

# Quality Assurance Report

Program Year 2022-23

January 4, 2023

Programmatic and Financial  
Compliance Monitoring Review

For

CareerSource Central Florida  
Local Workforce Development Board - 12

Prepared by FloridaCommerce  
Division of Workforce Services and Division of Finance and Administration



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## Executive Summary

During the period of February 13 to February 17, 2023, the Florida Department of Commerce (FloridaCommerce) conducted a joint programmatic and financial monitoring review of CareerSource Central Florida's (CSCF) workforce programs. CSCF's service area includes Lake, Orange, Osceola, Seminole, and Sumter counties.

Programmatic monitoring was conducted by FloridaCommerce's Bureau of One-Stop and Program Support (OSPS) and financial monitoring was conducted by FloridaCommerce's Bureau of Financial Monitoring and Accountability (FMA) staff through a remote desktop review analysis. This allowed for collaboration in the evaluation of both programmatic and financial data by a comprehensive monitoring review team.

Monitoring activities included assessing CSCF's program operations, management practices, system protocols, internal controls, financial record keeping, and reporting to determine if CSCF operated in compliance with each of the programs' laws, regulations, state and local plans, policies and guidance, and any contract or agreement terms. Monitoring also included sample testing of randomly selected participant case file records from each of the workforce programs reviewed.

Programmatic and financial management issues identified in the report are categorized as Findings, Other Noncompliance Issues (ONIs), Observations, or Technical Assistance based on a scale of high, medium, and low risk factors. High, medium, and low risk factors are used to separate issues that present more of a threat to program operations including issues that may impact the fiscal integrity or delivery of services within program operations.

The review revealed that CSCF has the systems in place to perform the broad management, operational, and financial functions required to operate the workforce programs; however, deficiencies in case file documentation requirements and operational and management practices in several program review areas were identified. The programmatic monitoring review resulted in five findings, five ONIs, and several observations. The financial monitoring review resulted in one observation. While no material issues or weaknesses came to the reviewers' attention other than those contained in the report, there is no assurance that other issues do not exist.

As a subrecipient of authorized funds administered by FloridaCommerce, CSCF is accountable for failing to correct performance, programmatic, and financial deficiencies found during compliance monitoring reviews. To reduce programmatic or financial deficiencies observed and to increase program integrity at the local level, corrective action by CSCF is required to be taken.

The results of each of CSCF's workforce programs are summarized in the following charts by program and category.

## ACRONYM TABLE

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ABAWD – Abled Bodied Adult without Dependents  
AP – Administrative Policy  
CAP – Corrective Action Plan  
CFR – Code of Federal Regulations  
CSCF – CareerSource Central Florida  
DCF – Department of Children and Families  
DVOP – Disabled Veterans Outreach Program  
DWG – Disaster Recovery Dislocated Worker Grant  
DW – Dislocated Worker  
EDP – Employability Development Plan  
EEO – Equal Employment Opportunity  
ES – Employment Service  
ETA – Employment and Training Administration  
F.A.C.–Florida Administrative Code  
FCOP – Farmworker Career Development Program  
FG – Final Guidance  
FLC – Foreign Labor Certification  
FloridaCommerce – Florida Department of Commerce  
FLSA – Fair Labor Standards Act  
FMA – Bureau of Financial Monitoring and Accountability  
F.S. – Florida Statutes  
FY – Fiscal Year  
IEP – Individual Employment Plan  
IRP – Individual Responsibility Plan  
IT – Information Technology  
ITA – Individual Training Account  
IWT – Incumbent Worker Training  
JPR – Job Participation Rate  
JVA – Jobs for Veterans Act  
JVSG – Jobs for Veterans State Grant  
LMI – Labor Market Information  
LVER – Local Veterans Employment Representative  
LWDB – Local Workforce Development Board  
CSPH – Local Workforce Development Board  
MIS – Management Information System  
MOU/IFA – Memorandum of Understanding & Infrastructure Funding Agreement  
MSFW – Migrant and Seasonal Farmworker  
MSG – Measurable Skills Gains  
ONI – Other Noncompliance Issue  
OSPS – Bureau of One-Stop and Program Support  
OSST – One-Stop Service Tracking  
OST – Occupational Skills Training  
POS – Priority of Service  
PY – Program Year  
RESEA – Reemployment Services and Eligibility Assessment Program  
SBE – Significant Barrier to Employment  
SMA – Senior Monitor Advocate

S.M.A.R.T – Specific, Measurable, Attainable, Realistic, and Time-Bound  
SNAP E&T – Supplemental Nutrition Assistance Program Employment and Training  
SYEP – Summer Youth Employment Program  
TAA – Trade Adjustment Assistance  
TANF – Temporary Assistance for Needy Families  
TCA – Temporary Cash Assistance  
TEGL – Training and Employment Guidance Letter  
U.S.C. – United States Code  
WE – Work Experience  
WFS – Workforce Services  
WIOA – Workforce Innovation and Opportunity Act  
WP – Wagner-Peyser  
WSA – Work Search Activity  
WT – Welfare Transition

