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April 17, 2025

Monitoring Committee Meeting Notice

Members of the Monitoring Committee will meet on **Tuesday, April 22, 2025, at 3:30 pm via Zoom** link below.

Join Zoom Meeting

<https://us06web.zoom.us/j/86511670631?pwd=Rwt0D59b7GEVx7GneccKuzkd0V15gS.1>

Meeting ID: 865 1167 0631 Passcode: 375901 One tap mobile +13462487799

AGENDA

1. Call to order and introductions – Rhonda Schreiber, Chair
2. TWC TAPs, EO Monitoring



North Texas_TAP
Lift_Youth EE Q2.pdf



North Texas_TAP
Lift_Youth Median C

3. DSA Financial and Program Reports



DSA FY25 Equus
Financial Monitoring



DSA FY25 Rolling
Plains Financial Mor



DSA Equus
Workforce Program



DSA RPMC CCS
Program Monitoring

4. Review summary of Workforce Center reviews



Summary of
Monitoring by Cent

5. Review summary of Child Care reviews



CCAS Monitoring
Committee Report 2

6. Other discussion
7. Next meeting date to be determined with email poll.
8. Adjourn

Texas Workforce Commission

A Member of Texas Workforce Solutions

Bryan Daniel, Chairman
Commissioner Representing
the Public

Alberto Treviño III
Commissioner Representing
Labor

Joe Esparza
Commissioner Representing
Employers

Edward Serna
Executive Director

April 4, 2025

Via Email

Email: lisa.mcdaniel@ntxworksolutions.org

Mrs. Lisa McDaniel
Executive Director
North Texas Workforce Development Board
dba Workforce Solutions North Texas
1501 Midwestern Parkway, Suite 101
Wichita Falls, Texas 76302

RE: Technical Assistance Plan

Dear Ms. McDaniel:

On April 5, 2024, the North Texas Workforce Development Board (Board) entered into a Technical Assistance Plan (TAP) to improve its Board Contract Year 2024 (BCY 2024) contracted target for the Workforce Innovation and Opportunity Act (WIOA) Youth Employed/Enrolled performance measure.

In accordance with the TAP's requirements, the Board has:

- met the BCY 2024 WIOA Youth Employed/Enrolled Q2 measure as of the end-of-year Monthly Performance Report (released February 2025); and
- implemented all the TAP's provisions.

Consequently, this TAP is lifted. Board staff has been positive and cooperative in working with Workforce Development Division staff to implement the TAP's requirements. TWC encourages the Board to sustain its efforts for continuous improvement.

Lisa McDaniel

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April 4, 2025

If you have questions, please contact your assigned technical assistance staff member, Norma Olivares, at WIOATechnicalAssistance@twc.texas.gov.

Sincerely,



Mary York

Director

Workforce Development Division

cc: Rhonda Schreiber, Board Chair, North Texas Workforce Development Board
Bryan Daniel, Chairman and Commissioner Representing the Public, TWC
Alberto Treviño III, Commissioner Representing Labor, TWC
Joe Esparza, Commissioner Representing Employers, TWC
Edward Serna, Executive Director, TWC
Les Trobman, General Counsel, TWC
Chuck Ross, Director, Fraud Deterrence and Compliance Monitoring Division, TWC

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Bryan Daniel, Chairman
Commissioner Representing
the Public

Alberto Treviño III
Commissioner Representing
Labor

Joe Esparza
Commissioner Representing
Employers

Edward Serna
Executive Director

April 4, 2025

Via Email

Email: lisa.mcdaniel@ntxworksolutions.org

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

RE: Technical Assistance Plan

Dear Ms. McDaniel:

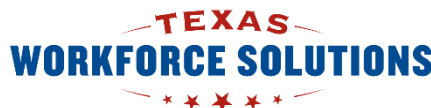
On April 5, 2024, the Texas Workforce Commission placed the North Texas Workforce Development Board (Board) on a Technical Assistance Plan (TAP) for failure to meet the following contracted Workforce Innovation and Opportunity Act (WIOA) Youth Median Earnings Q2 performance measure.

This letter serves as an official notification that the Texas Workforce Commission (TWC) will lift the current TAP for your Board effective immediately. This decision comes after careful review of the Board's performance data, particularly the recent end-of-year Monthly Performance Report released on February 20, 2025. While we acknowledge your team's ongoing efforts, the report indicates that your Board has not yet met this WIOA performance measure. However, because of the delays in WIOA reporting, this TAP will be lifted.

TWC remains committed to supporting your Board's success. We believe that continued collaborative work will be most effective in achieving your program goals. Therefore, we will continue to offer ongoing technical assistance to your Board to help you meet the WIOA performance measure in the future.

Board staff has been positive and cooperative in working with Workforce Development Division staff. TWC encourages the Board to sustain its efforts for continuous improvement.

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Relay Texas: 800-735-2989 (TTY) and 711 (Voice).



Lisa McDaniel

Page 2

April 4, 2025

If you have questions, please contact your assigned technical assistance staff member, Norma Olivares, at WIOATechnicalAssistance@twc.texas.gov.

Sincerely,



Mary York

Director

Workforce Development Division

cc: Rhonda Schreiber, Board Chair, North Texas Workforce Development Board
Bryan Daniel, Chairman and Commissioner Representing the Public, TWC
Alberto Treviño III, Commissioner Representing Labor, TWC
Joe Esparza, Commissioner Representing Employers, TWC
Edward Serna, Executive Director, TWC
Les Trobman, General Counsel, TWC
Chuck Ross, Director, Fraud Deterrence and Compliance Monitoring Division, TWC

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

April 1, 2025

Report Number: WFSNT 25-05

Report Type: **Final**

Report Issue Date: April 1, 2025

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: November 1, 2023 through January 31, 2025

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: March 25, 2025

Report Developed by: Sujuane Smith

Applicable Definitions

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

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 PY2024, Amend #s 1-8, Period 10/1/23-9/30/24, \$3,620,476.64
2021-005 WFC PY2025, Amend 1, Period 10/1/24-9/30/25, \$5,591,790.89

2. Cash Management: The EWS, bank statements and reconciliations for the months ended September 2024, November 2024, and December 2024 were reviewed for the following accounts:

- Wells Fargo, Account Ending (Account Closed October 2024)
- Bank of America, Account Ending (New Operation Account)

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. 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.*

4. Disbursements: Supporting documentation for forty (40), judgmentally selected direct disbursement transactions occurring during the review period were examined.

