

Illinois Department of Human Services

IYIP

Quarterly Meeting

May 5, 2021



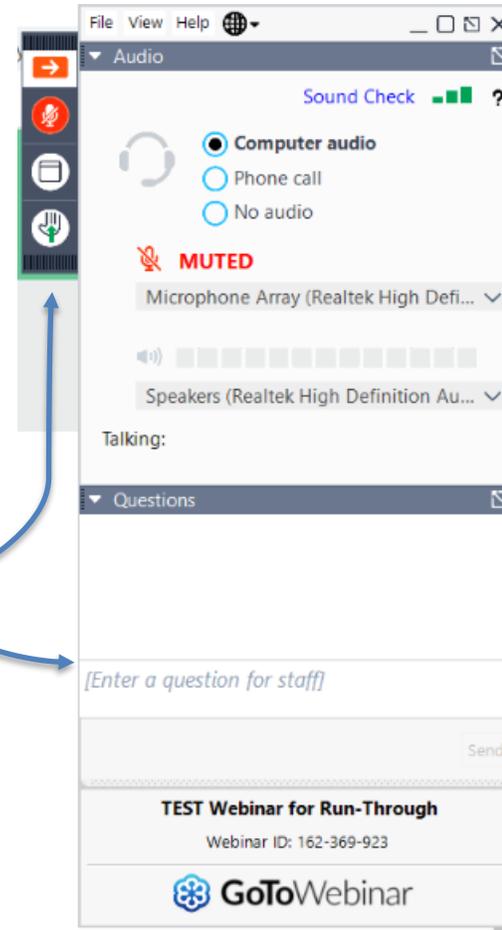
State of Illinois

Questions

- Type in Question Box

OR

- Raise your hand and I will unmute you



Agenda

- Welcome & Introductions
- DHS Updates
 - FY22 IYIP Continuation Application
 - Periodic Performance Reports (PPR)
 - Budget Revisions
 - End of Grant Year Info
- Break
- Illinois WorkNet Updates
- ICOY Updates
 - Overview of ICOY
 - Upcoming Trainings



Illinois
Collaboration
on Youth

DHS UPDATES



State of Illinois

IYIP Quarterly Management Meeting

MAY 5, 2021

IYIP FY 22 Continuation Funding Notice

- **Due Date is 12:00 pm (noon) on Wednesday, May 26, 2021**
- Everyone must submit the continuation app in order to be funded beyond June 30 and for Fiscal Year 2022 (FY 22).
 - Current FY 21 contract and budget end on June 30, 2021
 - *No extensions will be granted even if funds are left over
 - You will be applying for a 12-month contract this time with a normal contract period beginning on July 1, 2021 and ending on June 30, 2022

IYIP FY 22 Continuation App *cont.*

1. All providers must complete a Programmatic Risk Assessment or PRA and an Internal Controls Questionnaire or ICQ.
 - a. The PRA must be completed for each separate grant for which an applicant intends to apply (1 PRA per grant).
 - b. A provider need only complete the ICQ once per year, no matter how many grants they are awarded

2. A proposed budget must be submitted into CSA. **IMPORTANT:** Please be sure the budget status in CSA says “**GATA Budget signed and submitted to program review.**” This status will appear after the budget is electronically signed by the agency CEO or CFO and submitted to DHS.

Funding Information and Requirements (page 9 of pdf)

- 8. The funding amount requested for FY22 should reflect the actual grant amount required to implement the proposed plan and should not exceed your FY21 grant award amount. Exception: Category 1 providers that were only provided 1-month of Category 1 funding for FY21 to implement their proposed summer program.
- 9. Applicants that have struggled to meet their projected numbers to be served in FY21 (current year) should strongly consider reducing their projected numbers and budget accordingly.
- 10. **Applicants may NOT add new IYIP program Categories to their grant.** Applicants MAY request to eliminate a FY21 funded program Category, however, funding requested shall be adjusted accordingly if not used to increase numbers in other funded program Categories.

