



# 6-8 Weeks Baby Check

*Resources and Information Booklet for Parents and Families*

# Family Hubs – Universal Support in Hammersmith and Fulham

Family hubs children provide a range of useful free and low-cost services for families. Anyone can visit a family hub, including parents, prospective parents, carers, young people, family members and residents. Additionally, the Family Hub website is the new home for the Family Information Service and the Local Offer for SEND (Special Education Needs and Disabilities). Services such as: access to health visitors, activities for under 5s, financial, debt and benefits advice, housing needs, infant feeding, maternity support, mental health support, parenting support.

<p><b>Available Services: (Please speak to the team to find out more)</b></p> <ul style="list-style-type: none"> <li>○ Learn and Play session for pregnant parents and children up to 5 years, including for children with SEND</li> <li>○ Access to 0-5 years professionals support face to face such as CAMHS and signposting</li> <li>○ Breastfeeding support/ Health visiting</li> <li>○ One to one support for families with an Early Years Practitioner face to face in children centre around various concerns</li> <li>○ Rose Vouchers, Food Vouchers, Vitamin D available for children</li> <li>○ Speech and language low level support sessions.</li> <li>○ New parents support sessions</li> <li>○ Signposting to other services for families with children aged 0-5 years.</li> <li>○ 2-year funding support or signposting</li> <li>○ Midwifery and perinatal services</li> </ul>	<p><b>Family Hubs (Children Centres) Locations:</b></p> <p><i>(Access to health visitors, activities for under 5s, financial, debt and benefits advice, housing needs, infant feeding, maternity support, mental health support, parenting support)</i></p> <ul style="list-style-type: none"> <li>○ <b>Old Oak Community Centre</b>, 76 Braybrook Street, W12 0AP <b>(020 8740 8008)</b></li> <li>○ <b>Tudor Rose Community Centre</b>, Fulham Court, SW6 5PG <b>(020 8753 6070)</b></li> <li>○ <b>Stephen Wiltshire Centre</b> (Children with Special Educational Needs and Disabilities and their families), Queensmil Road, Fulham, SW6 6JR <b>(0208 753 4443)</b></li> </ul> <p><b>Website:</b> <a href="https://www.lbhf.gov.uk/children-and-young-people/family-hub">https://www.lbhf.gov.uk/children-and-young-people/family-hub</a></p> <p><b>Email:</b> <a href="mailto:familyhubs@lbhf.gov.uk">familyhubs@lbhf.gov.uk</a></p>	<p><b>Local Children Centres by Urban Partnership Group</b></p> <p><i>(Family outreach programs, parenting initiatives, nursery provision, crèche services, employment services, midwifery services, perinatal services, CAMHS, Vitamin D)</i></p> <ul style="list-style-type: none"> <li>○ <b>Masbro Centre</b>, 87 Masbro Rd, Hammersmith, W14 0LR <b>(020 7605 0800)</b></li> <li>○ <b>Brook Green Family Centre</b>, 49 Brook Green, W6 7BJ <b>(020 7605 0800)</b></li> <li>○ <b>Edward Woods Community Centre</b>, 60-7 Norland, W11 4TX <b>(020 7605 0800)</b></li> <li>○ <b>Flora Gardens Children’s Centre</b>, Dalling Road, W6 0UD <b>(020 8741 7892)</b></li> </ul> <p><b>Website:</b> <a href="https://www.upg.org.uk/childrens-centres/">https://www.upg.org.uk/childrens-centres/</a></p> <p><b>Email:</b> <a href="mailto:info@upg.org.uk">info@upg.org.uk</a></p>
<p><b>Who can be referred:</b></p> <div> <span>✓ All family members and children from pregnancy to 5 years</span> <span>✓ Accepts self-referral and referral by professionals</span> </div>		

**Timescale:**

- Once you have contacted the centre it will take 1-2 days for you to receive contact.
- Booking Sessions are a direct response via telephone contact

**Help?**

Any questions regarding support / would like a referral to completed, contact Hamida Khatun (Paediatric Coordinator) in which a direct referral can made with your consent. Speak with your practice nurse or Gp

## 8 Weeks Immunisation Schedule – what is this and when is it due?

Immunisation is a way of protecting against serious infectious diseases. Once we have been immunised, our bodies are better able to fight those diseases. The purpose of immunisation is to prepare your child's immune system to fight off those diseases, therefore it is ideal to have the following immunisation at the scheduled time.

- It is important that your baby has their immunisations at the right age – the first ones are given at 8 weeks old. They will be given further doses of these immunisations when they are 12 weeks old and 16 weeks old. Other immunisations are given at one year of age and other immunisations are given later. Please see your child's red book for further information.