5. Individual Training Account (ITA): We examined supporting documents for ten (10) 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

6. **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	2/24/2024	3/8/2024	3/15/2024
2	3/9/2024	3/22/2024	3/29/2024
3	3/23/2024	4/5/2024	4/12/2024
4	7/27/2024	8/9/2024	8/16/2024
5	8/10/2024	8/23/2024	8/30/2024
6	8/24/2024	9/6/2024	9/13/2024
7	12/28/2024	1/10/2025	1/17/2025
8	1/11/2025	1/24/2025	1/31/2025
9	1/25/2025	2/7/2025	2/14/2025

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. **Audit:** We reviewed the SEFA for the eight months ended June 30, 2023, and have included that review in our workpaper. The report was prepared by ML Weeks and Company PC and issued January 12, 2024.
8. **Insurance:** We examined EWS insurance policies applicable to this project for the periods ending July 1, 2024 and July 1, 2025.
9. **On the Job Training Agreement (OJT):** There were no OJTs during our review period.
10. **Cash Equivalents:** We reviewed the physical inventory values of the bus passes, gas cards and incentive cards as of December 31, 2024, (as prepared by Equus), to the General Ledger. For this review, we did not randomly select bus passes, gas cards, or incentive cards from the "on-hand" inventory list, as this area has historically tested clean. We will resume our "on-hand" testing in the next review.
11. **Procurement:** We examined the EWS procurement documentation associated with one (1) *micro/small purchase* procurement.

12. **Work Experience:** The following work experience documentation occurring in and/or applicable to the review period was examined for one (1) client who did not participate during the review period:

- *Worksite Agreements*
- *Applicable Policies*

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).*

Financial Monitoring Review Findings and Observations

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.

Brief Items

Our financial review of the *Equus Workforce Solutions, (EWS)* evaluated the areas outlined in the Review Scope section of this report and did determine briefing items in the areas of ITAs and Disbursements.

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

March 27 ,2025

Report Number: WFSNT 25-04

Report Type: FINAL

Report Issue Date: March 27, 2025

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: November 1, 2023 through January 31, 2025

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: None Required

Report Developed by: Sujuane Smith

Applicable Definitions

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

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 PY2024, Amend 1 - 6, in the amount of \$9,133,462.58, for the period 10/1/2023-10/31/2024
 - 2022-008, CCS PY2025, Amend 1 - 2, in the amount of \$9,771,307.00, for the period 10/1/2024-10/31/2025

2. **Cash Management:** The following RPMC Bank, bank statements and reconciliations for the account for the three-months ending our review period.
 - *Operating Account* November through January 2025

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. **Direct Child Care:** We selected fifteen (15) Child Care clients from 230 reports for the months of February 2024, July 2024, and December 2024. 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*

4. **Cost Allocation Plan:** We examined the RPMC *Cost Allocation Plan* applicable to the review period.

5. **Payroll:** Payroll documentation for four (6) 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	12/24/2023	1/6/2024	1/12/2024
2	1/7/2024	1/20/2024	1/26/2024
3	1/21/2024	2/3/2024	2/9/2024
4	6/23/2024	7/6/2024	7/12/2024
5	7/7/2024	7/20/2024	7/26/2024
6	7/21/2024	8/3/2024	8/9/2024
7	12/22/2024	1/4/2025	1/10/2025
8	1/5/2025	1/18/2025	1/24/2025
9	1/19/2025	2/1/2025	2/7/2025

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).

6. **Disbursements:** Supporting documentation for thirty-one (31), randomly selected disbursement transactions occurring during the review period, were examined.
7. **Audit:** We examined the RPMC *Financial Statements and Independent Auditors Report* for the fiscal years ending November 30, 2023. The reports were prepared by *MWH Group PC* and timely issued.
8. **Indirect Costs:** RPMC uses the De Minimis Indirect Rate to allocate its overhead expenses.
9. **Procurement:** We examined the RPMC procurement documentation associated with four (4) *micro/small purchase* procurements occurring during the review period.

Financial Monitoring Review Findings and Observations

Findings

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 findings. Accordingly, no findings are presented.

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
Program Monitoring
Evaluation
Of the Workforce
Grants Administered
by:

Equus Workforce Solutions

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

April 9, 2025,
Amended April 15, 2025

EQUUS RESPONSE

Report Number: PY25-01.2

Report Type: Annual Workforce Program Monitoring Report

Report Status: Final

Final Report Issue Date: April 9, 2025, amended April 15, 2025

Entity Reviewed: Equus Workforce Solutions

Review Type: Annual Workforce Program Review of the Workforce Grants administered by EQUUS Workforce Solutions and funded by the *Workforce Solutions North Texas* (the Board)

Applicable Period: January 1, 2024, through December 31, 2024

Dates of Fieldwork: Off-site desk review conducted during the month of February 2025

Exit Date: March 6, 2025

Issuance of Draft Report: March 21, 2025

Contractors Response: March 27, 2025

Review Conducted by: Diaz, Smith and Associates
Rachael Robertson

Report Developed by: Rachael Robertson
Sujuane Smith

Applicable Definitions

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

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, 2024, to December 31, 2024. 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. CHOICES

- Eligibility
- Data Integrity
- Personal Identifiable Information (PII)
- Documentation/Verification of Participation Hours/Employment
- Timely and Reasonable Attempts
- Initiation of Sanction and Good Cause

2. TAA

- EOS
- Waivers
- Case Management - Remedial and/or Prerequisite Training
- Reemployment Plans
- Benchmarks
- Service Tracking
- Data Integrity

3. SNAP E&T

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

4. 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

5. 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

6. 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

7. RESEA

- The claimant received an invitation letter from the Board with the RESEA Babel notice,
- Claimant scheduled for RESEA one-to-one appointment no sooner than seven (7) days to allow for mailing and not later than twenty-one (21) days from the date the scheduler ran after the claimant was added to the outreach pool
- All three methods of communication for outreach appointment reminder used and document in the case note
- The claimant received the following required services on the same day during the Initial RESEA appointment
- UI Eligibility Review Form completed, uploaded to the customer's profile
- Work search logs for the prior two weeks reviewed and uploaded profile
- Client Labor Market Information (CLMI) form completed and uploaded profile
- All RESEA services entered into WIT within seven (7) calendar days from the scheduled RESEA initial appt. date
- Individual Reemployment Plan contain all the goals outlined in the guide and complete
- WF-42 sent in a password or encrypted protected email

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

NUMBER OF FILES REVIEWED	
Program Area	NUMBER
Choices	17
TAA	2
SNAP E&T	27
WIOA – Adult 8	14
WIOA – Dislocated Worker 4	
WIOA – Youth 2	
Support Services	8
ITA	2
RESEA	12
TOTAL	82

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)*.

