



TOOLKIT

# Data-Driven State Refugee Programs

**Lessons from the Field on Managing, Analyzing, and Using Data to Improve Refugee Programs**

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Switchboard is a one-stop resource hub for refugee service providers in the United States. With the support of the Office of Refugee Resettlement, we offer tools and materials, learning opportunities, research, and technical assistance on resettlement-related topics. From employment, education, and health, to monitoring and evaluation, Switchboard's focus areas reflect real-world needs.

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# INTRODUCTION

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Data and evidence can play a critical role in program management if those data are designed, collected, and analyzed with programming goals in mind and grounded in the reality of how programs work. Actionable and meaningful data provide valuable information on how programs are functioning and how clients are doing. Data can help service providers and program managers refine and improve services to better support clients. Strong data systems provide crucial information for performance management and future evaluation.

As state refugee coordinators (SRCs) manage and coordinate refugee services, they face a range of challenges and constraints related to data collection, analysis, and use. They are responsible for complying with reporting requirements to federal agencies such as the Office of Refugee Resettlement (ORR), and doing so can be challenging given complex and fragmented data systems, limited staff time and capacity, and evolving reporting requirements.

## Who This Toolkit Is For

Nearly every state has positions with the responsibilities of an SRC and a state refugee health coordinator, but the experience of each position and time these employees must allocate to resettlement programs vary widely by state. Some of these positions are state government employees and are commonly located in the state's department of social services that administers other types of federal public assistance programs; in other states, these positions are within nonprofit organizations. State programs vary considerably in their caseload sizes, programming options, refugee populations, institutional structures (including dedicated staff), and political contexts, as well as in their capacity for developing and using data and evidence.

SRCs typically enter contracts with grantees in their states to provide direct services. Grantees include refugee resettlement agencies, nonprofit organizations, ethnic community-based organizations, other state agencies, colleges and technical schools, and other organizations. SRCs rely on these partners to gather information about the refugee programs they provide.

## What This Toolkit Includes

In this toolkit, we provide guidelines and ideas for SRCs who want to improve their use of data in thoughtful and innovative ways. We offer lessons from consultations we conducted with SRCs and their colleagues in summer 2019 as well as best, evidence-driven practices we discovered. Although fulfilling

reporting requirements to ORR is one key function of program data, we focus on how data can be used to improve programming and inform stakeholders. States vary in their ability to collect and analyze data, so we provide guidance in this toolkit for states at different resource levels, beginning with the lowest-investment approaches and moving to the highest investment.

The toolkit is organized as follows. In the first section, Leveraging ORR Reporting Data, we provide some basic ideas that require minimal time and resources but could benefit states. We also share concrete suggestions on how to leverage ORR reporting data, specifically from forms ORR-5 and ORR-6, to inform program management and improvement. This includes (1) how SRCs can use ORR-6 data as a reflection tool with grantees in a process of program improvement and (2) opportunities for using the ORR-5 data in innovative ways. In the next section, Building Client-Centered Data Systems, we share lessons learned and key insights from different states' efforts to build and develop data infrastructure. This infrastructure takes the form of integrated data systems that can streamline the process of collecting data on people served and facilitate subsequent reports and analyses. Although different states are dealing with a wide range of institutional and programming contexts, they face common challenges and opportunities that we highlight. Finally, in Innovative Data Efforts, we highlight some examples of innovative data collection and analysis in different states. Our goal is to inspire efforts at further data collection, often in collaboration with outside research partners.

We hope that this toolkit serves as a resource to support the important work of refugee programs in states across the country.

# LEVERAGING ORR REPORTING DATA

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SRCs already compile a lot of data on their programs for ORR reporting.

For the standard reports, such as the ORR-6 Performance Report, individual service providers may submit aggregate information or individual client-level data on a wide range of indicators to the state. The SRC office combines those data into a single, state-level report, which goes to ORR.

Further, ORR has recently instituted a revised version of the ORR-5 data collection, which requires individual-level data on all people served in the fiscal year, including their basic characteristics; date of eligibility; migration history; and program entry and exit dates for medical screening, Refugee Medical Assistance, Refugee Cash Assistance, and Refugee Support Services (RSS). Compiling these data requires an enormous amount of time and effort from SRCs and all of their grantees.

The data were designed for federal monitoring purposes, so many SRCs often feel they have limited utility. But SRCs have ways to take advantage of these data, without developing new systems or implementing any additional data collection, to better understand how their refugee programs are working (higher-investment efforts are described in a later section).

In this section, we discuss

- using the ORR-6 report as a reflection tool, and
- opportunities for using the ORR-5 report in innovative ways.

## Using ORR-6 as a Reflection Tool

SRCs reported that the ORR-6 has limited utility for states largely because it raises more questions than it answers. This is undoubtedly a challenge for states. But it is also an opportunity for reflection and conversation between SRCs and their grantees.

At a minimum, grantees submit their own aggregate data. This allows the SRC to see similarities and differences among providers and to compare grantee data to state aggregates.

States can use these data in their regular consultations with grantees (or in individualized conversations or monitoring) to discuss what they are seeing in their local programs and guide program

improvements.<sup>1</sup> This is true regardless of the specific elements of the template, which ORR has updated for the next fiscal year. Below, we describe ideas based on the new ORR-6. These could be applied to both the new and old reporting regimes because we expect that the content areas will overlap.

## Schedule A: Program Narrative

This schedule asks the SRCs to summarize the activities, accomplishments, new initiatives and challenges, and emerging issues for each ORR-funded program (Refugee Cash Assistance, Refugee Medical Assistance, medical screening, RSS, and each set-aside or other refugee service program). If the state requires grantees to provide contributions for this section, the SRC might look at the data and reflect on their observations and formulate questions for discussion with grantees for each program.<sup>2</sup> In table 1, we list some types of observations and follow-up questions that could be helpful.

**Table 1: Schedule A Observations and Follow-Up Questions**

Step 1: Review your data and answer key questions	Step 2: Field follow-up questions with your grantees	Step 3: Take action
Which providers are participating in statewide initiatives?	Why do providers choose to participate or not participate?	Devise new strategies for engaging grantees in statewide initiatives
Which providers are implementing innovations?	What lessons have been learned from these efforts? How could they be better supported by the SRC?	Disseminate lessons learned and provide support for innovations.
What challenges are common across grantees?	What resources, supports, training, or connections could the SRC provide to help?	Provide support for grantees to overcome challenges

## Schedule C: Employability Services

The employability services schedule is at the heart of ORR program reporting: it asks states to summarize in detail the types of employability services available and to aggregate employment outcomes by type of participant.

Like the program narrative, the data on employability services provide many opportunities for SRCs and grantees to reflect on both state- and provider-level trends and discuss how ORR-funded programs are working.

<sup>1</sup> “Info Guide – Collecting and Analyzing Data for Learning and Program Improvement” (Switchboard 2019) offers additional guidance for formulating questions.

<sup>2</sup> “3 Steps for Developing Key Evaluation Questions”(META 2018a) offers additional guidance for formulating questions.



For example, looking at the data on employability services in section 5A of the ORR-6, table 2 provides some conversation starters.

**Table 2: Schedule C Section 5A Observations and Follow-Up Questions**

Step 1: Review your data and answer key questions	Step 2: Field follow-up questions with your grantees	Step 3: Take action
What is your state's current mix of employability services?	<p>What mix would be ideal to meet local needs?</p> <p>How might the SRC and the service provider network collaborate to move toward a better mix of employability services?</p>	Formulate a plan for adjusting the mix of employability services, and implement it with grantees
Do some providers specialize in a particular kind of service?	<p>Why have they chosen to focus on this type of services?</p> <p>How are they able to provide these services?</p>	Disseminate best practices for providing or connecting clients to services

ORR section 5B, which deals with the quality of job placements, also provides some useful questions (table 3).

**Table 3: Schedule C Section 5B Observations and Follow-Up Questions**

Step 1: Review your data and answer key questions	Step 2: Field follow-up questions with your grantees	Step 3: Take action
Which providers are most successful in obtaining full-time placements for new arrivals, and which are better for those who have been in the US longer than 12 months?	<p>Why are each of these providers successful? Do they have a different mix of clients, job development efforts, or different local industries?</p> <p>What outreach efforts (if any) are used for people not directly referred to the providers?</p> <p>How many people are requesting services for a job upgrade?</p>	Disseminate lessons learned from successful providers
Are there differences in full-versus part-time placements based on what benefits the participant receives (such as Temporary Assistance for Needy Families, Refugee Cash Assistance, or no federal assistance)?	<p>Why do these differences exist?</p> <p>How might the SRC help grantees address these challenges?</p>	Communicate differences to mainstream service providers, and design and implement a plan to address disparities

Next, look closely at the average hourly wages for full-time and part-time jobs (shown in ORR-6 section 5Be) both at the state level and for individual providers (table 4).

