



B4 School Database Guide

When will I receive a Log in?

After attending the 2-Day training :

1. Complete the **Theory Assessment** (preferably within 6 weeks or on the day)
2. Complete your **Clinical Assessment** (supervised/observed by the B4SC champion/lead provider at your clinic)
3. Complete the **User Agreement Form**

Send ALL paperwork to: B4SC@pinnacle.health.nz

Once everything is submitted you will receive your B4SC Certificate and your login to the B4School Database.

B4School Database Login

We recommend Microsoft Edge or Chrome



B4SC Database: <https://b4sc.health.nz/>

This is where you input your username and temporary password.



The login form for B4 School Check. It features the B4 School Check logo on the left. To the right, there are two input fields: 'User Name:' and 'Password:'. Below the password field is a 'Log In' button.

New users will be prompted to create a password of your own choice (if it does not meet criteria, an error will be displayed).

✖ Error: Exception has been thrown by the target of an invocation..

B4School Database Support

Keep your username and new password in a safe place

Forgotten or lost password? – contact us to reset your password.

Moved practice? – contact us to update your profile.

Video Tutorial – “How to enter B4 school Checks” can be found here:





<https://www.pinnaclepractices.co.nz/resources/b4-school-check-resources/>

“Search All DHBs”

The “**Management**” tab is where you will find child B4SC records.

We **recommend** you enter the child’s **NHI** and >click “**Search all DHBs**”

- *This will find the record no matter its current “Status” or its Allocated Provider.*



Current User: Angelique Beumer
SPARE Unit 2
(Last Login 17/01/2024 10:05:54 AM)

MANAGEMENTMY ORGANISATIONMY DETAILSLOG OUT

Child SearchExport

NHI Number:WKR2983

First Name:

Surname:

StatusAssigned

Campaign:B4School

SearchSearch All DHBs

Ethnicity:

Suburb/City:

City:

ECC:

Provider:Angelique Beumer

Age From:

Age To:


DOB From:

DOB To:

Need:
☐ High
☐ Not High
☒ Both

Items Per Page
15

Results2 children found.

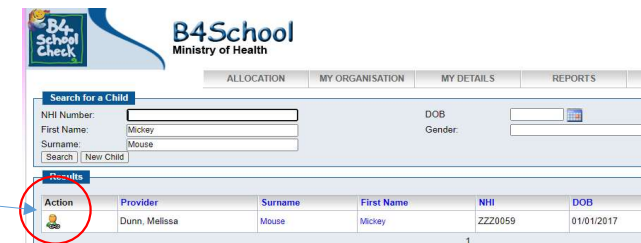
	Surname	First Name	DOB	Ethnicity	Early Childhood Centre	NHI	Suburb	City	Needs	Date Allocated	Events Due
	[REDACTED]	[REDACTED]	28/02/2019	NZ Maori		WKR2983	Chartwell	Hamilton	High	17/01/2024	

B4SC@pinnacle.health.nz | 0800 192 192 | 027 201 8240

Allocating a child record

If the child is allocated to another provider within your organisation, [you will need to allocate to yourself](#) so that you can **'return'** it.

1. Click on this icon



B4School Ministry of Health

ALLOCATION MY ORGANISATION MY DETAILS REPORTS

Search for a Child

NHI Number: DOB:

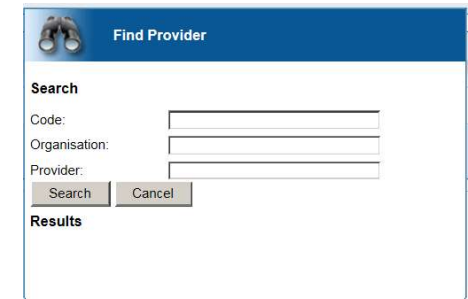
First Name: Mickey Gender:

Surname: Mouse

Action	Provider	Surname	First Name	NHI	DOB
	Dunn, Melissa	Mouse	Mickey	ZZZ0059	01/01/2017

2. Type your first name in the **“Provider”** box click **“Search”**.

3. Your **name** will be listed with your **“Organisation”**
Click on your name to **‘re-allocate’**.



Find Provider

Search

Code:

Organisation:

Provider:

Results

If the child is allocated to a provider outside your organisation? **Contact us** 😊

Child no longer enrolled with your clinic?

