

# Texas Workforce Commission

A Member of Texas Workforce Solutions

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the Public

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Edward Serna  
Executive Director

April 22, 2024

Ms. Lisa McDaniel, Executive Director  
Workforce Solutions North Texas  
1501 Midwestern Parkway, Suite 101  
Wichita Falls, Texas 76302

## Audit Resolution Report

Dear Ms. McDaniel:

Workforce Solutions North Texas (Board) administers the Supplemental Nutrition Assistance Program Employment and Training (SNAP E&T) program. In Fiscal Year 2023, TWC conducted a monitoring review of this program and had one finding, as documented in Monitoring Report #23.03.0001. This letter is about the audit resolution of the finding, as outlined below:

**Finding:**        Ensure SNAP E&T Program Requirements are Followed

The Board did not ensure the service provider followed SNAP E&T program guidelines and regulations for work activities. The following details were noted:

- In all seven (100 percent) applicable case files tested, when form H1822 ABAWD Work Requirement Verification was sent to HHSC to notify of an ABAWDs participation, the date of submittal was not documented in TWIST counselor notes.
- In three out of four (75 percent) applicable files tested, when form H1817 SNAP Information Transmittal was sent to HHSC to request a reconsideration of eligibility, the date of submittal was not documented in TWIST counselor notes. In addition, one case file, the reconsideration entered into TWIST Good Cause tab had the incorrect decision date listed.

Accurate and complete documentation to verify SNAP E&T work activities is necessary to support participant compliance with required hours of participation. Without strict adherence to SNAP E&T directives, there is limited assurance that federal and state funds are expended in accordance with statutory requirements.

### Corrective Action Taken:

The Board has adequate controls in place to ensure SNAP E&T program requirements are followed and adhered to. This includes but not limited to monthly internal QA reviews of all SNAP cases and allowing staff time to make Counselor

Note corrections when needed, in order to ensure deficiencies are addressed timely and program requirements are met. In addition, both the Board and TWC's Workforce TA provided recent monitoring report of this area for the month of March, with significant improvement and acceptable error rates for each of the weaknesses identified. Lastly, the Board provided recent training documentation, along with agenda and sign-in sheet for this area.

Because the corrective actions taken adequately resolves the finding, TWC Monitoring Report #23.03.0001 is closed. We encourage the Board to continue its efforts in following and adhering to SNAP E&T program requirements and guidelines, as this area will be tested during subsequent monitoring reviews.

Thank you for your assistance on this matter. If you have any further questions, please contact Judy Ohn at (512) 354-9616 or [judy.ohn@twc.texas.gov](mailto:judy.ohn@twc.texas.gov).

Sincerely,



Charles E. Ross, Jr.  
Director, Division of Fraud Deterrence and Compliance Monitoring

cc: Kristin Little, Chair, Workforce Solutions North Texas

**United States Department of Health and Human Services**  
Gwendolyn Jones, Regional Program Manager  
Deborah Daniels, Program Specialist  
Alisa Matthews, Program Specialist

Report on the  
Annual Financial  
Monitoring  
Evaluation  
Of the:

# Rolling Plains Management Corporation

In their capacity of, *Child Care* Contractor for the  
**Workforce Solutions North Texas**

February 6 ,2024

**Report Number:** WFSNT 24-06

**Report Type:** FINAL

**Report Issue Date:** **Draft: February 6, 2024**  
Final: February 28, 2024

**Review Type:** Annual *Child Care* financial monitoring evaluation

**Entity Reviewed:** *Rolling Plains Management Corporation, (RPMC)*  
*In their capacity of Child Care Contractor for the*  
**Workforce Solutions North Texas (the Board)**

**Review Period:** December 1, 2022 through October 31, 2023

**Review Conducted by:** **D**iaz, **S**mith, and **A**ssociates  
Anna Rocha-Diaz  
Sujuane Smith  
Donna Richardson, CPA  
Edward Taylor

**Dates of Fieldwork:** Off-site desk review

**Exit Conference:** January 26, 2024

**Report Developed by:** Edward Taylor

## **A**pplicable Definitions

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**Board:** The *North Texas Workforce Development Board Dba Workforce Solutions North Texas* created pursuant to Texas Government Code §2308.253 and certified by the Governor pursuant to Texas Government Code §2308.261.

**Briefing Items:** are general noncompliance conditions that are observed and documented by the monitors based on established law, procedures, or other authoritative guidance. These noncompliance conditions are considered lower risk findings but could potentially result in a higher risk finding based on the nature of the deficiency (i.e., repeat violations, issues indicative of systemic problems). These items while documented in the workpapers may or may not be included in the report. All briefing items are discussed on-site during the review. The determination of report inclusion shall be based on criteria as determined by the Board.

**Disallowed Costs:** Those charges to an award that are determined to be unallowable, in accordance with the applicable Federal cost principles, applicable State rules, regulations, policies or other terms and conditions contained in the award.

**Finding:** an instance where noncompliance with requirements contained in federal or State law, regulation, administrative code, guidance or other promulgations are determined and are considered to be issues that are of high risk that could potentially result in questioned costs and/or impact the integrity of program operations.

**FMGC:** *Texas Workforce Commission Financial Manual for Grants and Contracts*

**Notable Practices** - are informative statements that highlight and recognize positive processes and improvements.

**Observations:** A reportable condition that does not currently have a material effect on internal controls and the accuracy of the financial information. An observation, if not addressed, presents the possibility of a future circumstance of non-compliance and/or internal control weaknesses. Additionally, observations are informative statements or constructive comments made to identify processes that can assist the entity being reviewed improve service delivery and result in positive program outcomes. Observations are not expected to be responded to

**Questioned cost:** A cost that is questioned by the monitor because of a monitoring finding **(1)** that resulted from a violation or possible violation of a provision of a law, regulation, contract, grant, cooperative agreement, or other agreement or document governing the use of Federal funds, including funds used to match Federal funds; **(2)** where the costs, at the time of the monitoring review, are not supported by adequate documentation; or **(3)** where the costs incurred appear unreasonable and do not reflect the actions a prudent person would take in the circumstances.

**Recommendation:** Suggested corrective action(s) for a finding and/or observation identified in a monitoring report. The recommendation, where and when appropriate, should address the cause of the problem, not the problem itself.

# F inancial Monitoring Review Scope

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This annual financial monitoring evaluation of the *Rolling Plains Management Corporation, (RPMC)* was conducted on behalf of the **Workforce Solutions North Texas (the Board)**. The review was performed to assess the reliability of review period fiscal data. Additionally, the review evaluated the degree of compliance with the applicable Board contract(s), policies, laws, regulations, and the adequacy of internal fiscal controls. The following areas/items were examined:

1. **Applicable Contracts:** The following contracts were applicable to this review:
  - 2022-008, CCS FY2023-2, Amend 2, in the amount of \$9,085,728.55, for the period 10/1/2022-10/31/2023
2. **Cash Management:** The following RPMC Bank, bank statements and reconciliations for the accounts for the three-month period ending October 31, 2023.
  - *Operating Account* October through November 2022
  - *Payroll Account* October through November 2022
  - *Herring Bank, RPMC (Baylor, Cottle, F.H.W),*
  - *Crowell State Bank, RMPC 1,*Our review included an evaluation of internal bank reconciliation controls and collateral agreement adequacy, if applicable, for any balances in-excess of FDIC coverage.
3. **Budget and Reporting:** We compared RPMC administration and program expenditures reported to the Board to applicable contract budgets and the RPMC general ledgers for the periods ended September and October 2023. Additionally, we projected expenditures by line item to the end of the current contract period using a *straight-line* method.
4. **Direct Child Care (COVID and Non-COVID):** We selected fifteen (15) Child Care clients from 230 reports for the months of December 2022, May 2023, and September 2023. Our review consisted of an evaluation and/or consideration of the following where applicable.
  - *Client Files*
  - *Provider files for each applicable client*
  - *Billing files for each selected provider*
  - *EFTs for the selected billings*
  - *Listing of TRS and School Ready Providers*
  - *Child Care Policies and Procedures*
  - *CCMS Maximum Rates*
  - *TWIST rate schedule for each provider selected*

5. **Cost Allocation Plan:** We examined the RPMC *Cost Allocation Plan* applicable to the review period.
6. **Payroll:** Payroll documentation for four (4) RPMC employees charged directly and/or indirectly all or in part, to its contracts with the Board was reviewed for the pay periods as follows:

No	PERIOD START	PERIOD END	PAY DATE
1	11/27/2022	12/10/2022	12/16/2022
2	12/11/2022	12/24/2022	12/30/2022
3	12/25/2022	1/7/2023	1/13/2023
4	4/30/2023	5/13/2023	5/19/2023
5	5/14/2023	5/27/2023	6/2/2023
6	5/28/2023	6/10/2023	6/16/2023
7	9/3/2023	9/16/2023	9/22/2023
8	9/17/2023	9/30/2023	10/6/2023

Items reviewed included employee time sheets, pay (rate) authorization documents, job descriptions, forms I-9 and W-4, canceled checks, leave authorizations, and allocation worksheets (where applicable).

7. **Disbursements:** Supporting documentation for forty-five (45), judgmentally selected direct disbursement transactions occurring during the review period was examined.
8. **Audit:** We examined the RPMC *Financial Statements and Independent Auditors Report* for the fiscal years ending November 30, 2021 and 2022. The reports were prepared by *MWH Group PC* and timely issued.
9. **Indirect Costs:** In response to intra-review inquiry the RPMC provided the following responses regarding its use of an *indirect cost rate* to allocate its overhead expenses. Per RPMC: "*RPMC 1<sup>st</sup> opted to use the De Minimis Indirect Rate*"
10. **Procurement:** We examined the RPMC procurement documentation associated with four (4) *micro/small purchase* procurements occurring during the review period.
11. **Insurance:** We examined RPMC insurance policy(s) applicable to the review period.

