

Case Note Guidance for WIOA Adult, Dislocated Worker, and Youth Programs

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Subject Line	Case Note Description	Policy or Procedure Reference
WIOA Orientation	State that the participant attended WIOA orientation.	
Eligibility	State the participant’s eligibility – Low income, Dislocated Worker, NDWG, 1E, Out-of-school Youth, In-School Youth. Explain how you found the participant eligible.	The Partnership’s Eligibility Policy Letters: Policy No. 2016-PL-02 (Adult) Policy No. 2016-PL-03 (Dislocated Worker) Policy No. 2018 PL-06 Change1 (Youth)
BSD Assessed with Screening Tool	Use <u>new Career Connect template</u> Date of screening and determination whether the participant was found basic skills deficient or not. Additionally, if the participant is basic skills deficient the IEP/ISS should show how this will be addressed. A signed copy with participant’s signature is placed in file.	The Partnership’s Basic Skills Assessment Procedure
Testing Exception - (Youth College Graduate OR Youth Post-Secondary Entrance/Placement Exam) Testing Exception - Youth BSD Assessment	When youth do not need to test explain why. <ul style="list-style-type: none"> • <u>College Graduate</u> – Show the date the College Degree was received and the institution/school and program/area of study. • <u>Post-Secondary Entrance / Placement Exam</u> - Date of the entrance/placement exam and the Institution/school and program/area of study. <i>It must have been within the last 6 months.</i> Also provide a verification whether the score was high enough that the youth will not need to take developmental or remedial courses. • <u>Testing Exception due to Disability - Unable to complete the test due to disabling condition</u> 	The Partnership’s Basic Skills Assessment Procedure
Objective Assessment Summary	Detail the following that apply: <ul style="list-style-type: none"> • <u>Testing results</u> – Results from basic skills assessment like TABE, CASAs, etc. and other testing or skills assessments 	The Partnership’s Objective Assessment Summary

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	<ul style="list-style-type: none"> • <u>Barriers to Employment</u> - Note if application displays or participant reports lack of/or sporadic work history, restricted work schedule, displaced homemaker, restrictions in commuting, unrealistic wages expectations, single or pregnant /parent youth, runaway youth, LWIA designated barrier or no barriers to employment. Note if the application displays or participant reports legal issues) • <u>Other Assistance Received</u> – Note SNAP recipient or recipient of other partnering Agency services • <u>Vocational/Occupations Factors</u> – Note obsolete work skills, current credentials, or current/expired/revoked license • <u>Education Factors</u> - Note if the participant is a HS drop out, limited English proficient, lacks computer skills, Bilingual, basic skills deficient, enrolled in ABE/literacy, behind a grade level (youth only), financial aid recipient, or needs interpretation services • <u>Education History</u> - Note highest level completed, GED, or currently in school. • <u>Employment Expectations</u> – Note by when participant plans to get back to work; Desired occupation or industry, full or part-time, salary, shift preference, maximum commute miles; Is participant interested in career planning and/or training services? If yes to training, note training preferences • <u>Post-secondary Expectations</u> – Is youth seeking post-secondary education? If yes to post-secondary, note any preferences • <u>Workplace Behavior</u> – Note job search assistance requested such as job search, referrals to employers, online applying, interviewing skills, resume assistance, etc.; Not any motivational factors affecting employment, and note appearance and hygiene; Does participant need labor market information? Is application complete? Any special accommodations needed? 	
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	<ul style="list-style-type: none"> • <u>Work Readiness</u> – Number of children and dependent care status, reliable transportation, driver’s license/endorsements, or work attire needs? Note if the participant reports any issues that can impede starting job (or training) • <u>Employment</u> – List any relevant information about last employer/s 	
<p>Career Exploration</p> <p><i>If this service is provided for an enrolled participant, ensure you enter the service.</i></p> <p><i>If the participant completes the service before enrollment, then just case note it.</i></p>	<p>State which Career Connect tool your participant used to determine career path or potential training. Explain the outcomes as discussed with the participant. If the participant used different exploration tools on another website (i.e. Road Trip Nation (Youth only), TOPS, LMI, Illinois workNet Tools), note the name and explain outcomes.</p>	<p>The Partnership’s Career Exploration Procedure (effective 04/01/2021)</p>
<p>Training Justification</p> <p><i>This case note covers mechanisms used to evaluate and identify the participant’s employment goal, appropriate objectives, and the needed combination of services to address their barriers, as reflected in the OAS and IEP/ISS.</i></p> <p><i>For ITA processing, EdAssist has been be advised of the case note requirement.</i></p>	<p>The case note must explain how the participant is matched for the training program and must include:</p> <ul style="list-style-type: none"> • Job readiness, career exploration testing, and assessment of the participant’s aptitude and interests related to the selected training program. • If the participant has an associate degree or above; passed the school entrance/placement exam dated within the last year for adult program clients and 6 months or less for youth programs, which is related to the program description in Illinois workNet; whether the Training Program does not require Math test or if the client is only going to participate in an OJT, Customized Training, or Work Experience. 	<p>The Partnership’s Basic Skills Assessment Procedure</p>
<p>Assessment Exception for Adult or Dislocated Worker</p>	<p>Explain which of the following was used and why:</p> <ul style="list-style-type: none"> • College Graduate, • College Placement Test 	<p>The Partnership’s Basic Skills Assessment Procedure</p>

