

# SC WORKS

## PEE DEE

**PEE DEE LWDA INSTRUCTION NUMBER: 20-002**

**TO:** Pee Dee Local Workforce Innovation and Opportunity Area  
Contractors

**SUBJECT:** Monitoring Guide for Program Year 2020

**ISSUANCE DATE:** October 12, 2020

**EFFECTIVE DATE:** October 12, 2020

**EXPIRATION DATE:** Indefinite

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**Purpose:** The purpose of this instruction is to transmit the Pee Dee Local Workforce Development Area's monitoring guide for contracts administered by the Pee Dee Regional Council of Government under the oversight of the Pee Dee Workforce Development Board.

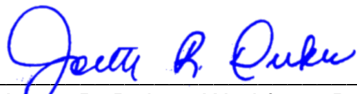
**Background:** In compliance with the Workforce Innovation and Opportunity Act (WVIOA), Section 185(c) (3) and WIOA Regulations, Section 683.410, the Pee Dee LWDA will monitor all recipients of financial assistance under the Workforce Innovation and Opportunity Act (WIOA).

**Policy:** In order to ensure that programs are operating in accordance with the federal statutes and regulations, state policies, local workforce development area instructions, and contract requirements, the local workforce development area (LWDA) will monitor programs, services, and administrative and financial procedures in accordance with the attached monitoring guide.

**Action:** Contractors are required to:

- Transmit this monitoring guide to all staff who may be involved in monitoring, operating, or overseeing programs and services.
- Complete designated sections of the monitoring guide and return it to the LWDA's workforce office at least one week prior to the scheduled on-site visit.
- Design and implement internal monitoring systems.

**Inquiries:** Questions regarding this instruction should be directed to the attention of Teresa Jacobs, Workforce Development Specialist.



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Joette R. Dukes, Workforce Development Director

## PEE DEE LOCAL WORKFORCE DEVELOPMENT AREA (LWDA) MONITORING GUIDE

### I. MONITORING POLICY

#### A. Purpose

The purpose of the monitoring is to assist contractors in reaching the desired goals that lead to program efficiency and effectiveness and to comply with the federal statutes and regulations, state policies, local workforce development area instructions, and contract requirements. The local workforce development area (LWDA) will monitor programs, services, and administrative and financial procedures in accordance with the attached monitoring guide.

#### B. Objective

Monitoring is a primary tool for the identification of strengths and weaknesses in the operation of programs and delivery of services at the contractor level. Monitoring will be performed by local workforce development area (LWDA) staff, Workforce Development Board (WDB) members, and others involved in the oversight responsibility of the programs.

#### C. Procedures

Monitoring will begin as soon as the contract is fully executed and will be on-going. All areas of this guide that are applicable to a contract will be completed during the contract period. The monitoring review will cover all aspects of each contractor's operation and will be conducted through desktop evaluation, on-site evaluation, or through a combination of these two processes.

Unless otherwise specified in this document or in written correspondence sent to the contractor, all programmatic monitoring activities, including the participant file review, will be conducted through a combination of on-site as well as off-site review. The desk-top, participant file review, performance, and selected financial reviews may be conducted as desk-top reviews.

##### 1. Desk-Top Review

A desk-top review will be conducted by the monitor to gather and analyze data for various purposes, including follow-up and investigations. The desk-top review may consist of the following:

- Participant files
- Contractor's documentation on file at the LWDA
- Contract and subsequent modifications
- Financial reports and supporting documentation
- SC Works Online Services participant and performance data
- The Act and Regulations
- Various specialized programmatic and financial reports, including, but not limited to, monthly financial status reports, status of funds reports, and request for payment invoices. Timeliness of submission will also be evaluated in the review of these and other reports.
- WIOA Ad Hoc Reports in accordance with the most recently issued LWDA instructions.

##### 2. On-Site Review

On-site reviews will be conducted at the contractor's site and may be performed during a monitoring visit, when providing technical assistance, or when conducting an investigation. On-site monitoring may consist of the following:

- Participant files, if applicable
- Interviews of contractor staff, participants, training site supervisors, and/or instructors
- Review of program and financial records
- Observation of training facilities, instruction, etc.
- Inventory of property

At least one (1) visit to the contractor's office/training site will be made during the contract period.

Announced and unannounced monitoring visits may be conducted. Primarily announced visits will be made when the monitoring requires staff input.

At the beginning of each funding year, the Pee Dee LWDA will develop a monitoring schedule. The contractor will be notified by letter prior to the announced on-site visit.

An exit meeting will be conducted with the Project Director and contractor staff. The exit conference will be conducted to discuss accomplishments and to initiate corrective action, as required, without waiting for the written monitoring report. This also provides an opportunity for exchanging additional information, comments, and explanations.

A monitoring file will be established and will include:

1. The applicable sections of the monitoring guide.
2. A letter to the contractor's signatory official summarizing the accomplishments and corrective action required, including a deadline date for the contractor's response in regard to the corrective action plan.
3. A response from the contractor, particularly when corrective action is required.
4. Documentation of follow-up by the LWDA staff to ensure corrective action implementation, if necessary.

An official report will be written and forwarded to the signatory official within thirty (30) business days of the on-site visit. The report will identify any deficiencies noted as a result of the monitoring, as well as outstanding areas of operation and program accomplishment.

The letter transmitting the report will:

1. Request a response and corrective action plan within fifteen (15) business days of the date of the transmittal letter, if deficiencies are noted, or
2. Advise the contractor that there were no deficiencies noted.

The Pee Dee LWDA will review the response and notify the contractor of its decision within thirty (30) business days of the date of the response.

- If the response is satisfactory, the contractor will be notified that no further action is required, aside from implementation of the corrective action plan.
- If the proposed corrective action plan is deemed unsatisfactory, the contractor will be so notified and asked to submit a revised corrective action plan within ten (10) business days of the date of the transmittal letter.

The revised corrective action plan will be reviewed, and the contractor will be notified of a disposition within fifteen (15) business days of the date of the response.

Failure of any contractor to respond within the established time period will automatically trigger sanctions.

If necessary, the Pee Dee LWDA will conduct a follow-up review within ninety (90) business days of the date of the final disposition. Additional follow-up reviews may be conducted on an as-needed basis, depending on the Contractor's response and may include site visits.

*D. Types of Monitoring and Frequency*

**The Administrative, Program Specific, Equal Opportunity, and Financial** monitoring sections of this monitoring guide will be accomplished as an on-going process to be completed by the end of the contract period.

**Performance Monitoring**, done at least quarterly, will allow a more frequent review of documents reflecting performance and may or may not be so structured as to require "formal" reports to be written. Contractors will be required to provide corrective action plans for areas of deficiency noted during the quarterly performance reviews.

**Equal Opportunity Monitoring** will be conducted on an ongoing basis by the Pee Dee LWDA to ensure compliance with equal opportunity requirements. A formal review/self- assessment will be conducted as least annually.

The LWDA reserves the right to contract with independent organizations that conduct accessibility reviews in lieu of staff-conducted reviews.

**Financial and Property Monitoring** will be conducted at least once annually.

**Data Validation Monitoring** will be conducted at least once annually in conjunction with the programmatic monitoring. Contractors must ensure that all data elements requiring documentation are supported by the sources outlined in the Data Element Validation Guide.

*E. WDB Review*

Monitoring reports will be issued to the WDB Executive to assist them in their oversight responsibilities and in their planning for future programs.

*F. Pre-Award Survey*

Before any new contracts can be awarded, a pre-award survey will be conducted to assure that the proposed contractor has the administrative and financial capabilities to administer a contract. Pee Dee LWIA Instruction #17-005, Pre-Award Survey, further outlines the procedures governing the pre-award survey.

## II. PRELIMINARY PROGRAMMATIC DESK REVIEW

Prior to going on-site, a preliminary desk review is to be conducted to increase efficiency while at the site. This section should be completed by the monitoring team that conducts the programmatic monitoring visit for the year. Any findings arising from this review will be included in the programmatic monitoring report.

A. The monitor(s) will review the following as it applies to the activities to be monitored:

- Act and Regulations
- Contract
- LWIA/LWDA Instructions
- State Instructions or correspondence
- Previous monitoring and audit reports
- Correspondence to and from the Contractor

B. To the extent possible, the monitors will complete the inquiries that are a part of the preliminary desk reviews prior to going on site.

The preliminary data gathered will enable the monitor(s) to address problems concerning participant reporting, performance, and other issues while at the contractor site.

The contractor will be required to complete designated portions of the monitoring guide that will be forwarded to the LWDA at least **one week prior** to the on-site visit. Based on information supplied by the contractor, various audit tests will be conducted by the monitors that will verify compliance to stated policies and procedures.

**C. DESK REVIEW INSTRUMENT (To be completed by Programmatic Monitor)**

**1. CONTRACTOR IDENTIFYING DATA**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Contract#
<b>Mod#</b>
Activity
Type
Period
Amount
Status*

Contractor Staff:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date(s) of On-Site Programmatic Visit: \_\_\_\_\_

Monitored By:

\_\_\_\_\_  
\_\_\_\_\_

Date of Monitoring Report: \_\_\_\_\_

\*Status

- A= Active
- B = Modification Pending
- C= Closed Out

**2. CONTRACT REVIEW FOR SPECIFIC REQUIREMENTS - DESK REVIEW**

a. Has the contract been properly signed and executed by the signatory officials of the LWDA and the contractor?

Yes     No

Cite Problems:

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b. Have all (if applicable) contract amendments or modifications been properly executed and signed by the signatory officials of the LWDA and the contractor?

Yes     No

Cite Problems:

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c. Has the contractor kept SC Works Online Services Reporting Systems errors down to an acceptable level?

Yes     No

Cite Problems:

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d. Do the contractor's prior year monitoring reports indicate any problems that may be applicable to current programs and that require corrective action? If yes, indicate below.

Yes     No

Cite Problems:

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e. Does the LWDA Director have knowledge of programmatic problems that should be addressed during the on-site visit? If yes, indicate below.

Yes     No

Cite Problems:

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- f. Has a review of the contractor's Ad hoc reports indicated problems that may require corrective action? If yes, indicate below.

