System Integration Landscape Analysis:

Findings from Frontline Staff Interviews

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Contents

Acronym key

ABE – Adult Basic Education
ABAWD – Able-Bodied Adults Without Dependents
ADW – Adult & Dislocated Worker (WIOA Title IB)
ALTSA – Aging and Long-Term Support Administration (DSHS)
AWARE – Case management system used by DSB
BFET – Basic Food Employment and Training (DSHS)
CAI – Community Attributes Inc. (authors of 2018 intake study)
CET – Continuous Engagement Team (Spokane Intensive Services Team)
CRP – Community Reinvestment Project (DSHS or local variant referenced in staff example)
CRS – Common Referral System (Pierce/Workforce Central + 211)
CTE – Career and Technical Education (OSPI)
DDA – Developmental Disabilities Administration (DSHS)
DOC – Department of Corrections
DSB – Department of Services for the Blind (WIOA Title IV)
DSHS – Department of Social & Health Services
DVOP – Disabled Veterans Outreach Program (part of the JVSG umbrella)
DVR – Division of Vocational Rehabilitation (DSHS, WIOA Title IV)
EcSA – Economic Security for All
ERTW – Early Return to Work (L&I)
ESD – Employment Security Department
ETO – Efforts to Outcomes (case management system used by WIOA Title IB contractors and other WorkSource Staff)
FCS – Family and Community Services
IEP – Individual Employment Plan (WIOA)
IFA – Infrastructure Funding Agreement
JSP – Job Skills Program (SBCTC)
JVSG – Jobs for Veterans State Grant (ESD)
LNI – Washington State Department of Labor & Industries
LPA – Local Planning Area (team-level structures in some regions)
LWDB – Local Workforce Development Board
MISA – Matched Investment Savings Accounts (CRP-based asset building program)
MOU – Memorandum of Understanding
MSFW – Migrant and Seasonal Farmworker Programs (ESD)
NFJP – National Farmworker Jobs Program (run by OIC in WA)
OSO – One-Stop Operator
OIC – Opportunity Industrialization Center of WA (statewide grantee for NFJP)
OSPI – Office of Superintendent of Public Instruction
PacMtn – Pacific Mountain (LWDB/WDA 2)
PII – Personally Identifiable Information
PMT – Partner Management Team (Northwest)
RESEA – Reemployment Services & Eligibility Assessment
ROI – Release of Information
SBCTC – State Board for Community & Technical Colleges
TAA – Trade Adjustment Assistance
TAP – Talent and Prosperity for All (Washington's WIOA Plan)
W/P – Wagner-Peyser (WIOA Title III)
WAVE – Case management platform used by DVR
WDB – Workforce Development Board (interchangeable with LWDB)
WDA – Workforce Development Area
WEX – Work Experience (WIOA Youth)
WIOA – Workforce Innovation and Opportunity Act
WIOA Title IB – Adult, Dislocated Worker, and Youth Programs
WIOA Title II – Adult Education and Literacy (SBCTC)

Executive summary

Washington's Talent and Prosperity for All (TAP) plan envisions a workforce system that delivers coordinated, customer-centered services across all programs and partners. To advance this goal, the Workforce Board established a System Integration workgroup to guide implementation of the TAP System Integration initiative. This landscape analysis was conducted under the workgroup's direction to assess how integration is working in practice and to inform ongoing improvement efforts.

Observations from this analysis reflect both meaningful progress and persistent barriers. Key themes and promising practices identified across more than 130 frontline interviews include:

Top systemwide observations

- **Fragmented data and referral systems** remain the biggest barrier to integration.
- **Referrals are inconsistent and often untracked**, leading to missed connections for customers.
- **Release of Information (ROI) and privacy requirements slow coordination**, pushing staff to rely on personal workarounds.
- **High caseloads and turnover weaken continuity**, overwhelm staff, and disrupt partnerships.
- **Integration depends heavily on trust and relationships**, which vary widely across regions.
- **Past competition and leadership dynamics affect collaboration**, even when tools exist.
- **Formal integration structures work unevenly**, depending on clarity, consistency, and engagement.

Promising practices seen in local areas

- **Warm handoffs** are the most reliable strategy for successful referrals.
- **Shared digital referral tools** improve visibility and follow-through where universally adopted.
- **Structured onboarding and cross-program training** help offset turnover and build system awareness.
- **Regular multi-partner coordination meetings** strengthen alignment and problem-solving.
- **Intentional culture-building** increases trust and reduces silos.
- **Functional teams** improve co-enrollment and streamline service pathways.
- **Locally created tools** help staff navigate program connections more consistently.

This analysis provides a qualitative look at how integration is experienced by workforce system staff who work most directly with customers. It offers the TAP System Integration workgroup and state partners valuable insight into where additional research and support are most needed. Ultimately, the report reinforces that integration is not a static goal but a continuous process of coordination and trust-building, essential to creating a workforce system that is equitable, efficient, and responsive to businesses, customers and partners.

Purpose and context

In late 2018, the Workforce Board commissioned Community Attributes Incorporated (CAI) to conduct a qualitative study examining common intake practices and workforce service integration across Washington. While many findings from the initial CAI report remain relevant, the environment has changed considerably since 2018. The COVID-19 pandemic, rising inflation, and shifts in federal and state funding have reshaped program operations and altered the realities faced by staff serving job seekers across the state.

In response to partner requests for a refreshed local landscape analysis, the Workforce Board expanded the original 2018 study framework to include staff capacity, partner coordination, and other operational factors influencing service delivery. This broader lens was essential to capture the on-the-ground experiences of frontline staff whose daily case management work often determines how effectively programs integrate in practice.

In partnership with staff from the Office of Administrative Services within the Economic Services Administration of DSHS, Workforce Board staff conducted structured interviews with more than 130 service providers between April and October 2025. These participants represented a range of programs and roles across the state and provided valuable insight into both progress and persistent barriers to customer-centered workforce services.

The findings equip the TAP System Integration workgroup with actionable information about local integration efforts, promising practices, and areas of continued need. While this analysis is not intended to present a comprehensive picture of integration statewide, it offers a critical foundation for future, more detailed evaluation. By clarifying current conditions, the report helps ensure that subsequent improvement efforts are grounded in the realities of frontline implementation and informed by the perspectives of those closest to customers.

