



WORKFORCE SOLUTIONS MIDDLE RIO GRANDE

PO Box 760 ~ 216 W Main ~ Uvalde ~ Texas ~ 78802 ~ 830-591-0141 ~ 830-591-0004 fax

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Board of Directors
Executive
Committee

Christopher Hiller
Chairperson
Private Sector

Laura Lopez
Vice Chairperson
Private Sector

Juan Martinez
Secretary
Private Sector

Myrta Garcia
Treasurer
CBO

Rodrigo Jaime
Parliamentarian
Private Sector

Rosie Lozano
Executive Director

Workforce Solutions Middle Rio Grande Board of Directors Meeting Thursday, June 11, 2026 @ 1:00 p.m. Workforce Board Room 216 Main Street, Uvalde Texas 78801

- I. Call Meeting to Order**
- II. Invocation**
- III. Roll Call**
- IV. Introduction of Guest**
- V. Public Comment**
- VI. Approval of Minutes for:** April 9, 2026, pg. 1-7
- VII. Old Business**
- VIII. New Business**

A. Executive Committee – Laura Lopez, Board Vice Chairman Action Item:

1. Redistribution of TANF/Choices pass-through funds for FY2026, pg. 8-9
2. Rescheduling the December board meeting to either December 3rd or 17th.
3. Review/Approve – Lease agreement for Del Rio office for a five year term with a potential of extension of additional 5 years, pg. 10
4. Addendum to Garza/Gonzales contract for Board Technical Assistance not to exceed \$4,000
5. Review/Approve Information Systems Policies and Procedures, pg. 11-43

Information Items:

1. Update - Board Membership, pg.44-45
2. Subrecipient Monitoring Exit Report, pg. 46-49

B. Finance and Audit Committee – Myrta Garcia, Chair

Action Items:

1. Review/Approve April 2026 WFSMRG Fiscal Agent Expenditure report, pg. 50-51
2. Authorize the Executive Committee to review/approve Garza/Gonzales & Associates annual Workforce Board Audit for year ended September 30, 2025, at special meeting, ratification at August 2026 meeting
3. Review/Approve - Financial & Data Analyst monitoring report for February and March 2026, pg. 52-53
4. Review/Approve Fiscal Policy:
 - a. FISCAL09 Chg. 1 Audit Requirements Policy, pg. 54-60
 - b. FISCAL01 Chg. 1 WFSMRG BOARD Fiscal Control Policy and Procedure, pg. 61-63

Information Items:

1. Report from Diaz, Smith and Associates on Annual Financial Monitoring Review for year ending July 31, 2025
2. Workforce Contracts for:
 - a. 2726REA001 Amd. 1– Reemployment Services and Eligibility Assessment, \$82,500 for April 25, 2026 – September 30, 2026, pg.64-66
3. Revenue vs. Expenditure summary for April 2026, pg. 67-68

C. Child Care Committee – Margot Mata, Chair

Action Items: None

Information Items:

1. Child Care report, pg. 69-70

D. Monitoring & Oversight Committee – Juan Martinez, Chair

Action Items:

1. Review/Approve Board Monitoring Reviews for February & March 2026
 - a. SNAP, pg. 71-73
 - b. Choices. pg. 74-76
 - c. WIOA, pg. 77-79
 - d. Childcare, pg. 80-82
 - e. RESEA, pg. 83-84
 - f. Priority of Service, pg. 85-86

2. Review/Approve Workforce Program Policies:
 - a. ADMIN01 Equal Opportunity Policy & Procedure, pg. 87-109
 - b. All12 Chg. 7 Access and Data Security for Workforce Applications, pg. 110-112
 - c. All10 Chg. 4 Quality Assurance Policy, pg. 113-123
 - d. All06 Chg. 1 Handling, Protection and Retention of Personal Identifiable Identification, pg. 124-128
 - e. ALL20 Chg. 1 Data Validation, pg. 129
 - f. ALL02 Chg. 4 Support Services Policy, pg. 130-136

Information Items:

1. WFS Program Reports, pg. 137-142
 - a. RESEA performance
 - b. VOS Greeter report
 - c. Program Risk Assessment Feb – May 2026
 - d. MPR – March 2026, pg. 143-144
2. Student Navigator Report, pg. 145-146
3. Youth Coach Report, pg. 147-148

E. Economic Development Committee – Laura Lopez, Chair
Action Items: None

Information Items:

1. Middle Rio Grande Local Area Employment Statistics, pg. 149
2. Middle Rio Grande Labor Market Information, pg. 150

- F. Executive Director's Report – Rosie Lozano, pg. 151-152
G. MRGDC Executive Director's Report – Michelle Garcia, pg. 153-159
H. Other Business

IX. Election of Officers

X. Adjournment

Note: To sign up for Public Comment please call Board Office at 830-591-0141

Meeting Notice Closed or Executive Session

If during the course of the meeting covered by this Notice, the Board should determine that a closed or executive session of the Board should be held or is required in relation to any item included in this notice, then such closed or executive meeting or session as authorized by Section 551.001 et seq. of the Texas Government Code (the Open Meetings Act) will be held by the Board at that date, hour and place given in this notice or as soon after the commencement of the meeting covered by this notice as the Board may conveniently meet in such closed or executive meeting or session concerning any and all subjects and for any and all purposes permitted by Sections 551.071-551.084, inclusive, of the Open Meetings Act, including, but not limited to:

- a) Section 551.084 - For the purpose of excluding witnesses or witnesses from a hearing during the examination of another witness.
- b) Section 551.071 - For the purpose of a private consultation with the Board's attorney on any or all subjects or matters authorized by law.
- c) Section 551.072 - For the purpose of discussing the purchase, exchange, lease or value of real property.
- d) Section 551.073 - For the purpose of considering a negotiated contract for a prospective give or donation.
- e) Section 551.074 - For the purpose of considering the appointment, employment, evaluation, reassignment, duties, discipline or dismissal of a public officer or employee or to hear complaints or charges against a public officer or employee.
- f) Section 551.076 - To consider the deployment, or specific occasions for implementation of security personnel or devices.

Should any final action, final decision, or final vote be required in the opinion of the Board with regard to any matter considered in such a closed or executive meeting or session, then such final action, final decision, or final vote shall be at either:

- a) the open meeting covered by this notice upon the reconvening of this public meeting, or
- b) at a subsequent public meeting of the Board upon notice thereof, as the Board shall determine.

**Workforce Solutions is an Equal Opportunity Employer/Program
Auxiliary aids and services are available upon request to
individuals with disabilities.**

Workforce Solutions Middle Rio Grande Board MINUTES

Board of Directors' Meeting

In Person / Virtual
April 09, 2026

Workforce Solutions Board Room
Thursday 1:00 PM

OFFICERS PRESENT:

Rodrigo Jaime, Parliamentarian, Private Sector, Carrizo Springs
Myrta Garcia, Treasurer, CBO, Cotulla
Juan Martinez, Secretary, CBO, Carrizo Springs

MEMBERS' PRESENT:

Monica Gonzales
Shelly Collins
Melissa Hayman
Margot Mata
Romelia Aranda
Juan C. Vasquez
Arturo Gonzales
Cody Smith
Wendall Sansom
Sergio Diaz
Frailan Sendejo
Aracely Castle
Jesse Martinez, Jr.
Ernest Flores
J.J. Suarez

MEMBERS ABSENT:

Christopher Hiller
Laura Lopez
Jesse Rizo
Larry Martin
Leslie Guillot
James Glasscock
Lydia Seiple
Sara Rivas
Dana Johnson
Michael Grooms
Dora Velasquez
Shawna Burkhart
Sandra Seidel
Elsa Villalpando

Yolanda Ramon

OTHERS PRESENT:

Rosie Lozano
Nereida Santos
Barbara Lopez
Roxanne Gonzalez
Michelle Garcia
Arianna Gonzalez
Betsy Prado
Bobby Castillo
Brenda Gonzalez
John Cruz

I. CALL TO ORDER

Juan Martinez, Secretary, called the meeting of the Workforce Solutions Middle Rio Grande Board of Directors to order at approximately 1:15 PM.

II. INVOCATION

The invocation was made by Juan Martinez.

III. ROLL CALL

Nereida Santos called roll, and eighteen (18) board members were determined to be present. Having established a quorum, the following business was just transacted.

IV. INTRODUCTION OF GUEST (S)

Rosie introduced new Board Member Frailan Sendejo.

V. Public Comments

No Public Comments

VI. APPROVE MINUTES FOR: February 12, 2026

Juan C. Vazquez motioned to approve minutes, and Ernest Flores seconded the motion. Motion Carried.

Old Business

None

New Business

A. Executive Committee – Juan Martinez, Secretary

Action Item:

1. Review/Approve renewal of JCA Law, PLLC for year 3 of a 3-year contract, April 13, 2026 – April 12, 2027

Rosie explained that this will be the third year of a three-year contract and the final extension for JCA Law. She is completely satisfied with their services.

Arturo Gonzales made a motion to approve the renewal and Juan C. Vasquez seconded the motion. Motion carried.

2. Redistribution of pass-through funds for FY2026 TANF/Choice's grant

Rosie discussed how program funds are currently allocated. Right now, 35% of funds are passed through directly to clients, but the number of eligible clients is relatively low because eligibility is determined externally (by HHSC). She explained that from a total budget (\$783,754), 10% goes to the board, and the remaining funds are split between client services (pass-through) and administrative costs (like rent, salaries, and utilities) and Youth Coaches. The main proposal is to reduce the pass-through rate from 35% to 20%, which would shift about \$81,000 away from direct client spending and allow those funds to be used for Admin. Ops. She also mentioned efforts to increase the number of clients served through outreach in coordination with HHSC, as well as requesting comparative data to better understand spending across counties. Board members expressed concerns about approving the redistribution of pass-through funds at this time. They preferred to table the item and request a detailed report outlining the number of clients served in each county. Additionally, they indicated a need for more comprehensive information on how the funds would be allocated if reclassified to administrative and operational expenses before deciding.

JJ Suarez motioned to table and Margot Mata seconded the motion. Motion carried.

Information Items:

1. Update - Board Membership

Mr. Hiller has resigned from the Board. The next meeting, scheduled for June, is the annual meeting, during which elections for new executive board members will take place.

There are currently vacancies that need to be filled, including three private sector representatives in Val Verde County and one private sector

representative in Dimmit County. Additionally, Shawna Burkhart has resigned from her position with the City and is therefore no longer eligible to serve on the Board.

The Board is also seeking a veteran representative. To remain in compliance, at least 51% of the Board must be composed of private sector members.

B. Finance and Audit Committee – Myrta Garcia, Treasurer

Action Items:

1. Review/Approve February 2026 WFSMRG Fiscal Agent Expenditure report
2. Review/Approve WFSMRG Board Mid-Year Budget
3. Review/Approve - Financial & Data Analyst monitoring report for January and February 2026

Rosie reviewed and explained each of the reports included in the Board packet. Board member Monica Gonzales asked Betsy to clarify an issue related to Child Care disbursements. Betsy explained that the required documentation was not received in a timely manner; however, payment to the vendor for supplies was still necessary, so the expense was charged to the current year's grant.

Rodrigo Jaime motioned to approve all 3 action items and Juan C. Vasquez seconded the motion. Motion carried.

Information Items:

1. Revenue vs. Expenditure summary for February 2026

Rosie briefly went over report no questions.

C. Child Care Committee – Juan Martinez, Secretary

Action Items:

1. Child Care Quality Expenditures in the estimated amount of \$315,000

Rosie stated that any expenditure exceeding \$25,000 must be brought before the Board for approval. The proposed Child Care Quality expenditures total approximately \$315,000 and include: \$80,000 for professional development and training; \$25,000 to support staff retention and quality improvement; and \$125,000 for classroom equipment and materials.

Juan C. Vasquez motioned to approve the Child Care Quality Expenditures and Myrta Garcia seconded the motion. Motion carried.

Information Items:

1. Child Care report
2. Update on Child Care Formula and Child Care Protective grants

Rosie explained that at the last Board meeting, she reported approximately \$400,000 remaining in the Child Care grant. However, after identifying and correcting several errors, the revised balance is \$169,677, which must be expended by April 30.

D. Monitoring and Oversight Committee – Juan Martinez, Secretary

Action Items:

1. Review/Approve Board Monitoring Reviews for December 2025 & January 2026
 - a) SNAP, pg. 24-25
 - b) Choices, pg. 26-27
 - c) WIOA, pg. 28-30
 - d) Childcare, pg. 31-32
 - e) RESEA, pg. 33-34
 - f) Priority of Service, pg. 35-36

There were no errors in SNAP, Choices had one error, exceeded 10% in participation. For WIOA, two areas exceeded 10% error rates (support services and data entry). Child Care had no errors, while RESEA had one attribute at 10% related to assessments. The Priority of Service report also had one error over 10%, highlighting the need to ensure veterans and eligible spouses receive priority services. On a positive note, the team has made significant improvements under TWC corrective action plans (CAPs), achieving three consecutive months with error rates below 10%, with one more month needed to be fully cleared. Improvements are attributed to enhanced review processes, daily quality checks, and proactive monitoring. Additional updates include new reporting requirements (like walkthrough checks for compliance and data security) and a request from board members for clearer reporting on total caseload numbers reviewed.

Rodrigo Jaime motioned to approve Monitoring reviews and Juan C. Vasquez seconded the motion. Motion carried.

Information Items:

1. WFS Program Reports, pg. 37-42
 - a. PIA (s) for Youth Enrolled/Employed Q2, Youth Median Q2 and Youth Credential
 - b. RESEA Performance
 - c. MPR – January 2026
2. VOS Greeter Report
3. Student Navigator Report

4. Youth Coach Report

The January 2026 performance report (MPR) shows that the program is currently failing two measures: the credential rate and reemployment within 10 weeks. However, the 10-week measure is likely inaccurate due to a known TWC system error, and it may be corrected in the next report. Overall performance is strong, with most indicators in good standing (green) and only two areas of concern. A Performance Improvement Action (PIA) was issued for a slight decline (2%) in youth employment/enrollment, prompting a plan to prevent further decreases. Participation has improved from 94 to 96, and current monitoring strategies appear to be effective. For fiscal year 2026, performance is above target (83% vs. 77%) for the available months. Additional pages in the report provide informational updates, including participant exit data, student navigator activity, and focus reports.

E. Economic Development Committee-Juan Martinez, Secretary

Action Items: None

Information Items:

1. Middle Rio Grande Local Area Employment Statistics
2. Middle Rio Grande Labor Market Information

The economic development section includes informational items only. These reports are outdated, covering data only through December, as updated labor market information (LMI) is still in progress.

No questions were asked.

F. Executive Director's Report - Rosie Lozano

The program has been allocated 21 participants for the SEAL program, with the possibility of additional slots if more funding becomes available. Performance is improving, with two consecutive months under a 10% error rate, though two more months are needed to exit the corrective action plan (CAP). Multiple monitoring activities are underway, including TWC subrecipient monitoring and HHSC programmatic reviews. The organization is also preparing for its annual audit, due by June 30, 2026.

Updates include:

- Flexibility granted by TWC to adjust Child Care funds for compliance
- Approval of a TANF-funded youth program serving 30 participants
- Completion of child care training and ongoing IT policy development

- Plans to hire a Migrant Seasonal Farmworker (MSFW) case manager in Eagle Pass

Overall, the organization is managing audits, improving compliance, and advancing new program initiatives.

G. Executive Director's Report - Michelle Garcia

Michelle briefly went over her report that was provided in board packet. She acknowledged feedback from board members and plans to simplify reporting by including a clear summary of enrollments for each grant. They will also provide a detailed breakdown of clients served by county, which will be shared by email and included regularly in future reports. She noted that youth program numbers may fluctuate monthly due to how funding and participant earnings are structured. Board members emphasized the importance of consistent, detailed reporting to support informed decision-making and better track service levels across counties.

H. Other Business

None

I. Adjourn

There being no further business, JJ Suarez made a motion to adjourn and seconded by Juan Carlos Vasquez. Motion carries the meeting was adjourn at **2:22 p.m.**

Juan Martinez
Secretary

Date

Workforce Solutions Middle Rio Grande Board

Executive Committee

June 11, 2026

Action Item

Redistribution of TANF/Choices Pass Through Funds

PURPOSE: Redistribute pass-through funds for TANF/Choices Grant. As per the One Stop Contract 27.11 – Client Services Pass thru amount: As per the RFP a minimum of 35% of TANF and SNAP E&T must be budgeted for training and support services.

DISCUSSION: The TANF grant is initially structured to ensure that 35% of funds are allocated for pass-through expenditure. However, based on current program needs and expenditure trends, a budget realignment of 20% for pass through is being proposed to support effective service delivery and full utilization of grant funds within the period of performance.

Current:	
Total Grant	\$783,754
10% Board	\$ 78,375
	\$705,379
Youth Coaches	\$165,000
Sub total	\$540,379
35% Pass Thru	\$189,133
Rent	\$ 31,446
Adm/Ops	\$319,800
Proposed:	
Total Grant	\$783,754
10% Board	\$ 78,375
	\$705,379
Youth Coaches	\$165,000
Sub total	\$540,379
20% Pass Thru	\$108,076
Rent	\$ 31,446
Adm/Ops	\$400,857
	Decrease of \$81,057
	Increase of \$81,057

The grant has been approved for a \$75,816 Summer Youth Program, and customers will still be served appropriately. These funds are administered through pass-through funds.

Compliance Justification:

This adjustment is being made to ensure that funds are expended in a timely manner and in alignment with allowable cost categories under TANF and TWC guidelines. The proposed reduction of the pass-through requirement from **35% to 20%** reflects actual service delivery needs and supports the Board's and Contractor's ability to meet performance measures and avoid under-expenditure of funds. All modifications are subject to approval and will be implemented in accordance with TWC regulations, Uniform Grant Management Standards, and internal fiscal policies.

ACTION: Approve reduction in pass through from 35% to 20% for TANF/Choices grant for this contract year.

Temporary Assistance for Needy Families Overview

TANF provides temporary cash assistance to needy dependent children and the parents or certain relatives with whom they live.

One-Time TANF (OTTANF) provides \$1,000 cash assistance for families in crisis. The intent of the OTTANF payment is to help solve a short-term crisis and divert households from ongoing TANF benefits. Households who choose this option are not eligible to receive TANF or OTTANF payments for 12 months.

One-Time TANF for Relatives (OTTR) provides a \$1,000 supplemental payment to a grandparent, aunt, uncle, brother or sister, age 25 years of age or older, who cares for a TANF-certified child and meets all OTTR eligibility requirements.

Key Policy Details

Income & Resources: Countable resources must not exceed the TANF resource limit of \$1,000.

Ongoing TANF: A household does not have to be eligible for ongoing TANF to qualify for the one-time OTTANF payment.

Ineligibility Period: Receipt of OTTANF makes the household ineligible for regular TANF for a specific period (usually 12 months), unless a waiver applies.



Personal Responsibility Agreement (PRA)

Person's Name	Case Name	Case No.
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What is TANF?

Temporary Assistance for Needy Families (TANF) is temporary cash and medical assistance for families with children who are deprived of parental support. Eligible families receive a monthly cash grant and Medicaid benefits until they become self-sufficient. Assistance may be limited to a specific period.

What Are Your Responsibilities?

You are responsible for the physical, emotional, and financial well-being of your child and for meeting personal responsibility requirements.

☐ A TANF payee or disqualified adult must:

- cooperate with child support requirements to establish paternity and help get child support for children on your case;
- ensure that your child gets a medical checkup as scheduled through the Texas Health Steps program;
- ensure your child is current with the required immunizations;
- ensure that each child receiving TANF and younger than 18 or a teen parent younger than 19 attends school regularly, unless the child has a high school diploma or a general equivalency diploma (GED); and
- ensure that each parent or relative of a child receiving assistance does not use, sell or possess controlled substances or abuse alcohol after signing this agreement.

☐ A TANF caretaker or second parent must:

- participate, as required, in the Choices program if they are an adult member of your household who gets cash assistance;
- cooperate with child support requirements to establish paternity and help get child support for children on your case;
- ensure that each adult or teen parent does not voluntarily quit a job without good cause;
- ensure that your child gets a medical checkup as scheduled through the Texas Health Steps program;
- be current with the required immunizations;
- ensure that each child receiving TANF and younger than 18 or a teen parent younger than 19 attends school regularly, unless the child has a high school diploma or a GED;
- ensure that each TANF recipient attends parenting skills classes if requested to do so; and
- ensure that each parent or relative of a child receiving assistance does not use, sell or possess controlled substances or abuse alcohol after signing this agreement.

You must truthfully represent your situation to complete your application, your interview, providing proof of your situation, reporting changes in address, income, assets and family size, and by keeping or rescheduling all appointments.

What Are the State's Responsibilities?

The state helps you become self-sufficient by:

- Providing help to find employment and necessary support services within available resources.
- Providing support services to strengthen the family, such as life skills and parenting skills training.
- Providing timely, accurate, and easily accessible benefits.
- Promoting the development of community resources.

Penalty for Failure to Cooperate with the Personal Responsibility Agreement

If you fail to cooperate with:

- Any of the Personal Responsibility Agreement (PRA) requirements, you and your entire family will not receive TANF cash assistance for one month or until you cooperate, whichever is longer.
- The PRA for two months in a row, your TANF case will be denied. When you re-apply for TANF cash assistance, you must cooperate with all requirements of the PRA for one month before your family can again receive TANF cash assistance.
- The Choices work or child support requirements, you will not receive Medicaid for one month or until you cooperate, unless you are pregnant or under 19 years. Your other family members who are receiving Medicaid will stay eligible for Medicaid.
- If you don't follow the Choices work rules, the people on your benefits case might not get SNAP food benefits.

When you are informed that you didn't cooperate with one of your responsibilities, it is very important that you start cooperating with the requirements immediately. If you receive a notice that you or a family member has failed to cooperate with the Choices work requirement without good cause, you must report to your local workforce center and begin participating as soon as possible to prevent denial of your case.

By signing this form, I certify that I am aware of my responsibilities and have been given a copy of them. I will explain these responsibilities to other members of my household. I understand that a penalty may be applied to my case if I or other members of my household do not meet their responsibilities. I have also received more information about the Choices program and child support requirements.

Applicant or Recipient Signature _____ Date _____

April 2026 TANF TIMELINESS

TANF APPLICATIONS			
Region	Disposed	Timely	Percent
(Blank)			
01	909	838	92.19%
02/09	534	464	86.89%
03	2,333	2,108	90.36%
04	848	729	85.97%
05	511	478	93.54%
06	1,927	1,706	88.53%
07	1,441	1,282	88.97%
08	1,204	1,056	87.71%
10	1,433	1,318	91.97%
11	4,087	3,787	92.66%
CCC	1,744	1,626	93.23%
DATA INT	1	1	100.00%
MEPD			
PERFORMANC	3	0	0.00%
ST OFFICE			
VIC	3,695	3,361	90.96%
UNKNOWN	20	18	90.00%
TOTAL	20,690	18,772	90.73%

TANF REDETERMINATIONS			
Region	Disposed	Timely	Percent
(Blank)			
01	49	47	95.92%
02/09	26	22	84.62%
03	113	102	90.27%
04	49	43	87.76%
05	29	25	86.21%
06	99	83	83.84%
07	78	68	87.18%
08	53	44	83.02%
10	69	58	84.06%
11	145	131	90.34%
CCC	22	17	77.27%
DATA INT			
MEPD			
PERFORMANC			
ST OFFICE			
VIC	89	82	92.13%
UNKNOWN	1	1	100.00%
TOTAL	822	723	87.96%

Notes:

Disposed - the number of applications worked to a decision (approved and/or denied) and provided a benefit if approved.

Timely - the number of applications disposed within the established time frames for the program.

Redetermination - consideration of all eligibility criteria for a type program at the end of a certification period to determine ongoing benefits for a new certification period.

TANF Certified Group Size (EDG)	TANF BUDGETARY ALLOWANCES (Effective October 1, 2025)								
	NON-CARETAKER EDG			CARETAKER EDG WITHOUT 2 ND Parent			CARETAKER EDG WITH 2 ND Parent		
	TANF BASIC Children Only			TANF BASIC 1 Adult w/ Children			TANF-SP 2 Adults w/ Children		
	Bud. Needs (100%)	Recog. Needs (25%)	Max. Monthly Grant	Bud. Needs (100%)	Recog. Needs (25%)	Max Monthly Grant	Bud. Needs (100%)	Recog. Needs (25%)	Max. Monthly Grant
1	256	64	130	313	78*	159	---	---	---
2	369	92	188	650	163	331	498	125**	253
3	518	130	263	751	188	382	824	206	418
4	617	154	314	903	226	459	925	231	470
5	793	198	403	1003	251	510	1073	268	545
6	856	214	435	1153	288	586	1176	294	597
7	1068	267	543	1252	313	636	1319	330	670
8	1173	293	596	1425	356	724	1422	356	722
9	1346	337	684	1528	382	776	1595	399	810
10	1450	363	737	1701	425	864	1698	425	862
11	1623	406	824	1804	451	916	1871	468	950
12	1726	432	877	1977	494	1004	1975	494	1003
13	1899	475	965	2080	520	1057	2147	537	1090
14	2003	501	1017	2253	563	1144	2251	563	1143
15	2174	544	1104	2356	589	1197	2423	606	1230
Each additional person	173	43	+88	173	43	+88	173	43	+88

* Caretaker of SSI Child

** Caretaker and Second Parent of SSI Child

Click [here](#) for archived TANF charts

Updated ~ September 2025

TANF CASE and RECIPENTS FOR THE BENEFITS MONTH: March 2026

County	===== TANF BASIC =====							===== TANF STATE PROGRAM =====						
	Cases	Recipients	Children	Adults	Payments	Average Payment Per		Cases	Recipients	Children	Adults	Payments	Average Payment Per	
						Case	Recipient						Case	Recipient
Anderson	34	77	56	21	\$8,846	\$263	\$115	1	2	1	1	\$337	\$328	\$160
Andrews	1	2	1	1	\$292	\$286	\$142	0	0	0	0	\$0	\$0	\$0
Angelina	26	59	49	9	\$5,998	\$235	\$102	0	0	0	0	\$0	\$0	\$0
Aransas	16	36	26	10	\$4,118	\$252	\$115	0	0	0	0	\$0	\$0	\$0
Archer	1	2	1	1	\$336	\$330	\$164	0	0	0	0	\$0	\$0	\$0
Armstrong	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Atascosa	19	70	56	13	\$6,668	\$344	\$95	3	12	6	5	\$1,209	\$392	\$104
Austin	3	7	4	3	\$1,061	\$347	\$148	0	0	0	0	\$0	\$0	\$0
Bailey	1	1	1	0	\$132	\$129	\$129	0	0	0	0	\$0	\$0	\$0
Bandera	2	4	2	2	\$672	\$330	\$164	0	0	0	0	\$0	\$0	\$0
Bastrop	21	51	44	7	\$5,348	\$250	\$104	0	0	0	0	\$0	\$0	\$0
Baylor	1	4	4	0	\$319	\$313	\$78	0	0	0	0	\$0	\$0	\$0
Bee	15	38	32	6	\$3,993	\$261	\$105	0	0	0	0	\$0	\$0	\$0
Beli	247	665	496	170	\$73,519	\$298	\$110	9	37	20	17	\$4,084	\$441	\$111
Bexar	672	1608	1248	360	\$180,736	\$269	\$112	22	65	32	34	\$7,717	\$358	\$118
Blanco	2	5	3	2	\$724	\$355	\$141	0	0	0	0	\$0	\$0	\$0
Borden	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Bosque	3	5	4	1	\$659	\$215	\$128	0	0	0	0	\$0	\$0	\$0
Bowie	52	126	101	25	\$12,956	\$249	\$103	0	0	0	0	\$0	\$0	\$0
Brazoria	63	136	98	37	\$15,870	\$251	\$117	4	16	10	6	\$1,840	\$448	\$116
Brazos	59	150	121	29	\$16,438	\$278	\$110	1	1	1	0	\$133	\$129	\$126
Brewster	2	4	3	1	\$348	\$171	\$85	0	0	0	0	\$0	\$0	\$0
Briscoe	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Brooks	4	9	7	2	\$1,054	\$258	\$114	1	4	2	2	\$479	\$466	\$114
Brown	13	32	23	9	\$3,762	\$284	\$118	0	0	0	0	\$0	\$0	\$0
Burleson	4	6	5	1	\$709	\$174	\$115	0	0	0	0	\$0	\$0	\$0
Burnet	9	22	19	2	\$2,075	\$226	\$96	0	0	0	0	\$0	\$0	\$0
Caldwell	6	13	9	4	\$1,791	\$293	\$134	0	0	0	0	\$0	\$0	\$0
Calhoun	5	7	6	1	\$916	\$180	\$127	0	0	0	0	\$0	\$0	\$0
Callahan	3	4	3	1	\$600	\$196	\$146	0	0	0	0	\$0	\$0	\$0
Cameron	282	726	659	66	\$69,613	\$247	\$96	4	14	8	5	\$1,538	\$374	\$112
Camp	1	6	5	1	\$595	\$584	\$97	0	0	0	0	\$0	\$0	\$0

Carson	2	4	4	0	\$382	\$187	\$93	0	0	0	0	\$0	\$0	\$0
Cass	7	20	16	3	\$2,100	\$294	\$108	0	0	0	0	\$0	\$0	\$0
Castro	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Chambers	5	11	10	1	\$1,171	\$230	\$104	0	0	0	0	\$0	\$0	\$0
Cherokee	12	26	22	4	\$2,741	\$224	\$107	0	0	0	0	\$0	\$0	\$0
Childress	3	4	3	1	\$600	\$196	\$146	0	0	0	0	\$0	\$0	\$0
Clay	1	3	2	1	\$312	\$306	\$101	0	0	0	0	\$0	\$0	\$0
Cochran	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Coke	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Coleman	2	5	4	1	\$603	\$296	\$118	0	0	0	0	\$0	\$0	\$0
Collin	179	432	325	108	\$48,521	\$272	\$112	7	26	16	11	\$2,932	\$408	\$111
Collingsworth	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Colorado	4	8	7	1	\$657	\$161	\$80	0	0	0	0	\$0	\$0	\$0
Comal	28	59	41	18	\$7,503	\$272	\$128	0	0	0	0	\$0	\$0	\$0

TANF CASE and RECIPENTS FOR THE BENEFITS MONTH: March 2026

County	===== TANF BASIC =====							===== TANF STATE PROGRAM =====						
					Average Payment Per							Average Payment Per		
	Cases	Recipients	Children	Adults	Case	Recipient		Cases	Recipients	Children	Adults	Case	Recipient	
Comanche	8	21	16	4	\$2,318	\$284	\$113	0	0	0	0	\$0	\$0	\$0
Concho	2	5	3	2	\$704	\$345	\$137	0	0	0	0	\$0	\$0	\$0
Cooke	9	29	23	6	\$3,131	\$341	\$109	1	4	2	2	\$479	\$466	\$114
Coryell	22	47	36	11	\$5,521	\$246	\$117	0	0	0	0	\$0	\$0	\$0
Cottle	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Crane	1	2	2	0	\$191	\$187	\$93	0	0	0	0	\$0	\$0	\$0
Crockett	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Crosby	3	9	8	1	\$774	\$253	\$84	0	0	0	0	\$0	\$0	\$0
Culberson	2	3	2	1	\$424	\$208	\$138	0	0	0	0	\$0	\$0	\$0
Dallam	2	3	3	0	\$323	\$158	\$105	0	0	0	0	\$0	\$0	\$0
Dallas	1007	2553	1927	627	\$289,117	\$287	\$113	22	87	53	34	\$8,617	\$399	\$100
Dawson	3	6	4	2	\$479	\$157	\$78	0	0	0	0	\$0	\$0	\$0
Deaf Smith	5	11	9	2	\$1,322	\$259	\$117	0	0	0	0	\$0	\$0	\$0
Delta	3	6	6	0	\$531	\$174	\$86	0	0	0	0	\$0	\$0	\$0
Denton	126	341	276	65	\$34,925	\$276	\$102	2	8	4	4	\$982	\$478	\$116
DeWitt	1	1	1	0	\$132	\$129	\$129	0	0	0	0	\$0	\$0	\$0
Dickens	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Dimmit	2	5	4	1	\$497	\$243	\$97	0	0	0	0	\$0	\$0	\$0
Donley	1	2	2	0	\$191	\$187	\$93	0	0	0	0	\$0	\$0	\$0
Duval	5	15	10	5	\$1,464	\$287	\$95	1	3	2	1	\$389	\$379	\$123

Eastland	2	4	3	1	\$527	\$258	\$128	1	1	0	1	\$162	\$158	\$154
Ector	42	89	74	16	\$10,243	\$245	\$115	0	0	0	0	\$0	\$0	\$0
Edwards	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Ellis	39	94	74	21	\$10,624	\$274	\$112	3	18	13	5	\$1,760	\$571	\$98
El Paso	315	733	576	157	\$83,440	\$265	\$114	9	35	19	16	\$3,553	\$384	\$102
Erath	8	16	12	4	\$1,934	\$237	\$118	0	0	0	0	\$0	\$0	\$0
Falls	10	27	22	5	\$2,753	\$270	\$103	1	2	1	1	\$337	\$328	\$160
Fannin	8	13	12	1	\$1,351	\$166	\$101	0	0	0	0	\$0	\$0	\$0
Fayette	3	8	7	1	\$720	\$235	\$88	1	3	2	1	\$389	\$379	\$123
Fisher	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Floyd	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Foard	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Fort Bend	112	283	212	71	\$31,140	\$278	\$110	2	7	5	2	\$741	\$361	\$100
Franklin	1	2	2	0	\$191	\$187	\$93	0	0	0	0	\$0	\$0	\$0
Freestone	10	23	16	6	\$2,897	\$284	\$128	1	3	1	2	\$285	\$278	\$90
Frio	7	16	11	5	\$2,179	\$305	\$133	0	0	0	0	\$0	\$0	\$0
Gaines	2	7	5	2	\$803	\$393	\$112	0	0	0	0	\$0	\$0	\$0
Galveston	81	169	140	29	\$19,278	\$239	\$114	0	0	0	0	\$0	\$0	\$0
Garza	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Gillespie	2	5	4	1	\$598	\$293	\$117	0	0	0	0	\$0	\$0	\$0
Glasscock	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Goliad	1	2	1	1	\$336	\$330	\$164	0	0	0	0	\$0	\$0	\$0
Gonzales	2	7	5	2	\$854	\$419	\$119	0	0	0	0	\$0	\$0	\$0
Gray	10	21	16	4	\$2,386	\$234	\$116	0	0	0	0	\$0	\$0	\$0
Grayson	40	87	70	18	\$10,025	\$252	\$115	2	4	2	2	\$145	\$70	\$34

