

“Don’t Stand Still” – Developing & Improving a Short Breaks Fostering Service.

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2026 Southern Health and Social Care Trust



**Southern Health
and Social Care Trust**

TOGETHER, IMPROVING CARE, TRANSFORMING LIVES



Short Breaks Team
Children's Disability Service



Northern Ireland
**Adoption &
Foster Care**
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Who are we?

The Short Breaks Team is a specialist service that delivers real, positive change in the lives of children with disabilities and their families. This is a service that is leading the region and international reforms for children with disabilities. The team focuses on quality above all else and is a key component of the early intervention/prevention model adopted by the wider service & championed within The Independent Review of Children's Social Care Services (2023) led by Ray Jones.



Why are we here & where did we come from?

- Developed from an existing shared care service in 2 localities with 2 part-time staff members effectively serving individual social work community teams for children with a disability.
- This followed a regional review of short breaks (TYC 2012)
- Acknowledgement that there needs to be a variety of short break options for families – one size does not fit all.
- Growing complexity of service users and their carers circumstances.
- Residential options will not be able to meet all of the unmet need.
- Children with a disability need a service that understands and is responsive to their needs.
- BBC Spotlight Programme “I am not ok.”

First Steps

- Cultural change needed to embed the idea of a “one team – one service” approach.
- Accessing additional resources and staffing – what not to do!
- Change systems and pathways to access service and determine criteria to maximise effective use of available resources.
- Value the carers and ask them for their ideas.



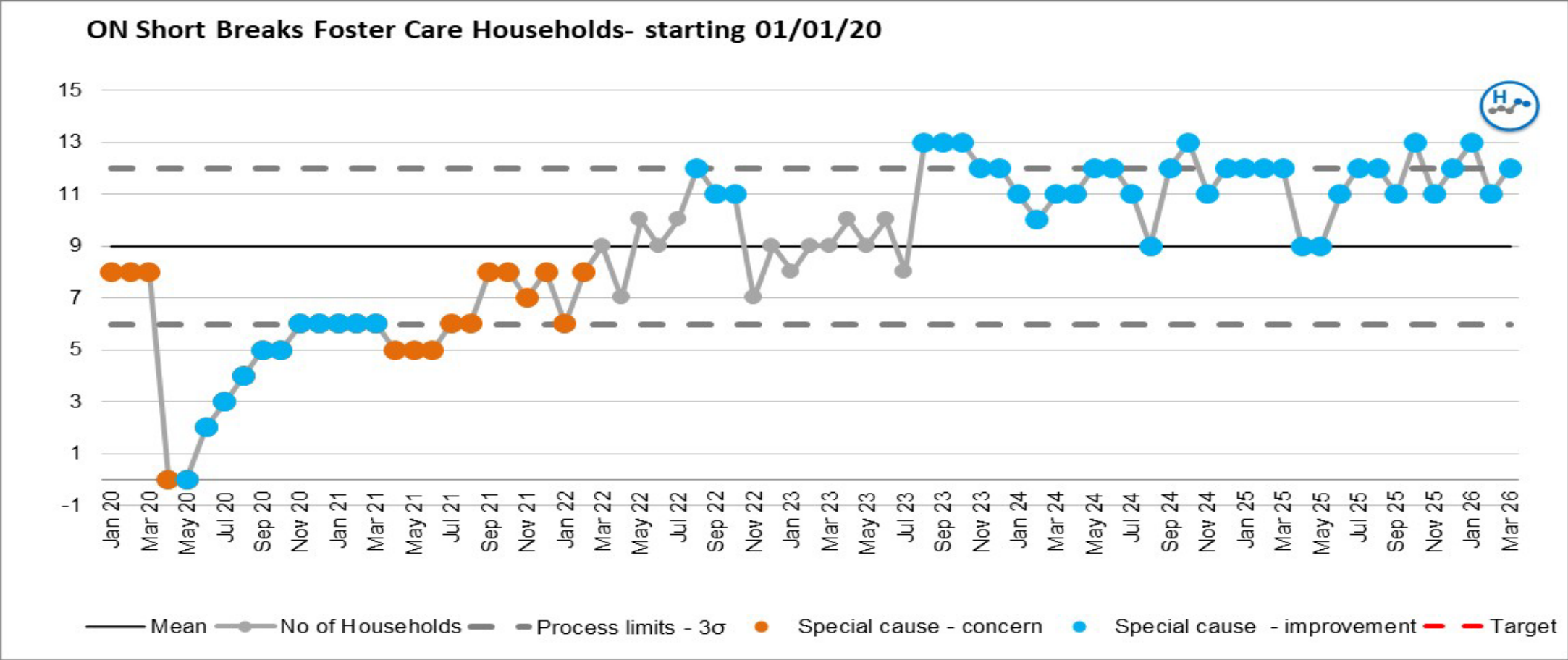
What happened next?

- Used service development days as a way to shape service and look at the needs of service users & parents/carers within existing teams.
- Plans developed to extend service to third locality.
- Additional resources secured from HSCB (SPPG) including staffing which facilitated tentative steps into locality 3.
- Vision & logos for service developed and shared.
- Obtained office space suitable for an entire team in a centralised location.
- Staff member sent on Research Methods Course & outcomes used.
- Move to Corporate Parenting from Specialist Child Health and Disability

