

# **Data Quality Assessment**

SHOUHARDO III plus Activity



CARE Bangladesh

December 2023

## Table of Contents

<b>Introduction:</b> .....	<b>1</b>
<b>Objective of the DQA:</b> .....	<b>1</b>
<b>Methodology:</b> .....	<b>2</b>
<b>Key Findings:</b> .....	<b>3</b>
<b>Data validation at PNGO office:</b> .....	<b>4</b>
<b>Review of Source Documents:</b> .....	<b>4</b>
<b>Findings Sharing:</b> .....	<b>6</b>
<b>Recommendation:</b> .....	<b>7</b>
<b>Conclusion:</b> .....	<b>7</b>

## **Introduction:**

The SHOUHARDO III Plus activity, funded by the United States Agency for International Development (USAID) is being implemented by CARE since September 2022 aiming to improve gender equitable food security, nutrition, and resilience of vulnerable people in Char and Haor regions in Bangladesh by 2024. To measure the effectiveness of the SHOUHARDO III Plus program, a comprehensive set of 20 indicators has been selected. These indicators encompass both USAID standard indicators and CARE-customized indicators. Notably, out of these indicators, 14 are focused on outcomes and are assessed through the Participants Base Survey (PaBS). The remaining 6 indicators, relating to outputs, are monitored through Routine Monitoring, utilizing the Routine Monitoring Tracking System (RMTS). Additionally, the progress of Annual Work Plan (AWP) activities is meticulously tracked through routine monitoring mechanisms. This robust monitoring and evaluation framework ensures a thorough assessment of the program's performance and facilitates informed decision-making for continuous enhancement of program interventions.

High-quality monitoring data is the keystone for evidence-based decision making and building confidence in our programs. Hence, the Data Quality Assessment (DQA) is a key initiative of SHOUHARDO III plus activity. DQA is conducted semi-annually to uphold data quality and authenticity. Following the submission of the Fiscal Year 2023 Annual Report (AR), the SHOUHARDO III Plus Monitoring and Evaluation (M&E) team undertook an extensive DQA of the reported data collected through routine monitoring efforts.

During this DQA process, the performance monitoring data of the SHOUHARDO III Plus activity is rigorously assessed using a standard DQA checklist. This assessment helps identify the strengths and weaknesses of the reported data and ensures consistency in data collection processes and tools across the project. In essence, the DQA process not only assures the accuracy and reliability of our data but also provides invaluable insights that deepen our understanding of the project's performance. It serves as a vital mechanism for continuous improvement, empowering us to enhance the overall effectiveness of the SHOUHARDO III Plus Activity.

## **Objective of the DQA:**

The primary objective of the SHOUHARDO III Plus Activity's Data Quality Assessment (DQA) is to ensure the validity, reliability, timeliness, precision, and integrity of the data collected and reported within a six-month period. This initiative is designed to offer a unified approach for evaluating and enhancing overall data quality within the SHOUHARDO III Plus area.

The specific objectives of the DQA are outlined as follows:

- Verify the accuracy of reported data by comparing it with source or base documents.
- Assess the availability, completeness, and accuracy of data collected through the Routine Monitoring Tracking System (RMTS).
- Identify any gaps and initiatives for improvement.

## Methodology:

A total of 5 indicators were chosen for the Data Quality Assessment (DQA) process. Four of these indicators were sourced from USAID standard indicators, while one was a custom indicator developed by CARE, covering intermediate result areas 1 and 2. All indicators selected for the DQA were those reported in the FY23 annual result report through the Routine Monitoring Tracking System (RMTS). The DQA process follows five key steps:

1. **Indicator Selection and Notification:** This phase involves choosing the DQA indicators and notifying Partner Organizations (PNGOs).
2. **Desk Review for Data Validation:** During this stage, reporting data is scrutinized against the Performance Indicator Reference Sheet (PIRS).
3. **Field Review for Data Validation:** Verification of reported data against source documents is conducted, and the understanding of indicators by implementing partners is evaluated.
4. **Completion of DQA Checklist and Documentation:** A DQA Checklist is filled out for each indicator, and updates to the indicator's PIRS are made as needed.
5. **Implementation of Mitigation Plan (if necessary):** Collaboration with implementing partners and other stakeholders is initiated to address any encountered data limitations.