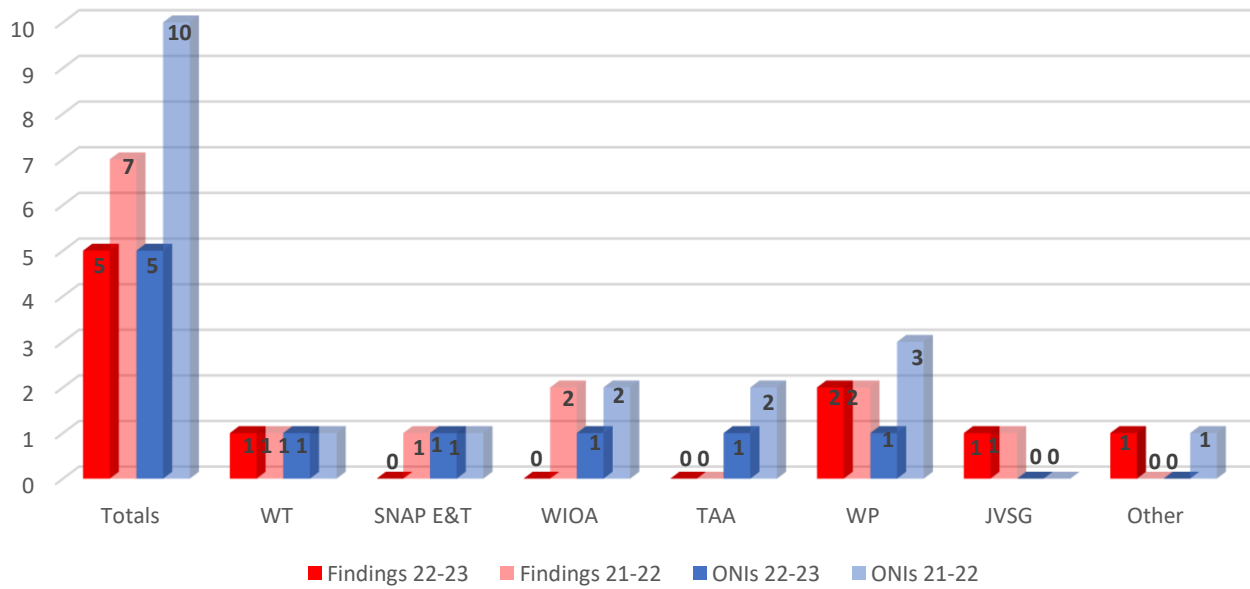
**\*This acronym table reflects all acronyms that have been used in the PY 2022-2023 monitoring cycle. All acronyms may not be used in this report.**

**SUMMARY TABLE OF PROGRAMMATIC MONITORING RESULTS**

N=No. Y=Yes. N/A=Not Applicable.

PY 2022-23 Programmatic Monitoring Results					
Workforce Program	Issue	Prior Year Finding	Current Year Finding	Prior Year Other Noncompliance Issue	Current Year Other Noncompliance Issue
WT	A safety plan was not developed for one victim of domestic violence nor were any safety plan elements included on the IRP.	N	Y		
TANF SYEP	One participant was enrolled in the SYEP before being determined eligible for services.			N	Y
<b>WT Totals</b>		<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>
SNAP E&T	Four participants did not have their 590 initial appointment service code selected within two business days of completion of the appointment or "No show" as required.			Y	Y
<b>SNAP E&amp;T Totals</b>		<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>
WIOA Special Projects	The training activity and payment method recorded in Employ Florida for two participants were recorded incorrectly in Employ Florida.			N	Y
<b>WIOA Totals</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>
TAA	Training benchmarks were not reviewed every 60 days and documented in the TAA program application for one participant.			Y	Y
<b>TAA Totals</b>		<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>
WP	Six job seeker placements were either missing documentation to support the placement, case notes in the files were incomplete, or wage rate documentation was inconsistent.	N	Y		
	Four job seekers with staff referrals to job orders were missing either full registrations and/or documentation of job seeker permissions to refer.	N	Y		
RESEA	Two participants' RESEA Responsibility Statements were missing staff signatures.			N	Y
<b>WP Totals</b>		<b>0</b>	<b>2</b>	<b>0</b>	<b>1</b>
JVSG	Four veteran case files were either missing a service code entry or the service codes were not entered timely in Employ Florida, or the IEPs were not reviewed within the required timelines.	N	Y		
<b>JVSG Totals</b>		<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>
Local Board Governance	One local board member did not complete orientation training within six months of appointment.	N	Y		
<b>Other Totals</b>		<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>
<b>Results – All Programs</b>		<b>0</b>	<b>5</b>	<b>2</b>	<b>5</b>

**Monitoring Issues by Program  
PY 2022-2023  
CareerSource Central Florida**



Note: The above chart reflects a two-year comparison of the number of monitoring issues (PY 2021-22 and PY 2022-23).

**DEFINITIONS APPLICABLE TO PROGRAMMATIC MONITORING**

1. Finding – A high risk issue that directly impacts the integrity or effectiveness of program operations or could potentially result in major program deficiencies (e.g., participant ineligibility, missing files, lack of fully executed contracts, issues indicative of systemic problems in program operations, has the appearance of fraud or abuse, possibility of non-conforming services provided to participants, potential questioned costs, etc.). Findings are expected to be responded to in the CAP.
2. Other Noncompliance Issue – A medium risk finding that results in deviation from process or practice not likely to result in failure of the management system or process but has a direct impact on program operations (e.g., data validity, timeliness of entering system information, missing program elements and employment plan information, failure to timely conduct follow-ups, etc.). ONIs could potentially be upgraded to a finding over time based on the nature of the deficiency (e.g., repeat violations, issues indicative of systemic problems in program operations, questioned costs, etc.). ONIs are expected to be responded to in the CAP.
3. Observation – A low risk issue that is intended to offer constructive comments and an opportunity to improve current local practices, processes, and procedures that result in positive program outcomes. Observations are not expected to be responded to in the CAP except when requested.

