**Local Performance Improvement Plan:**

**Contracted Provider: \_\_\_\_\_\_**Henry County Public Schools**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Program: \_\_**Youth In School**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Adult, Dislocated Worker, Youth Out of School, Youth In School)

**Area: \_**Henry County **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Danville, Martinsville, Patrick County, Pittsylvania County, Henry County)

**Purpose**

The purpose of this plan is to provide a description of how the service provider will improve enrollment numbers and deliver an increased number of services to our clients while adhering to prescribed performance obligations. In order to successfully complete the mission of the West Piedmont Workforce Investment Board, and to meet the performance measures mutually agreed upon by the WPWIB and the service provider, a dramatic increase in client enrollment and the provision of services is needed. This plan will detail measures that will be pursued by the service provider to identify and enroll new clients, and the plan for their enrollment in intensive program services. Documentation of each activity must be provided to the WPWIB each month by the 5th of the month. Electronic submissions are acceptable and should be sent to Lisa Fultz at lfultz@wpwib.org with “PIP “Program Name”, “Locale” – “Provider Name”.

**Technical Assistance**

If a Contracted Provider requests assistance from the WPWIB, the WPWIB will make technical assistance available. Technical assistance can include meetings, additional training on matters related to performance measures, outreach strategic support and assistance with data analysis.

**Reporting Requirements**

The Contracted Provider is required to provide a Performance Improvement Plan progress report to the WPWIB Executive Director on a monthly basis for the duration of the Performance Improvement Plan time period. The report format is included in Attachment D. Documentation of each activity must be provided to the WPWIB each month by the **5th of the month** for the previous month. Electronic submissions are acceptable and should be sent to Lisa Fultz at lfultz@wpwib.org with “PIP\_ “Program Name”\_”Locale” – “Provider Name”\_”Date”. For example, Henry County Youth In School report submitted March 5th would be named PIP Youth In Henry County 03052014.

1. **Client Identification and Enrollment Plan:** In this section, the service provider will describe their plan for identifying and enrolling new clients into the program. Outreach related to program services and options is a major component of this section. The provider should detail the manner in which potential enrollees will be identified, retained and served by the program. Providers must address this area if enrollment is below 50% of contracted level. Processes for ensuring measurements are met should be clearly described. This section should involve input from both case managers as well as the management team.
2. **Client Service Funding Plan:** In this section, the service provider will outline the manner in which direct client expenses will be utilized. Processes for ensuring measurements are met should be clearly described. Currently, many providers are under budget for expenses directly servicing clients. If this trend continues, our region could experience a significant reduction in allocations for the next Program Year.
3. **Service Provider Obligations/Measures:** In this section, the service provider will be given an opportunity to explain the manner in which staff and the management team will ensure that common measures are met. The service provider will outline how the organization will provide exceptional services to participants. Processes for ensuring measurements are met should be clearly described.

**Attachment B - Analysis of Contributing Factors**

1. Identify the specific issues that contributed to the less than 50% outcome for **each** applicable item for this program year from the attached Excel spreadsheet, **Attachment**
	1. **Work Experience/Internship –** Work experience and internships mainly take place within the spring and summer.
	2. **Other Supportive Services** - HCPS provides grade incentives for students and Goodwill vouchers to students. Incentives and vouchers are purchased as needed throughout the year.
	3. **Comprehensive Guidance/Counseling** – N/A
	4. **Leadership Development –** Leadership Development activities had no associated cost. The activities consisted of classroom presentations and a community service event. However, students did receive incentives, such as gift cards, for participating in leadership development activities.
	5. **Tutoring** – HCPS staff has offered and encouraged tutoring services to participants; however, students have declined services. Students are also involved in remediation tutoring.
	6. **Follow-up** – During the 2013-2014 school year, new staff was hired to handle follow-up. New employee completed follow-up during through January 31st to become acclimated with students before planning workshops. Job Readiness Workshops have been planned for the spring.
	7. **Training Services** – N/A
	8. **Occupational Skills Training** - Through Jan. 31st, there has been no need for occupational skills training by participants.
	9. **Alternative Secondary School –** N/A
	10. **Mentoring –** HCPS Staff meets with individuals on a regular basis to mentor. There is no associated cost.
2. Does the Contracted Provider regularly review and address performance and budget progress? If yes, describe the **process** for used for review:

The Contracted Provider does regularly review and address performance and budget progress. First, HCPS WIA staff is evaluated yearly using the Teacher Evaluation. The purpose of the teacher evaluation is to promote assessment, feedback, and improvement of performance. The staff is evaluated on the following performance standards: professional knowledge, instructional planning, instructional delivery, assessment of and for student learning, professionalism, and student progress. Documentation logs and student surveys are required documentation. Evaluations are assessed at the beginning, middle, and end of each school year. Furthermore, staff constantly updates Contracted Provider with information concerning enrollment and activities.

1. Describe the **process** used to ensure performance measures, enrollment and utilization of budget expenses for direct client services will be achieved by June 30, 2014:

**Performance Measures:**

WIA Staff will implement Career Readiness Certificate training and encourage CRC testing for senior participants and recent graduates. Furthermore, we will continue to aid students in finding employment and enrolling in post-secondary education. We will offer gas card incentives to graduates and students in follow-up in order to help with job search and employment.

