Chester County Workforce Development Board
601 Westtown Road, Suite 381 | West Chester, PA 19382
(610) 344-5311 | TTY: (610) 280-1014

WIOA Title I Complaint, Grievance, and Appeal Procedures

I. PURPOSE

The purpose of this policy is to establish uniform procedures for receiving, processing, resolving, and appealing complaints and grievances alleging violations of the Workforce Innovation and Opportunity Act (WIOA) Title I requirements and to ensure compliance with federal and state nondiscrimination and equal opportunity regulations.

These procedures are established pursuant to:

- WIOA Section 181(c) – Grievance Procedures
- WIOA Section 188 – Nondiscrimination and Equal Opportunity
- 20 CFR Part 683, Subpart F – Grievance Procedures, Complaints and Appeals
- 29 CFR Part 38 – Implementation of WIOA Nondiscrimination and Equal Opportunity Provisions
- Pennsylvania Department of Labor & Industry Office of Equal Opportunity requirements
- Other applicable federal and state laws and regulations

II. SCOPE AND APPLICABILITY

These procedures apply to all WIOA Title I-funded programs, services, activities, and entities operating within the Chester County Local Workforce Development Area, including:

- Chester County Workforce Development Board
- PA CareerLink® Chester County
- One-Stop Operator
- WIOA service providers and contractors
- Eligible Training Providers
- On-the-Job Training (OJT) employers
- One-Stop Partners participating in the workforce delivery system
- Other entities receiving WIOA Title I financial assistance

The following individuals and organizations may file complaints or grievances:

- Applicants and registrants
- Eligible applicants

- Participants and former participants
- Employees and applicants for employment
- Employers
- Service providers
- Contractors
- Training providers
- Labor organizations
- Community-based organizations
- Other interested parties

Job Corps programs are excluded from these grievance procedures except where otherwise required by federal regulation.

III. TYPES OF WIOA TITILE I COMPLAINTS

Examples of Title I WIOA Complaints may include, but are not limited to:

- Denial of program access
- Eligibility disputes
- Improper termination from services
- Failure to provide required services
- Violations of WIOA Title I requirements
- Procurement disputes
- Misuse of WIOA funds
- Service delivery concerns
- Violations of local policy

IV. METHODS OF FILING and WHERE TO FILE

WIOA Title I Complaints may be filed:

- In person
- By mail
- By email
- Electronically
- By telephone with staff assistance

Staff shall assist individuals who require assistance reducing complaints to writing. Reasonable accommodations, auxiliary aids and services, and language assistance for Limited English Proficient (LEP) individuals shall be provided upon request. WIOA Title I

Complaints should be filed first with the Chester County Workforce Development Area WIOA Title I Complaint Coordinator:

Jeannette Roman
Chester County Department of Workforce Development
Government Services Center
601 Westtown Road, Suite 381
West Chester, PA 19380
610-344-6150 Ext. 5311
jroman@chesco.org

V. CONTENT OF COMPLAINT

Complaints can be filed using the attached complaint form. Failure to use the official complaint form will not invalidate a complaint if sufficient information is provided.

At a minimum the complaint should include:

- Complainant's name, address, telephone number, and email
- Respondent's name and address (if known)
- Description of allegations
- Date(s) of occurrence
- Supporting documentation (if available)
- Requested remedy or resolution
- Signature of complainant or authorized representative

VI. TIME LIMIT FOR FILING WIOA TITLE I COMPLAINTS

Complaints must generally be filed within one (1) year of the alleged violation unless otherwise specified by law. Complaints can be filed with WIOA Title I Complaint Coordinator as identified in Section XVIII.

VII. INFORMAL RESOLUTION

The Workforce Development Board may attempt informal resolution before a formal hearing through:

- Staff conferences
- Mediation
- Corrective action

- Settlement discussions

Informal resolution efforts shall not delay hearing rights or required regulatory timelines.

VIII. HEARING PROCEDURES

A. Right to Hearing

Any complainant whose complaint cannot be resolved informally shall be afforded an opportunity for a hearing.

