

Immunisation - Is your child attending kindergarten for the first time?

Australia's peak medical organisation - the National Health and Medical Research Council - recommends that children who have turned 4 years of age should have the following booster immunisations:

- DTPa-IPV vaccine against diphtheria, tetanus, pertussis (whooping cough) and polio;
- MMR vaccine against measles, mumps and rubella, and;
- All other WA schedule vaccinations recommended.

Your child can have these immunisations from 3 ½ years of age.

If your child has missed out on vaccinations, a doctor or immunisation nurse can provide 'catch-up' vaccinations.

Make an appointment with a GP or visit your local (free) immunisation clinic. **For further information about immunisation- visit: www.healthywa.wa.gov.au/immunisation**

Did you know that as parents you can ring the National registry or go to the web site to check out your child's immunisation status? All you need is your Medicare number. Phone 1800 653 809 or access the web site: www.humanservices.gov.au or email air@humanservices.gov.au

Influenza

Influenza, or the 'flu' is caused by an influenza virus. It is spread through the air when someone coughs, sneezes or talks. It is also spread by touching something that has the virus on it and then touching your nose, eyes or mouth. Common symptoms include sore throat, cough, fever, headache, chills, tiredness and muscle aches.

People with the flu should rest and drink plenty of fluid. Use paracetamol in recommended doses if necessary - but do not give children any medication containing aspirin.

Be sure to keep your child home from school while he or she is sick. If you require school work for your child contact the school to prepare some for you to collect.

The best way to prevent flu from spreading is by washing your hands regularly and after coughing, sneezing or blowing your nose.

Flu vaccines are available prior to winter starting. For more information, contact your GP or local Immunisation Clinic.

Why should I consider having my child vaccinated against the flu?

The National Health and Medical Research Council, Australia's peak body for health advice, recommends annual vaccination for anyone six months of age or older who wants to reduce their chances of becoming ill with the flu.

Annual flu vaccination is strongly recommended for anyone six months of age or older with a medical condition that places them at higher risk of severe illness from flu. Children and adults with heart, lung or kidney disease or a weakened immune system, are eligible for free flu vaccine through the National Immunisation Program.

Children without underlying medical conditions who become infected with flu can also develop serious illnesses. Flu can cause high fever and pneumonia, and make existing medical conditions worse. Flu can also cause convulsions and diarrhoea in children.

Influenza viruses are always changing. Each year scientists try to match the strains of influenza viruses in the vaccine to those most likely to cause flu illnesses that year. It takes up to two weeks for protection to develop after vaccination against flu and protection lasts about a year.

The seasonal flu vaccine is available on prescription or via GP and immunisation clinics and is provided free for certain groups. Flu vaccines are available prior to winter starting. For more information visit healthywa.wa.gov.au/immunisation or contact your GP or Immunisation Clinic.

Gastroenteritis

Gastroenteritis, or 'gastro' is a common condition in children of all ages. It occurs when the bowel is infected by a virus or bacteria. Symptoms include diarrhoea, vomiting, stomach cramps and sometimes, fever. Gastroenteritis, or 'gastro' is a common condition in children of all ages. It occurs when the bowel is infected by a virus or bacteria. Symptoms include diarrhoea, vomiting, stomach cramps and sometimes, fever.

Most cases in children are not serious, but it is very important to make sure that a child with gastro **receives enough fluid**.

If your child has gastro, keep them away from school for 48 hours after vomiting and diarrhoea have stopped. If symptoms persist see your family doctor.

The easiest way to prevent gastro is to make sure everyone in the family **washes their hands regularly**, especially before eating and after going to the toilet.

