sophiamedi is supporting my unique choice of home care.



76%
(2020.12: 79%)

Q I feel that Sophiamedi is providing choices that clients want.



72%
(2020.12: 78%)

Net promoter score

NPS is an index that quantifies customer loyalty and is calculated based on the percentage of critics, neutrals, and recommenders.

Clients NPS

Q I would introduce Sophiamedi Home Nursing Station to my friends.

12.9 (2020.12: 13.6)

CS survey (clients) Respondents: 4,802

Affiliated facility NPS

Q I would like to recommend Sophiamedi Home Nursing Stations to other businesses.

▲7.9 (2020.12: ▲5.3)

CS survey (Affiliated facility) Respondents: 1,934

NRS

Q I would like to use Sophiamedi Home Nursing Station again.

1.8 (2020.12: 10.4)

CS survey (Affiliated facility) Respondents: 1,941

Period: 2020.10~2021.09

Outcome

To enable people to live at home until the end of their lives

Increase in opportunities for end-of-life care at home

The end-of-life care at home rate increased from 51% to 58% last year, and the number of cases of terminal care add-ons* increased to 634. In addition, 79% of the respondents said that they feel they can live at home without anxiety, and we have more opportunities to support them so that they can live at home until the end of their lives.

Toward client-centered decision-making support and improvement of quality of care

Although the survey period is different from the previous year, the end-of-life care at home rate and the number of terminal care add-ons* has increased in the same period. This shows that we have more opportunities to support end-of-life care while carefully providing decision-making support to clients and their families. On the other hand, the sections dealing with the prevention of anxiety showed a decrease, indicating the need to strengthen our ability to respond to anxiety. As the importance of decision support increases, we must improve our skills in this area. We will also continue to study and improve our services so that our clients can receive support that meets their needs and live their lives with peace of mind while receiving medical treatment.



The Sophiamedi
Institute for Home
Care Research
Director

Masashi
Nakagawa

Percentage of clients
who passed away at home

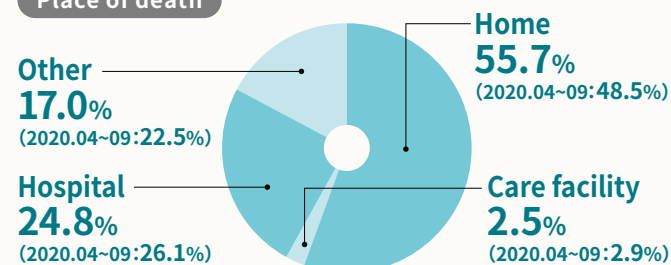
58.2%
(2020.04~09: 51.3%)

*Deaths at home or in institutions divided by the number of deaths

Number of terminal care
patients added to calculation

634
(2020.04~09: 197)

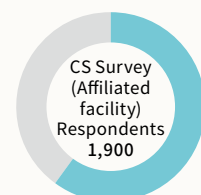
Place of death



Number of Angel Care
patients provided

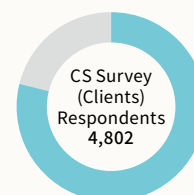
725
(2020.04~09: 254)

Q I feel that Sophiamedi is preventing unnecessary hospitalization.



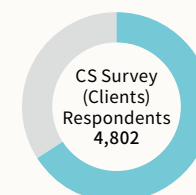
60%
(2020.12: 63%)

Q I feel that I can stay at home without anxiety.



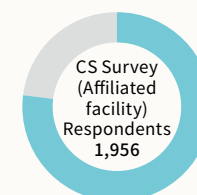
79%
(2020.12: 80%)

Q I feel that my caregiver is listening to my unspoken anxieties.



66%
(2020.12: 65%)

Q I feel that Sophiamedi is providing care in a way that prevents patients from feeling uncomfortable or anxious.



77%
(2020.12: 82%)

Period: 2020.10~2021.09

We continue to be there for every day of uncertainty.

The reporting period for this report (October 2020-September 2021) has seen the third through fifth waves of COVID-19. Here is an overview of Sophiamedi's efforts in the COVID-19 pandemic.



2021 has changed the lives of people around the world. Home nursing will become increasingly important.

Sophiamedi has been striving to continue the healthy operation of our business sites and safely deliver our services throughout the COVID-19 pandemic based on our basic policy of trying to prevent the spread of infection and protecting our clients' home care.

As a company that provides medical services, we considered it our role to prevent our clients from becoming infected and to continue to operate our facilities in a sound manner even under the conditions of spreading infection. Therefore, we have implemented thorough infection prevention measures, believing that it is important to avoid infection to the maximum extent possible. Specifically, we established the "New Normal Guidelines for Station Operation,"

COVID-19 Initiatives

and took measures to prevent infection within the office, such as going directly home, staggered work hours, checking the physical condition of staff before work, and conducting morning meetings and information sharing online. In addition, we established a flow for immediate response in the event of a positive result, suspected positive result or being a close contact.

On the other hand, considering the infection situation in each region and the individual circumstances of each station, we did not make all decisions uniformly as a company, but aimed for a flexible response based on discussions in each region and at each station. These infection prevention measures were led by the COVID-19 Response Headquarters, and each department collaborated using the internal infrastructure to share information in real time, and adapted responses accordingly. In the third wave, from around October 2020 to February 2021, the number of infected people increased rapidly, infectious disease beds began to fill up, and

an increasing number of people were forced to receive treatment at home. Although the home care was mainly provided to younger patients and those without underlying diseases, the elderly and other people who we usually visit to administer care at home also began to face a situation in which hospitalization was not an option.

In addition, there were people with COVID-19 who expressed a desire to continue home care even after contracting the disease. We provided support for home care at each station in accordance with their wishes. Although we felt that there were limitations due to the short time we had to respond to the situation with infection control measures, we made every effort not to cause anxiety to the affected clients, taking care to avoid infection in the home and serious illness.

Building and operating a public-private partnership support system for home care patients.

Since the spring of 2021 we have received requests from government and public health centers to provide public-private partnership nursing care. In preparation for the fourth wave



of infection spread, we began working with local medical institutions to develop a system to support home care providers. The challenges in supporting home care created by COVID-19 were generally cited as "lack of access to medical care," "lack of medical supplies and information necessary for medical treatment," and "inability to utilize a variety of support services." At the beginning of the outbreak in 2020, due to isolation being used as an infection prevention measure, there were many reports

of people being unable to receive medical care despite being sick, being unable to get necessary supplies, and being unable to receive adequate support for these issues. In order to solve problems, such as the inability to receive medical advice to relieve anxiety during the recuperation period and the lack of fever reducers, we worked with the government, health centers, medical associations, pharmacies, and others to build a support model for people recuperating at home.

COVID-19 Initiatives

We established a system of telenursing (health observation by a nurse over the phone) to provide information and consultation related to appropriate medical treatment, and a system of home nursing care when a patient was recognized as being seriously ill. And, in addition, we set up an online medical care system to provide same day care, a system to distribute medicine, and in some areas, a system to provide necessary food items along with pulse oximeters, in cooperation with various businesses.

Rapid increase in the number of people being treated at home and a fast-changing infection situation caused by the fifth wave.

The infection situation was not constant, but changed from moment to moment due to the use of vaccines and the emergence of mutant strains. In the third wave, it was reported that the proportion of elderly people at high risk of serious illness was increasing. There were many elderly people who were unaware of respiratory distress even though their oxygen



saturation level was declining. We worked to determine the limits of home care and make appropriate decisions while combining telenursing and home nursing. After the fourth wave, the number of younger people infected increased, partly due to the vaccination of the elderly, and those with risk factors, such as smoking and obesity, began to account for nearly half of the cases. Furthermore, in the fifth wave as of August, the number of people receiving treatment at home temporarily exceeded 100,000 nationwide. Many were forced to recuperate at home, and many of them required medical care, such as the administration

of oxygen. There were people who lived alone, elderly people, and people whose entire household was infected, making it difficult for them to even function as a household. In order to cope with the rapid increase in the number of people receiving treatment at home, various reinforcement measures and changes were introduced on a daily basis, and the days of trial and error continued as we kept in touch with the people in charge at the government and public health centers every day. It was a relief that we were able to share the same site as the administration and public health

center staff, who sometimes encouraged each other as we responded. However, the medical staff, who were anxious about the unprecedented situation and continued respond to the needs of the patients, were also faced with dilemmas and fatigue. The extraordinarily rapid spread of infection made it extremely difficult to cope with the situation. We strongly felt the need to not only support the home care patients, but also to take care of the support staff at the same time. Looking back on what we were able to do and what we were not able to do, we will continue to search for the ideal forms of community medical care for

COVID-19 Initiatives

contingency crisis management situations which are necessary in times of disaster.

Utilization of home healthcare from the viewpoint of support for home care patients during the COVID-19 pandemic.

Visiting nurses are usually able to look at lifestyles as well as illness. For more effective support of home care patients, expertise is needed not only in physical assessment but also in quick assessment of life functions. Elements of lifestyle function assessment include, for example, house evaluation, daily living skills, and family caregiving skills. By comprehensively assessing these factors as well as medical conditions, decisions can be made about appropriate medical care, including suggestions for the best way to live based on the layout and structure of homes, and medical care guidance to promote appropriate intake of calories and other nutrients. Home care nurses also make comprehensive judgments based on this data to provide care in the event of an emergency call at night.

This expertise is also utilized in telenursing with home care patients. The expertise of home nursing, which involves taking a bird's-eye view of the individual patient's situation and considering feasible ways to provide support, can be demonstrated not only in the case of the Corona Disaster, but also in situations such as safety confirmation and health observation follow-up for home evacuees in the event of a natural disaster.

In a super-aged society, where the development of home health care is urgently needed, the unimaginable crisis of COVID-19 has greatly increased the expectations and demands for home nursing.

We will continue to pursue the possibilities of telenursing as practiced in home care support, while improving convenience and efficiency so that we can provide medical care support to as many people as possible. We will also continue to evolve in terms of individualized care that can deliver appropriate medical care to each person in different circumstances, so that home healthcare can become a trusted resource in the coming society.



Responsible for building a healthcare delivery system for regional cooperation
Public-private partnership office nurse

Kazuhiro
Shinne

Even in the stage when vaccines were not widely available and people were anxious about how to respond to the virus, we engaged in careful dialogue with the relevant organizations in charge of community medical care, established a telenursing system for people recuperating at home, and deployed the system in the community. In the fourth wave, as the infected population shifted from the elderly to younger people with underlying diseases, we established a different way for medical care in combination with telenursing. Support for those in the fifth wave who suddenly needed home oxygen therapy, steroid administration, and other high level medical care at home was very different from the process we usually use in home nursing, and we had to be creative in proposing treatment for those who had no pre-existing conditions and were not used to medical care. Through the support for people recuperating at home, we were able to recognize the possibility of support that does not require direct intervention, and we would like to make the most of this experience in the future.



Responsible for the project to strengthen support for people recovering at home
Public-private partnership office nurse

Akiko
Tanaka

The process of triaging and assessing the possibility of continuing home treatment while dealing with a fifth wave of patients with limited medical facilities and material resources, such as antipyretics and foodstuffs, was very different from normal home nursing care. In order to make appropriate assessments as objectively as possible, we established uniform evaluations in talk scripts (special questionnaires used by nursing staff) and other formats. The process of quickly assessing and responding within a limited time was often more difficult with people who we did not have regular contact with. I look back on this experience as the very triage we would do in a disaster, but we were faced with many dilemmas because there were limits to what we could do because medical facilities were limited, which meant that even though we could have done more in normal circumstances, it was difficult to do so under these conditions. Even so, in order to provide the greatest possible support, we worked hard to build a relationship of trust in a short period of time and to avoid making people who were recuperating at home anxious.

03

How We Do It

Sophiamedi Experience/ Guru Guru Model

Sophiamedi Experience and Value creation model

How do we increase the value we provide?

Care for life - The "Guru Guru Model",
To lead a life they can value while receiving continuous individualised care.
Which measures are effective?
What kind of improvements are needed?
We continue to monitor and improve the results.