If a child has transferred to another medical centre or moved overseas?

Please **'Return'** the record in the B4SC Database with the 'return reason':



e.g. **"Moved to Australia"**

(think about advising other relevant services (e.g. NIR) so that resources aren't being wasted trying to find children who are no longer in NZ).

e.g. **"transferred (tx) to Katikati Medical Centre"**

(please enter the latest contact details you have for parent/caregiver)

Option for Hard-to-Reach Children in Waikato

Refer to Public Health Nurses B4school Outreach Service via Bpac when:

1. you have made at least **three** unsuccessful attempts to contact the family **AND**
2. the child is **aged between 4 yrs 3 mths and 4 yrs 9 mths** **AND**
3. they live in a **Quintile 5** area AND/OR the **child is of Māori & Pasifika ethnicity** (regardless of the deprivation quintile that they live in)

Include as much information as you can in the referral:

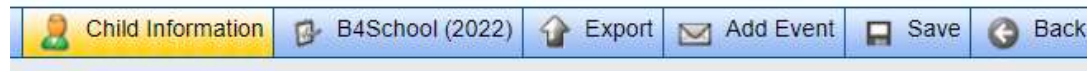
- **all contact details** you may have on your family tree
- **dates and ways** that you have tried to make contact
- **any safety issues** that the PHN may need to know.



How do I find a child's Quintile or Deprivation level?

The image shows a screenshot of a 'Child Information' form. The form has a yellow header with a person icon and the text 'Child Information'. Below the header, there are several fields: 'Ethnicity 2:', 'Ethnicity 3:', 'Gender:', 'Preferred Language:', 'Deprivation Quintile:', and 'Addresses'. The 'Deprivation Quintile:' field is circled in red. To the right of the form, there are three dropdown menus. The first dropdown menu is labeled 'Female', 'Male', and 'Unknown'. The second dropdown menu is labeled 'Preferred Language'. The third dropdown menu is labeled 'Deprivation Quintile'.

Lost contact? Call 0800 634 470 (NEIIS) - National Enrolment Immunisation Improvement Service


Opening the record - Child Information Tab



1. Click on the **child's name** and the record will open in '**Child Information**' tab.
2. If the **address** is not correct, click **Add Address**  (don't alter or delete!!)
 - Select "**Residential**" and enter the street address only
 - Scroll down and click - 
 - The GeoCode box will appear. Click on the correct option to update
 - If deprivation quintile = "**0**" check address (has it been GeoCoded?)
3. Caregiver details must be completed to progress to the "**B4 School**" tab. Please add a contact number.

Caregiver details

1. Click on 

- Their address will auto populate from the child's address. Enter manually if they are living at another address.
- **Yellow*** fields must be completed; this is mandatory data.
Very important - enter caregiver contact phone number/s
e.g. 

A B4SC **must have a written consent** signed by a parent or legal guardian on the paper copy. Verbal consent is used only for declines.

Consent Declined by Parent/Guardian

1. If parent/guardian [declines](#) the check, complete the **Caregiver Details** as usual

2. In the B4School (2023) tab:



“Consent Given” **No**

“Consent Type” **Written** or **Verbal**

“Given By” Select the **caregiver** from drop-down arrow and the **date** declined.

Consent Given:	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
Consent Type:	<input type="radio"/> Written	<input type="radio"/> Verbal	
Given By	<input type="text"/>		
Date:	<input type="text"/>		

3. Scroll down and click **“Save”**.

4. Then **“Return”** the record using the blue return arrow and the reason **“Check Declined”**.



Consent for B4School check

1. The B4SC **must have a written consent** signed by a parent or legal guardian.
2. In the B4School (2023) tab:



“Consent Given” **Yes**

“Consent Type” **Written**

“Given By” Select the **caregiver name** from drop-down arrow and select the **date** consent was signed.

