EMPLOYMENT AND ECONOMIC DEVELOPMENT

RETAIN PHASE 2 Workforce One (WF1) Data Entry

(RETAIN is funded by the U.S. Department of Labor and awarded to MN DEED as lead agency)

What's in this WF1 Guide?

<u>BOTH GROUPS</u> Frequently Asked Questions/Informational: Slides 3 – 10 <u>BOTH GROUPS</u> Record Search and Adding a New WF1 Record: Slides 11 – 15 <u>CONTROL GROUP</u>

- Application, Eligibility, and Enrollment Screens: Slides 16 25
- Exit Screens: Slides 27 31

TREATMENT GROUP

- Application, Eligibility, and Enrollment Screens: Slides 32 41
- Employment Plan (IEP): Slides 42 46
- Activities/Services: Slides 47 69
- Measurable Skill Gains: Slides 70 75
- Closing Training Activities: Slides 76 77
- Capturing the Credentials: Slides 78 81
- RETAIN Service Tab: Slides 82 88
- Case Notes: Slides 89 95
- Participant Exit: Slides 96 108
- Follow-ups: Slides 109 115
- How to Create Ticklers: Slides 116 117

BOTH GROUPS RETAIN Wage Cohorts: Slides 118 - 121



Frequently Asked Questions/Informational General WF1

What is WF1?

- DEED's case management tracking system
- Any case management activities not entered into WF1 are not visible to DEED and will not be captured in official federal reports

When should enrollment in WF1 happen?

- Immediately after confirming the individual's eligibility and all required documentation for program enrollment is received
- Prior to applying any funds towards an individual's case

When should I use the top and side panels of WF1?

Top Panel: NOT case specific. It is recommended that you explore all top panel lists and familiarize yourself with the information available to you. (Forms, resources, reports, definitions, etc.)

Side Panel: Case specific. Used to navigate through a participant's record and perform case management data entry requirements



Frequently Asked Questions/Informational General WF1

- Workforce One is a Case Management Tracking System. Case Management data is used within reports to inform leading agencies of the services being provided to each individual participant using RETAIN funding
- Workforce One is the starting point to performance indicators related to served and exit counts, employment status at enrollment and exit, and credential attainment rates
- Every participant's 1st quarter prior to RETAIN enrollment, earnings in the quarter they are enrolled, and their earnings in the 1st, 2nd, 3rd, and 4th quarters after enrolling in RETAIN will be verified through Unemployment Insurance Wage Detail or Supplemental Wage Information entered into WF1 (See Slides 109-115)
- When reporting performance outcomes for the RETAIN program, participants with wages in the 1st full quarter following their exit date will be considered a positive exit

If wages are found the case is a positive exit

If wages are not found the case is a <u>negative exit</u>



DEVELOPMENT

<u>Frequently Asked Questions/Informational</u> Difference in Official Performance

Why participants with "positive" WF1 exit reasons might not be positive in official performance

- A pseudo–Social Security Number was used on the case
- Wages were not found in Unemployment Insurance Wage Detail or WF1 Supplemental Wage Information (Follow-up data)
- The worker quit or lost their job prior to the first full quarter following their program exit date



Frequently Asked Questions/Informational The "HELP" tab

WC	ORKF	ORCE	ONE				Ļ
Home	Search 🕨	My Tasks 🕨	Recent Work	Manage Program 🕨	References >	Resources >	Help

If you are ever unsure of what type of information needs to be entered on any page of WF1

- Every page in WF1 has a "Help" feature that explains and defines everything within the current WF1 screen you are in
 - Click on "Help" within the top panel while in the page in question
 - Scroll through the displayed information to find the element in question



Frequently Asked Questions/Informational Service Desk Tickets

For login issues, call 651-297-1111. For all other WF1 issues, submit a WF1 help desk ticket.

If you accidentally enter the wrong information, open the wrong activity, or need to make any correction to a WF1 case record:

- 1. Confirm you or your management team do not have the level of access required to make the necessary correction yourselves
- 2. If you or your management team do not have authorized WF1 access to make the necessary correction, click the "WF1 help desk ticket" link located at the bottom of any WF1 screen
- 3. Answer all questions within the ticket and submit the form as directed



<u>Frequently Asked Questions/Informational</u> What's the Difference?

RETAIN SERVICES TAB: (slides 82 – 88) The only place in WF1 that captures reportable...

- Dates of communication with the participant, employer, healthcare provider, and/or workforce professional
- Dates of workplace accommodations
- Provider ID, Referrals, meetings, receipt of certain services

CASE NOTES TAB: (Slides 89 – 95)

Place to capture detailed Information about the case participation or progress, purpose of the contact captured in RETAIN Services, description of any outcomes, next steps, and approval of support service details and/or training fund approvals

FOLLOW-UP TAB: (Slides 109 – 115) The only place in WF1 that captures reportable...

• Dates of communication with the participant on their employment details after the participant exits the program



Frequently Asked Questions/Informational THE "RETAIN SERVICE" TAB

VERY IMPORTANT: GUIDANCE ON HOW TO CAPTURE THE FOLLOWING INFORMATION FOR THE **TREATMENT** GROUP BEGINS ON SLIDE 82-88 OF THIS GUIDE

- Dates of Communications and Meetings with the Employer, Healthcare Provider, Participant, and Workplace Profession
- Healthcare Provider ID
- Participant's receipt of an Ergonomic Assessment or On-site Job Analysis
- Referrals to services beyond RETAIN after 6 months, Ergonomic Assessment, On-site Job Analysis, or other Non-RETAIN Services
- The following types of Workplace Accommodations
 - Accessible Comm/Assistive Technologies
 - Modified Work Tasks
 - Other Accommodations
 - Physical Change
 - Policy Enhancement
 - Technical Assistance
 - If accommodations are unavailable



Logging into Workforce One

- Go to Workforce One located here: <u>https://www.mnworkfo</u> <u>rceone.com/Default.asp</u> <u>x</u>
- Enter your Username and Password



• Click Log IN



FAQ: Switching your WF1 Profile to perform Case Management Data Entry

If you have multiple WF1 profiles, based on your job tasks, you may need to switch your profile before you will be able to perform case management data entry within the database

- 1. Click "Switch Profile" located in the top right corner of any WF1 screen
- To have write ability as a case manager, switch your profile to "E & T: User"
- You may need to select the Agency the case is being served by and the COFFR funding the case
- 4. Click "Switch"



ſ	Switch Profile	
	Current Profile	E & T: Agency-wide: Mayo
	Switch Profile to	E & T: User 🗸
	Agency	Mayo Clinic
	COFFR	Selection not needed for Profile type 🗸
1	Switch Cancel	



TREATMENT AND CONTROL GROUP PARTICIPANT RECORD SEARCH

WO	RKFORCE	ONE			
Home S	earch 🕨 My Tasks 🕨 F	Recent Work	Manage Case 🕨	Manage Program	► R
Dachha	Person				
Dashbo	Saved Searches				
My Info	Advanced Search				
No Tickle No Tickle	TAA Worker User				
No Appo	Connect Message Search				- 1
	Document Search				
	Talent Pool				- 1
m ©20	UI Applicant	For log	gin issues, call 651-	297-1111. For all oth	er WF
ATOLOHHIM	Agency				
	COFFR				- 1
	Common ID				

- Hover over "Search" in the top panel
- Select "Person" from the dropdown list



TREATMENT AND CONTROL GROUP PARTICIPANT RECORD SEARCH

Person Search	
• Hide Search Cri	teria
Last Name	
First Name	
Middle Initial	
SSN	216-54-8654
Record ID	
MAXIS Case	
MAXIS PMI	
E-mail	
Mobile Username	
Staff Assigned	All Values 🗸
Run Search SI	now Additional Criteria

- Enter the participant's Social Security Number in the "SSN" field
- Click "Run Search"



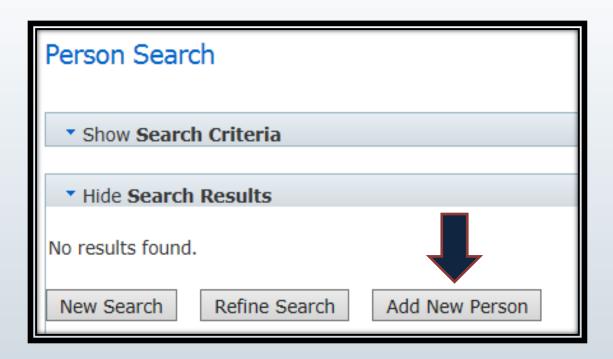
TREATMENT AND CONTROL GROUP PARTICIPANT RECORD SEARCH

If search results are found, click on the individual's name and Skip to slide 18

Person Search					
* Show Search Criteria					
* Hide Search Results					
Name: Birth Date 🔹	SSN	Record ID			
Smith, Jenna P 07/25/1976	8654	202015667			
New Search Refine Search					



TREATMENT AND CONTROL GROUP ADDING A NEW PERSON RECORD



- If you receive a message that says "No results found" this means the individual has never been case managed in a program using WF1
- Click on "Add New Person" to create a new shell record



TREATMENT AND CONTROL GROUP ADDING A NEW PERSON RECORD

Person Add							
SSN	216-54-865	4	SSN Verified				
*Last Name	Smith		*First Name	Jenna		MI	Ρ
Birth Date	07/25/1976		Preferred First Name				
<u>*Address 1</u>	111 1st Street North						
Address 2							
.*City	Eagan		<u>*</u> State	MN 🗸	*Zip 55121		
*County	Dakota	~	*Country	United States			~
Phone	Ext.	Phone Type	If other	, please spec	ify: TTY	Video	
(651) 387-111	1	Cell	~				
		None Selecte	ed 🖌				
		None Selecte	ed 🗸				
		None Selecte	ed 🗸				
E-mail					E-mail Typ	e	
jpsmith@gmail	.com				Personal 1	~	
					None Selec	cted 🗸	
Veteran Status Not a Veteran							
*Citizen/Right to Work Citizen 🗸							
Save Cano	el						

- To ensure accurate and complete reports, enter all known data into the available fields
- If the participant is not a U.S. Citizen, select "Right to Work" and enter the person's Alien Registration Card Number and its Expiration Date

OMIC DEVELOPMENT

Click "Save"

TREATMENT AND CONTROL GROUP ADDING A NEW PERSON RECORD

Contact Informa	ation					
Jenna P Smith Birth Date 07/25/1	.976			Rec	ord ID 20	2015667
*Last Name Smi	ith	*First Name	Jenna			
MI P						
Alias Last		Alias First				
Alias MI						
Preferred First Name						
Pronoun she/	e/her/hers 💙					
	Ext. Phone Type	If other, pl	ease specif	ί <u>γ:</u> ΤΤΥ \	/ideo	
(651) 387-1111	Cell 🗸					
	None Selected 💊					
	None Selected 🗸					
	None Selected 💊	·				
Ok with receiving Yes text messages E-mail E-mail Type						
jpsmith@gmail.com				E-mail Type Personal 1	~	
None Selected V						
Residential Addres	55					
*Address 1	111 1st Street North					
Address 2						
*City	Eagan	*State	MN 🗸	*Zip 551	21	
*County	Dakota 🗸 🗸	*Country	United Stat	es		~

- The individual is now assigned a WF1 ID number
- This number will be used as an ID instead of the SSN
- Continue entering data into all fields that are still blank. For example, if you have alias information, preferred name, or alternate Contact, enter it.
- Click "Save"



EMPLOYMENT AND ECONOMIC DEVELOPMENT

CONTROL GROUP SPECIFIC DATA ENTRY

<u>CONTROL GROUP</u> NEW PROGRAM APPLICATION

Home Search My Ta	sks 🔹 Recent Work	Manage Case	Manage Program	Reports	References	Resources I
General	D					
At-A-Glance	Program Summ	ary				
Contact	Jenna P Smith Birth Date 07/25/1	976			Record	ID 202015667
Tickler	birtir bate 07/25/1					
Connect Messages	Add New Application	2				
Demographics	, ad new Application					
Mobile User	No program sequence	es to display.				
Work Preferences						
MN Works Resume						
Case Note						
Add Case Note						
Case Note Quick						
Case Note Search						
Cases						
Program/New App	1					
Eligibility/Enrollment						

- 1. Select "Program/New App" in the side panel
- 2. Click on "Add New Application



<u>CONTROL GROUP</u> Before Moving Forward

This worker has been assigned to a study group.

