Data Quality
Review (DQR)
Desk Review
Tools and
Methods
Workshop

Session 8: Using Results

Analysis, interpretation and dissemination of DQR Results













Learning Objective

SESSION 8

Using Results: Analysis, interpretation and dissemination of DQR results

Learning Objective is to help workshop participants understand how to use the results of the DQR Desk Review to improve data quality. Specifically, the workshop participants will understand:

- Interpretation of analysis findings
- Drawing conclusions from results
- Importance of disseminating the DQR results and how to plan for it.
- Developing action plans to address data quality issues



Instructions

Analysis and Interpretation of Data

Who:

• Each data quality dimension should be analyzed and interpreted by data and program managers familiar with the health programs and indicators

What:

- Final report describing findings, and including recommended actions for remediation
- Data quality improvement plan

Using Results: Analysis, interpretation and When:

Using Results: Analysis, interpretation and dissemination of DQR results

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• It can take a few weeks to write up the results effectively. Make sure you have conducted the analysis far enough in advance of annual planning that the results can be used, and the data quality known, during planning.

Analyze the data

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- Record your interpretation of the result in the space provided (Excel Tool)
- Providing good detail will enable the ready completion of the data quality improvement plan.

Indicator 2c: Internal Consistency - Consistency Between Related Indicators

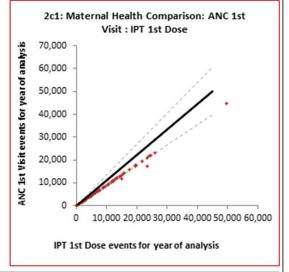
Consistency between related indicators - Ratio of two related indicators and Districts with ratios significantly different from the national ratio *

2c1: Maternal Health Comparison: ANC 1st Visit: IPT 1st Dose

Year	2014
Expected relationship	equal
Quality Threshold	20%
National Score (%)	112%
Number of districts with divergent scores	2
Percent of districts with divergent scores	2.5%

Names of districts with divergent scores:

District 13, District 27



Interpretation of results - Indicator 2c1:

- · Data seem pretty good, no districts have ratio of ANC: IPT greater than national ratio
- · IPT seens consistently lower than ANCI more preanant women should be receiving IPT
- Stock outs of fansidar in Regions 2 and 6 could explain low number of IPT in Districts 13 and
 27. Call DHIO in these districts to investigate



Address and correct data quality problems if possible

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Immediate Follow-up on Data Quality Issues

Missing or Extreme Values

- Call subnational units, e.g., district HMIS offices, to see if they can provide data or explain outliers
- Verify values in HMIS or program databases

Aggregation

• Cross check paper report forms (if applicable) to ensure values have been aggregated appropriately

Variations in Service Delivery

 Contact program and data managers to help explain the unexpected variations

Timeliness

- Verify by referring back to paper forms for a date stamp
- Check other computerized logs if available



Plan interventions to address data quality issues

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For identified data quality issues, map out interventions in the data quality improvement plan.

Data quality issues

Prioritized system strengthening measures

Responsible organization and cadre of staff

Implementation timeline

Required resources to realize completion of the identified measures

Data quality improvement plan

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DQ Finding	Evidence of Finding (interpretation)	Remedial Measures	Scope	Timeline	Responsible	Resources	
Data Maintenance and Confidentiality:							
Source documents not available for data verification	Significant proportion of service delivery could not be verified due to unavailability of source documents — poor record keeping/ archiving of reported results	Districts should work with affected health facilities to develop sound storage areas (closet/cabinet with locking mechanism in a cool, dry place) — shelves should be built using locally available materials	Identified health facilities in Region 2 (Districts 4 & 6) and Region 9 (Districts 27 & 34)	2015, then re-evaluate	District Health Management Teams; Facility In-charge; Regional Health Authority (facilities management unit)	2015 Facilities Manage- ment Budget; Global Fund Round 9 HSS grant	



Dissemination

Dissemination of DQR Results

Report includes

- Interpretation by program managers
- Recommendations for system strengthening

Timing

 Disseminated several weeks prior to health sector planning initiatives

Recipients

- All staff participating in planning event
- Other stakeholders, e.g., line ministries, donors, TA organizations, NGOs, private sector stakeholders, etc.

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Exercise

Exercise – Create a Data Quality Improvement Plan

- Use the Annual Report and other analyses/results to analyze your results and identify interventions to address data quality issues.
- Use the template provided to link data quality issues with interventions and scope out timelines, responsibles, funding sources, etc.

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