

Formola tal-Kunsens

Lenti fuq l-Iżvilupp ta' Wliedna hu programm ta' screening bil-għan li jkunu identifikati learning difficulties u/jew bżonnijiet edukattivi (educational needs) minn età bikrija. Dan l-iscreening għall-awtizmu jsir permezz ta' għoxrin (20) mistoqsija dwar it-tarbija bejn il-ġenitur/i jew gwardjan/i u professjonista mill-iscreening team. Kull mistoqsija jista' jkollha risposta ta' 'Iva' jew 'Le'.

Dan il-programm ta' screening ma jiġi post il-kura kontinwa tal-Well Baby Clinic, tas-servizz pedjatriku, jew tad-dentist. Int għandek id-dritt li ma tiġi sehem fil-programm, jew li tiegħi meta trid. F'dak il-każ il-kura medika ta' wliedek, l-edukazzjoni, u l-programmi tas-servizzi soċjali mhux ser ikunu affettwati. F'każ li tkun tixtieq li terġa' tibda tiegħi sehem, tista' tagħmel hekk meta tixtieq int.

Huwa rrakkomandat illi tipparteċipaw f'dan il-proċess minhabba l-vantaġġi ta' assessjar u interventi li t-fal jistgħu jibbenefikaw minnhom. Il-kunsens tiegħek hu meħtieġ sabiex:

- a) Ibnek/bintek jistgħu jieħdu sehem fil-programm;
- b) It-team ta' *Lenti fuq l-Iżvilupp ta' Wliedna* jkun jista' jipproċessa l-informazzjoni miġbura waqt l-iscreening programme;
- c) It-team li jaħdem fuq *Lenti fuq l-Iżvilupp ta' Wliedna* jirrilaxxa l-informazzjoni miġbura għal iktar assessjar, follow-up, referrals u/jew programmi oħrajn skont kif jista' jkun meħtieġ mill-Ministeru għall-Edukazzjoni u x-Xogħol u mill-Ministeru tas-Saħħa, u fl-aħjar interess tat-tifel jew tifla.

L-informazzjoni se tkun ipproċessata mit-team tal-iscreening b'konformità mal-liġi u l-Att tal-Protezzjoni tad-Data tal-2001 (Data Protection Act). Il-ġenituri jew gwardjani għandhom dritt għall-aċċess, rettifikazzjoni, imblokkar, jew tħassir ta' data jekk l-istess data hija inkorretta jew mhix tkun ipproċessata b'konformità mal-Att. Din id-data personali tinzamm sakemm l-iben jew bint jilħqu l-età ta' sittax, f'liema żmien l-istudent ikkonċernat jintalab kunsens mill-ġdid.

Data _____ Referenza _____

Jekk jogħġbok imla din il-formola b'kitba kbira u ċara

Jien naqbel li t-tifel/tifla tiegħi jieħu/tieħu sehem fil-programm *Lenti fuq l-Iżvilupp ta' Wliedna*.
Jekk ma tistax tattendi għas-sessjoni, qarib tiegħek jista' jmur minflok bil-permess tiegħek.

Jien ser nattendi għas-sessjoni **iew** Ma nistax nattendi u nagħti kunsens lil:

_____ I.D. _____ minfloki

Isem u kunjom it-tifel/tifla _____

I.D. tat-tifel/tifla _____ Data tat-twelid tat-tifel/tifla _____

Indirizz _____

Isem: Ġenitur/Gwardjan **A**

Nru tal-Karta tal-Identità

Numri Telefoniċi

Korrispondenza bl-email? Iva Le

Indirizz elettroniku

Firma

Isem: Ġenitur/Gwardjan **B**

Nru tal-Karta tal-Identità

Numri Telefoniċi

Korrispondenza bl-email? Iva Le

Indirizz elettroniku

Firma

Consent Form

Lenti fuq l-Iżvilupp ta' Wliedna is a screening programme which helps identify signs of learning difficulties and/or educational needs at an early age. This screening for autism is conducted by means of twenty (20) questions on your child in a discussion between parent/s or guardian/s and a member of the screening team. Each question receives a 'Yes' or 'No' answer.

This screening programme does not replace the ongoing care from the Well Baby Clinic, your paediatrician, or your dentist. You have the right not to participate in this screening programme, and to withdraw at any time during the programme. In such case, your child's medical care and other health, education or social service programmes will not be affected. Should you however wish to recommence the programme, you may do so at any time.

Participation in this process is recommended for the benefits it offers your child. Your consent and permission is required for:

- a) Your child to participate in the programme;
- b) The *Lenti fuq l-Iżvilupp ta' Wliedna* team to process the data collected during the screening programme;
- c) The release of your child's information by the team working on *Lenti fuq l-Iżvilupp ta' Wliedna* to be used for further assessment, follow-up, referrals, and/or other programmes as may be required by the Ministry for Education and Employment and the Ministry for Health, and in the child's best interests.

The data will be processed in accordance with the provision of the Data Protection Act 2001. Parents or guardians have the right to access the data of their children and request rectification, blockage or deletion if data is incorrect or not being processed in accordance with the Act. Such personal data are retained until the child reaches the age of sixteen, following which a fresh consent will be sought from the student concerned.



Date _____ Reference _____

Please fill in the form in clear block letters

I agree that my child participates in *Lenti fuq I-lzvilupp ta' Wliedna*.

If you cannot accompany your child to the screening session yourselves, a relative can do so provided he or she has your consent in writing in the space provided in this consent form.

I shall attend the session **or** I cannot attend and I consent to:

_____ I.D. _____ to accompany the child

Child's name & surname _____

Child I.D. _____ Child's date of birth _____

Address _____

Name: Parent/Guardian **A**

I.D. Card No.

Contact Numbers

Correspondence by email? Yes No

Email address

Signature

Name: Parent/Guardian **B**

I.D. Card No.

Contact Numbers

Correspondence by email? Yes No

Email address

Signature
