**Workforce Board**

**Fiscal Year 2021**

**WIOA Youth Customer File Review**

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| **Youth Name:** | **MOSES ID:** | **MassHire Career Center:** |

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| --- | --- | --- | --- | --- |
| **Section 1: Out of School Youth Eligibility (OSY) - 681.210** | | **Yes** | **No** | **Comments** |
| 1. | Is the youth attending any school? (as defined under State law) |  |  |  |
| 2. | Is the youth between the ages of 16-24? |  |  |  |
| 3. | Was the youth a US Citizen at the time of enrollment?  If no, what documentation was submitted for proof of eligibility to work in the US? |  |  |  |
| 4. | Selective Service Compliant? (N/A if not applicable) |  |  |  |
| 5. | Do one or more of the following Significant Barriers (SB) apply to the youth? |  |  |  |
|  | * A school dropout |  |  |  |
|  | * Within the age of compulsory school attendance, but has not attended school for at least the most recent complete school year calendar quarter |  |  |  |
|  | * A recipient of a secondary school diploma or its recognized equivalent who is a low-income individual and is either basic skills deficient or an English language barrier |  |  |  |
|  | * An offender |  |  |  |
|  | * A homeless individual, homeless child or youth, or a runaway |  |  |  |
|  | * An individual in foster care or who has aged out of the foster care system or has attained 16 years of age and left foster care kinship guardianship or adoption, a child eligible for assistance under sec. 477 of the Social Security Act (42 U.S.C. 677), or in an out-of-home placement |  |  |  |
|  | * An individual who is pregnant or parenting |  |  |  |
|  | * An individual with a disability |  |  |  |
|  | * A low-income individual who requires additional assistance to enter or complete an educational program or to secure or hold employment |  |  |  |
| **Section 2: In School Youth (ISY) Eligibility – 681.220** | | **Yes** | **No** | **Comments** |
| 1. | Is the youth attending school (as defined by State law)? |  |  |  |
| 2. | Is the youth not younger than age 14 or (unless an individual with a disability who is attending school under State law) older than age 21 at time of enrollment |  |  |  |
| 3. | Was the youth a US Citizen at the time of enrollment?  If no, documentation used to work in the US? |  |  |  |
| 4. | Selective Service Compliant? |  |  |  |
| 5. | Is the youth a low-income? |  |  |  |
| 6. | Does the youth have one of the following barriers? |  |  |  |
|  | * Basic skills deficient |  |  |  |
|  | * An English language learner |  |  |  |
|  | * An offender |  |  |  |
|  | * A homeless individual, a homeless child or youth, or a runaway |  |  |  |
|  | * An individual in foster care or has aged out of the foster care system or who has attained 16 years of age and left foster care for kinship guardianship or adoption, a child eligible for assistance under sec. 477 of the Social Security Act (42 U.S.C. 677), or in and out-of-home placement |  |  |  |
|  | * An individual who is pregnant or parenting |  |  |  |
|  | * An individual with a disability |  |  |  |
|  | * An individual who requires additional assistance to enter or complete an educational program or to secure or hold employment |  |  |  |
| **Section 3: MOSES/Data Entry** | | **Yes** | **No** | **Comments** |
|  | MOSES data recording should be in accordance with MassWorkforce Issuance 100 DCS 08.112.1 |  |  |  |
| 1. | Has EEO been recorded in MOSES at least once for this region? |  |  |  |
| 2. | Are services being provided every 30 or 60 days?  Please note 30 or 60 in comments section. |  |  |  |
| 3. | Do services entered include a corresponding MOSES note? |  |  |  |
| 4. | Are MOSES notes factual, non-judgmental, concise, and relevant? |  |  |  |
| 5. | Do MOSES notes include information cut and pasted from emails? |  |  |  |
| 6. | Is this individual dual enrolled as an adult or dislocated worker? If no, does documentation suggest they should be enrolled? |  |  |  |
| **Section 4: Performance Management** | | **Yes** | **No** | **Comments** |
| 1. | Has a measurable skills gain (MSG) goal been set? |  |  |  |
| 2. | Is attainment of an industry recognized postsecondary credential documented in MOSES during the program year or within one year after exit? |  |  |  |
| 2a | If yes:   * Is that credential saved in a physical or electronic file? * Does the date listed on the credential match the date the credential is listed in MOSES? |  |  |  |
| **Section 5: Individual Service Strategy (ISS)** | | **Yes** | **No** | **Comments** |
| 1. | Does the ISS include individual’s skill levels? |  |  |  |
| 2. | Does the ISS include individual’s service needs? |  |  |  |
| 3. | Does the ISS include individual’s strengths? |  |  |  |
| 4. | Does the ISS include career planning and the results of an objective assessment? |  |  |  |
| 5. | Does the ISS include education and employment goals? |  |  |  |
| 6. | Does the ISS include achievement objectives and services? |  |  |  |
| 7. | Does the ISS directly link to one or more performance indicators? |  |  |  |
| 8. | Does the ISS identify an appropriate career pathway? |  |  |  |
| 9. | Is progress towards benchmarks and goals being reviewed? |  |  |  |
| **Section 6: Program Elements** | | **Yes** | **No** | **Comments** |
| 1. | Is the youth receiving any of the following Program Elements? |  |  |  |
|  | * Tutoring, studying skills training, instruction and evidence-based dropout prevention and recovery strategies that lead to completion of the requirements for a secondary school diploma or its recognized or for a recognized postsecondary credential |  |  |  |
|  | * Alternative secondary school services or dropout recovery services |  |  |  |
|  | * Paid and unpaid work experience |  |  |  |
|  | * Occupational skills training |  |  |  |
|  | * Education offered concurrently with and in the same context as workforce preparation activities and training for a specific occupation or occupation cluster |  |  |  |
|  | * Leadership development (681.520) |  |  |  |
|  | * Supportive services (681.570) |  |  |  |
|  | * Adult mentoring (681.490) |  |  |  |
|  | * Follow-up services for not less than 12 months after the completion of participation |  |  |  |
|  | * Comprehensive guidance and counseling (681.510) |  |  |  |
|  | * Financial literacy education (681.500) |  |  |  |
|  | * Entrepreneurial skills training (681.560) |  |  |  |
|  | * Labor market and employment information |  |  |  |
|  | * Activities that help youth prepare for and transition to postsecondary education and training |  |  |  |
| **Section 7: Supportive Services/Needs Related Payments (NRP)** | | **Yes** | **No** | **Comments** |
| 1. | Is the youth customer receiving supportive services? If so, what type? |  |  |  |
| 2. | Is the local policy for supportive services being followed? Please note if local policy does not exist. |  |  |  |
| 3. | Is the youth receiving NRP? |  |  |  |
| 4. | Is the local Policy for NRP being followed? Please note if local policy does not exist. |  |  |  |
| 5. | Are supportive services recorded properly in MOSES? If not, why? |  |  |  |
| **Section 8: Virtual Services** | | **Yes** | **No** |  |
| 1. | Are services and workshops being delivered virtually? If so, list events offered. |  |  |  |
| 2. | Which platforms are being used to deliver such services? |  |  |  |
| 3. | Are youths actively participating in virtual services? If so, how often |  |  |  |
| 4. | Have you identified any specific challenges with virtual services? If so, please explain. |  |  |  |
| 5. | Have you experience accomplishments with providing virtual services? If so, please explain. |  |  |  |
| **Section 9: Partner Referrals** | | **Yes** | **No** | **Comments** |
| 1. | Is the local policy on partner referrals being followed? Please note if local policy does not exist. |  |  |  |
| **Section 10: Priority of Service** | | **Yes** | **No** | **Comments** |
| 1. | Is state and local policy on priority of services being followed? Please note if local policy does not exist. |  |  |  |