Consent Given:	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> NA
Consent Type:	<input type="radio"/> Written	<input type="radio"/> Verbal	
Given By	<input type="text"/>		
Date:	<input type="text"/>		

3. Then, **scroll down and click “save”**. This will open all the components of the B4School check so you can enter the data.

The 6 components of a B4SCheck

1. **Child Health Questionnaire** – enter as answered **including** any appropriate notes.
2. **Dental** – Lift the Lip Scores **2 and above** will require a referral.
3. **Growth** – BMI of **> 98% or < 0.4 %** a referral **decision** is required.
4. **Immunisation** – If IMMS can't be done at time of B4SC follow-up is required for catch up
5. **PEDS** – **Pathway A** = referral **decision** required, **Pathway B** = referral optional, Pathway C, D, E = referral not required.
6. **SDQP** – score of **17 or more**, a referral **decision** is required.
7. **SDQ Teacher** form (Blue) – Do not enter data. Send form to the pre-school with reply-paid envelope. Data will be entered by Waikato B4SC Team when received from pre-school and returned to medical centre once entered. Any scores 'of concern' will be referred to B4SC Clinical Lead who may contact the pre-school teacher and/or B4SC nurse provider.

What is a referral decision?

At the end of each section an outcome is needed. If the results sit in a referral decision criteria the outcome **cannot** be either of the top two options:

- Completed – Advice given
- Completed – Not Referred

The screenshot shows a web-based form for recording a referral decision. The form includes fields for 'Entered By:', 'Checked By:', 'Date Completed:', and 'Outcome:'. The 'Outcome:' dropdown menu is open, showing a list of options: 'Completed - Not Referred', 'Completed - Advice Given', 'Completed - Not Referred', 'Completed - Referral Declined', 'Declined', 'Referred', and 'Under Care'. The 'Completed - Advice Given' and 'Completed - Not Referred' options are circled in red. The 'Completed - Referral Declined' option is highlighted in yellow. Below the 'Outcome:' field is a 'Notes:' text area. At the bottom left are 'Save' and 'Cancel' buttons. At the bottom right is an 'Add Referral' button with a green plus icon, which is circled in yellow. The 'Referrals' section is also visible on the left side of the form.

Reopen – to update/change data already entered

- Save each screen as you work on it.
- If you need to reopen a component to update/change what you have entered please click on the “**Created: date**” **NOT** “Add Follow up”.

Dental	Created: 22/08/2022	Status: Completed	Outcome: Completed - Not Referred
Growth	Created: 22/08/2022	Status: Completed	Outcome: Completed - Not Referred
Immunisation	Created: 22/08/2022	Status: Completed	Outcome: Immunised



- *Clicking “Add Follow up” will create a whole new version requiring you to enter details again. You would only use this to update the outcome e.g. from a referral at a later date.*

VERY important: If you are entering data ‘on behalf’ of a nurse?

Nurse’s name goes in the “**Checked By**” box. Your name in the “**Entered By**” box.

1. Child Health Questionnaire

- Complete this in discussion with parent/caregiver.
- If the child attends **pre-school**, please **ensure** you enter **the name of the preschool**.
- If they do not attend a pre-school, enter **“n/a or no”**.
- If there are any concerns raised in this section, that are covered in another component of the check, **you don't need to “add referral” in both places**. e.g.
 - if parent says “Yes” to concerns about the child's teeth – create a referral in the dental section either for Lift the Lip or for enrolment with Community Oral Health.
 - if parent says “Yes” they have concerns about **toileting** or **sleep**, these are not covered anywhere else. If a referral is required, it could be made here or PEDS.

2. Dental

Lift the Lip:

- if progression of decay **score is 1** - no referral decision required
- if progression of decay **score is 2 or more** - referral created or declined

Enrolment:

- already enrolled with oral health provider = Yes
- not enrolled = No
 - Either nurse or parent enrolls them at time of check, or
 - Nurse sends referral to community oral health

3.1. Growth

If result is a BMI percentile of **> 98% or < 0.4 %** a **referral decision** is required. The outcome **cannot be “advice given”**.

