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DEPARTMENT OF WORKFORCE SERVICES
ISSUANCE PY 14-09

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April 27, 2015

TO: Local Workforce Investment Areas/Service Providers

SUBJECT: PY 2013 Data Element Validation Issues and Results

1. **Purpose:** To notify Local Workforce Investment Areas (LWIAs) of PY 2013 data element validation (DEV) results, homeless definition, gap in service and scheduled services.
2. **Background:** In 2001 the President announced a Management Agenda to improve the management and performance of the Federal Government. One of the five government-wide goals, budget and performance integration, emphasizes the importance of complete information for program monitoring and improving program results. A performance audit conducted by the Department's Office of Inspector General found that the accuracy of state-reported performance outcomes cannot be assured due to insufficient local, state, and federal oversight. To address these concerns, and to ensure the accuracy of data collected and reported on the workforce investment system, the Employment and Training Administration expanded efforts to conduct data validation. *[TEN 14-02, May 28, 2003]*

Data validation advisories issued by the Department of Labor (DOL) include the following: TEN 14-02, May 28, 2003; TEGL 3-03, August 20, 2003; TEGL 3-03, Change 1, August 20, 2004; TEGL 3-03, Change 2, October 20, 2004; TEGL 3-03, Change 3, July 15, 2005; TEN 9-06, August 15, 2006; TEN 19-07, December 11, 2007; TEGL 27-10, Change 1, July 25, 2011; TEGL 28-11, May 9, 2012; TEN 4-13, August 28, 2013; TEGL 6-14, September 10, 2014.

WIA data element validation and report validation were initiated by DOL in August 2003. Report validation checks the accuracy of the state MIS calculations of the performance measures against the calculations contained in the Enterprise Data Reporting and Validation System (E-DRVS). Data element validation involves yearly on-site reviews of a sample of participant records against source documentation to ensure the accuracy of WIA performance reporting. The sample of files is selected by DOL software from the Workforce Investment Act Standardized Record Data Report (WIASRD) submitted by the state for its WIA Annual Report. Worksheets printed from the software contain data elements to be validated on a "pass" or "fail" basis. Data elements are selected for validation based on three factors.

Feasibility – The Employment and Training Administration (ETA) validates data elements only when it is practical and efficient to locate and examine supporting evidence within the state records. Therefore, such items as race, ethnicity, and gender will not be validated because these data elements are self-reported by participants, and it is not efficient to locate the participant to document these characteristics. It is also not practical to validate for data entry errors.

Risk – The process for validating data elements is based partly on the likelihood that the data element may be inaccurate. Data elements involving human judgment are more prone to error than data elements that do not involve human judgment. For example, determination of employment based on supplemental sources is more likely to be in error than determination of employment from wage records.

Importance – Data elements are selected for validation based primarily on their importance to the integrity of the Annual Report. The software automatically selects samples from the records for each program group: Adults, Dislocated Workers, National Emergency Grant (NEG), Older Youth and Younger Youth and displays the sampled data on individual validation worksheets. Records are oversampled if they are important for the calculation of performance measures and if they have a higher risk of error. The data validation software provides DOL with an estimate of the error rates for the data that states report.

Complete, accurate and adequate documentation is required by the DOL and the state.

- Documentation backs up LWIA data submitted to DOL through the WIASRD, and supports performance measures reported in both the WIA Annual Report and Quarterly Report.
- During data element validation, documentation errors have been discovered that resulted in inaccurate WIASRD reporting, and altered performance measure outcomes both positive and negative.
- WIASRD and Annual Report information reviewed by congress and stakeholders is considered when making important decisions.
- Improper documentation may result in monitor findings by DOL, Department of Workforce Services (DWS) and local LWIA monitors.

To evaluate the accuracy of these elements, the software calculates two error rates for each data element selected for validation: an “overall error rate” and a “reported error rate.” The “overall error rate” equals the number of records in error divided by the total number of records sampled for that funding stream, weighted to account for the oversampling and undersampling of particular types of records. Because certain data elements may not be present in every sampled record, the software also calculates a “reported error rate.” Only those records for which the particular data element was validated are included in the denominator. The reported error rate equals the number of records in error divided by the total number of records for which the particular data elements were validated weighted to account for the oversampling and undersampling of particular records.

DOL requires a 5% provisional threshold accuracy standard for each data element for both the “reported error rate” and the “overall error rate”.

3. **General Information**: The Department of Workforce Services began the PY 2013 DEV statewide review September 2014 and completed during December 2014. Software provided by DOL to enter and track data element validation results is capable of reporting only statewide results. Attached to this issuance are “WIA Summary/Analytical Reports” reflecting the number and the percent of errors for each data element. A separate report is provided for each funding stream: Adult, Dislocated Worker, NEG, Older Youth and Younger Youth. Whether electronic or paper, the purpose of source documentation is to have an auditable trail that documents eligibility, services delivered, and outcomes received.

TWO TYPES OF VALIDATION RULES

- **Match**
Data on the worksheet and data on the source documentation must exactly *match*. Example: if the participant’s date of birth on the worksheet is February 2, 1976, then the source documentation, such as a birth certificate, must be February 2, 1976.
- **Support**
Data on the worksheet must be *supported* by the data on the source documentation. To support the data on the worksheet, the source documentation must provide evidence that the data on the worksheet is correct. This instruction is used when information must be interpreted or processed before it can be used to assess the accuracy of the data on participant records. Example: source documentation is used to support youth who need additional assistance because case managers must interpret policy and determine if the documentation supports that policy.

