Practices from the Field for Improving Case Management and Increasing Workforce System Integration in the Trade Adjustment Assistance (TAA) Program

An Occasional Paper Prepared as Part of the Evaluation of the Trade Adjustment Assistance Program

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EXECUTIVE SUMMARY

The Trade Adjustment Assistance (TAA) program offers an array of services and benefits to displaced workers whose job loss is certified as due to foreign trade. Ensuring that these services and benefits lead to suitable re-employment is one of the critical challenges facing state agencies charged with administering the TAA program. In recent years, a number of state workforce agencies have tried to improve the employment prospects of TAA participants by enhancing case management services as a gateway to, and support in effectively using, other benefits and services in the TAA program.

This briefing paper, one in a series produced as part of the Evaluation of the Trade Adjustment Assistance (TAA) Program, describes efforts taken by 12 states (Arizona, California, Illinois, Iowa, Kentucky, Minnesota, Missouri, New York, Oklahoma, Pennsylvania, South Carolina, and Utah)—and 14 local workforce investment areas within those states—to improve the quality of and access to case management. Many of these efforts were intertwined with attempts to better coordinate and link various programs, and thus workforce system integration is also a key focus in this report. Information for this report was collected as part of the fifth and final round of data collection for the process study in the TAA evaluation. Data came primarily from interviews with TAA Coordinators, other state-level staff, local administrators, and front-line staff.

While case management is not defined in TAA legislation, current law does require states to provide (or offer) multiple “employment and case management services,” such as comprehensive and specialized assessment, career counseling, individual employment plan (IEP) development, job search assistance, and information on training programs, financial aid, labor market trends, job vacancies, skill requirements, child care, transportation, and needs-related payments. ETA guidance clarifies that employment and case management services must be offered to all participants and must be documented. Current law also requires that states spend no less than
five percent of their total TAA allocation on such services and, if funds are insufficient, state agencies must provide services through other Federal programs.

Effective case management, based on the observations of a special work group convened by the Employment and Training Administration (ETA) of the U.S. Department of Labor as well as on past reports from the TAA evaluation, involves skilled case workers and supportive policies, practices and systems, characterized by the following:

- **Services tailored to individual participants’ needs, abilities, skills, and interests** as well as to opportunities and supports available in the community where customers are located (or to which they might relocate);
- **Supportive relationships with participants**, via a person-centered approach, in which case managers assist participants in making key decisions and in meeting requirements and milestones, by using such techniques as active listening and celebrating customer successes;
- **High-quality, specialized knowledge and guidance** relating to occupations, job openings, training and educational programs, as well as on specific requirements in TAA and other programs;
- **Easy coordination of services** with partner agencies, through knowledge of local agencies and the ability to communicate and share information about participants;
- **Seamless transitions for participants between programs and services**, when needed, without lengthy, involved, or duplicative processes and information requests; and
- **Improved management and information systems** (including electronic data systems and related forms, checklists, and procedures) that efficiently facilitate documentation, tracking, and reporting.

To provide more effective and accessible case management services for TAA participants, state agencies and local programs used the following strategies and approaches.

1) **Improving case managers’ skills and knowledge through training, feedback and improved hiring practices.** Training on core case management skills and “person-centered” approaches, while not common, was delivered by various methods. It included mentoring and experiential approaches (role-playing and simulations), delivered in the classroom and through webinars, by a variety of providers (e.g., state training agencies, state and local managers, public institutions, or external consultants) and targeted to both new and veteran staff. Most states implemented training on new systems and specific TAA program requirements. States built in various opportunities to provide feedback to local-level staff. Another strategy to increase case managers’ skills was to modify hiring practices in order to bring in staff with specific skills, credentials, and experience related to delivering effective case management.
2) **Implementing efforts to improve program coordination and system integration.** State and local efforts to improve access to case management ranged from limited efforts to align specific program policies to broad statewide transformations. All these approaches required: development of cross-cutting visions on how services would be delivered and programs would work together, alignment of specific programs’ policies, authority to implement the policies, and specific efforts to secure initial buy-in and ongoing input from staff. States also conducted system-level reviews to determine how well these policies worked in practice.

3) **Rethinking case managers’ roles, responsibilities, and job titles.** States and local areas employed various models each with different benefits and trade-offs to staff TAA case management. Some used Employment Services (ES) merit staff as primary case managers while others leveraged WIA staff to provide case management with state merit staff conducting inherently governmental TAA activities (such as approving IEPs and training plans). Still other states employed a functional alignment model, in which staff (funded under different programs) were cross-trained to serve TAA (and other) customers. All these approaches required training and coordination around redesigned staff roles and functions. Several states also changed case managers’ job titles to emphasize their roles in providing employment and/or training counseling or otherwise helping to guide customers through career path choices.

4) **Redesigning information systems.** To improve case management by facilitating seamless delivery of services, states and local areas engineered a variety of new intake, customer flow, and management information systems (MIS). These systems permitted enrollment information to be shared across programs, decreased points at which customers had to provide data, and allowed for common ways to document customer activities and progress. Some states created a single MIS for all workforce programs whiles others improved linkages between separate existing data systems. Implementation of the new systems presented several challenges, such as the need to: acquire expensive new software or hardware, coordinate participant and financial reporting, develop rules on confidentiality and data sharing, and maintain data systems’ functionality and speed.

For states and local areas wishing to improve their own ability to deliver case management services or increase workforce system integration, selected resources are listed at the end of this report. The information is available in a variety of formats and is useful for further exploring these potentially promising practices.

A possible future step for improving case management might be to use the conceptual framework presented here to begin trying to test more conclusively and precisely which changes in case management will create significant improvements in the ability of TAA customers (and those from other workforce programs) to achieve their employment and earnings goals.
I. INTRODUCTION

The Trade Adjustment Assistance (TAA) program offers an array of services and benefits to displaced workers whose job loss is certified as being due to foreign trade. Ensuring that these services and benefits, primarily training and income support, lead to suitable re-employment is one of the critical challenges facing state agencies charged with administering the TAA program. In recent years, a number of state agencies have tried to improve the employment prospects of TAA participants by enhancing case management services—the gateway to, and support in effectively using, other benefits and services in the TAA program.

This report focuses on efforts by state workforce agencies and local-level offices to improve the quality of and access to case management services for TAA participants, and thus to improve employment outcomes and build a better customer experience. Efforts to improve case management have involved rethinking how TAA and partner programs organize, coordinate, train, and hire staff, as well as how programs manage information and work together. Specific approaches included those focused on improving: case managers’ skills, knowledge and role; processes and procedures; and technological systems. However, improving case management has often been intertwined with attempts to better coordinate and link various programs; therefore, workforce system integration is also a key focus of this report.

The report is one in a series of occasional papers produced as part of the Evaluation of the TAA Program, commissioned by the Employment and Training Administration (ETA) of the U.S Department of Labor, which is responsible for administering TAA at the Federal level. The larger evaluation, conducted by Social Policy Research Associates (SPR) and its subcontractor, Mathematica Policy Research, includes an extensive process study of the TAA program and a quasi-experimental impact analysis.

Information for this report was collected from 12 states offices and 14 American Job Centers (in those states) as part of the fifth and final round of data collection for the process
study of the TAA evaluation. From winter 2010 through spring 2011, field staff conducted phone and in-person interviews with state-level administrators and local American Job Center staff, including TAA case managers, fiscal and management information system (MIS) staff, American Job Center directors, and Workforce Investment Act (WIA) program case managers.

The research team selected the state and local sites based on their potential for demonstrating potentially promising practices—the focus of this last round of data collection. The sites were identified through nominations by national and regional ETA staff as well as by staff in state workforce agencies, and through a review of data collected on states and local areas in prior rounds of implementation research for the TAA evaluation. The selection process ensured that states in all six ETA regions were represented. The 12 states and the number of local sites visited in each of them (indicated in parentheses) are: Arizona (2), California (2), Illinois (2), Iowa (1), Kentucky (1), Minnesota (1), Missouri (1), New York (1), Oklahoma (0), Pennsylvania (1), South Carolina (1), and Utah (1). (In Oklahoma, state staff were interviewed over the phone but no visit was conducted to any local areas.)

The report begins with a discussion of case management in TAA legislation, regulations, and guidance and then focuses on the characteristics of effective case management in serving TAA participants. The last sections of the report describe approaches that states and local offices have undertaken in order to improve the quality of and accessibility to case management for TAA by enhancing case managers’ skills and knowledge, restructuring services and job duties, revamping procedures and information systems, and developing strategic visions and policy regarding program coordination and service integration.
II. CASE MANAGEMENT IN TAA LEGISLATION, REGULATION AND GUIDANCE

Current legislation for TAA requires that case management, along with other employment services, be offered or provided to all adversely affected dislocated and incumbent workers that have been determined eligible for the TAA program. While case management and employment services must be offered, they are only the means by which TAA participants access other benefits and services. The main ones utilized by participants (as documented in other reports from the evaluation) are training and weekly income support (called Trade Readjustment Allowances or TRA), which is available after a participant has exhausted Unemployment Insurance (UI) benefits.

State agencies responsible for TAA administration typically have a specific procedure for the development and approval of individual employment plans (IEPs) and the training or other services proposed within them. As per the law, training and education can be provided only if several conditions are met: “1) The worker cannot find suitable employment otherwise; 2) The worker would benefit from the training; 3) There is a reasonable expectation of employment following the training; 4) The training the worker requests is reasonably available; 5) The worker

1 The program is currently authorized under the TAA Extension Act of 2011, but has undergone a number of changes over time. While authorized as part of the Trade Act of 1974, the program was amended in the TAA Reform Act of 2002 and the Trade and Globalization Adjustment Assistance Act (TGAAA) in 2009, with which the current program shares many features.

2 Workers become eligible for TAA only after a petition documenting that their job loss was due to foreign trade has been submitted to, and approved, i.e., “certified,” by ETA. State agencies responsible for administering the law notify eligible workers, who present themselves to state or local workforce offices to be determined individually eligible for the program and to receive case management and other employment services.

3 Other benefits available to TAA participants are tax credits for health insurance, allowances for relocation and job search, as well as wage supplements for certain older workers.

is qualified to undertake the training; and 6) The training is suitable for the worker and available at a reasonable cost.”

