



**Broward Workforce Development Board**  
**Audit Committee**  
**Monday, August 14, 2023**  
**11:00 a.m. – 12:00 p.m.**

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Zoom Meeting ID:	86157011208
Zoom Password:	522089
Zoom Call In:	+1 646 876 9923

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**CareerSource Broward Boardroom,**  
**2890 West Cypress Creek Road, Ft. Lauderdale, FL 33309**

**This meeting is being held in-person. This meeting is also virtually accessible via Zoom video conferencing using the link below.**

<https://us02web.zoom.us/j/86157011208?pwd=K1E3SFZRZGpBRXIYcVF0eFljMTBpZz09>

**PROTOCOL FOR TELEPHONE/ZOOM MEETING**

1. Please state your name when making or seconding a motion. Such as "I move the item, and your name – "Jane Doe". Please also identify yourself when asking a question.
2. Put your phone/microphone on mute when not speaking. Don't forget to take it off when you wish to speak. Telephone users must press \*6 to mute or unmute yourself.
3. Votes in the affirmative should be "aye" and in opposition should be "no" (delays in responding sometimes make it difficult to determine the intent of the vote).
4. Please be in a quiet area free of background noise, so we may hear you clearly when you are speaking. When using Zoom, please make sure the background is appropriate or choose one of their virtual backgrounds.
5. If you are calling and must leave the call, please don't put your phone on hold. In some cases, we will get music or recorded messages and we will not be able to conduct business.
6. If you are using your phone for audio, please identify yourself on the screen and state the last 4 digits of the number you are calling from.
7. Please note the chat function has been disabled.

## **A G E N D A**

**CareerSource Broward (CSBD)**  
**2890 West Cypress Creek Road, Ft. Lauderdale, Florida 33309**

The Committee is reminded of conflict of interest provisions. In declaring a conflict, please refrain from voting or discussion and declare the following information: 1) your name and position on the Board, 2) the nature of the conflict and 3) who will gain or lose as a result of the conflict. Please also fill out form 8B prior to the meeting.

### **IDENTIFICATION AND INTRODUCTION OF ANY UNIDENTIFIED CALLERS**

### **APPROVAL OF MINUTES**

Approval of the Minutes of the 2/13 Exec and Audit Combined Committee meeting.

<b>RECOMM</b>	Approval
<b>ACTION</b>	Motion for Approval
<b>EXHIBIT</b>	Minutes of the Exec and Audit Combined meeting

**Pages 6 – 16**

### **NEW BUSINESS**

#### **1. Selection of an Audit Firm**

Consideration to recommend Anthony Brunson P.A. as our Audit Firm. Their proposal provides for WatsonRice to provide the engagement partner in accordance with state rules which allows for the continuation of the same firm beyond 5 years as long as the engagement partner is rotated. A Request for Quotes (RFQ) was issued on 5/15, with responses due 6/16. We sent the RFQ to 10 firms as well as to the firms which are registered to be noticed when an RFQ is issued, altogether at least 15 firms. We received a quote from Anthony Brunson, P.A. our current Audit Firm, and one (1) no bid from Tri Merge CPA. A Review Committee Meeting was held on 8/7. After hearing from Mr. Brunson and representatives from WatsonRice, the Committee rated and ranked the proposal which had an average score of 93. The Review Committee then voted to recommend the selection of Anthony Brunson, P.A. at a cost of \$34,000, a \$1,000 increase over last year. The contract if approved will allow for 4 one-year renewals subject to governing board approval.

<b>RECOMM</b>	Approval
<b>ACTION</b>	Motion for Approval
<b>EXHIBIT</b>	Memo #01 – 23 (LS)

**Pages 17 - 18**

**2. Renewal of Taylor Hall Miller Parker, P.A. Program Monitoring Contract for PY 23/24**

Consideration to renew the contract for program monitoring with Taylor Hall Miller Parker, P.A. for the 23/24 program year. The cost of the renewal is \$81,000 for 3 visits at \$27,500 per visit. This is the same cost as last year. CSBD is satisfied with the services. This will be the first of up to 4 one-year renewals.

<b>RECOMM</b>	Approval
<b>ACTION</b>	Motion for Approval
<b>EXHIBIT</b>	None

**3. Cherry Bekaert Fiscal Monitoring Contract Renewal for PY 23/24**

Consideration to renew the contract for fiscal monitoring with Cherry Bekaert, LLP for the 23/24 program year. The cost of the renewal is \$73,500 for 3 visits at \$24,500 per visit. This is an increase of \$1,500 over last year. CSBD is satisfied with the services. This will be the first of up to 4 one-year renewals.

<b>RECOMM</b>	Approval
<b>ACTION</b>	Motion for Approval
<b>EXHIBIT</b>	None

**4. Central One-Stop Purchase**

During the Board retreat there was a healthy discussion regarding the purchase of the Central One Stop complex. At that time it was suggested that we query the Department of Management Services (DMS) regarding a price for the entire complex. We are pursuing this and have been in contact with DMS. In preparation for going forward we are seeking input from the Committee on options for the funding of the project.

<b>MOTION</b>	None
<b>ACTION</b>	Discussion
<b>EXHIBIT</b>	None

## REPORTS

### 1. General Fund Balance

At the 12/2022 Board meeting, we reported that the General Fund balance was \$901,711. From 11/1/22 through 6/30/23, we realized revenues of \$334,195 and incurred expenditures of \$215,625 for an ending balance including the reserves, \$1,020,281 in the General Fund as of 6/30/23.

<b>ACTION</b>	None
<b>EXHIBITS</b>	Memo #02 – 23 (FS) General Fund Spreadsheet

Pages 19 – 21

### 2. Budget vs. Actual Expenditure Report

In accordance with good fiscal practices we provide a Budget vs. Actual Expenditure Report to the Audit Committee. Each year we budget to spend 100% of our grants. As the governing boards are aware WIOA funds are available for 2 years and also allow for a 20% allocation carry forward each year to avoid a cliff effect due to fluctuations in allocations as we experienced this year. The State extended the period for the expenditure of welfare transition program (WTP) funds this year through August, and the funds are being invested in the summer program. The strategies we put in place last year are working.

<b>ACTION</b>	None
<b>EXHIBIT</b>	Memo #01 – 23 (FS)

Pages 22 – 24

### 3. Cherry Bekaert LLP Fiscal Monitoring - Report #2 PY 22/23 Issued 5/2023

Cherry Bekaert issued their monitoring report for the period 10/1/22 through 2/28/23. Cherry Bekaert reviewed a total of 921 elements. There were no findings or observations for a 0% error rate.

<b>ACTION</b>	None
<b>EXHIBITS</b>	Memo #01 – 23 (QA) Chart of Findings

Pages 25 – 26

4. **Taylor Hall Miller Parker, PA Program Monitoring - Report #2 PY 22/23 Issued 2/2023**

THMP issued their Program Monitoring Report for the period 11/18/22 through 2/21/23. They reviewed a total of 177 files consisting of 6,029 elements. There were 4 findings and 11 observations. This equates an error rate of .06%, or less than 1%. All findings and observations were corrected except where cases were closed, and no further action could be taken.

**ACTION** None  
**EXHIBIT** Memo #02 – 23 (QA)

**Pages 27 – 35**

5. **DEO Programmatic and Financial Monitoring Report for Period 4/2021 through 3/2022 Issued 6/2023**

The Florida Department of Economic Opportunity (DEO) issued their Financial and Program Monitoring Report on 12/1/22 for the period 4/21 through 3/22. They reviewed a total of 166 program files consisting of 6,502 elements. There were 0 fiscal findings, observations, and technical assistance items. There were 9 program findings and 6 non-compliance issues. The program findings equate to an error rate of .14% less than 1%. All findings and non-compliance issues were corrected except where cases were closed, and no further action could be taken. Our Corrective Action Plan was accepted on 4/13/23.

**ACTION** None  
**EXHIBIT** Memo #03 – 23 (QA)

**Pages 36 – 47**

**MATTERS FROM THE AUDIT COMMITTEE**

**MATTERS FROM THE FLOOR**

**MATTERS FROM THE PRESIDENT/CEO**

**ADJOURNMENT**



**Broward Workforce Development Board  
Combined Audit and  
Executive Committee**

**Monday February 13, 2023**

**12:00 Noon – 1:30 p.m.**

**Zoom Meeting ID: 861 4610 2753**

**Zoom Password: 009119**

**Zoom Call in: +1 646 876 9923**

## **MEETING MINUTES**

**CareerSource Broward Boardroom  
2890 West Cypress Creek Road, Ft. Lauderdale, FL 33309**

The Committees were reminded of the conflict-of-interest provisions.

**ATTENDEES IN-PERSON:** Frank Horkey, Dawn Liberta, Francois Leconte, Kevin Kornahrens, Rick Shawbell, Sandy McDonald, Keith Costello, and Heiko Dobrikow, who chaired the meeting

**ATTENDEES VIA ZOOM:** Zac Cassidy, Dr. Ben Chen, Dr. Lisa Knowles, Jim Ryan, Marjorie Walters, and Bob Swindell

**GUESTS:** Anthony Brunson, P.A., and Audrey Robinson with Brunson, P.A.

**STAFF:** Carol Hylton, Ron Moffett, Rochelle Daniels, Mark Klinecicz, Christine Azor, and Amy Winer

### **APPROVAL OF MINUTES**

Approval of the Minutes of the 12/5 meeting.

**On a motion made by Frank Horkey and seconded by Rick Shawbell, the combined Executive and Audit Committee unanimously approved the 12/5 minutes.**

### **MATTERS FROM THE EXECUTIVE COMMITTEE CHAIR**

Mr. Dobrikow thanked Frank Horkey for his service as Chair.

Mr. Dobrikow reviewed the economic and workforce dashboard with the committee and used it to discuss his vision for the next two years. Mr. Dobrikow envisions:

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- CSBD to be the workforce incubator for Broward County meaning that we will continue telling our story and educating employers on the value of being registered in Employ Florida and using our services such as posting positions, referring candidates, and assisting with upskilling their employees.
  - Increasing paid internships and expanding the SYEP to more youth and employers and,
  - Continuing our partnership with Prosperity Broward to assist those who do not job search on the internet and to encourage employers to go into these communities and build relationships.

## **MATTERS FROM THE AUDIT COMMITTEE CHAIR**

None

## **MATTERS FROM THE PRESIDENT/CEO**

Ms. Hylton informed the committee that she had a productive meeting with Bob Swindell and David Coddington of the Fort Lauderdale Alliance, regarding areas of emphasis for our out-stationed staff. They discussed the State's new letter grades which are partially based on local board expenditures. In the past, our staff out-posted to the Fort Lauderdale Alliance focused on bringing state funds to Broward County through the Quick Response Training program. Now, with the implementation of the letter grades, a better use of our out-stationed staff would be to market CSBD employer-based training services like Incumbent Worker Training program to local employers.

Ms. Hylton went on to discuss some of the changes that were implemented as a result of the Management Study. These included 1) separating communications from the Communications and Business Relations Department 2) creating a Communications Department and 3) hiring a Senior Vice President of Communications, Andrew Skobinsky. Mr. Ash continues as Vice President of Business Services. To reduce the direct reports to the Office of the President it was also recommended that the position of Executive VP of Operations be created. Mr. Klincewicz, VP of Information Technology was promoted to the Executive Vice President of Operations position.

Mr. Leconte inquired about Mr. Skobinsky's background. Ms. Hylton responded that Andrew brings considerable experience in corporate and cross-cultural communications forged over a 30+ year career.

Ms. Hylton reminded the committee that CareerSource Florida (CSF) is meeting on Friday to discuss local area realignment with the board directors, at which time the Ernst and Young report will be presented. On Monday, Ms. Hylton and Dr. Knowles will be in attendance at the Florida Workforce Development Association meeting. CSF's Board meeting is the same day as our Board meeting so Ron will remain and attend the meeting. We are hopeful that Ron will be able to update us during our governing boards' meeting with the CSF Board's recommendation.

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Lastly, Ms. Hylton reported on our staff planning session which occurred last week. We combined the staff from all the centers over five days and hired an outside facilitator to frame the discussion and provide the reports. This was the first time this approach was used, and we have had positive feedback from staff.

## **NEW BUSINESS**

### **1. Anthony Brunson, P.A. Audit for FY 21/22 Presentation**

Considered acceptance of the Audit Report for the period ending 9/30/22. Anthony Brunson, PA, has completed its draft Audit Report for the 21/22 CareerSource Broward fiscal year. The audit is clean and has an unqualified opinion. There are no findings or management recommendations.

Anthony Brunson, P.A. provided details of the Audit Report for the 21/22 fiscal year. stating there were no findings or management recommendations.

Mr. Frank Horkey inquired if the “Due to Due from” had been resolved and if Mr. Brunson agreed with the actions taken. Mr. Brunson responded yes he was in agreement and that this had been resolved. Mr. Horkey thanked everyone who worked on this.

Mr. Dobrikow recognized the CSBD team for a clean audit report.

**On a motion made by Frank Horkey and seconded by Francois Leconte, the combined Executive and Audit Committee unanimously approved the Audit Report for the 21/22 fiscal year.**

### **2. Appointments to the Broward Workforce Development Board**

Considered recommending the appointment of 1) Mark Schaunaman, Business Manager, International Union of Operating Engineers Local 487, and President, AFL-CIO South Florida Building Trades Council and 2) Tara Williams, Director, Broward County Human Services Department to the Organized Labor and Community Based Organization Category. The appointees will fill open slots in this mandatory category of membership due to the resignation of Mayor Frank Ortis and the retirement of Ismael Martinez. Approved at the 2/6 Organizational Resources Committee meeting.

Ms. Hylton informed the committee that Mayor Ortis would like to spend more time at his restaurant. Both of these positions on the board are required slots. Ms. Hylton contacted Mr. Cassidy to get a recommendation to fill the labor slot to replace Mayor Ortis and Mr. Cassidy recommended Mark Schaunaman. Ms. Hylton spoke with Ms. Tara Williams, Mr. Martinez's former supervisor, and she agreed to fill his slot on the board. Ms. Williams oversees the Family Success Administration, Community Partnerships, Broward Addiction Recovery, Elderly and Veterans Services, Crisis Intervention Services, Housing Options, Equity and Community Investments.

Mr. Shawbell inquired where we stand with replacing Dr. Cartwright. Ms. Hylton responded that she would reach out to the individual appointed to the interim superintendent position



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within the next week and go from there.

**On a motion made by Keith Costello and seconded by Dr. Lisa Knowles, the combined Executive and Audit Committee unanimously approved Mark Schaunaman, Business Manager, International Union of Operating Engineers Local 487, and President, AFL-CIO South Florida Building Trades Council to be recommended for appointment to the BWDB.**

**On a motion made by Francois Leconte and seconded by Rick Shawbell, the combined Executive and Audit Committee unanimously approved Tara Williams, Director of Broward County Human Services Department to be recommended for appointment to the BWDB.**

### **3. 2023 BWDB Legislative Agenda**

Considered 1) approving the 2023 BWDB Legislative Agenda and 2) identifying Committee members who can reach out to our local delegation to present our agenda. We also providing the 2023 session bills filed relating to workforce development. Approved at the 1/25 Strategic Planning Committee meeting.

Mr. McDonald discussed the 2023 BWDB Legislative Agenda and legislative session dates. He stated the Legislative Agenda would be updated if changes were needed.

Mr. Shawbell stated that he was keeping an eye on House Bills 461 and 459, which pertain to apprenticeships.

Mr. Dobrikow encouraged the committee members to track specific bills related to workforce so that they can reach out to our legislative delegation to discuss our agenda.

**On a motion made by Sandy McDonald and seconded by Francois Leconte, the combined Executive and Audit Committee unanimously approved the 2023 BWDB Legislative Agenda and identified Committee members who can reach out to our local delegation to present our agenda.**

### **4. 2023 Community Partner Legislative Agendas**

Considered supporting legislative agendas from community partners that have items related to workforce development. At the 1/25 Strategic Planning Committee meeting Broward County and the United Way included workforce elements and were approved. Since then, we have added Florida Economic Development Council and Florida Restaurant & Lodging Association to the agendas we are supporting.

Mr. McDonald introduced the 2023 community partner legislative agenda items that pertain to workforce development. He stated that community partnerships are the key to using resources, getting the message out, and aligning with strategic planning across Broward County.

Mr. Leconte inquired why the County provides incentives to companies that are not located in Broward County instead of looking at Broward County businesses. Mr. McDonald stated that the BRAVO action team is not just recruiting new businesses but expanding existing businesses by providing incentives to them as well.

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Mr. Costello inquired if there are any programs for small business loans. Mr. McDonald responded yes; there is the SOAR Fund, which came out of the CARE Act.

Ms. Hylton informed the committee that she has been working closely with Mr. McDonald on the employer side for events and promoting the use of our resources. We have a link on their website, and they have one on ours. We also have an initiative called Workforce Wednesdays which brings employers to our centers. This has proven to be beneficial for employers to learn about us and for us to connect with them.

Mr. McDonald stated one initiative that started this year is that all certified small businesses in Broward County are encouraged to schedule an introductory/orientation call with CSBD.

**On a motion made by Sandy McDonald and seconded by Frank Horkey, the combined Executive and Audit Committee unanimously approved the 2023 Community Partner Legislative Agendas.**

#### **5. Accept Non-Custodial Parent Employment Program Funding**

Considered 1) accepting \$950,742 from the Department of Economic Opportunity for a Non-Custodial Parent Employment Program and 2) increasing the amount previously approved for OIC by \$241,185 to serve an additional 50 participants. These funds will be used to serve non-custodial parents who are unemployed or underemployed. The remaining funds will be allocated to participant services such as paid work experience, life skills, employability skills, parenting, financial literacy education, support services, training, and job placement. CSBD was 1 of 3 Boards selected for funding. Pursuant to a Board member's recommendation to identify staff for recognition Michael Bateman, Vice President of Quality Assurance, developed this grant application. Approved at the 1/24 One Stop Services Committee meeting.

Mr. Shawbell informed the committee that OIC has partnered with CSBD for many years and is currently serving non-custodial parents who are unemployed or underemployed.

**On a motion made by Rick Shawbell and seconded by Frank Horkey, the combined Executive and Audit Committee unanimously approved accepting \$950,742 from the Department of Economic Opportunity for a Non-Custodial Parent Employment Program and increasing the amount previously approved for OIC by \$241,185 to serve an additional 50 participants.**

#### **6. Program Year 22/23 Revised Budget**

Considered approving the revised budget for PY 22/23. This is our annual update from the preliminary budget presented in May. It is the adjusted budget based upon the final grant awards received by CareerSource Broward (CSBD). The CSBD formula grants for Program Year (PY) 22/23 total \$21,066,829, an increase of \$1,156,661 or 6% from the planning numbers presented in May. Dedicated grants total \$6,453,572, an increase of \$1,718,414. Our total available budget is \$27,520,401 (\$21,066,829 + \$6,453,572) for PY 22/23. Approved at the 1/24 One Stop Services Committee meeting.

Mr. Rick Shawbell introduced the item and asked Mr. Moffett to provide an overview.

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Mr. Moffett informed the committee that the difference between this and the preliminary budget was largely due to 1) receiving almost a million more than anticipated in WIOA Supplemental funding and 2) an increase of \$300,000 in funding from the City of Fort Lauderdale for our Summer Youth Employment Program. He explained our budgeted ratios across the categories remain the same, and the budget reflects alignment with the board's goal to maximize the number of employers and job seekers served.

**On a motion made by Rick Shawbell and seconded by Sandy McDonald, the combined Executive and Audit Committee unanimously approved the Program Year 22/23 Revised Budget.**

## **7. Selection of Outreach/Marketing Firms**

Considered approving up to \$250,000 to be divided between 1) Goodman Public Relations in the amount of up to \$200,000 and 2) Moore Communications Group for up to \$50,000 as recommended by the Review Committee which met on 1/9. The Review Committee was comprised of members of the Board and the Director of Communications and Community Engagement for the Children Services Council of Broward County. The firms will design social media and digital outreach campaigns directing job seekers and employers to CSBD for service. Each contract will be through the end of the program year and will be renewable for two (2) additional one-year periods. Approved at the 1/23 Employer Services Committee meeting.

Mr. Leconte introduced the item and stated that the need exists to expand our marketing and outreach by contracting with firms who can assist us with getting the word out about our services to employers and job seekers.

Mr. Horkey inquired if CSBD is okay with splitting the funding between two firms. Ms. Hylton responded yes we have previously worked with Moore Communications Group, but they are in Tallahassee. We want to keep our connection with them as they work closely with CareerSource Florida. Goodman Public Relations understands the market in Broward County as they are a local company.

Mr. Moffett thanked Mr. Jim Ryan for chairing the review committee.

**On a motion made by Francois Leconte and seconded by Frank Horkey, the combined Executive and Audit Committee unanimously approved 1) Goodman Public Relations in the amount of up to \$200,000 and 2) Moore Communications Group for up to \$50,000 as recommended by the Review Committee.**

## **8. Additions to the Targeted Occupations List (TOL)**

Considered approving the addition of 1) Home Health Aide (HHA) and 2) Nursing Assistant to our local TOL, which will allow training in those occupational areas for WIOA Adults and Dislocated Workers. All Board-mandated criteria have been met for these occupational titles to be added to the TOL for Program Year (PY) 22/23. Approved at the 1/24 One Stop Services Committee meeting.

Mr. Rick Shawbell introduced the item.

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Mr. Moffett stated that staff conducts quarterly evaluations of the local TOL. Mr. Moffett credited CSBD staff for moving quickly to conduct the research and establish the increases in the entry wage and demand for these occupations.

**On a motion made by Rick Shawbell and seconded by Francois Leconte, the combined Executive and Audit Committee unanimously approved adding 1) Home Health Aide (HHA) and 2) Nursing Assistant to our local TOL, which will allow training in those occupational areas for WIOA Adults and Dislocated Workers.**

#### **9. Tropic Ocean Airways (TOA) Incumbent Worker Training Grant Application**

Considered awarding 1) TOA, a seaplane charter and scheduled service airline, an Incumbent Worker Training (IWT) grant in the amount of \$53,147 to train 82 employees to earn job-related certifications and 2) obligate funds from next program year's allocation for that portion of the training which will occur after 6/30. Pursuant to the WIOA requirements, TOA will contribute 25% to the cost of the training by paying the employee's wages while they are in training. In accordance with governing boards' policy, IWT grant applications of \$50,000 or more which have been recommended by the rating committee, go to the Employer Services and the Executive Committees for approval, with a report to the Board. Approved at the 1/23 Employer Services Committee meeting.

Ms. Hylton informed the committee that Tropic Ocean Airways was a referral from the Greater Fort Lauderdale Alliance. This grant is for \$53k to train 82 employees to earn job-related certifications. Per the policy, any IWT over \$50k goes to Employers Services and the Executive Committee for approval, and then to the board as a report. As she mentioned in her report to the committee, Ms. Hylton stated we are focusing on small businesses for OJT and on bigger businesses that have larger cohorts of employees with Incumbent Worker Training.

**On a motion made by Keith Costello and seconded by Bob Swindell, the combined Executive and Audit Committee unanimously approved awarding 1) TOA, a seaplane charter, and scheduled service airline, an Incumbent Worker Training (IWT) grant in the amount of \$53,147 to train 82 employees to earn job-related certifications and 2) obligate funds from next program year's allocation for that portion of the training which will occur after 6/30.**

#### **10. Holiday Schedule**

DEO requires us to align our holidays with a federal, state, or county authority. CareerSource Broward aligns our holidays to the County holiday schedule. The County recently added the Juneteenth holiday to its schedule. Considered approving the addition of the Juneteenth holiday to CSBD's holiday schedule to align with the County. Approved at the 2/6 Organizational Resources Committee meeting.

Ms. Hylton told the committee that we follow the County, and the Commission just added Juneteenth as a holiday.

**On a motion made by Keith Costello and seconded by Rick Shawbell, the combined**

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**Executive and Audit Committee unanimously approved Juneteenth to the holiday schedule.**

**11. Up Coming 2023 Board Planning Session**

Considered approving the 2023 Board Planning Session scheduled for 4/27. The planning session will be in-person and will begin at 11:30 when members are invited to pick up their materials and network over lunch. This will be followed by a short board meeting leading directly into our planning session, as we have done in previous years. Workgroup thought questions will include topics covering inflation and the local economy as well as items recommended by our members throughout the year.

Ms. Daniels stated that we are excited to start preparing for the upcoming planning session. We have some topics we will be discussing, like inflation, the economy, and WIOA reauthorization.

Mr. Dobrikow stated that the 4/27 planning session is essential. This is when we get together and lay out the road map for the future.

Mr. Horkey stated as conveners we might want to hear from community partners as we set goals for next year. Mr. Dobrikow suggested the committee members let Ms. Hylton know if they have a suggestion. He then reminded the committee members to consider sponsoring the event.

**On a motion made by Rick Shawbell and seconded by Keith Costello, the combined Executive and Audit Committee unanimously approved the 2023 Board Planning Session scheduled for 4/27.**

**REPORTS**

**1. Cherry Bekaert LLP Fiscal Monitoring Report #1 PY 22/23 Issued 12/22**

Cherry Bekaert conducted fiscal monitoring for the period 7/1/22 through 9/30/22. Cherry Bekaert reviewed a total of 819 elements during the review period. There were no findings or observations. Based on the total elements reviewed, this was a 0% error rate.

Mr. Moffett informed the committee that our fiscal monitoring period was from 7/1/22 through 9/30/22. There were no findings or observations. This was a 0% error rate based on the total elements reviewed.

**2. Taylor Hall Miller Parker, PA, Program Monitoring Report #1 PY 22/23 Issued 12/22**

THMP conducted program monitoring for the period 8/19/22 through 11/17/22. They reviewed a total of 175 files consisting of 7,015 elements. There were 2 findings and 1 observation. This equates to an error rate of (.03%) less than 1%. All findings and observations were corrected except where cases were closed and no further action could be taken.

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Mr. Moffett stated THMP conducted program monitoring from 8/19/22 through 11/17/22. They reviewed 175 files consisting of 7,015 elements. There were 2 findings and 1 observation, an error rate of (.03%) less than 1%.

Mr. Horkey thanked the staff for being perfect.

Ms. Hylton informed the committee that the board has approved us to celebrate the achievement of performance with the staff and that she would be inviting board members to join the celebrations at the One-Stops and our office.

### **3. WIOA Youth Performance for Program Year 22/23**

CSBD currently contracts with four (4) Out-of-School Youth (OSY) providers and two (2) In-School Youth (ISY) providers. OSY providers' enrollments are on target, and the ISY programs are now starting in accordance with their contracts.

Ms. Daniels informed the committee that the school board had done an excellent job with the GED program and meeting its enrollment target. She further noted that we are satisfied with all the youth providers' performance. Ms. Daniels went on to report that last month the State applied for a waiver to be able to spend up to 50% of our funds on ISY. We are waiting to see the outcome.

### **4. Welfare Transition Program (WTP) Participation Rate**

WTP requires customers to participate in work activities. Customers in refugee status, who receive welfare benefits but do not have work permits, are exempt from work activities however, they count towards the federal performance participation measures. The number of refugee referrals has increased each month, negatively impacting our participation rate performance. CSBD raised the issue with DEO and requested that refugee participants be removed from our performance. They said that several regions raised the issue and they are looking into it. We will continue to follow up with DEO.

Ms. Hylton stated in WTP nearly one-half of the participants on our caseload are in refugee status. While they are here legally it is taking up to a year to get their work authorization papers, which is negatively affecting our performance. We have brought this issue to the State, and we are waiting to see if they will allow this cohort to be removed from our performance until they are ready and able to work.

Ms. Hylton thanked Ms. Liberta for her support and for working with us to resolve the issue.

Ms. Daniels stated that this is a national issue that all local workforce areas are dealing with.

### **5. CareerSource Broward's Healthcare Industry Employer Forum**

CareerSource Broward held an employer virtual forum on 12/2 focused on the healthcare industry. Issues discussed included the industry's skill gaps and the current labor market conditions. Nineteen (19) individuals, representing employers, education, and workforce

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development attended. We learned that there continues to be a need for home health aides and nurses. In the past, the wages for Home Health Aides did not warrant their inclusion on the TOL. However, as this is no longer the case this occupation has been added to the TOL allowing us to provide ITA's to interested participants.

Mr. Dobrikow stated that this forum was well done and those in attendance requested that it be scheduled and held quarterly.

## **6. Board Member Recognition**

Presentation of plaques for 1) past Chair, Frank Horkey 2) Mayor Frank Ortis, and 3) Ismael Martinez.

Mr. Dobrikow thanked Frank Horkey for his patience, steady leadership, and leaving a legacy as past chair. Mr. Horkey thanked Mr. Dobrikow for the kind words. Mr. Horkey added that since taking over, Ms. Hylton has changed our vision and made us better than we were.

## **7. Presentation at the February Board Meeting**

Based on board members continuing interest regarding affordable housing and the housing shortage in Broward County, we have invited Dr. Ned Murray an expert on the economy and housing market in South Florida, Sandra Veszi Einhorn, Director of the Coordinating Council of Broward and Vice Mayor Nan Rich to update the Board on the 10-Year Affordable Housing Plan that will be used to address the county's growing affordable housing crisis.

Mr. Horkey inquired if we still plan to put together a group to discuss buying the Central One Stop building. Ms. Hylton responded that Ms. Einhorn indicated that the state is open to the idea of a multi-use complex. We would need to put together a proposal. Due to the realignment, we wanted to wait until a decision has been made before we bring a recommendation to the Audit Committee.

Mr. Dobrikow asked if we could have staff develop an additional tile on the dashboard for rent prices in Broward County. Ms. Hylton responded yes and that she would assign staff to research and develop the additional tile.

## **MATTERS FROM THE EXECUTIVE COMMITTEE**

Mr. Horkey stated that Ms. Hylton and Broward Education Foundation met and discussed ways to collaborate efforts to assist youth. The Broward Education Foundation has funds available and is looking for additional ways to get their funds spent.

Ms. Liberta reported that the Covenant House was closed affecting children 16 – 18 and homeless children 18 – 23. These children cannot go home because they are a danger to themselves or others in their household. As a result, those under 18 will go to foster care, and those over 18 will be homeless. Ms. Liberta also shared that a new property has been identified but funds are

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needed to make it habitable. Mr. Jim Ryan asked if there was anything she could share with the board that would be of assistance.

Mr. Cassidy inquired if there was any grant money to assist them.

Mr. Horkey stated that he learned from the Broward Education Foundation, that 1% of Broward County students are homeless, approximately 2,500 kids.

Ms. Liberta stated she would share more information as it becomes available with Ms. Hylton.

#### **MATTERS FROM THE AUDIT COMMITTEE**

None

#### **MATTERS FROM THE FLOOR**

None

**ADJOURNMENT: 2:01 pm**

<p><b>THE NEXT AUDIT COMMITTEE MEETING IS TBD.</b> <b>THE NEXT EXECUTIVE COMMITTEE WILL BE HELD ON APRIL 10, 2023.</b></p>
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**Memorandum #01 – 23 (LS)**

**To:** Audit Committee

**From:** Carol Hylton, President/CEO

**Subject:** Selection of Audit Firm

**Date:** August 7, 2023

**SUMMARY**

Consideration to recommend Anthony Brunson P.A. as our Audit Firm. Their proposal provides for WatsonRice to provide the engagement partner in accordance with state rules which allows for the continuation of the same firm beyond 5 years as long as the engagement partner is rotated. A Request for Quotes (RFQ) was issued on 5/15, with responses due 6/16. We sent the RFQ to 10 firms as well as to the firms which are registered to be noticed when an RFQ is issued, altogether at least 15 firms. We received a quote from Anthony Brunson, P.A. our current Audit Firm, and one (1) no bid from Tri Merge CPA. A Review Committee Meeting was held on 8/7. After hearing from Mr. Brunson and representatives from WatsonRice, the Committee rated and ranked the proposal which had an average score of 93. The Review Committee then voted to recommend the selection of Anthony Brunson, P.A. at a cost of \$34,000, a \$1,000 increase over last year. The contract if approved will allow for 4 one-year renewals subject to governing board approval.

**BACKGROUND**

Our current agreement with our audit firm, Anthony Brunson P.A. expires in September. As our audit costs less than \$250,000 the threshold for competitive proposals, an RFQ was issued on 5/15, with responses due 6/16. The RFQ was posted on the CSBD website and was sent to 10 firms in addition to those firms which are registered to be noticed when an RFQ is issued. Altogether at least 15 firms received a copy of the RFQ. We received one (1) quote from Anthony Brunson, P.A., our current Audit Firm, in Association with WatsonRice. In following up where possible with the firms that received the RFQ we also received one (1) no bid from Tri Merge CPA and one request to submit a quote after the deadline, which was denied.

**DISCUSSION**

Some of you may recall that the state previously required that we rotate audit firms every five (5) years. However, several years ago they changed the rule, and now only

require a rotation of the engagement partner assigned to the audit. It was explained that this was the reason for the proposal including WatsonRice which will serve as the engagement partner.

On 8/7, a BWDB Review Committee met. The Review Committee included:

- Mr. Zac Cassidy, BWDB Secretary/Treasurer, Chair of the Audit Committee who chaired the Review Committee
- Mr. Heiko Dobrikow, Chair BWDB
- Mr. Frank Horkey, Immediate past BWDB Chair
- Dr. Ben Chen, Co-Chair Strategic Planning Committee

Anthony Brunson P.A. with WatsonRice was invited to make a presentation, and the Review Committee interviewed them and asked questions. The proposal was rated and then ranked. The average of the scores was 93. The Review Committee voted to recommend the selection of Anthony Brunson, P.A. with WatsonRice serving as the engagement partner.

Mr. Brunson is familiar with CSBD having served as our auditor in the past. Ms. Carshena Allison, Partner, at WatsonRice, who will be the engagement partner has extensive experience providing auditing and monitoring services to nonprofit and government entities. Brunson and WatsonRice are very well regarded by the community, and their work is well known by several of our audit committee and board members. WatsonRice and Anthony Brunson also coordinate to perform the CareerSource South Florida Audit.

Anthony Brunson, P.A. has been our Audit Firm for the past five years, and the governing boards and staff have been satisfied with their work.

The cost of the Audit will be \$34,000, an increase of only \$1,000 over last year. The contract, if approved, would be for the current year with 4 one-year renewals subject to governing board approval.

## **RECOMMENDATION**

Consideration to recommend the selection of Anthony Brunson P.A. with WatsonRice serving as the engagement partner to the CSBD governing boards for approval to perform the CSBD audit at a cost of \$34,000.

## Memorandum #02 – 23 (FS)

**To:** Audit Committee

**From:** Carol Hylton, President/CEO

**Subject:** General Fund Balance

**Date:** August 4, 2023

### SUMMARY

At the December 2022 Board meeting, we reported that the General Fund balance was \$901,711. From 11/1/22 through 6/30/23, we realized revenues of \$334,195 and incurred expenditures of \$215,625 for an ending balance including the reserves, \$1,020,281 in the General Fund as of 6/30/23.

### BACKGROUND

Per governing board direction CSBD holds a portion of the General Fund in reserve to:

1. Assure funds are available in the event of a questioned or disallowed cost. We carry D&O insurance, but we set aside funds, as not all expenditures are covered by our insurance.
2. Cover the principal payments for the 2890 W. Cypress Creek Road building. Our grants pay for the interest on the mortgage and straight-line depreciation based on 25 years. The depreciation is paid into the General Fund and is used to pay the mortgage principal. As is true of most mortgages, payments in the earlier years are mostly interest and are covered by the grants. In later years the majority of the payment will be made up of the principal. We use the depreciation collected to pay for the principal.

Fiscal has calculated the amount that will be needed to pay the principal and tracks it on a monthly basis.

**Chart 1- General Fund Reserves**

Category	Dollar Amount
Contingency reserve	\$250,000
Depreciation collected to date: \$748,853	
Less Principle paid with Depreciation revenue since 1/1/2019 (\$500,983)	\$247,870
<b>Total</b>	<b>\$497,870</b>

Chart 2, below is the list of projected expenditures budgeted and approved by the CSBD governing boards that are charged against the General Fund.

**Chart 2- Board Approved Budgeted Items**

<b>Category</b>	<b>Dollar Amount</b>
Food (Calendar Year)	\$27,000
Ticket to Work staff salary, benefits & overhead	\$98,500
Application of our Indirect Cost Rate	\$18,281
Tripp Scott	\$50,000
President and Legal Counsel Salary Cap	\$31,700
<b>Total</b>	<b>\$225,481</b>

## **DISCUSSION**

The General Fund balance as of last November was \$901,711. Chart 3, below is a list of the revenues and expenditures from 11/1/22 through 6/30/23. During this period revenues totaling \$334,195 and expenditures totaling \$215,625 were incurred. The total of all revenues and expenditures is an ending balance including the reserves of \$1,020,281 in the General Fund.

**Chart 3- Revenues and Expenditures 11/1/22 – 6/30/23**

<b>Category</b>	<b>Revenues</b>	<b>Expenditures</b>	<b>Comments</b>
Investment Interest	18,935		
Reimbursement to CSBD	350		Restitution of funds
Ticket to Work (TTW)	202,493	43,921	
Depreciation collected from grants	112,042		
Tobacco Free Florida	375		
FY 22/23 Building Principal		79,670	Paid to date \$713,775
Food expense		13,547	
Indirect Costs		15,348	
President and Legal Counsel Salary Cap		29,806	
Tripp Scott		33,333	
<b>Total</b>	<b>\$334,195</b>	<b>\$215,625</b>	

The General Fund balance as of 06/30/23 is \$1,020,281 of this amount \$497,870 is held in reserve leaving a balance of \$522,411.

## **RECOMMENDATION**

None. For information purposes.

Attachment: General Fund Spreadsheet

CSBD General Fund Revenues and Available Funds 11/1/22 - 06/30/23			
BALANCE 11/1/22		\$	901,711
REVENUES			
Depreciation Collected		112,042	
Ticket to Work		202,493	
Tobacco Free Florida		375	
Interest		18,935	
Other Reimbursements/Credits		350	
Total Revenue			334,195
EXPENDITURES			
Mortgage Principal		(79,670)	
Salary Cap		(29,806)	
Advocacy- Tripp Scott		(33,333)	
Ticket to Work		(43,921)	
Food		(13,547)	
Indirect Costs		(15,348)	
Total Expenditures			(215,625)
Net Revenue over Expenditures			118,570
Total General Funds as of 06/30/23			1,020,281
Less Reserves			
Contingency Funds		(250,000)	
Funds Collected for Depreciation		(748,853)	
Less: Principle Paid		500,983	
			(497,870)
Unobligated General Fund Balance			\$522,411

## Memorandum #01 – 23 (FS)

**To:** Audit Committee

**From:** Carol Hylton, President/CEO

**Subject:** Budget vs. Actual Expenditure Report

**Date:** August 4, 2023

### SUMMARY

Detailed below is the Budget vs. Actual Expenditure Report. Each year we budget to spend 100% of our grants. As the governing boards are aware WIOA funds are available for 2 years and also allow for a 20% allocation carry forward each year to avoid a cliff effect due to fluctuations in allocations as we experienced this year. The State extended the period for the expenditure of welfare transition program (WTP) funds this year through August, and the funds are being invested in the summer program. The strategies we put in place last year are working.

### BACKGROUND

Pursuant to sound financial practices we provide reports on Budget vs Actual expenditures. CSBD receives some of its funds based on its program year which is July 1 – June 30 and some of its funds based on the federal fiscal year October 1 – September 30 which is also the CSBD fiscal year.

### DISCUSSION

Chart 1 depicts funding streams received on a program year basis through 6/30/23 and represents expenditures at 100% of the program year.

**Chart 1: July 1, 2022 – June 30, 2023 Budget vs. Actual at 100% of the Year**

Notes	Funding Stream	PY 22-23 Budget	Actual Expenditures 7/1/22 – 6/30/23	% Expended
1	WTP (extended through 8/31)	4,287,931	3,613,075	84%
2	WIOA Adult / Dislocated Worker	9,686,500	6,937,727	72%
3	WIOA Youth	5,288,158	3,275,157	62%

## Budgeting

Each year we budget to spend 100% of our grants. As the governing boards are aware WIOA funds are available for 2 years and also allow for a yearly 20% carry forward of the WIOA formula allocation to avoid a cliff effect due to a fluctuation in allocations as we experienced this year. Because discretionary grants have a shorter shelf life, we often will purposely spend discretionary funds before formula funds to assure we take full advantage of the funds available for our local area.

This year the State extended the period for the expenditure of welfare transition program (WTP) funds through August 31 and the funds are being invested in the summer program.

## Addressing Expenditure Fluctuation

Following the first quarter last year we were aware that program expenditures in the WIOA adult and youth programs were still lagging over pre-pandemic years. During the second quarter of the year, we began implementing the strategies below, some of which required formal procurements, while other strategies required coordinating with our partners to engage them in our efforts. These included:

- Procuring and engaging Moore Communications and Goodman, PR to market and outreach services to employers and job seekers
- ITA fairs with our training providers
- Paid internships to youth graduating from post-secondary programs who needed experience in their field to be competitive in the labor market
- Working with employers to expand apprenticeship awareness
- Increased participation in community events
- Increased the in-school contracts and caseloads for the School Board and Junior Achievement
- Budgeted for a Career Awareness event for in-school youth

As a result of these strategies, we are seeing a marked increase in foot traffic in all the one stops and the demand for work-based training and ITA's is significantly on the rise.

Chart 2 depicts funding streams received on a federal fiscal year basis through 6/30/23 which represents 75% of the year.

**Chart 2: October 1, 2022 – September 30, 2023 Budget vs. Actual at 75% of the Year**

Notes	Funding Stream	PY 22-23 Budget	Actual Expenditures 10/1/22 - 06/30/23	% Expended
1	Veterans	286,783	121,733	42%
2	SNAP	343,495	242,435	71%
3	Wagner Peyser (WP)	1,174,757	758,106	65%

## **Veteran Program**

We receive pass through funds from the state for facilities and overhead which are expended when we have a full complement of Veteran's staff. Due to a freeze at the state, we have not been able to fill vacant positions and therefore are not able to spend pass through funds.

## **RECOMMENDATION**

None. For information purposes only.



**Memorandum #01 – 23 (QA)**

**To:** Audit Committee

**From:** Carol Hylton, President/CEO

**Subject:** Results of the Cherry Bekaert, LLP Fiscal Monitoring – Report #2  
PY 22/23 Issued 5/23

**Date:** May 23, 2023

**SUMMARY**

Cherry Bekaert conducted fiscal monitoring for the period 10/1/22 through 2/28/23. Cherry Bekaert reviewed a total of 921 elements during the review period. There were no findings or observations. Based upon the total elements reviewed, this was a 0% error rate.

**BACKGROUND**

Cherry Bekaert monitors fiscal activities three times a year. This was the second monitoring for the program year.

**DISCUSSION**

Cherry Bekaert conducted fiscal monitoring for the period 10/1/22 through 2/28/23. Cherry Bekaert reviewed a total of 921 elements during the review period. There were no findings or observations. Based upon the total elements reviewed, this was a 0% error rate.

**RECOMMENDATION**

None. For information purposes only.

**QA #01-23 ATTACHMENT A**  
**Cherry Bekaert Fiscal Findings - PY 22-23**  
**Monitoring Report #2**

<b>Procedure</b>	<b>Report #2</b> 10/1/22 - 2/28/23
Bank Reconciliation – Accounts Payable Master Account	0
Bank Reconciliation - General Fund Account	0
Bank Reconciliation - Operating Master Account	0
Bank Reconciliation - Participant Payroll Account	0
Bank Reconciliation - Staff Payroll Account	0
Budget vs Actual Grants/Programs	0
Cash Draw	0
Cash Receipts	0
Cell Phone Expenditures	0
Customer-Related Expenditures - WIOA ITA & WTP	0
Employee Separations	0
ETA Salary and Bonus Cap Calculation	0
Insurance	0
Integrative Staffing Payroll	0
Internal Control Website Review	0
Local Plan Controls Review	0
Mileage Reimbursements (Individuals)	0
Mileage Reimbursements (Service Provider)	0
On the Job Training (OJT)	0
Participant Payroll	0
Previous Year-end Audit Adjusting Journal Entries	0
Previous Year-end Single Audit Report	0
Procurement- Micro Purchase	0
Procurements - Small Purchases	0
Property Management - PPE	0
Staff Payroll	0
Subawarding/Subrecipient Monitoring	0
Walkthrough - Cash Draw	0
Welfare Transition Program (WTP) Community Work Experience	0
Youth Support & WIOA (AD/DW) Payments	0
<b>TOTAL</b>	<b>0</b>

This chart provides a breakdown of fiscal findings by category type.

## Memorandum #02 – 23 (QA)

**To:** Audit Committee

**From:** Carol Hylton, President/CEO

**Subject:** Results of the Taylor Hall Miller Parker (THMP), P.A.  
Program Monitoring Report #2 – PY 22/23 – Issued 2/23

**Date:** July 18, 2023

### SUMMARY

THMP conducted program monitoring for the period 11/18/22 through 2/21/23. They reviewed a total of 177 files consisting of 6,029 elements. There were 4 findings and 11 observations. This equates to an error rate of (.06%), or less than 1%. All findings and observations were corrected except where cases were closed, and no further action could be taken.

### BACKGROUND

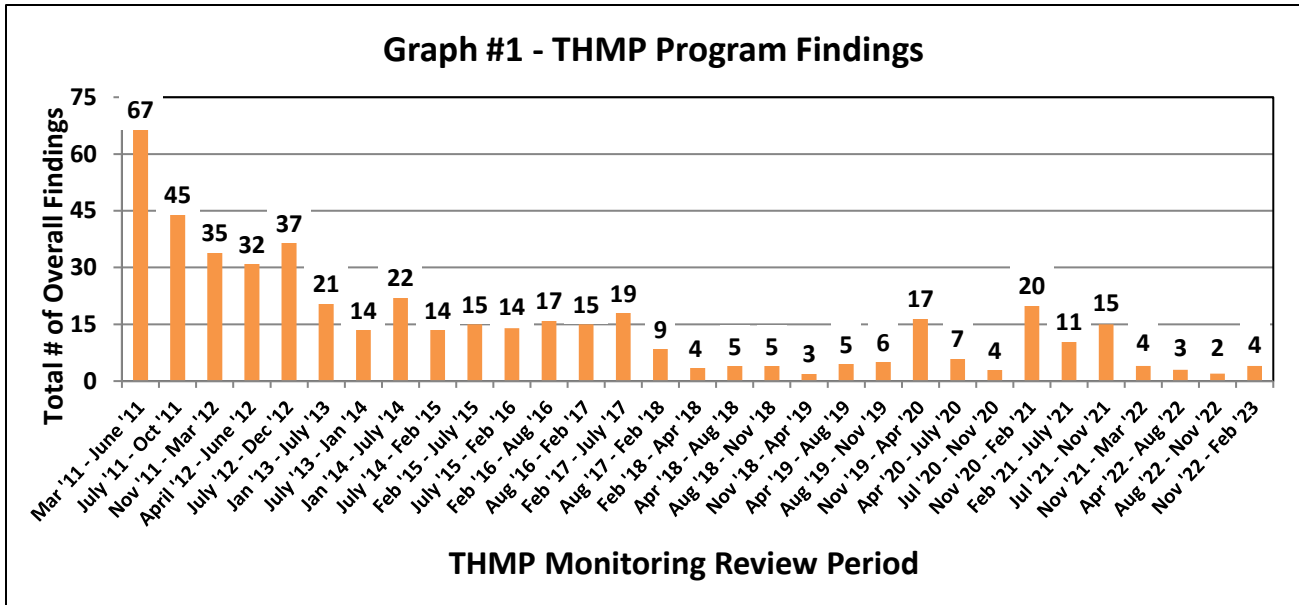
THMP monitors program activities three times a year. This was their second report for PY 22/23.

### DISCUSSION

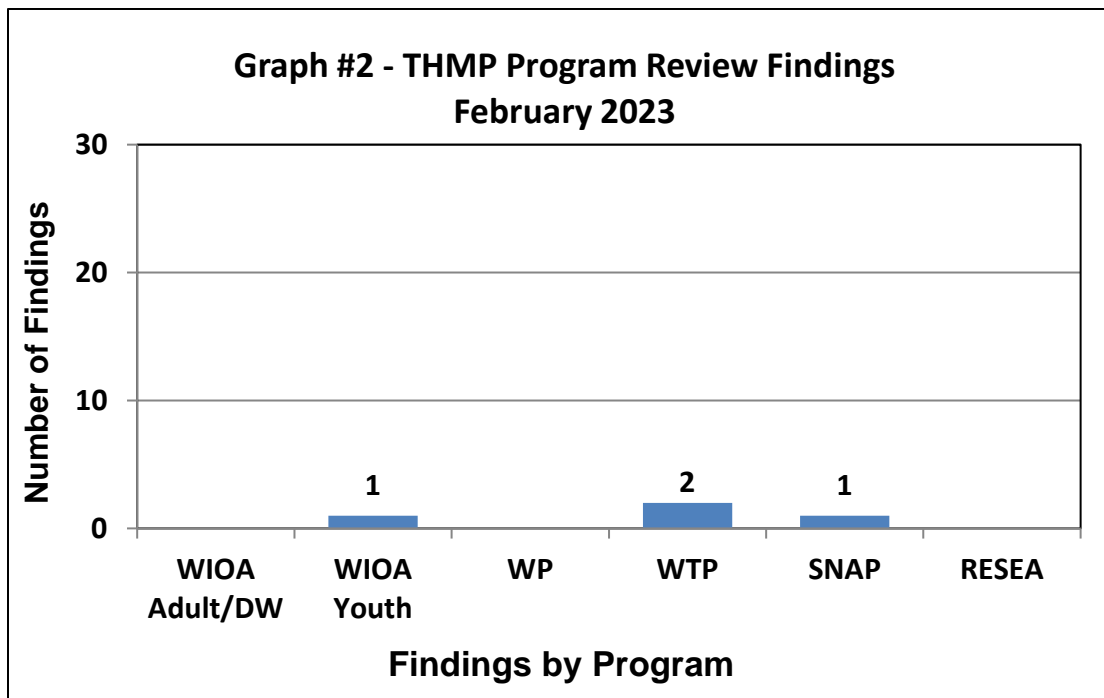
THMP identified 4 findings and 11 observations during their program monitoring visit. They reviewed a total of 177 files consisting of 6,209 elements. This equates to an error rate of .06%, or less than 1%. This monitoring covered the period 11/18/22 through 2/21/23.

### THMP Program Findings

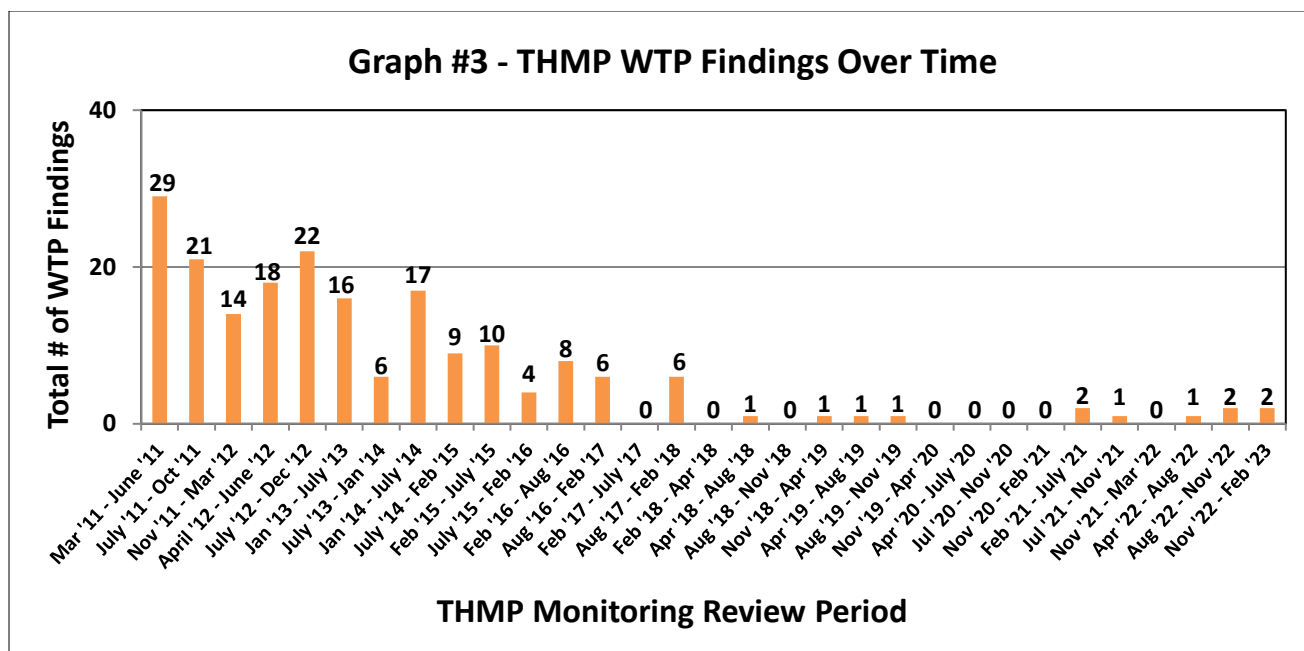
A trending chart for THMP program findings, per review period since March 2011, is represented in Graph #1, as follows:



A breakdown of findings by Program is represented in Graph #2 as follows:



A trending chart for THMP Welfare Transition Program (WTP) findings per review period since March 2011 is represented in Graph #3 as follows:



### THMP Program Findings for the period of November 2022 – February 2023

The findings and observations in this report were forwarded to the Career Center and Program Managers for resolution and responses. The findings and observations are presented by funding stream, along with the corrective action taken.

#### I. WIOA Adult/Dislocated Worker

- A. 24 WIOA Adult and Dislocated Worker files were reviewed, 8 from each Center.

**There were no findings and no observations.**

- B. 6 WIOA Adult and Dislocated Worker files who exited within the last 12 months were reviewed, 2 from each Center. There were no findings.

There was 1 observation.

<b>Observation</b> WIOA Adult/Dislocated Worker File/System Review
A customer's employment wage rate was recorded incorrectly on Employ Florida (EF) at case closure. (North – 1)
<b>Recommendation</b>
Staff should correct the employment wage information in EF.
<b>Agree/ Disagree</b>
Agree
<b>Resolution</b>
Staff corrected the wage rate calculation and updated the documentation in EF. The WIOA Program Manager addressed the matter in a Supervisors' meeting on 3/8/23 and during the WIOA All-Staff Income Training on 3/10/23.

## II. WIOA Youth

- A. 16 WIOA Youth files were reviewed: 3 CareerSource Broward (CSBD), 2 Center for Independent Living (CIL), 4 FLITE Center, 3 HANDY, and 4 School Board of Broward County (SBBC).

There was 1 finding.

<b>Finding</b> WIOA Youth File/System Review
A customer's annualized family income (AFI) was calculated incorrectly. (CSBD – 1)
<b>Recommendation</b>
Staff should correct the AFI calculation and update the customer file and EF. Whether to serve the youth as a 5% over-income exception or use WIOA Adult funds should be determined.
<b>Agree/ Disagree</b>
Agree
<b>Resolution</b>
The correct employment wage rate has been updated in the customer's file. This file has been approved as a 5% over-income exception.  The WIOA Program Manager provided training on income calculations for the WIOA staff on 3/10/23. Targeted monitoring of ongoing compliance during monthly desk reviews started in May 2023 and will continue during routine QATC monitoring.

There was 1 observation.

<b>Observation</b> WIOA Youth File/System Review
A customer's annualized family income (AFI) was calculated incorrectly. (CSBD – 1)
<b>Recommendation</b>
Staff should correct the AFI calculation and update the documentation in the customer file and EF.
<b>Agree/ Disagree</b>
Agree
<b>Resolution</b>
The AFI calculation has been corrected, and the documents are updated in the customer file and EF.  The WIOA Program Manager provided training on income calculations for the WIOA staff on 3/10/23. Targeted monitoring of ongoing compliance during monthly desk reviews started in May 2023 and will continue during routine QATC monitoring.

- B. 6 WIOA Youth files that exited within the last 12 months were reviewed, 2 from the FLITE Center, 2 HANDY, and 2 SBBC.

**There were no findings.**

There were 2 observations.

<b>Observation</b> WIOA Youth File/System Review	
a)	The customer employment start date was recorded incorrectly in EF at case closure and did not match the documentation in the customer's file. (FLITE – 1)
b)	The second quarter follow-up was not completed and documented in EF after exit. (FLITE – 1)
<b>Recommendation</b>	
a)	Staff should correct the employment information in EF to align with the customer file.
b)	Youth provider staff should ensure that all follow-ups are conducted and documented timely in EF.
<b>Agree/ Disagree</b>	
Agree	
<b>Resolution</b>	
a)	The customer employment start date has been updated in EF to align with the documents in the customer file.
b)	The Program Manager conducted a refresher training with the youth provider Supervisor on how to run quarterly follow-up reports in EF, and the Supervisor was provided a "How To" training tool.
The Youth Provider Supervisor will continue to run monthly follow-up reports in EF through May 2023 to ensure all follow-ups are in compliance and will discuss any outstanding entries with staff as needed.	

### III. Wagner-Peyser (WP)

- 30 WP accounts were reviewed, 10 from each Center.
  - **There were no findings or observations.**
- 30 WP job orders were reviewed.
  - **There were no findings or observations.**

#### **IV. Reemployment Services and Eligibility Assessment (RESEA)**

10 RESEA files were reviewed from Central.

**There were no findings or observations.**

#### **V. Welfare Transition Program (WTP)**

A. 23 WTP mandatory files were reviewed (8 each from North and Central, and 7 from South).

There were 2 findings.

<b>Findings WTP File/System Review</b>	
a)	A signed copy of an IRP was missing from the case file. (IRP's North – 1)
b)	The customer timesheets were missing from the case file and did not correspond with JPR entries. (JPR's Central – 1)
<b>Recommendation</b>	
Staff should ensure appropriate documentation is in case files and JPR entries are accurate.	
<b>Agree/ Disagree</b>	
Agree	
<b>Resolution</b>	
a)	The signed IRP has been added to the customer file. The Supervisor conducted individual counseling with staff, which included a review of the policy regarding IRP development and timely scanning documentation.
b)	The missing timesheets have been uploaded to the customer file and correspond to the JPR entries. The Supervisor counseled the staff regarding timely scanning documentation. A process has been established to ensure proper staff coverage for timesheet entry.

There were 4 observations.

<b>Observation WTP File/System Review</b>	
a)	Staff did not complete the IRP and did not assign the work activities in a timely manner. (IRP's North - 1)
b)	Steps to self-sufficiency on IRP in the case files were missing end dates in the work activity assignment. (IRP's North – 2)
c)	No documentation of timely follow-ups or attempted customer contact. (Case



Management North – 2; South – 1)
d) A sanction was not requested in a timely manner for the participant. (Pre-Penalties/Sanctions Central – 1)
<b>Recommendation</b>
Staff should ensure appropriate actions are taken timely and documented accurately.
<b>Agree/ Disagree</b>
Agree
<b>Resolution</b>
a & b) The Supervisor reviewed the IRP policy on completing IRPs and assigning activities with WTP staff. The WTP Program Manager conducted a region-wide training covering these observations with WTP staff in April 2023. The WTP Supervisors are continuing to conduct random reviews of the caseloads to ensure policy compliance.
c) The Supervisors provided training to WTP Staff to ensure timely attempts to engage customers are documented. WTP Program Manager also covered this observation during a region-wide training with WTP staff in April 2023. Compliance is being reviewed during monthly supervisor desk reviews and routine QATC monitoring.
d) A process has been implemented to ensure proper staff coverage, and penalties are requested timely when assigned to staff. Center Managers and Supervisors have also facilitated one-on-one discussions with team members regarding proper protocol when requesting time off and coordinating staff coverage. WTP Program Manager also covered this observation during a region-wide training with WTP staff in April 2023.

B. 21 WTP transitional files were reviewed, 7 from each center.

**There were no findings.**

There was 1 observation.

<b>Observation</b> WTP File/System Review
Although the participant was eligible to receive Transitional Services (TS), services were opened and issued on a date prior to the date that the case was changed from Mandatory to TS. (Transitional North – 1)
<b>Recommendation</b>
Staff should ensure that cases are correctly processed when changing from Mandatory status to Transitional status, and when opening and providing related services.
<b>Agree/ Disagree</b>
Agree
<b>Resolution</b>

WTP Supervisor began reviewing all mandatory cases five days prior to the scheduled transfer to ensure customers received all Mandatory services and that eligible services were coded correctly. WTP Program Manager also conducted a region-wide training covering this observation with WTP staff in April 2023.

C. 1 WTP Upfront Diversion files were reviewed from South.

**There were no findings.**

There was 1 observation.

<b>Observation</b> WTP File/System Review
Staff did not enter the employment verification in the customer's OSST file, and the Up-Front Diversion forms were incomplete. (Up-Front Diversion South – 1)
<b>Recommendation</b>
Staff should ensure appropriate actions are taken timely and documented accurately.
<b>Agree/ Disagree</b>
Agree
<b>Resolution</b>
WTP staff attended the Talyor Hall Regional training on 4/30/23 that covers Upfront Diversion services. WTP Program Manager also conducted region-wide training covering this observation with WTP staff In April 2023.

## **VI. Supplemental Nutritional Assistance Program (SNAP)**

10 SNAP files were reviewed from Central.

There was 1 finding.

<b>SNAP</b> File/System Review
Required hours were not assigned to the participant in the SNAP E&T component for one month. (Engagement Central – 1)
<b>Recommendation</b>
SNAP Success Coaches should ensure that required monthly hours are assigned.
<b>Agree/ Disagree</b>
Agree
<b>Resolution</b>
The case could not be corrected. The Program Manager coached the Supervisor, Assistant Center Manager, and the Center Managers regarding the appropriate assignment of activities according to local policy. Adherence to the policy is being reviewed during monthly supervisor desk reviews and QATC monitorings.

There was 1 observation.

<b>Observation</b> SNAP File/System Review
Staff did not follow local penalty procedures when determining compliance for lifting a pending sanction for the participant. (Conciliations and Sanctions Central – 1)
<b>Recommendation</b>
SNAP Success Coaches should ensure local penalty procedures are followed and penalties are properly processed.
<b>Agree/ Disagree</b>
Agree
<b>Resolution</b>
In March 2023, the SNAP Supervisor reviewed the sanction policy with the Center Manager. Sanctions will be monitored during monthly supervisor desk reviews and QATC monitoring.

## RECOMMENDATION

None. For information purposes only.

**Memorandum #03 – 23 (QA)**

**To:** Audit Committee

**From:** Carol Hylton, President/CEO

**Subject:** Acceptance of the DEO Financial and Programmatic Monitoring Report dated December 1, 2022

**Date:** August 7, 2023

**SUMMARY**

The Florida Department of Economic Opportunity (DEO) issued their Financial and Program Monitoring Report on 12/1/22 for the period 4/21 through 3/22. They reviewed a total of 166 program files consisting of 6,502 elements. There were 0 fiscal findings, observations, and technical assistance items. There were 9 program findings and 6 non-compliance issues. The program findings equate to an error rate of .14% less than 1%. All findings and non-compliance issues were corrected except where cases were closed, and no further action could be taken. Our Corrective Action Plan was accepted on 4/13/23.

**BACKGROUND**

DEO conducted its annual fiscal and program monitoring review in June 2022. The review covered the period 4/1/21 through 3/31/22.

The following programs were reviewed:

1. Financial management practices, record keeping, safeguards and reporting
2. Welfare Transition Program (WTP)
3. Supplemental Nutrition Assistance Program (SNAP)
4. Workforce Innovation and Opportunity Act (WIOA)
5. Trade Adjustment Assistance (TAA)
6. Wagner-Peyser (WP)
7. Jobs for Veterans State Grant (JVSG)
8. Any identified special projects operational during the review period

## DISCUSSION

### State Findings for the period of April 2021 – March 2022

Fiscal Review: There was 1 fiscal non-compliance issue. DEO posited that CSBD had not updated its Administrative Plan since 2011. CSBD does not agree with this issue because the Administrative Plan, unlike the 4-Year Workforce Plan, is not a statutory or regulatory requirement. DEO last requested that an Administrative Plan be submitted or updated in 2011, and has been silent in this regard for the past 12 years. DEO has not issued guidance, requested an update, or reviewed the Administrative Plan in all this time. The Administrative Plan is a summary of the CSBD Fiscal and Administrative Policies. These policies have been updated, and DEO has reviewed them many times over the years. CSBD is updating the Plan, as the monitors have requested, however it has no impact on operations as staff operated based upon current CSBD, State and Federal policies.

Program Review: The DEO identified 9 program findings, along with 6 “non-compliance issues,” which must be corrected to avoid a future finding. All the findings and non-compliance issues were corrected. 166 files were reviewed consisting of 6,502 elements. The findings equate to an error rate of .14% less than 1%.

Program findings and observations are forwarded to Career Center and Program Managers as well as to service providers, if appropriate, for responses and resolution. The findings and observations are presented below, along with the corrective action taken.

#### There were 0 Fiscal Findings.

There was 1 Fiscal Non-compliance Issue:

<b>Non-Compliance Issue FMA 22.22.01 – Category 3.0 Internal Control Environment</b>
CSBD's Administrative Plan, which was last revised in January 2011, contained information, processes, and references that were outdated. The updated financial and activity specific policies do not address all areas of CSBD's administrative functions.
<b>Recommendation</b>
CSBD should review and update its Administrative Plan to ensure it reflects all current policies and processes as well as adherence with applicable state and federal laws, rules, regulations, policies, guidance, and the terms of the Subrecipient Agreement.
<b>Agree/Disagree</b>
Disagree

<b>Resolution</b>
<ul style="list-style-type: none"> <li>CSDB requested that this issue be categorized as a Technical Assistance matter because DEO has never requested that the Administrative Plan be updated, although the Local Workforce Plan is updated every 2 years. Additionally, no DEO communiques regarding updates to program and fiscal policies reference the Administrative Plan, so there was no signal from the state that this was required.</li> <li>CSBD indicated to DEO that we have current written administrative policies, procedures, and fiscal controls in place, as evidenced from their provision to DEO and having no fiscal findings from the current and past monitoring.</li> <li>CSBD did agree to update the Administrative Plan.</li> </ul>

There were **9** Program Findings:

<b>Finding WT 22.22.01 – Documentation of Activity Hours Recorded on the Job Participation Rate (JPR) Screen</b>
Documentation in 1 participant case file did not support Job Participation Rate (JPR) hours reported to the DCF or HHS.
<b>Recommendation</b>
CSBD should ensure that documentation for participation rate hours are verified by staff prior to entering the hours in OSST.
<b>Agree/Disagree</b>
Agree
<b>Resolution</b>
<ul style="list-style-type: none"> <li>This was an isolated incident.</li> <li>Projected hours were recorded instead of actual hours. The projected hours were removed and the case has since closed.</li> <li>Annual WTP training 10/28/2022, covered required documentation to support JPR hours.</li> <li>Our QA monitoring tool addresses compliance with documentation of activity hours on the Job Participation Rate Screen.</li> </ul>

<b>Finding WT 22.22.02 – Pre-penalty and Sanction Process</b>
There was no evidence of a verbal attempt to contact 2 participants during the 10-day counseling period when a pre-penalty was initiated. (Central-1, South-1).
<b>Recommendation</b>
CSBD should attempt to contact participants during the 10-day counseling period so they are aware of the program requirements & OSST case notes are entered.

<b>Agree/Disagree</b>
Agree
<b>Resolution</b>
<ul style="list-style-type: none"> <li>• In both cases, staff were successful in orally contacting the participants; however, this was not fully documented in the case note.</li> <li>• Annual WTP, training 10/28/2022 included a review of required documentation of the pre-penalty process.</li> <li>• On 12/6/2022, the WTP Program Manager sent an email to WTP staff reminding them of the pre-penalty process that requires counseling to be documented in the case note.</li> <li>• The QA monitoring tool reviews compliance with pre-penalty &amp; sanction process.</li> </ul>

<b>Finding SNAP 22.22.03 – Sanction Lift Warranted</b>
Two participants did not have a sanction lift requested when warranted upon compliance with program requirements. (South-2)
<b>Recommendation</b>
CSBD should ensure that a sanction lift is requested in OSST when a participant complies with program requirements.
<b>Agree/Disagree</b>
Agree
<b>Resolution</b>
<ul style="list-style-type: none"> <li>• For these two cases, the sanction lifts were requested, but not completed in a timely manner. The responsible staff member is no longer employed at CSBD.</li> <li>• CSBD has since created a tracker where staff monitors the 594-activity code in the initial engagement process to ensure that sanction lifts occur at the appropriate time. The sanction lifts are reviewed bi-weekly by the SNAP Supervisor. On 8/16/22, the SNAP Supervisor updated staff regarding the new process.</li> <li>• Our QA monitoring tool reviews compliance with proper documentation of the sanction process. This item has and will continue to be monitored throughout the program year by Quality Assurance staff, SNAP Supervisors, and external monitors.</li> <li>• Actions taken if staff fails to follow the requirements will include refresher training, job shadowing, and counseling up to termination.</li> </ul>

<b>Finding SNAP 22.22.04 – Assignment of Activity Hours</b>
A participant was not assigned to 80 hours per month in work activities. (South-1)

<b>Recommendation</b>
CSBD should ensure that participants are assigned to 80 hours per month in required work activities.
<b>Agree/Disagree</b>
Disagree
<b>Resolution</b>
<ul style="list-style-type: none"> <li>• We disagree with this finding.</li> <li>• The case was granted an exemption by DCF, and the customer was no longer required to participate in the program.</li> <li>• Upon discussion with the customer and his mother, 80 activity hours were not assigned because the mother explained that the customer was “obviously physically or mentally unfit,” per DCF’s exemption rules. Instead, the customer was referred to DCF to request an exemption and DCF did grant the requested exemption.</li> <li>• Staff have since continued assigning 80 hours to each participant assigned to the region until an exemption by DCF is received, regardless of their ability to participate in the program. Further, CSBD sent a recommendation to DEO to consider adding a “Deferral Status” (similar to WTP) for cases that are pending exemption, but it has not yet been implemented.</li> <li>• Our QA monitoring tool reviews compliance with proper assignment of activity hours. This item has been and will continue to be monitored throughout the program year by Quality Assurance staff, SNAP Supervisors, and external monitors. Since the review, we have not found this to be a recurring issue.</li> <li>• Actions taken if staff fails to follow the requirements will include refresher training, job shadowing, and counseling up to termination.</li> </ul>

<b>Finding WIOA 22.22.05 – Incumbent Worker Training (IWT)</b>
Two IWT participant contracts were missing the required language regarding the use of funding.
<b>Recommendation</b>
CSBD should ensure IWT agreements/contracts contain the required verbiage regarding how work-based funds provided to employers must or must not be used.
<b>Agree/Disagree</b>
Agree
<b>Resolution</b>
<ul style="list-style-type: none"> <li>• The IWT Master Agreement template was updated to include the requirement not to place participants during a strike.</li> </ul>



<b>Finding WIOA 22.22.06 – Recording of Individualized Career Services</b>
Two participants enrolled in an On-the-Job Training (OJT) activity were missing documentation of the OJT on their Individualized Employment Plan (IEP). (South-2)
<b>Recommendation</b>
CSBD should ensure details of the OJT assignment are incorporated into participant IEPs.
<b>Agree/Disagree</b>
Agree
<b>Resolution</b>
<ul style="list-style-type: none"> <li>• These cases could not be corrected as they were closed prior to the monitoring.</li> <li>• Staff were previously using the OJT Training Plan in place of the IEP, as it outlines short-term and long-term goals to document the OJT activity. Staff training tools and the WIOA Training Manual were updated to include the required utilization of the IEP to document OJT activities.</li> <li>• The 6/15/2022 department staff meeting included training on documenting the OJT activity on the IEP.</li> <li>• On 06/17/2022, the WIOA Program Manager also sent an email reminding staff that the IEP must be completed for every participant enrolled in an OJT activity.</li> <li>• On 9/20/2022, the WIOA Program Manager conducted annual staff training, which reviewed this requirement.</li> <li>• Our QA monitoring tool includes a file sample review to assure compliance with proper OJT activity documentation. Further, subsequent internal monitoring focused on compliance and we have not seen evidence of recurrence.</li> </ul>

<b>Finding WP 22.22.07 – Employer-Entered Job Order Review and Verification (<i>Prior Year Issue</i>)</b>
Five employer-entered job orders were missing documentation of CSBD staff review or verification within two business days. (Job Order Unit-5)
<b>Recommendation</b>
CSBD should ensure employer-entered job orders are reviewed for compliance within two business days of entry in Employ Florida.
<b>Agree/Disagree</b>
Agree

<b>Resolution</b>
<ul style="list-style-type: none"> <li>• These job orders were no longer open and could not be corrected.</li> <li>• The Quality Assurance and Training Coordinators (QATCs) began conducting routine spot checks on new job orders to verify that staff have reviewed assigned job orders within two business days and the related training presentations were updated to reflect this additional monitoring process.</li> <li>• Staff trainings on the use of the QA Monitoring Tool were held with Job Order Unit staff on 9/20/2022 and 12/21/2022.</li> <li>• Our QA monitoring includes a review to assure compliance with the timely verification of job orders. This item has been and will continue to be monitored by Quality Assurance staff and by the Job Order Unit during monthly desk reviews.</li> <li>• The 2022-2023 QA Program Monitoring was updated to reflect increased monitoring of job orders.</li> <li>• CSBD's external monitoring included an increased focus on compliance and no evidence of recurrence was seen amongst the sample job orders they reviewed.</li> </ul>

<b>Finding WP 22.22.08 – Job Order Minimum Wage Rate Verification</b>
One job order had no documentation to support that staff verified the job order paid at least the State's minimum wage. (Job Order Unit-1)
<b>Recommendation</b>
CSBD should ensure they verify and document that the employer wage rate for the position is at or above the Florida minimum wage (unless exempt). For job orders listed at or below minimum wage, staff documentation must be recorded as a case note on the job order in Employ Florida.
<b>Agree/Disagree</b>
Agree
<b>Resolution</b>
<ul style="list-style-type: none"> <li>• The identified job order was closed because staff was unable to verify the wage with the employer.</li> <li>• The QATCs began conducting routine spot checks on new job orders to confirm that staff has verified the wage is at least the Florida Minimum Wage and the related training presentations were updated to reflect this additional monitoring process.</li> <li>• Staff trainings on the use of the QA Monitoring Tool were held with Job Order Unit staff on 9/20/2022 and 12/21/2022.</li> <li>• Our QA monitoring includes a review to assure compliance with verification of wages. This item has been and will continue to be monitored by Quality Assurance staff and by the Job Order Unit during monthly desk reviews.</li> <li>• The 2022-2023 QA Program Monitoring was updated to reflect increased monitoring of job orders.</li> </ul>

<b>Finding WP 22.22.09 – Job Seeker Permission for Referrals (Prior Year Issue)</b>
<p>A. One staff-assisted Employ Florida registration was missing documentation of the customers' permission to create their new Employ Florida accounts. (Central-1)</p> <p>B. One staff-entered referral was missing documentation of the customers' permission to refer the job seeker to the job order. (South-1)</p>
<b>Recommendation</b>
Staff must ensure they verify and document that the job seeker's permission was granted prior to or on the same day of the job seeker's registration when registering individuals in Employ Florida and when doing referrals to job orders.
<b>Agree/Disagree</b>
Agree
<b>Resolution</b>
<ul style="list-style-type: none"> <li>• The file is no longer active because employment was found on 6/11/2021.</li> <li>• During the 9/2/2022 and 9/29/2022 departmental meetings, registration and referral permissions were reviewed with staff.</li> <li>• Our QA monitoring includes a review to check for documentation of the job seeker's permission to create an Employ Florida registration and permission to be referred to a job order. This item has been and will continue to be monitored throughout the program year by Quality Assurance staff, Program Supervisors, and external monitors.</li> </ul>

There were **6** non-compliance issues:

<b>Non-Compliance Issue WT 22.22.01 – Documentation of Safety Plan Elements</b>
An Individual Responsibility Plan (IRP) did not include the required elements from the safety plan of a domestic violence victim. (Central-1)
<b>Recommendation</b>
CSBD should ensure that elements from the safety plan are included in the IRP for victims of domestic violence.
<b>Agree/Disagree</b>
Agree
<b>Resolution</b>
<ul style="list-style-type: none"> <li>• This was an isolated incident.</li> <li>• This occurred approximately one month after the participation waivers were lifted in WTP, which was the reason for the oversight.</li> <li>• The case was closed and could not be updated.</li> <li>• On 10/28/2022, annual WTP staff training covered proper documentation of safety</li> </ul>

plan elements on the IRP for participants identified as victims of domestic violence.

- Our QA monitoring tool reviews compliance of proper documentation of safety plan elements on the IRP for participants identified as victims of domestic violence. This item has and will continue to be monitored throughout the program year by Quality Assurance staff, WTP Supervisors and external monitors.
- Actions taken if staff fails to follow the requirements will include refresher training, job shadowing, and counseling up to termination.

**Non-Compliance Issue SYEP 22.22.02 – TANF Summer Youth Employment Program (SYEP)**

The TANF SYEP Eligibility Screening form was not signed to determine eligibility for one participant. (SYEP-1)

**Recommendation**

CSBD should ensure participants' TANF SYEP Eligibility Screening forms are completed correctly and signed and dated prior to enrolling a participant in the SYEP.

**Agree/Disagree**

Agree

**Resolution**

- This was an isolated incident.
- The date on the Florida screens that were printed out to substantiate eligibility did not match the date the SYEP eligibility form was signed because it was later decided to enroll the participant as TANF SYEP. This has never been cited as an issue previously.
- Moving forward, SYEP will ensure that the Florida screens are printed before or during the SYEP eligibility interview, as evidenced by the print date, when the actual eligibility forms are signed during the SYEP in-person eligibility screening interview.

**Non-Compliance Issue SNAP 22.22.03 – Initial Engagement Process (OSST 590-Code)**

Six participant files did not have their initial appointment status selected within two business days of completion of the appointment of "No Show" as required. (South-6)

**Recommendation**

CSBD should ensure that the 590-status code is entered in OSST within two business days of completion of the appointment or no-show.

**Agree/Disagree**

Agree

<b>Resolution</b>
<ul style="list-style-type: none"> <li>• The required actions were completed, but not within the two-business day window. These cases were worked by SNAP staff members who are no longer employed at CSBD.</li> <li>• Documentation of retraining and notification for staff to monitor results of the 590-appointment setting code in OSST was included in the training presentations sent to staff on 3/23/2022.</li> <li>• From October to November 2022, the Program Manager conducted a sample review of the 590-codes entered in OSST, which all indicated that the appointments were entered timely.</li> <li>• CSBD has updated its SNAP QA Monitoring Tool to review for timely OSST entry of the 590 code. This item has been and will continue to be monitored by Quality Assurance staff and the SNAP Supervisor.</li> <li>• Actions taken if staff fails to follow the requirements will include refresher training, job shadowing, and counseling up to termination.</li> </ul>

<b>Non-Compliance Issue WP 22.22.04 – Staffing (Private/Temporary Employment Agencies) (Prior Year Issue)</b>
One job order offered by staffing (private/temporary employment) agencies did not include the phrase “Position offered by no-fee agency” in the job description. (Job Order Unit-1)
<b>Recommendation</b>
Staff must ensure all job orders for private employment/staffing agencies must contain the phrase “Position offered by a no-fee agency.”
<b>Agree/Disagree</b>
Agree
<b>Resolution</b>
<ul style="list-style-type: none"> <li>• This was an isolated incident.</li> <li>• The job order was updated to include the phrase “Position offered by no-fee agency” in the job description section.</li> <li>• The QATCs conducted daily spot checks on new job orders to verify that staffing agency job orders contain the phrase “Position offered by no-fee agency” in the job description section.</li> <li>• The QATC and the Job Order Unit conduct reviews of job orders to check for compliance.</li> <li>• Staff training was held on 9/20/2022 and 12/21/2022 with all JOU staff on using the QA Monitoring Tool, which checks if a staffing agency job order contains the phrase “Position offered by no-fee agency” in the job description section.</li> <li>• Training presentations were updated to include this process.</li> </ul>

- Our QA monitoring includes a review to assure compliance that staffing agency job orders contain the phrase “Position offered by no-fee agency” in the job description section. This item has been and will continue to be monitored by Quality Assurance staff and by the Job Order Unit during monthly desk reviews.

#### **Non-Compliance Issue WP 22.22.05 – Job Referrals (*Prior Year Issue*)**

One job order had a staff referral with unqualified job seekers. (Job Order Unit-1)

#### **Recommendation**

Staff must ensure that the “job development” job order type is used instead of “job referral” when accounting for the “reverse referral” of an individual pre-selected to fill a job prior to the entry of the referral in Employ Florida, to avoid future identification of unqualified job seekers.

#### **Agree/Disagree**

Agree

#### **Resolution**

- In this case, the individual was referred to be considered for a WIOA OJT. The job seeker did not have to meet the minimum qualifications because the employer had already indicated that they were willing to train the individual if awarded an OJT contract was documented in the 10/6/21 case note. The employer was interested in hiring the customer and providing the needed training and this was considered a reverse referral. Under WIOA, reverse referrals by employers of individuals who need training to be able to qualify for a posted job are allowed.
- CSBD staff have been advised that moving forward, they are to use the “job development” job order type for reverse referrals and similar situations.
- Our QA monitoring includes a review to assure compliance that the job seeker being referred meet the minimum requirements on job orders. This item has been and will continue to be monitored by Quality Assurance staff.
- The 2022-2023 QA Program Monitoring was updated to reflect increased monitoring of job orders.

#### **Non-Compliance Issue WP 22.22.06 – RESEA Red Flag Drop-off Report**

One participant was identified as not being managed and appeared on the RESEA Red Flag Drop-Off Report. (South-1)

#### **Recommendation**

CSBD should ensure that cases are managed within 90 days so that they do not appear on the RESEA Red Flag Drop Off Report.

#### **Agree/Disagree**

Disagree

### **Resolution**

- We disagree with this ONI because the RESEA participant was a no-show but then appeared 2 days after his original appointment. Staff resulted and completed all required documentation. His name should not have appeared on the Red Flag Report list.
- During the review, on 6/21/22, CSBD staff discussed the matter with DEO reviewers. CSBD staff believed that since the customer showed up and all requirements were completed, this would “override” the no-show.
- CSBD staff have been advised that moving forward, they are to contact the DEO Performance and Analysis Unit for assistance and guidance in future cases when a RESEA participant shows up a few days after their original appointment and all required documentation is resulted and completed by staff.
- RESEA staff also routinely review the Red Flag and Yellow Flag reports to ensure timely management of cases.

### **RECOMMENDATION**

None. For information purposes only.