

SYSTEMS CHANGE

Information Management Systems in Ugu District

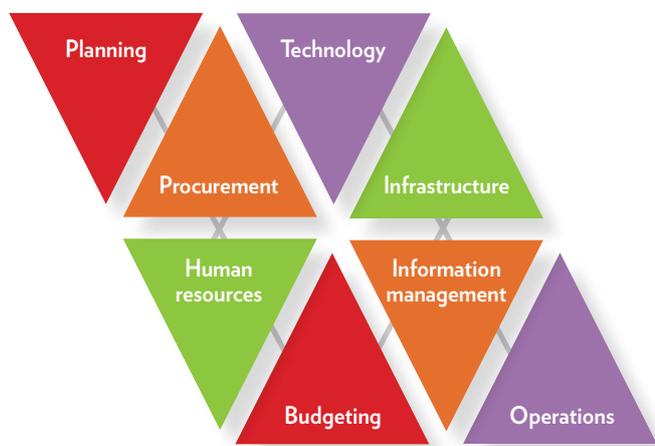
Network Action Group (NAG) associates MLONDI VILAKAZI and XOLISWA MAJOLA explain the game-changing impact of using workflow boards and information management systems in fast-tracking the ECD centre registration process.

All ECD centres in South Africa must be registered with the Department of Social Development (DSD) to ensure that young children receive the necessary early education and care, and so that these centres can access government funding. Two registration processes apply to centres: (1) partial care registration focusing on the physical amenities and (2) programme registration focusing on what happens inside the “classroom”. The estimated 40,000 ECD centres in the country must be registered for both of these at least every five years. Inefficiencies within the current registration system make the registration process extremely onerous for social workers and applicants alike, leading to massive backlogs. This is compounded by the increasing numbers of ECD sites requiring registration.

NAG, in partnership with Ilifa Labantwana and the KwaZulu Natal DSD, embarked on an intervention to test an Information and Workflow Management System in two DSD service offices in Ugu district (Umzumbhe and Vulamehlo) in October 2014. The ultimate goal of the intervention was to improve regulation, planning and funding of ECD centres, as a result of a more efficient and effective registration system.

This project was also intended to facilitate the compilation of a full ECD budget bid for Ugu, based on an expectation of 400 registered sites – more than double the number of registered sites at baseline. Inclusion of all registered ECD sites in the district represents a more accurate costing of ECD services and will support Ugu’s motivation for increased resource allocation for ECD.

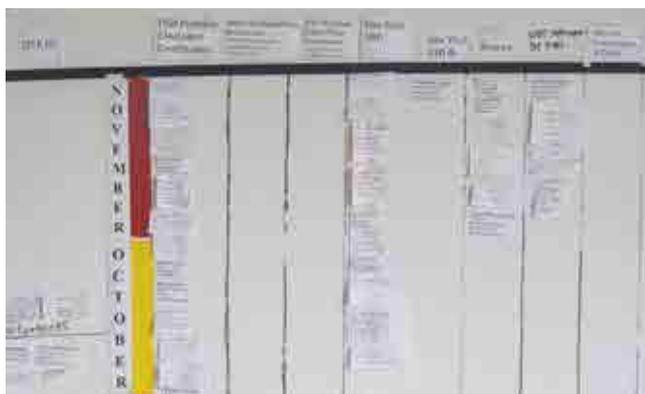
Figure 1: Shortfalls around ECD centre registration



Designing an efficient paper-based information and workflow management system for ECD partial care and ECD programme registration

Extensive research and analysis by NAG and Ilifa, in collaboration with DSD, suggested that the inefficiencies in the registration process could be fixed with some simple techniques implemented by social workers with support from NAG.

The research showed that the registration process is a series of steps requiring completion in sequence by a range



Workflow board examples

of different stakeholders including ECD practitioners, social workers, environmental health inspectors and DSD officials. Therefore, simple process management techniques used in manufacturing to improve efficiency and productivity can be applied to service offices and their staff who have to manage all the steps in ECD site registration.

Using a process management approach, the intervention was designed to include the following critical components:

- 1) Simple improvements to the paper-based filing system within service offices;
- 2) Identification and verification of all ECD sites in the areas served by the two DSD offices;
- 3) Categorising all ECD sites according to their respective step in the registration process (“the workflow”);
- 4) Developing, implementing and testing the workflow board process to bring new unregistered ECD sites into the registration process and to educate ECD practitioners on regulation requirements; and
- 5) Identifying blockages within the registration process as sites move through the workflow boards and supporting social workers to develop relevant solutions.

The first stage of the intervention was to break down the steps in the partial care registration process. All the steps involved in the process were discussed and the most critical steps were agreed with the social workers who manage the entire process. The steps were then recorded on to a workflow board placed on an accessible and visible wall in the service office. The workflow board is a standard whiteboard available from most stationery or office-supplies shops.

The next stage in the intervention was to identify and verify



all the ECD sites within the geographical boundaries for which the service office was responsible. Once the ECD site was identified and verified, it was allocated a card and placed on the board, thus initiating a process of progress. Each site, represented by a card, would then be moved manually across the board as it completed a further step.