During field visits for the purpose of conducting the Data Quality Assessment (DQA), the team followed a systematic approach. Firstly, they conducted a comprehensive desk review at the Implementing partners program offices. Subsequently, they proceeded with data verification at the source level. Finally, the team conducted interviews with randomly selected program participants and Local Service Providers (LSPs).

To assess the achievements of the five selected indicators, a total of 20 villages were randomly chosen from eight districts in the Char and Haor region for source document verification. During the source verification process, the DQA team randomly selected 1-3 participants from each intervention and conducted in-person interviews. Details regarding the targeted sample villages and the actual coverage of the survey are provided in the table below.

**Table 1: Sample and Physically Verified Villages for Data Quality Assessment (DQA) by Indicator**

Indicator	Sample Villages	Visited Villages
Indicator 1: EG.3-2 Number of individuals participating in USG food security programs [IM-level] <b>Selected Activity for this indicator</b> <ul style="list-style-type: none"><li>• Facilitate Male Champions to enhance men and boys' engagement in addressing increasing risk of GBV.</li><li>• Support PCSBA &amp; BSP to provide counselling to individual HHs/group on nutrition sensitive food production and their use.</li><li>• Facilitated SafetyNet support.</li><li>• Training on Strengthen locally led advocacy process with the Union Parishads (UPs) and government departments.</li></ul>	20	20

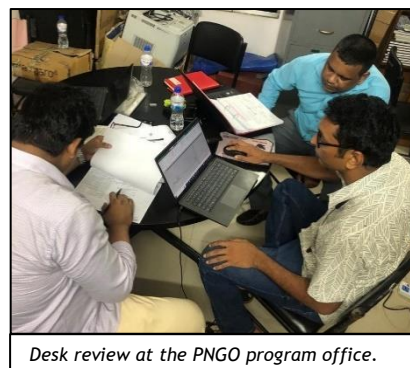
Indicator 2: EG.4.2-7 Number of individuals participating in USG-assisted group-based savings, micro-finance or lending programs [IM-level] <b><u>Selected Activity for this indicator</u></b> <ul style="list-style-type: none"> <li>• VSLA Group and Members</li> <li>• VSLA Savings and Loan information.</li> </ul>	20	20
Indicator 3: HL.9-1 Number of children under five (0-59 months) reached with nutrition-specific interventions through USG-supported programs [IM-level] <b><u>Selected Activity for this indicator</u></b> <ul style="list-style-type: none"> <li>• Children received Vitamin A</li> <li>• Lactating Mother and 0-5 years age Children IYCF Counselling</li> </ul>	20	20
Indicator 4: HL.9-3 Number of pregnant women reached with nutrition-specific interventions through USG-supported programs [IM-level] <b><u>Selected Activity for this indicator</u></b> <ul style="list-style-type: none"> <li>• Pregnant Women counselling.</li> </ul>	20	20
Indicator 5: Custom : Percentage of selected LSPs received service from private companies	20	20
<b>Total</b>	<b>20</b>	<b>20</b>

## Key Findings:

- i) At the PNGOs' program office, both hard and soft data were securely preserved. Sign-in sheets for VSLA and VDC training were available and accessible, and the reported numbers aligned perfectly with the hard documents.
- ii) Timely reporting was observed for all data, consistently aligning with event completion and reporting periods.
- iii) The VSLA registers were well-kept at the village level, with sufficient documentation.
- iv) Source documents for vitamin 'A' were preserved at the PNGO office or at the VDC at the village level and the reported numbers fully matched with the source documents.
- v) During DQA, it was observed that male champions did not consistently follow a uniform approach in maintaining records of male champion sessions. They either kept records in the VDC register or their notebooks. Approximately 4% deviation (underreported) was observed compared to the reported figure across the program.
- vi) A deviation of around 2% (underreported) was noted in safety-net reported data across both regions, which was attributed to mistakes made by the FFs when posting data in STREAM.

