

# Division of Public Assistance

Program Integrity and Analysis

## WORK SERVICES CONTINUOUS IMPROVEMENT MONITORING



A  
GUIDE  
for  
MONITORING

SERVICE PROVIDER PERFORMANCE

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# CONTINUOUS IMPROVEMENT MONITORING

## The Service Provider Performance Monitoring Guide

### INTRODUCTION

#### Purpose

The purpose of Continuous Improvement Monitoring is to promote program performance and service delivery improvements that better assist Alaska's Temporary Assistance clients to become economically independent.

The Division of Public Assistance is responsible for monitoring grants, contracts and service agreements to ensure compliance with agreed-upon requirements. This Guide provides DPA administrators with direction and tools for their use when monitoring service providers' programs. Monitoring is an on-going process. It encompasses monthly statistical reports on performance measures, on-site reviews of service delivery, and monthly analysis of supportive service spending.

Continuous Improvement Monitoring uses the findings from statistical reports and program reviews as the basis for increasing the effectiveness of services.

#### Goals:

1. DPA Performance Measures are achieved or exceeded.
2. Service providers fully adhere to DPA Work Services Principles in delivering services to clients.
3. Required data is reported timely and accurately.
4. Supportive services expenditures are appropriate and cost-effective.
5. No family is "left behind". All families make progress toward self-sufficiency.

DPA works in close partnership with service providers to improve services. Review findings identify program strengths as well as areas for improvement. Review recommendations applaud program successes, encourage solutions to service issues and promote increased collaboration between DPA and service providers.

## Grants, Contracts and Service Agreements

DPA utilizes grants, contracts and service agreements to deliver work services to Temporary Assistance participants throughout the state. DPA work services grants, contracts and service agreements are intended to help parents find jobs, keep their jobs, get better jobs and build a better life for their families. Individuals receiving Temporary Assistance cash benefits are expected to work with a service provider and if capable participate in work services activities. Participation includes working, actively looking for a job, preparing for work and other activities designed to assist the family in achieving the highest level of self-sufficiency possible. It is the responsibility of the service provider to design and deliver services that support the DPA Mission, comply with the Work Services Principles, and achieve identified Performance Outcome Measures.

## Supportive Services

Supportive Service funds are allocated to the service provider for the direct support of employment for clients. Supportive Service funds are used primarily by case managers to purchase services that help individual clients prepare for a job, find and retain a job, obtain a better job, or complete an approved activity. Service providers are expected to closely track supportive services expenditures to ensure they are used appropriately and do not exceed allocations.

Monthly Supportive Services Expenditure Billing Report with an original signature of the service provider's authorized representative is due to the DHSS Grants and Contracts Team no later than the 20<sup>th</sup> day of the month following the report month. The Supportive Services Expenditure Billing Detail Report must be attached to the Monthly Supportive Services Expenditure Billing Report. Both reports are sent to:

Grants Administrator  
DHSS Grants and Contracts Team  
P.O. Box 110650  
Juneau, AK 99811-0650

An additional copy of the Supportive Services Expenditure Billing Detail Report must be submitted in an electronic format to: [DHSSContracts@alaska.gov](mailto:DHSSContracts@alaska.gov)

## Monitoring is an On-going Process

Monitoring performance and services to clients is an on-going process. Just as clients turn to service providers daily for assistance, DPA and service providers continually strive to ensure each client receives the best possible service. This requires constant monitoring through quality assurance case file reviews, responding to feedback from clients, regularly examining statistical reports and closely tracking expenditures. On-going monitoring provides the opportunity to identify trends, determine corrective action activities, and determine which processes are producing desired outcomes. Effective monitoring is not just an annual event, but is an on-going responsibility of DPA and service providers.

Performance Measures Reports	Monthly
Narrative Reports	Monthly
Quarterly Continuous Improvement Action Plans	Quarterly
On-Site Review	Annually (minimum)
Supportive Services Expenditures	Monthly

## Self Assessments

Service providers are encouraged to conduct internal reviews of services. DPA provides all service providers with a copy of the Work Services Continuous Improvement Monitoring Guide for their use in conducting self-assessments. Technical assistance is available from DPA on the use of the guide, understanding various reports and in answering program questions. DPA wants service providers to be as successful as possible in serving clients.

# MONITORING TOOLS

## Background

DPA monitors performance to ensure the effective delivery of services and to promote improvement in the quality of services provided to Temporary Assistance clients. The monitoring tools are designed to examine the achievement of performance measures, adherence to DPA Work Services Principles, compliance with service agreement requirements and appropriateness of expenditures. Monitoring includes the following components:

1. Monthly Performance Measures Reports
2. Monthly Universal Participation Statistics Report
3. Monthly Narrative Report
4. Quarterly Continuous Improvement Action Plans
5. Service Provider Assurances
6. Client Case File Reviews
7. Client Interviews
8. Service Provider Staff Interviews
9. DPA Manager Interviews
10. DPA Staff Interviews
11. Supportive Services Reviews

This Guide provides information for using each of the components of the monitoring process.

# 1. MONTHLY PERFORMANCE MEASURES REPORTS

## Performance Measures

DPA has set numerical goals to gauge the effectiveness of service delivery for Temporary Assistance clients each fiscal year. These goals are based on the outcomes DPA wants clients to achieve as a result of the efforts of services providers - **"clients leaving Temporary Assistance with earnings and not returning"**. As numerical indicators of reaching this goal, DPA selected the following Performance Measures:

1. Percent of clients who obtain employment within 60 days.
2. Percent of cases with earnings.
3. Percent of employed clients who retain employment four months.
4. Percent of employed clients with earnings progression.
5. Percent of cases closed with earnings.
6. Percent of cases closed with earnings that do not return to TA within six months.
7. Percent of cases meeting the Overall Participation Rate.
8. Percent of two-parent cases meeting the Two-Parent (2P) Participation Rate

## Performance standards

For each of the performance measures, DPA sets a statistical level of performance that service providers (and DPA offices) are expected to meet for each fiscal year. This standard is derived from the performance achieved by the office/agency in the prior fiscal year and the unemployment rate for the area served by the provider.

## Monthly Performance Report

Each month DPA generates statistical reports for each Work Services office. These reports display each performance measure, the performance standard, and the actual performance achieved by that office. Reports are available for the office or agency, the DPA region and the state so program managers can analyze their performance and compare it to other offices. Reports are available on the DPA website at:

<http://soar.hss.state.ak.us/performance>

The monthly performance report allows both DPA and service provider managers to spot successes and potential challenges early on. DPA examines the reports each month to track trends and react as needed to address potential problems. One month is generally too short a time period to reveal actual trends, but the report provides a flag if there is a wide difference between the performance standard and actual performance. If actual performance shows a wide variation from the standard, DPA contacts the service provider to determine the reason for the difference. Differences can be caused by a number of reasons - such as data entry problems, etc., and should be investigated to identify successful techniques, or potential reporting and service delivery problems.

## 2. MONTHLY UNIVERSAL PARTICIPATION STATISTICS REPORT

Each month DPA generates a Universal Participation Statistics Report (UPS) containing each Work Service's Office data. An expanded UPS report is also available with information for the entire state, each region, unit and caseload. Reports are available on the DPA website at: <http://soar.hss.state.ak.us/performance>

Although the UPS does not focus on individual participants or a Work Services Office's performance outcomes, it represents each client at his or her highest level of self-sufficiency, based on case managers' reported activities. The UPS report, in concert with the Weekly/Monthly Work Services Caseload Reports, and the Work Services Monthly Performance Reports can be a useful tool for program managers and supervisors in ensuring all clients are engaged in activities and are not left unassigned. The UPS focuses on the 'process' of ensuring each individual is engaged in an activity rather than whether or not the individual has achieved a specific milestone or performance outcome.

A sample copy of a Monthly Universal Participation Statistics Report, including the UPS Data Dictionary is found in the Attachment Section of this Guide.

### 3. MONTHLY NARRATIVE REPORT

#### Purpose

The Monthly Narrative Report gives service providers a formal method for updating DPA on changing conditions within their service area. This report includes an in-depth description of activities, problems and important events. The report provides the story behind the performance measures data and gives DPA a better understanding of any circumstances affecting the delivery of services.

Service providers must provide this report to DPA in either hard copy or electronic form. The report is due the 5<sup>th</sup> of the month for the previous month. Narrative reports are submitted in an electronic format to the DHSS Grants and Contracts Team: [DHSSContracts@alaska.gov](mailto:DHSSContracts@alaska.gov) An additional printed copy of the narrative must be attached and submitted with the monthly contract billing.

A copy of the Monthly Narrative Report form is found in the Attachment Section of this Guide.

