Performance Data Collection and Validation Procedure

Purpose

Phoenix Project shall maintain an adequate method for collecting, verifying, and reporting performance measurement data for all grant-funded activities. This procedure establishes consistent data collection practices, internal validation processes, and safeguards to ensure the integrity, accuracy, and reliability of performance data reported to the Virginia Department of Criminal Justice Services (DCJS).

Staff Training and Data Entry Standards

1. Staff responsible for collecting and entering client and service data shall complete required training on VAdata or other approved case management systems.
2. Initial training shall include:
    - Data collection requirements established by DCJS and applicable funding sources.
    - Third-party training provided by recognized experts, including the Virginia Sexual and Domestic Violence Action Alliance, on proper data entry procedures and reporting requirements.
    - Internal Phoenix Project training on agency-specific data entry procedures, documentation standards, confidentiality requirements, and quality assurance expectations.
3. Refresher training shall be provided as needed when reporting requirements change or when data validation activities identify recurring errors or inconsistencies.

Performance Data Collection

1. Performance measurement data shall be entered into VAdata or other approved data management systems using source documentation maintained in client files.
2. Source documentation may include:
    - Client intake forms
    - Case notes
    - Service logs
    - Hotline logs
    - Advocacy records

- Group participation records
- Other documentation supporting reported grant-funded activities

3. Staff shall enter data in accordance with established agency procedures and funding source requirements to ensure consistency in reporting.

Internal Validation and Quality Assurance

Phoenix Project shall conduct internal validation of performance data prior to submission of reports to DCJS.

At a minimum, the Executive Director or designee shall complete the following validation activities quarterly:

A. Intake Verification Review

1. Staff shall provide the Executive Director with a redacted copy of at least one newly completed client intake packet.
2. The Executive Director shall compare the source documentation contained in the intake packet with the corresponding client record entered into VAdata.
3. The review shall verify:
   - Accuracy of demographic information.
   - Accuracy of service classifications.
   - Accuracy of victimization and program eligibility data.
   - Completeness of required data fields.
   - Compliance with agency data entry procedures.
4. Any discrepancies identified shall be documented and communicated to the responsible staff member for correction.

B. Random Case File Validation

1. The Executive Director shall randomly select client files for review.
2. Information contained in the selected file shall be cross-referenced with corresponding records in VAdata.
3. The review shall verify that services documented in the client file align with services recorded in the reporting system and that data has been entered accurately and completely.

4. Any discrepancies shall be documented and corrected promptly.

Report Reconciliation Prior to Submission

1. Prior to submission of quarterly or other required performance reports to DCJS, the Executive Director shall review the report for completeness and accuracy.
2. Reported performance measures shall be cross-referenced against:
   - VAdata statistical reports;
   - Agency case management reports; and
   - Other internal records supporting grant-funded activities.
3. The Executive Director shall verify that the information reported to DCJS aligns with the agency's internal performance data.
4. Reports shall not be submitted until identified discrepancies have been resolved.

Supporting Documentation

1. For each service or activity reported to DCJS, Phoenix Project shall maintain documentation sufficient to support reported performance measures.
2. Documentation may include:
   - Redacted client intake forms;
   - Case management reports;
   - VAdata statistical reports;
   - Service logs;
   - Group attendance records;
   - Hotline reports; and
   - Other supporting records demonstrating grant-funded activities.
3. Supporting documentation shall be retained in accordance with applicable grant requirements and agency record retention policies.

Corrective Action

1. When validation activities identify errors, omissions, or inconsistencies, corrective action shall be taken promptly.

2. Corrective actions may include:
    - Correction of data entry errors;
    - Additional staff training;
    - Revision of internal procedures; or
    - Enhanced monitoring of identified reporting areas.
3. Documentation of validation reviews and corrective actions shall be maintained as evidence of internal quality assurance.

Compliance Monitoring

During grant monitoring reviews, Phoenix Project shall provide performance data, validation records, and supporting documentation sufficient to demonstrate that:

- Consistent procedures are used to collect and report performance data;
- Staff receive training on data collection and reporting requirements;
- Internal validation of reports occurs prior to submission to DCJS;
- Performance data reported to DCJS aligns with source documentation and agency records; and
- Safeguards are in place to protect the integrity and accuracy of reported performance measures.