

DEPARTMENT OF ECONOMIC OPPORTUNITY CareerSource Capital Region (CSCR) LWDB 5 Preliminary Review Summary February 24 – March 3, 2020

WELFARE TRANSITION (WT) PROGRAM

General Comment

During the review of participant case files, several case files were left in an open WT activity for an extended period of time without any services being provided. However, program staff were able to update/close the cases to resolve this issue and is reminded when services and activities have been completed and/or are no longer being provided, program staff must ensure the activities are closed out in a timely manner.

Participant Case File Review

A total of 38 participant case files were reviewed.

	2019-2020 Monitoring Results										
Workforce Program	Issue	Applicable Reference	Prior Year Finding	Current Year Finding	Prior Year ONI	Current Year ONI	Observation	Recommendation			
WT / TANF	1. There was an instance where a safety plan was not developed with a participant.	Domestic Violence Guidance AWI F G 02-026 and Relocation Guidance AWI FG 01-023.	N	Y	N/A	N/A	N/A	The LWDB program staff must develop a safety plan for all participants that disclose they are victims of domestic violence. Staff must ensure barriers to self-sufficiency are addressed and outlining the steps to help keep the family safe.			
	2.The following issues were identified for the Individual Responsibility Plan(IRP)/Alternative Requirement Plan (ARP):	45 CFR 261.11, TANF State Plan, 445.024(F.S.), Memorandum dated October 22, 2014- Initial Assessments (IAs), Florida's	N	Y	N/A	N/A	N/A	LWDB staff must ensure that the IRP is completed within 30 days of the case becoming mandatory and/or as soon as the participant is assigned to an activity. Additionally, LWDB staff must ensure that all IRPs include all required components and are completed in OSST. Staff must also			

 There was an instance where an IRP was missing in a participant case file. There were a couple instances where the IRPs did not include all three required elements (employment goals, assigned weekly activities, and services provided to participants. A participant was assigned to more than 40 hrs./wk. in activities. (NOTE: ONI) 	Work Verification Plan, Individual Responsibility Plans (IRPs) and Alternative Requirement Plans (ARPs), entered in One Stop Service Tracking (OSST) System.						ensure that participants are not assigned to more than 40 hours per week in activities.
 3.The following issues were identified for the pre-penalty and sanction process: A couple participants were not notified of what they were required to do prior to initiating the pre-penalty. There was no evidence of a verbal attempt to contact and/or counsel a couple of participants during the 10-day counseling period when a prepenalty was initiated. There were delays in requesting several penalties and sanctions. Also, the 2292 form was mailed and a second failure within 30 days had not occurred. (NOTE: Observations) 	45 CFR 261.14, 414.065 (F.S.), 65A-4.205, Florida Administrative Code, and FG 03- 037.	Y	Y	N/A	N/A	N/A	LWDB staff must ensure that participants are notified of their program requirements by providing an appointment letter and/or specifying program requirements on the IRP. LWDB staff must also ensure that an attempt to contact the participant during the 10-day counseling period is conducted and case notes are entered in OSST. The reviewer must be able to determine that the participant was counseled regarding the failure if the penalty is ended with complied or other during the 10-day period. LWDB staff must ensure that the DEO WTP-2292 form is mailed and retained in the participant case file when two failures within 30 days occur. Additionally, penalties must be initiated and requested when

								participants are noncompliant with program requirements.
	4.Documentation retained in a participant case file did not support JPR hours reported to the Department of Children and Families or Health and Human Services.	F.S. 445.010, 45CFR 261.60-62, 45CFR 262, and Florida's Work Verification Plan.	Y	Y	N/A	N/A	N/A	The LWDB must ensure that documentation or other forms of allowable verification as described in the approved Work Verification Plan are retained in the participant case file and auditable.
	 5.The following issues were identified for the transitional process: A couple of participant case files did not contain the required eligibility documentation to support continuous transitional services being provided. Transitional services were not ended in a timely manner. 	445.028-32, 445.025 F.S., F.S., 65A-4.218 and Transitional Childcare Guidance. TANF State Plan 2017- 2020.	N	Y	N/A	N/A	N/A	Program staff must ensure that transitional eligibility documentation is secured and retained in the participant's case file. Individuals receiving TCC should be required to provide documentation of continued employment on a monthly basis as specified in local operating procedures. Additionally, program staff must ensure that documentation is retained in participant case files verifying any support services received. (NOTE: This is a possible disallowed cost.)
	6. A 90-day follow-up was not conducted to determine if the family relocated to the agreed upon community within 90 days of receipt of relocation assistance.	445.021 F.S., FG 01- 023.	N	Y	N/A	N/A	N/A	LWDB staff must conduct a 90-day follow-up to ensure the family relocates. If fraud is suspected, staff must notify the DCF ESS so the benefit recovery repayment process can be initiated.
	7. There were a couple instances where the employment verification dates, per the employment documentation in the case files, did not match the dates entered in the One- Stop Tracking System (OSST).	445.010 (f) F.S.	N/A	N/A	Y	Y	N/A	LWDB staff must ensure that employment documentation (employment verification form/telephone verification form/OSST case notes) matches the information entered into the OSST system.
Totals			2	6	1	1	0	

