



**Finance/Performance Committee Meeting
Teleconference
Tuesday, August 31, 2021
8:00 a.m.**

Meeting Call In Info:

**1-786-600-3104
Pin: 604828703#**

AGENDA

- | | |
|---|-------------------|
| 1. Welcome & Introductions | Walter Spikes, Jr |
| 2. Approved meeting minutes from Combined Executive Committee and Finance & Performance Committee on June 10, 2021 included in meeting packet (approved at the last Exec meeting) | |
| 3. Review of Budget to Expenditures Report as of 6-30-2021 | Robin Dawson |
| 4. Summary of Non-Federal Funds as of 6-30-2021 | Robin Dawson |
| 5. Update on Performance PY 20-21 | Anthony Gagliano |
| 6. Programmatic & Financial Compliance Monitoring Review For PY 20-21 | James Disbro |
| 7. Final Comments and Adjournment | Walter Spikes, Jr |

**CAREERSOURCE SUNCOAST
COMBINED EXECUTIVE/FINANCE & PERFORMANCE COMMITTEE MEETING**

3660 N. Washington Blvd, Sarasota, FL
Thursday, June 10, 2021

Absent Present	<u>Committee Members</u>
P	Eric Troyer, CPA, Partner, Kerkering Barberio & Company
A	Christy Cardillo, CPA, Partner, Carr, Riggs & Ingram, LLC.
P	David Kraft, President, Vision Consulting Group
P	Rick Mosholder, Human Resource Director, Hoveround Corporation
P	Sharon Hillstrom, President/CEO, Bradenton Area Economic Development Corporation
P	Walter Spikes, Coldwell Banker Realty
P	Peter Hayes, President, Tandem Construction
	Staff Present, Ted Ehrlichman Josh Matlock, Anthony Gagliano, Kathy Bouchard, Robin Dawson, James Disbro, Linda Benedict, Karima Habity, Michael Meerman, Tracey Barta, Cody Solar

I. Call to Order

Eric Troyer, Chair, called the meeting to order at 8:03 a.m. and roll call was performed.

II. Action Items

Approval of May 13, 2021 Executive Meeting minutes

Mr. Troyer asked for a motion to approve the May 13, 2021 meeting minutes.

Motion: Walter Spikes

Second: David Kraft

The motion to approve the minutes passed unanimously.

Approval of 2021-2022 Budget

Robin Dawson presented the budget for 2021-2022. The total funding available is \$8,288,659 with \$901,941 going into reserve leaving the 2021-2022 budget at \$7,386,718. The breakout of funding allocation is as follows:

TANF	\$1,336,764			
WIOA Adult and DW	\$2,702,797			
WIOA Youth	\$1,380,524			
Wagner Peyser	\$976,515			
Apprenticeship Navigator	\$41,181			
NEG DW Opioid Grant	\$186,127			
NEG COVID19	\$480,349			
NEG Opioid 3 Recovery	\$660,826			
Veterans Programs	\$111,672			
RESEA	\$250,656			
SNAP Training	\$122,748			
TAA	\$38,500			
	\$8,288,659	Reserve \$901,941	=	7,386,718

A complete budget packet was included in the meeting materials. Salaries included a performance merit increase up to 3% or level up increase through staff development options, based on position. A one time cost of living payment 2% was also included. Kathy Bouchard gave an update on the benefits package offered this year. Due to increased costs, CareerSource Suncoast offered several different health benefit packages, some with employee contributions to offset the increase in health benefits. The budget includes costs for exceeding the 30% ITA sliding scale rate requirement on adult and dislocated worker formula funds, youth paid work experience/paid internships minimum 20% requirement, and the required minimum 75% on out of school youth activities. A budget allocation broken out by program and administrative cost was presented. The administrative cost for 2021-2022 are projected at 9.85% with a threshold of 10%.

Chair Troyer asked for a motion to approve the 2021-2022 budget and bring before the full board at the June 24, 2021 meeting

Motion: Rick Mosholder

Second: David Kraft

The motion passed unanimously.

Approval/Selection of One Stop Operator RFP

The committee was provided via secure link the two proposals received for the one stop operator. Both proposals were distributed and discussed. The committee members filled out a rating sheet for each proposer and the results were then tallied by staff. The results of the rating sheets are:

Educational Management & Services Florida (EMSF) received 566 points (out of 600)
Hightower Workforce Initiatives, LLC received 512 points (out of 600)

Based on the results the committee recommends EMSF to be selected as the next one stop operator. The contract to be negotiated would be for one year with the option to continue for three additional one-year periods.

A motion was made that the Executive and Finance/Performance Committee make a recommendation to the Board to approve the One Stop Operator selection and begin negotiations with EMS.

Motion: Rick Mosholder

Second: Walter Spikes

The motion passed unanimously.

Committee Reports

Finance and Performance Committee Report – Walter Spikes, Jr.

Mr. Spikes presented the budget to expenditure report which covers July 1, 2020 to March 31, 2021. The overall burn rate is 67% with an expected burn rate of 75%. The lower than usual burn rate is due to COVID-19 pandemic. As of March 31, 2021 the expenditure rate is as follows:

- Admin expenditure rate – 6.39%; maximum allowed 10%
- Indirect rate avg - 13.38%; approved rate 13.57%
- Individual training accounts (ITA) – 25.76% minimum requirement 30%
- Youth paid internships – 35.07% minimum requirement 20%
- Youth out of school expenditures – 97.41% minimum requirement 75%

A copy of the Budget to Expenditure Report and the Summary of Non-Federal Funds was included in the meeting materials.

III. Staff Reports

Anthony Gagliano presented the dashboard on WIOA performance measures for adult, dislocated worker, youth. A dashboard for dislocated worker grants trade adjustment assistance, Wagner Peyser and jobs for Veterans was also reviewed. Although there are several goals that currently do not meet the 90% of negotiated rate, there is still one quarter left to achieve the goals.

Josh Matlock discussed the demographic drought. There are three factors guiding these statistics, 1) Mass exodus of baby boomers, 2 million this year, 3 million next year 2) Record low participant rate declining by generation 3) Lowest birth rate in US history. The effect this will have on the workforce will be extensive.

IV. Public Comment/Closing Remarks – Eric Troyer, Chair

All Executive Committee Meetings going forward will be schedule from 8-9:30

V. Adjournment

The next meeting is July 8, 2021. There being no further business, Chair Troyer adjourned the meeting at 9:50 a.m.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Ted Ehrlichman", with a long horizontal line extending to the right.

Ted Ehrlichman
President & CEO

CareerSource Suncoast
 Expenditure To Budget Report - Summary
 Program Year July 1, 2020 thru June 30, 2021
 As Of 6/30/2021

MOD 2						
	PY TOTAL BUDGET	RESTRICTED EXPENSES YTD	BUDGET BALANCE	% OF BUDGET EXPENDED	UNRESTRICTED EXPENSES YTD	NOTES
PERSONNEL COSTS						
SALARIESFRINGE BENEFITS	\$4,072,305	\$3,918,134	\$154,171	96%	\$24,970	
STAFF TRAINING & EDU	\$71,000	\$69,840	\$1,160	98%	\$700	
TOTAL PERSONNEL COSTS	\$4,143,305	\$3,987,974	\$155,331	96%	\$25,670	
FACILITY COSTS						
	\$1,077,198	\$942,110	\$135,088	87%	\$734	
OFFICE FURNITURE & EQUIP						
	\$110,570	\$99,205	\$11,365	90%	\$8,438	Delays in equipment shipped - order cancelled
OPERATING COSTS:						
ACCOUNTING	\$30,000	\$23,692	\$6,308	79%	\$14,401	Under expended - shared costs with unrestricted funds
AUDIT/MONITORING	\$60,000	\$58,617	\$1,383	98%		
CONSULTANTS/LEGAL	\$33,250	\$25,679	\$7,571	77%		OS Operator Contract complete; minimal legal
GENERAL INSURANCE	\$49,000	\$48,636	\$364	99%		Staff working hybrid-virtual & in person - additional emphasis on electronic filing. Fewer clients in office - reduced costs due to COVID
OFFICE EXP & SUPP	\$55,000	\$29,670	\$25,330	54%	\$15,442	very minimal travel during PY due to COVID
TRAVEL & MEETINGS	\$50,000	\$17,473	\$32,527	35%	\$775	
TOTAL OPERATING COSTS	\$277,250	\$203,768	\$73,482	73%	\$30,618	
PROGRAM SERVICES:						
CLIENT TRAINING/SUPPORT	\$1,480,124	\$1,154,371	\$325,753	78%	\$56,050	actual: trng \$1,109,689.85, supp \$44,680.72
CLIENT & EMPLOYER SERVICES	\$292,970	\$209,655	\$83,315	72%	\$13,698	Events remained virtual
OUTREACH	\$110,000	\$98,042	\$11,958	89%	\$602	Outreach contracts fully expended EDC & LCAN
TOTAL PROGRAM SERVICES	\$1,883,094	\$1,462,068	\$421,026	78%	\$70,349	
TOTALS						
	\$7,491,417	\$6,695,124	\$796,293	89%	\$135,810	Rates below as of 06/30/21: Admin 7.47 % Max 10% Indirect Avg 12.45% - Approved Rate 13.57% ITA 34.04% Min Req 30% PY20 Paid Internships Exp 26.72% Min Req 20% PY20 Yth Out of Sch Exp 99.54% Min Req 75%.
					\$583,332	Unrestricted Fund Balance as of 6/30/2021 (MM & CD \$336,472 included in total balance)

DEO extended TANF funds til 8/15/21. Funds were fully expended by this date.
 Other funds unspent carryover into PY 21-22

CareerSource Suncoast
 Summary of Non-Federal Funds
 as of 6/30/2021

	Business Support - 707	Tobacco Free - 719	Consolidated Workforce ED - 720	Consolidated Background Checks - 722	Ticket to Work - 724	MC Job Readiness - 726	GCCF COVID Res - 727	UW COVID Res & Rec - 728	UW - Training - 729	Wells Fargo Covid Supp - 730	SCF GEER - 731	Manatee Cty Retraining - 734	Manatee Cty CARES - 735	Manatee Cty UC Verf - 736	UW N S'ta Initiative - 737
Wells Fargo Unrestricted Funds															
Cash Balance as of 7/1/2020	\$24,620	\$38,650	\$25,130	\$15,055	\$16,798	\$17,500	\$20,000	\$108	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Revenue															
Current Year	* (\$3,152)	(\$338)	\$59,959	\$9,530	\$62,709	* \$27,500	\$0	\$0	\$50,000	\$5,000	* \$12,000	\$18,338	\$5,000	\$2,750	\$0
Bank Interest Income	\$0	\$492	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	(\$3,152)	\$155	\$59,959	\$9,530	\$62,709	\$27,500	\$0	\$0	\$50,000	\$5,000	\$12,000	\$18,338	\$5,000	\$2,750	\$0
Expenditures - Current Year	\$220	\$7,197	\$24,476	\$5,786	\$95	* \$17,500	\$19,515	(\$234)	\$34,071	\$1,074	* \$12,000	\$33,103	\$5,000	\$987	\$0
Increase/(Decrease) in Cash - Current Year	(\$3,372)	(\$7,042)	\$35,483	\$3,744	\$62,614	\$10,000	(\$19,515)	\$234	\$15,929	\$3,926	\$0	(\$14,765)	(\$0)	\$1,763	\$0
Wells Fargo Cash Balance as of 6/30/2021	\$21,247	\$31,608	\$60,613	\$18,800	\$79,412	\$27,500	\$485	\$342	\$15,929	\$3,926	\$0	(\$14,765)	(\$0)	\$1,763	\$0

* rev \$2,547
 * rec'bles from s'ta childcare (\$7,004)
 * fund transfer \$1,305
 (\$3,152)

* rev prog income
 * offset prog exp adult

* rev prog income
 * offset prog exp adult

SunTrust Bank - MM Unrestricted Funds	SWB Misc - 901
Cash Balance as of 7/1/2020	\$162,760
Revenue	
Current Year	\$0
Bank Interest Income	\$15
	\$15
Expenditures-Current year	\$49
Increase/(Decrease) in Cash - Current Year	(\$34)
SunTrust Cash Balance as of 06/30/2021	\$162,725

Bank of the Ozarks - CD Unrestricted Funds	SWB Misc - 901
CD Balance as of 7/1/2020	\$171,722
Revenue	
Current Year	\$0
Bank Interest Income	\$2,025
	\$2,025
Bank of the Ozarks CD Balance as of 06/30/2021	\$173,747

