



Bedfordshire  
Community  
Health Services



# 3 month review



## Three month baby check and Parent/Carer mental health review - Professionals Guide

Bedfordshire adult and children's community health services are provided in partnership by East London NHS Foundation Trust (ELFT) and Cambridgeshire Community Services (CCS) NHS Trust

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After your initial introduction to parents and child, begin your session by completing the growth monitoring – weight, length and head circumference and record in the red book. Allow the family time to settle and then use the discussion cards to allow the family to guide the conversation, focusing on their specific needs. The information on the cards not identified by the family needs to be weaved through the conversation – ensuring that every topic is discussed. This booklet gives detailed information, with clear, concise health and education messaging.

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# Introducing Solids

- Introduction of solid food at 6 months is complimentary to breast or formula milk. Milk remains the baby's main source of nutrients up until 12 months of age.
- Wait until baby is 6 months old as their immune and digestive systems aren't ready for foods until then. If food is introduced before 6 months the baby will take a reduced amount of milk and is at increased risk of developing allergies and obesity.
- Signs baby is ready for solid foods are that they are able to:-
  - sit upright unsupported,
  - co-ordinate eyes, hand and mouth so that they can pick food up and put it in their mouth,
  - Swallow food.
- Encourage responsive feeding – watch for when baby is hungry and full (do not make them finish something) and create a relaxed and fun environment allowing babies to explore taste, texture, colour and smell. This helps to develop their hand-eye coordination and chewing skills.
- Food before one year is mainly for fun and encourages independence and confidence.



- Start with tastes: perhaps just once a day
  - Mashed or soft textured initially: no need for purees
  - Start off Savoury
  - Vegetables: softer choices such as cooked broccoli, carrot, cauliflower, courgette
  - Starchy foods: pasta, potato, rice, sweet potato, porridge
  - Protein: well cooked eggs, chicken, fish, other meats, lentils, tofu, butter beans
  - Dairy: Unsweetened yoghurts, cottage cheese
  - Once savoury tastes have been established start introducing fruits: cooked pear or apple, banana, melon, canned fruit in juice.
- The first 6 months is about having fun! You will gradually see your baby building up to 3 meals a day with 2-3 snacks by age 1.
- Signpost to Start 4 Life and First Steps Nutrition.
- NEVER leave your baby alone with food
- Gagging is normal in babies as they explore new tastes and textures. If the child is going red and making a noise this is gagging and is normal as they protect their airway
- Choking is however a cause of injury and death because their small airways may be easily obstructed and they may not be able to cough forcefully enough to dislodge an airway obstruction. The child may go silent and gasp, turning blue very quickly.
- Never give babies pieces of sausage with their skin on, whole grapes or whole cherry tomatoes, popcorn, marshmallows or chunks of raw vegetables or fruit.
- From 6 months of age, infants should be introduced to drinking from a cup or beaker with their meal.



Signpost to 'Start 4 life' and 'first steps nutrition'.



# Feeding/Milk

- Breast milk (or formula) is all baby needs until about 6 months when some solid food can be introduced.
- Many babies have a developmental leap at around 3-4 months of age. They may wake more frequently and feed more often. This is NOT a sign that they need solid foods. Encourage families to comfort and feed their babies as required as this will encourage optimal brain development.
- Babies will wake more at night at about 3-4 months wanting comfort/reassurance as they go through their developmental leap. Encourage families to comfort and feed their baby offering the breast as a comfort - this is normal.
- Babies are becoming more aware and observing their surroundings. They don't want to miss anything and can therefore be very distracted during feeds. Try to feed in a quiet place, away from distraction.
- Feeding baby for comfort is needed during 3-4 month developmental leap to support them and to encourage brain development.
- Feeding for comfort for mum at this time enables relief from full breasts and feeding before they go out makes it easier as less likely to want a feed – eg on the school run or going to the supermarket.
- Babies may well be holding the bottle independently, but it is unsafe to leave the baby with the bottle propped up – this is a choking risk.



# Sleep

- Encourage parents to keep baby in the same room as so that they are able to hear and respond to them quickly
- It is normal for babies to wake in the night



- Babies wake because they are hungry, their nappy needs changing or they need comfort
- During these times encourage parents to comfort them with cuddles and to breastfeed
- Breastfeeding at night supports optimal milk supply as this is the point when the hormone prolactin (milk making hormone) is at its peak.
- Introducing a routine will NOT make babies sleep through the night
- Being responsive to baby in the night will support their brain development.
- At 3-4 months the baby's developing brain does not have the ability to manipulate or be 'naughty'. So babies' behaviour is indicative of what they are dealing with at that time and supporting them with cuddles is the right thing to do. It is NOT possible to spoil a baby.
- Do not leave babies to cry and "self-soothe" as this will cause increased stress levels and have a detrimental effect on their brain development.

