

**Workforce Development, Aging and Community Services (WDACS) Technical Assistance Checklist PY 2021-22  
INVEST Program**

AJCC: \_\_\_\_\_ Participant Name \_\_\_\_\_ Grant Code: \_\_\_\_\_

App #:	App Date:	Participation Date:	Exit Date:
<b>CalJOBS Application &amp; ARS</b> <i>(Electronic Signatures Acceptable)</i>			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Staff /Case Manager Signature</b> <b>Date:</b> _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Application Reviewer Signature</b> <b>Date:</b> _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Participant Signature</b> <b>Date:</b> _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Application is reviewed and approved prior to providing services</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Reviewer is not same as staff/case manager</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Medical and Disability related questions have been redacted from Application</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>ARS referral complete?</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>Yes marked in ARS for enrollment in program</b>			Requirement Met: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>Initial Assessment &amp; Basic Skills Testing</b>			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are all requirements of initial assessment met on enrollment? <input type="checkbox"/> <b>Aptitudes &amp; Abilities</b> <input type="checkbox"/> <b>Supportive Service Determination</b> <input type="checkbox"/> <b>Basic Skills</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is an assessment from a partner program used? If so, from what partner program: _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> If a basic skills test is provided, what assessment tool is used: _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> If no basic skills testing is provided, is a valid reason given for lack of testing? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are basic skills test results accurately reported in CalJOBS and case notes? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is Participant Basic Skills Deficient? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are initial assessment testing tools stored in the participant case file? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are initial assessment testing tools legible, dated, and signed by staff? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is the initial assessment activity code open in CalJOBS?			Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>Individual Employment Plan (IEP)</b>			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is need for Individualized Career Services documented in case notes? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Was an IEP developed prior to providing individualized services? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Does the IEP include the Objective Assessment Summary (OAS)? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are required CalJOBS activity codes open: <b>OAS (203)</b> <input type="checkbox"/> <b>IEP (205)</b> <input type="checkbox"/> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is the IEP updated continuously as activities occur? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Does the IEP provide a plan of activity for the participant? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is the IEP dated and signed by the participant?			Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>Supportive Services</b>			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are Sup. Services provided for participation in INVEST career and/or training activities? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are Supportive Services provided reasonable? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are Supportive Services provided in a timely manner? (3-day turnaround timeframe) <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> If not, has the agency case noted why the 3-day timeframe was not met? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is support documentation on file? (e.g., receipts) <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are appropriate Supportive Services activity codes opened in CalJOBS?			Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>Case Notes and Documentation</b>			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are case notes detailed, clear, and fully developed? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Do case notes indicate initial assessment was conducted on enrollment and include initial assessment results and interpretation? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Do case notes include a plan of activity for the customer? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are applicant statements complete, clear, detailed and fully developed? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is confidential health information & Participant PII secured and kept out of file? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are medical and disability related questions redacted from all CalJOBS forms? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Do Activity codes match information in the case notes? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is a current and well-developed resume on file? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is documentation supporting services provided on file? (i.e., Job Referrals, IEP) <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Is documentation supporting planned break in services provided on file? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are case notes showing that participant met with the Mentor on file? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are activity codes used to show that the participant met with the Mentor? If so, list the activity codes used: _____			Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>

Training Services				
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Is training need and benefit clearly documented?	Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No  Cohort Training: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Is local LMI used to link training to in demand occupations?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Is a comprehensive assessment used to identify training course?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Is training provider performance data on file?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Are attendance records on file?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Is the course Certificate of Completion on file?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Is customer choice requirement met?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Is link to employment established?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Are case notes acceptable?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Is a complete, signed, and dated ITA on file?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Are documentation of payments on file?	
On the Job Training (OJT)				
Employer Name: _____ Address: _____			Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>	
OJT Info: Job Title: _____ Total Training Hrs.: _____ Start Date: _____ End Date: _____ Hourly Wage \$ _____ Reimbursement Rate: _____ % Maximum Reimbursement \$ _____				
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	OJT need and benefit established and documented thru assessment?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Participant has the skills and qualifications to successfully complete the OJT?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Business meets the requirements of OJT?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	If business previously participated in OJT, they met all requirements of previous OJT Contract? (Case noted)	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	OJT contract signed/dated prior to OJT start and uploaded to CalJOBS?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	OJT training plan completed, signed/dated prior to OJT start, and uploaded to CalJOBS?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	OJT training plan completed, signed/dated prior to OJT start and uploaded to in CalJOBS?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	IEP supports the OJT and is developed and signed prior to OJT start?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Employer is committed to hiring participant upon successful OJT completion?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	AJCC is monitoring OJT progress to ensure goals are met?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Progress report & invoice submitted every pay period & uploaded to CalJOBS.	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Final evaluation completed and uploaded to CalJOBS? MUST include whether participant satisfactorily met the training objectives.	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	OJT does not exceed one year?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Was the participant hired after OJT completion?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	One-month follow-up report done after OJT completion and participant hiring?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Six-month follow-up report done after OJT completion and participant hiring?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Are case notes acceptable?	
Transitional Subsidized Employment				
<input type="checkbox"/> Yes	<input type="checkbox"/> No		Original Worksite Agreement is on file?	Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<input type="checkbox"/> Yes	<input type="checkbox"/> No		Participant Weekly Progress Reports are signed and dated by participant and Worksite Supervisor and are in file?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No		Time sheets are signed and dated by participant and Worksite Supervisor?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No		Are daily/total number(s) of hours calculated correctly?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No		Are breaks and lunches taken as directed by Labor Laws?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No		Completion of the five workshops?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No		Work Readiness/Workplace Norms or approved web-based equivalent	
<input type="checkbox"/> Yes	<input type="checkbox"/> No		Education on the Fair Chance Initiative or approved web-based equivalent	
<input type="checkbox"/> Yes	<input type="checkbox"/> No		Adult Financial Literacy or approved web-based equivalent	
<input type="checkbox"/> Yes	<input type="checkbox"/> No		How to Overcome Unique Barriers or approved web-based equivalent	
<input type="checkbox"/> Yes	<input type="checkbox"/> No		Computer based skills or approved web-based equivalent	
Number of TSE hours completed: _____				