Please record the worker's MathematicalD and study group assignment for entry into your state's management information system. You will not be able to retrieve this information after you exit this page.

MathematicalD: 40002923 Study group assignment: Control

I have recorded the MathematicaID and study group assignment. Exit this worker's record by clicking the I AM DONE button.

I AM DONE

You will need the following information from Mathematica's Random Assignment System "CONFIRMIT"

- 1. Mathematica/Confirmit ID
- 2. Study Group Assignment
 - Treatment
 - \circ Control



<u>CONTROL GROUP</u> NEW PROGRAM APPLICATION

New Application						
Jenna P Smith Record ID 202015667 Birth Date 07/25/1976						
Step: 1. Applica	tion 2. Eligibility 3. Enrollment					
*Program *Application Date	RETAIN					
Agency	Mayo Clinic					
Display Funding Stream	-					
COFFR	Mayo Clinic - SDA 163					
Location	Mayo Clinic					
Service Model	No service models found 🗸					
Primary Staff Support Staff Send Tickler	Carlson, Amy Vestphal, Samantha					
* Show Case Note						
Show User Defined Fields						
Continue to Eligibility	Save and Exit Wizard Cancel					

- Program name: RETAIN
- Application Date: Date participant signed their application
- Primary Staff: Select the assigned case manager
- Support Staff: Person who will also be entering data on the case or coverage for Primary
- Click "Continue to Eligibility"

<u>CONTROL GROUP</u> ELIGIBILITY DATA ENTRY

Step: 1. Appl	ication	2. Eligibility	3. Enrollment
Program Seg	1		
Agency: Locatio	n Mayo Clinic:	Mayo Clinic	
Entered by	Amy Carlsor	ı	
Application Date	08/01/2022		
*Decision Date		08/01/2022	
*Birth Date		03/23/1948	Age 74
*Resident of MN		Yes	~
*Working in MN		Yes	~
*Diagnosis of Illn		Yes	~
Impacts Employ Invasive Proced 12 Weeks or wit	ure within Past	No	~
Weeks that impa		t	
*Employed within			~
*RETAIN Healthca Employee	are Sub/Recipie	nt No	~
Employer Offers Program	Return to Work	No	~
*Legal Represent related to Work			~
*Has Capacity to Informed Conse	nt	Yes	~
*Confirmit ID Nu	mber	40000121	
*Part of Control of	or Treatment Gro	Control	~
Determine Result	ts		
Determination R	lesults	Eligible	
Save and Continu	ue to Enrollment	Save and Exit	Wizard Cancel

- Decision Date: Date RTWCM determined eligibility based off application data
- Enter Mathematica ID provided through Confirmit
- Select "Control" for the last question
- Click "Determine Results"
- If determined "Ineligible" an error will display at the bottom of the screen that must be corrected before moving forward
- If determined "Eligible" click "Save and Continue to Enrollment"



Step: 1. Appli	cation	2. Eligibility	,	3. Enro	llment			
Program <u>Seg</u> Agency: Location Entered by Application Date	Amy C	Clinic: Mayo Clini arlson Last Up 2022 Decisio	dated by		Carlson I/2022			
*Enrollment Date *Initial Services D *Primary Staff SSN		/2022 🛄 n, Amy	~					
*Last Name	Johnson		*First	t Name P	aula		MI	Ρ
*Birth Date	03/23/1948		Age 74					
*Address 1	333 3rd Str	eet						
Address 2								
*City	Eagan		*State	MN	✓ <u>*Zip</u>	55121		
*County	Dakota	* :	Country	United S	States		~	
Phone (651) 555-5555 OK with receivin E-mail) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	hone Type Cell None Selected None Selected None Selected Selected Selected None Select	 . .<	r, please s		TTY Video		
johnson@gmail.co	m				Pers	onal 1 🛛 👻		

- Continue your data entry throughout the entire Enrollment Screen
- Initial Service date is the first date you communicated with the worker/participant
- Confirm previously entered contact information is accurate

NOMIC DEVELOPMENT

*Gender	Female 🗸
*Ethnicity - Hispanic or Latino	Person is Not Hispanic or Latino 🗙
*Race	
American Indian or Alaska Native	Asian
Black or African American	Did Not Self-Identify
🗆 Hawaiian Native/Pacific Islander	White
*Primary Language	English 🗸
*Veteran Status	Not a Veteran 💙
*Highest Level of Education	Education Beyond the Bachelor's Degree 🗸
*Applied or Received SSI/SSDI	No 🗸
*Public Income Received	Other Public Programs 🗸
	Select/Deselect
*If Other Public Programs	TANF, SNAP, MFIP
*Referred to RETAIN by	Self-Referral - Social Media or Press Coverage
*Housing Problems and/or Economic Circumstances	No
*Medical Insurance Coverage	Other 🗸
	Select/Deselect
*If Other Medical Insurance	Refugee Medical Assistance
*Current Health Condition	Good 💙
Current Injury/Illness Limits the Type or Amount of Work	Yes 🗸
*Primary Injury or Illness	Ankle 🗸
*Primary Condition Resulted From	Accident or Injury 💙
*Injury or Illness Onset Date	07/15/2022
*Injury/Illness Caused by Work- Related Factors	No 🗸
*Part of Workers' Compensation Claim	No v
*Is Injury or Illness New or Worsening	New 🗸

- If Referred to RETAIN by "OTHER" explain in case note section at bottom of this screen
- If the injury or illness is worsening, use the date it began to worsen as the onset date

If there is "Select/Deselect"

•

underneath a dropdown list, clicking on it will allow you to select more than one choice



*Has Substance Use Disorder

- *Has Mental Illness Diagnosis
- *Current Employer Name
- *Employer Industry Classification
- *Labor Force Status
- *In Last 12 Months, Job Paid More than \$1,000 a Month
- *Hours per Week Worked Prior to Injury/Illness
- *Occupation of Pre-Injury/Illness Job
- *Employed at Current Job
- *Absence from Work Begin Date
- *How Long Since Last at Work
- *Number of Work-Loss Days
- *Number of Days Working with Restrictions
- *Person Expressed Dissatisfaction/ Conflict With Current Job/Employer
- **Other Employability Risk Factors**

No 🗸
No 💙
IBM
Manufacturing
Employed Full-Time
Yes 💙
40
Management, Professional, or Related
Between 2 Years and 5 Years V
07/20/2022
Between 1 Day and 1 Week
5
5
No 🗸
threat of being fired

- Continue entering data using the information provided to you on the participant's application
- Using the dropdown lists provided, make the selection that best fit the information provided by your participant



Open Initial Activity	
*Activity Type	Informational Brochure 🗸
Activity Subtype	
*Funding Stream	Mayo RETAIN Phase 2
Estimated End Date	08/01/2022
Estimated Hours	
Case Note	
If Referred to RETAIN by "OTHER" EXPLAIN WHAT "OTHER" MEANS IN TH	IS SECTION
Spell Check	
Enroll and Add Another Activ	vity Save without Enrolling Cancel

- Since participants in the Control Group will only receive one service and that service is to receive a brochure, the "Informational Brochure" activity must be the first and only activity on a Control Group participant's case record
- Click "Enroll"



<u>CONTROL GROUP</u> Participant is now Enrolled!

WORKFOR	CE ONE						
Home Search My Ta	sks 🕨 Recent Work 🛛 Manage Case 🕨	Manage Program 🕨	Reports	References 🕨	Resources +	Help	
General							🔮 Enrollment saved.
At-A-Glance Contact	Eligibility/Enrollment Summar	y					
Tickler Connect Messages	Jenna P Smith Birth Date 07/25/1976			Record	ID 202015667		
Demographics Mobile User	* Hide RETAIN Seq 1 - Enrolled						
Work Preferences MN Works Resume	Eligibility Agency	1/15/2021 Nayo 1/15/2021					
Case Note Add Case Note	Enrollment Agency	layo Iayo Clinic - SDA 163					
Case Note Quick Case Note Search	View/Print Enrollment						
Cases							
Program/New App							
Eligibility/Enrollment							



<u>CONTROL GROUP</u> EXIT THE PARTICIPANT

General	Eville Commence						
At-A-Glance	Exit Summary						
Contact	Jenna P Smith Birth Date 07/25/1976					Record	ID 202015667
Tickler	birtir bate 07/25/15/0						
Connect Messages							
Demographics	Hide RETAIN Seq 1 - Enro	lied					
Mobile User	Activity(ies) to Be Closed	Funding Stream		Start Date	Staff: A	gency	Staff Role
Work Preferences	Info Brochure	Mayo RETAIN Phas	e 2	11/15/2021	Amy Ca	rlson	Primary Staff
MN Works Resume					Mayo		
Case Note	Funding Stream		Start	Date		End Da	te
Add Case Note	Mayo RETAIN Phase 2		11/15	5/2021			
Case Note Quick	Exit Program Sequence						
Case Note Search							
Cases							
Program/New App	\sim						
Eligibility/Enrollment							
Activity							
TAA							
Plan							
Credential							
Measurable Skills Gain							
Reporting Collection							
Youth Performance							
Exit	1						
Follow-Up							

- Click on "Exit" in the side panel immediately after enrolling a Control Group participant
- Once in the "Exit Summary" screen, click on "Exit Program Sequence"

CONTROL GROUP PARTICIPANT EXIT

RETAIN Exit		
Jenna P Smith Birth Date 07/25/197		Record ID 202015667
Program Seq	1	
Agency: Location	Mayo Clinic: Mayo Clinic	
Enrollment Date	11/15/2021	
Entered by	Amy Carlson	
*Primary Exit Reason	Control Group	
Next Cancel		

- The "Primary Exit Reason" will automatically be "Control Group", which cannot be changed
- Click on "Next"



CONTROL GROUP PARTICIPANT EXIT

*Exit Date		11/15/2021
*Labor Force Status		Not in the Labor Force 💙
*Did the participant receive support	services?	No 🗸
*Did the participant receive needs re	elated payments?	No 🗸
*Disability Status		Yes, Disability is Employment Barrier
*Disability Category		Physical Impairment
*Employment Work Setting		Not Currently Employed
*Referred to Other Services Beyond	RETAIN	No 🗸
Hide Activities		
Activity: Subtype	Start Date	*Completion Result
Info Brochure	11/15/2021	Successful 🗸
	I	
Show Case Note		
Remove from caseload		
Save Final Exit Save Exit as Pendi	ng Cancel	

- Complete all fields within the Exit screen with the information known at the time of enrollment
- Close the "Info Brochure" activity by selecting the successful choice within the dropdown list
- Click "Remove from caseload"
- Click "Save Final Exit"

EMPLOYMENT AND ECONOMIC DEVELOPMENT

CONTROL GROUP PARTICIPANT EXIT

Control Group		
eceive support ser eceive needs relat	an anti-and the second and the second s	
etting rvices Beyond RE1	Yes No AIN No V	~

ANSWER THE "REMOVE FROM CASELOAD" WARNING AS <u>"YES"</u>



THE CONTROL PARTICIPANT IS EXITED!