For more information go to <http://www.public.health.wa.gov.au/2/597/2/gastroenteritis.pm>

Healthy eating - ten tips for parents

1. Give children a variety of different foods
2. Offer nutritious snacks, like fruit, yoghurt, crackers and cheese
3. Encourage your child to eat breakfast
4. Ensure that the family eats together at least once a day
5. Pack your child's lunch at home. Let your child help.
6. If your child refuses a new food, don't make a fuss. Try again several times.
7. Listen when your child tells you they are full
8. When your child is thirsty, encourage them to drink water.
9. Allow your children to help with planning and preparing healthy meals.
10. Plan physical activities for your family

Sleep

School-aged children need 10 -11 hours sleep a night. Getting a good night's sleep will help your child to be more settled, happy and ready for school, and will strengthen his/her immune system. Here are some sleep tips:

- Have a bedtime routine – this will help your child wind down from the day.
- Keep the bedroom dark, cool and quiet - this will help your child drift off easily.
- If anxieties or worries are keeping your child from relaxing, acknowledge the feelings and deal with it straight away or plan to sort the issue out in the morning after a good night's sleep.

Remember, medication is not the answer to children's sleep problems.

Contact your local Community Health Nurse, (**insert name here**) on (**insert phone number here**), or go to <http://raisingchildren.net.au> for more information

Bedwetting

Bedwetting, or nocturnal enuresis, is very common in children. Bedwetting has nothing to do with dreaming, and children who wet the bed are not “just being lazy”.

If your child wets the bed, there are a number of things you can do to help, such as using a waterproof mattress cover and establishing a before-bed toilet routine. It is not helpful to punish children who wet the bed. Fluids should not be restricted, even before bedtime. Sugary or caffeinated drinks should be avoided.

If your child is still wetting the bed after five and a half years of age, seek help through a referral by your local doctor. A bedwetting alarm is an effective and safe method of treatment available for nocturnal enuresis and may be appropriate for your child.

Contact your local Community Health Nurse or Community Health Centre, **(insert name here)** on **(insert number here)** for more information.

A healthy lunchbox

Healthy lunches and snacks are important for keeping active kids alert and focused and providing them with the nutrition they need every day.

A healthy lunch box should include:

- Fruit – at least one serve of fresh seasonal fruit. If you don't have fresh fruit, canned (in natural juice) is a good substitute. Dried fruit is high in sugar and should be avoided
- Vegetables – vegetable sticks, salads or a mix of raw (with dip) or grilled vegetables
- Dairy – one serve of milk, yoghurt or cheese supports optimal growth and development in children. If your child can't tolerate dairy provide a suitable alternative.
- Protein – lean meat or poultry, fish, eggs, tofu, legumes/beans, or nuts and seeds.
- Grain foods – wholegrain and high fibre varieties are best.
- Water – the best drink to keep children hydrated.

Remember, children who help plan and prepare their own lunch are more likely to eat it. Your child might like to try out this fun, 'Interactive Lunchbox' website: www.goforyourlife.vic.gov.au/hav/articles.nsf/html/index.html

Head lice

Head lice are tiny insect parasites that live on your head and feed on your scalp. Head lice are spread by head-to-head contact with another person who has head lice. This kind of contact includes doing group work, playing, or hugging.

Tips for preventing head lice

- **Check your child's hair regularly** for head lice and eggs ('nits'). Use a metal fine tooth 'nit' comb and plenty of hair conditioner applied to the dry hair, to make the task easier and more effective. To help children sit still for this, offer distracting activities, e.g. play a favourite video, provide games, iPad apps, offer a head massage.
- **Tie long hair back.** Braid long hair and/or put it up if possible.
- **Consider applying hair gel or mousse.** These do not prevent or repel lice but may help to keep stray hair strands from contact with other heads.
- **Avoid sharing combs or brushes.**
- **Remind your child to avoid head-to-head contact** with other children, e.g. when working at the computer with others, or when playing, or hugging.

If your child has head lice please notify the teacher.

For more information:

- Request the Head lice Fact Sheet available from the school
- Visit: http://healthywa.wa.gov.au/Articles/F_I/Head-lice

Hand washing

Washing hands is the easiest way to protect ourselves from contagious diseases, like colds, influenza and gastroenteritis. Hands should be washed before and after eating or preparing food, after going to the toilet and after nose blowing.