TANF CASE and RECIPENTS FOR THE BENEFITS MONTH: March 2026

County	===== TANF BASIC =====							===== TANF STATE PROGRAM =====						
					Average Payment Per							Average Payment Per		
	Cases	Recipients	Children	Adults	Case	Recipient		Cases	Recipients	Children	Adults	Case	Recipient	
Gregg	46	103	82	21	\$10,880	\$237	\$106	0	0	0	0	\$0	\$0	\$0
Grimes	5	6	6	0	\$719	\$141	\$117	0	0	0	0	\$0	\$0	\$0
Guadalupe	28	63	46	17	\$7,872	\$286	\$126	2	7	4	3	\$866	\$421	\$117
Hale	3	4	2	2	\$615	\$201	\$150	1	3	1	2	\$426	\$415	\$135
Hall	2	3	3	0	\$323	\$158	\$105	0	0	0	0	\$0	\$0	\$0
Hamilton	2	5	4	1	\$598	\$293	\$117	0	0	0	0	\$0	\$0	\$0
Hansford	2	4	3	1	\$456	\$224	\$111	0	0	0	0	\$0	\$0	\$0

Hardeman	3	7	6	1	\$789	\$258	\$110	0	0	0	0	\$0	\$0	\$0
Hardin	21	49	34	16	\$6,216	\$290	\$126	1	2	1	1	\$337	\$328	\$160
Harris	1223	2982	2356	626	\$326,939	\$267	\$110	31	127	79	47	\$12,007	\$389	\$95
Harrison	21	56	43	13	\$6,267	\$293	\$111	0	0	0	0	\$0	\$0	\$0
Hartley	1	3	3	0	\$267	\$262	\$87	0	0	0	0	\$0	\$0	\$0
Haskell	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Hays	39	89	67	23	\$10,748	\$277	\$120	2	7	3	4	\$686	\$334	\$93
Hemphill	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Henderson	27	47	38	9	\$5,364	\$202	\$114	0	0	0	0	\$0	\$0	\$0
Hidalgo	808	2125	1989	133	\$193,452	\$239	\$91	16	73	49	24	\$7,288	\$443	\$100
Hill	19	41	32	9	\$4,855	\$250	\$118	0	0	0	0	\$0	\$0	\$0
Hockley	10	23	18	4	\$2,605	\$255	\$115	1	3	1	2	\$426	\$415	\$135
Hood	12	21	14	6	\$2,921	\$239	\$142	0	0	0	0	\$0	\$0	\$0
Hopkins	8	22	17	4	\$2,268	\$278	\$105	1	6	4	2	\$535	\$521	\$85
Houston	7	16	13	3	\$1,841	\$258	\$112	0	0	0	0	\$0	\$0	\$0
Howard	5	11	9	2	\$1,307	\$256	\$116	0	0	0	0	\$0	\$0	\$0
Hudspeth	1	5	5	0	\$409	\$401	\$80	0	0	0	0	\$0	\$0	\$0
Hunt	31	75	61	13	\$7,513	\$246	\$100	0	0	0	0	\$0	\$0	\$0
Hutchinson	8	16	13	3	\$1,851	\$227	\$113	0	0	0	0	\$0	\$0	\$0
Irion	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Jack	1	2	1	1	\$336	\$330	\$164	0	0	0	0	\$0	\$0	\$0
Jackson	5	13	11	2	\$1,463	\$287	\$110	0	0	0	0	\$0	\$0	\$0
Jasper	10	17	15	2	\$1,883	\$185	\$108	1	3	2	1	\$389	\$379	\$123
Jeff Davis	1	1	1	0	\$132	\$129	\$129	0	0	0	0	\$0	\$0	\$0
Jefferson	160	422	322	100	\$47,789	\$298	\$113	2	8	6	2	\$816	\$397	\$97
Jim Hogg	1	1	1	0	\$132	\$129	\$129	0	0	0	0	\$0	\$0	\$0
Jim Wells	21	45	35	10	\$5,435	\$254	\$120	3	14	10	4	\$1,304	\$423	\$95
Johnson	43	91	70	22	\$10,962	\$256	\$120	0	0	0	0	\$0	\$0	\$0
Jones	2	2	2	0	\$254	\$124	\$124	0	0	0	0	\$0	\$0	\$0
Karnes	5	11	9	2	\$1,249	\$245	\$111	0	0	0	0	\$0	\$0	\$0
Kaufman	79	202	162	40	\$21,728	\$277	\$107	2	8	4	4	\$808	\$393	\$96
Kendall	4	7	6	1	\$760	\$186	\$106	0	0	0	0	\$0	\$0	\$0
Kenedy	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Kent	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Kerr	7	17	15	2	\$1,819	\$255	\$104	0	0	0	0	\$0	\$0	\$0
Kimble	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
King	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Kinney	0	0	0	0	\$0	\$0	\$0	1	3	1	2	\$426	\$415	\$135

TANF CASE and RECIPENTS FOR THE BENEFITS MONTH: March 2026

===== TANF BASIC =====

Average Payment Per

===== TANF STATE PROGRAM =====

Average Payment Per

County	Cases	Recipients	Children	Adults		Case	Recipient	Cases	Recipients	Children	Adults		Case	Recipient
Kleberg	15	36	29	7	\$4,015	\$262	\$112	0	0	0	0	\$0	\$0	\$0
Knox	1	1	1	0	\$132	\$129	\$129	0	0	0	0	\$0	\$0	\$0
Lamar	40	90	73	18	\$9,817	\$247	\$109	1	2	1	1	\$337	\$328	\$160
Lamb	6	13	11	2	\$1,518	\$248	\$114	0	0	0	0	\$0	\$0	\$0
Lampasas	7	14	10	4	\$1,711	\$240	\$119	0	0	0	0	\$0	\$0	\$0
La Salle	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Lavaca	1	4	3	1	\$466	\$457	\$114	0	0	0	0	\$0	\$0	\$0
Lee	5	7	7	0	\$778	\$153	\$108	0	0	0	0	\$0	\$0	\$0
Leon	3	5	5	0	\$514	\$168	\$100	0	0	0	0	\$0	\$0	\$0
Liberty	34	66	54	11	\$7,591	\$226	\$116	2	12	7	4	\$904	\$440	\$78
Limestone	7	9	7	2	\$937	\$131	\$101	0	0	0	0	\$0	\$0	\$0
Lipscomb	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Live Oak	1	1	1	0	\$132	\$129	\$129	0	0	0	0	\$0	\$0	\$0
Llano	1	2	2	0	\$191	\$187	\$93	0	0	0	0	\$0	\$0	\$0
Loving	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Lubbock	110	252	201	51	\$27,850	\$253	\$111	1	3	1	2	\$426	\$415	\$135
Lynn	1	3	3	0	\$267	\$262	\$87	0	0	0	0	\$0	\$0	\$0
Madison	5	6	6	0	\$693	\$136	\$112	0	0	0	0	\$0	\$0	\$0
Marion	1	3	3	0	\$267	\$262	\$87	1	2	2	0	\$192	\$187	\$91
Martin	1	2	1	1	\$292	\$286	\$142	0	0	0	0	\$0	\$0	\$0
Mason	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Matagorda	10	21	15	5	\$2,358	\$231	\$115	0	0	0	0	\$0	\$0	\$0
Maverick	21	64	55	8	\$5,739	\$268	\$90	1	3	1	2	\$426	\$415	\$135
McCulloch	1	4	4	0	\$319	\$313	\$78	0	0	0	0	\$0	\$0	\$0
McLennan	89	205	160	46	\$22,531	\$254	\$110	1	3	1	2	\$55	\$54	\$17
McMullen	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Medina	11	25	22	3	\$2,641	\$235	\$107	0	0	0	0	\$0	\$0	\$0
Menard	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Midland	41	98	84	13	\$9,455	\$232	\$97	0	0	0	0	\$0	\$0	\$0
Milam	7	15	11	4	\$1,888	\$264	\$123	0	0	0	0	\$0	\$0	\$0
Mills	1	1	1	0	\$119	\$117	\$116	0	0	0	0	\$0	\$0	\$0
Mitchell	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Montague	5	12	9	3	\$1,356	\$266	\$110	0	0	0	0	\$0	\$0	\$0
Montgomery	99	207	162	46	\$23,751	\$240	\$115	5	19	12	7	\$1,691	\$329	\$89
Moore	7	13	11	2	\$1,581	\$221	\$118	1	3	1	2	\$426	\$415	\$135
Morris	11	24	19	4	\$2,578	\$230	\$109	0	0	0	0	\$0	\$0	\$0
Motley	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Nacogdoches	19	46	42	4	\$4,808	\$248	\$104	0	0	0	0	\$0	\$0	\$0

Navarro	21	55	44	11	\$5,883	\$275	\$106	0	0	0	0	\$0	\$0	\$0
Newton	2	3	3	0	\$323	\$158	\$105	0	0	0	0	\$0	\$0	\$0
Nolan	4	10	9	1	\$1,069	\$262	\$104	0	0	0	0	\$0	\$0	\$0
Nueces	173	397	313	85	\$44,714	\$258	\$113	4	18	13	5	\$1,930	\$470	\$108
Ochiltree	2	6	5	1	\$488	\$239	\$79	0	0	0	0	\$0	\$0	\$0
Oldham	2	4	3	1	\$527	\$258	\$128	0	0	0	0	\$0	\$0	\$0
Orange	38	86	70	17	\$8,785	\$233	\$102	1	4	2	2	\$479	\$466	\$114

TANF CASE and RECIPIENTS FOR THE BENEFITS MONTH: March 2026

County	===== TANF BASIC =====							===== TANF STATE PROGRAM =====						
					Average Payment Per							Average Payment Per		
	Cases	Recipients	Children	Adults	Case	Recipient		Cases	Recipients	Children	Adults	Case	Recipient	
Palo Pinto	9	20	16	3	\$2,222	\$242	\$114	0	0	0	0	\$0	\$0	\$0
Panola	6	14	11	3	\$1,716	\$280	\$119	2	6	3	3	\$816	\$397	\$129
Parker	22	55	41	14	\$6,366	\$284	\$115	1	2	1	1	\$337	\$328	\$160
Parmer	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Pecos	4	11	8	3	\$1,239	\$304	\$110	0	0	0	0	\$0	\$0	\$0
Polk	27	52	41	11	\$6,307	\$238	\$120	0	0	0	0	\$0	\$0	\$0
Potter	49	116	88	28	\$13,540	\$277	\$117	2	7	3	4	\$905	\$440	\$123
Presidio	5	12	12	0	\$1,095	\$215	\$89	0	0	0	0	\$0	\$0	\$0
Rains	5	14	12	2	\$1,171	\$230	\$81	0	0	0	0	\$0	\$0	\$0
Randall	23	52	39	13	\$6,267	\$267	\$120	1	4	3	1	\$468	\$455	\$111
Reagan	2	6	5	1	\$498	\$244	\$81	1	6	4	2	\$505	\$491	\$80
Real	1	2	1	1	\$336	\$330	\$164	0	0	0	0	\$0	\$0	\$0
Red River	9	21	15	5	\$2,559	\$279	\$125	0	0	0	0	\$0	\$0	\$0
Reeves	2	5	5	0	\$451	\$221	\$88	0	0	0	0	\$0	\$0	\$0
Refugio	1	2	1	1	\$336	\$330	\$164	0	0	0	0	\$0	\$0	\$0
Roberts	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Robertson	6	11	9	2	\$1,390	\$227	\$123	0	0	0	0	\$0	\$0	\$0
Rockwall	15	40	36	4	\$3,634	\$237	\$91	0	0	0	0	\$0	\$0	\$0
Runnels	4	9	6	3	\$1,244	\$305	\$135	0	0	0	0	\$0	\$0	\$0
Rusk	9	23	16	6	\$2,733	\$298	\$121	0	0	0	0	\$0	\$0	\$0
Sabine	3	5	3	2	\$805	\$263	\$157	0	0	0	0	\$0	\$0	\$0
San Juneine	1	4	3	1	\$466	\$457	\$114	0	0	0	0	\$0	\$0	\$0
San Jacinto	9	21	16	4	\$2,428	\$264	\$118	0	0	0	0	\$0	\$0	\$0
San Patricio	23	56	44	12	\$6,645	\$283	\$118	1	4	2	2	\$479	\$466	\$114
San Saba	2	3	2	1	\$468	\$230	\$152	0	0	0	0	\$0	\$0	\$0
Schleicher	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Scurry	7	14	12	2	\$1,511	\$212	\$105	0	0	0	0	\$0	\$0	\$0
Shackelford	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Shelby	9	30	23	7	\$3,112	\$339	\$105	0	0	0	0	\$0	\$0	\$0

Sherman	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Smith	46	112	88	24	\$12,441	\$271	\$111	1	2	1	1	\$337	\$328	\$160
Somervell	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Starr	54	133	120	13	\$12,736	\$236	\$95	0	0	0	0	\$0	\$0	\$0
Stephens	3	3	3	0	\$383	\$125	\$0	0	0	0	0	\$0	\$0	\$0
Sterling	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Stonewall	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Sutton	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Swisher	1	1	1	0	\$132	\$129	\$129	1	6	4	2	\$140	\$136	\$22
Tarrant	576	1432	1125	307	\$157,387	\$273	\$110	5	19	12	7	\$2,143	\$417	\$113
Taylor	43	100	81	19	\$11,127	\$260	\$112	0	0	0	0	\$0	\$0	\$0
Terrell	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Terry	2	3	2	1	\$468	\$230	\$152	0	0	0	0	\$0	\$0	\$0
Throckmorton	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Titus	2	5	5	0	\$458	\$225	\$89	0	0	0	0	\$0	\$0	\$0
Tom Green	33	68	54	13	\$7,451	\$228	\$110	4	16	10	6	\$1,721	\$419	\$109
Travis	266	587	454	133	\$67,108	\$252	\$114	8	42	29	14	\$4,156	\$505	\$98
TANF CASE and RECIPENTS FOR THE BENEFITS MONTH: March 2026														
===== TANF BASIC =====								===== TANF STATE PROGRAM =====						
County					Average Payment Per							Average Payment Per		
	Cases	Recipients	Children	Adults	Case	Recipient		Cases	Recipients	Children	Adults	Case	Recipient	
Trinity	2	4	3	1	\$520	\$255	\$127	0	0	0	0	\$0	\$0	\$0
Tyler	4	7	7	0	\$715	\$175	\$99	0	0	0	0	\$0	\$0	\$0
Upshur	9	17	14	3	\$1,943	\$212	\$111	1	2	1	1	\$337	\$328	\$160
Upton	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Uvalde	11	32	25	7	\$3,691	\$329	\$116	0	0	0	0	\$0	\$0	\$0
Val Verde	23	50	37	13	\$5,904	\$252	\$117	0	0	0	0	\$0	\$0	\$0
Van Zandt	13	24	17	6	\$3,090	\$233	\$131	0	0	0	0	\$0	\$0	\$0
Victoria	31	65	55	9	\$7,054	\$231	\$109	2	7	7	0	\$603	\$293	\$82
Walker	20	43	35	8	\$5,104	\$250	\$118	0	0	0	0	\$0	\$0	\$0
Waller	6	13	9	4	\$1,054	\$172	\$79	2	8	4	4	\$982	\$478	\$116
Ward	3	7	7	0	\$649	\$212	\$90	0	0	0	0	\$0	\$0	\$0
Washington	10	26	19	6	\$3,104	\$304	\$121	0	0	0	0	\$0	\$0	\$0
Webb	117	306	263	42	\$30,162	\$257	\$99	1	7	5	2	\$683	\$665	\$93
Wharton	7	14	10	4	\$1,911	\$268	\$133	0	0	0	0	\$0	\$0	\$0
Wheeler	1	2	2	0	\$191	\$187	\$93	0	0	0	0	\$0	\$0	\$0
Wichita	61	142	112	30	\$16,164	\$264	\$114	4	15	10	5	\$1,615	\$393	\$109

Wilbarger	0	0	0	0	\$0	\$0	\$0	0	0	0	0	\$0	\$0	\$0
Willacy	13	28	22	6	\$3,405	\$257	\$123	0	0	0	0	\$0	\$0	\$0
Williamson	99	233	170	63	\$27,426	\$277	\$118	2	6	4	2	\$671	\$326	\$106
Wilson	8	17	12	5	\$2,135	\$262	\$122	0	0	0	0	\$0	\$0	\$0
Winkler	1	2	2	0	\$191	\$187	\$93	0	0	0	0	\$0	\$0	\$0
Wise	6	13	12	1	\$1,233	\$201	\$92	2	12	7	4	\$1,162	\$565	\$100
Wood	5	9	8	1	\$1,034	\$203	\$112	1	3	1	2	\$426	\$415	\$135
Yoakum	2	2	1	1	\$294	\$144	\$143	0	0	0	0	\$0	\$0	\$0
Young	3	7	5	2	\$935	\$305	\$130	1	3	1	2	\$426	\$415	\$135
Zapata	3	12	11	1	\$1,098	\$359	\$89	0	0	0	0	\$0	\$0	\$0
Zavala	5	10	8	2	\$1,092	\$214	\$106	0	0	0	0	\$0	\$0	\$0
Unknown	10	22	14	7	\$2,851	\$280	\$132	0	0	0	0	\$0	\$0	\$0
STATE TOTALS	8,948	21,696	17,386	4,310	\$2,359,346	\$264	\$109	226	869	521	348	\$90,208	\$399	\$104

TANF Basic and State Program consist of cases which received a benefit in the reporting month, for the reporting month.

Data Source:

TANF Warrant History file, DM_MED_TF_Edg_EOM

Forecasting

Texas Health and Human Services Commission

Case = designated group of people certified to receive the benefit (can be more than one person).

Recipients = the individuals receiving the benefit.

Children = dependents under the age of 19

Average Payment Per Case = average dollar benefit available to the case (shared by the recipients on that case).

Average Payment Per Recipient = average dollar benefit available to each recipient on a case.

TANF Basic is the assistance program for qualifying child-only or single parent families funded with Federal dollars.

TANF State Program assists qualified 2 parent families and is funded with State General Revenue dollars.

3. Review/Approve – Lease agreement for Del Rio office for a five-year term with a potential of extension of additional 5 year

Information will be handed out at board meeting.



WORKFORCE SOLUTIONS
MIDDLE RIO GRANDE

A proud partner of the AmericanJobCenter® network

Information Systems Policies and Procedures

Workforce Solutions Middle Rio Grande
Board

June 1, 2026

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1. Introduction

Workforce Solutions Middle Board (WFSMRG) and the Texas Workforce Commission (TWC) have controls in place to manage and protect all WFSMRG/TWC computer and information systems.

WFSMRG maintains policies and procedures to be followed by all users of WFSMRG information and computer systems. All users are expected to review these policies and procedures prior to gaining access to information in WFSMRG custody. These policies address access, use, and disclosure of electronic mail and Internet messages and material created, sent, or received using these systems. WFSMRG intends to honor the policies set forth in this document but reserves the right to change them at any time.

1.1 Purpose

The Information Security Policies and Procedures are enacted to create an organizational model for information security that:

- Defines the types and criticality of data and systems under the scope of the WFSMRG Information Security Plan.
- Detects and preempt information security breaches caused by internal users, trusted partner's or third-party vendor's misuse of networks, data, applications, computer systems, and mobile devices.
- Limits access to key information technology assets to those who have an acceptable use.
- Protects WFSMRG's reputation.
- Upholds ethical, legal, and regulatory requirements.
- Safeguard's customer data and responds to incidents, inquiries, and complaints about non-compliance of security requirements and data protection.
- Anticipates the efforts necessary to recover information systems, applications, and processes in case of a disaster or event that seriously impleads regular operations.

1.2 Authority

These policies, standards, procedures, and guidelines apply to all WFSMRG data, systems, activities, and assets owned, leased, controlled, or used by WFSMRG, its employees, contractors, or other business partners on behalf of WFSMRG. These policies, standards, procedures, and guidelines apply to all WFSMRG employees, contractors, sub-contractors and their respective facilities supporting WFSMRG business operations, wherever WFSMRG data is stored or processed, including any third-party contracted by WFSMRG to handle, process, transmit, store, or dispose of WFSMRG data.

Some policies apply specifically to people with a specific job function (e.g., a System Administrator); otherwise, all personnel supporting WFSMRG operations shall comply with

the policies. WFSMRG departments shall use these policies or may create a more restrictive policy, but none that are less restrictive, less comprehensive, or less compliant than these policies to ensure WFSMRG will:

- A. Maintain the confidentiality of WFSMRG information from unauthorized access.
- B. Maintain the integrity and availability of WFSMRG information stored on or processed by WFSMRG information systems.
- C. Maintain compliance according to the Texas Administrative Code (TAC), Title 1, Part 10, Chapter 202 and applicable state and federal laws, regulations, and rules.

These policies do not supersede any other applicable law or higher-level agency directive or existing labor management agreement in effect as of the effective date of this policy. WFSMRG's documented cybersecurity roles & responsibilities provides a detailed description of WFSMRG user roles and responsibilities regarding cybersecurity. WFSMRG reserves the right to revoke, change or supplement these policies, standards, procedures, and guidelines at any time without prior notice. Such changes shall be effective immediately upon approval by management unless otherwise stated.

1.3 MISSION and PRINCIPLES

1.3.1 1.3.1 Mission

WFSMRG's cybersecurity mission is to enable WFSMRG's staff and customers to operate securely.

1.4 IDENTIFY (ID)

1.4.1 PRIVACY AND CONFIDENTIALITY

Background

WFSMRG has in their possession large quantities of PII and other sensitive information relating to their organizations and staff, subcontractor and partner organizations and staff, and individual program participants. This information is generally found in personnel files, participant data, performance reports, program evaluations, grant and contract files, and other sources.

Based on the Office of Management and Budget (OMB) and DOLETA definitions, WFSMRG defines PII and other sensitive information as follows:

- PII- information that can be used to distinguish or trace an individual's identity, either alone or when combined with other personal or identifying information that is linked or linkable to a specific individual. PII includes, but is not limited to, Social Security numbers(SSNs), credit card numbers, bank account numbers, home telephone numbers, mobile telephone numbers, ages, birth dates, marital status, spouse names, educational history, biometric identifiers (for example, fingerprints, voiceprints, and iris scans), medical history, financial information, and computer passwords.
- Other sensitive information- any unclassified information whose loss, misuse, or

unauthorized access to or modification of could adversely affect the interest or the conduct of federally funded programs, or the privacy to which individuals are entitled under the Privacy Act of 1974, as amended (5 USC §55a). This includes information covered by the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

All staff will:

- A. Adhere to the latest policy directive for (20-17) Handling and Protection of Personally Identifiable Information and Other Sensitive Information
- B. Minimize the use of PII in testing, training, and research and implement controls to protect PII in any of these activities. Any collection, paper or electronic, SSNs for any purpose will need to be approved and authorized by the Executive Director and Information Security Officer.
- C. Take all required privacy and confidentiality training set forth by WFSMRG Information Security Officer.
- D. Evaluate any proposed new instances of sharing PII with third parties to assess whether the sharing is authorized and whether additional or new public notice is required. Sharing PII with third parties will need to be approved and authorized by the Executive Director and Information Security Officer.
- E. Data Accuracy:
 - PII must be verified at the point of collection using automated validation (e.g., format checks) or manual confirmation.
 - Regular reviews of PII for errors or inconsistencies shall be conducted, with corrections documented and communicated to affected parties.
- F. Prohibited Actions:
 - Retaining PII beyond approved retention periods
 - Using PII for unauthorized secondary purposes
- G. Privacy Notices:
 - When Notices Are Provided:**
 - At the point of PII collection (online or offline)
 - When the purpose of collection changes
 - Upon request by the individual

Contents of the Privacy Notice:

- Identity of the collecting organization
- Purpose of data collection
- Types of PII collected
- How the data will be used and shared
- Individual rights (access, correction, appeal)
- Contact information for the WFSMRG's Privacy Officer

Distribution Methods:

- Online (on organizational websites and applications)
- Embedded within forms or portals

Review and Updates:

- Privacy notices must be reviewed annually and updated as needed based on policy, process, or system changes.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.4.2 DATA CLASSIFICATION

Background

Types of Data:

- **Public** – any data that is appropriate for public view. Examples, center calendars, upcoming events and other services offered.
- **Sensitive** – any data that is only for staff use. Examples, staff schedules, internal meeting notes and staff manuals or instructions.
- **Confidential** – any data that contains personally identifiable information of staff and/or customers. Examples, any document that contains SSNs, birth dates, and other PII as defined in Directive 20-17

The default classification for all electronic data is Confidential. Data must be protected in accordance with the security controls specified for the classification level that it is assigned.

Policy

WFSMRG will:

1. Physically control and securely store media containing Sensitive or Confidential data.
2. All Sensitive and Confidential data should be stored on a WFSMRG owned computer or WFSMRG controlled storage system like SharePoint/OneDrive.
3. No customer PII is ever to be posted to social media/networking sites or public websites.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.4.3 CLOUD USAGE AND SECURITY

Introduction

The assessment and evaluation of risk with the use of "cloud" technologies including Software as a Service (SaaS), Platform as a Service (PaaS), and Information as a Service (IaaS), to ensure

that business operations can deliver programs and services efficiently and effectively within acceptable tolerances for potential negative outcomes.

Purpose

The purpose of this policy is to ensure IT security controls are in place, effective, and are not being bypassed.

Policy

- A. Staff are prohibited from using cloud services that are not procured or provisioned by WFSMRG, including free online services.
- B. All access to cloud services will be granted based on a user's role.
- C. If access is needed to cloud services an email request is required from a user's supervisor to the CIO.
- D. Where possible, SSO will be used to manage access to WFSMRG provided cloud services.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.4.4 SECURITY ASSESSMENT AND AUTHORIZATION / TECHNOLOGY RISK ASSESSMENTS

Introduction

Evaluate WFSMRG assets and applications in terms of design and architecture in conjunction with existing or available controls to ensure that current and anticipated threats are mitigated within acceptable risk tolerances. Includes an analysis of in-place WFSMRG assets periodically or when significant change occurs as well as the analysis of the introduction of new technology assets.

Purpose

The purpose of this policy is to ensure IT infrastructure security controls are in place, effective, and are not being bypassed.

REFERENCES:

ABA Agreement

Policy

- A. Fully integrate the security authorization processes into an agency-wide risk management program.
- B. Personnel performing designated roles in the security assessment and authorization process are responsible that the processes are executed and maintained in compliance with State and local agency policies to ensure that access to information assets is appropriate to the job responsibilities of every individual interacting with State owned information assets.
- C. The installation of software programs that are not explicitly authorized by WFSMRG is prohibited.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.4.5 EXTERNAL VENDORS AND THIRD-PARTY PROVIDERS

Introduction

Evaluation of third-party providers and external vendors to ensure security requirements are met for information and information resources that will be transmitted, processed, stored, or managed by external entities. Includes contract review as well as the development of service level agreements and requirements.

Purpose

To ensure IT infrastructure security controls are in place, effective, and are not being bypassed.

Policy

- A. Any third-party provider or external vendor will need authorization from the Executive Director to access any WFSMRG or TWC system, including but not limited to, WFSMRG's Microsoft 365 system.
- B. Third-party users will adhere to these policies and procedures, and they will also be required to sign an employee confidentiality agreement prior to gaining access to

critical systems.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.4.6 SECURE APPLICATION DEVELOPMENT

Introduction

Secure Application Development is a practice to ensure that code and processes that go into developing applications are as secure as possible. This entails developed applications meeting predefined security requirements prior to implementation on the agency production networks so that risk from internal and external sources are mitigated.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. Secure application development will enumerate best practices that should be followed to ensure secure development of applications.

Policy

- A. Application developers are required to stay updated on secure application development principles and guidelines (ex. OWASP top 10).
- B. WFSMRG will adopt the Agile secure development life cycle (SDLC) for all in-house software development.
- C. WFSMRG will follow the Workforce MRG Board Secure Application Development Guide
- D. Personnel with information security roles and responsibilities are identified and documented throughout the SDLC.
- E. Configuration management of applications and system components are performed and documented.
- F. Only changes to the information systems approved by the Executive Director/CIO and appropriate IT staff are implemented and documented.
- G. Security testing of information systems is performed before connecting to WFSMRG network.
- H. Security flaws identified during security testing are tracked and corrected.
- I. Test environments will be separate from the production environment.
- J. All documentation of the SDLC process will be stored on a SharePoint site accessible to only the Executive Director, ISO and application developers.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information

Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.4.7 PENETRATION TESTING

Introduction

Penetration testing can be performed either internally or externally through manual or automated assessments of the agency's computer systems, network, or web applications to identify vulnerabilities that could be exploited by adversaries.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. Penetration testing policy will act as a guide for conducting penetration testing on WFSMRG information systems.

Policy

- A. Staff will cooperate with penetration testing activities, providing access to necessary systems and information.
- B. Staff will report any suspicious activities or potential security incidents encountered during or after penetration testing.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.4.8 VULNERABILITY TESTING

Introduction

Vulnerability testing involves using tools to scan the WFSMRG's computing devices to identify vulnerabilities. The results of the scan are used to inform management and system administrators of known and potential vulnerabilities so those vulnerabilities can be addressed and managed.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. Vulnerability testing provides authority for conducting regular scans on the agency network.

Policy

Staff shall:

- A. Comply with all requests related to vulnerability testing, including providing necessary access and information.
- B. Promptly report any suspicious activities or security incidents identified during the vulnerability testing.
- C. Participate in training and awareness programs related to security best practices and vulnerability management.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5 PROTECT (PR)

1.5.1 SECURITY AWARENESS AND TRAINING

Introduction

Security Awareness and Training defines, prepares, delivers, and facilitates an ongoing awareness campaign utilizing a wide variety of mediums and delivery mechanisms to educate the organization effectively and constantly on security related information, threats, and technology risks.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed.

Policy

- A. All users will be automatically enrolled in training during the new hire process, and will be periodically enrolled in refresher training annually.
- B. Phishing tests will be conducted periodically.
- C. Based on job duties or phishing test results, users may be enrolled in additional training.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.2 PRIVACY AWARENESS AND TRAINING

Introduction

Privacy Awareness and Training defines, prepares, delivers, and facilitates an ongoing awareness campaign utilizing a wide variety of mediums and delivery mechanisms to educate the organization effectively and constantly on privacy requirements and information related to the protection of privacy risks and protections.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed.

Policy

WFSMRG will:

- A. All users will be automatically enrolled in training during the new hire process, and will be periodically enrolled in refresher training annually.
- B. Phishing tests will be conducted periodically.
- C. Based on job duties or phishing test results, users may be enrolled in additional training.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.3 CRYPTOGRAPHY

Introduction

Cryptography is a method of converting ordinary plain text to store and transmit data in a particular form so that only those for whom it is intended can read and process it. This policy defines the controls and related procedures for the various areas where encryption and other cryptographic techniques are employed.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. This Cryptography policy provides guidance that limits the use of encryption to those algorithms that have received substantial public reviews and have been proven to work effectively.

Policy

- A. Require data that is classified as sensitive or confidential to be encrypted while in-transit and while at-rest. This includes data that is considered internal communications.
- B. Prevent unauthorized and unintended information transfer via shared resources.
- C. Strongly recommend the use of the Advanced Encryption Standard (AES) for symmetric encryption.
- D. Require all servers and applications using SSL or TLS to have the certificates signed by a known, trusted provider. All User's should only visit https sites.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.4 CONTINGENCY PLANNING

Introduction

Contingency Planning describes the minimum standards that must be in place to effectively create a plan for how to respond if routine business operations are suspended. Contingency planning provides a system-based method to address the "Recover" objective of the Texas Cybersecurity Framework.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed.

Policy

The WFSMRG will:

- A. Report to their manager and/or IT if a critical system is down.
- B. Make sure to save work periodically or use Microsoft's auto-save functionality.
- C. Updates will be provided via email or internal message board when effected systems are back online.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative

or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.5 MEDIA

Introduction

Digital and non-digital information system media includes, but is not limited to, physical and logical protection, the assurance that access to information-on-information system media is limited to authorized users, and requirements that information system media is sanitized or destroyed before disposal or release for reuse.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed.

Policy

WFSMRG will:

- A. Protect and control information system media during transport outside of controlled areas.
- B. Media containing confidential information must be encrypted if it leaves WFSMRG controlled areas.
- C. Maintain accountability for information system media during transport outside of controlled areas.
- D. Restrict the activities associated with the transport of information system media to authorized personnel.
- E. Be aware that WFSMRG can restrict or prohibit the usage of information systems which it deems unsafe or inappropriate.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.6 PHYSICAL AND ENVIRONMENTAL PROTECTION

Introduction

Physical and Environmental Protection assures that physical access to information systems, equipment, and the respective operating environments is limited to authorized individuals. This includes protection of the physical locations, support infrastructure, and information systems to ensure that supporting utilities are provided to limit unplanned disruption and provide appropriate environmental controls in facilities containing information systems.

Purpose

To safeguard company data and assets by requiring reasonable physical and environmental protections at employee work-from-home locations, in alignment with NIST 800-53 guidance

Policy

Physical Security Requirements

- Employees must maintain a secure work area that prevents unauthorized physical access to company-issued devices, sensitive information, and printed materials.
- Company devices and documents are to be locked or secured when not in use, and never left unattended or accessible to unapproved individuals, including visitors, roommates, or family members.
- Keys, passwords, and access credentials should be kept private at all times.

Environmental Protection

- Employees shall ensure that work devices and sensitive information are protected from risks such as fire, water damage, theft, and environmental hazards common to home offices.
- Devices must be used in locations with stable electricity, reasonable climate control, and adequate physical protection (not outdoors or in vehicles except in transit).
- Employees must promptly report any physical theft, loss, or damage affecting company assets or data.

Monitoring and Enforcement

- If an employee's workspace cannot meet these requirements, arrangements must be made for alternative controls or risk mitigation.
- Non-compliance may result in corrective action, up to termination of remote privileges or employment.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and CIO.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.7 PERSONNEL SECURITY

Introduction

Personnel Security ensures that the personnel responsible for WFSMRG information are identified and their responsibilities are clearly defined. Any personnel occupying positions of responsibility within WFSMRG (including third-party service providers) are trustworthy and meet established security criteria for those positions.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. Personnel Security policy establishes the requirements for the protection of WFSMRG employees, contractors, and third-party users to maintain their security responsibilities.

