

Medication Administration Checklist Tool
for the
Minnesota Guidelines for Medication Administration in Schools,
May 2005, Revised September 2005



Instructions for the Medication Administration Checklist Tool

1. This *Medication Administration Checklist Tool* is modeled on the *School Health Index* (SHI) developed by the Centers for Disease Control and Prevention (CDC) as a self-assessment and planning tool that schools can use to improve their health and safety policies and programs.
<http://apps.nccd.cdc.gov/shi/default.aspx>
2. The language found in the *Medication Administration Checklist Tool* is taken directly from the *Minnesota Guidelines for Medication Administration in Schools, September 2005*. This Checklist Tool must be used in combination with the *Minnesota Guidelines for Medication Administration in Schools, May 2005, Revised September 2005*.
3. Each item in the Checklist Tool begins with the page number that corresponds to the related language in the *Minnesota Guidelines for Medication Administration in Schools, May 2005, September 2005*.
4. An (*) after any item in one of the Checklist's questionnaires means there is additional information found at the end of that item.
5. If you are a school nurse with multiple schools, complete the Checklist Tool with one school in mind.

6. Scoring Sheet Example:

Carefully read and discuss the items for a particular guideline in the Checklist Tool. Generally, you will be checking **all** the statements that apply to your school or school district.

Example: Checklist Tool, Item #1.1

1.1	Data Privacy - place a check next to each item that is applicable.
<input type="checkbox"/>	The district/school is in compliance with federal data privacy laws.
<input checked="" type="checkbox"/>	The district/school is in compliance with state data privacy laws.
<input type="checkbox"/>	The district has a statement expressing/describing the term "need to know" related to a student's private data.

Circle or mark the most appropriate score for each item in a particular guideline. Only **one** score can be circled. This score will eventually be entered onto the Scoring Sheet.

Example: Checklist Tool, Item #1.1

Count up the check marks above and circle the appropriate response below:	
3 =	All items listed above are in place.
2 =	Two of the items listed above are in place.
<input checked="" type="checkbox"/> 1 =	One of the items listed above are in
0 =	None of the items listed above have been addressed.

After completing all the items for a particular guideline, use the Scoring Sheet to note down the overall score for that entire guideline.

A calculator will come in handy scoring these guidelines.

Remember: to find the percent on the Scoring Sheet, you take the total number of points that the school district received on the guideline review and divide by the maximum or total number of points available for that guideline checklist.

Example: Scoring Sheet for Checklist Tool, Guideline #1

	Fully In Place	Partially in Place	Under development	Not in Place	
1.1 Relevant Laws Considered	3	2	1	0	
1.2 School District Policies	3	2	1	0	
1.3 Data Privacy	3	2	1	0	
1.4 Licensed Prescribers	3	2	1	0	Add up all column subtotals below:
Subtotals:	+ <u> 6 </u>	+ <u> 2 </u>	+ <u> 1 </u>	+ <u> </u>	= 9
					↓
Overall Guideline #1 score				Total points % 12 X 100	= 75

For example: after reviewing the questionnaire for Guideline #1, a particular school district received 9 points out of a maximum number of 12 points (for maximum, add up the 3s). To find the percentage, divide the 9 points by the 12 maximum number of points available for Guidelines # 1 and multiply by 100. This particular School District's score is 75% for Guideline #1. The district is doing or has done three fourths of the Checklist activities consistent with Guidelines #1 in the *Minnesota Guidelines for Medication Administration in Schools, May 2005 Revised September 2005*.

Guideline #1

Legal Considerations

Questionnaire

1.1 Page 7. Consider the relevant federal and state laws listed below.*

Are your school medication policies in compliance with the following laws?

Which ones are unknown to you and need to be studied to assure compliance?

Federal Laws – check each law that you are in compliance with

- Americans with Disabilities Act (ADA)
http://www.law.cornell.edu/uscode/html/uscode42/usc_sec_42_00012101----000-.html
<http://www.usdoj.gov/crt/ada/reg3a.html>

- Drug and Alcohol Treatment Records
http://www.law.cornell.edu/uscode/html/uscode42/usc_sec_42_00000290--dd002-.html
http://www.access.gpo.gov/nara/cfr/waisidx_04/42cfr2_04.html

- Family Educational rights to Privacy Act (FERPA)
http://www.law.cornell.edu/uscode/html/uscode20/usc_sec_20_00001232---g000-.html
<http://www.access.gpo.gov/nara/cfr/cfr-table-search.html#page1>

- Health Insurance Portability and Accountability Act (HIPAA)
<http://www.access.gpo.gov/nara/cfr/cfr-table-search.html#page1>

- Individual with Disabilities Improvement Act (IDEIA)
<http://www.gpoaccess.gov/plaws/index.html>

- Prohibition on Mandatory Medication Amendment (25; Public Law 108 446)
Sometimes called the “Child Medication Safety Acts”
<http://www.gpoaccess.gov/plaws/index.html>

- Individual with Disabilities Act (IDEA)
http://www.law.cornell.edu/uscode/html/uscode20/usc_sec_20_00001400----000-.html

- OSHA Blood-borne Pathogen Standards 29
<http://www.gpoaccess.gov/cfr/retrieve.html>

- Proposed New Drug, Antibiotic, and Biological Drug Product Regulations
<http://http://www.gpoaccess.gov/cfr/retrieve.html>
http://www.law.cornell.edu/uscode/html/uscode21/usc_sec_21_00000321----000-.html
- Section 504 of the Rehabilitation Act of 1973
http://www.law.cornell.edu/uscode/html/uscode29/usc_sec_29_00000794----000-.html
http://www.law.cornell.edu/uscode/html/uscode29/usc_sec_29_00000705----000-.html

State Laws - check each law that you are in compliance with

- *Administration of Drugs and Medicine*
<http://www.revisor.leg.state.mn.us/stats/121A/22.html>
<http://www.revisor.leg.state.mn.us/stats/121A/221.html>
<http://www.revisor.leg.state.mn.us/stats/121A/2205.html>
<http://www.revisor.leg.state.mn.us/stats/121A/222.html>
- *Children with a Disability*
<http://www.revisor.leg.state.mn.us/arule/3525/>
<http://www.revisor.leg.state.mn.us/stats/125A/>
- *Emergency Treatment of Minors Act*
<http://www.revisor.leg.state.mn.us/stats/144/344.html>
- *Hazardous Substances, Employee Right to Know*
<http://www.revisor.leg.state.mn.us/arule/5206/>
- *Health Standards; immunizations; school children*
<http://www.revisor.leg.state.mn.us/stats/121A/15.html>
- *Minnesota Board of Teaching Rule on School Nurses*
<http://www.revisor.leg.state.mn.us/arule/8710/6100.html>
- *Minnesota Comprehensive Children's Mental Health Act*
<http://www.revisor.leg.state.mn.us/stats/245/4876.html>
<http://www.revisor.leg.state.mn.us/stats/13/05.html>
- *Minnesota Medical Practice Act*
<http://www.revisor.leg.state.mn.us/stats/147/>
<http://www.revisor.leg.state.mn.us/arule/a440.html>
- *Minnesota Medical Records Act*
<http://www.revisor.leg.state.mn.us/stats/144/335.html>
- *Minnesota Comprehensive Adult Mental Health Act*
<http://www.revisor.leg.state.mn.us/stats/245/467.html>

— *Minnesota Nurse Practice Act – Statutes and Rules*
<http://www.revisor.leg.state.mn.us/stats/148/>
<http://www.revisor.leg.state.mn.us/arule/6300.html>

— *Minnesota Government Data Practice Act*
<http://www.revisor.leg.state.mn.us/stats/13/32.html>

— *School Health Services*
<http://www.revisor.leg.state.mn.us/stats/121A/21.html>

— *Vulnerable Adult Act*
<http://www.revisor.leg.state.mn.us/stats/626/>

— *Maltreatment of Minors Act*
<http://www.revisor.leg.state.mn.us/stats/626/>

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all of the laws have been considered prior to policy and procedure development.
2 = 65% of the laws have been considered.
1 = 40% of the laws have been considered.
0 = Less than 40% of the laws or no laws have been reviewed.

