NSW Health

NSW GOVERNMENT

Child Health Record

Blue Book

This book belongs to:

_____

Protect your child against serious diseases

Make sure they get all their vaccinations on time

health.nsw.gov.au/vaccinate

Please take this book with you when your child attends any health service, doctor or hospital.

NSW Health acknowledges Aboriginal people as the traditional custodians of the lands and waters of NSW, and pays respect to Elders past, present and future. In this book, Aboriginal and Torres Strait Islander people are referred to as Aboriginal people in recognition that Aboriginal people are the original inhabitants of NSW.

Thank you to all the parents, carers, nurses, doctors and other professionals who helped update this health record. This updated version builds on previous editions of the Personal Health Record (Blue Book), used in NSW since 1988.

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Do not staple on this page

About this book

This book is for you. Take this book with you when you:

- attend your child's health and development checks and vaccinations
- enrol your child in daycare, preschool, or school
- visit any health service with your child, like:
  - child and family health centres
  - doctors, dentists, specialists, allied health professionals or other health professionals
  - hospitals, including emergency departments.

There's a pocket at the back to keep important papers about your child.

You'll need to fill in information or answer questions in some parts of this book

About some words in this book

- When we say 'parent', we mean anyone who cares for the child and plays an important role in their life
- When we say 'doctor', we mean a general practitioner (GP)
- When we say 'nurse', we mean a child and family health nurse who often works in NSW child and family health centres
- We understand that not everyone who gives birth identifies as a mother. People of all genders can become parents, and we respect each person's identity and the words they choose to describe themselves
- You may see the words 'check' and 'check-in' used throughout this book. They mean the same thing.

Information and services for Aboriginal families

It is important to let your health service know if your child is Aboriginal so that your child gets the best possible care that is culturally safe and right for your family and community.

This could be a:

- Building Strong Foundations service, if one is near you, or
- child and family health service.

Building Strong Foundations (BSF) is a culturally safe health service for Aboriginal children from birth to school age and their families. BSF is delivered by Aboriginal Health Workers and child and family health nurses.

Get to know your BSF team and visit them as often as you like. They offer helpful advice from feeding baby, sleeping, walking and talking. They can help with your child's health and development, including how your baby is growing and making sure their ears, eyes, and teeth are healthy too.

You can talk to them about any worries you have about your child and help accessing support.

BSF services support you with:

- your child's health and development checks
- childhood vaccinations
- feeding, settling and sleeping
- being ready for big school.

BSF services can be offered in the home, at the local health centre or clinic, or in a place where you and your child feel safe and comfortable.

If your local area doesn't have a BSF service, an Aboriginal Health Worker may be available to provide cultural support when connecting with early childhood services. Alternatively, your local Aboriginal Medical Service or Aboriginal Community Controlled Health Service can provide early childhood health support.

If you become pregnant again, you can also access Aboriginal Maternal and Infant Health Services (AMIHS), a culturally safe service for pregnant women, Aboriginal children and their families.

AMIHS provides pregnancy care in the home, at the local health centre or clinic and after birth care until your baby is 8 weeks old. AMIHS can help you and baby's health needs and check how they're growing. You can use AMIHS as soon as you find out you are pregnant. You don't need a doctor's referral for AMIHS or BSF. To find a service near you, visit **health.nsw.gov.au/kidsfamilies/MCFhealth/programs/Pages/amihs-bsf-map.aspx**

It's good to get help early

If you're worried or have any questions about how your child is growing or developing, talk to your Aboriginal Health Worker or nurse who can help you with advice and support and referrals to other services if needed.

In some areas, the BSF team is supported by allied health therapists and social workers who can help too.

Blue Book health checks are a great way to spot any health or developmental issues early. This means your child can get support early, helping them grow strong in body, mind and spirit before they start school.

Useful links and resources

- **nsw.gov.au/family-and-relationships/early-child-development/aboriginal-and-torres-strait-islander-families**
- **wellmob.org.au**
- Stay strong and healthy Facebook page **facebook.com/StayStrongAndHealthy**
- Yarning about alcohol use in pregnancy **yourroom.health.nsw.gov.au/Aboriginal-info**
- **nsw.gov.au/family-and-relationships/early-child-development/aboriginal-and-torres-strait-islander-families**

Information for multicultural families

This Blue Book is for you

It has important information to support your child's health, growth, and development. It's also a place to keep track of their checks, vaccinations, milestones, illnesses, and injuries. Make sure to bring it to all your child's health appointments.

Translated resources

Here are some places where you can find trusted information in different languages:

- Trusted parenting and health information in many languages **raisingchildren.net.au/translated**
- Information on signs of serious illness in children **www.schn.health.nsw.gov.au/signs-serious-illness-children-factsheet#translations-4**
- Protect your child against serious diseases. Make sure they get all their vaccinations on time **health.nsw.gov.au/vaccinations-resources**
- Track your child's milestones and make sure they get all their checks
  – **health.nsw.gov.au/milestones-matter**
  – **cdc.gov/act-early/resources/milestone-checklists.html**
- Information on healthy kids **health.nsw.gov.au/healthy-kids-translations**
- Find information on early childhood education **edu.nsw.link/translated-resources**
- New to Australia? **www.swslhd.health.nsw.gov.au/refugee/#/multilingual-resources**

In-language support

Do you need language support or an interpreter?

Always ask for an interpreter if you don't speak or understand English well.

Health professionals, like doctors and child and family health nurses, can organise one for you. Interpreters are free at NSW Health services and with GPs under Medicare.

On the phone

You can get a phone interpreter by calling the Translating and Interpreting Service (TIS):

- Step 1: Call 131 450 and say your language
- Step 2: Say the name and phone number of the health service you need to contact.

TIS is free and available 24/7.

Information in language

Arabic	العربية	Korean	한국어
Chinese (Simplified)	简体中文	Nepali	नेपाली
Chinese (Traditional)	繁體中文	Punjabi	ਪੰਜਾਬੀ
Greek	Ελληνικά	Thai	ภาษาไทย
Hindi	हिन्दी	Vietnamese	Tiếng Việt Nam

Scan this QR code to find information in language

Need an interpreter?

Contact the Translating and Interpreting Service on **131 450**.

Free and available 24 hours a day.

National Relay Service (NRS)

If you are deaf, hard of hearing or have a speech or communication difficulty you can contact the phone number you need through your preferred NRS call channel.

You find the call channels at
accesshub.gov.au/about-the-nrs/nrs-call-numbers-and-links

How to use the NRS:

- Step 1: Choose your preferred NRS call channel
- Step 2: Give the NRS the phone number you want to call.

This service is free and confidential.
Find out more at **accesshub.gov.au/about-the-nrs**

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What to do if you're worried about your child

Call healthdirect for free instant health advice 24/7

Call healthdirect on 1800 022 222 for free instant health advice anytime, anywhere.

You'll speak to a registered nurse who will help you get the care your child needs.

They can find you a nearby doctor, pharmacist, urgent care service or even connect you with a paediatric specialist online.

Save this number **1800 022 222**.

In an emergency, call 000 (Triple Zero).

Signs of serious illness in children

As a parent or carer, you know your child best and what they're like when they are happy and healthy.

You'll also be able to notice the small changes in your child that can tell you they are becoming unwell.

Some signs and symptoms of illness can show that your child is very unwell and needs medical care.

Learn more about signs of serious illness in children
www.schn.health.nsw.gov.au/signs-serious-illness-children-factsheet

Raise It

If your child is in a NSW public hospital or health service and you're worried their condition is getting worse, **Raise It** can help.

Raise It is a simple 3-step process to support you to raise concerns about you or your loved one's condition getting worse in hospital.

Here's how to use Raise It while in hospital:

1. **Talk:** Start by talking to a nurse, midwife, doctor or health worker about your concerns.
2. **Ask:** Still concerned? Ask the nurse or midwife in charge for a Clinical Review.
3. **Call:** If you are still worried, call **NSW Health Raise It**. A senior health worker will respond. The Raise It line (**1800 777 33**) is only for use in public hospitals and health services.

You don't need medical knowledge. You don't need to be certain.
If something doesn't feel right, **Raise It**.

Find out more **health.nsw.gov.au/raiseit**

Child health and development

Give your child the best start in life

- spend quality time together: love, talk, sing, read and play with them
- track their milestones: how they play, learn, speak, act, and move
- take them for all their health and development checks.

Checks track how your child plays, learns, talks and moves, from birth to starting school. They're also a chance to get help with feeding, sleep, behaviour, and your own wellbeing.

Every baby is different, even those born in the same family. These checks help see how your child is thriving in their own way.

Child and family health centres will do these checks for free through Medicare. A doctor can also do the checks.

Find a service **health.nsw.gov.au/child-family-health-services**

☐ At birth	☐ 6 months	☐ 2 years
☐ 1 to 4 weeks	☐ 12 months	☐ 3 years
☐ 6 to 8 weeks	☐ 18 months	☐ 4 years

Aim to complete them all. Each check is important.

Worried about your child's development?

You know your child best. Don't wait.

Talk to your child and family health nurse or doctor if your child:

- isn't reaching milestones
- has lost skills they had before
- you have other concerns.

Act early. Share your concerns and ask about developmental screening.

Childhood vaccinations

Give your child the best protection. Vaccinate on time.

Booking an appointment can sometimes take time.
It's a good idea to book in your child's check-ins and vaccinations early.

Go to **health.nsw.gov.au/schedule** to see the immunisation schedule.

You can create a personalised vaccination schedule for your child at **health.nsw.gov.au/myschedule**.

Birth details and newborn check

SMR010005

BABY

Affix patient label here

Birth details This section is to be completed by a health professional.

Given name of child Family Name

Name of birth facility

Date of birth / / Time of birth Sex ☐ Male ☐ Female

Maternal information

Birth mother's name MRN

Pregnancy complications

Blood group Anti D given ☐ Yes ☐ No

Labour ☐ Spontaneous ☐ Induced - reason

Labour complications

Type of birth ☐ Normal ☐ Breech ☐ Forceps ☐ Caesarean ☐ Vac ext ☐ Other (provide details)

Neonatal information

Estimated gestation Apgar 1 minute 5 minutes

Abnormalities noted at birth

Problems requiring treatment

Birth weight (kg) Birth length (cm) Birth head circ (cm)

☐ Newborn Hearing Screen (SWISH) completed (refer to SWISH in this section)

☐ Newborn Bloodspot Screen Test Date / /

☐ Other (specify) Date / /

☐ Vitamin K given ☐ Injection ☐ Oral

1st dose / / 2nd dose / / 3rd dose / /

☐ Hep B immunisation given Date given / /

☐ Hep B immunoglobin given Date given / /

Discharge information

Post partum complications

Feeding at discharge ☐ breast ☐ formula ☐ mixed

Difficulties with feeding

Date of discharge / / Discharge weight (kg) Head circ (cm)

Print Name Signature

Designation Date / /

SMR060005

BABY

Affix patient label here

Newborn examination This section is to be completed by a health professional in the presence of the parent/s before baby's discharge from hospital.

Date of birth / / Corrected age Sex ☐ Male ☐ Female

Baby's name

Check	Normal	Comment
Head and fontanelles		
Eyes (general observation including red reflex)		
Ears		
Mouth and palate		
Cardiovascular		
Femoral pulses R / L		
Respiratory		
Abdomen and umbilicus		
Anus		
Genitalia		
Testes fully descended R / L		
Musculoskeletal		
Hips		
Skin		
Reflexes		
Does the parent have any concerns about the baby?	☐ Yes ☐ No	

Print Name

Designation

Signature Date / /

Statewide Infant Screening – Hearing (SWIS-H)

Baby's name		Date of Birth	
Parent responses to family health history and risk factors (page 18)	☐ Normal	☐ Review	☐ Refer
Hearing risk factor(s) identified	☐ Yes	☐ No	

Local Health District

Screened at		Screening date	
Screened by (Print Name)		Signature	
Outcome	Pass	Refer	
RIGHT	☐	☐	
LEFT	☐	☐	
Direct Refer to Audiologist	☐ Yes	☐ No	
Reason (if yes)			

Repeat screen	☐ Required	☐ Not required	
Screened at		Screening date	
Screened by (Print Name)		Signature	
Outcome	Pass	Refer	
RIGHT	☐	☐	
LEFT	☐	☐	
Refer to Audiologist	☐ Yes	☐ No	

Is follow up needed at 10 – 12 months (corrected)?	☐ Yes	☐ No

Please direct families to page 21 for more information about hearing, including what to do if follow-up is needed.

Notes

You can use this space for anything you want to discuss with your healthcare provider.

All about me

My information and family history

About me

My name

Home address

Change of address

Sex m/f Date of birth / / Birth weight (kg)

My family

Parent 1

Name

Tel Email

☐ Aboriginal ☐ Torres Strait Islander

Aboriginal Country (if known)

Parent 2

Name

Tel Email

☐ Aboriginal ☐ Torres Strait Islander

Aboriginal Country (if known)

Other people who care for me

My siblings (names and ages)

Languages we speak

Family health history and risk factors

Please answer the questions below.

Share your answers with health professionals who care for your baby.

Family history	**Yes**	**No**
Has anyone close to your baby been deaf or had a hearing problem from childhood?*	☐	☐
Did anyone in the family have eye problems as a child?	☐	☐
Is anyone in your baby's close family blind in one or both eyes?	☐	☐
Is there a family history of developmental hip dysplasia?	☐	☐

Pregnancy and birth	**Yes**	**No**
While pregnant, did the birth mother have rubella, cytomegalovirus, toxoplasmosis, herpes, or any other illness with a fever or rash?*	☐	☐
At birth, did your baby:		
• weigh less than 1500 grams?	☐	☐
• need oxygen for 48 hours or more?	☐	☐
Was your baby born with any physical problems?	☐	☐
Was your baby in a breech presentation?	☐	☐
Was your baby in intensive care for more than 5 days?*	☐	☐
Did your baby have severe breathing problems at birth?*	☐	☐
Did your baby have meningitis?*	☐	☐
Did your baby have jaundice, requiring an exchange transfusion?*	☐	☐
Have you noticed anything unusual about your baby's head or neck, such as an unusually shaped face, or skin tags?*	☐	☐
Does your baby have Down Syndrome (Trisomy 21) or another condition associated with hearing loss?*	☐	☐

*hearing risk factor, hearing screener to review

More questions on next page

Dental	**Yes**	**No**
Do you brush your teeth with fluoride toothpaste twice a day?	☐	☐
Is there a family history of dental issues? (tooth decay, gum disease)	☐	☐
Has it been more than a year since you've last seen a dentist?	☐	☐

You can add any notes below

Useful contacts

Important numbers are listed on the back of this book.

Name	Address	Phone/email
Family doctor or GP		
Child and family health centre		
Dental practitioner		
Specialist doctors		
Allied health professionals		
Long daycare or preschool		
Primary school		
Other		

Information for families

Newborn hearing

NSW Statewide Infant Screening – Hearing (SWIS-H)

One of the first checks your baby will get is the free SWIS-H screen, offered soon after birth. It checks babies for hearing loss, so they can get the support they need right away. It's usually done while you and your baby are still in hospital.

A trained hearing screener will place small sensor pads on your baby's head and play soft clicking sounds into their ears through an earphone. The sensor pads record your baby's responses to the sounds.

The screen may take 10-20 minutes and doesn't usually bother babies. You can stay with your baby while the screen is being done.

As soon as the hearing screen is completed, the results will be explained to you and recorded in this Blue Book.

There is a chance your baby may need a repeat hearing screen. The hearing screener will let you know if your baby needs one. Depending on the results, your baby may need to see an audiologist for a diagnostic assessment.

Your hearing screener will also let you know if they find a hearing risk factor. If they do, your baby should get another hearing test at 10-12 months old (corrected). There may be costs. Your doctor or child and family health nurse can help organise this.

More information **health.nsw.gov.au/hearing**

Hearing can change over time

There's a chance the hearing screen may not detect a hearing problem, or your child might develop one later in life.

If you're ever worried about your child's hearing, talk to your doctor or child health nurse. You can ask for a referral to get your baby's hearing tested. You can do this even if their newborn screening showed normal hearing. There may be costs involved for hearing tests.

Your baby's hearing affects their speech and language development. That's why it's important to monitor their milestones, as well as their responses to sound.

You can do this by:

- making sure your child gets all their checks
- using the 'Learn the Signs. Act Early' checklists in this Blue Book to track their milestones.

Registering your baby

Give your child the right start.

- You must register your baby's birth within 60 days
- Registering your baby's birth is free
- You can't apply for your child's birth certificate until they are registered.

After the birth of your child, the hospital or midwife will give you information on how to register their birth online.

To register your baby's birth, visit **nsw.gov.au/register-your-baby**.

After you register, you can apply and pay for a birth certificate.

Birth certificate

A birth certificate gives legal evidence of your child's age, place of birth and parents details. You'll need it for:

- some government benefits
- access to Medicare
- enrolment in school and sport
- opening a bank account
- applying for a passport.

To order a birth certificate, visit **nsw.gov.au/order-birth-certificate**

Birth certificates come with a fee.

You can contact NSW Registry of Births Deaths & Marriages on **nsw.gov.au/contact-registry**

Enrol your baby in Medicare

You can do this by completing the newborn child declaration form you received in the parent pack from the hospital or midwife.

Health professionals for your child

Child and family health centres

Centres are free with Medicare for NSW families with children aged 0-5 years.

They are run by health professionals, who offer:

- health and development check-ins
- support and advice on parenting issues, like sleeping and settling, feeding, development, behaviour, and your own wellbeing
- referrals to health professionals like doctors, nutritionists, audiologists, optometrists, speech pathology or occupational therapy.

If you don't have Medicare, talk with your local child and family health nurse about accessing the service.

You don't need a referral to access a centre. To find one near you, visit **health.nsw.gov.au/child-family-health-services**

Doctors

Your family doctor (GP) is the person to see if your child is sick or if you have any concerns about their wellbeing. They provide:

- primary health care
- referrals to specialists
- when needed, coordination of your child's health care.

A paediatrician is a doctor who specialises in children's health. They can provide specialist health care for your child. You need a referral from a GP to make an appointment with a paediatrician.

Rights of children and young people in healthcare

Children and young people have the right to be heard, respected, and involved in decisions about their healthcare. Australia is a signatory to the United Nations Convention on the Rights of the Child. The Association for the Wellbeing of Children in Healthcare advocates for the needs of children, young people and their families in the Australian health care system. **awch.org.au**

How are you doing?

In the early days and weeks after birth, you will still be physically recovering from giving birth to your baby. Your midwife, child and family health nurse, or doctor will follow up with you to see how you are healing, including things like checking with you about any pain or discomfort you feel, how your perineal or caesarean section stitches are healing (if relevant for you) and how your breasts feel as your milk comes in.

For more information on recovery after birth,
visit **raisingchildren.net.au/pregnancy/labour-birth/recovery-after-birth**

Your emotional and mental health is just as important as your physical health. Becoming a parent is a huge life change. It's normal to feel overwhelmed, emotional, or unsure sometimes.

Depression and anxiety are common after having a baby. About 1 in 5 mothers and 1 in 10 dads experience this in Australia.

Some signs are:

- losing interest in things you used to enjoy
- avoiding everyday activities
- losing interest in social connections
- feeling very worried or nervous most days.

When these feelings start to affect your daily life, it's important to get help. You're not alone, and support is available.

Postpartum psychosis is rare but very serious. It usually starts soon after childbirth and can get worse very quickly. It needs urgent care and treatment. Signs may include very fast mood changes, mania, thought disturbances and losing touch with reality.

Partners can also experience depression or anxiety especially during times of high stress, like financial pressure. Many don't realise their mental health can be affected after a baby is born, so they might not ask for help. A partner's mental health can affect the mother's health and the baby's wellbeing too. That's why it's important for both parents to get support if they're not feeling okay.

More information
health.nsw.gov.au/mentalhealth/services/parents/dads/pages/signs

What happens after you've had your baby

After birth a nurse or midwife will ask you some questions about your health and wellbeing. This check-in is a normal part of postnatal care.

They may ask about:

- how you're feeling
- your mental health history
- how things are going at home
- whether you have support.

It's okay to talk openly. They're here to help you and your baby.

Some parents don't need a lot of follow-up. Others may be offered more check-ins or referrals to support services. The type of support depends on what's happening for you, how serious the issue is, and what your baby needs.

Help is available

Reach out if things feel hard. There is support for you and your family.
You can speak to your child and family health nurse or your doctor anytime.

They can support you with:

- recovering from birth, such as your physical recovery
- questions or a debrief about your birth experience
- your or your partner's mental health and emotional wellbeing
- your relationship with your partner and family
- bonding with your baby
- feeding, settling and sleep
- managing advice from others
- any other issue or question you may have for yourself, your baby or family.

You can also reach out to:

- **PANDA** on 1300 726 306 or visit **panda.org.au**
- **COPE** for information and tools at **cope.org.au**

Babies need their parents to help them feel safe, loved, and cared for. When you're supported, it helps your baby too. Reaching out is a sign of strength, and the first step to feeling better.

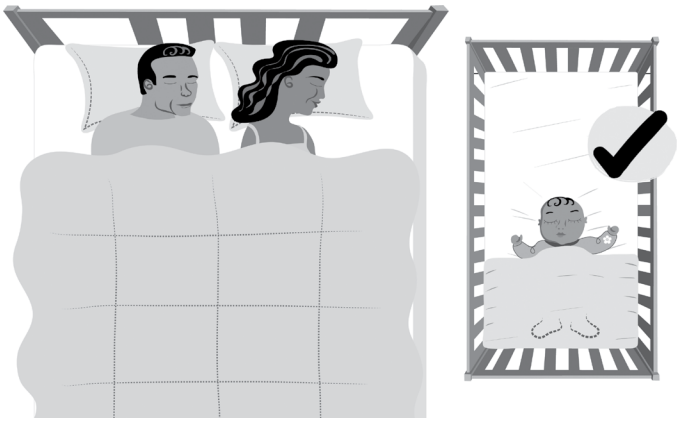
Safe sleeping recommendations

Tragically some babies die unexpectedly and for no obvious reason in their sleep. You can reduce the risk for your baby by following these safe sleeping recommendations every time you place your baby to sleep.