When teaching your child to wash their hands:

- Use clean water and soap, making sure they cover their hands and wrists.
- Use a brush to clean under nails if they're dirty too
- Dry their hands with something clean (like a paper towel)

Alcohol based sanitisers are useful when soap and water is not available. Use half a teaspoon of the product and encourage your child to rub their hands together until they're dry. If you can see dirt on their hands, it is better to use soap and water.

For more information go to www.healthywa.wa.gov.au

Sun safety

With the hot weather approaching, it is important to talk to your children about sun safety and teach them good sun protection habits.

- **Slip** on some sun-protective clothing that covers as much skin as possible.
- **Slop** on broad spectrum, water resistant SPF30+ sunscreen. Put it on 20 minutes before you go outdoors and every two hours afterwards. Sunscreen should never be used to extend the time you spend in the sun.
- **Slap** on a hat that protects your face, head, neck and ears.
- **Seek** shade.
- **Slide** on some sunglasses – make sure they meet Australian Standards.

Extra care should be taken between 10am and 3pm when UV levels reach their peak.

For more information see the Cancer Council website: www.cancer.org.au.

Water safety

In Australia, drowning is the number one cause of death for children under five. To keep your children safe around water:

- Always stay with your children and watch carefully when they are near water, even if they can swim.
- Teach your children about water safety and make sure they learn how to swim.
- Have the whole family learn first aid.
- If you have a pool have it fenced with self-closing gates.
- Never leave them alone in the bath.

The Education Department offers low-cost VacSwim programs for school aged children. For more information on swimming lessons during summer via VacSwim go to www.det.wa.edu.au/curriculumsupport/swimming/detcms/portal/ and for water safety tips see www.lifesavingwa.com.au.

Building your child's self esteem

Good self-esteem helps children and young people to try new things, take healthy risks and solve problems. Positive self-esteem provides children with a solid foundation for their learning and development and enables them to feel good about themselves.

Parents can help build the self-esteem of their children by frequently doing the following with them:

- Say "I love you"
- Develop and maintain special daily rituals
- Let your children help you
- Let your child make mistakes and solve some of their own problems
- Praise children for trying
- Show an interest in the sports or hobbies they are interested in
- Eat meals as a family
- Seek out one-on-one opportunities often
- Praise desirable behaviour (praise should be genuine and specific)
- Correct negative behaviour firmly but lovingly
- Respect their choices
- Celebrate your child's successes - big and small
- Make your children a priority in your life.

For more information go to <http://raisingchildren.net.au>.

Whooping Cough

Whooping cough (Pertussis) is a bacterial infection. The infection is spread by droplets that are coughed or sneezed out. The illness usually starts with a runny nose and a cough, with long spells of coughing. The person will have many quick coughs in one spell and there will be an average of 25 coughing spells a day. After a spell, young children may 'whoop'. They may also vomit. The coughing spells will start to subside after several weeks.

If your child has whooping cough or has come in contact with whooping cough, see your doctor. Antibiotics are usually prescribed to treat whooping cough. Check that your child eats and drinks enough while they are sick.

The child should stay away from school until five days after starting treatment, or if not treated, for three weeks from the start of symptoms. Any children under seven who have not been immunised and have been in contact with someone with whooping cough should be kept away from school for 14 days after the contact, or until they have been on antibiotic treatment for at least five days.

For more information on whooping cough, see the fact sheet at [Healthy WA – Pertussis](http://www.immunise.health.gov.au/) or <http://www.immunise.health.gov.au/>

School sores

Impetigo is an infection of the skin caused by bacteria. It will usually start with a blister or a group of blisters. The blisters will often pop, weep and form a crust. Small spots may spread outwards from the first spot. The spots are usually itchy.

