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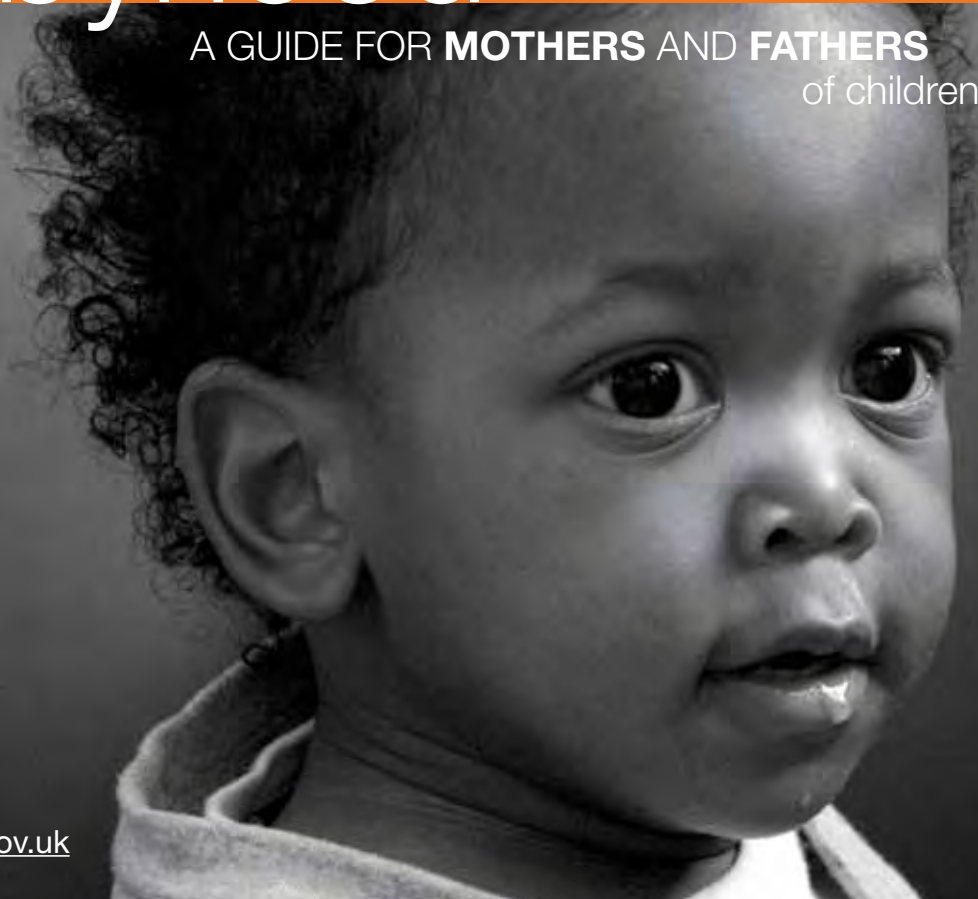
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ENTER

Babyhood

A GUIDE FOR **MOTHERS AND FATHERS**

of children from birth to five



www.rbkc.gov.uk



THE ROYAL BOROUGH OF
KENSINGTON
AND CHELSEA

Welcome

To all mothers and fathers, grandparents and carers, this booklet has been written to support you, your baby or new members of the family through the first year of life and beyond into toddlerhood and childhood.

Use it to help you through the more challenging moments of parenting when your baby is sick or needs special care. It is designed to prevent accidents in the home and to encourage you to take the precautions required to provide a healthy and protective environment. Most of all you should enjoy your baby's company and enjoy parenthood for the joy it brings.

Almost all babies, toddlers and children aged up to five will also get the most common childhood illnesses like Chickenpox, colds, sore throats and ear infections.

Often something that can seem quite serious, like a high temperature, can be put down to a cold, which can often be sorted out with a quick trip to your local Chemist. It is easy to panic and rush your child to the Accident and Emergency department with a simple cough or cold, which can be treated at home. If you are worried, you must of course go and see your doctor - but it is worth finding out a little more about the common, everyday illnesses so you know what to do and where to go to get help.

Throughout this booklet the term 'parents' has been used to mean mothers, fathers, carers and other adults with responsibility for caring for a child.

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A guide to services

The Royal Borough of Kensington and Chelsea has a wide range of healthcare professionals. See below for which professional is best to help you.



Chemist

Local Chemists or Pharmacists have knowledge of most everyday health issues. They can suggest the best medicine to help. There are often Chemists in supermarkets and many are open late.



Doctor or GP

You will need to register with a local Doctor. Your Doctor can advise, give you the medicines you need and point you in the right direction if you need other specialist services. You will need to make an appointment but most Doctors will see a baby quite quickly if you are worried. After 6pm most services are covered by an Emergency Doctor Service.



Health Visitor

Your Health Visitor will know you and your baby well. She is there to support you when you need her. The Health Visitor will visit you at home or see you in a clinic and can offer support and advice, and can tell you where to get extra help if you need it. Health Visitors are part of a team of Nurses and Community Nursery Nurses who are there to support you during the early years.



Midwife

Your Midwife has been specially trained to care for you and your baby throughout pregnancy, labour and birth. Your Midwife will continue to care for you and your baby between 10-24 days after birth.

Walk-in Centre

We have a Walk-in Centre open 8am-8pm for which appointments are not necessary.



NHS Direct 0845 4647

If you are worried, there is an NHS helpline you can call for advice from trained nurses. You are able to speak to them directly. Visit the website www.nhsdirect.nhs.uk for more information. After 6pm most services are covered by an Emergency Doctor Service.



Accident & Emergency (A&E)

This is for serious situations like head injuries, burns, broken bones or if you are really worried. You do not need to make an appointment but may need to wait.

Minor Injuries Units

We have a number of MIUs open 8am-8pm where appointments are not necessary but you may need to wait. These are for less serious injuries ([see local contacts for details](#)).



Types of thermometer

Digital thermometers are quick to use, accurate and can be used under the arm (always use the thermometer under the arm with children under five years-old). Hold your child's arm against his or her body and leave the thermometer in place for the time stated in the instructions.

Ear thermometers are put in the child's ear. They take the temperature in a few seconds and do not disturb the child, but they are expensive. Ear thermometers may give low readings when not correctly placed in the ear. Read the instructions carefully.

Strip-type thermometers, which you hold on your child's forehead, are not always an accurate way of taking temperatures. They show the temperature of the skin, not the body.

Mercury-in-glass thermometers have not been used in hospitals for years and are no longer available to buy. Do not use mercury thermometers. If your child is exposed to mercury, get medical advice immediately.

A normal temperature is between 36-36.8°C (96.8-98.24°F).

Source: NHS Choices.

Know the basics



Being prepared and knowing the signs

Parents are usually good at noticing when something is wrong with their baby from quite early on. It is normal to worry that you will not recognise the signs that your baby is unwell. Trust your instincts, you know your baby best.

Learn how to spot the signs of serious illness and how to cope if an accident happens. If you know the basics and you are well prepared, you will find it easier to cope - and less scary. Keep a small supply of useful medicines somewhere up high where a child cannot reach them. There is a useful list in the box on the right, of things to have at home just in case. Make sure you have got the right strength of medicine for the age of your child, always follow instructions carefully and check use by dates.

If your baby seems to have a serious illness it's important to get medical attention as soon as possible.

Stop

I have a new baby at home and I am worried I will not know what to do or what to look out for.

Think

Be prepared so that if your child becomes unwell you will know what to do and whom to contact.

Do

Keep a small supply of useful medicines. Keep emergency numbers in a place you can find them.

Chemist's tips

Keep a small supply of useful medicines. Include things like:



Thermometer
(See opposite page)



Plasters



Liquid painkillers
(e.g. baby paracetamol)



Barrier cream

The above information cannot replace specialist treatment. If you are still worried, contact NHS Direct or a Doctor (e.g. your GP or Walk-in Centre).



Health Visitor says

Possetting is when a baby brings up small amounts of milk. This is very common in the first few weeks and may be nothing to worry about. If you are worried get advice.

Being sick

A problem likely to get better on its own

It is common for babies to be sick - often in the early weeks as they get used to feeding and as their bodies develop. You can tell when your baby is vomiting, rather than just bringing up small amounts of milk, because there will be a lot more coming out. It can be frightening for your baby, so he or she is likely to cry. Lots of things can cause your baby to be sick.

Being sick often or lots of it, may be due to 'gastric reflux' where acid from the tummy can come up again. Babies can be grumpy and it can sometimes lead to poor feeding. If your baby is feeding well but does not seem alright, you may just need to change the baby's position during a feed. Feeding smaller amounts and more often may also help.