When	Diseases protected against	Vaccine given	Vaccines for babies under 1 year old	
8 weeks old	Diphtheria, tetanus, pertussis (whooping cough), polio, Haemophilus influenzae type b (Hib) and hepatitis B	DTaP/IPV/Hib/HepB	Age	Vaccines
	Meningococcal group B (MenB)	MenB	8 weeks	<a href="#">6-in-1 vaccine</a> <a href="#">Rotavirus vaccine</a> <a href="#">MenB vaccine</a>
	Rotavirus gastroenteritis <sup>[footnote 1]</sup>	Rotavirus		
12 weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	12 weeks	<a href="#">6-in-1 vaccine</a> (2nd dose) <a href="#">Pneumococcal vaccine</a> <a href="#">Rotavirus vaccine</a> (2nd dose)
	Pneumococcal (13 serotypes)	Pneumococcal conjugate vaccination (PCV)		
	Rotavirus	Rotavirus		
16 weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	16 weeks	<a href="#">6-in-1 vaccine</a> (3rd dose) <a href="#">MenB vaccine</a> (2nd dose)

We would like to invite you to book your child's childhood vaccinations. At around 8 weeks of age, they are due to receive the following vaccines:

- 6-in-1 vaccine (this helps to protect against serious illnesses such as: polio and whooping cough)
- Rotavirus vaccine (this helps to protect against rotavirus – common cause of diarrhoea and vomiting)
- Men B vaccine (helps protect against meningococcal group B bacteria which can cause serious illnesses such as : meningitis and sepsis)

### Help?

<https://www.nhs.uk/vaccinations/nhs-vaccinations-and-when-to-have-them/>

- If you require further information or would like to discuss in detail, please contact your practice nurse, GP or Paediatric Coordinator

# Missed/incomplete vaccinations and serious health risks - Connecting Care for Children

## The Real Dangers of Missing Vaccinations

**NHS**  
North West London  
Clinical Commissioning Group

### How many children are being vaccinated in London?

For 2019-20, London had the worst vaccination rates for all parts of the UK. For some vaccinations, up to 1 in 4 children had not been vaccinated so weren't protected against illness and death.



### What does this mean for your children?

If children aren't vaccinated, this means they are at greater risk of getting ill and dying from infectious diseases. Protect your children by ensuring they are vaccinated.

### Meningitis



Meningitis is a life threatening disease. It is the leading cause of death in early childhood from any infection. The bug (bacteria) that causes the infection is called 'Meningococcus'. It is a type of bacteria which can cause meningitis, an infection of the linings of the brain and spine. Meningococcus infection can also cause overwhelming blood poisoning (called sepsis), brain damage and fits (epilepsy). It can even lead to children losing their arms and legs due to tissue death. We also vaccinate babies and children against another bug called Haemophilus influenzae. This bug can cause meningitis, upper airway obstruction ('epiglottitis') and sepsis, and can lead to long term effects including deafness, fits and brain damage.

### Rubella

To look after your child's future, it is imperative to vaccinate against Rubella (also known as German Measles). Rubella causes most damage to the baby growing in the womb, where it can cause miscarriage, blindness, deafness, heart defects and damage the developing brain. Infection with rubella in the first eight to ten weeks of pregnancy damages up to 90% of surviving children. If children catch rubella, they can develop a high temperature, pink spotty rash, coughs, headaches and swollen lymph nodes/ 'glands'.



### What diseases do vaccines protect against?

- Diphtheria
- Hepatitis b
- Hib (Haemophilus influenzae type b)
- Polio
- Tetanus
- Whooping cough (pertussis)
- Rotavirus
- Meningitis
- Pneumococcus
- Rotavirus
- Measles
- Mumps
- Rubella
- Flu
- HPV

### Tetanus

Tetanus is a bug commonly found in areas that children are known to be around such as soil. It can enter the body through cuts, e.g. from rusty nails. Inside the body, tetanus releases a toxin which can damage nerves. This can cause stiffness in your jaw muscles (lockjaw), making it difficult to open your mouth. It can also lead to painful muscle spasms, making it difficult to breathe and swallow, and can lead to death.



### Whooping cough



Whooping cough can give children severe lung infections (pneumonia). Young children develop a characteristic cough (a 'whoop') and vomiting. The breathing difficulties can damage the lungs, and reduce blood reaching the brain and cause brain damage and even death.

## Common Vaccine Concerns Answered

**NHS**  
North West London  
Clinical Commissioning Group

### Will my child be protected by herd immunity if I don't get them vaccinated?



No. Lower vaccination rates mean herd immunity is not as strong. If your child isn't vaccinated, they can then also pass infection to others who aren't able to get protected yet, like young babies and pregnant women, who can then get very ill and die.

### Is it safe for children to have several vaccines at once?

Yes. Children come into contact with many bacteria and viruses every day. Their immune systems are very able to respond to multiple vaccines at once. If you spread these vaccines out rather than giving them together, your child is left unprotected for longer.



### Will catching the disease make my child's immune system stronger?



If your child is infected, their immune system learns how to better defend against that same infection if they are infected again. The body does this by making 'memory immune cells'. Catching the infection though, means your child can get very ill and die, so getting vaccinated stops that risk. Vaccinations teach your child's immune system to make a ready-made defence against infection called antibodies, in case they meet the infection in future-so they don't get infected and don't get ill.

### Is the MMR linked with autism?

No. There is no link between the MMR and autism. MMR does not cause or increase the risk of your child developing autism. This has been shown in studies of hundreds of thousands of children. For details of these studies, please [see this webpage by the Oxford Vaccine Group at Oxford University](https://www.oxfordvaccine.com/news/10/10/10-05-10-oxford-vaccine-group-study).

