

**Preliminary Policy on Correction of Records  
in the State's Integrated MIS, NEworks**

**References:**

Workforce Innovation and Opportunity Act (WIOA), Section 116; [WIOA Notice of Proposed Rulemaking](#), 20 CFR § 677.160; [Federal Register/Vol. 68, No. 177/Friday, September 12, 2003](#); Eligibility for Adult Programs Policy; Eligibility for Dislocated Workers Policy; Eligibility for Youth Programs Policy; Equal Opportunity and Nondiscrimination Policy; Application Time Limit Policy; Case Management Policy; Local Plan Instructions Policy; Data Validation Policy; Record Retention Policy; Electronic Case Files Policy; TEGL 14-00, Change 1; TEGL 17-05; and TEGL 17-09.

**Background:**

When the Annual Report is submitted, it must include the name and title of the authorized official of the governor responsible for certifying that the data submitted is complete and accurate. This information then determines whether the state has exceeded WIOA Title I performance levels. This is one of the criteria used to evaluate if a state qualifies for a federal incentive grant award.

States are required to establish basic standard operating procedures for data collection and handling to ensure the quality and integrity of the data over time.<sup>1</sup> This policy is written to ensure that the data submitted in the Annual Report is indeed "complete and accurate." To help ensure the integrity of the data, this policy also identifies the steps to take when it is appropriate and necessary to correct data.

**Action:**

This policy takes effect on July 1, 2015.

**Policy:**

Timeliness and accuracy of information in the state's integrated MIS, NEworks, is paramount to maintaining data integrity which is required for program management, program oversight and federal reporting. Therefore, the following data correction request policy must be followed.

**Participants and Reportable Individuals**

A reportable individual is one who has taken action that demonstrates an intent to use program services and who meets specific reporting criteria of the program, including:

- Individuals who provide identifying information;
- Individuals who only use the self-service system; and
- Individuals who only receive information on services or activities.<sup>2</sup>

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<sup>1</sup> TEGL 14-00, Change 1

<sup>2</sup> 20 CFR § 677.150(b)

A participant is a reportable individual who has received staff-assisted services after satisfying all applicable programmatic requirements for the provision of services, such as eligibility determination.<sup>3</sup> Individuals who have not completed at least 12 contact hours in the adult Education and Family Literacy Act program, individuals who only use the self-service system, and individuals who only receive information services or activities are not participants.<sup>4</sup> Programs must include participants in their performance calculations.<sup>5</sup>

Self-service or information-only activities are not counted against the 90 days of no service required to meet the definition of exit from a program.<sup>6</sup>

### **What Counts and Does Not Count for Performance**

The primary indicators of performance as described in Sec. 116(b)(2)(A) of WIOA apply to all individuals served by the adult, dislocated worker and youth programs.<sup>7</sup>

An individual who is given a WIOA Participation Date shall count toward performance (unless they are later excluded). Adults and dislocated workers who only receive self-service and informational activities will not be given a WIOA Participation Date.

Individuals in the following categories, either at the time of exit or during the three-quarter measurement period following the exit quarter, are considered exclusions. These include:

- Participants who are residing in an institution or facility providing 24-hour support, such as a prison or hospital, with expectations to remain in that institution for at least 90 days;
- Participants who die;
- Participants receiving treatment for a health/medical condition that precludes entry into unsubsidized employment or continued participation in WIOA. This code does not include temporary conditions expected to last for less than 90 days;
- Participants providing care for a family member with a health/medical condition that precludes entry into unsubsidized employment or continued participation in WIOA. This code does not include temporary conditions or situations expected to last for less than 90 days;
- Participants (youth only) in the foster care system or another mandated (residential or non-residential) program that has moved from the area as part of such a program;
- Participants who are reservists called to active duty for at least 90 days who choose not to return to WIOA; and
- Participants who do not voluntarily disclose a valid social security number.<sup>8</sup>

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<sup>3</sup> 20 CFR § 677.150(a)

<sup>4</sup> 20 CFR § 677.150(a)(2)

<sup>5</sup> 20 CFR § 677.150(a)(3)

<sup>6</sup> 20 CFR § 677.150(c)(1)(i)(A)

<sup>7</sup> WIOA Sec. 116(a)

<sup>8</sup> TEGL 17-05

## **When Data Should be Corrected**

### Errors Identified through WIASRD Edit Checks

One of the required reports the state must submit electronically each quarter is the WIA Standardized Record Data (WIASRD). Prior to submitting this report, an edit check is made. Information that shows up as errors in the edit check must be corrected. Often this edit check process catches human errors in inputting the data, i.e., dates that are out of the appropriate timeframes. When the state discovers errors identified by the WIASRD error log, the local area shall be notified. The local area may respond via email to the state request for information without utilizing the Correction of Records process. The local area must respond to the state within two business days of the state's request, due to the immediate nature of the reporting requirements.<sup>9</sup>

### Errors Identified through Local Area Quality Control

When the local area discovers inaccurate information during their quality control process, the local area must submit a record correction per the process identified in this policy. Correction of Records Requests are to be submitted upon immediate identification of inaccurate information. Record correction requests will not be processed for participants who have been included in annual reports that have been submitted for federal review.