## SUMMARY TABLE OF FINANCIAL MONITORING RESULTS

FY 2022-2023 Financial Monitoring Results				
Category	Findings	Other Noncompliance Issue	Observations	Technical Assistance Provided
General Ledger and Cost Allocations (MOU IFAs omitted steps taken to reach consensus) (MOU IFA omitted dispute resolution process) (MOU IFAs omitted remedies for nonperformance)			1	
<b>TOTAL</b>			<b>1</b>	

### **DEFINITIONS APPLICABLE TO FINANCIAL MONITORING**

1. **Finding** – A high risk issue that directly impacts the integrity or effectiveness of financial operations or could potentially result in major financial deficiencies (e.g., lack of accounting records or no system of accounting, no documentation to support expenditures, lack of internal controls, lack of fully executed contracts, issues indicative of systemic problems in financial operations, has the appearance of fraud or abuse, potential disallowed costs, etc.). Findings are expected to be responded to in the CAP.
2. **Other Noncompliance Issue** – A medium risk finding that results in deviation from process or practice not likely to result in failure of the management system or process but has a direct impact on financial operations (e.g., missing financial elements, failure to timely conduct follow-ups, etc.). ONIs could potentially be upgraded to a finding over time based on the nature of the deficiency (e.g., repeat violations, issues indicative of systemic problems in financial operations, questioned costs, etc.). ONIs are expected to be responded to in the CAP.
3. **Observation** – A low risk issue that is intended to offer constructive comments and an opportunity to improve current local practices, processes, and procedures that result in positive financial outcomes. Observations are not expected to be responded to in the CAP except when requested.
4. **Technical Assistance** – Any assistance provided by the financial monitoring team to LWDB staff.

**QUALITY ASSURANCE REPORT  
CAREERSOURCE CENTRAL FLORIDA  
LOCAL WORKFORCE DEVELOPMENT BOARD - 12**

**I. DESCRIPTION OF MONITORING APPROACH**

**Review Purpose and Scope**

The monitoring review consisted of a joint programmatic and financial review of CSCF's workforce programs. The purpose of the monitoring review was to assess CSCF's compliance with applicable federal and state program statutes, regulations, and programmatic and fiscal administrative requirements. The scope primarily involved a review of participant case file data entered in the State's MIS, a review of participant case file documentation provided by CSCF from the selected file samples, and a review of local plans, procedures, reports, records, and other abstract information. In some instances, interviews were conducted with CSCF staff, employers, and participants to gather information about program processes and service delivery strategies.

The review scope also included an examination of CSCF's accounting records, internal controls, and supporting documentation including, but not limited to, a review of cash management, general ledger, cost allocations, payroll, personnel activity report testing, disbursement testing, and reporting of program data in the MIS to determine if appropriate processes, procedures, and controls were in place and properly implemented.

**Type of Review**

A remote desktop review was performed for both programmatic and financial monitoring, with the selected sampled items provided through upload to FloridaCommerce's SharePoint monitoring system or access to CSCF's document storage system.

**Compliance Review Abstract Information**

- Programmatic and Financial Monitoring Review Dates: February 13, 2023, to February 17, 2023
- Programmatic Monitoring Sample Review Period Dates: October 1, 2021, to December 31, 2022
- Financial Monitoring Sample Review Period Dates: October 1, 2021, to June 30, 2022

Note: Entrance conference and exit conference attendees are listed in Section IX of this report.

**Programs Reviewed:**

- Welfare Transition
- Supplemental Nutrition Assistance Program – Employment and Training
- Workforce Innovation and Opportunity Act
- Trade Adjustment Assistance
- Wagner-Peyser
- Jobs for Veterans State Grant
- Any identified special projects operational during the review period
- Financial management practices, record keeping, safeguards and reporting



## **Monitoring Review Tools**

Florida Commerce’s PY 2022-2023 programmatic and financial monitoring review tools were used to conduct the review. The tools were developed to provide a framework for monitoring activities performed by OSPS and FMA staff as well as the criteria used to monitor.

## **II. FINANCIAL MONITORING REVIEW**

FMA performed financial monitoring based on the elements described in the FY 2022-2023 Financial Monitoring Tool. The results of the financial monitoring testing are described below:

### **Prior Year Corrective Action Follow-Up**

There were no Findings or ONIs identified in the prior year.

### **FY 2022-2023 Financial Monitoring Results**

#### **Findings**

There were no findings identified during the financial monitoring review period of October 1, 2021, to June 30, 2022.

#### **Other Noncompliance Issues**

There were no ONIs identified during the financial monitoring review period of October 1, 2021, to June 30, 2022.

