

**STATE OF VERMONT  
Joint Fiscal Committee Review  
Limited Service - Grant Funded  
Position Request Form**

This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: Department of Labor Date: 11/02/2018

Name and Phone (of the person completing this request): Coleen Hale 802-828-4240

Request is for:

- Positions funded and attached to a new grant.  
 Positions funded and attached to an existing grant approved by JFO # 2781

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):  
 This is an MOU from Department of Children and Families. The document is attached.

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:

| <u>Title* of Position(s) Requested</u> | <u># of Positions</u> | <u>Division/Program</u> | <u>Grant Funding Period/Anticipated End Date</u> |
|--|-----------------------|-------------------------|--|
| Job Center Specialist II               | 3                     | Work Force Development  | December 2021                                    |

\*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:

VDOL will provide employment services throughout the state of Vermont, as defined in detail under Section D, Specifications. VDOL will provide employment services to program participants referred by DCF/ESD and partner agencies. These referrals will consist of 3SVT participants who agree to access 3SVT employment and training services and participants who are subject to the ABAWD time limits and who need to meet specific work requirements to maintain 3SVT benefits. VDOL will receive the referrals when 3SVT participants are screened as I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32 VSA Sec. 5(b)).

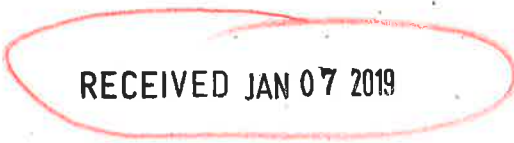
Rudsay Kurle 11/7/18  
 Signature of Agency or Department Head Date

[Signature] 11/21/18  
 Approved/Denied by Department of Human Resources Date

[Signature] 11 Jan 19  
 Approved/Denied by Finance and Management Date

[Signature] 1/21/19  
 Approved/Denied by Secretary of Administration Date

Comments:



**STATE OF VERMONT GRANT AGREEMENT** **Part 1-Grant Award Detail**

**SECTION I - GENERAL GRANT INFORMATION**

|  |   |  |                                    |  |
|--|---|--|------------------------------------|--|
| <sup>1</sup> Grant #: 03440-10308-19   |   | <sup>2</sup> Original <input checked="" type="checkbox"/>  | Amendment #                        |  |
| <sup>3</sup> Grant Title: SNAP Employment and Training Program   |   |  |                                    |  |
| <sup>4</sup> Amount Previously Awarded: \$0.00   |   | <sup>5</sup> Amount Awarded This Action:<br>\$1,312,374.63 |                                    | <sup>6</sup> Total Award Amount:<br>\$1,312,374.63   |
| <sup>7</sup> Award Start Date: 10/1/2018   |   | <sup>8</sup> Award End Date: 9/30/2019                     |                                    | <sup>9</sup> Subrecipient Award: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| <sup>10</sup> Vendor #:  | <sup>11</sup> Grantee Name: Vermont Department of Labor |  |                                    |  |
| <sup>12</sup> Grantee Address:   |   |  |                                    |  |
| <sup>13</sup> City:  |   | <sup>14</sup> State: VT                                    | <sup>15</sup> Zip Code:            |  |
| <sup>16</sup> State Granting Agency: AHS/DCF/ESD   |   |  | <sup>17</sup> Business Unit: 03440 |  |
| <sup>18</sup> Performance Measures:<br>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>                                       |   | <sup>19</sup> Match/In-Kind: Description:                  |                                    |  |
| <sup>20</sup> If this action is an amendment, the following is amended:<br>Amount: Funding Allocation: Performance Period: Scope of Work: Other: |   |  |                                    |  |

**SECTION II - SUBRECIPIENT AWARD INFORMATION**

|  |  |  |
|--|--|--|
| <sup>21</sup> Subrecipient DUNS #:   | <sup>22</sup> Indirect Rate: 0.00 %<br>(Approved rate or de minimis 10%) | <sup>23</sup> FFATA: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| <sup>24</sup> Subrecipient Fiscal Year End Month (MM format):                        | <sup>25</sup> R&D:   |  |
| <sup>26</sup> DUNS Registered Name (if different than VISION Vendor Name in Box 11): |  |  |

**SECTION III - FUNDING ALLOCATION**

| STATE FUNDS                                |                       |                                 |                                |  | 30 Special & Other Fund Descriptions |
|--|-----------------------|---------------------------------|--------------------------------|--|--------------------------------------|
| Fund Type                                  | <sup>27</sup> Awarded | <sup>28</sup> Award This Action | <sup>29</sup> Cumulative Award |  |                                      |
| General Fund                               |                       | \$559,505.81                    | \$0.00                         |  |                                      |
| Special Fund                               |                       |                                 | \$0.00                         |  |                                      |
| Global Commitment (non-subrecipient funds) |                       |                                 | \$0.00                         |  |                                      |
| Other State Funds                          |                       |                                 | \$0.00                         |  |                                      |

| FEDERAL FUNDS<br>(includes subrecipient Global Commitment funds) |                             |  |                                 |                                | Required Federal Award Information |                              |                           |
|--|-----------------------------|--|---------------------------------|--------------------------------|------------------------------------|------------------------------|---------------------------|
| <sup>31</sup> CFDA#  | <sup>32</sup> Program Title | <sup>33</sup> Awarded Previously           | <sup>34</sup> Award This Action | <sup>35</sup> Cumulative Award | <sup>36</sup> FAIN                 | <sup>37</sup> Fed Award Date | <sup>38</sup> Total Feder |
| 10.561   | SNAP E & T                  |  | \$559,505.82                    | \$0.00                         | 2019175251944                      | 9/24/18                      | \$559,505.82              |
| <sup>39</sup> Federal Awarding Agency:                           |                             | <sup>40</sup> Federal Award Project Descr: |                                 |                                |                                    |                              |                           |
| 10.561   | SNAP E&T 100%               |  | \$193,363.00                    | \$0.00                         | 184vt40656019                      | 9/24/18                      | \$193,363.00              |
| Federal Awarding Agency:   |                             | Federal Award Project Descr:               |                                 |                                |                                    |                              |                           |
|  |                             |  |                                 | \$0.00                         |                                    |                              |                           |
| Federal Awarding Agency:   |                             | Federal Award Project Descr:               |                                 |                                |                                    |                              |                           |
|  |                             |  |                                 | \$0.00                         |                                    |                              |                           |
| Federal Awarding Agency:   |                             | Federal Award Project Descr:               |                                 |                                |                                    |                              |                           |
|  |                             |  |                                 | \$0.00                         |                                    |                              |                           |
| Federal Awarding Agency:   |                             | Federal Award Project Descr:               |                                 |                                |                                    |                              |                           |
| Total Awarded - All Funds  |                             | \$0.00                                     | \$1,312,374.63                  | \$0.00                         |                                    |                              |                           |

**SECTION IV - CONTACT INFORMATION**

|   |  |
|---|--|
| <b>STATE GRANTING AGENCY</b>                  | <b>GRANTEE</b>                                     |
| NAME: Pat Duda                                | NAME: Lindsay Kurrle                               |
| TITLE: ESD Food & Nutrition Programs Director | TITLE: Commissioner of Vermont Department of Labor |
| PHONE: (802) 241-0603                         | PHONE: (802) 828-4301                              |
| EMAIL: Pat.Duda@vermont.gov                   | EMAIL: Lindsay.Kurrle@vermont.gov                  |

RECEIVED

## Aronowitz, Jason

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**From:** Pope, Aimee  
**Sent:** Thursday, January 10, 2019 11:30 AM  
**To:** Aronowitz, Jason  
**Subject:** RE: Limited Service Grant Funded Pos Request - VDOL

It's fine. I received it from the Appointing authority, they just didn't sign it if I recall. Typically I would want the signature, but in this one case, I think it is ok.

Thank you.

Aimee Pope  
Deputy Director for Classification and Position Management  
120 State Street-5th Floor | Montpelier, VT 05620-2505  
e-mail: [aimee.pope@vermont.gov](mailto:aimee.pope@vermont.gov)  
phone: 802-461-9903

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**From:** Aronowitz, Jason <Jason.Aronowitz@vermont.gov>  
**Sent:** Thursday, January 10, 2019 10:46 AM  
**To:** Pope, Aimee <Aimee.Pope@vermont.gov>  
**Subject:** Limited Service Grant Funded Pos Request - VDOL

Hi Aimee,

I noticed the Request for Classification Review included in the packet is missing the Appointing Authority's signature. Is that needed if you have already approved the request? Thanks - Jason

Jason Aronowitz  
Budget Analyst  
Finance and Management  
109 State Street 5<sup>th</sup> Floor  
Montpelier, VT 05609  
(802) 622-4102



**STATE OF VERMONT**  
LEGISLATIVE JOINT FISCAL OFFICE

MEMORANDUM

TO: Jim Reardon, Commissioner, Department of Finance and Management

FROM: Maria Belliveau, Associate Fiscal officer

DATE: September 15, 2015

SUBJECT: Final Notice of Approval for JFO #2774, 2777, and 2781

The following three requests were considered and approved by the Joint Fiscal Committee at their September 15, 2015 meeting.

JFO # 2774 - Request from the Vermont Department of Public Safety to authorize the establishment of one new limited service position.

