

Individual Service Strategy (ISS) Policy – Youth Approved June 7, 2019

Purpose:

This policy establishes the requirements for Workforce Innovation and Opportunity Act (WIOA) Title I service contactors to develop and utilize an Individual Service Strategy (ISS) form for eligible youth participants.

Required:

WIOA requires that eligible youth have an ISS which identifies the participant's goals, skills, and abilities. Services are tailored to address the unique strengths, challenges and needs of each participant. Assessments are the foundation of proficient planning and overall effectiveness in case management.

The WIOA Youth Program must be structured around the coordination and delivery of services representative to the needs of the youth. This is accomplished by utilizing the menu of the 14 WIOA program elements required to be offered and available to every participant.

Policy:

Upon enrollment into the WIOA Youth Program an ISS must be developed with each youth and a hard copy must be place in the youth's file. The ISS must be updated to reflect progress toward educational/career goals or when the participant's circumstances change. The 14 program elements as per WIOA for Youth Services include:

- 1. Tutoring, study skills, training or instruction services
- 2. Alternative Secondary School Services HSE
- 3. Paid and / or unpaid work experience, internship or job shadowing services
- 4. Occupational skills training
- 5. Leadership development services / referrals
- 6. Supportive services
- 7. Mentorship services
- 8. Comprehensive Guidance and Counseling referrals
- 9. Follow-up services
- 10. Financial literacy education
- 11. Entrepreneurial skills training
- 12. Labor market information
- 13. Transition to post-secondary education
- 14. Workforce preparation / occupational skills



Procedure:

The ISS is developed by utilizing the information gained during the intake process. The youth's needs and barriers are considered and used as a guide for appropriate service delivery. Reliable and valid assessment instruments are used to assist in the decision-making process. Once a baseline is identified then measurable objectives are established.

For each participant, the ISS will identify and document the following; using the form in Appendix A:

- 1) Appropriate achievement objectives;
- 2) Educational/employment goal(s);
- 3) Current academic status, skill levels and prior work experience;
- 4) Establish participant's needs for supportive services;
- 5) Refer to appropriate services /programs;

Local labor market information can be taken into consideration in the development of the ISS.

Information regarding an individual's medical condition or disability should not be detailed in OSOS; however, it must be maintained in the participant's file.







Individual Service Strategy (ISS) Form

Name of Youth	OSOS ID#				
Case Manager					
Service Plan Dates	Intak	e Date			
Strengths (Ask youth about their in discuss results of assessments – e	_)		
Comprehensive Needs Assessmen	•	inadequate supply of the followin Substance Abuse	g)		
Housing Treatment Medical	Clothing	Substance Abuse			
Emotional/Mental Health Treatment		<u></u>			
	ucation	Vocation			
Legal	Family Support	Self-Concept/Esteer	n		
Life Skills	Food	Parenting Skills			
Recreation/Cultural/Leisure Activ Other					
"Checklist for Success" (Needed S					
Short-term Housing (shelter)		edical Exam (Physical/Prenatal)			
Identification Documents		g-term Housing (TLP/Apt)			
Public Assistance Child Care Placement	SAT	rrep dividual Counseling			
Tutoring		e Skills			
Educational Enhancement		e Skills ily Reunification			
Parenting Classes		tal Health Intervention			
High School Diploma		ellness and Well-being			
Substance Abuse Intervention		onal Training			
Cultural Enrichment	Community S	_			
Career Exploration	Employme				
Legal Assistance					
Other					



Current Education	nal Sta	atus (grade	completed):						
Last School Attended:										
Documented Lea	rning I	Disabilitv: Y	⁄es	No						
		_								
Limited English S	KIU: YE	es No	!							
Employment History										
Employer		Address	S	Jo	ob Titl	le	S	tart Date	End Date	Reason
				•			•			
Required Program elements										
Tutoring, Study Skills, Training, or	ļ	Description								
Instruction Services		Date to begin	1	1	/ Not needed Will provide a			vide at a later da	ate	
Alternative Secondary School Serv	ices	Description								
/ HSE		Date to begin	1	1	1 1	Not need	ed	Will pro	vide at a later da	ate
Paid and / or Unpaid Work Experies	nce	Description								
Internship, or Job Shadowing Services		Date to begin	1	1	1 1	Not needed Will provi		vide at a later da	ate	
		Description			1 1		<u> </u>			
Occupational Skills Training		Date to	/	/	1	Not need	ed	Will pro	vide at a later da	ate
Leadership Development Services / Referrals		begin Leadership	development	<u> </u>			Sui	pportive ser	vice activities	
		Regular co	ntact with par	ticipant's e	employ	yer	Tra	cking progre	ess in employme	ent and training
			ed peer suppo		-:		1	ult mentorin	-	
		Assistance in securing better paying jobs, career development, addressing work related proband further education					lated problems			
		Linkages to community services Transportation								
							Housing			
Supportive Services	-	Referrals to medical services Food Uniforms or other appropriate attire Work related tools or safety gear					ar			
		Other Other appropriate attire work related tools of safety gear								
		Description								



Date to

begin Description

Mentorship Services

/

Not needed

Will provide at a later date

Comprehensive Guidance and Counseling Referral(s)	Date to begin	1	/	Not needed	Will provide at a later date
Follow-up Services	Description Estimated date	to begin (aft	er exit)	/ /	
Financial Literacy Education	Description Date to begin	/	/	Not needed	Will provide at a later date
Entrepreneurial Skills Training	Description Date to begin	/	/	Not needed	Will provide at a later date
Labor Market Information	Description Date to begin	/	/	Not needed	Will provide at a later date
Transition to Post-Secondary Education	Description Date to begin	1	/	Not needed	Will provide at a later date
Workforce Preparation/Occupational Skills	Description Date to begin	/	/	Not needed	Will provide at a later date

"To Do List" (Goals/Action Steps) Goal #1 (describe how goal is tied to career pathway)				
goal, projected a	- · · · · · · · · · · · · · · · · · · ·	, persons/organizations involved to help youth reach h goal, and which, if any, performance indicator the ment)		
2.				
3.				
Incentive	Date Received	Youth Signature		
Goal #2 (describ	e how goal is tied to care	eer pathway)		



For each goal, describe the action steps, persons/organizations involved to help youth reach goal, projected and actual dates to reach goal, and which, if any, performance indicator the goal is tied to (e.g. placement in employment)

1.				
2.				
3.				
Incentive	Date Received	Youth Signature		
Goal #3 (describ	e how goal is tied to caree	er pathway)		
goal, projected a		persons/organizations involved to help youth reach goal, and which, if any, performance indicator the ent)		
2.				
3.				
Incentive	Date Received	Youth Signature		
Goal #4 (describe how goal is tied to career pathway)				



goal is tied to (e.g. placement in employment)					
1.					
2.					
3.					
Incentive	Date Received	Youth Signature			
Goal #5 (describ	e how goal is tied to card	er pathway)			
goal, projected a		persons/organizations involved to help youth rea h goal, and which, if any, performance indicator the ment)			
1.					
2.					
3.					
Incentive	Date Received	Youth Signature			

For each goal, describe the action steps, persons/organizations involved to help youth reach goal, projected and actual dates to reach goal, and which, if any, performance indicator the



Signature of You	ith Date		Signature of Staff	Date
ISS Review Dates	(insert date)	(insert date)	(insert date)(ins	ert date)
Initials:				
			Youth/Staff	
Referrals:				
Date:	Agency:			
Service Provided:				-
Date:	Agency:			
Service Provided:				-
Date:	Agency:			
Service Provided:				_