#### **Observations/Technical Assistance**

##### **Observation FMA #12.23.01**

##### **Category: 7.0 - General Ledger and Cost Allocation:**

Condition: CSCF’s Memorandum of Understanding & Infrastructure Funding Agreements with Vocational Rehabilitation, Orange County Public Schools, and Orange County did not include all required information in accordance with 20 CFR 678.500, 20 CFR 678.755 and the Grantee-Subgrantee Agreement as follows:

##### *Vocational Rehabilitation & Orange County*

- Steps CSCF, chief local elected officials, and career center partners used to reach consensus or an assurance that the local area followed the guidance for the State funding process; and
- Remedies for nonperformance.

##### *Orange County Public Schools*

- Steps CSCF, chief local elected officials, and career center partners used to reach consensus or an assurance that the local area followed the guidance for the State funding process;
- Description of the process to be used among partners to resolve issues during the MOU duration period when consensus cannot be reached; and
- Remedies for nonperformance.

Criteria: 20 CFR 678.755 states, in part, that: *The MOU, fully described in § 678.500, must contain the following information whether the local areas use either the local one-stop or the State funding method:*

*(d) Steps the Local WDB, chief elected officials, and one-stop partners used to reach consensus or an assurance that the local area followed the guidance for the State funding process.*

*(e) Description of the process to be used among partners to resolve issues during the MOU duration period when consensus cannot be reached.*

Grantee-Subgrantee Agreement – CSCF’s One-Stop Delivery System, Section 5(g). states, in part, that “*The Board shall incorporate infrastructure funding provisions in each memorandum of understanding with its one-stop partners. Remedies for nonperformance must also be included*”.

Cause: CSCF did not follow the requirements set forth in 20 CFR 678.500, 20 CFR 678.755, and the Grantee-Sub-Grantee Agreement and omitted the requirements in the agreements.

Effect: CSCF is not in compliance with federal requirements pertaining to the execution and administration of required partner memorandums of understanding and infrastructure funding agreements. Absent the required steps used to reach consensus, remedies for nonperformance, and a description of the process to be used among partners to resolve issues during the MOU duration period when consensus cannot be reached, CSCF’s MOU IFA may lack enforceability as well as accountability and transparency in the use of funds and responsibilities of both parties.

Required Action: CSCF must ensure the elements stated in 20 CFR 678.755(c) and 20 CFR 678.500(d) are included in the MOU IFAs.

Corrective Action Taken: CSCF updated its MOU IFA template during the monitoring period to ensure that the elements stated in 20 CFR 678.755, 20 CFR 678.500, and the Grantee-Subgrantee Agreement are included in future MOU IFAs. Therefore, no further action is needed. FloridaCommerce would like to commend CSCF on the timely resolution of this finding.

Resource: Administrative Policy Number 106, Memorandums of Understanding and Infrastructure Funding Agreements, Dated February 20, 2020 (floridajobs.org).

### III. PROGRAMMATIC MONITORING REVIEW

The outcome of the programmatic monitoring review is detailed in the following sections of the report. The information presented describes the issues noted and, where appropriate, required corrective actions for improvement.

**NOTE:** The following general CAP requirements must be submitted for each finding and ONI and any additional program specific issues identified in the report.

#### **General Program CAP Requirements**

- A copy of updated local operating procedures/policies that address the requirement, if applicable.
- A copy of a monitoring schedule showing timeframes and the activities and services that will be monitored.

- Documentation showing staff training or refresher training has been or will be provided. Documentation must include training date(s), a training roster, and an agenda listing training topics.
- Documentation of written communication to staff informing them of the requirements.

**WELFARE TRANSITION**

*The sample size consisted of 18 participant case files. The following issue was identified:*

**Finding Number WT 12.23.01**

**Documentation of Safety Plan and Safety Plan Elements**  
*Applicable reference(s): 414.065, F.S.; and FloridaCommerce FG 02-026.*

Of the two case files reviewed of participants identified as victims of domestic violence, one (50.0 percent) did not have a safety plan documented in the case file. Also, required safety plan elements were not documented on the IRP contained in the file.

**Recurring Issue from Previous Year: No.**

**Risk Impact:** Absence of a safety plan and failure to outline the elements of the safety plan on the IRP could place participants in potential danger by not knowing what safety resources are available to them or how to react in a confrontational situation. This could also place CSCF and the State in a litigious position.

**Required Action:** In addition to the general program CAP requirements, CSCF must provide documentation showing that staff have reviewed the one domestic violence participant file, developed a safety plan, and updated the IRP to include the elements from the safety plan if the case file is still open and active. Additionally, an assurance must be provided with the CAP that safety plans will be developed, and all elements of the safety plans will be included on the IRPs for victims of domestic violence in the future. Because of the inherent risks associated with safety plans, a plan of action or process must be provided with the CAP that includes documentation of staff training on the development of safety plans and safety plan elements for victims of domestic violence.

**OBSERVATION**

The WT file review also revealed that JPR hours were being projected by CSCF staff without all pertinent information recorded in OSST. Additionally, some case notes were not entered timely. For future reference, case notes must fully describe the job for which hours are being or were projected, the date documentation of a full pay cycle was received, the number of hours on the documentation, and the number of hours to be projected including the duration (start and end dates). Although some documentation was in the file to support the JPR hours, the hours were not case noted correctly as outlined in FloridaCommerce FG 072. For future reference, CSCF must ensure staff enter case notes for projected hours of employment according to guidance. Recording projected hours correctly will assist case managers in assigning the proper number of JPR hours for participants.