Policy

WFSMRG will:

- A. Employee's will be screened via background check before authorizing access to information systems.
- B. Review and confirm ongoing operational need for current access authorizations to information systems when personnel are reassigned or transferred to other positions within the organization.
- C. Will notify IT if staff responsibilities change.
- D. HR Representative should send notification to the new employee's direct manager/supervisor, fiscal, IT, and Managing Director informing them of the new employee's name, position, start date, and contact information
- E. Ensure that personnel requiring access to organizational information and information systems sign appropriate access agreements prior to being granted access.
- F. Notify IT as soon as possible, via email, when staff are terminated.

Procedures

Supervisors

- Email all new hire, termination, or transfer requests to IT.
- Provide accurate employee details (name, ID, position, start/end dates, destination department or role).
- Enter requests at least **5 business days** before a new hire's start date or a transfer effective date; within **1 business day** of termination.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal

action.

1.5.8 THIRD-PARTY PERSONNEL SECURITY

Introduction

Third-Party Personnel Security requires all third-party providers to comply with all security policies and standards. Third-party providers include, but are not limited to; service bureaus, contractors, and other organizations providing information system development, information technology services, outsourced applications, and network and security management.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed.

Policy

WFSMRG will:

- A. Third-party providers will request access to systems by emailing the ED.
- B. Require third-party providers to comply with personnel security policies and procedures established by WFSMRG.
- C. Third-party providers to notify WFSMRG of any personnel transfers or terminations of third- party personnel who possess organizational credentials and/or badges, or who have information system privileges within WFSMRG.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.9 ACCESS CONTROL

Introduction

Access Control is a process used to ensure access to applications, servers, databases, and network devices in the environment is limited to authorized personnel. Access is to be limited to authorized personnel, processes acting on behalf of authorized personnel, or authorized devices. Authorized personnel are further limited to the types of transactions and functions that they are permitted to exercise based on their assigned job duties.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed.

Policy

WFSMRG will:

- A. Not share log in information with anyone.
- B. Will use complex passwords and MFA where available.
- C. Request any access changes through their manager, and the manager will request or submit an email or problem report to the ISO.
- D. Sign an updated employee confidentiality agreement from WFSMRG annually.
- E. Complete all training as required by WFSMRGISO.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.10 ACCOUNT MANAGEMENT

Introduction

Account Management enforces oversight functions on user and system accounts that access the agency information resources and include creation, maintenance, and removal when the accounts are no longer needed.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. Account Management establishes guidelines for issuing and managing accounts.

Policy

WFSMRG will:

- A. Request or remove system access through an email from a supervisor to the ISO.
- B. All account access will be granted based on job title.
- C. Additional access will be granted only if requested by a supervisor and must be required to perform necessary job duties. An email must be sent to the ISO, or a problem report must be submitted.
- D. The ISO must be notified when a user no longer needs access to a system by sending an email to the ISO or submitting a problem report.
- E. Account reviews will be sent out to supervisors periodically, and the supervisor must respond to the review in a timely manner.
- F. All administrator user accounts shall be reviewed every six months.

- G. May not share accounts.
- H. If a mandatory annual training is not on record then the user's rights will be inactivated until the user produces current training certificates.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.11 ACCEPTABLE USE POLICY

Purpose

This Acceptable Use Policy acts as an agreement between the WFSMRG and the user receiving Information Technology (IT) assets. Assets are defined as anything that has value to an organization, including, but not limited to, another organization, person, computing device, IT system, IT network, software (both an installed instance and a physical instance), virtual computing platform (common in cloud and virtualized computing), and related hardware (e.g., locks, cabinets, keyboards). This Acceptable Use Policy defines permitted usage of these assets, as well as restricted actions that users must not take in order to reduce risk to the WFSMRG.

Policy

This policy is applicable to all users within the WFSMRG who receive and utilize WFSMRG assets, which includes all members of the workforce (both on-site and remote), third-party vendors, contractors, service providers, consultants, or any other individual that operates an WFSMRG asset. to all departments and users of WFSMRG resources and assets.

USER RESPONSIBILITIES:

1. Users must only use approved technology and services.
2. All WFSMRG assets are on loan to users so that essential job functions may be performed.
3. Upon separation from the WFSMRG or contract termination, all supplied IT assets, and the associated data must be returned by the user.
4. Users must secure the physical environment around their workstation and lock their computers when stepping away.
5. Users must ensure that Personally Identifiable Information (PII), confidential, and any sensitive data that may be covered by government or other regulation, is not readily available or accessible on their desks or within their workspace.
6. All users must take appropriate care to protect information, systems and related assets within their custody or care from loss, damage, or harm.

- a. Lost or damaged equipment must be reported to IT within one hour of discovery.
7. Users must store their passwords in a secure manner.
 - a. Approved password managers must be used to store passwords digitally.
8. Users-assigned accounts must only access assets, operating systems, applications, files, and data to which they have been granted access. The ability to inadvertently read, execute, modify, delete, or copy data does not imply permission to do so.
9. Only authorized users are permitted to post content or create the impression that they are representing, stating opinions, or otherwise making statements on behalf of the WFSMRG on social networking sites, blogs, or other internet sites.
10. Users must keep knowledge about information and information systems gained during employment confidential and confidentiality must be maintained after employment ceases.

PROHIBITED USE:

1. Only approved and authorized devices may be connected to networks owned or managed by the WFSMRG. This includes portable end-user devices, removable devices (e.g., USB sticks) and personally owned devices.
2. Users must not share their passwords with others or allow the use of their account by others.
 - a. Users are responsible for all activity originating from their usernames and accounts.
3. Users must not circumvent user authentication mechanisms or the security of any user account or information system asset.
4. Users must not install software, hardware, or modify system configuration settings on any WFSMRG asset, unless explicitly permitted by the user's role and responsibility.
5. Users shall not connect unauthorized or personally owned devices to WFSMRG networks without prior written approval.
6. Users must not engage in any activity with the intent to disrupt WFSMRG assets or networks.
 - a. Users must not perform any form of network monitoring, port scanning or security scanning unless this activity is a part of the individual's normal job and is formally authorized.
7. Users must not use PROTECTED/RESTRICTED data in public AI applications.

EXPECTATIONS OF PRIVACY:

1. When using WFSMRG resources, the user shall have no expectation of privacy. Access and use of the Internet, including communication by e-mail and instant messaging and the content thereof, are not confidential, except in certain limited cases recognized by law.
2. The WFSMRG reserves the right to monitor, access, and disclose all information generated

and actions performed using WFSMRG IT assets. Files, messages (including attachments), and logs may be retained and used as evidence in litigation, audits, and investigations.

PERSONAL USE:

1. Users are permitted **limited** personal use of WFSMRG assets, such as visiting websites.

REPORTING VIOLATIONS:

1. Users who are aware of any event which threatens the availability, integrity or confidentiality of WFSMRG data, or which breaches any standard, policy, procedure, or any associated requirement, or is contrary to law, must immediately contact IT or their immediate manager.

REMOTE WORK:

1. All WFSMRG work must be performed on WFSMRG-approved assets.
2. All WFSMRG data must be stored on approved WFSMRG assets.
3. Users must not connect WFSMRG assets to open, unencrypted WiFi networks without utilizing the WFSMRG VPN.
4. Users must be aware of their surroundings when working remotely to ensure others are not shoulder surfing or viewing sensitive material.

COMPLIANCE

Employees who violate this policy may be subject to appropriate disciplinary action up to and including discharge as well as both civil and criminal penalties. Non-employees, including, without limitation, contractors, may be subject to termination of contractual agreements, denial of access to IT resources, and other actions as well as both civil and criminal penalties.

POLICY EXCEPTIONS

Requests for exceptions to this policy shall be reviewed by the WFSMRG IT Director. Departments requesting exceptions shall provide such requests to the CIO. The request should specifically state the scope of the exception along with justification for granting the exception, the potential impact or risk attendant upon granting the exception, risk mitigation measures to be undertaken by the IT Department, initiatives, actions and a timeframe for achieving the minimum compliance level with the policies set forth herein. The CIO shall review such requests; confer with the requesting department.

POLICY REVIEW

This policy will be reviewed by the IT Director annually, or as needed.

1.5.12 INTERNET CONTENT FILTERING

Introduction

Internet Content Filtering ensures employees use the internet in a safe and responsible manner and ensures that employee web use can be monitored or researched for incidents.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. The Internet Content Filtering policy is used to define standards for systems that monitor and limit web use from any WFSMRG asset.

Policy

WFSMRG will:

- A. Ensure files and applications from outside WFSMRG sources may not be downloaded onto WFSMRG computers or networks without prior authorization from the WFSMRGISO and without proper licensing agreements.
- B. Improper download material includes, but is not limited to, executables such as files with .exe, .bat, .com extensions or any type of screen saver or desktop.
- C. The use of screen savers and desktops is limited to what is available on the Windows operating system.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.13 DATA LOSS PREVENTION

Introduction

Data loss prevention (DLP) refers to a comprehensive approach covering people, processes, and systems that identify, monitor, and protect data in use, data in motion, and data at rest, through deep content inspection and with a centralized management framework.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. DLP solutions go beyond securing the network to securing systems within the network, and to securing the data itself. DLP controls are based on policy, and include classifying sensitive data, discovering that data across an enterprise, enforcing controls, and reporting and auditing to ensure policy compliance.

Policy

WFSMRG will:

- A. Report any disclosure or suspected disclosure of PII to the CIO as soon as possible.
- B. Be aware that emails containing PII should be encrypted using Microsoft 365 or appropriate native software prior to sending.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.14 IDENTIFICATION AND AUTHENTICATION

Introduction

Identification and Authentication encompass the verification of the claimed identity of users, processes, or devices as a prerequisite to permitting access. Failure to assign individual user identification and a relevant authentication mechanism to confirm the claimed identity of a user may result in potential fraud and/or falsification of user identities.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed.

Policy

WFSMRG will:

- A. Restrict access to the WFSMRG network without a valid identity.
 - 1. Assign every employee, contractor, and device their own unique identifier.
 - 2. The identifier shall not be reused.
 - 3. The identifiers shall be disabled after 120 days of inactivity.
- B. Require password-based authentication for information systems and enforce a minimum password complexity of:
 - 1. At least twelve characters
 - 2. At least one numeric character
 - 3. At least one special character
 - 4. At least one uppercase
 - 5. At least one lowercase letter
- C. Enforce password minimum lifetime restriction of one day.
- D. The WFSMRG information system shall be configured to ensure password is not revealed to anyone, including supervisors, security administrators and help desk personnel.
- E. Account passwords shall not transverse the network or be stored in clear text.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.15 SPAM FILTERING

Introduction

Spam Filtering employs protective mechanisms at information entry and exit points to detect and take-action on unsolicited messages. Uncontrolled spam email activity makes it more difficult for the agency to identify and prevent phishing attacks, hampers productivity and increases the intrusion of malware.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. Spam Filtering policy ensures spam emails are being detected and blocked or filtered.

Policy

The WFSMRG will:

- A. Use Microsoft's EOP (Exchange Online Protection) to protect the organization against spam, malware, and other email threats.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.16 PORTABLE AND REMOTE COMPUTING

Introduction

Computing is no longer limited to traditional workstations. Mobile computing has introduced tablets, smartphones, handhelds, laptops, and other computing devices designed to be portable and facilitate productivity for remote users. Traditional controls still apply in many areas, but additional considerations must be made for portable and remote computing devices and the specific configuration and enforcement of controls will likely require special consideration.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. Portable and Remote Computing policy ensures that mobile devices will not introduce unacceptable risk to the WFSMRG's users, network, data and other assets via

effective controls, tools, and user awareness.

Policy

WFSMRG will:

- A. Require authorization prior to granting access for remote sessions.
- B. Report loss or theft of portable computing devices immediately upon discovery.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.17 SYSTEM COMMUNICATIONS PROTECTION

Introduction

System Communications Protection is the control, monitoring, management and protection of communications and transmissions between information systems. This includes network architecture considerations, inventory of confidential and restricted data transmissions, permitted inbound and outbound Internet communications, permitted inbound and outbound extranet and intranet communications, as well as communications between agencies.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. System Communications Protection policy ensures systems and data are not accessed by unauthorized parties and systems and applications are not exposed to excessive threats.

Policy

WFSMRG will:

- A. Not store any PII on USB devices.
- B. Ensure network connectivity is terminated after the end of a session or after a period of defined inactivity. This may vary by system.
- C. Ensure only WFSMRG authorized cameras, phones, etc. are used for WFSMRG business.
- D. Ensure that any sensitive data such as PII be shared using secure methods such as SharePoint, or encrypted email.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information

Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.5.18 INFORMATION SYSTEMS CURRENCY

Introduction

Systems Currency ensures that the necessary knowledge, skills, hardware, software, and supporting infrastructure are available at a reasonable cost to support information systems operations. This includes the monitoring and planning of future system developments that enable the organization to leverage modern technology and reduce technical debt.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed.

Policy

WFSMRG will:

- A. Send a computer problem report to IT if any outdated software is found on any system.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.6 RESPOND (RE)

1.6.1 CYBERSECURITY INCIDENT RESPONSE

Introduction

A cybersecurity incident is any event that threatens the confidentiality, integrity, or availability of information assets. This includes computer system breach, unauthorized use of system, data or software, loss of equipment with WFSMRG sensitive data. A coordinated Cybersecurity Incident Response process reduces the likelihood of agency business disruption, reputational damage, and being non-compliant.

Purpose

The purpose of this policy is to ensure the agency is adequately prepared to respond to cybersecurity incidents.

Policy

WFSMRG will:

- A. Must report immediately any suspected cybersecurity incidents to cybersecurity management via email.
- B. Report cybersecurity incidents in a timely manner.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.6.2 PRIVACY INCIDENT RESPONSE

Introduction

A privacy incident is the loss of control, compromise, unauthorized disclosure, acquisition, or access to information deemed personally identifiable other than an authorized user and for an authorized purpose whether physical or electronic. The agency processes PII and must have an effective Privacy Incident Response in place whenever there is a compromise.

Purpose

The purpose of this policy is to ensure security controls are in place, effective, and are not being bypassed. The Privacy Incident Response policy ensures adequate controls and safeguards are in place to protect PII.

Policy

WFSMRG will:

- A. Must report immediately any suspected privacy incidents to cybersecurity management via email.
- B. Report privacy incidents in a timely manner.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

Enforcement

Any WFSMRG personnel found to have violated this policy may be subject to administrative or disciplinary action, up to and including termination of employment and potentially legal action.

1.6.3 Backup and Recovery Policy

Purpose

The purpose of this Backup and Recovery Policy is to establish a comprehensive framework for the governance of data backup and recovery operations within the Workforce Solutions Middle Rio Grande (WFSMRG) Information Technology (IT) Department. This policy is intended to ensure the reliable protection, secure storage, and timely restoration of WFSMRG data in the event of data loss, corruption, hardware or system failure, cybersecurity incidents, or other operational disruptions.

Policy

This policy is intended to ensure that WFSMRG operations will maintain resilient, secure, and that tested backups are aligned with applicable legal retention and business continuity requirements

RECOVERY PLAN

11. A process for performing data recovery activities must be established.
 - a. This process must be documented and approved.
 - b. At a minimum, the data recovery process must be reviewed on an annual basis or following significant changes within the enterprise.
 - c. IT must identify personnel to handle specific aspects of the data recovery process.
12. IT must identify the appropriate data to back up.
 - a. IT must leverage the data inventory in order to assist with this identification process.
 - b. Data owners must be consulted to understand the sensitivity of enterprise data in accordance with the data management process.
13. IT must analyze any cloud service providers used by WFSMRG to ensure that WFSMRG data is being backed up as needed.
14. The WFSMRG Systems Administrator and IT Director will document the required backup and associated data recovery processes into the WFSMRG *Data Recovery Plan*.
15. Define recovery time objectives (RTO) and recovery point objectives (RPO) by system criticality tier; include application dependencies and order of operations.
16. Maintain system-specific recovery runbooks (databases, file shares, endpoints, SaaS like Microsoft 365/SharePoint/OneDrive/Google Drive) with locations of backups, authentication steps, and validation checks.
17. Integrate with the Incident Response Plan: decision authority, communication templates, and criteria for rebuild vs. restore decisions.
18. Provide for Version-control of the WFSMRG *Data Recovery Plan*; capture after-action items and update within 30 days of tests/real events.

BACKUP PLAN

2. IT must backup data according to the documented *Data Recovery Plan*.
3. Automated tools must be used to meet data backup objectives.
 - a. Automated backups must be performed on a weekly basis, or more frequently.
4. Data should be retained in accordance with the data retention schedule outlined in the *Data Management Policy*.
5. Access controls must be used to prevent backups from being accessed or modified in an unauthorized manner.

6. Where practical, ensure all backups are deleted in accordance with the WFSMRG destruction requirements of the *Data Management Policy*.
7. IT Department must maintain offsite (recommend using offline/air-gapped/cloud-based options) backups of WFSMRG data.
8. Backup data should be maintained with the same data classification, access, and protection levels of the original source data.
9. Align data retention with TSLAC schedules for local governments where applicable; apply legal holds when directed by Legal; document retention by data class.

TEST

1. Backups should be tested by restoring critical data at least once per year to ensure that data is being backed up properly and that procedures are in place to recover as necessary. The Data Recovery Plan should be updated when changes to backups occur or at the conclusion of the annual backup test at a minimum.
2. Test frequency: quarterly sample restores for critical systems; annual full-scope exercise (including offsite/immutable media) with success criteria.
3. Track metrics: restore success rate, mean time to restore (MTTR), data integrity checks, and defects found/closed.
4. Perform malware scanning on restored samples to ensure clean recovery; verify application-level consistency (e.g., DB checks).

RECOVER

2. During an incident, IT must leverage the *Data Recovery Plan* to restore data and functionality in a prioritized manner.
 - a. Ensure the incident response team is included in the data recovery process.
 - b. The incident response plan must be activated.
 - c. Establish restoration priority tiers (Tier 0 identity/DNS, Tier 1 core apps, etc.) and require executive sign-off before deviating.
 - d. Validate restorations with business owners before returning to production; capture post-incident lessons learned within two weeks.

BACKUP MEDIA HANDLING & OFFSITE

1. Document offsite location(s), transport chain-of-custody, environmental protections, and vendor SLAs; test retrieval procedures annually.
3. Sanitize or destroy retired media in accordance with the Data Management Policy; retain certificates of destruction for sensitive media.

COMPLIANCE

Employees who violate this policy may be subject to appropriate disciplinary action up to and including discharge as well as both civil and criminal penalties. Non-employees, including, without limitation, contractors, may be subject to termination of contractual agreements, denial of access to IT resources, and other actions as well as both civil and criminal penalties.

POLICY EXCEPTIONS

Requests for exceptions to this policy shall be reviewed by the WFSMRG IT Director. Exception requests must include scope, justification, risk assessment, compensating controls, owner, and an expiration date. High-risk exceptions require Executive Director approval.

POLICY REVIEW

This policy will be reviewed annually and updated as necessary based on security threats and legislative requirements.

EFFECTIVE DATE:

06/01/2026

2. AI Usage Policy

Purpose and Scope

To establish guidelines for the responsible and secure use of Artificial Intelligence (AI) tools and services on devices owned or managed by WFSMRG, in compliance with applicable federal and state regulations, including the Texas Administrative Code (TAC) and WFSMRG data protection standards.

This policy applies to all WFSMRG employees, contractors, volunteers, and third-party users who access or operate AI tools on WFSMRG-owned or managed devices, networks, and applications. It covers AI tools for content generation, data analysis, decision support, chatbots, and any other AI-driven services.

Definitions

- **Artificial Intelligence (AI) Tool:** Software or service that uses machine learning, natural language processing, or other AI/ML techniques to generate content, automate tasks, or provide analytic insights.
- **WFSMRG Data:** Any information collected, generated, or processed in the course of WFSMRG operations, including Personally Identifiable Information (PII), Workforce Innovation and Opportunity Act (WIOA) participant data, financial records, and operational metrics.
- **Sensitive Data:** PII (e.g., Social Security numbers, financial account data), participant outcomes, business-sensitive data, and any data governed by TAC Title 1, Chapter 202 or TAC Title 40, Part 20.

Authorized Use

Permitted AI Use Cases:

- **Administrative Efficiency:** Generating routine communications (e.g., emails, meeting summaries) after manual review.
- **Data Analysis & Reporting:** Using AI analytics tools for workforce data trends, service utilization summaries, and performance dashboards, provided raw data is

de-identified or aggregated.

- **Research & Training:** Accessing AI chatbots for general policy research, best practices, and staff training modules, ensuring no confidential WFSMRG data is uploaded.
- **Accessibility & Inclusion:** Employing AI tools for document summarization, language translation, and accessibility enhancements (e.g., alt-text generation for images) on public-facing materials.

Approval Requirements:

- Any new AI tool or service must be reviewed and approved by the IT Department and CIO before deployment.
- A risk assessment must be conducted to evaluate data handling, privacy, and security controls.
- Procurement must include contractual safeguards, including data ownership, confidentiality, and breach notification clauses.

Prohibited Use

No Upload of Sensitive Data:

- Under no circumstances shall employees upload unredacted PII, WIOA participant records, or other Sensitive Data into third-party AI platforms (e.g., public ChatGPT, image generation services) without explicit authorization and a signed Data Processing Addendum.

No Automated Decision-Making:

- AI tools must not be used to make automated eligibility or case decisions for workforce participants without human oversight and documented rationale consistent with WIOA and nondiscrimination laws.

No Confidential Material Disclosure:

- AI platforms may not be used to draft or process internal memoranda, legal opinions, or sensitive Human Resources content unless the AI system is hosted on a WFSMRG-approved private infrastructure.

Policy Compliance and Enforcement

- Violations may result in disciplinary action up to termination, contract termination, or legal action.

Exceptions

Any exceptions to this policy must be approved by the Executive Director and Information Security Officer.

4. Approval and Revision History

Approval Date	Version	Author(s)	Description
		Bobby Castillo (Information Technology Director)	Annual Update

5. Executive Approvals

Name	Role	Signature	Date

Workforce Solutions Middle Rio Grande Board

Executive Committee

June 11, 2026

Information Item

Update on Board Members Nominations and TWC Approvals

PURPOSE

To update the Board on the appointed WFSMRGB members and vacancies, submitted as of May 28, 2026.

DISCUSSION

Vacancies:

Val Verde County

- 3 Private Sector vacancies

Dimmit County

- 1 Private Sector vacancy (currently being processed)

Maverick County

- 1 Private Sector vacancy

WFSMRG Board Liaison will continue to work with each CEO to assure all vacancies are filled as nominated or re-appointed by the CEO's.

Recommendation – none

5/28/2026

Workforce Solutions Middle Rio Grande

LAST	FIRST	Category	Company	Industry	Gender	Race	Hisp	Expires	Vacant	O.O.C.	Vet
	VAC Hiller, Chr	prv sector	A.E. Hiller & Sons, Inc.	Construction	M	White	Yes	06/30/28	04/14/26	07/13/26	No
	VAC Burkhart,	econ devel	City of Del Rio Economic	Public Administrat	F	White	No	06/30/28	04/02/26	07/01/26	No
Aranda	Romelia D.	prv sector	Aranda Real Estate LLC	Real Estate, Rent	F	White	Yes	06/30/26			No
Castle	Aracely	pub assist	Texas Health and Huma	Public Administrat	M	White	Yes	06/30/27			No
Collins	Shelly	prv sector	Leakey Mercantile	Retail Trade	F	White	No	06/30/27			No
Diaz	Sergio	prv sector	SEL Realty	Real Estate, Rent	M	White	Yes	06/30/27			No
Flores Jr.	Ernest	CBO	TX Organization of Rural	Health Care, Soci	M	White	Yes	06/30/28			No
Garcia	Myrta	CBO	South Texas Rural Healt	Health Care, Soci	F	White	Yes	06/30/28			No
Garza Velazqu	Dora Alicia	CBO	Eagle Pass Rotary Club	Other Services	F	White	Yes	06/30/27			No
Glasscock	James	CBO	Rocksprings Edwards V	Public Administrat	M	White	No	06/30/26			Yes
Gonzales	Arturo	CBO	Crystal City Lions Club	Other Services	M	White	Yes	06/30/26			No
Gonzales	Monica	rehab	TWC Voc Rehab Service	Public Administrat	F	White	Yes	06/30/26			No
Grooms	Michael D.	prv sector	Grooms Ready Mix LLC	Transportation, W	M	White	No	06/30/26			No
Hayman	Melissa	pub emplo	Texas Workforce Commi	Public Administrat	F	White	Yes	06/30/28			No
Jaime	Rodrigo	prv sector	IGO Trojan House	Retail Trade	M	White	Yes	06/30/27			No
Johnson	Dana	prv sector	Rio Grande Electric Co	Utilities	F	Ind/Alasl	No	06/30/27			No
Lopez	Laura	prv sector	Lopez Health Systems, I	Health Care, Soci	F	White	Yes	06/30/28			No
Martin	Larry B.	prv sector	International Bank of Co	Finance, Insuranc	M	White	Yes	06/30/27			No
Martinez	Juan	prv sector	Town House Restaurant	Accomodation, Fo	M	White	Yes	06/30/26			No
Martinez Jr.	Jesse	prv sector	J&J Excavating & Materi	Construction	M	White	Yes	06/30/28			No
Mata	Margot	ABE	Southwest Texas Junior	Educational Servi	F	White	Yes	06/30/26			No
Ramon	Yolanda	education	Eagle Pass ISD	Educational Servi	F	White	Yes	06/30/28			No
Rivas	Sara	literacy	Kinney County Public Lib	Educational Servi	F	White	Yes	06/30/28			No
Rizo	Jesse	labor	Communication Workers	Other Services	M	White	Yes	06/30/27			No
Rojas Guillot	Leslie	prv sector	Tejanita Seguros LLC	Finance, Insuranc	F	White	Yes	06/30/28			No
Sansom, Jr.	W.B.	prv sector	Sansom Ranch	Agriculture	M	White	No	06/30/28			No
Seidel	Sandra	prv sector	La Salle Western Wear	Retail Trade	F	White	No	06/30/26			No
Seiple	Lydia	CBO	Dimmit Wellness Coalitio	Other Services	F	Black	No	06/30/27			No
Sendejo	Frailan	prv sector	Crystal City Ballroom	Accomodation, Fo	M	White	Yes	06/30/29			No
Smith	Cody	prv sector	First State Bank of Uvald	Finance, Insuranc	F	White	No	06/30/28			No
Suarez	Jesus R.	education	Southwest Texas Junior	Educational Servi	M	White	Yes	06/30/28			No
Vazquez	Juan Carlos	prv sector	Del Rio Towing and Wre	Transportation, W	M	White	Yes	06/30/28			No
Villalpando	Elsa	CCW	Villalpando Enterprises/	Health Care, Soci	F	White	Yes	06/30/28			No

Current Members 33

Operating Size: 27 - 47

Term: 3

BOARD:

Female	Hispanic	Black	Priv Sect:	Vet Reps	CBO/Lab:
17	24	1	17	1	7
52%	73%	3%	51.5%		21.2%

WDA:

44% 83% 0%

Priv Sect: 17 Education: 2 Labor: 1 Rehab: 1 CBO: 6 Econ Dev: 1 Pub Employ: 1 Pub Asst: 1 Lit: 1 ABE: 1 CCW: 1

Thursday, May 28, 2026

lutions Middle Rio Grande - Page 1 of 1 Pages

Workforce Solutions Middle Rio Grande

Exit Conference Report

Project #26.27.0001

To: Board's Staff, Other Representatives, & TWC Monitoring Team
From: Lanette McHazlett Sanchez, Project Manager
Date: April 15, 2026
Time: 9:00 am
RE: Exit Conference Report with the Workforce Solutions Middle Rio Grande

I. Introductions & Sign-In:

Please enter your name, title, and department in Teams "Chat Box" section. Please distinguish between Board or subrecipient.

II. Scope

The scope of this review encompassed the program year beginning February 1, 2025, through January 31, 2026.

III. Issues and Documentation

Disbursements

The following errors may result in questioned costs:

In ten (10) transactions reviewed, the Board did not ensure costs were reasonable, necessary and allowable.

In eleven (11) transaction reviewed, sufficient support documentation was not maintained.

In six (6) transactions reviewed, the fiscal agent did not properly classify and record the expense.

In four (4) transactions reviewed, costs were incorrectly allocated.

In two (2) transactions reviewed, micro purchases were not adequately documented.

In one (1) small purchase procurement tested, supplies were purchased based on an expired cooperative agreement. The Board has expended \$29,207.22 from January 2025 – July 2025 using the expired contract.

The Subrecipient, who is also the Board fiscal agent, provided a one-time incentive to it's employees one month after the Executive Board placed the subrecipient on probation for lack of performance. The Board was unaware that funds were drawn by the fiscal agent/subrecipient, in order to pay for the incentives. Furthermore, the Subrecipient used grant funds outside the respective budget year due to not having enough funds to cover the cost. Given the Board's structure of the fiscal agent also being the subrecipient, this is a significant concern.

It was noted that in all travel reimbursement forms with meals, Board and subrecipient staff are entering the maximum reimbursement per-diem amount for every meal.

It is also noted that the Board policy for providing meals at Board meetings, as written, is insufficient to justify the costs of meals to attendees.

Cash Management

The Board has 15 stale checks dating back to 2023, totaling \$23,944.41. While there was a procedure to address voiding of outstanding checks, local policy and procedures do not further address how to handle stale/outstanding checks.

Workforce Solutions Middle Rio Grande Exit Conference Report Project #26.27.0001

Procurement

The Workforce Service Provider procurement conducted in 2024 awarded the contract to the lowest scored proposal without adequate justification. Additionally, there was no documentation of the required ABA checklist, or a conflict of interest form for one evaluator.

Single Audit

The Board policy does not address how issues identified in the subrecipient Single Audit desk review will be addressed by the Board, or when a Management Decision should be issued.

Property

The Board did not submit Form 7200 Notification of Property Acquisition within 30 days of the final acquisition as required for 2 items. The forms were submitted up to 22 days late.

Automation

In three of 10 (30%) users tested, a current signed P-41 was not provided.

Reemployment Services and Eligibility Assessment (RESEA) Program

In three of 11 (27%) applicable files reviewed, the WF-42 was not completed and uploaded to the customer profile and emailed to the UI liaison for any potential UI eligibility issues.

In seven of 25 (28%) applicable files reviewed, the initial appointment was scheduled sooner than seven days from when the claimant was added to the outreach pool.

Personally Identifiable Information

The Board did not follow its record retention policy for disposing of records. During the Personally Identifiable Information (PII) walkthrough at the Eagle Pass Workforce Center, TWC monitor observed multiple file boxes containing client files ranging from 2016 to 2022. The files exceed the retention schedule by one to seven years.

Agency Board Agreement (ABA) Policy and Procedure Uploads

As required by the ABA, and detailed in FDCM Letter 02-2023, Board, subrecipient, and fiscal agent policies and procedures must be uploaded to the designated SharePoint folder. The following policies/procedures, including all applicable attachments, were not uploaded prior to the review:

- Audit Requirements Policy Letter, ID NO FISCAL90

The following are prior year findings that are currently in Audit Resolution:

Ensure Compliance of Priority of Service Regulations – Unresolved

Prior Year: Ensure Choices Sanctions are Requested within the Required Time Frame – Unresolved

Prior Year: Ensure SNAP E&T Program Requirements are Followed – Unresolved

Prior Year: Ensure Sanctions are Requested Within the Required Time Frame – Unresolved

Issues and potential questioned costs identified in this report may require additional research regarding the status as findings and the final amount of costs. Therefore, we will continue communications with Board staff, as necessary, after the exit. If circumstances warrant, an issue may be removed from this review and addressed in a subsequent special review. Findings from previous reports that are still in process with TWC Audit Resolution may be included in this year's report as a prior year issue.

IV. Reporting Process:

Workforce Solutions Middle Rio Grande Exit Conference Report Project #26.27.0001

You will receive a report of our findings, if any, upon completion of our fieldwork. The Executive Director will be provided a courtesy copy of the final report five days prior to its dissemination. The five day embargo period allows the Board to provide a response to each individual finding. The Board's response will be included in the final report. If no response is received, SRM will state that no response was received in the report. (FDCM Letter 05-2024). If the review results in no issues identified, a management letter will be issued, and the review closed. (40 T.A.C. 802.65(a))

V. Resolution Process:

After issuance of the monitoring report, TWC Audit Resolution will issue you an Initial Resolution Notification regarding administrative findings and questioned costs noted in the report. The monitored entity will have 45 calendar days from the issuance of the Initial Resolution Notification to respond. (40 T.A.C. 802.65(b)(1) and (2)).

Administrative Findings: If administrative findings are resolved based on the responses to the Initial Resolution Notification, a monitoring closure letter is issued. (40 T.A.C. 802.65(b)(1)(A)). Unresolved administrative findings remain open; TWC's Audit Resolution Department will continue to work with the monitored entity until the next scheduled review to ensure follow-up. ((40 T.A.C. 802.65(b)(1)(B)))

Questioned Costs: If questioned costs are resolved based on the responses to the Initial Resolution Notification, a monitoring closure letter is issued. (40 T.A.C. 802.65(b)(2)(A)). Unresolved questioned costs will result in the issuance of an Initial Determination. (40 T.A.C. 802.65(b)(2)(B)).

VI. Special Requests:

Special requests for or any of the following areas can be facilitated by the Subrecipient Monitoring Department or in conjunction with other departments.

A. Monitoring Technical Assistance – For monitoring tools, procedures and training: informal or formal.

Contact person is: Alma I. Gonzalez, Training Coordinator/Monitoring TA

Telephone: (512) 755-5546 (C);

Email or Microsoft Teams: alma.gonzalez2@twc.texas.gov

B. Fiscal Technical Assistance – For answers to financial questions, you may email TWC fiscal technical assistance workgroup at Fiscal.ta@twc.texas.gov

C. Program Technical Assistance Requests:

Applicable Grant Manager:

Janice Henschen Janice.Henschen@twc.texas.gov

Workforce Policy & Program Assistance:

Email wfpolicy.clarifications@twc.texas.gov

VII. Customer Service

The Subrecipient Monitoring Department strives to continually improve our processes and procedures. As such, a *Customer Satisfaction Survey* will be provided to the Executive Director. We would greatly appreciate your time in completing the survey and returning it to:

Mary Millan

Deputy Director

Fraud Deterrence and Compliance Monitoring Division

**Workforce Solutions Middle Rio Grande
Exit Conference Report
Project #26.27.0001**

Email: mary.millan@twc.texas.gov

VIII. Closing Remarks & Questions

IX. Acknowledgement

The purpose of the exit conference report is to provide monitored entities, upon completion of the on-site review, a written record of potential issues and questioned costs which could be included in the monitoring report. It also documents one of our primary goals; assurance that entities we monitor are provided daily feedback, verbally and/or in writing as requested by the entity, throughout the duration of the on-site review.