Case management and employment services are presumably of help to participants in making decisions and formulating plans, in providing information for state officials to use in reviewing these plans, and in helping participants stay on track to complete services and become reemployed. Also, an important aspect of case management in TAA is ensuring that participants understand the specific time limits for accessing program benefits, since TRA is currently available only to TAA participants who enter training within 26 weeks after job loss or certification of the petition (with exceptions if suitable training courses or enrollment slots are unavailable or participants’ health is poor).

Current legislation for TAA does not provide a definition of case management per se. Rather it lists the following “employment and case management services” (in § 2295) that state agencies must provide to all TAA participants.

1. Comprehensive and specialized assessment of skill levels and service needs… through diagnostic testing,…other assessment tools, and in-depth interviewing and evaluation to identify employment barriers and appropriate employment goals.

2. Development of an individual employment plan to identify employment goals and objectives, and appropriate training to achieve those goals and objectives.

3. Information on training available in local and regional areas, information on individual counseling to determine which training is suitable training, and information on how to apply for such training.

4. Information on how to apply for financial aid.

5. Short-term prevocational services, including development of learning skills, communications skills, interviewing skills, punctuality, personal maintenance skills, and professional conduct to prepare individuals for employment or training.

6. Individual career counseling, including job search and placement counseling, during the period in which the individual is receiving a trade adjustment allowance or training, and after receiving such training for purposes of job placement.

7. Provision of employment statistics information, including the provision of accurate information relating to local, regional, and national labor market areas, including…job vacancy listings in such labor market areas, information on jobs skills necessary to obtain jobs identified in job vacancy listings, information relating to local occupations that are in
demand and earnings potential of such occupations, and skills requirements for local occupations.

8. Information relating to the availability of supportive services, including services relating to child care, transportation, dependent care, housing assistance, and need-related payments that are necessary to enable an individual to participate in training.

ETA guidance\(^5\) clarifies that the role and importance of employment and case management services is “to provide workers the necessary information and support for them to achieve sustainable reemployment” and, further, that these services must be made available “in an integrated manner that suits their individual needs at a particular time.” Examples offered in the guidance include use of skill assessments in determining whether the worker meets the TAA training criteria, provision of career counseling, and use of labor market information to “inform the development of the employment and training plans” and in “reemployment and exit from the TAA program.”

The same guidance also describes requirements regarding documentation of case management and other employment services. That guidance states that a state agency must “demonstrate that it has provided or offered these services either in a paper-based case file or in an electronic case management system, which must be available for review” and that it has notified eligible workers of enrollment deadlines.

In a departure from past TAA legislation, which did not permit case management to be funded under the program, current law now requires that states spend no less than five percent of their total TAA allocation for employment and case management services. However, the law also requires that, if funds are insufficient for such services, state agencies must make “arrangements to make such services available through other Federal programs” and ETA guidance still strongly encourages coordination with other workforce programs, as an effective way to ensure the delivery of case management and employment services to TAA customers.

One workforce program with which TAA has often partnered to deliver employment and case management services is the Employment Service (ES) under the Wagner-Peyser Act. As SPR has noted in a previous report prepared for the TAA evaluation, TAA participants’ co-enrollment in

\(^5\) Training and Employment Guidance Letter (TEGL) 22-08.
the ES was nearly universal in most states. However, because of funding constraints, the ES was also limited as to the level and quality of case management services it could provide to TAA participants. As a result, the TAA program often coordinated with WIA to make case management services that were not easily supported by the ES—such as assessment, employment and training counseling and follow-up—available to TAA customers. Moreover, the WIA Dislocated Worker (DW) program was particularly well-suited to provide the case management that TAA customers needed since it already was providing such intensive services to other dislocated workers. Further, while some other workforce programs have eligibility criteria that would exclude some TAA customers, nearly all TAA participants are presumptively eligible for the DW program.

While the term “case management” is not defined in TAA legislation, it is explicitly defined in WIA as “the provision of a client-centered approach in the delivery of services, designed (A) to prepare and coordinate comprehensive employment plans, such as service strategies, for participants to ensure access to necessary workforce investment activities and support services, using, where feasible, computer-based technologies; and (B) to provide job and career counseling during program participation and after job placement.” Further, WIA regulations also explicitly state that participants can pursue training only if determined to be in need of such services after case management (as well as an interview, evaluation or assessment) and, further, require documentation in “case files” that “must contain determination of a need for training services as identified in the individual employment plan, comprehensive assessment, or through any other intensive service received.”

There is, however, one important complication in the current regulatory and legislative landscape regarding case management. A final rule issued in April 2010 as part of the Code of

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7 WIA Section 134 (d) (3) (C) lists the services considered to be intensive, which include: comprehensive and specialized assessments of skills level and services needs, development of an individual employment plan, group and individual counseling and career planning, case management, and short-term pre-vocation services. In WIA, case management, including development of a plan and job and career counseling, are required before an eligible participant can access training services.
8 WIA, Title 1, Part A, Section 101(5).
9 20 CFR Section 663.410
10 20 CFR Section 663.240
Federal Regulations (CFR) required that, for purposes of ensuring “consistency, efficiency, accountability and transparency,” states should carry out TAA-funded administrative functions—including case management functions—using state merit staff. This merit staffing requirement applies to all states, unless the state has an exemption from the merit staffing requirement for the administration of the Wagner-Peyser Act.\(^\text{11}\) This requirement, which took full effect in February 2011, caused some states to change their case management staffing for TAA-funded activities. Some states added a requirement for plan approval by state merit staff in the central office, and others shifted the responsibilities for these services over to locally-based state merit staff. While the full impact of this regulatory change was not known when this report was prepared, earlier SPR research has noted its potential to limit co-enrollment of TAA customers in other programs insofar as states may rely less on WIA staff to deliver case management services and rely instead on state merit staff exclusively.\(^\text{12}\)

\(^{11}\) 20 CFR 618, issued April 2, 2010, in the \textit{Federal Register}.

III. ATTRIBUTES OF EFFECTIVE CASE MANAGEMENT FOR TAA PARTICIPANTS

While employment and case management services are listed in TAA legislation and guidance, this report looks further to identify specific attributes of effective case management for TAA participants. To identify these attributes, the report builds on recommendations embodied in a short paper prepared for a project funded by ETA (also managed by SPR and completed in July 2011) to provide state agencies with technical assistance on effective case management across multiple workforce programs, including TAA. In conjunction with that project, ETA established a workgroup comprised of national and regional ETA staff as well as state and local-level workforce system staff, including those involved in administering TAA. Building on a review of the literature and input from the workgroup, a comprehensive vision of effective case management was developed, involving the following four elements.

1. Direct customer service activities, including assessment, career and training planning, development of an employment plan, coordination of supportive services, job matching, placement, and follow-up.

2. Monitoring and documenting services and outcomes on a case-by-case basis.

3. Skilled case managers.

4. Administrative policies, practices, and system infrastructures that support case managers and the case management function.

This vision recognized that the specific services for any individual participant will vary, based on the case manager’s determination as to what services are appropriate to meet a customer’s needs (and sometimes this involves recognizing that not all services will be appropriate for some customers). Effective case management for TAA participants, based on the

workgroup’s observations, other reports from the TAA evaluation, and current program requirements involves:

- **services tailored to individual participants’ needs, abilities, skills, and interests**, as well as to opportunities and supports available in the community where customers are located (or to which they might relocate);

- **supportive relationships with participants**, via a person-centered approach, in which case managers assist participants in making key decisions and in meeting requirements and milestones, by using such techniques as active listening and celebrating customer successes;

- **high-quality, specialized knowledge and guidance** relating to occupations, job openings, training and educational programs, as well as on specific requirements in TAA and other programs;

- **easy coordination of services** with partner agencies, through knowledge of local agencies, good communication skills, and a cooperative attitude in sharing information about participants;

- **seamless transitions for participants between programs and services**, when needed, without lengthy, involved, or duplicative processes and information requests; and

- **improved management and information systems** (including electronic data systems and related forms, checklists, and procedures) that efficiently facilitate service provision, documentation, tracking, reporting, and information-sharing consistent with privacy requirements.

The next chapters in this report discuss a variety of strategies that states used to improve the effectiveness of case management for TAA customers consistent with the attributes discussed above.

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IV. IMPROVING CASE MANAGERS’ SKILLS: TRAINING, FEEDBACK, AND MODIFIED HIRING PRACTICES

The effectiveness of case management depends in part on case managers’ abilities and performance in their jobs. Thus, several states and local offices focused on increasing the skills and knowledge of case managers serving TAA participants through such approaches as: (1) formal training, (2) performance reviews and feedback on performance, and (3) new hiring practices to recruit case managers with different or higher levels of skills. State and local practices in each of these areas are discussed in turn below.

Training on Case Management Skills

The research team found several states and localities that provided training on case management skills, including such core functions as how to conduct assessments, provide guidance, develop IEPs, help in job search or placement activities, and conduct follow-up, as well as on the techniques that could be used in “person-centered” approaches designed to enhance case managers’ effectiveness with customers. The main content areas of case management training focused on teaching, in detail, how to deliver case management services. Examples of state-wide training includes the following two cases.

- California’s Employment Development Department offered a course called “Case Management for Rookies—Career Coaching Basics” that emphasized building rapport with customers and developing good time-management skills for working with them. The TAA-specific version of this training covered how to deliver various case management services, with special attention on assessments, developing and implementing the IEP, good note-taking, and case documentation.

- Pennsylvania’s Department of Labor and Industry trained TAA case managers (along with all local staff, including new hires) using a standard statewide curriculum covering basic information on the workforce system and specific case-management related tasks and skills. Each staff member attended a multi-day course that provided basic information on workforce and career development, customer satisfaction, business etiquette, and performance measurement. Case managers then attended a higher-level
course that provided specific training on such topics as interviewing, developing IEPs, understanding labor market information, taking case notes, data entry, and other case management functions. The course presented various customer scenarios to case managers, allowing them to identify challenges, develop IEPs and service strategies, and take clear, specific case notes. The training was scripted to ensure that staff members across the state received a consistent message. All program staff—including those associated with TAA—attended these training courses, which were also offered to all new hires. The state Staff Development Coordination Services unit also held one-day classroom training on case management at various locations throughout the state and also offered live one- to two-hour webinars for American Job Center staff across the state on different workforce development topics. Topics in the past included basic labor market information (LMI) and O*NET concepts, business LMI, and common measures. These one- to two-hour live webinars were conducted several times a year.\(^{15}\)

However, it should be noted that the research team found that many states provided little support and few training opportunities on the delivery of person-centered skills (e.g., building rapport, active listening, etc.).