\$336,472
 cash bal

Total Unrestricted Funds as of 6/30/2021 \$583,332

CareerSource Suncoast

WIOA - Federal/State Indicators of Performance

PY 20-21

LWDB 18

Measures	PY2020-2021 1st Quarter Performance	PY2020-2021 % of Performance Goal Met For Q1	PY2020-2021 2nd Quarter Performance	PY2020-2021 % of Performance Goal Met For Q2	PY2020-2021 3rd Quarter Performance	PY2020-2021 % of Performance Goal Met For Q3	PY2020-2021 4th Quarter Performance	PY2020-2021 % of Performance Goal Met For Q4	PY2020-2021 Performance Goals
Adults:									
Employed 2nd Qtr After Exit	89.70	94.42	90.00	94.74	89.30	94.00	91.10	95.89	95.00
Median Wage 2nd Quarter After Exit	\$9,407	99.02	\$9,774	102.88	\$9,844	103.62	\$10,192	107.28	\$9,500
Employed 4th Qtr After Exit	90.90	95.68	89.10	93.79	86.80	91.37	83.30	87.68	95.00
Credential Attainment Rate	83.10	98.93	80.60	95.95	74.10	88.21	75.70	90.12	84.00
Measurable Skill Gains	65.50	119.09	59.40	108.00	53.20	96.73	70.60	128.36	55.00
Dislocated Workers:									
Employed 2nd Qtr After Exit	78.60	84.52	83.30	89.57	72.70	78.17	77.80	83.66	93.00
Median Wage 2nd Quarter After Exit	\$7,487	94.77	\$8,882	112.43	\$11,107	140.59	\$11,107	140.59	\$7,900
Employed 4th Qtr After Exit	80.00	90.91	66.70	75.80	64.30	73.07	75.00	85.23	88.00
Credential Attainment Rate	83.30	119.00	77.80	111.14	75.00	107.14	57.10	81.57	70.00
Measurable Skill Gains	28.00	58.82	43.60	91.60	54.30	114.08	77.80	163.45	47.60
Youth:									
Employed 2nd Qtr After Exit	94.10	108.16	91.90	105.63	90.90	104.48	92.60	106.44	87.00
Median Wage 2nd Quarter After Exit	\$5,113	86.66	\$4,550	77.12	\$4,095	69.41	\$4,174	70.75	\$5,900
Employed 4th Qtr After Exit	91.90	99.35	90.60	97.95	94.10	101.73	89.20	96.43	92.50
Credential Attainment Rate	73.10	95.56	78.90	103.14	82.60	107.97	85.00	111.11	76.50
Measurable Skill Gains	45.50	91.00	45.00	90.00	46.20	92.40	56.00	112.00	50.00
Wagner Peysler:									
Employed 2nd Qtr After Exit	65.70	90.00	69.10	94.66	66.90	91.64	64.30	88.08	73.00
Median Wage 2nd Quarter After Exit	\$5,525	102.31	\$5,814	107.67	\$5,783	107.09	\$5,935	109.91	\$5,400
Employed 4th Qtr After Exit	63.50	90.71	68.50	97.86	65.90	94.14	63.10	90.14	70.00

Not Met (less than 90% of negotiated)
Met (90-100% of negotiated)
Exceeded (greater than 100% of negotiated)

Dashboard

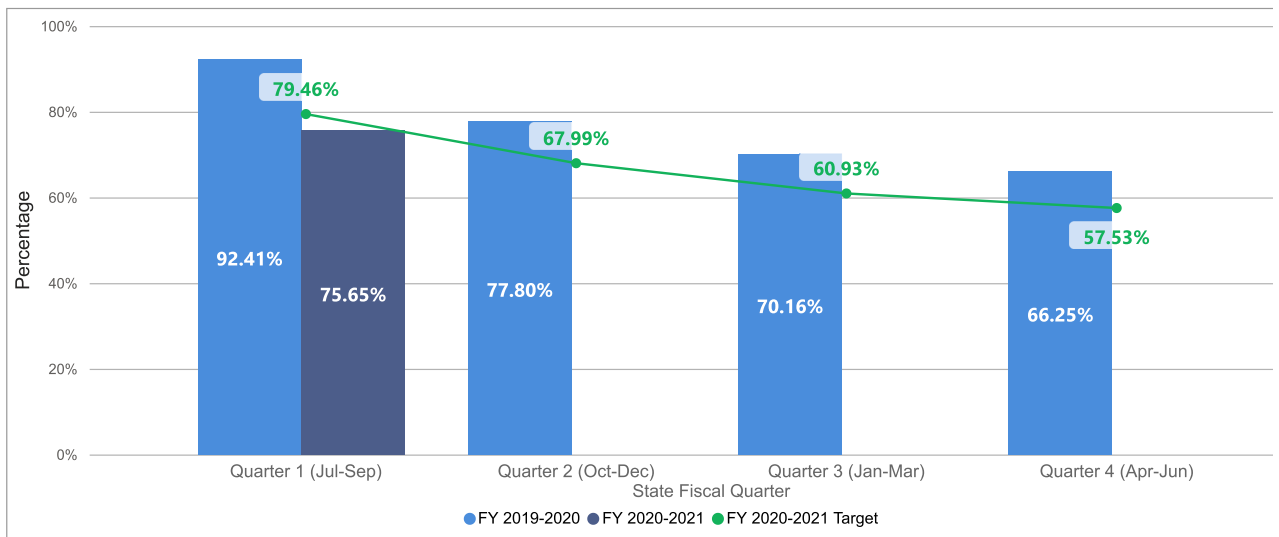
Employment 1st Quarter After Exit | Participant Training Rate | Business Penetration

Select Local Workforce Development Board

18 - CareerSource Suncoast

CareerSource Suncoast: Employment 1st Quarter After Exit

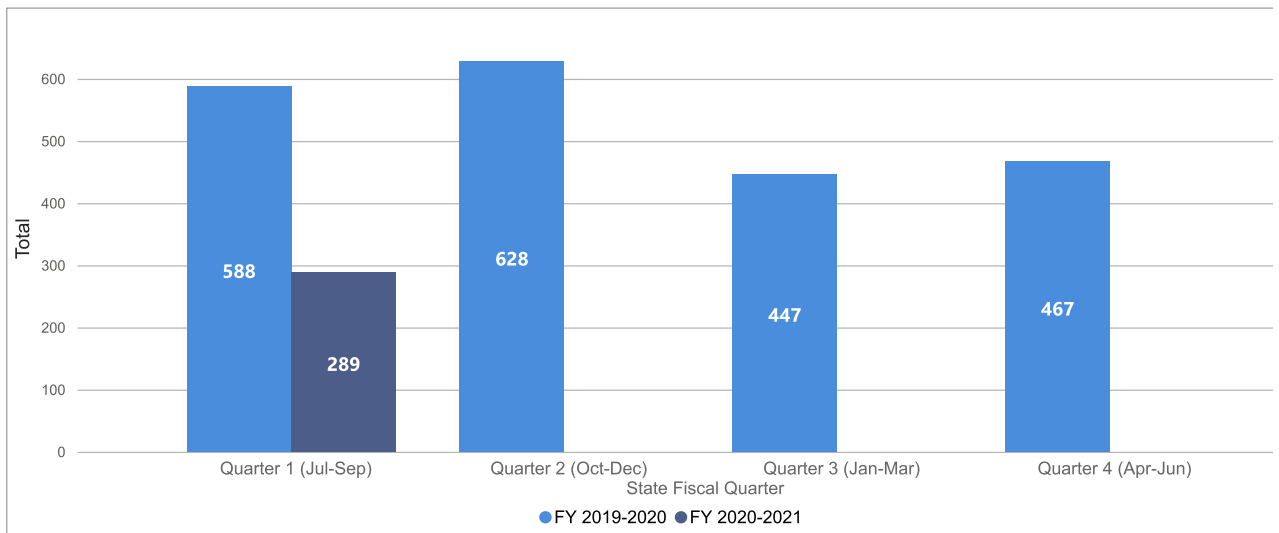
Employment Rate + Additional Credit, Year Over Year



Note: The improvement target for each quarter is 10% over the Employment Rate from the same quarter in the previous year.

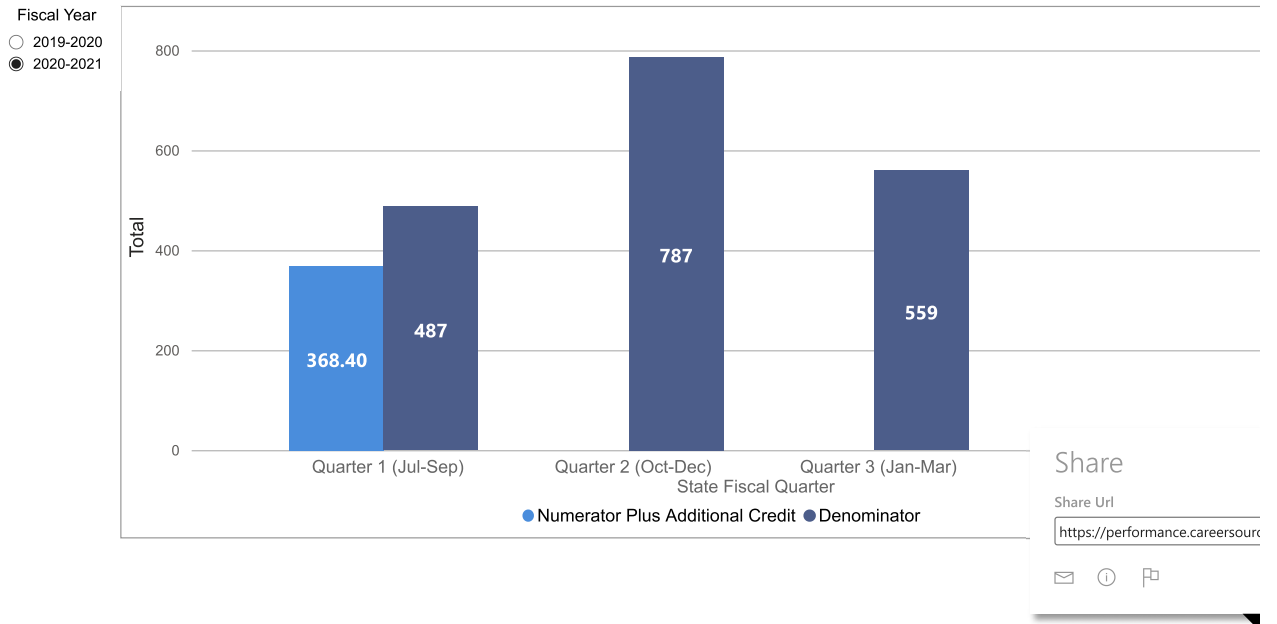
CareerSource Suncoast: Employment 1st Quarter After Exit

Participants With Wages 1st Quarter After Exit (Numerator), Year Over Year



CareerSource Suncoast: Employment 1st Quarter After Exit – FY 2020-2021

Numerator Including Additional Credit Compared to Denominator, Quarterly



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Dashboard

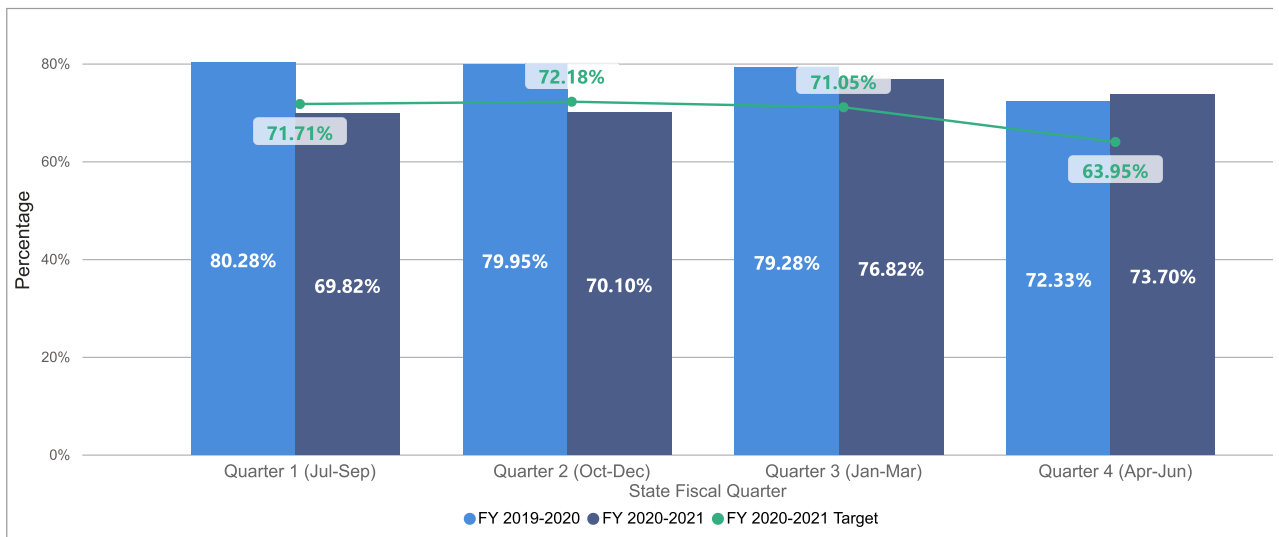
Employment 1st Quarter After Exit | **Participant Training Rate** | Business Penetration