Exit Summary		
Jenna P Smith Birth Date 07/25/1976		Record ID 202015667
* Hide RETAIN Seq 1 - Exited		
Exit Date 11/15/2021 Exit Reason Control	Group	
Funding Stream	Start Date	End Date
Mayo RETAIN Phase 2	11/15/2021	11/15/2021
View Exit		



EMPLOYMENT AND ECONOMIC DEVELOPMENT

TREATMENT GROUP DATA ENTRY

TREATMENT GROUP NEW PROGRAM APPLICATION

Home Search My Ta	sks Recent Work	Manage Case	Manage Program 🕨	Reports	References	Resources
General						
At-A-Glance	Program Summ	ary				
Contact	Jenna A Smith Birth Date 07/25/1	976			Record	ID 202015680
Tickler	birtir bate 07/25/1	.570				
Connect Messages	Add New Application	2				
Demographics	·					
Mobile User	No program sequence	es to display.				
Work Preferences						
MN Works Resume						
Case Note						
Add Case Note						
Case Note Quick						
Case Note Search						
Cases						
Program/New App	1					
Eligibility/Enrollment						

- 1. Select "Program/New App" in the side panel
- 2. Click on "Add New Application



TREATMENT GROUP Before Moving Forward

This worker has been assigned to a study group.

Please record the worker's MathematicalD and study group assignment for entry into your state's management information system. You will not be able to retrieve this information after you exit this page.

MathematicalD: **40000535** Study group assignment: **Treatment**

I have recorded the MathematicaID and study group assignment. Exit this worker's record by clicking the I AM DONE button.

I AM DONE

You will need the following information from Mathematica's Random Assignment System "CONFIRMIT"

- 1. Mathematica/Confirmit ID
- 2. Study Group Assignment
 - Treatment
 - Control



TREATMENT GROUP NEW PROGRAM APPLICATION

New Application		
Jenna A Smith Birth Date 07/25/1976		Record ID 202015680
Step: 1. Applica	tion 2. Eligibility 3. Enrollment	
*Program *Application Date	RETAIN	
Agency	Mayo Clinic	
Display Funding Stream	-	
COFFR	Mayo Clinic - SDA 163	
Location	Mayo Clinic	
Service Model	No service models found 🗸	
Primary Staff	Carlson, Amy 🗸	
Support Staff	Westphal, Samantha 🗸	
Send Tickler		
Show Case Note		
Show User Defined	Fields	
Continue to Eligibility	Save and Exit Wizard Cancel	

- Program name: RETAIN
- Application Date: Date participant signed their application
- Primary Staff: Select the assigned case manager
- Support Staff: Person who will also be entering data on the case or coverage for Primary
- Click "Continue to Eligibility"

DEVELOPMENT

TREATMENT GROUP ELIGIBILITY DATA ENTRY

Step:	1. Applicati	on	2.	Eligibility		3. Enrollment
Program	n Seg	1				
Agency: Location Mayo Clinic: Ma		iyo Clinic				
Entered by Amy Carlson		n				
Application Date 08/01/2022		2				
*Decision	Date			08/01/2022		
*Birth Da	te			03/23/1948		Age 74
*Residen	t of MN			Yes	~]
*Working	in MN			Yes	~]
	is of Illness/		t	Yes	~]
	Impacts Employment *Invasive Procedure within Past			No	~	1
12 Wee	12 Weeks or within Next 8			NO	•	
*Employed within the Last 6 Months Yes					1	
	Healthcare S			No]
Employe	ee				•]
*Employe Program	er Offers Ret	urn to Worl	ĸ	No	~	
*Legal Re	epresentation			No	~]
	to Workers' (acity to give					1
	d Consent	Арргоргіа	e	Yes	~	
*Confirm	it ID Number	r		40000121		
*Part of (Control or Tr	eatment Gr	oup	Treatment	~]
Determ	ine Results					
Determi	nation Resul	ts	El	igible		
Save an	nd Continue to	Enrollment		Save and Exit	Wiza	ard Cancel

- Decision Date: Date RTWCM determined eligibility based off application data
- Enter Mathematica ID provided through Confirmit
- Select "Treatment" for the last question
- Click "Determine Results"
- If determined "Ineligible" an error will display at the bottom of the screen that must be corrected before moving forward
- If determined "Eligible" click "Save and Continue to Enrollment"



Step: 1. Applica	ation 2.	Eligibility		3. Enrollm	ent			
Program <u>Seq</u> Agency: Location	1 Mayo Clinic:	Mayo Clinic						
Entered by	Amy Carlsor	Last Upda	nted by	Amy Carls	son			
Application Date	08/01/2022	Decision	Date	08/01/202	22			
*Enrollment Date	08/01/2022							
*Initial Services Da	te 08/01/2022							
*Primary Staff	Carlson, An	ıy v	•					
SSN	561-65-654	2						
*Last Name	lohnson		*First N	Iame Paula			MI	Ρ
*Birth Date 0	3/23/1948	Ag	e 74					
*Address 1	333 3rd Street							
Address 2								
*City E	Eagan	*S	tate	MN 🗸	*Zip 55	121		
*County	Dakota	✓ <u>*C</u>	ountry	United State	s		~	
Phone	Ext. Phone	Туре	If other,	please spec	ify: TT	Y Video		
(651) 555-5555	Cell	~						
	None	Selected 🗸						
	None	Selected 🗸						
	None	Selected 🗸						
					U	0		
OK with receiving	text messages	Yes	~					
E-mail	E-mail E-mail Type							
johnson@gmail.con	johnson@gmail.com Personal 1 🗸							

- Continue your data entry throughout the entire Enrollment Screen
- Initial Service date is the first date you communicated with the worker/participant
- Confirm previously entered contact information is accurate

ONOMIC DEVELOPMENT

*Gender	Female 🗸
*Ethnicity - Hispanic or Latino	Person is Not Hispanic or Latino 💙
*Race	
American Indian or Alaska Native	Asian
Black or African American	Did Not Self-Identify
Hawaiian Native/Pacific Islander	White
*Primary Language	English 🗸
*Veteran Status	Not a Veteran 🗸
*Highest Level of Education	Education Beyond the Bachelor's Degree 🗸
*Applied or Received SSI/SSDI	No 🗸
*Public Income Received	Other Public Programs 🗸
	Select/Deselect
*If Other Public Programs	TANF, SNAP, MFIP
*Referred to RETAIN by	Self-Referral - Social Media or Press Coverage
Housing Problems and/or Economic Circumstances	No 🗸
*Medical Insurance Coverage	Other 🗸
	Select/Deselect
*If Other Medical Insurance	Refugee Medical Assistance
Current Health Condition	Good 🗸
Current Injury/Illness Limits the Type or Amount of Work	Yes 🗸
*Primary Injury or Illness	Ankle 🗸
*Primary Condition Resulted From	Accident or Injury
*Injury or Illness Onset Date	07/15/2022
*Injury/Illness Caused by Work- Related Factors	No Y
*Part of Workers' Compensation Claim	No Y
*Is Injury or Illness New or Worsening	New 🗸

- If Referred to RETAIN by "OTHER" explain in case note section at bottom of this screen
- If the injury or illness is worsening, use the date it began to worsen as the onset date

If there is "Select/Deselect"

underneath a dropdown list, clicking on it will allow you to select more than one choice



*Has Substance Use Disorder

- *Has Mental Illness Diagnosis
- *Current Employer Name
- *Employer Industry Classification
- *Labor Force Status
- *In Last 12 Months, Job Paid More than \$1,000 a Month
- *Hours per Week Worked Prior to Injury/Illness
- *Occupation of Pre-Injury/Illness Job
- *Employed at Current Job
- *Absence from Work Begin Date
- *How Long Since Last at Work
- *Number of Work-Loss Days
- *Number of Days Working with Restrictions
- *Person Expressed Dissatisfaction/ Conflict With Current Job/Employer
- Other Employability Risk Factors

No
No 💙
IBM
Manufacturing
Employed Full-Time
Yes 🗸
40
Management, Professional, or Related
Between 2 Years and 5 Years 💙
07/20/2022
Between 1 Day and 1 Week 💙
5
5
No
threat of being fired

- Continue entering data using the information provided to you on the participant's application
- Using the dropdown lists provided, make the selection that best fit the information provided by your participant



Open Initial Activity					
Activity Type	Assessment 🗸				
Activity Subtype					
*Funding Stream	Mayo RETAIN Phase 2				
Estimated End Date	08/01/2022				
Estimated Hours					
Case Note					
If Referred to RETAIN by "OTHER" EXPLAIN WHAT "OTHER" MEANS IN THIS SECTION					
Spell Check					
Enroll Enroll and Add Another Acti	vity Save without Enrolling Cancel				

- Since treatment group participants receive information on the program's purpose and the services RTWCMs can provide them, the 1st activity must be "Orientation"
- Click "Enroll"

•



TREATMENT GROUP Participant is now Enrolled!

