**Performance Improvement Plan Template**

Introduction

In accordance with Virginia Workforce Council Policy 05-03 - *Sanctions for Insufficient Performance Under the Workforce Investment Act*, a Local Workforce Investment Board (WIB) that fails to meet negotiated performance measures is required to develop a Performance Improvement Plan (PIP) covering a period of not less than one program year. This plan will be reviewed by the Virginia Community College System – Office of Workforce Development Services (VCCS-WDS), in its role as state administrative entity for the Workforce Investment Act. PIPs are due within 30 days of VCCS-WDS performance notification; a response regarding approval of PIPs will be provided within 30 days.

Plan Preparation

Three sections of the PIP must be completed. Section A is the identification of specific areas of performance challenges. Section B includes the analysis of factors that contributed to performance failure. Several questions are presented to assist in the analysis of contributing factors. WIBs should ensure that where appropriate, responses to these questions are incorporated in the action plan outlined in Section C. The action plan should be used to describe specific activities to address the factors identified in Section B. Several tables are provided in the template; all tables and/or rows may not require completion.

PIPs should include detailed and specific information, including measurable outcomes for performance improvement activities. Moreover, WIBs that have failed to meet a performance measure for two or more consecutive years will be expected to provide a more comprehensive analysis of factors (Section B), and a more intensive plan of action to improve performance outcomes (Section C). The PIP will be considered by the Virginia Workforce Council’s Performance and Accountability Committee, in the context of recommendations for any applicable sanctions, in accordance with Policy 05-03.

Technical Assistance

If a WIB fails to meet negotiated levels of performance for the common measures of WIA program performance or negotiated levels for Virginia Workforce Council approved measures for any program year, the Virginia Community College System will make technical assistance available. Technical assistance can include meetings, additional training on matters related to performance measures, and assistance with data analysis.

Reporting Requirements

The WIB is required to provide a Performance Improvement Plan progress report to the WIA Program Administrator on a quarterly basis for the duration of the Performance Improvement Plan time period. The report format is included in Section C.

PERFORMANCE IMPROVEMENT PLAN TEMPLATE

**Section A - Identification of Performance Challenge Areas**

1. Review of Performance:

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| --- | --- | --- | --- |
| (ADULT) | Entered Employment Rate | Employment Retention Rate | Average Earnings |
| FTM in past PY? |  |  |  |
| FTM in 2 consecutive PYs? |  |  |  |
| FTM in 3 consecutive PYs? |  |  |  |

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| (DLW) | Entered Employment Rate | Employment Retention Rate | Average Earnings |
| FTM in past PY? |  |  |  |
| FTM in 2 consecutive PYs? |  |  |  |
| FTM in 3 consecutive PYs? |  |  |  |

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| (YOUTH) | Literacy-Numeracy Gains | Employment / Education Placement | Degree/Certificate Attainment |
| FTM in past PY? | Yes, 15.7% vs. 50% |  |  |
| FTM in 2 consecutive PYs? | Yes, 32.7% vs. 50% |  |  |
| FTM in 3 consecutive PYs? | Yes, 23.8% vs. 38.5% |  |  |

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| (State Measures) | CRC | Adult Employment & Credential | Dislocated Worker Employment & Credential |
| FTM in past PY? |  |  |  |
| FTM in 2 consecutive PYs? |  |  |  |
| FTM in 3 consecutive PYs? |  |  |  |

1. Performance Challenge Areas:
   1. Area 1 Technical Challenge: TABE Testing – not completed often enough, retesting is not the same as initial test, or certified testers are not accessible enough.
   2. Area 2 Technical Challenge: Tracking Youth Gains – Gains in Literacy/Numeracy are not consistently tracked accurately (outside of VOS).
   3. Area 3 Technical Challenge: VOS/Data Entry Errors - VOS data entry is not consistently accurate.
   4. Area 4 Technical Challenge: Insufficient Review of Files through Internal Measures – an insufficient amount of peer review is completed to reduce audit issues identified through local, state or federal levels formal audits.
   5. Area 5 System Challenge: Confusion regarding how to enter gains in VOS System and Confusion regarding Out of School/In School Youth versus Older/Younger Youth Data Entry – VOS has a funding stream by age.
   6. Area 6 System Challenge: No Accountability for Supervision – Regarding self-supervision, immediate supervisor, contractor management or WIB.
   7. Area 7 – Inconsistent or Inaccurate Tracking of Youth – Anniversary dates and triggers for retesting do not have alerts.
   8. Area 8 High Turnover – High turnover of staff contributes to insufficient training of staff and lower accuracy and efficiency rates.
   9. Area 9 System Challenge: Incentive Policy – Less flexible policy implemented last year does not adequately assist Case Managers with motivating/engaging youth.
   10. Area 10 System Challenge: Youth Services Policy – Recently revised policy may prevent Case Managers from engaging youth participants in other developmental activities which facilitate Literacy/Numeracy gains while simultaneously participating in work experience.
   11. Area 11 Content/Program Challenge: Lack of Knowledge – Lack of knowledge of participants and staff/supervision about the program and its requirements
   12. Area 12 Content/Program Challenge: Insufficient communication with and engagement of youth.
   13. Area 13 Content/Program Challenge: Performance Challenge Area 13 Content/Program Challenge: Recruiting Additional Suitable Candidates – Ideal candidates who have greater chances for success have not been identified. Additionally, need to create a strong consistent referral process for individuals who are less suitable for the program.**Section B - Analysis of Contributing Factors**
2. Identify the specific issues that contributed to the Failed-to-Meet outcome for each measure missed in the past program year:
3. Technical Challenge: TABE Testing – not completed often enough, retesting is not the same as initial test, or certified testers are not accessible enough.
4. Technical Challenge: Tracking Youth Gains – Gains in Literacy/Numeracy are not consistently tracked accurately (outside of VOS).
5. Technical Challenge: VOS/Data Entry Errors - VOS data entry is not consistently accurate.
6. Technical Challenge: Insufficient Review of Files through Internal Measures – an insufficient amount of peer review is completed to reduce audit issues identified through local, state or federal levels formal audits.
7. System Challenge: Confusion regarding how to enter gains in VOS System and Confusion regarding Out of School/In School Youth versus Older/Younger Youth Data Entry – VOS has a funding stream by age.
8. System Challenge: No Accountability for Supervision – Regarding self-supervision, immediate supervisor, contractor management or WIB.
9. System Challenge: Inconsistent or Inaccurate Tracking of Youth – Anniversary dates and triggers for retesting do not have alerts.
10. System Challenge: High Turnover – High turnover of staff contributes to insufficient training of staff and lower accuracy and efficiency rates.
11. System Challenge: Incentive Policy – Less flexible policy implemented last year does not adequately assist Case Managers with motivating/engaging youth.
12. System Challenge: Youth Services Policy – Recently revised policy may prevent Case Managers from engaging youth participants in other developmental activities which facilitate Literacy/Numeracy gains while simultaneously participating in work experience.
13. Content/Program Challenge: Lack of Knowledge – Lack of knowledge of participants and staff/supervision about the program and its requirements
14. Content/Program Challenge: Insufficient communication with and engagement of youth.
15. Content/Program Challenge: Recruiting Additional Suitable Candidates – Ideal candidates who have greater chances for success have not been identified. Additionally, need to create a strong consistent referral process for individuals who are less suitable for the program.
16. Identify the specific issues that contributed to the Failed-to-Meet outcome for each measure missed for two consecutive program years:
    1. Technical Challenge: TABE Testing – not completed often enough, retesting is not the same as initial test, or certified testers are not accessible enough.
    2. Technical Challenge: Tracking Youth Gains – Gains in Literacy/Numeracy are not consistently tracked accurately (outside of VOS).
    3. Technical Challenge: VOS/Data Entry Errors - VOS data entry is not consistently accurate.
    4. Technical Challenge: Insufficient Review of Files through Internal Measures – an insufficient amount of peer review is completed to reduce audit issues identified through local, state or federal levels formal audits.
    5. System Challenge: Confusion regarding how to enter gains in VOS System and Confusion regarding Out of School/In School Youth versus Older/Younger Youth Data Entry – VOS has a funding stream by age.
    6. System Challenge: No Accountability for Supervision – Regarding self-supervision, immediate supervisor, contractor management or WIB.
    7. System Challenge: Inconsistent or Inaccurate Tracking of Youth – Anniversary dates and triggers for retesting do not have alerts.
    8. System Challenge: High Turnover – High turnover of staff contributes to insufficient training of staff and lower accuracy and efficiency rates.
    9. System Challenge: Incentive Policy – Less flexible policy implemented last year does not adequately assist Case Managers with motivating/engaging youth.
    10. System Challenge: Youth Services Policy – Recently revised policy may prevent Case Managers from engaging youth participants in other developmental activities which facilitate Literacy/Numeracy gains while simultaneously participating in work experience.
    11. Content/Program Challenge: Lack of Knowledge – Lack of knowledge of participants and staff/supervision about the program and its requirements
    12. Content/Program Challenge: Insufficient communication with and engagement of youth.
    13. Content/Program Challenge: Recruiting Additional Suitable Candidates – Ideal candidates who have greater chances for success have not been identified. Additionally, need to create a strong consistent referral process for individuals who are less suitable for the program.
17. Identify the specific issues that contributed to the Failed-to-Meet outcome for each measure missed for three consecutive program years:
    1. Technical Challenge: TABE Testing – not completed often enough, retesting is not the same as initial test, or certified testers are not accessible enough.
    2. Technical Challenge: Tracking Youth Gains – Gains in Literacy/Numeracy are not consistently tracked accurately (outside of VOS).
    3. Technical Challenge: VOS/Data Entry Errors - VOS data entry is not consistently accurate.
    4. Technical Challenge: Insufficient Review of Files through Internal Measures – an insufficient amount of peer review is completed to reduce audit issues identified through local, state or federal levels formal audits.
    5. System Challenge: Confusion regarding how to enter gains in VOS System and Confusion regarding Out of School/In School Youth versus Older/Younger Youth Data Entry – VOS has a funding stream by age.
    6. System Challenge: No Accountability for Supervision – Regarding self-supervision, immediate supervisor, contractor management or WIB.
    7. System Challenge: Inconsistent or Inaccurate Tracking of Youth – Anniversary dates and triggers for retesting do not have alerts.
    8. System Challenge: High Turnover – High turnover of staff contributes to insufficient training of staff and lower accuracy and efficiency rates.
    9. System Challenge: Incentive Policy – Less flexible policy implemented last year does not adequately assist Case Managers with motivating/engaging youth.
    10. System Challenge: Youth Services Policy – Recently revised policy may prevent Case Managers from engaging youth participants in other developmental activities which facilitate Literacy/Numeracy gains while simultaneously participating in work experience.
    11. Content/Program Challenge: Lack of Knowledge – Lack of knowledge of participants and staff/supervision about the program and its requirements
    12. Content/Program Challenge: Insufficient communication with and engagement of youth.
    13. Content/Program Challenge: Recruiting Additional Suitable Candidates – Ideal candidates who have greater chances for success have not been identified. Additionally, need to create a strong consistent referral process for individuals who are less suitable for the program.
18. Do members of the local WIB regularly review and address performance outcomes? If yes, describe the process for WIB review:

In the past, the local WIB members have been made aware of performance for the year on an annual basis; however, it is not clear that the relevance and consequences for failure to meet status has been clearly communicated. It appears as reflected in committee or board meeting minutes that WIB leadership was made aware that a corrective action plan written by the Executive Director had been implemented. Going forward, progress in Literacy/Numeracy Gains will be communicated to the Program Planning and Development Committee, Youth Council, Executive Committee and WPWIB Members on a monthly basis including months when no meeting is scheduled.

1. Describe the process used to ensure performance measures will be achieved through service providers, including one-stop service and youth program service providers:

On a monthly basis, Case Managers will provide WIB staff with Excel spreadsheets which contain tracking information for each participant. Lisa Frick will check against VOS records and discuss any mismatched records with the appropriate Case Manager. Training will occur on a quarterly basis and comprehension will be verified by several ways: quarterly Quality Assurance reviews, case manager/supervisor reviews and informal reviews by WIB staff, which will complement bi-annual monitoring by WIB staff and reviews by Audit Committee members.

1. Describe the process used to ensure that all staff (WIB and service provider staff) have been trained on required performance measures:

WIB staff and/or Program Planning and Development Committee and Youth Council as appropriate to ensure participation in the following:

* 1. Attendance at all state training opportunities
  2. Attendance at local training on a quarterly basis
  3. Participation in training as updates occur
  4. New hire training
  5. Mentoring/job shadowing
  6. Informal review of case files by supervisor, WIB staff and Quality Assurance Team
  7. Written comprehension of training document by each participant (spot check)

1. Does the WIB regularly analyze data to determine if performance measures are going to be achieved? If yes, what instruments are used and who gets information?

WIB staff and Board will review and analyze Literacy/Numeracy Gain spreadsheets on a regular basis. During committee and Board meetings, including Youth Council meetings, progress will be reviewed and analyzed and spreadsheets will be distributed to committees and the Board during months in which there is no meeting. Quarterly progress reports from VCCS will be reviewed and discussed during committee and Board meetings.

1. Does the WIB use additional local performance measures or interim indicators to identify issues that may affect performance results? If yes, please describe:

WIB staff and Board will review and analyze Literacy/Numeracy Gain spreadsheets on a regular basis. During committee and Board meetings, including Youth Council meetings, progress will be reviewed and analyzed and spreadsheets will be distributed to committees and the Board during months in which there is no meeting.

1. Describe the process used for ensuring the accuracy and integrity of data entered into the Virginia Workforce Connection (VOS):
   1. File, case manager and spreadsheet should be reviewed at the same time.
   2. Comparison of VOS with spreadsheet by Lisa Frick.
   3. Case managers are held accountable through their respective personnel policies.
   4. TABE results will be compared to VOS data to verify accuracy of paper test results to data entry.
2. Describe any areas or topics where technical assistance is needed:
   1. Written clarification as to participants in the system beyond the first year.
   2. Clarification between a progressive test and a post test.

**Section C - Action Plan**

*\*The WIB is required to provide a Performance Improvement Plan progress report to the WIA Program Administrator on a quarterly basis for the duration of the Performance Improvement Plan time period.*

**Performance Challenge Area 1** – Technical Challenge: TABE Testing - not completed often enough or certified testers are not accessible often enough.

**Goal**: To make TABE testing more accessible to participants to ensure frequent enough testing before participant disengages from program.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. All front line WIA staff will become TABE certified | 1. Funding for TABE certification at $25/person ($250.00) | 30 days from implementation of Literacy/Numeracy Plan | 1. Quality Assurance Team  2. All Youth Case Managers  3. Program Directors and Managers | 1. Consistently TABE youth participants at least every other month based on additional instruction  2. Report of tests given currently on a monthly basis added to Literacy/Numeracy Report. (Ask state if there is a report that shows the test given) |  |
| B. Form a rotating Quality Assurance Team made up of contractors, WIB staff, and WIB committee/board members | 1. Contractor staff time  2. WIB staff time  3. WIB committee/board time | Organization of team by October 31, 2013, and members will remain on team until end of PY 13.  Reviews will be conducted quarterly by the team. | 1. Lisa Fultz  2. Amanda Witt  3. Sonji Webb/Lisa Mullis/Diannia Belcher  4. Lisa Frick  5. Robbin Hall  6. Chris Pope  7. Quality Assurance Team (individuals listed above plus 4 case managers) | 1. Formation of a Quality Assurance Team with the purpose of reviewing and reduction of errors related to Literacy/Numeracy |  |
| C. Quality Assurance Team will conduct visits to review case files | 1. QA Team | Begin 1st visit by December 15, 2013 | Team TBD | 1. Visit 100% of LWIA sites within 1 year 2. Increase the number of Youth files reviewed per year by 50% 3. Reduce the number of findings from local and state audits by 50% 4. Create shared accountability from field staff to WIB level 5. Identification of and sharing of best practices |  |

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| D. Quality Assurance Team will review and evaluate instructional services |  | January 15, 2014 | Team TBD | 1. Review and evaluation of instructional services will be completed and appropriate recommendations will be made |  |

**Performance Challenge Area 2** – Technical Challenge: Tracking Literacy/Numeracy Gains - Gains in Literacy/Numeracy are not consistently tracked accurately (outside of VOS).

**Goal:** To consistently and accurately track Literacy/Numeracy gains on a monthly basis.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. Continue to input youth participants into Excel spreadsheet to be share with WIB staff member Lisa Frick by the 5th of each month for the previous month | 1. Case Managers  2. WIB Staff (Lisa Frick)  3. VCCS Staff (Raymond Cousins) | Currently incorporated in process and will utilize reports as a tool through remainder of PY 13 | 1. All Youth Case Managers  2. Lisa Frick | 1. Consistently administer TABE to youth participants at least every other month based on additional instruction  2. Report of tests given currently on a monthly basis added to Literacy/Numeracy Report. (Ask state if there is a report that shows the test given) |  |

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| B. WIB staff will verify spreadsheets for each contractor with VOS participant listing for any missing entries into the Excel spreadsheet before sending to VCCS | 1. Case Managers  2. WIB Staff  3. VCCS Staff | In practice since July 2013; continuous | 1. All Case Managers  2. Lisa Frick  3. Raymond Cousins | 1. Reduce missed anniversary date testing to zero due to tracking errors |  |

**Performance Challenge Area 3** – Technical Challenge: VOS/Data Entry Errors – Errors are due to lack of training, inconsistent data entry, personal performance.

**Goal:** To address the VOS changes and clarify questions raised through Quality Assurance Team.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. Conduct quarterly reviews by Quality Assurance Team and identify common errors | 1. Contractor staff time  2. WIB staff time  3. WIB committee/board time | Begin reviews by December 15, 2013 | 1. Lisa Fultz  2. Amanda Witt  3. Sonji Webb/Lisa Mullis/Diannia Belcher  4. Lisa Frick  5. Robbin Hall  6. Quality Assurance Team (individuals listed above plus 4 case managers) | 1. Identify common errors or misunderstanding of processes that can be addressed with the state for clarification or future training topics |  |

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| B. Schedule quarterly conference calls for technical support provided by VCCS.  (Quality Assurance Team to coordinate) | 1. VCCS staff  2. WIB staff  3. Contractors – all levels  4. Quality Assurance Team | Team will identify and request 1st conference call discussion by November 15, 2013 | 1. Raymond Cousins/Joe Holicky/Vicki Tanner/Brian Long  2. Lisa Frick/Kathy Barton  3. Quality Assurance Team | 1. Reduce the number of errors as identified by state audit team by 50% |  |

**Performance Challenge Area** **4** – Technical Challenge: Insufficient Review of Case Files through Internal Measures – An insufficient number of case files are reviewed through internal measures such as peer review.

**Goal**: Reduce errors and corrective actions as a result of findings during formal monitoring or auditing.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. Conduct reviews by Quality Assurance Team made up of contractors, WIB staff, and WIB committee/board members | 1. Contractor staff time  2. WIB staff time  3. WIB committee/board time | Begin conducting quarterly reviews by December 15, 2013 | 1. Lisa Fultz  2. Amanda Witt  3. Sonji Webb/Lisa Mullis/Diannia Belcher  4. Lisa Frick  5. Robbin Hall  6. Quality Assurance Team (individuals listed above plus 4 case managers) | 1. Conduct reviews in 100% of sites within 1 year  2. Increase the number of Youth files reviewed per year by 50%  3. Reduce the number of findings from local and state audits by 50%  3. Create shared accountability from WIB level to field staff  4. Dissemination of best practices |  |
| B. Develop a schedule for the Quality Assurance Team to review cases. | 1. Quality Assurance Team | QA Team will meet and develop schedule to conduct quarterly reviews by December 15, 2013 | 1. Lisa Fultz  2. Amanda Witt  3. Sonji Webb/Lisa Mullis/Diannia Belcher  4. Lisa Frick  5. Robbin Hall  6. Quality Assurance Team (individuals listed above plus 4 case managers) | 1. Increase the number of Youth files reviewed per year by 50%  2. Reduce the number of findings from local and state audits by 50%  3. Share accountability from WIB level to field staff by having representation from Case Managers, WPWIB Members, Youth Council on the Quality Assurance Team.  4. Disseminate best practices |  |
| C. Quality Assurance Team will obtain TABE Certification | 1. Quality Assurance Team | QA Team will obtain TABE certification by December 1 | 1. QA Team - TBD | 1. 100% of the Quality Assurance Team will becomeTABE certified |  |

**Performance Challenge Area 5** – System Challenge: Confusion regarding how to enter Literacy/Numeracy Gains in VOS and confusion regarding Out of School/In School Youth versus Older/Younger Youth data entry.

Goal: Capture Literacy/Numeracy Gains and participant data accurately.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. Develop outline for training program | 1. Case Managers  2. WIA Management  3. WIB staff | Develop outline by October 31, 2013 | 1. Kristi Curry to circulate outline with feedback from all by October 25, 2013 | 1. Create an outline of training topics around which an intensive training program can be developed and make available to all |  |
| B. Develop intensive training program for new staff (30 to 60 days as needed). Experiences will include job shadowing (30 days). | 1. WIB staff  2. WIA Management  3. Case Managers (Job Shadowing) | Develop Intensive Training Program by January 2014, and implement use immediately upon completion | 1. Lisa Frick/Kathy Barton  2. Sonji Webb/Lisa Mullis/Diannia Belcher/Kristi Curry  3. Robbin Hall | 1. Ensure consistent, comprehensive training for all new staff to attain basic level of training within 30 to 60 days. |  |
| C. Schedule and provide follow up local training on quarterly basis (Adjust as needed) | 1. WIB staff  2. WIA Management | Schedule by November 15, 2013. | 1. Lisa Frick/Kathy Barton  2. Sonji Webb/Lisa Mullis/Diannia Belcher Kristi Curry  3. State Workforce Team | 1. Provide at the local level at least 4 times a year so that Case Managers receive training and have opportunities to share best practices.  2. Provides continuous improvement opportunities with engagement from Case Managers, Provider Management, WPWIB staff and WPWIB leadership |  |
| D. Create sign off sheets for each training event and obtain sign off from participant indicating that he/she comprehended the covered information | 1.WIB Staff  2. WIA Management | November 15, 2013 | 1. Lisa Frick/Kathy Barton  2. Sonji Webb/Lisa Mullis/ Diannia Belcher/Kristi Curry | 100% participation in training activities |  |
| E. Require training participants to write report on what was learned during each state sponsored training event and share with the group | 1. All Attendees | December 15, 2013 | 1. All Attendees | 1. Written documentation placed on WIB web site for all to review and reference  2. Verification of comprehension of key points of training by participants |  |
| F. Coordinate meetings or conference calls (as needed) between Quality Assurance Team and State (Raymond Cousins/Joe Holicky for intensive training | 1. Quality Assurance Team | Quality Assurance Team will meet to identify contact team leader who will facilitate training/conference calls on behalf of the group. If applicable, coordinate 1st conference call schedule by November 15, 2013 | 1. Team TBD | 1. Receive clarification on complex issues |  |
| G. Quality Assurance Team will develop communication process for sending information to field staff regarding policy changes from federal, state, and local level | 1. Quality Assurance Team | 1. By November 15, 2013 | 1. Team TBD | 1. 100% of staff will acknowledge awareness and understanding of policy changes through written confirmation |  |

**Performance Challenge Area 6** – System Challenge: Supervision – current structure/process does not create a culture of personal or management accountability.

**Goal:** Implement Performance and Accountability Measures for self, immediate supervisors, WIA management and WIB.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. Create Performance and Accountability System with clear consequences for not meeting performance measures or team contribution | 1. WIB staff  2. Youth Council  3. Providers | December 15, 2013 | 1. Lisa Fultz/Lisa Frick/Kathy Barton | For all levels to understand where we are as a LWIA versus 52% minimum Literacy/Numeracy Gain goal and consequences for not meeting expectations |  |
| B. Review a minimum of 3 case files for Literacy/Numeracy compliance with supervisor every 6 weeks | 1. WIA Management  2. Case Managers  3. WIB staff | 1. Begin reviewing files by December 15, 2013 | 1. Sonji Webb/Lisa Mullis/Diannia Belcher  2. Lisa Frick/Kathy Barton | 1. Reduce the number of errors identified in a local or state audit by 50% |  |
| C. Require Case Managers to provide monthly reports of new enrollments, workshops with youth participants, community involvement, etc. and share with WIB and Youth Council in advance to facilitate opportunities for engagement | 1. Case Managers | 1. Began October 5, 2013, and will be ongoing | 1. Case Managers | 1. 100% of case managers will provide monthly report of Youth Activities that are being provided.  2. 100% of case managers will shareactivities that are being provided for elective engagement or involvement as a means of increasing awareness to WIB and Youth council members |  |
| D. Implement an Open Communication System on website by which information, suggestions, and issues may be shared at all levels. Information will be hosted on website (Funding approval and RFP process involved) | 1. WIB Staff  2. Marketing Committee  3. Web Developer | 1. March 1, 2014 (timeline may need to be adjusted due to WIB approval process) | 1. Lisa Fultz  2. Marketing Committee | 1. 100% of staff will be surveyed to determine use and effectiveness of website |  |

**Section C - Action Plan (continued)**

*\*The WIB is required to provide a Performance Improvement Plan progress report to the WIA Program Administrator on a quarterly basis for the duration of the Performance Improvement Plan time period.*

**Performance Challenge Area 7** – System Challenge: Staff Not Retesting – Anniversary dates and for retesting do not have automatic alerts.

**Goal:** Staff to receive alerts which will enable them to retest on at least a bimonthly basis.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. Continue to input youth participants into Excel spreadsheet to be share with WIB staff member Lisa Frick by the 5th of each month for the previous month | 1. Case Managers  2. WIB Staff (Lisa Frick)  3. VCCS Staff (Raymond Cousins) | 1. Already in progress and will continue. | 1. All Youth Case Managers  2. Lisa Frick | 1. Track anniversary dates to ensure TABE retesting occurs byrequired timeline |  |
| B. Add TABE testing reminders to Outlook Calendar | 1. Case Managers | 1. Immediate | 1. Case Managers | 1. Tracking anniversary dates to ensure TABE retesting by required timeline |  |
| C. Create Calendar and Schedule for a re-TABE date each month; have regular testing schedule and rotate tester (this is in addition to other staff testing that is ongoing) | 1. WIA Management  2. Case Managers | 1. December 15, 2013 | 1. Sonji Webb/Lisa Mullis/Diannia Belcher  2. Case Managers as assigned | 1. Provide regularly scheduled TABE testing on a monthly basis throughout the region for participants which will complement other testing opportunities |  |

**Performance Challenge Area 8** – System Challenge: High Turnover – High turnover of staff contributes to insufficiently trained staff and lower accuracy and efficiency rates.

**Goal:** Track turnover and reduce turnover of WIA staff.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. Determine current and historical turnover rate | 1. WIA Management  2. WIB staff | Collect and analyze data by December 15, 2013 | 1. PCCA Human Resources 2. Lisa Fultz | 1. Collect and analyze turnover rate for Out of School Youth Case Managers for the last 2 years |  |
| B. Conduct Exit Interviews as part of organization’s human resources process  (Note: Patrick County Schools does not currently conduct exit interviews) | 1. WIA Management  2. WIB staff  3. WIB committees/board | 1. Already in progress for PCCA. | 1. PCCA Human Resources  3. Lisa Fultz  4. Robbin Hall | 1. Identify and document reasons for leaving  2. Determine trends as a means for addressing future employment issues |  |

**Performance Challenge Area 9** – Youth Services Policy – Recently revised policy may prevent Case Managers from engaging youth participants in other developmental activities which facilitate Literacy/Numeracy gains while simultaneously participating in work experience.

Goal: To review Youth Services Policy and recommend changes to facilitate success for youth participants while meeting performance measures.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. Review for Youth Services Policy to determine if it facilitates Literacy/Numeracy gains | 1. Case Managers  2. WIA Management  3. WIB Staff  4. Program Planning & Development Committee and other WIB committees and Board as appropriate | 1. December 30, 2013 | 1. Youth Case Managers  2. Sonji Webb/Lisa Mullis/ Diannia Belcher  3. Lisa Frick/Lisa Fultz/Kathy Barton  4. Robbin Hall  5. WIB Leadership as appropriate | 1. Make Amendments to policy to facilitate success for youth participants while meeting performance measures if needed |  |

**Performance Challenge Area 10** System Challenge: Lack of Knowledge – Lack of knowledge of participants and staff/supervision about the program and its requirements creates a mismatch between enrolled participants and candidates more likely to remain engaged and succeed in the youth program.

Goal: To have more informed participants and staff/supervision who can successfully assess suitability in the youth program to increase successful employment outcomes and career paths for participants.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. Develop and providean effective regional Youth Orientation Program covering the following:   * The 10 program elements * Common Measures * Eligibility Requirements * Parent/Stakeholder buy in (with signature) if youth participant is under 18 | 1. Youth Case Managers  2. WIA management  3. WIB staff  4. Youth Council Members | 1. January 15, 2014 | 1. All Youth Case Managers  2. Sonji Webb/Lisa Mullis/ Diannia Belcher  3. Lisa Frick  4. Conrad Smith/Robbin Hall or appointee | 1. 100% of youth and guardians will attend the orientation program (if applicable) |  |
| B. Establish a Literacy/Numeracy Plan within the ISS for each new participants upon enrollment which includes structured activities to enhance Literacy/Numeracy and assessment deadlines with review from Supervisors | 1. Case Managers  2. WIA Supervisors  3. WIA Management  4. WIB staff (support as needed) | 1. November 1, 2013 | 1. All Case Managers  2. WIA Supervisors  Sonji Webb  3. Lisa Mullis  4. Lisa Frick (as needed for support) | 1. 100% of participants will have a customized Literacy/Numeracy Plan to facilitate Literacy/Numeracy gains |  |

**Performance Challenge Area 11:** Content/Program Challenge: Insufficient communication with and engagement of youth.

Goal: To increase effective communication with youth to recruit and retain youth in the program until successful exit.

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| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. Assess current communication methods/strategies with youth including outreach | 1. Case Managers  2. WIA Supervisors  3. WIA Management  4. WIB Staff  5. Youth Council | 1. January 14, 2013 | 1. All Youth Case Managers  2. Sonji Webb/Lisa Mullis/ Diannia Belcher  3. WIA Supervisor  4. WIB Marketing Committee  5. Lisa Frick  6. Lisa Fultz  7. Conrad Smith/Chris Pope | 1. Develop writtendocumentation of current methods and strategies  2. Examine possibility of integrating technology into communication plan |  |
| B. Develop a comprehensive, creative communication plan for existing and potential youth participants, incorporating best practices from other WIBs | 1. Case Managers  2. WIA Supervisors  3. WIA Management  4. WIB staff  5. WIB Marketing Committee  6. Youth Council  7. Funding for outreach | 1. March 2014 | 1. All Youth Case Managers  2. Sonji Webb/Lisa Mullis/ Diannia Belcher  3. WIA Supervisor  4. WIB Marketing Committee  5. Lisa Frick  6. Lisa Fultz  7. Conrad Smith/Chris Pope | 1. Have a writtencomprehensive plan for communication with Youth |  |