Lii Michif Otipemisiwak
Family and Community
Services

SCREENING: Early Years Team

Please complete this form to assist in determination of service and/or referral

Li Zhoornii:

Lii Famii/ Li Zhenn Moond:

Telephone Number di Famii/di Zhenn Moond:

Mailing Address di Famii/ di Zhenn Moond:

Child's Name:

Birth Date:

Number of children in the home:

Number of members in household:

Daycare/School:

Family Doctor:

Pediatrician:

Diagnosis:

Medication(s)or allergies:

Emergency Contact Name:

Phone #:

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Michif community connection:

Métis citizenship: Y ☐ N ☐

Connected to Two Rivers Métis society: Y ☐ N ☐

Registered for MNBC family connections: Y ☐ N ☐

Current Services

Are there any services currently in place to help your child? Is there a contact person you think may be useful?

Understanding your child

How would you describe your child's temperament? (i.e., easy going, slow to warm up):

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Family Routines

Eating and sleeping

Are there any concerns around eating or sleeping?

Transitions

When upset, does your child calm down within a reasonable amount of time for their age? Please give examples:

Do you have any concerns about your child, or has someone mentioned any behavioural or developmental concerns about your child to you or another family member?

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10 – means even though there have been behaviours or challenges that could be, or were harmful for the child, I am confident the child is currently meeting their appropriate development for their age.

0 – I believe the child is struggling with behaviour or development and unable to meet their development for their age, or will be in the coming days or weeks, where would you rate this situation for this child today?

- Number:

- Rationale:

RECOMMENDED PROGRAM SUPPORT PLAN AND PRIORITIES:

Based on the information gathered and summarized, the level of service required for this child and family is:

- ☐ General MIDP/MSCD (Michif infant/supported child development) Supports. This may include any of the following services, but not limited to:
- ☐ Consultant Meeting/Home visits– Support – Planning.
- ☐ Parent Supports – Workshops – Development.
- ☐ Referrals to early intervention therapists, medical/diagnostic services, and other community service providers.
- ☐ Information/training about the child's development, support needs, and strategies to meet them.
- ☐ Child development screening and assessment
- ☐ Lending Toys or equipment for the child or the family.
- ☐ Lend Books, videos, articles for the family.
- ☐ Michif Language and Cultural activities/groups.
- ☐ Michif Elder support.

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Level 1 – Shared/Group Supports

This may include any of the following services, including General MIDP/MSCD Supports:

- ☐ LMO early years programming
- ☐ Community Based Programming with an MIDP/MSCD consultant.
- ☐ Coordination and access to other community inclusive programs and services.
- ☐ School transitioning supports.

Level 2 – One to One Support – will benefit from Supports.

- ☐ This may include any of the following services, including General MSCD Supports:
- ☐ Access a Michif support worker.
- ☐ And Small Group Work with a Michif Support worker.
- ☐ Community Based Programming with a Michif support worker.
- ☐ Coordination and access to other LMO programming or community inclusive programs and services.
- ☐ School district transition supports.

Level 3 – One to One Support – Significant, ongoing support required.

- ☐ This may include any of the following services, including General MSCD Supports:
- ☐ A One-to-One LMO Support Worker
- ☐ Coordination and access to other supports or services including specialized child medical and developmental services.
- ☐ Ongoing child development assessment and screening.
- ☐ Coordination and access to other supports or services including specialized child medical and developmental services.

Additional supports/services required:

707 Tranquille, Kamloops, BC, V2B 3J1 Phone: (250) 554-9486 Fax: (250) 554-9487