



Policy Letter #13

TO: All Staff
FROM: Mid-Carolina Workforce Development Staff
SUBJECT: Supportive Service Policy

PURPOSE

The purpose of this policy is to provide Workforce Innovation and Opportunity Act (WIOA) standards and guidelines related to Supportive Services, to include Needs-Related Payments emergency funding.

BACKGROUND

WIOA defines supportive services in Sec. 3(59) as services, such as transportation, housing, and needs-related payments, that are necessary to enable an individual to participate in activities authorized under WIOA. Supportive Services for Adults and Dislocated Workers are further referenced in WIOA Secs. 134(d)(2), (3) and 20 CFR 689.900 through 689.970 and for WIOA eligible Youth in Sec. 129(c)(2)(G) and are governed by 20 CFR 681.570 through 681.580.

Note: Child Care and Dependent Care are Supportive Services that require specialized authorization from the Director.

To receive supportive services, participants must be receiving staff assisted career services and participating in employment and/or training activities. There must be a direct connection between the supportive services offered and the activity in which the participant is participating (case notes for justification). Youth may also receive supportive services while in follow-up services (20 CFR 681.580). The supportive services provided must be allowable, reasonable, and not otherwise available to the participant.

Services such as books and training supplies, educational testing, fees for applications, test and certifications, medical and counseling services, work attire/related cost, workplace accommodations, and transportation assistance (i.e., mileage reimbursement, bus pass), do not require pre-approval from the local board.

Supportive Services are not entitlements and must be supported by the demonstration of financial need, which means that although a participant may be eligible for supportive services, they do not have an unrestricted right to such services. Funds used for supportive services should be utilized in a manner that ***avoids duplication*** of services and must be leveraged with all other resources, including funding from private, community, and faith-based organizations. All supportive services should be considered individually as a unique request, based on individual participant need. All supportive services must be documented in the Individual Employment Plan (IEP)/Individual Service Strategy (ISS), Objective Assessment, and NCWorks case notes.

PAYMENTS ARE NOT ALLOWED FOR:

- Assistance in paying for expenses refundable to the participant
- Titled or deeded items or when recovery of the expense is anticipated Examples include: Rent or housing deposits, mortgage payments, homeowners insurance, property taxes, car payments, purchase of vehicles
- Expenses incurred prior to enrollment or after participation in a WIOA program

- Business start-up costs
- Internet or phone service (prepaid, plan, minutes, etc.) or memberships of any kind
- Membership fees
- Court ordered fines, fees, or similar items

Procedure

Coordination of resources must be documented in the Individual Employment Plan (IEP) or Individual Service Strategy (ISS). The documentation should address:

- Supportive Services needs and justification
- Coordination process used and the outcomes
- Referrals provided
- Length of time Supportive Services is anticipated to be needed

All supportive services may be administered in-person or virtually. When administering supportive services virtually, special emphasis on employing additional strategies to eliminate the possibility of fraud must be implemented and documented.

Supportive Services

Supportive Services may only be provided to participants when it is necessary to enable individuals to participate in services tied to a specific training. Such needs are to be identified through the assessment process and outlined in the Individual Employment Plan/Individual Service Strategy.

Supportive service are payments made on behalf of eligible participants as required to support the individual's employment plan.

The participant's eligibility related to the service must be documented in the case notes. This justifies the recommendation from the career advisor/program manager. The program manager is responsible for reviewing and approving the voucher, and to ensure all required documents are completed and legible before being uploaded to the NCWorks Online.

- **Books and Supplies for Training**
Funding utilized to assist a participant attending WIOA approved postsecondary education classes with books, fees (e.g., matriculation, background check, finger printing, etc.), school supplies and other necessary items related to their education.
- **Educational Testing**
Funds may be utilized to assist a participant with the cost of an exam or educational test to enable them to advance along a career or educational pathway (e.g., ACT exams, high school equivalency exams, NCLEX exam, and LPN exams, etc.).
- **Fees for Applications, Tests, and Certifications**
Funds may be utilized to assist a participant with the cost of an application, exam or educational test to enable them to advance along a career or educational pathway (e.g., fees for postsecondary applications, re-licensing, drivers' license, background checks finger printing, etc.).
- **Medical and Counseling Services**
Participants in need of medical or counseling services should be referred to other community medical resources if applicable. The career advisor must ensure WIOA Title I funds are not duplicated medical assistance from another source. Supportive service funds may be utilized to assist a participant with the cost of DOT physicals, drug screens, required immunizations, dental, ophthalmologist, drug and alcohol, mental health and behavioral counseling.

- **Work Attire and Related Costs**

Funding utilized to assist a WIOA participant in proper attire for obtaining or maintaining employment, inclusive of tools.

- **Workplace Accommodations**

Funds may be utilized to assist a participant who needs workplace accommodations to enable them to participate in employment, training, education, work experience, job service office services or job screening. **WIOA Title I funds must not duplicate funds provided by another source.** A referral to Vocational Rehabilitation may be appropriate and should be documented in case notes.

- **Transportation Assistance**

Transportation assistance may be provided to participants who are engaged in career services or training activities and their income meets the Lower Living Standard Income Level which is determined during the completion of the WIOA application.

Bus Pass Assistance may be provided to assist the participant to get to employment, training, education, work experience, job service, job search or other places that support WIOA activities in the Employment Plan.

- Mileage determination (distance) of the amount allowable for WIOA assistance is determined based from the participant's home to their destination and back (roundtrip), which is confirmed by <http://www.googlemaps.com> or <http://www.mapquest.com>; this documentation must be included with the voucher for review and approval by the service provider.

- The travel reimbursement rate is up to \$10.00 per day not to exceed \$50.00 per week. Career Advisors will utilize the "Bi-Weekly attendance voucher" when reimbursing transportation cost to participants. Mileage reimbursement is paid directly to the participant in accordance with the payment scheduled set by the service provider. If another person provided transportation, they are required to complete and sign the mileage reimbursement form and reimbursement is paid to that individual.
- The Bi-Weekly Attendance Form (attachment A) must be submitted to the Career Advisor in accordance with the Bi-weekly Payroll schedule. The training institution(s) are responsible for certifying the daily time and attendance records of each participant. Periods of absences must be noted on the Bi-Weekly Attendance Form. Participants will not be paid for any absences as the payments are designed to assist them only for the days, they attend training. A travel map (i.e. MapQuest or Google Map) must be submitted for each travel reimbursement request.
- Participants enrolled in on-the-job training and work experience are allowed to receive transportation assistance until the participant receives his/her first paycheck.
- In the event the participant does not have his or her own transportation, a monthly bus pass may be issued while the participant is enrolled in a training activity. A bus pass can also be issued to a work experience participant until he/she receives their first paycheck.

Child Care/Dependent Care Assistance

- Child/Dependent care assistance may be provided to participants who are attending school full time and are enrolled in WIOA activities.

- Child/Dependent care assistance will be at a rate that is considered usual, reasonable and customary with this geographical area and will be paid directly to the provider.
- Child/Dependent care assistance will be provided only for the days the participant is participating in a WIOA activity. Payments for childcare may be required by the Day Care Provider to maintain space for the child even when the child is not in attendance; if this is the policy of the childcare provider, verification for such policy must be included in the supportive services request.
- Career Advisors will maintain adequate documentation to support child/dependent care costs. ***The participant will be responsible for any late fees.***
- Career Advisors are required to contact the Department of Social Services to prevent duplication of services. A detailed response should be case noted in NCWorks Online.
- A written request must be submitted to the Mid-Carolina WDB Director. The request should include the following documentation: participant's name, dependent's name and relationship to WIOA participant, and training program. Approval will be contingent on the availability of funds and as has been deemed necessary by the Mid-Carolina WDB Director. Written approval must be uploaded into NCWorks Online.
- Reference Day Care Procedures (attachment B).

Termination of Supportive Services

- Participant indicates he/she is no longer in need of assistance.
- Participant has exited from training.
- Participant forges signatures or intentionally misrepresents activities he/she participated in.
- Participant becomes eligible for assistance from another agency.
- Participant fails to submit timesheets or other required documents required by their Career Services Manager.

Right To Reduce Or Eliminate Supportive Services

The Mid-Carolina Workforce Development Board reserves the right to reduce or eliminate WIOA-funded supportive services in the event funding is reduced or other budgetary constraints exist.

REFERENCES

OG 18-2021: Workforce Innovation and Opportunity Act (WIOA) Supportive Services Guidance

ATTACHMENT



Attachment A: Bi-Weekly Attendance Form
 Attachment B: Day Care Procedures
 Attachment C: Resource Worksheet
 Attachment D: Purchase Authorization Form

CREATION DATE

July 2022

REVISION DATE

January 2024
 December 2024
 June 2025

	NORTH CAROLINA DEPARTMENT OF COMMERCE DIVISION OF WORKFORCE SOLUTIONS
	DWS Operational Guidance Number: OG 18-2021, Change 1
	Date: August 10, 2023
	Subject: Workforce Innovation and Opportunity Act (WIOA) Supportive Services Guidance
	From:  Chet Mottershead Assistant Secretary for Workforce

Purpose: To provide guidance on the use of WIOA funds for supportive services to eligible participants enrolled in WIOA Title I Adult, Dislocated Worker, and Youth programs.

This change provides updated guidance on the provision of food as a supportive service and the inclusion of supportive services expenditures as an allowable cost for the youth work experience requirement, based on Training and Employment Guidance Letter (TEGL) 09-22, which was issued on March 2, 2023.

This Operational Guidance (OG) rescinds OG 18-2021 and the procedures herein supersede all previous policy, procedures, and guidelines regarding WIOA supportive services.

Background: The WIOA defines supportive services in Sec. 3(59) as services, such as transportation, childcare, dependent care, housing, and needs-related payments, that are necessary to enable an individual to participate in activities authorized under this Act. Supportive services for Adults and Dislocated Workers are further referenced in WIOA Secs. 134(d)(2), (3) and 20 CFR §§ 689.900 through 689.970 and for WIOA eligible Youth in Section 129(c)(2)(G) and are governed by 20 CFR §§ 681.570 through 681.580.

TEGL 09-22 states that supportive services that enable WIOA participants to participate in work experience can now count toward the work experience expenditure requirement. Supportive services allow participants to persist in and complete program activities and are vital ingredients in youth success, therefore supportive services are now an allowable work experience expenditure.

In addition, on a limited basis and in certain situations, food at a reasonable cost may be provided to youth program participants as a supportive service. Food may be provided to eligible youth when it will assist or enable the participant to participate in allowable youth program activities and to reach his/her employment and training goals, thereby achieving the program's overall performance goals. Local Area Workforce Development Boards (WDBs) should have written policies and procedures in place for purchasing and distributing food to ensure consistent treatment of these types of expenses. When developing written policies and procedures, please review the Uniform Guidance at 2 CFR § 200.403.

To receive supportive services, WIOA participants must be receiving staff assisted career services and participating in employment and/or training activities. There must be a direct connection between the supportive services offered and the activity in which the participant is participating. Youth may also receive supportive services while in follow-up services (20 CFR § 681.580). The supportive services provided must be allowable, reasonable, and not otherwise available to the participant.

Supportive services are not entitlements and must be supported by the demonstration of financial need. Funds used for supportive services should be utilized in a manner that avoids duplication of services and must be leveraged with all other resources, including funding from private, community, and faith-based organizations.

Action:

Local Area WDBs and sub-recipients must be aware of and follow all federal, state, and local requirements for the provision of supportive services funded by WIOA resources. Supportive services policies and procedures must be in place that include guidance to help detect and prevent fraud, program abuse, and criminal activities.

Local Area WDB Supportive services policies should be revised to include the provisions reflected in TEGL 09-22. The Division of Workforce Solutions encourages Local Area WDBs to work with surrounding WDBs to establish similar or consistent supportive services policies to provide consistency to customers across the state.

All supportive services may be administered in-person or virtually and must be documented in the Individual Employment Plan (IEP), Individual Service Strategy (ISS), Objective Assessment, and NCWorks.gov case notes. When administering supportive services virtually, Local Area WDBs must place special emphasis on employing additional strategies to eliminate the possibility of fraud.

Local Area WDBs should distribute this guidance to all appropriate parties involved in WIOA service delivery.

Effective Date: Immediately

Expiration: Indefinite

Contact: DWS Planner



Bi-Weekly Class Attendance Sheet

Participant's Name: _____ SSID: _____ Career Advisor: _____

Participant's Address: _____ School or Company Name: _____

_____ Curriculum: _____

Participant's Phone: _____ CITY _____ STATE _____ ZIP _____ Training Period from Sunday: _____ Thru Saturday: _____

PARTICIPANTS INSTRUCTIONS FOR USE

1. **PRINT** in All information above. The training period covers two calendar weeks.
2. **LIST** the courses or jobs for the training period covered for this attendance report.
3. **INDICATE** the number of hours attended for each day for every course or occupational activity attended.
4. **RECORD** the hours to the nearest ½ hour increment; example: 1.40 = 1.5 or 55 minutes = 1 hour.
5. **CALCULATE** the number of hours attended for each column and each row.
6. **SIGN** and **DATE** in the space provided for "Participant's Signature" below.
7. **PRESENT** to instructor(s) or trainer.
8. **SUBMIT** or **RETURN** your completed attendance report to a pre-designated location.

TRAINERS INSTRUCTIONS FOR USE

1. Please **INITIAL** any corrections or changes made in the daily attendance columns.
2. Please **SIGN** on the Trainer's Signature line(s) to certify days of attendance reported for this period.
3. Please **RETURN** the attendance report to the participant upon completion for submission.

	S	M	T	W	TH	F	SA	S	M	T	W	TH	F	SA	TOT	TRAINERS SIGNATURE
DATE																
COURSES																

I certify that I attended the training on the date(s) indicated above, and I confirm that the attendance record is accurate.

Participant's Signature

Date

TRAINER INFORMATION

Name: _____

Contact Number: _____

Email Address: _____



Daycare Procedures

1. Participants must submit a written request that demonstrates a dire need and have exhausted/been denied all other means of support from a partner agency.
2. The participants should submit the denial letter from a partner agency, along with the completed form with daycare information and fee chart for services needed.
3. Verify that the daycare is a state-licensed facility. The NC Division of Child Development website at www.ccpfc.org will provide a list of licensed facilities.
 - a. Click on "search for a childcare facility."
 - b. Click or type the name of city or county and click submit.
4. Prepare requests for childcare assistance for the Director to approve.
5. Once approved, send the following to the daycare provider:
 - a. The original ITA
 - b. W-9 form
 - c. Example of invoice and daycare attendance sheets

Place in the client's file:

- a. Copy of ITA
 - b. The original approval memorandum
 - c. The completed childcare request form
 - d. Fee chart
6. Contact the daycare to verify vendor status. Contact the applicable Finance Department to verify they are on the vendor list. If not, submit the completed W-9 form to the applicable Finance Department.
7. The daycare provider should submit monthly invoices and attendance sheets for each child in the first week of each month.
8. Check the invoice and attendance sheet for completion. Check the client's bi-weekly entitlement form to verify the client is attending classes.
9. Forward invoice and daycare attendance sheets to the applicable Finance Department to process payment.
10. Written Authorization is granted by the Director of the Local Workforce Development Board



Resource Worksheet

MONTHLY INCOME		MONTHLY EXPENSES	
Personal		Rent/Mortgage	
Spouse/Partner		Electricity	
Other Family Members		Heating	
Child Support		Water/Garbage/Sewage	
Social Security		Telephone	
Maintenance/Alimony		Monthly Auto Payment	
Retirement		Daycare	
Workers Compensation		Medical Insurance/Medical Expenses	
Unemployment Insurance		Monthly Credit Card Payment	
Public Assistance (TANF, Food Stamps, etc.)		Monthly Loan Payment	
Trade Adjustment Allowance		Food	
Other		Clothing	
		Fuel	
		Public Transportation	
		Other	
Total Monthly Income (A)		Total Monthly Expenses (B)	
BALANCE/DEFICIT (A-B)			
Monthly		Weekly	
Weekly Training Expense			
Weekly Needs-Related Payment			

I certify that the above is true and accurate to the best of my knowledge. I further understand that any receipt of assistance is contingent upon the availability of funds.

Participant Name

Participant Signature

Date

Career Advisor Name

Career Advisor Signature

Date



Purchase Authorization Form

Participant Name: _____ State ID: _____

County: ☐ Cumberland ☐ Harnett ☐ Moore ☐ Montgomery ☐ Sampson

Program: ☐ AD ☐ DW ☐ ISY ☐ OSY ☐ Special Grant

Approved Training: _____ Funding Code: _____

Vendor Name: _____ Date Issued: _____

Approved Items (Only those checked.)			
<input type="checkbox"/> Uniform		<input type="checkbox"/> Other (Specify) _____	
<input type="checkbox"/> Coat		<input type="checkbox"/> Other (Specify) _____	
<input type="checkbox"/> Shoes		<input type="checkbox"/> Other (Specify) _____	
<input type="checkbox"/> Embroidery		<input type="checkbox"/> Other (Specify) _____	
<input type="checkbox"/> Equipment		<input type="checkbox"/> Other (Specify) _____	
<input type="checkbox"/> Tools		<input type="checkbox"/> Other (Specify) _____	

Total Amount Approved: \$ _____ Written Amount: \$ _____

This Voucher Certification is approved and issued by: _____

Staff Signature: _____ *Staff Printed Name*
Date: _____

Supervisor Signature: _____ Date: _____

Redemption of Voucher

Voucher may not exceed dollar amount above, or items checked. Vouchers expire 30 days from the issue date. All vouchers must be submitted for payment within 45 days. **An itemized invoice must be attached to the redeemed voucher.**

Vendor Signature: _____ Date: _____

Return the redeemed voucher and itemed invoice to:

Authorized Agency: _____

Service Provider Name
Attention: _____

Address: _____

CITY STATE ZIP