Health Visitor says

After the first few months, if your baby is suddenly sick it is more likely to be caused by a stomach virus rather than Possetting. Gastroenteritis is a tummy bug (see [Upset tummy pages](#)), which can come with diarrhoea.

Contact your Health Visitor or NHS Direct on 0845 4647 where you can speak to a trained Nurse.

Stop

I have a new baby. I have just given my baby a feed.

Think

He always seems to bring up small amounts of milk.

Do

This is known as 'Possetting'. As your baby develops it will stop naturally. Talk to your Health Visitor.

The above information cannot replace specialist treatment. If you are still worried, contact your Health Visitor or NHS Direct.



NHS Direct says

If your baby's crying seems different in any way (such as a very high-pitched cry or a whimper), then seek medical advice. Crying can sometimes be a sign that your baby is unwell. Trust your instincts - you know your baby best. If in doubt, call NHS Direct on 0845 4647 where you can speak to a trained Nurse.

Crying

Understanding why

All babies cry, especially in the first few weeks after birth. Crying is their way of letting you know they need something or are uncomfortable. They may need changing, they may be hungry or just need a cuddle. Always burp your baby after a feed as this will help.

If your baby cries suddenly and often, but otherwise appears to be happy and healthy, he or she may have colic. Colic is common and although uncomfortable it is not serious and usually affects babies only in the first few months of their lives. The most common symptom of colic is continuous crying, which typically occurs in the late afternoon or evening. Other signs include a flushed appearance, drawing the legs to the chest, clenching fists, passing wind and trouble sleeping.

When a baby cries, it can be upsetting. It is very important to stay calm and do not be afraid to ask for help.

Stop

Is your baby very restless and crying constantly?

Think

Your baby may need a cuddle and some reassurance.

Do

Do not worry, keep checking for unusual signs and get support if you feel tired or frustrated.

Health Visitor says

Finding out why your baby is crying is often a matter of going through all the possible options.

Things to check first are:

- ✓ Does the nappy need changing?
- ✓ Could the baby be hungry?
- ✓ Could the baby be too hot?
- ✓ Could the baby be too cold?

These are simple things which could be causing your baby to cry.

The above information cannot replace specialist treatment. If you are still worried, contact NHS Direct or a Doctor (e.g. your GP or Walk-in Centre).



Health Visitor's tips



Leave your baby in a warm, safe place with no clothes or a nappy on, to let the air get to the skin.



Use a barrier cream.
(see Chemist says box opposite)



Remember to change and check the nappy often.

Nappy rash

A common problem that is easy to treat

Nappy rash is very common and can affect lots of babies. It is usually caused when your baby's skin comes into contact with wee and poo that collects in the nappy.

A nappy rash causes your baby's skin to become sore. The skin in this area may be covered in red spots or blotches. You might need to change the nappy more often.

Most nappy rashes can be treated with a simple skincare routine and by using a cream you can get from the Chemist. With a mild nappy rash, your baby will not normally feel too much discomfort.

However, some nappy rashes are more serious and can be caused by something else. A bad rash will be more upsetting for your baby, and may need medical treatment. Talk to your Health Visitor if the problems continue.

Stop

There is a red, sore rash around the nappy area. Baby is uncomfortable and cries a lot.

Think

Has your baby been in a dirty nappy for a long period of time?

Do

Change the nappy often. Speak to your Health Visitor and ask your Chemist about creams.



Chemist says

Call in and chat to us about creams we can provide you with over the counter.

There are two types of nappy cream available. One is a barrier cream to keep wee away from your baby's skin. The other is a medicated cream, that is good for clearing up any soreness but should only be used when advised by a health professional.

The above information cannot replace specialist treatment. If you are still worried, contact a Chemist or your Health Visitor.



Health Visitor says

Baby skin is more delicate than ours. Try to limit the amount of products you use on the skin and never leave your baby out in the sun (see [Sun safety pages](#)).

Cradle Cap needs no specific treatment, although gently washing the baby's hair and scalp may stop build-up of the scale. Use just a small amount of a pure, natural oil - such as olive oil or vegetable oil - on your baby's scalp and leave it on at least 15 minutes before washing it off.

Rashes and dry skin



Baby skin needs extra care

A baby's skin is thinner and needs extra care. Dry, flaky skin, some blemishes, blotches and slight rashes are normal in newborns and will naturally clear up. If your baby is otherwise well but has a rash you are worried about contact your Midwife or Health Visitor. Another common rash for babies is heat rash. This mainly appears on the head and neck as tiny red spots and is nothing to worry about. Keep the baby warm but not hot and try to dress him or her in natural cotton clothes, with nothing that can rub on the skin.

Your baby may also suffer from something called Cradle Cap. This is the name given to the yellowish, greasy scaly patches on the scalp of newborns and usually appears in the baby's first three months. It can look like a bad case of dandruff and is harmless, it does not cause any irritation to your baby and usually clears up by the time he or she is two years-old.

Doctor says

Contact your Doctor or go to A&E immediately if your baby has a rash that does not disappear when you press a glass to it. This may be a sign of Meningitis and needs to be seen by a Doctor no matter how well your baby seems.

Seek immediate advice if your baby has a rash and a high temperature or vomiting (see [Meningitis pages](#)).

Stop

Your baby's skin may be flaky and dry.

Think

Dry skin is common in newborn babies, as their skin is 15 times thinner than that of an adult.

Do

Avoid soap and using products on your baby's skin. Wash your baby in clean water.

The above information cannot replace specialist treatment. If you are still worried, contact NHS Direct or a Doctor (e.g. your GP or Walk-in Centre).



Safer sleeping

Reducing the risks of cot death

A cot in your room is the safest place for your baby to sleep in the first six months. Keep the cot tidy and do not use plastic sheets. Babies can overheat, so try to keep the room between 16-20°C. Do not use duvets, quilts or pillows until your baby is one year-old, and never use hot water bottles or electric blankets. Always position your baby in the 'Feet to Foot' position, with the feet at the foot of the cot so that he or she cannot move down under the blanket.

Unless a health professional has told you to do something different, always put your baby to sleep on his or her back. Never let your baby fall asleep propped up on a cushion, on a sofa or chair, and do not let anyone fall asleep while nursing your baby.

Stop

Always put your baby to sleep in the 'Back to Sleep' and 'Feet to Foot' position.

Think

Babies are not good at keeping their temperature constant, so make sure they do not get too hot or too cold.

Do

Keep your baby's cot in your room for the first six months.



Health Visitor says

If you take a baby who cannot sleep into your bed, do not take any medicine, drugs or alcohol that may make you sleep more heavily than usual. Remember that when sleeping next to you, your baby will be warmer anyway, so if the baby falls asleep under your duvet he or she may get too hot. Be aware that babies face a bigger health risk if you or your partner smoke.

The above information cannot replace specialist treatment. If you are still worried, contact NHS Direct or a Doctor (e.g. your GP or Walk-in Centre).



Sticky eyes

Common in newborn babies

'Sticky eyes' are common in newborn babies and young children while their tear ducts are developing. You may see some sticky stuff in the corner of the eyes or the eyelashes may be stuck together.

It normally clears up on its own, but you may have to clean your baby's eyes regularly with damp cotton wool. Use clean, cooled boiled water. Wipe each eye from the corner by the nose outwards. Use a clean piece of cotton wool for each wipe.

The signs of 'sticky eyes' can sometimes be confused with an infection called 'Conjunctivitis'. With conjunctivitis the signs are yellowy, green sticky goo which comes back regularly. If you notice this, contact your Health Visitor or Doctor. This can be passed on easily, so wash your hands and use a separate towel for your baby.

Stop

Is there discharge in the corner of your baby's eye and do the eyelashes appear to be stuck together?

Think

Sticky eyes is a common condition that affects most babies, speak to your Health Visitor.

Do

Use cooled boiled water on a clean piece of cotton wool for each wipe.