## Findings

### 1. Disbursement Testing Travel

We examined supporting documentation for forty-five (45), judgmentally selected direct disbursement transactions occurring during the review period. Our sample included four (4) travel transactions. Our review of the travel transactions determined the following exceptions with three (3) of the four (4) tested.

- a) **Travel Transaction 1:** The correct mileage rate was utilized, however there were mileage variances on *reimbursement miles* paid to employee A (Paid 150 miles, should be (s/b) 148.7 miles, Variance \$0.81-over); employee B (Paid 188 miles SB 188.7 miles, Variance \$-0.44 under). **Total Net Variance \$0.38 (over) - Insignificant Variance**
- b) **Travel Transaction 2:** Employee C July 31, 2023 mileage for to attend annual training. The milage reimbursement rate used was 0.66 but s/b 0.655, variance of 0.005 per mile. Paid 170.80 miles, Paid \$112.73, should be \$111.87, Variance \$0.86. **Insignificant Variance**
- c) **Travel Transaction 3:** The milage reimbursement rate used was 0.66 but s/b 0.655, variance of 0.005 per mile. Employee D (Paid \$112.73, Variance \$0.86), Employee F (Paid \$112.79, Variance \$0.92) and Employee G Paid \$112.73, Variance \$0.86). **Total Variance \$2.63 - Insignificant Variance**

Our review determined the variances as outlined in items a-c above. While the individual variances are insignificant the frequency of occurrence dictates this finding.

### Recommendations

RPMC should review its travel transactions to ensure that employees are reimbursed using the correct mileage and milage rate(s). RPMC should, in its response to this report, outline what it will do to ensure travel transactions billed to the Board in the period covered by this financial monitoring review and all periods subsequent thereto are correct. If the cumulative of the RPMC review results in a material variance (as defined by the Board) a method of resolution should be determined by the Board.

#### RPMC Response (02/15/2024):

*RPMC implemented a new payroll processing system in August of 2023. It has been determined that the mileage reimbursement rate was set up incorrectly during the conversion at the rate of \$0.66 per mile not the GSA rate of \$0.655 per mile. Upon notification of this issue, RPMC pulled all mileage reports and reviewed the variances. There was a total of 12 mileage reports paid at the incorrect rate with a total overage*

*of \$5.20 during the contract in question. Six (6) of those reports had overages of less than \$0.10. With the highest overage on one (1) report of \$0.92. RPMC has re-classed \$3.49 of the \$5.20 in question to local funds at the request of DSA. In addition, RPMC has verified that the mileage rate in the automated payroll is currently set to the GSA rate and has the ability to conduct internal reviews with this system by running regular reports. Any discrepancies found during regular monitoring will be corrected by accounting staff.*

*Monitor's Response (2/28/24)*

*DSA applauds the depth, promptness, and comprehensiveness of the corrective action undertaken by RPMC. Accordingly, DSA considers this finding resolved.*

**Observations**

Our financial review of the *Rolling Plains Management Corporation, (RPMC)* evaluated the areas outlined in the Review Scope section of this report and did not determine any reportable observations. Accordingly, no observations are presented.

Report on the  
Annual Financial  
Monitoring  
Evaluation  
Of the:

## Equus Workforce Solutions

In their capacity of, *Workforce and Specialty* Contractor for the  
**Workforce Solutions North Texas**

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February 6, 2024

**Report Number:** WFSNT 24-07

**Report Type:** Final

**Report Issue Date:** February 6, 2024

**Review Type:** Annual *Workforce* financial monitoring evaluation

**Entity Reviewed:** *Equus Workforce Solutions, (EWS)*  
*In their capacity of Workforce Contractor for the*  
***Workforce Solutions North Texas (the Board)***

**Review Period:** December 1, 2022 through October 31, 2023

**Review Conducted by:** **D**iaz, **S**mith, and **A**ssociates  
Anna Rocha-Diaz  
Sujuane Smith  
Donna Richardson, CPA  
Edward Taylor

**Dates of Fieldwork:** Off-site desk review

**Exit Conference:** January 26, 2024

**Report Developed by:** Edward Taylor

## **A**pplicable Definitions

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**Finding:** an instance where noncompliance with requirements contained in federal or State law, regulation, administrative code, guidance or other promulgations are determined and are considered to be issues that are of high risk that could potentially result in questioned costs and/or impact the integrity of program operations.

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**Observations:** A reportable condition that does not currently have a material effect on internal controls and the accuracy of the financial information. An observation, if not addressed, presents the possibility of a future circumstance of non-compliance and/or internal control weaknesses. Additionally, observations are informative statements or constructive comments made to identify processes that can assist the entity being reviewed improve service delivery and result in positive program outcomes. Observations are not expected to be responded to

**Questioned cost:** A cost that is questioned by the monitor because of a monitoring finding **(1)** that resulted from a violation or possible violation of a provision of a law, regulation, contract, grant, cooperative agreement, or other agreement or document governing the use of Federal funds, including funds used to match Federal funds; **(2)** where the costs, at the time of the monitoring review, are not supported by adequate documentation; or **(3)** where the costs incurred appear unreasonable and do not reflect the actions a prudent person would take in the circumstances.

**Recommendation:** Suggested corrective action(s) for a finding and/or observation identified in a monitoring report. The recommendation, where and when appropriate, should address the cause of the problem, not the problem itself.

# F inancial Monitoring Review Scope

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This financial monitoring evaluation of *Equus Workforce Solutions, (EWS)* in its capacity of Workforce Center contractor of the *Workforce Solutions North Texas* (the Board) was performed to assess the reliability of review period fiscal data. Additionally, the review evaluated the degree of compliance with the applicable Board contract(s), policies, laws, regulations, and the adequacy of internal fiscal controls. The following areas/items were examined:

**1. Applicable Contract(s):**

2021-005 WFC PY2023, Various, Period 10/1/22-9/30/23, \$4,750,019.39

2021-005 WFC PY2024, Amend 2, Period 10/1/23-9/30/24, \$3,576,442.68

**2. Cash Management:** The EWS, bank statements and reconciliations for period August through October 2023 were reviewed for the following accounts:

- Arbor E&T LLC, North Texas Support Services *Imprest* account
- Wells Fargo, Account Ending (redacted)

Our review included an evaluation of internal bank reconciliation controls and collateral agreement adequacy, if applicable, for any balances in-excess of FDIC coverage.

**3. Budget and Reporting:** We compared EWS administration and program expenditures reported to the Board to applicable contract budgets and the EWS general ledgers for the periods ended September and October 2023. Additionally, we projected expenditures by line item to the end of the current contract period using a straight-line method.

**4. Cost Allocation Plan, Indirect Cost and Allocated Costs Testing:** *The review of these items is currently being conducted the results therefrom will be issued as an addendum to this report upon completion.*

**5. Disbursements:** Supporting documentation for forty-one (41), judgmentally selected direct disbursement transactions occurring during the review period was examined.

**6. Individual Training Account (ITA):** We examined supporting documents for eight (8) ITA's occurring in and/or applicable to the review period. Documents reviewed include: ITA checklist, Training Authorization Form, WFS Training Agreement, State ETPL, ITA Voucher, and TWIST ITA printout

7. **Payroll:** Payroll documentation for ten (10) EWS employees charged directly and/or indirectly all or in part, to its contracts with the Board was reviewed for the pay periods as follows:

No	Pay Period Start	Pay Period End	Pay Date
1	11/19/2022	12/2/2022	12/9/2022
2	12/3/2022	12/16/2022	12/23/2022
3	12/17/2022	12/30/2022	1/6/2023
4	4/22/2023	5/5/2023	5/12/2023
5	5/6/2023	5/19/2023	5/26/2023
6	5/20/2023	6/2/2023	6/9/2023
7	8/26/2023	9/8/2023	9/15/2023
8	9/9/2023	9/22/2023	9/29/2023
9	9/23/2023	10/6/2023	10/13/2023

Items reviewed included employee time sheets, pay (rate) authorization documents, job descriptions, forms I-9 and W-4, canceled checks, leave authorizations, and allocation worksheets (where applicable).

8. **Audit:** We examined the SEFA's for the fiscal year's ending December 31, 2021 and December 31, 2022. The reports were prepared by *ML Weeks and Company PC* and issued June 29, 2022 and May 30, 2023.
9. **Insurance:** We examined EWS insurance policies applicable to this project for the periods ending July 1, 2022 and July 1, 2023.
10. **On the Job Training Agreement (OJT):** We examined supporting documents for two (2) OJT agreement occurring in and/or applicable to the review period. Documents reviewed include: *OJT/WE checklist, Work Experience Referral, TWIST notes, Timesheets, Work Experience Worksite Agreement, and Work Experience Trainee Agreement*
11. **Cash Equivalents:** We reviewed the physical inventory values of the bus passes, gas cards and incentive cards as of October 31, 2023, ( as prepared by Equus), to the General Ledger. Additionally, from the inventory list of "on-hand" as of December 31, 2023, bus passes, gas cards and incentive cards we randomly selected ten (10) items for physical review. We received copies of the actual physical cards.

12. **Procurement:** We examined the EWS procurement documentation associated with five (5) *micro/small purchase procurements*.