# Socialising and Playing

- Babies will be smiling and chuckling and will want to engage and interact with others.
- Babies enjoy being around other babies because they learn to navigate new environments, play with different toys and learn new social cues. Most babies participate in “parallel play,” or playing side-by-side, before directly interacting with other children.
- Encourage families to take it in turns with their baby to smile and making noises at each other (serve and return interaction).
- Encourage parents to narrate what they are doing as this will mean baby hears more words, boosting their verbal and cognitive skills.
- Being responsive parents means providing their baby with a feeling of security and comfort which in turn will give them the confidence to start developing deeper relationships with others and develop their social skills.
- Parents are to start to encourage their baby to interact with others whilst always being close to provide support, encouragement and reassurance if needed.



# Crying

- Crying is normal and an instinctive way of baby communicating.
- Encourage parents to pick up their crying infant so as to reduce their stress and provide them with comfort in the form of a cuddle and/or breastfeed.
- You cannot spoil a baby by picking them up and cuddling them too often.
- The use of controlled crying will NOT change their behaviour as their brain does not have the capability to understand cause and effect.
- If parents are struggling to cope with their baby crying especially at night – discuss ICON.
- Infant crying is normal and it will stop.
- Comforting methods will soothe and support baby to stop the crying.
- Ok to put baby in a safe place and walk away for a minute to remain calm.
- Never shake or hurt the baby.



# Illness

- Support mum and baby to stay together as mum will develop antibodies to the pathogens around them, reducing the likely severity of illness in baby.



- First aid classes available.
- Discuss the Lullaby trust baby check app as a tool to see if baby is poorly and where to seek support.

# Staying Safe

- Encourage parents to identify any risks/dangers around the house and garden, ie blind cords.
- Secure or move out of reach all plugs with chargers for laptop/ mobile phones
- Hair straighteners are a risk for baby to incur burns from.
- Parents to be aware of the risks of a busy kitchen especially when a meal is being prepared and baby is crawling on the floor
- There is a great risk of falls as they become more mobile– use a stairgate and reduce risk around steps
- Open fires, log burners and radiators are a risk – to protect the area with a guard
- Ensure that all cleaning products, washing machine soap, poisons and medicines are stored securely and be mindful of them being secure in handbags – eg sachets and tablets
- Car seat safety



# Immunisations

- Give the most up-to-date regime
- Is the baby currently up to date with the immunisation program
- To give paracetamol if in pain or a temperature develops following an immunisation



# Growing my Baby's brain

- When babies are born they will have in the region of 200 billion brain cells. Over the first five years of life around 90% of brain growth occurs as these brain cells connect together via synapses.
- The first 1001 days are the most important in making as many connections as possible.
- Synapses or connections are formed and unformed and reformed due to the interactions that our babies have. Scientists call this type of interaction 'serve and return': When a baby makes a sound or wriggles or makes a funny face the adult/parent responds in words or actions. It's like a tennis match passing backwards and forwards between you.
- Being responsive to a baby's movements and cues, and spending time cuddling and holding them fertilises their brain and supports it's development and growth.



# Sudden Infant Death Syndrome (SIDS)

- The safest place for a baby to sleep is in their parents' room in their own sleep space.
- Laying baby on their back for every sleep, day and night, is one of the most protective actions that can be taken.
- Once baby can move from their back to their front and back again, by themselves, they will be able to find their own comfortable sleeping position.
- Keep cots as clear as possible ensuring NO pillows or duvets, NO cot bumpers, NO soft toys, NO loose bedding, NO products (such as wedges or straps) that will keep your baby in one sleeping position. These all increase the risk of suffocation.



- For safer co-sleeping:-
  - Keep pillows, sheets, blankets away from baby or any other items that could obstruct the baby's breathing or cause them to overheat.
  - Avoid letting pets or other children in the bed
  - Make sure baby won't fall out of bed or get trapped between the mattress and the wall. Baby on outside of bed next to mother, NOT between parents.
- Do NOT co-sleep if :-
  - Either parent smokes (even if you do not smoke in the bedroom)
  - Either parent has drunk alcohol or taken drugs (including medications that may make you drowsy)
  - Baby was born premature (before 37 weeks)
  - Baby was born at a low weight (2.5kg or 5½ lbs or less)
- Never sleep on a sofa or armchair with a baby. This can increase the risk of SIDS by 50 times
- Sign post to Lullaby Trust for more details. (BASIS)



# Parent/Carer Mental Health Review

*Practitioners to score as directed on card and flowchart*

## **Ask the Whooley questions as on the card**

- During the past month, have you been bothered by feeling down, depressed or hopeless? YES/NO
- During the past month, have you often been bothered by having little interest or pleasure in doing things? YES/NO

## **Ask the Generalised Anxiety Disorder (GAD 2) questions**

- Over the last 2 weeks how often have you been bothered by feeling nervous, anxious or on edge?
- Over the last 2 weeks how often have you not been able to stop or control worrying?
  - Not at all 0
  - Several days 1
  - More than half the days 2
  - Nearly every day 3



# Ask mother these questions

## **Whoolley questions** - Positive score is Yes to either question

- During the past month, have you been bothered by feeling down, depressed or hopeless? YES/NO
- During the past month, have you often been bothered by having little interest or pleasure in doing things? YES/NO

## **GAD 2 questions** - Positive Score is 3 (or more)

Not at all (0), Several days (1), More than half the days (2),  
Nearly every day (3)

- Over the last 2 weeks how often have you been bothered by feeling nervous, anxious or on edge?
- Over the last 2 weeks how often have you not been able to stop or control worrying?