### Help?

- Learn more about Vaccinations on: <https://www.lbhf.gov.uk/children-and-young-people/family-hub/health-and-wellbeing/vaccines>
- If you require further information or discuss in detail, please contact your practice nurse, GP or Paediatric Coordinator

# Health Visitors – Who are they and what can they do to help?

NHS health visitors are trained healthcare professionals who play a crucial role in supporting families, particularly those with young children. They typically have a background in nursing or midwifery and receive additional training in public health, child development, and family support.

## Key Responsibilities:

- **Health Assessments:** Conduct regular health checks for infants and young children, monitoring their growth and development.
- **Support and Advice:** Provide guidance on various issues, including breastfeeding, nutrition, parenting, and emotional well-being.
- **Community Outreach:** Work with families in the community to identify needs and connect them with resources, such as mental health services or parenting groups.
- **Education:** Offer workshops and information sessions on topics like immunizations, safety, and child development milestones.
- **Safeguarding:** Recognize and respond to signs of abuse or neglect, ensuring the safety and well-being of children.

## Importance:

Health visitors aim to promote healthy lifestyles and prevent health issues, contributing to better long-term outcomes for children and families. They often serve as a bridge between families and other health services.

## Help?

If you require further information, please contact your practice nurse or GP and health visitor.

Visit for more info: <https://clch.nhs.uk/services/health-visiting>

## Who we see

Our health visiting teams provide advice and support in a number of areas including:

- Antenatal groups
- New birth visits, including advice on feeding, safe sleep, parental emotional wellbeing and child health
- Maternal and infant feeding contacts at 6-8 weeks
- Child health and developmental reviews (9 months - 1 year and 2 years - 2.5 years)
- General parenting support
- Advice on family health and minor illnesses
- Specific support on subjects such as postnatal depression
- Advice on immunisations and national screening programmes
- Support children and families during the transition to school

We also run a targeted health visiting service for children and families who require extra support. This service assesses each child and family and introduces them into appropriate services, such as speech and language therapy.

These children and families may be offered continued support from the 0-19 service after they reach school age.

## Who works in our health visiting teams?

- Health visitors
- Community staff nurses
- Community Nursery Nurses
- Support and administration

## Where we work

Our health visiting teams work in a range of locations in the community including people's homes, health centres and children's centres.

The core hours of our health visiting service are Monday to Friday, 9am to 5pm.

For urgent health advice please call 111 or in an emergency 999.

## Who we see

All children 0-5 years (pre-school) are under the care of the health visiting service in the borough they live.

All new babies are referred to the health visiting service in the borough they live by the midwives/hospital maternity teams.

## How can I refer to the health visiting service?

GPs can refer parents/carers and their children directly to the health visiting via the single point of access for the borough.

Other professionals working with a child can contact the health visiting single point of access for their borough to be linked with the health visitor for that child and family.

People who have moved into the area recently are able to self-refer to our health visiting service via the single point of access for the borough.

If you are unsure if your child is known to the local health visiting team in your borough please use the single point of access for your borough.

Our health visitors deliver the [Healthy Child Programme](#) supporting families to give their children the best possible start in life and reach their full potential.

Our health visiting service requires standard patient and referrer information including NHS number, contact and address details.









# 'How to help your unwell child' and 'Is it serious?' - Connecting Care for Children

Young children often get sick – it's part of growing up. It can be stressful for parents and carers when a child is not well. Often, the illness is not serious, and the child can be treated safely at home or with support from a GP, pharmacist or health visitor. This booklet has been designed by a team of experts to help you care for your sick child. It will help you identify when an illness is minor and when it is serious. We recommend treating minor illnesses at home, where your child will be most comfortable.

Advice for parents with children under 5 for when to worry and where to get help on the following: coughs and colds, diarrhoea and vomiting, fever (high temperature), ear problems, rashes, dry skin and first aid kit. Please visit for booklet: [https://www.cc4c.imperial.nhs.uk/-/media/cc4c/documents/how-to-help-your-unwell-child.pdf?rev=d25be332906d4ca393946b9cb71ffd2a&sc\\_lang=en&hash=71E37623A064D725337590F8356BB13A](https://www.cc4c.imperial.nhs.uk/-/media/cc4c/documents/how-to-help-your-unwell-child.pdf?rev=d25be332906d4ca393946b9cb71ffd2a&sc_lang=en&hash=71E37623A064D725337590F8356BB13A)

## Is it serious?

Go straight to the emergency department (A&E) or call 999 if your child:

-  looks discoloured and spotty/blotchy (mottled), bluish or pale
-  has no energy or is difficult to wake
-  feels abnormally cold to touch
-  is breathing much faster than normal
-  has a rash that does not fade when pressed
-  has a fit or convulsion

Call NHS 111 to get urgent medical advice if your child:



LOOK

- ☐ is finding it hard to get their breath and is sucking their stomach in under their ribs
- ☐ has bright green, bloody or black vomit
- ☐ has not drunk anything for more than eight hours (when awake)
- ☐ has eyes that look sunken to you
- ☐ is quiet and lacking energy, even when their temperature is normal.



LISTEN

- ☐ makes a throaty noise while breathing
- ☐ is making 'grunting' noises with every breath
- ☐ can't say more than a few words at once (for older children who normally talk)
- ☐ has obvious 'pauses' in their breathing
- ☐ is crying constantly and you can't comfort or distract them, or the cry doesn't sound like their normal cry.



