Person—level of cognitive ability, Standardised Mini-Mental State Examination assessment code N

Exported from METEOR (AIHW's Metadata Online Registry)

Person—level of cognitive ability, Standardised Mini-Mental State Examination assessment code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Level of cognitive ability (SMMSE score)
Synonymous names:	SMMSE score; Mini-Mental score
METEOR identifier:	583796
Registration status:	Health!, Superseded 19/11/2015
Definition:	The person's degree of cognitive ability to process thoughts and respond appropriately and safely, as represented by a Standardised Mini-Mental State Examination (SMMSE) score-based code.
Data Element Concept:	Person—level of cognitive ability
Value Domain:	Standardised Mini-Mental State Examination assessment code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
	Value	**Meaning**
Permissible values:	0	Score of 0
	1	Score of 1
	2	Score of 2
	3	Score of 3
	4	Score of 4
	5	Score of 5
Supplementary values:	7	Not applicable - item has been omitted
	8	Not known/not specified

Collection and usage attributes

Guide for use:

The Standardised Mini-Mental State Examination (SMMSE) is a clinical assessment tool which is used as a screening test for cognitive impairment (Molloy D, Alemayehu E, Roberts R 1991a).

The SMMSE consists of 12 items or questions which cover a range of cognitive domains. Each item has a maximum score:

Question/ Item number	*Cognitive domain*	*Maximum score*
1	Orientation - time	5
2	Orientation - place	5
3	Memory - immediate	3
4	Language/attention	5
5	Memory - short	3
6	Language/memory - long	1
7	Language/memory - long	1
8	Language/abstract thinking/verbal fluency	1
9	Language	1
10	Language/attention/comprehension	1
11	Attention/comprehension/follow commands/constructional	1
12	Attention/comprehension/ construction/follow commands	3
Total		30

Scores above 1 are not permissible for items 6-11.

Scores above 3 are not permissible for items 3 and 12.

Scores above 5 are not permissible for items 1, 2 and 4.

The scores are summed for the 12 items ranging from a minimum of 0 to a maximum of 30. The SMMSE can be adjusted for non-cognitive disabilities.

If an item cannot be modified or adjusted then the item is omitted, reducing the maximum obtainable score from 30. The formula ((Actual score x 30)/Maximum obtainable score) is used to readjust the score to be comparable with unadjusted scores.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Reference documents:

Molloy D, Alemayehy E, Roberts R 1991a. Reliability of a standardized Mini-Mental State Examination compared with the traditional Mini-Mental state Examination. American Journal of Psychiatry, Vol. 14:102-105.

Molloy D, Alemayehy E, Roberts R 1991a. The *Standardised Mini-Mental State Examination* tool, Independent Hospital Pricing Authority, Australia. Viewed 4 September 2014, http://ihpa.gov.au/internet/ihpa/publishing.nsf/Content/smmse-lp

Molloy D, Alemayehy E, Roberts R 1991a. The *Standardised Mini-Mental State Examination* guidelines, Independent Hospital Pricing Authority, Australia. Viewed 4 September 2014, http://ihpa.gov.au/internet/ihpa/publishing.nsf/Content/smmse-lp

Data element attributes

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Relational attributes

Related metadata references: Has been superseded by Person—level of cognitive ability, Standardised Mini-Mental State Examination item score code N
Health!, Superseded 03/11/2016

Implementation in Data Set Specifications: Admitted subacute and non-acute hospital care DSS 2015-16
Health!, Superseded 19/11/2015
Implementation start date: 01/07/2015
Implementation end date: 30/06/2016
Conditional obligation:

Only one set of SMMSE scores per Geriatric Evaluation and Management episode are required to be reported.

Only required to be reported for episodes of admitted patient care with Hospital service—care type, code N[N] recorded as Code 4, Geriatric evaluation and management.

Only required to be reported when the Episode of admitted patient care—clinical assessment only indicator, yes/no code N value is recorded as Code 2, No.