Choices

FINDINGS:

1. The Timely and Reasonable Attempt (TRA) process was not followed in eight of the fifteen files, (53.33 % error rate).
 - **STATE ID 150822669:** Staff did not enter the correct noncompliance date in the penalty tab nor the case note.
 - **STATE ID 166061841:** The date of TRA and the noncompliance date is not in the case notes.
 - **STATE ID 169330565:** The date TRA was conducted was not identified in the case note.
 - **STATE ID 100964765:** The case notes do not identify the noncompliance date.
 - **STATE ID 167805742:** The case notes do not state the date TRA was given.
 - **STATE ID 50961470:** The date TRA was conducted was not identified in the case note.
 - **STATE ID 10749896:** Noncompliance date was not identified in the case notes
 - **STATE ID 167410061:** Noncompliance date was not identified in the case notes

Reference: Texas Workforce Commission Choices Guide states in Section B-803: Timely and Reasonable Attempt for Failure to Meet Participation Requirements *“Boards must ensure that Workforce Solutions Office staff documents the following:*

- *The date of identification of noncompliance*
- *The date of the timely and reasonable attempt, which should be no more than two days from the date of non-compliance, to contact the Choices participant in Case Notes.”*

RECOMMENDATION: Contractor must ensure that the date of the TRA and the date of noncompliance are in the case notes. To address the error the contractor should implement the following recommendations:

1. **Training and Refresher Courses:** Conduct regular training sessions and refresher courses for staff to ensure they understand the importance of accurately documenting the noncompliance date and the TRA date in the case notes.
2. **Standardized Templates:** Implement standardized templates for case notes that include mandatory fields for the noncompliance date and the TRA date. This can help ensure that these critical pieces of information are always recorded.
3. **Regular Audits and Reviews:** Schedule regular audits and reviews of case files to identify any missing information and address it promptly. This can help catch errors early and provide opportunities for corrective action.
4. **Automated Reminders:** Utilize the case management system to set up automated reminders for staff to enter the noncompliance date and TRA date. This can help reduce the likelihood of these dates being overlooked.
5. **Clear Guidelines and Checklists:** Provide clear guidelines and checklists for staff to follow when documenting case notes. This can serve as a quick reference to ensure all necessary information is included.

EQUUS Response: Staff are scheduled to have technical assistance training on April 4th, 2025, to review each error. Program policy will be reviewed for understanding and staff will be 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 WIT Entries: Compare the information in the documentation with the hours entered in WIT . Ensure that the hours recorded in WIT 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 WIT entries or providing additional documentation to support the recorded hours.
4. Document Changes: Any modifications made to WIT 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
5. Resources reviewed: Choices Desk Aids to include TRA Desk Aid and Choices Guide

MONITOR'S RESPONSE: The corrective action appears sufficient to address the cases. 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 corrective action.

STATUS: PENDING

AREAS OF CONCERN:

1. In one (1) of the fourteen (14) files, Participation Hours in Work in Texas (WIT)/TWIST are Supported with Documentation in Case Files (7.14% error rate). **STATE ID 167410061** - Verified hours for Unsubsidized Employment do not match the timesheet for October 2024. The conversion from time to decimal was done incorrectly. This created a difference of 10 mins. In addition, the Job Search log for October 8, 2024, does not match WIT tracker, giving the client an additional 2 hours. *This area was a Finding during the last review, the finding is considered resolved, however the contractor should continue to focus on improvements.*

Reference: Texas Workforce Commission Choices Guide states in section B-601: Documentation and Verification of Participation Activities *“Each participation activity has specific documentation and verification requirements. Boards must ensure that Workforce Solutions Office staff members document and verify all participation activities in accordance with this guide and enter the documentation and verification into the WorkInTexas.com Attendance Tracker.”*

RECOMMENDATION: Contractor must ensure that hours are entered accurately in Work in Texas Attendance Tracker. In addition, the Contractor should consider implementation of the following:

1. **Ensure Accurate Conversion of Time to Decimal:** Contractor must verify that the conversion of time to decimal is done correctly to prevent discrepancies. Regular training sessions on accurate time conversion methods should be conducted for staff.
2. **Cross-Check Job Search Logs:** Contractor should implement a process to cross-check job search logs with the Work in Texas (WIT) tracker to ensure consistency. Any discrepancies should be addressed immediately.
3. **Regular Audits:** Conduct regular audits of participation hours and documentation to identify and correct errors promptly. This will help maintain accuracy and compliance with the Texas Workforce Commission Choices Guide.

EQUUS Response: Staff are scheduled to have technical assistance training on April 4th, 2025, to review each error. Program policy will be reviewed for understanding and staff will be 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 WIT Entries:** Compare the information in the documentation with the hours entered in WIT . Ensure that the hours recorded in WIT 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 WIT entries or providing additional documentation to support the recorded hours.

4. **Document Changes:** Any modifications made to WIT 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

5. **Resources/Desk Aids review-**Calculation Sheet, Timesheet Conversion Decimal to HHMM, Choices Guide

2. In two (2) of the fifteen (15) files, the penalty was not initiated timely (13.33 % error rate).
 - **STATE ID 100964765:** The noncompliance date was identified as March 18, 2024, by the monitor. The last day to enter the penalty was March 25, 2024. The penalty was entered one day late.
 - **STATE ID 167410061:** The noncompliance date was identified as November 4, 2024, by the monitor. The last day to enter the penalty was November 12, 2024. The penalty was entered 3 calendar days late.

Reference: Texas Workforce Commission Choices Guide states in section B-803: Timely and Reasonable Attempt for Failure to Meet Participation Requirements *“By the seventh calendar day*

from the date of noncompliance, the Choices participant is required to be either fully participating, been granted good cause, or a penalty has been initiated.

RECOMMENDATION: Contractor must ensure that if the client is noncompliant the penalty is entered within the required timeframe.

EQUUS Response: Staff are scheduled to have technical assistance training on April 4th, 2025, to review each error. Program policy will be reviewed for understanding and staff will be 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 WIT Entries: Compare the information in the documentation with the hours entered in WIT . Ensure that the hours recorded in WIT 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 WIT entries or providing additional documentation to support the recorded hours.

4. Document Changes: Any modifications made to WIT 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

5. Resources/Desk Aids reviewed—TRA Desk Aid, Participation Requirement Desk Aid, Choices Guide

TAA

Two cases were reviewed to determine if all elements were completed. *No reportable finding.*

Supplemental Nutrition Assistance Program Employment and Training (SNAP E&T)

FINDINGS:

1. Hard copy documentation of participation hours did not match TWIST Daily Time Tracking in three (3) of the nineteen (19) applicable files (15.79 % error rate). This was a finding during the last review with a 27% error rate.

- **STATE ID 169329986:** Hours entered for service 605-Job Search for August 23, 2024, and August 24, 2024, were not entered into attendance tracking correctly. Hours for Job readiness was entered incorrectly in Attendance Tracking. Hours were also entered multiple times under different services in August. Not all Job search logs were signed by staff.

- **STATE ID 168017946:** September week 1 hours are unclear and do not match attendance tracking.
- **STATE ID 161387435:** Hours of December week 5 were not entered in the attendance tracker, and no case note was found. Document found in file.

