

Report from the engagement on Croydon's draft Partnership Early Years strategy July 2022

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1. Executive Summary

This report includes the key messages from the engagement activities designed to inform the development of the draft Early Years Strategy and Delivery Plan. These include:

- A parent / carer survey (472 responses)
- Partner workshops (100 plus partners from across Early Years)
- Interviews with parents and meetings with key partners as part of the activities to deliver the long term engagement plan

Whilst the parent carer survey was intended to reach all parents and carers 85% of respondents were mothers, 96% identified as straight and 11% reported having a disability. According to the 2011 census 37% of the adult population is from an ethnic group and 36% of the survey respondents were from an ethnic group. There was broad geographical representation from across the Borough.

This demographic analysis will be used to drive more targeted intervention with groups and areas which are underrepresented in the engagement activities so far.

Parents and carers responding to the survey were asked to choose areas which it was important to have support with. A high proportion of respondents said support was important with:

- preparing after the baby is born
- emotional and mental health
- breastfeeding
- knowing how to manage minor illnesses

Parents and carers were also asked how important different services, locations, timings, the wider environment were. Areas which a high percentage of parents said were very or somewhat important were:

- accessible services close to where parents live including children centres, playgrounds, GP surgeries
- good quality, affordable childcare

200 parents and carers provided written comments. Key themes were the importance of:

- children's centres,
- health visiting
- playground access
- the cost of child-care
- support with breastfeeding.

The full range of comments grouped by theme can be seen in Appendix A.

Parents/carers were also asked the impact of COVID on them as a parent/carers as well as their child. Here, the areas which scored high were all related to forms of social contact and activities.

Partners were asked to feedback on the draft scope, vision, objectives, principles and the impact of COVID on families and children. They were also asked for key challenges and priorities for three themes: 1. integrated pathways and seamless care, 2. maximising opportunity and reducing inequalities and 3. workforce development and training.

Messages which came across strongly were the need for:

- join up between services, professionals, pathways
- support for SEND
- clear communication
- promotion of Early Years as a career.

The full range of comments are included later in this report.

The feedback from these engagement activities has been reflected in the draft strategy.

2. Scope and purpose of the engagement

The purpose of this stage of the engagement activities was to inform the drafting of the Early Years strategy and to ensure that issues important to parents, carers, families and partners were appropriately reflected in the document.

Further engagement activities such as focus groups with parents and carers are planned inform the development and implementation of the more detailed delivery plan.

This report provides the key messages from the parents, carers and families survey and the partner workshops

3. Parent Carer survey

3.1 Survey delivery

The survey was online and paper copies were available at Children's Centres, libraries and childcare settings. There was also a translate function on the electronic version of the survey.

3.2 The respondents

472 people completed the survey. 462 of these responded online via the Get Involved website whilst 10 people completed the survey in paper format, these were scanned and emailed in. Of the paper copies, some contributions were missing, however, data that was available was captured in the results.

The target was to receive 1000 plus responses. The reasons why this target was not reached are being reviewed, this will include reflection on the style and content of the survey.

Table 1 below shows the range of people who responded to the survey. Although the aim was to have a mix of respondents a clear majority, 85.1% were mothers and 7% were fathers. Respondents were asked about their sexual orientation and 4% of respondents identified as gay or lesbian, bisexual or other. The most common stage of the respondents (50%) was people with children between the ages of 1, followed by children between 3 and 5. 36% of the respondents were from an ethnic group or mixed white and ethnic group.

Table 1. Respondent characteristics

| Status | % | Stage | % | Sex | % | Sexual orient. | % | Ethnicity | % | Age | % | Disability | % |
|-------------|-----|---|-----|----------------------|-------|----------------|-----|--------------------------------|-----|-------|-----|--------------------------|----|
| Mother | 85% | Pregnant | 6% | Female | 91% | Straight | 96% | White | 62% | 19-25 | 4% | Visually impaired | 0% |
| Father | 7% | Babies/children in their care under 1 | 21% | Male | 7% | Gay or lesbian | 1% | Black | 14% | 26-34 | 29% | Hearing impaired | 0% |
| Grandparent | 4% | Babies/children in their care between 1 and 3 | 50% | Preferred not to say | 1.70% | Bisexual | 2% | Asian | 12% | 34-44 | 56% | Mobility disability | 1% |
| Carer | 2% | Babies/children in their care between 3 and 5 | 34% | | | Other | 1% | Mixed Black white, Asian White | 8% | 45-54 | 6% | Learning disability | 2% |
| Other | 3% | Children in their care of reception age | 16% | | | | | Other ethnic group | 2% | 55-64 | 3% | Communication disability | 1% |

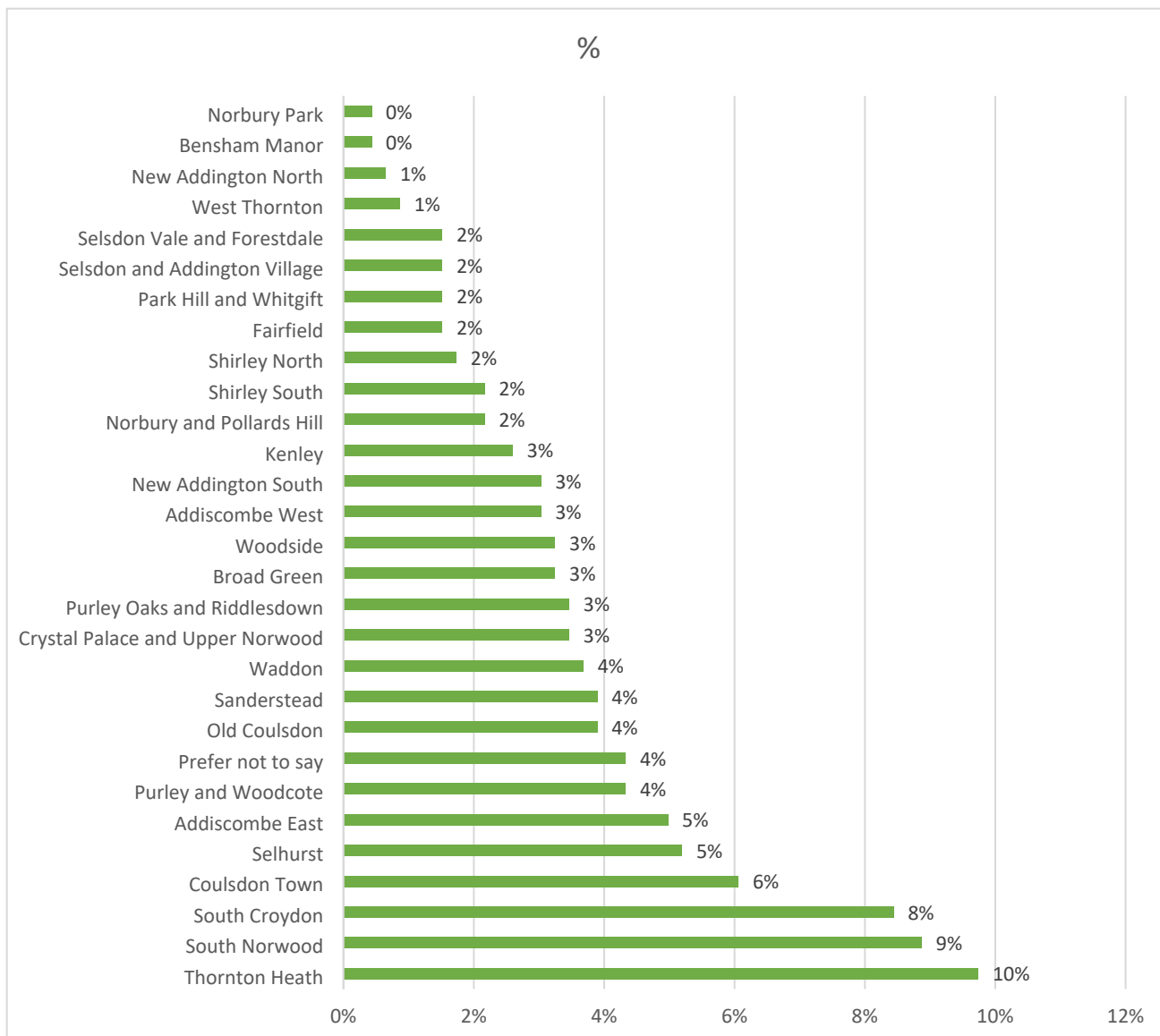
| | | | | | | | | | | |
|--|--|-------|-----|--|--|--|----------------------|----|--|-----|
| | | Other | 13% | | | | 65 plus | 1% | Hidden disability: sickle cell, diabetes, asthma, autism, ADHD | 7% |
| | | | | | | | Preferred not to say | 1% | None | 69% |
| | | | | | | | | | Other | |
| | | | | | | | | | Preferred not to say | 12% |

Table 2 shows the detailed breakdown of the respondents by ethnic group compared to the ethnic group of the general population.

| Ethnic group of respondents | Number | | Croydon % from 2011 census |
|---|--------|-----|----------------------------|
| | | % | |
| White English / Welsh / Scottish / Northern Irish / British | 218 | 49% | 47% |
| White Irish | 8 | 2% | 2% |
| Any other White background | 61 | 14% | 6% |
| White and Black Caribbean | 8 | 2% | 3% |
| White and Black African | 5 | 1% | 1% |
| White and Asian | 12 | 3% | 1% |
| Any other Mixed / multiple ethnic background | 13 | 3% | 2% |
| Indian | 24 | 5% | 7% |
| Pakistani | 11 | 2% | 3% |
| Bangladeshi | 5 | 1% | 1% |
| Chinese | 7 | 2% | 1% |
| Any other Asian background | 8 | 2% | 5% |
| Black African | 21 | 5% | 8% |
| Black Caribbean | 38 | 9% | 9% |
| Any other Black background | 5 | 1% | 4% |
| Other ethnic origin (please specify) | 8 | 2% | 0% |

Graph 1 below shows the respondents by ward. This shows an encouraging distribution across the different areas of the Borough.

Graph 1. Respondents by ward.



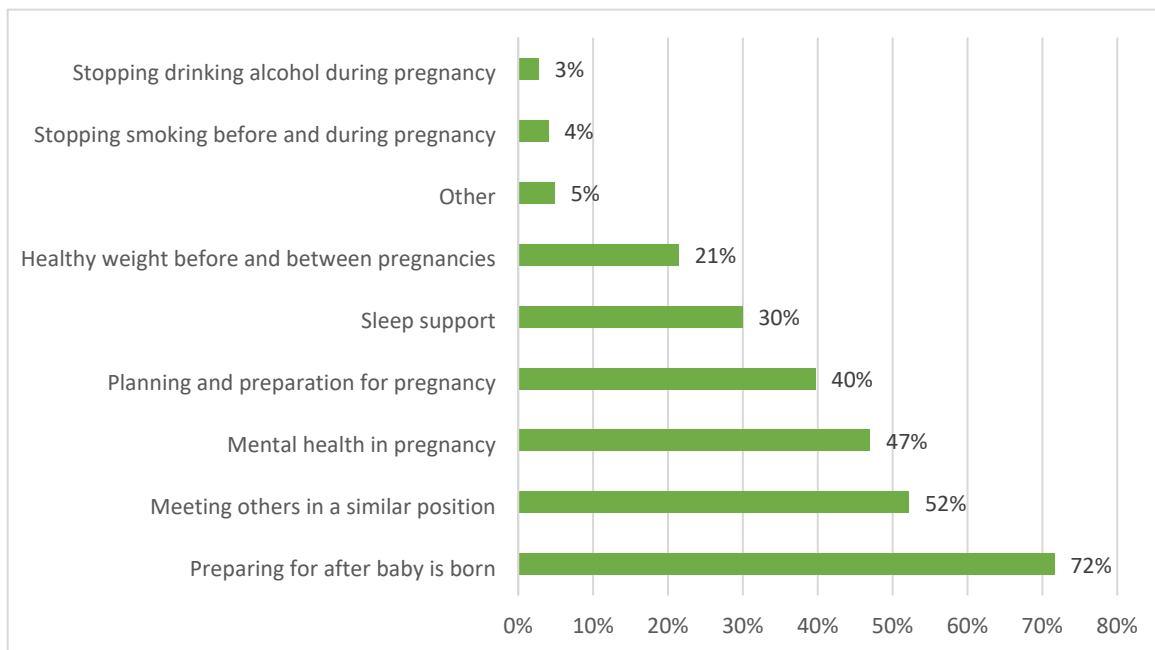
4. What was important to parents and carers?

