IDHS
ILLINOIS DEPARTMENT OF HUMAN SERVICES

ISETS
Illinois SNAP Employment & Training System

User Manual

For State SNAP E&T Staff

Table of Contents

*All images are fictional examples only and any resemblance to actual persons is coincidental only

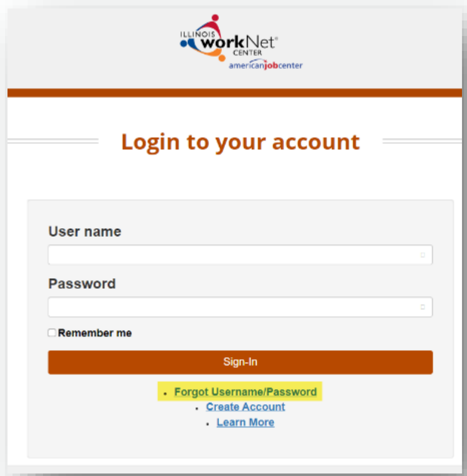
Access to ISETS

ISETS is powered by Illinois workNet. This means that you will go to ISETS inside www.illinoisworknet.com and log into your Illinois workNet account. We suggest using Chrome or Edge. Internet Explorer is no longer supported.

If you already have an Illinois workNet account created, you would have received an ISETS/Illinois workNet username and password in your email.

If you do not know or remember your password, click on the forgot password link below the log-in information as shown to the right.

You can recover your password via email. If you do not receive the information, look for an email in your junk folder. If you have any issues, access the Help Request link found on the bottom of any page on Illinoisworknet.com Indicate that you are a partner and need to regain access to your account.



ISETS Security

For security reasons, when you are logged into ISETS, screens are set to TIME-OUT after 30 minutes of inactivity. There is a 5-minute notification period during which time you can click on the screen to renew your activity. After the notification period you will be logged out. A best practice is to **close tabs when you are not using them**. If you have been logged out, enter your Illinois WorkNet/ISETS password and return to ISETS.

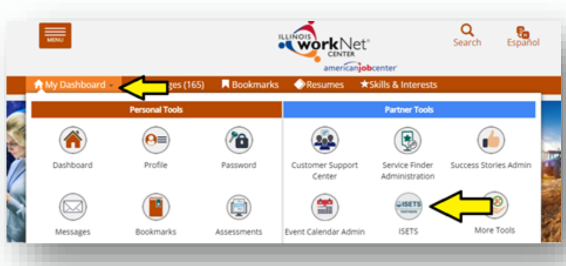
You are required to update your ISETS/ Illinois WorkNet password quarterly.

Accessing ISETS Tools

Once you are logged in, you can access the ISETS Dashboard and partner tools.

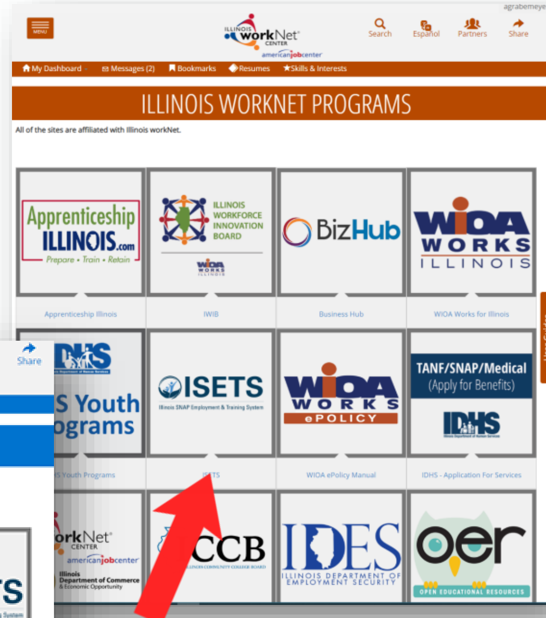
Option 1 – Use the direct link. If you use this option, you may want to bookmark the link. https://apps.illinoisworknet.com/SiteAdministration/IDHSET/Admin/Index/

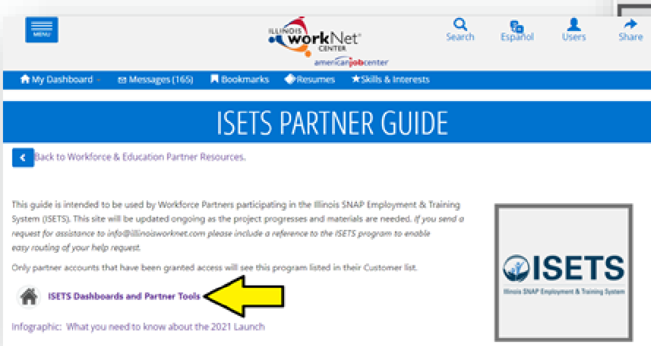
Option 2 – Use the ISETS logo that is available in your Illinois workNet Dashboard Partner Tools.



Option 3 – Use the ISETS tile located on the Illinois WorkNet Programs page.

Option 4 – Use link that is listed on the ISETS Partner Page: (https://www.illinoisworknet.com/isetspartners)





The process to become an ISETS partner user:

1. In order to gain access to any IDHS data system your organization must have approval of a Security and Privacy Controls Questionnaire: please complete and submit an SPCQ to DHS.ISETS.ACCESS. Providers may also need a Data Sharing Agreement depending on what access they require to different IDHS data systems. If your SPCQ has already been submitted and approved, proceed to step 2.
2. Each ISETS user must complete HIPAA and Security Awareness Training Modules and Attestations found at IES Access and Support Center for External Partners. These are kept at the Partner agency.
3. Each ISETS user must complete a Confidentiality Agreement found at IES Access and Support Center for External Partners. These are kept at the Partner agency also.
4. Providers must submit an initial user list saved as a Microsoft excel file with your organization's name in place of "Organization Name" in the file name. If you need to access a blank copy of this template, Provider Managers should ask their manager for a copy. If you have already submitted an initial user list, each subsequent user must be requested by submitting an IL444-2022 form (step 6)
5. IDHS staff will forward all forms to the correct department and once we have a final DHS signature, users will be uploaded into ISETS. Each user will receive a system generated notification once they have been added.
6. New users can be added after the initial user list by submitting a Help Request in ISETS. The requester must submit the IL444-2022 form and provide a birth date in their Help Request ticket. Instructions for submitting a Help Request are outlined in the “Where to get Help” section in this manual.

Access Forms:
IDHS_SPCQ_v4.1_03.2018.pdf
IL444-2022.pdf
ISETS User List - Organization Name .pdf

Please remember that if a Provider fails to notify IDHS of a user who is no longer employed with them, this could constitute a breach of their Data Sharing Agreement. Instruct your Providers to review their user list every few months to ensure it is up to date.

For IDHS Staff to gain access to the system, please have your manager submit a written request to dhs.isets.access@illinois.gov with your name, email address, phone number, zip code, birth date, and what role you need. The role you are assigned will determine what information your have access to.

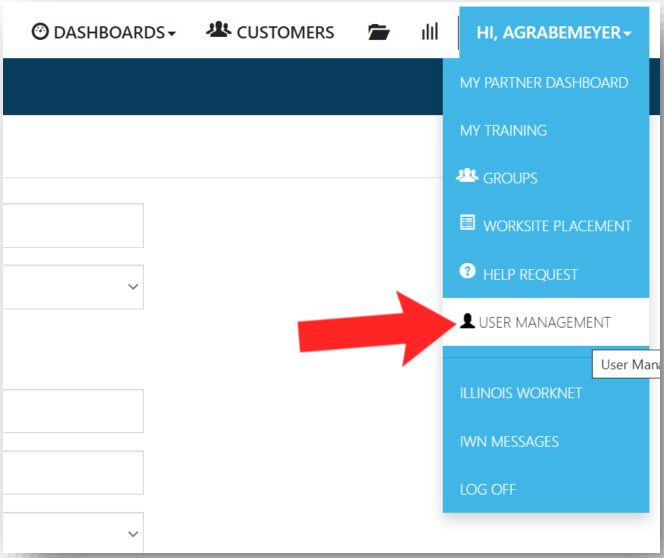
Provider Managers will also need to ensure that they have access to the Providers they are assigned to. While ISETS staff do their best to update this information periodically, it is your responsibility to ensure you have access to and are reviewing your Providers' data regularly. If you are reassigned to a different Provider, please email dhs.isets.access@illinois.gov immediately to update the list of Providers you have access to in ISETS.

Adding new Providers and New Users in ISETS (for Super Users)

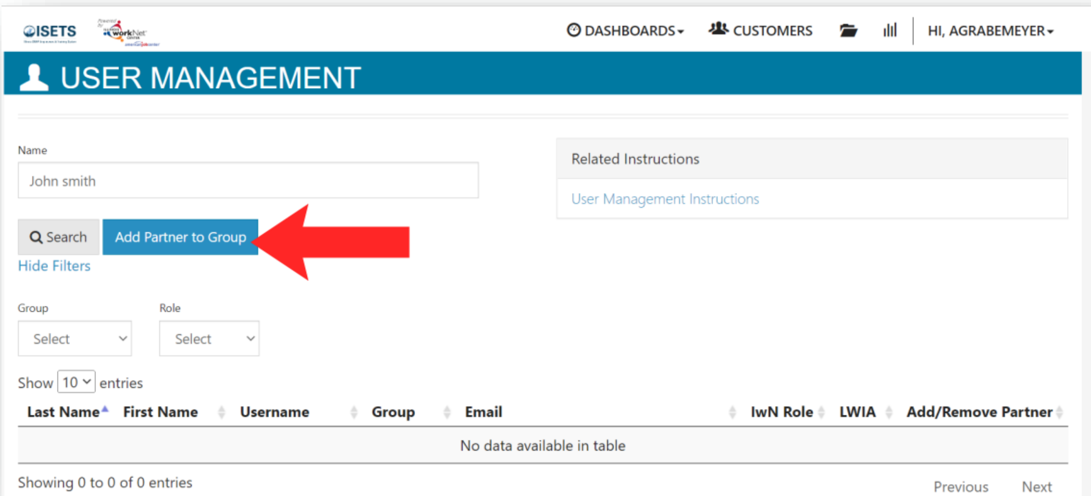
IDHS staff are responsible for monitoring the DHS.ISETS.Access@illinois.gov mailbox and are responsible for adding new Providers and new users for existing providers. Providers may only be added if they have an executed contract with IDHS and have a current approved SPCQ.

Adding a new user in ISETS

1. Confirm that the organization has a current SPCQ approved.
2. Confirm that the IL444-2022 form is filled out and signed and that a DOB was provided.
3. In ISETS, click on the upper right-hand corner of the screen with your username and expand the dropdown menu. Choose "User Management".

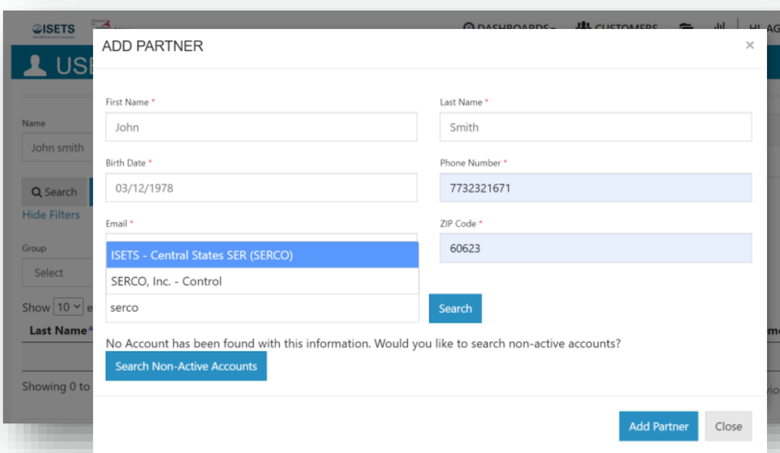


4. Ensure that the user isn't already added to the system or listed with another organization by searching their name. Make sure to click the "Search" button; simply hitting "Enter" after typing into the system does not prompt a search.
5. If no user already exists, click on the "Add Partner to Group" button.

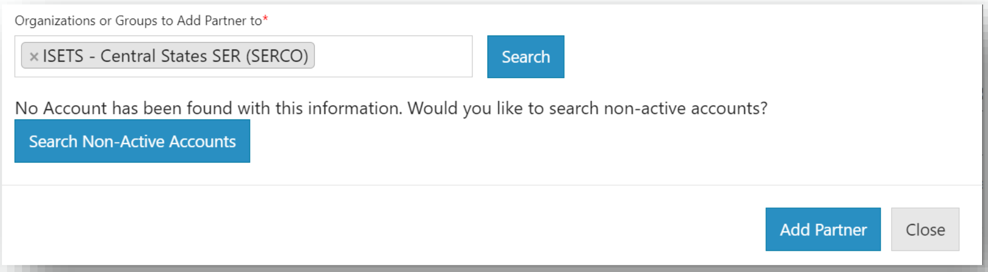


6. A pop-up window with all the fields will appear.

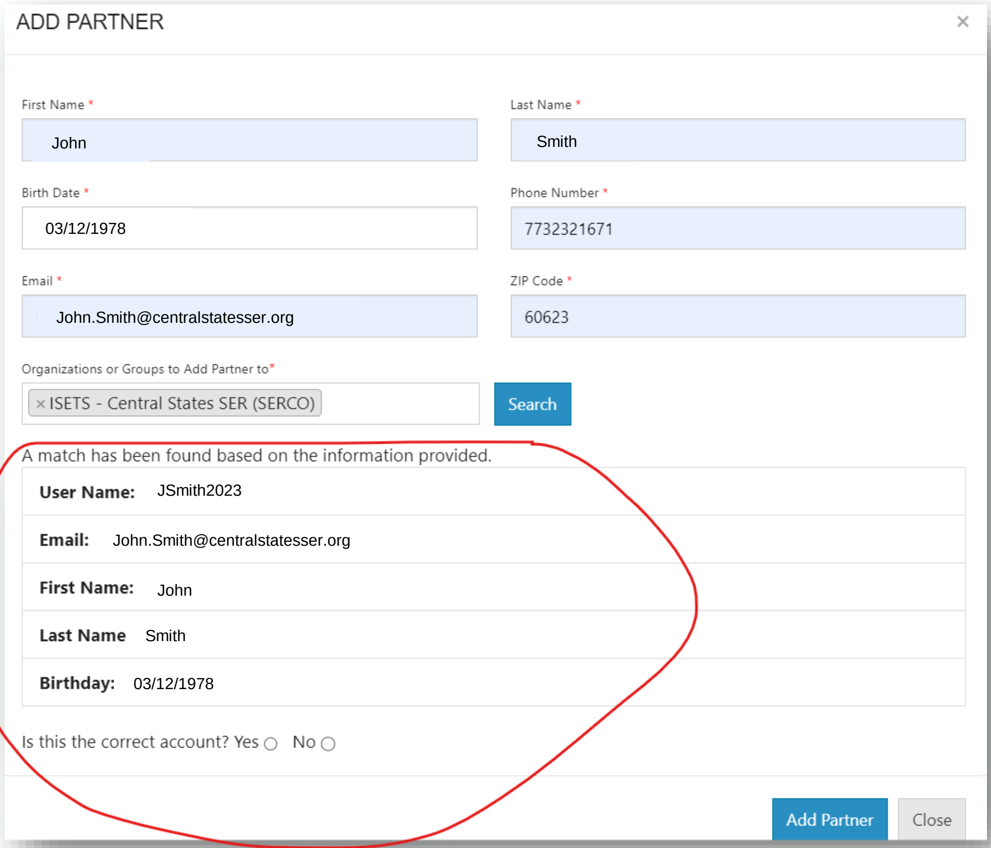
7. Fill in all the fields and search for the organization in the last field. This organization name must begin with "ISETS" as with the highlighted option to the right.



8. If no account already exists in the Illinois Worknet system, you will receive a message like the one below. If this is the case, click on “Search Non-Active Accounts”.



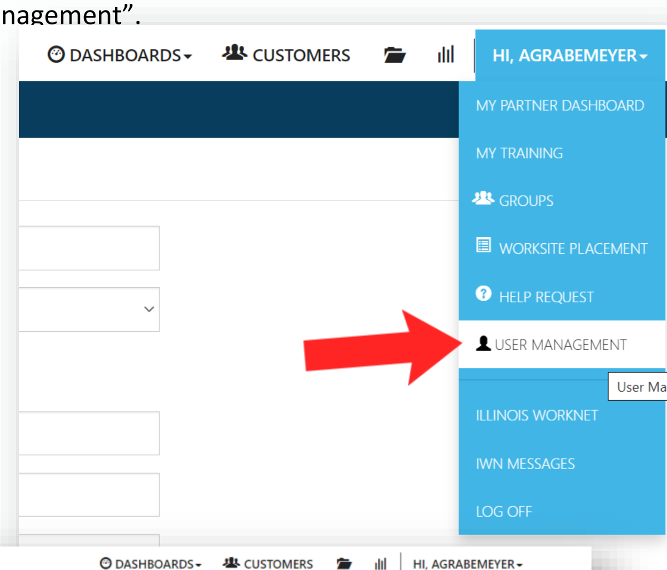
9. If an account already exists in the IWN system but not in ISETS you will see a message like the one below:

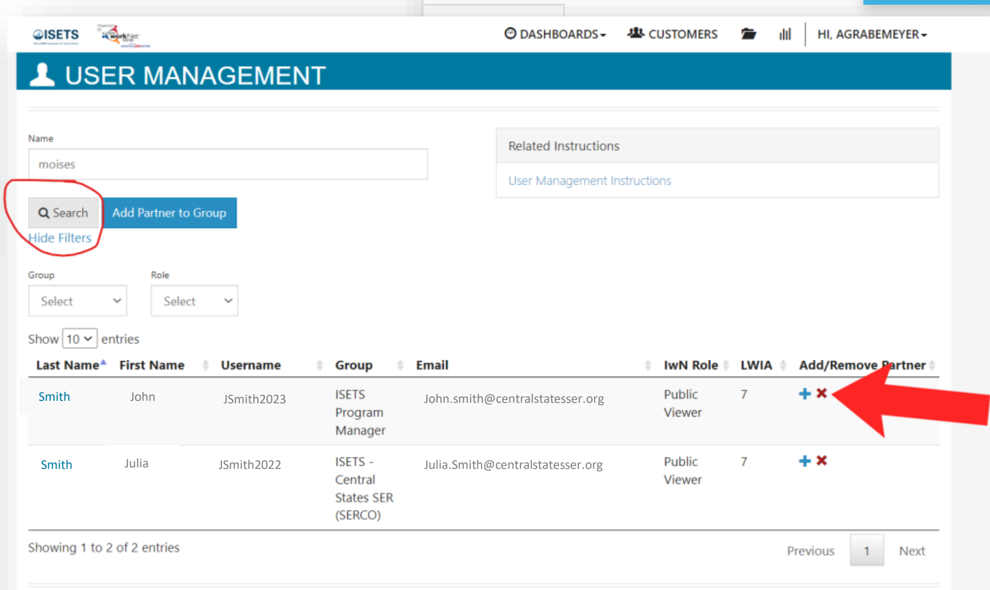


10. If this is the correct person click on the “Yes” radio button and click “Add Partner” button. If no account is found, you will see a message saying that a new account is being created then you will need to click the “Add Partner” button.

Removing existing users

1. Confirm that the request to remove the user was made from an authorized organizational representative.
2. Go to [ISETS]() and login.
3. Click on the upper right-hand corner of the screen with your username and expand the dropdown menu. Choose “User Management”.
4. Search their name. Make sure to click the “Search” button; simply hitting “Enter” after typing into the system does not work.
5. Click on the red X to remove the user from that Provider/Role. For management staff, please make sure you have removed them from all listings.



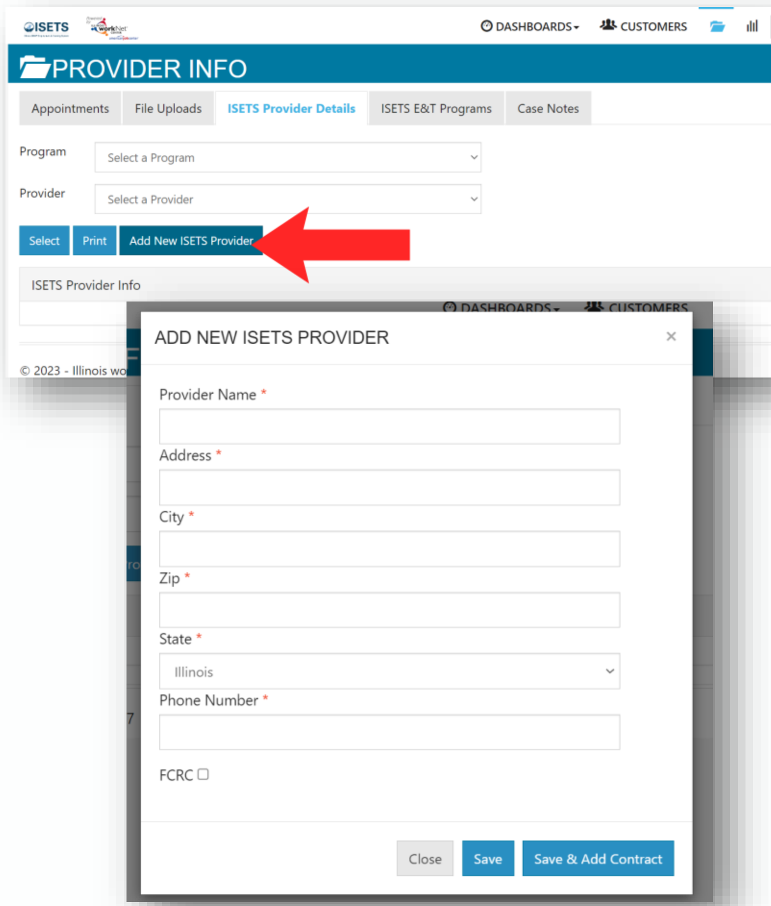


Adding a new Provider in ISETS

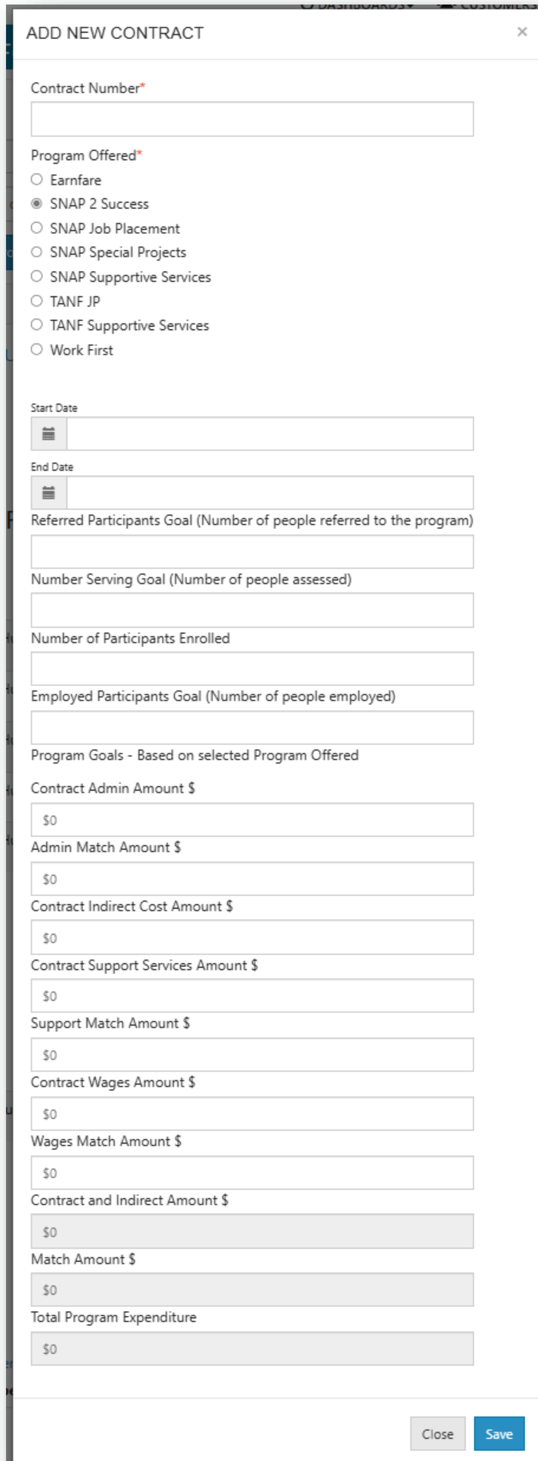
When a new Provider contract is executed, an appropriate IDHS Super User must notify ISETS staff so that the Provider information can be added to ISETS including the dropdown menus.

The following steps must also be completed to ensure a new Provider has the access they need to get started in ISETS:

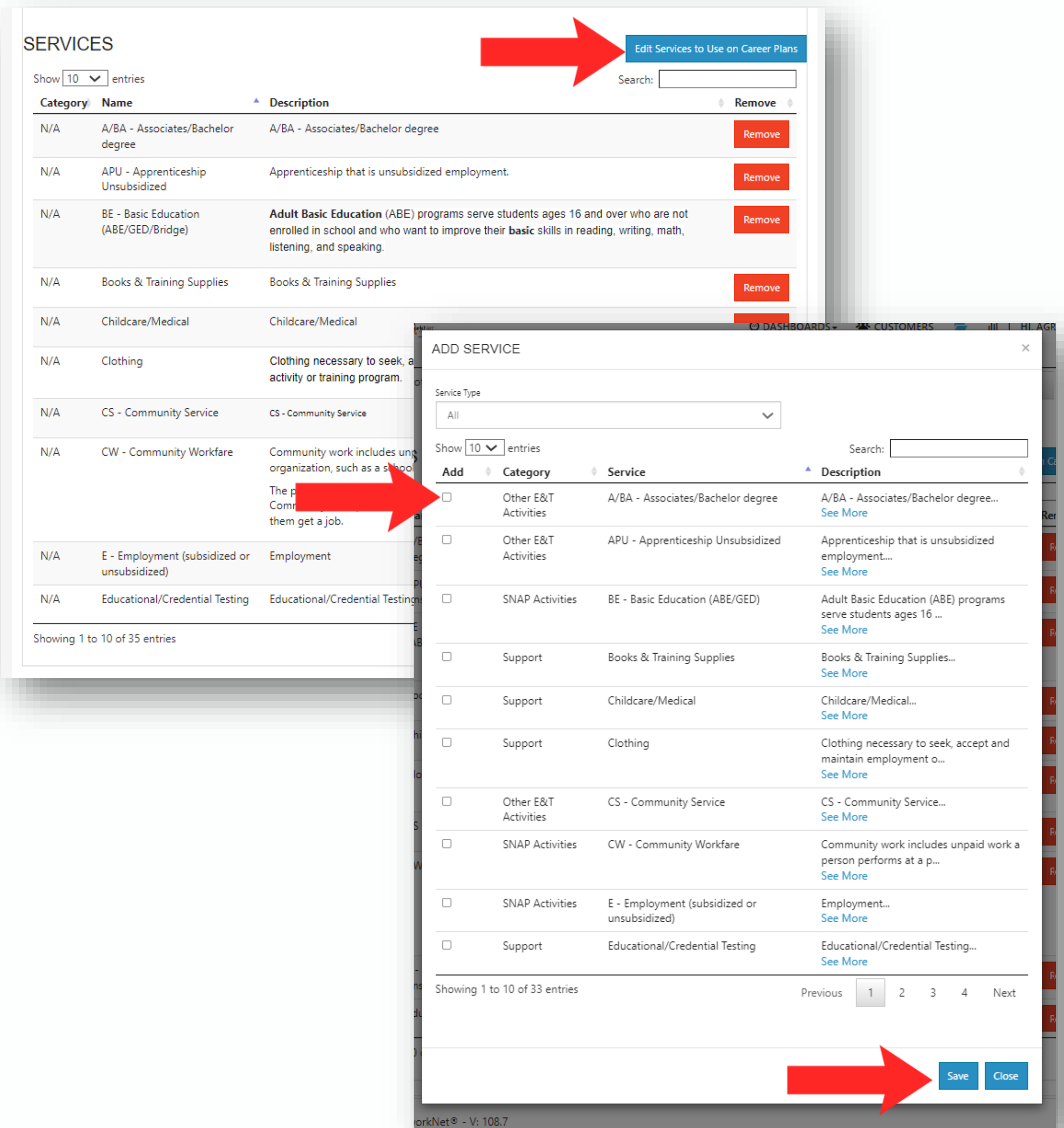
1. Add the new Provider by going to the Provider Info section and choosing the ISETS Provider Details tab.
2. Click the "Add New ISETS Provider" button and fill out all information for the provider.
3. Click "Save & Add Contract".



5. The “Add New Contract” window will open. Fill out all information for the new contract including Contract Number, Program Offered, Start Date, End Date, and all measurable goals included in the exhibits for the Provider. Also make sure that the dollar amounts for the contract are accurate.
6. Click the “Save” button.
7. Add a Location for the provider in the Provider Details screen. If one is not available to choose, please submit a Help Request ticket to ISETS so a Location can be added to Illinois WorkNet for reference.
8. Add an E&T Program associated with the new contract and prompt the organization (through their Provider Manager) to edit/complete the program. Please see the section on “[Editing Program Information](#)” for more instructions on how to do this.

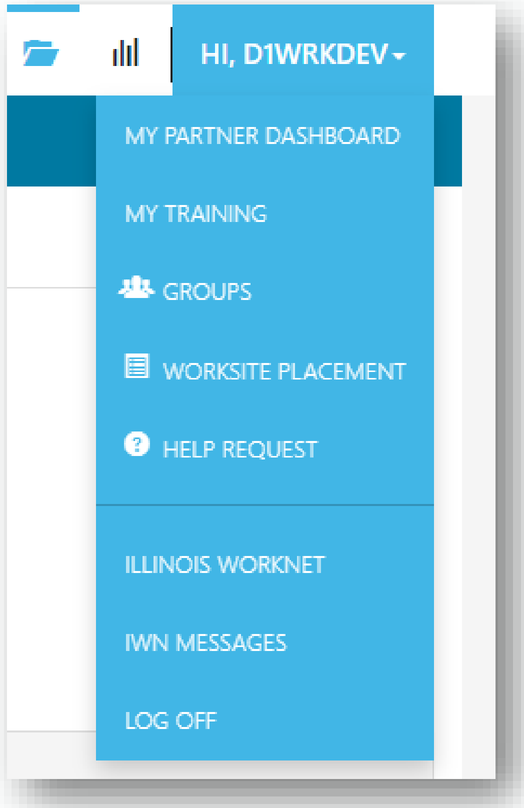


5. Ensure that the Provider has all Activities and Services available to them by scrolling to the bottom of the ISETS Provider Details page and clicking the "Edit Services to Use on Career Plans" button. Make sure that all SNAP E&T Activities and Services are checked and added. And click "Save".



Username Menu

In the upper right-hand corner of the screen in ISETS you will see your username displayed. If you click on your name, you will see a dropdown menu. The following are the available options you can select:



My Partner Dashboard
Connects to the user's dashboard to complete tasks like change password or view their own status on activities.

My Training
Connects to training videos associated with the program in which the partner is working.

Groups
Returns the user to the initial group menu in the event the user has access to more than one project.

Worksite Placement
Links to the Worksite Placement dashboard to add worksites and payroll associated with a project/program.

Help Request
Links to the help desk ticketing system where users may report issues happening in the system.

Illinois workNet
Returns the user to the main Illinois workNet page.

IWN Messages
Links the user to messages sent in case notes and messaging within Illinois workNet.

Illinois workNet
Returns the user to the main Illinois workNet page.

IWN Messages
Links the user to messages sent in case notes and messaging within Illinois workNet.

LOG OFF
Allows you to log out of ISETS or Illinois workNet.

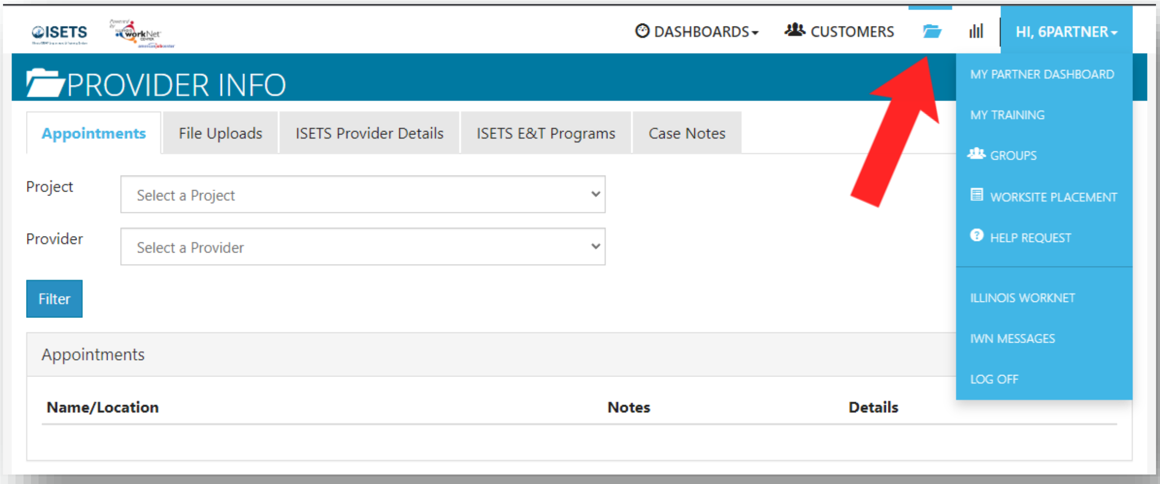
Viewing and Editing Provider Information

The Provider Information section of ISETS helps grantees add, track and follow items related to the grant and the agency. This area does not deal with specific customers. Tabs may vary based upon the grant parameters.

Below is a table of which roles have access to edit information in this section of ISETS. A more detailed list is provided in the appendix (ISETS Permissions).

Workforce Development (IDHS)	Provider Managers (IDHS)	Program Manager (CBO)
View contract	View contracts	Edit Contracts
Edit Programs	Edit Programs	Edit Programs
View Worksites	View Worksites	Edit Worksites
View Services/Activities	Edit/Remove Services	View Services/Activities

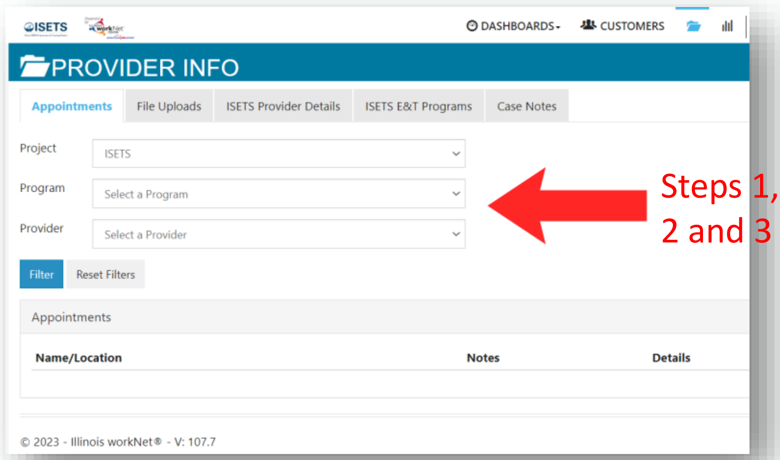
1. Inside ISETS, click on the "Provider Information" icon on the top right menu: the partially open folder icon.



Appointments

Agencies who want to offer intake appointments, office hours, or orientations, can add them by following these steps:

1. Select ISETS as the Project for the first dropdown field.
2. Select the appropriate Program and Provider name.
3. Click "Filter" to see locations for the project/agency.
4. Click the "Add Appointment Site" button.

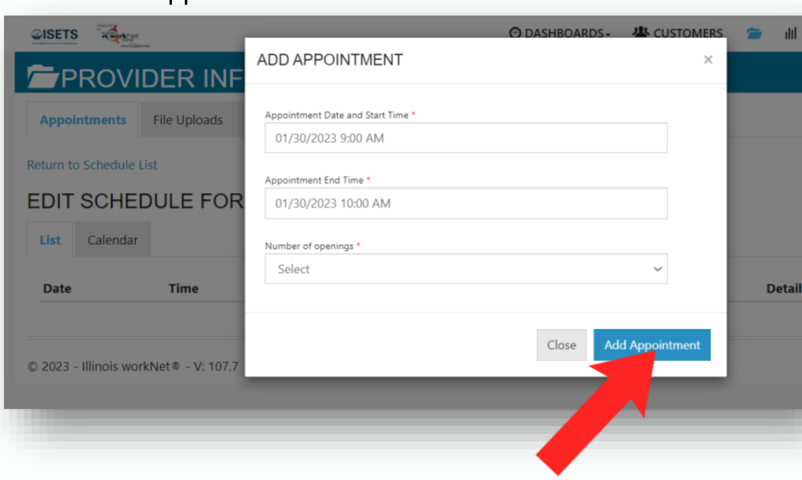


5. Name the appointment site.
6. Add instructions for the appointment i.e., bring an I.D., bring referral form, etc.
7. Appointments and Appointment sites can be deleted from the list when needed.

*Providers may find it more expedient to add recurring appointments.

To edit an existing appointment site:

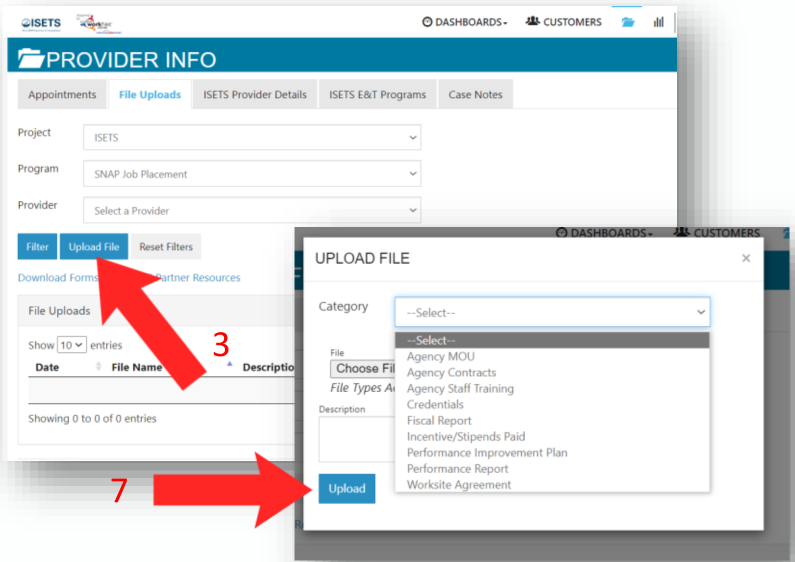
1. Click on the "Edit Site" button and make any changes to the Appointment Site information.
2. Click on the "Edit Schedule" button and add scheduled appointments by clicking on the "Add Appointment" button.
3. To add an appointment, click on the "Appointment Date and Start Time" field and pick a day on the calendar. You can choose a time by toggling the time listed with up or down arrows (appointments are automatically given one hour).
4. Edit the end time.
5. Select the number of openings.
6. Click the "Add Appointment" button.



File Uploads

These are typically files that are associated with a Provider agency, grant or staff – NOT individual customers. Provider managers may add files to a Provider record by performing the following steps:

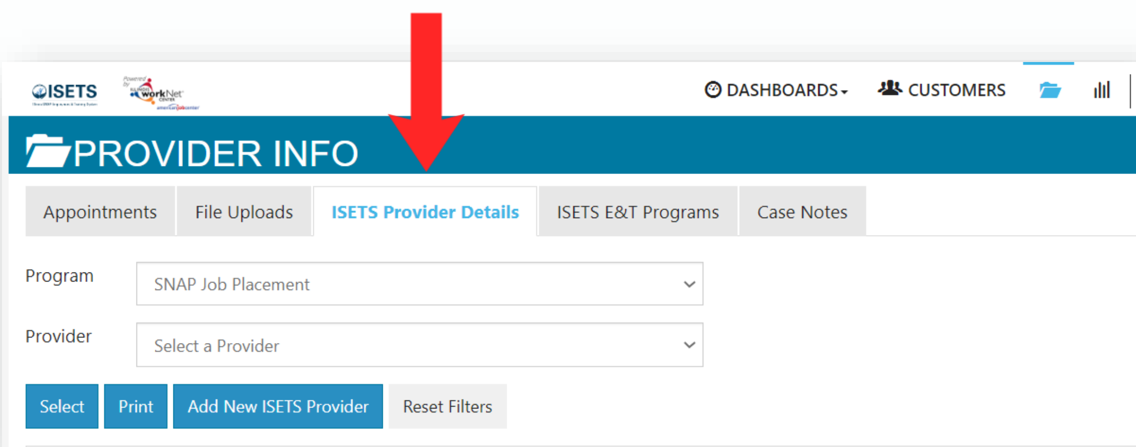
1. Select ISETS as the Project for the first dropdown field.
2. Select the appropriate Program and Provider name.
3. Click “Upload File”
4. Select type of upload category
5. Select a file to upload
6. Add a description of the file so that each file doesn’t have to be opened.
7. Click the Upload button.



