Appendix M

Complete only if the participant is available to answer. Skip if only the carer is available
Please ask as many questions as possible within the participants tolerance.
Please do NOT help the participant – if they cannot answer (for whatever reason) then score as Incorrect.

The assessment can stop at any point, but preferably where indicated, if the participant is willing or unable to continue.
When the assessment has stopped, any remaining questions can be marked 'not applicable'.

Is the participant present to answer these questions?   Yes / No
If the participant is not present than answer no and do not complete the form

Participant vital status?   Died / Alive

Presence of severe dysphasia?

☐ 0 = no aphasia; normal.

☐ 1 = Mild-to-moderate asphasia; some obvious loss of fluency or facility of comprehension, without significant limitation on ideas expressed or form of expression. Reduction of speech and/or comprehension, however, makes conversation about provided materials difficult or impossible. For example, examiner can identify picture or naming card content from patient's response.

☐ 2 = Severe aphasia; all communication is through fragmentary expression; great need for inference, questioning, and guessing by the listener. Range of information that can be exchanged is limited; listener carries burden of communication. Examiner cannot identify materials provided from patient response.

☐ 3 = Mute, global aphasia; no usable speech or auditory comprehension.

☐ 3 = Coma/Unresponsive. ** an exclusion criteria **

Is this form being filled in face-to-face or by telephone or postal letter/email?

☐ Face-to-face
☐ Telephone
☐ Postal

4AT

(4AT) Alertness	
This includes patients who may be markedly drowsy difficult to rouse and/or obviously sleepy during assessment) or agitated/hyperactive. Observe the patient. If asleep, attempt to wake with speech or gentle touch on shoulder.	◯ 0: Normal (fully alert, but not agitated, throughout assessment) ◯ 0: Mild sleepiness for < 10 seconds after waking, (eg. then normal ◯ 4: Clearly abnormal

4AT   - Abbreviated Mental Test - 4
Questions, ask the participant these questions:

- Age,

- Date of birth,

- Place (name of the hospital or building),

- Current year.

0: No mistakes
1: 1 mistake
2: 2 or more mistakes/untestable
○
○

○
○

4AT   - Attention: Months of the Year
Backwards.

Ask the participant:

"Please tell me the months of the year in backwards order, starting at December."

To assist initial understanding one prompt of

"What is the month before December?" is permitted.

○ 0: Achieves 7 months or more correctly
○ 1: Starts but scores < 7 months / refuses to start 2:
○ Untestable (cannot start because unwell, drowsy, inattentive)

Montreal Cognition Assessment (MoCA)

Tell the participant:
"This is a memory test. I am going to read a list of words that you will have to remember now and later on. Listen carefully. When I am through, tell me as many words as you can remember. It doesn't matter in what order you say them."

FACE VELVET CHURCH DAISY RED

FACE
☐ 0 - Wrong
☐ 0 – Correct

VELVET
☐ 0 - Wrong
☐ 0 – Correct

CHURCH
☐ 0 - Wrong
☐ 0 – Correct

DAISY
☐ 0 - Wrong
☐ 0 – Correct

RED
☐ 0 - Wrong
☐ 0 – Correct

Now tell the participant:

"I am going to read the same list for a second time. Try to remember and tell me as many words as you can, including words you said the first time."

Then tell the participant:
"I will ask you to recall those words again later in the test."

Montreal Cognition Assessment (MoCA) - Orientation

Ask the participant the date today (year, month, exact date, day of the week) and the name of the place (name of

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hospital/clinic/office) and city they are in.

Score 1 point for each item correctly answered.

What is today's date?
- ☐ 0 - Wrong
- ☐ 1 – Correct

What is the month?
- ☐ 0 - Wrong
- ☐ 1 – Correct

What is the year?
- ☐ 0 - Wrong
- ☐ 1 – Correct

What season are we in?
- ☐ 0 - Wrong
- ☐ 1 – Correct

Where are we? Hospital or residence street name/
- ☐ 0 - Wrong
- ☐ 1 – Correct

Where are we? City or town name?
- ☐ 0 - Wrong
- ☐ 1 – Correct

Verbal fluency. **Say to the participant, "***Tell me as many words as you can think of that begin with a certain letter of the alphabet that I will tell you in a moment. You can say any kind of word you want, except for proper nouns (like Bob or Boston), numbers, or words that begin with the same sound but have a different suffix, for example, love, lover, loving. I will tell you to stop after one minute. Are you ready? Now tell me as many words as you can think of that begin with the letter F.***"**

Record here the number of distinct words the participant says:

Montreal Cognition Assessment (MoCA) - Orientation

Delayed Recall
Ask the participant to recall the 5 words that they were asked to remember earlier. Score 1 point for each of the words correctly recalled spontaneously without any cues.