Sophiamedi Experience

Experience that fulfills the "living" of our clients through the services we provide.

The Sophiamedi Experience is the Sophiamedi home nursing service value of the user experience. We continue to create and enhance them today.

What is Sophiamedi Experience?

{ The Sophiamedi Experience is an experience that fulfills
the "living" of our clients through the services we provide. }

Visualizing the value of home nursing services, which is difficult to grasp, to create a society where the necessary services are delivered to those who need them

Japan is facing a super-aging society, but home nursing is still generally not well known, and its value is not well understood. In addition, because the experience of using home nursing is so closely related to daily life, it is difficult to conceptualize the individuality and diversity of each person's life, making it difficult for a third party to see. Therefore, we added the value we provide

to this experience and named it "Sophiamedi Experience" and worked on structuring it. We will present the essential value of home nursing, have as many people as possible understand it, and reflect on the results and continue to make improvements. As a result, we hope to create a warm future of home care where the necessary services are delivered to the necessary people.

In addition to medical technology, we value the satisfaction of our clients and their choice of lifestyle through our services.

Sophiamedi's services play a role in the realization of essential and important human desires, such as "I want to live a more fulfilling life at home despite my illness or disease" and "I want to live my own life until the end of my life". The Sophiamedi Experience is the value of the experience of using home healthcare services. To enhance this value, we believe that three elements are

important: "medical technology" suitable for home nursing, "customer satisfaction" created by improving the quality of human resources and services, and "degree of choice in life" that allows customers to choose how to spend their lives. Our goal is to enhance these three elements by improving our skills and human abilities, so that our customers can live a fulfilling life.



「 I really enjoy
spending time
with this person. 」

Mr. H. M.
Station Seijo

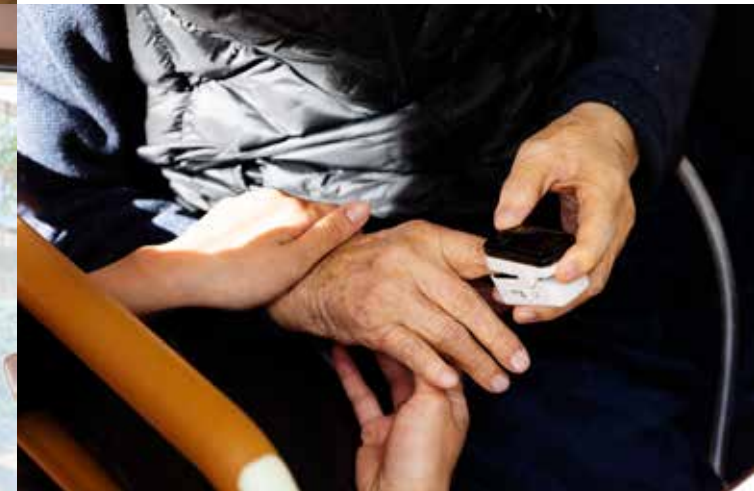
She would look up things I told her on my next visit, and we would have a lot of conversations. She is young, about the age of my grandchild, but she is trying her best to understand and be helpful to others, so I really enjoy spending time with her. Sophiamedi has been taking care of her for a long time, and I am very grateful to have good staff members. I look forward to working with her again in the future.

A precious time to
listen to his rich life
experience.



Nurse
Chie Sato

Mr. H has a daily routine of reading and walking, and he also continues to write about his war experiences in order to pass them on to future generations. It is hard to believe that he is 106 years old. Perhaps the secret to his vitality is the fact that he cherishes his mealtime. He has a lot of life experience, so he always has a lot of stories to share with us. I am very happy to be able to take a picture with him like this.



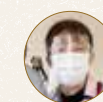
「Reflecting on life through home nursing.」

Ms. M.K. (Family)
Station Asagaya

In addition to the medical support of nursing and rehabilitation services, I think my mother enjoys talking with the staff every week. She often forgets her recent memories, but she remembers a lot of things from the past. I feel as if my mother is looking back on her life while talking with them. Thank you for your continued support.



Understanding the values of our clients for better home nursing care.



Occupational Therapist
Mako Muramoto

I try to make my visits as enjoyable as possible for my clients and to understand their values by talking with them while rehabilitating them. I was particularly impressed by the photo of cherry blossoms in the bedroom, "My husband took this photo," she said, recalling those days. I would like to continue to support her in any way I can.



Every day I look forward to the visits of all the bright and unique people.

Mr. O.M. (Family)
Station Nakano-Shinbashi

When my husband suffered a subarachnoid hemorrhage and I was in despair, everyone encouraged me. His condition worsened and he had to be put on a ventilator, but we had the courage to support him together. I feel that the visits from the enthusiastic staff have expanded my husband's possibilities. Despite the severity of my husband's disability, I am happy to see the kindness of the staff who are willing to make small progress with him, and I now look forward every day to the visits of the proactive, cheerful, and unique staff.

I want to continue to provide peace of mind through my visits.



Occupational Therapist
Yoshitaka Koike

I try to make the client and their families feel relieved when I come, and that it was an enjoyable time. Although the client is on a ventilator and cannot talk, I always try to talk to her while playing videos of her together with her grandchildren. I would like to continue my visits to provide peace of mind under the motto, "Client First".



「 Thank you for
watching over
my child's growth
with me. 」

Ms. I. Y. (Family)
Station Motosumiyoshi

At first, I had a lot of questions about medical care for children, but after consulting with the hospital, I learned about the home nursing service. I was able to consult with Ms. Ida about things that I could not easily discuss with people around me, and she has been very helpful. When my child couldn't stop expectorating at night and I didn't know what to do, or when she had a fever, I could call Ms. Ida on-call and she would respond immediately, which was also very reassuring. It was as if she was raising my child with me.



I want to work
as part of a team to
support wonderful families.



Nurse
Yoko Ida

I have been visiting baby Y since she was discharged from the hospital when she was about six months old, and I am always amazed at how much she has grown. I am energized by her cuteness during my visits. In the future, in addition to the nurses and physical therapists, a speech therapist will also visit so that we can provide better care. We would like to work as a team to provide solid support to help the wonderful families.



Ideas behind the Sophiamedi Experience



In order to measure the value of the experience of our clients who use our home nursing service, we have structured the Sophiamedi Experience into three elements, and then scored them based on the results of surveys of clients and employees.

The degree of nursing care and rehabilitation provided (50 points)

Method of care suitable for home nursing

Home nursing requires medical skills to accompany and support the lives of clients who are recuperating while dealing with illness. A wide variety of skills are required, such as skills to assess and plan support appropriate for home care, to provide necessary care, to collaborate with multiple professions, and to support decision-making.

Calculation method

We calculate the score in the ratio of 1:2 by scoring the client evaluations of the four competencies of the clinical ladder used by the Japan Nurses Association and the skill level of the staff.

● Client evaluation (16 points)

Affirmative response rate in the CS survey (4 questions) x 4 points for each question

● Staff skill level (34 points)

(Average of 5 ladder levels / 5) x 34 points

5Spirits practice rate (50 points)

Client satisfaction with our service

The foundation of our services is the "5 Spirits," which are Sophiamedi's action guidelines, and these include "Client First", "Sensitivity and Morality" and "Learning Spirit". We believe that by practicing these principles and improving the quality of our human resources, we will be able to create high quality services and increase client satisfaction.

Calculation method

The calculation is based on the results of client and staff evaluations of our 5 Spirits, "Partner-oriented," "Professionalism," "Humanity," "Growth," and "Colleagues," which are our action guidelines.

● Staff evaluation (20 points)

Affirmative response rate in the ES survey (5 items) x 4 points for each item

● Client evaluation (22.5 points)

Affirmative response rate in the CS survey (3 items) x 7.5 points for each item

Degree of choice in life that clients have

Another thing we emphasize is that our clients should be able to make their own decisions about the direction of their lives. To this end, we provide easy-to-understand explanations of technical matters, support our clients in making choices that they truly agree with, and help them achieve their goals.

Calculation method

Calculated based solely on responses to the customer satisfaction survey, with emphasis on client satisfaction. The score is based on the evaluation of the question, "Do you feel that you are able to decide the policy for your medical treatment?"

● Client evaluation (7.5 points)

Affirmative response rate in the CS survey (1 question) x 7.5 points

Survey period
CS survey: 2021.09/2020.12
Ladder: : 2021.08-11/2020.10-12
ES Survey: 2021.09/2020.09

Sophiamedi Experience Score

The degree of nursing care and rehabilitation provided

5Sprints practice rate

$$65.4 \text{ (2020:65.0points) } / 100 \text{ points} = 30.4 \text{ (2020:30.7points) } / 50 \text{ points} + \left[29.9 \text{ (2020:29.4points) } / 42.5 \text{ points} + 5.1 \text{ (2020:4.9points) } / 7.5 \text{ points} \right]$$

Client evaluation

12.4
(2020:12.4 points) / 16 points

The client evaluation on the degree of nursing care and rehabilitation provided was 12.4 points, the same level as last time. We will continue to grow in each item so that the affirmative response rate for all items will exceed 80%.

Ability to identify needs

Q. Do you feel that the staff are choosing the right method for you?

81.5%
(2020:79.5%)

Ability to care

Q. Do you feel that they take care of you to the best of their ability?

82.5%
(2020:85.5%)

Ability to collaborate

Q. Do you feel that the necessary information is shared among multiple professionals and that the direction is discussed?

71.0%
(2020:69.8%)

Ability to support decision-making

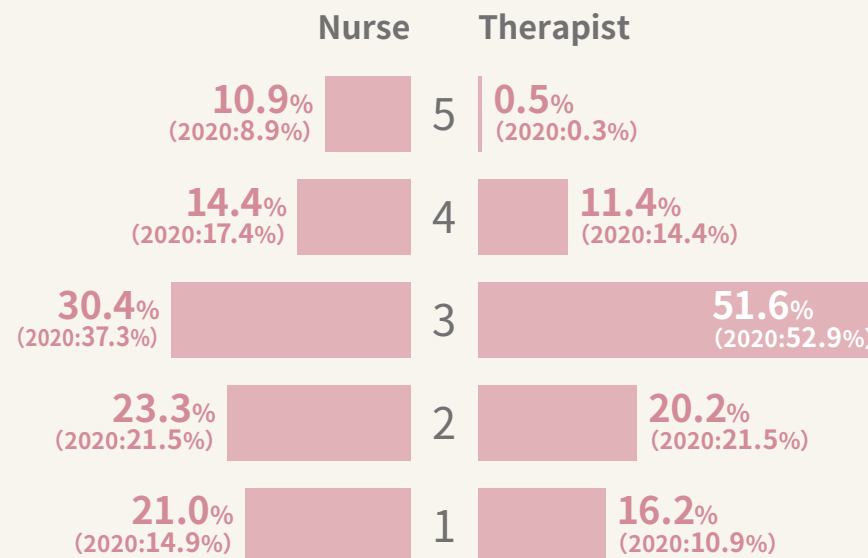
Q. Do you feel that they support your choice of your own medical care?

75.9%
(2020:76.0%)

Skill level of staff

18.0
(2020:18.3 points) / 34 points

This result was 0.3 points lower than the previous survey. Since the increase in the number of new employees is thought to have had a significant impact on the results, we will implement training for each level, both on-the-job training and off-the-job training, in order to improve their skills.



The figures in parentheses (from the previous survey) in each item are the scores reported in the Annual Report 2021 with some modifications. The reasons are the following two points (1) Staff skill level: The calculation method was changed from using the learning rate on the step-up sheet to using only the ladder level as a calculation factor, as it was judged that the skill level could be calculated more precisely. (2) Target stations: A trial survey was conducted at Station Chikusa before the introduction of SX. Because it was an advanced survey, the survey period was different from that of other stations, and it was excluded in the previous report, but it is included in this report because the data was obtained during the same period.