13. **Work Experience:** The following work experience documentation occurring in and/or applicable to the review period was examined for four (4) clients:

- *Worksite Agreements*
- *Timesheets*
- *I-9s*
- *W-4s*
- *Payroll Register/Check Stubs*
- *Applicable Policies*

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*Because of inherent limitations in any system of internal accounting and administrative controls used in administering federal financial assistance programs, errors or irregularities may nevertheless occur and not be detected. Also, projection of any evaluation of the systems to future periods is subject to the risk that procedures may become inadequate because of changes in conditions or that the degree of compliance with the procedures may deteriorate.*

*The work-papers and source documents resultant from this review are maintained by **Diaz Smith and Associates** and are available for inspection with approval by the **North Texas Workforce Development Board** (the Board).*

# **F**inancial Monitoring Review Findings and Observations

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## **Findings**

Our financial review of the *Equus Workforce Solutions, (EWS)* evaluated the areas outlined in the Review Scope section of this report and did not determine any reportable findings. Accordingly, no findings are presented.

## **Observations**

Our financial review of the *Equus Workforce Solutions, (EWS)* evaluated the areas outlined in the Review Scope section of this report and did not determine any reportable observations. Accordingly, no observations are presented.

Report on the Annual  
Program Monitoring  
Evaluation  
Of the Workforce  
Grants Administered  
by:

# Rolling Plains Management Corporation (RPMC)

In their capacity of Child Care Contractor in the *North Texas Workforce  
Development Area*

March 1, 2024

## RPMC RESPONSE

<b>Report Number:</b>	PY24-03
<b>Report Type:</b>	Annual Child Care Program Monitoring Report
<b>Report Status:</b>	Final
<b>Report Issue Date:</b>	March 1, 2024
<b>Report Final Date:</b>	March 19, 2024
<b>Entity Reviewed:</b>	Rolling Plains Management Corporation (RPMC)
<b>Review Type:</b>	Annual Child Care Program Review of the Workforce Grants administered by RPMC and funded by the <i>Workforce Solutions North Texas</i> (the Board)
<b>Applicable Period:</b>	January 1, 2023, through December 31, 2023
<b>Dates of Fieldwork:</b>	Off-site desk review conducted during the month of February and March 2024
<b>Exit Date:</b>	March 7, 2024
<b>Issuance of Draft Report:</b>	March 1, 2024
<b>Review Conducted by:</b>	Diaz, Smith and Associates Rachael Robertson
<b>Report Developed by:</b>	Rachael Robertson Sujuane Smith

## **A**pplicable Definitions

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**AREA OF CONCERN:** A general noncompliance conditions that are observed and documented by the monitors based on established law, procedures, or other authoritative guidance. These noncompliance conditions are considered lower risk findings but could potentially result in a higher risk finding based on the nature of the deficiency (i.e., repeat violations, issues indicative of systemic problems). These items while documented in the workpapers may or may not be included in the report. All areas of concern items are discussed during the review and/or exit conference.

**Board:** North Texas Workforce Development Board dba. *Workforce Solutions North Texas* created pursuant to Texas Government Code§2308.253 and certified by the Governor pursuant to Texas Government Code §2308.261.

**Briefing Item:** A general noncompliance conditions that are observed and documented by the monitors based on established law, procedures, or other authoritative guidance. These noncompliance conditions are considered lower risk findings but could potentially result in a higher risk finding based on the nature of the deficiency (i.e. repeat violations, issues indicative of systemic problems). These items while documented in the workpapers may or may not be included in the report. All briefing items are discussed on-site during the review and/or exit conference.

**Finding:** An instance where noncompliance with requirements contained in federal or State law, regulation, administrative code, guidance, or other promulgations are determined and are issues that are of high risk that could potentially result in questioned costs and/or impact the integrity of program operations.

**Observation:** A reportable condition that does not currently have a material effect on internal controls and the accuracy of the financial information. An observation, if not addressed, presents the possibility of a future circumstance of non-compliance and/or internal control weaknesses.

**Questioned Cost:** A cost that is questioned by the monitor because of a monitoring finding **(1)** that resulted from a violation or possible violation of a provision of a law, regulation, contract, grant, cooperative agreement, or other agreement or document governing the use of Federal funds, including funds used to match Federal funds; **(2)** where the costs, at the time of the monitoring review, are not supported by adequate documentation; or **(3)** where the costs incurred appear unreasonable and do not reflect the actions a prudent person would take in the circumstances.

**Recommendation:** Suggested corrective action(s) for a finding and/or observation identified in a monitoring report. The recommendation, where and when appropriate, should address the cause of the problem, not the problem itself.

# Program Review Purpose

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The scope of the review was from January 1, 2023, to December 31, 2023, and the elements reviewed included but not limited to the following:

- Eligibility
- Data Integrity
- Personal Identifiable Information (PII)
- Attendance
- Early Terminations
- DFPS Referrals
- Parent Share of Cost
- Fraud/Recoupment/PIRTS

The number of files reviewed:

NUMBER OF FILES REVIEWED	
Program Area	NUMBER
Client Services – Eligibility	39
DFPS Referrals	9
Early Terminations	0
Child too Old for Care	4
<b>TOTAL</b>	<b>51</b>

RPMC reported that no children were terminated from care due to excessive absences or nonpayment of parent share of cost.

PIRTS/Fraud cases were not reviewed due to PIRTS system access. The monitor may address cases in follow-up monitoring, at the request of the Board.

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Because of inherent limitations in any system of internal and administrative controls used in administering federal programs, errors or irregularities may nevertheless occur and not be detected. Also, projection of any evaluation of the systems to future periods is subject to the risk that procedures may become inadequate because of changes in conditions or that the degree of compliance with the procedures may deteriorate. The workpapers and source documents resulting from this review are maintained by *Diaz, Smith and Associates* and are available for inspection with approval by the *North Texas Workforce Development Board (the Board)*.

## Program Review Findings:

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1. Income was not calculated correctly in four(4) of the twenty-four (24) applicable files (17%).

**TWIST ID 13600972:** Staff did not include a bonus. The difference would have added \$7.83 to the family income. It did not have an impact on the Parent Share of Cost.

**TWIST ID 14359641:** Staff did not follow the contractor's procedure in calculating bonus pay. The difference would have decreased the family income by \$85.13. It did not have an impact on the Parent Share of Cost. The staff also attempted to contact both the customer and employer to find out the frequency of the bonus pay. The staff processed the application without verification.

**TWIST ID 15501981:** Staff averaged paystubs over seven paystubs, when the customer only submitted six stubs. This caused the income to be less, \$329.23. The staff calculated income at \$2209.28, which matches the Monitor. Contractor Quality team sent the case back to staff to correct the income. The income on NOE was updated to 1893.66, PCOS \$90. The Income Tab on TWIST reflects \$2209.28. Notes are not clear. This had an impact on the Parent Share of Cost.

**TWIST ID 11901826:** Staff did not follow the contractor's procedure in calculating Bonus pay. The difference would have increased the family income by \$208.34. This had an impact on the Parent Share of Cost.

In D-107.d: Bonuses and Lump Sum Payments of the TWC, Childcare Guide, it is stated "...Boards must ensure that, if pay documents indicate that a family member received a bonus or other lump sum during the income calculation period or in the year-to-date amount, staff determines the number of months the bonus or lump sum covers and if there is any expectation of future repetition. In that case, the sum is averaged over the applicable number of months to reach an average monthly figure."

Contractor's procedure Income Calculations further states that "...Client Services staff must contact the client at determination, redetermination or when new employment is reported, to inquire about the possibility of employer-paid bonuses or lump sum payments that would affect household TGMI.

If a paystub reflects a bonus (one-time or ongoing) or a lump sum payment from the employer, the income amount will be calculated as follows:

$$(\text{Sum of the YTD amount(s)}) / \text{the appropriate \# of months}$$

**RECOMMENDATION:** Contractor may consider re-training staff on bonus pay calculations and clarify procedures.

**RPMC Response:** Client Services Procedure-Income Calculations were updated, and Client Services Training is scheduled for March 21, 2024 for retraining on areas recommended

**MONITOR'S RESPONSE:** The corrective action appears sufficient to address the finding. This area will be reviewed during the next monitoring cycle or at the request of the Board. The monitor will assess the effectiveness of the implementation of the corrective action.

**STATUS:** PENDING

## Review Areas of Concern:

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1. In one (1) of the ten (10) applicable files reviewed, staff did not open the activity interruption in TWIST, per D-601.f: Tracking Initial Eligibility for Children Experiencing Homelessness.
2. In two (2) of the thirty-seven (37) files reviewed, the Parent Share of Cost was assessed incorrectly. This was due to an income calculation error.
3. In applicable files, the monitor found that customers that have been employed for more than three months were not required to submit paystubs. In most cases, an Employment Wage Verification (EWV) was used in place of paystubs. In some cases, staff processed less than the required timeframe or with missing stubs. There was little or no mention of the reasoning in the case notes. There was also no explanation of how income was calculated in the case notes.

Recommendation - Review: D-107.a: Determining Average Gross Monthly Family Income from Earnings at Initial Eligibility and at Eligibility Redetermination - "Unless a family member has an insufficient work history or other constraints to obtaining necessary documentation, in accordance with local procedures, Board contractor staff must review the previous three months of income for monthly pay periods, the previous 13 weeks for weekly pay periods, or the previous 12–14 weeks for biweekly pay periods for each family member to determine average earnings and the family's financial situation.....The time frame and type of income documentation used must be clearly explained in TWIST Counselor Notes, which includes number of check stubs used to calculate income. If the number of check stubs differs from what is required based on local policy, a clear explanation of the difference must be included in TWIST Counselor Notes."

