Surname MRN						
Given Names						
Date of Birth Sex						
(Affix identification label here)						



## **Strategies to Support Care and Communication**

Please keep this form in a central place where staff can access it. If the individual is in hospital, place form on top of bed chart notes. The TOP 5 form should travel with the individual if transferred to a health care service or their home

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4.

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The Clinical Excellence Commission would like to acknowledge the Carer Support Unit, Central Coast Local Health District for the integration of their concept and materials to support the further uptake of the TOP 5 initiative. The Clinical Excellence Commission would also like to acknowledge the support of the HCF Health and Medical Research Foundation.



## **Identifying TOP 5 strategies**

As a staff member you should negotiate with the carer the TOP 5 strategies which could be most effective in the setting where the person is being cared for. When initiating a TOP 5 on a person with dementia/memory thinking problems, the following script can be used as a prompt to obtain strategies from carers.

The following questions are about the person that you care for and will assist with personalising their care.

- Are there things/situations that you know of that may cause distress?
   e.g. colours, topics, gender of staff, visitors
- If unsettled, are there words or actions that will help settle and calm?
  e.g. listening to music, relocation, reading and lighting, cup of tea, read the paper
- Are there any set routines that have been developed to help keep the person reassured? e.g., at bedtime, with meals, personal care, when taking medication
- Are there any repetitive questions or recurring issues that may need specific answers? What is the preferred answer?
- Is there somebody that might be called out for?
   This could be a person or a pet
- Are you aware of any signs or triggers that indicate a need or a want?
   e.g. fidgeting to indicate a need to go to the toilet