* Non- italics are Federal Laws
Italics are State Laws

1.2 Page 8. School District Policies – check all that apply

- All medications (prescription, over the counter, complementary / holistic are administered according to school board policy.
— There are no discrepancies between school board policy and state and federal laws.
— There is a medication policy with procedures in place.
— School administration and school board support the medication policy and procedures.
— The medication policy and procedures are developed in consultation with the school nurse/health expert as indicated in the law.
— There is evidence of school nurse/health expert consultation and review.
— A population based student health needs assessment has been completed and used in developing school medication policy (e.g., individual student needs, student mobility, poverty, etc.). The assessment is current. The assessment indicators can be identified.
— Health and education data is utilized in talking about the student population.

Count the check marks above and circle the appropriate response below:

3 = All of the items listed above have been completed.

2 = Five to seven of the items have been completed.

1 = Two to four of the items have been completed.

0 = One or none of the items have been completed.

1.3 Page 9. Data Privacy - check all that apply.

The district/school is in compliance with federal data privacy laws.

The district/school is in compliance with state data privacy laws.

The district has a statement expressing/describing the term "need to know" related to a student's private data.

Count the check marks above and circle the appropriate response below:

3 = All items listed above are in place.

2 = Two of the items listed above are in place.

1 = One of the items listed above are in place.

0 = None of the items listed above have been addressed.

1.4 Page 10. Licensed Prescribers - check all that apply.

The school can identify who can legally provide them with prescription orders.

The school can identify who cannot legally provide them with prescription orders for medication administration.

The responsibilities of the school nurse and health staff regarding medication administration are addressed.

Count the check marks above and circle the appropriate response below:

3 = Yes, all of the points above can be identified.

2 = Two points listed above can be identified.

1 = One point listed above can be identified.

0 = None of the points listed above can be identified.

Scoring Sheet

Guideline #1: Legal Considerations

Instructions

1. Locate the score you marked for each item in the above questionnaire, and circle the corresponding number below for the same item. Circle only one number per item (e.g., circle only a 0, a 1, a 2, or a 3 for 1.1 Relevant Laws Considered). Repeat for all items in questionnaire.
2. Calculate the overall score for Guideline #1.

Guideline #1: Legal Considerations

	Fully In Place	Partially in Place	Under development	Not in Place	
1.1 Relevant Laws Considered	3	2	1	0	
1.2 School District Policies	3	2	1	0	
1.3 Data Privacy	3	2	1	0	
1.4 Licensed Prescribers	3	2	1	0	Add up all column subtotals below:
Subtotals:	+ _____	+ _____	+ _____	+ _____	=
					↓
Overall Guideline #1 score				Total points ÷ 12 X 100	=

Planning

Guideline #1: Legal Considerations

Planning Question #1 – Areas of Strengths and Improvement

Look back at the items checked in this questionnaire. According to your responses, what are the areas of strengths and what areas need improvement for your school medication administration activities related to this guideline?

Areas of Strengths	Areas for Improvement

Planning Question #2 – Recommended Actions

For each area improvement, list some actions that might be taken or some approaches that might be used to address the problem. For example: utilizing a health advisory committee, spelling out the duties of various individuals connected with medication administration activities, reviewing all the laws related to medication administration and checking for compliance with those laws.

Planning Question #3

List each of the actions identified in Planning Question #2. Use the five-point scales defined below to rank each action on five dimensions (importance, cost, time, commitment, feasibility). Add the ranking points for each action to get total points. Use the total points to help you choose the top priorities that you will implement.

Importance	How important is this priority action to my school? 5 = Very important 3 = Moderately important 1 = Not important
Cost	How expensive would it be to plan and implement this priority? 5 = Not expensive 3 = Moderately expensive 1 = Expensive
Time	How much time and effort would it take to implement this priority? 5 = Little or no time & effort 3 = Moderate time & effort 1 = Much time & effort
Commitment	How enthusiastic would the school community be about implementing this priority? 5 = Very enthusiastic 3 = Moderately enthusiastic 1 = Not enthusiastic
Feasibility	How difficult would it be to attain this priority? 5 = Not difficult 3 = Moderately difficult 1 = Very difficult

Recommended Actions from above Planning Question #2	Importance	Cost	Time	Commitment	Feasibility	Total Points	Top Priority Action? (Yes/No)

Guideline #2 Roles

Questionnaire

2.1 Page 10. Responsibilities:

The school can describe how the following individuals/groups are involved in medication policy and procedure development. There are expectations for the following staff.

Place a check next to each item that is applicable.

- LSN/RNs
- Prescribers
- Pharmacists
- School board
- School administrators
- Unlicensed assistive personnel
- School staff
- Parents/legal guardians
- Students
- Others

Count the check marks above and circle the appropriate response below:

- 3 = Yes, there is a clear identification of nine to ten individuals/group involvement in medication administration policy and procedure development.
- 2 = Four to eight of the individuals / groups involvement can be identified in medication policy and procedure development.
- 1 = Two to three of the individuals/groups involvement can be identified in medication policy and procedure development.
- 0 = Only one of the individuals/groups are involved in medication policy and procedure development.

2.2 Page 11. Collaboration - check all that apply.

- Current methods and time presently being used to foster collaboration between the individuals / groups listed above are planned for and scheduled.
- A list of past methods / opportunities for the individuals / groups listed above to work collaboratively can be identified.
- A plan for collaboration has been developed.

Count the check marks above and circle the appropriate response below:

3 = All three items listed above can be identified.

2 = Two of the items can be identified.

1 = One items can be identified.

0 = No items can be identified.

2.3 Page 11. Communication – check all that apply.

Procedures, tools and / or methods are in place to communicate medication administration policies and procedures (e.g., newsletter, web site, job descriptions, translators, translated materials, etc.).

The communication regarding medication administration policies and procedures addresses the needs of the parent/legal guardians, students and the community at large.

Information communicated contains specifics related to data privacy and medication policies and procedures.

Count the check marks above and circle the appropriate response below:

3 = All items listed above are in place.

2 = Two of the items listed above are in place.

1 = One of the items listed above are in place.

0 = None of the items listed above have been addressed.

2.4 Page 11. Planning

There are identifiable plans available that address specific individual student needs related to medication administration.

Parents / legal guardians, students and the community have input into the overall planning for safe medication administration in the school.

There is a health advisory committee that helps in problem solving, provides community linkages, and contributes to the evaluation, review and updating of the medication administration policies and procedures.

Count the check marks above and circle the appropriate response below:

3 = Yes, all three points are in place.

2 = Two points listed above are in place.

1 = One point listed above is in place.

0 = None of the points listed above can be identified.

- 2.5 Part A. Page 12. Duties – check all that are identified.
- The duties of the school board related to medication administration are identified.
 - The duties of the school administrators related to medication administration are identified.
 - The duties of the health advisory committee related to medication administration are identified.
 - The duties of the parents / legal guardians related to medication administration are identified.
 - The duties of the students related to medication administration are identified.
 - The duties of the LSN/RN related to medication administration are identified.
 - The duties of the LPN related to medication administration are identified.
 - The duties of the UAP related to medication administration are identified.
 - Other individuals providing medication administration activities have identified duties.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, the majority of the above staff have duties related to medication administration that have been identified.
- 2 = Duties related to medication administration have been identified only for school staff.
- 1 = Duties related to medication administration have been identified only for the school nurse.
- 0 = There are no staff who have identified duties related to medication administration.

- 2.6 Part B. Page 12. Duties – check all that are consistent.
- The duties of the school board are consistent with the *Minnesota Guidelines for Medication Administration in Schools*
 - The duties of the school administrators are consistent with the *Minnesota Guidelines for Medication Administration in Schools*.
 - The duties of the health advisory committee are consistent with the *Minnesota Guidelines for Medication Administration in Schools*.
 - The duties of the parents / legal guardians are consistent with the *Minnesota Guidelines for Medication Administration in Schools*.
 - The duties of the students are consistent with the *Minnesota Guidelines for Medication Administration in Schools*
 - The duties of the LSN/RN are consistent with the *Minnesota Guidelines for Medication Administration in Schools*.
 - The duties of the LPN are consistent with the *Minnesota Guidelines for Medication Administration in Schools*.