FACE
- ☐ 0 - Wrong
- ☐ 1 – Correct

VELVET
- ☐ 0 - Wrong
- ☐ 1 – Correct

CHURCH
- ☐ 0 - Wrong
- ☐ 1 – Correct

DAISY
- ☐ 0 - Wrong
- ☐ 1 – Correct

RED
- ☐ 0 - Wrong
- ☐ 1 – Correct

Montreal Cognitive Assessment (MoCA)

Read the below list of numbers/letters at a rate of 1 per second.

2, 1, 8, 5, 4

Ask the participant to repeat the following numbers in **forward** order:

☐ 0 correct
☐ 1 correct
☐ 2 correct
☐ 3 correct
☐ 4 correct
☐ 5 correct

Read the below list of numbers/letters at a rate of 1 per second.

7, 4, 2

Ask the participant to repeat the following numbers in **reverse** order:

☐ 0 correct
☐ 1 correct
☐ 2 correct
☐ 3 correct

Ask the participant to tap with their hand at each letter A as you read the following list.
No points if 2 or more errors. Score 1 if only one error or totally correct.

F B A C M N A A J K L B A F A K D E A A A J A M O F A A B

☐ 0 - Wrong
☐ 1– Correct

Ask the participant, "Please take 7 away from 100. Now continue to take 7 away from what you have left over until I ask you to stop."
If the participant makes a mistake, carry on and check the subsequent answer (e.g. for 93, 84, 77, 70, 63 there are 4 correct subtractions).

First subtraction (normally 93)
☐ 0 - Wrong
☐ 1– Correct

Second subtraction (normally 86)
☐ 0 - Wrong
☐ 1– Correct

Third subtraction (normally 79)
☐ 0 - Wrong
☐ 1– Correct

Fourth subtraction (normally 72)
☐ 0 - Wrong
☐ 1– Correct

Fifth subtraction (normally 65)
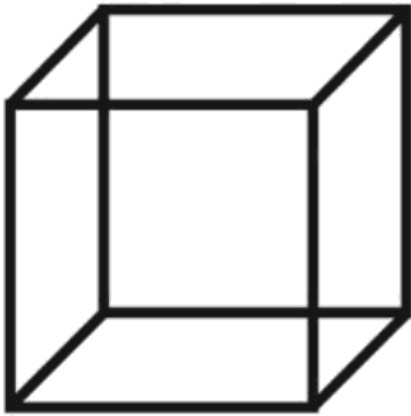☐ 0 - Wrong
☐ 1– Correct

Wire Cube

Ask the participant to copy the below diagram, as accurately as they can.
One point is allocated for a correctly executed drawing.
- Drawing must be three-dimensional
- All lines are drawn
- No line is added

- Lines are relatively parallel and their length is similar
(Rectangular prisms are accepted)

☐ Wrong answer
☐ Correct answer

Clock
Ask the participant to draw a lock, put in all the numbers, and set the time to 10 past 11.
Please mark the drawing on the two below factors

Contour – The clock must be a circle with only minor distortion acceptable (e.g. a slight imperfection on closing the circl)
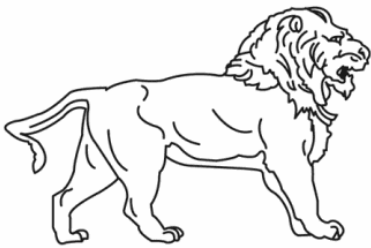
☐ Wrong answer
☐ Correct answer

Hands – There must be two hands jointly indicating the correct time; the hour hand must be clearly shorter than the minute hand; hands must be centred within the clock face with their junction close to the clock centre.
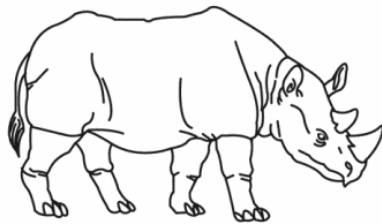
☐ Wrong answer
☐ Correct answer

