# **AJC Data Entry Procedures/Requirements**

| Subject (Links):                                                   | Procedure:                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Case Details/Universal Information  Partner Provided Service Link: | Partner provided Service link must be completed when participant receives services by another program agency that are non WIOA funded, or services paid by other funding sources such as Free Application for Federal Student Aid (FAFSA), Social Services Block Grant (SSBG).                                                             |
|                                                                    | <ul> <li>Click on Partner-Provided Services link</li> <li>Click Add</li> <li>Funding Source/Enrollment: Select one from the drop down box. Most commonly used are:         <ul> <li>Adult Education</li> <li>Other Non-WIOA (i.e. co-enrollment using PPEP Funds)</li> </ul> </li> </ul>                                                   |
|                                                                    | <ul> <li>Click Continue</li> <li>Service: Select from drop down box the service provided by program agency or service being provided by other funding besides WIOA.</li> <li>Note: If the service is not listed, please submit an email to the compliance department. The State is only authorized to add service codes to AJC.</li> </ul> |
|                                                                    | <ul> <li>Status: Select one of the below.</li> <li>Completed</li> <li>In-Progress</li> <li>Unsuccessful</li> <li>Note: Our local area does not use the following options for status= Scheduled, Exit w/o Completing, Proposed, Waived, Failed to Report, Rescheduled.</li> </ul>                                                           |
|                                                                    | <ul> <li>Enter Estimated Start and End Dates</li> <li>Enter Start and End Dates</li> <li>(Estimated dates should be the same as the actual start and end dates)</li> <li>Click Save</li> </ul>                                                                                                                                             |
|                                                                    | Note: Program note and IEP/ISS needs to address the purpose for using the Partner-Provider Service link.                                                                                                                                                                                                                                   |

|                                                         | Training/Co-Enrollments: The following is required when training is paid by: partner program funds, participant, participant's parent, employer, or other grants or scholarships paid for 100 percent of training;  Training service must be entered under the Partner Provided Services Link located in the Case Details/Universal Screen of AJC.  Select the Funding Source/Enrollment from the dropdown box and click continue.  Select the Service and Status  Enter Estimated Start and End dates  Enter Actual Start Date of training  Enter Actual End Date when training ends  Click Save  Program Notes and ISS/IEP must indicate how training is being paid by.  Note:  For Adults & DW- MSG is not required. Refer to the Measurable Skill Gains, Goals & Interest Section of this procedures document.  For Adults & DW- If participant is co-enrolled with a DOL Partner Program that shares a common exit, the partner provided service link is not required. Refer to the "DOL Partner Programs that share a common exit Section" of this procedure for further instruction.  For Youth- Refer to the "State AJC Procedure for Youth in Partner Funded Education or Training" for further instruction. |
|---------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Case Details/Universal Information  Job Placement Link: | Staff is required to enter job placement information for all participants exiting WIOA services with employment, including self-employment obtained during program participation or during Follow up time period. The data entry will allow the LWDA and State to capture job placements for performance purposes. Below are the fields that need to be completed under Job Placement Link in AJC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |

<u>Note:</u> Back-up documentation is required for Job Placement information and must be scanned into ISDS. (I.e. employment verification, participant self-verification).

- Click on Job Placement link
- Click on Add Job Placement
- Enter the job placement information for the following sections:
  - o Job Title
  - o Employer Name

#### **Job Location:**

- Address
- o City
- o State
- o Zip/Postal Code
- Country
- o Phone
- o Email

#### **Contact Information:**

- Contact person
- o Contact Person's Job Title
- Address
- o City
- o State
- o Zip/Postal Code
- o Country
- o Email

# **Start Wage & Date:**

- Start Date
- o Start Wage
- o Start Wage Type= (Select one of the following: Annual, Hourly, other)
- o Start Wage Descriptor, per State not required to be completed.

#### **End Wage and Date Section** Not Required to be completed.

#### **Job Description:**

- o Description and Duties of the Job
- o Avg. Number of Hours per Week (select from drop-down box)
- o Explanation of Average Number of hours per week, if unable to determine
- O Receiving Health Insurance (select from drop-down box)
- O Covered by Unemployment Insurance(select from drop-down box)
- o Fringe Benefits(select from drop-down box)

|                                | <ul> <li>List Medical Benefits Provided</li> <li>Placement Made By (select from drop-down box)</li> <li>Role user (select case manager from drop down box)</li> <li>Click Save</li> <li>Note: The following does not apply to Job Placements.</li> <li>Participants employed at registration and who are working with the same employer</li> </ul>                                                                                                                                 |
|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                | <ul> <li>at time of exit is not considered job placements.</li> <li>Job Placement should not be entered in AJC if information has already been entered by DES Staff.</li> <li>Job Placement should not be entered when participant has received a new position,</li> </ul>                                                                                                                                                                                                         |
|                                | or higher wage amount within the same employer currently employed with.  O Please keep in mind that if a job placement is being entered in AJC while participant's file is within the 90 days of creating a program exit date, the program exit date will get extended.                                                                                                                                                                                                            |
| Case Details/Universal         | Refer to the State Eligibility, Data Validation, and AJC Uploaded Supporting                                                                                                                                                                                                                                                                                                                                                                                                       |
| Information                    | Documentation List" for required uploaded documents in AJC.  Click Add New Document                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>Uploaded Documentation:</b> | <ul> <li>Click on Select File to upload to select the document you are uploading. Note: types of file format accepted by AJC: PDF, JPG, PNG. Cannot be greater than 10 MG.</li> <li>Enter the name of document that is being uploaded under Document Name field.</li> <li>Enter information if needed under File Description explaining what the documents are being used for.</li> <li>Select from the Document Item the document you are uploading from the drop down</li> </ul> |
|                                | <ul> <li>box.</li> <li>Select Enrollment for Item Scope</li> <li>Select Eligibility, Validation, or both, or Supporting, Follow-Up, or both for the Document Type</li> <li>Select the Enrollment you are working with</li> <li>Select the data elements that this documentation upload verifies</li> </ul>                                                                                                                                                                         |