WORKFOR	CE ONE					
Home Search My Ta	sks 🔹 Recent Work Manage Case	Manage Program	Reports	References Resources	Help	
General						🔮 Enrollment sa
At-A-Glance Contact	Eligibility/Enrollment Summa	агу				
Tickler Connect Messages	Jenna A Smith Birth Date 07/25/1976			Record ID 20201568(D	
Demographics Mobile User	* Hide RETAIN Seq 1 - Enrolled					
Work Preferences MN Works Resume	Eligibility/Determination Date Eligibility Agency Enrollment Date	11/15/2021 Mayo 11/15/2021				
Case Note Add Case Note	Enrollment Agency COFFR Exit Date	Mayo Mayo Clinic - SDA 163				
Case Note Quick Case Note Search	View/Print Enrollment					
Cases						
Program/New App						
Eligibility/Enrollment						



Individual Employment Plan (IEP) Requirement

An Individualized Employment Plan must be completed by the counselor and the participant in accordance with the IEP policy located here: <u>https://apps.deed.state.mn.us/ddp/PolicyDetail.aspx?pol=411</u>

Since the IEP is the participant's plan and is a living document it must

- Be updated when an Obstacle or Barriers are overcome
- Goals/Objectives are achieved
- New goals/objectives are set
- Situations or Life changes occur
- Be signed/dated by the counselor and the participant with new signatures/dates added each time it is updated
- Be provided to the participant and a copy must be placed in the case file when the first plan is approved as well as all updated/modified plans



Individual Employment Plan (IEP) Requirement

Home Search My Ta	sks 🕨 Recent Work 🛛 Manage Case 🕨 Manage Program 🕨
General	
At-A-Glance	Plan Summary
Contact	Jenna A Smith Birth Date 07/25/1976
Tickler	
Connect Messages	
Demographics	* Hide RETAIN Seq 1 - Enrolled
Mobile User	No plans found.
Work Preferences	
MN Works Resume	Add Plan
Case Note	
Add Case Note	
Case Note Quick	
Case Note Search	
Cases	
Program/New App	
Eligibility/Enrollment	
Activity	
ТАА	
Plan	
Credential	

An IEP must be captured in WF1 with a plan approval date no later than 15 days after the enrollment date

- 1. Click on "Plan" in the side panel of the case record
- 1. In the Plan Summary screen, click on "Add Plan"



Individual Employment Plan (IEP) Requirement

RETAIN Employment Plan		
Jenna A Smith Birth Date 07/25/1976		Record ID 202015680
Program Seq	1	
Agency: Location	Mayo Clinic: Mayo Clinic	
Entered by	Amy Carlson	
Staff Assigned	Amy Carlson	
*Plan Mode Save and Continue Cancel	None Selected V None Selected Online Paper 1	

- 1. Select "PAPER"
- 2. Click "Save and Continue"



CAPTURING THE IEP FOR FEDERAL REPORTS

RETAIN Employment Plan	
Jenna A Smith Birth Date 07/25/1976	
Program Seq	1
Agency: Location	Mayo Clinic: Mayo Clinic
Entered by	Amy Carlson
Staff Assigned	Amy Carlson
Plan Mode	Paper
Show Case Note	
Plan Status	Pending
*Start Date	12/10/2021
Review Date	12/10/2022
*Confirmation Date	12/10/2021
Save and Activate Save as Pendi	ng Delete Pending Plan

- 1. START DATE: Is when the plan started
- REVIEW DATE: Is the date you will receive a reminder to update (not to exceed 1 year into the future)
- 3. CONFIRMATION DATE: Is the date the plan was signed by the Case Manager and Participant
- 4. Click Save and Active



CAPTURING THE IEP FOR FEDERAL REPORTS

Contact	Plan Summary			
Tickler	Jenna A Smith			Record ID 202015680
Connect Messages	Birth Date 07/25/1976			
Demographics				
Mobile User	* Hide RETAIN Seq 1 - E	nrolled		
Work Preferences	Plan Type: Mode	Plan Status	Start Date:	Staff: Agency
MN Works Resume			End Date	
Case Note	Employment Plan Paper	Active	12/10/2021	Amy Carlson Mayo
Add Case Note		I	1	
Case Note Quick	Add Plan			
Case Note Search				
Cases				
Program/New App				
Eligibility/Enrollment				
Activity				
ТАА				
Plan				

THE INDIVIDUAL EMPLOYMENT PLAN IS CAPTURED!



TREATMENT GROUP WF1 ACTIVITIES

WF1 Activities track

- What your participant has done, is doing, and (whenever possible) what they plan to do next
- The provider funding the service and who approved the participant to receive the service
- The date your participant started receiving the service and when they no longer needed that service (activity start and end dates)
- Where they received the service and employer/training details related to that service



TREATMENT GROUP WF1 ACTIVITIES

Open WF1 Activities:

- Are services the participant is currently receiving
- The activity start date is the date the participant started receiving that service

Closed WF1 Activities:

- Are the services the participant is no longer receiving
- The activity end date is the date the participant stopped receiving that service



TREATMENT GROUP WF1 Available Activities

Apprenticeship Assessment Career Counseling Classroom Training Credential Attained without Training Customized Training Employability Assessment GED Training Holding Individual Plan Development Job Readiness Job Retention Non-Credentialed Training OJT - Public or Private Orientation Paid Work Experience Partnering Restricted Work Returned to Work Staff Assisted Job Placement Staff Assisted Job Search in Area Transitional Employment Uncompensated Work Experience Work Loss



TREATMENT GROUP IMPORTANT ACTIVITIES

IF THE PARTICIPANT IS <u>WORKING WITH RESTRICTIONS</u> AT TIME OF ENROLLMENT OR AT ANYTIME DURING ENROLLMENT YOU MUST OPEN THE <u>"RESTRICTED WORK" ACTIVITY</u>

IF THE PARTICIPANT IS **NOT WORKING** AT TIME OF ENROLLMENT **OR** AT ANYTIME DURING ENROLLMENT, YOU MUST OPEN THE <u>"WORK LOSS" ACTIVITY</u>

As soon as one of these activities is opened on the case, the counselor will be able to capture the counts required in the RETAIN Service tab (See slides starting on 85)



TREATMENT GROUP WF1 Activity Definitions

<u>**Classroom Training</u>**: An organized program or course of study that provides specific vocational skills that lead to proficiency in performing actual tasks and technical functions required by certain occupational fields at entry, intermediate, or advanced levels and results in an industry-recognized credential when successfully completed.</u>

Customized Training: Training that is designed to meet the specific requirements of an employer (including a group of employers) that is conducted with a commitment by the employer to employ an individual upon successful completion of the training and for which the employer pays a significant portion of the cost of training according to several criteria.

Employability Assessment: Questioning the participant about ways they perform work tasks and/or questioning the supervisor on specific job tasks and activities as needed

<u>GED Training</u>: Attending approved training to obtain a General Equivalency Diploma (GED) funded by the RETAIN program.

Holding: The participant will be out of contact for more than 30 days. Example: Has been institutionalized, a family member is very ill, the participant is having surgery.



Individual Plan Development: IEPs are developed jointly by the participant case manager. The plan is an ongoing strategy to identify employment goals, achievement objectives, and an appropriate combination of services for the participant to achieve employment goals. Service providers must keep IEPs current to ensure all parties involved are accountable for their responsibilities.

Informational Brochure: Provides the participant with information on resources available through American Job Centers, CareerOne, and the Job Accommodation Network

<u>Job Readiness</u>: When reviewing symptoms and medical conditions with participant to determine the impact on essential job functions, reviewing physician restrictions with the participant, resolving differences in work restrictions from multiple providers, and when collaborating with the healthcare provider, participant, and employer to brainstorm solutions to barriers and mitigate physical risk factors



Job Retention: to capture the start date of work loss days for participants enrolled in RETAIN prior to having surgery that will impact their ability to work. If a participant can perform work tasks at the time of enrollment due to a future scheduled surgery, this activity must be opened. The end date of this activity indicates the first day of work loss.

Non-credential Training: An organized course of study that provides specific vocational skills that lead to proficiency in performing actual tasks required by certain occupational fields at entry, intermediate, or advanced levels but does not result in an industry- recognized credential when successfully completed.

OJT - Public or Private: is designed to provide a participant with the knowledge and skills necessary to perform full-time/long term employment job tasks. It provides reimbursement to the employer of up to a set percentage of the participant's given wage rate to assist in training costs and additional supervision related to the job training taking into account the content of training, prior work experience of the participant, and the service strategy of the participant, as appropriate.



Orientation: When the participant receives information on the RETAIN program, its services, and information on roles and responsibilities

Paid Work Experience: Paid structured learning experience that takes place in a workplace for a limited period of time. An internship or other work experience may be arranged within the private for-profit sector, the non-profit sector, or the public sector. Labor standards apply in any work experience setting with an employee/employer relationship, as defined by the Fair Labor Standards Act.

Partnering: Indicates the participant was assigned a QRC through Workers' Comp

<u>Restricted Work</u>: If at any time your participant's employer allows the participant to continue working with restrictions, modified work tasks, or accommodations.

<u>Returned to Work</u>: If the participant returns to their pre-injury illness job but has not yet exited from the RETAIN program. State date of this activity must be the date returned to work.

<u>Staff Assisted Job Placement</u>: When recommending/promoting the participant to prospective employers (participant consent required)



<u>Staff Assisted Job Search in Area</u>: Informing the participant of relevant job postings related to their interested career/industry located within a 35-mile commute from their residence. Includes providing information on in-demand industry sectors and occupations

Transitional Employment/Job: time-limited, paid work experiences that are subsidized up to 100% for individuals with barriers to employment who are chronically unemployed or who have an inconsistent work history. Must be combined with comprehensive career and supportive services as well as designed to establish a work history, demonstrate success in the workplace, and develop skills that lead to entry into and retention in unsubsidized employment

Uncompensated Work Experience: Unpaid structured learning experience that takes place in a workplace for a limited period of time. An internship or other work experience may be arranged within the private for-profit sector, the non-profit sector, or the public sector. Labor standards apply in any work experience setting with an employee/employer relationship, as defined by the Fair Labor Standards Act.

Workforce Preparation and Education: Indicates the participant was referred to employment services provided by a workforce development agency and will continue receiving RETAIN services from a RTWCM at the same time.

What Training Activities need a Measurable Skills Gain Captured?

Apprenticeship	Classroom Training		
Customized Training	GED Training		
OJT - Public or Private			



What Training Activities need a Credential Captured?

Apprenticeship	Classroom Training
Customized Training	GED Training



OPENING ACTIVITIES ON THE CASE RECORD

General	Activity Cummon				
At-A-Glance	Activity Summary				
Contact	Jenna A Smith Birth Date 07/25/1976			Record ID 2	02015680
Tickler					
Connect Messages					
Demographics	* Hide RETAIN Seq 1 - Enrolled				
Mobile User	Enrollment Date: 11/15/2021 Exit D	ate:			
Work Preferences	Activity: Subtype: Work Exp Type	Funding Stream	Start Date/	Staff: Agency	Action
MN Works Resume			End Date		
Case Note	Orientation	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Copy
Add Case Note					1
Case Note Quick	Add RETAIN Activity				
Case Note Search					
Cases					
Program/New App					
Eligibility/Enrollment	4				
Activity	1				
ТАА					

- 1. Click on "Activity" within the side panel of the participant's case record
- 2. Click "Add RETAIN Activity"



OPENING ACTIVITIES ON THE CASE RECORD

RETAIN Activity				
Jenna A Smith Birth Date 07/25/19	76			Record ID 202015680
Program Seq	1			
Agency: Location	Mayo Clinic: Mayo Clinic			
Enrollment Date	11/15/2021			
Entered by	Amy Carlson			
*Assign to Staff	Carlson, Amy (Current Primary) 🗸			
*Activity Type	Individual Plan Development	~]	
Next Cancel				

- Confirm the "Assign to Staff" is correct. If not, select the correct staff within your agency that approved the service for the participant.
- Select the "Activity Type" from the dropdown list that best describes the service the participant will/is receiving.
- Click "Next"



