Portfolio Project

Improving Reporting Completeness from 65% to 98%

A reporting-improvement case study with a synthetic supporting workbook

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Tools: Microsoft Excel and Microsoft PowerPoint
Illustrative Period: April–July 2026
Data Classification: Synthetic data for portfolio demonstration

Important Note on Data

The documents a reporting-completeness improvement from 65% to 98%, based on my professional experience. Its supporting workbook uses synthetic data created solely to demonstrate the calculations and reporting methods. The workbook does not contain actual facility-level records.

Executive Summary

Project: Improving Reporting Completeness from 65% to 98%

Reporting completeness increased from approximately 65% to 98% over about three months through routine record updates, reconciliation of database entries against facility registers before submission, staff mentoring, and early reporting of laptop faults to support timely repairs.

These actions helped address reporting gaps, improve data quality, and support more complete and timely reporting. The accompanying workbook uses synthetic data to illustrate the calculations and reporting methods behind the improvement; it does not contain actual facility-level records.

Project at a Glance

Item	Detail
Project	Improving Reporting Completeness
Achievement	Reporting completeness increased from approximately 65% to 98% over about three months.
Focus Areas	Routine record updates, database-to-register reconciliation, staff mentoring, and early reporting of laptop faults.
Tools	Microsoft Excel for data cleaning, formulas, summaries, and charts; Microsoft PowerPoint for presenting findings.
Data Status	Synthetic workbook created to illustrate the calculations and reporting methods.
Key Outcome	Improved reporting completeness and more reliable reporting processes.

1. The Problem

Routine reports from supported facilities were frequently missing or submitted late. At the start of the improvement effort, reporting completeness was approximately 65%, meaning that only about two-thirds of expected reports had been received. This limited the availability of complete programme data and made it difficult to identify reporting gaps early and plan follow-up activities effectively.

2. Objective

Increase reporting completeness from approximately 65% to at least 95% within about three months by identifying and addressing the causes of missing reports at facility level, strengthening routine reporting practices, and improving follow-up on outstanding submissions.

3. Data and How I Measured It

The supporting workbook uses synthetic data created to illustrate the reporting-completeness improvement achieved in my professional work. It contains 50 fictional facilities, each expected to submit two reports per month: an ART summary and a viral load summary. This gives a total of 100 expected reports per month.

The workbook covers four months: April 2026 as the baseline month and May to July 2026 as the three-month improvement period. Each missing report is assigned one recorded cause to illustrate how reporting gaps can be investigated.

Measurement: Reporting completeness was calculated as the number of reports received divided by the total number of reports expected, multiplied by 100.

Formula: Reporting Completeness (%) = (Reports Received ÷ Reports Expected) × 100

Facility_ID	Report_Type	Reporting_Month	Expected	Received	Missing_Cause
FAC001	ART_SUMMARY	2026-04	1	1	
FAC001	VL_SUMMARY	2026-04	1	1	
FAC002	ART_SUMMARY	2026-04	1	0	Register not updated on time
FAC002	VL_SUMMARY	2026-04	1	1	
FAC003	ART_SUMMARY	2026-04	1	1	
FAC003	VL_SUMMARY	2026-04	1	1	
FAC004	ART_SUMMARY	2026-04	1	0	Faulty equipment (late data entry)
FAC004	VL_SUMMARY	2026-04	1	0	Poor reconciliation before reporting
FAC005	ART_SUMMARY	2026-04	1	1	
FAC005	VL_SUMMARY	2026-04	1	1	
FAC006	ART_SUMMARY	2026-04	1	1	
FAC006	VL_SUMMARY	2026-04	1	1	
FAC007	ART_SUMMARY	2026-04	1	0	Poor reconciliation before reporting
FAC007	VL_SUMMARY	2026-04	1	0	Register not updated on time
FAC008	ART_SUMMARY	2026-04	1	1	

Figure 1. The Completeness_Data worksheet showing sample records. Each row represents a facility, report type, and reporting month, with a recorded cause for each missing report. All data shown are synthetic.

4. Why Reports Were Missing

The following causes were used to illustrate common reporting challenges and the areas requiring corrective action.

Cause	What it looked like
Poor reconciliation before reporting	Reports were submitted before database entries were checked against facility registers, allowing discrepancies to remain unresolved.
Register not updated on time	Routine records were not updated promptly, delaying the availability of information needed to prepare reports.
Faulty equipment affecting data entry	Laptop problems disrupted data entry and delayed database updates and report preparation.

