

Newsletter 12: December 2025

Welcome to our Christmas newsletter. In this edition we showcase some of the key areas of work over the past 6 months, from breastfeeding to newborn screening and lots more besides.

As highlighted in an article on page 7 looking at data and information, one quarter (25%) of Ireland's population are children. When you consider children and young people together (0 to 24 years), they make up a third of the population. We will continue our efforts to put them at the centre of policy and health service development in 2026 - and hope that new robust child health indicators (see page 5) will support those involved in shaping population health strategies and designing health and social care services.

I wish to thank all our colleagues for your dedication in helping to deliver the clinical programmes and your work to improve supports and health for children and families.

Merry Christmas,

Dr Abigail Collins

National Clinical Lead for the HSE's Child Health Public Health Programme



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Important advice as flu levels surge among children

As you know, we are seeing high levels of flu among children aged 0 to 4 at the moment. As Christmas approaches, more social gatherings may increase the spread of flu.

Flu is generally a mild illness among children. It can also cause serious infection in some children – they may need to be admitted to hospital for treatment. The below advice may be helpful for parents and other family members in the run-up to Christmas and over the holidays.

Preventing the spread of illnesses

Key prevention measures include:

- coughing and sneezing into the corner of the elbow or covering coughs and sneezes with a tissue
- washing hands regularly and after coughs and sneezes
- being up to date on all recommended vaccines.

Flu symptoms

A cold or a cough can be a symptom of flu. If your child has other flu symptoms, or seems unwell in themselves, keep them at home for at least 5 days after their symptoms began.

Other symptoms include:

- a high temperature of 38 degrees Celsius or higher
- aches and pains
- tiredness
- sore throat
- headaches.



Common cold and flu symptoms are similar, but flu tends to be more severe. Flu and COVID-19 can also be very similar. Find advice on the HSE's mychild.ie – '[Flu - symptoms, diagnosis and treatment](#)'.

Advice on other common illnesses

You can find advice on other common viral illnesses on mychild.ie - '[Colds, coughs and other viral infections in children](#)'. This includes RSV, winter vomiting bug (norovirus) and others.



Flora Gusmão Martins and **Caetano** (3 months), **Daria Sexton** and **Xena** (8 months), **Katherine Nolan** and **Isla** (2 years) and **Eimear Hughes** and **Gabriel** (8 months)

Photo: Mark Stedman



National Breastfeeding Week highlights power of skin-to-skin contact

'Hold me close: The power of skin-to-skin contact' was the theme of this year's [HSE National Breastfeeding Week](#), which ran from 1 to 7 October.

It highlighted the benefits of safe skin-to-skin contact in supporting feeding, bonding and recovery after birth.

The annual event was launched this year at Grangegorman Primary Care Centre in Dublin and received widespread media coverage thanks to support from the Press Office, including the front page of the following day's Irish Times (pictured right).

Stories of mothers being supported by HSE staff were featured across national and regional media, including ['My baby started chemo at two weeks old — breastfeeding was a lifesaver'](#).

The National Women and Infants Health Programme in partnership with the National Perinatal Epidemiology Centre (NPEC), also announced a new [infant feeding survey](#) for mothers to share feedback on their experiences of feeding support from maternity and community healthcare professionals during pregnancy and after birth.



Eimear Hughes (right) with Gabriel (eight months), front, along with Daria Sexton, baby Xena (eight months), Flora Gusmão, baby Caetano (three months) and Katherine Nolan with baby Isla (2) at the launch of the HSE National Breastfeeding Week 2025. Photograph: Dara Mac Donnell

Along with events held in hospitals and community settings across the country, the week also saw the launch in the Coombe Hospital of a new video on antenatal colostrum harvesting (see page 11).

See mychild.ie/breastfeeding for more information.



Breastfeeding rates on the rise in Ireland

More than 65 per cent of babies were breastfed during their first feed after birth in 2024

Safe skin-to-skin contact key for new mothers, HSE breastfeeding experts say



Pictured at a photocall in Grangegorman Primary Care Centre in Dublin 7 to mark the start of HSE National Breastfeeding Week, which runs from 1-7 October, are: Flora Gusmão Martins and baby Caetano (3 months), Eimear Hughes and baby Gabriel (8 months), Daria Sexton and baby Xena (8 months) and Katherine Nolan and baby Isla (2 years)

More pictures from the week are on pages 16 and 17.



PHN students attend breastfeeding skills training at UCC



Back row: Left to right: **Dr Margaret Murphy** (Programme Director, BSc in Midwifery, UCC), **Mary O'Regan-Hyde**, (Lecturer, Midwifery, UCC), **Aimee Tebay** (Candidate Advanced Midwife Practitioner in Infant Feeding), **Dr Helen Mulcahy** (Senior Lecturer, UCC and NIFEP Curriculum design group) and **Mary King** (Public Health Nurse and Infant Feeding Specialist, North Cork, HSE)

Front row: **Sheila Lucey** (Public Health Nurse and Advanced Nurse Practitioner, HSE South West), **Catherine Buckley** (Public Health Nurse and Lactation Consultant, Cork South Lee, HSE) and **Elaine O'Sullivan** (Public Health Nurse and Lactation Consultant, Cork South Lee, HSE)

On November 18th, University College Cork's School of Nursing and Midwifery hosted the National Infant Feeding Education Programme (NIFEP) for higher education students.

The session brought together public health nursing and midwifery students for a full day of breastfeeding skills training, supported by experienced facilitators and academic staff. This initiative represents the first structured rollout of the programme in a university setting, following pilot evaluations in 2024.

With national backing, the programme will expand to other institutions in 2026, ensuring public health nursing and midwifery graduates are prepared to support breastfeeding families. The event reinforced the value of maternity, community and academic collaborative partnerships for effective educational outcomes.

Breastfeeding skills attendees rate training experience highly

Over 630 staff have completed breastfeeding skills training since July 2024 as part of the national infant feeding education programme. Training has taken place in 21+ training sites across maternity and primary care centres. In 2025, 39 breastfeeding skills sessions were facilitated by 12 centres of nursing/midwifery education.

Attendees rate the training received as being very high quality with high self-confidence scores at the end of the sessions. Staff also value the mix of acute and community experience in delivering the sessions and attending the training with professionals working in other areas.

Newborn screening annual report

Through newborn bloodspot and hearing screening, we supports early detection of infants with very serious clinical conditions and permanent childhood hearing loss (PCHL) at the earliest possible opportunity, thereby enabling early intervention and reducing morbidity and mortality in our population.