TREATMENT GROUP OPENING ACTIVITIES ON THE CASE RECORD

Activity Type	Individual Plan Development
Change Activity/Staff]
• Hide Open Activity	,
*Start Date Estimated End Date Funding Stream Activity Subtype Delivery Method Estimated Cost Estimated Hours User Defined Text 1	11/15/2021 Mayo RETAIN Phase 2 ✓ Virtual ✓
User Defined Text 2	
User Defined Date	
Show Comments	
Show Case Note	
Hide Close Activity	,
End Date Actual Cost \$	□ Completion Results None Selected ∨ Actual Hours □
Save Save and Ope	en New Activity Cancel

- The start date is the date the participant began the specific service
- If you have an estimated end date, cost, or hours enter those details
- Select the "Delivery Method" anticipated
- Skip the "Comments" and "Case Note" section (See case note section of this PowerPoint for instructions on how to capture these)
- Click "Save"

TREATMENT GROUP OPENING ACTIVITIES ON THE CASE RECORD

Activity Summary				
Jenna A Smith Birth Date 07/25/1976			Reco	rd ID 202015680
• Hide RETAIN Seq 1 - Enrolled				
Activity: Subtype: Work Exp Type	Funding Stream	Start Date/ End Date	Staff: Agency	Action
Job Readiness	Mayo RETAIN Phase	12/03/2021	Amy Carlson	Edit Delete
	2	Open	Mayo	Copy
Employability Assess	Mayo RETAIN Phase	12/03/2021	Amy Carlson	Edit Delete
	2	Open	Mayo	Copy
Career Counseling	Mayo RETAIN Phase	11/15/2021	Amy Carlson	Edit Delete
	2	Open	Mayo	Copy
Assessment	Mayo RETAIN Phase	11/15/2021	Amy Carlson	Edit Delete
	2	Open	Mayo	Copy
Indv Plan Dvpmt	Mayo RETAIN Phase	11/15/2021	Amy Carlson	Edit Delete
	2	Open	Mayo	Copy
Orientation	Mayo RETAIN Phase	11/15/2021	Amy Carlson	Edit Delete
	2	Open	Mayo	Copy

Add RETAIN Activity

- Every service provided to the participant must have an activity entered on the case record that represents the service and the timeframe that type of service was provided.
- The Individualized Plan Development, Career Counseling, and Job Readiness activities should be services continuously provided to every participant

MERT AND ECONOMIC DEVELOPMENT

CLOSING ACTIVITIES ON THE CASE RECORD

MN Works Resume Case Note	Activity: Subtype: Work Exp Type	Funding Stream	Start Date/	Staff: Agency	Action
Add Case Note Case Note Quick	Job Readiness	Mayo RETAIN Phase 2	End Date 12/03/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Case Note Search Cases	Employability Assess	Mayo RETAIN Phase 2	12/03/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Program/New App	Career Counseling	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Eligibility/Enrollment Activity	Assessment	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Delete Copy
TAA Plan	Indv Plan Dvpmt	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Credential	Orientation	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Delete

Click "Edit" within the "Action" column with the activity name the participant is no longer receiving



TREATMENT GROUP CLOSING ACTIVITIES ON THE CASE RECORD

RETAIN Activity				
Jenna A Smith Record ID 20201568 Birth Date 07/25/1976				
Program Seg 1				
Agency: Location	- Mayo Clinic: Mayo Clinic			
Enrollment Date	11/15/2021			
Entered by	Amy Carlson			
Assign to Staff	Carlson, Amy (Current Primary Staff)			
Activity Type	Orientation			
Co to Close Activity Panel Show Open Activity				
* Show Comments				
* Show Case Note				
* Hide Close Activity				
End Date 12/10/2021 Completion Results Successful Actual Cost \$ Actual Hours				
Save Save and Open New Activity Cancel				

- By clicking on the blue header lines, you can expand/collapse them
- Scroll to the bottom of the screen and enter the
 - Actual End Date the participant stopped receiving the service
 - The participant's completion results
 - The Actual Cost and Hours (if the information is available)
- Click "SAVE"

ACTIVITIES ON THE CASE RECORD

Activity: Subtype: Work Exp Type	Funding Stream	Start Date/ End Date	Staff: Agency	Action
Job Readiness	Mayo RETAIN Phase 2	12/03/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Employability Assess	Mayo RETAIN Phase 2	12/03/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Career Counseling	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Assessment	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Indv Plan Dvpmt	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Orientation	Mayo RETAIN Phase 2	11/15/2021 12/10/2021		Edit Delete Copy Reopen

- RETAIN activities need to be opened and closed in accordance with the Data Entry Timeliness policy located here: <u>https://apps.deed.state.mn.us/ddp/PolicyDetail.aspx?pol=552</u>
- If the participant begins accessing a closed service again, the assigned case manager can reopen the activity



OPENING TRAINING TYPE ACTIVITIES

RETAIN Activity		
Jenna A Smith Birth Date 07/25/197	76	Record ID 202015680
Program Seg	1	
Agency: Location	Mayo Clinic: Mayo Clinic	
Enrollment Date	11/15/2021	
Entered by	Amy Carlson	
*Assign to Staff	Carlson, Amy (Current Primary) 🗸	
*Activity Type	Classroom Training 🗸 🗸	
Next Cancel		

- Confirm the "Assign to Staff" is correct. If not, select the correct staff within your agency that approved the service for the participant.
- Select the "Activity Type" from the dropdown list that best describes the training service the participant will receive. (Apprenticeship, Classroom Training, Customized Training, GED Training, Non-credential training, OJT – Public or Private)
- Click "Next"



OPENING TRAINING TYPE ACTIVITIES

Activity Type	Classroom Training
Change Activity/Staff	
Hide Open Activity	
*Start Date	12/01/2021
Estimated End Date	12/15/2021
Funding Stream	Mayo RETAIN Phase 2
Activity Subtype	
Delivery Method	Virtual 🗸
Estimated Cost	\$ 150
Estimated Hours	80
User Defined Text 1	
User Defined Text 2	
User Defined Date	

- The start date is the date the participant begins the training service
- Enter the estimated end date, cost, and hours the participant was approved for this training

TREATMENT GROUP OPENING TRAINING TYPE ACTIVITIES

* Hide School Info		
<u>*</u> School	3071486	- Rochester Community and Technical College
	Clear School code for new	
	Search/Validate School	
*School Location	Online 🖌	
*Training Program (CIP)	52.0302	- Accounting Technology/Technician and Bookkeeping
	Clear CIP code for new se	arch.
	Search/Validate CIP	
*Training Title (O*NET)	43-3031.00	- Bookkeeping, Accounting, and Auditing Clerks
	Clear O*NET code for new	v search.
	Search/Validate O*NET	
Activity is Part of Career Pathway	No 🗸	
*Proposed Credential Type	GED	□ High School Diploma
	 Occupational Skills Certificate 	 Occupational Certification
	Technical/Occupational Skills License	 Certificate of Completion of an Apprenticeship
	AA or AS Degree	BA or BS Degree
	Master's Degree	Doctorate Degree
	Other Recognized Credential	
*Estimated Attainment Date	12/15/2021	
*Pell Grant Recipient	No 🗸	

- By clicking "Search/Validate" you can easily search the codes you need related to the specific training
- Select the type of credential training
- Enter the Estimated date the participant will attain the credential and if they received a Pell Grant to assist with the cost

NOMIC DEVELOPMENT

OPENING TRAINING TYPE ACTIVITIES

▼ Hide Case Note
Case Manager approved certification in QuickBooks at Rochester Community College to assist the participant with the skills needed to retain employment with current employer after employer agreed to modified work tasks that require this knowledge. This training is credentialed training listed on the Eligible Training Provider List (proof in casefile) Case Manager and participant updated the IEP. Training approved to begin 12/1/2021 with an approved end date of 12/15/2021.
// Spell Check
* Show Close Activity
Save Save and Open New Activity Cancel

- Enter a brief summary case note detailing the approved training dates, program, and school. Explain the fact you provided the participant with the ETPL and updated their IEP
- Click "Save"



TREATMENT GROUP TRAINING ACTIVITY DATA ERRORS

If a participant was scheduled to begin training but the participant decided not to attend the training before any training costs were applied

DO NOT SIMPLY CLOSE THE TRAINING ACTIVITY, DELETE IT!

- If there is a training activity on record, reports will look for Measurable Skill Gains
- If there is a training activity on record, reports will look for a captured credential
- If there is not an MSG or a credential captured, it will result in a negative in those attainment rates



TREATMENT GROUP Measurable Skill Gains (MSG) Data Entry Timeliness

MSGs must be entered into WF1 no later than

15 business days after receiving proof of a gain or within 365 days after the start of the fiscal year

Whichever is earlier



5 Types of Measurable Skill Gains (MSG)

- **1.** Educational Functioning Level Date: New documented assessments showing an increase in abilities;
- 2. Secondary Report Card Date: Documented attainment of a secondary school diploma or its recognized equivalent;
- **3. Post-Secondary Transcript Date:** showing sufficient number of credit hours in accordance with academic standards;
- **4. Training Milestone:** OJT or Apprenticeship progress report from the employer or training provider;
- 5. Skills Progression Date: Successful passage of an exam that is required for a particular occupation or progress in attaining technical or occupational skills



TREATMENT GROUP Where are MSGs entered in WF1?

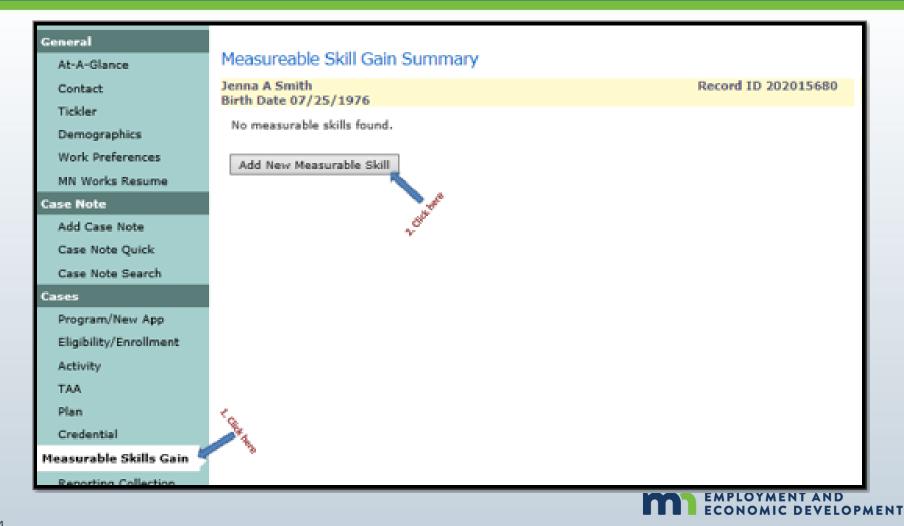
"Measurable Skills Gain"

The ONLY place to capture

PARTICIPANT TRAINING GAINS



Capturing Measurable Skill Gains (MSG)



Capturing Measurable Skill Gains (MSG)

Measurable Skills Gai	n Add	
Jenna A Smith Birth Date 07/25/1976		Record ID 202015680
*Program Sequence	RETAIN Seq 1	
*Measurable Skill Type *Attainment Date	Secondary or Post-Secondary Transcript 12/15/2021	
Add Document Save Skill Cancel		

- Select the type of gain your participant achieved
- Enter the Attainment Date the documentation shows as the date the gain was achieved
- Click "Save Skill"



Measurable Skill Gains (MSG) is Captured!!