This landscape analysis offers a grounded, frontline-informed snapshot of how integration is taking shape across Washington’s workforce system. While the sample reflects a broad range of programs and regions, it captures only a portion of the statewide system, and the findings should therefore be interpreted as directional rather than comprehensive. The goal of this baseline is to surface key themes, highlight promising practices, and spark shared learning that will guide deeper qualitative and quantitative inquiry as Washington advances its system integration work.

Methods and inputs

Staff engagement and interview content

To develop as comprehensive and representative a picture as possible of local workforce service implementation, Workforce Board staff began by meeting with local leadership from each workforce agency and program. While this report cannot capture every perspective or nuance across such a large and complex system, it reflects a deliberate effort to gather broad input and establish the strongest possible baseline within the resources and time available. Local leadership then identified appropriate staff contacts, enabling Workforce Board staff to conduct interviews with frontline services staff whose day-to-day experiences provide critical insight into how integration is functioning in practice. Agencies and programs represented included:

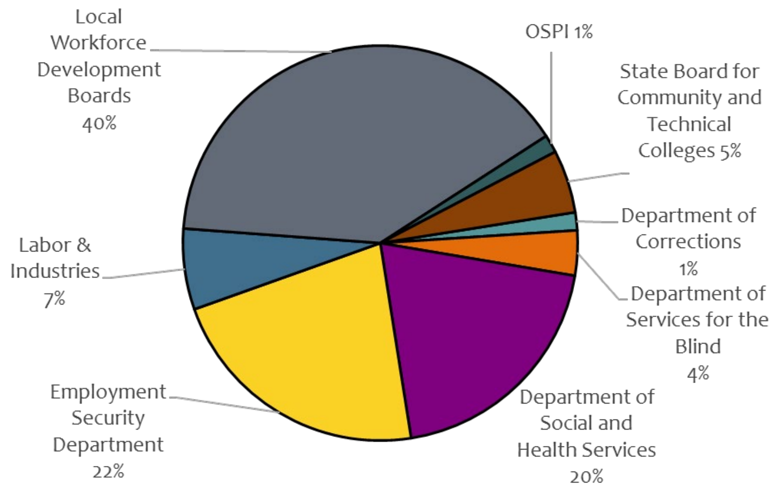
- **Department of Corrections**
- **Department of Services for the Blind**
- **Department of Social and Health Services** (DSHS): Able-Bodied Adults Without Dependents (ABAWD), Developmental Disabilities Administration (DDA), Aging and Long-Term Support Administration (ALTSA), Division of Vocational Rehabilitation (DVR), WorkFirst, Basic Food Employment and Training (BFET).
- **Employment Security Department** (ESD): Economic Security for All (EcSA), Jobs for Veterans State Grant (JVSG), Reemployment Services and Eligibility Assessment (RESEA), Reentry Services, and Migrant and Seasonal Farmworker (MSFW), Wagner-Peyser (W/P).
- **Department of Labor and Industries** (LNI): Pre-Apprenticeship, Registered Apprenticeship, and Early Return to Work (ERTW) programs.
- **Local Workforce Development Boards** (LWDBs): Local Board staff, One-Stop Operators (OSO), and Workforce Innovation and Opportunity Act Title I (WIOA Title IB) programs including Adult, Dislocated Worker (DW) and Youth.
- **Office of the Superintendent of Public Instruction** (OSPI): Secondary Career and Technical Education (CTE)
- **State Board for Community and Technical Colleges** (SBCTC): Adult Basic Education (ABE)/WIOA Title II, Job Skills Program (JSP), Customized Training Program, and Worker Retraining.

In total, more than 130 individuals participated, representing three primary groups:

- **Front desk staff** (primarily Wagner-Peyser)
- **Intensive services staff** (case managers administering wraparound services)
- **Leadership staff** (LWDB staff, service provider supervisors, agency/program regional/state leaders)

Interview protocols incorporated survey questions from the CAI study on data integration, supplemented with additional questions tailored to each group (refer to the Appendix for the full list of interview questions administered). Interview questions were customized to reflect different interviewee roles. For intensive service and front desk staff, questions focused on capacity, intake, and referral practices. For leadership, questions addressed governance and organizational structures and their role in driving integration. All participants were also asked to reflect on what was working well and where gaps persisted in partner collaboration and coordinated service delivery.

Distribution by Agency:



Quantitative Roll-Ups

Over the course of six months, Workforce Board staff conducted 135 interviews across 87 scheduled meetings. Approximately 25 of these meetings were group interviews, held either in person or virtually. Many interviewees served multiple functions within the system. For example, Title IB staff frequently carried caseloads spanning Adult, Dislocated Worker, and Youth programs; RESEA staff often supported front-desk functions under Wagner-Peyser; and in one case, a case manager simultaneously managed participants enrolled in both BFET and EcSA, with every client on her caseload co-enrolled in both programs.

