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Wyoming Adult Education Monitoring Protocols

Part I: Federal Guidance

The Code of Federal Regulations §200.332 outlines the Requirements for Pass-Through entities for federal subgrantees as:

Subpart (d)

Monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward; and that subaward performance goals are achieved. Pass-through entity monitoring of the subrecipient must include:

(1) Reviewing financial and performance reports required by the pass-through entity.

(2) Following-up and ensuring that the subrecipient takes timely and appropriate action on all deficiencies pertaining to the Federal award provided to the subrecipient from the pass-through entity detected through audits, on-site reviews, and written confirmation from the subrecipient, highlighting the status of actions planned or taken to address Single Audit findings related to the particular subaward.

(3) Issuing a management decision for applicable audit findings pertaining only to the Federal award provided to the subrecipient from the pass-through entity as required by § 200.521.

(4) The pass-through entity is responsible for resolving audit findings specifically related to the subaward and not responsible for resolving crosscutting findings. If a subrecipient has a current Single Audit report posted in the Federal Audit Clearinghouse and has not otherwise been excluded from receipt of Federal funding (*e.g.,* has been debarred or suspended), the pass-through entity may rely on the subrecipient's cognizant audit agency or cognizant oversight agency to perform audit follow-up and make management decisions related to cross-cutting findings in accordance with section § 200.513(a)(3)(vii). Such reliance does not eliminate the responsibility of the pass-through entity to issue subawards that conform to agency and award-specific requirements, to manage risk through ongoing subaward monitoring, and to monitor the status of the findings that are specifically related to the subaward.

Subpart (e)

Depending upon the pass-through entity's *assessment of risk* posed by the subrecipient (as described in paragraph (b) of this section), the following monitoring tools may be useful for the pass-through entity to ensure proper accountability and compliance with program requirements and achievement of performance goals:

(1) Providing subrecipients with training and technical assistance on program-related matters; and
(2) Performing on-site reviews of the subrecipient's program operations;
(3) Arranging for agreed-upon-procedures engagements as described in § 200.425.

Subpart (f)
Verify that every subrecipient is audited as required by Subpart F of this part when it is expected that the subrecipient's Federal awards expended during the respective fiscal year equaled or exceeded the threshold set forth in § 200.501.

Subpart (g)
Consider whether the results of the subrecipient's audits, on-site reviews, or other monitoring indicate conditions that necessitate adjustments to the pass-through entity's own records.

Subpart (h)
Consider taking enforcement action against noncompliant subrecipients as described in § 200.339 of this part and in program regulations.

§200.339 Remedies for Non-Compliance

If a non-Federal entity fails to comply with the U.S. Constitution, Federal statutes, regulations or the terms and conditions of a Federal award, the Federal awarding agency or pass-through entity may impose additional conditions, as described in § 200.208. If the Federal awarding agency or pass-through entity determines that noncompliance cannot be remedied by imposing additional conditions, the Federal awarding agency or pass-through entity may take one or more of the following actions, as appropriate in the circumstances:

(a) Temporarily withhold cash payments pending correction of the deficiency by the non-Federal entity or more severe enforcement action by the Federal awarding agency or pass-through entity.
(b) Disallow (that is, deny both use of funds and any applicable matching credit for) all or part of the cost of the activity or action not in compliance.
(c) Wholly or partly suspend or terminate the Federal award.
(d) Initiate suspension or debarment proceedings as authorized under 2 CFR part 180 and Federal awarding agency regulations (or in the case of a pass-through entity, recommend such a proceeding be initiated by a Federal awarding agency).
(e) Withhold further Federal awards for the project or program.
(f) Take other remedies that may be legally available

Part II: Wyoming's Monitoring Activities for Adult Education

The Wyoming Community College Commission 's (WCCC) Office of Adult Education coordinates a series of monitoring activities to support the success of grant funded programs through its office. This document provides a summary of Wyoming's monitoring activities and their cadence.

