



## Workforce Innovation and Opportunity Act Policy Letter No. 1X-XX

To: Workforce Innovation and Opportunity Act Local Workforce Development Boards Directors, Fiscal Agents, and OhioMeansJobs Center Operators

From: Kimberly Hall, Director

Subject: Implementation of Workforce Development Services Under the Opioid Emergency Recovery grant

### I. Purpose

To define participant eligibility, allowable services, and other policy parameters to enable participating local workforce development areas (local areas) to implement and deliver opioid emergency grant services.

### II. Effective Date

Immediately

### III. Background

Opioid use disorder and overdose deaths have become the most pressing public health issue and workforce challenge facing Ohio. According to the Ohio Chamber of Commerce, half the businesses surveyed report suffering the consequences of substance abuse in the form of absenteeism, decreased productivity, and worker shortage. The effects of the crisis in Ohio and other states prompted the President to declare an opioid epidemic national health emergency on August 10, 2017. The U.S. Department of Labor (DOL) then published Training and Employment Guidance Letter No. 4-18 to provide instructions on how states could apply for Disaster Recovery Dislocated Worker Grants to respond to the opioid crisis.

In response, the Ohio Department of Job and Family Services (ODJFS) applied for and received an \$11 million discretionary National Health Emergency Disaster Recovery National Dislocated Worker Grant. This time-limited grant will be used to:

- Facilitate community partnerships that are central to dealing with this complex public health crisis;
- Provide training that builds the skilled workforce in professions that could impact the causes and treatment of the opioid crisis: addiction treatment, mental health, and pain management;
- Ensure the timely delivery of appropriate, necessary career, training, and support activities to eligible participants, including participants who have been impacted by opioid use, to promote successful reemployment;
- Create temporary disaster-relief employment that addresses the unique impacts of the opioid crisis in affected communities; and
- Increase engagement with and support for employers to modify hiring practices and drug-free work place policies that ensure more job opportunities and job retention.

#### **IV. State Requirements**

As the state workforce agency and grantee, ODJFS shall:

- Submit grant applications, modifications, quarterly reports, and other communications to DOL on behalf of the local areas;
- Assign a project manager to serve as the point-of-contact and coordinator of grant related resources and information;
- Review and approve implementation plans and budgets submitted by the local areas;
- Manage grant funds including the determination of sub-award amounts;
- Manage incremental funding to local areas and potential revisions to such awards to address underspending, ensure maximum investment of the available resources, and take action designed to ensure ODJFS qualifies for the second and third funding increment from DOL;
- Form and/or enhance partnerships with other state agencies and initiatives to implement a comprehensive statewide response to the opioid crisis, such as collaboration with RecoveryOhio to leverage work with other state departments, boards, and commissions and partnership with the Ohio Bureau of Workers Compensation (BWC) to educate employers about substance use and recovery and to encourage establishment of Second Chance policies; and;
- Provide technical assistance to local areas and other stakeholders on the terms and conditions of the Opioid Emergency Recovery grant.

## **V. Local Workforce Development Area Requirements**

The Opioid Emergency Recovery grant is a national Disaster Recovery Dislocated Worker grant issued to local areas under the authority of the WIOA subgrant agreement between ODJFS and each local area. Therefore, local areas must implement the grant-funded services and activities in accordance with the terms and conditions of the WIOA subgrant agreement, along with the requirements found in this policy letter.

### **A. Local Area Planning**

Local areas must submit a budget and implementation plan describing the partnerships, service design, planned number of participants, and other details for implementing the Opioid Emergency Recovery. Local area plans and budgets must be submitted by September 30, 2019. Local areas that have not submitted a plan and received OWD approval will not be eligible to receive the second increment of funding when DOL releases the state's second increment.

As changes to the local plan occur, such as the provision of new services not identified in the plan or significant changes in the number of planned participants, local areas must submit to the designated ODJFS project manager a revised implementation plan explaining the changes as soon as possible, but no later than 30 days after each change.

### **B. Eligible Participants**

Local areas shall ensure that individuals served under the Opioid Emergency Recovery grant have met all eligibility criteria, including those in 20 C.F.R. § 687.170(b)(1)(i) – (iv), and the policy letter on adult and dislocated worker eligibility.

Individuals eligible to receive Opioid Emergency grant services must be one of the following:

1. A dislocated worker;
2. An individual temporarily or permanently laid off as a consequence of the opioid emergency;
3. A long-term unemployed individual; or
4. A self-employed individual or became unemployed or significantly underemployed as a result of the opioid crisis.