SUPPLEMENTAL NUTRITION ASSISTANCE EDUCATION AND TRAINING PROGRAM (SNAP E&T)

General Comment

A review of the LWDB's local operating processes and practices revealed that the LWDB has policies and procedures in place for conducting their local SNAP E&T program. CSCR maintains an oversight and quality assurance process that examines programmatic operations and practices. Copies of local monitoring procedures and reports were provided to DEO monitors to support the LWDB's monitoring activities.

Participant Case File Review

A total of 37 participant case files were reviewed.

Case files reviewed contained documentation of eligibility and other case management elements, and participant data recorded in OSST was determined to have been correctly entered based on case file documentation requirements in sample files reviewed except for the following:

	2019-2020 Monitoring Results										
Workforce	Issue	Applicable	Prior	Current	Prior	Current	Observation	Recommendation			
Program		Reference	Year	Year	Year	Year ONI					
			Finding	Finding	ONI						
Supplemental	1. A few case files were	State Plan; 7 CFR	N	Y	N/A	N/A	N/A	LWDB staff must ensure that they			
Nutrition	missing documentation to	<u>273.7.</u>						accurately count and verify the			
Assistance	support JPR hours entered in							hours before entering any			
Education and	OSST.							information in OSST and that			
Training								timesheets used to support the			
Program (SNAP								hours are maintained in the			
E&T)								participant case files.			
	2. A few participants did not	State Plan; 7 CFR	Υ	Y	N/A	N/A	N/A	LWDB staff must request a			
	have a noncompliance	<u>273.7.</u>						noncompliance for participants			
	requested when warranted for							who fail to complete the assigned			
	failure to meet the mandatory							hours per month to ensure they			
	work assignments.							are not receiving benefits they			
								are not eligible for. Recommend			
								refresher training.			
	3. Initial Engagement:	CFR 273.7; 7 CFR	N	Y	N/A	N/A	N/A	LWDB staff must engage			
	 A participant was not 	273.24(a)(1)(i)						participants during Initial			
	engaged in orientation	and the SNAP						Engagement process and ensure			

	and assessment in accordance with the State Plan. No 590-code within the last 12 months. There were several instances where participants did not have their initial appointment 590-status code ended timely (i.e. within 2-days).	State Plan. Memo dated January 5, 2017.			21/0	21/0		that the initial appointment status (590 code) is ended within two business days of completion of the appointment or no-show.
	 4. JPRS: A participant was not assigned to 80 hours in required components. A participant was assigned to more than 120 in JPR activities in combination with employment. A few participants were engaged in job search activities in more than 12 consecutive months. 	7 CFR 273.7(m) (3)(v)(A) and the SNAP State Plan.	N	Y	N/A	N/A	N/A	These could result in potential questioned costs for overpayment of food assistance benefits to an individual who should have been sanctioned for not meeting participation requirements. LWDB staff must ensure staff accurately counts, verifies and enters hours correctly into OSST. Lastly, DEO recommends LWDB staff set a case-to-do alert when a participant nears the 365-day job search limitation and training.
	5. There was an instance of job search training for Jan. 2019 was documented on Community Service and work experience timesheet.		N/A	N/A	N/A	N/A	Y	LWDB staff must ensure the appropriate JPR activity form is used for documenting JPR activities.
Totals			1	4	0	0	1	

COLLECTION OF DEMOGRAPHIC DATA

The Demographic Process review tool was used to gather information about CSCR's practice of collecting demographic information. Staff indicated CSCR collects demographic information when jobseekers register via Employ Florida. The system screen shot submitted did include a statement informing customers that providing demographic information is voluntary and is kept confidential as provided by law. It is recommended CSCR update its LOPs to detail their collection practices.

FINANCIAL DISCLOSURE

In reviewing the Financial Disclosure Process Tool, CSCR board members have filed their Financial Form 1F with the appropriate entity. There were board members listed on the Florida Commission of Ethics site but not listed on the CSCR's website. The region attested that the update will be reflected during the next Ethic Commission portal update period, scheduled for January 1, 2021. LWDB has posted all board meeting minutes to their website. No issues were found.