The purpose of this survey was to learn what was important to parents, families and carers at the different stages from pregnancy to reception age. Parents also provided written comments examples of which have been included in each section. The full list of parent comments can be seen in Appendix A.

4.1 What support did parents say was important during pregnancy?

Graph 2 shows that the support which the highest percentage of parents (72%) said was important was preparing for after the baby is born. 52% said support with meeting parents in a similar position and 47% of parents identified mental health support.

Graph 2 Top three most important support areas in pregnancy



Lack of face to face support for breastfeeding, health anxiety for children and general mental health support for new mothers. It's shocking. The antenatal classes supposedly 'prepare' you for birth but do not even cover fully c sections, traumatic births and the first stage of caring for a newborn. It's actually a joke.

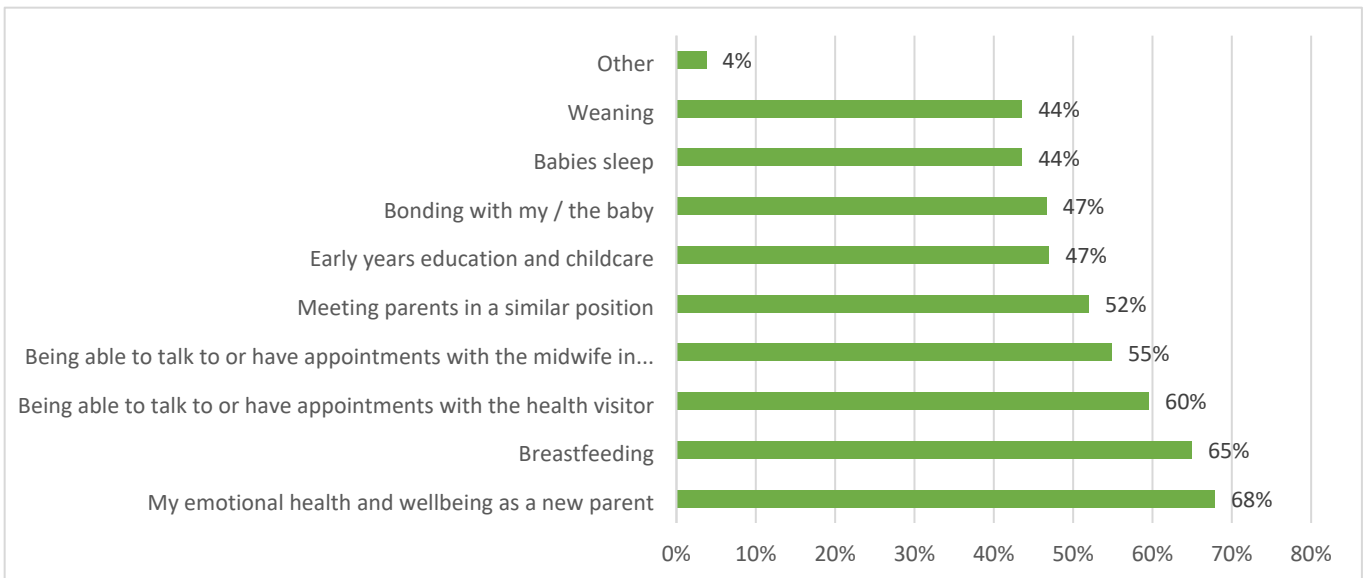
As a pregnant woman there was no access to antenatal classes and I felt completely unprepared for birth causing anxiety and stress. It seems as well now that baby is here that the local children's centre has been closed and I have to travel to a 'hub' to access support. This unfairly impacts those that are unable to travel easily and limits local social links which are vital for new mums.

4.2 First year of the child's life

Respondents were asked to choose up to six of the most important things they needed support with during the first year of their baby's life.

The two highest scoring areas were support for emotional health and wellbeing and breastfeeding with being able to talk to and have appointments with the health visitor coming third.

Graph 3 Top 6 most important support areas in the first year



'- please keep health visitor appointments for new mums

- breastfeeding support is so dependant on who Yiu know and I feel could be much better, I relied on peer support and could have done with access to something more formal

- I think womens mental health support for mothers is really important

- I feel concerned about the lack of free activities available to people, particularly with wriggle and rhyme not on at all libraries. It feels like a real divide for those on lower incomes

- support for parents to understand children's behaviour I'm concerned by the lack of appropriate information out there ans the number of parents that don't understand why children behave as they do.

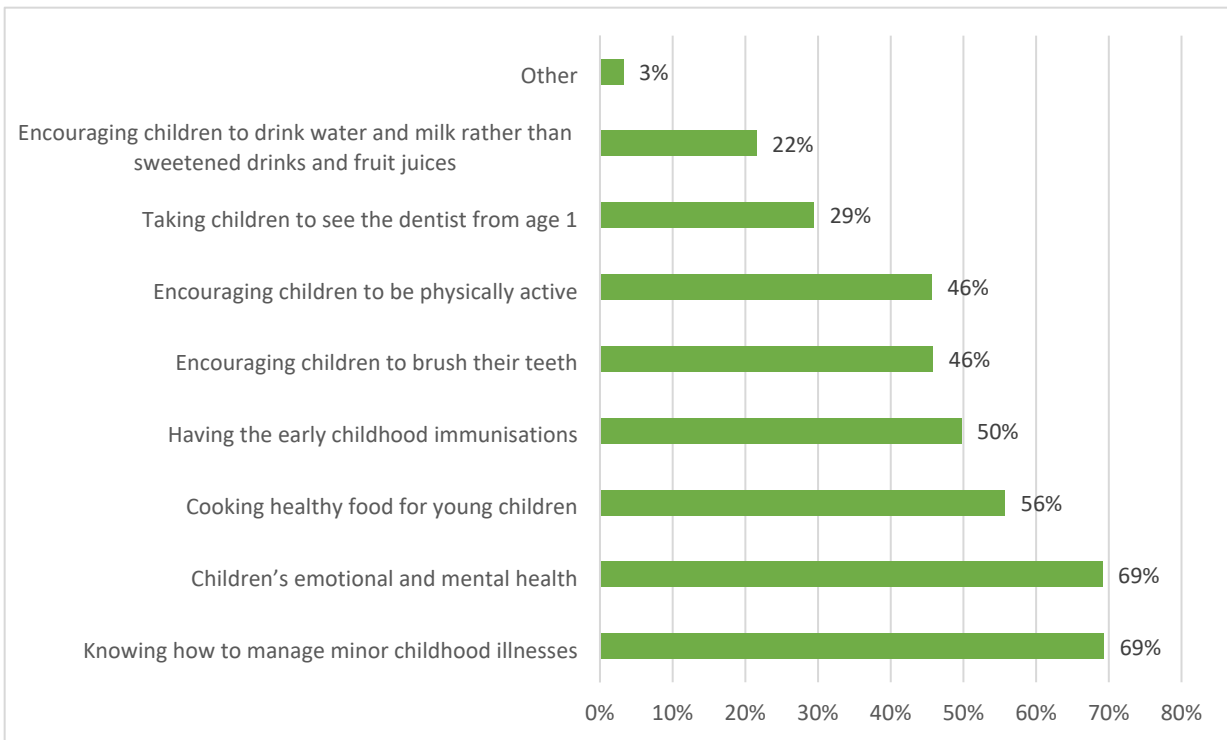
Please look at improving breastfeeding support in our area. Please improve the website so parents can find out about local classes for babies. I felt really abandoned in the first few weeks after having a baby.

4.3 Child health and managing minor illnesses

Respondents were asked to choose up to five of the most important things for them for their Child's health and managing minor illnesses

The two highest scoring areas were knowing how to manage childhood illnesses and support for children's emotional and mental health, with cooking healthy food for young children third. The lower score for taking children to the dentist may be more reflective of the general understanding of the availability of dentist appointments for children from the age of 1. This merits further exploration.

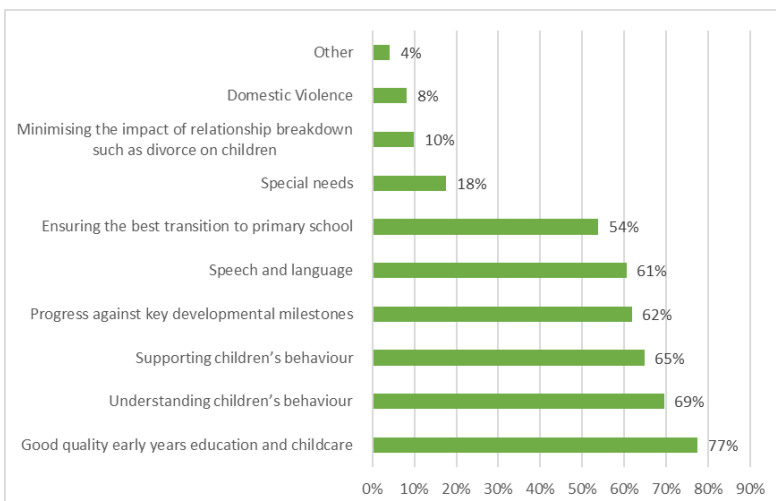
Graph 4 What support do parents and carers want for health and minor illnesses



4.4 Learning and development and preparing for school.

Parents were asked to identify the top five areas for support with learning and development and preparing for school. The highest % was for good quality early years education and childcare, with understanding and supporting children's behaviour being second and third. While support with domestic violence and minimising impact of relationship breakdown were smaller percentages, there were still 47 and 38 respondent who highlighted the need for support. Likewise, while only 18% of respondents said support for special needs this equates to 83 respondents.

Graph 5. Support needed for learning and development and preparing for school



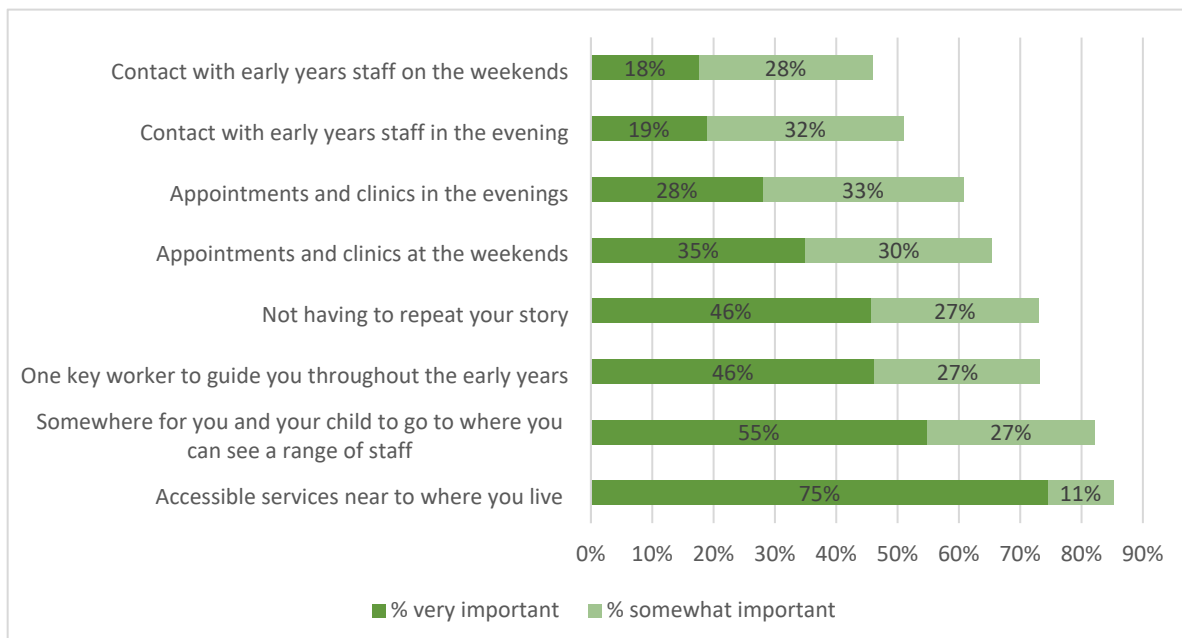
Should arrange more activities and holiday clubs for children with special educational needs.