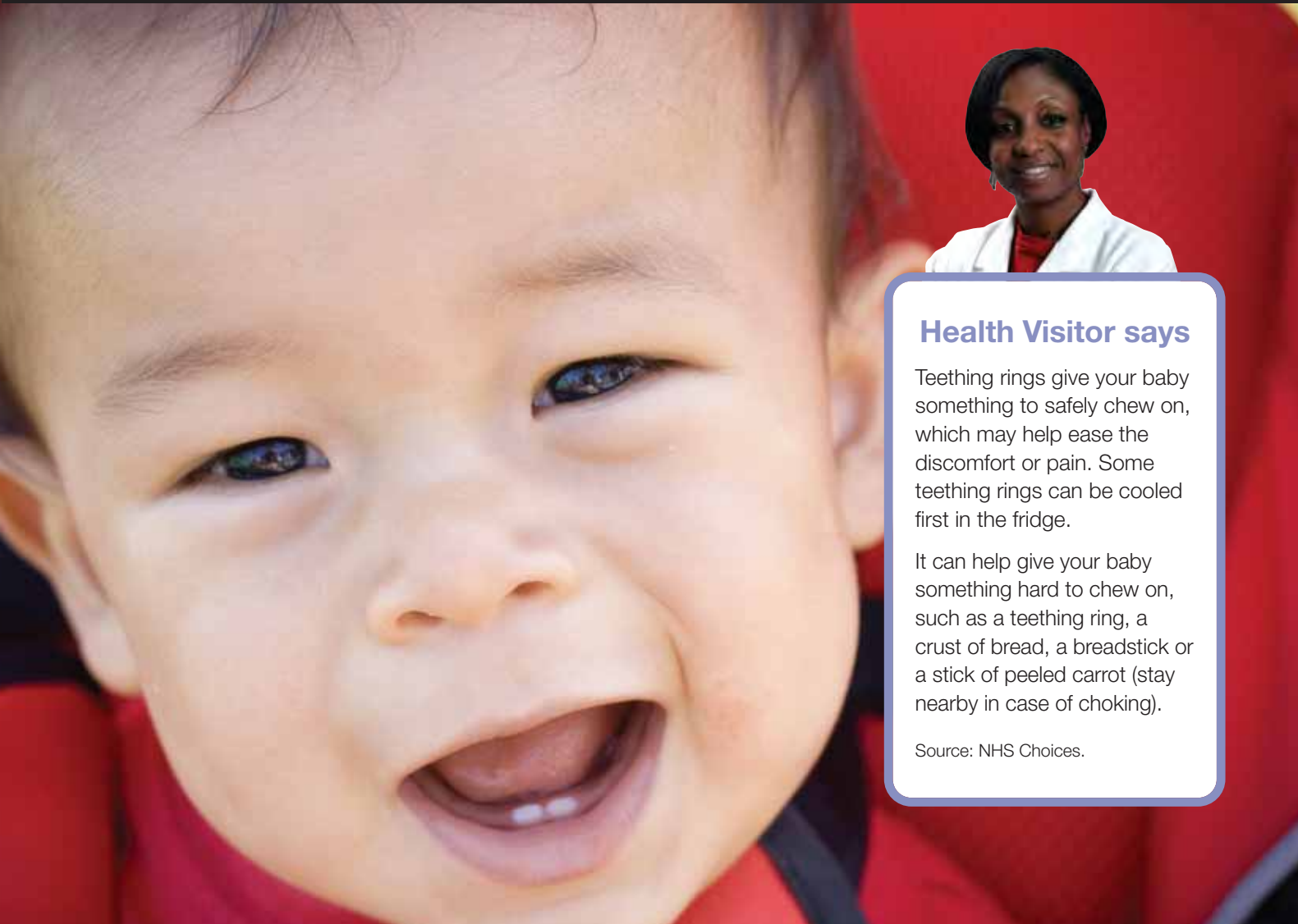


Health Visitor says

Cooled boiled water is the best option for cleaning a newborn baby's eyes.

Use clean, cooled boiled water. Wipe each eye from the corner by the nose outwards. Use a clean piece of cotton wool for each wipe. Remember to wash your hands before and afterwards and avoid sharing towels to prevent spreading infection.

The above information cannot replace specialist treatment. If you are still worried, contact NHS Direct or a Doctor (e.g. your GP or Walk-in Centre).



Health Visitor says

Teething rings give your baby something to safely chew on, which may help ease the discomfort or pain. Some teething rings can be cooled first in the fridge.

It can help give your baby something hard to chew on, such as a teething ring, a crust of bread, a breadstick or a stick of peeled carrot (stay nearby in case of choking).

Source: NHS Choices.

Teething trouble

Every baby goes through it

A baby's first teeth (known as milk teeth) usually develop before your baby is born. Teeth generally start to show when a child is four to nine months-old, although every baby develops at his or her own pace, this is known as 'teething'. Some babies show few signs while others find it more uncomfortable - they get hot red cheeks, dribble a lot, are not hungry, seem a bit grumpy and chew on everything.

There are ways you can help make teething easier for your baby. Every child is different, and you may have to try a few things until you find one that works for your baby. Try teething gels and teething rings and talk to the Chemist for advice.

Now is a good time to think about your child's tooth care routine. You can brush their teeth with a soft baby toothbrush and baby toothpaste. Take your baby with you when you are going to the Dentist.



Chemist says

If your baby is uncomfortable, you may want to give him or her medicine which has been made for children which you can buy from the Chemist. These medicines contain a small dose of painkiller, such as paracetamol, to help ease any discomfort. The medicine should also be sugar-free. Make sure you read all instructions or ask your Chemist about how to use them.

Stop

Look for red cheeks and gums, dribbling, off their food, chewing on things and seeming cross.

Think

Your baby is four to nine months-old, and may be teething.

Do

Ask your Chemist about gels and teething rings. Start your baby's tooth care routine as soon as possible.



The above information cannot replace specialist treatment. If you are still worried, contact a Chemist or your Health Visitor.



Health Visitor says

It is important to keep babies cool as itching gets worse if they are hot. Try calamine lotion (especially at night) to help stop them itching and scratching the blisters which could cause scarring.

Chickenpox

Most children will catch it

Chickenpox is a mild disease that most children catch at some point. It takes 10-21 days for the signs to show. If you are sure it is Chickenpox you do not need to go to your Doctor unless your child is very unwell.

Chickenpox is most common in children who are between two and eight years-old. They can pass it on to others from about two days before the rash appears until roughly five days after. The rash usually appears on the chest and back. You and your child should stay away from other people until all of the blisters have fully burst and dried which usually happens five to seven days after the first blister appears. You can take children out if they are well enough, but be careful to keep away from other people. After the last blister has burst and dried, they are no longer likely to pass the infection on.

Chickenpox spreads from spit, snot in sneezes and coughs from a person who has Chickenpox.

Stop

Do they have an itchy rash (looks like blisters) mainly on the chest and back?

Think

Chickenpox is a common illness among children, particularly those under age eight.

Do

Stay away from others until the blisters have dried. Call NHS Direct for advice on how to care for your child.



Doctor says

After having Chickenpox, the virus stays in the body. Later in life the virus can come back in a different form known as Shingles.

Chickenpox is easy to pass on to someone who has not had it before. If your child has Chickenpox keep them away from others.

If you are pregnant and have had Chickenpox in the past it is likely that you are immune. However, please contact your Midwife or Doctor for advice.

The above information cannot replace specialist treatment. If you are still worried, contact NHS Direct or a Doctor (e.g. your GP or Walk-in Centre).



Coughs and colds



A cuddle can go a long way

There are some good things about children catching a few coughs and colds. It helps them build-up natural defences and fight off viruses.

Most bugs will run their course without doing any real harm because they are viruses which get better on their own, however there are things you can do at home to help:

- ✓ Give your child lots to drink.
- ✓ Try infant paracetamol (not aspirin).
- ✓ Keep the child away from smoke, do not let people smoke at home, around your child or come into contact with your child if they have recently smoked.
- ✓ Keep calm - a cuddle goes a long way.
- ✓ Talk to your Chemist but remember that coughing is the body's way of keeping the lungs clear.

Do not pass it on:

Catch it Germs spread easily. Always carry tissues and use them to catch coughs or sneezes.

Bin it Germs can live for several hours on tissues. Dispose of your tissue as soon as possible.

Kill it Hands can pass on germs to everything you touch. Clean your hands as soon as you can.

Chemist says

Children can also be treated using over the counter painkillers to help bring down a raised temperature. Some are available as a liquid for children and can be given from the age of about three months. Check with the Chemist and tell them how old your child is. Always check with your Chemist if you are not sure which treatments you can give your child.

Stop

Is your child coughing and sneezing, has a mild temperature and seems a bit poorly?

Think

It is probably no more than a cold and your child just needs a bit of extra comfort.

Do

Ask the Chemist for advice on painkillers and keep an eye on your child in case things get worse.

The above information cannot replace specialist treatment. If you are still worried, contact NHS Direct or a Doctor (e.g. your GP or Walk-in Centre).



Ear problems

Babies' ears need to be treated with care

Babies may develop some sort of ear problem at certain times. Most children have grown out of ear infections by the age of seven. Most ear infections are caused by a virus which will get better by itself and will not need antibiotics.

Babies have some natural protection against infections in the first few weeks - this is boosted by breastfeeding. In babies and toddlers, bacteria pass from the nose to the ears more easily. Ear infections can be painful and your child may just need extra cuddles and painkillers from the Chemist. Your child may have swollen glands in the neck - this is the body's way of fighting infection.