A second area of content covered in training provided to case managers focused on strategies related to increased program integration (which will be discussed later in this report). Such training focused on new roles for case managers in revised staffing structures, altered hiring practices, and new data sharing practices, including use of improved and integrated management information systems. Iowa, Missouri and Utah, for instance, all engaged staff in intensive training associated with their integration plans. Similarly, some states ran training classes on how staff should implement functional alignment, coordinate with partner staff under co-enrollment, or interface with newly integrated data systems. These training sessions all provided case managers with important information on how to effectively implement changes designed to improve the quality of case management services in TAA and often in the broader workforce system.

Training for case managers varied by delivery method, providers, and timing, as discussed below.

\(^{15}\) This presentation of Pennsylvania’s case management training can also be found in Elizabeth Laird and Pamela Holcomb, *Effective Case Management: Key Elements and Practices from the Field* (Mathematica Policy Research and Social Policy Research Associates, 2011), [https://effectivecasemanagement.workforce3one.org](https://effectivecasemanagement.workforce3one.org).
Training Delivery Methods

Methods to deliver training varied and included some that seemed likely to be effective in imparting new skills and knowledge, reaching broad audiences, and being memorable. While no information was available on the relative effectiveness of each approach, methods included the following components.

- **Interactive, Experiential Approaches.** Training delivered in classroom settings was often coupled with interactive approaches that allowed for learning through hands-on, experiential methods. Case management classes offered in Pennsylvania and California included interactive exercises and role-playing throughout the day so that trainees could learn and absorb the content of the courses. In New York, case management staff were offered interactive training on how to build rapport with customers, understand and acknowledge their feelings and values, help motivate customers and engage them in rational decision-making processes.

Iowa provided interactive training to American Job Center staff around a new service integration model, being implemented across the state, that involved functionally aligned teams, a newly integrated MIS, other new tools, physical remodeling for many centers, and an emphasis on customer service. While the implementation took place over 10 weeks, the core training for staff began with a day-long, off-site session for each functional team, including one made up of case managers, on roles and responsibilities and hands-on opportunities to learn various customer-centered skills. Subsequently, the whole American Job Center moved into a “soft launch” where for one week selected groups of customers moved through the realigned services to give staff an opportunity to practice, identify problems, make corrections, and minimize backlog at full launch. Then, immediately prior to a full launch, the center shut down for one day and staff experienced the system operating as a whole, doing a dry run using state staff as the “customers.”

- **Mentoring and Job Shadowing.** These methods were used in some states and local areas to teach case management skills to new staff. New employees in Utah, for instance, benefitted from a mentorship program in which state training teams assigned each new employee a more seasoned staff mentor. The National Able Network, a WIA contractor in Chicago, provided a nearly month-long training for new case managers who were required to job-shadow senior case managers. These job shadowing and mentoring activities provided new staff with an opportunity to work closely with experienced staff and to observe them delivering case management services to actual customers.

- **Discussion Forums.** Presentations by seasoned practitioners and roundtable discussions also allowed for interactive learning environments and may have stimulated new ideas about how to improve case management. Kentucky, for instance, held a roundtable where a consulting organization, The Center for Workforce Learning, provided a one-time training on various aspects of working with customers.

- **Webinars, Manuals, and Online Resources.** Some states used additional tools to deliver training to more staff or to those in remote locations. Pennsylvania, for instance, produced several of its training sessions as webinars, including one on LMI concepts for
front-line case management staff. Some states also provided attendees with printed course guides or manuals that supplemented their training and could serve as reference material later. Pennsylvania, for instance, included a manual that trainees could take with them after the Case Management 101 course, and Utah training staff provided a “Practice Activity Guide” that mentors used with their mentees. This guide included activities for new case managers to complete as well as a set of expectations they should have for their mentors. Finally, states had begun to put more of their training materials online. Pennsylvania, for instance, had an electronic training library that housed course presentations, pre-class reading assignments, and other training materials.

Providers of Case Management Training

Case management training was provided by several different types of entities.

- **State Agencies and Teams.** In the Pennsylvania and California courses described above, training was delivered by the state agency with responsibility for providing training to TAA and other workforce system partners. In several states, teams were responsible for identifying training needs and often for providing training. The TAA regional coordinators in California and Arizona, for instance, identified training needs in addition to managing and coordinating staff. States where staffs were functionally aligned often had quality-control teams responsible for visiting local areas and getting input from staff on training needs. Such teams also identified training needs through emails or other direct communication, such as requests submitted through the MIS or other computer-based request systems. These teams typically provided training themselves in both individual and group settings.

- **External Providers.** Some states contracted with an external provider for the training. For example, many TAA case managers in South Carolina attended Career Development Facilitator (CDF) training provided by an outside organization. The training provided a credential for individuals who work in career development settings, which was required for all WIA case managers in the state.\(^\text{16}\) In Minnesota, the state paid dues for staff to join professional development organizations, and some local areas supplemented this with funds to attend conferences.

- **Local Agencies and Contractors.** In some local areas, contractors responsible for local programs and Workforce Investment Boards (WIBs) provided training. In Chicago, the American Job Center contractor (that organized job shadowing) also provided additional case management training. In South Central Minnesota, the WIB organized a training team that met monthly to assess and plan training needs for all programs.

Participants in Case Management Training

One potentially important lesson learned from states that provided case management training was that it was helpful to offer the training to a larger audience, with the intention of refreshing and building case managers’ skills. The classes in Pennsylvania, for instance, were

\(^\text{16}\) Several agencies around the country provide this training for workforce professionals.
designed for new staff but were also available to veteran staff. Likewise, training specifically for TAA staff was often offered to staff from other programs, with the hope that cross-training would improve coordination. Of course, in states where staff were organized functionally, cross-training was the norm.

Some training was more restrictive as to whom it was targeted. Iowa’s training on its new integration model, for example, happened only once at each American Job Center. Likewise, mentoring was not offered to more experienced case managers who were unlikely to benefit from it.

However, states took some relatively simple steps to expand the number of individuals who benefitted from training by: providing hand-outs or posting training materials online for staff to more easily refresh their memories on specific details they may have missed, encouraging cross training when it was not required and providing scaled-down versions of one-time trainings.

### Training on and Communication of TAA Policies and Procedures

Many aspects of case management for TAA participants were similar to those for other dislocated and unemployed workers. However, since the TAA program was more complex than other workforce programs, and had undergone significant legislative and regulatory changes, specific training on TAA program requirements and procedures was thought to be a necessity for case managers in some states. During several rounds of site visits conducted as part of the TAA evaluation, the research team observed TAA staff in state central offices providing local-level staff with consistent and thorough training on program policies and procedures. In addition to training sessions, states also made detailed procedures manuals available to local-level staff and provided detailed explanations of various forms and tools, such as the MIS that is used with TAA customers.

State workforce agencies typically offered multiple full- or half-day sessions each calendar year, hosted centrally, in the field, or in both venues. Sometimes the training was offered in conjunction with similar sessions run by partner programs such as WIA, ES or Rapid Response. (However, even when partner programs were not formally involved, these TAA training sessions were often open to interested staff from partner programs.)

In addition to training sessions, states put a considerable number of other supports in place to provide guidance around TAA policies and procedures. Site visitors often heard about the
open lines of communication within states, sometimes running all the way up to ETA regional offices. Administrators at all levels were typically quite responsive when it came to local-level staff seeking clarification or guidance on particular policy-related issues. Finally, TAA state staff and regional support staff often held regular conference calls with local TAA staff as a way of addressing questions and sharing the latest state and federal policy and procedural issues.

Individual states seemed able to provide sessions on policy changes in a timely manner (notable during implementation and sunset of the prior TGAAA legislation within a relatively short time span). The frequent changes that occurred were somewhat frustrating for local staff who nonetheless appeared to be generally appreciative of their states’ efforts to keep them informed. Even when state staff were unable to quickly update certain materials, local staff found that states managed to find other ways to provide the information that was needed.

These successes notwithstanding, there were significant concerns voiced by some staff in regard to such training. One state staff member, for instance, expressed concern that staff and customers were spending far more time worrying about paperwork and deadlines than on developing employment and training plans. Likewise, a local case manager said that while she found the state training helpful in preparing her for rules and regulations governing the TAA program, she wanted more information on how the program operated across the state—for example, how other case managers conducted assessments. In short, both seemed to feel that they and their colleagues needed additional guidance or training on core case management services, such as assessment, career and training planning, IEP development, and placement.

**Performance Reviews and Feedback for Case Managers**

States and local offices typically conducted performance reviews and provided feedback to staff. Site visits provided the research team with several potentially promising ways that states and local areas structured systems for feedback and review in order to enhance case management services as discussed below. It should be noted that the performance review process also allowed administrators to assess the degree to which case management staff had absorbed information presented during training and to identify possible problems in new system designs. Further, as discussed later in this report (Chapter V), performance reviews were also conducted in some states to determine how well new systems and policies were working in terms of participant outcomes and other metrics.
The review process for TAA case managers was far from standardized among sites and states. Different reporting lines for different workforce programs and various case management staffing structures meant that the review process varied from state to state. Sometimes formal reviews were carried out at the local level, as was especially true when WIA staff served as the primary TAA case managers. However, sometimes such reviews were done at a state or within-state regional level in TAA, such as when ES staff served as the primary case managers.

A few states were exploring ways to make the review process simpler and more focused. South Carolina, for example, was examining ways to differentiate the formal appraisal process for TAA case managers from the one used for other ES staff. States that practiced functional alignment tended not to distinguish between case managers for TAA customers and those for other programs, and thus all members of the case management team were reviewed by local managers in the same way.

Another potentially promising practice involved more frequent but more supportive review processes. Several states were seeking to insert more frequent check-in meetings and other monitoring activities to determine whether services were delivered as intended and to ensure that case managers were feeling adequately supported in their attempts to deliver services. A few states described monthly or even weekly check-in meetings with supervisors where case managers’ individual performance was discussed, using reports generated from the MIS. The focus of these meetings was often to highlight specific staff successes as well to identify challenges and share solutions as a group.