Sophiamedi Experience Score

The degree of nursing care and rehabilitation provided

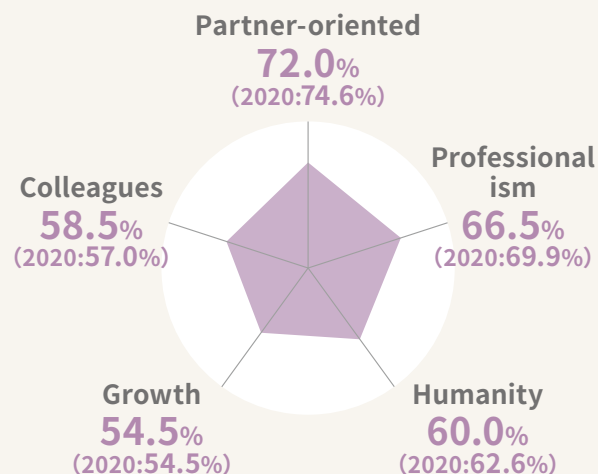
5Spirits practice rate

$$65.4 \text{ (2020:65.0points) } / 100 \text{ points} = 30.4 \text{ (2020:30.7points) } / 50 \text{ points} + \left[29.9 \text{ (2020:29.4points) } / 42.5 \text{ points} + 5.1 \text{ (2020:4.9points) } / 7.5 \text{ points} \right]$$

Staff evaluation

12.5
(2020:12.7points) / 20 points

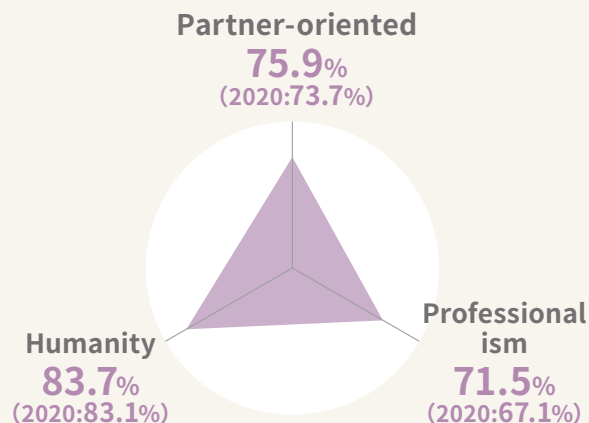
The staff evaluation decreased by 0.2 points. We will conduct a factor analysis for each station while interviewing stations whose scores have increased compared to the last time and reflect the results in various training programs.



Client evaluation

17.4
(2020:16.7points) / 22.5 points

The percentage of affirmative responses increased for all items (partner-oriented, professionalism, and humanity), up 0.7 points from the previous survey. We will continue to set goals based on the ladder and the level of 5 Spirits practice, and encourage growth through on-the-job and off-the-job training.



Degree of customer choice

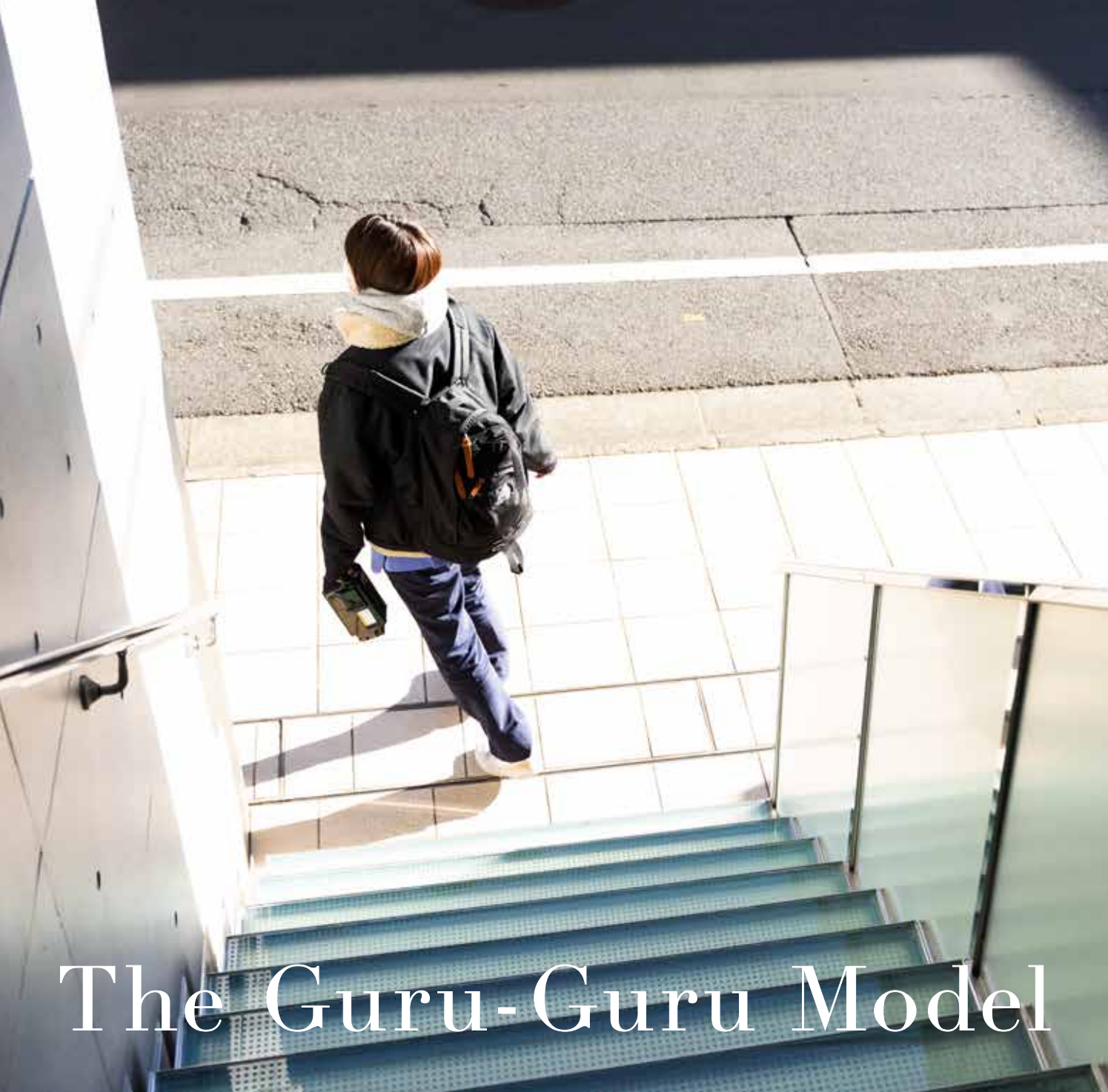
5.1
(2020:4.9points) / 7.5 points

The score increased by 0.2 points compared to the previous survey. We will further promote collaboration within the visiting nurse stations and with other organizations in the community in order to increase the number of options available to our clients and ensure that they are realized.

Q. Do you feel that you are able to decide the policy for your home medical treatment?

Percentage of affirmative responses

67.4%
(2020:65.6%)

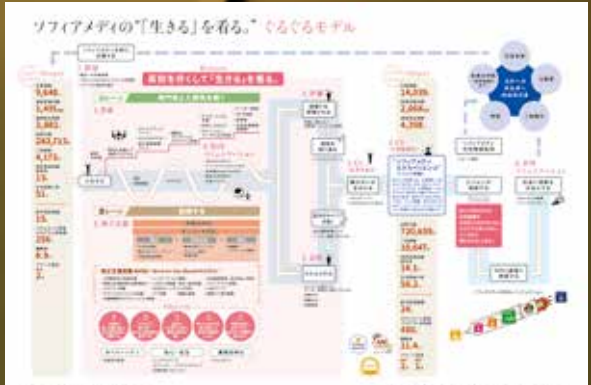


The Guru-Guru Model

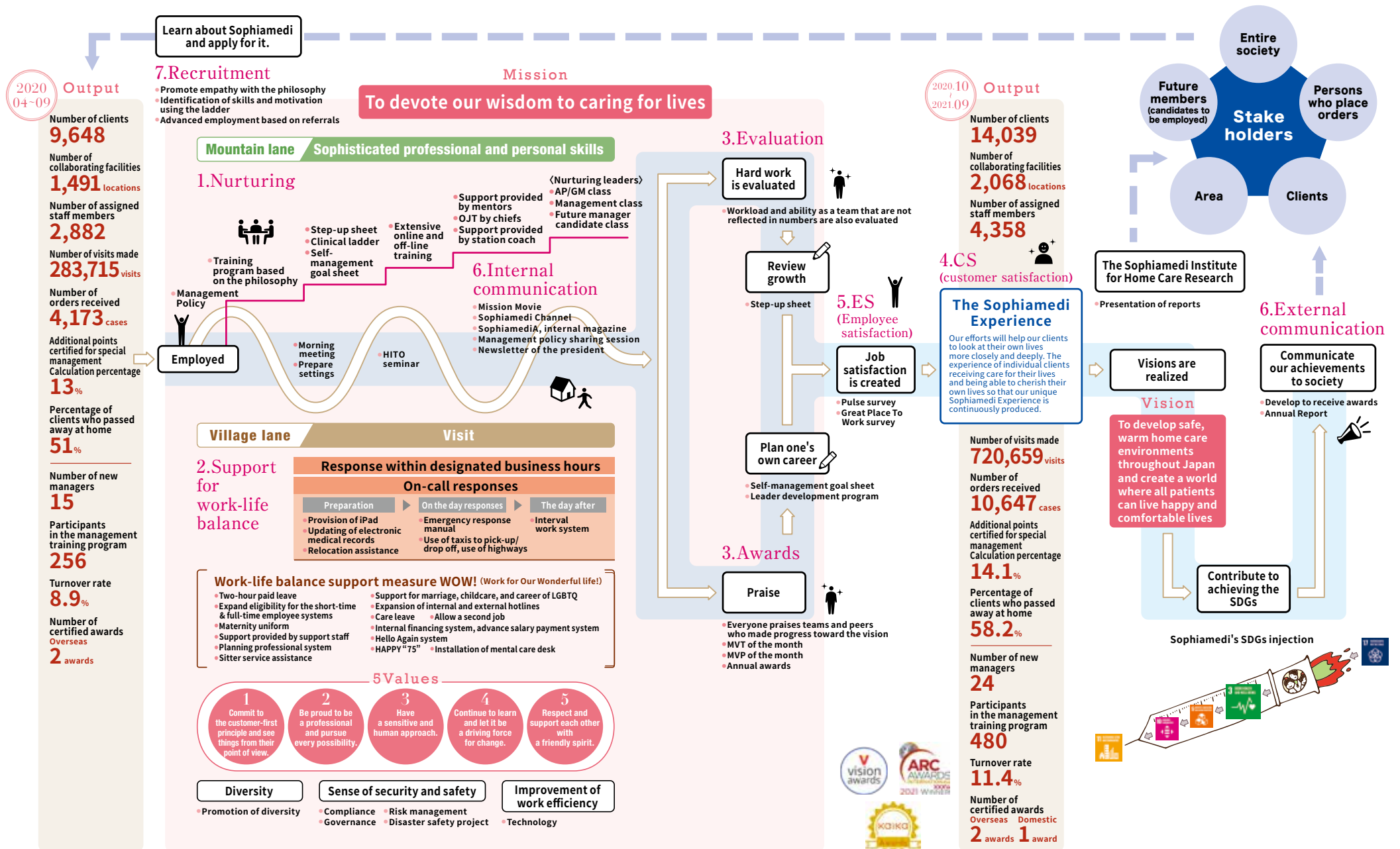
Care for life Deepening the Guru Guru model

We are now in the second year of formulating the "Guru Guru Model," a value creation system specialized for home health care nursing. We have established internal systems, rules, and support systems that are all in line with our vision, but we have encountered some discrepancies with the actual situation when we put them into practice. We are continuing to fine-tune the system and are looking for ways to make it more effective. We have also promoted the use of IT, based on the infection prevention policy of COVID-19. Furthermore, during this period, we have strengthened our governance and redeveloped our compliance system to create the necessary framework for honest business operations. We will look back at this year's development efforts of the "Guru Guru Model" that support the Sophiamedi Experience.