### **Positive score(s) to screening questions:**

Whoolley: Yes to either question  
GAD 2 – Score of 3 (or more)



CNN - Task PIMH Champion Group on S1

CNN – Advise client of further contact by HV

CNN – Task allocated HV for UPP clients

PIMH Champions to uptake initial triage, referral on and/or short term intervention for Universal clients only

### **Negative score to both Whoolley and GAD 2**

No further action from the CNN

Highlight Health HUB contact details should this change

# Perinatal Mental Health

A 'perinatal' mental health problem is one that you experience any time from becoming pregnant up to a year after you give birth, even if you have never experienced this before.

Having a baby is a big life event. It's natural to experience a range of emotions during pregnancy and after giving birth. But if any difficult feelings start to have a big effect on your day-to-day life, the way you think, feel or function, you might be experiencing a perinatal mental health problem.

This may be a new mental health problem, or an episode of a problem you've experienced in the past; either way, your Health Visiting team (0300 555 0606) will want to know to be able to support you and your family and ensure that you get the right level of services to meet your needs. They will talk with you openly about your mental and emotional health and offer supportive advice and interventions where needed.

## Red Flag symptoms and Emergency Details



1. Recent significant change in mental state or emergence of new symptoms
2. New thoughts or acts of violent self harm
3. New and persistent expressions of incompetency as a mother or estrangement from the infant

Any client with red flag symptoms and/or needing immediate follow up should be referred to:-

- Client own GP - facilitate appointment
- NHS 111 option 2
- Crisis team 01234 299921

However you are feeling, you are not the only one, so please share.

For more information:

[www.mind.org.uk/information-support/types-of-mental-health-problems/postnatal-depression-and-perinatal-mental-health/about-maternal-mental-health-problems](http://www.mind.org.uk/information-support/types-of-mental-health-problems/postnatal-depression-and-perinatal-mental-health/about-maternal-mental-health-problems)

# PND RESOURCES

PND MUMMIES

## Supporting Perinatal Mental Health

### MIND

#### Mental Health Charity

Mind offer advice and support to people who are suffering with mental health problems. You can contact them on their helpline on 0300 123 3393 (9am to 6pm, Monday to Friday) or email [info@mind.org.uk](mailto:info@mind.org.uk) - <https://www.mind.org.uk/>

### PANDAS

#### Pre and Postnatal Depression Advice and Support

PANDAS also offers advice and support to people who are suffering from Perinatal Mental Health, they have online support and an option to search for local groups

- <https://www.pandasfoundation.org.uk/>
- Find a local support group <https://www.pandasfoundation.org.uk/support-groups-local/>

### NHS

The NHS website offers guidance on what help is available through the NHS, they also have a library of digital resources

<https://www.nhs.uk/conditions/pregnancy-and-baby/mental-health-problems-pregnancy-and-baby/>

<https://www.nhs.uk/apps-library/category/mental-health/>

### GOV.UK

The Gov.uk website has a range of resources and links to studies about Perinatal Depression that you may find helpful

<https://www.gov.uk/government/publications/better-mental-health-jsna-toolkit/4-perinatal-mental-health>

### PND MUMMIES

PND Mummies is a Community Interest Company (not-for-profit) organised by Nicola Carter to support women and families suffering from Perinatal Mental Health

<https://www.pndmummies.org/>

<https://www.facebook.com/PNDMummies>

PND MUMMIES

# The Transition to motherhood

What I did not expect

What I expected



@psychedmummy

## For further information about this service contact:

The Health Visiting teams in your local area are happy to answer any queries or concerns. Call our Children's Community Health HUB (Mon - Fri during office hours)

Children's Community  
**Health HUB**

**0300 555 0606**

## Health Visitor Duty Information - visit:

[www.cambscommunityservices.nhs.uk/services/the-ccs-community/divisions/bedfordshire-services/resources/beds-health-visiting-duty-information](http://www.cambscommunityservices.nhs.uk/services/the-ccs-community/divisions/bedfordshire-services/resources/beds-health-visiting-duty-information)



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If you have any compliments about this service or suggestions for improvements, contact our Patient Advice and Liaison Service on 0300 131 1000 (charges may apply depending on your network) or email: [ccs-tr.pals@nhs.net](mailto:ccs-tr.pals@nhs.net).

For free, confidential health advice and information 24 hours a day, 365 days a year please contact NHS 111.