

**South Carolina Department of Disabilities and Special Needs
Guidance for Completing Assessment Forms for Self-Administration of Medications
and Self-Use of Glucometers**

Who administers the assessment?

Assessments and forms are to be completed by a registered nurse (RN) at least annually and at any time a concern arises based on a medication error or staff concern about accuracy of glucometer use.

The assessment process requires actual observation of the person administering his/her own medication, not recall of what they may have done in the past or reports from other staff.

Prior to conducting the assessment, the RN should discuss the person's abilities with staff that are familiar with the person to ensure that an accurate assessment takes place. The person's methods of communication (verbal, picture boards, etc.) should be incorporated into the assessment process to ensure they are given the appropriate level of credit for their participation.

Completing the Self-Administration Assessment Forms

At the top of each form, fill in the person's name. In the Residence/Site space, fill in the name of the residence where the person lives or the day program they attend and receive medication. If the person receives medication at both locations and the medication administration process is not the same, and assessment will need to be completed at both locations.

The name and the professional credential (Title) of the person completing the assessment is to be legibly written in the Assessor and Title spaces. The date (day/month/year) the assessment is completed is to be written in the date space. The same form may be used up for up to three (3) assessment times.

For each item the person completes on the assessment form without verbal prompts or manual assistance, write a 'Y' for Yes in the Assessment column. If the person does not complete a step without verbal prompts or manual assistance write a 'N' for No on the Assessment column.

Tips for ensuring realistic assessment results

Recognizes the time a medication is to be taken/applied: The person does not necessarily need to tell time, but may respond that the medication is to be taken based on an activity such as "before breakfast" or "at bedtime."

Identifies correct medication: The person does not necessarily need to read the label on the medication container. A consistent method that the person has developed to accurately identify the specific medication can be used (e.g., the pharmacy or licensed nurse putting coded markings that do not obscure the label on the medication container).

Opens the correct container: If a bottle, the pharmacy may be able to replace child proof caps with non-child proof caps as long as doing so does not put any person at the site at risk.

Obtains appropriate fluids or food to ingest the medication: This includes pouring the fluid independently from a large container or using serving size fluids.

Returns the medication containers to appropriate locked storage area: If a central medication storage area is used at the site, this may mean handing the medication containers to a staff member to return to the central locked storage area.

Takes medication properly, swallowing medication completely: This means that they person does not “cheek” the medication and/or chew it (unless the medication is supposed to be chewed).

Washes hands: Hands should be washed with soap and water (preferred) or an alcohol-based hand sanitizer that contains at least 60% alcohol.

Authorization to Self-Administer medications and/or use Glucometer independently

When a person independently performs (without verbal prompts or manual assistance) all items of the appropriate Self-Administration of Medication assessment or Self-Use of Glucometer assessment, he/she may be considered for self-administration of those medications or to use the glucometer independently. A written order from the primary care provider should then be obtained for the person to complete those tasks.