The eligible individuals are not required to have a history of opioid use disorder to qualify for Opioid Emergency Recovery grant services and cannot be required to disclose whether they have been impacted by the opioid crisis as a condition of participation. However, to target services to individuals impacted by opioid use disorder and to make appropriate referrals, local areas may only ask applicants or participants the following optional question:

Your answer to this question is voluntary. Do you, a friend, or any member of your family have a history of opioid use? Please answer “Yes,” or “No.”

Local areas must treat applicant and participant responses to the above question as confidential information, along with any other medical information obtained from applicants or participants or shared by partners, mental health providers, addiction recovery centers, or other organizations pertaining to the individual’s health, disability, or medical conditions. If the above question is presented on a form, it must be separate from the WIOA intake or assessment forms. In accordance with 29 C.F. R. § 38.41(b)(3), the confidential information must be:

- Used only for determining appropriateness for services;
- Maintained in a separate file apart from the WIOA case file;
- Locked up or otherwise secured (such as through password protection if maintained in an electronic system); and
- Restricted from access by unauthorized individuals.

### **C. Opioid Disaster Grant Communities**

Extensive research has shown that the opioid crisis in Ohio is so pervasive in multiple impact categories that disaster recovery requires a comprehensive approach.

Data for each county in the state was reviewed for four key categories of impact: A. overdose mortality rates, B. costs per capita of opioid abuse (costs for health care and treatment, criminal justice, lost productivity among current opioid users, and lost productivity due to overdose deaths), C. limited or no access to medication-assisted treatment, and D. the percentage of children entering County Children Services custody due to parental opioid use.

Ohio then organized the counties into nine Opioid Emergency Recovery grant communities according to the combination of common impacts they are experiencing. These categories and corresponding communities can be found in Attachment B to this policy.

Local areas shall ensure that each county provides allowable activities in the assigned community.

After determining the impacts experienced by each community, Ohio further identified the humanitarian and clean up needs as well as the healthcare, treatment, and training needs specific to those communities.

#### **D. Allowable Services and Activities**

In planning and implementing services under the Opioid Emergency Recovery grant, local areas should consider that the grant is meant to alleviate the devastating effects of the opioid crisis through:

- Disaster-relief employment aimed at alleviating the issues caused by the opioid crisis in affected communities;
- Career, Training, and Supportive services for eligible participants aimed at increasing the number of qualified professionals in fields that can have an impact on the opioid crisis;
- Providing a full array of workforce services to eligible participants who disclose that they have been impacted by the opioid crisis, in an effort to reintegrate them into the workforce; and
- Increasing engagement with and support for, employers to modify their hiring practices and drug-free workplace policies to ensure job opportunity growth and greater job retention.

Participants enrolled in disaster-relief employment may be co-enrolled in employment and training activities and receive supportive services. Individual enrollment in temporary employment is limited to 12 months or 2,040 hours.

In addition to disaster-relief employment, participants (both those who are and those who are not enrolled in disaster-relief employment) may receive employment and training activities.

Participants may only be enrolled in:

- Disaster-relief employment only
- Employment and training activities only; or

- Both disaster-relief employment and employment and training activities. These may occur concurrently, or one may occur prior to the other.

All employment and training activities must take one or both of the following approaches:

- Reintegration of eligible participants who volunteer that they have been impacted by the opioid crisis. Reintegration activities include career, training, and supportive services.
- Providing career, training, and supportive services to eligible participants aimed at boosting the number of qualified professionals in fields that can have an impact on the crisis. DOL has determined that the following are fields that can have an impact: addiction treatment, mental health treatment focused on conditions that can lead to or exacerbate opioid addiction and pain management services and practices.

### Career Services

Local areas will provide basic and individualized career services such as, job search assistance, initial and specialized assessments of skill levels, career planning, and prevocational services as outlined in Workforce Innovation and Opportunity Act Policy Letter (WIOAPL) No. 15-08.1, Career Services for Adults and Dislocated Workers. Additional services for individuals may include, job coaching, peer support to address needs such as criminal history, drug relapses, probation and treatment requirements, and gaps in employment.

### Training

Training services provided under this grant must prepare eligible individuals for employment in high-growth sectors within the local economy.

Individuals who disclose that they, a family member, or friend have been impacted by the opioid crisis may be trained in any in-demand occupation, as detailed in WIOAPL 15-11, Use of Individual Training Accounts.