Improved access for special needs children to local services preferably face to face

4.5 Where and how you receive support.

Graph 6 shows the importance of accessible services near to where parents and carers live. Somewhere where you can see a range of staff, one key worker throughout the early years, not having to repeat the story were also very important to parents. Over 65% of parents and carers thought having clinics and appointments at weekends was very important or somewhat important.

Graph 6 When and how parents and carers receive support

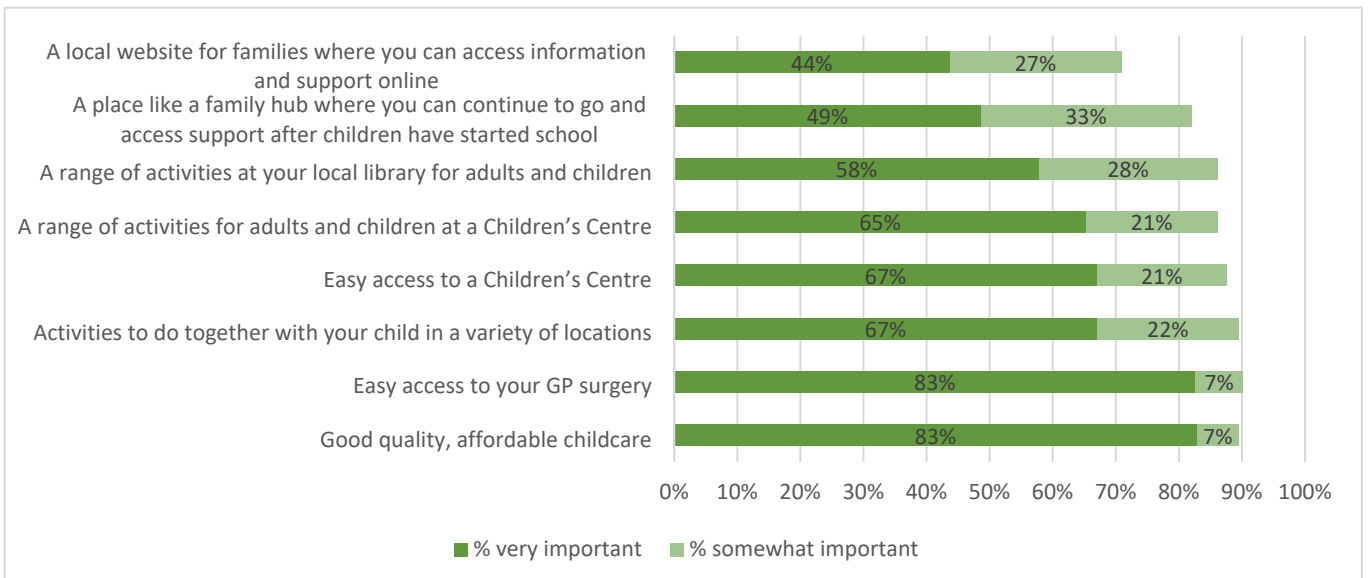


4.6 Facilities and activities

Respondents were asked to rate the importance of a range of activities and facilities.

90% said that easy access to their GP surgery was very and somewhat important. The third most selected choice was activities to with their child 89% and 88% wanted easy access to a children’s centre.

Graph 7 Important activities and facilities



Croydon has just cut all early years services both in children centres and libraries so this survey feels completely pointless and pie in the sky. Without any local activities, children will suffer. By LOCAL I mean within walking distance. There is nothing walkable for me.

Nothing. There has only ever been one service in the 5 years I've tried to access them and that was a terrible afternoon stay and play at Canterbury. I took my 8 month old and was told she was too young and it would be pointless staying (it was advertised as 0-5). If you have a disability, or are struggling with physical or mental health post-pregnancy, how are you supposed to catch multiple over crowded unreliable buses just to access basic services? It's appalling.

I have really missed the full and flexible timetables that Children's Centres used to offer. Many local church playgroups have also stopped running. Stay and Plays for under 5s made such a difference for me and my first child; I have missed these and have in truth experienced loneliness and isolation with my youngest.

I think there should be support for people going up to 2 children- I think the challenges of this is overlooked in services.

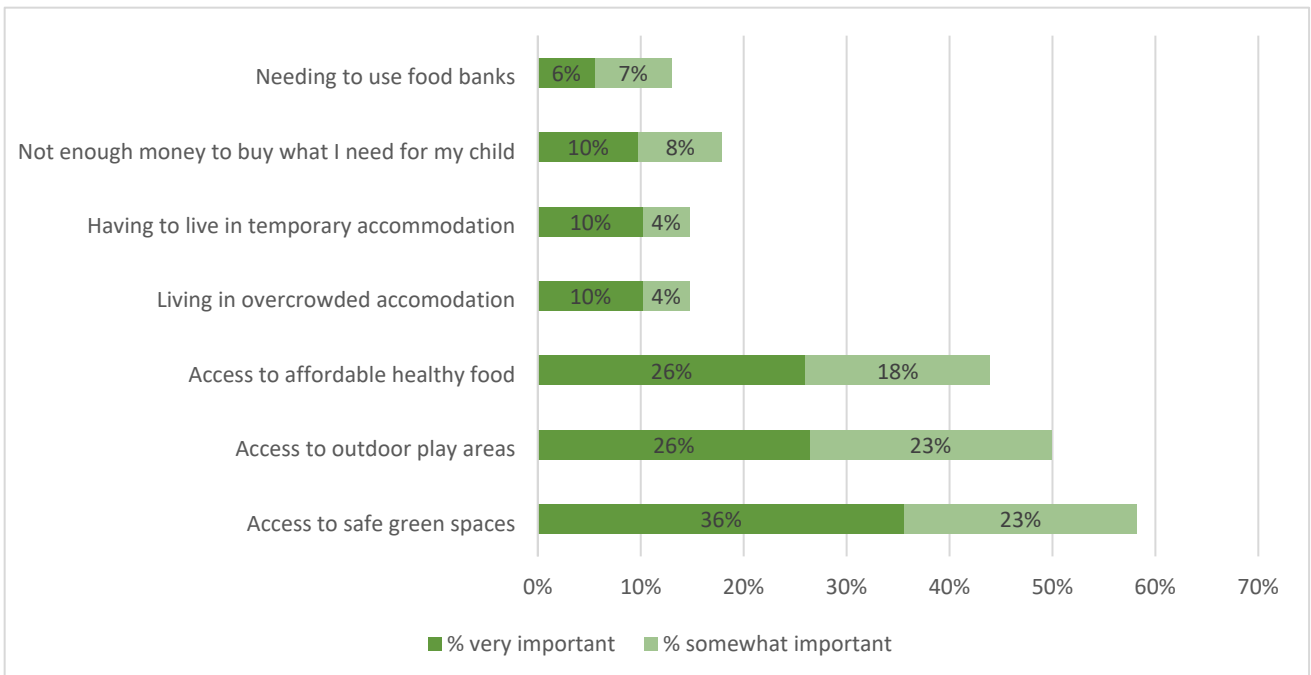
I also used to really value regular opportunities to get my first baby weighed and ask the health visitor questions about sleep, feeding and development- I definitely missed this in the pandemic with my second child.

4.7 The wider environment

The three most important areas in the wider environment questions were access to safe green spaces, access to outdoor play areas and access to affordable healthy food.

48 people said that having to live in temporary accommodation and living in overcrowded accommodation was very important and 46 said they did not have enough money to buy what they need for their child.

Graph 8 The wider environment



There should be no future flat buildings in West Thornton without consideration for developers providing full and complete indoor and outdoor play areas for kids of all ages and parking for adults. The drive to fill every available space with flats is choking the area without any compensation for existing residents. Your strategy is building ghettos not communities with kids being forced to meet in stairways and appartement corridors resulting in thousand of pounds of damage to leaseholders

*The playgrounds in Croydon need a lot of work. You mention the fact Croydon has the most young people but it also has the worst parks.
Old, unkept equipment, little wildlife all vermin!
It is quite depressing for mothers in the tightly cramped overcrowded social housing to get out and enjoy the outdoors when the parks have little to be desired.*

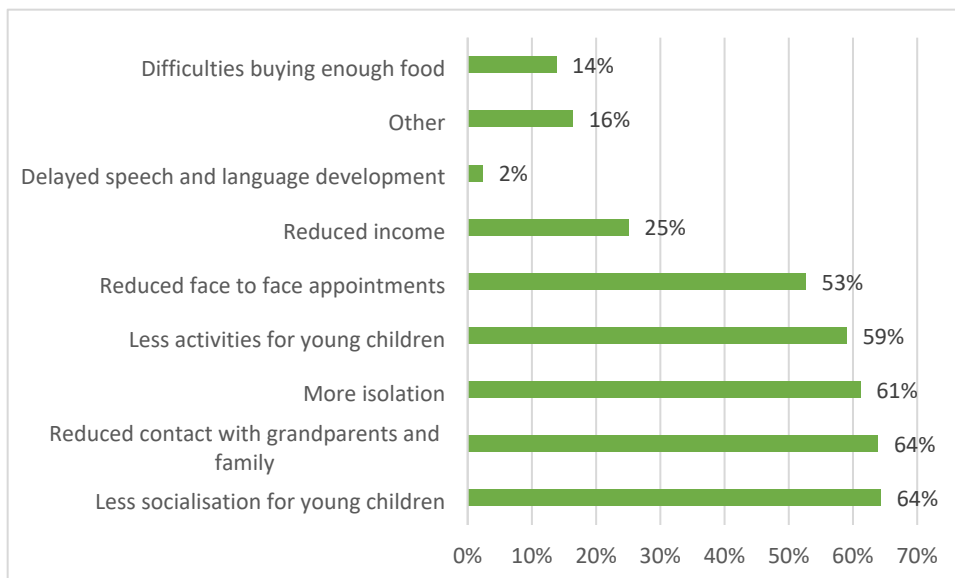
Housing is a bad problem for us. Not having space for our son to play as we are in a studio makes things really difficult.

4.8 The impact of COVID-19

Respondents were asked to what the impacts of COVID had been on them as a parent or carer of an early years child.

Respondents were asked what was the biggest impact of COVID. The areas which scored highly were all related to forms of social contact and activities.

