

Subcontractor Name: MO-KAN Regional Council  
Programs Monitored: WIOA Adult and Dislocated Worker  
Monitor: Kerry Savage, Compliance Coordinator  
Reviewed By: Brent Stevens, Executive Director  
Signature: Brent Stevens  
Date: 06 / 01 / 2022

## I. Executive Summary and Scope of the Monitoring

The Northwest Workforce Development Board Compliance Coordinator conducted monitor reviews of MO-KAN Regional Council for Program Year 2022 in compliance with the requirements set forth by 20 CFR (Code of Federal Regulations) Part 683.410, Office of Workforce Development (OWD) *Issuance 11-2021 (Sub-State Monitoring Policy)*, and Northwest Workforce Development Board policy P7 (*Sub-State Monitoring Policy*).

The WDB conducted a programmatic monitoring of the MO-KAN Regional Council's operation of the WIOA Adult and Dislocated Worker Programs for the period July 1, 2021 through March 30, 2022, in fulfillment of the requirements of the WIOA, OWD Issuances, and NW WDB Policies. This review was conducted to ensure the quality of services and the performance of the programs are in compliance with current agreements and in a manner that will ensure achievement of program goals and outcomes.

Programmatic monitoring is not an audit and due to the limited scope of the monitoring, may not disclose all systems' weaknesses. The results presented in this report are based on the areas reviewed by WDB staff. The United States Department of Labor, the Missouri Office of Workforce Development, or any other applicable federal or state body may conduct reviews and have different conclusions, opinions, and/or results.

The scope of the programmatic monitoring utilized guidelines established by the Office of Workforce Development's (OWD) Sub-state Monitoring Issuance and Northwest Workforce Development Board's Sub-State Monitoring Policy.

The Monitoring utilized a random sample of files that were reviewed remotely in the first and third quarters. These same files were reviewed on-site in quarters two and four. The following items were reviewed:

- Documentation of participant and training eligibility and/or priority for the programs and services received;
- Orientation to services;
- Signed acknowledgement from the participant that notification of complaint and grievance rights and procedures was received;
- Justification for the provision of Individualized Career Services or Training services;
- 5. Method of assessment;
- Employment planning;
- Individual Training Accounts including all applicable paperwork/documentation;
- Work Based Learning including all applicable paperwork/documentation;

- Appropriateness and accuracy of participant payments (i.e., Supportive Services);
- Appropriate data entry;
- Posting of outcomes, including the attainment of a degree or certificate, measurable skill gains, and any supplemental employment data;
- Examination of historical change requests;
- Compliance issues cited in prior federal, State, and local reviews;
- Determination if prior corrective measures have proven effective;
- Compliance with the requirements set forth in the region's Methods of Understanding, Request for Proposals, and Contract Agreements

## II. Results of Programmatic Monitoring Review

The WDB rates issues discovered during financial monitoring review at two levels of severity: compliance findings and areas of concern, as defined below. In addition, opportunities have been identified and are also included below.

Compliance Findings - Compliance findings (findings) are items that disclose areas of significant non-compliance with WIOA, federal regulations, workforce development issuances or guidance, and material weaknesses in internal controls. Findings require written corrective action plans by either accepting the WDB's recommendation or proposing and receiving approval for an alternate course of action. Regulatory compliance monitors will provide citations from WIOA, federal regulations, or OWD issuances and procedures to identify specific area of non-compliance and will explain the corrective measures necessary for resolution.

The results of our monitoring disclosed seven compliance findings.

### **Compliance Finding 1:**

Training activity start date and start date noted on the ITA conflict. OWD Issuance 04-2018 requires activity codes "must be posted on the date the service occurs or the date training commences."

Corrective Action:

Verify which training start date is correct. If necessary and possible, submit a change request to correct.

### **Compliance Finding 2:**

A participant's measurable skill gain for PY20 has not been posted. OWD Issuance 01-2021 requires a MSG for each program year the participant is in training.

Corrective Action:

Contact the participant or training provider for documentation of a skill gain.

### **Compliance Finding 3:**

The Northwest Region isn't listed as an approved provider on the Eligible Training Provider sheet in the file as required by OWD Issuance 22-2019.

Corrective Action:

Determine if the Northwest Region was an approved region at the time training began and place the documentation in the file.