Period: 2020.10 ~ 2021.09



Care for life – The Guruguru Model



The Guru Guru model continues to propel the Sophiamedi Experience toward the vision

The components of the Guru Guru Model are recruitment, nurturing, support for work-life balance, evaluation, awards, employee satisfaction, customer satisfaction, and external communication. In the second year of operation, we analyzed the numbers recorded for each of these items, and worked to discover and resolve issues, and consider new improvement measures.

Employed

The YAMASATO System for Developing Expertise and Humanity

In order to respect and firmly support the "living" of our clients, our own humanity is the foundation of our business. To enable our staff to grow not only in their professional medical skills but also in their humanity, we have established a "mountain village system" based on Shugendo, which we call "Sato lane" for our daily visits and "Yama lane" for our in-house training system.

YAMA lane

Balance between remote location and warm nurturing systems

Based on the COVID-19 infection prevention policy, various activities have gone online. Daily morning meetings, training sessions, and team meetings are now online. Daily information exchange using chat rooms, etc. has been used to facilitate better communication.



• Reading the management policy statement every morning

The morning meeting was also held online due to the fact that employees had to go directly home and work in shifts, but all employees still participated in the meeting and read the management policy statement.

Total **4403.0_h**
(2020.04~09: 1714.6h)

SATO lane

Supporting clients' "living" in the COVID-19 era

As we entered the third to fifth waves of COVID-19, we continued to feel blocked with no sign of an end in sight. Even as vaccination progressed and infection prevention measures became routine, we remained vigilant and continued to attend to the concerns of our clients and their families.



Growing back and forth between these two lanes.

• Number of stations with 365-day support

As a result of the early introduction of 365-day service at newly opened stations and the sharing of knowledge on team-based operations, 365-day service has been provided at 44 out of 68 stations.

44 stations
(2020.09: 22 stations)

Stations open all year round

• New Employee Training



Promoting online and deepening communication

Due to the spread of the infection, it was sometimes difficult to decide until just before the event whether to conduct face-to-face group training or online. We improved the program so that we could interact online with the increasing number of new employees throughout Japan.

Total **17,760^h**
(2020.04~09: 6,800^h)

• Philosophy penetration training

In the training for new employees, we deepened their understanding of the vision, mission, and spirits, as well as the action guidelines based on them, by reading and understanding the "Management Policy Statement. Our staff have become so familiar with the guidelines that they are even used in daily conversations between them.

Total **2,966^h**
(2020.04~09: 1,046^h)

• Mentor System

We have established a mentor system in which the head of the department provides consultation on various matters such as working style and career development. The mentor system has been established as an intrinsic part of the job of dept. heads, which makes it easier to consult with them.

905^{cases}

• Skill check sheet

The skill check sheet, which checks the proficiency of certain items at the time of hiring, is directly connected to the clinical ladder, allowing each person to grow at an appropriate speed.

• Online content for step-by-step courses

We reviewed the program and switched to content that is more suitable for home care nursing and business-related skills, such as leadership, and also increased the amount of content by about 200 programs.

• Paid leave that can be taken in quarter-day increments

This is one of the most frequently used measures of Sophiamed's work style reform "WOW!". It was also used when nurseries and schools were closed in response to COVID-19 and the students had to return home at short notice.

Number of benefits provided

5,209^{cases}
(2020.04~09: 1,927^{cases})

• Moving Assistance Program

This system, which supports nurses who move near to the stations, is highly valued by both staff and clients. By living closer to our clients, we are able to get to them faster in the case of emergencies.

Number of benefits provided

21^{cases}
(2020.04~09: 2^{cases})

• Mental Care Desk

In the previous financial year, no staff found it necessary to use this service, but in this financial period there were 10 cases of usage. Although this is still a very small percentage of use, we will continue to improve the system so that staff who need it can use it with peace of mind.

Number of benefits provided

10^{cases}
(2020.04~09: 0^{case})

In addition to being able to respond quickly to emergencies, the commute has become easier and shorter.

Now that I can walk to work, it is easier for me to stop by the emergency station to pick up supplies. As a result, I have more time for myself, and I am glad I used the service.



Station Otorii
Nurse

Nozomi Kubota

• Hello Again

This program, which allows people to leave but rejoin the company with guaranteed salary and other benefits, has been well received and both those who have used it and their colleagues.

Number of benefits provided

5^{cases}
(2020.04~09: 0^{case})

• Marriage, childcare, and employment support for LGBTQ+ people

As part of our efforts to promote diversity, we have endorsed the "Famiee Project" and have made it possible for same-sex couples to voluntarily submit a partnership certificate in the case of de facto marriage.



訪問看護のソフィアメディ

Sophiamed

Rainbow Logo

• Clinical ladder and step-up sheet

Finally, we are in operation.
Online systems make it efficient.

We have started to operate the clinical ladder, which depicts the level of medical skills of each individual with a checklist. Step-up sheets are used to deepen learning according to the ladder level and to systematically improve skills.

• Ladder Interview

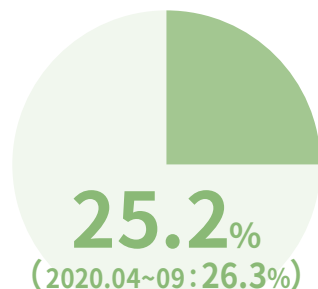
Based on the clinical ladder created by each staff member, the manager and staff have a meeting to review the ladder. The staff develop a growth plan while receiving appropriate advice.

• HITO Seminar

This seminar was held online at the corporate division. While daily face-to-face communication is decreasing due to countermeasures against infectious diseases, the number of new employees has been increasing, and this was a valuable way to interact across departments and deepen mutual understanding.

Total 324h
(2020.04~09: 143.5h)

Ladder level 4 and 5 nurses



• Management training to support career development

The management school was divided into two courses: basic for first-time participants and advanced for second-year and later participants, evolving into a program more in line with each stage. New managers were also born from the previous year's Next Generation Manager Candidate School.

Total participants

480
(2020.04~09: 269)

Awards

An online management policy sharing meeting was held in May 2021, and an award ceremony was held for the outstanding offices and outstanding staff for fiscal year 2020. The Most Valuable Team and Most Valuable Person each received an award and congratulatory messages via video letters from customers and local partner medical institutions.

• Number of support staff dispatched

From opening to solving operational issues

Fifteen new stations were opened during the period, and support staff supported the many new administrators and staff who arrived.

Number of support

49/70 stations
(2020.04~09: 185cases)

• Care Leave

The term collectively refers to menstrual leave, nursing care leave, and leave to care for children, and is intended to eliminate the difficulty of applying for such leave. The level of usage was slightly lower than the previous fiscal year. This is partly due to the fact that staff tend to take leave after explaining the reason to others, but they tend to be more reluctant to do so if the issue is related to more delicate reasons, such as menstrual period pain. We will continue to promote awareness of this issue.

Number of benefits provided

25cases
(2020.04~09: 14cases)

• Interval system

Although there was a need for this system, it was not used in the previous fiscal year due to the difficulty of coordinating visits when taking time off, but its use has increased this fiscal year due to the introduction of the team system.

• Conditional side jobs

Conditional side jobs means giving staff permission to take on additional work with outside organisations in order to widen their skills and knowledge. We have featured the voices of people who actually use the system in our internal newsletters, etc., in order to increase awareness of the system. In addition, we are receiving an increasing number of career-related inquiries from users who are considering using the system.

Number of benefits provided

10cases
(2020.04~09: 5cases)

Number of benefits provided

326cases
(2020.04~09: 0case)



• Recognition for the practice of the 5 SPIRITS

Sharing excellence initiatives

In the second online management policy sharing session, we interviewed MVP nurses and therapists under the theme of "Care for Living" and shared their achievements and thoughts with the participants.



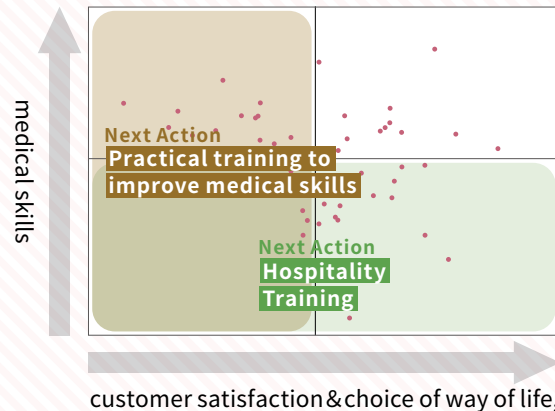
In-depth analysis of customer satisfaction surveys

Following the 2020 survey, we conducted a second customer satisfaction survey in September 2021. We are comparing and analyzing the results, checking the changes in numerical values for each item and the trends for each station, and also reviewing the methodology and concept of the survey.

• Second customer satisfaction survey

Important starting point for improvement cycle

Last time, we sent the survey to the clients by mail, but this time, our staff brought the surveys to the customers when they visited and asked them to return them by mail. We will carefully review the responses and use them to improve the value of our services.



Response rate

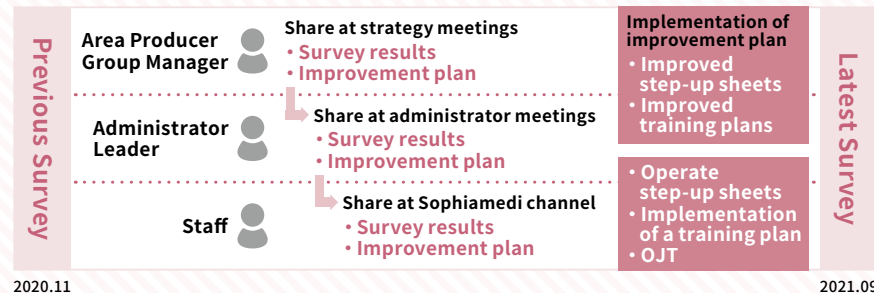
43.8%
(2020.04~09:45.8%)



Identify issues and take appropriate remedial action

We will look at the current quality level of each station based on the two axes of "medical skills" and "customer satisfaction/choice of way of life," and identify and strengthen the efforts needed to improve each of these.

Communication of survey results sharing



Searching for job satisfaction and ease of work amidst the transformation caused by the COVID-19 pandemic

As the effects of COVID-19 continue, we have been searching for ways to work taking into account Corona Virus as medical professionals as well. We have been monitoring our physical and mental condition through monthly pulse surveys and an annual "Best Places to Work" survey.

• Employee satisfaction surveys conducted monthly (Pulse survey)

Check the physical and mental condition to detect problems at an early stage.

In addition to aiming for early detection and resolution of mental and physical exhaustion and other problems, requests to the company were fed back to the department in charge of improvement. In the future, we will also focus on improving the response rate.

Average score

3.5 point/ 5 points
(2020.04~09: 3.5 point)

Response rate

78.5%
(2020.04~09: 80.8%)

• Employee satisfaction survey conducted annually (The Great Place to Work)

The Great Place to Work
Analyzing organizational issues with surveys

The affirmative response rate dropped by 2.9%. The results of the analysis were shared with each department and office. We set priority items and each department worked together to implement improvement measures, and also launched a team specializing in ES improvement.

Q. Taking everything into account, this is a great place to work.

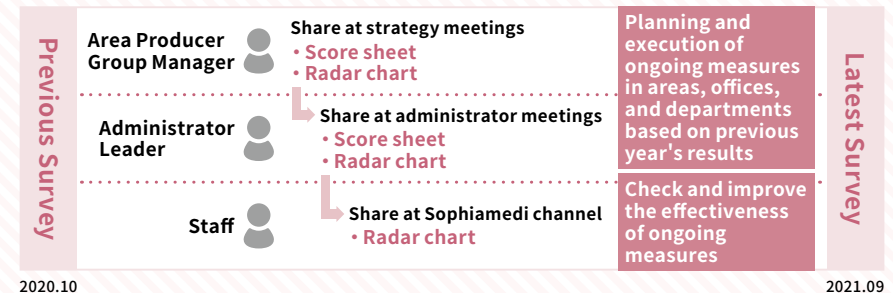
Positive response rate

53.8%
(2020.04~09: 55.6%)

Response rate

80.8%
(2020.04~09: 80.4%)

Communication of survey results sharing



Sophiamedi Experience

Through the "Guru Guru Model", each of us continues to refine our ability to "Care for lives".
We will pour all of our efforts into creating the Sophiamedi Experience for our clients.

