



## Six Item Screener for ACHIEVE (SISA)

ID NUMBER:

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FORM CODE:

S	I	S	A
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DATE: 09/27/2019  
Version 1.0

### ADMINISTRATIVE INFORMATION

0a. Completion Date:

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0b. Staff ID:

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**Instructions:** This form is completed when the Dementia Surveillance Required report indicates neurocognitive data has not been collected from living participants in the last 12 months and the participant refused the home visit. See the detailed QxQ instructions for completion of the SISA form. Special missing values are recorded in the field status for cases where the response "Don't know", "Refused", "Unknown", or "N/A" is not listed as an option.

**INTRODUCTION SCRIPT:** "Next, I will ask you a few questions that ask you to use your memory and attention. These questions are similar to ones that you have answered for the ACHIEVE Study, but now we are asking them over the phone. I am going to say three words. After I've said all three words, I would like you to say them back to me. Try to remember what the words are, because I am going to ask you to name them again in a few minutes. Please do not write the words down. Ready?"

"Please repeat these words for me: APPLE - PENNY - TABLE." (Interviewer may repeat words 3 times, if necessary)

If the participant begins to say each word immediately after it has been read, say: "Let's try it again. This time wait until I have said all three words, and then say them back to me."

After a failed attempt, say: "Let's try it again."

1. Was the task attempted? ☐ Yes → **GO TO QUESTION 2**  
☐ No

1a. If no, reason: ☐

H = Hearing loss

P = Participant unable to comprehend  
instructions (cognitive impairment)

R = Refusal

O = Other 1a1. \_\_\_\_\_

**SAVE AND CLOSE FORM**

2. Were the words repeated correctly? ☐ Yes

☐ No → **ANSWER QUESTIONS 3, 4, and 5.**

**SKIP 6, 7 and 8. SAVE AND CLOSE FORM**

	Correct	Incorrect	Not Attempted/ Refusal
3. Thank you, now, without looking at a calendar or watch: What year is this?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Without looking at a calendar or watch: What month is this?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Without looking at a calendar or watch: What is the day of the week?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*If participant gives the date, say: **"Good, and what day of the week is it?"***

**"Now, what were those three words I asked you to remember?"**

	Correct	Incorrect	Not Attempted/ Refusal
6. APPLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. TABLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. PENNY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<p><i>NOTE: A response of "I don't know" is scored as 'Incorrect'. A self-corrected response is scored as 'Correct'.</i></p>
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