**Table 4: Schedule 5C Section 5Be Observations and Follow-Up Questions**

Step 1: Review your data and answer key questions	Step 2: Field follow-up questions with your grantees	Step 3: Take action
How do wages at full- and part-time placements compare? Do part-time placements ever have significantly higher or lower average wages?	Which industries or employers offer the highest wages for full- and part-time placements?	Publish a resource highlighting highest-opportunity industries, occupations, or employers in your state
Do any providers have average wages for full- and part-time placements that are consistently and significantly higher or lower than their peers?	<p>Why is this?</p> <p>Is it because of any combination of</p> <ul style="list-style-type: none"> <li>population groups served <sup>3</sup> (in terms of English proficiency, educational attainment, prior job experience),</li> <li>a longer or shorter time since arrival in the US,</li> <li>employability services or job development, and</li> <li>regional differences in wages (see tip box 1)?</li> </ul> <p>What lessons, if any, can be drawn from these providers?</p>	Disseminate lessons learned from consistently high-performing providers

## State Example

IL

Illinois uses the ORR-6 to track outcomes for employment services to make informed decisions on employment service standards and contracts, including average wages, employer-provided health insurance, and job retention. Outside of the ORR-6, Illinois examines service data in combination with refugee demographic data to assess whether outcomes differ for certain refugee populations, such as by gender or country of origin. This allows Illinois to identify, in collaboration with service providers, whether a specific refugee population experiences unique challenges that may require additional attention and different service strategies.

<sup>3</sup> For a detailed description of ORR-eligible clients, see “What We Do,” Office of Refugee Resettlement, last reviewed June 26, 2019, <https://www.acf.hhs.gov/orr/about/what-we-do>.

## Schedule F: Refugee Medical Assistance and Medical Screening

Like the program narrative and the ORR-6 section on employability services, the section on Refugee Medical Assistance and medical screenings also has opportunities for SRCs to make observations and follow up with grantees to learn more (table 5).

### Tip Box 1: Wage Data

As most SRCs know, wages can vary substantially depending on where jobs are located. This could explain some variation in average hourly wages among providers. The Occupational Employment Statistics program provides average hourly wages for all the metropolitan and nonmetropolitan areas in your state. These data can help you see how well provider variation in average hourly wages might mirror geographic variation. Just select the geographies where your providers are located, view them alongside your providers (sorted by region), and reflect on what you see. These data can also help you identify occupations that might provide high-value opportunities for local refugees and other ORR-eligible clients.

**Table 5: Schedule F Observations and Follow-Up Questions**

Step 1: Review your data and answer key questions	Step 2: Field follow-up questions with your grantees	Step 3: Take action
Which providers report cases with particularly high medical costs (Part 1, C)?	What kinds of health and other issues are present in these cases?  Are they connected to other ORR resources like Preferred Communities or the Survivors of Torture program, if appropriate?	Coordinate and support efforts to serve and better connect high need clients to the resources they need.
To compare the timeliness of medical screenings, calculate for each provider: <ul style="list-style-type: none"> <li>■ percent completed within 30 days</li> <li>■ percent completed within 31-90 days</li> <li>■ percent completed beyond 90 days from arrival</li> </ul> Which providers are able to complete medical screenings quickly?	How and why are these providers able to complete the screenings faster than their peers?  How could the SRC support to spread these best practices?  How much do lags in reporting these data affect the break-down you see?  How might these be fixed to get a more accurate picture?	Disseminate best practices for expediting medical screenings.  Help providers resolve issues that lead to lags in reporting.

## Opportunities for Using ORR-5 Data in Innovative Ways

The ORR-5 data are limited in some important ways. Notably, they do not provide detailed information on employment outcomes (such as type of job placement, wages, or retention) that would help SRCs better understand trends in the ORR-6 indicators. The ORR-5 is also limited to a single fiscal year, which complicates calculation and interpretation.

Despite these limitations, several SRCs shared examples of how they use, or how other states could use, the ORR-5 data to manage programs, assure compliance with ORR program guidelines, and monitor local priorities for RSS.

### Estimating Future ORR Formula Funding

To the extent possible, SRCs want to be able to anticipate the level of ORR funding they will receive in the next fiscal year so they can effectively plan their programs. ORR uses information on the status of refugees and other ORR-eligible clients (field 2 in the ORR-5) and migration (fields 19 and 20) to allocate their formula grants. ORR published an example for fiscal year 2018.<sup>4</sup>

With the recent policy changes affecting how many refugees and other ORR-eligible clients the US accepts, states can use the ORR-5 data on people served to estimate the level of funding they might expect. There may be more than one way to do this, but states such as Connecticut and Washington have developed their own methods for these calculations.

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### State Example

CT

In Connecticut, the newly expanded ORR-5 is used for a variety of program management efforts, such as ensuring that individuals are served in the correct federal fiscal year, forecasting future contract sizes to conduct financial planning, and observing trends across different grantees' caseloads. This lets state officials think critically about relative caseloads in a meaningful way.

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### Analyze and Learn: Analyzing Grantee Caseloads

SRCs also find ORR-5 data helpful for better understanding their individual grantees' caseloads. SRCs might use the following steps to determine what resources their grantees will need:

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<sup>4</sup> To learn more, see "FY 2018 Refugee Social Services Formula Allocations," US Department of Health and Human Services, Administration for Children and Families, Office of Refugee Resettlement, October 1, 2018, <https://www.acf.hhs.gov/orr/resource/fy-2018-refugee-social-services-formula-allocations>.

- Step 1:** Use the date of eligibility (field 10) to identify and count the number of people who are eligible for services in the next fiscal year.<sup>5</sup>
- Step 2:** For these eligible people, calculate the number and percent from each country of origin using data in field 8 (nationality). This helps SRCs identify which organizations may need different language resources and which providers could work together.
- Step 3:** For these eligible people, calculate the number and percent of people under age 18 or over age 60 (tip box 2). This may help SRCs identify where connections to the Refugee School Impact Program and Services to Older Refugees Program might be most effective.

#### Tip Box 2: Calculating Age

To identify children and older refugees, providers will need data fields for refugees' ages. Many data systems store dates as numeric values, which allows you to add, subtract, and manipulate them more easily. Find an analyst or programmer who can create an age variable using the refugee's date of birth (field 4) from the ORR-5 data.

### Analyze and Learn: Ensuring Compliance with ORR Program Guidelines

All ORR programs have strict windows of eligibility. For example, refugees and other ORR-eligible clients can receive Refugee Medical Assistance and Refugee Cash Assistance for up to eight months. They can receive RSS for up to five years. Federal guidelines require medical screenings be completed within three months of becoming eligible for ORR services.

ORR-6 does not allow states to assess how well they are complying with these guidelines. Some states, such as Ohio, track compliance with their own systems and processes, but ORR-5 lets all states perform these kinds of analyses. For example, an SRC might follow these steps:

- Step 1:** Calculate how long each client had been eligible (field 10) for each service at the date of exit (fields 12, 14, 16, and 18). Use the end of the fiscal year if an entry date but no exit date is listed.
- Step 2:** Compare the time eligible at time of exit or at the end of fiscal year to guidelines for the program.
- Step 3:** Flag all cases where participants received ORR programs outside their eligibility window.
- Step 4:** Calculate the rate of noncompliance for each provider.

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<sup>5</sup> This is only an estimate. Some people may be eligible but have not already received services.

## Monitoring Local Refugee Support Services Priorities

Some SRCs suggested using ORR-5 data to examine whether grantees are fulfilling expectations set out in their contracts for RSS implementation, such as prioritizing newer or more established eligible entrants or ensuring service equity (i.e., that entrants are being treated similarly regardless of gender, age, country of origin, entrant status, etc.).

The next example lays out the steps states might take to do these kinds of analyses with their ORR-5 data.

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### State Example

VA

Virginia leverages data analysis capacity in its research and development department to analyze gender equity and two-generational approaches in its provision of employment and training services. The state office began with a question: How many individuals had received training and employment? Beginning with that simple question, the team identified that, without rationale, there were unequal numbers of women and men enrolled in employment programs at a particular grantee agency compared with other grantees. The SRC shared these data results with the grantee to fuel reflection and assessment of their training processes, the experiences of employment specialists and supervisors, and agency culture.