**Compliance Finding 4:**

Documentation of elements required for eligibility are not in the participant file. The Technical Assistance Guide indicates, "To be eligible to receive WIOA-funded services, all males born on or after January 1, 1960 must present documentation showing compliance with the Selective Service registration requirements or exceptions..."

Corrective Action:

Verify registration with the selective service and post the documentation to the file.

**Compliance Finding 5:**

An applicant statement does not have the participant's signature. The Technical Assistance Guide requires a participant signature on an applicant statement.

Corrective Action:

Remove and securely destroy the unsigned applicant statement from the participant file. Elements listed on the applicant statement can be verified with other documents. Therefore, the applicant statement isn't necessary.

**Compliance Finding 6:**

The effective date on an Eligible Training Provider sheet has expired. This is required by OWD Issuance 22-2019.

Corrective Action:

Determine if the training provider was an approved provider at the time training began. Place the documentation in the file.

**Compliance Finding 7:**

A skills progression was posted three days after enrolling into WIOA. The participant had been enrolled in training prior to enrolling in WIOA and was included in progress reports from the training provider. However, since the participant had not been enrolled in WIOA for the training period for which the grades corresponded, this skills progression cannot count toward WIOA performance.

Corrective Action:

Remove the skill gain and enter a corrective case note.

Areas of Concern - Areas of concern (concerns) are items that may or may not be compliance-based but may impede effectiveness and efficiency of providing services to individual and business customers. Concerns are suggestions to management and do not generally require a response unless specifically indicated. Resolved findings and accompanying corrective actions may be included in this category.

Concerns, although resolved, may rise to a level of severity that is subject to follow-up during subsequent review. Regulatory compliance monitors may offer suggestions or guidance to assist the entity in making improvements or may make a referral for further technical assistance.

The results of our monitoring disclosed ten Areas of Concern. The areas of concern may require corrective action.

**Concern 1:**

A method of verification is selected in MOJOBS for which there is no documentation in the file.

**Corrective Action:**

Staff should ensure they are choosing the correct method of verification within MOJOBS when validating elements. Furthermore, when a method of verification is indicated, staff should ensure the validation documents are present in the file. No response required.

**Concern 2:**

A participant record has a discrepancy in the date of dislocation.

**Corrective Action:**

Staff should make every effort to correctly enter data into MOJOBS. Enter a corrective case note verifying the correct date of dislocation.

**Concern 3:**

Multiple files had no resume, or the resume was allowed to expire.

**Corrective Action:**

Staff should ensure resumes are entered during enrollment and kept active to assist with job searching. No response required.

**Concern 4:**

Not all services delivered had corresponding activities opened, or were missing case notes explaining the activity opened as required by OWD Issuance 04-2018.

**Corrective Action:**

Staff should ensure case notes explain how all activities and services were delivered. No Response Required.

**Concern 5:**

Payments, activities, services had incorrect start/exit dates.

**Corrective Action:**

Staff need to ensure the correct dates are entered when posting activities; verify start/exit dates of training and the "mail date" of payments are the dates corresponding to those activities. No response required.

**Concern 6:**

Some employment plans were lacking in assessments, counseling, vocational exploration activities, or proper training justification.

**Corrective Action:**

Staff need to review OWD Issuance 09-2020 and sign an attestation to confirm the date of the review. If technical assistance is necessary, it should be requested in the response to the monitoring.

**Concern 7:**

A Wagner Peyser application was left incomplete. All WIOA participants should have a completed Wagner Peyser application.

**Corrective Action:**

Determine a process to ensure the Wagner Peyser is complete and submit the process in writing to the board.

**Concern 8:**

Not all files had the exit information included the closure tab as required by OWD Issuance 08-2021. Files also failed to close employment plans, and no case notes were entered explaining the exit.

**Corrective Action:**

Staff need to review OWD Issuance 08-2021 and sign an attestation to confirm the date of the review. If technical assistance is necessary, it should be requested in the response to the monitoring.

**Concern 9:**

Staff have a practice of redacting all but the last four digits from the copy of the social security card. Per guidance from the OWD policy team, the social security number cannot be redacted from a document being used to verify the social security number.

**Corrective Action:**

Staff should stop the practice of redacting the social security number from the document used to verify the social security number. No response required.

**Concern 10:**

In one participant's file, it appears that duplicate training milestones were entered. This creates incorrect performance data in state reports.

**Corrective Action:**

Determine if the milestone is, in fact, a duplicate entry. If so, submit a change request to delete the milestone and enter a corrective case note.