- Place your baby on their back to sleep
- Your baby should have their own cot that meets the Australian safety standard and has a firm, well fitted mattress
- Sleep your baby in your bedroom at night for the first six to 12 months of life
- Do not let your baby sleep on the couch or an armchair, especially with another person
- Make sure your baby's head and face cannot become covered while sleeping to prevent suffocation or overheating. Tuck in sheets and blankets or use a safe infant sleeping bag. Do not use a doona, cot bumper, mattress padding, sheep skin or leave soft toys in the cot
- Dress your baby to be comfortably warm but not hot, to avoid overheating
- Breastfeed your baby for at least the first six months where possible
- Don't smoke during pregnancy or after your child is born and don't allow anyone to smoke near your baby
- Make sure anyone who looks after your baby understands these safe sleeping recommendations.

The recommended safe sleeping practices are adapted from the Raising Children Network.

More information **health.nsw.gov.au/safesleep**



Safety

Many childhood injuries are preventable. For specific safety advice for your child, speak to your doctor or child and family health nurse.

Important numbers

- Call healthdirect on 1800 022 222 for free instant health advice anytime, anywhere.
- Call Triple Zero (000) if it's a life-threatening emergency
- Call NSW Poisons Information Helpline on 13 11 26 if you think your child has been poisoned.

Learn infant CPR. It's free and online, so you can access it any time **www.schn.health.nsw.gov.au/cpr-training-modules**

For safety information **www.schn.health.nsw.gov.au/safety** and **kidsafensw.org**

Never shake a baby

Even though parents may be sleep-deprived, exhausted and frustrated when they can't settle a crying baby, shaking them is never OK. Shaking a baby can easily cause short and long-term health complications.

More information on managing a crying baby **www.schn.health.nsw.gov.au/kids-health-hub/mental-health/parent-and-carer-wellbeing/crying-babies**

Carriers, slings and pouches

Before using a baby carrier, sling or pouch, you should be aware some babies at greater risk of suffocation, especially those who are:

- born premature
- of low birth weight
- unwell
- under four months old.

Talk to your child and family health nurse, doctor or paediatrician before using a baby carrier, sling or pouch.

For more information on their safe use, visit:

- **raisingchildren.net.au/newborns/safety/equipment-furniture/baby-carrier-sling-safety**
- **productsafety.gov.au/baby-carriers**

Car Safety

Car seats

In NSW children under 7-years old must use an approved suitable child restraint when travelling in a vehicle. Always use a properly fitted, seat based on your baby's height and weight.

- Children up to the age of 6 months must use a rear-facing child car seat.
- Children aged between 6 months and 4 years must use either a rear-facing child car seat or a forward-facing child car seat with an inbuilt harness.
- Children aged between 4 and 7 years must use a forward-facing child car seat with an inbuilt harness or an approved booster seat.

More information **nsw.gov.au/driving-boating-and-transport/roads-safety-and-rules/safe-driving/child-seats**

Fatal distraction: when children are accidentally left in cars

Fatal distraction is a short-term memory lapse that can lead to accidentally leaving a child in the car. This can happen if you're tired, stressed, distracted or have a change in your routine.

Things you can do to help yourself remember your child and keep them safe:

- Have a safe routine e.g. place items (phone, wallet, bag) in the back seat next to your child, or child items in the front seat, use child-check apps, and get in the habit of always checking the back seat
- Ask your child's carer or child care service to call you if your child hasn't arrived
- Regularly remind yourself to reduce distractions when you can, allow plenty of time and don't rush.

For more information **raisingchildren.net.au/babies/safety/car-safety/accidentally-leaving-children-in-cars**

Children in cars

Never leave your child unattended in a car, even for a short time. Temperatures can rise quickly, 20-30°C higher than outside, leading to heatstroke, dehydration, or death. Always take your child with you when you leave the car.

More information **www.schn.health.nsw.gov.au/kids-health-hub/safety-and-injury-prevention/cars/children-hot-cars**

Safety around cars

- Always hold your child's hand near cars or when crossing roads
- Encourage your child to use the kerbside rear passenger door for safety
- Check traffic before entering or exiting the car.

Driveway and car park safety:

- Always check around the car before moving it
- Do not rely on sensor cameras in the car when children are around
- Never let children play near vehicles.

More information **www.schn.health.nsw.gov.au/kids-health-hub/child-safety-and-injury-prevention/child-safety-around-cars**

Water safety

Drowning is one of the leading causes of preventable death for children under 5 years old. It can happen quickly and quietly, even in a few centimetres of water.

- Always stay within arm's reach of your child during bath time, in pools, around buckets with water and water-play tables
- Never leave your child alone in the bath or around water, not even for a minute
- Make sure pools have secure fencing and self-latching gates
- Empty buckets and paddling pools after use
- Children must always be supervised around water, by an adult who is a competent swimmer
- Teach water rules about only going near water with an adult who can swim.

More information:

- **schn.health.nsw.gov.au/kids-health-hub/child-safety-and-injury-prevention/child-water-safety**
- **raisingchildren.net.au/watersafety**
- **kidsafensw.org/safety/home-community/water-safety**
- **swimmingpoolregister.nsw.gov.au**

Burns and scalds

Burns (dry heat) and scalds (wet heat) can happen quickly and cause severe injuries in young children in seconds. Safety tips:

- Don't drink hot food and drinks while holding a child
- Turn pot handles away from the edge of the stove
- Set water heaters to max 50°C
- Check bath water temperature with your wrist or bath thermometer (37–38°C)
- Use safety gates to keep your child away from risky areas like the kitchen or heaters.

More information **www.schn.health.nsw.gov.au/kids-health-hub/child-safety-and-injury-prevention/burns-and-fire-safety-kids**

Poisons and medications

Be aware of any common poisons around the house, like cleaning products, nicotine products and medications. Store these products in locked or out of reach cupboards, clearly labelled.

Keep any poisonous or sharp plants out of reach. If you think your child has been poisoned, call 13 11 26.

More information **poisonsinfo.nsw.gov.au**

Electric safety and batteries

Cover unused power points and always keep electric cords, chargers, and appliances out of reach.

Button batteries are in many household items and can cause serious injury and even death if swallowed.

Falling

Use safety harnesses and buckles in highchairs and prams.

Never leave your baby alone on any raised surface like a change table, bed or couch, even for a minute.

Always keep furniture and climbable objects away from windows and balconies. Don't rely on flyscreens alone to protect your child from a fall.

Choking and strangulation

Supervise your child while bottle feeding and eating solid foods. Keep small items and toys out of reach, especially if they contain button batteries.

Make sure curtain cords are out of reach and secured. Be cautious of toys or clothing with strings or ribbon. They can cause serious injury and even death if they become wrapped around a child's neck.

Product safety

There are a lot of baby products available, and it can be hard to know what the safest products are for your baby. There are product guides that have information on how you can buy and use baby products safely.

More information **productsafety.gov.au/consumers/keep-baby-safe**

Sun protection

Your baby's skin is delicate. Use a brimmed hat, long sleeve, loose-fitting clothes, shade, and SPF50+ broad spectrum sunscreen when outdoors. Sunscreen is not recommended for babies under 6 months.

Pets

Always supervise children around pets. Never force children and animals to interact.

Use baby gates to create separate spaces for both your baby and pet.

More information **wearefamily.nsw.gov.au/**

Important safety issues to be aware of

For infants:

- rolling off a change table, bench or bed
- choking on a small item
- scalding caused by a hot drink being spilled over the child
- ingesting poison or an overdose of medication
- falling from a caregiver's arms.

For toddlers 12 months to 3 years:

- choking on unsuitable foods and small items
- falling out of a highchair, shopping trolley or pram or falling down stairs
- scalding caused by a child turning on the hot tap in the bath or pulling saucepans down from the stove
- ingesting poisons, medications and household detergents
- burns caused by heaters and fires
- being hit by vehicles in driveways
- drowning in baths, unfenced swimming pools and spas
- jumping off furniture and running into sharp objects
- falling from playground equipment
- running onto the road without looking
- falling from windows and balconies.

For children 3 to 5 years:

- falling from a bicycle, a scooter, playground equipment or in the home
- dog bites
- scald injuries
- falling from windows and balconies
- being hit by vehicles in driveways and roads
- drowning in baths, unfenced swimming pools and spas.

Child health and development checks

From the moment your baby is born, they are learning. Your child's brain grows faster in their first five years than at any other time.

Your child's early development is a journey with important milestones along the way. Health and development checks help track their development against these milestones for their age.

They look at how your child plays, learns, speaks, acts and moves. They also help find any issues early, to get them the support they need. It's easier to build the brain while it's still developing, than later in life.

Even if you think your child is developing well, you should take them for all their checks.

- ☐ 1 to 4 weeks
- ☐ 6 to 8 weeks
- ☐ 6 months
- ☐ 12 months
- ☐ 18 months
- ☐ 2 years
- ☐ 3 years
- ☐ 4 years

There are 8 checks they should get after they are born.

Every baby is different, even those born in the same family.
These checks help make sure your child is thriving in their own way.

They're also a chance to discuss other issues about your child's health and wellbeing.

You can get these checks done through:

- your local child and family health centre
- your family doctor.

You don't need a referral to access a centre.

To find one near you, visit
health.nsw.gov.au/child-family-health-services

Before the checks: Learn the Signs. Act Early.

You'll find checklists for you to complete from the 6 to 8 week check. These are called **Learn the Signs. Act Early.**

Take some time to answer these before each check. Try to answer as best as you can. Your answers give valuable insight into how your child is learning, developing, and growing, and when they might need extra support.

You know your child best. Don't wait.

Every child grows and develops in their own way.

Talk to your child and family health nurse or doctor if your baby:

- isn't reaching milestones
- has lost skills they had before
- you have other concerns.

You can do this even if it's not time for a regular check. Your health professional might use screening tests and other checks to help decide what action is best.

Screening tests and checks are never 100% accurate. Sometimes, they might miss a problem, show one that isn't there, or a problem might show up later. That's why it's important to keep track of your child's milestones and take them for all their checks.

Supporting your child's development

Your child's brain is built through everyday moments you spend together. Simple, loving interactions help them feel safe and lay down their foundations for learning.

For more ideas on how you can support your child's development:

- use the **Love, Talk, Sing, Read, Play** flipbook in your Baby Bundle **health.nsw.gov.au/kidsfamilies/MCFhealth/Pages/love-talk-sing-read-play.aspx**
- download the Bright Tomorrows app at **brighttomorrows.org.au**
- visit **raisingchildren.net.au.**

Childhood vaccinations

Give your child the best protection. Vaccinate on time.

Vaccines are free, safe, and work best when given on time according to the NSW Immunisation Schedule. Each vaccine is carefully timed to give your child the best protection as early as possible. Delaying vaccination could put your child at risk of catching a disease and becoming very sick.

More information **health.nsw.gov.au/vaccinate**

Why vaccination is important

- protects your child from serious preventable diseases
- protects your family and your community
- is needed for childcare and school enrolment
- helps with family assistance payments.

Vaccines protect children against hepatitis B, diphtheria, tetanus, whooping cough (pertussis), poliomyelitis, Haemophilus influenzae type b, rotavirus, pneumococcal disease, meningococcal B (Aboriginal children), influenza, measles, mumps, rubella, meningococcal ACWY, chicken pox, and human papillomavirus (HPV).

When to vaccinate

Babies and children should be vaccinated at:

- ☐ birth
- ☐ 6 weeks
- ☐ 4 months
- ☐ 6 months
- ☐ 12 months
- ☐ 18 months
- ☐ 4 years

Even with a runny nose or mild cold, vaccination can usually go ahead.
Ask your doctor or nurse if you're unsure.

Check the NSW Immunisation Schedule for your child's next vaccinations
health.nsw.gov.au/schedule

You can create a personalised vaccination schedule for your child at
health.nsw.gov.au/myschedule

Where to vaccinate

Vaccinations are available at:

- doctors (GPs)
- Aboriginal Medical Services
- some local councils and community health centres.

For help finding a service, call your local Public Health Unit on 1300 066 055.

Proof of vaccination

The Australian Immunisation Register (AIR) records your child's vaccinations. Children enrolled with Medicare are automatically included on the AIR.

servicesaustralia.gov.au/australian-immunisation-register

You will need vaccination records for childcare, preschool, and school enrolment. Access your child's records anytime through:

- MyGov website (Medicare account) **my.gov.au**
- AIR Enquiries Line on 1800 653 809

Vaccine safety

Children can safely get multiple vaccines in one visit, reducing extra appointments. Check with your doctor or nurse about vaccines that can be given together.

Side effects like swelling or redness at the injection site can sometimes happen. These reactions are usually mild and last for 1–2 days. Talk to your doctor or nurse if you are worried or your child has a fever over 39°C.

All vaccines in Australia are carefully tested to make sure they are safe and effective. A vaccine must pass clinical trials before it is approved by the Therapeutic Goods Administration (TGA). Even after approval, it's closely monitored for safety.

More information **ausvaxsafety.org.au/vaccine-safety-data/national-immunisation-program-schedule-vaccines**

For more information on childhood vaccination,
visit **health.nsw.gov.au/vaccinate and skai.org.au/childhood**

Influenza (flu)

Influenza can cause serious illness in children under 5 years, and especially those under 2 years. It can spread quickly when large numbers of people are in close contact. For example, at school, childcare centres, and social gatherings.

Influenza vaccines for children are free as part of the National Immunisation Program (NIP) for:

- children aged 6 months to less than 5 years of age
- Aboriginal and Torres Strait Islander people from 6 months of age
- children aged 5 years and over with medical risk factors such as severe asthma, lung or heart disease, low immunity or diabetes.

Children under 9 need 2 doses 4 weeks apart if receiving the vaccine for the first time.

Vaccinations are available from:

- your doctor
- Aboriginal Medical Service
- community pharmacies for children aged 2 years and over.

More information at **health.nsw.gov.au/flu**

Feeding your baby

Breastfeeding

Breastmilk helps babies grow strong and healthy by giving them important nutrients and protecting them from sickness.

Breastfeeding is best for you and your baby, but it isn't always easy. It takes time and practise. It can take about 6 weeks for you and your baby to learn the skill of breastfeeding. You are doing an important job and you're not alone. Breastfeeding support and information are available. You can call the Australian Breastfeeding Association (ABA) Helpline for free, 24 hours a day on **1800 686 268**. You can also download the Mum2Mum app or visit the ABA website at **breastfeeding.asn.au**.

Child and family health centres also offer free breastfeeding support services. Find your local centre at **health.nsw.gov.au/child-family-health-services**

For information on breastfeeding visit **health.nsw.gov.au/breastfeeding** and **raisingchildren.net.au/newborns/breastfeeding-bottle-feeding**

Starting family foods

Most babies are ready to start eating solid food at around 6 months. This helps them get the nutrients they need to grow and develop. Exploring, holding and chewing food can help babies to enjoy eating and to develop social skills. It is an important part of their development.

Some tips when starting solids:

- Breastmilk or formula is still your baby's main source of nutrition, so keep offering it regularly
- Start by offering 1 to 2 teaspoons of food a day
- Make sure the foods you offer are soft and easy to eat. Try mashed, grated or soft finger foods from the 5 food groups.
  Learn more **eatforhealth.gov.au/food-essentials/five-food-groups**
- Go for iron-rich options like lentils and meat, as well as vegetables and fruit
- Give your baby soft foods to eat with a spoon, soft pieces they can hold, or both. This helps them learn to feed themselves
- Babies usually need a few tries before accepting a new taste or texture
- Let them discover at their own pace, embrace the mess and be patient
- Watch for signs they've had enough, like turning away, closing their mouth, or pushing food away
- Always stay with your child when they're eating and watch for any signs of choking
- Gagging and spitting out food is normal and common in babies, especially when they are trying a new food, taste or texture
- Offer your baby cooled boiled water in a cup from 6 months old.

More info:

- **raisingchildren.net.au/solids**
- **healthyliving.nsw.gov.au/food/starting-family-foods**

0 to 12 months - Healthy Habits for the best start in life

Feeding habits to support healthy growth and development

Breastmilk is all a baby needs for the first 6 months.

If not breastfeeding, use infant formula.

Start solids around 6 months

Look for signs your baby is ready, like reaching out for food or opening their mouth when you offer food on a spoon. Never force a baby to open their mouth. Learn to read your baby's signs of hunger and fullness. Keep giving them breastmilk or infant formula.

Offer a variety of foods from the 5 food groups

Offer your baby foods with different colours and textures. Start with iron-rich foods like meat, fish, eggs, legumes and beans, leafy green vegetables and cereals with added iron. Babies don't need added salt or sugar.

Offer drinks from a cup from 6 months

Offer expressed breastmilk, infant formula or boiled, cooled water from an open cup. It's good for babies to stop using bottles by 12 months.

Set up mealtime routines

Offering meals around the same time each day helps set up a routine. Let your child choose if they want to eat, how much, and which foods they want from the ones offered. Eating together can help build healthy eating habits.

Brush teeth as soon as they appear

Brush twice a day with water and a soft infant toothbrush.

Movement and sleep for a healthy brain and body

Babies need plenty of sleep each day. Aim for:

- 0 to 3 months: 14 to 17 hours including naps.
- 4 to 11 months: 12 to 16 hours including naps.

Your baby's mood and wellbeing can be a good way to tell if they are getting enough sleep.

Encourage tummy time and supervised interactive floor play each day

Start tummy time soon after birth. Aim for 1 to 2 minutes a day in the first few weeks. Build up to 30 minutes or more throughout the day.

Playing helps babies move, learn and communicate. Try supervised interactive floor play, rolling and crawling. Try to avoid keeping them still in a car seat, high chair or pram for more than an hour at a time.

No screen time is best for babies

Reading, singing, puzzles or stories are fun ways to help your baby learn and develop.

1 to 2 years – Healthy habits for growing minds and bodies

Healthy eating gives your child energy to play, grow and learn

Offer a variety of foods from the 5 food groups

Include foods with different colours and textures. With new food, you might have to offer it many times before they try it.

Young children don't need added sugar or salt.

Help your child learn to feed themselves with different types of family foods

Eating and cooking together encourages children to try new foods and develops social skills.

Set up mealtime routines

Let your child choose if they want to eat, how much, and which foods they want from the ones offered. Eating together can help children learn healthy eating habits.

You can continue to breastfeed for 12 months or more

If you're not breastfeeding, offer your child full fat cow's milk. After 12 months, they don't need infant or toddler formula, bottles or dummies.

Drink water and milk from an open cup

Water and milk are best for children's health and teeth.

Aim to stop using bottles by 12 months.

Brush teeth in the morning and before bed

This helps kids keep healthy teeth and gums to smile, eat, talk and socialise.

Movement and sleep for a healthy brain and body

Young children need plenty of sleep to grow, learn and develop

Aim for 11 to 14 hours of good quality sleep (including naps) each day with a regular bedtime routine.

Aim to be active for at least 3 hours each day, including energetic play spread throughout the day

Movement and play are good for mood and sleep. They also help with skills like balance and coordination. The more active play, the better. Try activities that get the family moving, like dancing or active games. Try to avoid keeping them still in a car seat, high seat or pram for more than an hour at a time, or sitting for extended periods.

Screen time is not recommended for young children under 2 years of age

Reading, singing, puzzles or stories are fun ways to help your child learn and develop.

Find healthy recipes at **healthyliving.nsw.gov.au/food/healthy-recipes**

3 to 17 years – Healthy habits for thriving kids

Healthy eating gives your child energy to play, grow and learn

Start each day with a healthy breakfast

This helps your child to focus. Healthy options include porridge, low-sugar wholegrain cereal, eggs, wholegrain toast, rice, veggies, fruit and yoghurt.

Offer a variety of foods from the 5 food groups

To support good health, include plenty of vegetables, fruit, cereals and grain foods, dairy or plant-based alternatives with added calcium, and meat, chicken, fish, seafood, eggs, beans/legumes, nuts and seeds.

Offer healthy snacks

Healthy snacks can give kids energy between meals. Try fruit, vegetables, nuts, yoghurt or wholegrain bread/crackers and cheese.

Drink plenty of water each day

Water is the best drink for growing minds and bodies. It also helps keep teeth and gums healthy.

Eat together when you can

Sharing and cooking meals together encourages kids to try different healthy foods and learn new skills. It's also a great way to spend time as a family.

Brush teeth in the morning and before bed

Healthy teeth help us smile, speak, eat and socialise. Avoiding foods and drinks high in sugar also helps keep teeth healthy.

Movement and sleep help with health, mood and focus

Be active each day

3 to 5 years: at least 3 hours being active in different ways. This should include at least 1 hour of energetic play.

6 to 17 years: at least 1 hour of moderate to vigorous activity that involves doing things that make the heart beat faster and build strength. Plus several hours of light physical activity such as walking to school.

Balance sedentary recreational screen time and sitting with other activities

Break up sedentary recreational screen time and sitting with activities that help support development. Limit screen time to:

- 3 to 5 years: no more than 1 hour a day
- 6 to 17 years: no more than 2 hours a day (not counting educational use).

Follow a bedtime routine to help kids get enough uninterrupted sleep each day. Aim for:

- 3 to 5 years: 10 to 13 hours (including naps)
- 5 to 13 years: 9 to 11 hours
- 14 to 17 years: 8 to 10 hours.

Healthy Eating Active Living

Getting healthy starts with small steps. NSW Health offers a range of free healthy eating and active living programs and information.

You can find these on the Healthy Eating Active Living website. Practical tools and tips include:

- low-cost family-friendly recipes and lunchbox ideas
- support to get active as a family
- tips for healthy screen use
- access to free programs to support healthy living for the whole family.

Programs are available for parents and carers of young children as well as adults, Aboriginal and Torres Strait Islander people, pregnant women and older people.

Find free support for the whole family at
healthyliving.nsw.gov.au/programs-and-tools-2

Visit the Healthy Eating Active Living website at **healthyliving.nsw.gov.au**.

The Get Healthy Service

The Get Healthy Service offers free, evidence-based telephone and online health coaching to help people make healthy lifestyle changes. The Service is available to anyone in NSW over 16 years.

You can choose regular coaching calls at a time that suits you, with access to on demand resources and online chat.

Support is also available through Aboriginal health coaches, bi-lingual coaches, interpreters, and the National Relay Service.