## 4. QUARTERLY CONTINUOUS IMPROVEMENT ACTION PLAN

At the end of each quarter, all service providers prepare and submit a written report that details their accomplishments in achieving their performance standards during the preceding quarter. There are four parts to the report:

1. **Performance Measures.** The service provider enters the performance standard and the actual performance data for each performance measure and notes which standards were exceeded and which were not met. This section also shows the performance improvement since the last quarter (It is important to recognize improvement even if the standard was not met).
2. **Performance Issues.** The service provider describes any factors that affected performance during the past quarter. This could be external (example: an important employer reducing their workforce) or internal (staff turnover)
3. **Performance Improvement Plan.** Based on actual performance and the related factors affecting outcomes, the service provider details their plans for building on the successes of the last quarter or making improvements to address areas that fell below standards.
4. **Successes and Best Practices.** Service providers across the state have developed successful techniques and procedures. In order to take advantage of those innovations, service providers are encouraged to describe their successes, including any special target population, successful technique or practice, and the outcomes from the innovations.

Quarterly Continuous Improvement Action Plans are submitted in an electronic format to the DHSS Grants and Contracts Team: [DHSSContracts@alaska.gov](mailto:DHSSContracts@alaska.gov) and are due by the end of the month following the last month of the quarter. (October 31, January 31, April 30 and July 31).

DPA reviews the Action Plan to decide if the activities planned for the next quarter will adequately address all issues. DPA either approves the Plan or asks for additional information as needed. DPA forwards a copy of the approved Plan to the Contracted Services Quality Assurance Section and the Work Services Unit. It is critical that DPA follow-up with the service provider during the plan quarter to ensure that the actions described in the Plan are being followed and services to clients are improving as expected.

See the Attachment Section for a copy of the Quarterly Continuous Improvement Action Plan and "Instructions for Service Providers" for completing the Plan.

## 5. ASSURANCES

The following information is to be maintained on file by the service provider and submitted to DPA upon request:

### **Legal**

- Alaska Business License

### **Administrative**

- Agency Administrative Policies and Procedures Manual
- Organizational Chart

### **Personnel**

- Staff Roster
- Job Descriptions
- Confidentiality policies and completed DPA confidentiality forms

### **Financial**

- Current financial reports
- Billing procedures
- Financial reporting procedures
- Policy for authorizing supportive services
- Procedures for tracking supportive services expenditures

### **Collaboration**

- List of partner agencies
- Copies of Memoranda of Agreements

### **Client Services**

- Grievance/Complaint Procedures.
- Description of days/hours of service to public
- Copy of client screening/assessment instruments
- Procedures for serving clients with limited English proficiency

### **Resources**

- Procedural manual
- Staff resumes
- Description of staff training
- Description of quality assurance program, including supervisory case reviews
- List of computer equipment to operate DPA Case Management System
- Description of participant resources, including word processing, printing, photocopying equipment and phones available for client use
- Inventory of equipment purchased with DPA grant funds

The DPA Review Team may request assurances items to review before the on-site review. This can save time spent on-site looking at routine items while allowing the team to ensure the required items are in place.

## 6. CLIENT CASE FILE REVIEW

### Purpose

Client case files are reviewed to determine whether the service provider is adhering to the DPA Work Services Principles in delivering services to DPA clients; the services provided were effective for that client; and, any areas for improvement are identified and included in continuous planning activities.

### 1. Reviewing for Principles

#### a. Purpose

The case file review compares the actions and services provided to the DPA Work Services Principles. Were services timely, strength-based, and aimed at employment with a high level of expectation for clients and staff? (See "**Monitoring for Principles**" in the Attachment Section for a complete list of the DPA Work Services Principles).

#### b. Procedures

The Review Team Leader requests a random sample of case files (See the On-site Review Section for instructions on selecting a random sample of case files). The Review Team Leader asks the service provider to forward the selected case files to DPA for review before the on-site visit. Review team members review each file using the Client Case File Review Form. The review examines the file for evidence that demonstrates adherence to the DPA Principles, including: whether the client was engaged promptly, the Family Self-Sufficiency Plan was appropriate and current, services matched the client's situation and goals, supportive services were appropriate and actions were well documented. Case file review instructions are included to assist team members in completing reviews.

The case file must present a clear and complete picture of the client's situation and activities. Documentation must be complete and consistent throughout the FSSP, the case notes and work activity reports. Supportive service expenditures must be explained and consistent with the FSSP and work activities.

The review does not focus on the processes the service provider has selected to achieve the performance standards set by DPA. Service providers have been given great flexibility to design the processes and techniques they use to achieve their performance goals. The Monthly Performance Measures Report and the Quarterly Continuous Improvement Plan indicate how effective the processes and techniques have been and address any issues with service delivery design.

## 2. Data Review

The Data Review section is an audit of the data entered and reported by the service provider. It is designed to validate the service provider's reporting process by verifying the accuracy of information reported on sample cases.

### a. Purpose

The purpose of the Data Review is to ensure that the:

1. reported client work/self-sufficiency activities are fully documented;
2. reported data is accurate and complete;
3. caseload management procedures promote current and correct caseload information; and
4. use of supportive services and childcare are linked to assigned activities.

### b. Service Provider Reporting Procedures

It is the responsibility of the service provider to establish sound procedures, which ensure the information reported to DPA is complete and accurate. Service providers are evaluated based on their achievement of the Performance Measures. These, in turn, are calculated using the information reported by case managers. Work activities reported for clients must be documented in the client's case file (client notes) to authenticate the accuracy of the subsequent performance measures reports.

It is critical that the service provider implement effective caseload management practices so that case managers know who their clients are and what their status is. To receive full credit toward the Performance Measures, case and program managers are encouraged to review their Work Services Caseload Reports each week to ensure that clients are correctly assigned to their office and that the data entered into the Case Management System is correct and reflects the activity participation reported by clients assigned to their program. The Work Services Caseload report is available online at: <https://documents.state.ak.us:8443/ddrint/servlet/ddrint>

Case managers approve the expenditure of public money when they authorize supportive services. Service providers are responsible for having procedures in place to ensure that the use of these funds follows DPA policies and is well documented. Likewise, requests for childcare must be documented and tied to assigned activities.

### c. Data Review Procedures

As part of the case file review, the Review Team examines the following:

#### (1). Work/Self-sufficiency activities

- Are the assigned activities reported in the Case Management System (CMS) Work Activity screen or Calendar Monthly Activity Report (CMAR), and documented in the client notes?
- Do the activities correspond to the FSSP?

#### (2). Use of Work Services Caseload Report

- Review the Work Services Caseload Report prior to the visit to spot potential reporting problems.
- Does the case manager routinely use the caseload report to reconcile client status and assigned activities?

(3). Supportive services expenditures

- Is the supportive service authorization linked to an assigned activity? (Compare Supportive Service Report to CMS Work Activity screen).
- Is the supportive service decision documented in the client notes?
- Have the client's personal resources and community resources been reviewed for availability prior approving supportive service funds?
- Do the supportive service expenditures exceed categorical monetary limits?

(4). Childcare requests

- Is the use of childcare linked to an assigned activity?
- In a two-parent household are both parents participating in activities during the time the child care is provided?
- In a two-parent household do the parents participation average a minimum of 55 hours per week?

## Case File Review Summary

### Purpose

The Review Team conducts case file reviews as a part of the review. This feedback is used to:

1. Ensure contractual compliance.
2. Ensure accurate and complete reporting.
3. Ensure adequate documentation.
4. Ensure services are effective for the individual client.
5. Identify best practices/areas for continuous improvement.
6. Identify areas for technical assistance.

After completing the examination of the case files, the Review Team meets to compare findings and identify any trends. Based on the combined findings, the Team describes any service issues and recognizes outstanding practices for the Review Summary. In the Continuous Improvement approach, the Team also recommends ways to improve services and address specific service issues. After trends are identified the Review Team may choose to ask additional questions of the participant, service provider staff, or DPA staff during interviews to clarify any questions arising during the case file review.

A copy of the Client Case File Review Form and an instructional guide to completing a case file review are included in the Attachment Section.

## 7. PARTICIPANT INTERVIEWS

### Purpose

The Review Team conducts interviews with clients as part of the review. This feedback is used to:

1. Ensure contractual compliance.
2. Identify Best Practices/Areas for Continuous Improvement.
3. Measure customer satisfaction.
4. Ensure the accuracy of case file documentation.

### Procedure

Interviews are conducted with clients whose case files were selected in the random client case file selection. Participant interviews are normally completed prior to the on-site visit by the Review Team and are primarily completed over the telephone. Review Team members also complete client interviews with other participants during the on-site visit if at all possible.

Whenever possible, the Review Team studies the client's information in *CMS* and in the client's hard copy case file prior to the interview.

### Summary

After completing all the client interviews, the Team meets to identify any issues and successful practices. Findings are included in the Review Summary along with recommendations for improvements.

A sample of a structured Participant Interview Form is provided in the Attachment Section.

## 8. SERVICE PROVIDER STAFF INTERVIEWS

### Purpose

The Review Team completes in-person interviews with service provider staff during the on-site visit. The feedback received is used to:

1. Ensure contractual compliance.
2. Identify best practices and areas for continuous improvement
3. Identify areas for technical assistance.

### Procedure

Interviews are completed with case managers, direct client support and financial support staff. The Review Team Leader coordinates interview scheduling with the service provider Program Manager when developing an agenda prior to the on-site review.

