

Caring for your

Baby

Birth *to*
Six
Months



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Contents



Birth to Six Months

Your Public Health Nurse:

Your Health Centre:

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Foreword

This booklet is the first in a set of three booklets for parents:

- Caring for Your Baby: Birth to Six Months
- Caring for Your Child: Six Months to Two Years
- Caring for Your Child: Two to Five Years

Each one contains information to help you to care for yourself and your child during your child's first five years. Before we produced this information pack, we asked parents what information they needed to care for themselves and their baby or toddler during this time. Parents said they wanted common-sense information and tips on the general care of their child; information about the growth and development of their child; advice about what to do if their child has a problem; and details of what people and services to get in touch with for more help and support.

The information is based on the most up-to-date, accurate information available within the Health Services, and on opinion from professionals in child health, support services, voluntary organisations and parent groups.

Each baby is special and for some of you, the details in this booklet are only the beginning of your search for information on how to do the best for your baby and you. No booklet is a replacement for talking with someone who is trained to help you, so the useful web pages and phone numbers in the final chapter will help you reach a wide range of trained professionals.

Sincere thanks to all the health professionals who helped in the development of this child health information pack, especially the parents.

Introduction



Welcome to **Caring for Your Baby: Birth to Six Months Old.**

If you have just had a baby, this is the booklet for you! It contains valuable information to help you care for yourself and your baby over the next six months.

The birth of a baby is an exciting and challenging time for all. This booklet will help you deal with the everyday concerns of being a parent. It will also point you to further information and support.

This is **book 1** of 3 in the Caring for Your Baby series.

As your baby grows look out for Caring for your Child 6 months - 2 years and Caring for your Child 2-5 years.



For copies, contact your Public Health Nurse or see www.hse.ie/caringforyourbaby

First published October 2005	Reviewed 2009	Updated 2015
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1 Taking care of yourself as a parent



Becoming a parent changes your life. It is important to take care of yourself so you can take care of your family. To help your baby to attach with you have your home quiet and calm. Delay introducing lots of people. Keep your days restful in the beginning as your baby gets to know her immediate family.

Especially for mams

Eating well

A healthy balanced diet is always important, especially after giving birth. Use the food pyramid to help you choose a daily balanced diet. Choose three servings of milk, cheese and yoghurt. To avoid constipation, especially if you had stitches or bruising, eat foods high in fibre, such as vegetables, fruit, wholemeal, wholegrain or brown varieties of bread, cereals, pasta or rice. Aim to drink a lot of water each day, at least 8 cups, especially if breastfeeding.

Top Shelf foods are high in fat, sugar and salt, are not essential for health and taken in excess can be harmful.

Maximum 1

Fats and oils are essential, but only in small amounts.

Choose any 2

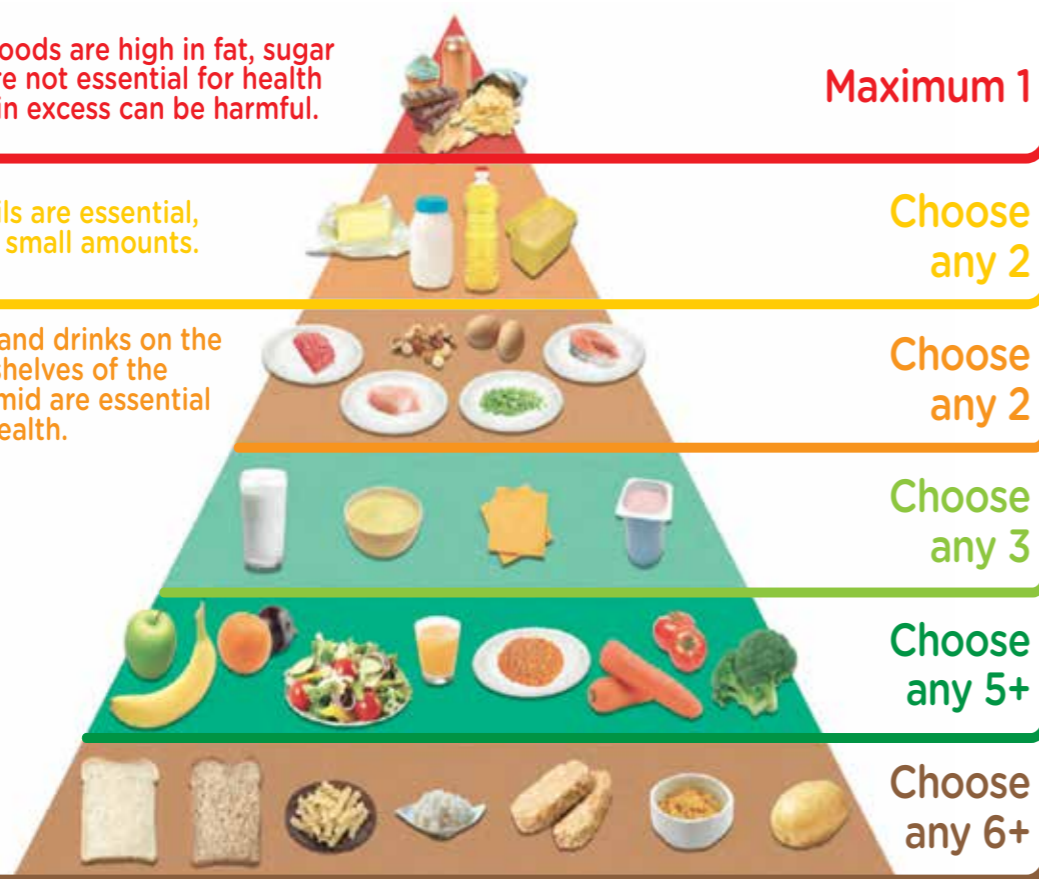
The foods and drinks on the bottom 4 shelves of the Food Pyramid are essential for good health.

Choose any 2

Choose any 3

Choose any 5+

Choose any 6+



Smoking and drinking alcohol

If you gave up smoking during your pregnancy you gave your baby a great start. Try to stay off cigarettes as smoking around your baby can contribute to cot death. Help and support is available on www.quit.ie or talk to your GP.

If you stopped drinking alcohol during your pregnancy now may be a good time to look at your drinking habits. Do you know your limits? Do you know what a standard drink is? Find out more at www.yourdrinking.ie

Postnatal exercises

You experienced many changes in your body during your pregnancy. Now that your baby is born, most of these changes will return to normal. Special postnatal exercises will help. These are important to help you return to your pre-pregnancy weight and prevent future health problems such as leakage of urine (incontinence). In the hospital, your midwife or physiotherapist will give you information on how to do postnatal exercises. Do these exercises regularly. If you had a caesarean section the physiotherapist will advise you on a range of exercises that are suitable for you.

Postnatal check

Six weeks after your baby is born, you are due for a routine postnatal check by your doctor, including a breast check. If you have not had a recent cervical smear test before your pregnancy then you should discuss your need to have one with your doctor at your postnatal check-up. Use this time to talk with your doctor about any questions or concerns you have about yourself or your baby. For more information see www.cervicalcheck.ie

Baby blues

You may feel tired or strained due to lack of sleep and coping with your new role as a parent. Most new mams feel baby blues a few days after the birth. This is mainly due to a change in your hormone levels. As your body starts to return to normal, these feelings pass. Remember that some level of baby blues is natural and common. Often a new mother's best resource is someone nearby she can talk to such as a partner or close friend.

Postnatal depression

Postnatal depression is a term used to describe feelings of depression you may get after you have a baby. About 10-20% of women are affected by postnatal depression in the first few months after giving birth.

After the birth you may:

- Have no interest in yourself or your baby
- Feel panic, anxiety, dizziness, a fast heartbeat, sick in your stomach or sweaty
- Cry
- Be afraid of being left alone with your baby
- Feel resentful towards your partner
- Feel tired but unable to sleep
- Have no appetite or you may over eat
- Find it hard to concentrate or
- Lose interest in sex

If you or your family notice some of these signs, then speak with your partner, a family member, doctor or public health nurse. Remember, postnatal depression does not last forever and the sooner it is recognised, the sooner you will get better. Get a copy of this leaflet from the publications section of www.healthpromotion.ie



For Dads

Nothing prepares you for being a dad like the hands-on experience you get after your child is born. Being a father is the most special, rewarding and exhausting role you will ever have. You and your partner need to support each other at this time more than ever before.

This includes working out how you will share things like:

- Getting up at night to feed your child
- Bathing and feeding your child or
- Discussing who is able to take time off work to care for your child if he or she is sick

The important thing is that you and your partner talk to each other about both of your needs and the things you both like doing best.