- The duties of the UAP are consistent with the *Minnesota Guidelines for Medication Administration in Schools*.
- Other individuals providing medication administration activities do so consistent with the duties outlined in the *Minnesota Guidelines for Medication Administration in Schools*.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, the majority of the above staff have duties that are consistent with the *Minnesota Guidelines for Medication Administration in Schools*.
- 2 = Only school staff have duties that are consistent with the *Minnesota Guidelines for Medication Administration in Schools*.
- 1 = Only the school nurse has duties consistent with the *Minnesota Guidelines for Medication Administration in Schools*.
- 0 = There are no staff who have duties consistent with the *Minnesota Guidelines for Medication Administration in Schools*.

Scoring Sheet

Guideline #2: Roles

Instructions

1. Locate the score you marked for each item in the above questionnaire, and circle the corresponding number below for the same item. Circle only one number per item (e.g., circle only a 0, a 1, a 2, or a 3 for 2.1 Responsibilities). Repeat for all items in questionnaire.
2. Calculate the overall score for Guideline #2.

Guideline #2: Roles

	Fully In Place	Partially in Place	Under development	Not in Place	
2.1 Responsibilities	3	2	1	0	
2.2 Collaboration	3	2	1	0	
2.3 Communication	3	2	1	0	
2.4 Planning	3	2	1	0	
2.5 A Duties	3	2	1	0	
2.5 B Duties	3	2	1	0	Add up all column subtotals below:
Subtotals:	+ _____	+ _____	+ _____	+ _____	=
					↓
Overall Guideline #2 score				Total points ÷ 18 X 100	=

Planning

Guideline #2: Roles

Planning Question #1 – Areas of Strengths and Improvement

Look back at the items checked in this questionnaire. According to your responses, what are the areas of strengths and what areas need improvement for your school medication administration activities related to this guideline?

Areas of Strengths	Areas for Improvement

Planning Question #2 – Recommended Actions

For each area improvement, list some actions that might be taken or some approaches that might be used to address the problem. For example: utilizing a health advisory committee, spelling out the duties of various individuals connected with medication administration activities, reviewing all the laws related to medication administration and checking for compliance with those laws.

Guideline #3 Staffing

Questionnaire

- 3.1 Page 14. Student-Focused Staffing – check each that apply:
- The health staff is available in proportion to student numbers and the breadth and severity of student health needs.

 - Students' medication administration needs are successfully managed in school, in the classroom and at all school-related activities.

 - With student self-administration of medications, an LSN/RN is available to assist the student/family in planning, education about medication administration guidance and resource for self-administration or changes in medication(s).

Count the check marks above and circle the appropriate response below:

- 3 = Yes, there is adequate student-focused health staff available to manage students' medication administration needs.
- 2 = There is about is about 51% to 75% of what is needed in terms of student-focused health staff available to manage students' medication administration needs.
- 1 = There is about is about 26% to 50% of what is needed in terms of student-focused health staff available to manage students' medication administration needs.
- 0 = There is about is about 0% to 25% of what is needed in terms of student-focused health staff available to manage students' medication administration needs.

- 3.2 Page 14. Health Services Staffing Options – check each that apply:
- Health services staffing is based on the recommendation from Healthy People 2010 and a school nurse:student ratio of 1:750. <http://www.healthypeople.gov/>

 - The health staffing for schools with 1000 students or more comply with MS 121A in their hiring of a school nurse or there are alternative staffing options arranged with public and/or private health care providers to support health services and medication administration.

- Whether or not an LSN/RN is physically at the school during all school hours, nursing coverage and availability are arranged and maintained.
- The school has a medical advisor (full or part time) to provide medical consultation.

Count the check marks above and circle the appropriate response below:

- 3 = Four items listed above can be identified.
- 2 = Two to three of the items can be identified.
- 1 = One items can be identified.
- 0 = No items can be identified.

3.3 Page 14. Preparing for Emergencies – check all that apply:

- When a student has an emergency care pan and/or an individual health plan (IHP), it includes medication administration considerations.
- The school uses as a resource the Emergency Information Form for Children with Special Health Care Needs (also called a safety plan).
www.aap.org/advocacy/blankform.pdf

There is a plan for the two types of emergencies that address medication administration.

- An individual student pan
 - System-wide emergency plans which includes medical administration procedures.
- School staff is trained; currently certified and available to administer first aid and CPR any time students are in school.
- School policy and procedures include guidelines for intervention in an emergency or crisis and for debriefing afterwards.
- School requests emergency information for each student at the beginning of each school year and upon transferring into the district.

Count the check marks above and circle the appropriate response below:

- 3 = All items listed above are in place.
- 2 = Three to six of the items listed above are in place.
- 1 = One to three of the items listed above are in place.
- 0 = None of the items listed above have been addressed.

Scoring Sheet

Guideline #3: Staffing

Instructions

1. Locate the score you marked for each item in the above questionnaire, and circle the corresponding number below for the same item. Circle only one number per item (e.g., circle only a 0, a 1, a 2, or a 3 for 3.1 Student Focused Staffing). Repeat for all items in questionnaire.
2. Calculate the overall score for Guideline #3.

Guideline #3: Staffing

	Fully In Place	Partially in Place	Under development	Not in Place	
3.1 Student focused staffing	3	2	1	0	
3.2 Health Services Staffing Options	3	2	1	0	
3.3 Preparing for Emergencies	3	2	1	0	Add up all column subtotals below:
Subtotals:	+ _____	+ _____	+ _____	+ _____	=
					↓
Overall Guideline #3 score				Total points ÷ 9 X 100	=

Planning

Guideline #3: Staffing

Planning Question #1 – Areas of Strengths and Improvement

Look back at the items checked in this questionnaire. According to your responses, what are the areas of strengths and what areas need improvement for your school medication administration activities related to this guideline?

Areas of Strengths	Areas for Improvement

Planning Question #2 – Recommended Actions

For each area improvement, list some actions that might be taken or some approaches that might be used to address the problem. For example: utilizing a health advisory committee, spelling out the duties of various individuals connected with medication administration activities, reviewing all the laws related to medication administration and checking for compliance with those laws.

Planning Question #3

List each of the actions identified in Planning Question #2. Use the five-point scales defined below to rank each action on five dimensions (importance, cost, time, commitment, feasibility). Add the ranking points for each action to get total points. Use the total points to help you choose the top priorities that you will implement.

Importance	How important is this priority action to my school? 5 = Very important 3 = Moderately important 1 = Not important
Cost	How expensive would it be to plan and implement this priority? 5 = Not expensive 3 = Moderately expensive 1 = Expensive
Time	How much time and effort would it take to implement this priority? 5 = Little or no time & effort 3 = Moderate time & effort 1 = Much time & effort
Commitment	How enthusiastic would the school community be about implementing this priority? 5 = Very enthusiastic 3 = Moderately enthusiastic 1 = Not enthusiastic
Feasibility	How difficult would it be to attain this priority? 5 = Not difficult 3 = Moderately difficult 1 = Very difficult

Recommended Actions from above Planning Question #2	Importance	Cost	Time	Commitment	Feasibility	Total Points	Top Priority Action? (Yes/No)

Guideline #4

Delegation of Medication Administration by LSN/RN

Questionnaire

4.1 Page 15. Definition of Delegation by the Licensed School Nurse / Registered Nurse – please check all that apply: *

- The district has developed a definition/statement of nursing delegation as it relates to medication administration – “transferring to a competent individual the authority to perform a selected nursing task in a selected situation. The nurse retains accountability for the delegation.”
- The decision to delegate lies solely in the hand of the LSN/RN.
- Instruction and direction is provided by the LSN/RN when delegating medication administration.
- School health staff carrying out nursing acts or functions have received education and training by an LSN/RN.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all of the above items are followed related to delegating medication administration.
- 2 = Three of the above items are followed in delegating medication administration to students.
- 1 = One or two of the above items are followed in delegating administration of medications to students.
- 0 = One or none of the above principles are used in medication administration.

* Under 4.1 on page 15 of the *Minnesota Guidelines for Medication Administration in Schools, September 2005*, the definition of delegation by a LSN and an RN is clarified.
<http://www.health.state.mn.us/divs/fh/mch/schoolhealth/medadmin/guide4.html>

4.2 Page 15. The Responsibilities of Nursing Delegation – check all that apply.

- The decision to delegate the various aspects of medication administration lies solely in the hands of the LSN/RN.
- Time for instruction and supervision is part of the policy and procedures.
- The decision to delegate nursing acts (e.g., medication administration) is made on a case-by-case basis based on LSN/RN assessment.