Children who live in households where people smoke (passive smoking) or who have a lot of contact with other children, like those who go to nursery, are more likely to get ear infections. Speak to your Health Visitor about safely cleaning your baby's ears as they can be easily damaged.



Health Visitor's tips

- ✓ A baby's ears need to be treated with care when cleaning.
- ✓ Never use a cotton bud inside your child's ear.
- ✓ If they have a temperature, wax may flow out.
- ✓ Use different, clean damp cotton wool on each ear to gently clean around the outer area.

What are the signs of an ear infection?

The signs are a raised temperature, general irritability and pain or discomfort. They may even have a pus-like discharge, which can also be associated with a blocked feeling in the ear or hearing loss. Although most ear infections settle down without any serious effects, there can be mild hearing loss for a short time (two to three weeks).

Stop

If your child is hot, grumpy, has swollen glands, is not eating and has a cold.

Think

Your child has lots of contact with other children. Your child may have an ear infection.

Do

Go to your Doctor, who will look at your child's ears to try to find the cause of the problem.

The above information cannot replace specialist treatment. If you are still worried, contact NHS Direct or a Doctor (e.g. your GP or Walk-in Centre).



Fever

Over 38°C means a fever

A normal temperature is between 36-36.8°C (96.8-98.24°F). In children, any temperature of 38°C (100.4°F) or above is considered high and is classed as a fever. To find out if your child has a fever, there are different kinds of thermometers, these include digital thermometers, ear thermometers and skin-strip thermometers ([see know the basics for more information](#)).

A baby cannot regulate their own body temperature and can easily get too hot. Teething can also cause a slight rise in temperature and it is also common for babies and children to get a fever within 48 hours of being immunised. Whenever a baby or toddler has a high temperature keep an eye out for any developments.

Fever can often be treated at home with infant paracetamol (not aspirin) which you can get from the Chemist.

There are certain times when your child should see or contact a Doctor:

- If your baby is under three months and has a temperature of over 38°C (100.4°F) or is three to six months and still has a temperature higher than 39°C (102.2°F) an hour after your baby has taken the correct dose of infant paracetamol.
- If the baby is being sick without diarrhoea, or develop a rash as well as a fever.
- If the baby drinks less than usual, wees less than usual and is unusually sleepy.
- Being unwell for some time.

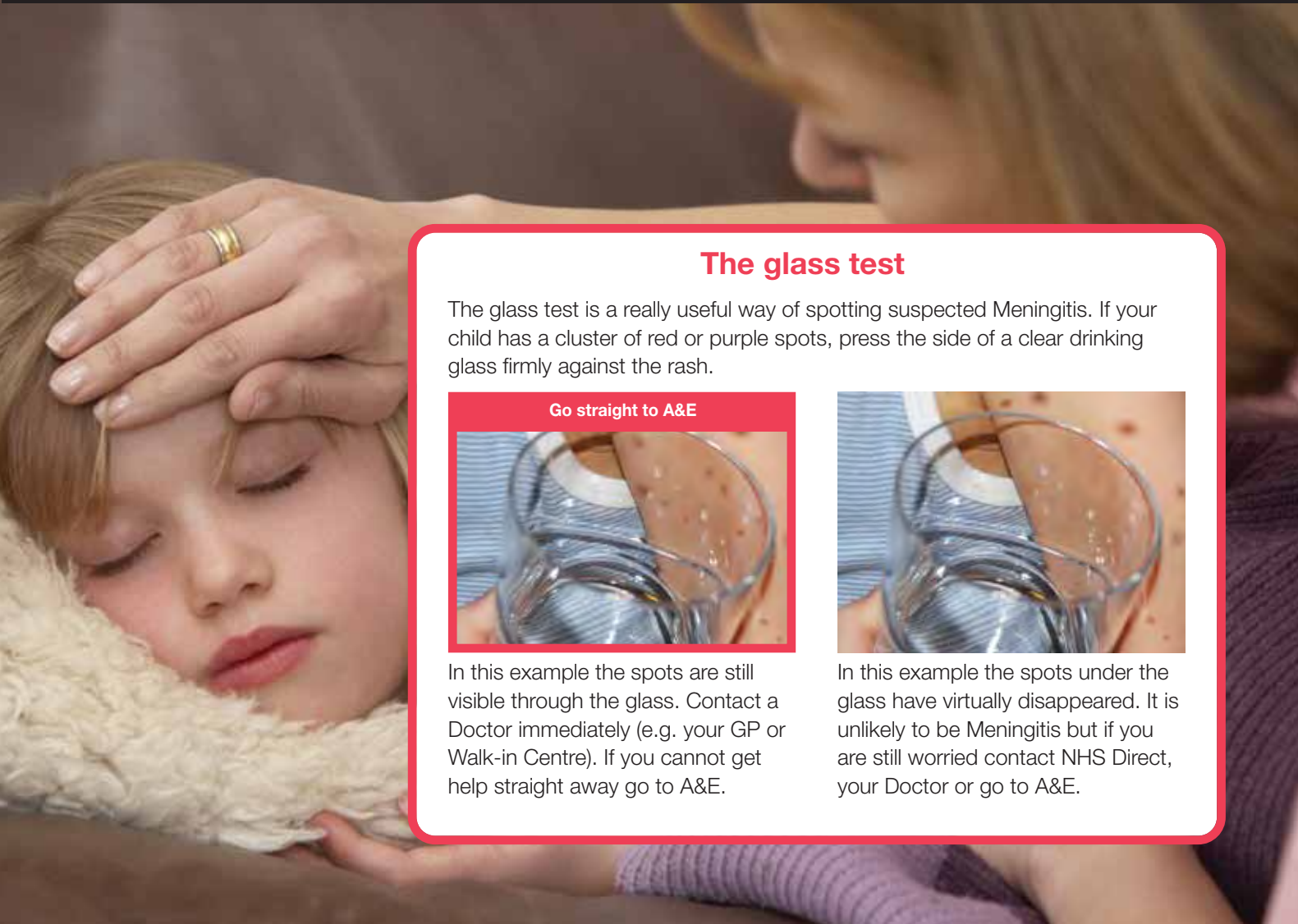


Doctor's tips

Seek medical help if your child:

- ✓ Is dehydrated (signs include less wet nappies and weeing less, dry mouth, sunken fontanelle, absence of tears, sunken eyes and poor overall appearance).
- ✓ Has a fit.
- ✓ Develops a non-blanching rash i.e. the rash does not disappear when pressed.
- ✓ Has a fever that lasts longer than five days.
- ✓ Is getting more unwell.

The above information cannot replace specialist treatment. If you are still worried, contact NHS Direct or a Doctor (e.g. your GP or Walk-in Centre).



The glass test

The glass test is a really useful way of spotting suspected Meningitis. If your child has a cluster of red or purple spots, press the side of a clear drinking glass firmly against the rash.

Go straight to A&E



In this example the spots are still visible through the glass. Contact a Doctor immediately (e.g. your GP or Walk-in Centre). If you cannot get help straight away go to A&E.



In this example the spots under the glass have virtually disappeared. It is unlikely to be Meningitis but if you are still worried contact NHS Direct, your Doctor or go to A&E.

Meningitis

A serious illness

Meningitis is a swelling around the brain. It is a very serious illness, but if it is treated early most children make a full recovery.

You should always treat any case of suspected Meningitis as an emergency.

Early signs may be like having a cold or flu. Children with Meningitis can become seriously ill very fast, so make sure you can spot the signs. Your child may have a cluster of red or purple spots. Do the glass test. This rash can be harder to see on darker skin, so check for spots over your baby or child's whole body as it can start anywhere (check lightest areas first).

The presence of fever and any other of the above symptoms should be taken extremely seriously. Not all children will show all the signs listed on the right. →



Doctor says

Look and learn about the signs below; if any are present contact a Doctor.



Stop

Is your child showing signs like those in the box on the right?

Think

You should always treat any case of suspected Meningitis as an emergency.

Do

Do the glass test. **If spots do not change colour treat as an emergency and get help now.**

If you are worried, contact a Doctor (e.g. your GP or Walk-in Centre). If you cannot get help straight away go to A&E.



Sleeping difficulties

How can I help my child?

Newborn babies sleep for up to 16 hours a day, and at first they will wake every two or three hours to feed.

At about six weeks you should try introducing a bedtime routine for your baby. Try to do the same things every night, as getting into a rhythm will make your baby feel relaxed and secure.

After about four months babies should start sleeping for longer periods, and by about six to eight months, your baby can probably manage without a night feed and may sleep for six to eight hours without waking.