The 2024 annual report of the HSE National Healthy Childhood Programme Screening Programmes has been published. Last year 143 babies were diagnosed with a rare condition through the NNBSPP and 68 babies

were diagnosed with PCHL through UNHSP. These babies all entered directly into appropriate clinical care pathways. The acceptability of the two screening programmes amongst parents continues to be extremely high at over 99% for both screening programmes.

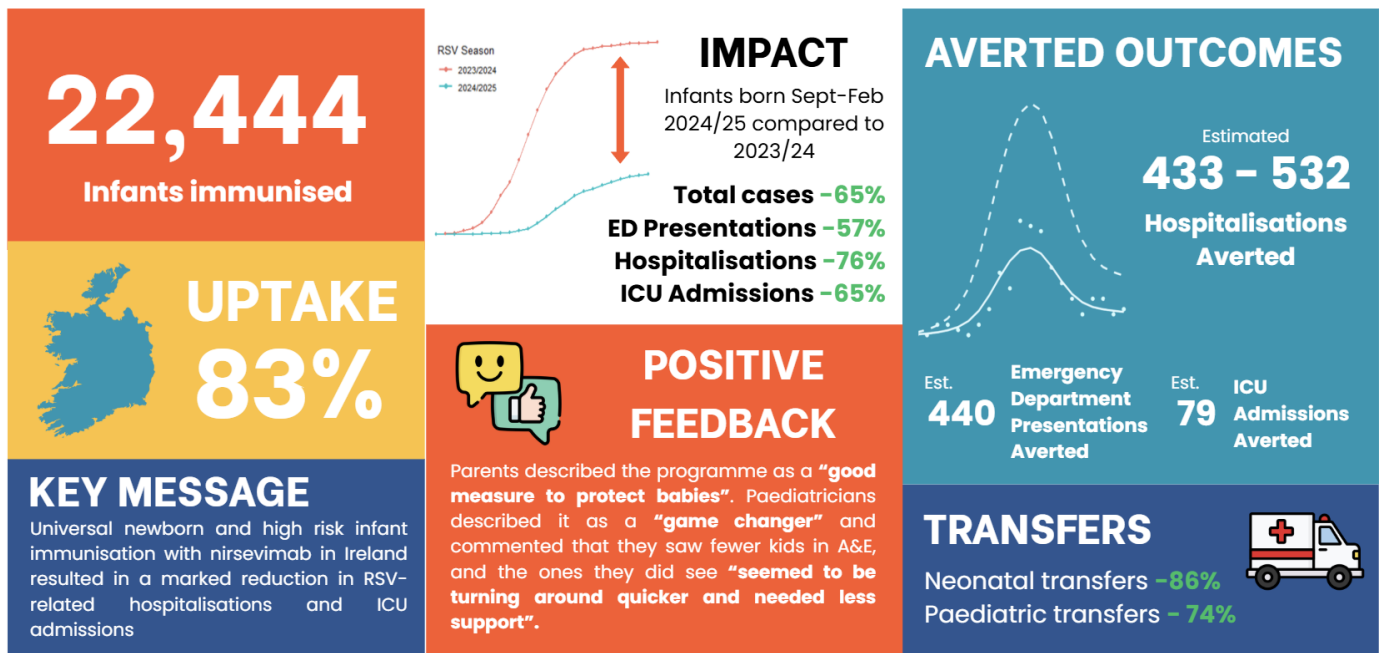
Many staff across the health services are involved in delivering these critical screening programmes, particularly across primary care, maternity and paediatric services, and it is important to thank them for their commitment and dedication to this work.



mychild.ie



Infographic: RSV immunisation impact



Outcomes of the RSV Immunisation Pathfinder Programme 2024/25

Respiratory syncytial virus (RSV) is a common winter virus that can be very severe for young infants.

The RSV immunisation (nirsevimab) will be available to newborn babies in maternity hospitals until 28 February 2026.

Please encourage any pregnant women to have this immunisation over the RSV season.

Sharing key messages with parents through mychild.ie PR

Over the past few months, we shared a number of press releases with support from colleagues in the Press Office to help parents with simple tips and advice.

In late August we shared [back to school advice](#), with guidance on getting sleep and routines on track, choosing the right school bag and shoes, and keeping those classroom bugs at bay. **Dr Abigail Collins** spoke to **Claire Byrne** on RTÉ Radio One about her top tips, which were also published in a number of websites.

We put out another release before Halloween, covering everything from costume safety to choking hazards and button batteries. It got great media interest, including from [everymum.ie](#), and Dr Collins spoke to **Claire Byrne** on her show again. To tie with the press release, Dr Katharine Harkin also wrote an article for the [Irish Examiner](#) about her working life and the important role her team plays in supporting the school health programme.

A [press release](#) has just been published ahead of the Christmas holidays including advice on dealing with ‘ho-ho-no’ moments when children are overwhelmed, ‘elf and safety’ when visiting other homes and helping to keep newborn babies safe from viruses this ‘Kiss-mas’.

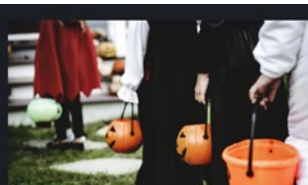


HSE shares its 2025 tips for a healthier, happier Christmas

Keeping your children safe and healthy this Halloween

CLIP • 10 MINS • 28 OCT • TODAY WITH CLAIRE BYRNE

Dr. Abigail Collins, National Clinical Lead for the HSE's Child Health Public Health Programme and Consultant in Public Health Medicine



ADVICE Trick or treat

Parents are all urged to carve out safety time



Children and young people indicators published to accompany vision paper

To mark World Children's Day on 20th November, colleagues came together to publish 'Children and Young People Health Indicators'.

This serves as a robust and actionable resource for those shaping population health strategies and designing health and social care services for children and young people (CYP) in Ireland, who represent nearly one-third of our population.

This document complements the 2024 paper, 'A Vision for the Health and Wellbeing of Children and Young People in Ireland' and demonstrates the importance of systematic monitoring of CYP health indicators. It offers a pragmatic starting point for this work.

A population health approach that uses data systematically to assess CYP health and co-ordinate proactive care across local services will help us better understand their distinct and evolving needs so that we can support them to live their best, healthiest lives.

