FY2021 NCTCOG WORKFORCE 3

For

Equus Workforce Services

Contract FY21-TWC-02

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Prepared by the

Workforce Development Quality Assurance Department

North Central Texas Council of Governments

Workforce Solutions for North Central Texas

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Glossary of Acronyms and Definitions

AOP	Affirmative Outreach Plan
COLTS	Choices Online Tracking System
ETPS	Eligible Training Provider System
EQUUS	Equus Workforce Services
HHSC	Health & Human Service Commission
LEP	Limited English Proficiency
NCP	NCP Non-Custodial Parent
NCTCOG	North Central Texas Council of Governments
NCTWDB	North Central Texas Workforce Development Board
NDWG	National Dislocated Worker Grant
OAG	Office of Attorney General
ONET	Occupational Information Network
OTDC	Orientation to Discrimination Complaints
PII	Personally Identifiable Information
PRA	Personal Responsibility Agreement
REP	Re-employment Plan
WORCS	Equus Workforce Operations and Re-employment Case System
RESEA	Reemployment Services and Eligibility Assessment
SNAP	Supplemental Nutrition Assistance Program
TANF/Choices	Temporary Assistance for Needy Families/Choices
TAA	Trade Adjustment Assistance
TDS	Talent Development Specialists
TRA	Trade Readjustment Allowance
TWC	Texas Workforce Commission
TWIST	The Workforce Information System of Texas
UGMS	Uniform Grant Management Standards
WD	Workforce Development
WIT	WorkInTexas.com, TWC's online job matching system
WSNCT	Workforce Solutions for North Central Texas

Laserfiche	The electronic document management system for customer records. The migration of Workforce program records began September 24, 2018.
Merit Staff	State case management staff that provide services through the American Job Center Network Delivery system, and have their salaries paid from program specific funding streams such as Trade Adjustment Assistance or Wagner Peyser.

North Central Texas Council of Governments

Workforce Solutions for North Central Texas
FY2021 NCTCOG Workforce Review 3
Equus Workforce Services
North Central Texas Workforce Services Contract FY21-TWC-02

BACKGROUND

Following the adoption of a resolution by the North Central Texas Workforce Board of Directors at the May 19, 2020 Board meeting endorsing Equus Workforce Services as the provider for the delivery of Workforce Services, the North Central Texas Council of Governments executed a new one - year contract (with options for renewal) which includes specific language for appropriate contractual sanctions and/or remedies to ensure that all established performance measures will be met.

RISK

The FY2021 Risk Assessment determined that Data Integrity and Customer Service continue to be the primary areas of risk for all Workforce programs. COVID-19 triggered changes that affected the participation requirements for Choices and SNAP programs, and work search requirements for WIOA Significant consideration was given to the following:

- Continued risk for SNAP in following the requirements for the form H1822, Good Cause, and Reconsideration actions to HHSC,
- The conversion of Choices, NCP, and SNAP programs to Laserfiche,
- significant reforms in State TAA guidance, including the requirement to co-enroll all TAA customers in WIOA, and
- Continued integration of Vocational Rehabilitation Services requiring resources for larger numbers of individuals with significant barriers to employment,
- High rates of turn-over in Subrecipient staff, and
- Insufficient evaluation methods for the effectiveness of subrecipient staff training.

OBJECTIVE

NCTCOG conducts program monitoring as required by TWC to provide:

- Enough information to the workforce services subrecipient for implementing timely corrective actions to meet requirements and performance measures as contracted,
- Assurance to TWC that workforce services programs are operated with compliance with regulations and policies so TWC may rely on system data for their reports to federal partners,
- Pertinent information to the North Central Texas Workforce Board to fulfill their oversight responsibilities, and
- Assurance to the public and participants that quality and compliant services are being equitably delivered throughout the Workforce Solutions for North Central Texas area.

