**POCONO COUNTIES**

**WORKFORCE DEVELOPMENT BOARD (WDB)/**

**WORKFORCE DEVELOPMENT AREA (WDA)**

TITLE I SERVICE PROVIDER

MONITORING TOOL

**Primary Areas of Concern:**

* **RFP Process for Procurement of Program Services**
* **Review of Subcontractor Agreements**
* **Subcontractor Reporting Requirements**
* **Evaluation of Program Performance/Effectiveness**

## Title I Service Provider Name:

Is the Service Provider responsible for multiple sites? [ ]  YES [ ]  NO

Service Provider Address/Location(s):

Service Provider Point of Contact/Phone/E-Mail responsible for the Contract:

Click or tap here to enter text.

Is the site a CareerLink® or affiliate site?Click or tap here to enter text.

Which WIOA Program Services are covered by this agreement?

 Title I Adult: [ ]

 Title I Dislocated Worker: [ ]

 Title I In-School Youth: [ ]

 Title I Out-of-School Youth: [ ]

 Other: [ ]

 Describe:Click or tap here to enter text.

Agreement Effective Dates: Click or tap here to enter text.

Monitored By:

Date of Monitoring Report:

**PROCUREMENT PROCESS**

1. Was the Title I Service Provider Procured as required by a

 competitive RFP Process? [ ]  YES [ ]  NO

1. Was the RFP process for procuring the Title I Service Provider

 public and in compliance with Federal/State requirements of the

Workforce Innovation & Opportunity Act? [ ]  YES [ ]  NO

1. Were there multiple proposals received in response to the

 RFP? [ ]  YES [ ]  NO

4. Was the awarding of the contract done at a publicly advertised

 Meeting of the Pocono Counties Workforce Development Board? [ ]  YES [ ]  NO

 5. What factors were utilized in reviewing and awarding the

 Contract?

 Compliance with requirements of the RFP: [ ]

Costs: [ ]

 Past Performance: [ ]

 Continuity of Service: [ ]

**Issues/Concerns:**

**COSTS/STAFF ROLES/RESPONSIBILITIES**

1. What is the Contracted Costs for the Title I Service

 Provider?Click or tap here to enter text.

2. What types of costs are detailed/allowed under the terms of the agreement?

 Administrative costs: [ ]  YES [ ]  NO

Program staff costs/benefits: [ ]  YES [ ]  NO

 CareerLink shared costs/Rent: [ ]  YES [ ]  NO

 Utilities/other operational costs: [ ]  YES [ ]  NO

 Supplies/equipment costs: [ ]  YES [ ]  NO

 Other subcontracted services: [ ]  YES [ ]  NO

 If Yes, describe: Click or tap here to enter text.

 Program Costs (ITA/OJT/Work Experience, etc.)  [ ]  YES [ ]  NO

3. Do the costs appear reasonable?  [ ]  YES [ ]  NO

4. Is the Service location a CareerLink® or affiliate site: Click or tap here to enter text.

 If the Service Provider is part of a CareerLink® does the staff

 appear to be well integrated and knowledgeable regarding other

Partner staff/services? [ ]  YES [ ]  NO

5. What types of services are the Title I staff responsible for at

 The site?

 General information regarding CWDS, Self Service

 and other Partner programs and services: [ ]

 Case Management and other Career Services: [ ]

 Business Services: [ ]

 Training Services: [ ]

