Scaling Up ECD Registration & Infrastructure Systems Support

Context and partnership with government: This Project forms part of the FY2015/16 plan for the formal collaboration between the KZN Social Cluster and Ilifa Labantwana to improve access to Early Childhood Development (ECD) services for young children in underserviced communities. The collaboration is via a Memorandum of Agreement (MOA) with DSD, DBE, DOH, DSR, DAC. The Project is directly aligned with the Government's ECD 'Massification' Strategy to ensure that all ECD centres are registered with DSD and to support those centres still in the process of meeting the standards and requirements for registration as partial care facilities. Substantial work has already been undertaken in the Ugu District including: improving DSD Service Office capacity; workflow management; ensuring that all ECD centres are identified and included in the system; and improving access to and management of information.
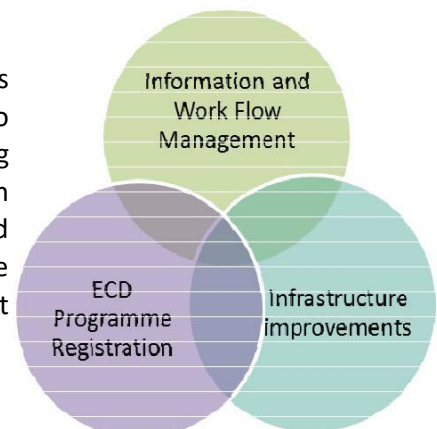

Rationale: Large numbers of children in underserviced communities lack access to acceptable ECD care and services. They also often face a range of health and safety threats. Many ECD centres in these communities are not yet registered and thus fall outside of the current system of registration and related support. The challenges are both in terms of ACCESS (i.e. enabling more children to access centres which are within the system) and QUALITY (i.e. improving programmes, skills of practitioners and infrastructural adequacy).

National priority: Improving access to quality ECD services is recognized as a national priority as reflected by the National Development Plan and other key planning and policy documents. Critical ECD systems that require new ways and thinking are **registration**, **infrastructure** and **financing**.

Project Goal: To optimise the ECD centre registration system at scale in conjunction with transforming the way in which ECD infrastructure support is funded and delivered within five local Municipalities in KZN and to increase access to quality ECD services for vulnerable children.

Geographic Focus: Five local municipalities are targeted: two Municipalities within Ugu District Municipality - Umzumbe and Vulamehlo; two Municipalities within Umzinyathi District Municipality - Umvoti (including Greytown) and Msinga; one small pilot site (informal settlement) within eThekwini (noting the need to test the approach within urban and metropolitan localities where the majority of children in SA live). NAG will be scaling up registration systems support to DSD service offices throughout Ugu, Umzinyathi, Zululand and Umkanyakude in addition to this Project.

Project Objectives:

Upscale the registration systems support to Service Offices currently being undertaken by NAG (Network Action Group) within Ugu DM and introduce this into new areas. This includes: a) improved systems and strengthened capacity within the KZN DSD at Service Office and District Office levels including improved workflow management; b) increased access to the system by less formal ECD centres.

Survey and map ECD centres within targeted areas in order to better understand the status quo, opportunities, and challenges and to thereby enable improved ECD planning.

Plan for and provide key infrastructural investments/improvements at selected ECD sites (e.g. improved sanitation, water supply, fencing, building improvements, new buildings). The intention is to assist up to 86 ECD centres across the different localities (approximately 70 centres receiving infrastructure improvements and approximately 16 new-builds).

ECD categorisation framework: To enable a more systematic and programmatic response, ECD centres will be assessed and categorised based on a range of factors such as their institutional capacity, quality of ECD programmes, registration status, infrastructure (building and services), health and safety standards etc. This will establish a base-line and enable response planning. This is not a framework for centre registration though centre registration is an important categorisation factor. Eventual registration (with appropriate flexibility) is also an important outcome. The following main categories are suggested:

Well-functioning: Either with full registration or have conditional registration as partial care facility or have very good potential to achieve such registration rapidly. Good capacity, programmes, health and safety. Suitable for investment and support. May rep-resent an opportunity for expansion. A relatively small proportion of informal ECD centres in low income communities are expected to fall into this category.