TOUCH

- ☐ is under eight weeks old and doesn't want to feed
- ☐ has not had a wet nappy or had a wee for 12 hours
- ☐ is under two years old and the soft spot on the top of their head (the fontanelle) is bulging
- ☐ is floppy
- ☐ is hard to wake up, or appears confused.



CHECK

- ☐ is under three months old and has a high temperature of 38°C or above
- ☐ is over three months old and has a high temperature of 38°C or above that doesn't come down 15-30 minutes after having paracetamol or ibuprofen
- ☐ is between three and nine months old and has a high temperature of 39°C or above
- ☐ is any age and has a low temperature below 36°C when checked three times in a 10 minute period.

## Help?

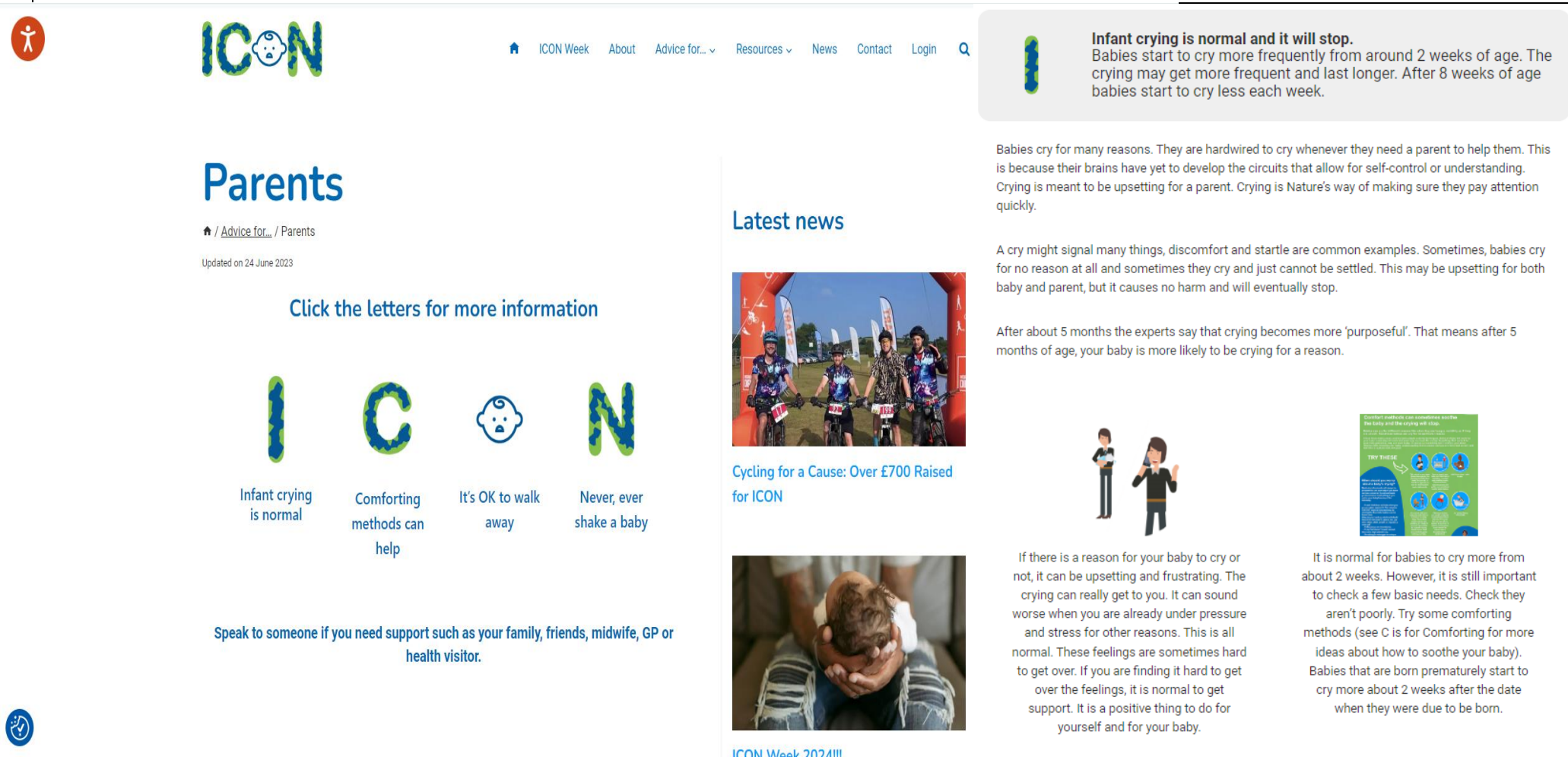
If you require further information or would like to discuss in detail, please contact your practice nurse or GP. Alternatively, speak with your paediatric coordinator.

Visit for more info:  
<https://www.cc4c.imperial.nhs.uk/resources/resources-for-parents-and-young-people>

# ICON - COPE: What does this mean?

The idea for the ICON programme and the different interventions within it was conceived by Dr Suzanne Smith PhD following a Winston Churchill Memorial Trust Travel Fellowship to USA and Canada in 2016 which included the study of effective interventions and research into the prevention of Abusive Head Trauma (AHT). Research suggests that some lose control when a baby's crying becomes too much. Some go on to shake a baby with devastating consequences. Suzanne found that the most effective evidence-based programmes studied provide a simple message that supports parents/caregivers to cope with infant crying.

ICON is all about helping people who care for babies to cope with crying.