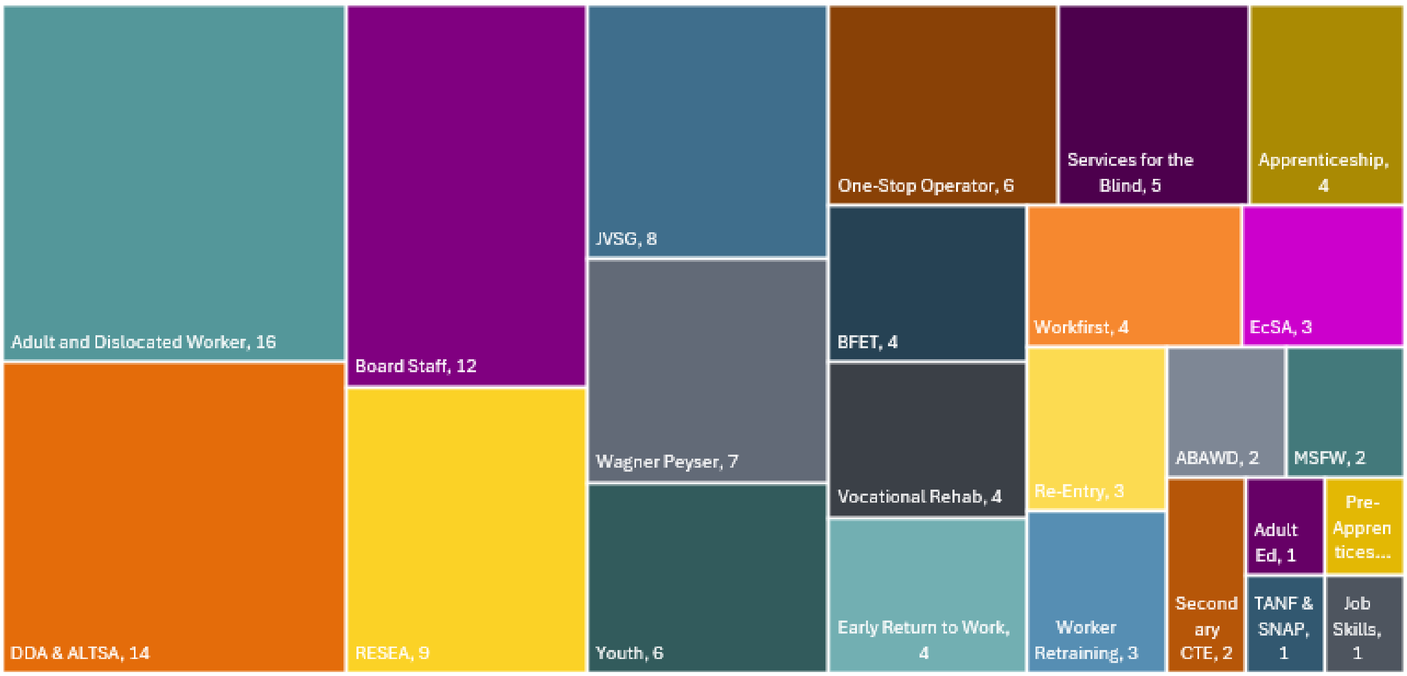
Staff based in WorkSource centers (particularly those from LWDBs, WIOA Adult and Dislocated Worker programs, DSHS, and ESD) are overrepresented in this sample. By contrast, OSPI, SBCTC, the Department of Corrections, and LNI are underrepresented.

Location	# Frontline Staff Interviewed
SeaKing	21
South Central	18
Benton-Franklin	13
Snohomish	13
Northwest	10
Southwest	10
Tacoma-Pierce	7
Pacific Mountain	4
Olympic	4
Spokane	2
North Central	1
Eastern	1
Statewide	13

Distribution by Area:

In addition, due to the timing of when structured interviews were launched, Spokane, Eastern, and North Central workforce areas are also significantly underrepresented. Future rounds of data collection should prioritize these partners and regions to ensure greater statewide balance and capture perspectives that might otherwise be overlooked.

Distribution by Program:



Observations

Repeatedly, staff described the same pattern: where systems are fragmented, caseloads are high, and trust is fragile, integration breaks down. These themes appeared across interviews regardless of program, geography, or role, and they reinforce one another in ways that shape the customer experience and staff capacity.

Data, intake, and referrals remain the most significant barriers to integration

While this section focuses on data and referral systems, staff repeatedly indicated that these issues cannot be separated from caseload pressure and turnover. The same barriers often show up as system problems, capacity problems, and culture problems simultaneously. Echoing much of the data integration findings from CAI (2018), 104 out of the 135 frontline staff interviewed described how fragmented and siloed systems slow service delivery and create barriers for both customers and staff. Intake and eligibility are often duplicated, with paperwork and assessments varying widely across agencies, forcing customers to retell their story. Case management platforms such as AWARE, eJAS, ETO, and WAVE do not connect, requiring manual tracking and duplicate data entry, while referrals frequently rely on informal methods such as phone calls, emails, or ad hoc tools like Excel, SharePoint, Smartsheet, Teams, Trello, or JotForm. Even where referral tools exist, frontline staff reported that they often route around them, leaning instead on personal networks to get timely responses or conduct warm handoffs.

Release of Information (ROI) requirements add further delays, leaving staff dependent on relationships and personal networks to move cases forward. As later sections on caseloads and culture describe, this relationship-dependent model becomes increasingly fragile when turnover is high. Interviewees emphasized that a shared, integrated database (one where workforce development programs could see how job seekers are engaging with all major workforce programs across the state) would be transformative. Such a system could reduce duplication, improve data accuracy, streamline ROIs, and strengthen shared performance outcomes. It would replace today's fragmented, person-dependent pathways with a consistent, reliable customer experience—one supported by an efficient, well-coordinated network of partners working together to help job seekers achieve their education and employment goals. The quotes on the following page are provided as illustrative examples of these issues but are not a comprehensive list of all perspectives gathered.

Data, Intake, and Referral Barriers

“Honestly, if you're going to have shared customers, you need shared systems. It doesn’t matter how bad the system is - use one. The state could save money and improve service. Right now, customers wait too long. It’s frustrating for them and us.” – JVSG, Snohomish

“ETO doesn’t give us a clean way to see activity across programs; every team keeps a Google-sheet (‘track to the future’) to stay on top of compliance and touches.” - WIOA Title I ADW, Pierce

“Integration is poor. Data sharing is minimal or non-existent, with limited infrastructure to support it.” – DDA, Statewide Supported Employment Provider

“We’re using SharePoint and AWARE, but we don’t have a centralized eligibility or intake tool shared with other partners. That’s still a huge issue because our blind customers often get bounced around or have to retell their story multiple times.” – DSB Case Manager, Northwest

“It’s frustrating when I can’t tell if a customer already has a plan with another program because everything’s siloed. We’re probably all writing different goals for the same person who’s already overwhelmed.” – Title I DW Case Manager, South Central

“I'd love to be here saying every single person who was transitioning from the facility to the community during their transition phase has a navigator to walk alongside them... But we’re not there yet. ...Now, when a person reenters society from these institutions, they must pivot to so many different people and agencies... There is a separate person for mental health, another for physical health, another for education pathways and yet another for workforce – that’s so many systems and people to navigate when they enter society and don’t even have a place to live.” – Department of Corrections, Statewide Representative

“There is persistent misalignment across systems (DDA, DVR, FCS). Intake processes are confusing, require after-the-fact clarification, and rely heavily on unpaid navigation by families or providers.” — DDA, Statewide Supported Employment Provider