Graph 9 The impact of COVID



The Byron childrens centre offered support during covid which was invaluable

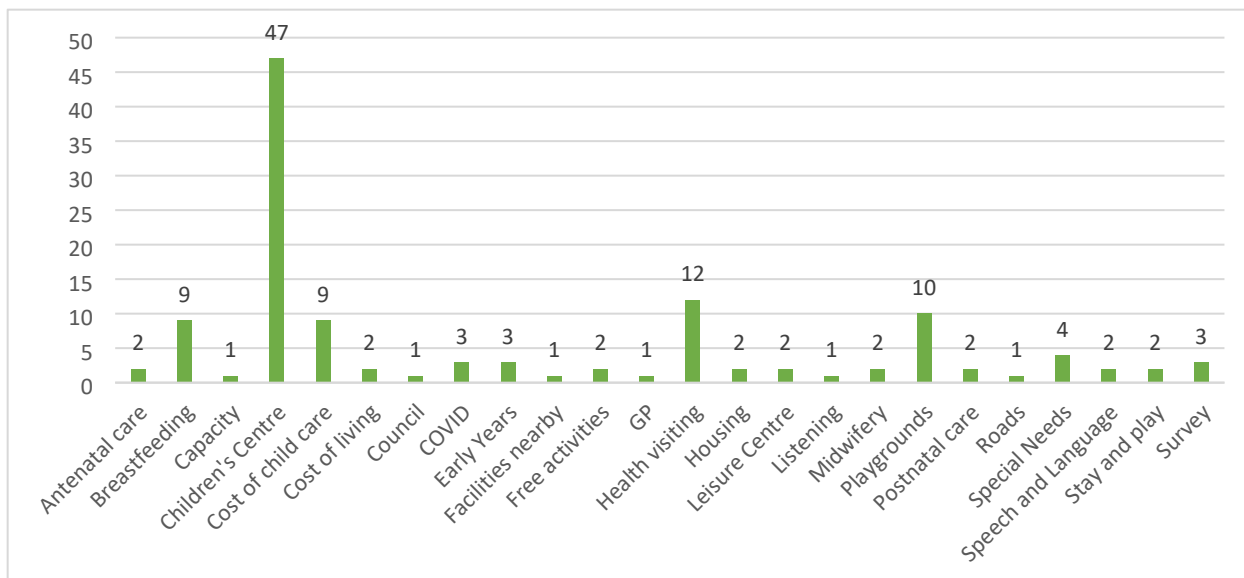
My daughter really struggled with the loss of socialisation and we worried about her mental health. I had a new baby and missed face to face health visitor appointments (when the baby was weighed) which I found vital with me first and think this was a real loss due to covid."

A lot of the facilities e.g childrens centres have shut or reduced. For example, baby clinics no longer run to get babies weighed. These should be essential. Some services have moved to phone rather than in person e.g breast feeding support, midwife

4.9 Main themes from the comments

There were a hundred general written comments. The largest group was about the Children's Centres, their value and unhappiness about the reduced services. The full range of comments can be found in appendix 1.

Graph 10 Main subjects of the written comments in the survey



5. Summary of Responses – Partner feedback

Two partner events were held with Early Years partners, on Tuesday 8th March and Saturday 12th March 2022. There were 120 attendees including from schools, childcare, maternity, children's centres, council education teams, primary care, CCG, Croydon health services, primary care, the voluntary sector.

In the first half attendees fed back on the draft scope, vision, objectives, and principles of the strategy and the impact of COVID. In the second session attendees provided their insight into the issues and priorities in relation to three themes: integrated pathways and seamless care, maximising opportunities and reducing the risk of inequalities and workforce development and training.

Following the partner events further feedback has been sought from partners via email and meetings and this has also been reflected in the draft strategy.

5.1 Feedback on the scope image

The scope image has now been renamed as a map showing the complexity of the landscape for families and carers in the early years.

The areas / services that partners have suggested incorporating in the 'scope' image were:

- Book start
- Calat
- EY Workforce development
- Calat Family Learning
- Carers families
- Charities
- Council services
- Counsellors
- CWD Team
- Early Help
- Early Years send
- Family members
- MHST
- MNS
- National Autistic Society
- Occupational health
- Outdoor Play
- Parent child intervention
- Parents
- Physiotherapy
- Police
- Portage
- Private sector nurseries
- Probation

- Friends and Neighbours
 - Grandparents
 - Grandparents
 - Healthy streets
 - Independent mobility
 - Isolation
 - Kinship carers Maintained nursery school
 - Mental health services
 - Relationship advice
 - Relationship support
 - School nursing
 - Schools
 - Social opportunities
 - Streetspace
 - Substance misuse services
 - Town Planning
-

5.2 Partner feedback on the vision and the objectives

The feedback and suggestions on the vision and objectives are shown below grouped into themes. These have been incorporated into the revised draft strategy. The biggest groups of comments were about SEND and joined up working.

We have included all the comments here because it is vital that we do not lose sight of them. The wording is included as it was provided by the respondents.

Table 2. Feedback on the vision and objectives

| Theme | Detailed comment |
|------------------------------|--|
| Accountability | How will you ensure that other departments are fully signed up to the strategy at every levels so that we are all accountable |
| Child development | Focus on children’s development as educational gaps at the age of 5 often |
| | Important to focus on children’s development as educational gaps at the age of 5 often widen later |
| Child's Voice | Important that child’s voice is throughout this – children need to be designing what their objectives are they need to be in all the meetings to do this |
| | Seek parents view and child views |
| | The vision is very good – voice of the child needs to be explicit |
| CLA / foster parents | Foster parents, children looked after |
| Communication | Improve communications with parents around what help/support they are entitled to i.e. many parents don’t know about 2 year old funding |
| | Could we use the word clarity in the vision? A frequent complaint from parents and education is that the pathway for support is not clear |
| | Promoting good communication environments and development to reduce barriers to socialisation and education |
| Complex needs | Better support for children with complex needs for them to access appropriate support, specialist services and advice on specialist provision |
| Context | Can objective be thought of in context of other croydon offers i.e. parenting hub offer |
| Digital poverty | Digital skills plus access to digital equipment is a big challenge to disadvantaged families |
| | Free membership to croydon libraries giving families free access to book and digital resources |
| EAL Support | Support families with English as an additional language and ensure these families have equality of access to all specialist services |
| | Supporting EAL parents |
| | Support and guidance for parents with English as their second language – translating services |
| Early Years education | Make sure children/families have access to high quality early education and care through all early years education settings |
| Engaging families | It’s a good draft – how do you engage families who don’t want to be engaged? |
| Environments | In 1st objective would be good to include safe so healthy and safe environments |

| Theme | Detailed comment |
|---------------------------------|--|
| | For families in one room in b and b sharing facilities with others – this may seem far removed from their experience of healthy environments for children to grow in |
| | How we manage Croydon's streets – streets were places children could met, play and travel independently |
| Evidence base | Keep theory in mind also – what do we know from evidence from systems theory, attachment theory about early brain development and does this line up in our services |
| Families and resilience | Important to keep the couple relationship in mind |
| | Parental and family resilience |
| Food | Encouraging health eating in young children and getting parents on board |
| | Some settings do provide breakfast for children so they are better able to learn and not hungry |
| Health visiting | Health visitor support to be extended into the first few years |
| | Health clinics need to be reintroduced |
| Joined up | Joined up support for families |
| | Improved integrated care services for children |
| | It would be great for the children centre hubs to have and offer good links to important teams like housing |
| | Continuity of services that are in place and working well |
| | GP health professionals and teachers working together with children with additional needs |
| | Parents / carers not having to keep repeating their story |
| | Think the objectives are good but need to recognise there needs to be a lot of collaborative / joined up partnership working to achieve |
| Outcomes | Improve outcomes workforce |
| Parental education | Parents education support their own ability |
| Poverty | Could we embed something around poverty and the impact that this has on so many aspects of family life |
| Pregnancy planning | Support people to have informed and planned parenting i.e. pre conception learning |
| | Pregnancy planning |
| Preparing for parenthood | Antenatal classes that educate about good parenting / relationships and bonding and not just about labour and birth – these need to be delivered before the baby arrives |
| | Positive experience of pregnancy and early postnatal period – this is the inception into parenthood for all first time parents |
| | Preparing families for parent hood – also needs to be something about supporting parents to be health mentally and physically |
| Racism | Tackle racism |
| Reducing Inequalities | Reducing inequalities |
| | I think the second point should be reworded to be clearer to parents – actively reduce the risk of inequalities across education, health and wellbeing |

| Theme | Detailed comment |
|----------------------------------|--|
| | Second point needs to be reworded to be clearer to parents – actively reduce the risk of inequalities across education, health and wellbeing |
| Safe Houses | Safe houses |
| Safeguarding | Educate families with safeguarding |
| Seldom heard | Really reach out seldom heard |
| SEND | Clear and easy to navigate support and guidance for parents/ carers of young children with SEND |
| | There is a gap in support for children with SEND in the Early Years sector at setting support level – also need to consider the support for maintained nursery schools / also support at home for those with social communication difficulties |
| | Early support for SEN – support parents to identify and seek support before school |
| | Early support for SEN – support parents to identify and seek support before school |
| | Increased practitioner confidence in supporting children with SEND at setting support level |
| | Early Support programme for children with special needs |
| | Widen the offer on socialisation for SEND |
| | Should SEND be grouped with other protective characteristics |
| Speech and language | Can we highlight support for development of communication, language and literacy please? |
| | Focus needs to be on supporting children's communication and language development |
| Strength Based | Build on children's strengths – on what they can do |
| | Health based in its approach – strength based model rather than deficit model |
| Transition to school | It is important to think about the transition to primary and being ready for school |
| Trauma informed | What about giving an emphasis on staff being trauma informed |
| Two Year Check | Encourage all parents to take up the opportunity to have their two year check |
| | Important for all families to take up the opportunity to have their two year check and for settings to identify areas where the child might need some additional support |
| Wellbeing / Mental health | Maternal mental health |
| | Tackle isolation and loneliness |
| | Wellbeing is important especially after covid |
| | Provide mental health and wellbeing support to children in school |
| | Considering the impact of social and economic isolation on parents as well as children's emotional wellbeing and development |
| | Redressing the stress parents have enduring through covid |
| | Access to community spaces – physical and mental health |
| Wording | Help children to live healthier and happier lives in Croydon |

| Theme | Detailed comment |
|-------|---|
| | Good emphasis on prevention and taking a proactive approach – think these are the right vision and objectives. The challenge is in the detail of how these objectives are implemented |
| | Wellbeing is quite an abstract term – we understand it but do our residents |
| | Will they be in this order |
| | Too Futuristic – action now, needs to be right now |
| | Include all before children and families in the objectives to emphasise the point in the vision that it is for all |
| | Wording to point and easy to understand |
| | It would be nice if it could make explicit reference to children simply being happy, healthy and safe – everything feels a bit corporate and might not make an immediate connection to families |

5.3 Feedback about the principles

The following feedback about the principles has been incorporated into the latest version of the principles and or objectives or scope in the draft strategy

Table 3. Feedback about the draft principles

| Theme | Feedback |
|------------------------|---|
| Access | Too many services remain virtual |
| Culture | Create a culture where all children are included |
| EAL | ESOL |
| Environment | We support children’s right to enjoy the street, as a place to meet play and travel independently |
| Family | A principle about recognising that family is the bedrock of a child’s future |
| | Something about the wellbeing of the whole family |
| | We recognise the contribution of the VCS and the sectors ability to empower families |
| Fathers | Include fathers |
| Integrated care | Provide integrated care to children |
| | We work across health and social and the voluntary sector to ensure services are joined up and was seen as one team |
| Mental Health | Mental health |
| Order | Safeguarding box should be first one |
| | Should security and safeguarding come first |

| Theme | Feedback |
|---------------------------------|---|
| | Agree on the safeguarding |
| | Maybe group principles under sub headings |
| Prevention | Implement preventative measures |
| Racism | Tackle racism |
| Impact of the principles | We review the effect of these principles and the day to day actions they promote |
| Scope | Pre and post natal care |
| Support for principles | I think the principles are great |
| | Nothing needs changing |
| | Nothing needs changing, you might want to think about having young people champions to help you on this 10-14 year olds |
| Wording | Do we want to notice families that need help or recognise families achievements and struggles |
| | We proactively address inequality, supported by a population health management approach |
| | Third yellow box could be reworded – we identify children and families that require help and intervene |
| | Recognise the expertise that families/carers/ parents hold on their families and being strength based in our approach |
| | We aspire for children to be the best versions of themselves that they can be |
| | We ensure information about our services and how to access them is clear and easily accessible |
| | Provide integrated care to children |
| | We offer a range of universal services to allow early identification of and support for a range of needs |
| | Replace meaningful by relevant |
| | Emotional wellbeing instead of mental health this might reduce any stigma or engagement anxiety |
| | Services should be effective and efficient and offer value for money – not drowning in red tape or bureaucracy |
| | We are confident and understand and include intersectionality in our work with families |
| | Need to cover all areas |

5.4 Impact of COVID

The strategy and delivery plan need to reflect the longer term impact of the points raised by partners and families about COVID and its effects.