B. Hearing Requirements

Hearings shall:

- Be conducted by an impartial hearing officer
- Provide reasonable advance written notice
- Allow parties to present evidence
- Allow witness testimony
- Permit representation by legal counsel or another representative
- Maintain an official record of proceedings

C. Timelines

A written decision shall be issued within sixty (60) days from the filing date of the complaint.

IX. WRITTEN DECISION

Written determinations shall include:

- Summary of allegations
- Findings of fact
- Applicable laws and regulations
- Conclusions
- Corrective actions, if applicable
- Appeal rights and deadlines

X. APPEALS PROCESS

If a complainant or respondent is dissatisfied with the local decision, or no decision is issued within sixty (60) days, an appeal may be filed with the Pennsylvania Department of Labor & Industry.

State appeals shall be processed in accordance with 20 CFR 683.600 through 683.620.

Appeals to the U.S. Department of Labor shall follow federal requirements and timelines established in 20 CFR 683.610.

Include the Pennsylvania Department of Labor & Industry appeal contact information and appeal form as an attachment.

XI. ACCESSIBILITY REQUIREMENTS

The Chester County Workforce Development Board shall ensure:

- Language assistance for LEP individuals
- Reasonable accommodations for individuals with disabilities
- Auxiliary aids and services upon request
- Accessible communications and materials
- Meaningful access to complaint procedures

XII. CONFIDENTIALITY

Complaint information shall be maintained confidentially to the maximum extent permitted by law.

Information shall be disclosed only to individuals with a legitimate need to know for complaint processing, investigation, hearing, monitoring, or legal purposes.

XIII. RETALIATION PROHIBITED

No person may intimidate, threaten, coerce, discriminate against, or retaliate against an individual because the individual:

- Filed a complaint
- Participated in a complaint investigation
- Assisted in complaint processing

- Opposed unlawful practices

Allegations of retaliation shall be investigated promptly.

XIV. RECORD RETENTION

Complaint records shall be retained for a minimum of three (3) years following final resolution unless a longer retention period is required by law.

Records shall include:

- Complaint forms
- Correspondence
- Investigation materials
- Hearing records
- Determinations
- Appeals
- Resolution documentation
- Complaint logs

XV. PUBLIC NOTICE

The Chester County Workforce Development Board shall:

- Publicly post complaint procedures
- Include complaint rights in participant orientation materials
- Make procedures available upon request
- Train staff regarding complaint procedures and rights
- Disseminate the "Know Your Rights" poster (replaces EO is the Law Poster)

XVI. EQUAL OPPORTUNITY (EO) AND NON-DISCRIMINATION COMPLAINTS

The Chester County Local Workforce Development Board (LWDB) maintains separate Equal Opportunity (EO)/Nondiscrimination Complaint Procedures to address allegations of discrimination, retaliation, or violations of Section 188 of the Workforce Innovation and Opportunity Act (WIOA), its implementing regulations at 29 CFR Part 38, and other applicable federal nondiscrimination laws.

Any complaint alleging discrimination on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, transgender status, and gender

identity), national origin (including limited English proficiency), age, disability, political affiliation or belief, or, for beneficiaries, applicants, and participants only, citizenship or participation in a WIOA Title I-financially assisted program or activity, as well as complaints alleging retaliation for asserting rights under these provisions, shall not be processed under these WIOA Title I Complaint, Grievance, and Appeal Procedures.

Instead, such complaints shall be processed in accordance with the Chester County LWDB's Equal Opportunity (EO)/Nondiscrimination Complaint Procedures, as required by WIOA Section 188, 29 CFR Part 38, and all applicable Equal Opportunity requirements.

