

CHAPTER VIII

REVIEW DOCUMENTATION AND REGIONAL OFFICE REPORTING

1. Introduction. This chapter contains an explanation of Quality Control procedures for the Regions to follow in creating and documenting an adequate record of the periodic review of each SESA's QC operations. These procedures are offered to ensure that the Regional Office maintains a complete monitoring record of each SESA's QC program during the monitoring year. This guidance is intended to encourage both uniformity and effectiveness in Regional monitoring.

In addition, the chapter spells out Quality Control reporting requirements which the Regional Offices must follow to ensure proper communication between themselves and the SESAs, on the one hand, and the National Office on the other.

2. Documentation. An important aspect of effective monitoring is thorough documentation of review findings and conclusions, and the basis of such findings. Each Regional Office should maintain a monitoring file for each State in the Region. Progress review summaries and supporting documents from the monitoring visits will constitute the core of these SESA files. Notations (memos to the files) on subsequent follow-up actions by either State or Regional staff should be included, to ensure a complete record of the SESA's response to progress, final, and annual reviews.

Standard worksheets to be used by the Regional Offices for recording and reporting their findings are included in Appendix B.

Each Regional Office SESA file should contain the following types of material:

- Progress review summaries and supporting QC review worksheets.
- Copies of correspondence to and from the SESA relating to the QC program, and correspondence relating to issues within the UI program which have been addressed as part of the QC program.
- Copies of correspondence to the National Office pertaining to the SESA QC program.
- Internal memoranda relating to the SESA QC program.
- SESA corrective action plans relating to QC issues and State QC operations.

- Comprehensive quarterly Regional QC reports on each SESA to the National Office.
- All available documentation relating to disputed issues. This should include documentation of the efforts of the Regional Office to resolve the dispute, copies of responses from the SESA, and copies of SESA policies, if applicable.

3. QC Records Retention. Regional Offices should retain for a minimum of three years all records generated in the monitoring of SESA Quality Control programs. Such records include QC worksheets and other materials generated in recording and reporting the findings of progress and final QC reviews. Also included are supportive documentation and correspondence compiled by the Regions in the course of discharging their QC responsibilities.

An exception to the three-year retention plan could be a situation in which an administrative hearing is planned or under way or a problem has developed with a State that might lead to court proceedings.

4. Bi-annual Methods & Procedures Review Report. Findings of the bi-annual M & P Review of SESA QC programs should be submitted to the National Office by the sixth working day of April. If the review findings show compliance in all areas, no further M & P reporting will be necessary during the year. In case there are findings or changes which leave the SESA out of compliance in some way, further reporting would be needed and could be completed via the quarterly reporting mechanism.

QC Worksheets QC-1, QC-2, QC-3, and QC-4 should be submitted with the M & P Report to confirm and explain M & P conclusions.

5. Quarterly QC Activity/Analysis Reports to the National Office. The Regions are required to submit, on a quarterly basis, a comprehensive report on the status of each SESA's QC program. These reports -- one for each SESA -- are designed to provide information to the National Office regarding the Region's on-going support and guidance of State QC operations.

These narrative reports should be analytical in nature. They should identify specific QC problems or issues presented or faced by the SESAs, and describe significant QC program developments and accomplishments in each State during each quarter. See page VIII-8 for due dates of quarterly reports.

The report will also cover the regular monitoring effort of the Regional Office and should discuss sample selection and

assignment, case timeliness, investigative exceptions, case reopening activity addressed by the Region, Regional Office workload status and any changes related to M & P requirements which are detected during on-going monitoring.

The purpose, organization, and content of the quarterly Regional QC report are discussed in the following paragraphs.

a. Purposes of Quarterly Regional Office Reporting.

Purposes of quarterly QC reports to the National Office are:

- To assess the status of each SESA's Quality Control program, by identifying both significant State agency developments and problems and QC procedural issues pending in the State agency.
- To report and analyze the effects of Regional Office initiatives and SESA efforts to solve ongoing problem situations or procedural practices which are at variance with established QC methodology and program requirements.

b. Report Organization and Content. The quarterly Regional QC report will be organized around the three broad Quality Control responsibilities of the Regional Offices. These responsibilities are, briefly:

(1) Active program leadership by the Region in each State agency to promote long-term UI program improvement based upon analysis and interpretation of QC findings.