For Mams and Dads

Physical activity

Some gentle exercises can help increase your energy levels and help you manage the added work in your life following the birth of your baby. Build physical activity into your daily routine with your baby by:

- Going for a walk with your baby, inviting your partner or a friend along gives you a chance to spend time together
- Going swimming once you feel ready

Family planning after childbirth

It is possible to become pregnant again soon after the birth of your baby, even if your periods have not returned. Now is the time for you and your partner to decide on a method of family planning that you are both happy with. You can get information on family planning and contraception from your midwife, doctor, public health nurse or practice nurse. For more information see www.thinkcontraception.ie

Rest and relaxation

Extra rest is important for both parents, especially after your baby is born. In the first few days at home, try to:

- Limit the number of visitors who call to see you and your new baby
- Have a rest or a sleep when the baby sleeps
- Accept offers of help with routine shopping or housework
- Allow some of the housework to go undone for now and focus on your baby and yourself
- Prepare and freeze meals ahead of time to cut down on daily housework

Looking after your relationship

Relationships can become strained between parents, especially when you are tired and tense. At times, you may feel that it is hard to cope with your role as a parent and to balance this with work and other interests. Take care of your relationship by:

- Saying a caring word or doing something for each other
- Letting your partner know that you appreciate their support in parenting and caring for your relationship; and
- Talking openly together and sharing your feelings in a calm and listening way
- Accept offers of help from family and friends

Getting extra support for parents

Being a parent can be a difficult as well as a rewarding time. Every parent needs support at some time. It may be more difficult if:

- This is your first baby and you are unsure of what to expect
- You do not have a partner or a support person to share the joy and the work of being a parent
- Your relationship with your partner is in difficulty
- You feel there is support for your baby and your partner but little to support you
- You now live away from your home and family

Getting help and support is important. Ask your public health nurse about supports available such as:

- Breastfeeding support groups; these groups are run by public health nurses, La Leche League or Cuidiú, see www.breastfeeding.ie
- Parent and baby support groups such as the Community Mothers Programme where local trained parents who have had similar experiences visit you at home to offer support and information
- The Child and Family Agency provides support to families through their Family Resource Centres see, www.tusla.ie or call **01 6352854**

A new brother or sister in the family

If this baby is not your first child, then this is a time of change for other children in your family. It will take time and patience to cope with the extra demands. An older child may go back to baby behaviour for a time, such as wanting a bottle or to be breastfed, wanting to be lifted up or may even be jealous.



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There are ways to help an older child adjust to your new baby:

- If possible, spend some time with the older child, for example by going for a walk or a swim or playing a game. This may help to make your older child or children feel secure and adjust to their new position in their family
- Encourage your older child or children to become involved in caring for your baby
- Talk with your older child about when he or she was a baby. Use old photos books or toys to help you
- It may be possible to tandem feed for a while. For information on tandem feeding, call your local breastfeeding group, details are on www.breastfeeding.ie

Caring for twins or more

Caring for twins or more is very different. There is certainly a lot more work! You need as much support as you can get. Ask your family and friends for help with the routine baby care or with the housework. The Irish Multiple Births Association offers information and support on a range of topics for parents of twins, triplets or more. See www.imba.ie or call **01 874 9056**. Support may also be available from other organisations. Ask your public health nurse, doctor or community welfare officer for details.



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2 Feeding your baby



Breastfeeding

Your breastmilk is all your baby needs for the first 6 months. Your breastmilk continues to provide an important part of your baby's diet as he or she grows. Breastfeeding is soothing and comforting for your baby and creates a special closeness.

When do I feed my baby?

It is best to feed your baby when he or she shows 'early feeding cues'.

Early feeding cues include:

- Your baby's eyes moving over and back, even if his or her eyelids are closed
- Your baby opening and closing his or her mouth
- Your baby's hands moving towards his or her face or mouth
- 'Rooting' turning his or her head side to side when you touch your baby's cheek, or trying to move towards your breast
- Making cooing noise

Feeding your baby often when he or she shows early feeding cues and letting your baby feed as long as he or she wishes, helps to ensure that you have a good supply of milk. Your baby should have at least 6 nappies a day and yellow seedy nappies from day 5. This is a sign that your baby is getting enough milk.

When you are feeding your baby, hold your baby close to you and support your baby's body. Your baby should be able to reach your breast easily, without having to twist his or her head. When your baby opens his or her mouth wide, he or she can latch on well.

Some babies feed more at certain times of the day, often in the evening. This is normal. In the next few weeks your baby may develop a more regular pattern of feeding. It can take a week or two to get to know your baby. As time goes on breastfeeding gets more enjoyable and rewarding.

Breastfeeding Support

Support is available from your midwife, public health nurse, doctor, practice nurse and groups like Cuidiu, www.cuidiu-ict.ie and La Leche League, www.lalecheleagueireland.com. Ask your public health nurse for information on local breastfeeding groups or see www.breastfeeding.ie. These groups are a helpful way of meeting other mothers and getting information and support.

The leaflet 'Breastfeeding - a good start in life', provides useful information on starting to breastfeed, available in the publications section on www.healthpromotion.ie



How can I breastfeed outside the home?

Breastfeeding is really convenient when you are out and about with your baby. Your breastmilk is

- Always available
- Always at the right temperature

When you are out and about, you can breastfeed anywhere you and your baby want or need to.

Since feeding often looks like cuddling a baby most people don't even notice it. Wearing a top that lifts to let your baby feed will help you feed discreetly. Some Mums like to drape a scarf over their shoulder.

Good health begins with breastfeeding

Breastfeeding

- Protects your health and your baby's health
- Is important for your baby's healthy growth and development
- Provides antibodies to protect your baby from illness and build your baby's immune system

Breastfeeding will also help you to be a healthy weight and protect your health by reducing your risk of:

- Breast cancer
- Ovarian cancer
- Diabetes

Research shows that children who are not breastfed have a greater risk of developing:

- Ear, nose and throat infections
- Stomach, kidney and chest infections
- Asthma and eczema
- Obesity (very overweight)
- Diabetes
- Cot death

Formula feeding

If you decide to use formula milk, your midwife will give you information while you are in hospital on what you need and how to make up the formula. At home, your public health nurse and practice nurse will give you information and show you how to formula feed your baby.

What do I need to make up formula feeds?

You need:

- A bottle brush and tongs to help you grip the equipment
- Fresh water (bottled water may contain salt)
- The formula milk of your choice
- A chemical, steam or microwave kit for sterilising bottles
- At least 6 bottles, lids, discs and teats

If you have a visual impairment, use wide-necked bottles. They are easier to fill.

How do I sterilise equipment?

1. Wash your hands
2. Wash the bottles, teats, discs, lids and tongs in warm soapy water
3. Sterilise the bottles, teats, discs, lids and tongs, following the manufacturers instructions

4. Wash your hands before removing the bottles from the steriliser with the tongs
5. Do not rinse out the bottles after they are sterilised

Once put together correctly, sterile bottles with tight fitting caps or sealing discs are sterile for 24 hours as long as they remain unopened.

Clean and sterilise all feeding equipment before using it.

How do I make up a formula feed?

1. Boil the water and let it cool for 30 minutes
2. Clean surfaces and wash your hands
3. Read instructions carefully
4. Pour the correct amount of cooled boiled water into the sterilised bottle
5. Then, put the correct amount of formula powder into the bottle using the scoop provided
6. Put the teat and the lid on the bottle. Make sure they are not loose
7. Cool the feed quickly by holding the bottle under cold running water or place in a large bowl of water. Make sure the water does not reach the neck of the bottle
8. Check the feed is not too hot by shaking the bottle and placing a drop of liquid on the inside of the wrist- it should feel lukewarm, not hot
9. Use immediately
10. Throw away any feed that your baby has not taken within two hours. If your baby is a slow feeder use a fresh feed after two hours

How do I measure the exact amounts of formula and water?

It is important to measure the formula and water carefully as too much or too little formula can cause health problems.

- For each 30mls (each ounce) of water, you need one level scoop of formula powder
- Use the scoop in the formula box and run a clean knife across the top to get the scoop level. For example, if you are making up a 90mls (3 ounce) feed, you will need to add 3 level scoops of formula to 90mls of cool boiled water



How do I prepare more feeds in advance?

- It is safest to prepare a fresh feed each time you need one, and to give it to your baby straight away. This is because warm milk provides ideal conditions for bacteria to grow- especially at room temperature
- If you need to prepare feeds in advance to use later, follow steps 1 – 8 on page 13
- Seal the bottles with discs and lids
- Store in the back of the fridge (5 degrees or below). Throw away any feed in the fridge that you have not used within 24 hours
- When a feed is needed, remove from fridge just before you need it
- Warm it by placing it in a bowl of warm water, making sure that the level of the water is below the neck of the bottle. You can also use a bottle warmer. Do not warm it for more than 15 minutes
- Then follow steps 8-10 on page 13

To protect your baby from illness such as gastro-enteritis (vomiting and diarrhoea), you should make up each feed as you need it.

Can I use bottled water to make up bottle feeds?

Tap water is usually safe to use. However, there may be times when you need to use bottled water like if you are on holiday, have a boil notice on your water supply or have a water softener system.

When using bottled water to make up bottle feed:

- Use still water only. Never use fizzy/sparkling water
- Use bottled water that has a sodium content of less than 20mg/L. This information will be on the label. Please note – sodium is also called salt, sodium chloride, Na and NaCL and 20mg can also be written as 20000ug- please read labels carefully
- Always boil bottled water before making up feeds

When can I stop sterilising bottles?