Referral Declined

- encourage parents to take some action
- regularly monitor the child's growth toward the child achieving a healthy weight



Referrals - to GP or Dietician

- ensure referrals are acted on to manage any associated clinical risks
- add a task to follow up if referred within the practice and once appointment is made, “Complete” the referral

Hint: Families who decline referral to external service might agree to PN or GP follow-up appointment.

3.1 Growth - Date function

Growth

Height: (cm)	<input type="text" value="114.50"/>	98% to 99.6%
Weight: (kg)	<input type="text" value="25.60"/>	99.6% and over
BMI:	<input type="text" value="19.53"/>	99.6% and over
Date Entered:	<input type="text" value="8/07/2016"/>	
<input type="button" value="Calculate Percentiles"/>		
Entered By:	<input type="text" value="Chris Kemps"/>	
Checked By:	<input type="text" value="Chris Kemps"/>	
Date Completed:	<input type="text" value="8/07/2016"/>	
Outcome:	<input type="text" value="Referred"/>	
Notes:	<div><div></div><div></div></div>	

Referrals

Referred To: Practice nurse - In Progress

Add Referral 

1. Enter Height and Weight
2. Use the calendar and select date
3. Select the provider names
4. Then click:
 - “Calculate Percentiles” to find out the BMI results
5. Enter the outcome
 - add any notes you need
 - click “Save”.

4. Immunisation

IMMS – enter as required in database with outcome

- If they require further catch-up you can indicate this by selecting “Partial” and “Completed” with notes to indicate that next appointment is scheduled.
- If they need follow-up immunisations by someone other than yourself, select “Partial”, and create a referral to show who will deliver those IMMS.
- The database now include a field for 12-month Immunisations

5. PEDS

Response Form: enter responses as completed by or with the parent/caregiver.

Score Form: Only score a circle or square if the parent has ticked “**Yes**” or “**A Little**”. If parent ticked “**No**” - **leave blank** on score form.

Interpretation Form:

- Total Circles Score = 2 or more → **Pathway A** (a referral decision is required)
- Total Circles Score = 1 → Pathway B (a referral is optional)
- Total Squares Score = 1 or more → Pathway C or D (a referral is optional)
- Total score = 0 → Pathway E (no referral required)

Enter brief notes to support referred or declined decisions.

6. SDQ

SDQ – P (score questions completed by/with parent/caregiver)

Use the resource sheet “Interpreting Symptom Scores...” as a guide to understand the outcomes.

Total Scores:

0 – 13 = Normal (no referral required)

14 – 16 = Borderline (referral is optional)


17 – 40 = Concerns (**referral decision required** and outcome must be either:
“**Referred**” (and referral created) or
“**Completed - Referral Declined**”, or
“**Under Care**” - if they are already accessing support services




Enter brief notes to support referred or declined decisions.

Referrals – e.g. creating a growth referral

When **BMI is over 98% or under 0.4%** and a **referral is consented to**:

Growth

Height: (cm) 98% to 99.6%
Weight: (kg) 99.6% and over
BMI: 99.6% and over
Date Entered: 

Entered By:
Checked By: 
Date Completed: 
Outcome: 


Notes:

Referrals

Step 1:
Select outcome "Referred"

The database may take you directly to the referral screen. If it doesn't, follow Step 2.

Step 2:
Click add referral



Cont'd next page

Creating a referral – cont'd

Referral

Referral Type: Growth

Referral Status: In Progress

Referred To: General Practitioner

If other, provide details:

Provider Details:

Date Referral Sent: 11/04/2022

Date Acknowledgement Received: 11/04/2022

Date Intervention Started:

Date Intervention Completed:

Reason for Referral:

Notes:

Date Referral Completed:

Save Cancel

Select who the referral is going to

“Date Referral Sent” and
“Date Acknowledgement Received” must be entered.
Otherwise check cannot be completed towards targets.

Audit notes explain that referral
criteria has been met due to BMI of
99.6% and over.