Table 4. Feedback about the impact of COVID

| Theme | Comment |
|---|--|
| Attachment issues | Anxiety around leaving parents |
| | Attachment issues |
| Children Looked after | Impact on placement stability for children looked after who have been stuck at home with carers |
| COVID | Staff may choose to continue to work when they have COVID – they may feel they have no choice due to financial difficulties |
| | Children getting used to masks has pros and cons |
| COVID anxiety | Parents are fearful to attend appointments and/or not wanting to engage in EY's activities due to being around other people |
| | Some parents of reception children are still very anxious about COVID – though some of the younger parents of younger children seem more relaxed |
| Demand on health services | Schools preventing children attending due to coughs/ colds and increased rate of young patients present to GP / A&E for common viral illnesses |
| | Children missing health appointments |
| Development delays | Reduced socialisations opportunities impacting communication and interaction skills |
| | Behaviour issues with children, delayed speech |
| | Children in reception poor social, emotional, language and self care skills |
| | Children have had little socialisation before starting settings which has impacted their development |
| | Undeveloped language |
| | Less experience of sensory play and how that impacts diet, physical and language development |
| | I feel there has been an impact on children's speech development |
| | Communication and language skills have been impacted listening and attention as well as delayed speech |
| Domestic abuse | Increase in domestic abuse |
| | Domestic violence |
| Emotional wellbeing, mental health | Increase mental health issues |
| | Increased SEMH / Early Help / children disclosing |
| | High levels of anxiety among children and parents/ cares |

| Theme | Comment |
|------------------------------------|--|
| | Positive impact of schools and nurseries re-opening – lots of families feedback issues with transitions and coming out of COVID restrictions e.g. children’s anxiety to attend nursery, school group settings |
| | Rise in parental anxiety impacting on children’s needs |
| | Emotional and mental health needs are higher |
| | Family relationships fractured due to stress at home – how can we support families to ‘recover’ from this and rebalance family dynamics |
| | LAC and previously LAC children presenting with increased SEMH difficulties and exacerbated by COVID – feelings of loss, uncertainty e.c.t.. |
| | Struggle with housing due to unemployment – housing has a massive detrimental effect on children and parent’s mental health, families are stuck in over crowded small spaces |
| Future | General anxiety about uncertainty of what comes next for parents, staff and children |
| Hidden impact | Covid has increased hidden ham we are now noticing families for first time who already have greater complexity |
| | Families reducing their accessibility using COVID/illness as the justification to avoid contact with services to support their needs |
| | Children have slipped through the net in terms of being safeguarding or referred to usual pathways and are arriving at schools with chronic or complex challenges often with no paperwork |
| | There are impacts yet to be seen |
| | Lack of contact with health visitors – in person progress checks – means many young children may have unidentified significant needs |
| Medically vulnerable | Some families with most medically vulnerable children remain understandably anxious and at times this is limiting their engagement in the community |
| No recourse to public funds | No recourse – more asylum families being housed in poor temporary housing such as Hayesthorpe hotel – children have no belongings, no stability and not eligible for FSM. Schools are having to feed entire families, provide clothing, shoes, computers |
| Oral health | I am very concerned about the state of many of the children’s teeth as they have not seen a dentist |
| Positive impact | A positive impact is the increase in virtual meetings that has allowed engagement from parents and carers who ordinarily wouldn’t be able to |
| Poverty | Increase in food poverty |
| | If poverty and deprivision before Croydon meant we were working with say 25% of Croydon families before covid – what impact has the increased poverty due to covid done to that number and how can we sustain that/lobby for more resource |

| Theme | Comment |
|------------------------------------|---|
| Relationships with families | My class this year much more settle compared to last year – however still rebuilding parents community within our eyfs |
| | Building relationships with parents due to limited contact in schools |
| | Working with parents and families is still a real challenge |
| SEND | Difficult to recruit staff to support SEND pupils since pandemic close proximity to children etc |
| SEND | Difficulties accessing any education if SEND due to nurseries with limited capacity |
| Skill loss | Skills have been lost and need to be relearned |
| Speech and Language | Increased number of children with SALT |
| Staff shortages | Impact on early years provision due to staff issues |
| | Chronic school staff shortages due to staff absence |
| Waiting times | Confidence is returning but longer waiting times as services wind back up |
| | Increased waiting lists means children are waiting longer for support increasing harm in the meantime – some children and parents are increasingly struggling to cope |
| | Longer waiting lists to access e.g. CAMHS, medical support |

5.5 Integrated pathways and seamless support

Partners were asked for their ideas about the issues were and suggestions for improvement for three workstreams. The first of these integrated pathways and seamless support. The responses have been grouped thematically. The need for joined up approaches, improved communication, and information and support are high priorities.

Table 5. Integrated pathways and seamless support: issues and priorities

| Theme | Feedback: integrated pathways and seamless supported pathways and seamless support |
|--------------------------------|--|
| Accountability | We spend too much time passing the buck and not taking responsibility |
| | Agencies taking the lead and responsibility not passing on to another |
| Outcomes and priorities | Different outcomes and priorities for different services – how can we align these? |
| Commissioning | Commissioning in a way that enables partnerships |

| Theme | Feedback: integrated pathways and seamless supported pathways and seamless support |
|---------------------------------|--|
| Communication | Clear systems of communication – what is available who is who |
| | Better communication between services |
| | Referrals pathways are sometimes unknow – not know enough about what services offer |
| | Knowledge of local services and promoting a culture of curiosity |
| | More staff to have capacity to support communication and working across services |
| | Clear and published pathways |
| | Better communication between teams and partners – another service may be able to help if they knew there was work that needed to be done – for example parenting skills could be offered by CALAT, likewise workforce development training |
| | Different priorities – communication channels |
| | Not enough communication between professionals |
| | A network that meets regularly to share information and make connections |
| | Info sharing protocols between agencies that means that services are informed about issues and have the right info to support families and children |
| | People don't know each other across the system so communication between professional groups is poor |
| | Maybe creating a newsletter to keep services updated with changes |
| Engagement with services | Keeping engagement with services after initial identification |
| Family Hubs | Family hubs sound like something good to aim for to help this |
| Finances | Integrated funding |
| | Finance – when services feel themselves to be competing for too scarce resources, collaboration is hindered |
| | All funding – parent have to apply for different funding – should be able to make one application and get relevant funding |
| | Attaching funding to effective partnership working |

| Theme | Feedback: integrated pathways and seamless supported pathways and seamless support |
|--------------------------------|---|
| | Multiple organisations and funding streams |
| | Funding reduction in services |
| Health visitors | Access to health visitors in early development |
| | Health visiting not available for families |
| | Early identification through health visitors |
| Information and support | All families having a new baby should have access to information and support – draw pathways from a child’s perspective |
| | Schools not aware of the services available e.g. some schools have free mental health support but others weren’t offered it |
| | Information available when baby is registered |
| | Have a clear pathway of where to go or all information in one place |
| | There’s lots of services who try to work together but the website is very poorly structured and families struggle to find information unless explicitly told by professionals |
| | More information for families about pathways available and how to access them – thus empowering families |
| | Families need to be ready to receive information as may need to be reported at different points |
| | One place to find an overview of services and how they interconnect with each other – directory sounds good and maybe some kind of mapping diagram as an overview would also help |
| | Ensuring information available in all relevant languages |
| Information sharing | Clearly agreed protocols for information sharing |
| Joined up approach | I’m hoping the formation across the ICS across SWL will bring the system partners together |
| | Segregation within teams around roles and responsibilities |
| | Linking home, school, health, social like a team |
| | Different services have different agendas which can unintentionally impact joint working |

| Theme | Feedback: integrated pathways and seamless supported pathways and seamless support |
|----------------------------------|--|
| | More joined up thinking required, often services are working in isolation but don't communicate with each other to gain a whole picture |
| | Joined up communication for SEND children, often unknown to service before starting school |
| | Often I will identify a child in reception that has additional needs however the health professionals tell parents that all is fine – very confusing for parents |
| | Lack of consistency |
| | Too often support and pathways are school lead but needs to have the support before starting in education |
| | How can we link better with GPs |
| | Health being current with education e.g. Locality |
| | Less spot purchasing would make things more seamless |
| | Reintroduce regular meetings between maternity and HV – this would require reducing workloads so that relationships can be maintained across these professional groups and im not sure how this would happen |
| | Health professionals sometimes advice parents to ask schools to arrange an EP referral but schools may not feel it is needs or may not ave capacity to commission EP time |
| | EY staff to e aware of the localities SEND support so they can advice parents of how SEND works in the borough |
| Measuring success/failure | Measure success and address failures so they don't happen again |
| SEND | There are children that come to reception and hve been identified on send as they did not go to a nursery and missed the 2 year old check |
| | Roll out of SEND locality model |
| Thresholds | Difficult to find help if the threshold not met or barriers such as no recourse are involved |
| | Referrals may be turned down leading to drift in gaining support |
| | Referrals for ey children for speech and language support barrier even if known to other services |
| | Different services have different thresholds – we need to ensure they are understood and bridge any gaps |
| | Different thresholds and definitions – the difficultness of dealing with dual diagnosis – the child who doesn't quite it any one definition or who doesn't have a specific diagnosis |

| Theme | Feedback: integrated pathways and seamless supported pathways and seamless support |
|----------------|--|
| Wording | What is meant by integrated pathways |
| | Will you rebrand croydon best start |

5.6 Inequalities

The second breakout groups looked at the issues and solutions for maximising opportunities and reducing the risk of inequalities.

Table 6. Maximising opportunities and reducing the risk of inequalities: issues and priorities

| Theme | Feedback: Opportunities and reducing the risk of inequalities |
|---------------------------------------|---|
| Community and voluntary sector | Engage with the community and voluntary sector to embed services in communities |
| Data | Collect the data needed to highlight inequalities at the earliest point |
| | Improve screening detection of those at risk of inequality (housing, dv, income, educational level et) during pregnancy i.e. invest in training and implementation of a social screening tool in pregnancy |
| EAL | Barriers in my schools community are around English as an additional language – parents understanding of what is available |
| | Too often parents with EAL or learning needs or own poor mental health do not know the systems or are worried about asking for support |
| | More access to interpretation or forms translated into different languages to ensure families with EAL do not miss opportunities |
| Funding | More funding from the council per hour for 15/30 hours |
| Inclusive services | Families who find services hard to access tend to stay under the radar-parent champions for these groups |
| | Ensure that all settings and school are truly inclusive and are not discouraging children from attending due to the presenting SEND needs |
| | Settings need to be more inclusive too many SEN are not accessing provisions |
| | Thinking about the language we use to promote service and encourage families to access services e.g., non blaming |
| | Early identification working with communities making parents aware of the support earlier. Parents begin informed early of SEND needs and what this can mean for future education. Not accessible and fair for all. |
| | Ensure all settings are accepting of all children of all different abilities |
| Joined up approach | Better graduated response |
| Parent champions | Utilise parent champion approach across local areas, they provide friendly and accessible information |

| Theme | Feedback: Opportunities and reducing the risk of inequalities |
|--------------------------------------|---|
| Parental engagement | Get documents/adverts/overall offer reviewed by parents and carers before they are used, to ensure they are accessible and relevant Work closer with families and providers |
| Reach | Making sure we are reaching all families, particularly those less likely to seek services Make it someone's role to reach specific groups Deliver opportunities in community settings, targeting groups and areas that are less wealthy Additional focus on the localities with high levels of deprivation |
| Sharing learning | Share learning across the full geographic area of Croydon so that no particular area is excluded |
| Support for parents | Support for those who have been affected by adverse childhood experiences as they become parents Support for parents with mental health or learning needs themselves |
| Targeted support and services | Targeted support and services |
| Well trained staff | Recruiting well trained qualified staff Well trained staff, sharing good practices More awareness of range of needs and all staff skilled in identification |

5.7 Workforce development

The third breakout room focused workforce development issues and suggestions.