Equal Opportunity (EO) complaints alleging discrimination under **WIOA Section 188** and **29 CFR Part 38**, which may be filed directly with the Chester County Local Workforce Development Area Equal Opportunity Officer, the L&I Office of Equal Opportunity, U.S. Department of Labor Civil Rights Center at the addresses below:

Local Workforce Development Area Equal Opportunity Officer

Jeannette Roman, EO Officer
Chester County Department of Workforce Development
Government Services Center, 601 Westtown Road, Suite 381
West Chester, PA 19380
610-344-6150, Ext. 5311
jroman@chesco.org

L&I Office of Equal Opportunity

Scott Weiant
Office of Equal Opportunity
651 Boas Street Rm 1402
Harrisburg, PA 17121
Telephone contact 717-787-1182 or 1-800-622-5422

TDD /TTY 800-654-5984
sweiant@pa.gov

U.S. Department of Civil Rights Center

Room N-4123
200 Constitution Ave.
Washington, DC 20210
202-693-6502 (voice)
202-693-6515 or 202-693-6516 (TTY)
202-693-6505 (fax)
https://www.dol.gov/agencies/oasam/centers-offices/civil-rights-center

Pennsylvania Human Relations Commission

Pittsburgh Regional Office
301 Fifth Avenue
Suite, 390 Platt Place
Pittsburgh, PA 15222
(412) 565-5395
(412) 565-5711 TTY users only
Morgan Williams, Acting Regional Director

Harrisburg Regional Office
333 Market Street, 8th Floor
Harrisburg, PA 17126-0333
Voice: (717) 787-9780, Text Telephone:
(TT/TTY): (717) 787-7279
Heather Roth, Regional Director

Philadelphia Regional Office
State Office Bldg.
110 North 8th Street, Suite 501
Philadelphia, PA 19107
(215) 560-2496
(215) 560-3599 TTY users only
Vacant, Acting Regional Director

Equal Employment Opportunity Commission District Offices

Philadelphia District EEOC Office
801 Market Street, Suite 1300
Philadelphia, PA 19107-3127
215-440-2600 (voice)
Phone Number: 800-669-4000
Alternative Phone Number:
866-408- 8075 (voice)
215-440-2606 (FAX)
800-669-6820 (TTY)
Spencer H. Lewis Jr, Director

Pittsburgh Area EEOC Office
William S. Moorhead Federal Building
Suite 1112
1000 Liberty Avenue
Pittsburgh, PA 15222
Phone Number: 800-669-4000
412-644-2728 (voice)
412-395-5749 (FAX)
412-395-5904 (TTY)
Roosevelt Bryant, Acting Director

XVII. FRAUD, ABUSE, AND MISUSE OF FUNDS

Allegations involving:

- Fraud
- Abuse
- Criminal misconduct
- Theft
- Misuse of WIOA funds

shall be referred to appropriate investigative authorities and may be handled separately from standard grievance procedures pursuant to 20 CFR 683.620.

XIX. REQUIRED ATTACHMENTS

The Chester County Local Workforce Development Board (LWDB) has established comprehensive WIOA Title I Complaint, Grievance, and Appeal Procedures that are designed to ensure the prompt, fair, and equitable resolution of complaints and grievances in accordance with applicable federal and state laws and regulations.

To support the effective implementation and administration of these procedures, the following documents and processes are incorporated by reference and maintained as integral components of this policy:

- **Complaint Intake Form** – Used to document and initiate all complaints and grievances received under WIOA Title I.

- **Appeal Request Form** - A request for an appeal may be filed when a party is dissatisfied with the local hearing decision or when no local decision has been issued within sixty (60) days of the filing of the complaint.

- **Public Notice of Complainant Rights** – Provides information regarding the rights of individuals to file complaints or grievances, applicable filing deadlines, available remedies, and protections against retaliation.

- **Complaint Tracking Form and Procedures** – Used to record, monitor, and document the receipt, processing, resolution, and retention of all complaints, grievances, and appeals to ensure compliance with WIOA Title I requirements and applicable recordkeeping standards.

These attachments will be utilized by the Chester County Workforce Development Board as applicable, to ensure consistency, accountability, and compliance with the Workforce

Innovation and Opportunity Act (WIOA), its implementing regulations, and guidance issued by the Pennsylvania Department of Labor & Industry.