## Data validation at PNGO office:

In SHOUHARDO III plus activity, routine monitoring data is being captured directly through System for Tracking Result and Evidence for Adaptive Management (STREAM) from the source by the Field Facilitators (FFs). A few intervention data like training, VSLA member's information, etc. are also being entered by the PNGO's M&EOs through the web application in STREAM. During the desk review at the PNGO's office, reported VSLA and VDC training data were checked sample basis with the hard documents. Noted that, in each upazila 5 VSLA groups and 3 VDC training attendance sheets were verified during the desk review. Through this process, a total of 115 VSLA groups and 69 VDC's training attendance sheets were verified, and 100% information was found accurate. However, preservation of both documents was good, systematic, and well-protected by PNGOs. During the review, it was observed that all data was reported on time i.e. within the period of FY23. All PNGOs followed the same RMTS format that was provided by SHOUHARDO III plus activity.



## Review of Source Documents:

During review of source documents with reported data following observations were recorded:

**Indicator 1: EG.3-2 Number of individuals participating in USG food security programs [IM-level]:** Four activities were verified under the EG.3-2 indicator.

Observation shared below by activities.

**Activity-1: Facilitate Male Champions to enhance men and boys' engagement in addressing increasing risk of GBV:** The attendance of male champion sessions was documented either in the notebook or the VDC register. Typically, field facilitators updated the VDC register after discussing with the male champions during their community visits. Based on the VDC register or notebook, a deviation of approximately 4% (underreported) was observed compared to the reported figures across the activity areas.

**Activity-2: Support to provide Nutrition counseling to individual HHs/groups by Private Community Birth Attendant (PCBA) & Blue Star Provider (BSP):** In the context of community-level counseling documentation, PCBA diligently maintained records in their diary or notebook, while BSP did not engage in any formal record-keeping. In such instances, the respective Field Facilitators (FFs) maintaining counseling records for BSPs in the VDC register. This was done through consultations with the BSPs. However, it was identified that approximately 3% of the reported data did not align with the source documents.

**Activity-3: Facilitated Safety-Net support:** The VDC register was available in all sample VDCs. According to the VDC register, a deviation of approximately 2% (under reported) was observed in reported data.

**Activity-4: Training on Strengthen locally led advocacy process with the Union Parishads (UPs) and government departments:** During source validation, trained VDC members were cross-checked with the VDC register and consulted with them. The assessment reveals that 100% trained VDC members were reported correctly.

**Indicator 2: EG.4.2-7 Number of individuals participating in USG-assisted group-based savings, micro-finance or lending programs [IM-level]:** The savings information of 20 selected VSLA groups and their participants were verified against the source data in the respective villages. The observations from this process are shared below, categorized by activities.

**Activity-1: VSLA Group and Members:** In 20 sample villages, 20 VSLA group participants were examined. An approximate deviation of 3% (underreported) was observed between the VLSA register and the RMTS. This deviation arose from a failure to update members' profiles in the RMTS/STREAM after reforming the VSLA or making changes to its members.

**Activity-2: VSLA Savings and Loan information:** The reported number of VSLA members, as per the VSLA register, was verified to be accurate.

**Indicator 3: HL.9-I Number of children under five (0-59 months) reached with nutrition-specific interventions through USG-supported programs [IM-level]:** Two activities were carried out under the HL.9-I indicator. Observations for each activity are provided below. To capture this information, the project supplied the Formative Register on Vitamin-A, IYCF, and PW counseling. This register is maintained by PCSBA, BSP, and VDC.