4. The Contractor's procedure states that after 2 attempts to verify the employment wage form, the staff can process without verification. (Income Calculations Procedure). According to TWC Childcare guide all work activity and income must be verified.

Recommendation - Reviewing TWC Childcare Guide D-106.e: Income Verification and D-202: Calculating Work Activity.

5. Staff are rounding hours up when given a range of hours on the EWV. Example: Hours vary 25-30 hours per week. The average of which is 27.50. Staff is rounding to 28 hours to calculate income. The Contractor's procedure state that the average hours will be used.

Recommendation - Updating procedure if this is acceptable.

6. In two (2) files, The Eligibility Characteristics 12 - Job Search was not used for Initial Job Search, when opening the Program Detail.

Recommendation - Reviewing: D-1008.g: Initial Job Search.

7. In one (1) Choices Child Care case, the period of eligibility should have continued when a former choices participant returned to Choices. The program detail was opened for another year. Recommend Review of TWC Child Care Guide section D-301.g: Communication between Choices and Child Care Staff - Return to Choices from a recent Choices case closure: If the parent is within a 12-month eligibility period, care continues within that eligibility period, and the open Activity Interruption record is ended.
8. In one (1) Choices Child Care case, form 2510 stated the customer is a TANF Applicant but the program detail shows Choices.

## **Program Review Observations:**

Four (4) of the thirty-one (31) cases reviewed for eligibility had data entry errors.

Errors included but not limited to:

- Misspelled names
- Data errors in the case notes
- Address mismatches between documentation and TWIST, with no mention of the change in case notes.
- Missing program detail information in TWIST

## **Childcare DFPS**

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Nine (9) cases were reviewed to determine if the referrals were made within the three-day requirement and if required information was entered in TWIST as recorded on Form 2054. One case contained an error in the spelling of a child in care.

## **Children too Old for Care**

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Four (4) cases were reviewed to determine if the report was addressed in the case note. The cases were also reviewed to ensure the contractor did not end care, unless at the parents' request. There were no issues of noncompliance identified.

# MONITORING

## SAMPLE

## LISTS

### CLIENT SERVICES – ELIGIBILITY

RECORD	TWIST ID
1.	9445563
2.	12828165
3.	11832870
4.	13909981
5.	884146
6.	13600972
7.	13543917
8.	14359641
9.	1640418
10.	2478578
11.	14762353
12.	14406545
13.	19762026
14.	8330025
15.	8978894
16.	16266128
17.	15501981
18.	18779734
19.	13731657
20.	16373734
21.	10182140
22.	8206518
23.	11901826
24.	15949199
25.	16156089
26.	12809237
27.	13471561
28.	8206652
29.	11469871
30.	12432808
31.	15156480

**CHOICES CHILDCARE**

<b>RECORD</b>	<b>TWIST ID</b>
1.	1948906
2.	11637181
3.	13141147
4.	2909525
5.	20116351
6.	10550184
7.	13646271

**DFPS REFERRALS**

<b>RECORD</b>	<b>TWIST ID</b>
1.	17431355
2.	19689682
3.	11227737
4.	18528134
5.	13155017
6.	9709138
7.	10339597
8.	1980416
9.	11561188

**CHILDREN TOO OLD FOR CARE**

<b>RECORD</b>	<b>TWIST ID</b>
1.	8903418
2.	10410548
3.	755911
4.	2192835

**CITATIONS:**

TWC Child Care Guide

Technical Assistance Bulletin 276 - Child Care Fraud Detection Report Tools—Update

RPMC Procedures

Client Services Procedure: CLIENT ELIGIBILITY

Client Services Procedure: Income Calculations

Client Services Procedure: Redetermination of Services

Multi-Department Procedure: SECURITY OF PERSONALLY IDENTIFIABLE INFORMATION (PII)

Report on the Annual  
Choices and TAA  
Program Monitoring  
Evaluation  
Of the Workforce  
Grants Administered  
by:

**Equus Workforce Solutions**  
in their capacity of Workforce Contractor in the **North Texas**  
**Workforce Development Area**

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April 12, 2024

**EQUUS RESPONSE**

## R eport Demographics

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<b>Report Number:</b>	PY24-02
<b>Report Type:</b>	Annual Choices and TAA Program Monitoring Report
<b>Report Status:</b>	<b>Final</b>
<b>Report Issue Date:</b>	April 12, 2024
<b>Entity Reviewed:</b>	<i>Equus Workforce Solutions</i>
<b>Review Type:</b>	Annual Choices and TAA Program Review of the Workforce Grants administered by Equus and funded by the <b>Workforce Solutions North Texas</b> (the Board)
<b>Applicable Period:</b>	January 1, 2023, through December 31, 2023
<b>Dates of Fieldwork:</b>	Off-site desk review conducted during the month of February and March 2024
<b>Exit Date:</b>	March 5, 2024
<b>Issuance of Draft Report:</b>	<b>March 1, 2024</b>
<b>Review Conducted by:</b>	<b>D</b> iaz, <b>S</b> mith and <b>A</b> ssociates Rachael Robertson
<b>Report Developed by:</b>	Rachael Robertson Sujuane Smith

## pplicable Definitions

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**Area Of Concern:** In general, noncompliance conditions that are observed and documented by the monitors based on established law, procedures, or other authoritative guidance. These noncompliance conditions are considered lower risk findings but could potentially result in a higher risk finding based on the nature of the deficiency (e.g. repeat violations, issues indicative of systemic problems, etc.). These items, while documented in the workpapers, may or may not be included in the report. All areas of concern are discussed during the review and/or exit conference.

**Board:** The *North Texas Workforce Development Board, dba. Workforce Solutions North Texas* created pursuant to Texas Government Code §2308.253 and certified by the Governor pursuant to Texas Government Code §2308.261.

**Briefing Item:** Generally, noncompliance conditions that are observed and documented by the monitors based on established law, procedures, or other authoritative guidance. These noncompliance conditions are considered lower risk findings but could potentially result in a higher risk finding based on the nature of the deficiency (e.g. repeat violations, issues indicative of systemic problems, etc.). These items, while documented in the workpapers, may or may not be included in the report. All briefing items are discussed on-site during the review and/or exit conference.

**Determination:** A weakness in internal controls and/or an instance of non-compliance with applicable policies, laws, and regulations.

**Disallowed Costs:** Those charges to an award that are determined to be unallowable, in accordance with the applicable Federal cost principles, applicable State rules, regulations, policies or other terms and conditions contained in the award.

**Expenditures:** Costs incurred for goods and services that cause decreases in net financial resources.

**Finding:** An instance where noncompliance with requirements contained in federal or State law, regulation, administrative code, guidance or other promulgations are determined and are issues that are of high risk that could potentially result in questioned costs and/or impact the integrity of program operations.

**Observation:** A reportable condition that does not currently have a material effect on internal controls and the accuracy of the financial information. An observation, if not addressed, presents the possibility of a future circumstance of non-compliance and/or internal control weaknesses.

**Questioned Cost:** A cost that is questioned by the monitor because of a monitoring finding **(1)** that resulted from a violation or possible violation of a provision of a law, regulation, contract, grant, cooperative agreement, or other agreement or document governing the use of Federal funds, including funds used to match Federal funds; **(2)** where the costs, at the time of the monitoring review, are not supported by adequate documentation; or **(3)** where the costs incurred appear unreasonable and do not reflect the actions a prudent person would take in the circumstances.

**Recommendation:** Suggested corrective action(s) for a finding and/or observation identified in a monitoring report. The recommendation, where and when appropriate, should address the cause of the problem, not the problem itself.

# P rogram Monitoring Review Purpose and Scope

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## Purpose

The review was conducted to ensure compliance with standards prescribed by the Texas Workforce Commission, the U.S. Department of Labor Employment and Training Administration, TWC Financial Grants and Contracts Manual, program regulations, contractual agreements, Board Plan(s), OMB Circulars, H.B. 1863, Appendix A of the Workforce Board’s contractual agreement with Texas Workforce Commission, WD Letters and other regulatory rules as prescribed by each grant. It focused on appropriateness of training for workforce customers, quality of training processes, training outcomes and other benefits to participants and workforce performance outcomes.

Additionally, future reviews will be assessed based on the effectiveness of corrective action implemented by the Contractor to address findings identified in this monitoring report.

## Scope

We randomly selected and reviewed program files for the review period of January 1, 2023 to December 31, 2023. In some instances, the review went beyond the scope to attain a more accurate understanding of the services and/or activities. The program element(s) reviewed included, but were not limited to, the following:

- |  |   |
|--|---|
| <p>1. CHOICES</p> <ul style="list-style-type: none"><li>• Eligibility</li><li>• Data Integrity</li><li>• Personal Identifiable Information (PII)</li><li>• Documentation/Verification of Participation Hours/Employment</li><li>• Timely and Reasonable Attempts</li><li>• Initiation of Sanction and Good Cause</li></ul> | <p>2. TAA</p> <ul style="list-style-type: none"><li>• EOS</li><li>• Waivers</li><li>• Case Management - Remedial and/or Prerequisite Training</li><li>• Reemployment Plans</li><li>• Benchmarks</li><li>• Service Tracking</li><li>• Data Integrity</li><li>• PII</li></ul> |
|--|---|

The number of files per Program reviewed:

NUMBER OF FILES REVIEWED	
Program Area	NUMBER
Choices	10
TAA	3
TOTAL	13

## Choices

### **FINDINGS:**

1. Participation Hours in TWIST do not match documentation in the case file in one of the 7 files, (17%).

**TWIST ID 19987668:** Verified hours were found in Daily Time Tracker but no supporting documentation was found.

One (1) case was identified as needing improvement (**TWIST ID 2472040**). Although the documents and DTT did match, the case note did not. Correction notes were entered.