Yes    No

Cite Problems:

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**3. SPECIFIC REQUIREMENTS FOR YOUTH**

- a. Is the contractor meeting the numbers specified on the Participant Activity Plan?

Yes    No

Cite Problems:

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- b. Do Ad hoc reports reflect that participants being served by the contractor have at least one of the following barriers: basic skills deficient, English language learner, homeless, runaway, foster child, pregnant, parenting, offender, youth with a disability, or youth who requires additional assistance?

Yes    No

Cite Problems:

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- c. Is the contractor coordinating with partners and community agencies to address these barriers?

Yes    No

Cite Problems:

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#### **4. PROGRAMMATIC MONITORING TASKS**

- a. Obtain a list of participants registered in each contract and select a sample of at least 5% of the registrants for a participant file review. If a 5% sample is less than ten (10) files, a minimum of ten (10) files must be reviewed. The Participant Scan Checklist should be completed to document the review.

**III. ADMINISTRATIVE AND PROGRAM-SPECIFIC ON-SITE MONITORING**

**A. ADMINISTRATIVE MONITORING GUIDE**(To be completed by Contractor)

**1. Contractor Personnel Policies**

a. Are there written personnel policies which include:

Source:

	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Reference Page#
Hiring procedures	<input type="checkbox"/>	<input type="checkbox"/>	
Employee Benefits	<input type="checkbox"/>	<input type="checkbox"/>	
Work Rules	<input type="checkbox"/>	<input type="checkbox"/>	
Travel/per diem	<input type="checkbox"/>	<input type="checkbox"/>	
Affirmative Action/EEO	<input type="checkbox"/>	<input type="checkbox"/>	
Grievance and complaint Procedures	<input type="checkbox"/>	<input type="checkbox"/>	

b. Are there statements that prohibit:

Nepotism	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Conflict of interest	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Discrimination	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Political activities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sectarian activities	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**2. Staff Job Descriptions**

- a. Are there job descriptions on file for employees? Yes No
- b. Do the job descriptions reflect actual job duties? Yes No
- c. Are job duties, both WIOA and non-WIOA, allocated by percentage to each Contract/cost category? Yes No

**3. WIOA Issuances.**

- a. Does the contractor have current copies of the Workforce Innovation and Opportunity Act and the Regulations? Yes No
- b. Does the contractor have a file of all relevant WIOA policies issued by the LWDA? Yes No

c. Does the contractor have up-to-date files of WIOA/LWDA correspondence? Yes No

d. Does the contractor have a copy of the Contract(s)? *(Have original Contract available)* Yes No

e. Do all relevant staff members have copies of the contractor's Work Statement? Yes No

4. Does the manager maintain a file documenting his/her review of obligations, expenses, paid, and unpaid vouchers for participants? Yes No

**\*\*NOTE: For question 2-4 of this section, the monitor will physically inspect the documents at the on-site review to confirm the contractor's compliance.**

5. What are the procedures for utilizing ad hoc reports and, if applicable, addressing deficiencies?

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6. What procedure does the contractor use to determine if a person meets the Priority of Service definition and how is it addressed?

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7. Does the contractor staff utilize SWOS alerts? Yes No

8. When was the last time the contractor's staff received training and in what form?

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**9. Unallowed and Regulated Activities**

**a. Conflict of Interest**

Does the contractor have a written code of conduct for its staff, officers and board of directors? Yes No

Does the contractor's policies prohibit staff members, officers and directors from accepting or soliciting a gratuity, a favor or anything of monetary value from an actual or potential WIOA subcontractor? Yes No

**b. Charging of Fees**

Has your agency ever been paid a fee for placing a participant in a federally funded training or employment program? Yes No

Do you know of a case(s) where a person or organization has charged a fee to any individual for placement or referral of that individual in the WIOA program? Yes No

**c. Nepotism**

Does the contractor's nepotism policies prohibit a family member from supervising a member of his immediate family? Yes No

Does the contractor's process for selection of program participants guard against any undue consideration being contracted to immediate family members by administrative staff? Yes No

**d. Political Activities**

To your knowledge has any participant or WIOA employee ever been selected or promoted based on his/her political affiliation or beliefs? Yes No

To your knowledge has a participant ever been engaged in partisan or non-partisan political activities during hours for which they are paid WIOA funds? Yes No

To your knowledge has a participant at any time been engaged in partisan political activities in which he/she represented himself/herself as a spokesperson for the WIOA program? Yes No

Are any participants stationed in the office of a member of Congress or a state or local legislator or on any staff of a legislative committee? Yes No

Is the Hatch Act explained to staff/participants at the time of employment? Yes No

**e. Lobbying Activities**

Has the contractor allowed any WIOA funds to be used for lobbying activities on the state or national level? Yes No

**f. Maintenance of Effort**

Has WIOA helped to create new jobs that are in addition to those that would be funded in the absence of assistance under the Act? Yes No

Do you know of any case where a former employee was laid off or terminated in anticipation of WIOA and then rehired under WIOA into such a position? Yes No

**g. Sectarian Activities**

Are WIOA funds used to support or promote any religious or sectarian activities, philosophies or doctrines? Yes No

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_  
*Signature*

## **B. PURPOSE**

The purpose of this section is to determine the extent to which the various programs and activities funded under WIOA are operating in accordance with the Act, Regulations, LWDA Plan, State and LWDA requirements, and the contract.

This section further determines the effectiveness of services provided to WIOA participants. Services should assist participants in successfully completing WIOA - funded activities. To be effective, services must be delivered in a timely manner.

The program and activities to be reviewed include:

### **Adult/Dislocated Worker Activities**

- **Basic Career Services**
  - Determinations of eligibility to receive assistance
  - Outreach, intake, and orientation to the information and other services available through the SC Works delivery system
  - Initial assessment
  - Labor exchange services
  - Provision of referrals to and coordination of activities with other programs and services
  - Provision of workforce and labor market employment statistics information
  - Provision of performance information and program cost information on eligible providers of training services
  - Provision of information regarding performance accountability measures and any additional performance
  - Provision of information, in formats that are usable by and understandable to SC Works center customers, relating to the availability of supportive services or assistance
  - Provision of information and assistance regarding filing claims for unemployment compensation
  - Assistance in establishing eligibility for programs of financial aid assistance for training and education programs
  - Services appropriate for an individual to obtain or retain employment
  
- **Individual Career Services**
  - Comprehensive and specialized assessments
  - Development of an Individual Employment Plan
  - Group counseling
  - Individual counseling

- Career planning
- Short-term prevocational services
- Internships and work experiences
- Workforce preparation activities
- Financial literacy services
- Out-of-area job search assistance
- English language acquisition and integrated education and training programs
- Follow-up services
  
- Training Services
  - Occupational skills training
  - On-the-job training
  - Incumbent Worker Training
  - Programs that combine workplace training with related instruction, which include cooperative education programs
  - Private sector training
  - Skills upgrading and retraining
  - Entrepreneurial training
  - Transitional jobs
  - Job Readiness training
  - Adult Education and Literacy activities
  - Customized training

### **Youth Activities**

- Objective Assessment
- Develop Service Strategies
- Basic Skills Training
- Tutoring and study skills training and dropout prevention and recovery strategies
- Alternative secondary school services or dropout recovery services
- Paid and unpaid work experiences that has academic and occupational education as a component
- Summer employment opportunities
- Pre-apprenticeship programs
- On-the-Job Training
- Internships and Job Shadowing
- Occupational skills training
- Education offered concurrently with workforce prep in a particular occupation or cluster
- Leadership development opportunities (training/services)
- Supportive services/incentives

- Adult mentoring
- Follow-up services
- Comprehensive guidance and counseling
- Financial literacy education
- Entrepreneurial skills training
- Workshops/Seminars
- Job readiness training
- Secondary School
- GED Training or Adult Ed HS
- Resume Preparation Assistance



## **C. PROCEDURE**

Subsequent to the desk review, the monitor(s) will visit the site. The monitor(s) will review the Administrative Review completed by the contractor prior to the on-site visit and pull relevant sections of the monitoring guide that are specific to the individual contracts to be monitored.

**1. Site reviews are to be conducted:**

- At the contractor's office and at training sites;
- With the staff who performed the tasks related to the area of review
- SC Works Online Service Participant Files

**2. Review documents which pertain to the activity being reviewed.**

- Discuss the results of the preliminary and site reviews while at the contractor's site. Highlight accomplishments and discuss corrective action needed for problem areas.

**3. Conduct participant and staff interviews:**

- At a minimum, the monitor will interview at least two (2) staff and two (2) participants. A combination of experienced and new staff and participants will be selected. Participants will be randomly selected and may be interviewed by phone.

**D. YOUTH MONITORING INSTRUMENT**

*(To be completed by Youth Program Manager)*

**1. YOUTH PROGRAM DESIGN CONSIDERATIONS**

a. Describe the design of your youth program. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

b. Does your agency's program include all fourteen (14) program elements listed in WIOA Section 129 (c)(2) as options available to youth participants?

<b><i>Element</i></b>	<b><i>#</i></b>	<b><i>How accomplished?</i></b>
Tutoring, study skills training and instruction		
Alternative secondary school services		
Paid and unpaid work experience		
Occupational skills training		
Education offered along with workforce prep in a particular occupation or cluster		
Leadership development opportunities		
Supportive services		
Adult mentoring		
Follow-up services		
Comprehensive Guidance and Counseling		
Financial literacy education		
Entrepreneurial skills training		
Services that provide labor market and employment information about in-demand occupations		
Activities that prepare youth for and transition to postsecondary education and training		

c. What services does the Contractor offer to address each of the following barriers?

Deficient in basic skills (computes math, reads, writes below a 9.0 grade level):  
\_\_\_\_\_  
\_\_\_\_\_

English language learner:  
\_\_\_\_\_  
\_\_\_\_\_

School dropout (not attending school):  
\_\_\_\_\_  
\_\_\_\_\_

Homeless, runaway, or foster child:  
\_\_\_\_\_  
\_\_\_\_\_

Pregnant or parenting:  
\_\_\_\_\_  
\_\_\_\_\_

Offender:  
\_\_\_\_\_  
\_\_\_\_\_

An individual (including a youth with a disability) who requires additional assistance to complete an educational program, or to secure and hold employment:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

d. What activities does your agency provide to prepare participants for post-secondary education opportunities?