### Summary

After service provider staff interviews are completed the Review Team meets to note any issues negatively affecting outcomes or client services; to identify best practices; and identify areas requiring additional collaboration with local DPA offices.

A sample set of questions that may be asked of the service provider's staff is included in this guide. Questions may be modified to target specific areas noted by the Review Team during case file reviews or client interviews.

## 9. DPA OFFICE MANAGER INTERVIEWS

The Review Team completes interviews with DPA office and regional managers who collaborate with the service provider. Whenever possible the Review Team conducts these interviews in-person during the on-site review.

### Purpose

1. Verify appropriate service coordination efforts.
2. Identify areas for continuous improvement and best practices.
3. Identify areas for technical assistance.

### Procedure

Interviews are completed with the DPA office and/or regional manager working and collaborating with the service provider. The Review Team Leader will coordinate interview scheduling with the DPA office manager while developing the review agenda prior to the on-site review visit.

### Summary

After the DPA manager interviews are completed, the Review Team meets to note any issues negatively affecting outcomes or client services; to identify best practices; and identify areas requiring additional collaboration with DPA.

A sample set of questions that may be asked of DPA managers is included in this guide. Questions may be modified to target specific areas noted by the Review Team during service provider staff interviews, client interviews or case file reviews.

# 10. DPA STAFF INTERVIEWS

The Review Team completes interviews with DPA staff assigned to work with the service provider. Whenever possible the Review Team conducts these interviews in-person during the on-site review.

## Purpose

1. Verify appropriate service coordination efforts.
2. Identify areas for continuous improvement and best practices.
3. Identify areas for technical assistance.

## Procedure

Interviews are completed with the DPA office staff members working and collaborating with the service provider. The Review Team Leader coordinates interview scheduling with the DPA office manager while developing the review agenda prior to the on-site review visit.

## Summary

After DPA staff interviews are completed the Review Team meets to note any issues negatively affecting outcomes or client services; identify best practices; and areas requiring additional collaboration with DPA.

A sample set of questions that may be asked of DPA staff is included in this guide. Questions may be modified to target specific areas noted by the Review Team during case file reviews or client interviews.

# 11.SUPPORTIVE SERVICES

## Purpose

Because Supportive Service funds are limited, it is especially important that they are used in the most cost effective manner possible. DPA monitors these expenditures to meet its fiscal responsibilities for managing the use of public funds and to ensure expenditures do not exceed allocations.

## Procedure

Two methods are used to monitor the use of Supportive Services - reviewing the monthly Supportive Services Expenditure Billing Detail Report and examining supportive service authorizations during the On-Site Review.

### 1. Monthly Supportive Services Expenditures Billing Report and the Monthly Supportive Services Expenditure Billing Detail Report

Each month, service providers that do not use the JAS system must submit the supportive services billing reports to the DHSS Grants and Contracts Team for reimbursement. An additional copy of the Monthly Supportive Services Expenditure Billing Detail Report is submitted electronically in the Excel format provided by DPA.

DPA reviews the billing to determine if the expenditures are appropriate and within the service provider's allocation. DPA may check electronic case files or request more information if an expenditure appears questionable.

Once approved, a copy of the Excel billing report is forwarded to the DPA Program Integrity and Analysis Section, which, produces management reports. These are distributed to the Work Services Policy Unit. The reports include:

- Supportive Service expenditures by Work Services office by category. This is a summary of expenditures by category that shows the total spending for the month and year-to-date and compares expenditures to the allocation.
- Supportive Service expenditures by region by category. The Work Services office reports are grouped by region.
- Supportive Service expenditures statewide by category.

DPA and service providers can use these reports to track the following items:

- Supportive Service expenditures by category and total for the month and year-to-date allows the manager to compare expenditures to the allocation and identify trends in spending by category.
- Supportive Service expenditures by region and statewide by category. Program managers can use this report to compare their patterns of expenditures to other offices in their region.

- Supportive Service expenditures by client (by category, by date). This report allows program managers to review the expenditures (each item and total) for any individual client. Managers can detect any unusually high level of spending and do any follow-up case file review to determine reasons for the spending.

**Note:** Service providers can use the data provided to DPA on the Excel spreadsheet to design and produce their own internal reports by individual case manager for supervisory purposes.

DPA reviews the reports monthly to track each service provider's expenditures against their allocation to detect the potential for spending exceeding allocations. If spending is significantly ahead of the budget (example: Spent 80% of the allocation in four months), DPA contacts the service provider to discuss their plan for remaining within their allocation.

DPA examines the Supportive Services Expenditure Billing Detail Reports each month to ensure individual expenditures do not appear excessive or inappropriate. Several issues may trigger further review of supportive services billed for an individual client; e.g., if total spending or spending on one item is unusually high, or repeated spending for a typically one-time item is identified, DPA reviews the case file and discusses the case with the service provider as needed.

## 2. Case file/On-site review

As part of the case file review, the Review Team examines the authorization of supportive services to determine if they are being used appropriately, i.e. to help the family achieve their self-sufficiency goals as described on the FSSP. The justification for the authorization should be supported by the FSSP and notes in the case file that relate to an appropriate activity. A review team member is also assigned to meet with the service provider's financial operations personnel to review the process the service provider utilizes to track individual expenditures and to bill DPA for reimbursement.

# CONDUCTING THE ON-SITE REVIEW

## Purpose

The DPA Program Integrity and Analysis, Contracted Services Quality Assurance Section conducts on-site reviews for grantees and contractors. Most reviews are conducted annually, but may be scheduled more often as needed.

On-site reviews are conducted to confirm that service providers are adhering to the DPA Work Services Principles, reports are complete and accurate, and the expenditures of supportive service funds are appropriate. The on-site review is conducted at the service provider's office so the Review Team can meet with service provider staff, examine facilities, and conduct client interviews in person.

The Review Team collects feedback from clients and audits the reported services and supportive service authorizations to determine whether they support the accuracy of the information reported by the service provider. Working on-site allows the DPA reviewers to gain insight into the conditions and environment in which the service provider operates.

The on-site review by the Review Team is intended to be beneficial to DPA and the service provider. The review determines whether the service provider is serving Temporary Assistance clients in compliance with their agreement with DPA, and to set the foundation for improving the level of service.

The review also is designed as an opportunity to give technical assistance to the service provider and to collect best practices that can be shared with others.

## Review Team

The DPA Review Team includes members of the Program Integrity and Analysis Section, Work Services Policy Team, Field Services Section and other staff selected for the review. Each staff member selected brings both policy and operational expertise to the team. As much as possible, staff from other DPA regions participates in the reviews to add a new perspective and gain insight into different service providers' operations.

## Schedule

On-site reviews are scheduled with both the service provider and DPA regional/office managers to make best use of all staff time and permit the most effective observation of service delivery. The schedule is confirmed in writing to the service provider and team members.

## Advance preparation.

The Team does the following preparations before the start of the on-site review:

1. Assurances: The Review Team Leader gives the service provider a list identifying which Assurance items or documents to send to DPA for review and which ones are to be examined on-site. Sending items in advance allows DPA to review them before arriving and not expend valuable review time going over routine documents.
2. Client file random sample selection: Prior to the site visit, the Team Leader requests a random sample selection of service provider case files for the case review and client interview from the DPA Program Integrity and Analysis Section. The random sample consist of 10 percent of the monthly caseload of clients served by the provider during the fiscal year or a minimum of 10 and a maximum of 50 files depending on the number of clients served. The use of the random sample is to ensure objectivity in the client selection. DPA may vary the number of cases reviewed based on resources or the desire for additional information.
3. Client case file reviews: The Team Leader requests the service provider forward selected files to DPA for review prior to the on-site visit. Files are returned to the service provider before the on-site review begins. Copies of completed case file reviews are made available to the service provider during the on-site review.
4. Client interviews: The Review Team attempts to interview all clients whose files were reviewed by the team. Additional client interviews are completed on-site by review team members whenever possible.
5. Agenda: The Team Leader works with the Program Manager to develop an agenda for the review, which will allows team members to complete necessary activities while minimizing the impact on service provider staff.
6. No family left behind: In addition to the regular random sample, a random sample of long-term clients may also be generated. This review uses the standard review forms and procedures, and is included so the Review Team can evaluate the level of services to long-term Temporary Assistance families.

The request for a random sample is made at least two weeks before files are to be requested from the service provider. Requests are forwarded to the Program Integrity and Analysis Section, Research Analysis Team. The following information is needed to prepare the random client sample:

- Grant/Contractor Name: \_\_\_\_\_
- Work Services Office Code; \_\_\_\_\_
- Period: Month/Year to Month/ Year: \_\_\_\_\_

7. Performance Measures Report: The Review Team examines the service provider's Monthly Performance Reports prior to the on-site review to become familiar with their statistical performance and able to discuss reasons for successes or areas of improvement.
8. Quarterly Continuous Improvement Action Plans: All quarterly plans submitted to date are reviewed so the status and results can be incorporated into the final recommendations.