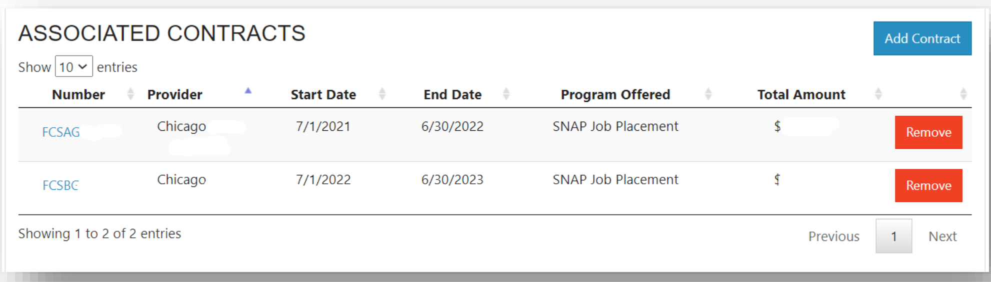
ISETS Provider Details

This tab represents grant specific information. Access is granted to Providers participating in that grant. Access to edit information is limited to IDHS staff and designated Provider Management staff. Items in the tables can be filtered by clicking the column header.

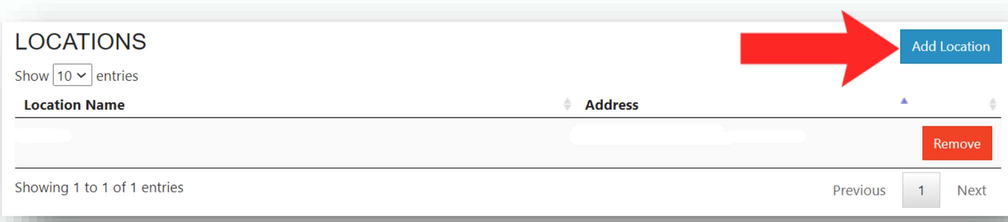
1. Select the Project and select Provider and click “Select”.
2. The “Add New Provider” button allows a new grantee to be added to the system. (Available only to IDHS Super Users)



The **Associated Contracts** section contains IDHS contract information. This section can only be edited by IDHS Super Users and Billing Managers. IDHS staff enters the initial contract information. Billing Managers are responsible for updating the contract information. This information should be updated any time a contract is amended. If you notice that a contract is incorrect or has been amended and has not been updated, please check here and contact your Billing Manager or submit a Help Request ticket to report the change.

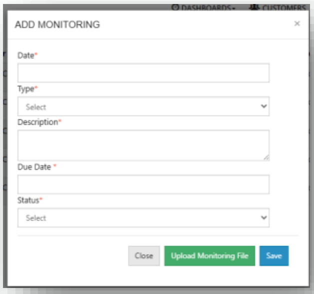


The **Locations** section lists program locations where a Provider serves SNAP customers. Each Provider partner should have at least one location added. Programs are assigned by location. IDHS uses distance from program to participant as one factor to match when making a referral to a partner agency.



To add a location:

1. Click on the “Add Location” button.
2. If not available to be added, submit a Help Request ticket to have your location added to the Illinois WorkNet database of Provider locations .



The **Monitorings** section lists periodic performance and compliance audits of the program/contract performed by IDHS. These can only be entered by IDHS Administrative staff or IDHS Provider Managers.

1. Click on Add Moniroting
2. Choose the Type: No corrective action required, Recommendation, or Finding.
3. Add a written executive summary in the Description

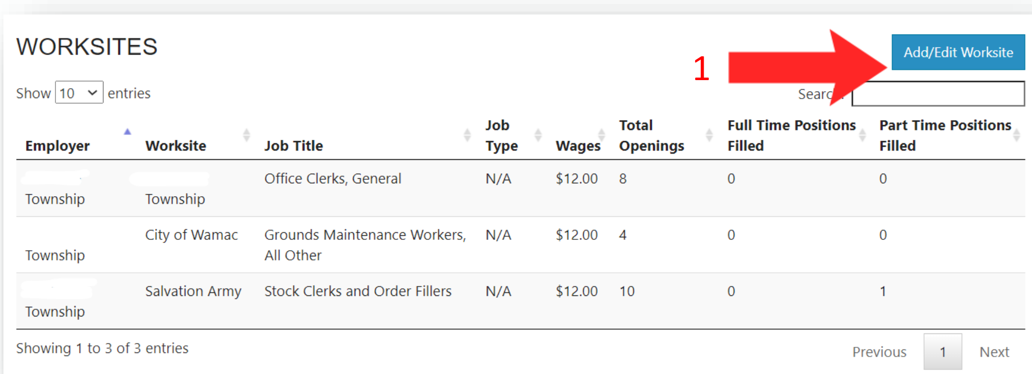
1. Add the Due Date
2. Choose the Status: Open or Closed

*If a new Monitoring is added, a copy of the Performance Improvement Plan document (linked in this section) must also be uploaded to the File Uploads section for reference.

If a Provider would like to respond in writing to a Monitoring, they may add that information to their Organization Case Notes, or they can upload it to the Uploads section.

The **E&T Programs** section contains information related to the E&T programs offered by the Provider. These are only programs which are directly related to IDHS contracts. More detailed information about E&T Programs for each Provider can also be found in the next tab: “ISETS E&T Programs”. See the next section for that information.

The **Worksites** section contains information about worksite placements. As opposed to Employment Placements, worksites are only locations/employers where E&T Work Experience Activities or Earnfare/OJT takes place.



WORKSITES

1

Add/Edit Worksite

Show 10 entries

Search:

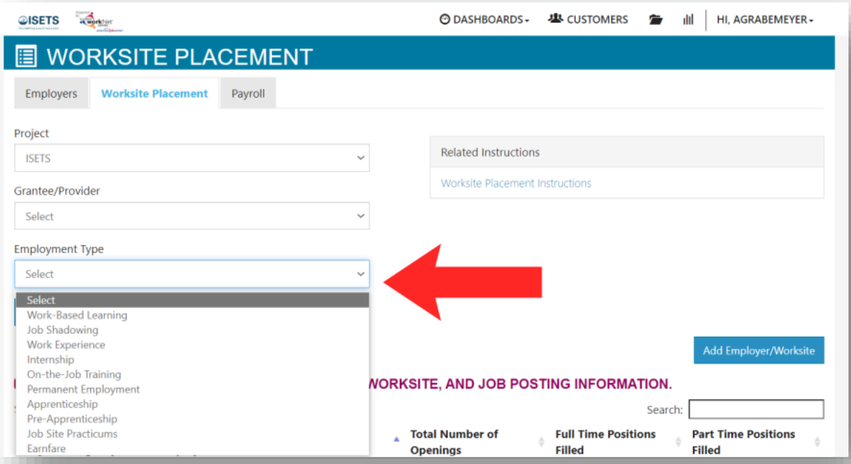
Employer	Worksite	Job Title	Job Type	Wages	Total Openings	Full Time Positions Filled	Part Time Positions Filled
Township	Township	Office Clerks, General	N/A	$12.00	8	0	0
Township	City of Wamac	Grounds Maintenance Workers, All Other	N/A	$12.00	4	0	0
Township	Salvation Army	Stock Clerks and Order Fillers	N/A	$12.00	10	0	1

Showing 1 to 3 of 3 entries

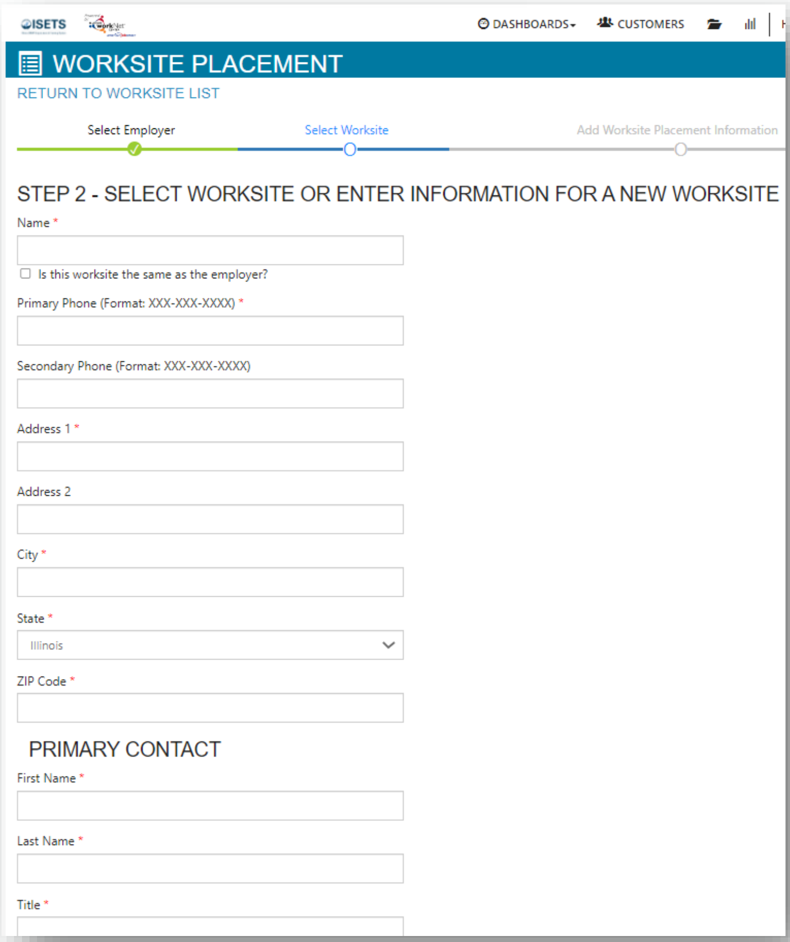
Previous 1 Next

To add a worksite (for reference when working with Providers):

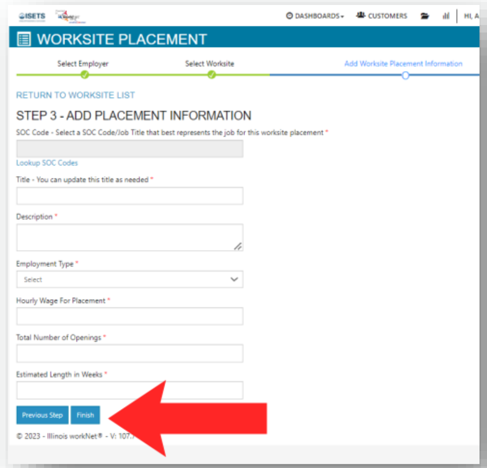
1. Click on the “Add/Edit Worksite” button. This will load a new page titled “Worksite Placement”.
2. Select ISETS as the Project and select the appropriate Provider and Employment Type from the dropdown lists. *Note: if you do not select an Employment Type, all employment types will be listed.



3. Click on “Add New Worksite” to add a new Worksite or click on the name of the worksite in the resulting list to edit that worksite.
4. If you are adding a new worksite, you will be taken to a page asking you to “Select Employer or Enter information for a new Employer”. Choose your Provider as the Employer by clicking the blue “Select” button next to your organization’s name.
5. In the next page, select an existing worksite or click the “Add New Worksite” button.
6. Enter all information including a Primary Contact for the worksite and click on the “Next Step” button.

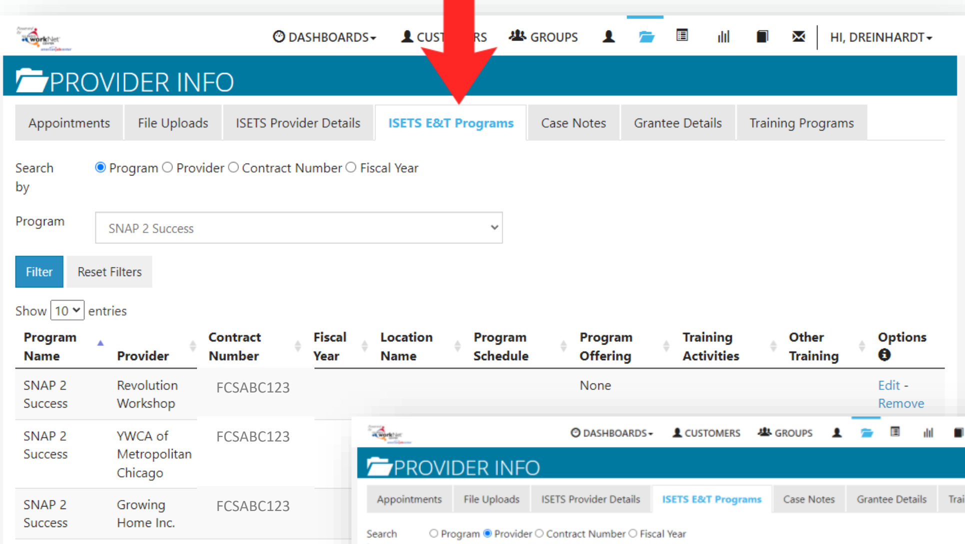


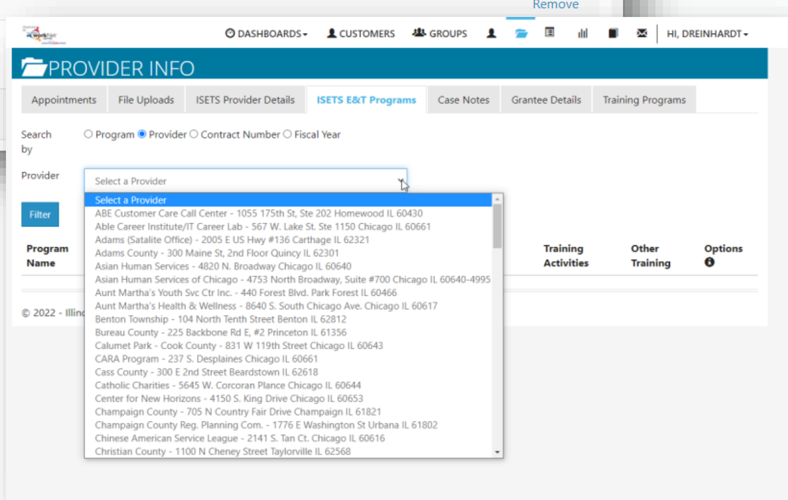
7. The next screen will prompt you to add the placement information. This is the actual job your customer will be doing at the worksite.
8. Click the “Finish” button.



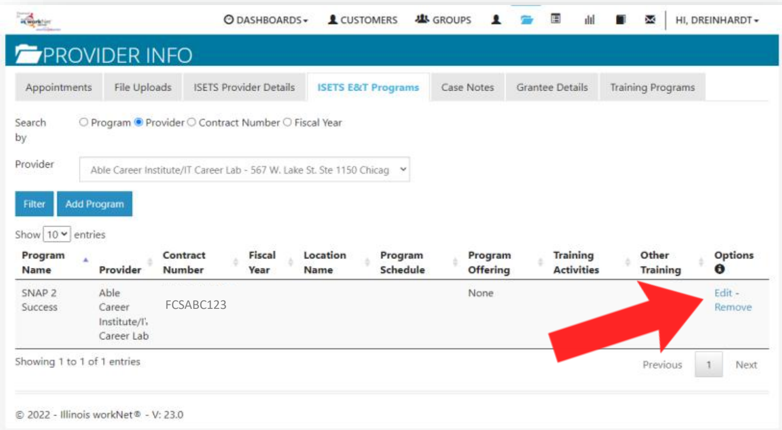
ISETS E&T Programs

This tab represents program specific information. You can filter by clicking the radio buttons near the top of the page. Choose the type of program, the Provider name, Contract Number, or Fiscal Year and click “Filter”. Program information may be viewed or edited based on user access levels.





1. To remove the program click on “Remove”.
2. To edit program information, click on “Edit” next to the item you want to edit on the resulting list. A new page will load with all of the program details.



Best Practice

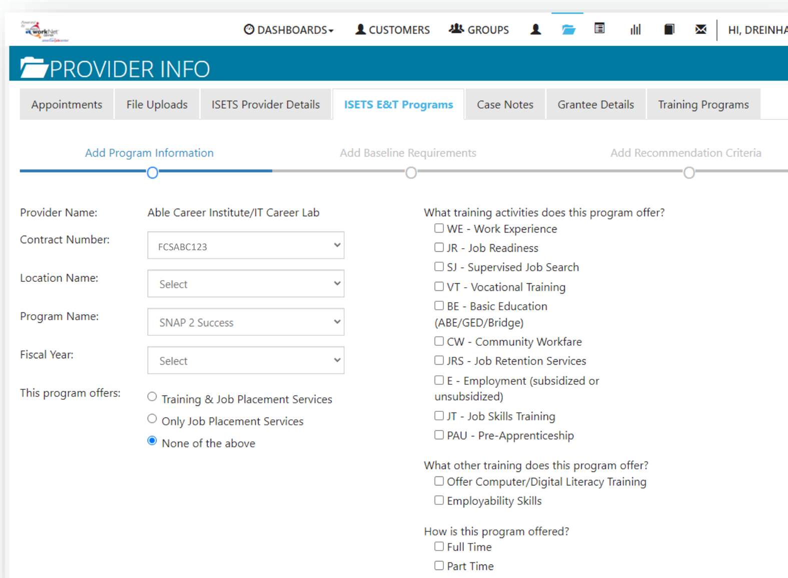
Provider Managers should NEVER remove any programs without consulting with their manager. Removing a program could result in errors in a contract or FY data reports. Programs for past years should never be removed.

IDHS staff may have added basic information from the contract, however the specifics of a program must be edited by Provider Program staff or a Provider Manager to ensure accuracy.

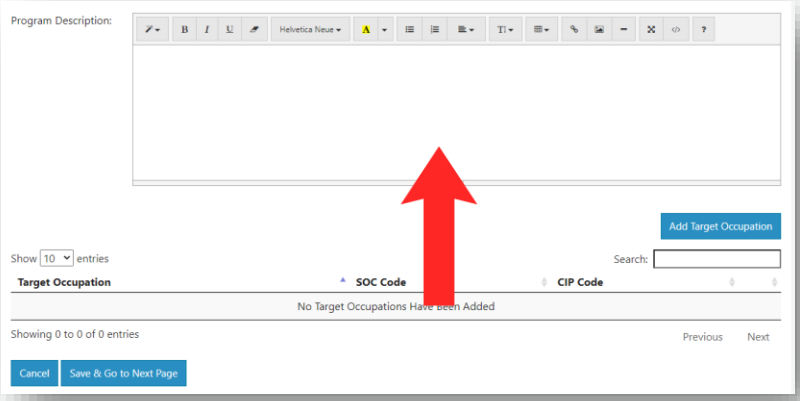
*Note: this information is used to match a program to customers seeking services during the referral process, so please help Providers choose answers based on which customers would best be served by this program.

Multiple programs may be entered under the same contract if they serve different types of customers or serve customers in different locations.

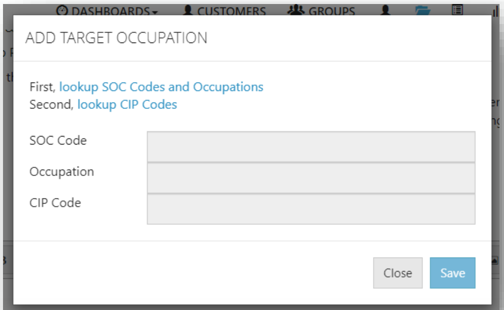
1. Make sure the correct contract number is selected.
2. Choose the correct location where that program is administered.
3. Choose the correct Program type.
4. Choose the correct Fiscal Year. *Note Fiscal Years run from July 1 – June 30 of the following year.
5. Check all appropriate boxes for the activities a program is contracted to provide to customers through this program.

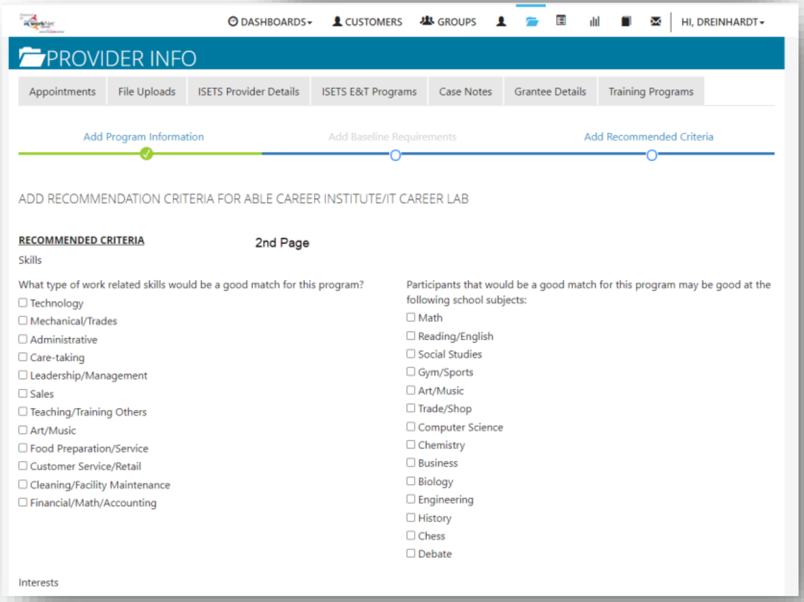


1. Check boxes for Full Time and/or Part Time.
2. Enter a program description. You may enter anything here that describes your program to someone looking to possibly participate or refer a customer to you. This text will show up in the referral box when matching with customers.



3. Add a Target Occupation only if your program targets a specific job or industry.
4. Click “Save and Go to Next Page”.
5. Check the appropriate boxes to add criteria that will help match participants to the program when IDHS makes a referral to the agency. If a program is appropriate for everyone, check all of the boxes to ensure a program is matched with the largest number of customers.
6. Click Finish





When a new program/fiscal year begins, each Program will need to be associated with the new FY contract by the ISETS Manager. This will allow referrals and enrollments to be associated with the new program. This is typically done the morning of July 1.

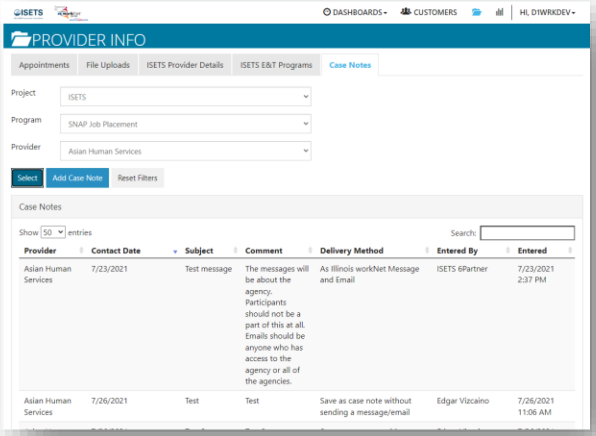
Case Notes

This tab contains case notes associated with a Provider agency, grant or staff – NOT individual customers.

To view case notes:

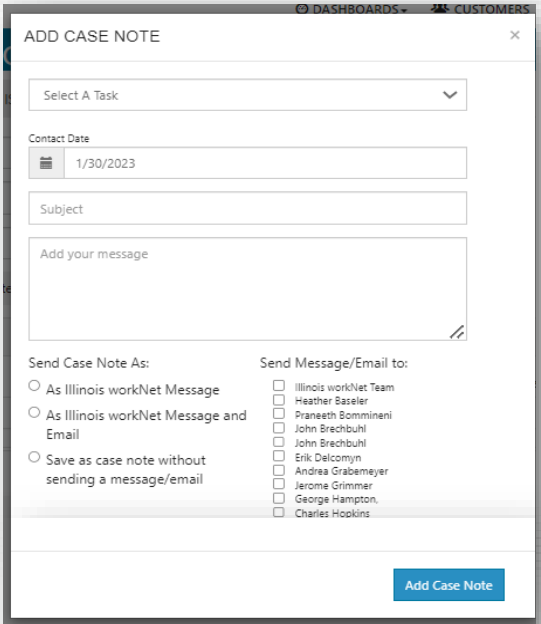
1. Select ISETS from the Project dropdown.
2. Select the appropriate Program type and Provider from the drop-down menus.
3. Click "Select".

You may filter case notes by clicking on the top of any column.



To add a case note:

1. Click the "Add Case Note" button.
2. Select a task about which the case note is being written.
3. Type a subject
4. Type a message
5. Select how the case note is to be saved.
6. If being sent as a message, select to whom the message is to be sent.
7. Click the "Add Case Note" button at the bottom.



Best Practice

Any time IDHS staff meets with or attempts to contact a Provider a case note should be added . Examples of a good time to make a case note are:

•Findings during a monitoring (Corrective Action Plan)
•Findings during a Staffing meeting
•Notes from a 4334 meeting
•Findings/errors found during a data audit
•Updates to a contract
•Notes from a meeting with a Provider to document concerns or agreements
•Attempts to contact an unresponsive Provider

Best Practice

Six essential things every case note must include:

1. Date of entry (ISETS automatically records this)
2. Date the contact took place (this is not necessarily the same as 1.)
3. Type of contact (phone, office visit, third party contact, virtual meeting, employment verification, referral)
4. DAP:
    1. Data – what you are told, what you observed, what happened
    2. Analysis – your professional opinion on what the situation is, what is helping/hindering the process.
    3. Plan – your plan for moving forward, your solution, or resolution
5. The person making the note (ISETS automatically records this for you)

Other guidelines to follow:

- To correct an error, enter another case note explaining that the previous note is in error. Deleting case notes is not a best practice.
- To add something your forgot, enter another case note and write “Addendum:”
- If you write a note out of sequence, make sure you note that the case note is “out of order”.
- Refer to yourself in the 2nd person “This writer” or 3rd person as your title and initials “Case Manager RP”.
- Refer to the customer or participant by that term or by initials.
- Refer to 3rd party contacts by full name and if possible email or phone.
- Refer to others in your organization by title and initials “Manager DC”
- Never reference other customers/participants in a file that is not their own.

ISETS Dashboard

All customer data in ISETS is displayed on a dashboard. This dashboard provides a window into

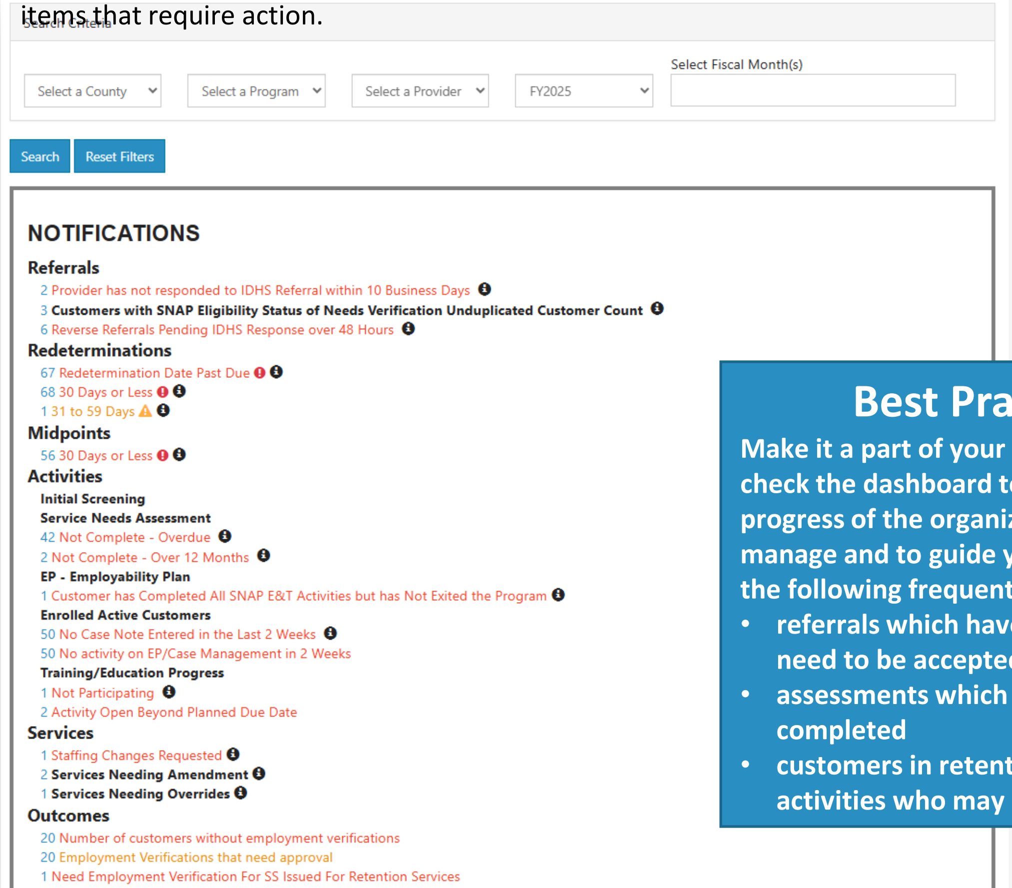
- how customers are moving through the stages of a program
- how an organization is performing measured against contractual benchmarks
- what action or next steps need to be taken with customers

Because the dashboard contains a lot of data, it may take longer to load. Please be patient and allow it a few minutes before assuming it isn't working or hitting refresh.

You may filter the dashboard by Region, Provider, and/or Fiscal Year.

Notifications

The first section called "Notifications" contains a collection of data counts which require your attention. This section is at the top for your convenience and to grab your attention. Red items require immediate action, usually by the Provider. Yellow items require action soon, usually within 30 days. Best practice is to review this section at least weekly and reconcile any items that require action.



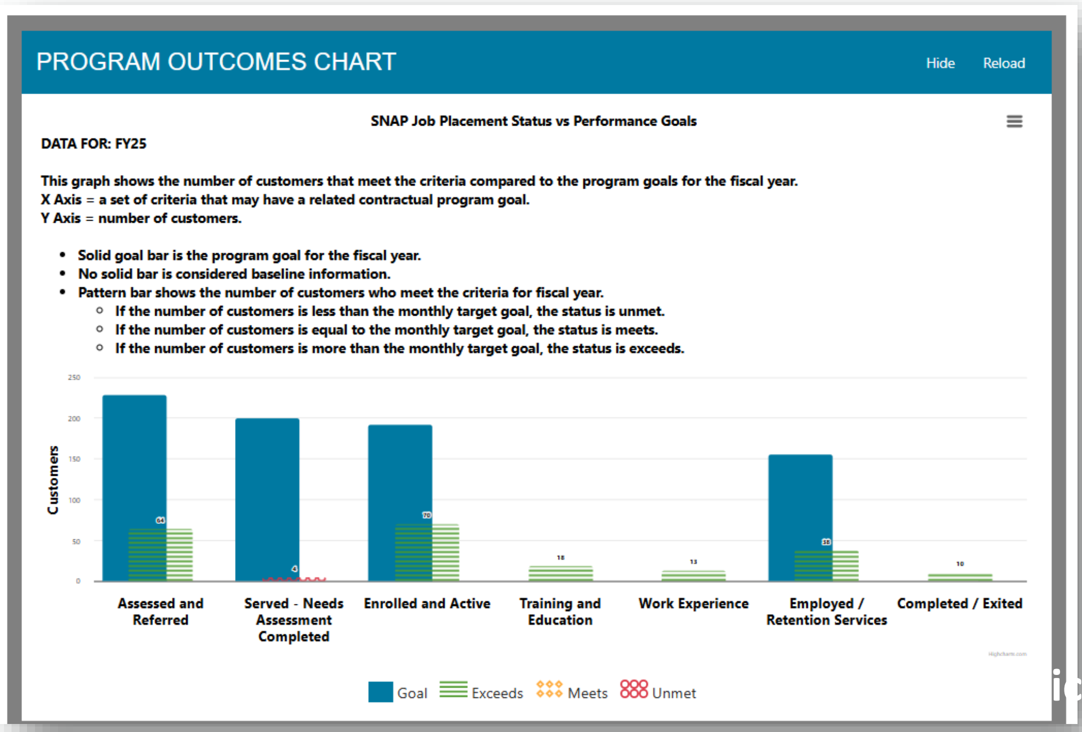
Best Practice

Make it a part of your daily routine to check the dashboard to see the progress of the organizations you manage and to guide your work. Check the following frequently:

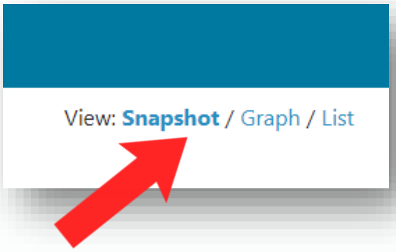
- **referrals which have been sent or need to be accepted,**
- **assessments which need to be completed**
- **customers in retention or other activities who may need follow-up.**

Program Outcomes Chart
This bar graph is a year-to-date count of how many customers a Provider has in various categories. The blue bars labeled “Goal” represents the Provider’s program year goal for that category. This goal is taken directly from the contract that was entered into the system. If you believe there are any errors in the goal numbers, please review the Provider’s contract.

The chart legend shows which colors represent progress toward that goal.



Below this graph are sections with additional data. Each of these sections can be viewed as a “Snapshot”, a “Graph”, or a “List”. To change your view, click on the linked words at the upper right corner of the section. Different data may be available in different views.



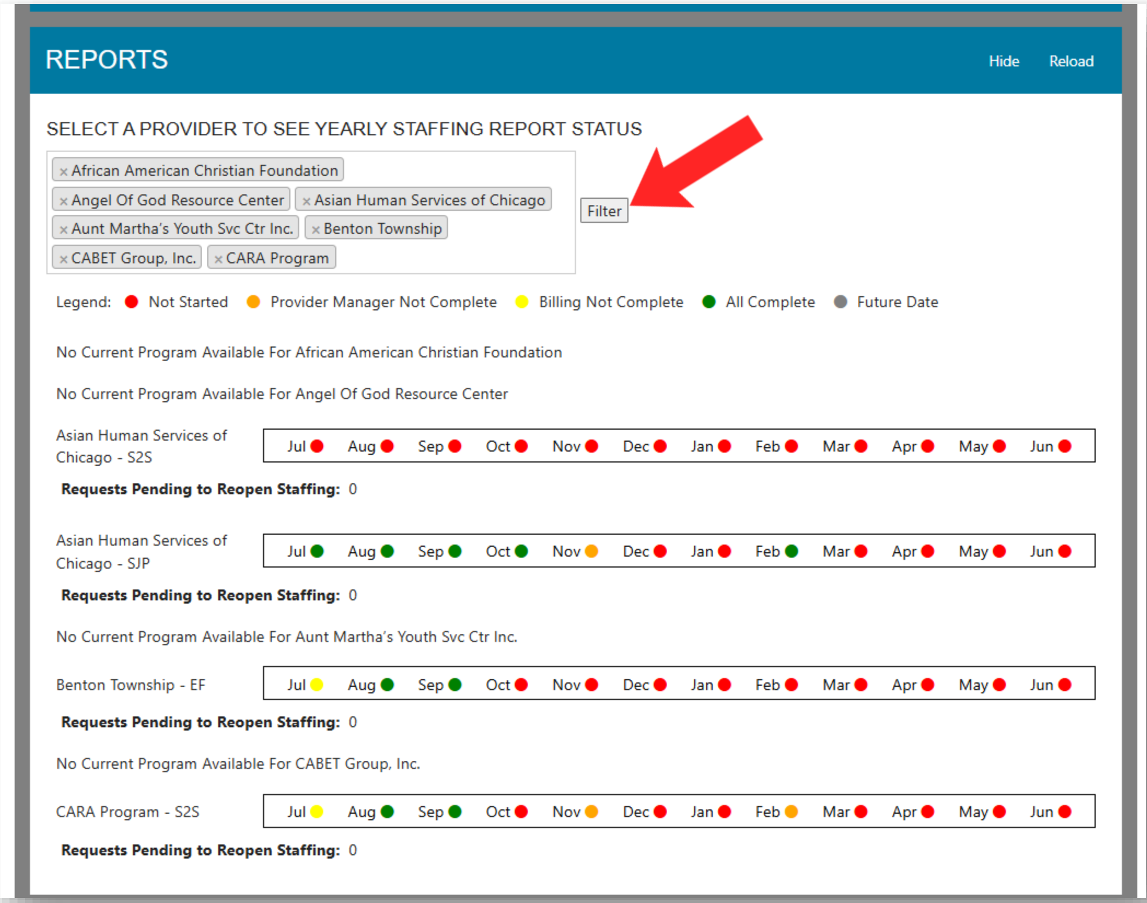
Some of these will be listed as “Good” (green) indicating that no action needs to be taken. Some may be listed as “Needs Action” (yellow) which means that an action may be pending. Some may be listed as “Red Flags” (red) which means that action is overdue.

It is recommended that Provider Managers review the dashboard information for their Providers at least monthly in preparation for their monthly Staffings.

Further is an explanation of the lower sections on the dashboard that contain more detail.

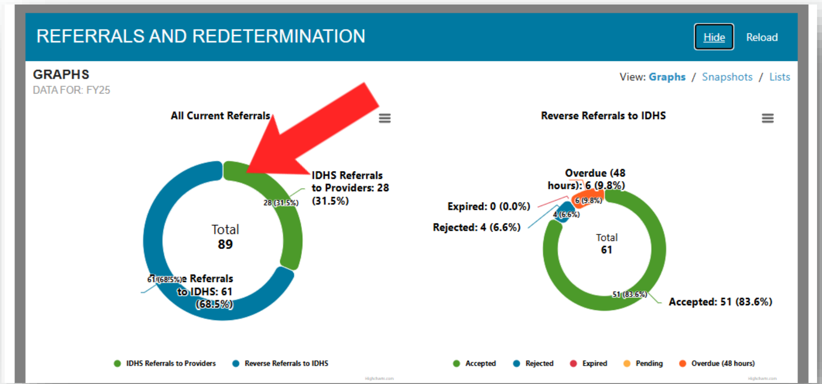
Demographics
This section gives a breakdown of the selected FY customers enrolled by ethnicity, race, age, and gender.

Reports
This section gives an accounting of monthly reporting and the status of each report. To view report statuses, click on the input field and select which Providers you would like to include then click “Filter”. You will see a list load by Provider that includes color coded status on each month’s reporting. Use this as a quick visual guide to ensure monthly reports are completed timely.

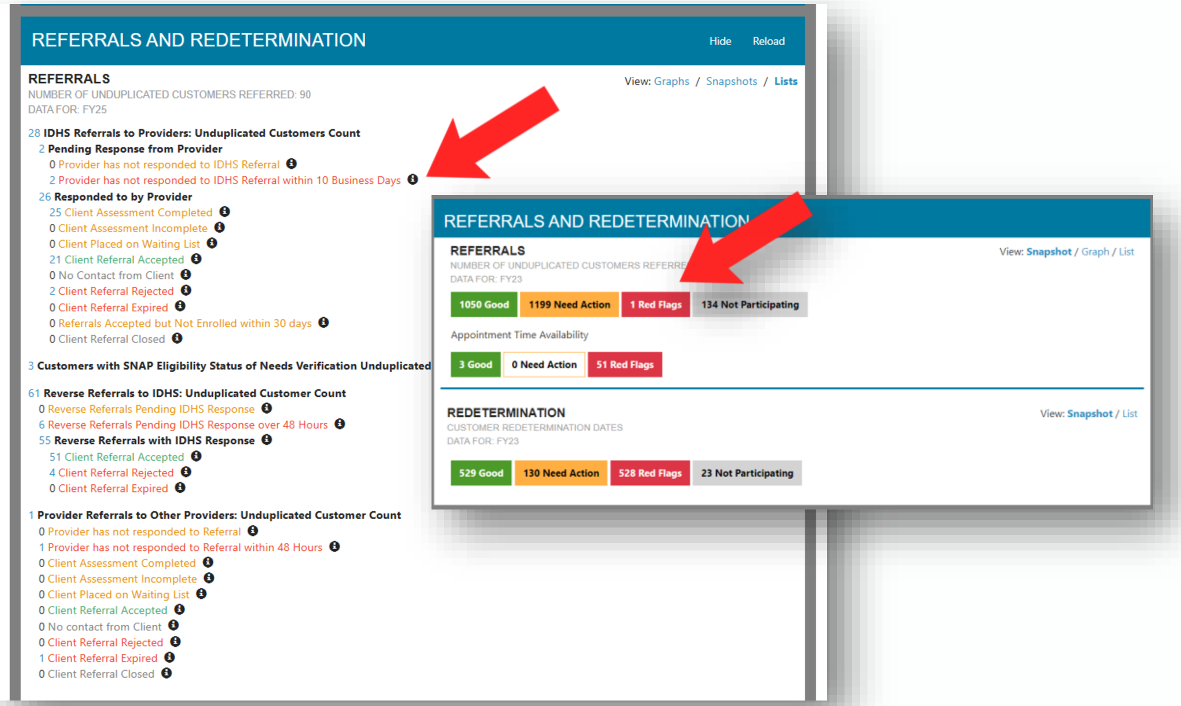


Referrals and Redetermination

This section gives an accounting of how many referrals an organization has sent, received, accepted, or rejected. The first graph shows all current referrals and how many are Referrals to Providers and how many are Reverse referrals. The second graph shows only Reverse Referrals to IDHS and their status. For any of these graphs, clicking on the graph section will open a list of the customers included in that category (a drilldown).

