



North Central Texas Council of Governments

March 16, 2026

Dr. Michael Thompson II
Project Director
Career Team
1101 Resource Drive #100
Plano, TX 75074

Dear Dr. Thompson:

NCTCOG completed the first review for FY2026 related to the Contract # FY26-TWC-02, between Career Team and NCTCOG, for the provision of workforce services for Workforce Solutions for North Central Texas.

The attached final report details the scope of the monitoring and includes Career Team's response to the required corrective action. Your timely completion of the required error corrections and management response is appreciated. All errors are resolved pending follow-up monitoring of the successful implementation of your proposed corrective actions.

My staff are available to answer questions about this report and to provide technical assistance as needed.

Sincerely,

Phedra Redifer
Executive Director of Workforce Development

Cc: Anthony Terlizzi, President, Workforce Services Division, Career Team
Shellonda Rucker, Regional Director of Operations, Career Team

SharePoint URL: <https://nctcog.sharepoint.com/sites/Extranet-WD-ResCare>



North Central Texas Council of Governments
Workforce Solutions for North Central Texas
FY2026 NCTCOG Workforce Cycle 1
Career Team Workforce Services
North Central Texas Workforce Services Contract FY26-TWC-02

March 16, 2026

Prepared by
NCTCOG Workforce Development Continuous Improvement Quality Assurance

Table of Contents

Career Team Workforce Services	1
North Central Texas Workforce Services Contract FY26-TWC-02.....	1
BACKGROUND.....	3
RISK.....	3
OBJECTIVE.....	3
SCOPE.....	4
METHODOLOGY	4
SUMMARY OF RESULTS	4
CONCLUSION-GAP ANALYSIS.....	7
PROGRAM FINDINGS	8
REQUIRED CORRECTIVE ACTIONS	8
CAREER TEAM RESPONSE	8
APPENDIX A	11
GLOSSARY OF ACRONYMS AND DEFINITIONS	12

BACKGROUND

North Central Texas Council of Governments (NCTCOG) Board Monitoring is conducted to align with TWC requirements based on the Texas Administrative Code (TAC). Monitoring activities are outlined in a Monitoring Plan developed at the beginning of each fiscal year by the Board's Workforce Development Quality Assurance Unit. Texas Administrative Code Section §802.82 notes the following:

- Workforce Boards must conduct and complete regular oversight of their own activities and regular fiscal and program performance monitoring. These monitoring activities must be designed to promote programs achieving intended results and resources being efficiently and effectively utilized for authorized purposes protected from waste, fraud, and abuse. Monitoring activities must focus on areas of highest risk to help ensure the most effective use of monitoring resources. Monitoring activities assess compliance with applicable laws, regulations, provisions of contracts, Board plans, and official directives.

Additionally, Section 188 of the Workforce Innovation and Opportunity Act (WIOA) and related Federal regulations require both programmatic and physical access at all American Job Center partner locations. Required evaluations of accessibility must include how well Workforce Center partners ensure equal opportunity for individuals with disabilities to participate in provided services. In 2020 North Central Texas Council of Governments (NCTCOG) began using Registered Accessibility Specialists (RAS) to conduct accessibility reviews of the Workforce Centers as new office spaces were acquired or remodeled to accommodate Vocational Rehabilitation (VR) staff. The NCTCOG Continuous Improvement Quality Assurance (CI/QA) team continues to formally monitor subrecipient to ensure required EO posters are visible to the public, staff are knowledgeable about PII (Personally Identifiable Information) requirements and activities related to accessibility for individuals with disabilities.

RISK

The FY2026 Risk Assessment determined that data integrity, process changes, and customer service continue to be the primary areas of risk for all Workforce programs. Other risk factors include:

- The acquisition of a new subrecipient for FY26 resulted in staff realignment and turnover.
- The transition of the NCP program case management from the TWIST system to OAG CHAMP and Work in Texas Case Management systems.
- RESEA pilot program requirements and implementation requiring continual staff re-training.

OBJECTIVE

NCTCOG conducts program monitoring as required by TWC to provide:

- Enough information to the workforce services subrecipient to implement timely

corrective actions to meet requirements and performance measures as contracted.