9. Work Service Caseload Report: The most recent caseload report provides important information on the services to clients and the caseload management practices of the service provider. The Review Team Leader should read the report prior to the actual on-site review.

## On-site Activities

Once on-site, the Review Team holds an initial discussion with the service provider program manager and, if appropriate, other service provider staff members to help everyone understand the Continuous Improvement focus of the review. The site visit process laid out includes an explanation of the entrance interview, use of the Review Guide, Staff and Participant Interviews and the exit interview process.

## Entrance Interview

The purpose of the entrance interview is to make introductions of personnel and discuss review procedures. The review should be conducted in a positive atmosphere with an open exchange between the Team and the service provider. The service provider should have an opportunity for questions and clarifications about the purpose and focus of the review process. The service provider's program manager is an active participant in the process and should either be personally available and/or have staff available to discuss services, work flow and supportive service processes, as well as answer questions and provide clarifying information to the Team during the review.

## Components of the On-site Review

Components of the on-site review include:

- A. Assurances
- B. Client Services
- C. Data Reporting
- D. Observation of Staff and Facilities

### A. Assurances

#### 1. Program Administration

The Assurances Section provides a list of required items to guide the Team's observations, discussions with service provider staff, and their review of other material made available by the service provider. Assurances focus on the program's facilities, resources, policies, procedures, and staff training.

The Team considers the following general questions as they observe service delivery and review management files and other written records: Does the administration of the program promote effective and appropriate services to clients? Are the clients treated with respect in a positive atmosphere? Are the service provider's employees appropriately trained to provide the services described in the provider's agreement? Is the required quality assurance/supervisory case file review process in place?

## 2. Financial Management

This portion of the review focuses on the service provider's records and financial management. The intent is to determine that the service provider is maintaining required records and files related to the administration and financial management of the grant or contract.

The Team reviews the service provider's on-site files to verify that appropriate DPA communications are available, (i.e. letters on reporting procedures, financial reports, grant/contract guides, and back-up documents). In addition, the Team talks to administrative staff to obtain an overview of the accounting system, as well as review and discuss with the responsible employee the processing procedures for completing the financial reports and paying bills. If there are issues regarding reporting requirements or billings, these should be discussed and solutions to problems investigated.

## 3. Collaboration with Partner Agencies

Temporary Assistance clients are often involved with a number of public and private service agencies. In order to provide an appropriate array of services to clients, DPA and its service providers collaborate and link with other local agencies that deal with issues such as substance abuse treatment, domestic violence, mental health, medical treatment facilities, housing, child care, and transportation in addition to employers.

Communication with other community resources agencies to facilitate client referrals and ensure working toward common goals is part of the case manager's role as a client advocate. Communication may be either formal or informal. If formal, there should be some evidence of written agreements or other arrangements. In informal situations, conversations with caseworkers should reveal knowledge of other local agencies and services for their clients. The Team might also consider direct contacts with other agencies to ask about their collaboration with the service provider.

## B. Client Services

This section of the review focuses on the client. The Review Team begins the client services review before the on-site visit by examining client files, and conducting structured client interviews as part of the evaluation of program services. Additional client interviews are completed during the on-site visit. The Client Services section in the Review Guide is divided into two sections:

**1. The Client Case File Review** provides the outline to be used during the review of the client case files. The random sample client file list generated by DPA before the program review is used to pull the files to be reviewed prior to the on-site visit. The service provider provides the team with the requested files by the date indicated by the Review Team Leader. The Review Team examines a minimum of ten files. If during the course of the case file review it appears additional information is required, the Review Team can select a directed sample of additional client cases from the provider files to further explore an identified issue or trend. The Case File Review Instruction Guideline provides team members basic review strategies.

**2. The Participant Interview** form is used by the Review Team to verify the usefulness of services provided and gauge customer satisfaction. A copy of sample questions, which may be asked during the review, is attached. The Review Team may modify some questions or include additional questions after the results of case file review findings are discussed. Interviews with program participants are a key element in the service provider review and evaluation. The participant interview list consists of those clients whose case files were identified in the random sample selection. Prior to the on-site visit, the Review Team attempts to complete interviews with program participants. As with the case files, a minimum of ten client interviews is completed. The Review Team interviews participants who are available on-site during the review visit. If more information is necessary, the Review Team can select an additional sample of clients to interview to further explore an identified issue or trend.

The participant interview is designed to elicit consistent information from each participant on the quality of the services provided to him or her. Questions focus on the services provided, the resources received, and the general satisfaction with the level of services. Also included is an opportunity for the client to make suggestions and other comments regarding program services. Information from these interviews should be included in the final review report prepared by the Review Team.

## C. Data Review

The Data Review section of the case file review addresses the accuracy of the data reported. This is evaluated initially by reviewing the Work Services Caseload Report, which lists the clients being served by the service provider according to DPA records. This list should be compared to the service provider records to reconcile caseloads and ensure no family has fallen between the cracks. The caseload report also provides information on the services being provided and can trigger further questions regarding reporting and caseload management.

Reporting accuracy is also checked during individual case file reviews. This part of the file review examines the consistency between case notes and activity reports. Supportive service expenditures are compared to reported activities and documentation in the case files.

## D. Observation of Facilities and Staff Interview

This section of the review focuses on the facility, atmosphere and staff's approach toward their clients. This is an opportunity for the Review Team to record their overall findings of the program's service delivery and general philosophy.

The Team should observe first hand the classrooms, resource areas, etc. Staff interviews collect information on program delivery, and the one-on-one interaction between service provider staff, case managers, clients and DPA. These observations determine if the atmosphere of the program promotes a positive approach to work and self-sufficiency.

### Exit Interview

At the conclusion of the on-site visit, the Review Team meets with the Program Manager and other service provider management staff to conduct an exit interview. The Team Leader provides the agency with general impressions of the program, notes outstanding practices and begins the discussion of areas identified for improvement. The service provider and the Review Team should have an open exchange. The service provider is given an opportunity to comment on the review process and findings. These comments should be noted in the Service Provider Review Summary.

The Review Team also then meets with case managers and support staff associated with the providers work services program. The Team Leader reviews the performance measures and the provider's overall performance in comparison to the contracted outcomes. Team members and direct service staff have the opportunity to discuss best practices and share continuous improvement suggestions.

## SERVICE PROVIDER ON-SITE REVIEW SUMMARY

The Review Summary provides an open-ended outline for the Review Team to use to summarize the program review. The Summary is divided into two sections:

- Findings
- Action Plan
  - Contractual/Mandatory Action Items
  - Recommended Action Items
  - Best Practices

### **FINDINGS**

The Findings section of the Summary is used to note outstanding practices and identify opportunities for improvement. This information is verbally presented to the service provider at the exit interview. The Review Team meets prior to the exit interview to discuss their overall impressions and determine what information to include in the verbal review summary. The Findings section includes:

1. Performance Measures
2. Required Reports
3. Assurances
4. Documentation and Data Reporting
5. Supportive Services Review

### **FINAL REPORT**

A final written report is given to the service provider within 30 days of the conclusion of the on-site review. The report describes the findings; highlights noteworthy practices; details further action the service provider needs to take; and includes a timeline for completion. The Report may include responses from the service provider made during the exit interview and any assistance DPA has agreed to provide. The report should not contain new findings or continuous improvement actions that were not discussed previously with the service provider. The report includes mandatory items requiring action by the service provider in order to comply with the terms of the agreement with DPA. The Review Team also makes recommendations for the service provider's consideration when developing a continuous improvement plan. These items identify steps, which should increase the provider's overall performance. Best practices are also identified to encourage the provider to continue actions that produce desired results.

## **SERVICE PROVIDER REVIEW RESPONSE**

The service provider will provide a written response to the Final Report to DPA within 30 days of receipt of the Final Report. All items noted by the Review Team requiring action to comply with the terms of the grant/contact must be addressed in the service provider's response. The response must provide specific actions and the related timelines to correct deficiencies.

## ATTACHMENTS

1. DPA Work Services Performance Measures
2. Federally Mandated Minimum Monthly Work Requirements
3. Work Services Performance Measures Glossary
4. Universal Participation Statistics Report Data Dictionary
5. Monthly Narrative Report
6. Quarterly Continuous Improvement Action Plan
7. Instructions for service providers for completing the "Quarterly Continuous Improvement Action Plan"
8. Assurances
9. "Monitoring for Principles"
10. Client Case File Review Worksheet
11. Client Case File Review Worksheet Instructions
12. Participant Interview Form
13. DPA Staff Interview Form
14. DPA Manager Interview Form
15. Service Provider Review Summary

**Division of Public Assistance  
Work Services Performance Measures**

**1. Obtain employment within 60 days**

Possible: Number of adults who were unemployed when they applied.

Met: Number of adults who became employed within 60 days of their application date.

**2. Adults with earnings**

Possible: Number of Temporary Assistance adults.

Met: Number of adults with earnings.

**3. Retain employment 4 months**

Possible: Number of employed adults in the report month.

Met: Number of adults who had > 20 hours of employment in the report month and in the 3 immediately previous months.

**4. Earnings progression**

Possible: Number of adults with earnings in last month.