WORKFORCE INNOVATION AND OPPORTUNITY ACT (WIOA)

ADULT AND DISLOCATED WORKER PROGRAM

Participant Case File Review

A total of 27 participant case files, (23 Adults and 4 Dislocated Workers) were reviewed.

The review did not reveal any Findings, Other Noncompliance Issues or Observations.

WIOA YOUTH PROGRAM

Participant Case File Review

A total of 13 out-of-school youth participant case files were reviewed.

	2019-2020 Monitoring Results												
Workforce	Issue	Applicable	Prior Year	Current	Prior Year Other	Current Year	Observat	Recommendation					
Program		Reference	Finding	Year Finding	Noncompliance	Other	ion						
					Issue	Noncompliance							
						Issue							

Workforce Innovation and Opportunity Act (WIOA) Youth Program	1. In a few instances, measurable skill gains (MSG) were not recorded in the applicable program year in which the participant was enrolled in an educational or training program.	22 CFR Part 677.155 (a)(v), WIOA Sec. 116 and TEGL 10-16 Change 1.	N/A	N/A	Υ	Y	N/A	The LWDB must review active participant case files and ensure MSGs are captured and recorded by the end of each applicable program year.
	2. Multiple youth barriers were recorded for one participant. However, documentation to support the BSD barrier was not found in the participant case file.	WIOA Sec. 3(24), WIOA Sec. 129 (a)(1), 20 CFR 681.210-240; and Local Workforce Services Plan, Special Project Contract and Data Validation.	N/A	N/A	N/A	N/A	Y	Only one barrier is needed for purposes of eligibility. However, when multiple barriers are recorded each barrier must be documented for data validation purposes.
Totals			0	0	1	1	1	

SPECIAL PROJECTS

• Hurricane Michael- 5 participant case files

The review did not reveal any Findings, Other Noncompliance Issues or Observations.

WAGNER-PEYSER (WP) PROGRAM

Participant Case File Review

A total of 68 (30 job seekers, 20 job orders, 15 placements, and three PREP) case files were reviewed.

	2019-2020 Monitoring Results										
Workforce	Issue	Applicable	Prior	Current	Prior	Current	Observation	Recommendation			
Program		Reference	Year	Year	Year	Year					
			Finding	Finding	ONI	ONI					
Wagner-	1. Multiple job orders with a	Fair Labor	Υ	Υ	N/A	N/A	N/A	For job orders listed at or below			
Peyser (WP)	wage rate listed below	Standards Act/FL						minimum wage, staff must ensure			
	minimum wage did not have a	<u>Statutes - Title</u>						they verify and document that the			

do th le.	ase note on the job orders ocumenting staff verification nat the employer will pay at east the Florida Minimum Vage rate.	XXXI Labor Section 448.01; DEO AP 099.						employer wage rate for the position is at or above the Florida minimum wage (unless exempt). Documentation must be recorded as a case note on the job order in Employ Florida.
pr Flo no se No fir	A couple of MSFWs were not roperly coded in Employ lorida. Another MSFW was ot referred to supportive ervices. Note: Prior year issue was nding for lack of supportive ervices.	20 CFR 653.103(a), 20 CFR 651.10; DEO FG 03-040; MSFW Desk Aid.	Y	Y	N/A	N/A	N/A	The LWDB staff must ensure all new and returning MSFW job seekers are properly identified and coded in Employ Florida. Prior to entering a service which initiates participation, the LWDB staff must ensure the MSFW is coded correctly. The MSFWs application must identify a sufficient work history in farm work in Employ Florida or in case notes to verify MSFW status. Staff must also ensure all MSFWs receive a referral to a supportive service and the service is documented and coded in Employ Florida.
pr	. A veteran was not provided riority of service (POS) iformation.	20 CFR Part 1010; DEO AP 096 (rev. 5/24/2019); and State Veterans Program Plan of Service.	N	Y	N/A	N/A	N/A	Staff must ensure that veterans receive information regarding POS each time a new WP application is opened in Employ Florida. Additionally, each POS provided must be recorded in Employ Florida with a code 089 or 189.
Er re di do cr Fli jo th	A few job seekers with an imploy Florida staff-entered egistration after 5/24/2019 id not have a case note ocumenting permission to reate the account in Employ lorida. Additionally, several ob seekers received services nat initiated participation rior to completion of a full egistration.	20 CFR 652.207, 652.3, DEO AP 096 (rev. 5/24/2019).	N/A	Y	N/A	N/A	N/A	LWDB staff must ensure when registering individuals in Employ Florida, job seeker permission is documented in a case note on the job seeker's Employ Florida account. Additionally, the LWDB must ensure a full registration (including assignment of an O*NET and either completion of the background wizard or entry of a resume) is completed prior to

