| **DATA QUALITY ASSESSMENT METHODOLOGY**  **Purpose:**  The purpose of a DQA is to review five data quality standards (validity, integrity, precision, reliability, and timeliness) to ensure that the data being used for decision making and reporting is high quality and any limitations to the data are clearly known to those using the data.  Step 1: Select indicators to be assessed: DQAs are required every 3 years, at a minimum, on secondary data (data that is not collected directly by USG) that is reported to Washington. It is highly recommended for any indicator used for project management and decision making. Review the Monitoring, Evaluation, and Learning Plan (MEL Plan) to select indicators for DQA  Step 2: Desk Review: First, review the precise definition, data collection method and frequency of collection of the indicators by checking the Performance Indicator Reference Sheet (PIRS). Next, ask the relevant USG contractors/grantees to send a written description of their data collection methodology, and compare how these align with the procedures described in the PIRSs.  Step 3: Field Review: To verify the desk review, meet with the partner and review the process steps they say they have taken. Ask to see the raw data sources (e.g., training sign‐in sheets, expert reviewer checklists, or completed surveys) against submitted data (i.e. checking to see if the number of trainees on the signing sheet matched the number submitted to USG).  Step 4: Documentation: Complete the form below for each indicator reviewed in this manner. Attach these dated reviews and the documentation for these indicators in the project’s files (in case an audit occurs) and upload them to the Development Information System (DIS). A good practice is to photocopy/take a photo of the raw data source, the cover of the report when the information was submitted, the page on which the data are found, and staple this to the page containing the indicator. Once the DQA for each indicator is completed, note this on the master indicator worksheet and pull the requisite information on data limitations into the file.  Step 5: Addressing issues: Work with the partner to improve data collection and reporting based on the concerns identified.  Step 6: Repeat this process every three years, or as needed, for every indicator reported to Washington. Once the final DQAs uploaded to DIS, the system will keep a record of when the next DQA date will be. You can also keep a calendar or checklist of deadlines for new DQAs to ensure they are performed in a timely manner.  **Practical Tips for Assessing Data Quality:**   * Build assessment into normal work processes * Get feedback from users of the data * Compare the data with data from other sources |
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| **DATA QUALITY ASSESSMENT WORKSHEET** | | | | |
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| 1. Name of Data Quality Reviewer: | | | 1. Date of Data Quality Review: | |
| 1. Project Title: | | | 1. Partner or Contractor: | |
| 1. Data Assessment Methodology:   ☐ Desk review ☐ Field review | | | | |
| 1. Indicator Title: | | | | |
| 1. Objective: | | | | |
| 1. Program Area: | | | 1. Program Element: | |
| 1. Indicator   ☐ Standard ☐ Custom (Skip k. & l.) | | | | |
| 1. Indicator number: | | | 1. Status: (archived, retained, edited, or new) | |
| 1. Reported to Washington:   ☐ Yes ☐ No | | | | |
| 1. Specific Data Sources (specify which sources the data is from i.e. HIS system which is fed into by data from the training attendance sheets or survey with beneficiaries): | | | | |
| **Data Quality Standard** | **Definition** | **Comments** | | **Limitations of the Data and Actions to Compensate for or Address the Limitations** |
| **Validity** | Data should clearly and adequately represent the intended result. | | | |
| Is there a direct relationship between the program activity and what is being measured? Please briefly describe the relationship.    *Tip: this should have been discussed between partners and USAID while developing MEL plans. If it is not the case, this is the opportunity to have the conversation.* | Yes ☐ No ☐ | |  |
|  | Do results collected fall within a plausible range?  *Tip: Only applicable to results collected through statistical samples.* | Yes ☐ No ☐ N/A ☐ | |  |
| Is the data disaggregated in accordance with the indicator reference sheet? Briefly explain how the data are disaggregated.  *Tip: Look at data collection form and database.* | Yes ☐ No ☐ | |  |
| **Integrity** | Data collected should have safeguards to minimize the risk of transcription error or data manipulation. | | | |
| Are steps taken to limit transcription error? Please briefly describe those steps. | Yes ☐ No ☐ | |  |
| Are there any proper safeguards in place to prevent unauthorized changes to the data? Please briefly describe those safeguards. | Yes ☐ No ☐ | |  |
|  | Is there independence in key data collection, management, and assessment procedures? (How data is stored, how databases are managed, and how data review is conducted.) Please describe. | Yes ☐ No ☐ | |  |
| Are data reported from the lower levels accurately matching the results reported to the mission? If it does not match, please provide an explanation. | Yes ☐ No ☐ | |  |
| Is there a method (i.e. to flag or catch duplication when it happens) in place for detecting duplicate and missing data? Please briefly describe the method(s). | Yes ☐ No ☐ | |  |
| **Precision** | Data should be sufficiently precise to present a fair picture of performance and enable management decision-making at the appropriate levels. | | | |
| Is data precise enough to accurately reflect the change?  *Tip: Only applicable to data collected through statistical samples* | Yes ☐ No ☐ N/A ☐ | |  |
|  | Has the margin of error been reported along with the data?  *Tip:* *Only applicable to results obtained through statistical samples* | Yes ☐ No ☐ N/A ☐ | |  |
| **Reliability** | Data should reflect stable and consistent data collection processes and analysis methods over time. | | | |
| When the same data collection method is used to measure/observe the same thing multiple times, is the same result produced each time?  *Tip: Only applicable to data collected through statistical samples.* | Yes ☐ No ☐ N/A ☐ | |  |
| Are definitions of indicators being interpreted consistently across location and staff members? Describe the methods used to ensure that. | Yes ☐ No ☐ | |  |
| Are data collection, data review, and analysis methods documented in writing and being used to ensure the same procedures are followed each time? | Yes ☐ No ☐ | |  |
| **Timeliness** | Data should be available at a useful frequency, should be current, and should be timely enough to influence management decision-making. | | | |
| Is data available frequently enough to inform program management decisions? | Yes ☐ No ☐ | |  |
| Is the data reported as soon as possible after collection? How quickly is that? | Yes ☐ No ☐ | |  |

| **IF NO RELEVANT DATA WERE AVAILABLE** | **Issue(s)** | **Comments** |
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| If no recent relevant data are available for this indicator, why not? |  |
| What concrete actions are now being undertaken to collect and report these data as soon as possible? |  |
| When will data be reported? |  |

| **Summary** | **Comments** |
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| Based on the assessment relative to the five standards, what is the overall conclusion regarding the quality of the data? |  |
| Significance of limitations (if any): |  |
| Actions needed to address limitations |  |

| **Reviewed by** | A/COR: | Date: |
| --- | --- | --- |
| M&E Specialist (if applicable): |  |
| **Clearance** | Office Director: | Date: |
| PROG: | Date: |