Met: Number of adults that had more total earnings in this month than in last month.

**5. Cases that close with earnings**

Possible: Cases that include an adult that closed.

Met: Cases that include an adult that closed with earnings in their last benefit month.

**6. Cases that don't return**

Possible: Number of cases that closed with earnings 6 months ago.

Met: Number of cases that closed with earnings 6 months ago not in the current caseload.

**7. Overall Participation**

Possible: All families that received Temporary Assistance in the month except:

- Child Only Cases,
- Single parent families with the child under 1 year old exemption,
- Families penalized in the month, but not more than 3 months in the last 12.

Met: All possible families that meet the All Families minimum work requirements.

**8. Two-Parent Participation**

Possible: All two-parent families that received Temporary Assistance in the month except:

- Two-parent families where one adult is disabled (Incap cases),
- Two-parent families penalized in the month, but not more than 3 months in the last 12.

Met: All possible families that meet the Two-Parent Families minimum work requirements.

**Division of Public Assistance  
Federally Mandated Minimum Monthly Work Requirements**

**All Families minimum monthly work requirements:**

A family with at least one adult participating in an average of 30 hours per week for the month in the federal countable activities (codes):

1. Unsubsidized Employment (WK, SE, SW, PS)
2. Subsidized Employment (WS)
3. Work Experience (CW, C7)
4. On-the-job Training (OJ)
5. Job Search and Job Readiness Assistance (J1, J3, VC, X1)
6. Community Service Programs (C1, C2)
7. Vocational Educational Training (E7, F3, I1, I3, P1, P3)

**Situations where families may be deemed meeting the minimum work requirement:**

- A single parent, or caretaker relative, with a child under 6 years old that are engaged in work activities 1-6 for an average of 20 hours per week.
- Any adult under 20 years old that maintains satisfactory attendance at a secondary school or the equivalent during the month (E5, HS).

**Limitations in counting activities toward the minimum requirements:**

- Satisfactory School Attendance or GED completion for adults age 20+ with no high school diploma (E6) may be counted for up to 10 of the average 30 hours per week - the other 20 hours must be in federal activities 1-6.
- Vocational Educational Training may only count for 12 months total for any individual.
- Job Search and Job Readiness may only count for six weeks in a federal fiscal year. Only four of the six weeks may be consecutive.

**Two-Parent Families minimum monthly work requirements:**

A two-parent family with one parent, or the combined total of both parents, participating for an average of 35 hours per week in the federal countable activities (codes):

**Additional participation for two-parent families that receive child care.**

- If a two-parent family receives child care, the combined total of both parents' participation in countable work activities increases to an average of 55 hours per week.

**Situations where families may be deemed meeting the minimum work requirement:**

- Any adult under 20 years old that maintains satisfactory attendance at a secondary school or the equivalent during the month (E5, HS). If both parents are under 20 and they receive child care, they both must maintain satisfactory attendance at a secondary school or equivalent.

**Limitations in counting activities toward the minimum requirements:**

- Satisfactory School Attendance or GED completion for adults age 20+ with no high school diploma (E6) may be counted for up to 5 of the average hours per week - the other hours must be in federal activities 1-6.
- Vocational Educational Training may only count for 12 months total for any individual.
- Job Search and Job Readiness may only count for six weeks in a federal fiscal year. Only four of the six weeks may be consecutive.

**Division of Public Assistance  
Work Services Performance Measures Glossary**

Open = Open Temporary Assistance case. A family that received Temporary Assistance benefits in a particular month for that particular month.

Closed = Closed Temporary Assistance case. A case that received benefits and had earnings in month 1 and did not receive benefits in month 2 is a month 2 closure.

Employment Codes:    WK - Paid Employment                      PS - Program Service Aide  
                                 SE - Self-Employment                      OJ - On-the-Job Training  
                                 SW - Seasonal Employment                      WS - Work Supplementation

Earnings = Hours of participation in any employment code multiplied by the hourly wage.

Employed = Had earnings in the month - hours of participation in any employment code multiplied by the hourly wage.

Total Earnings = Hours of participation in any employment code multiplied by hourly wage.  
-If 2 jobs = (job 1 hours X job 1 hourly wage) + (job 2 hours X job 2 hourly wage)

Became Employed = Not employed at application = activity start date in any employment code after application date.

Weighted Monthly Average = A weighted monthly average accounts for the differences in the monthly number of clients. Consider a service provider that performed better in months with more clients and less well in months with fewer. Their true performance would be better than a straight average of their monthly percentages. We need to recognize the additional effort in the high volume months by weighting each month's performance by the number of 'possibles'.

Sample calculation:

Month	Possible	Met	Percent
1	100	50	50%
2	10	1	10%

The un-weighted average would be  $(50\% + 10\%) \div 2 = 30\%$ .

A weighted average gives us  $(50 \text{ met} + 1 \text{ met}) \div (100 \text{ possibles} + 10 \text{ possibles}) = 46\%$ .

The weighted average better reflects the service provider's performance over the two months because it accounts for the better performance during the higher volume month.

## Universal Participation Statistics Report Data Dictionary

The Universal Participation Statistics (UPS) report is a monthly summary of client participation. It is based on the principle that time-limited benefits demand urgency in client services. Adhering to this principle means Work Services activities are assigned and scheduled so that clients can exit Temporary Assistance as quickly as possible. Participation in these activities is essential for families to move toward self-sufficiency. This report is designed to present a summarized view of the caseload showing clients at their highest level of self-sufficiency in order to help case managers, managers, and supervisors monitor participation and ensure that clients do not fall through the cracks.

Although universal participation is not a performance measure and the UPS is not a performance report, we hope this client participation summary makes monitoring your caseload easier.

The UPS provides summarized client activity at the regional, office, unit, and caseload levels. At each level, the report further breaks down client activity into categories and subcategories. The categories are: Work, Work Readiness, Family Support Activities, Exempt, and Not Participating. The subcategories are the specific activities in which clients participate. The report assigns clients to a single subcategory. Since individuals may participate in a combination of concurrent activities, the UPS assigns them to the subcategory that is at the highest level of self-sufficiency.

Each adult is represented only once at the subcategory, or work activity, level. For instance, a client participating in community work experience, jobs skills training, and substance abuse treatment is displayed only in the community work experience subcategory. Furthermore, exempt clients participating in substance abuse treatment are assigned only to the substance abuse treatment subcategory.

Below is a sample report and specific descriptions of the title and detail sections. The numbers in parentheses on the following pages indicate the order in which the UPS assigns a single subcategory to clients participating in concurrent activities.

### Title Section

Region: The DPA region in which the JAS Office resides.

JAS Office: Number and JAS Office label. This will be a dot (.) on the regional summary page.

JAS Unit: Unit number. This will be a dot on both the regional and office summary pages.

JAS Caseload: Caseload number. This will be a dot on the regional, office, unit summary pages.

Identify summary pages by the dot (.) in one or more of the title items.

### Examples

(Region Summary Page)		(Unit Summary Page)	
Region:	Southeast	Region:	Southeast
JAS Office:	.	JAS Office:	975 Ctr for Comm
JAS Unit:	.	JAS Unit:	5
JAS Caseload:	.	JAS Caseload:	.

  

(Office Summary Page)		(Caseload Summary Page)	
Region:	Southeast	Region:	Southeast
JAS Office:	975 Ctr for Comm	JAS Office:	975 Ctr for Comm
JAS Unit:	.	JAS Unit:	5
JAS Caseload:	.	JAS Caseload:	42

## Detail Section

**Total Adults:** Total adults that received a TA benefit in the report month for the report month.

Percent of Total Adults: The number of adults in the corresponding category or subcategory divided by the number of Total Adults.

**Total Exempt:** Total number of exempt adults who are not voluntarily participating in Work & Work Readiness or Family Support Activities.

(16) BA Exempt: Adults coded as exempt due to having a child under 12 months old.

(17) Med Unable: Adults coded as exempt due to medically unable to participate.

(18) Other Exempt: Adults coded as exempt for any reason not listed above.

(19) 3rd Trimester: Adults in a 3<sup>rd</sup> Trimester (AP) case type.

**Total Non-Exempt:** Total Adults minus Total Exempt

**Participating:** Number of adults in work, work readiness, or family support activity.

Percent of Non-Exempt: The number of adults in the corresponding category or subcategory divided by the number of Total Non-Exempt adults.

**Work:** The number of adults in work. We recognize community work experience as "work."

(1) Unsubsidized Empl: Number of adults with hours coded WK, SE, SW.

(2) Subsidized Empl: Number of adults with hours coded WS.

(3) OJT: Number of adults with hours coded OJ.

(4) Comm Work Exp: Number of adults with hours coded CW, C1, C2.

**Work Readiness:** The number of adults in work readiness activities. We split the job search subcategory to show when job search participation becomes non-countable.

(5) Job Search: Number of adults with hours coded J1, J3, X1, VC for less than 6 wks this yr.

(6) Jobs Skills Training: Number of adults with hours coded P3.

(7) High School/GED: Number of adults with hours coded HS, E5.

