

Revision History

Date	Version	Description	Author
April 8, 2011	1.0	Initial publication	Elder Affairs Home Care Team
April 25, 2018	2.0	Updates to reflect changes in CDS Assessment	Elder Affairs Home Care Team

Administering and Documenting the Memory Loss Screen results:

What are the implementation requirements: ASAPs are required to administer the Mini-Cog to all consumers enrolled in any Home Care Program, with the exception of those consumers with a diagnosis related to a cognitive impairment*. The assessor must follow all instructions as outlined in the Mini-Cog screening tool.

Initial Screening Timelines:

- Begin using the Mini-Cog no later than May 1, 2011
- New intakes – within 6 months of enrollment
- Currently enrolled consumers –within 6 months
- All consumers must be screened by October 31, 2011

Re-screening Timelines:

- For those consumers who score 0-2 on the initial screen, do not repeat the screen, unless a cause other than ADRD is suspected. In this instance, the consumer must be re-screened when the temporary cause of the altered cognition has been resolved. Some examples of this are:
 - Reaction to medication
 - An acute illness, for example, a urinary tract infection
 - Any other temporary condition which has temporarily altered the consumer’s cognitive status
- For those consumers who score 3-5 on the initial screen, re-screen annually
- For those consumers where a screen has been deferred or the consumer has refused (dementia suspected), re-screen annually
- If a consumer exhibits signs of decreased cognitive functioning, the ASAP must re-screen, regardless of the length of time since the last screen.

*Consumers with a diagnosis related to a cognitive impairment (e.g., Alzheimer’s, vascular dementia) should not be screened (PI-11-01 attachment: Elder Affairs ADRD Standards 2-24-2011). The diagnosis should be identified in section J. of the CDS, as well as documented in the narrative and journal entry.

Examples of challenges which may present with the Mini Cog:

Word Recall:

- Language barriers –the Mini-Cog has been shown to be valid in a community sample of culturally, linguistically, and educationally heterogeneous older adults. Any language barrier must be accommodated by the use of an interpreter.
- Hearing impairments – to ensure optimal performance the consumers' hearing devices should be in place prior to the assessment/screen.

Clock Drawing:

- Visual impairments – consumers should wear clean eye glasses and use any magnification devices as needed. The room should have adequate lighting. If a consumer is blind or visually impaired to the extent that they cannot draw the clock, document that the consumer is unable to complete the clock drawing portion of the screen due to being visually impaired.
- Physical ability and dexterity impairments – consumer impairments will influence performance. The assessor must document if the consumer is unable to complete the clock drawing due to a physical limitation. Any adaptive equipment the consumer uses which may improve dexterity should be used.
- If the consumer has conceptual understanding of the clock, but has an impairment that renders him/her unable to physically draw the clock, it is permissible to assist by drawing the clock for them. The assessor should then ask the consumer to describe the placement of the hands for 11:10.

Factors to Consider:

The Alzheimer's Association has made the following recommendations:

Optimal time to conduct the Mini-Cog screen:

- The assessor may face challenges with deciding the optimal time for the consumer to complete the mini-cog screen.
 - It is important to establish a rapport with the consumer.
 - The screening should not be administered at the beginning of the assessment.
 - The screening will likely work best if administered after the mid point of the assessment; approximately two-thirds of the way through the assessment
 - Administering the screening at the end of the assessment might not make it easier to complete, as the consumer maybe tired and less willing to participate.
 - The assessor should determine when the screen would be best administered, in the middle or any time during the second half of the assessment.

If a consumer refuses the screening:

- Let the consumer know that asking questions about memory is part of the assessment for all consumers and if a person has memory concerns it is an important part of knowing how we can best help and serve them.

Sharing the results with the consumer:

- Unless specifically asked by the consumer, it is recommended that the results be shared at the conclusion of the assessment along with the discussion of other findings.
- It is recommended that the assessor ask the consumer if s/he has noticed any problems with his/her memory.
- Many people experience changes in their memory as they age; they may have noticed a problem but not sought help. (The assessor may also share with the consumer that memory problems may be caused by a variety of medical conditions such as medications, metabolic disturbance, or depression).
- Ask permission to make a referral to the consumer's PCP.