One potentially promising practice concerning staff performance was the use of a clear incentive designed to improve case manager performance. Utah had a peer-to-peer recognition system in which case managers were awarded a bonus—additional paid time off—if their peers recognized them for going above and beyond the duties of the job. For this reward, the case manager had to exceed certain criteria—for example, the number of “positive closures”—that were intended to reinforce the goals of good case management.

**Modified Hiring Practices**

Several states sought to improve the quality of case management services directly by modifying their hiring practices and changing some of the expectations around the position of case manager. For example, some had codified and begun to enforce hiring criteria intended to
recruit more highly qualified individuals as case managers. Several states, such as Arizona, Illinois, and Kentucky, required candidates to have bachelor’s degrees and/or to have experience delivering case management, preferably in job-related settings (e.g., workforce system, human resources department, etc.). South Carolina tried to hire individuals with psychology degrees. Minnesota required bachelor’s degrees for most case managers, and in at least one local area, case managers who provided long-term case management had to be licensed clinical social workers.

Some states also relied on several “softer” criteria as important indicators of staff quality:

- Missouri looked for employment candidates who were able to display empathy, were comfortable with diversity, and had solid resumes and strong interviewing skills. The first two factors helped managers narrow in on qualities particularly important in developing a person-centered approach, whereas the latter two, despite being somewhat standard hiring criteria, are especially important given that the position is about helping people get hired for jobs.

- Several states, especially those with functionally aligned staffing structures (described later in this report), specifically looked for job candidates with the ability to work collaboratively and in teams.

- California had created a list of skill sets—e.g., verbal communication, written skills, deductive and inductive reasoning—that it used to help select ES staff who will become TAA specialists.

- South Carolina and Arizona, which both hired TAA case managers to oversee regional areas, typically listed a willingness to travel as part of their hiring criteria.
V. IMPROVING CASE MANAGEMENT THROUGH PROGRAM COORDINATION AND SYSTEM INTEGRATION

State administrators historically tried to improve the availability and quality of case management for TAA participants through various efforts to link, coordinate or integrate workforce programs. This was frequently the approach used during the time period when TAA legislation restricted use of TAA funds for such services, i.e., prior to the 2009 amendments to the program. These efforts continued after the amendments, and some distinct models and specific change strategies for coordination and integration of TAA with other programs are discussed below.

Options for Increasing Program Linkages

States and local workforce investment areas pursued a range of policies to achieve greater integration and coordination of TAA and other workforce programs. Initiatives to increase integration ranged in size and scope, from limited efforts to align specific program policies to statewide endeavors aimed at transforming an entire workforce system. Co-location of multiple workforce programs at a single site, typically an American Job Center, was often at one end of the spectrum while, at the other extreme, were efforts to completely integrate programs into a common system that operated without visible program divisions. Although local areas did sometimes initiate these types of efforts, states more typically initiated them. The states examined for this report generally pursued one of the following three types of integration efforts.

- **Full Program Integration.** Some states and a few local areas, decided to implement a broad re-design of the workforce system in order to integrate multiple programs. The most extensive measures involved new staffing structures to improve customer flow and make services more accessible, a unified management information system to support case management services, and extensive training and feedback to support the changes in philosophy and procedure. These three elements—each of which could be pursued individually or in concert with the others—are discussed elsewhere in this report.
• **Co-enrollment.** States or local areas created policies encouraging or requiring the co-enrollment of TAA customers in WIA. As already noted, the WIA dislocated worker program was a particularly good fit for linkages with the TAA program and that program was frequently used to support TAA customers both in primary and supportive case management roles. However, policies to require or encourage co-enrollment of TAA participants in WIA programs correlated little with actual co-enrollment rates.  

• **Coordination.** States and local areas implemented one or more less sweeping measures designed to make co-enrollment easier or to harmonize requirements or procedures. Examples included: (1) requiring TAA participants to choose training programs on the WIA-eligible training provider list; (2) requiring participants to choose training programs only for occupations in demand; (3) requiring that WIA and TAA use the same forms for developing training plans or tracking attendance; and (4) allowing local areas to set the same training expenditure caps for TAA as for WIA.

**Motivations for Change**

At the time of the site visits, many states had implemented or were moving toward more integration. A number of these efforts were part of a long series of systemic improvements, such as organizational reform at the state level or part of a series of previous efforts to integrate the workforce system. Reasons for changes to enhance coordination and integration are worth exploring, however. Based on staff responses, the primary motivation in most states was the desire to improve the delivery of services to workforce system customers by removing barriers that might prevent them from receiving effective case management. However, there were some interesting variations on that theme.

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17 This finding was based on the comparison of co-enrollment policies in 14 states that participated in an earlier round of implementation research for the larger TAA evaluation, as well as the co-enrollment rates reported by these same states in the Trade Act Participant Report (TAPR). Co-enrollment rates correlated with whether TAA customers pursued training – those who did so were more likely to be co-enrolled. The second, related finding was that TAA customers not in training tended to receive fewer case management services and were less frequently co-enrolled (and thus lacked access to case management services provided through WIA; see Melissa Mack, *Assessment, Case Management, and Post-Training Assistance*, 2009, pp. 7-9). These co-enrollment patterns may relate to states’ willingness or ability to enforce their own policies on co-enrollment for all TAA participants and their willingness to focus more on TAA customers pursuing training. In the site visits, SPR observed some reluctance on the part of WIA staff to allow TAA customers to co-enroll in WIA due to WIA funding limitations or concerns about how co-enrolled TAA customers would affect WIA performance on the common measures.

• In Missouri, for instance, the state carefully considered how to improve customer outcomes and realized that improvements could best be achieved by increasing access to additional programs and services.

• Staff in Minnesota explained that they chose a co-enrollment model in which TAA participants were co-enrolled in the state’s dislocated worker program (jointly funded through the WIA Dislocated Worker program and a similar state program), so that customers could be served by a single case manager responsible for both TAA and DW program delivery. This arrangement avoided the prior situation in which two case managers from different programs passed customers back and forth, increasing the potential to miss delivering necessary services and otherwise frustrating customers.

In a time of reduced state budgets, it seems important to note that cost was not a primary reason that states gave for pursuing greater integration (even if it was an important consideration). As staff from Utah explained, while their state enacted various integration efforts as part of a larger campaign to reduce duplicative services and attain greater efficiency through more streamlined staffing, the primarily motivation was to improve the customer experience. Cost savings were not that state’s primary motivation. In fact, the broader statewide initiative to improve integration across multiple workforce programs took years, involved considerable planning and implementation efforts, and required a significant level of financial investment.

Steps in Creating and Implementing Integration Plans

When states or local decision-makers were ready to pursue efforts to increase integration, their first step, as evidenced by the practices of the states and local areas in this report, was to pull together a group of individuals to design an integration plan and reconcile any program policies that were not properly aligned under the new plan. States that engaged in larger, statewide integration planning efforts tended to involve a wide array of personnel—including state staff from each of the programs being integrated as well as local-level staff who were capable of providing input on whether the plan was feasible from a front-line perspective. States also relied on legal, financial and computer staff for sorting out issues like agreements between programs, financial and reporting requirements, and MIS capacity. Also important were external experts with the ability to help guide the overall process. Iowa, for instance, hired an independent consultant who helped that state in its planning process.

Once planning teams were assembled and had settled on their designs, the next step was to begin aligning the policies and practices belonging to the different workforce programs involved in the integration plan. Doing so required the difficult process of assessing how these different
programs should work together in whatever configuration the planners envisioned. When programs duplicated services or processes—a separate WIA and TAA training plan application, for instance—planners developed guidance instructing staff about which program prevailed in which set of circumstances or how to streamline these two sets of procedures. Other issues addressed by planners included:19

- reconciling how to minimize data collection while obtaining all the information needed to meet each program’s eligibility and enrollment requirements;
- determining which programs could and were willing to pay for staff time and overlapping customer services, e.g., WIA and TAA (especially important now that there are more funds available for case management and other employment services in TAA);
- addressing key philosophical differences between programs, e.g., work-first versus long-term training as the best approach to customer outcomes;
- overcoming staff members’ concerns about their capacity to take on additional case management responsibilities or to serve additional customers; and
- addressing different and separate reporting requirements in the participating programs.

The above issues were often tough for states to resolve and the solutions were not always easy to find. As one state staff member noted, these challenges resembled turf wars between programs. Others referred to the process of aligning policies as one of breaking down program silos. Some staff members noted how resolving issues like these sometimes required drafting formal agreements or MOUs between programs, or writing detailed procedures to spell out how each program would deal with certain scenarios. No matter the vision for the final plan, there was always the possibility that states would need to modify their integration plans as the process for aligning policies unfolded, to resolve remaining conflicts or difficulties.

The last step involved before implementing the integration or coordination plans was to secure the proper authority. Often, state planning for integration involved an advocate—one who strongly supported integration in the first place—who was in a position to authorize the plan’s implementation once developed. In Utah, for instance, integration of the workforce system came at the behest of the governor, who imbued the state workforce

department with the power to implement a plan. Sometimes, however, those responsible for
developing a plan had to seek additional authority to implement it. In Iowa, for instance, the
workforce department director was key in advocating for integration and in moving the process
forward, but it took the extra step of getting a bill passed in the Iowa legislature to ensure that the
integration plan could be implemented across the state.

Securing Staff Buy-in

Staff members in several states stressed the importance of securing buy-in from local staff in
any plans for increased integration. Given that local personnel are the ones responsible for
putting the plans into place, it is not surprising that their input and approval were viewed as
crucial for making the plans work. Interviews with state and local staff members pointed to
several approaches that were used to secure staff buy-in as well as to improve the plans.

- **Involving local-level staff in efforts to identify issues in the field.** In Iowa, for instance,
  the Director of Workforce Development, who championed their integration plan, went on
  a 100-day tour of the various workforce centers throughout the state. The goal was to
  learn firsthand about how these centers and their staff operated before launching Iowa’s
  statewide integration effort. Of course, soliciting input from local-level staff in this
  fashion lengthened an already time-consuming process, but interview respondents, such
  as those in Arizona and Missouri, noted that the contributions local-area staff made were
  insightful and that these states’ new systems were better as a result. Soliciting input,
  while contributing to creating the right plan, was also important for securing buy-in, as
  local staff felt they were part of the development process and not simply there to carry
  out a plan for which they had no input.