“Referral process remains fragmented...some partners are limited by confidentiality or external systems. JotForm, Trello, and Excel are used as stopgap tools - a universal referral or intake system is still aspirational.” – OSO, Benton Franklin

Caseloads and Turnover

Caseloads and turnover are not just human resource concerns; they directly shape how well data, intake, and referral practices function in real life. The same patterns described above in data and referrals become more fragile and inconsistent when staff capacity is stretched. While each program delivers case-managed services with varying levels of frequency and intensity, 69 of the 135 staff interviewed reported that caseload size, staff turnover, and program funding fluctuations significantly limit their ability to coordinate and engage in proactive integration efforts. Among 77 interviewees in leadership or intensive services roles across ESD, OSPI, DVR, Title IB, Local Workforce Board and One-Stop Operator teams, 52 echoed these same constraints, citing them as primary barriers to sustained cross-program coordination. According to staff interviews, when staff are overextended, service quality declines: case managers have less time with each participant, leaving job seekers without the attention and support needed to overcome the very barriers for which they sought help. Turnover compounds the problem - not only does it force redistribution of cases onto already overloaded staff, but onboarding new hires pulls additional time and resources from an already stretched system. Because referrals and case coordination often rely on relationships between staff, turnover also disrupts informal pathways, requiring new hires to rebuild connections with partner programs before effective collaboration can resume. Combined with fragmented data systems and inconsistent referral tools described earlier, this means that every staff departure resets not only caseloads but also the informal infrastructure that keeps integration working.

A sample of caseload sizes gathered through interviews is illustrated in the graph below.

	Statewide	Southwest	PacMtn	Olympic	Northwest	Snohomish	Pierce	SeaKing	South Central	North Central	Benton Franklin
OSPI CTE			400			1500					
Adult Ed & iBest								500			
Early Return to Work				100	70						
DDA & ALTSA - Navigator	75										
Adult Ed Navigator										100	
EcSA		40						100			
DVR		80		80							
DSB							60	60	60		
BFET		60							35		
Title 1		100	25		60		60	25	32		
DDA & ALTSA - LTC Navigator	40										
Re-Entry									30		
Apprenticeship	25										
JVSG						10		35			30
Workfirst		30	13		15			25			20
RESEA			14					28			8
NFJP					7						

While not comprehensive, the graph highlights stark variation across programs. The heaviest caseloads were reported in the OSPI system, where one counselor in Snohomish managed more than 1,500 students (an entire high school), providing support on High School and Beyond Plans (similar to WIOA Individual Employment Plans), career and technical education participation, and work-based learning opportunities. Counselors in Thurston County reported more typical caseloads of around 400 students.

LNI's Early Return to Work (ERTW) program had the second highest caseloads, with case managers carrying 100–150 participants. Unlike many programs, ERTW reported little to no turnover, as participants are highly motivated to comply to maintain access to benefits. Workforce navigators across the system have similarly broad caseloads, often providing only light-touch support such as initial orientation or serving as an as-needed contact for job seekers trying to connect with other systems that have more access to direct funding.

By contrast, DVR counselors averaged 80 cases, with some areas reporting triple-digit caseloads due to turnover and reassignment. One counselor reported temporarily managing more than 150 cases at one point in a recent program year. DVR cases also tend to be long-term, often lasting two years or more and sometimes up to a decade, making large caseloads especially challenging. DSB staff reported about 60 cases each, also with multi-year timelines. EcSA case managers in one area carried caseloads of around 100 due to ambitious enrollment goals on short timelines.

Title IB Adult, Dislocated Worker, and Youth caseloads varied significantly by region. Seattle, PacMtn, and many eastern Washington areas reported caseloads of around 30 participants per Title IB staff member, while other western areas carried 60–100, sometimes higher. Local strategies shaped these differences: for example, Northwest's focus on LPN training, which takes two or more years to complete, led to longer case retention and higher numbers. In other cases, turnover and contractor changes forced remaining staff to absorb caseloads left behind.

While OSPI's student-to-counselor ratios reflect systemic underfunding, and ERTW's program design allows larger caseloads, triple-digit caseloads in programs like DVR, EcSA, DSB and Title IB are neither sustainable nor effective. It should also be noted that in these compliance-heavy programs, new staff need at least a year to fully master their own program, and longer to understand the broader workforce ecosystem. When turnover occurs, cases are either transferred to colleagues, increasing their burden, or assigned to inexperienced new hires and both scenarios raise the risk of burnout. Without systemic interventions, this cycle continues to erode service quality and undermines integration efforts across the state.

Caseload and Turnover

"Turnover… makes it really difficult to speak every day to clients about self-sufficiency when your own staff feel overwhelmed, overworked, underpaid." – Title IB, Southwest

"One of the biggest barriers to system integration is the loss of institutional knowledge when experienced staff leave….Federal budget changes and staffing reductions have made it harder to secure consistent partner engagement, particularly with colleges." – LWDB Staff, SeaKing

"We used to have a 75/25 split – 75% of funds were for our team for like our salaries and whatnot. And 25% was for participants spending. This year leadership changed it to a 55/45. So, staffing went down, training dollars went up and support service dollars went up… And that's kind of a catch 22, right? Because it's like, you get to serve more people, but it's hard because your capacity has shrunk and all of a sudden, your volume expectations have gone way up." — WIOA Title IB Youth, Pierce

"High staff turnover and program complexity lead to knowledge loss and training burdens… Cross-sector orientation and onboarding need to be standardized and simplified." – DDA & ALTSA Community Employment Alliance, Statewide

Culture, relationships, and structures as drivers of integration

Culture and relationships sit on top of and often compensate for the same data and capacity constraints described in earlier sections. Where trust is strong, staff can partially work around system fragmentation and high caseloads; where trust is weak, those underlying barriers are magnified. Out of the 135 staff members interviewed, 82 emphasized that trust and relationships are the foundation of effective integration across workforce programs and agencies. According to staff, when strong relationships exist (through co-location, warm handoffs, regular meetings, or informal gatherings like "Coffee Connects" and potlucks), partners can coordinate services smoothly, share clients through referrals, and create a sense of team culture. These relational practices often succeed in bridging gaps left by fragmented data systems or inconsistent policies. Staff repeatedly described that referrals and co-enrollments flow best when they are built on personal trust and mutual understanding among program staff.