|                                                          | ➤ Click Save  Note: Documentation that contains Personally Identifiable Information (PII) must not be uploaded into AJC. Refer to guidance provided on email dated 7/1/21 "State update Data Validation" and State checklists.                                                                                                                                    |
|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| WIOA Details/Program Details <u>Exit Questions Link:</u> | Exit Questions are to be completed when all services have been closed under the Service & Training Plan and participant no longer anticipates in receiving services through the program.                                                                                                                                                                          |
|                                                          | ➤ Click on the Exit Questions Link                                                                                                                                                                                                                                                                                                                                |
|                                                          | Exit Date: Date will auto fill once there are no services after 90-days from the last day of service participant received.                                                                                                                                                                                                                                        |
|                                                          | Note: The following services in AJC will provoke the system to extend the Program Exit Date if entered in AJC while participant's file is within the 90 days of creating a program exit date.  O Job Referrals O Job Placement O Staff Self-Service O Participant Self-Service O Enrollment open through Employment Service (LE)                                  |
|                                                          | > Other Reasons for Exit: Select one of the following from the drop down box if participant is excluded from performance. Once the selection has been made, scroll down and click save.                                                                                                                                                                           |
|                                                          | Note: Back-up documentation is required and must be uploaded in AJC when using any of the exclusions below. Must also be case noted in AJC. Health/Medical info. must be placed in confidential folder. Exclusions must occur prior to exit; it no longer applies during Follow-up. (Refer to TEGL 10-16 change 1 and WIOA State Policy Broadcast 19-020 pg.2-3). |
|                                                          | <ul> <li>Institutionalized/Incarceration (exclusion does not require a 90-day requirement)</li> <li>Health/Medical (documentation must show medical treatment will last longer than 90 days.)</li> </ul>                                                                                                                                                          |

- o Deceased
- Reserve forces called to active duty (documentation must show active duty will last longer than 90 days.)
- o Foster Care (applies to youth only)
- Retirement (If an individual retires, retirement must be selected, however individual is not excluded from performance measures. Documentation for proof of retirement such as: recent bank statement for such payment, retirement award letter, tax return document.)
- > Recalled by layoff employer: Select Yes or No
  - Select Yes if participant was called back to work by the layoff employer
  - Select No if it doesn't apply
- ➤ <u>In-School Status:</u> Select the school status of participant at time of exit. This applies to Youth/Adult/Dislocated Worker Participants. Back-up documentation for School Status at exit is required for Youth only and is to be uploaded into AJC under uploaded documentation link.
  - o In School-High School or less (i.e. Middle/High School)
  - o In School-Alternative School (i.e. Charter, Aztec, PPEP, etc.)
  - o In School-Post High School (i.e. college, university, technical school)
  - o Not attending School-High School drop out
  - Not attending School-High School Graduate
  - Not attending School, within age of compulsory school attendance (This option is not used by our local area)
- ➤ <u>Upon Exit and Placement:</u> Complete this section if participant is being exited with employment, including self-employment. If not employed, leave blank.

#### **Placed Occupation**

Olick on Search for ONET codes link and select the occupational code that relates to the job title. Once selected, title & code auto populate to appropriate field and is also displayed on the screen. \*\*ONET Code is also updated during Follow-Up time period to reflect the most recent job placement information if participant's employment has changed. \*\*

### **Placement Date**

o Enter Placement Date. Date must coincide with the hire date on the employment verification form.

# Note:

- Participants employed at registration and who are working with the same employer are not considered job placements at exit.
- o Back-up documentation is required for Job Placement information and is to be scanned into ISDS. (i.e. employment verification, participant self-verification).
- o If there is an open job placement entered in AJC, staff will not be able to proceed with completing the Exit Questions. In order to proceed with the Exit Questions, staff will need to enter an end date in the job placement field, answer the Exit Questions, and then go back to Job Placement Link and remove the end date.
- **Has Participant been released from incarceration:** Select one of the following.
  - Yes= If the participant was incarcerated at the time of program participation and during the program was released. Date of release from incarceration is required.
  - No= If participant has not been released from incarceration.
  - o N/A= If the participant was not incarcerated at the time of program participation.
- **Date Released from Incarceration:** Enter date if it applies.
- **Employment Type:** Not a required field to be answered for WIOA participants.
- > <u>Self-Employed:</u> Select one of the following
  - o Yes
  - o No
- > Starting Hourly Wage at Exit: Not a required field to be answered for WIOA participants.
- **Hours worked in last week:** Not a required field to be answered for WIOA

|                                                      | participants.                                                                                                                                                                                                                                                                                                                                                                                                                       |
|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                      | > Click Save                                                                                                                                                                                                                                                                                                                                                                                                                        |
| WIOA Details/Program Details  Wages After Exit Link: | Supplemental wage information is entered for participants that are employed during their 2 <sup>nd</sup> Quarter after exit and 4 <sup>th</sup> Quarter after exit. Supplemental wage back up documentation must be uploaded into AJC. Refer to the Local Follow Up Service Policy for acceptable documents for supplemental data and State WIOA Title 1B Exhibit 100.4-"Acceptable forms of Supplemental Wage Data & Methodology". |
|                                                      | <ul><li>Click on Wages After Exit</li><li>Click Add</li></ul>                                                                                                                                                                                                                                                                                                                                                                       |
|                                                      | <ul> <li>Employed in quarter: Select from the quarters displayed 0-5.</li> <li>select 2 if reporting for 2<sup>nd</sup> quarter after exit</li> <li>select 4 if reporting for 4<sup>th</sup> quarter after exit</li> </ul>                                                                                                                                                                                                          |
|                                                      | <ul> <li>Click on Search for ONET Codes web link to select ONET Code related to job title.         Once selected, title and code will auto populate to appropriate field.</li> <li>Click on Search for NAICS Codes web link to select NAICS Code (North American Industry Classification System). Must be 6 digit codes. This is based on the business industry.</li> </ul>                                                         |
|                                                      | <ul> <li>FEIN: Enter Federal Employer ID Number.</li> <li>FEIN can be obtained from AJC system, Verification of employment, contacting Employer, Employer Information Form.</li> <li>To request assistance with FEIN's, please follow instruction handout on <i>Instructions for Obtaining FEIN</i>.</li> <li>Email must be sent to the Compliance department with your request.</li> </ul>                                         |
|                                                      | <ul> <li>Employer Name: Enter employer name</li> <li>Employer City: Enter city from where employer is from</li> <li>State: Select from drop down box which State employer is from</li> </ul>                                                                                                                                                                                                                                        |
|                                                      | Source of supplemental data: Select from the drop down box one of the following.                                                                                                                                                                                                                                                                                                                                                    |

