

RURAL DEVELOPMENT PROJECT POLICIES AND PROCEDURES	Issued by: RDP Statewide Director, Daniel Regan	Policy No.: PRO 001
		Effective Date: 7/1/2009
<i>Participant Tracking and Follow-Up</i>	Approved by: RDP Statewide Director Daniel Regan	Revision No.: 3 10/14/2009
		Supersedes Policy: N/A

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- I. **PURPOSE:** To guide RDP staff in obtaining participant data and follow-up information and to ensure compliance with DOL Federal rules and regulations.
- II. **STAFF RESPONSIBILITIES:** The Statewide Associate Director and each Island Project Director is responsible for ensuring compliance with this policy for their respective island projects. The Statewide Associate Director is responsible for ensuring compliance with the provisions of this policy for assigned projects.
- III. **PARTICIPANT TRACKING:** Program files must include a completed RDP Intake Form for each participant and applicable verification that confirms eligibility.
- A. RDP Intake Form**—RDP Statewide Program and Island staff must customize the form to contain information specified in the grant proposal. A sample RDP Intake Form is attached as Exhibit A.
- i. **Program Title and Number**—Input the project title and the project number.
 - ii. **Participant Eligibility**—Customize the “Program Eligibility” section. Include the project eligibility criteria for participants, as found in the project proposal.
 - a. Participants have to meet all required eligibility criteria outlined in the project proposal.
 - b. Required documents to verify eligibility must be identified on the form. Examples of acceptable documentation are attached as Exhibit B, Examples of Documentation to Verify Participant Eligibility.
- B. Verification of Eligibility**—All documents supporting eligibility must be attached to the participant’s RDP Intake Form. *An RDP program staff member must verify eligibility and must sign the intake form.*
- C. Participant Certification and Release of Information Signature**—When RDP Intake Forms are distributed to participants, provide a brief summary of the information and ask for them to sign and date the form.
- Contact the RDP Program Evaluator with questions regarding the RDP Intake Form or questions regarding documents verifying eligibility.

IV. EEO NOTICE AND RDP COMPLAINT RESOLUTION PROCEDURES

- A. Each participant will receive a copy of the RDP Complaint Resolution Process and EEO Notice attached to their RDP Intake Form, which is attached as Exhibit C.
- B. Advise the participants that this notice is theirs to keep and have them initial proof of their receipt of this notice under the ***Participant Certification and Release of Information*** on the RDP Intake form.

V. ENSURING CONFIDENTIALITY

All RDP intake forms will be stored in a secure location at each project office. The RDP Intake Forms will be kept confidential and used only for RDP tracking and follow-up purposes. Only designated RDP staff will have access to the forms.

VI. HUINET DATABASE MANAGEMENT

Island Project Directors and designated Statewide staff are responsible for ensuring that the RDP Intake Forms for their respective programs are input into the Huinet database ***within two weeks*** from the beginning of the course in order to have a baseline number of participants enrolled in each course.

VII. PARTICIPANT FOLLOW-UP / PROJECT OUTCOMES

Participant follow-up will be conducted ***30 to 90 days after project completion***. Follow-up is conducted by telephone. If a participant cannot be reached by telephone, follow-up will be conducted by email or by a survey mailed to the participant. **Follow-up information obtained from a participant must be specified to the outcomes identified in the applicable project grant.**

Huinet notes: RDP staff conducting follow-up must input Outcome information into the Huinet "Outcome Notes." The following information must be included:

- i. The **Date** the participant was contacted and/or the information was verified.
- ii. The **Outcome**—what are the outcomes identified in the grant? Did the participant complete the course or obtain one of the other performance measures? How? Be specific. For example, if the outcome was for participants to complete the program, specify the date the program was completed.
- iii. The **Source** that verified the outcome, such as the program coordinator or instructor. Sources may also include contacting the participant, obtaining copies or certificates or a copy of the final class roster including grades.
- iv. The **First initial** and **Last Name** of the staff member conducting the follow-up.

Examples of Huinet Outcome Notes:

EXAMPLE #1 Outcome: *Participants will complete training (could not contact participant)*

10/15/05	Confirmed that John Smith received a <u>Certificate in Outreach for Health Promotion</u> in March 2005 at Kauai Community College. Information was received from <u>Napua Spock</u> , the Program Coordinator. <u>D. Custer</u>
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EXAMPLE #2 Outcome: Participants will enter a 2- to 4-year degree program

<p>2/28/06 Contacted <u>participant</u>. Participant obtained an <u>AS degree</u> in December 2005. She is now working for Kaiser Permanente as a medical coordinator. <u>K. Bourne</u>.</p>

VIII. PARTICIPANT RECORDS RETENTION

Participant files, including RDP Intake Forms and documentation verifying eligibility, shall be retained for a period of three years from the date of submission of the final expenditure report for the award which funded the participant program.

