

### THE TURNIP

# THE TOOL FOR UNDERSTANDING RESIDENTS' NEEDS AS INDIVIDUAL PERSONS (TURNIP)

## **TURNIP**

#### ON A SCALE OF 1 TO 5 PLEASE ANSWER EVERY QUESTION WITH A

				Neither agree or disagree	Agree Agree completely		
Th	e care environment	1	2	3	4	5	
1.	The environment supports residents to express their personal identity.						
2.	The environment feels chaotic.						
3.	There is a homely feel to the place.						
4.	The environment supports personal choice.						
5.	It is hard for residents in this facility to find their way around.						
6.	There is a pleasant atmosphere.						
7.	Residents are able to access outside space as they wish.						
8.	I would like to live here if I had dementia.						
		Disagree completely	Disagree	Neither agree or disagree	Agree	Agree completely	
In	dividual attitudes	1	2	3	4	5	
9.	Social participation is important for people with dementia.						
10.	People with dementia have hopes.						
11.	People with dementia can have meaningful relationships.						
12.	It is important to know the life history of people with dementia.						
13.	People with dementia have ways of communicating what they want and don't want.						
14.	In dementia the body remains but the person is gone.						
15							
13.	People with dementia should be allowed to form sexual relationships.						

#### INSTRUCTIONS FOR USE

This tool provides the basis for enhancing person-centredness of facilities providing care for people with dementia. The package contains 39 statements about five domains central to personcentred care; the care environment, staff attitudes towards people with dementia, staff knowledge of dementia, the organisation of care, and the constituents of care provided. The individuals targeted for this educational package are firstly asked to decide to what extent they feel the statements correspond to their experiences of the facility, and to put a tick in the box for the alternative that comes closest to their experience. Secondly, each dimension and item in the package is to be used for reflective group discussions about the current facility, with an aim to identify areas for improvement.



© La Trobe University

This publication is copyright. Except as expressly provided in the *Copyright Act 1968* and the *Copyright Amendment* (*Digital Agenda*) *Act 2000*, no part of this publication may be reproduced, stored in any retrieval system or transmitted by any means (including electronic, mechanical, microcopying, photocopying, recording or otherwise) without written permission.

Requests for copyright permission to d.fetherstonhaugh@latrobe.edu.au ACEBAC, La Trobe University



## THE TURNIP THE TOOL FOR UNDERSTANDING RESIDENTS' NEEDS AS INDIVIDUAL PERSONS (TURNIP)

### **TURNIP**

Manufades of demonstra	Disagree completely	Disagree	_	Agree	Agree completely
Knowledge of dementia		2	3	4	5
17. Dementia reduces the experience of pain.					
18. Need driven behaviours are inevitable with dementia.					
19. People with dementia should always be oriented to reality.					
<ol> <li>People with dementia are as different from each other as any other groups of people who share a disease category.</li> </ol>					
21. There is often no alternative to using restraint.					
	Disagree completely	Disagree	Neither agree or disagree	Agree	Agree completely
The Care Organisation	1	2	3	4	5
22. We often discuss how to give person-centred care.					
23. It is necessary to hurry residents to accomplish all that has to be done.					
24. We have to get the work done before we can worry about a homelike environment.					
25. This organisation prevents me from providing person-centred care.					
26. We often evaluate whether or not the care provided is person-centred.					
27. Labels (e.g. wanderer and screamer) are used here to describe individuals.					
28. We are free to alter work routines based on residents' preferences.					
29. I simply do not have the time to provide person-centred care.					
30. I feel supported by the organisation I work in.					
	Disagree		Neither agree		Agree
The content of care	completely	Disagree 2	or disagree	Agree 4	completely 5
31. Residents are involved in care decisions when they can.					
32. We have formal team meetings to discuss residents' care.					
33. In my workplace residents are given opportunities to perform tasks according to their abilities.					
34. The life history of the residents is formally used in the care plans we use.					
35. Assessment of residents' needs is undertaken on a daily basis.					
36. Residents can wake up and start the day when they prefer.					
37. Residents have a variety of foods to choose from.					
38. Residents are offered the opportunity to be involved in individualised everyday activities.					
39. Residents can choose between interacting with others and being alone.					

The development of this tool has been supported by the Australian Government, La Trobe University, the J.O and J.R. Wicking Trust – Medical and Scientific Research Grants (ANZ Trustees), and Umea University.