Click “Save”

Cont'd next page if you are “Completing” the referral

Completing a referral

Referral

Referral Type: Growth

Referral Status: Completed

Referred To: General Practitioner

If other, provide details:

Provider Details:

Date Referral Sent: 11/04/2022

Date Acknowledgement Received: 11/04/2022

Date Intervention Started: 11/04/2022

Date Intervention Completed: 11/04/2022

Reason for Referral: 103.00m 19.50kg

Notes: BMI meets referral criteria. Referred to GP for assessment of comorbidities.
[Moirah - Tuesday, 16 April 2022 2:31 p.m.]
GP referred to Paediatrician Waikato DHB

Date Referral Completed: 16/04/2022

Save Cancel

Choose referral status **“Completed”**

**“Date Intervention Started” and
“Date Intervention Completed”
must be entered (they can be the same)**

Audit notes to explain the child has been working with the provider

Select **“Date referral Completed”**

Then click **“Save”**

“Return” a record

In the  tab

On the left-hand side of the screen - click **“Allocation History”**



Enter - **“Provider phone number”** (the practice phone number)

Enter - **“Reason for Returning Child”** (e.g. B4SC completed, B4SC declined, etc)

Click on **blue arrow** to return the check to the Co-ordinator 😊



Reminder:

You will only see the blue return arrow, if the child is allocated to you.

Returning? – things to look out for

If any components are incomplete, you will see this alert →

10.247.236.20 says
This child has incomplete assessments. Return anyway?

OK Cancel

If you see one of your assessments e.g.

“No Child Health Questionnaire Check”

Go back to the “B4School” tab to view incomplete assessments. Remember – Click on the “Created: **Date**” to reopen – don’t click “Add follow-up”.

These 3 are **not** your responsibility.
You can “return anyway” – **click OK**.

B4School
Ministry of Health

Current User: Moira Hubbard
SPARE Unit 2
(Last Login 17/02/2022 8:54:16 a.m.)

MANAGEMENT MY ORGANISATION MY DETAILS LOG OUT

Allocation History

VYT8279: Daffy Duck

Child Information Allocation History Events

Coordinator

Name: Waikato DHB

Phone:

Email:

Allocation History

Return Child to Coordinator

Campaign: B4School

Provider Contact Number:

Return Date: 17/02/2022

Reason for returning child:

NB: Not all assessments are complete.

No Child Health Questionnaire Check.

No Hearing Check.

No SDQ Teacher Check.

No Distance Vision Check.

Return

‘Returning’ - Why is it Important?

- The child stays assigned to you until ‘returned’ to the B4SC co-ordinator
- If the check is **not** returned it **may not** be completed on the database.
- **This means it does not go toward the target and your hard work is effectively not counted!**
- If you make sure the child is **allocated to yourself before entering the check** you should have no trouble returning 😊



Contacts

Treasure Tins – to reorder visit this website:

<https://www.promoplace.com/seeitnz/showroom-stores.htm>

- Click on the **B4SC logo**
- On next page, click on **Waikato DHB** (in the blue ribbon)
- Each practice has their own login for ordering purposes

Any problems with this, give us a call or email and we will help or connect you with someone that can!

B4 School Co-ordinator – Angelique Beumer

027 201 8240 or B4SC@pinnacle.health.nz

B4SC Clinical Lead - Helen Connors

027 665 5515 or helen.connors@pinnacle.health.nz

B4SC Resources - <https://www.pinnaclepractices.co.nz/resources/b4-school-check-resources/>

B4SC Training/Education Events - <https://www.pinnaclepractices.co.nz/events/?Terms=b4+school>

Home Fire Safety Visit (HFSV) – Fire & Emergency Service visit to assess appropriate smoke alarm installation

Criteria - at least one of the following:

- Community Services Card
- Children <5
- Do not already have more than 1 smoke alarm on each level of their home.

Email the B4SC team - B4SC@pinnacle.health.nz with the following information:

Caregiver **name**

Residential **address** and

Caregiver **contact phone number**

OR

Families can self-refer at:

www.fireandemergency.nz/hfsv

B4SC@pinnacle.health.nz | 0800 192 192 | 027 201 8240

