

Impact of Covid

Common Challenges

Impact on Health Services and Early Years Settings

During the pandemic

Many universal services for families with young children moved to remote delivery during the pandemic. This included services that have a specific reason to be delivered as home visits, such as health visiting. During the pandemic, health visitor guidance recommended [new birth visits to take place over the phone](#), while visits for older babies and toddlers were stopped entirely. Many health visitors were moved to what were seen as more essential health services, demonstrating that the importance of health visiting, support for babies and young children and their parents, and was not properly valued.

It also led to missed opportunities for early intervention or to keep babies and young children safe from harm, as babies and young children were often not seen and remote interactions were conducted with the parent.

Non-urgent health appointments were cancelled or significantly delayed, which affected children awaiting a diagnosis for special educational needs and disability (SEND)/additional support needs (ASN and delayed access to support and interventions.



Many early years settings were closed or only open to some children. While vulnerable children were prioritised, there was a lack of clarity as to which children could attend: children of key workers were prioritised over children experiencing poverty or children with SEND/ASN, or where there were other concerns. Only [2-3% of vulnerable children eligible to attend school did](#) partly because parents worried about the risk of contracting COVID, particularly where the family experienced health issues. But there was also no support available to ensure vulnerable children were able to access early years settings and schools.

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Ongoing impact

Some universal services for families with young children continue to be provided partly remotely. This may bring both benefits and risks: while remote and hybrid offers can increase choice and accessibility, there is a potential of it negatively impacting on developing trusted relationships with services. There is a danger that rather than focussing on family needs and outcomes, remote offers are operationally driven to reduce cost and accommodate workforce shortages.

Indirectly, babies and young children experience an ongoing impact from the pandemic due to how services were and continue to be affected. There is now a higher level of staff turnover, the pressures of the pandemic have led to some staff reducing their hours or leaving the profession, and there are fewer qualified staff overall.

Where children need additional or mental health support, there is now often a [delay in being able to access such support services](#). This may be caused by a combination of an increase in need, a backlog from the pandemic, a reduced workforce, and a reduction in face-to-face service delivery. While wealthier families have the option to access private support, this is not the case for families living on low incomes, creating inequity of access. Delays in diagnosis and access for support which may then in turn delay treatment and support continue to have a long-term negative impact.

Health and support services were under pressure before the pandemic and are now at breaking point. Parents report that they are still unable to access the services they need. There is a worrying income gradient, with parents living on a low income with a child under two reporting a higher need to access services than wealthier parents, with a [reduced offer of face-to-face services](#).



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After the pandemic, [fewer parents sent their children to early years settings](#), partially because they were able to spend more time at home and maybe also because they feel that their child is not developmentally or emotionally ready for larger group setting after extended lockdowns. This may have contributed to an exodus of childminders whose businesses were no longer viable, contributing to a lack of choice for parents. The uptake of funded hours also experienced a setback. Attending high quality nursery, preschool and childminder provision has a positive impact on children's early learning and social and emotional development, and is an [effective leveller of early learning inequalities](#) caused by poverty. Less take-up of early education and childcare opportunities is therefore likely to cause widening inequalities.



Communication between early education settings and parents now increasingly uses digital platforms. While this may suit some families, it may exclude those not as confident with digital media or who experience digital exclusion. However, such apps also offer opportunities for more regular and real-time interactions which may support the partnership between settings and parents.

Early education and childcare services in low-income areas are under a [higher threat of closure](#) as a fall-out from the pandemic, making it even harder for families living on a low income to accommodate work which could lift them out of poverty.