<http://www.leg.state.vt.us/jfo/grants/docs/JFO%202774%20packet.pdf>

JFO #2777 – Request from the Department of Liquor Control for authority to accept a \$19,100 grant from the National Alcohol Beverage Control Association.

<http://www.leg.state.vt.us/jfo/grants/docs/JFO%202777%20packet.pdf>

JFO #2781 – Request from the Department of Children and Families to accept the first year of a three year grant from the USDA and authorize the establishment of 13 new limited service positions associated with the grant.

<http://www.leg.state.vt.us/jfo/grants/docs/JFO%202781%20packet.pdf>

Vermont Department for Children and Families  
Memorandum of Understanding (MOU)

This is a MOU between the Vermont Department for Children and Families-Economic Services Division (herein after called "DCF/ESD") and the Vermont Department of Labor (herein after called "VDOL").

**MOU:** Vermont Department of Labor (VDOL)

**MOU NO:** 03440-10308-19

**PURPOSE:** The purpose of this MOU is to provide comprehensive employment services to 3SquaresVT recipients.

**MAXIMUM DOLLAR AMOUNT:** In consideration of the services to be performed by VDOL, DCF/ESD agrees to pay, in accordance with the payment provisions specified in Attachment B, a sum not to exceed \$1,312,374.63 subject to State and Federal funding availability.

**TERM:** This MOU shall begin October 1, 2018 and end on September 30, 2019.

**PAYMENT PROVISIONS:** In consideration of the services to be performed by VDOL, DCF/ESD agrees to pay, in accordance with the payment provisions, a sum not to exceed \$1,312,374.63 for FFY 2019.

**FUNDING SOURCE:** \$193,363.00 Federal (FNS 100%) \$559,505.82 Federal (FNS E&T 50%); \$559,505.81 State (50%)

**AMENDMENTS:** No changes, modifications, or amendments in the terms and conditions of this MOU shall be effective unless reduced to writing, numbered, and signed by the duly authorized representative of DCF/ESD and VDOL.

**CANCELLATIONS:** This MOU may be cancelled by either party by giving written notice at least 90 days in advance.

**CONTACT PERSONS:** VDOL: David Lahr, 802-828-5277; David.Lahr@vermont.gov  
DCF/ESD: Pat Duda, 802-241-0603; pat.duda@vermont.gov

As a Subrecipient of federal funds, the Subrecipient is required to adhere to the following federal regulations:

- Guidance – 2 CFR Chapter 1, Chapter II, Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

These circulars may be found on the Office of Management and Budget website at: <https://www.whitehouse.gov/omb/circulars/>

STATE OF VERMONT- MEMORANDUM OF UNDERSTANDING  
DEPARTMENT FOR CHILDREN AND FAMILIES  
Department of Labor (VDOL)

MOU # 03440-10308-19  
Page 3 of 20

WE, THE UNDERSIGNED PARTIES, AGREE TO BE BOUND BY THIS MOU:

DEPARTMENT FOR CHILDREN AND FAMILIES  
ECONOMIC SERVICES DIVISION:

By:

e-Signed by Sean Brown  
on 2018-11-01 13:59:47 GMT

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Sean Brown, Deputy Commissioner  
Department for Children and Families, Economic Services Division

DEPARTMENT OF LABOR  
By:

e-Signed by Lindsay Kurrle  
on 2018-10-02 00:57:30 GMT

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Lindsay Kurrle, Commissioner  
Department of Labor

APPROVED AS TO FORM:  
By:

e-Signed by James Blum  
on 2018-10-01 17:48:41 GMT

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Assistant Attorney General

ATTACHMENT A  
SCOPE OF WORK TO BE PERFORMED

**A. PROGRAM BACKGROUND**

The 3SquaresVT program (3SVT) is administered by the Department for Children and Families, Economic Services Division (DCF/ESD). The Food and Nutrition Act of 2008 provides that the purpose of the Employment and Training (E&T) program is to provide Supplemental Nutrition Assistance Program (3SVT) participants opportunities to gain skills, training and experience that will improve their employment prospects and reduce their reliance on 3SVT benefits. DCF/ESD is entering into an agreement with the Vermont Department of Labor (VDOL) to provide E&T services, barrier reduction services and case management to 3SVT participants. E&T services will include supports for participants subject to the Able-bodied Adults without Dependents (ABAWD) time limits and who must meet work requirements in order to maintain 3SVT benefits.

**B. SERVICE DESCRIPTION**

VDOL will provide employment services throughout the state of Vermont, as defined in detail under Section D, Specifications. VDOL will provide employment services to program participants referred by DCF/ESD and partner agencies. These referrals will consist of 3SVT participants who agree to access 3SVT employment and training services and participants who are subject to the ABAWD time limits and who need to meet specific work requirements to maintain 3SVT benefits. VDOL will receive the referrals when 3SVT participants are screened as appropriate for E&T Services or are identified as subject to the ABAWD time limits.

**C. SERVICE GOALS & OUTCOMES**

- VDOL coordinated employment services will assist participants subject to the ABAWD time limit in meeting their work requirements, in order for participants to remain eligible for 3SVT and to bank countable months.
- VDOL coordinated employment services will assist all E&T participants in gaining skills for employability and self-sufficiency.
- VDOL will provide DCF/ESD with timely, consistent, communication and report outcomes that measure the results of referred program participants. (Attachment G)

**D. SPECIFICATIONS**

- Each of the 12 VDOL district offices will coordinate with other providers and provide the following:
  - Program introduction and orientation of E&T programming
  - Component explanation
  - Referral for assessment at Vocational Rehabilitation-Employee Assistance Program (VR-EAP)
  - Support service explanation
  - ABAWD work requirement and qualifying activities overview
  - Organization of monthly or more frequent regional team meetings
  - Participants sign an agreement to participate
  - Develop and implement employment plan for each participant
- VDOL will provide coordinated employment services to program participants using the coordinated efforts of the regional teams. Regional teams include but are not limited to Vocational Rehabilitation (VR), VR- Employee Assistance Program (EAP), Vermont Association of Business, Industry and Rehabilitation (VABIR) and Community Action Agencies.

- VDOL will use Vermont Job Link (VJL) to track participation in E&T. All cases must be updated at least every 30 days and include service data from all other providers.
- VDOL staff will work with approximately 100 people per FTE (full time equivalent), and 50 people per .5 FTE (part-time employee) each State fiscal year (FY).
- VDOL will ensure that each E&T referral is informed of the program requirements and the participants rights and responsibilities which include:
  - Completing a general E&T orientation
  - Track enrollment, participation and completion of E&T components within Vermont Job Link (VJL).
- VDOL will ensure that participants subject to the ABAWD time limits are informed of all opportunities and encouraged to comply with their work requirements which include:
  1. Completing orientation providing information specific to ABAWD work requirements and time limits.
  2. Meet with the customer to explore possible exemption from the work requirement and for completion of comparable workfare
  3. If a customer meets comparable workfare, explain ABAWD time limit exemptions and review the additional benefit of working with E&T to expand employability.
  4. Review all available E&T components (see Attachment H) Explain qualifying components, including variations with job search and job search training. Review the variations in each component regarding opportunities, hourly requirements and dual enrollment in components. Also review countable months and how to use them during 3SVT and E&T participation
  5. Educate participants about how they can meet their work requirement outside of E&T and how E&T can continue to assist them.
    - Working 20 or more hours a week, averaged monthly; and/or
      - Working means employment, self-employment, volunteer work and/or working in exchange for in-kind benefits.
    - Participating in and complying with the requirements of a work program for 20 or more hours a week.
      - Workforce Innovation and Opportunity Act (WIOA) Activities.
      - Section 236 of the Trade Act of 1974 activities, which include Trade Adjustment Assistance (TA) and Trade Readjustment Allowances (TRA).
    - Completing Comparable Workfare.
  6. Track enrollment, participation and completion of E&T components within (VJL).
- VDOL will schedule appointment with VR-EAP for all appropriate participants.
- VDOL will refer to Community Action Agencies Micro Business Development Program when participant indicates an interest is starting their own business.
- VDOL will accept reverse referrals from other agencies and provide status of the referral to the referring agency.
- VDOL will help participants subject to the ABAWD time limits find employment in one or more jobs, with a total of at least 20 hours per week, averaged monthly.