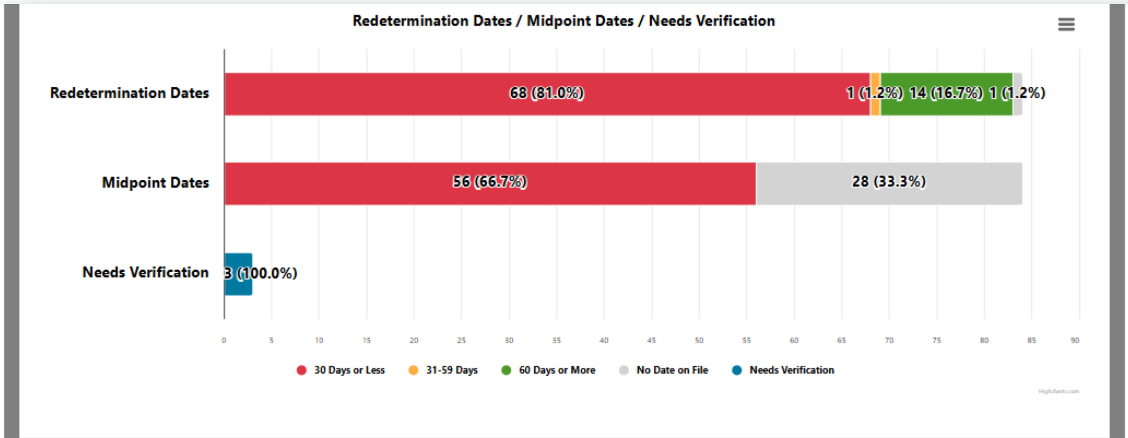


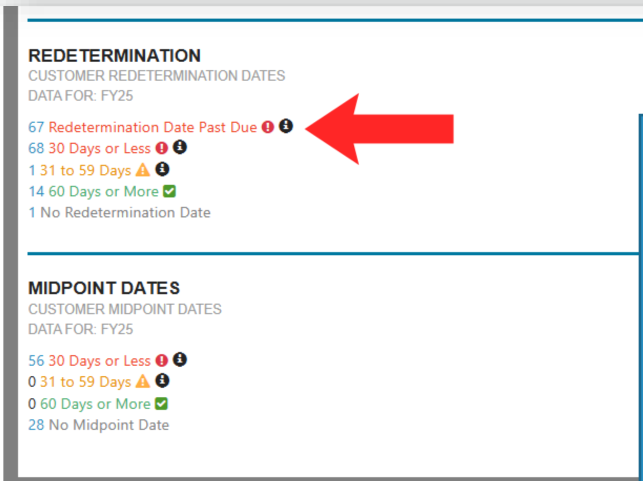
In the case of referrals, if action is overdue, these will be listed as “Overdue” in graphs or lists or “Red Flags” in the snapshot view. Please take action (or prompt Providers to take action) on these referrals immediately.



The Redetermination list tells an organization how many people have a redetermination date (to renew their SNAP benefits) within 60 days. Those with less than 30 days until their redetermination will be included in the red portion of the graph or listed in red text in the list view. Red items indicate that these customers may need to make an appointment with an FCRC to renew their benefits or they will lose them and their E&T eligibility. It is recommended that Providers remind their customers when these dates are approaching.

To view the list of customers in each section, simply click on that graph section, the colored block in the snapshots view, or the linked blue number in the list view.





Best Practice

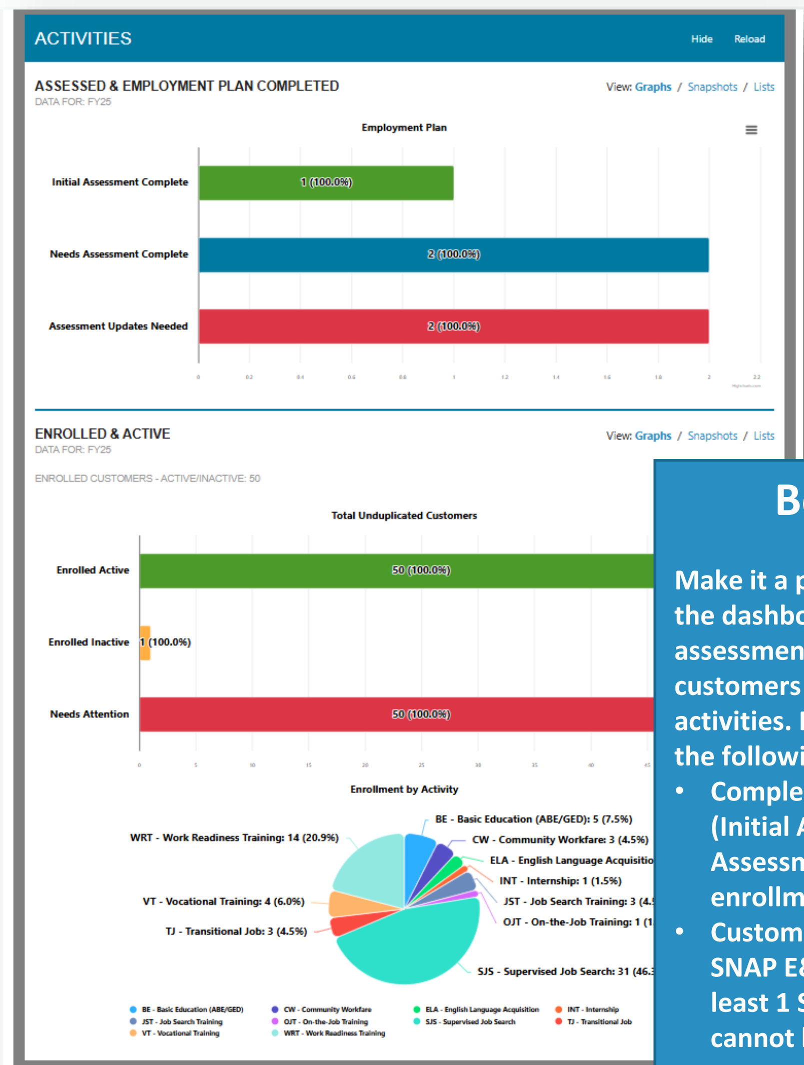
Make it a part of your routine to check the dashboard at least weekly. Providers are required to do the following:

- **Contact referred customers within 48 business hours**
- **Respond to a referral within 5 business days**
- **Remove customers from their caseload who are no longer eligible for SNAP E&T services**

Activities

This section indicates how many customers have been assessed and have an EP completed, how many are enrolled in E&T and active, and how many are enrolled in Training/Education SNAP Activities with an agency.

Clicking on the List view for Assessments will give a more detailed list of how many customers have completed assessments and how many still have incomplete assessments. Clicking on the List view for Enrolled & Active customers will give an accounting of customers enrolled in SNAP E&T activities.



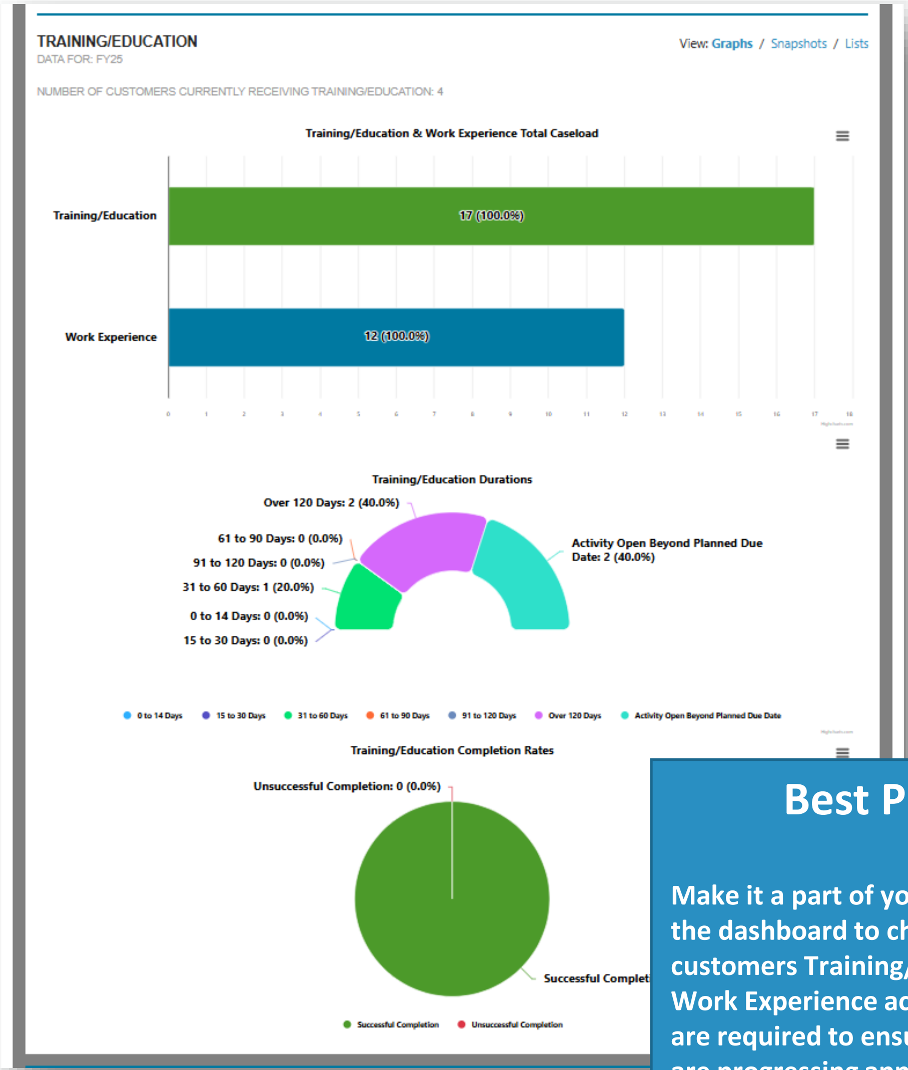
Best Practice

Make it a part of your routine to check the dashboard to ensure all assessments are completed and customers are engaged in appropriate activities. Providers are required to do the following:

- **Complete the entire assessment (Initial Assessment + Needs Assessment) within 30 days of enrollment.**
- **Customers enrolled and active in SNAP E&T must be engaged in at least 1 SNAP E&T activity (SJS cannot be a standalone activity).**

Training/Education

This section contains data on how many customers are enrolled in SNAP E&T Training/Education and Work Experience components. There are also graphs indicating the duration customers spend in Training/Education components as well as completions. Clicking on the List view of the Training/Education data will give a breakdown of customer progress and the duration of their Training/Education activity.

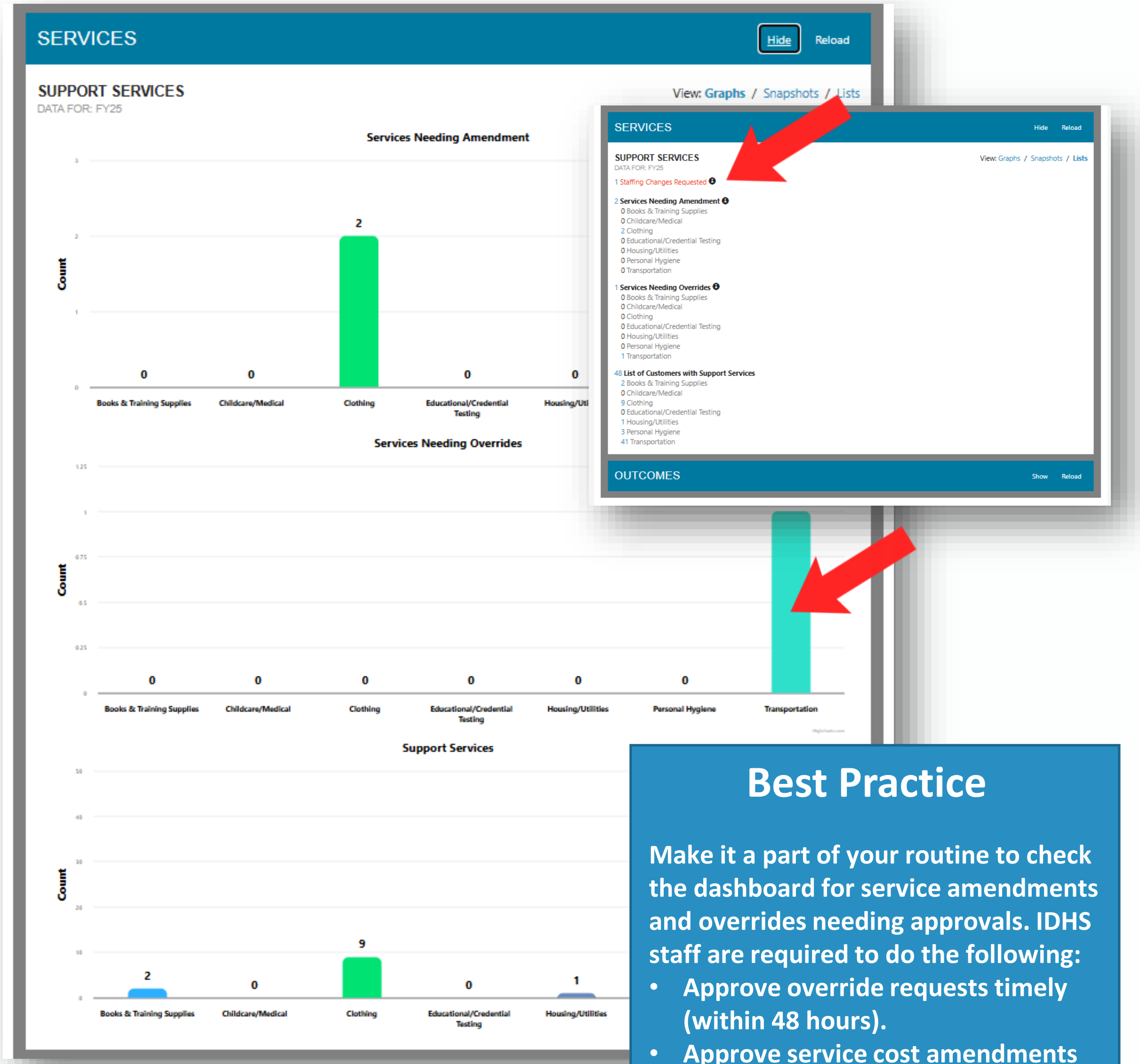


Best Practice

Make it a part of your routine to check the dashboard to check the progress of customers Training/Education and Work Experience activities. Providers are required to ensure that customers are progressing appropriately and that customers are gaining employability as a part of participation in these activities.

Services

This section contains data on Support Services given to customers throughout the program year. The first graph shows services requiring approval of amendments. The second graph shows support services requesting overrides that need to be approved. The third graph shows how many supportive services have been given in each category. Clicking on the List view for Support Services will give a count of each instance broken down by type of service.



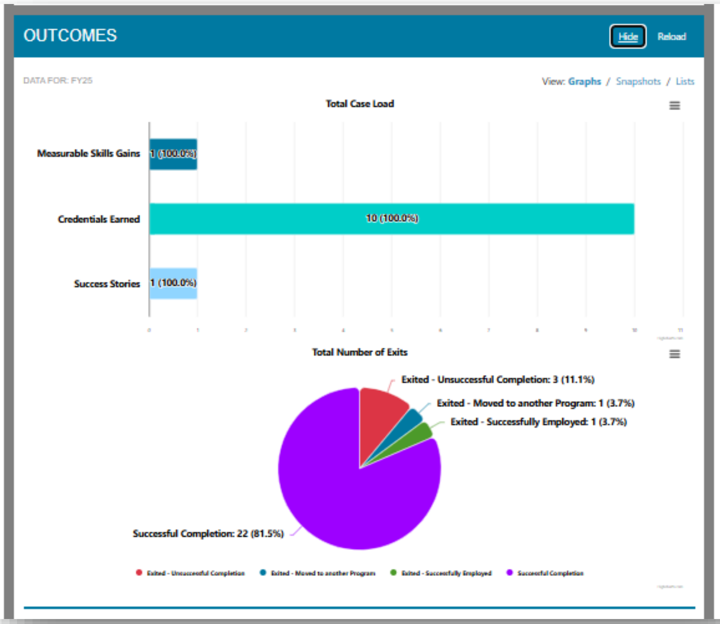
Best Practice

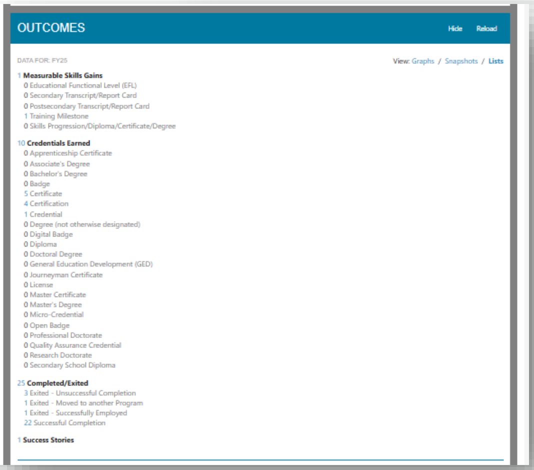
Make it a part of your routine to check the dashboard for service amendments and overrides needing approvals. IDHS staff are required to do the following:

- **Approve override requests timely (within 48 hours).**
- **Approve service cost amendments as a part of your regular staffing routine.**

Outcomes

This section contains a breakdown of customer outcomes including skills gains, credentials, success stories, exits and employment. The first graph shows how many customers have gained skills, earned credentials, or have success stories documented. The next graph shows how many customers you have exited from the program and the reason. Clicking on the List view will list a count of customers who have gained skills; credentials like Apprenticeship Certificates, Diploma/GED, Associates, or Bachelor's degrees while in the E&T program; and have completed SNAP E&T and the reason for their exit. Measurable Skills Gains, Credentials Earned, and Post Exit Employment are all required for Providers to enter in ISETS. Success Stories are optional yet helpful to IDHS.



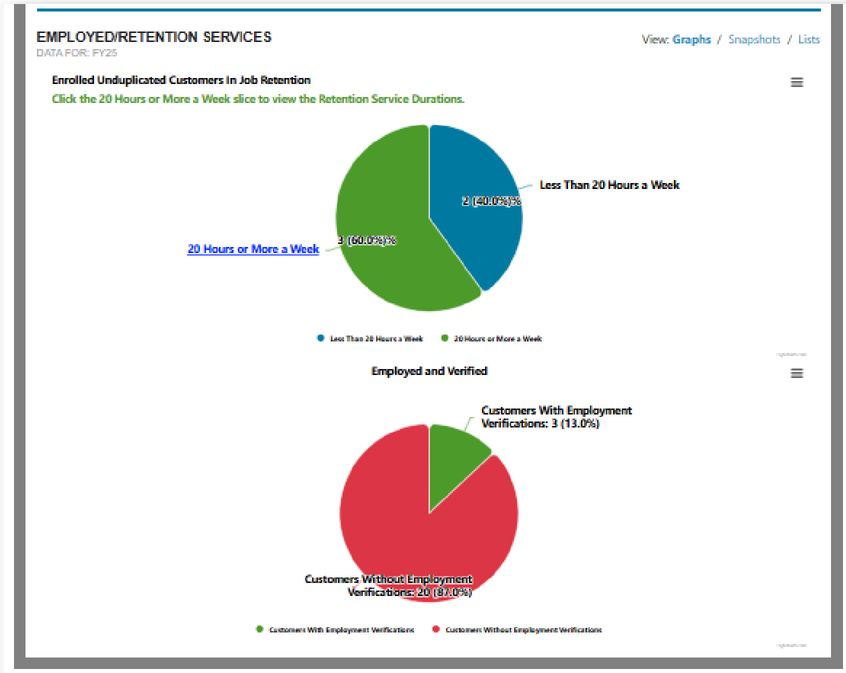


Clicking on the list view will give a list count of each type of possible skill gain, credential, and exit reason.

*Note: All data displayed in the dashboard is dependent on the data an organization enters into the system. For example, an Associates degree is not an official SNAP E&T Activity and is optional to enter in ISETS. However, credentials and skills gains for SNAP E&T activities is required.

More information on ensuring the accuracy of Provider data is outlined in another section.

The Employed/Retention graph shows unduplicated customer counts of how many customers have gained employment in the FY and what percentage are under or over 20 hours/wee. The second graph shows how many employment instances entered have verifications and how many do not. Clicking on the List view for Employed/Retention Services will give a count of customers with Employment placements entered, those who are receiving Retention services, the duration, and the wage ranges.



EMPLOYED/RETENTION SERVICES
DATA FOR: FY25

23 **Employed and Verified**
- 3 Number of customers with employment verifications
- 20 Number of customers without employment verifications
- 20 Employment Verifications that need approval

1 Need Employment Verification For SS Issued For Retention Services

23 **Wage Ranges**
- 0 $5.00 to $11.00 Per Hour
- 3 $11.01 to $15.00 Per Hour
- 12 $15.01 to $20.00 Per Hour
- 5 $20.01 to $25.00 Per Hour
- 2 $25.01 to $30.00 Per Hour
- 0 $30.01 to $35.00 Per Hour
- 1 $35.01 to $40.00 Per Hour
- 0 $40.01 to $45.00 Per Hour
- 0 $45.01 to $50.00 Per Hour
- 0 $50.01 to $55.00 Per Hour
- 0 Over $55.00 Per Hour

3 **Retention Service Duration**
- 0 30 to 59 Days
- 0 60 to 89 Days
- 0 90 to 100 Days
- 3 101 to 334 Days
- 0 Within 30 days of 365th day of Retention

0 **Employment - Post Exit**

Best Practice

Make it a part of your routine to check the dashboard and the progress of customers in Job Retention. Providers are required to do the following:

- **Contact customers at least every 30 days through 90 day JR and add case notes**
- **Upload employment verification within 90 days of a customer gaining employment**
- **Upload additional employment verification within 30 days of a supportive service being given to a customer in JR365.**

Best Practice

A Best Practice is to enter data as it happens (or as you receive it). Entering data in a once weekly or monthly session is not recommended. This ensures that the data in the system is up-to-date on any given day and that data entry is not an arduous task but simply part of the day-to-day use of the system.

IDHS will consider data in ISETS as Official. Any supporting documentation or reports submitted outside of ISETS will be considered as unofficial. If you make a mistake, correct it as soon as possible and if you need help to correct some data, please request help (see the Help Request section of this manual). A good rule of thumb is: "**If it isn't reflected in the ISETS system, it officially didn't happen**".

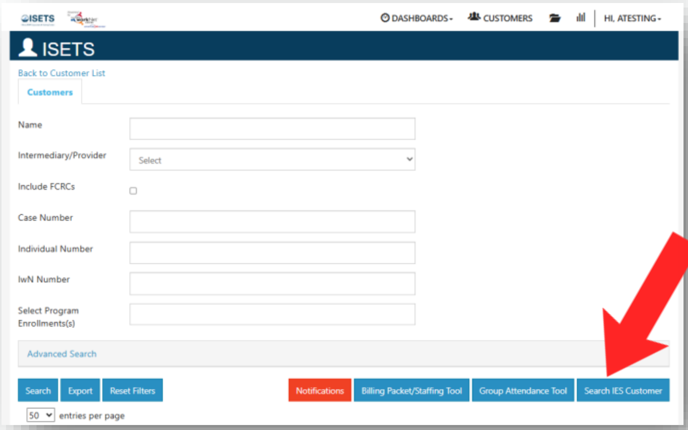
Viewing and Editing Customer Information

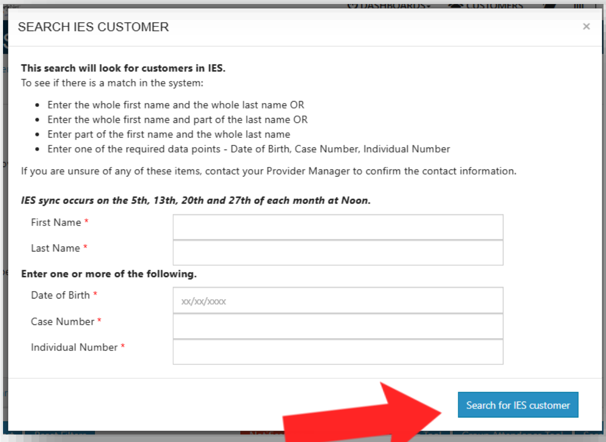
Customer data is imported on the 5th, 13th, 20th and 27th of each month at 12pm. This data comes from IES and is considered current.

It is the policy of IDHS that any customer data which needs to be updated MUST be reported directly to IDHS by the customer. Customers may do this by accessing their ABE (Application for Benefits Eligibility) account and submitting an update. Alternately, customers may contact an FCRC directly to officially change their contact information with IDHS. Name changes require a IL444-2149 form and must be completed by the customer. Any changes that take place will be entered into IES and then transferred to ISETS upon the next data import. We strongly recommend Providers enter a case note into ISETS when a customer changes their contact information lest that change take some time to take effect and anyone viewing the customer record can see the updated information in the meantime.

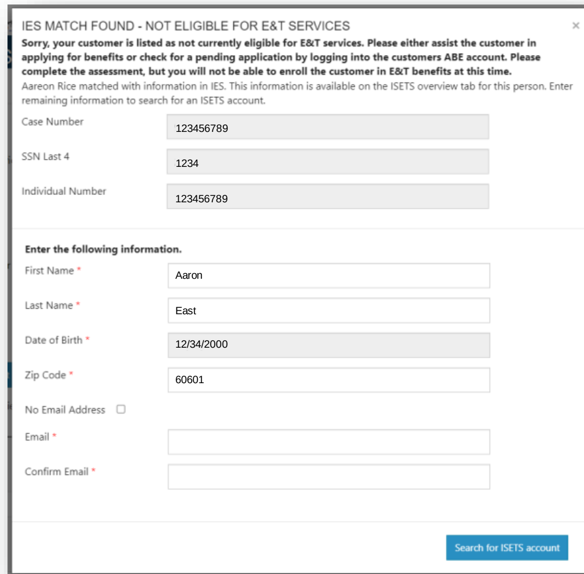
Finding a customer in ISETS

1. After you log into ISETS the default page is the "Customers" page.
2. If you want to add a customer to a Provider's case load, first look for a customer in the IES data (imported from IES twice a month), click the "Search IES Customer" button on the right.
3. A popup box will appear like the one to the right.
4. You must type a first name and last name. Please ensure that both names are spelled correctly.
5. You must also add one or more of the other fields to get a more specific match. Individual number is the best way to ensure that you find the correct individual you are looking for. Dates of birth must be two digits for the month and day and four digits for the year.
6. Click the "Search for IES Customer" button.

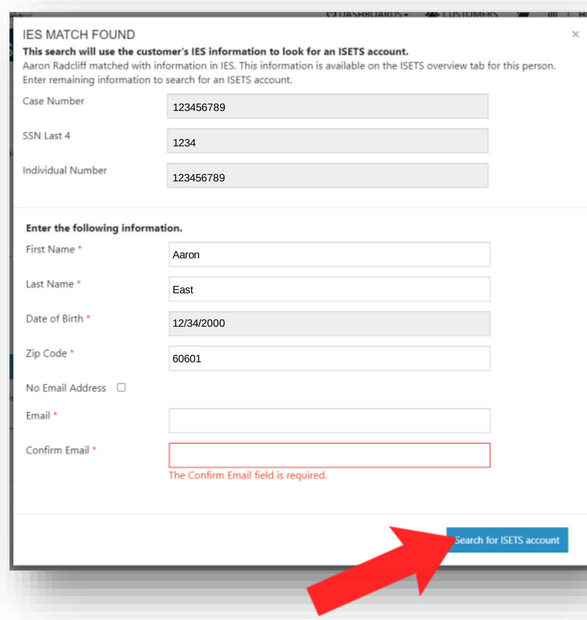




7. If you receive a message like the one to the right, it means that the person you searched for was found but that the data suggests they are most likely ineligible. In order to verify this, you should look them up in IES and confirm. Providers may contact their Provider Manager to verify eligibility before performing intake in this case.
8. If you would like to add a customer to an agency's ISETS customer list even though they were not in the IES data set, you can enter their email address and click "Search for ISETS account". *Note: this searches Illinois WorkNet for an existing IWN account associated with that individual.



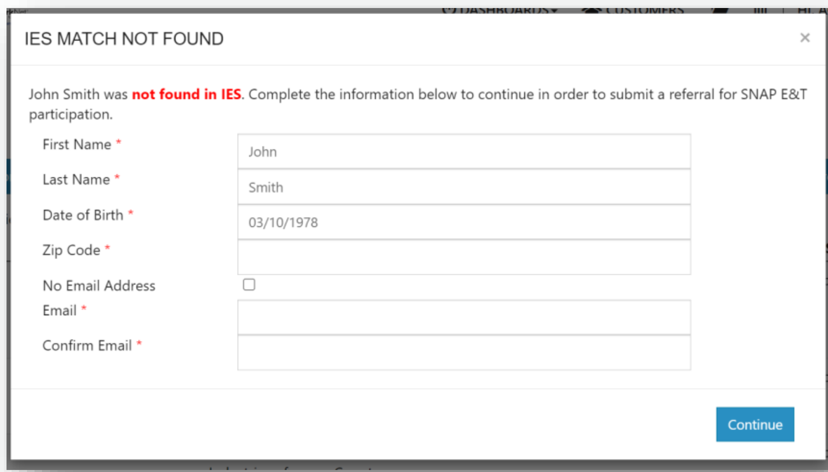
9. If you receive a message like the one to the right, the customer has been found in the IES data and you should continue by entering their email address and click the "Search for ISETS account" button.



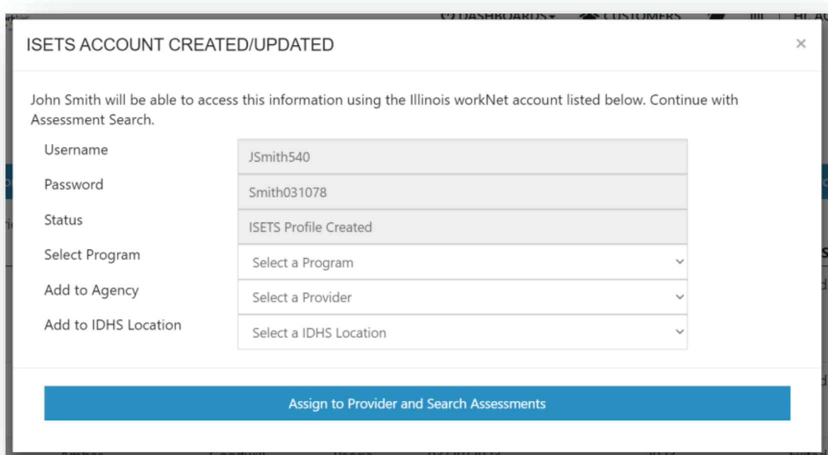
Must Do

If a customer is not found in the IES data, please double check the spelling of their name, case/individual number, and birth date. This information must be an exact match to the data in IES to sync appropriately later. If you still cannot find the customer in the IES data and you have checked IES to verify their personal information, IDHS staff may submit a Help Request ticket to notify ISETS staff the data is missing.

10. If you receive a message like the one to the right, the customer has not been found in the IES data. IDHS Staff may create a new customer file in ISETS by entering the information as it appears in IES. This should only be done if a customer is eligible for SNAP E&T. If the data is entered exactly as it is in IES, upon the next sync, the data will not conflict.

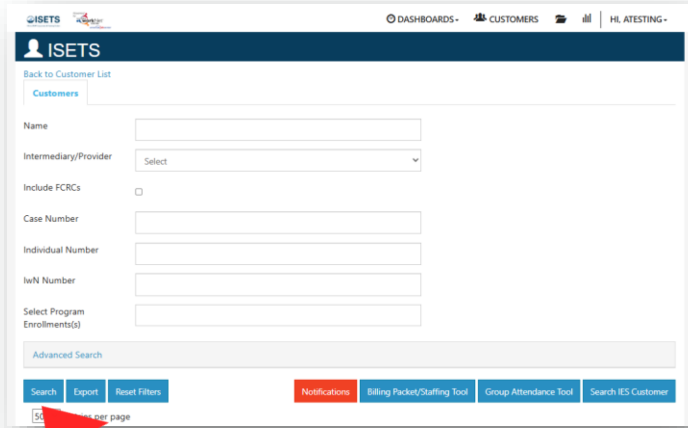


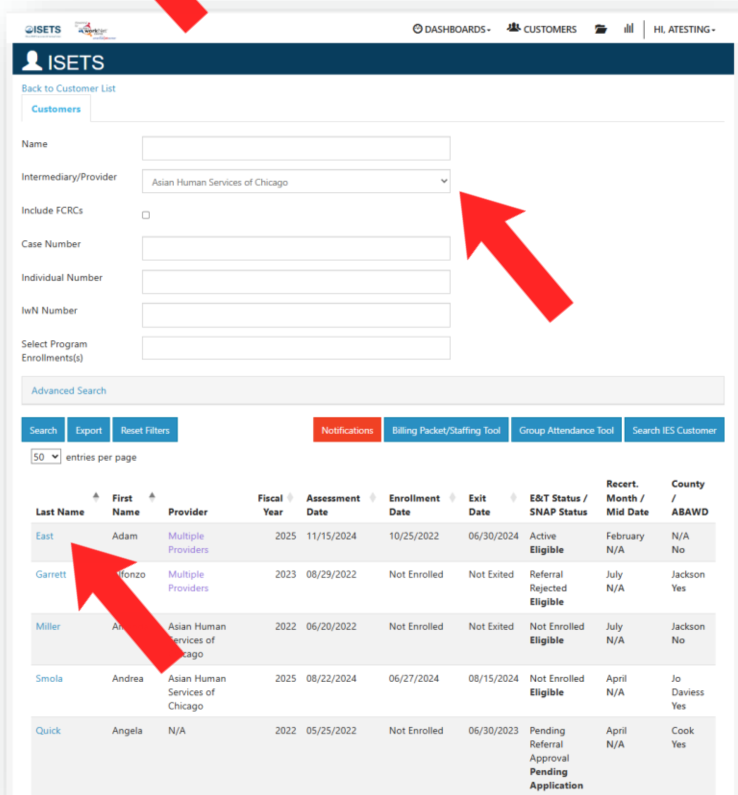
11. Then, once the customer is added to ISETS , you will see a confirmation screen where you can assign the customer to a provider. Choose the Program, Provider, and IDHS Location and click “Assign to Provider and Search Assessments”.



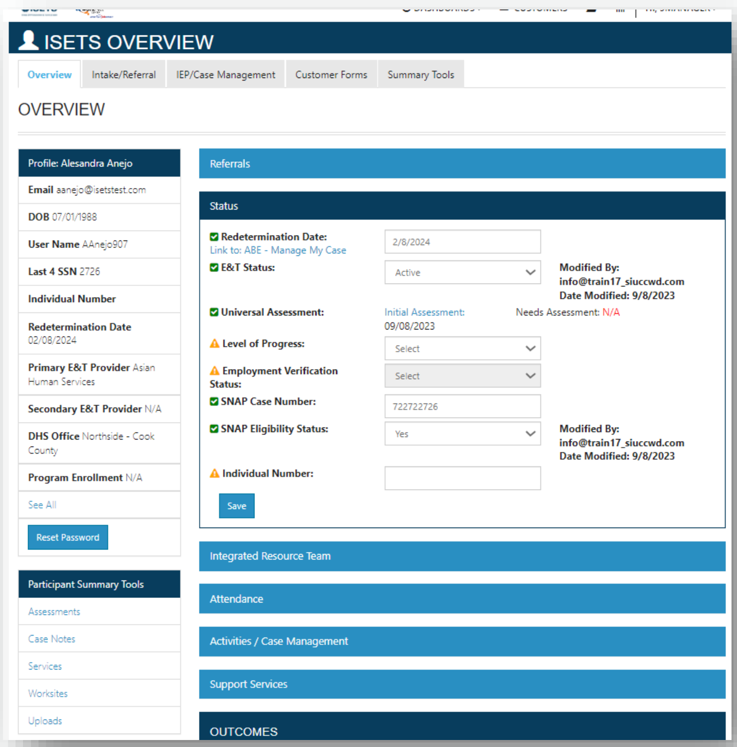
12. Instruct the Provider staff to search for the customer you just added and proceed with an assessment and referral.

1. To search for a particular customer you know is already in ISETS, type their name, case number, or individual number in the appropriate fields and click the “Search” button. *Note: Exact spelling is not required; if you use a first initial and last name the results will show a list of customers in ISETS which are a close match. You can select the customer that is the correct one from the list.
2. To see a list of all customers already associated with an agency, choose that agency from the “Intermediary/Provider” dropdown and click the “Search” button.
3. You will see a list of customers below.
4. To view a customer’s record, click on their last name which is blue and links to their customer record.





5. A new tab will open with the customer record. The default view is the "Overview" tab.
6. You will find Profile information on the left-hand vertical menu and quick links below that.
7. Any section with a light blue color is expandable but will be collapsed by default to save space.



Referrals Section

You will find Referrals in the Referrals section. Please refer to the [Making and Processing Referrals section] in this manual for more information about these.

Status Section

Status information about a customer's E&T involvement is in the Status section. This section includes the redetermination date for their SNAP case, the status of their involvement in SNAP E&T, the completion and date of their last assessment, level of progress, employment verification, SNAP Case Number, SNAP Eligibility status, and Individual Number. You may also see the SNAP Benefit amount here for some customers (Earnfare).

Fields which should be kept up to date by the Provider regularly are the E&T Status, Level of Progress, and Employment Verification fields. If one of these fields has a yellow triangle icon next to it, as above, that indicates that this field needs to be updated.

SNAP Eligibility Status and Benefit Amount should only be updated by IDHS staff.

Best Practice

If a customer is injured, sick, or otherwise needs to take a break from SNAP E&T, Providers can use the "Inactive" status. This should be for a maximum of 30 days as a best practice. However a customer is allowed to be marked as "Inactive" for longer. It is recommended that the Provider Exit the customer if they have been marked as "Inactive" for more than 30 days. All Earnfare customers should be exited at the end of the program year/fiscal year .

If a customer leaves SNAP E&T and is Exited, then returns to SNAP E&T later (45 days or more after exit), a new referral, new enrollment, and new activities must be added.

Status Definitions

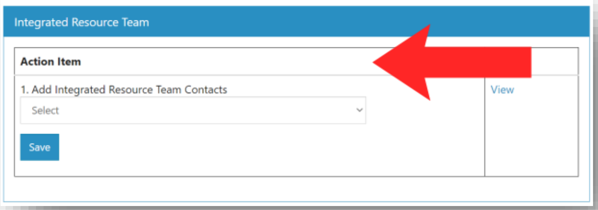
- **Inactive**: still enrolled officially in SNAP E&T but not participating (no attendance) temporarily. This field is only used for a maximum of 45 days after which this status needs to be changed. (limited to 30 days)
- **Active**: actively attending SNAP E&T Activities. Must have an “Open/Started” SNAP E&T Activity on their EP.
- **Exited**: No longer enrolled in SNAP E&T.
- **Retention**: Employed and participating in Job Retention services.
- **Pending Referral Approval**: referred but not accepted yet.
- **Wait List**: eligible but not enrolled in a program because the program is at capacity. (limited to 30 days)
- **Never active**: a customer was possibly recruited, assessed, and/or referred but never active in any SNAP E&T Activities.
- **Referral Rejected**: a referral was made but rejected.
- **Not Enrolled**: (default status) customer has not yet been enrolled in SNAP E&T.
- **IES Matched:** the customer was matched with IES (this is a temporary status used during the enrollment process only).
- **Initial Assessment Complete:** the customer has an initial assessment completed (this is a temporary status used during the enrollment process only).
- **Pending Activity Start Dates:** the customer has been enrolled but no activities have been started yet (this is a temporary status used during the enrollment process only).
- **Consent Revoked:** the customer has revoked consent for participation in the SNAP E&T program.

Integrated Resource Team Section

This section allows Provider & IDHS contacts to be added to a customer’s Integrated Resource Team (IRT). An IRT is the group of professionals working collaboratively with the customer and with each other to ensure the customer’s success in moving toward self sufficiency and meeting their goals. Anyone having contact with the customer or who might need to be notified via email of changes should be added to the IRT. Even contacts from other Providers who are working with the customer may be added to improve coordination. Anyone added to the IRT can be emailed copies of case notes.