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<p><i>Use during the training certification process when an Adult and Dislocated Worker meets a testing exception.</i></p>	<ul style="list-style-type: none"> • Training Program does not require Math test, or • Enrolling in OJT/WEX/Customized Training 	
<p>Development of IEP/ISS</p> <p><i>The IEP/ISS must be utilized each time when speaking to participant.</i></p> <p><i>A signed copy needs to be given to participant and one is kept in the file.</i></p>	<p>Reference that a comprehensive assessment was conducted. Identify skills gaps and provide plan on how to address it.</p> <p>Summarize the goal and objectives of the IEP/ISS. Explain how participant’s skills match the overall goal. For Youth, the ISS should address the 14 core elements as well.</p> <p>Reminder – IEP/ISS Objectives– All IEP/ISS Objectives must have a Justification note in the Comments section of Career Connect’s IEP/ISS. Your note should justify why it is needed to help reach the goal.</p>	<p>The Partnership’s IEP/ISS Procedure (updated April 1, 2021)</p>
<p>Update, Review, or Close IEP/ISS – (Use the name of Objective (s) as appropriate)</p> <p><i>An IEP/ISS goal change requires the IEP/ISS to be signed again and case noted.</i></p> <p><i>When a new objective is added to the IEP/ISS, the participant should initial the IEP/ISS and a case note to this affect must be sent to the participant.</i></p>	<p>Case note what was updated and how this applies to the participant’s goal.</p>	
<p>Co-enrolled in IWDS</p> <p><i>A participant should only be co-enrolled if each agency is providing services that the individual needs to meet</i></p>	<p>The service should include a case note explaining why the customer is co-enrolled and which agency is administering the co-enrolled grant.</p>	<p>The Partnership’s Co-enrollment in WIOA LWIA 7 and Statewide Grants (LWIA 90) Procedure</p>

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<p><i>his/her employment goals outlines in the IEP/ISS.</i></p> <p><i>Both grantees must enter and close services in a timely and accurate manner.</i></p>		
<p>Support Service- (Transportation Assistance, Medical, Tools/Uniforms/Equipment, Child Dependent Care, Housing, Cash Incentive/Stipends, or Other)</p>	<p>First, justify your participant’s need for the support service. Describe the support service requested (transportation, uniforms, gas cards, stipend etc.) and quantify the support service provided.</p>	<p>Support Services Policy Letter Effective 12/14/17)</p>
<p>Occupational Skills Training (ITA)</p>	<p>State the name of the program that the participant is starting, the start date, and projected end date. Summarize the course objectives. Note that the participant is aware of progress reports and check-in dates. Always note the next step.</p>	<p>The Partnership’s ITA Policies & Procedures (Updated 5/8/2020)</p>
<p>ISTEP for OJT</p> <p><i>(ISTEP- Individualized Skills and Training Plan)</i> <i>(OJT - On-the-Job)</i></p> <p><i>This document must be utilized each time when speaking to participant until the OJT is completed/terminated.</i></p> <p><i>A signed copy needs to be given to participant and one is kept in the file.</i></p>	<p><u>For OJTs only.</u> Summarize the ISTEP by describing the skills gaps and hours of training.</p>	<p>The Partnership’s ISTEP/OJT Procedure (Effective December 5, 2017)</p>
<p>OJT Training</p> <p>WBL - OJT (For youth only)</p>	<p>Outline employer name, position to be trained in, training components, and training start and planned end date. Note next steps to coach and check-in with the participant.</p>	<p>The Partnership’s ISTEP/OJT Procedure</p>

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<p><i>The OJT may be a different date than hire date</i></p>		
<p>Customized Training (CT)</p> <p><i>Doing weekly contact on an CT or IWT in the first month is <u>very important</u>. After that you must check-in every 30 days.</i></p>	<p>Outline training components, training start and planned end date. Note next steps to coach and check-in with the participant and whether progress attendance sheets are required and everywhen.</p>	<p>The Partnership's Customized Training Policy Letter (Revised 3/13/2019) <u>and/or</u> Contact your Regional Manager</p>
<p>Start of WBL Assignment</p> <p><i>(WBL -Work based learning)</i></p>	<p>Detail opportunity by describing work experience components and participant's schedule. Include if the assignment is paid, unpaid, part of a pre-apprenticeship. Or is it an internship and not limited to the summer months? Also, indicate which days the participant is to return to the Agency for check-in. This also applies to youth work-based learning.</p>	<p>The Partnership's Work Experience Policy Letter & Attachments (Revised 7/7/2020)</p>
<p>Site Visits (OJT, WBL, CT)</p> <p><i>At least, two must be done one short after and one during the service. <u>This will be done by the Agency's business service rep.</u></i></p>	<p>If the participant is in OJT, WBL, or CT, describe visit at the site to ensure terms of Agreement are being met.</p>	<p>The Partnership's OJT Site Monitoring Form <u>or</u> Work Experience Policy Letter & Attachments (Revised 7/7/2020) <u>or</u> Contact your Regional Manager</p>
<p>WBL Progress</p> <p><i>Doing weekly contact on a WBL is <u>very important</u>.</i></p>	<p>Explain the participant's WBL experience noting what the participant has learned. Address any needs or challenges noted by the participant on weekly basis.</p>	<p>The Partnership's Work Experience Policy Letter & Attachments (Revised 7/7/2020)</p>
<p>Placement</p> <p>Training Related Placement</p> <p><i>If the placement is related to training services.</i></p>	<p>Detail the opportunity: Note the employer name, position, wages, full- or part-time and start date. Also add any other pertinent information about the job or that may be useful for verifying employment in the future.</p>	
<p>Training (ITA, OJT, or CT) Progress</p> <p><i>Always mediate challenges that come up asap with the WIOA Provider or Employer and document the results.</i></p>	<p>If attendance sheets are expected and were collected this should be noted and along with any progress or comments noted by the instructor or WIOA ITA Provider.</p>	

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<p>End of (OJT, WBL, or CT)</p>	<p>Explain in detail the reason for the end of the OJT, WBL, or CT and outline next steps for participant. Note what skills or career experience the participant obtained. State the next steps for participant.</p>	<p>The Partnership’s ISTEP/OJT Procedure <u>or</u> Work Experience Policy Letter & Attachments (Revised 7/7/2020) <u>or</u> Contact your Regional Manager</p>
<p>Credential Obtained</p>	<p>State the name of the credential, the date credential received and whether another credential is required.</p>	<p>The Partnership’s Credential Procedure (Revised 9/6/2018)</p>
<p>Measurable Skills Gain</p>	<p>Explain how this measure was met. Note the type of achievement category – post-secondary training, secondary transcript, training milestone, skill progression and Educational Functional Level (EFL).</p>	<p>The Partnership’s Measurable Skills Gains Procedure (Updated 10/14/20)</p>
<p>Monthly Contact</p> <p><i>These case notes must display 1:1 contact, two-way conversations every 30 days.</i></p>	<p>The participant’s IEP/ISS will drive monthly check-in conversations and career coach management. Next steps must always be explained to the participant and documented.</p> <p>When you cannot reach the participant note the day of the week and time you made the attempt and whether or not you were able to leave a message via a phone number or if you sent an email, text, etc. If you leave a message with someone, attempt to find out who you left the message with and ask for a good time or phone number to reach the participant.</p>	
<p>Exit</p>	<p>State when the participant’s file was exited and clearly state the reason for exit.</p>	<p>The Partnership’s Closure/Exit Procedure (Revised 11/6/2019)</p>
<p>Follow-up after Exit</p> <p><i>If the participant indicates he/she is not in need of services, note this in the appropriate monthly case note.</i></p> <p><i>Reminder that youth can receive support services in Follow-up</i></p>	<p>On a monthly basis after Exit, follow up with the participant. Provide and document services offered.</p>	<p>The Partnership’s Follow-up Procedure (Revised 11/7/2019)</p>

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<p>(Any Title of Service) (Add your own subject)</p> <p><u>**The service/subject may require updating the IEP/ISS**</u></p>	<p>For <u>any other services opened including ongoing services and all Same Day Services (SDS)</u> describe the service, note the discussion with the participant and why the service is needed. Next steps should always be explained.</p> <p>At times the reason for the email is something outside of the normal subject lines noted here or outside of the WIOA Services & Definitions, such New Phone or New Address. In those cases, label the subject line accordingly.</p>	<p>The Partnership’s Updated WIOA Services & Definitions (Effective October 2020)</p>
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