Measureable Skill Gain Summary

Jenna A Smith Birth Date 07/25/1976 Record ID 202015680

Measurable Skill Type		Attainment Date	Year	Document Name: User Defined Document Name	Format	Action
Secondary or Post- Secondary Transcript	RETAIN Seq 1	12/15/2021	2021			Edit



CLOSING TRAINING TYPE ACTIVITIES

Activity: Subtype: Work Exp Type	Funding Stream	Start Date/ End Date	Staff: Agency	Action
Classroom Trng	Mayo RETAIN Phase 2	12/01/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Job Readiness	Mayo RETAIN Phase 2	12/03/2021 Open	Amy Carlson Mayo	t Delete Copy
Employability Assess	Mayo RETAIN Phase 2	12/03/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Career Counseling	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Assessment	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Indv Plan Dvpmt	Mayo RETAIN Phase 2	11/15/2021 Open	Amy Carlson Mayo	Edit Delete Copy
Orientation	Mayo RETAIN Phase 2	11/15/2021 12/10/2021	Amy Carlson Mayo	Edit Delete Copy Reopen

Click "Edit" within the "Action" column with the training activity the participant is no attending



CLOSING TRAINING TYPE ACTIVITIES

Activity Type	Classroom Training	
Go to Close Activity	Panel	
• Show Open Activ	ity	
• Show School Info	0	
Show Comments		
* Hide Case Note		
case file. Case Mana	ger has captured the credential in the Credential tab of WF1.	/_
Hide Close Activi	ty	
	Solution Successful 150 Actual Hours	
Save Save and O	pen New Activity Cancel	

- Enter a quick case note explaining the reason you are closing the activity
- End Date: the last day the participant attended classes
- Enter the completion status
- Enter the cost the program paid towards the training
- Click "Save"

REMINDER: Nothing in this screen allows you to capture a credential

OMIC DEVELOPMENT

Credentials Attained Data Entry Timeliness

Credentials must be entered into WF1 no later than

10 business days after receiving a copy of the credential or within 365 days from the participant's exit date

Whichever is earlier



CAPTURING THE CREDENTIAL

Connect Messages						C)isplaying 1	to 1 of 1
Demographics Mobile User	Credential Type	Program Sequence	Assoc Activity: Funding Stream	Actual Attainment Date	Last Updated By: Date	Document Name: User Defined Document Name	Format	Action
Work Preferences MN Works Resume	Cred Pend	RETAIN <u>Seg</u> 1	Classroom Trng Mayo RETAIN Phase		Carlson, Amy 12/10/2021			Edit
Case Note			2					
Add Case Note	Add Credentia	1						
Case Note Quick		<u> </u>						
Case Note Search								
Cases								
Program/New App								
Eligibility/Enrollment								
Activity								
TAA								
Plan	4							
Credential	1							

- 1. After a copy of the credential is received, click on "Credential" in the side panel
- 2. in the "Credential Summary Screen" click on "Edit"



TREATMENT GROUP CAPTURING THE CREDENTIAL

Program Sequence	RETAIN Seq 1
*Credential Type	Occupational Skills Certificate
Estimated Attainment Date	12/15/2021
Actual Attainment Date	12/15/2021
Associated Activity	Classroom Training (12/01/2021-Mayo RETAIN Phase 2) 🗸
Comments	
Spell Check	
Add Document	
Save Cancel	
3	

- Select the attained credential type from the dropdown list
- 2. Enter the Credential Attainment Date printed on the credential



^{3.} Click Save

TREATMENT GROUP THE CREDENTIAL IS CAPTURED!

							🕑 Cr
Credential S	ummary						
Jenna A Smith Birth Date 07/				Re	cord ID 202015680		
					Show ® 25 C Di	100 O 20	0 ○ 500 to 1 of 1
	Program Sequence	Assoc Activity: Funding Stream	Actual Attainment Date	Last Updated By: Date	Document Name: User Defined Document Name	Format	Action
Occ Skills Cert	RETAIN Seg 1	Classroom Trng Mayo RETAIN Phase 2	12/15/2021	Carlson, Amy 12/15/2021			Edit

REMINDER

The case manager needs to complete this task any time during the participant's enrollment or within 365 days after the participant's exit date for all participants with training activities!



EMPLOYMENT AND ECONOMIC DEVELOPMENT

RETAIN SERVICE TAB

RETAIN CASE MANAGERS MUST CAPTURE ALL DATES THEY

- **Communicate** with the Employer, Healthcare Provider, Participant, and/or Workplace Professional
- Attend meetings with the Employer, Healthcare Provider, and/or Other Party
- **Refer** their participant to services beyond RETAIN after 6 months, Ergonomic Assessments, On-site Job Analysis, and/or other Non-RETAIN Services

Assist with Workplace Accommodations

- Accessible Comm/Assistive Technologies
- Modified Work Tasks
- Other Accommodations
- Physical Change
- Policy Enhancement
- Technical Assistance
- If accommodations were not unavailable
- Dates the Participant received of an Ergonomic Assessment or On-site Job Analysis



THE "RETAIN SERVICE" TAB

After opening the appropriate activities (see slide 51) **Begin MONTHLY** data entry of **Work-Loss Days** And/or **Days of Restricted Work** Activity

Demographics	Add New RETAIN Service
Mobile User	CARL THE CARL AND AND ADD
Work Preferences	* Hide RETAIN Seg 1 - Enrolled - Work-Loss/Restriction Days
MN Works Resume	
Case Note	No Work/Loss Days exist for this program sequence.
Add Case Note	
Case Note Quick	Add New Month
Case Note Search	
Cases	
Program/New App	
Eligibility/Enrollment	—
Activity	
TAA	
Plan	
Credential	
Measurable Skills Gain	
Reporting Collection	
Youth Performance	
Exit	
Follow-Up	
Case Assignment	
Service Model	
Document	
Add Document	
Add Multiple Documents	
Document Summary	
Service	
RETAIN	1

<u>Monthly</u> Data Entry of Work-Loss Days and Restricted Work Activities

- Click on "RETAIN Service" in the side panel of the case record
- 2. Click on "Add New Month"



RETAIN Work-Loss/Restriction Days Add								
Jodie J Johnson Birth Date 01/01/	1967					Recor	d ID 20	2013833
Month/Year Entered by Last Updated by	August 2022 Amy Carlson							
Activity Type		Start Date/ End Date	08/01 Days	08/07 Days	08/14 Days	08/21 Days	08/28 Days	Monthly Totals
Work Loss		11/15/2021 - Open	5	5	5			15
Totals			5	5	5	0	0	15
Calculate Totals Monthly Grand To Case Note	4 ota 15			2	ω			
Spell Check	47							11
Save and Back to	RETAIN Service S	Summary	Cancel					

- Enter the days worked during the weeks available
- 2. Click on "Calculate Totals"
- 3. Click "Calculate Totals"
- 4. Click "Save and Back to RETAIN Service Summary

NOMIC DEVELOPMENT

Correspondence: Employer Communication Correspondence: Healthcare Provider Communication Correspondence: Participant Communication Correspondence: Workplace Professional Communication Healthcare Provider ID Meeting with Employer Meeting with Healthcare Provider Meeting with Healthcare Provider Meeting with Other Party Received Ergonomic Assessment Received On-site Job Analysis Referral: Services Beyond RETAIN after 6 Months	Referred for Ergonomic Assessment Referred for On-site Job Analysis Referred to Non-RETAIN Services Workplace Accommodation: Accessible Comm/Assistive Technologies Workplace Accommodation: Modified Work Tasks Workplace Accommodation: Other Workplace Accommodation: Physical Change Workplace Accommodation: Policy Enhancements Workplace Accommodation: Technical Assistance Workplace Accommodations Unavailable
--	---

Capturing other "RETAIN Services" you provide to/for your participant If there is more than one service to capture, they need to be captured separately

Example: If you performed four services by speaking to the (1) worker, (2) provider, and (3) employer then provided (4) technical assistance for work accommodations you will need to capture each services (4) individually. If you spoke to the employer and worker multiple times, each occurrence needs to be captured separately.



THE "RETAIN SERVICE" TAB SPECIAL NOTE

The first RETAIN Service on the case will include two additional questions

Perceived Level of Engagement

*Perceived Level of Healthcare None Selected Provider Engagement

Healthcare Options

- Low Provider Engagement
- Medium Provider Engagement
- High Provider Engagement
- No Provider Engagement
- Person did not permit staff to contact healthcare provider

*Perceived Level of Employer Engagement None Selected

Employer Options

- Low Employer Engagement
- Medium Employer Engagement
- High Employer Engagement
- No Employer Engagement
- Person did not permit staff to contact employer



CAPTURING THE HEALTHCARE PROVIDER ID

Retain Service Summary		
Jenna A Smith Birth Date 05/25/1976		Record ID 202015737
Add Retain Service		
*Program Sequence	RETAIN Seq 1	
*RETAIN Service	Healthcare Provider ID	~
*Healthcare Provider ID	55555	
*Service Date	12/20/2021	
*Perceived Level of Healthcare	Low provider engagement	~
Provider Engagement *Perceived Level of Employer Engagement	Medium employer engagement	\checkmark
Save Cancel		

- 1. Select "Healthcare Provider ID" from the dropdown list
- 2. Enter the 5-digit Provider ID
- 3. Enter the date this information was made available to you
- 4. Select your perceived level of engagement from the participant's employer and healthcare provider
- 5. Click "Save"



TREATMENT GROUP RETAIN SERVICE TAB: OTHER DATA

Retain Service Summ	ary
John J Johnson Birth Date 02/26/1977	Record ID 202014986
Add Retain Service	
Program Sequence	RETAIN Seq 1
RETAIN Service	Correspondence: Healthcare Provider Communication
 Service Date 	01/05/2021
Save Cancel	

- 1. Select the specific service provided within the dropdown list
- 2. Enter the date that service took place
- 3. Click "Save"



TREATMENT GROUP RETAIN SERVICE TAB: OTHER DATA

RETAIN Service	Program Sequence	Service Date *	Action
Correspondence: Employer Communication	RETAIN Seq 1	12/05/2021	Edit Delete
Correspondence: Participant Communication	RETAIN Seq 1	12/05/2021	Edit Delete
Workplace Accommodation: Modified Work Tasks	RETAIN Seq 1	12/02/2021	Edit Delete
Correspondence: Employer Communication	RETAIN Seq 1	12/01/2021	Edit Delete
Correspondence: Participant Communication	RETAIN Seq 1	12/01/2021	Edit Delete
Meeting with Employer	RETAIN Seq 1	12/01/2021	Edit Delete
Meeting with Healthcare Provider	RETAIN Seq 1	12/01/2021	Edit Delete
Received Ergonomic Assessment	RETAIN Seq 1	12/01/2021	Edit Delete
Received On-site Job Analysis	RETAIN Seq 1	12/01/2021	Edit Delete
Referred for Ergonomic Assessment	RETAIN Seq 1	11/20/2021	Edit Delete
Referred for On-site Job Analysis	RETAIN Seq 1	11/20/2021	Edit Delete
Correspondence: Participant Communication	RETAIN Seq 1	11/15/2021	Edit Delete
Healthcare Provider ID	RETAIN Seq 1	11/15/2021	Edit Delete

Each service you've entered will display on the RETAIN Service Summary screen.