- The delegating LSN/RN assesses the student prior to delegating.
- The delegating LSN/RN assesses the health/education capabilities of staff prior to delegation.
- Policies and procedures are in place that correctly indicate the responsibilities of the LPN in accordance with the nurse practice act.
- Policies and procedures are in place that correctly indicate the responsibilities of the school health paraprofessional/UAP.
- The LSN/RN provides adequate oversight of the activities.
- The LSN/RN keeps written documentation of initial and ongoing competency.
- To delegate the medication administration function is one in which: the nursing care needs of the student are stable; performance of the function does not pose potential harm; the function involves little or no modification; the function has a predictable outcome; the function does not inherently involve ongoing assessment, interpretation, or decision making; the delegatee has appropriate skills and competency levels; and supervision is available.
- The person accepting nursing delegation is responsible to perform the nursing acts as directed or instructed.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all of the above responsibilities are present.
- 2 = Five to ten of the above responsibilities are present.
- 1 = Two to four of the above responsibilities are present.
- 0 = One or none of the above responsibilities are present.

4.3 Page 16. The Medication Administration Decision-Making Tree – check all that apply. *

- A clear and defined decision-making process is used when deciding on nursing delegation of medication administration activities.
- The LSN/RN can identify rationale for delegating or choosing not to delegate nursing tasks.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, this is done all the time when delegating.
- 2 = This is done only above 75 % to 99% of the time.
- 1 = This is done only 50% to 74% of the time.
- 0 = This is done 0 to 50% of the time.

* Review a copy of the Medication Administration Decision-Making Tree (Appendix C of the *Minnesota Guidelines for Medication Administration in Schools, September 2005*).

<http://www.health.state.mn.us/divs/fh/mch/schoolhealth/medadmin/appc.html>

Scoring Sheet

Guideline #4: Delegation of Medication Administration by LSN/RN

Instructions

1. Locate the score you marked for each item in the above questionnaire, and circle the corresponding number below for the same item. Circle only one number per item (e.g., circle only a 0, a 1, a 2, or a 3 for 4.1 Delegation of Medication Administration by LSN/RN). Repeat for all items in questionnaire.
2. Calculate the overall score for Guideline #4.

Guideline #4: Definition of Delegation by the LSN/RN

	Fully In Place	Partially in Place	Under development	Not in Place	
4.1 Definition of Delegation by the LSN/RN	3	2	1	0	
4.2 The Responsibilities of Nursing Delegation	3	2	1	0	
4.3 The Medication Administration Decision-Making Tree	3	2	1	0	Add up all column subtotals below:
Subtotals:	+ _____	+ _____	+ _____	+ _____	=
					↓
Overall Guideline #4 score				Total points ÷ 9 X 100	=

Planning

Guideline #4: Delegation of Medication Administration by LSN/RN

Planning Question #1 – Areas of Strengths and Improvement

Look back at the items checked in this questionnaire. According to your responses, what are the areas of strengths and what areas need improvement for your school medication administration activities related to this guideline?

Areas of Strengths	Areas for Improvement

Planning Question #2 – Recommended Actions

For each area improvement, list some actions that might be taken or some approaches that might be used to address the problem. For example: utilizing a health advisory committee, spelling out the duties of various individuals connected with medication administration activities, reviewing all the laws related to medication administration and checking for compliance with those laws.

Guideline #5

General Procedures for Medication

Questionnaire

5.1 Page 16. Principles that influence Medication Administration Procedures – please check all that apply:

- The medication administration is a clean procedure that includes washing hands.
- The medications are given exactly as ordered by the health care provider or indicated on manufacturer's instructions.
- Everything is done to avoid "no-shows" for medication administration.
- Prevention of errors (e.g., do not become distracted, do not use one student's medication for another, etc.).
- Keep individual student information private.
- Apply child development principles when working with students
- Report and record medication errors, omissions, occurrences, etc., and has follow-up plan for afterwards

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all of the above principles are followed in administering medications to students.
- 2 = Five or six of the above principles are followed in administering medications to students.
- 1 = Two to four of the above principles are followed in administering medications to students.
- 0 = One or none of the above principles are used in medication administration.

5.2 Page 17. Step by Step Procedures – please check if it applies:

- There are written step-by-step procedures available for all types of medication administration (e.g., oral, inhaled, topical, rectal, intravenous, pumps, gastrostomy-tube, intramuscular, subcutaneous, or ear and eye) available for school health staff in the health office, with individual student adjustments based on the LSN/RNs' professional judgment.

Circle the appropriate response below:

- 3 = Written step-by-step procedures exist with LSN/RN modifications based on individual student conditions and needs and school staff and equipment availability.
- 2 = If step-by-step procedures are incomplete or do not exist, there is a school specific procedure book regarding medication administration.
- 1 = If step-by-step procedures are incomplete or do not exist, reference books are available in the health office regarding medication administration and the various routes of administration.
- 0 = No medication administration procedures exist.

5.3 Page 18. The Six Rights of Medication Administration – please check all that apply:*

- The school staff properly identify each student before administering medication.
- Medication is administered at the prescribed time. Usually within 30 minutes earlier or later than the designated time unless otherwise stipulated by the provider or pharmacist.
- The correct medication is administered. The staff checks three times, prior to administration.
- The right amount of medication is given.
- The prescribed route of medication administration is used.
- Documentation is done promptly and accurately.

Count the check marks above and circle the appropriate response below:

- 3 = All six rights are followed in administering medications in school
- 2 = There is inconsistency in following the six rights of medication administration; sometimes they are followed but not always when staff are busy.
- 1 = The six rights of safe medication administration are not followed.
- 0 = The staff do not know about the Six Rights of Medication Administration.

* On page 17, the Six Rights of Medication Administration are listed in a text box, and are further explained on page 18 of the *Minnesota Guidelines for Medication Administration in Schools, September 2005*.
<http://www.health.state.mn.us/divs/fh/mch/schoolhealth/medadmin/guide5.html>

5.4 Page 18. Field Trips – please check all that apply:

- The school medication policy and procedures specifically address field trips.
- School staff are specifically designated medication administration responsibilities for field trips.

- The methodology for handling and administering medications on field trips is consistent and understood by everyone.
- A job description is provided for the medication administration volunteer.
- Medication administration field trip volunteers are trained, competencies evaluated and documented, have procedures in hand and agree to follow them.
- Parents must sign a release of health information if this is new information for the medication administration volunteer.
- Legal requirements are followed to increase student safety and reduce school liability.
- Parent roles and responsibilities are spelled out in writing.
- Plan for medication coverage and care during extracurricular activities sponsored by the schools is set out in the student health/education plan.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all measures listed are present in administering medications on field trips.
- 2 = The district has forms for parents and those administering medications to give permission and document medication administration on field trips.
- 1 = The policy and procedures vary and are separately established for each field trip experience.
- 0 = There is no policy or procedure for safe medication administration on field trips.

5.5 Page 19. Before school, after-school and Summer-school Activities – check all that apply:

- Medication policy and procedures in these sites or at these events are consistent with other school medication administration policies and procedures.
- Plans are in place for educational assistants, bus drivers, and lunchroom staff to be designated medication administration on a case-by-case basis.
- Staff designated responsibility for medication administration are trained and supervised related to these responsibilities.
- Student specific information, school resources (e.g., student health records/emergency information, emergency equipment, etc...) are made available.
- Training and supervision is documented in the staff personnel file.
- In situations where more than one organization is involved (e.g., an after school caregiver housed in a school), it is determined who exactly is in charge and who is responsible for medication administration.

Count the check marks above and circle the appropriate response below:

- 3 = There is consistency of medication administration policy and procedures in these various activities sponsored by the school.
- 2 = Medication administration policies and procedures are available but inconsistently utilized in school sponsored settings.
- 1 = Medication is given per parent request and direction.
- 0 = There is no plan for medication administration consistency with school board approved medication administration policy and procedures at school sponsored before, after and summer school programs.

Scoring Sheet

Guideline #5: General Procedures for Medication Administration

Instructions

1. Locate the score you marked for each item in the above questionnaire, and circle the corresponding number below for the same item. Circle only one number per item (e.g., circle only a 0, a 1, a 2, or a 3 for 5.1 Principles that Influence Medication Administration Procedures). Repeat for all items in questionnaire.
2. Calculate the overall score for Guideline #5.