Consent:

Consumers sign an Applicant Consent & Disclosure Form at Intake and annually thereafter. ASAPs should otherwise follow their established procedures for consulting with consumers prior to making specific disclosures the consumer may object to.

Documenting the Mini Cog results in the CDS:

Memory Loss Screen, is located within Section B. Cognitive Status of the CDS-CM, and the Neurological Section of the CDS-RN, which consists of three questions (7640a, 7641b and 9459c).

Memory Loss Screen	7640 a	Indicate the date of the Memory Loss Screen	Yes																				
		<table border="1" style="margin: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td colspan="2" style="text-align: center;">Month</td> <td colspan="2" style="text-align: center;">Day</td> <td colspan="6" style="text-align: center;">Year</td> </tr> </table>											Month		Day		Year						
Month		Day		Year																			
7641 b	Indicate the score of the Memory Loss Screen	Yes																					
	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Not completed																						
	9459 c	If Memory Loss Screen was NOT COMPLETED, indicate the reason (select one)	Yes																				
		<input type="checkbox"/> Current diagnosis ADRD <input type="checkbox"/> Non-cognitive disability <input type="checkbox"/> Refused (dementia is suspected) <input type="checkbox"/> Refused (dementia not suspected) <input type="checkbox"/> Defer to later date																					

The screenshot shows a web form titled "B. Cognitive Status" with a sub-section "B. Memory Loss Screen".

- a. Indicate the date of the Memory Loss Screen**: A text input field with a calendar icon and the placeholder "Enter date".
- b. Indicate the score of the Memory Loss Screen**: A radio button selection menu with options: (Not Answered), 0, 1, 2, 3, 4, 5, and Not completed.
- c. If Memory Loss Screen was NOT COMPLETED, indicate the reason (select one)**: A radio button selection menu with options: (Not Answered), Current diagnosis ADRD, Non-cognitive disability, Refused (dementia is suspected), Refused (dementia not suspected), and Defer to later date.

After the screening tool has been administered the results must be recorded as follows:

1. **Question #7640a: Indicate the date of the Memory Loss Screen –**
 - Enter the date the screen was administered or attempted to be administered.
 - In each instance where a consumer either refuses the Memory Loss Screen or the Memory Loss Screen is deferred to a later date this date must be updated.

2. **Question #7641b: Indicate the score of the Memory Loss Screen –**
 - Enter the results (total score) from the administered screen.
 - One point for each of the 3 items [words] recalled
 - 0 points for unsuccessful recall of all three words
 - Two points for a successful clock drawing (circle, numbers and hands) or if the consumer cannot draw the clock but is able to conceptually explain the correct positions of the hands.
 - 0 points if they can neither draw nor conceptually explain the placement of the hands of the clock.
 - 0 points if consumer refuses to complete the screen and dementia is suspected – document the reason for refusal in the narrative.
 - Enter “Not Completed” if for any reason the screening is interrupted or unable to be completed, including if the consumer is refusing and dementia is not suspected – document the reason for refusal in the narrative.

3. **Question #9459 c: If Memory Loss Screen is NOT COMPLETED, indicate the reason (select one) –**
 - Enter an indication of the reason the Memory Loss Screen was NOT COMPLETED.
 - **Current diagnosis ADRD** - selected when a consumer already has a documented ADRD diagnosis.
 - **Non-cognitive disability** – selected when a consumer has a physical disability preventing them from completing the Memory Loss Screen.
 - **Refused (dementia is suspected)** – Refused when a consumer has refused completing the Memory Loss Screen, does not have a documented ADRD diagnosis, but ADRD is suspected.

- **Refused (dementia not suspected)** – Refused when a consumer has refused completing the Memory Loss Screen, does not have a documented ADRD diagnosis, and is not suspected to have ADRD.
- **Defer to later date** – selected when the Memory Loss Screen has not been completed at the OSA (e.g. visit was a Home Care Intake and not completed due to complexity of intake, Memory Loss Screen will need to be completed at next OSA)

Consumers who score 3-5 on the Mini-Cog screen must be re-screened annually. Consumers who are Deferred to a later date or Refused (dementia not suspected) must be re-screened annually.

ASAPs may implement their own business rules on when the annual Mini-Cog screen is to be administered. Elder Affairs does not require the Mini-Cog Screen be administered at the Annual Home Care Re-determination or Waiver Re-determination.

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