If your child has impetigo they should be checked by a doctor. The doctor may prescribe antibiotics. You should cover the sores with watertight dressing and cut the child's nails to prevent them from scratching. Impetigo is spread very easily, so keep the child home until 24 hours after treatment has begun. Wash hands regularly to prevent spread to others.

Scoliosis

Scoliosis is an abnormal sideways curvature of the spine. It can be detected by a simple examination of the back.

The normal spine has three curves – one in the neck, one in the upper back and one in the lower back. These curves can be seen from the side, but when you look from behind the spine should appear straight. If the spine has a sideways curve, this is scoliosis.

An information leaflet about Scoliosis will be distributed to all year 6 and 7 students. Please read through the information provided and check your child for scoliosis as described in the leaflet.

If you have any concerns, please contact your General Practitioner or Community Health Nurse, **(insert name here)** on **(insert number here)**.

Anxiety – how to help your child

All children experience anxious feelings as part of their normal childhood development. Some anxious feelings include fear, agitation, nervousness, worry and apprehension. Some children find it harder to get these feelings under control and may experience anxiety more intensely and more often than others.

Anxiety is when the level of fear or worry about something is out of proportion to the level of risk or danger. Thinking about the situation makes them more worried and tense.

If your child is experiencing anxiety try to:

- Acknowledge your child's fear – don't dismiss or ignore it.
- Gently encourage them to do things they're anxious about, but don't push them to face situations they're not yet ready to face.
- Wait until they actually get anxious before you step in to help
- Praise him for doing something they're anxious about, rather than criticising them for being afraid.
- Avoid labelling your child as 'shy' or 'anxious'.

Your child might need some extra support if their anxiety stops them from doing the things they want to do or interferes with their friendships, school work or family life.

If you are worried about your child, contact your local Community Health Nurse, School Psychologist or General Practitioner. For more information about anxiety in children go to www.raisingchildren.net.au or www.healthyfamilies.beyondblue.org.au

Building resilience

Resilience is the ability to cope with difficult situations and 'bounce back' when things go wrong. Young people need to develop resilience in order to navigate life's ups and down. As a parent, you can help your child to become resilient by giving him or her opportunities to learn and practise new skills, for example:

- Allow your child to solve some of their own problems. Learning to deal with issues builds skill and confidence. Don't jump in to fix things, unless the situation has got out of hand.
- Arrange a fun, child-friendly activity each week like a trip to the park, play date with a friend or watching a favourite movie. Regular 'ups' provide a bank of positive emotions to buffer against life's 'downs' that may involve disappointment or conflict.
- Help your kids to think positively. If your child is frustrated by a difficult maths problem, say, "I know that question was hard today, but yesterday I saw you solve a hard problem. You kept trying until you worked it out."
- If you have a disagreement with your child, the most important thing to do is to reconnect and repair the relationship. Let your child cool down then offer a hug or words of support. This has benefits for your child's mental health as well as their ability to deal with relationship problems throughout their life.

For more information about raising a resilient child, go to www.kidsmatter.edu.au or <http://raisingchildren.net.au> or contact your local Community Health Nurse, (insert name here), on (insert number here).

Online Safety - how to keep your child safe online

Protecting your children from harm is just as important online as it is in the real world. As a parent or carer, you can play an important role in helping children have safe and positive experiences online.

The internet offers an exciting world of experiences for children and the whole family. It can be entertaining, educational and rewarding. However, using the internet also involves risks and challenges.

Children might be exposed to content that is sexually explicit, violent, prohibited or even illegal. They may also experience cyber bullying or be at risk from contact by strangers.

Children may - unknowingly or deliberately - share personal information without realising they may be subject to identity theft, or that they are leaving behind content that might not reflect well on them in the future.

By taking an active role in talking with your kids about the risks and answering their questions or concerns about something that they find on the Internet you can help them stay safer online.