Select Local Workforce Development Board

18 - CareerSource Suncoast

CareerSource Suncoast: Participant Training Rate

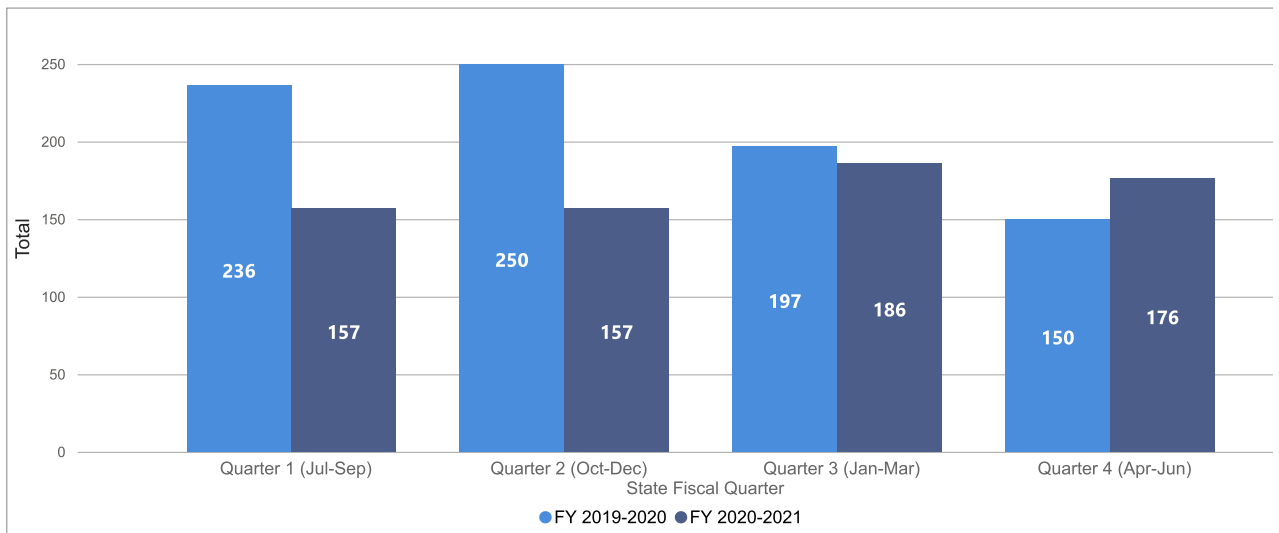
Training Rate + Additional Credit, Year Over Year



Note: The improvement target for each quarter is 10% over the Training Rate from the same quarter in the previous year.

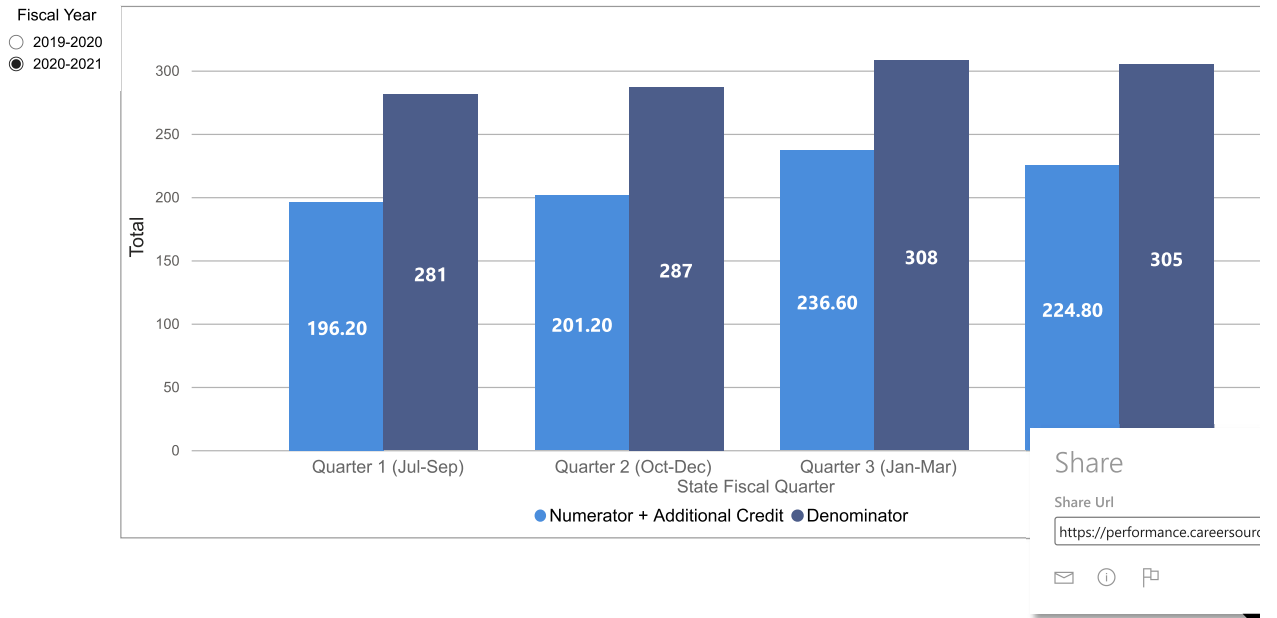
CareerSource Suncoast: Participant Training Rate – FY 2019-2020

Participants Who Were In or Completed Training (Numerator), Year Over Year



CareerSource Suncoast: Participant Training Rate – FY 2020-2021

Numerator Including Additional Credit Compared to Denominator, Quarterly



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Dashboard

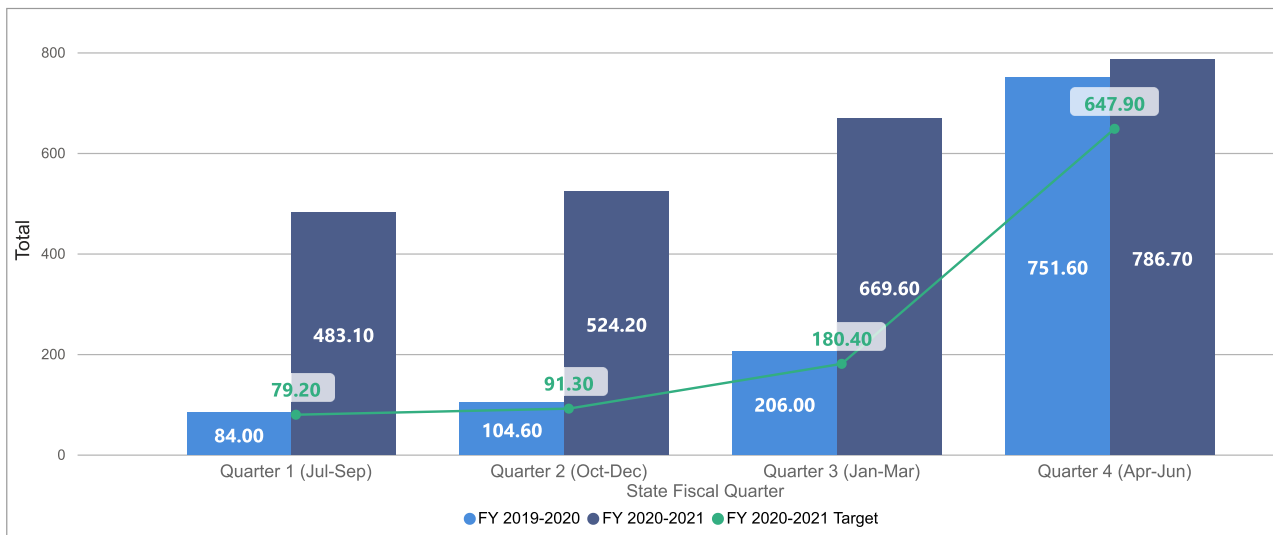
Employment 1st Quarter After Exit | Participant Training Rate | **Business Penetration**

Select Local Workforce Development Board

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CareerSource Suncoast: Business Penetration

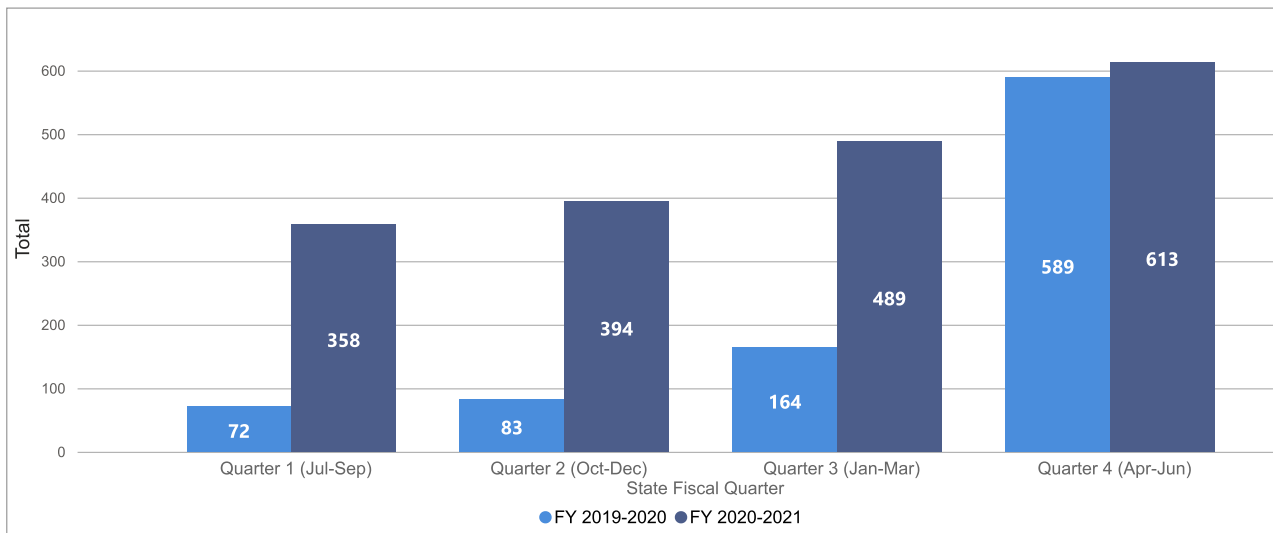
Business Penetration + Additional Credit, Year Over Year



Note: The improvement target for each quarter is 10% over the Business Penetration from the same quarter in the previous year.

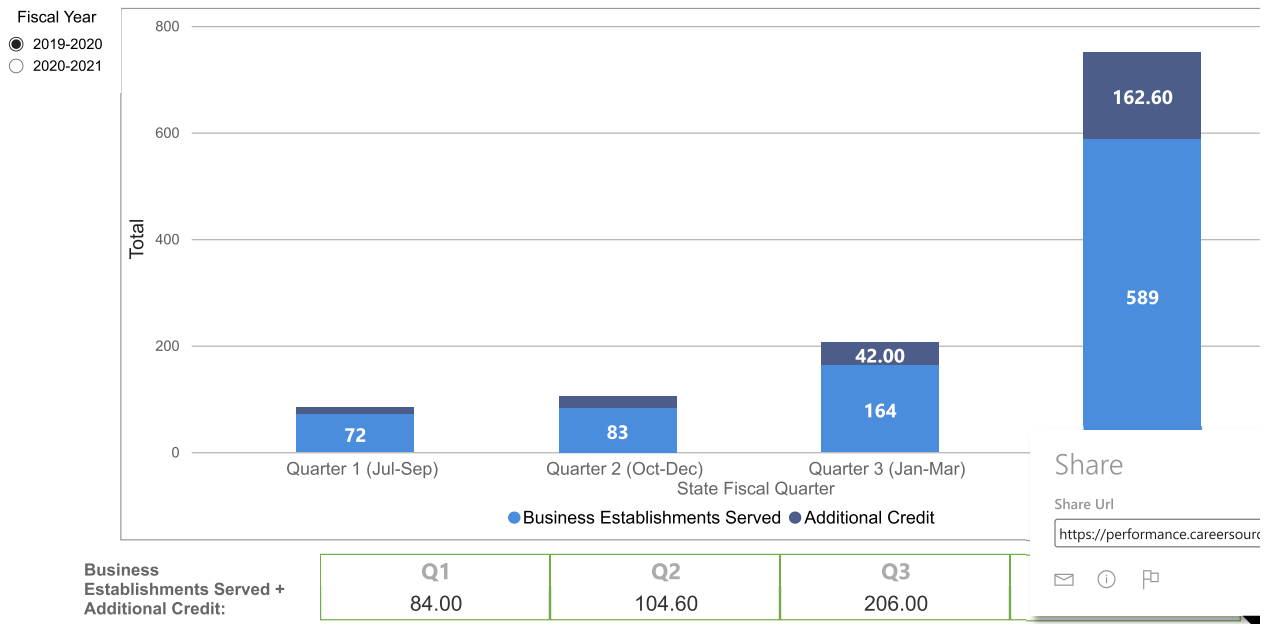
CareerSource Suncoast: Business Penetration

Business Establishments Provided High-Value Services, Year Over Year



CareerSource Suncoast: Business Penetration – FY 2019-2020

Business Establishments Provided High-Value Services and Additional Credit, Quarterly



Microsoft Power BI

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Program Year 2020-21

Quality Assurance Report

*Programmatic and Financial
Compliance Monitoring Review*

August 17, 2021



Local Workforce Development Board - 18

**Florida Department of
Economic Opportunity**

**Division of Workforce Services
And Division of Finance and
Administration**



Florida Department of Economic Opportunity | Caldwell Building | 107 E. Madison Street | Tallahassee, FL 32399
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EXECUTIVE BRIEFING AND OVERVIEW

The Department of Economic Opportunity (DEO) must perform annual monitoring of its subrecipient workforce entities as required by federal and state laws, rules, regulations and applicable DEO guidance. To accomplish DEO's monitoring goal, a joint programmatic and financial monitoring review of CareerSource Suncoast's (the "LWDB") workforce programs was conducted by DEO's Bureau of One-Stop and Program Support (OSPS) and Bureau of Financial Monitoring and Accountability (FMA) staff.