Upon request, this WIOA Title I Complaint/Grievance Procedure is available in additional languages. To receive this notice in another language, please contact (610) 344-6150 or TTY at (610) 280-1014.

For program funding details in compliance with the Stevens Amendment - please visit:
https://www.chesco.org/159/Workforce-Development

ATTACHMENTS

Chester County Workforce Development Board
601 Westtown Road, Suite 381 | West Chester, PA 19382
(610) 344-5311 | TTY: (610) 280-1014

WIOA Title I Complaint Intake Form

FOR OFFICE USE ONLY

Complaint Number: _____ Date Received: _____

Received By: _____

Method Received:

☐ In Person ☐ Mail ☐ Email ☐ Telephone (Reduced to Writing)
☐ Other: _____

Date Acknowledged: _____

SECTION I – COMPLAINANT INFORMATION

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Preferred Method of Contact:

☐ Telephone ☐ Email ☐ Mail

SECTION II – REPRESENTATIVE INFORMATION (If Applicable)

Representative Name: _____

Organization (if applicable): _____

Address: _____

Telephone: _____

Email: _____

SECTION III – RESPONDENT INFORMATION

Person, Agency, Employer, Contractor, or Organization Complaint is Against:

_____

Address (if known): _____

Telephone (if known):_____

SECTION IV – TYPE OF COMPLAINT

Check all that apply.

Programmatic Complaint

☐ Eligibility Determination ☐ Denial of Services ☐ Termination from Program

☐ Failure to Provide Services ☐ Procurement ☐ Misuse of WIOA Funds

☐ Service Provider Issue ☐ Policy Violation

☐ Other (please explain:) _____

_____

Equal Opportunity (EO)/Discrimination Complaint

(Complete only if alleging discrimination or retaliation.)

Protected Basis (check all that apply):

☐ Race ☐ Color ☐ Religion ☐ Sex ☐ National Origin ☐ Age ☐ Disability

☐ Political Affiliation or Belief ☐ Citizenship/Participation Status (WIOA Beneficiaries)

☐ Retaliation

Note: Complaints alleging discrimination or retaliation are processed under the Chester County WDB Equal Opportunity Complaint Procedures in accordance with WIOA Section 188 and 29 CFR Part 38.

SECTION V – COMPLAINT INFORMATION

Date(s) Incident Occurred: _____

Location(s): _____

Please describe your complaint in detail. Include: What happened, who was involved, dates, witnesses, actions taken and any other relevant information

_____

_____

_____

_____

_____

☐ Additional pages attached.

SECTION VI – REQUESTED RESOLUTION

Please describe what action or remedy you are requesting.

_____

_____

_____

_____

SECTION VII – SUPPORTING DOCUMENTATION

Have you attached documents supporting your complaint? ☐ Yes ☐ No

If yes, please identify:

☐ Emails ☐ Letters ☐ Notices ☐ Contracts ☐ Eligibility Documents

☐ Other: _____

SECTION VIII – INFORMAL RESOLUTION

Have you attempted to resolve this issue informally?

☐ Yes ☐ No If yes, describe: _____

_____

_____

_____

SECTION IX – CERTIFICATION

I certify that the information provided in this complaint is true and correct to the best of my knowledge. I understand that knowingly providing false information may affect the processing of my complaint.

Complainant Signature: _____ Date: _____

Representative Signature (if applicable): _____ Date:_____

FOR OFFICE USE ONLY

Complaint Category: ☐ Programmatic ☐ Equal Opportunity ☐ Fraud/Abuse ☐ Procurement
☐ Other: _____

Assigned To: _____

Date Assigned: _____

Informal Resolution Attempted:

☐ Yes ☐ No Resolution Date: _____

Formal Hearing Required:

☐ Yes ☐ No Hearing Date: _____

Decision Issued:

☐ Yes ☐ No Decision Date: _____

Appeal Filed:

☐ Yes ☐ No Appeal Date: _____

Disposition: _____

_____

_____

Records Retention Date: _____

*Reasonable accommodations, auxiliary aids and services, and language assistance are available upon request at no cost. To request assistance, contact the Chester County Department of Workforce Development at **(610) 344-6150** or **TTY (610) 280-1014**.*

Chester County Workforce Development Board
601 Westtown Road, Suite 381 | West Chester, PA 19382
(610) 344-5311 | TTY: (610) 280-1014

WIOA TITLE I COMPLAINT/GRIEVANCE APPEAL REQUEST FORM

A request for an appeal may be filed when a party is dissatisfied with the local hearing decision; or no local decision has been issued within sixty (60) days of the filing of the complaint.