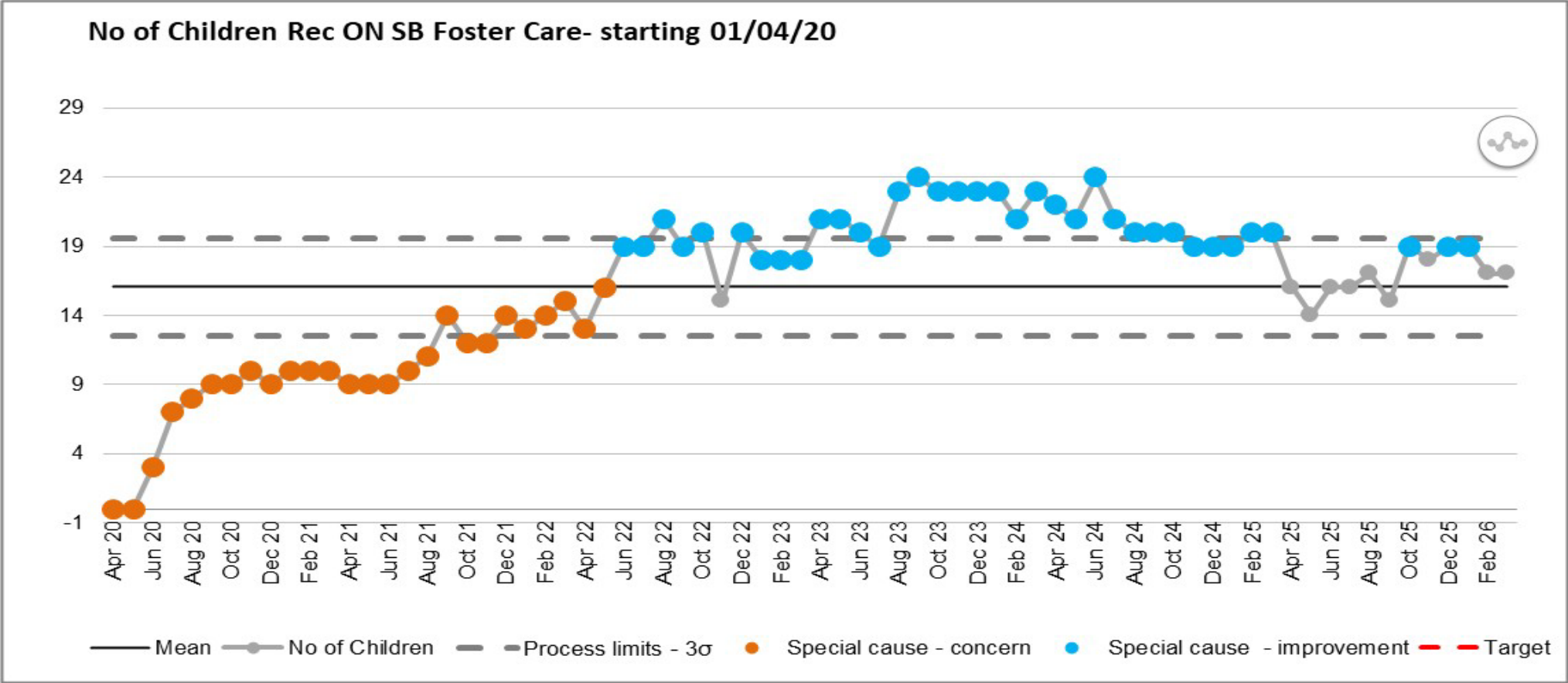
And we started measuring stuff...

- Monthly data gathering was collated in Statistical Process Control (SPC) charts.
- This monitored the process stability and tracked variation.
- We counted the number of foster care households (carers), how many overnights they provided, the number of children accommodated, demand for the service and unmet need.
- This allowed us to identify and separate out normal, everyday process variations from real problems and issues.
- Showed that it took 18 months to return to pre-pandemic levels of service provision following Covid.
- Can measure if quality improvements actually work.

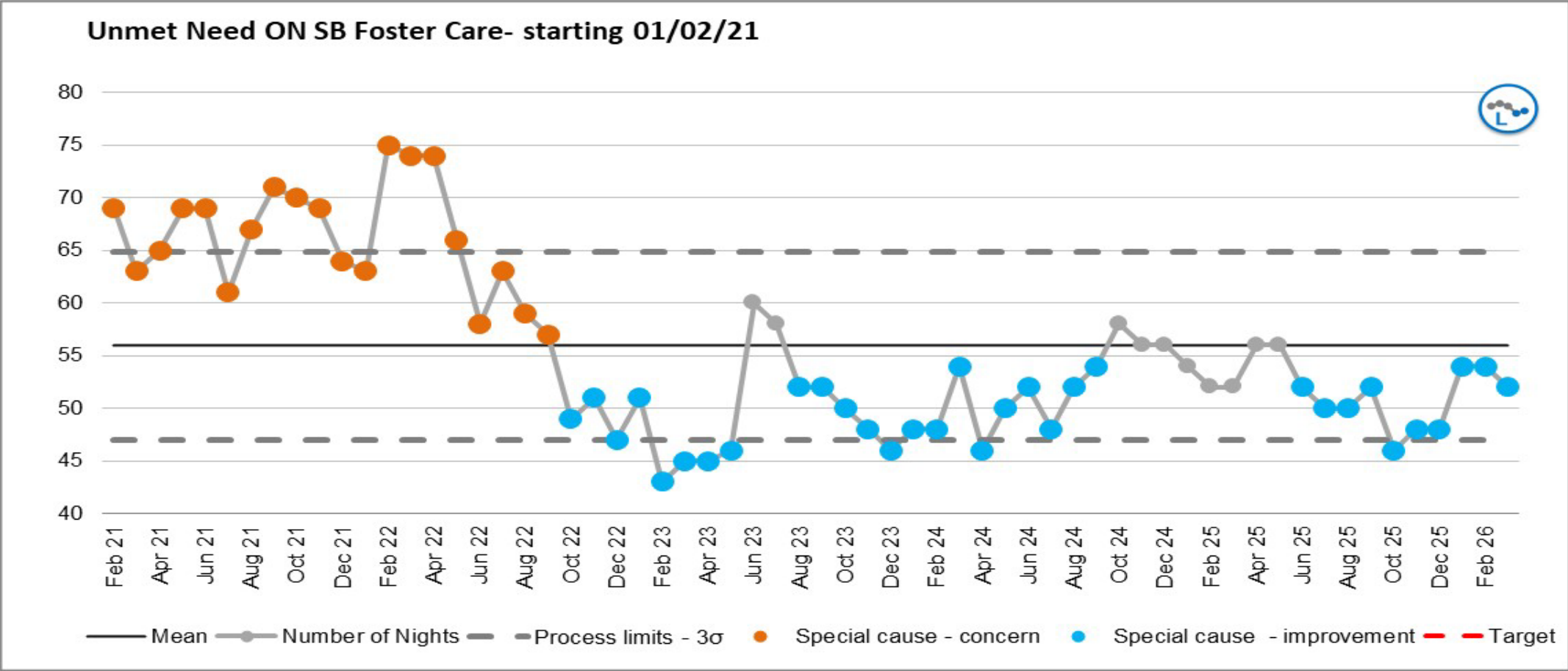
Number of Short Break Carers – period of improvement.