You must sterilise all bottles until your baby is at least 1 year old. An unsterilised bottle can make your baby sick.

How much formula milk should my baby take?

This is only a guide. If you are bottle-feeding, let your baby decide how much he or she wants unless your baby is sick. Do not try to make your baby finish a bottle if he or she does not want to. Never re-use leftover milk once your baby finishes feeding. Throw it away.

Your baby's age:	Number of feeds	Amount of formula feed per baby weight
Birth to 3 months	6-8 (feeding every 3-4 hours)	150ml per Kg (2½ fluid ozs per lb)
4-6 months	4-6 (feeding every 4-6 hours)	150ml per Kg (2½ fluid ozs per lb)
7-9 months	4 (baby also having food)	120 ml per Kg (2 Fluid ozs per lb)
10-12 months	3 (baby also having food)	120ml per Kg (2 Fluid ozs per lb)

What other drinks can I give or not give my baby?

- Breastfed babies get all the nourishment they need from your milk. They do not need any other drinks as these would reduce the amount of breastmilk they receive
- If your baby is formula fed, you can give cooled boiled water particularly if your baby is constipated

Attention!

- Diluted pure unsweetened fruit juices are NOT suitable
- Cow's milk is NOT suitable for babies under 1 year old
- Do NOT add sugar, rusks or baby rice to your baby's bottle
- Do NOT give your baby tea, as it reduces your baby's iron uptake
- Do NOT add any medicines to your baby's bottle
- From about 6 months, plan to gradually introduce a cup or beaker for drinks
- Aim to replace all bottles (if using) with a cup or beaker by the time your baby is about one year old

For more information about sterilising and preparing each feed read the HSE/SafeFood information leaflet 'How to prepare your baby's bottle feed', available in the publications section of www.healthpromotion.ie



Vitamin D

Vitamin D is needed by the body to take important nutrients from food, especially calcium to grow healthy, strong bones. Vitamin D helps prevent rickets. Rickets causes soft, weak bones that break easily and can lead to major bone deformities. Rickets is most common in children between 3 and 18 months of age.

Vitamin D comes from sunlight through the skin, and from some foods; including fortified dairy products, cereals and oily fish (salmon, mackerel and sardines). Vitamin D deficiency is common in Ireland because we have less sunlight from October to March.

Important

- All infants under 12 months should be given Vitamin D drops because it is not safe for babies and children to be in direct sunlight and so their skin cannot get Vitamin D3 from the sun. Also, babies of this age are growing very fast and their diet does not include enough vitamin D
- Vitamin D is recommended for all babies (breastfed, formula fed or spoon fed) from 0 -12 months
- The product used should only contain Vitamin D, and not a combination of other vitamins
- Vitamin D3 (cholecalciferol) is the preferred form of vitamin D for infants.
- The recommended dose of Vitamin D is 5 micrograms every day (also written as 5µg or 200IU)
- Read the information on the label carefully. The number of drops or amount of liquid needed to provide the recommended daily dose (5 micrograms) is different for each product. Ask your pharmacist, nurse, doctor or dietician for advice, if needed.
- Give your baby the correct dose of Vitamin D. Very high amounts of Vitamin D are harmful, so do not give more than one dose per day. If you forget to give your baby their daily Vitamin D, then start again the next day
- The dose can be given directly into the baby's mouth, or applied to the bottle teat or breast before feeding. Never add the drops or liquid to your baby's bottle or food
- If your baby is ill or premature, you should follow your doctor's instructions
- As with all medicines, food supplements or other dangerous products, keep the Vitamin D out of the sight and reach of all children

For more information on Vitamin D or to see the list of suitable Vitamin D supplements see www.hse.ie/vitamind or ask your pharmacist, public health nurse, midwife or doctor.



Weaning to solids

What is weaning?

Weaning is the introduction of solid food into your baby's diet during the first year of life. During this process your baby will progress from breast milk or formula milk only to a fully mixed diet with foods of different textures and tastes. The goal is that by one year old your baby will be eating modified family foods, with no added gravy, sauces or salt.

The introduction of solid food to your baby's diet should take place at about 6 months of age. The recommendations are the same for both breastfed and formula fed babies. Babies develop at different stages so begin when your baby is ready, but not before 17 weeks (4 months) and no later than 26 weeks (6 months). If your baby has special needs or was premature then weaning can be delayed. Remember, you can continue to breastfeed.

What are the signs that your baby is ready to start eating solids?

- Does not seem satisfied after a milk feed
- Starts to demand feeds more frequently over a time period of more than one week
- Shows an interest in food, or may be reaching out for food
- Watches others with interest when they are eating
- Chews and dribbles more frequently
- Is able to sit up with support and can control their head movements

Weaning your baby off the breast

It is recommended to breastfeed exclusively for 6 months and to continue to breastfeed after solid foods are introduced, up to 2 years or beyond.

When can I start introducing solid foods?

If you have any questions about when your baby may be ready to move on to solid foods, ask your public health nurse, practice nurse or dietitian for advice.

What first weaning foods can I give my baby?

- Gluten-free cereals such as baby rice
- Fruit such as banana, stewed apple or pear
- Vegetables such as cooked carrot, turnip or potato; and
- Traditional foods from other cultures such as yam or pumpkin

Purée, sieve or mash weaning foods until they are a soft and runny consistency.

What liquid can I use to soften my baby's food?

Use:	Do not use:
<ul style="list-style-type: none">• Breast milk	<ul style="list-style-type: none">• Gravy
<ul style="list-style-type: none">• Formula milk or	<ul style="list-style-type: none">• Stock cubes
<ul style="list-style-type: none">• Cooled, boiled water.	<ul style="list-style-type: none">• Jars or packets of sauce.

Are there any tips to help me wean my baby to solids?

- Do not give your baby weaning foods until he or she is at least 6 months old
- Always wash your hands before you prepare food or feed your baby
- Choose a time when your baby is relaxed and fully alert
- Be prepared for a mess. Dribbling bibs and floor mats are useful
- Thoroughly clean your baby's spoon and bowl before you use them
- Start weaning on to solid foods once a day. Gradually add weaning foods to other meal times
- Start with 1 teaspoon of food per meal. Gradually increase the amount
- Introduce new foods one at a time and allow your baby to get used to the taste
- Offer the solid food first and then follow with breast or formula milk
- Never leave your baby alone while he or she is eating, in case of choking
- Do not reheat food
- Do not give babies under 1 year old honey, due to the risk of botulism
- Do not add salt or sugar to your baby's food or sugar or rusks to the formula feed
- Convenience foods, jars or packets of baby food are useful for emergencies or when you are going out. They are unsuitable for everyday use because they are costly and may have added salt and sugar



For more information and advice about weaning, ask your public health nurse, practice nurse or doctor. Read 'Feeding your baby: introducing family meals' in the publications section of www.healthpromotion.ie

Caring for your baby's teeth

Start taking care of your baby's mouth from birth.

- Before teeth appear, clean your child's gums twice a day with a clean soft wash cloth or gauze
- As soon as the first tooth appears, introduce gentle toothbrushing twice a day using water and a small, soft toothbrush
- If your baby uses a bottle, do not use it as a comforter, and do not let them sleep or nap with a bottle in their mouth
- Never put sweet drinks including fruit juice into the bottle
- Do not add sugar to your baby's foods
- If your baby uses a soother (dummy) never dip it in sugar, syrup, honey or anything sweet
- If your baby needs a soother between feeds, give a clean soother that has been recommended by your dentist or doctor

Teething and gums

Your baby may start teething from about 13 weeks, although no teeth may appear until your baby is 6 months or more.

What are the signs that my baby is teething?

Your baby may:

- Have red, flushed cheeks
- Dribble, which may lie in the skin folds on your baby's neck causing soreness
- Chew on their fists or on their toys more than usual
- Have sore and tender gums and
- Have a nappy rash

How can I help my baby cope with teething?

To help soothe your baby's gums, give your baby something hard to chew such as a clean cool teething ring. Massage your baby's sore gums with a sugar-free teething gel that is suitable for your baby's age.

Ask your dentist, doctor, practice nurse or public health nurse for more advice about caring for your child's teeth or contact the Dental Health Foundation of Ireland on 01 4780466.

www.dentalhealth.ie

3 Sleeping and crying



How should my baby usually sleep?

- The best position to put your baby down to sleep is on their back with their face upwards and feet to the foot of the cot
- Change their sleeping position in the cot. This encourages your baby to move their head to the left and right as they naturally turn towards the bright side of the room. This will help your baby's head and neck muscles to develop strength equally on both sides. It will also help to develop the shape of your baby's head
- During the day you can place your baby on their tummy with their hands out at either side to support them. This 'tummy time' helps to strengthen their head, neck and back muscles. It also lets your baby experience feeling to the front of their body. You could do tummy time 3-4 times a day
- You must stay close to your baby while they are in this position. Do not let them sleep lying on their tummy

How much sleep does my baby need?

The first few weeks can be a difficult time especially if your baby slept very well in hospital but will not sleep at home. It will take time to adjust to a new routine.

Your baby's age:	Your baby:
From birth- 3 months	Needs about 16-20 hours over a day and may go straight to sleep after a feed. Some babies sleep more than others. Background noises such as music or children playing may not wake them but a sudden loud noise might.
3-6 months	Needs about 16-18 hours over a day and may still go straight to sleep after a feed then wake for a while before the next feed is due. By about 6 months your baby will stay awake and be more alert between feeds.

Are there any tips to help my baby sleep at night?

Build a routine around the last feed before you settle your baby down to sleep

- Feed your baby after a bath or after you change him or her into sleeping clothes
- Use a dim light when you feed your baby at night. A light that is too bright may over stimulate your baby
- Do not talk out loud when you feed your baby at night. Talking may encourage your baby to stay awake. You can whisper to your baby if you need to
- Do not change your baby's nappy if the nappy isn't dirty



Where can my baby sleep safely?

- Keep your baby's cot in your room for at least the first 6 months
- To avoid a draught, do not place your baby's cot below a window or against an outer wall
- Do not place your baby's cot next to a radiator or heater as it may be too hot
- Do not hang ribbons and bits of strings from toys over your baby's cot

Reducing the risk of cot death

What is cot death?

Cot death (Sudden Infant Death Syndrome, or SIDS) is the sudden death of an infant or young child that is unexpected and tests after death fail to show the cause of death.

How can I reduce the risk of cot death?

- Always put your baby on his or her back to sleep in a face up, face clear position, even for naps
- The safest place for your baby to sleep at night is in a cot in your room
- Place your baby's feet to the foot of the cot
- Make sure your baby's head stays uncovered when asleep
- Don't wrap your baby in too many blankets. Sheets and cellular blankets are best, as you can adjust the temperature by adding one or taking one away. Cellular blankets have small holes in them and keep your baby warm without overheating
- Don't put a quilt, duvet, bumper pads, pillows or toys in the cot
- Dress your baby for bed in a nappy, vest and babygro. In hot weather, your baby needs fewer clothes. Always remove the bib before you put your baby down to sleep
- Do not let your baby get too hot or too cold. Check how warm your baby is by feeling their tummy. It should feel warm not hot. If your baby's tummy feels hot or if your baby is sweating anywhere, then your baby is too warm so remove some of the bedding



- Make sure the room your baby sleeps in is not too warm. The ideal room temperature is between 16-20 degrees Celsius (62-68 degrees Fahrenheit). If the room feels too warm for you, it's too warm for your baby. Use a room thermometer so that you can easily check the temperature of your baby's bedroom

- Breastfeed your baby if possible
- Do not smoke or allow anyone to smoke in your home or in your car.
- Don't fall asleep in bed with your baby if you or your partner smoke, have taken alcohol, drugs or medication that makes you sleep more heavily or if your baby is less than 3 months old, was born prematurely or had a low birth weight (less than 2.5kg or 5.5lbs)
- Never fall asleep with your baby on a sofa, couch, arm chair or beanbag
- If your baby is unwell and not responding to you call the doctor quickly

Read the Safe Sleep section on www.hse.ie/childsafety

Why does my baby cry?

Crying is the main way that your baby tells you he or she needs something. Reasons for crying include

- Hunger or thirst
- Having a wet or dirty nappy
- Having a pain from wind or colic
- Being too hot or too cold
- Being overtired or over stimulated
- Loneliness or boredom or
- Being unwell

Contact your doctor to check there is no underlying health problem.



How can I soothe my crying baby?

- Pick up your baby and hold them close and move gently
- Feed your baby
- Change your baby's nappy
- Gently rock your baby up and down in the pram
- Gently talk or sing to your baby or listen to music together. Babies enjoy the soothing sound of their parents' voices especially when the voice is close and softly spoken
- Massage your baby gently with unscented oil
- Go for a short walk or drive in the car with your baby
- If the crying continues, if it sounds unusual, or if you are concerned that your baby is ill, contact your doctor

Never shake your baby.

If you are finding it hard to cope with your baby's crying, then take time out.

- Put your baby down in his or her cot and go into another room
- Ask someone to care for your baby
- Contact a relative, friend, your doctor or your public health nurse for advice and help
- Phone Parentline for support and advice: 1890 927 277

Never shake your baby, as this can damage your baby's brain.

What is baby wind or colic?

Wind is air that your baby has swallowed while he or she is feeding, crying or yawning. Babies need help to relieve trapped wind. Hold your baby up against your shoulder after a feed and massage his or her back. If your baby has a lot of trapped wind and you are formula feeding try changing the teat on the bottle.

Colic is a tummy pain. Nobody is sure why some babies get colic. It happens much less in breastfed babies. Colic pain usually starts when babies are about 2 weeks old and ends when babies are about 3-4months old. It is more common in the evening time. If your baby has colic, he or she will cry. Your baby can also draw up his or her legs and go red in the face.

To help relieve the colic:

- Massage your baby's tummy
- Try different types of teats if you are formula feeding
- Ask your pharmacist, doctor or public health nurse about medicines and other options that may help

If you are worried, contact your family doctor for advice



4 Caring for your baby every day



Bathing your baby

Your midwife or public health nurse will show you how to bath your baby. Do not be afraid to ask for help or to see it done once or twice before you try. There are many aids to bathing a baby which can be placed in your bath such as bath rings, bath seats or recliners.

Are there any tips to help me bath my baby?

- Organise everything such as clean towels, creams and clothes before you start the bath
- Plan the bath for a quiet time of the day
- Do not bath your baby just after a feed as he or she may get sick
- Close windows to prevent a draught
- Never leave your baby alone in the bath
- Do not rely on a toddler or older child to mind your baby in the bath.
- Put the cold water in the bath first, then warm water and then cold water again to make sure the taps are cool and won't burn baby. The temperature should be about 36 degrees Celsius
- Always check the temperature of the bathwater with your elbow, hands are not heat sensitive enough
- The water level should be just high enough to cover your baby's tummy when he or she is lying down
- Support your baby's head while you wash your baby
- Use both hands to lift your baby in and out of the bath
- Empty bath water immediately after taking baby out
- A baby bath two or three times a week is enough to keep your baby fresh

How do I keep my baby fresh between baths?

A top and tail wash is a quick way to keep your baby fresh between baths. This means washing:

- Your baby's face and hands
- The folds or creases under the neck
- The nappy area



Dirty nappies

Your baby's dirty nappy is sticky and green or black in colour for the first few days. This is called meconium. This will change later to a yellow colour. Breastfed babies usually have runny nappies that do not smell. Formula fed babies have dirty nappies that are usually more formed and smellier.

Wash your hands after changing a nappy.

How often should my baby have a dirty nappy?

Some babies have a dirty nappy at every feed and other babies have a dirty nappy once a day. Your baby is not constipated if the bowel motion passed is soft, even if the bowels have not moved for one or two days. Your baby may strain when passing the stools and this is normal, but straining with crying can be a sign of constipation. With constipation, the stools are firm dry pellets which do not soak into the nappy.

You will soon see a pattern for your baby. If you have any concerns contact your public health nurse or doctor.

How often should my baby have a wet nappy?

Your baby should have 5-6 wet nappies a day. This means your baby is getting a good supply of milk. If you have any concerns contact your public health nurse or doctor.

Are my baby's bowel habits normal?

Some babies may have one or more dirty nappies every day, others may have one every few days. Constipation is when babies have a delay or a difficulty in passing stools. The stools are firm, dry pellets which do not soak into the nappy. Your baby may strain when passing stools and this is normal, but straining with crying can be a sign of constipation. Breastfed babies rarely get constipated as breast milk contains a natural laxative called motiline. Some breastfed babies over 6 weeks old may only pass a stool every few days but they are not constipated.

If any of the following are present consult your doctor:

- Fever
- Tight empty back passage (rectum)
- Vomiting
- Constipation
- Bloody diarrhoea
- Bloating tummy
- Failure to thrive

Check to make sure you are putting the correct number of scoops of formula to water. Never swap scoops between different types of formula since they may not be the same size. Solids such as rusks or baby rice should never be added to an infant's bottle. Make sure your baby is having their daily fluid requirements.

Age of Infant	First Line of Action	If Constipation continues
0-2 months	Give 30 mls cooled boiled water 1-2 times a day	150 mls per kg
2-6 months	Give 30-60 mls cooled boiled water twice a day	Give 30-60 mls of fruit juice e.g prune, pear or apple juice twice a day Dilute juice to 1 part juice to 3 parts water

- You may also massage your baby's tummy in a clockwise direction, making firm but gentle circular motions from the belly button outwards
- Lie your baby on their back and gently move the baby's legs backwards and forwards in a 'bicycle' motion
- Give the baby a warm bath to relax the bowel



Carrying your baby

It is important to support your own back and your baby's head and back when you are lifting and carrying your baby. Useful equipment for moving about with your baby include:

- A baby sling because it supports your baby's head and encourages bonding with you
- A rear-facing baby seat for carrying your baby safely in a car, this must fit correctly
- A pram or a buggy that can lie back (recline) so that your newborn baby can lie down, especially if your baby was premature

Bring your baby for a walk or a drive as soon as you feel fit enough to go out. You and your baby must wear clothes suitable for the time of year. You will also need to stock up your baby bag with spare bibs, baby clothes, feeds and equipment to change your baby's nappy. With time and practice, it gets easier and quicker to do.

Common skin care questions

What is cradle cap?

Cradle cap looks like dry, flaky or yellowish-crusting skin on your baby's scalp. Cradle cap will eventually go away on its own. If it spreads or worsens, ask your public health nurse or doctor for advice.

What is jaundice?

Jaundice is when your baby's skin and eyes have a yellowish shade. Many babies get slightly jaundiced in the first few days after birth. This is because your baby's liver is not yet ready to fully break down blood cells. If jaundice stays for more than the first week after birth or if it worsens, ask your public health nurse or doctor for advice. Continue to feed your baby often to help clear jaundice.

What are milk spots?

Milk spots, also called milia, are tiny infected spots on your baby's face and neck. Bacteria causes milk spots. The spots should settle without any treatment.

How do I care for my baby's umbilical cord (belly button)?

- Wash your hands before and after you touch the cord
- Clean around the base of the cord if needed with cotton wool and cool boiled water
- Keep the belly button area dry after you clean it
- Make sure that the nappy is not covering the cord

The umbilical cord stump should fall off in the first week after birth.

What is nappy rash?

Nappy rash is a red, moist or broken area on your baby's bottom. Most babies get nappy rash at some time in the first 18 months. Your baby can get nappy rash if:

- You leave him or her too long in a dirty or wet nappy
- A rough nappy rubs against your baby
- Your baby has a thrush infection
- You use a strong soap or washing powder
- You use baby wipes that contain alcohol or
- Your baby is teething

How can I heal my baby's nappy rash?

Gently wash your baby's bottom and pat it dry at each nappy change. Leave off the nappy for half an hour and expose the skin to fresh air, as much as possible. There are treatments available, such as creams and powders that help to heal nappy rash. Ask your public health nurse, pharmacist or doctor for advice.

Other rashes

Babies can get rashes which are difficult to identify such as Heat rash - This fades once the baby is cooled down.

Meningitis and septicaemia

Meningitis is an inflammation of the lining of the brain and spinal cord. There are two main types of meningitis: bacterial and viral. Septicaemia is a blood poisoning from bacterial meningitis.

What are the symptoms of meningitis or septicaemia?

You should be concerned and seek medical attention immediately if your baby:

- Is irritable when you pick them up and has a high pitched or moaning cry
- Has a tense or bulging soft spot on their head
- Has a stiff neck
- Is not able to tolerate bright light
- Has a high temperature
- Has a seizure or fit
- Has a very bad headache
- Is vomiting or refusing to feed
- Has pale or bluish skin

- Has cold hands and feet and shivering
- Has stomach, joint or muscle pain
- Has a stiff body with jerking movements or a floppy lifeless body
- Has red, brown or purple pinprick rash marks or blotches on the skin. Use the glass tumbler test to check for a meningococcal septicaemia rash

**Not every child has all these symptoms at one time.
Symptoms can occur in any order.
Septicaemia can occur with or without meningitis.**

How do I do the glass tumbler test?

Press the bottom or side of a clear drinking glass firmly against the rash. If the rash does not fade under the pressure of the glass tumbler, then your child may have a meningococcal septicaemia rash and you should get medical help at once. The rash can be harder to see on darker skin, so check on the palms of the hands or the soles of the feet.

- Trust your instincts. If you think your child is ill, get medical help at once
- For more information on meningitis, see Meningitis Research Foundation.
www.meningitis.org or LoCall 1890 41 33 44

Immunisation

What is immunisation?

Immunisation is a safe and effective way to protect your baby against certain diseases. These diseases can cause serious illness or even death. When your child is given a vaccine, their body responds by making antibodies to fight the disease. Immunisations recommended in the childhood schedule are free from your GP.

When should I immunise my baby during the first 6 months?

Your baby will receive their first vaccine the BCG soon after birth in the maternity hospital or at the Health Centre. Your baby needs 5 visits to your GP to be fully vaccinated and protected against serious diseases by 13 months. 3 of these visits take place in their first 6 months.

When my baby is:	My baby should have:	Number of injections
Birth or soon after	BCG	1
2 months	6 in 1 + PCV	2
4 months	6 in 1 + Men C	2
6 months	6 in 1 + Men C* + PCV <small>*Children born on or after 1st July 2015 only need two doses of Men C at 4 months and 13 months.</small>	3 or 2*

BCG = to prevent tuberculosis (TB)

Men C = to prevent meningococcal C disease

6 in 1 = to prevent diphtheria, tetanus, whooping cough (pertussis), Hib (haemophilus influenza B), polio (poliomyelitis) and hepatitis B

PCV = to prevent pneumococcal disease

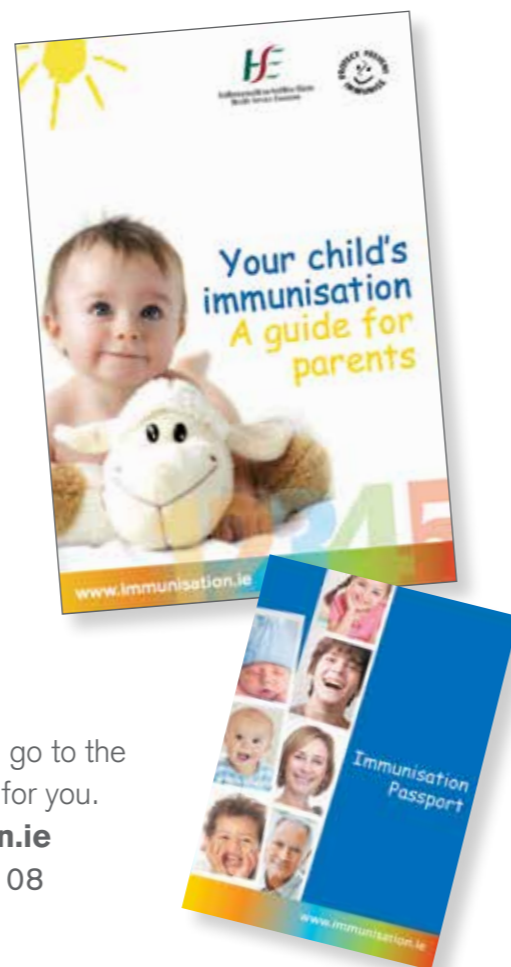
Minor reactions that may occur after an immunisation include:

- Redness, soreness or swelling in the area where the injection was given
- Fever or
- Irritable behaviour

If your baby is very unwell after an immunisation, there may be some other reason for the sickness. Talk to your doctor about this.

Remember your child needs **FIVE** visits to your GP to complete their course of immunisations and be fully protected against serious illnesses.

For more information about immunisation, read *Your Child's Immunisation: A Guide for Parents*, available in the publications section of www.healthpromotion.ie or from your public health nurse or doctor. The guide includes an immunisation passport for your child. Bring this when you go to the doctor for your child's injections so they can record them for you. You can get more information from www.immunisation.ie or contact the National Immunisation Office, 01 867 6108



PROTECT YOUR CHILD - IMMUNISE.

Common childhood illness

Most babies get ill at some stage. Usually, you can care for your baby at home, as these bouts of illness pass quickly. The table below lists some common childhood illnesses and things you can do to care for your baby. If you are unsure, contact your doctor.

Breastfeeding your baby will help to protect him or her against fevers, coughs and colds and tummy upsets. If your baby does get sick it is important to continue to breastfeed your baby. Breastfeeding provides antibodies to protect your baby against future illness. It also comforts your baby and helps to ensure your baby gets enough fluids and provides antibodies to protect against future illness.

Common childhood illnesses and things you can do to care for your baby.

Fever

Follow these tips to help reduce your child's temperature

- The normal temperature for a baby, taken under his or her arm ranges from 36.5 to 37.2 degrees Celsius
- Get advice from your doctor if your baby has a temperature especially if your baby also looks unwell
- Remove their outer clothes. This allows extra heat to escape from their body
- Sponge them down with lukewarm water and allow the skin to dry
- Encourage your child to drink lots of fluids such as water or their regular milk feed
- Give your child Paracetamol or Ibuprofen to lower the temperature as recommended on the bottle. Always read the instructions

Coughs and Colds

- Keep your baby warm
- Give your baby fluids to drink, such as the usual milk feed
- Contact your public health nurse, doctor or pharmacist if your baby finds it hard to breathe
- If your baby is finding it hard to breathe through their nose ask your pharmacist for saline drops
- Contact your doctor if the cough doesn't go away

Vomits	<ul style="list-style-type: none"> • Small vomits after a feed are normal and your baby will grow out of this. To help reduce this raise the baby's head slightly above the level of their tummy after feeds. Place a folded towel under the infant's mattress. Do not bounce or handle the infant too much after feeds • If your baby vomits large amounts, or if the vomiting is forceful or repeated, contact your doctor
Sticky eyes	<ul style="list-style-type: none"> • Get advice from your public health nurse, doctor or pharmacist in case there is an infection in the eyes or eyelids
Thrush (Candida)	<ul style="list-style-type: none"> • On your baby's tongue and mouth, thrush is a white spotted fungus with redness around it that does not brush away when you touch it • On your baby's bottom, thrush looks like a red rash with white spots or a peeling appearance to the skin • Contact your public health nurse, doctor or pharmacist to find out how to treat thrush
Tummy upsets (gastroenteritis)	<ul style="list-style-type: none"> • If your baby has a tummy upset with vomiting, diarrhoea or both, then he or she can get dehydrated (dried out) if not given enough fluid to drink • Regularly offer your baby small amounts of fluids, such as his or her milk feed or breastmilk while unwell • Look for signs of dehydration: Sunken fontanelle (soft spot on baby's head) Dry mouth Sunken eyes No tears • If the problem continues and your baby will not drink, then contact your doctor for advice and treatment • VTEC (Verotoxigenic E. coli) is a serious type of gastroenteritis that can result in complications such as kidney failure. To prevent spread of infection children who have VTEC are not allowed attend crèches or other childminding facilities until they are free of infection <p>For more information see the VTEC Fact Sheet on www.hpsc.ie</p>

When should I contact my doctor about my baby's health?

Always contact your doctor if your baby:

- Has a purple or red rash that looks unusual
- Has a raised or sunken soft spot (fontanelle) on his or her head
- Has a fever
- Appears much paler and sleepier than usual and is hard to wake up
- Has an unusual, non-stop, high pitched cry or scream
- Has a fit (convulsion)
- Has difficulty breathing
- Goes blue around the lips or face
- Is not feeding normally or refuses to feed
- Has unusually dry nappies or less than three wet nappies in one day
- Has diarrhoea at each nappy change
- Has an upset, such as a fall or a bump on the head
- Gets an electric shock
- Is burned or scalded
- Is bitten by an animal

When should I call an ambulance?

You should always call **112** or **999** in a life-threatening emergency, if your baby is seriously ill or injured, and their life is at risk.

Examples of medical emergencies include (but are not limited to):

- Difficulty breathing
- Unconsciousness
- Severe loss of blood
- Severe burns or scalds
- Choking
- Fitting or concussion
- Drowning
- Severe allergic reactions



5 A guide to your baby's growth and development



Your baby's development

Your baby's development may vary. If you are worried about your baby's development or hearing, talk with your doctor or public health nurse. Below is a guide to your baby's development, including their social and emotional development.

At 1-2 months, babies:

- Hold up their head for short periods of time
- Bend their legs when they lie on their tummies
- Turn their head and eyes towards light
- Startle to a sudden sound
- Respond to your voice
- Cry, smile, coo
- Look at faces
- Quieten when picked up (the majority of the time)

At 3-4 months, babies:

- Kick vigorously
- Keep their head up with little or no support
- Lift up their head when you put them on their tummy with their arms on the floor
- Sit up straighter when you hold them in a sitting position
- Put weight on their feet when you hold them standing up
- Follow moving objects with their eyes
- Watch their own hands
- Turn their head to follow sounds
- Make noises like 'oo' and 'ah'
- Give warm smiles and laughs
- Cry when upset and seek comfort
- Show excitement by waving arms and legs
- Are more awake and alert



At 5-6 months, babies:

- Sit with support
- Roll from their front to their back
- Raise themselves on the palms of their hands when they lie on their tummy
- Grab small objects
- Look around constantly
- Make tuneful noises to themselves and others
- Put things in their mouths
- Play with their feet
- Hold up their arms so you can lift them
- May sleep through the night
- Like to look at and be near a special person
- Like to be held, cuddled and listened to
- Enjoy music and stories

Your baby's weight gain and growth

How much weight should my baby gain?

Your baby loses up to 10% of the birth weight during the first few days of life. Then your baby will start to grow steadily. Most babies double their birth weight by about 6 months, but this may vary. For instance, a breastfed baby may gain weight more gradually.

Your baby should be active several times a day. Being active as a baby means tummy time, playing or rolling on the floor, reaching for or grasping balls or other toys.

Some parents enjoy taking a few minutes rest by lying on the floor with their child. Do not push these developmental tasks ahead or too quickly. Each phase is important to your child's overall development.



How much should my baby grow?

After the first month, your baby may increase in length by an average of 2½ – 3 cms (1-1½ inches) a month. Your doctor or public health nurse will measure your baby's height, weight and head circumference. The results are plotted on your child's Personal Health Record where it is available or on a growth chart. This record has an account of your baby's growth and development. Your baby has growth spurts at around 2 or 3 weeks, 6 weeks and 3 months of age. At these times, your baby's appetite will increase.

Your baby's eyesight

What colour are my baby's eyes?

Babies are often born with blue eyes. You won't see the final colour of your baby's eyes until he or she is about 3-6 months old.

What can my baby see in the first 6 months?

Your baby's age:	What your baby can see:
At birth	Your baby should have sight from birth.
0-6 weeks	Your baby will start to focus on the face in front of him or her.
6-8 weeks	On seeing you, your baby will start to smile. Your baby can follow a brightly coloured toy that is held about 20 cms (8 inches) away.
2-6 months	Your baby enjoys looking at bright colours and moving objects.
By 6 months	Your baby can see across a room.

Some babies are born with eye problems or develop eye problems at an early age. If you are concerned about your baby, contact your doctor or public health nurse for advice or referral to a specialist.



What can my baby hear?

Shortly after birth babies startle to sudden loud noises, like a loud clap or a door slamming. Babies will respond by blinking or opening eyes wide.

By 1 month	Notices sudden prolonged noises like the noise of the vacuum cleaner and should pause and listen when it is turned on.
By 4 months	Quietens or smiles at the sound of your voice, even when he or she can't see you. Your baby might turn head towards you as you approach.

Newborn babies will have their hearing screened in the hospital. For more information on what the test involves see www.newbornscreening.ie

Your baby's speech and language development

Speaking to and reading with your baby will help your baby learn to talk.

Are there tips to help my baby learn to talk?

- Talk to and reply to your baby's gurgles and babbling by copying the noises
- Read colourful books with your baby
- Say nursery rhymes and sing songs
- Play music for your baby
- Play simple games that have words and actions with your baby, such as peek-a-boo

If you are worried about your baby's speech and language development or hearing, contact your local public health nurse, doctor or speech and language therapist.

Health checks for your baby

When is the health check?	What is the health check?
After birth in hospital	A paediatric doctor examines your baby. A paediatric doctor is a doctor who works with children.
During baby's first week	<p>Your newborn baby has a heel prick test to check for six rare conditions. All the conditions are inherited from both parents. The test is called a Newborn Bloodspot Screening test. Screening ensures that any babies with these rare conditions are identified and treated as early as possible.</p> <p>Your baby has their hearing checked. Most babies born with a hearing loss are born into families with no history of hearing loss so it is important to screen all babies as early as possible.</p> <p>For more information on the heel prick test and hearing tests see www.newbornscreening.ie</p>
On discharge from hospital or following a home birth	Your public health nurse will visit you at home to meet and support you and your family and examine your baby.
At 6 weeks	Your doctor checks your baby.
At 3 months	<p>The public health nurse will organise a 3 month developmental assessment on your baby either in your home or in the health centre.</p> <p>Your public health nurse, doctor and practice nurse hold 'well baby' clinics. You can have your baby weighed and discuss his or her progress at these clinics.</p>

Your baby with special needs

If your baby has special needs or a long-term illness, this can bring extra adjustments to your family's life. As a parent you may have difficult feelings to cope with. You may also have to make extra decisions for your baby and your family.

Your local doctor and public health nurse are there to help. They can offer information and support to guide you. They can also refer you to other services that you may need.

To learn about the services in your area for your child with special needs, contact the disability services department in your area.

The HSE National Infoline is available on 1850 24 1850.



6 Playing and learning



Helping my baby develop through play

Babies need to be physically active several times a day especially through floor based interactive play including tummy time. The amount of time that your baby is not active or is in a restricted position should be no more than 1 hour except when sleeping. Watching television is not recommended for children under 2. More information on active play can be found in the HSE resource 'Active Play Every Day' and www.getirelandactive.ie

My baby's age	What to do with my baby?	How does my baby respond and learn
0-3 months	<p>Cuddle, touch, sing and talk to your baby a lot.</p> <p>Smile at your baby as you hold them close to you.</p> <p>Hang a toy over your baby's cot to help your baby's vision. Avoid strings or cords use velcro if possible.</p>	<ul style="list-style-type: none"> Your baby gets excited when he or she hears or sees you Your baby responds to your touch and the tone of your voice by cuddling in to you Your baby learns to feel safe and bonds with you Your baby shows interest in the moving toy Your baby learns by seeing different coloured things and hearing different noises

My baby's age	What to do with my baby?	How does my baby respond and learn
3-6 months	<p>Play on a floor mat with your baby. Place your baby on his or her tummy for a short time every day. This will help to stretch and develop his or her muscles. Always supervise your baby when playing on their tummy. Never let your baby fall asleep on their tummy.</p> <p>Include toys suitable for your baby. Do not use toys that are too small or sharp, as your baby will put them in his or her mouth as part of learning through play.</p> <p>Gently bounce your baby on your knee.</p>	<ul style="list-style-type: none"> Your baby laughs readily when you play together Your baby can also show anger by screaming and squealing instead of crying Your baby learns to move about freely Your baby learns to attract your attention by making noise or waving his or her arms and hands excitedly This contact through play is an important part of your baby's development Your baby learns about bright colours, different feels, tastes and shapes, and objects that make noise Your baby enjoys the gentle motion and learns about movement

7 Keep your baby safe



How to help keep your baby safe

From birth to 6 months your baby fully depends on you to keep him or her safe.

Falls:

- Do not leave your baby alone on a bed, raised changing mat or other raised surfaces
- Do not leave your baby in a bouncer on a raised surface. Your baby may topple over
- Always strap your baby into the pram, push chair, high chair or bouncer with a 5 way safety harness
- Avoid baby walkers as they can overturn easily and cause serious injury to children.
- Use correctly fitted stair gates at the top and bottom of stairs. Keep them closed.
- Use window restrictors that don't need tools for opening
- Check that your baby cannot fit through gaps on stair railings and balcony railings
- Be careful when you carry your baby in your arms in case you trip or fall
- Keep floors and stairs clear of trip hazards

Safe Sleep

- Reduce the risk of Sudden Infant Death Syndrome (SIDS)/Cot Death see our safe sleep advice on page 22

Burns and scalds

- Always use a fire guard in front of an open fire, stove, gas or electric fire. Make sure the fire guard is secured to the wall and make sure there is a spark guard in front of an open fire
- Make sure your home has smoke alarms. Check batteries weekly and replace if necessary. Practice a fire drill in your home
- Keep children away from hair straighteners. They can reach very high temperatures and take a long time to cool down
- Do not have a hot drink near you while you feed or hold your baby. Hot drinks are still hot enough to burn up to 15 minutes after being poured
- Avoid using table cloths as your baby may grab at them and pull hot drinks down
- Do not allow flexes or cords from electrical equipment to hang over the edge of counter tops.
- When running a bath, run the cold water, then add the warm water and add cold water again to cool down the taps. Check the water temperature before putting baby in. It should be about 36°C

Water

- Never leave your baby alone in the bath or near any water source - children can drown in seconds, in silence and in very small amounts of water.
- Young children should never supervise a baby in the bath or near water.
- Empty bath water immediately after taking baby out

Choking, suffocation, strangulation

- Necklaces, bracelets and anklets may be marketed as teething aids. Never place a necklace, string, ribbon or chain of any kind on a child under 3 years of age.
- Avoid clothing and toys with cords, ribbons, straps or belts
- Blind and curtain cords are a serious strangulation risk to children. Secure the cords out of your child's reach and sight.
- Always keep nappy sacks well out of reach of babies and never put them in the pram or buggy
- Keep plastic bags and wrappers out of sight and reach of baby.
- Keep animals away from your small baby - cats in particular may get into baby's sleeping place for a snooze. This could be harmful if they settle against baby's face.
- Throw away worn or torn soothers or teats.
- Never leave small objects in your baby's reach - even for a moment.
- Always hold your baby when bottle feeding
- Always supervise baby while feeding and feed only age appropriate food.
- Only use toys that are suitable for your baby's age and developmental stage - make sure they are in good condition and have the appropriate safety standard symbol

Poisoning

- Prevent carbon monoxide poisoning. Have appliances serviced annually and keep vents, flues and chimneys clear, see www.carbonmonoxide.ie
- Keep medicines, cleaning products and gardening products in their original containers and stored out of sight and reach of children
- Use cupboard safety locks

Pets

- All contact between young children and pets should be directly supervised
- When this cannot happen, the pet must be physically separated from young children – for instance put the pet in its cage, fenced area, outside or in separate part of house
- Pets should not be allowed into a child's bedroom whilst the child is sleeping
- Never leave a baby or small child alone with a dog. Never means NEVER! Even a few seconds alone with a dog, no matter how gentle, can result in serious consequences for your child

Sun Safety

- Always keep your baby in the shade
- Use loose clothing and a hat that covers the back of your baby's neck
- Use a layer of total sun block on your baby's face and arms or legs if they are uncovered
- Make sure you and your baby drink plenty

Basic First Aid

Cuts and bleeding

1. **Clean it:** Use cold running water
2. **Stop Bleeding:** Apply light pressure with clean cloth or pad until bleeding stops
3. **Cover it**
4. **Take baby to your GP or hospital:** if in doubt or if bleeding heavily

Burns and scalds

1. **Cool it and clean it:** Immediately run cool or lukewarm cold water over the burn for at least 15 minutes
2. Remove tight clothing and jewellery, if possible, as burnt skin can swell. Don't remove anything which has become stuck to the skin.
3. **Cover it:** Cover the burn with a clean non-fluffy cloth or clean cling-film. A clean plastic bag may also be used if the burn is on the hand. Do not use sticky dressings or place any ice, fats, ointments or creams on the burn.
4. **Take to hospital:** immediately unless very minor burn

Choking

1. Turn your baby face down with their head lower than their body. Support their head, jaw and neck
 2. Give 5 back blows using the heel of your hand between infant's shoulders
 3. Turn your baby onto its back while still supporting their head and neck
 4. Give 5 chest thrusts by placing two fingers over the lower half of the infant's breastbone, below an imaginary line between the nipples. Keep doing 5 back blows and 5 chest thrusts until the object pops out and the baby begins to breathe again
- Keep doing 5 back blows and 5 chest thrusts until the object pops out and the infant begins to breathe again
5. If your baby becomes unresponsive call 999 or 112. Stay on the phone and follow the advice. Stay on the phone and listen carefully for advice
- You must begin CPR (Cardio Pulmonary Resuscitation)
 - If during CPR you see the object, remove it with your fingers but do not place your fingers in the infant's mouth if you cannot see the object



What to do in case of an accident

- If an accident is serious, do not delay. Get help: dial **999** or **112**
- Ask for Ambulance, Fire Brigade or Gardai
- Stay on the phone and listen carefully to the advice you are given

It is also important to:

- Keep a first aid kit in your home
- Learn basic first aid skills

For more information and advice see www.hse.ie/childsafety

Travelling in a car with your baby

Using a baby car safety seat correctly can help prevent injuries to your baby. Your baby or young child can become bored or cry on longer car trips. Be prepared and take breaks. Have food and diversions such as a favourite toy available for the trip. If your baby is distressed pull over safely and make sure your baby is comfortable.

How can I keep my baby safe in the car?

- Always put your baby in a safe baby car seat
- Always strap your baby into a safe baby car seat
- Follow the manufacturer's instructions when you strap a baby car seat in your car
- The baby car seat for babies up to 10 kgs (22 lbs), which is from birth to about 6-9 months old, is designed to face the rear of the car, not the front
- It is safer for your baby to travel in the back seat of the car, if possible
- Never put a rear-facing baby seat into the front passenger seat where a passenger air bag is fitted
- Never leave your baby alone in the car
- Only use the baby car seat when travelling in the car

Choose a baby car seat that:

- Displays a recognised safety standard symbol
- Is the right size for your baby's height and weight; and fits safely into your car

Do not use a baby car seat that:

- Is too old
- Is second-hand or was in a crash
- Does not come with the manufacturer's instructions
- Has any cracks in the frame of the seat; or is missing parts

For more information about fitting a car seat and keeping your baby safe in the car, see the Road Safety for Kids section on the Road Safety Authority website www.rsa.ie



8 Going back to work



If you are planning to work outside the home, you will need to make childcare and possibly breastfeeding arrangements before you go back to work. If it's possible ease yourself back to work with shorter times away from the baby at first.

How can I make good childcare arrangements?

Your childcare arrangements must suit both you and your baby. Some childcare options are:

Full day care for over 3.5 hours in a day nursery or crèche.

Part time day care - which provides structured day care for preschool children for a total of more than 3.5 hours and less than 5 hours per day.

A childminder in your home or their home.

What should I look for before making good childcare arrangements?

Always visit the childminder or childcare service before you send your baby to them.

Whether you choose to use a childminder or send your baby to a crèche or nursery, there is no exact method for finding the right one but it's a good idea to look at the way adults care for and talk and listen to children already in their care.

- Look and notice eye contact, tone of voice, attitude, interest and enthusiasm of adult carers. Look at the everyday care of babies. Nappy changes and feeding should be special moments for babies, which help them to gain trust and feel secure. See what toys are available and if they are age-appropriate, safe and clean, and within reach of babies
- Ask if there is Garda vetting of carers and evidence of same, and if references are available. Ask if your baby will be cared for by the same person every day; someone with whom they can develop a special relationship. Ask how babies are fed, put to sleep and supervised while napping. Ask what play opportunities are available - is there space for

baby to be on the floor and is there an opportunity for babies to be taken outdoors during the day? Ask how you will get feedback on your baby's activities during the day

Ask questions and discuss the options with your partner, family, friends and other parents who use the service.