## **When Data Should Not Be Corrected**

### To Improve Performance

Local areas monitor performance throughout the year. The "Correction of Records" process must not be used to enhance performance by deleting records of participants who have appropriately received a WIOA Participation Date. [Note: Adults and dislocated workers receiving only self-service or informational activities (as discussed earlier) may be registered in the state's integrated MIS; NEworks. However, if the individual has not been given a WIOA Participation Date, then he or she is properly excluded from the WIOA title IB performance measures.]

### To Distort Actual Events

Until instructed otherwise, suppliers of data used for research studies must meet guidelines published on September 12, 2003 to implement the Federal Policy on Research Misconduct and should be aware of the following definitions:

- "Fabrication" means making up data or results and recording or reporting them;" and
- "Falsification" means manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research record is not accurately represented in the research record."<sup>10</sup>

Record correction requests will not be processed for participants who have been included in annual reports that have been submitted for federal review.

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<sup>9</sup> TEGL 5-09

<sup>10</sup> Federal Register/Vol. 68, No. 177/Friday, September 12, 2003

## **Processes for Correcting Data**

### **Routine Corrections**

Routine corrections are those corrections which involve end user errors such as transposing dates and mistakenly entering numbers incorrectly. Corrections will be made to records impacted during the current quarter or previous reporting quarter within the current program year. Participant data should be entered into NEworks at the time of application, enrollment, and activity creation. NEworks allows for a 30 day period for case managers to create an activity when immediate data entry is not possible. Files must not be held up for later entry into NEworks in a batch fashion. Correction of Records Requests are to be submitted upon immediate identification of inaccurate information.

### **Correcting Records Prior to End of Program Year Cutoff Date**

The state will issue information to the local areas outlining the timeline for end of program year cutoff dates. Case managers are expected to be aware of the status of all participants on their case load. This should eliminate the need for any corrections after the end of program year cutoff date. NEworks is an integrated system, and some changes may affect multiple programs. The WIOA Participation Date, the WIOA Case Closure, and Outcome/Exit can only be deleted at the NEworks Administrator level.

### **Process for Correcting Participant Data Prior to Annual Report Submittal**

When a staff member realizes there has been an error made on the WIOA participant file needing correction by the NEworks Administrator, he or she must complete the Enterprise Content Management/NEworks Record Correction Form which is integrated in the ECM e-form document workflow and include supporting documentation. [see Networks, Electronic Case Management and Enterprise Content Management Policy] After a complete review of the request and if the Manager agrees and approves the action, then he or she should forward the requesting form to the NEworks Administrator, as indicated on the form instructions.

**Note to Managers:** By submitting the *Correction of Records Request Form*, you are attesting to this action and verifying the truth of the request following careful review of the documentation.

The NEworks Administrator reviews the request, and if it is approved, then the correction is processed. If the correction is not approved, then the NEworks Administrator notifies the Manager/Regional Manager for the local area, providing the reason(s) the state gave for the denial. The local area has the opportunity to Appeal the decision.

### **Note the following:**

1. A *Record Correction Request Form* is to be submitted upon immediate identification of inaccurate information.
2. A *Record Correction Request Form* may only be submitted for records impacted during the current reporting quarter or previous reporting quarter within the program year. Reporting quarters are:
  - first quarter (July – September)
  - second quarter (October – December)
  - third quarter (January – March)
  - fourth quarter (April – June)
3. All Record Correction Requests must reference supporting documentation.

### Special Circumstances

If it is necessary to correct records beyond the previous reporting quarter during the current program year, then heavier scrutiny of this correction shall take place. Managers need to investigate why this error was not caught within an acceptable amount of time (i.e., the 30 day backdate period). Managers must submit a separate memo identifying and explaining the circumstances that allowed this information to go so long without correction. The memo must reference the Record Correction Request and identify and explain changes in procedure that shall prevent this error from happening in the future.

### Correcting Data Already Submitted in the Annual Report

Record correction requests will not be processed for participants who have been included in annual reports that have been submitted for federal review.

### **Appeal Process**

The state reserves the right to refuse to change information listed on NEworks. To appeal the denial, the local area must:

- Submit a written request within 30 days of denial notification to the Commissioner of Labor. This written request should clearly outline the reason(s) as to why it is necessary to delete or change the information, documentation clarifying the need for the change, and a listing of reason(s) the state gave for the denial.
- Within 10 days of receiving the written request, a final judgment by the Commissioner of Labor shall be rendered.

### **Documentation**

#### Responsibility for Tracking Services

Each recipient must collect and maintain records to determine whether the recipient has complied or is complying with the nondiscrimination and equal opportunity provisions of the WIOA [or WIA, whichever is appropriate]. Records must be collected and maintained on applicants, registrants, eligible applicants/registrants, participants, terminees, employees, and applicants for employment. [see Equal Opportunity and Nondiscrimination Policy]

#### Record Keeping

Documentation for the "correction of records" action shall be maintained by the Manager/Regional Manager giving the initial approval and at the Office of Employment and Training for a minimum of three years following the date on which the annual expenditure report containing the final expenditures charged to such program year's allotment is submitted to the U.S. Department of Labor. However, if any litigation, claim, negotiation, audit or other action involving the records starts before the expiration of the three-year period, the records must be retained until completion of the action and resolution of all issues which arise from it, or until the end of the regular three-year period, whichever is later.

### **Disclaimer:**

This policy is based on NDOL's reading of the statute along with the Notice of Proposed Rulemaking released by USDOL. This policy may be subject to change as additional federal regulations and TEGLs are released. This policy is not intended to be permanent and should be viewed as a placeholder until final federal regulations are released in early 2016.