Informing many people about the high quality of home medical care that is attracting attention

In the summer of 2021, the number of people receiving treatment at home increased rapidly, and home healthcare has attracted attention. We are working to make more people aware of the value and importance of home healthcare, which is still not well known.

• The Sophiamedi Institute for Home Care Research

It was established in March 2021 as a think tank to analyze the current state of home healthcare and the industry from various perspectives, and to share information widely with society and healthcare professionals.

• Owned media "Sophiameda"



An information site full of the realities of home health care nursing

In order to increase the number of people interested in home health care nursing, which is facing a shortage of workers, we launched a website in September 2021 that collects the real voices and basic knowledge of actual staff members.

More and more people choose to Care for lives.

It is said that the number of medical professionals who leave their jobs due to COVID-19 is increasing, but we were able to welcome many people who joined Sophiamedi saying, "I want to be of help to others in times like these".

• The number of employees.

Care for Lives. Colleagues who share our philosophy

Many people said that the reason they decided to join Sophiamedi was because they shared our philosophy of "caring for lives". Many of them said that Sophiamedi's philosophy inspired them and they wanted to work in that kind of nursing.

606

(2020.04~09:214)

• Number of employees who joined through referrals

Company volunteers encouraged referrals using a range of ideas.

I want to increase the number of my colleagues! Volunteers who wanted to increase the number of their colleagues gathered across offices and conducted activities to increase internal cooperation and to let people outside the company know the appeal of Sophiamedi.

55

(2020.04~09:38)

My first home nursing care visit after being encouraged to join by a staff member I had connected with on social media.

I feel that I am able to provide nursing care for the "living" just as I had heard about. I feel that I am doing nursing. Now I have acquaintances who have heard my story and are considering joining the company.



Station Shimoigusa
Occupational Therapist
Ruka Matsumoto

Joining colleagues who share our philosophy

Circulation of new Sophiamedi Experience creation



In order to increase the value of the home nursing experience, even as we expand the scale of our business, we will use the Guru Guru model to implement integrated measures.

It was a year of rapid changes, including the expansion of the business scale and COVID-19 pandemic, but the Sophiamedi Experience improved.

Sasaki Sophiamedi continues to grow its business, with the number of stations growing from 48 last year¹⁾ to 68 this year²⁾ and the number of staff growing from 921¹⁾ to 1361²⁾. Under such circumstances, the Sophiamedi Experience (SX) result index for this fiscal year was 65.4 points, an increase of 0.4 points compared to the previous year. It was a year of the establishment of many new stations and rapid changes due to the COVID-19 pandemic, but we consider it an achievement that we were able to maintain our SX score even under such circumstances. On the other hand, there was a decline in the staff evaluation of "The degree of nursing care and rehabilitation provided" and "5 Spirits practice rate," which are components of SX. There are many

Education & Training Group
GM & SX Maximization
Project Leader

Shin Sasaki

Education & Training Group &
SX Maximization Project PMO

Hiroko Usami

possible reasons for this, including the increase in the number of new employees and the busy schedule due to the COVID-19 pandemic. Based on the results of this study, we are planning to review the content of on-the-job training to improve the level of practice, as well as strengthening the connection to off-the-job training and use it as one of the themes for education and training in the next fiscal year.

Continue to update each measure in the Guru Guru model to increase the SX rating.

Usami SX is a visualization of the value of the intangible service of home nursing provided by Sophiamedi. We are striving to improve the value of the services we provide by measuring numerically the level of experience

we are providing to our clients and monitoring it as one of the important management indicators. **Sasaki** The value creation model for creating SX is the Guru Guru Model, and in the SX Maximization Project, we are refining our measures in the seven elements of the Guru Guru Model: training, support for balancing work and family, evaluation and awards, customer satisfaction (CS), employee satisfaction (ES), external



communication, and recruitment. We are currently updating our measures in these seven areas.

Usami In terms of “training” we have prepared various programs, such as training for the first three months of employment, training for each position, and manager candidate school to improve the degree of nursing care and rehabilitation provided and the 5 Spirits practice rate. For example, we believe that it is important to understand Vision, Mission, and Spirits (VMS) in new employee training, and we have designed an appropriate course. The course is designed as a series of lectures based on client case studies,



accompanied visits to experience VMS practices in the field, and subsequent learning and output of goals. Staff spent a total of more than 17,760 hours in this training. In addition, we are focusing on education by expanding the number of online training content to 905 programs, which allows staff to learn at their own pace.

Sasaki In the area of “support for balancing work and family” which aims to create a comfortable working environment for staff, I think we focused on creating a more comfortable working environment using the various systems, such as paid leave, moving support money, and comments from staff in the ES survey.

For “evaluation and awards” we added the number of visits to the evaluation sheet as well as the level of 5 Spirits practice as a qualitative evaluation and updated the form so that daily efforts that cannot be expressed in numbers are reflected in the evaluation.

For CS, we continued our questionnaire from the previous year and received responses from 4,802 customers and 2,001 people from related organizations. In addition to analyzing these results from multiple perspectives by station, area, size, etc., we also interviewed stations with high or low, rising or falling, CS values, and

extracted the knowledge gained from these interviews to develop education and training, and organizational systems.

Usami For ES, we use surveys such as the Pulse Survey and Great Place to Work (GPTW) to gather feedback from our staff and implement measures. The response rate for both surveys is relatively high, averaging 79%, which can be considered to be a figure that indicates that many employees have high expectations of the company and hopes for improvement. Although each employee has different ideas about job satisfaction, we will continue to think of ways to create a system that makes it easier and more likely for employees to communicate their feelings.

Sasaki In order to increase the recognition of home nursing, we also actively engaged in “external communication.” We have been publishing this annual report since last fiscal year, and we have won several awards overseas.

Usami We also believe that “recruitment” is an extremely important theme as we continue to expand our business. We have started new initiatives to accelerate recruitment, such as the launch of “Sophiamedia,” a web media that disseminates knowledge about home health care nursing and the



appeal of the job, and the launch of “Referral Mate”, a project to strengthen referral recruitment.

To improve the value of the client experience by linking various measures.

Sasaki The past year has been one in which each element of the Guru-Guru model has functioned individually, and we have reviewed and taken on new challenges. Next year, we will determine the influence and correlation between the elements, and start monitoring the entire system with the aim of strengthening the connections, so that we can further evolve the system as an integrated system.

Supporting smooth station operation

The Station Support Group was established in 2020 as a cross-company support function for stations. The group provides a variety of activities, including operational and practical support when new stations are opened or managers are replaced, business representation, and training manual upkeep.



Interview with the Station Support Group

Leader Shinobu Murayama & Manami Tanaka



Confront and resolve problems, and work together

Effective support
through training on
administrative tasks
and assistance on visits.

Tanaka The Station Support Group provides several types of support for the smooth operation of stations. Specifically, the group provides operational and practical support when a new station is opened or a new manager is appointed, delivers training

The Station Support Group

on administrative tasks to new managers, prepares manuals, and arranges cover for staff who are absent due to injury or illness.

Murayama We have regular meetings with the managers who are involved with us, and their concerns range from business issues to how to use tools and manage staff. I try to support them in finding solutions to their problems, while paying attention to their feelings, according to the situation of the station and the personality of the manager.

Tanaka This function of supporting stations from the outside has few precedents in the industry, and it can be difficult to see the value of intervention. Therefore, we conducted a survey of managers who have implemented the support to determine the value. As a result, 85% of the respondents answered that the support was useful for their station management, and we received positive comments such as, "The frequent 1-on-1s provided advice on how to solve daily

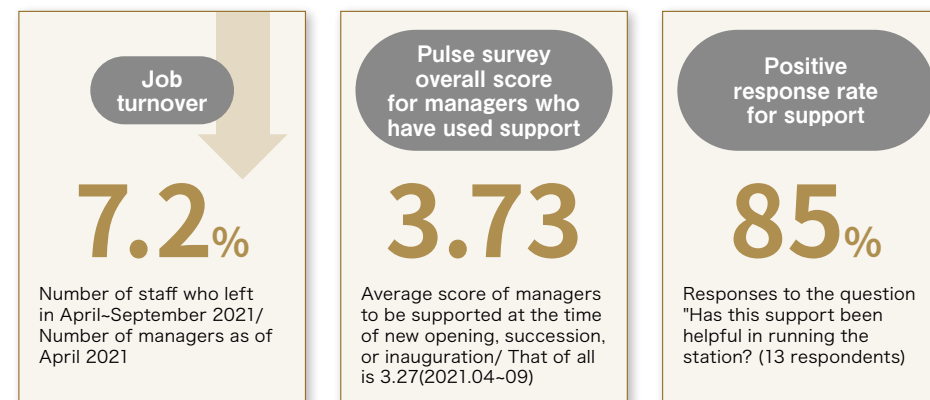
problems quickly," and "The staff understood the site and identified and instructed on necessary tasks. We received many positive comments."

We use indicators to understand the burden of the stations.

Tanaka Currently, we are doing regular rounds to existing stations. We have also set up a support index using ladder weighted averages, pulse surveys (employee satisfaction surveys), etc., to assess the burden and conditions of the stations more accurately. We will make every effort to provide appropriate support by referring to these indicators in the future.

Murayama In the past few years, Sophiamedi has been expanding its area and opening more and more stations in remote areas. We hope that we can serve as a bridge so that the vision, mission, and spirit of Sophiamedi will thrive and we can become a team moving in the same direction.

The Station Support Group was launched in 2020. As a result of continued activities, we have seen positive results, such as a decrease in the turnover rate of managers, and an increase in the average overall score of supported managers to a rate higher than that of the overall average score in the Pulse Survey .



I am grateful for the wide range of advice, from administrative tasks to building relationships with staff.

When I was appointed as a manager, I was given training on all the details of management duties, and since then, I have been taught various things, such as what to prioritize in my work and how to deepen relationships with staff. For schedule management, something which I had been finding challenging in my work, I was connected with another manager who taught me how he actually practices it. When I ask for advice, I often share my personal thoughts and feelings that I am reluctant to share with others because I am very grateful for the support and understanding I receive.



Station
Higashigaoka
manager

Miho Arai

Messages from people outside Sophiamedi

Experts from medical and other industries commented on our annual report



Home nursing creates happiness for people

Professor, Kanto Gakuin University,
Department of Nursing.

Noriko Saito

Ms. Saito is a graduate of Rikkyo University School of Nursing, the College of Nursing Art and Science Hyogo, and University of Tsukuba Graduate School of Human Sciences, Doctoral Program. After working at Asahikawa Medical University Hospital, and Juntendo University Hospital, she moved to her current position of Professor in Kanto Gakuin University, Department of Nursing. In addition, she is the Vice-President of the Japanese Nursing Association.

As Japan's population ages, the demand for medical and nursing care will continue to grow, and this will directly lead to a greater demand for home healthcare. Doctors who practice home healthcare say, "We can't do without home nursing." Home nursing is the cornerstone of home healthcare and also the cornerstone of the team that supports home care. In light of changes in the medical service system and other factors, home nursing will become "community and home nursing theory" in basic nursing education starting in 2022, and the number of credits will increase considerably. I believe that home nursing that

is developed in the community embodies the value of maintaining the optimal condition of various patients, ensuring their lives, and supporting them until the end of their lives. And that this value can be passed on to future nurses through practical training. We should be proud of the fact that our practice is directly related to the healthy lives and happiness of people receiving treatment at home. Home nursing will become the mainstream of nursing in the future.