SCOPE

This review focused on data integrity and customer service through review of:

- Support Services and Incentives for Choices, NCP and SNAP
- Choices Work Activities and Support Services
- SNAP 1817 Reconsiderations
- SNAP Form 1822 Work Requirement Verifications
- SNAP Good Cause, Temporary Interruptions, and Sanctions
- WIOA Data Validation Adult and Dislocated Worker
- WIOA Data Validation Youth
- WIOA Adult and Dislocated Worker Training and Support Services
- WIOA Youth Training and Support Services
- TAA Data Validation
- AOP Log Review

Desk reviews included a sample of work from the 11 centers in the North Central Texas Board area.

METHODOLOGY

Sample cases were chosen by simple random selection. The reviews utilized data and reports from The Workforce Information System of Texas, WorkInTexas.com, COLTS, and individual case files from Laserfiche.

SUMMARY OF RESULTS

SNAP 1817 Reconsideration

A slant review of the Reconsideration process was conducted for the SNAP program to ensure all requirements were met based on the finding identified by TWC in January 2020. The scope of the review was February 2021 through March 2021; nineteen files were reviewed.

The review focused on the timely submission of the form 1817 to HHSC, the entry of the Reconsideration reason in the SNAP E&T History Good Cause tab when a SNAP recipient requests a Federal Exemption, closure of SNAP activities, entry of Service 39 in Service tracking, Program Detail closure, file documentation, and timely and accurate counselor notes.

The accuracy rate decreased to 63.16% from the quarter two review that had an accuracy rate of 85.19%.

There were seven (7) errors overall.

- Service activities not entered, or service activities not closed,
- 1817 and/or Fax transmittal forms were not in the file.
- There was inaccurate counselor note documentation in TWIST.

Out of the eleven centers reviewed, three had 100% accuracy rate.

SNAP 1822 Work Requirement Verifications

The review focused on the timely submission of the form 1822 to HHSC, accurate completion of the 1822 form and timely and accurate counselor notes as well as documentation placed in the customer file.

Two independent reviews were conducted of the form 1822 process during Quarter three in the months of April and June 2021.

Twenty files were reviewed in April with an 80% accuracy rate; the scope of review was February through March 2021. Twenty-one files were reviewed in June and had an 85.71% accuracy rate; the scope of review was May 2021. The April review consisted of four errors and the June review had three errors. Both reviews contained similar errors for missing forms in the file and counselor note documentation:

- The 1822 form is not in the file.

- The 1822 form and fax confirmation to HHSC are in the file but there is no documentation in counselor notes of the activity.
- Incorrect date on the 1822 form.
- Counselor notes do not match the documents in the file and contains inaccurate information.
- The 1822 form was not sent within two weeks of customer enrollment in the SNAP E&T Program.

Four centers had 100% accuracy during the two review periods and there were three centers that did not have enrollments for the review.

SNAP Review

Twenty-one files were reviewed that focused on Temporary Interruptions, Good Cause and Sanctions as well as 1822 and Reconsiderations. The scope of the review was April 2021.

The overall accuracy rate was 86.32%. The following errors were found in the areas below:

- There were three files that were applicable to the Temporary Interruptions and Good Cause, the accuracy rate was zero percent (0%) for both elements.
- The form 1822 had incorrect dates documented.
- Sanctions were not applied appropriately.
- The Program Detail was closed incorrectly.
- HHSC was not notified within 24 hours when the customer reported a change.

Three centers had 100% compliance. Continuous review of the SNAP Guide and Board Policies is recommended to ensure that the processes are being followed and case management compliance is met.

Choices

A review was conducted of the Choices Work Activities and Support Services. Twelve files were reviewed for the scope period of April 2021. Due to the COVID-19 pandemic, participation is not required but if a customer chooses to participate staff must follow the program requirements. There were only six centers that had active case files due to the low enrollment.

There were fifteen errors for an accuracy rate of 78.26%:

- TWIST data was not entered accurately and timely.

- Participation activities were either not allowable and/or were not calculated correctly.
- Participation activity documents, TWIST Service tracking and TWIST Counselor notes did not match. This is a repeat finding from the Quarter 2 review.
- For Support Services, there was not sufficient documentation to validate the issuance of the support and counselor notes did not document that no other resources were explored or available prior to issuing the support.
- HHSC was not notified within 24 hours when the customer reported a change. This is a repeat finding from the Quarter 2 review.