Number of children in service – improvement moving to normal Variation



Unmet need - improving.



But are we counting the wrong thing?

- Regional data requests are heavily focused on the number of children getting a service and the number of overnights provided.
- No qualitative data requested to measure the quality of the service. *No consistent data on the assessment process timescales.*
- Waiting lists numbers are not routinely collected nor the length of time individual children have been waiting.
- Greater focus on quality and evidenced based practice in addition to identifying emerging needs required.

Don't Stand Still....

- Always better to practice what you preach and provide quantifiable research and evidence that can be measured & replicated by others.
- Embarked on MSc Business Improvement Course September 2025.
- Course looked at;
 - - Operational Management including capacity, efficiency & bottlenecks.
 - - Leadership and change.
 - - Implementing theory of swift even flow by managing quality and removing waste – value stream mapping.

We want quality but what is it?

- Total quality is a much broader concept that encompasses not just the results aspect but also the quality of people and the quality of processes” (Goetsch & Davis 2016 p. 2).
- Deming, Juran, Crosby & Isikawa are key figures within the field of Quality Management (QM) & Total Quality Management (TQM)
- For QM to be effective all processes must work properly together, thus applying to all parts of the organisation.
- Total Quality (TQ) is an approach that continually improves the quality of its products, services, people, processes & environments.

We also need to be lean....

- The Lean concept is built upon the Just-in-Time production system (TPS) outlined by Liker and Franz (2011) developed within the Toyota Corporation by Taiichi Ohno who was a quality pioneer in Japan. The fundamental idea is that a better product or service is delivered with less resources being utilised.
- The system has to be flexible enough to “get the right things, to the right place, at the right time, in the right amounts.” (Goetsch and Davis 2016)

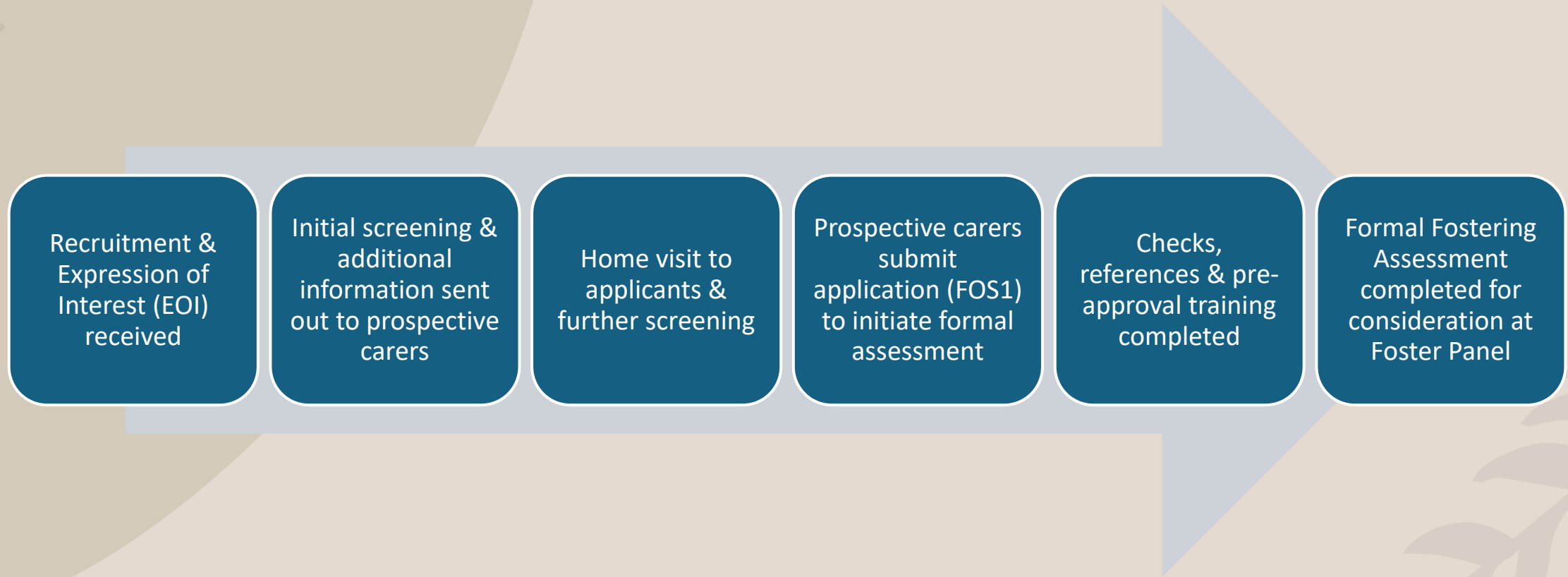
Deadly Diseases (Goetsch & Davis 2016)

- Lack of consistency of purpose – stick to a long-range plan.
- Emphasis on short-term profits – Long range vision, not quarterly SPC charts.
- Evaluation by performance – promote teamwork not individual contribution.
- Mobility of management – managers need to stay in jobs long enough to learn them & offer stability over a longer period. Total quality is a long-term project.
- Running a company on visible figures alone – most important ones are not known like service user/carer/parent satisfaction or a team who are highly motivated providing a specialist service.