Montreal Cognitive Assessment (MoCA) – Naming

Beginning on the left point to each figure and say to the participant: *"Tell me the name of this animal"*
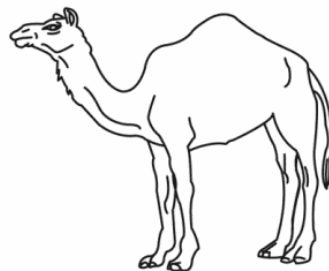

Picture 1 (left)

☐ Wrong answer
☐ Correct answer

Picture 2 (middle)

☐ Wrong answer
☐ Correct answer

Picture 3 (right)

☐ Wrong answer
☐ Correct answer

Montreal Cognitive Assessment (MoCA) – Language

Read the following sentences to the participant and ask them to repeat exactly what you say.
Score 1 point for each sentence correctly repeated. Repetition must be exact.

"I only know that John is the one to help today."

       ☐ 0 - Wrong answer
       ☐ 1 - Correct answer

"The cat always hid under the couch when dogs were in the room."

       ☐ 0 - Wrong answer
       ☐ 1 - Correct answer

Montreal Cognitive Assessment (MoCA) – Abstraction

Ask the participant the similarity between 2 words e.g. for banana and orange the answer is fruit.
Score 1 point for each correct answer.

What is the similarity between train and bicycle?
(Correct answer = transport)

       ☐ 0 - Wrong answer
       ☐ 1 - Correct answer

What is the similarity between watch and ruler?
(Correct answer = measure)

       ☐ 0 - Wrong answer
       ☐ 1 - Correct answer

Montreal Cognitive Assessment (MoCA) – Alternating Trail Making

Ask the participant to "Please draw a line, going from a number to a letter in ascending order. Begin here [point to (1)] and draw a line from 1 then to A then to 2 and so on. End here [point to (E)]."

Allocate one point if the subject successfully draws the following pattern: 1 –A- 2- B- 3- C- 4- D- 5- E, without drawing any lines that cross. Any error that is not immediately self-corrected earns a score of 0.

       ☐ 0 - Incorrect
       ☐ 1 - Correct
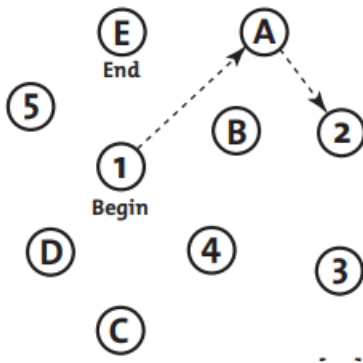
Patient Health Questionnaire (PHQ)

Ask the participant *"Over the **last 2 weeks**, how often have you been bothered by any of the following problems?"*

Little interest or pleasure in doing things

       ☐ Not at all
       ☐ Several days
       ☐ More than half the days
       ☐ Nearly every day

Feeling down, depressed, or hopeless

    ☐ Not at all
    ☐ Several days
    ☐ More than half the days
    ☐ Nearly every day

Generalized Anxiety Disorder (GAD)

Ask the participant *"Over the **last 2 weeks**, how often have you been bothered by any of the following problems?"*

Feeling nervous, anxious or on edge?

    ☐ Not at all
    ☐ Several days
    ☐ More than half the days
    ☐ Nearly every day

Not being able to stop or control worrying?

    ☐ Not at all
    ☐ Several days
    ☐ More than half the days
    ☐ Nearly every day

Brief Fatigue Inventory (BFI)

Please ask the participant the following statement:

Throughout our lives, most of us have times when we feel very tired or fatigued. Have you felt unusually tired or fatigued since your stroke?

    ☐ Yes
    ☐ No

Telephone Interview for Cognition Status (TICS-m)

Say to the participant, "I am going to read you a list of 10 words. Please listen carefully and try to remember them. When I am done, tell me as many as you can in any order. Ready?"

Cabin, Pipe, Elephant, Chest, Silk, Theatre, Watch, Whip, Pillow, Giant

"Now, tell me all of the words that you can remember."