WIOA Adult, Dislocated Worker and Youth Data Validation

Twenty Adult/Dislocated Worker and 12 Youth cases were read for the most common data validation requirements. Gaps were found in the alignment of TWIST case notes, service tracking and customer files including:

- Customer files that do not support the date of WIOA entry because they lack a copy of the service plan or assessment.
- Customer files that do not support the date of WIOA Exit because they lack a copy of the current service plan or a vendor document to establish the end of training.
- Cases with monthly service tracking entries closed as continuing and then allowed to soft close or cases that did not have the monthly service closed.
- Missing service code entries into TWIST service tracking for codes 8, 68 or 29.

All cases were 100% compliant in recording other vital points of data including:

- Recording birth dates, highest education levels and current school status.
- Capturing the customers self-reported data on disability.
- Collecting documents to support the additional eligibility qualifiers for Youth customers.

WIOA Adult, Dislocated Worker and Youth Training and Support Services

Twenty Adult/Dislocated Worker and 12 Youth cases were read for compliance with regulation on training activities and the payment of support services. Only two errors were found in the Youth files. Significant gaps were found in the Adult/DW files resulting in an overall accuracy rate of 84.09%. Errors include:

- A lack of case notes to document the need for training.
- A lack of case note documentation for the ITA process.
- Customer files that lack signed ITA vouchers or data missing from the TWIST ITA tab.
- A lack of vendor documents to support the type, cost and dates of training.
- Customer files that do not contain support request forms to match the entries in TWIST.

- Different dollar amounts for the same support service being entered into case notes, TWIST service tracking, or customer files.
- One case that has a support service entered in TWIST service tracking while case notes document that it will not be paid.

The training provided for all customers will result in a degree or certification and was supplied by vendors in good standing on the statewide Employment Training Provider List.

TAA

A total of 8 cases were read for compliance with data validation regulations. Gaps exist in the integrity of data entry within and between systems including:

- A lack of supporting documents for the first TAA service or exit from service.
- A lack of supporting documents for the attainment of credentials entered in the TWIST performance tab.
- Date discrepancies between case notes and documents in customer files.

All cases were 100% compliant in recording other vital points of data including:

- Capturing the customers self-reported data on disability.
- Documenting the dates customers were separated from employment and the length of tenure.
- The issuance date of waivers of the training requirement.

Affirmative Outreach Plan (AOP)

A sample review of twenty outreaches was conducted for the scope period of January 2021 through March 2021. The overall Accuracy Rate is 96%.

The following errors were cited:

- Multiple outreaches for Element #7 (Demographic group outreached) did not include adequate documentation of the demographic group outreached (e.g., to reach a specific population of the community such as veterans, youth, etc.). Element #7 accumulated the highest number of errors.
- The remaining 7 elements reached 100% accuracy rates (Element #5 indicated N/A in each review).

Process gaps were identified, including a lack of clear documentation of the direct contact's name, and about which demographic groups were targeted and why. Staff effectively documented what services are offered and included the outcomes and next steps.

CONCLUSION-GAP ANALYSIS

The errors found in this review cycle indicate a sustained lack of Management oversite and controls needed to accomplish consistent data integrity and continuity of quality case management. The SNAP file reviews indicate that there is continued lack of staff adherence to SNAP and Board policy requirements. The Choices program's decline in accuracy rate for this round of monitoring is a cause for concern, especially since there were low caseloads and enrollments due to COVID-19. The accurate and timely data entry of customer information into TWIST and Laserfiche is a basic aspect of effective case management that has great significance for the correct and accurate reporting of data to State and Federal entities. Conflicting or missing data, regardless of the program, calls into question what services the customer has or has not received. If not improved, it will continue to result in data validation/data integrity errors. Improvement in management oversite is needed.

PROGRAM FINDINGS

Finding 1*:* Seventy-nine data integrity and case management errors were identified during the file review of seven-hundred-thirty-two applicable elements. Specific case errors are detailed in the attachments provided with the draft report.