|                                         | <ul> <li>Case Management</li> <li>Follow Up Services</li> <li>Surveys of Participants= Participant self-verification of employment, participant's check stub.</li> <li>Verification with the Employer= Employer verification form, employment website verification, employer verbal verification.</li> <li>Record Sharing/Matching= UI Guide printout.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                         | <ul> <li>➤ Total Earnings for Quarter: Enter supplemental quarterly wage amount.</li> <li>➤ Click Save</li> <li>Note:         <ul> <li>Supplemental wage information must be collected in a valid, reliable manner, and entered under the Wages Link.</li> <li>The Wage Conversion Chart must be used to convert hourly/weekly/biweekly/monthly /annual wages into quarterly wages. (refer to State WIOA Title 1B Exhibit 100.3-"WIOA Wage Conversion Chart")</li> <li>Staff is not required to revise/update the supplemental wages in AJC after UI Wages have dropped into the system. The supplemental wages will remain as they are recorded in AJC.</li> <li>Self-employment counts for employment 2<sup>nd</sup> and 4<sup>th</sup> quarter after exit and Median Wage. If participant does not have an FEIN Number, the participant's Social Security Number must be used as the FEIN Number when entering</li> </ul> </li> </ul> |
| WIOA Details/Program Details  Outcomes: | supplemental wages.  Credential information for all WIOA Adults, Dislocated Worker & Youth participants, Youth Placement Rate Information, and employment related to Registered Apprenticeship or In the Military is entered under the Outcomes Link of AJC.  Click on Outcomes Link.  Click on Second Quarter after Exit Link to report participant's Second Quarter after Exit placement information.  Youth Placement Rate Information: (Youth Only) Select from the following.                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

- o Occupational Skills Training= attending further/advanced occupational training.
- o Post-secondary education= attending community college, technical school, university.
- o Secondary Education= attending high school, alternative school
- No placement= employed, or participant does not fall in any of the placement options.
- Placement attained on: (Youth Only) Enter date of placement when selecting Occupational Skills Training, Post-secondary education, or Secondary Education for Youth Placement Rate Information. Date must fall within participant's second quarter after exit. Note: Date of placement is not required when "No Placement" is selected for Youth Placement Rate Information.
- Entered training related employment (Adult, DW, Youth): Select from the drop down box.
  - Yes= Employment was obtained as a result of training (i.e. occupational skills training, OJT, Registered Apprenticeship, (youth) WEX/Internship).
  - o No= Not employed or employment obtained was not related to training.
  - Training did not impart job specific tasks= Should be used for other training received (i.e. Alternative Secondary Services, Dropout Recovery Services, Secondary Education Program, etc.).
  - Relationship of employment to training cannot be determined= (i.e. UI printout and or employment verification indicates employed, but job title cannot be determined.)
  - Methods used to determine training related employment (Adult, DW, Youth): Select from the drop down box.
    - o Comparison of the <u>occupation codes between the training activity and the job</u>.
    - Comparison of the industry of employment with the occupation of training using an appropriate crosswalk= Describe the type of business where individual is employed to the occupation of training, using valid crosswalks, by a comparison of the job duties with the skills taught in the training program.
    - Other appropriate method= should not be selected unless you can document the

method used.

- Entered non-traditional employment (Adult, DW, Youth): Employment is in an occupation or field of work for which individuals of the participant's gender comprise less than 25% of all the employed in such field of work. Both males and females can be in non-traditional employment. (i.e. female working as a welder or male working as a nurse) Select one of the following.
  - Yes
  - o No
- Fig. 12. If in employment, is it one of the following? Select one of the following if it applies. Back-up documentation required to be uploaded into AJC. (Adult, DW, Youth)
  - o In a Registered Apprenticeship
  - o In the Military
- > ONET Code (Adult, DW, Youth):
  - ONET Code is required to be entered if a participant is only displaying AZ UI Wages for the 2<sup>nd</sup> quarter after exit.
- Click Save

**Note:** Youth Placement Back-up documentation is required and is to be uploaded into AJC.

- ➤ Click on Fourth Quarter after Exit Link to report participant's Fourth quarter after exit placement information and Fourth Quarter Outcomes Credential Rate Information.
- **Youth Placement Rate Information: (Youth Only)** Select from drop down box.
  - Occupational Skills Training= attending further/advanced occupational training.
  - o Post-secondary education= attending community college, technical school, university.
  - o Secondary Education= attending high school, alternative school
  - No placement= employed, or participant does not fall in any of the placement

options.

Placement attained on: (Youth Only) Enter date of placement when selecting Occupational Skills Training, Post-secondary education, or Secondary Education for Youth Placement Rate Information. Date must fall within participant's fourth quarter after exit. Note: Date of placement is not required when "No Placement" is selected for Youth Placement Rate Information.