Appeals to the Pennsylvania Department of Labor & Industry and, subsequently, the U.S. Department of Labor, are governed by 20 CFR 683.600–620 and applicable state procedures. Applicable filing deadlines must be observed.

SECTION I – APPELLANT INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

Email Address: _____

Preferred Method of Contact:

☐ Telephone ☐ Email ☐ Mail

Role of Appellant:

☐ Complainant ☐ Respondent ☐ Authorized Representative

☐ Other: _____

SECTION II – COMPLAINT INFORMATION

Original Complaint Number: _____

Date Original Complaint Filed: _____

Date of Local Decision (if applicable): _____

Complaint Coordinator: _____

Agency/Organization Involved: _____

SECTION III – BASIS FOR APPEAL

Please indicate the reason for your appeal:

☐ I disagree with the findings or conclusions contained in the local decision.

☐ I disagree with the corrective action or remedy ordered.

☐ A local decision was not issued within sixty (60) days of filing the complaint.

☐ Procedural errors affected the outcome of the complaint.

☐ New evidence is available that was not reasonably available during the original complaint process.

☐ Other (please explain): _____

SECTION IV – APPEAL STATEMENT

Please provide a detailed explanation of why you are requesting an appeal and the specific aspects of the decision being challenged.

☐ Additional Page(s) attached.

Describe the action, remedy, or outcome you are requesting through this appeal.

☐ Additional Page(s) attached.

SECTION VI – SUPPORTING DOCUMENTATION

Please attach copies of any documents supporting your appeal, including:

☐ Original Complaint Form

☐ Local Written Determination

☐ Correspondence Related to Complaint

☐ Additional Evidence

☐ Witness Statements

☐ Other Supporting Documentation

List Attached Documents: _____

_____

SECTION VII – REPRESENTATIVE INFORMATION (IF APPLICABLE)

Name of Representative: _____

Organization: _____

Address: _____

Telephone Number: _____

Email Address: _____

SECTION VIII – CERTIFICATION

I certify that the information provided in this appeal request is true and complete to the best of my knowledge.

Signature of Appellant: _____

Date: _____

If submitted electronically, typing your name constitutes an electronic signature.

SECTION IX – APPEAL SUBMISSION INFORMATION

Appeals may be submitted to WIOA Title I Complaint Coordinator:
Jeannette Roman, EO Officer
Chester County Department of Workforce Development
Government Services Center
601 Westtown Road, Suite 381
West Chester, PA 19380
610-344-6150 Ext. 5311
jroman@chesco.org

FOR OFFICE USE ONLY

Appeal Number: _____ Date Appeal Received: _____

Received By: _____

Method Received: ☐ In Person ☐ Mail ☐ Email ☐ Electronic Submission

Appeal Accepted: ☐ Yes ☐ No Reason for Rejection (if applicable):_____

_____

_____

Date Referred for Review: _____ Final Appeal Determination Date: _____

Outcome:

☐ Upheld Original Decision ☐ Modified Original Decision

☐ Reversed Original Decision ☐ Remanded for Further Review

☐ Other: _____

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WIOA Title I Public Notice of Complainant Rights

The Chester County Workforce Development Board (CCWDB) is committed to ensuring that all individuals have the right to file complaints and grievances concerning Workforce Innovation and Opportunity Act (WIOA) Title I-funded programs, services, and activities. Complaints will be handled promptly, fairly, and without fear of retaliation.