Opportunities - Opportunities are items the WDB has suggested for revision to strengthen internal controls, improve efficiencies or other processes. These pertain to effectiveness issues and do not require a written response.

During the monitoring, the WDB identified the following opportunities for consideration:

**Opportunity 1:**

It was found during the monitoring staff are requesting and collecting documentation that is not required in the Technical Assistance Guide. Requiring additional documentation that is not required can create a hardship/burden for participants during the enrollment process.

**Opportunity 2:**

It was noted during the monitoring that multiple participants had exited the program with open goals/objectives. Going forward, effort should be made to ensure all participants are able to meet their goals. If the goals change, this information should be reflected in the employment plan and an explanation provided within a case note.

### **III. Prior Year Corrective Action Status**

All corrective actions in the prior year monitoring were adequately addressed.

A written response to address these concerns, if required, are due within 30 days of the date of this report. The response and action plan are to be submitted to the WDB Office to the attention of Brent Stevens and Kerry Savage at [bstevens@ncmissouri.edu](mailto:bstevens@ncmissouri.edu) and [ksavage@mail.ncmissouri.edu](mailto:ksavage@mail.ncmissouri.edu)

Subcontractor Name: St Joseph Youth Alliance  
Programs Monitored: WIOA Youth  
Monitor: Kerry Savage, Compliance Coordinator  
Reviewed By: Brent Stevens, Executive Director  
Signature: Brent Stevens  
Date: 06 / 01 / 2022

## I. Executive Summary and Scope of the Monitoring

The Northwest Workforce Development Board Compliance Coordinator conducted monitor reviews of St Joseph Youth Alliance for Program Year 2022 in compliance with the requirements set forth by *20 CFR (Code of Federal Regulations) Part 683.410*, Office of Workforce Development (OWD) *Issuance 11-2021 (Sub-State Monitoring Policy)*, and Northwest Workforce Development Board policy *P7 (Sub-State Monitoring Policy)*.

The WDB conducted a programmatic monitoring of the St Joseph Youth Alliance's operation of the WIOA Youth Program for the period July 1, 2021 through March 30, 2022, in fulfillment of the requirements of the WIOA, OWD Issuances, and NW WDB Policies. This review was conducted to ensure the quality of services and the performance of the programs are in compliance with current agreements and in a manner that will ensure achievement of program goals and outcomes.

Programmatic monitoring is not an audit and due to the limited scope of the monitoring, may not disclose all systems' weaknesses. The results presented in this report are based on the areas reviewed by WDB staff. The United States Department of Labor, the Missouri Office of Workforce Development, or any other applicable federal or state body may conduct reviews and have different conclusions, opinions, and/or results.

The scope of the programmatic monitoring utilized guidelines established by the Office of Workforce Development's (OWD) Sub-state Monitoring Issuance and Northwest Workforce Development Board's Sub-State Monitoring Policy.

The Monitoring utilized a random sample of files that were reviewed remotely in the first and third quarters. These same files were reviewed on-site in quarters two and four. The following items were reviewed:

- Documentation of participant and training eligibility and/or priority for the programs and services received;
- Orientation to services;
- Signed acknowledgement from the participant that notification of complaint and grievance rights and procedures was received;
- Justification for the provision of Individualized Career Services or Training services;
- 5. Method of assessment;
- Employment planning;
- Individual Training Accounts including all applicable paperwork/documentation;
- Work Based Learning including all applicable paperwork/documentation;

- Appropriateness and accuracy of participant payments (i.e., Supportive Services);
- Appropriate data entry;
- Posting of outcomes, including the attainment of a degree or certificate, measurable skill gains, and any supplemental employment data;
- Examination of historical change requests;
- Compliance issues cited in prior federal, State, and local reviews;
- Determination if prior corrective measures have proven effective;
- Compliance with the requirements set forth in the region's Methods of Understanding, Request for Proposals, and Contract Agreements

In addition to the items listed above the following items were reviewed for the Youth Program

- Out-of-School Youth 75% expenditure requirement
- 20% work-based learning with an educational component requirement
- 5% limit on In-School Youth enrolled with "Requires additional assistance" barrier, and
- 5% over-income exception

## **II. Results of Programmatic Monitoring Review**

The WDB rates issues discovered during financial monitoring review at two levels of severity: compliance findings and areas of concern, as defined below. In addition, opportunities have been identified and are also included below.

