Memory & Cognition

About this Domain (Memory & Cognition)
To identify issues associated with dementia, developmental disabilities, brain injury or other conditions and to identify for assessment, treatment and services.

This domain includes screening tools to help identify the need for referrals for additional assessment and treatment. It is not the assessor’s role to render a medical diagnosis.

Functional Memory & Cognition

Does the person have a problem with cognitive functioning due to developmental disabilities or a related condition, which manifested itself during the developmental period (birth through age 21), by report or by review of psychological testing results?

- No
- Undetermined
- Yes – Due to developmental disabilities
  
Enter psychological testing results: __________  (Displays when this option is checked)

- Yes – Due to related conditions and Related Conditions Checklist (form DHS-3848A) has been completed
  
Enter psychological testing results: __________  (Displays when this option is checked)

Referral for testing:  (Displays when “Undetermined” is checked)

- Need referral
- Referral made – waiting for testing results

Does this person need assistance for increased vulnerability due to behaviors caused by a cognitive deficit?

- No
- Yes

(Next 2 questions display when “Yes” is checked)

Describe:

__________________________________________
Frequency of assistance needed:

- Less than weekly
- One time per week
- Two times per week
- Three times per week
- Three times per week but not daily
- Daily

Does the person have a documented diagnosis of brain injury or related neurological condition that is not congenital?

- No
- Yes

*(Next 4 questions display when “Yes” is checked)*

Choose one:

- Acquired or traumatic brain injury
- Degenerative or genetic disease that became symptomatic on or after the person’s 18th birthday

What is the diagnosis?

____________________________

The person has an assessed need for one or more of the following:

- Specialized provider with experience or expertise appropriate to meet the person’s cognitive or behavior impairments
- Higher amount of units or rate for services due to cognitive or behavior impairments
- Service only available through the BI Waiver, regardless of whether or not those needs are met by formal waiver services

- No
- Yes
Modified Rancho Los Amigos Level of Cognitive Functioning (Select One)

- I Person is completely unresponsive to stimuli
- II Person reacts inconsistently and non-purposefully to stimuli
- III Person responds specifically but inconsistently to stimuli and may follow simple commands
- IV Person is in a heightened state of activity with severely decreased ability to process information. Behavior is non-purposeful relative to the immediate environment.
- V Person appears alert and responds to simple commands fairly consistently. Agitation, which is out of proportion (but directly related to stimuli), may be evident.
- VI Person shows goal directed behavior but depends on external input for direction.
- VII Person goes through daily routine automatically, has absent to minimal confusion, but lacks insight.
- VIII Person is alert and oriented. Independence in the home and community has returned. Social, emotional and cognitive abilities may be decreased.

Is the person demonstrating problems with cognitive functioning in the home, school or work environment?

- No
- Yes
- Unsure

Explain: ________________________ (Displays when ‘Yes’ or ‘Unsure’ is checked)

Legend Table

| Cognitive Impairments: The first column in this table will list the type of cognitive impairment that is applicable. Each cell has a checkbox to select the impairment. | Severity: The second column in the table contains a drop down list to indicate the severity of the cognitive impairment. The choices in the dropdown list are:  
  - Mild  
  - Moderate  
  - Severe  
  - Very Severe  
  - Not Severe | Level of Support Required: The third column in the table contains a drop down list that indicates the level of support required to help with impairment. The choices in the dropdown list are:  
  - No Support Required  
  - Occasional Support  
  - Frequent Support  
  - Availability of 24-hour Support or Monitoring |

Last update: 6/12/2017
Assessment Domains

If ‘Yes’ or ‘Unsure’ was selected, the following questions will be displayed:

Cognitive Impairments – Please check all that apply:

<table>
<thead>
<tr>
<th>Required</th>
<th>Severity</th>
<th>Level of Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Attention/Concentration</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Awareness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Communication</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Judgment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Learning</td>
<td></td>
<td></td>
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<tr>
<td>☐ Memory</td>
<td></td>
<td></td>
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<tr>
<td>☐ Perception</td>
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<tr>
<td>☐ Planning</td>
<td></td>
<td></td>
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<tr>
<td>☐ Problem Solving</td>
<td></td>
<td></td>
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<tr>
<td>☐ Task Completion</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Notes/Comments:

__________________________________________________________________________

Functional Memory and Cognition has been reviewed and updated?
☐ Yes
Mental Status Evaluation

Ask person only. Score 1 for each incorrect response. In scoring, a “No Response” is treated as incorrect. A correct response is 0. For the memory phrase, have the person repeat the phrase twice before continuing.

Now, I’m going to read you a list of questions. These are questions that are often asked in interviews like this and we are asking them the same way to everyone. Some may be easy and some may be difficult. Would this be alright?

- Yes
- Refused (score 29)
- N/A (score 30)

If ‘Yes’ was selected, the following questions will be displayed:

Let’s start with today’s date.

Orientation-Memory-Concentration Test (Katzman et al., 1983)

<table>
<thead>
<tr>
<th>Items</th>
<th>Maximum Errors</th>
<th>Score</th>
<th>Weight</th>
<th>Weighted Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. What year is it now?</td>
<td>1</td>
<td>________</td>
<td>× 4 =</td>
<td>________</td>
</tr>
<tr>
<td>2. What month is it now?</td>
<td>1</td>
<td>________</td>
<td>× 3 =</td>
<td>________</td>
</tr>
<tr>
<td>Memory phrase: Repeat this phrase after me… John Brown, 42 Market Street, Chicago</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. About what time is it?</td>
<td>1</td>
<td>________</td>
<td>× 3 =</td>
<td>________</td>
</tr>
<tr>
<td>4. Count backwards 20 to 1</td>
<td>2</td>
<td>________</td>
<td>× 2 =</td>
<td>________</td>
</tr>
<tr>
<td>5. Say the months in reverse order*</td>
<td>2</td>
<td>________</td>
<td>× 2 =</td>
<td>________</td>
</tr>
<tr>
<td>6. Repeat the memory phrase (Once)</td>
<td>5</td>
<td>________</td>
<td>× 2 =</td>
<td>________</td>
</tr>
</tbody>
</table>

TOTAL WEIGHTED SCORE

[Table data not visible in the image]
INTERPRETATION:
A score of 10 or more is consistent with the presence of dementia, excluding REFUSED or NA.

If score is 10 or higher, complete the following:

a. What type of support does the person need in the home for assistance with activities that require remembering, decision-making or judgment?
   - Someone else needs to be with the person always, to observe or provide supervision.
   - Someone else needs to be around always, but they only need to check on the person now and then.
   - Sometimes the person can be left alone for an hour or two.
   - Sometimes the person can be left alone for most of the day.
   - The person can be left alone all day and all night, but someone needs to check in on the person every day.
   - The person can be left alone without anyone checking in.

b. What type of support does the person need to help with remembering, decision-making, or judgment when away from home?
   - The person cannot leave home, even with someone else, because of behavioral difficulties (becomes very confused or agitated during outings, engages in inappropriate behavior, becomes aggressive, etc.).
   - Someone always needs to be with the person to help with remembering, decision making or judgment when away from the home.
   - The person can go places alone as long as they are familiar places.
   - The person does not need help going anywhere.

Notes/Comments:

Mental Status Evaluation has been reviewed and updated?

☐ Yes
Assessment Domains

Referrals & Goals (Memory & Cognition)

What is important to the individual?

Referrals Needed:

☐ Assistive Technology
☐ Cognitive Diagnostic Evaluation (Used for Rule 185)
☐ Neuropsychological Assessment
☐ Occupational Therapist
☐ Ombudsman
☐ Primary Health Care Provider
☐ Other
☐ Other

Assessed Needs and Support Plan Implications

Referrals & Goals (Memory & Cognition) have been reviewed and updated?

☐ Yes