- Assurance to TWC that workforce services programs are operated in 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.
- 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

Reviews focused on the data integrity and customer service through review of:

- Choices Case Management
- WIOA Adult and Dislocated Worker Case Management
- WIOA Youth Case Management
- RESEA Case Management
- Site visits to all Workforce centers to review the following:
 - Ensure EO Compliance and confirmation that all required posters are present in the centers, and the Priority of Service Board Policy Notice was visible in common areas
 - Physical checks and availability of all adaptive equipment
 - Testing of staff knowledge related to adaptive equipment, LEP, Priority of Service and PII regulations

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

METHODOLOGY

Programmatic reports are pulled from WorkInTexas.com and individual samples of cases are chosen by simple random selection. A minimum of 10% is selected per center. The scope of review is determined by each program and the type of review to be performed: previous month, quarterly, etc.

SUMMARY OF RESULTS

Choices Case Management Review

Thirty-four (34) files were reviewed for the scope of October 2025. Areas of review focused on full case management processes. Eleven (11) centers were reviewed, and all centers had an overall accuracy rate that fell below 90%. There were one hundred thirty-eight (138) errors, and eighteen (18) elements of thirty (30) were below 90%. Overall, many of the elements have an accuracy rate below 90%, and this indicates that there is a lack of compliance with the program. Case Management errors found included:

- Participant files did not contain the required documents such as intake forms and

monthly TANF eligibility status forms.

- The Family Employment Plan (FEP) was either incomplete or lacked customer signature.
- Participation hours were not entered accurately in WIT Attendance Tracker or there was not sufficient documentation in the file to support the entries.
- The TABE assessment was not conducted or not documented appropriately.
- HHSC notification was not timely; within 24 hours of a change reported by the participant.
- The overall data entry in WorkinTexas.com was not accurate, timely or there was no supporting documentation in the file.

The accuracy rate is 68.99%.

RESEA Case Management Review

Twenty-three (23) customer cases were reviewed for required RESEA activities and services provided to customers for the scope of October 2025 to November 2025. Fifteen (15) of twenty-five (25) applicable elements were below a ninety per cent (90%) accuracy rate. Case management errors found included:

- The RS1 was not entered timely.
- The Virtual recruiter was not set up for the Customer.
- Individual Employment Plans (IEP) were not found in the WIT file.
- No WF-42 uploaded and documented as sent to UI for customers not meeting participation requirements, in some cases.
- The RS1 appointment was scheduled beyond the 14 days from the initial RESEA appointment.
- Case notes do not document all activities and services provided.
- Lack of documentation in WIT that the customer was outreached at least 2 days prior to the initial RESEA appointment.
- Lack of documentation explaining to the customer the consequences for failure to attend the appointment.

The overall accuracy rate for the review is 79.23%.

WIOA Adult and Dislocated Worker Case Management Review

Eighteen (18) files were reviewed for the scope period of September 2025-October 2025. Files were reviewed to ensure correct case management processes were followed for intake/eligibility of the WIOA Adult and Dislocated Worker. There were twenty-one (21) errors found, and seven (7) elements fell below the 90% accuracy rate. The errors and observations found during this review are indicated below:

- Incomplete, missing, or unsigned IEP's (Individual Employment Plan).
- WIT Case Notes were not entered timely in some instances.
- Discrepancies were found in the eligibility dates on application.
- Delay in mileage reimbursement.
- TABE results were not entered into WIT for each case.

- In several cases, the resume in WIT was missing or inactive.
- Discrepancies in case notes were found, such as noting two different training goals.
- The Personal Financial worksheet was blank in one case.
- 30-day contact was not maintained with the Customers, in several cases.
- Overall Observation amongst all centers: Inconsistency was seen with Traitify assessments being administered. It was confirmed that the new subrecipient will no longer use Traitify as an assessment tool.
- Improvement was seen in comparison to previous reviews regarding completed and signed IEPs. Additional improvements included the Customer resume being active and online in WIT or Laserfiche and accurate Service Codes in WIT.

The accuracy rate for the review is 93.05%

WIOA Youth Case Management

Sixteen (16) files were reviewed scope period of September-November 2025. Files were reviewed to ensure correct case management processes were followed for intake/eligibility of the WIOA Youth. There were forty-two (42) errors found, and seventeen (17) elements fell below the 90% accuracy rate. The errors and observations found during this review are summarized below:

- Incomplete, unsigned, or missing ISS's (Individual Service Strategy Plan).
- 30-day direct contacts were not maintained with the Customer in several cases.
- WIT Case Notes were not entered timely in some instances.
- An incentive was not issued timely.
- TABE results were not found in Laserfiche.
- Discrepancy in employment.
- Resumes were not found in either WIT or Laserfiche.
- In several cases, the Orientation to Complaint form did not reflect the current EO Officer.
- Discrepancies in the SWE start date were found in one case.
- Support Services Code was missing in the WIT ribbon.
- One Case Note was not entered timely.
- In more than one case, the Customer self-attested that they have a disability, however, it was not documented if reasonable accommodations were discussed.

