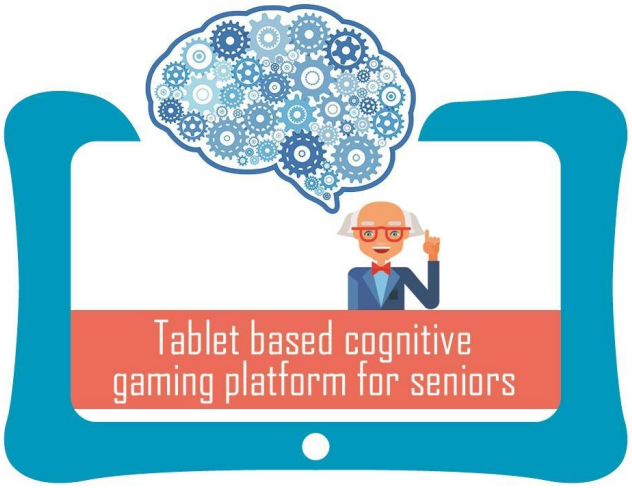
Co-funded by the Erasmus+ Programme of the European Union

Tablet-Based Cognitive Gaming Platform for Seniors

2018-1-TR01-KA204-058258



IO3: Accessible learning platform for trainers

A4: Cognitive skills development assessment tool

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Cognitive skills development assessment tool

1. Entrance short test

You may give this entrance short test to the adult, who is participating in the piloting phase. Please ask him/her to answer to the questions below. It will help us to support his/her better acquisition of digital competence and further support for memory conservation by involvement in the project activities.

Trainer: Hello. Let me know you better. Can you please tell me if you have experienced problems with the following?

1.	Repeating or asking the same thing over and over?	Not at all	Sometimes	Frequently	Does not apply
2.	Remembering appointments, family occasions, holidays?	Not at all	Sometimes	Frequently	Does not apply
3.	Using bank card, paying bills, calculating the bill?	Not at all	Sometimes	Frequently	Does not apply
4.	Shopping independently (e.g., for clothing or groceries)?	Not at all	Sometimes	Frequently	Does not apply
5.	Taking medications according to instructions?	Not at all	Sometimes	Frequently	Does not apply
6.	Getting lost while walking or driving in familiar places?	Not at all	Sometimes	Frequently	Does not apply

Scoring: Not at all = 0 **Total Score:** _____

Sometimes = 1

Frequently = 2

Score Interpretation: A score of 3 or more should prompt the consideration of a more detailed evaluation.

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2. **Pre-test geriatric scale**

Sometimes seniors experience issues with memory, attention, understanding and reflection due to depression situations. This tool will help you to identify if your senior learner is depressed or not.

1.	Are you basically satisfied with your life?		Yes	No
2.	Have you dropped many of your activities and interests?		Yes	No
3.	Do you feel that your life is empty?	Yes	No	
4.	Do you often get bored?		Yes	No
5.	Are you in good spirits most of the time?		Yes	No
6.	Are you afraid that something bad is going to happen to you?		Yes	No
7.	Do you feel happy most of the time?		Yes	No
8.	Do you often feel helpless?		Yes	No
9.	Do you prefer to stay at home, rather than going out and doing new things?		Yes	No
10.	Do you feel you have more problems with memory than most?	Yes	No	
11.	Do you think it is wonderful to be alive now?		Yes	No
12.	Do you feel pretty worthless the way you are now?		Yes	No
13.	Do you feel full of energy?		Yes	No
14.	Do you feel that your situation is hopeless?		Yes	No
15.	Do you think that most people are better off than you are?		Yes	No

Score: _____ (number of "depressed" answers)

Scoring:

- "Depressed" answers are:
- "No" on numbers 1, 5, 7, 11, 13
- "Yes" on numbers 2, 3, 4, 6, 8, 9, 10, 12, 14, 15
- 1–4 No cause for concern
- 5–9 Strong probability of depression
- 10+ Indicative of depression

- Five or more depressed responses warrants further evaluation.

3. **Functional activities questionnaire (FAQ)**

The FAQ is an informant-based measure of functional abilities. Informants provide performance ratings of the target person on ten complex higher-order activities. This will further help you to estimate the cognitive functions level of your senior learner.

1. ____Writing checks, paying bills, balancing checkbook

2. ____Assembling tax records, business affairs, or papers

3. ____Shopping alone for clothes, household necessities, or groceries

4. ____Playing a game of skill, working on a hobby

5. ____Heating water, making a cup of coffee, turning off stove

6. ____Preparing a balanced meal

7. ____Keeping track of current events

8. ____Paying attention to, understanding, discussing a TV show, book, magazine

9. ____Remembering appointments, family occasions, holidays, medications

10. ____Travelling out of neighbourhood, driving, arranging to take buses

Total _____

Score calculation:

The levels of performance assigned range from dependence to independence and are rated as follows.

- Dependent = 3
- Requires assistance = 2
- Has difficulty, but does by self = 1
- Normal = 0

Two other response options can also be scored.

- Never did (the activity), but could do now = 0
- Never did, and would have difficulty now = 1

Score interpretation:

A total score for the FAQ is computed by simply summing the scores across the 10 items. Scores range from 0 to 30. A cut point of 9 (dependent in 3 or more activities) is recommended.

4. Problem behaviour assessment

If you would like to conduct more in depth analysis of the problem behaviour of your senior learner, you may indicate this by completing with him/her the following assessment form.

Trainer: Please indicate the best response for each behaviour listed using the following scale. There are no right or wrong answers.

- Most or all of the time = 3
- Often = 2
- Sometimes = 1
- None of the time = 0

How often in the past four weeks did the patient:

1. ____act confused?
2. ____talk or mumble to him/herself?
3. ____repeat the same thing over and over?
4. ____hear or see things that were not there?
5. ____forget the names of his/her family or close friends?
6. ____forget the right words to use?
7. ____yell or swear at people?
8. ____interfere or offer unwanted advice?
9. ____act restless or agitated?
10. ____act fearful without good reason?
11. ____complain about or criticize things?
12. ____show inappropriate sexual behaviour?
13. ____wander outside the house?
14. ____refuse to be left alone?

Cognitive Score _____ (Sum of items 1–6)

Behaviour Score _____ (Sum of items 7–14)

Cognitive symptom scores greater than 7 may indicate heightened risk of cognitive problems and may warrant further clinical investigation by professionals and support by families. The presence of any behaviour symptoms may warrant further investigation, with values greater than 2 indicating heightened risk.

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