Signatures below acknowledge that the TWC team gave frequent verbal and written updates on the status of the monitoring visit. It also acknowledges that the Board understands that the issues identified may be written as findings in the TWC Monitoring Report. ***The signature below does not acknowledge agreement or disagreement with the issues noted, merely that the issues and potential questioned costs were communicated during the course of the review.***

Executive Director or Designee

Date

Lanette McHazzlett Sanchez

4/15/2026

TWC SRM Project Manager

Date

4/15/2026

Jason Stalinsky
Director, Division of Fraud Deterrence and Compliance Monitoring
Texas Workforce Commission

Date



WORKFORCE SOLUTIONS MIDDLE RIO GRANDE BOARD

October 1, 2025 - September 30, 2026

Fiscal Year 2025-26

SUMMARY STATEMENT OF EXPENDITURES

COST CATEGORIES	2025-26 Budget	April Expenses	Cumulative Expenses	Balance	VAR
PERSONNEL	734,031	62,110	428,799	305,232	58%
FRINGE BENEFITS	263,414	20,100	139,666	123,748	53%
INCENTIVE ADJUSTMENTS	25,781	0	0	25,781	0%
ACCOUNTING & AUDITING	37,700	9,300	9,300	28,400	25%
PROF. FEES/CONTRACTUAL	40,600	0	26,082	14,519	64%
BOARD TRAVEL - I / R	5,200	0	2,330	2,870	45%
BOARD TRAVEL - O / R	2,200	0	920	1,280	42%
TRAVEL - I / R	42,800	2,078	20,307	22,494	47%
TRAVEL - O / R	50,000	0	20,976	29,024	42%
SPACE - BOARD	65,000	4,449	31,142	33,858	48%
SPACE - COLOCATION	400,000	32,617	225,111	174,889	56%
UTILITIES	14,000	568	5,025	8,975	36%
SUPPLIES/MATERIALS	70,000	871	31,350	38,650	45%
EQUIPMENT PURCHASES	10,551	0	0	10,551	0%
EQUIPMENT / LEASE / MAINT.	72,000	2,913	29,523	42,477	41%
PRINTING / ADVERTISING	4,000	0	2,058	1,942	51%
INSURANCE / BONDING	3,000	0	0	3,000	0%
POSTAGE	1,500	0	0	1,500	0%
SUBSCRIPTION / DUES	70,000	410	52,558	17,442	75%
COMMUNICATIONS	20,000	1,196	9,109	10,891	46%
FISCAL ENTITY FEE	125,000	10,485	86,659	38,341	69%
TRAVEL ALLOWANCE	12,000	1,200	7,200	4,800	60%
STAFF TRAINING	2,500	0	0	2,500	0%
NETWORK UPGRADES	45,000	0	0	45,000	0%
Moving Services	1,000	0	0	1,000	0%
SUBTOTAL	2,117,277	148,297	1,128,116	989,161	53%
Childcare Quality Supplies/Materials	679,041	10,798	296,747	382,294	44%
GRAND TOTAL	2,796,318	159,095	1,424,862	2,796,318	51%
Percentage of Fiscal Year 2025-26					58%

MIDDLE RIO GRANDE DEVELOPMENT COUNCIL

October 1, 2025 - September 30, 2026
Fiscal Year 2025-26

WORKFORCE PROGRAMS DIVISION STATEMENT OF EXPENDITURES

COST CATEGORIES	2025-2026 Budget	April Expenses	Cumulative Expenses	Balance	VAR
PERSONNEL	1,740,268	146,700	949,946	790,322	55%
FRINGE BENEFITS 42.87%/46.28%	744,487	55,559	377,801	366,686	51%
ACCOUNTING & AUDITING	29,802	11,119	11,119	18,683	37%
PROF. FEES/CONTRACTUAL	25,475	2,303	13,843	11,633	54%
TRAVEL - I / R	55,184	4,086	16,599	38,585	30%
TRAVEL - O / R	18,112	0	9,079	9,033	50%
SPACE	51,547	3,528	28,147	23,400	55%
UTILITIES	66,437	7,085	36,910	29,527	56%
SUPPLIES	56,226	2,281	38,670	17,556	69%
EQUIPMENT PURCHASES	0	0	0	0	0%
EQUIPMENT / LEASE / MAINT.	41,621	5,095	33,408	8,213	80%
PRINTING / ADVERTISING	9,463	0	0	9,463	0%
INSURANCE / BONDING	18,119	0	16,539	1,580	91%
POSTAGE	15,000	507	4,678	10,322	31%
SUBSCRIPTION / DUES	8,000	50	1,748	6,252	22%
COMMUNICATIONS	75,052	5,942	47,897	27,155	64%
STAFF TRAINING	5,000	0	0	5,000	0%
FISCAL ENTITY FEE	264,472	15,183	190,775	73,697	72%
NETWORK UPGRADES	17,610	112	727	16,883	4%
SUBTOTAL	3,241,875	259,549	1,777,883	1,463,992	55%
INDIRECT 10.0000%/9.1836%	248,475	16,355	127,926	120,549	51%
GRAND TOTAL	3,490,350	275,904	1,905,809	1,584,541	55%
			Percentage of Fiscal Year 2025-26		58%
NON-OPERATIONAL/PASSTHRU	11,584,281	1,067,360	6,043,973	5,540,308	52%

Workforce Solutions Middle Rio Grande Board

Finance and Audit

June 11, 2026

Action Item

Financial & Data Analyst Monitoring and Oversight

PURPOSE

Provide the Board with Monitoring and Oversight of the Fiscal Entity.

DISCUSSION

Disbursements

Date of Scope: February 2026 – March 2026

Same Size: 86 files

Error Rate: 1%

Review the MRGDC Workforce, Child Care, and MRGDC pool funds. 4 disbursements that were allocated to the 8700 pool were not approved by the Board, and one employee was charged to one grant to attend the COG board meeting. One requisition was made before a grant closed and was to be charged to the closing grant but was not paid out until 5 months after the requisition was sent up and approved.

Staff Payroll

Date of Scope: February 2026 – March 2026

Sample Size: 9 staff payrolls

Error Rate: 1%

Reviewed the MRGDC staff payrolls, including W-4s, I-9s, timesheets, PAFs, and MIP distribution reports. One employee's file did not have the correct W-4. The one on file was for 2024. W-4's should be signed by all employees once a year.

Procurement

No Formal Procurement for the months sampled by MRGDC or WFB

Client Payroll

Date of Scope: February 2026 – March 2026

Sample Size: 10 client payrolls

Error Rate: 2%

Reviewed client payroll, including Limited Internship and Work Experience. One client's payroll was not completed the client did not have the Work Experience and Workstation Information.

Gas Card Inventory

Gas cards were physically counted in the Fiscal Office in Carrizo and were inventoried with the Fiscal Officer. Each card is under lock in its filing cabinet. A balance sheet was provided.

The Gas cards in the Val Verde Center were also sampled. All 30 Cards and the balance sheet were accounted for during the visit.

Allocations

Date of Scope: February 2026 – March 2026

Sample Size: 3 Allocations

Error Rate: 0%

Reviewed Central Services, WF Program Pool, WF Admin Pool for MRGDC and Workforce Board. Files, including pre-allocation statements of revenues and expenditures, the Allocation Module, and Allocation reports, were complete. The allocations were tested against the cash disbursements of the two months of the sample.

Physical Inventory

Select one staff member who was sampled in Fiscal. Kristian Montoya's inventory asset form was from 9/26/24. No inventory was made for Ms. Montoya last year. I found 3 assets that were purchased this fiscal year that are not inventoried. The Property Management Chg1 policy states that tagging supports WFSMRG's property control system. The Asset Inventory Form that was provided is not a computer-generated inventory system, as the policy requires. Also, the employee must sign within 30 days of the annual inventory for each year, which must be kept on file.

When the board monitor requests the physical inventory of an employee, the fiscal staff should provide the most up-to-date system-generated asset form, not the most recent

Physical inventory done by the fiscal department. This does not show any new assets/tagged to the individual employee.

BOARD RECOMMENDATION

To Approve Financial & Data Analyst Monitoring of the Fiscal Entity.



WORKFORCE SOLUTIONS MIDDLE RIO GRANDE

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POLICY LETTER

ID NO: FISCAL09 Chg. 1

DATE ISSUED: June 11, 2026

TO: Workforce Solutions Middle Rio Grande Contractors

FROM: Rosie Lozano, Executive Director

SUBJECT: Audit Requirements

PURPOSE: The purpose of WFSMRG Audit Requirement policy is to provide information on the audit requirements that apply to WFSMRG as a contractor to various funding sources. The processes outlined in this policy will be used by WFSMRG to develop systems to ensure that this agency complies with the audit requirements of OMB Circular A-133

REFERENCES:

OMB Circular A-133; TWC Financial Management – Grants and Contracts
DOL Financial Management Manual; Uniform Grant Management Standards (UGMS)
Government Auditing Standards, 2011 Revision; 2 CFR 200.501; 2 CFR 200.512

POLICY:

A. Audit Standards WFSMRG will require all independent auditors to ensure conformance with the auditing standards contained in the "Government Auditing Standards" (Yellow Book), 2011 Revision, published by the Comptroller General of the United States.

B. Uniform Audit Requirements

1. Amended Single Audit Act

The Single Audit Act Amendments of 1996 (P.L. 104-156) provide uniform audit requirements that apply to WFSMRG as a non-federal

entity that receives federal financial assistance and federal awards. For purposes of an audit conducted for WFSMRG, a non-federal entity is defined as any state, local government or non-profit organization administering or passing through federal financial assistance funds.

The 1996 Amendments have established a new threshold for single audits. For Fiscal Years beginning on or after July 1, 1996, any non-federal entity, as defined above, that expends \$750,000 or more in federal funds within its fiscal year is required to have a single audit. The \$750,000 threshold will be determined by WFSMRG as the aggregate of the annual expenditures from all federal funding sources.

2. Revised OMB Circular A-133

The Office of Management and Budget (OMB) have issued a revised OMB Circular A-133 that has combined states, local governments, and non-profit organizations under one circular. The revised circular implemented the Single Audit Act Amendments of 1996 and applies to fiscal years beginning on or after July 1, 1996.

3. State of Texas Single Audit Circular

The State of Texas has issued the State of Texas Single Audit Circular under the Uniform Grant and Contract Management Standards (UGCMS) for local governments and organizations which are providers expending any state awards under federal block grants. The State of Texas Single Audit Circular closely mirrors the requirements of the OMB Circular A-133. Annotations have been added in the circular where state provisions differ from the federal circular. For fiscal years beginning on or after July 1, 1996, any non-state entities that expend \$750,000 or more in a year in state awards shall have a single or program specific audit conducted for that year in accordance with the provisions of this audit circular.

C. Frequency of Audits

WFSMRG audits shall be performed annually and must be submitted to its funding sources within the earlier of 30 calendar days after receipt of the auditor's report or nine months after the end of the audit period.

D. Selection of an Independent Auditor

WFSMRG will use a competitive bidding process to engage the independent auditor.

In the event that WFSMRG engages the same independent auditor to perform the required annual audits for more than five consecutive years WFSMRG will document the continuing independence of such auditor.

E. Audit Costs

Amendments of 1996, OMB Circular A-133 and the State of Texas Single Audit Circular are allowable costs to WFSMRG as long as the \$750,000 annual federal/state expenditure criteria is met. WFSMRG will charge the cost of an audit as a direct cost in accordance with 2 CFR 200, "Cost Principles for Government Organizations".

F. Reference Publications

Internal Policy of Audit Requirements and the following laws or publications will guide an independent auditor selected by WFSMRG:

1. The Single Audit Act Amendments of 1996 (P.L. 104-156).
2. 2 CFR 200.
3. American Institute of Certified Public Accountants (AICPA) Industry Audit Guide.
4. Government Auditing Standards (Yellow Book).
5. OMB Compliance Supplements; and
6. Uniform Grant and Contract Management Standards (UGCMS), Texas Government Code, Chapter 783
7. State of Texas Single Audit Circular

G. Audit Report Package

As a government agency, WFSMRG will submit a single audit to its' funding sources as an audit report package to include the following:

1. Financial Statements
 - a. Statement of Financial Position
 - b. Statement of Activities
 - c. Statement of Cash Flows
 - d. Notes to Financial Statements
2. Independent Auditor's Opinion Reports
 - a. Report on General Purpose or Basic Financial Statements
 - b. Report on Compliance
 - c. Report on Internal Controls
 - d. Report on Schedule of Expenditures of State and Federal Awards
3. Schedule of Expenditures of State and Federal Awards

- a. Program Year and Title
- b. Contract Period
- c. Catalog of Federal Domestic Assistance (CFDA) number
- d. Contract (grantor number)
- e. Contract Award Amount
- f. Cash/Accrued (or Deferred at the Beginning of Audit Period)
- g. State and Federal grants funds received
- h. Contract expenditures
- i. Cash/Accrued (or Deferred at the End of Audit Report)
- j. Total Federal Expenditures
- k. Matching Contributions
- l. Program Income
- m. Stand-In Costs
- n. Clusters of Program
- o. Notes which describe significant accounting policies
- p. Total State Expenditures

4. Schedule of Findings and Questioned Costs

- a. Program Title and Contract Number
- b. Detailed Description of the Finding
 - 1. Findings by Financial Statements and Federal - Criteria
 - 2. Statutory Regulatory Citation
- c. Questioned Costs
- d. Recommendations of Independent Auditors
- e. Management Response
- f. Summary of Auditor's Results

5. Schedule of Prior Audit Findings and Questioned Costs

6. Summary Schedule of Prior Year Audit Findings

7. Corrective Action Plan

- a. Name of Person Responsible
- b. Specific Plan
- c. Anticipated Completion Date
- d. Explanation with specific reasons if WFSMRG disagrees

8. Supplemental Statement of Revenues and Expenditures for funds for each contract under which funds are received.

- a. Federal of State Flow through Revenues
- b. Non-Federal matching Funds
- c. Expenditures by Cost Category
- d. Fund Balances

9. Management Letter with Management Responses

H. Audit Resolution and Tracking

1. Resolution Process for Audit Reports

According to FMGC Chapter 20 Single Audit, in the section Corrective Action and Management Decision, it states, While the auditee takes corrective action, the pass-through entity must conduct a desk review of the report and may request additional information or documentation. Upon completion of the desk review, a Management Decision must be issued.

- If the report results in a Finding, the Board must issue a Management Decision Letter and follow up with the subrecipient to ensure any required corrective action is completed.
- If an audit report does not result in a Finding, the Board must issue a Management Letter stating that it accepts the single audit.

Each funding source will conduct an audit resolution process to ensure resolution of findings and questioned costs contained in the audit report. The resolution process must be completed within 180 days from receipt of WFSMRG audit report.

If questioned costs are not resolved within the 180 time period the appropriate funding source will issue an initial determination letter allowing or disallowing questioned costs to WFSMRG.

The initial determination letter will provide for an informal resolution period not to exceed 30 days. WFSMRG will be given the opportunity to provide additional resolution documentation during the informal resolution period.

If the questioned costs are resolved within the 30-day informal resolution period, an acceptance letter will be issued, and the audit closed. If not resolved, a final determination will be issued disallowing the costs, establishing a debt, and requesting repayment of the disallowed costs from non-federal funds. The final determination may be appealed.

2. Tracking Process

The following process outlines the procedures to be followed to ensure timely receipt, review and resolution of WFSMRG annual audit reports.

- a. The Controller will use a tracking system to ensure that all audits are received within 180 days after the end of WFSMRG fiscal year.
- b. A delinquent letter from each funding source will be received if

- WFSMRG audit report is not received by the due date.
- c. If resolution is required, WFSMRG will receive an initial resolution letter from the appropriate funding source within 30 to 60 days after the receipt of the audit report. This letter may request additional information needed to resolve findings or questioned costs and request clarification or corrections to the audited financial statements or opinion reports.
 - d. WFSMRG will respond to the resolution request within 30 days from the date of the initial resolution letter.
 - e. WFSMRG will receive follow-up letter(s) if responses do not convey acceptable corrective actions. WFSMRG will respond aggressively to corrective action requests to resolve outstanding issues quickly and effectively.
 - f. WFSMRG will receive an acceptance letter if there are no findings or questioned costs impacting any administered programs and the if the audit meets the compliance requirements of the Single Audit Act Amendments of 1996, OMB Circular A-133, and/or the State of Texas Single Audit Circular.
 - g. An initial determination letter will be sent by each funding source only if there are outstanding resolution items that have not been resolved satisfactorily within the 180-day resolution time line. The determination letter will allow an additional 30 days for informal resolution. WFSMRG will resolve any outstanding resolution items prior to the 180-day resolution time line.
 - h. A final determination letter will be sent to WFSMRG only if all attempts to resolve remaining administrative findings and/or disallowed costs have been unsuccessful. WFSMRG may appeal a Final Determination.
 - i. WFSMRG may receive appropriate sanctions if it is determined that evidence exists that federal or state funds have not been properly accounted for and/or used for allowable activities, or for failure to submit audits in a timely manner.

I. Retention of Auditor Work Papers and Reports

WFSMRG procured auditor will retain all work papers and reports for a minimum of three (3) years from the date of the audit report or until all audit issues are resolved, whichever is later. The audit work papers shall be made available upon request to each funding source, the Texas Workforce Commission, the U. S. Department of Labor, and the General Accounting Office.

J. Debt Collection Procedures

WFSMRG will respond to a demand for payment if a final determination letter establishes a debt for disallowed costs with expediency and in accordance with the applicable funding sources policies and procedures.

K. Collection of Debt

Methods of Collection/Repayment When a debt is established, WFSMRG will use the following debt payment methods:

1. Cash

Cash will be the preferred method of repayment. Settlement of debt on a non-cash basis will be subject to approval by each funding source. Cash repayment must be made where fraud, misapplication of funds, gross mismanagement, employee/participant misconduct, and program abuse has been established.

2. Withholding

The applicable funding source may elect to use this repayment method. Withholding involves withholding amounts owed WFSMRG for the services or the considerations already provided in satisfaction of the debt owed.

3. Stand-In Costs

WFSMRG acknowledges that this method is not actually a debt repayment but allows for the substitution of allowable Stand-in costs for disallowed costs. It is generally available as a resolution method for U.S. Department of Labor programs. The debtor must identify allowable costs associated with the contract, but not charged to the contract, and substitute those costs for the disallowed costs. This method will require negotiation and agreement with the appropriate funding source. The WIA Regulations at 20 CFR 627.480(f) provides detailed guidance on the criteria and use of stand-in costs as they relate to the WIA program.

EFFECTIVE DATE:

~~April 13~~ June 11, 2026

RECISSIONS:

~~None~~ FISCAL09

INQUIRIES:

If you have any questions regarding this policy, please contact marcos.gonzales@wfsmrg.org or 830-486-7501



WORKFORCE SOLUTIONS MIDDLE RIO GRANDE

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POLICY LETTER

ID NO: FISC001 Chg. 1

DATE ISSUED: June 11, 2026

TO: ~~Middle Rio Grande Development Council—Fiscal Agent~~
Workforce Solutions Middle Rio Grande Contractor

FROM: ~~Elizabeth Sifuentes Rosie Lozano, Executive Director~~

SUBJECT: Workforce Solutions MRG Board Fiscal Control Policy and Procedures

PURPOSE:

The purpose of this policy is to ensure that the Workforce Board has compensating controls in place to oversee its fiscal agent currently designated by the Middle Rio Grande Workforce Development Board and the Chief Elected Officials' Partnership Agreement, amended July 2, 2001, and as defined in the Memorandum of Understanding issued to the Middle Rio Grande Development Council on October 16, 1998, or as may be amended.

REFERENCES:

Texas Workforce Commission, Financial Manual for Grants and Contracts, August 31, 2020 (FMGC); WFSMRGB and CEO Partnership Agreement, amended July 2, 2001; WFSMRGB, CEO, and MRGDC Memorandum of Understanding, October 16, 1998; ~~MRGDC Accounting Policies and Procedures; MRGDC Personnel Policy and Procedures~~; WFSMRG Personnel Policy and Procedures; WFSMRG Approved Cost Allocation and Indirect Plan

POLICY:

The Workforce Solutions Middle Rio Grande Board will oversee and monitor all purchase authorization requests for each fund received by the Fiscal Agent/MRGDC to ensure that all expenditures resulting from a purchase order are adequately supported and accurately reported.

The Board through ~~designated Board staff its Board Accountant~~ will select and review all other expenditures on a random sample basis which are not included

in the purchase order system such as payroll, fringe benefits, utilities and other line items budgeted to assure that expenditures are charged according to the approved cost allocation plan and that they meet the cost reasonableness test and are of benefit to the grant charged. Procurement procedures will also be randomly tested for small, micro and large purchases as per the Financial Management

All cash draws made by the designated Fiscal Agent will be supported by general ledger details that are congruent with the CEDER budget, expenditures reported, and available cash draws before they are certified by the Board program staff and/or as appropriate by the Board Executive Director.

The Board will:

- approve subrecipient expenditures at any stage of the process;
- verify and ensure the reports in CEDER are correct;
- reconcile the subrecipient's expenditures to the cash draws from each grant;
- identify discrepancies in cash draws or expenditures reported; and
- directly intervene when discrepancies are found in cash draws or expenditures

PROCEDURES:

1. The designated Board staff will approve 100% of all subrecipient expenditures by being the last signature on the approval tree in Microix until such time as there is assurance that expenditures are allocated to the benefit of each fund charged or obligated with appropriate worksheets documenting cost allocation justification as allowed in the approved Cost Allocation Plan and approved indirect rate. In situations that a requisition will also include non-workforce funds, the Boards Executive Director approval will also be needed.
2. Designated Board staff will have 24 hours from the time the request is received from Controller to approve the request for drawdowns. It will be the responsibility of the Controller to ensure that request with all the proper documentation is sent in a timely manner to allow the Board the opportunity to review and approve/deny the request.
3. Any proposed expenditure unit acquisition cost (UAC) over \$5,000 requires prior approval by the Boards Executive Director. The designated Board staff ~~Senior Contract Manager/Deputy Director~~ will approve all workforce fund requisitions, and the Board Child Care Services Director will approve all child care requisitions for any purchase amount. No

goods or services can be ordered before a purchase order is issued and approved by the Controller.

4. A ~~designated~~ Board ~~staff Accountant~~ will pull detailed reports that account for what is reported in CDER as expensed in each cost category. Accounting source documents will be used to support the expenditures before they are certified by the ~~designated~~ Board ~~staff Board-Program Administrator(s)~~/Executive Director and reported in CDER by the Controller.
5. Each ~~designated Board staff Program Administrator~~ listed in Procedure 3 will reconcile the subrecipient's expenditures to cash draws for each grant. All cash draws will be reviewed by the Executive Director on a monthly basis through the financial expenditure reports assuring oversight and supervision of the Board Administrator(s) and the ~~designated~~ Board ~~staff Board-Accountant~~. All source documents from the purchase orders and allocated cost will be maintained at the Controller's records subject to quarterly monitoring and oversight by the Board Accountant.
6. Once a month during the Contractor's and Fiscal Agent review of Monthly Financial Statements a review of each fund will be conducted by the Executive Management Team (Controller, Executive Director(s) for WFSMRGB and MRGDC, WFSMRGB Program Managers (Workforce Program and Child Care) and WFSMRG Fiscal Monitor) to verify that all cash draws are exactly as expended and drawn in CDER. ~~The monthly Financial Statement must be provided to the Board within 24 hours of the time the meeting is scheduled. Ample time is needed for the Board staff to review report. Meetings will be scheduled for the 17th of each month (can be modified).~~
7. Upon any discrepancy or variance from expenditures and cash draws, the Board Executive Director will notify the Controller of said discrepancy for immediate correction with follow-up email correspondence of any required corrective action not to exceed five (5) work days.

EFFECTIVE DATE:

~~Immediately~~ June 11, 2026

RECISSIONS:

~~N/A-FISCAL01~~

INQUIRIES: If you have any questions about this policy contact betty.sifuentesmarcos.gonzales@wfsmrg.org.

TEXAS WORKFORCE COMMISSION (TWC)
GRANT AWARD AGREEMENT
AMENDMENT NUMBER 001

TWC Contract Number	2726REA001
ABA Contract Number	2725ABA001
Grant Program Title	REEMPLOYMENT SERVICES AND ELIGIBILITY ASSESSMENT
Grantee's Information	
Workforce Solutions Middle Rio Grande Board	
Remarks	
This Grant Award Amendment is contingent on the Board's and its Fiscal Agent's (if applicable) acceptance of and compliance with the terms and conditions of this Notice of Grant Award Amendment and any referenced attachments.	
Amendment Detail	
Effective Date	
This Grant Award Amendment shall be effective on April 25, 2026 , or on the date the Grant Award Amendment is signed by all Parties, whichever occurs last.	
Grant Period	
The Grant Period is amended as follows: Current End Date: Amended End Date: If blank, there are no changes to this section.	
Terms and Conditions	
The Terms and Conditions are amended as follows: 1. Revised Special Federal Award Terms and Conditions Unemployment Insurance Reemployment Services and Eligibility Assessment Grants, attached. If blank, there are no changes to this section.	
Attachment A: Statement of Work - Project Requirements	
Attachment A: Statement of Work - Project Requirements are amended as follows: If blank, there are no changes to this section.	

Attachment B: Statement of Work - Financial Requirements

Attachment B: Statement of Work - Financial Requirements are amended as follows:

If blank, there are no changes to this section.

Grant Award Amount

Grant Award Amount amended as follows:

1. Increase the Grant Award amount by \$82,500.00.
2. Approved by the Commission on March 24, 2026.

If blank, there are no changes to this section.

Total Amended Grant Award Amount: \$290,036.00

Attachment D: Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards

Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards amended as follows:

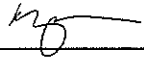
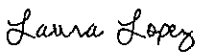
1. Revised Attachment D, attached.

If blank, there are no changes to this section.

Changes to Other than the Listed Amendment Details Categories

Other:

If blank, there are no changes to this section.

Signature Authority	
The person signing this Grant Award Amendment on behalf of the Agency, the Board, and the Board's Fiscal Agent (if applicable) hereby warrants that he or she has been fully authorized to: • execute this Grant Award Amendment on behalf of TWC or Board's organization, and • validly and legally bind the organization to all the terms, performances, and provisions of this Grant Award Amendment.	
Amendment Approval	Texas Workforce Commission  Mary H York Division Director, Workforce Development Date: <u>05/07/2026</u>
Award Acceptance	Workforce Solutions Middle Rio Grande Board  Laura Lopez Board Chair Date: <u>05/07/2026</u> Fiscal Agent: Middle Rio Grande Development Council  Michelle Garcia Executive Director Date: <u>05/07/2026</u>

**Workforce Solution Middle Rio Grand Board
Revenue vs Expenditures as April 2026**

			WFB	MRGDC	Target	% of Progress
WIOA - Adult 07/01/24-06/30/26	Budget	\$878,332	\$ 87,833	\$ 790,499	92%	99%
	Expenses		\$ 82,168	\$ 790,499		
	Balance		\$ 5,665	\$ -		
WIOA - Adult 07/01/25-06/30/27	Budget	\$758,215	\$ 75,822	\$ 682,392	42%	66%
	Expenses		\$ -	\$ 498,397		
	Balance		\$ 75,822	\$ 183,995		
WIOA - Dislocated 07/01/24-06/30/26	Budget	\$486,423	\$ 48,642	\$ 437,781	92%	99%
	Expenses		\$ 47,826	\$ 437,781		
	Balance		\$ 816	\$ -		
WIOA - Dislocated 07/01/25-06/30/27	Budget	\$410,173	\$ 41,017	\$ 369,156	42%	84%
	Expenses		\$ 20,962	\$ 324,478		
	Balance		\$ 20,055	\$ 44,678		
WIOA - Youth 07/01/24-06/30/26	Budget	\$943,981	\$ 94,398	\$ 849,583	92%	98%
	Expenses		\$ 80,029	\$ 849,583		
	Balance		\$ 14,369	\$ -		
WIOA - Youth 07/01/25-06/30/27	Budget	\$809,191	\$ 80,919	\$ 728,272	42%	70%
	Expenses		\$ 4,491	\$ 563,257		
	Balance		\$ 76,428	\$ 165,015		
CCF-Childcare 08/31/25-12/31/25	Budget	\$10,542,994	\$ 563,568	\$ 9,979,426	100%	97%
	Expenses		\$ 563,568	\$ 9,804,459		
	Balance		\$ -	\$ 174,967		
CCF-Childcare 08/31/25-12/31/26	Budget	\$11,055,384	\$ 629,146	\$ 10,502,615	50%	46%
	Expenses		\$ 303,672	\$ 4,793,675		
	Balance		\$ 325,474	\$ 5,708,940		
CCM-Childcare Local Match 10/01/25-12/31/26	Budget	\$690,904	\$ -	\$ 690,904	20%	0%
	Expenses		\$ -	\$ -		
	Balance		\$ -	\$ 690,904		
CCP-Childcare PRS 09/01/24-12/31/25	Budget	\$363,986	\$ 18,199	\$ 345,787	100%	87%
	Expenses		\$ 12,107	\$ 305,848		
	Balance		\$ 6,092	\$ 39,939		
CCP-Childcare PRS 09/01/24-12/31/25	Budget	\$309,609	\$ 15,480	\$ 294,129	50%	69%
	Expenses		\$ 6,287	\$ 207,128		
	Balance		\$ 9,193	\$ 87,001		
CCQ-Childcare Quality 10/01/25-10/31/26	Budget	\$537,777	\$ 537,777	\$ -	54%	22%
	Expenses		\$ 117,243	\$ -		
	Balance		\$ 420,534	\$ -		

CCQF-Childcare Quality 10/01/25-10/31/26	Budget	\$298,850	\$ 298,850	\$ -	54%	6%
	Expenses		\$ 16,298	\$ -		
	Balance		\$ 282,552	\$ -		
RESEA-Reemploy SVS 10/01/25-09/30/26	Budget	\$207,536	\$ 29,004	\$ 261,032	58%	48%
	Expenses		\$ 6,419	\$ 132,182		
	Balance		\$ 22,585	\$ 128,850		
TRA- Traded Act Svs 10/01/25-9/30/26	Budget	\$0	\$ -	\$ -	25%	0%
	Expenses		\$ -	\$ -		
	Balance		\$ -	\$ -		
SNE-SNAP 10/01/25-09/30/26	Budget	\$135,684	\$ 13,568	\$ 122,116	58%	42%
	Expenses		\$ 8,178	\$ 47,730		
	Balance		\$ 5,390	\$ 74,386		
TAF- TANF Choices 08/31/24-10/31/25	Budget	\$783,754	\$ 193,375	\$ 590,379	54%	50%
	Expenses		\$ 150,061	\$ 240,874		
	Balance		\$ 43,314	\$ 349,505		
TVC - TX Vets Comm 10/01/25-09/30/26	Budget	\$13,000	\$ 1,500	\$ 13,500	58%	0%
	Expenses		\$ -	\$ 6,487		
	Balance		\$ 1,500	\$ 7,013		
WCI - WF Comm Initiat 10/01/25-09/30/26	Budget	\$41,044	\$ -	\$ 41,044	58%	36%
	Expenses		\$ -	\$ 14,797		
	Balance		\$ -	\$ 26,247		
WOO- Add'l Program 10/01/25-09/30/26	Budget	\$20,023	\$ 2,002	\$ 20,023	58%	12%
	Expenses		\$ -	\$ 2,346		
	Balance		\$ 2,002	\$ 17,677		
WPA-WP Empl Svs 10/01/25-12/31/26	Budget	\$7,994	\$ 855	\$ 7,698	46%	81%
	Expenses		\$ 799	\$ 6,129		
	Balance		\$ 56	\$ 1,569		
WIOA-Rapid Response 07/01/25-6/30/26	Budget	\$14,173		\$ 14,173	83%	13%
	Expenses			\$ 1,850		
	Balance		\$ -	\$ 12,323		
Student Hireability Nav 09/01/23-08/31/27	Budget	\$452,000	\$ 452,000	\$ -	65%	50%
	Expenses		\$ 226,219	\$ -		
	Balance		\$ 225,781	\$ -		
Infrastructure Support 09/01/25-10/31/26	Budget	\$132,727	\$ -	\$ 132,727	58%	31%
	Expenses		\$ -	\$ 40,597		
	Balance		\$ -	\$ 92,130		
SEAL-Summer & Learn Program	Budget	\$889,921		\$ 889,921	100%	34%
	Expenses		\$ -	\$ 303,303		
	Balance		\$ -	\$ 586,618		

BCY 26 Child care Performance Measure:

Performance – April 2026

Timeframe	# of Units	BCY26 Target	% Attainment	Status
YTD Average Kids Per Day (10/1/2025 – 0930/2026)	1331	1386	96.03%	Meeting

This information is from TX3C loaded on 05/11/2026. This is the most accurate and complete data available at the time data was obtained but, due to billing updates, it may not match data prior or subsequent requests.

Expenditures by County	Month: April - June
Dimmit	\$ 96,425.80
LaSalle	\$ 17,963.62
Maverick	\$1,025,002.83
Real	\$
Uvalde	\$ 288,124.18
Val Verde	\$ 868,952.20
Zavala	\$ 209,503.08
Edwards	\$
Kinney	\$

Programs by County	Providers	TRS
Dimmit	3	1
LaSalle	1	1
Maverick	15	10
Real	0	0
Uvalde	6	5
Val Verde	14	9
Zavala	4	3
Edwards	0	0
Kinney	0	0

Staff Retention Bonus Announcement:

To support staff retention and encourage continuous quality improvement, WFSMRG will provide staff retention bonuses to eligible early learning program staff based on their program's Texas Rising Star (TRS) certification level:

- **Two Star Programs:** \$250 per staff member
- **Three Star Program:** \$350 per staff member
- **Four Star Program:** \$400 per staff member

Bonus funds will be awarded to eligible early learning staff who have maintained employment with the same program for at least 12 consecutive months. This initiative aligns with the Board's strategic goal of strengthening the early childhood education workforce by promoting staff retention, professional stability, and ongoing quality improvement. By recognizing and regarding educators working in Texas Rising Star certified programs, WFSMRG supports workforce satisfaction, quality enhancement efforts and the long term sustainability of high quality early childhood education across the region.

Preparing for Assessments, Reassessment and Annual Monitoring

Over the past two months, our mentors have been actively working with early learning programs to ensure they are well prepared for upcoming Texas Rising Star assessments, reassessments and annual monitoring visits. Through individualized guidance, technical assistance and ongoing support mentors are helping programs strengthen their practices, maintain compliance with TRS standards and continue providing high quality early childhood education services.