For individuals who state that they are not impacted by the opioid crisis or do not respond, training in: addiction treatment services, mental health treatment, pain management services and practices, and professions approved by DOL specific

to each community that will mitigate the underlying circumstances of the opioid crisis.

Long-term training may be supplemented with WIOA formula funds if the training extends beyond the grant period.

### Temporary Disaster-Relief Employment

Ohio analyzed data related to the opioid crisis for each county using four types of impacts, labeled A, B, C, and D. These impacts are further detailed in Attachment B to this policy. Counties were grouped into nine communities that have the same types of impacts and needs. A map of the developed communities can be found in Attachment C of this policy.

Disaster-relief employment must quickly address immediate, specific needs of the community. DOL approved specific types of disaster-relief jobs based on each community's needs. Disaster-relief jobs funded by the Opioid Emergency Relief grant are allowable only for jobs that alleviate the unique impacts caused by the opioid crisis, as well as jobs that provide humanitarian assistance to those impacted by the crisis, which includes: actions to save lives, alleviate suffering, and maintain human dignity. Humanitarian assistance jobs must directly relate to the effects of widespread opioid abuse.

A table that details the types of disaster-relief jobs allowable based on community assignment can be found in Attachment D to this policy.

Local Areas will use assessments (including those conducted by partners) to determine each individual's needs, interests, skills, work experience, and readiness for work compared to the requirements for the types of disaster-relief employment available to determine whether an individual will be placed in such jobs and if employment and training activities are needed prior to or during disaster-relief employment.

Temporary disaster-relief employment jobs are time-limited to 12 months (or 2,040 hours). Disaster-relief employment provides income maintenance to participants and services to the community while moving participants into permanent, unsubsidized jobs.

## Supportive Services

Grant-funded supportive services such as transportation, child care, and housing assistance; and referrals to mental health, addiction, and trauma specialists may be provided to grant participants in need of such services. Individuals with substance use disorder may be offered additional partner services such as addiction and other outpatient treatment, drug testing, support during training and employment, and referrals to health and mental health care.

Assessments completed by mental health service providers and other partners should be used to customize supportive services to each participant's needs. Local areas should review their policies to ensure that the types of supportive services needed by the population targeted for services under this grant are authorized.

## Other Allowable Services and Activities

Participants may receive Opioid Emergency Recovery grant services before, during, or after receiving treatment for substance use disorder.

The services and activities may be delivered under the local area's existing policies applicable to dislocated workers, or the local workforce development board (local WDB) may opt to implement new or revised policies specific to the Opioid Emergency Recovery grant.

Examples of such policy revisions may include:

- Extending the length of training or increasing the maximum training funds available to participants who plan to enter occupations that impact the opioid crisis;
- Permitting funding for transitional jobs to help participants with barriers establish work history, develop workplace skills, and enter or re-enter the workforce; or
- Expanding the supportive services definition and benefit limits to allow for mental health and addiction treatment and related barrier removal if not covered by Medicaid, private health insurance, or other sources.

In addition to the allowable services for eligible participants, local areas may use Opioid Emergency Recovery grant funds for activities meant to impact the crisis on a wider scale, including, but not limited to:

- Piloting innovative approaches to combating the opioid problem – for example, by supporting employers that develop second-chance policies or hire individuals in recovery;
- Using peer recovery specialists in the community to support individuals in recovery during treatment, training, and employment;
- Building the addiction and substance-abuse treatment, mental health, and pain management workforce through education and training, such as by enabling participant enrollment in the new addiction services apprenticeship being established at Ohio’s two-year colleges; and
- Facilitating peer learning and sharing of best practices through cross-discipline learning collaboratives across partner agencies.

Up to ten percent of the funds awarded to the local area may be used for administrative costs as defined in 20 C.F.R. § 683.215 that are associated with operating the grant.

#### **E. Unallowable Services and Activities**

Opioid Emergency Recovery Grant funds may not be used to pay for:

- Testing of participants for the use of controlled substances;
- In-patient treatment for substance use disorder; or
- Incentive payments to participants.

#### **F. Community Partnerships**

To address the wide-ranging impacts of the opioid crisis on the labor market, local areas must implement an integrated, comprehensive service delivery model by establishing partnerships with other organizations in the community that have expertise in treatment and recovery or that serve individuals who require assistance with employment and training to enter or re-enter the workforce.