The focus on equity came from the SRC's desire to ensure women and men were receiving equal provision of services. To build equity into evaluations of service providers, the SRC meets with stakeholders and provider directors once a month and has built this element into outcomes goals and contract language with the intention of incentivizing meeting equity targets. After several years of focusing on equal service *outputs* across gender, they have been able to progress into setting equal *outcomes* goals.

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#### Tip Box 3: Equity

If you want to examine other kinds of equity issues or other service priorities, examine categories such as age, entrant status, country of origin, or time eligible for benefits instead of gender.

### Analyze and Learn: Ensuring Gender Equity

Virginia uses the kind of individual-level data found in ORR-5 to assess how well the state and individual grantees are meeting local goals for gender equity in RSS. To perform this kind of analysis, SRCs can follow the steps below with their ORR-5 submissions:

**Step 1:** Identify all potential RSS participants. This might include all people age 16 and older, or it could be only adults ages 18 to 64; use whatever metric makes sense for your state. (See tip box 2 on calculating age).

- Step 2:** Calculate a statewide equity benchmark. Use the data in field 5 (gender) to sum all female and male potential participants for RSS separately, and divide each by the total number of potential participants to calculate the share of men and women.
- Step 3:** Select all the people who received RSS in the fiscal year.
- Step 4:** Calculate the actual statewide status of equity. Calculate the actual share of men and women for RSS participants.
- Step 5:** Compare the statewide equity benchmark from step 2 to the actual status of equity in step 4.
- Step 6:** Repeat steps 2 through 5 for data from each individual service provider, using field 9 (individual organizations). Calculate ideal [step 2] and actual [step 4] gender distributions for individual organizations providing support [field 9].

## Looking Forward

Using existing ORR reporting data as a resource is an effective, low-investment way SRCs can better understand how their programs improve program management and performance. However, doing so has many limitations. Notably, outputs cannot be linked to outcomes, and SRCs cannot use these data to think more holistically about services and outcomes beyond employment. In the next section, we provide a guide for SRCs who want to begin exploring these issues in depth by setting up their own integrated systems for refugee data.

### Tip Box 4: Calculating Length of Refugee Support Services

Alternatively, states can use ORR-5 data to examine equity in RSS length. For these analyses, states determine which people received RSS services in the fiscal year and calculate the number of days RSS services were received. This calculation might look like this:

- If the RSS exit date (field 14) is not missing, then the number of RSS days equals the RSS exit date (field 14) minus the RSS initial enrollment date (field 13).
- If the RSS exit date (field 14) is missing, then the number of RSS days equals the date of the end of the fiscal year minus the RSS initial enrollment date (field 13).

Then, in the calculation steps 4 and 5 for actual recipients, states would calculate the mean number of days by gender and compare across grantees and with the state benchmark.

# BUILDING CLIENT-CENTERED DATA SYSTEMS

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Many SRCs have built or are moving toward improved data infrastructure that stores information on the experiences and outcomes of individual clients. Stronger data infrastructure can not only facilitate meeting ORR reporting requirements, it can also inform program management and improvement and inform stakeholders on key questions of interest about participants and programming. Stronger data infrastructure and tools could allow SRCs greater flexibility to analyze links between outputs of programs and outcomes of participants and allow them to define and track service receipt and outcomes more holistically.

Although all SRCs are required to provide regular reporting to ORR, SRCs vary in many respects, such as the type and size of their programs and their institutional and data infrastructure settings. However, states face some common challenges and opportunities when improving their data systems.

This section provides ideas for consideration and highlights examples from different states that have developed their data systems and reflected on improvements to process and setup. We address the following topics:

- Selecting and configuring a data system
  - » What should be done before setting up or redesigning a data system?
  - » What sorts of data should the data system include?
  - » What is important to keep in mind for the software chosen?
  - » What skills and training does a data team need?
- Using a data system effectively
  - » How should grantees be incentivized to use the data system?
  - » How should confidentiality be ensured for all participating organizations?
  - » How should users be approached for training to use the data system?
  - » How should ongoing support be provided to grantees?
  - » How should data quality be monitored?
  - » What kinds of analyses should be done?
  - » How should data be shared with grantees?



## Selecting and Configuring a Data System

### WHAT SHOULD BE DONE BEFORE SETTING UP OR REDESIGNING A DATA SYSTEM?

- ✓ Consult with your grantees and state partners to assess your current data infrastructure and how you collect data from grantees. What is working well, and what could be improved?<sup>6</sup>
- ✓ Map out what data are currently being captured, what gaps are in your knowledge of refugee programs, and the best ways to gather this information. Some types of information may lend themselves to a quantitative data system, others might be better gleaned through surveys, focus groups, or innovative methods like those described in the previous section.<sup>7</sup>
- ✓ Think about how your new data system will fit into a larger evidence culture. How will it help you identify important questions, gather data, share results, and use data to make program improvements?
- ✓ Manage expectations from the beginning. Building a new database or revamping an existing system will be an iterative process. You may need to initially roll out only a subset of programs or introduce programs to a subset of grantee staff for piloting and testing, then scale and expand over time.

### WHAT KINDS OF DATA SHOULD THE SYSTEM INCLUDE?<sup>8</sup>

- ✓ Use this as an opportunity to start from scratch and include not only core reporting requirements but also components that could inform program management or answer key questions for you or your stakeholders.
- ✓ Move toward measuring outcomes rather than just outputs. Outputs tend to reflect program receipt. Outcomes consider people's program participation, well-being, employment, knowledge gains, or other ways the program has met its goals.
- ✓ Include unique person identifiers (such as alien numbers, social security numbers, or public benefit case identifiers) that can be linked to other administrative data.
- ✓ Consider including a household identifier that will allow you to analyze outcomes by household. This is particularly important when measuring the employment outcomes of several household members against household cash assistance or self-sufficiency.
- ✓ Include demographic characteristics that could be used to break down program data further (e.g., by status, location, gender, country of origin, date of birth, date of eligibility for refugee services, and educational attainment). Understanding the experiences of different groups may help identify their different needs and shape program improvements.
- ✓ Capture dates of service to acquire longitudinal data, or data on outputs and outcomes for people at several points in time.

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<sup>6</sup> The "Needs Assessment Training Handbook" (SOAR 2010) offers additional guidance.

<sup>7</sup> The Switchboard tip sheets "5 Steps for Planning Focus Group Discussions" (META 2018b) and "5 Steps for Planning Surveys" (META 2018c) offer additional guidance.

<sup>8</sup> The "Data Collection Planning Worksheet" (META 2017) offers additional guidance.

- ✓ Work with your grantees to clearly define the categories of services offered if they differ from the categories used on the ORR-6.
- ✓ You may want to tailor relevant outcomes for different groups of people, such as children, adults who are able to work, and elderly and disabled people.
- ✓ Your database should allow you to disaggregate outcome data by demographic, such as men and women, children, adults who are able to work, and elderly and disabled people. This enables stronger analysis and decisionmaking
- ✓ Consider capturing data that other systems collect, such as North American Industry Classification System codes, so you can compare your data to data from the Department of Labor and other sources.

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## State Example

CO

Colorado's database redesign was driven by a shift from measuring just outputs for reporting purposes to also measuring a broader set of holistic participant outcomes. They are shifting from "warehousing" data points for reporting only to using a database centered around a built-in online assessment tool, customized from a tested tool used broadly by Colorado's family resource centers for refugee services. Frontline staff will complete the assessment tool for participants and enter data in real time to inform and improve service decisions. The tool, which consists of a caseworker-facing household assessment and a client-facing self-assessment, will assess households across a set of domains; this will then inform shared goal-setting between the caseworker and household members. The aim is to streamline and reduce onerous data-entry requirements in multiple databases and integrate the assessment tool into the state data system.

Data from the assessment tool will allow for easy understanding of the client's needs and progression, and dashboards will be used to visualize the results. This accessibility will support service providers in identifying opportunities for enhancing services for current clients and generate evidence that can be analyzed to inform and improve program design and delivery decisionmaking at the SRC office.

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## WHAT IS IMPORTANT TO KEEP IN MIND FOR THE SOFTWARE CHOSEN?