Basic/low-functioning with potential: Providing acceptable ECD services or having the potential to provide them. Either with conditional registration or the potential for achieving conditional registration. Certain pre-conditions however first need to be met. Sup-port and investment are appropriate (e.g. for facilities/ infrastructure, programmes, training, nutrition etc.). May represent an opportunity for expansion. A significant proportion of in-formal ECD centres are expected to fall into this category.

Low-functioning with limited or no potential: Little or no prospects for rendering acceptable ECD services. Often with significant health and safety threats. Some may be dysfunctional and high risk. In cases where other alternatives exist, such centres may need to be closed. Where there are no other alternatives for children, some basic level of short-term intervention and investment may be required, especially to mitigate imminent health and safety threats. A significant proportion of informal ECD centres are expected to fall into this category.

Project funding secured: Funding for the Project has been made available through Ilifa Labantwana for Project Preparation Trust of KZN (PPT) and the Network Action Group (NAG).

Infrastructure funding required: Government funding will need to be secured during the course of the project for infrastructure improvements, extensions and possible new builds at the selected sites. It is hoped that Municipal infrastructure funding (e.g. MIG) will be accessed for the infrastructure improvements (approximately 70 in number) and that DSD, NDA, Lotto or CSI funding will be accessed for the 16 new-builds (approximately 16 in number). A key part of the new ECD response model is to test and develop a robust funding model for further rollout. Whilst the Project has a small sum of infrastructure funding, it is only sufficient for limited improvements at a few pilot sites and is intended only as bridging funding.

Collaboration: The Project is a collaboration between Ilifa Labantwana and two well-established NGOs: Project Preparation Trust of KZN (PPT) which has expertise in infrastructure, housing, survey, and municipal planning; and the Network Action Group (NAG) which has expertise in working closely with the KZN DSD at District and Service Office level in improving systems, capacity and workflow management for ECD centre registration.

Provincial MOU: The Project forms part of a formal MOA between Provincial Government in KZN and Ilifa Labantwana which was signed in March 2013 and which focuses on the following four District Municipalities: Ugu, Umzinyathi, Zululand and Umkhanyakhude. The Project is included in the provincial plan for FY2015/16.

KZN DSD role: The KZN DSD is a key role-player. The Project already has close working relationships with the Provincial DSD as well as with District and Service Offices. DSD is ultimately responsible for registering and monitoring all ECD centres in the province and providing per-child subsidies. District and Service Offices have an important role to play and the Project will be undertaken in close collaboration with these offices and their personnel in order to strengthen internal capacity and systems within DSD.

Municipal role: Municipal Environmental Health Departments (EHDs) have a key responsibility for assessing ECD centres from a compliance perspective and working closely with the District/ Service Offices of the DSD in respect of centre approvals/ registrations. EHD officials may assist with the field survey, given their important role. EHDs will assess sites using their standard checklists, make recommendations for infrastructure improvements, make input into ECD infrastructure improvement plans, and issue health certificates where applicable for DSD centre registration. Municipalities may also make MIG or ICDG funding available for ECD infrastructural improvements

Key Project Activities:

◊ *Survey*: All ECD sites are surveyed (locality, number and ages of children, registration and institutional status, infrastructure, ECD programme, nutrition etc.).

◊ *Jamborees*: to get sites into DSD registration process including initiation of workflow management support to DSD service offices by NAG.

◊ *Sites assessments*: by DSD/Environmental Health and recommended for conditional registration with conditions (including in respect of infrastructural improvements).

◊ *ECD centre categorisation*: in terms of potential, needs and level of response which is appropriate (infrastructure, programme support, training, nutrition etc.).

◊ *Partial care application and DSD decision on conditional registration.*

◊ *Infrastructure plans developed*: for approximately 70 infrastructure improvements and 16 new-builds/green-fields.

◊ *Infrastructure funding approved:* from sources such as DSD, MIG, DHS, Lotto, private sector, municipalities.

◊ *Delivery/construction*: for improvements (x70) and new builds (x16) including support for procurement and construction management.