- **Systematically informing state and local-area staff about the planned changes.**
  Consistent and broad-based information-sharing using multiple means, including face-to-
  face contact and electronic media, were used by several states to prepare staff for
  implementing the changes. Utah and Missouri, for example, posted new policies on their
  states’ websites and shared messages about the new integration policy through their
  MISs. In Iowa, state staff formed a leadership team, which met with all local workforce
  investment boards and service providers, to outline the new integration policies once they
  were developed.

- **Use of a gradual or phased implementation.** Some states also found that a gradual
  implementation process helped local staff better absorb new policies. In Iowa, the state
  implemented the new integration plan one American Job Center at a time to give each
  center the opportunity to implement the plan with sufficient support and to learn valuable
  lessons from prior implementers.

- **Soliciting ongoing feedback from staff members.** Getting feedback from staff at all levels
  helped project leaders to know if staff understood the plan, supported it initially and later
  on, and, if leaders modified the plan in some ways, informing staff of the reasons for any
  changes. State respondents who had been involved in major systemic changes said they
had solicited and received feedback while plans were still being developed and even well after the plans had been rolled out.

Taking these steps was not a guarantee that local staff accepted new policies without some resistance, frustration or confusion. State-level respondents mentioned that they heard concerns from local staff that the new processes being proposed would be too burdensome or difficult to implement, and each state dealt with these concerns in its own way. In Minnesota, for example, the content of the message was key. Local staff came to understand how integration would benefit the customer, which was a priority that case managers and other staff could support.

It is worth noting here that even states that undertook the most significant reform efforts tended to report how happy they were with the results—and reported high rates of co-enrollment of TAA customers and overall successful outcomes for their customers. However, just as important, local staff also said they liked the new ways they were interacting with one another, the training they had received, and the tools they were provided with to help them deliver more effective case management services to customers.

System-Level Performance and Review

Understanding system performance was also important to implementing program integration efforts, as well as to implementing new management information systems, and other changes that could have affected the quality of case management and employment services for TAA participants. State- and local-level respondents described several different approaches undertaken by state and local administrators to obtain feedback and review their own performance. One common and traditional approach involved running system-level reports of outcome measures and various performance indicators. These measures showed whether outcomes, overall, were improving, especially in the context of any new reform efforts (including those related to case management) that had been implemented. Another set of practices involved state- and local-level staff collecting qualitative data on their own operations, including data relevant to case management. The following are three such practices.

1. Review of American Job Center operations. State- or regional-level staff regularly reviewed and monitored individual American Job Center’s operations. TAA state-level staff in one state had regular meetings with local-level staff to assess how TAA services were being managed and delivered in order to identify potential issues to be addressed. In another state, staff discussed the possibility of developing a certification process to identify an American Job Center as fully integrated, thus helping to elevate it publicly as a good performer.
2. *MIS Review.* In Utah, state-level staff made annual visits to local areas to solicit input from local-level staff on MIS performance and design. The team spent two to four hours in each American Job Center observing staff using the MIS, interviewing them, and collecting data on ways to improve the system. Input from front-line staff led to various changes to the system.

3. *Case-file reviews.* With the understanding that good case-file maintenance helps ensure the delivery of quality services, state- or local-area staff in a few states conducted customer case-file reviews to assess whether local areas were keeping their files according to state or local policy. Individual staff members received feedback if they needed to improve their filing and documentation, but the review also focused on the local area’s practices as a whole.

Finally, some states went to the customer directly to assess the quality of case management services. Kentucky and Minnesota, for example, administered customer satisfaction surveys to TAA participants. Collecting this type of data before and after any significant changes presumably proved useful in at least partially assessing the effectiveness of any reform efforts. One state was considering the use of “secret shoppers,” who were to be briefed on the expectations they should have regarding customer service and who then pose as customers and later provide feedback on what they actually experienced.
VI. RETHINKING CASE MANAGERS’ ROLES, RESPONSIBILITIES, AND JOB TITLES

Another strategy for increasing the quality of and access to case management services observed in states and local areas was to modify the organization and roles of staff providing these services to TAA customers, especially if there had also been new policies on program coordination, co-enrollment and integration. The section below describes different staffing models to deliver case management services to TAA participants, and explores the benefits and possible drawbacks of each model.

Overview of Staffing Configurations for Case Management Services

States have employed different staffing models for ensuring the delivery of case management services to TAA customers. These models were often developed in order to coordinate with partner programs—mainly WIA, at a time when use of TAA funds for case management was severely limited under the law. However, as noted earlier in this report, the 2009 and 2011 amendments required the TAA program to offer and document provision of case management and employment services to all TAA participants (as well as requiring expenditure of a specific percentage of TAA administrative funds for such services). These changes, coupled with the regulation requiring states to use only merit staffing for certain case management and approval activities, caused several states to make adjustments in their use of WIA-funded case managers (who generally were not state merit staff).20 (Some states avoided the prohibitions, by having state merit staff be responsible for tasks such as reviewing and approving TAA IEPs or reviewing waivers.)

20 The merit staffing provisions took effect in February 2011, well after most of the data collection for this report took place. Hence, the changes that states told us they planned to make to comply with the merit staffing requirement were tentative and for the most part had not yet been fully implemented.
Exhibit VI-1 shows the range of possible staffing configurations gleaned through both the site visits conducted for this paper and prior research findings.\textsuperscript{21} The rows indicate the type of local staff member who served as the primary case manager for TAA customers and the columns indicate the type of staff member who was responsible for reviewing and approving training plans and, in some cases, waivers. Each of these configurations is explained below.

### Exhibit VI-1: TAA Case Management Staffing Configurations Observed in States and Local Areas

<table>
<thead>
<tr>
<th>Primary Case Manager</th>
<th>Review and Approval of Training Plans and Waivers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>State Merit Staff</td>
</tr>
<tr>
<td>Local Office ES (Merit) Staff</td>
<td>A</td>
</tr>
<tr>
<td>WIA Staff</td>
<td>C</td>
</tr>
<tr>
<td>Combination WIA/ES</td>
<td>E</td>
</tr>
</tbody>
</table>

Each of the staffing configurations shown in Exhibit IV-1 was also subject to some variations even within these categories. For instance, with the explosion of demand for services during the recent economic downturn and the significantly greater funding afforded to TAA, some states hired additional personnel who did not fit into any of the categories above. One state paid for a small number of state merit staff to serve as primary case managers in specific local areas, despite the fact that the state followed a structure where WIA staff served as primary case managers. Staffing configurations also varied within some states. For example, in Ohio, some local areas adhered to one model while other local areas used a different one. Still, Exhibit VI-1 captures most case management staffing configurations.

### Models A and B: State Merit Staff as Primary Case Manager

The first two staffing configurations (models A and B) both involve state merit ES staff—located in American Job Centers—serving as the primary case managers for TAA customers. This configuration was used in California, Kentucky and Pennsylvania. Sometimes, however, states such as Arizona and South Carolina funded staff directly to serve as TAA case managers and

located them regionally within states, rather than within a given American Job Center. For co-enrolled customers, the model effectively resembled one in which the customer had dual case managers, typically both a WIA and an ES case manager.

WIA case managers, in models A and B, typically provided various intensive services such as: comprehensive assessments, supportive services, follow-up, and, sometimes, training plan development and counseling. The ES case manager typically provided a slate of services such as initial assessment, labor market information, job referrals, some career guidance and training plan development, and ongoing monitoring and guidance with customers while they were in training. Since case managers in this configuration were state merit staff, states typically devolved authority to them to review and approve training plans (as in model B). However, some states, like Pennsylvania, still had state-level review and approval of training plans (model A). States employed this second-tier case management either as a quality control measure to ensure uniformity across local areas or to serve local areas within those states that engaged in a different staffing model – in which non-merit staff served as the primary case manager.

One promising feature of models A and B, especially when states paid for case managers out of TAA funds, was that states had more flexibility as to where they assigned staff. As TAA administrators have learned over the years, layoffs, especially large ones, can prompt an influx of relatively large numbers of TAA customers in a small geographic area, within a relatively short period of time. Arizona and South Carolina assigned their case managers to regional areas that covered several American Job Centers. Because these staff were already mobile, they were able to more easily move around the state in response to large layoffs, thus better responding to customers and allowing states to better manage their resources.22 Also helpful was having case managers, such as those in South Carolina, well-equipped for mobile work, with smart phones, laptops and mobile printers that helped them stay connected across the state.

Another aspect of this configuration, at least for model B states, was that case managers appreciated having the authority to approve training plans. This capability not only provided them with respect as professionals, but also avoided delays in getting training plans approved.

22 In states where WIA staff served as primary TAA case managers, interview respondents noted some flexibility to relocate staff in response to large layoffs. Flexibility was typically found only in those local areas where a contracted service provider spanned multiple local workforce investment areas.
At the same time, however, devolving this authority meant that TAA case managers were potentially that much less connected to TAA staff in state central offices. Often, state-level or regional-level TAA staff members served as coordinators for case managers across the state in order to address this issue. Their job, in addition to training and support, was to monitor staff caseloads, stay apprised of statewide trade activities (especially for states with mobile case managers), and facilitate regular opportunities for communication between case managers. The State TAA Coordinator in Arizona, for instance, held mandatory monthly case manager meetings, typically via teleconference.

Another challenge in models A and B sometimes arose when TAA participants were co-enrolled in WIA. In these cases, it could be inconvenient for the customer who had to move between case managers for multiple programs and sometimes led to lower quality service if staff were unaware of a given customer’s progress. This situation was even more challenging for mobile case managers, who sometimes spent only limited time each week in an office with specific WIA case managers.23

Both good communication and the development of detailed procedures guiding staff in different programs were essential to resolving these challenges. Again, the state or regional TAA staff who oversaw case managers played a role in assuring the success of these operations. For example, regional staff in California and Kentucky regularly checked in with American Job Center staff to assess the need for additional planning, communication or training, as well as to review the quality of work done by TAA case managers. In Kentucky, all local areas had developed service delivery plans, which spelled out the ways that different services were to be handled by each program. Similarly, in Arizona, there were rules in place about how to coordinate regular check-in meetings with a customer.

