

MISSISSIPPI DEPARTMENT OF EMPLOYMENT SECURITY
State Policy Number 8, Revised February 2018
WIOA PROGRAMMATIC and FISCAL MONITORING
Workforce Innovation and Opportunity Act (WIOA)

I. SCOPE AND PURPOSE

This policy sets forth requirements for the monitoring of all entities receiving Workforce Innovation and Opportunity Act (WIOA) funds in accordance with Sections 183(a-c) of the Act and Federal regulations 2 CFR Part 200.330 – 200.332, and Federal Acquisition Regulation (FAR) 31.2 of the Final Rule.

Audit Regulations, 2 CFR 200.501-512, shall be applicable for non-profit and for-profit entities who expend \$750,000 a year in federal awards from all sources.

Each Local Workforce Development Area and State sub-recipient shall develop a policy to govern its monitoring activities. This document provides guidelines for developing the policy and describes the minimum elements to be included in the policy.

II. STATE REQUIREMENTS

A. State Monitoring Policy

The Office of Grant Management (OGM) is responsible for monitoring all Local Workforce Development Areas and State sub-recipients. On-site and/or desk reviews will be conducted pursuant to established standard operating procedures to ensure compliance with the WIOA, Federal regulations, State laws, contractual agreements, State policies, OMB circulars, cost principles, and, when applicable, Federal Acquisition Regulations (FAR).

1. Monitoring Review Process

- An on-site and/or desk review is conducted consisting of:
- An entry conference or written notification of desk review, as appropriate, to brief agency officials on the scope of the review and to make appropriate arrangements;
- A review of administrative, fiscal, equal opportunity, and programmatic systems and transactions;
- Performance of test work, based on a review and examination of WIOA records and interviews; and
- An exit conference for on-site reviews to inform agency officials of monitoring results.

2. Monitor the following, as applicable:

- program goals and objectives

- program quality
- procurement
- fiscal accountability
- labor standards
- audit/audit resolution
- actual expenditures against cost categories and limitations
- grievance procedures
- equal opportunity
- provisions of the Americans with Disabilities Act
- eligibility verification as applicable
- property management
- internal monitoring of entity's sub-recipients
- administrative procedures
- program performance
- other programmatic areas
- programmatic accountability

3. Monitoring Report

After each review, a monitoring report will be prepared by OGM detailing the results of the monitoring visit. The report will be completed within three weeks of completion of the review. Indexed working papers will also be prepared to provide supporting documentation for test work performed and for any findings. The monitoring report will be transmitted to the entity for review, and appropriate corrective action will be requested, if necessary.

4. Corrective Action Response

If any findings were noted during the review, a corrective action response will be required within 45 days from date of the monitoring report. Upon receipt of the entity's corrective action plan, the monitors will review the response and comment on the acceptability of the proposed corrective action. If the corrective action plan is deemed acceptable, the file will be closed. If the corrective action plan or any part thereof is unacceptable, additional corrective action shall be requested. The file will remain open until all corrective action has been accepted.

5. Acceptance/Non-acceptance of Corrective Action

Notice of acceptance or non-acceptance of the sub-recipient's proposed corrective action plan will be forwarded by OGM to the sub-recipient within 30 working days of receipt of the plan. If the proposed plan is not accepted, OGM may require submission of a subsequent

plan to be received within 30 days from the date of the notice.

If the subsequent plan is deemed unacceptable, OGM may again request submission of a new plan within a specified timeframe or take other action as deemed appropriate relevant to the circumstances.

6. Monitoring Files

A monitoring file will be maintained by OGM for each monitoring visit or desk review.

7. Follow-up Visits and Verification of Corrective Action

Follow-up visits will be conducted by OGM, if deemed necessary.

8. Unannounced Visits

Unannounced visits may be conducted by OGM, if deemed necessary.

III. LOCAL WORKFORCE DEVELOPMENT AREA/ STATE SUB-RECIPIENT REQUIREMENTS

A. Local Workforce Development Area/State Sub-recipient Monitoring Policy

WIOA Section 107(d)(8) requires the local board, in partnership with the chief elected official, to conduct monitoring with respect to local programs of youth activities authorized under section 129(c), adult and dislocated worker local employment and training activities authorized under section 134(b), (c), and (d), and the one-stop delivery system in the local area.

WIOA Section 184(a) (3&4) and 2 CFR 200 parts 330-332 of the Federal regulations require each recipient and sub-recipient of WIOA Title I funds to conduct monitoring of the WIOA activities of its sub-recipients in order to:

- Determine whether expenditures have been made against the cost categories and within the cost limitations specified in WIOA and Federal regulations;
- Determine whether there is compliance with all applicable requirements; and
- Provide technical assistance as necessary and appropriate.

1. Scope

The Local Workforce Development Area (LWDA) or State sub-recipient shall develop a monitoring policy describing the procedures that will be implemented to ensure compliance with WIOA, Federal regulations, State laws, contractual agreements, State policies, OMB circulars, cost principles, and Federal Acquisition Regulation (FAR).