The screenshot shows the homepage of the ICON website. At the top, there are logos for h&f, Imperial College Healthcare NHS Trust, and NHS. The main header features the 'ICON' logo with a baby face icon. Below this, there's a navigation bar with links: Home, ICON Week, About, Advice for..., Resources, News, Contact, and Login. A prominent message states: 'Infant crying is normal and it will stop. Babies start to cry more frequently from around 2 weeks of age. The crying may get more frequent and last longer. After 8 weeks of age babies start to cry less each week.' The main content area is titled 'Parents' and includes a sub-header 'Click the letters for more information'. Below this are four large letters: 'I' for 'Infant crying is normal', 'C' for 'Comforting methods can help', a baby face icon for 'It's OK to walk away', and 'N' for 'Never, ever shake a baby'. A sidebar on the right titled 'Latest news' features an article about a cycling event: 'Cycling for a Cause: Over £700 Raised for ICON', accompanied by a photo of cyclists. At the bottom, there's a section for 'Help?' with contact information for practice nurses, GPs, and health visitors, and a link to the website. A footer at the very bottom mentions 'ICON Week 2024!!!'.

## Help?

If you require further information, please contact your practice nurse or GP and health visitor.

Visit for more info:  
<https://iconcope.org/about/>

## Vitamin D – for breastfed babies

Vitamin intake are essential for a child's growth, development and overall health. It is important to ensure a child is having a sufficient amount, which helps strengthen many bodily functions, including immune system, bone and tooth health, cognitive development, organ formation and maintenance.

### Where you can get baby vitamin drops

Your health visitor can give you advice on vitamin drops and tell you where to get them.

You're entitled to free vitamin drops if you qualify for [Healthy Start](#).

The Department of Health and Social Care only recommends vitamin supplements containing vitamins A, C and D.

But some supplements you can buy contain other vitamins or ingredients. Talk to a pharmacist about which supplement would be most suitable for your child.

Having too much of some vitamins can be harmful. Keep to the dose recommended on the label, and be careful not to give your child 2 supplements at the same time.

For example, do not give them cod liver oil and vitamin drops because cod liver oil also contains vitamins A and D. One supplement on its own is enough, as long as it contains the recommended dose of vitamin D.

The Department of Health and Social Care recommends:

- Babies from birth to 1 year of age who are being breastfed should be given a daily supplement containing 8.5 to 10 micrograms of vitamin D to make sure they get enough. This is whether or not you're taking a supplement containing vitamin D yourself.
- Babies fed infant formula should not be given a vitamin D supplement if they're having more than 500ml (about a pint) of infant formula a day, because infant formula is fortified with vitamin D and other nutrients.
- Children aged 1 to 4 years old should be given a daily supplement containing 10 micrograms of vitamin D.

### Help?

<https://www.nhs.uk/conditions/baby/weaning-and-feeding/vitamins-for-children/>

If you require further information or would like to discuss in detail, please contact your practice nurse, health visitor or GP. Alternatively, speak with your paediatric coordinator.



# Brain Development Information

Brain development can be stimulated in various ways, which requires a lot of your baby's brain and muscle power. Most newborns love it when you consistently play with them – this is ideal for muscle development.

## Ways to play and interact with your baby

- Singing to your baby: they love the sound of your voice (no matter how you sound), so sing a song, nursery rhyme or just freestyle and make your own songs up.
- Talking to your baby: describe the things around you, recite a nursery rhyme or read a book. It doesn't really matter what you talk about – it all helps with their communication skills.
- Clapping: take turns clapping your hands and their hands together. Clapping is actually a pretty big milestone once they can do it themselves. It requires a fair amount of muscle control, fine motor skills and hand-eye coordination.
- Dancing: put some music on and dance with your baby in your arms. Most babies love the gentle rocking motion and being so close to you. This is great for bonding with your baby and their emotional development.
- Play with toys: encourage your baby to reach for, push and pull their toys. This is a simple way to stimulate your baby and improve their coordination.

## Tummy time

Tummy time is a great way to help build your baby's upper body strength. You can start doing tummy time from birth by lying your baby on your chest (but only do this when you are wide awake and unlikely to fall asleep). Gradually increase the amount of time you do this day by day. Then when your baby is ready, try doing tummy time on the floor.

Tummy time helps strengthen the back, neck and shoulders, as well as giving them a different view of the world!

## Crawling

Your baby will probably start crawling (although not all babies crawl – some shuffle around on their bottoms) at around 7 to 10 months. These are exciting times for you and your baby – plus it gives them a bit of independence and a chance to explore their surroundings.

Can you create a space in your house where your baby can explore safely? If you're worried that your baby isn't showing any signs of moving by 12 months, ask your health visitor for advice.

### Help?

<https://www.nhs.uk/start-for-life/baby/baby-moves/>

<https://www.nspcc.org.uk/keeping-children-safe/support-for-parents/look-say-sing-play/>

If you require further information or would like to discuss in detail, please contact your practice nurse, health visitor or GP. Alternatively, speak with your paediatric coordinator.