**TANF SUMMER YOUTH EMPLOYMENT PROGRAM**

*The sample size consisted of five participant case files. The following issue was identified:*

**ONI Number SYEP 12.23.01**

**Eligibility**

*Applicable reference(s):* SYEP Reporting Guide.

Of the five participants enrolled in the TANF SYEP, one (20.0 percent) participant was not determined eligible until after the participant was enrolled in the program.

**Recurring Issue from Previous Year:** No.

**Risk Impact:** This data is used for reporting purposes and incorrect data entry impacts the validity of the data being reported and can negatively impact performance. Ineligibility can also lead to questioned costs if the participant was not eligible for participation in the program and costs were incurred.

**Required Action:** In addition to the general program CAP requirements, CSCF must provide an assurance with the CAP that all necessary steps will be taken in the future to ensure eligibility is determined prior to enrollment and participation. Although the individual was later determined eligible, CSCF must ensure that all participants meet the eligibility requirements of the SYEP before being enrolled and participating in the program. Because this issue is related to eligibility with potential cost implications, CSCF must provide documentation of written notification informing staff of the requirements for correctly documenting eligibility.

**SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM – EMPLOYMENT AND TRAINING**

*The sample size consisted of 17 participant case files. The following issues were identified:*

**ONI Number SNAP 12.23.02**

**Initial Engagement Process**

*Applicable reference(s):* FloridaCommerce Memorandum entitled “Supplemental Nutrition Assistance Program Employment and Training Able-Bodied Adults without Dependents Initial Engagement Process Changes” Dated January 5, 2017.

Of the 13 case files reviewed where a 590-appointment setting code was entered in OSST, four (30.8 percent) participants did not have their initial appointment status selected within two business days of completion of the appointment or have “No show” recorded as required.

**Recurring Issue from Previous Year:** Yes (Prior year CAP verified; however, noncompliance continues to occur).

**Risk Impact:** Failure to expedite the assignment of and participation in qualifying SNAP activities affects performance reporting and could potentially result in overpayment of food assistance benefits to an ineligible individual.

**Required Action:** In addition to the general program CAP requirements, CSCF must provide an assurance with the CAP that all future initial appointment status codes will be entered in OSST timely. CSCF must also take necessary steps to ensure staff select the initial appointment status within two business days of completion of the appointment or have “No Show” indicated as required. Because this is a repeat issue, CSCF must reevaluate the cause and provide a plan of action or process with the CAP for preventing a recurrence of this issue in the future including more in-depth monitoring, documentation of staff training, and written notification to staff informing them of the requirements.

## OBSERVATION

The review revealed that CSCF's SNAP E&T LOPs should be updated to reflect procedures for removing participants from the automated process after the initial 30-day automatic activity enrollment in Job Search or Job Search Training. An updated LOP will help eliminate confusion and ensure that processes follow a planned and consistent approach across all career centers to guide and manage the program. A copy of the LOP must be provided with the CAP.

## WORKFORCE INNOVATION AND OPPORTUNITY ACT

### WIOA ADULT AND DISLOCATED WORKER PROGRAM

*The sample size consisted of 22 Adult and Dislocated Worker participant case files (14 Adults and eight Dislocated Workers).*

*The review did not reveal any Findings or ONIs; however, a common observation is noted under the WIOA Special Projects section below.*

### WIOA YOUTH PROGRAM

*The sample size consisted of 13 WIOA Out-of-School youth participant case files.*

*The review did not reveal any Findings or ONIs; however, a common observation is noted under the WIOA Special Projects section below.*

### WIOA SPECIAL PROJECTS

*The sample size consisted of 21 participant case files for the following special projects: Apprenticeship USA (three); Fostering Opioid Recovery DWG (three) Hurricane Ian DWG (three); Center Training for the Visually Impaired (three); Integrated Services Pilot Project (LCAA) (three); 831-PY 21 At-Risk Floridians – Adult (three).*

*The following issues were observed:*

#### ONI Number WIOA 12.23.03

##### **Non-ITA Occupational Skills Training**

*Applicable reference(s): 20 CFR 680.410-420; WIOA Section 122 (b)(1)(D) & 134 (c); TEGL 13-16; CareerSource Florida AP 90; and Employ Florida Service Code Guide.*

Of the eight Adult Special Project participants enrolled in occupational skills training, three (37.5 percent) were recorded as a service code 300 (Approved Provided ITA) in Employ Florida; however, the training should have been recorded as a service code 328 (Non-Approved Provider – No ITA).

**Note:** According to CSCF staff, payment for the training was recorded in error. The OST was not paid through an ITA but rather through a vendor/contractor reimbursable agreement as outlined in the contract, which was later verified by FloridaCommerce monitoring staff.

**Recurring Issue from Previous Year:** No.

**Risk Impact:** Misapplying and/or incorrectly recording training codes can affect performance reporting and can also be construed to mean that ITAs were used by approved training providers and in demand occupations which were not approved for use of an ITA.