You can also get information from your public health nurse or see a list of notified preschool services on www.tusla.ie. See www.barnardos.ie for guidance on choosing childcare.

How can I go back to work and continue breastfeeding?

You can continue to breastfeed your baby when you go back to work. During the work day, you can express breast milk and save it for your baby. You do this with a breast pump or by hand.

Before you go back to work, you need to discuss arrangements with your employer.

You will need:

- Breaks so that you can express breast milk
- A private place to express breast milk and
- A fridge to store the milk until you take it home

While you are at work your childminder can give your baby the milk you expressed. When you are not working you can continue to breastfeed your baby at every feed. For more information, talk to your public health nurse, a support group or a friend who has returned to work and continued to breastfeed her baby.

For more information see www.breastfeeding.ie

9 Your benefits and leave entitlements



Children in Ireland are dependants of their parents and so have the same entitlement to health services as their parents. This means that if you have a medical card, your children are included as dependants on that card and are entitled to the same range of services as you.

There is also a range of services specifically for children and certain services are provided free of charge for children even if their parents do not have a medical card. These services are generally provided as part of maternity and infant welfare services, health services for preschool children and school health services. Children are also entitled to vaccination and immunisation services free of charge.

There are various state benefits and leave entitlements for pregnant women and parents. There may also be extra supports and entitlements, for example if your child has special needs. The facts below were correct at the time of going to print but may change in the future.

Health Service Schemes

The HSE provides benefits and services to thousands of families and individuals in Ireland, including schemes provided for in law to make the cost of health and medical care more affordable. Some schemes are means tested, some are based on age groups and some are available to all residents. For example:

- Medical Cards allow people to access Family Doctor or GP services, community health services, dental services, prescription medicine costs, hospital care and a range of other benefits free of charge
- GP Visit Cards allow individuals and families in Ireland to visit their family doctor for free
- The Drugs Payment Scheme ensures that any individual or family in Ireland only has to pay a fixed maximum amount each month for approved prescribed drugs
- European Health Insurance Cards ensure that all Irish residents can access healthcare while traveling to other EU and EEA member states.

See www.hse.ie/benefits to see if you and your family should be registered for these schemes.

Maternity Benefit and Adoptive Benefit

- Maternity Benefit is a payment to employed and self-employed pregnant women
- Adoptive Benefit is a payment to an adopting mother or to a single adoptive father from the date your child is placed with you
- It is available to both employed and self-employed people

For more information

- Talk to your employer
- Your local Citizens Information Centre, 0761 07 4000, www.citizensinformation.ie
- Social Welfare Services (Maternity Benefit section) LoCall 1890 690 690
www.welfare.ie LoCall leaflet request line 1890 20 23 25

Maternity Leave and Adoptive Leave Who gets it?

- You are entitled to 26 consecutive weeks' Maternity Leave and 16 weeks unpaid leave
- You must tell your employer in writing at least 4 weeks before you start your leave
- You are entitled to time off without loss of pay for antenatal and postnatal medical visits. You must inform your employer 2 weeks in advance
- You are entitled to 24 consecutive weeks Adoptive Leave if you are an adoptive mother or a single adoptive father in paid employment
- You must inform your employer in writing 4 weeks before you start your leave
- You are also entitled to a further 16 weeks unpaid leave after the end of your adoptive leave

For more information

- Talk to your employer or
- Your local Citizens Information Centre, 0761 07 4000. www.citizensinformation.ie

Paternity leave

There is no legal entitlement to paternity leave in Ireland. Check if your employer has a policy on paternity leave.

Parental leave

What is it?

This is unpaid leave for each parent. It must be taken before your child is 8 years old or up to 16 years for children with a long-term illness. This leave can be transferred from one parent to the other if both parents are employed by the same employer, subject to agreement. This leave can be taken in one block or divided into sections, with agreement from your employer.

How long is it?

18 weeks

Who do I contact?

- Your employer
Your local Citizens Information Centre
0761 07 4000
www.citizensinformation.ie

Child Benefit

Child Benefit (previously known as Children's Allowance) is payable to the parents or guardians of children under 16 years of age, or under 18 years of age if the child is in full-time education, Youthreach training or has a disability. Child Benefit is not paid on behalf of 18-year olds.

For the most up to date information on the rates see www.citizensinformation.ie

When to apply?

Apply for Child Benefit within 12 months of:

- The birth of your baby or
- The month the child became a member of your family or
- The month the family came to live in Ireland

Who do I contact?

- Your local Citizens Information Centre, 0761 07 4000
www.citizensinformation.ie
- Social Welfare Services (Child Benefit section) LoCall 1890 400 400,
www.welfare.ie

One-Parent Family Benefit

One-Parent Family Payment (OFP) is a payment for men and women under 66 who are bringing children up without the support of a partner. To get this payment you must meet certain conditions and you must satisfy a means test.

More information is available from your local Social Welfare Office

LoCall 1890 500 000

www.welfare.ie

Other benefits you may qualify for

- Back to Work Allowance
- Back to Education Allowance
- Disability Payment
- Domiciliary Care Allowance
- Exceptional Needs Payment
- Family Income Supplement
- Medical Card
- Mortgage Interest Supplement
- Rent Supplement
- Supplementary Welfare Allowance
- Supplement for special diet and
- Unemployment payments



Who do I contact?

- Your local Citizens Information Centre, 0761 07 4000 www.citizensinformation.ie
- Your local Social Welfare Office, LoCall 1890 66 22 44 www.welfare.ie

10 Useful web pages and phone numbers



Information on:

Accident prevention and safety

Road Safety Authority
www.rsa.ie
1890 50 60 80

Irish Sudden Infant Death Association
www.isida.ie
locall 1850 391 391

Child Safety – Preventing unintentional injuries
www.hse.ie/childsafety

Breastfeeding support

Breastfeeding Support Network
www.breastfeeding.ie

Cuidiú, Irish Childbirth Trust
www.cuidiu-ict.ie

La Leche League
www.lalecheleague.org

Child Health Information

Food Safety Authority of Ireland (information on food safety and hygiene)
www.fsai.ie
(01) 817 1300

Health Promotion Unit
www.healthpromotion.ie
1850 24 1850

Health Protection Surveillance Centre
www.hpsc.ie
(01) 876 5300

National Immunisation Office
www.immunisation.ie
(01) 867 6108

Meningitis Research Foundation
www.meningitis.org
1890 413 344

Safe Food
www.safefood.eu
1890 33 66 77

Family Planning Information

Irish Family Planning Association:
www.ifpa.ie
1850 49 50 51
Available in 8 centres around the country

Social Welfare and Services Information

Citizens Information
www.citizensinformation.ie
1890 777 121

Social Welfare Information
www.welfare.ie
1890 66 22 44

For information on first aid courses in you local area, contact:

Order of Malta
(01) 614 0035
www.orderofmalta.ie

St. John's Ambulance
(01) 668 8077
www.sja.ie

Irish Red Cross
1890 502 502
www.redcross.ie

Civil Defence
(0505) 25310
www.civildefence.ie

Parent Support Information:

Aware (support for depression)
www.aware.ie
1890 303 302

Adoption: International Adoption Assoc of Ireland
www.iaaireland.org
01 4992206

Barnardos
www.barnardos.ie
1850 222 300

Cairde (challenging the health inequalities of ethnic minorities)
www.cairde.ie
(01) 855 2111

Childminding Ireland (for registered childminders in your area)
www.childminding.ie
01 2878466

Fathers direct (information for fatherhood)
www.fathersdirect.com

Irish Multiple Births Association www.imba.ie
(01) 874 9056

Irish Society for the Prevention of Cruelty to Children
www.ispcc.ie
(01) 676 7960

Irish Refugee Council
www.irishrefugeecouncil.ie
(01) 764 5854

Lifestart: Home-based education And support programme for parents
www.lifestart.org
(071) 9151114

National Centre for Inherited Metabolic Disorders
www.ncimd.ie
(01) 8784200

National Disability Authority (and links to Irish disability organisations)
www.nda.ie
(01) 608 0400

National Immunisation Office
www.immunisation.ie
(01) 867 6108

One Parent Family (voice, support and action for one parent family)
www.onefamily.ie
1890 662 212

Parentline (for parents under stress)
www.parentline.ie
1890 927 277

Pavee Point (Traveller development and support centre)
www.paveepoint.ie
(01) 878 0255

Treoir (for unmarried parents and their children)
www.treoir.ie
1890 252 084

Tusla Child and Family Agency
www.tusla.ie
(01) 635 2854

These websites and phone numbers were correct at the time of going to print.

Notes

© Health Service Executive 2015
ISBN: 976-1-874218807
Reference Number 09-03-0033
Version 1.0 2010