- ✓ An ability to customize the software is critical for adapting to changes in reporting and management priorities over time. Choose an off-the-shelf database product that can be customized to state needs or build a new system from scratch.
- ✓ Ask grantees which kind of data system would provide the greatest value to them. State offices need good reporting systems, but grantees might be more likely to use the system if it offers case management tools that help them with their daily work.
- ✓ Leverage existing state software and database systems as much as possible. This can both lower cost and provide greater interoperability. Consult with your grantees on what kind of options they need to share their data with you. For example, some might prefer direct input, while others want batch-upload functionality. Make sure you anticipate what features they will be most comfortable with.

- ✓ Make sure your data system can accurately capture people's holistic program participation, including their receipt of services across multiple service providers and the timing of their services.
- ✓ Investigate how well competing systems can keep data secure. At a minimum, make sure you can appropriately calibrate access to data for different users. If you plan to store or link to protected health information, be sure that your system complies with the Health Insurance Portability and Accountability Act.
- ✓ Find out if the data system allows you to automate any aspects of data quality control and whether your grantees can ask questions, raise concerns, or solicit assistance through the system.
- ✓ Consult with stakeholders and decide whether you want the data system to have a certain type of dashboard or other way of sharing data, then choose an option with this functionality.
- ✓ Evaluate whether the data system empowers grantees to perform their own analyses if they envision this being a potential benefit to them.

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## State Example

CO

In Colorado, the SRC and staff had an opportunity to be an early adopter of database software, Salesforce, that was supported by the Governor's Office of Informational Technology. They decided that using such software would leverage existing state resources and open doors for interoperability in the future. They consulted with others and researched the database to ensure it would meet their needs. Joining an existing statewide contract reduced logistical burden and lowered the cost of financing the database overall. The state-operated information technology office used its institutional knowledge of Salesforce and worked with refugee services to adapt their knowledge for the refugee services context; refugee services were able to leverage that information technology capacity rather than independently staff an in-house database developer.

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### WHAT SKILLS AND TRAINING DOES A DATA TEAM NEED?

- ✓ Eagerness to dig in and flexibility to adapt to frequent changes in the database system are critical.
- ✓ Prior experience in service provision or with local providers can be useful for understanding service and operational issues on the ground.
- ✓ Substantive knowledge about the specific programs the database will track is important.
- ✓ Experience and comfort with training staff at respective service providers helps substantially.
- ✓ Clear lines of communication between internal staff and database system developers is useful for troubleshooting technical issues.
- ✓ An understanding of data collection, data transmission, and associated quality controls, as well as knowledge of how to synthesize and analyze information for reporting and program improvement, will help the team work efficiently.
- ✓ Recognition that collecting and cleaning data is a different skill set than analyzing and using data will ensure the team is staffed appropriately.

- ✓ Knowledge of Structured Query Language, a standard computer language used to query, insert, update and modify data in relational databases, could be helpful if the database uses it.
- ✓ An understanding of ethical considerations and data security protocols is important for keeping people's information safe.

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## State Examples

FL

Florida's state refugee database system is nested within the state's information technology department, and funding for the system stems from this department's budget. From a financial standpoint, the tie to a state budget spreads costs, and it means that the state covers the costs and effort of maintaining and upgrading licenses and the software itself. This removes the burden of managing and financing changes to the database from the SRC's office and allows them to focus more narrowly on leveraging the system for purposes of program compliance and improvement.

ME

Maine recently shifted from a state agency model to a replacement designee model, which came with the need to identify a data infrastructure solution. This coincided with shifting ORR reporting requirements. Maine was able to work with one of Texas' SRCs and use existing software infrastructure that had been recently developed there. The data between the states are firewalled, and neither state can see or access the other's data. Maine was also able to add preferred functions to their side of the database that Texas does not have, such as Services for Older Refugees (SOR), Reception & Placement (R&P) and health screening administrative data. Leveraging an existing database saved time and resources for Maine and still allowed them to customize their database for their own needs.

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## HOW SHOULD A DATABASE BE FINANCED?

- ✓ Leverage federal planning, coordination, and management dollars as much as possible, following federal procedures for prior approval and claiming.
- ✓ Where possible, use existing state funding streams, and consider blending or braiding them with federal dollars.
- ✓ Take advantage of existing state software agreements to reduce costs whenever possible.
- ✓ Remember that the start-up costs of building a database are substantial, and unexpected issues may arise that increase expense and case delays. Build in extra financial flexibility and time where possible.<sup>9</sup>
- ✓ Consider the budget implications of having in-house development and support staff versus staff from an outside database company or consultant.
- ✓ Budget for ongoing development and support to accommodate evolving reporting requirements and state program management priorities.
- ✓ Anticipate recurring costs for licensees and encryption technologies.

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<sup>9</sup> Switchboard's "[Budgeting for Research and Evaluation Tipsheet & Checklist](#)" (META 2018d) offers additional guidance.

## Using a Data System Effectively

### HOW SHOULD GRANTEES BE INCENTIVIZED TO USE THE DATA SYSTEM?

- ✓ Take time to understand grantees' data systems. Ensuring interoperability between sophisticated grantees' systems and the state system will reduce duplicative efforts and go a long way in securing buy-in. For grantees that may not have databases, a state system can add significant value to their programs.
- ✓ Include providers early in the database selection and set-up process. This will help ensure the final database meets their needs.
- ✓ Clearly explain why data collection is important, including why and how the data will be used (e.g., RSS allocations or contract performance management).
- ✓ Work with grantees to identify what they want to learn from their program data and how the database can support that learning.
- ✓ Provide grantees with individualized data and reports so that they can use the information to inform their programs.
- ✓ Provide grantees with tools and data they wouldn't otherwise have and that help them improve service provision. These could include data dashboards that break program information down into manageable pieces and answer the questions they answered.
- ✓ Define a minimum level of participation, and tie it to contractual obligations.
- ✓ Create mechanisms to engage grantees continually throughout rollout, and provide ongoing support during implementation. (See the section How Should Ongoing Support Be Provided to Grantees for more.)

### HOW SHOULD CONFIDENTIALITY BE ENSURED FOR ALL PARTICIPATING ORGANIZATIONS?

- ✓ Consider limiting the data collected to protect confidentiality. Ask why each data point is essential before including it.
- ✓ Create electronic data confidentiality and user agreements to clearly communicate rules and foster accountability.
- ✓ Establish personalized user accounts with tailored access and permissions to data.
- ✓ Because programs may have a range of staff personnel, establish a code of conduct that sets guidelines for data management.
- ✓ Underscore the importance of protecting personally identifiable information and deidentify data when possible. Generate unique client identification numbers and use those numbers, rather than names or other personally identifying information, when discussing information or linking data.
- ✓ Remind providers not to send information on individual clients over telecommunication systems such as email or instant messages.

- ✓ If information is sent by email, it must be encrypted. Excel spreadsheets and PDFs can be encrypted and locked with a password, and the password can then be shared through a separate communication with the email recipient. States should also consider setting up a secure FTP to exchange files if they don't use one already.
- ✓ Consider offering confidentiality training on refugee data collection and analysis.
- ✓ Explore whether the data system allows its usage to be tracked by license or user. Run regular reports to review which users are accessing which data and look for signs of inappropriate data use.
- ✓ Explore whether the data system can be encrypted at rest (while stored) to further safeguard personally identifying information from hackers.
- ✓ In contracts with grantees, include guidance on how to terminate user accounts when an employee leaves the agency or changes jobs (if access to the information is no longer necessary). Perform routine audits of user accounts to highlight any accounts that may need to be terminated.
- ✓ Ensure that contracts outline data confidentiality rules and include business agreements that follow the Health Insurance Portability and Accountability Act.

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## State Example

CO

For their data system, Colorado developed both data confidentiality and user agreements. All staff are required to sign a data confidentiality agreement, and anyone interacting with the data must sign a data user agreement. Confidentiality protections have limited sharing of certain data between grantees, such as sensitive information like mental health service receipt. Colorado also uses data encryption through Salesforce to protect personally identifiable information. The state also restricted levels of access to maintain data integrity, so agencies and providers can't delete or edit select items without the SRC office's knowledge.

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## HOW SHOULD USERS BE APPROACHED TO BE TRAINED TO USE THE DATA SYSTEM?