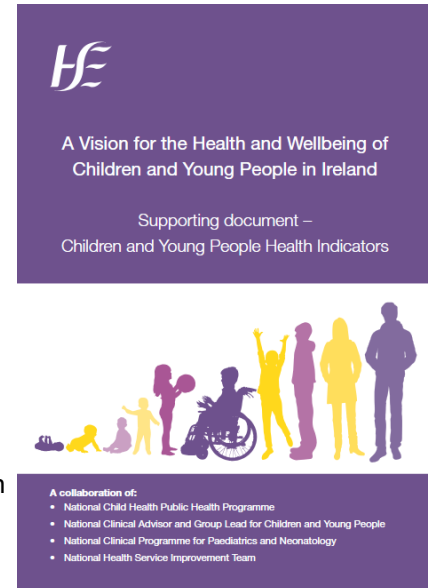
A supporting technical document to assist with the completion of a CYP health indicators profile will be available in early 2026.

This publication is a collaboration between:

- National Child Health Public Health Programme
- National Clinical Advisor and Group Lead for Children and Young People
- National Clinical Programme for Paediatrics and Neonatology
- National Health Service Improvement Team

Thank you to everyone involved in this publication, including clinical experts in disability, obesity, diabetes, oral and mental health, who provided valuable input.

The CYP health indicators document can be found on the HSE website [here](#).



Strengthening child mortality data

Development of new electronic notification system is underway

The development of an electronic notification process for the National Paediatric Mortality Register (NPMR) is underway which will include all children and young people up to and including 18 completed years.

The NPMR began as an extension of the SIDS Register, established in 1992 at CHI Temple Street. Data from the register informed the "Back to Sleep" campaign, which helped reduce SIDS deaths from about 134 to fewer than 30 per year. Its success led to a proposal to expand the register to include deaths in older children. The register was renamed the National Paediatric Mortality Register as a collaboration between the three paediatric hospitals. An initial notification process was introduced in CHI Temple Street, and the NPMR transferred to NOCA in 2020 to support national implementation.

NPMR have published two reports under NOCA governance. Clinically led by Associate Professor **Prof Martina Healy**, Department of Anaesthesia and Critical Care, CHI at Crumlin, and chaired by **Prof Michael Barrett**, Department of Paediatric Emergency Medicine, CHI at Crumlin, the first report highlighted major gaps in national child mortality data and the need for more detailed, timely information to support evidence-based recommendations.

International models show that effective child death review systems rely on mandatory, timely reporting to a centralised electronic platform ([NOCA 2023](#)). The second published in Feb 2025 provides an overview of child mortality and highlights the avoidable nature of many of these deaths which underscores the need for a universal, centralised system for the notification of deaths that enables timely analysis of mortality data ([NOCA, 2025](#)).

A working group has been established in NOCA to develop the methodology for the digitisation of the NPMR child death notification process, in close collaboration with clinical stakeholders.

The new electronic process will build on existing hospital practices for notifying a child or young person's death. Patient and Public Interest representatives emphasised the need for a clear, concise family information leaflet, along with appropriate bereavement supports. Engagement with international experts has provided shared learning, opportunities for data sharing, and potential for international benchmarking.

Throughout development, NOCA has sought alignment with the HSE Death Notification Process to reduce the burden of data collection. The NPMR electronic notification tool is now at the final testing stage. Phase 1 will begin in 2026 at all National Children's Health Ireland sites and at University Hospital Limerick, before being rolled out nationally on a phased basis.



Did you know?

New data sharing framework to support services for children in IPAS

A framework for data sharing and collaboration to plan and deliver services for children living in International Protection Accommodation Services has recently been published.

The framework outlines the legal basis for sharing data received by the National Inclusion Office with frontline HSE services such as catch-up vaccination teams and public health nursing. It describes all the different types of data available to plan and deliver services.

The framework also outlines how local social inclusion teams, catch-up vaccinators and PHNs might work together to streamline services for families.

If you are a PHN and want access to the framework document, email us at healthy.childhood@hse.ie

Early Talk Boost: A cost-effective targeted programme for children with language delay


Early Talk Boost (ETB) is a targeted programme for children aged 3 to 4 years with delayed language skills. It is a community-based intervention delivered over nine weeks in children's early years settings by early years practitioners, supported by HSE community speech and language therapists (SLT).

ETB has been running successfully in parts of Ireland for a number of years. Its recent independent evaluation found that the programme significantly improved language skills across all domains measured, and positively contributed to children's confidence, social and emotional development. These improvements resulted in a net expected reduction in community SLT referrals following programme delivery.



We conducted an economic evaluation of ETB from the HSE's perspective. The costs associated with ETB delivery include community SLT hours required for training of the early years staff in each setting and co-delivery of the programme. The direct costs associated with delivering ETB is €1,523 per early years setting (mean cost per child of €36), over a four-year period. When the costs of the expected averted referrals (including community SLT hours required for assessment and treatment) are considered, implementation of ETB realises €4,677 in cost savings and results in 14.5 fewer community SLT referrals per early years setting over a four-year period as compared to no programme delivery.

At a national level, if ETB was delivered to all Equal Start Tier 1 and 2 preschools it could result in net savings for the HSE of just over €3 million, and 9,474 fewer community SLT referrals over four years. These findings show that investing community SLT resources into this programme can have clear benefits to the HSE, both in terms of economic and service capacity. This evaluation does not take into account the beneficial impact of ETB on the health, social and emotional wellbeing of children, nor does it include the long-term economic benefits of improved educational attainment later in life. So the impact is likely a conservative estimate of its cost-effectiveness.



E-Scooters are not for kids!

Injuries are rising - keep children safe.

Know The Rules

"E-scooters are now the leading cause of traumatic brain injury in children admitted to CHI - many of these injuries are life-changing."


- Age **16+** only.
- Helmet on - always.
- Use knee, elbow, and wrist guards.
- Wear bright/reflective clothing.
- Max speed 20 km/h.
- Don't use the footpath

Know The Risks

- Serious head injuries, broken bones, long-term disabilities.
- Children **under 16 years** should **not** use e-scooters (Irish law).

Parents/Guardians Think Before You Gift

Don't buy e-scooters for children under 16. They are not toys.



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New campaign highlights rising e-scooter injuries

E-scooter injuries among children are rising, becoming the leading cause of traumatic brain injury in children admitted to Children's Health Ireland (CHI).

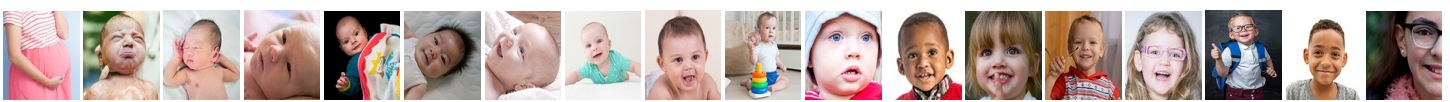
More than 20 children suffered serious brain injury from e-scooters last year.