5. What I Did

The improvement effort focused on strengthening routine reporting habits, addressing barriers to timely data entry, and following up on missing reports rather than simply correcting individual submissions.

Action	Cause it addressed
Mentored facility data staff to update records routinely instead of allowing backlogs to accumulate until month-end.	Register not updated on time
Guided staff to reconcile database entries against facility registers and confirm that updates were complete before report submission.	Poor reconciliation before reporting
Encouraged staff to report laptop faults as soon as they occurred and escalated reported issues to IT for timely resolution.	Faulty equipment affecting data entry
Followed up on missing reports with facility focal persons, documented the reasons for non-submission, and identified the appropriate follow-up action.	All identified causes
Mentored facility data staff to update records routinely instead of allowing backlogs to accumulate until month-end.	Register not updated on time

Action_ID	Action	Root cause addressed	Started	Who	How it was followed up
A1	Mentored facility data staff to update records routinely instead of letting work pile up until month end.	Register not updated on time	2026-05	Mentor and facility focal person	Checked progress at each monthly visit or call.
A2	Mentored staff to reconcile the database with the registers and confirm all updates before submitting the report.	Poor reconciliation before reporting	2026-05	Mentor and facility data staff	Asked staff to confirm reconciliation before each submission.
A3	Asked staff to tell the mentor at the first sign of a laptop fault. IT repaired faults quickly.	Faulty equipment (late data entry)	2026-05	Facility focal person and IT support	Faults tracked until repaired.
A4	Followed up every missing report with the facility focal person and recorded the cause.	All causes	2026-05	Mentor	Missing reports and causes reviewed every month.

Figure 2. The Interventions worksheet links each improvement action to the reporting problem it was designed to address. The workbook uses synthetic data for demonstration.

6. How Progress Was Tracked

Reporting completeness was calculated each month for every facility and report type. Missing reports were grouped by recorded cause to identify recurring problems and guide follow-up.

The number of facilities with at least one missing report was also tracked each month. Facility focal persons were contacted about outstanding reports, and recurring reporting challenges were discussed to identify appropriate corrective actions.

7. Results

The synthetic workbook illustrates the reported improvement in reporting completeness over three months.

Phase	Month	Expected	Received	Completeness	Facilities with a gap
Baseline	2026-04	100	65	65%	26
Month 1	2026-05	100	80	80%	19
Month 2	2026-06	100	91	91%	9
Month 3	2026-07	100	98	98%	2

Reporting completeness increased by 33 percentage points, from 65% at baseline to 98% by the third month. The number of missing reports fell from 35 to 2, representing a reduction of approximately 94%.

Target completeness	95%	*(assumption)*					
A. Completeness by month							
Phase	**Month**	**Expected**	**Received**	**Missing**	**Completeness**	**Facilities with a gap**	**Target met?**
Baseline	2026-04	100	65	35	65%	26	No
Month 1	2026-05	100	80	20	80%	19	No
Month 2	2026-06	100	91	9	91%	9	No
Month 3	2026-07	100	98	2	98%	2	Yes
Change (percentage points)					**33**		
B. Missing reports by root cause							
Root cause	**2026-04**	**2026-05**	**2026-06**	**2026-07**	**Change, baseline to month 3**		
Poor reconciliation before reporting	12	8	4	1	-11		
Register not updated on time	10	6	2	0	-10		
Faulty equipment (late data entry)	13	6	3	1	-12		
All causes	**35**	**20**	**9**	**2**	**-33**		
Check: total by cause should equal missing reports in table A.					*OK*		

Figure 3. The Summary worksheet showing monthly reporting completeness and missing reports by cause. Synthetic data.