Lead the creation of value that only people can provide, transcending industry boundaries

Special Advisor, SAP Japan / Counselor, City of Yokohama /
Director, Sumitomo Mitsui Trust Bank, Limited

Michiko Achilles

Ms. Achilles has held leadership positions in the field of human resources in various industries and companies. She has also served as the Japanese Co-Chair of EMPOWER, a G20 private sector alliance, and as Chair of the Cabinet Office's Council for Gender Equality Promotion.

Japan is at the forefront of the longevity society issue. The question is how to live and welcome the last chapter of life. The need for home nursing care is growing and we are facing a chronic shortage of staff. There is a limit to the dedication of staff. In order to overcome such challenges, it is essential for the team of professionals who provide care to think about what is best from various perspectives and apply it to their daily services. Sophiamedi has well thought out mechanisms, such as the Sophiamedi Experience which is a measure of the value provided, a management policy document that serves as an action guideline, and a Guru Guru

model that is consistent with the vision. The fact that the company discloses a variety of data, both internally and externally, also contributes to trust. With an eye on the future, companies are beginning to sort out the jobs that technology can do and the jobs that only people can do. What is needed for the coexistence of people and technology is for both customers and workers to be happy. I hope that Sophiamedi will transcend the industry and become the No.1 company that customers choose, and employees want to keep working for.



04

Where We Are Databook

Sophiamedi's work style data

Have we been able to work better?

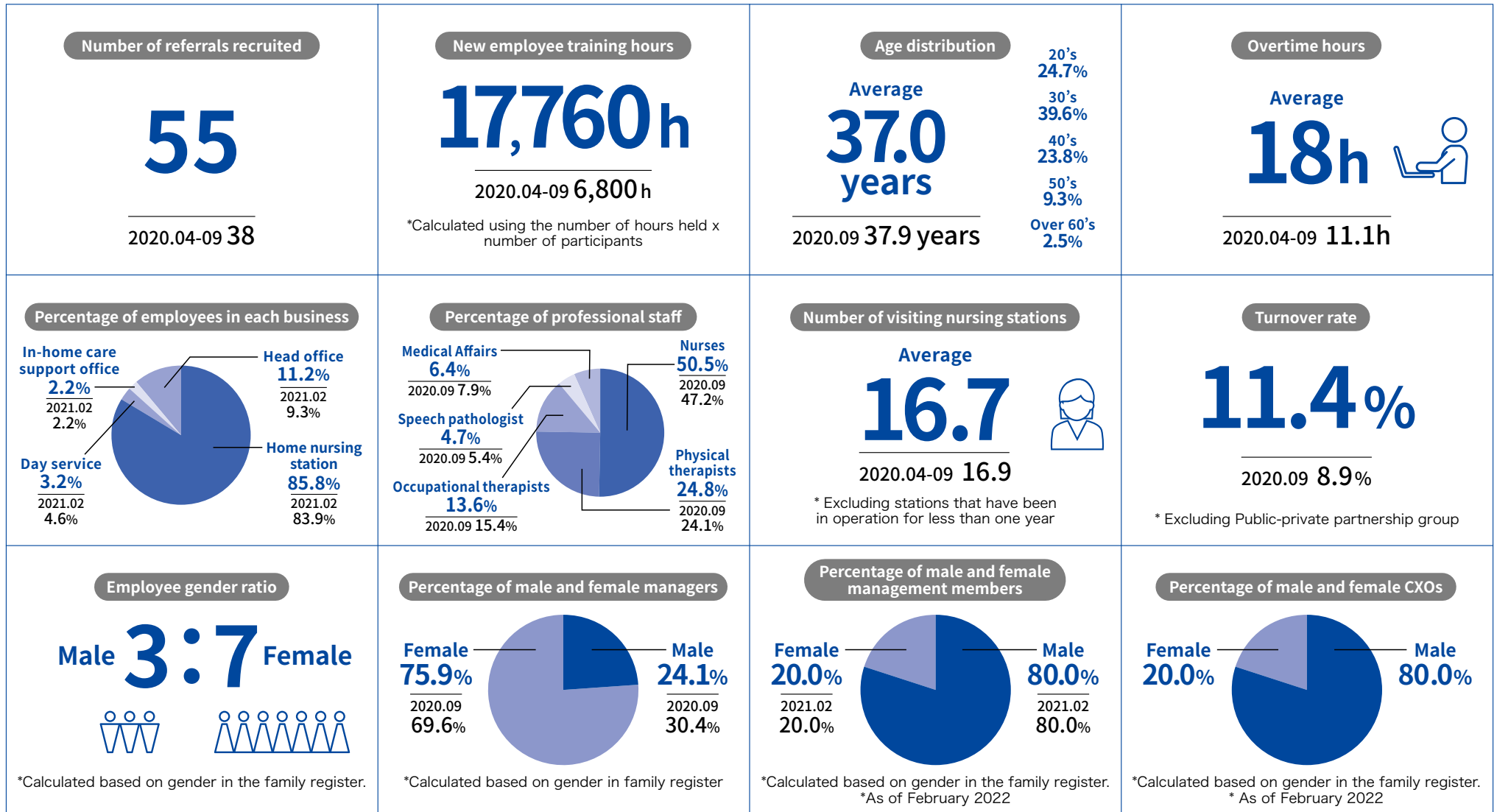
In order to improve both the quality of medical care and humanity,
and to support the safe and warm home care of as many clients as possible,
the condition of those of us who work is a very important factor.

In a rapidly changing society, we are searching for better ways of working and striving to improve them.

Sophiamedi's work style data

As a company that deals with the work styles of medical professionals and the employees who support them, Sophiamedi publishes data on work styles every year. This year was a year in which management and employees worked together to more accurately measure work styles and job satisfaction. We will continue our efforts to create an environment where diverse human resources can continue to work in a healthy and happy manner.

*Period covered by the data 2020.10~2021.09



Have we been able to work better? Toward a sustainable way of working

"Employee satisfaction" and "Service quality" are said to be strongly related. Our CHRO, Mr. Iwata, and Mr. Nakanomyo, the manager of Station Sanno, which received the highest rating in this year's employee satisfaction survey, talk about this year's work style, specific initiatives, and the future of work.

CHRO
Nayuta
Iwata
&
St. Sanno Nurse/
manager
Aki
Nakanomyo



Visualizing job satisfaction
from both quantitative and
qualitative perspectives

Iwata With the increase in the number of offices, employees, and clients, we have been working on

the visualization the work style and organizational conditions of the entire company to improve the job satisfaction of employees. In addition to organizing attendance information, we conducted a monthly employee awareness survey (Pulse Survey) and an annual survey

on job satisfaction (Great Place to Work) to measure and analyze what we could not understand from attendance alone. On top of that, we cannot know anything unless employees respond to the survey, so we used the response rate as a key indicator. With the cooperation of our employees, we have recently been able to obtain a high response rate, and I am glad that we have a starting point for improving job satisfaction.

Nakanomyo The station has been working on operating under the new normal of the Covid-19 pandemic. At Station Sanno, we increased the number of interviews with staff compared to the previous year to understand everyone's feelings and to be better able to work as a hub, which we believe is the key to good overall communication. Since the company measures our working style quantitatively, we tried to understand the staff's working style qualitatively in the interviews. As a result, I think Great Place To Work was a good indication that the staff feel satisfied in their work. Specifically, we optimized the visiting routes and shortened the travel time to create more time so that everyone could go home

earlier without reducing the number of visits. We also tried to minimize overtime work by ensuring sufficient time for nursing records upon return. In addition, by communicating actively on a regular basis, we aimed to build a relationship where we can follow up with each other even when staff members have sudden absences.

Iwata Station Sanno has a wonderful environment where the staff can keep track of each other's status. For example, information such as visit schedules, meeting minutes, and possession of emergency cell phones for everyone can be viewed on the cloud. I feel that the culture of understanding who is in trouble and autonomously trying to help them is leading to everyone's job satisfaction. From now on, I think it is important not only to measure and analyze work styles quantitatively, but also to develop "inspiring ideas" that enhance job satisfaction, as Ms. Nakanomyo mentioned. Increasing job satisfaction will improve the quality of services and lead to client satisfaction. I would like to continue to work on the way we work in order to spread safe and warm home medical care.

Station Yukigaya, nurse

Mayumi Sakamoto

I try not to ignore the feelings deep inside.

I pay attention to every corner of the heart. I will always be there for you.

After working at a hospital for 11 years, I chose the path of home nursing. I joined Sophiamedi in 2019 because I was attracted by Sophiamedi's ability to support a single client while interacting with multiple professions.

After joining Sophiamedi, there was an incident that made me think about what "caring for lives" means. I was providing foot care and other services as a nurse to a woman in her 80s with diabetes, but she said, "I want you to listen to me more than providing care." I was happy to hear that, but I was also wondering if it was the right choice to visit them just to listen to their

stories. Therefore, we consulted with care managers and doctors to gather opinions from all angles and discussed the necessary care. Her husband had passed away and she was living with her son and his wife, but the son had an incurable disease and the wife was taking care of him. She said, "I don't want to bother my family, but I want someone to listen to me." I felt that this person was entrusting us with a need that her family alone could not fulfill. What is the role of our home nursing? What is the value that we should provide? As a result, I decided to intervene mainly through dialogue as psychological care. I have been visiting that person for a long time now, and I feel that I was able to have a good relationship with her because she said, "I can't wait for



you to come."

In the management policy, there is a phrase, "Pay attention to every corner of the heart and continue to be close to the patient." For me, this is exactly what it means to "care for lives." I think this is exactly what I mean. In order not to miss the thoughts and feelings that are in the corner of the client's mind, I continue to be close to them and talk with them. Of course, there are people who don't like to talk. In such a case, I offer them

some options, such as "If A and B gave the same result, would B be better?" In such a case, I prepare options and narrow them down little by little. In this way, I think it is important to understand the wishes of the person while taking into account their environment and life background.

I would like to continue to share my experiences with the staff around me, so that I can continue to be there for many clients so that their hearts can truly be filled.

Station Nishimagome physical therapist/
neurology physical therapy sciences (stroke and brain injury)

Mayumi Sakamoto

Creating an opportunity to face yourself

Rehabilitation is collaborative work with clients

I joined Sophiamedi after working at a hospital for seven years, mainly in the recovery ward. Since I am a certified physical therapist for stroke, I wanted to support stroke patients at home. Since joining Sophiamedi, I have been in charge of many clients who have had strokes. There was one client who left a deep impression on me. It was a male client with severe paralysis and dysarthria. At the beginning of our intervention, he was happy to be back home because he had just been discharged from the hospital, but after that, his expression became dark. During his hospital

stay, he was working hard to get out of the hospital, but when he returned home, he faced the reality that it would be difficult to return to the same lifestyle as before, and his motivation for living decreased. So, we had a discussion and I suggested that we try rehabilitation while setting detailed goals, thinking that if the client could feel the effects of rehabilitation, he would be able to face his current situation positively. The more we tried, the more we were able to do, and the more positive the client became little by little. At that time, for the first time, the patient, who had said there was nothing he wanted to do, said, "Actually, I want to go shopping." He is now doing positive rehabilitation with the goal of



going shopping. For me, "care for life" means creating opportunities for clients to face themselves. As in the episode I mentioned earlier, there are many people who feel depressed after being discharged from the hospital because of the gap between their post-hospital life and their previous life. This is when I think it is important for us to intervene and create an opportunity for them to face themselves positively. Rehabilitation is a joint effort with the client. It requires both the

client's positive attitude and the therapist's hard work, and it is only possible if both of them are facing the same direction. That is why I think it is important to think about what kind of life they want to have in the future, together. In the future, of course, I would like to make Station Nishimagome more inspiring, but I would also like to interact with various staff members outside the stations. I would like to work as one with Sophiamedi to provide higher quality services.

Mitaka home care support office care manager

Noriko Takeuchi

Supporting the “now” of customers who have lived their lives to the fullest

I take care of their “way of life.”

After working as an office worker, I took the opportunity to enter the world of welfare. I first qualified as a social worker and then became a home care helper. After working as a helper for about 10 years, I decided to become a care manager with the encouragement of my mother, who also worked in the welfare industry.