Funding Info and Requirements (cont.) (page 9 of pdf)

- 11. Category IV applicants MAY propose to develop new training programs again in Year 2 or they may simply continue to enroll new youth into the new programs developed in year 1.
- 12. Funding in excess of the maximum cost per youth per Category, as applied when making the original awards under this program, will NOT be approved.
 - Category 1 cap = \$6,350 per youth
 - Category 2 cap = \$12,500 per youth
 - Category 3 cap = \$12,000 per youth
 - Category 4 cap = \$9,650 per youth

Section III of Continuation App *(page 36 of pdf)*

- **Content and Form of Application Submission**

- **Proposal Narrative Content**

- Applicants must submit a plan w/FY22 updates to the original FY21 approved app
- You must submit a complete application, however, If there are no changes to the original FY21 approved plan, you may indicate that under the relevant section(s) as directed in the funding notice.
- If you have minor changes, you will indicate that and provide details.
- The narrative portion must be in the order requested and ALL parts of narrative must be included and accurate for FY22.

Section III of Continuation App (cont.) *(page 37 of pdf)*

Appendix J – Executive Summary

This must be completed and included as Attachment 1 of the application.

- Many applicants forgot to submit the Exec Summary last year or did not complete this important form accurately and had to resubmit
- The Executive Summary form includes funding amount by Category, projected # of youth to be served by Cat. & cost per youth by Cat along w/total funding amounts. This information is essential to the program.
- Please ask questions if you are not sure how to complete this form

Submission Dates / Times *(page 41 of pdf)*

- Applicants must electronically submit the complete app including all required narratives & attachments in the prescribed order.
- Applications must be sent to DHS.YouthServicesInfo@Illinois.gov
 - The subject line of email should state “**22-444-80-2377 IYIP – Brandon Bax**”
 - The electronic copy **must** be a complete, single PDF file. Apps will NOT be accepted by fax machine, hard copy, disk or thumb drive.
- **Apps must be received no later than 12:00 pm (noon) on Wednesday, May 26, 2021.**
- Email brandon.m.bax@illinois.gov with questions

Payment Information *(page 45 of pdf)*

- **Payment Determination / Payment Process**
- > Results of the ICQ and Budget Narrative Questions
 - An annual determination will be made regarding the need for a working capital advance. This determination will be made based on information submitted by the applicant as part of the FY21 Grant Application/Plan process.
 - Applicants will be placed in one of the following payment categories:

Payment Information *(page 45 of pdf)*

>> **Applicants identified as low risk on ICQ:**

Applicants will be identified as low risk if they have zero high risk scores and one or less medium risk scores on the items on the ICQ. Applicants identified as low-risk will receive monthly advance payments. An initial 2/12 of the Award amount will be issued upon execution of the agreement; and may be rounded to the nearest \$100.00. Subsequent payments will be issued, after reconciling all current and previously reported expenditures, ensuring the Applicant maintains a 1/12 rolling advance.

Applicants identified as Medium to High Risk on the ICQ: Applicants will be identified as medium to high risk if they have one or more high risk scores and/or two or more medium risk scores on the items on the ICQ.

IYIP FY 22 Continuation Funding Notice

Questions ???

Program Updates

- **Updates or changes in staff** - if you have any new staff members please email Brandon so that we can update our IYIP contact group. Also, let us know if a staff member should be deleted.
- **Executive Director (ED), Program Director (PD) and Financial contact** – must have current info for all 3

Periodic Performance Report (PPR)

Illinois Youth Investment Program (YIP) Periodic Performance Report (PPR)

Grantee Name (per UGA):
Grantee DUNS:
Grantee FEIN:
Program Name:
Program Contact:
Email:
Phone Number:

Grant Number:
Agreement Period:
Report Start date:
Report End date:
FY
Qtr
County

Service Area : (Identify the Communities that were targeted for services, including the county name or the Chicago Community Area as appropriate):

CATEGORY ONE

Data Collection Elements
*FYTD= Fiscal Year to Date (starting 10/1/20)

Proposed # of youth to be served under this category (insert # under *FYTD)

1. Total number of youths referred to the program.
A. Total number of youths referred to the program by DHS Local FCRC Office.

2. # of referred youth registered in Illinois workMet
A. # of registered youth determined eligible for the program.
1.) # of youth accepted into the program.