The Fostering Approval Process

- Intensive and comprehensive assessment process that takes time.
- Outcome is to approve safe, highly trained and motivated carers.
- Any defects, abnormalities or undesirable traits have to be identified and addressed early in the process – “Jidoka” (Toyota Production System).
- When dealing with human being’s significant variation exists.
- Need to quantify and understand the effects of variation on process.
- Additional process speed and capacity whilst maintaining the highest possible quality (Heijunka) is desirable & essential for service development.
- Clearly defined & sequenced tasks but subject to inputs from various sources.

Short Break Fostering Approval Process

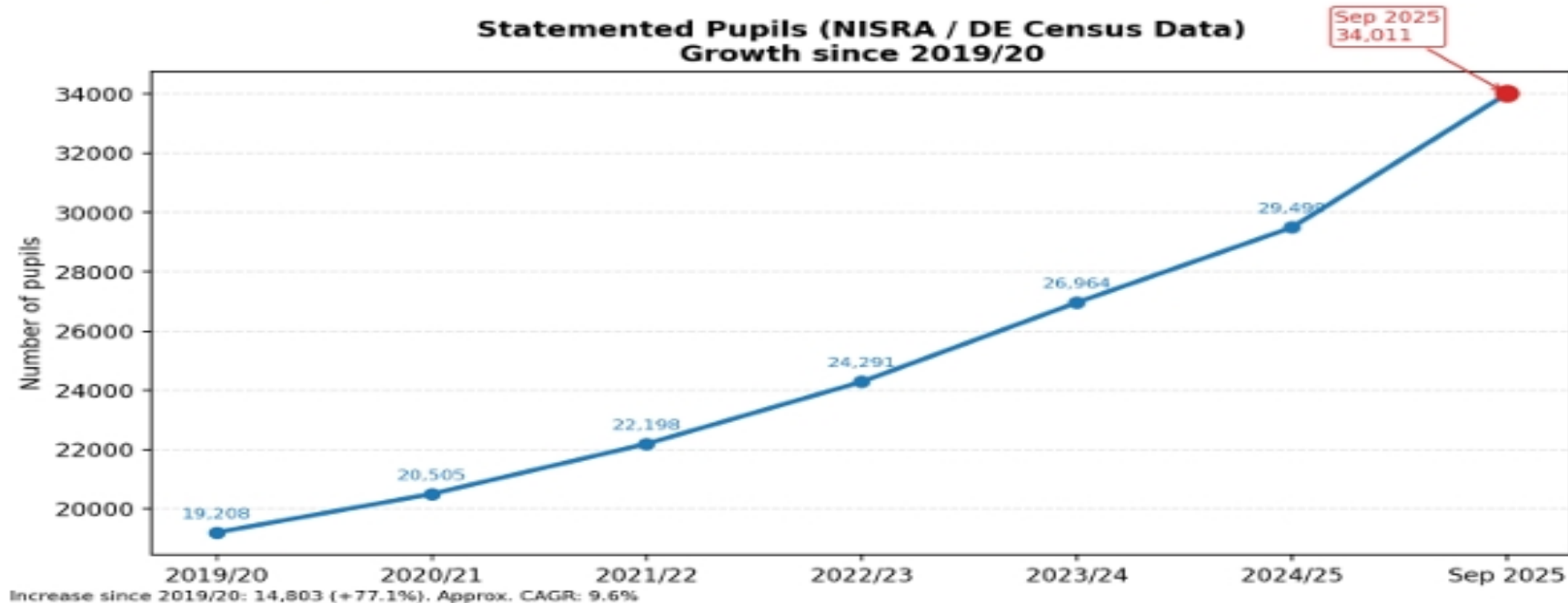


What is quality?

- “the consistent conformance to customers expectations” (Slack and Brandon Jones 2021) – Trust needs to be a “gold standard” service.
- However, just focusing on the idea of quality as a specification is limiting & neglects elements of the system and processes.
- “Total quality is an approach to doing business that attempts to maximise the competitiveness of an organisation through the continual improvement of the quality of its products, services, people, processes and environments.” (Goetsch & Davis 2016)
- This is a more holistic, realistic and systematic definition (interconnected)

