1. 4 weeks before each Local Workforce Development Board (LWDB) monitoring entrance, ESD’s DATA Division staff provides Monitoring unit with a participant record table that assigns a random number to each record in the “rnum” field. The table includes the PIRL data values to be validated against source documentation.
2. Participant record table is filtered by the Report Name field to only display program participant records in the table that include ITSS services. The table is then filtered by the Enrollment Start Date field to encompass a timeframe that includes all new enrollments since the last monitoring review up to the last day of the last quarter to ensure all records have data values on the current PIRL to validate. Using the “rnum” field to create a random sort of the filtered results, the respective number of unduplicated participant records are selected to reach the desired sample size as detailed below.
3. Sample size and methodology:
	1. For each of the 12 LWDB Monitoring Reviews (spread across the program year)
		1. Each core Title I-B program has 10 records selected, with a minimum of 7 reviewed depending on resources.
		2. Each DWG program, as identified in scope on the LWDB monitoring entrance letter, has 5 records selected with a minimum of 3 reviewed depending on resources. (Note: all DWG records will be recorded on one DWG Worksheet)
		3. If less than the 10 or 5 records, respectively, appear in the table, all will be sampled.
	2. The sample size methodology is based on a fixed number of participant records with all required data elements being reviewed per the resources available. The sample includes a mix of active and exited participant records.
4. ESD’s Data Integrity (DI) Team validates the following data elements: 1600-1607; 1614-1618 (1610, 1612, and 1613 elements are not being populated at this time); 1700-1706. Monitoring validates all other data elements as identified in each program’s DEV Worksheet.
5. Monitoring sends the list of selected participants with instructions to the LWDB 4 weeks prior to entrance. Monitoring begins reviewing records 1 week prior to entrance.
6. Timelines and documentation of error resolution:
	1. Once the review is completed, Monitoring will provide the LWDB with the Program Daily Observation Report, which includes a DEV tab listing items that failed and they will be required to resolve the items identified and communicate to us when resolved or, if they can’t, why they can’t. It will also list any elements that exceed the 20% programmatic pass/fail ratio that requires a corrective action plan from the LWDB.
	2. The DEV Worksheets will identify passes and failures for each record by element. A comment will be added to each cell in the worksheet with a failure value, identifying the cause of the failure. LWDB failures will be color coded light orange, and MIS system issues will be color coded bright yellow. LWDB failures will get copied into the Program DOR.

Standardized language to explain record failure for an element (if it falls outside of the list, the language will then be customized):

1. No source documentation located
2. Documentation located, unallowable source
3. Documentation located, unreadable
4. Documentation located, inaccurately recorded data
5. Documentation located, data was not recorded
6. Documentation located, inconsistent with other documentation
7. MIS system issue

Actions required to correct errors by type of failure:

1. Locate or attempt to collect missing source documentation
2. Locate or attempt to collect allowable source documentation
3. Locate or attempt to collect a readable copy of source documentation
4. Correct the inaccurately recorded data
5. Record the missing data
6. Resolve the inconsistency and ensure accuracy of data and/or source documentation appropriately
7. ESD’s ITSD and Data Integrity Team will look into the root cause and work towards resolution of the MIS system issue.
	1. The data Element Pass / Fail column in the DEV Worksheet indicates whether each data element passed or failed based on exceeding the 20% programmatic pass/fail ratio as prescribed in ESD Policy 1003, Rev. 2. If any element fails, it will be color coded a light orange for LWDB level failures and a bright yellow for MIS system issue failures. Both LWDB’s and ESD’s ITSD unit and Data Integrity team will be required to develop and submit a corrective action plan for element failures assigned to them.
	2. The LWDB, ESD’s ITSD unit and Data Integrity team unit have 30 business days from the day they receive either the Program DOR or the DEV worksheets to resolve errors, document resolution and outcome, or reason for failure to resolve in the respective program worksheets and send the completed worksheets back to the Monitoring unit. Each response will be used to document and communicate the resolution, or reason for failure to resolve, or the corrective action plan.
8. On an annual basis, following completion of the 12 LWDB monitoring reviews the ESD Monitoring unit will review the results of the full sample for each program to identify what elements exceeded the error rate. Those elements identified will be included as technical assistance in our annual DEV training, with the exception of MIS failures. The MIS failures are being addressed in the MIS replacement process.

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| Due to / Due from with timelines |
| ESD’s Data Division staff sends participant record table to Monitoring unit | 4 weeks prior to entrance (received on Monday) |
| Monitoring unit sends list of selected participants LWDB | 4 weeks prior to entrance (sent by COB Friday) |
| LWDB ensures all participant file documents are uploaded into ETO / MFT | Files must be uploaded by COB Friday – 10 days prior to entrance |
| LWDB ensures general ledgers for participant files sampled are uploaded into MFT site | Files must be uploaded by COB Friday – 10 days prior to entrance |
| Monitoring unit begins participant file review | 1 week prior to entrance |