- 3SVT participants referred to VDOL, will be placed in allowable work activities to meet their work requirements when appropriate. (See Attachment G, Form D for details.)
- VDOL will send a letter of notification to participants subject to the ABAWD time limit advising them of non-compliance, defining issue(s) that must be resolved within a specific time frame to avoid using a countable month and possible loss of 3SVT eligibility. A copy of this letter will be sent to the referring DCF/ESD office and will be filed in On Base by DCF/ESD.
- VDOL will monitor and evaluate participant compliance and communicate via form ET 910, to DCF/ESD. DCF/ESD will review VDOL communication and process all eligibility decisions. (See Attachment G, Form C for details).
- The VDOL Program Coordinator will assign VDOL/E&T staff to participate in trainings and workshops with ESD as appropriate.
- VDOL will maintain a staff directory that includes name, title, geographic area covered, whether a part-time or full-time employee, the Program Coordinator, and the Regional Manager of all staff funded in whole or in part by this MOU.
- 3SVT participants eligible for VDOL services will be served by VDOL/E&T staff located in VDOL district offices. VDOL will assign a part-time VDOL Coordinator to oversee the program, to monitor work to ensure outcomes are achieved, to provide technical assistance and to coordinate as needed with DCF/ESD to solve programmatic questions.
- In all work performed, VDOL is expected to make reasonable accommodations for individuals with disabilities and limited English proficiency.
- 100% of the time VDOL will maintain all required program documentation and records.
- VDOL will be the case coordinator and is responsible for the case for the duration of participation. This includes data collection from other service providers.
- VDOL will provide data and required reports Monthly/Quarterly and Annually depending on report.
- VDOL will work with E&T partners and stakeholders to track E&T participation and ABAWD work requirements compliance.
- VDOL will ensure E&T participant reimbursements are not being issued to individuals receiving reimbursements for the same item through another E&T provider.
- VDOL will track E&T participation and process E&T participant reimbursements in the ACCESS system for eligible participants.
- VDOL will coordinate with E&T partners to provide full range of coordinated services when working with mutual participants.
- VDOL will check ACCESS for Jobs for Independence (JFI) status/participation to be sure the embargo pilot rule is enforced.
- VDOL will report the percentage of participants subject to the ABAWD time limits that obtained employment this reporting quarter on ATTACHMENT G, Form A.
- VDOL will report the percentage of participants subject to the ABAWD time limits from the previous quarter that are still employed on ATTACHMENT G, Form A
- VDOL will issue participant reimbursements, when appropriate, using ACCESS check-write/EBT system.

**VDOL staff will provide the following services statewide:**

- Utilize employment options that build upon the E&T participant's ability to obtain and retain unsubsidized employment.
- Refer E&T participants to VDOL programs as appropriate.
- Refer E&T participants to partner programs and services as appropriate.
- Follow all 3SVT rules and procedures for the employment and training program.
- Perform job development activities through a process that VDOL utilizes, such as a contact with employers in person, on the phone, etc.
- Record all employer outreach activities and contacts in VJL.
- Maintain relationships with support resources such as mental health programs and community supports.
- Informing ESD via the ET 910 of any changes in the customer circumstance that could affect ABAWD time limit status, E&T participation or 3SVT eligibility.

**Data Transmission and Security:**

- The Agency of Human Services, DCF/ESD will transmit a data file to VDOL weekly.
- VDOL will import that data into their VJL system.
- VDOL will ensure only authorized staff have access to this data for the purposes of completing the duties as outlined by this agreement.
- VDOL will ensure the safety and security of ESD data.
- VDOL will notify ESD in writing of any data breach, within 24 hours of them becoming aware of said breach.
- ESD will transmit the file using a secure, encrypted method.
- The file sent to VDOL will contain records for 3SQVT participants eligible for VDOL services (under this agreement) at the time the file is created.
- The file sent to VDOL will contain the following data elements:
  - Social Security Number
  - Date of Birth
  - First and Last Name
  - Person ID#
  - 3SquaresVT/Food Stamp (FS) Status
  - FS Status Date
  - Reach Up Financial Assistance (RUFA) Status
  - RUFA Status Date
  - Able Bodied Adult Without Dependents (ABAWD) Status
  - Work Registration Code
- VDOL agrees ESD data shall not be relocated outside of the continental United States.
- At the termination of this agreement, VDOL will delete in entirety, or return, any ESD data, at ESD's request.
- VDOL will not transmit personally identifiable information, such as full social security numbers for any individuals per VDOL policy #4, Protection of Confidential Information (updated May 18, 2018).

**Supervision**

- VDOL will supervise the VDOL/E&T staff through its VDOL Program Coordinator and regional office managers, to ensure that VDOL staff members meet the specifications of work outlined above.
- The VDOL Program Coordinator will contact ESD to address issues as they arise.
- The assigned VDOL Program Coordinator and VDOL Regional Managers will ensure that VDOL staff will:
  - Maintain case notes and create confidential case files for participants.
  - DCF/ESD will work with VDOL Program Coordinator, Workforce Development Director and Commissioner to identify practices that need to be changed or strengthened to comply with specifications of work.

**Vacancies**

- Staffing will be based on funding in the MOU award and may be reviewed on a quarterly basis and adjusted by the VDOL Commissioner after discussion with DCF/ESD.
- VDOL agrees to provide notice regarding VDOL/E&T staff vacancies and will notify DCF/ESD Program Manager of their plan to develop coverage for the vacancy.

**Fair Hearings**

- VDOL staff members will participate as needed in Fair Hearings and/or provide any documentation requested by DCF/ESD for the hearing. VDOL will fully participate in the adjudicatory process inclusive of completing the ESD 113.

**Customer Service**

- All VDOL staff members are to maintain a welcoming, accessible and consumer-oriented environment for 3SVT participants. This specifically includes:
  1. Welcoming: All participant program complaints will be addressed internally; unresolved complaints will be sent to DCF/ESD. VDOL staff will be aware of civil rights issues and assure equal application of all rules and policies regarding 3SVT participants.
  2. Participant Involvement: VDOL staff will involve participants, to the degree possible, in VDOL's delivery of services.
  3. Access: VDOL staff will engage in a process that reduces and eliminates any barriers to access for 3SVT participants, including language services for those with limited English proficiency.

**Records:**

- VDOL staff members who have been specifically authorized will have access to client data. The information will be stored in a secure location and the materials will be destroyed when they are no longer necessary, as dictated by the State of Vermont rules regarding length of time for keeping records.
- The VDOL Program Coordinator, Workforce Development Director, Commissioner of Labor and DCF/ESD will be notified immediately of any breach of security of client data.

**E. PERFORMANCE MEASURES:**

- 50% of participants who signed the agreement to participate will be engaged in a qualifying component, within 10 days of initial visit. This will be based on the unduplicated referral count.
- In the event that any of the outcomes above fall below 75% of the goal, VDOL, in conjunction with a DCF/ESD Central Office designee, will develop a corrective action plan signed by both parties and submitted to the Grant Manager within 30 days of submission of the quarterly report that indicated

that VDOL's performance fell below established minimums. DCF/ESD will provide VDOL a monthly performance update relating directly to the prescribed performance benchmarks.

- Continued failure to meet the minimum requirements established for any of the outcomes may result in the cancellation of this agreement.

#### F. PROGRAM ADMINISTRATION AND EVALUATION

VDOL reports will be submitted quarterly. DCF/ESD will provide quarterly data to VDOL on an agreed upon date regarding the number of E&T participants. DCF/ESD will monitor and evaluate VDOL's performance based on the following Program and Financial Reports and correspondence with VDOL.

##### Weekly Data Fetch

- The mutually agreed upon data extract from VJL will be submitted to the DCF/ESD Data Manager weekly, every Thursday. If the data included in this report is of a sensitive nature (PII, PHI, etc.), the data will be transmitted to ESD via a secure, encrypted method. Any discrepancies or questions will be resolved in a timely manner.

##### Quarterly Program Report

- The quarterly program reports (FNS-83) will be submitted to the DCF/ESD Grant Manager no later than 30 days following the end of the quarter. The program report must be submitted via email or mail using the forms in Attachment G. The results of this report will be shared with USDA's Food and Nutrition Service (FNS). If FNS requires changes to the 583 Report the State will notify VDOL in a timely manner and work arounds will be mutually agreed upon.

##### Annual Performance Report

- The annual performance report includes all data from the previous federal fiscal year October 1, 2018 – September 30, 2019 (FFY19) and will be submitted to the DCF/ESD Grant Manager 60 days following the end of federal fiscal year December 1, 2019. The annual performance report must be submitted via email or mail using the forms in Attachment H. The results of this report will be shared with FNS. If FNS requires changes to the Annual Report the State will notify VDOL in a timely manner and work arounds will be mutually agreed upon.

##### Financial Reports

- The Financial Report and Request for Grant Funds form will be sent with an original signature via regular mail. Satisfactory program reports must be received within 30 days following the end of the quarter, to receive any subsequent payments.

ATTACHMENT B  
PAYMENT PROVISIONS

1. Upon receipt and approval of VDOL quarterly program and financial reports for October through December of 2018, and an electronic memo from VDOL requesting the applicable transfer amount, ESD will initiate an interdepartmental transfer to reimburse VDOL in the amount of actual reported VDOL expenditures for that quarter, up to the maximum payable for this MOU.
2. Upon receipt and approval of VDOL quarterly program and financial reports for January through March of 2019, and an electronic memo from VDOL requesting the applicable transfer amount, ESD will initiate an interdepartmental transfer to reimburse VDOL in the amount of actual reported VDOL expenditures for that quarter, up to the balance remaining of the maximum payable for this MOU.
3. Upon receipt and approval of VDOL quarterly program and financial reports for April through June of 2019, and an electronic memo from VDOL requesting the applicable transfer amount, ESD will initiate an interdepartmental transfer to reimburse VDOL in the amount of actual reported VDOL expenditures for that quarter, up to the balance remaining of the maximum payable for this MOU.
4. Upon receipt and approval of VDOL quarterly program and financial reports for July through September of 2019, and an electronic memo from VDOL requesting the applicable transfer amount, ESD will initiate an interdepartmental transfer to reimburse VDOL in the amount of actual reported VDOL expenditures for that quarter, up to the balance remaining of the maximum payable for this MOU.
5. A final report including a brief narrative will be due and submitted to the ICAN Benefit Programs Assistant Administrator within 60 days of the end of the MOU. Final payment under this MOU is subject to receipt of invoice marked final and review and acceptance of the final report, by DCF/ESD, using the reporting requirements outlined in Attachment G, and optional narrative reports, and satisfactory resolution of performance issues.
6. Invoices submitted on the Financial Report & Request for Grant Funds form more than 60 days after the quarter of service may not be honored.