By contrast, while 82 staff emphasized that partner trust and relationships are essential to system integration, 55 of those same 82 staff members also reported that distrust and weak relationships (past or present) have hindered integration efforts regardless of how strong the structural systems may be. In one local workforce area, for example, staff recalled that several years ago colleagues avoided collaboration, barely looked up from their desks, and hesitated to ask questions for fear of appearing incompetent. This lack of trust undermined integration efforts until leadership introduced deliberate strategies to rebuild relationships: front desk duties were shared equitably across programs, staff from different agencies were seated together to encourage daily interactions, and weekly meetings (both formal and informal) reinforced communication. Team building activities also helped shift the culture. Building on the data and capacity issues described in earlier sections, competition between providers (especially when contracts shift and one organization displaces another) was also noted as a source of lingering distrust. Even high-quality referral platforms or MOUs are often bypassed if staff lack confidence in their partners.

At the same time, formal integration structures play a critical role in reinforcing trust and collaboration when they are designed intentionally. Consortiums, trios/quads, and functional teams can align partners, but their effectiveness depends on whether they are used as vehicles for coordination and joint problem-solving. The WorkSource One-Stop Operator role can likewise serve as either a compliance function or a convening force that deepens relationships. Similarly, MOUs and IFAs are most impactful when treated as genuinely shared commitments rather than paperwork requirements. Local innovations like "Fab Five" leadership groups, culture committees, and center design teams show how intentional structures can nurture trust, align priorities, and embed collaboration into the system. These mechanisms do not replace relationships, but they institutionalize them, ensuring that integration survives turnover, funding shifts, and leadership changes.

Ultimately, system integration is as much about culture as it is about structure. Tools, policies, and governance mechanisms are necessary but insufficient on their own; they only succeed when underpinned by trust, communication, and a shared sense of purpose among partners. Where relationships and structures reinforce each other, integration thrives.

Culture and Relationships

"Trust has been the biggest barrier to integration, with mistrust between partners trickling down to frontline staff due to past leadership dynamics. As new leaders emerge, relationships are improving, and functional teams built on collaboration, communication, and peer-driven cultural change are helping rebuild trust and engagement across the system." – LWDB Staff, Benton Franklin

"Integration gaps are often caused by a cultural and operational disconnect between partners." – RESEA Case Manager, PacMtn

"Warm handoffs and relationship-building across agencies (especially DVR and Worker Retraining)" were identified as best practices. – Title I Case Manager, PacMtn

"Relationships are seen as the primary driver of integration, often overriding structural or policy barriers... Co-enrollment and cross-referrals depend on trust, consistency, and proactive communication... Weekly huddles, onboarding with WorkSource internal trainings, and celebration events support a strong partner culture... Historical conflict, lack of communication, and siloed cultures have been replaced by trust building and shared accountability." – LWDB Staff and OSO, South Central

"We have supervisor meetings every other week... and professional development days once a quarter... It just gives you kind of like a space to just be together and build genuine relationships." – ESD Admin, Southwest

"Even with turnover, this WorkSource has systematically created a culture that they are one team. The stability with that mantra and at the supervisor level prevents that destabilization." – Early Return to Work, Pierce

"A local OSO consortium was formed from Titles I-IV (plus OIC of Washington), expanded to five core members... The consortium focuses on customer first functional team design and service delivery integration. It's been working well for operational issues and cascading communication strategies." – OSO, Benton Franklin

"The board staff have influence, but decisions are collaborative and vetted by the Trio/Quad, which provides collective leadership to effectively guide center-wide decisions.... The trio leadership structure (board staff, ESD, Title I) only works when there's trust. In places where personalities clash, integration falls apart." – LWDB Staff, Benton Franklin

Innovative practices for further study

Warm handoffs and universal referral systems

Across all local areas, 39 out of the 135 frontline staff and leadership emphasized that warm handoffs (meaning staff personally accompanying a customer to another program's case manager, in-person) are the most effective referral practice. This approach not only preserves rapport with the customer but also strengthens collaboration between case managers who share responsibility for client success. When in-person warm handoffs are not possible, staff noted that joint phone calls or emails made alongside the customer can still foster trust and continuity, though these are consistently seen as less effective than face-to-face introductions.

When staff use additional methods beyond warm handoffs, they often route referrals through structured systems. Among the 135 frontline staff interviewed, 37 identified universal referral forms within their local area or organization as an effective practice. Many noted that combining warm handoffs with a standardized referral tool and process yields the most effective results. These systems vary significantly. For example:

- **The Link Project** in South Central provides a menu-of-services tool displayed on Resource Room computers. Customers can use it to connect with local programs that meet their needs, including both workforce services and basic supports beyond what workforce programs typically offer.
- In the Northwest and Olympic areas, **Cognito Forms** is used as a digital referral tool that allows WorkSource center partners to connect job seekers to Title IB Adult, Dislocated Worker, and Youth programs. In Northwest, any partner staff or job seeker can access the digital form via a link when a customer needs Title IB services. Once submitted, the form is automatically routed to supervisors within the application, with an email notification alerting them to the new referral. Once received, Title IB supervisors assign cases based on caseloads, and case managers contact the referral within three business days to begin enrollment. Cognito also includes a feature that allows referrals to be sent directly to case managers and provides Title IB administrative staff and OSOs with the ability to track referral outcomes. Where this feature is fully utilized, staff reported greater visibility into referral progress and a stronger ability to ensure successful connections to Title IB programs.
- In Spokane, **JotForm** is used as a digital referral tool by Title IB and Title III Resource Room staff to connect job seekers directly to the Continuous Engagement Team (CET). The CET includes staff prepared to co-enroll customers in Title IB Adult, Dislocated Worker, BFET, EcSA, and MISA programs in one meeting. Like Cognito, JotForm referrals go directly to CET inboxes and include tracking features that allow Title IB staff to monitor outcomes and ensure referral loops are closed.
- Workforce Central (Pierce County) uses a universal referral platform **(CRS) operated by 211**, paired with consistent warm handoffs and formal tracking of partner responses.

