



B4 School Check (B4SC) theory assessment

Name: _____

Email address: _____

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 is the purpose of the B4SC?

2. The B4SC programme is nationwide, but what resources and processes are specific to the Waikato region?

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?

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

6. Using the following words, complete the paragraph:

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

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 4 yrs 3 mths up until _____. Referrals are made _____
_____. A child is given a _____ when they attend their check.

7. Will the B4SC or any components of the check be provided once a child goes to school?

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

9. What health professionals can provide the B4SC?

10. What strategies do we have in place in the Waikato to engage our hard to reach children in the B4SC programme?

11. What six points must be made to ensure the child's caregiver is fully informed before they sign the B4SC consent?

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

12. Describe the milestones of a 'normal' four year old: physical, social, emotional, development, behaviour, communication, speech and language.

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


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, c and d below, when should you refer:

- a) Lift the Lip: _____
- b) BMI score: _____
- c) PEDS pathway: _____
- d) SDQ(P) total difficulties score: _____




17. Who would you refer to for:

	Dental	
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	Immunisations	
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	Vision and hearing	
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	Behaviour	

	<p>Development</p>	<div></div> <div></div> <div></div>
	<p>Speech and language</p>	<div></div> <div></div> <div></div>
	<p>Growth</p>	<div></div> <div></div> <div></div>
	<p>Interpreting:</p>	<div></div>
	<p>Child Protection/ Domestic Violence</p>	<div></div> <div></div> <div></div> <div></div>
	<p>Mental Health</p>	<div></div> <div></div> <div></div>
	<p>Parenting</p>	<div></div> <div></div> <div></div>

18. What does SDQ stand for

19. What does the early childhood centre complete as part of the B4 schools 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:
