

parent line

If you're a parent or carer of a 5-16 Year Old
Text your school nurse on
07312 263178
For confidential advice and support



This will be a text in service for parent to access their school nurse to help with a wide range of health problems. This won't be a diagnostic service but we can give advice on....

Available during school holidays

Available Mon - Fri
8.30am - 4.30pm

emotional wellbeing
sleep day and night
healthy eating
soiling wetting
substance misuse
relationships
behaviour bullying
online safety puberty

ENGLISH
A Family Guide to Keeping Your Child Healthy and Common Childhood Illnesses

IF YOU'RE 11-19 YEARS OLD
TEXT YOUR SCHOOL NURSE ON
07520 615718
FOR CONFIDENTIAL ADVICE AND SUPPORT

We help young people with all kinds of things like...

ChatHealth Text anytime... We reply Mon - Fri 8.30am - 4.30pm

BULLYING HEALTHY SMOKING EATING RELATIONSHIPS FEELING SAD OR ANGRY EMOTIONAL DRUGS WELLBEING ALCOHOL EXAM CHANGES TO STRESS YOUR BODY

Is your Child Out-of-Education and between 5 - 16 years old?

Did you know they are still entitled to access a Public Health Nurse for support?

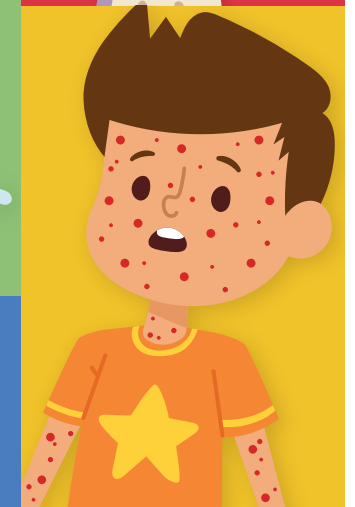
Every child has the right to achieve their full potential. If they are over 13 years old, we can undertake their health assessment independently if they wish. If you require further support, please contact: Kate, Specialist Public Health Nurse 079 697 35010.

The Public Health Nurse can offer support for your Child's physical or emotional development. Such as:

- Assessing immunisation status - letting you know what vaccines are due and how to get them
- Growth monitoring – height, weight and vision screening
- Continence support-Toileting/bedwetting/soiling
- Emotional wellbeing support
- Healthy lifestyle and health promotion
- Helping your child's views and wishes to be heard within health services they access
- Health Assessments
- Signposting to helpful resources
- Access to other health services
- Sexual health advice , including the provision of some contraception



A Family Guide to Keeping Your Child Healthy and Common Childhood Illnesses



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Introduction



When your child is unwell it can be very stressful; you worry about what is wrong and what you can do to help them.

There are a wide range of services available in Cardiff to support you and your child; this booklet is intended to help you know what to do and where to go when caring for an unwell child.

The booklet contains advice on how to manage some of the common illnesses and issues that children often experience. By knowing how to manage your child at home and how to access the NHS's services you could avoid waiting a long time in A&E when you don't need to.

It also has information on some more serious illnesses including what to look out for and when to seek help.

Throughout the booklet we have used a **RED, AMBER** and **GREEN** colour guide to indicate the severity of each symptom and when to get help.



Urgent medical review, call 999 or attend A&E



Contact your doctor (GP)



You can treat this at home with the tips provided.

The information in this booklet is not exhaustive, you should always speak to a doctor if you are unsure about any of the advice in this booklet.



Pharmacy

Highly trained healthcare professionals, easily accessible, often based in supermarkets.

They can give advice on common illnesses, injuries, and issue medication. (Prescriptions in Wales are free).



GP

A GP is a family doctor, who will see you and your children with your health concerns. They can review, advise, give medicines and refer to specialist services if necessary.



Out of Hours/111

If your GP is closed and you need medical assistance, please call 111, they will arrange an appointment with out of hours GP service if it is necessary or give advice whilst waiting for an appointment.



A&E/999

Only call 999 for serious and life-threatening emergencies.

If you live in Cardiff and The Vale, you should attend Accident and Emergency unit (A&E) at

University Hospital of Wales, Heath Park, Cardiff, CF14 4XW



Health Visitor

Health Visitors work with families who have children under 5 years of age. They can offer support and advice on a wide range of issues, through home visits, baby clinics and developmental reviews.



Dentist

There is a waiting list to be registered with an NHS dentist. If you need help with this, the British Red Cross can assist. If you have a dental emergency, please call 111 for access to the dental helpline.

When to attend?

Coughs
Colds
Aches and pains
Sore throat
Flu
Earache
Cystitis
Skin Rashes
Teething
Red Eye
and many more...

See [information on common ailments scheme:](#)



You can make an appointment to see your GP if your child is unwell and you need further advice and support. Your GP can see a wide range of medical and mental health conditions and can provide preventative care as well as health education.

If you are unable to wait until your GP is open, you can contact 111 to get medical advice, they may book at appointment for you to see a GP Out of Hours, for Cardiff and Vales, this is in the same building as CAVHIS in Cardiff Royal Infirmary.

When to attend?

Choking
Struggling to breathe/ stop breathing.
Severe bleeding/pain
Collapse
Broken Bones
Swallowed dangerous substance.
Any life threatening/ critical illness

Advice on breastfeeding and feeding your child.
Sleeping, including safe sleep advice
Child development
Speech and Language
Minor illnesses
Health promotion

Once registered with a dentist you can see them for routine check-ups and dental emergencies. Whilst you are still on the waiting list, in the event of any severe dental pain, swelling or bleeding, you can contact an emergency dentist on 111.

Other Useful Services in Cardiff



British Red Cross

British Red Cross caseworkers provide multi-lingual, one-to-one, support in a safe and confidential environment. The project aims to improve the health and well-being of individuals who find it hard to access healthcare and work with partners towards reducing health inequalities in Cardiff and the Vale.

How British Red Cross help?

- Support to access emergency and ongoing dental care
- Support to access mental health services
- Support to access pharmacy services
- Support to access transport when appropriate
- Support to access statutory and community support services
- Provide information about the asylum process and access to specialist support.
- Housing advocacy
- Support to register your family with a GP.
- Information and access to other primary health services and orientation for secondary health care appointments

Please ask your nurse or Doctor for referral to the British Red Cross

Play Sessions at Parkminster

Free children's play sessions

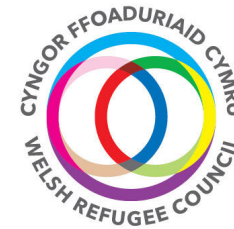


**Parkminster United Reform Church,
Minster Rd, Cardiff CF23 5AS.**

Tuesday 12.30pm-14.30pm

Wednesday 12.30-14.30pm

Thursday 10.30am-12.30pm



Welsh Refugee Council

The Welsh Refugee council can also help and support you to access services within the area.

How can Welsh Refugee Council help?

- Support to access safe and secure housing
- Helping you to challenge unfair asylum decisions.
- Support to access education and health for you and your child
- Support to access social and play opportunities for you child.

0808 196 7273

Oasis, Cardiff

During the week the centre is open to refugees and people seeking asylum, they run various sessions and groups, art classes, English language classes, sports sessions, daily advisory sessions, advocacy forums, relaxation sessions, and they provide free lunch every weekday!

Outside of our centre, they organise regular cultural and sports trips around Wales from museum and art gallery visits to sport team activities and mountain peak challenges.

**Oasis Cardiff, 69B Splott Rd,
Cardiff, CF24 2BW**



TGP Cymru

TGP Cymru's Refugee and Asylum Programme (RAP) offers a holistic approach to supporting and empowering young people. They can provide support to your child through group wellbeing/ counselling session, a youth group and mentoring scheme.

If you would like more information on this service speak to your GP or children's nurse. They can make a referral for you, or you can contact them yourself on:

0795747207





My child has a...

Fever

Call to Action

- Keep your child as comfortable as possible.
- Consider giving paracetamol or ibuprofen for comfort and to reduce temperature.
- Offer them simple food and regular drinks.
- If a baby is breastfed, continue breast feeding.
- If they are vomiting, offer small frequent drinks as this is more likely to stay down.
- Do not try to control your child's temperature with sponging or fans.
- Fever is common in babies up to 48 hours after receiving immunisations - consider giving regular paracetamol.
- If your child is due their vaccinations, postpone until after their fever has improved.

If your child's temperature is higher than 38°C it is classed as a temperature/fever.

The best way to measure temperature is with a digital thermometer.

A fever is the body's normal response to fighting an infection.

Temperatures can be caused by viral and bacterial infections.

Symptoms such as runny nose, cough, wheeze, sore throat, red eyes and diarrhoea are common with a viral infection.

If several people are unwell in the same household, it could be a viral infection (because viral infections can be easily spread).

Viral infections tend to get better on their own and do not need treatment with antibiotics.

What should I do?



You can treat your child at home if:

- Temperature is less than 38°C in a baby aged 0-3 months.
- Temperature is less than 39°C in a child aged 3-6 months.
- Child is happy and responding as they normally would.
- Child is active: walking, crawling, talking.
- Breathing as they normally would
- Normal colour of the skin, lips and tongue
- Eating and drinking
- Passing urine regularly



Make an appointment to see a Doctor at your GP surgery or call NHS 111 if:

- Temperature of 38°C and above in a baby 0-3 months
- Temperature above 39°C in a child 3-6 months
- High pitched cry
- Breathing is faster than it normally would be.
- Nasal Flaring.
- Child is pale in colour.
- Lips and tongue are dry.
- Dry nappies/ not passing urine as much as usual.
- For a baby under 12 months of age: soft spot on head is sunken.
- Temperature lasting longer than 5 days.
- Swollen/ hot/red joints.
- Your child is getting worse, and you are worried.



Go to A&E or call 999 if:

- Child is not waking up.
- Very fast breathing or when breathing has changed from normal.
- Abnormal noises when breathing (grunting)
- Colour blue/grey/ mottled skin, lips or tongue and feels cold to touch.
- No urine for more than 12 hours
- A rash that doesn't fade when you put pressure on it with a glass (see section on meningitis)
- Fits/ seizures/ irritable when you touch them



Call to Action

Most children with coughs/colds don't need antibiotics because antibiotics.

Antibiotics are not routinely used to treat infections because they:

- Don't treat viral infections
- Can cause side effects such as rash and diarrhoea.
- Overuse can cause antibiotic resistance.

Occasionally children may develop bacterial infections on top of viral infections. It is important to seek medical advice if your child develops any amber or red symptoms.

My child has a...

Cough/Cold

Coughs and colds are very common in young children and occur most often over the autumn and winter months, they are caused by many different viruses. Unfortunately, coughs and colds can continue for weeks before they get better. Over the winter, children are likely to get one viral infection after another, which can make you think that they are never well. Things will get better in the summer months!

The best way to treat coughs and colds is to rest and to drink plenty of fluids.

You can also try paracetamol And Ibuprofen to help with any pain.

Prevention

It is difficult to prevent these infections. Good hygiene practices can help prevent infections spreading.

- Wash your hands regularly and thoroughly.
- Use a tissue when coughing or sneezing and put it in the bin.
- Avoid sharing glasses or utensils with people who are unwell

What should I do?



You can treat your child at home if:

If none of the red or amber symptoms occur, you can care for your child at home.

- Make sure they are drinking enough fluids.



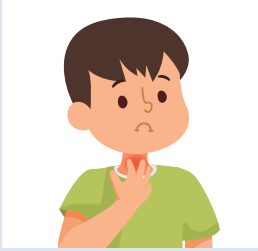
Make an appointment to see a Doctor at your GP surgery or call NHS 111 if:

- Has laboured/rapid breathing and is having to work hard to breathe – such as drawing in the muscles below their lower ribs, in between their ribs or at their neck.
- Seems dehydrated.
- Is becoming drowsy.
- Seems to be getting worse or you are worried.
- They have had a fever of over 38 for 5 days.



Go to A&E or call 999 if:

- Has blue lips
- Has pauses in their breathing, an irregular breathing pattern or is grunting as they breathe.
- Is making a harsh noise when they breathe in (stridor)
- Is too breathless to feed.
- Becomes pale, mottled, or feels very cold to touch.
- Is crying inconsolably even with distraction or appears confused or lethargic.
- Develops a rash that does not disappear with pressure.
- Is aged <3 months with a temperature of above 38, unless they have had vaccinations in the last 48 hours and have no other red or amber symptoms)



Call to Action

The best way to treat sore throats is to rest and to drink plenty of fluid.

Antibiotics aren't routinely used to treat sore throats. The infection usually clears within three days on its own.

Antibiotics may be prescribed if symptoms persist or are particularly severe. It is important to seek medical advice if your child develops any amber or red symptoms.

My child has a...

Sore Throat

Sore throats are very common in young children especially in the autumn and winter months. Most cases are caused by viral infections.

Your child may also have a runny nose, a cough, earache.

Sometimes the small glands that sit either side of the throat (the tonsils) can become infected – this is known as Tonsillitis.

Symptoms include:

- Sore throat and pain on swallowing
- Fever
- Swollen, painful glands in the neck
- Red tonsils.

The best way to treat sore throats is to rest and to drink plenty of fluids. Most sore throats get better without treatment.

If your child is already taking medicines or inhalers, you should carry on using these.

Prevention

It is difficult to prevent catching these infections. Good hygiene practices can prevent infections spreading.

- Wash your hands regularly and thoroughly.
- Use a tissue when coughing or sneezing and put it in the bin.
- Avoid sharing glasses or utensils with people who are unwell

What should I do?



You can treat your child at home if:

If none of the red or amber symptoms occur, you can care for your child at home.

- Sugar free paracetamol or ibuprofen can help with pain.
- You can buy a throat spray from your pharmacy which may also help with pain – Check with a pharmacist that it is suitable for your child.
- Many children refuse to eat. This is not a problem, as long as they stay hydrated. Offer small, easy to swallow, snacks and frequent fluids.



Make an appointment to see a Doctor at your GP surgery or call NHS 111 if:

- Is unable to swallow their own saliva
- Is having difficulty opening their mouth
- Seems dehydrated (sunken eyes, drowsy or passing less urine than usual)
- Is crying inconsolably even with distraction or appears confused or lethargic.
- Has extreme shivering or complains of muscle pain
- Seems to be getting worse or you are worried.
- They have had a fever of over 38 for 5 days.



Go to A&E or call 999 if:

- Is going blue around the lips
- Becomes pale, mottled and feels abnormally cold to touch
- Has a fit / seizure
- Becomes extremely agitated (crying inconsolably despite distraction),
- Becomes confused or very lethargic (difficult to wake)
- Develops a rash that does not disappear with pressure (see our page on meningitis)
- Is aged <3 months with a temperature of above 38, unless they have had vaccinations in the last 48 hours and have no other red or amber symptoms).



Call to Action

You cannot prevent all ear infections. Some things you can do to reduce your child's chances of getting an ear infection are:

- Ensure your child is up to date with their immunisations.
- Avoid exposing your child to smoky environments

My child has an...

Earache

Earaches are common in children and can be caused by several different things including:

- Something stuck in the ear
- Build up of wax
- Glue ear
- Middle ear infection (also known as otitis media)

Symptoms include redness, swelling and a build-up of fluid behind the eardrum. This cannot be treated with antibiotics.

In most cases, the symptoms of a middle ear infection develop quickly and resolve in a few days. The main symptoms include:

- earache
- a high temperature (fever)
- being sick
- a lack of energy
- slight hearing loss
- pulling a tugging on their ear
- irritability, poor feeding, or restlessness at night

Antibiotics are prescribed for ear discharge or for any child under 2 with an infection in both ears.

What should I do?



You can treat your child at home if:

- To make your child more comfortable, you may want to give them paracetamol and/or ibuprofen. This not only helps with fever but also reduces pain.
- Make sure that your child is drinking plenty of fluids
- Most cases of ear infections clear up in a few days and there is usually no need to see the GP if none of the below apply.



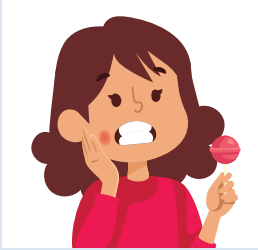
Make an appointment to see a Doctor at your GP surgery or call NHS 111 if:

- Has pus coming out of their ear
- Is in a lot of pain despite regular painkillers.
- Has a swelling behind the ear, causing the ear to push forwards, or increasing pain or redness behind their ear
- Is dizzy or is losing their balance.
- Continues to have a fever of 38.0°C or above for more than 5 days (See our guidance on fevers)
- Is under 3 months with a fever of >38°C
- Is getting worse or if you are worried.



Go to A&E or call 999 if:

- Is complaining of a severe headache and neck stiffness/pain or discomfort with bright lights (photophobia)
- Has an object stuck in their ear (for more information on this see our page on injuries)



Call to Action

- Your child should see a dentist when their first tooth appears.
- All children under 18 are entitled to free NHS dental care.

Teething

Your baby will probably get their first tooth sometime during their first year. Baby teeth sometimes emerge with no pain or discomfort at all; other times you may find that their gum is sore and red where the tooth is coming through. They may also:

- have flushed cheeks
- have a rash on their face
- rub at their ears
- dribble more than usual
- chew on things a lot
- be more restless than usual and not sleep very well.

My child has...

Toothache

Every time we eat sugar bacteria in our mouths make acid. This eats away at our teeth and can make them decay that can make teeth appear grey, brown, or black.

Decay can get inside the tooth through holes called cavities which can cause pain

How to look after your children's teeth to prevent decay:

- Start brushing as soon as your child's first tooth appears (usually around 6 months of age).
- Brush your child's teeth twice a day with fluoride toothpaste, brush in the morning and at bedtime.
- Brushing at bedtime is important. Fluoride can continue to protect your child's teeth as they sleep.
- Brush for two minutes; you can use a timer or listen to a two-minute song to make it more fun!
- Spit, don't rinse. Encourage your child to spit out the toothpaste after brushing but don't rinse with water as this will wash away the fluoride and reduce how well it works.
- Help your child brush until they are at least 7
- Avoid sugary drinks and snacks that can cause tooth decay

What should I do?



You can treat your child at home if:

- If your child is showing signs of teething, you could try teething rings to help with their discomfort.
- Soft fruit like melon can soothe gums if they are older than 6 months (see our page on healthy eating for more weaning tips).
- You could also try teething gels if non-medical options aren't working, there is less evidence that these help but talk to a pharmacist for more information.
- Sugar free paracetamol or ibuprofen can help the pain of both teething and pain from a toothache.
- If you are registered with a dentist, then call them first for toothache. If your child's dental pain eases with painkillers and there is no swelling to their face you should be able to wait until your dentist can see you.



Make an appointment to see a Dentist or call the emergency dental line.

- If your child damages their permanent or 'adult' teeth then contact your dentist or the emergency dental line via CAV24/7
- If your child has facial swelling due to a tooth, then contact your dentist or the emergency dental line via CAV24/7
- **Emergency Dental Line via CAV24/7: 0300 10 20 247**
You will need to wait for the options and choose 1 for urgent dental care



Go to A&E or call 999 if:

- Emergency dental care is NOT routinely given at A&E.
- However, go to A&E if there is very heavy bleeding which won't stop, or your child has had a serious accident-causing injury to their head, face and teeth, or if facial swelling is impacting airway.



My child has...

Vomiting and Diarrhoea

Call to Action

- Give your child small amounts of fluid to make sure they don't get dehydrated.
- Giving large amounts of fluid during a vomiting bug can cause further vomiting.

Sudden diarrhoea and vomiting is usually caused by an infection in the gut called gastroenteritis. Your child may have cramp like abdominal pain, feel tired and may have a temperature. Vomiting commonly lasts 1-2 days and usually stops within 3 days. Diarrhoea commonly lasts 5-7 days.

Gastroenteritis is very contagious and can be picked up from surfaces in schools, at home and travelling.

Good hygiene can help prevent infections spreading.

Wash your hands regularly and thoroughly.

Keep your child off school/nursery for 48 hours after the last episode of vomiting or diarrhoea.



What should I do?



You can treat your child at home if:

If your child has none of the symptoms in the following boxes and doesn't appear dehydrated, you can treat them at home.

- Make sure they have plenty of rest and drink lots of fluids.
- Avoid fizzy drinks and fruit juice as these can worsen diarrhoea.
- If your baby is breastfed, continue to breastfeed – try little and often if they are still vomiting. With older children give frequent smaller sips of water or clear fluids.
- Drinks should have sugar in, ask a pharmacist about rehydration solutions.
- If you are unsure how much your child is drinking keep track by writing it down.



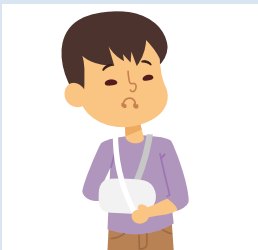
Make an appointment to see a Doctor at your GP surgery or call NHS 111 if:

- If your child is becoming dehydrated (Dry mouth, less urine output).
- Has bilious (green) vomit
- Has blood in their poo
- Has constant stomach-ache
- Has been vomiting without diarrhoea for 24 hours.
- Your child is high risk – has a condition such as diabetes, or low immunity, or has had a stomach or head injury.



Go to A&E or call 999 if:

- Is floppy, irritable, or less responsive than usual.
- is breathing faster than usual.
- has unusually pale or mottled skin
- has colder hands and feet than normal.
- vomits blood or has vomit that looks like ground coffee.
- might have swallowed something poisonous.
- has a stiff neck and pain when looking at bright lights.
- has a sudden, severe headache or stomach-ache.
- Baby under 1 month old with no interest in feeding



Call to Action



First Aid Courses

Advice & Volunteering
St John Ambulance
(sja.org.uk)



British Red Cross first aid resources

<https://www.redcross.org.uk/first-aid>



Burns safety made simple

(capt.org.uk)



Button Battery Safety

Child Accident
Prevention Trust
(capt.org.uk)

My child has an...

Injury

What should I do?



You can treat your child at home if:

Burns

- Quickly place the burn under cool running water to reduce the heat, for 20 minutes.
- Use clingfilm or a clean plastic bag to cover the burn to reduce the risk of infection, and then take your child to the hospital or GP depending on the severity of the burn.

Cut or Wound

- To stop a wound from bleeding, press firmly on the injury with a clean cloth, or use your fingers if you don't have this. You may need to continue to press on the wound for 10 minutes to stop the bleeding. Once the bleeding stops apply a clean plaster or dressing.
- If your child is in pain, please see alternate section on pain.



Make an appointment to see a Doctor at your GP surgery or call NHS 111 if:

- Depending on how bad the wound/burn is, if you are worried, you can make an appointment to see your GP or practice nurse for review.
- Make an appointment with your doctor if your child has a wound that is not healing, looks red, is oozing or looks infected.
- If your child has had an accident or injury and you are not sure what to do, please contact your GP or phone 111 for further advice/assistance.
- If your child appears well, but they have swallowed something that they shouldn't have, you can call 111 for advice on what to do next.
- If your child has a bruise and you do not know the cause, make an appointment with your GP.



Go to A&E or call 999 if:

You should phone an ambulance on 999 or take your child to A&E if your child has any of the following:

- Stops breathing or is struggling for breath or is choking.
- Is unconscious and will not wake up.
- Has a cut that does not stop bleeding.
- Has a seizure following the accident.
- Has injured an arm or a leg and they cannot move it.
- Has an injury to their neck or spine (Call 999 and do not move the child).
- Has something lodged in their nose or ear (Do not attempt to remove it).
- Has swallowed something that they shouldn't have, for example, cleaning products or medication.
- Your child has a fall, from a height, for example from top to bottom of stairs.

Head Injury

- Take your child to hospital following a head injury if they have any of the following:
- They are unconscious, even if they have now woken up.
- They have been sick since the injury.
- If they have a headache after the injury that does not go away after pain relief medication like Paracetamol or Ibuprofen
- Their behaviour changes or if they are very irritable.
- Crying more than usual
- Memory loss



Call to Action

- If your child is in pain and you are worried about them, seek medical advice.
- Finding the cause of pain in a child can be difficult. If you are unsure always speak to a health professional, such as a pharmacist, nurse or your family GP.

My child has...

Pain

Pain can be caused by many things like illness, an injury, surgery, or a long-term condition.

Children often have headaches, tummy pains/ stomach aches, or leg pains that come and go. The pains may be a sign of serious illness or can be painful but harmless.

Things you can do to help your child through pain.

Emotional and Behavioural Support

- Remain calm whilst supporting your child and try to control your anxiety in front of them.
- Physically comfort your child with a hug or holding their hand.
- Sympathise by using positive language and words of encouragement.
- Work with your child to find ways of measuring their pain so that they can tell you when it is worse.

Symptoms of pain in a baby

- Crying/irritability/difficult to settle
- Tense body, clenched fists
- Pale skin
- Sweating/flushed
- Not feeding or reduced intake

What should I do?



You can treat your child at home if:

- You know the cause for the pain, and it is manageable at home with pain relief medicines and comforting.
- See your pharmacist for advice on appropriate pain relief medications for your child. Your child will have a different amount of medicine based on their age, so it is important you check the right dose.
- If the pain is mild and is not constant



Make an appointment to see a Doctor at your GP surgery or call NHS 111 if:

- If you have a baby that is unable to tell you that they are in pain but are showing symptoms.
- You do not know the cause of the child's pain.
- Pain does not get better after pain relief medications.
- Your child's pain is worsening.
- Your child has other symptoms like neck stiffness and a dislike of bright lights.
- You know the cause for the pain, and it needs treatment.



Go to A&E or call 999 if:

- If the pain is severe and you cannot move them.
- If your child stops breathing.
- You cannot wake your child.
- If they have a seizure.



Call to Action

- Speak to your Doctor or Pharmacist about medications such as Antihistamines and steroids that can help to treat mild allergic reactions.,
- If your child has a severe allergy their specialist doctor will give you an allergy management plan, that will explain how to treat your child.
- Your child may be referred to a dietician if the allergy is food related.

My child has an...

Allergy

An allergy is when the body reacts to something, for example pollen or different foods.

Symptoms can be mild and treated easily at home. Sometimes they can be very serious.

Common allergies are:

- Tree and grass pollen
- House mites/dust
- Foods like peanuts, milk, and eggs
- Animals
- Bee/Wasp stings
- Medications

Symptoms of an allergic reaction can include:

- A runny nose/sneezing
- Pain around your child's eyes/forehead
- Coughing/wheezing/breathlessness
- Itchy skin or rashes
- Diarrhoea
- Nausea/vomiting
- Swollen eyes/lips/mouth/throat

What should I do?



You can treat your child at home if:

- Try to limit contact with the thing that is causing your child's allergy.
- If your child has mild symptoms of allergy to food, it would be useful to write a food diary for your doctor, including information about the food your child ate, what symptoms they had and when they had it.
- Your pharmacist may be able to assist with treatment for mild allergies.
- Give your child medication that the doctor may have prescribed for your child's allergy. Does it help?
- If your child is in school, let their teacher know they have an allergy. Give them a copy of your treatment plan (if you have one).



Make an appointment to see a Doctor at your GP surgery or call NHS 111 if:

- Speak with your GP or health visitor if:
- You have given medication but there is no improvement in your child's symptoms.
- Your child is not seriously unwell, but you are unsure of what to do and would like advice.
- Your child's symptoms have changed or are getting worse.
- Your child has symptoms of an allergy, but they also have other symptoms like a high temperature.



Go to A&E or call 999 if:

- Your child's lips/mouth or throat become swollen suddenly.
- Your child's throat feels tight, or they are struggling to swallow.
- Your child's skin or lips turn blue or grey.
- Your child becomes confused or dizzy.
- Your child faints or cannot be woken up.
- Your child is limp or floppy and not responding to you.
- Your child has been in contact with something that they have had a serious reaction to before.



Call to Action

Having the MMR (Measels, Mumps and Rubella) vaccine is the best way to prevent measles.

If you are not sure whether your child has had this, then contact your GP.

For more information visit:



<https://cavuhb.nhs.wales/patient-advice/local-public-health-team/key-areas-of-focus/immunisations/childhood-immunisations>

My child has...

Measels

Measles is a viral infection that spreads very easily and can cause serious problems in some people.

- Symptoms include:
- High temperature
- Runny nose
- Red watery eyes
- Cough
- Small white spots inside the cheeks/back of lips
- Rash on face / behind ears spreading to rest of body

Measles is spread when an infected person coughs or sneezes.

To reduce the spread:

- wash your hands with soap and warm water.
- Use tissues when you cough or sneeze and throw them in the bin.
- Don't share cups and cutlery or clothes and bedding with someone with measles.

Measles can lead to serious complications such as meningitis, pneumonia, seizures, or blindness. These problems are rare but some people, such as babies and people with low immunity, are more at risk.



What should I do?



You can treat your child at home if:

You should always see a GP if you think your child has measles.

- After seeing a GP, you should get your child to -
- rest and drink plenty fluids, such as water, to avoid dehydration.
- take regular paracetamol or ibuprofen to relieve a high temperature.
- use cotton wool soaked in warm water to gently remove any crusts from your or your child's eyes.
- Keep your child off nursery or school for at least 4 days from when the rash first appears. Also try to avoid close contact with babies, people who are pregnant and people with weakened immune systems.



Make an appointment to see a Doctor at your GP surgery or call NHS 111 if:

As measles can spread to others easily you should call your GP surgery before you go in. They may suggest talking over the phone. Contact your GP if -

- you think you or your child may have measles.
- you've been in close contact with someone who has measles and you/ your child has not had measles before or you've not had 2 doses of the MMR vaccine.
- you've been in close contact with someone who has measles and you're pregnant – measles can be serious in pregnancy.
- you have a weakened immune system and think you have measles or have been in close contact with someone with measles



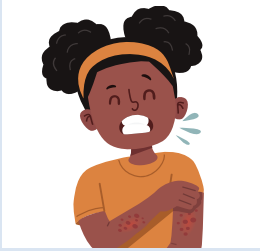
Go to A&E or call 999 if:

Your child has any of the following:

- shortness of breath
- a very high temperature that does not come down after taking paracetamol or ibuprofen.
- confusion
- seizures

Make sure you inform the health team that your child has or may have measles.

See our page on managing fevers for more information.



Call to Action

Eczema can be really itchy but it's important not to scratch as this can cause more damage and even risk infections.

Ways you can help:

- Keep your child's nails short and clean.
- Keep their skin covered with light clothing
- Mittens may help in small children and babies

Common Illness

Eczema

Eczema is a common skin condition that can make skin irritated, red, dry, bumpy, and itchy. This can be caused by allergies, asthma and hayfever. Eczema can also run in the family

Skin can become red on lighter skin, and darker brown, purple or grey on darker skin. This can also be more difficult to see on darker skin.

Eczema can affect any part of the body but it usually affects the hands, insides of the elbows, backs of the knees and the face and scalp in children.

Some people only have small patches of dry skin, but others may experience inflamed skin all over the body.

Things can make their eczema worse are known as eczema 'triggers' and include soaps, shower gels, scented sprays, clothing detergents, extreme temperatures, dust, pets and stress. Avoiding these can help prevent flare ups.

Symptoms can include:

- Dry skin
- Red skin that can be cracked or bleeding.
- Pain and itchiness.
- If there is an infection the wounds may be oozing or weeping.
- In an infection your child may have a fever.



What can I do to treat my child at home?

- Know what triggers their eczema and avoid them.
- Follow the treatment plan given to you by your GP/Eczema specialist team
- Moisturise – Apply your emollients regularly as explained by your doctor or pharmacist.
- Keep spare emollients - You could need to apply them from two to four times a day so it may be useful to keep spares for when your child is away from home.
- Antihistamines are not useful
- Some foods, such as eggs and cows' milk, can trigger eczema symptoms, but you should not make significant changes to your diet without first speaking to a GP
- Don't scratch - See our tips opposite on how to manage itching



When should I ask for medical help?

- New eczema if never experienced before. A GP can diagnose and help support treatment.
- If your child's eczema has suddenly become worse.
- If the flare up is not improving despite treatment return to the GP
- If there are any signs of infection such as – fever, or the skin is weeping and crusting



Call to Action

Don't give ibuprofen to a child with chickenpox as it can cause a serious skin reaction.

As chickenpox is so infectious it is important that your child stays off school or nursery and away from others until the last blister crusts (usually 5-6 days from when rash starts).

Symptoms can include:

- The rash is the most common symptom of chickenpox and usually appears over 3-5 days.
- Itching – it's important to try not to scratch!
- a high temperature (see our page on managing fevers)
- aches and pains, and generally feeling unwell
- loss of appetite

Chickenpox is very itchy and can make children feel miserable, even if they do not have many spots.

Adults usually have a high temperature for longer and more spots than children.

It's possible to get chickenpox more than once, but it's unusual.

Common Illness

Chicken Pox

Chickenpox is common and mostly affects children, but you can get it at any age. It usually gets better by itself after 1 to 2 weeks. An itchy, spotty rash is the main symptom of chickenpox, it can be anywhere on the body.

Chickenpox happens in 3 stages. But new spots can appear while others are becoming blisters or forming a scab.

Stage 1: small spots appear.

These can sometimes be harder to see on darker skin

Stage 2: The spots fill with fluid and become blisters. The blisters are very itchy and may burst.

Stage 3: The spots form a scab. Some scabs are flaky while others leak fluid.

Chickenpox is very infectious and can be spread to other people from two days before the rash appears up until all of the spots have formed scabs. The spots start appearing 1-3 weeks from when you catch chickenpox.



What can I do to treat my child at home?

For most children, chickenpox is a mild illness that gets better on its own. To make your child more comfortable they should:

- Drink lots of water
- Wear loose-fitted cotton fabrics
- Not scratch to avoid scarring and infection

It can also help to:

- Keep nails short and skin clean and dry.
- Lotions such as calamine can to ease itching (ask your pharmacist for more advice)
- Give regular pain relief to children who are feeling achy or sore.
- Don't give ibuprofen to a child with chickenpox as it can cause a serious skin reaction.

Don't give ibuprofen to a child with chickenpox as it can cause a serious skin reaction.



When should I ask for medical help?

- If you or your child develop any abnormal symptoms, such as:
- the skin around the blisters becomes hot, red and painful, or have any green or yellow liquid coming from them. (redness may be harder to see on brown or black skin)
- not drinking much or weeing less.
- Becoming drowsy or confused
- any of your or your child's symptoms suddenly get worse
- Their fever is not improving (see our page on managing fever)
- Tell the receptionist you think it might be chickenpox before going in to a GP practice/hospital waiting room.
- **Pregnant women**
- **Newborn babies**
- **People with a weakened immune system**

Need to seek medical advice as soon as they are exposed to the chickenpox virus or they develop chickenpox symptoms.



Common Illness

Hand, Foot, and Mouth

Call to Action

Hand, Foot, and Mouth can be easily passed to other people through coughing, sneezing, oozing blisters, and poo. Your child could pass on the illness up to 5 days before their first symptoms start.

To Stop the spread of Hand, Foot, and Mouth:

- Make sure your child washes their hands regularly especially after going to the toilet.
- Make sure your child uses tissues to catch germs from coughs and sneezing.
- Put tissues straight in the bin.
- Do not share towels with your child.
- Do not share cutlery and cups with your child.
- Wash bedding and clothing regularly.
- Keep your child off school or nursery whilst they are feeling unwell.

Hand, Foot, and Mouth is a common childhood viral illness, that can also affect adults too. It causes painful red blisters to the mouth, throat, hands, feet, and nappy area. You can get it more than once.

Symptoms

To start with, your child may only have symptoms such as a sore throat, high temperature and refusing food/drinks.

After a few days, raised spots on the hands, feet and nappy area will develop, these can sometimes turn into blisters which can be painful.

The spots will look pink/red or darker than the surrounding skin, depending on your skin tone.

Symptoms can be worse in babies and children under 5 years.



What can I do to treat my child at home?

- Hand, foot, and mouth is a viral illness that cannot be cured with antibiotics. It will usually get better by itself in 7-10 days.
- Make sure your child drinks plenty of fluids to keep them hydrated. You should avoid juices or anything acidic/ spicy, that can irritate the blisters in the mouth.
- Give Paracetamol and Ibuprofen for pain relief and to help reduce temperatures.

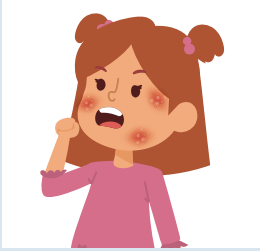


When should I ask for medical help?

A Pharmacist can advise you about some treatments, for example pain relief, and oral sprays/ mouthwash and gels for mouth ulcers/blisters.

Contact your GP for an appointment or phone 111 out of hours, if your child has:

- A very high temperature that does not get better with Paracetamol or Ibuprofen (See separate section on fever for more information)
- If your child has been unwell with Hand, Foot and Mouth and symptoms do not improve after 7-10 days.
- If your child is showing signs of dehydration (not passing urine as frequently, feeling dizzy or lightheaded, dry mouth, lips, and tongue)
- If you are worried about your child at all, you can speak to your GP for advice.



Call to Action

Impetigo is very contagious! In order to stop it spreading you should:

- Keep the blisters as clean and dry as possible and cover with loose clothing if you are able to.
- Make sure your child is washing their hands regularly.
- Wash any sheets or towels that are used by your child on a high temperature.
- Clean any toys that your child has been playing with.
- Keep your child home from school or nursery.
- Try not to let your child touch or scratch the blisters as this could also lead to scarring.

Common Illness

Impetigo

Impetigo is the most common skin infection in children in the UK. It is an infection of the skin, that is not usually serious. It can affect anybody but is common in children.

The infection can start anywhere but it is often exposed areas like the face or hands and will usually get better within 7-10 days with treatment.

It is very easily spread to others.

Symptoms

Impetigo will start off with red blisters on the skin, these will then burst and leave crusty patches, which sometimes look yellow.

The blisters can be itchy and sometimes painful, they can get bigger and spread to other parts of your child's body.

Other symptoms such as a temperature and swollen glands in the neck can be present in some severe cases.



What can I do to treat my child at home?

- Give your child the treatment that is issued by your GP, and finish the course as directed, even if the infection looks like it has cleared up.
- If your child has a temperature or any pain, you can give Paracetamol as required.
- Do not send your child to school or nursery until the blisters dry out and crust over, following treatment from your GP.
- Impetigo often affects skin that already has damage, (for example to any cuts/ grazes/areas with eczema/ existing skin conditions), you can stop it spreading by keeping these areas clean and covered if possible.



When should I ask for medical help?

- If you think your child has impetigo, you should make an appointment with your GP for treatment, this may be oral antibiotics or creams.
- If your child has already had treatment for Impetigo but they are not getting better or their symptoms get worse, seek advice from your GP again.
- If your child has had Impetigo several times, see your GP for review. If it keeps coming back several times, your GP may take a swab of the skin to look at what bacteria is causing the infection.



Call to Action

- Follow treatment instructions. Scabies will come back if the treatment is not followed properly.
- As well as applying the cream, wash bedding, clothing and towels.
- The itching can continue for some time after treatment, this is normal.

REMEMBER: Scabies is very infectious! Everyone in your home needs to be treated

Common Illness

Scabies

Scabies are mites which can burrow into the upper layer of the skin and lay eggs, causing infestation.

Anyone can get scabies; it is a common infection, but not usually serious.

Scabies is spread by direct contact with a person who has scabies. It is usually spread via household contacts but can be spread by sharing towels or bedding.

After contact, it can take up to 8 weeks for the rash to appear, and it will not go away by itself.

Symptoms can include:

- Main symptom is Itching: severe, worst at night
- Fine, dark, silver lines between fingers, inner wrist, and hands
- Rash: raised lumpy red, anywhere on body, but usually starts on the hands



What can I do to treat my child at home?

- **Your child MUST see pharmacist for Permethrin Cream, Scabies does not go away on its own or from soap and hot water.**
- The cream should be applied twice, on day one and day seven.
- BOTH child AND all family members should be treated on same day AND seven days after, even if they do not have symptoms.
- Permethrin cream is not suitable for babies under 2 months
- Apply on cool dry skin to whole body or neck down – read instructions or ask pharmacist
- Put socks and mittens on babies to avoid them removing cream
- Child should stay off until first day's treatment application is complete.
- Wash all clothes, bedding and towels at 50 degrees or higher after first day's treatment application
- Put clothes that cannot be washed in sealed bag for minimum of 3 days.
- There are medications that can help with the itching please see your pharmacist for advice.



When should I ask for medical help?

Your pharmacist can see your child initially and treat scabies, you do not need to see your GP unless-

- The itch persists longer than 3 weeks after treatment
- Your child already has eczema or psoriasis (skin conditions can worsen with scabies)
- If your child is itching a lot and the rash is getting worse



Call to Action

Molluscum usually goes away on its own.

Occasionally treatment may be recommended if the spots are causing problems such as becoming dry, itchy, sore, or infected.

Your child may be referred to a specialist if your child has lots of spots and they are impacting on day to day life, if the spots are near your child's eyes, or if your child has a weakened immune system.

The risk of passing this on to other people during normal activity, such as going to school, is small, so your child should be able to carry on with normal activities.

If you are unsure about this, please discuss with your GP.

Common Illness

Molluscum contagiosum

Molluscum contagiosum is a harmless viral infection that causes small spots to appear on the skin. It is more common in children, but anyone can get it.

Symptoms can include:

- The main symptom of molluscum is small, firm spots that have a dimple in the middle.
- They can be itchy.
- The spots are about 2 to 5mm wide and usually appear together. They are raised, with a shiny white dimple in the middle.
- Children with the infection often get spots on their body and in or around folds of skin (groin, behind the knee and armpits).



What can I do to treat my child at home?

The spots caused by Molluscum are usually harmless, but they can take up to 18 months to clear up completely. It does not usually need any treatment.

To ease the symptoms of the rash at home you can;

- Try things to help with dryness and itchy skin, such as holding a damp towel against the skin, having cool baths or using a moisturiser regularly
- Keep the affected area covered, by using waterproof bandages if you go swimming
- Do not squeeze or scratch the spots, as it could cause an infection or scarring
- Do not share baths or things such as towels, bedding or clothes

Molluscum is contagious and is usually passed through direct skin to skin contact.



When should I ask for medical help?

- If your child has any other symptoms and you are not sure that your spots are caused by molluscum contagiosum
- If the spots are very itchy, painful, swollen or oozing.
- If your child has spots near their eyes



Call to Action

An effective way of checking any rash is by doing 'The Glass Test'.

The MenB vaccination is part of routine childhood vaccination in the UK. For more information visit:



Symptoms:

In a baby or child who has meningococcal disease:

- Child may have a fever or may also feel very cold on hands and feet.
- Be irritable/ crying or unsettled.
- Have poor appetite, refusing food/ milk feeds.
- Vomit
- Sleepy or floppy or hard to wake up.
- Dislike bright lights
- Neck stiffness.
- Have a raised/ firm fontanelle (soft spot on the top of a baby's head)
- Have red or purple spots, may look like bruising, on the skin.

Only 1 in 3 children with meningococcal disease have a rash

In an older child or adult who has meningococcal disease:

- Fever.
- Headache.
- Neck stiffness.
- Joint pain and aching muscles.
- Vomiting
- Sleepy, confused, or unconscious.
- Dislike bright lights
- Red or purple spots, may look like bruises on the skin.

Common Illness

Meningitis/ Sepsis

Meningitis is the inflammation of the tissues surrounding the brain and spinal cord, caused by an infection (Most commonly Viral, but can be bacterial infections).

Meningitis can affect anyone but can be more common in children, teenagers, and young adults.

If meningitis is not treated quickly, it can be very serious and life threatening.

Bacterial and viral meningitis can be contagious, they can be spread through coughing, sneezing and general close contact.

Please ask your GP for more information regarding vaccination for Meningitis and all childhood vaccination.



What can I do to treat my child at home?

You should always seek medical advice if you suspect your child has meningitis.

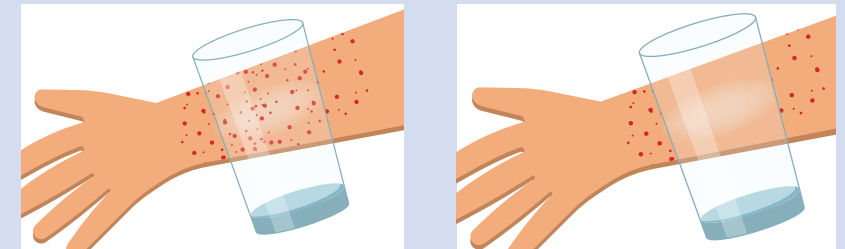
Your doctor will advise you on how to treat your child at home, if this is appropriate.



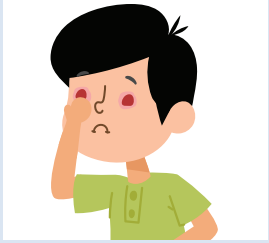
When should I ask for medical help?

- **If your child has signs of meningitis/sepsis, you should seek medical advice immediately, via Accident and Emergency or call 999 for an ambulance.**

How to do the Glass test



- Hold a glass cup firmly over the rash.
- Look to see if the spots fade as you press the glass onto the skin.
- If the spots DO NOT fade, this is known as 'a non blanching rash' and can be typical in meningitis.
- If you see this rash you should seek medical advice immediately
- Always check the palms of hands, soles of feet and tummy for the rash also as it can sometimes be easier to see here.



Call to Action

Conjunctivitis can spread to other people; you can do the following things to help stop this:

- Encourage your child to wash their hands regularly with warm soapy water.
- Wash their pillowcases and face cloths in hot water.
- Cover their mouth and nose when sneezing and put used tissues in the bin.
- Do not share towels and pillows.
- Try to encourage them not rub their eyes.

Common Illness

Conjunctivitis

Conjunctivitis happens when a part of the eye called the conjunctiva becomes inflamed. This is a thin layer that covers the front of your eyes.

The 3 most common causes of this inflammation are:

- Infection (usually viral)
- an allergic reaction
- something in the eye, irritating the conjunctiva.

Symptoms

The symptoms of Conjunctivitis include:

- Red eyes
- Burning or gritty feeling in the eye
- Oozing/pus/clear fluid that makes the eye sticky.
- Itchy eyes
- Swelling/inflammation around the eye



What can I do to treat my child at home?

Conjunctivitis usually gets better by itself without medication.

There are important things that you can do at home to improve your child's symptoms:

- Boil water and let it cool down, use this to clean the eyes with a clean cotton wool pad. Use one clean cotton pad for each wipe of the eye. Do this regularly throughout the day.
- Place a cool, clean towel over your child's eyes to help cool them down.
- Your child should not wear contact lenses when they have any irritation of the eye.



When should I ask for medical help?

Your pharmacist can help and give you advice and medication for your child if they have conjunctivitis. If your child is under 2 years of age, you will need to make an appointment with your GP for review.

Your child may need eye drops or antihistamines to help with the symptoms, depending on the cause of the conjunctivitis.

You should seek medical advice straight away if your child has any of the following:

- pain in their eyes
- sensitivity to light
- changes in their vision, like wavy lines or flashing
- very red eyes (to 1 eye or both eyes)
- a baby less than 28 days old with red eyes
- Swelling around the eye

These can be signs of a more serious eye problem.

- Or, if your child has Conjunctivitis and the symptoms have not improved after 2 weeks, contact your GP for an appointment.



Common Issue

Headlice

Call to Action

- Do not use medicated lotions and sprays to prevent head lice, only to treat.
- You can help stop headlice spreading by wet or dry combing regularly to catch them early.



Head lice and nits are very common in young children and their families. They are transferred from person to person by head-to-head contact.

Head lice are small insects, up to 3mm long, that can be difficult to spot in your child's hair. Their eggs (nits) are brown or white (when empty) and are attached to the hair.

If someone has head lice, it has nothing to do with how clean they are. Head lice don't have a preference, they can be found in clean or dirty hair. They only affect people and can't be caught from animals.



What can I do to treat my child at home?

You can treat head lice without seeing a GP.

- Lice and nits can be removed by wet combing. You can buy a special fine-toothed comb (detection comb) online or from pharmacies or supermarkets to remove head lice and nits.
- Shampoo your child's hair and apply plenty of conditioner to make hair wet and slippery. Comb the hair from scalp outwards, section by section, with the fine comb for at least 15 minutes (Longer for long or very curly hair)
- You should check everyone in the house and start treating anyone who has head lice on the same day.



When should I ask for medical help?

- If wet combing has not worked or is not suitable, you could try a medicated lotion or spray – these can be bought in pharmacies or supermarkets. Check the pack to see if they're OK for you or your child and how to use them.
- Head lice should die within a day – you can then comb them and the eggs out as above. Some treatments need to be repeated after a week to kill any newly hatched lice.
- If the lotion or spray has not worked speak to a pharmacist about other treatments.



My child has...

Constipation

Call to Action

It can take 3-6 months of stool softening medication for the bowel to get into a good routine again. So be prepared for children to be on the medication for a little while.

Constipation can be common for children when travelling from another country. This can happen due to a change in diet and a change in eating habits. Any change in a child's routine can cause some anxiety which can affect the child in different ways, an anxious child can find it hard to sit on a toilet and relax.

Symptoms can include:

- A child pooing less than 4 times a week.
- A hard stool that is difficult to pass.
- Pain when they are pooing.
- Big poos or lots of poo all at once.



What can I do to treat my child at home?

- Try to increase fluid intake to 6-8 water-based drinks a day.
- Try to encourage more fruit and vegetables in their diet.
- Give them plenty of opportunity to exercise and move around.



When should I ask for medical help?

- If the advice to the left does not work, then you will need to take your child to see a GP. They will probably prescribe some medicine to soften the stools to be easier to pass.

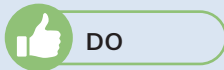


Common Illness

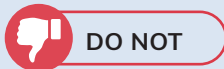
Thread Worms

Call to Action

Children can get worms again after they have been treated so it is important that you...



- Wash hands and scrub under the fingernails, especially before eating and after using the toilet or changing nappies.
- Encourage children to wash their hands regularly
- Bath/shower every day
- Rinse toothbrushes before using them
- Keep fingernails short
- Wash sleepwear, sheets and towels regularly.



- Do not shake clothing or bedding to prevent eggs landing on other surfaces
- Do not share towels or flannels
- Do not bite nails or suck thumbs/fingers

Parasitic Worm infection is common in children.

It is very easy to treat but can be difficult to detect on a single stool sample.

This is why we offer treatment to all children without testing.

Parasitic worms lay eggs in the anal area.

These eggs get transferred onto hands when the anal area is scratched or wiped after going to the toilet and the hands are not washed.

The eggs are easily passed on to other people in close contact who then become infected.

It is possible to have parasite worm infection but not be aware of any symptoms.

Symptoms

- Abdominal pain
- Diarrhoea
- Bloating
- Feeling tired
- Itching around the anus, may be worse at night.



What can I do to treat my child at home?

If your child has symptoms of threadworms, sometimes you will be able to see them in their poo, or around their anus. They can look like tiny pieces of white thread.

It is important that you take the steps in the "Call to action" Section opposite to stop the spreading of threadworms.

- If you are registered at Cardiff and Vale Health Inclusion Service, you will be offered a one-off tablet for treatment of worms and be asked for a stool sample, to send for testing.



When should I ask for medical help?

- If you suspect that your child has threadworms, you can visit your local pharmacy to obtain treatment with a chewable tablet or medicine.
- If your child is unwell and you are worried about them, you can make an appointment with your GP.
- The medication will treat the threadworms, but not the eggs so it is very important to follow these steps (below) also.



Call to Action

Always use the spacer device with your inhaler so the medicine can reach their lungs.

The inhaler should be shaken in between each puff given.

Each puff of inhaler should be inhaled for 20-30 seconds before the next puff is administered to ensure the entire dose is given.



If your child has more than one inhaler and they are different colours one will be a preventer and will work to prevent the worsening of asthma, the other will be the reliever and will be used to relieve symptoms. It is important that your child takes their inhalers as directed.

Symptoms of an exacerbation can include:

- 10 puffs of the reliever inhaler not lasting 4 hours
- Signs of difficulty in breathing including; faster breathing, coughing, unable to speak in full sentences, sucking in under and in-between the ribs and sucking in at the throat area
- Agitation/restlessness

My child has...

Pre school wheeze and

Asthma is a disease that affects the lungs and makes it hard to breathe. The muscles around the walls of the airways tighten so that the airways become narrower, sometimes sticky mucous builds up which can narrow the airways even more.

Pre-school wheeze is a condition in children under 5 years old. Many of these children will grow out of this problem but are treated similarly to Asthma.

The causes of asthma are complicated but some things can make it worse. These are called triggers and include; colds/flu, cold air, cigarette smoke, pets, pollen, dust, exercise.

Your GP or another Doctor will have diagnosed asthma or pre-school wheeze and given your child an inhaler to use at home.

Asthma



What can I do to treat my child at home?

If your child has been diagnosed with asthma or pre-school wheeze follow the action plan you were given by their doctor when they are unwell and needing the reliever more than normal and/or are coughing/wheezing more and/or waking at night.

- Know where/when to seek help if your child becomes unwell.
- Follow your child's individual plan and use inhalers as directed.
- Always use a spacer
- Rinse out the mouth after using inhaled or medicinal steroids.
- Always give the regular treatments, unless told to stop by a healthcare professional.
- Attend the GP or asthma review clinic regularly.
- Check on your child overnight if unwell as can get worse at night



When should I ask for medical help?

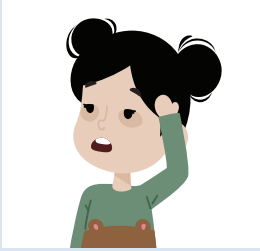
- If your child is getting worse with more wheeze, coughing and quicker breathing give 10 puffs of your inhaler every 4 hours and call CAVHIS or 111 for an emergency appointment with the doctor.

If your child is:

- Distressed by wheeze and is short of breath
- Won't/can't play as too short of breath
- Unable to talk in full sentences
- Reliever (blue) inhaler doesn't last long

Give 10 puffs of the reliever (blue) inhaler (via spacer), if no improvement repeat after 10 minutes and call 999 or take your child to the nearest A&E.

If you are unsure about how to give the inhaler please ask your GP or pharmacist to help.



Call to Action

If your child has symptoms of anaemia, please contact your GP for an appointment to discuss this.

Common illness

Iron Deficiency Anaemia

Anaemia is a common condition where the number of red blood cells or the amount of haemoglobin in red blood cells is low. Red blood cells contain haemoglobin, which is the substance that makes blood red. Its main purpose is to carry oxygen around the body.

Iron deficiency anaemia is caused by a lack of the mineral iron in the body. Iron is needed for the body to make haemoglobin, so a reduced iron level causes a reduced haemoglobin level in the blood.

There are many other types of anaemia that affect children, other than iron deficiency anaemia, but iron deficiency is the most common cause in children.

Symptoms

Some children with mild anaemia do not show any symptoms. Common signs and symptoms can include;

- Pale skin,
- Lack of energy
- Breathlessness.



What can I do to treat my child at home?

There are ways to increase your child's dietary iron intake.

Foods high in iron include:

- Meat
- Beans and lentils
- Eggs
- Fish
- Apricots, prunes, and raisins
- Leafy green vegetables
- Oatmeal
- Tuna
- Formula milk
- Some cereals

Your child may be referred to a dietician for further support and advice if that is required.



When should I ask for medical help?

Iron deficiency anaemia is usually diagnosed by a blood test. We will take a small sample of blood; the test will count the number of each type of blood cell in a sample (known as a full blood count) and then check how much haemoglobin is contained in the red blood cells.

They may also carry out other tests to see how much iron is contained in the haemoglobin. Test results provide information to the doctor about whether anaemia is present and if so, how severe it is.

If a child has anaemia, further tests may be needed to work out what is causing the anaemia if it is not iron deficiency anaemia.



Call to Action

For further information see [The Lullaby Trust website](#)



How to reduce the risk of SIDS for your baby - [The Lullaby Trust](#)



Safe Sleeping

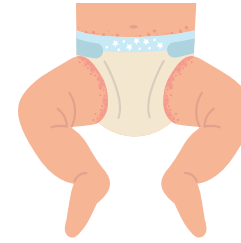
The sudden and unexpected death of a baby is referred to as sudden infant death syndrome (SIDS). We do not know what causes SIDS. For many babies it is likely that a combination of factors affect them, which leads them to die suddenly and unexpectedly. While SIDS cannot be completely prevented, you can reduce the risks of it occurring by following safer sleep advice:

- Always place your baby on their back to sleep, towards the bottom of the bed
- Place your baby in a separate cot or Moses' basket in the same room as you for the first 6 months.
- Use a firm flat waterproof mattress in good condition.
- No smoking inside your accommodation when you have a baby or child.
- Remove any soft toys from the cot before each sleep period.
- Do not use pillows or quilts for your baby to sleep with.
- Your baby should not be swaddled or wrapped up tightly to sleep.
- Room temperature should be 16-20 degrees Celsius.

You can usually get help to get a cot or Moses' basket, to ensure your child sleeps safely. Just ask your Health Visitor, British Red Cross, or Oasis Cardiff for this.

We understand that sometimes there are emergency situations where you do not have the equipment for safe sleep. Please urgently speak to your health visitor if this is the case and look at the following resources to help keep your child safe.

Safer sleep for babies away from home or in emergency situations - [The Lullaby Trust](#)



Common Illness

Nappy Rash

Nappy rash is common in babies and can usually be treated at home.

Symptoms

- Red or raw patches on babies bottom or whole nappy area.
- Skin looks sore and feels hot to touch.
- Scaly or dry looking areas.
- Spots pimples or blisters on babies' skin, these can be red or brown.



What can I do to treat my child at home?

To help clear up Nappy rash.

- Try not to use wet wipes, wherever possible use warm water and cotton wool to wash your baby's nappy area. A bath can sometimes help but not more than twice a day.
- Leave your babies nappy off whenever possible.
- Change baby's nappies more regularly than usual.
- Keep the skin clean and dry, gently pat the skin to dry the area.
- It may be worth changing the brand of nappies you are using. Ensure the nappies fit well.
- Creams that can help nappy rash are; Sudocrem Bepanthen and Metanium these can be bought at stores or pharmacy and are easily available.



When should I ask for medical help?

If the rash is not clearing you may need to have a cream prescribed, then you can contact your Health Visitor or GP.



Challenging Behaviour

There are lots of different reasons for difficult and challenging behaviour in toddlers and children, one of these is when children are living in uncertain and unfamiliar times.

Call to Action

Please see our section and guide to other helpful services on page 6.

There are some services included here, that you can contact yourself, if you have a concern about your child's behaviour.

Symptoms

- Being unsettled or waking more during sleep.
- Child's behaviour starts to become more baby like.
- Trying to gain your attention by any means possible.
- Having lots of tears and tantrums, unable to explain how they are feeling about new surroundings.
- Becoming clingy and unwilling to leave mum or dad at all.



What can I do to treat my child at home?

Ways to Help a Child with their Behaviour.

- Children can feel safer when they are in routines, this can make them feel more secure as they will know what is happening through the day.
- Playing with children can help to manage their stress and make sense of what is going on around them. Floor play is best for this.
- Chatting reading and singing songs will interest and calm a child.
- Lots of soothing touch can help to reassure a child.
- Talking simple explanations of what is going on can help, also recognising the child maybe missing relatives or pets or just home.



When should I ask for medical help?

Families can always chat to their Health Visitor for a child under 5 years or a school nurse for an older child, if the child's behaviour is more challenging or getting worse.

Every family will have a Health Visitor or school nurse. Your GP practise will have details of how to contact them.

There are also other organisations that we can refer you to for support with behavioural issues or children's wellbeing.



Mental Health Difficulties

Mental Health is something that we all have, including children, and it refers to your behavioural and emotional wellbeing. Stressful or traumatic experiences, such as a sudden change in environment or witnessing traumatic events can trigger mental health difficulties.

Some children and young people who have been victims of war, violence, torture, or other trauma may suffer from post-traumatic stress. They may experience an increase in fear and anxiety or replay the trauma, sometimes through bad dreams and nightmares. Children may not always be able to communicate how they feel, and they may be unsure of who they can talk to about their problems.

Families seeking asylum may experience stresses associated with the loss of wider family network, friends, and customs. External life stressors such as family difficulties, housing instability and worries about the asylum process can also be a cause for mental health struggles for children.

If a child is experiencing difficulties with their mental health, it is important that support is offered by their family as soon as possible. This chapter will give you some practical resources to help you with this. It is also important that you take care of your own mental health.

Symptoms

All children are different, and they may display varying signs when they are struggling with their mental health. These are some of the common symptoms, but your child may also demonstrate this in other ways.

- Feeling sadness
- Anxiety
- Avoiding social interactions
- Hurting themselves or talking about hurting themselves
- Talking about death or suicide
- Outbursts or extreme irritability
- Out-of-control behaviour that can be harmful.
- Drastic changes in mood, behaviour, or personality
- Changes in eating habits
- Loss of weight
- Difficulty sleeping
- Frequent headaches or tummy aches
- Difficulty concentrating
- Changes in schoolwork
- Avoiding or missing school
- Not wanting to play with other children.

Continue >

Call to Action

See links to attachments for resources with further information, some of these have been translated into lots of other languages but if you are having difficulty understanding these please see your GP/ children’s nurse for support.



Translations of our mental health information | Royal College of Psychiatrists (rcpsych.ac.uk)

Young Minds

Young Minds offers free confidential online and telephone advice and emotional support to anyone worried about a child or young person up to the age of 25.

Free parents’ helpline on:

0808 802 5544 from 9.30am to 4pm, Monday to Friday

parents@youngminds.org.uk

Young Minds will respond within 3 working days.



Parents’ A-Z Mental Health Guide | Mental Health Advice | YoungMinds (youngminds.org.uk)

Home Start Cardiff

Home Start Cardiff is a charity that works throughout Wales. They can offer support to families within your home, by a trained volunteer. Speak to your GP or childrens nurse if you would like to be referred to this service or you can also contact them via this link.



