

**SAN BERNARDINO COUNTY**

**WORKFORCE INVESTMENT ACT**

**ADULT/DISLOCATED WORKER**  
**MONITORING TOOLS**

**COUNTY OF SAN BERNARDINO  
JOBS & EMPLOYMENT SERVICES DEPARTMENT  
DOCUMENTS SUBJECT TO  
COMPLIANCE REVIEW**

**I. PROGRAM DOCUMENTS**

1. Written Policies And Procedures
2. Organizational Chart Showing Names And Job Classifications Of Current Staff
3. BPPVE Approval Documents For The Director, The School, The Instructors And The Courses (If Not State Of California Approved)
4. State Certified License/Credential/Diploma's For Current Staff (If Not BPPVE Approved)
5. Staff/Instructor Qualifications (If Not BPPVE Or State Certified)
6. Current Business Licenses and/or Permits
7. Orientation Materials, Including Policy Statement On Conditions For Dismissal From Program
8. Complaint And Grievance Policy And Procedure
9. Provider Assessment Material
10. Classroom Training Curriculum And Instructional Materials
11. Testing and/or Skill Attainment Documentation
12. Attendee List (Past And Current) With Programs Outcome(s)
13. Participant Records

**II. FISCAL DOCUMENTS (As Applicable)**

1. Invoice For Payment(s)
2. Documentation In Support Of Invoice For Payment(s)
3. Written Financial And Accounting Procedures
4. Verification Of Title IV Status (If Applicable)
5. Workers' Compensation Insurance Policy
6. Liability Insurance Policy
7. Quarterly Activity Report

## WIA ELIGIBLE TRAINING PROVIDER RESPONSIBILITIES

- Written policies and procedures covering all aspects of the contracted training. □ □
- Staff size is appropriate for the number of students/courses taught. □ □
- Organizational Chart with staff names and job classifications. □ □
- Facilities, space, equipment, course materials, etc., are adequate for the applicable program(s). □ □
- General Liability (at least \$1,000,000) and Workers Compensation Insurance policies are current. □ □
- County is named as an additional insured. □ □
- A Certificate of Completion is presented to Customer upon satisfactory completion of training. □ □
- Customer(s) have been briefed on complaint/grievance procedures. □ □
- Customer(s) have received all course materials listed in the Agreement. □ □
- Agency has a reporting system in place to track participants through the program. □ □
- Agency has a reporting system in place to track outcomes and program performance. □ □
- Customer(s) have received a program orientation. □ □
- Customer(s) attendance/progress are reported to JESD on a regular basis. □ □
- BPPVE certificates for course(s), administrator, and instructor(s) are posted and current.  
(If Applicable) □ □
- Staff/Instructor Qualifications are current and available for review. □ □
- Equal Employment Opportunity/Job Seeker notices are prominently posted. □ □
- Facilities comply with the Americans with Disabilities Act (ADA) of 1990. □ □
- Training environment is free from observed health and safety hazards. □ □
- Customer case files contain the required documentation and are available for JESD review. □ □
- Files are adequately maintained and secured. □ □
- All records are retained a minimum of three (3) years. □ □
- Written procedures covering Fiscal Management. □ □
- Invoices are submitted on a timely basis with benchmark documentation. □ □
- Invoices are submitted with the agreed upon costs/expenses. □ □
- Pell Grant awards are applied against tuition. □ □

# MONITORING CHECKLIST

AGENCY: \_\_\_\_\_ DATES: \_\_\_\_\_

## PROGRAM MANAGEMENT

This part of the monitoring covers the overall management that includes the organizational structure, staffing, facilities and equipment, tracking and reporting participant outcomes, and internal policies and guidelines to ensure delivery of an effective program.