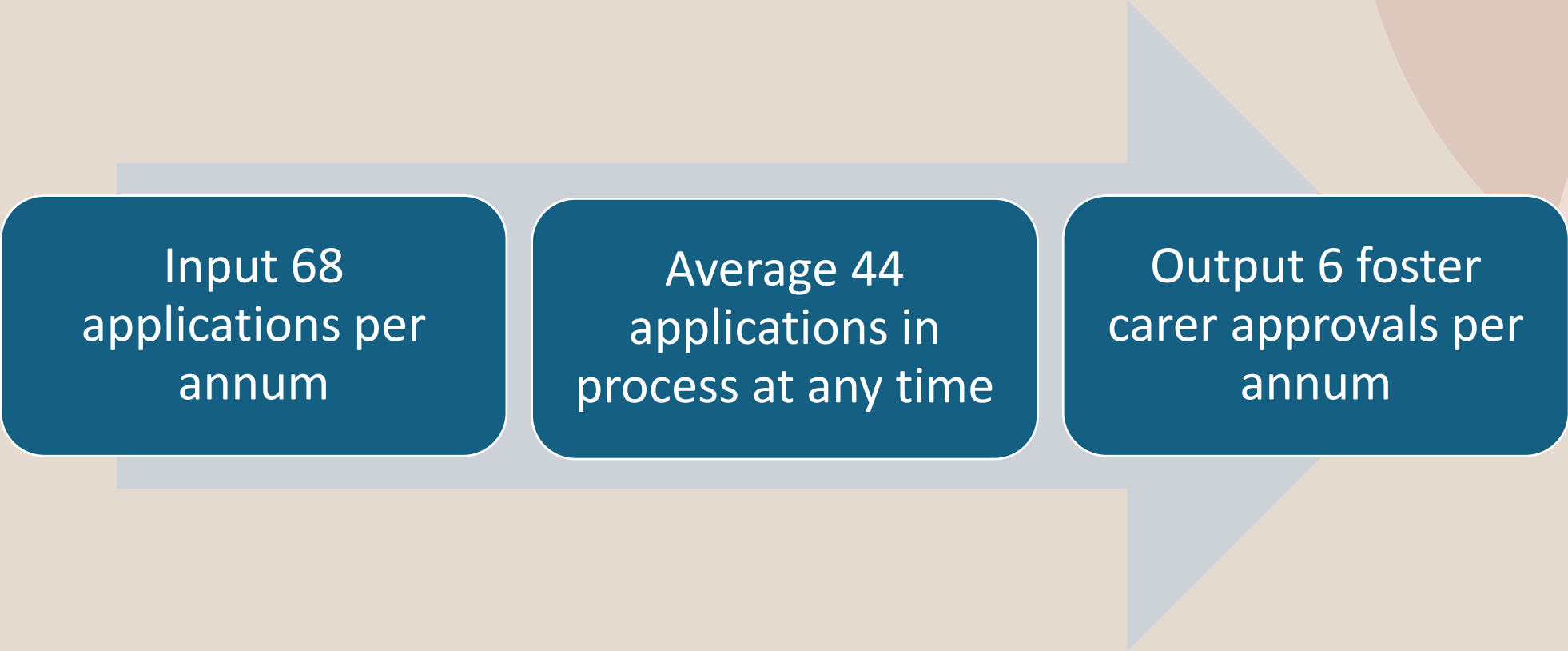
Why do we need to improve?

A system under significant strain



In September 2025, 34,011 pupils had a statement of SEN. An increase of 85% in 10 years. Recent analysis of needs known in statements identified over 1,400 combinations of need — demonstrating complexity far beyond the capability of the existing three-pathway model.

Inputs, Outputs & Average Inventory



Input 68
applications per
annum

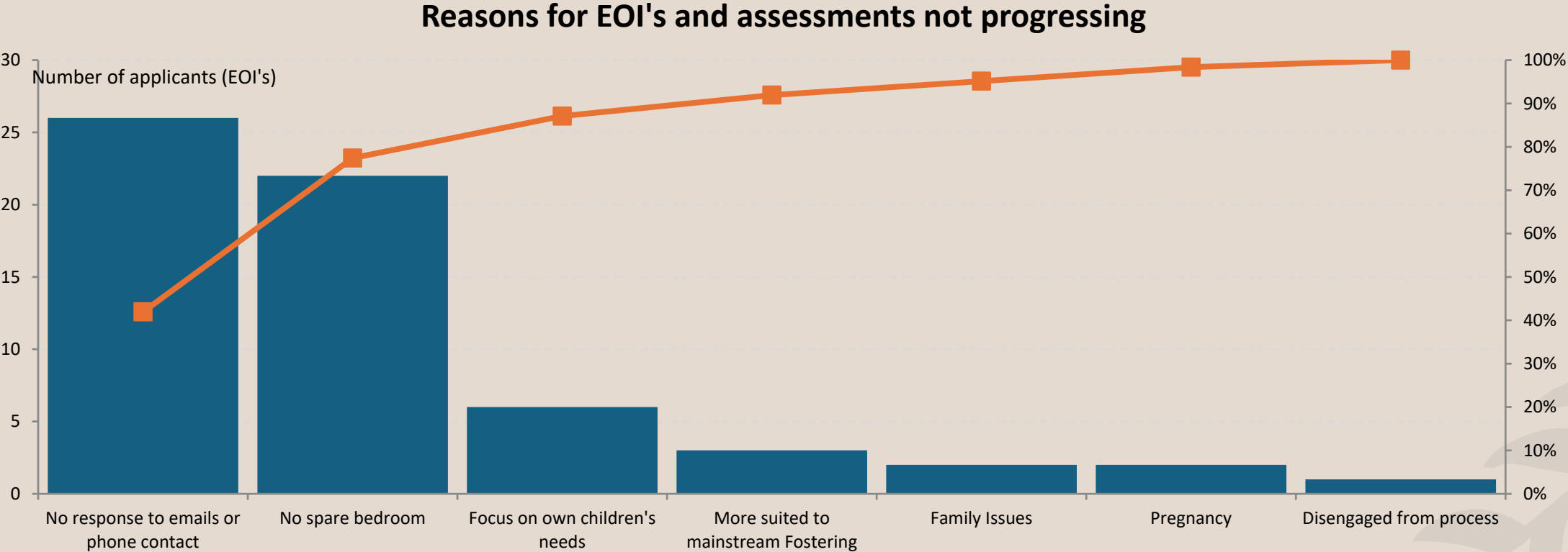
Average 44
applications in
process at any time

Output 6 foster
carer approvals per
annum

What does this mean?

- This represents a conversion efficiency of 9% which compares favourably with the regional average of 6%.
- It does however mean that over 90% of all EOI's do not result in a successful foster carer registration.
- High attrition rates early in the process – shows good triage.
- Need to remove bottlenecks to streamline the process.