FOUR TYPES OF SOURCE DOCUMENTATION

- **Cross-Match**
A cross-match requires a printout from a non-WIA database. Example: “Other Public Assistance Recipient” may be documented by cross-match. Participation is determined by a printout from the public assistance agency database with dates of participation and services rendered.
- **State Management Information System (MIS)**
State MIS refers to specific, detailed information that is stored in the state information system that supports an element. An indicator, such as a checkmark on a computer screen alone is not acceptable source documentation. For example, state MIS is acceptable source documentation for “date of first training service.” To

be an acceptable source to validate the element, the state MIS must have detailed information about the type of training and the organization that provided the training in addition to the date of first training. This detailed information makes valid source documentation and makes it unnecessary for such states to validate this data element in local offices.

- Self-Attestation
Self-attestation occurs when a participant states his or her status for a particular data element, such as “pregnant or parenting youth”. The key elements for self-attestation are: (a) the participant identifying his or her status, and (b) signing and dating a form attesting to this self-identification.
- Case Notes
Case notes refers to either paper or online statements by the case manager that identify a participant’s status for a specific data element, the date on which the information was obtained, and the case manager who obtained the information. Detailed case notes are an invaluable tool to collect pertinent information that describes what has transpired throughout the participant’s involvement with the WIA program. Case notes must state more than “he was in school”, “he was employed” or, “he was homeless”. The notes must fully describe the element that is validated.

PY 2013 DATA ELEMENT VALIDATION ISSUES

Many of the issues found during the review do not appear to be a lack of understanding of the guidelines. Some were input or typing errors and general carelessness. Issues found during the review were identical issues as 2012 and previous years, therefore, will not be listed below. Please use the link below to review PY 2012 issues with staff. All issues found during the PY 2013 review at WIA offices were discussed with staff during and at the conclusion of the review. Additionally, all LWIAs received an email containing a description of each issue. Issues found during the MIS review at the state office were also emailed to each LWIA. Link to review PY 2012 issues with staff:

<http://dws.arkansas.gov/AWIB/pdfs/issuances/py14/DWS%20Issuance,%20PY%2014-02,%20PY%202012%20Data%20Element%20Validation%20Issues%20and%20Results.pdf>

ELEMENTS VALIDATED AT STATE OFFICE USING MIS

It is not necessary for local area staff to place documentation in the participant folder for data validation purposes for E-DRVS and WIASRD elements listed below. These elements will be validated by state staff using AJL, and are not included on the DEV checklist [*Issuance 13-04, Change 1*].

E-DRVS Field #/WIASRD

#52/900	Date of program participation
#53/901	Date of program exit
#56/907	Date of first youth service

- #86/1020 Date of first staff-assisted core service
- #93/1200 Date of first intensive service
- #96/1208 Date entered training
- #97/1209 Type of training service
- #100/1212 Date completed or withdrew from training
- #115/1301 Received educational achievement services
- #117/1303 Received summer employment opportunities
- #119/1305 Received leadership development opportunities
- #123/1309 Received follow-up services
- #129/1500 Employed 1st quarter after exit quarter (except supplemental)
- #130/1501 Type of employment match 1st quarter after exit quarter (except supplemental)
- #134/1507 Employed 2nd quarter after exit quarter (except supplemental)
- #135/1508 Type of employment match 2nd quarter after exit quarter (except supplemental)
- #136/1509 Employed 3rd quarter after exit quarter (except supplemental)
- #137/1510 Type of employment match 3rd quarter after exit quarter (except supplemental)
- #147/1603 Wages 1st quarter after exit quarter
- #148/1604 Wages 2nd quarter after exit quarter
- #149/1605 Wages 3rd quarter after exit quarter

Documentation for supplemental wages (E-DRVS Field #/WIASRD #: 129/1500, 130/1501, 134/1507, 135/1508, 136/1509, 137/1510) is required to be in the participant folder and will be validated at the LWIA office. Supplemental wages are included on the DEV checklist. Source documents must clearly specify employment during the applicable exit quarter. When entering supplemental wage information in AJL, select the appropriate “source of supplemental data” but do not select “record sharing/matching”. This option is for wage bank records. Options for supplemental wages include case management, follow-up services, surveys of participants, and verification with the employer.

Data elements relating to services include E-DRVS Field #/WIASRD #: 56/907, 86/1020, 93/1200, 96/1208, 97/1209, 100/1212, 115/1301, 117/1303, 119/1305, 123/1309. Required fields on the Service and Training Plan (S&T) service screens include service type, O*Net and CIP (when applicable), status, provider name, provider address, provider phone number, estimated start and end date, and actual start and end date. When there is an employer, then enter the employer information and not the local area information, e.g., for Work Experience enter the employer information. *[DWS Issuance PY 05-16, June 2, 2006]*

EXIT FORM E-DRVS Field #/WIASRD #

An exit form may be considered the same as case notes for the elements listed below. Adequate information such as what would be in a case note must be included on the form.