Many of those now live with permanent disabilities.

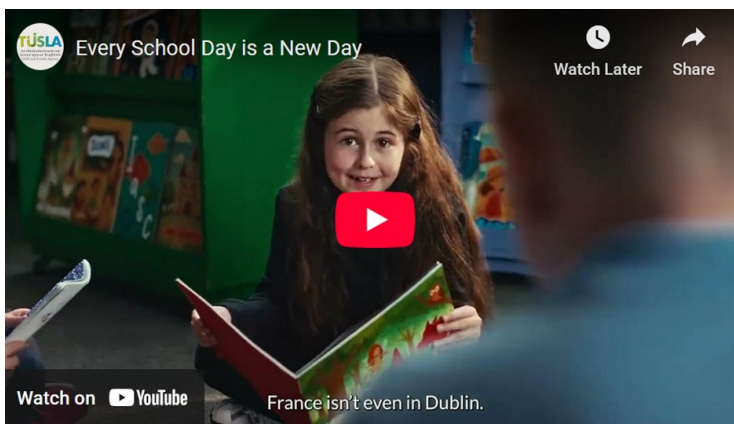
It is illegal for children under 16 to ride e-scooters in Ireland.

Parents are strongly advised: e-scooters are not toys and should not be given to children under 16 years of age.

There is information about the [campaign](#) on the CHI website.



Government launch new school attendance campaign



A new campaign was launched by Minister for Education **Helen McEntee TD** in partnership with the Tusla Education Support Service (TESS) to promote regular school attendance across Ireland.

Data from TESS shows more than one in five children and young people at primary and post-primary level miss more than 20 days of their school year.

The new multi-platform campaign seeks to help address absenteeism by encouraging everyone involved in the lives of children and young people – including parents, guardians, teachers, and

communities – to support and prioritise regular school attendance. The campaign's message is that when children are not in school, they miss out on learning, friendships, and the chance to grow.

Information and resources for parents and school are available on a new Government web page – gov.ie/schoolattendance, which is being promoted through a multi-media campaign.

To coincide with the campaign, a new website guide has been developed for mychild.ie – '[Knowing if your child is well enough to go to school or childcare](#)'.

This guide includes:

- when it's OK to send your child to school or childcare
- when to keep your child at home from school or childcare
- ways to support your child if they are feeling anxious or worried
- how to keep vaccines updated and prepare for sick days.

*Keep an ear out for an upcoming HSE Talking Health and Wellbeing podcast about ways to support children to attend school with guests **Áine O'Keeffe**, Director of Tusla Education Support Service (TESS), and **Dr Abigail Collins**, HSE National Clinical Lead, Child Health Public Health.*

Planning recruitment of parents for research?

The mychild.ie [Instagram](#) and [Facebook](#) offer a targeted channel to reach parents. A new process has been developed for researchers who wish to apply for a social media post to recruit parents for research projects. A request form is available by emailing healthy.childhood@hse.ie. Not all requests can be facilitated but we will consider all completed forms.

Developing new videos for parents?

Video can be a great medium for helping people to understand information and is particularly important for social media. If you are considering developing a video for parents that could be used on mychild.ie, please get in touch with the National Healthy Childhood Programme at healthy.childhood@hse.ie at an early stage.

We can help you to identify user needs, discuss important considerations and signpost to resources relating to plain language, accessibility and consent.





Newborn bloodspot screening: parent experience and attitudes



In focus

The National Newborn Bloodspot Screening Programme (NNBSP), established in 1966, plays a vital role in early detection of rare conditions. The programme screens babies for 9 rare conditions, with work underway to add screening for 2 more conditions in 2026 – severe combined immunodeficiency (SCID) and spinal muscular atrophy (SMA).

In 2025, the NNBSP undertook a survey to explore parent experience and attitudes towards Newborn Bloodspot Screening (NBS). 151 parents whose babies received normal screening results between December 2023 and January 2025 were surveyed. The survey explored overall experience of NBS, parent satisfaction with amount and quality of information provided, and suggestions for improvements to the bloodspot screening programme.

Findings showed overwhelming support for NBS, with 100% of parents glad their baby was screened. Nine out of ten (93%) parents favour expansion of the programme to screen for more conditions, provided that no additional blood sampling is needed from the baby. Most parents (95%) felt that they received the information required to understand why screening is important for their baby.

Positive experiences of screening reported by parents included the fact that the blood sample can be taken in the home by the public health nurse (PHN), the kindness of PHNs, and being given practical advice to make sample taking easier, such as being advised to keep the baby's heel warm in advance of the sample being taken.

"The public health nurse was very kind. It was very convenient to have the test done in our home and not to have to leave the house with a newborn."

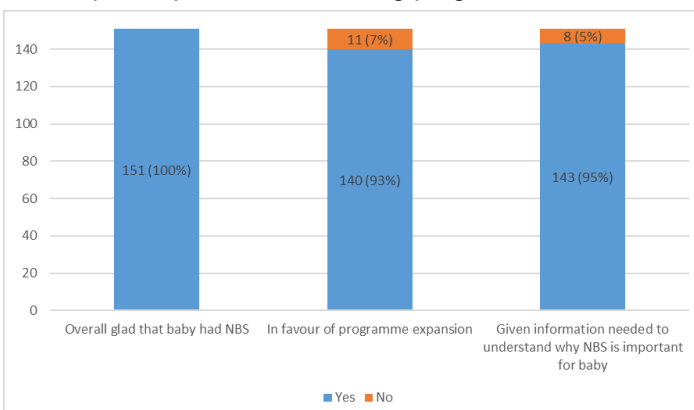
Negative experiences reported by parents included having to go to hospital for the sample to be taken, for example in parts of the country where there is no weekend PHN service, not enough information provided regarding bloodspot screening, and the fact that 'normal' screening results are not routinely communicated to parents.



"It would be nice to get the results issued to parents just to be 100% sure everything is okay."

Recommendations arising from this work include improving information provision (in multiple formats and languages), ensuring all parents receive screening results, expanding weekend services, and enhancing PHN resourcing. Embedding parent engagement as a routine quality assurance measure for the NNBSP is also advised.

The NNBSP acknowledges the valuable contributions of the parents who participated. The information gathering will help to improve the screening programme.