When I started working as a care manager, there was one client who left a deep impression on me. She was in her 90s with a compression fracture of the lumbar vertebrae, was deaf and lived alone. She was discharged from the hospital without sufficient rehabilitation due to her strong will to go home, and stubbornly refused supportive interventions, saying she could live by herself. However, it became difficult for her to live on her own,

and she reluctantly decided to use the support of a helper. For a while after the intervention, she was frustrated and refused, and there were times when we could not provide sufficient support. During the times we met, we gradually listened to the client's background and made efforts to understand the life she had worked so hard to live. Then, when we learned that the client strongly desired to see a doctor because she wanted to be able to manage her health by cooking with diabetes in mind, we coordinated with visiting physicians and visiting nurses. After that, through rehabilitation from the visiting nurse, the patient who could only move by crawling became able to use a walking frame and manage the food in the refrigerator. I could see the smiles on her face as she achieved her goals, and although she was unable to cook, she was able to live at home until the end of her life.



For me, “care for life” means getting to know the client and realizing their thoughts. Due to illness or disability, some people can no longer do the things they used to be able to do and are forced to suppress their thoughts and hold back. Care managers have direct contact with their clients only about once a month. That's why I think it's a very precious time to have the opportunity to face the client's “now” thoroughly. A client I just spoke with has worked hard to overcome various difficulties in his long life, and he told me that he wants to live without causing trouble to others. I also realized

that through “care for life,” I am also taking care of their “way of life.” By learning more about our clients and sharing this information with the people involved in supporting them, we were able to change the way we interacted with them, and we felt we were able to support their “way of life” more intimately.

I would like to continue to devote myself to providing high-quality care management that maximizes the power of the client's abilities and the support provided by the people involved in supporting them, in order to realize the client's “way of life.”

care worker, Day Service Jiyugaoka

Misaki Oikawa

Creating a comfortable place for everyone.

Sincerely listen to all their requests.

When I was looking for a job at university, I was initially thinking of working for a general company, but I was attracted to a job where I could interact with people and be active, so I decided to become a care worker. After obtaining the certification, I worked at a half-day day service for two years, but I decided to join Sophiamedi because I could spend more time with clients at the full-day service and was attracted by the cheerful atmosphere of the staff and clients. Unlike visiting nurses, I believe that day service can provide unique "care for the living." In the daycare service, everyone shares the same schedule from morning to evening. Some come for the exercise, some

for the chatting with the staff, and some for eating snacks together. Because each person comes for a different reason, I want to create a place and space where everyone can be satisfied. This is what I believe to be "care for life." The daycare service I work at, Jiyugaoka, specializes in rehabilitation, but not all the patients want to exercise. There are some people who live alone and only have opportunities to meet people or go out when they are at the day service. Therefore, while physical rehabilitation is important, we hope to provide time to support them mentally as well. There are many different requests, and it is difficult to meet all of them, but I am careful not to deny them by saying, "this is impossible," or to make them expect something else.



There was an elderly man who was frustrated because he could not move as he wished, and he often gave me harsh comments and difficult requests. So I asked him to write down in bullet points what he wanted me to do, and then I clearly told him "this is difficult" or "I think I can do this." For the ones that could be done, I asked, "What exactly do you want me to do?" When something was difficult, I would try to find a way to explain why it could not be done, and I would tell him honestly. Then, one

day, in front of other clients, the man said to me, "Ms. Oikawa, you always do your best to prepare for us in a limited amount of time." I was really happy to hear that because he was not the kind of person who usually says things like that. Unlike visiting nurses, daycare services are a place where clients come to us. That's why I think it's my role to create a place and space where as many people as possible can feel that "I had a good time and want to go again."

Sophiamedi's management members

Sophiamedi's business structure is based on a team management system with a CXO structure consisting of five divisions under the CEO, namely the Business Support Division (CAO), the Organization Development Division (CHRO), the Home Health Care Nursing Division (COO), the Quality Management Division (CQO), and the Corporate Planning Division (CSO).

*As of February 1, 2022

CXO

Chairman Keita Hamaguchi

Appointed as representative director in 2021.
Oversees the entire CUC Group.



President / CEO (Chief Executive Officer) Aya Ito

Joined the company in 2019. Oversees management as a team with four CXOs.



CAO (Chief Administrative Officer)/ CQO (Chief Quality Officer) Akira Shinoda

Joined the company in 2004. Oversees the Business support division and Quality management division.



CHRO (Chief Human resource Officer) Nayuta Iwata

Joined the company in 2020. Oversees the organization development division, including recruitment and PR.



COO (Chief Operating Officer) Masahiro Hada

Joined the company in 2019. Oversees the Home nursing division, which is involved in the operation of home nursing services.



CSO (Chief Strategy Officer) Eisuke Makimura

Seconded from CUC in 2022. Oversees the corporate planning division, including public-private partnerships and home clinical trial projects.

General Manager, Group Manager (GM)

Administration Office GM Takeshi Terada



Seconded from CUC in 2021. Mainly oversees the compliance oversight function for each business.

Regional collaboration promotion group GM Ryota Arimura



Joined the company in 2020. Oversees Regional collaboration activities for each business including home nursing.

Public-private partnership group GM Kazumasa Imayoshi



Joined the company in 2021. Oversees COVID-19 related projects in collaboration with the government.

General affairs group/ Systems group GM Kazuto Endo



Joined the company in 2018. Oversees office support operations and internal intranet maintenance.

Education & Training group GM Shin Sasaki



Joined the company in 2019. Mainly oversees the design of education systems for professional and career-track employees.

Medical Affairs group GM Sachiyo Suzuki



Joined the company in 2021. Oversees medical clerical work, mainly receipts and clerical work.

Human resources group/ Labor relations group GM Tomoya Mizuguchi



Joined the company in 2020. Mainly oversees personnel and labor-related management systems.

Well-being promotion group GM Mami Miyazi



Joined the company in 2019. Also serves as Station Motosumiyoshi manager.

Area Producer (AP)

Meguro, Shibuya, Joto area APs Tomoe Akahira



Joined the company in 2010. Oversees a total of 10 offices, mainly in Meguro ward.

Shinagawa/Ota/Minato area AP Hiroyuki Takase



Joined the company in 2013. Oversees 13 offices, including Shinagawa ward, where the company was founded.

Setagaya area AP Hiroshi Kurita



Joined the company in 2017. Oversees a total of 8 offices covering all of Setagaya ward.

Josai/Tama East area AP Masako Kawata



Joined the company in 2009. Oversees a total of 14 offices, mainly in Suginami and Nakano wards.

Kanagawa area AP Makoto Ose



Joined the company in 2012. Oversees a total of 12 offices, mainly in Kawasaki and Yokohama cities.

Shizuoka area AP Ryuki Kondo



Joined the company in 2019. Oversees St. Hamamatsu Chuo, which was opened in Shizuoka prefecture.

Tokai area AP Shota Obata



Joined the company in 2019. Oversees a total of 8 offices in Aichi and Gifu prefectures.

Hokuriku area AP Fuma Oda



Joined the company in 2021. Oversees a total of 2 offices in Toyama city and Imizu city, Toyama Prefecture.

Kansai area AP Norihito Takizawa

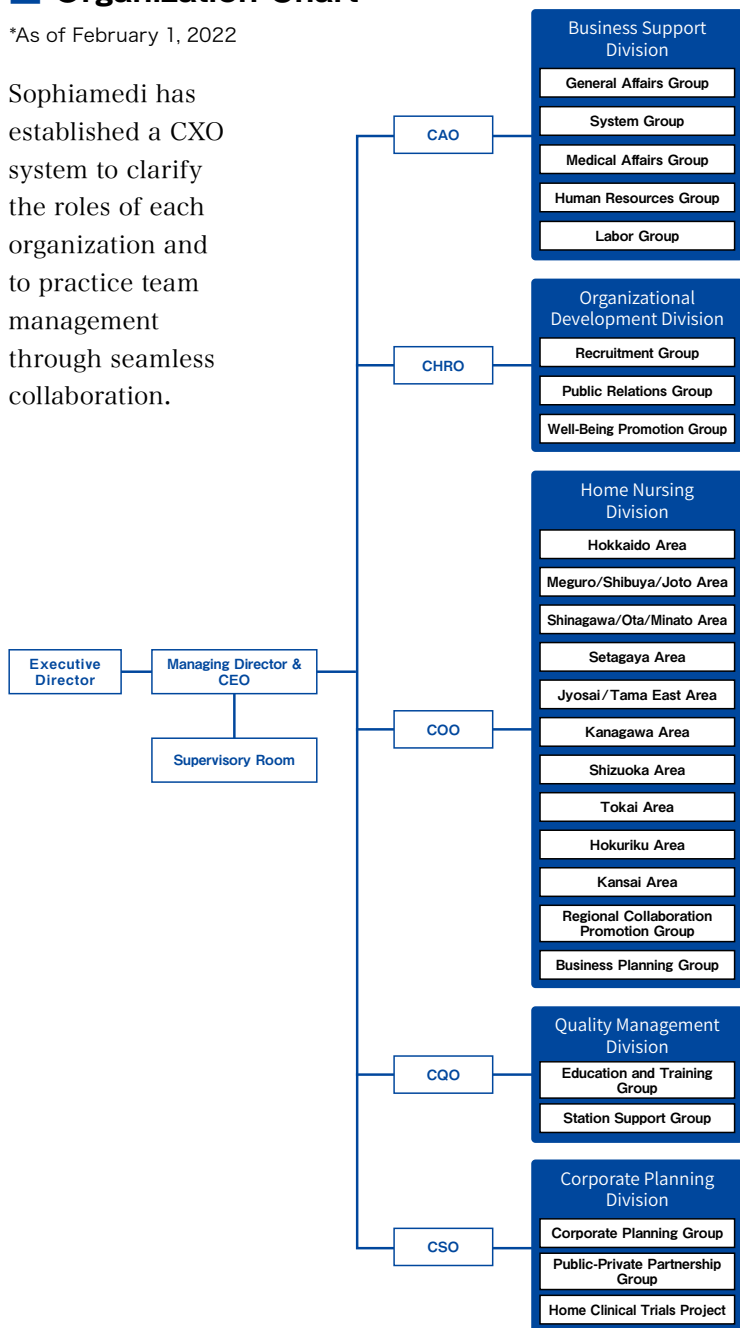


Joined the company in 2020. Oversees a total of 2 offices in Osaka and Nara prefectures.