The monitoring activities included assessing the LWDB's program operations, management practices, system protocols, internal controls, financial record keeping and reporting to determine if the LWDB operated in compliance with each of the programs' laws, regulations, state and local plans, policies and guidance, and any contracts or agreement terms. Monitoring also included sample testing of randomly selected participant case file records from each of the workforce programs reviewed.

Programmatic and financial management issues identified in the report are generally categorized as Findings, Issues of Noncompliance, and Observations based on a scale of high, medium and low risk probabilities. High, medium and low risk factors are used to separate those issues that present more of a threat to program operations than others including issues that may potentially impact the fiscal integrity or delivery of services within program operations.

The review revealed that the LWDB has the systems in place to perform the broad management, operational, and financial functions required to operate the workforce programs. However, deficiencies in case file documentation requirements and operational and system practices in several program review areas were identified during the review. There were also several new and repeat issues found which may affect program operations if not corrected.

In accordance with [Administrative Policy 104 – Sanctions for Local Workforce Development Boards' Failure to Meet Federal and State Standards](#), as subrecipients of authorized funds administered by DEO, LWDBs are accountable for failing to correct performance, programmatic and financial deficiencies found during compliance monitoring reviews. To reduce performance, programmatic or financial deficiencies, and to increase program integrity at the local level, any subrecipient not meeting the regulatory or statutory standards shall be subject to specific conditions, remedies, and sanctions consistent with applicable federal laws, regulations, and guidance. Correcting and eliminating deficiencies maintains credibility in the administration of workforce programs, reduces risk of recurring noncompliance findings, and reduces the potential for questioned and/or disallowed costs which could lead to recapture of funds by the United States Department of Labor (USDOL) or other federal or state agencies.

For additional programmatic and financial monitoring information and resources, click here: [Monitoring Overview](#).

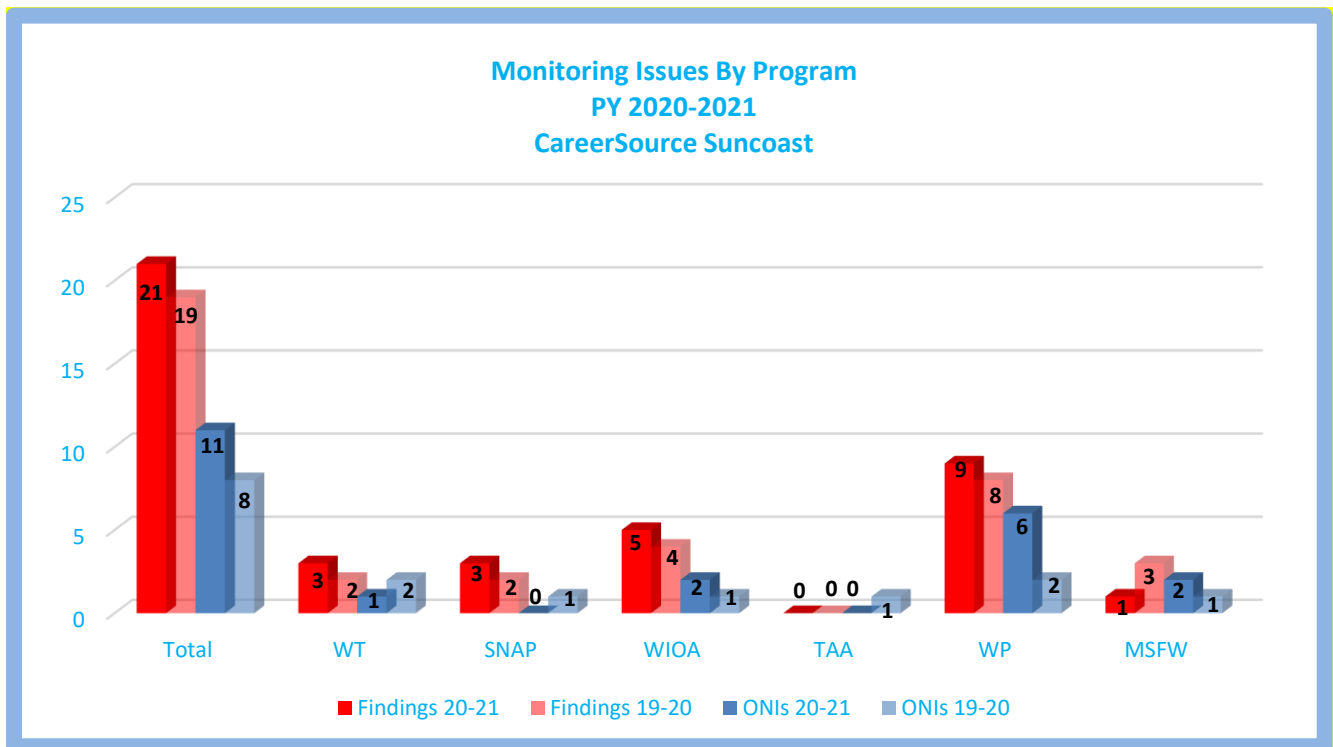
The results of each of the LWDB's workforce programs are summarized in the following charts by program and category.

SUMMARY TABLE OF PROGRAMMATIC MONITORING RESULTS

N=No. Y=Yes. N/A=Not Applicable.

2020-21 Monitoring Results					
Workforce Program	Issue	Prior Year Finding	Current Year Finding	Prior Year Other Noncompliance Issue	Current Year Other Noncompliance Issue
WT	A participant was not allowed three working days to provide good cause for a second failure. There were also delays in requesting penalties and sanctions.	Y	Y		
	Documentation to verify employment was missing in one participant's case file.	N	Y		
	Transitional childcare eligibility documentation was missing in one participant case file. Also, the "Notice of Change in Child Care Status" DEO-WTP 5235 forms were not retained in a couple of participant case files, and transitional services and activities were not ended timely.	N	Y		
	A participant's Individual Responsibility Plan (IRP) did not include one of the three required elements (activity hours/ appointment times.)			Y	Y
WT Totals		1	3	1	1
SNAP	A participant was not engaged in orientation and assessment in accordance with the State Plan. Also, a participant did not have their initial appointment 590-status code ended timely in OSST (within 2-days).	N	Y		
	Both an Opportunities and Obligations form and a Grievance and Complaint form were missing from a participant's case file.	N	Y		
	A participant was assigned to less than the required 80 hours in work activities.	N	Y		
SNAP Totals		0	3	0	0
WIOA Adult	On-the-Job (OJT) and Customized Training contracts were missing required clauses and prohibitions. Also, OJT activities exceeded the contract duration in several instances.	Y	Y		
	Policies and procedures were either not in line with DEO guidance or need updating.	Y	Y		
	Employment information recorded in Employ Florida for a few participants did not match employment verification documents maintained in the case files.			N	Y
WIOA Youth	The required academic and occupational components of the work experience activity for a couple of participants were not documented.	Y	Y		
WIOA Common Issues	Determination of need for training services was not documented for several participants.	N	Y		
	No documentation in several case files to support that follow-up services were offered or quarterly follow-ups were conducted.	Y	Y		
	Measurable skills gains (MSG) for several participants were not recorded in Employ Florida. Additionally, the MSG attainment type in a participant's case file did not meet the definition of the identified MSG.			Y	Y
WIOA Totals		4	5	1	2
WP	Permission to create Employ Florida registrations and referrals to job orders were not documented for multiple job seekers, and several job seeker applications were incomplete.	Y	Y		
	A few job orders did not have documentation that the jobs met Florida's minimum wage rate requirements.	Y	Y		
	A job order did not meet terms of use posting rules for Employ Florida.	Y	Y		
	Documentation of staff review and verification of a few employer-entered job orders were either missing or entered after the deadline.	Y	Y		
	A few services recorded in Employ Florida did not meet the definition of the service or were inadequately documented.	Y	Y		

	Policies and procedures were either not in line with DEO guidance or need updating.	Y	Y		
	Entry of several job seeker registrations, referrals, and placement activities in Employ Florida was delayed by several months.	N	Y		
	A couple of referrals on the "Referrals Pending Review" list were not reviewed and processed by the deadline.			Y	Y
	Multiple job seeker placements had conflicting start dates in case notes recorded in Employ Florida.			N	Y
	A veteran job seeker with a manually provided priority of service was missing a case note verifying the service.			N	Y
RESEA/WP Common Issue	Several assessments and Employability Development Plans (EDPs) were not documented or did not contain all required information.	Y	Y		
RESEA	A few participants' work search activities were not properly resulted in the Employ Florida event calendar. Additionally, a couple of participants were not provided Labor Market Information.			Y	Y
	The Red Flag Report had several participants who were not managed by staff within the required timeframe.			N	Y
	A participant was missing a signed RESEA Responsibility Statement.			N	Y
Complaint System	Logs of apparent violations were not maintained at some career centers.	Y	Y		
WP Totals		8	9	2	6
MSFW	The Bradenton significant office did not meet the required Equity Ratio Indicators and Minimum Service Level Indicators.			Y	Y
	A MSFW application did not document a referral to supportive services (code 169-178) in Employ Florida.	Y	Y		
	As indicated on the MSFW Outreach Reports, the significant office did not meet the five quality contacts per day or the outreach contact requirements during the review period.			N	Y
MSFW Totals		1	1	1	2
Results-All Programs		14	21	5	11



Note: The above chart reflects a two-year comparison of the number of monitoring issues (PY 2019-20 and PY 2020-21).

DEFINITIONS APPLICABLE TO PROGRAMMATIC MONITORING

1. **Finding** – A high risk issue which directly impacts the integrity or effectiveness of program operations or could potentially result in major program deficiencies (e.g., participant ineligibility, missing files, lack of fully executed contracts, issues indicative of systemic problems in program operations, appearance of fraud or abuse, non-conforming services provided to participants, questioned costs, etc.). Findings are expected to be responded to in the Corrective Action Plan (CAP).
2. **Other Noncompliance Issue (ONI)** – A medium risk issue that results in deviation from process or practice not likely to result in failure of the management system or process but has a direct impact on program operations (data validity, timeliness of entering system information, missing program elements and employment plan information, failure to timely conduct follow-ups, etc.). ONIs could potentially be upgraded to a finding over time based on the nature of the deficiency (e.g., repeat violations, issues indicative of systemic problems in program operations, questioned costs, etc.). ONIs are expected to be responded to in the CAP.
3. **Observation** – A low risk issue intended to offer an opportunity to improve current local practices, processes and procedures that result in positive program outcomes. Observations, in certain instances, are expected to be responded to in the CAP.

SUMMARY TABLE OF FINANCIAL MONITORING RESULTS

2020-21 Financial Monitoring Results				
Category	Repeat of Prior Year	Reference(s)		
Prior Year Corrective Action Follow-Up	Yes	See Observation #18-20-02 (Executive Director salary increase was not documented in the public minutes).		
Category	Findings	Issues of Non-Compliance	Observations	Technical Assistance Provided
Payroll and Par Testing (Executive Director salary increase not documented in public meeting minutes)			1	
TOTAL	0	0	1	0

DEFINITIONS APPLICABLE TO FINANCIAL MONITORING

1. **Finding** – Lack of compliance with federal or state laws, rules and regulations, administrative codes, or state guidance that may result in disallowed costs or impact the integrity of program operations. Findings are expected to be responded to in the CAP.
2. **Noncompliance** – Lack of compliance with federal or state laws, rules and regulations, administrative codes, or state guidance but may not result in disallowed costs or do not impact the integrity of program operations. Issues of Noncompliance are expected to be responded to in the CAP.
3. **Observation** – Informative statements or constructive comments to improve the delivery of services and to help ensure continued fiscal integrity of the LWDB. Observations are not expected to be responded to in the CAP.
4. **Technical Assistance** – Any assistance provided to LWDB staff by the financial monitoring team.

**QUALITY ASSURANCE REPORT
CAREERSOURCE SUNCOAST
LOCAL WORKFORCE DEVELOPMENT BOARD (LWDB) 18**

I. DESCRIPTION OF MONITORING APPROACH

Monitoring consisted of a joint programmatic and financial review of the LWDB’s workforce programs. Local operating procedures (LOP), program services and activities, local plans and reports, as well as financial management practices, record keeping, safeguards, and reporting were reviewed to determine if appropriate processes, procedures, and controls were in place and properly implemented. The monitoring review also included sample testing of randomly selected participant case file records from each of the workforce programs reviewed.

Due to COVID-19 restrictions, a desk review was performed in lieu of an on-site visit for both programmatic and financial monitoring.

Note: Programs reviewed, dates of review, entrance/exit conference attendees and other programmatic logistics are outlined in the Appendix Section of this report.

II. FINANCIAL MONITORING RESULTS

FMA performed financial monitoring procedures based on the elements described in the PY 2020-2021 Financial Monitoring Tool. The monitoring procedures performed included tests of transaction details, file inspections, and inquiries to (1) determine the status of recommendations from the prior year monitoring visit(s), and (2) to adequately support current year Findings, Issues of Noncompliance, Observations and Technical Assistance. The results of the financial monitoring testing are described below.

Findings and Issues of Noncompliance

There were no Findings or Issues of Noncompliance identified during the financial monitoring review period of January 1, 2020 – December 31, 2020.

Observations

Observation FMA #18.21.01

Category: 8.0 Payroll and Personnel Activity Report (PAR) Testing

Condition: The LWDB’s Executive Committee met on August 13, 2020 and approved a 6% salary increase retroactive to July 1, 2020 for the Executive Director. The salary increase details and approval were not documented in the public meeting minutes.

The LWDB provided a copy of the August 13, 2020 Executive Committee Meeting Minutes which states, “The next executive meeting is September 10, 2020. There being no further business, Chair Cardillo adjourned the meeting at 8:47 a.m. Staff left the meeting and the Executive Committee remained on the call to discuss the President/CEO evaluation.” Also, CareerSource Suncoast provided an email from the Executive Committed dated August 14, 2020 approving the 6% increase in salary on August 13, 2020.

Criteria: Florida’s Government in the Sunshine Law, s. 286.011, F.S., commonly referred to as the Sunshine Law, provides a right of access to governmental proceedings of public boards or commissions at both the state and local levels. The law is equally applicable to elected and appointed boards and applies to any gathering of two or more members of the same board to discuss some matter which will foreseeably come before that board for action. There are three basic requirements of s. 286.011, F.S.:

- (1) meetings of public boards or commissions must be open to the public;
- (2) reasonable notice of such meetings must be given; and
- (3) minutes of the meetings must be taken and promptly recorded.

Required Actions: The LWDB must take steps to ensure all committee and board meeting minutes are documented and accessible to the public.

Resources:

- [Public Meeting and Public Record Requirements](#)
- [Government-In-The-Sunshine-Manual 2021 Edition](#) – A Reference for Compliance with Florida’s Public Records and Open Meeting Laws.

Technical Assistance

There was no Technical Assistance provided during the financial monitoring review period of January 1, 2020 – December 31, 2020.

III. PROGRAMMATIC MONITORING RESULTS

The outcome of the programmatic monitoring is detailed in the following sections of the report. The information presented describes the issues noted and, where appropriate, required corrective actions for improvement.

NOTE: The following general program CAP requirements must be submitted with each Finding and Other Noncompliance Issue identified in the report. Additionally, a separate CAP response must be submitted for any additional program specific issues identified in each section of the report.

General Program CAP requirements

- A specific plan of action outlining the reasons for noncompliance as well as efforts taken to prevent future occurrences.
- A copy of a monitoring schedule showing timeframes and the activities and services that will be monitored.
- Documentation showing staff training or refresher training has been or will be provided. Documentation must include training date(s), a training roster, and an agenda listing training topics.
- Documentation of written communication to staff informing them of the requirements.

WELFARE TRANSITION (WT)

The sample size consisted of 38 participant case files.

The following issues were identified:

Finding Number WT 18.21.01

Pre-penalty and Sanction Process

Applicable reference(s): 45 CFR 261.10, 12-14; Section 414.065, F.S.; Rule 65A-4.205, F.A.C.; and DEO FG 03-037.

Of the 14 case files reviewed of participants with a pre-penalty and /or sanction recorded in OSST, the following issues were identified:

- One (7.1 percent) participant was not allowed three working days to provide good cause due to a second failure within 30 days.
- Penalties and sanctions for one (7.1 percent) participant was not requested or ended timely in the system.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Not following appropriate procedures during the penalty process could potentially result in a sanction being requested which could lead a participant to file a grievance and/or request a fair hearing for a sanction that should not have occurred.

Required Action: In addition to the general required CAP actions, documentation must be provided showing that LWDB staff have case noted the reason(s) why pre-penalty and sanction protocols were not followed, as well as a plan or process for preventing a recurrence of these issues in the future. The LWDB must also make an attempt to contact the participants to explain adverse actions which may be taken for noncompliance and enter the counseling case notes in OSST, if the case files are still active.

Finding Number WT 18.21.02

Employment Verification

Applicable reference(s): Chapter 445.010 F.S.; and Florida's Work Verification Plan.

Of the three case files reviewed of participants with an employment activity recorded in OSST, one (33.3 percent) file was missing documentation to verify the participant's employment status.

Recurring Issues from Previous Year: No.

Risk Impact: This data is used for reporting purposes and incorrect data entry impacts the validity of the data being reported and can negatively impact performance. The data entered in the system must be auditable and supported by documentation in the case files.

Required Action: In addition to the general required CAP actions, documentation must be provided showing LWDB staff have verified the participant's employment status and taken action to ensure case file documentation matches the information in OSST, if the file is active. Additionally, the LWDB must provide an assurance that measures will be taken to ensure employment verification documentation maintained in the files is cross-referenced with data entered in the system for accuracy. A plan to prevent a recurrence of these issues in the future must also be provided with the CAP.

Finding Number WT 18.21.03

Transitional Service Eligibility

Applicable Reference(s): 445.028-.32 F.S., 445.024(n) F.S., FAC 65A-4.218 and FG 04-020 (Transitional Childcare).

Of the nine case files reviewed of participants that received transitional childcare services, the following issues were identified:

- Supporting transitional childcare eligibility documentation was missing for one (11.1) participant.
- The “Notice of Change in Child Care Status “ form was not retained in three (33.3) participant case files.
- Childcare was not ended in OSST in a timely manner for three (33.3 percent) participants.

Recurring Issues from Previous Year: No.

Risk Impact: If continuing eligibility is not verified and transitional services are not ended in a timely manner, funds could possibly be expended on ineligible participants which could be viewed as potential questioned costs if not corrected.

Required Action: In addition to the general required CAP actions, documentation must be provided showing the participants were eligible to receive transitional childcare services and LWDB staff have ended transitional childcare services in OSST for the identified participants, if the files are still active. Additionally, the LWDB must provide an assurance that transitional childcare services are terminated in OSST when a participant is no longer eligible to receive services. A plan or process for preventing a recurrence of these issues in the future must also be provided with the CAP.

ONI Number WT 18.21.01

Individual Responsibility Plan (IRP)

Applicable Reference(s): 45 CFR 261.11-12, and 14; Temporary Assistance for Needy Families (TANF) State Plan; DEO Memorandum dated October 22, 2014, titled Individual Responsibility Plan, Alternative Responsibility Plan, and Initial Assessment in OSST.

Of the five mandatory case files reviewed that were required to have an IRP completed including all required elements, the following issues were identified:

- One (20.0 percent) IRP did not include the assigned weekly activities the participant was required to complete.
- Two (40.0 percent) IRPs did not include the participants’ employment goals.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Absence of an IRP without all required elements could eventually lead to a participant being placed in activities not conducive to overcoming barriers leading to employment and self-sufficiency.

Required Action: In addition to the general required CAP actions, documentation must be provided showing the required elements (assigned weekly activities and employment goals) have been included on the IRPs and are specific to the participants’ path to self-sufficiency, if the case files are still active. For future reference, the LWDB must ensure that an IRP is developed for mandatory participants assigned to an activity or temporarily deferred from participating in work activities, and that all required elements are included on the IRP. A plan or process to prevent a recurrence of these issues in the future must also be provided with the CAP.

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

The sample size consisted of 30 participant case files.

The following issues were identified:

Finding Number SNAP 18.21.04

Initial Engagement Process (OSST 590-Code)

Applicable reference: State Plan; 7 CFR 273.7(c)(2)

The LWDB must enter initial appointments codes in OSST. The following issues were noted:

- Of the 30 case files that warranted an orientation and assessment, one (3.3 percent) did not have an appointment status code (either a 597 or 598) entered in OSST by staff.
- Of the 26 case files reviewed where a 590 – appointment setting code was entered in OSST, one (3.8 percent) did not have their initial appointment status selected within two-business days of completion of the appointment or “No show”.

Recurring Issue from Previous Year: No.

Risk Impact: Noncompliance with the initial engagement process and failure to expedite the assignment of and participation in qualifying SNAP activities affects performance reporting and could potentially result in overpayment of food assistance benefits to an ineligible individual.

Required Action: In addition to the general required CAP actions, the LWDB must provide an assurance that all future initial appointments and status codes (either a 597 or 598) will be entered in OSST timely by staff. A plan to prevent a recurrence of this issue in the future must also be submitted with the CAP.

Finding Number SNAP 18.21.05

Grievance/Complaint and Equal Employment Opportunity (EEO) and Opportunities and Obligations (O&O) Forms

Applicable reference(s): FG 00-004 rev. June 08, 2007, 20 CFR 683.600, 20 CFR 181(c), and State Plan.

Of the 30 case files reviewed, one (3.3 percent) was missing both a signed and dated Grievance/Complaint and EEO form and a signed and dated O&O form.

Recurring Issue from Previous Year: No.

Risk Impact: Having a signed and dated Grievance/Complaint and EEO form in the file mitigates program risk in instances where a program participant may file a complaint, grievance or request a fair hearing.

Required Action: In addition to the general required CAP actions, documentation must be provided with the CAP showing that a signed copy of a Grievance/Complaint and O&O forms have been obtained and placed in the participant case files, if the cases are still open. A plan to prevent a recurrence of this issue in the future must also be submitted with the CAP.

Finding Number SNAP 18.21.06

Assignment of Activity Hours:

Applicable reference(s): 7 CFR 273.7; 7 CFR 273.24(a)(1)(i) and the State SNAP Plan.

Of the 16 Able Bodied Adults Without Dependents (ABAWD) engaged in activities with participation hours entered on the Job Participation Rate (JPR) screen in OSST, one participant (6.3 percent) was not assigned to the required 80 hours in work activities.

Recurring Issue from Previous Year: Yes (Prior year CAP actions reviewed and verified but noncompliance continues to occur).

Risk Impact: Instances of participants not being assigned to the correct number of JPR hours could result in overpayment of food assistance benefits and negatively impact performance.

Required Action: In addition to the general required cap actions, documentation must be provided that the one case file has been updated with the required number of assigned hours, or other documents or case notes must be provided to support the reason for not assigning the individual to the correct number of hours, if the case is still active. A plan to prevent a recurrence of this issue in the future must also be submitted with the CAP.

OBSERVATIONS

The case file review also revealed that a participant had an incorrect noncompliance option entered in OSST. LWDB staff must select the correct failure reason from option drop-down menu when recording non-compliance options.

The case file review also revealed that a case received an alert from DCF to be closed on 02/29/20; however, the case was closed on 02/18/20. LWDB staff must ensure that a case is closed with the specific date received in the alert from DCF.