6. Number of staff provided through this agreement: Click or tap here to enter text.

7. Does the staffing appear sufficient to provide the services described

 In the agreement? [ ]  YES [ ]  NO

8. Does the staff appear knowledgeable regarding their roles/

 Responsibilities? [ ]  YES [ ]  NO

9. Does the staff have the proper background checks per PCWDA

 And Pennsylvania Department of Labor policies. [ ]  YES [ ]  NO

10. Does all staff have access to CWDS for reporting of program

 Services and outcomes: [ ]  YES [ ]  NO

11. Have staff received training and completed Confidentiality

Agreements in compliance with the PCWDA System of Record/

Data Security Policy? [ ]  YES [ ]  NO

12. Are staff aware of the PCWDA Adult and Veterans Priority of

 Service Policy? [ ]  YES [ ]  NO

13. Are staff involved in Title I Participant Eligibility responsibilities

 Knowledgeable and sufficiently trained? [ ]  YES [ ]  NO

14. Are staff familiar with the PCWDA EO/Grievance Procedures/Policy [ ]  YES [ ]  NO

15. Have the Title I staff received training on ADA and related service

 requirements and resources for special needs customers? [ ]  YES [ ]  NO

**Issues/Concerns:**

**SERVICE RECORD/REPORTING REQUIREMENTS**

1. Are participants files complete and in compliance with PCWDA

 Policies for common forms?  [ ]  YES [ ]  NO

2. Are participant files properly secured to protect Personal

 Confidential documents and information? [ ]  YES [ ]  NO

3. Are participant files reviewed by more than 1 staff to ensure

Proper documentation and required information per PCWDA

Policy? [ ]  YES [ ]  NO

1. Is there evidence that customer service and outcome information

 and documentation is entered into CWDS timely and in compliance

with the PCWDA System of Record Policy? [ ]  YES [ ]  NO

5. What methods does the Service Provider use to record participant

 Services and outcomes?

 Participant Program Eligibility: [ ]  CWDS [ ] Paper Records

 Participant IEP/ISS: [ ]  CWDS [ ] Paper Records

 Participant Case Notes: [ ]  CWDS [ ] Paper Records

 Participant Outcomes/Performance: [ ]  CWDS [ ] Paper Records

6. Does the Service Provider utilize other computer

database or software to track customer services/outcomes?  [ ]  YES [ ]  NO

If yes, describe:Click or tap here to enter text.

**Issues/Concerns:**

**PROGRAM PERFORMANCE/EFFECTIVENESS**

 1. Is the Service Provider staff aware/knowledgeable regarding

 WIOA Program Performance Goals/Measures? [ ]  YES [ ]  NO

#### 2. Does the Service Provider utilize any tools to track

####  customer satisfaction?  [ ]  YES [ ]  NO

3. What methods/tools are utilized to track customer satisfaction?

 Click or tap here to enter text.

4. Is the Service Provider currently meeting the performance goals as

Described in the agreement? [ ]  YES [ ]  NO

If not, which performance goals are not currently being met?

Click or tap here to enter text.

5. Does the Service Provider have a corrective action plan to improve

 Performance for measures that are not currently being met? [ ]  YES [ ]  NO

**Issues/Concerns:**

**MISCELLANEOUS COMPLIANCE REQUIREMENTS OF THE AGREEMENT**

1. Does the Service Provider have adequate controls/systems in place

 To properly document costs and expenditures as detailed in the

 Budget included in the agreement? [ ]  YES [ ]  NO

2. Is the Service Provider submitting timely invoices and other

 payment information and documentation as required by the PCWDA

Fiscal Agent? [ ]  YES [ ]  NO

3. Are the various line item expenditures described in this agreement

consistent with the budget submitted by the Service Provider? [ ]  YES [ ]  NO

 4. Is the Service Provider meeting the following Program Expenditure

 And/or Participant Enrollment Goals? Check all that apply.

 Title I Adult Priority of Service Goals: [ ]  YES [ ]  NO

 Title I Adult Fund Obligation/Expenditure Goals: [ ]  YES [ ]  NO

 Title I Dislocated Worker Obligation/Expenditure Goals: [ ]  YES [ ]  NO

 Title I Youth Obligation/Expenditure Goals: [ ]  YES [ ]  NO

 Title I Youth 75 % Out of School Youth Expenditure Goal: [ ]  YES [ ]  NO

 Title I Youth 20% WorkExperience/OJT Expenditure Goal: [ ]  YES [ ]  NO

 Any other Participant Enrollment or Performance Goals

 As described in this agreement: [ ]  YES [ ]  NO

 Please describe: Click or tap here to enter text.

5. Is the Service Provider in compliance regarding the record retention

 requirements of this Agreement? [ ]  YES [ ]  NO

6. Is the Service Provider in compliance with the PCWDA Procurement

 Policy for services or property acquired through this agreement? [ ]  YES [ ]  NO

7. Is the Service Provider in compliance with the PCWDA Property

 Management Policy for equipment purchased through this

agreement? [ ]  YES [ ]  NO

**Issues/Concerns:**

 **SUMMARY/FINDINGS**

1. **AREAS OF CONCERN/DEFICIENCIES**

1. **STRENGTHS**

1. **BEST PRACTICES**

REV. 4/1/20