B4 School Check (B4SC) theory assessment

Name: _____

Email address: _____

Provider organisation / Practice name: _____

Date you attended B4SC training: _____

Please complete the following questions within six weeks of attending the two-day B4SC training.

This document will also provide a reference for you to use when providing the check.

1. What are the three main purposes of the B4SC?

   a) _____
   b) _____
   c) _____

2. The B4SC programme is nationwide, but some resources and processes are specific to the Waikato region, please name 3

   a) _____
   b) _____
   c) _____

3. Is the B4SC free of charge for all four-year-olds in New Zealand?

   _____

4. Who is the B4SC coordinator and what are their contact details?

   Name: _____

   Mobile: _____

   Email: _____

5. Who is the B4SC Clinical Lead and what are their contact details?

Name: _____

Mobile: _____

Email: _____

6. Using the following words, complete the paragraph:

- Public Health Nurses
- 4yrs 10mths
- 5yrs 7days
- 4yrs
- via bpac
- 4yrs 3mths
- Treasure Tin

Although children are eligible for the B4SC between the age of four and (_____) it is ideal to provide the check to the child as close to (_____) as possible. When the child is (_____) but not yet attended, you can refer to the (_____). Their service accepts children who meet their criteria and must be aged between 4yrs 3mths up until (_____). Referrals are made (_____).
A child is given a (_____) when they attend their check.

7. Please indicate which components of the B4SC check, if any, may still be provided once a child transitions to school?

_____

8. Can the B4SC or any / all components of the check be declined?

_____

9. Which TWO groups of health professionals can provide the B4SC as set by Te Whatu Ora?

a) _____
b) _____

10. Name two strategies we have in place in the Waikato to engage our hard-to-reach children in the B4SC programme?

a) _____
b) _____

11. List 6 (six) important points to cover with the child's caregiver when gaining consent for the B4 School check?

a) _____

_____

b) _____

_____

c) _____

_____

d) _____

_____

e) _____

_____

f) _____

_____

12. Describe **TWO** of the developmental milestones of a 'normal' four-year-old for the following:

- Speech language:
  a)_____
  b) _____
- Social / Emotional:
  a)_____
  b) _____
- Gross Motor:
  a)_____
  b) _____
- Fine Motor:
  a)_____
  b) _____
- Cognitive / Developmental:
  a)_____
  b) _____

13. Name two senior child health clinical advisors/multidisciplinary specialists that you would contact for guidance in making a referral?

    a) _____

    b) _____

14. What would you do if a child had not had their B4SC vision and hearing screen and/or the caregiver had concerns about the child's vision and/or hearing?

    _____

15. What would you do if a child was not engaged in early childhood education?

    _____

16. In a, b and c below, when should you refer:

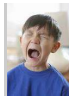
    a) Lift the Lip: _____

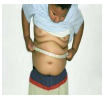
    b) BMI score: _____

    c) SDQ(P) total difficulties score: _____

    *Please note that you will refer for **PEDS R** if it is **Pathway A** High risk for MEB and/or DD*

17. If you notice a concern during the B4 school check, who would you **refer** to for:

	Dental	
	Immunisations	
	Vision and hearing	
	Behaviour	
	Development	

	Speech and language	
	Growth	
	Interpreting:	
	Child Protection/ Domestic Violence	
	Mental Health	
	Parenting	

18. What does SDQ stand for?

_____

19. What does the early childhood centre complete as part of the B4 school assessment.

_____

20. What website address would you use to find your B4SC resources?

_____

The following will be completed when assessment has been marked:

Assessor's name: _____

Signature of assessor: _____

Date: _____

Marks: _____

Comments:

_____

_____

_____

_____

_____