Reference: 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 *“Boards must ensure 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 WorkInTexas.com.”*

It further states in Section B-306.c: Monitoring Participation that *“Boards must ensure that Workforce Solutions Office staff:*

- *enters daily hours of participation into WorkInTexas.com—all entries in WorkInTexas.com must support actual participation in allowable SNAP E&T services; and*
- *uses WorkInTexas.com to document any discrepancies between the employment plan and the entries in WorkInTexas.com.”*

RECOMMENDATION: Contractor must ensure that participation hours entered in WorkInTexas.com match the supporting documentation in the case file. In addition, the Contractor should implement the following recommendations:

1. Training:

- Conduct regular training sessions to ensure staff understand how to accurately enter participation hours into TWIST Daily Time Tracking. Include practical exercises and examples to reinforce learning.
- Train staff in standardized documentation procedures to ensure consistency across all files. Provide clear guidelines and checklists to help staff follow the correct steps.
- Ensure staff are trained to sign job search logs and validate the hours recorded. Emphasize the importance of maintaining the integrity of documentation.
- Clear and Detailed Documentation: Train staff to provide clear and detailed documentation for all entries.
- Educate staff on how to identify and address discrepancies between job search logs and the WorkInTexas.com tracker. Provide tools and resources to help staff resolve issues promptly.

2. Auditing:

- Implement regular audits to verify the accuracy of participation hours entered into WIT Attendance Tracking. Use audit findings to identify areas for improvement and provide targeted training.
- Develop a process to cross-check multiple entries under different services to prevent duplication. Regularly review entries to ensure consistency and accuracy.
- Implement a system to track and follow up on missing entries to ensure they are documented. Use audit results to address any gaps in documentation.

EQUUS Response: Staff are scheduled to have technical assistance training on April 4th, 2025, to review each error. Program policy will be reviewed for understanding and staff will be 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 WIT Entries: Compare the information in the documentation with the hours entered in WIT . Ensure that the hours recorded in WIT 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 WIT entries or providing additional documentation to support the recorded hours.
4. Document Changes: Any modifications made to WIT 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
5. Resources/Desk Aids reviewed—SNAP Guide

MONITOR'S RESPONSE : The corrective action appears sufficient to address the cases. 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 corrective action.

STATUS: PENDING

2. Form H1817-Reconsideration Request was not recorded in TWIST/WIT Good Cause Ribbon and Case Notes, per instructions, in seven of the eleven applicable file (63.64%). This was a finding during the last review with a (60% error rate).

In addition, Form H1817 was not completed and submitted to HHSC for a reconsideration request, in three of the eleven applicable files resulting in a 27.27% error rate.

- **STATE ID 169329986:** The client reported enrollment in college on August 27, 2024. The Good Cause ribbon was not updated, and the reconsideration case note was not entered until the staff verified the school information on September 5, 2024. Additionally, Form 1817 was not sent until September 5, 2024, and it included incorrect information, which required it to be re-sent on September 23, 2024.
- **STATE ID 130975078:** Good Cause Ribbon creation date was August 8, 2024. Employment was reported on July 10, 2024. In addition, Form 1817 was not sent.
- **STATE ID 120855806:** Employment was reported June 18, 2024. The Good Cause Ribbon was not updated. In addition, Form 1817 was not sent.
- **STATE ID 166333624:** Employment was reported on September 26, 2024. The Good Cause ribbon was not updated, and the case note was not entered until October 25, 2024

- **STATE ID 20175785:** Client reported employment May 13, 2024. The Good Cause Ribbon was not created until May 20, 2024.
- **STATE ID 168017946:** Employment was reported on September 26, 2024. The Good Cause Ribbon was not updated.
- **STATE ID 50973017:** Reconsideration was not entered in the good cause tab in TWIST. Employment was reported on March 4, 2024.

Reference: 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 WorkInTexas.com;*
- *enters into WorkInTexas.com:*
 - *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 SNAP E&T services, support services, and the SNAP E&T application;*
- *ensures that all 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.

1. **Implement a Verification Checklist:** Develop a checklist for staff to use when processing reconsideration requests. This checklist should include all necessary steps to ensure that requests are processed immediately and accurately, as per the guidelines.
2. **Enhance Communication Protocols:** Establish clear communication protocols to ensure that staff promptly update the Good Cause Ribbon and case notes when employment or other relevant information is reported.
3. **Peer Review System:** Implement a peer review system where staff members review each other's entries for accuracy and completeness. This can help catch errors and ensure that all documentation is up to date.
4. **Training:** Conduct regular training sessions on processing reconsideration requests and documenting them accurately. Train staff on standardized procedures for recording reconsideration requests in WIT. Ensure staff are trained to update the Good Cause Ribbon and case notes promptly. Emphasize the importance of sending Form 1817 timely and with correct information.
5. **Auditing:** Implement regular audits to verify accurate processing and record reconsideration requests. Cross-check entries in the Good Cause Ribbon and case notes to ensure consistency and

accuracy. Track and follow up on missing entries to ensure they are documented. Review the timeliness and accuracy of Form 1817 submissions to ensure compliance.

EQUUS Response: Staff are scheduled to have technical assistance training on April 4th, 2025, to review each error. Program policy will be reviewed for understanding and staff will be 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 WIT Entries: Compare the information in the documentation with the hours entered in WIT . Ensure that the hours recorded in WIT 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 WIT entries or providing additional documentation to support the recorded hours.

4. Document Changes: Any modifications made to WIT 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

5. Resources reviewed: SNAP Guide, Peer Review Audits, implementation of Verification Checklist on caseload report spreadsheet

MONITOR'S RESPONSE: The corrective action appears sufficient to address the cases. 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 corrective action.

STATUS: PENDING

AREAS OF CONCERN:

1. Provisions of SNAP E&T Activities were not followed in one of the nineteen applicable files (5.26% error rate). **STATE ID 166325775:** Staff closed the ABAWD SNAP E&T case after the participant completed four weeks of Workfare.

Reference: In section B-108.f: Workfare of the Texas Workforce Commission SNAP E&T Guide “ABAWDs must participate in workfare each month they receive SNAP benefits, unless a reassessment indicates they need to change to a more appropriate SNAP E&T activity.”

RECOMMENDATION: Contractor must ensure provision of Workfare are followed.

EQUUS Response: Staff are scheduled to have technical assistance training on April 4th, 2025, to review each error. Program policy will be reviewed for understanding and staff will be 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 WIT Entries:** Compare the information in the documentation with the hours entered in WIT . Ensure that the hours recorded in WIT 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 WIT entries or providing additional documentation to support the recorded hours.

4. **Document Changes:** Any modifications made to WIT 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

5. **Resources/Desk Aids Reviewed:** SNAP Workfare Monthly Calculator, SNAP Guide

3. Work Requirement Verification Form H1822 submitted to HHSC was not submitted timely in one of the twenty-seven applicable files (3.70%). *This area was a Finding during the last review, the finding is considered resolved.* **STATE ID 168078493:** 1822 was not signed and dated by staff.

Reference: 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 signed and dated by staff.