Examples of such partnerships include, but are not limited to:

- Alcohol, Drug, and Mental Health (ADAMH) boards to coordinate treatment for individuals with substance use disorder;

- Rehabilitation facilities and other providers of evidence-based drug and alcohol addiction treatment;
- Training providers including community colleges who can offer education, credentialing, and licensure in career fields that treat substance use disorder or provide related interventions;
- Courts and the criminal justice system (e.g., county jails, state prisons, probation departments) to assist restored citizens with employment solutions to aid their transition back into society;
- Local libraries that can provide outreach and referral of potentially-eligible individuals; and
- BWC staff participating in the Safety Grant pilot program which educates employers on managing employees in recovery and adopting recovery-friendly human resource policies.
- Public children services agencies
- Recovery housing

### **G. Subrecipients and Contractors**

Local areas may enter into subrecipient agreements or contracts with public entities, not-for-profit organizations, and private-for-profit entities, including organizations that assist individuals in recovery from substance use disorder. The determination of subrecipient or contractor status must be based on the considerations in 2 C. F. R. § 200.330.

Competitive procurement of a provider that meets the definition of a subrecipient is not required but is recommended when feasible to increase the likelihood of obtaining the highest quality of services at the lowest cost.

Contractors must be competitively selected in accordance with federal, state, and local procurement rules. For-profit contractors and subrecipients may keep the profits earned from performance of grant activities. The amount of profit must be negotiated as a separate element of the overall price of the services with consideration given to the complexity, risk, past performance, and industry profit rates in the surrounding geographical area for similar work. Profits that are excessive or that are not justified using the aforementioned criteria will be disallowed and cannot be paid from grant funds.

## **VI. Reporting Requirements**

Local areas must enroll participants served under the Opioid Emergency Recovery grant in the special grant office established for this project in the State's designated workforce case management system. Participants and services must be entered under the special grant office within 30 days. The outcomes of participants in the Opioid Emergency Recovery grant will not affect the local area's WIOA performance measures, unless the local area opts to co-enroll participants in local WIOA formula-funded programs.

Local areas must request cash draws and report expenditures and other financial information using the State's designated financial reporting system, including the client tracking detail for participant-level direct service costs.

## **VII. Monitoring**

Local areas that issue subawards must assess the risk of non-compliance of each subrecipient and develop monitoring policies outlining the procedures, frequency, and methods for assuring that grant-funded services carried out by the subrecipient are compliant and for resolving any findings of non-compliance.

Through the state's monitoring system, ODJFS program and fiscal monitors will review the local area's implementation of Opioid Emergency Recovery grants, including participant file review and verification of actual expenditures, during the onsite monitoring review of the local area for compliance with all applicable federal and state laws, regulations, and guidance letters including this guidance letter. Any findings will be addressed through the state's monitoring resolution process.

## **VIII. Technical Assistance**

For additional information or to request technical assistance, contact the project manager designated by the ODJFS Office of Workforce Development to oversee implementation of the Opioid Emergency Recovery grant. To receive the project manager's contact information, email [opioidrelief@jfs.ohio.gov](mailto:opioidrelief@jfs.ohio.gov).

## **IX. References**

Workforce Innovation and Opportunity Act §§ 134 and 170, Pub. L. 113-128.

USDOL, Training and Employment Guidance Letter No. 4-18, National Health Emergency Phase Two: Disaster Recovery National Dislocated Worker Grants to Address the Opioid Crisis (September 14, 2018).

2 C. F. R. § 200.330.

20 C.F.R. §§ 683.215 and 687.

29 C.F. R. § 38.41.

ODJFS, Workforce Innovation and Opportunity Act Policy Letter No. 15-02, Adult and Dislocated Worker Eligibility, (July 15, 2015).

ODJFS, Workforce Innovation and Opportunity Act Policy Letter No. 15-08.1, Career Services for Adults and Dislocated Workers, (June 6, 2017).

ODJFS, Workforce Innovation and Opportunity Act Policy Letter No.15-11, Use of Individual Training Accounts, (January 8, 2018).

Strategies for Helping Individuals Impacted by Opioid Use Disorder, A Toolkit for Ohio's Public Workforce System.

Attachment A: Glossary of Opioid Emergency Recovery grant terms

Attachment B: Opioid Emergency Recovery Communities Targeted table

Attachment C: Opioid Emergency Recovery Communities Targeted map

Attachment D: Disaster-relief Employment table