1. The Data Integrity Team will provide Monitoring with an all Workforce Development Area Sample and individual Workforce Development Area participant record table(s) that includes the PIRL data values to be validated against source documentation. The individual area records process will begin after formal monitoring of Wagner-Peyser starts. When formal monitoring begins, the ESD Data Integrity Team will provide a participant record table that assigns a random number to each record in the “rnum” filed four (4) weeks prior to each WorkSource Office Monitoring entrance.
2. Sample size and methodology for all Area Sample:
   1. Using the “rnum” field to create a random sort of table, for PY21 records, the records will be then sorted within the worksheet according to Workforce Development Area and then the first 2 records from each area will be selected for a sample of 24 records.
   2. The sample size methodology is based on a fixed number of participant records, the required data elements selected for review are identified on each PY21 Program Participant File Checklists, being reviewed per the resources available. The sample includes a mix of active and exited participant records.
3. Sample size and methodology for Monitoring Visits to Workforce Development Areas:
4. When formal reviews begin, the sample will be pulled based on the Workforce Development Area and then a sample of at least 5 records from the offices selected for monitoring within the area when possible, based on the sample. These will include some MSFW if available.
5. The sample size methodology is based on a fixed number of participant records, the required data elements selected for review are identified on each PY21 Program Participant File Checklists, being reviewed per the resources available. The sample includes a mix of active and exited participant records.
6. Monitoring provides ESD’s Data Integrity Team with the sampled records to obtain the identified wage data elements that are data validated by ESD’s Data Integrity Team.
   1. ESD’s Data Integrity Team validates the following data elements: 1600-1607; 1614-1618 (1610, 1612, and 1613 elements are not being populated at this time); 1700-1706.
   2. Monitoring validates all other data elements as identified in each program’s DEV Worksheet.
7. Timelines and documentation of error resolution:
8. Once the review is completed, Monitoring will provide the WorkSource Office and Program Operator with the DEV Worksheets showing items that failed and they will be required to resolve the items identified and communicate to the Monitoring when resolved or, if they can’t, why they can’t.
9. 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. WorkSource Office failures will be color coded light orange, Program Operations failures will be color coded lavender, and the ESD’s ITSD Unit and Data Integrity Team for MIS system issues will be color coded bright yellow.

Standardized language to explain record failure for an element:

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 Local WorkSource Office, will have 30 business days from the day they receive their DEV worksheet to resolve errors, document resolution and outcome, or reason for failure to resolve an item in their respective worksheets. The reply feature in each comment will be used to document and communicate the resolution, or reason for failure to resolve an element, or a corrective action plan.
   2. The data Element Pass / Fail column in the DEV Worksheet indicates whether each data element passed or failed based on exceeding the 10% programmatic pass/fail ratio as prescribed in ESD Policy 1003, Rev. 2. The results of DEV over the quarter will be reviewed with Wagner-Peyser Program Operations and ESD’s ITSD Unit and Data Integrity Team. If any element fails across the quarter, the owner of the respective failure will be required to develop and submit a corrective action plan for those element failures that exceed the 10% programmatic pass/fail ratio.
   3. At the ESD Wagner-Peyser leadership level, a quarterly DEV worksheet will be sent to Wagner-Peyser Program Operations, ESD’s ITSD Unit, and Data Integrity Team to use in submitting a response to the Monitoring unit within 30 business days from the day they receive their worksheet. The respective leadership group will send their completed worksheets and any required corrective action plan to the Monitoring Unit. The reply feature in each comment is used to communicate resolved errors, document resolution and outcome, or reason for failure to resolve an item in their respective program worksheets.