Workforce Solutions Middle Rio Grande Board

Monitoring & Oversight Committee

June 11, 2026

Action Item

Workforce Programs Board Monitoring Report for SNAP

PURPOSE

Provide an update on all Workforce Programs Monitoring and Oversight.

DISCUSSION

The following is the report for February and March 2026 SNAP Monitoring:

SNAP Performance Review Summary					
Date of Scope:		February and March 2026			
Attribute	Total # of files reviewed				10
Eligibility	Error Rate	Yes	No	N/A	Total Y+N
Establish initial monthly eligibility in timely manner and uploaded in WIT	0.00%	10	0	0	10
Outreach done timely and letter contains all pertinent information.	0.00%	4	0	6	4
Assessment	Error Rate	Yes	No	N/A	Total Y+N
Initial and reassessment documented in case notes	0.00%	8	0	2	8
Rights to Appeal and Orientation to compliant forms that are current and uploaded in WIT	25.00%	3	1	6	4
Was follow-up done while Good Caused? Was it documented on case notes	0.00%	0	0	10	0
Support Services	Error Rate	Yes	No	N/A	Total Y+N
Support services/incentives documented in case notes with documentation uploaded in WIT	0.00%	2	0	8	2
WIT Data Entry	Error Rate	Yes	No	N/A	Total Y+N
Case notes are entered timely, detailed and updated reflecting 2 way communication	0.00%	10	0	0	10
Date of Non compliance is correct and documented in case notes	0.00%	5	0	5	5

Was 1822 documented correctly and indicating 1822 being sent timely	0.00%	4	0	6	4
Good cause or sanction determination correctly documented in case notes with all information	0.00%	5	0	5	5
Was 1817 documented correctly and reason for reconsideration documented in case notes	0.00%	2	0	8	2
Was reconsideration for Good Cause after penalty (1816) entered and documented in case notes correctly	0.00%	0	0	10	0
Did application remain open while Good Caused (Reconsideration)	0.00%	0	0	10	0
Was application closed correctly	0.00%	7	0	3	7
Non Compliance	Error Rate	Yes	No	N/A	Total Y+N
Penalty Initiated Appropriately entered correctly in WIT	0.00%	5	0	5	5
Initiation of penalty done timely	0.00%	5	0	5	5
Employment Plan	Error Rate	Yes	No	N/A	Total Y+N
Employment Plan is complete with signature, allowable activity, correct/detailed required hrs of participation and when doc is due	0.00%	10	0	0	10
ABAWD enrolled in 4 weeks of Job Search	0.00%	10	0	0	10
Notification	Error Rate	Yes	No	N/A	Total Y+N
Work Requirement Verification For H1822 submitted timely or at all? (ABAWDS Only)	0.00%	4	0	6	4
Form H1817-Reconsideration Request recorded in WIT Good Cause ribbon	0.00%	2	0	8	2
Form H1816 Non Compliance due to Good Cause uploaded to WIT and recorded in WIT ribbon	0.00%	0	0	10	0
Participation	Error Rate	Yes	No	N/A	Total Y+N
Provisions of SNAP Activities being followed?	0.00%	9	0	1	9
SNAP Activities are supported with acceptable documentation	0.00%	6	0	4	6
Participation hours in WIT are supported and documented in case file	0.00%	6	0	4	6

Findings

Assessment

Right to Appeal form was not uploaded into WIT

B-106.b: Employment Planning Meeting-overview of SNAP E&T Service Requirements-during the employment planning meeting, the SNAP recipient is provided with an overview of SNAP E&T, which may include: An explanation of the appeals process and the SNAP recipient's right to appeal, and materials and handouts with information the right to appeal and where to file an appeal.

Corrective Action:

Assessment is a repetitive finding: The Board staff will present to the Board of Directors a recommendation that the contractor be put on a probationary period, with conditions to be set by the Board of Directors. Assessment is a five-time finding.

Board Recommendation

Documentation of Corrective Action needs to be provided to the Board 10 days after the Board meeting. Assessment is an area that is most in need of re-training for staff.

Workforce Solutions Middle Rio Grande Board

Monitoring & Oversight Committee

June 11, 2026

Action Item

Workforce Programs Board Monitoring Reports for Choices

PURPOSE

Provide an update on all Workforce Programs Monitoring and Oversight.

DISCUSSION

The following is the report for February and March 2026 Monitoring:

Choices Performance Review Summary					
Date of Scope:	February and March 2026				
Attribute	Total # of files reviewed				12
Eligibility	Error Rate	Yes	No	N/A	Total Y+N
Establish initial/monthly eligibility and is uploaded in WIT	0.00%	8	0	4	8
Outreach done timely and letter contains all pertinent information	0.00%	5	0	7	5
Assessment	Error Rate	Yes	No	N/A	Total Y+N
Initial assessment and/or reassessment documented in counselor notes including TABE uploaded in WIT	0.00%	12	0	0	12
Rights to appeal and Orientation to complaint forms that are current and up to date uploaded in WIT	0.00%	9	0	3	9
Support Services	Error Rate	Yes	No	N/A	Total Y+N
Support services/incentives documented in cnotes and reconciled correctly with documentation entered/uploaded in WIT	0.00%	3	0	9	3
WIT Data Entry	Error Rate	Yes	No	N/A	Total Y+N
Case notes are detailed and updated and reflect 2 way communication - including documentation for all transmittals (1817, 1816, 2588)	0.00%	12	0	0	12
Is preferred method of contact documented in WIT	0.00%	11	0	1	11

Date of Non compliance is correct and documented in cnotes	20.00%	4	1	7	5
Good cause or sanction documented in cnotes with all information	16.67%	5	1	6	6
Non Compliance	Error Rate	Yes	No	N/A	Total Y+N
Penalty Initiated Appropriately per instructions	20.00%	4	1	7	5
Timely and Reasonable Attempt process followed by contractor	25.00%	3	1	8	4
Penalty initiated timely or at all (before 7th day)	25.00%	3	1	8	4
Employment Plan	Error Rate	Yes	No	N/A	Total Y+N
Employment Plan consistent with Work 1st approach and has correct and detailed required hours of participation	0.00%	12	0	0	12
Family Work Requirement is signed and completed with how the required hours of participation will be distributed	0.00%	4	0	8	4
Notification	Error Rate	Yes	No	N/A	Total Y+N
Provide HHSC employment information (2583) timely	0.00%	5	0	7	5
Participation	Error Rate	Yes	No	N/A	Total Y+N
Work Activities are supported with documentation in case file	0.00%	6	0	6	6
Participation hours in WIT are supported with documentation in case file	0.00%	6	0	6	6

Findings

WIT Data Entry

Incorrect date of noncompliance in WIT

B-803: Timely and Reasonable Attempt for failure to Meet Participation requirements-the date of noncompliance with participation requirements, such as a missed appointment-or the date of Workforce Solutions Office staff discovery on noncompliance-a choices participant has one business day to contact the Workforce Solutions Office.

No case note regarding missing Time and Attendance

B-602: Documentation-Case Notes-Boards must ensure that WorkInTexas.com Case Notes are a record of contact, progress, and any

interaction with the Choices customer. Boards must ensure that Workforce Solutions Office staff enters information that is: complete and includes only pertinent information about actions, activities and interactions with the customer; Boards must ensure that the following takes place: documentation of participation hours.

Non-compliance

Sanction is not entered for missing Time and Attendance

B-801.b: Non-cooperation-Non-cooperation is often determined by one of the following two situations: Failure to meet participation requirements after intake.

Time and reasonable attempt was not done for missing Time and Attendance

B-801.b: Non-cooperation; Boards must ensure the following-Pursuant to Human Resources Code 31.0033, at every instance of non-cooperation, a timely and reasonable attempt is made to contact mandatory Choices participants to determine whether the participant had good cause for failing to cooperate prior to requesting a sanction

Incorrect penalty date was entered

B-801.b: Non-cooperation; boards must ensure that within seven calendar days of noncompliance by a Choices participant, Workforce Solutions Office staff: initiates a sanction.

Corrective Action:

WIT Data Entry and Noncompliance are repetitive findings: The Board staff will present to the Board of Directors a recommendation that the Contractor be put on a probationary period, with conditions to be set by the Board of Directors. WIT Data Entry is an eight-time finding and Noncompliance is a five-time finding.

Board Recommendation:

Documentation of Corrective Action needs to be provided to the Board 10 days after the Board meeting. WIT Data Entry and Noncompliance are areas that are in most need of re-training for staff.

Workforce Solutions Middle Rio Grande Board

Monitoring & Oversight Committee

Action Item

June 11, 2026

Workforce Programs Board WIOA Monitoring Reports

PURPOSE

Provide an update on all Workforce Programs Monitoring and Oversight.

DISCUSSION

The following is the WIOA February and March 2026 Monitoring report:

WIOA Performance Review Summary					
Date of Scope:	February and March 2026				
Attribute	Total # of files reviewed				21
Eligibility	Error Rate	Yes	No	N/A	Total Y+N
Client Eligible for WIOA (tested as a single element with income, barriers, lay off notice, etc.)	0.00%	21	0	0	21
Verification of Age, Residency, Social Security number uploaded in WIT	0.00%	21	0	0	21
Authorization to work in US uploaded in WIT	0.00%	21	0	0	21
Selective Services (male born after 1/1/60) and uploaded in WIT	0.00%	17	0	4	17
Assessment	Error Rate	Yes	No	N/A	Total Y+N
Assessment/reassessment documented in case notes including TABE, WIT, 205 Employability Development Plan and 203 Comprehensive Objective Assessment is done or for youths 412 Comprehensive Objective Assessment and 413 Individual Service Strategies.	0.00%	21	0	0	21
Notification of Equal Opportunity and Rights to Appeal signed and dated uploaded in WIT. Does EO form have the EO officer's identity and accurate information?	0.00%	21	0	0	21
Support Services	Error Rate	Yes	No	N/A	Total Y+N
Support Services requested/updated documented & reconciled correctly and entered	0.00%	1	0	20	1

in WIT, transportation, child care, post employment services, incentives, etc.					
WIT Data Entry	Error Rate	Yes	No	N/A	Total Y+N
Cnotes are detailed and updated and reflect 2 way communication and are entered within 7 days	9.52%	19	2	0	21
Employment Plan	Error Rate	Yes	No	N/A	Total Y+N
Employment Plan is signed and up to date with activities/services that client is enrolled in	0.00%	21	0	0	21
Financial	Error Rate	Yes	No	N/A	Total Y+N
ITA added in Activity tab, PO and LON information both uploaded in WIT	12.50%	7	1	13	8
Internship or Employment Experience Agreement and WorkStation form uploaded in WIT	0.00%	12	0	9	12
Participation	Error Rate	Yes	No	N/A	Total Y+N
Time and attendance sheet completed correctly and uploaded in WIT/Date of Participation entered in WIT	10.00%	9	1	11	10
Performance outcome is documented in WIT correctly with proper back up documentation	0.00%	1	0	20	1
Employment outcome is documented in WIT correctly with proper back up documentation uploaded in WIT	0.00%	3	0	18	3

Findings

Data Entry: Over 30 days of 2-way contact, No 2 way contact for February and March

WD Letter 6-13, Change 2-Boards must ensure that Workforce Solutions Office staff is in direct, two-way contact with each participant on at least a monthly basis. For this purpose, the following applies: Monthly means during each calendar month, with no more than approximately 30 days between contact. Direct, two-way contact requires communication between the parties involved through methods such as in-person, videoconferencing, email, text, or phone call. This may require a participant to provide documentation or other evidence of participation beyond verbal acknowledgement.

Financial: LON is not uploaded into WIT

Eligibility for Training Services-WIOA funding for training is limited to participants who: are unable to obtain grant assistance from other sources to pay training costs; or require assistance beyond that available under grant assistance from other sources to pay training costs and related support services. Boards must ensure that WIOA funds are not used to pay training cost: for any portion or term of training for which the participant has signed a loan as part of financial aid;

Participation:

Time and attendance not uploaded. Individualized Career Services-An assessment is the first service provided as the information that is collected through the process is used to develop an individual employment plan which describes employment goals, appropriate achievement objectives, and the combination of services in which the individual must complete to achieve goals.

WD 2-23, Change 2 Adoption of a Universal Employment Plan-update-Boards must ensure that Workforce Solutions Office staff manually enters the Individual Employment Plan (IEP/EDP) activity code in WorkInTexas.com IEP/ISS.

Corrective Action:

Financial is a repetitive finding: The Board staff will present to the Board of Directors a recommendation that the Contractor be put on a probationary period, with conditions to be set by the Board of Directors. Financial is a six-time finding.

Board Recommendation:

Documentation needs to be provided to the Board 10 days after Board meeting. The Contractor will need to notify the Board on training that will be conducted to over area of finding (Financial).

Workforce Solutions Middle Rio Grande Board

Monitoring & Oversight Committee

June 11, 2026

Action Item

Childcare Program Board Monitoring Reports

PURPOSE

Provide an update on Childcare Program Monitoring and Oversight.

DISCUSSION

The following is the report for Childcare Monitoring for February and March 2026:

Child Care Performance Review Summary					
Scope of Review	February and March 2026				
Attribute	Total # of files reviewed				12
Eligibility	Error Rate	Yes	No	N/A	Total Y+N
Documentation to determine residency	0.00%	6	0	6	6
Documentation to determine age and citizenship	0.00%	6	0	6	6
Client meets participation criteria (25/50) work or education	0.00%	6	0	6	6
Full, Parted, Blended care authorized on Schedule and TX Notice based on work/training status	0.00%	6	0	6	6
Proper documentation for all income sources verified calculated, recorded correctly and uploaded into KT	16.67%	5	1	6	6
Information for placement/renewal date is entered into system within the 5 days. If not reason is documented on cnotes	50.00%	3	3	6	7
Household composition documented correctly in KT	0.00%	6	0	6	6
Was the DFPS authorization for child care entered within the 3 days into KT	0.00%	6	0	6	6
Was the DFPS eligibiltiy start date correct? End date?	0.00%	6	0	6	6
Was the information from the DFPS form 2054 date stamped and entered accurately into KT?	16.67%	5	1	6	6
Homeless: documenation to establish homelessness (residency information form)	0.00%	0	0	12	0
Referral/Parent Fee	Error Rate	Yes	No	N/A	Total Y+N

Was weekly parent fee assessed is correct on KT	16.67%	5	1	6	6
Subsidy Amount recorded equals amount authorized	16.67%	5	1	6	6
File Maintenance	Error Rate	Yes	No	N/A	Total Y+N
Was a Texas notice generated in KT	0.00%	12	0	0	12
Pre/Re-application in file with million \$ question completed	0.00%	6	0	6	6
Parents Right to Appeal	0.00%	0	0	12	0
Orientation to Complain form	0.00%	6	0	6	6
Family notes entered in KT timely and with pertinent information (income, bonus, etc)	8.33%	11	1	0	12
Notification	Error Rate	Yes	No	N/A	Total Y+N
Notice of Action was sent to the client timely and with the correct information	9.09%	10	1	1	11
Notice of Action regarding Recertification sent timely? For Denials was Appeal sent?	0.00%	2	0	10	2

Findings

Eligibility: Information was not entered into KinderTrack timely

B-102: Timely Data Entry - The Board must ensure accurate and timely entry of all childcare referral, customer, provider, budget and claim information into TWC's designated IT data automation systems for childcare service delivery. "Timely data entry" is defined as no later than five business days from the date the subcontractor

Address on 2054 was not used

D-704: authorizations of Care for Children in Protective Services-Within three business days from receipt of a completed DFPS authorization for CCS, Boards must ensure that the child care contractor does one of the following: If caregiver states that information provided by DFPS is incorrect, staff must instruct the caregiver to contact DFPS for any changes or update and the CCS may not change information provided by DFPS until DFPS notifies local staff.

Incorrect monthly gross income due to bonus

D-107.d: Bonuses and Lump sum Payments-Boards must ensure that, if pay documents indicate that a family member received a bonus or other lump sum during the income calculation period or in the year-to-date

amount, staff determines the number of months the bonus or lump sum covers and if there is any expectation of future repetition.

Referral/Parent Share of Cost: Incorrect parent fee amount is calculated in KT; Incorrect amount paid to provider

B-601: Requirements for Determining the Parent share of Cost-Boards must inform staff members that the PSoC is: established by the Commission using a sliding fee scale based on the family's size and gross monthly income;

B-601: Requirements for Determining the Parent share of Cost-Boards must inform staff members that the PSoC is: established by the Commission using a sliding fee scale based on the family's size and gross monthly income;

File Maintenance: Incorrect gross monthly income documented in KT

D-107.d: Bonuses and Lump sum Payments-Boards must ensure that, if pay documents indicate that a family member received a bonus or other lump sum during the income calculation period or in the year-to-date amount, staff determines the number of months the bonus or lump sum covers and if there is any expectation of future repetition.

Notification: Incorrect PSOC on Notice of Action

B-610: Parent Share of Cost Amounts Calculated in the Child Care Management System-Boards must inform staff members that the childcare case management system automatically calculates the PSOC assessment described in B-601, based on gross income calculated from information entered.

Corrective Action:

Eligibility and Referral/PSOC are repetitive findings: The Board staff will present to the Board of Directors a recommendation that the Contractor be put on a probationary period, with conditions to be set by the Board of Directors. Eligibility and Referral/PSOC are four- time findings.

Board Recommendation

Documentation needs to be provided to the Board 10 days after the Board meeting. Contractor will need to notify the Board on training that will be conducted over areas of finding for **Eligibility and Referral/PSOC.**

Workforce Solutions Middle Rio Grande Board

Monitoring & Oversight Committee

June 11, 2026

Action Item

Workforce Programs Board Monitoring Report for RESEA

PURPOSE

Provide an update on all Workforce Programs Monitoring and Oversight.

DISCUSSION

The following is the report for February and March 2026 RESEA Monitoring:

RESEA Performance Review Summary					
Date of Scope:	February and March 2026				
Attribute	Total # of files reviewed				10
Eligibility	Error Rate	Yes	No	N/A	Total Y+N
Did the Claimant receive an invitation letter from the Workforce with the RESEA Babel notice	0.00%	10	0	0	10
Was the claimant scheduled for RESEA one-to-one appointment no sooner than seven (7) days to allow for mailing and not later than twenty-one (21) days from the date the scheduler ran after the claimant was added to the outreach pool?	0.00%	10	0	0	10
Were all three methods of communication for outreach appointment reminder used and document in the case note?	0.00%	10	0	0	10
Did the claimant receive the following required services on the same day during the Initial RESEA appointment	12.50%	7	1	2	8
Was the UI Eligibility Review Form completed, uploaded to the customer's profile?	0.00%	8	0	2	8
Assessment	Error Rate	Yes	No	N/A	Total Y+N
Were the work search logs for the prior two weeks reviewed and uploaded to the customer's profile?	0.00%	8	0	2	8

Was the Client Labor Market Information (CLMI) form completed and uploaded to the customer's profile?	0.00%	8	0	2	8
WIT Data Entry	Error Rate	Yes	No	N/A	Total Y+N
Were all RESEA services entered into WIT within seven (7) calendar days from the scheduled RESEA initial appt. date?	0.00%	8	0	2	8
EMPLOYMENT Plan					
Does the Individual Reemployment Plan contain all the goals outlined in the guide and complete?	0.00%	8	0	2	8
NOTIFICATION					
Has the WF-42 sent in a password or encrypted protected email?	0.00%	4	0	6	4

Findings

Eligibility:

RVD was not included in activities/services in Programs WP tab

RESEA Required Services-RESEA orientation, which includes information about access to Workforce solutions Office service and RESEA program requirements and their impact on continued eligibility for UI benefits.

TA Bulletin 313-The following steps provide guidance regarding the customer's completion of the Orientation video and the process to be taken by Workforce Solutions Office staff in confirming and utilizing the RVD-Reemployment Video service code: Upon completion of the orientation video via WorkInTexas.com Activity history/Service Plan.

Corrective Action:

Eligibility is a **repetitive** finding: The Board staff will present to the Board of Directors a recommendation that the contractor be put on a probationary period, with conditions to be set by the Board of Directors. Eligibility is a six-time finding.

Board Recommendation:

Documentation of Corrective Action needs to be provided to the Board 10 days after the Board meeting. Eligibility is an area that is most in need of re-training for staff.

Workforce Solutions Middle Rio Grande Board

Monitoring & Oversight Committee

Action Item

June 11, 2026

Workforce Programs Board Priority of Service Monitoring Reports

PURPOSE

Provide an update on all Workforce Programs Monitoring and Oversight.

DISCUSSION

The following is the Priority of Service for February and March 2026 Monitoring report:

Priority of Service					
Scope of Review	February and March 2026				
Attribute	Total # of files reviewed				28
Eligibility	Error Rate	Yes	No	N/A	Total Y+N
Has Customer or spouse served in the military?	0.00%	28	0	0	28
Is eligible veteran or eligible spouse receiving VA disability, Homeless or At Risk, recently separated service member unemployed for 27 weeks or more, was or is incarcerated, lacks a high school diploma or equivalent certificate and or is low income, receiving public assistance, housing, food, TANF, or other programs?	0.00%	18	0	10	18
Was an Eligibility Triage Form completed and uploaded with a case note	14.29%	24	4	0	28
Foster Youth/Former Foster Youth	Error Rate	Yes	No	N/A	Total Y+N
Is the Customer a Foster Youth	0.00%	0	0	30	0

Findings

Eligibility

Eligibility Triage Form was not uploaded to WIT

WD 6-25, Change 1: Identifying Eligible Individuals to Receive Services from DVOP Specialists and Consolidated DVOP/LVER Staff Members – Boards

must ensure Workforce Solutions Office intake staff screens individuals for eligibility for DVOP and consolidated DVOP/LVER services using the DVOP Eligibility Screening Tool (Attachment 1).

Boards must ensure Workforce Solutions Office intake staff uploads the completed DVOP Eligibility Screening Tool into the individual's Personal Profile in WorkInTexas.com.

Corrective Action:

Repeat findings from previous monitoring for Eligibility-The Board will have a one on one training with the Contractor's Quality Assurance team to determine the weaknesses in quality reviews.

Board Recommendation:

Documentation needs to be provided to the Board 10 days after Board meeting. The Contractor will need to notify the Board on training that will be conducted to cover area of findings (Eligibility).



WORKFORCE SOLUTIONS MIDDLE RIO GRANDE

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POLICY LETTER

ID NO: ADMIN01 Chg. 3

DATE ISSUED: June 11, 2026

TO: Workforce Solutions Middle Rio Grande Contractors

FROM: Rosie Lozano, Executive Director

SUBJECT: Equal Opportunity (EO) Policies and Procedures

PURPOSE:

The purpose of this policy is to provide directive on the Equal Opportunity program to its contractors. Workforce Solutions Middle Rio Grande Board as a recipient of Federal financial assistance, does not discriminate on any prohibited grounds.

POLICY:

The Workforce Solutions Middle Rio Grande Development Board (herein after referred to as the "Board"), through its workforce center system operator, Middle Rio Grande Development Council, ensures universal access to programs and services for customers with disabilities and customers with limited English proficiency (LEP).

The Workforce Center staff upholds the highest standards of non-discrimination and the provision of equal opportunity to all customers of its basic services, expanded services and financial aid. The Workforce Center System Operator manages the WIOA financially assisted programs and activities and other programs in the most integrated setting appropriate to the needs of qualified individuals with or without disabilities. This policy establishes local procedures and is not intended to supersede any other applicable laws, regulations, or organizationally specific requirements. Local contractor policies contain these same mandates and can provide additional protections to customers with disabilities.

These policies are written to comply with the following:

- Section 188 of the Workforce Investment Act (WIOA) and the implementing regulations found in 29 Code of Federal Regulations (CFR) Part 38;
- Americans with Disabilities Act (ADA) of 1990, which prohibits employers and social service agencies from discriminating against qualified individuals with physical or mental disabilities on any basis;
- Section 504 of the Rehabilitation Act of 1973, as amended, and the implementing regulations found in 29 CFR Part 32, which prohibits discrimination against people with a physical, sensory or mental disability in programs receiving or benefiting from federal financial assistance; and
- Texas State law for accessibility requirements.
- **29 CFR Part 38.9 and TWC WD 02-19 Change 2 regarding language access and Babel notice requirements**
- **TWC WD Letter 01-26, Reporting Incidents Involving Texas Workforce Commission and Workforce Solutions Office Staff Members and Customers.**

The Workforce Center staff does not discriminate against individuals or classes of individuals on the basis of a physical, mental, or sensory disability when providing assistance, benefits, and services. The Workforce Center System Operator has taken appropriate steps to ensure that communications with beneficiaries, applicants, registrants, eligible applicants/registrants, participants, employees or applicants of employment and members of the public who are individuals with or without disabilities are as effective as communications with others. Customers shall not be excluded from participation in, denied the benefit of, subjected to discrimination under, or denied services, access to services or programs and/or facilities, in the administration of, or in connection with, any such program or activity financially assisted in whole, or in part under the WIOA or in connection with partnering agencies, or employers on the basis of disability.

The need to provide reasonable accommodation or modification will not be a factor in the selection of a participant for program participation, or for any opportunity which may have an impact on the customer's career development.

In accordance with 29 CFR Part 38 and TWC WD Letter 02-19, Change 2, the Workforce Solutions Middle Rio Grande Board shall take reasonable steps to ensure meaningful access to programs, services, aid, benefits, training, and information for individuals with limited English proficiency (LEP). The Board shall provide language assistance services, including oral interpretation and written translation, free of charge when appropriate, and shall utilize Babel notices on communications containing vital information as required by applicable federal and state guidance. WD Letter 02-19, Change 2 clarifies that the inclusion of a Babel notice is a required component of outreach material if it is necessary for an individual to learn about a program, aid, service, and/or training.

In accordance with 29 CFR §38.40, Workforce Solutions Middle Rio Grande Board shall take appropriate steps to ensure equal access to WIOA Title I-financially assisted programs, activities, aid, benefits, and services. The Board shall conduct affirmative outreach efforts designed to reach and engage individuals and groups protected under applicable nondiscrimination laws and regulations, including, but not limited to, individuals of different sexes, racial and ethnic groups, national origins, religions, individuals with limited English proficiency, individuals with disabilities, and individuals of various age groups.

Affirmative outreach efforts may include, but are not limited to:

- Advertising programs and services through media outlets that reach diverse populations;
- Distributing information regarding workforce programs and services to schools, community organizations, advocacy groups, and other entities serving protected populations; and
- Consulting with community organizations and stakeholders to identify opportunities to improve outreach, accessibility, and service delivery to underserved and underrepresented populations.

In accordance with 29 CFR § 38.51, the Board is responsible for oversight and annual monitoring of all WIOA Title I-financially assisted state programs to ensure compliance with the nondiscrimination and equal opportunity provisions of Section 188 of the WIOA and, negotiating, where appropriate, with a recipient to secure voluntary compliance when noncompliance is found.

The Board has an obligation to monitor and to self-correct. TWC provides two checklists for the Board to use in their internal efforts. The general tool is the *Texas Workforce Commission Equal Opportunity Monitoring WIOA Section 188 Review Checklist* which is used to cover WIOA Nondiscrimination and Equal Opportunity programmatic accessibility. For evaluating physical accessibility issues, TWC provided Boards with the *Texas Workforce Commission ADA Monitoring Checklist for Texas Workforce Facilities Based on the 2012 Texas Accessibility Standards (TAS)*; TAS and subsequent updates are promulgated by the Texas Department of Licensing and Regulation (TDLR).

Annual Board monitoring occurs through review of administrative obligations of WIOA section 188 and 29 CFR Part 38, the federal regulations related to EO Officers, notice and communication, assurances, equal access, data and information collection and maintenance, complaint processing procedures, and other related information.

Compliance reviews evaluate recipients' EO performance by examining the following items:

- documentation of EO monitoring/evaluation reviews of recipients of WIOA Title I financial assistance (including monitoring assurances, program accessibility, and architectural accessibility);
- data analyses of records and data kept by the recipient, including analyses by race/ethnicity, sex, limited English proficiency, age, and disability status, LEP status and preferred language;
- an investigation of any significant differences identified regarding participation in the programs, activities, or employment provided by the recipient, to determine whether differences are a result of discrimination;
- recommendation of corrective actions for non-compliance noted by a recipient during its monitoring reviews; and
- assurance of policy development, communication, and training.

In accordance with 29 CFR § 38.10, the Workforce Solutions Middle Rio Grande Board **strictly prohibits harassment, including sexual harassment, or the creation of a hostile environment**, in any program or activity funded under WIOA Title I. Harassment on any prohibited basis—race, color, religion, sex (including pregnancy, gender identity, and

transgender status), national origin, age, disability, political affiliation or belief, or citizenship/status as a lawfully admitted immigrant authorized to work—is unlawful and will not be tolerated.

Harassment includes, but is not limited to:

- Verbal abuse, offensive jokes, slurs, or derogatory comments
- Unwelcome sexual advances or conduct of a sexual nature
- Display of offensive symbols, images, or written material
- Physical behavior that is intimidating, hostile, or offensive
- Interference with work performance or participation in services due to such behavior

Such conduct is considered unlawful when:

- Enduring the offensive conduct becomes a condition of continued participation; or
- The conduct is severe or pervasive enough to create an intimidating, hostile, or abusive environment

In accordance with 29 CFR § 38.41 and WD 17-07, Change 2, All medical or disability-related information obtained by the Workforce Solutions Middle Rio Grande Board or its subrecipients shall be treated as confidential and maintained in secure files that are **separate from general personnel, program, or participant records**. The Board ensures that electronic and physical records containing medical information are restricted to authorized personnel only. All applicable staff are trained on maintaining confidentiality and handling medical data in compliance with federal regulations.

In accordance with 29 CFR § 38.69 and WD 18-07, Change 2, Any individual who believes they have been subjected to discrimination in a WIOA Title I—financially assisted program or activity has the right to file a complaint within **180 days of the alleged incident**.

In accordance with TWC WD Letter 01-26, Reporting Incidents Involving Texas Workforce Commission and Workforce Solutions Office Staff Members and Customers, Workforce Solutions Middle Rio Grande Board and its contractors shall promptly report incidents involving Workforce Solutions Office staff members, customers, facilities, operations, personally identifiable information (PII), or other events that may impact safety, security, operations, public trust, or compliance requirements. All reportable incidents shall be handled confidentially and reported in accordance with applicable federal, state, and TWC requirements.

The Board and its contractors shall ensure all federally, and state-required workforce notices and posters are prominently displayed **in accordance with applicable federal and state law and TWC guidance, including FDCM Letter 02-2026.**

Description of Requirements

1. The Workforce Center staff is, and will remain, compliant with all applicable disability nondiscrimination laws, including the ADA; the relevant portions of Section 188 of WIOA and its implementing regulations found in 29 CFR Part 38 and 38.12, 29 CFR 38.4; Section 504 and the implementing regulations found in 29 CFR Part 32; and other applicable laws.
2. The Workforce Center sites shall remain architecturally barrier free. When determining a site or location of a facility, the Board's selection process will be made in a manner that does not have a discriminatory effect.
3. All services offered at the workforce centers shall be available and welcoming to all qualified customers, regardless of disability.
4. Customers should be assumed to be experts in understanding their disability and the specific needs based on that disability, unless otherwise indicated by facts pertaining to that individual customer.
5. The Workforce Center staff will provide reasonable accommodations and modifications for customers with disabilities and will comply with all applicable accessibility requirements. Reasonable accommodations and modifications will be determined through an informal, interactive process of communication with the customer.
6. Under the law, customers who ask for an adjustment or change related to a medical condition are considered to have requested a reasonable accommodation or modification. A requested accommodation is unreasonable if providing it would result in undue hardship, and a requested modification is unreasonable if providing it would fundamentally alter the nature of the service, program, or activity. The responsible person at the Workforce Center office must review certain required factors when determining whether there would be a fundamental alteration or undue hardship. These factors are delineated in the "Definitions" section of this document. If it is

determined that the requested accommodation would cause undue hardship, or the requested modification would result in a fundamental alteration, the Workforce Center staff must provide a written statement of reasons for denying the requested accommodation or modification, give a copy of the statement to the customer requesting the accommodation or modification, and offer another action to avoid discrimination, provide equal opportunity, and allow the person with the disability to participate to the fullest extent possible.

7. To be considered "reasonable," an accommodation need not be the most expensive accommodation available, as long as it is effective in meeting the needs of the individual customer with a disability.
8. The Workforce Center staff are allowed to ask for reasonable documentation of the disability or medical condition under the circumstances, and following the procedures, described in part 2 of the "Procedures" section of this document.
9. The Workforce Center staff may discipline, including denial of service to, any individual who violates Center policy related to conduct, even if the conduct resulted from a disability, if all of the following criteria are met:
 - a. the conduct policy is **both**:
 - i. related to provision of the specific services at issue, **and**
 - ii. consistent with business necessity; **and**
 - b. the discipline being imposed is consistent with program policy in other words, the same discipline is imposed on a customer with a disability as on other customers without disabilities.
 - c. If a customer with a disability who has violated Center policy related to conduct asks for reasonable accommodation to be able to comply with the policy in the future, that accommodation must be provided unless it imposes an undue hardship, as with other accommodation requests. However, the Workforce Center staff is not required to excuse misconduct that took place before the accommodation request.
10. The Board does not provide different, segregated, or separate services or training to individuals with disabilities unless such

action is necessary to provide qualified individuals with disabilities with services or training that are as effective as those provided to others.

11. The Workforce center staff must not deny a qualified individual with a disability the opportunity to participate as a member of planning or advisory boards.
12. A recipient must not, directly or through contractual, licensing, or other arrangements, aid or perpetuate discrimination against qualified individuals with disabilities by providing significant assistance to an agency, organization, or person that discriminates on the basis of disability in providing any aid, benefit, service, or training to registrants, applicants, or participants.
13. A recipient must administer WIOA Title I-financially assisted programs and activities in the most integrated setting appropriate to the needs of qualified individuals with disabilities.
14. A recipient must not administer a licensing or certification program in a manner that subjects qualified individuals with disabilities to discrimination on the basis of disability, nor may a recipient establish requirements for the programs or activities of licensees or certified entities that subject qualified individuals with disabilities to discrimination on the basis of disability. The programs or activities of entities that are licensed or certified by a recipient are not, themselves, covered by this part.
15. A recipient must not impose or apply eligibility criteria that screen out or tend to screen out individuals with disabilities or any class of individuals with disabilities from fully and equally enjoying any aid, benefit, service, training, program, or activity, unless such criteria can be shown to be necessary for the provision of any aid, benefit, service, training, program, or activity being offered.
16. No participant, applicant, employee, or visitor with a disability shall be denied access to programs, services, or facilities due to the presence of a service animal that is individually trained to perform tasks for the benefit of that individual.
17. The Board and its subrecipients must modify policies, practices, and procedures as necessary to permit individuals with disabilities to use:

- Their manually driven mobility aides such as walkers, wheelchairs, crutches, canes, braces or powered mobility aides such as electric wheelchairs/scooters.
18. Medical information may only be disclosed under the following circumstances:
- To supervisors and managers, when necessary, regarding restrictions on duties or necessary accommodations;
 - To first aid and safety personnel, if the disability might require emergency treatment;
 - To government officials engaged in enforcing WIOA nondiscrimination provisions or investigating compliance;
 - As required by law.