Contact Us - Home-Start Cymru (homestartcymru.org.uk)

The Hangout Cardiff

The Hangout Cardiff is a mental health support hub for children aged 11-18 years. It is a place where young people drop in without an appointment and access support services and get involved in group activities and meet new people (if they want to!).

They are open 3-9pm everyday at 26-28 Churchill Way, Cardiff



You can treat your child at home if:

There are lots of ways that you can support your child at home. It can be a good idea to find out more about how your child is feeling, so that you can find the best ways to support them or help them to find support themselves.

If your child has problems sleeping due to their mental health, please scan the code to this link for ideas and ways you can support your child.



If your child is suffering from stress, there are lots of ways that you can support you child at home:



Tips for Combatting Stress, for Parents and Children



Talking to children about war and conflict (beaconhouse.org.uk)

Work together with your child’s school. There is a school nurse available at all schools who will be able to support your child with their mental health. Even if your child is not yet in school, there will be a school nurse available to support you.

If your child is 11-19 years old, they can text their school nurse on 07520 615718 for confidential advice and support (extra information leaflet attached).

You can access early help for your family via Family Gateway.

The Family Gateway Team can help you find support services including money advice, housing, child behaviour, childcare, school attendance, health and wellbeing and parental support. Contact the Family Gateway on **03000133133** or email

ContactFAS@cardiff.gov.uk



Make an appointment to see a Doctor at your GP surgery or call NHS 111 if:

It is hard to know when to get professional support for your child. If your child has been feeling low or anxious for a long period of time, or if you are seriously concerned about your child, you may want to seek further support.

Contact your GP or phone 111 if:

- you need help for your child’s mental health, but it’s not an emergency.
- you’re not sure what to do to support your child with their mental health.

You may be able to speak to a nurse, or mental health nurse, over the phone. A GP can advise you about helpful treatments and help you access further mental health services if this is needed.



Go to A&E or call 999 if:

- Your child’s life is at risk, for example, they have harmed themselves or someone else or have taken an overdose.
- You do not feel that you can keep your child safe.



Call to Action

Anti-vaccine stories are often spread online through social media and offline. Always get your vaccine and health information from trusted sources.

If you have any questions about vaccinations or are unsure you can always discuss this with your doctor or nurse who will be happy to answer any questions.

Vaccinations

Vaccinations (also known as immunisations) are the most important thing we can do to protect ourselves and our children against ill health. They prevent millions of deaths worldwide every year. Vaccines teach your immune system how to create antibodies that protect you from diseases. Once we've been immunised our bodies are better able to fight these diseases if we come into contact with them.

It is much safer for your immune system to learn this from vaccines than from diseases. Once your immune system knows how to fight a disease it can often give you lifelong protection.

Vaccines also help the community through 'herd immunity' If enough people are vaccinated it's harder for the disease to spread through people who can't have the vaccine.

Why are they important?

- Vaccines help to protect you and your child from many serious and potentially deadly diseases.
- They also help other people in your community by helping stop disease spreading to people who can't have vaccines (such as babies who are too young).
- Vaccinations reduce or even get rid of some diseases if enough people are vaccinated.

Are there any side effects?

Most side effects from vaccines are mild and do not last long. The most common side effects are:

- The area the vaccine went in being a bit red, swollen, and sore for a few days.
- Feeling a bit unwell and developing a high temperature for 1 or 2 days.
- Feeling tired
- Having a headache for a few days

Most of these side effects can be managed, see our guides on fever and pain for more information.

It is rare for anyone to have an allergic reaction to vaccinations however the person administering your vaccine will be trained to deal with this.

All vaccines undergo rigorous safety testing before being introduced and are continuously monitored.

What if my child has already had vaccinations in another country?

If your child was born outside of the UK and had their vaccinations in another country their GP surgery can check any records, you must see if they are missing any according to the UK schedule.

If you don't have records or are unsure what immunisations your child was given your doctor will recommend re-immunising your child according to the UK schedule based on their age.

Whilst this may mean they repeat some immunisations your child has already had there is no harm in doing this and it is safer to ensure that your child has had all immunisations than to leave them missing some vaccines.



Support Available:

It's much easier to stop smoking when you get the right support; thousands of people access free, NHS smoking cessation services in Wales every year.



<https://www.helpmequit.wales/>

Help me Quit Wales can provide free confidential and non-judgemental support from a friendly stop smoking expert.

You can self-refer or ask your GP or nurse for support.

Stopping Smoking

When you stop smoking you can begin to see almost immediate improvements to your health.

The earlier you stop smoking, the more you're likely to benefit. But it's never too late – because stopping will improve your health whatever your age and no matter how long you have smoked.

For some people, a big reason for stopping smoking is to be there for their family and friends.

If you have stopped smoking and are physically and mentally healthy, you're more likely to be able to support your loved ones – and be a part of their life in the future.

Also, becoming a smoke-free role model means your children are much less likely to take up smoking.

Second Hand or 'passive' smoking

- Second hand smoke is dangerous, especially for children.
- When you smoke most of the smoke doesn't go into your lungs, it goes into the air around you where anyone nearby can breathe it in. People who breathe in second-hand smoke regularly are more likely to get the same diseases as smokers, including lung cancer and heart disease. Passive smoking is especially harmful for children.
- Children who live in a household where at least 1 person smokes are more likely to develop:
 - asthma
 - chest infections – like pneumonia and bronchitis
 - meningitis
 - ear infections
 - coughs and colds
- If you are unable to stop smoking, make sure that you smoke away from children and outdoors where possible to limit the effects on them.

Teenagers and smoking

Many smokers begin in their teenage years, so whilst most teenagers do not smoke it is a common time to start. If your teenager smokes then it's important to have an open conversation with them about the risks and the support available to stop. Try to remain calm and willing to talk as any arguing may stop them seeking further support.

Here is some support specifically aimed at teenagers and young people who want to stop smoking:



<https://www.childline.org.uk/info-advice/you-your-body/drugs-alcohol-smoking/smoking/>



Call to action:

Healthy eating isn't just about the food children eat, it is also about behaviour around eating. Include your children in food preparation and make cooking fun!

Other useful information:

<https://nylo.co.uk/>

<https://www.nhs.uk/live-well/>

<https://www.nhs.uk/healthier-families/food-facts/5-a-day/>

<https://www.firststepsnutrition.org/eating-well-early-years>

When should I worry about my child's diet?

- If you need further help and support with your child's diet, speak to your health visitor or practice nurse.
- You should seek advice from a GP if your child:
 - Has lost a significant amount of weight over a short period of time.
 - Has gained a significant amount of weight quickly.
 - Is refusing to eat at all
 - Is not growing taller
 - Is feeling tired and weak often
 - Appears unwell, pale or is feeling lightheaded or dizzy.

For more information see our page on Iron deficiency anaemia.

Healthy Eating

What is a healthy diet?

No matter what age you are, healthy eating is important to maintaining and improving your health and it is even more important for children and young people who are still growing and developing.

A healthy, well-balanced diet has many benefits including:

- Helping with growth and development.
- Providing a fuel store so that children have the energy to get through the day.
- Helping to improve concentration and mood.
- Being a source of the nutrients needed for healthy skin, teeth, hair, and nails.

As well as eating healthily it is important that children exercise regularly; children need to be physically active for 60 minutes a day.

Other ways to help your child:

- Help them get enough vitamins by giving children aged from 6 months old to 5 years old vitamin A, C and D drops every day
- Aim for 5 portions of fruit and vegetables a day -these are a great source of vitamins, minerals, and fibre.
- Ensure that your child has an appropriately sized portion and that their food does not have any added salt

Low appetite in children

A change in environment, increased stresses, and a change in local diet/availability of food can all impact a child's intake and appetite and cause worry for parents.

Here are some things you can do to help with low appetite:

- Eat together as a family and eat the same meal.
- Keep offering new foods and in different ways e.g. offering carrot cooked, uncooked, grated, mixed in a sauce etc.
- have snacks available if they get hungry between meals – try yoghurts, breadsticks, and small sandwiches. – try to aim for no more than two snacks a day
- encourage a healthy attitude to eating – include them in the food preparation and try to eat together.
- introduce new foods gradually and in small portions – if they're a fussy eater this will help them get used to new foods.
- Praise your child when they try something new.

Infant feeding and weaning

With new babies your midwife or Health Visitor will be able to advise you, if you are breast feeding there are also specialist breastfeeding support workers that can help if you are struggling. The best thing to do is to discuss with one of the professionals.

Introducing your baby to solid foods alongside their breast or formula milk, also known as weaning, starts when your baby is around 6 months old. This gives them time to develop properly, so they can cope with solid food.

There are 3 clear signs, which, when they appear together, show that your baby is ready for their first solid foods, Your baby should be able to:

- stay in a sitting position, holding their head steady
- coordinate their eyes, hands and mouth so they can look at their food, pick it up and put it in their mouth
- swallow food (rather than spit it back out)

Your health visitor will be able to help with more information and support around when your child is ready to wean and what foods are best.



Start For Life: Baby Weaning | NHS

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



Feeding your baby: When to start with solid foods | UNICEF Parenting