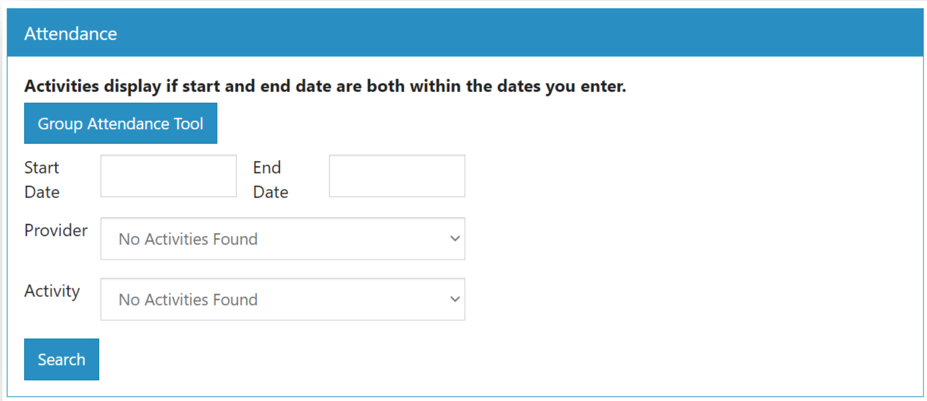
To add a team contact to a customer record, in the Overview page:

1. Click the dropdown menu,
2. select a person from the list and
3. click “Save”.



Provider Managers who would like to be added to their Providers’ IRTs must go to each customer record and add themselves. If a Provider Manager is no longer working with a Provider, they must remove themselves from all IRTs for that Provider.

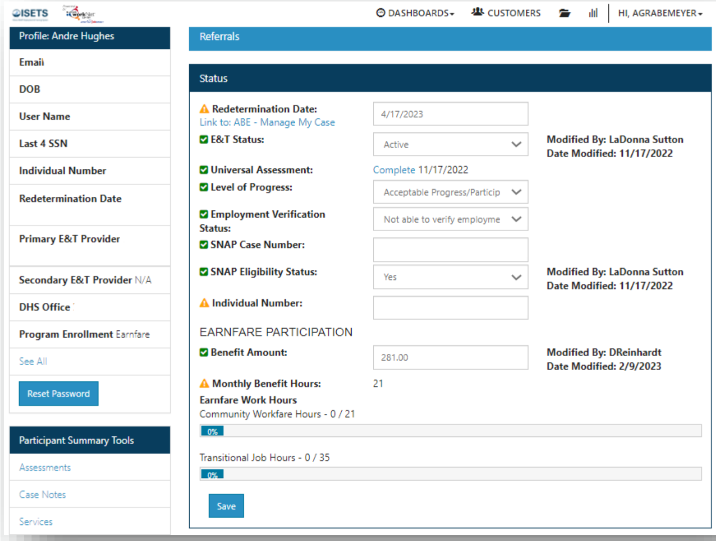
Attendance Section
This section allows a Provider to add an individual's attendance to their record. A Group Attendance Tool (best for entering a group learning session or orientation) is also available To use this, click on the "Group Attendance Tool" button. Attendance may only be entered for an activity in which the customer has been enrolled and has an "Started/Open" status and a start date.



Attendance may be entered by any Provider staff (or instructor) in ISETS or by customers in their Illinois workNet account. All attendance **must** be verified by authorized Provider staff to ensure that attendance is correct before saved as a final record.

Paper copies may be kept by a Provider but is not required to be uploaded to ISETS. A copy of attendance may requested by IDHS in the case of an audit. Therefore IDHS recommends Providers keep a copy at their facility in case these records are requested.

Attendance for Earnfare
Attendance for Earnfare customers must be entered separately for the Community Workfare Activity and the Transitional Job Activity. Progress toward completing required hours is calculated based on attendance and participation limits are calculated based on the number of months which include Transitional Job attendance hours.

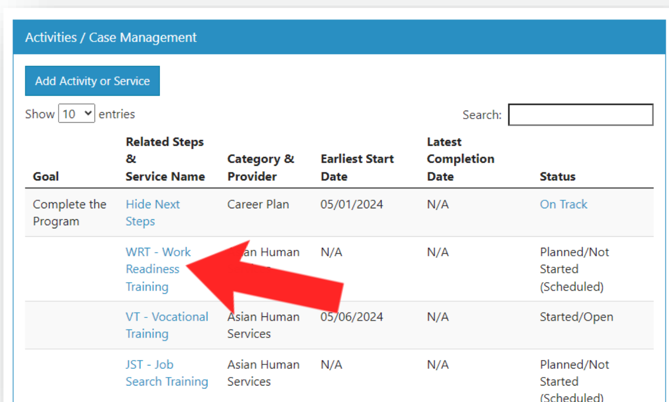


Activities/Case Management Section

This section contains the customer's Employment Plan (EP) Goals and the Activities or Services related to those goals. When first enrolled, a default goal is added to the EP to get a EP started. The goal is usually something generic like "Complete the SNAP Program" as seen here. Activities which are selected during enrollment (see Enrolling Customers later in this manual) are automatically added to this default goal with the status "Planned/Not Started" as seen below. Additional Activities and Services may be added after the initial enrollment. For instructions on how to do that, please see the sections in this manual referring to Adding and Managing Activities or Services in the Provider manual.

Activities and Services will automatically be ordered chronologically with the most recent start date at the top.

Clicking on the blue linked text will take you to that activity in the customer's EP. From here you can edit this activity. More about editing Activities in the section on Managing Activities in the Provider Manual.



Activities / Case Management

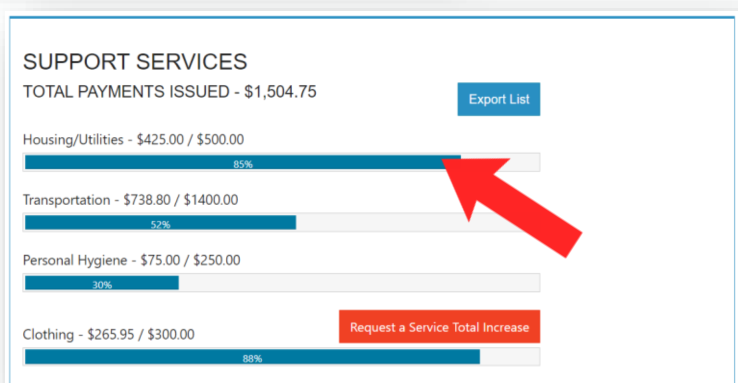
Add Activity or Service

Show 10 entries Search:

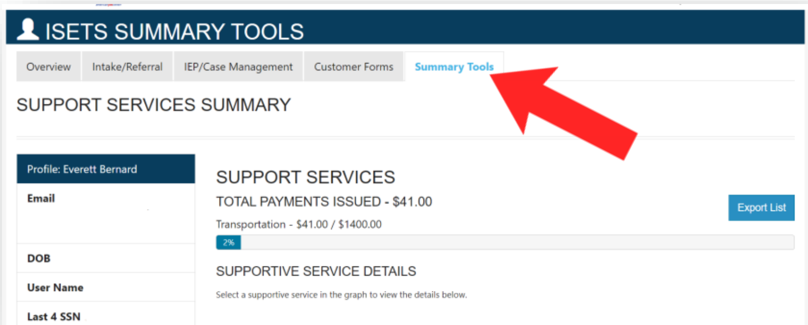
Goal	Related Steps & Service Name	Category & Provider	Earliest Start Date	Latest Completion Date	Status
Complete the Program	Hide Next Steps	Career Plan	05/01/2024	N/A	On Track
	WRT - Work Readiness Training	an Human	N/A	N/A	Planned/Not Started (Scheduled)
	VT - Vocational Training	Asian Human Services	05/06/2024	N/A	Started/Open
	JST - Job Search Training	Asian Human Services	N/A	N/A	Planned/Not Started (Scheduled)

Support Services Section

This gives an overview of the Supportive Services issued and their totals. Click on the blue graph in order to view details of each instance/payment. More about editing Services in the section on Managing Support Services.



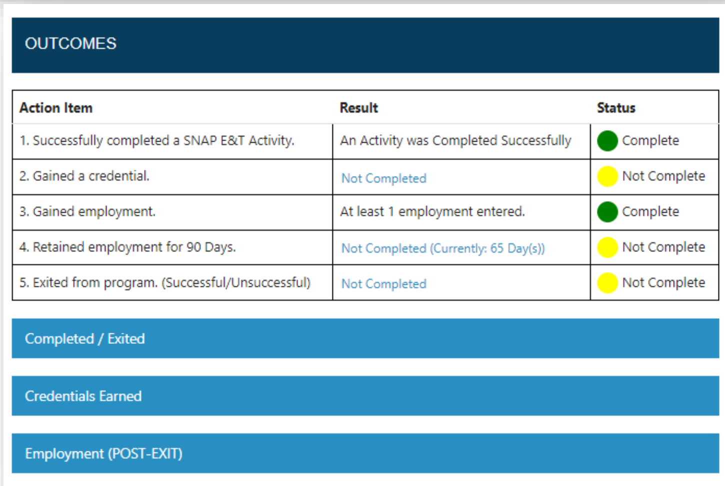
An additional detailed summary can be found in the "Summary Tools" tab at the top of the Customer Record. Providers may request an Override to exceed the recommended maximum amount on any Support Service. Those must be [approved by an IDHS Manager](#).



Outcomes Sections

Milestones

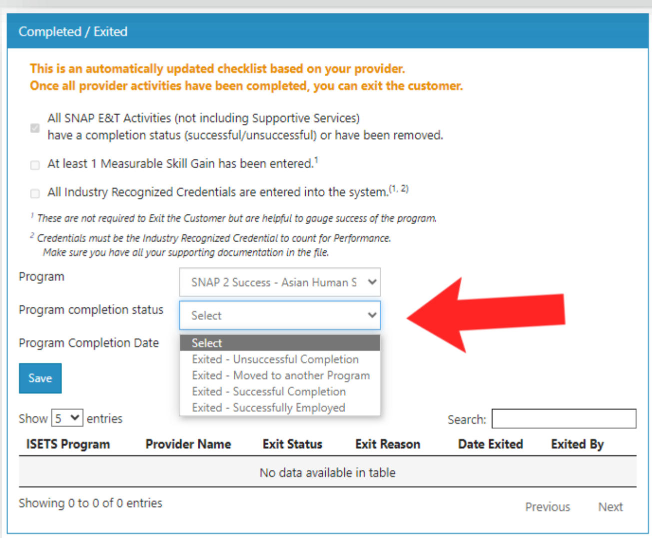
This section is a table that lists different potential milestones a SNAP E&T customer may reach during their participation in the program. All of these are not required.



Completed/Exited Section

This section is where a Provider may exit a customer from their SNAP E&T program.

1. First all activities must be completed. If any activities are "Planned/Not Started", those must be deleted from the EP to proceed with exiting a customer. If this has not been done you will see a red message saying this.
2. The Provider should choose the Program/Provider from the Program dropdown list
3. Choose an exit status from the "Program Completion Status" dropdown list.
4. Add the "Program Completion Date".
5. Click "Save".

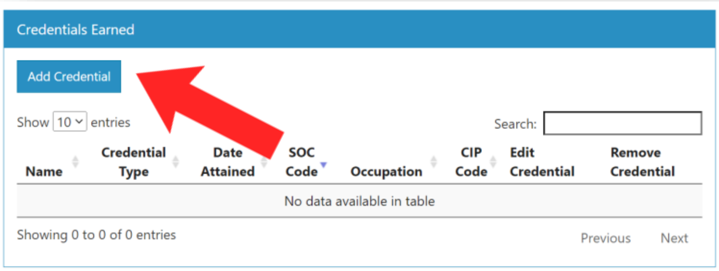


More about Exiting customers in the section on Exiting Customers in the Provider Manual.

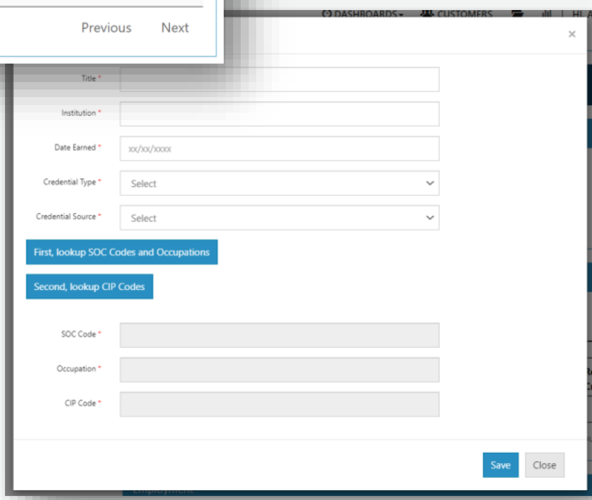
Credentials Earned Section

This section is where a Provider may enter a credential a customer has earned while participating in SNAP E&T. Adding credentials earned during SNAP E&T participation is mandatory reporting.

1. To add a credential, click the “Add Credential” button.



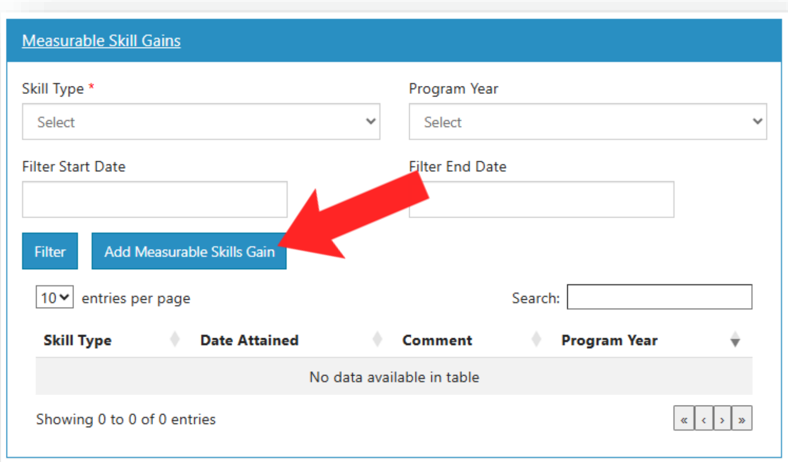
5. A new popup window will open labeled “Add/Edit Credential”.
6. Add all information about the credential and click the “Save” button.
7. SOC Codes and CIP Codes are used to determine the industry and occupation the credential pertains to.



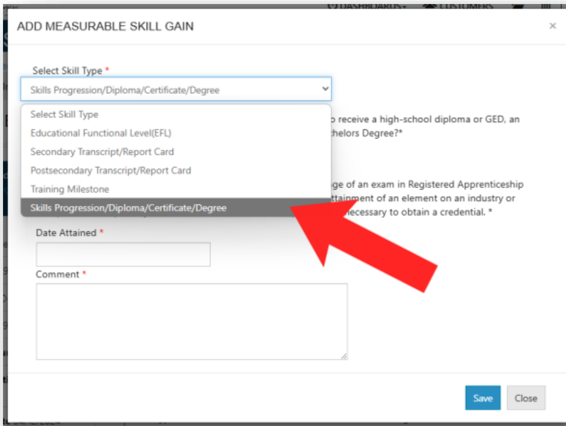
Measurable Skills Gained Section

This section allows a Provider to add skills gains (any increase in skills gained while participating in the SNAP E&T program).). Adding skills gained during SNAP E&T participation is mandatory reporting.

Incomplete reporting of these measures during the program year will be considered when evaluating Provider performance and whether to award future contracts.



1. To add a skills gain, click the “Add Measurable Skills Gain” button.



5. A new popup window will open labeled “Add Measurable Skill Gain”.
6. Add all information about the various skill gains and click the “Save” button.
7. Skills that require assessment or test results will contain links to add those assessment results. Skills gains of these types are automatically calculated when entered.

Employment Section

This section allows a Provider to add an employment placement (any employment gained while participating in the SNAP E&T program). This section also provides a quick link to the Employment Notification form. This form is used to notify IDHS/an FCRC of a customer’s employment and revised income so that we can budget the income, which may affect the customer’s benefits. For more about adding and managing employment see the section in the Provider manual on Adding and Managing Employment & Retention.

Editing Customer Information

Currently most customer information such as name, address, phone, email, case number, individual number, redetermination date are all provided to ISETS by IES. This data is imported on the 5th, 13th, 20th and 27th of each month at 12pm. To ensure the accuracy and integrity of this critical data for IDHS the only place where edits take place is in the Integrated Eligibility System (IES). To make changes to this information a customer must report changes directly to IDHS through the ABE (Application for Benefits Eligibility). Then when the next import to ISETS happens (possibly up to 2 weeks) the data will be updated in ISETS.

Information which can be edited includes any assessments, referrals, enrollments, activities, services, or case notes you enter in ISETS regarding a customer. Most information retains a historical record of past entries to ensure data integrity, but if you make changes the most recent version will show and that is the version you should review.

In the case of assessments, these should be updated every 12 months at least and reviewed at least every 6 months. Multiple providers may be working with a customer so before you take the time to do a new assessment with a customer, ensure that another provider hasn't already entered a more recent version. More on this in the next section (Assessments).

Best Practice

Whenever you receive information that a customer's contact or other information has changed, enter a case note with the new data and the date the change occurred.

Assessments

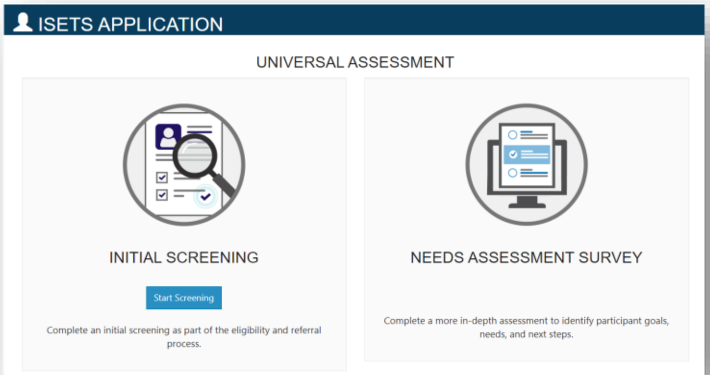
The first step in the customer intake process is for the Provider or the FCRC to complete a universal assessment (depending on where the customer enters the process). This assessment will allow you to view recommended providers/programs and make referrals to providers. An assessment must be done in order to send a referral and enroll a customer.

The Universal Assessment was developed specifically for IDHS/ISETS and is conveniently structured in two parts:

1. The Initial Screening – this part of the assessment contains all critical information to determine a customer's basic eligibility and suitability for enrollment into SNAP E&T.
2. The Needs Assessment Survey – this part of the assessment contains additional information that may be necessary for specific program entry, employment placement, and/or persistence and successful completion of a program. It gives the Provider more context and information about how to best serve the customer including identifying supports the customer may need.

Both parts may be completed inside ISETS or using the paper version of the form (5179) which can be entered into ISETS later.

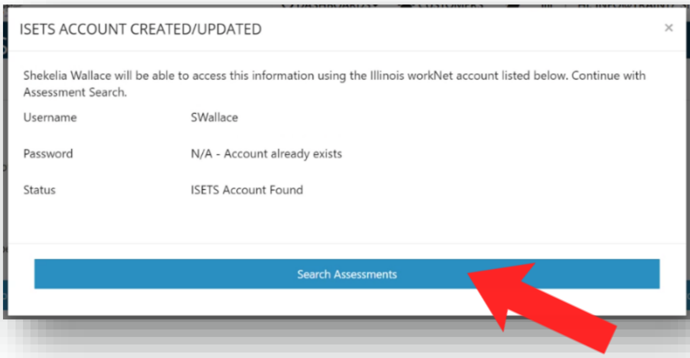
Any assessment submitted to WFD by an FCRC which does not have the first page completed cannot be entered into the Initial Screening and therefore will be returned to the FCRC.



Best Practice

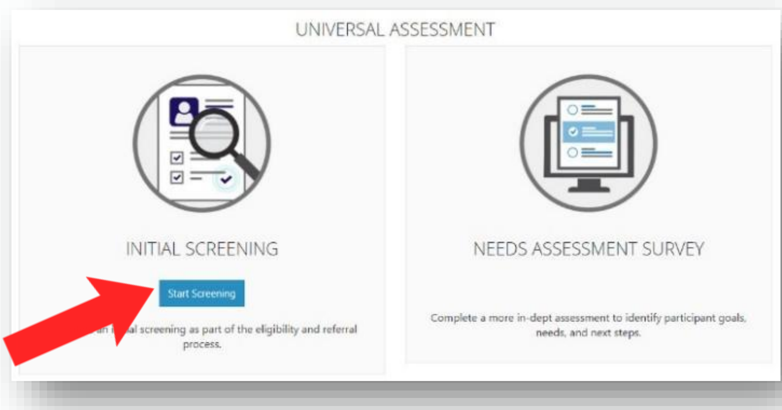
We strongly recommend that both parts of the Universal Assessment be completed for every customer Providers work with. The Initial Screening at least must be done in order to send a referral. The Needs Assessment Survey may be completed by the Provider later after the customer is verified as eligible and is enrolled in a program. The Assessment Form (5179) that comes from an FCRC to WFD must have the first page completed in order to complete the Initial Screening and send a referral.

If this is a new customer, follow the instructions for searching IES and adding the new account for the customer. If this is a new account, or if you are adding the customer to ISETS from IES for the first time, you will see a screen like this:



Complete the Initial Screening

1. Click on the “Search Assessments” button. This will take you to the Universal Assessment page.
2. Click on the blue “Start Screening” button.



3. Complete each section of the Initial Screening. As sections are completed the row across the top will show the progress and the current section.

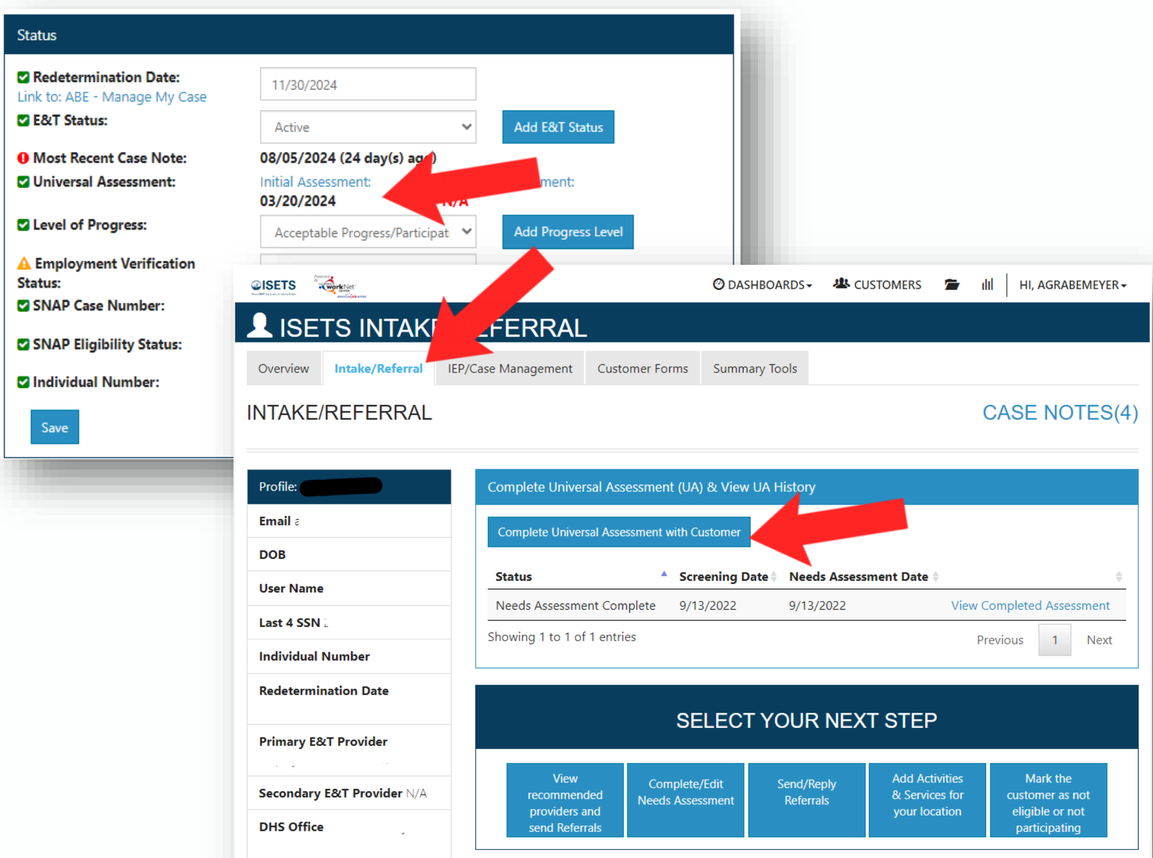
4. Review the information. To make edits, click the section (remember blue bars and text are links) and make your changes. Make sure you save the information before leaving the page.
5. On the last tab, click Submit Application.

To locate if an existing customer already has an Initial Screening completed, go to that customer's record and look at the Status section. You may also click on the Intake/Referral tab. The "Complete Universal Assessment (UA) & View UA History" section should be expanded by default as shown below.

If there is already an Initial Screening with a date within the last 12 months, no additional assessment is needed, the Provider should simply review the assessment that is there with the customer and determine if updates need to be made. If there is a yellow icon, it means that the assessment needs to be updated or completed soon. If there is a red icon, it means the assessment needs to be completed or updated and it is overdue. Please bring this to the attention of your Provider.

If the Assessment Form (5179) is sent to WFD by an FCRC the first page is the Initial Screening and may be entered as new even if an existing assessment is listed.

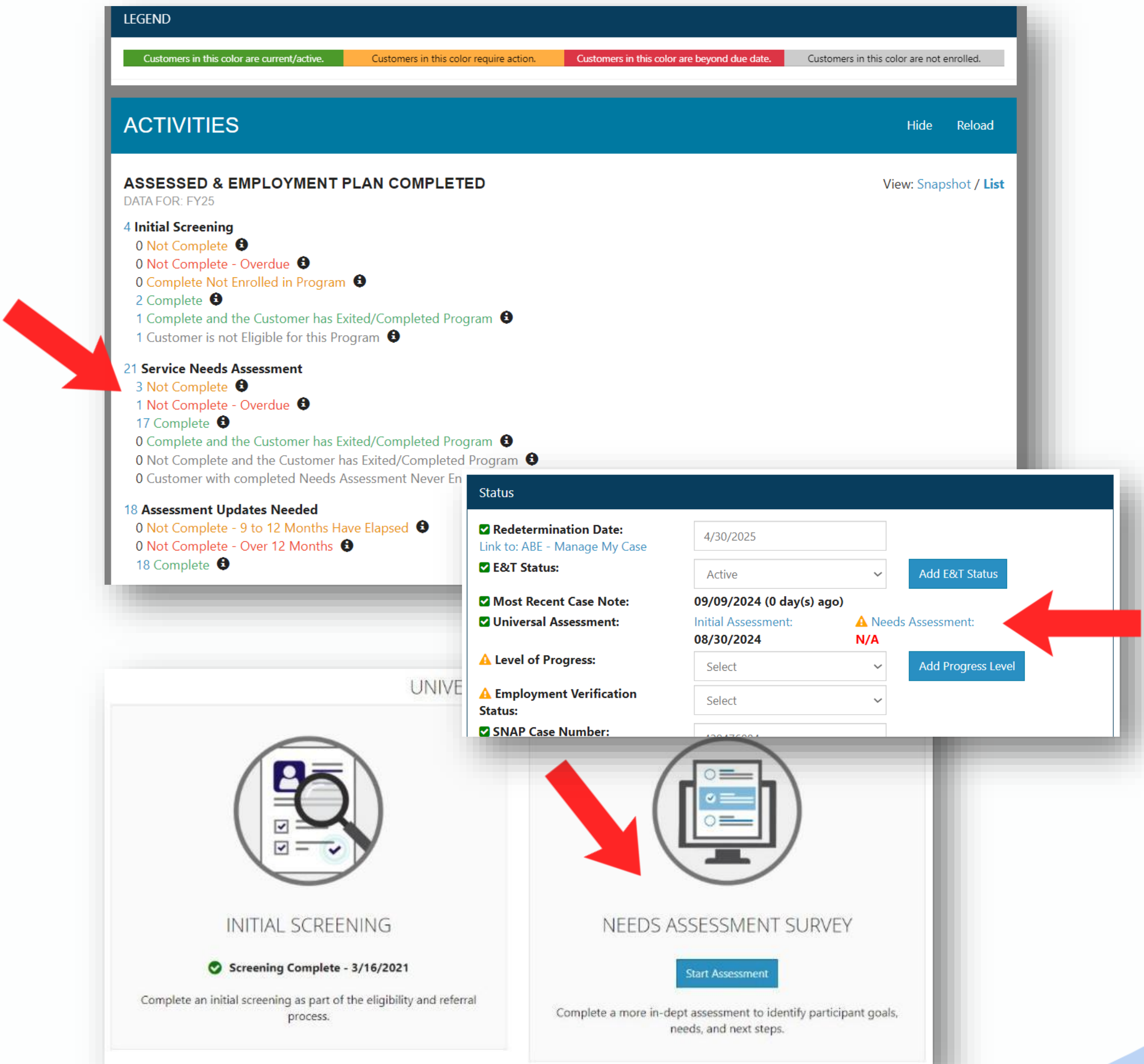
If there is no assessment listed, you must complete a new one for the customer before making a referral.



Needs Assessment

If a customer does not have the Needs Assessment completed, you will also see a red notice on the customer's Overview page in their record and also in the dashboard. The goal for Providers is to complete both the Initial Screening and the Needs Assessment within 30 days of enrolling a customer. If you see a screen like any of the ones below it means that the initial screening was completed, and the Needs Assessment was not. The number of Needs Assessments incomplete during the program year will be considered when evaluating Provider performance and whether to award future contracts.

1. Recommend that the Provider complete the Needs Assessment.



Making and Receiving Referrals

Referrals determine whether a Provider Partner has access to a customer's record.

Customers may be referred to SNAP E&T in two ways:

1. referral from IDHS to a Provider (Referral) or
2. referral from a Provider to IDHS (Reverse Referral).

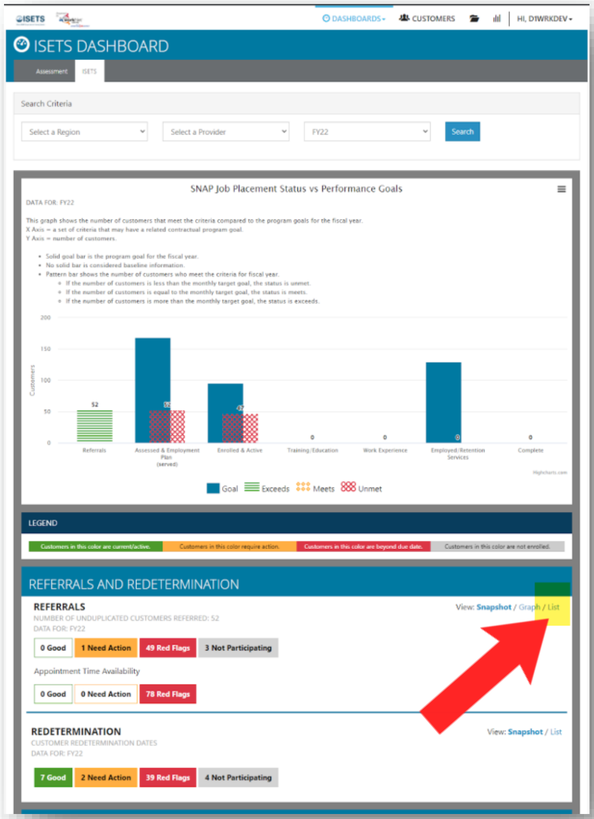
Before enrolling a customer in a SNAP E&T program, a Provider must either receive a referral from IDHS or send a Reverse Referral to IDHS. This ensures that the customer is confirmed as eligible and prevents ineligible customers from being enrolled and served.

If a customer has a referral within the last 45 days but was never enrolled, a new referral is not required. If a customer has participated in the past but has not participated in the past 45 days a new referral is also not required. However, in both these scenarios, verifying eligibility and updating the assessment is required.

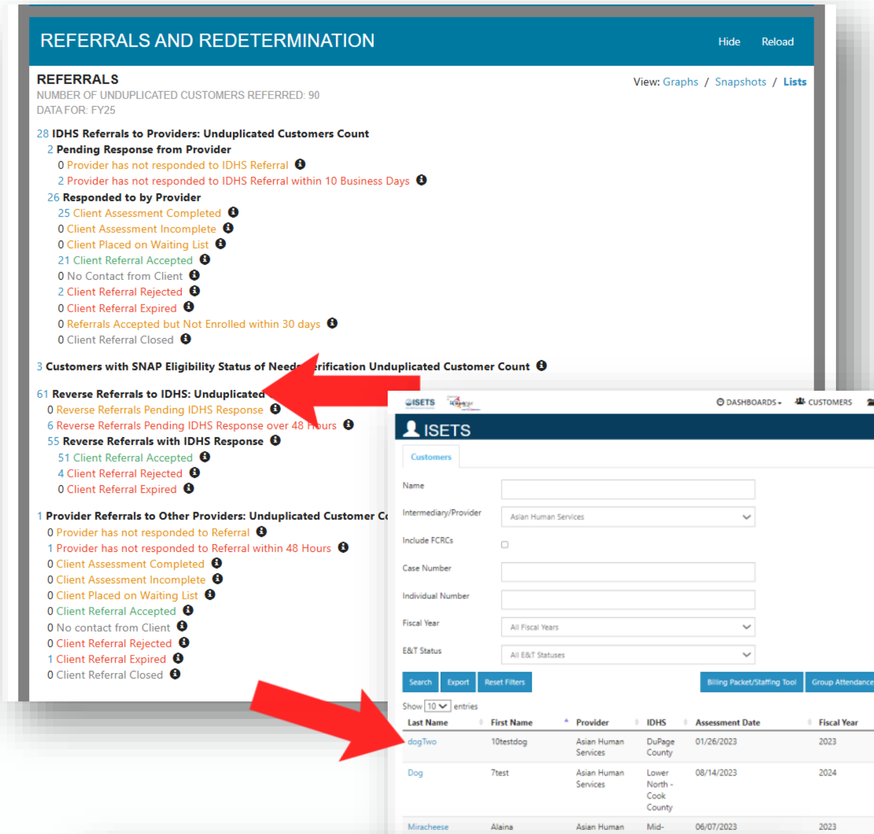
Referrals will auto-expire within 60 days. The number of referrals allowed to expire may be considered in monitoring and decision making regarding future contracts.

Processing Reverse Referrals

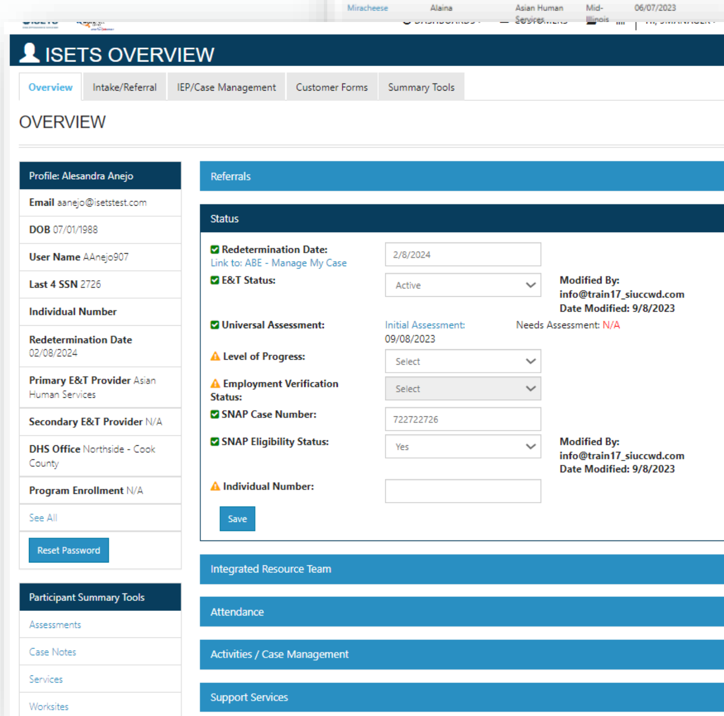
1. Customers who have been referred to IDHS may be found in the dashboard list. Providers also receive a daily summary email of all pending referrals. Provider Managers receive a weekly email summary of all pending referrals per Provider.
2. To find reverse referrals in the ISETS Dashboard, click on the dashboard menu option at the top right of your screen and choose ISETS from the dropdown list.
3. Scroll down to the "Referrals and Redetermination" section.
4. In the upper right corner of this section, select "List" to see detailed items.



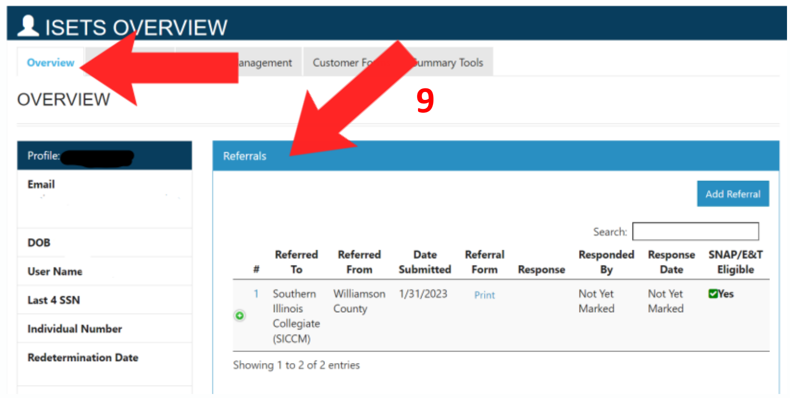
5. Click the number by the row of customers you want to review. i.e. “34 Reverse Referrals Pending IDHS Response over 48 hours”. This means that no one has responded to these reverse referrals for the past 48 hours (the goal timeframe is 48 hours for IDHS to accept or reject these referrals).
6. A new tab will open with the list of customers.
7. Click on a customer’s name to go to the customer profile.

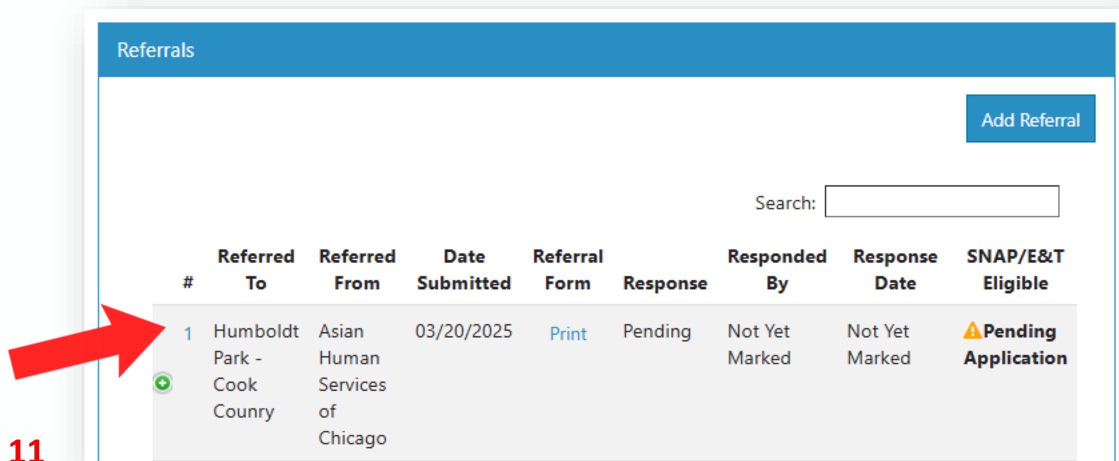


8. From the Overview tab on the customer profile, check the E&T Status, the SNAP Status, the Redetermination date that were all synced from IES.