Definitions

Basic Services — Basic Services are those that are available to everyone seeking services at the Workforce Center.

Customer — For the purposes of this document, a customer is defined as a job seeker, someone from the business community, a program participant, and/or staff of partner agencies.

Customer who has a disability — A customer who has a disability is defined as a person with a physical or mental impairment that substantially limits one or more major life activities.

Reasonable Accommodation/Modification — A reasonable accommodation and/or modification is any change in the application or registration process, and/or the delivery of programs, policies, practices, procedures, and/or the environment that allows customers with a disability to have an equal opportunity to utilize the workforce center system services. The goal is to enable an otherwise qualified person who has a disability to have an equal opportunity to perform satisfactorily to his/her fullest potential. The Workforce Center staff provides any reasonable accommodations or modifications at no cost to the customer. Requested accommodations must be provided unless they would cause an undue hardship, and requested modifications must be provided unless they would fundamentally alter the nature of the service, program or activity.

Examples of Reasonable Accommodation/Modifications include, but are not limited to:

- Provision of readers, interpreters, and other auxiliary aids or services necessary to ensure that communications with customers with disabilities are as effective as communications with other customers
- Modifications or adjustments to the environment in which, or the rules under which, the aid, benefit, services, or training is provided
- Modifications or adjustments to the manner in which a training program or other activity is conducted.

To determine reasonableness of a requested accommodation or modification, the Workforce Center staff must determine whether the accommodation would impose an undue hardship, or the modification would create a fundamental alteration.

- **Undue hardship/burden** — Undue hardship is defined as significant difficulty or expense. In general, the factors to be considered in determining whether a particular accommodation would impose an undue hardship include:
 - the **type** of accommodation that has been asked for;
 - the **net cost** of the accommodation (taking into consideration the availability of tax credits and deductions, and/or outside funding, for the accommodation);
 - the **overall size** of the recipient (including number of employees, participants, and type of facilities, and size of budget);
 - the **overall financial resources** of the recipient as a whole and the individual facility or facilities that would be involved with the accommodation; and
 - the **effect** that providing the accommodation would have on the recipient's or facility's ability to serve other customers (or, for a work-related accommodation, its employees' ability to perform their duties), and the recipient's or facility's ability to carry out its mission.

Where the facility making the accommodation is part of a larger entity, the structure and overall resources of the larger organization would be considered, as well as the financial and administrative relationship of the facility to the larger organization. In general, a larger entity would be expected to make accommodations requiring greater effort or expense than would be required of a smaller organization.

Fundamental alteration – The term “fundamental alteration” is defined in two ways:

- a change in the *essential nature* of a program or activity, or
- a cost that a recipient can demonstrate would result in an *undue burden*.

To determine whether a particular modification would result in an undue burden, the Workforce Center staff must consider the factors listed in the definition of ***fundamental alteration*** in 29 CFR §37.4. These factors are similar to those listed for ***undue hardship***, as discussed above.

Service Animal - A dog that is individually trained to do work or perform tasks for an individual with a disability. In some cases, a miniature horse may also qualify as a service animal under specific conditions outlined by the ADA.

Work or Tasks - Includes guiding individuals who are blind, alerting individuals who are deaf, pulling a wheelchair, alerting and protecting a person who is having a seizure, and other similar tasks.

PROCEDURES:

Limited English Proficiency (LEP) and Babel Notices

Workforce Solutions Middle Rio Grande Board shall ensure meaningful access to workforce system services for individuals with limited English proficiency (LEP) in accordance with:

- Workforce Innovation and Opportunity Act (WIOA) Section 188;
- 29 CFR Part 38; and
- TWC Workforce Development Letter WD 02-19, Change 1.

The Board shall utilize Babel notices when appropriate to inform customers that vital information is available in other languages and that language assistance services are available free of charge upon request.

Vital information includes written, oral, or electronic information necessary for an individual to:

- understand how to obtain aid, benefits, services, or training;
- obtain aid, benefits, services, or training; or
- comply with legal requirements.

Examples of documents containing vital information may include, but are not limited to:

- applications;
- consent forms;
- complaint forms;
- notices of rights and responsibilities;
- notices regarding the availability of free language assistance;
- written tests that do not assess English language competency, but rather assess competency for a particular license, job, or skill for which English proficiency is not required;

- letters or notices that require a response from the individual, applicant, participant, or employee; and
- other documents required by law.

The Board shall ensure Babel notices are included on communications containing vital information, when appropriate, in English and Spanish, at a minimum.

The Board shall ensure translated information and language assistance services are made readily available in languages spoken by a significant number or portion of the population eligible to be served within the local workforce development area.

Babel notices and outreach information may be provided through:

- printed materials;
- websites and electronic communications;
- social media;
- radio or newspaper announcements; and
- other outreach methods.

The Board shall follow the guidance outlined in Attachment 1 of WD 02-19, Change 1, "Forms, Documents, and/or Electronic Communications that Require a Babel Notice," to determine when a Babel notice must be included on documents or communications containing vital information.

Language assistance services, including oral interpretation and written translation, shall be provided free of charge upon request to LEP customers. Staff shall inform LEP individuals that language assistance services are available at no cost.

Boards may use funds from programs that the customer shows an interest in or is enrolled in to pay for oral or written translation services.

When precise, complete, and accurate interpretations or translations are critical for adjudicatory or legal reasons, or when the competency of the interpreter requested by the LEP individual has not been established, the Board may provide an independent interpreter in accordance with 29 CFR §38.9(f)(3).

Staff who text or email their customers must include the Babel notice when the content of the email includes vital information.

Affirmative Outreach

- Workforce Solutions Offices and contractors shall implement outreach activities designed to reach protected populations.

- Outreach activities may include presentations, social media campaigns, community events, school partnerships, distribution of informational materials, participation in resource fairs, and collaboration with community-based organizations.
- Outreach efforts shall be documented and maintained for monitoring and compliance purposes.

Communication Aids

The Workforce Center staff takes advance actions to ensure that communication with individuals with disabilities is as effective as communication with others. The following communication aids are available for anyone requesting them upon verbal request, without requiring documentation:

Computers

- Screen magnification software
- Screen reading software
- Headphones/Speakers
- Qualified or Staff Readers
- Large print computer keyboards
- Speech Amplification
- Interpreters – Sign, Oral or Cued Speech (Staff/Contracted) Video Remote Interpreting Services
- Adjustable height computer tables with adjustable keyboard tray, worktables and chairs
- Large screen computer monitors
- Trackballs mouse

Telephones

- TTY phone
- Telephone with volume control and/or amplification devices to include handset amplifiers, large button & hearing aid compatible
- Video Text Display phones, Video Relay Interpreting Services (VRIS), Video Relay Services (VRS)

Printed Material

- Large print
- Written Materials for Orientations, Workshops, Training, etc.

Service Animals

- **Access:** Individuals with service animals shall be allowed to accompany the individual in all areas where program participants are allowed to go.

- Inquiries: Staff may only ask the following two questions if the need for a service animal is not obvious:
 - 1.** Is the service animal required because of a disability?
 - 2.** What work or task has the animal been trained to perform?
- No Documentation Required: Staff may not require documentation, certification, or proof of training for the service animal.
- Control of the Service Animal: The service animal must be under the control of its handler at all times (leash, harness, or voice control if necessary).
- Exclusion: A service animal may be excluded if:
 - It is out of control and the handler does not take effective action to control it.
 - It is not house broken.

In such cases, staff must offer the individual the opportunity to continue receiving services without the animal present.

- No Fees: No extra fees, deposits or surcharges may be imposed on an individual with a service animal.

Mobility Aids and Devices

- Individuals with mobility-related disabilities must be allowed to use **personally owned mobility aids and devices**, whether manually powered or battery-operated.

Other Power-Driven Mobility Devices (OPDMDs):

- The Board may make reasonable inquiries to determine whether an OPDMD can be safely allowed. Factors include:
 - Type, size, weight, speed of the device;
 - Design and operational characteristics of the facility;
 - Volume of pedestrian traffic;
 - Safety requirements.
- Staff must not:
 - Ask for proof of disability;
 - Restrict the use of a device unless it poses a legitimate safety concern;
 - Deny access based on assumptions or stereotypes about disabilities.
- No Surcharges:
 - Individuals must not be charged extra fees or subjected to unequal treatment for using mobility devices or service animals.

Requirements for Web and Mobile Based Accessibility:

As per ADA Title II rule on web content and mobile app accessibility, the board will make every effort to comply with accessibility requirements that is made available, directly or through contractual, licensing, or other arrangements.

Harassment and Hostile Environment Reporting and Complaint Procedure:

Any individual who believes they have been subjected to harassment or a hostile environment may report the incident to: Equal Opportunity Officer

All complaints will be reviewed promptly and confidentially to the greatest extent possible. Retaliation against any individual for reporting harassment or participating in an investigation is strictly prohibited and constitutes a violation of this policy.

Corrective action will be taken when harassment is found to have occurred, up to and including termination of contracts or services, discipline, or other appropriate remedies.

Discrimination Complaints Procedure:

Complaints must be written and contain:

- The complainant's name and contact information
- The identity of the respondent (individual or organization)
- A description of the alleged discriminatory act(s), including date(s)
- The complainant's signature or that of their authorized representative

The Board will issue a written Notice of Final Action within **90 days** of complaint receipt. If no Notice is issued within this timeframe, or if the complainant is dissatisfied with the outcome, they may file directly with the CRC within **30 days** of the due date or decision.

Serving Individuals with Disabilities:

Key responsibilities include:

- Ensuring effective communication with individuals with disabilities, including the provision of appropriate auxiliary aids and services, where necessary;
- Administering programs and activities in a manner that does not directly or indirectly limit the participation of individuals with disabilities;

- Modifying policies, practices, and procedures to avoid discrimination, unless such modification would fundamentally alter the nature of the service, program, or activity;
- Providing reasonable accommodations and modifications to enable equal opportunity for individuals with disabilities to participate in and benefit from WIOA-funded services and activities;
- Ensuring that electronic and information technology used in the delivery of services is accessible to individuals with disabilities.

This policy applies to all staff, contractors, and subrecipients involved in the administration and delivery of WIOA Title I-funded services. Ongoing training and technical assistance will be provided to ensure compliance and support inclusive practices.

Sample Babel Notice

English:

This document contains vital information about requirements, rights, determinations, and/or responsibilities for accessing workforce system services. Language services, including the interpretation/translation of this document, are available free of charge upon request.

Spanish:

Este documento contiene información importante sobre los requisitos, los derechos, las determinaciones y las responsabilidades del acceso a los servicios del sistema de la fuerza laboral. Hay disponibles servicios de idioma, incluida la interpretación y la traducción de documentos, sin ningún costo y a solicitud.

Vietnamese:

Tài liệu này có thông tin quan trọng về các yêu cầu, quyền hạn, quyết định, và/hoặc trách nhiệm để sử dụng các dịch vụ của hệ thống nhân lực. Các dịch vụ trợ giúp ngôn ngữ, bao gồm thông dịch/chuyển ngữ tài liệu này, có sẵn miễn phí khi quý vị yêu cầu.

Incident Reporting Procedures:

In accordance with TWC WD Letter 01-26, Workforce Solutions Middle Rio Grande Board and its contractors must report incidents involving Workforce Solutions Office staff members, customers, facilities, or Board operations. Reportable incidents include, but are not limited to:

- Physical assault

- Property crimes such as vandalism or theft
- Events involving law enforcement
- Inappropriate sexual behavior
- Any incident that could result in negative media attention
- Any breach or reasonably assumed breach of personally identifiable information (PII)
- Any unplanned or unwanted event that results in injury, loss of life, or property damage
-

Appropriate staff must immediately notify management upon becoming aware of a reportable incident. Within 48 hours of the incident, or within 24 hours if law enforcement is involved, appropriate staff must:

- Complete the TWC Risk and Security Management (RSM) Incident Report Form in its entirety;
- Include employee contact information and all known incident details;
- Provide relevant supporting documentation, when available; and
- Submit the Incident Report Form and supporting documentation by encrypted email to the designated TWC reporting entity.

If an incident is considered urgent or has the potential to negatively impact public trust, stakeholder confidence, or the reputation of the Texas Workforce Commission, Workforce Solutions Middle Rio Grande Board, or its contractors, appropriate staff must immediately notify management and follow all emergency reporting procedures.

Updated information, supporting documentation, witness statements, media materials, or additional records related to the incident must be submitted as they become available. All incident-related information shall be handled confidentially and maintained in accordance with applicable federal and state confidentiality requirements. Reference:

- TWC WD Letter 01-26, Reporting Incidents Involving Texas Workforce Commission and Workforce Solutions Office Staff Members and Customers

Corrective Action Plans and Sanctions:

Specific guidelines for imposing corrective actions plans and sanctions based on Equal Opportunity noncompliance, can be found in the WD 18-07, Change 2, Discrimination Complaint Procedures – Update, and or as with other noncompliance, in the Texas Administrative Code (TAC), Title 40, Part 20, Chapter 802, Subchapter G, Corrective Actions, §§ 802.121 – 802.125.

Reasonable Accommodations and Modifications

Customer Request

Customers with accommodation or modification needs seeking workforce services may direct their request to any staff person they come in contact with, including an Employment Counselor or Personal Services Representative. If the accommodation or modification is not readily available or requires additional consideration to determine whether an undue hardship or fundamental alteration would occur, the request will be forwarded to the Workforce Board Executive Director or other appropriate person the Executive Director may designate who will engage in an interactive process with the customer requesting the accommodation or modification and who will make an individual determination about the request.

An individual with a disability is not required to accept an accommodation, aid, benefit, service, training, or opportunity that the individual chooses not to accept. Also, it is prohibited to place a surcharge on an individual or group of individuals with disabilities to cover the cost of measures such as accommodation request, auxiliary aids, or program accessibility.

Interactive Process

The Equal Employment Opportunity Commission (EEOC) recommends that employers use an "interactive process" when customers or employees make an accommodation request. This simply means that both parties, the workforce center management/employer and the person with disabilities who requests the accommodation, work together. The following steps for implementing the interactive process comes from the Job Accommodation Network's (JAN) Effective Accommodation Practices Series. Their document was developed and funded by a contractual agreement from the U.S. Department of Labor, Office of Disability Employment

Step 1: Recognizing an Accommodation Request

The interactive process starts with an accommodation request from an employee with a disability, so it is important for employers to be able to recognize a request. So, what constitutes an accommodation request? According to the EEOC, an individual may use "plain English" and need not mention the ADA or use the phrase "reasonable accommodation" when requesting an accommodation. Therefore, any time an employee indicates that he/she is having a problem, and the problem is related to a medical

condition, the employer should consider whether the employee is making a request for accommodation under the ADA.

The EEOC (Reasonable Accommodation and Undue Hardship (EEOC Guidance) at <http://www.eeoc.gov/policy/docs/accommodation.html>) provides the following examples:

Example A: An employee tells her supervisor, "I'm having trouble getting to work at my scheduled starting time because of medical treatments I'm undergoing." This is a request for reasonable accommodation.

Example B: An employee tells his supervisor, "I need six weeks off to get treatment for a back problem." This is a request for reasonable accommodation.

Example C: A new employee, who uses a wheelchair, informs the employer that her wheelchair cannot fit under the desk in her office. This is a request for reasonable accommodation.

Example D: An employee tells his supervisor that he would like a new chair because his present one is uncomfortable. Although this is a request for a change at work, his statement is insufficient to put the employer on notice that he is requesting reasonable accommodation. He does not link his need for the new chair with a medical condition.

Tips:

- **Err on the side of caution:** If an employer is not sure whether an employee has requested accommodation, the employer should ask the employee to clarify what is being requested and why.
- **Act quickly:** Once an accommodation request is identified, the employer should respond immediately – unnecessary delays in processing an accommodation request can violate the ADA.
- **Assign responsibility:** Employers should assign at least one person who is responsible for making sure an accommodation request is processed so the request is not lost on someone's desk.
- **Conduct training:** Employers should train all managers and supervisors to recognize accommodation requests and what to do with a request once it is received.

Step 2: Gathering Information

Once an accommodation request has been received, the employer should gather whatever information is necessary to process the request.

Necessary information may include documentation of the disability and need for accommodation. In some cases, the employee's disability and need for accommodation are obvious and no additional information is needed. For example, if an employee who recently started using a wheelchair indicates that he needs a ramp to get into the workplace, the disability and need for accommodation are obvious.

However, in other cases the individual may know that he/she is having difficulty but may be uncertain about the exact cause or possible solution. For example, if an employee with a non-visible disability indicates she is having trouble completing her work tasks because of her disability, the employer does not have enough information to provide effective accommodations. The employer needs to know what limitations interfere with job performance and what specific work tasks are at issue.

So how should an employer get the information that is needed? The employee who requested the accommodation is often the best source of information about the disability and possible accommodations. If the employee cannot provide the necessary information, then medical documentation can be useful. The important thing for employers to remember is not to ask for too much information. Under the ADA, when an employee requests accommodations and the disability and need for accommodation are not obvious, then the employer can request medical documentation to help determine whether the employee has a disability and needs the requested accommodation and information to help process the accommodation request.

Tips:

- **Find out the limitation and problem.** In most cases, to find effective accommodations employers need to know what limitation is causing what problem so this is usually a good place to start.
- **Get information from the employee when possible.** Employees with disabilities are familiar with their limitations and often know what accommodations will work best for them.
- **Remember ADA rules for medical inquiries.** A good policy for employers is to only ask for what is necessary. Asking for all medical records will rarely, if ever, meet this test.

Step 3: Exploring Accommodation Options

Once the employer has identified the employee's limitation that is causing a problem and has identified what that problem is, then the employer is ready

to explore accommodation options. At this step, employers should be open to new ideas and new ways of doing things. This is the time to brainstorm and consider what might work.

Again, the employee who requested the accommodation is a good place to start so employers should always invite the employee to suggest accommodations. If more accommodation ideas are needed, the employer can ask the employee's medical provider for ideas – in some cases medical professionals are able to suggest effective accommodations. In other cases, they may not be able to suggest ideas but may be able to say whether ideas under consideration will help overcome the employee's limitations.

And if still more ideas are needed, then the employer should consult with outside resources such as JAN, vocational rehabilitation, rehabilitation engineers, and disability-related organizations. Remember when consulting with outside resources, employers must comply with the confidentiality rules of the ADA. One good approach is to withhold the employee's name and identifying information from outside resources.

Tips:

- **Keep an open mind.** Accommodations are about doing things differently to help overcome disability-related limitations, so keep an open mind when exploring accommodation options.
- **Invite the employee to suggest accommodations.** The employee who requested the accommodation may have some good accommodation ideas but may be hesitant to bring them up without being asked to do so.
- **Ask the employee's medical provider for ideas.** Some medical professionals will brainstorm accommodation ideas with employers.
- **Use JAN when needed.** JAN is a free, national resource for employers who are seeking help coming up with accommodation ideas.

Step 4: Choosing an Accommodation

Once accommodation options have been explored, the employer must choose what accommodation to implement. If there is more than one option, the employer should consider the preference of the employee. However, the employer gets to choose among effective options and can choose, for example, the lowest cost accommodation.

Sometimes employers are not sure whether an accommodation will work and are afraid if they try it out, they will be locked in forever. This is not the case – employers are free to try accommodations and stop them if they do not work. One thing employers might want to do when testing accommodations is to make a written agreement with the employee that the accommodation is being tested, how long the test will be, and what will happen if the accommodation does not work. That way, no one is surprised when the accommodation is revisited down the road.

Tips:

- **Consider the employee's preference.** Although not required by the ADA, when possible employers should choose the accommodation the employee prefers.
- **Consider a trial period.** When it is not clear whether an accommodation will work, it might be possible to try out the accommodation.

Step 5: Implementing the Accommodation

Once accommodation has been chosen, it is time to implement the accommodation. This step is very important to the success of accommodation. If equipment is involved, then it needs to be properly installed, and the employee needs to be trained in its proper use. If the accommodation involves a schedule change or policy modification, then certain managers or supervisors may need to know of the change to effectively implement it. If the accommodation involves an outside service, someone needs to make sure the service is provided promptly and effectively. If the accommodation is a reassignment, then the employee may need time to acclimate to the new job.

Tips:

- **Make sure all necessary steps are taken to implement the accommodation.** A good way to do this is to check to see if the accommodation is actually working.
- **Communicate with essential personnel about the accommodation.** Remember ADA confidentiality rules and only let managers and supervisors know about the accommodation if necessary.

Step 6: Monitoring the Accommodation

An important but often forgotten part of the interactive process is monitoring accommodations after they are in place. In some cases, an accommodation stops being effective for various reasons such as: the employee's limitations change, workplace equipment changes, the job changes, the workplace itself changes, or the accommodation becomes an undue hardship for the employer.

Equal Opportunity is the Law Notice added to Personnel Policies and Procedures: Equal Opportunity Is the Law Notice. It is against the law for this recipient of Federal financial assistance to discriminate on the following bases: against any individual in the United States, on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief; and against any beneficiary of programs financially assisted under Title I of the Workforce Investment Opportunity Act of 1998 (WIOA), on the basis of the beneficiary's citizenship/status as a lawfully admitted immigrant authorized to work in the United States, or his or her participation in any WIOA Title I-financially assisted program or activity.

The recipient must not illegally discriminate in any of the following areas: deciding who will be admitted, or have access, to any WIOA Title I-financially assisted program or activity; providing opportunities in, or treating any person with regard to, such a program or activity; or making employment decisions in the administration of, or in connection with, such a program or activity. This notice is provided to applicants for employment and to employees. A signed acknowledgement will be retained in the employee personnel file.

The following administrative policies are incorporated into the ADMIN01 Chg. 1 policy:

- Limited English Proficiency
- Babel Notice
- EO Monitoring Policy
- Alternative Dispute Resolution

EFFECTIVE DATE:

June 11, 2026

INQUIRIES: If you have questions regarding this policy, please contact rosalind.lozano@wfsmrg.org



WORKFORCE SOLUTIONS MIDDLE RIO GRANDE

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POLICY LETTER

ID NO: ALL12 Chg 7

DATE ISSUED: June 11, 2026

TO: Workforce Solutions Middle Rio Grande Contractors

FROM: Rosie Lozano, Executive Director

SUBJECT: Access and Data Security for Workforce Applications

PURPOSE:

The purpose of this policy is to provide Workforce Solutions One Stop Contractor with policy regarding computer-based automation security and providing other agencies and community partners with access and connectivity to Workforce Case Management System (WFCMS) and RACF that contain **Personally Identifiable Information (PII)**.

REFERENCES:

WD Letter 11-16

POLICY:

Boards must ensure that the contractors protect customers' PII. TWC's Information Security strategy is to comply with National Institute of Standards and Technology (NIST) requirements from moderate systems and, as applicable, cybersecurity and information security industry best practices.

The Contractor must comply with assuring that all PII information is kept confidential and secure. That all PII is collected, used and stored in a manner that will not be accessible to unauthorized personnel.

The Board will:

- Determine, assign, and secure WFCMS computer access codes for board Staff, Workforce Solutions Office Staff, workforce service provider staff, and staff from other agencies or community partner to perform assigned

job duties, including changing or resetting users' local passwords and administering Resource Access Control Facility (RACF) security adds, changes, and deletes for users

- Ensure that users are aware of and comply with TWC's data security requirements; and understand that under no circumstances are usernames, identification codes, passwords, or any other access security codes to be used by anyone other than the user to whom they are assigned and are not to be disclosed to anyone
- Ensure that users understand they are responsible for any actions completed in WFCMS under the use of their access security codes
- Require all users with access to WFCMS complete and annually sign the TWC Information Resources Usage Agreement, Form P-41, available on TWC's Information Technology SharePoint **by the end of October.**
- Maintain a signed copy of the most recent form P-41 for each user ~~per the form P-41 instructions~~, available on TWC's Intranet
- Maintain a signed copy of the most recent System Access Report for Other Agencies and Community Partners, Form P-48

Additionally, Boards must be aware that this reporting requirement does not apply to the access provided to Board staff, Workforce solutions Office staff, workforce service provider staff, or Texas Veterans commission (TVC) staff, Boards must also be aware that form P-41 applies to all TWC staff, Board staff, Workforce Solutions staff, workforce service provider staff, Texas Veterans Commission (TVC) staff, and staff from all other entities with access to WFCMS.

When providing access to WFCMS, Boards must use a strict "need to know" standard for other agencies and community partners with a valid need, as determined by the Board and in accordance with the Texas Workforce Commission Information Security Standards and Guidelines. In WFCMS, other agencies' and community partners' access to customer information is limited to "read only" or "edit" as required to perform assigned duties previously agreed upon by the Board.

Boards must ensure that information obtained from WFCMS or RACF (i.e., participant information) is not republished or redistributed.

Boards must be aware that access to WFCMS Web Reports is:

- Authorized only for Board staff, Workforce Solutions Office staff, workforce service provider staff, and TVC staff; and
- Not authorized for any other partners.

Boards must monitor and evaluate access to WFCMS and terminate or adjust other agencies' or community partners' access if their need is no longer valid.

Granting Access:

1. WFCMS access form must be completed with a copy of the Job Description.
2. Must submit a completed P-41 AND a Cyber Security Awareness training and submit the certification for each employee.

Termination of Access:

1. The Contractor will designate a point of contact that will provide information about the termination of staff to the WFCMS Administrator.
2. The Contractor will be responsible for notifying the WFCMS Administrator no later than 4:00p.m. on the last suffer day for all employees.
3. Contractor will send an email to the WFCMS Administrator with the last day employee will be at the center AND the official termination date immediately upon notification. Must also provide a reason for termination of rights. This must be done via email for audit trail.
4. Contractor will send an email to the WFCMS Administrator if an employee has a change in job title and /or job description by close of business on the date recorded on the Personnel Action Form (PAF).
5. The board will have 24 hours to inactivate WFCMS rights from date of termination.

Boards must consider their level of oversight and the partners' supervisory authority over staff when determining whether access is required and what training must be provided.

Boards must ensure that partner staff receives applicable training prior to granting editing access to WFCMS.

EFFECTIVE DATE:

October 1, 2024

RECISSIONS:

ALL12 Chg3

INQUIRIES:

If you have questions regarding this policy, contact rosalind.lozano@wfsmrg.org



WORKFORCE SOLUTIONS MIDDLE RIO GRANDE

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POLICY LETTER

ID NO: ALL 10 Chg. 3

DATE ISSUED: June 11, 2026

TO: Workforce Solutions Middle Rio Grande Contractors

FROM: Rosie Lozano Executive Director

SUBJECT: Quality Assurance Policy

PURPOSE:

The purpose of this policy is to provide procedures regarding quality assurance and monitoring for all entities funded by Workforce Solutions Middle Rio Grande (WFSMRG)

REFERENCES:

Texas Government Codes 2308.302 (a) & (b)
Texas Workforce Commission (TWC) Rules, Chapters 800, 802, and 841
~~Financial Manual for Grants and Contracts, Chapters 17, 19, 20, 21 and~~
Appendix K **Agency Board Agreement**

POLICY:

Quality Assurance Monitoring Procedures

General Provisions:

- Monitoring and oversight will be conducted for all WFSMRG-funded Workforce Program **including Migrant Seasonal Farm Worker** and Child Care programs and activities.
- WFSMRG may elect to adjust the monitoring process as needed to ensure that resources are used efficiently and effectively.
- All concerns identified during a monitoring visit will be classified as either a Finding or Observation. Depending on the frequency or severity, repeat observations could lead to a finding in subsequent monitoring reports; therefore, Contractors are encouraged to respond to observations.

- A summary report will be provided with recommendations and program quality enhancements.
- Monitoring instruments and forms will be standardized for use in the monitoring of all workforce and child care programs. Monitoring activities will be implemented in a consistent manner.
- Documentation on all Findings/Observations identified in the monitoring reviews, including work papers and correspondence resulting from the review will become part of the monitoring file of each Contractor. Policies will be provided to the Contractor upon approval from the Board of Directors. The Contractor will have 5 days to provide the Executive Director of the Board a draft of the procedures to correlate with the policy. The Board will have 5 days to review procedure and deny/accept procedure. All procedures must meet Boards approval. After approval, the Contractor will have 3 days to distribute procedures with instructions/clarification to staff. Documentation must be retained.

Types of Monitoring Reviews:

- Programmatic Monitoring
- Performance Monitoring
- Risk Assessment

Formal Monitoring Review: Formal monitoring reviews of Contractors will occur on a bi-monthly basis. They could also be done at any time for monitoring efforts to be effective in identifying problem areas before they become liabilities.

Follow-up Monitoring Review: Follow-up reviews may be conducted as necessary to ensure that adequate corrective action has occurred to resolve reported Findings/Observations, and that technical assistance is provided as needed. The sample size for follow-up monitoring will be sufficient enough to provide a representative assurance of the overall population served.

Programmatic Monitoring: Used to provide an in-depth examination of the quality and integrity of program activities and services being provided; and to ensure that programs achieve intended results.

Program monitoring activities may include, but are not limited to, review and evaluation of the one or more of the following:

- Program results and outcomes
- Performance measures
- Reporting accuracy and error rates
- Record keeping and WIT case maintenance
- Self-monitoring functions and activities
- Service delivery

- Automated systems and reporting; and
- Adherence to policies and procedures

Programmatic monitoring will be reported to the Board at the next available meeting. Report will include but not be limited to:

- # of files reviewed
- Accuracy and error rates
- Summary of the types of errors
- List of recommendation provided to the Contractor

Performance Monitoring: Reviews the Monthly Performance Report issued by TWC to monitor the performance status. Measures will indicate +P with a positive performance, MP for meeting performance and -P with a negative performance.

Performance Monitoring may include, but is not limited to, review and evaluation of all Re-employment and Employer Engagement Measures, Program Participation Measures and WIOA Outcome Measures. This review will consist of:

- Performance results and outcomes
- Forecasting
- Self-monitoring function and activities
- Adherence to policies and procedures

Risk Assessment: Designed to identify the Contractors risk (high, moderate, low) to WFSMRG, with both programmatic and financial aspects.

Monitoring Process:

Programmatic:

Step 1- WFSMRG will schedule and announce tentative dates of the monitoring visit. Copies of the monitoring instrument will be provided to the Contactor. An entrance briefing will be conducted with Contractor. Entrance briefing will include but not limited to: Period and Scope of Review;

Step 2- Prior to the start of a scheduled monitoring review, monitors may conduct a desk review, which will include, but is not limited to, the following:

- Contracts and contract modifications, including budgets, statement of work, etc.
- Contract reports (program and/or financial), requests for reimbursement, invoices etc.
- Previous monitoring reports
- Work papers resulting from the previous review
- WFCMS, WIT or Child Care Services data
- Correspondence between WFSMRG and the Contractor

Step 3 – Monitoring will be conducted utilizing instruments and forms developed by WFSMRG. Monitors may expand the review beyond the scope of the pre-established monitoring instrument, as necessary, to ensure program activities and systems are consistent with the intent of the applicable policy. Communication between the monitors and the contractor is important during the monitoring process. As the monitors identify any issues or have any questions during the review process, they will discuss them with Contractor staff. This provides an early opportunity to informally resolve any issues. If the issue has been successfully resolved, the finding will be downgraded to an observation. If it was an observation, it will be reflected in the final report with a comment that it has been resolved. An exit interview will be held with the management team. Exit will include but not be limited to the findings/observations, resolution and recommendation for improvement.

Step 4-

Monitors will provide a Draft monitoring report within 10 days of completion of all programs monitoring that identifies any Finding/Observations, including questioned or disallowed costs that were discovered during the review. This is the Contractor's opportunity to provide any documentation that may have been overlooked during the review. If an area of high-risk is identified during the review, Contractors will be required to take immediate action. WFSMRG will also establish a 10-calendar day deadline for a written response to the draft monitoring report. If a response is not submitted by the deadline, Step 5 will be omitted, and the report will move on to Step 6.

Step 5- Following receipt of the Contractor's response to the draft monitoring report, it will be evaluated by the designated WFSMRG Workforce Monitor that is responsible for review of the program. All information/documentation submitted will be evaluated to ensure the Contractor has taken steps to strengthen program deliverables and meet contractual obligations. A follow – up review will be conducted by WFSMRG to ensure the responses provided by the Contractor resolved the issues identified in the draft report. An error rate of greater than 10% will require the Board to follow up on corrective action within 30 days.

Step 6- The final report will identify any outstanding or unresolved issues that were not cleared up with the Contractor's initial response. Once the Board staff concur with the report, a cover letter will be attached to the Final report that includes expectations on required follow-up and deadline for completion. The final report will identify resolved and unresolved issues along with the Contractor's initial responses and resolutions and be presented to the Board.

DISALLOWED COST: The Contractor will have 72 hours from the discovery of a finding/observation of a potential disallowed cost and ten (10) business days for all other items to resolve the issue(s).

In the instances where a disallowed cost is determined, the Board will provide the Contractor with an official notification of the dollar amount and a timeframe of when payment will be due to the Board. Repayment cannot be from State or Federal funds. **In the instance that the Contractor fails to reimburse the Board with disallowed cost by the set timeframe, The Board can exercise the following options:**

- 1. Sanction**
- 2. Reduction of Budget**
- 3. Non-renewal of the contract for the following year.**

Performance Monitoring:

The Monthly Performance Report (MPR) is an instrument provided by the Texas Workforce Commission to assess whether the Contractor is meeting the required performance measures. Contractors will need to be Meeting or Exceeding each measure.

The Contractor is required to analyses the MPR regularly to identify measures that are not being meet and to identify all clients that failed to meet the measure. The Board will follow up with a review of the MPR.

Corrective Action

Program Monitoring:

Corrective action for results of monitoring:

First time finding is identified – Mandatory one on one training by the Contractor with case manager. Documentation must be submitted to the Board with agenda, sign in and date of training.

Repeat finding from previous monitoring - the Board will have one-on-one training with the Contractor's Quality Assurance team to determine the weaknesses in quality reviews.

If the repetitive findings continue, the Board staff will present to the Board of Directors a recommendation that the Contractor be put on a probationary period, with conditions to be set by the Board of Directors.