When you put your baby to bed, put pyjamas and a fresh nappy on him or her and place the baby into bed on the back. You may also like to sing a lullaby or read a bedtime story to settle your baby.

Stop

Stay calm and take a few minutes to compose yourself if you feel you need to.

Think

Remember that every child's sleep pattern is different.

Do

Introduce a routine as early as six weeks if you can.

Tips to encourage sleeping:

- Develop a consistent bedtime routine from an early age.
- Create a calm and relaxed place to sleep.
- Reduce stimulation - if necessary remove toys that may over excite your baby rather than signal it is bedtime.
- Read a bedtime story.
- Make sure that your baby's room is neither too hot nor too cold (recommended room temperature is 16-20°C or 61-68°F).

The above information cannot replace specialist treatment. If you are still worried, contact a Chemist or a Doctor (e.g. your GP or Walk-in Centre).



Chemist's tips

There are lots of ways you can care for your children at home.

Things to try are :

- ✓ Give them regular drinks - try small amounts of cold water.
- ✓ Being extra careful with hand hygiene (use soap and water and dry hands well with a clean towel).
- ✓ Rehydrating solutions come in pre-measured sachets to mix with water. It helps with dehydration.

If your child is unwell for more than 24 hours see your Doctor. If your baby is newborn or very unwell contact your Doctor straight away.

Upset tummy

Not nice for you or your child

Sickness and diarrhoea bugs are caught easily and are often passed on in places where there are lots of children - like playgroups or nurseries.

Feeling sick and suddenly being sick are normally the first signs. Diarrhoea (runny poo) can follow afterwards. Take your child to see your Doctor if he or she is unwell for longer than 24 hours or sooner if the baby is newborn or if you notice signs of dehydration. ➡

If you are breastfeeding, keep on doing so. Offer older children plenty of water, or an ice-lolly for them to suck. If they want to eat, give them plain foods like pasta or boiled rice (nothing too rich or salty). If you are bottle feeding ensure bottles and teats are sterilised correctly.

Keep them away from others who may pick up infection. Make sure everyone washes their hands.

Stop

Your child is being sick or has runny poo.

Think

To help, get your child to drink lots. Your child most probably has a tummy upset.

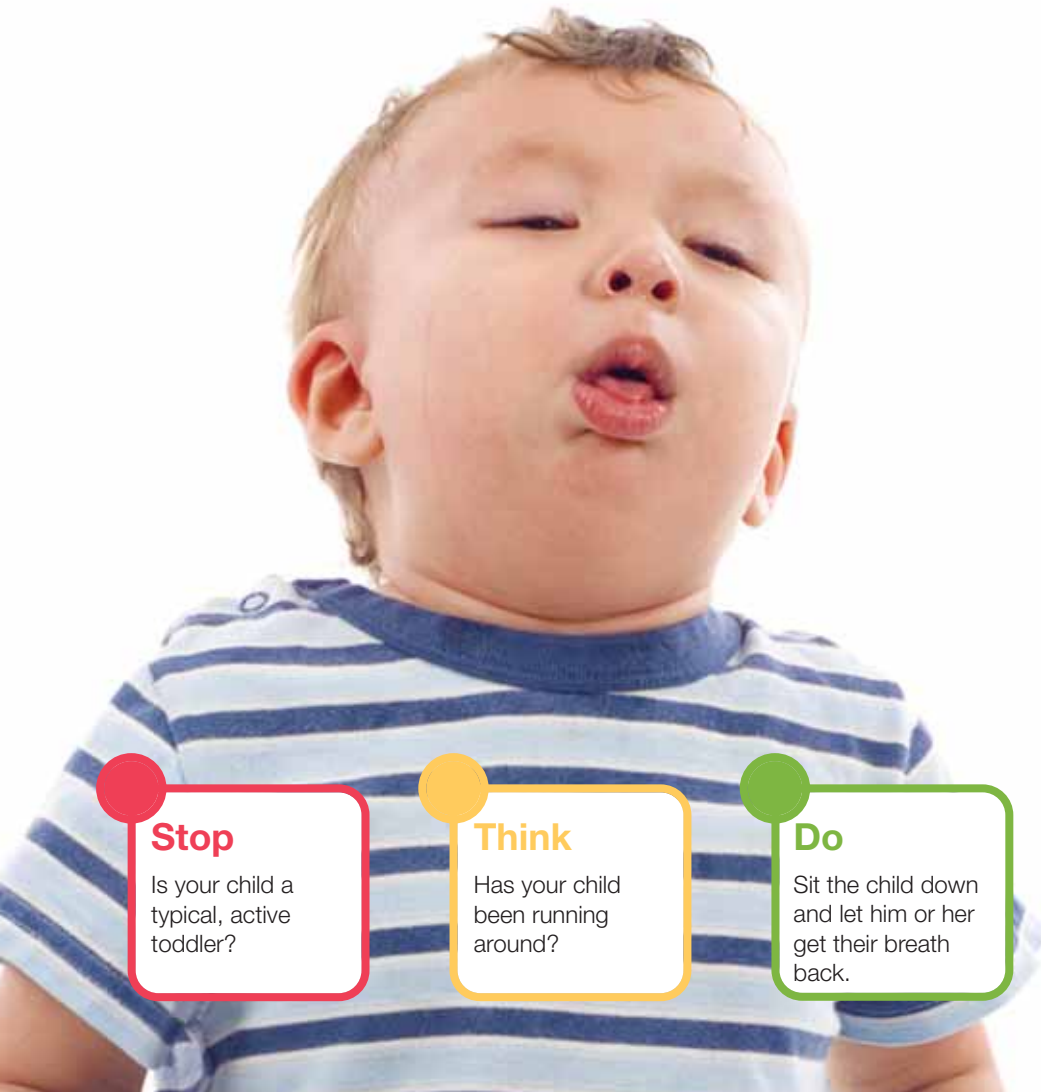
Do

Go to your Doctor if your child is unwell for longer than 24 hours. Keep them away from others.

Signs of dehydration

- ✓ Sunken fontanelle (i.e. the soft spot is more dipped in than usual).
- ✓ Less wet nappies (i.e. they wee less).
- ✓ More sleepy than usual.
- ✓ Runny poo.
- ✓ Dry mouth.

The above information cannot replace specialist treatment. If you are still worried, contact a Chemist or a Doctor (e.g. your GP or Walk-in Centre).



Stop

Is your child a typical, active toddler?

Think

Has your child been running around?

Do

Sit the child down and let him or her get their breath back.



Midwife says

Newborns often have unusual breathing patterns and most babies have a stuffy nose for the first several weeks of life. Newborn babies breathe much faster than older children.

Health Visitor says

Make sure your baby or toddler has not swallowed something he or she should not have like a plastic toy. If this happens and the baby appears to be choking get help straight away.

Wheezing and breathing difficulties

Look at the signs

Any kind of breathing difficulty your infant or child experiences can be scary for parents. It may be nothing to worry about and could just be normal baby 'snuffles'.

Use your instincts with newborns and babies. It could be:

- Rapid breathing or panting, which is common. There is no other sign of illness, it comes and goes and your baby is breathing comfortably most of the time, there is normally no need to worry.
- Breathing may sound a bit rattly. Try holding your baby upright and let the baby sleep upright in your arms.
- Occasional, coughing or choking which may occur when a baby takes in milk too quickly with feeds. Try to slow things down a bit.
- A cold or mild cough. Keep an eye on the baby at this stage and use your instincts. If you are worried talk to your Health Visitor or call NHS Direct.

In older babies and toddlers you may notice:

- Coughing, runny nose, mild temperature (see [Coughs and colds pages](#)).
- Croup (hoarse voice, barking cough) needs to be assessed by a Doctor and may need treating with steroids.
- The lips and nose appear a blue colour.

While you are contacting a Doctor try sitting with your child in a steamy bathroom - do not leave your child alone.

If you are worried about your child wheezing or having breathing difficulties even after reading this, contact a Doctor immediately.