- ✓ Where possible, consider bringing on a staff person who has experience training people to use a data system leading up to and during the transition period.
- ✓ Identify learning objectives that correspond to the different user roles in the new system. Clearly define what actions each user role needs to learn how to do. Then, develop a training plan designed to meet those objectives.
- ✓ Design the training to account for different levels of data literacy among users. For example, some larger providers have dedicated data staff with considerable expertise; smaller providers may depend on case managers or other program staff with little training.
- ✓ Whenever possible, opt for in-person training (at least initially). Several states felt that these sessions were more effective for delivering information, gauging understanding, and calibrating support for different levels of data literacy and learning styles. One option is providing group trainings in multiple locations at predetermined times (described in the state example below) or setting up interactive webinars.
- ✓ Consider offering “evergreen” online learning opportunities that can be accessed as needed. These might include self-paced e-learning modules, video tutorials, FAQ pages, and step-by-step reference documents.
- ✓ To the extent possible, leverage training resources embedded in the database software. Some software contains existing training resources such as user guides, video trainings, and online chats.
- ✓ Offer trainings that are as applied and realistic as possible, allow trainees to use sample data to practice input and manipulation. This can be accomplished through in-person training using a test or “sandbox” environment or through self-paced interactive tutorials that can be accessed online.
- ✓ Whenever possible, train more than one person at a grantee organization, or follow a “train-the-trainer” model (meaning you train one person who will go on to train others). This ensures organizations have ongoing institutional knowledge of how data are entered, tracked, and submitted to maintain continuity in the face of inevitable staffing changes or transitions.
- ✓ Pair training with intensive troubleshooting and ongoing support (discussed in more detail in the next section) during rollout.

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### State Example

WA

In 2018, Washington promoted an expansion of the existing case management system to administer their refugee employment services. To roll out the expanded system, they prepared and executed a “tour” with all of their service providers. As part of this rollout, they offered workshops on the system, as well as hands-on classroom training in computer labs running the on-line program, mimicking real data input as much as possible. Washington also offers continual technical assistance for providers over the phone on an as-needed basis. Program Managers also visit service providers in person to help users to navigate the system successfully. Washington trains all of the direct services personnel at the grantees funded by the SRC’s office to use the system. In the future, Washington plans to integrate additional programs into the database, and plans to engage in more training efforts.

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## HOW SHOULD ONGOING SUPPORT BE PROVIDED TO GRANTEES?

- ✓ Establish clear lines of communication early on between state staff members and service providers.
- ✓ Consider using a ticket system within the data system to track and respond to user issues. This allows common issues and resolutions to be documented and saved so that users with questions that have been previously addressed can be pointed to earlier exchanges, similar to an FAQ.
- ✓ Tailor ongoing support as appropriate. Personalized support is very helpful for one-off issues, but larger group trainings paired with accessible FAQ resources may be more appropriate when common issues repeatedly surface.
- ✓ Consider using phone calls or emails as cost-effective and rapid alternatives to in-person visits for providing one-on-one support.
- ✓ Record any webinars or group training designed for a more general audience and post them somewhere easily accessible.
- ✓ Establish institutionalized guidance produced from through training and technical assistance so that if the state staff person managing these activities leaves, that knowledge does not leave as well. This could include not only developing materials but also cross-training staff in the SRC office.

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### State Example

TX

Texas used a ticket tracking system after realizing that their troubleshooting processes were time consuming and lacking efficiency. They replaced the various mechanisms by which users transmitted their issues (emails and phone calls) with a common ticket system embedded in the software itself, so that users do not have to navigate off the data system page to find answers to their questions. In the current system, users can simply click a button to submit their query, and the question is routed to a central location, where it is stored. Managers have oversight over the system so they can see trends and identify common problems that arise. This is an effective method for understanding when group trainings are necessary to address common challenges.

To assess capacity and provide targeted supports, Texas works to prepare grantees for system adaptations through face-to-face trainings on computers. This involves frequent training and demonstrations, with three to four scheduled each year. The state has a website that includes guidance for the database and a user-friendly manual to guide database use. Continuous engagement with service providers is key to provide ongoing support, especially when changes to the data system are introduced. Texas initially had designated one support person per region for each of the four regions, to manage data system questions and troubleshoot issues coming from service providers. This has been centralized since initial rollout of the data system, but this early-on intensive assistance laid the groundwork for building capacity and sustainability.

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## HOW SHOULD DATA QUALITY BE MONITORED?<sup>10</sup>

- ✓ Assign a designated staff member to monitor, cross-check, and clean data at consistent and frequent intervals (i.e., monthly or quarterly).
- ✓ Set up automated validation rules within the data system to save time when dealing with common errors (see state example below).
- ✓ Let grantees check the quality of their own data as part of their data analysis and learning process. Encouraging grantees to move beyond compliance requires they make sure that their data are correct, usable, and clean so they can get answers to the questions that matter most to them.
- ✓ Over time, note common data quality issues or errors. Work with grantees to identify whether improvements can be made to the data system or training processes to minimize these errors.
- ✓ Limit deletions of information to maintain data integrity.

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## State Example

FL

In Florida, quality control is built into their data system. Depending on the grantee, Florida uploads data using both direct input (on individual clients) and batch uploads (grouped by grantee). Data entry is validated up front through an automated process in real time as the data are being entered, field by field, so accuracy issues are caught as they happen. One example of a validation rule is setting checks for simple data errors, such as inconsistent birth dates or entry dates for a given client. Another example is stringent matching validations, such as using standard abbreviations for variables like state or area codes, so duplication errors are limited. When an error does happen during data entry, automated alerts are sent to verify information. Users cannot save or share the data until they resolve data errors. Users can still report back questions or concerns to the SRC.

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## WHAT KINDS OF ANALYSES SHOULD BE DONE?

- ✓ Run basic ORR aggregate reports, like the ORR-6, and produce the individual-level data you need to generate for ORR-5 with ease. Newer database systems can aggregate and download information efficiently with a single click, so think about implementing these functions during setup.
- ✓ Remember what stakeholders told you up front that they wanted to understand better and which analyses you thought would be helpful in your own performance management.
- ✓ Evaluate contract performance outcomes, track client progression, or map resources.
- ✓ When you aggregate services by provider, consider calculating a cost per service or a cost per outcome as an ongoing performance indicator. You can use data aggregated by state as a point of comparison.

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<sup>10</sup> The tip sheet "[4 Practical Tips for Improving Data Quality in Case Management Programs](#)" (META 2016) offers additional guidance.

- ✓ Consider using demographic data to evaluate different equity issues (such as in employment and education outcomes) across race, gender, ethnicity, and family generation.
- ✓ Determine what time intervals make most sense for your programs and run regular reports on the data that matter to you.
- ✓ Consider linking data between state data systems to streamline information and enable to you analyze holistic information on participants.

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## State Examples

VA

The State Government's Virginia Longitudinal Data System (VLDS) is an integrated database that captures data such as employment; English as a Second Language attendance; and public assistance data. Temporary Assistance for Needy Families and medical screening data are also accessible and integrated in the data system but have certain access restrictions. The database enables participating agencies to share information about individuals across different data sources while still protecting privacy. Information is matched across databases from different agencies and then deidentified. Access to integrated data is only granted to those who have been approved by each participating agency. Researchers can access this data if they submit details about what data is being requested, who will have access to it, and what the research and program are. They are required to sign a restricted use data agreement detailing what the data can and cannot be used for as well as a nondisclosure agreement.

MD

Maryland's database is a case management system that is part of a larger statewide system that includes links to Temporary Assistance for Needy Families and medical screening information. This allows service providers to see all the social service and benefits programs a client is eligible for, including the Supplemental Nutrition Assistance Program, Medicaid, child care, and home energy assistance, and to more effectively coordinate with other providers. The SRC is looking to expand longitudinal data collection to capture social and economic asset gain measures (such as demonstrable increased understanding of cultural orientation content, skills gains, improved English proficiency, training and career paths) that go beyond narrow definitions of self-sufficiency.

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## HOW SHOULD DATA BE SHARED WITH GRANTEES?<sup>11</sup>

- ✓ Use a dashboard to display data visualizations such as graphs, charts, maps, and other depictions of participant and program data.
- ✓ Organize in-person discussions or data walks (tip box 5) with grantees to help overcome data complexity, and work with varying levels of data literacy. These feedback mechanisms can help grantees process and understand the data and reflect on how it relates to their work and program goals.
- ✓ Develop easily digestible reports for agencies that give them key information that helps them accomplish their mission and address their priorities.
- ✓ Consider clustering types of information in categories salient to users. For example, concentrations could include health and wellness, employment and training, immigration and naturalization, or whole-family services. Organizing your data system around an integrated interface, such as a comprehensive assessment tool that identifies key outcomes or program categories, can support this type of approach.