Meanwhile, other areas still depend on paperwork via email or simply giving customers a phone number or website with little follow-up. In areas where there is no structured, universally-used referral system, respondents reported that referral outcomes are inconsistently or rarely tracked, and referral processes tend to reflect program silos rather than integrated service delivery.

Although several programs use digital referral tools, it is rare for an entire workforce area to adopt one universal referral system across almost all partners. One notable exception (as listed above) is Workforce Central, where leadership has combined warm handoff practices with a single referral process used by all partners. Despite having some of the highest foot traffic in the state in recent program years, Pierce secured broad partner buy-in (reinforced through MOUs and partner meetings) and partnered with United Way's 211 to build the Common Referral System (CRS).

Workforce Central's Common Referral System (CRS) is operated through United Way's 211 and was launched in 2018 as a universal referral platform intended to connect individuals to a wide range of services. The system was designed to function across multiple domains (including housing, behavioral health, workforce and training, and reentry services), bringing together both workforce and non-workforce partners under one coordinated referral process.

Over time, the CRS has gone through several iterations, largely due to concerns about personally identifiable information (PII) and confidentiality of case notes. Historically, participating partners designate a navigator who reviews referrals submitted through the CRS platform. With United Way staff tracking referral responses, partner-designated navigators are responsible for connecting customers to appropriate services, ensuring accountability and continuity in the process.

Notably, while this tool is used by all partners and referral outcomes are tracked, the tool is not designed to track whether a customer was successfully enrolled (nor do any of the tools listed above) in programs referred to. Participation in the CRS has also varied by agency - some partners were unable to fully engage due to agency-level restrictions on entering data that could conflict with confidentiality and PII policies. These limitations highlight both the promise of universal referral systems in advancing integration and the structural barriers that can emerge when agency policies and compliance requirements are not fully aligned.

Taken together, Workforce Central's universal CRS and consistent warm handoff practices stand out as one of the strongest integrated referral models observed statewide.

Intentional onboarding and training

Some local areas attested that they had successfully mitigated the effects of staff turnover by investing in structured onboarding and ongoing training. Of the 135 frontline staff interviewed, 34 identified these practices as effective, particularly when staff and partners could be genuinely engaged and committed to the learning process. Additionally, 22 staff expressed a desire for more cross-program training to better understand the full range of services available across the workforce development system. Effective staff training strategies included up-front, program-wide orientations, accessible desk aids, and recorded training courses that provide an overview of each partner program, the populations served, and available services.

South Central demonstrates this innovative practice by requiring all new staff to complete recorded training courses that provide a foundational understanding of the wide array of programs operating in the region. These trainings span workforce, education, and community-based support, ensuring that every new hire begins with basic knowledge of the broader service ecosystem. By embedding this expectation into onboarding, South Central equips staff to navigate program connections more effectively from the start, fostering better integration and continuity of service for customers. They also provide each staff member inside the WorkSource center with a concise, user-friendly desk aid that simply summarizes each program on a single page, making critical information easy to reference in daily practice. This approach equips new hires to speak knowledgeably about partner programs on a moment's notice, accelerating their ability to make effective referrals and support integrated service delivery.

Regular coordination structures

Out of the 135 staff members interviewed, 63 identified that intentional structures for coordination also help counterbalance turnover by ensuring all staff remain aligned on multiple levels despite turnover rates. Integrated centers routinely scheduled staff meetings to review updates, troubleshoot shared challenges, and synchronize case management approaches. South Central again provides a strong example, convening weekly WorkSource-wide meetings, monthly OSO-led leadership sessions, and quarterly partner representative meetings. These layers of coordination ensure that staff at all levels (from frontline to administrators) remain informed and connected.

Similarly, the Northwest Local Workforce Board has institutionalized quarterly Partner Management Team (PMT) meetings that bring together local senior representatives from Job Corps, community colleges, DVR, ESD, DSHS, LNI, and the local board. Facilitated by the One-Stop Operator, these sessions focus on partner updates, resource alignment, service gaps, and labor market information, fostering intentional cross-agency planning and a culture of shared accountability.

Across the state, other promising models include:

- **Benton-Franklin's OSO Consortium**: A cross-program structure involving the OSO, Title IB, Title II, ESD, DVR, and OIC, focused on continuous performance and process improvement and other aspects laid out in their MOU.
- **Southwest's "Fab Five"**: Regular collaborative meetings among ESD, WIOA Title IB contractors, and LWDB staff. These meetings build rapport among program leads allow for cross program coordination and strategic planning.

- **Workforce Central's Center Design Team:** A standing committee focused on leading integration and problem-solving efforts, involving ESD, Title IB, LNI, DVR, and business services frontline staff.

These coordination structures varied in formality and frequency, but interviewees consistently emphasized that when leadership offers visible and consistent support, they have the greatest potential to move integration efforts beyond compliance and toward meaningful collaboration. Several staff also noted that these structures (often built around regular check-in huddles and meetings) were only effective when participants came with genuine intention to engage. When staff or partner leaders felt that meetings lacked purpose or failed to advance shared goals, their effectiveness declined significantly.

Team building and culture

Staff who expressed the highest confidence in integration efforts emphasized that success depends not only on technical alignment, but also on cultivating a culture of trust, collaboration, and shared purpose. Among the 135 frontline staff interviewed, 80 highlighted team-building activities and positive workplace culture (reinforced through potlucks, staff appreciation events, and cross-program coordination meetings) as effective practices for strengthening integration across programs and teams. South Central established weekly "Fun Fridays" that blend caseload check-ins with team-building activities - creating space for connection across partner organizations while reinforcing collaboration and reducing silos. Staff report this consistent practice has produced deep bonds among staff, reduced siloed behaviors, and fostered an environment where employees report strong belonging and significantly lower turnover than seen in other areas and programs. Many staff in the South Central area have remained in their roles for decades, which is an outcome many attribute to this intentional investment in workplace culture.

Continued research and feedback needs

Interviews revealed persistent challenges with data, intake, referrals, caseloads, and turnover, alongside promising local practices that warrant further study. While the interviews surfaced several promising practices (such as data-sharing, structured onboarding, regular all-staff training, intentional team building, and locally designed referral tools) further study is needed to understand which approaches most effectively improve outcomes for staff and customers and under what conditions. Rather than prescribing solutions at this stage, the findings in this study highlight key areas where continued research, feedback, and testing are essential to inform future recommendations.