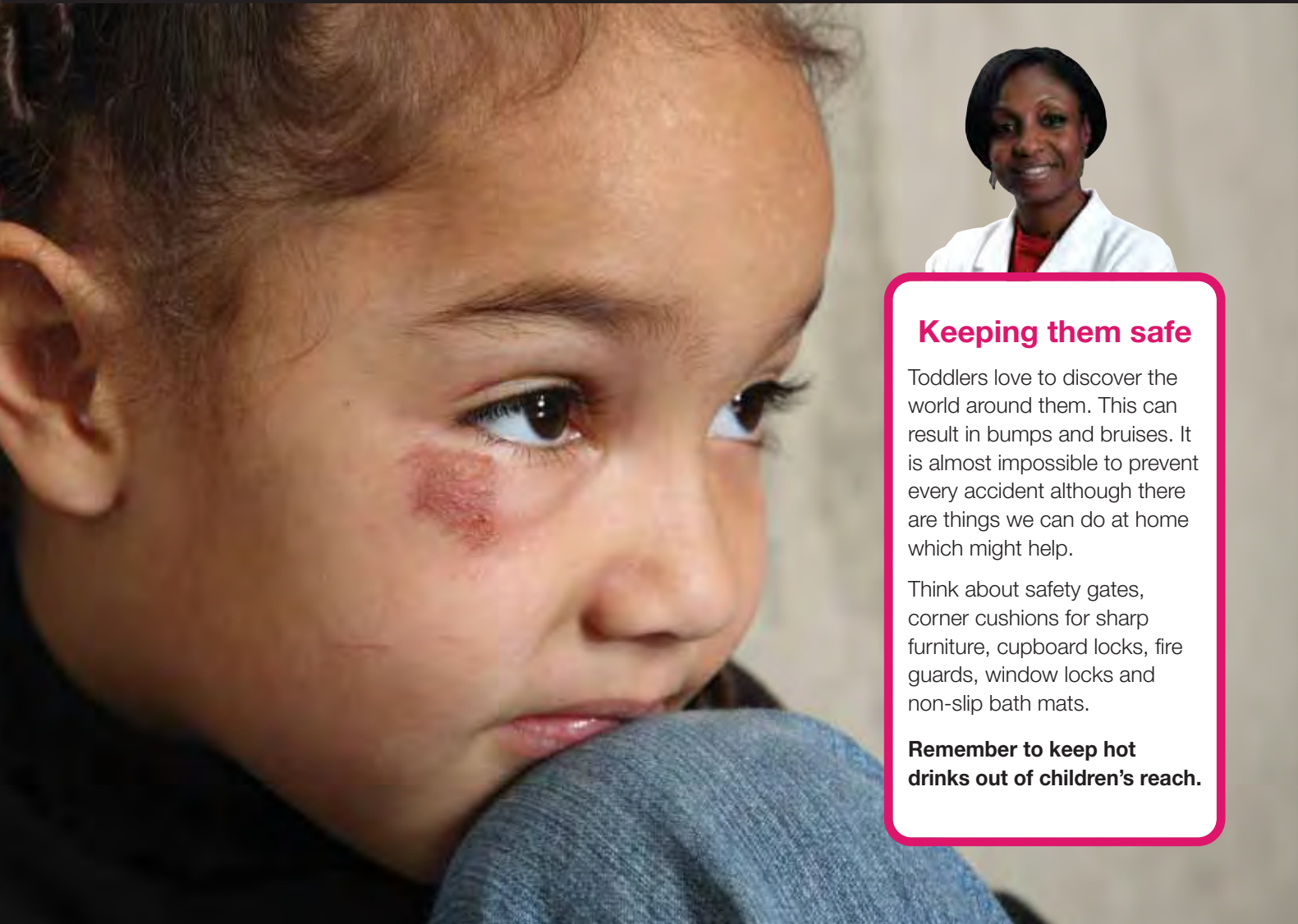
The above information cannot replace specialist treatment. If you are still worried, contact NHS Direct or a Doctor (e.g. your GP or Walk-in Centre).



Doctor says

You need to get advice immediately if your baby or toddler:

- ✓ Seems to find breathing hard work and is sucking in the ribs and tummy.
- ✓ The chest looks like it is 'caving in.'
- ✓ The skin turns a blue colour especially lips and nose.
- ✓ The baby cannot complete a full sentence without stopping to take a breath.



Keeping them safe

Toddlers love to discover the world around them. This can result in bumps and bruises. It is almost impossible to prevent every accident although there are things we can do at home which might help.

Think about safety gates, corner cushions for sharp furniture, cupboard locks, fire guards, window locks and non-slip bath mats.

Remember to keep hot drinks out of children's reach.

Bumps and bruises

Part of growing up

Minor cuts, bumps and bruises are a normal part of growing up. Allowing children to explore the world around them (with supervision) helps them develop and learn. Most of your toddlers' bumps will require no more than a cuddle to make them better. You will quickly be able to tell by the noise of the bang, the reaction of your child and the colour of the area affected, which are the more serious bumps.

If it looks like the bump may swell then use a cold flannel (soaking the cloth with cold water) or ice pack (but do not put ice directly onto the skin) to help reduce swelling and cool the area for at least a few minutes.

If your child has had a bump to the head and it looks serious or symptoms worsen call NHS Direct. Read the information on the right. ➡

If your child is under a year-old and has a bump on the head please seek advice from a Doctor.

Stop

My child has had quite a hard bump to the head. I have used a cold flannel on the bump.

Think

The child is tired. The child has gone to sleep. This is normal after an upset.

Do

Check regularly that the child is alright and behaving as usual.

Head injury

One of the signs of a severe head injury is being unusually sleepy, this does not mean you cannot let your child sleep.

You need to get medical attention if your child:

- Is vomiting.
- Complaining it hurts.
- Not responding at all.

If your child is tired from what has happened or from crying, then it is fine to let him or her sleep. If you are worried in any way about drowsiness, then you should wake your child an hour after he or she goes to sleep.

Check that the child is alright and responding normally throughout the night.

If you are still worried, contact a Doctor (e.g. your GP or Walk-in Centre). If you cannot get help straight away go to A&E.



Burns and scalds



Knowing what to do

A burn is damage to the skin, which is caused by direct contact with something hot. Burns can also be caused by certain chemicals, electricity and friction. A scald is a burn that is caused by a hot liquid or steam. Scalds are treated in the same way as burns. Treat any burn or scald straight after the accident but always take your child to hospital for anything more than a very small burn or scald. A baby's skin is very delicate and can be scarred without the right treatment.

Cool the burnt area and place under cool running water for at least ten minutes. When the burn has cooled, cover it with a sterile dressing, food quality cling film or a plastic bag. Do not wrap it too tightly. Then take your child to hospital.

A&E says

Remove any hot clothing that is not stuck to the skin and hold the affected area under cold, running water for at least ten minutes. Cover the scald or burn with a clean, non-fluffy cloth that has been soaked in cold water. Do not apply fatty substances like butter or ointment as this will not do any good and will only waste time for hospital staff who will have to clean the area before it can be treated.

Stop

Treat the burn or scald straight after the accident.

Think

Do not use creams, lotions or ointments on the burn or scald.

Do

Always take a your child or baby to A&E.

If you are still worried, contact a Doctor (e.g. your GP or Walk-in Centre). If you cannot get help straight away go to A&E.



Domestic violence

Keeping your child safe

Domestic violence is a crime and a major social problem affecting many families. Children who see, get involved or hear violence are affected in many ways. What is certain is that children do hear, they do see and they are aware of violence in the family. Children will learn how to act from what their parents do. Domestic violence teaches children negative things about relationships and how to deal with people.

If you are worried about domestic violence, discuss it with someone else, such as your Health Visitor or the Domestic Violence helpline*. If you are violent and have children, you can seek help to stop what is happening.

Protecting children is everybody's business and adults have a responsibility to report any abuse. Act now, as abuse can have serious long-term consequences.

Stop

Adults have a responsibility to report abuse.