Compliance Findings - Compliance findings (findings) are items that disclose areas of significant non-compliance with WIOA, federal regulations, workforce development issuances or guidance, and material weaknesses in internal controls. Findings require written corrective action plans by either accepting the WDB's recommendation or proposing and receiving approval for an alternate course of action. Regulatory compliance monitors will provide citations from WIOA, federal regulations, or OWD issuances and procedures to identify specific area of non-compliance and will explain the corrective measures necessary for resolution.

The results of our monitoring disclosed three compliance findings.

### **Finding 1:**

Not all services delivered had corresponding activities opened as required by OWD Issuance 04-2018.

### **Corrective Action:**

Staff need to review the list of activities not opened, and submit change requests to have appropriate activities open. If the activity cannot be opened through a change request due to time limitations, a case note needs to be entered explaining the error. Once this has been completed a listing of activities and case note should be sent to the monitor for confirmation. Staff need to review issuance 04-2018 and sign an attestation to confirm the date of the review. If technical assistance is necessary, it should be requested in the response to the monitoring.

**Finding 2:**

A supportive service activity was opened in the statewide case management system that did not utilize funding. OWD Issuance 04-2018 explains when activities codes should be utilized.

**Corrective Action:**

Staff need to submit a change request to void the activity that was inappropriately opened. If the activity cannot be voided through a change request, a case note needs to be entered explaining the error.

**Finding 3:**

Cases were found where there was no signed WIOA intake application. This intake application is used to attest to multiple WIOA eligibility requirements. OWD Issuance 05-2020 explains which data elements are required to be verified through a signed WIOA intake application.

**Corrective Action:**

Staff need to work to get the WIOA intake applications signed that were not signed. If staff are unable to get the document signed, case note should be entered and an explanation needs to be sent with the monitoring response explaining why the applications were unable to be signed.

Areas of Concern - Areas of concern (concerns) are items that may or may not be compliance-based but may impede effectiveness and efficiency of providing services to individual and business customers. Concerns are suggestions to management and do not generally require a response unless specifically indicated. Resolved findings and accompanying corrective actions may be included in this category. Concerns, although resolved, may rise to a level of severity that is subject to follow-up during subsequent review. Regulatory compliance monitors may offer suggestions or guidance to assist the entity in making improvements or may make a referral for further technical assistance.

The results of our monitoring disclosed eleven Areas of Concern. The areas of concern may require corrective action.

**Concern 1:**

Multiple files had no resume, or the resume was allowed to expire.

**Corrective Action:**

Staff should ensure resumes are entered during enrollment and kept active to assist with job searching. No response required.

**Concern 2:**

The summary of eligibility as required by OWD Issuance 02-2021 was not always present in case notes.

**Corrective Action:**

Staff need to ensure a summary of eligibility is provided in each initial case note as required by OWD Issuance 02-2021. No response required.

**Concern 3:**

Not all barriers noted in the Objective Assessment were addressed in the Employment Plan.

**Corrective Action:**

Staff should ensure Employment Plans address all barriers noted in the Objective Assessment. No response required.

**Concern 4:**

Payments, activities, services, credentials, and measurable skill gains had incorrect start/exit dates.

**Corrective Action:**

Staff need to ensure the correct dates are entered when posting activities; verify start/exit dates of training and the "mail date" of payments are the dates corresponding to those activities. No response required.

**Concern 5:**

Not all case notes were entered in a timely manner in accordance with OWD Issuance 02-2021.

**Corrective Action:**

The NW WDB in partnership with OWD has provided multiple training opportunities on entering case notes. While there has been improvement staff need to continue to ensure case notes are entered timely. No response required.

**Concern 6:**

Not all files had the exit information included the closure tab as required by OWD Issuance 08-2021. Files also failed to close employment plans, and no case notes were entered explaining the exit.

**Corrective Action:**

Staff need to review OWD Issuance 08-2021 and sign an attestation to confirm the date of the review. If technical assistance is necessary, it should be requested in the response to the monitoring.

**Concern 7:**

Multiple files had duplicated activities entered in the statewide case management system, which causes a reporting error on federal reports.

**Corrective Action:**

Staff need to ensure they are not entering the same activities twice when recording the information in the statewide case management system. No response required.

**Concern 8:**

Income that was entered into the WIOA Application was unable to be verified as required in OWD Issuance 05-2020.