EQUUS Response: Staff are scheduled to have technical assistance training on April 4th, 2025, to review each error. Program policy will be reviewed for understanding and staff will be 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 WIT Entries:** Compare the information in the documentation with the hours entered in WIT. Ensure that the hours recorded in WIT 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 WIT entries or providing additional documentation to support the recorded hours.

4. Document Changes: Any modifications made to WIT 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

5. Resources/Desk Aids reviewed: F1822 Desk Aid, SNAP E&T Guide

3. The penalty was not initiated timely, in two of the sixteen applicable files (12.50%). This area was a Finding during the last review, the finding is considered resolved, however the contractor should continue to focus on improvements.

- **STATE 167435452:** The penalty was entered three days late. The date of noncooperation and the date of the penalty were not in the case note. The noncooperation date appeared to be August 13, 2024. The penalty was initiated on August 21, 2024.
- **TWIST ID 14822360:** Penalty sent date is March 4, 2024. Noncooperation date was February 20, 2024, six business days late.

Reference: In section, B-113: Noncooperation with SNAP E&T Requirements of the TWC, Supplemental Nutrition Assistance Program Employment and Training Guide, it is stated *“When a mandatory work registrant fails to respond to outreach, notifies staff that he or she does not wish to participate, or fails to cooperate with SNAP E&T requirements, Boards must ensure that Workforce Solutions Office staff initiates a sanction request. The request must be entered into WorkInTexas.com by close of business 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.”*

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. “*

It is further stated in B-113: Noncooperation with SNAP E&T Requirements of the TWC, Supplemental Nutrition Assistance Program Employment and Training Guide *“Boards must ensure that Workforce Solutions Office staff documents in WorkInTexas.com:*

- *the date of noncompliance; and*
- *each of the following that is applicable:*
 - *The date a penalty was initiated*
 - *The date good cause was recommended*
 - *The reason for the good cause recommendation*
 - *The date of the rescheduled appointment*
 - *The reason for the rescheduled appointment”*

RECOMMENDATION: Contractor must ensure that all penalties are initiated by the fourth day of noncompliance or the date of discovery. In addition, Staff must ensure that applicable information is documented in the case file.

EQUUS Response: Staff are scheduled to have technical assistance training on April 4th, 2025, to review each error. Program policy will be reviewed for understanding and staff will be 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 WIT Entries: Compare the information in the documentation with the hours entered in WIT . Ensure that the hours recorded in WIT 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 WIT entries or providing additional documentation to support the recorded hours.

4. Document Changes: Any modifications made to WIT 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

5. Resources/Desk Aids Reviewed: SNAP E&T Guide, SNAP Non-Cooperation and TRA Desk Aid

Observations:

- 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.
- Personal Identifiable Information Violation (**STATE ID 166333624**) – Timesheet for another customer was found in a file. This was sent to the contractor for immediate action on February 25, 2025. Contractor removed from case February 26, 2025.

Follow-up

During the last review dated April 4, 2024, Form H1822- Work Requirement Verification was not entered into TWIST Counselor Notes, per instructions, in five of the fourteen applicable files (36%). The corrective action taken by the contractor was effective and the finding is resolved.

STATUS: Resolved

WORKFORCE INNOVATION and OPPORTUNITY ACT (WIOA)

Eligibility

FINDINGS:

No reportable finding.

SUPPORT SERVICES

FINDINGS:

No reportable finding.

Observation:

1. In two of the seven cases, transportation was recorded in case notes as reimbursement. Language was discussed during the exit meeting. The contractor has updated the language and discussed the with staff.
2. In one of the eight applicable cases the support service was not tracked in WIT. This error was due to TWIST/WIT system conversion issue and will not count as an error.

INDIVIDUAL TRAINING ACCOUNTS (ITA)

FINDINGS:

No reportable finding.

AREAS OF CONCERN:

1. Of the one applicable file, Documentation for the Income and Expected Expenses for Entire Training Period was not found. **STATE ID: 166231630**
2. In one ITA file no documentation was found that the customer sought funding from other sources. **STATE ID: 166318578**

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

EQUUS Response: Staff are scheduled for technical assistance training on April 4th, 2025, to address areas of concern. Program policy will be reviewed for understanding to ensure accurate procedures associated with financial aid documentation and case notes are reflected appropriately. 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.

Reemployment Services and Eligibility Assessment (RESEA)

Observations: All errors were classified as observation, due to changes within the program and implementation of a new monitoring tool issued by Texas Workforce Commission (TWC). TWC will be offering additional training to Board Areas, March 27, 2025.

1. Did the Claimant receive an invitation letter from the Board with the RESEA Babel notice?
 - According to the contractor:
 - The letter is created by TWC and can not be edited.
 - The updated Babel information was not effective until November 8, 2024
 - The monitor found that in the 4 applicable cases in which the letter was printed and uploaded to Documents in WIT, after November 8, 2024 the babel notice was not included.
 - In cases prior to November 8, 2024, the letter was not always uploaded to documents in WIT
 - The Babel notice was not found in any communication found in WIT.

Reference: WD Letter 02-19, Change 1: Babel Notice – Update EFFECTIVE 9/25/24

RECOMMENDATION: Contractor should seek further guidance and training

EQUUS Response: Staff received technical assistance training for proper use of the Babel notice on all communication in a RESEA training on 3/13/25.

2. In eight of the twelve applicable cases all three methods of communication for outreach appointment reminder were not used nor documented in the case note (66.67%).

Reference: WD Letter 13-23 Claimant Outreach “NLF: Boards must ensure that, for each scheduled RESEA appointment Workforce Solutions Office staff members remind clients of the scheduled appointment at least two business days before the appointment through the following communication method:

WorkInTexas.com internal message

Email (using the claimant’s email address)

Phone”

*Monitor will review a case note of phone conversation, email documentation uploaded to WIT, or message in WIT. This will be based on the Board’s process.

RECOMMENDATION: Contractor should seek further guidance and training

EQUUS Response: Staff received technical assistance training for proper use of communication with the customer and that all 3 methods of communication will be used for each customer. External message, internal message, and phone calls to the customer at least 2 days prior to the appointment and all communication documented in case notes, in a RESEA training on 3/13/25.

3. In four of the nine applicable cases the claimant did not receive all required services on the same day during the Initial RESEA appointment (44.44%).

Reference: RESEA Program Guide,

- Confirmation Completion oof Reemployment Services Video - Service Code RVD EFFECTIVE 1/8/25 TAB 313 Pilot Board Effective 6/17/24
- Verify Identity, Confirm Information, and complete Wagner-Peyser Registration
- Conduct UI Eligibility Review in WIT - Service Code UEA/257

- Resume Review - Service Code RAS/115
- Provide Customized Labor Market Information Primary Job Family Information - Service Code CLMI/245
- Refer to Job Readiness Workshop(s) - Service Code 262
- Assist Customer in Setup Weekly Virtual Recruiter
- Provide Job Referral(s) - Service Code JSP/125
- Individual Reemployment Plan Develop and Sign with Customer - Service Code 205
- Reemployment Services Appointment Over Service - Service Code RSO 311

RECOMMENDATION: Contractor should seek further guidance and training

EQUUS Response: Staff received technical assistance training to ensure that all services provided to the customer will be entered on the day the service was provided and not later, in a RESEA training on 3/13/25.