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## State Examples

TX

Texas has created data dashboards to help the SRC in planning and coordination of services and help service providers understand outcomes of data through visualization. Texas uses dashboards for several different areas of regional interest, including arrival numbers, job placements, English as a Second Language enrollment, and average wages. Visualization handouts and flyers are made through the dashboard tool, which the SRC shares in quarterly stakeholder meetings and presentations.

FL

Florida uses data dashboards to visualize data and communicate program information and changes over time with grantees. A dashboard can be downloaded from an interactive data page and includes a map reflecting refugee density per county, graphs depicting age of entry and arrivals by month, and a table showing countries of origin (figure 1). Such a graphic can visually display relevant data for the benefit of central refugee services staff, service providers, and potentially other stakeholders. Templates can be used to quicken, and even automate, this process, so that the dashboards do not have to be built by hand each time. Dashboards produced at regular time intervals, or automatically populated in real time, are an effective tool for showing change over time and can inform program management.

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<sup>11</sup> The tip sheet “[5 Steps for Using Data to Tell Program Stories](#)” (META 2017a) offers additional guidance.

### Tip Box 5: What Is a Data Walk?

A data walk is a way organizations can share and discuss data results with stakeholders to facilitate collaboration and the identification of new solutions. During a data walk, program participants, community residents, and service providers jointly review data presentations in small groups, interpret what the data mean, and collaborate to use their individual expertise to take lessons from the data to improve policies and programs.

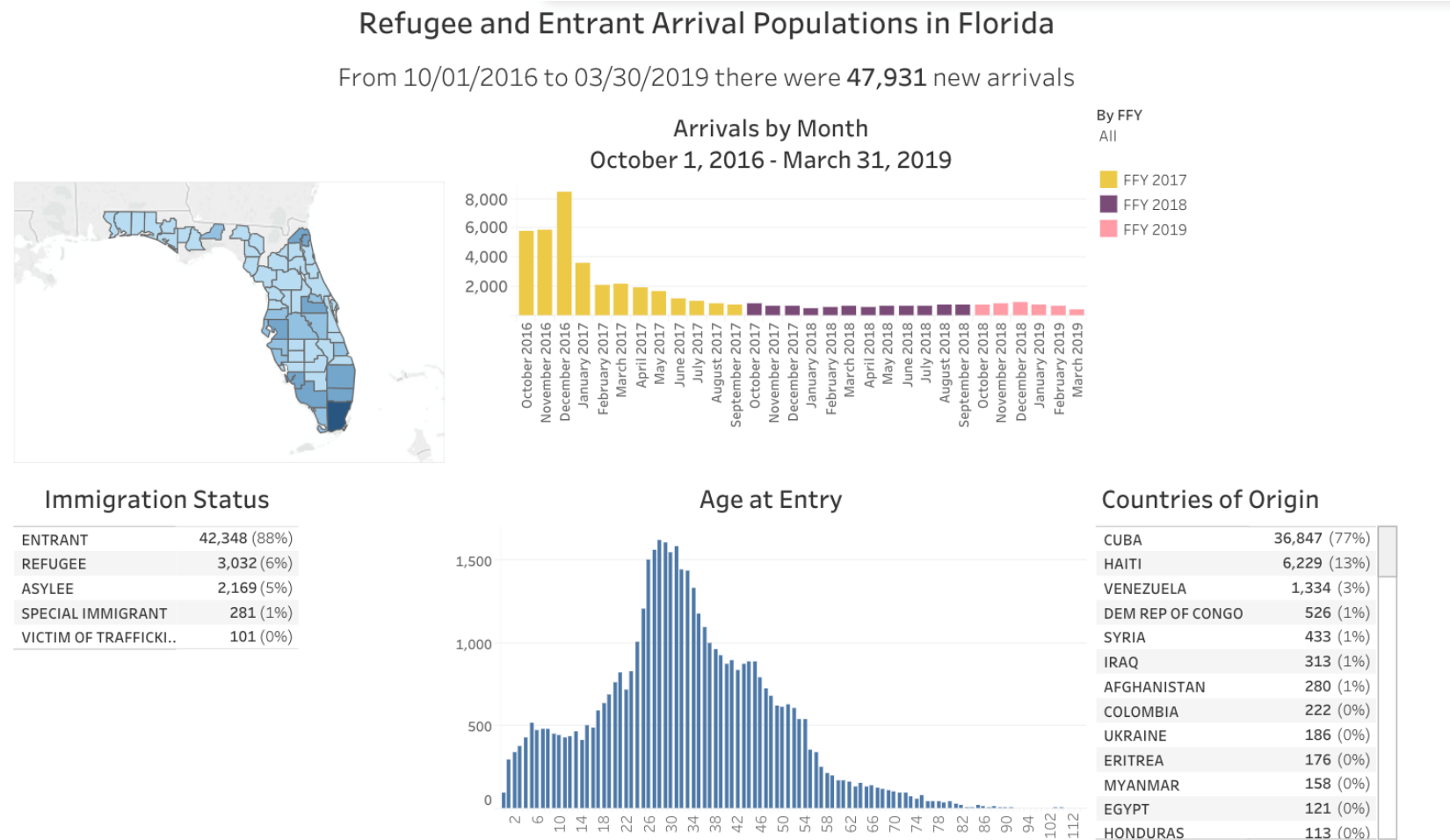
For example, the Housing Opportunity and Services Together project is a multisite demonstration that tested wraparound services and programs for youth and adults living in a range of public and mixed-income housing in Chicago, Illinois; Portland, Oregon; and Washington, DC. Program providers used data walks to share community survey data around employment, food security, and mental health as well as ongoing program data on participation and engagement. The data walks involved Urban Institute staff creating visuals and graphics of relevant data and placing them in a simple, strategic order in a physical space such as a meeting room. Urban then led service providers through the physical space, and the discussions that followed allowed residents to share information with service providers. In one case, a resident shared her personal connection to the findings about food insecurity in her community: she did not understand why the reported share of residents who were not able to afford food was not higher, because she (and many of her neighbors) were going hungry. She was able to connect with her service provider about how specific needs in her household were not being addressed and how the service provider could help her meet her goals.

Source: Brittany Murray, Elsa Falkenburger, and Priya Saxena, “[Data Walks: An Innovative Way to Share Data with Communities](#)” (Washington, DC: Urban Institute, 2015).

## Looking Forward

Many SRCs are establishing integrated data systems to understand the inner workings of their refugee programs. But that is not the only way to answer the questions that are important to both SRCs and their grantees. Some states are leading the way in other ways, such as by fielding original surveys, developing innovative assessment tools, and working collaboratively with other stakeholders to better understand the health of refugees and other ORR-eligible clients. The next chapter summarizes lessons learned from these kinds of efforts and complements the guidance on using existing ORR data and designing data systems.

**Figure 1: Sample of Downloadable Florida Dashboard**



**Source:** Florida state refugee coordinator (US Department of Health and Human Services, Administration for Children and Families, Office of Refugee Resettlement).

# INNOVATIVE DATA EFFORTS

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In addition to leveraging ORR reporting requirements and moving toward client-centered data systems, some SRCs have pursued higher-investment strategies collect new information or analyze existing data in innovative ways to answer priority questions.

This section highlights some innovative efforts under way across the country to serve as inspiration, pulling out key insights that can inform other data collection efforts.

The four projects highlighted are as follows:

- The RISE Survey, a longitudinal integration survey in Denver
- A refugee case management assessment tool, Utah's effort to track refugee outcomes
- The Colorado Center of Excellence in Refugee Health, which compiles health screening data across the country
- The Refugee Services Annual Survey, Florida's survey effort

## RISE Survey

The Colorado SRC worked with an outside research partner to conduct a four-year longitudinal study of refugee integration in metropolitan Denver between 2011 and 2015, using Wilson-Fish funding to support data collection. The study included 467 people, nearly all adult Burmese, Bhutanese, Somali, and Iraqi refugee arrivals in Denver at the start of the study period. The survey was designed to develop a multifaceted understanding of refugee integration, drawing from a principle existing conceptual framework.<sup>12</sup>

Researchers worked with resettlement providers, who collected the initial surveys with new arrivals. Following intake, annual surveys as well as in-depth interviews and focus groups were conducted by a network of community connectors overseen by a professional project manager. The connectors were earlier refugee arrivals, established community members whose social, linguistic, and cultural knowledge helped them collect data and maintain contact with research participants over time.