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\_\_\_\_\_  
\_\_\_\_\_

e. What activities does your agency provide to prepare participants for unsubsidized employment opportunities?

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- f. What actions has the Contractor taken to actively market and promote the WIOA program to area businesses and public agencies in the community? **(Provide a copy of any outreach materials).**

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- g. What kinds of incentives are given to youth, and how are they given out?

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- h. What's the greatest challenge this contractor has to overcome in working with the youth?

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**2. CONCURRENT ENROLLMENT/REFERRALS**

- a. Are any youth concurrently enrolled in both youth and adult activities?

Yes    No

If yes, list the names and state identification numbers of each participant.

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- b. In the event that a youth is referred to the adult program to receive services, how is the determination made that this is a more appropriate service strategy?

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**3. SPECIAL CONSIDERATIONS FOR CLASS-SIZE PROJECTS**

a. Which of the fourteen required elements of the youth program are addressed through classroom instruction?

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b. Do the activities meet the prescribed definitions in the contractor's statement of work? Yes No If no, please explain any variations.

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c. Are time and attendance sheets on file to document participant attendance?

Yes  No If no, please explain

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d. What is the planned schedule for classroom instruction at this site?

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e. Have instructors been provided a job description detailing their duties and responsibilities at the classroom training site? Yes No

f. Is a copy of the statement of work on file at the site? Yes No

g. Do instructors maintain individual participant files to document each participant's progress in the classroom training project? Yes No

**4. WORK-BASED LEARNING OPPORTUNITIES**

a. What types of work-based learning opportunities are currently enrolled youth engaged in? (i.e. work experience, internships, apprenticeships, job shadowing)

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b. How does the Contractor select work-based learning sites to place participants?

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c. The number of youth employed in work-based learning opportunities:

Work Experience_____	Internships_____
Pre-apprenticeships_____	Apprenticeships_____
On-the-job training_____	Job Shadowing_____

d. Does the objective assessment and Individual Plan indicate that work experience is appropriate for participants placed in work experience?

Yes     No

e. How is the need for work experience assessed?

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f. How does the Contractor integrate work and learning?

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g. Describe supervisor orientation and training held by the contractor. Did all supervisors, including substitute supervisors, receive an orientation?

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***(Be prepared to provide documentation which shows supervisors' participation in orientation sessions for selected worksites)***

- h. Is a copy of the signed worksite agreement kept at each worksite?  
Yes    No
- i. How does the Contractor ensure that participants do not displace existing workers or infringe on promotional opportunities?

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- j. How often is each worksite monitored?

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- k. Have monitoring reports been completed?    Yes    No  
**(Be prepared to provide monitoring reports for selected sites)**

- l. Has a monitoring schedule been developed?    Yes    No  
**(Provide a copy to monitoring staff)**

- m. How does the Contractor ensure that health and safety standards and requirements for reasonable working conditions of the worksite are met?

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- n. Is a copy of the Child Labor Law on file at each worksite?    Yes    No

**5. OUT-OF-SCHOOL POST-SECONDARY SERVICES**

- a. Describe the contractor's efforts to establish relationship(s) with the local school district(s)' special education departments for purposes of implementing the requirements of the local area's GED incentive program.

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- b. How many participants have attained their GED this program year as a result of their participation in the:

In-house GED Incentive Program? \_\_\_\_\_  
 Partner GED Incentive Program? \_\_\_\_\_

c. What additional services does your agency provide upon training completion?

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d. What activities does your agency provide to prepare GED recipients for Post-secondary education opportunities?

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e. Describe the contractor's efforts to develop unsubsidized employment opportunities.

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Program Manager's Signature

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Date



## E. PERFORMANCE MONITORING

Performance monitoring focuses on the extent to which programs and services are achieving participant and financial performance goals established by the state.

This monitoring is to be conducted at least quarterly as a desk-top review.

The results of each quarterly review will be used to assess progress toward year- end goals established by the state, identifying existing or emerging problem areas, and suggest when on-site monitoring and corrective action measures should be initiated.

### Adults

<b>Standard</b>	<b>Goal</b>	<b>Actual</b>
Placement in Employment	79.90	
Retention in Employment	79.10	
Median Earnings	\$4,750	
Credential Rate	57.10	
In Program Skills Gain	47.50	

### Dislocated Workers

<b>Standard</b>	<b>Goal</b>	<b>Actual</b>
Placement in Employment	83.80	
Retention in Employment	79.50	
Median Earnings	\$7,100	
Credential Rate	61.00	
In Program Skills Gain	45.70	

### Youth

<b>Standard</b>	<b>Goal</b>	<b>Actual</b>
Placement in Employment, Education, or Training	76.6	
Retention in Employment, Education, or Training	72.0	
Earnings after Entry into Unsubsidized Employment	\$2,917	
Credential Rate	68.6	
Measurable Skills Gain	48.00	

**WIOA/OJT WORKSITE MONITORING INSTRUMENT**

**PART I: EMPLOYER INFORMATION**

EMPLOYER \_\_\_\_\_ MONITOR \_\_\_\_\_

ADDRESS \_\_\_\_\_ AREA \_\_\_\_\_  
\_\_\_\_\_ DATE \_\_\_\_\_

INDIVIDUAL CONTACTED \_\_\_\_\_

OJT CONTRACT WRITER \_\_\_\_\_

OJT POSITION(S) \_\_\_\_\_

1. GENERAL INFORMATION

Number of OJT contracts to date \_\_\_\_\_

Number of Successful Completions \_\_\_\_\_

2. REVIEW OF RECORDS AND REPORTS

(Negative responses require explanation under comments section)

- A. Are time and attendance reports submitted every 30 days? Yes \_\_\_ No \_\_\_
- B. Are timesheets submitted on time each month? Yes \_\_\_ No \_\_\_
- C. Are payment orders signed in a timely manner? Yes \_\_\_ No \_\_\_
- D. Are employees being paid wages specified in subcontract? Yes \_\_\_ No \_\_\_
- E. Are participants meeting training outlines? Yes \_\_\_ No \_\_\_
- F. Are training facilities adequate? Yes \_\_\_ No \_\_\_
- G. Does employer communicate issues in a timely manner? Yes \_\_\_ No \_\_\_

Comments:

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3. PRINCIPAL PROBLEM AREAS

Outline briefly any significant problems observed during the visit. All recommendations for action should be explained in sufficient detail to enable appropriate action.

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4. EVALUATION OF SUBCONTRACTOR

Rate the subcontractor (employer) based on your observations:

Excellent \_\_\_\_ Good \_\_\_\_ Fair \_\_\_\_ Poor \_\_\_\_

Actions to be taken on deficiencies:

None at this time \_\_\_\_\_ Follow-Up Visit \_\_\_\_

Date of Follow-Up \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF MONITOR

\_\_\_\_\_  
DATE

**PART II - PARTICIPANT INFORMATION** (this section to be completed for each OJT participant under contract with the company)

**1. PARTICIPANT INTERVIEW**

Subcontract# \_\_\_\_\_ Subcontract Period \_\_\_\_\_  
Participant's Name \_\_\_\_\_ Job Title \_\_\_\_\_  
Date of Interview \_\_\_\_\_ Hourly Wage \_\_\_\_\_  
Are wages consistent with hours worked? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Is participant working full-time hours each week? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If either answer is no, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Job Duties Performed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Skills Acquired:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Absences and Reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Job Satisfaction:

Excellent                      Good                      Fair                      Poor  
If fair or poor, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional comments, issue and/or observations:

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**PEE DEE WORKFORCE DEVELOPMENT AREA  
WORK EXPERIENCE/TRANSTIONAL JOB MONITORING  
INSTRUMENT**

Training Site \_\_\_\_\_

\_\_\_\_\_  
*Participant(s) Assigned*

\_\_\_\_\_  
*Monitoring Date*

\_\_\_\_\_  
*Participant(s) Present*

\_\_\_\_\_  
*Contact Person for Training Site*

1. Is the assigned worksite supervisor present?  Yes  No  
(If no is checked, list the name and job title of the person supervising)  
\_\_\_\_\_  
\_\_\_\_\_
2. Is there a completed worksite agreement at the site?  Yes  No
3. Do the job descriptions accurately reflect the actual work that the trainee is performing?  Yes  No
4. (*Youth only*) Are job assignments in accordance with the Fair Labor Standards Act?  
 Yes  No
5. Are time sheets up-to-date and being accurately maintained?  Yes  No
6. Do time sheets reveal hours in excess of those allowed by the Fair Labor Standards Act (*for youth*)?  Yes  No
7. Do time sheets reveal hours in excess of 40 hours per week?  Yes  No
8. Based on interviews of Participants at the site, answer the following questions:
  1. (*Youth only*) Is there a supervisor present at all times?  Yes  No
  2. Is there enough work available for all trainees?  Yes  No
  3. Are time and attendance policies being adhered to?  Yes  No
  4. Are trainees aware of their duties and responsibilities?  Yes  No
  5. Are trainees aware of the procedures as they relate to absences, tardiness, and emergencies?  Yes  No
  6. Are trainees experiencing any problems that may affect their worksite performance?  Yes  No? If yes, please explain.  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
7. Name(s) of trainees interviewed:  
\_\_\_\_\_  
\_\_\_\_\_

9. Does a survey of the buildings and surroundings reveal any breach of compliance with OSHA safety standards? Yes No If yes, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
10. Based on trainee interviews and direct observation, were there any noted instances of noncompliance with the Agreement and/or federal, state, and local laws and regulations? Yes No If yes, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
11. Ask the Training Site Employer representative the following questions: On a scale of 1 to 6, with 1 being the best, how satisfied are you with the Work Experience/Transitional Job trainee and/or activity?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
12. Have there been any issues with the trainee's work performance or behavior? Yes No If yes, how was it resolved?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
13. In regard to question 12, was the contractor helpful in finding a resolution? Yes No If no, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Monitor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**WORK EXPERIENCE  
PARTICIPANT INTERVIEW FORM**  
*(For Adults, Dislocated Workers, Youth)*  
*(To be completed by the Monitor)*

Name: \_\_\_\_\_ Worksite: \_\_\_\_\_

1. Describe a typical day at work. \_\_\_\_\_

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2. Was this job placement based on your expressed interest? Yes No If no please explain.

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3. What is your long-term employment goal?

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4. How will this job help you to accomplish your long-term goal?

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5. Is this your first job? Yes No If not, please briefly describe your previous employment experience, including the length of time employed.

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6. Who is your supervisor? \_\_\_\_\_

7. Is this who you call when you are not coming to work or will be late? Yes No

8. Is there a supervisor present at all times? Yes No

9. Who is your WIOA Career specialist? \_\_\_\_\_

10. Are time and attendance policies being adhered to? Yes No



11. Are trainees aware of the procedures as they relate to absences, tardiness, and emergencies?

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12. Are trainees aware of their duties and responsibilities? Yes No

13. Do you have enough work to keep you busy? Yes No If no, please explain.

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14. Are trainees experiencing any problems that may affect their worksite performance?

Yes No

15. What other training have you attended or are scheduled to attend?

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Participant's Signature \_\_\_\_\_

**Date** \_\_\_\_\_

**PARTICIPANT INTERVIEW FORM**  
*Adults, Dislocated Workers, Out-of-School Youth*  
*(not participating in class-sized projects, work experience, or OJT)*

1. Who is your Case Manager in the WIOA program in which you are participating? \_\_\_\_\_
2. How often do you speak with your Case Manager? \_\_\_\_\_
3. How did you hear about the WIOA program in which you are participating?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Have you previously participated in any other employment and training program?  
Yes    No  
If yes, when? \_\_\_\_\_ Where? \_\_\_\_\_  
What type of training did you receive? \_\_\_\_\_  
What agency sponsored the training? \_\_\_\_\_
5. What services were you expecting to receive from the WIOA program?  
\_\_\_\_\_  
\_\_\_\_\_
6. What services have you received? (school, childcare, transportation, other)  
\_\_\_\_\_  
\_\_\_\_\_
7. Were books, training equipment, and supplies provided when you need them? Yes  
No
8. Have you been asked to participate in any religious or political activities while participating in WIOA?    Yes    No    If yes, please explain.  
\_\_\_\_\_  
\_\_\_\_\_
9. Have you been asked to pay any fee for participation in the WIOA program?  
Yes    No    If yes, please  
\_\_\_\_\_  
\_\_\_\_\_
10. Has the grievance procedure been explained to you by your Case Manager or another designated person? Yes    No

11. Have you been injured while participating in WIOA?  Yes  No If yes, please explain.

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12. Did you encounter any problems during the enrollment process?  Yes  No If yes, please explain.

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13. How would you rate your overall experience with the WIOA program in which you are participating?

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14. What would you change about your experience?

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15. What is your long-term employment goal? How has the Workforce Center assisted you with moving toward that goal?

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Other Comments:

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Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Monitors' Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INTENSIVE/TRAINING SERVICES COMPONENT  
CAREER SPECIALIST INTERVIEW**  
*(To be completed by the Monitor)*

**1. GENERAL**

a) Career Specialist's Name: \_\_\_\_\_  
Contract/Program \_\_\_\_\_

b) How many participants do you currently carry in your caseload?

New \_\_\_\_\_ Carryover \_\_\_\_\_

Active \_\_\_\_\_ Follow-Up \_\_\_\_\_

c) How many applicants have been referred to non-WIOA funded programs/activities? \_\_\_\_\_

d) How are these referrals documented?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

e) Have you received training regarding the work statement and other areas of this Contract?  Yes  No

f) How is this training documented? \_\_\_\_\_

\_\_\_\_\_  
*(Provide documentation)*

g) How do you utilize the work statement to assist you with doing your job?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

h) How often do you refer to it for guidance? \_\_\_\_\_

i) Do you have an electronic copy or a hard copy? \_\_\_\_\_

J. Do you know how to access policies referenced in the work statement?

Yes  No If yes, how? \_\_\_\_\_

**2. ASSESSMENT**

a) Is a comprehensive/specialized assessment of the skill levels and service needs provided to all registrants?  Yes  No

b) How and when are participants assessed?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c) List all assessment tools utilized.

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d) Are assessment results recorded on the assessment screen in SCWOS?

Yes     No

e) Are measurable skills gains recorded in SCWOS?  Yes                       No If yes, how?

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f) What is discussed at the in-depth/enrollment interview?

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g) How is information obtained from assessment used to aid in the development of the IEP/ISS Plan?

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h) What type of things are documented in a case note? Provide examples.

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### 3. COORDINATION

a) Using case notes, give specific examples of coordination achieved with other agencies.

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**(Provide examples of case notes for monitors' review)**

- b) Aside from managing customers participating in intensive or training services, what other services do you provide as a member of the SC Works Workforce Center?

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**4. SUPPORTIVE SERVICES**

- a) How is the need for supportive services determined?

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- b) How are supportive services needs documented in the SCWOS? (case notes, activity codes, etc.)

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- c) Is supporting documentation to verify that supportive services could not be obtained from another source maintained in the participants' files?

Yes    No

**5. EDUCATIONAL ACTIVITIES**

- a) Are copies of Voucher System Training Budgets and Voucher System Certificates on file for each participant?

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- b) Is the Pee Dee LWDA Satisfactory Progress Policy adhered to (WIA Instruction #11-013, Change 1)? Yes    No

c) Are the requirements of this policy incorporated as a part of career counseling to all participants entering classroom training?

Yes     No

d) Are copies of credentials (certificate, diploma, degree) received at the completion of training?  Yes     No

e) Are they recorded in SCWOS?  Yes     No If yes, how?

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f) How often are grades collected? \_\_\_\_\_

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g) If a customer is in partner-funded training, is the applicable activity opened?

Yes     No Why or why not? \_\_\_\_\_

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What activity is opened? \_\_\_\_\_

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h) If a customer is in a partner-funded training, are time sheets collected?

Yes     No Why or why not? \_\_\_\_\_

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## 6. PARTICIPANT PROGRESS/FOLLOW-UP

a) How often are participants contacted?

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b) How often are participants counseled? What is the process?

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c) How often does the Career Specialist try to contact a participant before giving up?

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If contact is made other than by face-to-face counseling, give examples:

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d) Does the case record for each participant contain each of the following elements: *(Check all that apply)*

- An initial picture of the customer as he/she enters the process,
- including strengths and barriers that will affect self-sufficiency
- The planning process and development of the Individual Plan
- Significant contacts with the customer
- Contacts with others involved with the customer - mental health professionals, instructors, workplace supervisors, etc.
- Contractor's activities on behalf of the customer?
- Planned exit

For any item not checked, please explain why this information is not included in the participant's case record.

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e) Describe the action(s) taken when a participant is failing to make satisfactory progress in his/her training.

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f) When is case closure appropriate?

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g) What information is needed at the time case closure is completed?

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h) What is the process for completing case closure and how is it documented?

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i) (Follow Up) What types of follow-up services have been made available to participants?

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j) (Follow Up) How are contact attempts documented for customers in follow up?

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k) How are employment verifications documented in a case note?

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l) What is the process for completing a quarter in follow up?

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m) Are self-monitoring procedures in place? If so, please describe the process.

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Career Specialist's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Monitor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ON-THE-JOB TRAINING COMPONENT  
BUSINESS SERVICES REPRESENTATIVE INTERVIEW**

**1. ON-THE-JOB TRAINING**

- a. List the number of OJT participants in each of the following groups:

Adult \_\_\_\_\_ Dislocated Worker \_\_\_\_\_

- b. Are any of the OJT participants incumbent workers? If so, does the OJT relate to new technologies, new production or service procedures, upgrading requiring new skills, workplace literacy, or an appropriate purpose identified by the WDB? Please explain.

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- c. What procedures are used to ensure that OJT contracts are not entered into with employers who have received payments under previous contracts and have exhibited a pattern of failing to provide participants with continued long-term employment?

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- d. What procedures are used to determine that no funds are utilized for OJT for any business, or part of a business, that has relocated within 120 days of the relocation?

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- e. How does the contractor ensure that individuals employed in OJT receive the same benefits and working conditions as other similarly- situated employees?

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f. How does the contractor ensure that no currently employed worker is displaced by any OJT, including reduction in hours, wages, or employment benefits?

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g. Have OJT contracts been completed with employers prior to funding training slots for new or existing employees? Have all contracts been approved by the Business and Industry Liaison for the local workforce Innovation and Opportunity area?

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h. Do OJT participants' Plans justify the placement of those participants in OJT? Does the Plan document how the length of training was determined?

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i. Have OJT contracts been monitored by the contractor in accordance with the requirement outlined in the statement of work? How is the monitoring documented?

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j. Has corrective action been implemented by the contractor as a result of any monitoring findings? If so, please explain.

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BSR's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**YOUTH CLASSROOM COMPONENT  
INSTRUCTOR INTERVIEW**

*(To be completed by the Monitor)*

1. Describe how this program helped improve the students' basic, occupational, and/or work readiness skills?

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2. If a student is having difficulty in a certain area, how do you assist him/her in getting a better understanding?

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3. How do you customize the curriculum to fit the needs of individual students?

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4. Give an example of how this program has positively affected a particular student.

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5. If you could change any aspect of this program, what would it be and why?

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Instructor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**IN-SCHOOL YOUTH  
PARTICIPANT INTERVIEW**  
*(To be completed by the Monitor)*

Participant Name: \_\_\_\_\_

School/Service Provider: \_\_\_\_\_

Date of Visit: \_\_\_\_\_ Instructor: \_\_\_\_\_

***Program Orientation***

1. Did you receive information about class hours? Yes No

If yes, what are they? \_\_\_\_\_

Time and attendance policies?  
(Signing in and out) Yes No

Number of incentive payments? Yes No

Things that will result in a reduction to payments? Yes No

2. What to do if you have a problem or complaint? Yes No

3. Did you receive any handouts and are you familiar with them? (These handouts may address incentive hourly rate, class rules, what to do in case of an emergency, or who to contact if you must miss class.) Yes No

4. Do you understand that you are not paid if you violate the rules established by the WIOA program? Yes No

5. Have you had any problems with your incentive payment?

Yes No If yes, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. When you are given an assignment, is it clearly explained? Yes No

7. Does your career specialist/instructor check to see how your work is going?  
Yes No

8. Are enough activities provided to keep you busy? Yes No

9. If your regular career specialist is absent, do you know who to report to? Yes No

10. Do you ever engage in recreation, political, or religious activities while in class?  
Yes No

11. What do you like or dislike most about the program?

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12. What do you feel you have gained from the program? \_\_\_\_\_

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13. What additional opportunities were made available to you during your participation in the program (i.e. tutoring, mentoring, leadership development opportunities, work experience, etc.)?

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14. Did you participate in the development of your training plan or was the plan developed by your career specialist and presented to you?

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15. Was information that you gave the career specialist about your personal strengths and weaknesses, as well as your future goals and interests, taken into account in the development of your plan? Yes No If no, please explain.

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Other Comments:

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Participant's Signature\_\_\_\_\_

Date\_\_\_\_\_



**IV. EQUAL OPPORTUNITY MONITORING INSTRUMENT**

Service Provider: \_\_\_\_\_

Contact: \_\_\_\_\_

Monitor(s): \_\_\_\_\_

Date: \_\_\_\_\_

1. Has a program self-evaluation instrument or program accessibility review been completed in accordance with Pee Dee LWIA Instruction 09-001? \_\_\_\_\_ Yes \_\_\_\_\_ No

Date of Review: \_\_\_\_\_ (*Obtain a copy for LWDA monitoring files*)

2. List the areas (if any) of the self-evaluation instrument that indicate opportunities for improvement as they relate to equal opportunity issues.

Comments:

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## **Objectives**

To determine:

1. If the service provider has EO policies and procedures that ensure compliance with Section 188 of the Workforce Innovation and Opportunity Act (WIOA), i.e., that no person is discriminated against or denied employment as a participant, administrator, or staff person, in connection with any program under WIOA on the grounds of race, color, religion, sex, national origin, age, disability, or political affiliation or belief. (See Attachment A.)
2. How the service provider ensures that no person is discriminated against solely because of his/her status as a participant, or on the basis of citizenship.
3. If there is a universal access policy in place.
4. How the service provider ensures reasonable accommodation to serve individuals with disabilities and the elimination of architectural barriers (to the extent feasible).
5. If the service provider has designated an EO officer; if the EO officer's job description reflect EO duties.
6. If the service provider is complying with 29 CFR part 38.29 regarding dissemination of policy and 38.20 regarding assurances. (See Attachments Band C.)
7. If the service provider is requiring subcontractors to comply with 29 CFR part 38.29 and 38.20.
8. If the service provider has written grievance/complaint procedures that meet requirements at 20 CFR part 683 subpart F. (See Attachments D.)

## **Methodology**

1. A desktop review will be conducted of any information that is requested prior to the on- site visit.
2. An entrance conference will be conducted. The monitor will review the EO policies and procedures, interview the EO Officer, go over his/her duties and specific tasks regarding EO, and the percent of his/her time that is spent ensuring compliance with EO requirements. Visit(s) to service provider offices, Workforce Centers, training sites, and/or subcontractors, if not scheduled during the desktop review, will be coordinated at this time.
3. The monitor will review other documents and information (such as issuances, agreements, and notices) to determine if the service provider is complying with the technical aspects of compliance.
4. The monitor will review policies and inquire of practices to learn if the service provider's business locations are accessible and providing reasonable accommodation.
5. The monitor will inquire about participant and employment processes - such as recruitment, eligibility, assessment, intensive services, training accounts, and termination, and determine whether established procedures are being followed.

6. The monitor will determine whether there is any inherent discrimination in the procedures.
7. The monitor will interview staff and participants to determine whether there is any difference in the way people are being treated on the basis of race, sex, or other bases. The monitor will explore how the service provider is assuring equitable services and program accessibility.
8. The monitor will observe services, training programs, and other WIOA activities to explore any problems that may have been revealed in the desk review.
9. The monitor will review the grievance procedures to determine if they comply with 20 CFR 683 subpart F. Determine if the service provider/contractor has procedures for handling complaints alleging labor standards violations. (Ref. 683.600(b)(3) - Attachment E.)
10. The monitor will review the procedure for handling discrimination complaints to determine if it conforms to the provisions and the timeframes outlined in the Rights Handout.
11. The monitor will conduct an exit conference to discuss with the service provider's signatory authority, or appropriate designee any deficiencies that were noted during the review, possible recommendations, technical assistance needs, the report and the resolution process.

Question	Yes	No	Comments
<b>Assignment of Equal Opportunity Responsibilities</b>			
Has the service provider assigned EO responsibilities to an individual staff person?			Name and Title of the Person:
Does this person's job description reflect EO duties?			% of Time Spent on EO Duties:
Is this person's name and location included on the Right Handout?			
Is there an organization chart reflecting this person's location in the organization?			
Are there other staff who assist this person with EO activities?			
Do their job descriptions reflect the percent of their time spent on EO activities?			
<b>Communicating and Training Staff on EO Policy</b>			

How does the service provider provide initial and continuing notice that it does not discriminate to:

- applicants,
- registrants,
- participants,
- applicants for employment,
- employees,
- subrecipients/subcontractors, and
- members of the public?

Question	Yes	No	Comments
<p>Is the notice:</p> <ul style="list-style-type: none"> <li>• posted prominently;</li> <li>• disseminated in internal memoranda and other written communications;</li> <li>• included in handbooks or manuals;</li> <li>• made available to each registrant, applicant, participant, and applicant for employment;</li> <li>• made a part of individual's file;</li> <li>• included in publications, broadcasts and other communications;</li> </ul> <p>and</p> <ul style="list-style-type: none"> <li>• available in formats suitable for those with visual or hearing impairments but no less effective than communication with others?</li> </ul>			
<p>If there is a significant portion (5%) of the eligible population that needs information in a language other than English, is the notice available in the appropriate language(s)?</p>			

**EO Provisions and Nondiscrimination Assurance in Agreements**

Do plans, applications for financial assistance, and agreements to carry out WIOA-funded activities include the nondiscrimination and equal opportunity assurance

Question	Yes	No	Comments

<b>Equitable Services Among Substantial Segments of Eligible Population</b>			
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Has the service provider established a policy for providing equitable services to target groups?			
Does the service provider ensure that all programs, to the maximum extent feasible, contribute to the elimination of sex stereotyping?			<b>How?</b>
Does the service provider use employment applications that avoid the use of questions, which, when answered, could potentially lead to discrimination?			
Where tests are used in the selection process, have such tests and the selection procedures been validated?			

<b>Program and Site Accessibility</b>			
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<b>Parking/Entrance</b>			
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Is there a separate accessible entrance?			
Can it be easily accessed?			
Is there at least one accessible parking space?			
Is the accessible parking clearly marked (preferable with a vertical sign)?			
Is the accessible parking nearest to the accessible entrance?			
Are there any buttons that must be pressed to gain entrance at the accessible entrance?			
Do the buttons actually work?			
Do the doors open in the correct direction for wheelchair access?			

<b>Question</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
Does the wheelchair ramp appear to have the appropriate incline?			
For extremely long ramps, is there a landing at specified intervals?			

<b>Inside the Facility</b>			
Are the most current WIOA EO Posters prominently displayed?			
Is the accessible workstation free from obstruction, signed on, and ready to use?			
Do publications, recruitment brochures, and other materials communicating information about WIOA activities and services indicate that the WIOA-funded program is an “equal opportunity employer/program” and that “auxiliary aids and services are available upon request to individuals with disabilities?”			
Is there a designated staff person in the office to provide assistance with the technology and software at the accessible workstation?			
Are the following software/technology available:  JAWS Scanner Track Ball (large) Large Keyboard with Overlay Large Screen/Magnifier?			
<b>Restrooms</b>			
Are accessible restrooms clearly marked?			
Are there any obstructions to the accessible restroom(s) (i.e. cords, steps down, etc.)?			
Are the light switch, paper towels, and soap dispensers low enough that someone in a wheelchair could reach them?			
Are there any obstructions to the accessible stall? (i.e. furniture, equipment, plants, etc.)			
<b>Question</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
Does the accessible stall contain grab bars and are the appropriately positioned?			
If the sink is a pedestal sink, have pipes been appropriately wrapped, insulated, or enclosed to eliminate scalding hazards?			
<b>Other</b>			
If there are multiple buildings or multi-level areas in the building, is there adequate transition between the levels?			
If the building has fire alarms, are they included in the bathrooms?			

Does fire alarm contain strobe lights for the hearing impaired?			
Is there a TTY relay service number used by the service provider?			
Does the workforce center/contractor make other reasonable accommodations for people with disabilities?			
Are these reasonable accommodations minimally invasive/embarrassing to the customer?			
<b>Maintenance of EO Data</b>			
Is the service provider's staff familiar with the records retention requirements in WIOA regulations?			
Is confidentiality of records ensured?			<b>How?</b>
Does the service provider maintain complaint logs?			
Has the service provider communicated the data collection and maintenance requirements to staff?			<b>How?</b>
<b>Handling Discrimination Complaints</b>			
Has the service provider established procedures providing for the prompt and equitable resolution of complaints alleging violations of WIOA nondiscrimination and equal opportunity provisions?			
<b>Question</b>	<b>Yes</b>	<b>No</b>	<b>Comments</b>
Do the procedures: <ul style="list-style-type: none"> <li>state that a complaint of discrimination shall be filed within 180 days from the date of the alleged occurrence;</li> <li>state where/with whom one may file a complaint of discrimination;</li> <li>state what information complaints should contain;</li> <li>state that a complainant has a right to representation, an impartial decision, and to present evidence;</li> </ul>			

<ul style="list-style-type: none"><li>• provide the option to file with the State of with the Civil Rights Center (CRC);</li><li>• state what the time frame is for filing with CRC after having received an adverse decision or no decision from the State;</li></ul> <p>and</p> <ul style="list-style-type: none"><li>• state what corrective and remedial actions will be taken when there are violations of Section 188 of the Act?</li></ul>			
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**WIOA Sec. 188. Nondiscrimination**

(a) In general

(1) Federal financial assistance

For the purpose of applying the prohibitions against discrimination on the basis of age under the Age Discrimination Act of 1975 (42 U.S.C. 6101 et seq.), on the basis of disability under section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), on the basis of sex under title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.), or on the basis of race, color, or national origin under title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.), programs and activities funded or otherwise financially assisted in whole or in part under this Act are considered to be programs and activities receiving Federal financial assistance.

(2) Prohibition of discrimination regarding participation, benefits, and employment

No individual shall be excluded from participation in, denied the benefits of, subjected to discrimination under, or denied employment in the administration of or in connection with, any such program or activity because of race, color, religion, sex (except as otherwise permitted under title IX of the Education Amendments of 1972 (20 U.S.C. 1681 et seq.)), national origin, age, disability, or political affiliation or belief.

(3) Prohibition on assistance for facilities for sectarian instruction or religious worship

Participants shall not be employed under this chapter to carry out the construction, operation, or maintenance of any part of any facility that is used or to be used for sectarian instruction or as a place for religious worship (except with respect to the maintenance of a facility that is not primarily or inherently devoted to sectarian instruction or religious worship, in a case in which the organization operating the facility is part of a program or activity providing services to participants).

(4) Prohibition on discrimination on basis of participant status

No person may discriminate against an individual who is a participant in a program or activity that receives funds under this chapter, with respect to the terms and conditions affecting, or rights provided to, the individual, solely because of the status of the individual as a participant.

(5) Prohibition on discrimination against certain noncitizens

Participation in programs and activities or receiving funds under this chapter shall be available to citizens and nationals of the United States, lawfully admitted permanent resident aliens, refugees, asylees, and parolees, and other immigrants authorized by the Attorney General to work in the United States.

(b) Action of Secretary

Whenever the Secretary finds that a State or other recipient of funds under this chapter has failed to comply with a provision of law referred to in subsection (a)(1) of this section, or with paragraph (2), (3), (4), or (5) of subsection (a) of this section, including an applicable regulation prescribed to carry out such provision or paragraph, the Secretary shall notify such State or recipient and shall request that the State or recipient comply. If within a reasonable period of time, not to exceed 60 days, the State or recipient fails or refuses to comply, the Secretary may

- (1) refer the matter to the Attorney General with a recommendation that an appropriate civil action be instituted; or

(2) take such other action as may be provided by law.

(c) Action of Attorney General

When a matter is referred to the Attorney General pursuant to subsection (b)(1) of this section, or whenever the Attorney General has reason to believe that a State or other recipient of funds under this chapter is engaged in a pattern or practice of discrimination in violation of a provision of law referred to in subsection (a)(1) of this section or in violation of paragraph (2), General may bring a civil action in any appropriate district court of the United States for such relief as may be appropriate, including injunctive relief.

(d) Job Corps

For the purposes of this section, Job Corps members shall be considered as the ultimate beneficiaries of Federal financial assistance.

(e) Regulations

The Secretary shall issue regulations necessary to implement this section not later than one year after July 22, 2015. Such regulations shall adopt standards for determining discrimination and procedures for enforcement that are consistent with the Acts referred to in a subsection (a)(1) of this section, as well as procedures to ensure that complaints filed under this section and such Acts are processed in a manner that avoids duplication of effort.

**§ 38.29 What are a recipient's obligations to disseminate its equal opportunity policy?**

- (a) A recipient must provide initial and continuing notice that it does not discriminate on any prohibited ground. This notice must be provided to:
  - (1) Registrants, applicants, and eligible applicants/registrants;
  - (2) Participants;
  - (3) Applicants for employment and employees;
  - (4) Unions or professional organizations that hold collective bargaining or professional agreements with the recipient;
  - (5) Subrecipients that receive WIOA Title I funds from the recipient; and
  - (6) Members of the public, including those with impaired vision or hearing.
  
- (b) As provided in § 38.29, the recipient must take appropriate steps to ensure that communications with individuals with disabilities are as effective as communications with others.

**§ 38.20 What is a contract applicant's obligation to provide a written assurance?**

**Assurances**

- (a) (1) Each application for financial assistance under Title I of WIOA, as defined in Sec. 38.4, must include the following assurance:

As a condition to the award of financial assistance from the Department of Labor under Title I of WIOA, the contract applicant assures that it will comply fully with the nondiscrimination and equal opportunity provisions of the following laws:

**Section 188 of the Workforce Innovation and Opportunity Act of 2015 (WIOA)**, which prohibits discrimination against all individuals in the United States on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief, and against beneficiaries on the basis of either citizenship/status as a lawfully admitted immigrant authorized to work in the United States or participation in any WIOA Title I—financially assisted program or activity;

**Title VI of the Civil Rights Act of 1964**, as amended, which prohibits discrimination on the bases of race, color and national origin;

**Section 504 of the Rehabilitation Act of 1973**, as amended, which prohibits discrimination against qualified individuals with disabilities;

**The Age Discrimination Act of 1975**, as amended, which prohibits discrimination on the basis of age; and

**Title IX of the Education Amendments of 1972**, as amended, which prohibits discrimination on the basis of sex in educational programs.

The contract applicant also assures that it will comply with 29 CFR part 38 and all other regulations implementing the laws listed above.

This assurance applies to the contract applicant's operation of the WIOA Title I-financially assisted program or activity, and to all agreements the contract applicant makes to carry out the WIOA Title I-financially assisted program or activity. The contract applicant understands that the United States has the right to seek judicial enforcement of this assurance.

(2) The assurance is considered incorporated by operation of law in the contract, cooperative agreement, contract or other arrangement whereby Federal financial assistance under Title I of the WIOA is made available, whether or not it is physically incorporated in such document and whether or not there is a written agreement between the Department and the recipient, between the Department and the Governor, between the Governor and the recipient, or between recipients. The assurance also may be incorporated by reference in such contracts, cooperative agreements, contracts, or other arrangements.

- (b) Continuing State programs. Each Strategic Five-Year State Plan submitted by a State to carry out a continuing WIOA Title I-financially assisted program or activity must provide a statement that the WIOA Title I-financially assisted program or activity is (or, in the case of a new WIOA Title I-financially assisted program or activity, will be) conducted in compliance with the nondiscrimination and equal opportunity provisions of WIOA and this part, as a condition to the approval of the Five-Year Plan and the extension of any WIOA Title I financial assistance under the Plan. The State also must certify that it has developed and maintains a Methods of Administration under Sec. 38.54.

**20 CFR 683 Subpart F—Grievance Procedures, Complaints, and State Appeals Processes**  
**§ 683.600 What local area, State and direct recipient grievance procedures must be established?**

- (a) Each local area, State and direct recipient of funds under title I of WIOA, except for Job Corps, must establish and maintain a procedure for grievances and complaints according to the requirements of this section.
- (b) Each local area, State, and direct recipient must:
  - (1) Provide information about the content of the grievance and complaint procedures required by this section to participants and other interested parties affected by the local Workforce Innovation and Opportunity System, including Workforce Center partners and service providers;
  - (2) Require that every entity to which it awards Title I funds must provide the information referred to in paragraph (b)(1) of this section to participants receiving Title I-funded services from such entities; and
  - (3) Must make reasonable efforts to assure that the information referred to in Paragraph (b)(1) of this section will be understood by affected participants and other individuals, including youth and those who are limited-English speaking individuals. Such efforts must comply with the language requirements of 29 CFR 38.35 regarding the provision of services and information in languages other than English.
- (c) Local area procedures must provide:
  - (1) A process for dealing with grievances and complaints from participants and other interested parties affected by the local Workforce Innovation and Opportunity System, including Workforce Center partners and service providers;
  - (2) An opportunity for an informal resolution and a hearing to be completed within 60 days of the filing of the grievance or complaint;
  - (3) A process which allows an individual alleging a labor standards violation to submit the grievance to a binding arbitration procedure, if a collective bargaining agreement covering the parties to the grievance so provides; and
  - (4) An opportunity for a local level appeal to a State entity when:
    - (i) No decision is reached within 60 days; or
    - (ii) Either party is dissatisfied with the local hearing decision.
- (d) State procedures must provide:
  - (1) A process for dealing with grievances and complaints from participants and other interested parties affected by the Statewide Workforce Innovation and Opportunity programs;
  - (2) A process for resolving appeals made under paragraph (c)(4) of this section;
  - (3) A process for remanding grievances and complaints related to the local Workforce Innovation and Opportunity Act programs to the local area grievance process; and
  - (4) An opportunity for an informal resolution and a hearing to be completed within 60

days of the filing of the grievance or complaint.

(e) Procedures of direct recipients must provide:

- (1) A process for dealing with grievance and complaints from participants and other interested parties affected by the recipient's Workforce Innovation and Opportunity Act programs; and
- (2) An opportunity for an informal resolution and a hearing to be completed within 60 days of the filing of the grievance or complaint.

(f) The remedies that may be imposed under local, State and direct recipient grievance procedures are enumerated at WIOA section 181(c)(3).

- (1) The provisions of this section on grievance procedures do not apply to discrimination complaints brought under WIOA section 188 and/or 29 CFR part 37. Such complaints must be handled in accordance with the procedures set forth in that regulatory part.
- (2) Questions about or complaints alleging a violation of the nondiscrimination provisions of WIOA section 188 may be directed or mailed to the Director, Civil Rights Center, U.S. Department of Labor, Room N4123, 200 Constitution Avenue, NW, Washington, D.C. 20210, for processing.

(g) Nothing in this subpart precludes a grievant or complainant from pursuing a remedy authorized under another Federal, State or local law.

**§ 683.600(b)(3)**

**(a) Each local area, State, and direct recipient must:**

- (1) Provide information about the content of the grievance and complaint procedures required by this section to participants and other interested parties affected by the local Workforce Innovation and Opportunity System, including Workforce Center partners and service providers;
- (2) Require that every entity to which it awards Title I funds must provide the information referred to in paragraph (c)(1) of this section to participants receiving Title I-funded services from such entities; and
- (3) Must make reasonable efforts to assure that the information referred to in paragraph (c)(1) of this section will be understood by affected participants and other individuals, including youth and those who are limited-English speaking individuals. Such efforts must comply with the language requirements of 29 CFR 38.35 regarding the provision of services and information in languages other than English.**

## V. PRELIMINARY FINANCIAL DESK REVIEW

Prior to going on-site, a preliminary desk review is to be conducted to increase efficiency while at the site. This section should be completed by the monitoring team that conducts the first on-site monitoring visit for the year. Any findings arising from this view will be included in the financial monitoring report.

**A.** *The monitor(s) will review the following as it applies to the activities to be monitored:*

- Act and Regulations
- Contract
- LWDA Instructions
- State Instructions or correspondence
- Previous monitoring and audit reports
- Correspondence to and from the Contractor

**B.** To the extent possible, the monitors will complete the inquiries that are a part of the preliminary desk review prior to going on site.

The preliminary data gathered will enable the monitor(s) to address problems concerning financial reporting, audit resolution, and other issues while at the contractor site.

The contractor will be required to complete designated portions of the monitoring guide that will be forwarded to the LWDA at least one week prior to the on-site visit. Based on information supplied by the contractor, various audit tests will be conducted by the monitors that will verify compliance to stated policies and procedures.



**DESK REVIEW INSTRUMENT** *(To be completed by Financial Monitor)*

**CONTRACTOR IDENTIFYING DATA**

<b>Name</b>	
<b>Address</b>	
<b>City &amp; State</b>	



<b>Contract #</b>									
<b>Mod #</b>									
<b>Activity</b>									
<b>Period</b>									
<b>Amount</b>									
<b>Status*</b>									



<b>Contractor Staff</b>		

**Date of On-Site Financial Visit**



**Monitored By**



**Date of Monitoring Report**



<b>*Status</b>	
A= Active	
B= Modification Pending	
C = Closed Out	



**LWDA FINANCIAL MONITORING INSTRUMENT  
COST REIMBURSEMENT CONTRACTS**

The monitor must now conduct the Audit Test Worksheet comparing the most recent Financial Status Report and Request for Payment Invoice with contractor's general ledger.

Item #	Documentation	Yes	No
<b>General Entity information</b>			
1	Does the contractor prepare all financial reports from its fiscal accounts?	<input type="checkbox"/>	<input type="checkbox"/>
	Does the financial system provide for the accounting of expenditures by cost categories authorized under WIOA?	<input type="checkbox"/>	<input type="checkbox"/>
	Are the books set up by different program activities?	<input type="checkbox"/>	<input type="checkbox"/>
2	Were there any disallowed or questioned costs for WIOA operations or for expenditures that were related to those paid under the WIOA contract?	<input type="checkbox"/>	<input type="checkbox"/>
a	Cite Problems		
b	Are finance reports/invoices accurate and submitted on a timely basis?	<input type="checkbox"/>	<input type="checkbox"/>
c	Cite Problems		
3	<p>Using the Records Review Worksheet, select and trace a sample of non-payroll transactions from the disbursements journal in order to determine if proper approvals were obtained; the recorded amounts are accurate: adequate support documentation exists; the cost was allowable and the cost was correctly allocated and classified.</p> <p>Note: There should be a written cost allocation plan if there are costs shared among the WIOA program or among a WIOA funded contract and activities funded by non-WIOA sources. Before proceeding to perform the record review, ascertain the following:</p> <p>Which costs are sometimes shared by different projects/funding sources?</p>		
<b>Records Review</b>			
4	Were there any discrepancies between the check amount or the date and the journal entry?	<input type="checkbox"/>	<input type="checkbox"/>
5	Were there any transactions unnecessary, unreasonable, not budgeted or not allowable?	<input type="checkbox"/>	<input type="checkbox"/>
6	Did adequate documentation support transactions?	<input type="checkbox"/>	<input type="checkbox"/>
7	Were the check numbers entered on all invoices to indicate that payment was made?	<input type="checkbox"/>	<input type="checkbox"/>
8	Was there proper authorization?	<input type="checkbox"/>	<input type="checkbox"/>
9	Was the cost classification entered on invoice?	<input type="checkbox"/>	<input type="checkbox"/>
10	Were cost allocated properly in compliance with the cost allocation plan, if applicable?	<input type="checkbox"/>	<input type="checkbox"/>
11	What are the dates of the last posting of the disbursements journal of the general ledger? _____		
12	Are the postings reasonably up to date?	<input type="checkbox"/>	<input type="checkbox"/>
13	(If advances are received) Compare the list of payments from the WIOA to the contractor with the contractor's receipt journal. Use the Disbursements to Service Provided Worksheet to document the comparison.	<input type="checkbox"/>	<input type="checkbox"/>

	Are the two comparisons consistent?  Comments:		
14	Examine the bank statement and reconciliations for the past three To determine if proper reconciliations were made.  Comments.		
15	Date of last reconciliations:		
a	Were outstanding checks itemized?	<input type="checkbox"/>	<input type="checkbox"/>
b	Does it appear that the statement was reconciled with the general ledger?	<input type="checkbox"/>	<input type="checkbox"/>
c	Does the reconciler sign and date the statement or worksheets? Names?	<input type="checkbox"/>	<input type="checkbox"/>
d	Were the reconciliations done by an employee who was not responsible for receipts or disbursements	<input type="checkbox"/>	<input type="checkbox"/>
e	Were there transfers between accounts?	<input type="checkbox"/>	<input type="checkbox"/>
f	Did the bank pay interest on the balance?	<input type="checkbox"/>	<input type="checkbox"/>
16	Ask to see records over 3 years old. Have they been retained?		
17	If accounting is on cash basis, ask to see the worksheets for the last reporting period which show the adjustments made to obtain accrued figures in the report.  Comments:		
18	Does the worksheet agree with the report for that period?	<input type="checkbox"/>	<input type="checkbox"/>
19	Does it appear that the proper adjustments were made?	<input type="checkbox"/>	<input type="checkbox"/>





**AUDIT TEST FOR WIOA COST REIMBURSEMENT CONTRACTS** (This is an analysis of reported Financial Status Reports and Request for Payment Invoices with the comparable cost categories and activities in the general ledger)

Contractor					
Contract #					
Report Period					
Activity	Adult	Approved Budget	Reported Payments	Verified Payments	Audit Variance
<b>Administrative</b>		\$ -	\$ -	\$ -	\$ -
Salaries/Fringe					
Operating Expenses					
Indirect Cost					
<b>Program Expenditures</b>		\$ -	\$ -	\$ -	\$ -
Salaries/Fringe		\$ -	\$ -	\$ -	\$ -
Operating		\$ -	\$ -	\$ -	\$ -
Indirect Cost		\$ -	\$ -	\$ -	\$ -
Supportive Services		\$ -	\$ -	\$ -	\$ -
Instructional Training		\$ -	\$ -	\$ -	\$ -
Participant Wages and Fringe		\$ -	\$ -	\$ -	\$ -
Profit		\$ -	\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -	
		\$ -	\$ -	\$ -	
<b>Total</b>		\$ -	\$ -	\$ -	\$ -

# DISBURSEMENTS TO CONTRACTOR

Contractor		
Contract #		
Date		

<b>From Desk Review: Invoice Payments</b>	<b>\$ Recorded as received by Contractor</b>			
---	--	--	--	--

Check Number	Date	Amount	Date	Comments

#### **IV. PROPERTY**

The Pee Dee LWDA's Property Monitoring will involve the following:

Contractors will be required to provide a copy of their internal inventory listings of items purchased with JTPA, WIOA, and/or WtW funds. Those items that have not received decals or are not reflected on LWDA's list will be labeled and added to an updated listing.

The LWDA will review charges to the contractor's general ledger equipment account to determine that all purchases with JTPA, WIOA, and WtW funds have been properly accounted for. Any purchases made from contract funds should be reported to the LWDA along with documentation and serial numbers.



## Data Request List Financial Monitoring – Program Year 2020

Please use the following checklist to assist you in ensuring that all required documentation has been provided for the financial monitoring review period indicated below.

**Please submit all documentation electronically unless otherwise noted.**

**Entity Name:** \_\_\_\_\_

**Monitoring Period:** \_\_\_\_\_

### Section I

The following items should be submitted as soon as possible but no later than:

Item #	Documentation	Yes	No
<b>General Entity information</b>			
1	Is an independent financial audit of prior year WIOA Funds performed? • If not, please explain:	<input type="checkbox"/>	<input type="checkbox"/>
2	If an audit has been performed, has corrective action been initiated in response to audit findings? • If not, please explain:	<input type="checkbox"/>	<input type="checkbox"/>
<b>Financial Information</b>			
3	Do you have written accounting procedures? <i>(Provide a copy of these procedures for the monitor's review.)</i>	<input type="checkbox"/>	<input type="checkbox"/>
4	If your response is yes, does the procedure include the required fiscal control to safeguard and account for WIOA funds?	<input type="checkbox"/>	<input type="checkbox"/>
5	Where are financial instructions and guidance materials that the Local Workforce Development Area sends?		
6	Is accounting done on a <input type="checkbox"/> cash, <input type="checkbox"/> accrual, or <input type="checkbox"/> modified accrual basis?		
7	(If multi-funded) How are WIOA funds and expenditures recorded to separate them from those of other activities/programs?  <input type="checkbox"/> separate checking accounts <input type="checkbox"/> code used to classify accounts: <input type="checkbox"/> other:		
8	Does the organization receive any income from the WIOA project?  <input type="checkbox"/> interest from bank account? <input type="checkbox"/> sales of products? <input type="checkbox"/> "profit"? <input type="checkbox"/> Other:		
9	How many bank accounts are there with WIOA funds? _____  • Purpose of the account: _____ Name of the bank: _____		

	<ul style="list-style-type: none"> <li>Purpose of the account: _____ Name of the bank: _____</li> <li>Purpose of the account: _____ Name of the bank: _____</li> </ul> <p>If Contractor is on advance payment, are accounts interest bearing? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Is interest income used to offset WIOA Program expenditures? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Is interest income returned to the LWDA? Yes <input type="checkbox"/> No <input type="checkbox"/></p>		
10	<p>Are WIOA bank deposits covered by the Federal Deposit Insurance Corporation? (FDIC)</p> <ul style="list-style-type: none"> <li>If all, or a portion are not, how are these funds collateralized?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
11	<p>Do you have a source of funds to make reimbursement for costs that might be disallowed?</p> <ul style="list-style-type: none"> <li>What is the source of reimbursement?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
12	How long are financial records retained:		
13	Complete Separation of Duties Worksheet. This will provide information about the adequacy of internal controls.		
14	<p>How is access to accounting records controlled?</p> <p>Manual records?</p> <p>Automated records?</p>		
15	Are procedures different for payroll than for other disbursements?	<input type="checkbox"/>	<input type="checkbox"/>
16	Are procedures for payment of indirect costs different from other disbursement:	<input type="checkbox"/>	<input type="checkbox"/>
17	<p>Do individuals with check-signing authority have access to accounting records:</p> <ul style="list-style-type: none"> <li>If yes, who are they?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
18	Can authorized signers sign their own expense or payroll checks?	<input type="checkbox"/>	<input type="checkbox"/>
19	<p>How many signatures are required on a check?</p> <ul style="list-style-type: none"> <li>Names of signatories</li> </ul>		
20	How are voided checks handled?		
21	Under what circumstances are checks signed in advance?		
22	When can disbursements be made other than by check?		
23	<p>When can checks be made out to "cash" or "bearer"?</p> <p>Only petty cash <input type="checkbox"/> Never <input type="checkbox"/> Other <input type="checkbox"/> _____</p>		
24	When can disbursements be made other than by check?		

	Never <input type="checkbox"/> From petty cash <input type="checkbox"/> Other <input type="checkbox"/> _____		
25	<p>Are funds sometimes transferred (other than by writing checks) from one bank account to another:</p> <ul style="list-style-type: none"> <li>• When?</li> <li>• What documentation is required to support the transfer?</li> <li>• Why aren't checks used?</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>
26	<p>Do you have policies with respect to salary advances or loans to staff members?</p> <p>Please explain</p>	<input type="checkbox"/>	<input type="checkbox"/>
27	How do you ensure that an invoice is not paid twice?		
28	<p>How often is the bank statement reconciled?</p> <p>How do you handle any discrepancies?</p>		
29	Does another staff person review the reconciliation after completion?	<input type="checkbox"/>	<input type="checkbox"/>
30	<p>(If WIOA funds are used for out of the area travel) What are the procedures for the request and approval for overnight WIOA travel?</p> <p>In addition, who approves the director's request?</p>		
31	What are the policies regarding travel advances and their reconciliation?		
32	<p>What procedures are required for local travel - both uses of personal and organization-owned vehicles?</p> <p>Allowance: _____ cents/mile for owner's use          _____ cents/mile for organization-owned vehicles</p> <p>Per Diem/Meal Reimbursement: Breakfast ____ Lunch ____ Dinner ____</p> <p>Are receipts required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		
33	<p>Do you rent <input type="checkbox"/> own the building(s) <input type="checkbox"/> used to house WIOA activities?</p> <p>If space is rented, who owns the building (s)?</p> <p>Is there any relationship between the landlord and anyone on the WIOA staff, or Local Workforce Development Board?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, explain</p> <p>Does anyone on the Workforce Development Board or the management/board of the Contractor have any financial interest in the building (s)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, explain</p> <p>Contractor must provide LWDB with copy of the lease.</p>		

	Received: <input type="checkbox"/> Yes <input type="checkbox"/> No		
34	If the building is owned by the contractor, how is the organization compensated for use of its building(s) and how was this amount determined?		
35	Is payroll handled by... separate bank accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No ...contracted payroll services <input type="checkbox"/> Yes <input type="checkbox"/> No  Are there different procedures for staff and participants? <input type="checkbox"/> Yes <input type="checkbox"/> No  How do they differ?		
36	Explain the procedures in making payroll including check distribution, focusing especially on the internal controls that you use.		
a	What is the basis for cost allocation for employees that work in different programs?		
b	Who must approve Time and Attendance Reports?		
c	Who is the designated executive that sets pay rates and changes in pay rates for the organization?		
d	Are these authorizations in writing?	<input type="checkbox"/>	<input type="checkbox"/>
e	Who certifies the payroll for accuracy and that all payees are bonafide budgeted staff or participants?		
f	Are all payroll related payments made by checks?	<input type="checkbox"/>	<input type="checkbox"/>
g	Who authorizes additions to and separations from the payroll?		
h	Are these written authorizations?	<input type="checkbox"/>	<input type="checkbox"/>
i	Who prepares the payroll and who delivers the paychecks?		
j	Are payees required to sign a register/receipt in order to receive a paycheck?	<input type="checkbox"/>	<input type="checkbox"/>
k	Is a pay summary showing wages and itemized deductions provided to employee?	<input type="checkbox"/>	<input type="checkbox"/>
37	Do payees hold positions where they make out their own checks?	<input type="checkbox"/>	<input type="checkbox"/>
38	Are the above procedures in writing? <i>(If so, provide a copy to the LWDA)</i>	<input type="checkbox"/>	<input type="checkbox"/>
39	How are undelivered and long outstanding pay checks handled?		
40	How are deductions for FICA, taxes, insurance, etc. handled?  Is this managed through accounts payable <input type="checkbox"/> , escrow account <input type="checkbox"/> , draw delayed until payable <input type="checkbox"/> , other		
41	Does anyone routinely compare endorsements against signatures on file?	<input type="checkbox"/>	<input type="checkbox"/>
42	Does the Contractor have staff positions which correspond with the budgeted positions in the contract?  If no, please explain.	<input type="checkbox"/>	<input type="checkbox"/>
43	Are staff salaries paid in accordance with salaries established in the contract?  If no, please explain.	<input type="checkbox"/>	<input type="checkbox"/>

44	In cases where staff performs both WIOA functions and non-WIOA functions, is actual time documented to verify accurate distribution of time?  If no, please explain.	<input type="checkbox"/>	<input type="checkbox"/>
45	Is time charged to administrative and non-administrative cost categories properly?  How is this documented?	<input type="checkbox"/>	<input type="checkbox"/>
46	Are time distributions supported by staff itineraries /activity diaries?	<input type="checkbox"/>	<input type="checkbox"/>
47	Are travel costs in accordance in WIOA budgeted positions?	<input type="checkbox"/>	<input type="checkbox"/>
48	<b>Separation of Duties Questionnaire - Signed copy</b>	<input type="checkbox"/>	<input type="checkbox"/>

**Additional Information Required as Follows:**

<b>Data Submission Complete</b>	<input type="checkbox"/>
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## Section II

The following items should be provided during the Entrance Conference on:

Item #	Documentation	Provided	N/A
1	Bank statements for the prior 3 months.	<input type="checkbox"/>	<input type="checkbox"/>
2	Payroll Registers – <b>for the month of</b> <ul style="list-style-type: none"> <li>• All WIOA related timesheets (Direct and Indirect)</li> </ul>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3	Activity diaries to support time sheets provided in #2 above.	<input type="checkbox"/>	<input type="checkbox"/>
4	All adjusting journal entries for reporting period.	<input type="checkbox"/>	<input type="checkbox"/>
5	All invoices, purchase orders, canceled checks (if available), etc. to support the sample of disbursements to be examined.		
6	Copy of your cost allocation plan		
7	Copy of your lease agreements.		
8	Copy of all invoices and documents for items posted in your equipment account in your general ledger. This includes procurement documentation, if applicable. <ul style="list-style-type: none"> <li>• Agency inventory listing, which includes equipment purchased with WIOA funds.</li> <li>• Copy of your approved indirect cost plan, if applicable.</li> <li>• Original contract(s).</li> <li>• Invoice documenting renewal of fidelity bonding policy.</li> <li>• Written accounting procedures.</li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

## Separation of Duties

Please list the name and title of individuals that are responsible for the functions/actions listed below.

		Name & Title
<b>Cash/Check Handling (Receipts, Expenditures, Reconciliation)</b>		
1	Receives Cash/Deposits	
2	Prepares Bank Deposit	
3	Reconciles Deposits to amounts recorded in G/L	
4	Prepares Voucher Package for payment	
5	Initiates Wire Transfers	
6	Approved Wire Transfers	
7	Posts Expenditures to Subsidiary/General ledger	
8	Maintains Check Stock	
9	Maintains Signature Stamp (if applicable)	
10	Reconciles Bank Statements	
11	Approved Bank Reconciliations	
<b>Petty Cash (if applicable)</b>		
12	Disburse Petty Cash	
13	Reconciles Petty Cash	
14	Replenishes Petty Cash fund	
15	Posts Petty Cash Activity to G/L	
<b>Purchasing</b>		
16	Prepares Purchase Order	
17	Approved Purchase Order	
18	Receives goods from Vendor	
19	Approves Vendor Invoices for Payment	
<b>Payroll</b>		
20	Prepares payroll for processing	
21	Approves payroll for processing	
22	Distributes Payroll checks or initiates direct deposits	
23	Certifies Time Attendance Records of Staff	
24	Authorized Payroll for New Hires	
<b>Inventory</b>		
25	Modifies inventory records	
26	Reconciles physical inventory counts to inventory records	
27	Reviews reconciliation of inventory records	
28	Dispose of obsolete inventory	
29	Records adjustments to inventory records	
<b>General Ledger</b>		
30	Responsible for modifying (adding, deleting, etc.) G/L accounts	
31	Approves Changes to G/L accounts	
32	Approves journal entries	
33	Posts journal entries	
34	Allocates Costs Pools (if applicable)	
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