Citation: Equus Workforce Services, North Central Texas Workforce System Contract # FY21 TWC-02:

Section 5: Contract Performance:

- *5.3 The Subrecipient shall provide such services in compliance with all applicable federal and state laws, regulations, and rules.*

- *5.4 The Subrecipient shall comply with all Texas Workforce Commission (TWC) policies and procedures or guidance manuals, attached hereto or incorporated herein by specific reference and other Administrative Entity directives as issued. In the event of a conflict between such laws and regulations and the terms and conditions the Contract, precedence shall be given to the laws and regulations.*

Section 9: Reporting Requirements:

- *9.3 The Subrecipient understands that it will be held liable for completeness, accuracy, and consistency of all data under its control.*
- *9.6 Failure to data input or to report in accordance with the terms of this Contract may result in withholding by the Administrative Entity of any payments otherwise due or, it may result in financial sanctions to be imposed in accordance, with the Administrative Entity's policies and procedures. Recurring failure to meet the terms and conditions for data input or reporting may result in the termination of this Contract.*

Required Corrective Action

Equus Management must correct individual file errors *where possible* and provide evidence of the corrective actions with their response to this report. Training on applicable rules and regulation regarding data collection is needed. Regarding the AOP Log review, process issues to be addressed are to ensure that staff performing the outreach document the Business/direct contact names and the demographics targeted.

Equus Response

Equus Workforce Solutions Management has reviewed the report and its findings and have worked with Talent Development Specialists (TDS) to correct what is correctable. Program Managers reviewed each error with the TDS to ensure appropriate correction was applied if applicable and provided technical assistance on all correctable and non-correctable errors.

The Operations Team consisting of the Program Managers and Youth Manager continueto operate under the continuous improvement model – ***Identify, Plan, Execute, Review -*** in an ongoing effort to improve communication with staff including Standard Operating Procedures, Desk Aids, Training, Technical Assistance, weekly meetings with TDS, andQuarterly Trainings with TDS.

Plan – The Operations Team is currently working with Project Director, Deputy Director,QA Manager and HR Manager, to develop a plan to increase access Accuracy rates. The plan will include:

- A thorough analysis of staff recruitment, retention, training, and accountability
- An analysis of current new hire training, technical assistance, ongoing training, and program quarterly meetings.
- A redesign of how we test for understanding after the training. The plan will includemore project-based testing for understanding such as complete a Form 1822 or complete a counselor note. Testing for understanding may extend beyond the actual day of training and may include review of current files. New hires will be a top priority on this testing for understanding after initial and ongoing training.
- A review of how and when SOPs, desk aids, WFSNCT Policies, WD Letters, Program Guides and other written communication is shared with staff.
- A review of the roles of the Operations Team and the Center Managers as it relates to providing direction to the staff.

Execute – The plan will be executed by September 30,2021.

Review – Review will take place using the following methods:

- Internal QA reviews
- Operations Team technical assistance or testing for understanding reviews

- Center Manager/Supervisor reviews

The focus of the reviews may be targeted such as new staff, staff with low accuracy rates, staff who did not pass their post-test/testing for understanding project, etc.

SNAP

All errors have been discussed with the responsible TDS, and the errors that were correctable have been corrected. Findings were reviewed during weekly TDS meetings and will be reviewed again during weekly SNAP meetings and the Quarterly Training which will be held prior to September 30, 2021.

Focus continues to be on completion of 1822s and errors associated with this such as timeliness and placement in Laserfiche and TWIST Counselor Notes.

The Program Manager was the first to implement the project-based testing for understanding requesting that the TDS complete an 1822 after the recent SNAP training.

Choices

All errors have been discussed with the responsible TDS, and the errors that were correctable have been corrected. Findings were reviewed during weekly TDS meetings and will be reviewed again during weekly Choices meetings and during the Quarterly Trainings which will be held prior to September 30, 2021.

Equus continues with the Choices QIP full reviews implemented on 03-08-21. for the Choices Program. This plan includes a review of the case by the TDS' with Center Managers, Quality Assurance and Program Management conducting quality review checks on a percentage of the cases reviewed.

Equus recognizes the need for continuous improvement with TWIST accurate and timely data, participation activities, support services, and timely communication with HHSC. Weekly denominator calls will be extended to include reviewing these items.