**Corrective Action:**

Staff need to ensure all information entered in the statewide case management system is accurate and verifiable as outlined by OWD Issuance 05-2020. Case notes should be entered explaining how income was calculated. No response required.

**Concern 9:**

Rather than creating new activities when services are provided, a case note is added to the original activity.

**Corrective Action:**

Each time a service is provided, a new activity should be posted and a corresponding case note entered. No response required.

**Concern 10:**

An individual training account was used to fund a training for a participant that was unable to be determined eligible for the WIOA Youth Program.

**Corrective Action:**

Staff need to ensure proper documentation is gathered to determine participant eligibility prior to delivering services. The costs associated with this training have been reimbursed to the program. No response required.

**Concern 11:**

The NW WDB local policy P2 – Supportive Services, was not followed when purchasing a bus pass for a participant.

**Corrective Action:**

Ensure supportive services are paid pursuant to the local policy. No response required.

Opportunities - Opportunities are items the WDB has suggested for revision to strengthen internal controls, improve efficiencies or other processes. These pertain to effectiveness issues and do not require a written response.

During the monitoring, the WDB identified the following opportunities for consideration:

**Opportunity 1:**

Enter appropriate activities when referring to services. The process of adding referral activities in the system helps track the utilization of partner services. This includes the referral to WIOA services.

**Opportunity 2:**

It was found during the monitoring staff are requesting and collecting documentation that is not required in the Technical Assistance Guide. Requiring additional documentation that is not required can create a hardship/burden for participants during the enrollment process.

**Opportunity 3:**

It was noted during the monitoring that multiple participants who were assisted with earning their HiSet showed an interest in Post-Secondary training, but the services were not delivered. Once the participant received their HiSet, they were allowed to exit the program. Going forward, effort should be made to ensure all participants are able to meet their goals. If the goals change, this information should be reflected in the employment plan and an explanation provided within a case note.

**III. Prior Year Corrective Action Status**

All corrective actions in the prior year monitoring were adequately addressed.

A written response to address these concerns, if required, are due within 30 days of the date of this report. The response and action plan are to be submitted to the WDB Office to the attention of Brent Stevens and Kerry Savage at [bstevens@ncmissouri.edu](mailto:bstevens@ncmissouri.edu) and [ksavage@mail.ncmissouri.edu](mailto:ksavage@mail.ncmissouri.edu)

Subcontractor Name: Northwest Missouri Regional Council of Governments  
Programs Monitored: WIOA Adult, Dislocated Worker  
Monitor: Kerry Savage, Compliance Coordinator  
Reviewed By: Brent Stevens, Executive Director  
Signature: Brent Stevens  
Date: 05 / 31 / 2022

## I. Executive Summary and Scope of the Monitoring

The Northwest Workforce Development Board Compliance Coordinator conducted monitor reviews of Northwest Missouri Regional Council of Governments for Program Year 2022 in compliance with the requirements set forth by *20 CFR (Code of Federal Regulations) Part 683.410*, Office of Workforce Development (OWD) *Issuance 11-2021 (Sub-State Monitoring Policy)*, and Northwest Workforce Development Board policy *P7 (Sub-State Monitoring Policy)*.

The WDB conducted a programmatic monitoring of the Northwest Missouri Regional Council of Governments operation of the WIOA Adult, and Dislocated Worker Programs for the period July 1, 2021 through March 30, 2022, in fulfillment of the requirements of the WIOA, OWD Issuances, and NW WDB Policies. This review was conducted to ensure the quality of services and the performance of the programs are in compliance with current agreements and in a manner that will ensure achievement of program goals and outcomes.

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The Monitoring utilized a random sample of files that were reviewed remotely in the first and third quarters. These same files were reviewed on-site in quarters two and four. The following items were reviewed:

- Documentation of participant and training eligibility and/or priority for the programs and services received;
- Orientation to services;
- Signed acknowledgement from the participant that notification of complaint and grievance rights and procedures was received;
- Justification for the provision of Individualized Career Services or Training services;
- 5. Method of assessment;
- Employment planning;
- Individual Training Accounts including all applicable paperwork/documentation;

- Work Based Learning including all applicable paperwork/documentation;
- Appropriateness and accuracy of participant payments (i.e., Supportive Services);
- Appropriate data entry;
- Posting of outcomes, including the attainment of a degree or certificate, measurable skill gains, and any supplemental employment data;
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## II. Results of Programmatic Monitoring Review

The WDB rates issues discovered during financial monitoring review at two levels of severity: compliance findings and areas of concern, as defined below. In addition, opportunities have been identified and are also included below.

**Compliance Findings** - Compliance findings (findings) are items that disclose areas of significant non-compliance with WIOA, federal regulations, workforce development issuances or guidance, and material weaknesses in internal controls. Findings require written corrective action plans by either accepting the WDB's recommendation or proposing and receiving approval for an alternate course of action. Regulatory compliance monitors will provide citations from WIOA, federal regulations, or OWD issuances and procedures to identify specific area of non-compliance and will explain the corrective measures necessary for resolution.

The results of our monitoring disclosed one compliance finding.

### **Compliance Finding 1:**

Documentation to verify attainment of a credential and the date of completion of the training is not in the file.

Corrective Action: PD has contacted the training provider to obtain this documentation. Once it is received, verify the date of the credential matches data on the Credentials tab and notify WDB staff.

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The results of our monitoring disclosed four Areas of Concern. The areas of concern may require corrective action.

**Concern 1:**

Employment plans are missing elements required by OWD Issuance 09-2020.

**Corrective Action:**

Staff need to review OWD Issuance 09-2020 and sign an attestation to confirm the date of the review. If technical assistance is necessary, it should be requested in the response to the monitoring.

**Concern 2:**

Not all case notes were entered in a timely manner in accordance with OWD Issuance 02-2021.

**Corrective Action:**

The NW WDB in partnership with OWD has provided multiple training opportunities on entering case notes. While there has been improvement staff need to continue to ensure case notes are entered timely. No Response Required.

**Concern 3:**

Multiple files had no resume, or the resume was allowed to expire.

**Corrective Action:**

Staff should ensure resumes are entered during enrollment and kept active to assist with job searching. No response required.

**Concern 4:**

Not all services delivered had corresponding activities opened, or were missing case notes explaining the activity opened as required by OWD Issuance 04-2018.

**Corrective Action:**

Staff should ensure case notes explain how all activities and services were delivered. No Response Required.

Opportunities - Opportunities are items the WDB has suggested for revision to strengthen internal controls, improve efficiencies or other processes. These pertain to effectiveness issues and do not require a written response.

During the monitoring, the WDB identified the following opportunities for consideration:

**Opportunity 1:**

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### **III. Prior Year Corrective Action Status**

All corrective actions in the prior year monitoring were adequately addressed.

A written response to address these concerns, if required, are due within 30 days of the date of this report. The response and action plan are to be submitted to the WDB Office to the attention of Brent Stevens and Kerry Savage at [bstevens@ncmissouri.edu](mailto:bstevens@ncmissouri.edu) and [ksavage@mail.ncmissouri.edu](mailto:ksavage@mail.ncmissouri.edu)

Subcontractor Name: Green Hills Regional Planning Commission  
Programs Monitored: WIOA Adult, Dislocated Worker, Youth  
Monitor: Kerry Savage, Compliance Coordinator  
Reviewed By: Brent Stevens, Executive Director  
Signature: Brent Stevens  
Date: 05 / 31 / 2022

## I. Executive Summary and Scope of the Monitoring

The Northwest Workforce Development Board Compliance Coordinator conducted monitor reviews of Green Hills Regional Planning Commission for Program Year 2022 in compliance with the requirements set forth by *20 CFR (Code of Federal Regulations) Part 683.410*, Office of Workforce Development (OWD) *Issuance 11-2021 (Sub-State Monitoring Policy)*, and Northwest Workforce Development Board policy *P7 (Sub-State Monitoring Policy)*.

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- Compliance issues cited in prior federal, State, and local reviews;
- Determination if prior corrective measures have proven effective;
- Compliance with the requirements set forth in the region's Methods of Understanding, Request for Proposals, and Contract Agreements

In addition to the items listed above the following items were reviewed for the Youth Program

- Out-of-School Youth 75% expenditure requirement
- 20% work-based learning with an educational component requirement
- 5% limit on In-School Youth enrolled with "Requires additional assistance" barrier, and
- 5% over-income exception

## **II. Results of Programmatic Monitoring Review**

The WDB rates issues discovered during financial monitoring review at two levels of severity: compliance findings and areas of concern, as defined below. In addition, opportunities have been identified and are also included below.