Women can access Get Healthy in Pregnancy for tailored coaching in pregnancy and beyond.

Speak to your doctor for a referral, join online at **gethealthynsw.com.au** or by calling 1300 806 258.

Go4Fun Online

Go4Fun Online is a free online healthy lifestyle program for NSW families with primary school-aged kids. Friendly health coaches are trained to support families every step of the way, including:

- Free weekly health coaching calls
- Support to set family health goals
- Ideas to get active together
- Low-cost healthy recipes

Visit **go4funonline.com.au** or call 1800 780 900

Oral health

Please answer the dental questions on page 19.
Your family's dental history helps guide the best care for your baby's teeth.

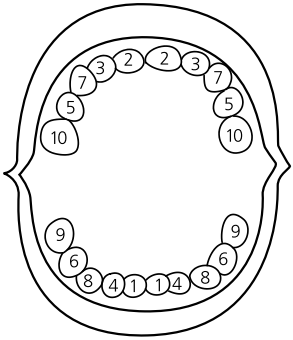
Your child's teeth – keeping them healthy

Having healthy teeth is important for your child's health and speech development.

Most dental problems can be avoided. Finding and treating any issues early can help stop major damage to teeth and avoid expensive dental treatment.

When do babies' teeth come through?

Usual eruption order	Name of tooth	Approximate age at eruption
1,2,3,4	Incisors	6–12 mths
5,6	Baby first molars	12–20+ mths
7,8	Canines	18–24 mths
9,10	Baby second molars	24–30 mths



Teething can happen a little earlier or later — don't worry if it does.

Use the space next to each tooth to note when they appear:

6-12 months: Incisors (front teeth)

12-20+ months: First molars (back teeth)

18-24 months: Canines (sharp teeth)

24-30 months: Second molars (back teeth)

Bottles

If your child uses bottles:

- only give breastmilk or formula in bottles. Sweet, sugary liquids can cause tooth decay
- avoid putting them to bed with a bottle. This can cause tooth decay
- offer a cup from 6 months. Aim to stop bottles by 12 months
- offer small amounts of boiled, cooled water from 6 months.

Teething

- Teething can be painful. Offer a teething ring or cool, wet washcloth
- Concerned? Talk to your nurse or doctor about pain, fever or changes in mood.

Toothbrushing tips

- Keep your own teeth and gums clean. Germs from your mouth can pass to your baby's mouth
- Clean your child's teeth every morning and night
- Your child can use a small amount of low-fluoride children's toothpaste from 18 months. Your child's dental practitioner or other health professional can advise if they can start earlier
- Children need an adult's help with brushing their teeth until they are 8 years old. They can do some of the toothbrushing once they are 3 years old. An adult should apply their toothpaste until they are 6 years
- Look for white or brown spots on teeth. Speak to a dental practitioner as soon as possible if they won't brush off
- Make sure they get a dental check by their first birthday by a dental practitioner.

Find more oral health information at **health.nsw.gov.au/firstteeth**

Dental services for children

Some children may be eligible for the Child Dental Benefits Schedule (CDBS) which helps cover the cost of general dental care at private or public dentists in NSW.

More information **health.nsw.gov.au/cdbs**

All NSW children under 18 years with a Medicare card can get free dental care through NSW Public Dental Services. For children to receive care at a NSW public dental clinic, parents will need to sign a CDBS Bulk Billing Patient Consent Form to allow for dental care provided to be bulk billed. There are no out-of-pocket costs for children receiving public dental care in NSW.

Find out more by calling 1800 679 336 or visiting **health.nsw.gov.au/oralhealth/Pages/info-patients**.

Some Aboriginal Community Controlled Health Organisations (ACCHO) provide dental care for their patients. Each ACCHO may have its own eligibility criteria and appointment processes. More information **ahmrc.org.au**

To find a private dentist near you, visit **ada.org.au**.

Domestic and family violence

Domestic and family violence is any behaviour in an intimate, family or domestic relationship that is violent, threatening, coercive or controlling, or makes someone afraid for their safety or wellbeing.

This includes relationships with:

- current or former intimate partners
- people who are related through blood, marriage or de facto partnerships
- adoption and fostering relationships
- sibling and extended family
- kinship relationships
- relationships with carers or between people who live together.

Domestic violence can affect anyone in the community, no matter their income, status, sex, gender, age, race or culture.

Evidence shows that most domestic violence is perpetrated by men against women. During pregnancy and early motherhood, women are also more likely to experience violence for the first time or for violence that is already happening to get worse.

Domestic and family violence can be a single act or repeated behaviours but usually is as a pattern of controlling or coercive behaviour. Examples:

- **Physical abuse:** any kind of physical violence, such as punching, kicking, slapping and strangulation or choking (which may also occur as a part of sexual abuse).
- **Sexual abuse:** any form of sexual assault, threatening sexual violence, recording sexual activity without consent, forcing a person to view sexual imagery.
- **Reproductive violence:** Restricting access to contraception, refusing to use contraception, restricting access to sexual health care, forcing or coercing a person to have a pregnancy termination or to continue with a pregnancy.
- **Verbal abuse:** intimidation, verbal attacks, threats, insults, name-calling, yelling, denigration or humiliation.
- **Psychological or emotional abuse:** blaming or ignoring, treating the person as inferior, questioning their sense of reality (gaslighting), emotional blackmail, threatening suicide, self-harm as part of a pattern of controlling behaviour.
- **Economic abuse:** controlling finances, denying or restricting access to finances or financial decisions, limiting ability to earn money.
- **Stalking:** harassment or unwanted continued contact or actions, including using electronic communication or social media.
- **Social abuse:** restricting access to family, friends and social groups or networks, harming their relationships, their reputation, restricting or preventing someone from leaving the home, insisting on knowing a person's movements and accessing their phone, mail and social media.
- **Spiritual or cultural abuse:** any attempt to exert power and control over someone using their religion, faith, or beliefs, or preventing people from making or keeping connections with faith or culture.

Domestic and family violence has immediate and long-term effects on your physical and mental health. It also affects the physical and mental health and development of children in the home, including unborn babies.

If you are experiencing domestic and family violence, you are not alone, and it is not your fault.

Domestic and family violence is never okay, and the perpetrator is the only one responsible for the violence.

You have a right to be safe and supported, and there is help available. You can seek free and confidential support 24/7 from:

- **NSW Domestic Violence Line: 1800 65 64 63**
- **1800RESPECT: 1800 737 732**
- **Kids Helpline: 1800 55 1800.**

More information at **health.nsw.gov.au/domestic-violence**

Smoking and Vaping

Quitting smoking or vaping is one of the best things you can do for your baby's health, and yours.

How smoking and vaping cause harm:

- smoking tobacco (including cigarettes, shisha, waterpipe) can cause serious health problems like lung and heart disease, osteoporosis and many cancers.
- vapes can contain over 200 chemicals. Some of these can cause cancer, heart disease and lung damage.
- if your child is exposed to cigarette smoke and vape aerosol their risk of lung infections, asthma and Sudden Unexplained Death in Infancy (SUDI) is increased.
- leftover nicotine and other chemicals from cigarette smoke and vape aerosol can stick to surfaces like clothes, walls, carpets, curtains, furniture and toys. These chemicals can be absorbed through the skin.

To reduce the harm of smoking and vaping for your child:

- don't smoke in the house or car. Keep the area around your child free from smoke and vape aerosol.
- after smoking or vaping:
  - change your clothes
  - brush your teeth
  - wash your hands, and
  - if possible, shower and wash your hair.
  - ask others who spend time with your child to do the same.

More information **raisingchildren.net.au/babies/health-daily-care/health-concerns/second-hand-smoke**

Breastfeeding while smoking or vaping

It's best if you don't smoke at all while breastfeeding, to protect your baby's health. But the benefits of breastfeeding outweigh the risks related with smoking and vaping.

To reduce your baby's exposure to smoke or vape aerosol, try not to smoke or vape for at least one hour before feeding them.

Talk to your child and family health nurse or Aboriginal health professional for advice.

More information
breastfeeding.asn.au/resources/breastfeeding-and-smoking-or-vaping

Important safety warning about vape liquid

Always keep vapes locked up and out of reach of children. Vape liquid is poisonous to children. Inhaling, swallowing or spilling even a small amount can cause nicotine poisoning and even death.

If you think a child may have been exposed to the contents of a vape, or has inhaled, swallowed or spilled the liquid in vapes on their skin, call the Poisons Information Helpline on **13 11 26**.

If they are not breathing, immediately call **000** for an ambulance.

Support is available to quit smoking and vaping

Counselling and nicotine replacement therapy (NRT) have been shown to help with cravings and help you stop smoking and vaping.

For support:

- talk to your child and family health nurse, doctor or Aboriginal health professional
- call Quitline on **13 78 48**. Support is available in many languages, and you can access Aboriginal counsellors
- visit **icanquit.com.au**
- download the PAVE app for help with quitting vaping.

Early childhood education and care

Most of your child's brain structure develops before they turn 5 years, making the early years an important time for early learning.

Quality early childhood education and care can help children become more independent, make friends, support their development, and build learning skills. It also helps them get ready for school.

Choosing an early childhood education and care service that feels right for your family can take time and some services have waitlists, so it's a good idea to explore your options early. Even if you're not planning to use early childhood education and care service right now, it can help to know your options for the future.

Going to preschool for at least 15 hours a week (600 hours a year) in the year before school helps children do better at school. Starting 2 years before school can be even better. Research shows that children who attend quality preschool programs are more likely to start school with the social, cognitive and emotional skills they need to engage in learning. This also helps them later in life too, in education, employment and social interactions.

To learn more or find a service near you,
visit **education.nsw.gov.au/choosing-a-service**

Translated resources **edu.nsw.link/translated-resources**

Children with disabilities or additional needs

Children learn and thrive through play. Early childhood education and care services offer play-based learning for all. These inclusive communities make sure every child can participate, with funding available for children who need extra support.

To find out more, visit **edu.nsw.link/starting-ECEC-with-additional-needs**

NSW Early Learning Commission

The NSW Early Learning Commission regulates, monitors and supports early childhood education and care services. Services are assessed and rated under the National Quality Framework and must display their quality rating certificate at their service.

If you have concerns about a service, speak to them directly. If the service doesn't address your concern, or you feel it's inappropriate to raise it with them, you can contact the regulatory authority directly at **information@earlylearningcommission.nsw.gov.au** or **1800 619 113**. This includes complaints about neglect, physical, sexual or emotional harm or abuse.

More information can be found at **edu.nsw.link/feedback-and-complaints**

Useful websites

Raising Children Network

The Raising Children Network (**raisingchildren.net.au** and its social media channels) provides free, reliable, accessible information to help families grow and thrive together. It's supported by the Australian Government, reviewed by experts and is non-commercial. Full of easy-to-understand articles, videos and resources, the Raising Children Network is the complete Australian resource for expectant parents, and those who are parenting newborns to teens. **raisingchildren.net.au**

NSW Health website

The NSW Health website has helpful information for parents and carers of children from birth to 5 years. It includes advice on child health, development milestones, safety, feeding, and more. It also has information on useful helplines, programs, services, and resources. **health.nsw.gov.au/buildingbrains**

Kids Health Hub

Trusted, up-to-date, evidence-based guidance on childhood health, safety, development, and wellbeing; empowering parents and carers to support their children's best possible health outcomes. It also contains a range of downloadable resources and products. This information is brought to you by the Sydney Children's Hospitals Network. **www.schn.health.nsw.gov.au/kids-health-hub**

Brighter Beginnings Parent and Carer Information Hub

Filled with trusted information, tools and resources to support child development and give your child the best start in life and learning. It offers step-by-step guidance from pregnancy through to starting school (birth to 5 years), including tips on financial and parenting support. **nsw.gov.au/brighterbeginnings**

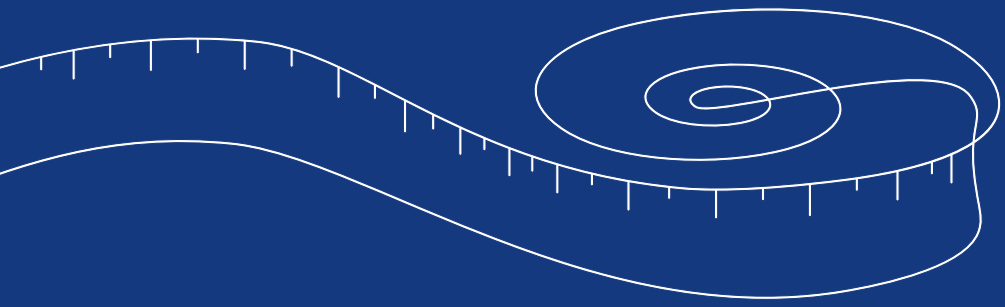
Bright Tomorrows

The Bright Tomorrows website and app offer practical tools and tips to support your child's health, development and learning. **brighttomorrows.org.au**

myGov

A simple and secure way to access government services in one place. You can link to Medicare, Centrelink and Child Support, and a range of other government services when you create a myGov account. Explore what help is available to support you through different stages of life. **www.my.gov.au**

Growth charts



List of charts

Girl weight for age 0-6 months 50
Girl weight for age 6 months – 2 years 51
Girl length for age 0-6 months 52
Girl length for age 6 months – 2 years 53
Girl head circumference for age 0-2 years 54
Girl weight for age 2-20 years 55
Girl stature for age 2-20 years 56
Girl Body Mass Index for age 2-18 years 57
Boy weight for age 0-6 months 58
Boy weight for age 6 months – 2 years 59
Boy length for age 0-6 months 60
Boy length for age 6 months – 2 years 61
Boy head circumference for age 0 – 2 years 62
Boy weight for age 2-20 years 63
Boy stature for age 2-20 years 64
Boy Body Mass Index for age 2-18 years 65

Tracking your child's growth

Your child's growth is an important part of their development.

Every child is different and grows in their own way. Health professionals track your child's growth by seeing which percentile line they follow. What matters is that your child's growth stays steady along their own lines.

Keeping track of their growth over two or more visits helps see if your child is growing at a healthy rate. Health professionals will use growth charts to record your child's measurements, such as their height, weight and head circumference.

They might use their own electronic records, or the charts in this Blue Book. You can also use the Blue Book charts.

Body Mass Index (BMI) charts for children aged 2 to 18

From age 2, BMI can be helpful for health professionals to understand if a child is growing at a healthy rate.

Your child and family nurse or doctor will take your child's height and weight to measure their BMI. The BMI growth charts show what 'percentile' line their measurements land on. Percentiles show a child's growth compared to other children of the same age and sex.

Please talk to your child and family health nurse or doctor for support if:

- your child is measuring below the 5th percentile or above the 85th percentile on the BMI-for-age chart
- you have concerns about your child's weight or growth.

Being a healthy weight for their age can support your child's health and wellbeing. Creating healthy habits like eating a variety of healthy food and keeping active can help children grow at a healthy rate.

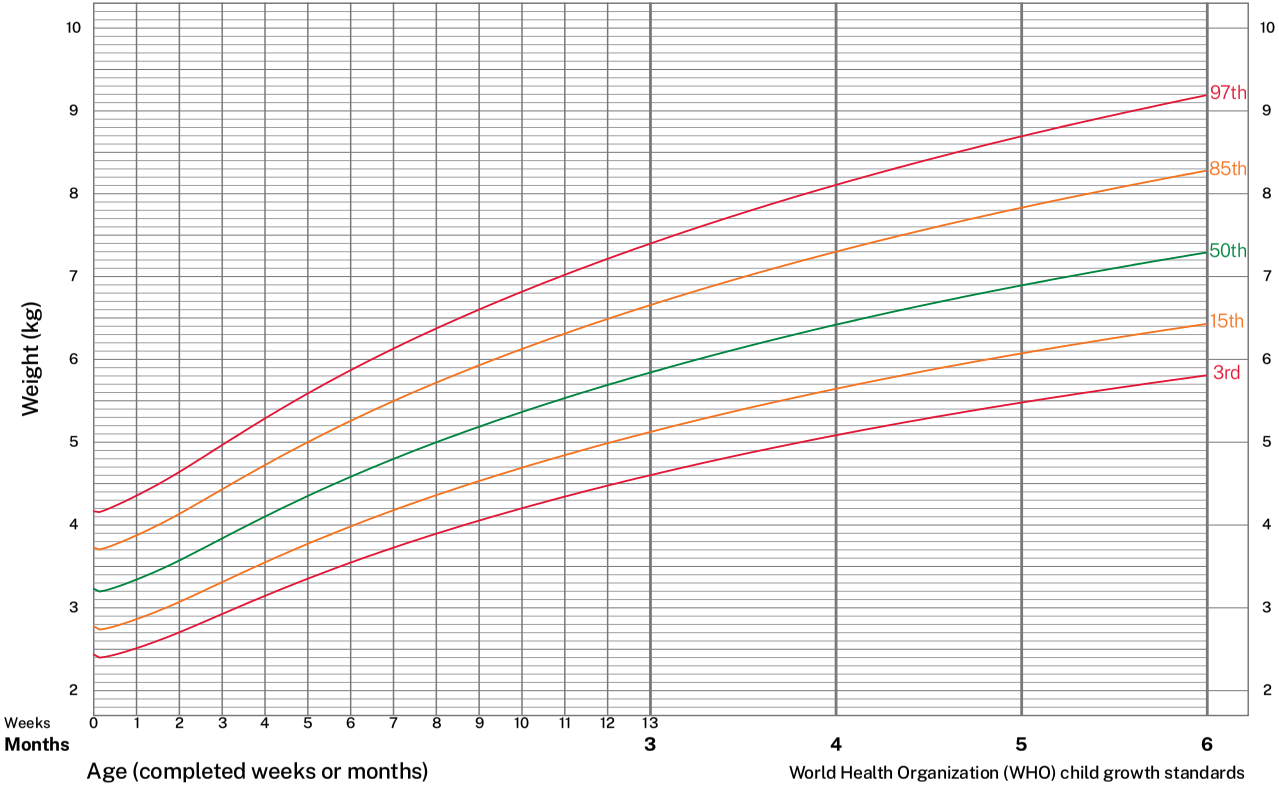
You'll find tips on healthy habits to support your child's growth and development on pages 37-40.

It's not always easy to tell if a child is a healthy weight. Growth is also linked to factors such as genetics, hormones, nutrition, physical activity and the environment we live in.

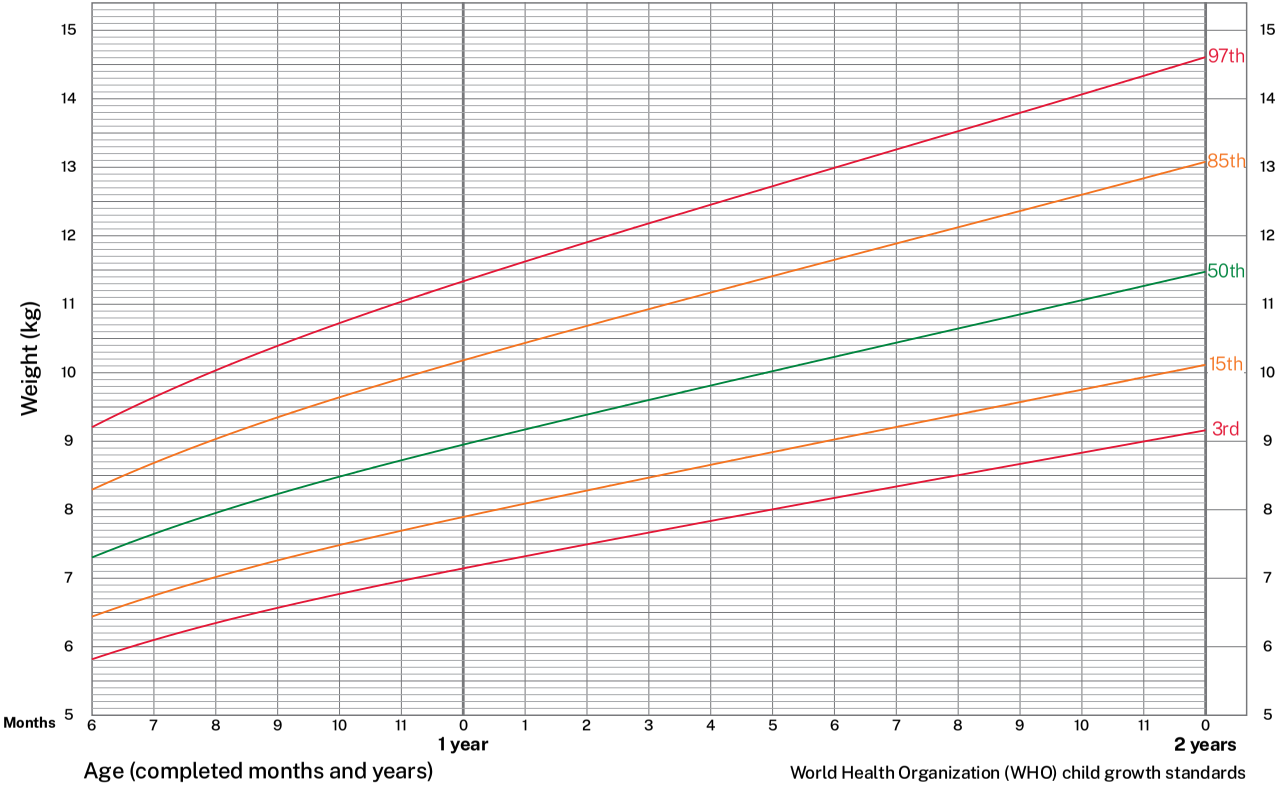
For more information about how growth charts work, visit **who.int/toolkits/child-growth-standards** and **cdc.gov/growthcharts/**

Source: World Health Organisation Child Growth Standards **who.int/tools/child-growth-standards/standards**