**Maximum Amount:**

The maximum dollar amount payable for this agreement is not intended to guarantee any amount of payment. Payment will be made for services listed in the specifications of work that are actually performed and approved by the agreement manager, up to the maximum allowable amount, and is subject to the availability of the federal funds. The maximum amount payable by ESD to VDOL via interdepartmental transfers shall be for \$1,312,374.63

STATE OF VERMONT- MEMORANDUM OF UNDERSTANDING  
DEPARTMENT FOR CHILDREN AND FAMILIES  
Department of Labor (VDOL)

MOU # 03440-10308-19  
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ICAN BUDGET:

|                               | VDOL FFY19             |
|-------------------------------|------------------------|
| <b>Direct Costs</b>           |                        |
| Salary/Wages                  | \$ 663,289.01          |
| Fringe                        | \$ 415,007.48          |
| Postage                       | \$ 500.00              |
| Materials                     | \$ 5,000.00            |
| Contractual - AJL Enhancement | \$ 30,000.00           |
| Travel                        | \$ 700.00              |
| Building/Space                | \$ 45,805.00           |
| <b>Total Direct:</b>          | <b>\$ 1,160,301.49</b> |
| In Direct:                    | \$ 152,073.14          |
| <b>Total:</b>                 | <b>\$ 1,312,374.63</b> |

CONTACT AND PAYMENT REQUEST INFORMATION

Program Reports, Financial Reports, and Request for Payment should be sent to:

DCF/Economic Services Division  
Tracy Collier  
ICAN Benefits Assistant Administrator  
HC 1 South Dr.  
280 State Dr.  
Waterbury, VT 05671-1020  
Tracy.collier@vermont.gov

Remittance Address of VDOL:

Vermont Department of Labor  
David Lahr and Chad Wawrzyniak  
5 Green Mountain Drive  
P.O. Box 488  
Montpelier, VT 05601-0488

ATTACHMENT G  
 PROGRAM REPORT FORM - Quarterly  
 FORM A

Participant Activity - VDOL

| Participant's Last Name | First Name | SSN | Date of First VDOL Service | Engaged in Employment Related Activities within 10 days? Y/N | Person ID # (ACCESS) | VJL# |
|-------------------------|------------|-----|----------------------------|--|----------------------|------|
| Sorted by District      |            |     |                            |  |                      |      |
|                         |            |     |                            |  |                      |      |
|                         |            |     |                            |  |                      |      |

- Total Number of referrals (duplicated): \_\_\_\_\_
- Total Number of referrals (unduplicated): \_\_\_\_\_
- Number of participants that obtained employment this reporting quarter? \_\_\_\_\_
- Number of participants from the previous reporting quarter that have maintained employment?  
 \_\_\_\_\_

ATTACHMENT G  
 PROGRAM REPORT

Form B

|   |   |   |                     |                    |                        |
|---|---|---|---------------------|--------------------|------------------------|
| <b>SNAP EMPLOYMENT AND TRAINING<br/>(E &amp; T) PROGRAM ACTIVITY REPORT</b>   |   | QUARTER COVERED                                     |                     |                    |                        |
|   |   | ___ First      ___ Thrd<br>___ Second    ___ Fourth | FEDERAL FISCAL YEAR |                    |                        |
| <b>COMPLETE ON FIRST QUARTER REPORT</b>   |   |   |                     |                    |                        |
| <b>COMPLETE EACH QUARTER</b>  |   |   |                     |                    |                        |
|   | MONTH 1                                   | MONTH 2   | MONTH 3             | QUARTERLY<br>TOTAL | FISCAL YEAR TO<br>DATE |
|   |   |   |                     |                    |                        |
| 2. Number of ABAWD applicants and recipients participating in qualifying components   |   |   |                     |                    |                        |
| 3. Number of all other applicants and recipients (including ABAWDs involved in <u>non-qualifying</u> activities) participating in qualifying components |   |   |                     |                    |                        |
| <b>COMPLETE ON FOURTH QUARTER REPORT FOR ENTIRE FISCAL YEAR</b>   |   |   |                     |                    |                        |
| 4. Number of Individuals who participated in each component <i>(list components and attach separate sheet if necessary)</i>                             |   |   |                     |                    |                        |
| COMPONENTS  | NUMBER WHO PARTICIPATED IN EACH COMPONENT |   |                     |                    |                        |
|   | ABAWD                                     | NON-ABAWD   | TOTAL               |                    |                        |
| Job Search  |   |   |                     |                    |                        |
| Job Search Training   |   |   |                     |                    |                        |
| Workfare  |   |   |                     |                    |                        |
| Work Experience   |   |   |                     |                    |                        |
| Education   |   |   |                     |                    |                        |
| WIOA  |   |   |                     |                    |                        |
| Self-Employment Training  |   |   |                     |                    |                        |
| Job Retention   |   |   |                     |                    |                        |
| TOTAL COMPONENT PARTICIPATION   |   |   |                     |                    |                        |
| EMPLOYMENT AND TRAINING PROGRAM PARTICIPATION   |   |   |                     |                    |                        |
| NUMBER WHO PARTICIPATED IN THE E & T PROGRAM  |   |   |                     |                    |                        |
| 5. Number of Individuals who participated in the E & T Program during the fiscal year   |   |   |                     |                    |                        |
| <b>COMPLETE ON FOURTH QUARTER REPORT FOR ENTIRE FISCAL YEAR</b>   |   |   |                     |                    |                        |
| 6. Number of Individuals who participated in each component <i>(list components and attach separate sheet if necessary)</i>                             |   |   |                     |                    |                        |
| COMPONENTS  | NUMBER WHO PARTICIPATED IN EACH COMPONENT |   |                     |                    |                        |
|   | ABAWD                                     | NON-ABAWD   | TOTAL               |                    |                        |
| Job Search  |   |   |                     |                    |                        |
| Job Search Training   |   |   |                     |                    |                        |
| Workfare  |   |   |                     |                    |                        |
| Work Experience   |   |   |                     |                    |                        |
| Education   |   |   |                     |                    |                        |
| WIOA  |   |   |                     |                    |                        |
| Self-Employment Training  |   |   |                     |                    |                        |
| Job Retention   |   |   |                     |                    |                        |
| TOTAL COMPONENT PARTICIPATION   |   |   |                     |                    |                        |
| EMPLOYMENT AND TRAINING PROGRAM PARTICIPATION   |   |   |                     |                    |                        |
| NUMBER WHO PARTICIPATED IN THE E & T PROGRAM  |   |   |                     |                    |                        |
| 7. Number of Individuals who participated in the E & T Program during the fiscal year   |   |   |                     |                    |                        |



ATTACHMENT G  
 PROGRAM REPORT  
 Form C

| SNAP E&T Annual Report – Fiscal Year  |                  |                    |                         |
|---|------------------|--------------------|-------------------------|
| Reporting period:   |                  |                    |                         |
| National Reporting Measures   |                  |                    |                         |
| Reporting Measure   | Data Source      | Percentage / Value | Numerator / Denominator |
| Unsubsidized employment in 2nd quarter after completion of participation in E&T               | VJL Demographics |                    |                         |
| Median Quarterly Wages in 2nd quarter after completion of participation in E&T                | VJL Demographics |                    |                         |
| Unsubsidized employment in 4th quarter after completion of participation in E&T               |                  |                    |                         |
| Completion of an educational, training, work experience, or an on- the-job training component | VJL Demographics |                    |                         |
| National reporting measures disaggregated characteristics                                     |                  |                    |                         |

Submit summary data that disaggregate the national reporting measures by the following characteristics:

| Reporting Measure  | Characteristic  | Data Source                            | Value | Numerator / Denominator |
|--|---|--|-------|-------------------------|
| Unsubsidized employment in 2nd quarter after completion of participation in E&T              | Voluntary Participant   | VJL Demographics/State UI wage records |       |                         |
|  | Mandatory Participant   | None are Mandatory                     |       |                         |
|  | Received high school diploma or equivalency prior to participation in E&T | VJL Demographics                       |       |                         |
|  | education level unknown   | VJL Demographics                       |       |                         |
|  | ABAWD   | VJL Demographics                       |       |                         |
| Median Quarterly Wages in 2nd quarter after completion of participation in E&T               | Voluntary   | VJL Demographics/State UI wage records |       |                         |
|  | Mandatory   | N/A                                    | N/A   | N/A                     |
|  | Received high school diploma or equivalency prior to participation in E&T | VJL Demographics                       |       |                         |
|  | education level unknown   | VJL Demographics                       |       |                         |
|  | ABAWD   | VJL Demographics                       |       |                         |
| Unsubsidized employment in 4th quarter after completion of participation in E&T              | Voluntary   | Data not available                     |       |                         |
|  | Mandatory   | None are Mandatory                     |       |                         |
|  | Received high school diploma  | Data not available                     |       |                         |
|  | education level unknown   | Data not available                     |       |                         |
|  | ABAWD   | Data not available                     |       |                         |
| Completion of an educational, training, work experience, or an on-the-job training component | Voluntary   | VJL Demographics                       |       |                         |
|  | Mandatory   | None are Mandatory                     |       |                         |
|  | Received high school diploma  | VJL Demographics                       |       |                         |
|  | education level unknown   | VJL Demographics                       |       |                         |
|  | ABAWD   | VJL Demographics                       |       |                         |

