

Questionnaire to help assess the cognitive functioning of an older person

Name of person being assessed: _____ Date: _____

Name(s) of people answering the questionnaire: _____

Please tick the most appropriate column for each question, if you consider how _____ functions today, compared with how they were 10 years ago.

	1 Much improved	2 A bit improved	3 Not much change	4 A bit worse	5 Much worse
1. Remembering things about family and friends, e.g. occupations, birthdays, addresses					
2. Remembering things that have happened recently					
3. Recalling conversations a few days later					
4. Remembering his/her address and telephone number					
5. Remembering what day and month it is					
6. Remembering where things are usually kept					
7. Remembering where to find things which have been put in a different place from usual					
8. Knowing how to work familiar machines around the house					
9. Learning to use a new gadget or machine around the house					
10. Learning new things in general					
11. Following a story in a book or on TV					
12. Making decisions on everyday matters					
13. Handling money for shopping					
14. Handling financial matters e.g. the pension, dealing with the bank					
15. Handling other everyday arithmetic problems e.g. knowing how much food to buy, knowing how long between visits from family or friends					
16. Using his/her intelligence to understand what's going on and to reason things through					