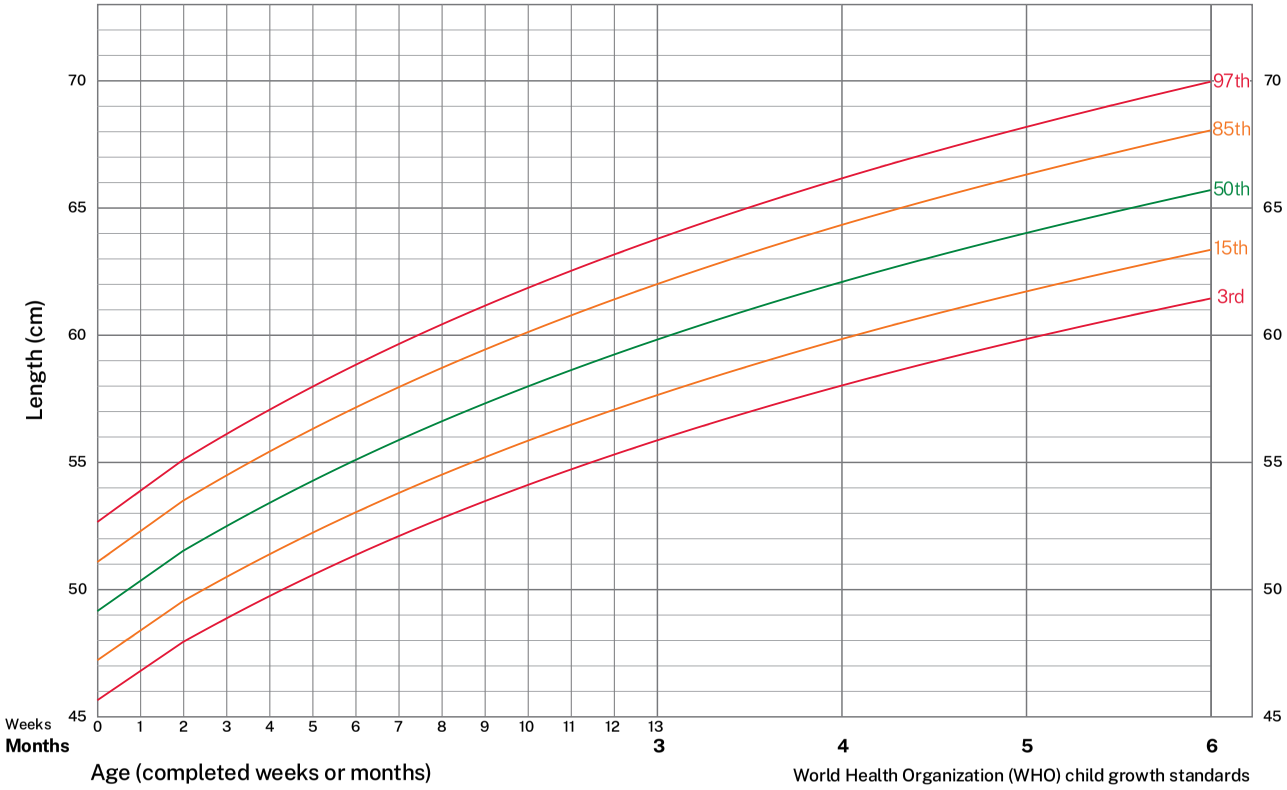
Weight-for-age percentiles
GIRLS birth to 6 months



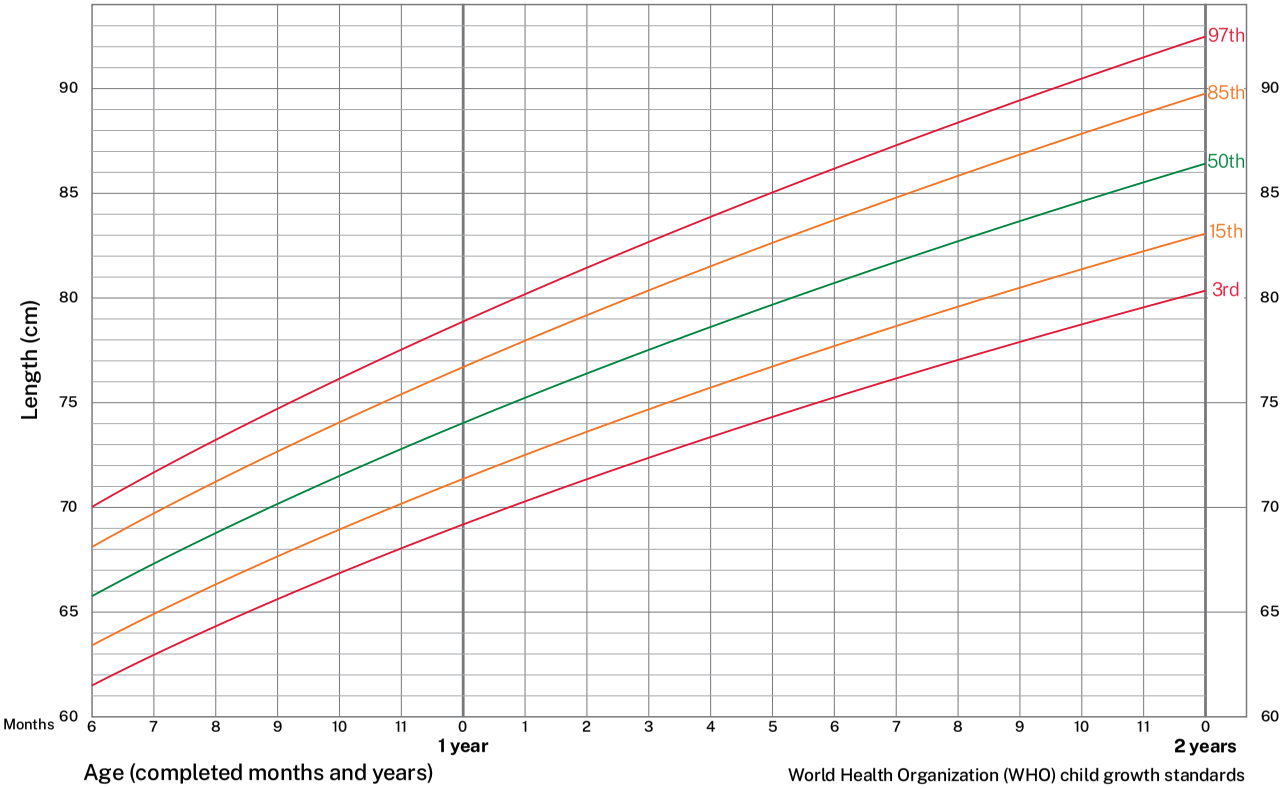
Weight-for-age percentiles
GIRLS 6 months to 2 years



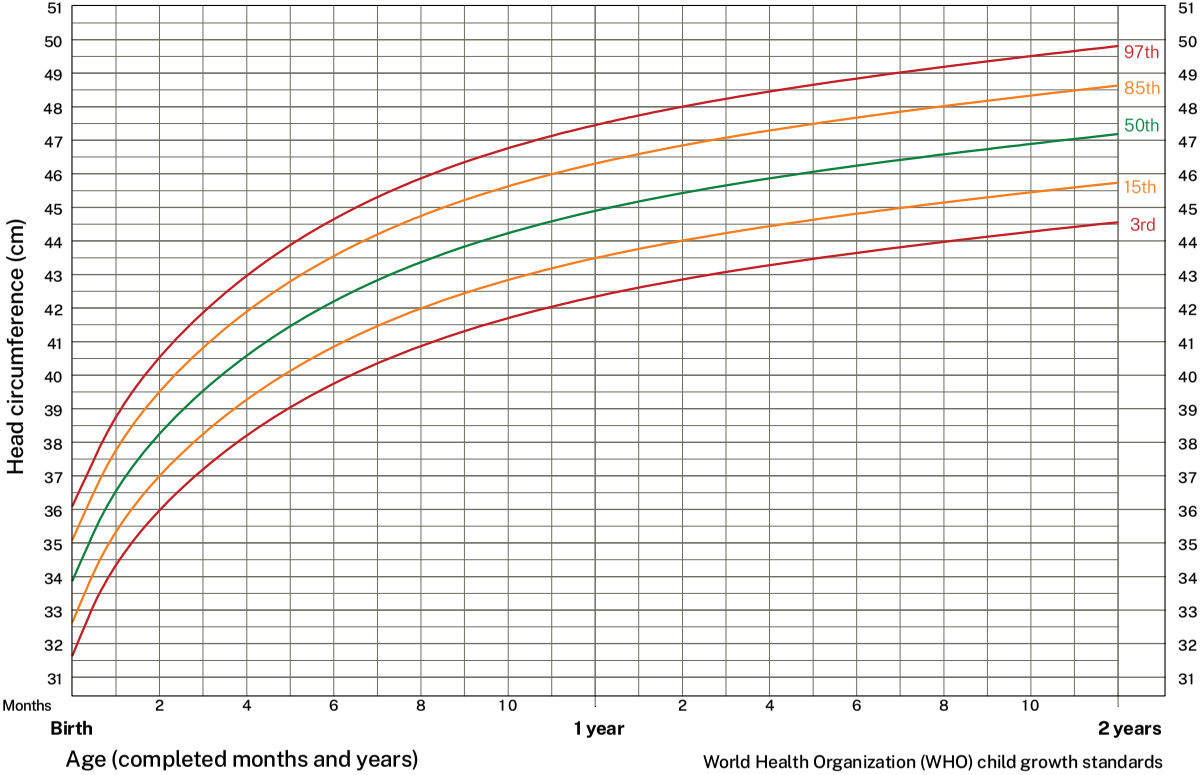
Length-for-age percentiles
GIRLS birth to 6 months



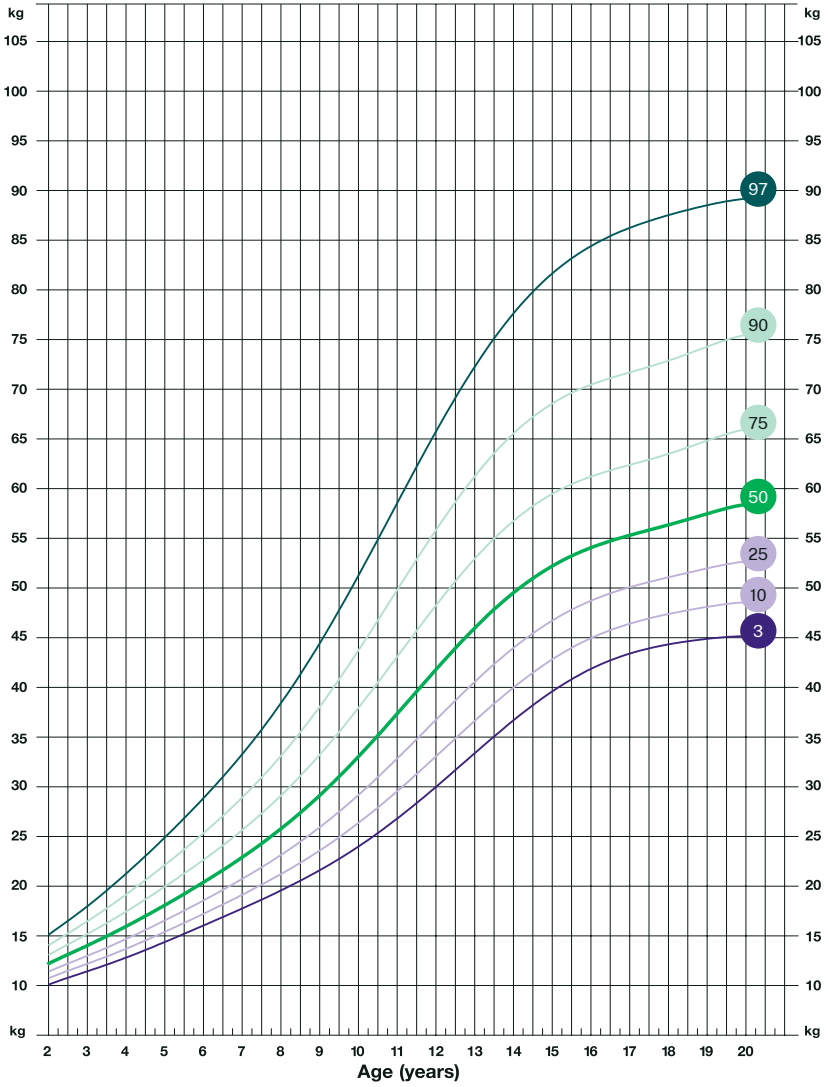
Length-for-age percentiles
GIRLS 6 months to 2 years



Head circumference-for-age percentiles
GIRLS birth to 2 years

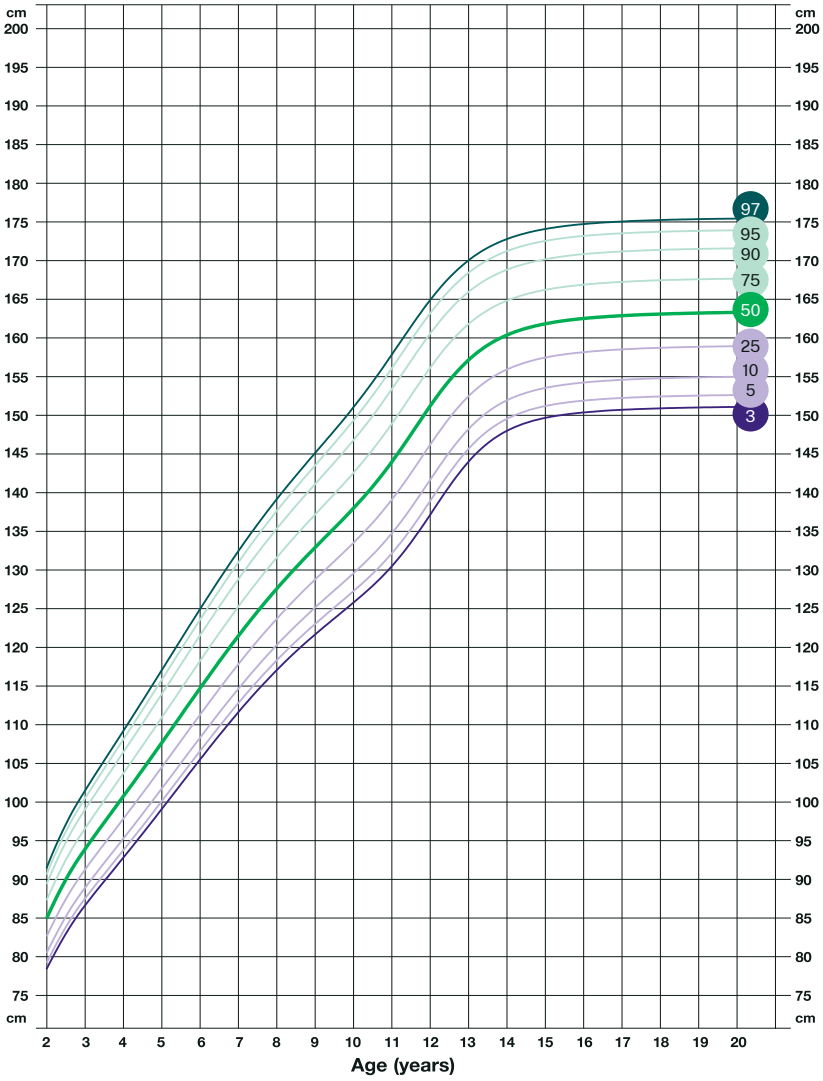


Weight-for-age percentiles
GIRLS 2 to 20 years



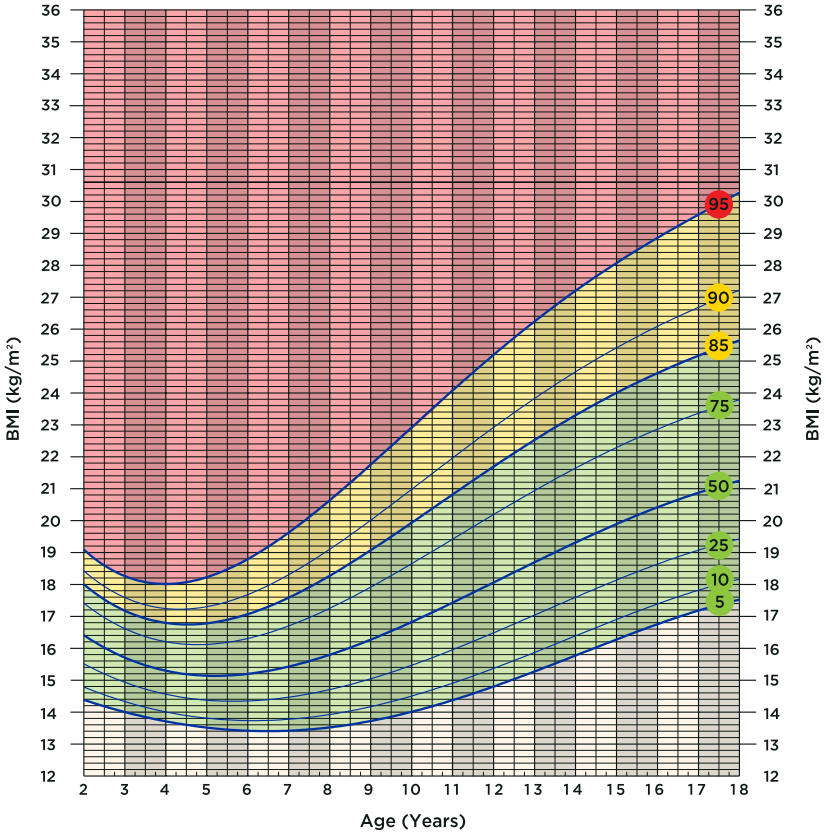
Source: Centers for Disease Control and Prevention (CDC) 2000 growth charts – United States published 30 May 2000. Developed by the National Center for Health Statistics in collaboration with the National Center for Chronic Disease Prevention and Health Promotion (2000).

Stature-for-age percentiles
GIRLS 2 to 20 years



Source: Centers for Disease Control and Prevention (CDC) 2000 growth charts – United States published 30 May 2000. Developed by the National Center for Health Statistics in collaboration with the National Center for Chronic Disease Prevention and Health Promotion (2000).

Body Mass Index-for-age percentiles
GIRLS 2 to 18 years

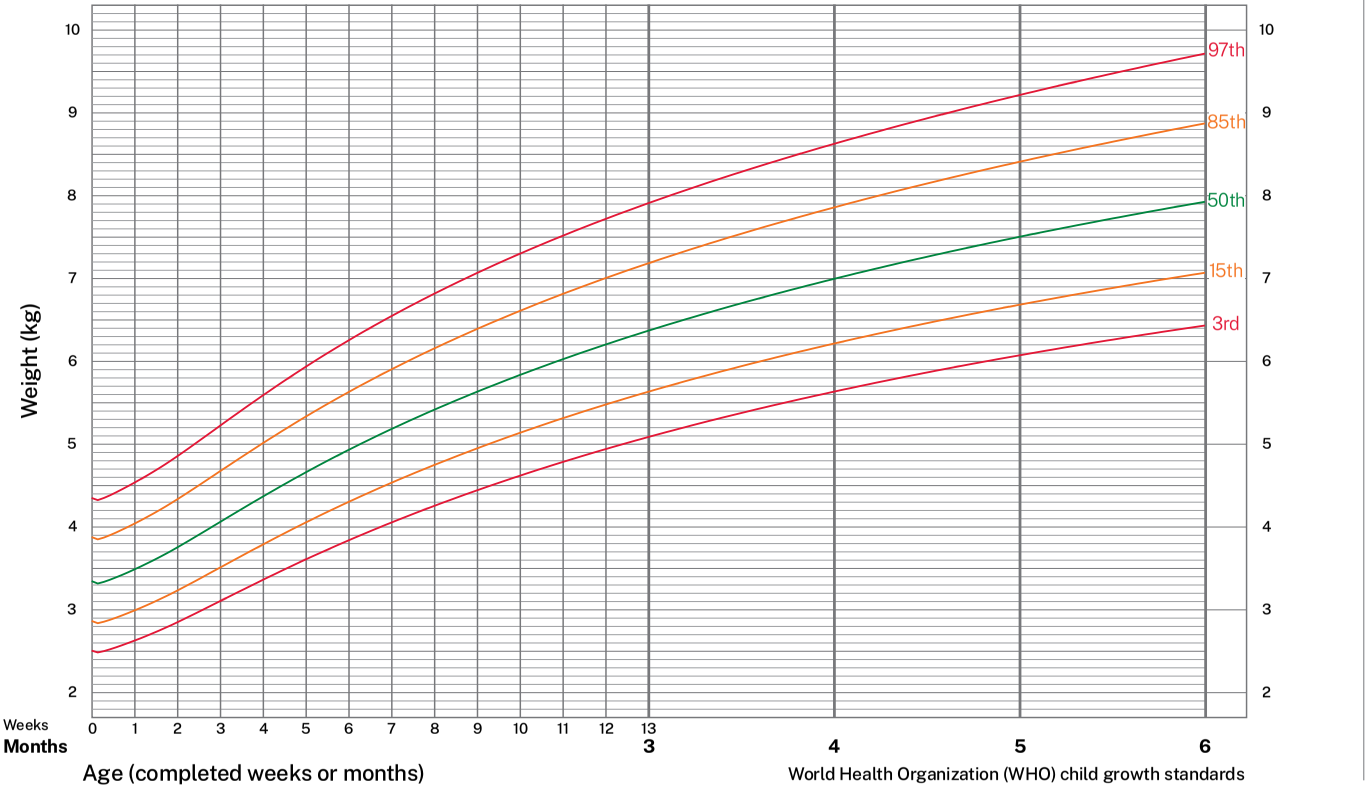


Below a healthy weight < 5th percentile	Healthy weight 5th percentile to < 85th percentile	Above a healthy weight 85th percentile to < 95th percentile	Well above a healthy weight 95th percentile and above

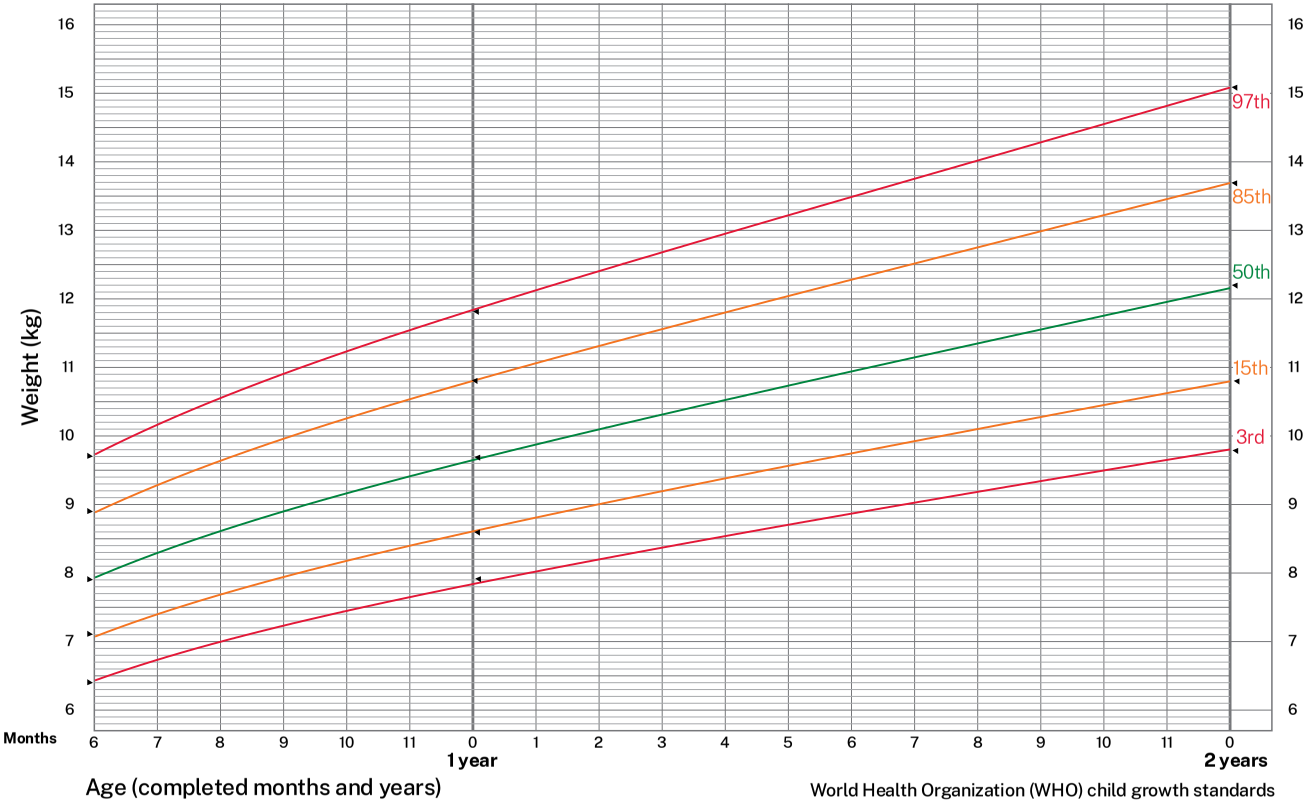
For more healthy habit tips scan the QR code or visit **healthyliving.nsw.gov.au**

Source: Centers for Disease Control and Prevention (CDC) 2000. The BMI for age chart takes the age, height, weight and sex of the child into consideration. The CDC charts are appropriate for children aged 2 to 18 years old.