ATTACHMENT G  
 PROGRAM REPORT  
 Form C - continued

| <u>Participant characteristics</u>  |   |            |              |
|---|---|------------|--------------|
| Total number and percentage for the following six characteristics of all E&T participants served in the reporting fiscal year:  |   |            |              |
| Characteristic  | Characteristic Detail                                 | Percentage | Total Number |
| Voluntary vs. Mandatory   | Voluntary Participants                                |            |              |
|   | Mandatory Participants                                |            |              |
| Education   | Received high school diploma or equivalency prior to  |            |              |
|   | Unknown   |            |              |
| ABAWD   | Has ABAWD status at the start of participation in E&T |            |              |
| Speak English as a second language  | English language learners                             |            |              |
|   | Unknown   |            |              |
| Gender  | Male  |            |              |
|   | Female  |            |              |
|   | Unknown   |            |              |
| Age   | Between 16-17   |            |              |
|   | Between 18-35   |            |              |
|   | Between 36-49   |            |              |
|   | Between 50-59   |            |              |
|   | 60 or older   |            |              |
| <u>ABAWD Pledge State Reporting</u>   |   |            |              |
| States that commit to offering all at-risk ABAWDs a slot in a qualifying activity and have received an additional allocation of funds must include the following information. |   |            |              |
| Reporting Requirement   | Detail  |            |              |
| The monthly average number of individuals to whom the State offered a position in a qualifying E&T activity or workfare program   |   |            |              |
| The monthly average number of individuals who participated in such programs   |   |            |              |
| A description of the types of employment and training programs the State agency offered to at-risk ABAWDs and the availability of those programs throughout the State         |   |            |              |

ATTACHMENT G  
 PROGRAM REPORT  
 Form D

| State Component Detail Measures   |   |   |
|---|---|---|
| Component   | Measure   | Value   |
| The State will include the reporting measures as indicated in their E&T State Plan for any measure that the State intends to serve more than 100 participants during the fiscal year. |   |   |
| Job Search  | The number of participants who are employed in the first quarter after exiting E & T services divided by the total number of participants who've received any of the qualified Job Search services during the report period   |   |
| Self Employed   | The number of ICAN participants who become self-employed after completion of the self-employment component.   | Will be reported by Office of Economic Opportunity (OEO). |
| Job Retention Services  | The number of participants who retain employment for 90 days following participation in qualified job retention services under the SNAP E&T plan.   |   |
| Education   | The number of participants who gain employment or receive certification from an educational entity, such as, but not limited to, vocational training, high school equivalency, English as a second language, adult basic education, divided by the total number of participants who've received any of the qualified Education services under the SNAP E&T plan during the report period. |   |
| Work Experience   | The number of participants who gain employment in the first quarter after exiting E&T services divided by the total number of participants who've received any of the qualified Work Experience services under the SNAP E&T plan during the report period.  |   |
| Job Search Training   | The number of participants who are employed in the first quarter after exiting E&T services divided by the total number of participants who've received any of the qualified Job Search Training during the report period.  |   |
| WIOA  | The number of participants who gain employment following participation in qualified WIOA services under the SNAP E&T plan divided by the total number of participants who've received any of the qualified WIOA services under the SNAP E&T plan during the report period.  |   |
| Workfare  | The number of participants who are employed in the first quarter after exiting E & T services divided by the total number of individuals who participated in Workfare during the report period. ***<br>The denominator is limited to only those who did Workfare for any amount of time   |   |

ATTACHMENT G  
PROGRAM REPORT  
Form E

Interagency Notification  
ABAWD 3SquaresVT Work Plan

Date: \_\_\_\_\_ Case number: XXXXXX \_\_\_\_\_

Registrant's name \_\_\_\_\_ Town of residence \_\_\_\_\_ XXX-XX-  
Social Security number \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

1. Direction:  DOL to ESD  ESD to DOL

2. 3SquaresVT status change: \_\_\_\_\_ Date: \_\_\_\_\_  
a.  Exempt. Reason: \_\_\_\_\_  
b.  No longer active \_\_\_\_\_  
c.  Benefit amount: \$ \_\_\_\_\_

3. Participating in Work For Benefits (WFB)  
a. Volunteering at: \_\_\_\_\_  
b.  Initial job search

4. Employment activity: *(give details in #7 below)* \_\_\_\_\_  
a.  Obtained employment at \_\_\_\_\_  
b.  Participating in work program (job search may be an eligible component)

5. Failure to comply without good cause: *(give details in #7 below)* \_\_\_\_\_  
a.  Three 21s are used  
b.  Did not volunteer for Work for Benefits  
c.  Did not report for DOL interview  
d.  Refused job referral  
e.  Did not report for job interview  
f.  Refused job offer  
g.  Did not report to job  
h.  Did not complete job search  
i.  Quit job

6. Regaining Eligibility or CURE completion:  
 Completed WFBs or other work program.  
Dates \_\_\_\_\_  
Hours \_\_\_\_\_

7. Supplemental information:

ATTACHMENT G  
 COMPONENT DEFINITION AND OUTCOMES  
 Form F

| SNAP E&T Components      | Component Definition   | Outcomes (examples) i.e reporting   |
|--------------------------|--|---|
| Job Search               | Requires participants to make a pre-determined number of inquiries to prospective employers over a specified period of time. (12 contacts in 2 months time)  | The number of participants who are employed in the first quarter after exiting E & T services divided by the total number of participants who've received any of the qualified Job Search services during the report period   |
| Job Search Training      | Enhances job search readiness of participants by teaching them job seeking techniques, increasing job search motivation and boosting self confidence. This includes job skills assessment, job clubs, job placement services, or other training or support activities. | The number of participants who are employed in the first quarter after exiting E&T services divided by the total number of participants who've received any of the qualified Job Search Training during the report period.  |
| Workfare                 | Participants are required to work off the value of the household's monthly SNAP allotment. This assignment can be at private or public non profit as a condition of eligibility.   | The number of participants who are employed in the first quarter after exiting E & T services divided by the total number of individuals who participated in Workfare during the report period.<br>** The denominator is limited to only those who did Workfare for any amount of time  |
| Work Experience          | The work experience component is designed to improve employability of participant through work experience/training. Can be at private for profit companies.  | The number of participants who gain employment in the first quarter after exiting E&T services divided by the total number of participants who've received any of the qualified Work Experience services under the SNAP E&T plan during the report period.  |
| Education                | Wide range of activities that will increase basic skills and employability of SNAP participants. (ABE, ESL, GED, post secondary ed, Vocational and Tech) The training should be driven by job market.  | The number of participants who gain employment or receive certification from an educational entity, such as, but not limited to, vocational training, high school equivalency, English as a second language, adult basic education, divided by the total number of participants who've received any of the qualified Education services under the SNAP E&T plan during the report period. |
| WIOA                     | This component includes job training services that are managed by state agencies under Workforce Investment Act. (literacy, occupational training, on-the-job training, work experience, job search, and basic readjustment services)                                  | The number of participants who gain employment following participation in qualified WIOA services under the SNAP E&T plan divided by the total number of participants who've received any of the qualified WIOA services under the SNAP E&T plan during the report period.  |
| Self Employment Training | Improves employability of participants by training them to design and operate a small business or another self employment venture.   | The number of SNAP E&T participants who become self-employed within first quarter after completion of self-employment component.  |
| Job Retention            | Provides support services up to 90 days to individuals who secured employment. Only those who received E&T services are eligible for job retention. Job retention supports must be reasonable and necessary to retain the current employment.                          | The number of participants who retain employment for 90 days following participation in qualified job retention services under the SNAP E&T plan.   |

ATTACHMENT G  
FFY-2019 QUARTERLY FINANCIAL REPORT  
ICAN

Grantee: Vermont Department of Labor

MOU #: 03440-10308-19

Report for quarter from: \_\_\_\_\_ through \_\_\_\_\_

Expenditures For Report Quarter Only

|                        | (A)<br>Total Grant<br>Budget | (B)<br>Expended In<br>Report Quarter | (C)<br>Total Expended<br>Year-To-Date |
|------------------------|------------------------------|--------------------------------------|---------------------------------------|
| <u>Personnel</u>       |                              |                                      |                                       |
| Salaries               | \$ 663,289.01                | _____                                | _____                                 |
| Fringe                 | \$ 415,007.48                | _____                                | _____                                 |
| Subtotal Personnel     | \$ 1,078,296.49              | _____                                | _____                                 |
| <u>Non-Personnel</u>   |                              |                                      |                                       |
| Supplies               | \$ 35,000.00                 | _____                                | _____                                 |
| Postage                | \$ 500.00                    | _____                                | _____                                 |
| Travel                 | \$ 700.00                    | _____                                | _____                                 |
| Space                  | \$ 45,805.00                 | _____                                | _____                                 |
| Subtotal Non-Personnel | \$ 82,005.00                 | _____                                | _____                                 |
| <u>Indirect Costs</u>  | \$ 152,073.14                | _____                                | _____                                 |
| TOTAL EXPENDITURES:    | \$ 1,312,374.63              | _____                                | _____                                 |