							providing a service that initiates participation.
5. A job seeker received a service (code 116) triggering participation when case not documentation identified the service as information only. Additionally, several other juscekers had staff-assisted services entered in Employ Florida which did not have a of the required elements of documentation for the services and approximately appro	DEO; Employ Florida Service Code Guide.	N/A	Y	N/A	N/A	N/A	The LWDB staff must ensure that the staff-assisted service entered in Employ Florida meets the requirements of the service from the Employ Florida code guide as well as the definition of a participation triggering service or extending service.
code entries. 6. LWDB staff did not reque permission to create staff-referrals for a few job seeke to job orders after 5/24/201	DEO AP-099 ers <u>(revised</u>	N/A	Y	Y	N/A	N/A	The LWDB must ensure that staff obtain and document permission prior to referring a job seeker to a job order.
Additionally, a few job seeke with a staff-referral and placement for a job order in Employ Florida did not meet the minimum job qualification specified in the job order. Note: Previous year issue we an ONI for unqualified referrals.	t ons						The LWDB must also remind staff that prior to referring a job seeker to a job, the job order must be adequately reviewed by staff to ensure that the job seeker meets the minimum job qualifications as specified on the job order. Additionally, staff need to encourage job seekers to complete applications to help better match their skills, education, and strengths to the correct job orders.
7. A post-exit manually obtained employment (code 882) was incorrectly recorde as manually obtained employment (code 880).		N/A	N/A	N	Y	N/A	Manual obtained employments must be accurately recorded in Employ Florida using code 880 for recording employments prior to exit and code 882 for post-exit.
8. Current local operating procedures (LOPs) contain directions regarding changir the number of open position		N/A	N/A	N/A	Y	N/A	Staff must ensure the number of open positions on job orders entered by staff into Employ Florida matches the desired

Totals			3	7	1	2	0	Seattle Seattl
	Employ Florida was missing documentation to support the service.	CFR 678.430; FL Administrative Rule 73B-11.028; Employ Florida Service Code Guide.						assessments are documented and evaluate/summarize the employment history, education, interests and skills that result in the identification of employment goals, barriers to employment and services needed to obtain goals.
PREP	in Employ Florida to match the number of positions filled. Note: The LWDB quoted DEO staff in the procedure, indicating that the decision was a local policy decision; however, the LWDB was unable to verify who provided the information from DEO. 9. An assessment entered in	20 CFR 651.10; 20	Y	Y	N/A	N/A	N/A	number of positions to be filled by the employer. The number of positions must not be changed to match the number of placements and/or referrals by LWDB staff. LOPs must be amended or updated to match compliance requirements. Staff must assure that

CAREER CENTER CREDENTIALING

A Career Center Credentialing review was conducted to determine compliance with program guidance. The methodology for conducting the review will include self-certification by the LWDB that the following credentialing requirements had been met for the review period at each of the career center locations in the LWDA (posters, signage and resource room verification). All other administrative requirements and records (listing of front-line staff, continuing education hours attained, complaint system information, etc.) were reviewed by the monitor.

The monitor also reviewed the administrative documents provided to determine whether all "front-line" staff members had completed their required Tier I Certification courses and the 15 hours of continuing education courses in related subjects. As part of the credentialing process, the monitor reviewed the LWDB's complaint system to ensure that a system is in place to process any Wagner-Peyser complaints received. No issues were observed.

MANAGEMENT INFORMATION SYSTEMS (MIS)

The LWDB appears to have policies and procedures in place to ensure that individuals who are no longer employed in the LWDB are promptly removed from having access to the MIS. The LWDB provided an up-to-date listing of all MIS users during the review period who have had their status revoked. The monitor matched the names of terminated users on the LWDB 's list with user staff accounts maintained by DEO's Internal Security Unit (ISU) to determine whether any of those individuals still had access to the system and/or if their privileges had been revoked. According to the LWDB, a review of all staff access to systems is performed whenever a change in personnel is performed. Additionally, the MIS security forms are maintained electronically or in hard (paper) copy form in a secure location.

The LWDB had documentation to provide support to the policies and procedures ensuring a background screening was conducted for all new staff (Board, contractor, or provider) hired during the review period. Additionally, the LWDB provided documentation that all newly hired staff completed Individual Non-Disclosure and Confidentiality Certification forms. No issues were observed.