**Activity-1: Children receive Vitamin A:** In SHOUHARDO III Plus, VDCs and PCSBAs have been raising awareness among mothers with children under five to ensure the intake of vitamin-A during the campaign organized by the Government of Bangladesh (GoB). Following the vitamin-A campaign, respective VDCs have been maintaining documents of children who received Vitamin-A in their respective areas. During the Data Quality Assessment (DQA), the source documents of Vitamin-A recipients were found in VDCs, and the reported information 100% matched with the source data.

**Activity-2: Lactating Mother and 0-5 years age Children IYCF Counselling:** During the physical verification, it was found in both regions that the PCBAs maintained records for lactating mothers' counseling which was in line with the reported number. In the case of Blue Star Providers, no such systematic evidence was found but they kept records in notebooks/khata. According to source documents, a very minor (0.4%) deviation was observed in sample villages. During the interview with the sample participants, 100% were confirmed to receive nutrition counseling from PCBA/BSP.



**Indicator 4: HL.9-3 Number of pregnant women reached with nutrition-specific interventions through USG-supported programs [IM-level]:** PCBA/BSP maintain record-keeping in their individual diaries or notebooks. A deviation of nearly 3% was observed, according to available source documents. This discrepancy occurred because new mothers were added to their records but not updated in the system.

**Indicator 6: Custom: Percentage of selected LSPs received service from private companies:** Out of the 20 sample villages, only three LSPs (seed agents) from the Char region reported receiving private sector assistance in FY23. During the Data Quality Assessment (DQA), interviews were conducted with three LSPs, each of whom confirmed receiving technical assistance from the private company Laltir/Mallik Seeds in the past year.

In summary, the assessment reveals that 100% of the reported data matches the findings from the desk review conducted at the partners' program office. However, minor discrepancies were noted during the field-level Data Quality Assessment (DQA) when comparing the data with source documents. These inconsistencies were attributed to insufficient documentation by LSPs, inaccuracies in participant UIDs, and data entry mistakes by FFs. Among these factors, data entry errors were identified as the primary cause of discrepancies between the reported data and source documents.

## Findings Sharing:

After completing data quality assessment, the DQA team shared their immediate



*Sharing DQA Observations with Field Level Staff.*

observations from desk and field review to the respective PNGO's management personnel to take necessary steps to maintain the data quality throughout the project period. The team members completed the DQA checklist, compile, analysis and documented those for further references. The key findings from DQA also shared to the management personnels of SHOUHARDO III Plus Activity, and prepared mitigating plan sitting with PNGOs to address data limitations.



## **Recommendation:**

- Inspire Field Facilitators (FFs) to promptly transfer data from hard documents to STREAM upon event completion, thereby alleviating their workload and minimizing data entry errors.
- Encourage Program Officers (PO) and Monitoring & Evaluation Officers (M&EO) to conduct random verifications of STREAM data, pinpointing location-based gaps and providing necessary support.
- Facilitate capacity-building initiatives for Village Development Committees (VDCs) and Local Service Providers (LSPs) to independently document their activities, including VDC meetings and counseling sessions. FFs should facilitate this process rather than directly managing documentation.
- Actively engage Monitoring & Evaluation Officers (M&EO) in Upazilla level staff meetings, where they can share DQA observations with field staff to foster continuous improvement.

## **Conclusion:**

In SHOUHARDO III Plus, ensuring data quality is top for authentic reporting and adaptive management. Therefore, maintaining high-quality data throughout the reporting process is strongly emphasized. The findings from the Data Quality Assessment (DQA), obtained through desk reviews and source verifications, indicate a high level of authenticity in the reported data. While most indicators' data met the required standards, minor deviations were observed in three out of the five selected indicators' reported data.

The DQA observations suggest that entry mistakes play a significant role in the noted deviations. It's important to acknowledge that these errors can be mitigated through increased monitoring by senior staff. To establish effective performance management systems, it's crucial for all involved to prioritize and ensure the accuracy of data for quality reporting purposes.