**Program Self-Assessment Checklist**

Senior Community Service Employment Program (SCSEP)

* **For any “No” response, please include a separate sheet providing**

**additional explanation for the item(s) in question**

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| Sub grantee: |  |
| SCSEP Program Manager: |  |
| Telephone: |  |
| Program Year: |  |
| Funding Level: |  |
| Number of Authorized Slots: |  |
| Current Enrollment: |  |
| Date of Assessment: |  |
| **ADMINISTRATIVE REVIEW** |
| **Administration and Staffing [20 CFR 641, Subpart H]** |
| 1. Are job descriptions available? | Yes No |
| 2. Does the sub grantee maintain the following records in an organized and readily retrievable fashion? |  |
| a. Organizational charts | Yes No |
| b. Position descriptions | Yes No |
| c. Time sheets | Yes No |
| d. Personnel procedures | Yes No |
| **Staff Payroll** |
| 1. Does sub grantee keep individual cumulative earnings records?*(§ 641.879)* | Yes No |
| 2. Do leave records show time earned, used and current balances? | Yes No |
| 3. Does sub grantee organization have a written grievance procedure for staff? *(§ 641.910)* | Yes No |
| 4. Where sub grantees receive funds from other sources, is staff time properly charged to the appropriate program? | Yes No |
| **Nepotism [20 CFR 641.841]** |
| 1. Does the sub grantee ensure for it and all host agencies conformance to nepotism requirements? | Yes No |
| **Unionization [20 CFR 641.839]** |
| 1. Are project funds used to support union activity? | Yes No |
| **Nondiscrimination [20 CFR 641.827]** |
| 1. Does the sub grantee ensure that nondiscrimination assurances are included in all agreements? | Yes No |
| **Lobbying [20 CFR 641.824; 641.836(c); 641.850(c)]** |
| 1. Is there a procedure in place governing implementation of the provision against lobbying activities utilizing SCSEP funds? | Yes No |
| 2. Are participants advised of these requirements in writing? | Yes No |
| 3. Is the Hatch Act available upon request? | Yes No |

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| **Workforce Innovation Opportunity Act Involvement [20 CFR, Subpart B]** |
| 1. | Does the sub grantee have a memorandum of understanding (MOU) with the local Workforce Board? *(§ 641.200)* | Yes | No |
| 2. | Does MOU state that Title V dollars can only be used for Title V participants? *(§ 641.220)* | Yes | No |
| 3. | Is there evidence that the sub grantee has coordinated NC Works activities with other SCSEP sub grantees in the workforce area? *(§ 641.210)* | Yes | No |
| 4. | Is the sub grantee working with the local NC Works Career Center? *(§ 641.210)* | Yes | No |
| 5. | Have linkages been established with NC Works Career Centers, Area Agencies on Aging and other SCSEP sub grantees? *(§ 641.210)* | Yes | No |
| 6. | Have efforts been made to obtain funding from the NC Works Career Centers or other sources for participant training and placement? *(§ 641.210)* | Yes | No |
| 7. | Have efforts been made to obtain supportive services through the Area Agencies on Aging? *(§ 641.210)* | Yes | No |
| 8. | Is there a cooperative agreement with the other SCSEP sub grantees in the local workforce investment area? *(§ 641.210)* | Yes | No |
| **FINANCIAL MANAGEMENT** |
| **Fiscal Management [20 CFR 641.800]** |
| 1. | Are the expenditures charged to Title V reasonable? | Yes | No |
| 2. | Does the sub grantee have a chart of accounts that ensures that Title V will not be charged with cost allocated to other programs? | Yes | No |
| 3. | Does the sub grantee have a written accounting procedures manual? | Yes | No |
| 4. | Does the accounting system have cost codes to separate Title V from other programs? | Yes | No |
| 5. | Are records clean and well-organized without erasures and cross-outs? | Yes | No |
| 6. | Is the general ledger posted through the end of the previous month? | Yes | No |
| 7. | Are all expenditures to date recorded? | Yes | No |
| 8. | Does the sub grantee have a system for allocating cost to the appropriate cost category? | Yes | No |
| 9. | Does the sub grantee have a system for monitoring planned vs. actual cost and for taking corrective action? | Yes | No |
| 10. | Has the sub grantee earned any program income? | Yes | No |
| 11. | Is all program income earned by the grant used for grant purposes? | Yes | No |
| 12. | Does the sub grantee have a system for monitoring the limitations on cost categories? | Yes | No |
| 13. | Is sub grantee using accrual based accounting system? *(§ 641.879(a))* | Yes | No |
| **Audit Requirements [20 CFR 641.821]** |
| 1. | What is the period covered by the most recent audit? |  |  |
| 2. | Were there any administrative findings in the last audit report? | Yes | No |
| 3. | Has a final Findings and Determination (F&D) been made? | Yes | No |
| 4. | Has a copy of the latest audit been provided to DAAS? | Yes | No |

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| **Expenditure Reports** |
| 1. | Expenditure reports submitted via email in a timely manner for payment? | Yes | No |
| **Non-Federal Share of Grant Cost [20 CFR 641.809]** |
| 1. | How is the sub grantee tracking and calculating the 10% match? |  |  |
| 2. | Are the calculations reasonable? | Yes | No |
| **Participant Payroll System** |
| 1. | Indicate the frequency of participant payroll. |  |  |
| 2. | Are participant payroll files kept in a central location? | Yes | No |
| 3. | Are time sheets properly signed for each preceding pay period? | Yes | No |
| 4. | Are wages at least the current minimum wage? | Yes | No |
| 5. | How does the payroll system work? |  |  |
| 6. | Are hours worked cumulative? | Yes | No |
| 7. | Are fringe benefits zeroed out at the end of the grant year? | Yes | No |
| 8. | Are there two valid signatures (participant & supervisor) on each time sheet? | Yes | No |
| 9. | Are training hours tracked separately from community service hours? | Yes | No |
| **PROGRAM OPERATIONS** |
| **Recruitment and Selection [20 CFR 641 Subpart E]** |
| 1. | Only eligible participants are approved for Title V Services. *(§ 641.500)* | Yes | No |
| 2. | Eligibility is determined at initial application. *(§ 641.505)* | Yes | No |
| 3. | Are all participant records entered on the SPARQ Database? | Yes | No |
| 4. | Eligibility is determined at least once every 12 months after the applicant becomes a participant. *(§ 641.505)* | Yes | No |
| 5. | Financial eligibility is determined in accordance with TEGL 12-06?*(§ 641.510)* | Yes | No |
| 6. | Have participants registered at the local One-Stop? *(§ 641.210)* | Yes | No |
| 7. | Does the sub grantee advertise vacancies? | Yes | No |
| 8. | Describe the current method used to fill a vacancy *(§ 641.515)* |  |  |
| 9. | Does the QPR reflect that the sub grantee is serving the hardest to serve clientele, with the emphasis on Veterans? *(§ 641.520)* | Yes | No |
| 10. | Is there a waiting list of applicants? | Yes | No |
| 11. | An applicant is moved to participant/ENROLLED status only upon assignment to community service? | Yes | No |

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| 12. Priorities for Most in Need applicants are chosen for enrollment in accordance with § 641.520.  | Yes No |
| 13. Of the mandated priority categories, which one is most often used? |  |
| **Quarterly Progress Report (QPR) [20 CFR Subpart H]** |
| 1. Has the sub grantee submitted quarterly progress reports on a regular and timely basis (within 30 days of the end of the reporting period)?*(§ 641.879(b))* | Yes No |
| 2. Does it appear that the sub grantee will meet or exceed all performance goals? *(§ 641.700)* | Yes No |
| **Orientation** |
| 1. Is orientation provided to new participants on a timely basis? *(§ 641.535)* | Yes No |
| 2. Is the following information relayed during orientation? (Grievance procedures, purpose of program) *(§ 641.535)* |  |
| 3. Are participants advised of the 48 month durational limit at the time of orientation? *(§ 641.570)* | Yes No |
| 4. Are participants provided written copies of participant handbook? | Yes No |
| **Host Agencies** |
| 1. Is orientation provided to host agencies on a timely basis? | Yes No |
| 2. Are host agencies advised of their responsibilities with the participants? (Providing training, supervision, safe environment, etc.) | Yes No |
| 3. Are there copies of 501(c)(3) designations for host agencies that are not governmental? | Yes No |
| 4. Does sub grantee abide by policy prohibiting the assignment of participants to training projects that involve the construction, operation, or maintenance of facilities used or to be used as a place for sectarian religious instruction or worship? *(OAA § 502(b)(1)(D))* | Yes No |
| 5. Does sub grantee abide by policy prohibiting the assignment of a participant to a facility which primarily benefits private, profit-making organizations? *(OJE is the exception)* | Yes No |
| 6. Does sub grantee abide by prohibiting the assignment of a participant to a political organization? *(OAA § 502(b)(1)(D))* | Yes No |
| 7. Is there a host agency agreement or contract on file? | Yes No |
| 8. How often do host agencies receive a re-orientation? |  |
| **Participant Assessment, Reassessment and IEP** |
| 1. Are new participants assessed to determine their skills, interests, work history and aptitudes to determine the most suitable training assignment? *(§ 641.535 (a)(3)(i-iii))* | Yes No |
| 2. Is there evidence that participants were reassessed at least twice a year? *(§ 641.535 (a)(2)(ii))* | Yes No |
| 3. Was the assessment/reassessment used as a basis for developing or amending the Individual Employment Plan (IEP)? *(§ 641.535 (a)(3)(i-iii))* | Yes No |
| 4. Was host agency assignment based on the IEP? *(§ 641.535 (a)(3)(i-iii))* | Yes No |
| 5. Did the sub grantee develop the IEP in partnership with the participant? | Yes No |
| 6. Does the IEP have a sequence of short-term attainable goals related to training attained at the host agency or other training that lead to an ultimate goal, usually an employment goal? *(OAA § 502(b)(1)(N)))* | Yes No |
| 7. Is the host agency supervisor and, in appropriate instances, the employer, aware of the IEP and his/her role in achieving the goals? *(§ 641.550)* | Yes No |
| 8. Is there evidence that the IEP is updated at least as frequently as the assessment? *(§ 641.535(a)(3)(i))* | Yes No |
| 9. Is there evidence that a participant has been moved to a new host agency on the basis of following the training and employment objectives in the IEP and/or as a result of an approved rotational policy?*(§ 641.575)* | Yes No |
| 10. Is there a DOL approved IEP-related termination policy in the orientation manual, which was given to the participant? | Yes No |
| **Community Service Assignment** |
| 1. Are most participant assignments 20 hours per week? (*§ 641.577)* | Yes No |
| 2. Are participants paid for training and wages only AFTER assignment to community service? | Yes No |
| 3. Is the initial community service assignment the same agency for which the client actually performed the community service hours? | Yes No |
| 4. Are participants receiving meaningful training based on their IEPs in their community assignments? | Yes No |
| 5. Is there a work site agreement for each participant assigned to community service? | Yes No |
| 6. Is there a training description for each participant? | Yes No |
| 7. Does the host agency offer an orientation to Title V participants? | Yes No |
| 8. Are community service hours tracked using SPARQ? | Yes No |
| 9. Is the maximum durational limit of 48 months being applied to all participants? | Yes No |
| 10. What types of opportunities are being offered to participants in their effort to obtain unsubsidized employment? baseonthIEP before the durational limit is met? | Yes No |
| **Enrollee Wages/Fringe Benefits** |
| 1. Does the participant begin receiving wages immediately upon enrollment in the program? | Yes No |
| 2. Does the participant receive the higher of the Federal, State, or local rate of pay? *(§ 641.565)* | Yes No |
| 3. Are wages and fringe benefits provided uniformly to all participants?*(§ 641.535(9)) (§ 641.565(b)(1))* | Yes No |
| 4. What fringe benefits are being offered? *(§ 641.565(b))* |  |
| 5. Are they reasonable? (Retirement, annual leave, accumulated sick leave, and bonuses are prohibited; holiday leave and physical exam are okay.) *(§ 641.565(b))* | Yes No |
| 6. Is there evidence that participants are being offered physical examinations? *(§ 641.565(b)(ii))* | Yes No |
| 7. Does the sub grantee inform the participant that the results of the exam do not have to be given to the sub grantee? *(§ 641.535(b)(1)(ii)(A))* | Yes No |
| 8. Is there evidence of waivers for physicals? *(§ 641.535(b)(1)(ii)(A))* | Yes No |
| **Participant Supportive Services [20 CFR 641.545]** |
| 1. Are supportive services being provided to assist participants in subsidized and, where appropriate, in unsubsidized employment? | Yes No |
| 2. Are supportive services obtained at no cost or reduced cost to the program? | Yes No |
| 3. Is there any evidence that grant funds are being used to support the transportation costs of host agencies or other programs? | Yes No |
| 4. Are supportive service provided for follow up services? | Yes No |
| **Participant Training [20 CFR 641.540]** |
| 1. Are participants offered training to assist in their community service assignment or unsubsidized employment? | Yes No |
| 2. Are community service hours being tracked and entered into GPMS? | Yes No |
| 3. Are training hours being tracked? | Yes No |
| 4. Is there an indication that the sub grantee has attempted to obtain training through WIOA? | Yes No |
| 5. Is training realistic and consistent with the IEP? | Yes No |
| 6. Is there any indication that participants are enrolled in the program solely for training or job search? *(§ 641.535(a)(11)(c))* | Yes No |
| 7. What types of trainings are offered? |  |
| 8. Are job clubs and job search being provided ONLY in conjunction with other approved Title V activities? *(§ 641.535(11)(c))* | Yes No |
| 9. Are OJE assignments made in accordance with the procedures listed inNC’s grant application? |  N/A |
| 10. What types of OJE’s have been utilized by sub grantee? | N/A |
| 11. Is there a contract for each OJE? |  N/A |
| 12. Are participants required to complete a period of time in community service placement before training is provided? | Yes No |
| 13. Are contracts created for any training that is not done by the host agency, sub grantee or WIOA provider? | Yes No |
| **Maintenance of Effort [20 CFR 641.844]** |
| 1. Are host agencies made aware of MOU requirements? | Yes No |
| 2. Are participants’ training assignments a substitute for non-Title V work that should be performed by the regular employee of the host agency (would the agency have to close down without the Title V participant? | Yes No |
| **Terminations [20 CFR 641.580]** |
| 1. Terminations are made in accordance with 641.580? | Yes No |
| 2. Are written notices provided for terminations? | Yes No |

**Signatures of Approval:**

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Senior Community Service Employment Program Coordinator/Project Director, Date

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Supervisor, Date