Federal Reporting

Requirements: Must report initial date, most recent date, and cumulative counts



EMPLOYMENT AND ECONOMIC DEVELOPMENT

CASE NOTES

TREATMENT GROUP Case Note Entry

- Information provided verbally by service providers about the case participation or progress
- Purpose of the contact, information provided, description of outcomes, and next steps
- Information on contacts with other program staff
- All Support Service and Training fund approvals
 - Documentation for each disbursement must be included, including cost to provider (not value of service)
 - Documentation must show how approval was consistent with local policy



TREATMENT GROUP Communication and Contact

How often do you need to communicate with your participant?

- Case managers need to attempt communication with their participants at least every 30 days
- The case manager needs to case note in the participant's Workforce One record at least every 30 days detailing the attempt to communicate and/or if there was live contact received from the participant
- If no live contact has occurred for 90 consecutive days, the case manager **MUST** exit the participant due to non-compliance with communication requirements



TREATMENT GROUP Definition of LIVE CONTACT

One-to-one contact between the provider's staff and the participant

- In-person conversation
- Telephone conversation (or voicemail from participant)
- Electronic message including email, text message (SMS), instant message (IM), or message sent via social media (e.g. Facebook, Twitter, etc.)
- Postal mail update from participant

Mass emails and/or mass mailings are not case specific and will not fulfill the monthly contact requirement



Case Note Entry

None pelected

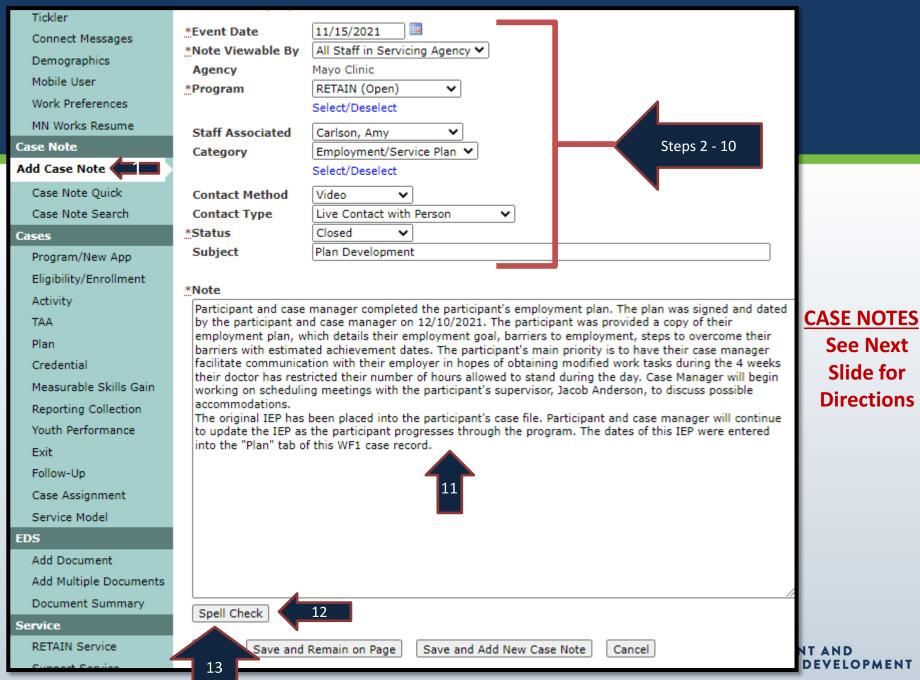
90-Day Summary Action Plan Activity. Application Appointment Apprenticeship Assessment Case Assignment/Transfer Child Care Closure/Exit Community Partner Computer/High Tech Tools Correspondence Counseling and Guidance Eligibility Employment/Service Plan Engagement Enrollment Financial/Billing Follow-up Information and Referral Information Release Intake Interviewing Job Referral Job Search Job Search Allowance Job/Employment

Measurable Skills Gain Medical Report Non-Compliance On-the-Job Training Other. Participation Hours Placement. Planning Priority for Service Privacy Change Referral Relocation Allowance RTAA Session. Social Services SSA Benefit Verification Start Sanction Process Support Service Technology Tools TRA Training Training Progress Report Transportation Tutoring Work Experience

REMINDER

State and Federal Monitors will look at case notes to determine if data entry policies are being obeyed and services provided are justified





Case Notes

Data Entry Timeliness policy located here: <u>https://apps.deed.state.mn.us/ddp/PolicyDetail.aspx?pol=552</u>

Instructions for Case Note Data Entry

- 1. Click "Add Case Note" within the side panel of the participant's WF1 record
- 2. Enter the Event Date (date it occurred)
- 3. Select the staff the case note should be viewable
- 4. Select the "RETAIN" program
- 5. Select the staff associated with the event (automatically defaults to the WF1 user entering)
- 6. Select the Category of case note (high-level subject)
- 7. Select the Contact Method associated with the event
- 8. Select the Contact Type (who was involved in the event)
- 9. Change "Status" to Closed
- 10. Enter a brief subject title
- 11. Type an overview of the event, who was involved, what was discussed, timeframes decided, etc.
- 12. Click Spell Check and make corrections as needed
- 13. Click "Save"



EMPLOYMENT AND ECONOMIC DEVELOPMENT

TREATMENT GROUP EXITING THE PARTICIPANT

TREATMENT GROUP Program Exit Data Entry Timeliness

All participants must be exited from the RETAIN program no later than 6 Months following their RETAIN Enrollment Date

All participant exits must be entered into WF1 no later than 192 days following the enrollment date

The Exit Date must be retroactive to the 182nd day



Connect Messages	* Hide RETAIN Seg 1 - Enro						
Demographics	Hide KETAIN Seq 1 - Enro	Jileu					
Mobile User	Activity(ies) to Be Closed	Funding Stream		Start Date	Staff: A	gency	Staff Role
Work Preferences MN Works Resume	Employability Assess	Mayo RETAIN Phase	e 2	12/03/2021	Amy Car Mayo	lson	Primary Staff
Case Note	Job Readiness	Mayo RETAIN Phase	2	12/03/2021	Amy Car Mayo	lson	Primary Staff
Add Case Note Case Note Quick	Indv Plan Dvpmt	Mayo RETAIN Phase	2	11/15/2021	Amy Car Mayo	lson	Primary Staff
Case Note Search	Assessment	Mayo RETAIN Phase	≥ 2	11/15/2021	Amy Car Mayo	lson	Primary Staff
Cases Program/New App	Career Counseling	Mayo RETAIN Phase 2 11/15/2021		Amy Car Mayo	lson	Primary Staff	
Eligibility/Enrollment	Funding Stream		Start	Date	indyo	End Da	te
Activity TAA	·		11/15/2021				
Plan	Exit Program Sequence	2					
Credential							
Measurable Skills Gain							
Reporting Collection							
Youth Performance							
Exit	1						
Follow-Up							
Case Assignment							

- Click on "Exit" in the side panel when you are ready to close the case
- Once in the "Exit Summary" screen, click on "Exit Program Sequence"

NOMIC DEVELOPMENT

RETAIN Exit

Jenna Smith Birth Date 07/25/197	6	Record ID 202015873
Program <u>Seq</u> Agency: Location Enrollment Date	2 Mayo Clinic: Mayo Clinic 03/07/2022 Arif Shahriar	
Entered by ***Primary Exit Reason	None Selected	~
Next Cancel	None Selected Did not Return to Work Moved from Area Returned to Different Job with Pre-Injury/Illness Empr	
	Returned to Pre-Injury/Illness Job Returned to Work Different Empr, not Pre-Injury/Illness E Workers Compensation (QRC) Assignment	mpr

- Once in the Exit screen, click on the "Primary Exit Reason" field and choose the appropriate exit reason from the drop-down list that best fits the reason the participant's case is closing
- Click on "Next"



RETAIN Exit			
Jenna A Smith Birth Date 07/25/197	76	Record ID 202015680	
Program <u>Seq</u> Agency: Location Enrollment Date Entered by	1 Mayo Clinic: Mayo Clinic 11/15/2021 Amy Carlson		Answer all questions within the Exit screen
*Primary Exit Reason Change Exit Reason	Returned to Different Job with Pre-1	Injury/Illness Empr	
*Exit Date		12/20/2021	
*Labor Force Status		Employed Full-Time	
*Did the participant r	eceive support services?	No 🗸	
*Did the participant r	eceive needs related payments?	No	
*Disability Status		Yes, Disability Not Barrier to Employment 🗸	
*Disability Category		Physical Impairment 🗸	
Employment Work S	etting	Working in Competitive, Integrated Employment 💙	
*Referred to Other Se	rvices Beyond RETAIN	No 🗸	

EMPLOYMENT AND

ECONOMIC DEVELOPMENT

Activity: Subtype	Start Date	*Completion Result
Indv Plan Dvpmt	11/15/2021	Successful 💙
Assessment	11/15/2021	Successful 💙
Career Counseling	11/15/2021	Successful 💙
Employability Assess	12/03/2021	Successful 🗸
Job Readiness	12/03/2021	Successful 🗸

Close all activities that remain open with the appropriate completion result



* Hide Placement Information			
*Select Employer	Add New Employer V Next		

In the "Placement Information" section, click "Next"



* Hide Placement	Information	
Employer 1		Enter all known employment details
Delete Placement]	
*Empr Name	IBM	
Worksite	Business Office	
Empr Contact	Jacob Anderson	
Empr E-mail	janderson@IBM.org	
Address 1	3605 Highway 52 N, Rochester	
Address 2		
City	Rochester State MN V Zip 55901	
County	Olmsted V Country United States	
Phone	Ext. Phone Type If other, please specify: TTY Video	
(507) 253-4011	Work	



•Employer Industry (NAICS)	445120 - Convenience Stores		
	Clear NAICS code for new search.		
	Search/Validate NAICS		

Select a NAICS from the below list and enter that code into the "Employer Industry (NAICS)"

- 212299 = Agriculture or Mining
- 236220 = Construction or Utilities
- 335999 = Manufacturing
- 445299 = Retail Trade, Wholesale Trade, or Transportation
- 519190 = Information
- 541219 = Finance or Real Estate
- 561110 = Professional, Management or Administrative Services
- 611710 = Education or Health Care
- 711410 = Accommodation and Food Services or Arts and Entertainment
- 811198 = Other Services
- 923120 = Public Administration



Occupational fittle (O*NET) 41-2011.00 Clear O*NET code for new search. Search/Validate O*NET	•Occupational Title (O*NET)	
---	-----------------------------	--