The bottlenecks in the process became visually obvious as ECD sites encountered obstacles and bunched up in certain steps. Social workers were able easily to identify blockages in the system, develop proactive solutions to resolve specific problems and then to move ECD sites onwards towards conditional or full registration.

Importantly, the service office managers allowed for two social workers to focus their time exclusively on ECD and to allow for some dedicated ECD space within the service office.

In order to maintain buy-in from all relevant stakeholders and to keep everybody up-to-date with the intervention, monthly working group meetings involving social cluster departments were held to discuss and report on project progress. The meetings have become a steering committee of sorts, providing a space to deliberate issues regarding ECD regulation, registration, funding and planning.

What were the major bottlenecks within the registration system identified through the workflow boards and what are their solutions?

1) Locating all ECD sites in the very rural Ugu District

A key step in systems improvement is clarifying the likely demand on the system. At the same time, the research showed



En route to visiting ECD sites in the remote Ugu district

that finding all the centres requiring registration support was a challenge and the system would only work if enough sites were identified and brought into the process.

At baseline, the process of identifying, verifying and registering centres and programmes involved a multi-pronged activity for data collection, capturing and verification for public and private ECD sites, as well as services. The data was volunteered by a variety of non-profit organisations and government bodies; key sources being KwaZulu Natal DSD, National DSD Audit Data, NAG, TREE, Siyabona Trust and KidzMag. The data collection process yielded an inventory of over 500 ECD sites in Ugu.

The data was verified through phone calls and physical visits to every site. This process resulted in yet more data, which was then compared against existing records. A new, updated database for Ugu was developed using Google Docs. The verification process included sites already in the partial care system and new sites which approached service offices for support. The spreadsheet in the Google cloud is continually being updated as new information on sites is uncovered.

Site verification is an intensive process that includes travelling to remote parts of the district – a necessary but costly and time-consuming exercise. NAG is exploring ways of improving the efficiency of this process through the use of technology and has piloted an electronic Information Management System (IMS).

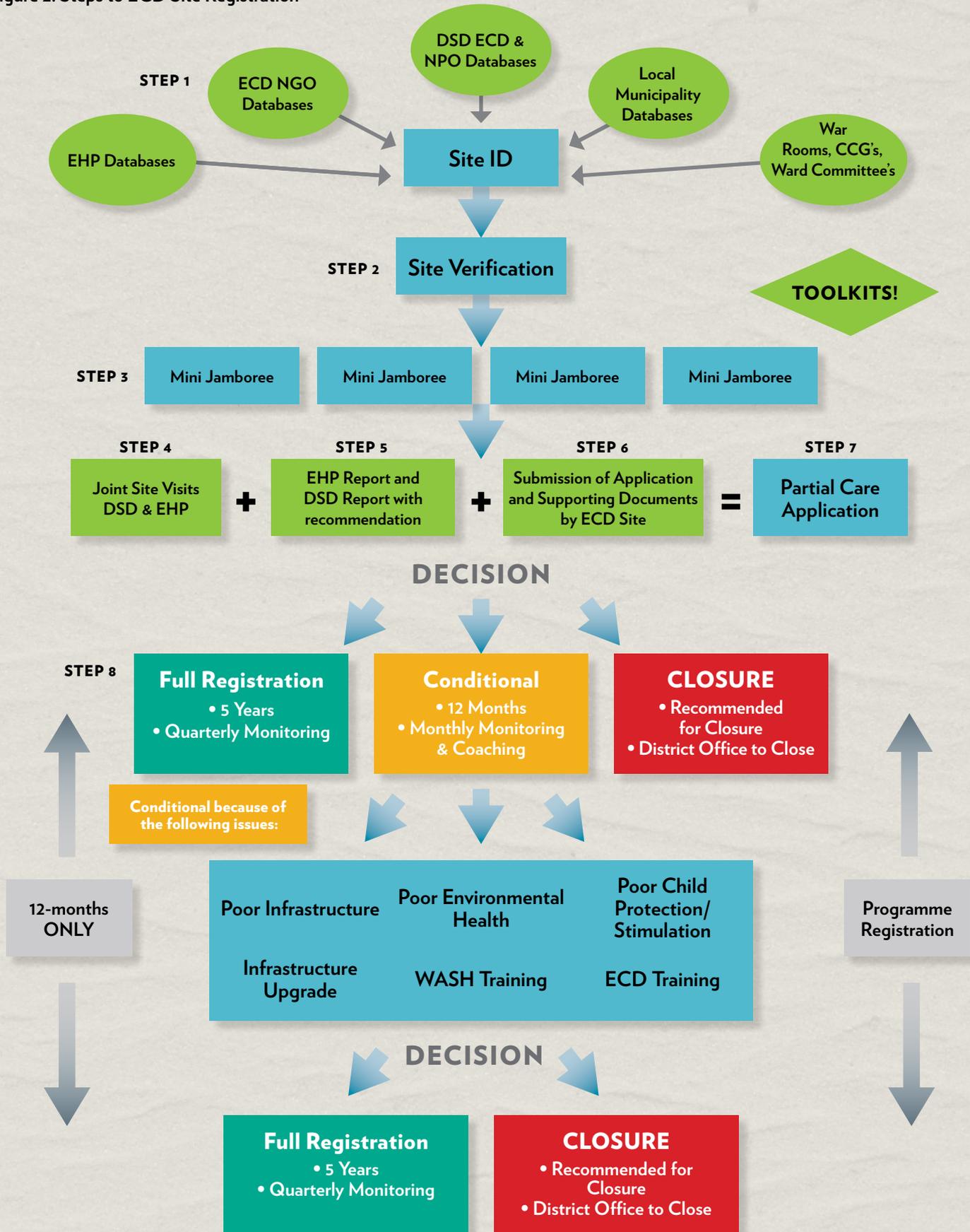
2) The enormous backlog of unregistered sites and sites requiring registration