Think

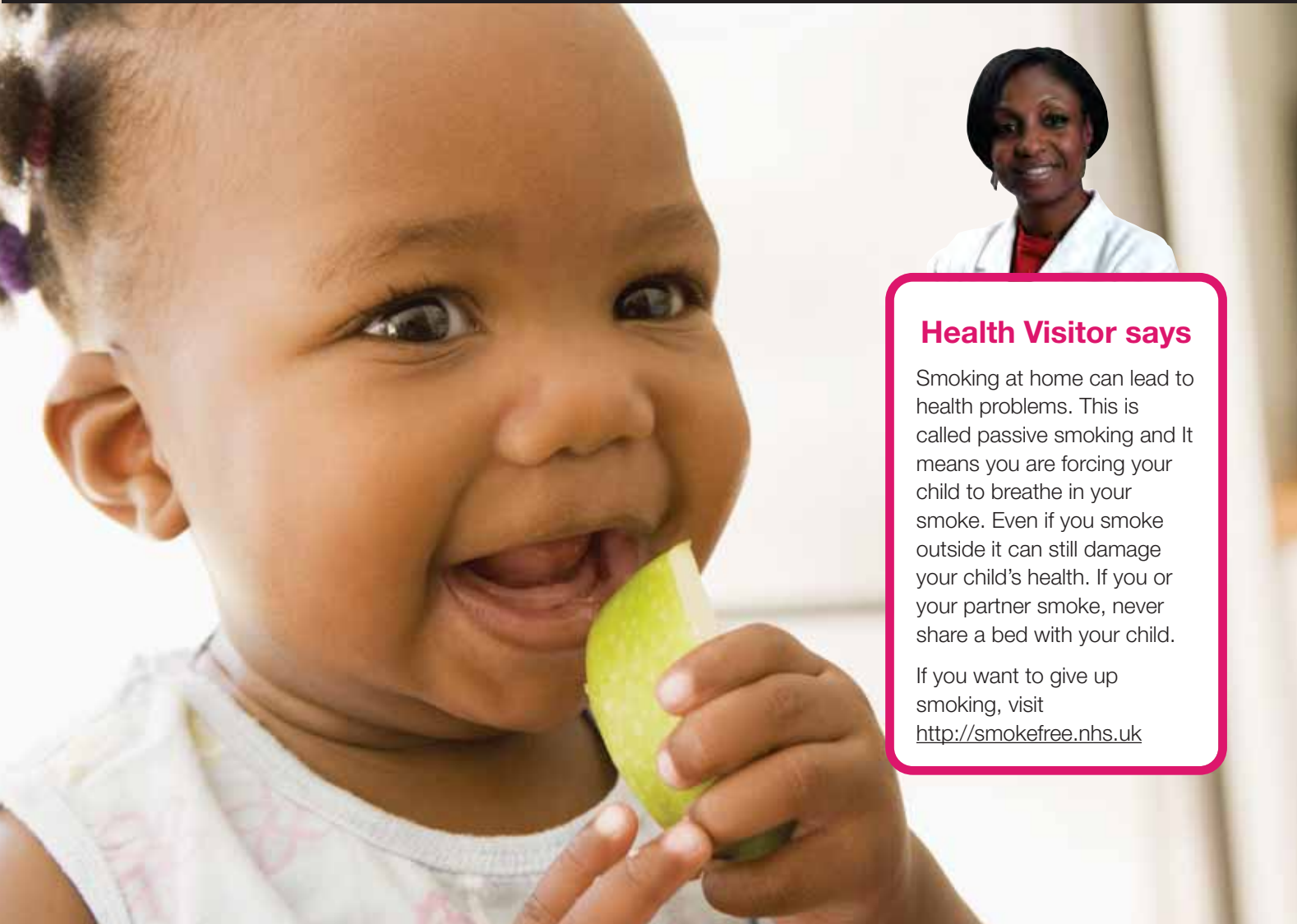
There are many possible signs of abuse, ranging from injury to changes in the way a child is acting.

Do

If in doubt share your concerns about children with a professional.

There may be times when a child or young person may be at risk of significant harm and professional support is needed. It is best that action is taken early to stop things getting worse. Long-term abuse is much more likely to cause problems for a child or young person as they get older. Even if you think an incident is just a one-off, other professional agencies may already have concerns. So your information could be very important.

*You can call the free 24 hour National Domestic Violence helpline on 0808 2000 247.



Health Visitor says

Smoking at home can lead to health problems. This is called passive smoking and it means you are forcing your child to breathe in your smoke. Even if you smoke outside it can still damage your child's health. If you or your partner smoke, never share a bed with your child.

If you want to give up smoking, visit <http://smokefree.nhs.uk>

Healthy lifestyles

Start healthy habits early in life

With healthy habits from birth, you can give your baby a good start for a healthy and happy future. Breast milk is ideal for your baby's growing needs and breastfeeding can make a big difference. There are long-term health gains to both the mother and baby from breastfeeding. If you are not as healthy as you could be, now could be a great time to establish good healthy habits for all the family.

Babies like the foods they get used to. If you give them lots of different, healthy foods to try when they are babies and toddlers, they are more likely to eat a variety of healthy foods as they grow up.

Being active takes brain and muscle power so it plays an important part in your baby's development. As babies grow, you can help them by playing with them and exploring their surroundings. The whole family can enjoy a healthy lifestyle together.

Stop

Do you drink too much alcohol, take drugs or smoke?

Think

You may be passing these habits on to your child. Now is the time to get healthy together.

Do

Get help if you need it from NHS websites and speak to your Doctor.

Here are some basic rules to follow to help you lead a healthier lifestyle:

- ✓ Your good health habits will become your child's good health habits.
- ✓ Keep active together.
- ✓ Drink alcohol with caution, know the limits.
- ✓ Do not smoke or take drugs, if you do, get help to give up.
- ✓ There are vitamins and healthy food vouchers available. These are sometimes free.
- ✓ Eat lots of fruit and vegetables.

If you are worried, contact your Doctor or Health Visitor.



Health Visitor says

Make sure you keep your child's Red Book in a safe place. It is your only complete record of his or her childhood immunisations and the information is often needed later in life.

NHS Direct says

If you have any questions or concerns about childhood immunisation and vaccines in the UK, then call NHS Direct on 0845 4647 or visit www.nhsdirect.nhs.uk or www.nhs.uk

Immunisations

Protect your child now and in the future

Immunisations, also known as vaccinations, are usually given by injection. Children in the UK are offered vaccinations against a variety of diseases as part of the Healthy Child Programme. You can get advice on the vaccinations from your family Doctor or Health Visitor. A record is kept in the Parent Held Child Health Record (Red Book), which is a book you keep containing information on your child's health.

Immunisations are mainly given during the first five years. It is important to have vaccinations at the right age to keep the risk of disease as low as possible. It is normal to worry about vaccinations, so do not hesitate to ask your Health Visitor or Doctor for advice - that is what they are there for! Childhood immunisations are free and most are given at your Doctor's surgery.

Some immunisations are given more than once, to make sure the protection continues. This is known as a booster, so make sure your child gets it.

Stop

Immunisation begins at two months, when babies natural immunity to illness, begins to drop.

Think

Immunisations do not just protect your child during childhood, they protect them for life.

Do

Your Health Visitor will tell you when local immunisation sessions are taking place.

If you are worried, contact your Doctor or Health Visitor.

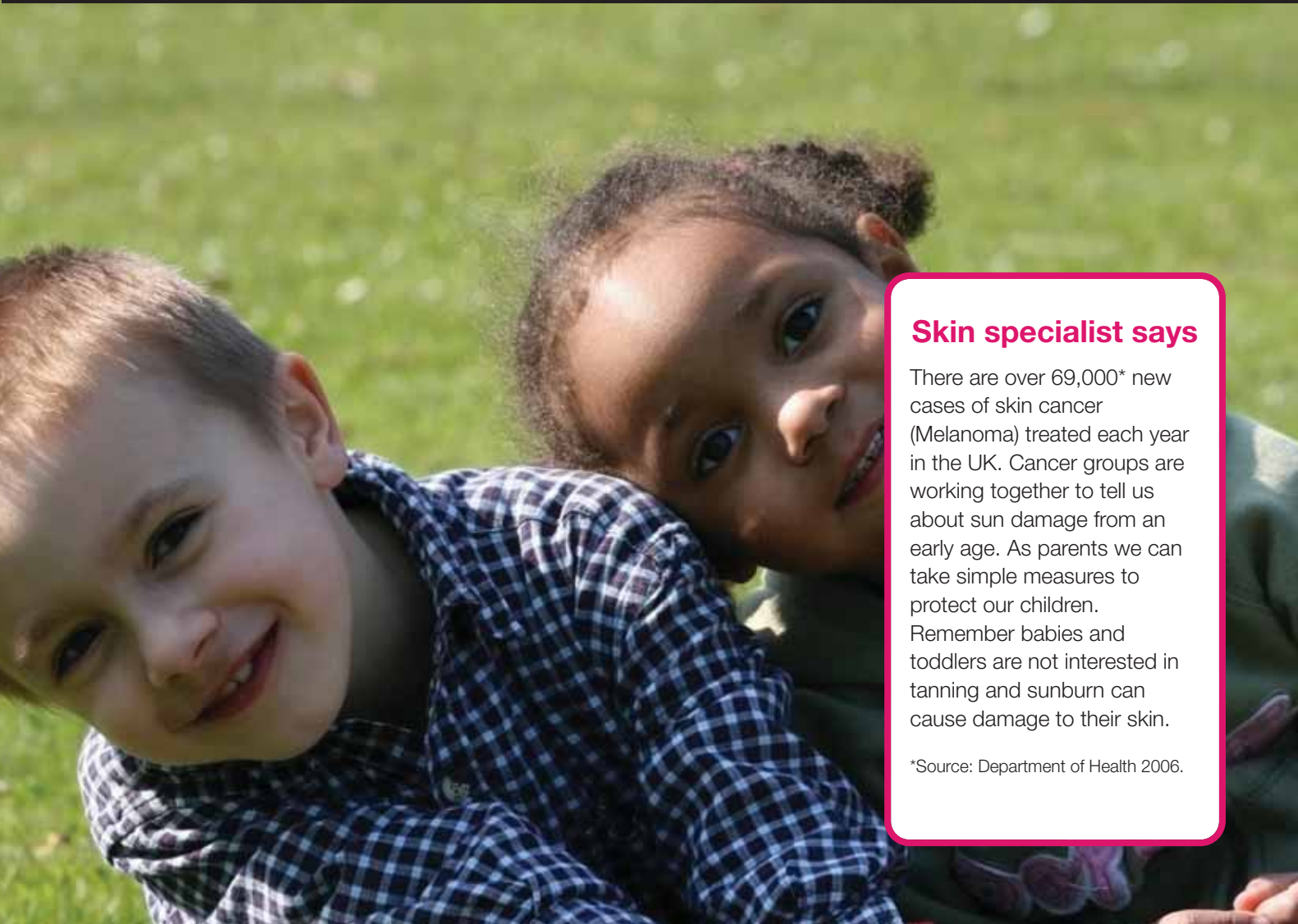


Doctor says

Immunisations are used to protect children from diseases which can be very serious and sometimes even cause death.

