# Cognition Video Transcript

## Edited Video Transcript

### Screening to Assess Strengths and Deficits

Cognition—same scenario I've given you all semester. You walk into the room. Your client can't put on the jacket, all right? You look at stuff, okay? It's not strength; it's not range of motion; it's not motor control. “Oh, maybe a cognitive challenge. They can't figure out the sequence, the steps.” So we do that same process. You develop a hypothesis: “This client has a cognitive challenge.” Sometimes, it will be something like the jacket. Sometimes, it will be more subtle, you know, mistakes, and their medications, forgetting what day it is, forgetting how long they’ve been married, making inappropriate decisions, getting out of bed and walking despite the fact that they're hooked up to things and ripping stuff out, right. So, we do that functional screening of what's happening. Then once we have that hypothesis, we go on for assessments. Assessments: the MoCA

So today, you're going to have the opportunity to practice two assessments with your partner: the Montreal Cognitive Assessment—the MoCA. This is a well-known cognitive assessment. You'll see it a good deal. This is used by a lot more than just occupational therapy. This is used across disciplines. So, I’ve got your instructions, and I’ve got the test. I want you to give your partner this cognitive assessment and record how they do. You'll go through this… at the bottom. You ask how much education they have, if they have a high school education or more. Their point [range] is out of twenty. Below twenty-six is considered a problem, okay? Now, if that person has less than a high school education, then you add a point on to that to effectively make up for the social determinant part around education. Yes, this… is normed for adults. Really, by the time they hit into their teens, they should be fine with this, but it's normal for adults. Good question.

### Assessments: The Medi-Cog & the Mini-Cog

Now, the next assessment is the Medi-Cog. It's actually a two-part assessment where you're going to do the back instructions for the Mini-Cog, which is a three-item recall and a clock drawing test where you're going to ask the person to remember three words. You're going to have them draw a clock and label it with a time. You're going to ask the person to recall those… words. You're then going to have them go through and follow instructions for medication, like they're filling a pill box. I find that I’m seeing this used a lot more frequently, 1) because it is a step closer to a functional cognitive assessment, right, reading instructions that are written on a pillbox and following through. But it can easily be done in all settings. 2) It's been normed to medication management errors. Yes Elizabeth? That's funny, that's funny, generally! I’ve got a gallery of amusing clock drawings, usually for people who have had a stroke and are having cognitive impairments plus perceptual impairments. I’ve got them somewhere. I’ll find it, okay?

So that's part of it. I’m going to have you do these three assessments, then we're going to go from there. You do these or two assessments, sorry, the MoCA the Medi-Cog, okay? Then from there, you go on, and you say, “Hey this person has a documented cognitive assessment.”

### Three Ways to Treat

We talked about three ways to treat. We can [treat] components, [practice] skills, or [teach] strategies. Components is when we're going to treat that aspect of memory attention—executive function—as you saw in the video you watched for today. There's limited evidence showing the efficacy of treating components. It just doesn't seem to work that well, but that said, you'll see it is accepted practice. I try to, you know, shift away from that and focus on functional tasks. So first, we can actually think about doing that.

### Treat Components

We can think about treating components. I’ve got it on your sheet as grading tasks. Look at a task. How can you make it easier or harder to shift that task to a just-right challenge for whatever deficit? You've got attention memory executive function. So, I’ve got two tasks for you. Spot It—fun game, right? This can be used as a treatment for components of cognition under that model. If you've not played it, there's instructions in here that tell you how to play. There's a bunch of different games.

### Practice Skills

The second task is doing laundry. So we've got our laundry here. How could you modify that to segue into our next strategy for intervention—intervention around skills? Train them to perform a specific skill, right? That's really what the video focused on—how can we train this person to get better at cooking a meal? Classic. So you can actually look at the laundry as being one way that you're going to grade that task. The person can perform it well, and then have them perform it well repeatedly so that they can succeed at that task. Now, there is evidence showing that if the client has difficulty with problem-solving around doing the laundry, by practicing doing the laundry, they get better at problem-solving doing the laundry. If it's a problem with memory, oh they start it, but then they never remember to take the wet clothes out of the washing machine, and they get mildewy and nasty—if the client does that repeatedly, they get better memory for doing the laundry. So that there is evidence for the final one.

Well, then I gave you another case study to go through. Practice that same case study, and like a more occupation-focused holistic intervention, around medication management—how can you look at this complex medication management, grade it, and then implement practice? So, we improve performance in final ways.

### Teach Strategies

We can do strategies. Remember that strategies are things we can apply for multiple different tasks. In the PowerPoint presentation, I gave you a bunch of examples of strategies. These are things you can teach people, and they can apply across the board. So, we talk about goal plan. Do check for executive functioning—super useful for a client who has difficulty with problem solving—any situation where they need problem solving, they put that forward, they see how they do, and they say, “Oh, I didn't do that well. I’m going to re-practice and do it better.” And they figure out a way to do this.

### Goal-Planning Example

Oh, can I give you an example, yeah, very much. So, let's say that [your] client is planning a meal for their family. They're planning this big final meal into their rehab stay. Their family is going to come. It's going to be great. You start two weeks out, okay? “We're going to practice cooking. You have this big meal for your family that you're going to cook in two weeks. Today, we're going to do a little tiny example of that. What's your goal for cooking today?” You're going to have them establish a plan. Oh, they start cooking omelets and then they realize they don't have eggs. “Oh yep, let's go back to the start here and re-practice that. Keep practicing that task.” Then, they start to learn the dynamics of problem solving. And they get better and better and better over time. This was actually developed for kids and then applied to adults.

### Problem-Solving Example

So, imagine a child; they have difficulty on the playground, you know, another kid's picking on them. Okay, “What's my goal here? My goal is to get through recess successfully and have fun,” okay. This child's picking on me; my plan is that I’m going to hit them.” All right, go for that. See what happens. Child gets beat up and gets recess taken away, sad. Okay, let's check, “How'd that work for you? Not that well? Let's try that again. Child picks on you the next week, what can you do? Right, you can talk with a teacher. You can make a joke. You can do whatever.” And they keep going through this cycle, and they figure out how to solve problems. Makes sense, okay?

We gave you strategies for executive functioning. One way—simplifying your environment. Or for attention executive, simplify your environment. “Oh you get distracted? Go to an environment without distractions.” Every time they need an attention-demanding task, they implement this. Sound good?

### Practice Memory

All right now, today I’m going to have you practice memory. So with your partner, I have lists of words. There are instructions here. Partner one is going to memorize a list of words. And then they have ninety seconds to look at the words. Then they get to see how many they can recall. Then you go through the second time using a strategy—using a second list. The first partner is going to make up a story containing each of these words or make up a story containing the words. See how you do. The second partner, same thing. Initially, just trying to memorize the words, then going through and trying to visualize this—trying to develop a clear visual picture. Those same things can be applied to occupation. Let's say the other day I got home from the store and realized I forgot three things. So, I talked to my wife in the morning. “Oh I’m going to have time to stop after work; I’ll just pop by.” And I used a visualization strategy to help me remember to stop and buy my three things, okay? All right, I’m going to have you practice.