**RECOMMENDATION:** Contractor must ensure that participation hours entered in TWIST match the supporting documentation in the case file.

**EQUUS Response:** Staff received technical assistance training, reviewing each error, in a Choices meeting on 04/04/2024. Program policy was reviewed for understanding and staff were trained in accurate procedures for the following elements. Quality Assurance tools have been updated and each element will be reviewed during monthly and quarterly monitoring reviews.

1. **Review Documentation:** Case Manager will thoroughly examine the supporting documentation provided in the case file. This includes any records, time logs, or other relevant materials related to tracking allowable services for Choices.
2. **Cross-Check with TWIST Entries:** Compare the information in the documentation with the hours entered in TWIST. Ensure that the hours recorded in TWIST accurately reflect the actual participation and work performed.
3. **Address Discrepancies:** If any discrepancies are identified (e.g., incorrect hours, missing entries, or inconsistencies), the case manager will promptly address them. This may involve adjusting TWIST entries or providing additional documentation to support the recorded hours.
4. **Document Changes:** Any modifications made to TWIST entries should be well-documented. Case Manager should maintain clear records of any adjustments, explanations, or corrections made to ensure transparency and accountability in the customers file located in SAFE.

**MONITOR'S RESPONSE:** The corrective action appears sufficient to address the finding. This area will be reviewed during the next monitoring cycle or at the request of the Board. The monitor will assess the effectiveness of the implementation of the corrective action.

**STATUS:** PENDING

### **AREAS OF CONCERN:**

1. In one (1) of the nine (9) files, eligibility verification was not found in the file on the date of WOA and Intake. TANF was denied the same day. Staff added correction and TIERS documents the next day and closed the case.
2. In one (1) case, a customer reported a good cause. Staff gave instructions to move forward by contacting the community service contact. In the following note a penalty was initiated and there is no mention of the good cause determination.

Recommendation: Staff should ensure that if a good cause is presented, it is addressed whether it is approved or denied with the customer and reflected in the case notes.

Guidance: Workforce North Texas: Choices Non-cooperation, Good Cause and Penalty Requests - pg. 5 - If Good Cause is NOT Determined – Inform the Family of the Violation, the right to appeal and the procedures to re-instate TANF benefits. Cooperation Notice is NOT sent to HHSC. Case is closed the last day of the month (in the 2nd month of non-cooperation).
3. **PII Violation – In one case a Tiers printout for another customer was found in the file. The monitor sent for immediate action, 2/20/24. Contractor removed from case 2/20/2023.**
4. No participation hours are given for WOA, Intake, or TABE assessment in most cases. Guidance: B-603: TWIST Documentation
5. Form 1836 was not entered in the TWIST TANF History tab, in one case. Guidance: B-307.c: Serving Individuals with Disabilities.

### **Observations:**

- A customer had a reduction in work hours by the employer, the customer stacked activity with job search to meet the minimum requirement. CM indicated that customer's case would be closed after one month if employment hours were not increased to 30. Monitoring is questioning if this meets the goals of the program and the customer. No other options were given or discussed with the customer. Guidance: B-502: Other Choices Program Activities.

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## **TAA**

Three cases were reviewed to determine if all elements were completed. There were no issues of noncompliance identified.

## FILE REVIEW SAMPLE LISTS

### CHOICES MONITORING SAMPLE LIST

TWIST ID	FUND SOURCE
11331106	Choices
2472040	Choices
18996486	Choices
13831429	Choices
20172862	Choices
19691496	Choices
10911155	Choices
5653523	Choices
14910568	Choices
19987668	Choices

### TAA MONITORING SAMPLE LIST

TWIST ID	FUND SOURCE
945620	TAA
3585360	TAA
6470273	TAA

#### CITATIONS:

Texas Workforce Commission Rules

Texas Workforce Commission Choices Guide (2021)

Equus Procedure, Choices Non-Cooperation, Good Cause and Penalty Requests

Report on the Annual  
Program Monitoring  
Evaluation  
Of the Workforce  
Grants Administered  
by:

# Equus Workforce Solutions

In their capacity of Workforce Contractor in the *North Texas Workforce  
Development Area*

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April 12, 2024

# R

eport Demographics

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**Report Number:** PY24-04

**Report Type:** Annual WIOA Program Monitoring Report, including Individual Training Accounts and Support Services.

**Report Status:** Final

**Report Issue Date:** April 12, 2024

**Entity Reviewed:** Equus Workforce Solutions

**Review Type:** Annual WIOA Program Review, including Individual Training Accounts and Support Services Review of the Workforce Grants administered by Equus and funded by the *Workforce Solutions North Texas* (the Board)

**Applicable Period:** January 1, 2023, through December 31, 2023

**Dates of Fieldwork:** Off-site desk review conducted during the month of March 2024

**Exit Date:** April 2, 2024

**Issuance of Draft Report:** March 31, 2024

**Review Conducted by:** Diaz, Smith and Associates  
Rachael Robertson

**Report Developed by:** Rachael Robertson  
Sujuane Smith

# **A**pplicable Definitions

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**AREA OF CONCERN:** A general noncompliance conditions that are observed and documented by the monitors based on established law, procedures, or other authoritative guidance. These noncompliance conditions are considered lower risk findings but could potentially result in a higher risk finding based on the nature of the deficiency (i.e., repeat violations, issues indicative of systemic problems). These items while documented in the workpapers may or may not be included in the report. All areas of concern items are discussed during the review and/or exit conference.

**Board:** North Texas Workforce Development Board dba. *Workforce Solutions North Texas* created pursuant to Texas Government Code §2308.253 and certified by the Governor pursuant to Texas Government Code §2308.261.

**Briefing Item:** A general noncompliance conditions that are observed and documented by the monitors based on established law, procedures, or other authoritative guidance. These noncompliance conditions are considered lower risk findings but could potentially result in a higher risk finding based on the nature of the deficiency (i.e. repeat violations, issues indicative of systemic problems). These items while documented in the workpapers may or may not be included in the report. All briefing items are discussed on-site during the review and/or exit conference.

**Finding:** An instance where noncompliance with requirements contained in federal or State law, regulation, administrative code, guidance, or other promulgations are determined and are issues that are of high risk that could potentially result in questioned costs and/or impact the integrity of program operations.

**Observation:** A reportable condition that does not currently have a material effect on internal controls and the accuracy of the financial information. An observation, if not addressed, presents the possibility of a future circumstance of non-compliance and/or internal control weaknesses.

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**Recommendation:** Suggested corrective action(s) for a finding and/or observation identified in a monitoring report. The recommendation, where and when appropriate, should address the cause of the problem, not the problem itself.

# Program Review Purpose

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## Purpose

The review was conducted to ensure compliance with standards prescribed by the Texas Workforce Commission, the U.S. Department of Labor Employment and Training Administration, TWC Financial Grants and Contracts Manual, program regulations, contractual agreements, Board Plan(s), OMB Circulars, H.B. 1863, Appendix A of the Workforce Board’s contractual agreement with Texas Workforce Commission, WD Letters and other regulatory rules as prescribed by each grant. It focused on appropriateness of training for workforce customers, quality of training processes, training outcomes and other benefits to participants and workforce performance outcomes.

Additionally, future reviews will be assessed based on the effectiveness of corrective action implemented by the Contractor to address findings identified in this monitoring report.

## Scope

We randomly selected and reviewed program files for the review period of January 1, 2023, to December 31, 2023. In some instances, the review went beyond the scope to attain a more accurate understanding of the services and/or activities. The program element(s) reviewed included, but were not limited to, the following:

1. WIOA Eligibility
  - Orientation to Complaint
  - Authorization to Work
  - Documentation of Date of Birth
  - Selective Service, if applicable
  - Family Status
  - Low Income, Disability, or 5% Exemption
  - Dislocation Documents
  - Barriers Documents, if applicable
2. Support Services
  - Allowable
  - Determination of Need
  - Written Justification
  - Documentation of Other Sources of Support Services
  - Allowable Amount Established by the Board
  - Allowable Duration Established by the Board
  - Additional Required documentation
  - Support Services/ Incentives Tracked in TWIST
3. Individual Training Accounts (ITA)
  - Determination of Need
  - Training was on the Target Occupational List
  - Provider was on the Statewide Eligible Training Provider List
  - Allowable Amount Established by the Board
  - Overall Financial Need
  - All Financial Awards tracked in TWIST ITA Tab

The number of files per Program, or Area of Review reviewed:

<b>NUMBER OF FILES REVIEWED</b>	
<b>Program Area</b>	<b>NUMBER</b>
<b>WIOA - Adult</b>	11
<b>WIOA – Dislocated Worker</b>	6
<b>WIOA – Youth</b>	5
<b>Support Services</b>	10
<b>ITA</b>	3
<b>Total</b>	35

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Because of inherent limitations in any system of internal and administrative controls used in administering federal programs, errors or irregularities may nevertheless occur and not be detected. Also, projection of any evaluation of the systems to future periods is subject to the risk that procedures may become inadequate because of changes in conditions or that the degree of compliance with the procedures may deteriorate. The workpapers and source documents resulting from this review are maintained by *Diaz, Smith and Associates* and are available for inspection with approval by the *North Texas Workforce Development Board (the Board)*.