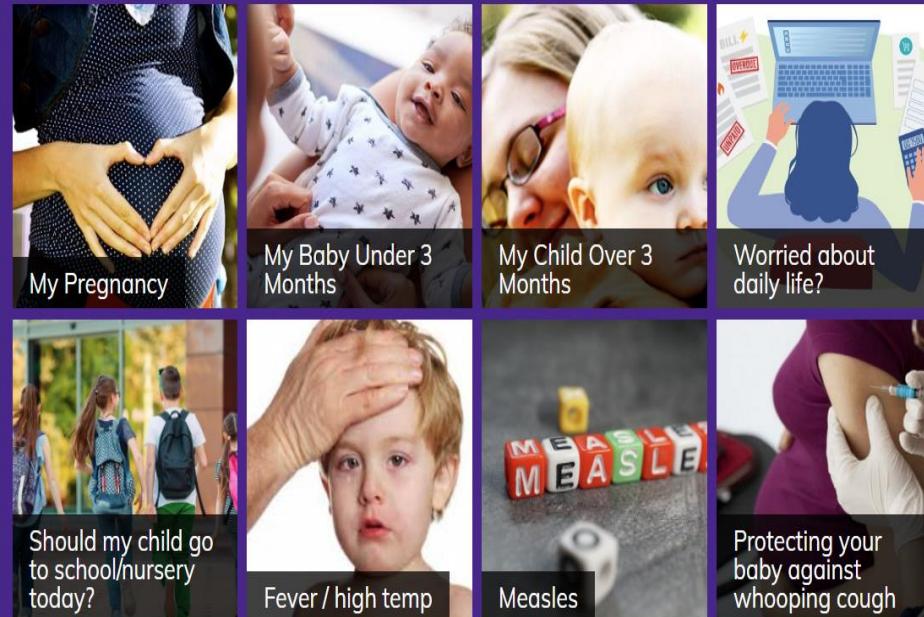
# Healthier Together App: 0-18

The website provides advice for parents, young people and pregnant women, and clinical resources to support healthcare professionals – which means that your child is likely to receive consistently high-quality care, irrespective of which healthcare professional they see.

## Babies under 3 Months

- Concerned about your baby aged less than 3 months? →
- New baby - what's normal and what's not →
- New baby information →
- Postnatal care and appointments →
- Infant Feeding →
- Has your baby been born early or poorly?

### I'm worried about...



## New Parent

- Welcome to parenthood
- Postnatal care and appointments →
- Going home with your baby
- Concerns about my health →
- Postnatal information →
- Dads & Partners →
- New baby - what's normal and what's not
- Maternal mental health
- Maternity Voices Partnership
- Infant feeding →
- Has your baby been born early or poorly?

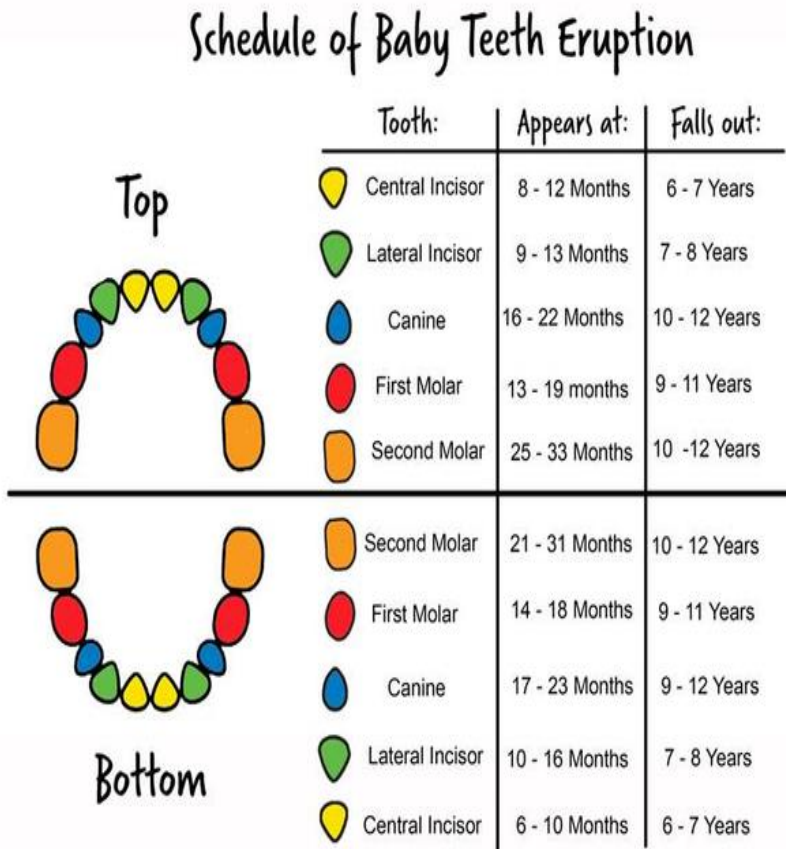
### Help?

Please visit and download app: <https://www.what0-18.nhs.uk/>

If you require further information or would like to discuss in detail, please contact your practice nurse, health visitor or GP. Alternatively, speak with your Paediatric Coordinator.