Experience and attitudes towards NBS and expansion of NNBSP

Scoping review examines international experience of SCID and SMA expansion

A [recent scoping review](#) (published in the *International Journal of Neonatal Screening*) completed by members of the Irish National Newborn Bloodspot Screening Programme (NNBSP) explored how long it takes to add severe combined immunodeficiency (SCID) and spinal muscular atrophy (SMA) to international newborn bloodspot screening (NBS) programmes, an important insight as Ireland progresses its own expansion of these conditions in the NNBSP.

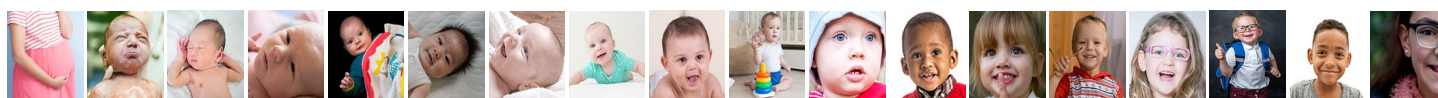
The authors screened 466 articles and included 14 that reported real-world implementation timelines across Europe, the US, Hong Kong and New Zealand.

Most jurisdictions required 2 to 6 years from early planning to full national or regional rollout. Timelines varied widely: Catalonia introduced SCID screening within

11 months of approval, while Germany's national programme took over a decade due to lengthy political and organisational processes. SMA screening tended to be quicker (around 1 to 4 years), particularly where SCID screening was already in place, as both rely on similar molecular testing approaches.

Common challenges included securing dedicated laboratory space, integrating new molecular technologies, staff training and managing out-of-range results in preterm and low-birth-weight infants. Strong governance, early clinical involvement and well-designed pilot studies were key facilitators.

These findings underline the need for coordinated laboratory, clinical and public health planning, and the time required to achieve successful and safe implementation. The expansion of the Irish NNBSP to include SCID and SMA is well within these timeframes, and is progressing according to agreed timeframes.



Key child population data and information in Ireland

Understanding key information about the population, health protection and health improvement, can help us in the planning and delivery of child health services and resources.

Key facts about our child population

Approximately one quarter (25%) of Ireland's population are children.¹

There were 54,062 births in 2024. The birth rate has been slowly reducing over the last number of years.²

Almost one quarter of Ireland's population (22%) are disadvantaged.³

The infant mortality rate is 3.5 per 1,000 live births.⁴

Mortality in children aged 1 to 4 years and 5 to 9 years have decreased gradually over time, though there has been no decrease in the mortality rate of older children (aged 10-14 years) since 2013, while mortality rates in young people aged 15 to 18 years have increased.⁵

Health protection facts

Vaccination uptake for the MMR and 6 in 1 vaccinations in children age 24 months in 2024 was 89.7% and 91.9% respectively, both below the targets of 95%.⁶

Vaccination uptake for the 4-in-1 and MMR vaccinations in junior infants in 2024 was 90.6% and 90.1% respectively, both below the targets of 95%.⁶

Vaccination uptake for the Tdap, HPV and Meningococcal ACWY vaccinations in first year students in 2024 was 78.3% (below target of 95%), 74.5% (below target of 85%) and 78.7% (below target of 95%) respectively.⁶

In 2024, 98.7% of babies were visited by a PHN within 72 hours of discharge from maternity services (target 99%), and 86.5% of children reaching 12 months had their 9 to 11 month PHN child health and development assessment on time or before reaching 12 months of age (target 95%).⁶

There were 5,823 children in care in 2024.⁷

Health improvement and prevention of ill health

The percentage of low birthweight babies

(weighing less than 2,500 grams) was 6.2% in 2022⁸.

The national percentage of teenage mothers in 2022 was 1.43%, with the highest rates in Laois (2.44%), Westmeath (2.29%), Longford (2.25%), and Balbriggan (2.17%).⁹

In 2024, 61.9% of infants were breastfed (exclusively and partially) at the PHN primary visit (target 64%) while 44% of infants were breastfed (exclusively and partially) at the 3 month PHN child health and development assessment visit (target 46%).⁶

Data sources

1. CSO Population Estimates April 2024
2. CSO birth rate data
3. <https://finder.healthatlasireland.ie/>
4. <https://www.cso.ie/en/releasesandpublications/ep/p-vsar/vitalstatisticsannualreport2022/infantmortalitystillbirthsandmaternalmortality2022>
5. <https://d7g406zpx7bgk.cloudfront.net/x/a73f085d0f/national-paediatric-mortality-register-annual-report-2025-final-v2.pdf>
6. HSE Key Performance Indicator data sourced through Qlikview
7. Tusla monthly performance and activity data: https://www.tusla.ie/uploads/content/Monthly_Service_Performance_and_Activity_Report_Dec_2024_V1,0.pdf
8. <https://hpowp.com/nprs-annual-report/>
9. Teenage mothers aged 19 or less (VSA14): <https://www.cso.ie/en/releasesandpublications/ep/p-vsar/vitalstatisticsannualreport2022/data/>





Tips to share with parents

Christmas doesn't have to mean trouble for teeth.

The HSE National Oral Health Office shares practical advice for parents on how to enjoy your Christmas without needing to visit your dentist.

1. Sugar at Christmas

Your mouth is an amazing place! Each time we eat, our mouth becomes more acidic, which attacks the enamel on our teeth. The saliva in your mouth protects your teeth and mouth from these changes that happen when we eat.

Christmas can be a very hard time for teeth because we enjoy more sweets and treats during the holidays.

The best way to help your teeth is to eat your sweets or treats either as dessert to reduce the number of sugary attacks, or have a limited time (a mini party) to avoid the grazing. Top tip: Don't pick a time near bedtime.

Don't forget, the average mince pie has 6 teaspoons of sugar in it while cans of fizzy drinks can have up to 5 teaspoons — so it doesn't have to have a chocolate coating to be bad for the teeth. Top tip: 1 teaspoon is 5g sugar, look at the food label to check.

2. Avoiding dental accidents

Dental accidents to the teeth are common. Injuries can vary from a small chip to the enamel all the way to complex fractures to the facial skeleton.

Falls are the most common cause, closely followed by sporting injuries. There are scenarios that can occur over the Christmas period.

Over excited children running around the home and even into each other will probably be the most common reason. Ice and snow can often be a contributory factor if the weather turns chilly.

Children often get new bicycles, skateboards, hoverboards, roller skates or scooters as presents. They may be new to these and getting their balance, and

3 things to know: Avoiding tooth trouble this Christmas



learning their limits may involve a few tumbles as part of the learning curve.

Wearing a helmet is a really important habit to include from the start.