(2) Periodic monitoring of SESA QC operations and staff performance via progress reviews (on-site or mail-in) to foster and maintain an effective UI Quality Control operation in each State Agency.

(3) Continuing technical support of the administration and development of UI Quality Control programs in each Agency.

Each quarterly report will cover for each SESA, as appropriate, some or all of the following subjects or program areas:

- case review
- management of Regional case review workload
- SESA sample selection, assignment, and exceptions
- changes to SESA adherence to QC methods and procedures following the bi-annual M & P review
- analysis of case completion timeliness
- SESA QC corrective action and dispute resolution
- status reports on program improvement studies underway, as well as UI program improvement measures planned and/or underway
- other Regional Office QC leadership initiatives
- review of SESA reopenings of completed QC cases

- progress review conclusions and follow-up goals

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Each successive quarterly report is intended to be an updated assessment of the standing of each SESA in the development and maintenance of a sound Quality Control program, and utilization of QC data to improve the effectiveness and efficiency of local and State UI benefit payment operations.

To a degree, each quarterly report will extend the previous ones, detailing progress achieved in meeting program goals and measures taken to deal with problems reported previously.

c. Quarterly Report Format. The following reporting format is offered to aid each Regional Office in the organization and preparation of the individual SESA reports. It is intended to serve as a comprehensive guide or checklist to encourage thoughtful analysis and reporting regarding significant Regional Office initiatives and findings during the quarter.

Material in the quarterly SESA reports should be presented in the following sections:

I. Program Leadership.

A. Regional Office Initiative and Guidance. Describe Regional Office actions taken or continued with the SESA to foster the use of UI/QC program findings to improve UI program operations. Some examples are: assist the SESA organize, analyze, and interpret QC data; consult with a SESA on the formulation of potential program improvement (PI) measures based upon QC findings; assist a SESA plan and conduct QC-related PI studies or projects.

Discuss status of pending Regional Office actions to address specific SESA issues; indicate results achieved from RO leadership initiatives.

Note: "Program improvement" is used in QC, in lieu of "corrective action", to cover a wide range of UI operational, policy, and program changes that are undertaken by SESA management to reduce payment errors. The term "corrective action" is used in QC to refer to actions taken by the SESAs to modify or correct some aspect of its QC operations and/or practices in order to comply with established QC methodology.

B. Developments in UI Program Improvements. Describe the SESA's actions and results in analyzing and interpreting Quality Control data, and in utilizing their findings to bring about UI program improvements. Also, report any significant problems or difficulties

facing the SESA which may impede active program improvement efforts.

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II. Monitoring: Findings and Results of Regional Progress Reviews.

A. Case Review. Analysis of case investigative review findings during the quarter for each State; summary of findings (exceptions); and discussion of SESA and Regional Office staff efforts to make QC operational corrections, the need for which is revealed by exceptions, by follow-up on prior corrective actions, and key efforts to resolve issues and disputes.

B. Management of Regional Office Case Review Workload. Provide an assessment of case review workload status and monitor backlogs. The report should identify problems incurred, if any, in meeting the required review targets for each State; and action planned to deal with the situation.

C. SESA Sample Selection Review. Use the QC-5 worksheet to summarize findings of sampling review in each State, and report on SESA and Regional Office efforts to correct problems detected (if any).

D. Case Timeliness. Report on analysis of SESA case completion performance data during prior quarter(s) of the program year.

E. Case Reopening. Report results of RO action on SESA code 5 case reopenings which were not part of the RO review sample and other activity which had the potential to be a problem.

F. SESA M & P Review. If the findings of bi-annual SESA M & P reviews show compliance in all areas, no further M & P reporting will be necessary until the subsequent review unless changes are noted by the Region. If there are subsequent changes which leave the SESA out of compliance in some way, further reporting (quarterly) would be indicated. (Ref: Chapter II of the Handbook.)

Whenever the M & P findings show non-compliance, further monitoring by the Region is required to assess necessary SESA corrective action. After a State has completed appropriate corrective action, the monitor will verify compliance. Results of such actions of either the SESA or the Region should be reported in subsequent quarterly Regional QC reports.

Attachments - Submit appropriate worksheets (i.e., QC-1, QC-2, QC-3, and QC-4) with subsequent quarterly reports to confirm and explain any changes to M & P conclusions.

