

5 July 2023**Agenda Item 5****REPORT OF THE DIRECTOR OF PUBLIC HEALTH****THE NOTTINGHAMSHIRE COVID IMPACT ASSESSMENT - PREGNANCY,
CHILDBIRTH AND EARLY YEARS****Purpose of the Report**

1. This report provides an assessment of the impact of the Covid-19 pandemic on the health and wellbeing of the population of Nottinghamshire, with a specific focus on pregnancy, childbirth and early years.

Information**Background**

2. The overall aim of the Nottinghamshire Covid Impact Assessment (CIA) is to assess the impact of the Covid-19 pandemic on the health and wellbeing of the population of Nottinghamshire to inform Nottinghamshire County Council and partner agencies strategies, plans and commissioning. A phased approach to this work has been undertaken across eight areas.
3. This report outlines key findings from the assessment of pregnancy, childbirth and early years (phase 6), which is a key area of focus for the [Joint Health and Wellbeing Strategy 2022-26](#) under the Best Start in Life priority. This report focuses on the impact of the Covid-19 pandemic on pregnancy, birth, and children's early years (0-5years), widely recognised as a critical period of development; the earliest years of a child's life have a significant impact on their long-term development and life-chances. The full report is provided in **Appendix 1** and an Action Plan for starting to implement the recommendations in **Appendix 2**.
4. The methodology for the CIA involved analysis of local, regional and national data, engagement with parents, carers and professionals, and a literature review, undertaken via the Office for Health Improvement and Disparities research repository, focusing on the pandemic's impact on pregnancy, childbirth and early years in the UK.
5. As part of this CIA, it was considered important to obtain feedback directly from parents, carers and professionals living and working in Nottinghamshire. Their experiences were collected through two surveys and a focus group which were promoted through established Nottinghamshire County Council (The Council) networks and Facebook pages. There were 182 responses to the parents and carers survey, and 30 responses to the professional's

survey, which helped shape the CIA. A summary analysis of responses can be found within the full report in **Appendix 1**.

6. In addition, the results of two pieces of engagement carried out in 2021 by The Council's early childhood services, on the early impact of Covid-19 on child and family poverty, and by the Nottingham and Nottinghamshire ICB Maternity Voices Partnership and Healthwatch, on experiences of maternity services during the Covid-19 pandemic, have been incorporated.
7. Initial findings from the pregnancy, childbirth and early years CIA were taken to the multi-agency Best Start Partnership on 12th January 2023 for discussion, and engagement was then sought from Best Start members to refine and shape the CIA's recommendations. A final draft of the CIA and its recommendations was subsequently endorsed by the Best Start Partnership on 5th April 2023, who will become the owning group for these recommendations, driving and monitoring their implementation.

Key findings and recommendations

8. Early findings from the literature review guided the CIA to focus on three key themes:
 - Impact on parents and carers wellbeing
 - Impact on children's early development
 - Impact on early years health outcomes
9. Full recommendations can be found in **Appendix 1**.

Impact on parents and carers wellbeing

10. The pandemic appeared to have a largely adverse impact on parent's wellbeing with implications for family relationships and parental mental health. Feedback from parents and carers in our local Covid impact survey highlighted that the pandemic both impacted their pregnancy in a negative way (81% of those responding) and had a negative impact on their mental wellbeing (80% of those responding).
11. There was an initial drop in referrals to specialist perinatal mental health services, which have now recovered to roughly pre-pandemic levels. There was anecdotal evidence, earlier in the pandemic, that mothers were presenting with more urgent and complex care needs.
12. Both the Nottinghamshire Covid impact survey and the Nottingham and Nottinghamshire Maternity Voices and Healthwatch report highlighted how antenatal care was particularly impacted as parents were required to attend appointments by themselves due to the national restrictions. This increased anxiety, resulting in mothers feeling alone. It was particularly challenging for those who had previously lost a baby or who received difficult news. There were implications for post birth recovery, bonding, mental health, and wellbeing.
13. Many parents found the pandemic a lonely and isolating time with little support from family and friends. For some families however, having time alone meant they could do things together without interruption or pressure from visitors, which in some cases enhanced bonding. Some fathers were able to spend more time with their babies and children.
14. Recommendations for parents and carers wellbeing include:

- Continuing to strengthen support for those who may have experienced trauma through the perinatal period and who are experiencing long-term implications of this,
- Strengthening perinatal mental health pathways and care, including increasing engagement in perinatal mental health services,
- Reviewing and enhancing the local antenatal and parenting programmes to ensure they include early identification of maternal mental health and sources of support, prepare and empower parents for parenthood, and reflect the importance of social support.

