

# County of Los Angeles Workforce Investment Board Individual Service Strategy (ISS) Form Instructions

## LINE-BY-LINE EXPLANATIONS

The ISS is broken up into four parts, Part I-Participant Background portion; Part II-Personal Strengths and Skill Inventory Portion; and Part III - Goals and Service Plan portion; Part IV-Progress Notes (consisting of both the Program Progress Notes and Post Program Follow-Up Notes). The items within each part are numbered consecutively. For instructions on any item, refer to the corresponding part and number item below.

## PART I - PARTICIPANT INFORMATION

### *Identification Box*

This box appears on the upper right hand corner of every page and must be completed by indicating the Participant's last name followed by the last four digits of his/her social security number. For instance, participant Jane Doe whose social security number ends in "1234" would be noted on as "**DOE – 1234**". This identification on every page will assist in maintaining the Participant's file and prevent any potential in the event the pages become detached.

### *Personal Data*

Items 1-11. Self-Explanatory (to be completed with the Participant)

### *Employment & Education History*

- Item 12. Provide data on last five (5) jobs held, including dates of employment, job title, hourly wage, and **description of the duties and skills of the job** (be as specific as possible). Include the employer under description of the duties and skills.
- Item 13. Check "yes" or "no" as to whether-the Participant is currently enrolled as a student.
- Item 13a. If Item 13 was checked 'Yes,' indicate the grade level or other identifier that describes the Participant's academic or learning activities.
- Items 13b&c. If Item 13 was checked 'No', indicate (b) the highest grade level that the Participant has completed in school (using standard grade levels, such as grade level 12 for graduation from high school) **and** (c) total number of units completed.
- Items 14-15. Provide the name and address of the secondary (high) school attended. If none, write "None".
- Item 16. Check "yes" or "no" as to whether the Participant has earned their high school diploma or GED.
- Items 17-18. Provide the name and address of the post-secondary or trade school attended by the Participant. If none, write "None".
- Item 19. Include any study area of concentration which the Participant has completed.
- Item 20. Provide information on the post-secondary degrees, licenses, and/or certifications earned by the Participant, and provide the school associated with the achievement.

**PART II – INTERESTS AND SKILLS INVENTORY**

Item 21. Record the Basic Skills Remediation required for Participant. Basic Skills remediation is required if the Participant tested at below the 8<sup>th</sup> grade level on one or more of the following areas:

1. Reading\*
2. Writing\*
3. Math Computation\*
4. Speaking
5. Listening
6. Problem Solving, Reasoning, Decision Making
7. ESL/Vocational ESL
8. Life Skills

\* **Note:** All of the above 8 skills constitute the basic skills. Youth who are not basic skills deficient are defined as being able to perform these skills at the 8<sup>th</sup> grade level. Although “Reading”, “Writing”, and “Math Computation” are the only skills specifically denoted on the ISS form, all of the above-listed skills must be assessed and, where deficient, recorded on the ISS under “other”. Attach additional pages when necessary.

Items 22a-c. Record (a) the name of the testing agency which administered the basic skills assessment test (ie. which partner in the collaboration administered the test), (b) the raw score and corresponding grade level at which the Participant tested and (c) the name of the assessment test used.

Items 23a-c. Record (a) the name of the testing agency which administered the post basic skills test, (b) the raw score and corresponding grade level at which the Participant tested and (c) the name of the assessment test used. Note that the assessment test used for the post-test under this Item **must** be the **identical to** that used for the pre-test under Item 23.

Item 24. For each category of work environment (People, Data/Numbers, and Things/Tools) indicate the level of Participant preference. Indicate also any other category of work environment not listed which the Participant expresses a relative like or dislike.

Item 25. List what the Participant is good at, including skills and/or hobbies and interests which the Participant has expressed an interest. The purpose of this Item is to develop a skills inventory for the Participant, including soft and occupational skills obtained in previous employment, hobbies, volunteer work, and other activities that might be conducive to future employment goals. The skills disclosed in this item should assist the Case Manager in developing the Participant’s service strategy, utilizing skills that may be transferable between occupations.

Item 26. Provide the Participant’s short-term interests and/or activities which Participant would like to learn.

Item 27. Provide the Participants long term career goals and/or vocational interests and aspirations.

Item 28. Check “yes” or “no” next to the factors supporting the selection of the employment goal as it applies to each individual Participant. Indicate under “other” if there are other factors not listed which contributed to the Participant’s career goals selection.

Item 29. Check whether the Participant has participated in any of the enumerated career awareness activities, or in any other career awareness activities not listed.

Item 30. Note all known employment barriers. Indicate under “other” any known employment barriers not enumerated. Factors not specifically enumerated may be taken from the 6<sup>th</sup> Eligibility definition, which is as follows:

Youth who is or has:

1. attending continuation school
2. low self esteem and sense of self
3. involved in gang activities
4. a substance abuser
5. little or no family support or direction / negative role identification
6. alienated by sexual preference
7. physically or mentally challenged
8. an emancipated minor
9. language or cultural barriers
10. emotional problems
11. at risk of dropping out of school
12. at least two grade levels below age

### **PART III – TRACK CHARACTERISTICS**

Item 31 a-c. Check the applicable boxes for 32(a), 32(b) and 32(c). Please note that there are three separate tracks, Track A, Track B, and Track C, organized by three separate columns. A Participant should be identified under only **one** of the three tracks and all applicable boxes for each Participant must be consistent with that identified track characteristic: Left Column for Track A, Middle Column for Track B, and Right Column for Track B. For instance, a Participant identified as a Track A youth must have the appropriate boxes checked for Items 32(a), 32(b) and 32(c) under the Left Column.

### **PART IV – GOALS & SERVICE PLAN**

#### Item 32. **Service Inventory**

##### **10 Core Elements**

Check the services to be provided to Participant. Except for supportive services (for which separate instructions are provided below), each checked service(s) must contain the following information:

- Describe what services will be provided and the reason for the services under “**Justification**”. For example, Participant will be provided reading and language courses because (s)he tested at below basic skills efficient level for reading and writing.
- Note which agency will be providing the services under “**Service Provider**”.
- Include the “**Service Schedule**” for each of the services provided indicating the **duration** and **frequency** of services. For example, Agency X provides Participant A with Work Experience for a period of 10 weeks (duration) at five hours a day for four days a week (frequency).
- Enter the “**Start**” date for when the Participant will begin receiving the services and note the “**End**” date when the Participant has stopped receiving the services, regardless of whether the service schedule is or is not completed.
- Check “Yes” or “No” to indicate whether the Participant has **completed** the planned service.

##### **Support Services**

Check the support services that are appropriate for the Participant and for each item checked, provide a brief description of where the Participant will be referred or how the service will be otherwise provided and the need minimized or eliminated. For "Other Needs," be sure to specify what the needs are. Be sure to provide DATES OF SERVICE for each supportive service.

##### **Follow-Up Services**

Note that follow-up service is already pre-checked because it is a mandatory that at least 12 months of follow-up is required **after** a Participant exits from the program.

Refer to the attached "Description of Ten Core Elements" for further definitions and/or examples of each of the ten core services.

**Documentation Justification**

Note that justification for each service provided must also be supported by documentation, as derived from objective assessments of the Participant's skills, documented interviews of Participant assessing his/her needs and interests, or other documented writings.

Item 33. **Goal and Service Plan**

The purpose of this Goals and Service Plan inventory is list the goals and services towards achieving those goals.

In any one program year, there can be a minimum of one goal and a maximum of 3 goals.

The following is a grouping of goals by the following skills group (A) Basic Skills, (B) Work Readiness Skills and (C) Occupational Skills Training:

**A. Basic Skills**

1. Reading Comprehension
2. Math Computation
3. Writing
4. Speaking
5. Listening
6. Problem Solving, Reasoning, Decision Making
7. ESL/Vocational ESL
8. Life Skills

**B. Work Readiness Skills**

1. World of Work Readiness
2. Labor Market Knowledge
3. Career Planning
4. Job Search Techniques
5. Leadership
6. Allocates Resources
7. Team Work
8. Interpersonal Skills

**C. Occupational Skills Training**

1. Perform actual tasks
2. Familiarity with Procedures, Tools
3. Technology
4. Information Skills

**PART IV – PROGRESS NOTES**

**Progress Notes**

Dates of ISS Review with Participant: The ISS is a living document. Each time (at minimum every thirty days) the ISS is reviewed with the Participant, the date(s) of review must be entered here, as well as, results of the review noted in the ISS progress notes.

The Case Manager should develop ISS Progress Notes, **to be attached to the ISS form**, as appropriate.

Progress Notes should include the following where applicable:

- Note recommendations to overcome the barriers indicated.
- Cite any hindrances or obstacles the Participant may have to reaching their specified employment goal. State who will be involved or to whom the Participant will be

referred, to assist them in overcoming the obstacle. State the specific outcome achieved as a result of the referral. Use additional pages, and attach them to the ISS if necessary.

- Note the Participant's transferable skills and work history as it may pertain to the training recommended.
- Provide a brief note on the relationship between the assessment outcomes and the selection of the employment goal. Provide any comments that would assist in the justification of the employment goal.

### **12 Months Follow-Up**

Note name of Case Manager/Assessor assigned to follow up services, including the dates and frequency of contact with Participant.

Include specific information, including the referral date, the place or party to whom the Participant was referred, the result or acceptance/rejection for a job, the hourly wage for accepted employment and full-time or part-time status of the employment.

### ***Attachments***

Test Results: Results of all assessment/aptitude tests must be documented and appended to the ISS. The test names, numbers, versions, and raw scores **must** be attached.

### ***Participant Certification and Release Authorization***

The Participant Certification and Release Authorization form **must be completed** for each Participant. The completed form must be signed by the Participant and the Program/Case Manager.

The items contained in this section should be completely explained to the Participant, emphasizing the legal requirement to obtain commitment and understanding of the WIA mandated policies. If Participant agrees to release CONFIDENTIAL information for the purposes of WIA training and education, as well as to potential employers, check the box-authorize. If Participant refuses to release CONFIDENTIAL information, check box "do not authorize".