4. In five of the eight applicable cases all RESEA services were not entered into WIT within seven (7) calendar days from the scheduled RESEA initial appt. date (62.50%)

Reference: Grant Agreement – Section 5 – Award Specific Requirements

“5.8 All RESEA required services must be provided to eligible RESEA claimants on the date they rescheduled an entered in WorkInTexas.com upon completion or no later than seven (7) calendar days from the scheduled RESEA Appointment.”

*Monitor will look at the date on the outreach letter or last rescheduled date and compare it to the creation date the services were entered into WIT.

RECOMMENDATION: Contractor should seek further guidance and training

EQUUS Response: Staff received technical assistance training regarding entering services within the 7 (calendar) days from the scheduled RESEA Appointment during a RESEA training on 3/13/2025.

5. In all eight applicable cases a signed IEP was not found on file. (100%) Attribute - Does the Individual Reemployment Plan contain all the goals outlined in the guide and complete?

Reference: RESEA Guide: *An IEP constitutes a complete plan of action for claimants to determine the next step in finding employment or training. An IEP must include the following:*

- *A specific employment goal*
- *A strategy to address barriers to employment*
- *A detailed, step-by-step description of activities that the participant will perform and/or participate in, including training.*
- *Time frames for the start and completion of each activity*
- *Specific dates on which Workforce Solutions Office staff will follow-up with participant to evaluate each activity, provide additional assistance, and make any necessary adjustments.*

An IEP must also describe steps for the claimant to take after leaving the Workforce Solutions Office.

Pilot Program:

An Individual Reemployment Plan must be done at each appointment.

This document requires an Applicant and Staff signature and date. This can be an electronic signature.

RECOMMENDATION: Contractor should seek further guidance and training

EQUUS Response: Staff received technical assistance training for proper use of the Individual Reemployment Plan, and the use of it at each appointment, in a RESEA training on 3/13/25.

6. In all six applicable cases a copy of the email was not found/provided and/or the WF42 was not in WIT. (100%)

Reference: RESEA Program Guide: *“To report a potential unemployment benefit eligibility issue using the WF-42 form, Workforce Solutions Office staff password-protects the form and submits the completed form via email to the local WFUI Coordinator. The local WFUI Coordinator sends the password-protected WF-42 form to the state WFUI coordinator for investigation at wfui.coordinator@twc.texas.gov.”*

RECOMMENDATION: Contractor should seek further guidance and training

EQUUS Response: One person has been designated as the sole communicator to TWC for the WF-42 and is ensuring that a copy of the email sending the WF-42 is being uploaded to the documents in the customers' WIT account.

Staff received technical assistance training, reviewing each error, in a RESEA meeting on 3/13/2025. Program policy was reviewed for understanding and staff were trained in accurate procedures associated with documentation and proper case notes. A Quality Assurance tool has been created to ensure all the elements of the audit are being completed, and each element will be reviewed during monthly and quarterly monitoring reviews. Weekly RESEA meetings are also held with RESEA team members to address any identified deficiencies from Quality Assurance reviews.

FILE REVIEW SAMPLE LISTS

CHART A - CHOICES MONITORING SAMPLE LIST

RECORD	STATE ID	RECORD	STATE ID
1	60791735	10	130797675
2	150822669	11	167805742
3	166061841	12	50961470
4	169330565	13	10749896
5	166245136	14	167410061
6	60872311	15	167802056
7	166272408	16	166156715
8	166245147	17	10879174
9	100964765		

CHART B - TAA MONITORING SAMPLE LIST

STATE ID	STATE ID
165489327	165490591

CHART C - SNAP E&T MONITORING SAMPLE LIST

RECORD	STATE ID	RECORD	STATE ID
1	165930787	17	169587441
2	161761345	18	167429811
3	130868965	19	167435452
4	50026981	20	50973017
5	169329986	21	167086441
6	168078493	22	166325775
7	164700149	23	160880888
8	163354369	24	166269218
9	130975078	25	169724904
10	165284265	26	161654179
11	120855806	27	161387435
12	166333624	28	163780459
13	20175785	29	164296608
14	161933615	30	163362857
15	168017946	31	166256465
16	163634096		

CHART D - WIOA - ELIGIBILITY

RECORD	STATE ID	RECORD	STATE ID
1	166213630	7	163836737
2	165632202	8	167925036
3	166295286	9	165872695
4	166061841	10	162716790
5	163375387	11	165447801
6	165246737	12	166318578

CHART E - SUPPORT SERVICES

RECORD	STATE ID	RECORD	STATE ID
1	166266788	7	166250529
2	163223128	8	160839725
3	166098493	9	164502886
4	10965849	10	130798739

CHART F - ITA

STATE ID	STATE ID
166213630	166318578

CHART G - RESEA

RECORD	TWIST ID	RECORD	TWIST ID
1	169568201	7	169593712
2	165428390	8	163358949
3	169647501	9	161675554
4	169225634	10	162702119
5	169432090	11	140859935
6	169647501	12	169235461

References:

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 Texas Workforce Commission Rules, Texas Workforce Commission Choices Guide, Equus Procedure, Choices Non-Cooperation, Good Cause and Penalty Requests Texas Workforce Commission Rules – Chapter 813, Texas Workforce Commission SNAP Guide, WD Letter 06-13 and Applicable Changes – Documenting Services and Participant Contact in The Workforce Information System of Texas (TWIST) Counselor Notes, TWC RESEA Program Guide, WD Letter 13-23 Claimant Outreach, WD Letter 02-19, Change 1: Babel Notice

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*

April 9, 2025

RPMC RESPONSE

Report Demographics

Report Number:	PY25-03.2
Report Type:	Annual Child Care Program Monitoring Report
Report Status:	Final
Final Report Issue Date:	April 9, 2025
Entity Reviewed:	Rolling Plains Management Corporation (RPMC)
Review Type:	Annual Child Care Program Review of the Workforce Grants administered by RPMC and funded by the <i>Workforce Solutions North Texas</i> (the Board)
Applicable Period:	January 1, 2024, through December 31, 2024
Dates of Fieldwork:	Off-site desk review conducted during the month of February and March 2025
Exit Date:	March 18, 2025
Issuance of Draft Report:	March 19, 2025
Contractors Response:	March 31, 2025
Review Conducted by:	D iaz, S mith and A ssociates Rachael Robertson
Report Developed by:	Rachael Robertson Sujuane Smith

