

**Workforce Development, Aging and Community Services (WDACS) America's Job Centers of California (AJCC)  
 Technical Assistance Checklist PY 2018-19  
 HOME LA:RISE**

AJCC: \_\_\_\_\_ Participant Name \_\_\_\_\_ SSN: \_\_\_\_\_

CalJOBS #:		Enrollment Date:	Exit Date:
<b>Program Eligibility</b>			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Program Eligibility Checklist on file with LA:RISE Social Enterprise Partner <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Print out of matched partner contact name and information included		Requirement Met: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>	
<b>Compliance &amp; Authorization Forms</b>			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Summary of Complaint Resolution Procedures <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Complaint Resolution Procedures Signature Form included and signed <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Equal Opportunity is the Law Discrimination Policy Signature Form included and signed <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Sexual Harassment in the Work Place Form <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Program Follow-Up Information Sheet <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> What to Do If You Believe You have Experienced Discrimination		Requirement Met: <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>	
<b>CalJOBS Application</b>			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Staff /Case Manager Signature <b>Date:</b> _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Application Reviewer Signature <b>Date:</b> _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Participant Signature <b>Date:</b> _____ <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Application is reviewed and approved prior to providing services <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Reviewer is not same as staff/case manager <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Medical and Disability related questions have been redacted from Application		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>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>Case Notes</b>			
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Print outs of Case Notes <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Supportive Services Documentation <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> Is confidential health information & Participant PII secured and kept out of file?		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 career and/or training activities? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Have community resources been sought in addition to providing Sup. Serv. (Case Noted) <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> Is a financial needs assessment validating Sup. Serv. need completed and on file? <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)		Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>	

<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</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> <input type="checkbox"/> <b>N/A</b> Is support documentation on file? (e.g. receipts) <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b> Are appropriate Supportive Services activity codes opened in CalJOBS?	
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Incentives		Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>Employment Retention</b>		
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Documentation, such as a paystub was used to verify attainment of employment?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Retention Milestone Achieved	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	First paycheck	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Documentation on file for verification	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	First month on the Job	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Documentation on file for verification	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Second month on the Job	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Documentation on file for verification	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Third month of Employment and participation in an AJCC Employment Retention Support Activity	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Documentation on file for verification	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Six months of Employment and participation in an AJCC Employment Retention Support Activity	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Documentation on file for verification	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Retention milestones were recorded and Tracking Log completed	

On The Job Training (OJT)		Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<b>Employer Name/Address</b>		
<b>Employer Info</b>	Total full-time employees _____; Employees at the unit _____; Supervisor/Employee ratio _____/_____; Total OJT participants previously placed with this employer _____; Total former OJT's currently employed full time unsubsidized _____.	
<b>OJT Info</b>	OJT duration _____ (M/W); Total hours _____; Wage \$ _____ (H/W/M); Benefits included (Y / N); Employer reimbursement rate _____%.	
<b>Job Description</b>	Job title _____; OES code _____ Industry sector _____; High growth sector (Y / N)	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	OJT agreement with employer and participant signed/dated prior to OJT start?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	OJT need and benefit established and documented thru assessment?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	Participant has the skills and qualifications to successfully complete the OJT?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	IEP supports the OJT and is developed and signed prior to OJT start?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	Employer is committed to hiring participant upon successful completion?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	AJCC monitoring OJT progress monthly to ensure goals are met?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	Agreement includes an outline with detailed topics and skills with time at each?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	Monthly performance reviews on file?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	Final evaluation on file? MUST include whether participant satisfactorily met the training objectives. Should be consistent with monthly performance reviews.	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	Upon completion, was the participant hired?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>	Case notes acceptable?	

Case Closure		Requirement Met: <input type="checkbox"/> NA <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Comments:</b>
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Was this file a positive case closure?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	If participant was exited as employed, was employer information added? Employer Name: _____ Start Date: _____	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Was case closure completed with appropriate documentation (i.e. school status, employment verification)?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	Was the participant exited as a global exclusion?	
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/> <b>N/A</b>	If so, is documentation supporting a Global Exclusion on file (i.e. incarceration, institutionalization, death etc.)?	

**Certification of Review**

WDACS REPRESENTATIVE NOTES:

All Requirements Met:  Yes  No

NOTES:

\_\_\_\_\_  
*AJCC REPRESENTATIVE PRINT NAME*

\_\_\_\_\_  
*SIGNATURE*

\_\_\_\_\_  
*DATE*

\_\_\_\_\_  
*WDACS REPRESENTATIVE PRINT NAME*

\_\_\_\_\_  
*SIGNATURE*

\_\_\_\_\_  
*DATE*