



QUALIFIED MEDICATION AIDE RECORD OF ANNUAL IN-SERVICE TRAINING

State Form 51654 (R / 11-09)

Approved by State Board of Accounts, 2009

INDIANA STATE DEPARTMENT OF HEALTH - DIVISION OF LONG TERM CARE

INSTRUCTIONS: 1. Please print or type clearly.

2. No abbreviations.

3. **This form and fee must be submitted to ISDH by March 31.**

4. The QMA is responsible for completing the in-service education requirements, maintaining documentation of in-service education, and submitting, or ensuring the submission of, the qualified medication aide record of annual in-service education form and appropriate fee. **Annual in-service education MUST relate to medication and/or medication administration. If a QMA performs medication administration via a G-tube/J-tube, hemoccult testing, finger stick blood glucose testing, annual in-service must be done yearly.**

QMA Name: _____ QMA Certification #: _____
Last First M.I.

Home Address: _____
(street address (include Post Office box number, if applicable) City State ZIP code)

Phone: ____/____ CNA Expiration Date*: _____ (CNA status MUST be current)

Payment (check one)*: _____ Fee included OR _____ Date paid online

Date	Topic	Location (facility name)	Length (in ¼ hour segments, i.e., 0.25, 0.50, 0.75, 1.0 hour)	Signature of Instructor*	Approved	Not Approved
					Office Use Only	
Office Use Only		TOTAL APPROVED HOURS:		REVIEWED BY:	Date:	

I submit the above information as proof of having met the six (6) hour per year in-service requirement and hereby apply for re-certification.

QMA Signature*: _____

Date: _____

***Mandatory information, form will be returned if * items are not completed.**

For office use only:	
Entered by: _____	
Date: _____	
Receipt # _____	

IMPORTANT NOTICE

CERTIFICATION/RECERTIFICATION/REINSTATEMENT and IN-SERVICE EDUCATION REQUIREMENTS FOR QUALIFIED MEDICATION AIDE (QMA)

Effective January 1, 2005, the QMA certification process and in-service education requirement is mandatory every year. This is in accordance with Indiana Administrative Code 412 IAC 2-1-10. Under this rule all QMAs must meet the following three (3) requirements:

- 1. Be certified by the Indiana State Department of Health every year;**
- 2. Obtain a minimum of six (6) hours per year of in-service education in the area of medication administration; and**
- 3. Submit appropriate fee to Indiana State Department of Health with recertification request.**

RECERTIFICATION:

At least 30 days prior to the expiration of the certificate, the individual must:

1. obtain a minimum of six (6) hours per year of annual in-service education;
2. submit to the Indiana State Department of Health a qualified medication aide record of annual in-service education on the form approved by the ISDH; and
3. submit to the ISDH the appropriate fee.

The QMA is responsible for completing the in-service education requirements, maintaining documentation of in-service education, and submitting, or ensuring the submission of, the qualified medication aide record of annual in-service education form and appropriate fee.

REINSTATEMENT:

If the recertification fees and/or in-service education form is received by the ISDH ninety-one (91) or more days after expiration of the QMA certification, the individual is removed from the QMA registry and must be reinstated. For reinstatement as a QMA following removal from the QMA registry, the individual must:

1. complete an ISDH approved QMA course;
2. submit to the testing entity an application approved by the ISDH;
3. pass the written competency test in three (3) or fewer attempts with a passing score of 80%.

IN-SERVICE EDUCATION REQUIREMENTS:

Annual in-service education shall include medication administration. If facility policy allows the QMA to perform such functions in the facility, **annual in-service education shall also include:**

1. medication administration via G-tube/J-tube;
2. hemocult testing;
3. finger stick blood glucose testing (specific to the glucose meter used).

QMA certificates are effective upon issue and expire on March 31 of the next year. The annual in-service education requirement period begins each year on March 1 and concludes on the last day of February of the next year. In the case of an initial certificate, the annual in-service education requirement period begins on the QMA certification effective date and concludes on the last day of February of the next year. The in-service education requirement period therefore ends one (1) month prior to the expiration of the certification.

Qualified Medication Aide Record of Annual In-service Training form and fee (\$10.00 check or money order payable to Indiana State Dept. of Health) should be submitted to ISDH. The form and fee must be sent to:

Indiana State Department of Health
Cashier's Office
PO Box 7236
Indianapolis, IN 46207-7236

Failure to submit certification in a timely manner may result in additional fees or removal from the QMA registry. (Removal from the registry will require completion of a QMA course and passing of the QMA competency test for reinstatement).

If you have additional questions, please contact Gina Berkshire at gberkshire@isdh.in.gov or 317/233-7497 or Nancy Gilbert at ngilbert@isdh.in.gov or 317/233-7616.