Applicable Definitions

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

The scope of the review was from January 1, 2024, to December 31, 2024, and the elements reviewed included but not limited to the following:

Eligibility

- Child Eligible for Services
- Parent Meeting the Work/Training Requirement
- Full-Time, Part-Time or Blended Care Authorized on 2450 Based on Parents Work/Training Status
- All Income Sources Verified, Accurately Recorded and Calculated
- Household Income Within Limits Established by Board for Family Size
- Parent Share of Cost (PSOC) Accurately Determined
- Subsidy Amount Recorded Equals Amount Authorized
- Choices
- Homelessness
- WIOA

Department of Family Protective Services (DFPS) Referrals

- Authorization request for child care made within 3 days after receipt of DFPS referral
- Information from the Form 2054 entered accurately into TWIST

PIRTS Fraud Recoupment

- If open after 90 days, a Journal Note that supports the waiving of the 90-day requirement
- Fact-finding results, fraud determination results, and any improper payments in PIRTS
- Determination Letter sent due to an adverse action
- Collection Statement (RID-64) sent to the client
- Demand Letter (RID-65) sent 30 days after sending the RID-64
- After 30 days from the Demand Letter (RID-65), and a payment default of \$100 or more, Warrant Hold sent to TWC Collection
- Fraudulent violation was of a federal requirement

The number of files reviewed:

NUMBER OF FILES REVIEWED	
Program Area	NUMBER
Client Services – Eligibility	33
DFPS Referrals	15
PIRTS	2
TOTAL	50

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:

Eligibility

1. In one (1) of the twenty (20) applicable files reviewed, the parent did not meet the work/training requirement (5.00% error rate). **18678814** - Customer provided Employment history that details hours, tips, and weekly pay for July 11, 2024- September 12, 2024. The document title says it cannot be used but does not explain why. The case note stated that paystubs were not received. According to the pay history report and the Employment Wage Verification Form (EWV), before staff changes, the parent worked between 15.90-25.30 hours per week. There is no explanation for the change.

Recommendation: Review to ensure client was eligible for services.

RPMC Response: Previous supervisor informed us that if the paystubs or employment information that was turned in did not have the pay period or pay rate, we had to use the employment verification form. Update has now been made to policies and procedures going forward.

MONITOR'S RESPONSE: This case remains under review pending confirmation that the client fulfills the minimum work/training requirements. The documentation in the file, coupled with the unexplained modifications to the Employment Wage Verification Form (EWV), has led to the classification of this case as a finding. This classification is due to the potential disallowed cost. Board Staff will conduct a follow-up and provide a comprehensive update during the next monitoring cycle.

STATUS: PENDING

2. Income was not calculated correctly in three (3) of the nineteen (19) applicable files (15.79% error rate). **This was a finding during the last review.**
 - **18157023** - Staff excluded overtime pay with no explanation. The difference in income with overtime pay was \$3.71 for the month. This did not impact PSOC. Note: Staff did not include an explanation in the case note regarding excluding two pay stubs submitted. Monitoring was able to find the explanation on the Staff calculation worksheet and agreed.
 - **16771027** - According to the handwritten notes found on paystubs the Client reported that she did not work the second job for pay date March 29, 2024, and March 8, 2024. Staff did not average the lack of hours for pay dates at Homles Outreach in the calculation and did not explain the decision in the case note. If the client does not consistently work the second job, the average income should have been \$3441.59. Staff calculated income at \$3526.82. This was a difference of \$85.23. It did not impact PSOC.
 - **13856191** - Staff included Bonus pay in regular pay and did not include details in the case notes. Using contractor's procedure and notes written on the paystub in the file the Monitor calculated income at \$3536.83. \$101.69 higher than staff calculation. This did not have an impact on PSOC.

Reference:

Child Care Services Guide November 12, 2024, section D-107.a: Determining Average Gross Monthly Family Income from Earnings at Initial Eligibility and at Eligibility Redetermination states "If the

number of check stubs differs from what is required based on state and local policy, a clear explanation of the difference must be included in the child care case management system.”

Child Care Services Guide November 12, 2024, section D-107.c: Fluctuations in Earnings states “Any income fluctuations that have been considered when calculating income must be clearly explained in the child care case management system.”

Child Care Services Guide November 12, 2024, section D-107.d: Bonuses and Lump Sum Payments states “...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:

(Sum of the YTD amount(s)) / the appropriate # of months)

RECOMMENDATION: The contractor must ensure that income calculations are calculated correctly, and detailed information is in the case note in accordance with TWC guidelines, Board policy, and Contractor procedures. In addition, the contractor may wish to implement the following recommendations.

Training and Education:

- Conduct regular training sessions for staff on accurate income calculation methods and the importance of detailed case notes.
- Provide refresher courses on the organization's procedures and guidelines.

Standardized Procedures:

- Develop and implement standardized procedures for income calculation, including clear guidelines on handling overtime, bonus pay, and inconsistent work schedules.
- Create checklists to ensure all necessary steps are followed and documented.

Quality Assurance:

- Establish a quality assurance process where a second staff member reviews income calculations and case notes before finalizing them.
- Conduct periodic audits to identify and address any recurring issues.

Documentation and Communication:

- Emphasize the importance of thorough documentation in case notes, including explanations for any deviations from standard procedures.
- Encourage open communication among staff to discuss and resolve any uncertainties or discrepancies in income calculations.

RPMC Response: 18157023: Previous supervisor informed us that we only needed to put our reason on why we were not using documentation on the documentation or the workup for income. The

previous supervisor stated that if a client stated that they did not receive a paycheck or not complete paycheck that we would leave the income workup sheet blank. Update has now been made to policies and procedures going forward.

16771027: The previous supervisor stated that if a client stated that they did not receive a paycheck or not a complete paycheck that we would leave the income workup sheet blank. Update has now been made to policies and procedures going forward.

13856191: Previous supervisor informed us that we only needed to put our reason on why we were not using documentation on the documentation or the workup for income. Update has now been made to policies and procedures going forward.

MONITOR'S RESPONSE: The corrective action appears sufficient to address the cases. 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 corrective action.

STATUS: PENDING

PIRTS Fraud Recoupment

1. In both cases reviewed, the Pending Closure Status was not updated until March 6, 2025. In one case the determination was made prior to the Guidance FDCM Letter 01-2024, dated April 26, 2024. Prior guidance stated that the case should be closed once fact-finding is concluded.

Reference: FDCM Letter 01-2024, dated April 26, 2024: Board Instructions: Reporting Requirements for Suspected Fraud, Waste, Theft, Program Abuse Cases, and Recovery of Improper Payments for the Child Care Program states: BOARD INVESTIGATIONS: "5. *SEND DETERMINATION LETTER: When fact-finding results in an adverse action, Boards must send a determination letter to the adversely affected party within one day of the case status changing to "pending closure."*

Boards must upload the determination letter into the PIRTS NFS and note the date the determination letter is mailed under Program Collections, which will start a 30-business day response timer in the PIRTS program."

