**Appendix A**

**FY20 Data Quality Checklist**

Grantees must complete and submit a Data Quality Checklist (DQC) annually via the online portal (not in EdGrants).

**Instructions:** Part I lists the policy requirements under each Indicator of Program Quality that relate~~s~~ to data quality.

* Mark “Yes” next to all the items that are true for your program *at this current point in time.*
* Mark “No” next to any item that is not true for your program at this current time or will not be true until a future point in time.
* Mark “NA” for any item that requires a more nuanced answer than “Yes” or “No.”
* Please note that several rows require a written response in lieu of a “Yes” or “No.”
* At the bottom of Part I, please sign the statement certifying that the checklist is accurate.
* Programs that marked any items “No” or “NA” must also complete Part II: Data Quality Report. See instructions for Part II below.

| **Part I** | **Yes** | **No** | **NA** |
| --- | --- | --- | --- |
| **Indicator 2: Access and Equity** |  |  |  |
| 1. Program maintains an active waitlist for applicants who are unable to enroll in instructional classes due to capacity restraints. |  |  |  |
| 1. Program contacts students placed on the waitlist at least annually to determine whether they are still interested in services. |  |  |  |
| 1. Program removes the names of individuals on the waitlist who cannot be contacted or are no longer interested in services. |  |  |  |
| 1. Program asks each student to provide his/her social security number (SSN) and sign a release of information (ROI) form for the purposes of data matching. |  |  |  |
| **Indicator 5: Student Progress** |  |  |  |
| 1. Program adheres to the [state assessment policy](http://www.doe.mass.edu/acls/assessment/) that specifies standardized assessments to use for accountability that are valid and appropriate for adult students. |  |  |  |
| 1. Program administers standardized assessments as per the procedures outlined in the [state assessment policies](http://www.doe.mass.edu/acls/assessment/) for each assessment. |  |  |  |
| 1. Program administers no more than three assessments per student in the same content or skill area during a period of participation as outlined in the [state assessment policies](http://www.doe.mass.edu/acls/assessment/). |  |  |  |
| 1. Program adheres to the [state assessment policy](http://www.doe.mass.edu/acls/assessment/) that specifies the minimum number of hours between pre- and post-tests. |  |  |  |
| 1. Program adheres to the [state assessment policy](http://www.doe.mass.edu/acls/assessment/) of pre- and post-testing at least 80% of its students. |  |  |  |
| 1. Program identifies staff members responsible for administering standardized assessments and ensures they are certified and/or recertified every fiscal year in accordance with [state assessment policies](http://www.doe.mass.edu/acls/assessment/). |  |  |  |
| 1. Program provides appropriate accommodations on tests for students with special needs in accordance with [state assessment policies](http://www.doe.mass.edu/acls/assessment/). |  |  |  |
| 1. Program conducts pre- and post-testing for Distance Learning students (if applicable) in accordance with [state assessment policies](http://www.doe.mass.edu/acls/assessment/). |  |  |  |
| **Indicator 10: Fiscal and Data Accountability** |  |  |  |
| 1. Program enters student participation data into the data management system (LACES) for all students, including those enrolled in distance learning curriculum (if applicable) according to proxy seat time and direct time reporting methods in accordance with the [Distance Learning Guidelines](http://www.doe.mass.edu/acls/dl/). |  |  |  |
| 1. Program completes a minimum of 12 contact hours with a student prior to enrolling that student in a [distance learning](http://www.doe.mass.edu/acls/dl/) curriculum (if applicable). |  |  |  |
| 1. Program has at least one staff person who is familiar with the data, but not directly involved with collection and data entry, review data reports for errors and accuracy. |  |  |  |
| 1. ***Briefly describe the process for reviewing data:*** | | | |
| 1. Program enters data that is consistent with the program’s records kept on file (backup documents). |  |  |  |
| 1. Identify the staff persons responsible for data collection and entry: | | | |
| 1. Briefly describe the process for data collection and entry: | | | |
| 1. Program conducts post-exit follow-up (survey) for students in regard to WIOA-required outcomes (e.g., employment, HSE, entry into postsecondary education or training). *NOTE: The survey method may be used even if students do not provide a social security number or did not sign a release of information form. The survey method must be used for students who are contractors or self-employed.* |  |  |  |
| 1. Program conducts post-exit follow-up for students, including students who leave and return to the program later in the year. |  |  |  |
| 1. Program has a regular schedule for conducting follow up, but no less than quarterly, in order to catch student outcomes. |  |  |  |
| 1. Identify the staff persons responsible for follow-up: | | | |
| 1. Briefly describe the process for follow-up: | | | |

**Part II: Report**

**Instructions:** For any item marked No or NA (Not Applicable) from the Data Quality Checklist, please enter that item number in the chart below along with an explanation for the response. If applicable, please include a brief action plan that will address the situation. An example has been provided for you.

|  |  |  |
| --- | --- | --- |
| **Item #** | **Explanation for a “No” or “NA” Response** | **Plan of Action (If Applicable)** |
| 1. Program has at least one staff person who is familiar with the data, but not directly involved with collection and data entry, review data reports for errors and accuracy. | *This year our director was forced to take extended sick leave and missed the LACES training.* | *The director will enroll in next available LACES training. SABES has identified an area director to mentor in data analysis.* |
|  |  |  |
|  |  |  |
|  |  |  |

| **Program:** | **Date:** |
| --- | --- |
| **Completed by (name and title):** | |
| All teachers profile information is current and up to date.  All administrative staff profile and contact information has been reviewed and is current and up-to-date. | |
| **🞏 I certify that the Data Quality Checklist and report is true and accurate.**  **Signature:** | |