Once Contractor has demonstrated 4 months (2 monitoring's) with less than a 10% error rate, the Board will deem the Contractor being out of the corrective action.

Performance Monitoring:

Corrective Action plan for failure to meet performance measures:

Upon release of Monthly Performance Report (MPR), failure to meet performance measures will result in the Contractor being required to submit to the Board within 10 days of release of MPR an analysis of the failed measure which will include an extracted excel spreadsheet that identifies all clients not meeting and follow up notes of each client not in the numerator.

If by the next quarter the Contractor is still failing the same measure, the Board will have a mandatory training with the Contractor's Quality Assurance Team.

If by the 3rd quarter the Contractor is still failing the same measure, the Board will place the Contractor on a **Technical Assistance Plan (TAP)**. A Technical Assistance Plan will outline proposed strategies on meeting the measure. The Contractor will remain on a TAP until the failed measure is meeting 100% of the performance target for three (3) consecutive months.

If by the 4th quarter the Contractor is still failing the same measure, the Board staff will bring to the Board of Directors with a recommendation that Contractor be put on a probationary period, with conditions to be set by the Board of Directors.

If the Contractor falls below 50% on the MPR, Board staff will bring to the Board of Directors with a recommendation that Contractor be put on a probationary period, with conditions to be set by the Board of Directors.

Risk Assessment:

The Risk Assessment is presented to the Board of Directors on a yearly basis to determine the risk assigned to the Contractors/Programs with a point value assigned to each of the categories being evaluated. Risk assessment may be used as a tool in assessment of renewal of contracts. This risk assessment is designed to:

- Identify those Contractors that pose the highest risk to WFSMRG, therefore require more frequent monitoring.
- Identify program areas that pose the highest risk to WFSMRG, therefore require in-depth reviews.
- Identify and minimize serious problems from arising at the Contractor level.
- Identify instability in the management environment and large turnovers in their workforce.
- Ineffective or inefficient management controls.
- Significant gaps between expected and actual results.

- Large commitments of State and Federal resources.
- Complex information systems used for tracking program status for clients.

There are two components of the risk assessments that will be conducted for each contract annually, they are:

- Inherent Risk is the susceptibility of material non-compliance with a compliance requirement assuming that there were no related internal control problems.
- Control Risk is the risk that material errors or irregularities will not be prevented or detected by the internal control structure. The Assessment Tool will determine the overall evaluation of a contractor's risk assessment which will be used to focus on the more critical Contractors/Programs.

There are three general categories or risk:

- Low risk
- Moderate risk
- High-risk

A Contractor may be classified as high-risk or may have areas of high-risk, e.g., intake. Program staff may be asked for input on the risk assessment. The risk assessment will dictate the monitoring scope and frequency for each Contractor. However, assessing risk is an ongoing process and the monitoring plan or scope will be adjusted accordingly as issues arise. If a Contractor is determined to be in high-risk or moderate-risk status. They will be notified in writing and will be informed on how the determination was made; and how it will affect the monitoring plan.

In determining the risk assigned to Contractors/Programs a point value will be assigned to each of the categories being evaluated. A value of "2" will indicate the risk is low. A value of "4" will indicate moderate-risk, and a value of "6" will indicate high-risk.

The points assigned to each category will be summed in the Risk Assessment Tool. A score of 50 or less indicates that the risk is low. It is a fair assumption that this Contractor/Program will be successful. A score between 51 to 70 points will indicate moderate risk. Careful reviews during the monitoring process will be conducted to ensure compliance. A Contractor/Program whose score is 71 points or higher will be considered high-risk and will be subject to more frequent and intense monitoring and evaluation activities. The Monitors will collaborate with Board Staff to evaluate the following areas annually.

INHERENT RISK

Program Size to Total Federal Assistance Received

- 2 (Low)- Program dollars are more than 5% or less of total funds.
- 4 (Moderate)- Program dollars are more than 15% but less than 50% of total funds.
- 6 (High) – program dollars are 50% or more of total funds.

Data Sources: WFSMRG Contracts and Independent Audit Reports

Newness of Contractor to program

- 2 (Low) – Operating for 3 or more years and experienced no significant changes.
- 4 (Moderate) – Operating for at least 1 year but less than 3 years without significant changes.
- 6 (High) – Less than 1 year of operating or has experienced significant and complex changes.

Data Sources: RFP Response, Federal Regulations, and WFSMRG Contracts and Procurement Department

Timelines and Accuracy of Program Reporting

- 2 (Low) – Reports were timely and error free during last program year.
- 4 (Moderate)- Reports have been late or had minor errors during last program year.
- 6 (High)- Reports have been late several times and/or contained major errors during last program year.

Data Sources: Previous Monitoring Reports, Independent Audits, Report Submissions.

Prior Compliance Issues

- 2 (Low)- There have been minimal Observations and Findings in the last program year with no questioned or disallowed costs.
- 4 (Moderate)- Experienced minor instances of Observations and Findings with minimal questioned or disallowed costs in the last program year.
- 6 (High)- Experienced Significant Findings in the last program year with questioned or disallowed costs.

Data Sources: Independent Audit Reports, Prior Monitoring Reports, State Auditor Reports, Office of Inspector General Reports, Random Samples.

Personnel Turnover

- 2 (Low)- Little or no turnover in the last program year.
- 4 (Moderate)- Some turnover in the last program year that impacts key areas.

- 6 (High)- Significant turnover in key personnel in the last program year which could have significant impact on the program

Data Sources: Periodic inquiry of Contractor's Quality Assurance staff, Communication with other Departments within WFSMRG of staffing during desk reviews.

Effectiveness of Internal Monitoring

- 2 (Low)- An effective internal monitoring function is in place. Written policies and procedures are available, as well as evidence that internal monitoring had been conducted regularly during the last program year.
- 4 (Moderate)- Policies and procedures are available, but internal monitoring has not been conducted on a regular basis in the last program year.
- 6 (High)- No written policies and procedures are available; evidence of internal monitoring is not available for last program year.

Data Sources: On –site monitoring, written internal reports, and inquiries

Complaints and Official Monitoring

- 2 (Low)-There were no unresolved complaints in the last program year that required WFSMRG or TWC intervention.
- 4 (Moderate)- There were complaints received by WFSMRG or TWC in the last program year, that upon investigation, were not warranted.
- 6 (High)- There have been a significant number of complaints in the last program year that have warranted investigations due to possible fraud, abuse, discrimination or other irregularities.

Data Sources: TWC Program Monitors, TWC Office of Investigation, legislature Inquiries, EEOC reviews.

Performance Measures

- 2 (Low)- The Contractor has met targeted performance outcomes on a consistent basis in the last program year.
- 4 (Moderate)- The Contractor has failed to meet 2 or more performance measures in the last program year.
- 6 (High)-The Contractor has failed to meet 3 or more performance measures in the last program year.

Data Sources: WFSMRG Performance Reports, TWC Performance Reports, other funding Source Performance Reports.

CONTROL RISK

Adequacy of Policies and procedures

- 2 (Low) – In-depth policies in place and enforced.
- 4 (Moderate)- Policies in place with occasional minor infractions.
- 6 (High)- Policies do not meet the standard.

Data Sources: Internal Monitoring Reports, WFSMRG Monitoring Reports, TWC Monitoring Reports, Audit Findings

Management's Knowledge of Laws and Regulations

- 2 (Low)- Fully understands all laws and regulations that pertain to the contract.
- 4 (Moderate)- Familiar with all laws and regulations that pertain to the contract and can normally find answers to identified contractual issues.
- 6 (High)- Does not understand all laws and regulations that govern their contract.

Data Sources: Audit Agencies, TWC Monitor Reports, WFSMRG Monitor Reports

Segregation of Duties

- 2 (Low)- Workload evenly divided with no more than 2 layers of direct supervision.
- 4 (Moderate)- Some inequities in workload with 3 layers of direct supervision.
- 6 (High)- A few carrying the workload of others with no clear supervision chain.
- Data Sources: Audit Reports, TWC Monitoring Reports, WFSMRG Monitoring Reports, Internal Monitoring Reports.

Experience Level of Management

- 2 (Low)- Management has over 3 years of experience on current contract.
- 4 (Moderate)- Management has 2-3 years of experience on current contracts.
- 6 (High)- Management has less than 2 years of experience on current contract.

Data Sources: Contract Files, Reviews RFPs, Review Contract Proposals

Extent of Management Reviews/External Monitoring

- 2 (Low)- Very in-depth/Effective timely reviews with follow-up action on identified deficiencies during last program year. Routinely reviews program activity and reports and is timely in making any needed action.
- 4 (Moderate)- Sporadic in-depth/Effective timely reviews conducted with some follow-up on identified deficiencies during last program year. Routinely reviews reports but may not always do follow up.
- 6 (High)- No record of any management reviews being conducted during last program year. Management is not aware of program activities or doesn't take appropriate action when needed.

Data Sources: Audit Reviews, TWC Monitoring Reports, WFSMRG Monitoring Reports, Internal Monitoring Reports.

Responsiveness/Availability of Senior Staff

- 2 (Low)- Senior Staff will respond timely, will meet deadlines and are accessible and available.
- 4 (Moderate)- Senior Staff will usually respond timely, usually meet deadlines and are accessible and usually available.
- 6 (High)- Senior Staff do not respond timely, usually miss deadlines and are usually unavailable or accessible.

Data Sources: WFSMRG Contracts, WFSMRG Correspondence, Internal Monitoring Reports

Training and Staff Development

- 2 (Low)- On going training is provided and/or training is provided based on identified needs.
- 4 (Moderate)- There is periodic training for management and/or staff.
- 6 (High)- There is no training for management and/or staff.

Data Sources: Audit Reviews, TWC Monitoring Reports, WFSMRG Monitoring Reports, Internal Monitoring Reports

Other

- The contractor did not have any issues.
- The contractor had some issues to cause concern as described in the comments.
- The contractor had several issues to cause concern as described in the comments.

Data Sources: WFSMRG Contracts, WFSMRG Performance Reports, Review RFP

EFFECTIVE DATE:

06/11/2026

RECISSIONS: ALL10 Chg. 3

INQUIRIES:

If you have questions regarding this policy, please contact
rosalind.lozano@wfsmrg.org



WORKFORCE SOLUTIONS MIDDLE RIO GRANDE

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POLICY LETTER

ID NO: ALL06 Chg. 1

DATE ISSUED: June 11, 2026

TO: Workforce Solutions Middle Rio Grande Contractors

FROM: Rosie Lozano, Executive Director

SUBJECT: Handling, protection **and retention** of Personally
Identifiable Information PII

PURPOSE:

To provide guidance on compliance with requirements for handling and protecting Personally Identifiable Information (PII). Federal law, OMB Guidance, and Departmental and ETA policies require that PII and other sensitive information be protected. ~~TEGL No. 39-11 is being released to Workforce Solutions Middle Rio Grande Contractors as a reference and to assist in clarifying TWC's and WFSMRG's expectations related to the acquisition, handling, and transmission of PII.~~

REFERENCE:

Training and Employment Guidance Letter (TEGL) No. 39-11; **WD 02-18, Chg. 1 Handling Sensitive Personal Information and Other Confidential Information**; Financial Manual for Grants and Contracts, Ch. 22

POLICY:

WFSMRG has established that for the purpose of Federal, State, and local record retention requirements, all financial, administrative, statistical, property, applicant, and program participant records and supporting documentation must be retained for a period of at least three (3) years subsequent to the date of submission of final grant expenditure report. If

any litigation, claim, or audit is started before the expiration of the three (3) year period, the records must be retained until all litigation, claims, or audit findings involving the records have been resolved and final action is taken.

Custody of Records

To avoid duplicate recordkeeping, WFSMRG may make special arrangements with ~~Contractor sub-recipients~~ to retain any records, which are continuously needed for joint use. WFSMRG may request transfer of records to its custody when it determines that the records possess a long-term retention value.

Disaster Recovery

Occasionally, records are destroyed by fires, vandalism, or natural disasters such as floods, storms, and earthquakes. ~~Contractor Recipients/sub-recipients~~ must have a satisfactory plan of record recovery if critical records are lost.

Confidentiality and Security of Program Participant Records

~~WIOA and its associated regulations requires~~ WFSMRG require that all applicant and program participant personal information is and remains confidential. Appropriate efforts must be taken to protect the confidentiality of personal information that is attributable to any specific individual (e.g., address, social security number, telephone number, etc.). It is the policy of WFSMRG to ensure that program participant personal information is collected, used, and stored in a manner that will not be accessible to unauthorized personnel ~~as per FISCAL22 policy~~.

Personal information is not to be collected unless it is needed ~~for the provision of WIOA Title I services or~~ to determine eligibility or for a specific program ~~requirement. WIOA Title I program~~. This information may not be used for any purpose other than the program or service for which it was collected unless the applicant or program participant (if the individual is an adult) or a parent or legal guardian of the applicant or program participant (if the individual is a minor or dependent) gives specific written consent for the information to be shared. The applicant or program participant may receive a copy of any information collected from them at their request.

Additional Requirements

WIOA Title I complaint/grievance records and actions related to resolving complaint/grievance shall be maintained for not less than five (5) years from the date of resolution of the complaint/grievance. In addition,

~~Contractor recipients/sub-recipients of WIOA Title I funds~~ must follow the requirements of 29 CFR Part 38, as these regulations apply to the entire organization ~~receiving WIOA Title I funds~~. These records shall be maintained as a whole record system.

In implementing record retention policies/procedures, ~~Contractor sub-recipients~~ must follow Federal, State and local requirements. However, ~~Contractor sub-recipients' policies/procedures~~ cannot be less restrictive than WFSMRG established requirements.

Litigation/ Audit records are to be retained beyond the prescribed period if any litigation or audit has begun, or if a claim is initiated involving the grant or agreement covered by the records. In these instances, the records must be retained until resolution of the litigation, audit, or claim and final action is taken; or until the end of the regular five (5) year record retention period, whichever is later. Failure to obtain an audit extends the record retention requirement indefinitely. A delay in obtaining an audit or in resolving audit findings extends the record retention period until all audit requirements have been satisfied and all findings have been resolved to the satisfaction of the awarding agency.

~~Contractor Sub-recipients~~ must coordinate all record disposal with the Board prior to taking any action. No record within the required retention period shall be destroyed. Prior written approval from the Board is required to destroy a record beyond the required retention period. A written request must be submitted to the Board for review and approval. ~~Request will consist of name, state ID number, program and exit date of each participant.~~ The required records retention period is extended if any litigation, claim, audit finding or any other administrative action is initiated. The required records retention period starts at the close of the litigation, claim, audit finding or any other administrative action. The ~~Contractor sub-recipient~~ must have written procedures for the appropriate and timely disposition of records.

Data security involves ensuring only authorized staff has access to electronic databases and paper files containing sensitive program participants' information. It is imperative that program participants' information is protected at all times. Program participants' information can only be released to third party agencies or entities if the program participant has authorized such release, or the custodian of the records is presented with a valid court order requesting information pursuant to legal action.

As part of their grant activities ~~Contractor sub-recipients~~ will have in their possession large quantities of Personally Identifiable Information (PII) relating to their organization and staff, ~~Contractor sub-recipients~~ and partner

organization and staff, and program participants. This information is generally found in personal files, program participant data sets, performance reports, program evaluations, grant and sub-award files and other sources.

~~Contractor Sub-recipients~~ must take aggressive measures to mitigate the risks associated with the collection, storage, and dissemination of sensitive data including PII.

Federal law, OMB guidance, and DOL/ETA regulations require that PII and other sensitive information be protected. To ensure that such PII is not transmitted to unauthorized users, all PII and other sensitive data transmitted via e-mail or stored in CDs, DVDs, thumb drives, etc., must be encrypted using a Federal Information Processing Standards (FIPS) 140-2 compliant and National Institute of Standards and Technology (NIST) validated cryptographic module. ~~Contractor sub-recipients~~ must not e-mail unencrypted sensitive PII to any entity, including ETA or contractors.

~~Contractor-Sub-recipients~~ must take the necessary steps to ensure the privacy of all PII obtained from program participants and/or other individuals to protect such information from unauthorized disclosure. PII must be maintained in accordance with established standards for information security described in TEGL 39-11

Record Destruction

~~Consistent with compliance matters related to data security and record retention, a secure process identifying requirements for the destruction of records must be in place.~~

~~The destruction of a record is prohibited when it is anticipated or known that such record is relevant or subject to, ongoing investigation or audit, legal proceeding, claim or an unresolved finding of noncompliance.~~

~~An official record may be destroyed only when the following criteria have been meet:~~

- ~~○ The Board has granted written approval for the destruction of such records,~~
- ~~○ There is not an anticipated or known audit or investigation, legal proceeding, claim or an unresolved finding of noncompliance, under which such record has become subject to,~~
- ~~○ The record has met the established retention period~~
- ~~○ An image of the record has been saved in an electronic recordkeeping system, which permits the retrieval of the information contained in the record and the reproduction of such records and~~

- It has been verified that the saved image of the record is accurate and meets minimum quality standards
- The destruction of a record shall be irreversible, which means that there will not be a risk of the record being recovered and reconstructed.
- All records shall be destroyed in a confidential manner by shredding.

Effective Date:

August 15, 2019

RECISSIONS:

All06

INQUIRIES:

If you have any questions about this policy, contact
rosalind.lozano@wfsmrg.org



WORKFORCE SOLUTIONS MIDDLE RIO GRANDE

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POLICY LETTER

ID NO: ALL20 Chg. 1

DATE ISSUED: June 11, 2026

TO: Workforce Solutions Middle Rio Grande Contractors

FROM: Rosie Lozano, Executive Director

SUBJECT: Data Validation

PURPOSE:

Provide the Contractor with updated information and guidance on the State Data Validation requirements for programs included in [WorkIntexas.com](https://workintexas.com). The update WD Letter 27-19, Change 8, clarifies U.S work authorization validation requirements.

REFERENCE:

TWC - Employment Service Guide; Migrant Seasonal Farmworker Guide
WD Letter 27-19, Change 8

POLICY:

In accordance with the US Department of Labor Employment and Training Administration, the Board must ensure that data that is submitted on participants outcome is valid and reliable. The Contractor will need to follow the most current WD Letter 27-19, change 8 – State Data Validation Requirements and the most updated TEGL 23-19. This will ensure that the information that is entered is accurate, valid and reliable. States may customize these data validation requirements to fit local needs.

EFFECTIVE DATE:

June 11, 2026

INQUIRIES:

If you have any questions, contact rosalind.lozano@wfsmrg.org



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POLICY LETTER

ID NO: ALL02 Chg. 4

DATE ISSUED: 12/12/2024

TO: Workforce Solutions Middle Rio Grande Contractors

FROM: Rosie Lozano Executive Director

SUBJECT: Support Services Policy

PURPOSE:

To provide new and updated guidance to Workforce Solutions Middle Rio Grande Workforce Center contractors regarding the administration of support services for eligible program participants.

REFERENCES:

TEGL 19-16, TWC Choices Program Guide, TWC SNAP E&T Program Guide, TWC WIOA Guide for Adults, Dislocated Workers, and Youth, TWC NCP Program Guide, Disaster Recovery Dislocated Worker Grant

POLICY:

Supportive services requirements

- A. Program eligibility must first be established for the participant.
- B. Individualized assessment of needs and barriers using a "resource" or "financial" assessment form to determine the need for supportive services and other assistance that the participant may require to enable him/her to participate in and successfully complete their career and training goals.
- C. Development of an IEP and/or ISS between the participant and his/her case manager. The IEP and/or ISS must describe both the needs and the services (e.g., quantity, frequency, method of delivery, etc.) needed by the participant to achieve the career and/or training goals.

- D. In all instances (as applicable per individual program requirements), explore whether other resources may be
- E. available. This must be documented in WFCMS counselor notes. Participants must be referred to other resources when these are available (using a referral form) and maintained in participants' file. If other resource are only partially available, then the provisions of the supportive services would be partially provided along with documentation of the referral to the partially available resource.
- F. Supportive services must be timely and properly coded and recorded in WFCMS Support Service tab and Counselor Notes.
- G. Staff must maintain ongoing contact with the participant while in receipt of supportive services (minimum monthly contact for WIOA and NCP Choices; weekly contact for the Choices and /or SNAP programs).
- H. Documentation of active participation maintained in participant's file.
- I. Compliance with laws and regulations governing each grant/program from which funds are used.
- J. Once a participant has met a supportive service cap, documentation that referrals to other resources are being provided.
- K. Timely and proper recording/coding and submission of required documentation/invoicing in coordination with and directed by the WFSMRG Fiscal department.

To the extent that the assistance is necessary to enable participation the participant is unable to obtain the needed support through other programs or resources, and appropriate analysis has been performed to determine the most economical approach of providing the needed support, the provisions of such series may be allowable.

Documentation Requirements

As allowable, every effort must be made to facilitate the provisions of supportive services (e.g., amount and types of documentation that are required, convenient and timely disbursements to participants etc.).

Only the most current bill shall be required. Some participants may have difficulty providing the required documentation (e.g., to show that they are associated with a bill. In this case, Center staff may use alternatives forms of documentation/verification. This includes one or a combination of the following non-exhaustive list of documents: utility bills, bank statements showing recurrent/regular payments, proof of residence, some form of documentation showing association with the vendor, self-attestation signed by both the vendor/third party and the participant, etc. Alternative forms of documentation must be authorized by Center management on a case-by-case basis. **In cases where a Youth participant does not have documentation, then**

Director of Workforce Programs may authorize in a case by case bases with documentation being recorded in case notes.

SUPPORTIVE SERVICES

Maximum Assistance Amount

- Except for transportation and childcare, the maximum combined assistance for an eligible participant may not exceed \$3,000 in a program year (calendar year for SNAP E&T).
- Exceptions to this policy will be reviewed on a case-by-case basis for extraordinary circumstances. The contractor will submit in writing a request for a special review. The Board will review the request and decide to approve/disapprove request prior to services being provided.

Transportation:

Please refer to WD Letter 07-17, Change 1.

Child Care:

Allowable Services: Childcare services for WIOA participants using WIOA funds are allowable ONLY if funds are available and budgeted for the PY. WIOA participants are considered local priority groups under the CCS. Childcare costs paid for with WIOA funds do not count towards supportive services caps.

Limitations

WIOA participants who need childcare services must initially be referred to the Child Care Services (CCS). After the referral, WIOA funds may be used to cover the costs of childcare if:

- The participant is place on the CSS Interest List, or
- The participant does not qualify for CCS services, or
 - A situation prevents him/her from fully complying with CCS requirements (e.g., parent share a cost or other CCS requirements that do not align with WIOA's requirements).

Unallowable Services

Childcare services are not allowable under the NCP Choices grant.

- Childcare services for Choices and/or SNAP E&T participants are provided by CCS (using CCS funds).

Housing Assistance:

Allowable Services

- Emergency rental/mortgage assistance.

Limitations

- Limited to no more than four months during a program year (calendar year for SNAP E&T);
- Example: the assistance could include four different instances each assisting with one month of costs. It could also include two instances where one instance covers three months of costs, and the other instance covers one month of costs. In both situations, the assistance was limited to four months of costs.
- For SNAP participants, rent assistance may be provided for no more than two months in a calendar year, and the assistance cannot exceed more than two instances in a 90-day period after the participant has entered full-time employment (working at least 30 hours a week).
- Exceptions to this policy will be reviewed on a case by case basis for extraordinary circumstances. The Contractor will submit in writing a request for a special review. The Board will review the request and make a decision to approve/disapprove request prior to services being provided.

Other Short-Term/Emergency Payments:

Allowable Services

- Short-term/emergency payments.

Limitations

- Limited to no more than four months during a program year (Calendar year for SNAP E&T)
- Refer to example in Housing Assistance.

Utility Assistance:

Allowable Services

- Utility assistance is an allowable support service.

Limitations

- For SNAP participants, utility assistance may be provided for no more than two months in a calendar year, and the assistance cannot exceed more than two instances in a 90-day period after the participant has entered full-time employment (working at least 30 hours a week).

Telephone/Communication Assistance:

Allowable Services

- Telephone/cell phone/communication assistance can be critical for participants to be successful in a labor market.

Limitations

- Telephone or cell services often are packaged with additional services (e.g., wireless or internet services, equipment lease/purchase or protection, etc.).
- Assistance shall be limited to what could reasonably be estimated as the average cost of cell phone service (including additional packaged services) for the county of residence or county of work.
- May be provided for no more than three months per program year (calendar year for SNAP E&T participants).

Work-Related Assistance:

Allowable Services

- Vocational exams, certifications, tools equipment, other work-related expenses.

Limitations

- Assistance must be related to demonstrated specific requirements of the job, or career or training goals.

Mental Health Assistance:

Allowable Services

- Mental health services

Unallowable Services

- Paying for mental health services for Choices or NCP Choices participants are not allowable using TANF funds.

Substance Abuse Assistance:

Allowable Services

- Substance abuse services

Unallowable Services

- Paying for substance abuse services for Choices or NCP Choices participants are not allowable using TANF funds.

Needs-Related Payments:

Needs-related payments provide financial assistance to eligible participants to enable them to participate in training. For Adult, Dislocated Worker, and Youth, needs-related payments may be made available only to individuals enrolled in training services and must be consistent with 20 CFR 680.930, 680.940, 680.950, and 680.960, 680.970, (TEGL 19-16).

To qualify, Adults and Youth must:

- Be unemployed:
- Not qualify for or have ceased qualify for unemployment compensation:

- Be enrolled in a program of training services

For Adults and Youth, payment levels are limited as follows:

- The weekly payment may not exceed the poverty level for an equivalent period.

Dislocated workers must:

- Be unemployed
- Not qualify or have ceased to qualify for unemployment compensation or trade readjustment assistance under TAA or NAFTA-TTA
- Be enrolled in a program of training services by the end of the 13th week after the most recent layoff that resulted in a determination of the worker's eligibility as dislocated worker, or if later, by the end of the 8th week after the worker is informed that a short-term layoff will exceed six months

For dislocated workers, payment levels are limited as follow:

- For participants who are eligible for unemployment compensation as a result of the qualifying dislocation, the payment may not exceed the applicable weekly level of the unemployment compensation benefits.
- For participants who did not qualify for unemployment compensation as a result of the qualifying layoff, the weekly payment may not exceed the poverty level for an equivalent period.

Special Exceptions for Extraordinary Circumstances

To the extent allowable by each grant, this policy allows for other types of assistance to be provided when they are reasonable and necessary to enable eligible individuals to participate in career services or training activities (e.g., tools, equipment, late fees, and other items). An exception to this policy is required under the provision. Exceptions to this policy will be reviewed on a case-by-case basis for extraordinary circumstances. The Contractor will submit in writing a request for a special review. The Board will review the request and make a decision to approve/disapprove request prior to services being provided.

Contractor Policies

- The amount or level of assistance in WFSMRG support services policies shall align with tis Board policy. To manage and fluctuations in funding, Contractor's may coordinate with Board to reduce maximum limits.
- WFSMRG policies/procedures must specifically promote the most economical provision of services.
- For certain items (e.g., equipment, tools, etc.), policies/procedures must address safeguards that help prevent misuse or loss.

Additional Limitation

Per TEGL 19-16, "follow-up career services are not a qualifying service for the receipt of supportive services; therefore, an individual who is only receiving 'follow -up' services may not receive support services." This is only applicable to Adult and Dislocated Workers.

EFFECTIVE DATE:

October 1, 2024

RECISSIONS:

Policy #MRGWB-ALL-07

Policy #MRGWB-TANF-01

Policy #ALL02

ALL02 Chg 2

Policy #MRGWB-ALL-17 Amd 1

Policy #MRGWB-FS-01

Policy #ALL02 Chg 1

ALL10 Chg 1

INQUIRIES:

If you have any questions, contact rosalind.lozano@wfsmrg.org

Workforce Solutions Middle Rio Grande Board

Monitoring & Oversight Committee

June 11, 2026

Information Item

Workforce Programs Report

PURPOSE

Provide the Board with an update of the Workforce Programs

DISCUSSION

1. The Monthly Performance Report (MPR) provides performance data which allows Boards to monitor performance targets for the contracted Program Year. Attached is the March 2026 MPR report. This report has suppressed data, so it does not rank the measures by meeting or not meeting. The only measures that are true numbers are the REEMS measures which indicate we are failing one measure: Reemployment Claimant Reemployment within 10 weeks.
2. Workforce WIOA Participatory report for October 2025:

October 2025	Report Total: 94
November 2025	Report Total: 100
December 2025	Report Total: 106
January 2026	Report Total: 89
February 2026	Report Total: 96
March 2026	Report Total: 93
April 2026	Report Total: 104

3. The Board is still working with TWC and the Contractor on the Corrective Action Plans (CAP). The SNAP CAP has hit the 3rd monitoring with an error rate of under 10%. However, the Choices CAP – with TWC review they did identify errors which resulted in an error rate of over 10%, so we start all over.
4. Below is the FY2026 RESEA Performance report. The performance target is 77% which we have achieved for Quarter 1 (October – December 2025) and Quarter 2 (January - March 2026) as per TWC reports.

RESEA FY2026 Performance

Middle Rio Grande Quarterly Performance BCY 2026					
QUARTER1 BCY 2026 October – December 2025					
LWDA Name	Office Numbers	Office Names	RESEA Profile Pool Count	Initial RESEAs Completed	Completion Rate (BC Target: 77%)
Middle Rio Grande	248	248 WF Sol MRG Uvalde	38	27	71%
Middle Rio Grande	249	249 WF Sol MRG Eagle Pass	79	61	77%
Middle Rio Grande	252	252 WF Sol MRG Carrizo Springs	5	4	80%
Middle Rio Grande	259	259 WF Sol MRG Cotulla	3	2	67%
Middle Rio Grande	275	275 WF Sol MRG Crystal City	13	10	77%
Middle Rio Grande	276	276 WF Sol MRG Del Rio	30	26	87%
Middle Rio Grande	SubTotal	Subtotal	168	130	77%

Middle Rio Grande Quarterly Performance BCY 2026					
QUARTER2 BCY 2026 ONLY January & February 2026					
LWDA Name	Office Numbers	Office Names	RESEA Profile Pool Count	Initial RESEAs Completed	Completion Rate (BC Target: 77%)
Middle Rio Grande	248	248 WF Sol MRG Uvalde	12	11	92%
Middle Rio Grande	249	249 WF Sol MRG Eagle Pass	51	43	84%
Middle Rio Grande	252	252 WF Sol MRG Carrizo Springs	5	3	60%
Middle Rio Grande	259	259 WF Sol MRG Cotulla	3	3	100%
Middle Rio Grande	275	275 WF Sol MRG Crystal City	4	4	100%
Middle Rio Grande	276	276 WF Sol MRG Del Rio	19	14	74%
Middle Rio Grande	SubTotal	Subtotal	94	78	83%

VOSGreeter® - by Office

Report Date: 06/03/2026

Region/LWDB: Middle Rio Grande WF Board

Start Date: 05/01/2026

End Date: 05/31/2026

Report Run Time: 6/3/2026 8:18:59 AM

Office	Individuals	Veterans	Left Office without receiving service	Customers seen by staff
248 WF Sol MRG Uvalde	<u>1,100</u>	3	1	508
249 WF Sol MRG Eagle Pass	<u>3,033</u>	13	1	951
252 WF Sol MRG Carrizo Springs	<u>609</u>	3	0	178
259 WF Sol MRG Cotulla	<u>95</u>	0	0	17
275 WF Sol MRG Crystal City	<u>301</u>	1	2	123
276 WF Sol MRG Del Rio	<u>845</u>	13	0	366
Total Check-Ins:	<u>5,983</u>			
Total Unique Check-Ins:	<u>2,409</u>			

This report is provided by MRGDC. TWC has not released an official VOS report due to adjustments and issues that need to be corrected. Check In do not equal customers seen.

ACTION: No action required.