**Required Action:** In addition to the general program CAP requirements, CSCF must provide documentation showing that staff have entered a case note in the file stating that use of and recording an ITA for the participant's training was entered in error. CSCF must also provide an assurance that measures will be taken to ensure OST documentation is maintained in the files and cross-referenced with data entered in the system for accuracy. Documentation of written notification to staff must also be provided to ensure case managers record the correct funding source so that finance can connect the invoice to the participant for payment and recording purposes.

#### COMMON OBSERVATIONS

The following common observations regarding MSGs were noted in the WIOA Adult/DW, WIOA Youth, and the WIOA Special Projects file review.

- Of the 18 Adult/Dislocated Worker case files reviewed of participants enrolled in an education or training program, two (11.1 percent) did not have an MSG recorded in Employ Florida within the applicable program year.
- Of the 10 Youth Worker case files reviewed of participants enrolled in an education or training program, three (30.0 percent) did not have an MSG recorded in Employ Florida within the applicable program year.
- Of the seven special project case files reviewed of participants enrolled in an education or training program, two (28.6 percent) did not have an MSG recorded in Employ Florida within the applicable program year.

For future reference, it is recommended that CSCF provides training to staff to ensure they understand the requirements and intent of MSGs including how to review, document, and timely record results. If technical assistance or training is needed, CSCF should contact the Workforce Training & Coordination unit at [WFSTraining@commerce.fl.gov](mailto:WFSTraining@commerce.fl.gov).

#### TRADE ADJUSTMENT ASSISTANCE PROGRAM

*The sample size consisted of three participant case files. The following issue was identified:*

##### ONI Number TAA 12.23.04

##### Training Benchmarks

*Applicable reference(s):* TEGLs 10-11, 7-13, and 05-15; 20 CFR 618.600-665; and CareerSource Florida AP 107.

Of the three participant case files reviewed, the training benchmarks for one (33.3 percent) participant was not established, recorded in the TAA Program Application in Employ Florida, or reviewed and documented every 60 days as required as goals were reached.

**Recurring Issue from Previous Year:** Yes (Prior year CAP verified; however, noncompliance continues to occur).

**Risk Impact:** Failure to create, review, and accurately update benchmarks in Employ Florida may negatively impact performance results as well as participant completion of planned training services and activities.

**Required Action:** In addition to the general program CAP requirements, CSCF must provide documentation showing that staff have reviewed, verified, and documented the participant's ongoing progress and satisfactory participation in approved training activities if the case file is still active. Because this is a repeat issue, CSCF must

reevaluate the cause and provide a plan of action or process for preventing a recurrence of this issue in the future including documentation of staff training.

Note: For future reference, benchmarks should be reviewed in intervals no greater than 60 days beginning on the training start date and recorded in the participant’s TAA program application training benchmark section in Employ Florida. Supporting documentation such as grades, test scores, instructor’s communication or school progress reports, attendance, class drops, changes, other income from grants, and any resulting employment must also be verified and uploaded to Employ Florida.

**WAGNER-PEYSER PROGRAM**

*The sample size consisted of 45 participant case files (20 job seekers, 15 job orders, and 10 job seeker placements). The following issues were identified:*

**Finding Number WP 12.23.02**

**Placement Verification**  
*Applicable reference(s): 20 CFR 651.10; 20 CFR 680.170; TEGL 19-16; and CareerSource Florida AP 099.*

Of the 10 job seekers placements reviewed, the following issues were identified:

- Three (30.0 percent) were missing documentation verifying the placement and another two (20.0 percent) were missing the job seeker start date in case notes.
- One (10.0 percent) job seeker’s hourly wage for the placement did not match on either the job order case note or the placement entry on the Employ Florida activity service plan.

Additionally, of the 10 job orders reviewed with multiple job seeker placements, one (10.0 percent) did not have case notes entered at the time of verification and recording of the placement. Verification documentation was entered a year after the entry of the placement in Employ Florida.

**Recurring Issue from Previous Year:** No.

**Risk Impact:** Noncompliance with placement guidelines has an impact on performance reporting (Monthly Management Report and other staff reports), as well as erroneous information being recorded in the system if placements are not valid.

**Required Action:** In addition to the general program CAP requirements, CSCF must attest and/or provide documentation with the CAP that the placements and job orders have been reviewed, verified, and documented in case notes in Employ Florida if the job orders are still open. Additionally, CSCF must provide an assurance that verification of placements will occur and case notes will be entered on all job orders and/or the job seeker activity service screen in Employ Florida documenting staff verification of the placement in the future.

**Finding Number WP 12.23.03**

**Job Seeker Permissions and Requirements for Referrals**  
*Applicable reference(s): 20 CFR 651.10; TEGL 19-16; and CareerSource Florida AP 096 and 099.*

Of the 10 job seekers referred by staff to job orders in Employ Florida, three (30.0 percent) were missing full registrations in Employ Florida prior to the referral. One (10.0 percent) was also missing documentation of permission of staff to refer the job seeker to the job order.

Note: For future reference, staff registration of a new job seeker in Employ Florida and referral to job orders by staff have specific guidelines that must be followed such as obtaining the job seeker's permission prior to referring a job seeker to a job order. Job seekers must also have a full application in Employ Florida prior to receiving a staff-assisted referral.