2.) # of youth discharged from the program

3. # of youth enrolled in the program by age group and gender: (enter data on table below)

Age Group	Male		Female		Non-Binary		Totals	
	During Report period	FYTD*						

CATEGORY ONE | **CATEGORY TWO** | **CATEGORY THREE** | **CATEGORY FOUR**

1. It's very long!
2. There is a different tab for each Category.
3. Make sure you fill out the top section as completely as possible.
4. Use the drop down boxes when available

PPR Eligibility/Risk Factors

Eligibility and Referrals		During Report period	FYTD*
*FYTD= Fiscal Year to Date (starting 10/1/20)			
5.	# of youth enrolled by eligibility criteria		
A.	Youth with no work experience	0	0
B.	Youth with a history of employment failure		
C.	Youth lives in a household where no one is employed		
D.	Youth residing in a household receiving TANF funds		
E.	Youth residing in a household receiving SNAP funds		
F.	Youth is eligible for Free/Reduced lunch		
G.	Youth living in a single parent household		
H.	Youth is experiencing homelessness		
I.	Youth has current or prior DCFS system involvement		
J.	Youth with siblings who are teen parents		
K.	Youth who is pregnant		
L.	Youth who is parenting		
M.	Youth identifies as LGBTQ		
N.	Youth has a disability		
O.	Youth has an IEP (Individualized Education Program/Plan)		
P.	Youth experiencing academic difficulties		
Q.	Youth is in danger of or has previously been held back to repeat one or more academic years		
R.	Youth experiencing truancy concerns		
S.	Youth has current or prior school expulsions or suspensions		
T.	Youth did not complete high school		
U.	Youth is reported to have behavior issues		
V.	Youth is reported to be a victim of bullying		

Report **ALL** that apply

PPR Other Sections

- Assessment and Activities
- Secondary and Post-Secondary Education
- Employment Placements
- Subsidies, Wages and Incentives
- Case Closure (Only youth who have been discharged)

If a cell turns red, please
double check your numbers!

PPR YTD Program Category Placement Summary Form

CATEGORY ONE: Year to Date Program Category Placement Summary Form											
Paid Work Experience		Fiscal Year to Date (starting 10/1/20) Initial and Completed Placements						Report on Youth exiting Category One Program; Fiscal Year to Date (starting 10/1/20)			
Work Based Learning	Career Cluster*	Total # youth Placed	# of youth placed within 30 days	# subsidized placements	# unsubsidized placements	# placements with stipends	# of placements completed	# of youth applying for an apprenticeship	# of youth accepted to an apprenticeship	# of youth accepted into other Articulated Postsecondary Education	# of youth in long term unsubsidized employment
Internships		0	0	0	0	0	0	0	0	0	0
enter name(s) of internship	enter Career Cluster										
	enter Career Cluster										
	enter Career Cluster										
	enter Career Cluster										
	enter Career Cluster										
	enter Career Cluster										
Service Learning		0	0	0	0	0	0	0	0	0	0
enter name(s) of Serv. Learn opport	enter Career Cluster										



Use the drop down boxes for Career Clusters

PPR Performance Measures and Standards

CATEGORY ONE Performance Measures and Standards			
<i>Under each performance measure please detail your accomplishments/results during the reporting period. If you are not on track to meet the</i>			
PM1. 100% of proposed youth will be served in the program.	acceptable performance	90%	#DIV/0!
<i>In this box, please detail your accomplishments/results during the reporting period. If you are not on track to meet the performance measure please provide justification or explanation.</i>			
PM2. 100% of youth will be placed in a Paid Work Experience or a Pre-Apprenticeship Program.	acceptable performance	90%	#DIV/0!
<i>In this box, please detail your accomplishments/results during the reporting period. If you are not on track to meet the performance measure please provide justification or explanation.</i>			
PM3. 100% of youth will be placed within 1 month (30 days) of enrollment.	acceptable performance	70%	% of placed
			% of served
			#DIV/0!
			#DIV/0!
<i>In this box, please detail your accomplishments/results during the reporting period. If you are not on track to meet the performance measure please provide justification or explanation.</i>			
PM4. 100% of youth placed in a Paid Work Experience will complete that Work Experience (minimum 180 hours.)	acceptable performance	70%	#DIV/0!
<i>In this box, please detail your accomplishments/results during the reporting period. If you are not on track to meet the performance measure please provide justification or explanation.</i>			
PM5. 100% of youth placed in a Pre-Apprenticeship Program will complete that Pre-Apprenticeship Program.	performance	80%	#DIV/0!

Gray cells with automatically calculate % based on numbers you entered above.