WORKFORCE INNOVATION AND OPPORTUNITY ACT (WIOA)

WIOA ADULT AND DISLOCATED WORKER PROGRAM

The sample size consisted of 27 Adult and Dislocated Worker participant case files (14 Adults and 13 Dislocated Workers).

The following issues were identified:

Finding Number WIOA 18.21.07

On-the-Job Training (OJT) and Customized Training (CT) Agreements

Applicable references: WIOA Sec.122 (h) and Sec. 134(c)(3)(A) and (H); 20 CFR 680.770-840; TEGL 13-15; Local Workforce Services Plan; and Administrative Policy 009.

Of the 12 participants enrolled in an OJT or CT activity, five (41.7 percent) exceeded the contract duration periods without justification. Additionally, 10 (83.3 percent) agreements did not specify that funds will not be used to directly or indirectly to assist, promote, or deter union organizing, or will not aid in the filling of a job opening which is vacant because the former occupant is on strike or locked out in the course of a labor dispute or the filling of which is otherwise an issue in a labor dispute involving a work stoppage.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Failure to provide an executed agreement and documentation to support the work-based activity could lead to potential questioned costs if funds were expended.

Required Action: In addition to the general required CAP actions, the LWDB must review all open OJT and CT case files to ensure the work-based activities have not exceeded the contract durations, and the contracts have been updated with the missing clauses and prohibitions. A copy of the revised master agreement with all required assurances, prohibitions and clauses must also be provided with the CAP. Additionally, the LWDB must inform all

staff to use the same boilerplate agreement in all career centers to ensure consistency. A plan or process for preventing a recurrence of this issue must also be provided with the CAP.

Finding Number WIOA 18.21.08

WIOA Policies and Procedures

Applicable reference(s): 20 CFR 683.200(b)(2); 2 CFR 200.75; 2 CFR 200.456; 20 CFR 680.900-970;20 CFR 681.570; WIOA Sec. 3 (59); Sec. 134(d)(2);WIOA Sec.122 (h); 20 CRF 680.770-840; WIOA Sec. 134(c)(3)(A); Local Workforce Service Plan and Administrative Policy 009.

The LWDB’s WIOA local policies and procedures (LOP) continued to include language from the prior year which granted incentives to adults and dislocated workers for attaining predetermined benchmarks. During the prior year’s review, the LWDB was provided technical assistance which included written notification that incentives cannot be provided to the adult population without prior approval from the state. Additionally, the Employed Worker Training (EWT) policy lacks specific language to inform staff that wages for CT participants may exceed the self-sufficient wage rate as long as the assigned training leads to employment that is comparable to or higher than their previous employment.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).
Risk Impact: Failure to create or maintain local area policies and procedures will impact overall program operation and service compliance, as well as issues with federal funding requirements and audits.

Required Action: In addition to the general required CAP actions, the LWDB must provide an assurance of regular evaluation and review of policies to align with current federal law and DEO guidance. Documentation that the LOPs have been or will be revised/updated to reflect the changes or the anticipated dates for publication and adoption of the new internal guidance must be provided with the CAP. The revised LOPs will help eliminate confusion and ensure that processes follow a planned and consistent approach to guide and manage the program.

ONI Number WIOA 18.21.02

Employment Verification

Applicable reference(s): WIOA Section 116; 20 CFR Part 677.150 (C); 667.175 and Federal Data Validation Requirements.

Of the 11 participants who exited with unsubsidized employment, the employment start date and wage information recorded in employ Florida did not match documentation retained in the case files of three (27.3 percent) participants.

Recurring Issue from Previous Year: No.
Risk Impact: Failure to enter and accurately record employment information in Employ Florida may negatively impact performance results.

Required Action: In addition to the general required CAP actions, documentation must be provided showing LWDB staff have reviewed and verified the participants’ employment and wage information, if the cases are still active. Additionally, the LWDB must provide an assurance that measures will be taken to ensure employment documentation is maintained in the files and cross-referenced with data entered in the system for accuracy. A plan to prevent a recurrence of these issues in the future must also be provided with the CAP.

WIOA FORMULA-FUNDED YOUTH PROGRAM

The sample size consisted of 13 Out-of-School Youth participant case files.

Finding Number WIOA 18.21.09

Required Components of Work Experience

Applicable reference: WIOA Sec. 129 (c)(2)(C), 20 CFR 681.600(b), and TEGL 21-16.

Of the six case files reviewed of youth participants enrolled in a work experience activity, two (33.3 percent) did not include the required academic and occupational components.

Recurring Issue from Previous Year: Yes (Prior year CAP actions verified but noncompliance continues to occur).

Risk Impact: Failure to provide both components of the work experience activity could potentially decrease the opportunity for participants to obtain exposure and exploration into different careers or industries, develop work readiness skills, and reinforce good work ethics.

Required Action: In addition to the general required CAP actions, documentation must be provided showing the two participant files have been updated with the appropriate work experience components, if the case files are still active. A plan or process must also be provided on how changes to the work experience activities will be identified and updated in the future to prevent a recurrence of this issue.

WIOA SPECIAL PROJECTS

The sample size consisted of 11 participant case files for the following special projects: COVID-19 Public Health Emergency, Sector Strategies 2019, and WIOA-Incumbent Worker-20% Non-Waiver Local Only.

COMMON ISSUES

The following common issues were identified in the WIOA Adult/Dislocated Worker and Youth programs, and the WIOA Special Projects:

Finding Number WIOA 18.21.10

Determination of Need for Training Services

Applicable reference(s): 20 CFR 680.200-230, 20 CFR 680.700 through 680.850, WIOA Sec. 134 (c)(3)(A) and TEGL 19-16.

- Of the 27 WIOA Adult participants placed in a training service, 20 (74.1 percent) participant case files did not contain documentation of the determination of need for training services.
- The case file for one Adult Special Project participant placed in a training activity did not contain documentation of the determination of need for training services.

Recurring Issue from Previous Year: No.

Risk Impact: Failure to determine appropriate training needs and other required elements could eventually lead to a participant being placed in training not conducive to overcoming barriers leading to employment and self-sufficiency.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation showing staff have reviewed and verified the training needs of the participants identified, if the cases are still active. Documentation must include whether the participants were unlikely to obtain or retain employment, was the

participant in need of training, and did the participant have the qualifications to successfully complete the training. A plan or process to prevent a recurrence of this issue in the future must also be provided with the CAP.

Finding Number WIOA 18.21.11

Follow-Up Services
Applicable reference(s): WIOA Sec. 134(c)(2)(A)(xiii); 20 CFR 680.150 and TEGs 19-16.

Federal regulations require follow-up services be made available to adult participants following the first day of unsubsidized employment, as determined appropriate by the LWDB. The following was noted:

- Of the nine WIOA Adult participants who exited with employment, five (55.6 percent) had no case file documentation to support that follow-up services were offered.
- Of the seven WIOA Youth participants who exited with employment, one (14.3 percent) had no case file documentation to support that follow-up services were offered.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Failure to provide follow-up services can negatively impact performance and resources available to the participant.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation that follow-up services have been offered to the individuals identified, if the cases are still active. Additionally, an assurance that follow-up services will be offered and/or provided to WIOA Adult participants who exit with unsubsidized employment and to all WIOA Youth participants who exit the program. A plan or process for accomplishing this in the future must also be provided with the CAP.

ONI Number WIOA 18.21.03

Recording of Measurable Skill Gains (MSG)
Applicable reference(s): WIOA Section 116; 20 CFR Part 677.155(a)(v); TEG 10-16, Change 1.

- Of the 25 WIOA Adult participant case files reviewed of participants enrolled in an education or training program, six (24.0 percent) did not have a MSG recorded within the program year. Additionally, the MSG attainment type did not meet the definition for the recorded MSG attainment.
- Of the 12 WIOA Youth participant case files reviewed of participants enrolled in an education or training program, two (16.7 percent) did not have a MSG recorded within the program year.
- The one Adult Special Project case file reviewed of a participant enrolled in an education or training program did not have a MSG recorded within the program year.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Failure to enter and accurately record MSG information in Employ Florida negatively impacts performance results.

Required Action: In addition to the general required CAP actions, the LWDB must also provide an assurance with the CAP that MSGs will be documented and recorded by the applicable program year, as well as a plan or process for accomplishing this in the future.

TRADE ADJUSTMENT ASSISTANCE (TAA)

The sample size consisted of three TAA participant case files.

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

WAGNER-PEYSER (WP) PROGRAM

The sample size consisted of 75 participant case files (30 job seekers, 20 job orders, 15 job seeker placements and 10 RESEA).

The following issues were identified:

Finding Number WP 18.21.12

Job Seeker Permission for Registration, Referrals and Requirements for Participation

Applicable reference(s): 20 CFR 651.10, TEGL 19-16, and Administrative Policy 096 (rev. 5/24/2019, 2/20/2020, and 1/7/2021).

Staff registration of a new job seeker in Employ Florida and referral to job orders by staff have specific guidelines that must be followed such as obtaining the job seeker's permission prior to creating and entering a new registration in Employ Florida and referring a job seeker to a job order. Job seekers must also have a full application in Employ Florida prior to receiving a service that initiates or triggers participation.

The following issues were identified:

- Of the 18 job seekers reviewed with a staff entered registration between 5/24/2019 and 1/7/2021, 15 (83.3 percent) were missing documentation of permission to create the new accounts in Employ Florida. Additionally, one (5.6 percent) job seeker had permission documented three months after registration.
- Of the 31 job seekers reviewed, 11 (35.5 percent) did not have a full application documented in Employ Florida when a staff-assisted service initiated participation. Two (6.5 percent) also had errant or invalid address information in the registration.
- Of the 15 job seeker placements reviewed with staff-entered job seeker referrals after 5/24/2019, 10 (66.7 percent) were missing documentation of permission to refer the job seeker.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Failure to document permission of staff registrations, staff referrals, or obtaining a full application before participation has an impact on performance reporting and can also lead to erroneous or fraudulent job seeker entry of invalid or false registrations.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation of the efforts made by staff to contact and verify the job seekers' permission to create an Employ Florida registration and referrals to job orders by staff. An assurance must also be provided that the LWDB will take necessary steps to document all future registrations and referrals in case notes on the job seeker's Employ Florida account. A plan or process to prevent a recurrence of these issues in the future must also be provided.

Finding Number WP 18.21.13

Job Order Placement and Wage Rate Verification

Applicable reference(s): Fair Labor Standards Act of 1938 as amended, 29 U.S.C. section 206; 20 CFR 680.170; section 448.01, F.S.; TEGL 19-16 and DEO Administrative Policy 099.

Of the six job orders reviewed with a wage rate listed in Employ Florida below the federal or state minimum wage, four (66.7 percent) did not have documentation that staff verified the employer would pay at least the state's minimum wage.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Allowing an employer to advertise or hire a job seeker at a wage rate that is less than the minimum wage could lead to minimum wage compensation violations.

Required Action: In addition to the general required CAP actions, the LWDB must attest that the two job orders have been reviewed and verification that the employers have or will pay at least the Florida minimum wage rate is documented in a case note, if the job orders are still open. Additionally, the LWDB must provide an assurance that case notes will be entered on all job orders documenting staff verification of the Florida minimum wage rate in the future. A plan or process to prevent a recurrence of this issue in the future must also be provided with the CAP.

Finding Number WP 18.21.14

Job Order Requirements

Applicable reference(s): 20 CFR 651.10, Administrative Policy 099, and Employ Florida's Terms and Conditions of Use, Section 7.

Of the seven job orders reviewed, one (14.3 percent) did not meet the requirements of the Employ Florida Terms of Use posting rules. The job order description did not contain the nature, duties, responsibilities and requirements of the job.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Posting job orders without minimum qualifications and duties as required will rule out otherwise qualified applicants and make the job matching process difficult. It could also lead to complaints, grievances and legal actions.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation that staff have or will review all future open job orders in Employ Florida to ensure job orders entered in Employ Florida meet all required elements contained in the Employ Florida's Terms of Use posting rules. Documentation must also include the LWDB's efforts to contact the employer and verify and document the duties, responsibilities, and requirements for the job order identified during the review, if the job order is still open. A plan or process to prevent a recurrence of this issue in the future must also be provided with the CAP.

Finding Number WP 18.21.15

Employer-Entered Job Order Review and Verification

Applicable reference(s): 20 CFR 651.10 and DEO Administrative Policy 099.

Of the seven employer-entered job orders reviewed in Employ Florida, three (42.8 percent) were missing documentation of staff review and verification of the job order. Two (28.6 percent) other job orders had verifications that were not conducted or documented within two business days.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Failure to verify employer-entered job orders can lead to companies entering job orders in Employ Florida with the intent to defraud job seekers or acquiring job seekers personal protected information.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation that staff have or will review all future open job orders in Employ Florida to ensure the job orders are reviewed within two-business days. An assurance must also be provided that LWDB staff will take necessary steps to document all future employer entered job orders in case notes on the job order in Employ Florida. A plan or process for accomplishing this in the future must also be provided with the CAP.