Table 7. Workforce development: issues and priorities

| Theme | Feedback: workforce development and training |
|------------------------------------|--|
| Bureaucracy | Lots of processes and paperwork impacting on time spent with children |
| Calat | Talk to Calat – we offer a range of courses/ qualifications for Early Years and wider school workforce |
| Career progression pathways | Better pathways for progression in early years |
| Data | Central data hub – health, school and social care can access |
| Funding | Funding, particularly SEND funding SEND funding was not my comment but I think it goes more widely than personalised funding – early intervention saves costly later interventions - improved outcomes and better return on investment Budgets |

| Theme | Feedback: workforce development and training |
|---|---|
| | MDT working and huddles have worked well in adult services – could we do something similar for children? |
| | More funding to raise salaries for early years |
| | More money all round –but has always been this way |
| | Financial constraints – more need but less money |
| integrated management teams | Integrated management team – less silos |
| Online training | Use online training more so that people can do it when convenient to them, provided they're not expected to do it in their own time |
| Partnership working | Opportunities work in joint/ MDT clinics |
| | Partnership working- drawing strengths from early learning team, MNS, SEND workers to share expertise |
| | Share resources |
| | Reducing divide between PVI and maintained sector – everyone in it for the child's best development |
| | Agree there is a divide – MNS are expensive which is precisely why there needs to be a proper debate as to our role and impact – what value we add to the sector as a whole |
| | Common training programmes |
| Profile | Raising profile of early years |
| Promoting EY as career choice | Apprenticeships, schools and further education - promoting working early years as a career choice |
| | Providing work experience for young people in the early years sector like we had in the past |
| | Apprentice opportunities working with colleagues and universities to promote careers in early years |
| | A government drive for recruitment in early years |
| | Level 3 apprenticeship scheme |
| Recruitment and retention of staff | Staffing/recruitment |
| | Retention of staff due to low salaries, rising costs of inflation, lack of CPD |
| | Retention |
| | Trained staff may then leave for promotion so new staff are undertrained |
| | Workforce recruitment and retention is a constant challenge, so teams are always stretch 0 MDT working part of answer |
| | Retention of experienced staff |

| Theme | Feedback: workforce development and training |
|------------------------------|--|
| Sharing good practices | Sharing good practice between settings – making use of expertise and knowledge in settings |
| Staff wellbeing | Low morale after pandemic – feeling undervalued and overstretched |
| | Staff wellbeing |
| Staffing | Lack of experienced qualified staff |
| | Covid has meant many staff are off and trying to cover classes |
| | Support staff for absence / sickness |
| Training | Dedicated time in relation to training if services already compromised |
| | Problem of time for training when short staffed |
| | Ability to attend training due to being in ration |
| | Mentoring rather than training in isolation |
| | Investment in good quality childcare, well trained professionals, sharing good practice |
| | Training and opportunity to embed learning |
| Training - joint | Staff linking from different areas to have training together so that they understand each other better |
| Training - monitoring | More insistent on CPD where staff have not accessed training themselves for some time |
| Training - SEND | More training around SEND and early identification for all team and not just left to teams that are specifically in those roles – children are being missed when there is insuffice to knowledge and understanding |
| Training - trauma | Some services i.e., cryodon drop in offer lunch time bite size training and conversations such as trauma |
| | Trauma training |
| | Trauma informed approach in training |
| Understanding of legislation | As well as the service offer – it's important that we understand legislation in key service areas such as housing which governs our responsibilities, but which may be in conflict with our duties |

5.8 Partner feedback received following the Stakeholder workshop has included the following points.

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| Early Years Strategy Steering Group May 2022 |
| Who should we be engaging with? |
| Use text messaging to engage young people |
| SENDIAS Kids would appreciate involvement. |

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| We have spent a lot of time talking about reaching our community - which is vital. We also need to think about how we reach out to all professionals across disciplines, so families receive the joined up vision |
| Are there any direct letters that the council send out to new parents etc. Or any other letters that go to residents ie council tax letters. Also the twitter and other social media groups |
| Use local Facebook groups and next door neighbour apps |
| Seeking to understand rather than tell is 'spot on' |
| Views on balance scorecard approach? Are there measures missing? Are the priorities for you service included? |
| The EIF self-assessment matrix is currently under review - is it still the most effective measure |
| Need measures around EHCP s in Croydon and children at school support level |
| Are there any appropriate emotional health and well-being measures for young children which could be included ? |
| A measure of the number of children engaging in nursery or pre-school provision. |
| What are the risks that should be included about the strategy and its implementation? This is a Partnership strategy; who else needs to feedback? |
| engagement with all sectors of the community |
| Has the SEND board been consulted? |
| finances may be a risk |
| access to services |
| The new Integrated Care Board/Systems |
| I can only think of the EH Partnership Board, which already has sight of this. I am unsure of any Community groups/boards which might be useful. |
| I would say the main VS groups working with very young children like Home Start, Little Village,, Peppermint Children centre, ABCD connectors |
| Any school governing boards ? Specifically those of Maintained Nursery Schools ? |
| Financial backing for the strategy |
| Funding cuts |
| Articulating the vision in a sufficiently cogent way to secure engagement at ground level |
| Change of staff within the Council |
| Lack of communication between teams can reduce the impact of any of these targets |
| The join up across all stakeholders is a challenge but this has been really well managed so far - it has been shared widely so far |
| Willingness to engage across groups and services with respect and a shared purpose |
| Opportunities to engage in the Early Years Stronger Practice Hubs |
| Children and young people |
| A risk could be that it is not aligned with the Supporting Families Outcome Framework. |
| Lack of expertise |
| For the implementation phase to succeed, the 'buy-in' from all partners needs to be evident at both strategic and operational levels. |

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| The risk is that the level of transformational change that is required will not happen within what becomes the politically acceptable timeframe. |
| Strategy partners represent very different perspectives , ethos and working practice - for example, PVI childcare providers have a very different outlook to maintained educational provision, voluntary organisations and health professionals |
| Early Years Strategy Steering Group April 2022 |
| Feedback on the challenges facing the Early Years included in the draft Strategy |
| Evidenced by the survey, and by recent serious case reviews, the views of fathers are missing from the way we are shaping services. |
| Challenge of the impact of cost of living/ austerity on families eg gas bills food etc |
| The join up between the many different "pools" of work occurring across the borough.... need to find a way to maintain the communication across the partnership |
| Consistency between schools and voluntary sector providers with respect to children with SEND. |
| Increasing number of children identified with having SEND |
| Equality of access to SENDIF funding |
| Recruitment and retention in ey settings |
| Insufficient funding |
| Transition between early years and Reception |
| Cannot read the challenges listed in this screen Early Help - Help Early = key must be to look at all activity underway. SEND needs to be a theme. |
| Inclusive services are highly valued by families. Funding envelope available often does not cover costs |
| Challenges around good inclusive practice |
| Importance of involving primary care |
| Importance of voice and coproduction key. |
| Mobility of families being unknown to services |
| I think the challenges are reflective. I think in line with the family hub work, we could add something around the family only having to tell their story once. So more should be done to ensure there is whole family approach to the families needs |
| Impact of Covid in delays to diagnosis and correct school placements |
| SEND Green paper - needs to be reflected - local inclusion plans and delivery supports the priority re access within communities |
| Funding for children with SEND mitigates against strong inclusive practice |
| So many nursery settings struggling with staffing and also declining quality |
| Instability of funding for maintained nurseries in future |
| Support for families where additional needs may be emerging and knowing how and where to access support. |
| Integrated 2 year review is not well supported across services |
| Feedback on the strengths and opportunities included in the draft Strategy |
| Agree systemic strengths in place |

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| Potentially the new Mayor might add some weight to this work? |
| Strength - Good and diverse early years provision |
| Experienced committed trained staff and leaders |
| Lots of potential future funding streams forthcoming via recent announcements of SF monies, RPC monies and FH Best Start for Life grants |
| Joint working across local area |
| Work of SEND Delivery groups - Early Identification of Need in particular but others too such as improved joint working will support |
| Opportunity to utilise unique role of maintained nursery schools |
| There are sufficient teams working on early years but there is overlap in their roles which lead to duplication and inefficiencies. |
| Diversity of borough is a strength |
| Need to link together SEND inspection outcomes |
| Existing provision, and how this will integrate with family hubs development and potential additional funding to enhance workforce development |
| Opportunity to roll out locality SEND model for early years |
| Quality of provision |
| There is some great work and appetite amongst some various local communities to pull together and create opportunities for children and young people |
| Feedback on the draft priorities for the governance and finance workstream |
| Cannot see all of them...but governance is spot on. |
| It would be good to include SEND in the draft priorities |
| There is a Multi-agency Sharing agreement already in place in Croydon - a quick win would be to use this one |
| Information governance is important, but can be added to a wider piece of work, and so not in isolation. |
| Deprived areas, |
| Safeguarding |
| Challenges of not having story twice is having the right systems with interoperability. |
| Need to link in with existing parent groups and reps. Also use the access through LSS - early years support development. |
| There needs to be a specific priority about the involvement of fathers. |
| Just to ensure that fathers are reached as much as possible |
| The section on inclusivity could be more specific with regard to protected characteristics; for example SEND, |
| Families know whether they feel welcomed, valued and respected - it is not always easy for them to articulate what this needs |
| Foster carers |
| What about a leaflet or QR code for any shops in Croydon that sell baby goods? Might help to reach new parents to advise of what our intentions are for all families? Do we have other language versions? |
| I would suggest that we invest in existing networks and forums held across the borough to ensure representation of individual areas, cohorts and groups |
| Parents in hotels, temporary housing, arriving in UK are scooped up and welcomed |
| Feedback on the draft priorities in the engagement work stream |

| |
|---|
| Need to link in with existing parent groups and reps. Also use the access through LSS - early years support development. |
| There needs to be a specific priority about the involvement of fathers. |
| Just to ensure that fathers are reached as much as possible |
| The section on inclusivity could be more specific with regard to protected characteristics; for example SEND, |
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| I would suggest that we invest in existing networks and forums held across the borough to ensure representation of individual areas, cohorts and groups |
| Parents in hotels, temporary housing, arriving in Uk are scooped up and welcomed |
| Feedback on the draft priorities in the integrated pathways workstream |
| Integrated funding |
| Professional respect and trust across pathways |
| How do parents navigate the pathways if they themselves have a special need or if they want particular support for a child who is not meeting milestones. |
| Pathway from midwifery through first year for all or at least more parents |
| Have we looked at a timeline for a child's life and sought to automatically "push" or "pull" relevant contacts to families to encourage them? |
| Ensure workforce development enables confident identification of, and early support for families with SEND |
| Feedback on the draft priorities in the minimising inequalities workstream |
| Clarity about how and where parents and schools can access advice and support for SEN concerns for any child up to age 5 |
| Re SEND Early Years support and services need to be aligned to ensure equity of access and quality. Current silos need to be addressed. |
| Inclusion, and an offer for children with SEND should be a feature across services |
| I'm advocating a 0-25 approach instead of a 0-18... SEND and care leavers are our most vulnerable... why are we excluding them automatically at 18? |
| Bullet point 3 is critical as incidents of SEND are increasing significantly and may have been missed during the pandemic. |
| Children with SEND and their families - especially for access 2 year old provision |
| Feedback on the draft priorities in workforce workstream |
| Career progression; better pay |
| There is a national crisis in recruiting specialist doctors and nurses, it may be worth ensuring Health colleagues have inputted into this priority |
| Integrating all the skills that the workforce bring is essential. |
| Join up with what's already occurring in the Early Help Partnership work around data (Anthony Allsopp) |