The accuracy rate is 83.40%

Equal Opportunity, Accessibility and Personally Identifiable Information Reviews:

The CI/QA team conducted on-site reviews at all centers during the months of October-November 2025, and the observations are summarized below:

- Minor gaps were identified in the maintenance of adaptive equipment and have been resolved. One workforce center discovered their UbiDuo was no longer functioning and it was promptly replaced.
- Staff who were interviewed about training on the adaptive equipment typically reported that training is provided when a new hire begins work and quarterly for existing staff. Centers also relayed they have daily staff huddles. Staff were able to demonstrate how to use the equipment correctly.
- One gap that was found related to the EO is the Law poster in that some versions were

not the most current version. Several centers also did not have the Vietnamese and Chinese versions of the EO is the Law poster available, if requested. NCTCOG staff ensured these versions were printed and corrected while on site. The Vietnamese and Chinese and versions will be available at the front desk, if requested.

- NCTCOG staff assured the Priority of Service Board Policy was visible in or near the resource area.
- No PII or PHI was heard being discussed in phone conversations or with customers while in the Centers. Staff knew how to take appropriate precautions such as locking desk drawers or workstations when away. Staff also answered multiple questions correctly and demonstrated proficiency in actions related to PII policy and practices to safeguard sensitive information.

CONCLUSION-GAP ANALYSIS

For the PII/Assistive technology reviews, Career Team provided confirmation that suitable corrections for any inoperable adaptive equipment and outdated posters are in place. It is recommended that training for new hires should be completed as early as possible after employment begins and repeated regularly for all staff. The PII reviews indicate that Career Team staff are knowledgeable of the requirements and that consistent training for new and tenured staff should occur on a regular basis, to ensure staff remain knowledgeable of these requirements.

For the WIOA Adult/Dislocated Worker/Youth programs, there was overall compliance in initial eligibility determination. However, gaps were found regarding timeliness issues, maintaining contact with the Customer within 30 days, a lack of IEP/ISS information or signatures, discrepancies in dates on the training outlines, IEP and Case Notes, and delays in initiating training for the Customer. It is recommended that staff continue to review the WIOA Guide, WD Letters and Board Policies.

The Choices program monitoring review results indicates that there continues to be a gap in program compliance. Accuracy rate is well below the required 90% and there was not a significant increase from the last review in FY25. The lack of case management in the WIT system, missing documentation in the electronic file, and untimely reporting to HHSC may have an impact on a participant's benefits and/or cause delays in appropriate coding and continuation of services. It is recommended that staff receive programmatic training, internal self-monitoring is conducted, and staff stay acclimated to the most current TWC guidelines and Board policies.

The RESEA program review indicates that there has not been a significant increase in the accuracy rate in comparison to the previous review conducted in FY25. Most corrections cannot be made retroactively for RESEA services because of the timeliness issues involved. Individual and group staff re-training is suggested for elements with a less than 90% accuracy rate to reinforce the rules and prior training, and to help staff improve their ability to deliver all the required services to customers at each appointment.

PROGRAM FINDINGS

Finding 1: Two hundred and fifty-five (255) data integrity and case management errors were identified during the file review of one thousand two hundred and sixty (1,260) applicable elements.

Citation: Career Team Workforce Services, North Central Texas Workforce System Contract #FY26-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 ACTIONS

Career Team Management must correct individual file errors where possible and provide evidence of the corrective actions with their response to this report. Elements that specifically identify program performance and actions that could impact the eligibility benefit for participants should be more heavily reviewed.

CAREER TEAM RESPONSE

Choices Case Management

The Choices Program accuracy was 68.99%. This is below the required 90% accuracy rate, there were some areas of concern: Participant files did not contain the required documents such as intake forms and monthly TANF eligibility status forms, Family Employment Plan (FEP) was either incomplete or lacked customer signature, participation hours were not entered accurately or there was not sufficient documentation in the file to support entries, TABE assessment was not conducted or not documented appropriately, HHSC Notification was not timely and the overall data entry in WorkinTexas.com was not accurate, timely or there

was no supporting documentation in the file. Below are the corrective action steps taken to ensure the elements below 90% are addressed to meet program requirements.