What to do if the worst happens

Seek dental advice as soon as possible. If a tooth gets knocked out, don't handle it too much and put it in milk as soon as possible. Your dentist will know if it is a baby or permanent tooth. The time spent out of the mouth and the tooth drying out make it really hard to successfully put permanent teeth back in place.

3. Don't forget your toothbrush!

Our routines change over the Christmas break. Children often get to stay up a bit later because there's no school the next day.

We have more sweets and treats, making it even more important to brush our teeth twice a day. One of the two times should be bedtime, and fluoride toothpaste is a really important tool to combat tooth decay.

Top tip: Brush twice a day with the appropriate amount of fluoride toothpaste. After brushing, spit but don't rinse. This maximises the effect of the fluoride in the toothpaste. Flossing or interdental brushes help reach the places the brush can't reach.



Keeping a Healthy Smile
Episode #87 HSE Talking Health & Wellbeing

This episode covers:

- Importance of regular dental visits
- Correct brushing techniques
- Toothpaste, rinsing & flossing the do's and don'ts
- Healthy habits for kids
- Link between oral health & general health



Dr. Anne O'Neill

Listen back to **Dr Anne O'Neill** (HSE National Oral Health Lead) on the HSE Health and Wellbeing podcast ([episode 87 - Keeping a Healthier Smile](#)).

Dr O'Neill provides practical tips for parents when it comes to their children's dental routines. This includes building in regular daily times to do those small oral health habits at a young age.

The podcast available wherever you your podcasts and on the [HSE Health and Wellbeing YouTube channel](#).



Did you know?

Mild rash after chickenpox vaccine

The [varicella \(chickenpox\) vaccine](#) is now part of the HSE childhood immunisation schedule for children born since 1 October 2024.

This protects children from chickenpox, which can be serious in some cases. The vaccine is highly effective, with most children gaining immunity after two doses. They are given at 12 months of age and when in junior infants.

Roughly 3 in 100 children may get a mild rash with a few spots that occurs 5 to 26 days post-vaccination, sometimes near the injection site. This rash is usually harmless and fades on its own without treatment.

However, as the rash may rarely be infectious, it is best to keep it covered and away from people at higher risk (such as immunocompromised individuals, newborns and pregnant women who have not had chickenpox before) until the spots have dried over.

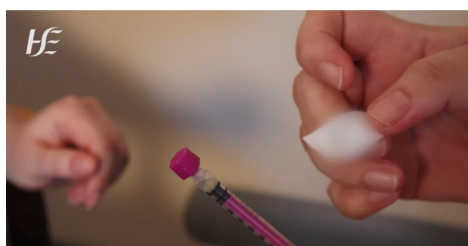
New colostrum harvesting resources

The National Women and Infants Health Programme, the Coombe Hospital and the National Healthy Childhood Programme have developed new HSE resources on colostrum harvesting.

They provide information on all aspects of safely collecting, storing, transporting and feeding harvested colostrum.

The new resources are:

- a [video](#) on how to express colostrum during pregnancy (QR code available below)
- a leaflet on 'How to express colostrum during pregnancy' - this can be ordered on [healthpromotion.ie](#)
- an updated [mychild.ie](#) guide on [colostrum](#).



Breastfeeding focus of HSE podcast

In a recent [episode](#) of HSE Talking Health and Wellbeing, host Noreen Turley welcomed Sheila Lucey, an advanced nurse practitioner and infant feeding specialist, for an in-depth discussion on breastfeeding.

Sheila shared expert information on the benefits of breastfeeding, preparing before birth, and the importance of early support. The conversation covers practical tips for overcoming challenges, the significance of skin-to-skin contact, and available resources for families.

Listeners were encouraged to seek support, trust their own journey, and remember that every feed counts. The episode aims to empower and reassure parents with accessible, up-to-date information and encouragement. The HSE Talking Health and Wellbeing podcast is available.

The podcast series is available on [Podbean](#), [Apple Podcasts](#) and [Spotify](#) as well the [HSE Health and Wellbeing YouTube channel](#).



Breastfeeding: Embracing Support & Building Confidence - Episode 122
HSE Talking Health & Wellbeing



Did you know?

Most babies with tongue tie don't need surgical procedure

Ankyloglossia (tongue tie), in the absence of breastfeeding difficulties or symptoms, does not need any intervention - it is estimated that the majority of infants with ankyloglossia will breastfeed successfully.

Posterior ankyloglossia is an anatomically incorrect term and must not be used as a reason to perform a surgical procedure on an infant.

Any breastfeeding dyad experiencing challenges must be assessed by an international board-certified lactation consultant (IBCLC) or healthcare professional with specialist lactation training to optimise breastfeeding techniques. Thorough assessment and lactation support keep frenotomy rates low.

Multidisciplinary team input and communication are vital to supporting breastfeeding infants with ankyloglossia and their families.

A frenotomy can be helpful where ankyloglossia is contributing to breastfeeding difficulties, for example, maternal pain and poor infant weight gain. This is called symptomatic ankyloglossia.

The Faculty of Paediatrics at the RCPI published a consensus statement on the assessment and management of ankyloglossia this year. A copy of the report can be accessed [here](#).

Advice on tongue tie for parents is available on mychild.ie.

Healthy Weight for Children webinar—focus on nutrition in the early years

In case you didn't get a chance to join the recent Healthy Weight for Children Annual Learning and Sharing Event, or would like to watch the session back, the [recording](#) is available on the HSE Health and Wellbeing YouTube channel.

This engaging webinar featured a series of presentations focused on nutrition in the early years, culminating in a keynote on the recently published TOPCHILD research and a panel discussion with leading experts.

Programme highlights include:

- Update on resources and supports from HSE for parents introducing family foods to their baby presented by **Geraldine Sexton**, HSE.
- Nutrition Support in Early Years and Education presented by **Kathryn O'Riordan**, Department of Children, Disability, and Equality.
- Food Reformulation Roadmap Focus on commercially available complementary foods, presented by **Sinéad O'Mahony**, Food Safety Authority of Ireland.
- Update on the safefood Food Environment Campaign presented by **Aileen McGloin**, Safefood.
- Keynote Presentation: TOPCHILD Research presented by **Dr. Kylie Hunter**, University of Sydney.
- Co-chairs: **Sarah O'Brien**, Healthy Eating & Active Living Programme, HSE and **Dr Abigail Collins**, National Healthy Childhood Programme, HSE.
- Panel discussion included: **Karen Matvienko-Sikar**, UCC and **Fiona Ward**, Department of Health.

Link to the TOPCHILD research is available [here](#).