SIGNATURE:

\_\_\_\_\_  
Executive or Financial Director

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

ATTACHMENT G  
REQUEST FOR GRANT PAYMENT

REQUEST TO: Economic Services Division, VT Department for Children and Families

MAIL REQUEST TO: DCF Economic Services Division  
HC 1 South / 280 State Drive / Waterbury, VT 05671-1020

FROM: Agency: Department of Labor (VDOL)

RE: FFY-2019 MOU for ICAN

Term: October 1, 2018 – September 30, 2019

State-assigned Grant number: 03440-10308-19 Request #: \_\_\_\_\_ Final Invoice: Yes \_\_\_ No \_\_\_

Have required Quarterly work reports been submitted? Yes \_\_\_ No \_\_\_

- A) Maximum amount payable to Subrecipient: \$ 1,312,374.63
- B) Total payments received on Grant previously: \$ \_\_\_\_\_
- C) Balance (line A minus line B) \$ \_\_\_\_\_
- D) Total Grant expenditures in Column B of the financial report  
for the quarter ending \_\_\_\_\_  
mm/dd/yy \$ \_\_\_\_\_
- E) Grant Balance (line C minus line D) \$ \_\_\_\_\_
- F) REQUEST AMOUNT determined as follows: \$ \_\_\_\_\_  
*For requests submitted during the Grant term, request the amount in line D or line C, whichever is lower. A request submitted with the final quarterly report may be for the amount in line C if the State had withheld funds earlier and the total YTD allowable reported expenditures exhausted the maximum payable under the Grant.*

GRANTEE SIGNATURE:

\_\_\_\_\_  
Executive or Financial Director Title Date

For ESD use only: ESD Grant manager reviewed required reports submitted, assessed Subrecipient performance, and approves payment in the amount of: \$ \_\_\_\_\_

Explanation if amount approved differs from amount requested in line F:  
 10% of maximum payable is withheld until Grant term ends and final Grant reports are approved; or  
 Other:

ESD Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Job Specifications

[Back to Job Specifications List](#)

## Job Center Specialist II

**Job Code:** 234520

**Pay Plan:** Classified

**Pay Grade:** 21

**Occupational Category:** Administrative Services, HR & Fiscal Operations

**Effective Date:** 09/07/2014

### Class Definition:

Assist clients with significant barriers to employment to obtain and maintain employment on a long-term basis, by performing intensive case management services, primarily in a VDOL American Job Center district office.

### Examples of Work:

The Job Center Specialist II works within the Vermont Department of Labor, Workforce Development Division's American Job Centers and provides case management services to job seekers. Promotes and delivers comprehensive services offered through the VDOL's American Job Centers to job seekers and employers. The JCS II collaborates with partner organizations and agencies to promote, whenever possible, an effective and seamless workforce-education, training and job placement system that will benefit the individual client.



Determines eligibility for federal and/or state funded programs and assists job seekers with significant barriers to employment to obtain and maintain employment on a long-term basis. With the goal of working toward securing full-time, unsubsidized employment for participants, JCS II will provide case management services, generally within one program area, but may also refer and/or co-enroll participant in multiple programs as able and necessary. JCS II must be well-versed and knowledgeable in VDOL program resources and assistance, as well as programs of our partner agencies and organizations. Ensures that clients are co-enrolled in all programs for which they qualify, and request assistance from VDOL case managers in other programs to assist and enroll the client into applicable programs, including, but not limited to, WIOA Adult, Youth, or Dislocated Worker; Trade (TAA); Veterans programs; other options such as programs funded by special grants such as NEG, or other programs leading to job training, credentials, certifications, and employment.

Interviews clients who are often under significant personal and financial burden, and who may exhibit significant stress and anxiety, and may be uncooperative or angry. It is expected that JCS II staff will engage all clients in a manner that exhibits professionalism, sensitivity, fairness, tact and diplomacy, and helps clients understand the services available to them from our staff and programs. Supportive attitude and actions are expected to be demonstrated in dealing with clients.

Administers formal and informal assessments to participants to identify skills, abilities, interests and barriers to employment, and develop employment plans. Reviews and analyzes the results of assessments to identify and address specific training needs, discusses assessment with the participant, and advises on training and employment opportunities. Guide participants on employment interests, aptitudes, labor-market information, and best practices for connecting with, and marketing themselves to, employers.

Identifies skills gaps and assess the education and training needed to bridge the gaps. Creates employment plans with participants by analyzing results of their assessment, in-depth interviews, local labor market information and employer workforce needs. Monitors and revises employability plans based on participant progress, barriers and changes in needs in order to maintain or gain employment.

Advises clients on specific training opportunities, participates in the development of program training sites, develops special work or training placement opportunities for grant-funded programs and provides job search skills and employability training both individually and through group sessions. Provides specific job search services, including, but not limited to, resume preparation, interviewing skills, utilization of labor market information and networking.

Supports training participants and employers in maintaining employment by monitoring client's job training progress and providing job coaching, mentoring and support to participants to ensure success. Identifies and addresses specific areas of concern or training needs.

Proposes and negotiates On-the-Job Training contracts with employers utilizing federal OJT funding, which defrays a portion of the costs associated with hiring and training of new employees. This includes developing customized training outlines and job descriptions, and negotiating reimbursement rates for training costs.

Develops and maintains effective and cooperative relationships with community partners for the benefit of clients, job seekers and employers. Collaborates with community partners, as appropriate, to co-case manage participants in training programs. Negotiates shared costs associated with training of participants.

Documents all services and maintains accurate records in the method and manner determined by the WDD Director or Commissioner to ensure compliance with all state and federally mandated performance measures. Properly and accurately collect documents, data, or other relevant materials for case work and program eligibility determination, and maintain accurate and clear case notes and participant records.

Complies with all federal and state laws, policies and procedures regarding confidentiality of participant records, and will report any suspected or actual security breaches immediately to the WDD Director or Commissioner.

Engages in outreach to registered VJL applicants seeking employment. Identifies and reports information of individuals seeking employment to include training needs. Alerts jobseekers to opportunities available to them based on information provided in VJL registration. Matching them to jobs or trainings as appropriate.

Engages in outreach to local and regional businesses to promote VDOL services for employers. Identifies and reports information on recruitment and training needs of area employers, and serves as a resource for employers, with particular emphasis on connecting the employer to job-seekers, but also connecting them to other units within VDOL to assist them with their employment needs and questions.

Provides specialized recruitment services for existing, new and expanding businesses including, but not limited to, organizing, marketing and hosting job fairs and hiring events, providing interview space, screening and assessing candidates, assisting in recruitment efforts and strategies.

As assigned by the WOO Director or Commissioner, may occasionally participate in meetings with other organization such as local WIBS, chambers, economic development organizations, or other state agencies and partners, as it pertains to serving the needs of

VDOL clients or the local business community. Assists in facilitating Rapid Response events, as assigned.

Mentors and guides Job Center Specialist I staff and may be asked by management to help train JCS I staff in a district office.

Assists with marketing and promoting apprenticeship training programs to clients and to the business community. May be asked to provide support to the apprenticeship program.

**Environmental Factors:**

Work is performed under the direction and supervision of the VDOL Regional Manager and/or Supervisor, with the expectation that a significant amount of independent judgment will be exercised in the performance of the duties. Work is reviewed by the VDOL Manager and/or Supervisor.

During the day, staff will experience significant public and client interaction which may involve individuals who are under personal and financial stress, or persons who are exhibiting angry attitude or behavior.

**Minimum Qualifications**

**Knowledge, Skills and Abilities:**

Ability to adhere to state and federal laws and regulations, and State and VDOL rules, regulations and policies

Ability to timely and effectively manage work tasks each day

Ability to effectively manage caseload to successful outcomes for clients Ability to demonstrate discretion, integrity and professionalism

Ability to adhere to strict confidentiality relating to client information

Ability to communicate effectively and professionally, both verbally and in writing

Ability to work collaboratively and respectfully with all VDOL employees, and with partner organizations, clients, and customers

Ability to work effectively and respectfully with persons from diverse backgrounds, including clients who may present significant barriers to employment

Ability to engage in concise and effective public speaking in order to facilitate workshops, engage in other presentations, and participate in or facilitate meetings

Ability to engage in active listening with clients and customers, and to make decisions fairly and objectively

Ability to exercise tact in dealing with customers who are under significant stress

Ability to analyze and utilize information and data, and to comprehend and implement procedures, policies and regulations

Ability to comprehend and adhere to directives from supervisors and managers, and to accept constructive feedback

Ability to develop and manage vocational employment plans

Significant knowledge of department, state, partners' and community resources available to clients

Significant knowledge of interviewing techniques, recruitment techniques, and local area economic and employment conditions

Knowledge of state and federal law regarding equal employment and anti-discrimination

Significant proficiency in computer applications that include email, internet, Excel, PowerPoint and other MS Office Suite programs.

**Education and Experience:**

Bachelor's degree

OR

Associate's degree AND one (1) year or more of experience in direct customer service , employment services, human services, human resources, vocational counseling, or closely related field.