Guideline #5: General Procedures for Medication Administration

	Fully In Place	Partially in Place	Under development	Not in Place	
5.1 Principles That Influence Medication Administration Procedures	3	2	1	0	
5.2 Step by Step Procedures	3	2	1	0	
5.3 The Six Rights of Medication Administration	3	2	1	0	
5.4 Field Trips	3	2	1	0	
5.5 Before-school, after-school, and summer school activities.	3	2	1	0	Add up all column subtotals below:
Subtotals:	+ _____	+ _____	+ _____	+ _____	=
					↓
Overall Guideline #3 score				Total points / 9 X 100	=

Planning

Guideline #5: General Procedures for Medication Administration

Planning Question #1 – Areas of Strengths and Improvement

Look back at the items checked in this questionnaire. According to your responses, what are the areas of strengths and what areas need improvement for your school medication administration activities related to this guideline?

Areas of Strengths	Areas for Improvement

Planning Question #2 – Recommended Actions

For each area improvement, list some actions that might be taken or some approaches that might be used to address the problem. For example: utilizing a health advisory committee, spelling out the duties of various individuals connected with medication administration activities, reviewing all the laws related to medication administration and checking for compliance with those laws.

Planning Question #3

List each of the actions identified in Planning Question #2. Use the five-point scales defined below to rank each action on five dimensions (importance, cost, time, commitment, feasibility). Add the ranking points for each action to get total points. Use the total points to help you choose the top priorities that you will implement.

Importance	How important is this priority action to my school? 5 = Very important 3 = Moderately important 1 = Not important
Cost	How expensive would it be to plan and implement this priority? 5 = Not expensive 3 = Moderately expensive 1 = Expensive
Time	How much time and effort would it take to implement this priority? 5 = Little or no time & effort 3 = Moderate time & effort 1 = Much time & effort
Commitment	How enthusiastic would the school community be about implementing this priority? 5 = Very enthusiastic 3 = Moderately enthusiastic 1 = Not enthusiastic
Feasibility	How difficult would it be to attain this priority? 5 = Not difficult 3 = Moderately difficult 1 = Very difficult

Recommended Actions from above Planning Question #2	Importance	Cost	Time	Commitment	Feasibility	Total Points	Top Priority Action? (Yes/No)

Guideline #6 Education and Training

Questionnaire

- 6.1 A. Page 19. Content and Competencies – Training and Education Has Occurred. Check all that apply:

- Education and training are conducted on an ongoing basis to keep students safe and to ensure competency of staff members.
- Coordination of training is the responsibility of the LSN/RN.
- The LSN/RN determines what training is needed, for whom, the content, and available and appropriate training resources.
- Training topics include: district policies, directions and time of administration for all medication, verification procedures for setting up medications, proper documentation, data privacy, individualized student health information, emergency protocols, equipment, the six rights of medication administration and infection control procedures.
- Education and training include a cultural competency component regarding medications.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all of the above points are followed and adhered to in providing education and training regarding administering medications to students.
- 2 = Some education and training is done but it is not consistent.
- 1 = No education or training is done and there is simply some discussion between parents and school staff about medication administration.
- 0 = No training is provided and there is no one to do it.

- 6.1 B. Page 19. Content and Competencies – Documentation. Check all that apply:

After appropriate medication administration training and education has been provided as outlined in the *Minnesota Guidelines for Medication Administration in Schools, September 2005*:

- Procedures are demonstrated by the person being taught.
- Medication administration competency (e.g., return demonstrations) is documented in personnel files.

- Count the check marks above and circle the appropriate response below:
- 3 = Yes, training and education are both demonstrated and documented.
 - 2 = Some training and education is demonstrated and documented but it is inconsistent
 - 1 = Training and education may be demonstrated but not documented
 - 0 = Training and education are neither demonstrated nor documented.

6.2 Page 20. Training for Delegation – please check all that apply:

The LSN/RN considers the following these nursing delegation issues when planning to delegate:

- who is being trained
- the content of the topic and materials
- the time allotted for training
- the location of the training
- the reason for the training
- competency evaluation
- documentation.

Count the check marks above and circle the appropriate response below:

- 3 = All of the above issues are considered by the LSN/RN when training is provided so that the LSN/RN can delegate.
- 2 = Some of the above issues are considered by the LSN/RN when training is provided so that the LSN/RN can delegate.
- 1 = Very few of the above issues are considered by the LSN/RN when training is provided so that the LSN/RN can delegate.
- 0 = The above issues are not considered by the LSN/RN when training is provided so that the LSN/RN can delegate.

6.3 Page 20. Education and Training Needs

- The training and education are provided to school staff before medication administration activities commence.
- The training includes school policies and available resources and is done at the beginning of the school year.
- The training includes written criteria that indicate when to contact a supervising LSN/RN or EMS and is done at the beginning of the school year.
- The training includes student specific information.
- The training includes procedures for safe medication administration and is done at the beginning of the school year.
- The training resources used include: general medication overview the purposes of medications and the various medication administration routes; information on handling and administration

- techniques; needs for authorization and record keeping, rights and responsibilities that include delegation, data privacy and laws
- Education of the community at large regarding school medication policies and procedures.
- Education of parent / legal guardian regarding medication administration policies and procedures and their rights.
- Education of students regarding medication administration policies and procedures, their self-medication administration and self care responsibilities.
- Evaluation of staff medication administration skills and knowledge-based competencies is done.
- The school district has developed specific training roles and responsibilities for its various staff related to medication administration.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all of the items listed are included in the school district education and training.
- 2 = Education and training is completed but follow-up and educational components are delayed or incomplete.
- 1 = Education and training are provided on an as needed basis, monitoring and evaluation are weak or inconsistent.
- 0 = There is no plan for education and training for staff related to medication administration.

Scoring Sheet

Guideline #6: Education and Training

Instructions

1. Locate the score you marked for each item in the above questionnaire, and circle the corresponding number below for the same item. Circle only one number per item (e.g., circle only a 0, a 1, a 2, or a 3 for 6.1 Content and Competencies). Repeat for all items in questionnaire.
2. Calculate the overall score for Guideline #6.

Guideline #6: Education and Training

	Fully In Place	Partially in Place	Under development	Not in Place	
6.1 A - Content and Competencies: Education and Training Has Occurred	3	2	1	0	
6.1 Content and Competencies - Documentation	3	2	1	0	
6.2 Training for Delegation	3	2	1	0	
6.3 Education and Training Needs	3	2	1	0	Add up all column subtotals below:
Subtotals:	+ _____	+ _____	+ _____	+ _____	=
					↓
Overall Guideline #6 Score				Total points % 12 X 100	=

Planning

Guideline #6: Education and Training

Planning Question #1 – Areas of Strengths and Improvement

Look back at the items checked in this questionnaire. According to your responses, what are the areas of strengths and what areas need improvement for your school medication administration activities related to this guideline?

Areas of Strengths	Areas for Improvement

Planning Question #2 – Recommended Actions

For each area improvement, list some actions that might be taken or some approaches that might be used to address the problem. For example: utilizing a health advisory committee, spelling out the duties of various individuals connected with medication administration activities, reviewing all the laws related to medication administration and checking for compliance with those laws.

Planning Question #3

List each of the actions identified in Planning Question #2. Use the five-point scales defined below to rank each action on five dimensions (importance, cost, time, commitment, feasibility). Add the ranking points for each action to get total points. Use the total points to help you choose the top priorities that you will implement.

Importance	How important is this priority action to my school? 5 = Very important 3 = Moderately important 1 = Not important
Cost	How expensive would it be to plan and implement this priority? 5 = Not expensive 3 = Moderately expensive 1 = Expensive
Time	How much time and effort would it take to implement this priority? 5 = Little or no time & effort 3 = Moderate time & effort 1 = Much time & effort
Commitment	How enthusiastic would the school community be about implementing this priority? 5 = Very enthusiastic 3 = Moderately enthusiastic 1 = Not enthusiastic
Feasibility	How difficult would it be to attain this priority? 5 = Not difficult 3 = Moderately difficult 1 = Very difficult

Recommended Actions from above Planning Question #2	Importance	Cost	Time	Commitment	Feasibility	Total Points	Top Priority Action? (Yes/No)

Guideline #7

Policies and Procedures

Questionnaire

7.1 Page 22. Health Policies as Legal Responsibilities *

Please check if in compliance:

___ Your school district is in compliance with MS 121A.22, subd 4.

If the above item is checked, circle 3 – Yes. If the above item is not checked, circle 0 – No.