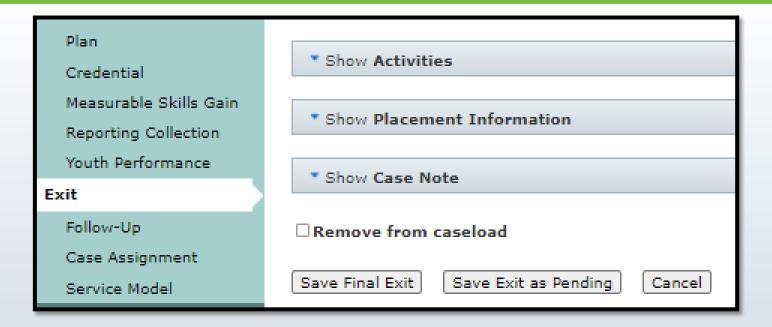
Enter one of the following ONET codes depending on the participant's employment at program exit

- 11-9199.00 = Management, professional, or related
- 43-4051.00 = Service
- 41-9099.00 = Sales and office
- 47-4099.00 = Natural Resources, Construction, or maintenance
- 53-6099.00 = Production, transportation, or material moving



Job Title	Bookkeeper
Source of Job Lead	Networking 🗸
*Job Sector	Private 🗸
Job Duration	Permanent (150 days or More) 🗸
*Job Start Date	12/20/2021
*Hourly Wage	\$ 25 Undisclosed
*Hours per Week	40
*Job is Training Related	Yes 🗸
*Benefit Package	Yes 🗸
Benefit Detail	🗹 Dental 🛛 🖾 Health
	☑ Life □ Other
	Retirement Vacation
If other, please explain:	
Select Second Employer Next	loyer 🗸

- Enter as many details as possible on the participant's employment at time of exit
 - If the participant is
 employed by more than
 one employment, click on
 "Next" under the "Add
 New Employer"
 dropdown list and repeat
 slides 103-106



- It is <u>not recommended</u> to remove your participant from your caseload until at least one year has gone by since their exit date. This allows case managers to easily find the participant's record in order to capture Supplemental Wage Information and other data after they exit from the RETAIN program. DO NOT CLICK "Remove from caseload"
- Click "Save Final Exit"



Exit Summary									
Jenna A Smith Record ID 202015680 Birth Date 07/25/1976									
* Hide RETAIN Seq 1 - Exited									
Exit Date 12/13/2021 Exit Reason Returne	ed to Different Job with Pre-Ir	njury/Illness Empr							
Funding Stream	Start Date	End Date							
Mayo RETAIN Phase 2 11/15/2021 12/20/2021									
View Exit									

THE PARTICIPANT IS EXITED FROM THE RETAIN PROGRAM!



EMPLOYMENT AND ECONOMIC DEVELOPMENT

TREATMENT GROUP FOLLOW-UPS

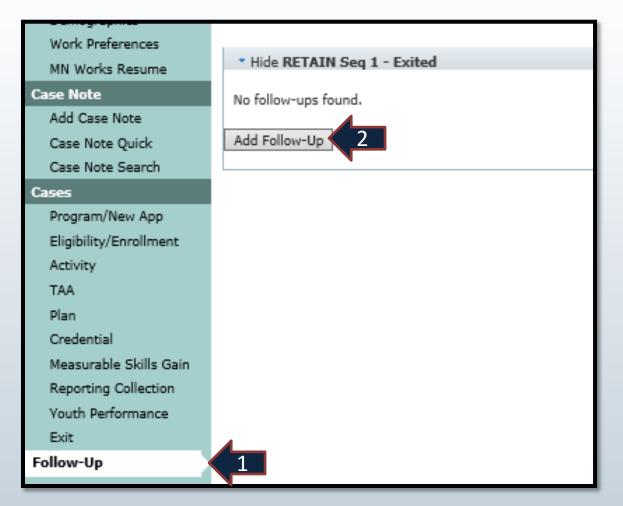
TREATMENT GROUP Follow-Up Data

Reasons to capture Follow-up details related to participant employment due to...

- The RETAIN reporting requirement to capture earnings during the 1st quarter prior to enrollment, the quarter of enrollment, and the 1st – 4th quarters following program enrollment. This data entry is especially important for participants employed by employers who are not required to report wages to the Unemployment Insurance Division.
- Performance Accountability of taxpayer funded programs. This data will be used to determine success rates of those programs administered by the Minnesota Department of Employment and Economic Development.
- State and local area management teams needing real time data to determine if case managers are sufficiently performing their job to assist participants in retaining their employment and/or if the case manager needs technical assistance.



TREATMENT GROUP Follow-Up Data



- Click on "Follow-Up" in the side panel of the participant's case record
- Click "Add Followup"



TREATMENT GROUP

Follow-Up

RETAIN Follow-Up	
Jenna A Smith Birth Date 07/25/197	Record ID 202015680
Program Seq	1
Agency: Location	Mayo Clinic: Mayo Clinic
Enrollment Date	11/15/2021
Entered by	Amy Carlson
Exit Date	12/13/2021
*Contact Date	03/13/2022
*Follow-Up Interval	90 Day 🗸
*Contact Method	Phone 🗸
Labor Force Status	Employed Full-Time 💙
Comments	
going well and she is	ed participant to check in on how everything is going. Participant said everything is still loving her new job. She again said thank you for all the assistance during the time ave restricted work due to her injury.

Enter the date you performed the employment follow-up/check in, the follow-up interval, contact method, current employment status, and any additional information in the comment section

Continue to next slide



TREATMENT GROUP Follow-Up

* Hide Employment Verification - IBM												
Updated at	Job Title	Hourly Wage	Hours per Week	Benefits Package								
Exit	Bookkeeper	\$25.00	40	Yes								
*Still employed at this Job Title *Hourly Wage *Hours per Week Benefit Package	employer? © Yes O No Bookkeeper \$ 25.00 40 Yes	Undisclos	ed									
Add New Employer												

Enter any known employment changes within the "Employment Verification" section of the Followup screen. If the participant has a new employer or any additional employment, click "Add New Employer" and enter its details now

Continue to next slide



TREATMENT GROUP Follow-Up

Hide Case Note	
Case Manager create days)	d a tickler reminder to check in with this participant at the next interval (180
Spell Check	
Save Save and Er	nter Credential Cancel

- Enter any case notes you want known on the case
- Example: Case manager created a tickler as a reminder to follow-up at the next interval
- <u>Click "Save"</u>



TREATMENT GROUP Follow-Up Complete!

Follow-Up Summary										
Jenna A Smith Birth Date 07/2	Record ID 202015680									
* Hide RETAIN Seq 1 - Exited Follow-Up Contacts										
Interval	Staff	Agency	Action							
90 Day Amy Carlson Mayo Edit Delete										
Add Follow-Up										

- You can Edit or Delete if needed by clicking in the "Action" column
- You can add another Follow-up by clicking on "Add Follow-Up"



TREATMENT GROUP TICKLERS

WORKFOR	CE ONE
Home Search My Ta	sks 🕨 Recent Work Manage Case 🕨 Manage Program 🕨 Reports References 🕨 Resources 🕨 H
General	
At-A-Glance	Person Tickler
Contact	Jenna A Smith Record ID 202015680 Birth Date 07/25/1976
Tickler	
Connect Messages	No results found.
Demographics	Add Tickler

- 1. Click "Tickler" within the side panel of the case record
- 2. Click "Add Tickler" to create a reminder for something you want to be reminded of on a future date

(Tickers can be used during enrollment and after exit)



TREATMENT GROUP TICKLERS

Add Tickler	
*Recipient	Carlson, Amy Select/Deselect
*Due Date	06/26/2022
Tickler for	Smith, Jenna A 🗸 🗸
Program	RETAIN 🗸
*Task	
160 day Follow	up Interval is due for 202015680
Spell Check	
Save	/Copy to New Recipient Save/Copy to New Person Cancel

- You can create a tickler for yourself, or other staff related to the case
- Enter the date you want the tickler to alert you/them
- 3. Select the "RETAIN" program
- Type the reminder details you want the tickler to remind you to perform on its due date
- 5. Click "Save"



EMPLOYMENT AND ECONOMIC DEVELOPMENT

TREATMENT AND CONTROL GROUP WAGE COHORT CHART

TREATMENT AND CONTROL GROUP WAGE COHORT

	Reporting Year	+			Year 20 6/30/22)		Enrollment Year 2022 (7/1/22 – 6/30/23)				Enrollment Year 2023 (7/1/23 – 6/30/24)				Enrollment Year 2024 (7/1/24– 6/30/25)				Enrollment Year 2025 (7/1/25 - 6/30/26)			
RETAIN PARTICIPANT ENROLLMENT QUARTER		ţ	Q1 Jul-Sep 2021	Q2 Oot- Dec 2021	Q3 Jan- Mar 2022	Q4 Apr- Jun 2022	Q1 Jul-Sep 2022	Q2 Oct- Dec 2022	Q3 Jan- Mar 2023	Q4 Apr- Jun 2023	Q1 Jul-Sep 2023	Q2 Oct- Dec 2023	Q3 Jan- Mar 2024	Q4 Apr- Jun 2024	Q1 Jul-Sep 2024	Q2 Oct- Dec 2024	Q3 Jan- Mar 2025	Q4 Apr- Jun 2025	Q1 Jul-Sep 2025	Q2 Oct- Dec 2025	Q3 Jan- Mar 2026	Q4 Apr- Jun 2026
Earnings in first quarter prior to enrollment	Percelling Optician	ţ																				
Earnings in quarter of enrollment	Reporting Quarter	Ť																				
Earnings in first quarter after enrollment	Republica Quarter	Ť																				
Earnings in second quarter after enrollment	Republica Quarter	t																				
Earnings in third quarter after enrollment	Brancline Quarter	ţ																				
Earnings in fourth quarter after enrollment	Branding Quarter	Ť																				



TREATMENT AND CONTROL GROUP WAGE COHORT

Directions on how to use this chart in order to find when a participant's wages will be reportable in quarter reports for the RETAIN Phase 2 program

To find the quarter participants will have fully reported wage information based on the 6 full months allowed for Minnesota employers to report staff wages to the Unemployment Insurance Division located within Minnesota's Department of Employment and Economic Development

Follow the Enrollment Year's color in which you want date ranges on down to the individual indicator section then look up to find the quarter that indicator will be reported for that participant



TREATMENT AND CONTROL GROUP WAGE COHORT

Example: If you want to know when "Earnings in first quarter prior to enrollment", will be reported for a participant who enrolled in RETAIN on October 15, 2022

- 1. Find the Enrollment Year that includes the date of 10/15/2022, which is found in the top line of this chart within the second section (in YELLOW) titled "Enrollment Year 2022"
- 2. Find the Enrollment Quarter that includes the date of 10/15/2022, which is found in the 2nd line of this chart within the 2nd square colored in YELLOW titled "Q2 Oct-Dec 2022"
- 3. Find the 2nd YELLOW square within the 3rd line of this chart and look directly above it to see the quarter this participant's wages prior to enrollment will report, which is will be "Q4 Apr-Jun 2023"
- 4. To find the quarter reports this participant will report wages for the remaining indicators, repeat step 3 by finding the 2nd YELLOW square within the remaining lines of this chart and following that square up to the quarter timeframe about it



Performance Questions?

Amy Carlson

Federal Adult Programs Performance Coordinator

amy.carlson@state.mn.us

651-259-7542