OR

High School diploma or equivalent AND three (3) years or more of experience in direct customer service, employment services, human services, human resources, vocational counseling, or closely related field.

**Special Requirements:** n/a

VERMONT DEPARTMENT OF PERSONNEL  
Request for Classification Review  
Position Description Form A

- **This form is to be used by managers and supervisors to request classification of a position (filled or vacant) when the duties have changed, and by managers and supervisors to request the creation of a new job class/title (for a filled, vacant, or new position), and by employees to request classification of their position.**
- This form was designed in Microsoft Word to download and complete on your computer. This is a form-protected document, so information can only be entered in the shaded  areas of the form.
- If you prefer to fill out a hard copy of the form, contact your Personnel Officer.
- To move from field to field use your mouse, the arrow keys or press Tab. Each form field has a limited number of characters. Use your mouse or the spacebar to mark and unmark a checkbox.
- Where additional space is needed to respond to a question, you might need to attach a separate page, and number the responses to correspond with the numbers of the questions on the form. Please contact your Personnel Officer if you have difficulty completing the form.
- The form must be complete, including required attachments and signatures or it will be returned to the department's personnel office. All sections of this form are required to be completed unless otherwise stated.

**INSTRUCTIONS:** Tell us about the job. The information you provide will be used to evaluate the position. It will not be used in any way to evaluate an employee's performance or qualifications.

Answer the questions carefully. The information you give will help ensure that the position is fairly evaluated. Here are some suggestions to consider in completing this questionnaire:

- Tell the **facts** about what an employee in this position is actually expected to do.
- Give **specific examples** to make it clear.
- Write in a way so a person unfamiliar with the job will be able to understand it.
- Describe the job **as it is now**; not the way it was or will become.
- Before answering each question, read it carefully.

**To Submit this Request for Classification Review:** If this is a filled position, the employee must sign the original\* and forward to the supervisor for the supervisor's review and signature. The Personnel Officer and the Appointing Authority must also review and sign this request before it is considered complete. The effective date of review is the beginning of the first pay period following the date the complete Request for Classification Review is date stamped by the Classification Division of the Department of Personnel.

\*An employee may choose to sign the form, make a copy, submit original to supervisor as noted above, while concurrently sending the copy to the Classification Division, 144 State Street, Montpelier, with a cover note indicating that the employee has submitted the original to the supervisor and is submitting the copy as a **Concurrent** filing.

**If this is a request (initiated by employees, VSEA, or management) for review of all positions in a class/title please contact the appropriate Classification Analyst or the Classification Manager to discuss the request prior to submitting.**

## Request for Classification Review Position Description Form A

For Department of Personnel Use Only

|   |                             |
|---|-----------------------------|
| Notice of Action # _____  | Date Received (Stamp) _____ |
| Action Taken: _____   |                             |
| New Job Title _____   |                             |
| Current Class Code _____  | New Class Code _____        |
| Current Pay Grade _____   | New Pay Grade _____         |
| Current Mgt Level _____ B/U _____ OT Cat. _____ EEO Cat. _____ FLSA _____                       |                             |
| New Mgt Level _____ B/U _____ OT Cat. _____ EEO Cat. _____ FLSA _____                           |                             |
| Classification Analyst _____ Date _____   | Effective Date: _____       |
| Comments: _____   | Date Processed: _____       |
| Willis Rating/Components: Knowledge & Skills: _____ Mental Demands: _____ Accountability: _____ |                             |
| Working Conditions: _____ Total: _____  |                             |

### Incumbent Information:

Employee Name:  Employee Number:   
Position Number:  Current Job/Class Title:   
Agency/Department/Unit:  Work Station:  Zip Code:   
Supervisor's Name, Title, and Phone Number:   
How should the notification to the employee be sent:  employee's work location  or  other address, please provide mailing address:

### New Position/Vacant Position Information:

New Position Authorization:  Request Job/Class Title:   
Position Type:  Permanent or  Limited / Funding Source:  Core,  Partnership, or  Sponsored  
Vacant Position Number:  Current Job/Class Title:   
Agency/Department/Unit:  Work Station:  Zip Code:   
Supervisor's Name, Title and Phone Number:

### Type of Request:

- Management:** A management request to review the classification of an existing position, class, or create a new job class.
- Employee:** An employee's request to review the classification of his/her current position.



## 1. Job Duties

This is the **most critical** part of the form. Describe the activities and duties required in your job, **noting changes (new duties, duties no longer required, etc.) since the last review**. Place them in order of importance, beginning with the single most important activity or responsibility required in your job. The importance of the duties and expected end results should be clear, including the tolerance that may be permitted for error. Describe each job duty or activity as follows:

- **What** it is: The nature of the activity.
- **How** you do it: The steps you go through to perform the activity. Be specific so the reader can understand the steps.
- **Why** it is done: What you are attempting to accomplish and the end result of the activity.

For example a Tax Examiner might respond as follows: **(What)** *Audits tax returns and/or taxpayer records.* **(How)** *By developing investigation strategy; reviewing materials submitted; when appropriate interviewing people, other than the taxpayer, who have information about the taxpayer's business or residency.* **(Why)** *To determine actual tax liabilities.*

The Job Center Specialist II works within the Vermont Department of Labor, Workforce Development Division's American Job Centers and provides case management services to job seekers. Promotes and delivers comprehensive services offered through the VDOL's American Job Centers to job seekers and employers. The JCS II collaborates with partner organizations and agencies to promote, whenever possible, an effective and seamless workforce-education, training and job placement system that will benefit the individual client.

Determines eligibility for federal and/or state funded programs and assists job seekers with significant barriers to employment to obtain and maintain employment on a long-term basis. With the goal of working toward securing full-time, unsubsidized employment for participants, JCS II will provide case management services, generally within one program area, but may also refer and/or co-enroll 'participant in multiple programs as able and necessary. JCS II must be well-versed and knowledgeable in VDOL program resources and assistance, as well as programs of our partner agencies and organizations. Ensures that clients are co-enrolled in all programs for which they qualify, and request assistance from VDOL case managers in other programs to assist and enroll the client into applicable programs, including, but not limited to, WIOA Adult, Youth, or Dislocated Worker; Trade (TAA); Veterans programs; other options such as programs funded by special grants such as NEG, SNAP E&T or other programs leading to job training, credentials, certifications, and employment.

Interviews clients who are often under significant personal and financial burden, and who may exhibit significant stress and anxiety, and may be uncooperative or angry. It is expected that JCS II staff will engage all clients in a manner that exhibits professionalism, sensitivity, fairness, tact and diplomacy, and helps clients understand the services available to them from our staff and programs. Supportive attitude and actions are expected to be demonstrated in dealing with clients.

Administers formal and informal assessments to participants to identify skills, abilities, interests and barriers to employment, and develop employment plans. Reviews and analyzes the results of assessments to identify and address specific training needs, discusses assessment with the participant, and advises on training and employment opportunities. Guide participants on employment interests, aptitudes, labor-market information, and best practices for connecting with, and marketing themselves to, employers.

Identifies skills gaps and assess the education and training needed to bridge the gaps.

Creates employment plans with participants by analyzing results of their assessment, in-depth interviews, local labor market information and employer workforce needs. Monitors and revises employability plans based on participant progress, barriers and changes in needs in order to maintain or gain employment.

Advises clients on specific training opportunities, participates in the development of program training sites, develops special work or training placement opportunities for grant-funded programs and provides job search skills and employability training both individually and through group sessions. Provides specific job search services, including, but not limited to, resume preparation, interviewing skills, utilization of labor market information and networking.

Supports training participants and employers in maintaining employment by monitoring client's job training progress and providing job coaching, mentoring and support to participants to ensure success. Identifies and addresses specific areas of concern or training needs.

Works with VDOL staff when proposing and negotiating WIOA On-the-Job Training contracts or job placements with employers utilizing federal OJT funding, which defrays a portion of the costs associated with hiring and training of new employees. This includes developing customized training outlines and job descriptions, and negotiating reimbursement rates for training costs.

Develops and maintains effective and cooperative relationships with community partners for the benefit of clients, job seekers and employers. Collaborates with community partners, as appropriate, to co-case manage participants in training programs. Negotiates shared costs associated with training of participants. Meets on a regular basis with community based partners including but not limited to ESD, ABE, Community Action Agencies, EAP, VABIR and local employers.

Documents all services and maintains accurate records in the method and manner determined by the WDD Director or Commissioner to ensure compliance with all state and federally mandated performance measures. Properly and accurately collect documents, data, or other relevant materials for case work and program eligibility determination, and maintain accurate and clear case notes and participant records.

Complies with all federal and state laws, policies and procedures regarding confidentiality of participant records, and will report any suspected or actual security breaches immediately to the WDD Director or Commissioner.

Engages in outreach to registered VJL applicants seeking employment. Identifies and reports information of individuals seeking employment to include training needs. Alerts jobseekers to opportunities available to them based on information provided in VJL registration. Matching them to jobs or trainings as appropriate.

Engages in outreach to local and regional businesses to promote VDOL services for employers. Identifies and reports information on recruitment and training needs of area employers, and serves as a resource for employers, with particular emphasis on connecting the employer to job-seekers, but also connecting them to other units within VDOL to assist them with their employment needs and questions.