For more information on keeping your children safe online try the following website:

- [iParent](http://www.esafety.gov.au) is an online resource developed by the Office of the Children's E-Safety Commission where parents can learn about the digital environment and keep updated on their children's technology use. Guidance for using safety settings on your family's web-connected devices, tips for choosing movies and games and strategies for keeping young people safe online is available. www.esafety.gov.au
- Stay Smart Online is the Australian Government's online safety and security website, designed to help everyone understand the risks and simple steps we can take to protect our personal and financial information online. www.staysmartonline.gov.au/
- Raising Children Network <http://raisingchildren.net.au>.

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- **Puberty**

- Puberty is an interesting time for children and their parents. Children may become bewildered or embarrassed about what is happening to them. It is important to talk to your child about the physical and emotional changes that come with puberty. Many children will start to compare his or her body with others. Remind your child that people come in all shapes and sizes. It's also important that you don't compare your child's body with anyone else's body.
- Talk soon. Talk often. A guide for parents talking to their kids about sex is an excellent (free) book available from http://healthywa.wa.gov.au/Articles/S_T/Talk-soon-Talk-often
- You can also show and discuss the Hormone Factory website with your child at <http://www.thehormonefactory.com/>
- Education about growth and development is usually conducted at school during years 5, 6 and 7. Your child's teacher can give you more information about the content of these classes.
- If you are concerned about your child's development you can talk with your local Community Health Nurse, **(insert name here)**, on **(insert number here)**.

- **Sex - talking to your child**

- Parents often feel uncomfortable raising this topic with their children, but young people need accurate information about sex and sexuality in order to be able to negotiate sexual relationships safely and responsibly, and to become sexually healthy adults.
- Your child will hear information from many sources, but as the most influential role model in your child's life you have an important role to play in ensuring that your child receives the information that allows them to make safe and healthy choices.
- 'Talk soon. Talk often. A guide for parents talking to their kids about sex' is an excellent book that will help you with tricky conversations. Get your free copy at: Talk soon. Talk often. A guide for parents talking to their kids about sex' is an excellent book that will help you with tricky conversations. Get your free copy at: www.public.health.wa.gov.au/2/1276/2/parentcaregiver.pm.
- Try the 'Get the Facts' website and discuss with your child - www.getthefacts.health.wa.gov.au.
- If you have a concern about your child's development, please contact your local Community Health Nurse, **(insert name here)** on **(insert number here)**.

Asthma – what is it?

As we breathe, air moves in and out of the lungs through branching airways.

People with asthma have sensitive or 'twitchy' airways. When they are exposed to certain 'triggers' (e.g. cigarette smoke), their airways narrow making it hard for them to breathe.

The three main factors that cause this narrowing of the airways are:

- The inside lining of the airways becomes red and swollen (inflamed).
- The muscle around the airway tightens.
- Extra mucus is produced.

For more information: <http://www.pmh.health.wa.gov.au/brochures/consumers/CAHS0709.pdf>

What are the main symptoms of asthma?

- Wheezing - a high pitched raspy sound on breathing
- Coughing
- Shortness of breath
- Tightness in the chest

These symptoms vary from person to person, and from time to time within the same person. Some people have all the symptoms, while some may only have a cough or wheeze. Symptoms can also vary considerably in intensity.

For more information visit: <http://www.asthmawa.org.au>

We don't really know why some people have extra sensitive airways and others don't, but we do know that many people are born with a tendency to develop asthma. There is often a history of asthma, eczema or hay fever in brothers, sisters and parents or close relatives. Asthma can occur for the first time at any age.

There is evidence that contact with certain things, for example cigarette smoke during pregnancy and early childhood, increases the risk of developing asthma. For more information on smoking, pregnancy and asthma visit www.smokefreebaby.org.au.

Asthma first aid

Children with asthma can quickly become seriously ill. Asthma needs to be taken seriously. A child with a serious asthma attack may not sound wheezy, but may be pale, quiet and/or breathing with quick shallow gasps.