Areas for further study

Referral systems and warm handoffs

Several local areas are using referral tools such as Cognito Forms, JotForm, and Workforce Central's 211 Common Referral System to facilitate cross-program connections. Early feedback indicates these tools can improve visibility and follow-through, but their impact on actual customer enrollment and outcomes remains unclear. Further research should examine how these systems perform across different local contexts and whether pairing digital referral tools with warm handoffs or functional team structures strengthens results.

Structured onboarding and cross-training

Intentional onboarding and training practices (supported by desk aids, recorded modules, and peer mentoring) appear to help mitigate turnover and strengthen integration. However, the consistency and sustainability of these practices vary widely across local areas. A focused study could help identify which models are most effective, scalable, and adaptable statewide. This research should also explore how onboarding and cross-training influence staff retention, since turnover emerged as a key barrier to sustaining integration.

Team building and culture

Successful integration depends on both technical alignment and a strong workplace culture grounded in trust and collaboration. Practices like South Central's weekly "Fun Fridays" illustrate how intentional culture-building can improve morale, reduce siloed behavior, and support retention. Future research could help quantify these impacts and identify low-cost, high-impact strategies for replication across regions.

Linking integration to outcomes

Further research is needed to determine whether innovative practices (such as universal referral tools, warm handoffs, and functional teams) improve customer outcomes. The Workforce Board already has access to statewide participant survey data that could be analyzed to assess whether local areas with stronger integration practices receive higher customer satisfaction scores or demonstrate stronger employment and training outcomes.

Opportunities to leverage administrative data towards evaluating integration efforts with program outcomes is also possible, ranging from descriptive statistics of regional performance to more dedicated evaluations to isolate causality. The latter would necessitate greater access to information as well as investment to conduct dedicated research studies. The Workforce Board will explore quantitative analyses using existing resources, and any more extensive evaluation studies will require assessing capacity or requesting additional resources in consultation with the TAP Evaluation workgroup.

Sustaining ongoing feedback loops

Frontline and leadership staff should have regular opportunities to share insights as pilots, data systems, and onboarding tools continue to evolve. Embedding structured feedback mechanisms within TAP implementation will help ensure that integration strategies remain grounded in local realities and informed by those closest to service delivery. In the coming months, the System Integration workgroup will continue efforts to establish and formalize these feedback loops, ensuring that future steps are consistently informed, balanced, and guided by the perspectives of the staff and customers the system is designed to serve.

Next steps and recommendations

The findings in this analysis point toward several areas where continued inquiry and shared learning could most effectively strengthen system integration. Local and state partners may further explore the relationship between integration practices and customer outcomes by:

- Analyzing participant survey data and federal performance measures to assess whether stronger referral systems, onboarding models, or cross-program coordination correspond with improved customer results.
- Testing and documenting the effectiveness of local referral tools, functional team structures, and onboarding approaches in different regional contexts; and
- Examining how caseload intensity, turnover, and staff retention influence service quality and integration outcomes.

As TAP implementation moves forward, the Workforce Board will establish ways for state and local partners to share findings in the context of performance, beginning with federal measures. This work aligns with the TAP Plan’s system integration priorities (advancing universal referral pilots, improving data governance, and expanding shared technology platforms) and is reinforced by the No Wrong Door project’s efforts to modernize data sharing across partners. Together, these initiatives will guide future policies and support the conditions that make integration succeed locally, including shared tools, consistent referral tracking, intentional coordination, and a collaborative culture.

Washington’s workforce system appears to have made progress since the 2018 CAI study. However, persistent fragmentation in data, intake, and referral systems continues to challenge efficiency and customer experience, according to frontline staff feedback. Continued statewide investments, paired with sustained local engagement and shared learning, will be essential to building a workforce system that is cohesive, customer-centered, and responsive to staff, industry and community needs.

Appendices

Interview questions

<u>Front Desk/Wagner-Peyser Staff</u>

Data collection and intake

1. What information do you typically collect during customer intake?
2. Have intake forms or data systems changed significantly since 2018?
3. Are there fields or questions you feel are redundant or confusing across different programs?
4. How often do customers provide incorrect or incomplete information? Do you rely on in-person conversations to clarify?

Referral processes and coordination

5. What does your referral process look like with the following programs?
   - ☐ WorkFirst
   - ☐ BFET
   - ☐ Able-Bodied Adults Without Dependents
   - ☐ Vocational Rehab
   - ☐ Services for the Blind
   - ☐ JVSG
   - ☐ TAA
   - ☐ WIOA Youth
   - ☐ WIOA Adult
   - ☐ WIOA Dislocated Worker
   - ☐ EcSA
   - ☐ MISA
   - ☐ Wagner Peyser
   - ☐ RESEA
   - ☐ Customized Training Program
   - ☐ Unemployment Insurance Training Benefits Program
   - ☐ Job Skills Program and Customized Training Program
   - ☐ Worker Retraining Program
   - ☐ Postsecondary Professional Technical Education
   - ☐ Adult Ed
   - ☐ Apprenticeship
   - ☐ Private Career Schools
   - ☐ Secondary CTE
6. What are the most common programs or agencies you refer customers to?
   - ☐ WorkFirst
   - ☐ BFET
   - ☐ Able-Bodied Adults Without Dependents
   - ☐ Vocational Rehab
   - ☐ Services for the Blind
   - ☐ JVSG
   - ☐ TAA
   - ☐ WIOA Youth
   - ☐ WIOA Adult
   - ☐ WIOA Dislocated Worker
   - ☐ EcSA
   - ☐ MISA
   - ☐ Wagner Peyser
   - ☐ RESEA
   - ☐ Customized Training Program
   - ☐ Unemployment Insurance Training Benefits Program
   - ☐ Job Skills Program and Customized Training Program
   - ☐ Worker Retraining Program
   - ☐ Postsecondary Professional Technical Education
   - ☐ Adult Ed
   - ☐ Apprenticeship
   - ☐ Private Career Schools
   - ☐ Secondary CTE

7. Are there other locally and/or privately funded workforce programs you refer customers to or coordinate case management services within your area?
8. What triggers a referral to an intensive service program?
9. Are there assessments or suitability checks required before referrals?
10. How often do you make and receive referrals? How well do they pan out?
11. How are referrals tracked after they are made?
12. What client or program information, if shared from other program staff (either inside the WorkSource Center or organization located outside the center) would lead to faster service and help improve customer outcomes and/or improve productivity?
13. Do you have any referral forms/processes, enrollment forms/processes, initial intake form/processes or customer ROI forms that you would be willing to provide copies of?