The final report, *The Refugee Integration Survey and Evaluation (RISE) Year Five: Final Report* (Lichtenstein et al. 2016), summarizes lessons learned from implementation. These are (1) respecting

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<sup>12</sup>Alastair Ager and Alison Strang, *Indicators of Integration: Final Report*, Development and Practice report 28 (London: Home Office, 2004).

the expertise of the community connectors, (2) maintaining relationships with each connector, and (3) supporting the connectors' sense of ownership in the project. They found that

- integration levels increased throughout the program, though more quickly for younger populations;
- over 90 percent of the cohort was employed by year four of the program; and
- English language proficiency steadily improved among participants.

## INSIGHTS

- ✓ Partnering with outside researchers in your community can amplify your capacity.<sup>13</sup>
- ✓ Consider opportunities to leverage ORR funding streams, with prior approval through the planning and budget process, to finance original research and data collection.
- ✓ If your questions can't be answered using existing data, and if no previously validated data collection tools are available that would capture the data you need, generate new actionable information by designing original surveys, interviews, or other data collection tools.
- ✓ Pairing trained researchers with refugee community members can make information richer and data collection processes more effective.
- ✓ Collecting longitudinal data over an extended period is a major challenge, especially with a mobile population. As time passes, research participants may move away, change their phone numbers, or decline to participate in ongoing data collection. Creating ways to maintain contact over time is critical for success.

## Refugee Case Management Assessment Tool

To better understand how refugees are faring and inform program decisionmaking, Utah has implemented an assessment tool since early 2017, financed by Temporary Assistance for Needy Families and RSS funds, to regularly track outcomes of case management program participants. Utah was motivated by the recognition that the information they were collecting from their grantees was not telling state officials whether existing case management efforts were helping participants successfully integrate. The team decided to change that by beginning to train and require service providers to systematically and regularly collect information on participant outcomes.

The team had to begin by defining desired outcomes, drawing on a conceptual framework of refugee integration, assessing their program goals, and identifying what success would look like from a

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<sup>13</sup> The tip sheet "[5 Steps for Establishing Productive Research Partnerships](#)" (META 2017b) offers additional guidance.

service provider's standpoint. They began with a long list of options and narrowed down the most important goals for a refugee's first two years in the US.

Using a points-based scoring tool model, they operationalized this definition of success with clear, identifiable measures collected through a user-friendly tool, which they trained case management providers to use. The assessment tool collects specific measures to capture seven concepts: employment, housing, education and training, health, community and family support, language and cultural knowledge, and life skills. One example of an outcome in language and cultural skills, for example, is that "refugees are able to speak functional English at a level to obtain employment and resolve practical needs." The tool defines indicators and associated point values for dimensions within each of these concepts. Staff members use an Excel workbook to collect this information, and it automatically computes participant scores overall and for each dimension.

## INSIGHTS

- ✓ Consider what the data you have are able to tell you and where gaps exist.
- ✓ Take the time to identify your program goals and think about how data collection can be better aligned with those goals.
- ✓ Never stop asking for input so you can continually evaluate and improve your program and data efforts. Utah's effort has employed a process of continuous improvement and a spirit of experimentation. The assessment itself, initially implemented quarterly by case managers, will begin being implemented biannually by independent assessors in 2020. Utah will also begin using it not only to track progress but also to assess need and better target case management resources.
- ✓ Make new data collection as accessible as possible and train and support users so they will complete clearly defined processes in a consistent and thoughtful way. Incomplete or low-quality data can compromise the potential for your analysis.
- ✓ Clear documentation and training, with continuous feedback loops, are critical for making sure all users are on the same page and collecting information in a consistent way.

## Colorado Center of Excellence in Refugee Health

Colorado has led a five-year effort funded by the Centers for Disease Control and Prevention to pool refugee screening data in multiple states and jurisdictions and longer-term health data in Colorado. A main project goal is to facilitate the use of refugee health surveillance data to inform state and federal partners in program development and planning, communication about health, and health promotion efforts. Stakeholders can analyze demographics, refugee medical screening timeliness, and refugee medical screening data and use that information to determine the incidence and prevalence of



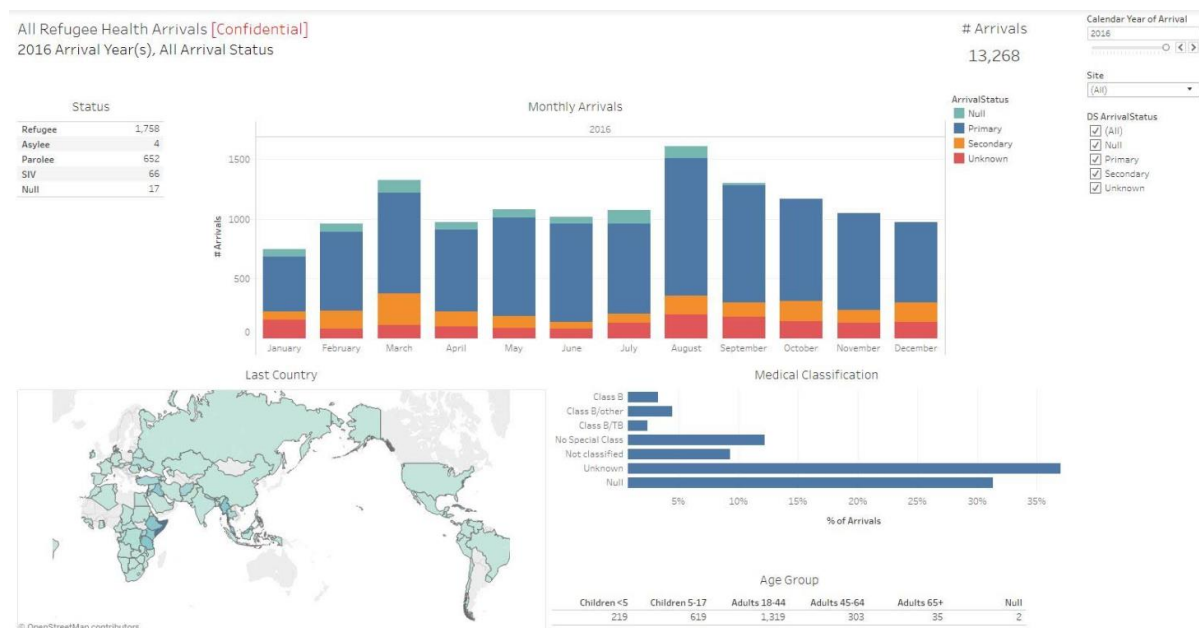
conditions of public health significance, immunization coverage rates, and common diagnoses among refugees (see figure 2 for an example of a data dashboard that might contain these elements).

At the root is coordination between the SRC in the Department of Human Services and the Refugee Health Unit in Colorado's Department of Public Health and Environment. Analysts at Department of Public Health and Environment combine overseas medical examination data from the Centers for Disease Control and Prevention's Electronic Disease Network with domestic refugee health screening data shared by participating partner jurisdictions, manage routine transmissions, deidentify and standardize records, and provide network partners with interactive data visualization dashboards (figure 2). As of 2019, in addition to partners within Colorado, the network included Indiana, Kansas, Minnesota, New Mexico, Tennessee, and Utah; as well as the University of Louisville in Kentucky and Thomas Jefferson University in Pennsylvania.

The effort generates aggregated demographic and health data back to partners, supports federal reporting requirements, and answers queries to respond to questions from stakeholders. Having all the refugee screening data for a jurisdiction in one central repository allows quick answers to questions such as "How many refugees were screened this month and how timely was the screening?," "What health promotion efforts would support the most refugees impacted by commonly identified conditions?," or "What commonly spoken languages should I translate this document to in order to utilize scarce funding to benefit the most clients?" Having these data can empower public health efforts to identify trends and develop stronger programming and data-informed interventions.

To learn more and contact the organizer, visit the website for the [Colorado Center of Excellence in Refugee Health](#).

**Figure 2: Sample Data Visualization Dashboard from Colorado’s Department of Public Health and Environment**



**Source:** Colorado state refugee coordinator (US Department of Health and Human Services, Administration for Children and Families, Office of Refugee Resettlement).

## INSIGHTS

- ✓ Participation in multijurisdictional efforts can compile common data elements and generate broader knowledge to inform stakeholders.
- ✓ Explore partnership with other state agencies to leverage additional capacity and expertise.
- ✓ Consider alternative funding resources that could be used to answer questions of interest to the refugee program. In this case, the Centers for Disease Control and Prevention were instrumental in funding a new resource.
- ✓ Centralized information can be queried to answer common stakeholder questions and avoid repetitive work to generate responses to individual questions.