**Note:** Youth Placement Back-up documentation is required and is to be uploaded into AJC.

- ➤ 1<sup>st</sup> Credential Rate Information: (Adult, DW, Youth) Select from drop down box the type of credential obtained by participant. This section must be answered without waiting until the fourth quarter after exit. Copy of credential is required to be uploaded in AJC.
  - o High School Diploma/or Equivalency (i.e. GED)
  - o AA or AS Diploma/Degree
  - o BA or BS Diploma/Degree
  - o Graduate/Post Graduate
  - Occupational Skills Licensure (i.e. L.N.A., CDL)
  - Occupational Skills Certificate (i.e. MOS, MA, C.N.A., Medical Billing/Coding, Phlebotomy etc.)
  - Occupational Certifications, includes Registered Apprenticeship, Career & Technical Education Educational Certificates
  - Other recognized diploma, degree, or certificate
  - No Recognized Credential
- **Date of Attainment: (Adult, DW, Youth)** Date of Attainment should be the date on the credential.

### **Note:**

- Credential will only be recorded in AJC when the hard copy of the credential is received.
- The highest credential must be recorded first on the Credential Rate Information.
- o AJC gives you the option to record more than one credential.

|                              | <ul> <li>If participant received training or educational services, and did not obtain credential,</li> <li>4<sup>th</sup> quarter outcomes are still required to be answered.</li> </ul>                                                                                |
|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                              | <ul> <li>If in employment, is it one of the following? Select one of the following if it applies.         Back-up documentation required to be uploaded into AJC. (Adult, DW, Youth)         • In a Registered Apprenticeship         • In the Military     </li> </ul> |
|                              | <ul> <li>ONET Code (Adult, DW, Youth):         <ul> <li>ONET Code is required to be entered if a participant is only displaying AZ UI</li> <li>Wages for the 4<sup>th</sup> quarter after exit.</li> </ul> </li> </ul>                                                  |
|                              | Click Save                                                                                                                                                                                                                                                              |
| WIOA Details/Program Details | Program notes are required to be entered in AJC to reflect all information pertaining to participant's program involvement, progress, updates, this includes when exiting from                                                                                          |
| <b>Program Notes:</b>        | WIOA, receiving Follow up services, services provided, etc.                                                                                                                                                                                                             |
|                              | o Two program notes per month are required to be entered in AJC while participant is                                                                                                                                                                                    |
|                              | in the program.                                                                                                                                                                                                                                                         |
|                              | <ul> <li>One program note per month is required for participants receiving only basic career</li> </ul>                                                                                                                                                                 |
|                              | services.                                                                                                                                                                                                                                                               |
|                              | <ul> <li>One program note per month is required for participants in Follow-up.</li> </ul>                                                                                                                                                                               |
|                              | <ul> <li>Program notes cannot be deleted from AJC.</li> </ul>                                                                                                                                                                                                           |
|                              | o Program notes should not include participant's medical/confidential information.                                                                                                                                                                                      |
|                              | <ul> <li>The following must be included in program notes:</li> </ul>                                                                                                                                                                                                    |
|                              | Employment projections/Occupations in Demand;                                                                                                                                                                                                                           |
|                              | Job Referrals;                                                                                                                                                                                                                                                          |
|                              | Assessments such as ONET Interest Profiler, My Next Move, Traitify;                                                                                                                                                                                                     |
|                              | Occupational Program Research;                                                                                                                                                                                                                                          |
|                              | Provider/Partner Referrals;                                                                                                                                                                                                                                             |
|                              | Individual with disabilities to indicate "please view confidential file" (Refer to Confidential Files section of this procedure.)                                                                                                                                       |

|                           | Click Program Notes link                                                                                                                                                                                                                                                            |
|---------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                           | Click Add Note                                                                                                                                                                                                                                                                      |
|                           | <b>Reference Date</b> : Enter date that the actual contact took place with participant.                                                                                                                                                                                             |
|                           | Recontact Date: Leave blank. Do not enter date.                                                                                                                                                                                                                                     |
|                           | > Subject: Provide brief description of contact/program note. (i.e. program update, job                                                                                                                                                                                             |
|                           | referral, tabe testing, beginning GED Program, beginning Work Experience, etc)                                                                                                                                                                                                      |
|                           | Notes: Enter your information                                                                                                                                                                                                                                                       |
|                           | > Type of Contact: Select from drop down box.                                                                                                                                                                                                                                       |
|                           | Click Save                                                                                                                                                                                                                                                                          |
| <b>Enrollment Details</b> | TABE Test results are entered under the Testing Link in AJC. TABE Test printout results must also be uploaded in AJC. (Pre-Test and Post-Test).                                                                                                                                     |
| Testing Link:             | <ul> <li>Click on Testing Link</li> <li>Click Add New ABE Test</li> <li>Assessment Tool: Select from drop down box         <ul> <li>Tabe 11-12</li> </ul> </li> <li>Functional Area: Select from drop down box         <ul> <li>Reading</li> <li>Mathematics</li> </ul> </li> </ul> |
|                           | <ul> <li>Language</li> <li>Date Administered: Enter test date</li> </ul>                                                                                                                                                                                                            |
|                           | <ul> <li>Scaled Score: Enter Scaled Score. Must be 3 digits.</li> </ul>                                                                                                                                                                                                             |
|                           | <ul> <li>Click on Compute Functional Level to display the educational functioning level.</li> </ul>                                                                                                                                                                                 |
|                           | <ul> <li>Contact Person: Enter name of case worker</li> </ul>                                                                                                                                                                                                                       |
|                           | Enrollment Notes: Leave area blank                                                                                                                                                                                                                                                  |
|                           | ➤ Universal Notes: Include following information                                                                                                                                                                                                                                    |
|                           | o Book level                                                                                                                                                                                                                                                                        |
|                           | o Grade Equivalent                                                                                                                                                                                                                                                                  |
|                           | > Click Submit                                                                                                                                                                                                                                                                      |
| Enrollment Details        | The "Date of Completion of Youth Services" is required to be entered in AJC at time of                                                                                                                                                                                              |
|                           | exit. Entering the Date of Completion of youth services will populate the required PIRL Data Element #1416.                                                                                                                                                                         |
| Enrollment Info. Link:    | Data Element #1410.                                                                                                                                                                                                                                                                 |