Finding Number WP 18.21.16

Wagner-Peyser Job Seeker Services and Activities

Applicable reference(s): 20 CFR 651.10, Administrative Policy 96, and Employ Florida Service Code Guide.

Of the 30 job seekers reviewed with at least one service entered on the Employ Florida activity screen, four (13.3 percent) job seekers had a specific service code entered (116 – Received Service From Staff Not Classified) as a service provided; however, case notes in the files did not meet the requirements for the service recorded.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Errant or undocumented services provided to job seekers which prolong participation will result in inaccurate reporting of state and federal performance numbers.

Required Action: In addition to the general required CAP actions, the LWDB must document efforts to review and monitor entry of WP job seeker services in Employ Florida to ensure the services are properly recorded and documented. Documentation must also be provided of the LWDB’s efforts to case note the correct service for the job seekers identified in the review, if the applications are still active and open. Additionally, an assurance must also be provided that LWDB staff will review job seekers with open applications and the use of code 116 service(s) on their Employ Florida service plan, verifying and documenting whether the service(s) continue to trigger participation.

Finding Number WP 18.21.17

Wagner-Peyser Policies and Procedures

Applicable reference(s): 20 CFR 651.10, 20 CFR 658.501, TEGL 19-16, DEO Administrative Policy 096, 098, 099, 103, and Grantee/Sub-grantee Agreement.

Policies for delegation of specific job duties for veteran staff (review of all job orders for Local Veterans Employment Representative [LVER]) do not match DEO Veteran guidance. The LVER duties in the LWDB’s policy specifically designate review of all job orders to LVER staff. DEO guidance indicates responsibilities for the LVER staff must not be universal for all job orders and must be tied to the creation of some outreach to a business on a veteran’s behalf. Additionally, policies and procedures developed for job order verification and employer vetting were not in line with current DEO administrative policies.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Failure to create or maintain local area policies and procedures will impact overall program operation and service compliance, as well as issues with federal funding requirements and audits.

Required Action: In addition to the general required CAP actions, the LWDB must provide an assurance of regular evaluation and review of policies to align with current federal law and DEO guidance. Documentation that LOPS have been or will be updated/ revised to reflect changes or anticipated dates for publication and adoption of the new internal guidance must be provided with the CAP. Additionally, the LWDB must provide an assurance that all policies will be regularly reviewed for comparison to federal and state policy and guidance, and local operating

policies and procedures will be adjusted following the evaluation. Developing LOPs will help eliminate confusion and ensure that processes follow a planned and consistent approach to guide and manage the program.

Finding Number WP 18.21.18

Job Seeker Registration, Referrals and Placements Delayed Entry
Applicable reference(s): 20 CFR 651.10, 20 CFR 680.170, TEGL 19-16, and DEO Administrative Policy 096, 099 and 03-040.

All service codes must be entered into Employ Florida within 15 days of the provision of the service. All 11 agricultural mass recruitment job orders reviewed with placements had job seeker registrations, referrals, and placement services recorded in Employ Florida several months after the recruitment event.

Recurring Issue from Previous Year: No.

Risk Impact: Failure to enter job seeker registration and services in, including Migrant and Seasonal Farmworkers (MSFW), will affect performance reporting, MSFW service level indicator elements, and other federal reporting.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation that staff have or will review all future mass agricultural recruitment events in Employ Florida to ensure job seeker registrations, referrals, and placements are entered in Employ Florida prior to the 15-day deadline for entry of services. Documentation of an analysis of the impact of previous noncompliance MSFW service level indicators for the LWDBs significant offices must be included with the CAP.

ONI Number WP 18.21.04

Job Seeker Referrals Pending Review
Applicable reference(s): DEO Administrative Policy 099.

Two job seekers had pending referrals for suppressed job orders that were not reviewed by LWDB staff within the required 72-hour period.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Failure to review and approve job seeker referrals in a timely manner may cause the job seeker to potentially miss an employment opportunity if he/she is qualified and not referred to the position prior to the position’s closing date.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation that staff have or will regularly review the “Referrals Pending Review” to ensure all future referrals to suppressed job orders in Employ Florida are reviewed within 72 hours. An assurance must also be provided that LWDB staff will take necessary steps to track, document, and increase the frequency of monitoring of pending referrals in Employ Florida. A plan or process for accomplishing this in the future must also be provided with CAP.

ONI Number WP 18.21.05

Job Order and Placement Verification
Applicable reference(s): 20 CFR 651.10, 20 CFR 680.170, TEGL 19-16, and DEO Administrative Policy 099.

Of the 15 job seeker placements reviewed, 10 (66.7 percent) had conflicting start dates listed on verification documentation. Case notes on the job seekers’ placements verification gave a variable start date while the case notes on the job order indicated a date certain start date.

Recurring Issue from Previous Year: No.

Risk Impact: Noncompliance with placement guidelines has an impact on performance reporting (Monthly Management Report and other staff reports), as well as erroneous information being recorded in the system if placements are not valid.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation that staff have or will review all future placement verification documentation in Employ Florida to ensure start dates recorded in case notes on job orders match those entered on the job seeker account. Documentation must also include the LWDB's efforts to contact and verify the job seekers identified in the review to ensure the correct start date is recorded in both the job order and activity screen placement verification case note, if the job seekers have open applications and the job order is still open. A plan or process for accomplishing this in the future must also be provided with CAP.

ONI WP 18.21.06

Veteran Priority of Service Documentation

Applicable reference(s): 20 CFR Part 1010; Administrative Policy 096; Wagner-Peyser Employ Florida Jobseeker Service Codes Guide.

Of the three staff-assisted veteran cases reviewed where a manually entered code 189 was recorded, one (33.3 percent) did not have documentation of the provision of priority of service recorded in a case note in Employ Florida.

Recurring Issue from Previous Year: No.

Risk Impact: Failure to notify eligible veterans of their right to receive POS prevents them from requesting and/or receiving first consideration to federally funded programs and services they may be qualified to receive. This can also result in grievances being filed.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation that staff have reviewed and verified all active veterans have been provided priority of service and the appropriate service code and case notes have been recorded in Employ Florida for each of the veterans' applications initiated subsequent to the review. Documentation must also be provided of the LWDB's efforts to notify, provide, and record in Employ Florida the missing documentation for the one veteran, if the case is still active.

REEMPLOYMENT SERVICES AND ELIGIBILITY ASSESSMENT (RESEA) PROGRAM

The RESEA program review focused on the LWDB's compliance with the requirements of the grant to assist reemployment assistance (RA) claimants in returning to work faster by connecting claimants/participants with in-person assessments, and reemployment services and opportunities to further their reemployment goals and successful employment outcomes.

The sample size consisted of 10 participant case files. The following issues were identified:

Finding Number WP 18.21.19

Assessments and Employability Development Plans (EDPs)

Applicable reference(s): 20 CFR 651.10; 20 CFR Part 1010; 443.091 and 443.1317(1)(b), F.S.; UI Handbook-NO. 401-ETA 9048; DEO Administrative Policy 068; DEO Employ Florida Service Code Guide, issued 7/20/2018; and State Veterans Program Plan of Service.

The following common issues were observed:

- Of the 31 assessments reviewed (21 WP and 10 RESEA), five (16.1 percent) did not have documentation to support the services recorded. An additional three (9.7 percent) assessments were missing one or more of the following required items: employment goals, barriers to employment, and services required to overcome the barriers listed to obtain the goals.
- Of the 10 RESEA EDPs reviewed, three (30.0 percent) were missing either specific occupational goals or action steps for the participants to reach the goals.

Recurring Issue from Previous Year: Yes (Prior year CAP verified but noncompliance continues to occur).

Risk Impact: Absence of an assessment and specific goals and action steps on the EDP reduces staff's ability to work effectively and efficiently with participants in delivering services, tracking employability goals, and determining what the participant is required to do to attain the long-term occupational goals.

Required Action: In addition to the general required CAP actions, documentation must be provided of the LWDB's attempts to retrieve and/or develop the missing assessments; documentation showing the employment goals, barriers to employment, and services required to overcome the barriers listed have been obtained and included on the assessments; as well as specific action steps for participants to reach their goals including signatures and dates from the appropriate parties, if the cases are still active in Employ Florida. Additionally, the LWDB must include documentation and/or a plan that staff have or will review all future assessment and EDP codes recorded in Employ Florida to ensure case notes have been recorded identifying all required elements of the service(s) provided.

ONI Number WP 18.21.07

RESEA Work Search Activity and Labor Market Information (LMI)

Applicable reference(s): UIPL 8-20 and DEO Administrative Policy 068.

The federal grant requires every RESEA participant be referred to at least one additional work search activity (WSA). Work search activities must be unique to the participant's needs and recorded and resulted in the Employ Florida event calendar module. Participants must also be provided specific LMI for the chosen occupational field.

Of the 10 RESEA case files reviewed, two (20.0 percent) participant's work search activity did not result in the Employ Florida event calendar module. Additionally, another two (20.0 percent) case files did not have documentation of the provision of specific LMI based on the participant's education/employment experience, skills, and desired occupation.

Recurring Issue from Previous Year: Yes (Prior year CAP reviewed and verified but noncompliance continues to occur).

Risk Impact: Not accurately recording work search activities in the system or not providing specific LMI reduces staff's ability to effectively determine what the claimant is required to do to assist in their reemployment service needs which may adversely affect the claimant's benefits.

Required Action: In addition to the general required CAP actions, the LWDB must document efforts to ensure all RESEA work search activities are recorded through the Employ Florida event calendar scheduler and appointments and corresponding services and attendance are documented. Documentation of attempts to contact the participants and provide the missing LMI information based on the participant's education/employment experience, and skills and desired occupation must also be provided with the CAP, if the case files are still active. Additionally, a plan to prevent a recurrence of these issues in the future must also be provided.

ONI Number WP 18.21.08

RESEA Red Flag Report

Applicable reference(s): DEO Administrative Policy 068.

The Red Flag report contains all RESEA participants who have not received all required services or those who have not had their attendance status changed. Required services for RESEA participants must be provided and recorded in Employ Florida within 90 days of the scheduled appointment date. If not managed and recorded, the participant will appear on a Red Flag Report

There were three participants that had not been worked by staff on the date the Red Flag report was reviewed.

Recurring Issue from Previous Year: No.

Risk Impact: Having outstanding red flag issues impact RESEA reporting and may adversely affect a claimant's RA benefits.

Required Action: In addition to the general required CAP actions, the LWDB must include documentation that staff will ensure the individuals identified on the "Red Flag Report" will be properly resulted in Employ Florida, if the job seekers' applications are still open. An assurance must also be provided that LWDB staff will take necessary steps to ensure that the LWDB have or will review the Red Flag report regularly to ensure participants have been or will be managed within 90 days of being on the Red Flag Report. A plan or process for accomplishing this must also be provided with the CAP.

ONI Number WP 18.21.09

RESEA Responsibility Statement

Applicable reference(s): UIPL 8-20 and DEO Administrative Policy 068.

Of the 10 RESEA participant files reviewed, one (10.0 percent) did not have a signed RESEA Responsibility Statement on file.

Recurring Issue from Previous Year: No.

Risk Impact: Absence of a RESEA Responsibility Statement without specifying the details and requirements of what a participant is required to do to overcome barriers leading to employment could result in discontinuance of Reemployment Assistance benefits and self-sufficiency.

Required Action: In addition to the general required CAP actions, the LWDB must include documentation of staff's attempt to contact the RESEA participant and create and obtain a signed responsibility statement, if the participant's application is still active. Additionally, an assurance must be provided that a RESEA Responsibility Statement will be completed, dated, and signed by both staff and the participant, and provided to the RESEA participant. A plan or process for accomplishing this in the future must be provided with the CAP.

CAREER CENTER CREDENTIALING

The career center credentialing review focused on ensuring administrative requirements and records were posted and maintained, that front-line staff had completed all required Tier I certification and continuing education courses, and that an Employment Service Complaint System was in place to process any complaints received.

The following issue was identified:

Finding Number WP 18.21.20

Employment Service Complaint System

Applicable reference(s): 20 CFR 658.410 and Employment Service (ES) Complaint Resolution System Handbook.

All career centers must maintain an Employment Service Complaint System to include a system to account for Migrant and Seasonal Farmworker (MSFW) Apparent Violations for non-significant MSFW career centers. The two non-significant career centers (Sarasota and North Port) did not maintain a log of apparent violations during the review period.

Recurring Issue from Previous Year: Yes (Prior year CAP verified but noncompliance continues to occur).