Healthy Weight for Children Annual Learning and Sharing Event



Winter safety tips to help reduce the risk of injuries



Winter can bring snow, ice, wind and poor visibility, increasing the risk of accidents and injuries to children.

Christmas activities such as travel, decorations, toys, gifts and festive foods may introduce additional hazards for children.

As we welcome the festive season and prepare for the excitement of the holidays, it is important to stay aware of the increased risks children face at this time of year. Poor weather conditions and heightened festive activity can lead to a rise in accidents and injuries, many of which are preventable.

With accident and injury being a leading cause of death in children aged 1 to 14 years (according to figures from the National Office of Clinical Audit, NOCA), awareness and proactive safety measures play a crucial role in keeping children safe.

By staying attentive and taking simple precautions, we can reduce the risk over the festive period:

Road and travel safety

- Use proper car seats, booster seats and seatbelts for every journey.
- Drive slowly and leave extra stopping distance on icy or snowy roads.
- Ensure your vehicle is winter-ready – tyres, lights, brakes and wipers.
- Keep children visible – reflective clothing or accessories help in dark periods.

Home and decoration safety

- Keep small decorations, breakable items and batteries (including button batteries) out of reach of children.

- Secure your Christmas tree to prevent tipping.
- Arrange lights and electrical cords safely to avoid tripping hazards.
- Choose toys appropriate for your child's age and developmental stage. Look for the CE mark.

Fire and electrical safety

- Keep lit candles of reach. Never leave candles lit when unattended.
- Check festive lights for frayed wires and broken bulbs.
- Switch off all decorations before bedtime.

Choking and burns prevention

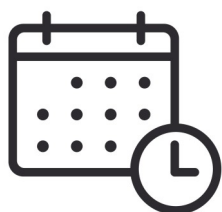
- Cut round or firm foods like grapes, cherry tomatoes and sausages into small pieces.
- Do not give children under age 5 small hard round or oval-shaped sweets (these include fruit gums, jellybeans and lollipops), as well as marshmallows, popcorn, chewing gum, whole nuts and small hard chocolates. These are choking risks.
- Keep hot drinks away from table edges and out of children's reach.

General winter safety

- Keep a stocked first-aid kit at home and in your car.
- Test smoke alarms and carbon monoxide detectors.

Parents can find advice on a wide range of child safety topics at mychild.ie





A day in the life

Amanda Glynn

Lactation Consultant

'Ask our breastfeeding expert' service



"Though I spent my childhood in Mayo, life has taken me to many places: Galway, West Cork, and finally to my home in Co Clare. With so much moving, I didn't always have the comfort of a support network when navigating the early weeks of motherhood.

"For two years, I made a monthly three-hour round trip to attend a La Leche League breastfeeding support group with my second baby. Experiencing the power of encouragement and solidarity from other mothers, I knew it was something I wanted to dedicate my career to. I subsequently qualified as

an international board-certified lactation consultant (IBCLC).

"New parents face an overwhelming amount of information from multiple sources. While much of it is helpful, the sheer volume makes it difficult to know what's trustworthy. That's why timely, trusted guidance and advice matters.

"Through the HSE's online 'Ask our breastfeeding expert', our team of lactation consultants responds not only to parents, but also grandparents, public health nurses, GPs and other healthcare staff. Queries differ, but all share the same need: clear, practical information they can trust.

"One of the most rewarding aspects of my role is when parents return to us. Some come back when they have a second or third baby. It's incredibly special to build a rapport and to know families value the service.

"Many queries arrive in the small hours, when parents are awake and worried. Knowing their question will be responded to quickly brings

enormous reassurance.

"Newborn babies are 'carry mammals': They need constant, close, physical contact with their mother for survival. It helps regulate baby's heart rate, respiration, and body temperature and also decreases crying episodes, helps mother and baby to bond and facilitates breastfeeding. Mothers are relieved to learn that the more they respond to baby's need for closeness, the more independent they become as an adult.

"Our service is here to assist mothers at every stage of breastfeeding. We encourage mothers to access the wonderful, face-to-face support available from their public health nurse, community-based lactation consultant and voluntary breastfeeding support groups.

This piece was [first published](#) by the Irish Examiner in October to mark National Breastfeeding Week.

The 'Ask our breastfeeding expert' service offers live chat and email support on mychild.ie/breastfeeding

Dr Katharine Harkin

Consultant in Public Health Medicine

Child Health Public Health

me the opportunity to work closely with patients, in both hospital and community settings, helping them manage chronic illnesses and regularly advising patients on healthy living and disease prevention.

"From the very beginning of my career, I saw just how important prevention and early intervention are to long-term health. That experience inspired me to study medicine in NUI Galway, where I've stayed ever since. Initially, I worked in hospital medicine for a few years, but I found myself increasingly drawn to public health medicine. It felt like the right fit as it focuses on prevention and population wellbeing.

"No two days are ever the same working in public health. I work closely with public health nurses on the HSE School Health Programme, which provides free health services to children in primary and secondary schools. Together, we're constantly looking for ways to strengthen and improve how we support children's health and wellbeing.

"I grew up in Swinford, Co Mayo and after finishing secondary school I moved to Dublin to study pharmacy at Trinity College. Qualifying as a pharmacist gave

"I've always had a strong interest in child health and child safety, but since becoming a parent myself, that interest has grown significantly. Experiencing first-hand challenges parents face has made me even more passionate about providing clear, practical guidance to parents and families.

"One of the ways I do that is through my work on the HSE's mychild.ie website, an evidence-based resource for parents. I found this site incredibly helpful myself, long before I ever worked on it. It now features over 500 guides covering everything from pregnancy to the early years of parenting.

"Outside of work, I love catching up with friends and spending time with my children, usually ferrying them to their various activities."

A longer version of this [article](#) was first published by the Irish Examiner in October 2025.





Events and meetings

Mural unveiling for National Breastfeeding Week, October 1 Newtowncunningham Primary Care Centre, Donegal



From left to right: **Kate Finnamore** (CNM2 Breastfeeding Support, LUH), **Fiola Murphy** (Child Health Programme Development Officer), Mary Feely (Public Health Nurse and Lactation Consultant), **Louise Roulston** (parent), **Dermot Monaghan** (IHA Manager), **Dr Meta McLaughlin** (GP) and **Maura Gillen** (General Manager).

As part of National Breastfeeding Week, a vibrant new wall mural celebrating breastfeeding was officially unveiled in Newtowncunningham Primary Care Centre, Co Donegal.

The wall mural was designed and painted by Donegal artists **Shaun McFadden** and **Kevin Gallagher**. The wall mural is a celebration of the bond between mother and child and also a wider symbol of health, growth, and community.

