

**INSTRUCTIONS FOR COMPLETING THE
MISSOURI SCHOOL DISTRICT ADMINISTRATIVE CLAIMING
“RANDOM MOMENT SAMPLING (RMS) OBSERVATION FORM”**

General Overview

The purpose of Random Moment Sampling (RMS) is to allow your School District to participate in the Missouri School District Administrative Claiming (SDAC) initiative. Time reporting is required in order to accurately assess what percentage of time staff spends on approved MO HealthNet-related Administrative Outreach activities. RMS is a time reporting technique that produces statistically valid results which identify the percentage of staff time that is spent on these approved activities.

You have been selected at random to identify your position classification and tell us what activity you were engaged in at a randomly chosen moment in time. The information you report on the “RMS Observation Form”, along with your co-workers’ responses, will be used to determine what percentage of staff time is spent doing MO HealthNet Administrative Outreach-related activities as well as other daily functions.

RMS Observation Form

When you receive your **RMS Observation Form**:

- Check to make sure your name and position are accurate. You may make changes to correct the form and then initial those changes.
- Please make note of your **Random Moment**, so that you will be prepared to complete the **RMS Observation Form** at your designated **date and time**.
- When completing the **RMS Observation Form**, state what activity you are/were performing in a brief sentence on the *Description of Activity* line(s). To accurately determine your activity, ask yourself the following questions: **(1) Who was I with? (2) What was I doing? (3) Why was it being done and what was the intended result? Please do not include any personal information (e.g., names of students, other staff etc.).**
- Check **Only One** box on the far right column that represents the activity that you are/were engaged in at your **Random Moment** based on the Activity Codes given as examples.
- Check **Only One** box on the left column designating your position.
- When completed, please **sign and date** the RMS Observation Form. (Note: Use the date of your Random Moment as the Signature Date on the RMS Observation Form.) **NEVER PRE-DATE THE RMS OBSERVATION FORM.**
- **If the “Needs To Be Validated By SDAC Coordinator” box is checked, then also have your School District’s designated SDAC Coordinator sign your RMS Observation Form.**
- Upon completion, immediately return your **RMS Observation Form** to your School District’s designated SDAC Coordinator.
- **DO NOT USE WHITE-OUT ON THE RMS OBSERVATION FORM!**

SECTION 1: POSITIONS

In **Section 1**, check the box that best describes your current position. If you feel that none of the position descriptions are applicable, then please check the box for “Other” and write in your position description in the space provided.

SECTION 2: ACTIVITIES

Select the activity you were performing by checking **only one box** that best describes what you were doing at your designated *Random Moment*. There is a brief description of the various types of activities included within each Activity Code printed on the back of the RMS Observation Form.