Compliance Findings - Compliance findings (findings) are items that disclose areas of significant non-compliance with WIOA, federal regulations, workforce development issuances or guidance, and material weaknesses in internal controls. Findings require written corrective action plans by either accepting the WDB's recommendation or proposing and receiving approval for an alternate course of action. Regulatory compliance monitors will provide citations from WIOA, federal regulations, or OWD issuances and procedures to identify specific area of non-compliance and will explain the corrective measures necessary for resolution.

The results of our monitoring disclosed one compliance finding. A written response to address this finding is due to the Board within 30 days of the date of this report.

### **Compliance Finding 1:**

Monitoring found a Measurable Skill Gain where the date earned was unable to be validated with the documentation provided. Federal Data Element Validation guidelines (TEGL 22-15) mandate that Activity Codes must be posted on the date the service occurs or the date training commences. Additionally, the Activity Code must be closed on the exact date the service was completed or ceased to be rendered.

### **Corrective Action:**

Staff must work with the participant to gather the proper documentation to validate the Measurable Skill Gain or remove the item from the statewide case management system.

Areas of Concern - Areas of concern (concerns) are items that may or may not be compliance-based but may impede effectiveness and efficiency of providing services to individual and business customers. Concerns are suggestions to management and do not generally require a response unless specifically indicated. Resolved findings and accompanying corrective actions may be included in this category. Concerns, although resolved, may rise to a level of severity that is subject to follow-up during subsequent review. Regulatory compliance monitors may offer suggestions or guidance to assist the entity in making improvements or may make a referral for further technical assistance.

The results of our monitoring disclosed seven Areas of Concern. The areas of concern may require corrective action.

**Concern 1:**

Training justifications within the Employment Plan did not meet the requirement of OWD Issuance 09-2020.

**Corrective Action:**

Staff need to review OWD Issuance 09-2020 and sign an attestation to confirm the date of the review. If technical assistance is necessary, it should be requested in the response to the monitoring.

**Concern 2:**

Multiple files had no resume, or the resume was allowed to expire.

**Corrective Action:**

Staff should ensure resumes are entered during enrollment and kept active to assist with job searching. No response required.

**Concern 3:**

Not all barriers noted in the Objective Assessment were addressed in the Employment Plan.

**Corrective Action:**

Staff should ensure Employment Plans address all barriers noted in the Objective Assessment. No Response Required.

**Concern 4:**

Not all services delivered had corresponding activities opened, or were missing case notes explaining the activity opened as required by OWD Issuance 04-2018.

**Corrective Action:**

Staff should ensure case notes explain how all activities and services were delivered. No Response Required.

**Concern 5:**

Not all case notes were entered in a timely manner in accordance with OWD Issuance 02-2021.

**Corrective Action:**

The NW WDB in partnership with OWD has provided multiple training opportunities on entering case notes. While there has been improvement staff need to continue to ensure case notes are entered timely. No Response Required.

**Concern 6:**

Payments, activities, services had incorrect start/exit dates.

**Corrective Action:**

Staff need to ensure the correct dates are entered when posting activities; verify start/exit dates of training and the "mail date" of payments are the dates corresponding to those activities. No response required.

**Concern 7:**

Case notes were entered under the wrong participant account.

**Corrective Action:**

Staff need to ensure the proper account is open before entering case notes.

Opportunities - Opportunities are items the WDB has suggested for revision to strengthen internal controls, improve efficiencies or other processes. These pertain to effectiveness issues and do not require a written response.

During the monitoring, the WDB identified the following opportunities for consideration:

**Opportunity 1:**

Enter appropriate activities when referring to services. The process of adding referral activities in the system helps track the utilization of partner services.

**Opportunity 2:**

It was found during the monitoring staff are requesting and collecting documentation that is not required in the Technical Assistance Guide. Requiring additional documentation that is not required can create a hardship/burden for participants during the enrollment process.

### **III. Prior Year Corrective Action Status**

All corrective actions in the prior year monitoring were adequately addressed.

A written response to address the finding and concerns, are due within 30 days of the date of this report. The response and action plan are to be submitted to the WDB Office to the attention of Brent Stevens and Kerry Savage at [bstevens@ncmissouri.edu](mailto:bstevens@ncmissouri.edu) and [ksavage@mail.ncmissouri.edu](mailto:ksavage@mail.ncmissouri.edu)