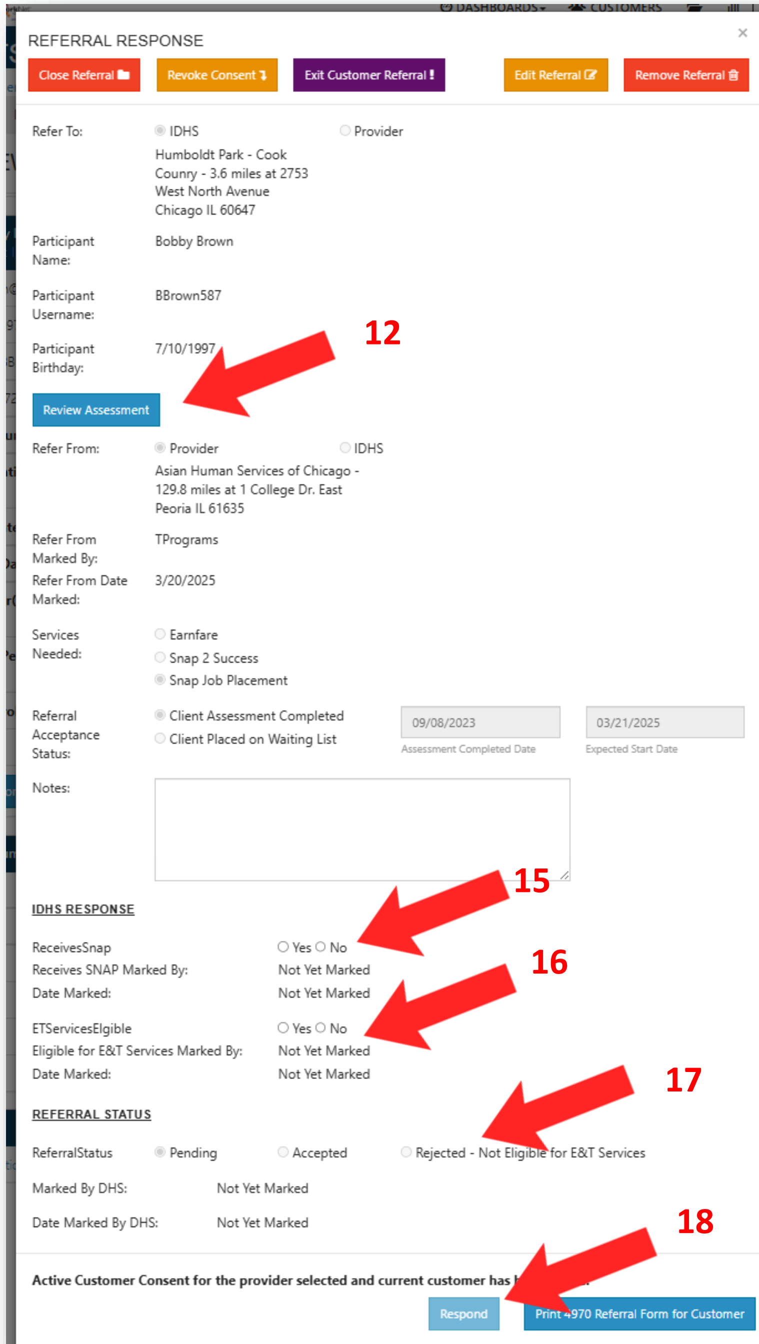


9. Expand the Referrals section.
10. Click on the green “+” button to expand the referral versions. You will see all historical versions of the referral listed.
11. Click on blue number link to open the referral.



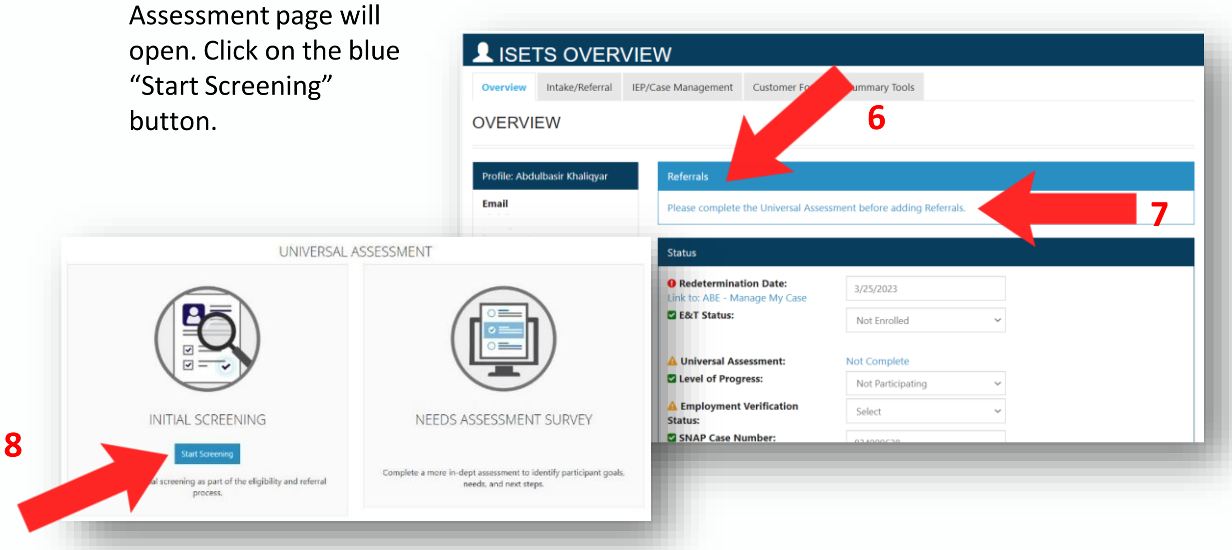


12. You have the option to review the assessment by clicking on the “Review Assessment” button.
13. Review the reverse referral information.
14. Verify SNAP eligibility in IES.
15. If they currently receive SNAP benefits, click the “Yes” radio button for “Receives SNAP”. If not, click “No”.
16. If they are eligible for E&T services, click the “Yes” radio button for “Eligible for E&T Services”. If not, click “No”.
17. Click the appropriate Referral Status radio button.
18. Click Respond.

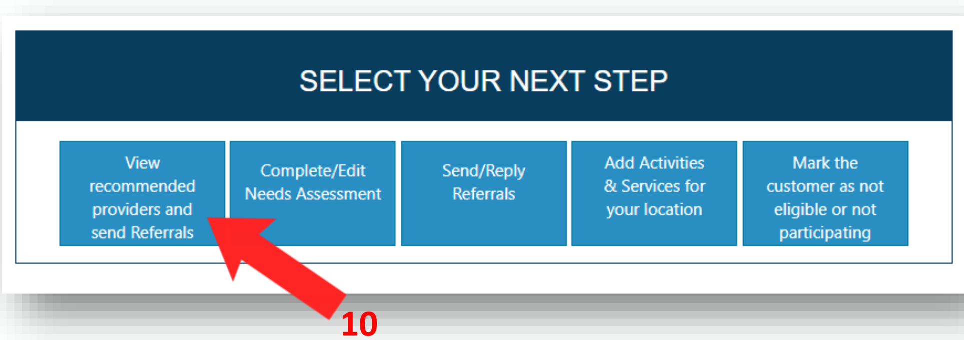


Making Referrals to Providers

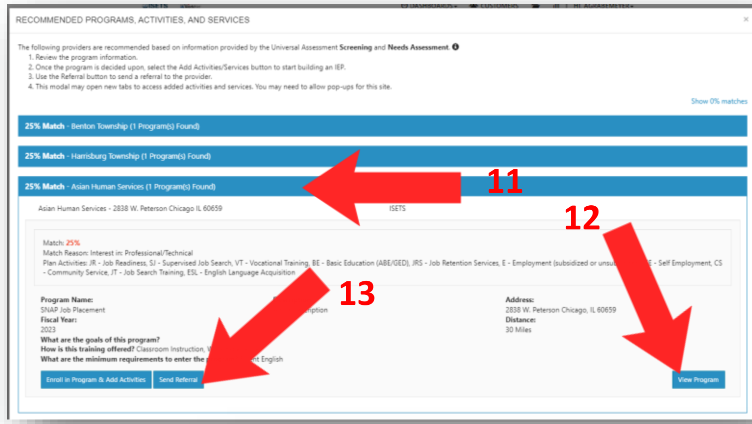
1. Customers who have been referred to WFD by an FCRC will have a Referral Form (5179) sent via email to the Regional Mailbox. Your manager will determine how processing these referral emails will be distributed.
2. Open and review the Referral Form (5179)
3. If the form is complete, go to IES and ensure the customer is eligible.
4. Then Log into ISETS and search the IES data for the customer (instructions on how to do this are in the Viewing and Editing Customer Information section).
5. Click on the blue linked last name of the correct person and open their customer record.
6. Click on the "Referrals" section to expand that section.
7. Click on the link "Please complete the Universal Assessment before adding Referrals.
8. The Universal Assessment page will open. Click on the blue "Start Screening" button.

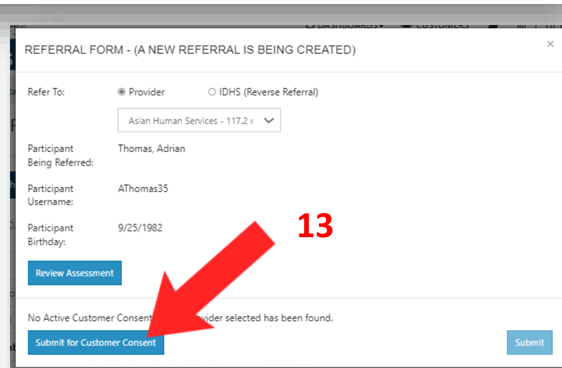


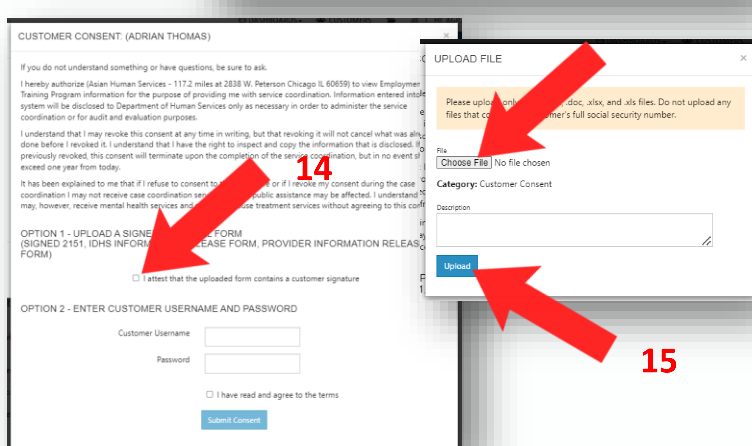
9. Complete the initial screening using the data in the Referral Form from the FCRC.
10. When finished, select the "View recommended providers and send Referrals" button



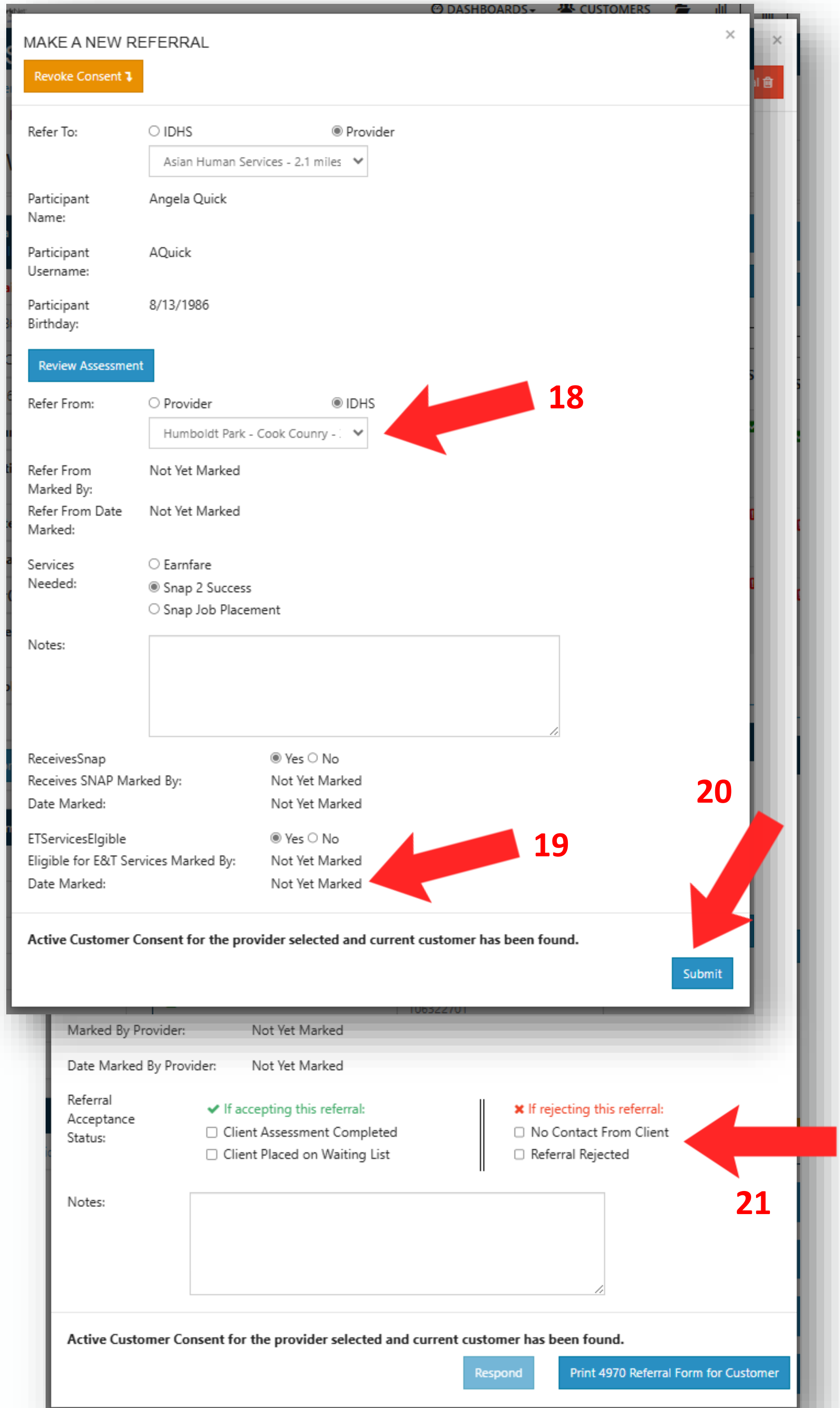
11. A pop-up screen will appear with a list of available Providers that match with the customer's assessment. Choose one and click on the blue bar to expand the program information.
12. To view more information, click the blue "View Program" button on the right side.
13. To make a referral, click the blue "Send Referral" button. A new tab will open with a new referral open. Ensure that the correct Provider is selected and click the blue "Submit for Customer Consent" button.
14. A window will open with the Customer Consent form. Click the box next to the statement: "I attest that the uploaded form contains a customer signature".
15. A window will open for you to upload the signed Referral Form, add a description such as "5179 from South FCRC". And click "Upload".







16. Ensure all information on the referral is correct, and add any other notes in the Notes field.
17. Select an appointment for intake if one is available.
18. Select the FCRC from which the referral came.
19. Select the appropriate radio buttons to indicate the person is receiving SNAP benefits and in Eligible for SNAP E&T.
20. Click the blue "Submit" button.
21. The Provider has 2 business days to contact a customer and 5 business days to respond and either accept or reject the referral. The Provider is then tasked with contacting the customer, confirming or rescheduling the intake appointment, and performing intake with the customer. Referrals will expire in 90 days; expired referrals may be considered when deciding whether to continue sending referrals in the future.



Provider to Provider Referrals
If a Provider meets a customer who wants to participate in SNAP E&T but they do not offer services that meet their needs or interests, they may make a referral to another SNAP E&T Provider.

While Provider to Provider referrals may be rare, they are certainly allowed. Dual enrollment is also allowed as explained earlier in this manual. Customers may be enrolled with multiple providers as long as the customer is enrolled in unique SNAP E&T activities with each provider. For example, a customer cannot be enrolled in Supervised Job Search (SJS) with two different Providers.

Referral Statuses

Referrals can have several statuses. Each status grants specific access to a Provider organization that the referral is for. These are explained below:

- **Pending IDHS Response:** this is a referral to IDHS that has not yet been processed.
- **Pending Provider Response:** this is a referral to a Provider Partner that has not yet been processed.
- **Accepted:** this customer is eligible and will be enrolled in SNAP E&T.
- **Rejected**: this customer's referral has been rejected because they are either ineligible or inappropriate for the SNAP E&T program.
- **Exited:** this customer was accepted, served, and exited.
- **Closed:** this customer is no longer able to be seen on the Provider's case load for whatever reason.

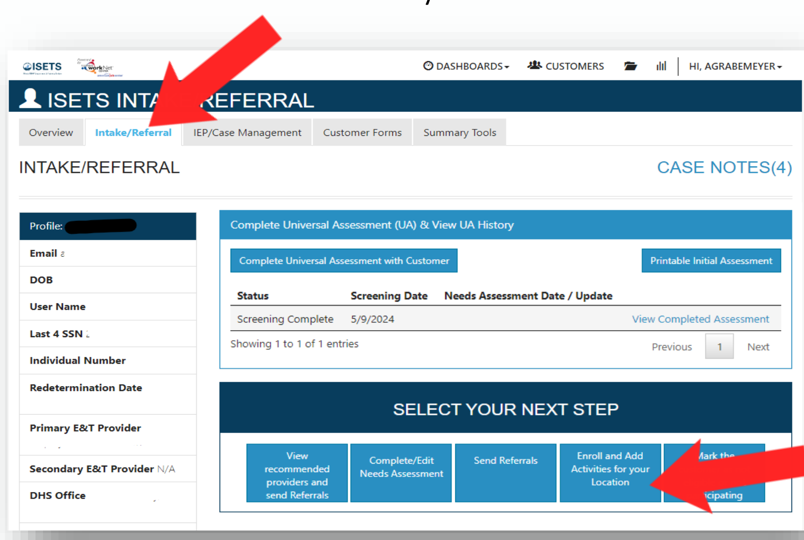
Referrals may be deleted, but only in the case that the referral is a duplicate or an error. Any referrals sent remain a record of activity on the customer record and should not be deleted, but maintained as a historical record.

Enrolling Customers

After assessment is completed and a referral accepted, Providers may officially enroll the customer in the program. In order to be included on monthly reporting for your agency, the Provider must perform the enrollment for a customer. Customers may be enrolled with more than one Provider. However, each Provider must offer exclusive activities to the same customer. For example, a customer cannot be enrolled in the Supervised Job Search activity with two different Providers.

In the Intake/Referral Tab on the Customer's record, you should see the completed assessment listed with dates. Below that you will see your options for next steps. IDHS staff should not be enrolling customer on behalf of a Provider unless there is a unique need and a Help Request has been submitted for intervention. If an IDHS Super User (Admin) does need to enroll or edit the enrollment date for a customer follow these steps:

1. Click on the "Enroll and Add Activities for your Location" button.



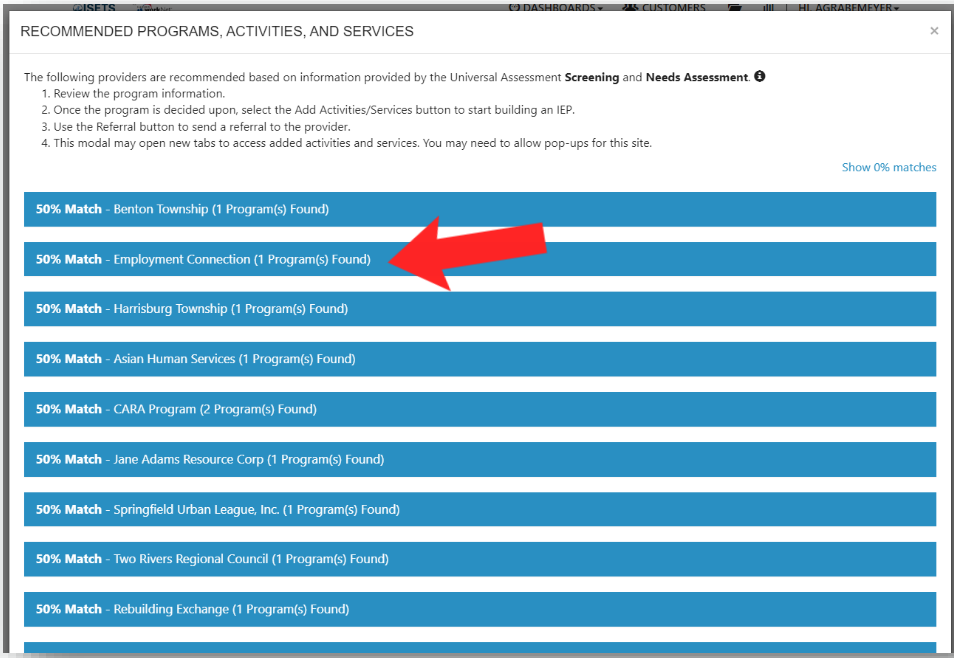
2. A box will pop open with "Recommended Programs, Activities, and Services". Find the desired agency in the list. If you don't see that agency, click on the "Show 0% matches" link in the upper right corner.

Best Practice

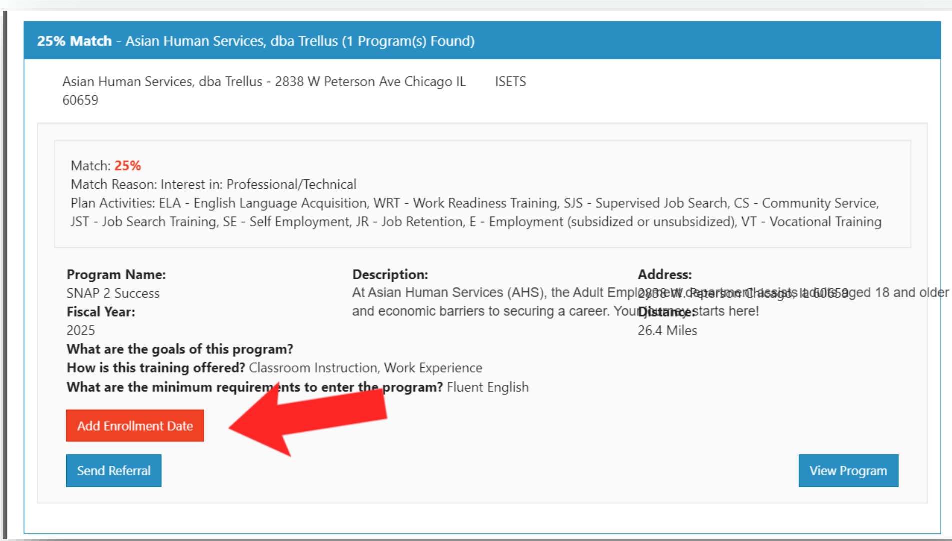
If you don't see the desired agency listed in the matches, it likely means either;

1. **That agency isn't a good fit for this customer based on their assessment answers or**
2. **That agency doesn't have enough information in the Provider Information section to match with customers.**

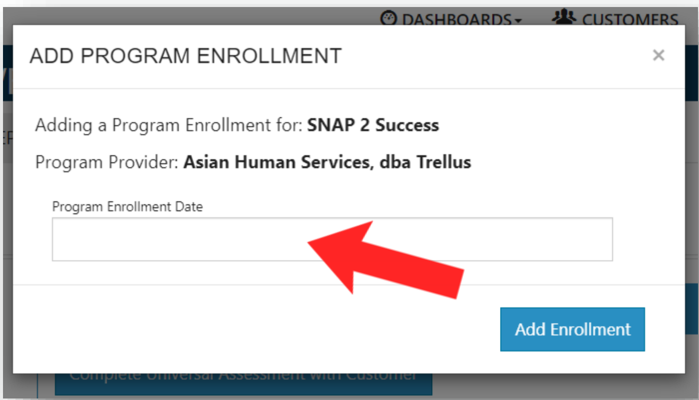
To remedy this, edit your Provider Information and add more details.



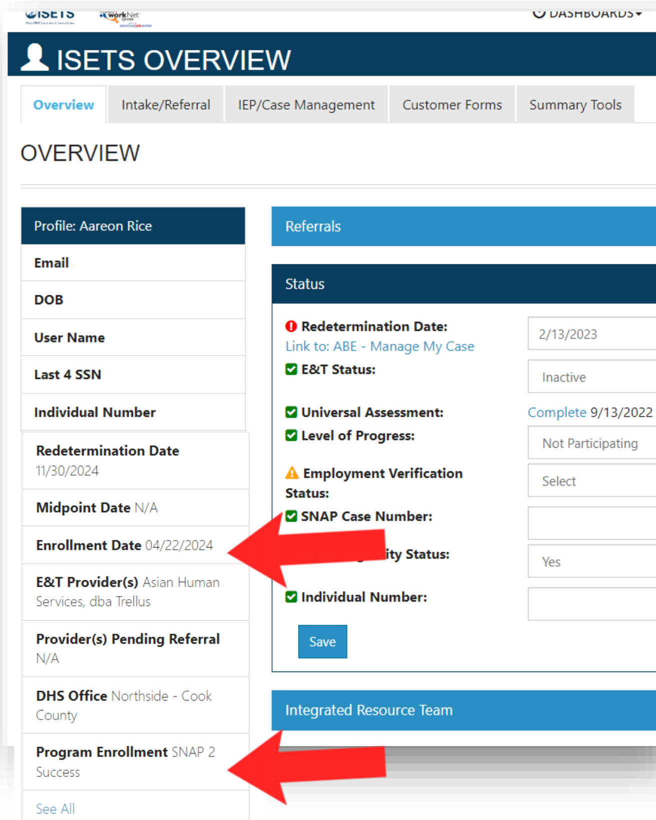
3. Click on the blue bar with your agency to expand the program details. If there are multiple programs, make sure you choose the correct one.
4. Click on “Add Enrollment Date”.



5. A pop-up will appear and you can add the correct enrollment date for that customer to be enrolled with that Provider.



6. You will see the program enrollment on the customer record and the correct enrollment date.



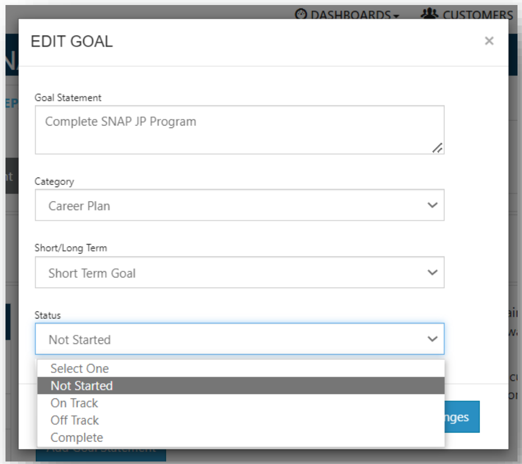
Enrolling a customer also adds a default goal to the customer's EP. You can see in the example the goal is "Complete SNAP JP Program". You'll notice that the goal's status is listed as "Not Started". The next steps are to open the goal and start the activities. A customer is not considered "Active" until they have a "Started/Open" SNAP E&T activity.

To edit the goal status

1. Click on the "Not Started" blue text and a window will pop up.
2. Click on the status drop down and select "On Track".
3. Click the "Save Changes" button.

In the next section you will find more information about adding and editing activities.

Note: In order for a customer to be considered "Active", they must have an activity with an "Open/Started" status on a SNAP E&T EP and a start date.



Best Practice

If a customer is exited at any time during the program year/fiscal year, then returns after 45 days for additional services and is eligible, the Provider must perform a new intake, referral and enrollment. Previously completed Activities are locked and may not be reopened after a customer is exited. So new Activities should also be added and Started/Opened with a new start date and Planned End date.

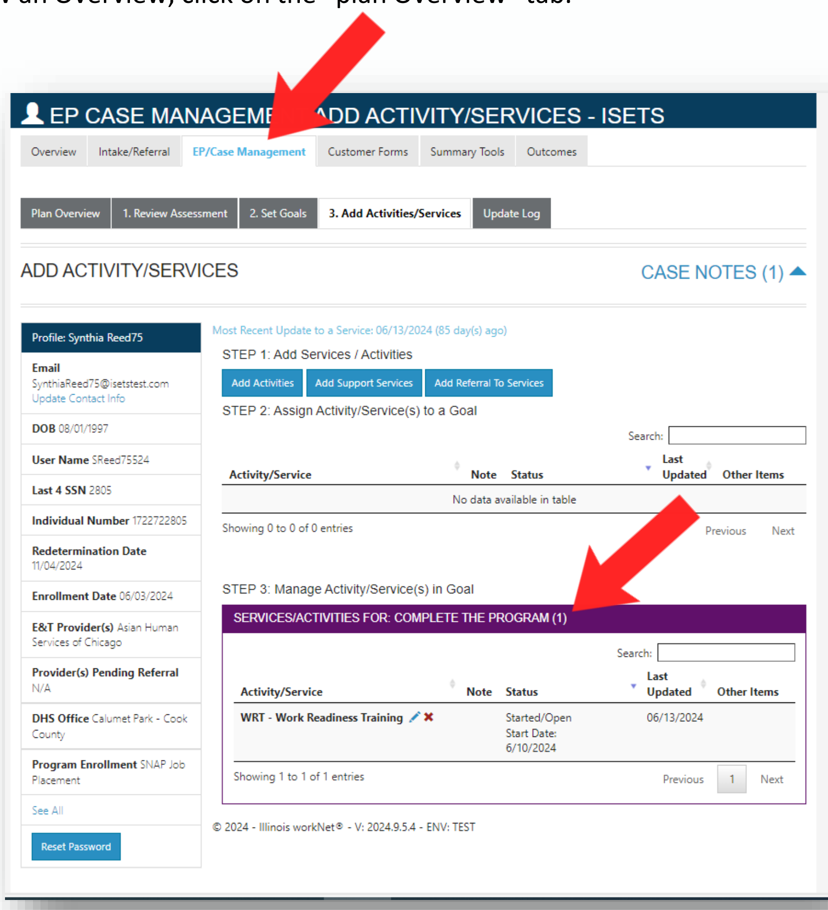
The only exception to this rule is if the exited customer finds employment with 60 days of exit which entitles them to Job Retention services (20+ hours/week). If this is the case, the customer may be un-exited and enrolled in the Job Retention activity. Customers enrolled in the Job Retention activity are also entitled to Support Services to help them maintain employment.

Employment Plans (EPs)

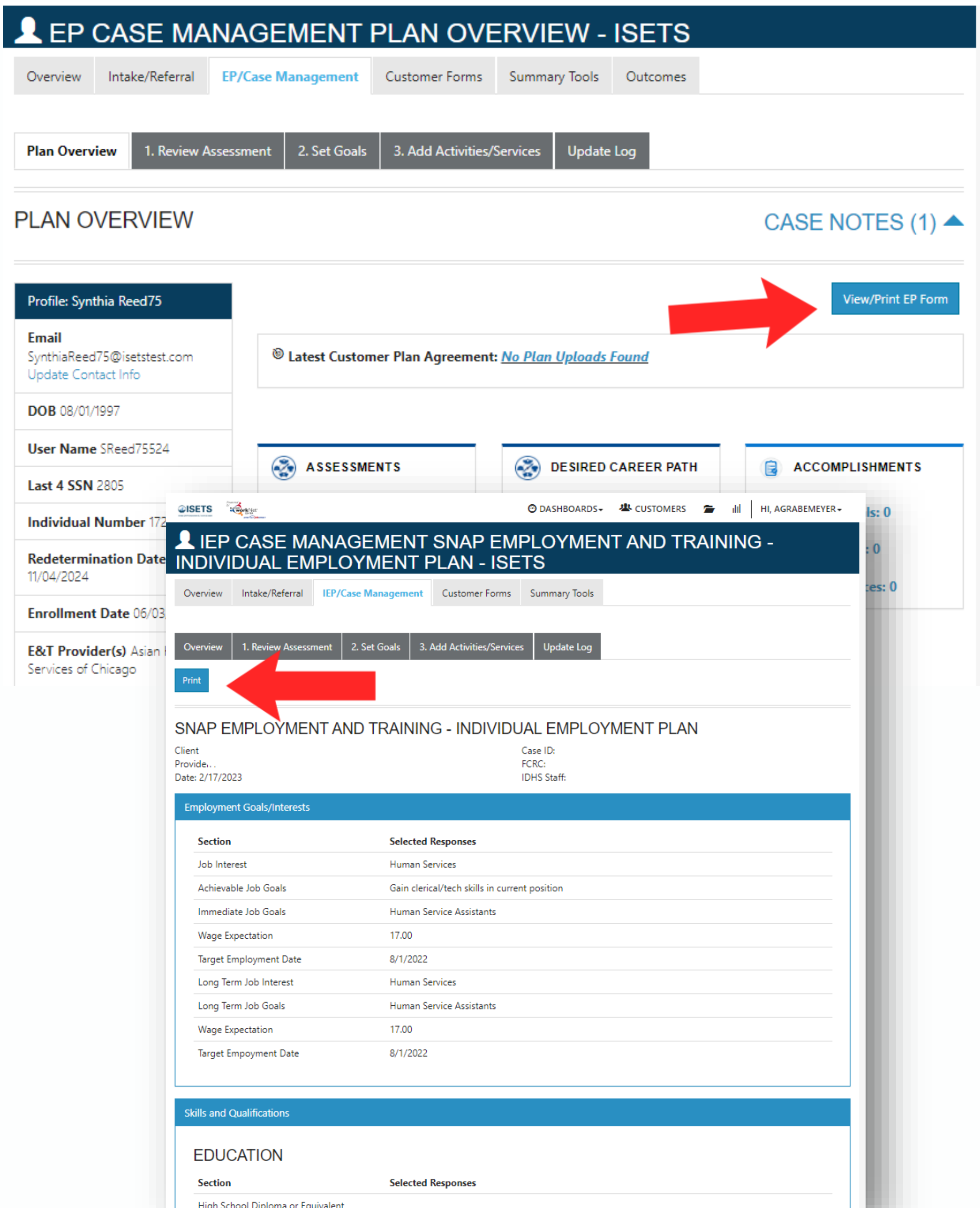
It is a requirement of SNAP E&T that each customer have an EP developed in collaboration with Provider staff. In performing the assessment and enrolling your customer, parts of the EP in ISETS will be auto-populated with some information. Adding additional long-term goals and adding activities (steps) toward their goals is part of developing the EP.

1. To view the EP, in the customer record, click on the “EP/Case Management Tab”.
2. The default view is the “Add Activities/Services” tab because this is the most commonly used tab. To view an Overview, click on the “plan Overview” tab.

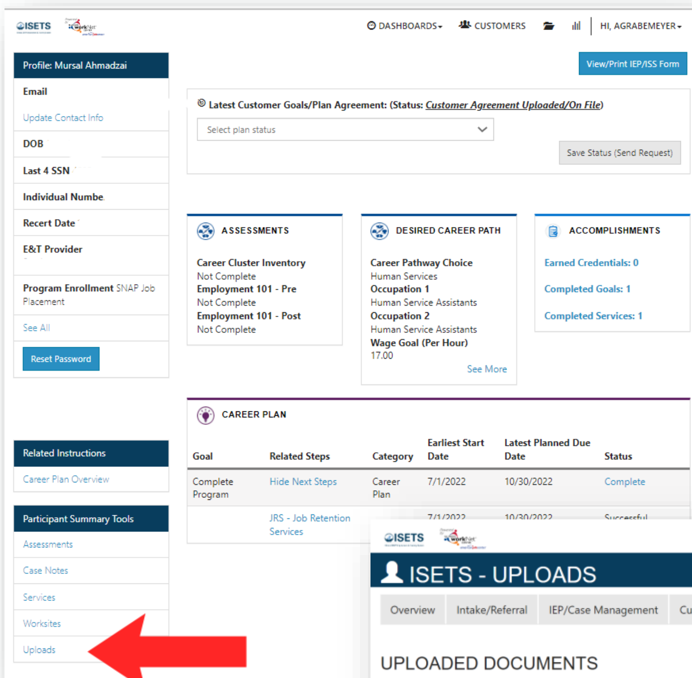
As previously stated in the [Enrolling Customers](#) section, when a customer is enrolled into a program a default short-term goal to “Complete the Program” is automatically added to the EP to get you started. Any activities the Provider choses to add to the EP upon enrollment is included under that default goal.



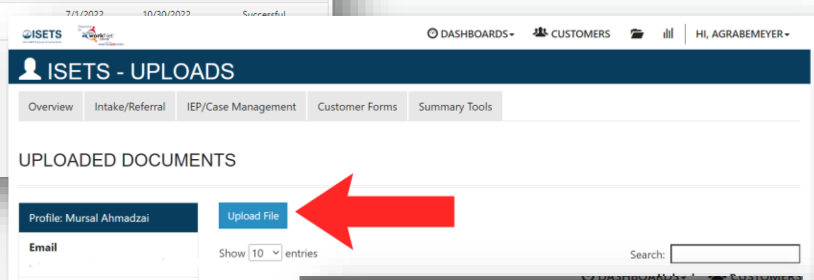
To print a copy of the customer Employment Plan, click on the Plan Overview tab and click on the “View/print EP Form” button. The current EP will generate a printable version in a new tab. Click the “Print” button at the top and have the customer sign it if you need a signed copy. You can then upload it to the customer’s record if desired.

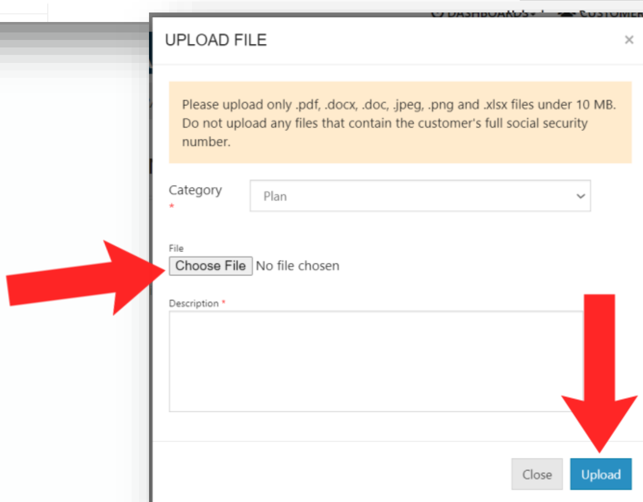


5. The Provider should upload a signed EP to the customer record to indicate that the EP was developed in collaboration with the customer and that they agree to this plan. They can do this by clicking on “Uploads” the “Participant Summary Tools” menu and then click on the “Upload File” button.



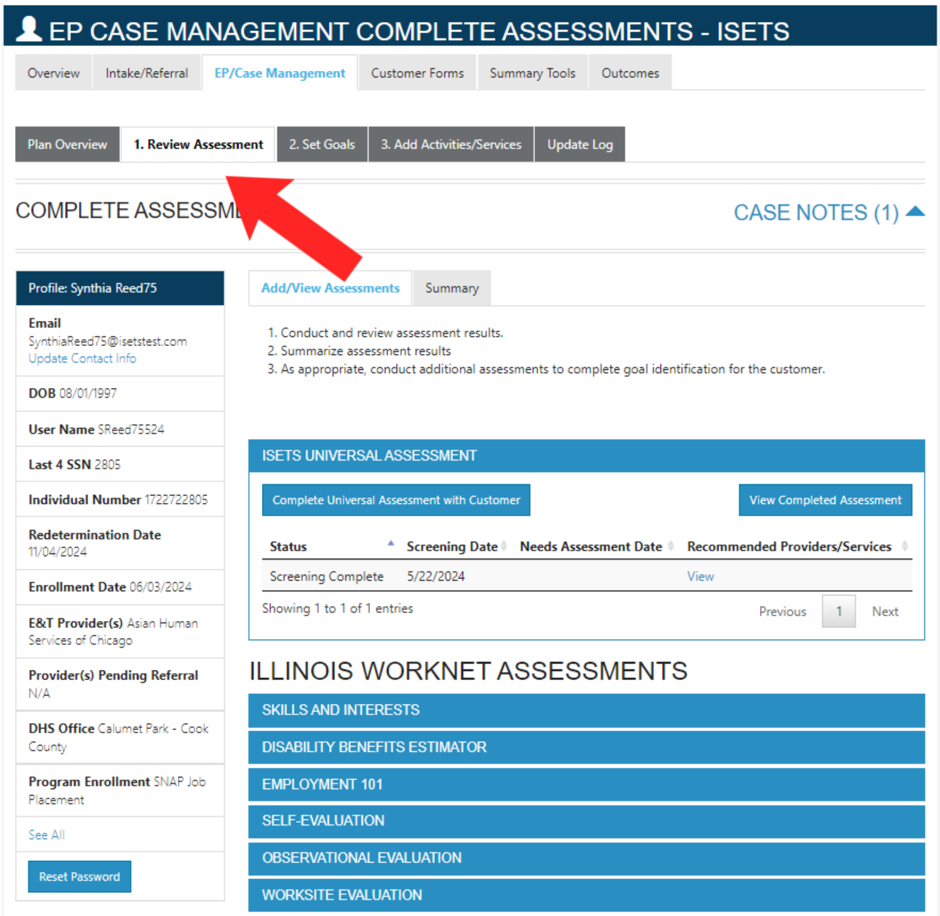
4. A popup page will load.
5. Click the dropdown menu and choose “Plan”.
6. Click the “Choose File” button and upload the correct file.
7. Click the “Upload” button.
8. Return to the tab with the EP page.
9. Click on the “Latest Customer Goals/Plan Agreement Status” dropdown and update if necessary.