(8) Job Search > 6 Wks: Number of adults with hours coded J1, J3, X1, VC more than 6 weeks this year.

**Family Support Activities:** The number of adults in family support activities.

(9) Other Ed & Train Supts: Number of adults with hours coded I1, P1, E6, F3.

(10) Substance Abuse: Number of adults with hours coded B1.

(11) Mental Health: Number of adults with hours coded B5.

(12) Domestic Violence: Number of adults with hours coded B4.

(13) Medical: Number of adults with hours coded B6

(14) SSI App or Appeal: Number of adults with hours coded B7

(15) Other Support Acts: Number of adults with hours coded B3.

**Not Participating:** Number of non-exempt adults who are not participating in work activities.

(20) Penalized: Number of penalized adults.

(21) New Applicant: Number of adults who applied during the report month.

(22) New Referral: Number of adults who were referred during the report month.

(23) No Activity Reported: Number of adults who are neither exempt nor participating in work, work readiness, or family support activities.

**Sample Page**

Full Participation Report for the Month of 2003-08

Region: Region X  
 JAS Office: 999 JAS Office  
 JAS Unit: 4  
 JAS Caseload: 48

	Adults	Percent Total Adults	Percent of Non-Exempt Adults
Total Adults	47	100.0%	
Total Exempt	11	23.4%	
(16)BA Exempt	4	8.5%	
(17)Med Unable	6	12.8%	
(18)Other Exempt	1	2.1%	
(19)3rd Trimester	0	.0%	
Total Non-Exempt	36	76.6%	
Participating	31	66.0%	86.1%
Work	22	46.8%	61.1%
(1)Unsubsidized Empl	20	42.6%	55.6%
(2)Subsidized Empl	0	.0%	.0%
(3)OJT	1	2.1%	2.8%
(4)Comm Work Exp	1	2.1%	2.8%
Work Readiness	6	12.7%	16.7%
(5)Job Search	1	2.1%	2.8%
(6)Job Skills Training	1	2.1%	2.8%
(7)High School/GED	1	2.1%	2.8%
(8)Job Search > 6 Wks	3	6.4%	8.3%
Family Support Activities	3	6.4%	8.3%
(9)Other Ed & Train Supts	0	.0%	.0%
(10)Substance Abuse	0	.0%	.0%
(11)Mental Health	2	4.3%	5.6%
(12)Domestic Violence	0	.0%	.0%
(13)Medical	0	.0%	.0%
(14)SSI App or Appeal	0	.0%	.0%
(15)Other Support Acts	1	2.1%	2.8%
Not Participating	5	10.6%	13.9%
(20)Penalized	3	6.4%	8.3%
(21)New Applicant	1	2.1%	2.8%
(22)New Referral	0	.0%	.0%
(23)No Activity Reported	1	2.1%	2.8%

Percent of Total Adults  
 $4 \div 47 = 8.5\%$

Percent of Non-Exempt Adults  
 $22 \div 36 = 61.1\%$

Subcategories of Exempt

Subcategories of Work

Category totals of Work Readiness

Subcategories of Work Readiness

Subcategories of Family Support Activities

Subcategories of Not Participating

\*Each adult is represented in only one of all 23 subcategories. If an adult can be recorded in multiple subcategories, they are included in the one based on the order specified by the numbers in parent

## SERVICE PROVIDER MONTHLY NARRATIVE SUMMARY

Organization:	<input type="text"/>
Report Month:	<input type="text"/>
Date of Report:	<input type="text"/>

**Caseload Information:** *briefly summarize any highlights, trends, or changes in the caseload over the past month. For example, has there been a significant drop or increase in the number of referrals or job placements?*

**Program or Client Highlights and Successes:** *briefly summarize highlights in service delivery during the month or focus on a single client's success.*

**Changes in the Labor Market:** *mention new employment opportunities or business closures that could impact jobs available for clients.*

**Community Outreach:** *summarize meetings attended, training, or presentations to other community organizations related to client employment or other client services.*

**Connections with Partner Agencies**

**Other Comments**

**Calendar of Upcoming Events:** *list items that might be of interest to the Grants/Contracts Managers such as training, workshops, and meetings with partner agencies.*

# Quarterly Continuous Improvement Action Plan

**Organization:**

**Prepared by:**

**Quarter:** First Quarter

**Date of Report:**

## Performance Measures

Performance Measures	Percentages		Standard Exceeded	Standard Not Met	Improved Since Last Qtr.
	Standard	Actual			
1. Percent of clients who obtain employment within 30 days.					
2. Percent of cases with earnings.					
3. Percent of employed clients who retain employment for 4 consecutive months.					
4. Percent of employed clients with earnings progression.					
5. Percent of cases that closed with earnings.					
6. Percent of cases closed with earnings that don't return to TA for 6 months.					
7. Percent of cases meeting Overall Participation Rate.					
8. Percent of cases meeting Two-Parent Participation Rate.					

## Performance Issues

Describe any internal or external factors that affected performance during the past quarter.

## Continuous Improvement Plan

Indicate what actions have been taken or planned to improve performance during the next quarter.

## Successes and Best Practices

Describe what actions or innovations resulted in exceeding performance standards or contributed to performance improvement since previous quarter.

**Instructions for Service Providers  
Completing  
The Quarterly Continuous Improvement Action Plan**

Service providers complete a Quarterly Continuous Improvement Action Plan (QCIP) at the end of each quarter to report. The QCIP is used to document plans to address performance issues. The report is also an opportunity for service providers to analyze their achievements, detail those factors that impacted performance, highlight successes, and outline their plans for improving performance in the up-coming quarter.

**Steps for completing the Quarterly Continuous Improvement Action Plan:**

- An electronic version of the QCIAP form has been provided and should be used to complete this plan. The e-form can be obtained from the DPA Work Services Unit.
- Complete the following Sections:

**1. Performance Measures**

- **Percentages:** Fill in the blocks in the Standard and Actual columns for each of the Performance Measures. To find the data to enter, use the Monthly Report for the last month in the quarter. (The Monthly Report is found on the DPA Performance Measures Website at <http://soar.hss.state.ak.us/performance>). Each service provider has their own section on the website. Select your agency on the index, and click "Enter" to pull up your reports. The report provides a chart and a table for each Performance Measure. Above the chart is "Year-To-Date Performance which is your Actual performance, and "Annual Target", which is your Standard. Find this information for each Performance Measure and enter it on the Quarterly Action Plan.
- **Standard Exceeded:** Mark an "X" in this column for each Performance Measure that was met.
- **Standard Not Met:** Mark an "X" in this column for each Performance Measure that was not met.
- **Improved Since Last Quarter:** If your performance was better than last quarter, mark an "X" in this column for each Performance Measure that you increased.

**2. Performance Issues**

Use this Section to give DPA a better understanding of the situation in which you are operating. Describe any events or significant issues that

effected performance. (Examples: An important employer adds jobs or reduces staff, an industry experienced a wide slow-down or a boom, staff turn-over was high, or new procedures were put in place).

It is not necessary to list things that are routine or regular happenings ("Winter - seasonal lay-offs"), but if the lay-offs were longer and deeper than usual, include that in this Section.

Be sure to describe the factors that directly affected those Performance Measures that were below the Standard.

**3. Continuous Improvement Plan**

Describe what actions are planned for the next quarter and detail how these actions should increase performance. Be sure to explain how performance will be improved for each Performance Measure that was below the Standard.

**4. Successes and Best Practices**

Share those innovations and ideas that appear to be working well. Tell what efforts and activities are helping clients succeed and describe how to do them.

- Submit the QCIAP to DPA by the end of the month following the end of the preceding quarter. (By October 31, January 31, April 30 and July 31). Reports are submitted electronically to: [DHSSContracts@alaska.gov](mailto:DHSSContracts@alaska.gov)
- Address any questions on completing the QCIAP to the DPA Program Integrity and Analysis Section.

## Assurances

The following information is to be maintained on file by the service provider and submitted to the DPA Review Team Leader upon request:

### Legal

- Alaska Business License

### Administrative

- Agency Administrative Policies and Procedures Manual
- Organizational Chart

### Personnel

- Staff Roster
- Staff resumes
- Job Descriptions
- Confidentiality policies and DPA Confidentiality forms

### Financial

- Current financial reports
- Billing procedures
- Financial reporting procedures
- Policy for authorizing supportive services
- Procedures for tracking supportive services allocation against expenditures

### Collaboration

- List of partner agencies
- Copies of Memoranda of Agreement

### Client Services

- Description of quality assurance program, including supervisory case reviews
- Grievance/Complaint Procedures. Number of complaints filed this contract/grant year
- Description of days/hours of service to public
- Copy of client screening/assessment instruments
- Procedures for serving clients with limited English proficiency

### Resources

- Procedural manual
- Description of staff training
- List of computer equipment to operate DPA Case Management System
- Description of participant resources, including word processing, printing, photocopying equipment and phones available for client use.
- Description of participant resources, including word processing, printing, photocopying equipment and phones available for client use.
- Inventory of all equipment purchased utilizing DPA grant funds.