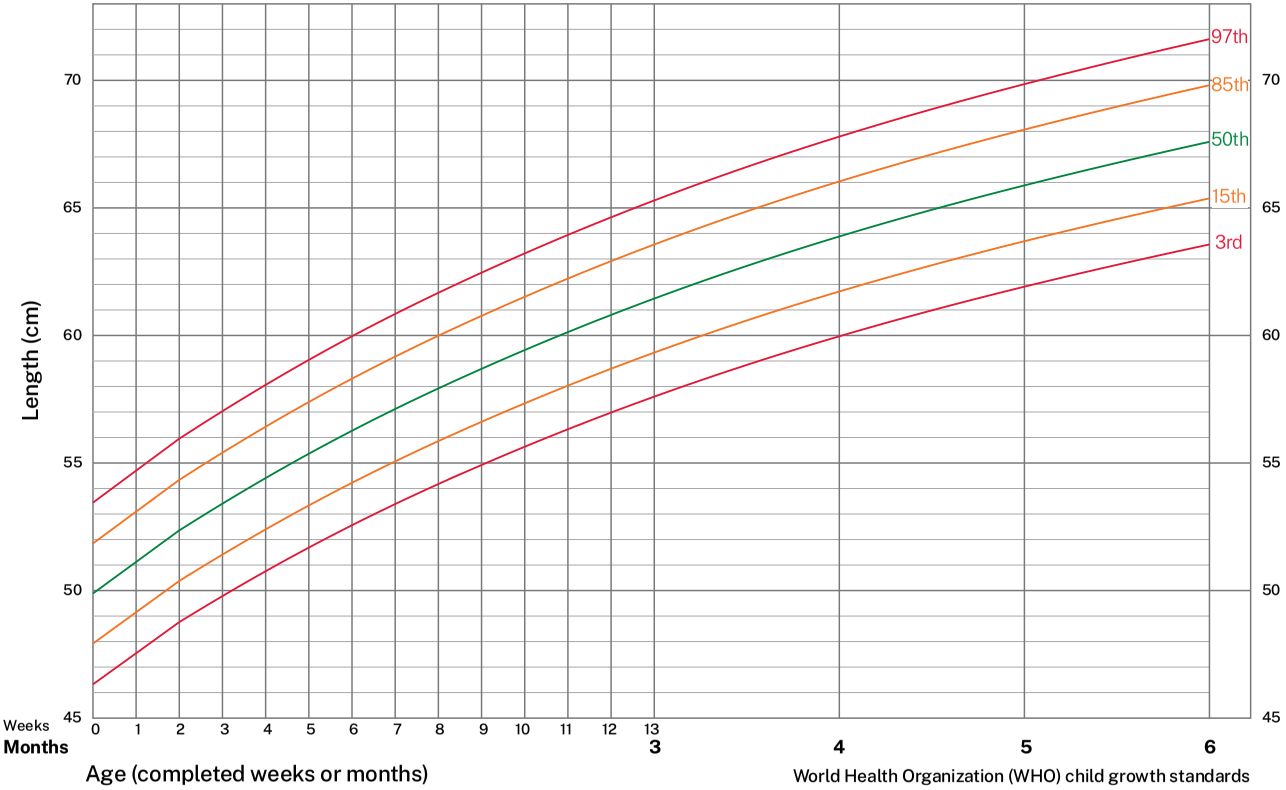
Weight-for-age percentiles
Boys birth to 6 months



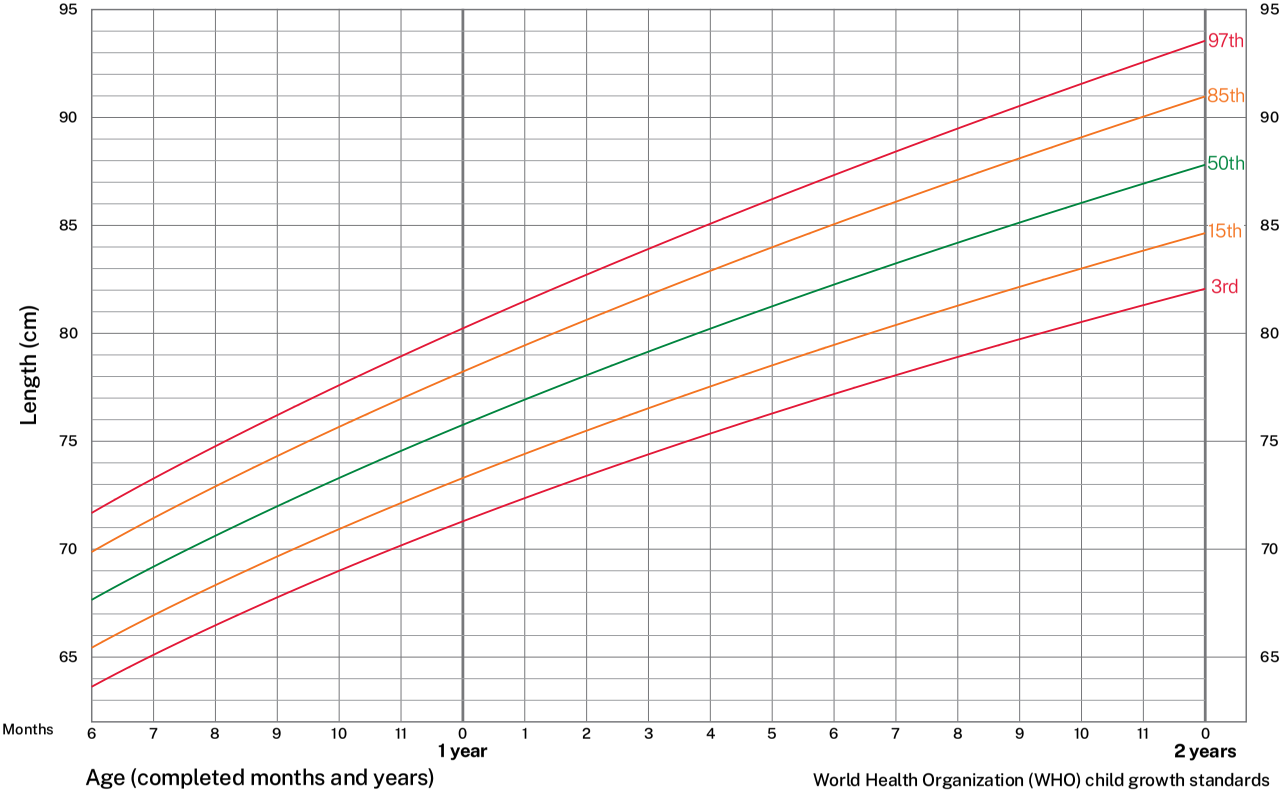
Weight-for-age percentiles
BOYS 6 months to 2 years



Length-for-age percentiles
BOYS birth to 6 months

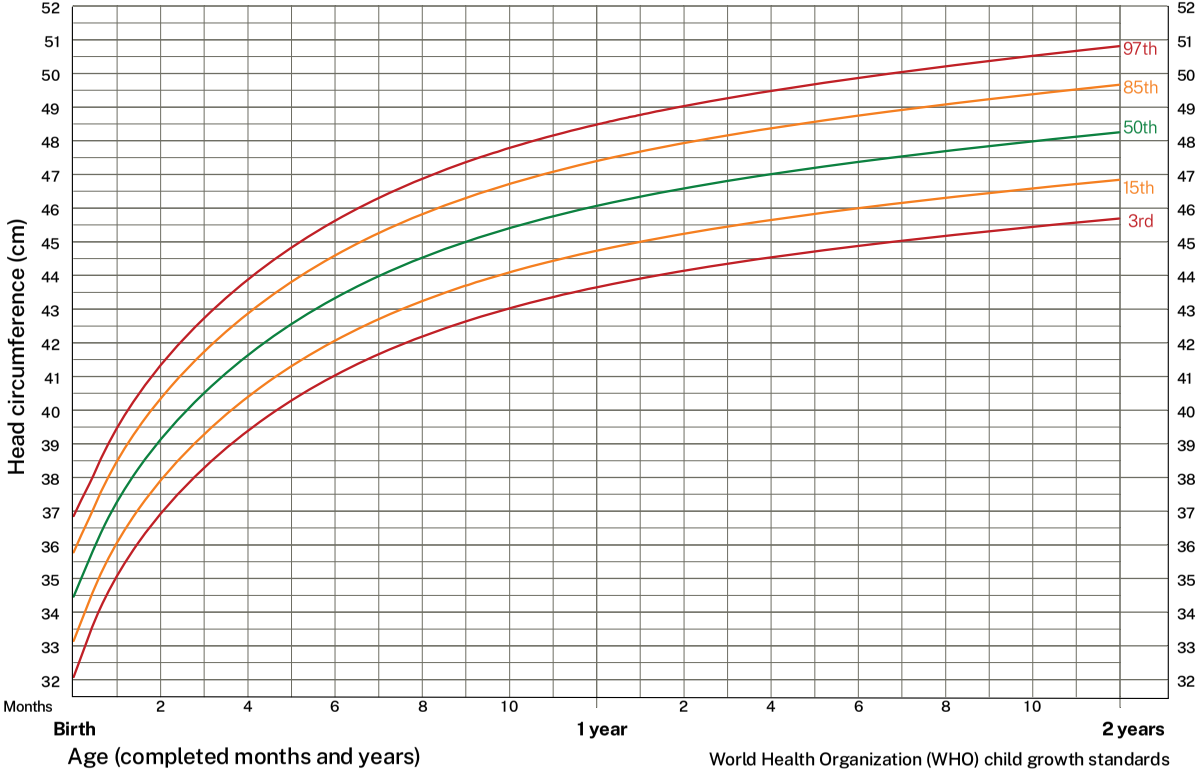


Length-for-age percentiles
BOYS 6 months to 2 years

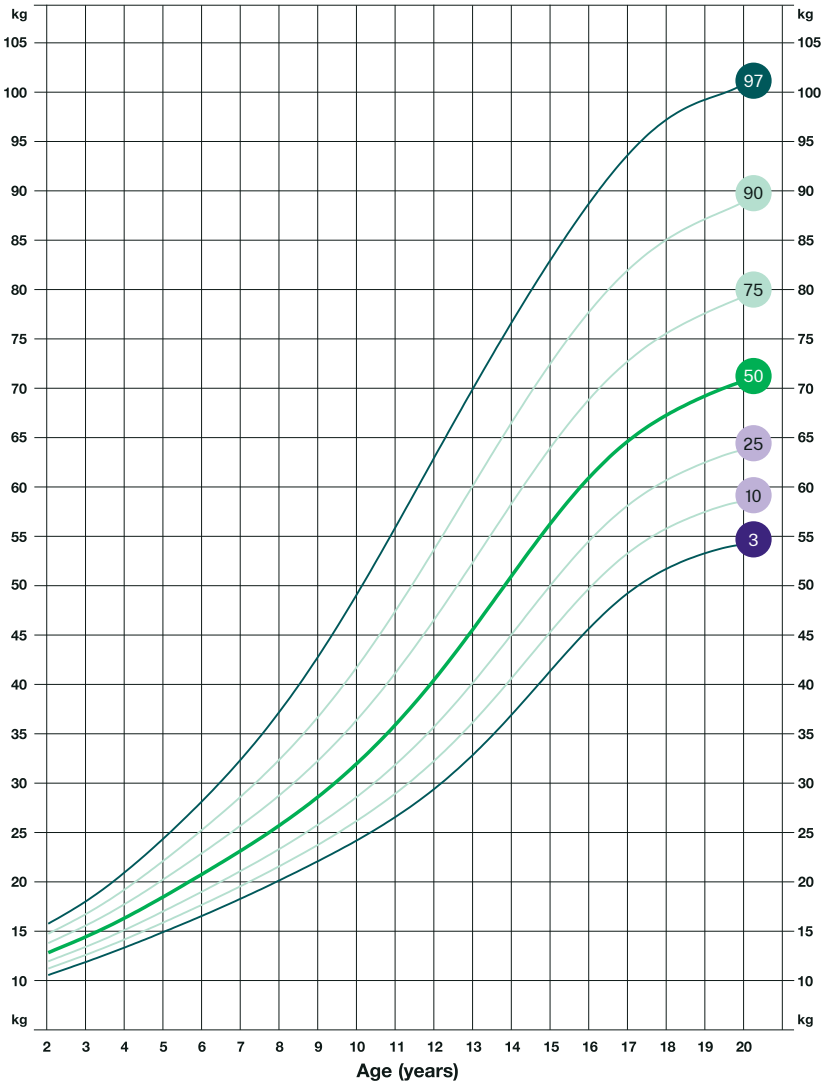


World Health Organization (WHO) child growth standards

Head circumference-for-age percentiles
BOYS birth to 2 years

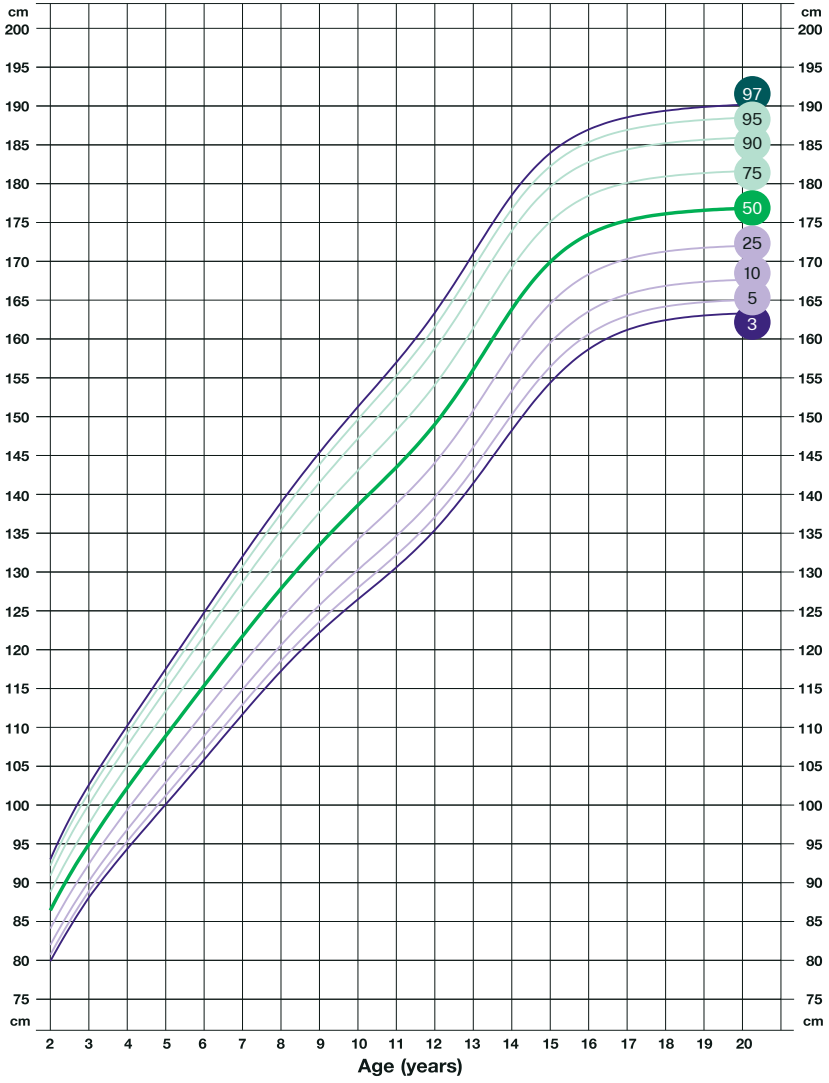


Weight-for-age percentiles
BOYS 2 to 20 years



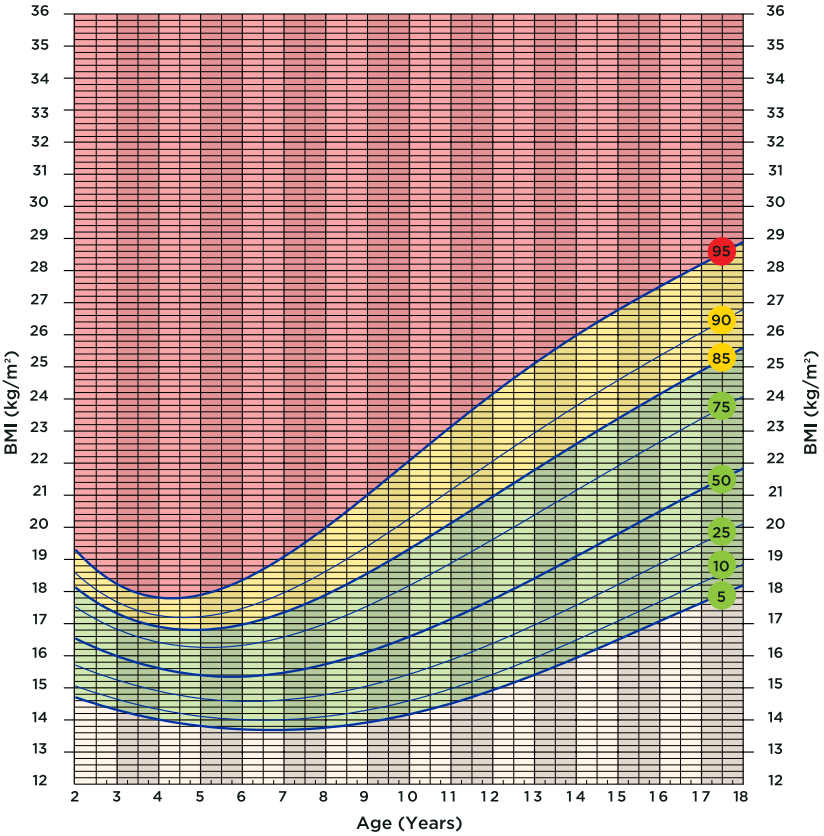
Source: Centers for Disease Control and Prevention (CDC) 2000 growth charts – United States published 30 May 2000. Developed by the National Center for Health Statistics in collaboration with the National Center for Chronic Disease Prevention and Health Promotion (2000).

Stature-for-age percentiles
BOYS 2 to 20 years



Source: Centers for Disease Control and Prevention (CDC) 2000 growth charts – United States published 30 May 2000. Developed by the National Center for Health Statistics in collaboration with the National Center for Chronic Disease Prevention and Health Promotion (2000).