Cabin
    ☐ Wrong answer
    ☐ Correct answer
Pipe
    ☐ Wrong answer
    ☐ Correct answer
Elephant
    ☐ Wrong answer
    ☐ Correct answer
Chest
    ☐ Wrong answer
    ☐ Correct answer
Silk
    ☐ Wrong answer
    ☐ Correct answer
Theatre
    ☐ Wrong answer
    ☐ Correct answer
Watch
    ☐ Wrong answer
    ☐ Correct answer

Pillow

        ☐ Wrong answer
        ☐ Correct answer

Giant

        ☐ Wrong answer
        ☐ Correct answer

Telephone Interview for Cognition Status (TICS-m) - Comprehension

What do people usually use to cut paper?
(Correct answer = scissors)

        ☐ Wrong answer
        ☐ Correct answer

What is the prickly green plant found in the desert?
(Correct answer = cactus)

        ☐ Wrong answer
        ☐ Correct answer

What is the name of the reigning monarch/president?

        ☐ Wrong answer
        ☐ Correct answer

What is the surname of the current Prime Minister/Chancellor?

        ☐ Wrong answer
        ☐ Correct answer

What is the opposite direction to East?

        ☐ Wrong answer
        ☐ Correct answer

Now ask the participant if they can remember the 10 words given earlier

Cabin

        ☐ Wrong answer
        ☐ Correct answer

Pipe

        ☐ Wrong answer
        ☐ Correct answer

Elephant

        ☐ Wrong answer
        ☐ Correct answer

Chest

        ☐ Wrong answer
        ☐ Correct answer

Silk

        ☐ Wrong answer
        ☐ Correct answer

Theatre

        ☐ Wrong answer
        ☐ Correct answer

Watch

        ☐ Wrong answer
        ☐ Correct answer

Pillow

        ☐ Wrong answer
        ☐ Correct answer

Giant

        ☐ Wrong answer
        ☐ Correct answer

Free Cognition Questions

Can you tell me anything that's in the news recently?

☐ Wrong answer
☐ Correct answer

Where are we? Hospital ward name or residence name/number?

☐ Wrong answer
☐ Correct answer

Spell 'Plate' back wards
Check first they can spell 'plate' (correct if wrong) then ask to spell it backwards.

First letter – E

☐ Wrong answer
☐ Correct answer

Second letter – T

☐ Wrong answer
☐ Correct answer

Third letter – A

☐ Wrong answer
☐ Correct answer

Fourth letter – L

☐ Wrong answer
☐ Correct answer

Fifth letter – P

☐ Wrong answer
☐ Correct answer

Repeat 5 words:
watch, car, scarf, pen, house.
Let the participant repeat those words up to 3 times. He/she will be asked to recall them shortly.

❶ watch ❷ car ❸ scarf ❹ pen ❺ house

No score, record responses, allow up to 3 attempts.

What are the 5 memorised words?
Record responses
Score 1 point for each correct answer: watch, car, scarf, pen, house

☐ 0 correct
☐ 1 correct
☐ 2 correct
☐ 3 correct
☐ 4 correct
☐ 5 correct

Name ear and fingernail
Get the patient to point to ear then fingernail
Score 1 point for each correct answer

☐ 0 correct
☐ 1 correct
☐ 2 correct

Name as many different animals as you can in 1 minute
Time one minute and record the responses. Do not count different breeds of the same animal (e.g. corgi, spaniel, cockapoo, Alsation etc).

Record here the number of different animals the participant named

Repeat this sentence "Don't beat about the bush"

☐ Not repeated correctly
☐ Repeated correctly

Write a sentence
Sentence needs to be understandable – ignore minor grammatical and spelling errors; score 1 if fully correct.

☐ Sentence is incorrect
☐ Sentence is correct

Free Cognition Questions – Executive Function

These questions are to test the person's ability to plan and describe sequences. Scoring is based on clinical judgement, non-leading clarifying questions may be asked if answers are tangential/circumstantial.

You have bought a birthday card and want to send it by post – tell me how you would do it?
Score 0 = Incomplete answer (i.e. the card would not arrive)
Score 1 = Complete enough for the card to arrive

☐ 0
☐ 1

If you were going to take a bus (or train) what would you need?
Score 0 = if they fail to mention ticket or bus pass
Score 1 = if answer indicates need for a ticket or bus pass

☐ 0
☐ 1

Could you tell me how you would make a cup of ta or coffee for yourself?
Score 0 = if answer does not lead to a drinkable cup of tea/coffee
Score 1 = if answer leads to drinkable cup of tea/coffee

☐ 0
☐ 1

If you discovered a fire at home, what would you do?
Score 0 = if answer is inappropriate and indicates the person would NOT be safe in their response.
Score 1 = if answer indicates the person would be appropriate and safe in their response.