Your Rights

You have the right to:

- File a complaint or grievance if you believe a violation of WIOA Title I requirements has occurred.
- Receive assistance in filing a complaint if needed.
- Request reasonable accommodations, auxiliary aids and services, or language assistance at no cost.
- Have your complaint reviewed in a fair and impartial manner.
- Be represented by legal counsel or another representative during the complaint process.
- Receive a written decision explaining the outcome of your complaint.
- Appeal a local decision in accordance with applicable federal and state requirements.

Filing Deadlines

- **Programmatic Complaints:** Must generally be filed within **one (1) year** of the alleged violation.
- **Equal Opportunity (EO)/Nondiscrimination Complaints:** Allegations of discrimination, retaliation, or violations of WIOA Section 188 are processed under the Chester County LWDB Equal Opportunity/Nondiscrimination Complaint Procedures and are subject to applicable federal filing requirements.

Available Remedies

When appropriate, remedies may include:

- Corrective action;
- Reinstatement of services or program eligibility;
- Other relief permitted under WIOA Title I and applicable law; and
- Written notification of findings and appeal rights.

If a local decision is not issued within **60 days** of filing your complaint, or if you disagree with the local decision, you may appeal to the Pennsylvania Department of Labor & Industry in accordance with applicable regulations.

Protection Against Retaliation

No individual may be intimidated, threatened, coerced, discriminated against, or retaliated against because they:

- Filed a complaint or grievance;
- Participated in an investigation or hearing;
- Assisted another individual in exercising their rights; or
- Opposed practices believed to violate WIOA Title I or applicable Equal Opportunity laws.

How to File a Complaint

Complaints can be filed using the established complaint form. To request a copy of this form, contact the WIOA Title I Complaint Coordinator below. Failure to use the official complaint form will not invalidate a complaint if sufficient information is provided.

At a minimum the complaint should include:

- Complainant's name, address, telephone number, and email
- Respondent's name and address (if known)
- Description of allegations
- Date(s) of occurrence
- Supporting documentation (if available)
- Requested remedy or resolution
- Signature of complainant or authorized representative

Where to File a Complaint

Jeannette Roman, EO Officer/WIOA Title I Complaint Coordinator
Chester County Department of Workforce Development
Government Services Center
601 Westtown Road, Suite 381
West Chester, PA 19380
Phone: (610) 344-6150 Ext. 5311
TTY: (610) 280-1014
Email: jroman@chesco.org

This notice is available in alternate formats and languages upon request. To request language assistance, reasonable accommodations, or auxiliary aids and services, please contact the Chester County Department of Workforce Development at **(610) 344-6150** or **TTY (610) 280-1014**.

WORKFORCE DEVELOPMENT AREA/STATE EMPLOYMENT SECURITY COMPLAINT LOG

DATE RECEIVED	DOCKET NUMBER	COMPLAINANT'S NAME & ADDRESS	CATEGORY						ALLEGED DISCRIMINATION	REFERRED TO OTHER			OTHER AGENCY NAME	DATE INVESTIGATION COMPLETED	CHECK ONE		DATE FINDINGS AND RECOMMENDATION SENT TO RESPONDENT COMMENTS
			COMPLAINANT			RESPONDENT											
			STAFF PERSON OF LWDA CAREERLINK - UC SERVICE CTR	APPLICANT(A), PARTICIPANT(P) OR CLAIMANT(C)	PRIVATE EMPLOYER/ORG. REPRESENTED	STAFF OF LWDA CAREERLINK - UC SERVICE CENTER	LWDA CAREERLINK - UC SERVICE CENTER	PRIVATE EMPLOYER	NATIONAL ORIGIN RACE SEX PREGNANCY SEXUAL ORIENTATION GENDER IDENTITY COLOR RELIGION AGE POLITICAL AFFILIATION DISABILITY CITIZENSHIP PARTICIPATION IN WIOA RETALIATION OTHER	FEDERAL	STATE	NON-GOVERNMENTAL			SUBSTANTIATED	UNSUBSTANTIATED	
		None to Report															

Signature:
Date:

Location and office **SE030 Chester LWDA & PACL 104**
Quarter/Year: