

**Workforce Innovation and Opportunity Act Administrative Policy #203**

# Subject: Local Monitoring and Oversight

**Effective Date: 07/01/12**

# Revised: 01/10/18

# References: WIOA Public Law No. 113-128

# VWL #11-08

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**Policy Statement:**

WIOA oversight and monitoring is essential to ensure the integrity of the WIOA system and WIOA funds, to review

performance, assess compliance with applicable laws and regulations and identify successful methods and practices that serve to enhance the system as a whole through continuous improvement. This policy provides the framework for the Central Virginia Workforce Development Board (WDB) to carry out its required duty to conduct oversight of the WIOA programs and the One-stop delivery through regular oversight and monitoring of its WIOA activities and those of its sub-recipients.

Compliance monitoring will be conducted by reviewing records and documents maintained by the

Central Virginia WDB administrative office on each program or contract; conducting onsite reviews of procedures,

records and documents maintained by the contractor or program operations staff; and submitting written reports

of findings, including corrective action recommendations if appropriate. The Central Virginia WDB will also monitor

its service provider’s performance for any additional non-WIOA funding sources such as grants, partnerships, etc.

# Frequency:

Through regular oversight & monitoring of WIOA sub-recipients and contractors, the Central Virginia WDB will assess compliance with regulations & policies established by the WIOA, VCCS, and Central Virginia WDB as well as compliance with the terms and conditions of contracts between the WDB and operators. Formal monitoring activities may be conducted quarterly but at least once per year, and appropriate corrective action will be administered when evidence indicates a possible violation of one of the aforementioned regulations or policies. The major areas of compliance review include, but are not limited to, administrative, financial & program.

More informal monitoring and/or oversight activities, both announced and unannounced, may also occur during

the course of a program year in order to provide service providers additional feedback opportunities and identification

of any potential issues or concerns in advance of the annual formal reviews.

# Method:

Both formal and informal monitoring, as described in Section 1, will be conducted by the Operations Coordinator of the Central Virginia WDB.

# Process

* 1. Monitoring of sub-recipients shall follow a standardized review methodology that will result in written reports which record findings, any needed corrective actions, and due dates for the accomplishment of corrective actions. Reports may also identify concerns that do not rise to the level of a finding, as well as recording any best or promising practices that are observed.
  2. All written reports and other documentation pertaining to monitoring and other oversight activities will be made available for review by the WDB and its committees, as well as federal and state officials.
  3. WDB staff will be responsible for ensuring that once a final report and corrective action plan are issued, follow up occurs in a timely fashion to resolve the findings that may be identified.
  4. Elements reviewed formal monitoring shall follow the checklist at attachment 1 of this policy.
  5. The state WIOA system of record (Virtual One Stop, or VOS) will be used to cross-check data during reviews to ensure that data is accurate, timely, consistent with the file documentation and reflective of services provided.

1. **Corrective Action and Follow-up**

Corrective action and follow-up is conducted to eliminate reported violations. Corrective action plans are developed and implemented for the purposes of alleviating reported inadequacies in acceptable operating procedures, standards of accountability or program performance standards. Written responses to initiate corrective action may include any of the following:

1. No plan for corrective action with written justification for not initiating such action (NOTE: This action could only be taken with board approval, otherwise a corrective action plan must be completed);
2. A written plan for corrective action which includes dates for implementing and completing such action; or
3. A written explanation of the appropriate action which has been initiated prior to the issuance for the request for corrective action.

***Attachment 1***

*Central Virginia WDB Administrative Policy #203*

# Formal Monitoring Elements Checklist

**Administrative review items**

* Sub-recipient Contract compliance
* Contractor policies align with federal, state, and local WIOA guidance
* Adherence to associated MOUs/ Operator agreements
* Prior monitoring reports /corrective actions
* Actual Performance

# Financial review items

* Internal Controls
* Expenditures
* Financial Transactions/reporting
* Reimbursement requests
* Procurement
* Cash Management
* Payroll
* Inventory/Property Management
* Cost allowability
* Cost limitations and categories
* Percentage of budget expended vs. number of contract months remaining
* Sub-recipient A-133 Audit requirements
* Petty Cash (if applicable)
* Property management

# Programmatic review items

* WIOA Adult/Dislocated Worker/Youth Eligibility verification documentation
  + **General** program eligibility, e.g., United States (U.S.) citizenship (or right to work in the U.S.), age, and selective service registration; and
  + **Specific** program eligibility, e.g., income level, dislocated worker criteria, or a youth barrier.
* Program documentation (e.g. properly signed and dated applications, releases, EEO and grievance notice, etc.)
* Service delivery and documentation
  + Appropriate progression of services (core-intensive –training)
  + Documentation of need and referral to more intensive services
* Training
* VOS
* Documentation of appropriate assessments (TABE, Career Interest, Skill, Pre/Post work readiness)
* Documentation that services are in line with assessments and interests (IEP/ISS)
* Documentation that supports training and tracks payment for training
* Documentation of need, classification and payment tracking for supportive services
* Priority of service is followed
* Required documentation is complete and in participant files (contracts, training plans, ITAs, application for other financial aid, etc.)
* Compliance with local area guidance on training (cost caps, documentation requirements, etc.)
* Documentation shows that training is appropriate for participant and provides access to transferrable skills
* Activity codes must match records in participant files and be reflective of services provided
* Activities must be entered into the system within 14 days, in accordance with the guidance on Timely Data Entry (VWL 08-07)
  + Case closure, exit
    - Cases are not being held open for lengthy periods of time when services are not being provided to participants
    - VOS records and written documentation that supports use of global exclusions, if they are applied
  + Follow-up
* Documentation that post-employment follow-up services designed to ensure job retention, wage gains, and career progress is being done
* Follow-up is recorded in VOS to ensure performance related items are captured (may be entered under individual activities, case closure, or in Follow-up dropdown box)
  + Delivery of Services Quality of Services Customer Satisfaction EEO Requirements/Grievance Procedures
  + MIS Reporting & Services Tracking