- #53/901 Date of exit
- #81/971 Other reasons for exit
- #152/1701 School status at exit
- #153/1702 Youth placement information
- #129/1500 Employed 1st quarter after exit quarter (supplemental wages)
- #130/1501 Type of employment match 1st quarter after exit quarter (supplemental wages)
- #134/1507 Employed 2nd quarter after exit quarter (supplemental wages)
- #135/1508 Type of employment match 2nd quarter after exit quarter (supplemental wages)
- #136/1509 Employed 3rd quarter after exit quarter (supplemental wages)
- #137/1510 Type of employment match 3rd quarter after exit quarter (supplemental wages)

Frequent issues statewide during the PY 2013 DEV were improper exit and holding records open. The following information consisting of DOL monitoring findings, excerpts from TEGL 17-05 and Issuance PY 08-05, and data element validation issues were discussed at the March 2015 Case Manager Training in Little Rock. Additional information on holding records open is available in a presentation delivered during the March 2013 Managers' Meeting held at the Peabody Hotel in Little Rock. Contact the Technical Assistance Unit if you cannot find a copy.

June 2008 / DOL State Monitoring / Finding From LWIA Files

Failure to Implement DOL's Exit Policy in Accordance With Federal Guidelines

Reviewers found consistent and ample evidence across the samples spanning the two most recent validation cycles that the exit policy delineated in TEGL 17-05 was not properly implemented. Instead of the date of exit reflecting the last date of service, reviewers found many instances in which the exit date was incorrectly recorded as the date of graduation or the date of receipt of a diploma or certificate.

Required Action. The state should immediately develop and disseminate written policy guidance clarifying the definition of date of exit consistent with TEGL 17-05 on a statewide basis and with subsequent follow up to ensure clarity of understanding and proper implementation.

State response. WIA Exit Policy, Issuance PY 08-05, dated August 22, 2008.

March 2013 / DOL LWIA Monitoring Finding

Improper Exit & Holding Records Open

Participants are not exited according to TEGL 17-05. Instead of exiting after 90 days of no service, participants remain enrolled in a service without receiving a service, artificially delaying their exit.

Required Action. The grantee must exit participants after 90 days with no service. The LWIA must develop and implement a policy that is consistent with TEGl 17-05. Additionally, the LWIA must immediately exit participants who have not received any WIA-funded or partner services within the last 90 days.

July 2014 / DOL LWIA Monitoring Finding

Improper Exit & Holding Records Open

The LWIA does not have an exit policy and participants are not exited according to TEGl 17-05. Instead of exiting after 90 days with no service participants remain enrolled in various activities and are not receiving a service which prohibits them from exiting the program until the case manager determines they should be exited. The date of exit for 7 of 18 participants indicated participants remained in the program beyond their last date of service.

Required Action. The LWIA must develop an exit policy and conduct a review of all active participant files and immediately exit any participant who has not received a WIA funded or partner service within the last 90 days.

DOL TEGl 17-05 / February 7, 2006 / Regarding Exits

The term program exit means a participant has not received a service funded by the program or funded by a partner program for 90 consecutive calendar days, and is not scheduled for future services. The exit date is the last date of service.

Examples of activities that do not extend the period of participation or delay program exit include:

- Determination of eligibility to participate in the program.
- Case management services and any other required administrative case load management activities that involve regular contact with the participant or employer to obtain information regarding the participant's employment status, educational progress, or need for additional services, receipt of UI payments, TANF payments, SNAP, or subsidized childcare.

These are important activities that local staff perform, but do not impact the exit date.

DWS Issuance PY 08-05 / August 22, 2008 / Regarding Exits

- It is not allowable to hold open any service, including Occupational Skills Training, Case Management or any type of counseling service if the only interaction regarding the client is general contact by phone or in person.
- It is not allowable to hold open any service because you cannot locate a client. If you cannot locate the client, then the last service end date must be entered into AJL. This date must not be the date your attempts to contact the client ended, but rather the date the final service was actually provided.

- In the two situations above, if a service is not provided, then an end date must be entered in AJL that represents the date the service ceased to be provided.

A service is held open if the end date is not entered soon after the service ended. Furthermore, it should not be the usual practice to wait to enter end dates much more than a few days after the service ended. An end date must be entered before 90 days has passed from the date the service actually stopped. "Specifically, as soon as possible, after participant information is available it should be entered into AJL." [DWS Issuance PY 05-16, June 2, 2006] A date of participation and exit should always correlate to a date of service. Whether it is the service begin date at the beginning of participation or the service end date when participation ends. If training has ended and all that remains open is Case Management, then Case Management must end on the same date training ended. There is then 90 days prior to the time exit occurs. DOL requires that Case Management not hold a record open. NOTE: If the record does not exit due to partner services, then date of exit will not correlate to the end date of WIA service(s).

To meet DOL's exit requirements [TEGL 17-05] AJL is programmed to automatically exit the participant record if Case Management is the only service open at the end of the 90 day period. This will not happen with other services; however, services such as individual service strategy, objective assessment and individual employment plan are not services that should keep a participant record open. In the paragraph above training is the final service, therefore, these services must also end the same date training ended.

The edit date at the bottom of the service screen is an indication of when the service end date was entered. Usually the last entry on a service screen is the end date which is recorded by the edit date. There is the possibility that the last entry may be for purposes other than entering the end date such as correcting information. Most of the time case notes will help confirm the service end date. An end date and an edit date may have a wide range when a service such as leadership is open in anticipation of the next workshop. It may be days or weeks from the previous workshop when it is decided that another workshop will not be provided. For example, a workshop was provided January 1st and the next workshop is scheduled during the next quarter on April 15th. The youth did not attend the workshop on the 15th so on the 16th it is decided to end the service (end date January 1st). This will create more than a 90 day range between January 1st and the edit date of April 16th making it appear the service was inappropriately held open.

Data Element Validation Issues

Homeless

An individual who is "couch surfing" (sleeping at night in the homes of various individuals) is considered homeless due to not having a fixed, regular, adequate, night time residence. An individual is not considered homeless if they are paying rent. Homeless does not include an individual who does not want to be at their home. Each case must be reviewed individually. [WIASRD #700]

Examples of Improper Exits and Holding Records Open

Information and examples described below are a compilation of data element validation issues identified from participant records in AJL. It is intended that these examples assist in training staff on proper record maintenance especially regarding exit and holding records open.

#1. Services held open past final service

Training ended in May and was the final service, but Case Management, Individual Service Strategy (ISS) and Assessment were held open over six months beyond the end of training. These services cannot hold a record open and should have been closed when training ended.

#2. Service not provided

General Intensive Services remained open until 12/14/12 although it was difficult to determine from case notes if a General Intensive Service was provided. Case notes must contain information relating to services listed on the S&T. If General Intensive Services were not provided, then it should not have been entered on the S&T. In certain situations depending on the client's responsiveness, "failed to report" should be selected as the service status, or the service should be deleted from the S&T if not provided.

#3. Services held open into next quarter

The final service provided, Job Search Assistance, ended 12/3/12. Case Management and Individual Employment Plan (IEP) should have ended the same date as Job Search, but they were held open and ended over 90 days later during the next quarter. Case Management and IEP cannot keep a record open.

The quarters after exit were affected by the end dates of Case Management and IEP. Services should have ended and exit occur December 2012 correctly resulting in the first calendar quarter of 2013 as the first quarter after the exit quarter. Instead, by incorrectly ending Case Management and IEP in late March 2013 the first quarter after the exit quarter became the second calendar quarter of 2013. Correct after exit quarters are important due to the quarter related collection and reporting of wage, credential and placement data. This also affected the date the Job Service record exited.

#4. WIA services remain open / Job Service keeps WIA open

WIA services remained open beyond 90 days. They should have been closed so exit could occur on the 90th day. However, the participant received a service from Job Service after the 90 day period which then kept the WIA record open longer. If WIA services had been closed, then a new Job Service enrollment would have been created which would not have affected the WIA exit.

#5. WIA service ended after 90 days / Job Service keeps WIA open

The end date for training, 12/15/2011, was not entered on a timely basis. It was entered on 6/18/12 which is six months after the training actually ended. This caused the record to be

held open for six months. As a result of holding the record open beyond 90 days, the client received services from Job Service which then kept the record open beyond the expected WIA exit date of December 2011.

Examples of Counseling Case Notes

Below are two examples of case notes that describe counseling provided to the participant. Coupled with an open counseling service on the S&T, the record appropriately remained open.

- 1) Case manager contacted the client on 3-1-2013 and since she is still waiting to take her licensing test, case manager counseled client on the purpose and goal of a resume. Case manager provided sample resumes and discussed preparing a new resume, knowing what to add and what to leave off. Discussed common mistakes made on the resume and how to avoid them. Client will inform case manager when she has tested and obtained employment.
- 2) Case manager contacted client and client informed case manager that she has been preparing for the fall semester. Case manager counseled and guided client on good study habits. These study habits include getting plenty of rest, preparing yourself for test days, have a special place to study, reviewing your notes, and if there is a problem then communicate with your instructor.

Gap in Service [TEGL 17-05]

Gaps in service are the pause button. An exit will be delayed if there is a scheduled break in service due to certain conditions. The condition must exist for at least more than 90 days. If there was no service the participant would exit, but pushing the pause button allows the record to stay open. When a gap is opened for a service that is “in progress” you are saying that the client cannot continue to participate for more than 90 days. A gap in service initiated in AJL provides an audit trail for the break in service.

Participants should not be considered for exit if there is a gap in service of greater than 90 days for one of the following reasons:

- A delay before the beginning of training. For example, the participant has taken a class and will be taking another class but it does not begin for four months. They want to complete so they can get the certificate so a gap may be initiated. They intend to continue.
- Health or medical condition of a participant or family member. A gap in service may be considered if the participant becomes ill or is required to take care of a family member who is ill. They intend to continue.

- A temporary move from the area that prevents participation. This includes National Guard or other related military service such as Army reserves. It does not include joining the military because that would not likely be a temporary move. They intend to return and continue.

Gaps in service must be for greater than 90 calendar days from the last date of service. Case notes must record the last date of service. A consecutive gap of 90 days may be initiated to resolve the issue that prevents the participant from completing program services that lead to employment. If a gap in service is initiated for 180 days, and later there has been another delay and a gap in service is warranted then initiate another consecutive gap in service for up to 180 days.

Gaps in service must be documented in case notes and are subject to monitoring. The reason a gap was chosen must be clearly understood including the participant's intent to complete program services. This is an option for situations when the participant should not be exited because they fall in one of the above categories.

It is best to use the status of "scheduled" service if the start date of the service is known. For example, if the participant will begin a class on a known date then "schedule" the service on the S&T rather than creating a gap in service. End the "in progress" training service then open another training service with the status of "scheduled". Use a gap in service when it is not known when the participant will resume services. If a medical condition exists, it may not be known when the participant will be able to resume services. In this situation a gap in service would be best.

A gap in service is not when a case manager loses track of a participant, they don't show up, don't know what happened to them or can't get in touch with them. Gaps in service are typically arranged beforehand. For example, a participant may need to take care of an ailing parent, or they would like to take the next class but it is not offered for a few months. A gap is not to be used while the person is looking for a job.

How to Create a Gap in AJL

- When initiating a gap in AJL, do not enter an end date for the "in progress" service(s).
- The gap begin date must be prior to the estimated end date of the "in progress" service(s) and extend longer than 90 days.
- After the gap is created, DO NOT change anything on the S&T. If services are modified, the gap will close.
- When it is time to end the gap, enter the gap end date on the gap screen and resume services. Estimated end dates on all "in progress" service(s) must be in the future.

Scheduled Services

A service that is anticipated to begin in the future may also be “scheduled” by selecting the status of “scheduled” in the S&T. A scheduled service may be a service that begins after initial enrollment into the program, or a service that begins during participation. A scheduled service will keep a record from exiting. The estimated end date for the scheduled service must be in the future or the client will exit. It is not intended that a scheduled service be for an unreasonable period of time. To provide an audit trail, scheduled services must be documented in case notes. If the participant does not return, use case notes to record the reason.

4. **Action Required:** Please use this information for staff training
5. **Inquiries:** Contact the WIA Technical Assistance Unit
6. **Attachments:** WIA Summary/Analytical Reports
7. **Expiration Date:** Continuing

WIA Summary / Analytical Report - Adults

Report Validated	PY 2013
Number of Records Sampled	238
Number of Records Validated	238
Wrong SSNs	0
Invalid Records	0
Missing Records	0
Unable to Locate Records	0

Data Element	Element #	# Records with Element Present	Number of Errors	Overall Error Rate %	Reported Error Rate %
Date of Birth	200	238	0	0	0
Eligible Veteran Status	301	4	0	0	0
Employment Status at Participation	400	96	11	4.5	11.9
School Status at Participation	411	238	0	0	0
Other Public Assistance Recipient	602	154	0	0	0
Homeless Individual and/or runaway youth	700	3	0	0	0
Offender	701	10	0	0	0
Low Income	702	209	2	0.9	1
Date of Program Participation	900	238	2	0.9	0.9
Date of Exit	901	238	17	7.6	7.6
Other Reasons for Exit	971	5	0	0	0
Date of First Staff-Assisted CORE Service	1020	233	0	0	0
Date of First Intensive Service	1200	238	0	0	0
Date Entered Training #1	1208	227	0	0	0
Type of Training Service #1	1209	227	0	0	0
Date Completed, Withdrew from, Training #1	1212	227	0	0	0
Employed in 1st Quarter After Exit Quarter	1500	216	0	0	0
Type Employment Match 1st Qtr After Exit Qtr	1501	216	0	0	0
Employed in 2nd Quarter After Exit Quarter	1507	219	0	0	0
Type Employment Match 2nd Qtr After Exit Qtr	1508	219	0	0	0
Employed in 3rd Quarter After Exit Quarter	1509	219	0	0	0
Type Employment Match 3rd Qtr After Exit Qtr	1510	219	0	0	0
Wages 3rd Quarter Prior to Participation Qtr	1600	159	0	0	0
Wages 2nd Quarter Prior to Participation Qtr	1601	146	0	0	0
Wages 1st Quarter After Exit Quarter	1603	200	4	1.6	2.1
Wages 2nd Quarter After Exit Quarter	1604	209	2	0.8	1
Wages 3rd Quarter After Exit Quarter	1605	209	2	0.8	1
Type of Recognized Credential	1700	201	0	0	0

WIA Summary / Analytical Report - Dislocated Workers

Report Validated	PY 2013
Number of Records Sampled	144
Number of Records Validated	144
Wrong SSNs	0
Invalid Records	0
Missing Records	0
Unable to Locate Records	0

Data Element	Element #	# Records with Element Present	Number of Errors	Overall Error Rate %	Reported Error Rate %
Date of Birth	200	144	0	0	0
Eligible Veteran Status	301	10	0	0	0
Employment Status at Participation	400	5	1	0.7	23.1
School Status at Participation	411	144	0	0	0
Other Public Assistance Recipient	602	26	1	0.9	5.1
Displaced Homemaker	705	1	0	0	0
Date of Actual Qualifying Dislocation	706	144	2	1.9	1.9
Date of Program Participation	900	144	0	0	0
Date of Exit	901	144	3	2.2	2.2
Other Reasons for Exit	971	4	0	0	0
Date of First Staff-Assisted CORE Service	1020	143	0	0	0
Date of First Intensive Service	1200	144	0	0	0
Date Entered Training #1	1208	133	0	0	0
Type of Training Service #1	1209	133	0	0	0
Date Completed, or Withdrew from, Training #1	1212	133	0	0	0
Employed in 1st Quarter After Exit Quarter	1500	137	0	0	0
Type Employment Match 1st Qtr After Exit Qtr	1501	137	0	0	0
Employed in 2nd Quarter After Exit Quarter	1507	140	0	0	0
Type Employment Match 2nd Qtr After Exit Qtr	1508	140	0	0	0
Employed in 3rd Quarter After Exit Quarter	1509	139	0	0	0
Type Employment Match 3rd Qtr After Exit Qtr	1510	139	0	0	0
Wages 3rd Quarter Prior to Participation Qtr	1600	85	0	0	0
Wages 2nd Quarter Prior to Participation Qtr	1601	70	0	0	0
Wages 1st Quarter After Exit Quarter	1603	124	2	1.4	1.6
Wages 2nd Quarter After Exit Quarter	1604	127	2	1.4	1.6
Wages 3rd Quarter After Exit Quarter	1605	128	3	2	2.3
Type of Recognized Credential	1700	105	0	0	0

WIA Summary / Analytical Report - NEG

Report Validated	PY 2013
Number of Records Sampled	70
Number of Records Validated	70
Wrong SSNs	0
Invalid Records	0
Missing Records	0
Unable to Locate Records	0

Data Element	Element #	# Records with Element Present	Number of Errors	Overall Error Rate %	Reported Error Rate %
Eligible Veteran Status	301	9	1	1.3	12.8
Employment Status at Participation	400	1	0	0	0
School Status at Participation	411	70	0	0	0
Displaced Homemaker	705	0	0	0	0
Date of Actual Qualifying Dislocation	706	70	2	3	3
Date of Program Participation	900	70	0	0	0
Date of Exit	901	70	1	1.1	1.1
NEG Project ID	923	70	0	0	0
Second NEG Project ID	924	2	0	0	0
Other Reasons for Exit	971	0	0	0	0
Date of First Staff-Assisted CORE Service	1020	36	0	0	0
Date of First Intensive Service	1200	70	0	0	0
Date Entered Training #1	1208	1	0	0	0
Type of Training Service #1	1209	1	0	0	0
Date Completed, or Withdrew from, Training #1	1212	1	0	0	0
Employed in 1st Quarter After Exit Quarter	1500	51	0	0	0
Type Employment Match 1st Qtr After Exit Qtr	1501	51	0	0	0
Employed in 2nd Quarter After Exit Quarter	1507	53	0	0	0
Type Employment Match 2nd Qtr After Exit Qtr	1508	53	0	0	0
Employed in 3rd Quarter After Exit Quarter	1509	54	0	0	0
Type Employment Match 3rd Qtr After Exit Qtr	1510	54	0	0	0
Wages 3rd Qtr Prior to Participation Quarter	1600	43	0	0	0
Wages 2nd Quarter Prior to Participation Qtr	1601	33	0	0	0
Wages 1st Quarter After Exit Quarter	1603	49	1	1.1	1.8
Wages 2nd Quarter After Exit Quarter	1604	50	3	3.8	6.1
Wages 3rd Quarter After Exit Quarter	1605	52	2	2.5	3.6

WIA Summary / Analytical Report - Older Youth

Report Validated	PY 2013
Number of Records Sampled	92
Number of Records Validated	92
Wrong SSNs	0
Invalid Records	0
Missing Records	0
Unable to Locate Records	0

Data Element	Element #	# Records with Element Present	Number of Errors	Overall Error Rate %	Reported Error Rate %
Date of Birth	200	92	1	0.8	0.8
Eligible Veteran Status	301	0	0	0	0
Employment Status at Participation	400	20	1	1.1	5
School Status at Participation	411	92	0	0	0
Temporary Assistance to Needy Families (TANF)	600	10	1	1.3	13.1
Other Public Assistance Recipient	602	53	0	0	0
Homeless Individual and/or runaway youth	700	1	0	0	0
Offender	701	6	0	0	0
Low Income	702	91	0	0	0
Pregnant or Parenting youth	800	40	0	0	0
Youth Who Needs Additional Assistance	801	63	1	1.6	2.3
Basic literacy skills deficiency	802	54	0	0	0
Date of Exit	901	92	6	5.9	5.9
Date of First WIA Youth Service	907	92	0	0	0
Other Reasons for Exit	971	3	2	3	71
Enrolled in Education	1300	64	0	0	0
Most Recent Date Received Educational Achieve	1301	30	1	0.7	2.5
Most Recent Date Received Summer Empl	1303	22	0	0	0
Most Recent Date Rec Leadership Development	1305	22	0	0	0
Most Recent Date Received Follow-up Services	1309	21	12	11.5	53
Employed in 1st Quarter After Exit Quarter	1500	75	0	0	0
Type Employment Match 1st Quarter After Exit Qtr	1501	75	0	0	0
Employed in 3rd Quarter After Exit Quarter	1509	70	0	0	0
Type Employment Match 3rd Qtr After Exit Qtr	1510	70	0	0	0
Wages 3rd Quarter Prior to Participation Quarter	1600	35	0	0	0
Wages 2nd Quarter Prior to Participation Quarter	1601	43	0	0	0
Wages 1st Quarter After Exit Quarter	1603	69	4	4.5	6.3
Wages 2nd Quarter After Exit Quarter	1604	66	4	4.5	6.5
Wages 3rd Quarter After Exit Quarter	1605	65	3	2.7	3.9

Data Element	Element	# Records with	Number	Overall	Reported
Older Youth	#	Element	of	Error	Error
Page 2		Present	Errors	Rate %	Rate %
Type of Recognized Credential	1700	48	0	0	0
School Status at Exit	1701	92	6	7.3	7.3
Youth Placement Information	1702	18	3	2.5	12.2
Youth Retention Information	1703	16	0	0	0
Attained Degree or Certificate	1704	47	1	0.7	1.5
Date Attained Degree or Certificate or Credential	1705	47	2	1.4	3
Category of Assessment	1801	45	0	0	0
Type of Assessment Test	1802	45	0	0	0
Functional Area	1803	45	0	0	0
Date Administered Pre-Test	1804	45	2	1.6	4.1
Pre-Test Score	1805	45	2	2.3	6
Educational Functioning Level	1806	45	1	0.9	2.4
Date Administered Post-Test (Year #1)	1807	30	1	0.7	3
Post-Test Score (Year #1)	1808	30	1	0.7	3
Educational Functioning Level (Year #1)	1809	30	0	0	0
Date Administered Post-Test (Year #2)	1810	0	0	0	0
Post-Test Score (Year #2)	1811	0	0	0	0
Educational Functioning Level (Year #2)	1812	0	0	0	0
Date Administered Post-Test (Year #3)	1813	0	0	0	0
Post-Test Score (Year #3)	1814	0	0	0	0
Educational Functioning Level (Year #3)	1815	0	0	0	0
Type of Assessment Test	1816	32	0	0	0
Functional Area	1817	32	0	0	0
Date Administered Pre-Test	1818	32	2	1.6	6.2
Pre-Test Score	1819	32	0	0	0
Educational Functioning Level	1820	32	0	0	0
Date Administered Post-Test (Year #1)	1821	16	0	0	0
Post-Test Score (Year #1)	1822	16	1	0.7	5.9
Educational Functioning Level (Year #1)	1823	16	0	0	0
Date Administered Post-Test (Year #2)	1824	2	1	0.8	50.7
Post-Test Score (Year #2)	1825	2	0	0	0
Educational Functioning Level (Year #2)	1826	2	0	0	0
Date Administered Post-Test (Year #3)	1827	0	0	0	0
Post-Test Score (Year #3)	1828	0	0	0	0
Educational Functioning Level (Year #3)	1829	0	0	0	0
Type of Assessment Test	1830	2	0	0	0
Functional Area	1831	2	0	0	0
Date Administered Pre-Test	1832	2	0	0	0

Data Element	Element #	# Records with Element Present	Number of Errors	Overall Error Rate %	Reported Error Rate %
Older Youth					
Page 3					
Pre-Test Score	1833	2	0	0	0
Educational Functioning Level	1834	2	0	0	0
Date Administered Post-Test (Year #1)	1835	0	0	0	0
Post-Test Score (Year #1)	1836	0	0	0	0
Educational Functioning Level (Year #1)	1837	0	0	0	0
Date Administered Post-Test (Year #2)	1838	0	0	0	0
Post-Test Score (Year #2)	1839	0	0	0	0
Educational Functioning Level (Year #2)	1840	0	0	0	0
Date Administered Post-Test (Year #3)	1841	0	0	0	0
Post-Test Score (Year #3)	1842	0	0	0	0
Educational Functioning Level (Year #3)	1843	0	0	0	0

WIA Summary / Analytical Report - Younger Youth

Report Validated	PY 2013
Number of Records Sampled	227
Number of Records Validated	227
Wrong SSNs	0
Invalid Records	0
Missing Records	0
Unable to Locate Records	0

Data Element	Element #	# Records with Element Present	Number of Errors	Overall Error Rate %	Reported Error Rate %
Date of Birth	200	227	0	0	0
Employment Status at Participation	400	19	1	0.2	2.5
School Status at Participation	411	227	0	0	0
Temporary Assistance to Needy Families (TANF)	600	4	1	0.4	24
Other Public Assistance Recipient	602	156	0	0	0
Homeless Individual and/or runaway youth	700	0	0	0	0
Offender	701	1	0	0	0
Low Income	702	222	0	0	0
Pregnant or Parenting youth	800	8	0	0	0
Youth Who Needs Additional Assistance	801	146	1	0.5	0.7
Basic literacy skills deficiency	802	165	0	0	0
Foster Care Youth	803	4	1	0.2	14.4
Date of Exit	901	227	3	1.3	1.3
Date of First WIA Youth Service	907	227	0	0	0
Other Reasons for Exit	971	7	1	0.4	15.1
Enrolled in Education	1300	214	0	0	0
Most Recent Date Received Educational Achieve	1301	140	0	0	0
Most Recent Date Received Summer Empl	1303	164	1	0.2	0.3
Most Recent Date Received Leadership	1305	93	2	0.4	1
Most Recent Date Received Follow-up Services	1309	99	73	28.6	71.7
Employed in 1st Quarter After Exit Quarter	1500	131	0	0	0
Type of Employment Match 1st Qtr After Exit Qtr	1501	131	0	0	0
Employed in 3rd Quarter After Exit Quarter	1509	156	0	0	0
Type of Employment Match 3rd Qtr After Exit Qtr	1510	156	0	0	0
Wages 1st Quarter After Exit Quarter	1603	125	7	2.1	4.4
Wages 3rd Quarter After Exit Quarter	1605	149	8	2.8	4.8
School Status at Exit	1701	213	19	8.4	9