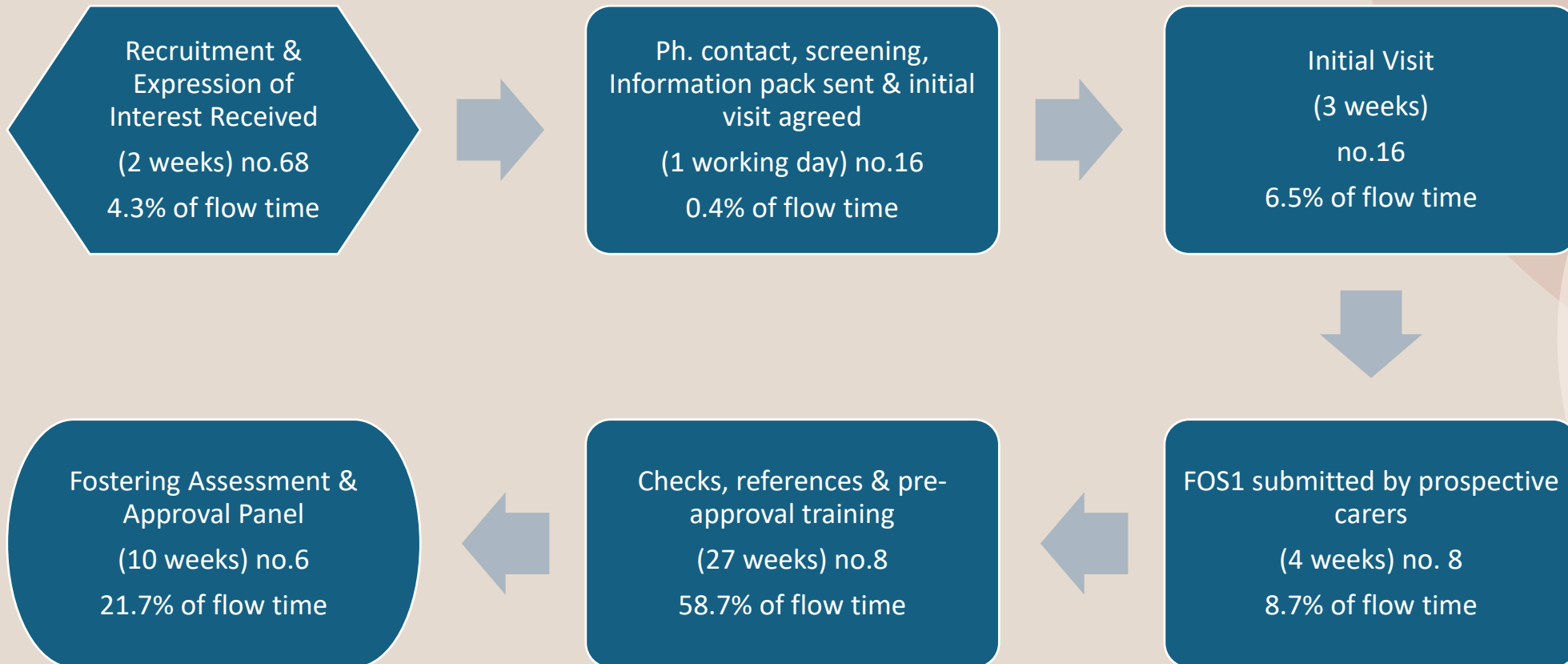
Pareto Chart – non-value added task



Value Stream Mapping

- “A value stream is all of the actions (both value-creating and non-value creating) currently required to bring a product through the main flows essential to every product: (Womack and Jones 2007 p.1)
- This can identify waste in the process at different stages.
- A future state value stream map can be developed using improvement ideas (Kaizen burst) to illustrate how the process can be improved.
- There are clear examples of quality management and control in place, but further improvements are required for operational excellence.

Value Stream Mapping: Recruitment to approval pathway.



What does that mean?

- On average each successful EOI to be approved at foster panel takes 46 weeks (10.5 months).
- This information is not captured regionally and discussion with mainstream Fostering Team colleagues indicates that it can normally take 26 -53 weeks.
- Fostering colleagues only count from EOI (enquiry) being received so 2 weeks added to above figures to standardise.
- No traditional queues/waits within the system.
- Significant variability in process – lots of stopping & starting.
- Most applications screened out after 2 weeks (52)
- A relatively low number of applications make it past 5 week stage (8)

Analysis of Data

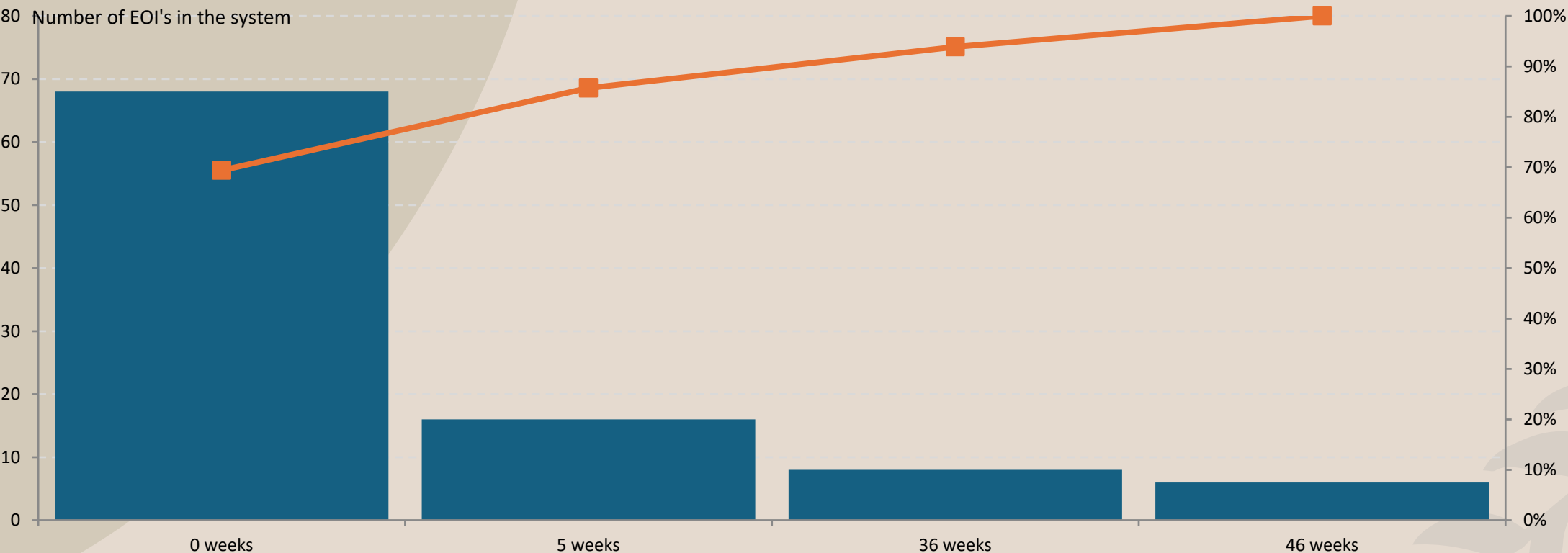
- The Pareto Principle as outlined by Anupindi, Chopra, Deshmukh and Van Mieghem concludes that “roughly 20% of problem types account for 80% of all occurrences” and that abnormal variability is “Unpredictable variability that disturbs the state of statistical equilibrium of the process.” (Anupindi et al 2014 p.1). These findings resonate with the flow time data where a relatively small number of issues/reasons account for a high level of drop out early in the pathway.
- Non-value added tasks as outlined by Schmenner and Swink (1998) absorb resources but don't contribute to the final product/goal which is to have registered carers. The steps early in the fostering assessment process are labour intensive with a high attrition rate but do not add value (overall outputs), apart from quality screening/triage practices that seek to ensure the right people are assessed.
- $I/\textcircled{R} = T$ (time) is equivalent to $44/6 = 7.3$ months.