Incentives	
<p><b>Job Readiness Workshops</b></p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Documentation for participation of workshops?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Sign-in sheet completed for each workshop attended?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A All 6 workshops completed?  If no, how many completed? _____  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A incentive provided for completion of all 6 workshops?</p> <p><b>Employment Achievements</b></p> <p><b>Attainment and Retention of Employment</b></p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Documentation, such as a paystub was used to verify attainment of employment?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Retention Milestone Achieved (circle all that apply): 30,60,90,180 days  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Retention milestones were recorded, and sign-in sheet completed?</p> <p><b>Advancement in Employment</b></p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Advancement in Employment was documented, and sign-in sheet completed?  <b>Proof of Advancement of Employment used:</b>  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Comparison of paycheck stub exhibiting a pay raise  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Paycheck stub displaying 40 or more hours worked a week  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Letter from employer stating promotion  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Letter from employer notifying the eligibility for medical benefits</p> <p><b>Occupational Training</b></p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Incentive provided for completion of first half of training and sign-in sheet Completed?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Start and end date with distribution of incentive provided at a date halfway between start and end date?  Date Incentive was provided: _____  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Incentive provided for completion of second half of training and sign-in sheet completed?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Certificate from the institution with the participant's name and date of completion in file?</p> <p><b>Higher Education Participation</b></p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Enrollment into an educational program documented  Name of educational program participant enrolled into _____  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Completion of educational program with certificate in case file?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Secondary/postsecondary transcript/ report card documenting participant is meeting the state's academic standards outlined by the California Department of Education</p>	<p><b>Requirement Met:</b>  <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Comments:</b></p>

Stipend	
<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Stipend provided for 25% completion?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Stipend provided for 50% completion?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Stipend provided for 75% completion?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Stipend provided for 100% completion?</p>	<p><b>Requirement Met:</b>  <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Comments:</b></p>

Case Closure	
<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Was this file a positive case closure?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Was case closure completed with appropriate documentation (i.e., school status, employment verification)?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Was the participant exited as a global exclusion?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Is documentation supporting a Global Exclusion on file (i.e., incarceration, institutionalization, death etc.)?</p>	<p><b>Requirement Met:</b>  <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Comments:</b></p>

Follow-Up Services	
<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Were Follow-Up Services offered to participant upon employment &amp; program exit  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Are any Follow-up services provided?  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If so, are Follow-up services fully documented on file, in case notes, with appropriate CalJOBS codes open?</p>	<p><b>Requirement Met:</b>  <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Comments:</b></p>

<b>Co-Enrollment:</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	
Program Enrolled: _____ Agency: _____ Co-Enrolled Into: _____ Agency: _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is need documented? (Customer choice, customer benefit, funding) <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are separate files kept per funding stream? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Are services provided without duplication between programs?	Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>

<b>Certification of Review</b>		
<b>WDACS REPRESENTATIVE NOTES:</b>		
All Requirements Met: <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <b>NOTES:</b>		
_____ <i>AJCC REPRESENTATIVE PRINT NAME</i>	_____ <i>SIGNATURE</i>	_____ <i>DATE</i>
_____ <i>WDACS REPRESENTATIVE PRINT NAME</i>	_____ <i>SIGNATURE</i>	_____ <i>DATE</i>