

**WIA/WIOA Program Monitoring Review**

Program Year: \_\_\_\_\_

<b>Name of Sub-recipient:</b>	<b>Contract Number:</b>
<b>Name of Reviewer(S):</b>	<b>Contract Administrator:</b>
<b>Date(s) of Monitoring:</b>	<b>Target Population:</b>

**Prior Monitoring Review**

Describe any related findings or observations identified during the previous monitoring review that may be open or require follow-up.

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**Scope of Work Requirements**

Review the Scope of Work of the sub-recipient. Are they meeting their contract objectives and following contract requirements?

1.    **Finding**             **Needs improvement**             **None**             **Exemplary**

Is the sub-recipient on target to reach the expected number to be served for program year 2016/2017?  
If not, does the sub-recipient have an outreach plan in place?

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2.    **Finding**             **Needs improvement**             **None**             **Exemplary**

Is the sub-recipient serving the target population(s) identified in their Scope of Work? Are efforts being made to serve the people in population groups?

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3.  Finding       Needs improvement       None       Exemplary

Are all of the program elements outlined in the sub-recipient's scope of work being provided? Are the services adequate?

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If not, does the sub-recipient have a plan to incorporate the services into their current program model?

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4.  Finding       Needs improvement       None       Exemplary

a) Describe how the sub-recipient has incorporated the partnerships identified in their Scope of Work and Proposal.

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b) Does the participants have access to the services identified through the partnerships? Has the sub-recipient properly retained records of referrals and/or participation in these services?

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c) Describe evidence of partnerships, referrals and participation in partner services in files.

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5.  Finding       Needs improvement       None       Exemplary

Does the sub-recipient sufficiently utilize the Workforce Connections' MIS system to record required information?

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Does the sub-recipient record data timely and accurately? If not, does the sub-recipient have a plan to make improvements to ensure timely and quality data entry?

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**Program Requirements**

6.  Finding       Needs improvement       None       Exemplary

Is the sub-recipient delivering a program designed to effectively offer WIOA education, employment and training services?

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7.  Finding       Needs improvement       None       Exemplary

Which youth elements made available at the sub-recipient’s site? Is access made available to other on-site and partner services?

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8.  Finding       Needs improvement       None       Exemplary

Is the sub-recipient meeting the required work-based learning expenditure requirements listed within their contract? If not, does the sub-recipient have an improvement plan in place?

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9.  Finding       Needs improvement       None       Exemplary

a) Describe the sub-recipients staffing structure. Has the program been staffed as outlined in their scope/budget? Has the program been staffed for adequate capacity?

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b) Describe the sub-recipient's turnover rate.

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c) Describe how Subject Matter Experts are deployed in the program. Include outcomes.

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d) Describe how Job Developers have been deployed in the program. Include outcomes.

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10.  **Finding**       **Needs improvement**       **None**       **Exemplary**

Does the sub-recipient have adequate internal policies required by Workforce Connections and to support Program requirements? (Supportive Services policy required, additional as applicable)

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11.  **Finding**       **Needs improvement**       **None**       **Exemplary**

Does the sub-recipient maintain a log of complaints filed? Have WC reporting procedures been followed?

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12.  **Finding**       **Needs improvement**       **None**       **Exemplary**

Is there any evidence of violation of nepotism policies?

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