The Bottleneck.....

- The bottleneck is clearly the assessment and checks element of the process which accounts for 58.7% of total flow time.
- Need to analyse the task components & see if there are ways to further streamline the process.
- Non-value-added buffers occur between each task.
- Reduce timescales for tasks & set agreed standards? (Balance)
- We need spare capacity to flex up when required (buffers).
- Run parallel processes for checks using staff members who may have capacity?
- The answers ultimately have to come from teams whilst maintaining the quality.

How long an EOI is in the system

Average Application Flow Times In Process



Checks, training ref. etc. timescales

Task	Skills to Foster Training	Disability specific training	Access NI checks	Health medical for carers	Health & Safety Check	References
Shortest time to process	1 week	1 week	1 week	2 weeks	1 week	12 weeks
Longest time to process	45 weeks	34 weeks	36 weeks	27 weeks	32 weeks	54 weeks
Average time to process	13 weeks	17 weeks	11 weeks	13 weeks	15 weeks	27 weeks

Analysis of task timescales & waste

- Each task does not have to be sequenced and can run parallel.
- Limiting factor is always the task with the longest average process time (currently references at 27 weeks).
- Ideal is for motivated, organised individuals who respond in a timely way.
- Some areas efficient whilst others clearly inefficient. (e.g. Access NI)
- Initial home visits including recording and processing of FOS1 applications are completed within one working day.
- “Waste” includes issues/problems stopped at point of origin (Jidoka).
- “Mura” waste occurs at bottleneck with uneven flow (resource intensive)