# M

## onitoring Findings, Areas of Concern, and Observations

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### I. WORKFORCE INNOVATION and OPPORTUNITY ACT

#### **FINDINGS:**

*No reportable finding.*

#### **AREAS OF CONCERN:**

1. In one (1) case of the twenty-three (23), Adult eligibility was determined based on income and family status. Customer submitted a family statuses form which included his father. The WIOA certified application also stated a family of 2. Income from the father was not included in the calculation. **TWIST ID 19605204**

#### **Observations:**

1. Several cases were found to have no follow-up, no reengagement, and no explanation of closure.
2. Data Validation/Integrity in TWIST for WIOA Eligibility –
  - a. In several cases, disability was documented as a verbal declaration in the case, but the criteria used for eligibility was based on a different criterion. The Twist data validation notes state verbal declaration of disability.
  - b. In one case, eligibility was based on Basic Skills Deficient, and documentation was gathered for Income. The assessment was found in the case note and under the assessment tab in TWIST, but no documentation was found in the case file. Because eligibility documentation was present for income, the monitor did not recognize as an error.
  - c. In several cases, eligibility was determined based on disability. The self-attestation did not state the nature of the disability but in the certified application the nature of the disability was provided. The characteristic options in TWIST offer “the customer did not disclose” and the contractor should consider this option so that documentation matches the information in TWIST.
  - d. In two cases, discrepancies were found in the name of the customer between documents and TWIST.

**RECOMMENDATION:** Review WIOA Eligibility Documentation Log Guide. The contractor should ensure that only the criteria used and documented for eligibility is correctly entered in the TWIST program detail, and the application. If disability is used a characteristic, it should be noted as such. The contractor should also consider the hardship on the customer by providing additional documentation for other criteria when already determined eligible. When discrepancies are observed in documents, additional information should be noted in the case notes.

## II. SUPPORT SERVICES

### **FINDINGS:**

*No reportable finding.*

### **AREA OF CONCERN:**

1. In one (1) of the ten (10) cases, the determination of need, written justification, and confirmation that an attempt to utilize other community resources was not found in the case file. **TWIST ID 19776572**

## III. INDIVIDUAL TRAINING ACCOUNTS (ITA)

### **FINDINGS:**

Of the one applicable file, the documentation of financial assistance was not found in the file, nor were the amounts documented in the case notes. **TWIST ID: 19603480**

It is stated in The Equus ITA Procedure (4/20/23):

- “1. If a customer uses a Pell Grant, scholarship, or personal funds to supplement training costs, supporting documentation must be received from the participant or training provider verifying the supplemental payment(s) have been made prior to the issuance of a WIOA-funded voucher.
2. Staff must document in TWIST Counselor Notes the amount awarded and what the PELL Grant funds, if applicable, will be used for (i.e. living expenses such as rent, mortgage, utilities, car payments, car insurance, etc., school supplies, childcare, etc.).”

**RECOMMENDATION:** Contractor must ensure that all awards are documented in the case notes and documentation is maintained in the case file. The Contractor procedure does not align with WIOA guidance and Board Policy and should be updated. Contractor should review TWC WIOA Guidelines for Adults, Dislocated, and Youth: Eligibility for Training Services, North Texas Board Policy ITA, and WD letter 14-19 change 2 Workforce Innovation and Opportunity Act: Individual Training Accounts and Training Contracts—Update.

**EQUUS Response:** Staff received technical assistance training, reviewing each error, in a WIOA meeting on 04/20/2024. Program policy was reviewed for understanding and staff were trained in accurate procedures associated with financial aid documentation and proper case notes. The ITA error was associated with ITA policy dated 04/20/2023, instead of the updated ITA policy dated 12/08/2023. The correct ITA policy has been provided to DSA. Quality Assurance tools have been updated and each element will be reviewed during monthly and quarterly monitoring reviews. Weekly WIOA meetings are also held with WIOA team members to address any identified deficiencies from Quality Assurance reviews.

**MONITOR'S RESPONSE:** The corrective action appears sufficient to address the finding. This area will be reviewed during the next monitoring cycle or at the request of the Board. The monitor will assess the effectiveness of the implementation of the corrective action.

**STATUS: PENDING**

**AREAS OF CONCERN:**

1. The financial needs assessment does not reflect WIOA funds being used to offset any deficits.

**RECOMMENDATION:** Review and provide additional training on WIOA Guide Eligibility for Training Services.

**Needs Improvement:**

1. Monitoring is questioning if the statement in the case note "no community resources are available" satisfies the requirement that other attempts to find funding were made. No additional documents were found in the file.

# SAMPLE LISTS

## WIOA – ELIGIBILITY

RECORD	TWIST ID		RECORD	TWIST ID
1.	12981520		13.	15180633
2.	65372		14.	10767698
3.	7994677		15.	8892166
4.	18299754		16.	4391818
5.	4326619		17.	1017873
6.	10220272		18.	18145923
7.	19752558		19.	19776572
8.	4512899		20.	19797358
9.	14184993		21.	19859135
10.	7660527		22.	19605204
11.	8728905		23.	16436625
12.	14687198			

## SUPPORT SERVICES

RECORD	TWIST ID
1.	1948906
2.	11637181
3.	13141147
4.	2909525
5.	20116351

## ITA

RECORD	TWIST ID
1.	19603480
2.	11512907
3.	13613504

### **CITATIONS:**

TWC WIOA Guidelines for Adults, Dislocated Workers, and Youth; TWC WIOA Eligibility Documentation Log for Adults, Dislocated Workers, and Youth Programs; North Texas Board ITA Policy, North Texas Board Support Services Policy. TWC WD Letter 14-19 change 2 Workforce Innovation and Opportunity Act: Individual Training Accounts and Training Contracts. Equus Procedures: ITA, Support Service Guide, Incentives for WIOA, Counselor Notes WIOA Eligibility

Report on the Annual  
Program Monitoring  
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by:

**Equus Workforce Solutions**  
in their capacity of Workforce Contractor in the **North Texas**  
**Workforce Development Area**

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April 12, 2024

**EQUUS RESPONSE**

# R

eport Demographics

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**Report Number:** PY24-01

**Report Type:** Annual SNAP E&T Program Monitoring Report

**Report Status:** Final

**Report Issue Date:** April 12, 2024

**Entity Reviewed:** *Equus Workforce Solutions*

**Review Type:** Annual SNAP E&T Program Review of the Workforce Grants administered by Equus and funded by the *Workforce Solutions North Texas* (the Board)

**Applicable Period:** January 1, 2023, through December 31, 2023

**Dates of Fieldwork:** Off-site desk review conducted during the month of February and March 2024

**Exit Date:** February 27, 2024

**Issuance of Draft Report:** February 28, 2024

**Review Conducted by:** **D**iaz, **S**mith and **A**ssociates  
Rachael Robertson

**Report Developed by:** Rachael Robertson  
Sujuane Smith

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**Briefing Item:** Generally, noncompliance conditions that are observed and documented by the monitors based on established law, procedures, or other authoritative guidance. These noncompliance conditions are considered lower risk findings but could potentially result in a higher risk finding based on the nature of the deficiency (e.g. repeat violations, issues indicative of systemic problems, etc.). These items, while documented in the workpapers, may or may not be included in the report. All briefing items are discussed on-site during the review and/or exit conference.

**Determination:** A weakness in internal controls and/or an instance of non-compliance with applicable policies, laws, and regulations.

**Disallowed Costs:** Those charges to an award that are determined to be unallowable, in accordance with the applicable Federal cost principles, applicable State rules, regulations, policies or other terms and conditions contained in the award.

**Expenditures:** Costs incurred for goods and services that cause decreases in net financial resources.

**Finding:** An instance where noncompliance with requirements contained in federal or State law, regulation, administrative code, guidance or other promulgations are determined and are issues that are of high risk that could potentially result in questioned costs and/or impact the integrity of program operations.

**Observation:** A reportable condition that does not currently have a material effect on internal controls and the accuracy of the financial information. An observation, if not addressed, presents the possibility of a future circumstance of non-compliance and/or internal control weaknesses.

**Questioned Cost:** A cost that is questioned by the monitor because of a monitoring finding **(1)** that resulted from a violation or possible violation of a provision of a law, regulation, contract, grant, cooperative agreement, or other agreement or document governing the use of Federal funds, including funds used to match Federal funds; **(2)** where the costs, at the time of the monitoring review, are not supported by adequate documentation; or **(3)** where the costs incurred appear unreasonable and do not reflect the actions a prudent person would take in the circumstances.

**Recommendation:** Suggested corrective action(s) for a finding and/or observation identified in a monitoring report. The recommendation, where and when appropriate, should address the cause of the problem, not the problem itself.

# P rogram Monitoring Review Purpose and Scope

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## Purpose

The review was conducted to ensure compliance with standards prescribed by the Texas Workforce Commission, the U.S. Department of Labor Employment and Training Administration, TWC Financial Grants and Contracts Manual, program regulations, contractual agreements, Board Plan(s), OMB Circulars, H.B. 1863, Appendix A of the Workforce Board's contractual agreement with Texas Workforce Commission, WD Letters and other regulatory rules as prescribed by each grant. It focused on appropriateness of training for workforce customers, quality of training processes, training outcomes and other benefits to participants and workforce performance outcomes.

Additionally, future reviews will be assessed based on the effectiveness of corrective action implemented by the Contractor to address findings identified in this monitoring report.

## Scope

We randomly selected and reviewed program files for the review period of January 1, 2023 to December 31, 2023. In some instances, the review went beyond the scope to attain a more accurate understanding of the services and/or activities. The program element(s) reviewed included, but were not limited to, the following:

- 1) SNAP
  - Eligibility
  - Noncooperation
    - Penalty
    - Good Cause
  - Data Integrity
  - Participation Hours – Documentation/Verification
  - Forms 1817 and 1822
  - Case Management
  - Support Services
  - Personal Identifiable Information (PII)

The number of SNAP E&T files reviewed was 15.