Risk Impact: Non-adherence to the Employment Service Complaint System requirements can lead to legal issues or further action on the part of the individual to file a complaint against the LWDB and the State.

Required Action: In addition to the general required CAP actions, documentation must be provided that the LWDB has evaluated the complaint system in place and resubmit the incomplete monthly complaint logs and forms identified during the review. An assurance that the log of apparent violations will be completed for each career center and submitted to the Senior Monitor Advocate (SMA) by the fifth of each month must also be submitted by the LWDB with the CAP. A plan of action to prevent a recurrence of this issue must also be provided with the CAP.

MIGRANT AND SEASONAL FARMWORKERS

Description of Review Methodology

The Migrant and Seasonal Farmworker (MSFW) review focused on compliance with the MSFW required services and outreach under the Wagner-Peyser Act, as amended, and federal guidelines that mandate the service delivery to MSFWs through the public labor exchange system.

Management Review and Operational Practices of the Significant Career Centers

The LWDB’s MSFW significant multilingual career center is located in Bradenton, Florida. Because of COVID-19 considerations, the significant career center review was conducted remotely. The State Monitor Advocate (SMA) conducted a desk review of the significant career center to ensure the following credentialing requirements had been met (posters, signage, facility accessibility and accommodations, MSFW applications, job orders, MSFW Service Level Indicators Report, MSFW Outreach Services Reports, Complaint System and other requirements).

Overall, the MSFW outreach program in the Bradenton significant career center appeared to be managed in accordance with prescribed standards and the required provision of services to MSFWs. The outreach worker position is filled with a bilingual employee who is familiar with the farmworker community, knowledgeable of farmworker services and activities, and performs job duties properly. However, the following issues were noted during the management and operational review:

ONI Number MSFW 18.21.10

MSFW Service Level Indicators Report

Applicable references: 20 CFR 653, DEO FG 03-040, Migrant Service Level Indicators Report, and Local Workforce Services Plan.

Federal and state guidance require specific services be provided to MSFW customers on an equal level as all other customers and that significant career centers meet all five MSFW equity ratio indicators and at least two of the three minimum service level indicators.

The Bradenton significant career center did not meet two of the five equity ratio indicators on the MSFW Service Level Indicators Report during the review period (staff assisted basic career services and staff assisted career guidance services). Additionally, none of the three minimum service level indicators were met during the review period (MSFWs placed in a job, median earnings of individuals placed in unsubsidized employment, and MSFWs placed long-term in non-agricultural jobs).

Recurring Issue from Previous Year: Yes (Prior year CAP verified but noncompliance continues to occur).

Risk Impact: This data is used for reporting purposes and unmet indicators impact federal performance reporting for the state.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation to support efforts made by staff to refer and place MSFWs in jobs including monitoring the MSFW Service Level Indicators Report regularly to identify service gaps to ensure compliance. The MSFW Service Level Indicators Report is located in Employ Florida. A plan or process to prevent a recurrence of this issue must also be provided with the CAP.

Participant Case File Review

The sample size consisted of 18 participant case files (10 MSFW job seekers and eight agricultural job orders).

The following issues were identified:

ONI Number MSFW 18.21.11

Services to MSFWs (Outreach Services Report)

Applicable references: 20 CFR 653 and DEO FG 03-040.

All career centers have an obligation to locate and contact MSFWs who are not being reached by normal intake activities conducted at the significant career centers. Five MSFW quality contacts per day must be conducted by outreach workers to be in compliance with DEO FG 03-040. The contacts must be recorded on the Outreach Services Report and submitted to the State Monitor Advocate by the fifth working day following the report month.

A review of the Outreach Services Reports revealed that the LWDB did not meet the five quality contacts per day and outreach contact requirements during the review period.

Recurring Issue from Previous Year: Yes (Prior year CAP verified but noncompliance continues to occur).

Risk Impact: These issues impact MSFW service delivery and performance reporting. They also limit job and training opportunities and lead to possible farmworker civil rights violations.

Required Action: In addition to the general required CAP actions, the LWDB must provide documentation of the efforts made by staff to refer and place MSFWs in jobs including monitoring the MSFW Service Level Indicators Report regularly to identify service gaps to meet the required five quality contacts and outreach contacts requirements, including a plan for locating and contacting MSFWs outside of the significant career centers who are not being reached by normal intake activities conducted at the centers.

Finding Number MSFW 18.21.21

MSFW Applications

Applicable references: 20 CFR 653 and DEO FG 03-040.

Career center staff must determine whether applicants are MSFWs. Full applications must be taken for MSFWs and must contain certain information as required by federal law unless it is specifically stated that the MSFW declines a full application.

Of 10 MSFW applications reviewed, one (10.0 percent) MSFW application did not document the referral to supportive services (codes 169-178 in Employ Florida).

Recurring Issue from Previous Year: Yes (Prior year CAP verified but noncompliance continues to occur).

Risk Impact: These issues impact MSFW service delivery and performance reporting. They may also limit job training opportunities and lead to possible farmworker civil rights violations.

Required Action: In addition to the general required CAP actions, documentation that the LWDB has reviewed and verified MSFWs with applications opened subsequent to the review to ensure MSFWs have been referred to appropriate services, as well as other MSFW requirements. A plan or process to prevent a recurrence of this issue in the future must also be provided.

IV. FINANCIAL DISCLOSURE REVIEW

Description of Review Methodology

The Financial Disclosure review focused on determining the LWDB's compliance with financial disclosure requirements as referenced in Sections 112.3145 and 445.07, Florida Statutes, and DEO's Final Guidance FG-075.

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

V. COLLECTION OF DEMOGRAPHIC INFORMATION

The purpose of this section of the review is to determine compliance with the nondiscrimination and equal opportunity provisions of 29 CFR Part 37, and DEO's Guidelines for Compliance with Section 188 of the Workforce Innovation and Opportunity Act regarding Collection of Demographic Data.

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

VI. MANAGEMENT REVIEW PROCESS

The purpose of this review is to determine whether the LWDB is implementing requirements associated with local merit staffing responsibilities for DEO staff assigned to work under the functional supervision of the LWDB, local sector strategy implementation, and local board governance activities.

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

VII. MANAGEMENT INFORMATION SYSTEMS (MIS)

The MIS security check focused on the effectiveness of the LWDB's information security controls and whether a business process and policy are in place that protects DEO data and information technology resources and complies with DEO's Information Technology (IT) guidelines and the DEO/LWDB Grantee/Subgrantee agreement requirements.

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

VIII. TRAINING AND TECHNICAL ASSISTANCE

For questions and/or technical assistance in any of the program review areas, the LWDB should contact OSPS at the following email addresses:

- WT - WTPProgram@deo.myflorida.com
- SNAP - SNAPETProgram@deo.myflorida.com
- WIOA - WIOA@deo.myflorida.com
- TAA - TAA@deo.myflorida.com
- WP - Wagner.Peyser@deo.myflorida.com
- RESEA - RESEA@deo.myflorida.com
- FLC - H-2A.JobOrder@deo.myflorida.com and H-2B.JobOrder@deo.myflorida.com
- MSFW – [State Monitor Advocate \(via direct email\)](#)

Additional training can be requested by sending a [Training Request Form](#) to WFSTraining@deo.myflorida.com

CORRECTIVE ACTION PLAN REQUIREMENTS

A CAP is required to address how the LWDB will correct any programmatic and financial management findings and other noncompliance issues identified in the report. For the noted deficiencies, recommendations and suggestions have been provided to help respond to the issues identified, help develop and implement processes that result in positive program practices and performance outcomes, and also help to improve the quality and integrity of the data collected.

BEST PRACTICE

The LWDB has developed and utilizes a "Crosswalk" system to cross-refer clients to agencies/services. Crosswalk is an agency-to-agency client referral system that continues to get attention locally and around the state. Currently, there are 40 agencies connected through this shared technology platform. Over 595 referrals from 21 agencies have been received and 105 referrals have been sent to 20 agencies. Not only does the system allow for an easy method of referral, the system also encourages awareness and interagency communication by linking to other agency websites and providing a platform to share profiles, services, and contact information. Partners are asked to use the system when referring to the LWDB. This expectation is identified in the partners' Memorandum of Understanding.

Crosswalk has been offered to 23 other LWDBs around the state and currently six other LWDBs are in various stages of adopting the system and creating their own network of partners representing 20 counties.

IX. APPENDIX

A. COMPLIANCE REVIEW BACKGROUND INFORMATION/MONITORING ACTIVITIES

LWDB Name: CareerSource Suncoast (LWDB - 18)

Programmatic Monitoring Review Dates: March 1 - 5, 2021

Financial Monitoring Review Dates: March 1 - 5, 2021

Programmatic Monitoring Sample Review Period: January 1, 2020 – December 31, 2020

Financial Monitoring Sample Review Period: January 1, 2020 – December 31, 2020

Programs Reviewed:

- Welfare Transition
- Supplemental Nutrition Assistance Program - Employment and Training
- Workforce Innovation and Opportunity Act
- Trade Adjustment Assistance
- Wagner-Peyser
- Migrant and Seasonal Farmworker
- Any identified special projects operational during the review period
- Financial management practices, record keeping, safeguards and reporting

Entrance and Exit Conference Attendees:

The entrance conference with LWDB staff was conducted on March 1, 2021. The exit conference was conducted on March 5, 2021. The entrance/exit conference attendees are listed below:

NAME	Agency	Entrance Conference	Exit Conference
Terry Wester-Johnson	DEO (Review Lead)	x	x
Frieda Houston	DEO	x	x
Sanchez Emanuel	DEO	x	x
Barbara Walker	DEO	x	x
Andy Windsor	DEO	x	x
Minerva Figueroa	DEO	x	x
Josh Matlock	LWDB	x	
Robin Dawson	LWDB	x	x
Anthony Gagliano	LWDB	x	x
Kathy Bouchard	LWDB	x	x
James Disbro	LWDB	x	x
Karima Hability	LWDB	x	x
Shona Taylor	LWDB	x	x
Michelle Snyder	LWDB	x	x
Hanna Miller	LWDB	x	x
Deborah Lee	LWDB	x	x

The financial monitoring entrance conference with LWDB staff was conducted on March 1, 2021. The exit conference was conducted on March 5, 2021. The entrance/exit conference attendees are listed below:

Chadwick Myrick	DEO	x	x
Robin Dawson	LWDB	x	x

B. COMPLIANCE REVIEW SCOPE AND METHODOLOGY

Review Scope

The monitoring scope consisted of a joint programmatic and financial monitoring review of the LWDB's workforce programs. Local operating procedures (LOP), program services and activities, local plans and reports, as well as financial management practices, record keeping, safeguards and reporting were reviewed to determine if appropriate processes, procedures and financial controls were in place and properly implemented. The monitoring review also included sample testing of participant case file records. To maximize resources and accomplish the review objectives, collaboration with program experts in the evaluation of both programmatic and financial data by a joint monitoring review team was conducted.

Programmatic Monitoring Review Methodology

The participant case file review sample consisted of randomly selected files from each of the LWDB's workforce programs reviewed based on OSPS's sampling methodology. The files were reviewed to determine whether adequate documentation was maintained to support participant eligibility and services rendered. The files were also reviewed and validated by checking the accuracy of management information system (MIS) records and comparing keyed entries made by the LWDB against case file source documents.

Financial Monitoring Review Methodology

The financial monitoring review focused on all financial management systems to determine if the LWDB properly accounted for and correctly recorded and reported expenditures. During the financial review, an examination of the LWDB's accounting records, internal controls, and supporting documentation which included, but was not limited to, a review of cash management, general ledger and cost allocations, payroll and personnel activity report (PAR) testing, disbursement testing, and reporting of program data in the MIS was completed. A sample of participant records identified from the programmatic sample was also reviewed and tested for financial monitoring reporting and compliance by the financial monitoring team. The monitoring procedures used during the review are described in detail in the financial monitoring tool and risk assessment plan.

The sample size and selections for each monitoring objective was based on, but not limited to, a risk assessment performed by FMA staff and reviews of the monthly general ledger and cost allocation statistics. The risk assessment includes factors such as the funding allocation to each LWDB, results of prior monitoring and audit reports, personnel and staffing changes, and organizational structure.

Programmatic and Financial Monitoring Review Tools

DEO's programmatic and financial monitoring review tools were used to conduct the review. The tools were developed to provide a framework for monitoring activities performed by OSPS and FMA staff as well as the criteria used to monitor. The tools are designed to provide a comprehensive assessment of the processes and procedures used by the LWDB to capture, manage, safeguard, and account for and report data. Use of the monitoring tools also ensured that the review process followed a planned and consistent course of action that provided adequate verification of specific program data elements.