Enter a narrative under each performance measure

PPR Specific Conditions

GRANT AGREEMENT SPECIFIC CONDITIONS		
Category	Conditions?	Condition/corrective action
ICQ (Internal Control Questionnaire)		<i>If yes, briefly list each condition/corrective action in this box</i>
	Progress toward remediation	<i>If applicable, describe progress toward remediation in this box</i>
MBR (Merit Based Review)	Conditions?	Condition/corrective action
		<i>If yes, briefly list each condition/corrective action in this box</i>
	Progress toward remediation	<i>If applicable, describe progress toward remediation in this box</i>
PRA (Programmatic Risk Assessment)	Conditions?	Condition/corrective action
		<i>If yes, briefly list each condition/corrective action in this box</i>
	Progress toward remediation	<i>If applicable, describe progress toward remediation in this box</i>
Performance Accomplishment Correlated to Reported Expenditures		
<i>In this box, indicate and explain whether program performance is consistent with expected services and expenditures/learnings.</i>		

Conditions from:

- ICQ
- MBR
- PRA

Program Updates – Budget Revisions

- An agency can move money around without asking or doing a budget revision as long as it is within 10% or \$1,000.00, whichever amount is greater, of each line item being changed. Costs must be allowable, reasonable and necessary to implement the grant.
- An agency would need to request a budget revision if it is more than 10% or \$1000 or any line item they are changing.
- The deadline for budget revision requests was on May 1.

Program Updates – Budget Revisions

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Program Updates – Budget Revisions (cont.)

* **Budget Revision Deadline Policy**

Division of Family and Community Services (DFCS) budget revision requests initiated after May 1st will NOT be processed.

A budget revision request will be considered initiated when there is dated, written documentation (including email) that the provider (grantee) has reached out to the DFCS program to discuss the need for a revision, AND DFCS program staff have responded in writing, giving them permission to move forward with the steps necessary to formally revise their budgets.

Program Updates – Budget Revisions (cont.)

* Budget Revision Deadline Policy *cont.*

Exceptions to the DFCS Budget Revision Deadline Policy

Exceptions to the above deadline will be limited, considered on a case-by-case basis, and must be approved in writing by the given DFCS Associate Director. In the event the Associate Director position is vacant, the request must be approved by the DFCS Director's Office.

Exception Protocol

When a provider (grantee) requests a revision after May 1st, the DFCS program staff must first inform the provider (grantee) that the deadline has passed to initiate a budget revision. If the provider (grantee) believes that the circumstances surrounding the need for its revision requires special consideration, and the program staff agree, the following steps will need to occur.

Program Updates – Budget Revisions (cont.)

Exceptions to the DFCS Budget Revision Deadline Policy

The provider (grantee) must complete and submit the Budget Revision Deadline Exception Request Form. The Budget Revision Deadline Exception Form will require the following:

- Current approved budget – by line item
- Amount of proposed variance to each line item
- Resulting budget following the proposed revision
- Need & justification for the proposed revision (This must address EACH line for which funds will be either reduced or increased)
- Explanation as to why the need for this revision was not known prior to the May 1st deadline for revisions?
- Description of consequences if this revision is not approved
- If the request is not approved, what will be the anticipated lapse amount?
- Additional information to justify the request

Program Updates (cont'd)

- Communication is key – respond in timely manner
 - Contact Info:
 - Brandon.m.bax@illinois.gov --- Brandon Bax
 - Nicolle.mckinney@illinois.gov --- Nicolle McKinney
 - DHS.YouthServicesInfo@illinois.gov --- Use for all reports – EDCF, PFR, PPR, etc. and also Funding notice apps & questions

Program Updates

Questions ???

Break



State of Illinois

Illinois Worknet



State of Illinois

ICOY UPDATES



State of Illinois



ICOY Trauma Department

Updates for FY21



Partnering to build brighter futures



Upcoming Training Dates

- **Learning Communities-June 2021**
Please Stay Tuned for Dates !



Questions? Please reach out!



Name: Kandice Manciel

Title: Trauma Specialist, DHS

Contact Information:

kmanciel@icoyouth.org

Questions ???

Brandon Bax, brandon.m.bax@illinois.gov

Dee Reinhardt, dreinhardt@illinoisworknet.com

Ariel Liddell, aliddell@icoyouth.org

Kandice Manciel, kmanciel@icoyouth.org



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