Models C and D: WIA Staff as Primary Case Manager

In the third (model C) and fourth (model D) configurations, staff that provided WIA services (e.g., city or county staff, or contracted service provider staff that are not state merit staff) served

23 States with dual case management for co-enrolled customers noted another issue without a clear resolution: in a small number of local areas, TAA and WIA simply experienced very poor relationships. These areas were usually problematic in other ways, with issues that extended beyond poor communication between staff members in the two programs. In these areas, dual case management challenges were difficult to resolve.
as primary case managers for TAA customers. The difference between models C and D was in who reviewed and approved customer training plans. In most states in which WIA staff served as the primary case managers for TAA customers, state merit staff in state central offices reviewed and approved training plans, and possibly waivers (model C), such as in Illinois, Minnesota, and Oklahoma.

A few states, however, had devolved this decision-making to local WIA offices, and for a time, WIA staff served as the only case managers for TAA customers—and had authority to review training plans (model D). In model D states, LWIAs received allocations from the state for TAA and contracted with whatever local provider they deemed most suitable. This administrative structure carried with it the potential for very tight linkages between TAA and WIA. LWIAs could choose to have the same local organization provide TAA and WIA services—as well as the services of other partner programs—making possible a truly seamless integration of services at the local level. However, this arrangement was usually inconsistent with the merit staffing requirement since most local staff providing case management services to TAA customers were not state merit staff. Since February 2011, when the merit staffing regulation took effect, all non-exempt states that had adopted this model (such as Kentucky and Illinois) restructured the way they delivered TAA-funded services to ensure the involvement of state merit staff.24

In the past, a notable strength in having WIA staff serve as primary case managers was their capacity to deliver the full range of services, including comprehensive assessments, post-training placement assistance, follow-up, and supportive services, at a time when such services were far less or not at all available to TAA customers unless they were co-enrolled and received them through WIA. Further, having single WIA case managers for TAA customers also was likely to have avoided some of the problems sometimes associated with having multiple case managers who had to coordinate with one another (as noted above). Selecting this staffing configuration, however, did involve two trade-offs.

24 At the time of the data collection for this report, three states—Michigan, Colorado and Massachusetts—were exempt, in full or in part, from the merit staffing requirements. They had received federal permission to provide all Wagner-Peyser funded services with employees who were not state merit staff.
• Having WIA staff serve as primary TAA case managers required universal or near-universal co-enrollment, which most states had not achieved.25

• Funding for WIA staff was already limited and caseloads were often high. While states with lower numbers of TAA participants may have been able to manage such a system without a significant burden to WIA staff, states with larger TAA caseloads may have had more difficulty in the absence of additional funding.

Several local areas visited for this study contracted for delivery of services to TAA, rather than providing services directly. The South Central WorkForce Council in Mankato, Minnesota, for instance, contracted with: (a) state merit staff for the provision of short-term (less than six-month) training and employment services for WIA and TAA customers, and (b) a separate provider for WIA and TAA customers engaged in longer term training (over six months in duration). Hiring requirements for both sets of staff included a bachelor’s degree, but staff working long-term with customers must needed to be licensed clinical social workers, ideally with employment-related experience.

Model E: Both WIA and ES as Primary Case Manager

The final configuration (model E)—functional alignment—was the most complex staffing design and was often implemented along with large-scale integration efforts. This was the staffing model of states like Iowa, Missouri, New York, and Utah. In this configuration, states organized American Job Center staff by function rather than by program. Staff were hired, trained and grouped to provide services associated with various stages of the typical customer flow through the workforce system (e.g., intake, case management, job placement) rather than working exclusively with customers from particular programs (e.g., WIA, TAA, ES, or veterans’ programs). While there was some variation between states and local areas that employed a functional alignment model, staff were generally organized into three types of teams.

• “Intake” or “Welcome” team. These team members welcomed new customers, introduced them to the American Job Center, assisted them with basic services such as those available in the resource room, conducted intake, and enrolled customers in the appropriate programs. Often, welcome team members included members of other teams as all staff took a turn performing this function.

25 Some states adopted a version of C or D insofar as they co-enrolled all TAA customers interested in training. Those interested in training had WIA staff as their primary case managers, while those not interested in training were assigned ES staff.
• **“Skills” team.** Members of this team worked with customers in a more intensive fashion, providing the services typically associated with case management such as administering and interpreting comprehensive assessments, developing IEPs, providing career and training counseling, developing employment plans, and providing supportive services.

• **“Employment” team.** Members of this team worked with customers who were not pursuing training or who needed job search assistance once training had been completed. These team members tended to be job developers or employment counselors but were ultimately responsible for helping place customers in jobs.

A functional alignment model often resembled the staffing model of intake staff, case managers, and employment staff as found in most American Job Centers. With functional alignment, however, each staff member provided a certain type of service to each customer, regardless of the program in which that customer was enrolled and regardless of the program under which a staff was employed. Furthermore, personnel were cross-trained in multiple programs and were, ideally, flexible about adjusting services according to the program under which a customer was receiving benefits or services. Thus, any staff person on the equivalent of the “skills team” would theoretically have been able to serve any customer. As such, one TAA customer might have a case manager hired and paid for through the WIA program while the next could have had a case manager that was ES staff (though a WIA participant could not receive services from a TAA-funded counselor). With such a model, the typical practice seemed to be that state central office TAA staff would review and approve training plans developed by the local case manager on the “skills team.” It is conceivable, too, that a state employing a functional team model could decide to use locally-based state merit staff to approve training plans.

One advantage of this staffing model was its focus on ensuring the seamless delivery of services, rather than on moving customers from program to program. It also helped ensure that all services for which a customer was potentially eligible were identified. The single, cross-trained case manager could ensure that a given customer received a needed service without having to coordinate with a case manager from another program. In this way, functional alignment facilitated data sharing and increased the seamlessness and transparency of workforce systems, breaking down the programmatic walls that sometimes created barriers for customers.

As with the other staffing models, this one also had trade-offs. Specifically, staff members needed to be cross-trained on all programs in which their customers might have been enrolled.
They also required additional training to learn new intake processes, as well as on-going training to remind them about the integrated approach. In addition to the time, effort and costs already associated with larger integration efforts, the time and cost of implementing this additional training was significant for some states. That said, many states had previously made efforts to cross-train staff, which may have facilitated the process of implementing functional alignment.

Programs like TAA are complicated and rules sometimes change—yet another challenge under the functional alignment model. Keeping team members up to date on all these changes is demanding and can be difficult to implement. Some states, such as Missouri, had assigned certain staff the role of content-area specialist. Each specialist served as a resource—within an American Job Center, LWIA, or region—for other staff less familiar with a specific program’s policies and procedures, and became the “go to” person for questions other staff had.

**Appropriate Titles for Case Managers**

While all of the staffing configurations described above had the potential to enhance case management services (as well as to create some challenges), a number of states decided to provide new titles for case managers in reconfigured services. The term “case manager” implies that a customer is a case to be managed rather than an individual with whom staff work to develop options around re-employment. Several states renamed the position of case manager to emphasize a staff person’s role in providing employment and/or training counseling or otherwise helping to guide customers through career path choices. In Utah, case managers were known as “Employment Counselors.” New York called their case managers “Workforce Advisors,” while in Pennsylvania, the staff job title was “CareerLink Specialists” or “Workforce Specialists.” All of these titles emphasized the employment-related aspect of the position and conveyed the idea that the staff person’s role was to provide support and guidance.
VII. REDESIGNED INFORMATION SYSTEMS TO IMPROVE CASE MANAGEMENT

More efficient management information systems (MIS) presented many potential advantages for increasing the ability of case managers to assist TAA participants in all phases of their program experience, from intake, through placement and follow-up, and to make access to case management and other employment services easier and simpler for TAA participants. Redesigned data systems appeared to be critical in many cases for improving linkages and coordination among programs, allowing for common or shared intake, and for sharing data for many purposes—in addition to enhancing the customer experience for participants in the TAA program. However, these redesigned systems in TAA and partner programs also created several challenges, especially those related to system capacity and privacy. Discussed below are some of the most potentially promising changes that states and local areas have made in their data systems to enhance delivery of case management and employment services to TAA (and other) customers and the challenges that have also arisen with implementation of these systems.

Key Enhancements to Management Information Systems

Through interviews and site visits, the research team was able to glean a number of examples of how states and local areas effectively collected and shared customer data. Three practices that seemed to hold particular promise are discussed below.

Minimizing Customer Data Requests

One important way states and local areas tried to improve their customers’ experiences and aid them in getting access to services was by minimizing the frequency of having to provide personal data. Ideally, staff members needed to gather data only once, at the point when a customer first connected with the workforce system, thus accomplishing three main goals. First, it made the intake process less repetitive and demanding for customers, who were already under significant stress from losing a job, and gave the customer an opportunity to more fully engage in
services and worry less about navigating the system. As staff members at one local office noted, for example, customers in their state sometimes got frustrated with the prior intake process because they had to provide the same information to TAA and WIA that they had already provided to UI. Second, having fewer data collection points decreased the chances that a case manager would lose a customer or lose valuable time in serving him or her. Even when a state had implemented a mandatory co-enrollment policy, for example, a customer could still be required to enroll separately for both programs. In the past, each time that a customer completed an enrollment process and was asked to provide even just supplemental data, it increased the likelihood that he or she would need to leave and return later or simply get turned off by the process and not return at all. Clearly, these multiple data requests impeded staff members’ ability to help customers access services rapidly and could also hurt a customer’s chances to receive other benefits. Third, minimizing data collection points allowed case managers to focus less on collecting eligibility and enrollment information and more on providing other services to TAA participants.