3 = Yes

0 = No

* Refer to MS 121A.22, subd 4 on page 48, Appendix D, of the *Minnesota Guidelines for Medication Administration in Schools, May 2005, Revised September 2005*.

<http://www.health.state.mn.us/divs/fh/mch/schoolhealth/medadmin/appd.html>

7.2 Page 22. Characteristics of Sound Policies – check all that apply:

___ Policies are current (within three years).

___ Policies are consistent with district activities.

___ Policies cover all type, routes and times medications need to be given.

___ Policies cover on and off campus school sponsored activities.

___ Policies are based on the medication needs of student within the district and each individual school.

___ Policies are developed collaboratively, with advice and assistance of school board members, medical advisor, physician, families, school staff, local partners and other community members (see guidelines for additional detail on local partners and community members).

___ There is annual notification to the public, including parents of the district's medication policy.

Count the check marks above and circle the appropriate response below:

3 = Yes, all of the above points are in place.

2 = Four to six items can be identified.

1 = Two or three items can be identified.

0 = One or no items can be identified.

7.3 Page 22. Contents of Policy and Procedures – check all that apply: *

District policies and procedures on medication administration should address the following:

- Types of medications administered
- Requirements for initiating medication administration
- Desired medication administration outcomes
- Nursing delegation of medication administration
- Training and supervision of delegates
- Procedures for administering medications
- Secure handling, storage and disposal
- Self-carrying and self-administration
- Extended day activities
- Emergency protocols
- Documentation and record keeping
- Errors and omissions
- Individual students' health needs
- District policy and procedures also address student's individual health needs (short-term to long-term medication requirements), which might or might not involve a health/education plan.

Count the check marks above and circle the appropriate response below:

- 3 = Twelve to fourteen of the above topics can be identified.
- 2 = Eight to eleven of the three above points can be identified.
- 1 = Four to seven of the above points can be identified.
- 0 = Zero to three of the above points can be identified.

* See sample policies in Appendix G of the *Minnesota Guidelines for Medication Administration in Schools, May 2005, Revised September 2005*.

<http://www.health.state.mn.us/divs/fh/mch/schoolhealth/medadmin/appg.html>

7.4 Page 23. Requests to Administer Medications in Schools – check all that apply:

When medication administration in a school is requested by a parent / legal guardian, the policy specifies:

- who will give the medications (LSN/RNs, or delegate), and
- whether and under what conditions self-medication by students is allowed.
- No prescription medications are administered without the written order of a licensed prescriber and the written or oral authorization of the student's parent/legal guardian.
- Parent oral authorizations must be reduced to writing within two school days.

- The board has a specific policies and procedures for over-the-counter (OTC) medications.
- If OTC medications are given, they are done so with orders from a licensed prescriber and the manufacturer's directions are followed.
- School districts retain the authority to govern the administration of OTC by a school nurse.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all of the above are addressed and followed regarding medication administration.
- 2 = Four to six of the above items can be identified or are in place.
- 1 = Two or three of the above items can be identified or are in place.
- 0 = One or none of the above items can be identified or are in place.

7.5 Page 23. Medication Types – check all that apply:

The school's medication administration system does address requests to administer the following in schools:

- prescribed medications
- OTC medications
- emergency
- investigational
- controlled substances
- CAMS

Schools medication administration system responses includes consideration of the following:

- policy / administrative support
- nursing judgment
- staff capacity and training

- Schools and school staff do not purchase or have a supply of any OTC medications or distribute them to students.

Count the check marks above and circle the appropriate response below:

- 3 = All items above are checked.
- 2 = Six to nine items are checked.
- 1 = Three to five items are checked.
- 0 = Two to zero items are checked.

7.6 Page 23. Self-carrying and self-administering of Prescription Medications – check all that apply:

- Authorization form is completed by parent/legal guardian and physician and is on file at school.
- Authorization includes the following physician information (student capabilities, name and purpose of the medication, prescribed dosage of medication, times at which or circumstances under which

the medication may be taken, the period for which the medication is prescribed, route of administration, potential side effects and the duration of time the student can self-administer).

- When a LSN/RN considers allowing a student to self-carry and self-administer, a nursing assessment of the student's competence is done and documented in writing.
- When a student self-carries and self-administers, the privacy of that student is maintained.
- A student's self-administration plan is reviewed according to school district policy.

Count the check marks above and circle the appropriate response below:

- 3 = All of the above items are identified or are in place.
- 2 = Three to four of the above items can be identified or are in place.
- 1 = One to two of the above items can be identified or are in place or there is no LSN/RN available for input.
- 0 = There is no policy for student self-carry and self-administration of prescription medication.

7.7 Page 25. Self-carrying and Self-administration of Non-Prescription Medication – check all that apply:

- All administration of OTC medication follows the manufacturers recommendations.
- Authorization form is completed by parent/legal guardian and physician and is on file at school
- Authorization includes the following physician information (student capabilities, name and purpose of the medication, prescribed dosage of medication, times at which or circumstances under which the medication may be taken, the period for which the medication is prescribed, route of administration, potential side effects and the duration of time the student can self-administer).
- When a LSN/RN considers allowing a student to self-carry and self-administer, a nursing assessment of the student's competence is done and documented in writing.
- When a student self-carries and self-administers, the privacy of that student is maintained.
- A student's self-administration plan is reviewed according to school district policy.

Count the check marks above and circle the appropriate response below:

- 3 = All of the above items are identified or are in place.
- 2 = Four or five of the above items can be identified or are in place.
- 1 = One to three of the above items can be identified or are in place or there is no LSN/RN available for input.
- 0 = There is no policy for student self-carry and self-administration of non-prescription medication.

7.8 Page 25. Handling, Storage, and Disposal of Medications – check all that apply:

- Information is provided on how medications are to be brought to school.
- Information is provided on how emergency medications are handled and stored; who is responsible for supplying or administering them. Provisions are considered for safe guarding medications from others.
- An LSN/RN completes an onsite review of new medications, orders, and permission forms.
- Medications are kept in a locked, anchored, and secured area and kept in recommended environment (e.g., refrigerator, dry, etc.) as directed by manufacturers.
- Medication is kept in the original pharmacy and /or manufacturer labeled container.
- Location of medications is known to student and those with legitimate educational interest. (FERPA)*
- Policies and procedures address handling of unused, discontinued or outdated medications.
- Policies and procedures address the handling of sharps.

Count the check marks above and circle the appropriate response below:

- 3 = All of the above items are identified or are in place.
- 2 = Five or seven of the above items can be identified or are in place.
- 1 = Three or four of the above items can be identified.
- 0 = Two or less of the above items can be identified or are in place.

* Family Educational Rights and Privacy Act – FERPA. (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. <http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html>

7.9 Page 26. Planning and Standardized Forms – check all that apply:

- School districts have uniform and consist medication administration forms.
- Medication administration forms are available in a variety of ways (e.g., handbook, website, large print, Braille, copied upon request, etc.).
- Contingency plans for medication administration are in place when regularly assigned staff (LSN/RN, school health paraprofessional) are not available.
- Individual student medication plans include parental/legal guardian and appropriate school staff input.

Count the check marks above and circle the appropriate response below:

3 = Three to four of the above items are identified or are in place.

2 = Two of the above items can be identified or are in place.

1 = One of the above items can be identified or are in place.

0 = None of the above items can be identified or are in place.

7.10 Page 26. Record Keeping (written or electronic) – check all that apply:

- Records are kept of medication administration.
- Records are kept current.
- Records include: consent forms, authorizations/orders, individual documentation and emergency plans and procedures.
- Health records are secured under a locked system.
- Access to records is documented as to date, time, person, and limited as appropriate.
- Responsibility for maintaining files is assigned.
- Record retention policy is in place.
- Documentation includes student name and ID number, room; name of medication; dosage; route; date and time given; beginning and end dates; any special circumstances related to the procedures; the student's unusual reactions or responses; omissions, absences, or refusals; name of the individuals giving the medication; count of controlled substances; and medication disposal.
- Documentation is to done in unalterable format.

Count the check marks above and circle the appropriate response below:

3 = Nine to ten of the above items are identified or are in place.