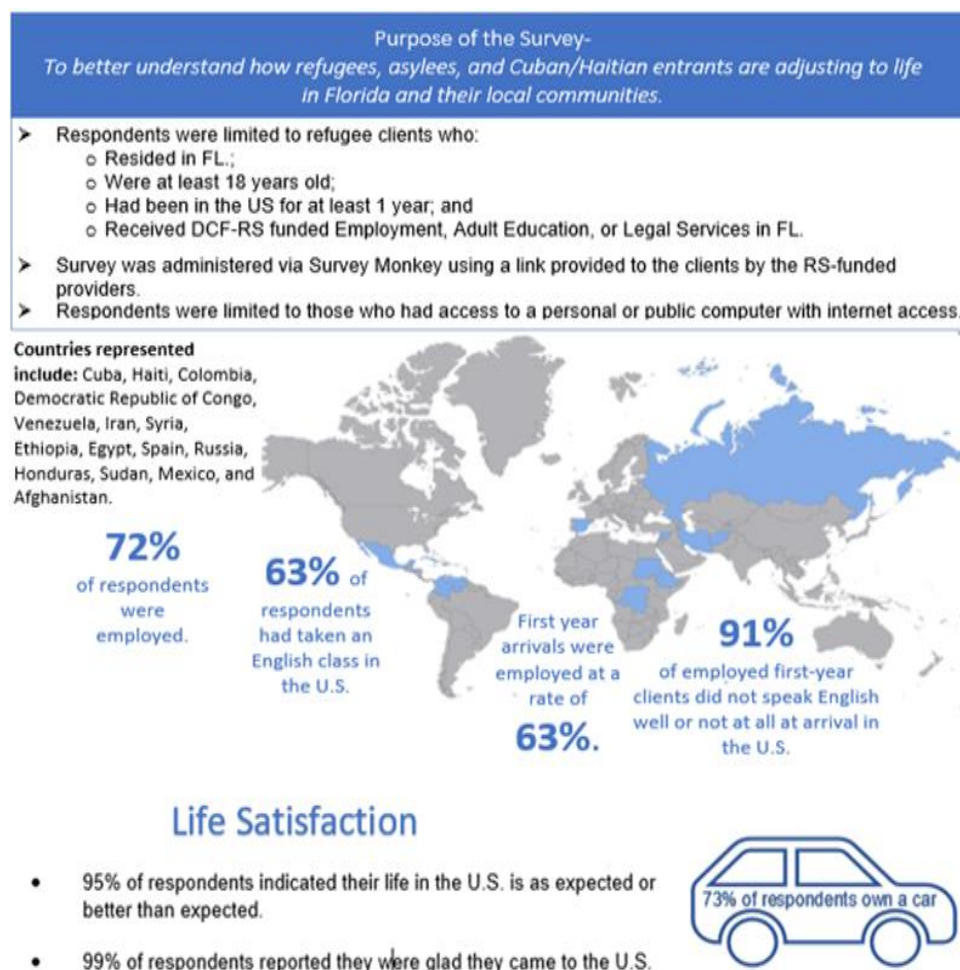
## Refugee Services Annual Survey

The Refugee Services Annual Survey (figure 3) was piloted in 2013 as a survey of recently arrived refugees in Orlando, Florida. SRC staff managed it in coordination with an outside research partner, Covian Consulting, Inc., that administered the survey. During the pilot, from October 2013 to September 2018, surveys were completed by 2,551 recent adult refugee arrivals in three counties. Participants were invited to participate by telephone by trained interviewers. In 2018, the SRC expanded the effort to all regions in the state. Improving on previous efforts, funded providers were

asked to introduce the survey to clients, allowing them to complete the online survey at their convenience with a provided link, or on computers available at the agency. Surveys were collected in English, Spanish, Haitian Creole, French, and Arabic from 1,078 recent adult refugee arrivals who had received employment, adult education, or legal assistance services through Florida Refugee Services.

Survey results on educational attainment, employment and labor force participation, English proficiency, English-language learning program participation, and life satisfaction were compiled in a summary report. The report presented top-line findings and contextualized some results with comparable numbers from the national Annual Survey of Refugees (survey data collected annually by ORR on refugees arriving the previous five years) and census results for the general population.

**Figure 3: 2018 Refugee Services Annual Survey Summary**



**Source:** Colorado state refugee coordinator (US Department of Health and Human Services, Administration for Children and Families, Office of Refugee Resettlement).

## INSIGHTS

- ✓ Work with resettlement providers to respect their primary mission of service provision while taking advantage of their one-on-one contact with participants.
- ✓ Keep in mind that information gathered by providers from their program participants will not capture the broader experiences and needs of unserved refugees.
- ✓ Make data collection accessible for the intended participants and work to overcome barriers such as internet access, limited digital literacy, and language access by providing computer access and assistance on site.
- ✓ Think about including national measures to benchmark and contextualize your state- or local-level data findings, such as the Annual Survey of Refugees results in ORR's Annual Report to Congress. To learn more, see the *Office of Refugee Resettlement Annual Report to Congress 2016*.

# CONCLUSION

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The work of SRCs and their grantees is critical to the people they serve as well as to their states and communities. The work itself is challenging because of the complex needs of refugees and other ORR-eligible clients and the limited resources afforded to address them. However, local providers rise to the challenge and are constantly inventing new ways to support the integration and well-being of our new neighbors.

Building evidence capacity can help support these efforts by promoting a greater understanding of who is served, how services are delivered, and what is working. SRCs looking to strengthen this capacity can follow the examples of their peers to better leverage existing ORR reporting data, construct sound data systems, and use other innovative methods to learn about their programs.

# APPENDIX A. GLOSSARY

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**ORR:** Office of Refugee Resettlement

**RSS:** Refugee Support Services

**SRC:** State Refugee Coordinator

**VLDS:** Virginia Longitudinal Data System

# REFERENCES

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# ABOUT THE AUTHORS

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**Hamutal Bernstein** is a senior research associate in the Income and Benefits Policy Center at the Urban Institute. She has 15 years of experience researching immigrants and refugees and wide expertise in mixed-methods research, including original survey development, secondary data analysis, and qualitative data collection and analysis. At the Urban Institute, she directs the program on Immigrants and Immigration and leads research and on a range of immigration, workforce, and human services issues. She is a principal investigator on the Annual Survey of Refugees and Survey Redesign for the US Department of Health and Human Services. Before joining Urban, Bernstein was a program officer at the German Marshall Fund of the United States, managing public opinion survey research in the United States and Europe. This position followed her work on global and US migration research as a research associate at the Institute for the Study of International Migration at Georgetown University and as a migration consultant to international organizations. She has conducted fieldwork in English and Spanish in the United States and abroad, and she speaks fluent French. Bernstein received her BA in international relations from Brown University and her PhD in government from Georgetown University.

**Molly Scott** is a principal research associate in the Metropolitan Housing and Communities Policy Center at the Urban Institute. For 16 years, Scott has studied Americans' experience of poverty and the effectiveness of programs and policies on the ground. In recent years, her work has focused on identifying the underlying structural issues that impede young people from completing their education, low-income adults from succeeding in the labor market, private-sector firms from adopting “good jobs strategies,” and nonprofits and government agencies from designing and implementing approaches that achieve results. Scott has also collaborated with organizations to use people-centered design to develop new approaches to structural problems, put systems in place to pilot and test these approaches, and disseminate lessons learned to practitioners and policymakers.

**Ian Hecker** is a research assistant in the Income and Benefits Policy Center, where he studies the shifting nature of low- and middle-wage jobs to help understand and replicate effective policies and programs. Hecker's research covers apprenticeship programs, the Workforce Innovation and Opportunity Act, funding mechanisms for supporting skills development, and automation and the future of work. He also supports the Urban Institute's assessment of the JPMorgan Chase & Co. New Skills at Work Initiative, which focuses on improving workers' access to skills and economic opportunity, and



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**Jessica Shakesprere** is a research assistant in the Center on Labor, Human Services, and Population at the Urban Institute. She applies mixed-methods approaches, focusing on evidence in policy and program decisions and place-based initiatives to support low-income working families and marginalized youth. Shakesprere's previous research and organizing experience includes trauma-informed community building, racial and ethnic disparities in economic opportunity, and behavioral insights to mobilize social change. Shakesprere holds a BS in biology and a BA in political science from the Ohio State University, where she graduated with honors and research distinction.