| (Youth Program Only)            | Click on Enrollment Info. Link                                                                  |
|---------------------------------|-------------------------------------------------------------------------------------------------|
| <i>V</i>                        | ➤ Click on Set Completion Date to enter date for Completion of Youth Services. This is          |
|                                 | the actual end date of the last service you close in AJC. (Does not include Follow-Up           |
|                                 | Services).                                                                                      |
|                                 | Click Save.                                                                                     |
|                                 | <b>Note:</b> This section must be completed before you enter any Follow Up Service into the     |
|                                 | S&T Plan, otherwise this section will disappear. Ensure all services are closed in the S&T      |
|                                 | Plan before completing this area.                                                               |
| <b>Enrollment Details</b>       | Measurable skill Gains are required to be entered when participant is receiving training or     |
|                                 | education services.                                                                             |
| Massurable Skill Cains Cools &  |                                                                                                 |
| Measurable Skill Gains, Goals & | Goals are entered when participant is receiving Work Experience/Internship. (OJT for            |
| <u>Interests:</u>               | Youth is considered a type of Work Experience).                                                 |
|                                 |                                                                                                 |
|                                 | For Adults/DW- Goals are required for Work Experience/Internship services, when                 |
|                                 | training or education services are paid by Non-WIOA funds, and any other multiple               |
|                                 | skill gains related to occupational and education goals.                                        |
|                                 |                                                                                                 |
|                                 | For Youth- Goals are required for Work Experience/Internship services, OJTs, and any            |
|                                 | other multiple skills gains related to occupational and educational goals.                      |
|                                 | Participant's interests are entered under WIOA Interests Link.                                  |
|                                 | Tartelpant 5 interests are entered ander with interests Link.                                   |
|                                 | Click on the Measurable Skills Gains and Goals                                                  |
|                                 | Click New Goal to enter a Measurable Skill Gains                                                |
|                                 | <b>Date Set:</b> Enter date of when service begins. If service overlaps with program year, then |
|                                 | you will enter date of when program year begins (i.e. 7/1/2020).                                |
|                                 | > Program Year: Enter current program year participant is in.                                   |
|                                 | Measurable Skill Gains: Select from drop down box.                                              |
|                                 | Educational Functioning Level                                                                   |
|                                 | Secondary Transcript/Report Card                                                                |
|                                 | Post-Secondary Transcript/Report Card                                                           |
|                                 | Training Milestones                                                                             |
|                                 | G1:11 B                                                                                         |
|                                 | Skills Progression                                                                              |

- o Diploma or Equivalent
- **Description:** Enter information related to the training or education service participant is receiving and the outcome participant needs to attain.
- > Status: Select from drop down box.
  - o Attained
  - o Set but attainment pending
  - o Set but not attained
- Planned Date of Attainment: Enter date of end date of program year (i.e. 6/30/2020)
- **Date Attained:** Enter date when MSG has been attained.
- Click Save
- Click New Goal to enter a Goal
- **Date Set:** Enter date of when service begins.
- > Program Year: Enter current program year participant is in.
- **Goal Type:** Select from drop down box.
  - o Employment goal
  - o GED goal
  - o Basic Skills
  - o Occupational Skills
- **Description:** Enter information related to the training or education service participant is receiving and the outcome participant needs to attain.
- **Status:** Select from drop down box.
  - Attained
  - Set but attainment pending
  - Set but not attained
- Planned Date of Attainment: Enter an estimate planned date of when goal must be attained. Recommended to set a planned date of attainment within a year of when goal was set (e.g. date set: 11/26/20, planned date of attainment: 11/25/21)
- **Date Attained:** Enter date when goal has been attained.
- Click Save

|                            | Click on WIOA Interest Link to add participant's Interests.                                                                                                                                                                                                                        |
|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                            | Click add Interest                                                                                                                                                                                                                                                                 |
|                            | > Enter Interest                                                                                                                                                                                                                                                                   |
|                            | ➤ Click Save                                                                                                                                                                                                                                                                       |
|                            | Note: For Adults & Dislocated Workers:                                                                                                                                                                                                                                             |
|                            | <ul> <li>The MSG <u>is not</u> required to be open when training or education services are paid by<br/>using NON-WIOA funds.</li> </ul>                                                                                                                                            |
|                            | o The MSG <u>is required</u> when participant is co-enrolled with a DOL partner program that shares a common exit that is providing training or education service. Refer to the "DOL Partner Programs that share a common exit Section" of this procedure for further instruction. |
| <b>Enrollment Details</b>  | Training paid by ITA, Pell Grants, Financial Aid, and other Financial Aid is required to be entered under this link. ITAs must be used to provide training services under WIOA to                                                                                                  |
| <b>Educational Grants:</b> | Adults, Dislocated Workers, and Youth to pay to attend approved training programs listed on the ETPL.                                                                                                                                                                              |
|                            | Occupational Skills Training Service must be entered under the S&T prior to completing the Educational Grants link.                                                                                                                                                                |
|                            | ➤ If Occupational Skills Training was paid through ITA using WIOA Funds, you will complete ITA Section.                                                                                                                                                                            |
|                            | ➤ If Occupational Skills Training was paid through Pell Grant/Financial Aid, you will complete Pell Grant Section.                                                                                                                                                                 |
|                            | ➤ If Occupational Skills Training was paid through both ITA and Pell Grant/Financial Aid, you will complete both sections.                                                                                                                                                         |
|                            | ➤ If Occupational Skills Training was paid through Social Services Block Grant (SSBG), you will complete Other Financial Aid section.                                                                                                                                              |
|                            | > Click on Educational Grants Link                                                                                                                                                                                                                                                 |
|                            | ITA Issued:                                                                                                                                                                                                                                                                        |

- ➤ <u>Grant Issued:</u> Check off box. A Check Mark should appear once you have clicked the box.
- ➤ <u>Grant Begin Date:</u> Begin date will roll over from the Occupational Skills Training Service entered in the S&T.
- Figure 2. Grant End Date: Enter end date of ITA. (Should be the same date of when Occupational Skills Training Service ends).
- ➤ <u>Initial Grant Amount:</u> Enter ITA Amount. (Should be the amount listed on your ITA document).
- > <u>Second Grant Amount:</u> Enter ITA Amount if a Second ITA was issued. (*Should be the amount listed on your ITA document*).
- ➤ Third Grant Amount: Enter ITA Amount if a Third ITA was issued. (Should be the amount listed on your ITA document).
- ➤ <u>Demand Occupation ONET Title/Code:</u> ONET Title & Code will roll over from the Occupational Skills Training Service entered in the S&T.

**Note:** If there is more than one Occupational Skills Training service paid by an ITA on the S&T Plan; the ITA Grant Begin Date will be the date of when the first Occupational Skills Training started and the Grant End Date will be the date of when the second Occupational Skills Training ends. ONET Title/Code listed must be tied to the most current Occupational Skills Training.

#### **Pell Grant:**

- ➤ <u>Grant Issued:</u> Check off box. A Check Mark should appear once you have clicked the box.
- Frant Begin Date: Enter the date of when grant/financial aid begin. (Grants/financial aid are commonly awarded by school year calendar).
- ➤ <u>Grant End Date:</u> Enter the date of when grant/financial aid end. (*Grants/financial aid are commonly awarded by school year calendar.*)
- > Initial Grant Amount: Enter the amount awarded.
- Second Grant Amount: Enter second amount if it applies.
- Third Grant Amount: Enter third amount if it applies.

|                           | Other Financial Aid:                                                                     |
|---------------------------|------------------------------------------------------------------------------------------|
|                           | Figure 1 Grant Issued or Employer-Funded Financial Aid: Check off box. A Check Mark      |
|                           | should appear once you have clicked the box.                                             |
|                           | Figure 2                                                                                 |
|                           | Frant End Date: Enter the date of when other financial aid end.                          |
|                           | <ul> <li>Initial Grant Amount: Enter the amount awarded.</li> </ul>                      |
|                           | > Second Grant Amount: Enter second amount if it applies.                                |
|                           | <ul> <li>Third Grant Amount: Enter third amount if it applies.</li> </ul>                |
|                           | Third Grant Amount: Enter unit amount if it applies.                                     |
|                           | *O(1 F 1 1C                                                                              |
|                           | *Other Federal Grant, State Aid, Institutional Aid Sections in AJC are not used by this  |
|                           | Local Area.*                                                                             |
|                           |                                                                                          |
|                           | Click Save                                                                               |
| <b>Enrollment Details</b> | All Services provided to participant based on the AJC Service Dictionary must be entered |
|                           | under the Service & Training Link.                                                       |
| Service & Training Plan:  | Clistan Camina & Tasinina Lint                                                           |
|                           | <ul> <li>Click on Service &amp; Training Link</li> <li>Click on Add Service</li> </ul>   |
|                           | Enter Provider Name as listed below                                                      |
|                           | Enter Provider Address as listed below  Enter Provider Address as listed below           |
|                           | Enter City                                                                               |
|                           | Enter State                                                                              |
|                           | ➤ Enter Zip Code                                                                         |
|                           | Enter Country (United States for Country)                                                |
|                           |                                                                                          |
|                           | ARIZONA@WORK-AWC                                                                         |
|                           | 1351 S. Redondo Center Dr.                                                               |
|                           | Yuma, AZ 85365                                                                           |
|                           | Youth Services Program                                                                   |
|                           | 300 S. 13 <sup>th</sup> Ave.                                                             |
|                           | Yuma, AZ 85364                                                                           |
|                           | ARIZONA@WORK-EQUUS                                                                       |
|                           | 3826 W. 16 <sup>th</sup> St.                                                             |

Yuma, AZ 85364

#### ARIZONA@WORK-ROSS IES

3850 W. 16<sup>th</sup> St. Suite A Yuma, AZ 85364

**Note:** Do not use the Pre-Fill My office Info. Tab as the information will display with incorrect provider information.

- > Service Type: Select the service provided to participant from the drop down box.
- ➤ <u>Status:</u> Select from the drop down box. Per State guidance for WIOA Title IB programs only uses the following options. *Refer to WIOA Title IB Informational Broadcast 22-021*.
  - Completed= The service is done, participant completed service, the objective has been reached.
  - o In-Progress= The service has started and the participant is actively participating.
  - Unsuccessful Completion= The participant participated in the service, but did not successfully complete.
  - Service Canceled=To cancel supportive services where no monies were paid by WIOA.
- > <u>Type of Meeting:</u> Select from the drop down box to indicate how the service is being delivered to the participant.
  - o Phone
  - o In Person
  - o Virtual
  - Other

**Note:** When "Other" is selected as the type of meeting from the drop down box, the system will require to specify what that "Other" type of meeting was used to deliver the service to the participant.

➤ Occupation: Enter keyword or ONET Code for the occupation or you can click on the Search for ONET codes link to find ONET Code. Once you have found the appropriate occupation; the title, code, and description will auto populate to the screen.

- ONET Title/Code is only required for Training services, Educational services, Internships/Work Experience, and OJT.
- When selecting ONET Title/Code for an <u>Educational service</u>, the ONET must be based on the participant's career/training interest.
- When selecting ONET Title/Code for Training services, Internships/Work Experience, or OJT, the ONET must be the same code as listed on Contract.

#### **Youth Only:**

- When providing <u>Post-Secondary Preparation & Transition Activities</u> and <u>addressing participant's basic skill levels</u>, the ONET Title/Code will be required.
- When providing <u>Leadership Development Opportunities</u> and <u>a contract is generated</u>, the ONET Title/Code will be required.
- ➤ <u>CIP:</u> Click on Browse CIP Code link to select the appropriate code for Classification of Instructional Programs (CIP).
  - When entering CIP Code in the required field of AJC, the code must be 6-digit CIP Code without decimal points.
  - Once CIP Code is entered, the CIP Title will auto populate to the screen along with description.
  - CIP Code is required for Training and Educational services, with the exception of OJT.

## **Youth Only:**

- When providing <u>Post-Secondary Preparation & Transition Activities</u> and <u>addressing participant's basic skill levels</u>, the CIP code will be required.
- **Does this service lead to a credential, employment, or measurable skills gain?:** 
  - Yes= Must select "YES" for all training and educational services. **Note:** OJT is considered a Training Service for Adult/DW Programs.
  - o No= If service does not lead to credential, employment, or measurable skills gain.
- > Select the result(s) the service may lead to:
- The "Measurable Skills Gain" box must be checked whenever an education or training service has been added to the S&T plan in AJC in addition to the type of credential.
- > If "NO" was selected on previous question, there should be no boxes checked under this area.
  - o Industry Certification= referred as "Personnel Certification"

- o Apprenticeship Certification= referred as "Registered Apprenticeship Certificate"
- o Government License= referred as "Occupational License"
- o Associate's Degree
- o Bachelor's degree
- o IHE Certificate of Completion= referred as "Educational Certificate" (i.e. community college certification)
- Secondary School diploma= includes High School Diplomas, High School Equivalency Diplomas.
- o Employment= must be selected for OJT (applies to Adults/DWs)
- o Measurable Skills Gain= one of the six performance indicators of WIOA. Measures interim progress of participants enrolled in education & training services.
- ➤ Pay for Performance Contract: The selection for this area will always be "NO" as our local area does not do Pay for performance contract.
- **Pay-for-Performance Provider ID:** Leave Blank
- ➤ <u>Is this training through distance learning?</u>: Answer for training services and select from the drop down box.
  - o In-person only, no virtual/online
  - o Virtual/online
  - Mix of in-person and virtual/online
- ➤ <u>Is this part-time training?</u>: Select from the options to answer for training service.
  - o Yes
  - o No
- ➤ <u>Is this pre-layoff or pre-separation training?</u>: Select from the options to answer if participant is receiving Incumbent Worker Training.
  - o Yes
  - o No
- ➤ <u>Is this training leading to an Associates degree?</u>: Select from the options to answer for training service.

- o Yes
- o No
- Training Agent ID: Enter Training Agent ID Number. This identifies the agency serving the participant.
- ➤ 413= (ARIZONA@WORK-AWC)
- > 534= (Youth Services)
- > 700= (ARIZONA@WORK-EQUUS)
- > 800=(ARIZONA@WORK-ROSS IES)
- Participant Group: Not required to be answered. Should be left as "000-No Participant Group".
- > Total Cost: Leave blank
- > <u>Training Enrollment Date:</u> This field is not required. Must leave blank. This local area is not using this field.
- ➤ Office: Office will auto populate, otherwise select service provider's office from the drop down box.
- **Staff Providing Service:** Select name of Case Manager from the dropdown box.
- > **Notes:** This section is completed for the following;
  - o Include a note when "Supportive Services-Other" is paid through WIOA monies to indicate the type of supportive service being provided.
  - Include a note to indicate the Pay Period for the payment issued when Supportive Services-Needs Based Payments, Supportive Services-Transportation Related Expense, or Incentive & Bonuses for WEX or Internship is being provided.
  - o Include a note when the "Incentive & Bonuses" is being provided to indicate the type of incentive participant is receiving (i.e. workshop, credential, high school credits, high school diploma, etc.)
- **Estimated Start Date:** Enter same date of Actual Start Date of service.

**Estimated End Date:** Enter an estimated date of when the service will end.

|                                                                 | <ul> <li><u>CAUTION:</u> If services have a Status of "In-Progress" and the Estimated End Dates have expired where staff did not revise those dates, and 90 days have passed; AJC will close those services and enter the Estimated End Date as the Completion Date. Once that Completion Date is more than 90 days, the system will generate an Exit Date for the file.</li> <li><u>Actual Start Date:</u> Enter the date of when participant starts the service.</li> <li><u>Actual End Date:</u> Enter the date of when participant ends the service.</li> <li>Click Save</li> <li><u>Note:</u> When entering Work Experience/Internship or OJT Service, the Provider Name and Address must reflect Employer's information as listed on contract.</li> <li><u>Provider Phone, Provider Fax, Start Time, End Time, Hours Planned, Days:</u> These fields are not required to be completed. Leave Blank.</li> </ul> |
|-----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Enrollment Details</b>                                       | The Search for Training Programs tab must be used when entering Occupational Skills                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Zin omnene Details                                              | Training Service or Registered Apprenticeship under the Service & Training Plan of AJC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Service & Training Plan: (Using "Search for Training Programs") | <ul> <li>Click on the Service &amp; Training Link</li> <li>Click on Add Service</li> <li>Click on Search for Training Programs</li> <li>Search by provider name, FEIN, Provider ID, location. Radius required when search by location.</li> <li>Click Search</li> <li>"Training Program Search" Screen: Screen will display list of all the approved Training programs available through the ETPL.</li> <li>Click on the name of the Training Program to view program information and details such as program description, program cost, demand occupation, performance, and credential information.</li> <li>Click Select Program</li> <li>The following information auto populates to the service record under the Service &amp; Training plan in AJC;</li> <li>Provider Name, Address, City, State, Zip, Country, Provider Phone &amp; Fax Number</li> </ul>                                                      |