System use and integration

14. Have any tools been introduced to help guide intake or referral decisions?
    - Are there any desk aids that you use to help refer clients to internal or external programs?
        - Do you use any desk aids to help you follow referral processes?
        - Do you have a desk aid that lists possible referral sources and what services other programs offer?
15. Do you use or have access to a shared information system, aside from ETO?
16. Do customers still sign multiple releases of information?

Best practice and opportunities

17. What improvements have you seen (or would like to see) in the WorkSource system?
18. Are you aware of any new initiatives or best practices that support your role?

<u>Intensive services staff (Title IB, BFET, DVR, etc.)</u>

Customer engagement and caseloads

1. What is your average caseload size?
2. What types of populations do you work with the most?
3. What trends do you observe in IEPs (goals, services, timelines)?
4. How long are cases typically active? What triggers an exit besides 90 days of inactivity?
5. Are follow-up contacts made after program exit?

Intake, enrollment and eligibility

6. How much time is typically spent on enrollment and assessments?
7. Has the eligibility determination process changed since 2018? Are tools in place to support more efficient processes?
8. Do you still see situations where customers or students go through a self-guided eligibility process that suggests they might be eligible for a program, but then find out during a deeper conversation with a case manager that they’re not eligible?

9. Do you still find that there's no substitute for the initial interview with customers or students—that it helps them mentally 'sort' needs, catch inaccuracies in forms, and uncover barriers that might not be shared in writing? And if so, is a common intake form still used primarily to help guide that initial conversation?
10. Do you have any referral forms/processes, enrollment forms/processes, initial intake form/processes or customer ROI forms that you would be willing to provide copies of?

Coordination and referrals

8. How do you coordinate with case managers from other programs?
   a) What programs do you coordinate with most often?

- ☐ WorkFirst
- ☐ BFET
- ☐ Able-Bodied Adults Without Dependents
- ☐ Vocational Rehab
- ☐ Services for the Blind
- ☐ JVSG
- ☐ TAA
- ☐ WIOA Youth
- ☐ WIOA Adult
- ☐ WIOA Dislocated Worker
- ☐ EcSA
- ☐ MISA
- ☐ Wagner Peyser
- ☐ RESEA
- ☐ Customized Training Program
- ☐ Unemployment Insurance Training Benefits Program
- ☐ Job Skills Program and Customized Training Program
- ☐ Worker Retraining Program
- ☐ Postsecondary Professional Technical Education
- ☐ Adult Ed
- ☐ Apprenticeship
- ☐ Private Career Schools
- ☐ Secondary CTE

What programs have you never or rarely coordinated with?

- ☐ WorkFirst
- ☐ BFET
- ☐ Able-Bodied Adults Without Dependents
- ☐ Vocational Rehab
- ☐ Services for the Blind
- ☐ JVSG
- ☐ TAA
- ☐ WIOA Youth
- ☐ WIOA Adult
- ☐ WIOA Dislocated Worker
- ☐ EcSA
- ☐ MISA
- ☐ Wagner Peyser
- ☐ RESEA
- ☐ Customized Training Program
- ☐ Unemployment Insurance Training Benefits Program
- ☐ Job Skills Program and Customized Training Program
- ☐ Worker Retraining Program
- ☐ Postsecondary Professional Technical Education
- ☐ Adult Ed
- ☐ Apprenticeship
- ☐ Private Career Schools
- ☐ Secondary CTE

    b) How do you coordinate ongoing case management with case managers from other programs?
        1. For programs inside your WorkSource building/network?
        2. For programs outside your WorkSource building/network?
9. What is your process for referring customers to other federal/state programs? (e.g.Youth, ADW, WorkFirst, BFET, DVR, Adult Education, SBCTC)
10. Are there other locally and/or privately funded workforce programs you refer customers to or get referrals from or coordinate case management services within your area?
11. How do you receive referrals from others, and how well do they work?
12. Have standardized referral practices improved since 2018?

System use and integration

13. Are you using one or multiple systems to track services and outcomes?
14. How well do workforce systems integrate data across programs? This could include programs within the WorkSource center or programs housed outside the center, with private or federal/state funding sources.
15. Are you using any centralized document sharing tools (like a shared eligibility tools)?
16. Are data-sharing/Release of Information policies still a barrier in your work?

Best practice and innovations

17. What best practices have emerged on your site for working across programs?
18. Have any new innovations improved coordination or service delivery?

<u>Leadership staff (Program Leads, OSO, LWDB Staff)</u>

Strategy, policy and governance

1. How aligned are workforce program policies around intake, eligibility, and data sharing today compared to 2018? This could be the workforce broader system (which would include Re-Entry programs, SBCTC, Adult Ed, DVR, DSB) and/or just WorkSource housed programs (like BFET, WorkFirst, Wagner Peyser, ADW/Youth).
2. Are there still conflicts between federal, state, or local program rules that hinder integration?
3. What governance structures are in place to support service integration?
4. Have system-wide data sharing or referral agreements been implemented?
5. What power or role do you have in workforce program WorkSource co-location decisions? For instance, DVR or Adult Ed representatives being present in your WorkSource center?

Integration and system design

6. Is your region using or piloting a common intake or case management system?
7. How well do current platforms support integrated data sharing and referrals?

Coordination and capacity building

8. How are staff oriented to other workforce programs, and on which programs?
9. Are there regular cross-program meetings or staffing opportunities? If so, what programs are

included in those meetings?

10. How do you manage and support staff in achieving performance goals (e.g., federal outcomes, enrollment targets)?

Collaboration and priorities

11. Where could partnerships be expanded or strengthened?
12. What are current priority areas for improving system integration?
13. What are the biggest barriers to integration at the leadership or systems level?

Best practice and innovation

14. What innovations or improvements have emerged since 2018?
15. What promising practices have been most effective in advancing integration?