The exceptions are:

1. If any litigation, claim or audit is started before the expiration of the three year period, the records shall be retained until all litigation, claims or audit findings involved the records have been resolved and final action taken.
2. When records are transferred to or maintained by the U.S. Department of Labor, the three-year retention requirement is not applicable to the RDP.

IX. REFERENCES

29 CFR 95.53; 29 CFR 37.25; 29 CFR 37.29; 29 CFR 37.30; 29 CFR 37.31

RURAL DEVELOPMENT PROJECT INTAKE FORM

Grant Project Name & Grant ID #

COURSE/PROGRAM TITLE: (Please print clearly)

CONTACT INFORMATION:

FIRST NAME LAST NAME

MAILING ADDRESS CITY ZIP

ISLAND STATE E-MAIL

HOME PHONE WORK PHONE CELL PHONE

Department of Labor/Equal Opportunity Data:

DATE OF BIRTH GENDER Female Male MARITAL STATUS Married? yes no

IF MALE, ARE YOU REGISTERED WITH SELECTIVE SERVICE? yes no

FAMILY SIZE (including self) NO. OF DEPENDENTS UNDER AGE 18

VETERAN yes no SPOUSE OF A VETERAN (**see criteria below): yes no

ETHNICITY CHECK ALL THAT APPLY: Hawaiian Native or Other Pacific Islander Asian American Indian/Alaska Native Hispanic or Latino White Black or African American Other (specify):

Program Eligibility ***program specific—take from participant eligibility section of program proposal***

Are you a Resident of the island of Maui? Please provide copy of ID. yes no

Are you a University of Hawaii System or Community College Student? yes no

Are you currently employed? yes no

Name of Employer:

Are you participating in this program to obtain a certificate? yes no

yes no

Participant Certification and Release of Information

I authorize the Rural Development Project to enter my information into a shared database, the Huinet. I understand that the information provided on this form will remain confidential and used only for U.S. Department of Labor evaluation purposes.

I certify that the information I have provided is true and that I have received a copy of the Equal Opportunity Law and the RDP Grievance Resolution Procedures.

Participant Signature

Date

This project is funded by Department of Labor and administered by the Rural Development Project. Thank you for participating in and providing information for this RDP program.

**Spouse of a Veteran: Any veteran who died of a service-connected disability; any member of the Armed Forces who is currently and has been more than 90 days listed as-missing in action, captured in the line of duty by a hostile force, or forcibly detained or interned in the line of duty by a foreign government of power; any veteran who has a total disability resulting from a service connected disability; any veteran who died while a disability so evaluated was in existence.

===== STOP ===== BELOW LINE FOR PROGRAM STAFF ONLY ===== STOP =====

Meets participant eligibility criteria Verified by RDP staff (initial and date):

Does NOT meet eligibility criteria Print Staff Name and Title:

Date entered into Huinet database: / / , by

An Equal Opportunity Employer and Program.

Auxiliary aids and services available upon request for individuals with disabilities.

EXAMPLES OF DOCUMENTATION VERIFYING ELIGIBILITY

ELIGIBILITY CRITERIA	ACCEPTABLE DOCUMENTATION
Residency	<ul style="list-style-type: none"> • Driver's license or DMV identification • State-issued identification • Utility bills with participant's name
Age	<ul style="list-style-type: none"> • Birth certificate or hospital record of birth • Driver's license or DMV identification • Baptismal certificate • Voter registration card • Alien registration card • Food stamp records or medical coupons • School enrollment forms • Naturalization certificate • U.S. passport
Employment Underemployment Incumbent Worker	<ul style="list-style-type: none"> • Employer or trade organization statement verifying participant position and pay
Participant interested in: <ul style="list-style-type: none"> • Specific training, e.g., carpentry or culinary arts • Technical info and support • Obtaining a better job/pay • Improve work skills • Obtain additional work skills 	<ul style="list-style-type: none"> • Self-certification by signing RDP Intake Form
Welfare recipient TANF Participant Social Services Recipient	<ul style="list-style-type: none"> • State documentation to support status
Education	<ul style="list-style-type: none"> • High school diploma or equivalent • Degree or college transcripts • Documentation to show enrollment in college or area of study
Single Parent Receiving Benefits	<ul style="list-style-type: none"> • Benefit award letter or statement with benefits received • Documentation of marital and parental status
Financial Aid Recipient	<ul style="list-style-type: none"> • Financial award or receipt of funds
Income	<ul style="list-style-type: none"> • Wage stubs, employer statement
Farmer Hawaiian Homestead Lessee	<ul style="list-style-type: none"> • Documents or ownership of agricultural property • Business ownership statements • DHHL award letter
Entrepreneur	<ul style="list-style-type: none"> • Documentation of business ownership
College student or participant enrolled in a course of study or educational program	<ul style="list-style-type: none"> • Class roster • Program statement supporting enrollment or participation

When documentary evidence is not available or cannot be provided, verification can be provided through collateral contacts that confirm a participant's eligibility or through participant self-certification of eligibility or through participant self-certification of eligibility criteria on the RDP Intake Form.