

Telehealth and the Cognitive Health Assessment (CHA)

Introduction

While the Cognitive Health Assessment (CHA) is typically administered in person, it is sometimes necessary to conduct the CHA over the computer or telephone. For this to be successful, it's important to review with your patient that they have the right **support**, the right **technology**, the right **space**, and the right **materials**.

A CHA Refresher

As a reminder, the CHA consists of three parts:

- 1. Take a Brief Patient History** includes taking a brief history and documenting the information in the patient chart.
- 2. Use Screening Tools** includes conducting the Mini-Cog or GPCOG and the Activities of Daily Living (ADL)/ Instrumental Activities of Daily Living (IADL) and scoring the tools.
- 3. Document Care Partner Information** includes documenting care partner information by indicating if there is a support person or not, their role(s), and their contact information.

Because they are effectively question and answer, Steps 1 and 3 can be accomplished via video or telephone without any special modifications.

The Right Support

One of the ways to ensure that the patient has a supportive environment in which to complete the assessment is to coordinate with a care partner or healthcare agent. Depending on the cognitive and technological abilities of the patient, it may be helpful to arrange for a care partner or healthcare agent to be present for the history portion of the CHA (Part I). Be sure to get the patient's permission first.

For the cognitive assessment portion of the CHA (Part 2), ensure the patient is alone and in a quiet room, but that the care partner or healthcare agent is within "shouting" distance in case help is needed managing the technology aspects of the visit.



The Right Technology

Review that you and your patient have the technology required to participate in a telehealth visit.

Provider	Patient
<ul style="list-style-type: none"> • A technology platform consistent with HIPAA-compliant practices • Adequate internet connectivity for teleconferencing • A password-protected, secure internet connection (e.g., not public/unsecured Wi-Fi) 	<ul style="list-style-type: none"> • A computer with a reliable internet connection • A webcam and microphone for video conferencing • A video conferencing platform (e.g., Zoom, Microsoft Teams, etc.—this depends on what each health system uses) • Screen-sharing capabilities to display assessment materials, if necessary

Finally, for both provider and patient, we suggest that all apps and notifications on your devices are turned off and the phone is on “Do not disturb.”

The Right Space

Work with the patient, and if needed, their care partner or healthcare agent to:

- Provide the patient with a quiet, well-lit space to minimize distractions.
- Find a comfortable chair and a writing surface, e.g., a desk, table, or lap desk.
- Have the patient's face clearly visible on the webcam.
- Remove from the room any clocks that may serve as a patient reference during the Mini-Cog or GPCOG assessments.



The Right Materials

Portions of the Mini-Cog and GPCOG contain written exercises. Ask the patient to have a pen and blank piece of paper at hand to complete these exercises.

Pre-Session Checklist

Consider the following checklist before administering the Mini-Cog or GPCOG remotely:

1. Verify the patient's identity, if needed.
2. Discuss the backup plan in case of technical difficulties (e.g., caregiver is within "yelling distance" to assist if needed).
3. Discuss the plan in case of a crisis (contact information, local emergency department).
4. Review the importance of privacy at your and the patient's locations.
5. Confirm that no one will record the session without permission.

Telephone Tips

While Parts 1 and 3 of the CHA can be administered over the phone with little alteration, the Mini-Cog and GPCOG are difficult to administer over the phone given the requirement to see the patient's drawing of a clock. This is why administering the CHA over the phone is often considered an effort of "last resort." But when telephone communication is the only option, consider using the AD8 screening tool. Prior to screening via telephone, check that the patient or their care partner or healthcare agent can hear you clearly. When using the AD8, it's crucial to read each statement aloud and maintain the original language of the screening tool as much as possible.

While the AD8 is relatively brief and easy to administer, there are other telephone-based screening tools available. At this time, there is little evidence on patient or care partner acceptance to inform the choice of telephone-based tools.

Resources

Below are some additional resources that may be helpful to review.

[Mini-Cog Screening Tool](#)

[GPCOG Screening Tool](#)

[AD8 Screening Tool](#)