If a someone is short of breath and wheezing from asthma, follow his or her Asthma Management Plan, or these first aid steps:

- **Step 1** - Sit the person upright, remain calm and help the person stay calm. Do not leave the person alone.
- **Step 2** - Quickly give four puffs of a reliever puffer (blue puffer), one puff at a time. This is best given through a spacer. Ask the person to take four breaths from the spacer after each puff. Use the puffer on its own if no spacer is available.
- **Step 3** - Wait four minutes. If there is little or no improvement, repeat steps 2 & 3.
- **Step 4** - If there is still little or no improvement, call an ambulance immediately - 000.
- Continue to repeat steps two and three while waiting for the ambulance.

For more information about asthma and asthma first aid, go to www.asthmawa.org.au

Anaphylaxis - what is it?

Anaphylaxis is the most severe form of allergic reaction and can be life threatening. For people at risk, anaphylaxis occurs quickly after contact to the food, insect's or medicine to which the person is allergic.

It is very important that people at risk of anaphylaxis avoid any contact with the trigger (allergen). This is especially important with food allergy – a severe reaction can occur if the allergic person comes into contact with even a tiny amount of the food.

Anaphylaxis must always be treated as a medical emergency. Adrenaline autoinjectors (EpiPen®) contain a single, fixed dose of adrenaline which must be given to the person as soon as possible. Immediate administration of adrenaline is the only treatment that works for anaphylaxis.

Emergency first aid for anaphylaxis

- Lay the person flat, do not stand or walk. If breathing is difficult, allow to sit.
- Give the adrenaline autoinjector without delay. (Make a note of the time it was given.)
- Ring an ambulance - 000 (mobile phones 112).
- Stay with and reassure the person. Do not allow the person to walk at any time.
- Give another adrenaline autoinjector if no improvement after 5 minutes
- If the person loses consciousness and there are no signs of breathing, begin CPR.
- Monitoring in a hospital is required for 4-6 hours, even if symptoms improve.

Anaphylaxis - recognising a severe allergic reaction

Anaphylaxis is a severe allergic reaction which can be life-threatening. It can cause constriction of the airway and/or a dangerous drop in blood pressure. Look for one or more of the following:

- Difficult or noisy breathing
- Swelling of the tongue
- Swelling or tightness of the throat
- Wheezing or a persistent cough
- Difficult talking and/or a hoarse voice
- Persistent dizziness or collapse
- Pale and floppy (especially in young children)
- Abdominal pain or vomiting (if following an insect bite or sting)

It is important to lie the person flat and get help fast.

Some allergic reactions are mild or moderate. These reactions may involve hives, welts, tingling mouth, and/or swelling of the lips, face and eyes. Mild reactions to food can involve abdominal pain and vomiting. Anaphylaxis (severe reaction) may or may not involve these signs and symptoms.

Food intolerances are not life-threatening and should not be confused with food allergies. For further information contact:

- Australasian Society of Clinical Immunology and Allergy www.allergy.org.au
- Allergy & Anaphylaxis Australia www.allergyfacts.org.au
- Western Australian Department of Health www.health.wa.gov.au/anaphylaxis

Anaphylaxis - checklist for parents of students at risk

- Tell the school administration if your child has been prescribed an adrenaline autoinjector (i.e. EpiPen), has experienced anaphylaxis, has any changes in allergies, and/or any other health care needs that may affect anaphylaxis management.
- Make sure you give the school an adrenaline autoinjector, which is clearly labelled for your child.
- If old enough, make sure your child carries an adrenaline autoinjector and knows how to use it. Show his or her friends, brothers and sisters if they are old enough to understand.
- Provide an ASCIA Action Plan for Anaphylaxis completed and signed by your child's doctor. Update the plan (including a photo of your child) when the adrenaline autoinjectors are renewed (usually every 12-18 months). Action Plans are available from www.allergy.org.au
- Help the school to develop an Individual Health Care and Risk Minimisation Plan for your child.
- Educate your child about how to avoid known allergens (triggers).
- Remind your child to immediately tell someone if she/he feels sick.