Individual states employed different practices to minimize points of customer data collection. One method was to organize staff according to function or otherwise assigning dedicated intake staff capable of working with a customer as early as possible in the workforce system experience (e.g., at an American Job Center or Rapid Response orientation center). Another approach adopted in states such as Utah or Missouri included developing a single intake form, whether a paper or electronic version, that captured most (if not all) data needed for enrollment in any workforce program. This practice worked best when embraced at the leadership level, since enacting it involved form changes, additional training, and possibly changes to the MIS. Yet another practice included collecting and storing key pieces of customer information needed for later enrollment verification steps. South Carolina, for instance, collected a copy of each customer’s Social Security Card and Driver’s License at intake. Although still being rolled out at the time of data collection, some American Job Centers in the state had begun to scan and store documents electronically, thus increasing the accessibility of customer information by staff from different programs.
**Seamlessly Transitioning the Customer**

States also worked to improve the TAA customer experience by implementing procedures to ensure that a customer was enrolled at intake in all services for which he or she might have been eligible. Staff conducting enrollment could do this manually, identifying customer needs and characteristics and then matching this information to a list of programs and services for which the customer was eligible. This process, however, was greatly enhanced through the use of technology. Some state MISs mimicked a manual process but included links to information about services that could be provided to customers immediately. Utah’s system took this one step further: its MIS was set up to list all the services for which customers qualified, and those that were not available were grayed out. For TAA customers, for example, a specific tab for the health coverage tax credit was activated when the individual qualified for it.

To seamlessly transition customers, some state systems were set up to move each customer to the appropriate case management staff person smoothly—with the relevant data also being moved accordingly. For instance, in South Carolina, when staff submitted an application for WIA, TAA or Trade Readjustment Allowances (TRA), the Virtual One-Stop (VOS) system automatically populated various program tabs with the relevant customer information. Data were similarly available to any program enrolling customers in Pennsylvania’s MIS, the Commonwealth Workforce Development System (CWDS). Not only were the data available to case managers but the system often completed forms for staff. The MIS could even make an appointment for the customer.

**Documenting Participant Progress**

In states where there were dual case managers, documentation of participant progress was particularly important, as it ensured that case managers from the different programs knew what services the customer had already received or what each case manager was planning. As noted above, several states accomplished this coordination by developing service flow plans, specifying which type of staff should serve a customer for which services. However, even in states with other staffing configurations, documenting customer progress for sharing between staff was still important—such as when a customer’s lead case manager was not available. Staff in Pennsylvania and California, for instance, spoke about the importance of any staff person being able to serve a customer at any time. Also, when staff members were not necessarily TAA specialists, they needed to practice good documentation of customer progress as a way to
monitor their own work or to check in with content-area specialists, especially given the complexity of a program such as TAA.

The importance of a unified or well-coordinated MIS in documenting customer progress was stressed in several states. Staff from New York, for example, expressed that they felt lost whenever their system went down, because it was so central to their work as case managers. Just as important were other policies and practices that helped case managers keep good records. With this in mind, the state of Minnesota has issued minimum standards for all case files as well as a requirement that they be updated at least every 30 days. California had similar guidelines as to what information must be in every case file and what that information should look like. (These guidelines were used in the system-level reviews of case files discussed in Chapter V above.)

**Increasing the Use of Electronic Data Facilitation**

Sharing customer data and case notes electronically was seen as increasingly important. Many states already had or were in the process of implementing an integrated MIS that worked across multiple workforce system programs. Information systems identified as good examples for data sharing included:

- *The Virtual One-Stop (VOS)*, which at the time of data collection, was already being used in Arizona and South Carolina and was just being implemented in California;
- Pennsylvania’s *Commonwealth Workforce Development System (CWDS)*;
- New York’s *One-Stop Operating System (OSOS)*; and
- Iowa, Missouri and Utah’s state-specific versions of Utah’s *IWORKS, Toolbox*, and *UWORKS.*

States that were not as far along in implementing a fully integrated MIS nevertheless noted that their systems linked or shared data in other ways, such as populating static fields in overnight uploads, direct links that opened up other systems, or shared data warehouses that could be accessed by staff from different programs. These steps were less efficient than a single MIS but did offer some advantages over completely separate systems, which staff in many states had to use prior to the introduction of their integrated systems.

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26 Iowa’s MIS did not yet include TAA.
It is worth noting that staff and customers could still benefit from approaches in which some but not all computer systems were integrated. Iowa, for example, encountered some complicated programming issues and, rather than hold up the larger integration process, the state implemented its integrated MIS without including TAA. One case manager mentioned how, even without TAA being included, the new data system allowed for inputting of case notes and viewing other services being provided, thus permitting case managers to take advantage of the integrated system to provide better service to their customers.

An integrated MIS also helped by reducing the use of paper forms and physical copies of customer paperwork. Moving to an electronic format not only made it easier to share information related to case management, but also reduced the amount of data entry and searching for paper copies of customer documentation, which potentially freed up time for staff to spend with customers. Further, as some states reported, this paperless approach likely reduced opportunities for error, if data did not need to be inputted to the MIS from paper forms at a later step. Several states were still quite paper heavy at the time of data collection for this report, but there appeared to be a trend toward creating paperless systems. For example, Missouri has completely done away with paper intake forms, with the exception of a very simple, well-designed enrollment form used at Rapid Response events. In most states, the staff interviewed for this study also mentioned their MIS included forms for Individual Employment Plans (IEPs), so that case managers could complete these online. South Carolina and Utah both scanned and stored documents electronically; Utah’s process was already statewide through that state’s MIS, and South Carolina was ramping up scanning efforts. Utah’s UWORKS also offered several other distinct advantages to case managers, such as a prompt designed to facilitate more precise and informative case notes and to allow staff to track their customers more efficiently. UWORKS was linked to the UI system and had the capability to extract information, visualize UI claims data, and check if customers were receiving UI payments. Changes in the UI system were updated in UWORKS with a maximum 24-hour delay.

States engaged in several other practices not strictly related to data sharing, but nonetheless notable because they employed electronic information to free up case managers’ time and also supported improved quality of case management services. Most states, for example, placed state and federal workforce system policies on their state or workforce department websites,
centralizing the storage of these frequently referenced tools. To a somewhat lesser degree, states also posted copies of program procedure manuals, service coordination policies, and other procedures relevant to case management. States like Pennsylvania posted various training materials, including webinars of case manager training sessions, on the workforce system training services website so that staff could train remotely. Finally, some states used their MISs to solicit or send out relevant information—an effective approach since staff were frequently using this tool during their workday. Utah’s MIS, for instance, included an option for staff to request training or information, and Minnesota’s MIS included pre-programmed popup messages that reminded case managers about important events like TAA customer waiver expiration dates.

Challenges

Despite the many promising examples described above, implementing new information systems across multiple programs was not simple. Critical challenges that states confronted include the following.

- **Linking systems or designing a new, unified MIS was time-consuming and expensive.** Designing and reprogramming systems was costly and time-intensive, as was the disruption that occurred in rolling out the new system. The complexity of tasks was often compounded by the age of the hardware and software of many computer systems, which in some states was, at the time of data collection, considerably out of date. One solution was to purchase an off-the-shelf system, which sometimes did not save funds but instead saved programming and design time. Iowa and Missouri, for instance, purchased their integrated MIS from Utah, while many other states used the VOS. States also opted for solutions more limited in scope and cost such as creating direct links and automatic data transfers between existing systems or utilizing external data warehouses, in which data was stored outside of all the programs but still accessible to each one.

- **Outcome reporting and financial systems posed additional challenges.** In addition to multiple management information systems, most states also had multiple program reporting requirements, such as the Trade Act Participant Report (TAPR) and the WIA Standardized Record Data (WIASRD), as well as separate financial data and customer benefit payment systems (such as those for UI and TRA). These requirements and systems, themselves, were often not fully automated or, if so, were antiquated. Linking case management MISs with financial systems could potentially provide case managers with information on customer benefit payments, which would help with planning for education and training. Linking MISs with reporting systems could potentially help free up state staff time. However, these multiple systems were often administered through separate departments and there were restrictions as to what kind of data could be shared with certain kinds of staff (e.g., non-merit staff were not allowed access to
certain UI data and one state restricted access based on staff user level). Nevertheless, some states were able to work around these challenges. In Utah, for instance, the state system synchronized on a nightly basis with the UI system, and other states spoke about being able to do similar uploads that helped bridge these gaps.

- **Data sharing/confidentiality agreements restricted data sharing across programs or systems.** Another challenge states confronted stemmed from data sharing agreements and promises of confidentiality around customer information, which sometimes prevented the easy sharing of data between programs. Generally, it seemed that problems were worked out by state legal departments and developing data sharing agreements between programs. However, data sharing by some programs, like UI, was complicated in some states, and restrictions were placed on access, as noted above.

- **Maintaining system speed and usability were sometimes difficult with increased demands resulting from program integration or a single common MIS.** Combining data into a single system sometimes caused technological traffic jams, which needed to be identified and addressed. In Utah, for example, maintaining the system remained a consistent priority, as evidenced by the tasks assigned to the staff authorized to manage the system. Utah established time standards for computer tasks such as searches, accessing data, and updating files, and staff had established protocols for action to take when the system dropped below the standards.

Finally, it should be noted that while enhanced data systems had the potential to improve case management and improve the customer experience of TAA participants, these systems, no matter how integrated or sophisticated, cannot replace the expertise and personal attention of the staff who interact with customers. As one state administrator emphasized, the MIS is the mechanical side of system integration, but the staff must operate the system and communicate with the customer.
VIII. CONCLUSION AND NEXT STEPS

This report examined the ways in which 12 states and 14 local workforce areas in those states tried to improve the strength and availability of case management services for TAA and other workforce program participants. The report explored: TAA’s legislation, regulation and guidance in regard to case management; attributes of effective case management; and four broad strategic areas of state and local-area practice to improve case management quality and access—all with the goal of creating better outcomes for TAA and other workforce system customers. These broad strategic areas covered multiple aspects of case management, ranging from the personal interaction with the customer to the level of the systems in which the case manager provides information, guidance and support. These areas included: (1) enhancing the skills and knowledge of case managers though specialized training on case management skills, new ways to deliver feedback and review performance, and new criteria for new staff hiring; (2) use of program coordination and system integration to enhance access to case management; (3) rethinking staffing configurations and case managers’ roles, responsibilities and job titles; and (4) redesigning computer-based information systems to support the case management and employment services, within and across programs serving TAA customers.

For states and local areas wishing to pursue efforts similar to those presented in this report, an increasing number of resources are available for guidance. In addition to the findings and promising practices presented in this paper, there are several ETA-funded reports (written by SPR) both as part of the larger evaluation of the TAA program and other evaluations of workforce system initiatives. There are also several products released as part of a separate ETA-funded project mentioned earlier to provide technical assistance to state and local workforce
administrators and practitioners on the topics of effective case management and integrated intake, including:27

- two practice briefs that present strategies and best practices and include annotated bibliographies of other instructive and research-based documents;
- a series of webinars and peer-to-peer sessions featuring state and local-area workforce system practitioners; and
- two resource maps with hyperlinks to resources on specific components of case management service delivery systems and integrated intake planning and implementation.

Taken together, this report and the technical assistance materials cited above provide a conceptual framework and some potentially promising practices for practitioners who are exploring ways to enhance case management and workforce system integration.

These various approaches for improving case management continue to hold significant promise for enhancing labor market outcomes and customer experiences. However, like much of the literature on case management, this report is descriptive and provides no quantitative data to show how effective any of these approaches have been. A possible future step might be to use the conceptual framework presented here to begin trying to test more conclusively and precisely which changes in case management will create significant improvements in the ability of TAA customers (and those from other workforce programs) to achieve their employment and earnings goals. Gaining such knowledge may prove important as public investments in the TAA and other workforce programs come under greater scrutiny in the future.

27 Materials on integrated intake and effective case management that were developed as part of the “Supporting Integrated Intake and Effective Case Management in the Workforce System” project, can be found, respectively, on Workforce3One.org at https://integratingintake.workforce3one.org and https://effectivecasemanagement.workforce3one.org
SELECTED RESOURCES

The following resources may be of interest to anyone looking for further information on effective case management and increased workforce system integration.

Resources on Case Management

The following resources, plus many additional resources on case management, can be found on Workforce3One.org at https://effectivecasemanagement.workforce3one.org

**Effective Case Management: Key Elements and Practices from the Field**  
*Summary:* This issue brief describes key elements and practices for effective case management in the workforce system. It includes examples of state and local tools, processes and policies designed to create or improve case management, including an annotated list of additional resources.  
https://effectivecasemanagement.workforce3one.org/page/resource_map

**Effective Case Management Resource Map**  
*Summary:* This map illustrates the different components of effective case management and compiles the results of a survey of existing literature on effective case management in the workforce development system. It contains hyperlinks to reports, policy documents, webinars and toolkits.  
https://effectivecasemanagement.workforce3one.org/page/resource_map

**Technical Assistance Supporting Effective Case Management Webinar**  
*Summary:* This recorded webinar, facilitated by SPR staff, originally aired May 25, 2011. It offers a framework for providing system support to case managers to ensure they have the tools and skills they need to serve customers. It also shares resources, tools and the first-hand experience of practitioners from the field.  
https://effectivecasemanagement.workforce3one.org/page/resources/100117358476963476/

**Peer to Peer Discussion with Jeanne Block**  
*Summary:* This recorded webinar originally aired June 6, 2011, with guest practitioner Jeanne Block, Staff Development Services Supervisor in the Workforce Development Partnership of the Pennsylvania Department of Labor & Industry. Topics include technology and training, turnover, and Pennsylvania’s case manager training course.  
https://effectivecasemanagement.workforce3one.org/page/resources/100117358476963476/
**Peer to Peer Discussion with Linda Fitzgerald**  
*Summary:* This recorded webinar originally aired June 22, 2011, with guest practitioner Linda Fitzgerald, Workforce Development Supervisor and Functional Leader at Missouri’s Park Hills One Stop Career Center.  
[https://effectivecasemanagement.workforce3one.org/page/resources/100117358476963476/](https://effectivecasemanagement.workforce3one.org/page/resources/100117358476963476/)

**Peer to Peer Discussion with Steve Reznicek**  
*Summary:* This recorded webinar originally aired May 25, 2011, with guest practitioner Steve Reznicek, Quality Assurance Manager for the Missouri Division of Workforce Development.  
[https://effectivecasemanagement.workforce3one.org/page/resources/100117358476963476/](https://effectivecasemanagement.workforce3one.org/page/resources/100117358476963476/)

**Project Briefing at the Department of Labor**  
*Summary:* This is a recording of SPR’s final briefing to ETA on the “Supporting Integrated Intake and Effective Case Management in the Workforce System” project. It provides an overview of the various activities and deliverables related to effective case management produced by the project. This resource is cross-listed under “Resources on Integrated Intake.”  
[https://effectivecasemanagement.workforce3one.org/page/resources/100117358476963476/](https://effectivecasemanagement.workforce3one.org/page/resources/100117358476963476/)

**Resources on Integrated Intake**

The following resources, plus many additional resources on integrated intake, can be found on Workforce3One.org at [https://integratingintake.workforce3one.org](https://integratingintake.workforce3one.org)

**Integrating Intake Among Workforce Programs: Key Strategies**  
*Summary:* This issue brief describes key strategies for creating a common intake process throughout the workforce system. It shares examples of state and local tools, processes and policies designed to create or improve integrated intake, including an annotated list of additional resources.  
[https://integratingintake.workforce3one.org/page/resource_map](https://integratingintake.workforce3one.org/page/resource_map)

**Integrated Intake Resource Map**  
*Summary:* This map illustrates different components of integrated intake and compiles the results of a survey of existing literature on integrated intake at American Job Centers and across workforce development systems. It contains hyperlinks to reports, policy documents, webinars and toolkits.  
[https://integratingintake.workforce3one.org/page/resource_map](https://integratingintake.workforce3one.org/page/resource_map)
Technical Assistance Supporting Integrated Intake in the Workforce System Webinar  
**Summary:** This recorded webinar, facilitated by SPR staff, originally aired April 20, 2011. It offers key principles for supporting an integrated intake process, examples from states and local areas, first-hand experience of practitioners from the field, and tools for implementation.  
https://integratingintake.workforce3one.org/page/resources/1001116545554910306/  

Peer to Peer Discussion with Elizabeth Carver  
**Summary:** This recorded webinar originally aired May 11, 2011, with guest practitioner Elizabeth Carver, UWORKS Business Analyst at the Utah Department of Workforce Services. The discussion centers on Utah’s efforts to implement a model of integrated intake.  
https://integratingintake.workforce3one.org/page/resources/1001116545554910306/  

Peer to Peer Discussion with Mary Lou Woods  
**Summary:** This recorded webinar originally aired June 16, 2011, with guest practitioner Mary Lou Woods, Bureau Chief for Field Operations at Iowa Workforce Development. The discussion centers on Iowa’s efforts to implement a model of integrated intake.  
https://integratingintake.workforce3one.org/page/resources/1001116545554910306/  

Project Briefing at the Department of Labor  
**Summary:** This is a recording of SPR’s final briefing to ETA on the “Supporting Integrated Intake and Effective Case Management in the Workforce System” project. It provides an overview of the various activities and deliverables related to integrated intake produced by the project. This resource is cross-listed under “Resources on Case Management.”  
https://integratingintake.workforce3one.org/page/resources/1001116545554910306/  

Government Documents  
The following resources are government documents that were cited in this report.  

20 CFR 618.890  
**Author and Publication:** Federal Register (April 2, 2010).  
**Summary:** This document issues regulations stating that states must staff TAA-funded activities with merit-based state personnel.  
Training and Employment Guidance Letter No. 5-00

Author and Publication: Lenita Jacobs-Simmons, U.S. Department of Labor, Employment and Training Administration (September 8, 2000).

Summary: This document provides guidance on integrating services under the Trade Act Programs—TAA and North American Free Trade Agreement - Transitional Adjustment Assistance (NAFTA-TAA)—with the services provided under WIA.

http://www.doleta.gov/tradeact/archives.cfm

Training and Employment Guidance Letter No. 21-00

Author and Publication: Lenita Jacobs-Simmons, U.S. Department of Labor, Employment and Training Administration (May 2, 2001).

Summary: This document provides additional guidance on integrating services under the Trade Act Programs—TAA and North American Free Trade Agreement - Transitional Adjustment Assistance (NAFTA-TAA)—with the services provided under WIA.

http://www.doleta.gov/tradeact/directives.cfm

Training and Employment Guidance Letter No. 11-02

Author and Publication: Emily Stover DeRocco, U.S. Department of Labor, Employment and Training Administration (October 10, 2002).

Summary: This document provides instructions for implementing the amendments to the Trade Act of 1974 that were enacted by the Trade Act of 2002.

http://www.doleta.gov/tradeact/directives.cfm

Training and Employment Guidance Letter No. 08-06

Author and Publication: Emily Stover DeRocco, U.S. Department of Labor, Employment and Training Administration (October 5, 2006).

Summary: This document provides guidance on the appropriate use of TAA reserve funds for the improvement of management information systems.

http://www.doleta.gov/tradeact/archives.cfm
SPR Reports

Many of the following SPR reports are part of the Evaluation of the TAA Program and can be found in ETA’s Research Publication Database at http://wdr.doleta.gov/research/keyword.cfm

**Evaluation of the WIA and TAA Co-Enrollment Pilot Project**
*Summary:* This report examines whether efforts to increase TAA co-enrollment in the WIA Dislocated Worker program improve performance outcomes of TAA customers and whether WIA performance outcomes decline as a result of increased co-enrollment.
http://bostonregion1.workforce3one.org/view/2001002758224083811

**Initial Implementation of the Trade Act of 2002**
*Summary:* This report describes the implementation of the Trade Act of 2002 based on site visits conducted in 12 state agencies and 12 local offices in 2004.
http://wdr.doleta.gov/research/eta_default.cfm?fuseaction=dsp_resultDetails&pub_id=2423&bas_option=Title&start=1&usrt=4&stype=basic&sv=1&criteria=initial%20implementation

**Linkages Between TAA, American Job Center Partners, and Economic Development Agencies**
*Summary:* This research examines the ways in which states and local areas work to improve linkages between TAA and other workforce system programs. Promising practices are highlighted.

**Assessment, Case Management, and Post-Training Assistance for TAA Participants**
*Summary:* This report examines case management and other training related services provided to TAA participants at all stages of their involvement with the TAA program and highlights promising practices in the provision of these services.
http://wdr.doleta.gov/research/eta_default.cfm?fuseaction=dsp_resultDetails&pub_id=2424&bas_option=Title&start=1&usrt=4&stype=basic&sv=1&criteria=assessment%20case%20management

**Evaluation of the Implementation of the Trade and Globalization Adjustment Assistance Act**
*Summary:* This report describes the implementation of the Trade and Globalization Adjustment Assistance Act of 2009 based on site visits conducted in 14 state agencies and 24 local offices in 2009 and 2010.