6. Appendix - Written comments from the parent / carer survey

| Theme | Comment by respondent |
|-------------------|---|
| Antenatal care | As a pregnant woman there was no access to antenatal classes, and I felt completely unprepared for birth causing anxiety and stress. It seems as well now that baby is here that the local children's centre has been closed and I have to travel to a 'hub' to access support. This unfairly impacts those that are unable to travel easily and limits local social links which are vital for new mums. |
| Breastfeeding | 1. Support proper breast-feeding support face to face, not just leaflets or websites. Recruit more health visitors. 2. It's important to be able to see people face to face with a young child 3. Work with the other councils to provide joint services in Crystal Palace 4. Repair, maintain and upgrade play areas. |
| Breastfeeding | Lack of face-to-face support for breastfeeding, health anxiety for children and general mental health support for new mothers. It's shocking. The antenatal classes supposedly 'prepare' you for birth but do not even cover fully c sections, traumatic births and the first stage of caring for a newborn. It's actually a joke. |
| Breastfeeding | Please look at improving breastfeeding support in our area. Please improve the website so parents can find out about local classes for babies. I felt really abandoned in the first few weeks after having a baby. |
| Capacity | Sessions were full many times even when being on time. Maybe something to think of to change or to let more people in. |
| Children's Centre | The children's centre's that I attended pre pandemic: Malling Close in particular was fundamental in getting me out of the house and socialising with other mums and babies. The advice, friendships and activities were absolutely brilliant. |
| Children's Centre | Children centres reduced activities and location mean less accessible to take kid to do activities in my day off work. Need for more indoor activity provision over the winter when not easy to take to child to a park and you don't want to pay for a class that child may or may not enjoy, though would be willing to pay a few quid to help support provision or pay what you can system. More investment in parks, upgrading and maintaining equipment. Especially smaller ones like the one by Gordon crescent bus stop. |
| Children's Centre | Croydon has just cut all early years services both in children centres and libraries so this survey feels completely pointless and pie in the sky. Without any local activities, children will suffer. By LOCAL I mean within walking distance. There is nothing walkable for me. Nothing. There has only ever been one service in the 5 years I've tried to access them and that was a terrible afternoon stay and play at Canterbury. I took my 8 month old and was told she was too young and it would be pointless staying (it was advertised as 0-5). If you have a disability, or are struggling with physical or mental health post-pregnancy, how are you supposed to catch multiple over crowded unreliable buses just to access basic services? It's appalling. |
| Children's Centre | The Byron childrens centre offered support during covid which was invaluable |

| | |
|-------------------|--|
| Children's Centre | You are not asking the right questions. Of course I will tick five things, but if you can only fund two, how do you know which ones I prefer? Or the ones I don't need but I think are nevertheless the most important? You aren't providing half the needed service in the North of the Borough (and less than you are in the more affluent areas) so I don't feel like I should use any of the services because I worry I am using the space of someone who needs it more. With my eldest we used to go from one children's centre to another, several days a week. Most of those centres don't exist anymore. My toddler hasn't been to see a health visitor or to a children's centre for more than two years. I used to advocate your services to the new immigrant mums, now I worry there isn't enough there and it will lead to a disappointment. I know money is tight but the costs will be tenfold in a few years if these services aren't provided. Surely different funding models could be explored. Plus please get a social researcher to help with question design: no option is offered for no disability, and what on earth is 'Neither not an issue nor an issue'? |
| Children's Centre | Do not close any more children Centers. We will go insane without them |
| Children's Centre | Children centre is great for parent and child and can help postnatal depression |
| Children's Centre | I have really missed the full and flexible timetables that Children's Centres used to offer. Many local church playgroups have also stopped running. Stay and Plays for under 5s made such a difference for me and my first child; I have missed these and have in truth experienced loneliness and isolation with my youngest. I think there should be support for people going up to 2 children- I think the challenges of this is overlooked in services. I also used to really value regular opportunities to get my first baby weighed and ask the health visitor questions about sleep, feeding and development- I definitely missed this in the pandemic with my second child. |
| Children's Centre | Considering the strong evidence of the importance of the early years in a child's development I have been extremely disappointed with the provision of services in Croydon to support babies, children and their families. In particular I feel the gradual decline in the number of Sure Start Children's Centres across the Borough has been woeful, I understand that finances (or lack of) have played a part in this however, I believe, Croydon's babies, children and families deserve more in order to maximise life chances. |
| Children's Centre | Everyone we have met in services has been amazing. Thank you children's centre, midwives. But the system is stretched and they need more capacity and money. Please support them and us |
| Children's Centre | Could there be potential to start or have a childcare / family centre in Grangewood park? There is a real lack of things going on for children in this part of the borough and many buildings in the park which could act as a perfect base/hub. |
| Children's Centre | I just want to say I have been going to the Selhurst children's centre since my daughter was 5 weeks old and I could not fault it the staff are amazing and I've had the opportunity to make friends and have since been to the Kensington avenue children's centre for the baby and us course which I would recommend to any first time parent and I've been to the aerodrome children's centre which is perfect for new activities for my daughter and it's lovely to see staff we know as they work across the centres I would be lonely and isolated without the children's centres and my daughter is such a social butterfly because we have access to these centres for free and I recommend every new mum I know to make use of their local children's centres as I have the best experience I couldn't be the mum I am without them |

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| Children's Centre | Alot of baby clinics, children centres & libraries have closed down. Which makes it difficult to make use of a lot of services in certain areas. I had a c section with my youngest & Shirley clinic was too far for me to travel to for clinics etc |
| Children's Centre | My local children centre do not office regular class so have to travel further away |
| Children's Centre | Please don't close the spokes- malling close has such a reduced service especially stay & play, everything else locally is expensive and not suited to 2-3 year olds |
| Children's Centre | I think the childrens centres are wonderful, i have used them with all 3 of my kids but less so now because of lack of sessions on my days off. |
| Children's Centre | Thank you to the amazing children's centre staff for staying open as often as possible and for as long as possible during covid times and for their continued support and professionalism. Also for their fantastic online baby massage sessions during lockdown and for their welcoming nature at selhurst and Kensington Avenue children's centres. I have loved every minute of it. Their online communication is also brilliant! Their drop in sessions have helped so much too! |
| Children's Centre | My closets 3 Childrens centres are closed. I hav three childrens that miss put on these services as well as myself!! When I travel to use others I am told they are full capacity and get here on time. I can't get to them earlier as I have to travel to them. Croydon is like living in a postcode lottery. You can only get support if you live at the right address or you can afford private support. What about if you can't do either, you get left to become isolated, depressed and then it cost the nhs and social care more to support you as you where failed as a parent because you didn't live in the correct post coded area!!!! |
| Children's Centre | We need regular access to a Children's centre and library in Shirley, the library is only open on Monday and Tuesday and hardly any activities at Shirley children's centre anymore, I don't drive and at times difficult to get to other places with a 3 and 5 year old on the bus |
| Children's Centre | Please find funding for Children Centres. I have used Purley Oaks with my first one lots. It was great place to meet other mums (as I didn't have any in my circle), and for the little ones to make their first friend. Mums are very isolated during the first year and not everyone have courage to go find places to go to if there is nothing nearby. that often had a very bad ending. I suffer from post natal depression after my 2nfd child who is now 3. It was during the Lock down we were not able to do what I did with my first one. It had a major effect on me and on my baby boy. |
| Children's Centre | The childrens centre are a link for many parents and were set up to support families. |
| Children's Centre | It is a shame that services have reduced or stopped such as dad and family time at Selhurst children centre. |

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| Children's Centre | The Children centres are a life line for me as I would have no where to take the children and no professional support, also I can talk to others in the same boat. The variety of toys helps the development of the children in the centre. |
| Children's Centre | Childrens centres are a life saver and i was so angry and disappointed when they closed down. There is no where to go unless you have lots of money and can afford private classes. Parents need so much support with their new born babies and at the moment there is nothing to go to. |
| Children's Centre | Again I feel the lack of services or lack of promotion of services to families with young children is shocking. Even now as the children's centres have reopened the availability and timings of classes doesn't provide variety. There also needs to be more outward support for single parent, lower income and/or vulnerable households. |
| Children's Centre | The children centres were essential when outle child was first born and we suffered tremendously when they closed due to covid. They are very much needed. |
| Children's Centre | The changes to the children's centres are awful - it's a change that absolutely nobody has asked for, and those who need the services most will suffer the most |
| Children's Centre | Our children centres are more important than can be understood to the development of the young children growing in the area. They are a benefit to families and young children and positive for our community. Without them some mums have no place to go for support which is a disgrace. |
| Children's Centre | I think the new Hub/ spoke situation with Children's centres is just not good enough. The services were fantastic before and now they are infrequent, spread too widely across the borough and clearly underfunded and understaffed. Such a shame. |
| Children's Centre | I am really sorry to see the hours have been cut in children centres (Byron to note) meaning in my area there is reduced free activities for my child. |
| Children's Centre | There is no children centre in East Croydon. I really hope there is one with walkable distance. And the nearest playground at Park Hill is really needed an update. Playground facilities are so old and not enough. |
| Children's Centre | I don't think I could have got through the year without the kind staff and groups at castle hill children centre! Going there every week was our life line as a reason to get out of the house, meet other parents, speak to experienced staff about sleep and the range of activities they taught us. Far more supportive than any other staff we came across!! Thank you!!! The gp prescribed over the phone medication for my baby when actually baby massage at these classes helped improve my baby's stomach pains. These centres are a lifeline to so many people we also benefitted from going to the Byron children centre sessions |
| Children's Centre | There could also be children's centre activities / meet ups in local parks etc. If we ever have another lock down it's important services like health visiting and midwifery don't stop!! A phone call or zoom is not ideal but much better than nothing. Opportunities to meet other mums is soo important, the impact on mental health without connection is enormous. Costing more longer term. |

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| Cost of child care | Additional Assistance paying for childcare cost / reduce the cost especially for working families from 2yo. |
| Cost of childcare | Ask the government when will childcare funding be increased so that every child in every part of this country get the same amount of funding. Instead what is happening is that in some areas funding could be as high as £15 per hour and other parts of the country it is less than £6 an hour. This funding should be equal to every child in every borough in the whole of the UK not as it currently is. It would appear that children in boroughs with less children are enjoying higher quality childcare because their funding is a good price. Children in Croydon Surrey, get basic minimum funding and this money is not enough to let them have a high quality of childcare because staff are not being paid enough. Where I teach at this nursery we only have funded children accessing their 15 or 30 hours and no children who attend pays, so staff are managing ion the basic minimum wage which is not fair. It is high time that the government give more funding to the larger boroughs who have too many children to share the small funding money pot with, this in effect means that each child get minimum funding per hour, while similar children in smaller boroughs get maximum funding Per hour. |
| Cost of childcare | Childcare is very expensive. I would like to have access to public creches and nurseries |
| Cost of childcare | I'm pleased some thought is going into this. Childcare in this country is a joke. It's prohibitively expensive and difficult to find. Support with healthy eating in pregnancy and for young children would have a hugely positive impact on the community. |
| Cost of childcare | We need more childcare options that are affordable and reliable. |
| Cost of childcare | I think we need to have more free sports for children and teenagers in Croydon so children can be more active and we can develop physical development. Sport can be very expensive for parents. Free childcare even if one parent can work. Housewife can be a very demanding job too more when you are going through a critical illness like cancer. Full time Education should be free from young 4 years old. |
| Cost of childcare | Child care is too expensive in this country. I have a well paid job and I'm university educated however I may have to give my career up in order to look after my two children. Two nursery places costs my family £3600 a month! Surely it is better I am in work and paying taxes rather than on state benefit however I am getting pushed to stay at home due to the financial strain. Fuel prices is also a consideration too now. |
| Cost of childcare | Child care is insanely expensive these days and the tax free amount paid to parents now covers 1 months schooling more support is needed |
| Cost of living | Also on top of Brexit the cost of living is getting higher and more difficult to maintain, which is worrying for the future. |
| Cost of living | Supporting families on low income during the pandemic. |
| Council | Croydon services are rubbish abolish the council |
| COVID | Healthcare workers are using covid as an excuse just because they can is not fair! |
| COVID | The day I gave birth to my baby, my husband wasn't allowed to stay in the hospital with me. I had an caesarean and an internal bleeding so I had another operation right after I gave birth. I could barely walk or look after myself, don't even mention to care for my newborn baby. I was left alone at the postnatal ward at East Surrey Hospital in huge pain and did not receive enough care and help from its staff. Horrible experience. |
| COVID | Forcing COVID tests on children before seeing a doctor has caused my child serious anxiety. |