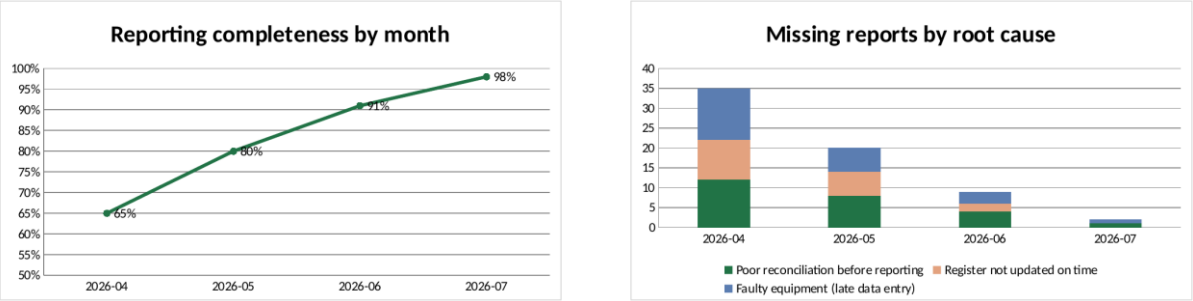


Figure 4. Completeness rose each month, and missing reports fell for every cause (synthetic data).

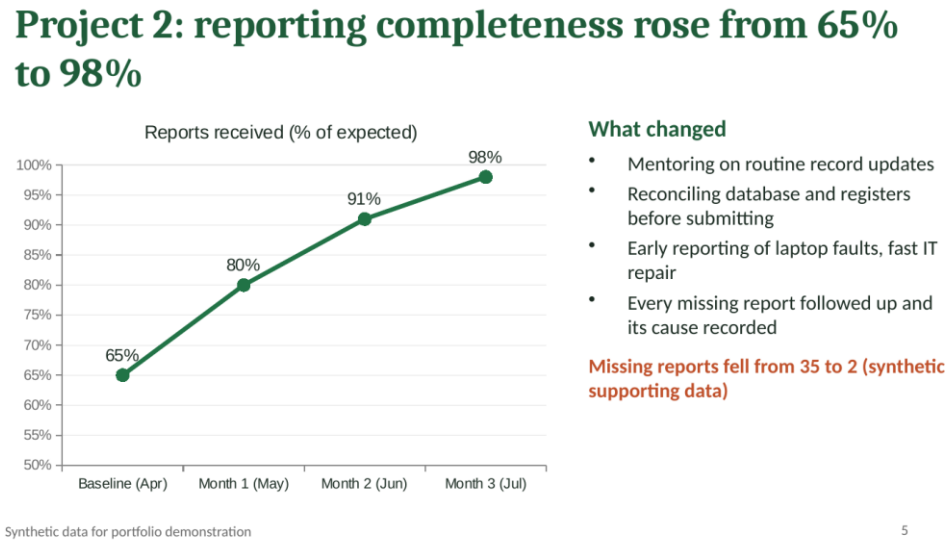


Figure 5. PowerPoint presentation summarising the project findings and recommendations.

8. Key Lessons

- Routine updates prevent backlogs. Consistent mentoring helps staff maintain records throughout the month instead of rushing at reporting deadlines.
- Reconciliation catches gaps early. Checking database entries against facility registers before submission helps identify missing updates and discrepancies.
- Equipment support matters. Promptly reporting and resolving laptop faults can reduce barriers to timely data entry.
- Root-cause tracking improves follow-up. Recording why reports are missing helps teams target support to the specific problem rather than relying only on general reminders.

9. Scope and Limitations

- The increase in reporting completeness from approximately 65% to 98% is a reported outcome from my professional experience. The supporting workbook uses synthetic data to illustrate the calculations and reporting methods; it is not the original programme dataset.
- Reporting completeness is distinct from reporting timeliness and data accuracy. This project does not claim that either measure improved as a result of the intervention.

- Facility codes, monthly report counts, cause classifications, and facility-level gap counts in the workbook are illustrative and should not be interpreted as actual facility-level results.
- The synthetic analysis demonstrates a possible approach to monitoring reporting completeness and investigating missing reports. It does not independently verify the real-world outcome or establish that each intervention caused the improvement.

Skills Demonstrated

- **Microsoft Excel:** Formulas, including SUMIFS and COUNTIFS; data validation; conditional formatting; summaries; and charts.
- **Microsoft PowerPoint:** Presenting findings and recommendations clearly for programme teams.
- **Root-cause analysis:** Categorising missing reports and identifying areas requiring corrective action.
- **Data quality improvement:** Supporting routine updates and reconciliation of database entries against facility registers.
- **Mentoring and supportive follow-up:** Working with facility data staff and focal persons to address reporting gaps.
- **Performance monitoring:** Tracking monthly progress and identifying outstanding reporting gaps.