A. Risk Assessment

As outlined in State Policy #4092020R, the Wyoming Community College Commission (WCCC), conducts a risk assessment at the beginning of each program year, using established criteria to evaluate each grantee's risk for the purpose of determining a monitoring plan.

The purposes of a Risk Assessment are:

- To evaluate subrecipients and programs against risk indicators
- Rank subrecipients and programs by risk
- Use data analysis and automation to make processes more efficient
- Perform analysis regularly to account for changes in risk

Providers identified as '**High-Risk'** are subject to increased monitoring processes through either a Targeted Monitoring or a Program Improvement Plan in the year in which the 'High Risk' is noted. In addition, providers identified as 'High Risk' for two or more consecutive years will be required to complete two full comprehensive monitoring processes in the five-year grant and may be subject to a:

a) Corrective Action Plan
b) Loss of funds as outlined in CRF §200.339
c) Non-renewal of grant award in subsequent years of the grant
d) Other legal remedies, including those identified in a Grant Contract, that may be available.

Providers whose level of risk is at '**Medium**' levels may be subject to a Targeted Monitoring. Providers identified as 'Medium Risk' who do not make the necessary program adjustments to lower their risk category in the following year will be required to complete a second full comprehensive monitoring process or may be placed on a Corrective Action Plan.

Providers whose level of risk is at '**Low'** levels are not subject to increased monitoring based upon the Risk Assessment Review.

The WCCC reserves the right to determine the level of risk through the Risk Assessment and to identify the area(s) in which increased monitoring protocols should be implemented.

B. Program Review Process

In accordance with the federal regulations outlined in Part I above and as outlined in the WIOA Unified State Plan for Wyoming, the WCCC will conduct program monitoring review processes on each provider who has an Adult Education grant. Recipients of Adult Education grants are required to participant in the program review process when requested. Program review is an opportunity for WCCC staff and Adult Education program staff to examine the program's design, effectiveness, performance, and compliance with state and federal guidelines. The process also provides an opportunity for Adult Education providers to receive technical assistance from the WCCC office to strengthen the program.

(1) Comprehensive Monitoring

As outlined in the Wyoming Unified State Plan, monitoring reviews will be conducted by the Wyoming Community College Commission State Office for Adult Education. Every grantee will receive a Comprehensive Monitoring at least once during each five-year cycle. However, grantees who have more than 3 Observations and/or 2 or more Findings on the initial Comprehensive Monitoring and/or their Risk Assessment places them in a high and/or medium risk category, may receive more frequent on-site or virtual Comprehensive Monitoring. This means that a grantee may receive multiple monitoring reviews during a five-year grant cycle.

Once grantees have been identified through the competitive grant process, the WCCC will schedule a Comprehensive Monitoring process with each approved provider. This monitoring will consist of 16 chapters covering the following areas:

1) Intake, orientation, and a front-loaded career service course
2) Student eligibility
3) Sufficient intensity and duration
4) Educational and career counseling
5) Program personnel
6) Staff professional development
7) Assessment
8) WIOA system network
9) Student files
10) Cooperative planning and partnerships
11) Facilities
12) Data management
13) Internal evaluation processes
14) Fiscal review
15) Reporting
16) GEPA-Section 427

The goals of this monitoring review process are:

- Ensure the programs meet Adult Education and Family Literacy Act (AEFLA) and state requirements
- Continuously improve the quality of federally and state funded activities;
- Provide technical assistance in identifying and resolving compliance/accountability issues;
- Ensure the accuracy, validity, and reliability of data collection and reporting as well as currency of policies and procedures;
- Interact with program administration, staff, students and stakeholders to get other perspectives of the program; and
- For local programs, an opportunity for professional growth and continuous improvement

During this review, local programs are required to compile an electronic notebook of evidence of compliance for each item shown on the State compliance checklist. Technical assistance is provided to programs whenever necessary to address findings and/or observations. Programs that are found to be out of compliance with State or Federal policies or law, or which have demonstrated unacceptable practices or have consistently low performance will be subject to a Corrective Action Plan or a Targeted Monitoring. "Consistently low performance" will be based upon actual program performance against program indicators, the extent to which state targets are met, past performance of the program, the relative performance of other providers, and other mitigating program circumstances. Programs which fail to complete and implement the strategies outlined in a Corrective Action Plan as determined necessary by the State may be subject to the loss of grant funds.

(2) Focused Monitoring

Once a Comprehensive Monitoring is completed, the WCCC will arrange a meeting with the provider to discuss results. This is followed by a 'Monitoring Letter' which summarizes the Comprehensive Monitoring. The letter will also provide information on subsequent monitoring requirements as follows:

1) *Three or less 'Observations' and no 'Findings:* Providers who have 3 or less 'Observations' and no 'Findings' on the initial Comprehensive Monitoring will not be subject to a second Comprehensive Monitoring. Instead, a Focused Monitoring process will be required in the second year after the Comprehensive Monitoring and will cover:
   a. Student files
   b. Program performance
   c. Fiscal review
   d. Areas noted as 'Observations' in the initial Comprehensive Monitoring
2) *Three or less 'Observations and/or 1-2 'Findings:* Providers who have three or less 'Observations' and/or 1-2 'Findings' noted from the initial Comprehensive monitoring will not be required to complete a second Comprehensive Monitoring. Instead, a Focused Monitoring process will be required in the second year after the initial Comprehensive monitoring and will cover:
   a. Student files
   b. Program performance
   c. Fiscal review
   d. Data management and/or reporting
   e. Internal evaluation protocols
   f. Areas noted as 'Observations' and/or 'Findings' in the initial Comprehensive Monitoring

3) *More than three 'Observations' and/or 2 or more 'Findings':* Providers with more than three 'Observations and two or more 'Findings' on the initial Comprehensive Monitoring will be required to complete a second Comprehensive Monitoring two years after the initial monitoring takes place.

C. **Monthly Desk Monitoring Tool**: Recipients of an Adult Education grant award are required to complete a monthly data monitoring report that presents data such as participants served, Measurable Skill Gain rates, cost of career services, grand spend down rates depicting cost per student, and any other items the State Educational Agency (SEA) deems necessary. The SEA reviews the monthly report to monitor provider progress in achieving their program's goals and to complete a comprehensive longitudinal study of provider performance across multiple years. The tool supports desk monitoring of Adult Education activities and provides the SEA with detailed information to support technical assistance or discussion among Adult Education providers.

Monthly Desk Monitoring Reports are to be submitted through the WCCC secured portal, when possible.

D. **Quarterly Report**: Recipients of an Adult Education grant are required to submit quarterly data and narrative submissions through the secure WCCC portal. The SEA monitors each provider's quarterly data submission to ensure timely and accurate reporting. This form of desk-monitoring provides SEA staff with detailed information to support targeted technical assistance or discussion among Adult Education programs. Quarterly data submissions are due the 15th of the month in October, January, and April.

(1) Goals Report: The January quarterly report must also contain a progress report showing the local program's progress towards achieving goals established at the beginning of the (re)application period for the year.

E. **End of Year Reporting**: An End of Year narrative report addresses the WIOA thirteen funding considerations and provide for an evaluation of:

- ☐ *Program successes/challenges*
- ☐ *Program improvements*
- ☐ *Performance data analysis*
- ☐ *Integration with One-stop partners*
- ☐ *AE Standards and Effective Educational Practices*
- ☐ *Program Alignments to the Unified State Plan*
- ☐ *Serving Participants Most in Need Through Technology*
- ☐ *Professional Development*
- ☐ *Corrections Education*
- ☐ *IELCE*

This report is supported by various documents that include, but are not limited to:

1) *NRS Tables*
2) *Program Improvement Plan (PIP), when applicable*
3) *Instructor Information and Professional Development Hours*
4) *Financial Status Reports*
5) *Data Quality Checklist:* Programs are expected to rate their implementation of data quality standards in their NRS data collection procedures as 'Acceptable, Superior, or Exemplary'. For areas where the local program does not reach "Acceptable" standards, a data quality program improvement plan must be completed to describe the areas identified as substandard and their plan for correction. The plan will address all standards the program did not meet, describe what new policies or procedures will be put in place to meet the standards, identify barriers to compliance and the technical assistance needed to implement the plan. AEL State Office will offer technical assistance to programs to meet the goals of their data quality improvement plan.
6) *In-kind and Match Funds*
7) *Sample Lesson Plans* Showing the Integration of one or more of the following:
   - Academic Standards
   - Teaching Skills That Matter
   - Contextualized Learning

- Digital and/or Financial Literacy
- Essential Components of Reading

8) Any other State requested documentation as identified in a given year
End of Year report due dates are outlined each year in Grant Contracts and in the (re)application processes, but are typically due August 1st. End of Year reports may be submitted by email to the SEA or through the WCCC secure portal.

F. Standards in Action (SIA) Checklist: The SIA checklist is a lesson observation tool used to assess whether an instructor has incorporated the State required academic standards into a lesson. The Checklist is to be used by local directors and shared with the instructor. Copies of the completed Checklist are to be retained locally in each instructors file and are to be made available to the SEA upon request.

The SIA Checklist is to be used at least once per year with each instructor. Instructors whose lessons do not show evidence of standards implementation are subject to additional observations.

Part III: Failing a Monitoring and/or Failing to Meet Federally Negotiated Performance Targets

Whether as a result of a monitoring visit, desk-monitoring or other activity, Adult Education providers are subject to the following processes if the WCCC has observed failure to perform the activities described in a Request for Proposal or in a Continuing Application, or outlined in the program and general assurances, including, but not limited to:

(1) failure to provide required reports
(2) failure to submit a Focused Monitoring, Corrective Action Plan, Target Monitoring and/or Program Improvement Plan as required by the WCCC.
(3) failed Comprehensive Monitoring (More than three 'Observations' and/or 2 or more 'Findings')
(4) failure to meet outcome measure targets at 90% or greater; or
(5) failure to meet the federally negotiated measurable skill gain targets.

Every two years, the State Office for Adult Education negotiates performance level targets for each of the indicators of performance through the use of a statistical adjustment model formula. (WIOA §116). Once targets are established, local programs are required to meet or surpass targets for each indicator. Programs which do not meet these targets are subject to increased monitoring in the forms of a Corrective Action Plan, Program Improvement Plan or a Target Monitoring. In order to help local programs, meet these federally negotiated targets, providers are expected to meet or surpass the posttest rate outlined in the State's Assessment policy.

A. Targeted Monitoring

Targeted monitoring is onsite or desk monitoring that is used to focus on a particular area of concern. It may be initiated by state staff or requested by a local administrator. Targeted Monitoring typically focuses on compliance issues and may address a variety of areas which may include, but are not limited to:

- Compliance
- Fiscal areas
- ADA
- Assessment
- Accountability data
- Performance

Within 45 days of targeted monitoring, state staff will send a report to the subgrantee with commendations, recommendations, concerns, findings (if any), and next steps. Failure to complete Targeted Monitoring requirement(s) will result in a Corrective Action plan and may result in funding being withheld.

B. Program Improvement Plan (PIP)

The WCCC uses Program Improvement Plans and Corrective Action plans to support grantees in their continuous improvement efforts. Each plan provides a template for documenting improvement steps, timelines, and results. Program Improvement Plans may be requested of or assigned to a grantee by the WCCC for a variety of policy or guidance concerns.

Adult Education providers are required to meet federally negotiated targets. Providers that do not meet a target within a 90% range will create a Program Improvement Plan to submit with their *end of year narrative report* and the WCCC- SEA will follow up to provide technical assistance as needed. Any provider not meeting at least 90% of a target for 2 consecutive years will complete a Corrective Action Plan and participate in additional technical assistance and performance monitoring as identified by the State.

Program Improvement Plans are also required with the Data Quality Checklist on areas where a 'less than acceptable' rating has been identified.

Providers required to submit a PIP and do not do so will be required to complete a Corrective Action Plan and may result in funding being withheld.

C. Corrective Action Plan (CAP)

WIOA §677.220 & OCTAE Program Memorandum 20-2. Defines the circumstances under which a CAP can be applied for poor performance. Technical assistance shall be provided to the provider in the forms of:

- Developing a Performance Improvement Plan (PIP)
- Developing a modified local or regional plan
- Other actions designed to assist the local provider in improving performance

Three years of a State's continual poor performance, as evidenced by failure to meet federal negotiated targets, may result in the Governor's discretionary funds being withheld.

If a provider is found to be out of compliance with Federal or State requirements, the provider may be placed on probation for up to one year as they fulfill a Corrective Action Plan. Probationary status may result in grant funds being withheld until stated requirements are met by the due dates outlined on the Corrective Action Plan.

Compliance is determined by one or more of the following:

1) Meeting federal negotiated targets for any area for two or more consecutive years
2) Completing a Targeted Monitoring or a Program Improvement Plan
3) Risk Assessment places the provider at 'Medium' or 'Low' levels for 2 consecutive years

Corrective Action Plans are assigned to grantees for significant or repeated Adult Education policy and guidance violations or as the result of findings during a formal review monitoring process. Each plan provides an opportunity for thought partnership and dialogue between WCCC and the grantee. Corrective Action Plan and Program Improvement Plan templates will be provided to grantees as needed.

Failure to comply with the Corrective Action Plan may lead to reduction or removal of funding pursuant to State Adult Education policies and procedures and as defined in the provider's Grant Contract and in General and Program Assurances.

The required template for preparing a Corrective Action Plan is in the Appendix.

Appendix: Template for Adult Education Corrective Action Plan (CAP)

Provider:_____ **Reason for CAP:**_____

Date CAP Submitted to SEA:_____

Description of Required Action and Tasks	Strategy to Meet Required Action	Evidence of Action Completed	Projected Date for Completion	Assigned Staff, if appropriate/applicable	Status of Action: Completed/Pending

Tips for Preparing the CAP

Description of Required Action Number and Tasks:
Summarize or state all the required actions identified in a monitoring report.

Strategy to Meet Required Action:
Provide at least one strategy to accomplish each required action. Providers may need multiple strategies or an overarching long-term strategy to accomplish complex required actions. Consider the following:
-What is the overall objective of the action?
-Does the action require policy change or changes to program guidelines? If so, at what level—e.g., State regulation, program policy directives or memoranda?
-Do fiscal resources need to be reclassified or reallocated?
-Who must be involved in meeting the objective?
- Can only a single strategy accomplish the objective, or are interim, short-term strategies needed to incrementally accomplish the overall required action?

Evidence of Action Completed:
Identify the specific documentation the provider will supply to verify completion of the strategy/task(s) associated with each required action.

Projected Date for Completion:
Indicate the date by which the strategy/task will be completed and related evidence/documentation will be submitted to the WCCC: SEA.

Assigned Staff, if Appropriate:
Identify the individual responsible for managing implementation of the strategy/task and compiling the evidence/documentation of completion for transmittal to WCCC: SEA.

Status of Action—Completed/Pending:
The WCCC: SEA will notify the project lead of acceptance of the providers CAP. The WCCC: SEA will monitor for satisfactory completion of all required actions before closing the CAP in writing.