## Supplemental Nutrition Assistance Program Employment (SNAP)

### **FINDINGS:**

1. Hard copy documentation of participation hours did not match TWIST Daily Time Tracking in four of the fifteen applicable files (27%).

**TWIST ID 790308:** Orientation hours for 6/26/23 were not entered in Daily Time Tracking (DTT)

**TWIST ID 15805504:** Monitor found multiple errors between DTT, Case notes, and documentation. Some corrections were made in case notes however, the monitor found additional errors.

**TWIST ID 2896684:** Orientation hours for 10/17/2023, two hours, were not entered in DTT.

**TWIST ID 9801439:** Documentation for Orientation hours 7/5/23, two hours were missing in the file. Hours were entered in DTT.

In Section B-108.a(1): Verification Procedures for SNAP Recipients Participating in Case-Managed Job Search of the TWC, Supplemental Nutrition Assistance Program Employment and Training Guide, it is stated "...that Workforce Solutions Office staff providing job search services supervises the job search of SNAP E&T participants by:

- reviewing job search worksheets to ensure completion;
- reviewing and providing job leads in WorkInTexas.com; and
- recording the participant's time spent making job search contacts or participating in other job search activities in TWIST."

It further states that in Section B-306.c of the Guide that "Boards must ensure that Workforce Solutions Office staff:

- enters daily hours of participation into TWIST—all other entries in TWIST (including documentation in TWIST Counselor Notes) must support actual participation in allowable SNAP E&T services; and
- uses TWIST Counselor Notes to document any discrepancies between the employment plan and the entries in TWIST."

**RECOMMENDATION:** Contractor must ensure that participation hours entered in TWIST match the supporting documentation in the case file.

**EQUUS Response:** Staff received technical assistance, reviewing each error, in a SNAP training on 02/27/2024. Program policy was reviewed for understanding and staff were trained in accurate procedures for the following elements.

1. **Review Documentation:** Case Manager will thoroughly examine the supporting documentation provided in the case file. This includes any records, time logs, or other relevant materials related to tracking allowable services for the SNAP E&T Program.
2. **Cross-Check with TWIST Entries:** Compare the information in the documentation with the hours entered in TWIST. Ensure that the hours recorded in TWIST accurately reflect the actual participation and work performed.

3. **Address Discrepancies:** If any discrepancies are identified (e.g., incorrect hours, missing entries, or inconsistencies), the case manager will promptly address them. This may involve adjusting TWIST entries or providing additional documentation to support the recorded hours.
4. **Document Changes:** Any modifications made to TWIST entries should be well-documented. Case Manager should maintain clear records of any adjustments, explanations, or corrections made to ensure transparency and accountability in the customers file located in SAFE.

**MONITOR'S RESPONSE:** The corrective action appears sufficient to address the finding. This area will be reviewed during the next monitoring cycle or at the request of the Board. The monitor will assess the effectiveness of the implementation of the corrective action.

**STATUS: PENDING**

2. Work Requirement Verification Form H1822 submitted to HHSC was not submitted timely in two of the fourteen applicable files (14%).

**TWIST ID 3234600:** 1822 was not signed and included the incorrect case number, 3/28/23. Correction note was added 5/18/23.

**TWIST ID 15805504:** 1822 was sent after case closure, 24 days after orientation. The error was noted in the TWIST case notes.

In section A-101.d Ensure Offer of SNAP E&T Activities for ABAWDS of the TWC, Supplemental Nutrition Assistance Program Employment and Training Guide, it is stated “Boards must ensure that Workforce Solutions Office staff sends this notification—the Work Requirement Verification form (Form H1822)—to HHSC within two weeks of initial participation in SNAP E&T activities.”

It is further states in section A-203.a: Form H1822 Work Requirement Verification of the TWC, Supplemental Nutrition Assistance Program Employment and Training Guide, “Boards must ensure that Workforce Solutions Office staff:

- completes Form H1822, Work Requirement Verification;
- enters into TWIST Counselor Notes a statement that Form H1822 was sent to HHSC, including the date Form H1822 was sent to HHSC; and
- keeps a copy of Form H1822 and fax confirmation on file at the Workforce Solutions Office.”

**RECOMMENDATION:** Contractor must ensure that Form H1822 Work Requirement Verification is sent to HHSC within the 14-day requirement period and has correct information.

**EQUUS Response:** On 02/27/2024, SNAP E&T team members received technical assistance training on the correct program policy and procedures for the timely submission of form H1822 to HHSC. This element is being monitored by Quality Assurance during the monthly program monitoring.

1. **Timely Submission:** Within the **14-day requirement period**, the case manager must promptly send the completed Form H1822 to **Health and Human Services Commission (HHSC)**. Delays could result in non-compliance, so adherence to this timeline is crucial.
2. **Accuracy Check:** Before submission, the case manager should meticulously review the form for accuracy. Verify that all information provided is correct, including details related to work requirements, participant identification, and any other relevant data.

3. **Documentation Retention:** Maintain a copy of the submitted Form H1822 for record-keeping purposes. This ensures that the case manager has evidence of compliance and can address any discrepancies if needed. Case managers will also document in TWIST the date that the form is faxed to HHSC.

**MONITOR'S RESPONSE:** The corrective action appears sufficient to address the finding. This area will be reviewed during the next monitoring cycle or at the request of the Board. The monitor will assess the effectiveness of the implementation of the corrective action.

**STATUS:** PENDING

3. Form H1822- Work Requirement Verification was not entered into TWIST Counselor Notes, per instructions, in five of the fourteen applicable files (36%).

**TWIST ID 10992131:** 1822 fax confirmation case note entered 4/25/23, did not have the date the fax was sent. However, a correction note was added 6/14/23.

**TWIST ID 1533976:** No note was entered 3/7/2023. However, a correction note was added 5/19/23.

**TWIST ID 3234600:** No note was entered on 3/28/23. However, a correction note was added 5/18/23.

**TWIST ID 90779:** 1822 case note not in TWIST. However, a correction note was added 7/24/23.

**TWIST ID 9801439:** 1822 case note with required information was not found in TWIST.

In section A-203.a: Form H1822 Work Requirement Verification of the TWC, Supplemental Nutrition Assistance Program Employment and Training Guide, "Boards must ensure that Workforce Solutions Office staff:

- completes Form H1822, Work Requirement Verification;
- enters into TWIST Counselor Notes a statement that Form H1822 was sent to HHSC, including the date Form H1822 was sent to HHSC; and
- keeps a copy of Form H1822 and fax confirmation on file at the Workforce Solutions Office."

**RECOMMENDATION:** Contractor must ensure that case notes for 1822 Work Verification include clear and concise information, per instructions.

**EQUUS Response:** In the SNAP E&T technical assistance training held on 02/27/2024, the following policies were also reviewed with SNAP E&T team members. Understanding of proper procedures was confirmed with staff during this training.

1. **Timely Submission:** Within the **14-day requirement period**, the case manager must promptly send the completed Form H1822 to **Health and Human Services Commission (HHSC)**. Delays could result in non-compliance, so adherence to this timeline is crucial.
2. **Accuracy Check:** Before submission, the case manager should meticulously review the form for accuracy. Verify that all information provided is correct, including details related to work requirements, participant identification, and any other relevant data.
3. **Documentation Retention:** Maintain a copy of the submitted Form H1822 for record-keeping purposes. This ensures that the case manager has evidence of compliance and can address any discrepancies if needed. Case managers will also document in TWIST the date that the form is faxed to HHSC.

**MONITOR'S RESPONSE:** The corrective action appears sufficient to address the finding. This area will be reviewed during the next monitoring cycle or at the request of the Board. The monitor will assess the effectiveness of the implementation of the corrective action.

**STATUS:** PENDING

4. Form H1817-Reconsideration Request was not recorded in TWIST Good Cause tab and Counselor Notes, per instructions, in three of the five applicable file (60%). A smaller sample size may contribute to a higher error rate.

**TWIST ID 15805504, 449022, and 9010127:** Reconsideration was not entered in the Good Cause tab in TWIST.

In section, A-204.a(1): Federal Exemption Criteria and Corresponding Work Codes of the TWC, Supplemental Nutrition Assistance Program Employment and Training Guide, it is stated “Boards must ensure that at the time the recipient informs Workforce Solutions Office staff that he or she is potentially eligible for an exemption, a penalty is not initiated, and a reconsideration is processed immediately.”

It is further said in section A-205: Requests for Reconsideration of the TWC, Supplemental Nutrition Assistance Program Employment and Training Guide, “Boards must ensure that Workforce Solutions Office staff:

- completes and sends HHSC Form H1817 to HHSC requesting that the SNAP recipient’s work registration status be reconsidered;
- records the reconsideration request into TWIST under the Good Cause tab; enters into TWIST Counselor Notes:
  - a statement that Form H1817 was sent to HHSC;
  - the date Form H1817 was sent to HHSC; and
  - the reason for the reconsideration;
- closes out all services, support services, and the SNAP E&T Program Detail;
- ensures that all actual completion dates are entered in the employment plan; and
- keeps a copy of Form H1817 and fax confirmation on file at the Workforce Solutions Office.”

**RECOMMENDATION:** Contractor must ensure that Request for Reconsideration are processed immediately, per instructions.

**EQUUS Response:** Staff were also trained in correct policies and procedures for the following errors in the technical assistance training on 02/27/2024. These elements will be monitored via the Quality Assurance monitoring tool to ensure compliance going forward.

1. **Good Cause Tab in TWIST:**

- **Enter Reconsideration for Employment:** Record the reconsideration for employment in the **Good Cause tab** within TWIST. This step ensures that the request is appropriately documented and tracked.