☐ 0
☐ 1

Could you tell me the steps you took in order to get dressed as you are today?
Score 0 = incomplete and seems inconsistent with the clothing they are wearing
Score 1 = Plausible story, consistent with the clothes they are wearing

☐ 0
☐ 1

Telephone Mini-Mental State Exam (t-MMSE)

Which country are you living in?
☐ Wrong answer
☐ Correct answer

Which district are you living in?
☐ Wrong answer
☐ Correct answer

Tell the participant: "I'm going to give you three words and I'd like you to repeat after me: Apple, Table, Coin"

Name 'apple'
☐ Wrong answer
☐ Correct answer
Name 'table'
☐ Wrong answer
☐ Correct answer
Name 'coin'

□ Wrong answer
□ Correct answer

After they have repeated the words successfully, say "Try to remember those because I'm going to ask you for them"

Ask the participant if they can remember the three words given earlier?

Name 'apple'
□ Wrong answer
□ Correct answer
Name 'table'
□ Wrong answer
□ Correct answer
Name 'coin'
□ Wrong answer
□ Correct answer

Ask the participant to repeat, "No ifs, ands or buts"
Only score 1 if exactly correct
□ Wrong answer
□ Correct answer

What is the thing called that you are speaking into as you talk to me?
(Correct answer = phone)
□ Wrong answer
□ Correct answer

Did the participant answer all telephone Mini-Mental State Exam (t-MMSE) questions? If not why?
□ Completed
□ Tired
□ Anxiety
□ Language problems
□ Cognitive issues
□ Other

Telephone Interview Cognition Scale-M (TICS-M)

Complete this section if the participant is available to answer. Skip is only the carer is available.
Score 1 for each correct answer.
You must not help the participant answer these questions. Only record the answers given.

What is the time of day (within one hour)?
□ Wrong answer
□ Correct answer

6-item Cognition Impairment Test (6-CIT)

Please do NOT help the participant – if they cannot answer (for whatever reason) then score as incorrect.
Give the resident an address phrase to remember with 5 components – John, Smith, 42, High St, Bedford.

Say the months of the year in reverse.
□ Correct
□ One error
□ More than one error

Repeat address phrase.
□ All correct
□ One error
□ Two errors
□ Three errors
□ Four errors

☐ All wrong

Clinical Frailty Score

Select <u>one</u> box which best applies to the participant

1 Very Fit – People who are robust, active, energetic and motivated. These people commonly exercise regularly. They are among the fittest for their age. ☐

2 Well – People who have **no active disease symptoms** but are less fit than category 1. Often, they exercise or are very **active occasionally**, e.g. seasonally. ☐

3 Managing Well – People whose **medical problems are well controlled,** but are **not regularly active** beyond routine walking. ☐

4 Vulnerable – While **not dependent** on others for daily help, often **symptoms limit activities**. A common complaint is being "slowed up", and/or being tired during the day. ☐

5 Mildly Frail – These people often have **more evident slowing**, and need **help in high order IADLs** (finances, transportation, heavy housework, medications). Typically, mild frailty progressively impairs shopping and walking outside alone, meal preparation and housework. ☐

6 Moderately Frail – People need **help with all outside activities** and with keeping house. Inside, they often have problems with stairs and need **help with bathing** and might need minimal assistance (cuing, standby) with dressing. ☐

7 Severely Frail – **Completely dependent for personal care**, from whatever cause (physical or cognitive). Even so, they seem stable and not at high risk of dying (within ~ 6 months). ☐

8 Very Severely Frail – Completely dependent, approaching the end of life. Typically, they could not recover even from a minor illness. ☐

9.Terminally Ill - Approaching the end of life. This Participating Sites: category applies to people with a life expectancy <6 months, who are not otherwise evidently frail. ☐

Zung Depression Scale

Please explain to the participant that this is a scale and that there are 4 possible answers.

- Seldom or never
- Some of the time
- Good part of the time
- Most of the time

Read the questions below and ask them to answer nearest to their present mood. You may have to read the options to them several times.