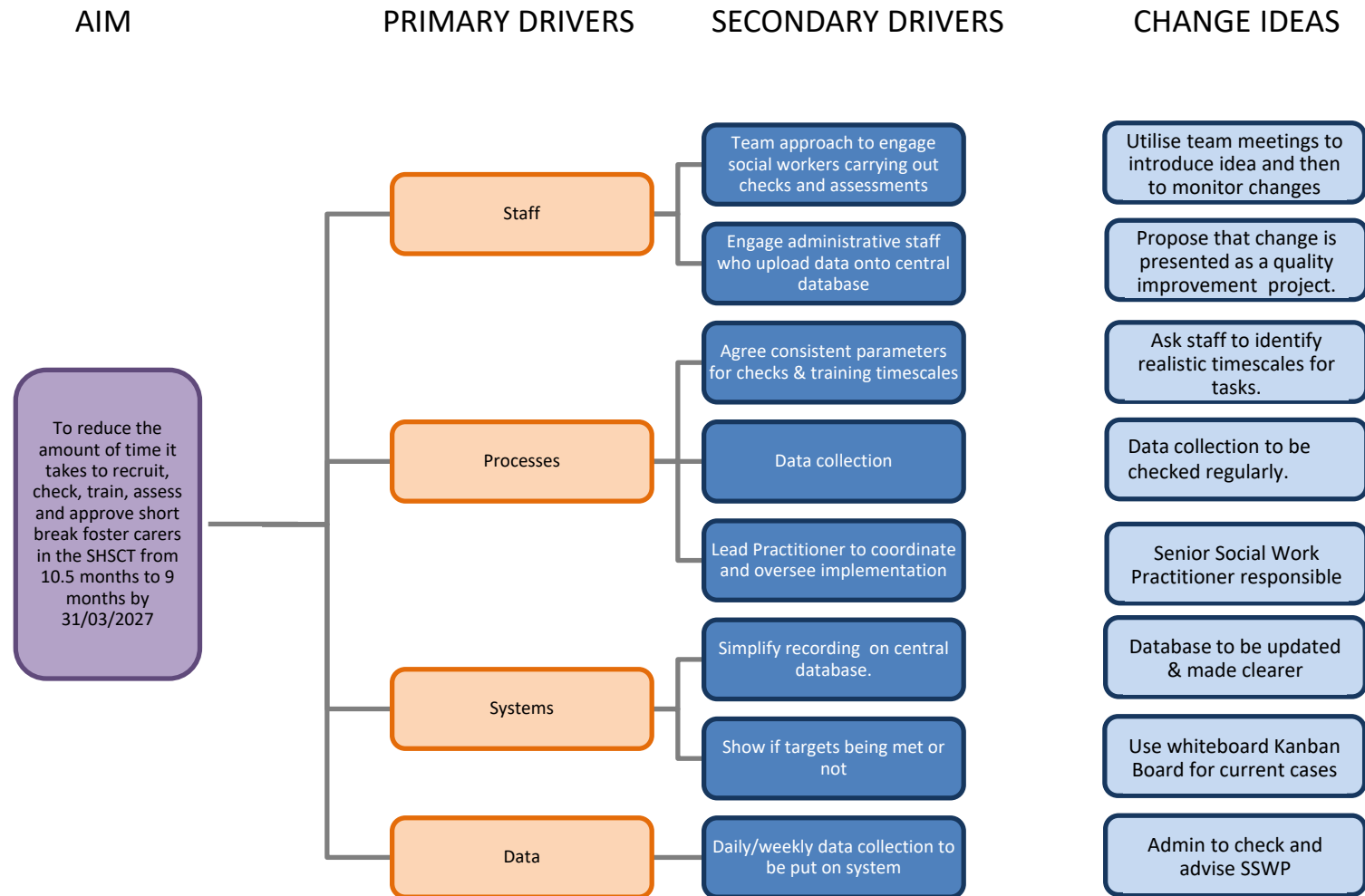
Improvement Priorities - Capacity

- – utilise regional recruitment resource to target digital marketing campaigns to reach specific demographic groups and raise awareness of unique selling points of the service.
- Awareness of service needs raised and embedded at regional level (crowded market).
- – supplement regional recruitment with local Trust events employing a co-production approach using “real” people.
- CAPACITY & RETENTION – review remuneration rates annually, build “buddy system” using experienced short break carers.
- - ensure teams and regional recruitment are properly resourced.
- Target is a 50% increase of applications at EOI stage.

Improvement Priorities – Improve Flow & Streamline Process

- Introduce office-based Kanban boards to visually monitor progress of an EOI as a daily visual follow-up reminder to complement supervision.
- Digitise aspects of enquiries and assessment tasks to supplement manual ones providing different options to applicants depending on their preferences. Analogue and digital solutions are not mutually exclusive.
- Introduce direct link digital request processes for references including tracking and automated reminders. Encourage applicants to contact referees before application commences.
- Introduce clear timescales for each task & create standardised polite reminder procedures & templates to follow up on significantly delayed tasks. Consider automated tracking & reminders.
- Target is to reduce average Total Process Time from 46 weeks to 40 weeks.

Driver Diagram for Short Breaks Team Improvement Project



Theoretical Capacity Utilisation for Fostering Assessments assuming each worker can process 2 x fostering assessments at any given time and an average of 10 assessments are ongoing each calendar month (before attrition)

Resource Pool (p)	Effective Capacity of resource pool (assessments per month)	Capacity Utilisation
Social workers (5.0 FTE)	$5.0 \times 2 = 10$	$10/10 = 100\%$

Current & Theoretical Capacity

	Number of assessments in system being progressed	Resource Pool Capacity Utilisation	Natural wastage of 25%	Carers Approved	Total additional resource minus de- registrations
Current Process	8	69%	2	6	1 carer & 51 overnights per annum
Future State Process	12	100%	3	9	4 carers & 204 overnights

What does that mean?

- At the current process flow rate, it would take over 12 years to clear the existing unmet need and demand for the service.
- Implementation of technology, performance metrics & new ways of working will improve quality control and the flow.
- If the proposed improvements were adopted & capacity realised, the current demand for the service could be met in 3 years instead of 12.
- By enhancing and maximising the system we could meet current and future demands by working smarter and not harder (Mallick 2022).

Wee buns then?

- Some of these changes could be implemented relatively quickly following presentation of data at team meetings & agreeing “buy in” by staff.
- Effort v Benefits Matrix.
- Other ideas will take slightly more effort but can build upon existing recruitment practices using evaluation data (evolution).
- Consultation & agreement with staff critical to set achievable parameters around implementing timescales and monitoring/adhering to them.
- Improving & guaranteeing remuneration rates needs regional buy in.
- Digital solutions will take more time, coordination & resources.

Could it work?

- Improvement ideas are achievable if introduced incrementally as they are an evolution of current practice and systems.
- A Plan, Do, Study, Act (PDSA) approach would be helpful to implement.
- Plan – collect and analyse data around the current method/problem.
- Do – Try out & introduce the plan in the real world.
- Study – Evaluate new practice measures to see if they have performed as expected and actually improved things.
- Act – Consolidate and standardise successful elements (Deming cycle) & if not totally successful, formalise learning and start again.
- But.....

Don't throw baby out with bathwater

The goal is to increase the processing speed and flexibility of the process & eliminate waste without compromising on the quality and dependability of the service. We should not therefore “move fast” at all costs and all of the research and literature supports this approach. Replicating the line by ensuring that everyone is proficient at each stage of the process has proved to be the most efficient approach identified rather than specialising tasks. The sandcone needs to be followed in a sequential manner starting at the bottom before you can move upwards.



Conclusion & thoughts.

- Quality management within the fostering assessment process needs to be quantified & areas of improvement identified.
- Although there is a clearly defined process that is underpinned by legislation, guidance & regulations, there is waste & a lack of swift, even flow.
- Improvement ideas should seek to minimise the waste & reduce the entire process throughput time.
- Successful implementation will require consultation, collaboration and sequencing to maximise success and effectiveness.

Why is this important?

- Success or failure will impact on the lives of vulnerable individuals who urgently require the service & their parents/carers who need a break.
- This is not an abstract mathematical construct, but rather looking at a process in a different way to try and make things better for families.
- Improving the flow and reducing unmet need will improve the process and make the service more responsive to those who need it most.
- This will ultimately benefit families who rely on a readily available – but most importantly – a safe and top-quality product that meets their needs and enables them to continue looking after their loved ones.

Questions, ideas, comments?





Thank you

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