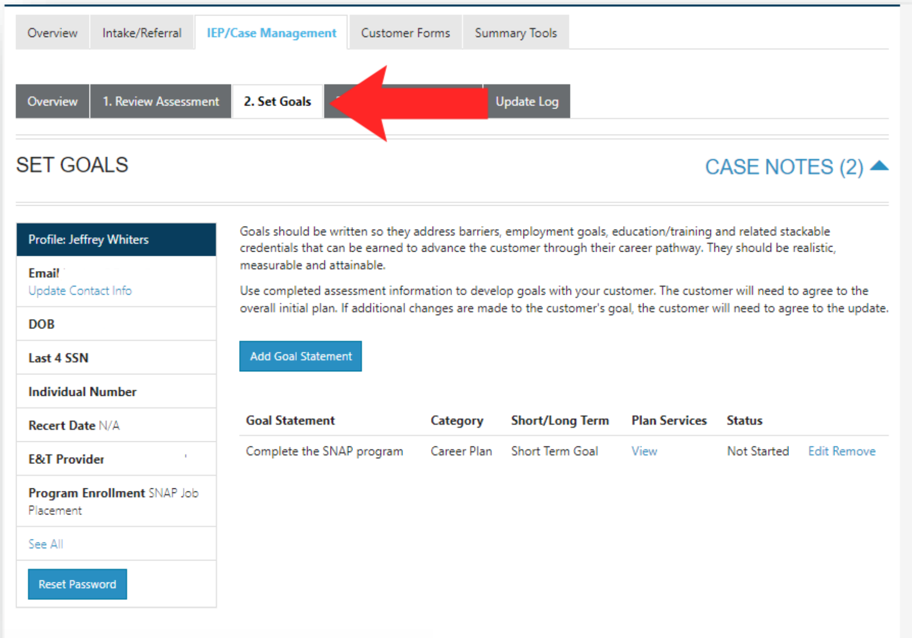


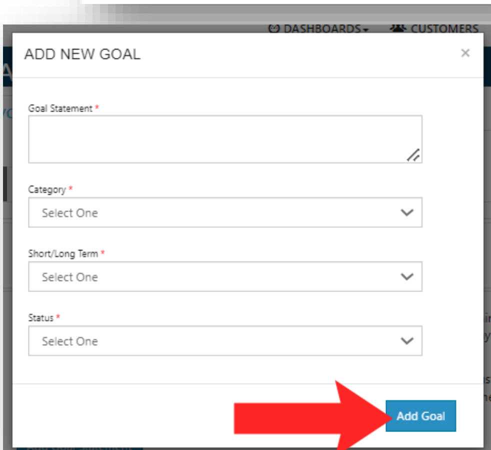
You will notice on the EP Overview page that all assessments are listed in the “Assessments” box. The “Desired Career Path” information is populated from the answers entered in the Universal Assessment. The “Accomplishments” box shows earned credentials, goals, activities and services which have been completed.

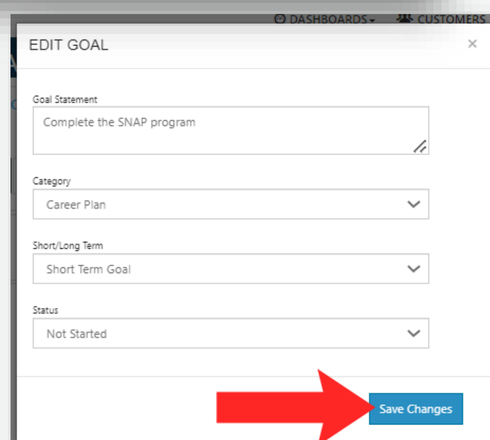
1. To view all assessments, click on the “Review Assessments” tab. The ISETS Universal Assessment as well as any other assessments available in ISETS are listed there. Some of these assessments are provided by Illinois WorkNet and are helpful but not required.



2. To view and/or edit goals, click on the “Set Goals” tab.
3. To add a goal, click on the blue “Add Goal Statement” button.
4. Select a “Category”, choose whether it is a Short Term or Long Term goal, and select the “Status” (usually “On Track” if starting new).
5. Click the “Add Goal” button.
6. To remove a goal, click on the blue “Remove” link on the right side of that goal listed.
7. To edit a goal, click on the blue “Edit” link on the right side of that goal listed. Note: This is what you will do to change a goal from “Not Started” status to “On Track” status.
8. Click the blue “Save Changes” button.







Adding and managing Goals, Activities, and Services on a customer's EP is the responsibility of the Provider. However, IDHS staff working with a Provider may review EPs to understand what activities and services a customer is engaged in. If any discrepancies or inaccuracies are noticed, a Provider Manager should notify their Provider that a correction is needed.

More about Ensuring Partner Data Accuracy in that section.

Adding and Managing Activities

After a Provider has enrolled a customer, they can add and edit activities. Activities are added underneath EP goals, therefore a goal must be added to the EP first before adding activities.

There are two types of activities in the system:

1. SNAP E&T Activities: These are SNAP E&T Activities which are included in the Illinois SNAP State Plan and have been approved by FNS (Department of Agriculture Food and Nutrition Service).
2. Other Activities: These are allowable activities for customers enrolled in SNAP E&T but are not officially part of Illinois SNAP E&T. Note: customers cannot be enrolled in “Other E&T Activities” exclusively; customers enrolled in SNAP E&T MUST be enrolled in at least one SNAP E&T Activity (Job Retention cannot be the only SNAP E&T Activity).

Best Practice

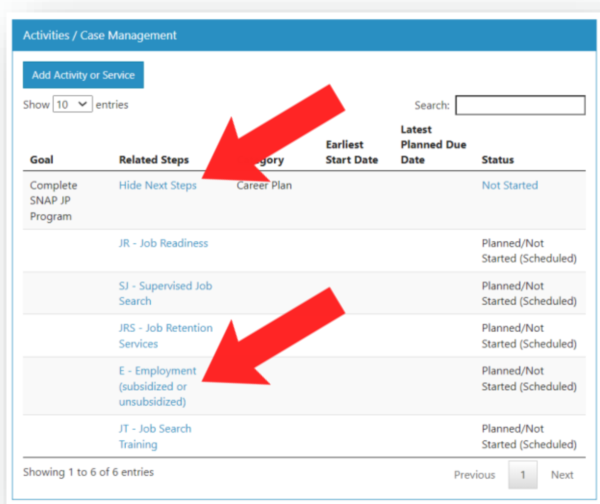
Providers should keep activities updated and make sure that estimated end dates are edited and extended if an activity goes longer than originally expected. Make sure when a customer completes an activity and moves on to a new one, Providers close out the old activity and add the new one to their EP.

Each customer enrolled in SNAP E&T must be enrolled in at least one SNAP E&T Activity. In addition, a new SNAP E&T customer must be enrolled in a SNAP E&T Activity prior to starting Job Retention.

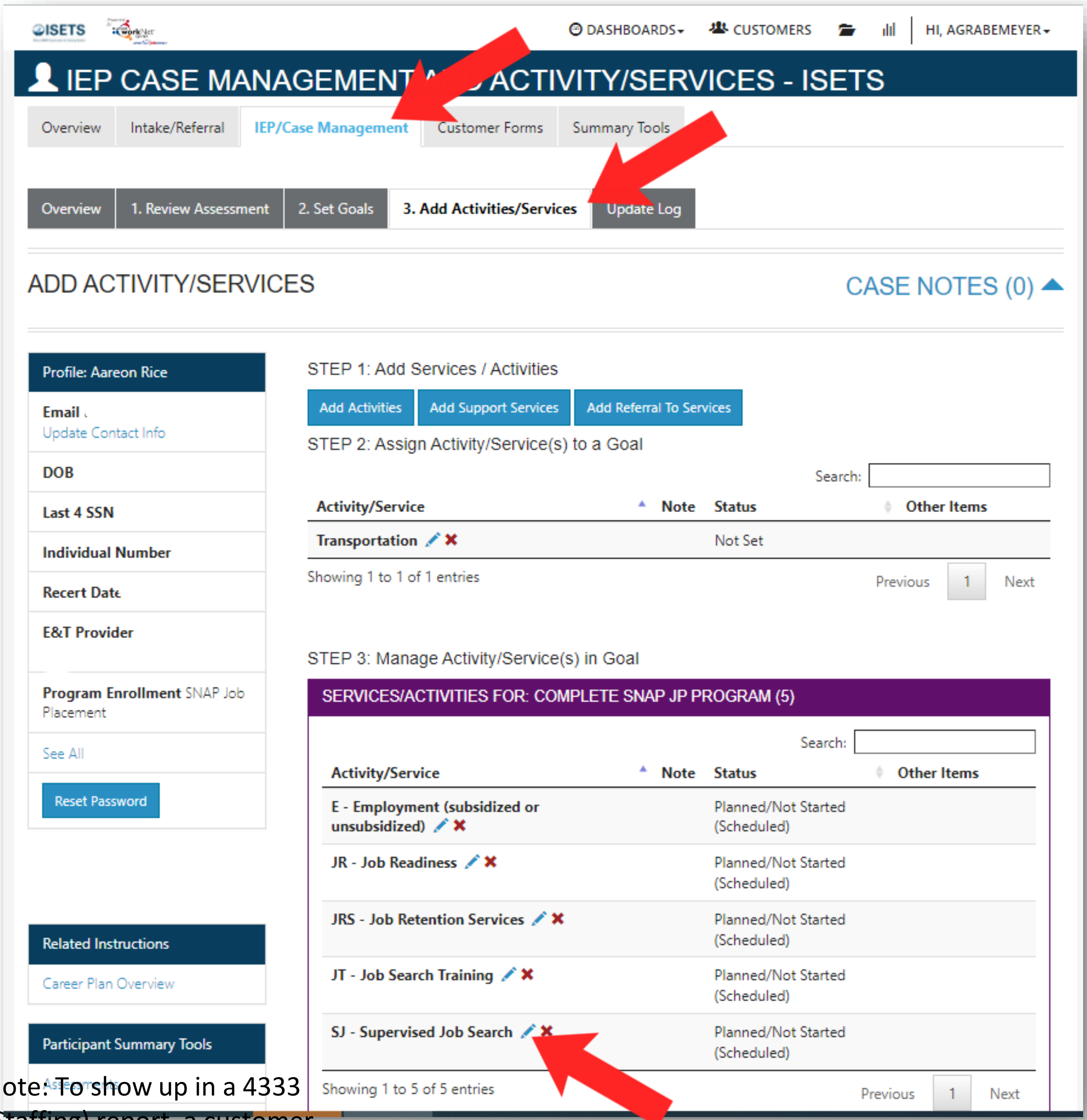
Providers can only add activity start dates which begin on the first of the month in which they were determined eligible and enrolled in the program.

To view customer activities:

1. In the Overview of a customer’s record.
2. Click on the blue text with the title of the goal. That goal’s activities and services will unfurl and you can then see all activities and services associated with that goal.
3. To edit that activity, click on the blue text with the title of the activity.



4. You can also view and edit activities by clicking on the "EP/Case Management" tab in the customer record. Providers should add an activity by clicking on the "Add Activities/Services" tab and expanding the purple bar listing "Services/Activities" for the goal.
5. Click on the blue pencil icon next to the activity or service to see more or edit that service or activity.



5

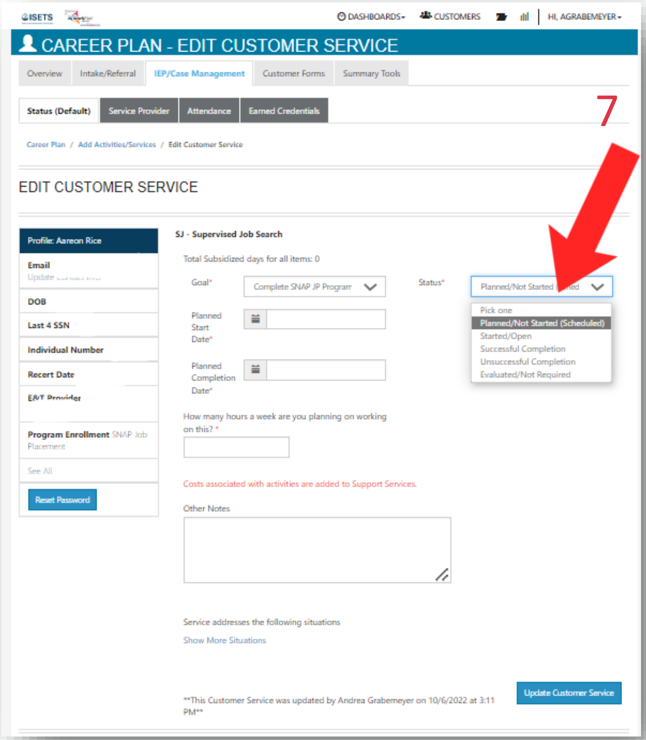
Note: To show up in a 4333 (Staffing) report, a customer must have a SNAP E&T activity with the Started/Open status and with dates that include the month the report is for.

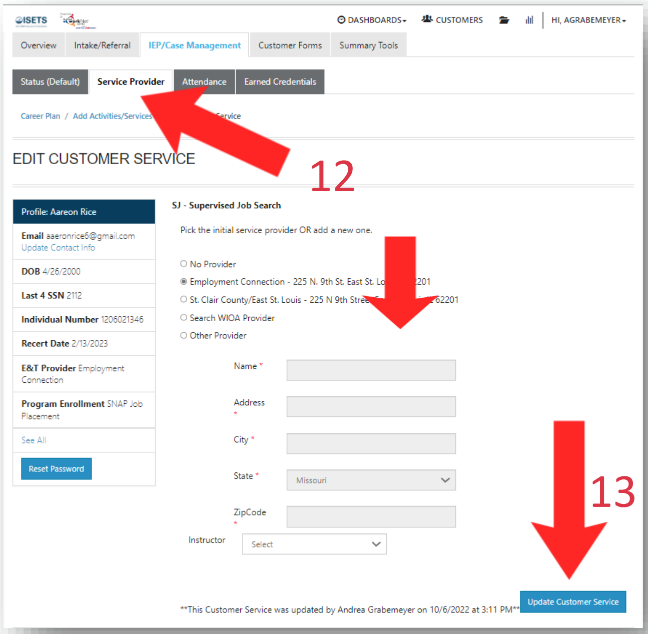
Any Supportive Service listed here which has a "$" icon in the "Other Items" column has a cost associated with it. There are also icons for Credentials earned and Attendance that my appear in this column as well.

6. A screen will load where you can edit the activity.
7. Click on the “Status” drop-down menu and choose the correct status (usually “Started/Open” to begin with).
8. Click on the “Planned Start Date” field and choose a start date.
9. Click on “Planned Completion Date” and choose an expected end date (estimate this or choose the end of the program year: June 30).
10. Enter how many hours you are planning on engaging this customer in this activity. *Note: for time limited work requirements, this is the number of hours that will be assumed for the purposes of meeting or not meeting those requirements.
11. Add any Other Notes describing the activity.
12. Click on the “Service Provider” tab and make sure your agency is selected as the Service Provider.
13. Click on the “Update Customer Service” button.

Providers are limited to start dates beginning the first of the month in which the customer was deemed eligible and enrolled.

Note: To show up in a 4333 (Staffing) report, a customer must have a SNAP E&T activity with the Started/Open status and with dates that include the month the report is for.





In the “Service Provider” tab the Provider should ensure they are selected as the Service Provider. Otherwise, the customer may not show in reports for their agency. If a customer is attending the Activity at a different agency/location (for example attending GED classes taught at a local Community College instead of at your agency) the Provider may search for that location in the WIOA Provider section or you may type in the information in the “Other Provider” fields.

Note: To show up in a 4333 (Staffing) report, a customer must have a SNAP E&T activity with the Started/Open status and with dates that include the month the report is for.

Note: Costs can only be added for supportive services; costs are not added under activities.

Closing Activities

When a customer completes an activity that activity is closed. A Provider must enter the actual Completion date when closing an Activity. Prior to exiting a customer from SNAP E&T altogether, all open activities must be closed.

When adding, changing, or closing activities, this constitutes a change in the EP, which requires a case note. A case note pop-up screen will automatically appear when changes require a case note.

Best Practice

If A Provider is closing activities for a customer, please ensure that if they are still participating, they still have at least 1 SNAP E&T Activity open, otherwise they will not be considered “Active” in the program. If they are not continuing to participate, the Provider MUST proceed with exiting the customer. Providers should never complete activities and leave a customer’s EP open without either continuing service or exiting the customer.

Best Practice

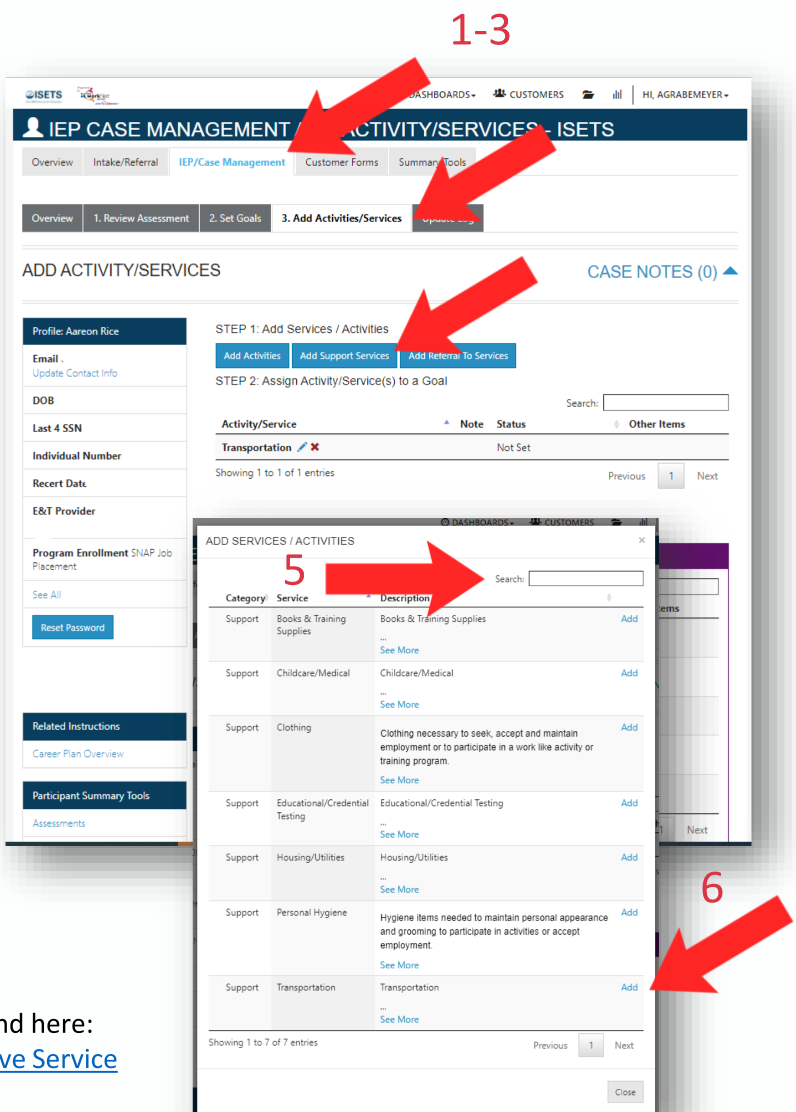
Once a customer starts an activity, DO NOT delete an existing activity or change the start date of the activity. This is because data related to the dates of the activity will be lost (this activity will no longer show up in the 4333 for the months they were originally in the activity).

Adding and Managing Supportive Services

After a Provider has enrolled a customer, they can add and edit services. Services are added underneath EP goals (like activities), therefore a goal must be added to the EP in order to add services. As previously mentioned in the Enrolling Customers section, when the customer is enrolled, a default goal is automatically added.

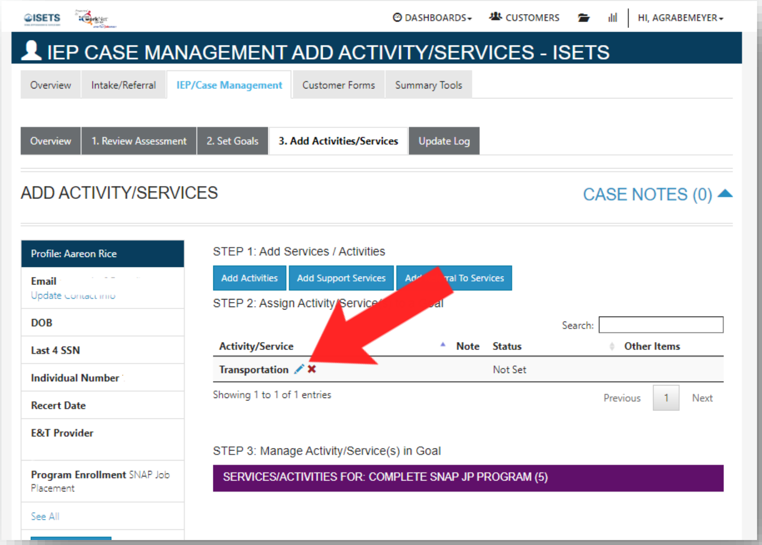
Costs can also be added underneath supportive services where costs are not added under activities. Costs should be added and dated within the month the service is issued/happens. Customers are only eligible to receive Support Services while they are enrolled and active in a SNAP E&T Activity, therefore costs may only be added for dates that coincide with an active SNAP E&T Activity.

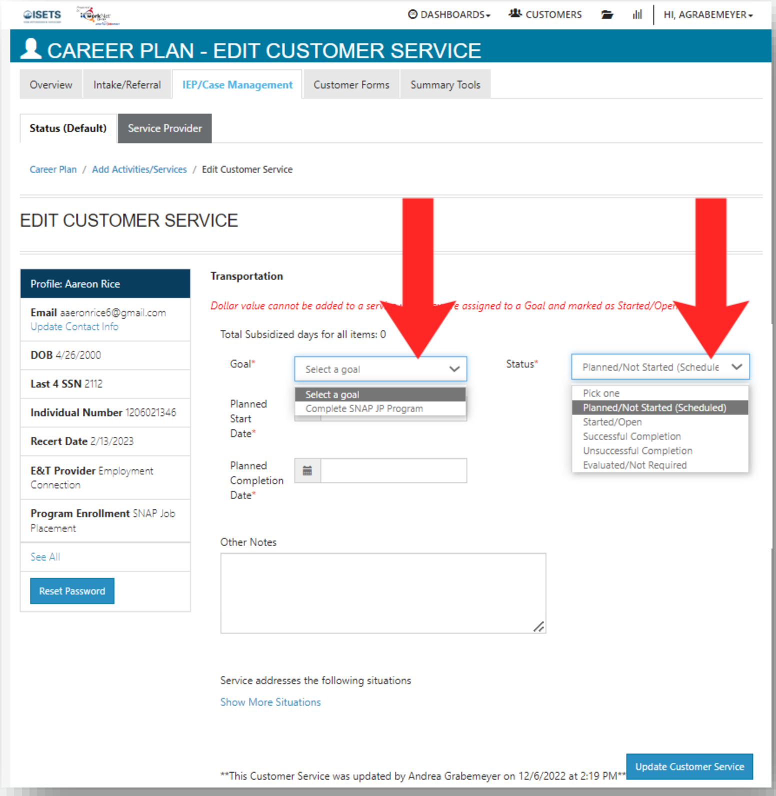
1. A Provider can add new services by clicking on the EP/Case Management Tab in the customer record.
2. Click the “Add Activities/Services tab.
3. Click on the “Add Support Services” button.
4. A pop-up screen will load with a list of all services.
5. To find a specific service, you can type keywords in the search bar at the top right.
6. Click on the “Add” blue link on the right side to add the service to the EP.
7. The service will now show on the list at the top of the Activity/Service page.



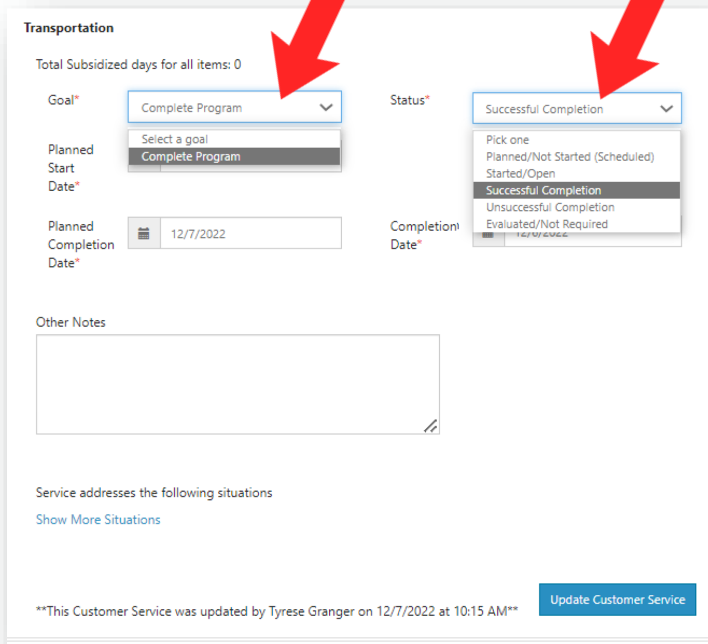
The official published policy on supportive services can be found here: [IDHS: WAG 21-06-11: Supportive Service Payments (state.il.us)]

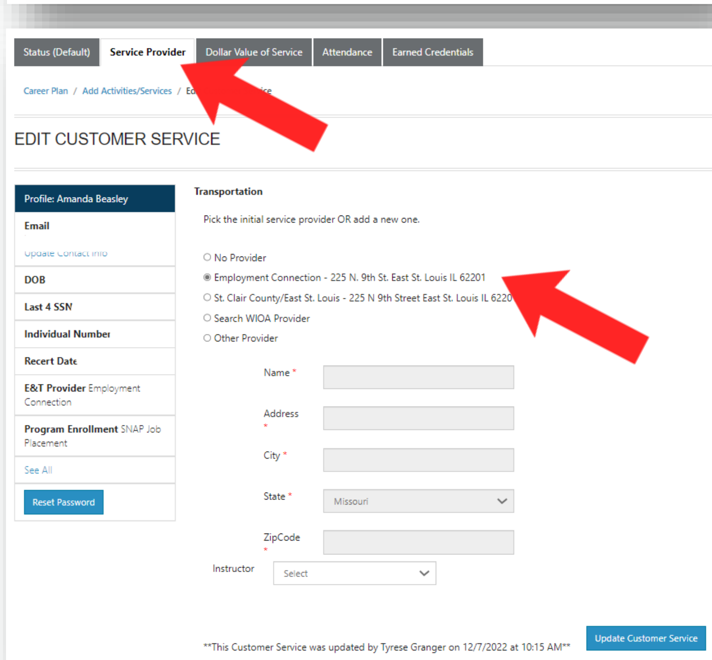
7. Click the blue pencil icon.
8. A page will open where you can edit the new service.
9. You'll notice that a new service not associated with a goal will display the message "Dollar value cannot be added to a service until they are assigned to a Goal and marked as Started/Open".
10. Click on the "Goal" dropdown and choose a goal to associate this service with.
11. Click on the "Status" drop down and choose a status (usually "Started/Open").
12. Click on the "Planned Start Date" field and choose a start date.
13. Click on "Planned Completion Date" and choose an expected end date (estimate this or choose the end of the program year: June 30).





10. Enter how many hours you are planning on engaging this customer in this service (if the service doesn't necessarily have an hour component, just enter 1).
11. Add any Other Notes describing details of the service.
12. Click on the "Update Customer Service" button.
13. Click on the "Service Provider" tab and make sure the appropriate agency is selected as the Service Provider.





Managing Supportive Services is the responsibility of the Provider, however IDHS staff may assist when needed.

To view costs which have been added to services, click on the "Dollar Value of Service" tab. All cost instances will be listed there as well as Override requests or Amendment requests.

Ensuring Partner Data is Accurate

Data in ISETS should match all other data reported on external forms such as the Periodic Performance Tracking spreadsheet (PPTT) or the Expenditure Documentation Form (EDF). Periodic checks to make sure this data is complete and accurate is done by IDHS staff and findings may be reported to Providers to edit/fix.

Roles

Provider staff are responsible for entering data on a day-to-day basis which populates monthly, quarterly, or year-end reports. Providers are responsible for ensuring the accuracy of this data. It is recommended that Providers review and ensure that data in an external report matches data in ISETS to prevent findings.

Provider Managers are responsible for reviewing their Providers' current data in ISETS monthly in preparation for a Staffing and comparing it to data reported in external forms. Provider Managers also act as the primary point of contact for Providers and therefore are responsible for notifying Providers when they need to take action and providing support.

IDHS Workforce Development (WFD) staff may assist periodically with reviewing past data reported in external forms and comparing that with ISETS and reporting inaccurate data. WFD staff also verifies eligibility for customers.

To perform a data accuracy audit using a PPTT and ISETS:

1. Open the PPTT on your computer and start with the month you would like to review.
2. Open a browser window and log into ISETS.
3. It is recommended to place these two windows side by side on your monitor for easy comparison.
4. In the PPTT view the first customer listed for that month, search in ISETS for that customer and ensure that the case number, start date, activities, referrals and all other columns are reflected accurately in ISETS. If anything does not match, make a note of the finding.
5. All customers should have a referral, be enrolled in a SNAP E&T program, have a SNAP E&T status that indicates they are active in the program, have a SNAP E&T Eligibility status indicating they are still eligible, have a redetermination date that has not past, have an assessment that is less than 12 months old, have at least one SNAP E&T Activity (other than Job Retention) with an "Open/Started" status and a start date. If they have completed Activities and Employment entered for >20 hours/week, they must also be enrolled in the Job Retention Activity.
6. After all customers are reviewed from the PPTT, go to ISETS and view the total list of customers by choosing that Provider from the dropdown menu on the Customer page or by running a 4333 report. You may want to sort columns to make it easier.

7. Go down the list and locate anyone listed in ISETS who is NOT listed on the PPTT. View that customer's record and determine if they should be listed in the PPTT. If they are in ISETS but not listed on the Provider's PPTT, note that finding.

ISETS: ALL PARTICIPANTS WHO RECEIVED BENEFITS SUMMARY (4333)

Back to Reports

Provider * : Asian Human Services

Staffing Month: September

Program * : SNAP Job Placement

Fiscal Year: 2024

Customers: All Participants who received benefits

IDHS Office: Select

Filter

Show 10 entries

F. Name	L. Name	Case Number SNAP Cert Date	Provider Activity	# Hours 2610	Support Services	Last update to IEP	Last Referral Date Current E&T Status Progress Level Employment Verification	Add 4334 If Required	IDHS Verification	Staffing Completed
Avi	Apple	400177177 10/11/2021	JST, VT	0	0	5/11/2021	5/17/2021 Active N/A N/A	Not Required Required	SNAP E&T Eligible Not SNAP E&T Eligible	Staffing Complete
Sherese	Brown	0	SJS, JR	0	0		12/19/2022 Active N/A N/A	Not Required Required	SNAP E&T Eligible Not SNAP E&T Eligible	Staffing Complete
Azella	Collins	0 10/11/2022	JR, CW	0	0	10/13/2021	N/A Active N/A N/A	Not Required Required	SNAP E&T Eligible Not SNAP E&T Eligible	Staffing Complete
Shikita	Curtis	733733607 5/1/2023	WRT, JR, E	0	0	12/1/2022	12/6/2022 Active N/A N/A	Not Required Required	SNAP E&T Eligible Not SNAP E&T Eligible	Staffing Complete
Angie	Dickenson	733733606 3/27/2023	SJS	0	0	10/27/2022	11/8/2022 Active N/A N/A	Not Required Required	SNAP E&T Eligible Not SNAP E&T Eligible	Staffing Complete
10testdog	dogTwo	791791918	BE, WRT	0	50		9/5/2023	Not	SNAP E&T	Staffing

8. After compiling your list of findings for the month you are reviewing, email that list to the Provider and cc the Provider Manager for that Provider if you are not the Provider Manager. It is a best practice to give the Provider a due date for making edits/fixes and to allow at least two weeks for them to correct errors.

Providers should be given a written list of findings, if any, and given a reasonable timeframe to correct errors. If they have any questions about a finding or need help fixing data issues, they should contact their Provider Manager for clarification or help. If a Provider sees a data error they cannot fix or something they believe is an error after consulting with their Provider Manager in the ISETS system preventing them from fixing incorrect data, you should submit a Help Request ticket. However, ISETS staff will not be held responsible for changing/fixing data which a Provider's staff have the ability to fix themselves.

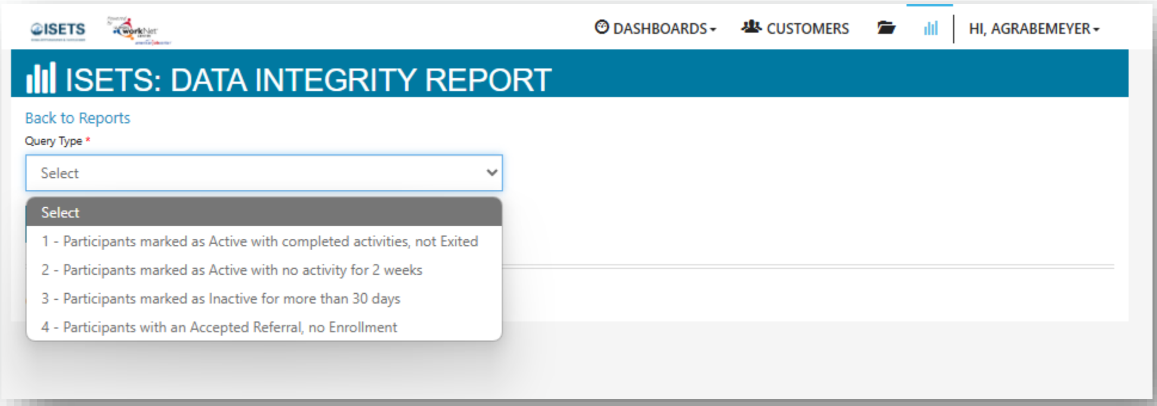
Data Integrity Reports

This set of reports is available to ISETS Super Users. Much of this data is available in the dashboard for individual Providers. However, if IDHS desires a more comprehensive list that includes multiple providers, this set of reports is available.

These reports are as follows:

1. Participants marked as Active with completed activities, not Exited
2. Participants marked as Active with no activity in 2 weeks
3. Participants marked as Inactive for more than 30 days
4. Participants with an accepted referral but no enrollment

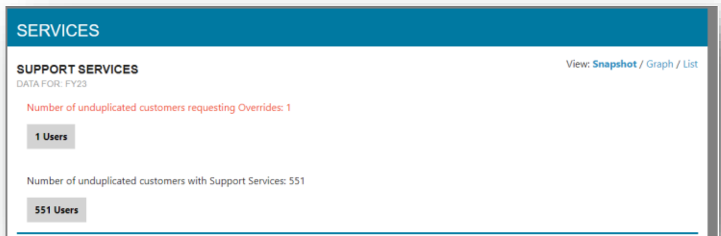
These reports have no filters but return an all-time list of customers who meet this criteria in the system. These lists are intended for use in remediating common "errors" and ensuring accurate reporting to FNS. These reports can all be exported as well.

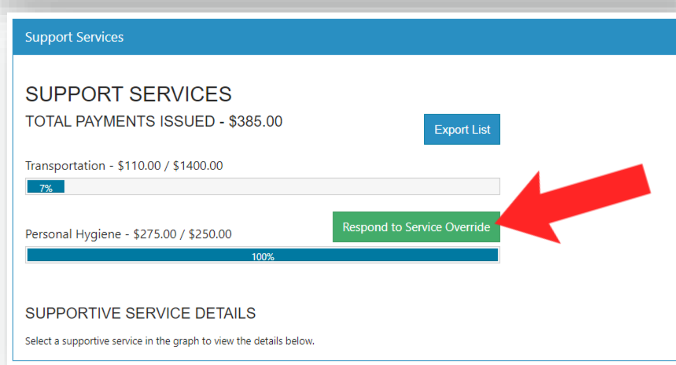


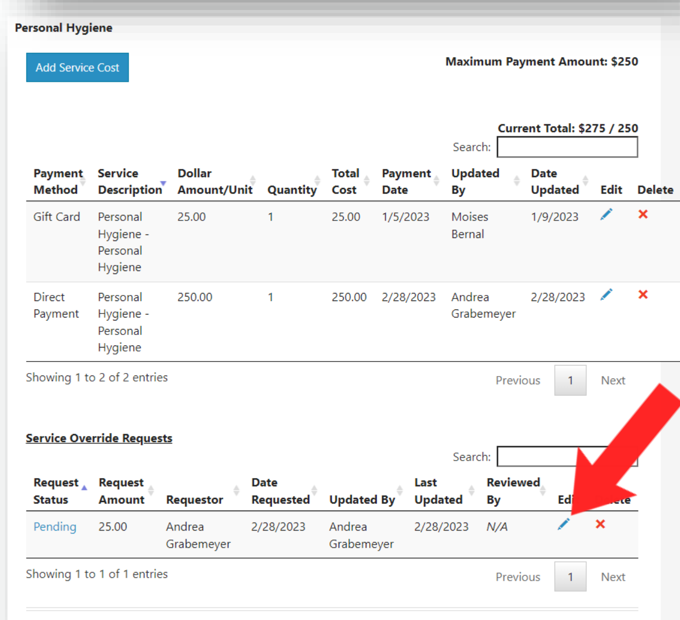
Approving Supportive Service Cost Overrides

When a Provider enters a supportive service cost that will exceed the maximum allowable payment for that category, ISETS will automatically prompt them to request a cost override. This means that an IDHS Program Manager must approve the overage, verifying that it is reasonable and necessary for the customer to reach their self-sufficiency and employment goals.

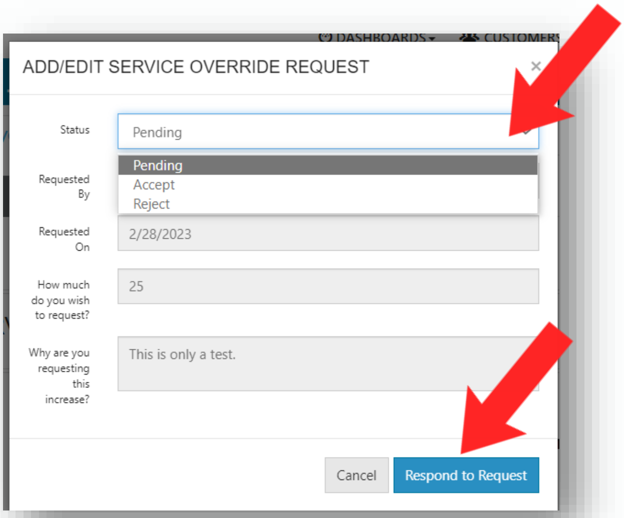
1. To find override requests, view the Supportive Service section of your dashboard.
2. Click on the box with the number of requests.
3. Click on the name of the first customer with an override request in the list and navigate to the supportive service section in the Overview.
4. Click on the green “Respond to Service Override” button. The service will open in a new tab.
5. Click on the “Dollar Value of Service” tab. There you will see the override request below the other costs entered.
6. Click on the pencil icon.
7. Review the explanation and the amount.

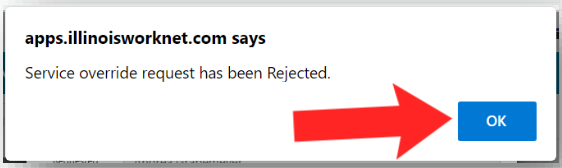






8. Click on the Status dropdown and select “Accept” or “Reject”.
9. If you choose “Reject” a field will open asking for an explanation. Add your reason for the rejection here.
10. Click the blue “Respond to Request” button.
11. A popup will appear confirming your acceptance or rejection. Click “OK”.





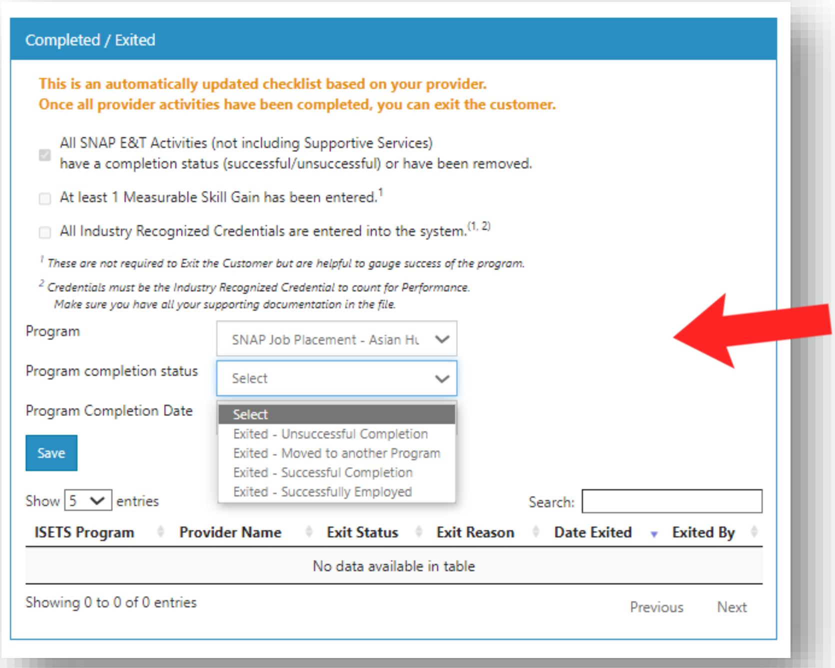
Exiting Customers from E&T in ISETS

A customer may exit SNAP E&T for several reasons:

- a customer voluntarily exits the SNAP E&T program either before completing activities or after completing activities.
- a customer becomes ineligible because either their SNAP benefits have ended or they have started to receive TANF benefits.
- a customer has become employed and completed their 365-day retention maximum.

