**WorkforceGPS**

**Transcript of Webinar**

**A Deep Dive of the 4Cs of a Monitoring Report**

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LAURA CASERTANO: With that, I'm going to get myself right out of the way. I want to welcome everyone to today's webinar, and I'm going to turn things over to your moderator today, Jeffrey Gabriel. He's the executive assistant to the regional administrator with U.S. Department of Labor, Employment and Training Administration, Region 2. Jeff, take it away.

JEFFREY GABRIEL: Okay, Laura. Thank you so much, and welcome, again, everyone. This is the last of the four live webinars in this training series, and it's actually the last event of any kind in the monitoring training series that we rolled out over the past several months. So, we're really glad that you have come to join us one more time.

We've had such great participation in all of these webinars and looking forward to more of that today. And you may be aware that two weeks ago we released a podcast providing an overview of today's topic, which is the 4 Cs. And if you heard the podcast, you know what the 4 Cs are, and if you didn't or if this is a new term to you, you may have to wait a few slides before we dig into our explanation of that.

But for right now, let's introduce ourselves. So, as Laura mentioned, I'm Jeff Gabriel. I'm in Region 2 Philadelphia, and I have been in a front office position for a while now, but prior to that, over most of my 16 years with ETA, I worked in our state systems unit. So, I have had the opportunity to do a lot of state monitoring and local monitoring.

And prior to coming to ETA, I had almost as many years in the local workforce development system. So, over the course of – don't do the math, but that's a lot of years. Over the course of those years, I've had the opportunity to monitor training providers, local areas, and states, and I've also had the honor of being monitored by the federal government, by states, and by local areas as well.

So that is the experience that I'll bring to today's session, and I'm going to hand it off to my colleagues for them to give me a little bit about their background. Start with Carol.

CAROL PADOVAN: Hi. This is Carol Padovan. As you see on the side, I'm from U.S. DOL ETA Region 6. I work in the Division of Workforce Investment, which means that I work directly with states. But my career really started back in around 1985 when I was really a lost and forlorn jobseeker.

I was lost, and I was handing in handwritten on note paper resumes because I didn't know what one was. And then I wound up becoming an employment counselor with the JPPA program, for anybody on here who's old enough to know what that is or was.

I moved from there to be a One-Stop coordinator when WIA came into being. I worked for the State Workforce Agency for a couple of years coordinating their new monitoring system and reorganization. And then in 2006, I started with ETA, and I have worked with all the states in our region except for one. And I'm just so looking forward to this webinar. So, I'll hand it over to Antonio.

ANTONIO MCKOY: Thank you, Carol. And good afternoon or morning, depending on where you're located in the country. My name is Antonio McKoy, and as you can see from the slide, I am a federal project officer out of the Region 2 Philadelphia office.

I work specifically with ETA's discretionary or competitive grants here in the region. Let's see. I've been with ETA now for almost six years, and before that I actually was an ETA grantee. I was actually the founding program director for a YouthBuild grant in my home state of North Carolina. And like Jeff, I also have experience with having been monitored as well. So, I like to say I've sat on both sides of that conversation. So, I'll hand it back over to you, Jeff.

MR. GABRIEL: OK. Thank you both very much. So, that's who we are. And let's look now at what we want to try to accomplish with you here today.

So, our objectives are basically these. We want to show you how this 4 Cs approach can be used to actually help you conduct your reviews. It's really designed with the writing up of what your observations are in mind. But along the way, it can help you – it can help organize our thinking and focus our monitoring efforts in a way that can just make that monitoring more effective.

And then, of course, it can help us articulate those issues more clearly in our mind and then translate those into clear written descriptions and reports.

The other thing we want to make clear, and you'll see this when Antonio and Carol get into the descriptions of each of the Cs one by one, is that these don't stand in isolation. They each have their own importance and their own role, but they are related to each other. And it's that relationship that is by design, and it's meant to help us arrive at effective next steps and effective action to improve – address issues and improve programs.

And then finally, there's a theme you'll hear quite a bit is how it will help – it helps us identify a root cause, and in doing so, helps us get to a point where we are addressing issues, particularly compliance findings, permanently, not just in the short-term. So, that's what we're going to try to accomplish. Now, let's look at how we're going to try to do that and what the order of things will be for the day.

So, first, we'll look at the approach itself. Just – and, again, this may be review for most of you, but looking at what the 4 Cs actually are and what they mean. Then we'll touch on why this approach, which is something that ETA designed for ETA use. It's something that should matter to you as well or could matter to you as well.

We will go into, as I mentioned, a discussion of each of the Cs one by one, and then we will add a fifth C, which is areas of concern.

What we'll probably do is try to pause after each segment and see what kind of questions or comments you may have in the chat, and then we'll pause – time permitting, we'll pause for any additional questions after we discuss areas of concern. And then we'll do a quick wrap up of this monitoring series. And with that, let's take a look at the 4 Cs framework.

So, if you were able to listen to the podcast, which was the overview of the 4 Cs, this will probably be largely review, but I think it's worth just kind of resetting our foundation here.

One of the biggest words we're going to use in here – it's probably the biggest one that doesn't start with a C in this whole presentation – is that a finding? When we say finding, we're talking about an observation that violates program requirements, whether that be a statute, regulations, policy, or so on. We're talking about a compliance issue.

And, again, you'll hear that a lot, and if you hear finding, that's what we're talking about. You may have different terminology in the state, but that's what we mean when we refer to that.

So, here are the Cs themselves. And you can read the description on the slide, but I'm going to even condense it more. Your condition. What did you see? Your cause. Why is it happening? Your criteria. What should you have seen? What is it supposed to look like? And your corrective action. How do we get what you saw to mirror what it's supposed to look like?

And the one other thing I want to mention here, and this also harkens back to the podcast, our colleagues in Dallas who were our panelists in the podcast, they flipped the order a little bit, and we're going to do the same thing today. The order that you see is the way that the framework was designed.

We're going to talk about it slightly differently. We're going to reverse those two in the middle, and we're doing that for this reason. We want to align condition with criteria to help make it clear that a condition is – requires a clear criteria to even exist. In other words, to be a finding, you need that criteria. We'll reinforce that link quite a bit.

And then the cause will be next to the corrective action, and that will serve as a reminder for when we're thinking about our corrective action, we're not only thinking about correcting the condition of what was observed, which is obvious, but we're also thinking about addressing the cause and, again, trying to prevent issues from the current. So, that's why we're going to flip this a little bit. It wasn't an accident.

So, I mentioned that we talk a little bit – we would talk a little bit about why the courses might matter to you. Again, this is something that we do in all of our monitoring. Here's why it's something that might be worth your consideration for putting into your work.

Number one, it can help you understand our thinking as the entity that is monitoring you and your programs, just to know how we're thinking, how we're trying to organize our thoughts, how we're trying to do our analysis, and what we're trying to do with that in terms of corrective action can be useful to you.

Also, it's an approach that we think is easily replicable, not only in whole but even parts can be used to help you focus your efforts differently in ways that you think might be important to do.

So – and then the last two are they can be useful to you, but they're also – they're widely – (inaudible). The ability to understand the issues better and to articulate them clearly in writing in a report that's coming back to you and also, the way it helps focus our thinking around cause and addressing cause with our corrective action to prevent issues from – again, issues from recurring. We're in slide six, and I think we've also revisited that already two or three times.

So, with that, we're going to dive into the first of the 4 Cs, condition, and I am going to hand it off to Carol.

MS. PADOVAN: Sorry about that. I had my phone on mute, the curse of EH. OK. Great. Thank you, Jeff.

So, when we talk about the condition, we're really going to be looking at what's wrong with this picture. Next slide, please.

So, a condition definition is a clear, concise, and specific statement that describes the violation of law, regulation, agency, or national policy and that must be corrected. So, to quote my friend Jeff here, it's either something a grantee or subrecipient is doing that they are not allowed to do, or it is something that they are not doing that they must do.

The condition is really identified through all the work that you do when you're monitoring, your observations, your interviews, the analysis that you do, and when you're looking at verifications. We at Department of Labor also use the condition as part of how we label the finding in a written monitoring report.

Antonio or Jeff, is there anything you want to add here?

MR. MCKOY: Yeah. Sure.

MS. PADOVAN: I think – oh, go ahead. Sorry.

MR. MCKOY: Yeah. Sorry. I'm struggling with mute myself, apparently, today. One of the things I always think about when it comes to the condition is that it really is kind of the first step when we start thinking about building out the finding, when we're writing our monitoring report. It more or less is the foundation of everything that will come after that.

So, it's definitely an important piece to the puzzle. And as the definition suggests, you doesn't want to make sure that you are describing it in a clear way. Otherwise, if it's not clear, the rest of the finding, when we start talking about the other Cs, will equally not be clear. So, that's all I'll say for now.

MS. PADOVAN: Great. Next slide.

So, why is it so important? I'm going to be paraphrasing Antonio here really. The condition is the basis for the compliance finding. It's the focal point.

Let's just say that you've conducted a participant file review of 10 files, and you see a couple of files in which eligibility was not verified. By itself, this is a compliance issue. We have two participants who have received WIOA services who don't seem to be eligible. You could just write that as a finding and ensure that they correct those two files, and that may, in fact, be it. That might take care of the whole thing. Just two mistakes that need to be corrected.

But what we really try to do is make sure that that's all. Is it bigger than that? Two files out of 10 is 20 percent. How did this happen? Is it a symptom of something else that should be corrected?

Aside from pulling the larger sample to see if there are more than those two files, have you also reviewed the eligibility policy of the local board or other subrecipients? Have you learned if or how training for service providers is provided by the local board? Does the service provider have a process for reviewing eligibility documentation?

Any of these things could be contributing factors that may need to be addressed in the condition as well. And without taking those into consideration, your condition will be incomplete. Next slide.

So, here's what we mean by incomplete. As you can see by the examples above, those don't really clearly and completely describe the condition. Are they issues? Yes. They are, but they don't provide a specific description of what was out of compliance. If you are a grantee and receive these as your monitoring findings, what would your questions be? Which equipment? When purchased? Which One-Stops? So, now, let's look at the same issues as more complete conditions. Next slide.

Note that these are much more specific, describing what we observed through a careful review of documents and interviewing of staff. Also note that these are examples for a slide, and so, they can't possibly include all of the level of detail that you should also include, such as which partner programs for each One-Stop or which program partners did not sign the MOU. But you kind of get the picture.

The condition needs to be concise but complete. Exactly what is not in compliance, based on what you reviewed? What is it that you want fixed? Go ahead. Next slide.

OK. Now, we're going to get into just a real brief description of the five why's technique, which Antonio will go over in much more detail during – when we get to the cause section of this presentation. But I'm just going to give you a little bit here.

As with the 2 out of 10 participant files, when developing a condition, we often find that compliance issues are created by other, more systemic issues. Maybe it's a lack of policy or communication of that policy, for example.

That's why, in creating the condition, we use the five why's technique, which gets at another of the 4 Cs, the cause. The five why's technique helps the reviewer move beyond the symptoms of a compliance issue, such as possibly that 2 out of 10 ineligible participants, by repeating the question why. Why? What happens here? How is it that people somehow didn't know that they needed to do the eligibility, et cetera?

So, this technique is also – it's a qualitative data analysis technique called iterative questioning. But as the reviewer uses this technique and continues asking why, it will move you towards a more specific finding and ultimately to the cause of the condition. Antonio will be going over this in more detail, as I mentioned, at a later point.

Antonio or Jeff, anything you want to add here?

MR. MCKOY: All set, Carol.

MS. PADOVAN: OK. Are there any questions about that first C? OK. I'm not seeing anything on the participant questions, comments, but just know that at any point you can certainly put a question in the chat. All right. Next slide, please.

MR. GABRIEL: Hey, Carol?

MS. PADOVAN: Yes.

MR. GABRIEL: Before we proceed, I did notice that there was a question entered that I missed earlier, and I apologize. But since I referenced the podcast so much, I think it's maybe worth clarifying.

MS. PADOVAN: Sure.

MR. GABRIEL: The question came in was, what was the podcast that I was referring to? So, we've had a couple, but the one that I was referring to that ties to this session today is an overview of the 4 Cs. And I believe it was released on the 7th of June, and it's about 20 minutes. And it was presented by our colleagues in Dallas, Frank Stluka and Rebecca Sarmiento, who did a real nice discussion.

So, I'll just give it a plug. If you haven't had a chance to check it out, they do a real nice discussion of what ends up being a description of their process in the Dallas office. But I think you'll find the principles are pretty universal, and I think they will tie pretty well to our discussion today. So, I just wanted to –

MS. PADOVAN: Sure.

MR. GABRIEL: – get that in there before we get too far removed from all those references I made. So, sorry about that, Carol.

MS. PADOVAN: OK. No. No problem. So, I see that there is a question in the box, and it reads, "Regarding reviewing policy, what if a non-state subrecipient is under review and the monitor identifies a gap or inconsistency in policy? Would this show in the subrecipient's monitoring report? I mean, in policy that is provided by the state?"

Well, yes and no. There are – we'll talk about this a little bit more as we get into this next section, I think. But in general, the higher authority, which would be the state policy, would be the one that controls, which means that, if you have a policy, if you're a state and you have a policy, in only rare instances can, say, a local board not – what am I trying to say here?

You can be more restrictive sometimes at the local level. Not always, but sometimes, but you can't be less restrictive, and you must be consistent with the state policy, in general. So, if that answers that question. If it doesn't, please let us know.

All right. So, could we go to the next slide?

All right. Now, we're going to get into criteria, or, as I like to think of it, where does it say we have to do that? So, next slide.

All right. So, the criteria definition. The criteria are the standards or the legal requirements that are being violated. So, criteria can be anything from the laws and regulations to contracts, grant agreements, performance standards, business practices, benchmarks, such as performance targets that they agreed to in the sub-agreement, and policy and procedures.

When a grantee applies for and accepts a grant or a subaward, they have signed on the dotted line that they will adhere to all of the requirements that go with it. And monitoring is literally watching to make sure that they do.

So, we call this criteria, but it is sometimes more useful to just think of it as citations. What are the laws or regulations or other requirements that you are citing, which you are saying have been violated? So, next slide. Next slide. Oh, there we go. Thank you.

So, here's an example of a condition with criteria. A written criteria will always include all the citations you're saying have been violated. And right here we have that citation, that 20 CFR 678.400.

When you're writing your finding, it really helps to – and you're putting your criteria into the finding, it does help, I find, to add some explanation of what the criteria requires specific to the condition. This will assist the grantee to better understand what exactly is being called out and how it relates to that particular part of the condition, which can include several factors.

It also helps – just helps us in general be more accurate and specific. I know for myself, I find it super helpful to have the explanation with the citation because it means I generally don't have to keep looking up the specifics when I'm reviewing the responses to my monitoring report. That doesn't mean that I cite the whole thing. The example of criteria that I gave you there of one criteria is literally just how we write it with the Department of Labor.

So, Antonio or Jeff, do you have anything to add here?

MR. GABRIEL: I do, Carol, actually. This is Jeff. I – since you referenced me earlier when you were first describing condition, I wanted to – just had a thought here that, when Carol talked about the way of thinking of a condition as something you're required to do that you're not doing or something that you are – how did I say that – required to do that you're not doing or not allowed to do that you are doing, than that – this is where I think you're applying that thinking, that you want to see – and this is why we're talking about condition and criteria together today.

That we could – we can put on one slide that you have a condition that clearly states the issue, and you're responding with criteria that clearly reflects why you have a problem, why what you observed is a compliance issue.

And so, when you're – just a tip. When you're looking at your criteria, to ensure that it's appropriate, that it does fit the observation that you're trying to capture, make sure that it says it back. Make sure that it reflects what you're supposed to see that you haven't seen. It should almost look like the opposite of what the condition is above it. So, that's where that thinking applies, to try to really streamline the relationship or your analysis of the relationship between condition and criteria. Thanks, Carol.

MS. PADOVAN: Excellent. Thank you. Anything, Antonio?

MR. MCKOY: No. No. Nothing else to add for me.

MS. PADOVAN: Got it. OK. Next slide, please. Thank you.

All right. So, the sources of criteria. For federal, state, and local requirements examples include all of what's listed on that slide there. So, those are the – some of the sources. There are other sources as well, but let's go onto the next slide.

So, order of precedence. So, order of precedence means that some criteria are going to be more important or more – want to use the word dominant, and I didn't write it in my notes, but, for example, if you – to the earlier question that you've got, if – that we had about, if there's a local policy that diverges from a state policy, well, the state policy is the policy that is going to control in that case because they are the grantee.

They're the ones that signed on the dotted line to us that they're going to ensure that everybody is following the requirements and the law. And we give – as part of that, we give them authority to develop policies that may be more restrictive than what our policies require. But when it comes down to it, if there's a divergence between the state policy and ours, ours is going to be the one that controls because we are the – the grantee is in charge of ensuring that all of the grants are following the requirements.

But even within our own requirements within WIOA, for example, or in the Uniform Guidance and then those sorts of sources, there are – we do require grantees, for example, to follow some of the requirements we've put into the grant package. Some of those may be determinations made, say, by a grant officer, but those are not what we, in a sense, may call controlling. They're not as high an authority as, say, the authorizing legislation, the actual WIOA, when it comes down to it.

So, you always want to be familiar with kind of what the order of precedence is. I would say that the best resource that you can find for what the order of precedence is is in our ETA Core Monitoring Guide Resource C. It does list the order of precedence for pretty much all of the federal policies, federal requirements, better way of saying it. All right. Next slide.

So, you can find ETA regulations at these sites, the Title 2, 2 CFR Part 200 in the Uniform Guidance, we call it. It is where most fiscal and administrative rules and requirements are housed. And then Title 20, which is 20 CFR Parts 1 through 1099, include the regulations applicable to many of our programs, especially WIOA Title I and Title III. OK. Next slide.

So, now – wait a minute. I think I'm on the wrong slide. Oh, yes. We also have ETA guidance. And so, hopefully, most of you are familiar – hopefully, all of you are familiar with the ETA Advisories. They take the form of being Training and Employment Notices, which are not specifically regulations, but they do provide a lot of helpful information about implementing many of the requirements.

Our Training and Employment Guidance Letters, also known as TEGLs or sometimes pronounced TEGLs, depending on where in the country you live, and our Unemployment Insurance Program Letters otherwise called UIPLs. These are – outline how the various law and regulations apply to the programs. And for myself, I find them super helpful when I'm preparing for monitoring and when I'm in the middle of monitoring, because, number one, they're not written quite such legalese.

Number two, they gather all the applicable regulations and laws together in one fairly comprehensive site so that you're not thumbing back and forth, whether you're doing that electronically or on a paper version. And they also provide a little bit of context around a lot of it. For myself, it's really helpful because, like I said, I'm not searching all over the place. I always put those together before I go out on a review. Next slide, please.

Oh, wait a minute. One thing. Always remember that, when you go into the site that we've posted there, that some advisories are marked as active or canceled, and always make sure that your version is active. I made that mistake once and didn't pay attention to it. Spent a lot of time and effort writing something that wasn't applicable anymore. So, next slide.

All right. Let's go back to basics here. Now that we've discussed what criteria is and how to write it and where to find it, we need to remember this. While reviewing, you should take a thorough look at what your condition is to determine if it actually violates any authority or criteria.

In order to have a finding, you got to have a criteria. There must be a specific authority that is being violated in order for there to be a finding. If we review it and the answer is yes, proceed with the finding. If no, it's not a finding, but we'll talk about how you might deal with an issue of that kind at a later point. And there you have it. The first two of the Cs – of the 4 Cs.

Antonio, Jeff, did I miss anything?

MR. MCKOY: No. No. I don't think you missed anything. I will say that one of the things that, especially coming on board as a new FPO some years back, that jumped out to me and I remember my own FPO telling me that idea that, when we start thinking about criteria, I think it's easy to first think about the federal regs that govern our grants, but those internal policies and procedures are equally important. So, just wanted to highlight that yet again, but no. I think you hit everything that I could think of.

MS. PADOVAN: Great. Jeff?

MR. GABRIEL: Carol, the only thing I wanted to ask, we did get a couple of questions about the – I think the active links that you were talking about in our resources, if there was a way to know which ones are active or not.

MS. PADOVAN: Yeah. They're actually labeled. On the TEGL or the other resources, when you pull them up, they're labeled, and also, when you go into the search part of it, there's a filter that you can activate that says, show me all, show me only those that are active. And that's the simple way, actually, is just to click on show me the ones that are active.

But yeah. It is labeled. It's usually labeled, and sometimes we have TEGLs that they're – it's the same number, but there's something called a Change 1 after it. So, for example, those of you may be familiar with TEGL 12-19, which is the – our TEGL that describes the process for applying for dislocated worker grants, there is a TEGL Change 1 that has been put in place.

So, both of them, if you don't put that filter on, will show up in the system, but one of them will have canceled on it. The other will have Change 1. So, it's Change 1 that you want. So, the simplest thing is usually just to put that filter on.

MR. GABRIEL: Great. Thank you.

MS. PADOVAN: Yeah. The other question that is – I see that's in the participant questions and comments is, "Even if the partners are not available in that region, are they still required to provide access? If not, is this a finding?"

Well, I got to tell you, at this point, I am a nervous presenter, and so everything but my slides goes out of my head. If you know who your FPO is in your region, by all means, contact that person with that question, and they'll provide you with that answer. If you don't, we'll find a way to answer that question at a later point.

So, okay. I am going to hand it over to Antonio to go over the next C.

MR. MCKOY: Thanks, Carol. Now, let's begin exploring our third C, cause, and this question is one that I've started asking myself when conducting a review and ultimately writing my report. Why am I seeing what I'm seeing?

I mean, it sounds like a simple question, but you'd be surprised particularly how interesting it can be sometimes when you're trying to really get to the root cause of an issue. So, let's talk about it a little bit here.

So, let's think for a moment. Why do you think it's important to address the cause of a finding? If you've been a monitor or reviewer for any length of time, there's a good chance you might have experienced what we like to call the zombie finding. And Carol was actually the one to coin that phrase. So, thank you, Carol, because I think it describes what we're talking about perfectly.

When think about a zombie finding, it's one of those findings that, despite having been resolved the last time or even several times before a review took place, it comes back to life again. As we all know, from The Walking Dead or Night of the Living Dead, depending on your generation, simply killing the zombie doesn't work. I know that I've seen my share of zombie findings.

What about you, Carol and Jeff? Do either of you have an experience with the dreaded zombie finding that you would like to share with the group today?

MS. PADOVAN: Well, I can tell you this. That whole – there's – gosh. There's actually several, and I think we all know many of the ones that are out there. But I would say eligibility is definitely one that pops up constantly. That's definitely one.

For as long as I've been – I mean, gosh, back when I was an employment counselor, I can remember getting dinged for that one. So, yeah. That one shows up all the time. Doesn't seem to matter what we do. But I can tell you this, that if we see it and we write up a finding, we're definitely looking systemically at that one. Because we know that's a constant one that comes up, we are really looking for ways to prevent it. So, that's my advice.

MR. GABRIEL: And what I would add to that, Antonio, is just that this – it's maybe a nuance, but it's an interesting distinction, I think, that we have zombie findings. We also have common findings, and those may or may not be the same thing. And I know there's going to be some discussion about common findings that you're going to get into shortly.

But sometimes the – what you're calling the zombie findings or the real recurring ones that are troubling us are the ones that may be recurring with a specific grantee. So, it may be something that they are struggling with uniquely. May or may not be something that other grantees struggle with. But as such, that's what makes getting to the root cause so important, is because there could be something systemic with that grantee or in the state system.

And it might be something that the entity that we interact with may not even have control over. It could be an overarching state system that operates in such a way that it kind of bumps into to some of our requirements at times.

So, I don't know that I can think of those offhand that come up all the time, but I think it's just important that we – that everybody keep in mind that these could be – a zombie finding tends to be one – a zombie finding. That is a good one now – that tends to be one that is recurring with a specific grantee and one that has likely a very deep root cause that, again, with this approach, we're going to really try to get at. So, that's my thought, Antonio.

MR. MCKOY: No. No. Thank you for that, and I think it's really great to kind of show that differentiation when we tend to start thinking about these findings. Obviously, yeah. Zombies for sure within a – reoccurring within a single grantee, and, obviously, we want to get to the root cause of that so that we can deal with that issue within that organization that we're working with.

And then those – for those common findings that we may be find – seeing across programs and even program types sometimes, I know one of the things that we do in our unit – I'm in Philadelphia – is we started providing – taking that as an opportunity to provide TA because it is kind of a shared thing that we're seeing possibly across programs.

And, also, we still want to get to the root cause of that as well. So, ultimately, we're in this together as it pertains to trying to resolve those findings, whether they be zombie findings with a particular grantee or common findings within a group of grantees.

So – but specifically thinking about the zombie findings, one of the things I want to talk about and think about right now today for our conversation purposes is how do we lay those zombie findings permanently to rest so that they don't become reoccurring issues that we see over time and over different monitoring review events?

So, when we start thinking about trying to lay those findings to rest, preventing the reoccurrence, we have to identify the cause of whatever the compliance issue we find rather than just calling out what you see, which is the symptom.

For the purposes of this – of the core monitoring guide, a cause – as we heard earlier before, a cause is a person, thing, or event that produces an undesirable condition. Sometimes the cause is not easy to identify, especially if the grant recipient is unaware of or wishes to conceal problems. But for the sake of all of our brains and time and resources, it is well worth the effort.

So, here's what we mean by cause for monitoring purposes. In an ETA monitoring report, the cause is a statement that explains why the condition occurred. And in that statement, it identifies the source of the issues, whether it's a person, thing, or event. So, how do we determine the cause?

First, we have to distinguish between a symptom and a cause. Symptoms are easily identified through premonitoring review or preliminary conversations with our grantees. They are surface-level problems. Defining the monitoring finding in terms of its symptoms may obscure the real condition and cause, leading to superficial solutions that fail to correct the problem.

For example, it is premature to label as a cause the fact that career counselors are not documenting the need for supportive services. You may not have known this before the review, but it's going to be evident the first time you look into a file. And if you looked at a sample of files from various staff, you will know that everyone's doing it. On this example, maybe not doing it and that's because this is clearly how business is done here.

However, the counselors who weren't documenting supportive services certainly don't realize or may not realize that it's incorrect. They're just following directions. And for that matter, their manager likely doesn't realize it's wrong either.

Usually, and having – like I said, having been a grantee myself, I know firsthand usually people try to make things right before the monitor happens – before the monitor comes. So, we'll write in the compliance finding that says the – (inaudible). We found some files that did not document the need for supportive services. So, fix those files.

Will that resolve the true issue? Maybe, but not likely. What we've experienced is that this approach will solve the finding as far as those files are concerned, but next time you come out, odds are pretty good you will see that same issue again. So why is that? Wouldn't you think by this time the service provider would have done something about this?

The zombie finding is pretty maddening in this way. It was a finding before. The entity you're monitoring got called out on it before, maybe even multiple times, but here it is again. So, what's really going on?

A cause is less obvious and requires a little detective work. Assuming we you seen the local board or other grantee's policy on this issue and it was correct, what questions should you ask to understand why this issue has occurred? If you're like me, you probably want to – you add several questions and solicit answers from several different people within the organization. But whom should you ask, and what should you ask them to get to the cause?

As it stands now, it's likely staff are doing what they think is the right thing, which might mean they have not had training in what the policy says, or even even if they have, maybe they aren't aware of what it should look like in the file or the local board or other grantee has not monitored this with its service provider. Perhaps the forms in the files could be wrong, or they could have had staff turnover.

Once you've identified the cause, the solution is then fairly obvious, which, as we discussed before, feeds into what you will write as the condition. It may be multiple issues, lack of staff training, lack of monitoring, the policy may not be explicit, forms could be wrong. The fact is the cause could be any of these, all of these, or perhaps even none of these. The truth of the matter is we won't truly know unless we keep asking.

So that brings us back to the five why's technique. You may remember Carol's discussion of the first C, condition. When you're setting out to identify the cause rather than the symptom, this technique is particularly helpful. Carol already described the five why's in terms of it being a form of qualitative data analysis and also known as iterative questioning.

So, we already know that piece, but, while some of that may sound intimidating to some, it's actually fairly easy to apply. Most of us used this technique when we were little and wanted to know why things were the way they were, like the color of the sky or the reason we had to do chores.

This technique helps you move beyond symptoms of a problem by repeating the question why. Each answer forms the basis of the next question. The technique may stem from an anecdotal observation on a number of iterations usually needed to resolve the problem.

Note in the next slide, as you move from top to bottom and you can see you asking why, you move toward a more specific finding and ultimately to the cause. As we discussed, once you understand the cause, you have the actual condition, as well as the logical corrective action.

The examples in the next slide show the process of uncovering the real condition and cause for an incorrect financial report and low enrollment performance using the five why's technique. Let's look at that.

So, looking at these two examples – and this is actually taken directly from our core monitoring guide – on the left, we have our first symptom, an incorrect financial report. But why is it incorrect?

Well, upon review, we find that it has misclassified administrative costs. But why are those misclassified costs, or why are there misclassified costs? As you continue to dig, you find out that they are capturing the cost correctly in their accounting system, but, for whatever reason, they're not reporting it right.

So, why is the information not being reported correctly, particularly if it's being captured correctly? Since you were willing to ask why again, you learn that the old staff who handled the reporting retired, and the new staff didn't know how to report the cost correctly.

Now, before learning about the five why's technique, I'll admit I probably would have stopped here, and that would have been my cause. But ultimately, it wouldn't have gotten me to the corrective action that I actually wanted, because, if we asked why one more time, we see, if we think about why didn't they know, by asking why that last time and soliciting several answers, you actually discover that they actually do not have reporting procedures. And since there are no procedures, there's been no training on reporting, and there were no backup staff who knew the process after the old staff retired.

So, by asking why a number of times, you're able to get to a much better understanding in terms of what the true cause is, and ultimately that will help inform the writing up of the findings.

As you can see with the second example about low enrollment, it's the same process with the answers to each question generating its own set of why questions. Even if you're not using the word why, you're trying to understand the causes behind the problem. Five whys are the average. You may have to ask only once in some cases. In some cases, you may need to ask a longer series of questions. You know you've reached the end when the solution, more or less, begins to present itself.

So, Carol, let me ask you really quick, how do you navigate the five why's techniques during your monitoring to find the cause of an issue?

MS. PADOVAN: Well, that's a good question. When we first came up with the five why's, I remember thinking, oh, I see. So, I'm already out here monitoring these people. I'm going to now annoy them by sounding like a five-year-old and constantly ask why. But what I really actually do is I just ask questions that are designed to help me understand what is going on. So, I may not be saying the word why in my question, but I am ultimately always trying to get at the answer to the why about what happened here. Does that make sense?

MR. MCKOY: No. It makes perfect sense, and I definitely appreciate that feedback because it does – similarly, whenever we were presented with this as kind of a technique, I was the same way. I was like, well, when do I stop and why am I saying why five times?

But ultimately, it is the thought process that we're trying to get a deeper understanding. So, sometimes that may present itself with a why questing. Sometimes it may present itself through some other type of questions. But all the time, while you're asking those questions, you're trying to get that deeper understanding of what's really going on. So, no. Thank you.

So, we talked about the five why's technique. Now, let's look at some more examples of cause or different causes. A well written cause is complete once you've addressed all of the pieces of the issue. So, you aren't just resolving what you initially saw, but because you took the extra steps of asking why you saw what you saw, you are in a much better position to address the true issues so that this finding won't rise again in another report one or two years from now.

So, here are some examples of causes. Let's examine which ones are the causes and which – or the causes, rather, and which may be susceptible to one or more why questions.

So, in this first example, we see the finding is the XYZ service provider did not report performance timely. The cause indicates the local board did not ensure the grant project lead reported on progress and meeting the performance goals. But why didn't the local board ensure the project lead reported on their progress?

Considering we can almost immediately ask why to the cause indicates that we may not be at the root cause of the issue, and we run the risk of our cause, as currently written, being incomplete. The fact is, if we look at the first three examples, it's feasible to ask why to each of the causes and possibly get to a deeper understanding of the root cause of those findings, including the second cause, which indicates an unknown cause.

While it is possible that at times we may have an unknown cause, I would bet that if we spent a little more time asking why, we could get to the actual cause of why, in this example, the local board failed to monitor its subrecipient.

So, let's take a look at this fourth example for a moment. The findings indicates that the grantee is 40 percent behind its projected enrollment targets for this grant. The cause states the grantee failed to establish sub-awards with the service providers in both project sites until six months into the period of performance due to its board approval process. The grant was received in October 2018, and the board did not approve the choice of service providers until March of 2019. The lack of service providers for the grant has not allowed the grant to reach its enrollment numbers.

As you can see, finding number four is the only one that includes enough information in the cause that, if the cause is remedied, the finding will disappear, never to raise its head again, certainly not for this grant and likely not for others.

So, before – just talked a little bit about some of our common findings in terms of differentiating between common findings and those zombie findings, but let's look at some of the common causes. Here's some of the most common causes we see. Many findings of issues may not have a single cause. So, let's go over some of these.

Lack of training. Many grantees have great policies, well thought-out procedures, but for whatever reason, staff just don't know what they are. We also see in terms of causes sometimes lack of resources. Perhaps the grantee didn't budget adequately. We also see at times internal management issues. It could mean, for whatever reason, the grantee isn't minding the program or the grant as they should.

There could be an issue with leadership. No one's actually telling them to mind the grant. There are either no standards set or no consequences for not minding the grant, or leadership doesn't even realize that there's a problem. This would connect to whether or not the board is aware, as well as any additional leadership staff.

Sometimes you see capacity issues as a cause. This could be something as simple as budgeting, but it could also be that someone left and they've not been replaced. So, you're talking about staffing capacity issues, or they were understaffed in the first place. They didn't hire enough people with the right skills, or they promised things that they don't have the right field equipment, knowledge – or knowledge to do.

We – at times we see issues or causes related to the community or environment factors. There may be limited resources locally, or it could be weather related in an area where there are extreme conditions. People may not be able to do things when the weather is severe.

Speaking of community or environmental factors, I think this last year's been a perfect example, when we think about the pandemic and the possibility for those external community factors as a cause to an identified issues with the grant.

Another common cause is program design. The program might hinge on certain activities meshing, but they don't for whatever reason, such as participants. The program is designed in such a way that participants finish their classes, and then they have a work experience set up on the back end. But for some reason, this doesn't happen due to factors that weren't planned for when the program model was designed.

So, one – the last common cause that we will discuss deals with organizational operations. We may see this in organizations where our grants are small fish for them. They may not alter their operations to meet the requirements or needs of the grant. For example, a signature is needed from a local elected official or designee that – and that signature can't be had for weeks because that individual isn't available or the board has yet to meet and won't meet for months.

So, let me pause here for a moment, and let's see if we have any questions in the chat related to cause. Let's see here.

MR. GABRIEL: Antonio, there's actually a great one, I think, and it might have been one of the first questions that we all asked when the model, including cause, was first rolled out.

And the question is, "How much is it the monitor's responsibility to determine cause versus the responsibility of the organization that's being monitored?"

MR. MCKOY: That's a really great question. And, for me – and to your point, Jeff, it was one that, I'll be honest, I wrestled with some in the beginning whenever we started adopting this model or adopting this model simply because the original thought is, hey, I'm here to do a particular thing. And that's for them to figure out.

But the reality is it impacts the quality of the report I'm able to write. If I don't get to the root cause of an issue, then what happens is I'm writing a report solely based on what I saw.

And, yes. I might have thought something that was out of compliance, that was a compliance issue, but if I don't drill down to get to that root cause, the reality is I can't always necessarily be dependent on the grantee to do that for me because, ultimately, I need – my goal as an FPO is to resolve the issue, not just for the sake of resolving it out for this one report, but hopefully to put the program and the grantee in a stronger position as they move forward with their programing. And we don't want to see it reoccur.

So, it really is important for me as an FPO in my role as a monitor to really get down to the cause. Otherwise, you're really leaving that door open for that reoccurrence to potentially happen because, if it's something where – if you deal with the root cause, it's not dependent on individuals who were there during the last monitor still being there and remembering what the monitor came and saw and wanting to make sure that that box is checked, more or less. But you're really getting to – dealing with the true issue that was causing the compliance issue in the first place.

So, not sure if, Carol or Jeff, you – either one of you want to add any additional information to that or what have you, but that's kind of my thought process when we think about the role and responsibility of the monitor for identifying that cause.

MS. PADOVAN: Yes. This is Carol. Hopefully – we've got feedback that I – my mic was kind of being crackly or something. But it really kind of depends on how often you want to keep writing that finding and how many times you want to be reviewing the documentation that they send in to resolve it.

I mean, that's a blunt way of saying it, but I think it's – a lot of times it's very true. So, it might be something that – to have a conversation with the grantee at the time you're doing the monitoring is, really you guys got to get at the root of this.

But the other thing is, is that, if you're not, to some degree, looking at this, you may be missing much bigger issues that could have impacts on other parts of the grant, if you're not looking for it. So, that's my thoughts.

MR. GABRIEL: OK. I have one quick thought to add in addition to what Carol and Antonio said, which are great points. That the question actually, I'm going to tie it back to the session on collaboration and communication we did back in April.

So, the question about the responsibility of the monitor versus that of the organization, the five why techniques that both Carol and Antonio addressed, so the monitor is asking the questions, but somebody is answering them. And these aren't rhetorical questions we're asking ourselves. This should be, whether it's an actual why or whether it's a nuanced, more sophisticated version of the question that Carol talked about, it should be part of the dialog between the monitor and the entity being monitored where they get a chance to kind of figure it out together.

We as monitors or you as monitors shouldn't probably be making that kind of determination in isolation. The idea is that the five why's can be a tool that, just by kind of following the steps, you together in that conversation will be led to what the answer is. Obviously, it doesn't happen that cleanly and that easily, not in all cases at least, but I think that that conversation makes it important and makes it kind of a shared responsibility.

I wanted to – maybe we can just clean up a couple of questions real quickly that I'm seeing in the chat as we're pausing.

The question was asked earlier about the presence of One-Stop partners, and Carol had mentioned talking to your FPO, she also was able to find a TEGL that would be a good resource that would speak to it, which is TEGL 16-16. So, again, you can use that, but you can also talk to your – to the FPO assigned to your state for assistance on that.

And another question that came in was about the core monitoring guide, and I think it was specifically the new segment for dislocated worker programs.

Our crack research team has determined that that is not yet available on the website, specifically the dislocated worker – (inaudible). So, your best bet is to contact your region for access to that information.

If you're interested in accessing the core monitoring guide itself, the 2018 core monitoring guide, you can – there – the location is in the chat. Jennifer Friedman was able to add that link so you can use that, and Carol mentioned you can also search for it by just entering the TA core monitoring guide on WorkforceGPS, if you happen to be there before you get a chance to go onto our website.

So, there are a couple other questions there, Antonio, in – that seem to relate specifically to cause. One that I think is a real good one, "How does a monitor relate to a local area grant recipient that more training is needed in a certain area, like reviewing the services providers and their expenses more accurately?"

That's the kind of thing we might suggest to a state, which is one of our grantees, and then how could a state communicate that down the line in their monitoring efforts?

MR. MCKOY: For me, one of the approaches I always take whenever – particularly when we start thinking about conveying the need for either a correction or something like additional training, is it starts with, this is what I saw and this is the criteria. So, getting back to, if we're thinking about those first two Cs.

The criteria ultimately is the regulation that – which is a requirement of what's required for the grant funds in terms of oversight, in terms of management, and in terms of fiscal management and oversight, just as well as problematic.

So, for me, it's always when – well, we have to – I always try to relate it back to what's the requirement? What's the required action, and what's the required response? And then if there's a gap between what's actually being done in terms of what I saw with the condition, then we have to provide some form of training or some sort of response that's going to help bridge that gap so that we can bring the condition in terms of what's being seen into alignment with what's actually being required.

So, it's – for me, ultimately, at the end of the day, it's still about embracing or encouraging that in place of compliance, more or less, in the terms of the program design and program oversight and management. And so, it's really just having a conversation from that perspective.

And then, obviously, having – one of the things I always like to do as well, if there are available resources that could help facilitate some of that understanding and some of that training via WorkforceGPS or some of the other resources that we previously talked about when you start thinking about TEGLs and TENs, obviously, providing that information as well to help facilitate some of that.

MS. PADOVAN: Great.

MR. MCKOY: Anything else?

MS. PADOVAN: This is – oh, sorry. This is Carol. I would just add to what Antonio said. How can we do the state reviews we are – if we see this kind of thing? We can't really, unless it's written into some kind of grant agreement that we have. For example, like with dislocated worker grants or other discretionary grants, that training is going to be provided that our program is paying for to service providers. We can't mandate it; right?

But what we can say is, look. We've got this finding, and we have – getting through five why's and we determined that, in fact, nobody was trained in these wonderful policies and procedures or they were only trained once but that was two years ago or the first year it came out and there's been turnover. All that good stuff.

What we can say is that you, the local area or the subrecipient, whatever is the circumstance, need to find – need to provide us with a plan for how you're going to ensure that your service providers enter the – do what they're supposed to do, if it's entering their expenses more accurately or if it's ensuring that eligibility is documented more accurately. But you've got to come up with a plan. That's part of how you're going to resolve this.

But actually include – that plan could include training or it could include other factors – other things. But basically, at that point, it is up to them to come up with how they're going to do this.

We see findings a lot, as we mentioned, about that – we can determine that there was a lack of training. We can't mandate training of staff because there's no – I don't think there's any regulation in the Uniform Guidance or anywhere else that specifically speaks to training. But there is one that says, as a recipient and a subrecipient, you are responsible for ensuring that all the things that should happen happen. And training is certainly one of the best ways to make sure that that happens. So, I hope that helps.

MR. GABRIEL: That's great, Carol and Antonio both. And I just I just noticed that the individual who asked the question added a afterthought or a caveat, I guess, of – that, "How do you relate all that information without creating a finding?"

And what I would just want to say about that is that your question really talks about the corrective action. It doesn't really identify whether the requirement to do training or the suggestion to do training is in response to a finding or not. So, I think they're two different things. But when we get into areas of concern a little bit, I think we'll be able to speak to that part of the question as well. So, if you hang on, hopefully that'll be the case, and we'll move on to our next C in the meantime. Thanks, Antonio.

MR. MCKOY: No. Not a problem, Jeff, and thanks for touching on that because I saw that second piece as well and it was definitely something I wanted to bring up that – to stay tuned, and we'll definitely talk about maybe other options in terms of dealing with those items that are worth pointing out but aren't necessarily quite a finding.

So – but we haven't got to that piece yet. What we wanted to now really get back to our fourth C. So, now that we can identify the cause to an observed condition, how do we fix it? That's where our fourth C, corrective action, comes in. The corrective action is how we resolve findings, and if we do this effectively, finally put those zombie findings to rest.

We've discussed three of the four Cs of a finding. The fourth C, corrective action, is the one that closes the loop and, if written well, will ultimately resolve the finding and bringing the grantee back into compliance. But first, how do we define a corrective action?

According to 2 CFR 200.26, a corrective action has several characteristics. Perhaps the most obvious characteristic is that it corrects identified issues or rights whatever was wrong. Secondly, the corrective action taken by the grantee should produce improvements in the area of deficiency. Now, this next point may come as a shock, but it is possible that a grantee's action or response could show us that an identified finding is actually invalid and does not require further grantee action.

We have to remember that a monitoring events is capturing information at a particular moment in time. Due to this, our observations and judgment are impacted by the information or details available in that moment and could potentially cause you to see a particular situation or circumstance as a finding. However, at times, it is possible that new information can be made available by the grantee that would cause the invalidation or downgrade of a finding.

So, when we talk about or when we think about an effective corrective action, it should both identify any required actions needed to eliminate the cause and conditions and ensure compliance with the criteria moving forward. Take note of a couple of points in the description.

First, notice that in this description, both qualifiers have to be addressed, not one or the other. If constructing an effective corrective action is your goal, then you must consider both of these segments. The required action must both resolve or eliminate the cause and condition, as well as ensure compliance with the criteria.

Secondly, notice that the description of an effective corrective action takes into account the other three Cs of our four Cs approach to a monitoring finding. This is intentional because we should think of the corrective action as a form of resolution that allows us to eradicate that zombie finding we were introduced to when we discussed the cause.

We resolve findings, including those pesky zombie findings, by taking into account each portion of the finding when developing the corrective action. Just like the picture suggests, an effective corrective action should be the last piece of the puzzle that ties the finding together and, once completed, resolves the finding for good.

So, if we think about the corrective action as our way of resolving a finding and we know that a finding must have a condition, criteria, and cause, it would only make sense that a corrective action must consider each of these three components in order to effectively resolve the finding.

When resolving the finding, the corrective action must deal directly with each of the other three Cs. When considering the condition, the corrective action should deal directly with the visible representation or presence of noncompliance. However, as we learned, the condition alone rarely is the true issues but rather a symptom to – so, we must develop the action to not only address the symptom but also the root cause of the issue.

Perhaps the most important in this whole process is the consideration given to criteria. As we've learned, the criteria is the actual citation, law, regulation, and/or award agreement that the finding is out of compliance with. The criteria is our guide back to compliance. The corrective action must be developed in such a way that it brings the grantee back into a state of compliance with the criteria that it violated in the first place.

When considering the cause, the corrective action should deal directly with the underlying issues that are causing the visible symptoms or conditions of noncompliance. As we have discussed, the cause is not always the easiest component to identify because it does require a deeper dive into an issue that we may not be doing currently.

However, proper identification of the cause and developing your corrective action to address the cause is the only way to truly resolve a finding and prevent a reoccurring zombie finding. Do the extra work now to identify and address the cause to prevent having to deal with that same finding in the future.

If the corrective action is written effectively, it will include each of these components and will provide the necessary guidance to your grantee so they can resolve any findings with the tools of true compliance.

Now, let's look at a few of the do's and don'ts of corrective actions. When writing an effective corrective action, you do want to correct the finding, preventing its reoccurrence. You don't want to correct only the symptoms. This leaves the door open for a future reappearance of a finding you thought was resolved.

You do want to use direct language such as shall or must. You don't want to use weak language such as may or could. This suggest that your corrective action to bring the grant into compliance with the criteria is optional and not a directive.

Lastly, you do want to describe what specific information is needed to resolve the finding. You don't want to give vague guidance about what is needed to resolve the finding because you will most likely receive a response you did not intend or worse, a response that does not address the finding.

Now, I have to admit I've been guilty of each of the don'ts on this list and probably a few more when writing a corrective action, which is how I know they are not effective. Since adopting the four Cs approach and specifically this process to develop your corrective action, I've seen in my reports the usage of more direct and effective language has helped in resolving identified issues in a more direct and effective way.

Before we finish up our discussion of corrective action today, let's look at one more example of not only a corrective action but a full finding write-up, including each of our four Cs. You may have already guessed that this slide is an example of an ineffective corrective action, but why? Let's dive into it.

For this finding, we see the condition states, the SWDB's labor representatives do not meet requirements. Currently, the board has 36 slots. So, to meet the requirement, it must have eight representatives.

The criteria listed here indicates that WIOA and CFR require that a minimum of 20 percent of the board members be representatives of the workforce. The cause lets us know that the board charter, bylaws, and membership roster lists only seven workforce representatives.

Now, let's look at our corrective action. The state must add a workforce slot or reduce the total number of members. To close this finding, the state must provide the regional office a revised board roster.

So, let me pose this question. Considering what we've discussed to this point in regards to writing an effective corrective action, how do you suppose this one is less than effective?

Notice in this example, it is not apparent that the corrective action is taking each of the other three Cs into consideration. While it does appear to address the condition to some extent, it does not address the full cause of the finding. While it requires a revised board roster, it does not address the board charter and bylaws.

Additionally, while the actually may bring the grantee into compliance with the criteria for the moment, it does not ensure sustained compliance. It is possible that the grantee could do exactly what this corrective action requires and still have this finding pop up again during a future review because the corrective action does not address the board charter and bylaws portion of the cause.

Since the grantee was not required to bring their internal board policy into compliance with the WIOA requirements, it's possible for a number of different reasons, such as staff turnover, board turnover, or time since the last review, that they could fall below the required 20 percent threshold of labor representatives in the future.

Now, let's look at how we might better write this corrective action. Looking at each portion of the revised finding, let's see if we notice any differences. The revised condition states, less than 20 percent of the SWDB members are representatives of the workforce.

The criteria remains the same from our previous example, indicating the WIOA and CFR requirements for workforce representation on the board.

Our cause has been revised to now state, the SWDB charter and bylaws require only seven of the 36 members, 19.4 percent, to be representatives of the workforce.

Now, our new corrective action states, the state must provide a revised SWDB charter and bylaws that require not less than 20 percent of the members of the SWDB to be representative of the workforce. The state must also provide the regional office a revised board roster that demonstrates at least 20 percent workforce representation.

Notice in this revision of the finding, not only are we using more effective and direct language throughout the write-up of the finding, but we are also creating connections throughout each of the four Cs that allows for an effective write-up of the corrective action that threads together the other three Cs into an effective and cohesive requirement for the grantee that promotes not only resolution of this finding for the purpose of this single monitoring review but, more importantly, helps to create a culture of compliance requiring the internal policies are revised to align with the WIOA requirement.

This additional step fully addresses the cause and sets the grantee up for compliance with the requirement moving forward.

Now, Jeff, I know as we were preparing for today's session, you had something you wanted to highlight specifically in this section regarding corrective action.

MR. GABRIEL: Yeah. I did. Antonio. Thank you. The thing that I wanted to mention, I think this is a really good example that Antonio put together, both in terms of the corrective action on the bad example and the good example, because what happens is sometimes we presume what will be included.

So, in the bad example, the ineffective corrective action, we ask for a revised board roster. Well, based on what we asked for, we could get a piece of paper that says board roster at the top and a few names and there you go. And that's obviously an over-the-top example, but the point is that you want to ask for what you want, and you want to ask for all of what you want.

The expression that we use in Philadelphia sometimes is one bite at the apple, meaning try to avoid asking for something that doesn't get as specific as you know you're going to need to be able to resolve this issue because you don't want to be in a position, from a relationship standpoint, among other reasons – you don't want to be in a position where you're asking for something. You get exactly what you asked for, and then you say, well, what I really wanted was this.

So, that's all I would say here. I think this example shows I well, and it shows exactly – it's two things that need to be changed, and it describes not only what the new things are but what they need to include to resolve the issue. So, good examples here.

MR. MCKOY: Thank you for that, Jeff. And before we move into our bonus C, concern, I want to take a moment to see if we have any questions in the chat for our fourth C, corrective action. Looks like we do not.

With that being said, I'd like to turn it back over to Jeff to talk about areas of concern.

MR. GABRIEL: Okay, Antonio. Thank you. And we are short on time. So, I'll try to move quickly through this time, and everybody I work with is now laughing.

But, folks, for areas of concern, we've kind of touched on some of these themes already, kind of around the edges. But you'll see the subtitle of this section here, "The law says we have to operate programs; not that we have operate good ones." And that may or may not be a direct quote from one of my mentors at ETA many years ago, but this is what is meaningful about this.

It's not trying to convey that good programs aren't important. It's simply trying to recognize that there's a gap between what is formally required by law, what's stated in writing, and what we might wish to see from the perspective of quality or positive impact of program design.

The key words here are the first three, "The law says." So, common sense tells you that the law envisions good programs, but you can't cite common sense. You can't say, well, per common sense 2021, when you're trying to address a finding in a report. So, recognizing that that gap exists, that tension exists, how do we address that?

So, here is areas of concern defined. So, going on the other side of the coin from what Carol talked about earlier, the findings only exist if an authority has been violated, again, the statute, regulation or policy. You don't have a finding if you don't have a criteria, but that doesn't mean that there aren't issues that are worthy of attention and potentially problematic, even though they might not be – fall in an area of noncompliance. So, again, the area of concern is how we try to speak to that type of issue.

The – so, areas of concern are about effectiveness. They're about things that could result in a compliance issue, if not addressed now. They are also about negative program impact. And again, effectiveness, which I said a second ago, is – I mean, that's relative. It could be about program improvement. It could be about outright negative impact.

And – now, getting back to the question earlier, one difference with concern is that we don't look at instructive corrective action. We look at suggestions for improvement or recommendations. So, the discussion of training that was used as an example earlier, that might be a suggestion, if the issue that we're discussing is not one of outright compliance.

So, here are some examples of potential types of concerns, and I don't have a slide on bad examples but – because concerns are not as described in terms of the definition. They're much more wide open. But just a couple of examples here.

A complaint system that's either underutilized or not being utilized at all. I mean, that might mean everything is great, or it could mean that there is a lack of use of the system because there's a lack of awareness that it exists.

This, I think, is a fairly common one, that you're looking at a program maybe halfway through that program year or the life of that project, and they're at only 25 percent enrolled where their final goal is. This could be – I mean, this could be on target based on projections, or it could mean that it's – we're in danger of not meeting the goals of the project and, of course, which means underserved – an underserved number of participants and a limited benefit of the project itself.

Antonio talked about awareness of policies earlier. The training question that was asked, it speaks to that type of area too. Or there could be policies in place and people are aware of them but you don't think they're very robust.

I mean, these are all types of things that could be listed as a concern that are not compliance issues. So, I think the question to ask is, is this issue worth including in a report, even if currently it doesn't represent a compliance violation? And so, let's look at how we write that up, because that's where this is going to get – that question is going to get answered.

The condition, again, what you saw, why is what you saw occurring, and then what is the cause and then what Dallas calls their fifth C, which was consequence, what negative thing has happened or could happen? And that's really the key here. That is what answers the question, why does this matter? If it's not a compliance issue, why are we even talking about it? So, that's the question you want to answer and feel good about the answer and feel that it's compelling.

And then, finally, again, we're talking about recommended action or suggested action, not required or corrective action in trying to get attention on this. We don't require concerns to be responded to in reports, but we do suggest that it's worthwhile, and we're happy to discuss those issues with our grantees.

And I'm trying – there we go. Go to advance here. So, in a sample area, and this is a – I'm going to go back to that complaint system concept that I mentioned. Again, you have low use or no use of a complaint system, and the cause may be – you're still looking at cause here because you want to understand why the condition exists, and maybe it's just, oh, they weren't ignoring it. They just don't really know how to approach this, how to market this system, how to make people aware of it.

And from a consequence standpoint, underreported issues or unreported issues could, of course, get worse. There might be all kinds of problems. We're just not aware of them because the system isn't being utilized. So, that could be – those things could be growing and getting worse without even an awareness that they exist. So, things like refresher training, info sessions, suggestion boxes could all speak to this.

This is the last point that I want to make here is, when you're looking at these types of issues, don't assume that because something might not be a compliance finding, that it isn't worth mentioning, it isn't worth attention. You're better off just articulating the finding specifically – or excuse me – the issue specifically as you saw it, describing the why you think it's a problem for the things that matter to you, and then looking at them, looking at how that write-up looks when – or having a colleague look at it, and if it looks compelling when it's written up formally, then that's probably a good indicator that it's worth including in your report.

You don't want to chase findings. And by that, I mean you don't want to force something into making it a compliance issue when it really isn't, particularly if it's just because you think, well, they're not going to care if I don't say it's a finding. They're not going to pay attention to it. I think you'll find that if you articulate the issues specifically and accurately, that they'll care, and they will talk with you about it at the very least, and then may even take action to address it.

So, that is the wrap up. I know we are a little past time. We appreciate your sticking with us through this session. I just want to jump to the very last slide here where it's just – this is just a review of where we've been that just shows you all the sessions that we've done over the past several months. This has been much longer than that and climbing because this was originally supposed to be a live event.

But feel free to visit WorkforceGPS whenever you need to. If you want to relive the magic, go through all of these sessions again. Otherwise, you can pick and choose the pieces and parts from this that will be useful to you. You can use it for your own use, for staff training, for refreshers on guidance. There's also a lot of materials up there that you'll be able to access in your ongoing monitoring efforts in the future.

And we hope that this session has been valuable to you. We certainly hope that the whole series has been valuable to you, and we appreciate your participation and your engagement. So, with that, I'm going to hand it back to Laura to take us out.

MS. PADOVAN: Hey, just really quickly, this is Carol. I have – I kind of answered the last three questions in less than ten seconds.

"So, should we list a deadline date to have corrective action satisfied?"

Yes. You should. You can give them an extension, but at some point you need to cut it off. There is a requirement within Uniform Guidance says, prompt resolution is critical. So, you've got to set a deadline.

"Is there a link to a library of DOL reports?" No.

"Can you confirm if the 2018 core monitoring going is the latest one?" Yes. That's it.

(END)