III. Implementation of UI/QC Support Services.

In this section present information on all supportive assistance planned and/or provided the SESA during the quarter covered. Provide a negative report for any item on which no substantive information is available.

A. Technical Assistance. Note and describe technical assistance planned and/or extended this reporting period. (Do not repeat discussion of TA efforts already mentioned in Sections I. and II.)

Some examples: Assist a SESA with UI/QC staff training; assist a SESA to plan and launch a special study; develop/conduct QC investigative training for SESA staff. Describe special situations and progress experienced in delivery of technical assistance to specific SESAs.

B. Clarifications Needed from the National Office. Report any situations in QC methodology and procedures on which clarification is required for the SESAs.

C. Review Conclusions and Follow-up Goals. Under this heading, the Region should offer a brief current assessment of the status of each SESA's QC program. Give attention to internal organizational problems or situations, investigative performance (improving, declining in quality), and quality of State's QC database as evidenced by efforts to analyze and utilize data for UI program modification. Also, describe SESA QC situations which require Regional Office attention and discuss Regional Office plans for follow-up action.

6. Preparation of the Quarterly SESA Reports for Transmittal.

The following steps are offered as a checklist to ensure that reporting on the status of each SESA QC program by the Regions will be generally uniform and complete.

a. Develop a report for each SESA separately, following the format provided in Section 3.c. above.

b. Include the following information on the top of first page of each report:

Region _____ State _____ Quarter Covered _____

c. Attach all QC worksheets that are appropriate to each SESA report. Include any special documentation available which will confirm or clarify findings or issues pending in these quarterly SESA assessments.

d. Due Dates - Forward the reports to the National Office (Attn. TEUQI) to arrive by the first working day of the second month following the end of each quarter. All monitoring findings for the review quarter should be entered into the system prior to this date, so they will be included in the Regions' analyses. The National Office will also use this date to establish a point in time to access the Regional reports for review purposes.

7. Reports to SESAs. Because each SESA will receive an annual determination that it either does or does not comply with QC requirements (See Chapter VII, sec. 5.), it is important that during the program year recognition of progress in meeting the requirements be conveyed to the SESA Administrator. Assurance that progress is satisfactory should be provided at least semi-annually. See Appendix H for a facsimile of an annual administrative determination letter.

More importantly, SESA Administrators need to be informed whenever M & P reviews or progress reviews for case timeliness, sample selection, or investigative procedures reveal that the SESA is not adhering to the standard methodology, or that progress to date shows that the SESA may not meet QC requirements by the end of the year. Accordingly, Regions will report such findings in writing to the States immediately following completion of a given review.

8. Due Dates of Regional QC Reports. For the convenience of both Regional and National Office QC staff, an annotated list of required Quality Control reports generated by the Regions is presented in the following pages. Due dates for the respective reports to reach the National Office, or in one instance the SESAs, are also noted.

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**Due Dates of Regional Office QC Reports
(QC Reporting Cycle)**

Required QC Reports

*Due Dates

1. Quarterly QC Activity/Analysis Report
(Ref.: Chapter VIII, pp. 2-7 of ET 396)

First quarter report	May 1
Second quarter report	Aug 1
Third quarter report	Nov 1
Fourth quarter report	Feb 1

*Note: Quarterly narrative reports are due on the first working day of the second month following the end of a quarter. Worksheets QC-6, 7 and 8 do not have to be submitted. All monitoring findings for the review quarter should be entered into the system prior to these dates, so they are included in the Regions' analyses. The above due dates are also cut-off dates, after which NO will analyze data in the automated system.

2. Bi-annual Review of SESA QC Methods and Procedures (M & P)
(Ref.: Chapter II of ET 396)

- Bi-annual M & P Report
April 8
- Use worksheets QC-1, 2, 3, and 4.

3. Quarterly SESA Sampling Reviews Same as #1.
(Ref.: Chapter III of ET 396)

- Use worksheet QC-5; incorporate in the quarterly activity reports.

4. Annual QC Administrative Determination.
(Ref.: Chap. VII of ET 396.)

Regions must make annual assessments of the adequacy of each SESA's QC operations and performance. Findings of the determination should be recorded (worksheet QC-9) for transmittal by letter to the SESA, with copy to the NO.

- Date due the SESA May 1

- Copy of letters to the SESAs and QC-9 worksheets due the National Office May 15