



## INDIVIDUAL EMPLOYMENT PLAN & INDIVIDUAL SERVICE STRATEGY

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### PURPOSE

This policy provides guidance on the Individual Employment Plan (IEP) for adult and dislocated workers and the Individual Service Strategy (ISS) for youth.

### SCOPE

The Workforce Development Board of Ventura County (WDBVC) and its contractors and subrecipients.

### REFERENCES

- Workforce Innovation and Opportunity Act, Public Law 113-128

### POLICY

Service providers are responsible for developing an IEP or ISS detailing when and how the participant will accomplish their employment and training goals. Adult and Dislocated Worker service providers must complete each participant's IEP in CalJOBS. Youth service providers shall use the ISS found in Attachment I.

The IEP or ISS is designed with the participant to identify employment goals, appropriate achievement objectives, and the appropriate combination of services for the participant based on an objective assessment. The IEP or ISS must be developed after an initial assessment is conducted for the participant. The IEP or ISS must be based on the results of the initial assessment. All elements of the IEP or ISS shall focus on career goals, education goals, and overcoming barriers to employment. The plan shall provide a framework including timeframes, resources, and incremental steps to achieve the overall goals.

All adults, dislocated workers, and youth shall have an IEP or ISS established upon receiving individualized services. The IEP or ISS shall be created collaboratively with the participant. The IEP or ISS shall be recorded or uploaded in CalJOBS, signed and dated by case manager and participant, and evaluated and revised as needed. All evaluation and revisions shall be made collaboratively with the participant's consent. A copy of the completed (or updated) and signed ISP shall be provided to the participant. Applicable activities codes shall be coded in CalJOBS.

Staff shall also enter a case note providing more information around the development and completion of the IEP or ISS. At minimum, the case note shall include the following elements:

- A brief summary of assessment information;
- A summary of barriers to successful completion;

*The Workforce Development Board of Ventura County is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.*

- For youth participants, the plan shall identify which of the 14 program elements are needed;
- A summary of all goals and objectives established with additional information focusing on activities and tools used for achievement;
- A summary of action steps to eliminate or minimize any barriers;
- A summary of next steps including follow-up on open goals, objectives, and an IEP or ISS review date.

**ACTION**

Bring this policy to the attention of all affected staff.

**INQUIRIES**

Inquiries regarding this policy can be addressed to the WDBVC at 805-477-5306.

/S/ Rebecca Evans, Executive Director  
Workforce Development Board of Ventura County

**ATTACHMENTS:**

Attachment I - Individual Service Strategy (ISS) for WIOA Youth Service Providers



## Youth Individual Service Strategy (ISS) for WIOA Youth Services



|                   |              |
|-------------------|--------------|
| Youth Name: _____ | Date: _____  |
| DOB: _____        | ID#s*: _____ |
| Address: _____    | Phone: _____ |
| Email: _____      | Staff: _____ |

\*Do not use social security number for participant I.D.

| <b>Brief Assessment Overview</b>  |                       |  |
|---|-----------------------|--|
| <i>Identify personal, educational, occupational, financial, childcare, transportation, housing, food/nutrition.<br/>Do not include medical or disability-related information.</i> |                       |  |
| Strengths   | Challenges (Barriers) | Service/Resource/Partner Agency Referral for Challenges (Barriers) |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |
|   |                       |  |

| <b>Goals</b>  |                 |                |  |
|---|-----------------|----------------|--|
| <i>Identify personal, educational, and occupational short- and long-term goals.</i> |                 |                |  |
| Goal Type   | Short-Term Goal | Long-Term Goal | Performance Indicator(s) Goal is Linked To   |
| <b>Educational Goal</b>   |                 |                | <input type="checkbox"/> Placement in Employment/Education<br><input type="checkbox"/> Median Earnings<br><input type="checkbox"/> Credential Attainment<br><input type="checkbox"/> Measurable Skills Gain<br><input type="checkbox"/> Employer Effectiveness |
| <b>Occupational/Employment Goal</b>   |                 |                | <input type="checkbox"/> Placement in Employment/Education<br><input type="checkbox"/> Median Earnings<br><input type="checkbox"/> Credential Attainment<br><input type="checkbox"/> Measurable Skills Gain<br><input type="checkbox"/> Employer Effectiveness |
| <b>Personal/Social Goal</b>   |                 |                | <input type="checkbox"/> Placement in Employment/Education<br><input type="checkbox"/> Median Earnings<br><input type="checkbox"/> Credential Attainment<br><input type="checkbox"/> Measurable Skills Gain<br><input type="checkbox"/> Employer Effectiveness |



**Labor Market Information (LMI) and Career Pathways**

*The ISS must identify career pathways for the youth that include education and employment goals including, in appropriate circumstances, non-traditional employment.*

**Conducted LMI research and attained knowledge of:**

- |  |  |
|--|--|
| <input type="checkbox"/> Labor market trends | <input type="checkbox"/> Training/education requirements         |
| <input type="checkbox"/> Required skills     | <input type="checkbox"/> Wage match requirements and information |

**DOL defines non-traditional occupations as jobs in which either men or women comprise 25% or less of a field of work**

- Completed orientation of non-traditional occupations
- Youth is interested in non-traditional occupations
- Youth is NOT interested in non-traditional occupations

| Question  | Answer |
|---|--------|
| <b>What is the youth's targeted occupation?</b>                               |        |
| <b>What industry sector is tied to the youth's targeted occupation?</b>       |        |
| <b>Is the desired occupation in demand?</b>                                   |        |
| <b>Is the desired industry sector a priority sector of the WDB?</b>           |        |
| <b>What LMI research/assessment was used?</b>                                 |        |
| <b>What date was the research/assessment completed?</b>                       |        |
| <b>What services are planned that are tied to career pathway achievement?</b> |        |

### Program Elements Needed to Achieve Goal

Youth are required to have access to all fourteen WIOA Youth program elements. Please select elements based on needs identified on the participant's objective assessment.

| Improving Educational Achievement   | Date Opened | Projected End Date | Actual End Date | Successful Completion   |
|---|-------------|--------------------|-----------------|---|
| <input type="checkbox"/> Tutoring: study skills training, and instruction leading to secondary school completion, including dropout prevention strategies<br><br><u>Action Steps/Referrals:</u><br><br><u>Comments:</u>                       |             |                    |                 | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br><u>Explain:</u> |
| <input type="checkbox"/> Alternative secondary school offerings<br><br><u>Action Steps/Referrals:</u><br><br><u>Comments:</u>   |             |                    |                 | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br><u>Explain:</u> |
| <input type="checkbox"/> Activities that help youth prepare for transition to postsecondary education and training<br><br><u>Action Steps/Referrals:</u><br><br><u>Comments:</u>  |             |                    |                 | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br><u>Explain:</u> |
| Preparing for and Succeeding in Employment  | Date Opened | Projected End Date | Actual End Date | Successful Completion   |
| <input type="checkbox"/> Paid & unpaid work experience (summer employment, pre-apprenticeship programs, internships, job shadowing, OJT) with Academic & occupational education<br><br><u>Action Steps/Referrals:</u><br><br><u>Comments:</u> |             |                    |                 | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br><u>Explain:</u> |
| <input type="checkbox"/> Labor market & employment information including career awareness, career counseling, and career exploration services<br><br><u>Action Steps/Referrals:</u><br><br><u>Comments:</u>                                   |             |                    |                 | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br><u>Explain:</u> |
| <input type="checkbox"/> Education offered concurrently with workforce preparation and training for a specific occupation   |             |                    |                 | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><br><u>Explain:</u> |

|   |                    |                           |                        |   |
|---|--------------------|---------------------------|------------------------|---|
| <u>Action Steps/Referrals:</u>  |                    |                           |                        |   |
| <u>Comments:</u>  |                    |                           |                        |   |
| <b>Preparing for and Succeeding in Employment</b>   | <b>Date Opened</b> | <b>Projected End Date</b> | <b>Actual End Date</b> | <b>Successful Completion</b>  |
| <input type="checkbox"/> Occupational skills training<br><u>Action Steps/Referrals:</u><br><u>Comments:</u>   |                    |                           |                        | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><u>Explain:</u> |
| <input type="checkbox"/> Entrepreneurial skills training<br><u>Action Steps/Referrals:</u><br><u>Comments:</u>  |                    |                           |                        | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><u>Explain:</u> |
| <b>Supporting Youth</b>   | <b>Date Opened</b> | <b>Projected End Date</b> | <b>Actual End Date</b> | <b>Successful Completion</b>  |
| <input type="checkbox"/> Supportive services<br><u>Action Steps/Referrals:</u><br><u>Comments:</u>  |                    |                           |                        | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><u>Explain:</u> |
| <input type="checkbox"/> Adult mentoring<br><u>Action Steps/Referrals:</u><br><u>Comments:</u>  |                    |                           |                        | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><u>Explain:</u> |
| <input type="checkbox"/> Comprehensive guidance & counseling (may include drug & alcohol abuse counseling & referral)<br><u>Action Steps/Referrals:</u><br><u>Comments:</u> |                    |                           |                        | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><u>Explain:</u> |
| <input type="checkbox"/> Follow-up<br><u>Action Steps/Referrals:</u><br><u>Comments:</u>  |                    |                           |                        | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><u>Explain:</u> |
| <b>Developing the Potential of Young People as Citizens &amp; Leaders</b>   | <b>Date Opened</b> | <b>Projected End Date</b> | <b>Actual End Date</b> | <b>Successful Completion</b>  |





### ISS for WIOA Youth Services

Youth Name: \_\_\_\_\_ Date: \_\_\_\_\_

DOB: \_\_\_\_\_ ID\*: \_\_\_\_\_

\*Do not use social security number for participant ID.

#### Youth and Case Manager Agreements:

##### For Youth - I agree to:

- ▶ Contact my Case Manager monthly or as often as necessary to update my progress on this plan. I understand that my case can be closed if I go 90 days without participating in a service.
- ▶ Let my Case Manager know of any problems which would cause changes to any activities or interfere with completing the plan.
- ▶ Seek, accept and maintain employment that meets my planned goal(s) as stated above.
- ▶ Contact my Case Manager when I become employed, and provide all necessary information pertaining to the job.
- ▶ Stay in contact with my Case Manager for up to a year after exiting the program to maintain and support meeting my goals.

##### For the Case Manager – I agree to:

- ▶ Assist with the appropriate career guidance, training and supportive services.
- ▶ Coordinate with other agencies and programs to help you obtain needed services.
- ▶ Monitor your participation and progress in the activities above.
- ▶ Assist you in your search for employment.
- ▶ Maintain contact with you for up to one year after you obtain employment for employment retention and career advancement purposes.

\_\_\_\_\_  
Youth Signature

\_\_\_\_\_  
Case Manager Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date