



**MID-CAROLINA  
WORKFORCE & TALENT  
DEVELOPMENT**

**Policy Letter #13**

**TO: All Staff**

**FROM: Matthew Fowler, WFD Executive Director**

**SUBJECT: Supportive Service and Needs-Related Payments**

**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. Please read this policy thoroughly in order to determine the most appropriate source of supportive service that will meet the participant's needs and the procedures for providing assistance. Reference Operational Guidance OG 18-2021.

**BACKGROUND AND DEFINITION**

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 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 WFD Executive Director.**

To receive supportive services, WIOA participant 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.

Select supportive services such as transportation (other than mileage reimbursement and bus passes), childcare, dependent care, and housing are considered as needs-related payments, are only available to out-of-school young adults, adults, and dislocated workers who are enrolled in training and intended for participants who demonstrate a dire need and have exhausted all other means of support. Approval of such services require written authorization of the Mid-Carolina WDB Director and verification of received/denied services from partner agencies. All documentation must be uploaded into the participant's file in the NCWorks system.

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.

To be eligible for Needs-Related Payments:

Out-of-School Young Adults (ages 18-24) and Adults must:

- a) Be unemployed;
- b) Not qualify for, or have ceased qualifying for, unemployment compensation; and
- c) Be enrolled in a program of training services under WIOA sec. 134(c)(3).

Dislocated Workers must:

- a) Be unemployed, and:
  - (1) Have ceased to qualify for unemployment compensation or trade readjustment allowance under TAA; and
  - (2) Be enrolled in a program of training services under WIOA sec. 134(c)(3);or
- b) Be unemployed and did not qualify for unemployment compensation or trade readjustment assistance under TAA and be enrolled in a program of training services under WIOA sec. 134(c) (3).

***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.

## **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 system.

**A. 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.

**B. 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.).

**C. 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.).

**D. 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.

**E. Work Attire and Related Costs**

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

**F. 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.

**G. 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.randmcnally.com> or <http://www.mapquest.com>; this documentation must be included with the voucher for review and approval by the service provider.

- Mileage is calculated using \$0.56 per mile not to exceed \$168.00 per week or 300 miles 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 Center staff will maintain adequate documentation to support child/dependent care costs. ***The participant will be responsible for any late fees.***
- Career Center staff is required to contact the Department of Social Services to prevent duplication of services. A detailed response should be case noted in NCWorks.
- 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.

- Reference Day Care Procedures (attachment B).

## **NEEDS-RELATED PAYMENTS/EMERGENCY ASSISTANCE**

The level of supportive services considered as needs-related payments will be determined based on the participant's need and determined by the dollar amount established by the Mid-Carolina WDB Director of the Career Center based on each individual case. Before providing needs-related payment supportive services to participants, they should be referred to related agencies and attempt to obtain services prior to being assessed by the Career Advisor for supportive services with the use of WIOA funds.

If a participant is denied assistance from a partner agency, documentation must be provided in one of three forms:

1. Faxed copy on agency letterhead
2. E-mail from agency
3. Self-attestation \*

\*In addition to the self-attestation form additional documentation in the form of items 1 or 2 listed above must be provided within 14 business days. If the documentation is not provided within the required time frame, the reason should be case noted by the career advisor.

- Participants may be provided with short-term supportive services payment during emergencies related to housing, temporary shelter, car repairs, and one-time utility payments, etc.
- Career Center Staff will assist the participant in contacting the appropriate community agencies for assistance. Assistance will only be granted when all other resources have been exhausted or no longer available. There must be a documented need that the individual cannot continue in training without a Needs-Related Payment and that all other services have been exhausted.
- Career Center staff will maintain adequate documentation to support the emergency. This may include copies of eviction notice, utility bills, proof of ownership of the vehicle, etc. These documents must be uploaded into the participant's NCWorks file with a detailed case note.
- ***Payment or reimbursement of costs for penalties, court costs, and other related criminal fees are not allowable WIOA costs and are the sole responsibility of the participant.***

The participant must provide applicable documentation related to the cost of the request (e.g., bills, three written estimates for repairs, etc.). Individual exceptions may be approved by the Director. All approvals are contingent on funding availability.

Determination of Needs-Related Payment:

1. Career Advisor is to discuss all options with the participant regarding obtaining financial assistance from family members, friends, other community organizations, etc. before seeking assistance from the NCWorks Career Center.
2. Career Advisor is to contact Mid-Carolina WDB staff by email to see if Emergency/Needs-Related Payments funds are available.
3. Career Advisor is to compute family income from all sources for the previous full calendar month using the Resource Worksheet (attachment C). If the Career Advisor determines that the last month's income does not accurately reflect the participant's needs, due to exceptional family circumstances, thorough justification must be

- documented on the Resource Worksheet showing the income calculation. This form must be signed and dated by both the participant and the Career Advisor.
4. Career Advisor must verify and document eligibility for Needs-Related Payment via the Needs-Related Payment Support Analysis Form (attachment D).
  5. A written request must be submitted to the Performance Analyst. The request should include the following documentation: participant's name, proof of the emergency assistance being requested (must be in participant's name), and all applicable information related to the request, including the Resource Worksheet and Needs-Related Payment Support Analysis Form. Approval will be contingent on the availability of funds.

## **PAYMENTS**

The WIOA service provider may be reimbursed for supportive service payments and invoices upon compliance with the following requirements:

- The WIOA service provider must ensure that WIOA participants are enrolled and actively participating in an allowable WIOA activity for which support payments have been appropriated.
- The WIOA service provider must document coordination with other agencies to eliminate duplication of services and all documentation must be completed prior to utilizing WIOA funds (e.g., Supportive Services, Needs-Related Payments, ~~Finish Line Grant funds~~).
- The WIOA service provider must provide proper documentation of any supportive service payments to be submitted to the local area.
- The participant must meet the requirements of the applicable supportive service. The WIOA service provider will secure the participant's attendance sheets, grades, and all other applicable documentation.
- The WIOA service provider will ensure student emergency requests (e.g., Finish Line Grant) are evaluated and fulfilled within 72 hours of receipt of the completed application and acceptable required documentation.
- All emergency assistance payments using ~~Finish Line Grant funds~~ are to be paid directly to the vendor and not to the participant.
- Reimbursement for supportive service payments and invoices are to be submitted monthly to the local area.

## **PREVENTION OF FRAUD**

- The Career Advisor is to verify and document that the participant is not receiving unemployment insurance compensation, TRA, and Needs-Related Payments. Participants cannot receive UI, TAA, TRA, and Needs-Related Payments at the same time.
- The Career Advisor will verify training participation before submission of request.
- The Career Advisor will upload all applicable documentation related to the request into the participant's NCWorks profile and enter applicable case notes.
- In the event of fraud, all WIOA funds obtained from the date of fraud will be subject to collection from appropriate sources and may result in disallowed costs.

## **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.



**Attachments:**

- A. Bi-Weekly Attendance Form
- B. Day Care Procedures
- C. Resource Worksheet
- D. Needs-Related Payment Support Analysis Form
- E. Finish Line Grant Application Form

**Creation Date**

July 2022

**Revision Date January 2024**

## NCWORKS CAREER CENTER

### Bi-weekly Class Attendance Form

Participant's Name: \_\_\_\_\_ Last 4 SSN: \_\_\_\_\_ Career Advisor: \_\_\_\_\_

Training Period from Sunday: \_\_\_\_\_ Thru Saturday: \_\_\_\_\_

**\*\*\* PLEASE HAVE YOUR INSTRUCTOR INITIAL EACH DAY THAT YOU ARE PRESENT IN CLASS \*\*\***

DATE	Mon	Tues	Wed	Thurs	Fri	Sat	Mon	Tues	Wed	Thurs	Fri	Sat
COURSES												
Total hours spent in class each day												
Total for 2 weeks												

Certification

I certify the above attendance record is correct

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Instructor's Signature

\_\_\_\_\_  
Date

Instructor's 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](http://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 child care 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.

## NCWorks Career Center 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		Day Care	
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:	
<b>Total Monthly Income (A)</b>		<b>Total Monthly Expenses (B)</b>	
<b>BALANCE/DEFICIT (A-B):</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

NCWorks Career Center  
Needs-Related Payment Support Analysis Form

1. Do you currently receive Unemployment Insurance (UI) benefits? Y Yes Y No
  
2. Do you currently receive Trade Adjustment Allowances (TAA)? Y Yes Y No
  
3. Are you enrolled in full-time occupational skills training? Y Yes Y No
  
4. Are you in good academic standing in the enrolled occupational skills training program (e.g., maintaining a 2.0 or better GPA)? Y Yes Y No
  
5. Have you exhausted all available funding resources? Y Yes Y No
  
6. Do you need income support beyond these other resources in other to participate in training full time? Y Yes Y No

*Needs-Related Payments are not intended to provide the entire amount of income support you need to complete your training. If you are awarded a Needs-Related Payment, it will be based on this support analysis and budget you provide. These payments are made to help you while making satisfactory progress while attending the training.*

*All answers and statements are true and complete to the best of my knowledge. I understand that providing untruthful or misleading answers are cause for denial of Needs-Related Payments. Any overpayments or fraud based on my false or misleading answers could result in my repayment of any assistance provided.*

\_\_\_\_\_  
Participant Name \_\_\_\_\_ Participant Signature \_\_\_\_\_ Date

\_\_\_\_\_  
Career Advisor Name \_\_\_\_\_ Career Advisor Signature \_\_\_\_\_ Date