RECOMMENDATION: Ensure that the Pending Closure Status is updated promptly, in accordance with the guidance provided in FDCM Letter 01-2024. Specifically, update the status within one day of the case status changing to "pending closure." Implement a checklist or automated reminder system to ensure that staff update the Pending Closure Status and send the determination letter within the required timeframe. Conduct training sessions to reinforce the importance of timely updates and adherence to the guidance. Provide staff with clear instructions and examples to follow.

RPMC Response: In the future, schedules will be set to ensure that the case status is changed and the determination letters are sent within the proper timeframe.

MONITOR'S RESPONSE: The corrective action appears sufficient to address the cases. 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 corrective action.

STATUS: PENDING

2. In both cases the collection letter was sent before the 30-day period from the determination letter.

Reference: FDCM Letter 01-2024, dated 4/26/2024: Board Instructions: Reporting Requirements for Suspected Fraud, Waste, Theft, Program Abuse Cases, and Recovery of Improper Payments for the Child Care Program states: “6. *ATTEMPT RECOVERY OF IMPROPER PAYMENTS: After a debt is final (no appeal or appeals exhausted), if full repayment is not made or if a repayment schedule is not in place within 30 business days of mailing the determination letter, the Board must take the following actions: Send a collection letter. The collection letter must be uploaded into PIRTS NFS. Additionally, the date the collection letter is mailed must be noted in PIRTS under Program Collections, which will start a 30-business day response timer in the PIRTS program.*”

RECOMMENDATION: Adhere to the 30-business day period from the mailing of the determination letter before sending a collection letter, as specified in FDCM Letter 01-2024. Establish a tracking system to monitor the timeline from the determination letter to the collection letter. This system should alert staff when the 30-day period has elapsed. Educate staff on the correct timing for sending collection letters and the importance of following the specified timeline to ensure compliance with the guidance.

RPMC Response: For future PIRTS cases, we will implement the use of the timeline tracker in PIRTS to ensure that letters are not sent too close together and will adhere to the proper timeframe. In addition, once emails are received from PIRTS alerting us that the 30 day period has been elapsed – said PIRTS case will be reviewed.

MONITOR'S RESPONSE: The corrective action appears sufficient to address the cases. 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 corrective action.

STATUS: PENDING

Review Areas of Concern:

Eligibility

1. In one (1) of the thirty-two (32) files reviewed, Subsidy Amount Recorded did not Equal Amount Authorized (3.13% error rate). **10554835** - PSOC cost of \$150.00 was not subtracted from the subsidized payment to the provider. In Addition, the Form 2450 did not state a PSOC for the parent.

Recommendation: Review and correct payment amount for November through current.

RPMC Response: corrections have been made and Jan 25 to current was corrected when we switched over to the new system.

MONITOR'S RESPONSE: Board Staff has reported that the contractor has reached out to Child Care Provider and the Provider has supplied a statement of the fees collected from the parent for the period in question. In addition, the corrective action is pending further technical assistance from the Texas Workforce Commission on the proper steps required to correct the overpayment to the

Child Care Provider. This case will be reviewed during the next monitoring cycle to ensure the corrective actions were taken.

STATUS: PENDING

Program Review Observations:

Eligibility - One (1) of the thirty-one (31) cases reviewed, the address documentation did not match the information in TWIST.

References:

FDCM Letter 01-2024, dated 4/26/2024: Board Instructions: Reporting Requirements for Suspected Fraud, Waste, Theft, Program Abuse Cases, and Recovery of Improper Payments for the Child Care Program

Texas Workforce Commission 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)

MONITORING SAMPLE LISTS

CLIENT SERVICES – ELIGIBILITY

CHARACTER	TWIST ID	CHARACTER	TWIST ID
10 - Low Income	10182140	15 - Former DFPS	16809042
10 - Low Income	16630896	1 - Choices	3213479
10 - Low Income	15453170	10 - Low Income	19541527
16 - Homeless	20216814	1 - Choices	14353586
15 - Former DFPS	17745930	10 - Low Income	13856191
1 - Choices	14453474	16 - Homeless	20273266
10 - Low Income	14389559	10 - Low Income	18678814
16 - Homeless	14281453	15 - Former DFPS	19847954
10 - Low Income	18157023	10 - Low Income	16299223
10 - Low Income	16771027	1 - Choices	8663169
1 - Choices	15971714	16 - Homeless	6029887
10 - Low Income	12643287	10 - Low Income	18596956
10 - Low Income	18504279	15 - Former DFPS	15524753
1 - Choices	1648384	10 - Low Income	3227712
10 - Low Income	20143520	10 - Low Income	16534430
10 - Low Income	19255892	10 - Low Income	11867846
10 - Low Income	10554835		

DFPS REFERRALS

CHARACTERISTIC	TWIST ID	CHARACTERISTIC	TWIST ID
11 - DFPS General Protective	15813119	12 - DFPS Foster Care IV-E	10339597
11 - DFPS General Protective	16834346	12 - DFPS Foster Care IV-E	11816362
11 - DFPS General Protective	6172761	13 - DFPS Foster Care Not IV-E	20014732
11 - DFPS General Protective	18702991	13 - DFPS Foster Care Not IV-E	3068108
11 - DFPS General Protective	13684325	13 - DFPS Foster Care Not IV-E	5785719
11 - DFPS General Protective	8998313	13 - DFPS Foster Care Not IV-E	18363248
11 - DFPS General Protective	15696364	14 - DFPS Reltv/Other Caregiver	511751
12 - DFPS Foster Care IV-E	10447915		

PIRTS

PIRT CASE	TWIST ID
2024-Case-000008655	16633231
2024-Case-000008441	12108645



Summary of Monitoring by Center April 2025

Workforce Center Contractor: Equus Workforce Solutions

INTERNAL MONITORING REPORT	Period	Accuracy Rate	Final Accuracy Rate	Disallowed Cost
CHOICES Noncooperation-100%	2025.02	89%	100%	None
CHOICES Work Activities-100%	2025.03	92%	100%	None
SNAP Non-Cooperation-100%	2025.02	100%	100%	None
SNAP Work Activities-100%	2025.02	95%	100%	None
SUPPORT SERVICES REVIEW-100%	2025.02	91%	100%	None
WIOA CASE NOTE REVIEW-100%	2025.03	69%	94%	None
WIOA DV, MSG, Credential-100%	2025.Q2	88%	98%	None
WIOA ELIGIBILITY REVIEW-100%	2025.02	99%	100%	None
PII-WF	2025	97%	100%	None
PROCUREMENT REVIEW-100%	2024.Q4	100%	100%	None
RESEA [New]	In Progress			

Child Care QA Report -Jan 25 to Feb 25

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	68	Average Monthly Accuracy rate	96.66%	100% Accuracy for all cases	Disallowed Cost	\$0.00	
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