**Recurring Issue from Previous Year:** No.

**Risk Impact:** Failure to document permission of staff registration, staff referrals, or obtaining a full application before participation has an impact on performance reporting and can also lead to erroneous or fraudulent job seeker entry of invalid or false registrations.

**Required Action:** In addition to the general program CAP requirements, CSCF must provide documentation of the efforts made by staff to contact and verify the job seekers' permission to refer to the job order and to complete a full application if the case files are still active. CSCF must also provide an assurance with the CAP that staff will take necessary steps to document permission for all future staff-assisted referrals on the job seeker's Employ Florida account. Additionally, CSCF must provide an assurance that full applications are completed and documented in Employ Florida when staff-assisted referrals are made. Written notification to staff on the requirements must also be provided with the CAP.

#### REEMPLOYMENT SERVICES AND ELIGIBILITY ASSESSMENT PROGRAM

The RESEA program review focused on CSCF's compliance with the requirements of the grant to assist Reemployment Assistance claimants in returning to work faster by connecting claimants/participants with in-person assessments, and reemployment services and opportunities to further their reemployment goals and successful employment outcomes.

***The sample size consisted of five participant case files. The following issue was identified:***

#### ONI Number WP 12.23.05

##### **RESEA Responsibility Statement Form**

*Applicable reference(s):* CareerSource Florida AP 068.

Each participant must have a copy of the RESEA Responsibility Statement form available and signed and dated by the RESEA participant and CSCF staff.

Of the five RESEA participant case files reviewed, two (40.0 percent) of the RESEA Responsibility Statement forms did not include the signature of the CSCF staff person.

**Recurring Issue from Previous Year:** No.

**Risk Impact:** Absence of required CSCF signatures of staff on the RESEA form could impact the participant's ability to attain suitable employment and could also have a bearing on participant funding.

**Required Action:** In addition to the general program CAP requirements, CSCF must provide documentation that the signatures have been obtained from the appropriate parties if the cases are still active. An assurance must also be provided that CSCF staff will take necessary steps in the future to monitor and verify that signatures have been obtained and forms maintained in the case files.



## CAREER CENTER CREDENTIALING

The career center credentialing review focused on ensuring administrative requirements and records were posted and maintained, and that front-line staff had completed all required Florida Certified Workforce Professional Tier I certification and continuing education courses. The review also verified whether an ES Complaint System was in place to process any complaints received.

*The review did not reveal any Findings, ONIs, or Observations.*

## COMPLAINT SYSTEM

*The sample size consisted of 46 complaint logs.*

*The review did not reveal any Findings, ONIs, or Observations.*

## JOBS FOR VETERANS STATE GRANT PROGRAM

*The sample size consisted of 15 participant case files. The following issue was identified:*

### Finding Number JVSG 12.23.04

#### Veteran Service Code Entry

*Applicable reference(s): CareerSource Florida AP 102 and 117; and Employ Florida Service Code Guide.*

Of the 15 veteran case files reviewed:

- One (6.7 percent) did not have entry of the service code V04 (IEP Update) recorded in Employ Florida indicating the IEP was reviewed with the veteran within 30 days of creation and every 30 days thereafter to ensure progress in completing the objectives.
- One (6.7 percent) did not have a service code 168 (Referral for DVOP Follow-Up) entered within two business days of when the DVOP Specialist conducted the follow-up with the veteran.
- Two (13.3 percent) did not have service code V09 (JVSG Consistent Contact) recorded in Employ Florida indicating consistent contact from a DVOP Specialist at least once every 30 days during the review period.

**Recurring Issue from Previous Year:** No.

**Risk Impact:** Failure to screen, identify, and accurately document and record veteran program information could affect veteran service delivery and limit veterans from receiving qualifying services. Additionally, absence of a regular review of a veteran's IEP and progress reduces staff's ability to work effectively and efficiently with veterans in delivering services, tracking employability goals, completion of objectives, and determining what additional steps the veteran is required to do to attain their goals.

**Required Action:** In addition to the general program CAP requirements, CSCF must provide an assurance with the CAP that service codes and corresponding case notes will be timely recorded in Employ Florida and applied correctly whenever a service has been provided. CSCF must also ensure that services are entered according to the deadlines established in guidance. Additionally, DVOP staff must ensure that veterans are contacted every 30 days and that the contact is recorded as a service code V09 and documented in case notes in Employ Florida. DVOP staff must also review and ensure that all initial and subsequent IEPs will be updated within 30 days of creation and, at a minimum, every 30 days thereafter, and that case notes and appropriate service codes will be recorded in Employ Florida identifying all required elements of the service(s) provided.

## IV. FINANCIAL DISCLOSURE REVIEW

The Financial Disclosure review focused on determining CSCF's compliance with financial disclosure requirements as referenced in Sections 112.3145 and 445.07, F.S.; and CareerSource FG-075.

*The review did not reveal any Findings, ONIs or Observations.*

## V. COLLECTION OF DEMOGRAPHIC DATA

The purpose of this section of the review is to determine CSCF's compliance with the nondiscrimination and equal opportunity provisions of 29 CFR Part 37 and FloridaCommerce's Guidelines for Compliance with Section 188 of WIOA regarding Collection of Demographic Data.