**Enrollment:**

The Henry County Public Schools’ Youth on the Program is contracted to enroll 70 participants by June 30, 2014. To date, HCPS has enrolled 25 new participants from Bassett High School, Center for Community Learning, Magna Vista High School, and Martinsville High School. WIB Staff have met several challenges concerning enrollment. Some of these challenges include SOL testing and snow days. Within the month of January, Henry County Public Schools had nine snow days. This month (February), we have already missed three days due to snow and have been delayed two days. Furthermore, the students were not in school during the dates of December 23rd – January 3rd due to Winter Break.

 Currently, Youth on the Move staff has utilized several recruitment strategies, including the following:

August 5th- 9th: Distributed flyers and brochures to local organizations and businesses

August 6th = HCPS Counselor’s meeting

August 9th: Meeting with HCPS Coordinator of Student Services and Special Education Coordinator

September 3rd: MHS Counselors’ meeting

September 9th: Mailed letters to prospective students

September 25th: Tabled at MVHS

October 3rd: Tabled at BHS

October 25th: MHS ISAEP meeting

November 6th: Tabled at MHS Career Fair

November 25th: Regional Alternative meeting

WIA staff has also built rapport with the Department of Social Services, Department of Juvenile Justice, and Piedmont Community Services. Furthermore, on a daily basis, WIA staff meet with potential students who have been referred by Guidance Counselors or school faculty. WIA staff also utilizes PowerSchool reports to identify students who are eligible for the program. Students are provided with information concerning the program and are provided with assistance completing the applications. Within the month of February, the Peer Referral Program will be implemented. The Peer Referral Program engages current participants into the growth of the HCPS Youth on the Move program. Current participants are asked to submit the names of at least three potential participants for the program. If at least one of their referred names enrolls into the program, the current participant receives an incentive. The main objective of the Peer Referral Program is to encourage current participants to take ownership of the program, while recruiting new participants.

**Utilization of Budget:**

YOTM Staff provide monthly budget updates to Contract Provider and WPWIB. A tentative schedule of planned activities and their estimated costs are as follows:

* April
	+ Uptown Business Stroll & Lunch
		- Est. Cost: $300 (incentives & lunch)
	+ Visit to Virginia Museum of Natural History
		- Est. Cost:$250 (admission & incentives)

* May
	+ Graduate Banquet
		- Est. Cost: $750 (incentives & food)
	+ Work Experience Orientation
		- Est. Cost: $250 (food)
* June
	+ Ferrum College Visit
		- Est. Cost : $500 (transportation, lunch, incentives)
	+ Follow-up Resume Workshop
		- Est. Cost: $450 (resume paper, lunch, jump drives)
	+ Work Readiness Workshop
		- Est. Cost: $250 (food & incentives)
1. Describe the **process** used to ensure that all staff have been trained on required performance measures:

All WIA staff have been trained by WIB staff and have attended all required meetings and trainings. All questions concerning performance measures are directed to WIB Staff.

1. Does the Contracted Provider use additional interim indicators to identify issues that may affect performance results? If yes, please describe:

N/A

1. Describe the process used for ensuring the accuracy and integrity of data entered into the Virginia Workforce Connection (VOS):

Students’ are required to sign logs after completing work readiness and leadership development. They are also required to sign after receiving any incentives or vouchers. WIA staff try to enter data as soon as possible after meeting with students.

1. Describe any areas or topics where technical assistance is needed:

N/A

**Attachment C - Action Plan**

*\*The Contracted Provider is required to provide a Performance Improvement Plan progress report to the WPWIB Executive Director on a monthly basis for the duration of the Performance Improvement Plan time period.*

Performance Challenge Area I - \_\_\_\_\_\_Enrollment\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| 1. Peer Referral Program
 | 1. Incentives2. 3. | Ongoing | 1. Case Managers2.3. | 1. Increase in enrollment2. Increase in referrals3. |  |
| 1. PowerSchool Reports
 | 1. Powerschool2. 3. | Ongoing | 1. Case Managers2.3. | 1. Increase in enrollment2. 3. |  |
| 1. Counselor referrals
 | 1. n/a2.3. | Ongoing | 1. Case Managers2. H.S. Counselors3. | 1. Increase in enrollment2. Increase in referrals3. |  |

Performance Challenge Area II - \_\_\_Budget\_\_Utilization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| 1. Follow-up
 | 1. Incentives2. Guest Speaker 3. Supplies | June 2014 | 1. Case Managers2.3. | 1. Increased follow-up participation2. Work Readiness3. |  |
| 1. College Visit
 | 1. Transportation2. Incentives3. Lunch | June 2014 | 1. Case Managers2.3. | 1. Leadership Development2. 3. |  |
| 1. Uptown Business Tour & Lunch
 | 1. Incentives2. Lunch3. Uptown businesses | April 2014 | 1. Case Managers2. 3. | 1. Work Readiness2. Leadership Development3. |  |

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

*\*The Contracted Provider is required to provide a Performance Improvement Plan progress report to the WPWIB Executive Director on a monthly basis for the duration of the Performance Improvement Plan time period.*

Performance Challenge Area III - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. | 1.2.3. |  | 1.2.3. | 1.2.3. |  |
| B. | 1.2.3. |  | 1.2.3. | 1.2.3. |  |
| C. | 1.2.3. |  | 1.2.3. | 1.2.3. |  |

Performance Challenge Area IV - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Activity | Resources Required | Timeline | Responsible Party | Intended Outcomes | *Progress Report\** |
| A. | 1.2.3. |  | 1.2.3. | 1.2.3. |  |
| B. | 1.2.3. |  | 1.2.3. | 1.2.3. |  |
| C. | 1.2.3. |  | 1.2.3. | 1.2.3. |  |

**Submitted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name and Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**