WIOA Adult, Dislocated Worker and Youth

All errors have been discussed with the responsible TDS, and the errors that were correctable have been corrected. Findings will be reviewed once again during weekly TDS meetings and during the Quarterly Trainings which will be held prior to September 30, 2021.

Program Managers will continue to share weekly active/inactive lists with TDS and Management staff. Program Managers will request a status update focusing on those without a recent contact to expect re-engagement of the customer and to avoid a soft closure. Random files may be selected to review the service plan for quality and completion. The Info maker Report that determines those who have been determined

eligible, certified, and enrolled will continue to be complete weekly by Performance Analyst and reviewed by the Operations Team to ensure services are completed timely and customer is enrolled in the program. Services include 8, 68, and 29.

Random reviews of TWIST Counselor Notes will be reviewed by Center Managers, Supervisors, Operations Team, or other members of the leadership team.

The Operations Team will increase their involvement with the ITA justification process including reviewing Encumbrance Budget Packet, approval process, assisting in the reviewing and/or keying information in TWIST ITA Financial Tab, and reviewing support services for justification.

TAA

All errors have been discussed with the responsible TDS, and the errors that were correctable have been corrected. Findings will be reviewed once again during weekly TDS meetings and during the Quarterly Trainings which will be held prior to September 30, 2021.

Random reviews will be conducted by Operations Team and/or Center Managers. Focus will be on areas of concern such as lack of supporting documents for services and/or exits, credentials, and discrepancies in the file.

Affirmative Outreach Plan (AOP)

All errors have been discussed with the responsible staff and the errors that were correctable have been corrected. On 7-26-21, Equus management reviewed the 2018 & 2020 Census demographic information shared by NCTCOG Sr. Program Manager – Compliance and Continuous Improvement. Center management understands the requirement for Affirmative Outreach efforts to be targeted to the areas of gender, race, or disability status. Equus staff conducting Affirmative Outreach efforts will complete training by 8-20-21 to review the Census demographic information and instructions on how to complete the log.

CONCLUSION-GAP ANALYSIS

Equus Workforce Solutions Management is confident that the response listed above showing our plan to ***-Identify, Plan, and Review*** – will create a process that will result in increased quality of the files and an increase in accuracy rates. Our current processes of weekly program meetings, quarterly program trainings, revamped testing for understanding, QIP file reviews, random file reviews are some of the areas which we believe will increase the quality of the files.

PROGRAM FINDINGS

Equus Workforce Solutions strives to achieve the highest standards in the delivery of quality services to meet all Board, State, and Federal rules. All files were corrected if allowable, and support documentation is included as an attachment to this response.

Internal monitoring by the Equus Quality Assurance Team will continue to identify gapsin program compliance and trends to be addressed through training, technical assistance, and review of current Standard Operating Procedures/Desk Aids.

APPENDIX A

Program Reviewed	Area of Review	Period of Review	Number of Records Reviewed	Number of Errors found in the Number of Elements Reviewed	Total Elements Yes	Total Elements No	Total Applicable	Overall Case Accuracy Rate
SNAP	Temp Interruptions, Good Cause, Sanctions, 1822 & Reconsiderations	April 2021	21	13/95	82	13	95	86.32%
SNAP	1822	May 2021	21	3/21	18	3	21	85.71%
SNAP	1822	February - March 2021	20	4/20	16	4	20	80%
SNAP	1817 Reconsiderations	February - March 2021	19	7/19	12	7	19	63.16%
Choices	Work Activities and Support Services	April 2021	12	13/69	56	13	69	81.16%
WIOA Adult DW	Data Validation	October 2020 – March 2021	20	8/103	95	8	103	92.23%
WIOA Youth	Data Validation	October 2020 – March 2021	12	2/51	49	2	51	96.08%
WIOA Adult DW	Training and Support Services	October 2020 – March 2021	20	14/88	74	14	88	84.09%
WIOA Youth	Training and Support Services	October 2020 – March 2021	12	2/58	56	2	58	96.55%
TAA	Data Validation	January – April 2021	8	6/41	35	6	41	85.37%
AOP	Outreach Log	January-March 2021	20	7/167	160	7	167	96.0%