



RIVERSIDE COUNTY  
WORKFORCE DEVELOPMENT BOARD

PROGRAM COMPLIANCE  
***POLICY AND PROCEDURES***

Date: November 30, 2018

Number: 17-01

**PURPOSE:**

The Riverside County Workforce Development Board (WDB) establishes this policy to provide guidance to Riverside County Economic Development Agency/Workforce Development Division (WDD) staff, America's Job Centers of California (AJCC)/Workforce Development Centers, staff, partners and subrecipients in conducting effective program monitoring and providing technical assistance to ensure program quality and fiscal integrity.

**EFFECTIVE DATE:**

Upon release

**REFERENCES:**

Workforce Innovation and Opportunity Act (WIOA) of 2014  
Sections 107(d)(8), 183 and 184(a)(4) Title 29 CFR Part 38  
Final Rule Part 683 Subpart D—Oversight and Resolution of Findings Sections 683.410; 683.420; 683.430;  
Federal Register, Volume 78, Number 248, Thursday, December 26, 2013, Part III, Office of Management and Budget, Title 2 CFR, Chapter I, Chapter II, Part 200, et al. Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards; Final Rule

**LOCALLY IMPOSED  
REQUIREMENTS:**

All locally imposed requirements are indicated in ***bold, italic*** type.

**BACKGROUND:**

Pursuant to WIOA section 107(d)(8), the local board, in partnership with the chief elected official for the local area must conduct oversight for local youth workforce activities, local employment and training activities for adults and dislocated workers, and the one-stop delivery system in the local area to ensure the following:

- Compliance with appropriate uniform administrative requirements for grants and agreements applicable for the type of entity receiving funds as regulated by OMB circulars
- Compliance with applicable federal, state and local regulations
- Tangible positive outcomes at a cost in line with planned expenditure
- Procurement, receipt, and payment for goods and services from vendors/contractors comply with uniform administrative requirements and provisions of the vendor agreements
- Fiscal integrity and completion of audit if so required
- Safe training and working environment for both program participants and staff
- Compliance with contract terms and conditions
- Participant eligibility certification and verification
- Compliance with nondiscrimination and equal opportunity in contracts, job training plans, policies and procedures

**POLICY:**

*Administration Unit Specialist will monitor Workforce Innovation and Opportunity Act and other grant programs in accordance with the mandated provisions contained herein.*

*Service providers will be monitored once a year during the term of the contract. Monitoring will cover both programmatic and fiscal activities of the organization and ensure that programs are operated in compliance with applicable Federal, State and Local regulations, and the agreement with the Workforce Development Board (WDB). Technical Assistance may be provided as necessary and appropriate. Following the monitoring review, service providers will be provided with a monitoring report that will:*

- *Recognize service providers with effective program performance and best practices*
- *Identify significant areas of compliance or non-compliance and request corrective action plans, if applicable*
- *Request timelines identifying when corrective action plans are to be in place*
- *Provide follow-up timelines and information*

*Service providers will receive a final determination notice when a corrective action plan is found to be implemented and areas of non-compliance resolved. No further action is required.*

**PROCEDURES:**

**Scheduling**

Notification of the on-site monitoring visit and/or review will include a telephone call, or email, and a confirmation letter identifying the date and time of visit. The confirmation letter will be sent to the service provider 30 working days prior to the visit, identifying the following:

- Date, time
- Place of review, purpose of review
- Areas and materials to be reviewed

- Documents to be completed by service provider
- Copy of monitoring guide to be used during the review

### Desk Review

Prior to the monitoring visit, a desk review utilizing Form PCU 448-35 or PCU 448-35B will be conducted. The desk review will consist of a comprehensive evaluation of current program information and reports on file at the Economic Development Agency/Workforce Development Division (WDD) relating to the service provider's contract and performance.

Review of the agreement will be conducted with special attention to language or practices that would be inconsistent with program goals or cause inconsistencies in the field of service. Any discrepancies will be cited and presented to the Administration Unit Specialist assigned to the agreement. The assigned Administration Unit Specialist will provide recommendations for corrective action, documented in the agreement and monitoring files that may include one or more of the following actions:

- Agreement amendment
- Clarification of agreement language to ensure consistency in the field
- Revision of the scope of work allowing for consistency in both practice and the agreement

Performance summaries obtained from WDD Management Information Systems (MIS) will be reviewed for planned versus actual performance and compared for consistency and accuracy with data obtained from the service provider.

The Desk Review will also include, but is not limited to, a review of fiscal invoices and data, previous monitoring reports, contact information, correspondence and participant records. The data will be analyzed to determine areas of strengths and weaknesses that will be reviewed in the field during the on-site visit. Information obtained as a result of the desk review will also assist in focusing and, if necessary, expanding the scope of review in specific areas.

### On-Site Visit

The on-site visit will permit Administration Unit Specialist to verify or negate data and information obtained from the desk review (Form PCU 448-35 or PCU 448-35B) that may lead to identifying areas of non-compliance. The review will be conducted using the standard monitoring review guide (Form PCU 448-40) designed to identify strengths and weaknesses. The process and major areas of focus during the on-site review are:

- Entrance Conference/Interview-Staff will conduct an entrance conference with the service provider's program administrator or designee to convey the purpose and focus of the visit and to inform the service provider of specific tasks to be completed during the visit.
- Evaluation of Performance-Staff will review and determine the degree of contractual compliance in meeting program performance goals. Staff will also identify the causes in those areas where non-performance is identified.

- Facility Observation -A tour of the training site will be conducted, using the Compliance with Americans with Disabilities Act Questionnaire (Form PCU 448-14 or PCU 448-xx) (completed prior to the visit if necessary) to assess the adequacy of the facility as it relates to, but is not limited to, accessibility for disabled, health and safety, comfort, and adequacy of training equipment.
- Records Review-Validation of information from the desk review will be completed by examination of administrative records, contract files, fiscal records, participant records, and other pertinent information.
- Interviews-Interviews will be conducted with service provider staff, participants and employers to obtain information about program administration, operations, and the quality of the training. Interview guides PCU 448-22 and PCU 448-23 will be utilized for adult programs: interview guides PCU 448-24, PCU 448-31 and PCU 448-44 for youth programs.
- Exit Conference/Interview-An exit conference will be conducted with the service provider's program administrator or designee to discuss results of the monitoring review, provide commendation on best practices, identify areas of non-compliance and suggest corrective actions and offer technical assistance if warranted.

### **Monitoring Report**

Report Format-A monitoring report (Form PCU 448-37B) will be drafted reflecting the analysis of the data and information gathered through the desk review and the on-site monitoring visit. It will be submitted to the Program Compliance Manager and/or designee for review and/or signature prior to providing the report to the service provider. Once approved and signed by the Program Compliance Manager, the monitoring report with a cover letter will be provided to the service provider no later than 30 working days after the on-site review has been completed. The cover letter and report will identify the following:

- Cover Letter
  1. Date of the visit
  2. Agreement or program reviewed
  3. Administration Unit Specialist conducting the review
  4. Purpose of the visit
  5. Results of the visit
  6. Attached report
- Report
  1. Programmatic and fiscal areas in compliance
  2. Programmatic areas requiring modification or improvements
  3. Fiscal areas requiring modification or improvements
  4. Request for timelines when corrective action is needed
  5. Effectiveness of collaboration
  6. Observation of best practices

### **Monitoring Report Elements**

Cover Letter-The introductory cover letter will accompany the monitoring report and will be addressed to the agreement signatory with copies to designated WDD and service provider staff. The cover letter will reference the monitoring visit and address whether areas of non-compliance were noted or non-existent. If corrective action is requested from the service provider, it will be consistent with the information specific to the program and the contract reviewed.

- Body of Report-The body of the report (PCU 448-37B) will outline and identify review results regarding the following:
- Fiscal Management-Evaluation of appropriate actions and documentation of all fiscal matters relating to the contract
- Program Management-Assessment of the overall management of the program and systems. Areas included are, but not limited to, staffing, organizational structure, curriculum (if applicable), staff qualifications, adherence to the Workforce Innovation and Opportunity Act and Riverside County WDD policies, procedures and regulations. The service provider's ability to implement planned services and meet required completion and submission of required paperwork are also assessed. Compliance to sub-tier monitoring of subcontractors/partners and distribution of a monitoring summary/report and follow-up with regard to corrective action if necessary.
- ADA Compliance-Insure compliance with the State of California's Equal Employment Opportunity (EEO) Annual Physical and Program Accessibility Assessment and/or completion of ADA questionnaire (if necessary).
- Continuous Quality Assurance Certification – Applies to year-round youth providers only.
- Program Performance-Assessment of planned performance or provision of services to date.
- Previous Monitoring Findings-Review and status of findings, recommendations, and corrective actions from the previous monitoring review, if applicable
- Findings-Areas requiring corrective action or process and request for a specific implementation date.
- Immediate Corrective Actions Required-Corrective actions are stipulated immediately following a finding of obvious or evident violations of law, regulations or policy as well as breaches of contract provisions.
- Recommendations-Included to assist the provider's resolution, performance improvement or service enhancement for program participants
- Disclaimer-Because the monitoring is conducted on a sample basis, the report should not be considered a comprehensive assessment of the program factors monitored. It is the responsibility of the service provider to ensure systems, programs, and outcomes comply with Workforce Innovation and Opportunity Act and regulations, the Family Economic Security Act, the Americans with Disabilities Act and all other applicable state and federal regulations. Therefore, deficiencies identified in a subsequent review, such as an audit, would remain the sole responsibility of the service provider

### Eligible Training Provider Compliance Monitoring Criteria

- Desk Review  
This level of monitoring will not involve a site visit. A program compliance notification is sent to the training provider. In coordination with the training provider's representative, the



Administration Unit Specialist will mail, email, or conduct a phone interview utilizing the Eligible Training Provider Compliance Monitoring Questionnaire and ADA Physical and Program Accessibility Questionnaire to solicit responses within two (2) weeks of initial notification. Should an ADA Questionnaire already be on file, updating the current questionnaire will suffice. The training provider will return the completed questionnaires to the Administration Unit Specialist. An ETPL Provider Compliance Monitoring Desk Review will be completed by the Specialist based on the information gathered from EDA/WDD Finance & Accounting records, the training provider, and the ETPL Coordinator (Enrollment Report and ETPL Acknowledgement Form).

- **Site Visit**

This level of monitoring will involve a site visit. Prior to the on-site visit, all steps found in the Desk Review (Item 1 above) will be completed and a date scheduled with the training provider within two (2) weeks of receiving the information. During the visit, Instructor and Participant interviews may be conducted utilizing the individual interview questionnaires; a sample of participant files will be reviewed for completeness; and a tour of the facility will be conducted to check for required postings, facility safety and ADA compliance. NOTE: Technical Assistance may be provided to the training provider as needed at either level of monitoring, and should be noted on the monitoring report if necessary.

### **How to Determine a Training Provider’s Rating**

The provider’s rating is determined utilizing the categories listed below. The ETPL Coordinator will provide a MIS Enrollment Report for each provider that identifies the categories below for the period of review. A decision to conduct either a desk review or site visit for each individual provider will be determined based on the following:

<u>Desk Review Only</u>		<u>On-Site Visit</u>	
Enrollments	1 – 10	Enrollments	11+
Complaints	0 – 1	Complaints	2+
Grievances	0 – 1	Grievances	2+
Drop-Outs	0 – 1	Drop-Outs	2+
Provider Progress Reports	0 – 1	Provider Progress Reports	2+

NOTE: Per the State’s EDD Section 188 training held on July 17-18, 2018, each local should ensure any providers or courses placed on the ETPL by their individual ETPL Coordinator is reviewed as required. However, it is allowable for different locals to share monitoring reports when the same ETPL providers or courses are being utilized by WIOA participants and the provider or course was placed on the ETPL by another Local’s ETPL Coordinator. Therefore, the Coordinator should include the Local that approved the provider or course in the MIS Enrollment Report: and the Administration Unit Specialist should review the report for this monitoring option prior to conducting a local review.

Once the monitoring is finished (desk review and/or on-site visit), an ETPL Provider Monitoring Summary Report will be issued within thirty (30) working days to the training provider. Any findings will require “the sufficient” or “insufficient” response process per WDB Program Compliance Policy and Procedures Number 17-01.

## **Report Response**

Upon receipt of the monitoring report, the service provider has 30 working days in which to respond with the corrective action taken, or a timeline for the implementation of corrective action resulting in the resolution of any compliance issues identified in the report. If the monitoring report indicates the service provider to be in general compliance, no response is necessary.

## **Sufficient Response**

The service provider's responses and/or documentation to the monitoring report are submitted to the Administration Unit Specialist. They will review the documentation and/or corrective action plan to determine if it will satisfactorily resolve the non-compliance issue. If the response is determined to be sufficient, a letter of sufficient response will be sent to the service provider within 30 working days from receipt of their response to the monitoring report. Follow-up may be required, and staff will make arrangements with the service provider to confirm implementation of CAP(s). The service provider's response and documentation will be included as part of the monitoring and contract files. Copies may be provided to designated staff and the WDB.

## **Follow-Up**

Follow-up may be conducted (at a time determined by Administration Unit Specialist) following receipt of the service provider's response to ensure corrective action has been initiated or successfully implemented. Subsequent on-site visits may be needed to confirm compliance.

## **Final Determination**

The Administration Unit Specialist will provide a final determination letter when implementation of the corrective action plan is verified and the finding is resolved. No further action is required by the service provider.

## **Insufficient Response**

If the service provider's response (documentation and/or CAP) is determined to be insufficient to remedy compliance issues, the Administration Unit Specialist will request the service provider further delineate corrective action. A letter of insufficient response will be submitted to the service provider, and the report response process will be repeated. The response process will be documented in the monitoring and contract files. Copies may be provided to designated staff and the WDB.

## **Failure to Submit Response and Resolve Non-Compliance Issues**

If the service provider fails to respond to the monitoring report, a failed to respond letter will be provided to the service provider identifying contract sanctions that may be applied if non-compliance issues are not resolved. These include, but are not limited to, the following:

- Reduction of the contracted budget

- Modifications and/or changes to the scope of work
- Withholding of payments or reimbursements until provision of required documentation or corrective actions has been implemented and reviewed by staff
- Notification of unresolved performance deficiencies and questioned or disallowed costs
- Suspension of program operations or
- Termination of the contract

The service provider's failure to respond and thereby resolve non-compliance issues will be documented in the monitoring and contract files. Copies may be provided to designated Administration Unit Specialist and the WDB.

### **Technical Assistance (TA)**

Apart from the monitoring review, technical assistance is available to service providers as necessary and appropriate during the contract period. An on-site technical assistance visit may be scheduled with the appropriate WDD and service provider staff when needs or concerns are identified and warrant intervention or assistance. Scheduling and notification of a TA visit will include a telephone call and/or email, and a confirmation letter with the date and time of visit to the service provider. This will be documented in both the contract and monitoring files.

### **Technical Assistance (TA) Review Summary**

Whenever any intervention or technical assistance is provided, a summary (Form PCU 448-37A) will be completed. The technical assistance review summary identifies areas where technical assistance was provided with corresponding timelines for corrective action. This gives Administration Unit Specialist and service providers an opportunity to amend, modify or correct any problem areas. A cover letter and TA Review Summary will be provided to the service provider. Results of the TA visit will be documented in the contract and monitoring files.

Please direct any questions or concerns regarding this Policy and Procedure to the Administration Manager.

### **REVISION HISTORY:**

Revision Dates: 04/06/05; 11/18/15; 11/30/18

Original Policy Date: 06/06/03

  
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Loren Sims, Administration Manager