- The Program Manager will continue to prioritize improving quality and performance, particularly supporting new staff as they learn to navigate WorkInTexas.com and Laserfiche.
- Staff training covering Choice's participation hours, TABE assessment documentation, timely reporting of information to HHSC, and accurate data entry in WorkinTexas.com was held on **February 11, 2026**, reinforcing expectations and strengthening staff understanding of program requirements.
- Staff are required to use WD 06-13, Change 2 as a reference when documenting services and contacts in WorkinTexas.com.
- The Program Manager will discuss case management improvement and quality enhancement strategies during quarterly training in March.

RESEA Case Management

The RESEA Program accuracy was 79.23%. This is below the required 90% accuracy rate, the areas of concern are: The RS1 was not entered timely, Virtual recruiter was not set up for the VIP, Individual Employment Plans (IEP) were not found in the WIT file, no WF-42 uploaded and documented as sent to UI for customers not meeting participation requirements, in some cases, the RS1 appointment was scheduled beyond the 14 days from the initial RESEA appointment, case notes do not document all activities and services provided, lack of documentation in WIT that the customer was outreached at least 2 days prior to the initial RESEA appointment, and Lack of documentation explaining to the customer the consequences for failure to attend the appointment. Below are the corrective action steps taken to ensure the elements below 90% are addressed to meet program requirements.

- The Program Manager will provide training targeting the elements that were below 90% during our weekly conference calls on Friday.
- Staff are required to conduct a self-review of all assigned files. The reviews will be submitted to the Program Manager to review.
- The Program Manager completes a sample review of files each month and follows up with staff to ensure corrections are made. The Program Manager will provide Technical Assistance in a one-on-one.

WIOA Adult and Dislocated Worker Case Management

The WIOA Adult and Dislocated Worker Program accuracy was 93.05%. Although it meets the required 90% accuracy rate, there were some areas of concern: Incomplete, missing, or unsigned IEP's (Individual Employment Plan), WIT Case Notes were not entered timely in some instances, discrepancies were found in the eligibility dates on application, delay in mileage reimbursement, and TABE results were not entered into WIT for each case. Below are the corrective action steps taken to ensure the elements below 90% are addressed to meet

program requirements.

- The Program Manager and Program Advisor will provide training targeting the elements that were below 90%.
- The Program Manager and Program Advisor met with individual staff members to address issues and provide coaching on noted case corrections and problem areas.
- Monthly staff training conducted on February 25th covered case management requirements, including monthly contact, timely entry of case notes, required documents to be uploaded into WIT and required signatures on all documents.
- The Program Manager and Program Advisor conducts a sample review of files each month and follows up with staff to ensure corrections are made timely. The Program Advisor will provide Technical Assistance in a one-on-one meeting to review any errors.

WIOA Youth Case Management

The WIOA Youth Program accuracy was 83.40%. This is below the required 90% accuracy rate, there were some areas of concern: incomplete or missing ISS plans, missed 30-day contacts, untimely WIT case notes, untimely incentive issuance, missing TABE results, employment discrepancies, missing resumes, outdated Orientation to Complaint forms, an incorrect SWE start date, missing support service codes, and lack of documentation confirming discussion of reasonable accommodations when youth self-attested to having a disability. Below are the corrective action steps taken to ensure the elements below 90% are addressed to meet program requirements.

- The Program Manager and Program Advisor met with each staff to address the issue. All items that could be corrected have been corrected. Items that were not correctable were reviewed and used for staff coaching and training to prevent future errors
- Staff training covering WIOA Youth case management, documentation standards, and compliance requirements was held on **February 19, 2026**, reinforcing expectations and strengthening staff understanding of program requirements.
- Ongoing monitoring and enhanced supervisory oversight will continue to ensure accuracy improves and prevent recurrence in future reviews

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
Choices	Case Management	December 2025 – January 2026	34	138	307	138	445	68.99%
WIOA Youth	Case Management	September-November 2025	16	42	211	42	253	83.40%
WIOA Adult DW	Case Management	September-October 2025	18	21	281	21	302	93.05%
RESEA	Case Management	Oct-Nov 2025	23	54	206	54	260	79.23%