Organization Chart

*As of February 1, 2022

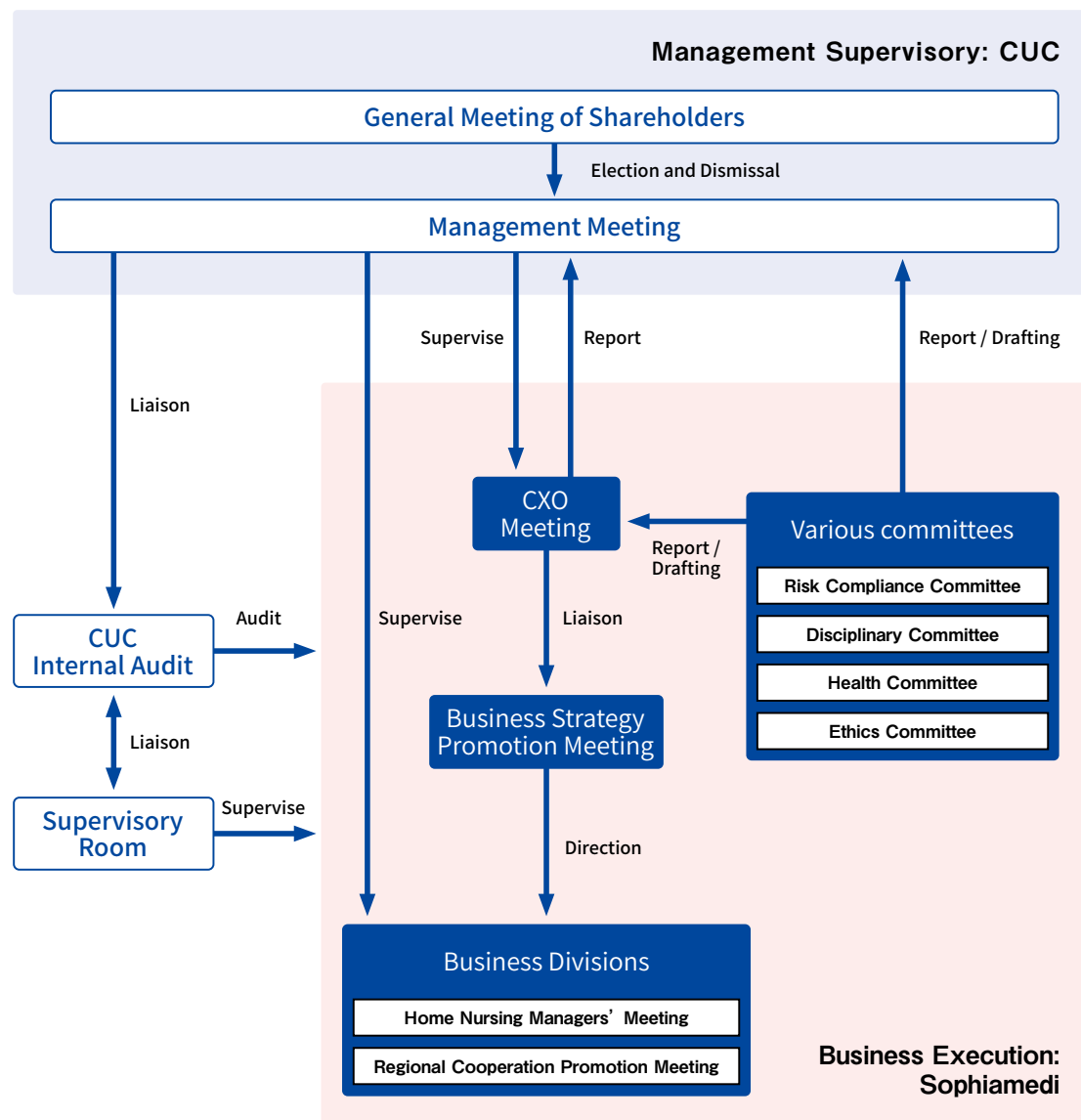
Sophiamedi has established a CXO system to clarify the roles of each organization and to practice team management through seamless collaboration.



Governance

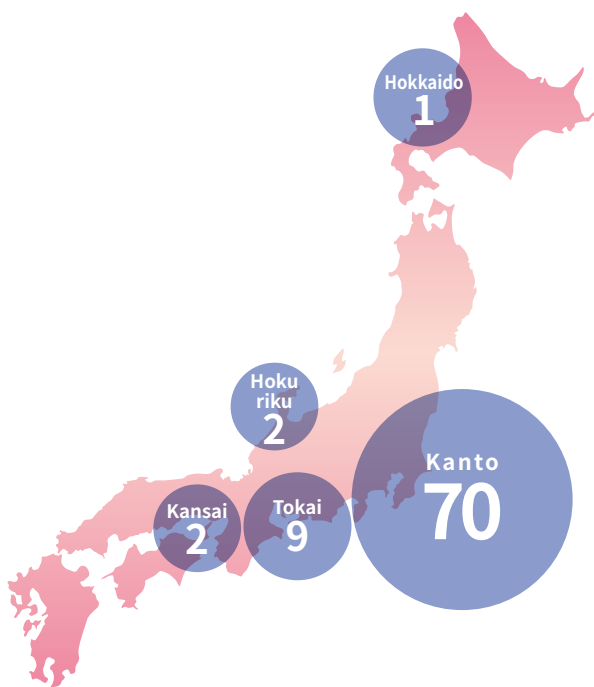
*As of February 1, 2022

Sophiamedi positions the reinforcement of corporate governance by improving the management supervision function and business execution function as one of the most important issues and promotes management that can be trusted by all stakeholders.



■ List of business sites

As of February 2022, we have 70 home nursing stations, 8 in-home care support offices, and 4 day services in the Kanto region, Hokkaido, Hoku-riku, Tokai, and Kansai. In May 2022, we plan to expand to Kyushu, Kanazawa, and other areas in order to provide more secure and warm home care.



■ Home nursing station ※Order of opening

Hokkaido

Toyohira

Tokyo

Koyama

Gakudai

Jiyugaoka

Mishuku-Sancha

Sanno

Yoga

Fudomae

Ikegami

Kyodo

Yukigaya

Seijo

Higashigaoka

Yutakacho

Komaba

Roka-Koen

Sogojonan

Futakotamagawa

Daikanyama

Nishimagome

Aomono-Yokocho

Yaguchi

Shirokane-Takanawa

Otorii

Tsutsujigaoka

Mitaka

Higashi-Nihonbashi

Asagaya

Eifuku

Shimoigusa

Takaido

Nakanoshinbashi

Nishiogikubo

Nogata

Hikarigaoka

Oizumigakuen

Kotakemukaihara

Koganei

Iriya

Omorimachi

Nishi-Shinjuku

Higashimukojima

Chofu

Rokugo

Toritudaigaku

Daita

Kanagawa

Motosumiyoshi

Mizonokuchi

Kashimada

Isehara

Miyamae

Aso

Hon Atsugi

Iris Odawara

Hadano

Centerkita

Hiyoshi

Aobadai

Shizuoka

Hamamatsuchuo

Aichi

Meito

Chikusa

Meishi

Mizuho

Meihoku

Tenpaku

Gifu

Gifu

Ogaki

Toyama

Toyama

Imizu

Osaka

Sakaichuo

Nara

Hyugguri

■ Home Care Support Office

Tokyo

Futakotamagawa

Midorigaoka

Yaguchi

Mitaka

Asagaya

Gakudai

Yukigaya

Ikegami

■ Day service

Tokyo

Ikegami

Gakudai

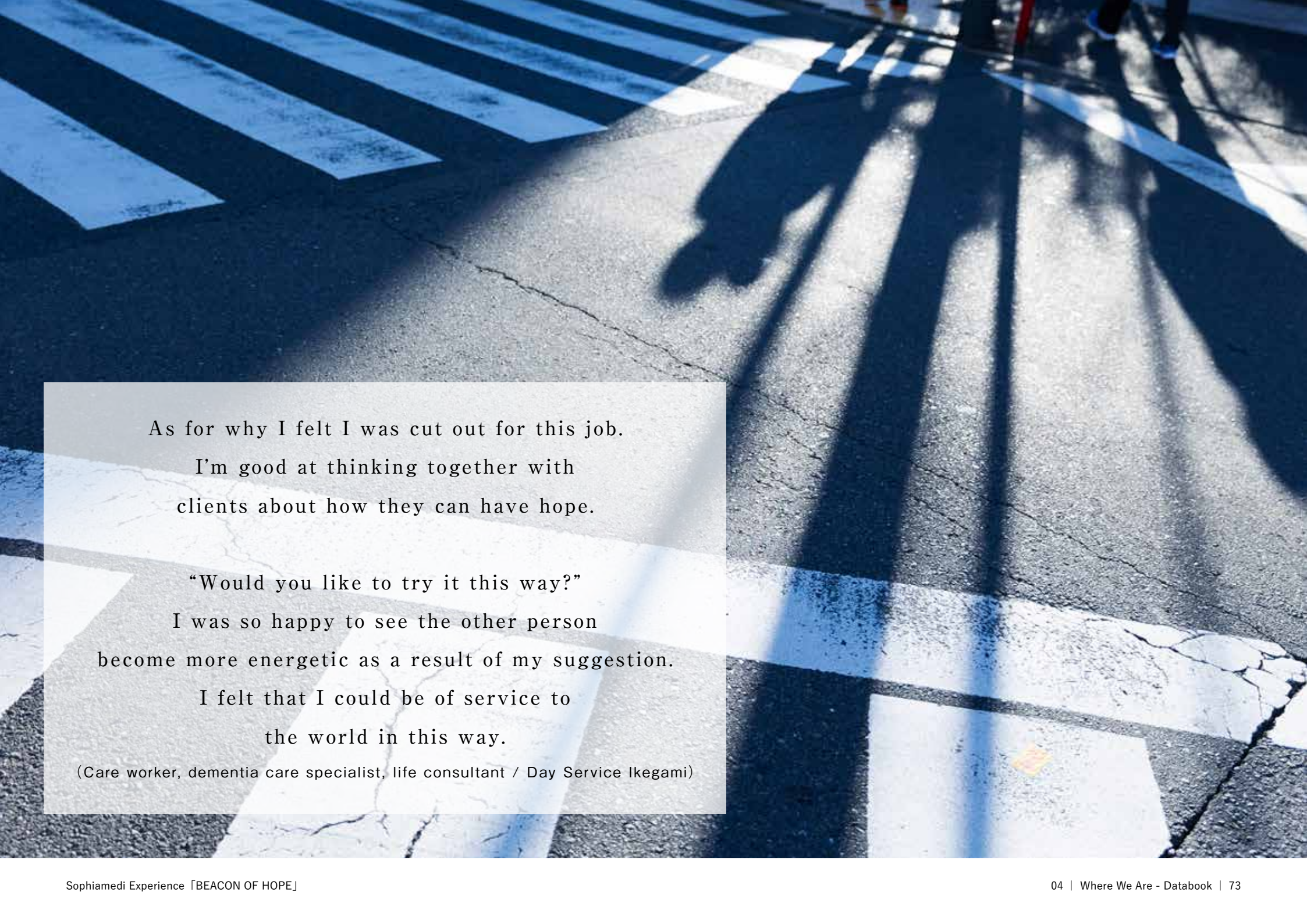
Kyodo

Jiyugaoka

■ Head Office

Tokyo

Gotanda



As for why I felt I was cut out for this job.

I'm good at thinking together with
clients about how they can have hope.

“Would you like to try it this way?”

I was so happy to see the other person
become more energetic as a result of my suggestion.

I felt that I could be of service to
the world in this way.

(Care worker, dementia care specialist, life consultant / Day Service Ikegami)

For me, “care for life” means
getting to know the client and
realizing their thoughts.

Due to illness or disability,
some people can no longer do the things
they used to be able to do and
are forced to suppress their thoughts and hold back.

Care managers have direct contact with their clients
only about once a month.

That’s why I think it’s a very precious time
to have the opportunity
to face the client’s “now” thoroughly.

(Care manager / Home care support office Mitaka)



A full-page background image showing a sunset over a vast sea of clouds. The sun is a bright, glowing orb on the horizon, casting a warm orange and yellow light across the sky and the clouds below. The clouds are layered and textured, appearing like a sea of white and grey. In the bottom right corner, there is a dark silhouette of a building or structure, possibly a lighthouse or a church tower, adding a sense of scale and location to the scene.

We believe that a person's home represents his or her entire life.

Because I am in a position to support a person
not only during nursing care but also throughout one's life,
I would like to build a relationship
where we cherish together what the person cherishes and
think together about what to do in the future.

That is how I feel.
(Nurse / Station Asagaya)

Sophiamedi Experience

BEACON OF HOPE



■ On the publication of this report

Sophiamedi has been publishing annual reports since last year in order to introduce our management policies, outcomes of our business activities, and medium to long-term value creation in an easy-to-understand manner to all stakeholders. In this report, we have produced this report to convey the voices of our clients and staff, the issues we are focusing on and the efforts we are making to resolve them, along with our business activities to realize our vision.

■ Note

This report contains statements about the future outlook and facts from the past and present. These statements are based on forecasts we made based on information currently available to us at the time this report was being prepared. As such, they may contain a certain amount of risk and uncertainty, and we would like to caution you not to place undue reliance on the information.

■ Period covered in this report

This report is based on the period from October 1, 2020 to September 30, 2021.

* Some statements may cover information from before and after this period when necessary.

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