*The review did not reveal any Findings, ONIs, or Observations.*

## VI. MANAGEMENT REVIEW PROCESS

The purpose of this review is to determine whether CSCF is implementing requirements associated with local merit staffing responsibilities for FloridaCommerce staff assigned to work under the functional supervision of CSCF, local sector strategy implementation, and local board governance activities.

*The following issue was identified:*

### Finding Number 12.23.05

#### **Local Board Governance New Board Member Orientation**

*Applicable Reference(s): CareerSource Florida AP 110.*

One local board member appointed during the review period did not complete the required orientation training within six months of appointment to the board.

**Recurring Issue from Previous Year:** No.

**Risk Impact:** Orientation training is required for board members to ensure they are aware of policies, procedures, and requirements of the board and board members. Additionally, absence of board membership training may affect board member decision making.

**Required Action:** In addition to the general required CAP actions, CSCF must provide documentation with the CAP that training has been or will be provided to the outstanding board member including a timeline for completion. CSCF must also provide an assurance that all board members will complete orientation and training within six months of appointment to the board in the future. Additionally, CSCF must develop specific procedures, processes, and/or guidelines on board governance requirements and consider developing a matrix of requirements for tracking and timely advising board members of training as well as other requirements and following up to ensure this has been done. A copy of the procedures must be provided with the CAP.

## VII. MANAGEMENT INFORMATION SYSTEMS

The MIS security check focused on the effectiveness of CSCF's information security controls and whether business processes and policies are in place that protect FloridaCommerce data and information technology resources and complies with FloridaCommerce's IT guidelines and the FloridaCommerce/CSCF Grantee-Subgrantee agreement requirements.

*The review did not reveal any Findings, ONIs, or Observations.*

## VIII. TRAINING AND TECHNICAL ASSISTANCE

For questions and/or technical assistance in any of the program review areas, CSCF should contact OSPS at the following email addresses:

- WT – [WTProgram@commerce.fl.gov](mailto:WTProgram@commerce.fl.gov)
- SNAP – [SNAPETProgram@commerce.fl.gov](mailto:SNAPETProgram@commerce.fl.gov)
- WIOA – [WIOA@commerce.fl.gov](mailto:WIOA@commerce.fl.gov)
- TAA – [TAA@commerce.fl.gov](mailto:TAA@commerce.fl.gov)
- WP – [Wagner.Peyser@commerce.fl.gov](mailto:Wagner.Peyser@commerce.fl.gov)
- RESEA – [RESEA@commerce.fl.gov](mailto:RESEA@commerce.fl.gov)
- FLC – [H-2A.JobOrder@commerce.fl.gov](mailto:H-2A.JobOrder@commerce.fl.gov) and [H-2BJobOrder@commerce.fl.gov](mailto:H-2BJobOrder@commerce.fl.gov)
- MSFW – [State Monitor Advocate \(via direct email\)](#)
- JVSG – [VETS@commerce.fl.gov](mailto:VETS@commerce.fl.gov)

Additional training can be requested by sending a [Training Request Form](#) to [WFSTraining@commerce.gov.fl](mailto:WFSTraining@commerce.gov.fl).

## CORRECTIVE ACTION PLAN REQUIREMENTS

A CAP is required to address how CSCF will correct any programmatic and financial management findings and ONIs identified in the report. For the noted deficiencies, required actions and recommendations have been provided to help respond to the issues identified, develop and implement processes that result in positive program practices and performance outcomes, and help to improve the quality and integrity of the data collected.

## IX. ENTRANCE AND EXIT CONFERENCE ATTENDEES:

A joint programmatic and financial monitoring entrance conference with CSCF staff was conducted on February 13, 2023. The programmatic exit conference was conducted on February 17, 2023; however, the financial monitoring exit conference was conducted on October 2, 2023. The entrance/exit conference attendees are listed below:

NAME	Agency	Entrance Conference	Exit Conference
Sharon Saulter	FloridaCommerce (Review Lead)	x	x
Yolanda Garcia	FloridaCommerce	x	x
Sanchez Emanuel	FloridaCommerce	x	x
Barbara Walker	FloridaCommerce	x	x
Terry Wester-Johnson	FloridaCommerce	x	x
Andy Windsor	FloridaCommerce	x	x
Vincent Lynn	FloridaCommerce	x	x
Raymond Isham	FloridaCommerce	x	x
Minerva Figueroa	FloridaCommerce	x	x
Carol Booth	FloridaCommerce	x	x
Katina Williams	FloridaCommerce	x	x
Matthew Yager	FloridaCommerce	x	x
Tameka Austin	FloridaCommerce	x	x
Paul Adams	FloridaCommerce	x	x
Awilda Carozza	FloridaCommerce	x	x
Giana Ronokarijo	CSCF	x	x
Nilda Banco	CSCF	x	x
Mimi Coenen	CSCF	x	x
Leo Alvarez	CSCF	x	x
Kristi Vilardi	CSCF	x	x

The joint monitoring entrance conference with CSCF staff was conducted on February 13, 2023. The financial monitoring exit conference was conducted on October 2, 2023. The entrance/exit conference attendees are listed below:

Robert Meadows	FloridaCommerce	x	x
Chadwick Myrick	FloridaCommerce	x	
Yvette McCollough	FloridaCommerce		x
Kristi Vilardi, Controller	CSCF	x	x
Leo Alvarez	CSCF		x