The findings from field excursions and conversations with ECD site staff revealed that many staff did not know that ECD sites needed to be registered. Those aware of the registration requirement were unclear on how to go about the process. NAG and the social workers needed to find a way to be able to engage large numbers of ECD sites simultaneously and provide them with the guidance and support they need to enter and complete the registration process.

The solution to mass registrations was found in holding jamborees. Unregistered sites are invited to come and register in a forum where they are supported step by step through the process by NAG and DSD social workers. Jamborees have proved a highly effective way of getting an ECD site moving swiftly along the road to registration, because all important information is provided at the same time and place, in accessible formats. Sites attending jamborees have also helped to unearth their previously unknown peers by channelling the message on the importance of registration back into their respective communities.

Over a four-month period, seven jamborees were facilitated between Vulamehlo and Umzumbe and these have succeeded in placing 65 new, unrecorded ECD sites on the workflow board en route to partial care registration. Each of these sites has been

Figure 2: Steps to ECD Site Registration



visited by a social worker, together with an environmental health inspector from the district municipality, to assess compliance with norms and standards.

3) The need for social workers and environmental health inspectors to work together seamlessly

A major bottleneck uncovered through the workflow boards related to the involvement of environmental health inspectors (EHIs), as EHI inspection of ECD sites is required as part of the registration process. In both service offices, sites continually bunched up in this step within the process. According to the social workers, the issue with EHIs is two-fold:

- Once the social worker has completed their inspection of the ECD site and handed over the report to the EHI, he/she is required to do their own inspection and write their own report, to be considered when deciding on whether the site can be conditionally or fully registered (or, in extreme circumstances recommended for closure when children are at risk due to health and safety concerns). The problem arises in the travel to sites – government officials have limited access to transport.
- EHIs often take too long to compile their reports for submission to the district coordinator, thereby holding up the process even after the social workers have completed all their work.

The social workers were able to organise transport to visit multiple sites on a single day. In situations where EHIs were unable to secure transport, the social workers invited them to conduct joint inspections of ECD sites along with them. The result was a reduced number of trips, less time taken to conduct multiple visits to sites and a lower inspection burden on ECD sites, allowing them to focus more time on the classroom.

This solution is a perfect example of simple methods created by the social workers themselves that increase the efficiency of the process and also save money for the government.

4) Too much paperwork in too many places

At baseline, DSD recorded information on each ECD site in seven different paper files kept in different offices. Multiple locations for the paperwork increases the workload on social workers, leads to a loss of documents during transport and, importantly, increases the burden on ECD practitioners, who need to register and re-register their sites.

NAG investigated how this volume of records could be reduced and made more accessible, including how this could

be reorganised and streamlined to avoid duplication and unnecessary paperwork. The design of a new system to reduce the paper burden on social workers is underway, but will require the use of an online IMS to effect long term change. The improved paper system will also cut transport requirements needed to move files between service offices, the districts and the province and reduce the misplacement of files.

Reflecting a systems approach to ECD registration improvements and looking ahead

Implementing and testing the workflow boards intervention in the service offices uncovered multiple challenges faced by social workers and ECD practitioners alike. However, the obstacles and bottlenecks arising from implementing the workflow boards in DSD service offices turned out to encourage positive and innovative action from within the system, rather than despondency on the part of DSD staff.

Due to all the systems changes made by the service offices and the DSD staff, the end result was a process of registration for a partial care certificate that had been significantly accelerated – from an average of 11 months to between two and three months.

Perhaps the most significant change, however, was the renewed excitement from social workers towards their work and the immediate impact of their efforts on communities; so much so that NAG has nicknamed the workflow board a “therapy board”!

This intervention has clearly demonstrated that the future of ECD massification will be determined by having efficient and practical systems, a dedicated ECD office space and most importantly dedicated and motivated ECD staff.

The next step of the project will be the application of the workflow boards across 28 service offices in four KZN districts over the next 12 months. An important outcome of the scale-up of this intervention will be for NAG and Ilifa to work with DSD to have a much more accurate understanding of the overall quantity of ECD sites requiring registration and support by the government. Better quantitative information will enable the districts to produce much stronger budget bids for Treasury, thereby bringing much-needed additional resources into ECD, and ultimately improving both access to and quality of ECD service provision for young children in KZN.