Body Mass Index-for-age percentiles
BOYS 2 to 18 years



Below a healthy weight < 5th percentile	Healthy weight 5th percentile to < 85th percentile	Above a healthy weight 85th percentile to < 95th percentile	Well above a healthy weight 95th percentile and above

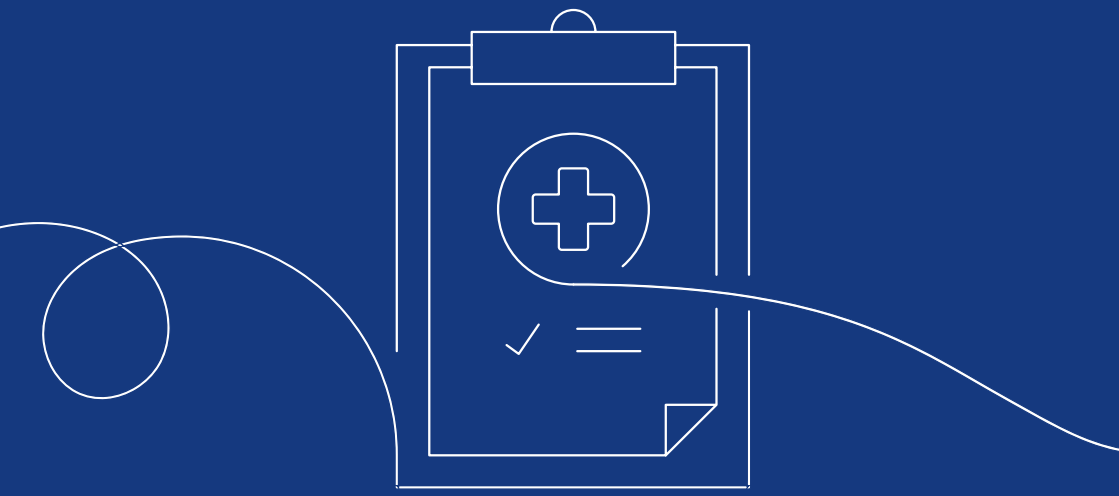
For more healthy habit tips scan the QR code or visit **healthyliving.nsw.gov.au**

Source: Centers for Disease Control and Prevention (CDC) 2000. The BMI for age chart takes the age, height, weight and sex of the child into consideration. The CDC charts are appropriate for children aged 2 to 18 years old.

Notes

You can use this space for anything you want to discuss with your healthcare provider.

Vaccinations



When to vaccinate:

- birth
- 6 weeks
- 4 months
- 6 months
- 12 months
- 18 months
- 4 years.

Even with a runny nose or mild cold, vaccination can usually go ahead.

Ask your doctor or nurse if you're unsure.

For more information on childhood vaccination, visit health.nsw.gov.au/vaccinate and skai.org.au/childhood

Where to vaccinate

Vaccinations are available at:

- doctors
- Aboriginal Medical Services
- some local councils and community health centres.

For help finding a service, call your local Public Health Unit on 1300 066 055.

Childhood vaccinations

Give your child the best protection. Vaccinate on time.

Vaccines are free, safe, and work best when given on time according to the NSW Immunisation Schedule. Delaying vaccination could put your child at risk of catching a serious disease and becoming very sick.

Even with a runny nose or mild cold, vaccination can usually go ahead. Ask your doctor or nurse if you're unsure.

Why vaccination is important:

- protects your child from serious preventable diseases
- protects your family and your community
- is needed for childcare and school enrolment
- helps with family assistance payments.

More information **health.nsw.gov.au/vaccinate**

You can create a personalised vaccination schedule for your child at **health.nsw.gov.au/myschedule**

Vaccine safety

It's safe for children to get multiple vaccines at the same visit and isn't any harder on the immune system than getting just one. This can also reduce extra appointments. Check with your doctor or nurse about vaccines that can be given together.

Side effects like swelling or redness at the injection site can sometimes happen. These reactions are usually mild and last for 1–2 days. Talk to your doctor or nurse if you are worried or your child has a fever over 39°C.

All vaccines in Australia are carefully tested to make sure they are safe and effective. A vaccine must pass clinical trials before it is approved by the Therapeutic Goods Administration (TGA). Even after approval, it's closely monitored for safety.

More information **ausvaxsafety.org.au/vaccine-safety-data/national-immunisation-program-schedule-vaccines**

You can find more information on childhood vaccinations on page 34.

Childhood vaccination record

To be completed by the vaccinating health professional. To see the schedule, visit **health.nsw.gov.au/schedule**. Other vaccinations can be added on page 70.

Child's name DOB / /

Age	Vaccine	Date given	Batch no.	Signature
Birth				
6 weeks				
4 mths				

Age	Vaccine	Date given	Batch no.	Signature
6 mths				
12 mths				
18 mths				
4 yrs				

Other vaccinations

Health professionals can record other vaccinations, like the yearly influenza vaccine, in the table below.

Child's name DOB / /

Age	Vaccine	Date given	Batch no.	Signature

Other vaccinations

Health professionals can record other vaccinations, like the yearly influenza vaccine, in the table below.

Child's name DOB / /

Age	Vaccine	Date given	Batch no.	Signature

Other vaccinations

Health professionals can record other vaccinations, like the yearly influenza vaccine, in the table below.

Child's name DOB / /

Age	Vaccine	Date given	Batch no.	Signature

1 to 4 week check

Safe sleeping

The safest place for your baby to sleep, night and day, is in their own safe sleeping place.

For more information, visit health.nsw.gov.au/safesleep

Protect your baby from whooping cough

Whooping cough is a serious respiratory infection that spreads easily from one person to another. It can be life-threatening for babies.

To keep your baby safe, everyone who will be close to them, like parents and grandparents, should get a whooping cough booster if they haven't had a vaccine in the last 10 years.

This helps protect your baby in their first few months of life until they can be fully vaccinated.

At 2 weeks old

Some things your baby may be doing:

- being startled by loud noises
- starting to focus on faces
- grasping your fingers when placed in their hand.

Some ideas for spending time with your baby:

- talk to them when they're awake
- copy their sounds and expressions
- cuddle them.

Please talk to a child and family health nurse or doctor if your baby:

- is NOT reacting to loud noises
- is NOT feeding well.

Do you or your family need support to quit smoking and vaping?

Smoking and vaping raise your baby's risk of Sudden Unexpected Deaths in Infancy (SUDI). Your doctor or child and family health nurse can help you.

You can also call Quitline at **13 QUIT** (13 7848) or go to **icanquit.com.au.**

1 to 4 week check-in

Your first visit with a child and family health professional happens at home or a child and family health centre. It's a chance for the two of you to get to know each other and talk about how things are going.

You can ask questions and share any concerns. The child and family health professional is there to support you, answer your questions, and help you feel more confident in this new stage.

You might talk about:

- feeding your baby, including breastfeeding
- safe sleeping and how to reduce the risk of Sudden Unexpected Death in Infancy (SUDI)
- sleep and settling
- understanding your baby's cues and how to comfort them
- how your baby is growing
- keeping your baby safe at home
- ways to communicate with your baby
- how to use this Blue Book to track your baby's growth and milestones
- how your nurse, doctor, and other health professionals can support you.

This visit is also for you. You can talk about:

- how you're feeling emotionally and physically
- recovery after birth, including rest and breast care
- finding support from parent groups or support networks
- plans for work and childcare, if you're thinking ahead.

Before your appointment, take some time to answer the 'Questions for parents or carers' section on the next page. Share your answers with your child and family health professional.

Questions for parents/carers

Tick the boxes that apply to your baby.
Please complete before your baby's 1 to 4 week check.

	Yes	No
I've answered the family health history questions on page 18	☐	☐
I'm concerned about my baby's hearing	☐	☐
Others have said they're concerned about my baby's hearing	☐	☐
I'm concerned about my baby's vision	☐	☐
My baby is exposed to smoking and vaping in the home or car	☐	☐
I place my baby on their back for sleeping	☐	☐

If you ticked any shaded box, please let your child and family health professional know.

Feeding	Yes	No
Since this time yesterday, did your baby have:		
• breastmilk	☐	☐
• vitamins, mineral supplements or medicine (if needed)	☐	☐
• infant formula	☐	☐
Since this time yesterday, did your baby have:		
• plain water, sweetened or flavoured water, fruit juice or tea infusions?	☐	☐
• other milk (e.g. cow's milk, soy milk, evaporated milk, condensed milk)	☐	☐
• solid or semi-solid food	☐	☐

Current recommendations:

- babies have only breastmilk until they are about 6 months old (they may have vitamins, mineral supplements or medicine if needed)
- continue breastfeeding (while getting appropriate family foods) until they are 12 months or older.

NHMRC Infant Feeding Guidelines: Information for Health Workers (2012).

Health professional to complete	Normal	Review	Refer
	☐	☐	☐

Notes

You can use this space for anything you want to discuss with your nurse or doctor.

Child health check 1 to 4 weeks

Assessment by child and family health professional

Name

Age at time of check	Corrected age (if premature)

	Yes	No
Has the parent/carer completed:		
• 1 to 4 week questions for parents?	☐	☐
• family health history on page 18?	☐	☐
Does the parent/carer have any concerns?	☐	☐
Are there any risk factors?		
• hearing	☐	☐
• vision	☐	☐
• hips	☐	☐
• oral health	☐	☐

Health assessment			**On track**	**Review**	**Refer**
Weight	kg	%	☐	☐	☐
Length	kg	%	☐	☐	☐
Head circumference	cm	%	☐	☐	☐
Fontanelles			☐	☐	☐
Eyes (observation, corneal light reflections, white pupil)			☐	☐	☐
Cardiovascular (doctor only)			☐	☐	☐
Umbilicus			☐	☐	☐
Femoral pulses			☐	☐	☐
Hip test for dislocation			☐	☐	☐
Testes fully descended R / L (boys only)			☐	☐	☐
Genitalia			☐	☐	☐
Anal region			☐	☐	☐
Skin			☐	☐	☐
Reflexes			☐	☐	☐

Outcome of check	Normal	Review	Refer
	☐	☐	☐

	Yes	No
Age-appropriate vaccination completed as per schedule? (Hepatitis B only)	☐	☐
Appropriate health information discussed?	☐	☐

Comments

Action plan

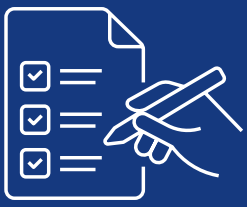
Name of doctor or nurse

Signature

Venue Date of check / /

6 to 8 week check

Things to do:



- Book your baby's 6 to 8 week check and their 6 week vaccinations, and get them done
- Complete the 6 to 8 week 'Learn the Signs. Act Early' and 'More questions for parents' checklists
- Postnatal check up for birth mother
- Make sure you've registered your baby's birth.

Do you or your family need support to quit smoking and vaping?

Smoking and vaping raise your baby's risk of Sudden Unexpected Deaths in Infancy (SUDI). Your doctor or child and family health nurse can help you.

You can also call Quitline at **13 QUIT** (13 7848) or go to **icanquit.com.au.**

6 to 8 weeks

The 6 to 8 week check is a chance for your child and family health nurse or doctor to see how your child is growing and developing.

It's also a time to talk about how you're going, including your recovery, how you're feeling, your supports, and ask any questions you might have.

Before your appointment, take some time to answer the 6 to 8 week 'Learn the Signs. Act Early'. and 'More questions for parents or carers' questions on the next pages. Share your answers with your nurse or doctor.

The topics below are a guide for things you can discuss.

- how feeding is going, including breastfeeding
- safe sleeping and reducing the risk of Sudden Unexpected Death in Infancy (SUDI)
- vaccinations (these start at 6 weeks to protect against serious diseases like whooping cough and pneumococcal)
- your baby's growth
- any safety concerns, like sun safety, smoking and vaping
- your baby's crying and how to comfort them
- communicating with your baby in your language, by talking, singing and play
- questions you might have on how to best care for your baby.

The check-in is also a chance to talk about:

- how you are feeling emotionally and physically
- recovering from birth, rest, nutrition, and gentle exercise
- joining a local parent group
- family planning and contraception
- bonding with your baby.

The nurse or doctor can also create an action plan to help you support your baby's development at home, if needed.

Learn the Signs. Act Early.

6 to 8 weeks old

Tick the boxes that apply to your baby.
Please complete before your baby's 6 to 8 week check.

	Yes	Not yet
Social and emotional milestones		
Calms down when spoken to or picked up	☐	☐
Looks at your face	☐	☐
Seems happy to see you when you walk up to them	☐	☐
Smiles when you talk to or smile at them	☐	☐
Language and communication milestones		
Makes sounds other than crying	☐	☐
Reacts to loud sounds	☐	☐
Cognitive milestones (learning, thinking, problem-solving)		
Watches you as you move	☐	☐
Looks at a toy for several seconds	☐	☐
Movement and physical development milestones		
Holds head up when on tummy	☐	☐
Moves both arms and both legs	☐	☐
Opens hands briefly	☐	☐

Concerned about your baby's development? Act Early. You know your baby best. Don't wait.

Talk to your child and family health nurse or doctor if your baby:

- isn't reaching milestones
- has lost skills they had before
- you have other concerns.

Share your concerns and ask about developmental screening.

Other important things to share

- What are some things you and your baby do together?
- What are some things your baby likes to do?
- Is there anything your baby does or doesn't do that concerns you?
- Has your baby lost any skills they once had?
- Does your baby have any healthcare needs or were they born prematurely?

Language adapted for Australian English by NSW Ministry of Health. Original content by the U.S. Centers for Disease Control and Prevention's Learn the Signs. Act Early. Program (**cdc.gov/ActEarly**; Jun 2026).

More questions for parents/carers

Answer these questions before you visit your nurse or doctor for the 6 to 8 week check. Share your answers with them.

	Yes	No
I've had my postnatal check	☐	☐
My baby was also checked	☐	☐
I have concerns about my baby	☐	☐
I've completed the family history and health risk factor questions on page 18	☐	☐
I'm concerned about my baby's hearing	☐	☐
Others have said they're concerned about my baby's hearing	☐	☐
My baby turns towards light	☐	☐
My baby smiles at me	☐	☐
My baby looks at my face and makes eye contact with me	☐	☐
I have noticed that one or both of my baby's pupils are white	☐	☐
My baby and I enjoy being together	☐	☐
I read, talk to and play with my baby	☐	☐
My baby is exposed to smoking and vaping in the home or car	☐	☐
I place my baby on their back for sleeping	☐	☐
I have registered my baby's birth	☐	☐

If you ticked any shaded box, please let your doctor or nurse know.

Feeding	Yes	No
Since this time yesterday, did your baby have:		
• breastmilk	☐	☐
• vitamins, mineral supplements or medicine (if needed)	☐	☐
• infant formula	☐	☐

Since this time yesterday, did your baby have:

• plain water, sweetened or flavoured water, fruit juice or tea infusions?	☐	☐
• other milk (e.g. cow's milk, soy milk, evaporated milk, condensed milk)	☐	☐
• solid or semi-solid food	☐	☐

Current recommendations:

- babies have only breastmilk until they are about 6 months old (they may have vitamins, mineral supplements or medicine if needed)
- continue breastfeeding (while getting appropriate family foods) until they are 12 months or older.

NHMRC Infant Feeding Guidelines: Information for Health Workers (2012).

Health professional to complete	Normal	Review	Refer
	☐	☐	☐

Notes

You can use this space for anything you want to discuss with your healthcare provider.

Child health check 6 to 8 weeks

Assessment by child and family health professional

Name

Age at time of check	Corrected age (if premature)

	Yes	No
Has the parent/carer completed:		
• 6 to 8 week Learn the Signs. Act Early. Questions?	☐	☐
• family health history on page 18?	☐	☐
Does the parent/carer have any concerns?	☐	☐
Are there any risk factors?		
• hearing	☐	☐
• vision	☐	☐
• hips	☐	☐
• oral health	☐	☐

Health and development assessment			On track	Review	Refer
Development			☐	☐	☐
Weight	kg	%	☐	☐	☐
Length	cm	%	☐	☐	☐
Head circumference	cm	%	☐	☐	☐
Eyes			☐	☐	☐
Observation			☐	☐	☐
Corneal light reflection			☐	☐	☐
Fixation			☐	☐	☐
Response to looking with one eye			☐	☐	☐
Eye movements			☐	☐	☐
Cardiovascular (doctor only)			☐	☐	☐
Hip test for dislocation			☐	☐	☐
Testes fully descended R / L (boys only)			☐	☐	☐

Outcome of check	Normal	Review	Refer
	☐	☐	☐

	Yes	No
Age-appropriate vaccination completed as per schedule?	☐	☐
Appropriate health information discussed?	☐	☐

Comments

Action plan

Name of doctor or nurse

Signature

Venue Date of check / /

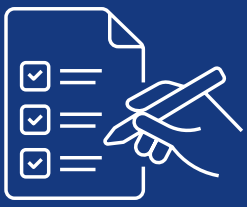
Notes

You can use this space for anything you want to discuss with your healthcare provider.

4 months

Things to do:

- Book your baby's vaccinations, and get them done
- Complete the 4 month 'Learn the Signs. Act Early' and 'Feeding' checklists



Do you or your family need support to quit smoking and vaping?

Smoking and vaping raise your baby's risk of Sudden Unexpected Deaths in Infancy (SUDI). Your doctor or child and family health nurse can help you.

You can also call Quitline at **13 QUIT** (13 7848) or go to **icanquit.com.au.**

4 months

There's no scheduled check at 4 months. It's still a good idea to see your child and family health nurse or doctor if you have any concerns about how your baby is growing or developing.

4 month vaccinations

Your baby needs important vaccinations at 4 months old. These are a repeat of the ones given at 6 weeks of age.

These vaccinations give your baby the earliest and best possible protection from serious diseases, such as whooping cough (pertussis) and pneumococcal.

Vaccines are free, safe, and work best when given on time according to the NSW Immunisation Schedule. The timing of every vaccine given to children is carefully chosen to give the child the best protection at the earliest age.

Even if your child has a runny nose or mild cold, vaccinations can usually go ahead. Talk to your doctor or nurse to keep your child on schedule.

More information at **health.nsw.gov.au/vaccinate**.

Learn the Signs. Act Early.

4 months old

Tick the boxes that apply to your baby.

	Yes	Not yet
Social and emotional milestones		
Smiles on their own to get your attention	☐	☐
Giggles (not yet a full laugh) when you try to make them laugh	☐	☐
Looks at you, moves, or makes sounds to get or keep your attention	☐	☐
Makes sounds like “oooo”, “aahh” (cooing)	☐	☐
Language and communication milestones		
Makes sounds back when you talk to them	☐	☐
Turns head towards the sound of your voice	☐	☐
Cognitive milestones (learning, thinking, problem-solving)		
If hungry, opens mouth when they see breast or bottle	☐	☐
Looks at their hands with interest	☐	☐
Movement and physical development milestones		
Holds head steady without support when you are holding them	☐	☐
Holds a toy when you put it in their hand	☐	☐
Uses their arm to swing at toys	☐	☐
Brings hands to mouth	☐	☐
Pushes up onto elbows or forearms when on tummy	☐	☐

Concerned about your baby's development? Act Early. You know your baby best. Don't wait.

Talk to your child and family health nurse or doctor if your baby:

- isn't reaching milestones
- has lost skills they had before
- you have other concerns.

Share your concerns and ask about developmental screening.

Other important things to share

- What are some things you and your baby do together?
- What are some things your baby likes to do?
- Is there anything your baby does or doesn't do that concerns you?
- Has your baby lost any skills they once had?
- Does your baby have any healthcare needs or were they born prematurely?

Language adapted for Australian English by NSW Ministry of Health. Original content by the U.S. Centers for Disease Control and Prevention's Learn the Signs. Act Early. Program (**cdc.gov/ActEarly**; Jun 2026).

Feeding	**Yes**	**No**
Since this time yesterday, did your baby have:		
• breastmilk	☐	☐
• vitamins, mineral supplements or medicine (if needed)	☐	☐
• infant formula	☐	☐
Since this time yesterday, did your baby have:		
• plain water, sweetened or flavoured water, fruit juice or tea infusions?	☐	☐
• other milk (e.g. cow's milk, soy milk, evaporated milk, condensed milk)	☐	☐
• solid or semi-solid food	☐	☐

Current recommendations:

- babies have only breastmilk until they are about 6 months old (they may have vitamins, mineral supplements or medicine if needed)
- continue breastfeeding (while getting appropriate family foods) until they are 12 months or older.

NHMRC Infant Feeding Guidelines: Information for Health Workers (2012).

Notes

You can use this space for anything you want to discuss with your healthcare provider.

6 month check

6 months

Most babies are ready to try their first tastes of family food from around 6 months. You can also start offering cool boiled water in a cup.

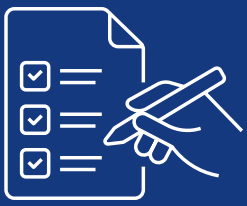
Breastmilk or formula is still your baby's main source of nutrition, so keep offering it regularly.
More information: **raisingchildren.net.au/solids**

Your baby's first teeth may start showing soon. When teeth come through, gently brush them twice a day with a soft, baby or child-sized toothbrush and plain water. Try to have your child's first dental check by their first birthday. More information: **health.nsw.gov.au/firstteeth**

Your baby can now get their free influenza (flu) vaccination, which can be given at the same time as the 6-month vaccination. Because your baby's immune system is still developing, they are more likely to get very sick from the flu. The vaccine is safe and can't give your baby the flu. More information: **health.nsw.gov.au/flu**

Things to do:

- Book your baby's 6 month check and their 6 month vaccinations, and get them done
- Complete the 6 month 'Learn the Signs. Act Early' and 'More questions for parents' checklists



Do you or your family need support to quit smoking and vaping?

Smoking and vaping raise your baby's risk of Sudden Unexpected Deaths in Infancy (SUDI). Your doctor or child and family health nurse can help you.

You can also call Quitline at **13 QUIT** (13 7848) or go to **icanquit.com.au.**

6 month check-in

The 6-month check is a chance for your child and family health nurse or doctor to see how your baby is growing and developing. It's also a time to check in on how you're going and talk about any questions or concerns you have.

Before your appointment, take some time to complete the 6-month 'Learn the Signs. Act Early.' and 'More questions for parents' sections on the next pages. Bring your answers to share with your nurse or doctor.

The topics below are a guide for things you can talk about:

- feeding your baby, including starting family foods
- teething and caring for your baby's first teeth
- sleep, including safe sleep
- vaccinations
- how your baby is growing
- safety, including home, car, water and safety.

The check-in is also a good time to talk about:

- how you're feeling emotionally and physically
- your relationship with your baby and how bonding is going
- play and activities to support your baby's learning
- how older siblings are adjusting
- going to playgroups or connecting with other parents
- any support you might need.

Your nurse or doctor can also help make an action plan to support your baby's development at home, if needed.

Learn the Signs. Act Early.

6 months old

Tick the boxes that apply to your baby.
Please complete before your baby's 6 month check.

	Yes	Not yet
Social and emotional milestones		
Knows familiar people	☐	☐
Likes to look at themself in a mirror	☐	☐
Laughs	☐	☐
Language and communication milestones		
Takes turns making sounds with you	☐	☐
Blows "raspberries" (sticks tongue out and blows)	☐	☐
Makes squealing noises	☐	☐
Cognitive milestones (learning, thinking, problem-solving)		
Puts things in their mouth to explore them	☐	☐
Reaches to grab a toy they want	☐	☐
Closes lips to show they don't want more food	☐	☐
Movement and physical development milestones		
Rolls from tummy to back	☐	☐
Pushes up with straight arms when on tummy	☐	☐
Leans on hands to support themself when sitting	☐	☐

Concerned about your baby's development? Act Early. You know your baby best. Don't wait.

Talk to your child and family health nurse or doctor if your baby:

- isn't reaching milestones
- has lost skills they had before
- you have other concerns.

Share your concerns and ask about developmental screening.

Other important things to share

- What are some things you and your baby do together?
- What are some things your baby likes to do?
- Is there anything your baby does or doesn't do that concerns you?
- Has your baby lost any skills they once had?
- Does your baby have any healthcare needs or were they born prematurely?

Language adapted for Australian English by NSW Ministry of Health. Original content by the U.S. Centers for Disease Control and Prevention's *Learn the Signs. Act Early*. Program (**cdc.gov/ActEarly**; Jun 2026).

More questions for parents/carers

Answer these questions before you visit your nurse or doctor for the 6 month check. Share your answers with them.

	Yes	No
I have concerns about my baby	☐	☐
I've completed the family history and health risk factor questions on page 18	☐	☐
I'm concerned about my baby's hearing	☐	☐
Others have said they're concerned about my baby's hearing	☐	☐
My baby turns towards light	☐	☐
My baby smiles at me	☐	☐
My baby looks at my face and makes eye contact with me	☐	☐
I have noticed that one or both of my baby's pupils are white	☐	☐
My baby and I enjoy being together	☐	☐
I read, talk to and play with my baby	☐	☐
My baby is exposed to smoking and vaping in the home or car	☐	☐
I place my baby on their back for sleeping	☐	☐

If you ticked any shaded box, please let your doctor or nurse know.

Feeding	Yes	No
If you can recall, did your baby receive breastmilk when they were 4 months old? (you may have answered this question at the 4 month tab)	☐	☐
Since this time yesterday, did your baby have:		
• breastmilk	☐	☐
• vitamins, mineral supplements or medicine (if needed)	☐	☐
• infant formula	☐	☐

Since this time yesterday, did your baby have:

• plain water, sweetened or flavoured water, fruit juice or tea infusions?	☐	☐
• other milk (e.g. cow's milk, soy milk, evaporated milk, condensed milk)	☐	☐
• solid or semi-solid food	☐	☐

Current recommendations:

- babies have only breastmilk until they are about 6 months old (they may have vitamins, mineral supplements or medicine if needed)
- continue breastfeeding (while getting appropriate family foods) until they are 12 months or older.

NHMRC Infant Feeding Guidelines: Information for Health Workers (2012).

Health professional to complete	Normal	Review	Refer
	☐	☐	☐

Notes

You can use this space for anything you want to discuss with your healthcare provider.

Child health check 6 months

Assessment by child and family health professional

Name

Age at time of check	Corrected age (if premature)

	Yes	No
Has the parent/carer completed:		
• 6 month. Learn the Signs. Act Early. Questions?	☐	☐
• family health history on page 18?	☐	☐
Does the parent/carer have any concerns?	☐	☐
Are there any risk factors?		
• hearing	☐	☐
• vision	☐	☐
• hips	☐	☐
• oral health	☐	☐

Health and development assessment			**On track**	**Review**	**Refer**
Development			☐	☐	☐
Weight	kg	%	☐	☐	☐
Length	cm	%	☐	☐	☐
Head circumference	cm	%	☐	☐	☐
Eyes			☐	☐	☐
Observation			☐	☐	☐
Corneal light reflection			☐	☐	☐
Fixation			☐	☐	☐
Response to looking with one eye			☐	☐	☐
Eye movements			☐	☐	☐
Oral health 'lift the lip' check			☐	☐	☐
Visible plaque			☐	☐	☐
White spots or carious lesions			☐	☐	☐
Hip test for dislocation			☐	☐	☐
Testes fully descended R / L (boys only)			☐	☐	☐

Outcome of check	Normal	Review	Refer
	☐	☐	☐

	Yes	No
Age-appropriate vaccination completed as per schedule?	☐	☐
Appropriate health information discussed?	☐	☐

Comments

Action plan

Name of doctor or nurse

Signature

Venue Date of check / /

Notes

You can use this space for anything you want to discuss with your healthcare provider.

12 month check

12 months

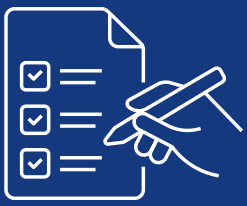
Your baby's first birthday is a big milestone for both of you.

Your child should now be getting most of their nutrition from family foods. If you're breastfeeding, you can keep going for as long as you and your child like.

Regular dental check-ups are important. Try to have your child's first dental check by their first birthday.

You can also do a free online CPR training for children over 12 months: **www.schn.health.nsw.gov.au/cpr-training-modules**

Things to do:



- Book your child's 12 month check and their 12 month vaccinations, and get them done
- Complete the 12 month 'Learn the Signs. Act Early' and 'More questions for parents' checklists
- If your baby's newborn hearing screen showed a hearing risk factor, book another hearing test at 10–12 months (corrected). Your doctor or child and family health nurse can help organise this.

Do you or your family need support to quit smoking and vaping?

Smoking and vaping raise your baby's risk of Sudden Unexpected Deaths in Infancy (SUDI). Your doctor or child and family health nurse can help you.

You can also call Quitline at **13 QUIT** (13 7848) or go to **icanquit.com.au.**

12 month check-in

Checks continue after your child's first birthday. Every child is different, even those born in the same family. These checks help make sure your child is thriving in their own way.

The 12-month check-in is a chance for your nurse or doctor to see how your child is growing and developing. It's also a great time to ask questions and talk about any concerns you might have as your child moves into toddlerhood.

Before your appointment, take some time to answer the 'Learn the Signs. Act Early.' and 'More questions for parents or carers' checklists on the next pages. Bring your answers to share at your visit.

Some things you might talk about during the check:

- how your child is growing and developing
- upcoming vaccinations
- safety in the home, car and outdoors
- how to care for your child's teeth
- healthy eating and encouraging active play
- sleep and routines.

The check-in is also a time to talk about:

- your emotional health and wellbeing
- sibling relationships and how everyone is adjusting
- building a strong bond with your child
- going to a playgroup or childcare.

Your nurse or doctor can also help make an action plan to support your child's development at home, and connect you with services if needed.

Learn the Signs. Act Early.

12 months old

Tick the boxes that apply to your child.
Please complete before your child's 12 month check.

	Yes	Not yet
Social and emotional milestones		
Plays games with you, like pat-a-cake*	☐	☐
Language and communication milestones		
Waves "bye-bye"	☐	☐
Calls a parent "muma" or "dada" or another special name	☐	☐
Understands "no" (pauses briefly or stops when you say it)	☐	☐
Cognitive milestones (learning, thinking, problem-solving)		
Puts something in a container, like a block in a cup	☐	☐
Looks for things they see you hide, like a toy under a blanket	☐	☐
Movement and physical development milestones		
Pulls up to stand	☐	☐
Walks, holding on to furniture	☐	☐
Drinks from a cup without a lid, as you hold it	☐	☐
Picks things up between thumb and pointer finger, like small bits of food	☐	☐

*hand clapping game

Concerned about your baby's development? Act Early.
You know your baby best. Don't wait.

Talk to your child and family health nurse or doctor if your baby:

- isn't reaching milestones
- has lost skills they had before
- you have other concerns.

Share your concerns and ask about developmental screening.

Other important things to share

- What are some things you and your baby do together?
- What are some things your baby likes to do?
- Is there anything your baby does or doesn't do that concerns you?
- Has your baby lost any skills they once had?
- Does your baby have any healthcare needs or were they born prematurely?

Language adapted for Australian English by NSW Ministry of Health. Original content by the U.S. Centers for Disease Control and Prevention's *Learn the Signs. Act Early.* Program (**cdc.gov/ActEarly**; Jun 2026).

More questions for parents/carers

Answer these questions before you visit your nurse or doctor for the 12 month check. Share your answers with them.

	Yes	No
I've completed the family history and health risk factor questions on page 18	☐	☐
I'm concerned about my child's hearing	☐	☐
Others have said they're concerned about my child's hearing	☐	☐
My child has a turned or lazy eye (squint or strabismus)	☐	☐
My child has difficulty seeing small objects	☐	☐
My child recognises familiar objects and people from a distance	☐	☐
My child is exposed to smoking or vaping in the home or car	☐	☐
My child has teeth	☐	☐
My child has had problems with their teeth or teething	☐	☐
My child uses a bottle to help them go to sleep	☐	☐
My child walks around with a bottle or feeder cup between meals	☐	☐
I brush my child's teeth twice a day	☐	☐

If you ticked any shaded box, please let your doctor or nurse know.

Feeding	Yes	No
Since this time yesterday, did your child receive breastmilk?	☐	☐
Since this time yesterday, did your child receive solid food?	☐	☐

Current recommendations:

- babies have only breastmilk until they are about 6 months old (they may have vitamins, mineral supplements or medicine if needed)
- continue breastfeeding (while getting appropriate family foods) until they are 12 months or older.

NHMRC Infant Feeding Guidelines: Information for Health Workers (2012).

Health professional to complete	Normal	Review	Refer
	☐	☐	☐

Notes

You can use this space for anything you want to discuss with your healthcare provider.

Child health check 12 months

Assessment by child and family health professional

Name

Age at time of check	Corrected age (if premature)

	Yes	No
Has the parent/carer completed 12 month Learn the Signs. Act Early. Questions?	☐	☐
Does the parent/carer have any concerns?	☐	☐
Are there any risk factors?		
• hearing	☐	☐
• vision	☐	☐
• hips	☐	☐
• oral health	☐	☐

Health and development assessment			**On track**	**Review**	**Refer**
Development			☐	☐	☐
Weight	kg	%	☐	☐	☐
Length	cm	%	☐	☐	☐
Head circumference	cm	%	☐	☐	☐
Eyes			☐	☐	☐
Observation			☐	☐	☐
Corneal light reflection			☐	☐	☐
Fixation			☐	☐	☐
Response to looking with one eye			☐	☐	☐
Eye movements			☐	☐	☐
Oral health 'lift the lip' check			☐	☐	☐
Visible plaque			☐	☐	☐
Bleeding gums			☐	☐	☐
White spots or carious lesions			☐	☐	☐
Evaluate gait (if walking)			☐	☐	☐
Testes fully descended R / L (only boys)			☐	☐	☐

Outcome of check	Normal	Review	Refer
	☐	☐	☐

	Yes	No
Age-appropriate vaccination completed as per schedule?	☐	☐
Appropriate health information discussed?	☐	☐

Comments

Action plan

Name of doctor or nurse

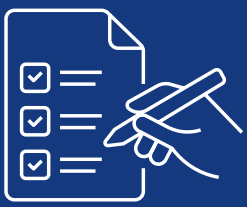
Signature

Venue Date of check / /

18 month check

Things to do:

- Book your child's 18 month check and their 18 month vaccinations, and get them done
- Complete the 18 month 'Learn the Signs. Act Early' and 'More questions for parents' checklists



Do you or your family need support to quit smoking and vaping?

Smoking and vaping raise your baby's risk of Sudden Unexpected Deaths in Infancy (SUDI). Your doctor or child and family health nurse can help you.

You can also call Quitline at **13 QUIT** (13 7848) or go to **icanquit.com.au.**

18 month check-in

Your toddler is learning and exploring more every day. The 18-month check in is a chance to see how they're growing and developing. You can also talk about any concerns or questions you might have.

Before your visit, take some time to answer the 'Learn the Signs. Act Early.' and 'More questions for parents or carers' questions on the next pages. Bring your answers to share at your visit.

Some things you might talk about during the check in:

- how your child is growing and developing
- keeping up with vaccinations
- starting toilet training when your child shows signs they're ready
- healthy eating and active play
- caring for your child's teeth
- safety at home, in the car, and outdoors
- smoking and vaping
- helping your child manage their behaviour and emotions
- sibling relationships
- going to playgroups or childcare
- sleep and routines
- building a strong bond with your child.

Your nurse or doctor can also help make an action plan to support your child's development at home, and connect you with services if needed.

Learn the Signs. Act Early.

18 months old

Tick the boxes that apply to your child.
Please complete before your child's 18 month check.

	Yes	Not yet
Social and emotional milestones		
Moves away from you, but looks to make sure you are close by	☐	☐
Points to show you something interesting	☐	☐
Puts hands out for you to wash them	☐	☐
Looks at a few pages in a book with you	☐	☐
Helps you dress them by pushing arm through sleeve or lifting up foot	☐	☐
Language and communication milestones		
Tries to say three or more words besides "muma" or "dada"	☐	☐
Follows one-step directions without any gestures, like giving you the toy when you say, "Give it to me"	☐	☐
Understands "no" (pauses briefly or stops when you say it)	☐	☐
Cognitive milestones (learning, thinking, problem-solving)		
Copies you doing chores, like sweeping with a broom	☐	☐
Plays with toys in a simple way, like pushing a toy car	☐	☐
Movement and physical development milestones		
Walks without holding on to anyone or anything	☐	☐
Scribbles	☐	☐
Drinks from a cup without a lid and may spill sometimes	☐	☐
Feeds themself with their fingers	☐	☐
Tries to use a spoon	☐	☐
Climbs on and off a couch or chair without help	☐	☐

Concerned about your baby's development? Act Early. You know your baby best. Don't wait.

Talk to your child and family health nurse or doctor if your child:

- isn't reaching milestones
- has lost skills they had before
- you have other concerns.

Share your concerns and ask about developmental screening.

Other important things to share

- What are some things you and your child do together?
- What are some things your child likes to do?
- Is there anything your child does or doesn't do that concerns you?
- Has your child lost any skills they once had?
- Does your child have any healthcare needs or were they born prematurely?

Language adapted for Australian English by NSW Ministry of Health. Original content by the U.S. Centers for Disease Control and Prevention's Learn the Signs. Act Early. Program (**cdc.gov/ActEarly**; Jun 2026).

More questions for parents/carers

Answer these questions before you visit your nurse or doctor for the 18 month check. Share your answers with them.

	Yes	No
I've completed the family history and health risk factor questions on page 18	☐	☐
I'm concerned about my child's hearing	☐	☐
Others have said they're concerned about my child's hearing	☐	☐
My child has a turned or lazy eye (squint or strabismus)	☐	☐
My child has difficulty seeing small objects	☐	☐
My child recognises familiar objects and people from a distance	☐	☐
My child is exposed to smoking or vaping in the home or car	☐	☐
My child has sweet drinks and snacks throughout the day	☐	☐
My child still uses a bottle	☐	☐

If you ticked any shaded box, please let your doctor or nurse know.

Feeding	Yes	No
Since this time yesterday, did your child receive breastmilk?	☐	☐

Health professional to complete	Normal	Review	Refer
	☐	☐	☐

Notes

You can use this space for anything you want to discuss with your healthcare provider.

Child health check 18 months

Assessment by a child and family health professional

Name

Age at time of check	Corrected age (if premature)

	Yes	No
Has the parent/carer completed 18 month Learn the Signs. Act Early. Questions?	☐	☐
Does the parent/carer have any concerns?	☐	☐
Are there any risk factors?		
• hearing	☐	☐
• vision	☐	☐
• oral health	☐	☐

Health and development assessment			**On track**	**Review**	**Refer**
Development			☐	☐	☐
Weight	kg	%	☐	☐	☐
Length	cm	%	☐	☐	☐
Head circumference	cm	%	☐	☐	☐
Eyes			☐	☐	☐
Observation			☐	☐	☐
Corneal light reflection			☐	☐	☐
Fixation			☐	☐	☐
Response to looking with one eye			☐	☐	☐
Eye movements			☐	☐	☐
Oral health 'lift the lip' check			☐	☐	☐
Visible plaque			☐	☐	☐
Bleeding, swollen gums			☐	☐	☐
White spots or carious lesions			☐	☐	☐

Outcome of check	Normal	Review	Refer
	☐	☐	☐

	Yes	No
Age-appropriate vaccination completed as per schedule?	☐	☐
Appropriate health information discussed?	☐	☐

Comments

Action plan

Name of doctor or nurse

Signature

Venue Date of check / /

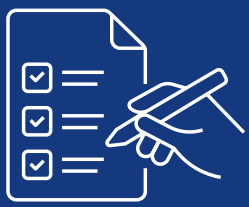
Notes

You can use this space for anything you want to discuss with your healthcare provider.

2 year check

Things to do:

- Book your child's 2 year check, and get it done
- Complete the 2 year 'Learn the Signs. Act Early' and 'More questions for parents' checklists



Do you or your family need support to quit smoking and vaping?

Smoking and vaping raise your baby's risk of Sudden Unexpected Deaths in Infancy (SUDI). Your doctor or child and family health nurse can help you.

You can also call Quitline at **13 QUIT** (13 7848) or go to **icanquit.com.au.**

2 year check-in

Your child is growing fast and learning many new skills. Read, talk, sing and play with your child every day to help their development.

There is no vaccination at 2 years, but this check is still important to make sure your child is healthy and developing well.

The 2 year check in is a chance for your nurse or doctor to see how your child is growing and developing, and to talk about any questions or concerns you have.

Before your visit, take some time to answer the 'Learn the Signs. Act Early.' and 'More questions for parents or carers' questions on the next pages. Bring them with you to share at the appointment.

Some things you might talk about during the check:

- how your child is growing and developing
- keeping up with vaccinations
- starting toilet training when your child shows signs they're ready
- healthy eating, active play and limiting screen time
- caring for your child's teeth
- safety at home, in the car, and outdoors
- smoking and vaping
- helping your child manage their behaviour and emotions
- sibling relationships
- going to playgroups or childcare
- sleep and routines
- building a strong bond with your child.

Your nurse or doctor can also help make an action plan to support your child's development at home, and connect you with services if needed.

Learn the Signs. Act Early.

2 years old

Tick the boxes that apply to your child.
Please complete before your child's 2 year check.

	Yes	Not yet
Social and emotional milestones		
Notices when others are hurt or upset, like pausing or looking sad when someone is crying	☐	☐
Looks at your face to see how to react in a new situation	☐	☐
Language and communication milestones		
Points to things in a book when you ask, like "Where is the bear?"	☐	☐
Says at least two words together, like "More milk."	☐	☐
Points to at least two body parts when you ask them to show you	☐	☐
Uses more gestures than just waving and pointing, like blowing a kiss or nodding yes	☐	☐
Cognitive milestones (learning, thinking, problem-solving)		
Holds something in one hand while using the other hand; for example, holding a container and taking the lid off	☐	☐
Tries to use switches, knobs, or buttons on a toy	☐	☐
Plays with more than one toy at the same time, like putting toy food on a toy plate	☐	☐
Movement and physical development milestones		
Walks without holding on to anyone or anything	☐	☐
Kicks a ball	☐	☐
Runs	☐	☐
Walks (not climbs) up a few stairs with or without help	☐	☐
Eats with a spoon	☐	☐

Concerned about your baby's development? Act Early. You know your baby best. Don't wait.

Talk to your child and family health nurse or doctor if your child:

- isn't reaching milestones
- has lost skills they had before
- you have other concerns.

Share your concerns and ask about developmental screening.

Other important things to share

- What are some things you and your child do together?
- What are some things your child likes to do?
- Is there anything your child does or doesn't do that concerns you?
- Has your child lost any skills they once had?
- Does your child have any healthcare needs or were they born prematurely?

Language adapted for Australian English by NSW Ministry of Health. Original content by the U.S. Centers for Disease Control and Prevention's Learn the Signs. Act Early. Program (**cdc.gov/ActEarly**; Jun 2026).

More questions for parents/carers

Answer these questions before you visit your nurse or doctor for the 2 year check. Share your answers with them.

	Yes	No
I've completed the family history and health risk factor questions on page 18	☐	☐
I'm concerned about my child's hearing	☐	☐
Others have said they're concerned about my child's hearing	☐	☐
I'm concerned about my child's vision	☐	☐
My child has a turned or lazy eye (squint or strabismus)	☐	☐
My child has difficulty seeing small objects	☐	☐
My child recognises familiar objects and people from a distance	☐	☐
My child is exposed to smoking or vaping in the home or car	☐	☐
My child has sweet drinks and snacks throughout the day	☐	☐
My child still uses a bottle	☐	☐

If you ticked any shaded box, please let your doctor or nurse know.

Feeding	Yes	No
Since this time yesterday, did your child receive breastmilk?	☐	☐

Health professional to complete	Normal	Review	Refer
	☐	☐	☐

Notes

You can use this space for anything you want to discuss with your healthcare provider.

Child health check 2 years

Assessment by a child and family health professional

Name

Age at time of check	Corrected age (if premature)

	Yes	No
Has the parent/carer completed 2 years Learn the Signs. Act Early. Questions?	☐	☐
Does the parent/carer have any concerns?	☐	☐
Are there any risk factors?		
• hearing	☐	☐
• vision	☐	☐
• oral health	☐	☐

Health and development assessment			**On track**	**Review**	**Refer**
Development			☐	☐	☐
Weight	kg	%	☐	☐	☐
Height	cm	%	☐	☐	☐
Body mass index (BMI)			☐	☐	☐
Head circumference	cm	%	☐	☐	☐
Evaluate gait			☐	☐	☐
Eyes			☐	☐	☐
Observation			☐	☐	☐
Corneal light reflection			☐	☐	☐
Fixation			☐	☐	☐
Response to looking with one eye			☐	☐	☐
Eye movements			☐	☐	☐
Oral health 'lift the lip' check			☐	☐	☐
Visible plaque			☐	☐	☐
Bleeding, swollen gums			☐	☐	☐
White spots or carious lesions			☐	☐	☐

Outcome of check	Normal	Review	Refer
	☐	☐	☐

	Yes	No
Age-appropriate vaccination completed as per schedule?	☐	☐
Appropriate health information discussed?	☐	☐

Comments

Action plan

Name of doctor or nurse

Signature

Venue Date of check / /

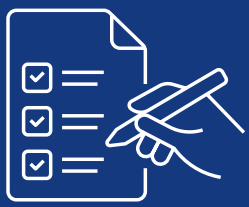
Notes

You can use this space for anything you want to discuss with your healthcare provider.