Please send the items that have been circled or highlighted to:

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DPA Review Team Leader

## Client Case File Reviews

### "Monitoring for Principles"

The review of client case files examines principles and case file documentation, not the processes used by the service provider. Service Providers are given wide flexibility to design effective procedures for service delivery, but must adhere to the DPA Work Services Principles when implementing work services programs.

The key principles guiding Work Services are:

***Work is always better than welfare.***

*Work is the foundation for a better life. Welfare provides only temporary, inadequate financial support. A job is the beginning, a better job is the next step, and a better life is the ultimate goal. Even low wage work will provide a better opportunity for advancement than welfare ever can.*

***Time-limited benefits demand urgency in client services.***

*Clients have a lifetime limit of five years of public assistance to cover any and all periods of family crises, stretches of unemployment and being unable to work for health reasons. Every month or even day that is wasted while a client is receiving benefits now means that they won't have the option of using that month of benefits in the future, when they may need it desperately. The time-limited nature of assistance demands that processes and activities designed to serve Temporary Assistance clients reflect the urgency introduced by time limits. Good case management to avoid clients falling through the cracks, as well as services that are "bundled" or provided concurrently to ensure clients are using their time very efficiently, are all critical to honoring the urgency of the mission.*

***A focus on client strengths and accountability creates a high expectation and high performance environment.***

*Overall, the focus needs to be more on what clients can do than on what they can't do. From the initial contact, clients need to understand that they are expected to become self-sufficient, and they have a limited amount of time to do so. Clients are held strictly accountable for participating and doing all they can to progress in their plans. Failure to participate or progress without good cause will result in temporarily reducing client benefits.*

***A focus on program strengths and accountability creates a high expectation and high performance environment.***

*Clients are not the only ones challenged to make progress under a performance-based system. A continuous improvement approach is a critical part of program accountability and performance as well. While clients are held accountable for making progress in their Family Self-Sufficiency Plan, DPA and work services providers are held accountable for ensuring that policies, procedures and services are client-centered, support performance measures and promote positive outcomes for clients. Agency policy and expectations for case manager performance are clear.*

***Every client can become more self-sufficient.***

*A high expectations environment does not mean that every single client will move into full-time work. However, it does assume that every single client will become more self-sufficient as they participate in work services activities. There will be clients with formidable barriers and some of these challenges may be beyond the scope of a Work First approach to address. A relentless focus on what the client can do, rather than an exhaustive analysis of all the things the client can't do, will help ensure that every client moves as far as possible toward self-sufficiency.*

***Local ownership and collaborative approaches create better results for clients.***

*DPA recognizes that what works well in one area or office may not be the best approach in another. The more local service providers and DPA staff work together to create the best approach for each area and each client, the better the performance outcomes. Collaboration is a tool to achieve better results for clients. While DPA is responsible for providing specific benefits for a time-limited period to eligible Alaskans, these same Alaskans are likely to remain in their communities past the five-year limit. The pressing question is whether they will remain as families needing continued assistance (with no clear source for such help) or as families who have achieved a level of self-sufficiency through work.*

## CLIENT CASE FILE REVIEW WORKSHEET

**Instructions:** Please refer to the Instructions in the Service Provider Review Guide for completing this form. Use the spaces provided below to enter notes and findings about the case file.

Region: _____	Service Provider: _____
Reviewed by: _____	Date: _____
<b>CLIENT PROFILE</b>	
_____ <b>Participant (PI) name:</b> <b>Client ID #:</b> _____  _____ <b>Other parent (if 2P)</b>  Household size _____ 1P _____ 2P _____  Age(s) of children _____ _____	<b>Case Status:</b> Open _____ Closed _____  <b>Exempt from Work Activities?</b> No _____ Yes _____ Code _____ Explain _____ _____ _____ Months of TA left: _____

Dates: TA App _____ DPA Referral _____ CM Contact _____ Initial Engagement _____  Other client information:    
--

WORK ACTIVITIES

Notes:

Findings:

JOB RETENTION AND PROGRESSION

Notes:

Findings:

FAMILY SELF SUFFICIENCY PLAN

Notes:

Findings:

MONITORING AND ON-GOING ENGAGEMENT

Notes:

Findings:

CMS DATA ENTRY

Notes:

Findings:

CASE FILE DOCUMENTATION

Notes:

Findings:

SUPPORTIVE SERVICES & CHILD CARE

Notes:

Findings:

SUMMARY AND RECOMMENDATIONS

**SERVICE PROVIDER MONITORING  
CLIENT CASE FILE REVIEW WORKSHEET  
INSTRUCTIONS**

The client case file review worksheet instructions were developed to assist review team members in completing work services case file reviews. The instructions are not intended to be all-inclusive, but to provide general guidelines and assistance for conducting case file reviews.

The file review format allows reviewers to take notes during the review of each identified category with an additional section for findings. The findings include recommended case manager actions and the supporting rationale for the recommendations. The final section of the review form is dedicated to overall impressions and recommendations.

**CLIENT PROFILE:**

- Review the following EIS and CMS screens to obtain information:
  - CAP1/CAP2 or CASS or Case Summary screens (Case Status, HH Size, Age of Children, 1P/2P/IC, Exemption Reason Code, TA and BA counter, TA Application Date)
  - Work or Work Activity Screens (Exemption Reason Code/Penalty Reason Code)
  - TLIP or Case Summary screens (TA and BA counter)
  - CANO and NOHS (TA Application Date, DPA Referral Date, CM Contact Date/Attempts, Initial Engagement Date)
  - WOSA Screen (Penalties)

**Look for:**

- Was referral made promptly by DPA?
- Did the case manager contact the client quickly?
- What steps did the case manager take to engage the client in FSSP development?
- Were penalties implemented appropriately if the client failed to engage?

## **WORK ACTIVITIES:**

- Review the following EIS and/or CMS screens to obtain information:
  - JOMO or Work Activity Screen (minimally, for each month under review)
  - CLNO and CANO
- Review the Hard Copy file

### **Look for:**

- Has the client actively tested the labor market?
- Matched and referred to open job orders?
- Have other appropriate employability assessments been completed?
- Is the client employed?
  - Number of hours per week
  - Hourly Wage
- Have additional activities been assigned to supplement work hours?
  - On-going work search
  - CWE
  - Short-term Training
  - ESL/ABE
- Have family support activities been assigned?
  - Counseling?
  - Treatment?
  - SSA/SSI application
- Have additional activities been assigned to compliment family support activities?
  - CWE
  - ESL/ABE
  - Short-term training
- Are clients exempt from work activities engaged in activities?
  - Mandatory family support activities?
  - Voluntary work?

### **Job Retention and Advancement:**

- Review the following EIS and/or CMS screens to obtain information:
  - JOMO or Work Activity Screen (minimally, for each month under review)
  - FSSP screen (minimally, for each month under review)
  - CLNO and CANO
- Review the Hard Copy file

### **Look for:**

- Are appropriate supports in place (child care, back-up child care, transportation)?
- Has the case manager discussed: appropriate dress, work place etiquette and contacting employer when sick or tardy?
- Has the client received coaching about communication with supervisors and co-workers?
- Have client and case manager discussed the consequences of quitting or reducing employment hours without good cause?
- Has the client been coached to request job descriptions?
- Have the case manager and client discussed the relationship between the current job and their employment goal?
- Have short-term training opportunities been explored, which would enhance the client's ability to obtain a promotion?
- Have the client and case manager discussed the EITC and WOTC?
- Have the client and case manager discussed the Fidelity Bonding, OJT and Job Start programs as mechanisms for advancement opportunities?
- If the client is participating in a Job Start or OJT, did the case manager provide a high level of support to the client and the employer?
- If employment ended, have the client and the case manager identified lessons learned and discussed strategies for future success in employment?

### **Family Self-Sufficiency Planning:**

- Review the following EIS and/or CMS screens to obtain information:
  - FSSP screen (minimally, for each month under review)
  - CLNO and CANO
- Review Hard Copy file

### **Look for:**

- Is the employment goal a job that allows the client to close their TA case as quickly as possible? (Exception: SSI applicants)
- Was the plan developed collaboratively with the client, taking into account their past employment/educational experiences and preferences?
- Are intermediate goals, steps and review/completion dates Specific, Meaningful, Assessable, Realistic and Time-bound (SMART)?
- Full-time employment and/or concurrent activities total 40 hours per week?
- If exempt from work activities:
  - Has the participant been engaged in as many hours of activities per week as possible?
  - Have efforts been made to ensure the client is voluntarily participating in activities that would make the family more self-sufficient e.g., ABE, CWE, VR, treatment or short-term training?
- Are needed supports and services identified and the client referred to appropriate resources?
- Are FSSPs modified when appropriate to reflect current activities?
- Are FSSPs signed?
- Is the FSSP on-line or does documentation exist to support a manually developed plan?
- Was the plan developed in person if the case manager and client reside in the same community?