By highlighting breastfeeding as the foundation of lifelong health, the mural tells a story of a strong beginning and a healthier future for families and communities.

Launch of HSE National Breastfeeding Week, September 30

Grangegorman Primary Care
Centre, Dublin 7



L-R: **Flora Gusmão Martins** and **Caetano** (3 months), **Eimear Hughes** and **Gabriel** (8 months), **Daria Sexton** and **Xena** (8 months), **Katherine Nolan** and **Isla** (2 years), **Noelle Smith**, Public Health Nurse, Grangegorman Primary Care Centre and **Katie Holohan**, Assistant Director Public Health Nursing, HSE Dublin and North East

Launch of We're Breastfeeding Friendly Clare, October 3

De Valera Library,
Ennis



From left: **Laura McHugh**, HSE National Breastfeeding Coordinator, **Niamh Keane**, Clinical Lead, Health and Wellbeing, HSE Mid West and **Samantha McCarthy**, Healthy County Coordinator, Clare County Council



‘Latching on’ event for National Breastfeeding Week, October 9
 Áras an Uachtaráin, Dublin 8

Pictured are some of the HSE staff from maternity, public health nursing and child health public health services who attended the final “latching-on” event during President Michael D Higgins’ presidency, hosted by Ms Sabina Higgins at Áras an Uachtaráin in conjunction with National Breastfeeding Week.

National Breastfeeding Week event, October 1

Tallaght Library, Dublin 24

Sarah Glennon (Infant Feeding Specialist, HSE) was among those offering advice and support at the HSE and Childhood Development Initiative event, ‘*Hold me close: The power of skin to skin contact*’ along with breastfeeding support partners from La Leche League, Friends of Breastfeeding and Cuidiú





**Meeting with
Eisenhower
Fellow,
HSE Area
Office,
Tullamore**

From left to right: **Dr Abigail Collins** (National Clinical Lead, Child Health Public Health), **Dr Kendra McDow** (Eisenhower Fellow and Medical Officer, School District of Philadelphia), **Dr Katharine Harkin** (Consultant in Public Health Medicine, Child Health Public Health) and **Anne Pardy** (General Manager, Child Health Public Health)



**PEI Summit: Prevention and Early
Intervention Conference, October
23 and 34
Limerick**

From left to right: **Katherine Harford** (CEO Let's Grow Together Cork), **Emma Reilly** (Child Health Programme Development Officer, HSE) **Dr Fiona Cianci** (Consultant in Public Health Medicine, HSE Child Health Public Health), **Prof Ivan Perry** (Emeritus Professor of Public Health School of Public Health, UCC) and **Francis Chance** (Chair, Prevention and Early Intervention Network)

Small Acts of Support event (CYPSC and HSE South West), October 21

Ballincollig, Co Cork



From left to right: **Mari O'Donovan** (Head of Service, Primary Care, HSE South West), **Sarah O'Gorman** (Barnardos Cork), **Tracey Holt** (CYPSC Co-ordinator Cork), guest speaker **Prof Katriona O'Sullivan** (Director of Centre for Inclusive Higher Education, University of Maynooth and author of 'Poor'), **Aoife O'Shea** (Speech and Language Therapist HSE Happy Talk), **Helen Kelly** (Child Health Training Development Officer, HSE South West) and **Rachel Knox** (Child Health Programme Development Officer, HSE South West)

Dept. of an Taoiseach Child Poverty and Well-being Summit, September 11



Benny Cullen (Director of Research and Innovation, Sport Ireland) and **Dr Fiona Cianci** (Consultant in Public Health Medicine, Child Health Public Health, HSE)

Launch of Laois Offaly Community Families Programme, November 19

Mucklagh Community Centre, Co Offaly



From left to right: **Caroline Sheehan** (National Home Visiting Programme Manager, Prevention, Partnership and Family Support, Tusla), **Anne Pardy** (Programme Manager, Child Health Public Health, HSE), **Catriona Corcoran** (Coordinator Longford/Westmeath Community Families), **Dr Cliona Hannon** (Chief Executive Officer, Katharine Howard Foundation), **Kirsten Simring** (National Parenting Lead, Prevention, Partnership and Family Support, Tusla), **Dolores Wrafter** (Community Families Coordinator, Parents First Laois Offaly), **Siobhan McNevin** (National Parenting Support Officer, Prevention, Partnership and Family Support, Tusla), **Brenda McCormack** (Business Manager Child Health Public Health, HSE) and **Jacqueline Austin** (Director Public Health Nursing, Dublin North Central, HSE)



Dolores Wrafter (Community Families Coordinator, Parents First Laois Offaly) and Minister for Children, Disability and Equality **Norma Foley TD**

Emma Reilly (Child Health Programme Development Officer, HSE Dublin South West), **Siobhán Ní Mhurchú** (Child Health Programme Development Officer, HSE Dublin North County and Dublin North City and West) and **Dr Fiona Cianci** (Consultant in Public Health Medicine, HSE Child Health Public Health)

National Home Visiting Day event, October 15

National College of Ireland, Dublin



Editorial team



This newsletter is written and edited by the HSE Child Health Public Health/National Healthy Childhood Programme team.

The team are pictured at a November meeting.

Back row: (from left to right): **Dr Michael Hanrahan** (Specialist Registrar in Public Health Medicine), **Jacinta Egan** (Project Support), **Michael Anyanwu** (Epidemiologist), **Brenda Mellett** (Director of Public Health Nursing), **Dr Thomas Roux** (Specialist Registrar, Public Health Medicine), **Dr Mairéad Bracken-Scally** (Senior Research Officer), **Paul Marsden** (Programme Manager, Child Health Screening Programmes), **Dr Abigail Collins** (National Clinical Lead, Child Health Public Health and Consultant, Public Health Medicine), **Dr Heather Burns** (Consultant, Public Health Medicine)

Front row (from left to right): **Sarah Hensey** (Project Support), **Laura McHugh** (National Breastfeeding Coordinator), **Emma Hogan** (Senior Statistician), **Jolene Cummins** (Project Support), **Dr Fiona Cianci** (Consultant, Public Health Medicine), **Dr Katharine Harkin** (Consultant, Public Health Medicine), **Meena Purushothaman** (Assistant National Breastfeeding Coordinator) and **Eleanor McGrath** (Communications Officer).

Not pictured: Brenda McCormack (Business Manager), Anne Pardy (General Manager) and Sorcha Nic Mhathúna (Communications Manager).

The National Healthy Childhood Programme

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