# What to Know About Baby Teeth and Diet?

- **Foundation for Permanent Teeth:** *baby teeth serve as placeholders for the permanent teeth. If a baby tooth is lost too early due to decay or injury, the neighboring teeth may shift into the empty space, which can cause crowding or misalignment of the permanent teeth.*
- **Speech Development:** *Baby teeth are essential for a child's ability to speak clearly. They help children form sounds and pronounce words properly. Missing or decayed teeth at an early age can affect the way they speak and lead to speech problems.*
- **Nutrition and Chewing:** *Healthy baby teeth allow children to chew food effectively, which is essential for proper digestion and nutrient absorption. Decayed or painful teeth can make it difficult for a child to eat a balanced diet, which may lead to poor nutrition and slow growth.*
- **Prevention of Dental Problems:** *Taking care of baby teeth helps prevent dental issues such as cavities, gum disease, and infections. Cavities in baby teeth can spread to permanent teeth, and untreated decay can lead to pain, abscesses, or even tooth loss. Furthermore, dental problems in baby teeth can set a precedent for poor oral health later in life.*



## Tooth brushing tips for babies

- Use a tiny smear of toothpaste for babies and toddlers up to 3 years old, and a pea-sized amount for children aged 3 to 6 years.
- Gradually start brushing your child's teeth more thoroughly, covering all the surfaces of the teeth. Do it at least twice a day: just before bed and at another time that fits in with your routine.
- Not all children like having their teeth brushed, so you may have to keep trying. Make it into a game, or brush your own teeth at the same time and then help your child finish their own.
- The easiest way to brush a baby's teeth is to sit them on your knee, with their head resting against your chest. With an older child, stand behind them and tilt their head backwards.
- Brush the teeth in small circles, covering all the surfaces, and encourage your child to spit the toothpaste out afterwards. There's no need to rinse with water, as this will wash away the fluoride.
- Check to make sure your child gets the right amount of toothpaste and they're not eating or licking toothpaste from the tube.
- Carry on helping your child brush their teeth until you're sure they can do it well enough themselves. This will normally be until they're at least 7.

## Help?

<https://www.nhs.uk/conditions/baby/babys-development/teething/looking-after-your-babys-teeth/> - Video: *How do I Brush my child's teeth? (6 months – 7 years)*

<https://www.lbhf.gov.uk/children-and-young-people/family-hub/health-and-wellbeing/dentists>

Find a dentist: <https://www.nhs.uk/service-search/find-a-dentis>

- If you require further information please contact your practice nurse, GP or local Dentist.



# 'A healthy start for a brighter future' - Weaning

Weaning is a gradual process of transitioning your baby from breast milk or formula to solid foods. It typically starts when your baby is around 6 months, though the exact timing may vary depending on your child's readiness and health.

## When to Start Weaning

**Signs of readiness:** Most babies show signs of being ready to start solid foods around 6 months. These signs include:

- Being able to **sit up with support**.
- Showing interest in **adult food** (e.g., watching others eat).
- Good **head and neck control**.
- Ability to **move food to the back of the mouth** and swallow.

**NHS Recommendations:** Giving your baby a variety of foods, alongside breast or formula milk, from around 6 months of age will help set your child up for a lifetime of healthier eating.

## Stages of Weaning

- **6 to 8 months:** During this period, babies usually start with pureed foods and gradually move to mashed or soft finger foods. At this stage, breast milk or formula still provides most of their nutrition.
- **9 to 12 months:** As the baby grows, you can offer more textured foods such as finely chopped or mashed versions of family meals. They may also start learning to drink from a cup and feed themselves.
- **12 months and beyond:** By this age, many babies can eat a variety of family foods. Breastfeeding can continue as desired, but the baby's diet should include a balance of proteins, carbohydrates, fats, and other nutrients from food.

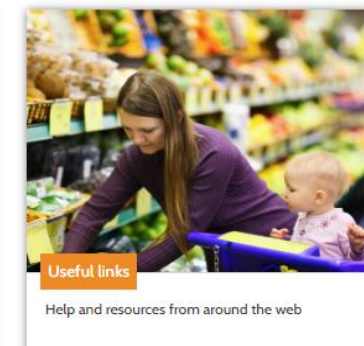
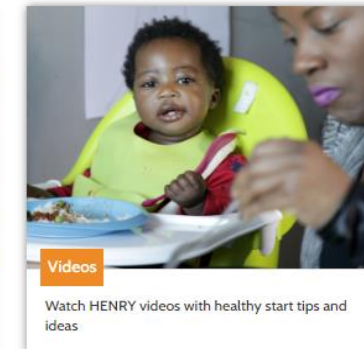
## Help?

**Visit:** <https://www.henry.org.uk/parents> (photo reference) - for more information on supporting breastfeeding, improving nutrition, emotional wellbeing, parenting skills, healthy nutrition, oral health and a more active lifestyle.

<https://www.nhs.uk/conditions/baby/weaning-and-feeding/babys-first-solid-foods/>

<https://www.nhs.uk/conditions/baby/weaning-and-feeding/childrens-food-safety-and-hygiene/>

If you require further information or would like to discuss in detail, please contact your health visitor, local family hub, GP.





# 'A healthy start for a brighter future' - Food Allergies

When you start introducing solid foods to your baby from around 6 months old, introduce the foods that can trigger allergic reactions one at a time and in very small amounts so that you can spot any reaction. If your baby already has an allergy, such as a diagnosed food allergy or eczema, or if you have a family history of food allergies, eczema, asthma or hay fever, you may need to be particularly careful when introducing foods. Talk to your GP or health visitor first.