2. **Form H1817 Completion:**

- **Complete Form H1817:** Fill out **HHSC Form H1817** accurately. Include all relevant details related to the reconsideration request.

- **Fax to HHSC:** Send the completed Form H1817 to **HHSC** via fax. This ensures that the request is officially communicated to the appropriate authorities.
  - **Case File Copy:** Place a copy of the completed Form H1817 in the **case file** for reference and documentation.
3. **Comprehensive Narrative in TWIST Counselor Notes:**
- **Enter Relevant Details:** In **TWIST Counselor Notes**, provide a comprehensive narrative that includes the following information:
    - **Title:** A descriptive subject entry reflecting what was completed (e.g., “Form H1817-Reconsideration Request Faxed to HHSC
    - **What:** Describe the activity being reported (e.g., reconsideration for employment).
    - **When:** Mention the date of the activity (e.g., September 19).
    - **Where:** Specify the document was faxed to HHSC (not TIERS)
    - **Why:** Explain the purpose (e.g., to verify or document service activities).
    - **How:** Specify the communication method (e.g., case manager entered or customer called).
4. **Example Narrative:**
- “Customer requested reconsideration on this date due to obtaining employment. The HHSC Form H1817 was completed and faxed to HHSC, with a copy placed in the case file. Reconsideration was entered in TWIST under the Good Cause tab.”

By following this action plan, case managers will ensure accurate documentation and compliance with instructions for Form H1817-Reconsideration Request.

**MONITOR’S RESPONSE:** The corrective action appears sufficient to address the finding. This area will be reviewed during the next monitoring cycle or at the request of the Board. The monitor will assess the effectiveness of the implementation of the corrective action.

**STATUS:** PENDING

5. The penalty was not initiated by the 4<sup>th</sup> day, in one of the eight applicable files (13%).

**TWIST ID 90779:** The penalty was entered one day late. The noncooperation date in the penalty tab was also entered incorrectly.

In addition, the monitor noted one case that needs improvement but is not counted as an error. **TWIST ID 90779:** The date of noncompliance was unclear. The service Plan stated that the customer must turn in the timesheet for Workfare, no later than 5pm, by 4/30/23 and check in with the staff weekly. The case note does not state a due date for the workfare hours, but weekly attempts to contact the participant were noted. Staff used 5/1/2023 as the date of noncompliance, due to 4/30/23 being a Sunday. In addition, the monitor is questioning if the customer should have been considered noncompliant at the first missed weekly meeting, in accordance with the agreed service plan. Guidance: Snap E&T Guide Noncooperation—a lack of response to outreach notices or a failure to participate in SNAP E&T activities in accordance with the employment plan. Noncooperation begins at the close of business on the date of a missed appointment or a failure to meet participation requirements.

In section, B-113: Noncooperation with SNAP E&T Requirements of the TWC, Supplemental Nutrition Assistance Program Employment and Training Guide, it is stated “Boards must ensure that Workforce Solutions Office staff initiates a sanction request. The request must be entered into TWIST on the fourth day following a mandatory work registrant’s failure to cooperate, unless the SNAP recipient indicates that he or she was unable to participate based on an extenuating circumstance and Workforce Solutions Office staff recommends good cause to HHSC. Day one of the compliance period begins the day the recipient non-cooperates with SNAP E&T requirements.”

It is further said in section B-113.a: Compliance Period, of the TWC Supplemental Nutrition Assistance Program Employment and Training Guide, “Boards must use business days to calculate the compliance period. Holidays are excluded from the compliance period calculations. “

**RECOMMENDATION:** Contractor must ensure that all penalties are initiated by the fourth day of noncompliance or the date of discovery.

**EQUUS Response:** Staff were also trained in correct policies and procedures for the following errors in the technical assistance training on 02/27/2024. These elements will be monitored via the Quality Assurance monitoring tool to ensure compliance going forward.

**1. Timely Identification:**

- **Monitor Compliance:** Regularly review participant records to identify any instances of noncompliance.
- **Prompt Discovery:** As soon as noncompliance is detected, note the date of discovery.

**2. Initiate Penalties:**

- **Fourth Day Rule:** Ensure that all penalties are initiated within **four days** of noncompliance.
- **Documentation:** Document the initiation of penalties clearly, including the reason, date, and relevant details.

**3. Follow-Up:**

- **Track Progress:** Monitor the penalty process to ensure it is processed through HHSC. Case managers will keep a log of penalties initiated to ensure that they have a tracking method to follow up with HHSC on.

**MONITOR’S RESPONSE:** The corrective action appears sufficient to address the finding. This area will be reviewed during the next monitoring cycle or at the request of the Board. The monitor will assess the effectiveness of the implementation of the corrective action.

**STATUS: PENDING**

**AREAS OF CONCERN:**

1. In all applicable cases, no follow up was conducted on penalties. Refer to Guidance: B-404.c: Follow-up after the Initiation of Penalty. Recommendation: Strengthen SNAP E&T Penalty Follow-up procedures.
2. Date of noncompliance was not included in the case note (10992131). Refer to Guidance: B-113: Noncooperation with SNAP E&T Requirements: Boards must ensure that Workforce Solutions Office

staff documents in TWIST Counselor Notes: •the date of noncompliance. Recommendation: Retrain staff on counselor notes in TWIST.

3. Form H1822- Work Requirement Verification was sent after the client was non-compliant (10992131). Refer to Guidance: A-203.a: Form H1822 Work Requirement Verification: The Work Requirement Verification form (Form H1822) is used only for notifying HHSC of an ABAWD's participation in SNAP E&T activities.
4. The client stated a need for transportation assistance to complete job search. "CM explained that gas cards are usually only on a reimbursement basis and only if some part of job search applications/interviews were out in community". This is being questioned by the monitor because it appeared that the client's barriers were not addressed. Refer to Guidance: Support Service Guide (Workforce North Texas) stated prepaid cards are available and B-208: Lack of Support Services.
5. In all applicable cases, Job Retention Service and Support Service were not provided per the TWC SNAP E&T guide. Refer to Guidance: B-115: SNAP E&T Job Retention Services and Support Services. Recommendation: Strengthen job retention and support service procedures.
6. Personal Identifiable Information Violation (3234600) – A Tiers printout for another customer was found in a file. This was sent to the contractor for immediate action. Contractor removed from case 2/20/2024.

**Optional EQUUS Response:** All components and errors of this audit were reviewed with staff during the technical assistance training held on 02/27/2024. Staff received training on the policies and correct procedure associated with each error. All Quality Assurance monitoring tools have been updated to ensure compliance with the elements in this audit.

**Observations:**

- Staff is inconsistent with how Form H1822- Work Requirement Verification is completed. Refer to <https://www.hhs.texas.gov/regulations/forms/1000-1999/form-h1822-abawd-et-work-requirement-verification>.
- Staff is inconsistent with documenting the preferred method of contact (PMOC). If the PMOC is documented on E&T forms/service plans and the client provided updated information at intake or after, an updated case note should be added with the current information and an explanation.
- Staff refers to HHSC as TEIRS when documenting communications in case notes. This includes Work Verification and Reconsideration case notes.

# FILE REVIEW SAMPLE LISTS

## CHART A

### SNAP MONITORING SAMPLE LIST

TWIST ID	FUND SOURCE
10992131	SNAP E&T ABAWD
790308	SNAP E&T ABAWD
15805504	SNAP E&T ABAWD
1533976	SNAP E&T ABAWD
2896684	SNAP E&T ABAWD
19200835	SNAP E&T ABAWD
3234600	SNAP E&T ABAWD
19863235	SNAP E&T ABAWD
291177	SNAP E&T ABAWD
449022	SNAP E&T ABAWD
9801439	SNAP E&T ABAWD
90779	SNAP E&T ABAWD
4998123	SNAP E&T ABAWD
9010127	SNAP E&T ABAWD
15697278	SNAP E&T ABAWD

**CITATIONS:**

Texas Workforce Commission Rules – Chapter 813

Texas Workforce Commission SNAP Guide (March 2022 and February 2023)

WD Letter 06-13 and Applicable Changes – Documenting Services and Participant Contact in The Workforce Information System of Texas (TWIST) Counselor Notes



Summary of Monitoring by Center April 2024

Workforce Center Contractor: Equus Workforce Solutions

INTERNAL MONITORING REPORT	PERIOD	ACCURACY RATE	FINAL ACCURACY RATE	Disallowed Cost
CHOICES Noncooperation-100%	2024.02	67%	67%	None
CHOICES Work Activities-100%	2024.02	100%	100%	None
PROCUREMENT REVIEW-100%	2023.Q4	96%	99%	None
SNAP Non-Cooperation-100%	2024.02	96%	96%	None
SNAP Work Activities-100%	202	84%	93%	None
SUPPORT SERVICES REVIEW-100%	2024.02	97%	99%	None
WIOA CASE NOTE REVIEW-100%	2024.02	65%	73%	None
WIOA Data Validation, MSG, Credential-100% (replaces WIOA CM)	2023.Q4	78%	80%	None
WIOA ELIGIBILITY REVIEW-100%	2024.02	96%	100%	None

# Child Care QA Report -Jan 2024 to Feb 2024

Friday 4/19/24

The Quality Assurance (QA) process is an in-house, case file auditing process that involves a preliminary QA audit and a final QA audit for any case being determined eligible for child care services.

## Quality Assurance Numbers

Total Cases Reviewed	273	Average Monthly Accuracy rate	98.58%	100% Accuracy for all cases	Disallowed Cost	\$0.00	
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