When a customer is exiting SNAP E&T there are several actions Providers must take to ensure that they are Exited in ISETS.

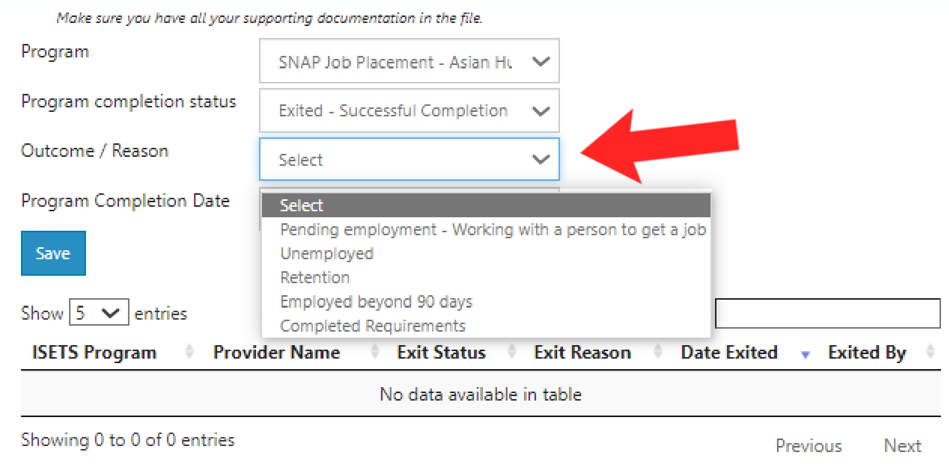
1. In the customer record, the Provider must locate the customer's activities and edit those activities to reflect the appropriate completed status and the date they have completed those activities (or the exit date if they never technically completed them). Please see the "Adding and Managing Activities" section in this manual on how to edit these.
2. After all activities have been closed with an actual end date, the Provider may go to the Completed/Exited section in the Overview tab on the customer record. You can also find this section in the Outcomes tab at the top of the customer record.
3. The Provider clicks on the Program dropdown and selects their program.
4. Then they click on the dropdown menu and choose the appropriate Program Completion status.



Note: activities which were never started must be deleted prior to exiting the customer.

a. **Unsuccessful Completion:** customer did not complete the program and had no positive outcomes (skills gained, credentials, or employment)
b. **Moved to another program:** customer moved to TANF E&T, WIOA, or to another state.
c. **Successful Completion:** the customer successfully completed training oe program requirements and is ready to end their participation.
d. **Successfully Employed:** the customer was successfully employed for over 90 days with a job over 20 hours/week.

4. Another drop down will appear with more details. Select the most appropriate "Outcomes/Reason"
5. The Provider enters the Program Completion date.
6. The Provider clicks the "Save" button.



You will be prompted to add case notes describing the circumstances of the customer's exit. It is a good idea to note in this case note whether they are eligible to return to your agency later or not.

Once exited, a customer's referral status and SNAP E&T status will be changed to "Exited". Activities and Services will be saved and locked. Post-exit employment or follow up case notes can be added for up to 60 days but no further edits on activities or services are allowed.

Best Practice

If a customer is exited and re-enrolls in SNAP E&T later, Providers must conduct a new assessment, referral, and enrollment. Activities and Services will need to be added for the new SNAP E&T session.

Providers should NEVER edit Activities for a previous enrollment period after a customer is exited.

Reporting

Reporting is an important part of fulfilling your role at IDHS and is done through generating and reviewing generated reports which pull data from ISETS. IDHS staff review the reports Providers submit monthly at least. IDHS staff may also generate and review reports at any time during the month to ensure data is accurate or may generate quarterly, half-year, or year end reports as well.

Reports are an indication of the services Providers are providing to customers, an agency's performance toward goals, and they contribute to IDHS making data-driven policy and contract decisions. Future contract awards and appropriations may be determined by reviewing these reports.

Roles

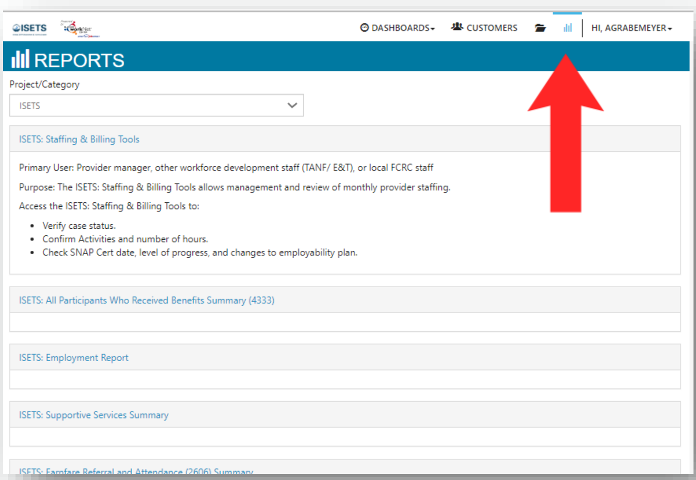
Provider staff are responsible for entering data on a day-to-day basis which populates monthly, quarterly, or year-end reports. Providers are responsible for ensuring the accuracy of this data.

Provider Managers are responsible for reviewing their Providers' data including customer records and progress toward overall contract goals. They are responsible for scheduling and holding a monthly staffing meeting with each Provider to review the contents of reports. Provider Managers are also responsible for answering any questions, clarifying policies, and discussing any unusual situations with Providers to reach resolution.

IDHS Workforce Development (WFD) staff are responsible for representing IDHS and verifying customers are eligible. WFD staff are also responsible for reviewing referrals from FCRCs and distributing those to appropriate Providers through ISETS. WFD staff may also play a role in verifying Provider data is complete and accurate and reporting inaccuracies to Provider Managers to address with Providers.

1. Select the "Reports" icon on the top menu bar.

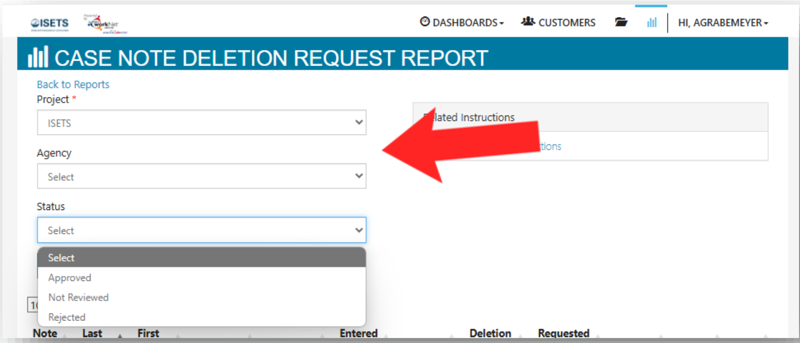
All available reports are listed individually depending on your role and access. Some reports described here may not be available to you individually, but you should know that they exist.



Administrative Reports

Case Note Deletion Request Report

IDHS Managers are responsible for reviewing and processing requests for case notes to be deleted from ISETS. Providers are not able to delete their own case notes. This is to prevent data from being deleted which may be valuable in an audit. Only Super Users have access to this report and only IDHS Management staff have the authority to approve or deny cast note deletion requests.

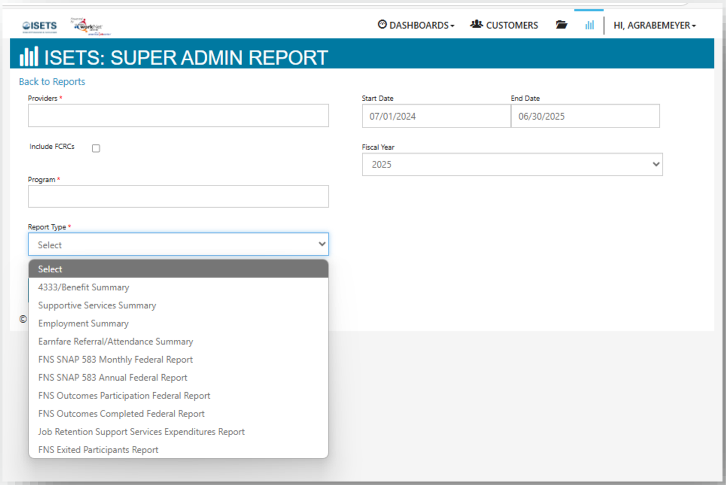


To review requests, navigate to this report and

1. select the “Not Reviewed” status. A list of notes will be available to review.
2. Click on the blue “Manage” text in the far right column.
3. The note will appear in a pop-up box and the name of the requestor, the date, and the deletion reason will all be listed for your review. For requests that indicate the note is a duplicate, the best practice is to navigate to the case notes for that customer and verify that there are 2 identical notes.
4. Change the status to “Approved” or “Rejected” and hit the “Save” button.

Super Admin Report

IDHS Super Users have access to a suite of reports that allow larger reports to be run including multiple Providers, multiple Programs, and flexible timeframes. These reports are intended for IDHS Administrative reporting use.



Data Integrity Report

This report was discussed in the [Ensuring Partner Data is Accurate]section. Please refer to that section for more about this report.

Amended Report History List

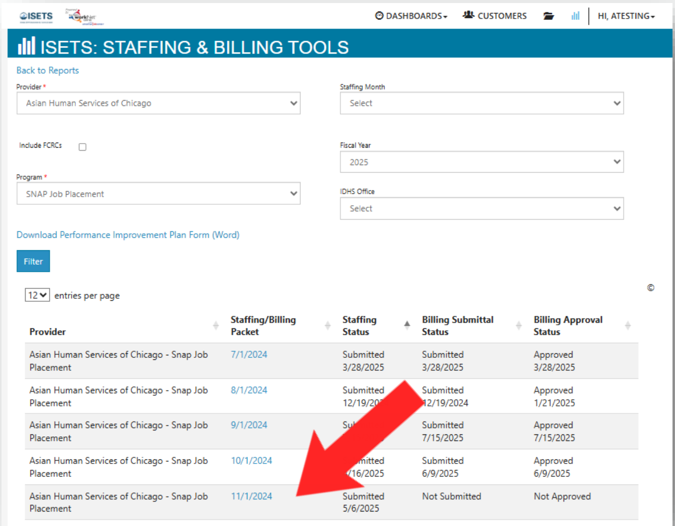
This report shows IDHS Administrative staff a history of all amendments requested and approved for Providers. The purpose is to be able to review statistics on how frequently Providers are submitting amendments to inform training and program improvement decision making.

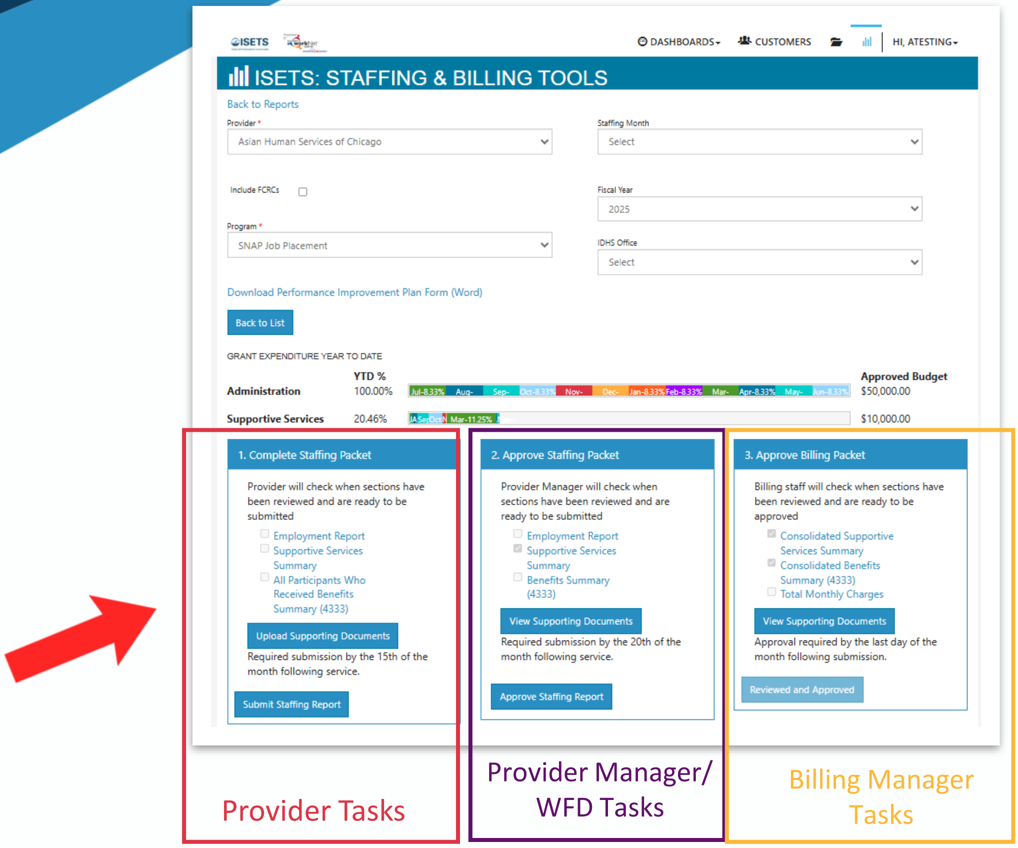
Monthly Performance Reporting

Staffing & Billing Tools

1. Select the blue "ISETS Staffing & Billing Tools" link and a page will open with filters at the top.
2. Select the Provider, Program, and the Month for which you need to complete your Staffing. Note: Staffing reports from Providers are due on the 15th of the month following the close of a month. For example, July's Staffing report is due August 15th. Provider Managers' portion is due by the 20th of the month.
3. To display all Staffing reports for all months, leave the "Staffing Month" dropdown blank (Select).
4. Click the "Filter" button
5. You will see a list of your Staffing/Billing Packets, when they were submitted and when they were approved.
6. To view the details of a specific Staffing report, click the blue linked date on the left-hand side of the list. To edit or submit a report that has not yet been submitted, you must also click the blue linked date In the Staffing/Billing Packet column.

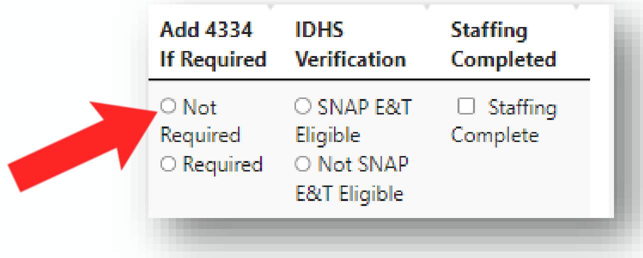
Staffing & Billing Costs Color Differences
Red font – override approved
Gold Triangle – pending override
Red Triangle – change to staffing

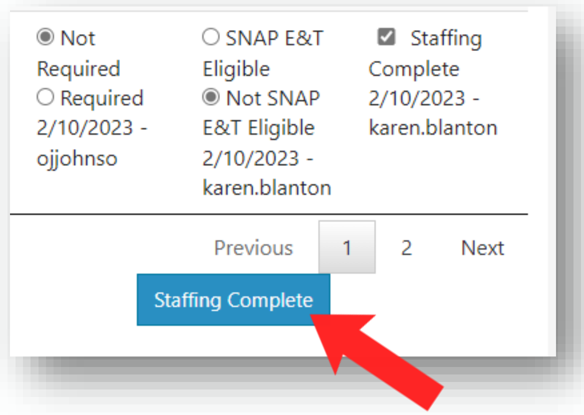


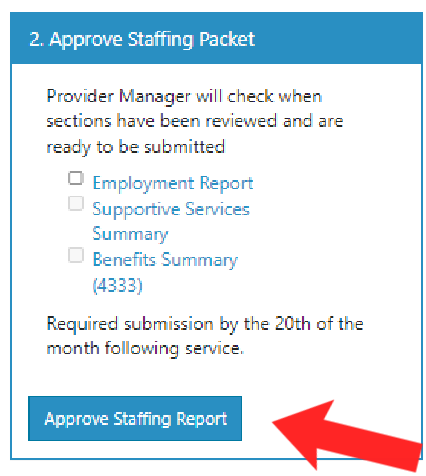


7. The first section titled “Complete Staffing Packet” is where Providers should begin.
8. Providers should have generated, reviewed, and checked each of these boxes in preparation for your staffing. To review each of these reports, click on the blue linked text.
9. Click on the first blue linked report: “Employment Report”. Verify that this report is correct including all employment verifications (they should all say “Yes – Document Uploaded”). If there are any employment placements that say “No” under the verification column, click into that customer and view the employment. If there is a document, review it and verify it. If there is no employment verification address this with your Provider.
10. Then click on the next blue linked report: “Supportive Services Summary”. Verify that all data in this report is correct and complete and no further changes are needed for billing.
11. 4333: Review this list and ensure that all active customers are included. If a customer is missing, note that to discuss with the Provider during the staffing. To be included in the 4333 a customer must:
    - Have an accepted referral
    - Are currently enrolled in a program. (This can be found on the left side of a customer record “Program Enrollment”)
    - Has an E&T Status of “Active” or “Retention”
    - Have an open SNAP Activity with dates that indicate that activity is active within the month of the report run
    - The SNAP Activity has your program listed as the Provider in the “Provider” tab.

12. Ensure all customer activities are appropriate and no customers need data corrections.
13. For each customer, the Provider should have made sure that their Progress Level is correct and clicked the radio button indicating if a Full Staffing/4334 is required. Clicking this radio button means that they Provider needs to have a discussion with a Provider Manager (potentially including the customer) to discuss their progress and participation in the program.
14. WFD staff should verify eligibility for SNAP E&T and click the appropriate radio button for “IDHS Verification”
15. Provider Managers should check the “Staffing Complete” box when the staffing has been completed.
16. When the staffing is completed, Provider Managers should ensure all boxes are checked in the list then click the “Staffing Complete” button at the bottom of the page.
17. Return to the “Staffing & Billing Tools”.
18. Review any monthly financial reports and ensure that these numbers match what the Provider has submitted in the Expenditure Documentation Form (EDF).
19. Make sure all boxes are checked next to each report in the second box labeled “2. Submit Billing Packet” then click the blue “Approve Staffing Report” button.
20. This completes the WFD/Provider Manager portion of the Staffing.
21. IDHS billing staff will review the reports and approve them. Billing staff submit for payment through another process.

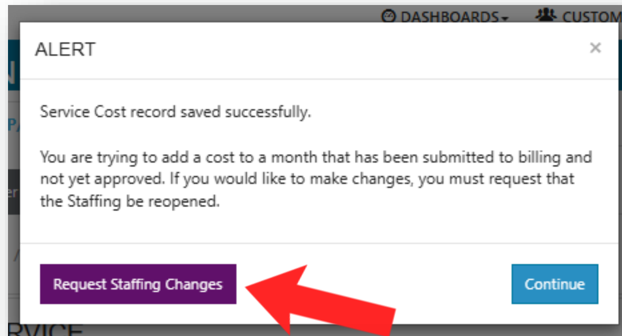






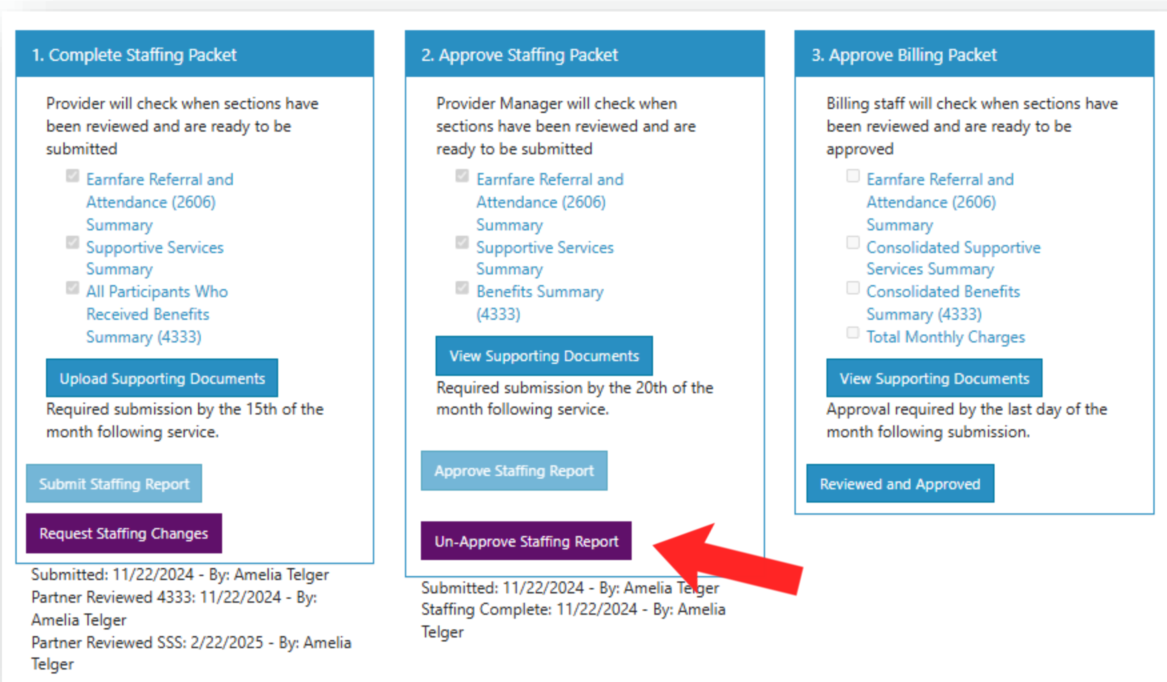
Note: Customers enrolled in some activities for 6, 9, or 12 months consecutively may have a 4333 required. In these cases, the “Not Required” radio button will be greyed out and they MUST be discussed during the staffing.

Note: Once the Staffing is held and the Provider Manager clicks their button to “Approve Staffing Report”, this button will lock all data for the month. Any subsequent changes by a Provider will require the Provider Manager to unlock the staffing report and re-approve it before billing can approve the Billing packet.



Reopening a Staffing

Prior to a Billing Manager approving the Staffing & Billing report, a Provider may request to reopen the monthly reporting module. If they add costs or make changes in the time period after the Staffing is completed and approved by the Provider Manager but before the Billing Manager has approved and locked the report, the Provider will see a pop up like the one above. The Provider can also go to the staffing in question and click the purple button to request that the Provider Manager reopen the Staffing to make changes. The Provider Manager can click on the purple button “Un-Approve Staffing Report” to back out their approval and reopen the staffing.

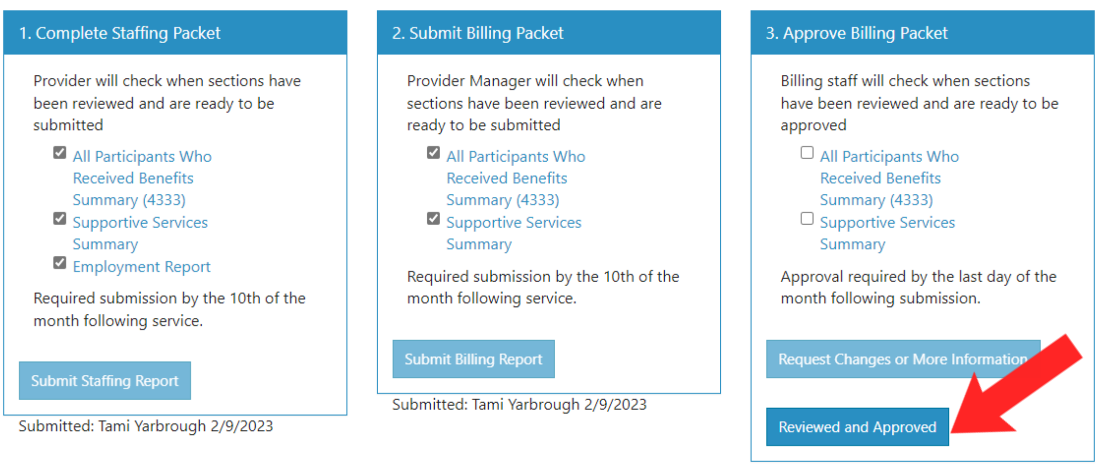


The Provider Manger may need to hold another meeting with the Provider to review and approve changes before approving the staffing again. Then Billing can review and approve their part.

After the Billing Manager has accepted the Staffing & Billing report for the month, the Staffing & Billing is locked; no further changes are allowed, even with Provider Manager approval. In that case, an official billing amendment is required. That process outlined below.

Billing

The third part of the Staffing & Billing Tools module is the box labled “3. Approve Billing Packet”. This box is only for IDHS SNAP E&T Billing staff.



This section is where billing staff can review, download reports, and request changes or more information from Providers prior to approving the Billing Packet and submitting for vouchering.

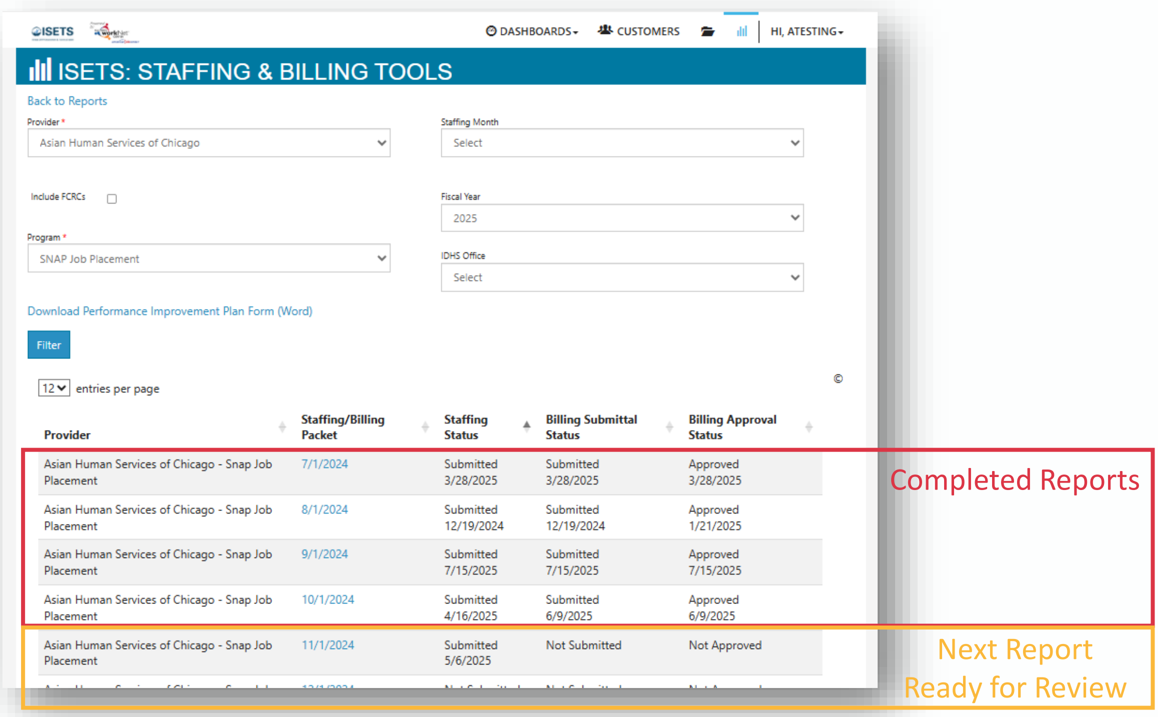
Each report listed should be reviewed for billing accuracy and the box checked by a billing staff member if accepted. If not accepted, click the blue “Request Changes or More Information” button. This button should be used if the billing staff person requires an uploaded receipt or other documentation or if the expense is otherwise not authorized.

Once the “Reviewed and Approved” button is clicked by a billing staff person, it is assumed that the documentation for that month is complete and authorized for vouchering. The billing staff person can download any data required and/or submit for vouchering through the appropriate financial system (not ISETS).

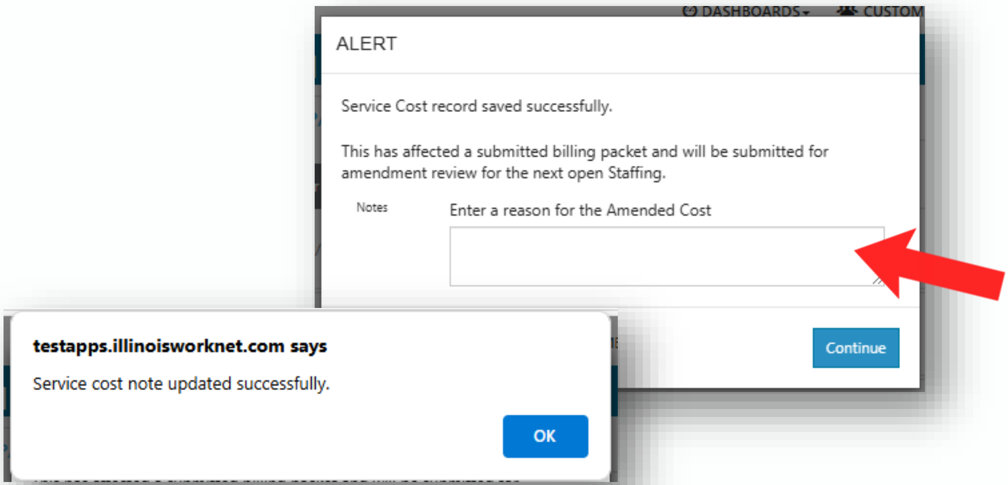
Staffing & Billing Amendments

Amendments are changes that impact past reports that have already been submitted, approved, and locked. These changes may include costs or not. Changes that do not include costs are made and automatically accepted on a provisional bases until IDHS staff review them in the next available staffing. Provider Managers review these changes and approve them to be saved in the system and reflected in final reporting. Changes that include costs must be reviewed and approved by a Billing Manager.

If a monthly Staffing & Billing report is already approved and locked as in the example of July, August, September, or October in the screenshot here, any changes the Provider makes will be saved in ISETS and will be available to review in the next available staffing, in this case November.



If a Provider adds a Supportive Service cost that applies to a past month for which the reporting is already closed, they will see a pop-up alert like this:

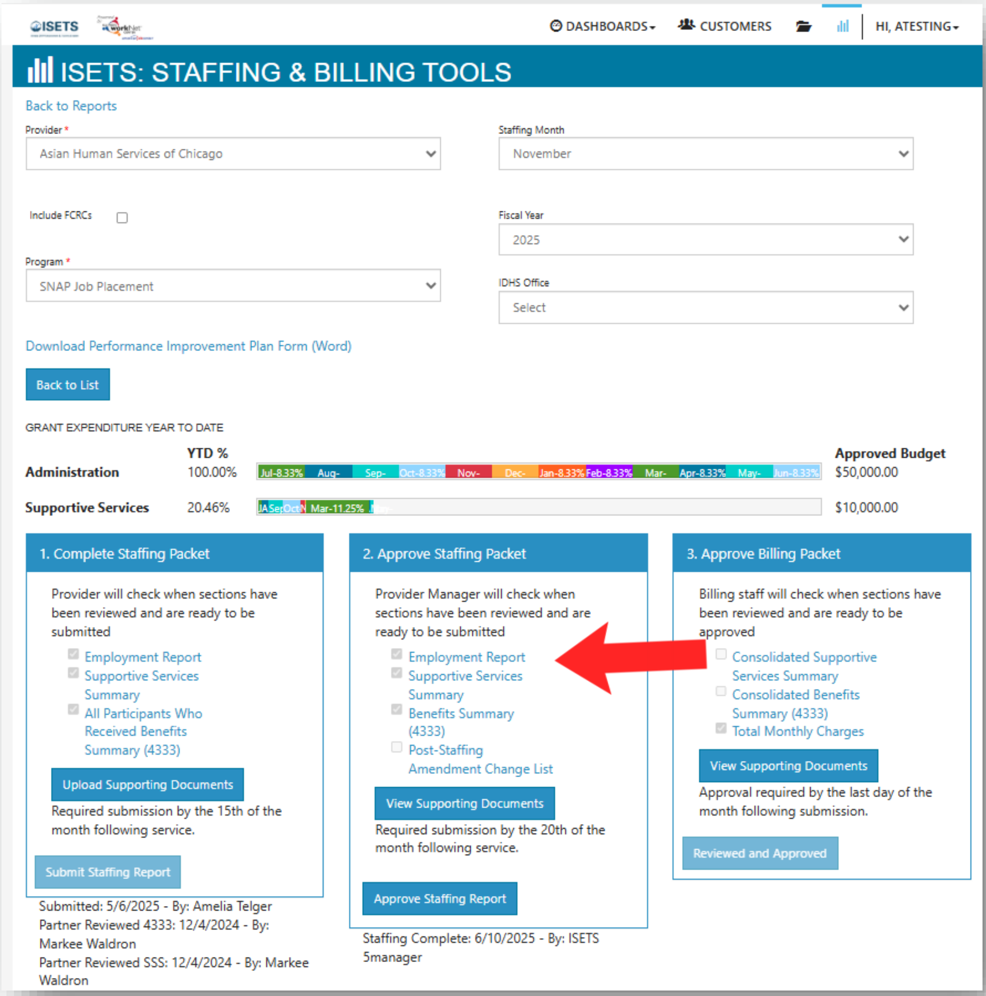


Once the amended cost reason is entered and submitted the Provider will see a confirmation message like the one above.

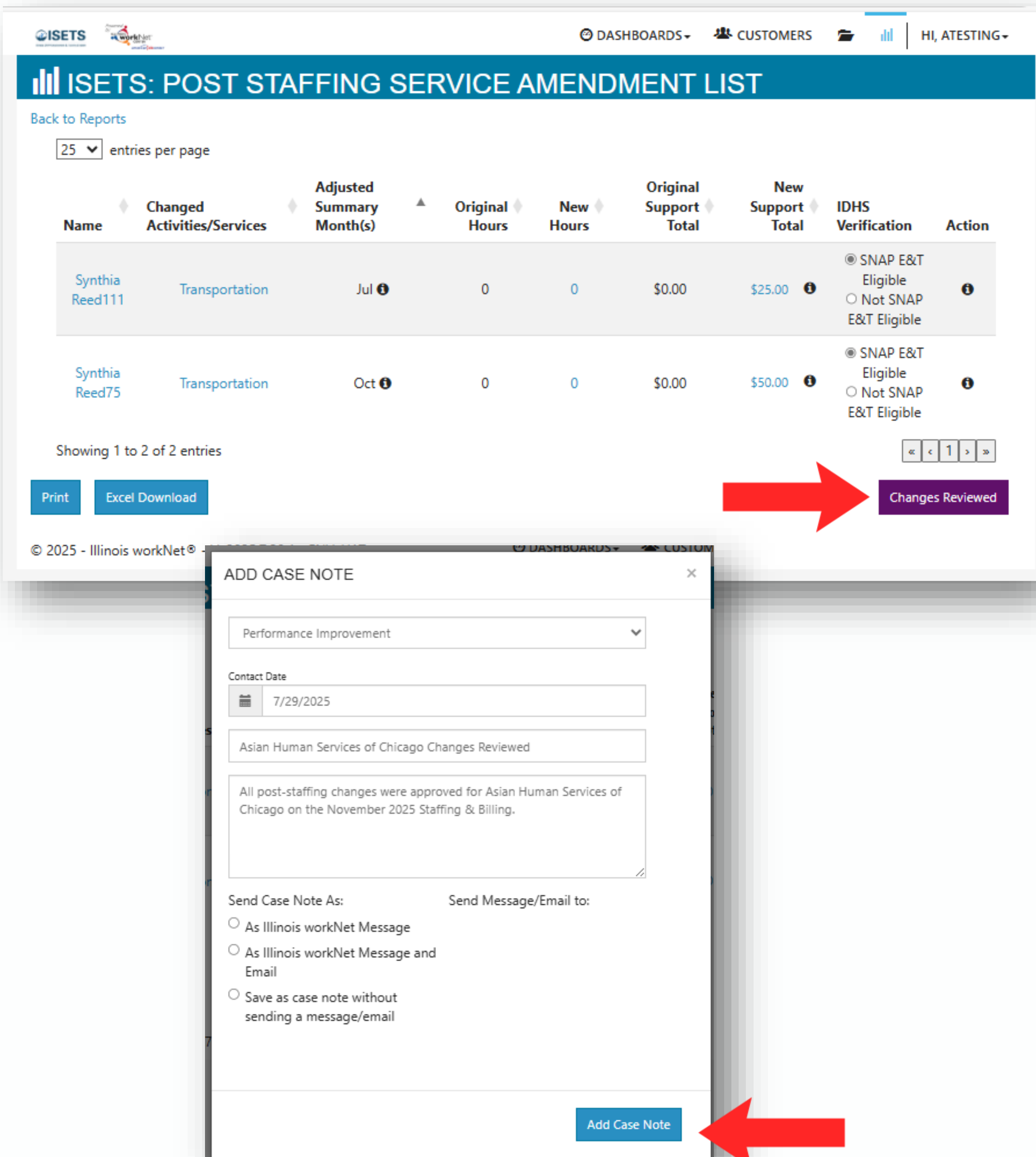
Staffing & Billing Tools

1. Select the blue "ISETS Staffing & Billing Tools" link and a page will open with filters at the top.
2. Select the Provider, Program, and the Month for which you need to complete your Staffing. Note: Staffing reports from Providers are due on the 15th of the month following the close of a month. For example, July's Staffing report is due August 15th. Provider Managers' portion is due by the 20th of the month.
3. To display all Staffing reports for all months, leave the "Staffing Month" dropdown blank (Select).
4. Click the "Filter" button
5. You will see a list of your Staffing/Billing Packets, when they were submitted and when they were approved.
6. To view the details of a specific Staffing report, click the blue linked date on the left-hand side of the list. To edit or submit a report that has not yet been submitted, you must also click the blue linked date In the Staffing/Billing Packet column.

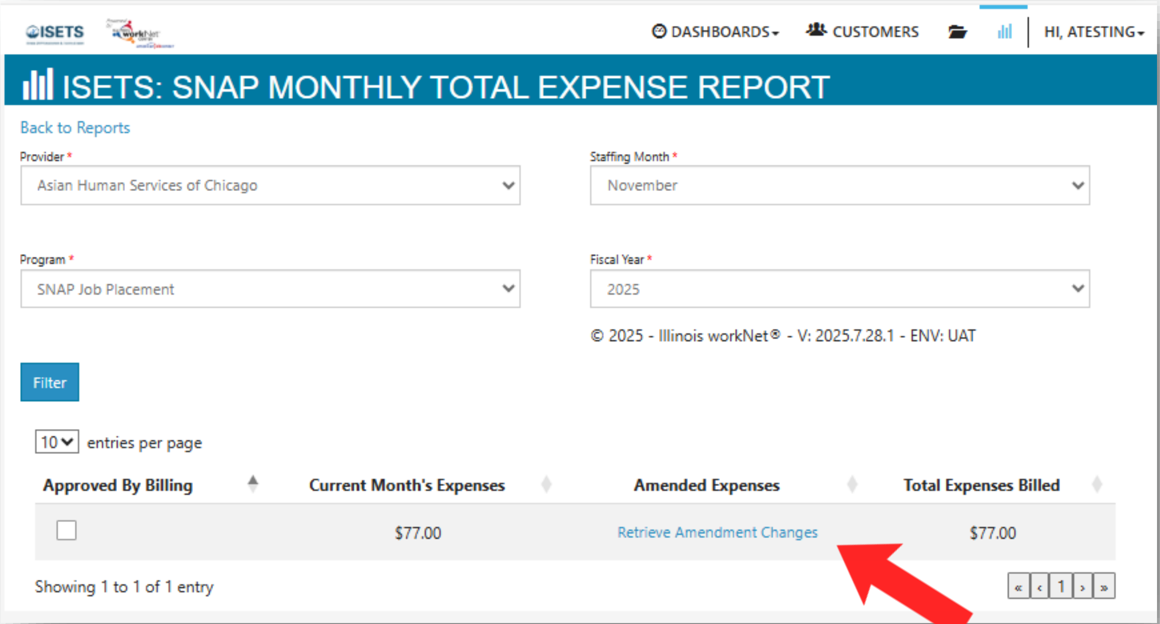
When reviewing and approving the next Staffing & Billing report, all data for the month (in this example November) will be reviewed and submitted as usual. You'll notice that there is appears a report to review called "Post-Staffing Amendment Change List". This report only appears if amendments have been made. The Provider Manager should click on this report to review it.



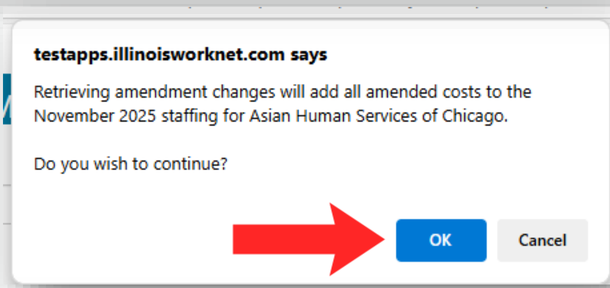
This report contains all amendments that have been entered since the last Staffing & Billing was completed. All blue text is a link to that Customer/Service/cost for your reference. Click the purple “Changes Reviewed” button to certify that all changes have been reviewed by IDHS staff. You will also be prompted to enter a case note (a boilerplate draft will be provided for you).