Data Element	Element	# Records with	Number	Overall	Reported
Younger Youth	#	Element	of	Error	Error
Page 2		Present	Errors	Rate %	Rate %
Youth Placement Information	1702	127	8	3.1	6.1
Youth Retention Information	1703	121	0	0	0
Attained Degree or Certificate	1704	191	8	3.1	3.9
Date Attained Degree or Certificate or Credential	1705	191	7	2.6	3.2
Category of Assessment	1801	21	0	0	0
Type of Assessment Test	1802	21	0	0	0
Functional Area	1803	21	0	0	0
Date Administered Pre-Test	1804	21	1	0.4	4.9
Pre-Test Score	1805	21	1	0.4	4.9
Educational Functioning Level	1806	21	1	0.4	4.9
Date Administered Post-Test (Year #1)	1807	14	1	0.3	5.4
Post-Test Score (Year #1)	1808	14	0	0	0
Educational Functioning Level (Year #1)	1809	14	0	0	0
Date Administered Post-Test (Year #2)	1810	1	0	0	0
Post-Test Score (Year #2)	1811	1	0	0	0
Educational Functioning Level (Year #2)	1812	1	0	0	0
Date Administered Post-Test (Year #3)	1813	0	0	0	0
Post-Test Score (Year #3)	1814	0	0	0	0
Educational Functioning Level (Year #3)	1815	0	0	0	0
Type of Assessment Test	1816	13	0	0	0
Functional Area	1817	13	0	0	0
Date Administered Pre-Test	1818	13	1	0.4	8.8
Pre-Test Score	1819	13	1	0.4	8.8
Educational Functioning Level	1820	13	1	0.4	8.8
Date Administered Post-Test (Year #1)	1821	10	0	0	0
Post-Test Score (Year #1)	1822	10	0	0	0
Educational Functioning Level (Year #1)	1823	10	0	0	0
Date Administered Post-Test (Year #2)	1824	0	0	0	0
Post-Test Score (Year #2)	1825	0	0	0	0
Educational Functioning Level (Year #2)	1826	0	0	0	0
Date Administered Post-Test (Year #3)	1827	0	0	0	0
Post-Test Score (Year #3)	1828	0	0	0	0
Educational Functioning Level (Year #3)	1829	0	0	0	0
Type of Assessment Test	1830	1	0	0	0
Functional Area	1831	1	0	0	0
Date Administered Pre-Test	1832	1	0	0	0
Pre-Test Score	1833	1	0	0	0
Educational Functioning Level	1834	1	0	0	0
Date Administered Post-Test (Year #1)	1835	0	0	0	0

Data Element	Element	# Records with	Number	Overall	Reported
Younger Youth	#	Element	of	Error	Error
Page 3		Present	Errors	Rate %	Rate %
Post-Test Score (Year #1)	1836	0	0	0	0
Educational Functioning Level (Year #1)	1837	0	0	0	0
Date Administered Post-Test (Year #2)	1838	0	0	0	0
Post-Test Score (Year #2)	1839	0	0	0	0
Educational Functioning Level (Year #2)	1840	0	0	0	0
Date Administered Post-Test (Year #3)	1841	0	0	0	0
Post-Test Score (Year #3)	1842	0	0	0	0
Educational Functioning Level (Year #3)	1843	0	0	0	0
Goal #1 Type	1900	123	4	1.8	3.9
Date Goal #1 Was Set	1901	123	6	2.5	5.5
Attainment of Goal #1	1902	111	7	3.2	8
Date Attained Goal #1	1903	111	10	3.6	8.9
Goal #2 Type	1904	83	5	1.4	5.1
Date Goal #2 Was Set	1905	83	7	2.1	7.8
Attainment of Goal #2	1906	75	11	3.3	14.1
Date Attained Goal #2	1907	75	9	2.6	11.2
Goal #3 Type	1908	53	6	1.6	10.9
Date Goal #3 Was Set	1909	53	8	2	14
Attainment of Goal #3	1910	43	7	1.8	16
Date Attained Goal #3	1911	43	7	1.8	16
Goal #4 Type	1912	37	1	0.3	2.9
Date Goal #4 Was Set	1913	37	3	0.7	7.6
Attainment of Goal #4	1914	33	4	1.1	13.5
Date Attained Goal #4	1915	33	3	0.8	9.9
Goal #5 Type	1916	25	1	0.2	3.7
Date Goal #5 Was Set	1917	25	3	0.7	11.3
Attainment of Goal #5	1918	24	3	0.6	10.7
Date Attained Goal #5	1919	24	2	0.4	7.4
Goal #6 Type	1920	14	2	0.4	12.8
Date Goal #6 Was Set	1921	14	2	0.4	12.8
Attainment of Goal #6	1922	11	1	0.2	7.9
Date Attained Goal #6	1923	11	1	0.2	7.9
Goal #7 Type	1924	9	0	0	0
Date Goal #7 Was Set	1925	9	0	0	0
Attainment of Goal #7	1926	9	0	0	0
Date Attained Goal #7	1927	9	0	0	0
Goal #8 Type	1928	6	1	0.2	15.7
Date Goal #8 Was Set	1929	6	1	0.2	15.7
Attainment of Goal #8	1930	5	1	0.2	19.1

Data Element	Element	# Records with	Number	Overall	Reported
Younger Youth	#	Element	of	Error	Error
Page 4		Present	Errors	Rate %	Rate %
Date Attained Goal #8	1931	5	1	0.2	19.1
Goal #9 Type	1932	4	1	0.2	23.6
Date Goal #9 Was Set	1933	4	1	0.2	23.6
Attainment of Goal #9	1934	2	0	0	0
Date Attained Goal #9	1935	2	0	0	0
Goal #10 Type	1936	1	0	0	0
Date Goal #10 Was Set	1937	1	0	0	0
Attainment of Goal #10	1938	1	0	0	0
Date Attained Goal #10	1939	1	0	0	0
Goal #11 Type	1940	0	0	0	0
Date Goal #11 Was Set	1941	0	0	0	0
Attainment of Goal #11	1942	0	0	0	0
Date Attained Goal #11	1943	0	0	0	0
Goal #12 Type	1944	0	0	0	0
Date Goal #12 Was Set	1945	0	0	0	0
Attainment of Goal #12	1946	0	0	0	0
Date Attained Goal #12	1947	0	0	0	0