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| Early Years | My children are older but when they were babies I used local services for healthcare, breastfeeding support, weaning info, a child first aid course, library services, local playgroups and playgrounds. All of these things are a necessity not a privilege if we want to support families as a society. I would hate to think that other new mothers would have to navigate motherhood without these services. I am in a relatively privileged position with support from my husband, family etc but these services are a lifeline and NONE of them should be at risk of being cut. Helping mothers (parents) is an easy way to help create a better future society. It has to be worth the investment. |
| Early Years | Invest in early years reap benefits later. Should be joined up more midwife- health visitor-Children-Centre |
| Early Years | My baby was well cared for and had support. I feel lots of babies feel from professional view and suffered during the pandemic because professionals stopped the regular support services. This must not happen if these circumstances happen again. |
| Facilities nearby | Having facilities near us is essential. We live in SE19 which seems to be forgotten by Croydon council. Getting to areas where there are centres is almost impossible on public transport - with a double buggy |
| Free activities | Less free services and baby classes available that there used to be. |
| Free activities | Have not found any free activities to do with my baby |
| GP | Even having doctors appointments for my little one, there again were no weigh in's or checks to see how we were doing. When i asked at the doctor they said that they didn't have any scales. Surely they could buy a set of scales to weigh all the babies coming in? |
| Health visiting | <ul style="list-style-type: none"> '- please keep health visitor appointments for new mums - breastfeeding support is so dependant on who Yiu know and I feel could be much better, I relied on peer support and could have done with access to something more formal - I think womens mental health support for mothers is really important - I feel concerned about the lack of free activities available to people, particularly with wriggle and rhyme not on at all libraries. It feels like a real divide for those on lower incomes - support for parents to understand children's behaviour I'm concerned by the lack of appropriate information out there ans the number of parents that don't understand why children behave as they do. |
| Health visiting | <p>I have had no contact from the health visiting team in over two years. We are all well so I have not wasted my time chasing since it is always a hassle. My child is over 3 now and hasnt had any health visitor apts since 1.</p> <p>We see our gp and allergy specialist as needed so while it isn't a worry for my family it does worry me for other families who are depending on those services and do not have addition resources. We previously lived in Sutton and had amazing services. Croydon is shockingly poor. The library service cuts are also disappointing</p> |
| Health visiting | <p>Serious lack of face to face contact to families by HVs a real danger; sending tick lists out in the post for development checks ; asking Mothers in front of their partners about DV completely unacceptable and insensitive. All mothers in the Covid 2 years have suffered from a total lack of face to face support and minimal service. What is being done to increase HV numbers?</p> <p>For toddlers with a serious speech delay I faced the totally unsatisfactory experience of video session with a SALT who denied there were significant delays.</p> <p>I was directed to Purley Oaks Childrens centre and met Liz for the speech assistance who was absolutely marvellous.</p> |

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| Health visiting | I have not been in touch with a health visitor since my daughter was a few weeks old in Feb 2021. I tried to call and get the 9-12 month evaluation myself, they gave me a number to call and certain hours to call in, I called when I was supposed to and it was a dead line. She's now almost 13 months and has not been evaluated. |
| Health visiting | I haven't been contacted about a 2 year check or wouldn't know where to start accessing help if I needed it |
| Health visiting | More contact post pregnancy with health visitors |
| Health visiting | I only had one health visitor appointment since my baby was born- I'm a first-time single parent with mental health issues and could have used much more support in the early months with feeding and sleep, and struggled to bond. I was told to ring the duty line but to be honest it's easier to just use Google. The benefit of a health visitor (from friends and relatives who live where the services are good) is that they can see your child, your environment and ask questions/offer support based on that. A duty phone line doesn't do the same thing. That's how things like abuse and domestic violence get missed. |
| Health Visiting | I was supposed to have a health visitor regularly come and see me as my blood pressure was very high but they said this wasn't possible. The children's centre in Selhurst was the place to support me and keep me going and help me. |
| Housing | I currently pay for my housing and am struggling to pay for child care for my child. As a single parent with no additional financial support I am struggling. I make a good salary but with the rise in bills it is getting harder and harder. |
| Housing | Housing is a bad problem for us. Not having space for our son to play as we are in a studio makes things really difficult. |
| Leisure Centre | Reduced facilities like closure of the Purley leisure centre has had a huge impact. Please reopen the Purley leisure centre. Reduced opening hours of the Purley Library has a big impact. Could you please have the library open on Saturdays so that working parents could have a chance to use the library facilities? Thank you. |
| Listening | I feel that parents should feel like they are being heard when they ask for support and not just be brushed off. During the pandemic I had to support 3 separate families during their time of stress. 1: Desperately needed financial assistance, housing help and emotional support for both them and their child so I was on the phone EVERY DAY with them. 2: Needed help because of the breakdown in their relationship and ensuing custody exchanges, which had to take place at my house to keep the peace. 3: Desperately wanted something to be done with regards to their child's tongue tie but felt fobbed off and had to struggle on by themselves. A struggling parent may only ask once for help and if they're ignored or not listened to that time then you will lose their faith in your ability to help them! |
| Midwifery | It would be really helpful for midwives to do the very early postnatal appointments at home. Having to travel to hospital when my baby was 5 days old was such hard work. I could barely walk. It would also be helpful for the health visitor to visit in person, especially for the early days. Overall I found the postnatal midwife experience in Croydon poor. I never saw the same person twice, and I had to travel to appointments when I hadn't yet recovered from the birth. I showed one midwife a blister on my nipple and she just told me it would get better and offered no support with breastfeeding technique to solve the problem. If I hadn't been able to access help from family members I would have stopped breastfeeding. The health visitor invited me for an appointment when my baby was just a few weeks old and I had to walk two miles to get to her, and then when I arrived she told me actually she had got the date wrong and I would have to come back in another two weeks. It didn't really feel like she cared. I called and asked to change health visitor but no-one called me back. |

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| Playgrounds | Green spaces and playground equipment needs to be maintained in good order and promptly replaced if vandalised Video cameras (even dummy cameras) are a good deterrent to vandalism - would be good to have at all playground spaces |
| Playgrounds | The playgrounds in Croydon need a lot of work. You mention the fact Croydon has the most young people but it also has the worst parks. Old, unkept equipment, little wildlife all vermin! It is quite depressing for mothers in the tightly cramped overcrowded social housing to get out and enjoy the outdoors when the parks have little to be desired. Also it is not clear what events the library are putting on is rhyme time still available? |
| Playgrounds | There should be no future flat buildings in West Thornton without consideration for developers providing full and complete indoor and outdoor play areas for kids of all ages and parking for adults. The drive to fill every available space with flats is choking the area without any compensation for existing residents. Your strategy is building ghettos not communities with kids being forced to meet in stairways and appartement corridors resulting in thousand of pounds of damage to leaseholders common areas It's miserable for everyone putting renters and leaseholders against each other . Management charges are being driven sky high with a mop up second charge being applied annually in addition to monthly payments payment s running into more than a thousand pounds. |
| Playgrounds | My children access playgrounds a lot which is very important for their physical and mental well-being but there is clearly an underinvestment in these spaces in Croydon relative to other London boroughs. |
| Playgrounds | I often get the impression that the council is not here for me/us as a family. By that I mean that most of things I see and want to do with my children is private organisations/clubs etc., rather than anything the council runs (although perhaps something like the central library will develop into one as my children grow up). We live close to some green spaces (Wandle Park/Waddon Ponds) and my absolute biggest gripe is the lack of outdoor play activities and the state of repair of the equipment. Wandle park has such a great location, but the cafe is never open and the equipment is for older children or is often vandalised. This could and should be a number 1 attraction, all year round, like Beddington Park. Waddon ponds equipment is horrendous/dangerous. All you need to do is go visit Sutton run parks (Nonsuch, The Grove and Beddington Park...the latter is outstanding) and the difference is stark! The pandemic has shown outdoor spaces to be a core service. |

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| Playgrounds | Croydon needs more playparks and more corner shops (or even vending machine shops) - it has an opportunity to be a 15-minute walkable city rather than car-centric and polluted, but there are so many inaccessible or dangerous streets - it is stressful getting about with a toddler without the landscape being so difficult to negotiate. Plant some trees along the streets (ideally between parking spaces rather than on the pavements) to shelter parents and kids from the weather/traffic/pollution. Ban pavement parking. Improve the dropped kerbs. Police flytipping and glass-smashing on footpaths. Run school streets properly so that parents aren't just driving up to the next corner and then pretending they've walked the whole way (and ask the parents why they choose to drive). And when planning newbuilds, allow pedestrian cut-throughs so that parents don't have to walk the long way round via main roads to get to the nearest park. (For example, there ought to be pedestrian cut-throughs to the Purley Oaks Children's centre/South Croydon Rec from the north; there should be a pedestrian cut-through from the Moreton Road steps to Normanton Meadow - there is actually a path that goes next to the newbuild that's been closed off by a gate, or you could create a path via the primary school playing field. Plus the newbuild next to St Peter's Primary school should have had a playpark on the plot, as there aren't any playparks for a good half-hour's walk from there - perhaps just open up the school playpark to outsiders at the weekend?) |
| Postnatal care | Lack of care recovering from a c section was a shock. Limited home visits post hospital for baby and me. No guidance on how to recover from a C-section |
| Postnatal care | Croydon council postpartum services are the worst I've come across. You get looked after for 6 weeks then just forgotten about. It's shocking |
| Roads | Young children need safe streets. There is too much road danger from speeding and dangerous drivers. Croydon does very little to enforce this. |
| Special Needs | Improved access for special needs children to local services preferably face to face |
| Special Needs | The lack of important care for children with special needs |
| Special Needs | Should arrange more activities and holiday clubs for children with special educational needs. |
| Special Needs | Support for children who have SENF age 4/5-8 Reception age to year 2. |
| Speech and Language | The lack of service and support for speech and language is diabolical. There have been no face to face visits the online service chatterbox is absolutely useless |
| Speech and language | I'm disappointed that you can not have access to a speech and language therapist until your child is at school. The chatterbox group have no impact especially when the child isn't at the meetings and its hard to attend when you are a full time working parent. |
| Stay and play | my children and I enjoy attending the local stay and play sessions and we are so glad that they are running again. |
| Stay and play | A chance for mums to also meet and discuss issues with other mums, such as stay and plays open to everyone |
| Survey | The grammar in some of these questions/answers is really poor and does not give the impression of professionalism. |

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| Survey | This is a very confusing and muddled survey. |
| Survey | This survey is written incredibly badly. It's not clear what many of the options are - some of the options are grammatically incorrect nonsense-terms e.g 'slightly no impact' and 'Neither no impact nor any impact' Therefore the answers to these sections should not be taken as scientifically valid. |