2 = Six to eight of the above items can be identified or are in place.

1 = Three to five of the above items can be identified or are in place.

0 = Two to none of the above items can be identified or are in place.

7.11 Page 27. Procedures for Emergency Medications in Schools – check all that apply:

- Students with chronic health needs that require emergency medications have emergency care plans in place.
- The school has an overall emergency response plan and it is coordinated with the medication administration activities.

Review the check marks above and circle the appropriate response below:

3 = The school has emergency response plans that are coordinated with the students' emergency care plans.

2 = The school has emergency response plans but are not coordinated with the students' emergency care plans.

1 = The school has emergency response plans but there are no plans outlined for the students that need them.

0 = The only plan is to call 911.

7.12 Page 27. Investigational Drugs – check all that apply:

- Requests to administer investigational drugs are addressed mentioned in the school’s policy.
- Investigational drugs are addressed on an individual student case-by-case basis.
- If the school administers investigational drugs the requirements are the same as for prescription medications, with the addition of the name of the pharmaceutical company, name of the investigational physician as well as personal physician, manufacturers indications and contraindications as well as possible side effects, and background information on the study being conducted.

Count the check marks above and circle the appropriate response below:

- 3 = All of the above items are identified or are in place.
- 2 = Two of the above items can be identified or are in place.
- 1 = One of the above items can be identified or are in place.
- 0 = None of the above items can be identified or are in place.

7.13 Page 27. Complementary and Alternative Medications (CAMS) – check all that apply:

- Request to administer complementary and alternative medications are addressed in the schools policy and procedures.
- CAMS are addressed per individual request.
- If the district permits administration of CAMS at school the school has requirements to assure student and administration safety.

Count the check marks above and circle the appropriate response below:

- 3 = All of the above items are identified or are in place.
- 2 = Two of the above items can be identified or are in place.
- 1 = One of the above items can be identified or are in place.
- 0 = None of the above items can be identified or are in place.

Scoring Sheet - Guideline #7: Policies and Procedures

1. Locate the score you marked for each item in the above questionnaire, and circle the corresponding number below for the same item. Circle only one number per item (e.g., circle only a 0, a 1, a 2, or a 3 for 7.1 Health Policies as Legal Responsibilities). Repeat for all items in questionnaire.
2. Calculate the overall score for Guideline #7.

Guideline #7	Fully In Place	Partially in Place	Under development	Not in Place	
7.1 Health Policies as Legal Responsibilities	3			0	
7.2 Characteristics of Sound Policies	3	2	1	0	
7.3 Contents of Policy and Procedures	3	2	1	0	
7.4 Requests to Administer Medications in Schools	3	2	1	0	
7.5 Medication Types	3	2	1	0	
7.6 Self-carrying and self-administration of prescription drugs	3	2	1	0	
7.7 Self-carrying and self-administration of non prescription drugs	3	2	1	0	
7.8 Handling, Storage, and Disposal of Medications	3	2	1	0	
7.9 Planning and Standardized Forms	3	2	1	0	
7.10 Record Keeping	3	2	1	0	
7.11 Procedures for Emergency Medications in School	3	2	1	0	
7.12 Investigational Drugs	3	2	1	0	
7.13 Complementary and Alternative Medications	3	2	1	0	
Subtotals:	+ _____	+ _____	+ _____	+ _____	=
					↓
Overall Guideline #7 score				Total points ÷ 39 X 100	=

Planning

Guideline #7: Policies and Procedures

Planning Question #1 – Areas of Strengths and Improvement

Look back at the items checked in this questionnaire. According to your responses, what are the areas of strengths and what areas need improvement for your school medication administration activities related to this guideline?

Areas of Strengths	Areas for Improvement

Planning Question #2 – Recommended Actions

For each area improvement, list some actions that might be taken or some approaches that might be used to address the problem. For example: utilizing a health advisory committee, spelling out the duties of various individuals connected with medication administration activities, reviewing all the laws related to medication administration and checking for compliance with those laws.

Planning Question #3

List each of the actions identified in Planning Question #2. Use the five-point scales defined below to rank each action on five dimensions (importance, cost, time, commitment, feasibility). Add the ranking points for each action to get total points. Use the total points to help you choose the top priorities that you will implement.

Importance	How important is this priority action to my school? 5 = Very important 3 = Moderately important 1 = Not important
Cost	How expensive would it be to plan and implement this priority? 5 = Not expensive 3 = Moderately expensive 1 = Expensive
Time	How much time and effort would it take to implement this priority? 5 = Little or no time & effort 3 = Moderate time & effort 1 = Much time & effort
Commitment	How enthusiastic would the school community be about implementing this priority? 5 = Very enthusiastic 3 = Moderately enthusiastic 1 = Not enthusiastic
Feasibility	How difficult would it be to attain this priority? 5 = Not difficult 3 = Moderately difficult 1 = Very difficult

Recommended Actions from above Planning Question #2	Importance	Cost	Time	Commitment	Feasibility	Total Points	Top Priority Action? (Yes/No)

Guideline #8

Assurance, Monitoring, and Assessment

Questionnaire

- 8.1 Page 27. Definitions – check all that apply: *
- The district policies and procedures are established collaboratively with input from school nursing personnel, district administrators, and parents.
 - Medication errors are defined as not administering the medication to the right student, at the right time, the right medication, the right dose, by the right route, or with the right documentation.

Count up the check marks above and circle the appropriate response below:

- 3= Yes, the policies and procedures are established collaboratively and the definition of a medication administration error is in place.
- 2 = Parents are notified of medication administration policy and procedure but are not involved in development.
- 1 = Medication policies and procedures exist which address medication administration errors but are not routinely audited.
- 0 = Reviews of medication administration errors are not recorded.

- * To review the Six Rights of Medication Administration, go to page 17-18 of the *Minnesota Guidelines for Medication Administration in Schools, September 2005*.
<http://www.health.state.mn.us/divs/fh/mch/schoolhealth/medadmin/guide5.html>

- 8.2 Page 27. Procedures to Follow in Case of Medication Errors

The school district procedure initiates the following steps:

- Identify the nature of the error.
- Keep the student in the health office. If the student has already returned to class when the error is determined, have the student accompanied to the health office.
- Monitor the student's behavior and physical symptoms. If the student's symptoms are life threatening, call 911 prior to calling parent/legal guardians.
- Notify parent / legal guardians, supervising LSN/RN, principal / designee, and student's physician.
- If unable to contact the licensed prescriber, contact the poison control center for instruction.
- Carefully record in the student's health record all circumstances and actions taken.
- Submit an occurrence report within 24 hrs.

Count the check marks above and circle the appropriate response below:

- 3 = All of the steps above can be identified.
- 2 = Four to six of the steps above can be identified.
- 1 = One to three of the steps above can be identified.
- 0 = None of the steps above can be identified.

8.3 Page 28. Refusal to take Medication – check all that apply:

There is a policy and procedure regarding a student's non-compliance or refusal to take medication for which the school has authorization to provide. The policy and procedure should include the following:

- Responsibilities for monitoring student compliance with medication administration
- Responsibilities of the school employee when a student refuses medication
- Procedures for notifying parents/legal guardians
- Procedures for notification of licensed prescriber
- Completion of an occurrence report

Count the check marks above and circle the appropriate response below:

- 3 = There is policy and procedure and all items listed above are in place.
- 2 = There is policy and procedure and four to five items listed above are in place.
- 1 = There is a policy and procedure and one to three of the items listed above are in place.
- 0 = There is no policy and procedure regarding student non-compliance or refusal to take authorized medications.

8.4 Page 28. Reducing errors and omissions – check all that apply:

Policy and procedures assign the LSN/RN or designated school health personnel to:

- review reports of medication errors
- analyze patterns
- take steps for improvement

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all points are in place.
- 2 = The LSN/RN and school administration work collaboratively to reduce errors and omissions.
- 1 = Designated school staff reviews medication errors and omissions.
- 0 = None of the points listed above can be identified.

8.5 Page 28. A High Quality School Health Program – check all that apply:

- The school identifies students with conditions that require Individual Health Plans (IHPS) and utilizes applicable health information to develop them.
- Schools have highly qualified staff members who have access to an LSN and are trained in student health issues, first aid, and CPR.
- Teachers are be informed of their students' health needs.
- All students who need Individual Health Plans have them.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all three actions are in place.
- 2 = Three or four actions are in place.
- 1 = One or two actions is in place.
- 0 = None of the above items are in place.