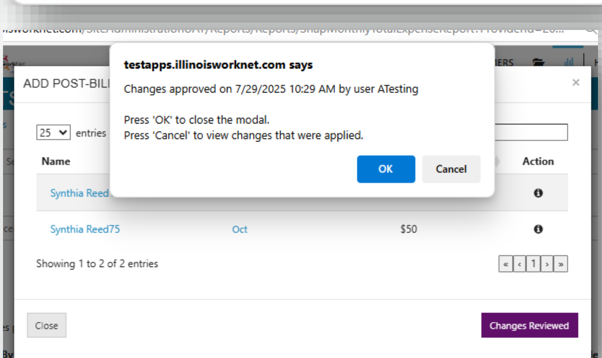


During the Billing Manager review, the Billing Manager will review all current month data as usual. Then when viewing the “Total Monthly Charges” report, if amended costs have been added, they will see blue linked text, “ Retrieve Amendment Changes”, in the Amended Expenses column. To review and include those expenses in this month’s billing, click the link.

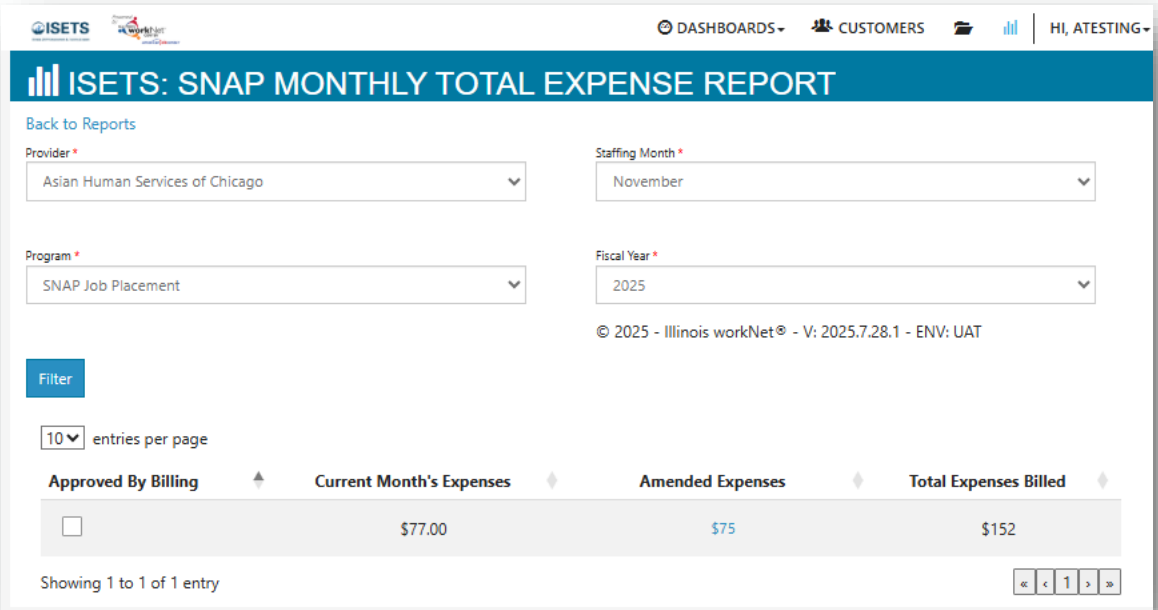


A pop-up notice will appear. If you only want to review these and NOT include them in the billing, click “Cancel”. If you want to pull those costs into the current monthly bill, click “OK”. Another pop-up will appear with a notice that the changes were approved by the PM during their review. Click “Ok” to close the modal and simply view the total amended charges. Click “Cancel” to review all amended charges line by line. You can see the name of the customer, the month the cost was given, and the total cost. Remember that blue text are links for your reference. Click “Close” to close the pop-up.





You should now see the total of all Amended Expenses in that column. If approved, check the "Approved by Billing" box and complete the staffing as usual.



Expenses Documentation Form (EDF)

The EDF is a spreadsheet document usually completed by Provider financial staff and submitted by the 15th of the month as a part of the Staffing & Billing process. These are typically uploaded in the ISETS Staffing & Billing module and/or sent to the Provider Manager to review as a part of the Staffing. Expenses listed in the EDF for billing should match the results of ISETS reports. If this document does not match what is in ISETS, like the PPTT, that discrepancy must be resolved during the Staffing & Billing process before Billing will be approved.

Best Practice

Ensure that amendments and costs are reconciled every month rather than waiting several months. This ensures that end-of-year billing and reconciliations are easier.

PPTT
At the time of last review, the PPTT (Periodic Performance Tracking spreadsheet) is not required in addition to the Staffing report in ISETS. In FY26 this separate spreadsheet may have already been discontinued for some Providers. However, if your Provider is still using the PPTT, both are due on the 15th of the month following the close of a month. Please ensure that the data in a Provider's PPTT matches what is in all of the ISETS reports. Provider Managers should review both and note findings or discrepancies during the monthly staffing.

More about comparing the PPTT to ISETS data is outlined in the "Ensuring Partner Data is Accurate" section.

Best Practice

Provider Managers should also review the Provider's overall progress toward contract goals. This can be done through reviewing the contract in the Provider Info tab or reviewing the dashboard.

Monthly Performance Reporting Cont.
Reports included in the Staffing & Billing module can also be run ad hoc. They are as follows:

Overall Staffing Report
Similar to the Reports section in the dashboard, this report shows Provider monthly reports and their statuses, submission/approval dates. An user with access to this report can select multiple Providers, multiple programs, months (or select no month to show all months). This allows users to see all monthly reports in one ledger to manage timely submission and approval of these reports.

All Participants Who Received Benefits Summary (4333)
This report allows users to create and review monthly 4333 reports. It includes all customers who have received services within the month. In order to be included on the 4333 a customer must meet certain criteria. That criteria is outlined in the Staffing & Billing section.\

Supportive Services Summary
This report shows customers who have received supportive services and the amounts and categories of those services. Any amount in red indicates an override request within that month.

Earnfare Referral and Attendance Summary (2606)
This report is for Earnfare Providers only and includes each customer served, the hours they are required to work, the actual hours they worked during the month and their progress toward the maximum Earnfare time.

Employment Report
This report shows which customers have gained employment while participating in SNAP E&T for a specific Provider. Each of these employed customers should be enrolled in Job Retention if the placement is over 20 hours/week. Each customer in retention should receive at least monthly contact for the first 90 days in retention. They may receive case management and supportive services and participate in the Job Retention Activity for up to 365 days. Additional employment verification is required within 30 days of a supportive service if a customer is beyond the first 90 day retention benchmark.

Best Practice

Intermediary Partners are responsible for reviewing all reports for all subcontractors underneath them prior to submitting consolidated reports to IDHS for review and approval.

Intermediary Reports
Consolidated reports are intended for Intermediaries who have subcontractors underneath them. This report

Consolidated Benefits Summary (4333)
This report shows a report of all subcontractor Providers and their total activity service numbers for a given month.

Consolidated Supportive Services Summary
This report shows a report of all subcontractor Providers and their total supportive service numbers for a given month.

Consolidated Snap To Success Financial Report
This report allows an Intermediary to create, submit and edit monthly financial reports.

Financial Repots

SNAP 2 Success Financial Report
This financial report is only for SNAP 2 Success Providers and is due each month as a part of the Staffing and Billing. For S2S providers, this will show automatically in Section 1 of the Staffing & Billing module.

SNAP Job Placement Financial Report
This financial report is only for SNAP 2 Success Providers and is due each month as a part of the Staffing and Billing. For S2S providers, this will show automatically in Section 1 of the Staffing & Billing module.

Quarterly Interest Report
This report will appear quarterly in the Staffing reports required. It is a reporting of any interest accrued by funds paid to you by IDHS. This report will automatically show in Section 1 of the Staffing & Billing module when due.

SNAP Monthly Total Expense Report
This report shows monthly total expenses for a specific Provider for a specific month.

Ledger Report
This report shows all monthly expenses by category. Users may use this report to review financial reports submitted and approved over multiple months and compare spending against contract budgets.

Other Performance Reports

SNAP Activity Attendance Report
This report gives a comprehensive report of all customers who have been served within a date range and the activities and total attendance hours. This report includes ABAWD status.

Provider Employment Report
This report allows an administrative level report to show employment outcomes by Provider for a program year.

FNS Report
This set of reports is used by IDHS Administrative staff to generate data to report State SNAP E&T performance to FNS.

Year End Reports
This report is only available to Super Users. IDHS Administrative staff may generate, review, and download reports across multiple providers, across multiple programs, for a specific time period. The purpose of these reports is to glean insights intended to contribute to program improvements and policy changes

Periodic Performance Report
This report is due quarterly and will also automatically appear in the Staffing reports required. This report has nothing for the Provider to fill out but is based on data entered in ISETS. Quarterly totals are unduplicated counts as is the annual total. For example a customer served in all 4 quarters would show up as 1 count in each quarter and 1 count in the Yearly Total. (see image on next page)

ISETS DASHBOARDS CUSTOMERS HI, ATESTING

ISETS: PERIODIC PERFORMANCE REPORT

Back to Reports

Provider *: Asian Human Services of Chicago

Fiscal Year *: 2025

Program *: SNAP Job Placement

Click Here for the Fillable PPR Form
Click Here to Upload the Completed PPR Form

Search

Name	Q1	Q2	Q3	Q4	Total
Number of Referrals Received	0	2	6	3	11
Number of Referrals Accepted	0	1	5	2	8
Number of Reverse Referrals Sent	0	2	21	5	26
Number of Customers Referred to other Providers	0	0	0	0	0
Number of Customers Assessed/EP	1	1	0	0	1
Number of Customers Engaged in SNAP E&T	3	3	5	7	7
Number of Customers Referred to Mental Health/Substance Abuse/Counseling and/or Vocational Rehabilitation	0	0	0	0	0
Number of Customers Enrolled in Training	1	0	1	2	4
Number of Customers Completing Training or Earning Certificiates	9	1	4	3	14
Number of Earned Credentials	0	0	0	0	0
Number of Skills Gained	0	0	0	0	0
Number of Customers Enrolled in Supervised Job Search, Job Readiness, or Work Experience	2	0	2	2	6
Number of Customers Ernolled in ABE, GED, or ESL Classes	0	0	1	0	1
Number of Customers Hired	3	0	0	0	3
Number of Hires in Growth Sectors	3	0	0	0	3
Number of Customers in Retention Services	3	0	1	0	4
Number of Customers that met 30 day benchmark	1	0	0	0	1
Number of Customers that met 60 day benchmark	0	0	0	0	0
Number of Customers that met 90 day benchmark	0	0	0	0	0
Number of Successful Completions	0	0	0	0	0
Total Expenditure Amount	492	454	1125	125	2196

Customer Service Report

The Customer Services Report provides a list of services provided to customers by project or Customer Support Center group. The list identifies the IWDS service if applicable, the status of the service, and the customer who have/do not have the listed service.

Credentials Report

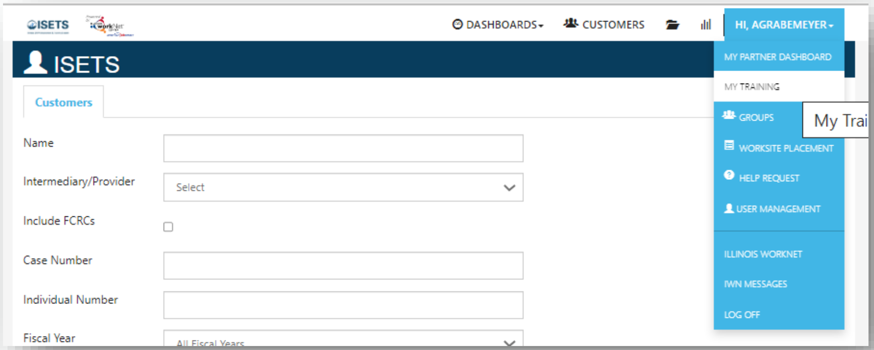
This report provides a list of all credentials earned in total by industry, Provider, type and timeframe.

Where to Get Help

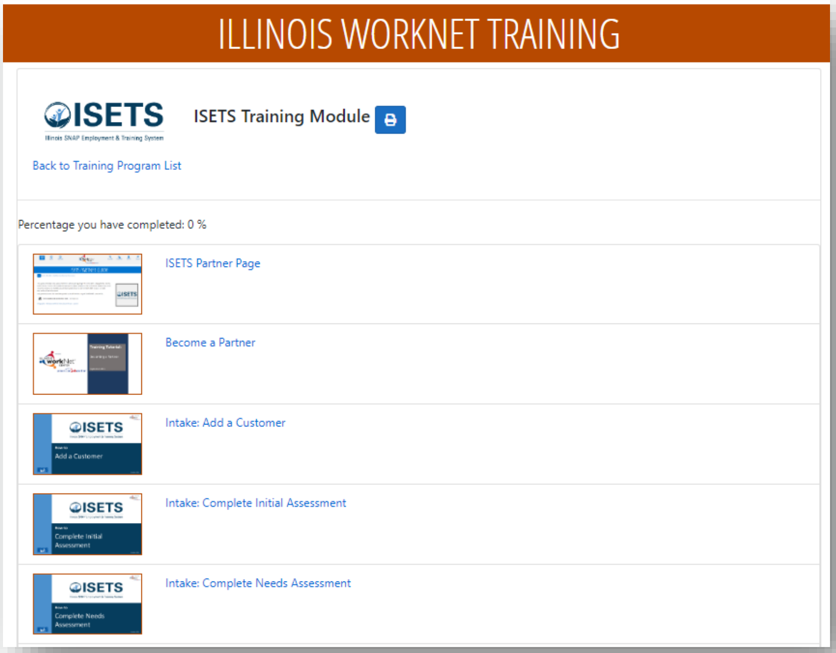
In ISETS there are several places to get help learning the new system or to get help with system issues. We have live virtual trainings hosted by the Chicago Jobs Council for Providers which are recorded and live virtual Technical Assistance calls every week. Resources, training recordings, and TA Calls can be found by accessing the ISETS Partner webpage: Workforce and Education Partners isets Partner Guide (illinoisworknet.com)

Accessing Training in ISETS

1. In the Username menu, click on the dropdown and choose “My Training” from the menu.

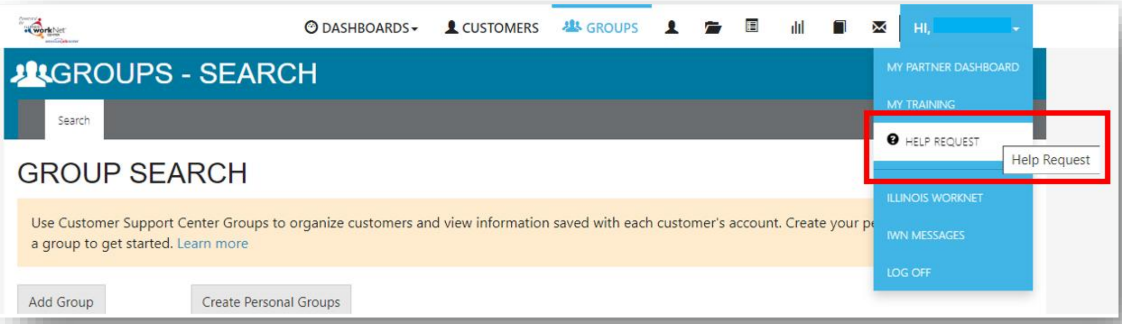


2. A new browser window will load called “Illinois Worknet Training”.
3. Click on the blue “Start the ISETS Training Module” link. Each module is listed there with a video walkthrough by subject matter.

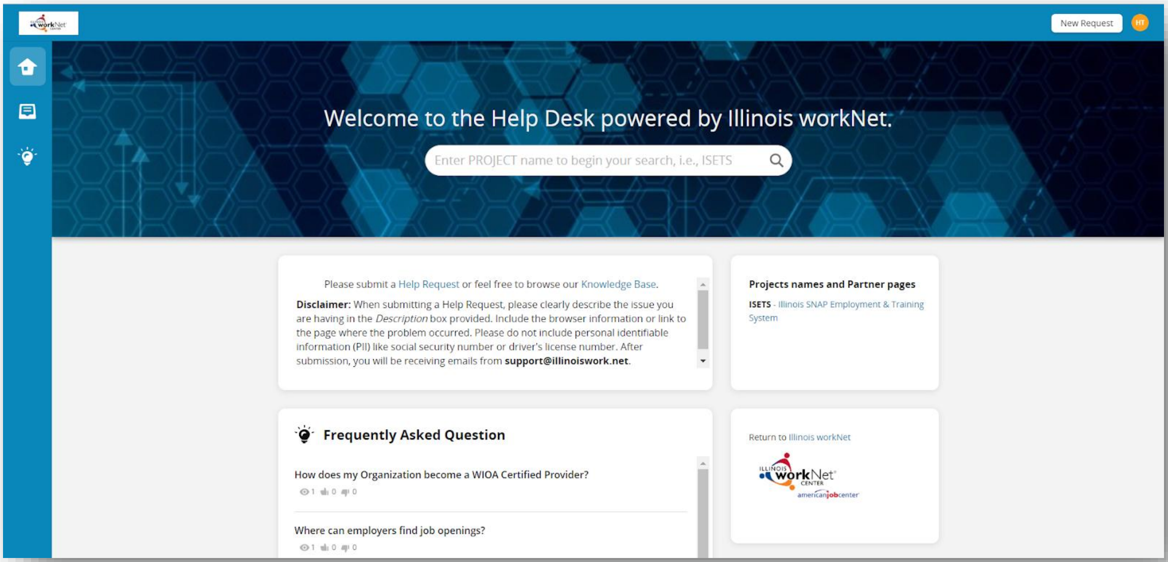


Submitting a new Help Request

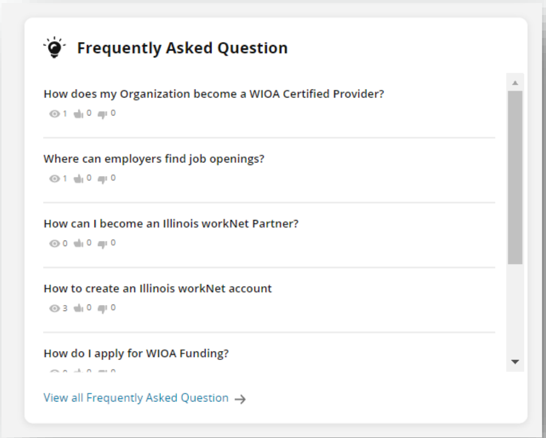
1. Click “Help Request” in the dropdown menu when in the Username Menu in ISETS.

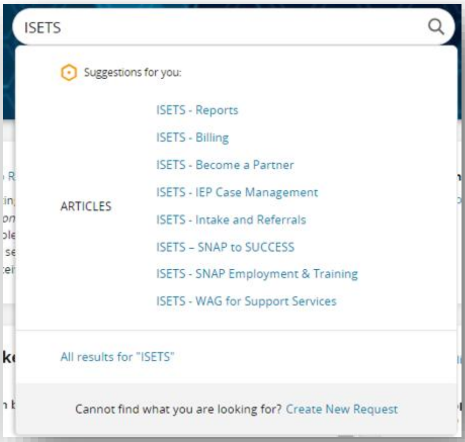


2. A new browser window will load called “Help Desk powered by Illinois workNet”.
   Options include:
   •Submit a new Help Request.
   •Browse Knowledge Base for answers to questions.
   •Browse Frequently Asked Questions.
   •Visit program partner pages.
   •Return to Illinois workNet.
   •View a video tutorial and/or written instructions.

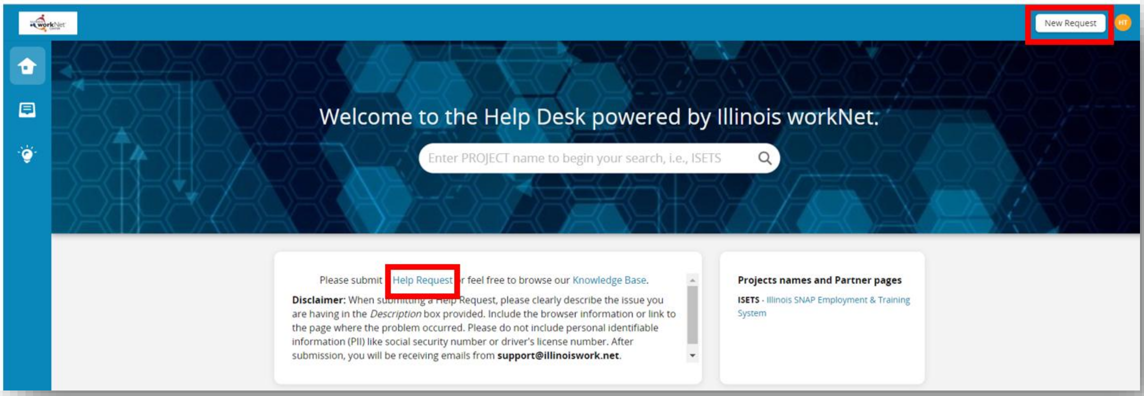


3. Before submitting a Help Request, utilize the Knowledge Base by browsing the **Frequently Asked Questions** and specific program articles. Articles can be searched by typing the program name in the search box.





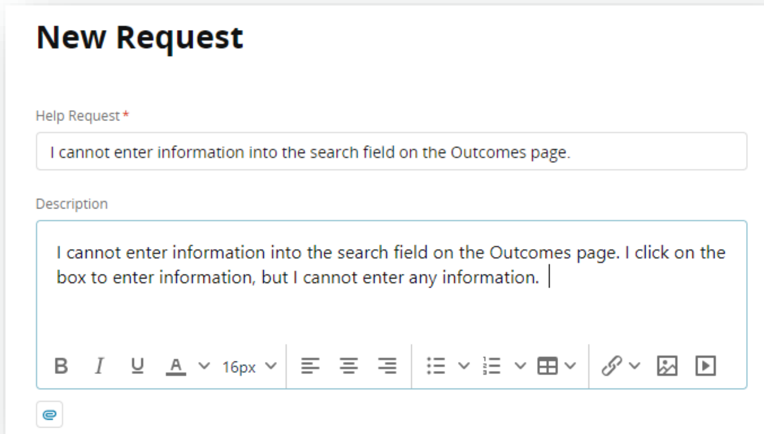
4. On the Home screen, submit a new Help Request by clicking Help Request in the middle of the page or by clicking New Request on the top right.



5. Begin filling out the new request. Complete the “Help Request” and “Description” fields.

The “Help Request” field is a summary of the issue.
For example: *I cannot enter information into the search field on the Outcomes page*.
This field is required.

The “Description” field is for clearly describing the issue.



The Description box allows you to:

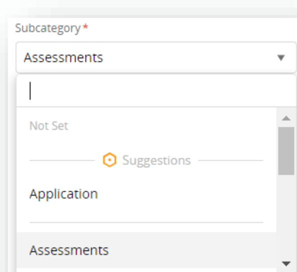
- Attach documents using the paperclip feature under the box.
- Insert pictures.
- Insert videos.
- Insert links.

Best Practice

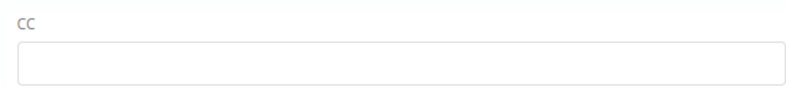
When describing an issue Include the browser information or link to the page where the problem occurred. DO NOT include personal identifiable information (PII) like a social security number.

5. Click the “Category” drop down and select ISETS from the dropdown. This field is required.

6. Click the “Subcategory” drop down. This field is required.



7. The “CC” field is not a required field, however, ISETS users should. You may want to include co-worker or managers in this field to notify them of the Help Request. Additional emails that may be used also include:
   ISETS Access - DHS.ISETS.Access@illinois.gov – to add additional users
   ISETS Policy - DHS.ISETS.Policy@illinois.gov – for questions about policy

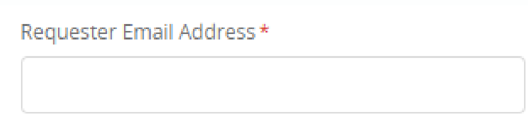


Best Practice

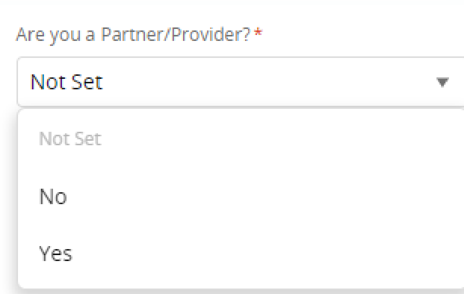
ALWAYS include your manager in the CC field in a Help Request.

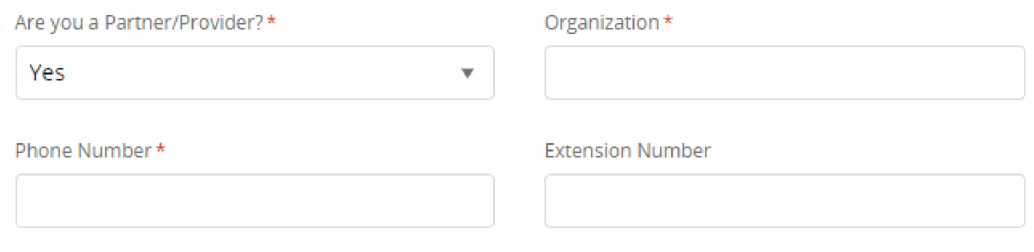
8. Add your name in the “Requester First Name” and “Requester Last Name” fields. Also add your email address in the “Requester Email Address” field. These are required fields.

Requester Email address should prefill the box. If it does not, enter the email address associated with the requester’s Illinois workNet account.

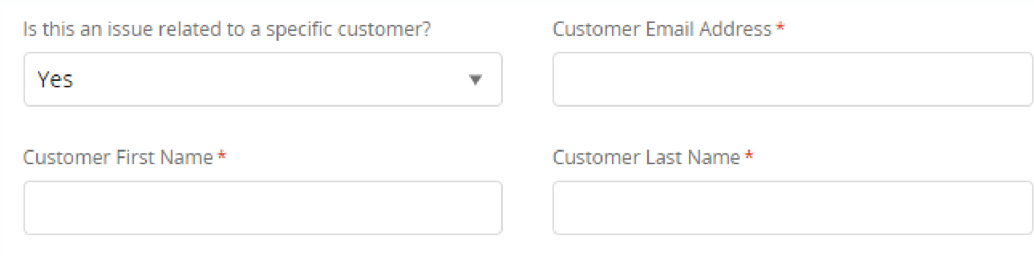


9. “Are you a Partner/Provider” is a required field. Select Yes or No.
10. The “Organization” field is not required for individual users but is required for Partner/Providers.
11. The “Phone Number” field is required for Partner/Providers. Add an Extension Number if applicable.

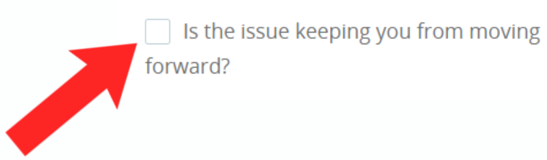




12. If this issue is related to a specific customer record, please select yes and add the customer email address, first and last name so ISETS staff can locate the correct customer record.



13. If this issue is preventing you from moving forward, please click the check box to indicate that so we can prioritize your request.
14. After reviewing the information entered, click Create at the bottom of the page to submit the new Help Request.



A notification email is sent (within minutes) following submission of the Help Request. Check your spam folder for emails from the Help Desk powered by Illinois workNet. Additional email notifications will arrive with follow-up comments and questions.

Reply to email messages within 14 business days or your Help Requests will be closed. Once the request is closed, a new help request will need to be created.

A final email notification is sent when requests are Resolved. Prior to marking an issue as resolved, the project manager for Illinois workNet, may send an update with actions taken to resolve the issue.

Viewing Your Help Request Tickets

1. On the Help Desk main page, click the "My Tickets" icon on the left hand side of the screen.
2. Click on the Help Request to view more details or comments.

The following should always be sent through the ticketing system:

- New user requests provided you give a birth date and upload the Il444-2022 form.
- Remove user requests provided the request comes from management staff authorized in ISETS.
- Errors or bugs in the system.
- Questions about where to find something or how to do something in ISETS.

SNAP Policy and program procedure questions will be directed to DHS.ISETS.Policy@illinois.gov and will cc your Provider Manager.

- Policy or procedure questions should be directed to your Provider Manager first.

All questions will be directed to the appropriate department and responded to within 48 business hours.

Any questions, concerns or update requests should be sent to DHS.ISETS.Policy@illinois.gov

Additional Training

Additional training can be arranged to assist you and your Providers. Because staff ability to perform individualized training webinars or virtual sessions is very limited, these are scheduled after all other training options have been consumed including:

- Online ISETS Training modules
- Recordings of past trainings
- Live TA sessions for Q&A
- This manual

Your manager will arrange specialized training sessions so that everyone in your role/team has the opportunity to attend. To request additional training, contact your manager.

To arrange additional training sessions for your Providers, please consult with your Providers to clarify what information/processes they need instruction on and when they are available. It is best to schedule several Providers to attend together if they all have the same need. Once you’re sure what training you need and for how many providers, submit a Help Request with the details.

Definitions

These definitions help clarify the language used in this manual and in the E&T Program.

- **Active:** A customer is considered in "Active" status in SNAP E&T if they are enrolled with a Provider and have at least one SNAP E&T Activity with the "open/started" status.
- **Employment:** A customer is considered employed when they are offered and accept a job offer and begin work. Customers employed for more than 20 hour/week must be enrolled in Job Retention and offered Job Retention supports for at least 90 days. Customers employed for less than 20 hours/week may participate in SNAP E&T as if they are not employed if they remain eligible.
- **Exited:** A customer is exited from the SNAP E&T program if they become ineligible, successfully complete the program, or when they Unsuccessfully Complete the program. Once a customer is exited, the intake, assessment, referral, and enrollment process must be completed again if they want to return to the program.
- **Inactive:** A customer is considered in "Inactive" status in SNAP E&T if they are enrolled but not currently participating in the program temporarily.
- **Job Retention:** Job Retention is a SNAP E&T Activity where customers are offered support to help them retain their job throughout the standard 90-day probationary period.
- **Other Activity**: Other allowable activities which are able to be tracked in the ISETS system but are not SNAP E&T Activities. A customer must be enrolled in a SNAP E&T Activity prior to being enrolled in any Other Activities.
- **Referral** – made from an agency or FCRC to an agency.
- **Reverse Referral** – made from an agency to an FCRC for approval for customer participation.
- **SNAP E&T Activity**: SNAP E&T Activities outlined in the SNAP State Plan. A customer must be enrolled in a SNAP E&T Activity prior to being enrolled in any Other Activities. A customer must also be enrolled in a SNAP E&T Activity prior to enrolling a customer in the Job Retention Activity.
- **Staffing:** A staffing is a monthly requirement for all Providers and their Provider Managers. This is a meeting to review all monthly reporting and to discuss individual customers who have become employed, are being exited from the program, or who require additional supports or a change in services/activities. This is an opportunity for Providers to get questions answered and get additional support from their Provider Managers.
- **Successful Completion**: When a customer completes a training class/activity earning a certificate of completion or an industry certification. This may also refer to a customer who obtains employment while participating in a SNAP E&T Activity.
- **Support Services** – SNAP E&T Support Services allowable under the Support Service WAG 21-06-11
- **Unsuccessful Completion**: When a customer stops participating in an activity without completing the activity/training. A more common term would be "dropping out" of the activity/training.

ISETS Permissions Rubric

Action	Partner	Inter.	Prov Mgr	Work Dev	Super Admin	Billing/ IES Data Sync/ Prog Mgr
IES data sync occurs monthly on the 5th, 13th, 20th and 27th.						IES
Invite and Enroll						
Search IES	x	x	x	x	x	
Add customer not in sync			x	x	x	
Initial Assessment	x	x	x	x	x	
Needs Assessment	x	x	x	x	x	
Update Assessment	x	x	x	x	x	
Approve reverse referral		x		x	x	
Accept referral from IDHS	x	x	x		x	
Follow-up response to a referral from IDHS	x	x	x		x	
Revoke referral consent	x	x	x	x	x	
Close referral				x	x	
Exit referral					x	
Edit a referral					x	
Remove Referral					x	
Enroll participant	x	x	x	x	x	
Edit Enrollment date					x	
Update name, address, email, phone, county, DOB, SSN, and ABAWD – through ABE so that IES gets updated					x	IES
Status Section						
Update Redetermination Date	x	x	x	x	x	IES
Update Midpoint Date						IES
Update E&T Status	x	x	x	x	x	IES
Custom E&T Status – history except during Retention	x	x	x	x	x	
Update Universal Assessment – Individual and Needs	x	x	x	x	x	
Update Level of Progress – ((auto update from 2606/2610)) manual except from Exit	x	x	x	x	x	
Custom level of progress date	x	x	x	x	x	

ISETS Permissions Rubric

Action	Partner	Inter.	Prov Mgr	Work Dev	Super Admin	Billing/ IES Data Sync/ Prog Mgr
Status Section						
Update Employment Verification – auto update from employment	x	x	x	x	x	
Update SNAP Case Number	x	x	x	x	x	IES
Update SNAP Eligibility Status			x	x	x	IES
Custom Eligibility status			x	x	x	
Update Individual Number	x	x	x	x	x	IES
Update Earnfare Benefit Amount History			x	x	x	
Remove Earnfare Benefit amount			x	x	x	
Summary Tools – Customer Profiles						
Uploads	x	x	x	x	x	
Delete Uploads	X	X	X	x	x	
Casenotes – Add	X	X	X	X	x	
Case Notes – Delete (partner requests)					x	
Assessments – Add	X	X	X	X	X	
Worksites – Add	X	X	X	X	x	
Uploads – Add	X	X	X	X	X	
Uploads – Remove	x	X	x	x	x	
EP/Case Management						
Add Activities – if not open	X	X	X	X	X	
Edit Activity – start/end date	x		X	X	x	
Edit Activity after completed			X	X	x	
Edit Activity after exit			X	X	x	
Activity – Delete – not staffed	X	X	X	X	x	
Activity – Delete - staffing complete					x	
Attendance – Add/verify	X	X	X	X	x	
Attendance – edit verified					x	
Attendance – un-verify		x	x	x	x	
Support Services						
Add support services	X	x	X	X	x	
Update support services after exit			X		x	
Add Override request	X	X	X	X	x	
Delete Override request	X	X	X	X	x	
Approve Override					x	
Delete approved Override request					X	

ISETS Permissions Rubric

Action	Partner	Inter.	Prov Mgr	Work Dev	Super Admin	Billing/ IES Data Sync/ Prog Mgr
Support Services						
Add after staffing submitted	X	X	X	X	x	
Approve change request			x	x	x	
Add cost after staffing approved by billing – Amendment – row is a red color in table	x	x	x	x	x	
Approve amendments			x	x	x	
Complete/Exit						
Complete/Exit a customer record – meet req.	X	X	X	X	x	
Edit a customer completion					X	
After Exit						
Access to profile until referral is closed	X	X	X	X	x	
Employment						
Add employment	X	X	X	X	x	
Edit employment	X	X	X	X	x	
Verify employment uploads		X	X	x	x	
Verify post- 90-day retention uploads		X	X	X	x	
Delete Employment record – on open emp.					X	
Staffing – customer record						
Customer record 4334 – sign as DHS			X	X	X	
Customer record 4334 – sign as partner	X	x				
2606	X	X	X	X	X	
2610	X	X	X	X	X	
Amend 2610			X		x	
Amend 2606	X	X	X	X	X	
Provider Information						
Appointments					x	
Edit Site, Edit Schedule, Remove Site	X	X	X	X	x	
File Upload	X	X	X	X	x	
File Upload – Delete - none related to staffing					x	
ISETS Provider Details						
Entering contracts					x	
View contract	X	X	x			
Edit contract					x	

ISETS Permissions Rubric

Action	Partner	Inter.	Prov Mgr	Work Dev	Super Admin	Billing/ IES Data Sync/ Prog Mgr
Provider Information						
Add sub-grantee					x	
View sub-grantee information		x				
Add/remove location to partner record					x	
Add/remove Audit			X		x	
Add/Edit worksite	X	X	X		x	
Add/remove Services to use on the career plan		x	x		x	
ISETS E&T Programs						
Add Program					x	Prog Mgr
Edit Program			x	x	x	Prog Mgr
Add Agency related Case Notes	x	x	x	x	x	
Adding new partners					x	
Reports						
						Billing

ISETS Data Integrity Checklist for Providers

Use this checklist to review your caseload and ensure participant records are complete, timely, and accurately reflect program engagement. This should be reviewed **monthly** or **quarterly** in alignment with your organization's workflow.

🔄 Participant Status Updates

- ❑ Participants who should have been exited
  - ❑ Participant has completed all activities, shows no engagement, but is still marked as "Active."
  - ❑ ✓ Action: Enter current case notes/attendance or exit with date and reason.
- ❑ "Active" participants with no recent activity
  - ❑ No attendance and/or case notes in over 2 weeks.
  - ❑ ✓ Action: Add current engagement documentation or exit.
- ❑ Participants inactive for over 30 days (flagged on dashboard)
  - ❑ ✓ Action: Move to "Active" if re-engaged or exit appropriately.
- ❑ Referred but never enrolled
  - ❑ Approved referral exists but no enrollment history.
  - ❑ ✓ Action: Notify IDHS if past referral window; IDHS to close after defined timeframe (e.g., 10 business days).

📋 Ongoing Case Management

- ❑ Attendance records are updated weekly
- ❑ All participants in active components have logged attendance if required.
- ❑ Supportive service entries are complete and timely
- ❑ Amount, date, and service type documented.
- ❑ Case notes are current and reflect meaningful engagement
- ❑ Last note should be within past 2 weeks for "Active" participants.

📅 Exit Documentation

- ❑ Exit date and reason are recorded for all exited participants
- ❑ Post-exit employment (within 60 days) is entered, if applicable
- ❑ Credentials, skills gained, and outcomes are documented
- ❑ At least one success story submitted per quarter (if applicable)

ISETS Data Integrity Checklist for Providers Cont.

📈 **Reporting & Billing Monthly and Quarterly**

- ❑ Staffing & Billing reports are submitted on time
- ❑ All required fields are complete—no system-rejected reports
- ❑ Eligibility verified before submitting reimbursement

🧭 **Data Review & Quality Assurance**

- ❑ Review dashboard flags weekly
- ❑ Inactive, overdue exits, referral gaps
- ❑ Participate in data integrity reviews
- ❑ Respond to Provider Manager audits or escalation reports.
- ❑ Correct any recurring data errors identified by TA or audits
- ❑ Engage in TA calls or micro-trainings to stay current on data standards

Provider End-of-Year (EOY) Checklist

This checklist supports Providers in finalizing program and fiscal responsibilities by the end of each fiscal year. Completing these items ensures accurate reporting, successful reconciliation, and timely payments.

🗂️ Program and Participant Data

- ❑ **Exit all customers who will not be carrying over to the next year (this includes all Earnfare customers at the end of every program year)**
  - Ensure all services have ended and appropriate exit reasons are selected.
- ❑ **Finalize post-exit outcomes**
  - Enter all known employment outcomes, credentials, and success stories.
- ❑ **Clear inactive participant flags**
  - Review participants marked inactive for over 45 days and update status.
- ❑ **Close out referrals**
  - For any pending or unused referrals, confirm resolution or notify IDHS.
- ❑ **Complete all open case notes and attendance**
  - Ensure recent activities are fully documented for active participants.

💰 Staffing & Billing Reports

- ❑ **Reconcile any missing or rejected entries**
  - Review reports that failed submission or were returned for revision.
- ❑ **Verify supportive services and expenses**
  - Confirm accuracy of all entries; reconcile totals with your internal logs.
- ❑ **Submit all monthly Staffing & Billing reports**
  - Ensure every month of the fiscal year is completed and approved.
- ❑ **Submit year-end financial data (if required)**
  - Includes final Ledger reconciliation and billing summaries.

📊 Performance and Documentation

- ❑ **Review Periodic Performance Report**
  - Verify outcomes toward contract goals are correctly reported.
- ❑ **Submit any remaining credentials or employment verifications**
  - Ensure all achievements are logged and reflected in the year-end report.
- ❑ **Complete Success Story submissions**
  - At least one per quarter, or a cumulative summary for the year.

🔁 Provider Manager/IDHS Coordination

- ❑ **Respond to any Provider Manager audit flags**
  - Resolve pending issues noted in Inactive Participant or Integrity Reports.
- ❑ **Confirm year-end checklist completion with IDHS contact**
  - Submit confirmation email and address any final clarifications.