Impact on children's early development

15. Local professionals responding to the Covid impact survey reported a significant impact on children's development: 96% reporting a negative impact on social and emotional development, 93% on children's communication skills and 89% on children's behaviour.
16. Data also highlights an impact on early childhood development, there was a decline in 2022 of 2-to-2.5 year old's meeting the expected level of development, as measured by the Healthy Family Teams, in relation to both communication, and social and emotional skills. These were children born in or before initial lockdowns.
17. There has been an increase in demand for specialist speech and language therapy services, and more children presenting to this service at age 3-4 years rather than 2-3 years. There are also challenges in access to targeted support for speech, language and communication needs for 2-2.5 year-olds. Actions are in place operationally to help mitigate the impact of this.
18. Practitioners in the local focus group reported a significant impact on children's speech and language development. They described these needs as persisting beyond the lockdowns and being most evident in children accessing settings for the first time at ages 2 and over. This was different to parents responding to our local Covid impact survey who tended to report their children 'caught up' as opportunities for social interaction increased.
19. Recommendations for children's early development include:
 - Addressing the increasing speech, language and communication needs that have emerged in the cohort of children most affected by the restrictions of the Covid-19 pandemic i.e., children who are now aged 2 and over. The key recommendation here is the increase of capacity for speech, language and communication interventions at a targeted level for those aged over 2 years,
 - Additional training for the early year's workforce in relation to healthy social and emotional development,
 - Roll-out of a specific children's centre service intervention 'PEEP' which focuses on the role of parents and early educators and enhances social and emotional development and helps babies and children to become confident communicators and learners.

Health outcomes

20. There is long-standing variation in breastfeeding prevalence across Nottinghamshire, which is largely linked to deprivation. The overall prevalence of breastfeeding in Nottinghamshire remained relatively constant between 2019-20 and 2020-21, the year most affected by the pandemic restrictions, before increasing slightly in 2021-22. The districts of Bassetlaw and Mansfield however, between 2019-20 and 2020-21, saw a decline in breastfeeding prevalence.
21. The level of A&E attendances in under 5's dropped throughout 2020 with troughs related to the lockdowns, presentations for injury remained relatively stable compared to other presentations. The number of attendances have recovered to pre-pandemic levels.
22. There was a sharp decline in the number and percentage of under 5's accessing a dentist in Nottinghamshire from 2019-20 to 2020-21. There was only a slight recovery in the following year, with the percentage seen by a dental professional remaining lower than it was pre-pandemic. It is important to note here that there are national challenges in access to dentistry which are mirrored in Nottinghamshire.
23. Generally, the vaccination rates in children living in Nottinghamshire, across the childhood immunisation programme, have remained relatively static in roughly the 90% to 97% range depending on the indicator.
24. Recommendations in relation to early years health outcomes include:
 - Targeting breastfeeding support in areas with persistently low rates, particularly the areas which saw a decrease in breastfeeding across the course of the pandemic,
 - Exploring trends in vaccination uptake in pregnancy and early years in more detail e.g., at a smaller geographical area and amongst demographic groups, to target the areas of greatest need more effectively,
 - Increasing our understanding of patterns in A&E attendance to ensure children and families access the most appropriate service for their needs,
 - Exploring any opportunity to improve oral health in the early years, including preventive interventions such as health promotion and fluoridation.

Summary and Next Steps

25. It is important to highlight that although we have drawn together key themes and overall conclusions, there has not been a universal experience to the pandemic, and each family had different experiences depending on their personal situation at the time. There are indications however that the pandemic has had the greatest negative impact on our most vulnerable children and families, acting to further widen pre-existing inequalities.
26. There is mixed feedback around the effectiveness of virtual care depending on the context within which it is provided. It can increase the risk of health issues being missed and affect the relationship between parents and professionals, however it can enhance engagement with some families in particular fathers and those who struggle with transport or access. It has also

strengthened some professional working relationship and made multi-disciplinary decision-making processes more efficient.

27. The CIA for pregnancy, birth and early years has assessed the national and local evidence and incorporated feedback from local parents, carers and professionals. It is recognised that the parents and carers who responded to our local Covid impact survey, which was widely promoted, were self-selecting and not a fully representative sample of our local population. However, the shared experiences they describe are impactful and provide some valuable insight.
28. The Best Start Partnership endorsed the CIA's recommendations at the April 2023 meeting and are committed to driving forwards their implementation. The Best Start Partnership is a multi-agency group of diverse partners working together to ensure children have the best start in life. The Partnership is responsible for delivering Nottinghamshire's Best Start Strategy and as such are well placed to monitor and progress implementation of the CIA's recommendations relating to pregnancy, birth and early years.

Other Options Considered

29. There was an option to not undertake the covid impact assessment on pregnancy, birth and early years. This option was discounted as the assessment provides important information relating to the delivery of the giving children the best start in life ambition of the Nottinghamshire Joint Health and Wellbeing Strategy.

Reason/s for Recommendation/s

30. The Health and Wellbeing Board has a statutory duty to produce and deliver a Joint Health and Wellbeing Strategy, with best start in life identified as one of its priorities for 2022-26.

Statutory and Policy Implications

31. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

32. There are no direct financial implications arising from this report.

RECOMMENDATION/S

The Health and Wellbeing Board is asked:

- 1) To establish any actions required by the Board in relation to the findings from the Covid Impact Assessment for Pregnancy, Childbirth and Early Years.

- 2) To consider how members of the Board can support the implementation of the outlined recommendations set out in the Covid Impact Assessment.

**JONATHAN GRIBBIN
DIRECTOR OF PUBLIC HEALTH
NOTTINGHAMSHIRE COUNTY COUNCIL**

For any enquiries about this briefing please contact:

Amanda Fletcher
Consultant Public Health
Nottinghamshire County Council
E: Amanda.Fletcher@nottscc.gov.uk

Constitutional Comments (GMG 12/06/23)

33. This report falls within the remit of the Board for consideration under its terms of reference (see pp. 119 – 120 of the Council's Constitution).

Financial Comments (DG 13/06/23)

34. There are no direct financial implications arising from this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- None

Electoral Division(s) and Member(s) Affected

- All