The protection immunisations offer your child are worth the small amount of pain.

It is important your child's vaccinations are kept up-to-date.



Skin specialist says

There are over 69,000* new cases of skin cancer (Melanoma) treated each year in the UK. Cancer groups are working together to tell us about sun damage from an early age. As parents we can take simple measures to protect our children. Remember babies and toddlers are not interested in tanning and sunburn can cause damage to their skin.

*Source: Department of Health 2006.

Sun safety

Fresh air is great but the sun can burn

Children should be kept cool and protected from the sun and heat. Babies under six months should be kept out of direct sunlight and older children should be allowed in the sun for a limited time and be well protected. Stay out of the sun, especially during the middle of the day. All types of skin, fair or dark need protection.

Attach a sunshade to the pushchair to keep the baby out of direct sunlight. A sunhat, with a wide brim or a long flap at the back, will protect your child's head and neck from the sun. Hair does not stop the head from burning. Apply sunscreen regularly, particularly if your child is in and out of the sea or a paddling pool.

If your baby is over six months-old, encourage your baby to drink water. Try offering tiny pieces of ice and fruit juice lollies. For older toddlers and children, plenty of fruit will also help keep their fluid levels up.

Stop

It is a bright day and your children are playing outside.

Think

Are they in the shade and wearing sunscreen? Are they wearing a hat, long sleeves and trousers?

Do

Make sure you protect your children's skin and eyes especially during the middle of the day.



Chemist says

The higher the SPF (Sun Protection Factor) the better protection for the skin. You should use a complete sunblock on your baby or toddler. SPFs of up to 60 are available and these block out almost all of the sun's rays. Even with sunscreen keep your child in the shade whenever you can and make sure newborn babies are never in the sun. Do not forget to protect the eyes with sunglasses. You can buy them from the Chemist.

If you are worried, contact your Doctor.

Useful contacts

National contacts

Alcoholics Anonymous

0845 769 7555

www.alcoholics-anonymous.org.uk

For those who think their drinking is becoming a problem, Alcoholics Anonymous offers the chance to talk to someone who knows the issues through personal experience.

Baby LifeCheck

www.babylifecheck.co.uk

British Nutrition Foundation

020 7404 6504

www.nutrition.org.uk

Brook

0808 802 1234 www.brook.org.uk

Free and confidential sexual health advice and services for under-25s.

Change4Life

0300 123 4567

www.nhs.uk/change4life

www.nhs.uk/start4life

ChildLine

0800 1111 www.childline.org.uk

Support, information and advice for children on any topic they want to talk about - bullying, gangs,

puberty, sexual abuse, alcohol, drugs, or anything else that worries them.

Contact a Family

0808 808 3555

www.cafamily.org.uk

Information on specific conditions and rare disorders for families with disabled children.

Dental Helpline

0845 063 1188

Drinkline

0800 917 8282

Information and self-help materials, help to callers worried about their own drinking, support for family and friends of people who are drinking, and advice on where to go for help.

Family Lives

0808 800 2222

<http://familylives.org.uk>

Fatherhood Institute

www.fatherhoodinstitute.org

Meningitis Trust

0800 028 18 28

www.meningitis-trust.org

National Breastfeeding Helpline

0300 100 0212

www.breastfeeding.org.uk

National Childbirth Trust (NCT)

0300 33 00 770

www.nct.org.uk

NHS Choices

www.nhs.uk

NHS Direct

0845 4647

www.nhsdirect.nhs.uk

NHS LifeCheck

www.nhs.uk/LifeCheck

NHS Live well

www.nhs.uk/Livewell/childhealth0-1

www.nhs.uk/Livewell/Goodfood

NHS Smokefree

0800 022 4 332

<http://smokefree.nhs.uk>

Parent Direct

0800 29 89 121

www.parentdirect.org.uk

Real Baby Milk

www.realbabymilk.org

The Patients Association

0845 608 4455

For concerns about healthcare in general, this national charity provides patients with a way to raise issues and share experiences as it works to improve the care we all receive.

The Samaritans

08457 90 90 90

www.samaritans.org

Confidential non-judgemental emotional support, 24 hours a day, for people who feel distressed, despairing or suicidal.

www.childrenfirst.nhs.uk

www.direct.gov.uk

www.dh.gov.uk

Local contacts

Local Hospitals

Chelsea and Westminster Hospital

369 Fulham Road
London SW10 9NH
Tel: 020 8746 8000

Hammersmith Hospital

Du Cane Road
London W12 0HS
Tel: 020 3313 1000

St Mary's Hospital (HQ)

Praed Street
London W2 1NY
Tel: 020 3312 6666

Walk-in Centre

For fast access to health advice, emergency contraception and treatment or minor ailments, infections, or injuries such as cuts, strains, sprains and broken bones.

Parsons Green NHS Walk-in Centre

5-7 Parsons Green
London SW6 4UL
Tel: 020 8846 6758

Minor Injuries Units (MIUs)

Minor Injuries Units (MIUs) can treat a range of less serious injuries. They are usually nurse-led and no appointment is needed. Where an injury is clearly not life-threatening an MIU is often a better option than A&E, where waiting times are likely to be longer.

St Charles Hospital

Exmoor Street
London W10 6DZ
Tel: 020 8962 4262

Hammersmith Centre for Health

Hammersmith Hospital (adjacent To The A&E Department)
Du Cane Road
Hammersmith
London W12 0HS
Tel: 020 8893 0384

Children's Centres

These provide advice and support for parents and carers. You can find your nearest Children's Centre by contacting you're the Family Information Service.
020 7361 3302

Every effort has been made to keep the information in this booklet up-to-date and accurate. However, we cannot guarantee that inaccuracies have not occurred. The Royal Borough of Kensington and Chelsea Council, its employees or partner agencies will not be held responsible for any loss, damage or inconvenience caused as a result of reliance on such information.

English

Information from this document can be made available in alternative formats and in different languages. If you require further assistance please use the contact details right.

Arabic

يمكن توفير المعلومات التي وردت في هذا المستند بصيغ بديلة ولغات اخرى. اذا كنت في حاجة إلى مزيد من المساعدة، الرجاء استخدام بيانات الاتصال الواردة ادناه.

Farsi

اطلاعات حاوی در این مدارک به صورتهای دیگر و به زبانهای مختلف در دسترس می باشد. در صورت نیاز به کمک بیشتر لطفاً از جزئیات تماس ذکر شده در ذیل استفاده کنید.

French

Les informations présentées dans ce document peuvent vous être fournies dans d'autres formats et d'autres langues. Si vous avez besoin d'une aide complémentaire, veuillez utiliser les coordonnées ci-dessous.

Portuguese

A informação presente neste documento pode ser disponibilizada em formatos alternativos e em linguas diferentes. Se desejar mais assistência, use por favor os contactos fornecidos abaixo.

Somali

Macluumaadka dokumentigan waxaa lagu helli karaa qaabab kale iyo luuqado kala duwan. Haddii aad u baahan tahay caawinaad intaas dhaafsiisan fadlan isticmaal xiriirka faaahaahinta hoose.

Spanish

La información en este documento puede facilitarse en formatos alternativos y en diferentes idiomas. Si necesita más ayuda por favor utilice la siguiente información de contacto.

St Charles Urgent Care Centre
St Charles Centre for Health & Wellbeing
Exmoor St
London
W10 6DZ

Opening times 8.00am-9.00pm every day
including weekends and Bank Holidays.
A GP is also available during those periods.