### **Monitoring and On-going Engagement:**

- Review the following EIS and/or CMS screens to obtain information:
  - JOMO or Work Activity Screen (minimally, for each month under review)
  - FSSP screen (minimally, for each month under review)
  - CLNO and CANO
- Review the Hard Copy file

### **Look for:**

- Do the case manager and client meet regularly (a minimum of once each month)?
- Does the meeting occur face-to-face if the case manager and client reside in the same community?
- Does the case manager occasionally meet with the client in the client's community if living remotely?
- Are FSSP steps monitored at assigned completion dates and updated?
- Does the case manager work with the client to ensure that activities (including family support activities) are completed when assigned?
- Are activities carried over from one plan to another if not completed timely?
- Have incomplete steps been reviewed to determine if they continue to be appropriate?
- When the client doesn't participate as required have identification of possible 'good cause' and implementation of penalties been timely?
- Have home visits occurred when appropriate?
- Have required staffings and informal staffings occurred when appropriate (with DPA and with concurrent providers)?
- Has the case manager explored an OJT or Job Start if needed for the client to obtain paid employment?
- Has the client been referred to local community providers for assessment (mental Health, Adult Basic Education/English as a Second Language, Vocational Rehabilitation, Workforce Development/Job Training, Substance Abuse)?
- Has the client been referred to local community resource providers for additional benefits/supports (AHFC, WIC, Food Banks, Clothing Banks, other Non-Profits)?
- When work or activities have a known end date (seasonal work, Job Start/OJT, training) have the client and case manager planned for next steps prior to it ending?
- Have exit-planning activities occurred throughout the planning and monitoring process?
- Has the client been informed of PASS II, Transitional Medicaid and DKC?

### **Supportive Services and Child Care:**

- Review the following EIS and/or CMS screens to obtain information:
  - CBPH or Payment History screen (for each month under review)
- Review the supportive services spread sheet for the service provider, which is prepared by PI&A research analysts prior to the review (Non-DOL)
- Review the Hard Copy file and EIS/CMS CLNO and CANO

### **Look for:**

- Was child care assistance provided if necessary?
- Was the child care authorization directly connected to completing assigned activities?
- Was the supportive service provided (transportation, clothing, insurance, emergency shelter, etc.) directly related to obtaining or maintaining employment or completing an assigned work activity?
- Was a family budget developed with the client?
- Is the client paying a portion of the expense if possible (exception: child care)?
- Have community resources been explored prior to payment of the supportive service?
- Does the case file contain adequate documentation to support the expenditure of funds?

### **Case File Documentation:**

- Review the following EIS and/or CMS screens to obtain information:
  - CANO and CLNO Screens
  - FSSP Screen
- Review the Hard Copy file

### **Look for:**

- Are all case notes completed on-line? Are manual notes accompanied by documentation, which explains why the notes were not entered on-line?
- Is the content/tone of on-line case notes appropriate? Are sensitive topics documented in the hard copy file?
- If the client is incapacitated is there a current TA 10 form?
- If the client is exempt due to the disability of a child or other household member is adequate medical information in the file?
- Do case notes and case file documentation demonstrates communication and coordination with others working with the family as appropriate?
- Do case notes allow the reader to clearly understand what activities have been assigned and the rationale for the assignment?
- Are supportive service and child care expenditures supported by adequate documentation of need and exploration of prior resources?
- Is the file adequately organized?
- Will the next case manager have the ability to continue providing the appropriate work services supports for the client without duplication of past efforts?

### **CMS Data Entry:**

- Review the following EIS and/or CMS screens to obtain information:
  - JOMO or Work Activity Screen (minimally, for each month under review)
  - FSSP screen (minimally, for each month under review)
  - CLNO and CANO
- Review the Hard Copy file

### **Look for:**

- Are activity codes correct?
- Are the correct number of activity hours entered?
- Does the case file documentation, FSSP and client statement support the activities entered in CMS?
- Is the correct work activity Exemption Reason Code entered?
- Is the correct penalty coding entered?

### **Summary and Recommendations**

Briefly recap actions that have been particularly effective in assisting the family, trends noted and recommendations, which may aid the case manager in assisting the family in movement towards self-sufficiency.

**SCREEN ACRONYMS:**

**EIS SCREENS:**

CASE PROFILE PAGE 1	CAP1
CASE PROFILE PAGE 2	CAP2
CASE SUMMARY SCREEN	CASS
CLIENT PAYMENT BENEFIT HISTORY	CBPH
WORK SCREEN	WORK
CASE NOTES	CANO
CLIENT NOTES	CLNO
FAMILY SELF-SUFFICIENCY PLAN	FSSP
JAS SET MONTH	JOMO
NOTICE HISTORY SUMMARY SCREEN	NOHS
TIME LIMIT INFORMATION/PREVIOUS AID	TLIP
WORK SANCTIONS	WOSA

**CMS SCREENS:**

CASE SUMMARY TAB  
WORK ACTIVITIES TAB  
PAYMENT HISTORY TAB  
CASE NOTES TAB  
CLIENT NOTES TAB  
ALERTS TAB  
FSSP TAB

## WORK SERVICES PARTICIPANT INTERVIEW

Region: _____	Service Provider: _____
Interviewed by: _____	In person _____
Date: _____	By telephone: _____
<b>CLIENT PROFILE</b>	
Participant (PI) name: _____ _____ If 2P, name of other parent _____ Client ID #: _____ Household size _____ 1P _____ 2P _____ Age of children _____ _____	Case Status: Open _____ Closed _____  Exempt from Work Activities? No _____ Yes _____ Code _____  Months of TA left: _____

1. Who is your case manager?
  
  
  
2. How long have you worked with your case manager?
  
  
  
3. What activities are you currently doing to become self-sufficient?
  - A. How many hours are you participating each week?

- B. Are you having any problems participating in activities? Please describe them.
- C. What could your case manager do to help with these problems?
4. Did your case manager work with you to identify your goals, what you're good at and what you have going for you?
5. What has your case manager required you to do in order to keep receiving your Temporary Assistance?
6. Did your case manager say what would happen if you didn't participate in activities?
7. What help did you receive from your case manager with childcare, transportation, clothing or other services?
8. Do you feel your case manager has helped you become more self-sufficient?  
(OPEN CASE)  
Did working with your case manager help you close your Temporary Assistance case?(CLOSED CASE)

9. What did your case manager tell you about Temporary Assistance time limits?
  
10. How many months of Temporary Assistance do you have left?
  
11. Did you have any problems working with your case manager? What would you have liked to be different?
  
12. When was the last time you met with or talked to your case manager?
  - a. What did you talk about?
  
  - B. Was the meeting useful?
  
13. How can we improve our services?

Other comments?

## WORK SERVICES SERVICE PROVIDER/STAFF INTERVIEW

Region:	Service Provider:
Staff Name:	Job Title:
Interviewed by:	Date:

1. How do you receive referrals from DPA?
  - A. What information about the clients do you receive from DPA?
  - B. What improvements could be made to the referral process?
2. How do you ensure that clients you are working with test the labor market?  
(has tested the labor market?)
3. What steps do you take to help clients keep their jobs?
4. What is your process for assisting working clients to obtain more hours,  
more pay or a better job?
5. What steps do you take to engage with clients who are:
  - Not fully participating in work activities?
  - In penalty?
  - In baby exemption?
  - In medical exemption?

6. Describe how you monitor clients' progress towards self-sufficiency:
  - How frequently do you contact clients?
  - How do you decide when to complete a home visit?
  
7. Describe your staffing process.
  - How do you determine when to conduct staffings?
  - What improvements could be made?
  
8. Do you regularly receive supervisory case reviews? (How often?)
  - Describe the type of feedback you receive:
  
  - How does the feedback you receive help you improve services for clients?
  
8. How would you describe communication between case managers and DPA?
  - What is working well?
  - What areas could be improved?
  
9. How do you ensure that information about your clients remains confidential?



## DPA OFFICE MANAGER INTERVIEW SERVICE PROVIDER MONITORING

Region:	Office:
Staff Name:	Job Title:
Interviewed by:	Date:

1. How would you describe the working relationship between this office/region and the service provider?
  
2. What procedures do you have in place to ensure timely and effective communication of work exemptions, penalties, job quits and new employment between your office(s) and the service provider?
  
3. Please describe your process for referring clients to the service provider for case management.
  
4. What improvements could be made in the referral process?
  
5. What are your observations about the service provider's performance in meeting their performance standards?
  
6. What is your office doing to collaborate with the service provider to assist in achieving the service area's employment outcomes?
  
7. What overall recommendations would you make which would result in improved performance outcomes with this provider in your service area?



## Service Provider Review Summary

Service Provider	<input type="text"/>	Region	<input type="text"/>
Contact Person	<input type="text"/>	Phone Number	<input type="text"/>
Address	<input type="text"/>	Mailing Address	<input type="text"/>
Reviewed by	<input type="text"/>	Review Date	<input type="text"/>
Service Provider Response Due Date			<input type="text"/>

### Findings

#### 1. Performance Measures

#### 2. Required Reports

#### 3. Assurances

#### 4. Documentation and Data Reporting

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**5. Supportive Services Review**

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**Action Plan**

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