- |   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| • Written policies and procedures covering all aspects of the contracted training.                  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Staff size is appropriate for the number of students/courses taught.                              | <input type="checkbox"/> | <input type="checkbox"/> |
| • Organizational Chart with staff names and job classifications.                                    | <input type="checkbox"/> | <input type="checkbox"/> |
| • Facilities, space, equipment, course materials, etc. are adequate for the applicable program(s).  | <input type="checkbox"/> | <input type="checkbox"/> |
| • General Liability (at least \$1,000,000) and Workers Compensation Insurance policies are current. | <input type="checkbox"/> | <input type="checkbox"/> |
| • County is named as an additional insured.   | <input type="checkbox"/> | <input type="checkbox"/> |

## PROGRAM DELIVERY OF SERVICES

This part of the monitoring covers whether the contractor meets the intent of the ACT and is in compliance with the Contract and other standards required by JESD.

- |   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| • Customer(s) are issued a Certificate of Completion upon satisfactory completion of training.  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Customer(s) have been briefed on complaint/grievance procedures.  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Customer(s) have received all course materials listed in the Agreement.   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Customer(s) have attained all skill competencies and are supported by documentation.  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Agency has a reporting system in place to track participants through the program.   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Agency has a reporting system in place to track outcomes and program performance.   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Agency has a system in place to refer customers and non-customers to the nearest One-Stop Center And/or JESD office for eligibility determination and/or additional services. | <input type="checkbox"/> | <input type="checkbox"/> |
| • Agency has met or it appears will meet minimum program performance standards.   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Customer(s) have received a program orientation.  | <input type="checkbox"/> | <input type="checkbox"/> |
| • Customer(s) attendance/progress are reported to JESD on a regular basis.  | <input type="checkbox"/> | <input type="checkbox"/> |
| • BPPVE certificates for course(s), administrator, and instructor(s) are posted and current.<br>(If Applicable)   | <input type="checkbox"/> | <input type="checkbox"/> |
| • Staff/Instructor Qualifications are current and on file (if not BPPVE approved or CDE certified).   | <input type="checkbox"/> | <input type="checkbox"/> |

**COMPLIANCE WITH LAWS AND REGULATIONS**

This part of the monitoring ensures compliance with laws and regulations.

- Equal Employment Opportunity/Job Seeker notices are prominently posted. Yes  No
- Facilities comply with the Americans with Disabilities Act (ADA) of 1990. Yes  No
- Training environment is free from observed health and safety hazards. Yes  No
- All required licenses and permits are current and/or in effect. Yes  No
- Sub-agreements approved JESD Yes  No

**PARTICIPANT RECORDS**

This area determines if all records, reports, and documents are complete, consistent, and available for review and meet the requirements regarding retention of records.

- Customer case files contain the required documentation and are available for JESD review. Yes  No
- Files are adequately maintained and secured. Yes  No
- All records are retained a minimum of three (3) years. Yes  No

**FISCAL REVIEW**

This part of the monitoring ensures fiscal integrity, verifies funds are being used properly, reviews supporting documents, and ensures fiscal records are properly maintained.

- Written procedures covering Fiscal Management. Yes  No
- Invoices are submitted on a timely basis with benchmark documentation. Yes  No
- Invoices are submitted with the agreed upon costs/expenses. Yes  No
- Educational Assistance Programs (Title IV) funds are applied against training costs (if applicable). Yes  No
- Quarterly Activity Report(s) in file. Yes  No

**NOTES**

How many students were interviewed? \_\_\_\_\_ How many case files were reviewed? \_\_\_\_\_

Who attended the monitoring? \_\_\_\_\_

Exit meeting conducted? Yes No If yes, who participated? \_\_\_\_\_

Outstanding items discussed? Yes No If yes, please List: \_\_\_\_\_

\_\_\_\_\_  
MONITOR

\_\_\_\_\_  
DATE

## JOBS AND EMPLOYMENT SERVICES DEPARTMENT CASE FILE CONTENTS

	Yes	No	N/A
• JESD Referral Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• School Application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• School Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• School Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Complaint/Grievance Procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• EEO Policies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Attendance/Progress Documentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Case Notes/Narrative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Benchmark Achievement Documentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Copies of relevant tests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Certificate of Completion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Verification of Employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Verification of Retention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Financial Aid Approval/Denial (If applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Documentation of supplies, tools, supportive services etc given to customer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