Local fiscal monitoring of sub-recipients may consist of one of the following: 1) on-site; 2) desk review; 3) both on-site and desk review for the same period. The method used to conduct the monitoring and the frequency required for each shall be based on the LWDA or State sub-recipient's determination of "risk" and other factors which should consider whether the sub-recipient is subject to the Single Audit Act; when the most recent previous on-site review was conducted; previous findings or corrective actions required; etc.

LWDA or State sub-recipient programmatic compliance and equal opportunity monitoring of sub-recipients may consist of one of the following: 1) on-site; 2) desk review; 3) both on-site and desk review for the same period. The method used to conduct the monitoring and the frequency required for each shall be based on the LWDA's determination of "risk" and other factors which should consider the type of WIOA activity performed by the sub-recipients; when the most recent previous on-site review was conducted; previous findings or corrective actions required; the existence of current reviews conducted by the state or its authorized representative that adequately address all criteria in the LWDA or State sub-recipient monitoring instrument, etc.

Monitor the following, as applicable:

- program goals and objectives
- program quality
- procurement
- fiscal accountability
- labor standards
- audit/audit resolution
- actual expenditures against cost categories and limitations
- grievance procedures
- equal opportunity
- provisions of the Americans with Disabilities Act
- eligibility verification as applicable
- property management
- internal monitoring of entity's sub-recipients
- administrative procedures
- program performance
- other programmatic areas
- programmatic accountability

2. Frequency

The policy shall include procedures to ensure monitoring is completed in a

timely manner. Each sub-recipient or State sub-recipient shall be monitored at least once per year during the program year or during the sub-award period.

B. Local Workforce Development Area/State Sub-recipient Monitoring Procedures

1. Annual Monitoring Schedule

The policy shall include procedures to ensure an annual monitoring schedule is prepared. The schedule should include sub-recipient names and addresses, contact numbers, planned dates of reviews, and names of individuals to perform the reviews. Annual monitoring schedules shall be submitted to OGM.

2. Review Notification

The policy shall include procedures to ensure that written notification of the scheduled review is provided to the entity in advance of the actual review, except when unannounced monitoring visits are deemed necessary.

3. Desk Review Instrument

A written desk review monitoring instrument must be prepared and should precede an on-site monitoring visit. This process will ensure that all pertinent records are reviewed prior to each visit. The policy shall describe the procedures for completing a desk review instrument before the on-site visit.

4. Monitoring Instrument

The policy shall include procedures for the development of an objective monitoring instrument for use in monitoring reviews to ensure that pertinent data can be collected and analyzed for all program activities.

5. Documentation of Findings

The policy shall include procedures to ensure findings are adequately documented and include a written description of the deficiency or violation.

6. Monitoring Report

The policy shall include procedures to ensure a monitoring report is prepared following each on-site or desk review. The report should be completed within three weeks of the review and should include the following elements:

- A face page signed by the monitor(s) and the signature of supervisory level staff or the executive director (applicable to on-site visits only);
- The dates of the review and areas covered during the review.
- A listing of findings, if applicable that consists of a narrative description of the deficiency or violation noted; and
- For each finding, a recommendation which sets forth the most appropriate action to correct the deficiency or violation noted.

7. Corrective Action

The policy shall include procedures to ensure monitoring reports are forwarded to the sub-recipient with a transmittal letter. If findings were noted in the report, the transmittal letter shall require a written corrective action plan from the sub-recipient within 45 days from the date of the report.

8. Acceptance/Non-acceptance of Corrective Action

The policy shall describe the procedures that will be used to determine the acceptance or non-acceptance of the sub-recipient corrective action plan. Notification of the determination shall be provided to the sub-recipient within 30 working days of receipt of the proposed corrective action plan.

9. Follow-up Monitoring and Verification of Corrective Action

The policy shall include procedures for follow-up monitoring reviews determined by the risk of the finding and the sub-recipient response to the finding. The policy shall include procedures to determine if corrective action measures taken were adequate to resolve the noted deficiencies.

9. Unannounced Visits

The policy shall describe the procedures for conducting unannounced visits of sub-recipients when such visits are deemed necessary.

10. Monitoring Files

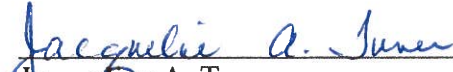
The policy shall include procedures establishing and maintaining the monitoring files. A separate file shall be maintained for each monitoring review. At a minimum, the files shall contain the following records:

- notification of monitoring dates;
- completed desk review instrument;

- signed monitoring report;
- completed monitoring instrument;
- transmittal letter, and if applicable, request for a corrective action plan;
- response from sub-recipient, when appropriate;
- letter to sub-recipient accepting/rejecting corrective action; and
- working paper file to include supporting documentation.

IV. EFFECTIVE DATE

This policy shall be effective as of February 1, 2018.



Jacqueline A. Turner
Deputy Executive Director, CFO