Scoring Sheet

Guideline #8: Assurance, Monitoring, and Assessment

Instructions

1. Locate the score you marked for each item in the above questionnaire, and circle the corresponding number below for the same item. Circle only one number per item (e.g., circle only a 0, a 1, a 2, or a 3 for 8.1 Definitions). Repeat for all items in questionnaire.
2. Calculate the overall score for Guideline #8.

Guideline #8: Assurance, Monitoring, and Assessment

	Fully In Place	Partially in Place	Under development	Not in Place	
8.1 Definitions	3	2	1	0	
8.2 Procedures to Follow in Case of Medication Errors	3	2	1	0	
8.3 Refusal to Take Medication	3	2	1	0	
8.4 Reducing Errors and Omissions	3	2	1	0	Add up all column subtotals below:
Subtotals:	+ _____	+ _____	+ _____	+ _____	=
					↓
Overall Guideline #8 score				Total points ÷ 12 X 100	=

Planning

Guideline #8: Roles

Planning Question #1 – Areas of Strengths and Improvement

Look back at the items checked in this questionnaire. According to your responses, what are the areas of strengths and what areas need improvement for your school medication administration activities related to this guideline?

Areas of Strengths	Areas for Improvement

Planning Question #2 – Recommended Actions

For each area improvement, list some actions that might be taken or some approaches that might be used to address the problem. For example: utilizing a health advisory committee, spelling out the duties of various individuals connected with medication administration activities, reviewing all the laws related to medication administration and checking for compliance with those laws.

Guideline #9

School and Family Relationships

Questionnaire

9.1 Page 28. Communications and Collaboration – check all that apply:

The school has a variety of communication methods regarding medication Administration:

- telephone
- electronic
- in person
- All communication related to medication administration is documented.
- Communications related to medication administration is subject to federal and state data privacy laws.
- Language translation is provided (verbal and written).
- Health and educational plans are tools that include information and expectations for communication and collaboration.

Count the check marks above and circle the appropriate response below:

- 3= Yes, all of the items above can be identified.
- 2 = Four to six of the above items can be identified in medication policies and procedures.
- 1 = One to three of the items can be identified.
- 0 = None of the items can be identified.

9.2 Page 29. Documentation – check all that apply:

- LSN/RN and/or school administration is responsible for maintaining, assuring, and securing documentation of medication administration in students' private health records.
- All staff who administer medications and chart their activities on student records, are knowledgeable about the records, are required to secure records and keep the medication administration records up to date.
- The school district supports documentation and has forms related to medication administration available and accessible.
- Documentation is kept private and secure.
- All medication administration records need to be kept secure, so when someone takes a record out of the file, it must be signed out.

Count the check marks above and circle the appropriate response below:

3 = All five items listed above can be identified.

2 = Three or four of the items can be identified.

1 = Two items can be identified.

0 = No items can be identified.

Scoring Sheet

Guideline #9: School and Family Relationships

Instructions

1. Locate the score you marked for each item in the above questionnaire, and circle the corresponding number below for the same item. Circle only one number per item (e.g., circle only a 0, a 1, a 2, or a 3 for 9.1 Communication and Collaboration). Repeat for all items in questionnaire.
2. Calculate the overall score for Guideline #9.

Guideline #9: School and Family Relationships

	Fully In Place	Partially in Place	Under development	Not in Place	
9.1 Communication and Collaboration	3	2	1	0	
9.2 Documentation	3	2	1	0	Add up all column subtotals below:
Subtotals:	+ _____	+ _____	+ _____	+ _____	=
					↓
Overall Guideline #9 score				Total points ÷ 6 X 100	=

Planning

Guideline #9: School and Family Relationships

Planning Question #1 – Areas of Strengths and Improvement

Look back at the items checked in this questionnaire. According to your responses, what are the areas of strengths and what areas need improvement for your school medication administration activities related to this guideline?

Areas of Strengths	Areas for Improvement

Planning Question #2 – Recommended Actions

For each area improvement, list some actions that might be taken or some approaches that might be used to address the problem. For example: utilizing a health advisory committee, spelling out the duties of various individuals connected with medication administration activities, reviewing all the laws related to medication administration and checking for compliance with those laws.

Planning Question #3

List each of the actions identified in Planning Question #2. Use the five-point scales defined below to rank each action on five dimensions (importance, cost, time, commitment, feasibility). Add the ranking points for each action to get total points. Use the total points to help you choose the top priorities that you will implement.

Importance	How important is this priority action to my school? 5 = Very important 3 = Moderately important 1 = Not important
Cost	How expensive would it be to plan and implement this priority? 5 = Not expensive 3 = Moderately expensive 1 = Expensive
Time	How much time and effort would it take to implement this priority? 5 = Little or no time & effort 3 = Moderate time & effort 1 = Much time & effort
Commitment	How enthusiastic would the school community be about implementing this priority? 5 = Very enthusiastic 3 = Moderately enthusiastic 1 = Not enthusiastic
Feasibility	How difficult would it be to attain this priority? 5 = Not difficult 3 = Moderately difficult 1 = Very difficult

Recommended Actions from above Planning Question #2	Importance	Cost	Time	Commitment	Feasibility	Total Points	Top Priority Action? (Yes/No)

Guideline #10 Finances

Questionnaire

- 10.1 Page 29. Funding Source – check all that apply:
- Resources are available to support the school health program.
 - The EDRS (Electronic Data Reporting System) is used to document and report time spent by eligible staff for some students who need medications to benefit from special education.
 - All billing requirements are in place for third party billing (such as Medicaid and Minnesota Care) and are utilized for those students who are eligible.
 - Under the direction of the board, people from within the system, such as members of the health advisory committee, can identify financial sources and write grant applications to strengthen their district's health services program.

Count the check marks above and circle the appropriate response below:

- 3 = Yes, all of the items above can be identified.
- 2 = Two or three of the items above can be identified.
- 1 = One of the items above can be identified.
- 0 = None of the items above can be identified.

Scoring Sheet

Guideline #10: Finances

Instructions

1. Locate the score you marked for each item in the above questionnaire, and circle the corresponding number below for the same item. Circle only one number per item (e.g., circle only a 0, a 1, a 2, or a 3 for 10.1 Funding Source). Repeat for all items in questionnaire.
2. Calculate the overall score for Guideline #10.

Guideline #10: Finances

	Fully In Place	Partially in Place	Under development	Not in Place	
10.1 Funding Source	3	2	1	0	Add up column subtotal below:
Subtotal:	+ _____	+ _____	+ _____	+ _____	=
					↓
Guideline #10 Score				Total points ÷ 3 X 100	=

Planning

Guideline #10: Funding

Planning Question #1 – Areas of Strengths and Improvement

Look back at the items checked in this questionnaire. According to your responses, what are the areas of strengths and what areas need improvement for your school medication administration activities related to this guideline?

Areas of Strengths	Areas for Improvement

Planning Question #2 – Recommended Actions

For each area improvement, list some actions that might be taken or some approaches that might be used to address the problem. For example: utilizing a health advisory committee, spelling out the duties of various individuals connected with medication administration activities, reviewing all the laws related to medication administration and checking for compliance with those laws.

Planning Question #3

List each of the actions identified in Planning Question #2. Use the five-point scales defined below to rank each action on five dimensions (importance, cost, time, commitment, feasibility). Add the ranking points for each action to get total points. Use the total points to help you choose the top priorities that you will implement.

Importance	How important is this priority action to my school? 5 = Very important 3 = Moderately important 1 = Not important
Cost	How expensive would it be to plan and implement this priority? 5 = Not expensive 3 = Moderately expensive 1 = Expensive
Time	How much time and effort would it take to implement this priority? 5 = Little or no time & effort 3 = Moderate time & effort 1 = Much time & effort
Commitment	How enthusiastic would the school community be about implementing this priority? 5 = Very enthusiastic 3 = Moderately enthusiastic 1 = Not enthusiastic
Feasibility	How difficult would it be to attain this priority? 5 = Not difficult 3 = Moderately difficult 1 = Very difficult

Recommended Actions from above Planning Question #2	Importance	Cost	Time	Commitment	Feasibility	Total Points	Top Priority Action? (Yes/No)