## Preventing food allergy in your baby: A summary for parents

### Current advice from the UK health departments for healthy babies is:

- Exclusive breastfeeding for around the first 6 months of life.
- From around 6 months of age (but not before 4 months), introduce complementary foods (solids) – including foods known to cause food allergies – alongside continued breastfeeding.
- Excluding egg and peanut from your baby's diet may increase their risk of food allergy.
- **When your baby is ready, at around 6 months of age, you can start to feed them complementary foods (solids)** – usually as pureed foods. Start by offering small amounts of vegetables, fruit, starchy foods, protein, pasteurised dairy. Never add salt or sugar - they don't need it.
- In addition to fruit and vegetables, include foods that are part of your family's normal diet which are commonly associated with food allergies. *If this includes egg and peanut, aim to introduce these by one year of age, and continue to feed these to your baby as part of their usual diet.*

## Preventing food allergy in your baby: information for parents

The Scientific Advisory Committee on Nutrition (SACN) and the Committee on Toxicity (Food Standards Agency) have published a joint report to advise the UK Government health departments on advice regarding feeding your baby in the first year of life.

This leaflet provides advice to families on preventing food allergies in babies at higher risk of food allergy. It has been developed by the Food Allergy Specialist Group of the British Dietetic Association (BDA) and Paediatric Allergy Group of the British Society for Allergy & Clinical Immunology (BSACI), and complements an **information sheet for GPs and other healthcare professionals available at [www.bsaci.org/about/early-feeding-guidance](http://www.bsaci.org/about/early-feeding-guidance) or [www.bda.uk.com/regionsgroups/groups/foodallergy/allergy\\_prevention\\_guidance](http://www.bda.uk.com/regionsgroups/groups/foodallergy/allergy_prevention_guidance)**

### Young children at a higher risk of getting a food allergy include:

- Babies with **eczema** (in particular, babies with more severe eczema), or
- Babies who already have a **food allergy**.

Research shows that these babies may benefit from the earlier introduction – from 4 months of age – of complementary foods (solids), including foods containing egg and peanut in a form to suit the baby.

### Some babies will already be allergic when they are fed these foods:

- Parents should not continue to feed their baby something they are reacting to.
- Referral to a children's allergy clinic is recommended for babies with immediate-type food allergy.

If your baby has more severe eczema (e.g. needs daily steroid creams), discuss with your health visitor or GP when to start feeding your baby foods containing egg or peanut. These babies are more likely to have reactions, but can also benefit more where the food doesn't cause a reaction.

### DURING PREGNANCY

- Don't avoid any particular foods (such as peanut) – this has *not* been shown to prevent allergies.
- Omega-3 fatty acids (found in oily fish such as salmon, trout, mackerel and fresh (not canned) tuna) may help reduce the risk of eczema and allergic sensitisation (development of allergy antibodies) in early life. Pregnant women should not eat more than two portions of oily fish a week.<sup>1</sup>
- At the moment, there is not enough evidence to recommend routine probiotics to prevent food allergy.
- **Eat a balanced, healthy diet** – with plenty of vegetables and fruit to provide vitamins and minerals, as well as fibre (which helps digestion).
- General health advice is to take **follic acid** and **vitamin D** supplements during pregnancy.

### AFTER BIRTH

- **The UK health departments recommend exclusive breastfeeding for around the first 6 months of life.** Breastfeeding alone does not prevent allergies, but has many other important benefits to the mother and child. Breastfeeding should continue throughout the first year of life.
- Unless otherwise advised by a healthcare professional, **don't avoid eating any particular foods (such as peanut or dairy) while breastfeeding** – this has *not* been shown to prevent allergies.
- Infant formula is the only suitable alternative under 12 months of age when mothers do not breastfeed or choose to supplement breast milk. Infant formula made from cows' and goats' milk are suitable, however soya-based infant formula should not be used unless prescribed by a GP. If formula feeding, guidance regarding the safe preparation, storage and handling of infant formula should be followed.
- Using a non-cow's milk-based formula (such as soya) or a specialist "low allergy" or hypoallergenic formula has *not* been consistently shown to prevent food allergy or other allergic diseases.
- **Speak to a healthcare professional if you think your baby may be allergic or intolerant to cow's milk.**
- All babies (including those who are exclusively breastfed) should be given a daily supplement containing 8.5 to 10 micrograms (µg) of **vitamin D** – even if you're taking a supplement yourself. Vitamin D supplements should be continued until at least 5 years of age. Formula-fed babies don't need extra Vitamin D until they're having less than 500ml (about a pint) of infant formula a day, as infant formula is fortified with vitamin D.

<sup>1</sup> This is because oily fish can contain pollutants (toxins) which, if eaten in large amounts, outweigh the health benefits of omega-3 fatty acids. Fresh tuna should be limited to a serving size of 140g (cooked weight).

## Help?

### Visit:

<https://www.nhs.uk/conditions/baby/weaning-and-feeding/food-allergies-in-babies-and-young-children/>

[https://www.bsaci.org/wp-content/uploads/2020/02/pdf\\_Infant-feeding-and-allergy-prevention-PARENTS-FINAL-booklet.pdf](https://www.bsaci.org/wp-content/uploads/2020/02/pdf_Infant-feeding-and-allergy-prevention-PARENTS-FINAL-booklet.pdf)

If you require further information or would like to discuss in detail, please contact your health visitor, practice nurse or GP.