## 2. Key Contacts

This question deals with the personal contacts and interactions that occur in this job. Provide brief typical examples indicating your primary contacts (not an exhaustive or all-inclusive list of contacts) other than those persons to whom you report or who report to you. If you work as part of a team, or if your primary contacts are

with other agencies or groups outside State government describe those interactions, and what your role is. For example: you may *collaborate, monitor, guide, or facilitate change*.

Coordinate services with ESD, VR, VABIR, Adult Basic Education, educational providers, training worksites, food shelves, homeless shelters, recovery centers and local community action agencies. Facilitates monthly meetings with various partners. Shares case management tracking with any partner that sponsors a co-enrollment. Monitors case entries to ensure data is captured that pertains to the continued eligibility and compliance for participation and funded services.

**3. Are there licensing, registration, or certification requirements; or special or unusual skills necessary to perform this job?**

Include any special licenses, registrations, certifications, skills; (such as counseling, engineering, computer programming, graphic design, strategic planning, keyboarding) including skills with specific equipment, tools, technology, etc. (such as mainframe computers, power tools, trucks, road equipment, specific software packages). Be specific, if you must be able to drive a commercial vehicle, or must know Visual Basic, indicate so.

Knowledge of counseling, web-based computer software systems, development of employability plans and establishing reasonable goals. Intensive case management skills are necessary since the primary population is poverty stricken, homeless, dealing with substance abuse and/or mental health issues and may have been involved in the criminal justice system. Tact, diplomacy and the ability to diffuse situational anger is required.

**4. Do you supervise?**

In this question "supervise" means if you direct the work of others where you are held **directly** responsible for assigning work; performance ratings; training; reward and discipline or effectively recommend such action; and other personnel matters. List the names, titles, and position numbers of the classified employees reporting to you:

No

**5. In what way does your supervisor provide you with work assignments and review your work?**

This question deals with how you are supervised. Explain how you receive work assignments, how priorities are determined, and how your work is reviewed. There are a wide variety of ways a job can be supervised, so there may not be just one answer to this question. For example, some aspects of your work may be reviewed on a regular basis and in others you may operate within general guidelines with much independence in determining how you accomplish tasks.

Case management referrals are forwarded by our ESD partners and scheduled for a pre-populated date/time. It is the expectation that the worker is familiar with the orientation materials and can deliver the materials to a highly anxious and sometimes angry audience that could consist of 20 participants x twice/week. Processing the referrals provided by ESD needs to be done timely, with 4 hours of the individual presenting for the orientation and a one-on-one follow up meeting within one week. Entries documenting both services is necessary within one business day. Ongoing contacts are required at each interaction. Recording of services often in two systems, VJL and ACCESS. Technical assistance is available from Regional Supervisor, Program Managers, and Regional Managers. ESD also provide policy and procedure guidance as made available by FNS.

Case management reports can be run by each worker, supervisor, program manager and granting agency - ESD. Quarterly and Annual reports are submitted to our granting agent - ESD.

## 6. Mental Effort

This section addresses the mental demands associated with this job. Describe the most mentally challenging part of your job or the most difficult typical problems you are expected to solve. Be sure to give a specific response and describe the situation(s) by example.

- For example, a purchasing clerk might respond: *In pricing purchase orders, I frequently must find the cost of materials not listed in the pricing guides. This involves locating vendors or other sources of pricing information for a great variety of materials.*
- Or, a systems developer might say: *Understanding the ways in which a database or program will be used, and what the users must accomplish and then developing a system to meet their needs, often with limited time and resources.*

Case management can caused mental anguish and is known to be the most challenging part of the position. Clients share personal information that uncomfortable to hear and are often unable to seek appropriate services. Stories of domestic violence, poverty, abuse, homelessness, abandonment, violent tendencies can be unsettling.

## 7. Accountability

This section evaluates the job's expected results. In weighing the importance of results, consideration should be given to responsibility for the safety and well-being of people, protection of confidential information and protection of resources.

What is needed here is information not already presented about the job's scope of responsibility. What is the job's most significant influence upon the organization, or in what way does the job contribute to the organization's mission?

Provide annualized dollar figures if it makes sense to do so, explaining what the amount(s) represent.

For example:

- A social worker might respond: *To promote permanence for children through coordination and delivery of services;*
- A financial officer might state: *Overseeing preparation and ongoing management of division budget: \$2M Operating/Personal Services, \$1.5M Federal Grants.*

VDOL receives almost \$1.4 million to deliver services to individuals receiving food stamp assistance statewide, in 12 districts around Vermont. Each office a piece of that budget that can be used for supportive services to assist in the reduction of barriers and to prepare individuals for employment. Accurate record keeping of services is necessary in order to meet Federal performance standards. Dollars can be recaptured if performance drops below the negotiated level. Incumbents in this classification must also meet individuals referred within 3 days of being determined eligibility and must provide a second service within 10 days.

Incumbents do not develop the budget or negotiate the performance measures but are held accountable for district measures.

### 8. Working Conditions

The intent of this question is to describe any adverse conditions that are routine and expected in your job. It is not to identify special situations such as overcrowded conditions or understaffing.

- a) What significant mental stress are you exposed to? All jobs contain some amount of stress. If your job stands out as having a significant degree of mental or emotional pressure or tension associated with it, this should be described.

| Type   | How Much of the Time? |
|--|-----------------------|
| Clients with extreme poverty issues, substance abuse, criminal history, domestic violence, 5 days a week, 6/8 hours per day is mentally draining and emotionally stressful | 75-85%                |
|  |                       |
|  |                       |

- b) What hazards, special conditions or discomfort are you exposed to? (Clarification of terms: **hazards** include such things as potential accidents, illness, chronic health conditions or other harm. Typical examples might involve exposure to dangerous persons, including potentially violent customers and clients, fumes, toxic waste, contaminated materials, vehicle accident, disease, cuts, falls, etc.; and **discomfort** includes exposure to such things as cold, dirt, dust, rain or snow, heat, etc.)

| Type                                   | How Much of the Time? |
|--|-----------------------|
| Anxious/poverty stricken/angry clients | 70%                   |
| winter driving/adverse road conditions | 5%                    |
| system entries/2 different systems     | 25%                   |

- c) What weights do you lift; how much do they weigh and how much time per day/week do you spend lifting?

| Type       | How Heavy? | How Much of the Time? |
|------------|------------|-----------------------|
| Case files | 1-2 lbs    | 8 hours/day           |
|            |            |                       |

- d) What working positions (sitting, standing, bending, reaching) or types of effort (hiking, walking, driving) are required?

| Type   | How Much of the Time? |
|--|-----------------------|
| sitting/meeting with clients and/or partners | 70%                   |
| driving and computer entry                   | 5% and 25%            |

#### Additional Information:

Carefully review your job description responses so far. If there is anything that you feel is important in understanding your job that you haven't clearly described, use this space for that purpose. Perhaps your job has some unique aspects or characteristics that weren't brought out by your answers to the previous questions. In this space, add any additional comments that you feel will add to a clear understanding of the requirements of your job.

The current job classification - Job Center Specialist II - accurately reflects the duties outlined as required in our grant/MOU with ESD.

All positions will/are performing duties of the Job Center Specialist II. These duties include Intensive case management for individuals with multiple, significant barriers to employment. Employees determine the eligibility and appropriateness for services by Federal and State Partners (FNS and ESD). Authorizes support services to eligible participants in achieving their employment goals. Develops training opportunities with business partners and collaborates with other community and State Agency partners to access additional resources and supportive services. Coordinates case management services across public and private sectors. Knowledge of client support systems, Federal eligibility guidelines, and various State and Federal policies and procedures are a requirement. Implementation of individualized employability plan and program initiatives is required. Work will/is being performed within the Department of Labor, under the general supervision of a VDOL manager and/or supervisor. The positions are funded on a Federal fiscal year, 10/1-9/30.

Employee's Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

**Supervisor's Section:**

Carefully review this completed job description, but **do not** alter or eliminate any portion of the original response. Please answer the questions listed below.

1. What do you consider the most important duties of this job and why?

2. What do you consider the most important knowledge, skills, and abilities of an employee in this job (not necessarily the qualifications of the present employee) and why?

3. Comment on the accuracy and completeness of the responses by the employee. List below any missing items and/or differences where appropriate.

4. Suggested Title and/or Pay Grade:

Supervisor's Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

**Personnel Administrator's Section:**

*Please complete any missing information on the front page of this form before submitting it for review.*

Are there other changes to this position, for example: Change of supervisor, GUC, work station?

Yes  No If yes, please provide detailed information.

Attachments:

Organizational charts are **required** and must indicate where the position reports.

Draft job specification is **required** for proposed new job classes.

Will this change affect other positions within the organization? If so, describe how, (for example, have duties been shifted within the unit requiring review of other positions; or are there other issues relevant to the classification review process).

Suggested Title and/or Pay Grade:

Personnel Administrator's Signature (required): Mat [Signature] Date: 12/21/18

**Appointing Authority's Section:**

Please review this completed job description but **do not alter** or eliminate any of the entries. Add any clarifying information and/or additional comments (if necessary) in the space below.

Suggested Title and/or Pay Grade:

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Appointing Authority or Authorized Representative Signature (required)

---

Date



**Workforce  
Development,  
Grants & Apprenticeship  
Org Chart  
September 2018**