3 year check

Things to do:

- Book your child's 3 year check, and get it done
- Complete the 3 year 'Learn the Signs. Act Early' and 'More questions for parents' checklists



Do you or your family need support to quit smoking and vaping?

Smoking and vaping raise your baby's risk of Sudden Unexpected Deaths in Infancy (SUDI). Your doctor or child and family health nurse can help you.

You can also call Quitline at **13 QUIT** (13 7848) or go to **icanquit.com.au.**

3 year check-in

Your child may be learning new skills and showing more independence. They may also test limits as they learn about rules and feelings.

Read, talk, sing and play with your child every day to help their development. Limit screen time; your child learns best through real-life interactions.

There is no vaccination at 3 years, but this check is still important to make sure your child is healthy and developing well.

The 3 year check is a chance for your nurse or doctor to see how your child is growing and developing, and to talk about any questions or concerns you have.

Before your visit, take some time to answer the 'Learn the Signs. Act Early.' and 'More questions for parents or carers' questions on the next pages. Bring them with you to share at the appointment.

Some things you might talk about during the check:

- how your child is growing and developing
- keeping up with vaccinations
- toilet training
- healthy eating, active play and limiting screen time
- caring for your child's teeth
- safety at home, in the car, and outdoors
- smoking and vaping
- helping your child manage their behaviour and emotions
- sibling relationships
- going to playgroups or childcare
- sleep and routines
- building a strong bond with your child.

Your nurse or doctor can also help make an action plan to support your child's development at home, and connect you with services if needed.

Learn the Signs. Act Early.

3 years old

Tick the boxes that apply to your child.
Please complete before your child's 3 year check.

	Yes	Not yet
Social and emotional milestones		
Calms down within 10 minutes after you leave them, like at a childcare drop off	☐	☐
Notices other children and joins them to play	☐	☐
Language and communication milestones		
Talks with you in conversation using at least two back-and-forth exchanges	☐	☐
Asks "who," "what," "where," or "why" questions, like "Where is mummy/daddy?"	☐	☐
Says what action is happening in a picture or book when asked, like "running," "eating," or "playing"	☐	☐
Says first name, when asked	☐	☐
Talks well enough for others to understand, most of the time		
Cognitive milestones (learning, thinking, problem-solving)		
Draws a circle when you show them how	☐	☐
Avoids touching hot objects, like a stove, when you warn them	☐	☐
Movement and physical development milestones		
Walks without holding on to anyone or anything	☐	☐
Strings items together, like large beads or macaroni	☐	☐
Puts on some clothes by themself, like loose pants or a jacket	☐	☐
Uses a fork	☐	☐

Concerned about your child's development? Act Early. You know your baby best. Don't wait.

Talk to your child and family health nurse or doctor if your child:

- isn't reaching milestones
- has lost skills they had before
- you have other concerns.

Share your concerns and ask about developmental screening.

Other important things to share

- What are some things you and your child do together?
- What are some things your child likes to do?
- Is there anything your child does or doesn't do that concerns you?
- Has your child lost any skills they once had?
- Does your child have any healthcare needs or were they born prematurely?

Language adapted for Australian English by NSW Ministry of Health. Original content by the U.S. Centers for Disease Control and Prevention's Learn the Signs. Act Early. Program (**cdc.gov/ActEarly**; Jun 2026).

More questions for parents/carers

Answer these questions before you visit your nurse or doctor for the 3 year check. Share your answers with them.

	Yes	No
I've completed the family history and health risk factor questions on page 18	☐	☐
I'm concerned about my child's hearing	☐	☐
Others have said they're concerned about my child's hearing	☐	☐
I'm concerned about my child's vision	☐	☐
My child has a turned or lazy eye (squint or strabismus)	☐	☐
My child has difficulty seeing small objects	☐	☐
My child recognises familiar objects and people from a distance	☐	☐
My child is exposed to smoking or vaping in the home or car	☐	☐
I'm concerned about my child's teeth	☐	☐
My child has pain in their mouth	☐	☐
My child has sweet drinks and snacks throughout the day	☐	☐

If you ticked any shaded box, please let your doctor or nurse know.

Health professional to complete	Normal	Review	Refer
	☐	☐	☐

Notes

You can use this space for anything you want to discuss with your healthcare provider.

Child health check 3 years

Assessment by a child and family health professional

Name

Age at time of check

	Yes	No
Has the parent/carer completed the 3 year Learn the Signs. Act Early. Questions?	☐	☐
Does the parent/carer have any concerns?	☐	☐
Are there any risk factors?		
• hearing	☐	☐
• vision	☐	☐
• oral health	☐	☐

Health and development assessment			**On track**	**Review**	**Refer**
Development			☐	☐	☐
Weight	kg	%	☐	☐	☐
Height	cm	%	☐	☐	☐
Body mass index (BMI)			☐	☐	☐
Eyes			☐	☐	☐
Observation			☐	☐	☐
Corneal light reflection			☐	☐	☐
Fixation			☐	☐	☐
Response to looking with one eye			☐	☐	☐
Eye movements			☐	☐	☐
Oral health 'lift the lip' check			☐	☐	☐
Visible plaque			☐	☐	☐
Bleeding, swollen gums			☐	☐	☐
White spots or carious lesions			☐	☐	☐

Outcome of check	Normal	Review	Refer
	☐	☐	☐

	Yes	No
Age-appropriate vaccination completed as per schedule?	☐	☐
Appropriate health information discussed?	☐	☐

Comments

Action plan

Name of doctor or nurse

Signature

Venue Date of check / /

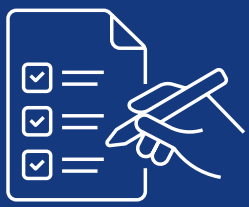
Notes

You can use this space for anything you want to discuss with your healthcare provider.

4 year check

Things to do:

- Book your child's 4 year check and 4 year vaccinations, and get them done
- Complete the 4 year 'Learn the Signs. Act Early' and 'More questions for parents' checklists



Do you or your family need support to quit smoking and vaping?

Smoking and vaping raise your baby's risk of Sudden Unexpected Deaths in Infancy (SUDI). Your doctor or child and family health nurse can help you.

You can also call Quitline at **13 QUIT** (13 7848) or go to **icanquit.com.au.**

4 year check-in

The 4 year check is the last scheduled health and development check. It helps make sure your child is ready to learn and play before starting school.

The check is a chance for your nurse or doctor to see how your child is growing and developing, and to talk about any questions or concerns you have before they start school. Your nurse or doctor can also help make an action plan to support your child's development.

Before your visit, take some time to answer the 'Learn the Signs. Act Early.' and 'More questions for parents or carers' questions on the next pages. Bring them with you to share at the appointment.

Some things you might talk about:

- how your child is growing and developing
- keeping up with vaccinations
- healthy eating, active play and limiting screen time
- caring for your child's teeth
- safety at home, in the car, and outdoors
- smoking and vaping
- helping your child manage their behaviour and emotions
- sibling relationships
- sleep and routines
- building a strong bond with your child
- going to preschool or kindergarten
- for boys: a testes check.

The 4 year check can be done at a child and family health centre or by your doctor, just like the earlier checks.

This check is also available at participating NSW preschools and long daycare centres, through the 'health and development checks in early childhood education and care' program. To get the check at your child's centre, sign the consent form when you get it. Your child's educator will be with them during the check.

More information **health.nsw.gov.au/ECECchecks**

If your child goes to an early childhood education and care service, they'll also be offered free vision screening.

Free vision screening in early childhood education and care

Young children don't always know if they can't see well, and they rarely complain about their vision. Their eyes might look fine, but there could be a problem that's easy to miss.

The only reliable way to know is to check each eye separately. Finding and treating vision problems early gives the best results.

The Statewide Eyesight Preschooler Screening (StEPS) program offers free vision screening for 4-year-olds at NSW preschools and long daycare centres. Health staff visit preschools and long daycare centres to do the vision screening.

It's a quick, easy way to help make sure your child's eyes are developing well before they start school. The check is recommended at age 4, even if your child won't be starting school the following year.

After the check, you'll get a letter with your child's results. If your child's results show a possible issue, see an optometrist or eye doctor as soon as you can. Getting help early gives your child the best chance for strong, healthy vision.

If you have any questions about the results or next steps, contact your local StEPS coordinator at **health.nsw.gov.au/StEPS**

If your child doesn't attend a service, you can organise a vision screening through:

- a local child and family health service
- an optometrist, or
- your doctor.

Learn the Signs. Act Early.

4 years old

Tick the boxes that apply to your child.
Please complete before your child's 4 year check.

	Yes	Not yet
Social and emotional milestones		
Pretends to be something else during play (teacher, superhero, dog)	☐	☐
Asks to go play with children if none are around, like "Can I play with Alex?"	☐	☐
Comforts others who are hurt or sad, like hugging a crying friend	☐	☐
Avoids danger, like not jumping from tall heights at the playground	☐	☐
Likes to be a "helper"	☐	☐
Changes behaviour based on where they are (place of worship, library, playground)	☐	☐
Language and communication milestones	☐	☐
Says sentences with four or more words	☐	☐
Says some words from a song, story, or nursery rhyme	☐	☐
Talks about at least one thing that happened during their day, like "I played soccer."	☐	☐
Answers simple questions like "What is a coat for?" or "What is a crayon for?"	☐	☐
Cognitive milestones (learning, thinking, problem-solving)		
Names a few colours of items	☐	☐
Tells what comes next in a well-known story	☐	☐
Draws a person with three or more body parts	☐	☐

Movement and physical development milestones

Catches a large ball most of the time	☐	☐
Serves themself food or pours water, with adult supervision	☐	☐
Unbuttons some buttons	☐	☐
Holds crayon or pencil between fingers and thumb not a fist	☐	☐

Concerned about your child's development? Act Early. You know your baby best. Don't wait.

Talk to your child and family health nurse or doctor if your child:

- isn't reaching milestones
- has lost skills they had before
- you have other concerns.

Share your concerns and ask about developmental screening.

Other important things to share

- What are some things you and your child do together?
- What are some things your child likes to do?
- Is there anything your child does or doesn't do that concerns you?
- Has your child lost any skills they once had?
- Does your child have any healthcare needs or were they born prematurely?

Language adapted for Australian English by NSW Ministry of Health. Original content by the U.S. Centers for Disease Control and Prevention's Learn the Signs. Act Early. Program (**cdc.gov/ActEarly**; Jun 2026).

More questions for parents/carers

Answer these questions before you visit your nurse or doctor for the 4 year check. Share your answers with them.

	Yes	No
I've completed the family history and health risk factor questions on page 18	☐	☐
I'm concerned about my child's hearing	☐	☐
Others have said they're concerned about my child's hearing	☐	☐
I'm concerned about my child's vision	☐	☐
My child has a turned or lazy eye (squint or strabismus)	☐	☐
My child has difficulty seeing small objects	☐	☐
My child recognises familiar objects and people from a distance	☐	☐
My child is exposed to smoking or vaping in the home or car	☐	☐
I'm concerned about my child's teeth	☐	☐
My child has pain in their mouth	☐	☐
My child has sweet drinks and snacks throughout the day	☐	☐

If you ticked any shaded box, please let your doctor or nurse know.

Health professional to complete	Normal	Review	Refer
	☐	☐	☐

Notes

You can use this space for anything you want to discuss with your healthcare provider.

Child health check 4 years

Assessment by a child and family health professional

Name

Age at time of check

	Yes	No
Has the parent/carer completed the 4 year Learn the Signs. Act Early. Questions?	☐	☐
Does the parent/carer have any concerns?	☐	☐
Are there any risk factors?		
• hearing	☐	☐
• vision	☐	☐
• oral health	☐	☐

Health and development assessment			On track	Review	Refer
Development			☐	☐	☐
Weight	kg	%	☐	☐	☐
Height	cm	%	☐	☐	☐
Body mass index (BMI)			☐	☐	☐
Eyes			☐	☐	☐
Observation			☐	☐	☐
Corneal light reflection			☐	☐	☐
Fixation			☐	☐	☐
Response to looking with one eye			☐	☐	☐
Eye movements			☐	☐	☐

Vision-tested monocularly	Yes	No
	☐	☐

		Normal	Review	Refer	Under Treatment
Outcome		☐	☐	☐	☐
Results	Vision chart * 6m	Right eye	6/	Left eye	6/
	Vision chart * 3m	Right eye	3/	Left eye	3/

Oral health 'lift the lip' check	☐	☐	☐
Visible plaque	☐	☐	☐
Bleeding, swollen gums	☐	☐	☐
White spots or carious lesions	☐	☐	☐
Facial swelling	☐	☐	☐
Testes fully descended R / L (boys only, if appropriate)	☐	☐	☐

Outcome of check	Normal	Review	Refer
	☐	☐	☐

	Yes	No
Age-appropriate vaccination completed as per schedule?	☐	☐
Appropriate health information discussed?	☐	☐

Comments

Action plan

Name of doctor or nurse

Signature

Venue Date of check / /

Primary and high school

Primary and high school

Discover your local public school

NSW public schools offer an outstanding education, helping every child meet their full potential.

Find out more about the opportunities your local public school can offer your child at **education.nsw.gov.au/schools-near-me**.

Getting ready for school

Starting school is a big step for you and your child. Here's how you can help make it a smooth and happy start.

Vaccination and school enrolment

When you enrol your child in a primary or high school, you need to give the school a copy of their immunisation certificate.

If you choose not to vaccinate your child, you can still enrol them without an immunisation certificate. If there's an outbreak of a vaccine-preventable disease, children who are not fully immunised may have to stay home from school until it's safe to return.

Keep monitoring their health and development

Before your child starts school, it's a good idea to book a health check. This helps make sure they're ready to learn and play. It's important to keep monitoring their development as they grow.
More information **raisingchildren.net.au/school-age/development**

As your child starts school, their teachers will become part of their care team. If you or your child's teacher notice any changes in behaviour, learning, or health during the school years, talk to a health professional. Sometimes health issues can affect learning.

It's also recommended that your child has another health assessment before starting high school. This is a time of big changes, and it's a good chance to check their vision, hearing, and overall wellbeing.

Reach out to your child's school to discuss if they need an individual health support plan. The school will help you with this process.

Packing a healthy lunchbox

A healthy lunch can help your child have plenty of energy to learn and play during the day. Packing your child's lunchbox with foods from the 5 food groups can help you child learn better, concentrate for longer, and enjoy playtime with their friends. Don't forget to include a bottle of safe drinking water too.

For helpful tools like a menu planner, recipe ideas, and more, visit **healthyliving.nsw.gov.au/healthy-lunchboxes**

Children with disabilities or additional needs

If your child has a disability or additional needs, or you think they may need added support, contact their school early.

Most schools offer tailored programs and specialist staff to help children succeed. Working with the school early makes the transition to school easier and gives your child a strong start to their education.

Find out more about the inclusive learning support **edu.nsw.link/inclusive-learning-support**

Transition to school

After choosing your local public school, sign up for the school newsletter or follow social media channels. This lets you learn more about the school and stay up to date about open days. You can also start gathering the documents you need to enrol your child. This includes your child's birth certificate or identity documents, proof of address and immunisation history statement.

Many schools offer orientation programs, known as 'transition to school'. These help children starting Kindergarten next year get used to the school environment, to help them feel comfortable and confident. Some tips to help your child feel ready and excited for their first day:

- Be positive and excited about starting school
- Go to your school's orientation days so your child can explore the classrooms, play areas and toilets
- Talk about asking teachers for help and listening to instructions
- Try on the school uniform and shoes ahead of time to make sure everything fits
- Practice opening lunch boxes, using drink bottles, and unwrapping food at home
- Visit the school during regular hours so your child can hear the playground noise and see other children.
- If your child will attend outside of school hours care (OOSH), show them where it is.

Helpful resources:

- Daisy's First Day: a storybook about starting school featuring Australian animals
- Getting ready for primary school, a practical guide for parents and carers
- A video about the transition to school.

Find them at **edu.nsw.link/starting-school**

Outside school hours care

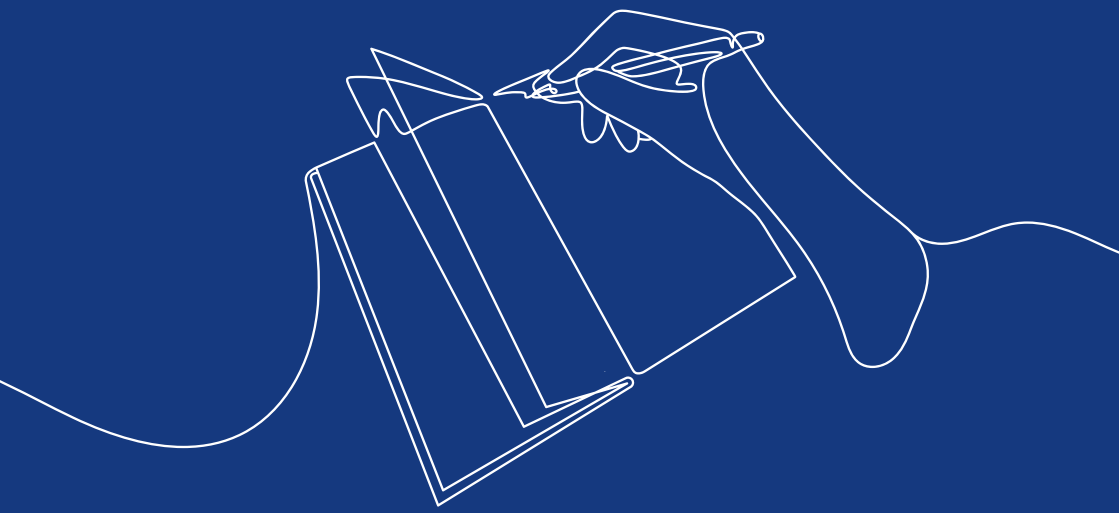
If you need outside school hours care (OOSH) for your child, contact local providers early. Some schools offer on-site OOSH, while others are off-site and may offer transport.

It's best to enrol the year before school starts to avoid waitlists. Visit the service with your child and meet the educators. If your child is beginning Kindergarten, the service may suggest some ongoing visits to help your child feel comfortable and settle in. Speak to the educators about collection and drop off procedures, so your child gets to and from OOSH safely.

Notes

You can use this space for anything you want to discuss with your healthcare provider.

Notes



Notes

This space can be used by anyone who cares for your child. This might be you, other caregivers, health professionals and early childhood educators.

Write down things like observations, illnesses, injuries, surgeries, allergies, hospital visits (including emergencies), or any other serious health or development issues.

Date	Child's age	Notes	Entry made by

Date	Child's age	Notes	Entry made by

Date	Child's age	Notes	Entry made by

Date	Child's age	Notes	Entry made by

Date	Child's age	Notes	Entry made by

Date	Child's age	Notes	Entry made by

Date	Child's age	Notes	Entry made by

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Date	Child's age	Notes	Entry made by

Date	Child's age	Notes	Entry made by

Date	Child's age	Notes	Entry made by

Date	Child's age	Notes	Entry made by

NSW Ambulance

CPR Chart

Cardio Pulmonary Resuscitation

In an emergency remember your **DRSABCD**

D

Danger

Check for **danger** e.g. electrical cords, petrol or other hazards.

R

Response

Check for **response** by talk and touch and squeeze the shoulders.

S

Send for help

If unresponsive, **send** for help by calling Triple Zero (000) and ask for **AMBULANCE**.

A

Airway

Open **airway**, for adults gently tilt head back and lift chin, keep infants head in a neutral position and support the lower jaw. Remove foreign matter from mouth (and nose of baby).

B

Breathing

Check **breathing**, if normal breathing is present leave or place patient on their side.
If normal breathing is absent, commence CPR.

C

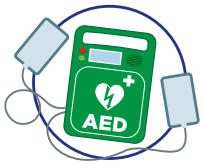
CPR

Start **CPR**, 30 compressions : 2 breaths. Compress the lower half of the sternum **30 times** at a **rate of 100-120 compressions per minute**.

- Using 2 hands for adults
- 1 or 2 hands for a child
- 2 fingers for an infant
- Continue with 30 compressions to 2 breaths
- Interruptions to chest compressions should be minimised.

If you are not willing to give rescue breaths, provide continual chest compressions only.

D



Defibrillation

Attach Automated External **Defibrillator** (AED) as soon as available and follow prompts.

DE732V18

Continue CPR until paramedics arrive and take over or responsiveness or normal breathing returns. Beware of rescuer fatigue, if help is available swap rescuers every two minutes.

GoodSAM
Instant.Help

Help keep them alive, while paramedics arrive.

Become a GoodSAM volunteer and receive alerts to help in nearby CPR emergencies while the paramedics are on the way. Scan the QR code to learn more.

This chart is available to download from the NSW Ambulance website ambulance.nsw.gov.au

This chart conforms to the Australian Resuscitation Guidelines published at www.anzcor.org/home/basic-life-support. May 2026

NSW GOVERNMENT

Support and helplines

Australian Breastfeeding Association

Breastfeeding support 1800 686 268

Karitane Careline

Sleeping, feeding and development advice 1300 227 464

Tresillian Parents Help Line

Sleeping, feeding and development advice 1300 272 736

PANDA Helpline

Perinatal anxiety and depression support 1300 726 306

Lifeline

Crisis support and suicide prevention 13 11 14

13 YARN

Crisis support for Aboriginal people 13 92 76

1800RESPECT

Domestic and family violence support 1800 737 732

Child Protection Helpline

Report concerns for a child 13 21 11

Need an interpreter to call these helplines?

Contact the Translating and Interpreting Service on 131 450.

Call healthdirect

For free instant health advice anytime, anywhere.
You'll speak to a registered nurse who will help you get the care your child needs.

1800 022 222

In an emergency

Call Triple Zero (000) for Ambulance, Fire or Police.

Call 13 11 26 for Poisons Information Helpline.

You'll also find helpful contact numbers on the previous page.

This book is for you

Inside, you'll find helpful information to support your child's health, growth, and development.

It's also a place to keep track of your child's:

- health and development checks
- vaccinations
- milestones
- illnesses and injuries.

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