Middle Rio Grande Development Council
Program Risk Assessment
February, 2026 –May, 2026

INHERENT RISK			
Program Size to Total Federal Asst Received		Score	Comment
Less than 15% of revenue comes from federal and/or state funds	2=Low		Greater than 50% of revenues come from federal and/or state funds This will always be a 6 because they hold all the grants/contracts.
Between 15 and 50% of revenue comes from federal and/or state funds.	4=Moderate		
Greater than 50% of revenues come from federal and/or state funds	6=High		
Newness of Contractor to Program		Score	Comment
Operating for 3 years or more and experienced no significant changes.	2=Low		The contractor has been operating for over 20 years. They have been operating for over 20 years.
Operating for at least 1 year but less than 3 years without significant changes.	4=Moderate		
Less than 1 year of operating or has experienced significant and complex changes	6=High		
Timeliness/Accuracy of Program Reporting		Score	Comment
Reports were timely and error free during last program year	2=Low		
Reports have been late on 1 to 4 occasions or had minor errors during last program year.	4=Moderate		
Reports have been late more than 4 times and/or reports contained major errors during last program year.	6=High		
Prior Compliance Issues		Score	Comment
There have been minimal Observations and Findings in the last 2 program years with no questioned or disallowed cost.	2=Low		Contractor was unable to clear up SRM findings for Choices and SNAP with Audit Resolution for PY24. Contractor will be placed on a CAP for 2nd year finding in both Choices and SNAP programs. TWC has found errors in the Choices reviews that are over 10%.
Experienced minor instances of Observations and Findings with minimal questioned or disallowed cost in the last 2 program years.	4=Moderate		
Experienced significant Findings in the last program years with questions or disallowed costs.	6=High		
Personnel Turnover		Score	Comment
Little or no turnover in the last program year.	2=Low		For this period of this review, there have been 2 resignations/terminations. Vacancies: Care Case Manager and Business Services Manager
Some turnover in the last program year that impacts key areas.	4=Moderate		
Significant turnover in key personnel in last program year which could have a significant impact on the program.	6=High		
Effective of Internal Monitoring		Score	Comment
An effective internal monitoring function is in place. Written procedures are available, as well as evidence that a complete internal monitoring for all programs and centers had been conducted effectively and regularly during the last program year	2=Low		Youth grant has not been fully expensed for FY25 Out of School Youth still has a balance of \$108,184 (\$17,340 in encumbrances) as per the April 2026 financial report. It was noted that the WIOA and RESEA were potentially going to be short to finish the year. RESEA is still in jeopardy of being short. TANF funds might not be expenses, which makes the Board
Procedures are available, but a complete internal monitoring for all programs and centers has not been conducted effectively and on a regular basis in the last program year.	4=Moderate		
Procedures are available; but need to be updated, evidence of incomplete or no internal monitoring is not available for last program year.	6=High		

			and Contractor Adm/Ops at risk of being returned. WCI Grant had a balance of \$2,206 left. There is documentation that QC has identified issues that could potentially be corrected before the Board monitoring. Also several repeat findings in WIOA (2 way communication) in all three months.
Complaints and Official Inquiries		Score	Comment
There were no unresolved complaints received in last program year that required WFSMRG or TWC intervention.	2=Low		There are no official complaints.
There were unresolved complaints received by WFSMRG/TWC in the last program year, that upon investigation, were not warranted.	4=Moderate		
There have been a significant number of complaints in the last program year that have warranted investigations due to possible fraud, abuse, discrimination, or other irregularities.	6=High		
Performance Measures		Score	Comment
The contractor has met targeted performance outcomes on a consistent basis in the last 2 program years.	2=Low		MPR's for March 2026 indicate Contractor is filing one measure. MPR report has suppressed data, so it doesn't indicate which measures we are failing/passing except for REEM measures.
The contractor has failed to meet 2 or more performance measures in the last program years.	4=Moderate		
The contractor has failed to meet 3 or more performance measures in the last program years.	6=High		
CONTROL RISK			
Adequacies of Policies and Procedure		Score	Comment
In-depth updated procedures are in place and enforced.	2=Low		
Procedures are in place with occasional minor infractions.	4=Moderate		
Procedures are outdated or do not meet the standard.	6=High		
Management's Knowledge of Laws/Regulations		Score	Comment
Fully understands all laws and regulations that pertain to the contract.	2=Low		Less than a year –Business Service Coordinator, Finance Officer. Quality Assurance Coordinator Less than 2 years –Workforce Program Coordinator, Quality Assurance Coordinator
Familiar with all laws and regulations that pertain to the contract and can find answers to identified contractual issues.	4=Moderate		
Does not understand all laws and regulations that govern their particular contract.	6=High		
Segregation of Duties		Score	Comment
Workload is evenly divided with no more than 2 layers	2=Low		
Some inequities in workload with 3 layers of direct supervision	4=Moderate		
A few carrying the workload of others with no clear supervision or over supervised chain	6=High		
Experience Level of Management		Score	Comment
All management has over 3 years of experience on current contract in current management position	2=Low		Less than a year –Business Service Coordinator, Finance Officer. Quality Assurance Coordinator
Management has 2-3 years of experience on current contract in current management position	4=Moderate		

Management has less than 2 years of experience on current contract in current management position	6=High		Less than 2 years –Workforce Program Coordinator, Quality Assurance Coordinator
Extent of Management Reviews/External Monitoring		Score	Comment
Bimonthly Board monitoring reports result in little to no errors. Board monitoring reports do not have a consistent error.	2=Low		Documented in Board packets. Monitoring will also including Priority of Service and PII monitoring.
Bimonthly Board monitoring reviews result in some errors. Board monitoring reports have some re occurring errors.	4=Moderate		
Bimonthly Board monitoring reviews results show several errors. Board monitoring reports have several and/or consistent re occurring errors.	6=High		
Responsiveness/Availability of Senior Staff		Score	Comment
Senior Staff will respond timely, meet deadlines and are accessible and available.	2=Low		
Senior Staff will usually respond timely, usually meet deadlines and are usually accessible and usually available.	4=Moderate		
Senior Staff usually do not respond timely, usually miss deadlines. Senior Staff is usually unavailable or accessible.	6=High		
Training and Staff Development		Score	Comment
Ongoing training is provided and/or training is provided based on identified needs.	2=Low		Board has not provided training but has responded to questions from Contractor.
There is periodic training for management and/or staff.	4=Moderate		
There is no training for management and/or staff.	6=High		
Other		Score	Comment
Contractor did not have any issues	2=Low		TWC has imposed 2 CAPs for items that were not resolved in Audit Resolution. This is always a high risk to the Board. This year's exit report from SRM is included in the board packet.
Contractor has some issues to cause concern as described in comments	4=Moderate		
Contractor had several issues to cause concern as described in comments.	6=High		
		Score	Comment
Low Risk = 0-50	2=Low		
Moderate Risk = 51-70	4=Moderate		
High Risk = 71 or higher	6=High		

Measure	Numerator	Denominator	Performance	Current Target	EOY Target	% Current Target	From	To	Notes	% Current Target	
Adult: Credential Rate	53	59	89.83%	83.35%	83.35%	107.77%	01/24	09/24	18	N/A 107.77%	
Adult: Employed Q2	58	63	92.06%	80.24%	80.24%	114.73%	07/24	03/25	18	N/A 114.73%	
Adult: Employed Q4	72	82	87.80%	80.17%	80.17%	109.52%	01/24	09/24	18	N/A 109.52%	
Adult: Measurable Skill Gains	35	41	85.37%	70.70%	70.70%	120.75%	07/25	03/26	18	N/A 120.75%	
Adult: Median Earnings Q2	N/A	58	\$11,946	\$8,330	\$8,330	143.41%	07/24	03/25	18	N/A 143.41%	
C&T: Credential Rate	83	94	88.30%	75.00%	75.00%	117.73%	01/24	09/24	18	N/A 117.73%	
Child Care: Average # Children Served Per Day - Combined	169,657	130	1,305	1,386	1,386	94.16%	10/25	03/26	20	N/A 94.16%	
Child Care: Initial Job Search Success Rate	1	4	25.00%	56.91%	56.91%	43.93%	06/25	11/25	21	N/A 43.93%	
Choices/TANF: Full Engagement Rate - All-Family	N/A	N/A	N/A	50.00%	50.00%	N/A	10/25	03/26	14	N/A N/A	
DW: Credential Rate	29	30	96.67%	85.00%	85.00%	113.73%	01/24	09/24	18	N/A 113.73%	
DW: Employed Q2	44	47	93.62%	82.35%	82.35%	113.69%	07/24	03/25	18	N/A 113.69%	
DW: Employed Q4	37	38	97.37%	84.52%	84.52%	115.20%	01/24	09/24	18	N/A 115.20%	
DW: Measurable Skill Gains	33	36	91.67%	76.00%	76.00%	120.62%	07/25	03/26	18	N/A 120.62%	
DW: Median Earnings Q2	N/A	44	\$13,326.59	\$9,920	\$9,920	134.34%	07/24	03/25	18	N/A 134.34%	
Reemployment: Claimant Reemployment within 10 Weeks	800	1,525	52.46%	61.91%	61.91%	84.74%	07/25	12/25	N/A	NM 84.74%	
Reemployment: Employers Receiving Texas Talent Assistance	729	1	729	587	1,019	124.19%	10/25	03/26	N/A	EX 124.19%	
Youth: Credential Rate	10	18	55.56%	62.10%	62.10%	89.47%	01/24	09/24	18	N/A 89.47%	
Youth: Employed/Enrolled Q2	16	22	72.73%	80.66%	80.66%	90.17%	07/24	03/25	18	N/A 90.17%	
Youth: Employed/Enrolled Q4	23	29	79.31%	79.77%	79.77%	99.42%	01/24	09/24	18	N/A 99.42%	
Youth: Measurable Skill Gains	45	57	78.95%	65.30%	65.30%	120.90%	07/25	03/26	18	N/A 120.90%	
Youth: Median Earnings Q2	N/A	16	\$3,502.58	\$4,000	\$4,000	87.56%	07/24	03/25	18	N/A 87.56%	

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Monthly Performance Report | Official Release | March 2026 | Report Type: Board Contracted | **Area:** Board | **LWDA:** 27: Middle Rio Grande

- 14 Release of Choices visualization is pending resolution of issues in GSI's data interface with HHSC.
- 18 In some instances, services used to identify the Population Groups (Adult, DW, Youth) mistakenly include reportable and follow-up services and may inflate or deflate performance rate. Performance status currently suppressed.
- 20 Performance status currently suppressed to allow boards to adjust to new targets approved in March 2026. April 2026 MPR will have performance status turned on for boards to see their performance status as exceeding, meeting, at risk, or not meeting.
- 21 Performance status currently suppressed for CC IJS while undergoing a coding update to better reflect board performance. Updated numbers will be incorporated in the April MPR issued in June 2026.

STUDENT HIREABILITY NAVIGATOR BOARD REPORT June 2026

Event	Students	Adults	County
TWC Student HireAbility Navigator Meeting		23	All counties
Real County Courthouse Employer/SEAL Outreach		3	Real
Rocksprings Gilmer Library Remote Site Visit		3	Edwards
Lotus Thai Café Employer/Seal Outreach		2	Real
King Burger Employer/SEAL Outreach		3	Edwards
Rolling Hills Health Remote Site Visit		3	Real
Rolling Hills Health Employer/SEAL Outreach		3	Real
Leakey Buck Stop Gas Station Employer/SEAL		2	Real
Valero Leakey Employer/SEAL Outreach		3	Real
Dora's Nursery Employer/SEAL Outreach		1	Real
Crystal City High School Labor Market/Virtual Reality Career Exploration Presentation	114	2	Zavala
Ace Panel Presentation Production Schedule		2	Uvalde
La Pryor ISD Labor Market/Career Exploration	65	4	Zavala
People Ready Employer/SEAL Outreach		2	Val Verde
PFS Employer/SEAL Outreach		1	Uvalde
Lyte Fiber Employer/SEAL Outreach		2	Uvalde
Avir Health Group Employer/SEAL outreach		1	Uvalde
Board Navigators Joint Event Development Meeting		3	All counties
TWS-VRS and WFSMRG SEAL 2026 Meeting		4	All counties
Board Navigators Virtual Event Meeting		3	All counties
TWS-VRS New Collaboration Initiative		4	All counties
Chicanos Por La Causa Event		60	Uvalde
Board Navigators Fine Tuning Meeting		3	All counties
Board Navigators Transition Webinar Planning		3	All counties
WFS Alamo, WFS Cameron and WFS MRG Planning for Transition Webinar		3	All counties
WFS Alamo, WFS Cameron and WFS MRG Planning for Transition Webinar		121	All counties
WFSMRG and TWS-VRS Collaboration Initiative with VR supervisor		4	All counties
BCFS Inter-Agency Meeting		86	Val Verde
San Felipe Del Rio High School Career Technology Education Spring Advisory Committee	20	120	Val Verde
AACC Community Partnership Collaborative		13	All counties
WFS Alamo, WFS Cameron and SFS MRG Transition Webinar	85	36	All counties
Avance Health Advisory Meeting		50	Uvalde

Collaborated Rocksprings ISD Summer Opportunities Fair Representation	15	10	Edwards
WFSMRG & TWS-VRS SEAL Meeting		5	All counties
TWC Student HireAbility Navigator Meeting		26	All counties
Eagle Pass DAEP LMI/Career Exploration Presentation	17	11	Maverick
Collaborated Team Real Inter-Agency Presentation		14	Real
WFSMRG SEAL New Target Meeting		3	All counties
2026 TWC Forum		351	All counties
TWC Summer Earn and Learn Check In		125	All counties
Frank Newman Middle School Student Mock Interviews	75	18	La Salle
Coordinated Representation-Morales Junior High CCMR Showcase		4	Uvalde
Coordinated Representation-Coffee and Conversations Event		29	Val Verde
Partnership with Morales Junior High Career Fair	630	30	Uvalde
Maverick Early Childhood Coalition		38	Maverick
TWC Education Outreach Booster Session		36	All Counties
Area District Outreach for Transition Webinar		125	All counties
OUTREACH BY COUNTY	STUDENTS	ADULTS	
Val Verde	20	237	
Maverick	17	49	
Uvalde	630	150	
LaSalle	75	18	
Zavala	179	6	
Dimmit	0	0	
Kinney	0	0	
Edwards	15	16	
Real	0	31	
All Counties	85	891	
Total	1021	1398	
Addition Information:			
Collaborated with two neighboring Workforce Development Boards to plan and deliver a transition-focused webinar for students across multiple school districts, providing information and resources to support postsecondary education, employment, and career readiness. The webinar also highlighted the importance of self-advocacy skills, shared peer success stories to encourage student engagement, and connected participants with transition and workforce resources to support their future goals.			
Successfully engaged a new employer willing to participate in the Summer Earn and Learn (SEAL) program, expanding work-based learning opportunities for students with disabilities and increasing employer involvement in workforce development efforts.			

YOUTH COACH BOARD REPORT FOR: June

Event	Students	Adults	County
SJRC Texas/Belong Del Rio Hub Ribbon Cutting		70	Val Verde
SWTC AEL Workforce Session – Del Rio		11	Val Verde
Strategy Session with WFC and SFDR-CISD staff		4	Val Verde
DRHS “Lunch and Learn” Workforce Information Table	55	2	Val Verde
San Felipe Memoria Middle School – 6 th Career Exploration with VR headsets	102	3	Val Verde
San Felipe Memorial Middle School – 8 th Career Exploration with VR headsets	98	2	Val Verde
San Felipe Memorial Middle School- 7 th Career Exploration with VR headsets	106	3	Val Verde
Student Guidance and Learning Center (SGLC)- Career Exploration with VR headsets	24	2	Val Verde
CTE Advisory Committee Meeting	20	120	Val Verde
Early College High School (ECHS)-The Road After Graduation presentation	68	2	Val Verde
Del Rio Middle School-6 th Career Exploration with VR headsets	123	2	Val Verde
Rocksprings Summer Opportunity Fair	15	10	Edwards
Del Rio Middle School-7 th Career Exploration with VR headsets	119	2	Val Verde
DAEP presentation-Labor Market/Self Care	17	11	Maverick
Del Rio Middle School-8 th Career Exploration with VR headsets	114	2	Val Verde
DRHS “Working Wednesday” Information Table during lunches	30	2	Val Verde
MHM Coffee and Conversations		29	Val Verde
Interagency Networking and Collaboration Meeting		41	Val Verde
Student Guidance and Learning Center-Career Exploration	35	2	Val Verde
Del Rio High School Graduation Ceremony	650	1,400	Val Verde
Uvalde High School – Sr. Programming Day	184	24	Uvalde
Crystal City High School – Career Exploration with VR headsets	114	9	Zavala
Uvalde CISD ACE – Career Panel Event collaboration		6	Uvalde
Uvalde CISD ACE (MJH) – Career Exploration with VR headsets	26	5	Uvalde
La Pryor ISD – Career Exploration with VR headsets	65	4	Zavala

Sol Systems – Collaborative Outreach		2	Uvalde
Uvalde CISD ACE – Career Panel Event	28	40	Uvalde
Uvalde CISD ACE (MJH) – Interview Preparedness Presentation & Workshop	28	5	Uvalde
Utopia ISD – Career Exploration with VR headsets	16	3	Uvalde
SWTX College – Career Expo	423	64	All counties
PVAMU Youth Advisory Collaboration		7	Uvalde
Morales Jr. High Career Fair Collaboration		3	Uvalde
Uvalde CISD ACE (MJH) – Financial Literacy	23	4	Uvalde
TEAM Uvalde Outreach		52	Uvalde
Frank Newman Middle School – Mock Interview Day	75	19	La Salle
Uvalde CISD – CCMR Showcase	75	91	Uvalde
Uvalde CISD ACE (MJH) – Communication Skills Presentation & Workshop	19	4	Uvalde
Morales Jr. High Career Fair	630	63	Uvalde
OUTREACH BY COUNTY	STUDENTS	ADULTS	
Edwards	15	10	
La Salle	75	19	
Maverick	17	11	
Uvalde	1029	309	
Val Verde	1544	1699	
Zavala	179	13	
All Counties	423	64	

Middle Rio Grande Board Local Area Employment Statistics

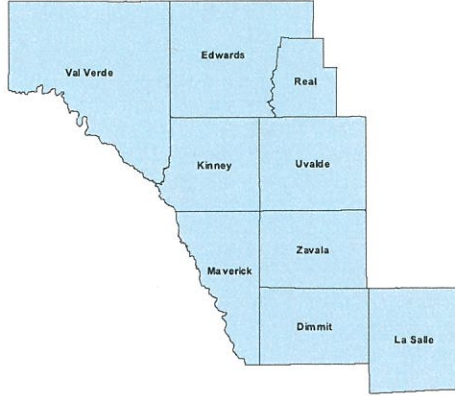
April 2026

Year	Period	Area	Employment	Civilian Labor Force	Unemployment	Unemployment Rate
2025	April	Middle Rio Grande	65,575	70,320	4,745	6.7
2026	April	Middle Rio Grande	65,458	69,980	4,522	6.5
2025	April	Dimmit	2,784	2,967	183	6.2
2026	April	Dimmit	2,642	2,817	175	6.2
2025	April	Edwards	790	814	24	2.9
2026	April	Edwards	808	829	21	2.5
2025	April	Kinney	1,315	1,367	52	3.8
2026	April	Kinney	1,368	1,427	59	4.1
2025	April	La Salle	2,644	2,767	123	4.4
2026	April	La Salle	2,611	2,727	116	4.3
2025	April	Maverick	22,938	25,650	2,712	10.6
2026	April	Maverick	23,120	25,264	2,144	8.5
2025	April	Real	988	1,023	35	3.4
2026	April	Real	989	1,036	47	4.5
2025	April	Uvalde	10,407	10,810	403	3.7
2026	April	Uvalde	10,502	10,950	448	4.1
2025	April	Val Verde	19,858	20,823	965	4.6
2026	April	Val Verde	19,750	21,016	1,266	6
2025	April	Zavala	3,851	4,099	248	6.1
2026	April	Zavala	3,668	3,914	246	6.3



Middle Rio Grande Workforce Development Area

April 2026



WDA Labor Force Statistics

	Apr-26	Mar-26	Apr-25	Yearly Change
Civilian Labor Force	69,980	69,802	70,320	-340
Employed	65,458	64,849	65,575	-117
Unemployed	4,522	4,953	4,745	-223
Unemployment Rate	6.5%	7.1%	6.7%	-0.2%

Texas Labor Force Statistics

	Apr-26	Mar-26	Apr-25	Yearly Change
Civilian Labor Force	15,867,910	15,852,169	15,903,872	-35,962
Employed	15,235,151	15,203,169	15,309,900	-74,749
Unemployed	632,759	649,000	593,972	38,787
Unemployment Rate	4.0%	4.1%	3.7%	0.3%

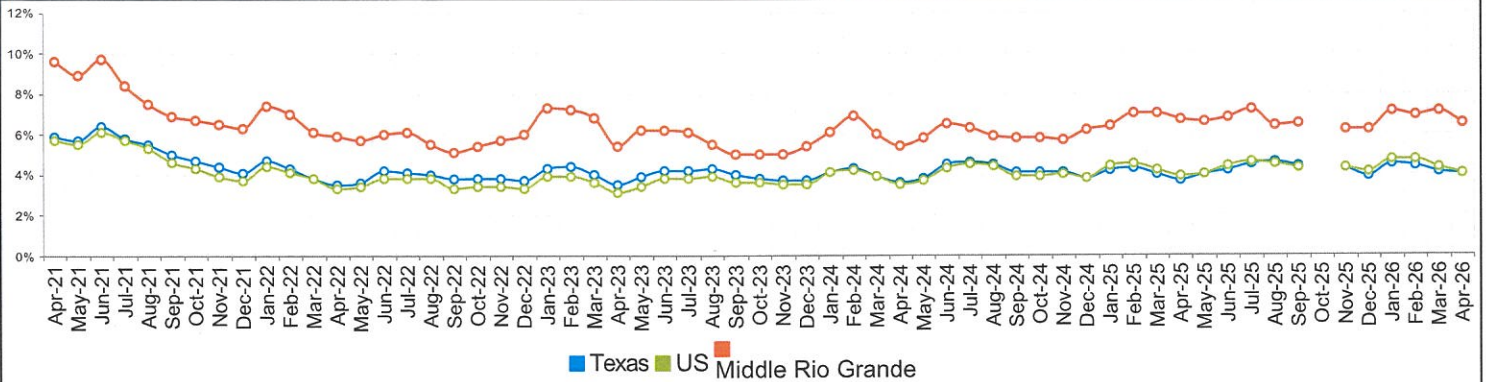
US Labor Force Statistics

	Apr-26	Mar-26	Apr-25	Yearly Change
Civilian Labor Force	169,548,000	170,102,000	170,650,000	-1,102,000
Employed	162,781,000	162,764,000	164,069,000	-1,288,000
Unemployed	6,768,000	7,337,000	6,582,000	186,000
Unemployment Rate	4.0%	4.3%	3.9%	0.1%

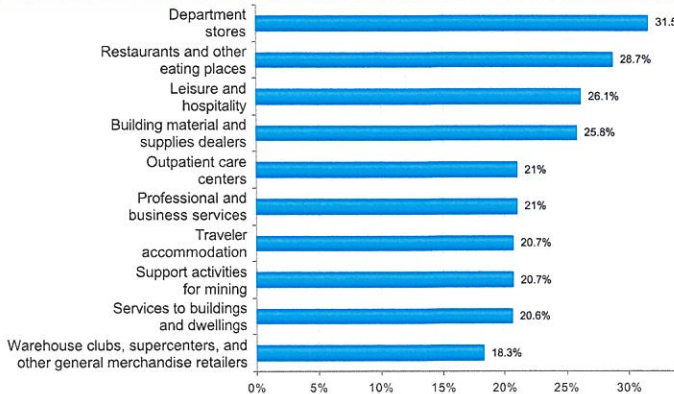
Continued Claims for the Week of the 12th

	Apr-26	Mar-26	Apr-25	Yearly Change
WDA	1,197	1,500	1,720	-523
Texas	117,577	123,687	127,906	-10,329

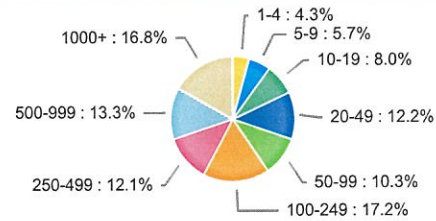
Historical Unemployment Rates



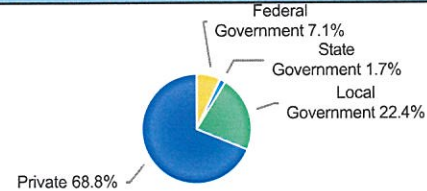
Projected Top Ten Fastest Growing Industries in WDA (% Growth 2022-2032)



Employment by Size Class (4th Quarter 2025)



Employment by Ownership (4th Quarter 2025)



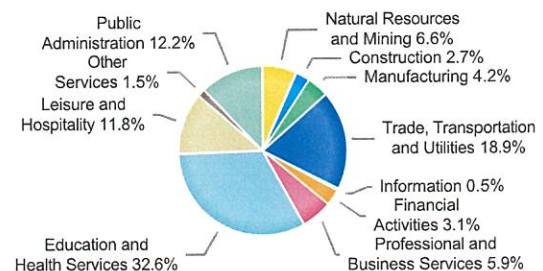
Average Weekly Wage (4th Quarter 2025)

	Q4 2025	Q3 2025	Q4 2024	Quarterly Change	Yearly Change
WDA	\$1,063	\$1,016	\$996	\$47	\$67
Texas	\$1,549	\$1,444	\$1,488	\$105	\$61
US	N/A	\$1,459	\$1,506	N/A	N/A

Employment by Industry (4th Quarter 2025, Percent Change)

Industry	Employment	% of Total	% Quarterly Change	% Yearly Change
Natural Resources and Mining	3,980	6.6%	3.2%	-3.5%
Construction	1,657	2.7%	-3.2%	0.0%
Manufacturing	2,522	4.2%	-2.7%	-5.3%
Trade, Transportation and Utilities	11,418	18.9%	0.1%	-3.8%
Information	325	0.5%	-2.4%	-4.1%
Financial Activities	1,875	3.1%	1.1%	-0.5%
Professional and Business Services	3,557	5.9%	-1.1%	-2.2%
Education and Health Services	19,698	32.6%	3.1%	2.6%
Leisure and Hospitality	7,170	11.8%	-3.5%	0.2%
Other Services	907	1.5%	-0.3%	0.0%
Public Administration	7,404	12.2%	-0.7%	-0.4%

Employment by Industry (4th Quarter 2025)





WORKFORCE SOLUTIONS MIDDLE RIO GRANDE

A proud partner of the AmericanJobCenter® network

To: Board of Directors

From: Rosie Avila-Lozano, Executive Director

Date: June 11, 2026

We received notification that we have been awarded with an additional 40 SEAL placements. Vocational Rehabilitation staff that have been working diligently with Contractor staff to get these participants ready. A big thank you to the Vocational Rehabilitation and Contractor staff for tackling this last-minute increase.

We are working with the Contractor on audit resolution issues. We needed to meet 4 consecutive months with an error rate of less than 10%. We are still on track with the SNAP program, but TWC monitoring team did notify us that the Contractor did have over a 10% error rate for the March and April 2026 Choices CAP review. Training has been provided to Contractor for the March errors, and we will be setting up a time to provided TA for the April findings. We will continue to work diligently with them to meet the requirements

We are being monitored by the TWC Migrant Seasonal Farmer Worker (MSFW) team from June 1-5, 2026. The job posting for a MSFW case manager has been posted, so we are hoping to get that position filled soon.

As I had previously reported about the closure of the Child Care Formula and Child Care Protective funds that had been extended to April 30, 2026, it has now been extended to June 30, 2026. We should have no more corrections for this grant, with the dollar amount to be returned at \$174,966 as per April 2026 financial report.

We have received planning estimates for PY2027 funding for WIOA and Child Care. We are anticipating an overall 2.4% decrease, mainly in WIOA Adult, Youth and Child Care. While Dislocated Worker show an increase in funding. Again, these are planning estimates that still need to be approved by TWC Commissioners.

TANF Grant was approved to allot \$75,816 from original allocation to serve low-income youth through Subsidized Employment Initiative. This will serve 30 youths ages of 14-24 at \$13.00 an hour for a 6 week time frame.

I was notified that in our area; there were 3 schools that received JET grant funding. At this time, we cannot announce the schools, but as soon as grants are signed, we will post this exciting news to our social media!



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To: Rosie Lozano, WFS MRG Board Executive Director
From: Michelle Garcia, MRG Executive Director
Date: 05-28-2026
Subject: Workforce Solution Summary Report
(March & April 2026)

Workforce Solution Middle Rio Grande Activity Report

1. **Monthly Caseload Reports:** (Through May 18, 2026): Each month, a consolidated report is prepared to capture data across key categories, tracking trends and changes in enrollment and participation over time. This reporting helps identify areas of strength, potential gaps in service delivery, and opportunities to enhance outreach and customer support. As of May 18, 2026, there are **179 active cases** including RESEA cases across the region. The SNAP/Choices outreach pool is not included in this total.
2. **WIOA-Enrollment:** We continue to provide training services and work experience opportunities for Adults, Dislocated Workers, and Youth. From January 2026 through April 2026, we sponsored **60 clients** across the region.

We continue to provide services to a steady flow of **29 clients** during the months of **March 2026 and April 2026**. This reflects a significant increase from last year and highlights the dedication and hard work of our staff.

3. **Employer Engagement Initiatives:**
We successfully conducted employer outreach by participating in community events and hosting job fairs, hiring events and career fairs designed to meet employer needs. These efforts focused on addressing workforce challenges and promoting the services we provide.

Our goal is to meet and exceed performance measures as we continue serving employers throughout the Middle Rio Grande Region. For the performance measure **Employers Receiving Texas Talent Assistance**, we are **currently exceeding performance**.

4. **Outreach and Marketing:** Outreach and Marketing efforts continue to strengthen Workforce Programs, with a particular emphasis on youth engagement. Through consistent in-person outreach with employers and community members who may not yet be familiar with our services, staff have successfully increased program awareness and maintained a strong presence across the region. Below is a list of region-wide events

attended by staff. Participation in these events has been instrumental in expanding our reach and strengthening relationships with local employers and partners.

March 2026

Team Real-Leakey

TRES 33-Grand Opening Eagle Pass

Job Fair-Uvalde

Job Fair-Eagle Pass

Border Patrol Hiring Event-Del Rio

Workforce Solutions Youth Orientation-Eagle Pass & Del Rio

April 2026

Border Patrol Hiring Event-Del Rio

Grand Opening Fresh & Fold- Del Rio

Team Uvalde-Uvalde

WIOA Youth Orientations-Eagle Pass

Job Fair Del Rio & Cotulla

SWTC Career Expo-Uvalde

5. **Corrective Action Plan:** We continue to closely monitor SNAP and Choices activities on a daily, weekly, and monthly basis. Monthly reports are provided to the Board, and staff training is conducted in areas identified for improvement. Daily activity reviews are utilized to track and monitor cases for both the SNAP and Choices programs. Through the use of these monitoring methods, we have identified a reduction in errors and will continue ongoing monitoring and oversight efforts.

Due to a non-compliance finding in the March review of the Choices program, TWC identified one error. In response, to the finding of the error staff received additional training and technical assistance to address the identified issue and strengthen compliance efforts.

For the SNAP finding, the error rate was below 10%; however, staff still received refresher training to ensure continued compliance and accuracy in case processing. We are currently one month away from successfully being removed from the SNAP Corrective Action Plan (CAP).

6. **The Summer Earn and Learn Program-** We are excited to kick off the SEAL Program for students ages 14–22 with disabilities. The collaboration between TWC–Vocational Rehabilitation staff and Workforce Solutions staff has made this program a great success. SEAL participants earn a paycheck while learning new skills and gaining valuable professional work experience.

We originally started with a target of 21 participants; however, an additional 40 participants were awarded, bringing the total to 61 participants region-wide. The program will run from June 15 through July 17, 2026. Participants will work 32 hours per week for five weeks.

7. The Reemployment Services and Eligibility Assessment (RESEA): program is running exceptionally well and remains on track for full-service delivery implementation for the Pilot 1A program beginning June 2, 2026. Under the program structure, each customer will participate in three appointments: the Initial Appointment, RS1 conducted 7–14 days following the Initial Appointment, and RS2 conducted four weeks after RS1. RESEA staff have demonstrated outstanding adaptability and professionalism while navigating the recent program changes and are fully prepared for the June 2, 2026, launch. In addition, program performance continues to remain strong, with the Q2 attendance rate reaching 83%, reflecting continued customer engagement and effective service delivery efforts.

8. The TANF Subsidized Employment Initiatives: We are excited to kick off the TANF Subsidized Employment Initiative, a program designed to provide low-income youth ages 14 to 24 with meaningful work experience opportunities.

Workforce Solutions Middle Rio Grande has been awarded 30 youth participant slots for this program. Workforce Solutions staff has been actively conducting outreach and recruiting employers across the region to support this initiative.

The program will run from June 15 through July 24, 2026, for a total of six weeks. Participants will work up to 30 hours per week and earn \$13.00 per hour.

9. Childcare:

Overview

This report summarizes key Child Care Services (CCS) activities, including enrollments, payments, provider attendance, provider issues, and training for the current reporting period.

Enrollments

- Enrollment remains on hold due to reaching contracted capacity.
- The waitlist includes 215 clients, including current participants needing to add children.
- All clients with waitlist dates before March 1, 2026 have been placed or contacted, except one transfer case:
 - Client transferred from another board with an original waitlist date of June 9, 2025; now number 64 on our list.

Payments

- KinderSystems continues correcting payments through June 20, 2026, and adjusting prospective payments for Jan 13, 2025 – Jun 14, 2026.
- Payments from Jan 13 – Sep 30, 2025 fall under the prior fiscal year; corrections allowed through June 30, 2026.
- CLI system issues continue to affect Texas Rising Star (TRS) provider payments:
 - Rate increases for providers moving from 2-star to 4-star require manual corrections when CLI fails to update.
 - Retroactive adjustments are required for the prior fiscal year.
- Staff continue daily work on payment corrections.

April-May 18, 2026				
WIOA – Adult				
County	# of clients	\$ Expenses (Pass thru)	Encumbrances	Obligations
Dimmit	0			
LaSalle	0			
Zavala	0			
Maverick	9	\$21,210.00		
Val Verde	6	\$6,900.00		
Kinney	0			
Uvalde	2	\$14,500.00	\$3,210.00	
Edwards	0			
Real	0			
Total	17	\$42,610.00	\$3,210.00	0
WIOA – Dislocated				
County	# of clients	\$ Expenses (Pass thru)	Encumbrances	Obligations
Dimmit	0			
LaSalle	0			
Zavala	1			
Maverick	9	\$13,500.00	\$13,500.00	
Val Verde	4	\$8,445.00		
Kinney	0			
Uvalde	4	\$8,850.00	\$15,420.00	
Edwards	0			
Real	0			
Total	18	\$30,795.00	\$28,920.00	0
WIOA – Youth				
County	# of clients	\$ Expenses (Pass thru)	Encumbrances	Obligations
Dimmit	7	\$7,129.20		\$2,308.96
LaSalle	0			
Zavala	2	\$9,067.84		\$6,467.08
Maverick	34	\$25,468.16	\$4,010.00	\$13,765.24
Val Verde	10	\$9,152.59		\$15,927.88
Kinney	0			
Uvalde	5	\$16,910.17	\$3,210.00	
Edwards	1			
Real				
Total	59	\$67,727.96	\$7,220.00	\$38,469.16

RESEA				
County	# of clients	\$ Expenses	Encumbrances	Obligations
Dimmit	2			
LaSalle	1			
Zavala	8			
Maverick	25			
Val Verde	19			
Kinney	0			
Uvalde	10			
Edwards	0			
Real	2			
other	from different Board-1			
Total	67	0	0	0
TANF				
County	Enrolled/Outreached	\$ Expenses (Pass thru)	Encumbrances	Obligations
Dimmit	0-0			
LaSalle	0-0			
Zavala	2-0	\$3,648.22		
Maverick	1-1			
Val Verde	2-2	\$2,154.86		\$3,012.76
Kinney	2-0			
Uvalde	1-0			
Edwards	0-0			
Real	0-0			
Total	8-3	\$5,803.08	0	\$3,012.76
SNAP				
County	Enrolled/Outreached	\$ Expenses (Pass thru)	Encumbrances	Obligations
Dimmit	1-13	\$100.00		
LaSalle	1-9			
Zavala	2-23			
Maverick	0-58			
Val Verde	2-70	\$240.00		
Kinney	0-0			
Uvalde	4-36	\$200.00		
Edwards	0-0			
Real	0-0			
Total	10-209	\$540.00	0	0

SEAL				
County	# of clients	\$ Expenses (Pass thru)	Encumbrances	Obligations
Dimmit	8			
LaSalle	0			
Zavala	4			
Maverick	18			
Val Verde	9			
Kinney	5			
Uvalde	11			
Edwards	1			
Real	4			
Total	60	0	0	0
TANF Initiative				
County	# of clients	\$ Expenses (Pass thru)	Encumbrances	Obligations
Dimmit	7			
LaSalle	3			
Zavala	5			
Maverick				
Val Verde				
Kinney				
Uvalde	7			
Edwards	4			
Real	4			
Total	30	0	0	0