Please record the answer for their **mood today**, not how they have felt since the stroke.

I1. I feel down-hearted and blue ☐ Seldom or never

☐ Some of the time

☐ Good part of the time

☐ Most of the time

2. I have trouble sleeping at night

☐ Seldom or never

☐ Some of the time

☐ Good part of the time

☐ Most of the time

3. Morning is when I feel best

☐ Seldom or never

☐ Some of the time

☐ Good part of the time

☐ Most of the time

4. I can eat as much as I used to

☐ Seldom or never

☐ Some of the time

☐ Good part of the time

☐ Most of the time

5. I get tired for no reason

☐ Seldom or never

☐ Some of the time

☐ Good part of the time

☐ Most of the time

6. I find it difficult to make decisions

☐ Seldom or never

☐ Some of the time ☐ Good part of the time

☐ Most of the time

7. I feel hopeful about the future

☐ Seldom or never

☐ Some of the time

☐ Good part of the time

☐ Most of the time

8. I feel that I am useful and needed

☐ Seldom or never

☐ Some of the time

☐ Good part of the time

☐ Most of the time

9. My life is somewhat empty

☐ Seldom or never

☐ Some of the time

☐ Good part of the time

☐ Most of the time

10. I still enjoy the things I used to do

☐ Seldom or never

☐ Some of the time

☐ Good part of the time

☐ Most of the time

Stroke Impact Scale (SIS)

Please ask the participant the following questions:

In the past week, how would you rate the strength of your leg that was most affected by the stroke?
　　　☐ A lot of strength
　　　☐ Quite a bit of strength
　　　☐ Some strength
　　　☐ A little strength
　　　☐ No strength at all

In the past week, how difficult was it for you to think quickly?
　　　☐ Not difficult at all
　　　☐ A little difficult
　　　☐ Somewhat difficult
　　　☐ Very difficult
　　　☐ Extremely difficult

In the past week, how often did you feel that you have nothing to look forward to?
　　　☐ None of the time
　　　☐ A little of the time
　　　☐ Some of the time
　　　☐ Most of the time
　　　☐ All of the time

In the past week, how difficult was it for you to understand what was being said to you in a conversation?
　　　☐ Not difficult at all
　　　☐ A little difficult
　　　☐ Somewhat difficult
　　　☐ Very difficult
　　　☐ Extremely difficult

In the past 2 weeks, how difficult was it to do light household tasks/chores (e.g. dusk make a bed, take out rubbish, do the dishes)?
　　　☐ Not difficult at all
　　　☐ A little difficult
　　　☐ Somewhat difficult
　　　☐ Very difficult
　　　☐ Extremely difficult

In the past 2 weeks, how difficult was it for you to walk without losing your balance?
　　　☐ Not difficult at all
　　　☐ A little difficult
　　　☐ Somewhat difficult
　　　☐ Very difficult
　　　☐ Extremely difficult
　　　☐ Could not do at all

In the past 2 weeks, how difficult was it to use your hand that was most affected by your stroke to pick up a coin?
　　　☐ Not difficult at all
　　　☐ A little difficult
　　　☐ Somewhat difficult
　　　☐ Very difficult
　　　☐ Extremely difficult
　　　☐ Could not do at all

During the past 4 weeks, how much of the time have you been limited in your social activities?

☐ None of the time
☐ A little of the time
☐ Some of the time
☐ Most of the time
☐ All of the time

Clinical Diagnosis of dementia and limited care home admission

E1. R4VaD 4 level: Clinical diagnosis of dementia   ○ Yes   ○ No or Unknown

Clinical diagnosis made independent of study Any clinical diagnosis of dementia made by memory clinic (or equivalent, this would include primary care) Any recording of dementia on death certification Any prescription of cholinesterase inhibitor or memantine

E2. R4VaD 7 level: Most limited function care-home admission   ○ Yes   ○ No   ○ Not known

If you have stopped the assessment before the end, or skipped questions, please indicate why.
    ☐ Participant fatigued
    ☐ Participant has dementia or cognitive problems
    ☐ Participant has visual impairment
    ☐ Participant unable to write
    ☐ Participant has dysphasia
    ☐ Participant struggled to concentrate
    ☐ Visit/session was interrupted
    ☐ Researcher time constraints
    ☐ Participant was discharged prior to completion

☐ Other (please specify)