|                                    | o Program name                                                                                                    |
|------------------------------------|-------------------------------------------------------------------------------------------------------------------|
|                                    | Occupation                                                                                                        |
|                                    | o CIP                                                                                                             |
|                                    | o Training Agent ID                                                                                               |
|                                    | Note: The following fields must still be completed in order to successfully save service                          |
|                                    | record;                                                                                                           |
|                                    | o Service Type                                                                                                    |
|                                    | Does this service lead to credential, employment, or measurable skills gain                                       |
|                                    | Select the results the service may lead to                                                                        |
|                                    | Pay- for-Performance Contract= No                                                                                 |
|                                    | o Status                                                                                                          |
|                                    | Total Cost (total cost as shown on the ETPL)                                                                      |
|                                    | Estimated Start/End Dates                                                                                         |
|                                    | Actual Start/End Dates                                                                                            |
|                                    | o Staff Providing Service                                                                                         |
|                                    | o Office                                                                                                          |
|                                    |                                                                                                                   |
|                                    | ➤ Click Save                                                                                                      |
|                                    | Note: Please refer to the Partner Provided Service Link Section when training is paid by                          |
|                                    | partner program funds, participant, participant's parent, employer, or other grants or                            |
|                                    | scholarships paid for 100 percent of training.                                                                    |
| <b>Enrollment Details</b>          | This information applies only to Occupational Skills Training for ISY that is paid through                        |
| Service & Training Plan            | an Individual Training Account (ITA).                                                                             |
| 5                                  |                                                                                                                   |
| Capturing Individual Training      | Follow the steps listed under Enrollment Details/Service & Training Plan: (Using "Search for Training Programs"). |
| Accounts (ITA) Established for In- | <ul> <li>Service Type: select ISY OST ITA from the dropdown box.</li> </ul>                                       |
| School Youth (ISY)                 | Notes Section: complete note section by adding "participant enrolled in OST ISY-ITA"                              |
| , ,                                |                                                                                                                   |
| <b>Enrollment Details</b>          | Client Budget and Payments are required to be entered in AJC when WIOA funds are being                            |
| Service & Training Plan            | used for Occupational Skills Training.                                                                            |
| -                                  |                                                                                                                   |

| Client Budget/Payment:                                                        | Note: Please refer to Instruction handouts on how to create client budget, approve client budgets, and add payments.                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Enrollment Details</b>                                                     | Refer to AJC Employment Plan (Initial/Review/Post) IEP/ISS Instructions handout.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Employment Plan:                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Other Information:                                                            | Participant Address/Alternate Contacts:  ➤ Participant's address must be updated under the following screens;  ○ "Case Details" Screen under Contact Information link.  ○ "Program Details" Screen under Mailing Address Link.  ○ "Enrollment Details" Screen under Contact Info Snapshot Link.  ➤ Participant's alternate contacts must be the most current listed in AJC under "Case Details" Screen Alternate Contacts Link.  Note: If physical and mailing address has the same zip code, the mailing address is not                                                                     |
|                                                                               | required to be entered under program details.  Enrollment Details Screen/Enrollment Info. Link:  Click on Change Case Manager to reflect assigned case manager.  Select assigned case manager from drop down box.  Click submit                                                                                                                                                                                                                                                                                                                                                              |
| WIOA Adult & DW Program: MSG/Credential Attainment & Pell Grant Reimbursement | <ul> <li>This only pertains to the Adult &amp; Dislocated Worker Program.</li> <li>If the Service Provider paid the occupational training with WIOA Funds, but later on the college notifies the Service Provider that Pell Grant has been awarded to the WIOA participant, therefore the college ends up reimbursing the Service Provider; the MSG and Credential can be claimed for the WIOA participant.</li> <li>Reference: State Measurable Skill Gains &amp; Credential Attainment Q&amp;A Session handout</li> </ul>                                                                  |
|                                                                               | pgs.13-14, <a href="https://des.az.gov/sites/default/files/media/Measurable-Skill-Gains-and-Credential-Attainment-Questions-and-Answers.pdf?time=1679607697807">https://des.az.gov/sites/default/files/media/Measurable-Skill-Gains-and-Credential-Attainment-Questions-and-Answers.pdf?time=1679607697807</a> ➤ The following must be done in AJC System:  Occupational Skills Training Service remains in the S&T Plan so the system can capture the MSG and Credential attainment, however a note will need to be added to indicate that Pell Grant is covering the cost of the training. |

|                                                                          | <ul> <li>Budget and payments will need to be removed from the S&amp;T Plan.</li> <li>ITA will need to be removed as it's not being used to pay for the training.</li> <li>Pell Grant information will need to be entered under the Educational Grant Link.</li> <li>Add comments to the IEP.</li> <li>Add program note to indicate budget, payment, ITA is being removed due to Pell Grant covering the cost of training.</li> </ul>                                                                                                                                                                                  |
|--------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| WIOA Adult/ DW Programs & DOL Partner Programs (who share a common exit) | Participants who are enrolled in the WIOA Adult or Dislocated Worker Program and coenrolled with DOL Partner Programs who share a common exit,- (Youth, Trade Adjustment Assistance, National Dislocated Worker Grant) who are funding the training or education service are included in both the Measurable Skill Gains and Credential Attainment Rate.  The applicable service must be recorded in the S&T Plan.  A service note is required to indicate the participant is co-enrolled as well as identify the partner program that is funding the training program.  The MSG type required to be entered and set. |
| Case Management/ISDS:                                                    | Refer to the Inclusion in Measurable Skill Gains & Credential State Guide.  The following supporting documents will continue to be scanned in ISDS until an option is available in AJC System to upload document.  Case Management/Follow-up Folder:  Other certificates (CPR, Yuma Health Card, etc.)  Verification of Employment at Exit  Verification of Employment-AJC Universal Job Placement (label document: Universal                                                                                                                                                                                         |
| Confidential Files:                                                      | <ul> <li>Note: Employment Verification at time of exit is not required when participant is being exited with the same employer at time of eligibility.</li> <li>Any medical information must be kept separate from the provider file to ensure confidentiality (i.e. disability).</li> <li>All participant confidential files must be kept in a secure and locked filing cabinet at all times. This will avoid file being misplaced, lost, and ensure participants' information is kept confidential.</li> </ul>                                                                                                      |